

CROSSWALK BETWEEN 39 CRITERIA AND 2005 ANNUAL REPORT

IMMEDIATE CRITERIA

H9: A mentally healthy community treats all individuals with dignity and respect

MMHTF End Date: 4/05 (on-going): The MMHTFMC sees this as an ongoing component of our community awareness focus area. It is included in the Values section of our action plan.

E8: A mentally healthy community maintains a culturally appropriate community suicide prevention plan that has the approval and support of the Mayor's Office, City Council, and the County Commissioners

MMHTF End Date: 8/05: Guidelines for Suicide Prevention in Austin/Travis County, Texas submitted July 20, 2005. Assistance with implementation of the guidelines is included in our community awareness focus area, and is one of our priorities for 2006.

H10: A mentally healthy community has training on how to access funds to build, own or modify housing and to access rental assistance

MMHTF End Date: /05: This will be a component of the comprehensive housing plan to be developed by the MMHTFMC in 2006. See the Housing focus area of the action plan.

E7: A mentally health community develops and implements an effective mental and physical wellness communication plan targeted at the general public

MMHTF End Date: 8/05: Communication plan has been drafted, but it is still under review.

E9: A mentally healthy community designates a staff member or department at the Austin Chamber of Commerce that is responsible for educating employers about the continuum of mental health from health to illness in order to increase productivity and decrease health care services required.

MMHTF End Date: 8/05: New target date: 8/06

H3: A mentally healthy community has data-driven systems to improve access to available housing options.

MMHTF End Date: 11/05: We believe that this will be an ongoing activity incorporated in our Housing focus area.

SHORT TERM CRITERIA

T4: A mentally healthy community partners with consumers and families to promote hope, recovery, and self determination.

MMHTF End Date: 2/06: The MMHTFMC considers this an ongoing component of our Community Awareness focus area. It is included in the values and Values section of our action plan.

J6: A mentally healthy community has policies that support the sharing of information between agencies within federal and state guidelines.

MMHTF End Date: 5/06: In 2005, the Community Action Network sponsored an information sharing review funded by six CAN partners. The result was a report by Copia Consulting that explored the information sharing potential of software utilized within the community. Further actions will be taken in 2006 to further explore this issue. See Page 16 of the Annual Report. The MMHTFMC believes that information sharing is an important ongoing effort that spans across all of our focus areas, and it is included in the Values section of our action plan.

J9: A mentally healthy community has a post-booking mental health and mental retardation docket for adults and juveniles with special training in mental health and mental retardation and related legal issues for all participants.

MMHTF End Date: 7/06 (on-going): Multiple activities have taken place in 2005 with regard to this criterion, including training and designation of specialist court personnel. Please see pages 10-12 of the Annual Report, and Strategy 2 under the Criminal Justice Diversion/Prevention Focus Area of the action plan.

J7: A mentally healthy community has mental health criminal justice diversion programs.

MMHTF End Date: 7/06: Multiple activities have taken place in 2005 with regard to this criterion. Please see pages 10-12 of the Annual Report and the Criminal Justice Prevention/Diversion focus area 1 of the action plan. A multi-agency Mental Health Jail Diversion Committee, with liaison to the MMHTFMC, will work to promote and support ongoing development of jail diversion programs.

J3: A mentally healthy community has a pre-booking system for adults and juveniles with the authority to divert and provide appropriate services. This system is created by a committee that includes representatives from the Austin Travis County Mental Health Mental Retardation Center, law enforcement, judicial, legal, medical, social workers, and mental health consumers.

MMHTF End Date: 7/06 (on-going): Multiple activities have taken place in 2005 with regard to this criterion. Please see pages 10-12 of the Annual Report and the Criminal Justice Diversion/Prevention focus area of the action plan. A multi-agency Mental Health Jail Diversion Committee, as described above, with liaison to the MMHTFMC, has been working to promote and support ongoing development of jail diversion programs.

J8: A mentally healthy community has adequate inpatient and outpatient dual diagnosis treatment for substance abuse and mental health disorders for adults and juveniles.

MMHTF End Date: 10/06: While multiple activities have taken place with regard to expansion of access to mental health services, as documented in pages 12-13 of the Annual Report and the Access to Mental Health Services focus area of the action plan, the MMHTFMC believes that the establishment of "adequate" dual diagnosis treatment in our community is a goal that extends beyond this proposed end date. As part of its coordinating function, the MMHTFMC will be monitoring decisions made, and impact of those decisions on the overall service delivery system, as described on page 19 of the 2005 Annual Report. This will include focus on dual diagnosis services. Our system mapping initiative, described on page 17 of the Annual Report, will also attempt to document current capacity of mental health services, including dual diagnosis services, as well as gaps in capacity.

