



Meeting Notes

November 12, 2024

8:30 a.m. - 10:00 a.m.

Paso del Norte Health Foundation

221 N. Kansas, 19th Floor

El Paso, Texas 79901

Meeting Room C

Attendees:

Jose Alamillo
Melissa Acosta
Linda Corchado
Sharon Butterworth
Sandra Day
Cathy Gaytan
Gilda Gil
Dr. Carmen Olivas-Graham
Daniely Gutierrez
Cindy Hernandez
Josue Lachica
Vanessa Leon
Ron Long
Victoria Lopez-Unzueta
Enrique Mata
Ivonne Marquez
Laura Marquez
Rosie Medina
Doris Ogribene
Andrea Ríos
Rhonda Russ
Nicole Schiff
Dr. Emily Steussy
Ivonne Tapia
Wes Temple
Kathie Valencia

Representing:

El Paso Center for Children
NAMI El Paso
Children At Risk
Paso del Norte Center at Meadows Institute
Paso del Norte Health Foundation
El Paso Child Guidance Center
Paso del Norte Children's Development Center
Socorro Independent School District/EPCC
Region 19 ESC
Emergence Health Network
Paso del Norte Center at Meadows Institute
Heart Gallery of El Paso
Strong Families Family Advisory Council
United Way of El Paso
Paso del Norte Center at Meadows Institute
City of El Paso Department of Public Health
Paso del Norte Children's Development Center
El Paso County Juvenile Probation Chief
El Paso Independent School District
El Paso Child Guidance Center
Emergence Health Network
Paso del Norte Center of Hope
El Paso Independent School District
Aliviane Inc./Chair Family Leadership Council
Region 19 ESC
El Paso Center for Children

Welcome and Introductions

Ivonne Tapia convened the meeting at 8:35 a.m. and called for introductions.

Juvenile Justice Transformation – Rosie Medina, Chief of Juvenile Probation, provided a detailed presentation on progress made by the County Juvenile Justice Center on key priorities identified during the October 2023 Youth Sequential Intercept Model strategic planning event. She responded to questions from the group. Presentation slides are included with these notes.

Strong Families – Kathie Valencia MS MA, Chief Program Officer for El Paso Center for Children and Ronsoni Long, Chair of the Strong Families Family Advisory Committee provided a presentation on the recruiting efforts of the Family Advisory Council. They also shared programming available with a focus on fathers. The **Fatherhood EFFECTS program** and the **FAC Parent/Youth Voice** effort will help strengthen communication among family members on the five protective factors. Ms. Valencia and Mr. Long responded to questions from the group. Presentation slides are included with these notes.

First Connection – Ms. Laura Marquez was recognized for her willingness to take a lead role as Vice Chair of the First Connection work group. She provided a summary along with Enrique Mata on the last First Connection Meeting. Ms. Marquez then provided a presentation on the Help Me Grow LEND project to educate graduate level professionals on IDD Conditions including Autism Spectrum conditions. Ms. Marquez responded to questions from the group. Presentation slides are included with these notes.

Specialty Care – Ms. Nicole Schiff was recognized for her willingness to take a lead role as Chair of the Specialty Care work group. She provided a summary of the discussion at the last meeting and the focus on a priority gap that the group will be taking on to address for the community. Development of a hybrid **Respite and Residential Treatment option** that could be sustained using braided funding from multiple sources and would complement the existing child serving programs in the community but also preventing youth from being sent out of the region for care and separating from family and other supports in the community. Members of the group responded that this has been one of the most challenging community needs to address, but it does appear that support to explore options such as the [Uvalde respite model](#) (page 85). Meeting notes from the last Specialty Care work group meeting are included with these notes.

Other Business – The group discussed the upcoming Consortium General Meeting on December 6th. All are welcome to attend. An E-Vite is circulating via email.

Adjourn – Ivonne Tapia Adjourned the meeting at 10:11 am



OUR VISION ... THEIR DESTINY

Transforming Juvenile Probation

El Paso County Juvenile Justice Center

6400 Delta Drive | El Paso, TX 79905 | (915) 273-3491





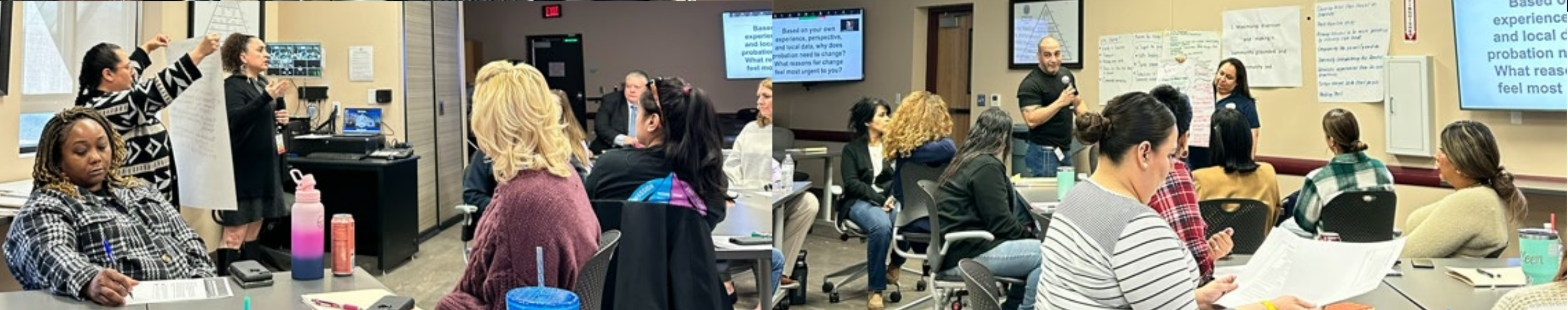
OUR VISION ... THEIR DESTINY



THE ANNIE E. CASEY
FOUNDATION

TRANSFORMING JUVENILE JUSTICE (TJJ) INITIATIVE TIMELINE





TJP Workshops AECF Modules 1-4

Principles of Transforming Juvenile Justice (TJJ)



OUR VISION ... THEIR DESTINY

- Maximizing diversion & making it community grounded & community led
- Focusing probation on young people with serious offense histories & making it a time-limited, relationship-based intervention that fosters community connections & opportunities that support long-term behavior change
- Handling more serious cases through probation rather than out-of-home placement, thus minimizing placements in all forms
- Leading with race by insisting on initial, primary, & continuing focus on achieving equity for youth of color; & grounding all TJP concepts in meaningful community partnerships that include young people & families affected by the legal system.



OBP Pilot Program

Began 2025 – 22 youth in pilot



OUR VISION ... THEIR DESTINY

· **Family Support:** Our probation officers are committed to working with the family to set achievable goals and overcome challenges together.

· **Strengths-Based Approach:** We focus on what makes each family strong. We can help you achieve your goals and create positive change by recognizing and building on your strengths.

· **Fun and Rewards:** We believe in celebrating success! incentives and rewards are earned for progress and positive behavior changes.

· **Connecting to Opportunities:** We'll help the family connect with exciting opportunities for growth, including education, employment, and community resources.

· **Empowerment:** Our goal is to empower each family to succeed. Together, we'll build confidence and skills to overcome obstacles and create a brighter future.



Home Detention Program Redesign/Rebranding

Since February 2024, a collaborative workgroup of probation officers & field compliance officers have been working on a new DRAFT redesign/rebranding of this program making it more **client-centered & strength-based**, incorporating **positive youth development & family empowerment** while promoting safety in the community.

Home detention is currently the most restrictive program in the Department. It has traditionally been viewed as "detention in the home" and includes daily home visits for youth in Level 1 of the program only allowing youth to leave the home for court-ordered activities (school, counseling, community service, etc.). Probation officers must submit memos to the court for every violation of the home detention conditions/rules. Despite the restrictiveness of the program, most youth on home detention are pre-adjudicated & have not been found delinquent of what they have been accused of doing. Many youth are also low/moderate risk to the community. It makes our system upside down as it is the most restrictive program at the front of the system.



TJJ GOALS



OUR VISION ... THEIR DESTINY

1
DIVERT YOUTH FROM SYSTEM



2
IMPROVE COURT ORDERS



3
ENGAGE COMMUNITY RESOURCES



4
IMPROVE FACILITY CARE



Diversion and Prevention



OUR VISION ... THEIR DESTINY

Goal: Enhance diversion and prevention services to increase the number of youths diverted.

- Structured Decision Making: Administering of a validated risk assessment and family interview at the initial Intake Appointment to guide diversion decisions.
- Sequential Intercept Model Mapping (SIM) event: working with the Paso del Norte Health Foundation and the Meadows Policy Institute on mapping different diversion points through cross-systems collaboration. This meeting resulted in a working collaboration with SISD on developing a first offender program.

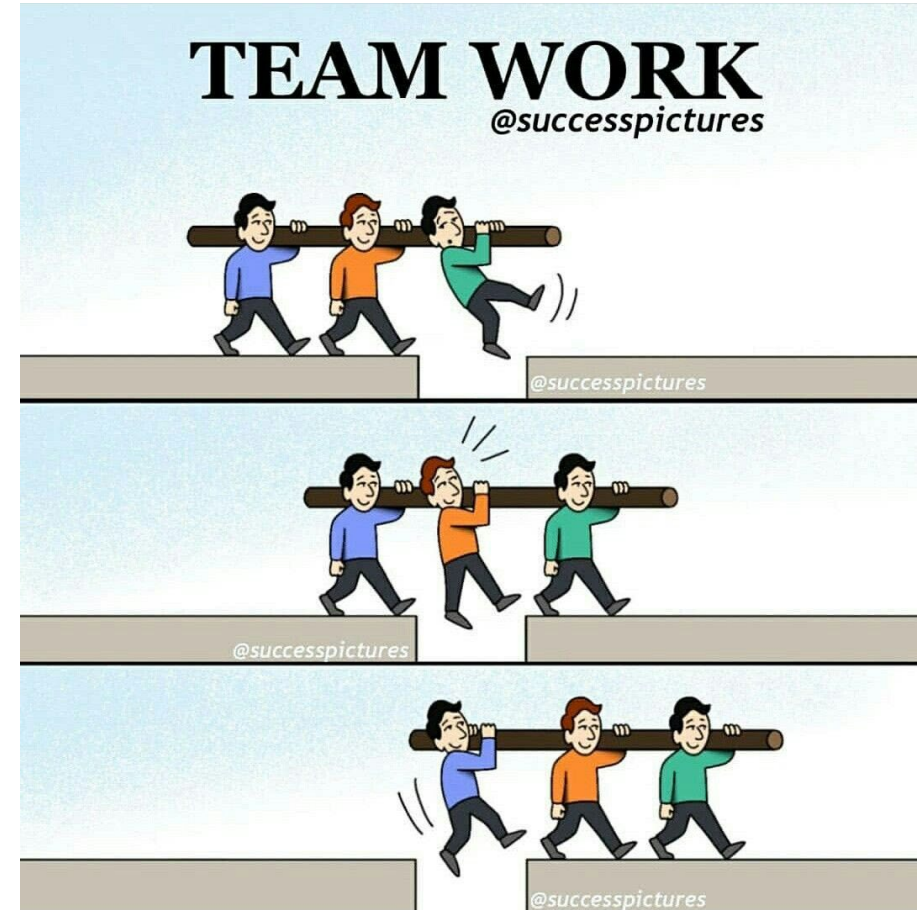
Diversion Projects



OUR VISION ... THEIR DESTINY

Building Healthy Relationships through Trust Love, and Connections (TLC):

