



# **Mental Health Program for Veterans**

**As Required By**

**Texas Health and Safety Code, Chapter 1001, Subchapter I  
and the 2016-17 General Appropriations Act, H.B. 1, 84<sup>th</sup>  
Legislature, Regular Session, 2015  
(Article II, Department of State Health Services, Rider 62).**



**Department of State Health Services  
April 2016**



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## Table of Contents

<b>Executive Summary .....</b>	<b>2</b>
<b>Introduction.....</b>	<b>3</b>
<b>Background .....</b>	<b>4</b>
<b>Description of Program Services and Operations .....</b>	<b>4</b>
<b>Table 1: Number of Veterans Served by Program Services in Fiscal Year 2015 .....</b>	<b>6</b>
<b>Table 2: Number of Peers Trained in Fiscal Year 2015.....</b>	<b>7</b>
<b>The Veterans Mental Health Grants Program .....</b>	<b>8</b>
<b>Evaluation of Program Services Provided .....</b>	<b>9</b>
<b>Recommendations.....</b>	<b>11</b>

## Executive Summary

The 2016-17 General Appropriations Act, H.B. 1, 84<sup>th</sup> Legislature, Regular Session, 2015 (Article II, Department of State Health Services, Rider 62) appropriated \$5 million each fiscal year of the biennium to provide specific services to veterans through the mental health program. H.B. 2392, 83<sup>rd</sup> Legislature, Regular Session, 2013, outlined specific requirements for DSHS related to the development of a mental health program for veterans, and H.B. 19, 84<sup>th</sup> Legislature, Regular Session, 2015, directed the Texas Veterans Commission (TVC) and DSHS to coordinate to administer the program. S.B. 1304 and S.B. 1305, 84<sup>th</sup> Legislature, Regular Session, 2015, respectively directed DSHS to implement women veterans and a rural veterans initiatives as part of the program.

In fiscal year 2015, DSHS and the Texas Veteran's Commission (TVC) funded and administered a Veterans Mental Health Grants Program that awarded a total of \$1.2 million to 11 local and regional mental health projects. DSHS contributed \$511,000.

DSHS Mental Health Program for Veterans trained a total of 1,018 individuals in peer-to-peer counseling skills that were used to serve 48,461 veterans and family members. A peer is defined as an individual who self-identifies as a veteran or a family member of a veteran.

Appropriated funds were used to employ, train, and provide technical assistance for peer service coordinators and peers who provide:

- One-on-one support;
- Facilitation of support groups;
- Mentor services for justice-involved peers;
- Guidance in exploring treatment options; and
- Aid in navigating eligibility for, and access to, services.

Recommendations for fiscal year 2016 program enhancements include the following:

- Work with LMHAs to identify a method to standardize screening the military status of individuals seeking mental health services as a regular part of intake or assessment among all LMHA providers.
- Develop a comprehensive and routine data collection and reporting system that provides quarterly data on program activities and outcomes.
- Create regular forums for peer services coordinators to share best practices and collaborate on program development.
- Collaborate with TVC to develop a marketing plan for the Mental Health Program for Veterans.
- Increase awareness of the priority population diagnoses such as PTSD, schizoaffective disorders, anxiety disorders, and delusional disorders in addition to schizophrenia, bi-polar disorders, and major depression, particularly, as it applies to veterans.

## **Introduction**

The 2016-17 General Appropriations Act, H.B. 1, 84<sup>th</sup> Legislature, Regular Session, 2015 (Article II, Department of State Health Services, Rider 62) appropriated \$5 million each fiscal year of the biennium to provide specific services to veterans through the mental health program. The Mental Health Program for Veterans is jointly administered by DSHS through contracts with The Texas Veterans Commission (TVC) and Texas A&M University Health Science Center. This program began in 2013, in accordance with H.B. 2392, 83<sup>rd</sup> Legislature, Regular Session, 2013 (Health and Safety Code, Chapter 1001, Subchapter I).

