Community Resource Coordination Groups (CRCGs) of Texas
Handbook

This handbook provides information for and about Community Resource Coordination Groups serving children and youth, adults, and families in Texas.

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State CRCG Office

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Community Resource Coordination Groups

Community Resource Coordination Groups (known as CR CGs) are interagency groups comprised of local partners and community members. CR CGs develop individual services plans to help children, youth, families and adults whose needs can only be met through services from multiple agencies and programs. The CR CGs bring those agencies and programs together to develop Individual Service Plans (ISP) and make sure care is coordinated. Throughout this guidebook, the acronym CR CG is utilized to refer to any community resource coordination group regardless of the age of the people it serves.

CR CGs are county-based and may cover one or more counties. CR CGs may primarily serve the needs of children and youth or adults. The CR CG’s members determine the focus of each group. Some areas of the state developed a CR CG model that blends the “CR CG for Children and Youth” (CR CGY) with a “CR CG for Adults” (CR CGA) to create a combined “CR CG for All Ages” serving people of all ages. Young adults between 18 and 22 years old may be helped either through a CR CG serving children and youth or a CR CG serving adults, as long as both children and adult providers from public and private agencies work together to develop an ISP that meets the identified needs.

CR CG coverage is inconsistent across the state. Some counties have robust CR CGs that meet regularly, while other CR CGs meet infrequently and staff few cases. As of November 2016, there were 141 distinct CR CGs covering 235 counties and a total of 59 child and youth-serving CR CGs (CR CGY), 6 adult-serving CR CGs (CR CGA), and 76 CR CGs serving all ages in Texas.

CR CG Accomplishments

CR CGs improve the coordination of and access to community-based services for children, youth, families, and adults through collaboration among public and private agencies and organizations, community members, and family representatives. CR CGs coordinate services for children, youth, families and adults whose needs have not been met through existing resources and channels. CR CGs meet on a monthly, quarterly or as-needed basis as determined by the CR CG.

The public and private partnerships of CR CGs benefit the local community by identifying service gaps and barriers and by working to find non-traditional solutions. CR CGs help stretch existing resources, and are often successful in identifying new resources and funding to address gaps and barriers.
Definitions

All CRCGs:
- Are local interagency groups serving a single county or a group of counties
- Are composed of state agencies or their local affiliates that have signed the CRCG Memorandum of Understanding, public and private agencies, and individuals, family members, or caregivers with lived experience who understands the CRCG process
- Have an inclusive focus; anyone with needs that can be best addressed through multiagency collaboration can be referred

A CRCG for Children and Youth (CRCGY):
- Develops ISPs for children and youth from birth to 22 years old whose needs can be met only through interagency coordination and cooperation
- Coordinates services designed to support the least restrictive environment
- Collaborates with the CRCG serving adults in the community (if applicable)
- May consider needs of adult members of a family and siblings as part of an overall family-focused service plan in planning services for a referred child or youth, at the discretion of the group

A CRCG for All Ages:
- Develops ISPs with people of all ages whose needs can be met only through interagency coordination and cooperation
- Coordinates services designed to support the least restrictive environment
- May choose to have subcommittees that meet to focus more exclusively on adults or children and youth, at the discretion of the group

A CRCG for Adults (CRCGA):
- Develops ISPs with adults 18 or older whose needs can be met only through interagency coordination and cooperation
- May also consider needs of children or youth members of a family as part of an overall service plan for a referred adult, at the discretion of the group
- Collaborates with the CRCG serving children and youth (if applicable)

"CRCGs are effective and efficient and are the very best way to meet the needs of Texas citizens with multiple challenges."
- County Private Provider
CRCGs originated with legislation passed in 1987 directing state agencies serving children to develop a community-based approach to provide better coordination of services for children and youth with complex multi-agency needs.

In the late 1990s, interest emerged to adapt the CRCG model to serve adults with complex multiagency needs. Following a pilot project in 1999 and 2000, CRCGs for Adults began to develop. Some communities have chosen to serve adults through a CRCG by expanding their CRCG for Children and Youth to serve people of all ages – Others have chosen to develop a separate group to serve adults (CRCGA).

**Timeline of CRCG Development in Texas**

**1987** The Texas Legislature enacted Senate Bill 298, requiring eight child-serving public agencies\(^1\) to work together to help children and youth who were falling through the cracks in the service system. These eight agencies, along with the Texas Commission on Alcohol and Drug Abuse, private sector organizations, and advocates, developed the Community Resource Coordination Group model.

**1988** The Community Resource Coordination Group model established interagency service planning at the local level and was piloted in Henderson, Tarrant, Travis, and Val Verde counties in 1988 and 1989.

**1990** The State developed training materials and retained a consultant retained to help counties throughout Texas establish CRCGs to help children and youth with complex needs find programs in their communities.

**1991** The State CRCG Team was established to oversee the development of the CRCG process, including the implementation of the interagency Memorandum of Understanding (MOU).

**1993** The State CRCG office provides ongoing technical assistance and training for CRCGs as a permanent office at the Health and Human Services Commission.

**1995** Counties began approaching the State CRCG office for help adapting the CRCG model to adult populations. Unlike the CRCGs for Children and Youth, most of the early CRCG initiatives for adults focused on specific populations such as people with Alzheimer’s disease or guardianship.

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\(^1\) Texas Youth Commission, Texas Juvenile Probation Commission, Texas Education Agency, and Legacy Agencies: Texas Department of Protective and Regulatory Services, Texas Department of Mental Health and Mental Retardation, Texas Department of Health, Texas Rehabilitation Commission, and the Texas Commission for the Blind
issues, co-occurring mental illness and substance abuse, or people being released from state jails. Other local CRCGs for Adults were developed with an inclusive focus to serve a broader group of adults with complex needs, regardless of diagnosis or presenting issue.

1996 A local CRCG is available to all 254 counties in Texas to serve children and youth.

1998 A study examined the emergence of CRCGs for Adults to determine the appropriate direction and strategies for the State CRCG office. Results indicated strong support for developing CRCGs for Adults, especially a CRCG model with an inclusive focus.

1999 The University of Texas – School of Social Work conducted an evaluation of the CRCGs for Children and Youth. The evaluation determined CRCGs were meeting the objectives of the Memorandum of Understanding.

The State CRCGA Team was established, and adopted a CRCGA Model and Guiding Principles.

2000 The CRCG Program executed a Memorandum of Understanding for adult serving CRCGs in May. The State CRCGA Team commissioned an evaluation study of the pilot program, the pilot program concluded in November 2000, and a statewide CRCGA development initiative was implemented.

2001 The Texas Legislature enacted Senate Bill 1468, codified in Texas Government Code §531.055, requiring the development of a joint memorandum of understanding (MOU) on services for people needing multiagency services. Jointly developed by the State CRCG Team and the State CRCGA Team, this memorandum of understanding provides for a statewide system of county-based, interagency community resource coordination groups to coordinate services for persons of all ages, including children, youth and adults who have complex needs and need services from more than one agency.

2003 The Texas Legislature enacted House Bill 2292, containing Section 2.166 that required child-serving CRCGs to evaluate systems of care for children with severe emotional disturbances who have multiagency needs. The Texas Integrated Funding Initiative (TIFI) Consortium used the evaluations to create a summary of the CRCG evaluation due no later than 2005.
2004 The State CRCG office created an internal data collection system to gather and analyze information submitted by CRCGs serving all age groups. The State CRCG and TIFI Offices merged with additional programs at HHSC under the Office of Program Coordination for Children and Youth.

2005 TIFI submits recommendations in its Report to the Governor and 79th Legislature: Systems of Care for Children with Severe Emotional Disturbances and Their Families, based upon the evaluations submitted by local CRCGs, per House Bill 2292, Section 2.166, 78th Legislature, Regular Session, 2003.

2006 As a result of H.B. 2292, updates were made to the MOU to reflect changes in agency names and needs as well as to reflect the abolishment of the State CRCG Team and State CRCGA Team. The State CRCG office continued to operate.