- Effective September 1, 2024, implemented a diversion program to address misdemeanor Assault Family Violence offenses.
- The new diversion program aims at diverting low and moderate-risk youth referred on Assault Family Violence offenses from Court and formal probation by linking them to services at earliest point possible.
- Services provided in partnership with the Center Against Sexual and Family Violence (CASFV)
- As of October 7, 2024, have diverted 8 juveniles who would have otherwise resulted in a petition being filed.

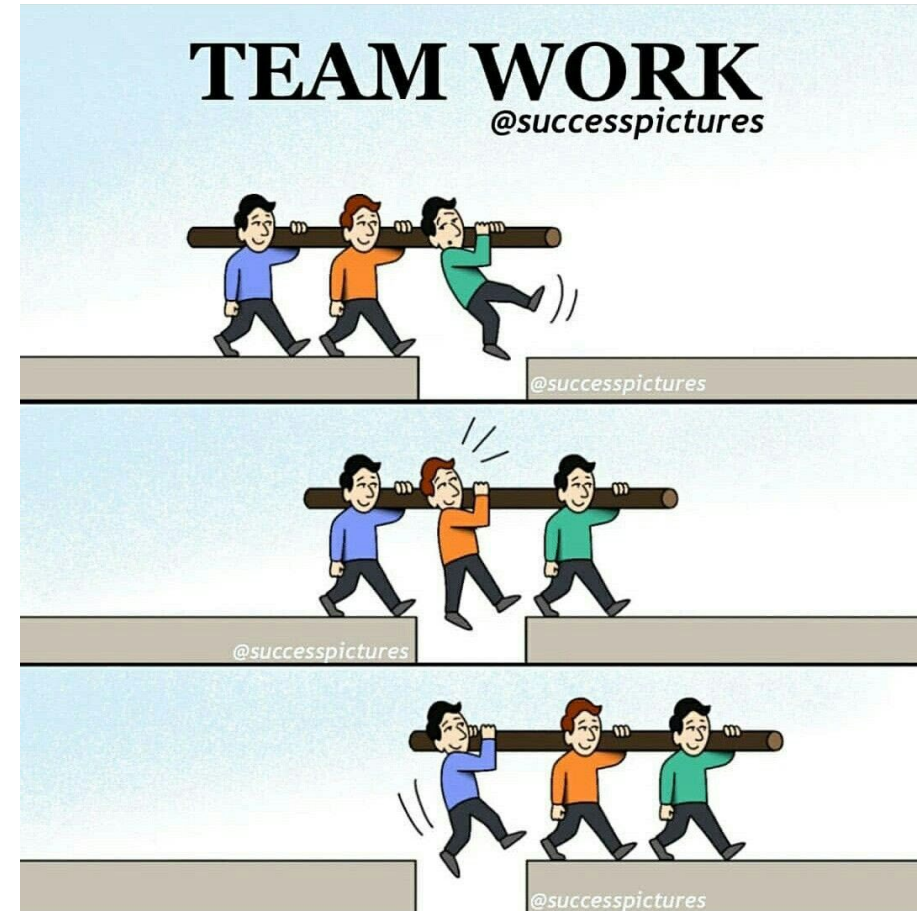


Diversion Projects



THC Diversion Programs

- FY24: continued to divert juveniles referred on felony THC offenses to a 30 day diversion program.
 - Diverted 598 Felony THC cases.
 - 94.32 % completed program successfully
 - 8.79% reoffended post program completion
- Program was redesigned to transfer juveniles not completing 30-day diversion program due to subsequent positive drug test to the 6-month deferred prosecution program.
 - Juveniles required to complete substance abuse treatment to be successfully terminated.





OUR VISION ... THEIR DESTINY

Diversion Projects continued.....

- For the last year have collaborated with Socorro Independent School District and Socorro ISD Police Services on developing a law enforcement/school based first-offender program.
 - Youth accused of Misdemeanors and State Jail Felonies with no violence, including THC related offenses, would be eligible for this diversion program,
 - First-time offenders would be diverted to a school/law enforcement diversion program, that if successfully completed, would prevent formal referral to the Juvenile Probation Department.
 - Completion of Program would result in no felony offense on the juvenile's record.
 - On October 2, 2024, an informational presentation was provided to the Juvenile Board, and an informational meeting was held with our County Attorney and feedback and support was very positive.
 - Approval to establish the first offender and final program policy will be presented to the juvenile Board in February 2025.



OUR VISION ... THEIR DESTINY

Diversions Projects continued.....

- FY 25 Goal: Enhancing the Juvenile Court Conference Committee Diversion Program:
 - The conference committees are run by community volunteers who provide service coordination and case management to youth diverted from Court.
 - The goal of the conference committees is to assist with the supervision of first-time low to moderate risk youth referred on Felony THC cases.
 - Working on enhancing/redesigning program to allow contracted volunteers to serve as navigators/mentors for families entering the juvenile justice system.

Court Order (new JOP)



OUR VISION ... THEIR DESTINY

Creation of a Judgment of Probation (JOP) that facilitates family empowerment & positive youth development to improve youth outcomes

- A Transformation of Juvenile Probation Consortium was held on November 17, 2022, at JPD to identify Group leads and members of each team. The department collaborated with the courts, public defender's office, county attorney's office, youth and parent participants.
 - Keeping youth and parent volunteers has been identified as a challenge due to lack of incentives or compensation for time.
- Our group researched several jurisdictions & different counties within Texas, Illinois, & California for guidance on updating the Judgment of Probation (main court order).
- The group held Focus Groups to conduct surveys with youth and families for feedback regarding the Judgment of Probation. The surveys were provided to the families by UTEP interns.
- The goal of the Court order workgroup was to create a new Judgment of Probation that contained language to be easily understood by youth and parents. In addition, to create conditions that are easily met by the families and promote positive youth development.
 - Confirmed strengths identified by the team were techniques already in place by the department that aligned to TJP to include case planning and goal setting, evidence-based practices, youth and family engagement.
 - Challenges identified by the team were time constraints, where to start, complacency of staff, funding and resources in the community; defining circle of care for youth, and centering youth voice and strengths.
- The group was able to identify the top 3 conditions in which youth were being modified (curfew/GPS violations, school issues and drug use).



OUR VISION ... THEIR DESTINY

Court Order (new JOP)

- The original Judgment of Probation contained 27 terms and conditions, and the new Judgment of Probation currently contains 9 terms and conditions.
 - The workgroup had initially removed the top 3 conditions that youth were modified on leaving only 4 conditions on the JOP. However, after pushback from the courts and county attorney's office, it was decided that the conditions removed should remain on the court order.
- The Annie E. Casey Foundation held a training for all staff regarding the implementation of the TJP model. During their visit, they met with the judiciary to discuss concerns regarding the implementation of the new judgement of probation and re-engaging of committees.
- The new Judgement of Probation was approved by the 65th District Court and released on March 1, 2024.
- The department began implementation and training for staff by initiating Lunch and Learn Sessions and a Harris County Discussion in May of 2024. Additionally, the department released Probation Transformation Training Series and workshops, and case planning refresher trainings for Probation Officers.
- Updates of departmental policy and procedures were implemented to align positive youth development within the department's practices.



OUR VISION ... THEIR DESTINY

Court Order (new JOP)

- The workgroup continues to meet to discuss benchmarking and data since the release of the JOP. Outcomes that were tracked included new referrals/adjudications, modifications based on the new JOP, youths being detained and/or removed from the home.
 - A challenge identified by the workgroup is Probation Officers and Courts continue to add additional terms to the new JOP that are not necessary or reflect similarities to the terms already on the new JOP. The tracking mechanism allows for the department to track information and person added; comparison of term and additional terms.
- The workgroup regrouped on July 1, 2024, to identify the next steps to align documents and court orders that are associated with the new JOP. (2) new projects are in the beginning phases alongside the new JOP. The workgroup has completed a project charter/action plan with estimated timelines for the projects.
 - A Pre-Disposition Report workgroup to be initiated to restructure and utilize strength-based interviewing for PDR investigation and writing.
 - (3) Special Programs Unit Probation Officers were invited to join the workgroup to begin working on the Level IV Additional Terms and Conditions court order. The team has begun first phase of the project by working on surveys and Focus Groups are pending to be held with youth and families.
 - **Estimated date of project completion to align with new JOP is 8/31/2025**



OUR VISION ... THEIR DESTINY

Holistic System of Care (HSOC)

- **GOAL STATEMENT:** The engagement and integration of community partners to create a holistic system of care for juvenile justice involved youth.
- **OBJECTIVE:** Formulation of a community action plan.
- **OUTCOME:** Improve youth outcomes through positive youth development and self-efficacy by September 30, 2025.





