



El Paso Youth Sequential Intercept Model (SIM) Report

Mapping School-Justice Pathways

JUNE 2024

MEADOWS
MENTAL HEALTH
POLICY INSTITUTE

PASO *del* NORTE CENTER
Meadows Mental Health Policy Institute

Acknowledgements

The Meadows Mental Health Policy Institute is grateful to the Paso del Norte Health Foundation and the Texas Judicial Commission on Mental Health for their generous financial support for this initiative. We are especially grateful to the members of the team at the El Paso Juvenile Probation Department, who initiated and played a pivotal role in coordinating various aspects of the project, and to the Steering Committee members for their invaluable time and expertise throughout the duration of this engagement. We are also deeply grateful to the over 85 individuals who generously shared their insights during interviews and/or participated in the SIM Mapping summit. Their contributions were instrumental in developing the action plans and shaping the findings and recommendations presented in this report.

El Paso, Texas, stands as an exemplary model of a community committed to providing substantial support and resources to those in need. The Meadows Institute recognizes and commends El Paso's unwavering dedication to strengthening systems of care and guiding youth away from the juvenile justice system.

Table of Contents

- Project Overview5**
 - Project Background 5
 - The Need 5
 - Meadows Mental Health Policy Institute 6
 - Project Sponsors..... 6
 - Project Methodology..... 7
 - About SIM Mapping 8
 - Focus on School-Justice Pathways 10
 - Target Population 10
 - Value of SIM Mapping 11
- Intercept 00: Community Services & Behavioral Health13**
 - Resources 13
 - Gaps, Challenges, and Opportunities for Change..... 15
 - Agency Spotlights 19
- El Paso SIM Map: Intercept 0023**
- Intercept 0: School-Based Supports & Systems25**
 - Resources 26
 - Gaps, Challenges, and Opportunities for Change..... 26
 - Agency Spotlights 33
- El Paso SIM Map: Intercept 038**
 - Process Map 1: School Discipline and Arrest Flow 39
- Intercept 1: Law Enforcement42**
 - Resources 42
 - Gaps, Challenges, and Opportunities for Change..... 43
 - Agency Spotlights 50
- El Paso SIM Map: Intercept 153**
 - Process Map 2: Juvenile Justice Flow of Case and Timelines 54
- Priorities for Change57**
 - Priority Workgroup Action Plans 1-5 57
 - Recommendations for Moving the Youth SIM Action Plans Forward..... 64
- Appendix Table of Contents68**
 - Appendix 1: Youth SIM Workshop & Interview Participant List..... 69
 - Appendix 2. Youth SIM Workshop Agenda 71
 - Appendix 3. El Paso Juvenile Probation Department Data Presentation..... 73
 - Appendix 4. Links to Select Resources..... 79
 - Appendix 5. First Offender Program for THC Felony Vaping 80
 - Appendix 6. School Justice Partnership Model Sample Agenda 82
 - Appendix 7. Best Practices at Intercepts 0-1 83
 - Appendix 8. Acronyms..... 88

Project Overview

Project Overview

In July 2023, the El Paso Juvenile Probation Department (EPJPD), under the leadership of Chief Rosie Medina and Deputy Chief Marc Marquez, engaged the Meadows Mental Health Policy Institute (Meadows Institute) to launch the **School-Justice Pathways Youth Sequential Intercept Model (SIM) Mapping Project (Youth SIM)**. The initiative convened a diverse group of community stakeholders, including educators, justice and law enforcement professionals, clinicians, and representatives from community-based organizations to engage in constructive dialogue and formulate action plans to prevent young people from entering the juvenile justice system.

Project Background

This project emerged from EPJPD's participation in the Transforming Juvenile Probation Certificate Program through the Center for Juvenile Justice Reform at Georgetown University's McCourt School of Public Policy and the Annie E. Casey Foundation. The EPJPD team traveled with other jurisdictions from Harris County (Houston) and Cook County (Chicago) to Washington, DC in 2022 to explore how to fundamentally transform its system-wide approaches to probation and diversion. The work that followed in 2023 involved evaluating current juvenile probation and diversion processes in El Paso, collaborating with a variety of stakeholders in the community, identifying opportunities to enhance efforts, and creating a set of concrete action steps for reform. The certificate program culminated in a Capstone Project with three goals for developing an ideal juvenile probation and diversion system in El Paso County:

- Goal 1: Create court orders that empower families and promote positive youth development.
- Goal 2: Enhance diversion/prevention services to increase the number of youth diverted.
- Goal 3: Develop community-driven services focused on positive youth development.

Each goal is accompanied by specific strategies and action steps involving various partners and emphasizing data-driven approaches. The Youth SIM Initiative described in this report was identified as a key strategy for accomplishing Goals 2 & 3.

The Need

One of the critical concerns highlighted through a review of agency data was the alarming statistic that nearly 40% of referrals to the El Paso Juvenile Probation Department originated from school partners (*see Appendix 3, Data Presentation*). Research shows that involving

children in the juvenile justice system inadvertently increased their risk factors, further underscoring the importance of proactive diversion strategies.¹

Meadows Mental Health Policy Institute

Team members at the Meadows Institute have extensive experience facilitating the structured process of SIM mapping for adult and youth justice systems, as well as related process mapping experience with other systems, including veterans, crisis, and schools. They are skilled at bringing together diverse stakeholders and facilitating high stakes community dialogue and problem-solving conversations. Through dozens of tailored community mental health system assessments, Meadows Institute has helped counties and systems of all sizes across Texas develop strategies to support people with behavioral health needs before, during, and after they interface with the justice system. Additionally, Meadows Institute has worked in El Paso for over a decade, including SIM mapping the adult justice system in the summer of 2022, and a county-wide mental health system assessment with a school mental health and youth justice-focused component in 2021 (updated from its inaugural assessment in 2014).

The Meadows Institute launched the regional **Paso del Norte Center** (PdN Center) in 2021. The Paso del Norte Center provides trusted policy and program support to cultivate collaboration and create lasting improvements so that mental health and emotional well-being services and support are available where and when they are needed. The PdN Center facilitates the El Paso Behavioral Health Consortium. Through its workgroups, including the Family Leadership Council, Justice Leadership Council, and other cross-sector workgroups, the Consortium will be the mechanism used to move the priority workgroups and action plans developed through the Youth SIM forward.

Project Sponsors

This project was made possible through generous grant funds from the Texas Judicial Commission on Mental Health and the Paso del Norte Health Foundation.

The **Texas Judicial Commission on Mental Health (JCMH)** operates under the jurisdiction of the Texas Supreme Court. Established in 2018, JCMH comprises a team of individuals dedicated to improving the administration of justice for people living with mental illness and intellectual or developmental disabilities who become involved in the legal system. JCMH offers a range of

¹ See Holly A. Wilson and Robert D. Hoge, The Effect of Youth Diversion Programs on Recidivism: A Meta-Analytic Review, 40 *CRIM. JUST. & BEHAVIOR*, 497, 499 (2013) (“A growing body of results from empirical research is also providing at least indirect support for the use of diversion. This research demonstrates clearly that involvement in the juvenile justice system, holding all other factors constant, is associated with an increased likelihood of offending behavior.”); see also Barry Holman & Jason Ziedenberg, Justice Policy Inst., *The Dangers Of Detention: The Impact of Incarcerating Youth in Detention And Other Secure Facilities* (2006) (“A recent literature review of youth corrections shows that detention has a profoundly negative impact on young people’s mental and physical well-being, their education, and their employment.”).

resources, tools, and reports aimed at assisting individuals and communities dealing with mental health-related legal challenges and is actively engaged in expanding its resource offerings, including insights gathered from various initiatives such as this mapping project.

The **Paso del Norte Health Foundation** is a prominent philanthropic organization dedicated to improving the health and well-being of the Paso del Norte region, which includes West Texas, Southern New Mexico, and Ciudad Juárez, Mexico. With a steadfast commitment to creating healthier and more vibrant communities, the foundation has been a driving force behind numerous initiatives and projects aimed at addressing critical health issues and social determinants of health in the region. Through strategic grantmaking, collaboration with community partners, and innovative programs, the Paso del Norte Health Foundation has made significant strides in promoting access to quality healthcare, encouraging healthy lifestyles, and supporting initiatives that enhance the overall quality of life for individuals and families in the area. Their visionary leadership and dedication to fostering positive change have left an indelible mark on the communities they serve, making them a cornerstone in the region's efforts to build a healthier future for all.

Project Methodology

In partnership with the stakeholders described above, the Meadows Institute developed the report, maps, and action plans that follow in three phases:

Phase 1: Coordination & Information Gathering (August – September 2023)

- Convened an interdisciplinary steering committee to guide the process.
- Developed a target participant list and recruited cross-sector stakeholders to attend the SIM event and participate in pre-mapping interviews (*see Appendix 1, Participant List*).
- Conducted ten pre-mapping interviews to gather information for the map and report.
- Gathered quantitative data to support decision-making.
- Reviewed reports and documents publicly available or provided by the community to inventory existing resources and collaborations.

Phase 2: SIM Mapping Summit (October 2023)

- Facilitated a full-day, in-person Youth SIM mapping event followed by a half day of action planning around the top five priorities identified.
- During the mapping process, facilitators provided a brief presentation and shared data specific to El Paso County for Intercepts 00, 0, and 1.
- Participants shared opportunities and gaps in an open discussion, co-creating the map visual using interactive exercises and facilitated dialogue.
- Community stakeholders were introduced to evidence-based and emerging best practices.

- At the end of the day, participants reported on their top priority and participated in a voting process to identify five priorities for action.
- On day two, workshop participants broke into groups to discuss and document action plans around the five priorities.

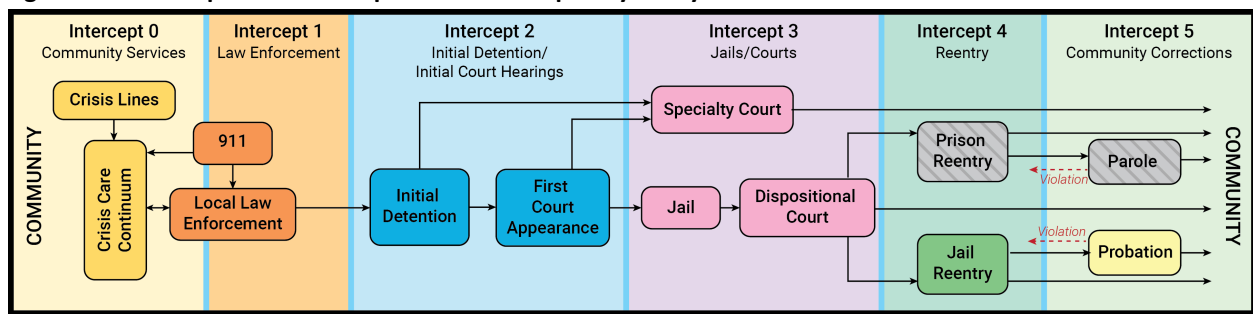
Phase 3: Report, Action Plans, and Maps (November 2023 – May 2024)

- The culmination of the mapping process was the creation of a local roadmap based on the gaps, resources, and priorities identified by community stakeholders.
- This tailored SIM report includes:
 - Resources, opportunities, and gaps identified during mapping and pre-mapping interviews, with recommendations and model best practices.
 - A set of county action plans around the top five priorities developed by participants during the mapping session.
 - Visual SIM maps of the youth justice system in El Paso with supplemental process maps documenting the flow from schools to the justice system.

About SIM Mapping

The Sequential Intercept Model (SIM) addresses issues related to youth involvement in the justice system. The SIM, a framework endorsed by the federal Substance Abuse and Mental Health Services Administration (SAMHSA), was developed by Policy Research Associates and has been employed for over two decades across the United States to facilitate justice diversion planning across multiple systems (Figure 1).² El Paso has used the SIM to map diversion opportunities in its adult criminal justice system since 2014, with the most recent adult system SIM update conducted in 2022 by the Meadows Institute.

Figure 1. Adult Sequential Intercept Model developed by Policy Research Associates



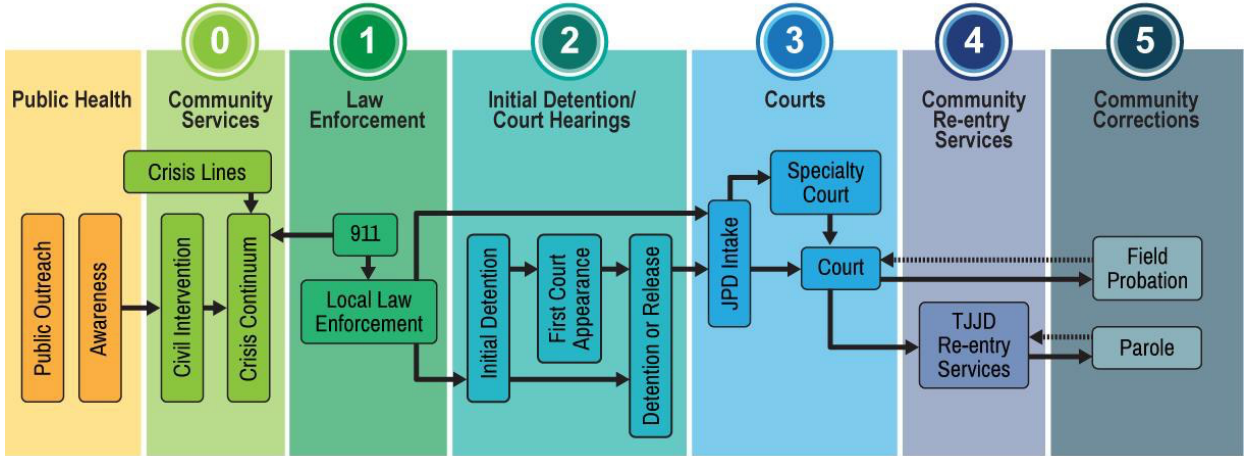
© 2016 Policy Research Associates, Inc.

The SIM is structured around various intercepts or phases within the justice system, commencing with community resources and progressing through a person's initial interaction

² Munetz, M. R., & Griffin, P. A. (2006, April). Use of the Sequential Intercept Model as an approach to decriminalization of people with serious mental illness. *Psychiatric Services*, 57(4), 544–549. <https://www.ncbi.nlm.nih.gov/pubmed/16603751>

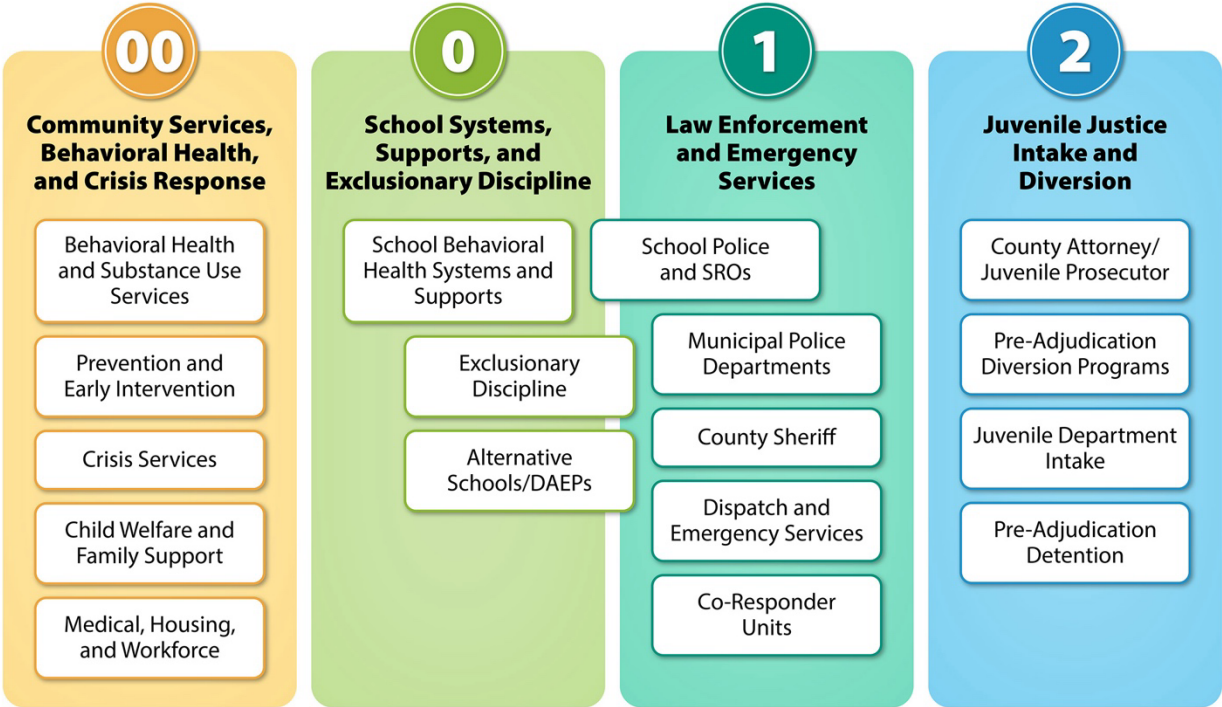
with law enforcement, involvement in the court system, and eventual reentry into the community. A collaborative effort involving various agencies, including the Office of Forensic Coordination, the Texas Health & Human Services Commission, JCMH, and the Meadows Institute, has been focused on adapting this adult SIM model for youth and aligning it with the Texas context (Figure 2).

Figure 2. Youth Sequential Intercept Model adapted for Youth by the Texas Judicial Commission on Mental Health



The Meadows Institute’s School-Justice Pathways adaptation of the SIM (Figure 3) details the journey of youth through the justice system, with a special focus on schools, school-based law enforcement, crisis, and other youth-serving systems. SIM mapping workshops bring together leaders and agencies from different sectors to assess community resources, enhance coordination, and devise strategies to divert youth from justice involvement at key intercept points.

Figure 3. School-Justice Pathways SIM Map, Adapted by Meadows Institute



Focus on School-Justice Pathways

This Youth SIM initiative concentrated efforts on the first three intercepts, specifically mapping resources, gaps, and opportunities within community-based services (Intercept 00), school behavioral health and other systems of support, including exclusionary discipline practices and the flow of students to disciplinary alternative education programs (Intercept 0), and school-based and community-based law enforcement practices, focusing on alternative responses and their intersection with public behavioral health and crisis systems (Intercept 1), ending at the threshold of juvenile detention or intake (Intercept 2). The model placed a special focus on the critical issue of vaping-related offenses driving exclusionary discipline and justice involvement, particularly with new legislation (HB114, 88th Legislative Session) mandating Disciplinary Alternative Education Program (DAEP) placement for nicotine vaping (e-cigarette) offenses.

Target Population

This initiative focused on children and youth with high numbers of Adverse Childhood Experiences (ACEs), serious mental illness, substance use disorders, exclusionary discipline referrals (suspension, expulsion), arrests or referrals into the juvenile justice system, or those at risk of justice involvement, with an emphasis on addressing unmet behavioral health needs that may contribute to misbehavior and delinquency.

The three local school districts of focus for the initiative included Socorro ISD, El Paso ISD, and Ysleta ISD, selected among the eight districts in El Paso County based on their higher numbers of

referrals into the juvenile justice system and to keep the scope of the mapping exercise manageable. This is the first step in a longer-term plan to map the entire system of care, and the team hopes to expand the mapping to include more districts and intercepts in the future.

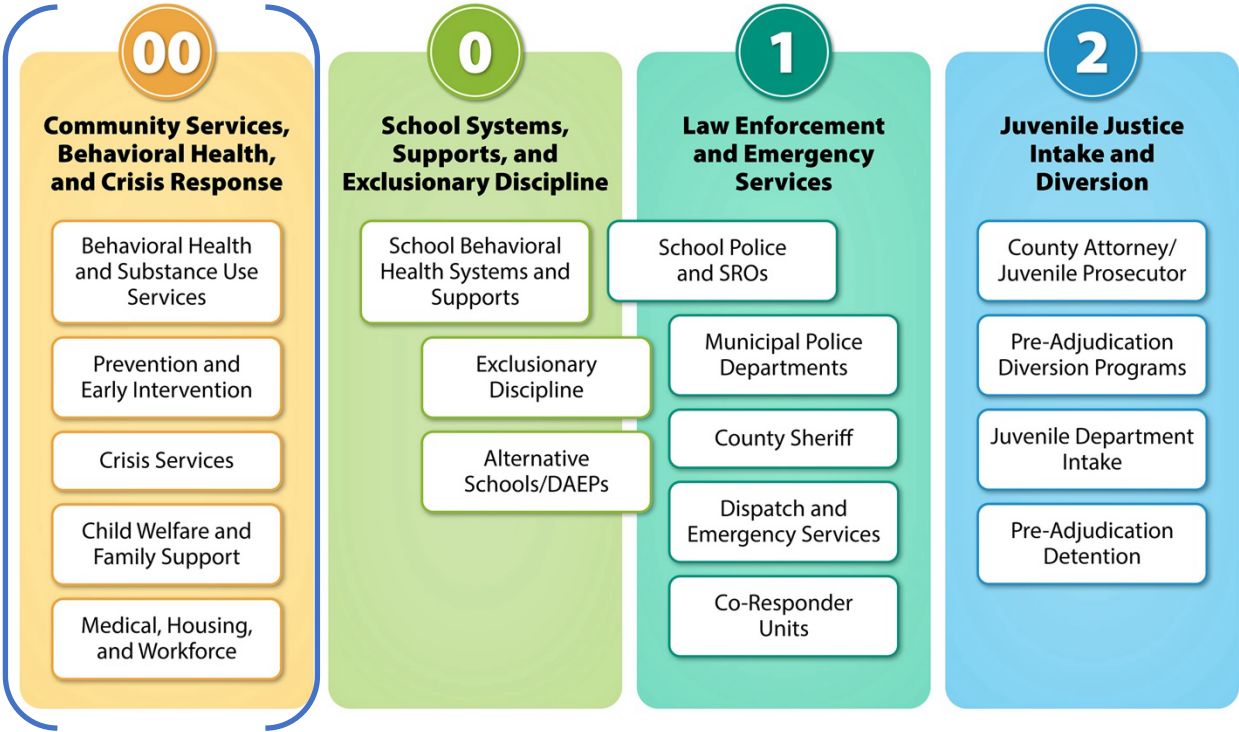
Value of SIM Mapping

The value of Youth SIM mapping extends beyond the resulting report and priority workgroups. Paired with the Meadows Institute's ability to translate research into actionable strategies tailored to the community's unique needs and strengths, SIM mapping cultivates collaboration and enables lasting improvements within the community. It underscores the complexity of the "school-to-prison pipeline" issue as an ecosystem problem that no single entity can resolve independently, promoting a shared responsibility for youth well-being. The mapping process serves to make typically invisible processes, decisions, and micro practices visible, facilitating a holistic understanding of the challenges and opportunities along the student's journey from school to justice involvement, and demonstrating the role of multiple systems to address the problem. No single sector can do this alone.

Intercept 00: Community

Community Services, Behavioral Health, & Crisis Response

Intercept 00: Community Services & Behavioral Health



Intercept 00 focuses on connecting youth and their families to mental and behavioral health services within the community prior to any system involvement. The emphasis is on prevention and early identification to avoid crises while providing holistic wraparound supports for youth and families. Collaboration among different stakeholders, such as schools, behavioral health systems, nonprofit providers, peer services, and crisis response is emphasized. This intercept also highlights the need to start addressing mental health issues in children earlier and surfaces the importance of primary care physicians conducting mental health screenings during physical check-ups, as many mental health issues start to manifest by age 14.³

Resources

Intercept 00: Community Services & Behavioral Health Resources	
Youth/Family Programs	
Emergence Health Network	El Paso Child Guidance Center
Ciudad Nueva Community Outreach	Child Crisis Center of El Paso
Community Solutions of El Paso	El Paso Center for Children
Afterschool/Mentor/Career	
UTEP’s El Paso Collaborative for Academic Excellence (Opportunity Youth Initiative, Breakthrough 915)	YMCA, YWCA

³ Kessler RC, Berglund P, Demler O, Jin R, Merikangas KR, Walters EE. (2005). Lifetime Prevalence and Age-of-Onset Distributions of DSM-IV Disorders in the National Comorbidity Survey Replication. *Archives of General Psychiatry*, 62 (6) pp. 593-602. doi:10.1001/archpsyc.62.6.593.