2011 Due to budget reductions from the 82nd Legislative Session, state level CRCG support activities were reduced and transferred from the Office of Program Coordination for Children and Youth to the Office of Family and Community Services within HHSC.

2014 Health and Human Services hired a CRCG Statewide Coordinator who guided the State CRCG office to provide statewide support in the areas of communication, training and technical assistance, data and research.

2015 The 84th Texas Legislature updated the Texas Government Code §531.055, that formalized the CRCG program, required a joint MOU between health and human services agencies, related state agencies, and state-level partners to reflect recent changes in agency names.

2016 There are approximately 140 distinct CRCG groups covering 236 Texas counties.

2017 House Bill 2904, 85th Texas Legislature, Regular Session, updated the Texas Government Code §531.055 to include the Texas Education Agency as a member agency in the joint memorandum of understanding. Additional updates to the Texas Government Code §531.055 require the State CRCG Workgroup to provide information and guidance to local CRCGs about the availability of programs and resources in the community, and about best practices for addressing the needs of persons with multiagency service needs in the least restrictive setting appropriate. The State CRCG Office is transferred to the Office of...
Mental Health Coordination (OMHC) within HHSC because the State CRCG Office's mission aligns with OMHC's.

Additionally, the 85th Texas Legislature established a mechanism to allow the Texas Juvenile Justice Department to refer children under 12 years old to CRCGs for service coordination as an alternative to adjudication. For children and youth who have experience in the foster care system or with adoption, the 85th Texas Legislature established a provision for Department of Family and Protective Services staff to inform their local CRCGs about the tuition and fee waiver program for which these children and youth are eligible.
Overview of CRCG Model and Guiding Principles

Community Resource Coordination Groups are locally designed, developed, and managed. To ensure basic standards and consistency, State and local stakeholders developed the following Model and Guiding Principles:

- Each CRCG should include representatives of the state agencies who have signed the Memorandum of Understanding or their local affiliates, representatives of private agencies, and at least one family representative (individual, family member, or caregiver with experience of the process). All CRCG members should have the authority to commit services or resources for individuals and families referred to the CRCG.

- The role of a CRCG is to develop a coordinated strengths-based Individual Service Plan (ISP), which is an agreement for coordination of services developed in partnership with the individual or family.

- Services should be provided in the most home-like, nurturing setting and the least restrictive environment possible. The ISP will identify provisions for services within the community where possible and within the least restrictive environment outside the community where necessary.

- The involvement of the individual or family is essential to the success of the development and implementation of the ISP.

- People referred are those who have encountered barriers to having their needs met successfully through existing resources and whose needs can be met only through interagency cooperation. Before referring someone, the referring agency will have explored services and resources within and outside the agency.

- Agencies are expected to provide the maximum flexibility possible, within existing eligibility criteria and funding policy, to commit services and resources for people referred to the CRCG.

- The agency with primary responsibility for providing services identified on the ISP is the entity determined by the CRCG to be the lead for overseeing the plan and follow-up.

- Each CRCG member is responsible for ensuring confidentiality for referred individuals and families. Members who represent an agency or organization should follow their agency’s or organization’s policies for confidentiality.

- When placement outside the community is necessary, the ISP will include a plan for reintegration of the individual into the community and, as appropriate, into the family.
Developing a New CRCG or Reactivating a CRCG

People come together as a Community Resource Coordination Group for many reasons. They are committed individuals and representatives of agencies who work to improve the quality of life for the citizens of their community. People within the community are aware of the strengths of their community and have also identified gaps or barriers that are significant challenges for children, youth, families and adults seeking services and support.

The Initial Organizational Meeting

The following steps provide procedures to help ensure the creation, revival and/or maintenance of an effective CRCG.

Identify Partners and Representatives

First, identify key people, agencies or organizations providing human services and supports in your community; include state agencies, local state agency affiliates, private non-profit organizations and faith-based organizations. Texas Government Code §531.055 requires state agencies or their local offices or affiliates to participate and engage with the CRCG. The agencies covered include:

- Texas Health and Human Services Commission (HHSC)
- Texas Department of Family and Protective Services (DFPS)
- Texas Department of State Health Services (DSHS)

“Don’t agonize. Organize.”
- Florynce Kennedy
Texas Department of Housing and Community Affairs (TDHCA)
Texas Department of Criminal Justice (TDCJ) - Texas Correctional Office on Offenders with Medical or Mental Impairments (TCOOMMI)
Texas Juvenile Justice Department (TJJD)
Texas Education Agency (TEA)
Texas Workforce Commission (TWC)

State law also requires the participation of:

- A family representative, someone who has received services, either as a client, a family member, or a caregiver, and who understands the process. At least one person with lived experience (individual, family member, or caregiver who understands the CRCG process).
- Representatives of local private sector organizations or agencies that can contribute services to an Individual Service Plan, such as:
  - Community and faith-based organizations
  - Non-profit organizations
  - Local counseling and other mental health providers
  - Hospitals or other healthcare providers
  - Housing providers

Usually one or two people or a small group will assume the responsibility of bringing together key players in their community.

**Strategies for Success**

- Identify a date, central location, and a comfortable and accessible meeting site.
- Contact the state CRCG office at HHSC to request various levels of technical help, including:
  - New CRCG Checklist and Guides
  - Brochures, fact sheets, and one pagers
  - current CRCG coverage/contact information
  - Available data
  - Referral and ISP forms
- Develop an invitation letter. A sample letter is available in the appendix. You might want to use the sample as a model and include additional information about the challenges in your own community that are prompting the development (or redevelopment) of a CRCG.
• Develop an agenda, including:
  o What are CRCGs?
  o Who are the players?
  o How did the CRCG develop in a nearby county?
  o What is the CRCG process and what will it look like in our county?
    ▪ Case scenarios
    ▪ Leadership Team
    ▪ Regular meetings

• Follow the letter of invitation with a personal contact.

• Consider “piggy-backing” the meeting with another meeting already scheduled that includes many of the individuals you have invited to participate.

Questions to Consider in Defining a CRCG

When the group is considering their CRCG, use some of the following questions to set guidelines and expectations.

• What age group will be served? (For example: will it serve children and youth between birth and 22 years old? Will adults 18 and older be served? Will people of all ages be served?)

• How will the CRCG receive referrals?

• Will the CRCG cover one or more counties? Will monthly meetings stay in one place or rotate from county to county in a multiple county service area?

• Do natural boundaries exist? (Consider agency service regions, travel distances, concentrations of specific non-English speaking populations, defined areas such as colonias, etc.)

• How will individuals, families and caregivers be engaged in discussions and decisions?

• Do natural partnerships exist? (See if one county or city contains the services and the connecting county is rural and dependent upon travel to the neighboring county for services, or a two-three county area that traditionally shares multiple services and activities.)

• Do case managers serve multiple age groups in the proposed service area? If so, this may affect the age group served by the CRCG.

"CRCG works! I felt that way and still to this day I feel a closeness to the CRCG, because they cared!" - Parent of a child served by a CRCG
- Is the population of a county changing dramatically? (Consider economic shifts such as major employers either coming to or exiting an area, an influx of retired persons, etc.)
- Who else needs to be a part of the CRCG?
- What are the next steps for developing the CRCG in our area?

For more information on how to develop or re-activate a CRCG, review the New CRCG Checklist in Appendix B-1.
CRCG Structure

Mission

A mission statement sums up the CRCG’s reason for being. It explains intentions, priorities, and values to those inside and outside the group. It is a brief statement that will guide and help the CRCG stay focused on the things that are most important.

A mission statement is created by answering the following questions:

- What does the CRCG do?
- Who does the CRCG serve and what do they get out of it?
- What do we want the CRCG to accomplish?
- How does the CRCG serve its clients?
- What do we want to get out of the CRCG for ourselves?
- What values, standards, or goals drive the work of this CRCG?