OUR VISION ... THEIR DESTINY

HSOC CHALLENGES

1. Defining what HSOC looks like for El Paso County JPD
 - Many meetings passed where the conversation was getting the team to come to an understanding of what is meant by Holistic System of Care for youth in our juvenile justice system and for our community.
2. Who should be at the table?
 - The identification the appropriate service providers is and continues to be the most difficult. There are many providers in the community all attempting to accomplish the same goal to meet the needs of impacted communities. Who is needed and who can take the lead as this initiative should be led by community providers.
3. Should the HSOC by a physical building or a virtual referral source?
 - Many HSOC or Hubbs, have been built to support the goal of a HSOC. The Team was not confident that the El Paso Community can support a facility. Plus, as stated above many service providers are providing services in a virtual platform post COVID-19



OUR VISION ... THEIR DESTINY

Survey was provided to youth at all points in the JPD system.
Youth voiced:

Opportunities in the Community they would like to see more of:

- Employment, Jobs, and Employment Training Opportunities
- Afterschool/ evening activities
- Individual/ Family counseling services
- Community Centers w/ youth programming

Areas of Interest:

Art, Culinary Art/Cooking, Sports (Football, Basketball, Boxing etc.)
E-sports and Videogames

Obstacles:

- Transportation
- Service Locations
- Time or meeting of services

Community Resource Guide created:

Guide created to assist JPD staff to refer youth and families to appropriate services according to the interest and needs of the youth and families. JPD staff can add to the guide as they identify resources in the community.

Utilizing the Intensive Supervised Probation programs as pilots

HSOC
Accomplishments

Adoption of Positive Youth Justice Framework



OUR VISION ... THEIR DESTINY



Work: experience, apprenticeships, employment readiness, income and independence

Education: literacy, credentials, learning skills, career planning

Relationships: communication skills, family systems, conflict resolution

Creativity: Visual arts, performing arts, language arts

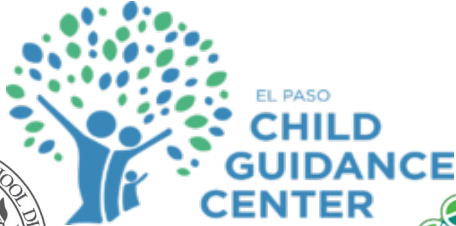
Community: Civil engagement, services, responsibility

Health: Physical activity, diet and nutrition



OUR VISION ... THEIR DESTINY

Community Partners



CREATIVEKIDS
ALL ARTWORK CREATED BY KIDS



Emergence Health Network



Current Partners:

- Independent School Districts
- El Paso Child Guidance Center-Target Case Management (TCM)-MOU Pending
- El Paso Health Network-EHN=MOU Pending
- Texas Anti Gang-TAG-Mentorship ongoing
- Texas Workforce Solutions Borderplex-MOU Pending
- Big Brother Big Sister of El Paso/Creative Kids Grant funded Mentorship

Join Our Partnership!

FY 25 GOALS

ENHANCE DEPARTMENT DRIVEN COMMUNITY RESOURCE GUIDE ;
Focus 79924, 79938

01

PARENT & YOUTH VOICE: IDENTIFICATION OF THE WANTS AND
NEEDS OF JPD YOUTH AND FAMILIES (YOUTH AND PARENT DRIVEN)

02

IDENTIFICATION AND COLLABORATION WITH MORE COMMUNITY
STAKEHOLDERS (FILL ANY IDENTIFIED GAPS IN SERVICES)

03

CONTINUE TO USE SHOCAP AND ISP AS PILOTS FOR HSOC



Trust Based Relational Intervention (TBRI) in Facilities



OUR VISION ... THEIR DESTINY

The initiative begins in October 2024

TBRI was developed by the Karen Purvis Childhood
Institute Institute-Texas Christian University

What is TBRI?



OUR VISION ... THEIR DESTINY

TBRI is an attachment-based, trauma informed intervention designed to meet the complex needs of vulnerable children.

Youth impacted by adversity, early harm, toxic stress, and/or trauma have difficulty trusting the adults in their lives.

TBRI focuses on Empowering, Connecting and Correcting principles



OUR VISION ... THEIR DESTINY

Why Use TBRI?

- On average, youth in the JJ system have four ACEs.
- Many JJ youth come from “hard” places. Don’t trust easily.
- An ability to positively connect to a caring adult can change the trajectory of a youth’s rehabilitation.
- In EPT, detained youth are housed 24/7 for an average stay of 38 days. JJ staff have the greatest opportunity to connect with youth.
- TBRI within the TJJD facilities has been found to reduce restraints, grievances, and suicidal outcries.
- This equals a safer environment for youth and staff.
- JPD believes it will improve youth outcomes. Will track data across all performance measures.





OUR VISION ... THEIR DESTINY



El Paso's Transition From Then to Now

From Bootcamp to Leadership Academy

The Challenge Academy started as a military boot camp in the late 1980's and remained that way for 28 years. As evidence emerged regarding bootcamps and their long-term outcomes, JPD began transitioning away from this bootcamp modality in 2012. Program changes made were adding a Clinical team to provide therapeutic services, removing the harsh boot camp initiation process (breaking them down) and incorporating a leadership curriculum. In 2023, JPD received a grant to use TBRI and further pivot towards a more trauma focused, positive youth development approach focusing more on skills that will assist youth in their transition back to the community.

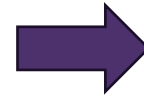
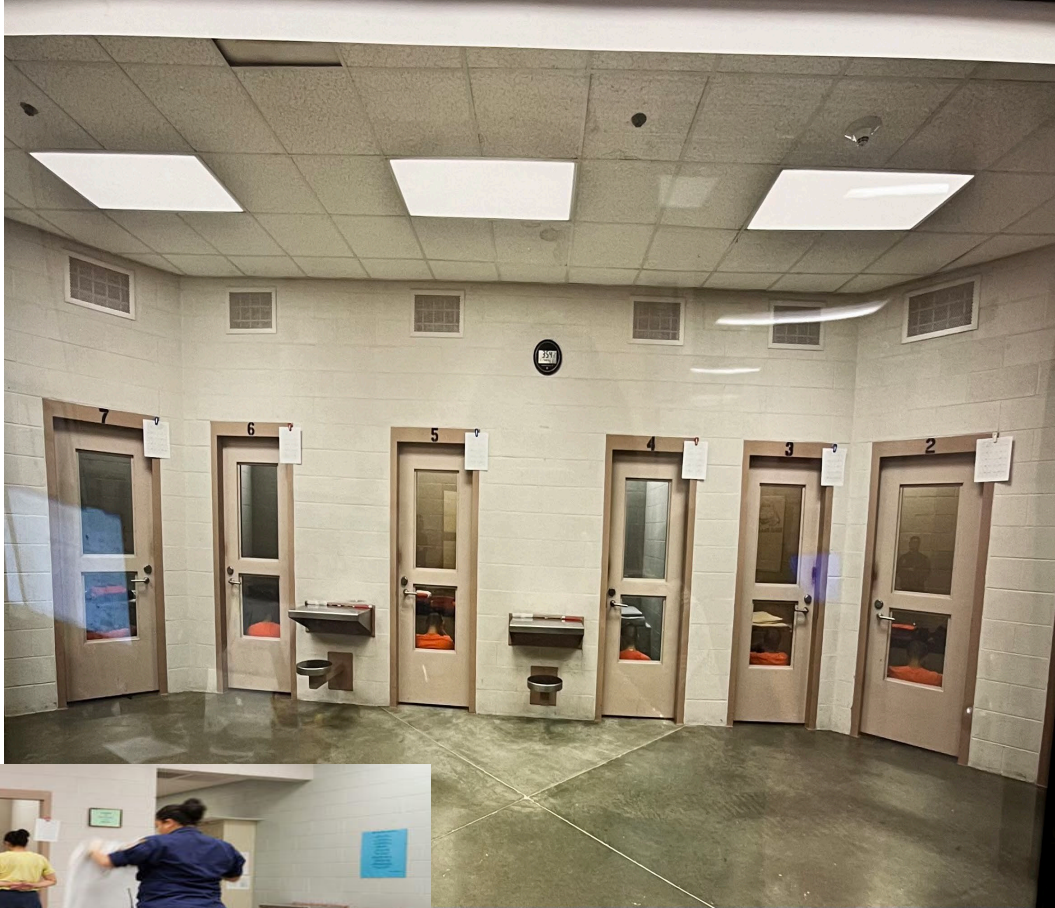


OUR VISION ... THEIR DESTINY

El Paso JPD's TBRI Timeline



Staff will utilize a coaching and mentoring approach rather than a directing and controlling approach





OUR VISION ... THEIR DESTINY

Thank You!

**El Paso County
Juvenile Justice Center
Judge Enrique H. Pena Jr.**

6400 Delta Drive | El Paso, TX 79905 | (915) 273-3491

<https://juv.epcounty.com/>

Family Advisory Council



The Family Advisory Council (FAC) is a group of parents and caregivers who empower themselves and others as agents of community change.

YOU HAVE A VOICE in the Family Advisory Council



Life Skills

- ✓ *Financial education and strategies*
- ✓ *Mentorship: etiquette and nutrition*
- ✓ *Domestic management: hacks and helps*

Parent Skills

- ✓ *Mental Health education and awareness*
- ✓ *Grandparents: building and bridging generational connection*
- ✓ *Single Parents: awareness of resources and support systems*

Community Events

- ✓ *Reaching our youth in our communities*

Concrete Supports

- ✓ *Safer school environment (internal)*
- ✓ *Safer school zones (external)*

VOZ (voice)

The Voice Of Generation Z



12-24 years of age

- ✓ **Establishment of a subcommittee** volunteers from the FAC have agreed to come together to support and promote outreach efforts
- ✓ **Social Media Campaign** – with staff guidance and direction, we will leverage digital platforms for promotion and engagement
- ✓ **Teen Cafes-** known as (#WoWTalk(Words of Wisdom) Cafes. Designed to help youth build healthy relationships in preparation for adulthood
- ✓ **Establish a Youth Connect Group** – A group where youth can be safe, be heard, and be themselves



Like and follow us on :



search:

El Paso Family Advisory Council (FAC)



Ronsoni Long
Family Advisory Council Chairperson

3710 Altura Ave, Building D
El Paso, Texas 79930

Office: 915-529-8865

Mobile: 915-540-8221

Email: rlong@epccinc.org



Fatherhood EFFECTS Program



It is our mission to empower youth and families to brave adversity and conflict through constantly evolving, innovative, programs in order to co-create a brighter future.



Our Services

All FREE, all the time



- ✓ **Early Childhood** - Parenting classes, counseling, case management and basic needs for any family with children under the age of 5. (Includes parental figures and expectant parents)
- ✓ **Counseling and Life Skills** - Support to families with children between 6 and under the age of 17. Counseling services to any person of any age who has been a victim of a crime.
- ✓ **Youth Outreach and Housing** – Help for youth and young adults 11 to 24 years of age that are going through a tough time. We can help with help with food, shelter, clothing, etc.

