



Thursday, April 9, 2026 | 8:00 a.m. to 9:30 a.m.

Hybrid Meeting

Physical – UWDC Community Room: 1314 Teasley Lane, Denton, TX 76205

Virtual – Zoom Video Conference Link Attached in Email

Agenda:

I.	Welcome & Introductions	Chair	3 min.
II.	Votes	Chair	5 min.
	<ul style="list-style-type: none"> • VOTE – Approval of Meeting Minutes February 		
III.	Denton County Mental Health & Jail Diversion Center Pilot	Cross Care Collaborative Chairs	30 min.
IV.	Strategic Planning Committee update	Jesse K. and Olivia W.	20 min.
V.	Workgroup Report Highlights		10 min.
	<ul style="list-style-type: none"> • Healthcare • Diversion • Housing • Data 	Isabel R. & Lisa B. Daphne H. Terry W. Stephen C.	
VI.	Backbone Support Highlights (inside packet)	UWDC	10 min.
	<ul style="list-style-type: none"> • Denton County Behavioral Health Leadership Team • Denton County Workforce Success Leadership Team 	Shelby Redondo-Macon Shelby Redondo-Macon	
VII.	Public Comment	Chair	5 min.
VIII.	New Business	Chair	10 min.
	<ul style="list-style-type: none"> • Denton County Friends of the Family Pilot 	Dani S.	
IX.	Adjourn	Chair	1 min.

Next Meeting Date:

Thursday, June 11, 2026 | 8:00 a.m. to 9:30 a.m. | Hybrid Meeting

Physical – United Way of Denton County, 1314 Teasley Lane Denton TX 76205

Virtual – Zoom Video Conference Link Attached in Email





Denton County Housing & Homelessness Leadership Meeting

8:00 AM February 12, 2025

Hybrid Meeting

Welcome

Meeting called to order at 8:00 AM by Carlos Henderson.

Votes

Carlos Henderson called for the vote to approve meeting minutes, Dale Tampke moved to approve, and Jesse Kent offered to second the motion.

Point in Time Count Recap

Elena Shehan presented the 2026 PIT count; set a goal to meet 200 volunteers, actual volunteer count, 137. Implemented new plan for volunteers to select their own shifts. Reviewed and updated strategies to improve count; improved area coverage by deploying volunteers throughout the day, multiple times a day. An additional goal was to gather enough donations to make 700 bags, and over 5000 items were received. Special note of appreciation to DCTA for continuing to serve the community by donating 600 bus passes. 15 training opportunities provided for volunteers, continued training for returning Lead volunteers. Instead of backpacks, the decision to shift to survey respondents to self-select items needed was well received. The data reveal is tentative for late Spring.

Workgroup Updates

Data Workgroup: The workgroup is evaluating how to integrate Diversion HMIS data onto the DCHHLT data dashboard. Backbone support met with THN to address HMIS capabilities along with agency responsibility, the vendor shared they will be responsible for implementing the workflow without input from agencies and will also absorb the cost.

Housing Workgroup: Confirmed that case conferencing is supporting the diversion workflow efforts and ensuring that diversion assessments are the starting point. There are concerns about the growing number of coordinated entry assessments that have recently appeared, and there

Cross Care Collaborative: Officer Henderson was placed as co-chair for the workgroup. Updated that the Jail Diversion center is the direction of the group. He will be active in law enforcement outreach to understand what their departments will need to support. Data collection efforts for high utilizers and 16.22 evaluations continue, this will identify which low level, nonviolent criminal charges will be eligible. Invited group to the McLennan County Diversion Center Tour.

Diversion: Updated that the workgroup continues to support the rollout of Diversion workflow training.

Denton County Homeless Coalition: Presented the PIT Count recap, the data reveal recap is being scheduled for late spring.

Healthcare Workgroup: Progress continues on the Physical Health Rubric, drafted with the intention of being able to lay a foundation for non-medical organizations that intersect with the unhoused population to improve ways to navigate the healthcare system at different levels of severity. Baylor Scott & White representatives are the newest members of the workgroup. There is a renewed focus on inviting more healthcare providers to the workgroup.

Backbone Support Updates

Housing & Homelessness Leadership Team: UWDC provided backbone support to The Path Home in

Behavioral Health Leadership Team: Added points to the diversion center update; Judge Jahn offered his support for the diversion center. National Youth Mental Health Awareness Month is a launch point for the CredibleMind Youth site this month.

Workforce Success Leadership Team: VITA season is underway, 8 sites in Denton County, 220 returns \$579,000 back into the hands of the ALICE households. Advocacy workshop plans include looking at 2 dates in April to gather the workgroups from each leadership team for the purpose of drafting advocacy plans ahead of the next legislative session.

Public Comment

Olivia shared the HUD update, that due to legal reasons, HUD is opening funding for renewals of existing grant recipients. HUD's priorities anticipated shift from permanent supportive housing to transitional housing is an opportunity for Denton County agencies to strategize to prepare for the upcoming changes.

Denton Affordable Housing Corporation shared that 8-11 properties have a waitlist for low-income properties and that there is anticipation that the voucher list will open.

Carlos passed along his appreciation on behalf of NAMI, that UWDC has opened its doors to support NAMI's expansion into Denton County.

Julie Wright with Texas Health Resources invited the room to the upcoming Innovation grant workshop.

Nancy with Habitat for Humanity, invited the room to share their event on how to sign up to be a homeowner on March 21st.

New Business

Jill Adams submitted her resignation from her co-chair position in January. A call for a nominating committee was made.

Adjourn

The meeting was adjourned at 9:30AM

C. Henderson #390

Carlos Henderson

DCHHLT Secretary



Healthcare: March 2026

CHAIR: ISABEL RODRIGUEZ & LISA BENTON

OBJECTIVE & GOALS:

- *Increase access to healthcare services for people experiencing homelessness*
- *Increase community resources for healthcare workers*
- *Identify data points from participating organizations and agencies in Denton County*

Meeting Summary

The workgroup convened to outline the next steps in planning for a medical respite program. Discussions centered on establishing a foundational set of goals to be achieved by the end of 2026, aligning efforts with community healthcare needs and system capacity.

