

# ELIMINATE the WAIT

## What is Health and Human Services doing to Eliminate the Wait for Competency Restoration Services?

*While a full array of community-based services can reduce the need for inpatient care, the Texas Health and Human Services Commission's (HHSC) State Hospital System (SHS) is a critical component of the behavioral health continuum of care, providing inpatient psychiatric care to adults in nine of its state psychiatric hospitals. The state hospitals serve people with various mental health (MH) needs, including forensic patients who have been determined to be incompetent to stand trial or acquitted as not guilty by reason of insanity, and civil patients who are at risk of harming themselves or others or at risk of significant deterioration. HHSC is working to transform and modernize the delivery of inpatient psychiatric care and services at the state hospitals through several major initiatives, including expanding state hospital capacity and renovating and replacing the state hospital infrastructure. In addition, HHSC has prioritized efforts to transform the delivery of inpatient psychiatric forensic care and services by implementing strategies that achieve treatment and operational efficiencies and change.*

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### State Hospital System Initiatives

The SHS is implementing initiatives that will improve the efficiency and quality of the delivery of forensic services within the SHS while enhancing collaboration with external stakeholders. As described below, these initiatives use a variety of strategies that have direct and/or indirect impacts on the SHS's waitlist and/or forensic patient lengths of stay.

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### Collaboration and Coordination

#### *Waitlist and Admissions Management*

Collaborating with stakeholders across the behavioral health and justice continuum of care to actively manage the forensic waitlist to:

- identify individuals committed to the SHS who may benefit from alternative dispositions [e.g. individuals with neurocognitive disorders (dementia), Intellectual and Developmental Disabilities (IDD) diagnoses, medical comorbidities, or found not likely to restore within the foreseeable future], and
- educate, coordinate and provide technical assistance, including the evaluation of cases, to jail staff, district attorneys, defense counsel, and the judiciary, as needed.

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#### *Jail In-Reach Learning Collaborative*

Educating and collaborating with external stakeholder community-based teams to support active forensic waitlist monitoring of individuals awaiting in jail for state hospital admission and court-ordered competency restoration through:

- clinical consultation services that may assist with psychiatric stabilization,
- trial competency re-evaluations in the event of immediate restoration while awaiting state hospital transfer,
- legal education on options for alternative case dispositions, and
- enhanced continuity of care following an individual's restoration to competency and return to jail to prevent clinical decompensation and unnecessary rehospitalization.
- Our Partners: Local mental Health Authorities, Local Behavioral Health Authorities, judges, prosecutors, defense attorneys, sheriffs, jail administrators, jail psychiatric providers, and the Judicial Commission on Mental Health's Community Diversion Coordinators across 13 counties.

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## Enhancing the Delivery, Quality, and Efficiency of Competency Restoration Services

### *Competency Restoration Curriculum Standardization*

The SHS is developing a simplified and standardized competency restoration curriculum for use at all state hospitals to improve treatment efficiencies and patient movement through the competency restoration process.

### *Outpatient Management Plan Quality Improvement Initiative*

The outpatient management plan (OMP) is a document presented to the court that is used to prescribe the services, supports and requirements a patient must adhere to when transitioning from the SHS to the community. The SHS has developed a simplified and standardized OMP to improve the quality of the plans so that a greater number are approved by the court on the first submission.

### *Trial Competency Examination Quality Improvement Initiative*

To enhance how trial competency evaluations (TCE) are conducted in the SHS, this initiative includes:

- developing and implementing a standard report form that allows for the SHS to extract necessary forensic data found in the TCEs,
- developing an enhanced pool of qualified forensic evaluators in the SHS by implementing an evaluator registry, and
- implementing a TCE peer review process to improve the quality of TCEs completed in the SHS.

### *State Hospital System Forensic Treatment Data Enhancement*

The SHS has been implementing mechanisms for reporting and collecting accurate forensic-related data, including data from a standardized clinical screening of competency, to help make data-informed decisions and develop data-informed interventions for the continuous quality improvement efforts in the delivery of forensic treatment services.

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## Additional Resources:

[Outpatient Management Plans: Creating a Statewide Approach for Successful Not Guilty by Reason of Insanity \(NGRI\) Transitions to Community Living \(webinar\)](#)

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