

## **Department of State Health Services Family Partner Position**

\*In 1965, the Mental Health & Mental Retardation Act, H.B. 3, created the Texas Department of Mental Health and Mental Retardation (TDMHMR), authorized creation of local boards of trustees to organize and administer community MHMR centers and set up guidelines for funding the centers.

\*In 1984, P.L. 98-509 Block Grant federal legislation required 10% of the mental health grant be used to initiate and provide new mental health services for children/adolescents with serious emotional disturbances and for new community mental health programs for underserved populations. During the 71<sup>st</sup> Legislature, S.B. 1697 clarified the department's responsibility to provide services for children and adolescents and required TDMHMR to develop budgets for children's services and develop departmental policies relating to children's programs.

\*In 1991, in a coordinated budget request by all child-serving agencies, the 72<sup>nd</sup> Legislature appropriated \$22 million to TDMHMR for the Texas Children's Mental Health Plan. Funds were distributed through a Request for Proposals to local communities and managed and monitored by local interagency teams made up of representatives of all of the major child-serving agencies.

\*In 1992, the first Parent Liaison was hired to work at TDMHMR with the Texas Children's Mental Health Plan. The minimum education, experience and training required: "Graduation from an accredited four-year college or university with major course work in social, behavioral, health or human services or other field related to providing and promoting parent support services to children and adolescents with severe emotional disturbance, plus one year of advocacy-related experience. **(One year of appropriate full-time experience may be substituted for one year of college on a year-for-year basis.)**" Must have good oral and written communication skills. PREFERRED QUALIFICATIONS: "Established advocacy network within respective community. Working knowledge of modern office practices and procedures. Possesses, or has the ability to gain considerable knowledge of procedures and policies of TXMHMR. Prefer four (4) years of advocacy experience of increasing diversity. Ability to work independently on difficult and complex tasks. Possesses the ability to meet the public in person and via telephone. Ability to prioritize work assignments." POSITION OVERVIEW: "Under the general supervision of the Director, Children's Services, Division of Managed Care. The incumbent plans, develops, and provides support to parent support efforts state-wide. She provides advocacy, staff training, technical assistance, and general consultation to TXMHMR on children and youth. She coordinates the state contract for the federal TURN grant, assists in setting parent support offices in community mental health centers, provides training in education rights and other entitlement programs, and coordinates the state advisory group for the Texas Children's Mental Health Plan."

NATURE AND SCOPE: The primary function of the Parent Liaison is to ensure coordination and development of parent and family support services for children and

adolescents served by our system. The incumbent processes all correspondence regarding family support issues, coordinates with a variety of existing parent support organizations and individual parents seeking assistance. He/she represents the Department on a variety of task forces and committees where input from family members is essential. She provides direct training about the rights of parents as they are in contact with systems of care, and develops materials for use by organizations and individuals. Primary internal contacts include the Director, Children's Services, the Division of Managed Care, and other staff members of Children's Department."

**MAJOR FUNCTIONS:**

1. Establish/maintain contact with representatives of parent support and advocacy groups across the state
2. Coordinate parent support activities with other disability groups
3. Represent parents and consumers in issues concerning child/adolescent services
4. Provide technical assistance to parents, support groups, and other interested parties
5. Coordinate contract with TURN, state-wide parent support network

Member of the MHPAC representing the Children's Department; identified family members for consideration on the committee

Member of the C-MAP representing the Children's Department; identified family members for consideration on the committee

Member of the State Management Team and staffed the Advisory Committee to the team Assisted the local Community Management Teams in identifying family members for the local teams

Developed guide for Centers in identifying family members for Parent Liaison

Seventeen Centers did hire/contract family members during this time for Parent Liaison

Ongoing training and technical assistance for parent Liaisons

Coordinate state contract for SAMHSA grant for State-wide Family Network, Texans United Regional Network (TURN); assisted Texas Federation of Families for Children's Mental Health (TXFFCMH) in relocation of office to Austin and local chapter development.

State representative on TIFI Consortium; on loan out to HHSC for TIFI development and expansion; training & technical assistance for 4 local systems of care communities; support and oversight for SAMHSA system of care grant, Austin Travis Co., The Children's Partnership.

\*In 2003, the 78<sup>th</sup> Texas Legislature, under House Bill 2292, mandated that the legacy TDMHMR develop and deploy an evidence-based disease management model for individuals in the mental health priority population. This evidence-based service model was completed and piloted in limited locations under TDMHMR. Family Partner positions were included in the model. DSHS completed the statewide rollout of this model, Resiliency and Disease Management (RDM) during State Fiscal Year (FY) 2005. The rollout of this model created fundamental changes in the type and amount of services delivered to children and adolescents with serious emotional disturbances (and to adults with severe and persistent mental illness). As a part of this initiative, the legacy agency developed and DSHS deployed the Child/Adolescent Texas Recommended Assessment Guidelines which is used to ensure that each child/adolescent receives a uniform

standardized assessment. The Child/Adolescent Texas Recommended Assessment Guidelines and the associated Utilization Management Guidelines have been used to help ensure that children/adolescents receive appropriate types of evidence-based services in amounts that are sufficient to be therapeutically effective.

In conjunction with the rollout of Resiliency and Disease management, DSHS also developed and deployed an encounter data reporting and warehousing system that allows DSHS to track the performance of contracted service providers. Using this system, DSHS is now able to track provider performance across numerous domains that will help ensure that children/adolescents with serious emotional disturbances are properly assessed, assigned to an appropriate service package, and receive a therapeutically sufficient amount of services.

The state Family Partner (Liaison) position has evolved over the years. This position performs advance policy and administration work related to MH Community Services. Work involves developing/revising products to support RDM. This includes fidelity tools, UM Guidelines, FAQs and policy interpretation memos. Work is primarily focused on child MH programs and policy. Specific activities may include: providing input on policy issues arising from quality management and Performance Contract procurement, development and oversight, specific external contracts, development of statewide and targeted training and technical assistance activities, quantitative and qualitative analysis and support for ongoing research and analysis activities related to MH services. The position takes leadership role on the Program Services Unit in regard to issues related to Systems of Care, with emphasis on integrating the Wraparound model of service delivery and the role of the Family Partner within the RDM model.

Activities:

Write the TIFI RFP; develop statement of work, program oversight for TIFI system of care contracts.

Member of the TIFI Consortium and subcommittee

Member of the State CRCG Work group

Technical assistance for LMHAs regarding Family Partner positions and services

Technical assistance for Family Partners

Member of Children's Cross Function Team (MHSA Division)

Member of cross agency work groups/teams that involve children/adolescent with serious emotional disturbances

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