Short Term Action Items

- Continue stakeholder outreach and expand membership across sectors
- Define and prioritize 2026 healthcare objectives using data from hospitals and community-based agencies

Accomplishments

- Collecting advocacy goals from group for local, state, and federal efforts

Concerns

- Agencies report an increasing gap in available healthcare services and persistently unmet medical needs among the unhoused population, highlighting the urgency for coordinated intervention and resource development.

Next Meeting Dates

First Tuesdays of the month, 12 PM – 1 PM



Diversion: March 2026

CHAIR NAME: DAPHNE HOUSTON

OBJECTIVE & GOALS 2026-2028:

- *Implement and support Diversion workflow in HMIS for agencies*
- *Improve data collection for Diversion in HMIS*
- *Increase community dollars sourced for Barriers Fund*

Meeting Summary (provide meeting date and items discussed during meeting)

The group is also operationalizing Diversion practices for agencies and HMIS.

Short Term Action Items

- Add time to review Diversion enrollments during each Housing Workgroup.
- Using the monthly data dashboard as a guide for goal setting for the 80+ persons that fit criteria for diversion services
- UWDC Backbone support has a new Diversion & CE coordinator that is supporting training and outreach efforts for diversion workflow.
- Work with Data workgroup on creating client encounters for diversion visualization

Accomplishments

- Established priorities for 2026: identifying funding resources, diversion categories, integration of Barriers Fund to goals

Concerns

- Availability of flexible funds to support diversion problem-solving efforts.

Next Meeting Dates

Zoom- 2nd Wednesday of each month at 2pm



DATA Workgroup: March 2026

CHAIR: STEPHEN COFFEY

OBJECTIVE & GOALS:

Identify ways to integrate data support for other HHLT workgroups to advance funding and advocacy efforts

Meeting Summary

There are currently 298 households actively experiencing homelessness on our Housing Priority List. The 298 total number breaks down into:

58 families	5 veteran households
240 individual households	74 households experiencing chronic homelessness
87 fleeing domestic violence	

Denton County school districts' data was updated in September 2025. The two largest school districts reported the following:

- Denton ISD: 429 students (September 2025)
- Lewisville ISD: 458 students (September 2025)

Housing intervention prioritization breakdown:

- Diversion Services: Households (14.1%; n=42)
- Rapid Rehousing Intervention: Households (50%; n=149)
- Permanent Supportive Housing Intervention: Households (35.9%; n=107)

Short Term Action Items

- The data workgroup will partner with Diversion workgroup to develop a process for Diversion data collection and integration into the data dashboard.
- The workgroup will gather and synthesize information about reporting requirements for Diversion and Transitional Housing Programs.
- Drafting a diversion workflow visual from the client encounters perspective

Accomplishments

Concerns

- Responding to recent policy changes and discussing a process for data collection, analysis, and reporting.



- Leveraging HMIS capabilities for insights on homeless populations and opportunities for cross-sector collaboration.

Next Meeting Dates

Occurs every second Thursday from 3:00 PM to 4:00 PM on Zoom



Housing: March 2026

CHAIR: TERRY WIDMER

OBJECTIVE & GOALS 2026-2028:

- *Improve housing outcomes for those on the HPL*
- *Identify affordable housing solutions gap analysis*

Meeting Summary (provide meeting date and items discussed during meeting)

Weekly meetings with front door agencies are held to collaboratively address barriers and develop solutions that support individuals and families progressing toward stable housing. Discussions focus on systems coordination, resource alignment, and continuous process improvement.

Short Term Action Items

- Increase consistency in participation from agencies
- Identify number of affordable housing units available in Denton County

Accomplishments

- Housing crisis response system has housed 89 people since October 1, 2025

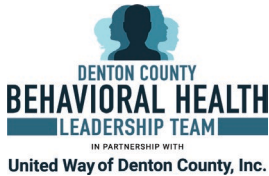
Concerns

- There is an ongoing need to identify and secure training resources that support frontline agency staff in delivering effective, evidence-based case management services

Next Meeting Dates

Weekly on Mondays, 3 PM- 4 PM (excludes holidays)

Hybrid; UWDC and Zoom



Cross Care Collaborative, Joint Workgroup of The Denton County Behavioral Health Leadership Team and The Denton County Housing & Homelessness Leadership Team - RECOMMENDATION

Denton County Mental Health & Jail Diversion Center Pilot: A Strategic Approach to Improving Public Safety and Reducing Recidivism

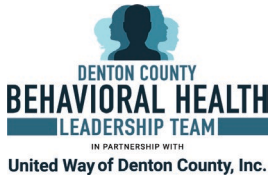
Date: March 2026

Executive Summary

Denton County continues to experience rapid population growth, increasing demand for law enforcement, and costs associated with jail operations. In 2023 the Denton County Behavioral Health Leadership Team (DCBHLT) and the Denton County Housing & Homelessness Leadership Team (DCHHLT), created a joint workgroup, The Cross Care Collaborative (CCC) to examine the intersection of the criminal justice system, behavioral health and homelessness. In 2025, the CCC updated the Sequential Intercept Model Map (SIM Map), a widely recognized approach to understanding mental health crisis response system resources and gaps and worked alongside law enforcement and Denton County MHMR to identify the gaps in services at each intercept to provide prioritized recommendations. A priority finding at Intercepts 0 “Community Services”, 1 “Law Enforcement”, & 2 “Initial Detention/Initial Court Hearings” were the number of law enforcement interactions for low level calls, charges, and bookings. According to 2024 Denton County booking data, nearly 1 in 5 new bookings involve individuals charged with low level, nonviolent offenses, many of whom face untreated mental health conditions or housing instability. The offenses include criminal trespass, criminal mischief- misdemeanor, fail to ID/possession of false ID, misdemeanor theft, and evading arrest- on foot. In 2024, about 20% of new arrests or bookings would be eligible for diversion placement.

The leading and most urgent recommendation of the Cross Care Collaborative is the establishment of a **Denton County Mental Health & Jail Diversion Center Pilot (DCMHJDC)**, a centralized, 24/7 facility designed to redirect eligible individuals away from jail and into short-term stabilization and community-based services. The DCMHJDC Pilot would provide law enforcement, courts, and prosecutors with an alternative to arrest while maintaining public safety and accountability. The Denton County Sheriff’s Office estimates that each interaction that leads to arrest costs a deputy an hour of time, and with a Diversion Center, there is an estimated time savings benefit of 45 minutes per arrest.

