



State Health Services Council Meeting  
Texas Department of State Health Services  
Thursday, March 3, 2005  
1100 W. 49<sup>th</sup> Street  
Austin, Texas 78756  
Moreton Building, Room M-739  
9:00 a.m. – 12:00 p.m.  
Minutes

---

**Chair's Welcome and Introduction of Guests:** Dr. Arredondo called the meeting to order at 9:30 a.m.

**Member's Present:**

Dr. Rudy Arredondo, Ed.D, Council Chair – Lubbock  
Dr. Lewis Foxhall, M.D. - Houston  
Dr. Jeffrey Ross, M.D. - Houston

Ms. Beverly Barron, B.A. - Odessa  
Ms. Glenda Kane – Corpus Christi  
Dr. Jaime Davidson, M.D. - Dallas

**Members Absent:** James Springfield, F.A.C.H.E. – Harlingen

**Registered Guests:** Camille Miller (Texas Institute Health Policy Research); Gayle Love (Texas Medical Association); Tom Valentine (HHSC); Roy Hogan (SPI)

**Approval of Minutes:** The Council voted to approve the minutes from the January 11, 2005 meeting.

**Agenda Item #1: Introduction of Guests:** Ms. Jayne Nussbaum, Director, Center for Consumer and External Affairs, introduced Ms. Gayle Love, Texas Medical Association and Ms. Camille Miller, Texas Institute for Health Policy Research.

**Agenda Item #2: Public Comments:** None

**Agenda Item #3: Commissioner's Report**

- a. **Recent Activities of the Commissioner:** Dr. Sanchez briefed the Council on the status of the appropriations process.
- b. **Commissioner's Overview of DSHS Activities:** Overview of activities was not presented due to time constraints. However, Dr. Sanchez referred Council members to the Commissioner's Report, which provides members with the breadth and scope of DSHS activities.
- c. **Demographic and Health Trends:** Dr. Sanchez provided an overview of Texas demographics and health trends as described in the Council materials. A copy of his presentation can also be found at: [www.dshs.state.tx.us/council/agendas/030305/3c.ppt](http://www.dshs.state.tx.us/council/agendas/030305/3c.ppt). He also discussed the three guiding principles of DSHS: 1) Sound mind/sound body, 2) Prevention first, and 3) Partnerships.

#### **Agenda Item #4: Staff Briefings**

- a. **Legislative Update:** Due to time constraints, this topic was not discussed, but Dr. Sanchez did present this information in the Commissioner's Report.
- b. **Appropriations Update:** Due to time constraints, this topic was not discussed.
- c. **Texas State Strategic Health Partnership:** Ms. Donna Nichols and Ms. Camille Miller briefed the Council on the Texas State Strategic Health Partnership. The Texas State Strategic Health Partnership is made up of public and private organizations that have come together to share responsibility and accountability for creating a healthier Texas. The Partnership was convened in 2002 to identify shared priorities and actions for improving the health of Texans. Ms. Nichols and Ms. Miller highlighted the Partnership's efforts to promote public and private endeavors to better respond to the comprehensive health needs of Texans. Additional information regarding the Partnership can be found at: <http://www.tdh.state.tx.us/sshp/sshp.htm>
- d. **Mental Health and Substance Abuse**
  - i. **National Perspective:** Dr. Lewis Gallant provided an overview of the National Association of State Alcohol and Drug Abuse Directors (NASADAD). NASADAD is a non-profit, membership-based association that was founded in 1971 to serve the Single State Authorities on Substance Abuse. NASADAD has 56 members including 50 states and the District of Columbia and U.S. Territories. Members manage public substance abuse treatment and prevention systems. Dr. Gallant also highlighted NASADAD's policy priorities which include:
    - Strengthening State Substance Abuse Systems and Office of the Single State Authority (SSA)
    - Expanding Access to Prevention and Treatment Services
    - Implementing an Outcome and Performance Measurement Data System
    - Ensuring Clinically Appropriate Care
    - Addressing Policies Related to Co-occurring Populations
  - ii. **State Mental Health Facilities Capacity:** Mr. Vesowate reviewed the bed capacity vs. demand in state hospitals. He also addressed issues related to the admission of forensic patients. Mr. Vesowate stressed the importance of being more proactive in the way we serve the forensic population. His complete presentation can be found in Council materials and at: <http://www.dshs.state.tx.us/council/agendas/030305/4dii.pdf>.
  - iii. **Hospital Closure Feasibility Study:** Mr. Tom Valentine from HHSC provided an overview of Rider 55 feasibility study regarding state hospitals and state school closures and consolidations. He added that the report is in draft form undergoing final edits. He highlighted some of the variables being considered such as travel distance to a facility and debt.
  - iv. **Resilience and Disease Management Report:** Mr. Mike Maples provided a follow up presentation on the Resilience and Disease Management Report (RDM). The RDM initiative is one of the largest initiatives within mental health system. HB 2292 and President's New Freedom Commission provided guidance for its development.