Intercept 00: Community Services & Behavioral Health Resources	
Big Brothers/Big Sisters	Community Centers
Faith-based Institutions	Opportunity Center
Boys & Girls Club of El Paso	
Case Management	
Methodist Children’s Home EP Outreach	El Paso United Family Resiliency Center
Project Amistad	Emergence Health Network
La Mente Behavioral Health	El Paso Child Guidance Center
Prevention/Collaboratives	
El Paso Behavioral Health Consortium: Family Leadership Council, Justice Leadership Council, Integration Leadership Council	CRCG Referral/Diversion – JPD referrals for youth under 11
A Smoke-Free Paso del Norte	Youth Mental Health First Aid
System of Care Grant	Paso del Norte Center at the Meadows Institute
Paso del Norte Health Foundation Think.Change Initiative	El Paso Juvenile Probation Prevention and Intervention Program: 30-45 days, ages six to 17
Aliviane El Paso Advocates for Prevention Coalition	El Paso Child Guidance Center
BOOST Network/United Way	
Medical/Behavioral Health Facilities & Providers	
Project Vida	PEAK Behavioral Hospital
Centro San Vicente	Northeast Counseling Services
Centro de Salud La Fe	Behavior Health Support Services
University Medical Center	El Paso Psychiatric Center
Child Psychiatry Access Network (CPAN) at Texas Tech University Health Sciences Center (TTUHSC)	Rio Vista Behavioral Health PRISM Program (LGBTQ+ community)
El Paso Behavioral Health	Emergence Health Network (EHN)
El Paso Children’s Hospital	El Paso Child Guidance Center Child and Adolescent Psychiatric Services (350 youth/year)
Emergence Health Network (EHN) Family Behavioral Health Services	
Intensive Services: YES Waiver, Multisystemic Therapy (MST), Level of Care 4	Coordinated Specialty Care for First Episode Psychosis
Warm Lines/Resource Lines	Youth & Family Partners
MCOT (see Intercept 1)	988
Crisis Lines (EHN)	School-Based Mental Health Clinics
EHN Youth Crisis Services	
EHN Crisis Unit	MCOT 24/7
School-Based Crisis Response Teams (CIT)	911 Mental Health Dispatch Diversion Option
Community-based CIT	
Counseling Services & Community Behavioral Health Resources	
Pinnacle Social Services	Living Hope Christian Counseling Service
Texas Tech University Health Sciences Center	Catholic Counseling Services, Inc.
New Leaf Counseling	Amistad Family Counseling Center
Counseling Center of Expressive Arts	Steven A Cohen Military Family Clinic Endeavors
Family Services of El Paso	La Familia del Paso, Inc.
Emergence Health Network	El Paso Child Guidance Center
Housing	

Intercept 00: Community Services & Behavioral Health Resources	
El Paso Coalition for Homeless	Housing Opportunity Management Enterprises (HOME)
El Paso Center for Children	
Youth Substance Use Disorder & Peer Supports	
Aliviane Outpatient & Youth Services	Children’s Grief Center of El Paso
National Alliance on Mental Illness (NAMI) El Paso	Sovereign Health of Texas
Child Welfare/Family Crisis	
CASA of El Paso	El Paso Human Services, Inc.
Paso del Norte Center of Hope	Advocacy Center for the Children of El Paso
Center Against Sexual and Family Violence	El Paso Center for Children - Runaway & Family Resource Center

Gaps, Challenges, and Opportunities for Change

During the SIM workshop and in pre-mapping interviews, participants identified gaps and challenges in the community-based system of care for youth with mental and behavioral health needs that were believed to contribute to the increase in juvenile justice system referrals. Stakeholders also put forward suggestions on how to tackle these issues, identifying multiple opportunities for diversion at Intercept 00.

Gaps, Challenges, and Opportunities for Change
<p>Access to Schools</p> <p>Gaps and Challenges: Community-based providers want to provide students services in schools or in partnership with schools, but face challenges in connecting and gaining access on campus. Schools are challenged by a need to limit students’ time out of class for outside interventions and services provided by community-based organizations, while also balancing the safety precautions of having outside personnel on campuses.</p> <p>Opportunities for Change</p> <ul style="list-style-type: none"> • Promote greater collaboration between school districts and community providers to facilitate services on school campuses and connect students to services by embedding them in the school setting and forming active partnerships with community organizations for service referrals. Look to existing partnerships and best practices with ISDs and campuses. • The El Paso Area Directors of Guidance comprises the directors of guidance for the districts in Education Service Center (ESC) Region 19 and they meet as a group to share community resources and partnerships. Districts can use these meetings to invite community partners to share an overview of their services. This can become a natural forum to develop Memorandums of Understanding (MOUs), which can be used across districts in the county. • Map the MOU process hurdles identified by community-based providers during the Youth SIM and coordinate meetings with school district leaders to remove barriers. • Utilize the El Paso Behavioral Health Consortium and its Family Leadership Council as a cross-system convener to encourage school districts to be more open to assistance from community-based organizations.

Gaps, Challenges, and Opportunities for Change
<ul style="list-style-type: none"> • Develop clear and streamlined referral pathways for students who require treatment services. Ensure that these pathways are well-communicated and accessible to improve continuity of care and referral practices between school districts and community organizations.
Resource Inventory
<p>Gaps and Challenges: Schools lack of knowledge about available resources and services, and often lack of clear collaboration among school districts and outside systems and service providers, with systems often working in isolation from each other.</p> <p>Opportunities for Change</p> <ul style="list-style-type: none"> • Drawing on the extensive number of local resource inventories that exist in El Paso, produce an interactive geomap of resources based on location of need and location of resources. • Inventory existing behavioral health resources and referrals used by El Paso school districts via a survey to all primary and secondary school principals and behavioral health/counseling departments. • Expand school-based referral resources to include community partners present at the SIM mapping event and included in this Youth SIM report. Educate the school community regarding the services that are available by incorporating community resource presentations during teacher training and school district in-service days.
Crisis Intervention Teams
<p>Gaps and Challenges: Participants identified a need for additional school-based Crisis Intervention Teams (CIT) and other crisis services in schools to allow situations to be handled earlier with mental health supports for behavior that often escalates into misconduct and a discipline or law enforcement response, rather than referral to counselor or other intervention.</p> <p>Opportunities for Change</p> <ul style="list-style-type: none"> • Expand EHN’s School-Based Crisis Intervention Teams (CIT) to more districts and schools, which deploys law enforcement officers with clinicians for school crisis calls. • Draw on EHN’s crisis specialists trained in autism spectrum and IDD to train educators, school administrators, and school-based law enforcement officers on appropriate response and de-escalation with these students. • Establish clear referral pathways and protocols from schools to EHN’s new mobile Youth Crisis Outreach Teams (YCOT), creating an additional opportunity for more efficient and appropriate crisis system navigation. • Educate school leaders on strategies for establishing systems for early identification and support for students with emerging mental health needs. • Explore mechanisms for law enforcement and dispatch across El Paso County to flag mental health calls for service involving a youth to improve data collection and inform funding decisions related to youth behavioral health programs and services in the community. • Establish the Handle With Care (HWC) program in El Paso schools, an evidence-informed intervention that enables law enforcement to notify schools if an officer encounters a child at a traumatic scene. After the child’s school is notified, school personnel have better awareness of the event and then can provide trauma- and grief-informed support when necessary. The

Gaps, Challenges, and Opportunities for Change
<p>components of this program were developed with guidance and technical assistance from the Massachusetts Advocates for Children: Trauma and Learning Policy Initiative, in collaboration with Harvard Law School and the Task Force on Children Affected by Domestic Violence.⁴</p>
After Hours Access for Families
<p>Gaps and Challenges: Lack of availability of behavioral health and other support services after hours or on weekends to accommodate the needs of parents, as well as transportation issues, can hinder access to essential services.</p> <p>Opportunities for Change</p> <ul style="list-style-type: none"> • Implement mobile service units that can reach areas with transportation difficulties, ensuring parents have access to essential services. • Create community resource hubs where multiple services are available in one location, reducing the need for parents to travel extensively. • Service providers can consider extending their hours of operation to include evenings and weekends to better accommodate parents' schedules. • Launch awareness campaigns to inform parents about available services and their operating hours, emphasizing the importance of seeking help when needed. • Explore options for financial assistance or subsidies to help parents cover transportation costs or service fees during non-standard hours. • Establish feedback mechanisms to continuously gather input from parents and the community to improve service accessibility.
Substance Use Services
<p>Gaps and Challenges: Students are using substances, including vapes, to self-medicate. Systems are not in place in schools or in the community to consistently identify the root cause of behavior and connect students to substance use or mental health treatment to address the underlying cause of the behavior more effectively. When those needs are identified, there is a lack of intervention services related to substance use disorders (SUD). Failing to address the root causes of substance use and mental health issues can have long-term consequences, potentially leading to chronic SUD, ongoing mental health challenges, and a higher risk of involvement with the juvenile justice system.</p> <p>Opportunities for Change</p> <ul style="list-style-type: none"> • Implement validated screening and assessment tools in schools to identify students who may be self-medicating, such as Screening, Brief Intervention, and Referral to Treatment (SBIRT). These tools can help school staff and counselors recognize warning signs early. • Establish peer support programs where students who have overcome substance use or mental health challenges can provide mentorship and support to their peers. Train students to become peer educators providing information on the risks of substance use and the importance of seeking help. • Connect schools to Aliviane’s array of substance use disorder services, including prevention services such as skill building, education programs, and outreach services.

⁴ Klute, M. M., Araoz, C., Perez, N., Chow, K., Burkander, P., & Tiruke, T. (2022). *Evaluation of Handle With Care 2.0: Final Report*. SRI International.

Gaps, Challenges, and Opportunities for Change
<ul style="list-style-type: none"> • Explore the expanded use of telehealth services such as Texas Child Health Access Through Telemedicine (TCHAT) to connect students with mental health and SUD treatment professionals, especially in areas with limited access to in-person services. Contact the Texas Tech University Health Science Center El Paso to enroll and appoint a designated staff member within schools to coordinate these telehealth treatment services for students and ensure that students receive the necessary support and follow-up care. • Bolster outreach and services in Spanish.
Prevention Services
<p>Gaps and Challenges: Elementary schools often lack preventive measures or programs aimed at addressing issues such as behavioral problems, mental health challenges, or substance abuse in their early stages. Without early prevention programs, schools and communities are forced to address these issues only when they have already become significant problems, with more focus placed on middle and high school interventions. This late intervention can result in more complex and challenging situations to resolve.</p> <p>Opportunities for Change</p> <ul style="list-style-type: none"> • Collaborate with community organizations, mental health agencies, and local nonprofits to implement prevention initiatives that target early childhood development and elementary school years. These programs should aim to identify and address potential issues before they become more significant problems. • Launch an information dissemination campaign that starts from birth and continues through various stages of a child's development. Collaborate with hospitals, pediatricians, pre-k programs, and elementary schools to ensure parents receive guidance and resources at each stage. • Integrate prevention into the curriculum of elementary schools, focusing on character and skills building, conflict resolution, and building resilience in students. • Use an integrated care model, such as the model used by Project Vida, to develop earlier access to behavioral health assessments and care in routine settings in which children receive care.
Child Psychiatry
<p>Gaps and Challenges: In 2020, El Paso County had 67 licensed psychiatrists. Of these, only 18 reported a specialization in child and adolescent psychiatry, pediatric psychiatry, or developmental-behavioral pediatrics.</p> <p>Opportunities for Change:</p> <ul style="list-style-type: none"> • Utilize the Child Psychiatry Access Network (CPAN) program to address the shortage of child psychiatrists in El Paso County. Through CPAN, pediatricians and other primary care providers can access no-cost child psychiatric and mental health consultation services through regional “hubs” supported by Texas medical schools. The hub that includes El Paso County is located at the Texas Tech University Health Sciences Center at El Paso.
Intensive Services

<p>Gaps, Challenges, and Opportunities for Change</p> <p>Gaps and Challenges: El Paso County has a shortage of providers who offer intensive community-based services. A lack of sufficient intensive community-based services that allow children and youth to thrive at home and in their communities could lead to an overreliance on more restrictive placements, such as psychiatric hospitals and juvenile detention.</p> <p>Opportunities for Change</p> <ul style="list-style-type: none"> • Increase the community’s capacity to provide intensive community-based services, such as EHN’s Youth Empowerment Services (YES) Waiver and El Paso Child Guidance Center’s Parent-Child Interaction Therapy (PCIT). • Work with EMPOWER Community Care, the purveyor of Multisystemic Therapy (MST), to address the workforce and implementation challenges that have limited El Paso’s ability to fully implement and expand MST in the region. • Support additional providers to specialize in the delivery of intensive evidence-based practices needed across the community to help close the gap between the number of children and youth who need these services and those who receive them. • Facilitate additional providers in the community to become credentialed in providing Medicaid-funded services like Targeted Case Management (TCM) and Mental Health Rehabilitative Services (MHRS). • Explore the establishment of a state-funded Youth Crisis Respite (YCR) Center and explore opportunities to further partner with law enforcement and El Paso County Juvenile Probation to serve youth that may be appropriate for diversion to the YCR.
<p>Youth Voice</p> <p>Gaps and Challenges: Limited mechanisms exist in El Paso to bring in the voice and lived experience of youth to design solutions.</p> <p>Opportunities for Change</p> <ul style="list-style-type: none"> • Identify new avenues to incorporate youth voice into the Youth SIM workgroups inclusive of diverse youth sub-populations that can inform multiple systems that interface with youth. • Explore establishment of a Youth Advisory Council drawing on examples from other Texas communities, including Pflugerville’s Youth Advisory Council and Temple’s Youth Advisory Commission.

Agency Spotlights

<p>El Paso Child Guidance Center</p> <p>Select Resources Available</p> <ul style="list-style-type: none"> • Prevention and intervention services: parenting groups; trainings on a wide variety of topics such as trauma informed care, mental health diagnoses, burnout, stress reduction, child development, child sexual abuse, etc.; in school and in home services; teaching caregivers and youth skills such as anger management, healthy coping skills, de-escalation techniques, healthy habits such as healthy sleep and eating, education on medications, etc.; trainings for professionals on burnout and trauma informed care and working with youth

El Paso Child Guidance Center

- Treatment services: therapy for a wide variety of mental health challenges in youth such as depression, anxiety, exposure to traumatic events such as physical and sexual abuse; child psychiatric services

Gaps and Challenges

- Lack of funding to support prevention and training activities and enable us to expand these services
- Increasing salary demands of behavioral health workforce
- Lack of knowledge of school districts and other entities that serve children and families of breadth of services agency offers
- Health professional shortage area; not enough mental health treatment providers

Opportunities for Change

- Foster stronger collaborations with school districts to ensure mutual support and enhanced services for the youth served
- Create formal referral pathways with schools and other community agencies to get youth into care quicker

Emergence Health Network (EHN)

Select Resources Available

- **High-Needs Programs**
 - Operates a Multisystemic Therapy (MST) program via partnership with Juvenile Probation.
 - Provides wraparound services through YES Waiver and non-waiver care coordination.
 - Provides Coordinated Specialty Care for First Episode Psychosis through Texas Health and Human Services Commission (HHSC).
- **Substance Use Disorder Services**
 - Conducts screenings and assessments as the regional Outreach, Screening, Assessment, and Referral (OSAR) for youth.
 - Operations the TRY (Treatment for Youth) Program for outpatient treatment for adolescents.
 - Provides substance use education sessions in schools and community settings.
- **Peer Support Services**
 - Hires youth peer support specialists through a SAMHSA System of Care grant.
 - Youth peers interact with students while family partners work with parents.
 - Provides peer support in Canutillo ISD and Fabens ISD.
- **School-Based Mental Health Services:**
 - Provides counseling, case management, and psychiatric services in five El Paso ISD schools through an MOU.
 - Provides services in three Canutillo ISD schools and two Fabens ISD schools via MOU.
 - Clinicians and direct care staff provide services at non-MOU schools but lack designated office space and require special permission and approval from each school.

Emergence Health Network (EHN)

Gaps and Challenges

- Limited options for respite, especially for youth in crisis situations.
- Difficulty consistently providing services in schools without formal MOUs, space, and approval.
- Long wait times to access children's mental health services in the community, for counseling only.
- Need for more intensive substance use treatment options tailored for youth.
- A shortage of licensed clinicians impact the ability to expand existing programs.
- Funding constraints limit adding new evidence-based programs, including peer services.

Opportunities for Change

- Explore creation of youth-specific crisis respite options through partnerships; engage the child welfare system.
- Advocate for improved clinician access to all school campuses through MOU agreements.
- Recruit more children's mental health providers to increase appointment availability.
- Develop early intervention substance use programs tailored to youth, focused on emerging local drug trends.
- Enhance data tracking and reporting capabilities to identify age-specific mental health utilization trends.
- Pursue funding to expand evidence-based youth peer support services to more schools.
- Partner with policymakers to increase funding for community-based children's mental health services.

EHN Crisis Services

Select Resources Available

- **911 Mental Health Call Diversion**
 - Diverts eight to 12 mental health crisis calls per day from 911 to 988 or local crisis hotline.
 - Provides crisis intervention and follow-up for youth and families without police dispatch.
- **Mobile Crisis Outreach Team (MCOT)**
 - Dispatched 679 times in FY2023 for youth mental health crises.
 - Responds to homes, schools, hospitals for evaluations and stabilization.
- **New Youth Crisis Outreach Teams (YCOT)**
 - Received funding to stand up new YCOT team, which will provide consistent access to 24/7 supports for all children and families with follow-up supports.
- **School-Based Crisis Intervention Team (CIT) Program**
 - Officers respond with clinicians for school crisis calls in three districts.
 - Responded to 300 students last school year for issues like suicidal ideation.
 - Helped identify and intervene with students who would have gone undiagnosed.

EHN Crisis Services

- Allows early identification and support for students with emerging mental health needs who previously went undetected, but requires specific funding and community buy-in to expand and sustain.
- **Specialized CIT Teams (CIS)**
 - Employs crisis specialists trained in autism spectrum and IDD, which is important for appropriate response and de-escalation with these students and provides training to school staff on these issues.
 - Crisis Stabilization Service team assesses students, provides referrals, and coordinates hospitalization if needed. Offers services to student and family during and after crisis situations. Utilizes tablets, health records, and other tools to inform response.

Gaps and Challenges

- Limited options for crisis respite/stabilization, especially for youth.
- Lack of funding to expand successful school-based CIT program.
- Schools often handle mental health issues administratively through discipline/punitive-only responses rather than clinically or through providing services or interventions.
- Difficulty obtaining parental consent for treatment of children/youth in crisis.
- Need for more intensive, non-medication options for youth mental healthcare.

Opportunities for Change

- Expand crisis respite beds and access for youth.
- Develop dedicated youth crisis stabilization site.
- Pursue federal grants for school-based mental health programs.
- Work with schools and county to allocate funds from budgets for additional crisis services.
- Train school staff on recognizing and responding to mental health crises, such as Youth Mental Health First Aid.
- Expand mental health screening and services in schools.
- Increase partnerships between districts and mental health providers.
- Improve parent education programs to reduce mental health stigma.
- Provide family therapy and engage parents in the treatment process.

El Paso SIM Map: Intercept 00

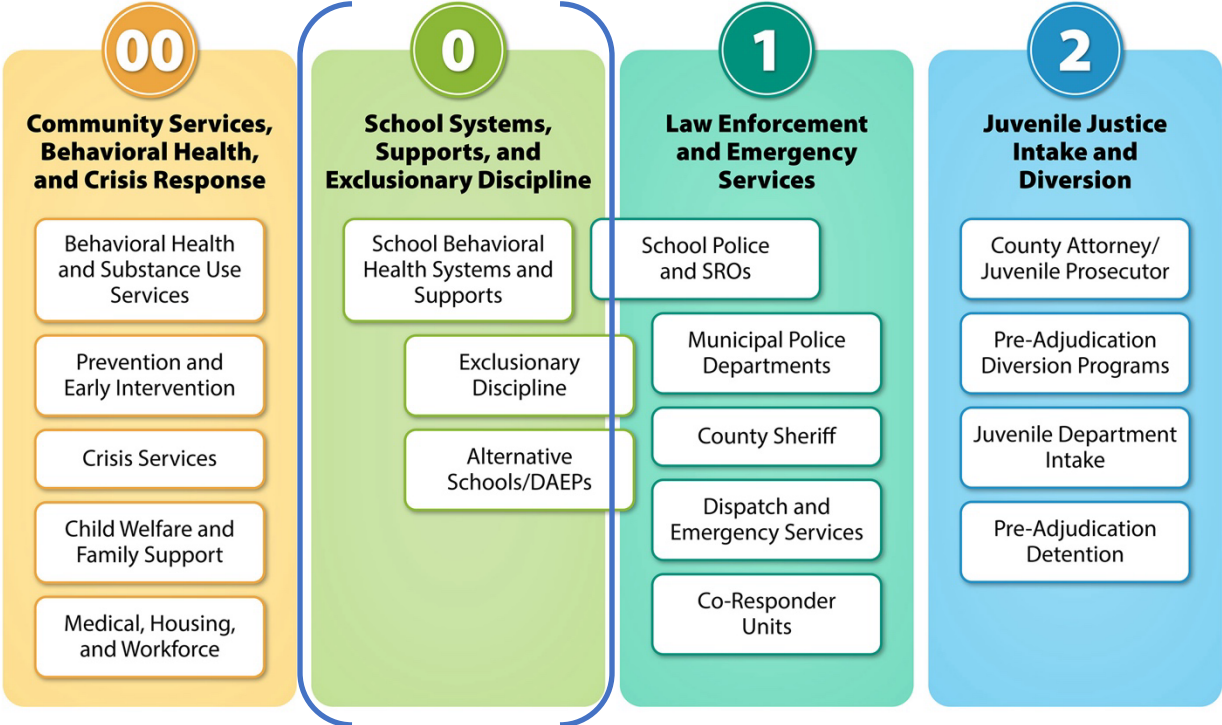
PUBLIC HEALTH

Intercept 00 COMMUNITY PREVENTION & INTERVENTION, BEHAVIORAL HEALTH SERVICES		Intercept 0 SCHOOLS
<p><u>Youth/Family Programs</u></p> <ul style="list-style-type: none"> Lee Moor Children Home Ciudad Nueva Community Outreach Community Solutions of El Paso El Paso Child Guidance Center Child Crisis Center of El Paso El Paso Center for Children NAMI El Paso Emergence Health Network 	<p><u>Behavioral Health & EHN</u></p> <ul style="list-style-type: none"> Crisis Lines (988) Warm Lines/Resource Lines MCOT (see Intercept 1) Intensive Services: YES Waiver, Multisystemic Therapy, Level of Care 4 Coordinated Specialty Care for First Episode Psychosis Crisis Extended Observation Unit 24/7 Youth & Family Partners 	<p>School-based Supports, Systems, and Services: YISD SISD EPISD</p> <p>Exclusionary School Discipline & Alternative Schools YISD SISD EPISD</p>
<p><u>Afterschool/Mentor/Career</u></p> <ul style="list-style-type: none"> UTEP's El Paso Collaborative for Academic Excellence (Opportunity Youth Initiative) Big Brothers/Big Sisters Faith-based Institutions Boys & Girls Club YMCA, YWCA and Community Centers Workforce Solutions Emergence Health Network 	<p><u>Counseling Services</u></p> <ul style="list-style-type: none"> Pinnacle Social Services Texas Tech University Health Sciences Center New Leaf Counseling Counseling Center of Expressive Arts Family Services of El Paso Living Hope Christian Counseling Service Catholic Counseling Services, Inc. Amistad Family Counseling Center Steven A Cohen Military Family Clinic Endeavors La Familia del Paso, Inc. 	
<p><u>Housing</u></p> <ul style="list-style-type: none"> El Paso Coalition for Homeless Housing Opportunity Management Enterprises (HOME) Multiple Shelters (full list at ephomeless.org) 	<p><u>Youth SUD & Peer Supports</u></p> <ul style="list-style-type: none"> Aliviane Outpatient & Youth Services National Alliance on Mental Illness (NAMI) Children's Grief Center of El Paso Sovereign Health of Texas Emergence Health Network 	
<p><u>Prevention/Collaboratives</u></p> <ul style="list-style-type: none"> Family Leadership Council (& Consortium) Paso del Norte Health Foundation : Smoke Free EP System of Care Grant CRCG Referral/Diversion- JPD referrals for youth under 11 JPD Prevention and Intervention Program 30-45 day, 6-17-year-olds Youth Mental Health First Aid Emergence Health Network 	<p><u>Medical/BH Supports</u></p> <ul style="list-style-type: none"> Project Vida Centro San Vicente Centro de Salud La Fe University Medical Center El Paso Behavioral Health PEAK Behavioral Hospital Northeast Counseling Services Behavior Health Support Services El Paso Psychiatric Center RVBH PRISM Program Emergence Health Network 	
	<p><u>Case Management</u></p> <ul style="list-style-type: none"> Methodist Children's Home EP Outreach El Paso United Family Resiliency Center Project Amistad La Mente Behavioral Health El Paso Child Guidance Center Emergence Health Network 	
	<p><u>Child Welfare/Family Crisis</u></p> <ul style="list-style-type: none"> CASA Paso del Norte Center of Hope Center against Sexual and Family Violence Advocacy Center for the Children of El Paso El Paso Center for Children Runaway Center Against Family Violence Family Resource Center El Paso Human Services, Inc. Sexual Trauma and Assault Response Services (STARS) 	

INTERCEPT 1: LAW ENFORCEMENT

Intercept 0: School-Based Supports & Systems

Intercept 0: School-Based Supports & Systems



Intercept 0 focuses on the system of supports and various factors within schools that can lead to exclusionary discipline, which increases the risk of justice involvement. This intercept encompasses district-level systems, campus-level systems, student support systems (such as counseling and mental health services), connections to community resources, student Code of Conduct and discipline policies, and various intervention tiers (universal Tier 1, small group Tier 2, and more intensive Tier 3). It also considers how these support structures interact with discipline systems and school leadership, highlighting opportunities for change or potential areas of concern during the mapping process.