The proposed recommendation prioritizes equipping Denton County with the flexibility to reduce jail utilization, lower taxpayer costs, and strengthen public safety.



1. The Challenge Facing Denton County

System Overuse for Low Level Offenses

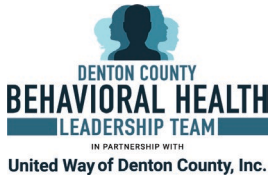
County and local jails frequently serve individuals whose primary needs are behavioral health treatment or social services rather than incarceration. In 2024, there were 5,164 total arrests booked in Denton County. The estimated subset population with low level offenses account for an approximate 20% of bookings (606 individuals).

Denton County Bookings 2024	
Total bookings in 2024	5,164
Eligible bookings (low-level, non-violent offenses)	1,003
Share of bookings eligible	19.4%
Eligible bookings (among eligible population)	796
Ineligible bookings (among eligible population)	207

Agency	Total 2024 New Bookings	Eligible 2024 New Bookings
Argyle PD	76	5
Carrollton PD	691	65
Cross Roads PD	102	25
Denton PD	1,811	459
Flower Mound PD	221	15
Frisco PD	180	19
Hickory Creek PD	157	24
Highland Village PD	117	20
Lewisville PD	1,449	139
Pilot Point PD	90	3
Prosper PD	136	11
Roanoke PD	134	11
The Colony PD	N/A	N/A
Total	5,164	796

Mental Health Gaps

When Denton County law enforcement officers encounter individuals in a mental health crisis, there are few options they can provide other than arrest or emergency room transport. According to 2024 Denton County booking records, for the 16.22 evaluations that were tied to the eligible arrest event, involuntary inpatient treatment was recommended in 35 of 83 evaluations. However, a substantial percentage of 16.22 evaluations for eligible bookings resulted in either voluntary inpatient or outpatient treatment



recommendations. Together, voluntary inpatient and outpatient recommendations in diversion-eligible arrests leading to a 16.22 accounted for 22 of 83 evaluations.

16.22 Treatment Recommendation	Count	% of Total Recommendations
Involuntary Inpatient	35	42.2%
Voluntary Inpatient	11	13.3%
Outpatient	11	13.3%
N/A or Incomplete	26	31.3%
Total	83	100%

Financial and Community Impact

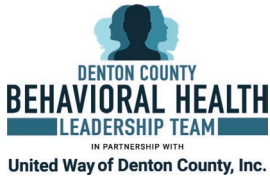
Incarceration is significantly more expensive than diversion and does not reduce future justice involvement. The 2024 Denton County booking data indicates that among individuals who received a 16.22 mental health evaluation in 2024 and had matched booking data (n=288), 17% were high utilizers (3+ bookings), accounting for over 41% of the 493 bookings observed within this population. Within this high-utilizing group, the majority (82%) had at least one diversion-eligible booking, including a subset who were diversion-eligible 3 or more times in 2024.

High Utilizers & Eligibility in 16.22 Population (with Booking Match)			
Category	Individuals	Total Bookings	% of Bookings
Non-High Utilizer	238	290	58.82%
High Utilizer Heavy (Eligible Bookings ≥3)	19	105	21.30%
High Utilizer Some (Eligible Bookings ≥1<3)	22	69	14.00%
High Utilizer- No Eligible (Eligible Bookings <1)	9	29	5.88%
Total	288	493	100.00%

2. Diversion Centers: An Effective Solution

A **Diversion Center** is a secure, nonjail facility that provides short-term assessment, stabilization, and service linkage for individuals who would otherwise be arrested or booked into jail. Diversion Centers, including the north Texas example in Tarrant County, are recognized nationwide as an evidence-based strategy for addressing nonviolent offenses tied to behavioral health and social needs. The Denton County Mental Health & Jail Diversion Center Pilot would:

- Operate 24 hours a day, 7 days a week
- Accept direct law enforcement drop-offs
- Serve as a pre-arrest or pretrial alternative
- Coordinate closely with courts and community providers



3. Proposed Denton County Mental Health & Jail Diversion Center Model Pilot

Target Population

The Denton County Mental Health & Jail Diversion Pilot would serve adults who are charged with low-level, nonviolent offenses and who are experiencing mental health crises or repeated justice system involvement. The proposed charges include criminal trespass, criminal mischief- misdemeanor, fail to ID/possession of false ID, misdemeanor theft, and evading arrest- on foot only. Individuals charged with violent offenses or requiring immediate hospitalization would be excluded.

Core Services

The Denton County Mental Health & Jail Diversion Center would provide:

- Intake screening and expedited check list for law enforcement
- Mental health evaluations
- Medical triage and short-term stabilization
- Case management and service navigation
- Connections to community-based treatment, housing, and employment resources

Typical length of stay would range from **6 hours to 11 days**, depending on individual needs and based on outcomes from Tarrant County and Bell County Diversion Centers.

4. Operations and Partnerships

Law Enforcement Integration (Sequential Intercepts 0 & 1)

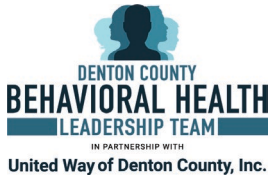
Participating law enforcement agencies would transport eligible individuals directly to the Diversion Center. The intake process would be streamlined to allow officers to return to duty quickly, improving patrol efficiency and response times. The Tarrant County model implements a simple checklist that approximately takes between 5-15 minutes.

District Attorney and Court Systems (Sequential Intercepts 2, 3 & 4)

The District Attorney participation in the diversion center pilot is critical to determining eligibility, jail diversion success metrics, and identifying current inmates that may be eligible for the diversion center participation, as modeled in Tarrant County.