The Mental Health Program for Veterans includes the provision of peer-to-peer counseling; access to licensed mental health professionals; jail diversion services; and peer training. Additionally, the program includes the ability to make grants in support of regional and local organizations to fund mental health projects that serve veterans and family members across the state.

H.B. 19, 84<sup>th</sup> Legislature, Regular Session, 2015, codifies the collaboration between DSHS and TVC to train peers who connect veterans and their families to resources. DSHS and TVC are required to coordinate to administer the mental health program for veterans, and to include an initiative to encourage local communities to conduct cross-sector collaboration to synchronize locally accessible resources available for veterans and service members.

S.B. 1304 and S.B. 1305, 84<sup>th</sup> Legislature, Regular Session, 2015, respectively directed DSHS to implement women and rural veteran initiatives as part of the program. Both initiatives will be incorporated into existing programs to ensure provision of peer-to-peer counseling; enhance access to licensed mental health professionals for peer service coordinators and peers; increase training and technical assistance for peers; and expand veteran jail diversion services to these specific veteran populations.

DSHS is required to submit an annual report to the Legislature and the Governor's Office that describes the activities of the program in the preceding fiscal year. This report includes a description of fiscal year 2015 program operations, number of veterans served, number of peers and volunteer coordinators trained, a summary of contracts issued and services provided through the contracts, an evaluation of services, and recommendations for program improvements.

## **Background**

Texas is home to nearly 1.7 million veterans<sup>1</sup>, second only to California.<sup>2</sup> Many veterans entered service in Texas or were discharged from active-duty here, and remain in Texas because of a military friendly culture and the support they find from peers.

Every individual in Texas, including veterans, has access to mental health services including an accredited crisis hotline and mobile crisis outreach services through the Local Mental Health Authority (LMHA) in their community. Additionally, all LMHAs are contractually required to support jail diversion activities. Beginning in 2009, DSHS initially developed a mental health program for veterans to provide peer-to-peer counseling and implemented the Mental Health Program for Veterans.<sup>3</sup> The Texas Legislature has built upon this foundation through a variety of legislative actions including legislation from the 84<sup>th</sup> Legislature.

## **Description of Program Services and Operations**

DSHS contracts with TVC and 34 LHMA<sup>4</sup>s to operate the Mental Health Program for Veterans. LMHAs are required to hire at least one fulltime peer service coordinator, who is a veteran or family member, to provide peer-to-peer counseling, coordinate jail diversion in veterans courts, and provide training to peers and non-peers.

TVC provides technical assistance for the following activities: recruit, train, and guide peer service coordinators; support or provide for peers and community partners; and implement programs for DSHS-Texas Department of Criminal Justice (TDCJ) initiatives. Additionally, DSHS collaborates with TVC through an Interagency Cooperation Contract (ICC) to operate the Veterans Mental Health Grants Program for local and regional mental health projects serving veterans and families. These initiatives are supported and promoted by a web-based veteran-specific resource directory ([texvet.org](http://texvet.org)) maintained by Texas A&M University Health Science

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<sup>1</sup> Department of Veterans Affairs. Veteran Population Projection Model – VetPop2014. Office of the Assistant Secretary for Policy and Planning, Office of the Actuary. [http://www.va.gov/vetdata/docs/Demographics/New\\_Vetpop\\_Model/VetPop2014Document.pdf](http://www.va.gov/vetdata/docs/Demographics/New_Vetpop_Model/VetPop2014Document.pdf). Published September 2015. Accessed January 22 2016.

<sup>2</sup> United States Census Bureau. Texas 2014 data. <http://quickfacts.census.gov/qfd/states/48000.html>. United States Census Bureau. Accessed October 20, 2015.

<sup>3</sup> S.B. 1325, 81<sup>st</sup> Legislature, Regular Session, 2009 was enacted September 1, 2009, which was repealed and replaced by H.B. 2392, 83<sup>th</sup> Legislature, Regular Session, 2015.