Focuses on services for fathers, step-fathers, or any other father figure to reduce the risk of abuse or neglect.



Why Dads

When dads are involved their children:

- ✓ *Have less emotional and behavioral problems*
- ✓ *Are less likely to be victims of abuse or neglect*
- ✓ *Have better school performance*
- ✓ *Have lower rates of teen pregnancy*
- ✓ *Are less likely to be involved in the juvenile justice system or criminal activity*
- ✓ *Less likely to abuse alcohol or other substances*
- ✓ *Less likely to commit suicide*

The **Father Absence Crisis** in America

Research shows² when a child is raised in a father-absent home, they are affected in the following ways...

17.8

Million Children, Nearly 1 in 4, Without a Biological, Step, or Adoptive Father at Home¹



- ⊖ Greater Risk of Poverty
- ⊖ More Likely to Have Behavioral Problems
- ⊖ Greater Risk of Infant Mortality
- ⊖ More Likely to Go to Prison
- ⊖ More Likely to Commit Crime
- ⊖ More Likely to Become Pregnant as a Teen
- ⊖ More Likely to Face Abuse and Neglect
- ⊖ More Likely to Abuse Drugs and Alcohol
- ⊖ More Likely to Suffer Obesity
- ⊖ More Likely to Drop Out of School

National Fatherhood Initiative[®]

www.fatherhood.org

¹ U.S. Census Bureau. (2023). Living arrangements of children under 18 years old: 1960 to present. Washington, D.C.: U.S. Census Bureau.

² National Fatherhood Initiative[®] 2024. *Father Facts: Ninth Edition*. Germantown, MD: National Fatherhood Initiative[®].





What curriculums will we be using?



Parent Cafes



Circles of Security



Empath Mobility



Have you heard of these before?

DAD'S Parent Cafes (3 Sessions)



Social and Emotional Competence

Children's early experiences of being nurtured and developing a *positive relationship* with caring adult *affects all aspects* of behavior and development.



Knowledge of Parenting & Child Development

Children *thrive* when parents provide *not only affection*, but *also* respectful communication and listening, consistent rules and expectations, and *safe opportunities* that promote independence.



5

Protective Factors

Social Connections

Parents with a social network of *emotionally supportive friends, family, and neighbors* often find that it is *easier to care* for their children and themselves.



Resilience

Parents who can cope with the *stresses of everyday life*, as well an occasional crisis, have *resilience*; they have the flexibility and inner strength necessary to *bounce back* when things are not going well.



Concrete Support

Families who can meet their *own basic needs* for food, clothing, housing, and transportation—and who know how to access essential services such as childcare, health care, and mental health services to address family-specific needs—are *better able to ensure the safety and well-being of their children*.

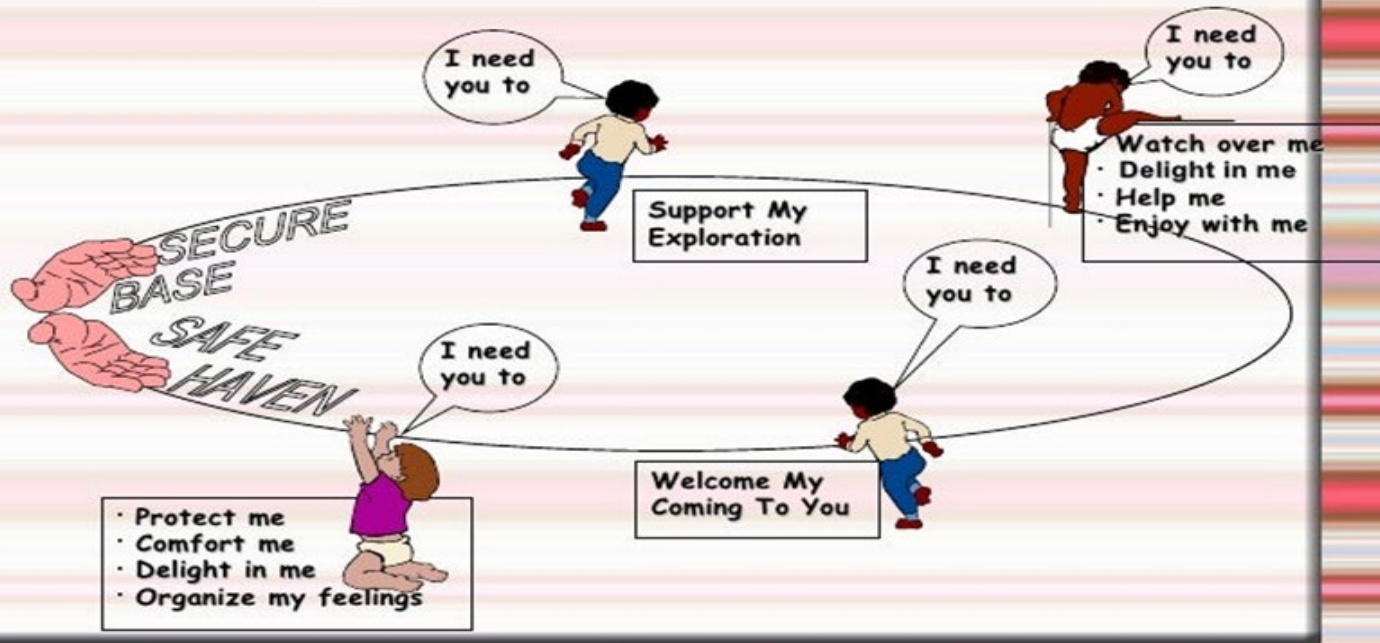


Circle of Security 8 Sessions



Circle of Security

Parent Attending to the Child's Needs



Empath Mobility Mentoring Up to 6 Months

Mobility Mentoring[®] Essential Elements



Coaching for
Economic Mobility



Bridge to Self-
Sufficiency[®]



