GENERAL COMMENTS

As in many other communities across Texas, health care is fragmented, with the mind and body being treated separately. The Meadow’s Mental Health Policy Institute (MMHPI) used the guiding principal that care must be integrated from the initial response to a crisis to inpatient and community care. The MMHPI spoke to nearly 200 leaders and community members to assess the mental health needs and the local capacity in the Lubbock area to meet those needs.

Lubbock has many important advantages that allow opportunities to transform its care for people with mental illness.

- One opportunity is the active engagement of key leaders in all sectors across the community, who agree that mental health care must be improved and can build across every system to fundamentally transform mental health care in Lubbock.
- The Meadow’s analysis of the prevalence of mental health needs in the Lubbock area suggests that individuals most in need of intensive mental health services is small enough to be manageable.
- At the same time, Lubbock is a large enough community to contain the necessary infrastructure to address the needs of people with mental health disorders but small enough to enable leaderships across sectors to create and sustain a model system of integrated care in Lubbock, over time.
- Lubbock has attracted many organizations that are self-sufficient and willing to provide services that would not be available otherwise.

Lubbock also has many common challenges - problems of funding, lack of integration, and competition between providers that creates barriers - and critical gaps, these problems are not overwhelming in scope.

Quote: “Although Lubbock faces significant challenges, it has core strengths that many communities simply do not have...there is little to stand in the way of Lubbock creating a model system of integrated care in Lubbock, over time.” Meadow’s Assessment, Executive Summary, pg. iv

PART I: SYSTEM-LEVEL FINDINGS AND RECOMMENDATIONS

Important findings:

- Focus on integration of services and the creation of service capacity to help eliminate the use of jails and emergency departments as the first response to mental illness.
- Integrated care is especially needed in crisis services.
- Many organizations play individual roles that are not integrated. One stakeholder shared with the MMHPI that in the Lubbock area, “We have cooperation, but need coordination.”
- Strong collaborative relationships between major care providers in the community create a foundation for enhancing integrated care and provide the best opportunity for change but often contribute to a fragmented service response.
Lubbock could benefit from expanding inpatient capacity for psychiatric illnesses where complex, comorbid conditions can be assessed and treated. The amount of inpatient beds would depend on the type (children or adult, short- or long-term stay) and location (specialty hospital or general hospital).

Important recommendations:
- Core group of leaders should take on the task of directing change in the Lubbock area mental health system
- Initial areas of focus for the core group should include:
  - Integration of the crisis system
  - Sustained funding for mental health care, especially with potential loss of funding from the Medicaid 1115 waiver program
  - Targeted expansion of community care capacity to divert people from hospitalization (Assertive Community Treatment) and jail (Forensic Assertive Community Treatment) bookings; including step-down services
  - Expansion of inpatient capacity
- The Meadows also recommended the development of issue-specific workgroups.

Progress since report completion:
- Based on the Meadow’s recommendation, the Community Parties that commissioned the Meadow’s Assessment have formed the West Texas Mental Health Collaborative and serve as the Founding Parties, its steering committee.
  - Quote from Meadow’s Assessment (pg 9-10): “The cooperation among leaders is the most critical asset Lubbock has going forward. The test will be to find ways to maintain this cooperation. This challenge informs our recommendation to create a formal governance structure to guide future planning for transforming mental health care in Lubbock.”
  - The Founding Parties include high level officials from the City of Lubbock, Community Foundation of West Texas, Covenant Health, Lubbock County, StarCare Specialty Healthy System, Texas Tech University, and Texas Tech University Health Sciences Center, and University Medical Center.
- The City of Lubbock Health Department has rolled out the LBK Community network for better coordinated community service referrals.
- The Texas Tech Mental Health Initiative will continue to serve as the facilitator of the West Texas Mental Health Collaborative and the Founding Parties. The TTMMHI will work to support and coordinate their efforts across the community and TTU system.

PART II: POPULATION SPECIFIC FINDINGS AND RECOMMENDATIONS – CRIMINAL JUSTICE AND VETERANS

Important findings:

_Criminal Justice involved individuals_

- Leaders in the criminal justice and mental health treatment systems have been innovative and creative in addressing issues arising from the influx of people with mental illnesses into the criminal justice system which can provide an excellent foundation for future improvement.
• Lubbock Police Department has worked to promote the Crisis Intervention Team (CIT) and the Homeless Outreach Team (HOT), but they still need integration.

• Lubbock was designated the first Stepping Up Initiative Innovator County in Texas for the effort to collect and analyze timely data on people in jail who have mental illness, with the hope of better integrative care. There is an active group, Justice Mental Health Collaboration Program, working to recommend improvement to mental health care in the justice system.

• There seems to be a lack of clarity and consensus in the community regarding criteria for access to care and the potential disposition of crisis situations in which a person appears to have a mental illness.

• Like in other communities, there seems to be a lack of continuity of care for people discharged from jail.

Veterans with mental illness

• VetStar has created a model for veterans involved with the criminal justice system that offers grant-funded support services. TTU has created a campus that is fully supportive of the mental health needs of veterans and their families. These initiatives provide a good foundation for expanding services for veterans in the Lubbock area.

• There is a limited number of resources in the Lubbock community that provide veteran-specific mental health services.

• Data collected regarding veteran mental health is inconsistent and impedes understanding of barriers and needs within the community to provide appropriate care to veterans.

Important recommendations:

Criminal Justice involved individuals

• Work for better integration of care and possible use of telehealth to further integrate initial crisis response to care.

