MHMR of Tarrant County
Local Intellectual and Developmental
Disability Authority
Local Service Area Plan FY 2024
LOCAL INTELLECTUAL AND DEVELOPMENTAL AUTHORITY (LIDDA):

In accordance with Texas Health and Safety Code 553A.035(a), Health and Human Services Commission (HHSC) delegated MHMR of Tarrant County (MHMR) as the **Local Intellectual and Development Disability Authority (LIDDA)** for Tarrant County. This delegation includes the authority and responsibility for planning, policy development, coordination, including coordination with criminal justice entities, resource allocation and resource development for, and oversight, of Intellectual and Developmental Disability (IDD) services in the most appropriate and available setting to meet individual needs in the Local Service Area (Tarrant County).

The MHMR local volunteer Board of Trustees appoints members to the **Community Advisory Committee (CAC)** through an application process, in order to assure community input. The CAC is composed of no less than nine voting members in Disability Services, at least 51% of the membership consists of people served and family members, including family members of children, adolescents and adults. The Committee ensures that stakeholders’ input plays a significant role in local planning and network development.

Our mission statement: **WE CHANGE LIVES. WE CARE:**

- We **Connect** People in Our Community
- We Provide **Access** to Services
- We Link People to **Resources**
- We **Empower** People

MHMR provides a wide variety of information and services to people with IDD and their families. Disability Services serves as the first point of contact for publicly funded IDD programs, whether the program is provided by a public agency or private entity. Additionally, some direct services are provided for those who are eligible.

MHMR has a strong commitment to providing support and information to people with IDD, their families and providers. Sometimes the IDD services system can get confusing, but you can be sure MHMR is here to help.
Intellectual Disability: a condition characterized by significant limitations in intellectual or cognitive functioning, plus significant difficulties with personal skills, such as communication, selfcare, social skills and financial management.

Developmental Disability: conditions that begin usually before 18 years of age, that might impact daily living skills, such as reasoning, mobility, language and independent living. Examples include:

- Intellectual Disability (ID)
- Autism Spectrum Disorder (ASD)
- Fetal Alcohol Spectrum Disorder
- Traumatic Brain Injury
- Cerebral Palsy
- Down Syndrome

Priority Population: A group comprised of persons who meet one or more of the following descriptions:

- A person with an intellectual disability, as defined by Texas Health and Safety Code.
- A person with Autism Spectrum Disorder, as defined in the Diagnostic and Statistical Manual of Mental Disorders.
- A person with related condition, who is eligible for and enrolling in services in the Intermediate Care Facility (ICF/IDD), Home and Community Support (HCS) or Texas Home Living (TxHmL) programs.
- A nursing facility resident who is eligible for specialized services for intellectual disability or related condition pursuant to Section 1919 of the Social Security Act.
- A child who is eligible for Early Childhood Intervention services through HHSC.
- A person diagnosed by an authorized provider as having pervasive developmental disorder through a diagnostic assessment completed before November 15, 2015.

The determination of eligibility for the priority population must be made with assessments and evaluations performed by qualified professionals.
Since resources are insufficient to meet the service needs of every person in the priority population, services should be provided to meet the most intense needs first. Intense needs are determined as follows:

- A person is in danger or at risk of losing his/her support system, especially the living arrangement or supports needed to maintain self,
- A person at risk of abuse and neglect,
- A person’s basic health and safety needs not being met through current supports,
- A person demonstrates repeated criminal behavior.

MHMR may serve people who have resided in a State Supported Living Center on a regular admission status, but who may not be in the priority population.

