The vision of the Texas Veteran Jail Diversion and Trauma Recovery grant is to establish community-based practices for diverting veterans with trauma-related mental health needs from incarceration to treatment. The State Advisory Committee includes representatives from the three Veterans Integrated Service Networks that cover Texas (VISNs 16, 17 and 18), U.S. Vets, the Texas Council of Community Mental Health Mental Retardation (MHMR) Centers, National Alliance on Mental Illness – Texas, and the Texas Correctional Office on Offenders with Medical and Mental Impairments, among others. The Bexar County (San Antonio) pilot uses pre-diversion through law enforcement to the sobering unit at the county’s restoration center. A female trauma therapist is available to work with female veterans. Texas has convened three annual summits on justice-involved veterans. The grant has also worked with a Governor’s initiative that supported a range of coordination, clinical training, and peer-to-peer programming focused on veterans and military families through the local mental health authorities, including the development of veterans treatment courts. The grant is exploring statewide training in trauma-informed care and leveraging the MHMR contracting process by modifying the requirements around jail diversion to include activities related to veterans and trauma.

Statewide Rollout & Sustainability

Texas Legislature passed Senate Bill 1940, authorizing veterans’ pretrial court programs, and SB 1796, mandating the creation of the Texas Coordinating Council for Veteran services to coordinate among agencies and make recommendations to the legislature. Trainings have been a large piece of the statewide rollout efforts—the program has convened three statewide conferences on veterans and trauma, and hosted a Sequential Intercept Mapping (SIM) facilitator training by the GAINS Center. The goal of the SIM facilitator training was to prepare representatives from counties participating in the rollout to “map” the cross-systems flow of veterans who come into contact with the criminal justice and behavioral health systems, and identify points of diversion. Eight communities or regions in Texas participated in the rollout of JDTR because they have demonstrated a commitment to serving veterans, have dedicated resources for veterans’ services, and have a functioning Veterans Court and/or an outstanding jail diversion program. These communities are Austin, Edinburgh (Rio Grande Valley), El Paso, Houston, Kerrville, Lubbock, Sequin (South Central Texas), and Tyler (East Texas). In addition to the community representatives, three representatives from the Texas Department of State Health Services and two representatives from the University of Texas participated in the SIM Facilitator Training. Finally, the JDTR program is providing grants to eight communities to support diversion of veterans, provide Seeking Safety, and other interventions/services for veterans.

Point of Diversion

Intercept 1 – pre-diversion through law enforcement to the sobering unit

Summary of JDTR Features

Veteran/Peer Involvement

Peers are involved in state and pilot advisory capacities, and provide support services and linkages to treatment, services, and resources. The Veteran Representative from the San Antonio pilot participates actively in the GAINS Veteran Learning Community and has presented at national conferences on CIT and veterans’ diversion.

Trauma-Informed Care

At the pilot site, trauma-informed care trainings have been delivered to 1,815 people, including behavioral health and justice system practitioners. Military culture and trauma modules have been incorporated into the crisis intervention team training for law enforcement officers. The JDTR program is developing written guidance on trauma-informed jail diversion for local mental health agencies.
Texas Jail Diversion and Trauma Recovery Priority to Veterans Program

Grant awarded September 2009 - ending September 2014 (6 month/12 month no-cost extension available)

Program Overview

The vision of the Texas Veteran Jail Diversion and Trauma Recovery grant was to establish community-based practices for diverting veterans with trauma-related mental health needs from incarceration to treatment. The Bexar County (San Antonio) pilot uses pre-booking diversion through law enforcement to the sobering unit at the county’s Restoration Center. A veteran peer serves as an outreach case manager and a female trauma therapist is available to work with female veterans. Bexar County was chosen as the pilot site because the area has a history of prior jail diversion programs and because it is home to over 150,000 veterans. The pilot serves a population that has not been served by previous diversion efforts, primarily chronically homeless veterans with trauma disorders. One of the main goals of the JDTR program was to establish best practices at the pilot site and then expand the program by implementing those best practices across the state of Texas.

Statewide Rollout

The local advisory committee is the San Antonio Coalition for Veterans (SACV). The SACV represents many interested parties from the community and all of the service providing agencies. There are over 120 members on the SACV with an average of approximately 90 members present at each meeting.

The State Advisory Committee includes representatives from the three Veterans Integrated Service Networks that cover Texas (VISNS 16, 17, & 18), U.S. Vets, the Texas Council of Community Centers, National Alliance on Mental Illness - Texas, and the Texas Correctional Office on Offenders with Medical and Mental Impairments, among others. Pilot site leader, Gilbert Gonzales, has left the program to become the Director of the County Mental Health Office which is a new component within Bexar County government. With Mr. Gonzales leading this new office he will be able to bring attention and resources to the JDTR program.

Training

The GAINS Center has trained at least two representatives from each of the 8 expansion sites in the Sequential Intercept Model (SIM facilitator training). In addition to the community representatives, three representatives from the Texas Department of State Health Services and two representatives from the University of Texas participated in the SIM trainings. It is expected that participants of the SIM facilitator training will conduct mappings in at least one community in their service area.

Policy Changes

- SB1940 passed authorizing veterans pretrial court programs
- SB1796 mandated the creation of the Texas Coordinating Council for Veteran Services
- HB2392 mandates jail diversion for veterans
- HB634 mandates the Texas Department of Corrections to investigate and verify the veteran status of each inmate by using data made available from the system through the Health and Human Services Commission; and to use system data to assist inmates who are veterans in applying for federal benefits or compensation for which the inmates may be eligible under a program administered by the United States Department of Veterans Affairs.

Other Legacy Accomplishments

Texas has held four statewide conferences focusing on veterans issues and trauma and will hold at least one more statewide conference before the end of the JDTR grant cycle. It is expected that the pilot and all 8 expansion sites will be fully sustained through the use of Medicaid funds, Care-LINK funds and through state funding. Federal approval has been granted for 1115 Medicaid waiver which will allow the state to expand Medicaid managed care while preserving hospital funding, provide incentive payments for health care improvements and direct more funding to hospitals that serve large numbers of uninsured patients.