Ways to utilize your mission statement:

- Display the mission statement at each CRCG meeting.
- Read the mission statement at the beginning of each CRCG meeting to focus the team.
- Include the mission statement in the minutes of each CRCG meeting.
- Publish the mission statement in the CRCG brochure (if applicable).
- Use it on CRCG stationery (if applicable).
- Include the mission statement on the local CRCG website (if applicable).
- Refer to the mission statement in a newspaper or newsletter article.

Once developed, the mission statement should be periodically reviewed by the CRCG. Over time, experience and the new member input may cause the need to revise the mission of the CRCG.

Bylaws or Policies and Procedures

Bylaws are policies and procedures developed by the CRCG to establish basic organizational components of the group. They may be detailed and comprehensive or simple as determined by the CRCG.

"If you don’t know where you’re going, it doesn’t matter which way you go."  
- The Cheshire Cat in Lewis Carroll's “Alice in Wonderland”
Basic elements in bylaws:

- Name
- Location
- Meeting information
  - Meeting frequency and duration
  - Identified facilitator
  - Identified minute and data recorder and reporter
  - Decision making method (examples: consensus, modified consensus, majority vote)
- Membership Information
  - Attendance expectations and requirements
  - Filling vacancies
  - Addition of new members
- Organizational Structure
  - Officers
    - Titles (examples: chair, co-chair, secretary)
    - Responsibilities (examples: Review referrals, facilitate staffings, record minutes)
    - Terms
    - Selection
  - Description of committees (if applicable)
  - Referral process
  - Emergency staffing protocol
- Orientation of new members
- Review and modification of bylaws

**Ground Rules**

Ground rules are simple, basic rules that the group has agreed to operate by. These rules reflect statements about individual behaviors that are encouraged to make the meeting effective for all participants. Ground rules can be copied on large easel paper and displayed at each meeting to remind members of these basic rules they have agreed to.

"CRCGs promote local decision making."
- State CRCG Stakeholder
Examples of Ground Rules:

- Meetings will start and end on time.
- Avoid personal attacks and the use of labels.
- Avoid sidebar conversations.
- Encourage everyone to participate.
- Monitor your own “air-time.”
- Don’t interrupt.
- Stay on subject, stick to the agenda.
- Silence cell phones or pagers.
- Be respectful of all attendees, especially person(s) being served.
- Use non-judgmental language.
- Avoid acronyms.

**Leadership**

Leadership may be shared by a leadership team. The leadership team shares responsibilities among several individuals, limiting the burden on any one person. For additional information, see the [New Chair Guide](#) available on the CRCG Website.

A leadership team is typically made up of a Chair, Co-Chair, a Recorder or Secretary, and a Coordinator. Each CRCG determines its leader and documents it in the bylaws. Some CRCGs schedule annual elections and elect their leader(s) at a specific monthly meeting. Others rotate the chair position among agency members each year as a way of sharing responsibility among agencies. For some CRCGs, the co-chair is the "next in line" and assumes the role of chair the following year. Some CRCGs maintain the same person as chair for as long as they are willing to fulfill that role.

**Trust in Relationships**
Roles/Responsibilities

Chair – responsibilities may include:

- Overall responsibility managing the CRCG
- Facilitate CRCG meetings
- Member of any or all CRCG working subcommittees
- Spokesperson for public awareness
- Serves as a referral point of contact
- Liaison to the state CRCG office

Co-chair – responsibilities may include:

- Facilitate meetings when the Chair is absent
- Assumes roles as delegated by the Chair, agreed upon by the Leadership Team, or assigned by the CRCG as a whole
- Records meeting minutes (if there is no Recorder or Secretary)

Recorder or Secretary – responsibilities may include:

- Keep record of the meeting minutes
- Maintain an accurate up-to-date membership roster
- Maintain client data and complete CRCG data collection forms
- Distribute meeting notices
- Send timely reminders to lead agencies responsible for follow-up reports at upcoming meeting

Coordinator:

As CRCGs grow and evolve and the volume of CRCG referrals increases, many CRCGs benefit from having a coordinator. A coordinator is a dedicated staff position to assist the CRCG. The coordinator serves as staff to the CRCG, rather than as a member. The coordinator may assume many of the tasks completed by the chair or others in the leadership team, including:

- Screen referrals
- Meeting preparation and minutes
- Public awareness presentations
- Data collection and reports
- Lead point of contact for follow-up on an ISP when there is not a clear lead
The heart of the CRCG lies the active participation of its members. CRCG members commit their agency’s services and resources and are the essential implementers of the ISP. Members make referrals, carry out the ISP, and are responsible for the organization and structure of the CRCG itself. The state CRCG office developed a New Member Guide, available on the CRCG website, to provide a clear and concise orientation to members.

Texas state statute requires the participation of:

- Standing members representing people who have received CRCG services caregivers or family members or individuals needing multi-agency services or caregivers of persons needing multi-agency services (other than those being actively served at the CRCG meeting).

- Representatives of local private sector organizations or agencies that can contribute services to an ISP, such as:
  - Housing provider
  - Local counseling and other health providers
  - Salvation Army
  - United Way
  - Hospitals or other health care providers
  - Other local private sector organizations

It is vitally important members have both the knowledge and the authority to commit the agency’s services and resources at the CRCG meeting. Many of the people referred to the CRCG have had negative experiences with suggested resources. They are often in crisis and cannot wait for a decision on whether a service or resource can be provided. The CRCG’s effectiveness to coordinate and integrate services is compromised if members are cannot commit services or resources integral to the ISP.

**Memorandum of Understanding**

As directed by Senate Bill 1468, 77th Legislature, Regular Session, 2001, and updated in House Bill 2904, 85th Legislature, Regular Session, 2017, a joint memorandum of understanding was developed to create a statewide system of community resource coordination groups for all ages (children, youth, adults, and families). The state-level MOU formalizes the commitment of participating state agencies. Local CRCGs may utilize the state-level MOU as a model to develop a local agreement and include state agency local affiliates and private entities.
Recipients of CRCG Services/Caregiver/Family Members

Recipients of CRCG services, caregivers or families members are required standing members of local CRCGs. These members enhance cultural competency, offer lived experience and serve as allies to these recipients. The key characteristic of a recipient of CRCG services, caregiver, or family representative is the personal experience navigating the system of services for themselves or a family member.

"I think the role of the families/consumers/ caregivers on the CRCG teams is to remind all the helping agency members of the very real trials and tribulations of finding and/or orchestrating services from multiple agencies."
- Parent/Consumer CRCG Representative

These representatives enhance the cultural competency of the group by encouraging standard language and limited use of acronyms. They may be able to offer a "reality test" to proposed service ideas. They may also provide an empathetic presence and sense of identification for the individual or family member seeking assistance from the CRCG.

Public Sector Members

Public sector members are the state agencies who have signed the memorandum of understanding, local offices of MOU signatory agencies, and local city and county agencies. Local affiliates may be private sector organizations that are contracted by state agencies to deliver services, such as the local drug and alcohol counseling centers.

The MOU agencies and affiliates are core members of the CRCGs. The primary intent of the CRCGs is to meet the needs of individuals and families who are falling through the cracks in the state service delivery system.

Municipal or county agencies also play a vital role in CRCGs. Local agencies may have services or resources not available through state agencies, and eligibility criteria may be more flexible.

Private Sector Members

Private sector members are not-for-profit or for-profit service providers who can commit services or resources. Private sector members include local ministerial alliances, private hospitals, charitable organizations and local United Ways.
**Attendance and Involvement**

It is important for every CRCG member to recognize the value of the collaborative working relationship, and be invested in the belief that the CRCG can accomplish more by working together than by each agency operating independently. Consistent attendance demonstrates commitment of the agency to the CRCG process and to providing integrated quality services to the members of the community. There are several factors that increase the likelihood CRCG members find their participation beneficial and useful.