Staffing Model Pilot

The Denton County Mental Health & Jail Diversion Center Pilot would be staffed by licensed mental health professionals, medical personnel, case managers, non-correctional security staff, and law enforcement partnerships. The Tarrant County model has an estimated annual budget of \$2–3M funded through MHMR and county support. Their staffing includes 5 LVNs, 5 RNs, peer recovery specialists (mental health and addiction), therapist, physician oversight, and on-site nurse practitioner supervisor.



5. Expected Outcomes

Public Safety

Diversion programs reduce reoffending by addressing the causes of criminal behavior. Individuals who receive timely treatment and support are less likely to return to jail. The Williamson County Model, operated by Bluebonnet Trails Community Services reported that their March 2024 30-day recidivism rate was 6.6%.

Cost Savings

Compared to incarceration, diversion reduces jail bed usage, emergency room visits, and court processing costs. Jurisdictions operating diversion centers report substantial per participant savings. The Williamson County Diversion Center, operated by Bluebonnet Trails Community Services, shared their reporting metrics and cost savings in 2024, as \$2,843,715.

Calculated Cost Savings (FY24 YTD):

Reduction in Days Incarcerated @ \$549/day x avg 5 days:	Uninsured private hospital diversions @ \$650/day x average 7 days:	Emergency department diversions @ \$1,917/day x 1 day:	Local Investment to Operate Diversion Center @ \$25,020/mo:	Total Estimated Local Cost Savings:
\$1,869,345	+ \$1,092,000	+ \$57,510	- \$175,140	= \$2,843,715

Community Benefits

The Denton County Mental Health & Jail Diversion Center Pilot would reduce visible crisis incidents, improve outcomes for individuals and families, strengthen collaboration among systems, and enhance public trust in the justice system.

6. Data, Oversight, and Sustainability

The Denton County Mental Health & Jail Diversion Center Pilot would track diversion admission rates, jail booking reductions, and cost savings. Regular reporting to county leadership would ensure transparency and accountability.

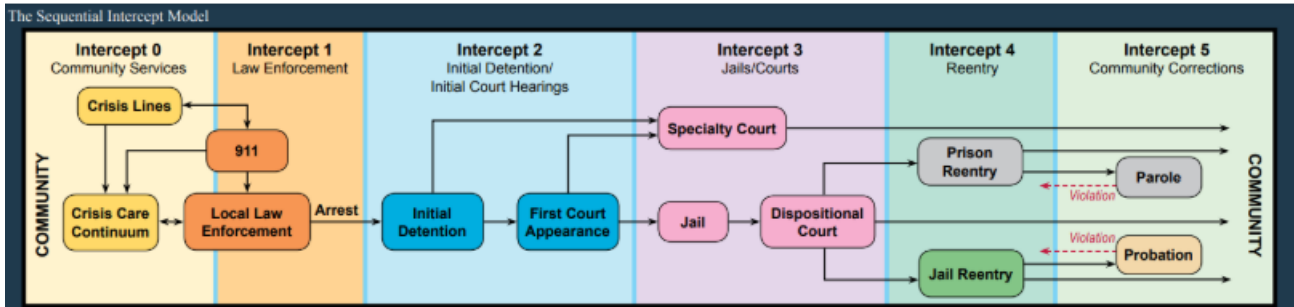
Funding sources may include federal and state grants, state legislative support, county general funds, healthcare partnerships, and Medicaid reimbursable services. Over time, savings from reduced incarceration can support long-term sustainability.

7. Conclusion

The Denton County Mental Health & Jail Diversion Center Pilot offers a practical, evidence-based response to the growing demands on the county’s criminal justice system. By shifting the response to low-level, nonviolent offenses from incarceration to stabilization and treatment, Denton County can improve public safety, reduce costs, and achieve better outcomes for residents.

Appendix

Sequential Intercept Model Map



Williamson County, Bluebonnet Trails Community Services reporting dashboard, March 2024

MARCH 2024
WilCo Data Book

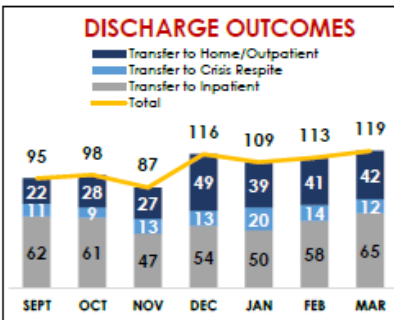
Diversion Center



911 MCOT YTR CRU **Diversion** PPB JBCR RWM Prevention

Purpose:

Our secure, 23- to 48-hour Diversion Center offers rapid assessment, medication management, crisis stabilization & transportation for adults, allowing law enforcement to return to duty as quickly as possible.



REFERRAL SOURCE BY COUNTY

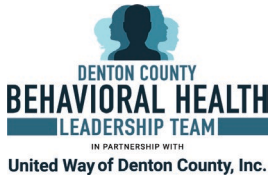
	Bastrop	Burnet	Caldwell	Fayette	Conzales	Guadalupe	Lee	Wilco	Bell	Hays	Upton	Milam	Travis	Total
FY 2024														
Sept	3	3	4	0	3	13	1	68	0	0	0	0	0	95
Oct	1	7	2	0	0	10	0	76	0	0	1	0	0	97
Nov	3	4	6	1	3	7	0	61	0	0	2	0	0	87
Dec	8	7	4	0	3	16	1	75	0	0	1	0	1	116
Jan	5	8	4	1	1	19	0	70	0	0	0	0	0	108
Feb	7	4	3	1	6	12	0	69	0	0	0	0	0	102
March	9	2	1	0	2	19	3	78	0	0	0	0	1	115
FY24 Total	36	35	24	3	18	96	5	497	0	0	4	0	2	720

WILCO LAW ENFORCEMENT REFERRAL SOURCES

	Austin PD - Wilco	Cedar Park PD	Georgetown PD	Hutto PD	Jannell PD	Leander PD	Liberty Hill PD	Round Rock PD	Taylor PD	WCISO	Total
FY 2024											
Sept	1	4	3	3	0	2	0	5	0	6	24
Oct	1	8	4	1	0	7	0	9	1	5	36
Nov	1	5	3	0	0	1	0	7	0	8	25
Dec	1	5	8	1	0	5	1	7	0	4	32
Jan	1	0	8	1	0	4	0	10	0	8	32
Feb	0	3	11	0	0	2	1	4	2	9	32
March	0	7	11	0	1	6	1	13	2	5	46
FY24 Total	5	32	48	6	1	27	3	55	5	45	227