<sup>4</sup> Abilene Regional MHMR Center, Anderson Cherokee Community Enrichment Services (Access), Andrews Center, Austin MHMR Center, dba Austin Travis County Integral Care, Center for Health Care Services, The Bluebonnet Trails Community MHMR Center, Border Region MHMR Community Center, Burke Center Camino Real Community MHMR Center, Central Counties Center for MHMR Services, Central Plains Center, Center for Life Resources, Coastal Plains Community MHMR Center, Denton County MHMR Center, El Paso MHMR dba Emergence Health Network, Gulf Bend MHMR Center, Heart of Texas Region MHMR Center, Helen Farabee Centers, Hill Country Community MHMR, Lubbock Regional MHMR Center DbA StarCare Specialty Health, MHMR Authority of Brazos Valley, MHMR Authority of Harris County, MHMR of Tarrant County, MHMR Services for the Concho Valley, Nueces County MHMR Community Center, Pecan Valley MHMR, Permian Basin Community Centers for MHMR, Community Healthcore, Spindletop MHMR Services dba Spindletop Center, The Gulf Coast Center, Tri-County MHMR Services, Tropical Texas Behavioral Health, Texas Panhandle MHMR, West Texas Centers for MHMR.

Center. The directory is continuously updated to assist peers, providers, coordinators, counselors, and the public to help veterans and families.

DSHS and its contractors work to coordinate services provided by the federal Veterans Health Administration (VHA) in order to avoid duplication of services for those eligible for VHA services, as well as, to assist veterans to become enrolled with VHA when appropriate.

### **Peer-to-Peer Counseling**

Peer service coordinators recruit, train, and oversee the activities of trained peers who provide services to fellow veterans and their family members in their communities. Services are delivered through service organizations, schools, faith-based groups, or at their places of work. Peer-to-peer services include one-one-one counseling and structured support groups. Trained peers may also serve as court mentors, as well as provide resource navigation services. In fiscal year 2015, 48,461 veterans and family members were served by trained peers.

Peer service coordinators and trained peers participate in the Military Veteran Peer Network (MVPN). The MVPN is a statewide mental health outreach and suicide prevention network of trained peers and community providers who help veterans and their families adjust to their war injuries. This network was developed by DSHS in 2012; in 2014 it became a division of TVC. Through the MVPN, members are able to connect veterans with local resources, supports, and peer support services. Additionally, the MVPN connects peer trainers with those interested in training.

### **Access to Licensed Mental Health Professionals**

DSHS enhances access to licensed mental health professionals for veterans through an interagency coordination contract with TVC. TVC subcontracts with Samaritan Center for Counseling and Pastoral Care to employ licensed mental health counselors (called field clinicians) in each of the following areas: Austin, Dallas, Killeen, San Antonio, and Waco. As of September 1, 2015, there were five full-time field clinicians able to be deployed as needed around the state. These field clinicians provide short-term professional counseling services to peers, coordinators, veterans, and family members.

By recruiting and training their colleagues, field clinicians also increase veterans' access to mental health professionals skilled in military informed care. Through the Texas A&M University Health Science Center contract, DSHS further enhances access by maintaining a database of professionals skilled in military informed care. As of November 16, 2015, there were 282 military informed care providers listed in the database.

### **Jail Diversion Services**

The DSHS-TDCJ Jail Diversion program consists of TDCJ trained peer support coordinators who provide peer support services to veterans in state prisons, access to a Justice Involved

Veterans Coordinator who assists LMHAs, courts,<sup>5</sup> and providers to help incarcerated veterans to access the peer support network and other resources upon release. In fiscal year 2015, TDCJ-trained peers served 176 veterans.