H5 and H8: A mentally healthy community has a comprehensive city-wide housing plan which incorporates the needs of special housing groups as well as inclusionary zoning, such as requiring builders to construct a percentage of affordable housing units in their developments and pay into the housing trust fund for affordable housing. (Inclusionary zoning may not be legal in the state of Texas. There will need to be further definition created for inclusionary zoning before work begins on this criterion.)

MMHTF End Date: 12/06: As noted on page 12 of the Annual Report, and the Housing focus area of the action plan, the MMHTFMC will be coordinating the development of a comprehensive housing plan specific to the needs of individuals with mental health needs. Work has already begun on the plan.

T2: A mentally healthy community has access to outpatient services within one week of identified need (i.e., medications, psychotherapy, employee assistance (EAP-type) programs.

MMHTF End Date: 2/07: The Austin/Travis County community has been working diligently to expand timely access to outpatient services in 2005. Unfortunately, implementation of restrictive eligibility criteria mandated by the state, has resulted in the establishment of a wait list for outpatient mental health services for the first time in ATCMHMR history. The system mapping initiative, as described on page 17 of the 2005 Annual Report will attempt to document current capacity, and gaps in capacity. Several planning efforts are

under way to fill those gaps. In the current funding climate, it appears unlikely that this criterion will be fulfilled by the end date proposed by the MMHTF.

H1: A mentally healthy community has supportive case management available upon request which would prevent housing loss and access basic, emergency needs, such as emergency rental assistance, food, clothing, counseling, healthcare, shelter, utility assistance, down payment assistance, and transportation.

MMHTF End Date: 7/07: The comprehensive housing plan, as described on page 17 of the Annual Report, and in the Housing focus area of the action plan will begin to articulate and quantify the need for such services.

E6: A mentally healthy community ensures that policy makers understand the positive fiscal impact of prevention and treatment.

MMHTF End Date: 8/07: The MMHTFMC believes that this is an ongoing activity that relates to all of our Focus Areas. It is included in the Values section of our action plan.

T7: A mentally healthy community increases awareness that mental health issues affect all of us—"it is us"—and promotes the concept that mentally healthy lifestyles and a mentally healthy community are shared values.

MMHTF End Date: 8/07: The MMHTFMC believes that this is an ongoing component of our community awareness focus area, and it is included in the Values section of our action plan.

E1: A mentally healthy community utilizes social clubs, professional organizations, support groups, neighborhood groups, and faith-based communities as vehicles for community mental health education.

MMHTF End Date: 8/07: The MMHTFMC believes that this is an ongoing component of our community awareness focus area, and is included in the Values section of our action plan.

J1 and T1: A mentally healthy community has at least one Psychiatric Emergency Center in an existing hospital with a detoxification center attached and 24-hour psychiatric emergency beds in other local hospitals.

MMHTF End Date: 10/07: Negotiations are currently under way in the community with regard to a Psychiatric Emergency Center, but not with regard to a detoxification center.

T3: A mentally healthy community has short and long term residential treatment options based upon population needs.

MMHTF End Date: 10/07: This criterion will be revisited based upon results of all of the activities listed above.

H4: A mentally healthy community has training for all consumers, family members, and other stakeholders on local, state and federal laws and responsibilities.

MMHTF End Date: 11/07: The MMHTFMC considers this an ongoing activity encompassed in the Community Awareness focus area in the action plan.

LONG TERM CRITERIA

T6: A mentally healthy community promotes parity in mental and physical healthcare benefits beginning with City and County employees and extending to enrollees in publicly funded safety net delivery systems.

MMHTF End Date: 12/08: An analysis has already begun with regard to City employee benefits, and an analysis of County employee benefits will follow. These will be compared to national averages. Expansion of this effort in 2007 will include a similar analysis of publicly funded safety net delivery systems.

J10: A mentally healthy community provides training and education about how the mental health system works and roles of various stakeholders and the legal system process related to persons with mental health issues for the purpose of creating community awareness.

MMHTF End Date: 12/08: The MMHTFMC believes that this is an ongoing component of our Community Awareness focus area, and is included in the Values section of our action plan.

T8: A mentally healthy community provides training to promote optimal mental health, emphasizing systems of care, hope and recovery.

MMHTF End Date: 12/08: The MMHTFMC believes that this is an ongoing component of our Community Awareness focus area, and is included in the Values section of our action plan.

E2: A mentally healthy community has a broad based, community wide structure to carry on the work of the Mental Health Task Force's education and awareness campaign.