**How To Start Services:**

**Step One:** Contact the **ICARE Call Center/Support Line** for a phone interview. The ICARE Call Center operates 24/7/365 and can be reached at (817) 335-3022 or (800) 866-2465 for toll free (services offered through ICARE – emergency mental health services, urgent care, crisis follow up, relapse prevention, support and reassurance, information/referral, crisis intervention services and screenings/intakes). **If medical emergency, call 911.**

**Step Two:** If you are referred to Disability Services, you will be contacted to schedule an intake appointment. Bring the following required documentation with you to this appointment:

- Proof of residence
- Proof of income (for the person if over 18, for the parent and person if under 18)
- Proof of insurance
- Social Security Card
- Picture ID or Driver’s License
- Guardianship Papers (if applicable)
- Proof of Diagnosis or Disability (if available).
- Special Education documentation/records
**Step Three:** Attend your intake appointment and schedule a follow up appointment for financial and diagnostic eligibility determinations.

**Step Four:** If after the eligibility assessment, and you are eligible for services, you will be referred, and your Intake Service Coordinator will assist you with the transition to your enrollment appointment.

**IDD SERVICES AND SUPPORTS:**

**ABG Adult Day Activity Center (Day Habilitation):** Day habilitation is an opportunity for adults with IDD to participate more fully in community life and make connections with other people. People who attend day habilitation participate in volunteer activities, continued learning, gardening, skill-building, exercise and many of meaningful activities.

ABG Solutions (ABG) is a business within day habilitation programming created to promote work skills and independence for people with IDD. Participants can work part-time schedule in the fulfillment business while at day habilitation. An assessment is necessary in order to join the fulfillment team, as space is limited. All people who are qualified to work at ABG make minimum wage.

**Advocacy:** MHMR is committed to supporting people and their families to identify what is important to them and what is available to reach their goals. Everyone should have a say about what their life looks like, and a plan for how to obtain their goals.

For support, the Advocacy staff are available to meet with people who have been diagnosed with a disability, as well as their family and supporting members. The Advocacy staff includes a family member of a person with disability and one self-advocate.

**Benefits Eligibility:** MHMR benefits staff provide people with assistance in the completion of applications for Medicaid/Medicare and other programs throughout the entire process of application and approval.

**Community First Choice:** Non-waiver Community First Choice (CFC) provides home and community based personal assistance services, habilitation and other supports. CFC is a self-directed, state funded program that supports people with IDD in living as independently as possible in their community. CFC provides
certain services and supports through managed-care organizations (MCO) to persons living in the community who are enrolled in Medicaid program and meet CFC eligibility requirements, which may include a DID/assessment.

**Services:**

- **Personal Assistant Services:** Assistance with activities of daily living or health related tasks.
- **Habilitation Services:** Learning, maintaining and improving the skills necessary to accomplish activities of daily living and health-related tasks.
- **Emergency Response Service (ERS):** is designed to assist people who do not require supervision during the day or are alone for large parts of the day and are cognitively able to recognize an emergency. This service connects a person to an ERS provider who notifies local authorities like paramedics or fire department, of the person’s emergency.
- **Support Management:** voluntary training on how to select, manage and dismiss paid attendants.
- **Information and Referrals:** to other community resources.
- **Support and Reassurance:** through service coordination contacts.

**Eligibility:**

- **Must have IDD or related condition.**
- **Must require an institution level of care needing help with activities of daily living such as dressing, eating and bathing.**
- **Must live in Tarrant County and be eligible for Medicaid.**

**Community Living Options Information Process (CLOIP):** MHMR provides information and education about community living options to persons who are 22 years or older residing in a state supported living center, or to the person’s legally authorized representative.

**Community Resource Coordination Group (CRCG):** CRCGs are county based, interagency staffing groups comprised of public and private agencies who work with children, families and adults with complex needs to develop a customized, integrated Individualized Service Plan (ISP) for people served through the CRCG. Local CRCG members include representatives from schools, public and private health and human services agencies, faith and community-organizations and local...
criminal justice service organizations. CRCG members work together to efficiently utilize existing resources, identify service gaps, remove barriers and find solutions for each individual or family. MHMR participates in the local service area CRCG.