DSHS and TDCJ implemented a veteran dorm project for veterans who were nearing release from the prison in Austin.<sup>6</sup> During fiscal year 2015, 49 veterans participated in the program and were housed in a separate dormitory. The program encourages focused self-help and provides peer support, life skills training, and assistance accessing community resources to minimize risk for recidivism. In fiscal year 2015, a separate veteran initiative, with similar objectives, was launched at the prison in Gatesville.

**Table 1: Number of Veterans Served by Program Services in Fiscal Year 2015<sup>7</sup>**

<b>Program Services</b>	<b>Numbers Served</b>
Peer-to-Peer Counseling	48,058
Counseling by Licensed Mental Health Professionals	178
Jail Diversion Services	225
<b>Total</b>	<b>48,461</b>

**Note:** Number served includes self-reported data. Jail Diversion Services include 176 veterans served by trained peers in jail diversion program and an additional 49 incarcerated veterans who participated in the veteran’s dorm project, a jail diversion initiative.

**Peer Training**

TVC and DSHS administer a training program through which the 34 LMHAs train individuals in peer support skills. TVC trains the peer service coordinators as trainers. The coordinators train peers using the MVPN Basic Training curriculum developed by TVC.<sup>8</sup>

In fiscal year 2015, TVC staff conducted 90 site visits, 2 statewide training events for coordinators, and 18 web-based training and technical assistance events for peer service coordinators and LMHA staff. TVC reported that this resulted in enhanced access to community-based services, peer recruiting, and increased the number of peers providing services.

<sup>5</sup> In fiscal year 2015, trained peers provided services to veteran treatment courts in Austin, Conroe, Corpus Christi, Dallas, Denton, Edinburg, El Paso (2), Fort Worth, Galveston, Georgetown, Harlingen, Houston (2), Laredo (2), Midland, San Antonio, San Marcos, Seguin and Tyler.

<sup>6</sup> In Austin, the dorm project is at Travis County State Jail. Inmates are sentenced for up to 2 years then released without parole. In Gatesville, the dorm project is at the Hughes Unit where inmates are considered a part of the correction institutional division and paroled with community support (including, but not limited to, an assigned parole officer).

<sup>7</sup> Texas Veterans Commission, August 31, 2015

<sup>8</sup> The MVPN Basic Training includes two 4-hour interactive modules that focus on mental health risk factors and accessing resources.

TVC facilitates three additional training initiatives with specific DSHS-approved curriculums designed for peer-to-peer group facilitators, peers serving as mentors in veteran treatment court programs, and facilitators of a women’s veteran peer support group. The following are descriptions of each curriculum:

- The Bring Everyone in the Zone (BEITZ) curriculum, developed by the BEITZ organization, is a 40-hour course designed for peers who facilitate peer-to-peer discussion groups. The training includes information about the effects of military traumas (including post-traumatic stress, military sexual trauma, and traumatic brain injuries) and positive tactics for addressing symptoms.
- The Veteran Court Advocacy Mentor Program (VCAMP) is a 32-hour course designed by Mental Health America – Houston. The course teaches peers to serve as mentors in veteran treatment court programs. This curriculum is derived from the Veteran Boot Camp training program developed by the National Association of Drug Court Professionals.
- Table Talk™: Color Me Camo is a weekly peer support group specifically for women veterans. Designed by Grace After Fire, group discussions cover topics such as self-esteem, financial planning, and community involvement.

There were a total number of 608 peers trained in fiscal year 2015. Table 2 identifies peers trained in each of the TVC training initiatives.