CRCG members are more likely to attend regularly and to actively participate when:

- Each meeting includes the development of an ISP for referred individuals or families, rather than a meeting that consists solely of education, sharing, and networking
- They refer individuals or families (especially from their agency or organization’s target population) with the result that challenging situations are resolved and previously unmet needs are addressed
- They learn about services, programs or resources in their community at each CRCG meeting and use these to assist their clients
- They share information about their agency’s services, programs, or resources with other CRCG members, thereby enhancing public awareness referrals to their agency
- The CRCG addresses systems gaps or barriers within their community
- Relationships are built that continue outside the CRCG
- Attendance and active involvement is recognized as valuable and is supported by their agency’s administration

**Effective CRCG Members**

As a CRCG member, the more you contribute to the strength, capacity, and effectiveness of your CRCG, the greater the value it will be to your community, your agency, and to you. The following list recommends ten things you can do to increase your effectiveness as a CRCG member.

1. Educate yourself about your CRCG
2. Attend CRCG meetings consistently
3. Get to know other CRCG members
4. Take on a leadership role
5. Be an empathetic listener
6. Contribute ideas to the ISPs
7. Commit your agency’s resources as appropriate to the ISP
8. Refer individuals from your agency/organization to the CRCG
9. Educate others in your agency/organization about the CRCG and its value to your agency and its consumers
10. Build your cultural competency
**Strategies for Success**

- Identify and recruit at least one parent or family member of a child or adolescent with special needs, or a recipient of CRCG services as a standing representative to the CRCG. Recipients of CRCG services, caregivers and family member representatives bring a critically important perspective of someone who has (or is) struggling to find and orchestrate services and supports from multiple agencies.

- Identify missing parties who play an important role in the service and support system for individuals with complex needs:
  - Consult local community resource directories such as 2-1-1 Texas Information and Referral Network
  - Conduct an informal brainstorming session with members
  - Consult area United Ways

- Develop a letter from the CRCG chair(s) inviting others to become CRCG members, including:
  - Information about the role and purpose of the CRCG
  - How the agency’s participation will play an important role for children, youth and/or adults who have complex needs
  - Potential benefits to participating for the entity

- Send a letter to each identified agency or community provider whose participation is missing from the CRCG. Identify a CRCG member who will contact them to follow-up. Share responsibility for follow up with each individual/entity.

- Provide new member orientation prior to the first meeting. Members will start with an informed and prepared. The [New Member Guide](#) on the CRCG website orients new members.

- Recognize and welcome new members at each CRCG meeting, stating why their participation will play an important role.

- Contact attendees when they have been absent.

- If efforts to recruit CRCG participation are not resulting in success, consider asking for assistance from the state CRCG office for assistance.
Referrals

Individuals and families are connected to a CRCG through a referral. The referral may be submitted by any party, including a CRCG member agency, a community-based entity or a family or individual. The primary purpose of the CRCG is to develop ISPs for people with complex needs who experience barriers or require coordination among multiple agencies to address their needs.

Most referrals are addressed during regular meetings. However, some referrals require immediate attention. CRCGs may develop a plan to come together on an emergency basis to address needs that cannot wait.

Release of Information

CRCGs must comply with applicable state and federal confidentiality laws, as well as individual agency policies. Each agency representative is responsible for knowing their agency’s confidentiality procedures. If representatives have questions about the appropriate procedure, forms, or protocol for securing releases, it is important they seek direction from within their own agency.

The CRCG may develop meeting procedures to remind the members that confidential information will be discussed. Standing members that are recipients of CRCG services family, and/or caregiver representatives should be provided an orientation and training on confidentiality procedures relating to the CRCG process.

The Referral Process

Each CRCG develops its own referral criteria and procedures. Most CRCGs require the referred party have needs that cannot be met by one agency and that the referring entity have explored and exhausted all available known resources. Prior to referral, the referring entity must take the required steps to address confidentiality and have written permission to share information with the CRCG.

Age is often another referral criteria. Some CRCGs serve children and youth 22 years of age and younger, while some groups focus on adults 18 and older. Still others have a more inclusive focus, serving children, youth, families, and adults of any age.

Referral procedures may include:

- Complete a referral form
- Send referral form to the CRCG chair or coordinator prior to the meeting
- Review of the referral form to ensure applicability
- Distribute referral information prior to the staffing
It is important for the CRCG Chair and/or Coordinator to have referral information available prior to the CRCG meeting. The Chair may identify and reach out to agencies critical to providing resources for the particular referral.

The state CRCG office developed the Referral Eligibility Chart to assist with determining the appropriateness of referrals.

**Factors Contributing to Steady Referrals**

Most CRCGs receive an average of one or two referrals per month. A few CRCGs receive between 50 to 100, or more, referrals per year. CRCGs note certain positive factors contribute to a steady referrals, including the following items.

**Relationships/Trust**

* Good working relationships among agencies and consistent follow-through with service plans
* Positive outcomes through the CRCG process are self-reinforcing for participants

**Leadership**

* A few agencies consistently make referrals to the CRCG
* A few outstanding members provide leadership and sustain the group’s energy
* A strong coordinator that ensures an effective working process

**Community/Public Awareness**

* Consistent communication with referring agencies
* An understanding of the purpose and goals of the CRCG throughout the community
* Information about the CRCG is shared with the public through community events such as health fairs

**Creativity/Flexibility**

* Members demonstrate a willingness to be creative to develop and access resources

**Meetings**

* Meetings occur on a regular basis and members are provided with meeting reminders, notifications, and minutes

**Attendance**

* Consistent attendance by a cohesive core group
**Low Referrals**

Referrals may be sporadic at times. A number of factors contribute to fewer referrals, both positive factors and significant challenges. For example, positive networking experiences outside of the CRCG have resulted in the ability to serve families and individuals more comprehensively without needing to utilize the CRCG. Additionally, agency staff may now have a great deal of experience and are aware of and utilize all available resources.

While the factors above are successes of the CRCG process, other factors represent challenges to be addressed. Many CRCGs indicate one or more of the following as factors related to fewer referrals:

- Representatives from mandated agencies do not attend the CRCG meetings
- Representatives from mandated agencies are not making referrals
- Limited public awareness of the CRCG and its work
- Limited knowledge among agencies and in the community regarding how to make a referral
- A lack of confidence that needed services are available or that CRCG members will be able or willing to offer services to meet the needs of a family or individual
- There are concerns that making a referral indicates a lack of knowledge or experience or willingness to serve a family or individual
- The CRCG meets too infrequently to be able to develop a service plan quickly enough to be of benefit for a family or individual with immediate needs

A comprehensive survey noted that the three most frequent challenging factors related to fewer CRCG referrals were lack of attendance by some mandated agency representatives, limited public awareness, and lack of agency referrals.

Fewer referrals may result in decreased member attendance, which limits the effectiveness of the CRCG to develop comprehensive service plans. As a result, the CRCG may begin to meet less frequently. The community’s awareness of the CRCG and its work may be lessened. These factors may result in further fewer referrals. While a CRCG may continue to meet, it is not operating optimally, if it is not actively developing service plans for referred families and individuals.

**Strategies to Increase Referrals**

Many CRCGs have identified strategies to ensure continuous referrals or to increase the number of referrals received. These strategies include the following:

- Add referrals to the CRCG meeting agenda. Ask for suggestions from members.
- Plan a schedule for the year with one or two agencies charged to make referrals each month. Each agency obtains consent and provides the referral information to the CRCG chair or coordinator before the meeting. There will still be room for
additional referrals, but it ensures individuals will be served each month and
shares the responsibility among various agencies.

- Move the meeting location around the county (or counties) to more equitably
share the burden of travel.
- Have different agencies host the CRCG meeting as a way of sharing
responsibility. Each host agency may also provide a brief overview of their
services and resources available to meet the need of individuals with complex
needs.

Marketing Campaign/Public Awareness

Many CRCGs note that marketing and public awareness strategies benefit their
community. Examples of these activities are listed below.