Goal Setting



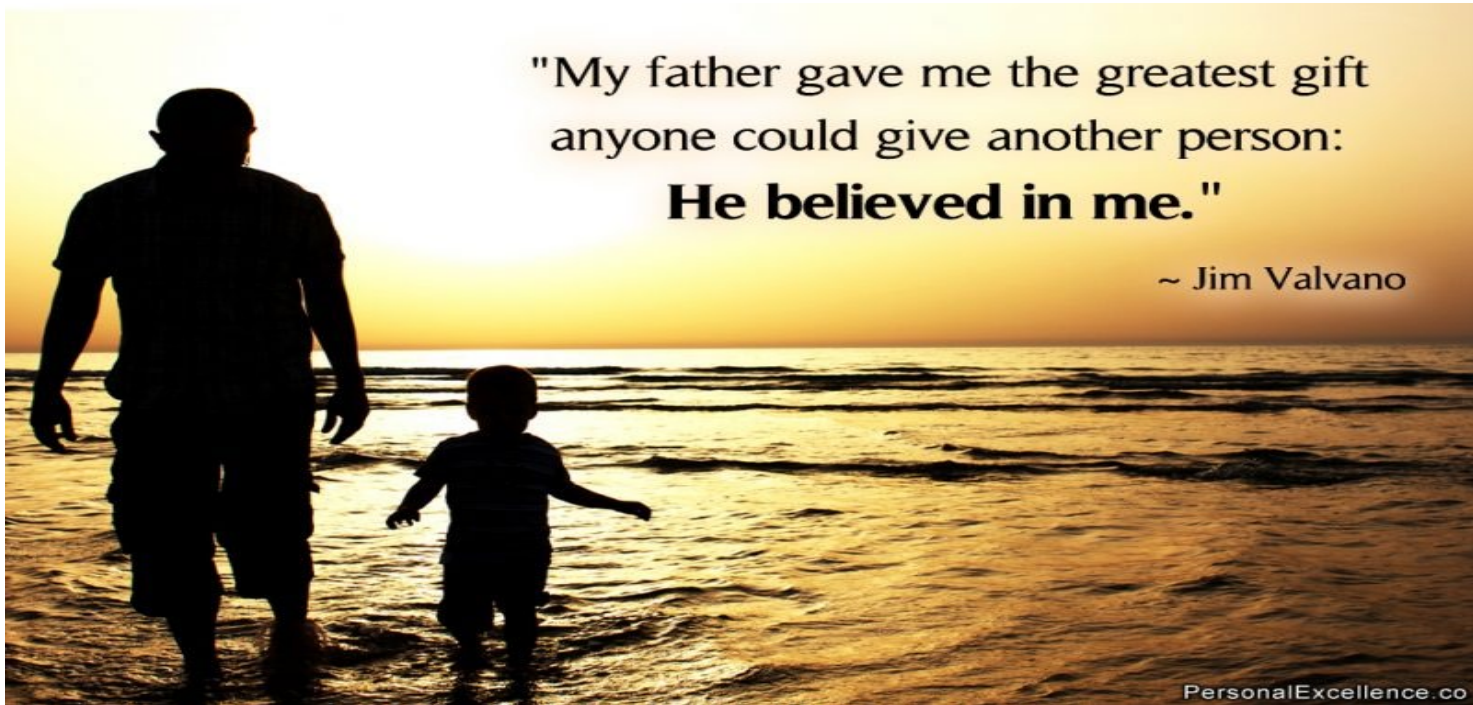
Recognition



Continuous Improvement

Additional Services

- Case Management
- Concrete Services



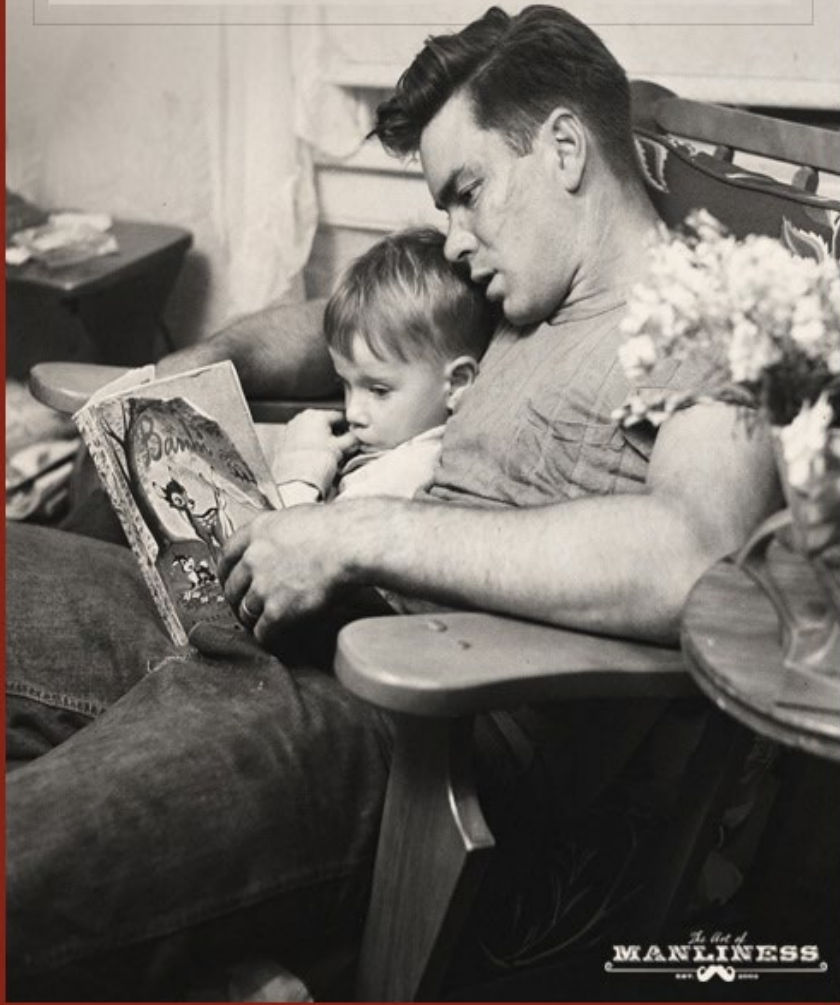
"My father gave me the greatest gift anyone could give another person:
He believed in me."

~ Jim Valvano

PersonalExcellence.co

*"It is easier to build strong children than
to repair broken men."*

FREDERICK DOUGLASS



Who can enroll in Fatherhood?

- Any father, stepfather, father figures (grandparents, uncles.....)
- No validated CPS history
- Voluntary clients

How much does the program cost?

It's **FREE**. It's **FREE** for you and **FREE** for your family.

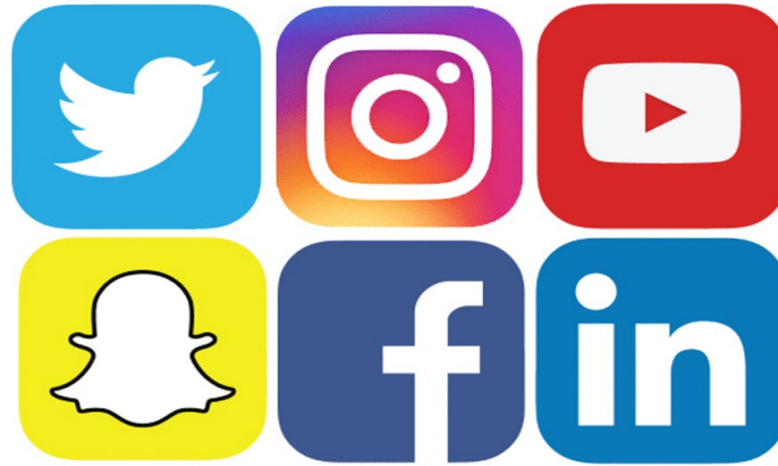


Get Involved

- ✓ *Tell your friends and family*
- ✓ *Become a Fatherhood Supporter*
- ✓ *Encourage Dads to participate*
- ✓ *Follow us on social media @epccinc and share, share, share our posts!*



“Every father should remember one day his son will follow his example, not his advice.”
– Charles Kettering



Like & Follow Us @epccinc

www.epccinc.org

info@epccinc.org

jalamillo@epccinc.org

Fatherhood (915) 259-79930

#epccinc

Need more info?





Project Background

Project aim: Address gaps in the screening, evaluation, and diagnosis of autism spectrum disorder.

- ✿ Train emerging professionals from regional higher education programs to enter the workforce better prepared to serve children with NDD.
- ✿ Explore sustainability with UT Austin, Autism Consortium of Texas.



Workforce Development Needs

- ✿ Increased awareness around ASD/DD;
- ✿ Increased awareness of screening & diagnosis of ASD/DD tools to reduce barriers;
- ✿ Training on how to identify and utilize valid screening & diagnostic tools;
- ✿ Training on evidence-based interventions and referral pathways before & after diagnosis.



Source: [HRSA LEND Factsheet](#)



Leadership Education in Neuro-developmental & Related Disabilities (LEND)

- ✿ 60 LEND program nationwide (2 in Texas, Austin & Houston).
- ✿ Provide graduate level interdisciplinary training to trainees from various disciplines to increase clinical competence.
- ✿ Funded under the Autism Collaboration, Accountability, Research, Education, and Support (CARES) Act.
- ✿ Developed to improve the health of infants, children, and adolescents with disabilities

Source: [AUCD.org/about-LENDs](https://www.aucd.org/about-LENDs)









LEND Objectives:

- 🌸 Advance the knowledge and skills of all child health professionals to improve health care delivery systems for children with developmental disabilities.
- 🌸 Provide high-quality interdisciplinary education that emphasizes the integration of services from state and local agencies and organizations, private providers, and communities.
- 🌸 Provide health professionals with skills that foster community-based partnerships.
- 🌸 Promote innovative practices to enhance cultural competency, family-centered care, and interdisciplinary partnerships.

Source: [AUCD.org/about-LENDs](https://www.aucd.org/about-LENDs)

Piloting LEND to the Border Region



-  **June 2023** – PdN Children’s develops initial project proposal with support from UT Austin ACT LEND.
-  **October 2023** – The Paso del Norte Health Foundation funds the NDWCB Pilot and enters formal partnership with ACT LEND.
-  **February 2024** – Inaugural five-trainee cohort begins four-month professional development program.
-  **July 2024** – Cohort of 8 trainees is recruited and begins program in July.
-  **September 2024** – The Foundation funds year two of the project to support ongoing training and sustainability efforts.
-  **October 2024** – Year one concludes with a total of 13 trainees completing the program.



Training Content

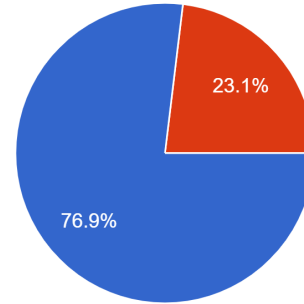
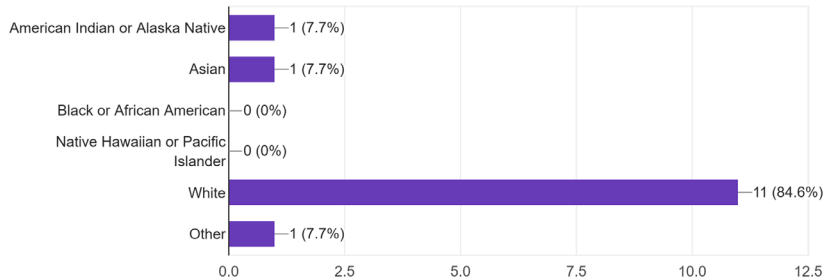
Trainees participated in weekly seminars covering topics such as:

- ✿ Early Childhood Intervention & Developmental Monitoring
- ✿ Medical diagnosis of ASD/DD
- ✿ Person-centered practices for serving children & adults with ASD/DD
- ✿ Special Education Rights & School Based-Services
- ✿ Intersectionality and Cultural considerations (Racial & Ethnic disparities, females on the spectrum & masking)
- ✿ Anxiety & Autism
- ✿ Transition to Adulthood for individuals with ASD/DD
- ✿ Disability Policy & Advocacy
- ✿ Screening & Diagnostic tools: Rapid Interactive Screening Test for Autism in Toddlers, Autism Diagnostic Observation Schedule.

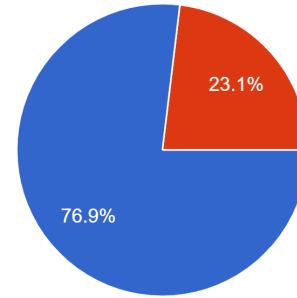


Trainee Demographics

Social Work: 4 (31%)
Speech-Language Pathology: 6 (46%)
Psychology: 2 (15%)
Special Education: 1 (8%)



- Female
- Male
- Nonbinary
- Prefer not to say



- Hispanic/Latino
- Not Hispanic/Latino



Project Outcomes

- ✿ 13 trainees completed 4 months of didactic and experiential training.
- ✿ All trainees trained and certified in the Rapid Interactive Screening Test for Autism in Toddlers (RITA-T)
- ✿ 12 trainees completed training on the Autism Diagnostic Observation Schedule. 8 trainees completed ADOS evaluation observation.
- ✿ Trainees completed a total of 989.75 hours of training
(Average: 76 hrs. Highest: 88 hrs. Lowest: 64 hrs. Minimum requirement: 60 hrs.)
- ✿ Trainees completed a capstone project and presented during a community symposium.
- ✿ Four trainees traveled to Austin to participate in Capitol Day with UT Austin ACT LEND.





QUESTIONS & COMMENTS



First Connection Work Group Meeting Notes

October 28, 2024

9:00 a.m. - 10:30 a.m.

Paso del Norte Health Foundation

221 N. Kansas, 19th Floor

El Paso, Texas 79901

Meeting Room C

Attendees:

Sharon Butterworth
Daniely Gutierrez
Rebeka Isaac
Josue Lachica
Vanessa Leon
Dr. Sarah Martin
Enrique Mata
Kathie Valencia
Wes Temple
Dr. Maria Torres

Representing:

Paso del Norte Center at Meadows Institute
Region 19 Education Services Center
Emergence Health Network
Paso del Norte Center at Meadows Institute
Heart Gallery of El Paso
TTUHSC El Paso CPAN/TCHATT – FC Chair
Paso del Norte Center at Meadows Institute
El Paso Center for Children
Region 19 Education Services Center
Jesuit Refugee Service

E-Mail:

sharonbutterworth@mac.com
dgutierrez@esc19.net
Rebeka.isaac@ehnel Paso.org
jlachica@mmhpi.org
vanessa@heartgalleryofelpaso.org
sarah.l.martin@ttuhsc.edu
emata@mmhpi.org
kvalencia@epccinc.org
wtemple@ESC19.NET
maria.torres@jrsusa.org

Welcome and Introductions

Dr Sarah Martin welcomed the group and called for introductions.