**Crisis Prevention Services:** The (DS) Crisis Prevention Team works with a person, his or her family, provider and the important people in the person’s life to learn what leads that person to be in a crisis. Crisis Services are not permanent services but works with the person and team for support before, during and after crisis events. The Team focuses on the person’s strengths and assists the person’s team in better communication. The Team helps build skills for the person’s team to use during a crisis. The program is designed to divert unnecessary emergency service use, hospitalization and institutionalization. The Team does not just “fix” mental illness but promotes mental wellness in the lives of the people served. The Team uses a positive psychology, strengths-based approach. The main services offered by the program are:

- Systemic consultation
- Outreach, training and education to community mental health partners
- Crisis Planning and Support
- Therapeutic Supports and skills training for parents and support systems
- Collaborative care case management

**Crisis Intervention Specialist:** The Crisis Intervention Specialist provides information and facilitates access to services for people with IDD and their support systems. The Crisis Intervention Specialist collaborates with ICARE, Mobile Crisis Outreach Team (MCOT), Transition Support Team, Local Law Enforcement and Service Coordination to assist people who are at risk of needing crisis support. The primary services offered by the program are:

- Collaboration with the service coordinator, other members of the service planning team and paid provider, if any, to identify:
  - Prevention strategies to avoid potential crisis events and to promote the person’s coping skills; and
  - Training and support needs that provide the greatest chance of success of living in the community, such as scheduled respite services or planned crisis respite to avoid a potential crisis event; and
• Supporting the service coordinator’s provision of on-going follow-up and monitoring activities, including assisting the service coordinator, other members of the service planning team and paid provider, if any, in addressing concerns and issues identified during the follow up and monitoring visits, such as involvement with law enforcement or emergency room visits.

• Collaboration with the service coordinator, other members of the service planning team, paid provider, if any, and natural supports regarding crisis follow-up and relapse prevention activities, including:
  o assisting with a person’s transition from crisis respite back to his or her home or appropriate setting; and
  o addressing concerns and issues identified during the follow-up and monitoring visits such as involvement with law enforcement or emergency room visits.

• Consultation to MCOT as needed or as clinically indicated regarding a crisis event involving a person with IDD.

• Collaboration with an MCOT to develop criteria for referring a person with IDD in crisis to a crisis respite;
  o For a person referred to crisis respite develops a crisis respite service plan describing the therapeutic support needed by the person.

• Collaborates with local law enforcement by utilizing the Mental and Behavioral Health Outpatient Warehouse (MBOW) to review jail match reports and assisting in discharge planning for persons processed into correctional institution who have been identified as receiving services from the LIDDA in the past three years.

• Training and outreach to MCOT, law enforcement and community members to increase awareness of IDD/MH and about the way to engage persons with IDD and their unique needs.

• Navigating intake and access for people not yet connected to any services.

• Navigates In-Home and Out of Home Crisis Respite for people in behavioral health crisis.

• Collaboration with correctional institutions (Texas Law Enforcement Telecommunication System (TLETS)).
Friendship Groups: MHMR coordinates open friendship groups each month for women and men who have IDD. It is not a requirement to be served in MHMR services to participate. The group provides:

- Health and quality of life education as well as information of community resources through speakers
- Crafts
- Games
- Fellowship

Interest Lists: Because the demand for community-based services and supports often outweighs available resources, applicants’ names may be placed on a state-required interest lists until services are available. However, some needs may be met through other programs until an applicant’s name comes to the top of the list. Applicants are placed on interest lists on a first-come, first-served basis. When a person’s name comes to the top of the list, he/she will be contacted by a caseworker. When the LIDDA determines that someone is eligible, that person will need to choose a provider to deliver services, if he/she has not already done so.

Interest lists for community-based programs are managed either locally or statewide, depending on the program.

- To be added to the Health and Human Services Interest List for Community Living Assistance and Support (CLASS), Deaf Blind with Multiple Disabilities (DBMD) and the Medically Dependent Children’s Program (MDCP), call 1-877-438-5858.
- To be added to the Home and Community-based Services (HCS) and Texas Home Living (TxHmL) interest lists, contact 817-569-4140.
- To compare Long-Term Services and Support (LTSS) programs, visit www.hhs.texas.gov.

