

**CROSS-SYSTEMS TRANSITION  
CENTER CONVENING**  
[ON BEHALF OF TNOYS AND  
TEXANS CARE FOR CHILDREN,  
THANK YOU FOR YOUR  
CONTINUED COMMITMENT TO  
TRANSITIONING YOUTH, AND TO  
IMPROVING THE SYSTEMS THAT  
SHAPE THEIR LIVES.]

**Cross-Systems  
Transition Center Convening  
October 12<sup>th</sup>, 2010**

***Summary of Proceedings***

**Purpose of Convening:**

To develop a statewide approach, shared across systems, for delivering comprehensive, one-stop services to youth transitioning to adulthood.

**Process:**

The day began by hearing from three young adults on the Youth Research Team for TNOYS’ initiative, “Improving Mental Health Supports for Homeless and Transitioning Youth.” The young adults discussed the ways they have been involved with Transition Centers, the services that helped them the most, and what they would most like to change about transition services. It continued with a facilitated Strategy Session, the first step of which was to answer the question, “What are the key barriers/gaps in current system of services to youth transitioning to adulthood?” The participants used a Consensus Workshop process “sticky wall method” to brainstorm, clarify, and cluster ideas, then divided into work groups to identify strategies for addressing those barriers. The work groups reported their ideas and gathered further feedback from the larger group before all participated in prioritizing these strategies. The convening ended with key action steps to begin moving these ideas forward toward a common vision.

The four clusters of issues that participants identified are listed in the table below and detailed in the following pages. Short and long-term action items follow.

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## Issue Area #1: Transition Service Model, Life Skills Preparedness, Housing

### Issues Identified by Participants: Transition Service Model

1. Consistency in service models
2. Service Model for re-entry, aftercare, and family services
3. Acknowledgement of value of support services during re-entry from confinement
4. Transition planning for juvenile justice-involved youth
5. Continuity for youth who age out of Texas Youth Commission (TYC)
6. Problem of returning to same environment → risk of delinquency and re-entry
7. Connections to caring adults

### Issues Identified by Participants: Life Skills Preparedness

1. Youth Knowledge about systems
2. Low Preparation for Adult Living (PAL) class attendance
3. Rural youth transportation issues
4. Lack of leverage/information to promote better PAL class attendance
5. Parenting and interpersonal relationships
6. Employment soft skills

### Issues Identified by Participants: Housing

1. Stable consistent housing for older youth
2. Community-based emergency placement for youth
3. Locating living for youth with disabilities
4. HUD application process too long, cumbersome

### Solutions to the Above Issues as Identified by the Workgroup on Transition Service Models

1. Cross-System Best Practice Model → Systems of Care (Housing, Education, Work Skills)
2. Centralized information source for all transition services and issues- PAL web, TYC
  - a. Resource guide with Transition Center Links on website
  - b. Impact Access
3. Stronger PAL/Transition Center collaboration (contracts, practice)
4. Cross-system Decision Tree

## Issue Area #2: Cross System, Inter-Agency Coordination and Education

### **Issues Identified by Participants: Cross System, Inter-Agency Coordination**

1. Lack of knowledge about agencies, systems
2. Need to utilize and explore all resources
3. Communication to identify gaps, share resources
4. Need collaboration of providers at local level
5. Duplication of services
6. Resources/services for LGBTQ Youth
7. Agency buy-in for transition centers
8. Strong leadership for cross systems collaboration
9. Delinquent youth not identified or served by other agencies
10. Agencies being territorial
11. Funding
12. Lack of information sharing across agencies

### **Issues Identified by Participants: Education**

1. Stability/Credit Recovery at school districts
2. Public education systems' lack of readiness to accept juvenile justice-involved youth
3. Labeling of students increases barriers to student success
4. Need to improve pre- and post- secondary education outcomes

### **Solutions to the Above Issues as Identified by the Workgroup on Cross-Systems Issues:**

#### *On Information Sharing and Coordination:*

1. At the Youth Level:
  - a. Distribute information to transitioning youth through social media such as Facebook. The key is to put information where youth already are, not to try to drive them to a new site for information.
  - b. Establish local alumni groups
  - c. Amend the Council on Children and Families' Draft Recommendation regarding the use of the Texas 211 System as a "clearinghouse" for youth transition information. Use Facebook and other social media sites as the "clearinghouse", or establish Facebook pages than link into information from the 211 system.