Chair and Vice Chair announcement

It was recognized that Dr. Sarah Martin will act in the role of Chair of the FLC First Connection Work Group and Ms. Laura Marquez will act in the role of Vice Chair with Ms. Gilda Gil presiding when either the Chair or Vice Chair are unable to convene the meetings.

First Connection Overview from previous meetings

Enrique Mata provided an overview of the connections among the El Paso Behavioral Health Consortium, its Leadership Councils, task forces and work groups. He recognized that the work group is named First Connection because its overarching goal is **“to make the first connection with mental health support a positive one.”** He explained that meeting notes for all the Leadership Councils can be found at:

<https://healthypasodelnorte.org/>.

Open discussion

- **First Connection through specialty service (e.g. pediatric, primary care and school settings)**

Dr Martin provided an update on pilot Collaborative Care practices advising that she has identified three pediatric groups to implement model approaches to coordinate mental health and physical health plans of

care for children and families. She also provided some highlights on the successes with the Child Psychiatry Access Network (CPAN) and the Texas Child Health Access to Telehealth (TCHAT) programs.

Dr Martin recommends inviting representation from each of the pediatric practices and exploring representation from the school counsellors or administrators for this work group. Dr Martin responded to questions from the group.

- **First Connection through specialty service access (e.g., crisis care or emergency care)** Ms. Laura Marquez shared progress on the Help Me Grow project. She summarized several creative approaches to engage and make parents aware of important early childhood intervention services. She added that they too have some pediatric practices who are championing the effort to be well trained and provide timely access to accurate diagnostic testing and optimal, proactive plans of care.

To Dos:

For the next meeting, the PdN Center will engage with:

- PHIX on their work and how it relates to the goals of this work group
- the El Paso Medical Society
- medical office manager association
- medical coder association
- APRN association
- Explore design of an annual community provider educational event

Other Business:

The PdN Center and the Health Foundation Program Team are planning for the next Consortium General Meeting targeted for December 6, 2024. The theme for the meeting will be surrounding mental health policy priorities for the 89th Legislative Session. More information will follow as the dates and venue are confirmed.

Next Meeting:

The group will be targeted to meet on Monday, December 9th at Paso del Norte Health Foundation, Meeting Room C from 9:00 – 10:30 am. Room availability will need to be confirmed. A meeting notice will be sent to the FLC members.

Work Group Participant Contact List:

Attendee:	Representing:	E-Mail:
Noemi Armendariz	TTUHSC El Paso CPAN/TCHATT	noemi.armendariz@ttuhsc.edu
Sharon Butterworth	Paso del Norte Center at Meadows Institute	sharonbutterworth@mac.com
Dr. Sandra Calderon	YWCA El Paso del Norte Region	s.calderonmunoz@ywcaelpaso.org
Mariana Cardenas	El Paso Child Guidance Center	mcardenas@epcgc.org
Luis Cenicerros	Aliviane Inc.	lcenicerros@aliviane.org
Gus Cohen	YWCA El Paso del Norte Region	A.Cohen@ywcaelpaso.org
David Cotchery	American GI Forum/National Veterans Outreach	dcotchery@agif-nvop.org
Sandra Day	Paso del Norte Health Foundation	sdlay@pdnfoundation.org
Gilda Gil	Paso del Norte Children's Development Center	gilda.gil@pdnchildrens.org
Daniely Gutierrez	Region 19 Education Services Center	dgutierrez@esc19.net
Adrienne Harrel	TTUHSC El Paso CPAN/TCHATT	Adrienne.Harrel@ttuhsc.edu
Rebeka Isaac	Emergence Health Network	Rebeka.isaac@ehnel Paso.org
Josue Lachica	Paso del Norte Center at Meadows Institute	jlachica@mmhpi.org
Vanessa Leon	Heart Gallery of El Paso	vanessa@heartgalleryofelpaso.org
Violeta Lopez-Unzueta	United Way of El Paso	vlopezunzueta@unitedwayelpaso.org
Laura Marquez	Paso del Norte Children's Development Center	laura.marquez@pdnchildrens.org
Ruben Marquez	American GI Forum/National Veterans Outreach	rmarquez@agif-nvop.org
Dr. Sarah Martin	TTUHSC El Paso CPAN/TCHATT	sarah.l.martin@ttuhsc.edu
Enrique Mata	Paso del Norte Center at Meadows Institute	emata@mmhpi.org
Claudia Munoz	Texas Department of Family Protective Services	claudia.munoz@dfps.texas.gov
Celeste Nevarez	Emergence Health Network	cnevarez@EHNELPASO.ORG
Mida Ponce	Casa of El Paso	mponce@casaofelpaso.org
Julie Priego	Aliviane Inc.	jpriego@aliviane.org
Kim Shumate	County of El Paso Juvenile Justice Center	k.shumate@elpasocountytx.gov
Emily Stuessy	El Paso Independent School District	ekstuess@epis.d.org
Wes Temple	Region 19 Education Services Center	wtemple@ESC19.NET
Dr. Maria Torres	Jesuit Refugee Service	maria.torres@jrsusa.org
Kathie Valencia	El Paso Center for Children	kvalencia@epccinc.org
Sophia Wozniak	Emergence Health Network	sophia.wozniak@ehnel Paso.org



EL PASO
Behavioral Health
CONSORTIUM



OF THE EL PASO BEHAVIORAL HEALTH CONSORTIUM



OF THE EL PASO BEHAVIORAL HEALTH CONSORTIUM












OF THE EL PASO BEHAVIORAL HEALTH CONSORTIUM



First Connection Work Group
October 28th Meeting

First Connection October 28th Agenda:

-  **Welcome and Introductions**
-  **First Connection Overview from previous meetings**
-  **Open discussion on**
 -  • **First Connection through specialty service (e.g. pediatric, primary care and school settings)**
-  **And**
 -  • **First Connection through specialty service access (e.g., crisis care or emergency care)**
-  **Other Business**
-  **Next Meeting**
-  **Adjourn**

First Connection Work Group: Chair Dr. Sarah Martin

Vice Chair: Laura Marquez and Gilda Gil

Exists to:

Make the First Connection with mental health service a positive and nurturing experience.

Next Meeting:

October 28, 2024

What will it do:

Increase access to preventive, proactive family support, and timely access to early identification, accurate diagnosis, and appropriate care.



Overview of Previous Meetings

Opportunity For Change: Primary Care

Expand and Enhance Integrated and Collaborative Care models for mental healthcare and related support access in the pediatric and primary care settings.

Strategy I -Clearly identify mental health and substance use care and support that can efficiently and effectively be coordinated or directly provided within the primary care setting. For example, pediatrician's and staff trained for assessment and care planning to address early child anxiety symptoms providing care and support or coordinating with counseling and specialty care as needed (e.g., CPAN, Collaborative Care Managers).

Value proposition - Improving capacity to provide mental health service and support access through the pediatrician and primary care setting decreases stigma and negative bias to seeking appropriate care, increases timely, accurate and effective treatment of mental health condition symptoms.

Opportunity For Change: Primary Care

Expand and enhance programs that promote emotional well-being, nurturing environments, and prevention of adverse childhood experiences.

Strategy I - Increase capacity and collaboration among schools and community organizations for a robust Multi-Tiered System of Supports model as endorsed by the Texas Education Agency's Long-Range Plan.

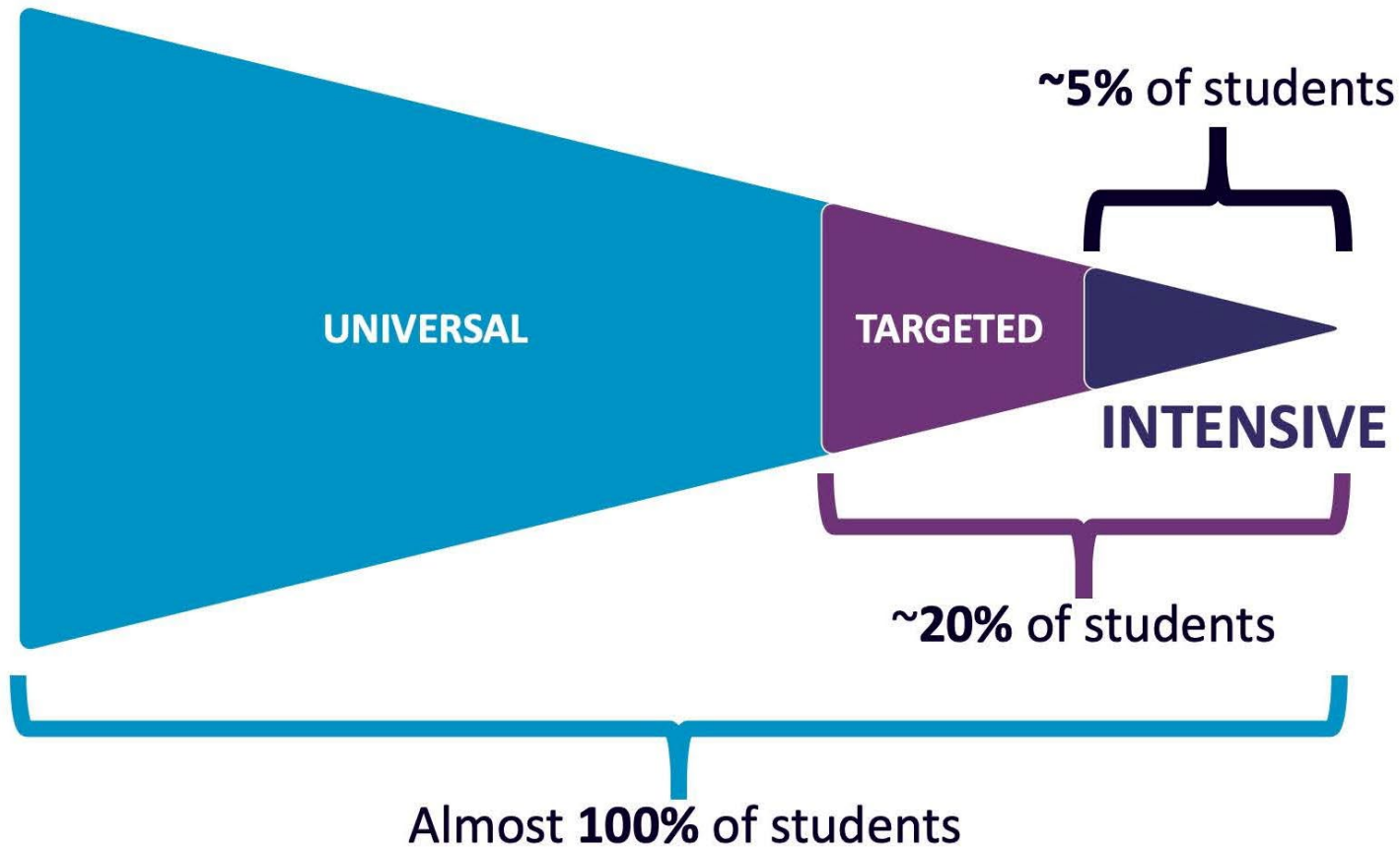
Strategy II - Increase promotion and availability of interventions that promote kindness and caring (e.g., random acts of kindness activities).