• As in other areas evaluated by the MMHPI, there is room for improved and integrated use of data.

• An area of improvement within the justice system would be to seek opportunities to better coordinate the responses of law enforcement and other crisis responders, such as StarCare and emergency medical transport.

• Develop treatment capacity for better transition care when discharged from jail.

• Create consensus on eligibility criteria and integrate crisis response, including a common understanding of the “level of risk” that qualifies for admission when a person is expressing suicide ideation.

Veterans with mental illness

• Build cooperation between veteran-specific mental health services; improve data collection which can improve mental health care provided to veterans by ensuring appropriate- and military-informed care.

• Build partnerships between community organizations and veteran-specific mental health service providers that will allow for greater access to services and better collaboration on veteran’s issues.
• Approaching services for veterans and their families with a better integrated perspective—incorporate military-informed care and military cultural competencies, could strengthen the model developed in Lubbock.

Progress since report competition:
• Development of the Chemical Dependency Intensive Outpatient Program (partnership of Covenant, TTUHSC, TTU).
• Continued inpatient care when appropriate (partnership of StarCare, City of Lubbock, UMC).
• Mental health consultation service for governmental entities (jails) through partnership of TTUHSC and various entities across Texas, in response to recent legislation.

PART III: CHILD, YOUTH, & FAMILY FINDINGS AND RECOMMENDATIONS FOR WORK GROUP ACTION

The Meadow’s Mental Health Policy Institute used the framework for this section of the report that includes five core components for preventing, identifying, and treating pediatric mental health conditions. The components include life in the community, integrated behavioral health in pediatric primary care settings, specialty behavioral health care, rehabilitation and intensive services, and crisis and inpatient services.

• Five components
  o Component 0: Life in the Community (Prevention, education, awareness)
  o Component 1: Integrated Behavioral Health in pediatric primary care (early identification & treatment)
  o Component 2: Specialty Behavioral Health Care (“front door” to get services, stigma, transportation, Substance Use Disorder)
  o Component 3: Rehabilitation and Intensive Services (Evidence-Based Practices, home-, community-based services for severe needs)
  o Component 4: Crisis Care Continuum (urgent stabilization & required inpatient care; re-entry after hospitalization)

• Important findings:
  • Special considerations for children and youth involved in the foster care and juvenile justice systems, and youth and young adults experiencing first episode psychosis.
    o The foster care and juvenile justice systems have reported increased numbers of children and youth with serious emotional disorders who have also suffered serious trauma, high rates of depression, and a reliance on child welfare and juvenile justice systems in lieu of mental health care.
  • Relationships between TTUHSC and various community agencies, using evidence-based practices, are a strength that can be expanded upon. Many of these agencies within the community work to address the social determinants of health and have made provisions to provide preventative services and community education. (Component 0)
  • At the time of the report, there were no integrated pediatric practices in the Lubbock area, but it was identified that there was tremendous potential to create an integrated approach with
mental health resources for pediatricians and other health care professionals serving children and youth. (Component 1)

- There is an excellent foundation for expanding specialty behavioral health care in Lubbock, especially using telemedicine. (Component 2)
- The Youth Empowerment Services (YES) program operated by StarCare is one of the few rehabilitative and intensive services within the Lubbock community. The coordinated efforts of Covenant, TTUHSC, and TTU to create integrated care clinics will offer the Lubbock community intensive care options. (Component 3)
- As in other communities, mental health care in the Lubbock area is often delivered primarily by specialists at the point of crisis. One of the few resources available during the point of crisis in the Lubbock area is the Mobile Crisis Outreach Team (MCOT), operated by StarCare. The coordinated efforts of Covenant, TTUHSC, and TTU to expand inpatient capacity for children and youth will be vital for those seeking crisis care within the Lubbock community, rather than necessary referrals away from home to seek those services. (Component 4).

Important recommendations:
- Significant issues with children and youth involved in foster care and juvenile justice systems can exacerbate emotional disorders. The implementation of a conceptual framework such as Multi-tiered System of Support (MTSS) that includes universal mental health promotion strategies for all children could address some of these challenges.

Progress since report competition:
- Mental health consultation services for pediatricians and other health care professionals serving children and youth are being implemented to improve integrated care through partnerships with TTUHSC and supported by the Texas Children’s Mental Health Care Consortium.
- Children, Youth, and Family mental health programs, including services (partnership of Covenant & YWCA, and other local agencies)
- Development of the first episode psychosis program for young adults through a partnership of StarCare, Texas Tech, and Texas Tech Health Sciences Center.
- Collaborative efforts of TTUHSC, TTU, Covenant, UMC, and StarCare will provide mental health training for health care providers and increase the mental health care workforce and number of specialists in the Lubbock area with support from the Texas Children’s Mental Health Care Consortium.

ADDITIONAL INFORMATION INCLUDED IN REPORT APPENDICES
- List of Key Informants
- Interview Guide Questions
- Qualitative Data Collection Methods
- Hospitalization Utilization and Capacity Data Methodology
- Supplementary Data Tables
- Mental Health Best Practices for Children, Youth, and Families

NEXT STEPS
- Disseminate the Meadow’s Assessment to the Lubbock area community.
• Develop and meet in issue-specific workgroups to make progress in the priority areas identified in the Meadow’s Assessment, as defined by the West Texas Mental Health Collaborative.
  o To get involved with the WTMHC issue-specific workgroups, contact Nancy Trevino (nancy.trevino@ttuhsc.edu or 806-743-1634).
• Continue to build partnerships that can benefit the community by improving mental healthcare in West Texas.