

Travel Support for Advocates on Workgroups & Councils

TCDD has provided funds since FY 2000 to support travel of public members to participate on state level advisory committees, councils, and workgroups that focus on issues of importance to individuals with developmental disabilities. This support recognizes the importance for individuals with disabilities and their families to participate in policy discussions about the services and programs that impact their lives. TCDD funding approval is intended to support self-advocates with disabilities or their family members who do not have support of a sponsoring organization or association for their travel to enable their participation as members of advisory bodies that are established by statute, approval of the agency's governing board, or authorization of the agency head. TCDD expects these public members to be appointed by the agency chief of the sponsor state agency.

TCDD will be reviewing the results of these efforts and considering approval of funding support for the next two years this fall. In order to better inform Council members about the impact of this effort the following is provided about each of the advisory committees/ councils that currently has members whose travel is supported by TCDD.

Children's Policy Council

Number / frequency of meetings:

- CPC generally meets quarterly, with additional meetings necessary during preparation of the biennial report to the Legislature.
- CPC also coordinated and presented two "policy briefings" to legislators and staff (Fall 2012);
- 2 presentations (Long Term Care Reform and Medicaid Acute Care Reform) to high level managers and staff of HHSC, DARS and DADS in 2012,
- prepared and presented to the Executive Commissioner 2 White papers (Statewide Dental Program and Prescription Drug Impact on Children with Special Needs)2011 -12,
- participated on the HHSC Durable Medical Advisory Group from 2012 to present,
- is named in and given two specific charges in Senate bill 7 (83R), is a member of the ADRC Advisory Committee (DADS) and has 2-3 meetings yearly for CPC leadership (2 members) with HHSC staff.
- SB 50 (83R) expands the CPC charge to incorporate children's mental health within its scope

Number of public members supported by TCDD: 3-4 public members currently. SB 50 (83R) adds 3 new members.

How established: Established in Texas Human Resources Code Chapter 22.035

Charge / Responsibility: To assist the Department of Aging and Disability Services, the Health and Human Services Commission, [Commissioner of health and human services], the [Texas] Department of State Health Services, the Department of Assistive and Rehabilitative Services and the Department of Family and Protective Services in developing, implementing, and administering family support policies for children with disabilities relating to:

- (1) long-term services and supports;
- (2) health services; and
- (3) mental health services

Council reports to: Texas Legislature

Brief description of impact of participation of public members in deliberations of advisory body (value added): This is a parent driven council. Parents, by legislation, hold the majority of membership.

Travel Support for Advocates on Workgroups & Councils

Each even year they present a recommendations report to the legislature proposing changes to improve the delivery of services to children with special needs. They have been instrumental in impacting legislation and driving change and improvements at the agency and program level through presentations, work group participation, briefing papers and discussions with invited speakers at their meetings.

Has CPC recommended that HHSC seek authorization to reimburse travel of public members? No. HHSC Appropriations Rider #4 authorizes travel reimbursement for CPC members and other HHSC advisory committees. Funds authorized may not be sufficient for biennium.

Consumer Direction Work Group

Number / frequency of meetings: Quarterly meetings. Subcommittees meet by phone.

Number of public members supported by TCDD: 6

How established (cite statute or other): Texas Government Code, Sec. 531.052

Charge / Responsibility: To advise the Health and Human Services Commission (HHSC) about the delivery of services through consumer direction in all programs offering long-term services and support.

Work Group reports to: HHSC

Brief description of impact of participation of public members in deliberations of advisory body (value added):

- Public members chair four committees (quality assurance, legislative advocacy, employer support, and education & outreach).
 - Members of the legislative committee develop a biennial report to the legislature.
 - All members made legislative visits prior to session to educate legislators and staff about the CDS workgroup's legislative recommendations.
 - Four recommendations (#s: 1, 4, 10, 11) were addressed in legislation.
- The Quality Assurance Subcommittee makes recommendations to DADS, many of which are reflected in DADS' rules. The CDS workgroup has influenced policies relating to Electronic Visit Verification (EVV), and changes in DADS rules relating to nursing assessments. Both of these issues are especially important and have a unique affect on those using the consumer direction option. The Workgroup will likely make additional recommendations on both of these issues before the end of the year.

Has Work Group recommended that HHSC seek authorization to reimburse travel of public members? No.

Council on Children & Families

Number / frequency of meetings: Quarterly meetings

Number of public members supported by TCDD: Support for 3 or 4 public members

How established (cite statute or other): Established by SB 1646 81R. Additional duties added by SB 717 82R and SB 44 83R.

Charge / Responsibility: The Council on Children and Families was established to help improve the

Travel Support for Advocates on Workgroups & Councils

coordination of state services for children.

Council reports to: As an independent Council, a report is required to the legislature on even-numbered years. Recommendations are also made to partner state agencies.

Brief description of impact of participation of public members in deliberations of advisory body (value added): Family and youth representatives have provided valuable input into the recommendations that are included in the legislative reports. For example: youth representatives have cited the need to include social media when communicating to youth; family representatives have identified the need for clear navigation tools to find services and supports; both youth and family representatives have cited the need to support models of practice that provide for family and youth voice and choice.

Has Council recommended that HHSC seek authorization to reimburse travel of public members?
No.

Additional Note(s): HHSC Appropriations Rider #4 reportedly authorizes travel reimbursement for this Council. Funds authorized may not be sufficient for biennium.

Task Force for Children with Special Needs

Number / frequency of meetings: 4-5 meetings yearly, plus subcommittee meetings specific to priority

Number of public members supported by TCDD: Support for 2 public members

How established (cite statute or other): SB 1824 (81R)

Charge/Responsibility: The purpose of the Taskforce on Children with Special Needs [SB 1824 (2009)] is to unite and direct a variety of key decision-makers to create and implement a strategic five year plan to improve the coordination, quality and efficiency of the delivery of services for children with chronic illnesses, intellectual and/or developmental disabilities and/or mental illness.