**Table 2: Number of Peers Trained in Fiscal Year 2015<sup>9</sup>**

<b>Curriculum</b>	<b>Number Trained</b>
MVPN Basic Training	326
Bring Everyone in the Zone	74
Veteran Court Advocacy Mentor	35
Table Talk™: Color Me Camo	173
<b>Total</b>	<b>608</b>

### **Training for Non-Peers**

In order to increase provider competencies, non-peers were also encouraged to attend trainings offered by the LMHAs and MVPN trainers. Non-peers include, but are not limited to, educators, financial counselors, and criminal justice professionals. Additionally, the field clinicians, contracted by TVC, recruit, screen, and train community-based licensed mental health and

<sup>9</sup> Texas Veterans Commission, August 31, 2015

medical professionals. During fiscal year 2015, a total of 510 non-peers were trained in MVPN Basic Training, Mental Health First Aid, military informed care, and suicide awareness.<sup>10, 11</sup>

### **The Veterans Mental Health Grants Program**

The Veterans Mental Health Grants Program is administered by TVC. The program is funded by DSHS and the Texas Lottery Scratch tickets, which support the TVC's Fund for Veterans' Assistance. This fund awards grants to local government agencies and non-profit organizations to address the needs of veterans and their families in local communities. During the initial grant period, the Veterans Mental Health Grant awards totaled \$1,550,000, and were shared by 11 local and regional mental health projects.<sup>12,13</sup> At the end of the 12-month grant period, the awardees had served a total of 4,964 veterans and their families.<sup>14</sup>

During fiscal year 2015, the Mental Health Veterans Grants Program awarded a total of \$1,225,000 that was shared by 11 local and regional mental health projects.<sup>15,16,17,18</sup> Based on the projections of the grant awardees, a total of 1,418 veterans are expected to be served. The following are brief descriptions of the awards and services to be provided from July 1, 2015 to June 30, 2016:

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<sup>10</sup> Mental Health First Aid training is an 8-hour course designed to teach individuals to understand the risk factors and warning signs of a mental health condition and additional concerns, strategies for how to help someone in both crisis and non-crisis situations, and where to turn for help. It is managed, operated, and disseminated by the National Council for Behavioral Health, Maryland Department of Health and Mental Hygiene and the Missouri Department of Mental Health.

<sup>11</sup> There are many different Military Informed Care (sometimes referred to as Military Cultural Competency) curricula currently utilized. In general, these trainings are designed to train non-veteran peer and professional counselors about military basics (from enlistment to discharge); issues service members, veterans, and their families face upon discharge; and provide some service and organizational techniques to assist them.

<sup>12</sup> The grant contract period for the Veterans Mental Health Grants Program does not align with the state fiscal year. The initial grant period is from July 1, 2014 to June 30, 2015.

<sup>13</sup> Texas Veterans Commission. Fund for Veterans Assistance, Grants Awarded. Texas Veterans Commission. <http://www.tvc.state.tx.us/Grants-Awarded.aspx>. Updated January and July of each year. Accessed October 27 2015.

<sup>14</sup> Texas Veterans Commission, Fund for Veterans Assistance, Available at: <http://www.tvc.state.tx.us/Fund-for-Veterans-Assistance.aspx>, Accessed October 27 2015.

<sup>15</sup> The current grant period is from July 1, 2015 to June 30 2016.

<sup>16</sup> Texas Veterans Commission, Fund for Veterans Assistance, Available at: <http://www.tvc.state.tx.us/Fund-for-Veterans-Assistance.aspx>, Accessed October 27 2015.

<sup>17</sup> Counties served by programs awarded in fiscal year 2015: 1) Archer, Baylor, Clay, Cooke, Foard, Hardeman, Montague, Tarrant, Wichita, Wilbarger, and Young; 2) Bastrop, Bell, Burnet, Caldwell, Fayette, Hays, Lee, Travis, and Williamson; 3) Armstrong, Bailey, Briscoe, Carson, Castro, Childress, Collingsworth, Dallam, Deaf Smith, Donley, Floyd, Gray, Hale, Hall, Hansford, Hartley, Hemphill, Hutchinson, Lamb, Lipscomb, Moore, Motley, Ochiltrie, Oldham, Parmer, Potter, Randall, Roberts, Sherman, Swisher, and Wheeler; 4) Bexar; 5) Bosque, Falls, Freestone, Hill, Limestone, and McLennan; 6) Dallas, Ellis, Johnson, and Tarrant; 7) Bastrop, Bell, Blanco, Burnet, Caldwell, Coryell, Hays, Lampasas, Lee, Llano, McLennan, Milam, San Saba, Travis, and Williamson; 8) Collin, Dallas, Denton, Ellis, Johnson, and Tarrant; 9) Atascosa, Bandera, Bexar, Comal, Kendall, Kerr, and Medina; 10) Harris; 11) Currently in Bexar County but any Texas Veteran may be eligible