- Strategic Planning
  - Integrated community planning strategy to develop a community plan
  - Annual retreat to update goals and renew CRCG
  - Annual luncheon.
- Coordination/Funding
  - Seek funding for paid coordinator
  - Location of coordinator in a hub with multiple child-serving agencies make
the program more visible and accessible
  - Availability of flexible funds
- Training
  - Provide training, contact the state CRCG office for more information on
available training
  - Presentations for community groups
  - Exhibits/presentations at Educational Service Center symposium, school
transition fairs, agency/health fairs
  - Train new employees at Juvenile Court
  - Provide training for police and fire department and judges
  - Outreach to school counselors and principals
  - Piggy-back CRCG presentation/workshop with other agency conferences
  - Connect with a coordinator or chair of a more successful CRCG
  - Provide agency presentations at CRCG meetings to increase understanding of
services and networking outside meeting
  - Develop speakers list
• Organization and membership
  o Consistent meeting time and place
  o Increase non-mandated providers
  o Invite area ministers
  o Formalize referral/staffing process to simplify and encourage professionals to use CRCG
  o Form subcommittees and workgroups to encourage participation in some aspect of CRCG
  o Organize outreach committee that contacts absent agencies
  o Try to have a case as a backup in the event that the agency responsible to bring a staffing is not able to do so
  o Target specific priority population based on community need

• Communication
  o Personally contact mandated agencies to request their participation
  o Provide a reminder notification to agency or entity CEO when there is turnover
  o Create publicity: write article for paper and online news, cable channel, radio seniors program, etc.
  o Update and distribute brochures
  o Communicate regularly with CRCG members via email to share information and encourage attendance
  o Share information and CRCG policies with all agencies
  o Provide information via website and newsletters
  o Spread awareness through agency partners in their respective counties

**Recognition and Appreciation**

Feedback from local CRCGs indicates one strategy to increase referral rates is formally recognizing the people and agencies that consistently participate and make regular referrals. Some examples of formal recognition and appreciation include the following:

• Send letters of appreciation to thank agency executives for their participation and for sending a representative on a regular basis
• Acknowledge agency/organization contributions of supplies, stamps, photocopying, and other in-kind support
• Recognize chairs for their service
• Thank participants at each meeting and remind them to spread the word to communities
• Give verbal and written acknowledgement of referrals

"A lot of progress was made with the help of the CRCG."
- Parent of a child served by a CRCG
The CRCG Meeting

CRCG meetings are commonly conducted to allow partners to collaborate on the staffing process and develop Individual Service Plans (ISPs) for people referred to the group. The meetings are also used to identify ways to address gaps, strengthen the CRCG, and better support the community.

Developing an Individual Service Plan

Several key steps are part of bringing community members to CRCG meetings to develop an ISP.

Inviting the Service Recipient and their Supports

The referring entity gets consent from the person being served or from their legal representative to release information to the CRCG. The designee screens the referral for appropriateness for a CRCG staffing. If accepted, the chair or coordinator will disseminate the necessary information to CRCG members before or at the meeting.

When a child or youth is referred, the child’s family or other legal representative and/or significant others are invited to the meeting. The family and CRCG Chair may make a decision to also invite the child or youth depending on the age, maturity, and condition of the youth. When an adult is referred, the adult is invited to the meeting, as is a legal representative (if applicable). Additionally, the person being served may invite anyone they would like to attend the meeting.

Introducing All Participants

Every effort should be made to make the individual or family and guests feel comfortable and welcome. Often the referring member sits with and introduces the individual or child and family for whom the CRCG will be developing an ISP. Members should introduce themselves to guests and to other members by briefly identifying who they are and what agency or services they represent. Name tents and name tags are helpful to ensure everyone knows each other and what agency they represent. The chair should briefly explain to the individual or child and family how the meeting will work and what to expect.

Presenting the Situation and Identifying Needs

Invite the individual or family to briefly tell their story and to identify what they need from the CRCG. If the individual or family is not comfortable in this role, the referring entity such as a service coordinator or case manager may speak for the

"For the first time, I feel like I am doing something for my family."
- Adult served by a CRCG
individual or family. This process should be planned in advance of the meeting to ensure that the individual or family is as comfortable as possible and knows what to expect. Once the individual, family, or service coordinator has spoken, it is helpful for the facilitator to summarize what is being requested and to ask the individual or family for confirmation. For example:

“I understand that you would like help in getting computer training, finding a job, and arranging transportation to and from work. You would also like help getting child support for your children and finding a better place to live. Is that correct? Would you like to add anything? Is there anything else you need?”

For more information on facilitating a meeting, see the New Chair Guide on the CRCG website.

**Identifying Strengths**

The CRCG should work to build an ISP around the strengths of the person and family and the strengths of their community. Building on individual strengths provides a stronger base for enhancing services and supports rather than focusing solely on the problems or deficiencies. For example, include the child’s favorite activity in the ISP.

**Building the Individual Service Plan**

Members build the ISP by offering services and supports to meet the identified needs. It is important to ask for the individual or family’s feedback to be certain that a service, resource or action proposed by the CRCG is appropriate and fits with their values, cultural beliefs, family structure, or routine. Members provide essential information for each service, resource or action, including timelines, contact information, potential costs/payment, etc.

The ISP will also include information about what agency or person will take the lead supporting the individual or family in implementing the plan. Usually this will be the agency or organization that is contributing the most services or it may be the agency or organization with whom the consumer or child’s family is most comfortable. The lead entity is responsible for follow-up of the plan and for reporting back to the CRCG team at designated intervals.

The CRCG team may recommend sending letters to prospective service or resource providers, court officials or others, as part of the ISP. The chair will usually generate these letters on behalf of the CRCG.
**Other Potential Functions of the CRCG**

The second purpose of the CRCG is to promote interagency collaboration and remove service gaps and barriers. For example, CRCG meetings may include educational presentations about programs and services in the community. CRCGs may engage in discussion and strategic planning to address challenges or barriers identified in the community. Additionally, CRCGs can develop resources to address commonly identified needs. CRCGs can also create a pool of funds to pay for services or supports not covered by agencies.

It is as important for CRCG members to recognize and celebrate successes as it is to identify continuing needs and challenges. This may foster renewed energy to continue to address challenges.

Consider developing committees or identifying individuals to address these areas. For example, one committee can follow up on service gaps and barriers and another can recognize successes in the CRCG and community.

**How to Address Gaps and Barriers**

- Identify local, regional, or state resources to present at a CRCG meeting.
- Identify methods to integrate resources and develop additional resources such as grant writing or fundraising.
- Develop CRCG public awareness strategies.
- Invite new members experiencing the same challenges.

**How to Celebrate Successes**

- Hold an annual celebration
- Recognize members' exemplary participation in the areas of meeting attendance, referrals, consistently offered services, going beyond expectations, recording data/minutes and assuming a leadership role
- Highlight the CRCG, its role, and accomplishments in articles in the local newspaper, newsletters, agency or organizations’ newsletter/bulletins, or radio spots
Dispute Resolution

Individual Service Plans are developed by consensus of the local CRCG members. Even when there is a high level of cooperation and coordination among members, there may be situations where disputes arise while developing an ISP. Possible areas of dispute might include:

- Legal limitations
- Ongoing supervision and follow-up of services
- Scope and responsibility of an agency’s role in an ISP
- Eligibility criteria

The MOU requires each state agency to designate a negotiator who is not a member of any local CRCG to resolve disputes. The negotiator must have:

- Decision-making authority over the agency’s representative on the local CRCG
- The ability to interpret policy and commit funds

When two or more members of a CRCG disagree about their respective agencies’ service responsibilities, the CRCG chair or designee sends the designated negotiators for those agencies written notification that a dispute exists. Within 45 days of receiving the written notification, the negotiators shall confer to resolve the dispute.