Strategy III - Strengthen Region 19 support and related school Liaison functions (e.g., MTSS, PBIS, CIS, CYSI).

Strategy IV - Increase school coordination with community services to provide emotional well-being (e.g., mindfulness and resilience exercises - upstream interventions) and timely access to screening and access to treatment (e.g., recognizing mental health treatment access as an excused absence).

Value proposition -A sound foundation of emotional health promotion and crisis prevention programs and services available where and when they are needed contributes to the ability for individuals and families to cope with life events and prevent adverse childhood experiences.

Figure 2: The MTSS Tiers





Open Discussion



Next Meeting Target:

Monday, December 9th at 9:00 am



Specialty Care Work Group Meeting Notes

October 15, 2024

9:00 a.m. - 10:30 a.m.

Paso del Norte Health Foundation

221 N. Kansas, 19th Floor

El Paso, Texas 79901

Meeting Room C

Attendees:

Sereka Barlow

Daniely Gutierrez

Rebeka Isaac

Josue Lachica

Vanessa Leon

Enrique Mata

Mida Ponce

Rhonda Russ

Nicole Schiff

Kim Shumate

Wes Temple

Francisco Torres

Sophia Wozniak

Representing:

YWCA El Paso Del Norte Region

Region 19 Education Service Center

Emergence Health Network

Paso del Norte Center at Meadows Institute

Heart Gallery of El Paso

Paso del Norte Center at Meadows Institute

Court Appointed Special Advocates El Paso (CASA)

Emergence Health Network

Paso del Norte Center of Hope

County of El Paso Juvenile Justice Center

Region 19 Education Service Center

County of El Paso Juvenile Justice Center

Emergence Health Network

E-Mail:

s.barlow@ywcaelpaso.org

dgutierrez@esc19.net

rebeka.isaac@ehnel Paso.org

jlachica@mmhpi.org

vanessa@heartgallery.org

emata@mmhpi.org

mponce@casaofelpaso.org

rmruss@ehnel Paso.org

nicole@pdncoh.org

k.shumate@elpasocountytx.gov

wtemple@esc19.net

fratorres@elpasocountytx.gov

sophia.wozniak@ehnel Paso.org

Welcome and Introductions

Enrique Mata and Josue Lachica welcomed the group and called for introductions.

Overview of Last Meeting

Enrique Mata provided an overview from past work group discussions and related the goals to identified priority needs from the 2021 System Assessment and the 2023 El Paso County Youth Sequential Intercept Model (SIM). He and Josue Lachica responded to questions from the group.

Specialty Care – Trauma, Grief, and Resilience

The group discussed comments from the last meeting about a name more aligned with the group's charge. The consensus was still that the group is dealing with complex cases and trauma, grief and resilience is still integral to the ongoing charges the group is convening to address. Since a Chair and Vice Chair have not been identified, the group will remain the specialty care work group at this point.

Respite and Residential Treatment

The group engaged in a robust discussion on the need for both crisis respite and residential treatment approach for region 10. The community has been challenged with this topic for at least the past decade and the situation continues to worsen as evidenced by recent decisions to close vital service options at El Paso Center for Children.

The group discussed several approaches including:

- Exploring federal funding streams including connecting with Congresswoman Escobar and fostering partnerships with Ft. Bliss and Federally Qualified Health Centers.
- Exploring sustained funding from the state legislature including improved reimbursement options from Medicaid. The 2021 System Assessment discusses efforts under the 86th Legislative Session and SB 1177.
- There is capacity at the juvenile justice center that the community could explore a form of waiver or collaboration to bring nurturing space for residential treatment to the community without youth having to connect with the justice system to access these services.
- Developing a hybrid approach to service delivery. For example, existing models in Houston, San Antonio, and Austin, as well as models that are developing in Uvalde and other communities.

Next Meeting To dos

Enrique Mata and Josue Lachica committed to bringing information on the operations of several respite and residential treatment models to the next meeting. In addition, some key data points will be provided for the group to consider. The group suggested meeting at least one more time before the year ends. Josue Lachica will explore the feasibility for a meeting on a date in November.

Adjourn

Enrique Mata and Josue Lachica adjourned the meeting at 10:29 am. Presentation slides are included with these notes.



EL PASO
Behavioral Health
CONSORTIUM



OF THE EL PASO BEHAVIORAL HEALTH CONSORTIUM



OF THE EL PASO BEHAVIORAL HEALTH CONSORTIUM








OF THE EL PASO BEHAVIORAL HEALTH CONSORTIUM



Specialty Care Work Group
October 15th Meeting

Specialty Care October 15th Agenda:

-  **Welcome and Introductions**
-  **Overview of Last Meeting**
-  **Specialty Care – Trauma, Grief and Resilience**
-  **Respite Care and Residential Treatment**
-  **Adjourn**



Overview of August 30th Meeting

Opportunity For Change:

Reframe the concept of mental health and substance use specialty care as secondary to Integrated Primary Care (e.g., 25% of care).

Opportunity For Change:

Strategy I -As with primary care, clearly **identify mental health and substance use care and support that is beyond the scope of practice and cannot be directly provided within the primary care setting.** For example, serious mental health conditions that require an intensive coordinated approach with psychiatry, psychology, counseling, or substance use specialty care.

Strategy II - **Expand and enhance availability of well-established evidence-based interventions** for youth with more severe behavioral problems related to willful misconduct and delinquency (e.g., increase availability of child psychiatrists and child psychologists, increase availability and effective use of collaborative care model options (psychiatry, counseling, and primary care services)).

Strategy III - Utilize the **Multisystemic Therapy Rider to promote timely wraparound support** for children with complex needs to prevent entry into the Foster Care or Justice **Strategy IV** - Improve residential support options to prevent children from inappropriately leaving for residential treatment out of town, including increasing compensation for foster parents and reimbursement options for nontraditional programs and expanding intensive Medicaid services to support foster families.

Specialty Care Work Group – Chair

Vice Chair

Exists to:

Ensure appropriate, acceptable service options are available for complex mental health conditions and co-occurring substance use and mental health conditions

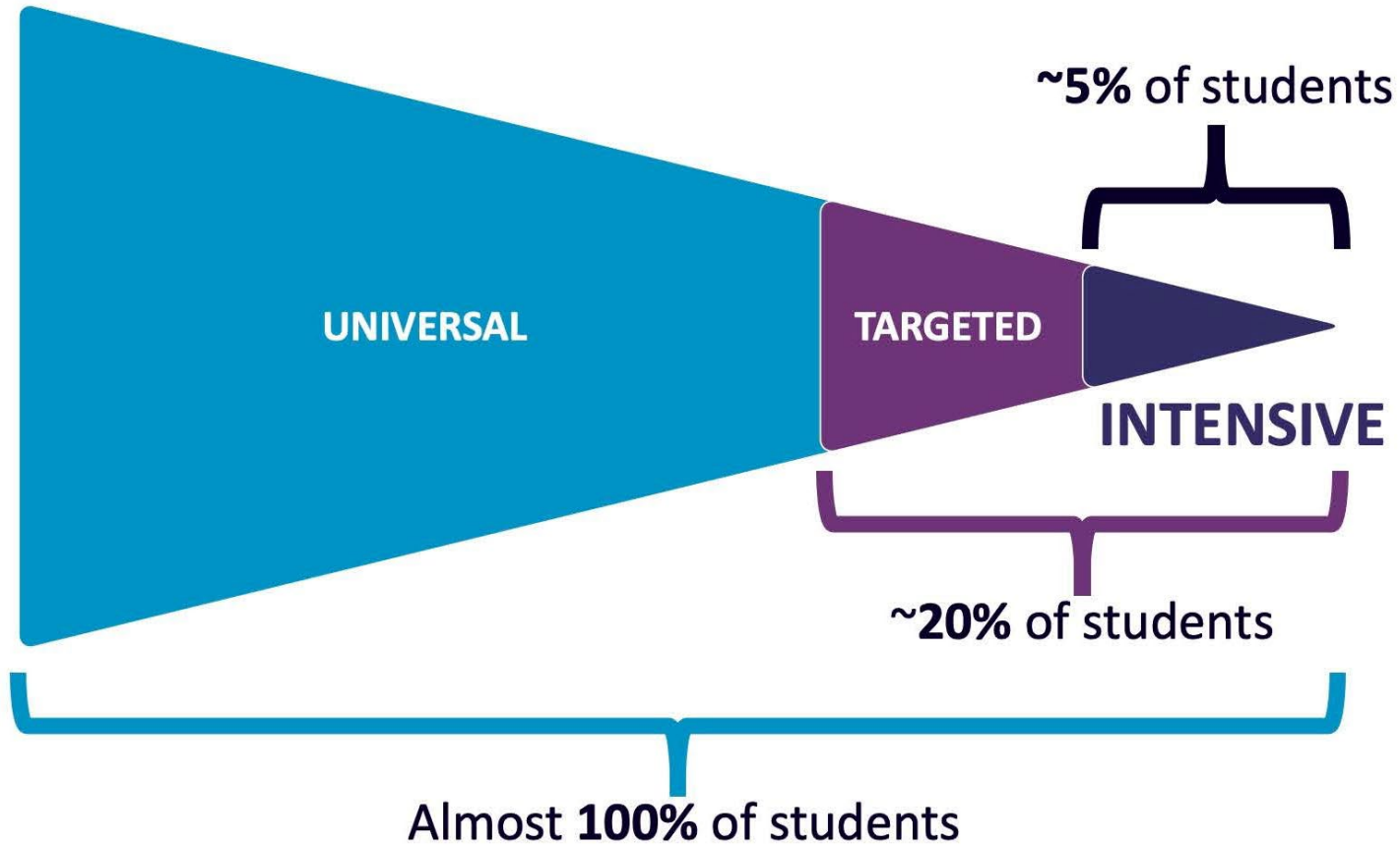
Next Meeting:

October 15th at 8:30 – 10:00 am

What will it do:

Improve coordination and increase availability of specialty care services (e.g. wraparound care, PHP, IOP, addiction interventions, trauma and grief services).