Exclusionary discipline is a critical focus in this context due to the strong research evidence linking school discipline practices with justice-related consequences. For example, a single out-of-school suspension (OSS) during the 9th grade is associated with a 50% increase in dropout rates and a 19% decrease in postsecondary education enrollment.⁵ Additionally, each suspension increases the likelihood of later being convicted of a crime, irrespective of underlying student characteristics.⁶ Therefore, addressing exclusionary school discipline

⁵ Balfanz, R., Byrnes, V., & Fox, J. (2014). Sent home and put off-track: The antecedents, disproportionalities, and consequences of being suspended in the ninth grade. *Journal of Applied Research on Children*. 5(2). <http://doi.org/10.58464/2155-5834.1217>

⁶ Mowen T, Brent J, & Boman J (2019). The effect of school discipline on offending across time. *Justice Quarterly*. Advance Online Publication. doi: 10.1080/07418825.2019.1625428

practices is crucial for intercepting students earlier and mitigating the risk of justice involvement.

Resources

Intercept 0: School Resources	
Overall	
Region 19 Education Service Center	Texas Child Health Access Through Telemedicine (TCHAT)
Behavior Threat Assessment Teams	Communities in Schools (CIS) (w/EHN)
El Paso ISD	
Site-Based Mental Health Clinics (w/EHN)	Responsible Decision-Making Classes
Suicide Prevention Protocols	Focus on Families Program
Threat Assessment Process	Restorative Practices
Navigate 360 for Behavior Tracking	First Chance Alternative Program
Law Enforcement Partnership (w/EHN)	Multi-Tiered System of Support
Socorro ISD	
8-Step Intervention Plan (prior to DAEP)	Vaping Parent Education Program
RISE Program	Discipline Data Reporting and Monitoring
Referrals to Community Behavioral Health	Law Enforcement Partnership
Project Vida Family Assistance	Counseling Team
Behavior Coordinator Meetings	Grief & Trauma Interventions
Ysleta ISD	
Vaping First Offender Program	Comprehensive Care Centers
Counseling Team	Social Emotional Learning Surveys & Check-in
Behavioral Response to Intervention Program	Project Vida Family Assistance
Discipline Data Dashboard	Truancy Response System
Behavior Task Force	

Gaps, Challenges, and Opportunities for Change

During the SIM workshop and in pre-mapping interviews, participants identified gaps and challenges in school-based systems of support and discipline practices for youth with mental and behavioral health needs that were believed to contribute to the increase in juvenile justice system referrals in El Paso. Stakeholders also put forward suggestions on how to tackle these issues, identifying multiple opportunities for diversion at Intercept 0.

Gaps, Challenges, and Opportunities for Change
Discipline Decisions
Gaps and Challenges: There is an over-reliance on punitive measures to maintain control and ensure compliance in some El Paso schools. This can be reinforced by systemic factors, such as attitudes toward punishment and discipline, which influence school policies. Administrators may feel pressured to quickly address behaviors that they believe detract from learning, using suspension or expulsion as

Gaps, Challenges, and Opportunities for Change

the primary approach. There are inconsistencies and a lack of standardization in discipline decisions and practices across school campuses and districts.

Opportunities for Change

- Advocate for district-wide policies, including Code of Conduct revisions, that standardize disciplinary measures, informed by state laws and Texas Education Agency (TEA) guidelines. Create and train staff on school discipline decision trees and graduated response grids to ensure fairness and equity across all schools.
- Consider implementing the nationally-recognized [School Justice Partnership](#) (SJP) model in El Paso County designed to reduce the use of exclusionary discipline such as in-school arrests, out-of-school suspensions, and expulsions. Counties can apply for [free technical assistance](#) to implement the model provided by the Clayton County System of Care. Through the SJP, a group of community stakeholders – including school administrators, the law enforcement community, court system actors, juvenile justice personnel, and others – collectively decide on a set of practices called a graduated response system that outlines several tiers of discipline before a student would be referred to the courts (see Appendix 6 for a sample agenda).
- Implement tools for data collection and analysis to understand trends and outcomes of disciplinary actions, which can lead to more informed and consistent decision-making. Establish oversight mechanisms to monitor disciplinary practices across campuses to ensure adherence to policies and identify areas for improvement.
- Work with Region 19 and the Meadows Institute to develop a [School Discipline Executive Learning Community](#), bringing together school administrators from each El Paso school district for peer-to-peer sharing and to learn evidence-based strategies for reducing the use of exclusionary discipline.
- Periodically review and revise behavior management policies and procedures to ensure they align with best practices and the evolving needs of students.

Alternatives to Exclusion

Gaps and Challenges: Many school districts rely on punitive measures and exclusionary discipline due to a lack of alternative disciplinary approach options and/or the training and resources necessary to implement them. Teachers and staff often lack the ongoing support and professional development needed to manage classrooms effectively without resorting to exclusionary discipline. Revising school discipline policies to prioritize non-exclusionary practices can help shift the focus from punishment to rehabilitation and support.

Opportunities for Change

- Analyze the *Process Map 1: School Discipline and Arrest Flow* on pages 39-40 below to identify diversion opportunities along the pathway to exclusionary discipline. Opportunities may include: 1) diversion to a counselor, behavior specialist, or other special education professional prior to report to security and/or administrator if conduct has a behavioral health aspect or involves a student receiving special education services; 2) reducing DAEP length of stay if parent and/or youth commit to treatment/services or if some restorative

Gaps, Challenges, and Opportunities for Change

assignment is completed; or, 3) referral to a First Offender for certain Class B or above offenses (including THC vaping).

- Implement and promote restorative justice programs within schools. These programs focus on addressing the root causes of behavior, repairing harm, and involving students in resolving conflicts in a constructive way.
- Expand models like Positive Behavioral Interventions and Supports (PBIS) in schools, which provide a framework for reducing disciplinary incidents and improving the school climate.
- Bolster the ability of Behavioral Intervention Teams within schools to assess and address challenging behaviors. These teams can include educators, counselors, and mental health professionals who work together to develop individualized plans for students.
- Provide wraparound services that address not only the student's behavior but also the underlying issues. This may include family support, social services, and community resources.
- Train school resource officers and other staff in crisis intervention techniques to de-escalate situations without resorting to punitive measures, including Mental Health First Aid.
- Encourage peer mediation and counseling programs where students can play a role in helping their peers resolve conflicts and address behavioral issues.
- Access the resources and training provided by TEA and Education Service Center Region 19 to address behavior management and school discipline, including ongoing coaching supports for teachers on classroom management techniques.
- Pilot programs to address the top discipline issues revealed in the data, such as fighting, substance use, and disorderly conduct through counseling and community partnerships.
- Implement a stepped intervention plan for first-time offenders, such as the approach used in Socorro ISD, to provide counseling, resources, and support rather than automatically sending students to DAEP.

Tiered Interventions

Gaps and Challenges: School districts in El Paso County do not have a consistent way of identifying students who need intensive services and supports. A lack of systems and structures at the district and campus level to identify and address underlying mental health or other needs that may be driving student misconduct and the use of exclusionary discipline contribute to a fragmented response. This includes the absence of tiered interventions and a multi-tiered system of supports (MTSS), which can proactively address the root causes of behavior and prevent the need for punitive discipline.

Opportunities for Change

- Support the implementation of the Multi-Tiered System of Supports (MTSS) framework to fidelity, which has been endorsed by the Texas Education Agency’s Long-Range Plan and provides a structured approach to addressing behavior issues with graduated responses. This tiered approach adopts universal prevention strategies for all students (Tier 1), targeted supports for a smaller group of students experiencing or at risk of a behavioral health issue (Tier 2), and specialized and individualized supports for a small group of students with complex needs (Tier 3) that Tiers 1 and 2 cannot address. See the [School Mental Health Practice Guide and Toolkit \(schoolmentalhealthtx.org\)](https://www.schoolmentalhealthtx.org/). School districts can utilize MTSS

Gaps, Challenges, and Opportunities for Change

fidelity implementation rubrics to track their progress toward implementing this model to fidelity.

- Formalize a method to identify students in El Paso schools who need intensive mental and behavioral health services and supports by establishing a School-Based Assessment, Treatment, and Intervention Screener to identify risk and needs.
- Implement the MTSS framework to provide a structure for identifying and connecting these students to services. In an effective framework, all decision makers in the district are empowered to work together to solve problems in a collaborative manner with open lines of communication using data to drive decisions.
- Form a district level multi-disciplinary team, focused on academics and behavior or student support systems, that reviews discipline and behavior data and assessments regularly to create targeted responses based on needs.

Legal Education

Gaps and Challenges: School districts often rely heavily on guidance provided by their legal counsel when making decisions related to discipline and responses to student behavior. In some cases, school counsel may have a limited perspective or interpretation of the law, which can restrict the range of disciplinary options considered by the school. This limited perspective may result from a lack of education or understanding of the law or an interpretation that doesn't explore innovative or alternative approaches.

Opportunities for Change

- Facilitate a meeting with legal counsel from various school districts, convened by a local judge. This gathering can serve as a platform for legal professionals to share best practices, exchange ideas, stay up-to-date on evolving school discipline law, and collectively explore restorative disciplinary approaches that align with the law.
- Foster collaboration between legal counsel and education experts, such as school administrators, counselors, and educators. This interdisciplinary approach can lead to more comprehensive and effective disciplinary responses that consider both legal requirements and educational best practices.
- Distribute the updated [Judicial Commission on Mental Health Juvenile Bench Book](#) to all judges, prosecutors, defense attorneys, and school district legal teams in El Paso County, which provides clear guidance on school discipline law.

Information Sharing

Gaps and Challenges: Lack of access to information about a child's history among behavioral health, school, and justice stakeholders can impede decision-making processes and access to appropriate care. There are perceived obstacles to expanding data sharing and the data currently being shared are limited in that many sectors, including schools, do not participate.

Opportunities for Change

- Ensure that relevant professionals, including mental health providers, crisis response teams, and school personnel, have as-needed, role-based access to the school's Navigate 360 data system for making informed decisions about students' needs.

Gaps, Challenges, and Opportunities for Change

- Partner with the [Paso del Norte Health Information Exchange](#) (PHIX), which has succeeded in developing the infrastructure for data collection and sharing across partner agencies to improve individual health outcomes. Utilize PHIX to develop and implement an integrated system of coding that can be used consistently across districts to facilitate a standardized approach to data collection, integration, and analysis, allowing for better tracking of interventions and outcomes.
- Create an online portal or platform for shared information among agencies, schools, and professionals. This portal should allow for secure and controlled sharing of relevant data while adhering to legal and privacy regulations.
- Establish information sharing agreements across behavioral health, school, and justice stakeholders. Provide training and education to professionals involved in data-sharing processes to ensure they understand the importance of data security and privacy regulations.

Family Engagement

Gaps and Challenges: Lack of family involvement and engagement in educational and support systems is exacerbated by family stress, lack of parental education, the need to teach parents how to navigate systems, bilingual needs, family mental health needs, and the scarcity of family partners with lived experience. Additionally, there is often stigmatization of mental health among caregivers.

Opportunities for Change

- Develop and implement parent education programs starting early in elementary school that cover topics such as addiction, including vaping, and the consequences of substance use. Consider adopting the [Collaborative Problem Solving](#) (CPS) model, which is an equitable and effective form of discipline that reduces concerning behavior and teacher stress while building skills and relationships between educators, students, and parents.
- Mandate parent education as a requirement for involvement in certain school-related activities, similar to other support and extracurricular programs.
- Use innovative communication strategies with parents through a variety of channels, including social media, regular updates, and targeted ads, to disseminate bilingual information and engage parents effectively.
- Utilize surveys to identify why parents aren't engaged and create incentives to encourage their participation, such as childcare support or assistance with utilities.
- Utilize family partners or liaisons from the juvenile probation department, EHN, or NAMI El Paso to bridge the gap between families and support systems.
- Ensure that resources and support services for parents are available at times convenient for them, not just during school hours. This may involve offering evening or weekend sessions and providing childcare services.
- Start engaging parents at the elementary level to establish a foundation of involvement and awareness from the beginning of a child's education.
- Seek philanthropic funding to help families navigate the educational and support systems effectively. The [CVS Health Foundation](#) awarded \$1 million over five years beginning in 2023 to support the Meadows Institute work to embed a full-time Care Navigator into four school districts in Bexar County as part of its San Antonio Mobile Mental Wellness Collaborative

Gaps, Challenges, and Opportunities for Change

initiative. They work with school leaders to develop a schoolwide support system for students and staff and help bridge gaps.

Mental Health Needs

Gaps and Challenges: In school settings, students with untreated behavioral health conditions have higher rates of school absences and school behavioral incidents, and lower rates of timely course completion and graduation.⁷ Some of these children and youth find themselves in or on a path to the juvenile justice system.

Students in El Paso are displaying significant mental health needs that became more severe with the onset of the COVID-19 pandemic, both within the school environment and beyond, and the existing school and community resources may not adequately meet these needs. Many schools face a shortage of mental health services, which includes a lack of therapists and clinicians to support students' mental health needs, and overworked counselors with competing duties.

Opportunities for Change

- Increase the availability of mental health services within schools by partnering with local universities to bring social work, counselor, and school psychologist interns into schools and covering supervision fees required to obtain licensure.
- Establish and strengthen EHN’s school-based crisis intervention teams consisting of trained professionals who can respond promptly to students in crisis and provide immediate support.
- Address substance use issues by increasing the number of substance use service providers and allocating additional resources to prevention and treatment programs.
- Collaborate with community organizations, mental health agencies, and local nonprofits to create a network of support services. Avoid relying on a single resource and ensure that students have access to a variety of options. Establishing a partnership, such as the one developed through the [San Antonio Mobile Mental Wellness Collaborative](#) (SAMMWC), to bring free mental health services directly into schools will reach more students and build deeper relationships within the community. SAMMWC providers are housed in a school-based Care Center where families can get access to food, clothing, and other basic needs, in addition to mental health services.
- Ensure each El Paso school has enrolled in the Texas Child Health Access through Telehealth (TCHAT) program by contacting [Texas Tech University Health Science Center El Paso](#) to initiate an MOU. TCHAT supports school personnel to identify and refer students experiencing a mental health crisis for brief treatment with a child and adolescent mental health professional. The Texas Legislature has ensured that TCHAT is available to any school district in Texas that wants it and there is no cost to the school or families for services.
- Expand Communities in Schools (CIS) or similar services to additional campuses and districts to provide support and resources to students and families. After CIS expansion, establish

⁷ Darney, D., Reinke, W. M., Herman, K. C., Stormont, M., & Jalongo, N. S. (2013). Children with co-occurring academic and behavior problems in first grade: Distal outcomes in twelfth grade. *Journal of School Psychology, 51*(1), 117–128. <https://doi.org/10.1016/j.jsp.2012.09.005>

<p>Gaps, Challenges, and Opportunities for Change</p> <p>mechanisms to ensure counselors can focus on student mental health needs, as they are often utilized for other roles other than the initial agreement.</p>
<p>Disciplinary Alternative Education Program and Vaping</p> <p>Gaps and Challenges: There is limited disciplinary alternative education program (DAEP) capacity to support youth expelled due to the new vaping laws passed (HB114). Texas law grants school districts discretion in applying "mandatory" disciplinary consequences, allowing consideration of mitigating factors, including disciplinary history. However, use of mitigating factors varies across districts and campuses, and many fail to fully explore alternatives to expulsion and exclusionary discipline practices (see mitigating factors definition in the Chapter 37 Discipline Chart).</p> <p>Opportunities for Change</p> <ul style="list-style-type: none"> • Train behavior coordinators to ensure they are exercising appropriate discretion and consideration of mitigating factors to avoid expulsion when appropriate, considering that removals for most offenses are not actually "mandatory" despite the language in the Texas Education Code and HB114. • Ensure eligible districts utilize the flexibilities provided by TEA’s Districts of Innovation (DOI) status designation, which provides school districts the ability to propose alternative student discipline policies and procedures customized to their local needs, and has been used across the state in response to HB114. The following El Paso County ISDs are designated as DOIs by TEA: Anthony ISD, Canutillo ISD, El Paso ISD, Fabens ISD, San Elizario ISD, and Tornillo ISD. • Expand school, parent, and community education on new vape laws, drawing on the extensive resources developed by A Smoke Free Paso del Norte’s Let’s Talk Youth Vaping Approaches to Discipline School District Roundtable Convenings. CATCH My Breath is an evidence-based youth vaping prevention program for grades 5-12 that has been proven to substantially reduce students’ likelihood of vaping. The vape education program’s effectiveness was published in a peer-reviewed journal and the program is listed in SAMHSA’s Evidence-Based Resource Guide Series. • Adapt the Williamson County School Vaping Guide to the El Paso context to educate school administrators, justice professionals, and caregivers on prevention, intervention, and best practice enforcement approaches to the issue of youth vaping.
<p>Training</p> <p>Gaps and Challenges: Educators need training in trauma-informed care to recognize and respond to signs of trauma, create a safe and supportive classroom environment, and avoid retraumatization through disciplinary actions. Research has shown that punitive approaches often exacerbate issues and don't address the root causes of behavior. There's a pressing need for educators to receive training in alternative methods, such as restorative justice, conflict resolution, and positive behavior interventions, which focus on addressing the underlying issues while maintaining a supportive learning environment.</p> <p>Opportunities for Change</p> <ul style="list-style-type: none"> • Partner with local universities, such as University of Texas El Paso (UTEP), to offer comprehensive professional development programs that include trauma-informed care,

Gaps, Challenges, and Opportunities for Change

adolescent development, and cultural competence components for both emerging and seasoned professionals, including teachers and administrators. For principals and counselors, at least 25% of the training required every five years must include instruction on how mental health conditions, including grief and trauma, affect student learning and behavior.

- Ensure each school district in El Paso follows the TEA mandate to adopt and implement a policy requiring the integration of trauma-informed practices in each school environment. This includes methods for increasing awareness and implementation of trauma-informed care that are culturally responsive. Ensure educators fulfill this continuing education requirements by participating in evidence-based mental health first aid training programs or evidence-based grief-informed and trauma-informed care programs.
- Utilize TEA’s training provided in partnership with the Institute for Restorative Justice and Restorative Dialogue at The University of Texas at Austin School of Social Work to offer [training in Restorative Discipline](#), an alternative to traditional punitive methods. This training has been implemented in schools, resulting in significant reductions in suspensions and improvements in student behavior and academic performance.⁸
- Utilize the grief-informed and trauma-informed training and resources from the [Trauma & Grief Center at the Meadows Institute](#) to ensure administrators understand how trauma affects behavior and learning.

Agency Spotlights

El Paso ISD

Select Resources Available

- Partnership with Aliviane, Texas Tech University Health Sciences Center at El Paso, Project Vida, El Paso Child Guidance Center, and Big Brothers Big Sisters, and a memorandum of understanding (MOU) with Emergence Health Network (EHN).
- Site-based mental health clinics established through a partnership with Emergence Health Network at several high schools and one middle school.
- Robust suicide prevention protocol and threat assessment process, tracked in Navigate 360 system.
- Responsible decision-making classes at middle schools for certain offenses.
- Focus on Families program to engage parents of students with serious discipline issues.
- Some use of restorative practices and referrals to counseling for interventions.
- First Chance alternative program for some first-time substance-related offenses.
- Partnership with EHN and law enforcement for on-campus Crisis Intervention Team (CIT) services for students in crisis.

⁸ Gerlach, B., Tennant P., McKerlie K. (2018) *Building Capacity for Restorative Discipline in Texas: An Evaluation of The Texas Schools Restorative Discipline Project*. Austin, TX: The University of Texas at Austin.

El Paso ISD
<p>Gaps and Challenges Identified</p> <ul style="list-style-type: none"> • Reliance on one district-level discipline expert rather than a full District Leadership Team approach to student supports. • No unified multi-tiered system of supports (MTSS) framework or integrated data system for monitoring interventions. • Need for better processes for transition support when students return from DAEP. • Elementary-level student issues reveal the need more focus on early intervention. • Barriers to parent engagement, including lack of staffing and outreach. • Need for more discretion in use of exclusionary discipline alternatives coupled with the need for increased supports and treatment/intervention services. • Impacts of legislation on mandatory DAEP placements for minor offenses, such as e-cigarettes. • Long wait times to access child psychiatry services. • Lack of alternative placement options to DAEP/suspension for top discipline issues. • Need more collaboration between school district departments to collaboratively use data to target students supports matched to needs. <p>Potential Opportunities for Change</p> <ul style="list-style-type: none"> • Build out the MTSS District Leadership Team focused on integrated mental health and behavior supports with more MTSS-focused professional development for administrators and educators. • Strengthen data systems and monitoring to identify students early and automatically trigger tiered interventions. • Invest in staff training on cultural competence, trauma-informed practices, de-escalation, and restorative practices. • Pilot programs to address the top discipline issues like fighting, substance use, and disorderly conduct through counseling and community partnerships. • Expand alternatives to DAEP placements such as greater access to therapy, teen court, and community service so DAEP is not used as the primary option.

Socorro ISD
<p>Select Resources Available</p> <ul style="list-style-type: none"> • Partnership with Aliviane, Texas Tech University Health Sciences Center at El Paso, National Alliance on Mental Illness El Paso, and Project Vida. • Implemented an intervention plan for first-time offenders to provide counseling, resources, and support rather than automatically sending students to DAEP. • Rapid Integrated Support and Engagement (RISE) Program at one high school for students with discretionary discipline referrals, with possibility for replication at other campuses. • Parent education initiative around dangers of vaping and truancy awareness. • Emphasis on consideration of mitigating factors so first-time offenders avoid DAEP. • Use of Title IV-E programs to bring in prevention programs and resources for parents.

Socorro ISD

- Presentations to coaches and players on bullying.
- Plans to establish a team to meet regularly including teachers, counselors, and administrators to discuss behavior issues, interventions, and improvements.
- Implemented new data system in Skyward to pull discipline data and flag errors earlier; data being monitored more frequently.

Gaps and Challenges Identified

- The stepped intervention plan is arduous for some campuses and facing pushback and implementation challenges, particularly with providing more interventions before DAEP placement.
- Challenges implementing TEA’s new three-day limit for in-school suspension (ISS).
- Need for leadership approval and resources to expand RISE program as a DAEP alternative at additional campuses.
- Lack of funding for Title IV-E programs that previously allowed prevention workshops and resources for parents/students.
- Rise in issues like bullying, suicidal ideation, vaping, and trauma, but limited in resources to adequately address student mental health needs.
- Need for more cross-sector teams to meet regularly to discuss interventions and improvements but have been unable to initiate this consistently.
- DAEP consistently at capacity.

Potential Opportunities for Change

- Provide additional training and support for implementing the stepped behavior intervention plan and address campus implementation concerns.
- Identify funding and resources to expand RISE program as a placement alternative at more campuses.
- Enhance vaping prevention education and explore deterrents like vape detectors; engage students in solutions.
- Restore funding sources for parental/student education programs or pursue grants and community partnerships.
- Invest in trauma-informed training for staff and mental health resources for students.
- Schedule and prioritize regular meetings for cross-sector teams to meet and review data collectively.
- Develop alternatives to ISS such as restorative practices and collaborate to develop solutions to comply with new ISS three-day limit.

Ysleta ISD

Select Resources Available

- Partnership with Aliviane and the psychiatry department and student clinic at Texas Tech University Health Sciences Center at El Paso and the El Paso Child Guidance Center.

Ysleta ISD

- Screening process where teachers or family can refer students to counselors for behaviors or behavioral health needs; counselors available to assess and refer students to resources like the Comprehensive Care Center.
- Implemented a school-led Vaping First Offender program as an alternative to disciplinary placement, involving parent training and student counseling.
- Using student data from their social-emotional learning (SEL) survey and weekly check-ins to identify and support struggling students; recently trained staff on using SEL data in MTSS process.
- Developed an in-house discipline data dashboard showing code violations, DAEP placements, and teacher patterns; sharing data regularly with administrators.
- Working proactively to rebuild student relationships and engage parents, with a focus on top discipline issues including aggression, assaults, fights, dress code violations, and disrespect/insubordination.
- Use of a flowchart graduated response system for truancy with warning letters and conferences before referring to truancy court.
- School resource officers cover high schools while rovers support middle schools; have a robust MOU delineating school discipline versus law enforcement roles.

Gaps and Challenges Identified

- Concerned about three-day ISS limit from TEA affecting the ten-day Vaping First Offender program which uses longer ISS; may have to find alternatives or adjust program design.
- Need for more consistency in and the use of exclusionary discipline alternatives across campuses.
- Need for more mentors and support from those with lived experience to check in routinely with struggling students.
- Desire for better use of data at the campus level to identify targeted interventions based on grade level needs and referral patterns.
- Alternative programs need to be standardized across campuses so discipline responses are more consistently applied.

Potential Opportunities for Change

- Identify funding and resources to expand successful behavioral intervention programs across all campuses.
- Enhance vaping prevention education and deterrents like vape detectors or discipline alternatives.
- Recruit mentors with lived experiences to engage struggling students.
- Develop student peer support programs to promote positive school culture.
- Provide further training for staff on utilizing data to identify behavioral hotspots and target interventions.
- Create consistent alternative programs, policies, and agreements across campuses.
- Invest in trauma-informed training for staff and restorative practices as discipline alternatives.

Ysleta ISD
<ul style="list-style-type: none"> • Strengthen partnerships and communication with parents around issues like aggression; offer more parenting support programs.