Task Force reports to: Overseen by Governor's office, is administratively linked to HHSC.

Brief description of impact of participation of public members in deliberations of advisory body (value added): Public members bring the parent voice and 'on the ground' perspective to agency discussion and deliberation. They provide crucial input to how processes and procedures either benefit or roadblock the delivery of services and often provide a more reasonable and cost saving approach to services. They also provide a real life view point about what services are the most useful and necessary as opposed to those ideas or views agencies might have. Their input draws attention to the funding stream and service delivery silos that exist within the agencies.

Has Task Force recommended that HHSC seek authorization to reimburse travel of public members? No

Other Notes: The TFCSN selected two priority projects for initial implementation

- *Informed and Empowered Parents* - This project which is already underway will result in a unique, independent website that will serve as the single portal for families of children, youth and young

Travel Support for Advocates on Workgroups & Councils

adults with special needs. This website will be a creative roadmap that begins at diagnosis and leads families along a guided path where they can choose information that best meets their needs at any point in their child's life, through the transition to adulthood and employment. It envisions bringing together a wealth of peer, community, faith based, private services and cross-agency services information. The website will also serve as a resource for state agency staff and 211 representatives as they work to assist families to identify and secure service and supports, both internal and external, to those available through state services.

- *Crisis Prevention and Intervention* – This project is underway. A unique subcommittee comprised of agency representatives, parent, faith based organization, Parent to Parent and EveryChild Inc was convened and has been working for several months. They are developing recommendations for the TFCSN to implement for this priority. The final plan is expected in May 2014.

Texas Traumatic Brain Injury Advisory Council

Number / frequency of meetings: Quarterly meetings plus 2-3 leadership meetings annually

Number of public members supported by TCDD: Support for 8 public consumer members

How established (cite statute or other): Established by the 78th Legislature, Chapter 1088, Section 2. Health and Safety Code, Title 2. Health, Subtitle D, Prevention, Control and Reports of Diseases, Ch. 92.051 – 92.063.

Sec. 92.063, Advisory Committee Statute is inapplicable. Chapter 2110, Government Code, does not apply to the council.

Charge / Responsibility:

- Inform state leaders of issues and policies as they relate to meeting the needs of persons with a traumatic brain injury and their primary family caregivers;
 - Recommend to state leaders policies and programs that more effectively serve persons with a traumatic brain injury and their families;
 - Recommend to the department methods to explore and promote innovative approaches to providing services and support to persons with a traumatic brain injury and their families;
 - Recommend to the department methods to promote education, training , and information about traumatic brain injury issues;
 - Advocate for persons with a traumatic brain injury and their families;
 - Recommend to the department methods to support activities aimed at reducing preventable brain injuries; and
 - Recommend to the department methods to conduct outreach to obtain public input.
-
- Make recommendations, at the request of the governor or legislative leaders, relating to activities appropriate to the achievement of legislative and executive functions relating to persons with a traumatic brain injury; and
 - Submit to the governor, legislature, and other appropriate state and federal authorities' periodic reports on the council's responsibilities and performance.

TBIAC reports to: The Council is supported by the Office of Acquired Brain Injury and activities are coordinated through that office. It is an independent entity under the auspices of HHSC. Reports are to be

Travel Support for Advocates on Workgroups & Councils

made to the executive commissioner and to the governor and other state leaders.

Brief description of impact of participation of public members in deliberations of advisory body (value added): The TBIAC public members educate state and national elected leaders about brain injury, policy and services and insurance coverage required by brain injury survivors. They are reportedly responsible for the passage of HB 2929 83R that requires insurance carriers to provide coverage for post-acute rehabilitation without limitation to types or length of service when deemed medically necessary by a licensed physician. The exceptional item in the HHSC Legislative Appropriations Request restoring the OABI to general revenue and the inclusion of cognitive rehabilitation therapy to four existing Medicaid waivers is due, in part, to the educational efforts of the TBIAC.

Has TBIAC recommended that HHSC seek authorization to reimburse travel of public members?

No

Other Notes: \$ 0.7 mil GR appropriated for 2 FTE for Office of Acquired Brain Injury in SFY 2014 and 3 FTEs in SFY 2015.

Texas System of Care Consortium

Number / frequency of meetings: Quarterly meetings

Number of public members supported by TCDD: 4 public members

How established (cite statute or other): SB 1234 76R and SB 421 83R.

Charge / Responsibility: The Texas System of Care Consortium (TxSOCC) is established to have responsibility for and oversight over a state system of care to develop local mental health systems of care in communities for minors who are receiving residential mental health services or inpatient mental health hospitalization or who are at risk of being removed from the minor's home and placed in a more restrictive environment to receive mental health services.

Task Force reports to: TIFI/TxSOCC makes recommendations to the legislature on even-numbered years and to partner state agencies.

Brief description of impact of participation of public members in deliberations of advisory body (value added): One of the cornerstones of a system of care (SOC) framework is: 'family-driven' "youth-guided" service planning. This translates to an individual plan of care or within a policy-making board, including a quality assurance role to ensure that the fidelity to the SOC framework is followed along with related evidence-based practices that operate within that framework. Specific examples include: family and youth representatives have been engaged through our Consortium membership to present at statewide webinars on the importance of family and youth voice and through a current social marketing campaign that highlights diverse perspectives in 3 to 5 minute video clips.

Has TIFI recommended that HHSC seek authorization to reimburse travel of public members?

Federal funds have assisted family or youth representatives to attend two Consortium meetings intermittently.

Other Notes: The TxSOCC's SMHSA grant may be able to absorb some of the travel costs.