Calculated Cost Savings (FY24 YTD):

Reduction in Days Incarcerated @ \$549/day x avg 5 days:	Uninsured private hospital diversions @ \$650/day x average 7 days:	Emergency department diversions @ \$1,917/day x 1 day:	Local Investment to Operate Diversion Center @ \$25,020/mo:	Total Estimated Local Cost Savings:
\$1,869,345	+ \$1,092,000	+ \$57,510	- \$175,140	= \$2,843,715



Williamson County, Bluebonnet Trails Community Services reporting dashboard, March 2024

MARCH 2024
WilCo Data Book

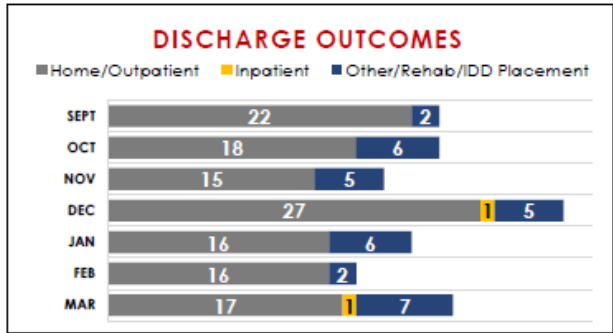
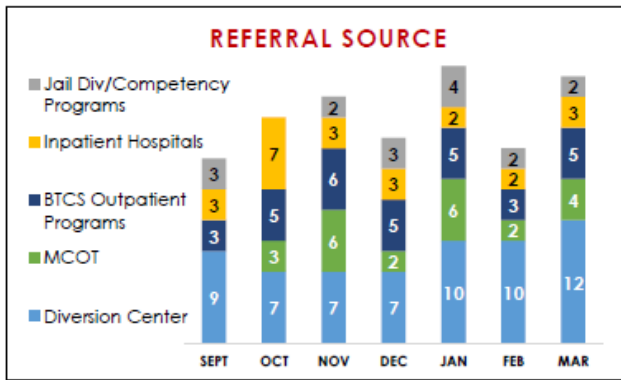
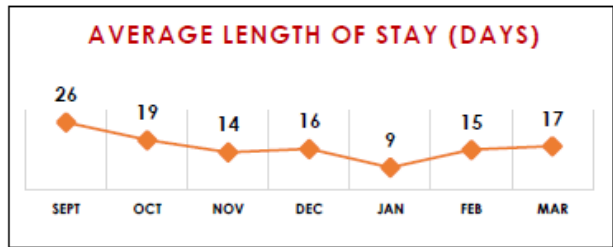
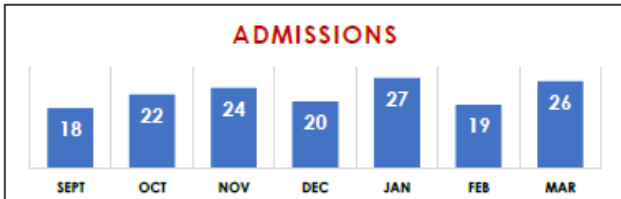
Adult Crisis Respite Unit (CRU)



911 MCOT YTR **CRU** Diversion PPB JBCR RWM Prevention

Purpose:

Our CRU is a 16-bed residential program in Georgetown offering an intermediate level of care for persons in or at risk of crisis. The CRU generally serves adults 18 & older and accepts voluntary & court-ordered admissions.



Cost Savings:

Calculated cost savings:

- Private Psychiatric hospital beds diverted @ \$625/day
- Jail bed days diverted @ \$549/day for persons with severe mental illness in the WilCo Jail
- State Hospital beds diverted @ \$791/bed (Austin State Hospital 2020 estimate per LBB projection)

Tarrant County Mental Health Jail Diversion Center Law Enforcement Referral Checklist

Tarrant County Mental Health Jail Diversion Center Law Enforcement Referral Checklist

The Tarrant County Mental Health Jail Diversion Center is available when Law Enforcement encounter people who are engaged in non-violent criminal behavior that could be related to mental health.

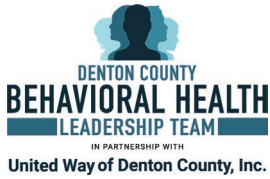
Checklist for who is appropriate:

- The person appears to be experiencing some type of mental health-related need.
- The person is willing to go to the Diversion Center.
- The person is an adult.
- The person does not need emergency medical attention.
- The person is not violent or suicidal at the time of the encounter.
- The person is likely to be arrested for a non-violent class A or B misdemeanor offense that is not related to a DWI.

(If you have questions regarding eligibility please call (817) 569-5967 and ask for a manager or team leader)

Process for completing referral:

- 1.) Call and let us know you are coming: **(817) 569-5967**
- 2.) Bring the person to this address: **812 W. Morphy St. Fort Worth, TX 76104**
- 3.) Staff will receive the patient as soon as you arrive and collect basic info (this takes five minutes or less).



Tarrant County Mental Health Jail Diversion Center, Officer Drop-off Form

TARRANT COUNTY MENTAL HEALTH JAIL DIVERSION CENTER

Officer Drop-Off Form

Please fill out what information you have available.

OFFICER INFORMATION

DATE: ___/___/___ TIME: _____ LEA: _____
OFFICER NAME: _____ BADGER: _____

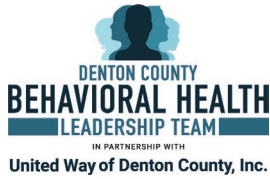
PARTICIPANT INFORMATION

LAST NAME: _____ FIRST NAME: _____ MI: _____
ALIAS: _____ DOB: ___/___/___ SSN: _____ SEX: M / F
AGE: ___ RACE: _____ ID#: _____
ARREST ADDRESS: _____
CITY: _____ STATE: _____ ZIP: _____ HOMELESS: Y / N
CELL PHONE: _____ ADDITIONAL PHONE: _____
EMAIL: _____
OBSERVED MENTAL HEALTH ISSUES:

CRIMINAL CHARGE DIVERTED:

- | | |
|--|--|
| <input type="checkbox"/> CRIMINAL TRESPASS | <input type="checkbox"/> FALSE REPORT |
| <input type="checkbox"/> MISDEMEANOR THEFT | <input type="checkbox"/> TERRORISTIC THREAT (WITH NO VIOLENCE) |
| <input type="checkbox"/> POSSESSION OF MARIJUANA | <input type="checkbox"/> OTHER: _____ |
| <input type="checkbox"/> DISORDERLY CONDUCT | _____ |

GENERAL DESCRIPTION OF PARTICIPANTS PROPERTY:



Tarrant County Mental Health Jail Diversion Center Overview

Tarrant County Mental Health Jail Diversion Center

What is it?