MMHTF End Date: 3/09 (on-going): The MMHTFMC believes that this is an ongoing component of our Community Awareness focus area, and is included in the Values section of our action plan.

E4: A mentally healthy community provides evidence-based, culturally appropriate mental health training for those who work with older adults, teens, substance abusers, people with co-occurring disorders, and people with developmental disabilities.

MMHTF End Date: 9/09: The MMHTFMC believes that this is an ongoing component that spans across all of our focus areas, and it is included in the Values section of our action plan.

E12: A mentally healthy community creates a Partners in Education program focused on mental health issues.

MMHTF End Date: 1/10: As articulated on pages 17 and 18 of the 2005 Annual Report, school issues will be a priority for the MMHTFMC in 2006.

J2: A mentally healthy community is willing to provide adequate resources and funding for all aspects of the mental health system.

MMHTF End Date: 2/10 (on-going): The MMHTFMC will monitor and promote efforts to advocate for the successful completion of this criterion. The system mapping initiative, and monitoring of "necessary balances," as described in our first annual report, will assist us in this regard.

T10: A mentally healthy community provides training for support network members in the community, inclusive of non-professionals and the faith community.

MMHTF End Date: 2/10: Training for support network members is incorporated into all of the focus areas in our action plan. In addition, a new focus area was added in early 2006 with regard to faith based activities.

H2: A mentally healthy community observes housing laws and rights for those with mental illness and to integrate individuals with a mental illness into the larger community.

MMHTF End Date: 2/10: The MMHTFMC considers observance of housing laws and rights for those with mental illness an ongoing effort. Description of these laws and rights will be incorporated into our comprehensive housing plan.

J4: A mentally healthy community has training available for specialists working in the system such as corrections, defense lawyers, prosecutors, criminal judges, probation, Crisis Intervention Team, and any other relevant law enforcement agencies, resulting in better interactions with relevant stakeholders and persons with mental illness in the system.

MMHTF End Date: 2/10 (ongoing): Such training has already begun, as reflected in the focus area of our action plan related to Criminal Justice Diversion and Prevention, as well as pages 10-12 of our Annual Report.

T9: A mentally healthy community ensures ready access to routine, urgent, and emergency care for mental health and substance abuse services.

MMHTF End Date: 2/10: The MMHTFMC believes this is an ongoing component of our Access to Mental Health Services focus area. The system mapping initiative (described on page 17 of the Annual Report) will assist the community in this regard by identifying current capacity and gaps in capacity for mental health services. This system map will be a component of multiple planning efforts regarding the mental health system in Austin and Travis County.

H6: A mentally healthy community has mandatory training for housing providers, bankers, lenders, developers and others on the housing needs and rights of individuals with mental disabilities.

MMHTF End Date: 2/10: The MMHTFMC believes that this will be incorporated into the recommendations in the comprehensive housing plan.

E11: A mentally healthy community ensures that schools teach students and teachers to value and appreciate individual differences and lifestyle choices, including both mental and physical health conditions.

MMHTF End Date: 3/10: The MMHTFMC believes that this is an ongoing effort incorporated into the Schools and Youth focus area of our action plan.

E10: A mentally healthy community includes mental health education in primary secondary, and post-secondary school curricula and to first responders, including police and emergency medical technicians.

MMHTF End Date: 4/10: This kind of education is incorporated into many of our focus areas, including Criminal Justice Diversion and Prevention, Schools and Youth, and Community Awareness.

T5, J5, and E5: A mentally healthy community has a policy to maintain and expand community standards for persons with mental illness in the areas of jail diversion, crisis intervention, and law enforcement training and practice based on a clear understanding of mental illness, the law, and best practice educational curricula. Linguistically and culturally competent models of best practice programs in other communities are reviewed and replicated.

MMHTF End Date: 8/10 (ongoing): This is included in our action plan as strategy 3 in the focus area related to Criminal Justice Diversion/Prevention.

E3: A mentally healthy community communicates with the public, the faith based community, and the media about the treatability of mental illness and the high success rates of various treatment modalities in a linguistically, ethnically, and culturally appropriate manner.

MMHTF End Date: 8/10: The MMHTFMC believes that this will be an ongoing effort within our Community Awareness focus area, and the newly created Faith Based focus area.

H7: A mentally healthy community has sufficient, safe, affordable, accessible and integrated housing units.

MMHTF End Date: 10/11: Our work under the Housing focus area of our action plan will be geared toward achieving this goal.

H11: A mentally healthy community has resources to hold people and providers accountable for violating fair housing and the Americans with Disabilities Act.

MMHTF End Date: 11/11: The MMHTFMC believe this is an ongoing effort under both our Community Awareness and Housing focus areas.