Communities in Schools (CIS)
<p>Select Resources Available</p> <ul style="list-style-type: none"> • Full-time program coordinators embedded at some schools to provide case management. • Home visits, needs assessments, service referrals, and follow-up support for students. • On-campus support groups and activities focused on skill building. • Parenting classes and engagement opportunities. • Partnerships with schools to identify and serve high-need student populations. • Mental health and wellness coordinator provides support across programs. <p>Gaps and Challenges Identified</p> <ul style="list-style-type: none"> • Large student populations result in limited ability to serve all high-need students. • Need for substance use and more intensive mental health services for students. • Difficulty connecting students with community services like counseling. • Funding constraints limit service expansion, staff salaries, and student activities. • Some CIS counselors have been shifted by school campus leadership from their primary roles in student mental health support and case management to other tasks, making it hard to guarantee they perform their central duties, potentially leading to an overload of responsibilities. • No CIS presence at El Paso ISD. <p>Potential Opportunities for Change</p> <ul style="list-style-type: none"> • Hire additional CIS program coordinators to reduce student-to-staff ratios. • Develop substance use and mental health curriculums and on-site counselor role. • Advocate for expanded funding for CIS expansion from public and private sources. • Pilot embedding CIS program coordinators in additional grades or schools and expand to El Paso ISD. • Explore contracting with the juvenile justice system to serve system-involved youth.

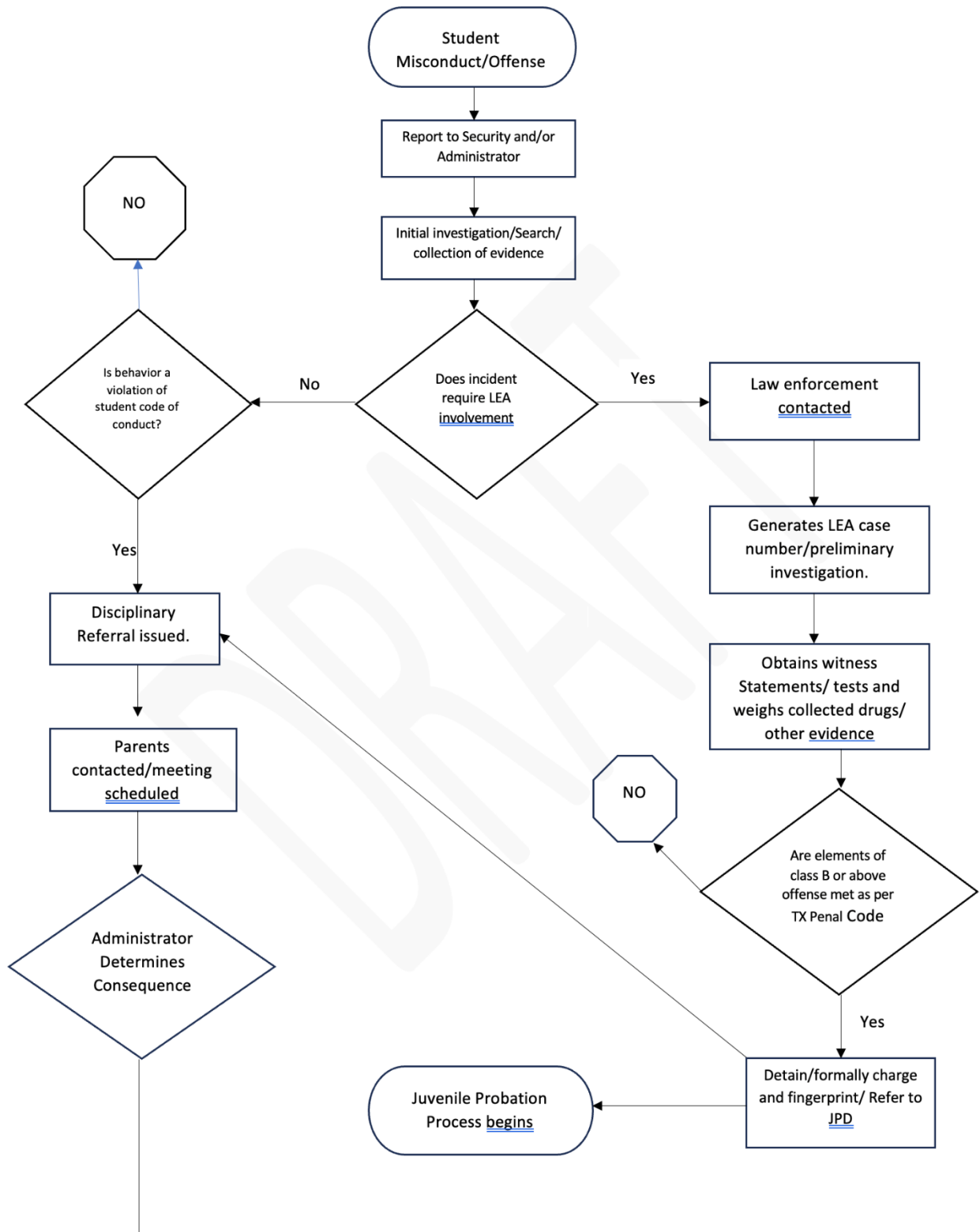
El Paso SIM Map: Intercept 0

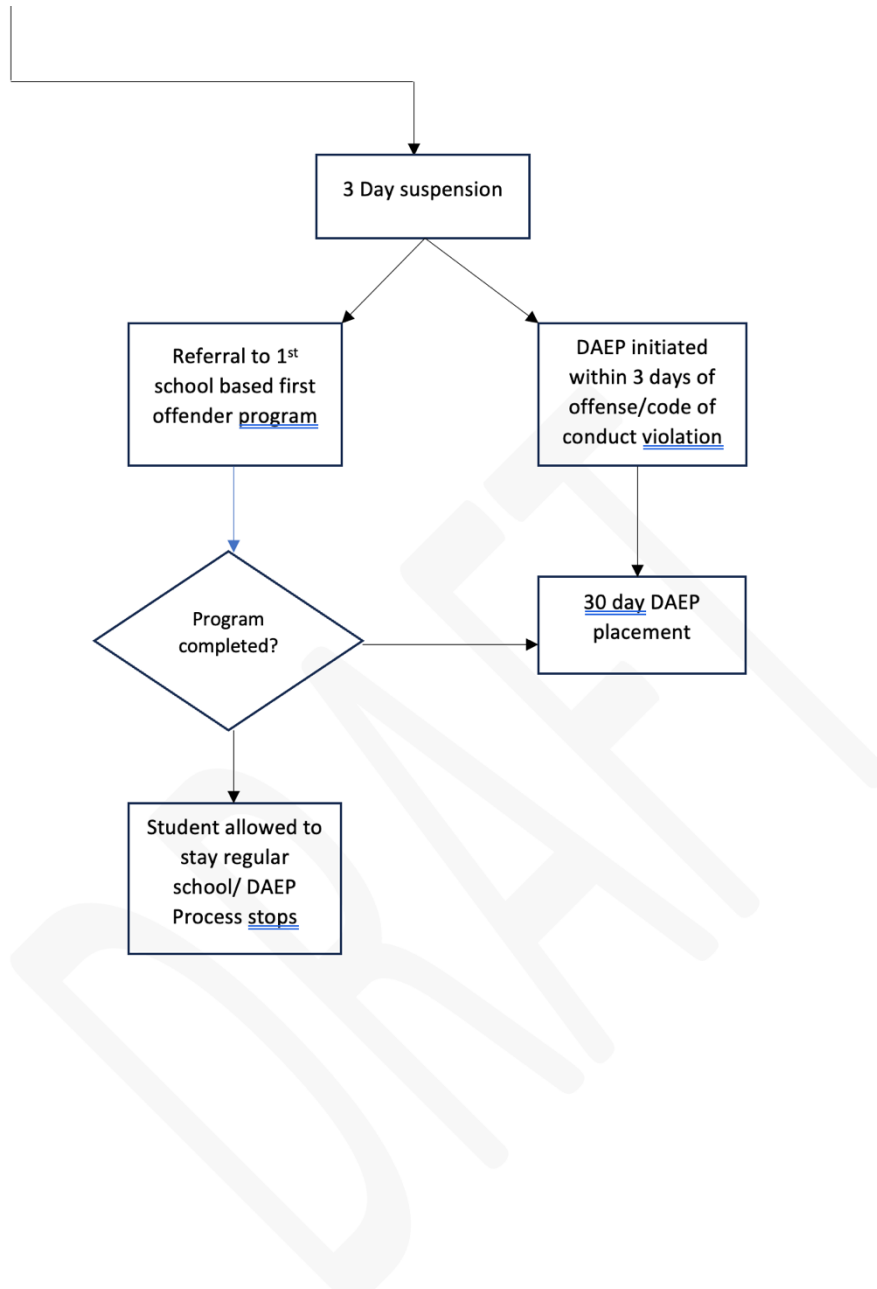
COMMUNITY PREVENTION & INTERVENTION

INTERCEPT 2: INITIAL JUSTICE CONTACT

Intercept 0 SCHOOL SYSTEMS & SUPPORT SERVICES & EXCLUSIONARY DISCIPLINE			Intercept 1 LAW ENFORCEMENT
<p style="text-align: center;"><u>Ysleta ISD: Supports</u></p> <ul style="list-style-type: none"> 30 schools, 40k students Vaping First Offender Program involving parent training (with CIS) and student counseling Counselor warm handoff protocols for targeted supports based on behavior/need Counselors track/report data on service delivery Comprehensive Care Centers; Care Solace partnership (year 2) for family support Behavioral RTI program with tiered interventions Use SEL survey and weekly check-ins to identify/support students Project Vida family assistance Discipline data dashboard drilling down to code of conduct violations, teacher patterns – share regularly with administrators Truancy graduated response system MOU w/EHN for counseling, case management, psychiatric @ 3 schools Youth Peer Support from EHN via SOC grant Behavior Task force reviewing data to drive interventions 	<p style="text-align: center;"><u>Socorro ISD: Supports</u></p> <ul style="list-style-type: none"> 50 schools, 50k students 8-Step intervention plan prior to DAEP RISE Program at 1 HS for discretionary offenses pre-DAEP Parent education program on vaping New discipline data reporting and monitoring process Referrals made to community behavioral health treatment Partnership with law enforcement for on-campus CIT services for students in crisis Project Vida family assistance Monthly campus behavior coordinator meetings Counselor at each campus Classroom-based SEL program twice a month Grief and trauma-focused interventions EHN Partnership/MOU 	<p style="text-align: center;"><u>El Paso ISD: Supports</u></p> <ul style="list-style-type: none"> 90 schools, 60k students Site-based MH clinics: MOU w/EHN 5 schools (counseling, case management, and psychiatric) Suicide prevention protocol and threat assessment process, tracked in Navigate 360 Responsible decision-making classes at middle schools for certain offenses Focus on Families program to engage parents of students with serious discipline issues Some restorative practices and referral to counseling for interventions First Chance alternative program for some first-time substance-related offenses Partnership with law enforcement for on-campus CIT services for students in crisis MTSS (behavior) in development, Whole Learning Chief position 	<p style="text-align: center;">School-based Law Enforcement: SISD Police EPISD Police Ysleta ISD SROs w/El Paso PD</p> <p style="text-align: center;">Community Law Enforcement: El Paso Police El Paso Sheriff</p> <p style="text-align: center;">Justice Diversion: County Attorney El Paso Juvenile Probation Dept Municipal Courts</p> <p style="text-align: center;">Crisis/Emergency Systems</p>
<p style="text-align: center;"><u>Communities in Schools: SISD & YISD</u></p> <ul style="list-style-type: none"> Full-time program coordinators embedded at schools for case management Home visits, needs assessments, service referrals, and follow-up support On-campus support groups and activities focused on skills building Parenting classes and engagement opportunities Partnerships w/schools to identify and serve high-need student populations Mental health and wellness coordinator provides support across program 			<p style="text-align: center;"><u>Discipline Population - 2021-22 School Year</u></p> <ul style="list-style-type: none"> YISD: 9.6% of Student Body with a Discipline Record <ul style="list-style-type: none"> 789 DAEP actions (724 students), w/restorative, LOS: 45 days SISD: 7.8% of Student Body with a Discipline Record <ul style="list-style-type: none"> 752 DAEP Actions (720 students), LOS: 9 wks, 2nd offense 18 wks EPISD: 7% of Student Body with a Discipline Record <ul style="list-style-type: none"> 1,531 DAEP Actions (1392 students) El Paso County Juvenile Justice Alternative Education Program (JJAEP) <ul style="list-style-type: none"> FY23: 12 new enrollments FY22: 38 new enrollments
Region 19 Education Service Center	Texas Child Health Access Through Telemedicine (TCHAT)	Behavior Threat Assessment Teams	

Process Map 1: School Discipline and Arrest Flow

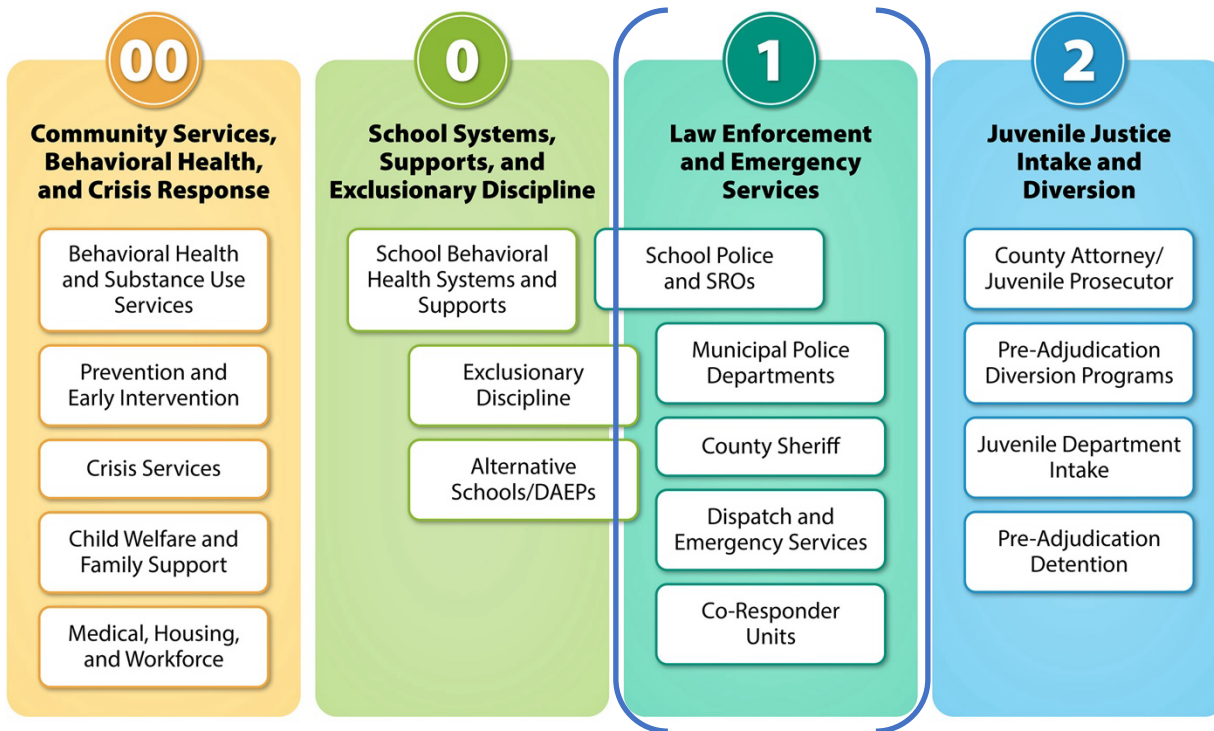




Intercept 1: Law Enforcement

City, County, and School Police/SROs

Intercept 1: Law Enforcement



Intercept 1 focuses on law enforcement and encompasses various entities, including school-based police departments and School Resource Officers (SROs), municipal police departments, the sheriff's office, and the County Attorney's juvenile prosecutor unit. This intercept begins when disciplinary action is initiated in response to a child with mental illness (MI), substance use disorder (SUD), and/or intellectual and developmental disabilities (IDD) either in the community or at school. It concludes when the child is either arrested or diverted into treatment or other community-based alternatives. It also considers how law enforcement officers and their agency policies and response protocols interface with school administrator decisions and school discipline systems, highlighting opportunities for change or potential areas of concern during the mapping process.

Resources

Intercept 1: Law Enforcement Resources	
El Paso ISD Police Department	
School-Based Crisis Intervention Team (CIT) with EHN	MH/IDD Training for LE & EHN Consult
Prevention and education programs with districts	
Socorro ISD Police Department	
School-Based CIT with EHN	MH/IDD Training for LE & EHN Consult
Vaping Diversion Protocols	
Ysleta ISD: El Paso Police Department School Resource Officers	
Vaping First Offender Program (school-run)	Memorandum of Understanding with EPPD

Intercept 1: Law Enforcement Resources	
El Paso Police Department	
Mental Health (MH) Co-responder Unit	Crisis Intervention Team (w/EHN)
El Paso County Sheriff’s Office	
MH Co-Responder Unit (CORE w/tablet) (w/EHN)	Crisis Intervention Team (w/EHN)
20 SROs in four school districts/unincorporated areas	Provides Narcan to all deputies
County Attorney & El Paso Juvenile Probation Department (EPJPD)	
County Attorney Community Outreach	Diversion/Competency Prosecutor
Super Saturday & Transforming Tuesday Programs for Vaping Diversion	EPJPD Prevention Services Department: five UTEP Social Work Interns, two Prevention Service Coordinators, volunteers
Juvenile Justice Alternative Education Program (JJAEP) run by EPJPD in partnership with Ysleta ISD serving entire county	
Crisis Facilities/Hospitals	
El Paso Behavioral Health (In/Outpatient)	Steven A Cohen Military Family Clinic
Lee Moor Children Home	PEAK Behavioral Hospital
Child Crisis Center of El Paso	El Paso Psychiatric Center
El Paso Center for Children Runaway Center	Child Crisis Center
El Paso Center for Children	Center for Sexual and Family Violence
Emergency Departments	

Gaps, Challenges, and Opportunities for Change

During the SIM workshop and in pre-mapping interviews, participants identified gaps and challenges in law enforcement practices and systems for youth with mental and behavioral health needs that were believed to contribute to the increase in juvenile justice system referrals. Stakeholders then contributed ideas for addressing these concerns at Intercept 1, and themes emerged from these discussions, which were validated by workshop participants.

Gaps, Challenges, and Opportunities for Change
Low Risk Referrals
<p>Gaps and Challenges: Of the 700-800 students arrested in school and referred to the juvenile justice system’s deferred prosecution program in Fiscal Year 2023, 95% were assessed as low risk offenders and only 3% reoffended (see Appendix 3, Data Presentation). Sending low-risk youth into the juvenile justice system consumes significant resources from both schools and the justice system. These resources could be better allocated to address more serious offenses and provide support to higher-risk youth. In addition, the offense will remain on the juvenile’s criminal record until the age of 19 or indefinitely depending on the final disposition of the referred offense.</p> <p>Opportunities for Change</p> <ul style="list-style-type: none"> • Focus diversion resources on the highest-risk youth by reviewing and refining the eligibility criteria for diversion programs. Ensure only those who genuinely pose a risk to themselves or others are referred to the juvenile justice system.

Gaps, Challenges, and Opportunities for Change

- Instead of criminalizing vaping offenses, explore whether a more education-focused approach, such as mandatory vaping education courses, could be a better alternative to formal legal action.
- Establish a First Offender Program led by law enforcement in schools, with a focus on Felony THC and other vaping offenses (See Appendix 5, First Offender Program).
- Analyze *Process Map 2: Juvenile Justice Flow of Case and Timelines* on pages 54-55 below to identify diversion opportunities along the pathway to court, such as adding a Supervisory Caution Warning under Juvenile Probation Department Intake Process timelines, in addition to the Deferred Prosecution and Close Out options.
- Consider implementing restorative justice practices within the school system focused on repairing the harm caused by the offense, involving the offender, victim, and community, which could be particularly effective for minor offenses and vaping.
- Provide training to law enforcement officers and school staff to help them differentiate between high-risk and low-risk situations. Encourage a more nuanced approach to handling vaping-related incidents.
- Review and revise internal law enforcement policies related to vaping offenses. Focus on distinguishing between low-risk and high-risk cases and prioritize diversion for low-risk youth.
- Involve youth in the development of policies and programs related to vaping. Their perspectives and input are crucial in designing effective interventions.

Officer Discretion

Gaps and Challenges: Law enforcement officers are unclear where they have discretion and/or are unwilling to use discretion to divert students from arrest, particularly with THC felony vaping offenses. When law enforcement officers are reluctant to use discretion, it limits the availability of diversion programs and alternative interventions that can address the underlying issues leading to vaping. Arresting students for vaping offenses misses the opportunity to connect them with educational and rehabilitative interventions that can address substance use issues and promote healthier choices.

Opportunities for Change

- The County Attorney or TJJD legal counsel can develop clear and comprehensive guidelines for law enforcement officers regarding the exercise of discretion in school-related incidents, including vaping offenses. Law enforcement officers typically have discretion even when they know a crime has occurred. Discretion is a fundamental aspect of law enforcement and officers often make judgment calls based on the circumstances of each situation. However, the level of discretion can vary depending on several factors, including the nature of the offense, department policies, state laws, and the specific details of the case.
- Organize collaborative meetings or forums where law enforcement officers, school administrators, the County Attorney, and public defender can discuss and clarify their roles and responsibilities in handling school-based offenses. Foster an open dialogue to address concerns and misconceptions about the law and discretion.
- Offer legal education sessions to all relevant stakeholders, including law enforcement, county attorneys, and public defenders, to ensure everyone has a clear understanding of the legal framework and the scope of discretion.

Gaps, Challenges, and Opportunities for Change

- Encourage a community policing approach where law enforcement officers build positive relationships with students and school staff. This can create an environment of trust and understanding, making it easier to use discretion when appropriate.
- Increase utilization of the Clinician and Officer Remote Evaluation (CORE) Program.

First Offender Programs for Vaping

Gaps and Challenges: For school districts like Ysleta ISD with a First Offender Program (FOP) for vaping-related offenses run by school administration, students are diverted from exclusionary discipline consequences but still referred to law enforcement for arrest and juvenile referral. This is a result of law enforcement officers interpreting felony laws to prohibit a school-based first offender program to be used for felonies, including THC felony vaping.

Opportunities for Change

- Establish a school-based FOP run by law enforcement specifically designed to address first-time felony-level THC vaping cases involving students. This alternative approach to handling these cases that focus on rehabilitation and education rather than immediate punitive measures will allow for early intervention and diversion, reducing the long-term consequences of felony-level offenses for youth (see Appendix 5, FOP).
 - Note: The [Texas Family Code § 52.031](#) allows a juvenile board to establish a FOP for conduct indicating a need for supervision (CINS), class C misdemeanors (non-traffic), and delinquent conduct, excluding certain felony categories. Per the statute, eligibility for FOP excludes first, second, and third-degree felonies, aggravated controlled substance felonies, capital felonies, state jail felonies, and misdemeanors involving violence to a person or the use or possession of a firearm, location-restricted knife, club, or prohibited weapon. THC vaping cases typically involve the possession of THC cartridges, which may weigh one gram or less. While some may argue that such cases qualify as third-degree felonies due to drug-free zone provisions, it is essential to clarify that **the statute does not inherently increase the offense level.** Instead, it increases the punishment if proven at trial that the offense was committed in a drug-free zone. THC vaping cases, when weighing one gram or less, are typically categorized as state jail felonies. This classification makes them eligible for an FOP as they fall outside the categories expressly excluded by the statute.
- Set a meeting with El Paso County law enforcement agencies and the juvenile board to determine guidelines for the first offender disposition and to designate agency and officers to carry out an FOP. Research FOPs, connecting with other communities that have established programs to include felony THC vaping, such as Williamson County Juvenile Services.

Criminal Records

Gaps and Challenges: The impact of a criminal record on students can have far-reaching consequences, and many school administrators, school resource officers, students, parents, and educators do not fully understand the collateral consequences of criminal records on college admission, scholarship eligibility, employment, housing and rental applications, financial aid and loans, professional licensing, travel, and voting rights.

Gaps, Challenges, and Opportunities for Change

Opportunities for Change

- Implement educational programs within schools to inform students, parents, and educators about the potential consequences of criminal records on a young person’s future opportunities.
- For those students who already have criminal records, explore the possibility of record expungement or sealing for minor offenses.
- Establish partnerships with legal aid organizations or counselors to provide guidance to students with criminal records on how to navigate the legal system, seek expungement when applicable, and understand their rights.
- Promote collaboration between schools, law enforcement, legal organizations, and community groups to provide a holistic approach to addressing the challenges faced by students with criminal records.

Inconsistent Response

Gaps and Challenges: There is variation in law enforcement response and arrest policies between different districts and even individual campuses. Law enforcement agencies operate independently within their jurisdiction. Each district or campus has its own chief of police or law enforcement leadership, with autonomy in setting policies. The availability of law enforcement resources, including personnel, equipment, and funding, can influence policies and districts with more resources may have more flexibility in their approaches. The level of collaboration between law enforcement agencies and schools differs. Some districts have well-established partnerships and clear protocols, while others have limited interaction. Some districts may adapt more quickly to evolving best practices and legal requirements, while others may lag.