Pre-Admission Screening and Residential Review (PASRR): MHMR offers supports for people residing in nursing facilities. PASRR is a federal program that requires states to prescreen all people who apply to or reside in, a Medicaid-certified nursing facility (NF). This screening is intended to ensure that people
with a mental illness, intellectual disability or developmental disability diagnosis are receiving all the necessary specialized services.

PASRR also assists people residing in a community setting but are at imminent risk of long-term stay in a nursing facility. This is called Nursing Facility Diversion. There are certain eligibility requirements for a Nursing Facility Diversion. PASRR staff assist people in determining their eligibility and applying for diversion services.

**Habilitation Coordination:** MHMR provides habilitation coordination for anyone residing in a nursing facility. Habilitation Coordinators work collaboratively with the person’s service planning team to ensure access to appropriate specialized services necessary to achieve a quality of life and level of community participation acceptable to the person and legally authorized representative (LAR) on the person’s behalf.

**Residential Assistance:** To help a person identify alternative living options, MHMR provides potential residential placement options, based on eligibility. These residential options are funded through Medicaid:

- **Intermediate Care Facilities (ICF):** ICF is a 24-hour residential setting for people with an intellectual disability or related condition. An individual plan of care is developed, based on the needs and choices of the person and the person’s family. The unique needs of the person are the focus of the plan. Professional staff and other service providers work with the person and the person’s family to develop a plan based on the person’s skills, strengths and desires. Plans include comprehensive medical and therapy services and skill development programs. Staff helps with daily living activities, so the person gains skills to increase independence. Admission is based on bed availability for the ICF selected by the person or LAR. MHMR operates 13 certified Intermediate Care Facilities within Tarrant County.

- **Home and Community-based Services (HCS):** The HCS program provides services to a person with IDD who live with their family, in their own home, in host home/companion care setting, or in a residence with no more than four persons who receive services. Services meet the person’s needs, so the person can maintain himself or herself in the community and have opportunities to participate as a citizen to the maximum extent possible. Services consist of
adaptive aids, minor home modifications, professional therapies, behavior support, dental treatment, nursing, residential assistance, respite, day habilitation and employment services. Service Coordination is provided by MHMR.

**Outpatient Behavioral Health Initiative (OBI):** The Texas Department of Health and Human Services Commission (HHSC) provided LIDDAs throughout Texas a grant (OBI) to provide enhanced systemic supports and skills training to individuals with IDD and co-occurring mental health illness. The goal of the grant is to expand access to outpatient mental health services for persons with IDD. Services offered through MHMR:

- Cross-system biopsychosocial approach
- Education and training to community mental health partners
- Collaborative care case management
- Skills training for parents and support groups.

Through these services, the goal is to provide collaborative care service delivery of physical and behavioral health services for individuals with IDD, preventing or reducing crisis situations and increasing opportunities for outpatient mental health services. Verbal consent from either the individual or legal guardian is obtained, the individual will be entered into the program. The program is voluntary, and individuals can request to be discharged at any time.

**Respite:** Planned or emergency short-termed relief services to the person’s unpaid caregiver when the caregiver is temporarily unavailable to provide support due to routine and non-routine circumstances. This service provides a person with personal assistance in daily living activities (grooming, eating, bathing, dressing, personal hygiene) and functional living tasks. This service also includes assistance with:

- Planning and preparing meals.
- Transportation or assistance securing transportation.
- Assistance with medications.
- Supervision of the person’s safety and security.
- Use of natural supports and typical community services available to all people.
- Social interaction and participation in leisure activities.
• Assistance in developing socially valued behaviors and daily living functional living skills.

State Supported Living Centers (SSLC): SSLCs serve persons with intellectual disabilities who have significant medical or behavioral health needs in a residential campus-based community. SSLCs provide 24-hour residential services, comprehensive behavioral treatment and health care, such as medical, psychiatry, nursing and dental services. Other services include skills training, occupational, physical and speech therapies, adaptive aids, day habilitation, vocational programs and employment services, participation in community activities and services to maintain connections between residents and their families and natural support systems. SSLCs provide campus-based services in 13 locations in Texas. MHMR helps people/families apply for an SSLC placement.