<sup>18</sup> Funding expenditures (\$1,191,261) was used to support the following initiatives: increasing peer-to-peer counseling services, increasing access to licensed mental health professionals, training and technical assistance for Peer Service Coordinators and peers, recruitment, retention, and screening of community-based therapists, suicide prevention training for Peer Service Coordinators and peers, veteran jail diversion services, evaluation of the Mental Health Program for Veterans, and to award grants for the provision of mental health veterans services.

1. Catholic Charities – Fort Worth: The entity was awarded \$75,000 to provide counseling services to a projected 90 service members, veterans, and family members.
2. Equine Rehabilitation – Central Texas: The agency was awarded \$75,000 to provide equine-based transition services to at least 96 veterans and family members in Central Texas.
3. Family Support Services of Amarillo: The entity was awarded \$150,000 to serve a projected 470 service members, veterans, and family members from 31 counties in the Texas Panhandle through its Armed Services Supportive Interventions, Skills, and Trainings Project. This project includes sustaining and expanding a peer networking center where peers can meet and access counseling services.
4. Grace After Fire: This entity was awarded \$125,000 to serve 135 women veterans and family members by providing the following trainings and support: *Table Talk*™ and the *Color Me Camo Program*.
5. Heart of Texas Region MHMR Center: This entity was awarded \$150,000 to serve 60 veterans and family members and to expand offerings at the peer networking center in Waco.
6. Paws for Reflection Horse Ranch: This agency was awarded \$75,000 to provide equine therapy to 100 veterans and family members through its Boots of Honor program.
7. Ride On Center for Kids: This organization was awarded \$75,000 to serve 105 veterans and family members through its Healing Thru Horses: Rebuilding Trust Program.
8. Recovery Resource Council: This entity was awarded \$150,000 to serve 45 clients through its Enduring Families Program.
9. Triple-H Equitherapy: This entity was awarded \$75,000 to serve 60 veterans and family members through its Horse Power Project.
10. United States Veterans Initiative: The residential treatment organization was awarded \$200,000 to serve 100 homeless veterans with housing, and 24/7 access to mental health services.
11. Veterans' Team Response Integrative Immersion Process: This organization was awarded \$75,000 to provide military trauma related services to a projected 157 veterans and family members.

### **Evaluation of Program Services Provided**

In collaboration with TVC, DSHS ongoing program evaluation activities contributed to this evaluation. Additionally, DSHS contracted with the Texas Institute for Excellence in Mental Health (TIEMH) to describe and evaluate services to veterans and their families. Based on resources available, DSHS has chosen to highlight the following evaluation results and prioritize the following recommendations.<sup>19</sup>

### **Enhance Data Collection**

DSHS collects a number of program activity-related data elements, which includes: numbers served; numbers referred to various types of services; and whether referrals were positive, negative or unknown. However, across the state, LMHAs are not currently screening for military

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<sup>19</sup> Borah E, Daggett P, Adler E., Banister J, MacDonald A, Manser S. Assessment of Texas Veterans Mental Health Program. Texas Institute for Excellence in Mental Health, Center for Social Work Research, University of Texas at Austin. Unpublished Report: August 31 2015.

service as a standardized practice, which is the first step toward greater understanding of the need. DSHS is interested in making the necessary improvements in data collection that ultimately lead to achieving the long term goal of collecting and reporting individualized outcome measures.