Figure 2: The MTSS Tiers



El Paso Youth Sequential Intercept Model (SIM) Report

Mapping School to Justice Pathways

Relevant Key Findings

- **After Hours Access:** Lack of availability of services after hours or on weekends to accommodate the needs of parents, as well as transportation issues that can hinder access to essential services.
- **Substance Use Services:** Students are using substances, including vapes, to self-medicate. Systems are not in place in schools or in the community to consistently identify the root cause of behavior and connect students to substance use or mental health treatment to more effectively address the underlying cause of the behavior. When those needs are identified, there is a lack of intervention services related to substance use disorders (SUD). Failing to address the root causes of substance use and mental health issues can have long-term consequences, potentially leading to chronic SUD, ongoing mental health challenges, and a higher risk of involvement with the juvenile justice system.

Relevant Key Findings

- **Child Psychiatry:** In 2020, El Paso County had 67 licensed psychiatrists. Of these, only 18 reported a specialization in child and adolescent psychiatry, pediatric psychiatry, or developmental-behavioral pediatrics.
- **Intensive Services:** In El Paso County, there is a shortage of providers who offer intensive community-based services. A lack of sufficient intensive community-based services that allow children and youth to thrive at home and in their communities could lead to an overreliance on more restrictive placements, such as psychiatric hospitals and juvenile detention.
- **Youth Voice:** Explore the establishment of a **state-funded Youth Crisis Respite (YCR) Center** and explore opportunities to further partner with law enforcement and El Paso County Juvenile Probation to serve youth that may be appropriate for diversion to the YCR.

Cross Cutting Key Findings – Intercept 0

- **Information Sharing:** Lack of access to information about a child's history among behavioral health, school, and justice stakeholders can impede decision-making processes and access to appropriate care (i.e., PHIX)
- **Family Engagement:** Lack of family involvement and engagement in educational and support systems is exacerbated by family stress, lack of parental education, the need to teach parents how to navigate systems, bilingual needs, family mental health needs, and the scarcity of family partners with lived experience. Additionally, there is often stigmatization of mental health among caregivers.
- **Disciplinary Alternative Education Program and Vaping:** There is limited disciplinary alternative education program (DAEP) capacity to support youth expelled due to the new vaping laws passed (HB114). Texas law grants school districts discretion in applying "mandatory" disciplinary consequences, allowing consideration of mitigating factors, including disciplinary history. However, use of mitigating factors varies across districts and campuses, and many fail to fully explore alternatives to expulsion and exclusionary discipline practices.

Gaps, Challenges, and Opportunities for Change

Of the 700-800 students arrested in school and referred to the juvenile justice system's first offender program in Fiscal Year 2023, 95% were assessed as low risk offenders and only 3% reoffended. (See Appendix 3, Data Presentation.) Significant school and justice human resource hours are expended to process low risk offenders who will receive a criminal record. **Sending low-risk youth into the juvenile justice system consumes significant resources from both schools and the justice system. These resources could be better allocated to addressing more serious offenses and providing support to high-risk youth.**



Respite Care and Residential Treatment

2021 System Assessment



El Paso needs an array of crisis placements:

- In-home respite
- Crisis foster care
- Crisis respite
- Crisis stabilization

2021 System Assessment



Explore creating crisis respite to address the lack of a short-term crisis response, particularly for children and youth, using Medicaid managed care financing provisions as the funding mechanism

Crisis care:

- ideally includes mobile teams that respond to urgent needs outside the routine delivery of care
- offers a continuum of time-limited out-of-home placement options ranging from crisis respite to acute inpatient to residential care.

2021 System Assessment - Crisis Respite



Finding: There are no available out-of-home, short-term crisis stabilization environments that could serve as an alternative to hospitalization for children and youth in crisis.

Crisis respite, whether facility-based or home-based, provides:

- temporary relief for caregivers
- a safe environment to resolve crises
- an opportunity to engage children, youth, and their families in services.

crisis respite can serve as a safe alternative to inpatient care.

2021 System Assessment - Crisis Respite



Crisis respite, whether facility-based or home-based, provides temporary relief for caregivers; a safe environment to resolve crises; and an opportunity to engage children, youth, and their families in services. Further, depending on the severity of the crisis and the needs of the child or youth, crisis respite can serve as a safe alternative to inpatient hospitalization. Services that may be provided in a crisis respite setting include crisis planning for the family and child/youth, therapy, and skills training. The goal is to strengthen the ability of children, youth, and their families to prevent future crises and to better manage them if they do occur.

2021 System Assessment Crisis Respite



Finding: There are no available out-of-home, short-term crisis stabilization environments that could serve as an alternative to hospitalization for children and youth in crisis.

Recommendation: Medicaid managed care providers should explore the provisions of Senate Bill (SB) 1177 to add crisis respite to the community's array of crisis services.



Open Discussion



Next Meeting

Opportunity For Change:

Improve integration of acute inpatient care within the broader health system continuum of care (e.g., appropriate, and well-coordinated transition care and support from inpatient to outpatient to Integrated Primary Care settings).

Strategy I - Expand on-site integrated primary care (IPC) capacity. (e.g., upgrade technology and HIE, Explore Child Psychiatry Access Network ICPAN) scaling).

Strategy II -Increase membership within the PdN Health Information Exchange, especially large provider networks and behavioral health hospitals (e.g., Rio Vista and El Paso Behavioral Hospitals).



Region 10



The Heart Galleries of Texas received funding in the 88th Legislative Session to improve permanency outcomes for youth who have experienced foster care. Over the past year, efforts have focused on expanding the Heart Galleries model across the state, increasing community collaboration, developing online trainings and resources, identifying the post-permanency needs of families, and conducting a Request for Applications (RFA) process to select qualified providers in each region to help meet the post-permanency needs of families.

About the Heart Gallery of El Paso



Heart Gallery Organization: Paso del Norte Community Foundation

Website: <https://www.heartgalleryelpaso.org/>

Launch Event: November 14, 2023

The Heart Gallery of El Paso has an active advisory board and strong referral relationship with DFPS. At the beginning of the year, they had 24 youth featured on their website and since then, they have received 19 new referrals and featured 10 more youth. Six youth featured this year were also adopted. In terms of community engagement, the gallery hosted a launch event on November 14, 2023, and organized 14 outreach events, reaching 440 attendees. They also held 9 collaborative stakeholder meetings, with 98 attendees, and 15 information sessions, attended by 144 community members. On average, they hosted 12 Heart Gallery exhibits a month displaying 47 portraits, and their web traffic has increased from 728 visits in January to 9,314 visits in August. In months where they held monthly news segments, web traffic reached over 40,000 visits.

Needs Assessment of Post-Permanency Services in Region 10



In March of 2024, researchers from the Texas Institute for Child & Family Wellbeing and staff at the Texas Center for Child and Family Studies conducted a statewide post-permanency needs assessment, surveying caregivers and providers about services, needs and barriers for families after adoption or permanency legal conservatorship. In Region 10, **10 caregivers** and **17 providers** participated in the survey. A summary of findings is reported below.

Familiarity with Post-Permanency Services

- 50% of caregivers ($n = 5$) and 53% ($n = 9$) of providers were very or extremely familiar with post-permanency services.
- Four caregivers reached out to their region's Post-Permanency Services Provider (40%).
- Three caregivers reported being very or extremely satisfied with the assistance they received (75%).

Service Satisfaction by Service Sector

- % of caregivers who were somewhat or very satisfied with:
 - Post-permanency services (80%, $n = 8$)
 - Medical services (70%, $n = 7$)
 - School-based services (44%, $n = 4$)
 - Developmental services (43%, $n = 3$)
 - Childcare (38%, $n = 3$)
 - Respite (22%, $n = 2$)
 - Mental health services (22%, $n = 2$)

Note: Percentages are based on the number of people who answer each question. Please exercise caution when interpreting findings with small sample sizes. Small sample sizes can limit the generalizability of the results, as they may not accurately represent the broader population.

Most Needed Services and Supports

- **Expanded mental health services**, including long-term psychiatric services, family therapy, residential treatment, crisis intervention support, grief counseling, and services for both youth and parents.
- **Qualified professionals** who can address issues related to trauma, adoption, bullying, sexual abuse, and sexual aggression.
- **Family supports available over time**, including peer support, group activities with other families, support over time, assistance with basic needs, and respite care.
- **Legal support and services**, particularly for conservatorship families.
- **Centralized place** where families can find help navigating different systems, learn about services and eligibility, and receive continued education.
- 67% of caregivers also indicated they were interested in **Parents Night Out** and 56% were interested in **family meet-ups or events**.

Caregiver Barriers to Accessing Services

- Lack of mental health services including residential treatment.
- Difficulties finding providers who can accommodate family schedules.
- Limited access to educational services such as tutoring and developmental disability support.
- Costs of services and residential treatment not covered by Medicaid.

Provider Barriers to Supporting Families

- Lack of continuum of care services, particularly residential treatment.
- Communication and language barriers.
- Lack of capacity, support, and funding to promote non-traditional programs or activities focused on creating strong connections within families.
- Lack of local funding and services available to kinship families.

Top services that caregivers needed but had difficulty accessing or were unable to get:

- Individual therapy (specialized)
- Residential treatment center (RTC)
- Family therapy
- Behavior support services
- Tutoring

To learn more about this needs assessment, go to: [Needs Assessment of Post-permanency Services in Texas Dashboard](#). You can locate all the data specific to your region.

Looking Ahead



The Heart Gallery and Paso del Norte Community Foundation are working toward building a more comprehensive and collaborative child welfare focus in the community, and taking leadership in that effort. Based on the needs assessment and RFA selection process, they were selected to provide services in Region 10:

- CASA of El Paso: Identify specialized providers to serve the El Paso community and open access to post-permanency families.
- El Paso Child Guidance Center: Provide Region 10 families with access to therapeutic services, including Parent Child Interactive Therapy (PCIT), and Attachment Based Family Therapy (ABFT).