When an interagency dispute cannot be resolved in the above manner, the dispute may be referred to the Health and Human Services Executive Commissioner. Contact the state CRCG office by email at CRCG@hhsc.state.tx.us or call 512-206-5255 for further assistance.
Evaluation

Local CRCGs are encouraged to evaluate their program. Evaluation results should be used to inform local quality improvement efforts. A formal evaluation will help the local CRCG in the following ways:

- Determine individual and family satisfaction with the CRCG process
- Identify barriers of the program and assess community needs
- Identify priorities for training, education, and public awareness
- Improve processes, clarify communication, and enhance cultural competence
- Find out which participants benefit most from the program
- Mobilize community support and broaden consensus among partners
- Determine the effects of the program
- Decide where to allocate new resources
- Document success accomplishing objectives and gather success stories

CRCGs also contribute to statewide evaluation conducted by the state CRCG office in two ways: 1) reporting local meeting data through the HHS data collection system (see Statewide Data Collection System section in this Handbook), and 2) promoting completion of the online Satisfaction Survey.

CRCGs should encourage all people assisted by CRCGs to complete the Satisfaction Survey, whether they are the direct recipients or a member of the family or supporters. The survey is designed to capture their experiences and provides direct feedback. CRCGs can direct people to the survey on the home page of the CRCG website (https://crcg.hhs.texas.gov/). CRCGs can include a link to this survey on completed ISPs to encourage participation. Think about what will work best in your process and community to obtain the most survey responses.

The brief survey is provided in English and Spanish and is accessible by smartphone, tablet, or computer, making it easy and quick to complete. Survey respondents will remain anonymous unless they choose to provide their name, contact details, and demographic information. The survey questions are listed in Appendix C. If you have any questions about the survey, contact the state CRCG office by email at CRCG@hhsc.state.tx.us or call 512-206-5255.
The State CRCG office uses information from CRCG reporting and survey responses to create the biennial legislative report demonstrating the effectiveness of community efforts to coordinate human services and supports, as well as to document the need for additional services and resources. The legislative report includes data related to the following areas:

- Number of people served through Community Resource Coordination Groups
- Information on outcomes of the services provided
- A description of any barriers identified to the state’s ability to provide effective services to persons needing multiagency services
- Any other information relevant to improving the delivery of services to persons needing multiagency services.
Statewide Data Collection System

Collecting data is vital to the work and development of CRCGs. Sufficient data allow CRCGs and the state CRCG office to assess the impact of CRCGs and identify gaps in services. The information revealed through data collection informs future efforts in addition to demonstrating performance.

About the Data Collection System

The state CRCG office hosts a statewide data collection system to allow CRCGs to report the same type of information in a consistent manner. CRCGs should report monthly aggregate data about their staffing meetings, including people served, partners involved, ISP recommendations, and barriers encountered.

When this data collection system was launched in 2018, system access was issued to identified data reporters for CRCGs across Texas. Following the launch, any new user is required to contact the state CRCG office for assistance creating a new user account. CRCG members can call the state CRCG office at 512-206-5255 or email CRCG@hhsc.state.tx.us.

How CRCGs Can Use Data

At the local level, CRCGs can utilize their data to inform the larger community, access funding opportunities, engage in new partnerships, and celebrate successes. For example, the data reports generated by the system provide a unique and individualized snapshot of each CRCG that can help local communities target efforts to address the needs of their community. The same data may also be used to help explain how a given grant or program would target a gap in services for a specific population.
The state CRCG office provides information, guidance, training, and technical assistance support to local CRCGs in partnership with the state CRCG workgroup. The workgroup is comprised of representatives from each member Agency, local CRCGs, and family representatives. Examples of these activities include the following:

- Technical assistance and guidance through webinars, conference calls, and video conference training on: the CRCG model; best practices for addressing the needs of persons with complex needs in the least restrictive environment; policies and programs; interagency collaboration; and health equity, disparities, and cultural responsiveness
- Recommendations for improvements in CRCG operations and disseminates relevant information
- Serves as a liaison between the local CRCGs and participating state agencies
- Operates the data collection system
- Commissions evaluations and research studies on the CRCG model
- Develops and oversees the CRCG website
- Identifies and creates tools and resources for local CRCGs
- Informs local CRCGs of availability of programs and resources in the community

Products and resources provided by the office include:

- Texas CRCG support website
- Joint Memorandum of Understanding (2018)
- Regional and state conferences
- Webinar series
- Monthly bridge call series
- Quarterly newsletter
- One Page series
- Referral Eligibility Chart
- New CRCG Checklist (2018)
- New Member Guide (2018)
- New Chair Guide (2018)
- Biennial Legislative Reports
- Special commissioned evaluation reports
State CRCG Office
Texas Health and Human Services Commission
Office of Mental Health Coordination
6330 E. Highway 290, Suite 300
Austin, TX 78723
Phone: 512-206-5255
Email: CRCG@hhsc.state.tx.us
Website: https://crcg.hhs.texas.gov/
Texas Government Code, Section 531.055

MEMORANDUM OF UNDERSTANDING ON SERVICES FOR PERSONS NEEDING MULTIAGENCY SERVICES.

(a) The Health and Human Services Commission, the Department of Family and Protective Services, the Department of State Health Services, the Texas Education Agency, the Texas Correctional Office on Offenders with Medical or Mental Impairments, the Texas Department of Criminal Justice, the Texas Department of Housing and Community Affairs, the Texas Workforce Commission, and the Texas Juvenile Justice Department shall enter into a joint memorandum of understanding to promote a system of local-level interagency staffing groups to identify and coordinate services for persons needing multiagency services to be provided in the least restrictive setting appropriate, using residential, institutional, or congregate care settings only as a last resort. The division within the Health and Human Services Commission that coordinates the policy and delivery of mental health services shall oversee the development and implementation of the joint memorandum of understanding.

(b) The memorandum must:

(1) clarify the statutory responsibilities of each agency in relation to persons needing multiagency services, including subcategories for different services such as:
   (A) family preservation and strengthening;
   (B) physical and behavioral health care;
   (C) prevention and early intervention services, including services designed to prevent:
      i. child abuse;
      ii. neglect; or
      iii. delinquency, truancy, or school dropout;
   (D) diversion from juvenile or criminal justice involvement;
   (E) housing;
   (F) aging in place;
   (G) emergency shelter;
   (H) residential care;
   (I) after-care;
   (J) information and referral; and
   (K) investigation services;

(2) include a functional definition of "persons needing multiagency services";

(3) outline membership, officers, and necessary standing committees of local-level interagency staffing groups;
(4) define procedures aimed at eliminating duplication of services relating to assessment and diagnosis, treatment, residential placement and care, and case management of persons needing multiagency services;

(5) define procedures for addressing disputes between the agencies that relate to the agencies' areas of service responsibilities;

(6) provide that each local-level interagency staffing group includes:
(A) a local representative of each agency;
(B) representatives of local private sector agencies; and
(C) family members or caregivers of persons needing multiagency services or other current or previous consumers of multiagency services acting as general consumer advocates;

(7) provide that the local representative of each agency has authority to contribute agency resources to solving problems identified by the local-level interagency staffing group;

(8) provide that if a person's needs exceed the resources of an agency, the agency may, with the consent of the person's legal guardian, if applicable, submit a referral on behalf of the person to the local-level interagency staffing group for consideration;

(9) provide that a local-level interagency staffing group may be called together by a representative of any member agency;

(10) provide that an agency representative may be excused from attending a meeting if the staffing group determines that the age or needs of the person to be considered are clearly not within the agency's service responsibilities, provided that each agency representative is encouraged to attend all meetings to contribute to the collective ability of the staffing group to solve a person's need for multiagency services;

(11) define the relationship between state-level interagency staffing groups and local-level interagency staffing groups in a manner that defines, supports, and maintains local autonomy;

(12) provide that records that are used or developed by a local-level interagency staffing group or its members that relate to a particular person are confidential and may not be released to any other person or agency except as provided by this section or by other law; and

(13) provide a procedure that permits the agencies to share confidential information while preserving the confidential nature of the information.

(c) The agencies that participate in the formulation of the memorandum of understanding shall consult with and solicit input from advocacy and consumer groups.