### **Connect Peer Support Coordinators**

Peer support is an evidence-based practice that continues to be beneficial for both peers who give support as well as for peers who receive support. The peer relationship is mutually beneficial in part because it reinforces the progress and recovery that both peers seek. Support from a peer who has learned to adapt to symptoms provides a stabilizing social connection for his fellow peer. The peer who provides the stabilizing connection can also benefit from this interaction. He typically will see that sharing his experience increases his sense of self-knowledge and self-worth.<sup>20</sup> However, given the vast geographic area of Texas, peer service coordinators could benefit from the creation of regular online forums focused on specific regions around the state to share best practices, collaborate on program development, and provide mutual support.

### **Expand Advertising and Marketing**

Access to information about veteran services through the texvet.org database and the MVPN website increases awareness of veteran-specific services and supports. Greater awareness from providers and community stakeholders increases the likelihood that veterans and their families will be able to access services and to advocate for service enhancements for themselves and for their peers. Peer service coordinators expressed an interest in more local- and state-level program marketing and advertising, including upgrades to the MVPN website, to improve veteran's awareness and access to the program.

### **Increase Awareness of LMHA Priority Population**

In addition to the peer service coordinators, TIEMH surveyed representatives from other groups of providers<sup>21</sup> who were not aware that the priority population includes diagnoses beyond the three target diagnosis (Schizophrenia, Bipolar Disorder, and Major Depression).<sup>22</sup> This includes diagnoses such as post-traumatic stress disorder (PTSD), anxiety disorder, and delusional disorders. DSHS is interested in increasing awareness of the eligible diagnoses as it applies to veterans.

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<sup>20</sup> Miyamoto Y, Sono T. Lessons from Peer Support Among Individuals with Mental Health Difficulties: A Review of the Literature. *Clinical Practice & Epidemiology in Mental Health*, 2012;8,22-29. 1745-0179/12 2012.

<sup>21</sup> TIEMH interviewed DSHS funded peer service coordinators, MVPN members, community therapists (trained in Cognitive Processing Therapy by DSHS), Local Mental Health Authority (LMHA) Jail Diversion Liaisons (JDLs), Veterans Court Coordinators (VCCs), Veterans Justice Outreach Specialists (VJOs), and Veterans County Service Officers (VCSOs).

<sup>22</sup> Texas prioritizes services to adults with diagnoses such as schizophrenia, bipolar disorder, major depression, post-traumatic stress disorder, schizoaffective disorder, obsessive-compulsive disorder, anxiety disorder, attention deficit disorder, delusional disorder, and eating disorders who are experiencing significant functional impairment due to a mental health disorder that requires crisis resolution or ongoing, long-term support and treatment. Texas prioritizes services to children ages 3 through 17 with serious emotional disturbance (excluding a single diagnosis or substance use disorder, intellectual or developmental disability, or autism spectrum disorder) who have a serious functional impairment or who: 1) are at risk of disruption of a preferred living or child care environment due to psychiatric symptoms, or 2) are enrolled in special education because of serious emotional disturbance. [Texas Health and Safety Code, Section 533.0354.](#)

## **Recommendations**

DSHS has identified several actions that could enhance program services in fiscal year 2016. These recommendations include:

- Work with LMHAs to identify a method to standardize screening the military status of individuals seeking mental health services as a regular part of intake or assessment among all LMHA providers.
- Develop a comprehensive and routine data collection and reporting system that provides quarterly data on program activities and outcomes.
- Create regular forums for peer services coordinators to share best practices and collaborate on program development.
- Collaborate with TVC to develop a marketing plan for the Mental Health Program for Veterans.
- Increase awareness of the priority population diagnoses such as PTSD, schizoaffective disorders, anxiety disorders, and delusional disorders in addition to schizophrenia, bi-polar disorders, and major depression, particularly, as it applies to veterans.