2. At the Local/Regional Level:
  - a. Expand the Bexar County information sharing pilot began by the 2009 Texas Legislature by amending the scope and expanding to other large counties in the state
  - b. Develop Regional Leadership Councils, as recommended by the Council on Children and Families. Amend the draft recommendation to require solicitation of participation by local non-profits, service providers, families, and youth.

*On Funding:*

1. At the Youth Level:
  - a. Putting foster care benefits on debit cards would increase young peoples' accountability for spending the benefits responsibly
2. At the Local/Regional Level:
  - a. Develop Regional Leadership Councils, as recommended by the Council on Children and Families. Amend the draft recommendation to direct the Councils to leverage local funding in seeking federal and other additional funds for use at the local/regional level.
3. At the State Level:
  - a. Monitor outcomes for C.A.R.E. project in San Antonio for potential statewide replication
  - b. Texas Juvenile Probation Commission (TJPC) should connect transition center directors to Juvenile Chiefs to facilitate them working collaboratively
  - c. TYC is assessing how it might use its current transition/re-entry funds more effectively

## Issue Area #3: Texas Workforce Commission (TWC) Partnerships

### Issues Identified by Participants: Texas Workforce Commission (TWC) Partnerships

1. WIA (local workforce boards operating under the Workforce Investment Act) provider commitment to youth
2. Reduction in case management services by WIA
  - a. Local issue, LifeWorks recent experience
3. Job Training and opportunities
4. Vocational skills training
5. Workforce board services are fragmented
6. Workforce board services inconsistent between communities

### Issues Statement

Eligibility does not equal suitability (recognition of this)

### Solutions to the Above Issues as Identified by the Workgroup on TWC Partnerships:

1. Develop WIA outcome waiver, outcomes that take population into account and don't provide a disincentive for taking on certain clients
2. Data Validations Matrix
  - a. Help simplify the application/enrollment process by adding Transition Center/Birth Certificate document clarifications
    - i. i.e. for foster youth, someone who has seen the original birth certificate (not necessary to provide the original document)
3. Case Management
  - a. Not defined specifically in 10 'services' but can qualify if utilize specified services to describe the position
    - i. i.e. Case Manager provides guidance, a recognized 'service'
4. Job/Vocational Training that accounts for unique population
  - a. Training that recognizes barriers like transportation and work schedules
5. Point of Contact with Board Staff
6. Workforce Forum presentation regarding best practices, eligibility
7. Grants for training and education for youth; Department of Labor and Self Sufficiency funds
  - a. Example of H.A.Y. Transition Center program
  - b. Future Federal funds that could be obtained and used for stipends, training

## Issue Area # 4: Behavioral/Mental Health Capacity

### Issues Identified by Participants: Behavioral/Mental Health Capacity

1. Services for children without Medicaid eligibility
2. Over-medication
3. Licensed and/or certified Mental Health (MH)/Substance Abuse (SA) professionals to treat youth
4. Difficulty obtaining services from local mental health authorities (MHAs)
5. Providers able to meet medical and behavioral needs
6. Medication precautions/awareness
7. Substance abuse treatment
8. Inpatient treatment for juvenile justice-involved youth
9. Outpatient treatment for juvenile justice-involved youth
10. Mental health services