(d) Each agency shall adopt the memorandum of understanding and all revisions to the memorandum. The agencies shall develop revisions as necessary to reflect major agency reorganizations or statutory changes affecting the agencies.

(e) The agencies shall ensure that a state-level interagency staffing group provides:
(1) information and guidance to local-level interagency staffing groups regarding:
   (A) the availability of programs and resources in the community; and
   (B) best practices for addressing the needs of persons with complex needs in the least restrictive setting appropriate; and

(2) a biennial report to the administrative head of each agency, the legislature, and the governor that includes:
   (A) the number of persons served through the local-level interagency staffing groups and the outcomes of the services provided;
   (B) a description of any barriers identified to the state's ability to provide effective services to persons needing multiagency services; and
   (C) any other information relevant to improving the delivery of services to persons needing multiagency services.

(f) In this section, "least restrictive setting" means a service setting for a person that, in comparison to other available service settings:
   (1) is most able to meet the identified needs of the person;
   (2) prioritizes a home and community-based care setting; and
   (3) engages the strengths of the family.
Appendix A-2: Memorandum of Understanding

Joint Memorandum of Understanding for Coordinated Services to Persons Needing Multiagency Services

Visit the state CRCG office website for the current version of the MOU at https://crcg.hhs.texas.gov/about.html.
Appendix B-1: New CRCG Checklist

New CRCG Checklist

Below is a checklist to help prepare new or expanding Community Resource Coordination Groups (CRCGs) to serve clients. The items on this checklist are not exhaustive; however, they serve as a starting point. More details are available in the CRCG Handbook.

The state CRCG office recommends accessing the CRCG website for a thorough review of the resources listed below. A review of the CRCG website will provide you with a clear understanding of the key components required to start or maintain a CRCG.

Important Resources for CRCGs:
- CRCG Guiding Principles
- CRCG Memorandum of Understanding (MOU)
- CRCG Member Materials (Handbook, New Chair Guide, New Member Guide)
- Data Collection System requirements and resources (contact the state CRCG office for these documents)

The following steps provide a chronological order of procedures to help ensure the creation, revival and/or maintenance of an effective CRCG.

☐ Identify state agencies and leaders in your area who provide human services and support to your community. In 2018, leadership from the following state agencies signed a Memorandum of Understanding (MOU) requiring representatives from these state agencies and local offices to participate in the CRCG program:
- Texas Health and Human Services Commission (HHSC)
- Texas Department of Family and Protective Services (DFPS)
- Texas Department of State Health Services (DSHS)
- Texas Department of Criminal Justice (TDCJ) - Texas Correctional Office on Offenders with Medical or Mental Impairments (TCOOMMI)
- Texas Juvenile Justice Department (TJJD)
- Texas Education Agency (TEA)
- Texas Department of Housing and Community Affairs (TDHCA)
- Texas Workforce Commission (TWC)
Identify additional key organizations and leaders in your area who are knowledgeable and provide resources and support to your community. These leaders may include representatives from the local school district, local mental health authorities, local non-profits, community or faith-based organizations, parents, and family members.

Reach out to key leaders to determine a date, time, and a centralized meeting location for an initial organizational meeting. If you need help identifying your local state agency representative, please send an email to CRCG@hhsc.state.tx.us.

Develop an initial organizational meeting agenda to include:
- What are CRCGs
- Key state and local representatives
- Examples of CRCGs in other counties (if available)
- The CRCG process and what it will look like in your county
  - Leadership Team (See "CRCG Structure: Leadership" in the CRCG Handbook)
  - Regular Meetings (See "The CRCG Meeting" in the CRCG Handbook)

Host an initial organizational meeting. Based on the needs of your community plan to discuss:
- What age groups will we serve?
- How many counties will we serve?
- How often will we meet?
- Where and when will we host our regular meetings?
- What CRCG Member roles will we have and how will we select members for leadership roles?
- How long will leadership roles be held?
- What will be our referral process and selection/screening criteria for referrals?
- Confidentiality and Release of Information forms.

Create CRCG Mission Statement. (See "CRCG Structure: Mission" in the CRCG Handbook)

Create/determine CRCG bylaws or policies and procedures. (See "CRCG Structure: Bylaws" in the CRCG Handbook)

Select leadership team and roles. (See "CRCG Structure: Leadership" and "CRCG Structure: Roles" in the CRCG Handbook)

Notify the state CRCG office of your new CRCG, your leadership contact information, and an email list of all your members. This ensures that all members receive helpful newsletters and resources. Send this information to CRCG@hhsc.state.tx.us.
Create/develop communication guidelines or ground rules for regular meetings. (See "CRCG Structure: Ground Rules" in the CRCG Handbook)

Create Release of Information forms with adherence to state/federal law and each agency's confidentiality policies. (See "Referrals: Release of Information" in the CRCG Handbook)

Notify all partners (including those unable to attend the meeting) that the CRCG is active and accepting referrals. Inform partners of the referral process and any eligibility requirements for referrals.

Begin referring eligible clients to the CRCG.

Begin holding regular CRCG meetings to coordinate resources for selected cases. (See "The CRCG Meeting" in the CRCG Handbook)

Report information about your staffing meetings each month to the state CRCG office using the CRCG Data Collection System. Contact the state CRCG office for access to the system and training in how to use it.

For questions or support, contact:

State CRCG Office
Texas Health and Human Services Commission
Office of Mental Health Coordination
6330 E. Highway 290, Suite 300
Austin, TX 78723

Phone: 512-206-5255
Email: CRCG@hhsc.state.tx.us
CRCG Website: https://crcg.hhs.texas.gov
Appendix B-2: Sample Letter of Invitation

Sample Letter of Invitation to Organizational Meeting

(Agency letterhead)

Date

Dear

Have you ever been involved with a person whose needs are not clearly met by one agency or who is being passed back and forth from agency to agency? Or, worse yet, the individual doesn’t have the “right” diagnosis for certain programs or services. Have you ever wished there were a way for service providers to come together to plan for services with these adults and their caregivers before they slip through the cracks of the system?

Around the state, county-based Community Resource Coordination Groups to deal with these issues. CRCGs are local interagency groups composed of public and private agencies that develop service plans with children, families and adults whose needs can be met only through interagency coordination and cooperation.

Eight state agencies serving children and adults with complex needs have entered into a formal agreement to work together with local entities to facilitate the development and ongoing support of Community Resource Coordination Groups for children, youth, and adults across Texas.

We would like to invite you to an organizational meeting on (insert date, time, place). The purpose of the meeting is to learn more about CRCGs in other counties and to discuss the possibility of establishing a CRCG for (insert county/counties name(s)). We will discuss the specific challenges in our area.

As a leader in this community and as an agency serving (insert specific population served) in this community, your participation in this effort is needed. If you are unable to attend, please send someone else to represent your agency.

We look forward to seeing you on (insert time/date/place). Please RSVP (insert name/phone number/email) by (insert date for RSVP).

Please mark your calendar and help us work toward assisting adults with complex needs to get the help they need within their communities before the situation becomes unsolvable.
By building trusting relationships and working partnerships, CRCGs are doing together what no one agency could do alone:
Making a difference in the lives of Texans with complex needs - one at a time.

Sincerely,

(insert name(s)/signature(s)
Agency(ies)
Sample Agenda for Organizational Meeting

This agenda can be used as the basis for a meeting where partners come together to develop a new CRCG. It can also be modified to serve as an orientation to the CRCG for new partners.

CRCG Development Meeting

Date
Time
Place

Welcome and Introductions

What are CRCGs?

What do we need to consider to establish our CRCG?

• Who do we want to support through the CRCG?
• Who are the key partners?
• What processes should we use?
• How will we get referrals?
• What leadership structure and member roles do we need?
• How should we conduct meetings?
• How often should we meet?
• What forms do we need?

