



Dear Sunset Commission members,

On behalf of the Texas Office for Prevention of Developmental Disabilities, we would like to thank you for your work. The Sunset report, released on October 3, 2014, addressed many important issues for the people of the State of Texas on the Texas Health and Human Services Commission. The Sunset staff noted the agency's reactionary nature which has made little progress in the prevention of various problems facing Texans. It is obvious that most of the budget drivers of HHSC are linked to issues that are indeed preventable including substance abuse; poor nutrition and health practices of pregnant women; and child maltreatment and associated mental illness. As an Office that is exclusively focused on prevention, our work encompasses preventing disabilities before they occur and the prevention of secondary disabilities through early intervention. Our goals clearly align with the Sunset Committee's recommendations of improving efficiency, collaboration, and efficacy.

A recent survey conducted by the Meadows Mental Health Policy Institute indicated that early intervention and prevention was the top policy issue related to children. To achieve this goal, TOPDD believes that all state agencies must make prevention the centerpiece of their efforts. Prevention touches all aspects of HHSC and beyond, including criminal justice, education, and economic development. When people think of prevention, they often think of a "program". However, prevention is far more than a program. Coordinated prevention efforts that are integrated throughout every health and human services initiative can deliver improved health outcomes and costs savings. An intentional paradigm shift towards prevention and health promotion will result in a more efficient and effective HHSC.

Throughout the years, TOPDD has mobilized thousands of Texans to become active in the prevention of developmental disabilities. Considering the size of TOPDD's staff, it is amazing that it has been the catalyst for rule making for the state; system wide training for CPS caseworkers; the development of a statewide training network; and the application of model prevention programs at treatment centers. Its growing work in the area of mental health of children with developmental disabilities is extremely important for the state. We seek to build on these successes and share the Sunset staff's passion for developing more proactive systems of care that work upstream, save tax payer money, are effective, and improve the health and well-being of all Texans.

The authors of the legislation that established The Texas Office for Prevention of Developmental Disabilities were incredible forward thinkers. They established a public-private partnership and required the Office to raise funds--a highly innovative model for that time. This model has allowed TOPDD to secure resources to work across systems and mobilize professionals to advance the state's knowledge of prevention and intervention.



Currently, TOPDD is involved in prevalence research that will be ground breaking for Texas and the nation. The success of this research has the potential to pave the way to bring millions of federal dollars to Texas. TOPDD has been largely self-sustaining and has funded important prevention work in partnership with non-profits in Texas. Through the newly formed HHSC, TOPDD seeks to embrace new opportunities to deepen its penetration across systems. The time is now.

Thank you in advance for reviewing the attached pages which provide the perspective of the Executive Committee on the Sunset report. Please feel free to contact me with any questions.

Sincerely,



Richard Garnett, Chairperson  
CC: Executive Committee members

#### TOPDD Executive Committee

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## **Texas Office for Prevention of Developmental Disabilities 2014 Response to the Sunset Staff Report**

### **Issue 1.1 Component 2: Establish divisions along functional lines as the basic organizational framework for the consolidated agency.**

*"This recommendation would... remove structural components for entities that are administratively attached to the system to allow the executive commissioner flexibility to assign these functions appropriate areas of the agency...The functions of these entities would remain in statute, but any structural components, such as administrative attachment, governing boards or appointment structure, or status as an independent entity would be removed." (pg. 35)<sup>1</sup>*

It is important to keep in mind why TOPDD was given its unique structure which was twofold: to allow it the independence necessary for policy work across HHSC and beyond, and to facilitate its ability to leverage external funding. TOPDD continues to require this structure for the same reasons.

There are challenges related to subsuming TOPDD under HHSC and eliminating the Executive Committee that we would like to highlight for your consideration:

- The recommendation would hinder TOPDD in achieving its mission. As required through statute, much of TOPDD's work is related to policy. By becoming subsumed under HHSC, TOPDD will lose its ability to remain objective. All of its decisions, positions and priorities will be through the bureaucracy of what will be one of the largest state agencies in the nation. This will hinder its ability to move swiftly and efficiently, which is critical in this changing health care system.
- While the Sunset recommendations provides for the continuation of TOPDD's functions, it does not provide for the continued existence of the Office. Subsuming TOPDD under HHSC would hinder its ability to raise funds in the future. Generally, private foundations do not fund government agencies. TOPDD's status as a public-private entity has been an extremely important asset in overcoming this challenge. Current funding commitments are contracted to TOPDD. If no such entity exists, the funding will discontinue. This change would result in the loss of funds for the state.
- Subsuming TOPDD under HHSC will increase overall costs and create an unnecessary burden. Currently TOPDD relies on a volunteer Executive Committee for major decisions and uses its staff for day to day operations. If TOPDD is subsumed under HHSC, it will need to go through the "chain of command" for decisions that are currently made through the volunteer Executive Committee. Using capable volunteers instead of staff is cost efficient and effective. Clearly, in the 25 years of the history of TOPDD, no problems have arisen from its independence.
- The report articulates concerns around "fragmentation, divided administrative oversight, customer service difficulties, and unnecessary expenses". TOPDD's experience in working across systems along with its expansive network of active volunteers will be major assets in addressing these concerns. Its structure ensures that it is responsive to the needs of the public because the public oversees it directly.
- The HHSC has historically provided 20% of TOPDD's funding. It seems reasonable that the Executive Committee, which has facilitated 80% of the funding, be continued.