### Issue Statements:

1. Medication is relied on rather than other therapeutic interventions
2. Juvenile Justice and Child Protective Services youth are not considered a priority population by MHAs
3. Within the public mental health system, there is not an automatic transition/continuity of care for transitioning youth
4. Lack of licensed and/or certified MH/SA professionals negatively impacts (transitioning and other) services for youth

**Note:** The group decided to “table” the issues related to Medicaid for another time

### Solutions to the Above Issues as Identified by the Workgroup on Behavior/Mental Health Capacity:

1. Medication is relied on rather than other therapeutic interventions
  - a. Make psychiatric guidelines more available and share them with other systems
  - b. Shift from medication reliance to evidence based therapeutic interventions and trauma informed care (including intensive case management, peer support, grief and loss, music and other non-traditional therapy).

2. Juvenile Justice and Child Protective Services youth are not considered a priority population by MHAs
  - a. Youth should be considered a priority population by MHMR
  - b. Providers can devote case managers to special needs population
  - c. Providers should have relationships with MHMR
  
3. Within the public mental health system, there is not an automatic transition/continuity of care for transitioning youth
  - a. Standardize test/assessment process across systems
  - b. Create standards around re-assessment and redetermination
  - c. All providers should prioritize meeting the needs of youth with special needs as appropriate
  - d. Continuity of care needs to be part of transitional planning (MH services, SSI, housing, education, etc.)
  - e. Make sure plans for transition are realistic for youth
  
4. Lack of licensed and/or certified MH/SA professionals negatively impacts (transitioning and other) services for youth
  - a. Create legislative incentives to increase the number of MH professionals specializing in services for youth
  - b. Provide incentives to get MH professionals to rural areas

## Action Items

After each working group reported its solutions back to the full group, participants prioritized the solutions and identified both short and long-term action items. Participants also assigned responsibility for them to program participants, or points of contact, who were present at the event. The following are the short and long-term action steps and the points of contact, the appropriate program participant to initiate the needed changes and improvements prioritized by the Convening participants.

Short Term Action Items	Point of Contact
1. Transition Model and Preparedness: Centralize information- PAL and TYC websites; use keyword to increase web traffic	Christine Gendron and Gaye Vopat
2. Information Sharing: Texas Juvenile Probation Commission (TJPC) will connect transition center directors to Juvenile Chiefs to facilitate them working collaboratively	Vicki Spriggs
3. Information Sharing: a. Amend the Council on Children and Families' Draft Recommendation regarding the use of the Texas 211 System as a "clearinghouse" for youth transition information. Use Facebook and other social media sites as the "clearinghouse", or establish Facebook pages than link into information from the 211 system. b. Also mention in comments at Council hearing	a. Those on Council will take it back to Council  b. Jodie Smith and others
4. TWC Partnerships: Establish a local Point of Contact with Board Staff for Transition Centers	Reagan Miller
5. Behavioral/Mental Health: Standardize test/assessment process across systems	None Identified

Long Term Action Items	Point of Contact
<p>1. Behavioral/Mental Health: Shift from medication reliance to evidence based therapeutic interventions and trauma informed care (including intensive case management, peer support, grief and loss, music and other non-traditional therapy).</p> <p>a. TYC will share information on its internal shift in these areas</p>	<p>James Smith</p>
<p>2. TWC Partnerships: Share what the H.A.Y. Center in Houston is doing and possibly expand; TWC outreach team can help with grants; research new Department of Labor funding.</p>	<p>Reagan Miller</p>
<p>5. Transition services Model: Start a conversation on creating a Cross-System Best Practice Model based on a Systems of Care (Housing, Education, Work Skills) approach and look at work of Council on Children and Families in this area.</p>	<p>Raul Ahumada</p>
<p>6. Information Sharing: Develop Regional Leadership Councils. Amend the draft recommendation to require solicitation of participation by local non-profits, service providers, families, and youth.</p> <p>a. Testify on October 27<sup>th</sup> at hearing</p>	<p>a. Jodie Smith and others</p>

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