Considerations and Decisions

Next Steps

Close
Appendix B-4: Sample Policies and Procedures

Sample CRCG Policies and Procedures

1. **Definition and Role**

The Community Resource Coordination Group (CRCG) refers to a specific group of public agency and private sector representatives who are challenged with the task of securing services for families and individuals of any age who need services from more than one entity and cannot access those services.

The group will develop an agreement for coordination of services for the family or individual through community level programs. The agreement will be a plan to coordinate services. It will not be a detailed staffing plan with treatment goals.

2. **Model and Guiding Principles**

The CRCG adheres to the state CRCG model and guiding principles.

3. **Attendance and Participation**

All participating entities agree that attendance at the CRCG meeting is important. The CRCG requires the cooperation and participation of all members to meet the needs of people referred. Attendance and participation at every meeting is strongly supported and encouraged.

4. **Membership**

CRCG membership is composed of public and private sector entities and state agencies. Representatives for these entities are appointed internally and must have the authority to commit services or resources for their entity. At a minimum, resources include time and services. Sometimes the designated representative will not be familiar with the individual or family referred by his/her agency. It is appropriate for a member to attend the CRCG, familiar with the family or individual to present relevant information or to attend with the referred family or individual.

5. **Confidentiality**

   a. The CRCG meetings are open, however, CRCG staffings are restricted to representatives who are members of the CRCG.

   b. All information shared in the CRCG is confidential. Each member is bound by the confidentiality rules of his or her own entity. Information obtained at the meeting is not to be shared outside the CRCG except as needed to secure resources for the family or individual.

   c. Every CRCG participant who has relevant information regarding the referred family or individual is to secure a written release of information in preparation for the meeting. Every effort must be made to secure the needed releases prior to the meeting so each CRCG participant can contribute their information to the staffing.
d. All participants shall sign confidentiality statements prior to the staffing.

6. Officers and Responsibilities

a. CRCG Officers shall be the Chairperson, Co-Chair and Recorder. The Co-Chair shall assume the duties of the Chairperson in the absence or unavailability of the Chairperson. The Recorder will assume this responsibility in the absence of the Chairperson and Co-Chair.

b. Terms of office are one year, and officers may be re-elected by the membership. Elections will be held during the August meeting and terms begin in September of each year.

c. The Chairperson shall:

1) preside at all meetings;
2) orient new member entities of the purpose, policies and procedures of CRCG;
3) ensure that appropriate consents have been obtained by the referring entity;
4) ensure that a service plan is developed and designate the representative responsible for ensuring that the plan is followed.

d. The Co-Chair shall assume the duties of the Chairperson in the absence or unavailability of the Chairperson, or as requested and will transition to Chairperson after one year.

e. The Recorder will be responsible for taking notes of the meetings and shall assume the duties of Chairperson in the absence or unavailability of the Chairperson and Co-Chair.

7. Meetings

CRCG meetings will be held on the first Thursday of each month. Emergency meetings may be scheduled as needed by contacting the Chairperson. All participating entities will be responsible for any expenses associated with their representative's participation in the CRCG.

8. Staffing/Criteria for Referral

CRCG referrals for staffing may be received from a member or individuals or families whose needs can only be met by interagency cooperation. Staffings will be restricted to representatives who are members of the CRCG.

[Because of the time factor involved in a staffing, each member should develop an internal system for referral. The primary objective is to not refer individuals or families whose needs can be met by assertive exploration of resources currently available. Referrals to the CRCG should include information on service barriers for]
the family or individual. The CRCG leader or another designated member must review the case to determine its appropriateness for a CRCG staffing.]

Prior to referral to the CRCG, the member shall take the following steps:

a. Explore existing resources within and outside their organization;
b. Consult with their representative to the CRCG;
c. Complete the local CRCG referral procedure.

9. Responsibilities of Referring Entity

a. Assess criteria for eligibility and contact the Chairperson or designee to schedule a staffing;
b. Ensure the required document(s) for sharing confidential information are complete prior to the meeting; if the client has a guardian, ensure that individual has signed all appropriate documentation;
c. Ensure the individual and/or family, guardian, advocate, or other involved individual(s) are present for the staffing;
d. Provide information to the entities present on the needs of the family or individual including resources that have been accessed both successfully and unsuccessfully, natural support systems and strengths, and any barriers to achieving desired outcomes.

10. Responsibilities of Lead Entity

Ensure the development and implementation of the service plan, including the coordination and monitoring of services among all involved entities within the planned timelines.

11. Responsibilities of the CRCG

a. Discuss and prioritize the unmet needs of the family or individual based on information presented during the staffing;
b. Identify additional resources available to address the unmet needs;
c. Incorporate the needs and available resources in a service plan, identifying persons responsible for implementing strategies in the plan, timelines for completion and plans for follow up review;
d. Identify inadequacies or gaps in services and resources;
e. Develop plans and/or make recommendations to public and private entities for alleviating service gaps or improving services.

12. Record Keeping

a. The Chairperson or designee will maintain a roster including the name, mailing address, email address and telephone numbers of the CRCG membership and will distribute it as needed/requested;
b. The referring entity will maintain the original service plan in the client record. Other entities involved with the client may maintain a copy of the service plan or incorporate information, e.g. specific goals/objectives relative to services provided by the entity, as part of their records as required or appropriate.

c. The recorder will be responsible for maintaining official records for up to three years unless there is a legal reason to destroy these at an earlier time. All other copies of staffing records will be destroyed by the Record Keeper.

d. The Recorder will submit data to the state CRCG office using the statewide data collection system.
Online Satisfaction Survey for People Assisted by CRCGs

Community Resource Coordination Groups (CRCGs) want to hear about your experience. We are always looking for ways to improve, as well as celebrate people and communities who are making a difference. Please take a few minutes to fill out this brief survey. Your responses will be anonymous. If you would like to provide us with any additional information, you can call the CRCG state office at 512-206-5255 or email us at CRCG@hhsc.state.tx.us.

1. I am a:
   - Parent/Caregiver
   - Young Adult between 13-22 years old
   - Adult Served by the Community Resource Coordination Group (CRCG)
   - Other (please specify)

2. What month and year did you attend a Community Resource Coordination Group Meeting (CRCG)?

3. Please describe your overall experience with your Community Resource Coordination Group (CRCG).
   - Very Dissatisfied
   - Somewhat Dissatisfied
   - Neither Satisfied or Dissatisfied
   - Somewhat Satisfied
   - Very Satisfied

4. Tell us the reasons for your rating.

5. Did you receive a copy of the Individualized Service Plan (ISP)?
   - Yes, I received a copy
   - No, I did not receive a copy
   - I am not sure

6. If you received an Individualized Service Plan (ISP), are you clear about what the next steps are?
   - Yes, I am clear on the next steps
   - No, I am not clear on the next steps
   - I am somewhat clear about the next steps
7. If you were not clear or not completely sure of the next steps, what could have been done to make sure you were clear about the next steps?

8. Did the Community Resource Coordination Group (CRCG) process and Individualized Service Plan (ISP) meet the needs of the child, youth, family or adult who met with the Community Resource Coordination Group (CRCG)?
   - Yes, all needs were met
   - No, none of the needs were met
   - Some needs were met

9. If needs were not met, why?

10. Please share any additional comments, ideas or suggestions

Thank you for your feedback! If you have 5-10 more seconds, we would like to know more about you. We will use this information to help the State CRCG Office create training and provide support to communities to meet the needs of all people.

How old are you?
   - Under 18
   - 18-24
   - 25-34
   - 35-44
   - 45-54
   - 55-64
   - 65+

Race
   - White or Caucasian
   - Black or African American
   - Asian or Asian American
   - Middle Eastern or North African
   - American Indian or Alaska Native
   - Native Hawaiian or other Pacific Islander
   - Other (please specify)

Ethnicity
   - Hispanic or Latino
   - Not Hispanic or Latino

Gender
   - Male
   - Female
   - Other

Language spoken at home
   - English
   - Spanish
   - Vietnamese
   - Chinese
   - Tagalog
   - Other (please specify)