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<sup>1</sup> Sunset Advisory Commission. (2014, October). *Health and Human Services Commission and systems issues* (Sunset Advisory Commission, Author). Austin, TX



TOPDD understands and appreciates the intent of the Sunset Commission and this report. It would like to offer some recommendations to address some of the issues raised in the report:

**CONCERN RAISED IN REPORT: Ensure that the Executive Commissioner be connected to all entities under HHSC.**

**TOPDD'S RECOMMENDATION**

- The TOPDD executive committee would be expanded to *include two appointments by the Executive Commissioner*. TOPDD will continue to be administratively attached to HHSC and overseen by an executive committee. This will improve the link of TOPDD with the Executive Commissioner without diminishing its ability to fulfill its mission or raise outside funds.
- Create a specific, *dotted line relationship of TOPDD with the proposed "Office of Policy and Performance"*. This would be in keeping with the priority identified in TOPDD's rider "A1.1 Enterprise Oversight and Policy". This relationship will: 1) Facilitate a closer relationship with the Executive Commissioner, 2.) Address TOPDD's need to work across the entire system, in a coordinated effort, 3.) Identify opportunities for system wide prevention/health promotion, and 4.) Arrange for new opportunities for TOPDD to work with HHSC to provide unified messaging across systems and to the public about the culture of health promotion that the HHSC is committed to within the agency and across the state.

There are incredible opportunities through the new Medicaid managed care systems, women's health services, behavioral health services, public health services, home visiting programs, child protective services, etc. to provide research based prevention messaging and intervention to the public. TOPDD seeks to expand its ability to create cost savings and views the reorganization as an opportunity to achieve that goal.

**CONCERN RAISED IN REPORT: There is a need for a more functional approach to health and human services. The report recommends organizing HHSC by functional areas.**

**TOPDD'S RECOMMENDATION**

TOPDD recommends that it becomes renamed "*The Texas Prevention Center*" and that the language of its statute be revised to reflect that the work of the Office no longer be limited to the prevention of developmental disabilities.

The HHSC needs a prevention system and a coordinated, state-wide strategy on prevention that builds on the strengths of HHSC. Prevention is incredibly fragmented on a state and local level. Current prevention efforts across agencies address: substance abuse, suicide, family violence, bullying, teen pregnancy, child abuse, injury prevention, etc. While we understand that the Sunset Staff report recommends placing many prevention efforts under the child and protective services function, it would be impossible to place all prevention entities under this function. Additionally, there are prevention opportunities that go beyond the limits of the current entities charged with prevention. For this reason, HHSC system wide prevention opportunities can be better harnessed through "The Texas Prevention Center".

**CONCERN RAISED BY REPORT: The burden of the numerous legislative reports that HHSC is required to provide. It eliminates most of these reports.**



### TOPDD'S RECOMMENDATION

*Eliminate one of the reports required of TOPDD.* TOPDD is legislatively required to provide two reports to the legislature, the governor, lieutenant governor, speaker of the House and commissioner of HHSC. The Biannual Disability Report is done in collaboration with the Texas Council on Developmental Disabilities; the other report is independent TOPDD. Producing two reports places a burden on the small staff and is inefficient. TOPDD recommends *the elimination of the report* that is done in collaboration with Texas Council on Developmental Disabilities to focus its efforts into a *single report*.

### **Additional comments:**

TOPDD would like to take the opportunity to applaud the Staff of the Sunset Commission for acknowledging staggering transfers "*so that problems that occur are kept manageable and do not overwhelm the system with simultaneous change*" (pg. 54). It is important to recognize the magnitude of the changes being proposed and to make every effort to avoid disrupting life-saving services while implementing such sweeping system wide changes.

Although the report recommends the abolishment of advisory committees, it seems to value the input given by the community members who participated on them. One of the unique values of including community involvement in planning processes is that community leaders see through the lens of individuals rather than systems. If the advisory groups are to be eliminated, TOPDD recommends that the transition committee identify opportunities for community members to participate directly in HHSC planning activities.

### **Closing remarks:**

Thank you for your leadership in reviewing HHSC. We look forward to your feedback about the concepts that we have put forth.