Opportunities for Change

- Develop standardized protocols for law enforcement responses to common incidents in educational settings. These protocols should be based on best practices, legal requirements, and community input.
- Foster collaborative partnerships between school districts, law enforcement agencies, and relevant stakeholders. Regular communication and joint training sessions can help align practices and build trust.
- Engage the community, including parents, students, and educators in discussions about law enforcement policies and practices. Seek input to inform decision-making.
- Implement data collection and analysis processes to monitor law enforcement interactions with students. Use data to identify trends, disparities, and areas for improvement.
- Conduct regular reviews of law enforcement policies to ensure alignment with state and federal laws, as well as community expectations. Update policies as needed to reflect best practices.
- Establish clear reporting mechanisms for incidents involving law enforcement interactions with students. Ensure accountability for actions that do not align with established protocols.
- Create community review boards or oversight committees to review law enforcement practices within schools. These boards can provide transparency and accountability.

Gaps, Challenges, and Opportunities for Change
<ul style="list-style-type: none"> • Seek legal consultation to ensure that law enforcement policies are in compliance with federal and state laws. Legal experts can help identify potential areas of concern. • Keep all stakeholders informed of policy changes and updates. Ensure that law enforcement officers receive ongoing training on updated protocols.
Duplicate Programs
<p>Gaps and Challenges: Even when students are successful in school-based first offender programs addressing behavior (including vaping), this information is typically not shared with the juvenile probation department. Without a system for tracking interventions, youth who have already successfully completed school-based programs may be unnecessarily referred to the juvenile justice system, which leads to duplicative programming consuming valuable resources.</p> <p>Opportunities for Change</p> <ul style="list-style-type: none"> • Develop clear protocols and agreements for sharing information between school-based behavior programs, schools, and the El Paso Juvenile Probation Department. Ensure compliance with relevant privacy laws and regulations. • Implement data management systems that track interventions and outcomes for each youth involved in school-based programs. This information can be accessible to relevant stakeholders, including probation officers. • Encourage collaboration between school personnel, probation officers, and other stakeholders to create a comprehensive approach to youth intervention. Regular meetings and communication, along with an interagency MOU, can facilitate this process.
Prevention Units
<p>Gaps and Challenges: Many school-based law enforcement agencies are unable to staff dedicated drug prevention and education units due to workforce shortages and high caseloads. This results in less time for proactive police work in schools, including prevention efforts, relationship building, and community engagement. Resource limitations may force law enforcement officers to adopt a more reactive approach, responding primarily to incidents rather than proactively working to prevent them.</p> <p>Opportunities for Change</p> <ul style="list-style-type: none"> • Embrace a community policing philosophy that prioritizes partnerships, problem-solving, and prevention. Engage in open dialogue with community members and schools to identify shared goals. • If establishing a dedicated unit is not feasible, consider assigning officers or personnel from within the existing force to lead drug prevention and education efforts. This can help distribute responsibilities more effectively. • Coordinate efforts with school counselors, educators, and mental health professionals to integrate drug prevention into the broader school curriculum and support systems. • Develop and support youth engagement programs that empower students to take an active role in drug prevention and education. Peer-led initiatives can be highly effective, playing a significant role in providing relatable and empathetic support. • Use data to identify specific drug-related challenges within schools and communities. Target resources and prevention efforts based on data-driven insights.

Gaps, Challenges, and Opportunities for Change
<ul style="list-style-type: none"> • Seek grant funding opportunities or explore public-private partnerships with businesses and corporations to support drug prevention initiatives.
Strained Resources
<p>Gaps and Challenges: The rise in vaping-related incidents has placed a strain on law enforcement resources, including personnel, time, and budget. Processing vaping-related cases can be time-consuming due to the need for thorough investigations, documentation, and interactions with students, parents, and school staff. As law enforcement officers are occupied with handling vaping cases, there may be a reduced security presence on campuses, which can create vulnerabilities and affect the overall sense of safety among students and staff.</p> <p>Opportunities for Change</p> <ul style="list-style-type: none"> • Collaborate with school counselors to identify students who may be at risk of vaping or substance abuse. Early intervention and counseling can prevent further incidents. • Develop diversion programs for students caught vaping, emphasizing education, counseling, and community service as alternatives to criminal charges. These programs can be less time-consuming for law enforcement. • Implement streamlined procedures for processing vaping cases, including standardized documentation and reporting templates. This can help reduce the time spent on each case.
Officer Training
<p>Gaps and Challenges: Some officers, particularly those newly placed on school campuses due to legislation such as HB3, may not receive adequate training on dealing with youth who have behavioral health needs. Officers, especially those new to the school setting, may not fully understand the unique role and responsibilities of a school resource officer (SRO). They may approach situations from a traditional law enforcement perspective rather than focusing on the broader role of mentoring, education, and community engagement. Additionally, law enforcement officers may not always be aware of the available community services and resources that can support students with behavioral health needs.</p> <p>Opportunities for Change</p> <ul style="list-style-type: none"> • Foster collaboration between law enforcement agencies, school districts, and mental health professionals to provide joint training sessions, with specialized training programs for SROs that focus on de-escalation techniques, crisis intervention, trauma-informed care, and youth mental health first aid. Training should also cover the specific role and responsibilities of SROs in schools. • Increase officers' awareness of youth mental health issues, behavioral disorders, and the signs of distress. Training should emphasize the importance of recognizing and responding to students in crisis. • Implement mentorship programs for SROs, where experienced officers can guide newcomers in understanding their unique role in schools and the importance of youth mental health awareness. • Build strong partnerships with local mental health agencies, crisis hotlines, and other community organizations. Ensure that officers are aware of available resources and can refer students as needed.

<p>Gaps, Challenges, and Opportunities for Change</p>
<ul style="list-style-type: none"> • Establish mechanisms for gathering feedback from school staff, students, and families about the interactions between SROs and students with behavioral health needs. Use this feedback to improve practices.
<p>Unsafe Schools Designation</p>
<p>Gaps and Challenges: The "Unsafe School" designation is a term used by TEA to identify schools that may require additional support and intervention to address safety and disciplinary concerns effectively. The designation can have consequences for a school, including potential reputational damage, may trigger additional oversight, and in some cases, can impact a school's funding. Schools designated as "Unsafe" may face legal complexities, especially when dealing with incidents involving illegal substances like THC.</p> <p>Opportunities for Change</p> <ul style="list-style-type: none"> • Schools can work toward creating a safe and supportive learning environment while addressing disciplinary issues in a balanced and proactive manner by collaborating with community stakeholders and focusing on prevention and support to help mitigate the risk of an "Unsafe School" designation without the overuse of exclusionary discipline practices. • Ensure that school administrators and staff receive training and legal consultation regarding their responsibilities in handling disciplinary matters. Understanding the legal framework and procedures is essential for compliance. • Collaborate with legal professionals who specialize in education law to ensure that schools are well-prepared to navigate legal complexities when disciplinary matters arise. • Engage in advocacy efforts at the state level to influence policies related to school safety and disciplinary procedures. Advocate for reforms that promote a balanced and supportive approach.
<p>Diversion Options</p>
<p>Gaps and Challenges: When law enforcement officers seek to divert youth from arrest for cases of Assault Family Violence, for example, where youth need to be removed from the home, there is not an alternative placement location in the community to divert. Without appropriate alternatives, law enforcement is left with limited choices when encountering such cases and these limitations may result in youth placed in juvenile detention facilities. Detention is generally intended for more serious offenses, and its use for lesser offenses can be counterproductive.</p> <p>Opportunities for Change</p> <ul style="list-style-type: none"> • Develop alternatives to secure detention for youth, such as a Youth Crisis Respite Facility or Youth Diversion Center. • Create a coordinated network of service providers and establish a centralized location or "hub" for wraparound services and referrals, such as an Assessment Center. • Establish and expand diversion programs specifically designed for cases of Assault Family Violence among youth to provide alternative placements and comprehensive interventions. The Travis County Transformation Project model is a pre-arrest, community-based pilot program for 15 to 16-year-olds involved with family violence in the home. An alternative to juvenile detention, the model uses restorative justice practices to repair harm, restore connection to community, and prevent future violence.

<p>Gaps, Challenges, and Opportunities for Change</p> <ul style="list-style-type: none"> • Implement robust assessment and screening processes to identify the specific needs and risk factors of youth involved in Assault Family Violence cases. This information can inform the development of tailored diversion plans. • Provide specialized training for law enforcement officers and other professionals on identifying cases appropriate for diversion and connecting youth to suitable resources.
<p>Backlog and Delay</p> <p>Gaps and Challenges: A backlog in the courts due to delayed hearings and processing and the limited number of vape testing labs in the state with significant backlogs result in longer wait times for cases to be resolved. Timely intervention is crucial for addressing underlying issues and providing youth with appropriate support and guidance. Delayed intervention may result in missed opportunities to address these issues effectively and provide opportunities for youth to commit additional offenses while their initial cases are pending.</p> <p>Opportunities for Change</p> <ul style="list-style-type: none"> • Invest in preventive measures and early intervention programs to address the root causes of youth involvement in vaping and other illegal activities. Allocate resources strategically to support diversion programs, alternative sentencing options, and rehabilitative services that can be implemented more quickly than traditional court processes. • Implement strategies to prioritize high-risk cases involving THC felony vapes, ensuring that cases with the greatest potential for harm are processed promptly. • Evaluate and streamline court processes to reduce delays. This may include implementing technology solutions, increasing court staff, or revising procedural rules. • Encourage collaboration among stakeholders, including courts, law enforcement, legal professionals, and advocacy groups, to identify bottlenecks in the system and develop solutions collectively.

Agency Spotlights

<p>Socorro ISD Law Enforcement</p> <p>Select Resources Available</p> <ul style="list-style-type: none"> • Approximately 70 police officers distributed among every campus, with specialized canine, motor, and Crisis Intervention units. • Proactive officers with high arrest rates compared to other agencies. • Testing kits to identify THC vapes and mandatory referral to courts for possession. • Presentations to students on vaping consequences prior to offenses. • Process to avoid handcuffing students on campus when making arrests. • Collaboration with campus administrators and security guards. • Rapid response time to calls for service on campuses. <p>Gaps and Challenges Identified</p> <ul style="list-style-type: none"> • Extremely high call volume leaves little time for proactive student engagement. • Parental pushback and lack of involvement.
--

Socorro ISD Law Enforcement

- Need for additional options to divert first-time youth offenders and avoid arrests.
- Staffing shortages across law enforcement hamper ability for prevention activities.
- Officers struggle to find time to attend school leadership meetings for information sharing with educators.
- Desire for a dedicated drug prevention and education unit among staffing shortages.
- Belief that current laws prohibit a school-based felony first offender program.
- Vaping cases take up to three hours each, reducing security presence on campuses.

Potential Opportunities for Change

- Create a first offender diversion program at the school level to avoid mandatory arrest/referral, which may require policy changes.
- Increase parental education and outreach around substance use consequences and involve them more proactively.
- Advocate for additional staffing to create dedicated prevention/education unit for students.
- Identify opportunities to free up officers to participate in more leadership meetings with educators.
- Consider policy advocacy to allow officer discretion for first-time youth offenders.
- Streamline paperwork/process required for vaping cases to reduce time burden on officers.
- Increase school campus security staff to fill gaps when officers are tied up on calls.

El Paso County Attorney – Juvenile Prosecutor Unit

Select Resources Available

- Juvenile Unit consists of four Assistant County Attorneys, two legal secretaries, a paralegal, and a victim’s advocate.
- Diversion programs for first-time drug offenses, primarily THC felony vaping.
- Partnership with law enforcement for pre-arrest diversion options and consultation.
- Prosecution of all felony juvenile cases and certain misdemeanors.
- Training and education of juvenile probation, schools, and various community groups concerned with juvenile delinquency.
- Training of law enforcement specific to juvenile cases.
- Handling of competency cases for juveniles.

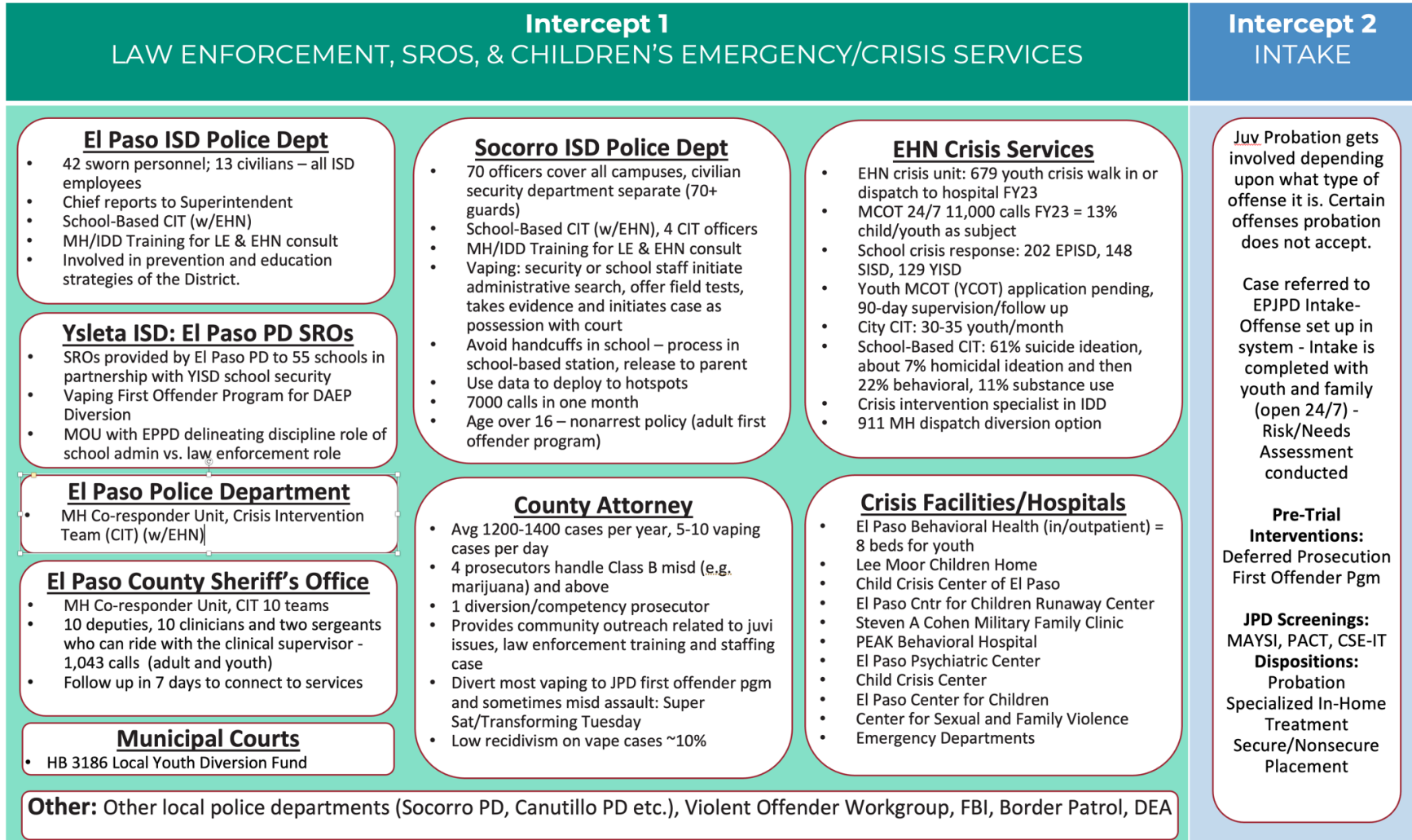
Gaps and Challenges Identified

- Backlogs and delays in interventions due to high volume of cases.
- Lack of pre-arrest diversion options and resources locally.
- Lack of a "one-stop-shop" with wraparound services for at-risk youth to divert from arrest.
- Better system for tracking prior interventions and services received.
- Lack of solidified relationships and communication between agencies.
- More education and outreach needed but limited capacity currently.
- Concerns about rising violent crime and resulting reluctance towards diversion options.
- Struggles getting school districts and law enforcement to collaborate.

El Paso County Attorney – Juvenile Prosecutor Unit**Potential Opportunities for Change**

- Develop additional pre-arrest diversion programs and resources so law enforcement can refer youth to support services instead of sending them to court.
- Create a coordinated network of service providers and establish a centralized location for wraparound services and referrals.
- Build a system to track interventions with a youth and share data between agencies.
- Invest in relationship building and cross-training between agencies like juvenile probation, law enforcement, and schools.
- Hire additional staff to engage in more outreach and education efforts (or outsource this to community agencies).
- Focus diversion resources on highest risk youth while monitoring and adjusting eligibility criteria.
- Develop alternatives to detention for youth awaiting competency restoration.

El Paso SIM Map: Intercept 1



Juv Probation gets involved depending upon what type of offense it is. Certain offenses probation does not accept.

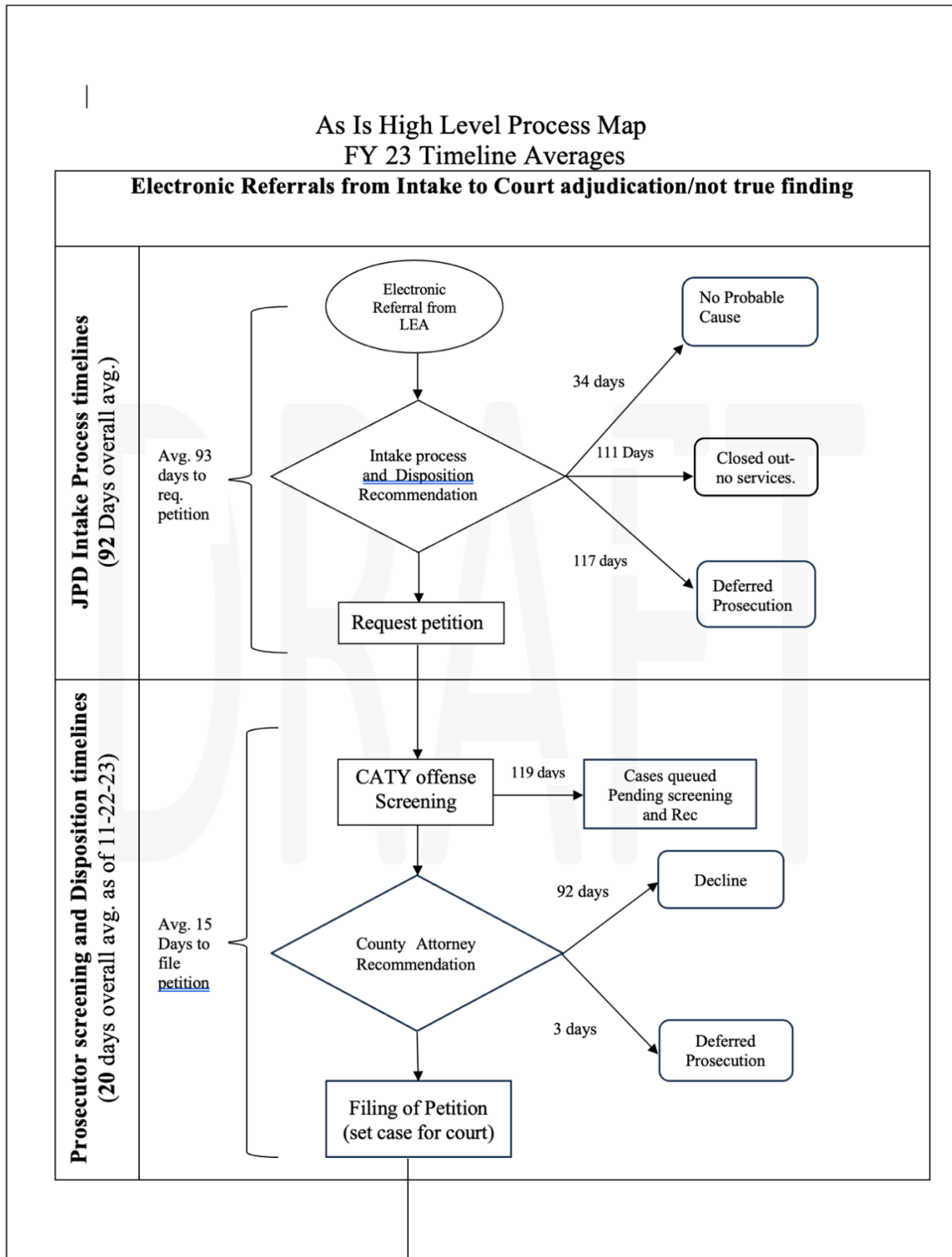
Case referred to EPJPD Intake-Offense set up in system - Intake is completed with youth and family (open 24/7) - Risk/Needs Assessment conducted

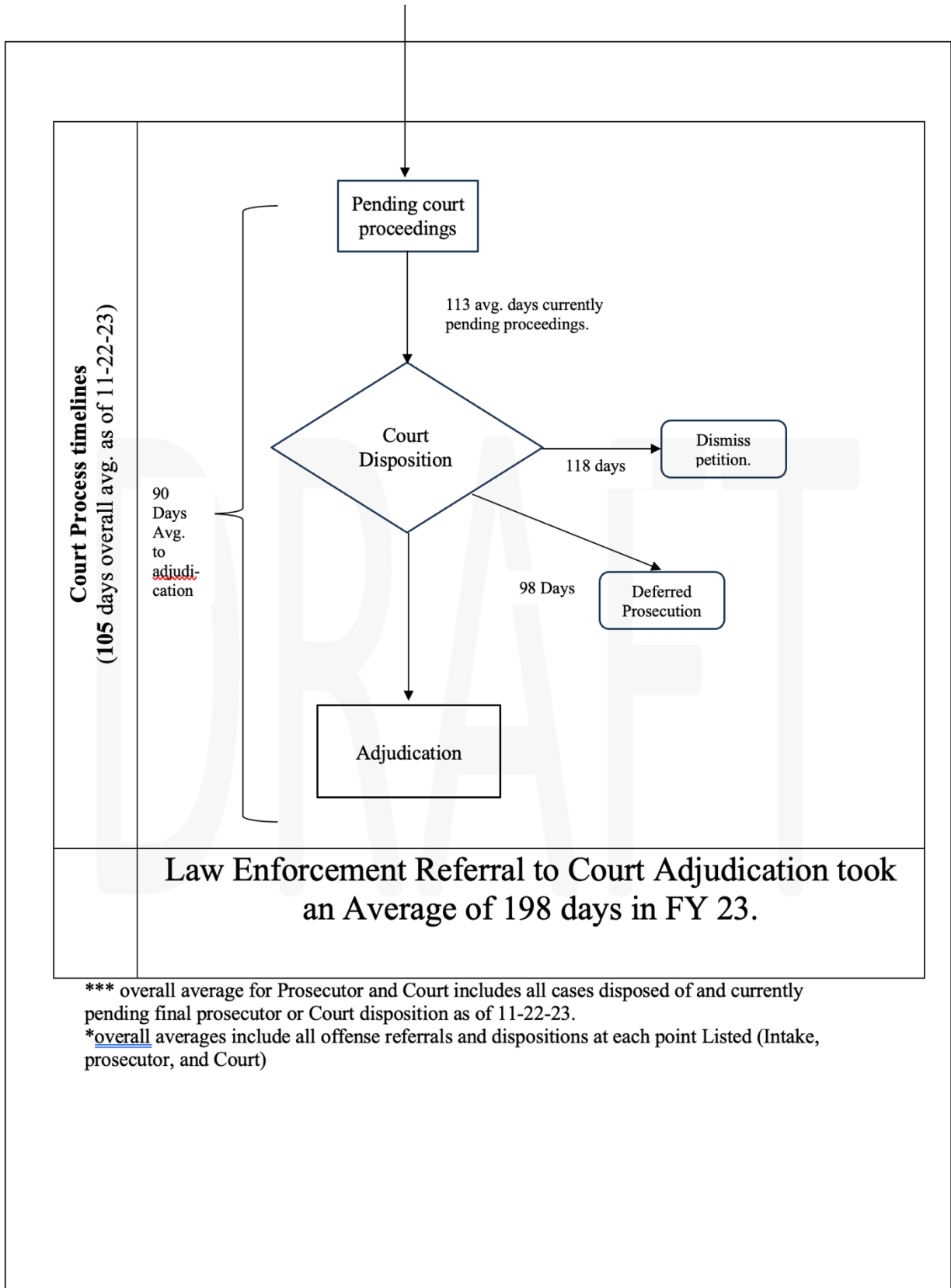
Pre-Trial Interventions:
Deferred Prosecution
First Offender Pgm

JPD Screenings:
MAYSI, PACT, CSE-IT

Dispositions:
Probation
Specialized In-Home Treatment
Secure/Nonsecure Placement

Process Map 2: Juvenile Justice Flow of Case and Timelines





Priorities for Change & Action Plans

Priorities for Change

Based on the analysis of gaps and resources described above, the following five priorities for change were identified by the participants at the conclusion of the SIM workshop. During future convenings, stakeholders should review these opportunities and engage in a consensus process to come to agreement on priorities for the next three years, as well as develop a strategy and action plan with work group or task force teams assigned to each.