The RDM Initiative was implemented in FY 2004 at four pilot sites: Tarrant County MHMR, Texas Panhandle MHMR (based in Amarillo), Hill Country MHMR (based in Kerrville), and Lubbock Regional MHMR. Preliminary outcome data for both adults and children show that while approximately 10% fewer persons were served, superior outcomes were achieved after the

implementation of RDM when compared to the preceding year.

Year one client level outcome data is available from the pilot sites. Although comparable data is not yet available system wide, interim process measures were also developed to measure progress. Local Mental Health Authorities have exceeded expected performance on two of four process measures and continue to develop expected service intensity within each service package. A copy of the report and the power point presentation can be found in the Council materials and at: [www.dshs.state.tx.us/mhprograms/finalrdmreport.pdf](http://www.dshs.state.tx.us/mhprograms/finalrdmreport.pdf) and [www.dshs.state.tx.us/council/agendas/030305/4div.ppt](http://www.dshs.state.tx.us/council/agendas/030305/4div.ppt)

- v. **Drug Demand Reduction Advisory Committee Report:** Ms. Karen Eells presented a copy of the Drug Demand Reduction Advisory Committee Report (DDRAC). The 77th Texas Legislature created the DDRAC with a mandate to develop and coordinate a statewide strategy to reduce drug demand in Texas. The DDRAC, with input from the public and private sectors, is to:
- Serve as a single source of information for the Governor, the Legislature and the public about issues relating to reducing drug demand, including available prevention programs and services;
  - Develop a statewide strategy to reduce drug demand;
  - Identify lead or contributing agencies or offices to implement the strategy; and
  - Coordinate the implementation of the strategy by those agencies or offices.

In January 2003, the DDRAC developed and presented to the Legislature a statewide strategy to reduce drug demand in Texas. The 2003 DDRAC Report outlined 9 strategic objectives, designed around 4 goals:

- Prevention: stop use before it starts.
- Treatment: heal Texans who are dependent on alcohol and other drugs.
- Enforcement: disrupt the market.
- Integration: create a unified response.

Additional information regarding the Report is available in Council materials and at: <http://www.dshs.state.tx.us/sa/DDRAC205.pdf>

#### **Agenda Item #5: Council Operations**

- a. **Approval of Council By-Laws:** Ms. Cathy Campbell introduced the proposed by-laws to be voted on. She added that the by-laws follow the same pattern as the other HHSC sister agencies have adopted. Minor changes have been made to reflect DSHS references. She reminded the Council that these by-laws could be modified in the future. The Council voted to approve the by-laws, a copy of these can be found in council materials and at: <http://www.dshs.state.tx.us/council/agendas/030305/item5a.pdf>
- b. **Discussion of Council Subject Matter Liaisons**  
Ms. Campbell reviewed the proposed areas in which Council members were encouraged to participate as a subject matter liaison to the Council. Ms. Campbell stressed that the “subject matter liaison” is a work in progress. Dr. Curry added that the Council may request presentations regarding each subject matter to gain a clearer understanding of each area. Dr. Arredondo stated that he would contact each Council member to confirm subject matter liaison assignment.

#### **Agenda Item #6: Consideration of Rules**

**a. Consent Agenda for Rules**

- i. Repeal of Rules Relating to Texas Department of Mental Health and Mental Retardation Rulemaking
- ii. Repeal of Rules Relating to Procedures and Policies of the Texas Board of Health
- iii. Repeal of Rules Relating to Cross Reference in Department of State Health Services Rules to Federal Statutes Governing Health Insurance
- iv. Amendments to Rules Relating to Procedures for Handling Public Information Requests

Council members discussed rules process and requested additional information on the subject areas being proposed in the rules, contained in the consent agenda. Council moved to recommend HHSC approval for publication of rules contained in agenda item 6a.i-iv.

**b. Amendments to Rules Relating to Physician Recruitment in Health Professional Shortage Areas**

Council moved to recommend HHSC approval for publication of amendments of rule listed in agenda item 6b.

**Agenda Item #7: Adjournment** Dr. Arredondo adjourned the Council meeting at 3:10 p.m.

---

Dr. Rudy Arredondo, Chair

---

Date Approved by Council