The Tarrant County Mental Health Jail Diversion Center will provide a recovery-oriented, short-stay alternative to incarceration for non-violent, justice-involved persons with mental health needs.

Who is eligible

Persons meeting all of the following criteria:

- Adults (18+)
- Brought in by law enforcement
- Believed to have a mental health issue
- Medically stable, and
- Involved in eligible, low-level, non-violent offenses as established by Tarrant County Criminal District Attorney's Office

Who is not eligible?

People in the following situations are not appropriate for the Diversion Center:

- Involved in violent offenses
- Experiencing a medical emergency
- Experiencing a mental health crisis needing hospitalization

How will it impact law enforcement and the Jail?

- Provide law enforcement with an additional alternative to address the needs of persons with mental health issues.
- Reduce arrests of persons with mental health needs on non-violent misdemeanor charges.
- Reduce filed criminal cases for Diversion Center participants.
- Reduce jail recidivism for Diversion Center participants.

How will it impact Tarrant County Hospital District?

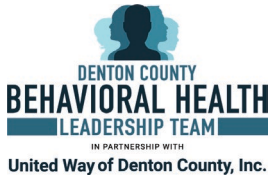
- Reduce police drop-offs to the psychiatric ER involving people with non-violent misdemeanor charges.

How will it benefit Diversion Center participants?

- Provide immediate mental health and primary healthcare interventions targeted to the unique needs of participants.
- Assess and engage participants with individualized wrap-around services to engage them in treatment after leaving the Diversion Center.
- Assess and connect participants with programs that address their needs—these may include connections to housing programs, benefits assistance, outreach to families, and other community programs

How will it be overseen?

An oversight committee will be established to oversee the Diversion Center and its effectiveness. Participants should include Tarrant County, MHMR of Tarrant County, Tarrant County Criminal District Attorney's Office, Tarrant County Sheriff's Office, Tarrant County Hospital District, and representatives from law enforcement.



Harris County Pilot Program Evaluation Plan, template

PILOT PROGRAM EVALUATION PLAN

PHASE 2: PLANNING
STEP 3: ESTABLISH AN IMPLEMENTATION PLAN FOR PILOTING THE PROGRAM

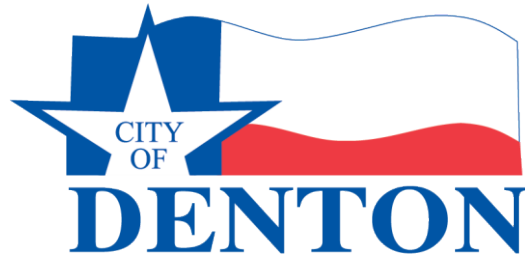
PROGRAM GOAL	PROCESS MEASURE	OUTCOME MEASURE	DATA SOURCE	REPORTING FREQUENCY	REPORTING STRATEGY



2026-2028

Denton County Housing and Homelessness Leadership Team Strategic Plan

A Collective Impact Project of:



Our Vision

Every person in Denton County has a place to call home that is safe, affordable, accessible and supported by community resources.

Our Mission

The Denton County Housing & Homelessness Leadership Team fosters an effective and coordinated system of homelessness prevention and intervention, resulting in homelessness that is rare, brief and nonrecurring through:

- Community Awareness & Connection
- Data-driven, evidenced-based, fiscally responsible recommendations
- Innovative solutions around affordable housing, access to primary and behavioral health care services, adequate incomes and coordinated services
- Mobilizing, advocating and empowering public-private community-wide collaboration

OUR COLLECTIVE IMPACT APPROACH

Common Agenda

- All participants **share a vision for change** that includes a common understanding of the problem and a joint approach to solving the problem through agreed-upon actions.

Shared Measurement

- All participating organizations **agree on the ways success will be measured and reported**, with a short list of common indicators identified and used for learning and improvement.

Mutually Reinforcing Activities

- A diverse set of stakeholders, typically across sectors, coordinate a set of differentiated activities through a **mutually reinforcing plan of action**.

Continuous Communication

- All players engage in **frequent and structured open communication** to build trust, assure mutual objectives, and create common motivation.

Backbone Support

- An **independent, funded staff dedicated to the initiative** provides ongoing support by guiding the initiative's vision and strategy, supporting aligned activities, establishing shared measurement practices, building public will, advancing policy, and mobilizing resources.

OUR COLLECTIVE IMPACT APPROACH



DENTON COUNTY HOUSING AND HOMELESSNESS LEADERSHIP TEAM

APPOINTEES

Quasi-governmental, strategic planning body of county leaders

City of Denton	City of Lewisville	Denton County Commissioners Court	Small Cities/Towns	Housing Homelessness Providers	Health Care Providers	Higher Education Institutions	United Way of Denton County	Workforce/ Business Development
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WORKGROUPS

Working Groups determine strategic direction, develop implementation plans, and identify measurement indicators.

The work groups/subcommittees of the DCHHLT are defined by the DCHHLT as deemed appropriate and necessary.

Data	Diversion	Healthcare	Housing	Cross Care Collaborative w/DCBHLT	OTHERS AS NEEDED	OTHERS AS NEEDED
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WHO WE SERVE



PEOPLE EXPERIENCING AND AT-RISK OF HOMELESSNESS ([Department Of Housing And Urban Development or HUD](#))

CATEGORY 1: Chronic/Literal

People who are living in a place not meant for human habitation, in emergency shelter, in transitional housing, or are exiting an institution where they temporarily resided.