Priority 1:	Systems Data Sharing & Cross System Collaboration
Priority 2:	First Offender and Pre-Arrest Diversion Program
Priority 3:	School-Based Crisis Intervention Teams (CIT) and Mental Health Training
Priority 4:	Discipline Alternatives and Disciplinary Alternative Education Programs (DAEPs)
Priority 5:	Community-Based Behavioral Health & Substance Use Service Capacity and School Integration

Priority Workgroup Action Plans 1-5

Below are the five action plans that were drafted by the Youth SIM event participants on Day 2 of the event on October 26, 2023. These are only draft documents. The PdN Center and Meadows Institute Team are taking steps to complement the El Paso Behavioral Health Consortium Family Leadership Council’s active work groups. The draft items that are shared below are for information gathering purposes to confirm data sources and existing work group leads and prevent inappropriate duplication of efforts. Continuously updated versions of these living documents can be found in the online event resource repository at <https://bit.ly/EIPasoYouthSIM>.

Priority 1 Workgroup Action Plan: Systems Data Sharing & Cross System Collaboration

Workgroup Member Names:	
Emily Hartman – PHIX – ehartman@phixnetwork.org	Tony Tomasheski – Boys and Girls Club atomasheski@bgcelpaso.org
Katherine Cepeda – WTX Anti-gang Center – t1980@elpasotexas.gov	Lorie Maldonado – DFPS/CPS – lorena.maldonado@dfps.texas.gov
Audrey Garcia – PdNHF – agarcia@pdnfoundation.org	Cheryll Felder – EPISD – cafelder@episd.org
Sandra Day – PdNHF – sday@pdnfoundation.org	Nicole Schiff – PdN Center of Hope – nicole@pdncon.org
Luis Cenicerros – Aliviane – lceniceros@aliviane.org	Cindy Hernandez – EHN – chernandez@ehnelpaso.org
	Rosie Medina – JPD – rmedina@epcounty.com

Preliminary Purpose Statement: Facilitate data sharing for improved cross-system collaboration across law enforcement, schools, juvenile probation, and community-based service providers.

Objective <i>Key components needed to reach the priority/goal identified</i>	Action Steps <i>Set of tasks to accomplish the objective</i>	Who? <i>Orgs/points of contact to support action steps</i>	When? <i>Initial projections</i>
1 Facilitate data sharing	<ul style="list-style-type: none"> Establish a task force: determine what data agencies are currently collecting (inventory) – send an email/excel by Jan 2024 Recognize the data emphasis, identify duplication, separate the data sources – Jan 2024 Establish and enhance methods for data translation for community collaborations 	Schools, JPD, nonprofits and their programs	Regroup before Thanksgiving then push out smaller groups by 2024
2 Youth screening assessment tool	<ul style="list-style-type: none"> Sample from Dona Ana Sample from JPD 	Dona Ana, JPD	TBD
3 Referrals	<ul style="list-style-type: none"> Collect list of nonprofit programs in the community Determine how PHIX could create an interface tool and partner on a grant with City of Hope 	PHIX – El Paso’s Health Information Exchange phixnetwork.org	meet over the next couple of months to determine
4 Dashboard development	<ul style="list-style-type: none"> Create suggested data tools and questions – Jan 2024 Regulate and limitations for dashboard Feb 2024 (i.e. # staff) 		2024

Priority 2 Workgroup Action Plan: First Offender and Pre-Arrest Diversion Program

Workgroup Member Names:

Linda Garcia LinGarcia@epcounty.com Virginia Lowenberg Veronica.Lowenberg@gov.texas Eduardo Holguin eholguin30@yisd.net Chief Manny Chavira mchavir2@episid.org Annabell Perez APerez@epcounty.com	Salvador Leos SLeos@epcounty.com Dr. Carmen Olivas Graham coliva07@sisd.net Marc Marquez mamarquez@epcounty.com Ramon Hernandez ramhernandez@epcounty.com Iris Escalona IEscalona@epcounty.com
---	--

Preliminary Purpose Statement: Enhancing school-based prevention and integration strategies (multi-tiered systems)

	Objective <i>Key components needed to reach the priority/goal identified</i>	Action Steps <i>Set of tasks to accomplish the objective</i>	Who? <i>Orgs/points of contact to support action steps</i>	When? <i>Initial projections</i>
1	Increase education and awareness for parents, students on top 3 identified risk behaviors (pilot)	<ul style="list-style-type: none"> Pilot with Socorro ISD Voice of customers survey: What do parents need? 	Dr. Olivas Graham	1 month to develop survey; 2-3 months to disseminate
2	Collect data to identify the top 3 risk behaviors at each campus	<ul style="list-style-type: none"> Identify top and immediate needs Example: post-pandemic issue analysis, drug use, mental health, assault, identifying underlying causes, etc. 	Dr. Olivas Graham working with JPD data coordinators	3 months to stratify data
3	Examine current prevention and intervention efforts and their effectiveness to rate strategies	<ul style="list-style-type: none"> Inventory what is already happening in schools, by outside providers, who is delivering interventions (teachers, case managers at school?) Review effectiveness ratings of current practices 	SIM Workgroup SISD - Dr. Graham Olivas & JPD Data Coordinators	9-12 months
4	Select the best-tiered strategies based on data from the pilot	<ul style="list-style-type: none"> Identify what is working to expand through a pilot Establish metrics to track Could include a First Offender Program operated by law enforcement OR other entity (review statute) 	JPD – Marc Marquez Cross Collaboration Group SISD– Dr. Graham Olivas Parent Council Family Leadership Council	School Year 2025-26
5	Execute pilot	<ul style="list-style-type: none"> Develop MOUs with school, providers Identify funding, large cross-agency grant application, etc. 	Cross-agency	School Year 2026-27

Priority 3 Workgroup Action Plan: School-Based Crisis Intervention Teams and Mental Health Training

Workgroup Member Names: Rene Hurtado – EHN rhurtado@EHNELPASO.ORG
 Isidro Torres – NAMI El Paso – itorres@namiep.org Emily Stuessy – El Paso ISD ekstuess@episd.org

Preliminary Purpose Statement: Build robust school-based mental health crisis intervention capabilities through enhanced CIT teams and mental health training for administrators and staff to improve recognition of student needs, while expanding early prevention and intervention programs on campuses and in the community to support at-risk youth.

Objective <i>Key components needed to reach the priority/goal identified</i>	Action Steps <i>Set of tasks to accomplish the objective</i>	Who? <i>Orgs/points of contact to support action steps</i>	When? <i>Initial projections</i>	
1	Data-informed impact assessment of School-Based Crisis Intervention Teams (CIT)	<ul style="list-style-type: none"> Identify metrics for evaluating school-based CIT Analyze data and report on efficacy of school-based CIT Garner buy-in from school administrators around expansion of school-based CIT 	LMHA – EHN ISDs Partner with Data workgroup	TBD
2	Training and engagement plan	<ul style="list-style-type: none"> Begin conversations with EPISD and MTSS Develop district-level service presentation Collaborative marketing of the need for mental health supports and the CIT service, particularly with parents Yearly “orientations” at schools 	Family Leadership Council Everyone involved – schools, EHN, providers, etc.	TBD

Priority 4 Workgroup Action Plan: Discipline Alternatives and Disciplinary Alternative Education Programs (DAEP) Reforms				
Workgroup Member Names: Yvonne Sermenon – yjerme@sisd.net Kristen Ortega – kortega@actionforhealthykids.org John E. Adams – jeadams@episd.org		Lupe Anchondo – ganchondo@ciselpaso.org Arthur Valiant – avaliant@utep.edu Thelma Clark – tlaredo@episd.org		
Preliminary Purpose Statement: Develop a tiered disciplinary approach providing a menu of alternatives to punitive consequences				
	Objective <i>Key components needed to reach the priority/goal identified</i>	Action Steps <i>Set of tasks to accomplish the objective</i>	Who? <i>Orgs/points of contact to support action steps</i>	When? <i>Initial projections</i>
1	Develop a tiered menu of options as disciplinary alternatives	<ul style="list-style-type: none"> Create the concept Introduce the concept and invite school districts to participate in planning Conduct strategic planning session to understand challenges and develop the menu of options for disciplinary alternatives 	JPD, PdN Workgroups Region 19 ISD Superintendents Neutral facilitator School district personnel	Feb 2024 – Initial meeting to create concept March 2024 – strategic plan Dec 2024 – complete plan
2	Train school district staff using a trauma informed lens on menu of disciplinary alternative options developed through strategy sessions	<ul style="list-style-type: none"> Create shell presentation for partners for professional development in schools Present and share with school personnel Select pilot schools 	JPD, PdN Workgroups Region 19 ISD Superintendent Neutral facilitator School district personnel	Spring – Summer 2024 –train staff Fall 2025 – pilot

Priority 5 Workgroup Action Plan: Community-Based Behavioral Health/SUD Service Capacity and School Integration

Workgroup Member Names:

Cathy Gaytan – cgaytan@epcgc.org	Cristina Villalobos – cvillalobos@epccinc.org
Jazmin Vasquez – jazmin@pdncah.org	Jessica Thomas Reyes – jthomas@aliviane.org
Krista Wingate – kwingate@ehnel Paso.org	Ivonne Tapia – itapia@aliviane.org
Eliab Valdez – evaldez@bgcel Paso.org	Andrea Rangel – arangel@aliviane.org
Janell Valles – Janell.valles@borderplexjobs.com	Julie Priego – jpriego@aliviane.org
Britni Yohannes – b.yohannes@epcounty.com	Katherine Longoria – Katherine.longoria@ehnel Paso.org
	Priscilla Cortez – pcortez@aliviane.org

Preliminary Purpose Statement: Expand mental health capacity and substance use disorder services through hiring more professional staff, better-integrating community providers and community programming in schools, and developing partnerships to link families to needed treatment, thereby increasing access to care and support for students’ wellbeing.

Objective <i>Key components needed to reach the priority/goal identified</i>		Action Steps <i>Set of tasks to accomplish the objective</i>	Who? <i>Orgs/points of contact to support action steps</i>	When? <i>Initial projections</i>
1	Develop inventory of mental health workforce options (beyond only licensed clinicians) and plan for integrating into schools	<ul style="list-style-type: none"> Map out creative workforce options and define each education requirement Ex: Peer services, outreach workers, community health workers, MOUs for using interns for direct care, universities, and community colleges Complement with an outreach campaign in secondary/post-secondary settings Peer service expansion Social work internships, Intern fairs 	Co-leads: <ul style="list-style-type: none"> Workforce Solutions (Janelle) Aliviane (Julie) 	First meeting in December 2023
2	Establish strategy for integrating outside providers into schools and establish a resource/user guide	<ul style="list-style-type: none"> Mapping school-specific barriers and design site specific solutions for integrating outside providers into schools Use EHN and Aliviane’s inventory of school district policies and processes as a starting point Advocate for process changes and buy-in with district administrators 	Family Leadership Council (FLC) Partner with data workgroup on resource guide Boys and Girls Club for afterschool program integration	First meeting in December 2023

Priority 5 Workgroup Action Plan: Community-Based Behavioral Health/SUD Service Capacity and School Integration				
		<ul style="list-style-type: none"> • Get consistent guidelines from districts about behavioral health providers in school – systemic not campus specific • Looking at it through MTSS framework: Where do each fit into the tiered MTSS framework • Establish resource guide/user guide categorized by: promotion, prevention, intervention, treatment, recovery, and basic needs • Affiliate with existing school-based after school providers (Boys and Girls Club, etc.) to gain access to provide services on campus after school • Review Texas school survey, data, services needed in schools 		
3	Pilot Project with El Paso ISD	<ul style="list-style-type: none"> • Host work session to co-design the interconnected system of support for families with El Paso ISD leadership and outside providers • Map access points • Develop a School/District and agency profile • FLC helps EPISD map out tiered services, providers, and options • Relationship-building and networking, establishing warm connections and hand off procedures • Incorporate navigators and home visits 	FLC EPISD leadership SIM Workgroup	First meeting before Thanksgiving

Recommendations for Moving the Youth SIM Action Plans Forward

The Paso del Norte Center (PdN Center) provides trusted policy and program support to cultivate collaboration and create lasting improvements so that mental health and emotional well-being services and support are available where and when they are needed. The breadth and depth of complexity required to achieve accurate and precise healthcare and support system access when and where people need it cannot be understated. For this reason, the PdN Center is consistently working to maintain a comprehensive and diverse partner interaction within its **El Paso Behavioral Health Consortium**. The Consortium’s three Leadership Councils shown in Figure 4 have existed for almost ten years and include leaders and key stakeholders with influence on priority areas identified by a series of El Paso Behavioral Health System Assessments. Each Leadership Council is led by a Chair and Vice Chair with knowledge and expertise in the identified arena. The Leadership Councils have a priority to engage existing stakeholder work groups, behavioral health champions, and change agents in collaborative projects and organizational policy improvements.

Figure 4. Consortium Leadership Councils



We believe the Consortium’s Family Leadership Council (FLC), with its emphasis on child and youth services, is best positioned to oversee and support the Youth SIM Action Plan Workgroups in the coming years. Three of the FLC’s five work groups, specifically Crisis Care, Specialty Care, and Primary Care, include strategies that complement many of the Youth SIM priorities (Table 1). PdN Center staff will work in the months following the Youth SIM process to reconvene and reimagine the current FLC work groups and establish cohesion where actions can be consolidated to reduce duplication of efforts within the region. The following table provides an overview of the existing work groups aligned with the Youth SIM priorities.

Table 1. Family Leadership Council (FLC) Workgroups Aligned with the Youth SIM

FLC Work Group	Role	Stakeholder Examples	SIM Work Group Consolidation
Primary Care	Expand and enhance integrated and Collaborative Care models for mental healthcare and related support access in the pediatric and primary care settings.	This work group engages with child and youth mental health service providers, primary care practices, healthcare system leaders, and other clinical service practices that may encounter early symptoms of mental health conditions in children and youth.	Community-Based Behavioral Health/SUD Service Capacity and School Integration (SIM Workgroup #5)
Crisis Care	Expand and enhance existing or develop a non-forensic cross agency mobile crisis team model to respond to a range of urgent needs outside the normal delivery of care.	This work group engages with special populations service providers such as child and youth crisis shelters, foster care child placing agencies, human trafficking support systems, Child Protective Services, law enforcement at all levels, psychiatrists, psychologists, and independent counseling practices dealing with complex mental illness or co-occurring mental health and substance use cases. Currently poised to grow in breadth and depth with three recent grants related to community capacity building.	School-Based Crisis Intervention Teams (CIT) and Mental Health Training (SIM Workgroup #3)
Specialty Care	Reframe the concept of mental health and substance use specialty care as secondary to Integrated Primary Care (e.g., 25% of care).	This work group engages with special population service providers such as child and youth crisis shelters, foster care child placing agencies, human trafficking support systems, Child Protective Services, law enforcement at all levels, psychiatrists, psychologists, and independent counseling practices dealing with complex mental illness or co-occurring mental health and substance use cases.	First Offender and Pre-Arrest Diversion Program (SIM Workgroup #2) Discipline Alternatives and Disciplinary Alternative Education Programs (DAEP) (SIM Workgroup #4) Community-Based Behavioral Health/SUD Service Capacity and School Integration (SIM Workgroup #5)

The following is a framework for integrating the Youth SIM action plans into the work of the FLC:

- Based on the continuous work through the FLC, the PdN Center will convene each of the three work groups, inviting partners who were present during each of the Youth SIM action plan work groups. These efforts will contribute to integrating and coordinating of the SIM priorities into the FLC. The priorities from both the existing FLC work groups and

the Youth SIM identified actions will be presented for approval to consolidate or to keep separate groups. Consolidated work group partners will collaborate to maximize resources, work with stakeholders at all levels within the system of care to implement approved strategies, coordinate with funders and technical support advisors, and provide progress updates as needed to the FLC during general meetings.

- The PdN Center staff will seek out existing work groups or partner organizations not already engaged in Consortium efforts related to the Youth SIM identified priorities. For example, as EHN begins planning for implementation of new Youth Crisis Outreach Teams (YCOT), efforts will be made to have representation from the planning group within the Crisis Care Work Group or modify the work group's actions to help achieve the goals of the YCOT project.
- Where necessary, key leaders active with the Consortium's Justice Council and Integration Council projects will be informed or invited to participate in work groups to address the Youth SIM priorities.
- Successes and lessons learned will be shared with the community as part of El Paso Behavioral Health Consortium public general events.
- Any areas identified in need of state or national policy improvement will be presented to a Consortium legislative task force or the PdN Center for technical support recommendations.

The Youth SIM provides updated data and community input that reinforces the importance of work underway across the FLC Continuum. This Youth SIM Report is an asset that will contribute to greater success in addressing barriers to change and keeping vital partners engaged in the ongoing development of an ideal system of care for children and youth.

Appendix

Appendix Table of Contents

APPENDIX	TITLE
Appendix 1	Youth SIM Workshop & Interview Participant List
Appendix 2	Youth SIM Workshop Agenda
Appendix 3	El Paso Juvenile Probation Department Data Presentation
Appendix 4	Links to Select Resources
Appendix 5	First Offender Program for THC Felony Vaping
Appendix 6	School Justice Partnership Model Sample Agenda
Appendix 7	Best Practices at Each Intercept
Appendix 8	Acronyms

Appendix 1: Youth SIM Workshop & Interview Participant List

Name	Agency	Email
Adan Perez	Socorro ISD (SISD)	aperez04@sisd.net
Andrea Rangel	Aliviane	arangel@aliviane.org
Annabell Perez	El Paso County	APerez@epcounty.com
Anthony Morrow	El Paso County Juvenile Probation	amorrow@epcounty.com
Antonio Acuna	Ysleta ISD (YISD)	aacuna@yisd.net
Arthur Valiant	UTEP	avaliant@utep.edu
Ashley Sandoval	Emergence Health Network	asandoval@ehnel Paso.org
Audrey Garcia	Paso del Norte Health Foundation	agarcia@pdnfoundation.org
Britni Yohannes	El Paso County Public Defender	B.Yohannes@epcounty.com
Carmen Olivas Graham	SISD	coliva07@sisd.net
Carolina Gonzalez	Aliviane	cgonzalez@aliviane.org
Cathy Gaytan	El Paso Child Guidance Center	cgaytan@epcgc.org
Celeste Nevarez	Emergence Health Network	cnevarez@ehnel Paso.org
Celina Munoz	YISD	cmunoz3@yisd.net
Edl Felder	El Paso ISD (EPISD)	cafelder@episid.org
Chrystal Davis	Emergence Health Network	cdavis@ehnel Paso.org
Cindy Hernandez	Emergence Health Network	chernandez@ehnel Paso.org
Cristina Villalobos	El Paso Center for Children	cvillalobos@epccinc.org
Cynthia Gonzalez	Aliviane	cgonzalez@aliviane.org
Daniely Gutierrez	ESC Region 19	dgutierrez@esc19.net
David Stout	El Paso County	Commissioner2@epcounty.com
Diana Mooy	YISD	dmooy@yisd.net
Diana Sanchez	Community in Schools	dsanchez@ciselpaso.org
Edna Henderson	Meadows Mental Health Policy Institute	ehenderson@mmhpi.org
Eduardo Holguin	YISD	eholguin30@yisd.net
Eliab Valdez	Boys & Girls Club	evaldez@bgcel Paso.org
Emily Dawson	County Attorney's Office	EDawson@epcounty.com
Emily Hartman	PHIX	ehartman@phixnetwork.org
Emily Stuessy	EPISD	ekstuess@episid.org
Enrique Mata	Meadows Mental Health Policy Institute	emata@mmhpi.org
Iris Escalona	El Paso County Juvenile Probation	IEscalona@epcounty.com
Isabel Carrasco	El Paso County	ICarrasco@epcounty.com
Isidro Torres	NAMI El Paso	itorres@namiep.org
Ivonne Tapia	Aliviane	itapia@aliviane.org
Janell Valles	Workforce Borderplex	janell.valles@borderplexjobs.com
Jazmin Vasquez	Paso del Norte Center of Hope	jazmin@pdncoh.org

Name	Agency	Email
Jessica Morales	Emergence Health Network	jmorales2@ehnel Paso.org
Jessica Thomas	Aliviane	jthomas@aliviane.org
Jillian Longway	Texas Tech University Health Sciences-El Paso	Jillian.Longway@ttuhsc.edu
John E. Adams	EPISD	jeadams@episid.org
Josue Lachica	Meadows Mental Health Policy Institute	jlachica@mmhpi.org
Julie Priego	Aliviane	jpriego@aliviane.org
Katherine Cepeda	West Texas Anti Gang Center	t1980@elpasotexas.gov
Katherine Longoria	Emergence Health Network	Katherine.Longoria@ehnel Paso.org
Kathy Valencia	El Paso Center for Children	kvalencia@epccinc.org
Krista Wingate	Emergence Health Network	kwingate@ehnel Paso.org
Kristin Ortega	Action for Healthy Kids	kortega@actionforhealthykids.org
Kyle Williamson	West Texas Anti Gang Center	t2085@elpasotexas.gov
Layla Fry	Meadows Mental Health Policy Institute	lfry@mmhpi.org
Linda Garcia	El Paso County Juvenile Probation	LinGarcia@epcounty.com
Lorena Maldonado	DFPS	Lorena.Maldonado@dfps.texas.gov
Luis Cenicerros	Aliviane	lcenticerros@aliviane.org
Lupe Anchondo	Community in Schools	ganchondo@ciselpaso.org
Manny Chavira	EPISD Police	mchavir2@episid.org
Marc Marquez	El Paso County Juvenile Probation	mamarquez@epcounty.com
Marivel Macias	EPISD	mnmacias@episid.org
Molly Davis	Texas Judicial Commission on Mental Health	molly.davis@txcourts.gov
Nicole Schiff	Paso del Norte Center of Hope	Nicole@pdncoh.org
Priscilla Cortez	Aliviane	pcortez@aliviane.org
Ramon Hernandez	El Paso County Juvenile Probation	ramhernandez@epcounty.com
Rene Hurtado	Emergence Health Network	rhurtado@EHNELPASO.ORG
Rene Vargas	El Paso County Public Defender	ReVargas@epcounty.com
Rosie Medina	El Paso County Juvenile Probation	RMedina@epcounty.com
Ryan Urrutia	El Paso County Sheriff's Office	RUrrutia@epcounty.com
Sal Leos	El Paso County Juvenile Probation	sleos@epcounty.com
Sandra Day	Paso del Norte Health Foundation	sday@pdnfoundation.org
Sandra Uranga	EPISD	sxmontes@episid.org
Sarah Raschbaum	CASA of El Paso	Sraschbaum@casaofelpaso.org
Terry Ligon	El Paso Co. Associate Judge 65th District Court	MLigon@epcounty.com
Thelma Clark	EPISD	tlaredo@episid.org
Theresa Hentges	SISD	thentg@sisd.net
Tony Tomasheski	Boys & Girls Club	atomasheski@bgcel Paso.org
Tyra Harrison	EPISD	tlharris@episid.org
Veronica Lowenberg	Office of the Governor	Veronica.Lowenberg@gov.texas
Victor Talavera	Emergence Health Network	vstalavera@ehnel Paso.org
Yvonne Sermenon	SISD	yjerme@sisd.net

Appendix 2. Youth SIM Workshop Agenda



El Paso County Juvenile Probation Department

El Paso Youth Sequential Intercept Model (SIM) Mapping & Action Planning Workshop

El Paso Juvenile Probation Department | October 25 – 26, 2023

El Paso JPD Training Room A and B, 6400 Delta Drive El Paso, Texas 79905

Agenda – Day 1 (October 25, 8:30 am – 4:00 pm)

8:30 am	Doors Open: Coffee & Networking	<i>All Participants</i>
9:00 am	Event Begins: Welcome & Introductions	<i>Event Hosts & Sponsors</i>
9:45 am	Overview of the SIM & Local Data <i>Diversion Goals & Target Population</i>	<i>Layla Fry, Meadows Institute</i> <i>Sal Leos, El Paso Juvenile PD</i>
10:20 am	Mapping School Supports, Exclusionary Discipline, & School-Justice Pathways <i>Examine gaps, resources, and opportunities</i>	<i>All Participants</i> <i>Facilitator: Layla Fry</i>
12:00 pm	<i>Break for Lunch On-Site</i>	<i>Lunch Provided</i>
12:30 pm	Mapping Law Enforcement & Initial Justice Intercepts <i>Examine gaps, resources, and opportunities</i>	<i>All Participants</i> <i>Facilitator: Josue Lachica,</i> <i>Paso del Norte Center</i>
2:00 pm	Mapping Community Prevention, Behavioral Health & Crisis Intercepts <i>Examine gaps, resources, and opportunities</i>	<i>All Participants</i> <i>Facilitator: Edna Henderson,</i> <i>Meadows Institute</i>
3:00 pm	Crowd Sourcing Opportunities for Change <i>Voting on Top Priorities</i>	<i>All Participants</i>
3:50 pm	Closing Remarks & Adjourn at 4:00 pm	<i>Juvenile Chief Rosie Medina</i>

Special thanks to Paso del Norte Health Foundation, Texas Judicial Commission on Mental Health, and the Office of Forensic Coordination at the Health and Human Services Commission for their support of this important event.



