

Access Challenges: Inpatient Psychiatric Care

Due to the growing use of state hospital beds for forensic commitments and substantial decline of civil commitment capacity, people with serious mental illness are not able to obtain ready access to clinically appropriate inpatient care.

Addressing this challenge requires continued community and legislative effort.

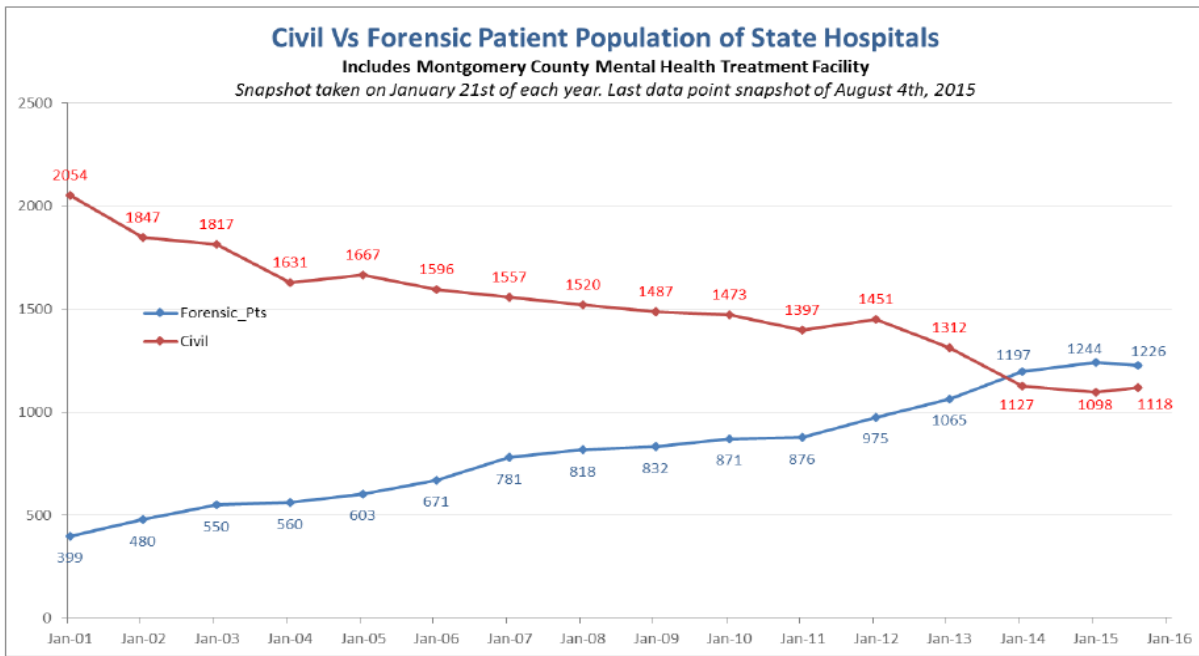
Forensic Commitments Yield Longer Lengths of Stay

According to DSHS, in 2001, 16% of State Hospital admissions were for forensic commitments. Today, forensic commitments exceed 52%.

— Putting it in Perspective —
Population and Available Inpatient State Hospital Beds

1964
 State Population: 10.3 million
 State Inpatient Beds: 14,921

2016
 State Population: 28.2 million
 State Inpatient Beds: 3,013



What are “Civil” and “Forensic” commitments?

<u>Types</u>	<u>Admission Categories</u>	<u>Who Is Involved?</u>	<u>Criteria</u>
<u>Civil</u>	Peace Officer Emergency Detention, Orders of Protective Custody , Court Ordered Temporary Mental Health Services, Court Ordered Extended Mental Health Services.	Magistrates, Peace Officers, LMHAs, Adult Relatives/Guardians, admitting physician, treatment team	Symptoms of mental illness resulting in danger to self or others
<u>Forensic</u>	Awaiting adjudication competency restoration , post-adjudication NGRI .	Courts, Judges, Juries, LMHAs, treatment team	Charged with a crime; NGRI

KEY POINT: Support HHSC Base Funding and Exceptional Items to increase maximum security capacity at State Hospitals and to increase contracted community psychiatric beds.