CATEGORY 2: At-Risk

People who are losing their primary nighttime residence, which may include a motel or hotel or a doubled-up situation, within 14 days.

- May include Cost Burdened Families: Families who pay more than 30 percent of their income for housing are considered cost burdened and may have difficulty affording necessities such as food, clothing, transportation and medical care. An estimated 12 million renter and homeowner households now pay more than 50 percent of their annual incomes for housing. A family with one full-time worker earning the minimum wage cannot afford the local fair market rent for a two-bedroom apartment anywhere in the United States.

CATEGORY 3: Youth

Families with children or unaccompanied youth who are unstably housed and likely to continue in that state.

CATEGORY 4: Domestic Violence

People who are fleeing or attempting to flee domestic violence, have no other residence, and lack the resources or support networks to obtain other permanent housing.

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WHAT WE MEASURE



High-quality data is crucial for assessing community progress in ending homelessness. Performance metrics allow for evaluating the effectiveness of a Housing Crisis Response System in achieving its goals. Implementing a Coordinated Entry System in Denton County will improve data collection on homelessness. Regular monitoring of these metrics will help identify service gaps and focus collective efforts.

SYSTEM PERFORMANCE

- **Number** – Reduce number of people experiencing homelessness
- **Length** – Reduce the length of time households are enrolled in emergency shelter and transitional housing experiencing homelessness.
- **First Time Homeless** – Reduce the number of persons who become homeless for the first time
- **Recidivism** – Reduce the number of people who return to homelessness after receiving permanent housing
- **Barriers** – Increase access to housing through a variety of successful housing placement options
- **Income** – Increase income of homeless adults being served
- **Outreach** – Identify vulnerable populations

WHAT WE HAVE ACCOMPLISHED



✓ Increased doors for Denton County

- Increased portfolio of private landlords to reduce housing barriers, total of 48
- Partnered with Housing Connectors to provide rental protection and risk mitigation for landlords
- Provide Landlord Engagement education and recruitment to GLAR
- Housed 340 individuals and families experiencing homelessness

✓ Diversion progress into the Housing Crisis Response System

- All agencies trained in HMIS Diversion workflow
- \$50,000 new Diversion funding for HPL 0-3 from CCA
- \$10,000 new Diversion funding for shelter and street outreach from City of Denton

✓ Healthcare

- Drafted healthcare rubric to identify system navigation process and to divert from shelter

WHAT WE HAVE ACCOMPLISHED



- ✓ **Supported The Denton County Homeless Coalition**
 - 20th year of completing the Point in Time Count
 - Increased community engagement for volunteerism and State of Homelessness attendance
 - Nonprofit status confirmed, officially coined The Path Home as new name
- ✓ **Cross Care Collaboration**
 - Preliminary data collected high utilizers of multiple systems; law enforcement, court records, and behavioral health

STRATEGIC FOCUS - SWOT ANALYSIS



Strengths	Weaknesses	Opportunities	Threats
<p>Collaboration and networking across all sectors, including committed civic leaders and community engagement.</p>	<p>Limited resources, including housing and data, funding constraints (e.g., federal HUD funding not competitive, agency capacity issues, equity concerns, and unbalanced investments).</p>	<p>Improvement and expansion of services, through training, facilitation process improvements, multi-disciplinary use, and sustainable funding support.</p>	<p>Funding and resource limitations, with expected decreases in federal (HUD- RRH & PSH/SNAP) and state funding, and HUD prioritization for CoC grant funding. Impact to how nonprofit organizations can assist financially.</p>
<p>Resource Communication/ Information sharing, including case manager participation, completed data dashboard, and networking for resources and funding.</p>	<p>Systemic issues, such as staff changes, program changes, systemic concerns regarding capacity, and the need for more competitive federal funding (ESG). Lack of visibility of problem/collaborative benefit to key partners such as health care providers.</p>	<p>Increased engagement and support, leveraging opportunities for increased advocacy at higher levels of government, public awareness, involvement, and demonstrating effective use of funds. Change management of communication during changes</p>	<p>External and environmental challenges, such as population growth exceeding resource accessibility, transportation limitations, and potential for increased demand from economic factors or future disasters. Administration priority changes. Infrastructure challenges; impacts visibility/no where to be homeless. Govt shutdown.</p>
<p>Integration into systems, such as the Housing Crisis Response System and public/private partnerships.</p>	<p>Planning and goal-setting stages still underway for several groups, indicating a lack of current goals or clear direction in some areas.</p>	<p>Strategic planning for growth, including population growth preparedness, disaster planning lessons from COVID, and faith-based organization engagement. Improved communication across agencies for grant/program expansion</p>	<p>Systemic and operational inefficiencies, including financial inefficiencies, program effectiveness concerns, duplication of services, and challenges in communicating unmet needs to the public.</p>
<p>Goal-oriented initiatives, with all workgroups contributing to specific goals and actionable items with metrics.</p>	<p>Housing Stability remains to be a systemic need, funding for supportive services, expansion of wraparound services to decrease recidivism.</p>	<p>Enhancing data and assessment capabilities to inform priorities, structure, and assess the impact of initiatives.</p>	<p>Potential recommendations: Be aware of organizational programs to build together and enhance effectiveness- workgroup of leaders recommendation</p>

EXECUTIVE SUMMARY

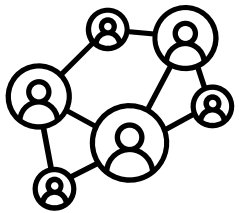


The Denton County Housing and Homelessness Leadership Team's (HHLT) Strategic Plan Draft for **2026-2028** outlines a comprehensive approach to addressing homelessness through a series of goals, objectives, strategies and recommended actions.

These action items are designed to support the overarching mission of fostering an effective and coordinated system of homelessness prevention and intervention, with the vision of ensuring that every person in Denton County has a safe, affordable place to call home.