MEADOWS MENTAL HEALTH POLICY INSTITUTE

T (972) 884-4660

2800 Swiss Avenue, Dallas, Texas 75204

mmhpi.org



El Paso County Juvenile Probation Department

El Paso Youth Sequential Intercept Model (SIM) Mapping & Strategic Planning Workshop

El Paso Juvenile Probation Department | October 25 – 26, 2023

El Paso JPD Training Room A and B, 6400 Delta Drive El Paso, Texas 79905

Agenda – Day 2 (October 26, 8:30 am – 12:00 pm)

8:30 am	Doors Open: Coffee & Networking	<i>All Participants</i>
9:00 am	Event Begins: Welcome & Introductions	<i>Event Hosts & Facilitators</i>
9:30 am	Presentation of Priorities & Moving the Work Forward <i>Select Priority Workgroups</i>	<i>Layla Fry, Meadows Institute Enrique Mata, Paso del Norte Center at Meadows Institute</i>
10:00 am	Workgroup Action Planning <i>Facilitated Group Work</i>	<i>All Participants</i>
11:00 am	Report Out & Gallery Walk <i>Review Action Plans</i>	<i>All Participants</i>
11:45 am	Closing Remarks & Adjourn at 12:00 pm	<i>Juvenile Chief Rosie Medina</i>

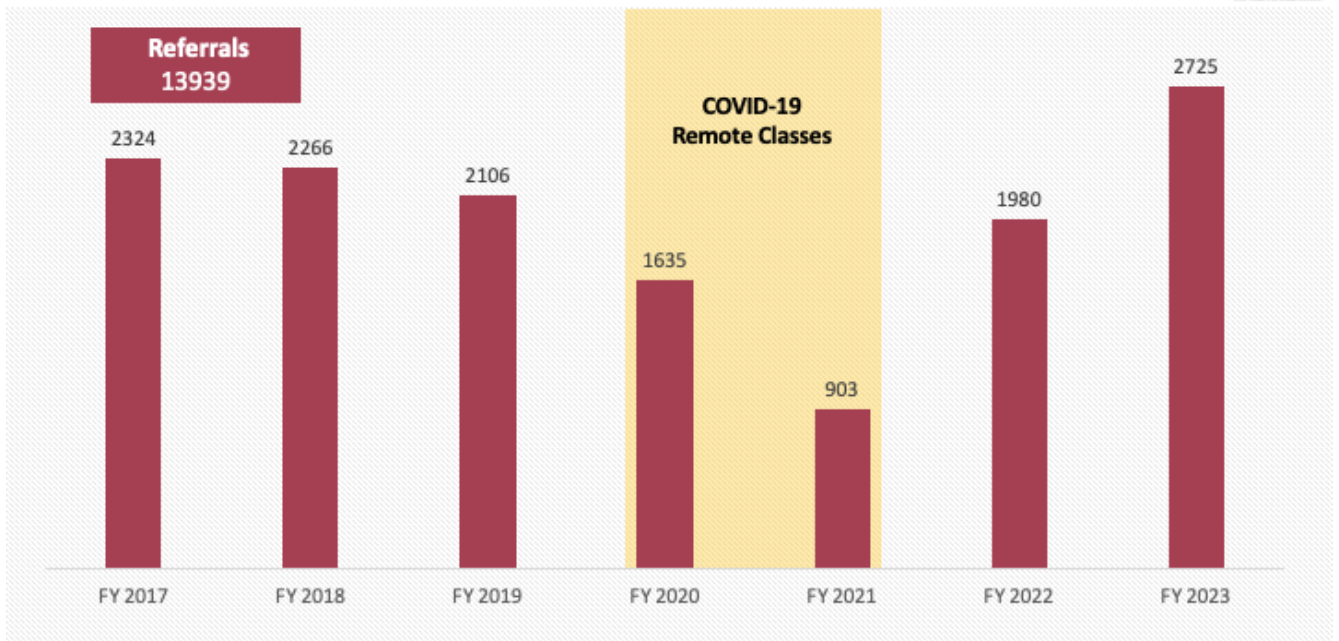
Special thanks to Paso del Norte Health Foundation, Texas Judicial Commission on Mental Health, and the Office of Forensic Coordination at the Health and Human Services Commission for their support of this important event.



Appendix 3. El Paso Juvenile Probation Department Data Presentation

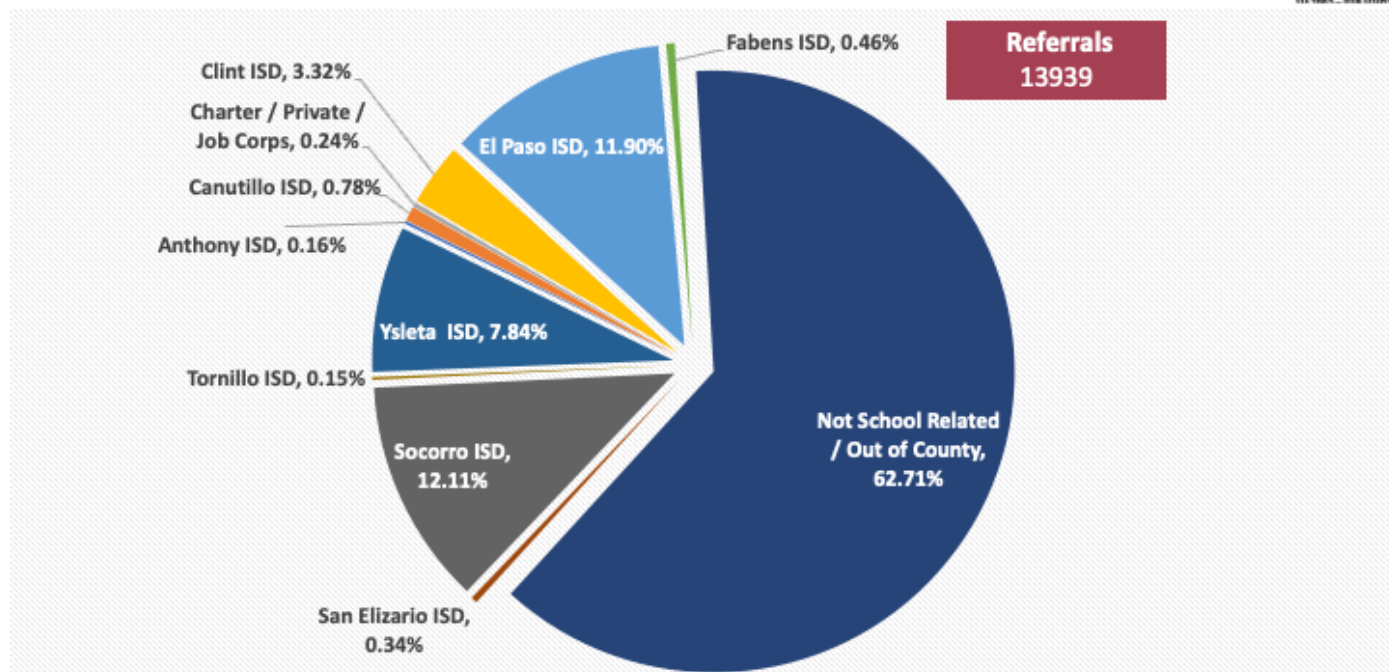


Number of Referrals (FY 2017 - FY 2023)





Referrals by District (FY 2017 – FY 2023)

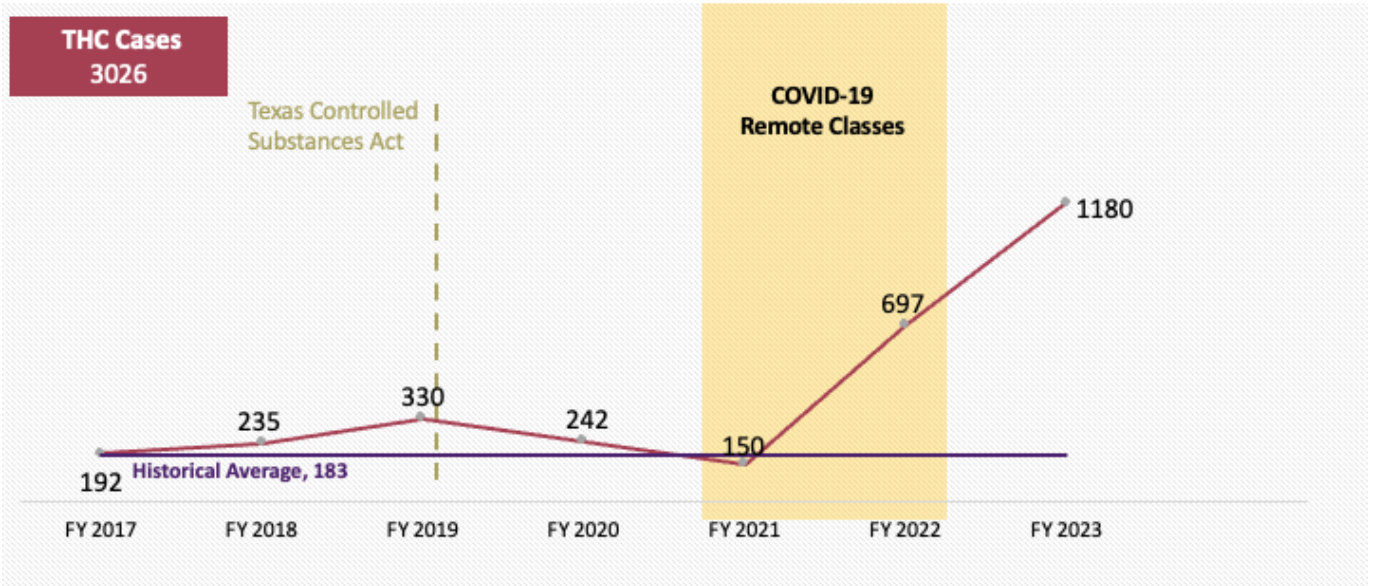


Top 15 School Related Offenses (FY 2017 – FY 2023)

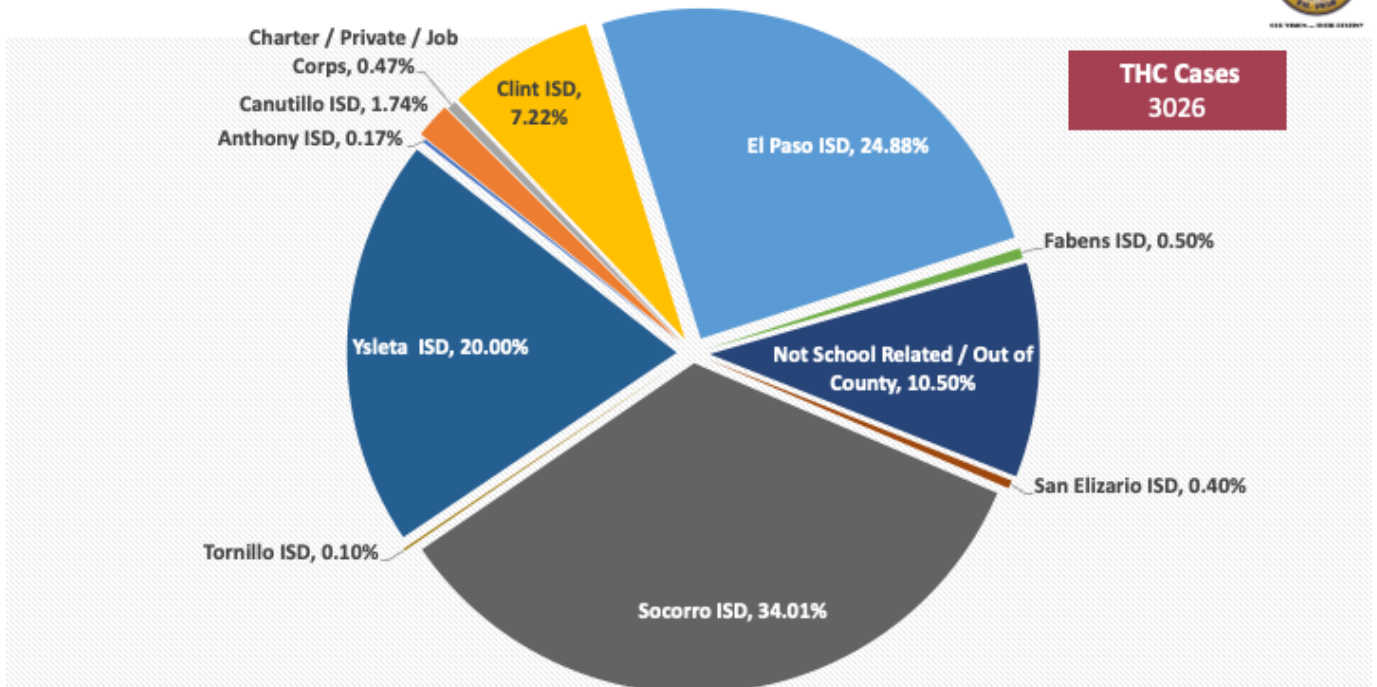


Offense Description	Total Offenses	Percentage
Poss Cs Pg2 <1g Dfz lat	1246	22.98%
Assault Causes Bodily Inj	1118	20.62%
Poss Marj <2oz Dfz lat	686	12.65%
Poss Cs Pg 2 < 1g	454	8.37%
Poss Marij <2oz	171	3.15%
Poss Cs Pg 2 >= 1g<4g	124	2.29%
Burglary Of Building	115	2.12%
Criminal Mischief >=\$100<\$750	109	2.01%
Criminal Trespass	86	1.59%
False Alarm Or Report	69	1.27%
Poss Cs Pg 2 >= 4g<400g	63	1.16%
Poss Dangerous Drug	62	1.14%
THEFT PROP >=\$100<\$750	61	1.13%
Agg Assault W/Deadly Weapon	60	1.11%
Assault Public Servant	55	1.01%
TOTAL	4479	82.61%

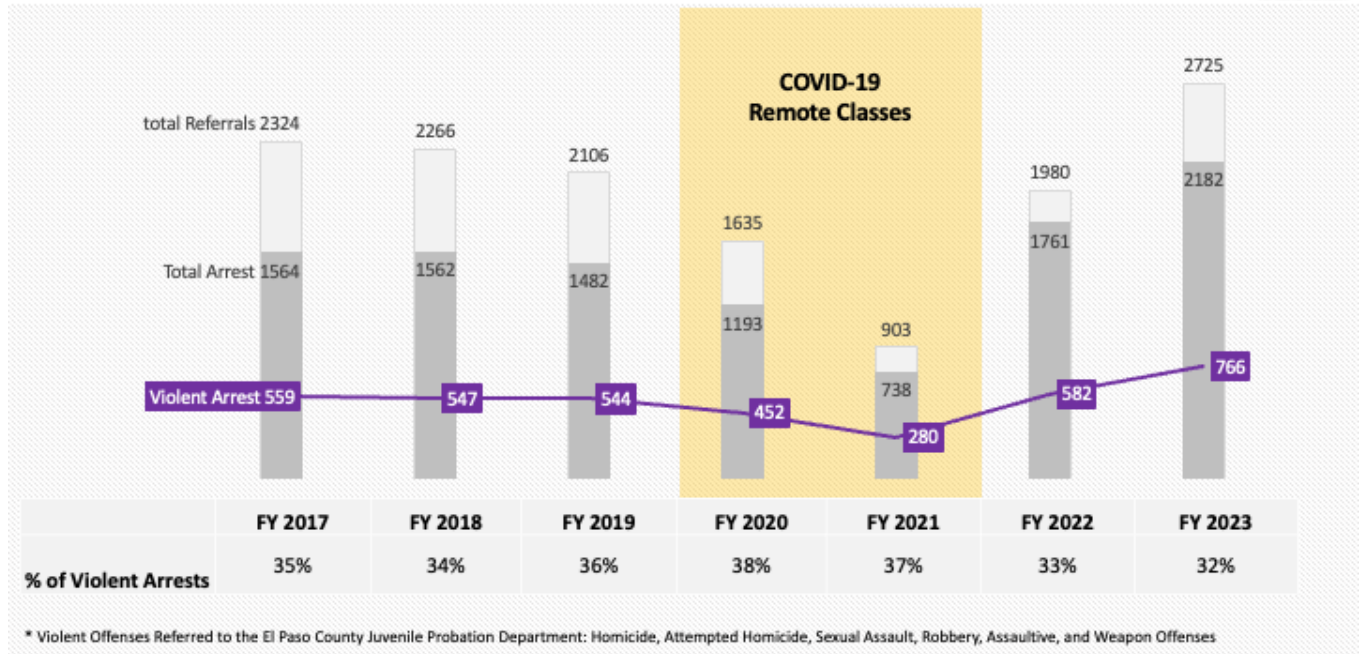
The **historical average** (between FY 2016 – FY 2018) of THC cases before the changes to the **Texas Controlled Substances Act** was **183 cases per year**. In FY 2023, there were **1180 THC cases**, a **644% increase** compared to the historical average. Between FY 2017 – FY 2023, **89%** of THC cases were school-related.



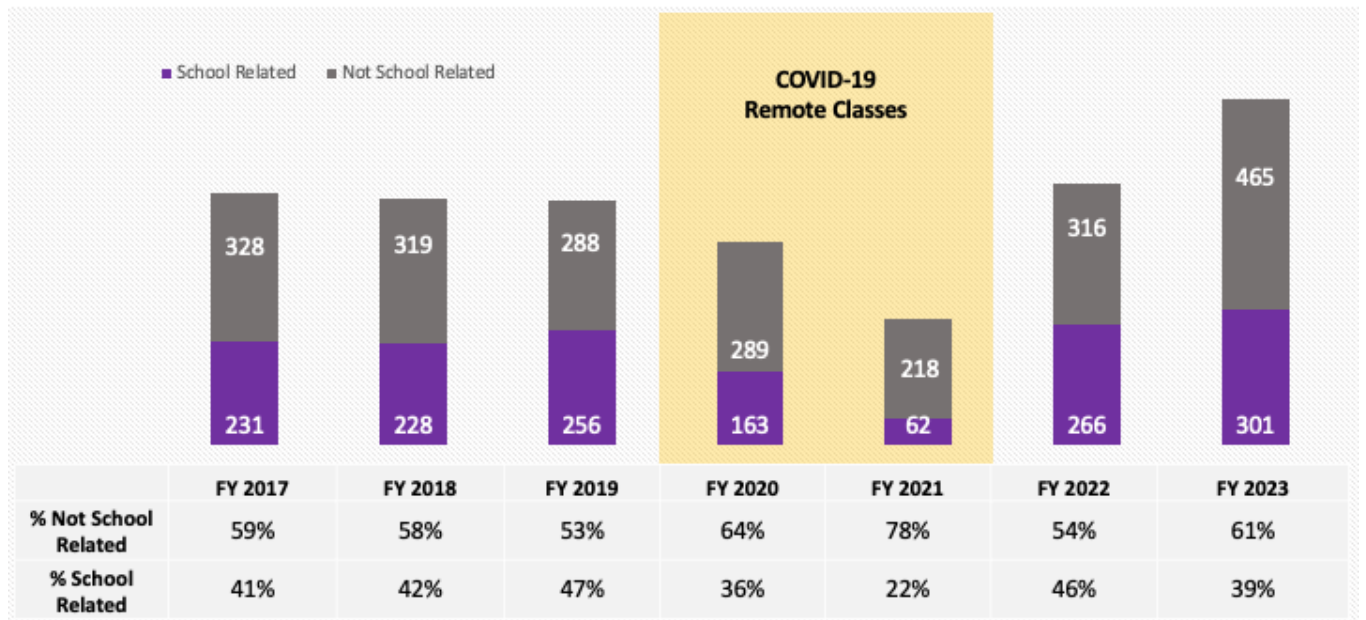
THC Cases by District (FY 2017 – FY 2023)



From FY 2017 to FY 2023, on average, **35%** of arrests were **violent arrests**.

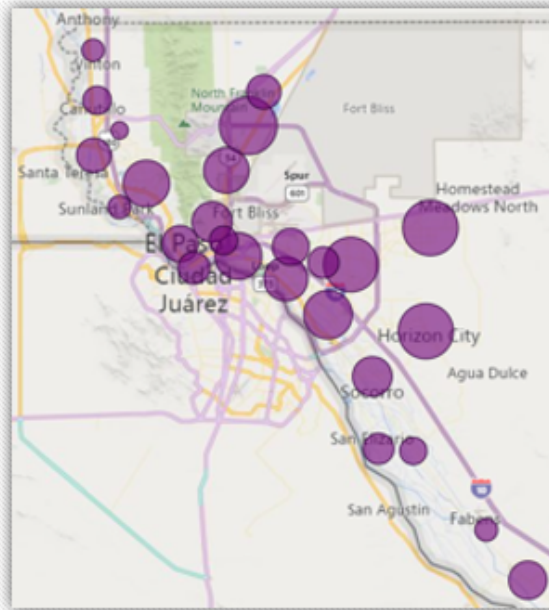


From FY 2017 to FY 2023, on average, **39%** of violent arrests were **school related**.



Violent Offenses* (FY 2017 - FY 2023)

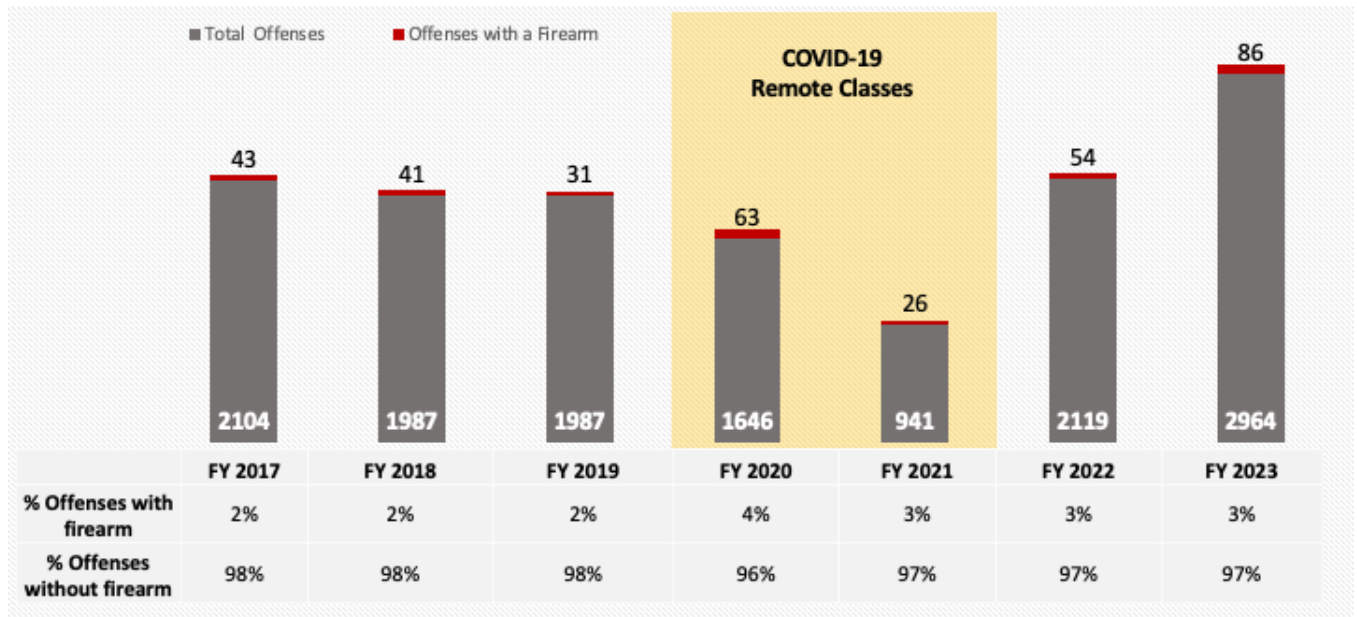
County Area	Offenses
NORTHEAST	794
CENTRAL	657
EASTSIDE	599
LOWER VALLEY	505
FAR EAST	424
EASTSIDE/HORIZON	414
WESTSIDE	388
LOWER VALLEY/SOCORRO	154
LOWER VALLEY/TORNILLO	134
LOWER VALLEY/SAN	
ELIZARIO	64
WESTSIDE/CANUTILLO	46
OUT OF COUNTY	41
LOWER VALLEY/CLINT	41
LOWER VALLEY/FABENS	22
WESTSIDE/ANTHONY	20
TOTAL	4303



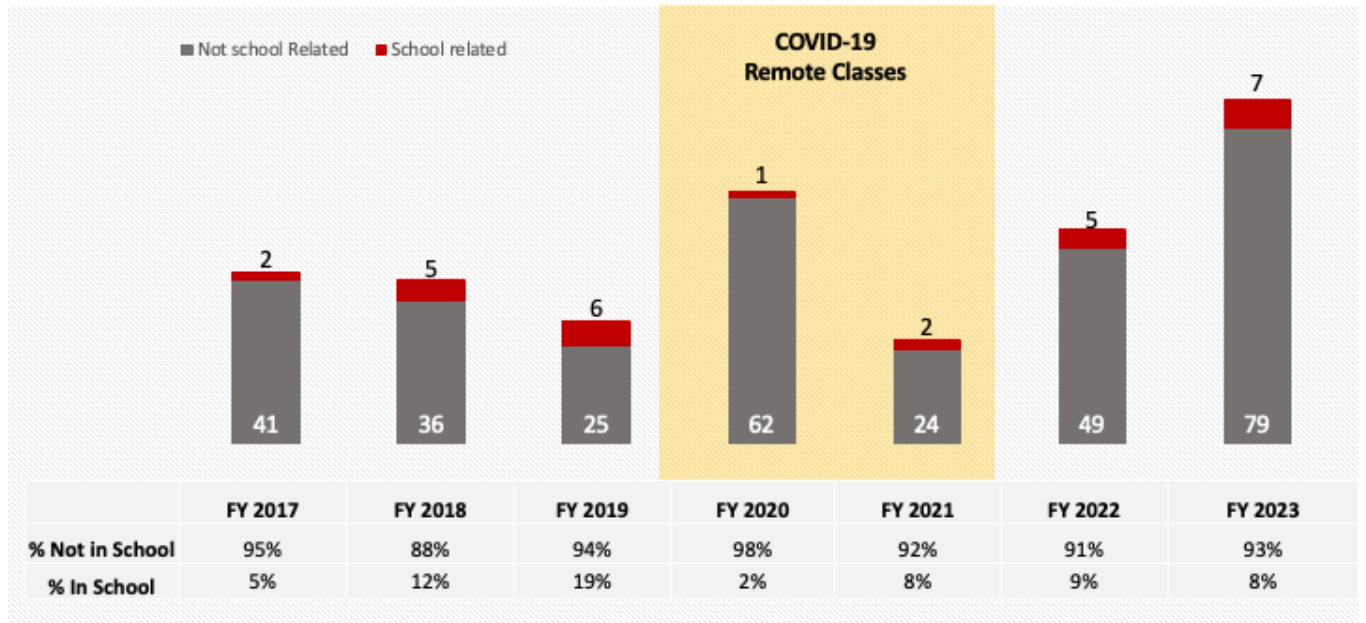
Zip Code	Offenses
79924	465
79938	424
79928	414
79936	410
79907	285
79905	258
79912	255
79904	235
79915	220
79930	161
79927	154
79853	134
79925	120
79902	115
79932	97
79934	94
79901	75
79935	68
79849	64
79903	48
79835	46
79836	41
79838	22
79922	22
79821	20
79911	14

*Zip code where the violent offenses were committed.