Service Coordination: MHMR provides Service Coordination to persons residing in Tarrant County who are in the Home and Community Based Services (HCS) Waiver, Texas Home Living (TxHmL), General Revenue (Medicaid and Non-Medicaid) and Community First Choice programs. Service Coordination assists in accessing medical, social, educational and other appropriate services and supports. Functions:

• Assessment: Identify a person’s needs and the services and supports to address those needs
• Service Planning and coordination: Activities to identify, arrange, advocate, collaborate with other agencies and link the delivery of outcome focused services and supports that address the person’s needs and desires.
• Monitoring: activities to ensure that the person receives needed services, evaluates the effectiveness and adequacy of services and determines if identified outcomes are meeting the person’s needs and desires.
• Crisis prevention and management: activities that link and assist the person to secure services and supports that will prevent and manage a crisis.

Supported Employment: Texas Workforce Commission (TWC) offers many employment services for people with disabilities through Texas Workforce Solutions. MHMR is a certified provider of these employment services. If a person is currently in services with MHMR, your Service Coordinator can provide additional information and referrals for supported employment.
Supported Employment Services:

- Work Readiness
- Work Experience
- Pre-Employment Transition
- Project Search
- Job Placement
- Job Coaching
- Job Skills Training.

**Texas Home Living (TxHmL) Program:** TxHmL provides essential services and supports to people with IDD can continue to live with their families or in their own homes in the community. Services consist of community support, nursing, adaptive aids, minor home modifications, specialized therapies, behavioral support, dental treatment, respite, day habilitation, employment assistance and supported employment. Service Coordination is provided by MHMR.

**Transition Support Team (TST):** MHMR Transition Support Team provides education, training, consultation and technical assistance to HCS, TxHmL, CLASS and DBMD providers, LMHA/LBHA, and caregivers of people receiving Disability Services in Texas who are at risk of admission into or transitioning from institutional settings (Nursing Facilities, State Hospitals and State Supported Living Centers). TST provides support in the service area of MHMR, Betty Hardwick Center, Center for Life Resources, Helen Farabee Centers and Pecan Valley Centers. Institutional settings may include Nursing Facilities, State Hospitals and State Supported Living Centers. Services:

- Educational activities
- De-identified (as needed) case reviews
- Technical assistance, upon request from LIDDAs and providers, on specific disorders and diseases

**Texas Law Enforcement Telecommunication System (TLETS):** MHMR must ensure CIS and/or designee as determined by the LIDDA:

- Accesses the jail match reports upon notification of an exact or probable match. The jail match reports are housed in Mental Behavioral Health
Outpatient Warehouse (MBOW) and may be accessed via the Data Warehouse Portal.

- Notification of a match will be sent via email to the chosen mailbox identified by the LIDDA.
  - Confirms the matched person received the specific services tied to the grid codes that TLETS identified and determines if the person is currently open to services or if they were served in the past three years.
  - There is no three-year cutoff for persons under the age of 18 (youth).
- Coordinates with the person’s service coordinator, if applicable; and
  - Collaborates with the correctional institution to:
    - Clarify the status of the person
    - Move the person from the general population, if not already separated
    - Identify treatment or service needs, and
    - Coordinates collaborative post release diversion initiatives to assist the person in discharging from the correctional institution.
  - Local Mental Health Authorities/Local Behavior Health Authorities have jail diversion staff who work in collaboration with local law enforcement agencies. Many have staff co-located in the correctional institution. The CIS and/or designee, should establish a relationship with the staff to further support the continuity of care for people with IDD.

Summary

MHMR provides person-centered, trauma-informed care to people with IDD. People or families wanting to connect with Disability Services, should contact ICARE and we will navigate to MHMR or community services.