Strategic Plan for Reducing Homelessness

Community Wide Goals for Measurable Impacts 2026-2028



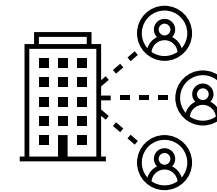
Diversion & Prevention

- Diversion Workflow Training
- Data Dashboard: Diversion
- Continuum of Care expansion: DCMHJDC Pilot



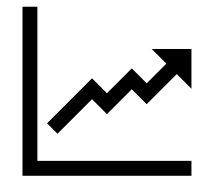
Housing Response

- Update System Mapping
- Integrate Diversion into Case Conferencing
- Increase system users to expand knowledge of resources



Engage & Collaborate

- Increase Public - Private Partnerships
- Evaluating CoC participation
- Create & Implement Advocacy Plan



Housing Supports

- Prepare for HUD reprioritization transition
- Maximize partnerships with organizations that provide stabilizing services
- Integrate advocacy for funding

COMMON TERMS/ABBREVIATIONS



Federal System Structure

- **Balance of State (BoS)** – Texas’s largest CoC. The Texas Balance of State CoC is made up of all service providers, advocates, local government officials, and citizens who work to eliminate homelessness in over 213 counties in Texas outside of most major metropolitan cities. DCHC is a member. Texas Homeless Network (THN) serves as the CoC lead agency, HMIS administrator and the applicant for the HUD Continuum of Care (CoC) Program for the Balance of State.
- **Continuum of Care (CoC)** – CoC’s are authorized by HUD, CoC’s are designed to promote communitywide commitment to the goal of ending homelessness. CoC’s apply to HUD and are awarded CoC grants that then provide funding for efforts by nonprofit providers, state, and local governments to end homelessness.
- **US Department of Housing and Urban Development (HUD)** – One of the many things offered by HUD are grants and programs related to the topic of homelessness.

Grants – List of some grant programs (not all inclusive):

- COD – City of Denton Human Services Grant
- ESG – Emergency Solution Grant
- EFSP – Emergency Food and Shelter Program
- SHP – Supportive Housing Grant
- CoC – Continuum of Care Grants

Programs – List of some homeless program types (not all inclusive):

- **Affordable Housing** – Defined as paying 30% or less than an individual’s income for housing.
- **Coordinated Entry** – Process used in communities to streamline access, assessment, and referral process for housing and other services across agencies in a community. In a coordinated system, each system entry point (‘Front Door’) uses the same assessment/intake tool and makes decisions on which programs families are referred based on a comprehensive understanding of each program’s specific requirements, target population, and available beds and services.

COMMON TERMS/ABBREVIATIONS



Emergency Shelter – Shelter provided to address the immediate needs of homeless persons living on the street by providing temporary housing.

Diversion – Diversion is a strategy that prevents homelessness for people seeking shelter by helping them identify immediate alternate housing arrangements and, if necessary, connecting them with services and financial assistance to help them return to permanent housing.

Housing Inventory Count (HIC) – The Housing Inventory Count (HIC) is a point-in-time inventory of provider programs within a Continuum of Care that provide beds and units dedicated to serve persons who are homeless, categorized by five Program Types: Emergency Shelter; Transitional Housing; Rapid Re-housing; Safe Haven; and Permanent Supportive Housing.

Homeless Management Information System (HMIS) – HMIS tracks the data regarding the homeless and services provided.

Homelessness Prevention (HP) – Short- and/or medium-term rental assistance provided to prevent an individual or family from moving into an emergency shelter or another place not fit for human habitation.

Housing Choice Voucher (HCV) – Formerly known as Section 8 Vouchers; federally funded housing voucher for low-income individuals and families; administered locally by the Denton Housing Authority

Housing Crisis Response System (HCRS) – An effective HCRS identifies all people experiencing or at risk of experiencing homelessness across the community, prevents homelessness whenever possible, provides immediate access through coordinated entry to shelter and crisis services without barriers to entry, as stable housing and supports are being secured, and quickly connects people who experience homelessness to housing assistance and/or services tailored to the unique strengths and needs of households and which enable them to achieve and maintain permanent housing.

Housing First – Housing First is an approach to quickly and successfully connect individuals and families experiencing homelessness to permanent housing without preconditions and barriers to entry, such as sobriety, treatment or service participation requirements. Supportive services are offered to maximize housing stability and prevent returns to homelessness as opposed to addressing predetermined treatment goals prior to permanent housing entry.

Housing Priority List (HPL) – List of individuals and families who have been assessed using the VI-SPDAT in HMIS and are waiting to be connected to a permanent housing solution

COMMON TERMS/ABBREVIATIONS



Low-Barrier – Housing solutions that requires a minimum number of expectations of the people who wish to be placed there.

Point-In-Time (PIT) Count – A count of sheltered and unsheltered homeless persons on a single night in January. HUD requires that Continuums of Care conduct an annual count of homeless persons who are sheltered in emergency shelter, transitional housing, and Safe Havens on a single night. Continuums of Care also must conduct a count of unsheltered homeless persons every other year (odd numbered years). Each count is planned, coordinated, and carried out locally.

Permanent Supportive Housing (PSH) – Housing for people who need long-term housing assistance with supportive services to stay housed.

Rapid Re-Housing (RRH) – Housing relocation and stabilization services and assistance provided to help a homeless individual or family move as quickly as possible into permanent housing and achieve stability in that housing.

Social Security Disability Insurance (SSDI) – Monthly benefit for people who are living with a disability

Supplemental Security Income (SSI) – Monthly benefit program for people with little income who are also living with a disability

Supportive Housing (SH) and Transitional Housing (TH) – Housing that is provided with case management designed to help client achieve self-sufficiency and exit the program over a determined amount of time

Street Outreach – Essential services and outreach provided to unsheltered homeless people on the street

Veteran Affairs Supportive Housing (VASH) – Combination of Housing Choice Voucher rental assistance and individualized case management services for Veterans experiencing homelessness

VI-SPDAT – The VI-SPDAT is a pre-screening, or triage tool that is designed to be used by all providers within a community to quickly assess the health and social needs of homeless persons and match them with the most appropriate support and housing interventions that are available

Wrap-Around Services – Community based, client centered approach to provide other supportive services as available and as needed for clients to maintain housing stability. Wrap-Around Services might include: Health Care, Child Care, Substance Use Treatment, Mental Health Care, Education, Employment, Legal Services, Counseling, Transportation, etc.