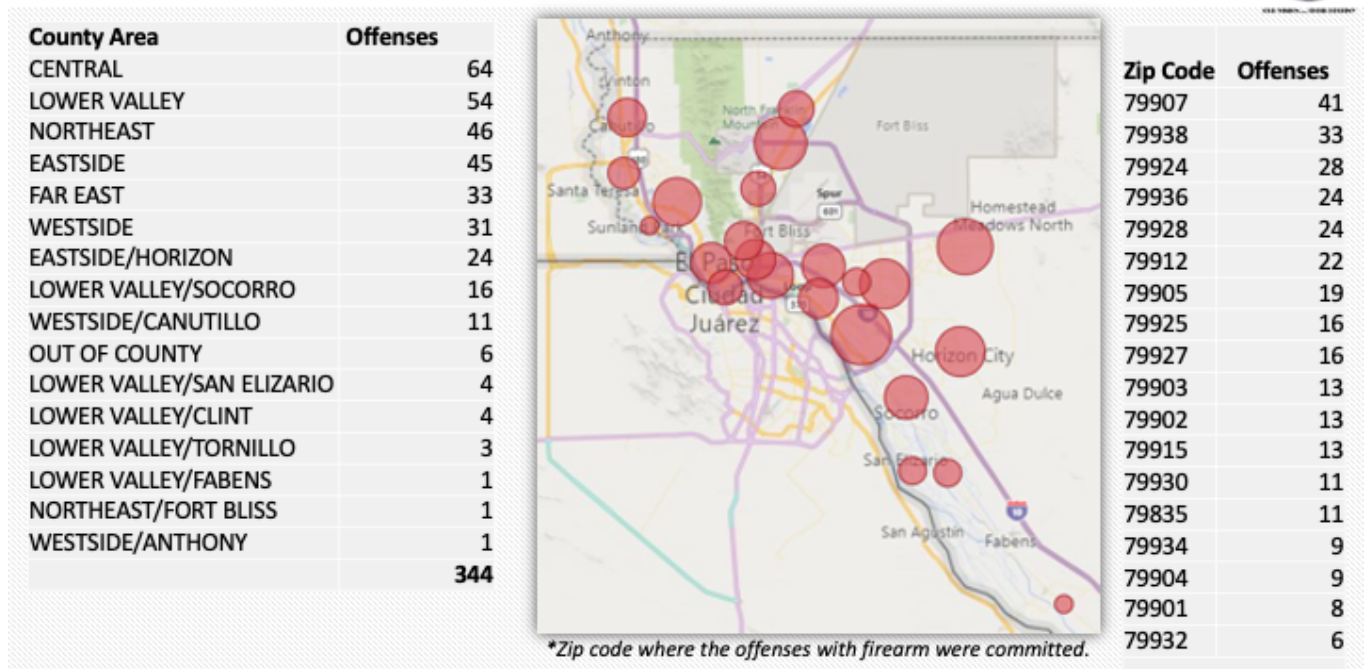
From FY 2017 to FY 2023, on average, **firearm offenses** constituted **3%** of the total reported offenses.



From FY 2017 to FY 2023, on average **7% of firearm offenses** took place in schools.



Offenses with Firearm* (FY 2017 – FY 2023)



Appendix 4. Links to Select Resources

SIM Event Resource Repository at <https://bit.ly/ElPasoYouthSIM>, which includes:

- SIM Event PowerPoints: Day 1, Day 2
- Juvenile Probation Department Data Summary Slides
- Event Agenda
- Event Participant List
- Vaping Presentation: School District Roundtable Event
- School District Discipline Data Snapshots

Facilitator, Sponsor, and Partner Organization Websites:

- [El Paso Juvenile Probation Department](#)
- [Meadows Mental Health Policy Institute](#)
- [Paso del Norte Foundation at the Meadows Institute](#)
- [Paso del Norte Health Foundation](#)
- [Texas Judicial Commission on Mental Health](#)
- [Office of Forensic Coordination \(OFC\), Texas Health & Human Services Commission](#)

Select Resources Referenced in the Report:

- [El Paso Behavioral Health Assessment Final Report 2021](#), Meadows Institute
- [HHSC Best Practice Guide along the Youth SIM](#)
- [Texas Behavioral Health and Justice Technical Assistance Center](#)
- [TEA District of Innovation \(DOI\) Links to All District DOI Plans](#)
- [Williamson County School Vaping Guidebook](#)
- [Legal Guidance Document About CBD and Marijuana in Schools](#), Texas Association of School Boards 2023
- [Texas Juvenile Mental Health and Intellectual and Developmental Disabilities Law Bench Book](#) (3rd Ed. 2023-2025), Judicial Commission on Mental Health,
- [Policy Research Associates, The Sequential Intercept Model: Next Steps](#) (How To Maximize Your Sim Mapping Workshop), <https://www.prainc.com/im/>
- [Mental and Behavioral Health Roadmap and Toolkit for Schools](#), Meadows Institute

Appendix 5. First Offender Program for THC Felony Vaping

Establishing a Law Enforcement-Led First Offender Program (FOP) for THC Felony Vaping Cases in Schools

Introduction

This document details the process for establishment of a school-based First Offender Program (FOP) to address first-time felony-level THC vaping cases and other eligible offenses involving students. The goal is to provide an alternative approach to handling these cases that focuses on rehabilitation and education rather than immediate punitive measures. While there may be differing interpretations of the law, a law enforcement-led FOP in schools is a viable and beneficial solution.

Legal Framework

- FOP Statute (Texas Family Code § 52.031):** The Texas Family Code allows a juvenile board to establish a First Offender Program for conduct indicating a need for supervision (CINS), Class C misdemeanors (non-traffic), and delinquent conduct, excluding certain felony categories.
- Per the statute, eligibility for FOP excludes:**
 - first, second, and third-degree felonies,
 - aggravated controlled substance felonies,
 - capital felonies, and
 - state jail felonies and misdemeanors involving violence to a person or the use or possession of a firearm, location-restricted knife, club, or prohibited weapon.
- Interpretation of THC Vape Offenses:**
 - THC vaping cases typically involve the possession of THC cartridges, which may weigh 1 gram or less.
 - While some may argue that such cases qualify as third-degree felonies due to drug-free zone provisions, it is essential to clarify that **the statute does not inherently increase the offense level.** Instead, it increases the punishment if proven at trial that the offense was committed in a drug-free zone.

Reasoning for Eligibility

- State Jail Felony Classification:** THC vaping cases, when weighing 1 gram or less, are typically categorized as state jail felonies. This classification **makes them eligible** for an FOP as they fall outside the categories expressly excluded by the statute.
- Education and Rehabilitation Focus:** An FOP for THC vaping cases aligns with the program's intended purpose of providing rehabilitation and education to juveniles, allowing them to avoid the traditional criminal justice system.

Benefits of the FOP

- Early Intervention:** The FOP offers an opportunity for early intervention and diversion, reducing the long-term consequences of felony-level offenses for youth.
- Rehabilitation and Education:** Students involved in THC vaping cases can benefit from counseling, education, and support services to address underlying issues related to substance use.
- Reduced Court Involvement:** By participating in the FOP, students can avoid formal court proceedings, potentially minimizing disruptions to their education and future prospects.

Operational Structure

The FOP would be administered in partnership with law enforcement, school officials, and relevant stakeholders, ensuring that it is tailored to the unique needs of school-based cases.

Program Components

The FOP would encompass components such as periodic reporting to the law enforcement officer or agency, voluntary restitution, voluntary community service restitution, and educational training, vocational training, counseling, or other rehabilitative services, as outlined in Texas Family Code Section 52.031(h).

Record Keeping and Confidentiality

Strict confidentiality and record-keeping practices as required by Chapter 58, Family Code, which contains additional record-keeping requirements related to first offender programs, would be maintained.

Exemption from Juvenile Court Referral

Children referred to the FOP would not be referred to the juvenile court, emphasizing the diversionary nature of the program and its intent to provide an alternative to the traditional criminal justice system (Texas Family Code Section 58.001(c)).

Completion Criteria and Future Eligibility

Successful program completion criteria would be established, with an emphasis that if a child successfully completes the program and avoids new offenses for the next 90 days, the law enforcement agency would destroy all records linking the child to the offense, except for basic identifying information necessary for future eligibility determinations (Texas Family Code Section 52.031(i)).

Conclusion

In light of the legal framework and the classification of THC vaping cases as state jail felonies, we propose the establishment of a school-based law enforcement-led First Offender Program for these cases. Such a program would align with the intended purpose of FOPs and provide an effective means of addressing first-time felony THC vaping cases among students.

Contact

Further discussion and collaboration with law enforcement agencies is necessary to ensure the successful implementation of this program for the benefit of school communities and the students involved.

For more information about establishing a First Offender Program in your school district or jurisdiction, contact **Matt Smith** at Williamson County Juvenile Services at msmith@wilco.org.

For more information on the legal framework or FOP eligibility, contact **Kaci Singer**, Deputy General Counsel, Office of the General Counsel, Texas Juvenile Justice Department at Kaci.Singer@tjjd.texas.gov.

Appendix 6. School Justice Partnership Model Sample Agenda

School-Justice Partnership Technical Assistance Sample Agenda

Day One (9:00-4:00)

Welcome & Introductions: The conveners and/or leaders welcome the stakeholder group, provide instructions, and set expectations for the meeting.

Vision & Strategy: Judge Teske and the team will share the Clayton County experience and lay the foundation, describing the pre-agreement situation leading to stakeholder action and the influence of JDAI in this process. Judge Teske will provide a theoretical framework for our approach, reviewing the research that supports the who, what, how, and why. Luvenia Jackson will provide the educational rationale in support of this approach and share her experience of implementing the SJP. Captain Marc Richards will describe the Positive Student Engagement Model of School Policing that resulted from his leadership in implementing the SJP. The stakeholder participants will begin to develop their purpose and message using the Message Matrix tool during this and the following session.

Focus Acts: Judge Teske and the team will lead the stakeholders in an exercise to identify the offenses that will constitute the focus of the school-justice agreement.

Role Conflict Avoidance: The stakeholders will engage in a discussion on proper law enforcement activities on campus with the purpose of delineating the role of educators and law enforcement officers regarding the violation of school rules and the process of handling delinquent acts when they occur on campus. This discussion is essential to identifying the requisite terms for the school-justice agreement.

Day Two (9:00-4:00)

Graduated Response Model: The stakeholders will discuss the Graduated Response model for school- justice partnerships and will consider examples developed by other jurisdictions.

Identifying Graduated Responses: The stakeholders will divide into smaller groups to work on identifying programs, processes, and other means to serve as alternatives to arrest or formal court referrals.

Developing Alternatives: The break-out groups will reconvene, and the stakeholders will begin to develop their response matrix using the Graduated Response Decision Tree tool.

School-Justice Governance: Judge Teske will walk the stakeholders through the process of designing and incorporating a school-justice partnership. This session will result in identifying who is included in the partnership. This session will result in identifying who is included in the partnership, how decisions will be made, the creation of a common agenda, and the identification of a name for the partnership.

School-Justice Agreement Development: Using the School-Justice Agreement Decision Tree tool, Judge Teske and the team will guide the stakeholders in the development of their school-justice partnership governance document Action Plan.

Next Steps & Wrap-Up: The stakeholders will identify the next steps in their Action Plan, including the scheduling of their next meeting.

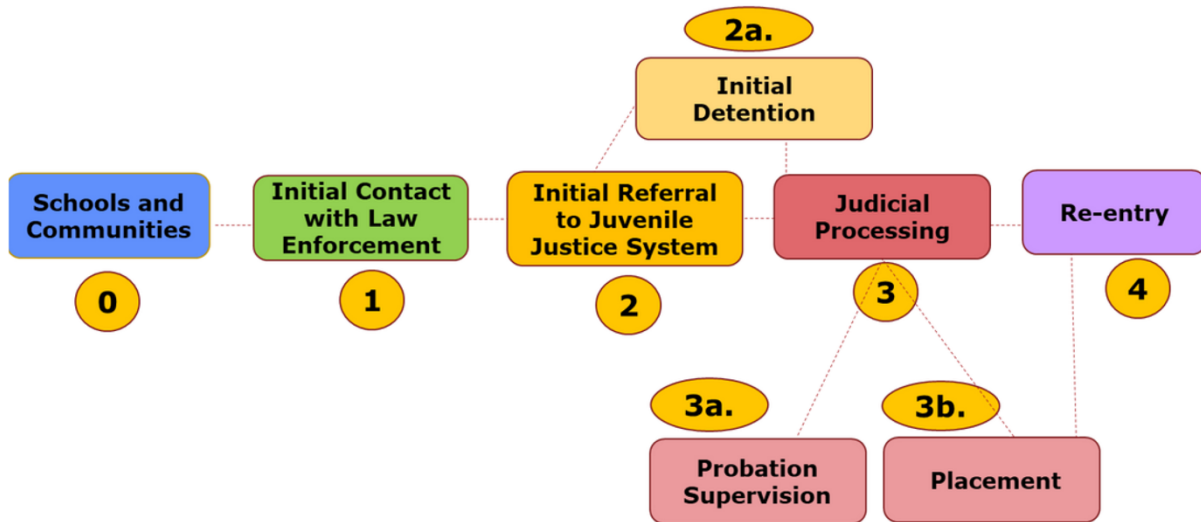
For more information, please contact Colin Slay at cslay@ccscga.org.



Appendix 7. Best Practices at Intercepts 0-1



TEXAS YOUTH SEQUENTIAL INTERCEPT MODEL MAPPING BEST PRACTICES



Best Practices Across Intercepts

The following cornerstones were adopted to guide all best practice recommendations seen in this document:

- **Collaboration:** In order to appropriately and effectively provide services to youth with behavioral health conditions the juvenile justice and behavioral health systems should collaborate in all areas, and at all intercept points
- **Identification:** The behavioral health needs of youth should be systematically identified at all critical stages of juvenile justice processing.
- **Diversion:** Whenever possible, youth with identified behavioral health needs should be diverted into effective community-based treatment.
- **Treatment:** Youth with behavioral health conditions in the juvenile justice system should have access to effective treatment to meet their needs.



INTERCEPT 0: SCHOOLS AND COMMUNITY BASED SERVICES BEST PRACTICES



EARLY IDENTIFICATION AND PREVENTION

- Universal school-based needs and risk assessments
- Mental health screenings by primary care providers
- Information sharing agreements across behavioral health and justice stakeholders
- Regular meetings/staffings of Community Resource Coordination Groups and Children's Advocacy Centers

SCHOOL-BASED DIVERSION AND BEHAVIORAL HEALTH SUPPORTS

- Multi-tiered Systems of Support (MTSS)
- Onsite school mental health providers, case management, wraparound services and family engagement specialists
- Treatment referral pathways (i.e. Texas Child Health Access Through Telemedicine, TCHAT, and Child Psychiatric Access Network (CPAN))
- Alternatives to exclusionary discipline
- Regular evaluation of school discipline policies (i.e. review code of conduct)
- Juvenile Justice Alternative Education Programs (JJAEP)/ Disciplinary Alternative Education Program (DAEP) transition planning and continuity of care

SOMEONE TO CALL

- Crisis hotlines (988 Suicide and Crisis Lifeline)
- Child and family helplines
- Mentorship programs

SOMEONE TO RESPOND

- Youth Mobile Crisis Outreach Teams (Youth Crisis Outreach Teams, or Mobile Response and Stabilization Services)
- Certified Family Partners
- Wraparound case management (i.e. YES Waiver)

A PLACE TO GO

- Children's Crisis Respite Units
- Trauma-informed Residential Treatment Centers (RTCs)
- Intensive Outpatient Programs (IOPs) and Partial Hospitalization Programs for children (PHPs)
- Youth Assessment Centers
- Substance use disorder treatment centers (detox, inpatient, outpatient)

INTERCEPT 0: BEST PRACTICE HIGHLIGHTS

Best Practice	Description
Early Identification and Prevention	
Universal school-based risk and needs assessments	Use validated screening tools used for youth flagged with behavioral needs. See Mental Health Screening Tools for Grades K-12
Mental health screenings by primary care providers	Standardize the use of depression and anxiety screening for youth ages 8-18 during pediatric wellness visits. See Pediatric Symptom Checklist-17 or the Strengths and Difficulties questionnaire
Information sharing agreements	Establish Memorandums of Understanding (MOUs) between school mental health professionals and the LMHA/LBHAs to support continuity of care for youth with identified behavioral health needs.
School-based Diversion and Behavioral Health Supports	
<u>Multi-Tiered Systems of Support (MTSS)</u>	<p>MTSS is a comprehensive three-tiered system of support to provide both universal and tailored mental health support to school-aged youth.</p> <ul style="list-style-type: none"> • Universal mental health promotion and training • Targeted mental health intervention • Intensive mental health intervention
Alternatives to Exclusionary Discipline	Regularly review district discipline policies and consider the use of restorative justice practices, diversion programming and family support to reduce expulsions. Remove code of conduct language reflecting zero tolerance policies. See the School Crime and Discipline Handbook for guidance.
Onsite school behavioral health providers	Establish partnerships between LMHAs/LBHAs and school-based mental health providers to provide a system of support to youth and their families.
Crisis Continuum: Someone to Call, Someone to Respond, a Place to Go	
Crisis Hotlines	24/7 call, text and chat lines for people experiencing a behavioral health crisis. Operators provide screening, intervention and referrals to community resources.
Crisis Outreach Teams	Qualified mental health professionals providing community-based crisis assessment, intervention and continuity of care. Youth MCOT providers coordinate with schools, law enforcement, hospitals and detention facilities to provide care.
Children's Crisis Respite Units	Short-term residential crisis services for youth with low risk of harm to self or others. Provide 24-hour observation in a home-like environment to provide youth a "break" from existing environmental stressors.

INTERCEPT 1: LAW ENFORCEMENT & EMERGENCY HEALTH SERVICES BEST PRACTICES



LAW ENFORCEMENT MENTAL HEALTH TRAINING

- Mental Health Deputies with specialized youth training
- Crisis Intervention Team Training: CIT for Youth
- Youth Mental Health First Aid (MHFA) training for law enforcement
- Behavioral health specific trainings on adolescent brain development, trauma informed practices, crisis intervention and de-escalation and adverse childhood experiences

POLICE DIVERSION PROGRAMS

- Regular referral to behavioral health treatment and providers
- Warning notices for youth engaging in disruptive behaviors
- Informal law enforcement dispositions without referral to juvenile court (internal conditions set)
- First Offender Programs (Tex. Fam. Code Sec. 52.031)
- Collaboration with parents and guardians to select conditions of release

LAW ENFORCEMENT AND MENTAL HEALTH PROVIDER COLLABORATION

- Law enforcement behavioral health co-responder teams
- Resource sharing between behavioral health providers and law enforcement
- Dispatch and police coding of calls involving children experiencing a mental health related crisis
- Role clarification and protocol evaluation on school-based law enforcement response to disruptive behaviors
- Data and information sharing between law enforcement, school districts and behavioral health providers (e.g. MOUs)

INTERCEPT 1: BEST PRACTICE HIGHLIGHTS

Best Practice	Description
Law Enforcement Mental Health Training	
Crisis Intervention Team Training: <u>CIT for Youth</u>	<p>CIT for Youth provides training to law enforcement officers to help prevent mental health crises and to help de-escalate crises when they occur.</p> <p>Involves collaboration between law enforcement, families and youth, schools, community mental health providers and child-serving agencies committed to ensuring that youth in a mental health crisis are identified and referred to appropriate mental health services.</p>
Tailored behavioral health trainings for law enforcement	<p>Youth MHFA: Teaches guardians, teachers, school administrators, peers, law enforcement, community behavioral health providers, and juvenile justice stakeholders how to identify and respond to an adolescent who is experiencing a behavioral health crisis.</p> <p>Trust Based Relational Therapy: An attachment-based, trauma-informed intervention that is designed to meet the complex needs of vulnerable children.</p> <p>For additional specialized behavioral health trainings on adolescent brain development, Adverse Childhood Experiences, and de-escalation strategies explore the <u>Neurosequential Model of Therapeutics</u>.</p>
Police Diversion Programs	
Regular referral to behavioral health treatment and providers	<p>Law enforcement departments can establish a referral process after or during crisis episodes to coordinate care with behavioral health providers who otherwise may not be aware of mental health related emergency incidents.</p>
First Offender Programs	<p>Involves voluntary rehabilitation services designated by a law enforcement agency or the juvenile board prior to the filing of a criminal charge against a child accused of conduct indicating a need for supervision or a Class C misdemeanor. (Tex. Fam. Code Sec. 52.031)</p>
Law Enforcement and Mental Health Provider Collaboration	
Co-responder Teams	<p>Paired teams of specially trained officers and mental health clinicians that respond to mental health calls for service. Trained in specialized youth interventions.</p>
Role clarification and protocol evaluation on school-based law enforcement response	<p>Involves school resource officers or school-based law enforcement establishing protocol that guide decisions related to behavioral interventions in the classroom. School administrators, teachers and school behavioral health staff should all be educated on appropriate use of law enforcement intervention in schools and explore alternatives to law enforcement response when appropriate.</p>

Appendix 8. Acronyms

Acronym	Meaning/ Definition
CIS	Communities in Schools
CIT	Crisis Intervention Teams
CPAN	Child Psychiatry Access Network
CPS	Child Protective Services
DAEP	Disciplinary Alternative Education Program
DFPS	Department of Family and Protective Services
DOI	District of Innovation
EHN	Emergence Health Network
EPISD	El Paso Independent School District
ESC	Education Service Center
EPJPD	El Paso Juvenile Probation Department
FLC	Family Leadership Council
FOP	First Offender Program
HHSC	Texas Health and Human Services Commission
IDD	Intellectual and Developmental Disabilities
ISD	Independent School District
ISS	In-School Suspension
JCMH	Texas Judicial Commission on Mental Health
JJAEP	Juvenile Justice Alternative Education Program
JPD	Juvenile Probation Department
LEA	Law Enforcement Agency
MCOT	Mobile Crisis Outreach Team
MH	Mental Health
MHRS	Mental Health Rehabilitative Services
MMHPI	Meadows Mental Health Policy Institute

Acronym	Meaning/ Definition
MOU	Memorandum of Understanding
MST	Multisystemic Therapy
MTSS	Multi-Tiered System of Supports
NAMI El Paso	National Alliance on Mental Illness El Paso
PCIT	Parent-Child Interaction Therapy
PD	Police Department
PdN Center	Paso del Norte Center
PdNHF	Paso del Norte Health Foundation
PHIX	Paso del Norte Health Information Exchange
RISE Program	Rapid Integrated Support and Engagement Program
SAMHSA	Substance Abuse and Mental Health Services Administration
SEL	Social-Emotional Learning
SIM	Sequential Intercept Model
SISD	Socorro Independent School District
SRO	School Resource Officer
SUD	Substance Use Disorder
TCHATT	Texas Child Health Access Through Telemedicine
TCM	Targeted Case Management
TEA	Texas Education Agency
TJJD	Texas Juvenile Justice Department
TTUHSC	Texas Tech University Health Sciences Center
UTEP	University of Texas El Paso
YISD	Ysleta Independent School District
YCOT	Youth Crisis Outreach Team
YCR	Youth Crisis Respite
YISD	Ysleta Independent School District