



Semi-Annual Reporting of Waiting Lists for Mental Health Services

As Required by

**2022-2023 General Appropriations Act,
Senate Bill 1, 87th Legislature, Regular
Session, 2021**

(Article II, HHSC, Rider 50)

Health and Human Services

Commission

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1. Introduction

The *Semi-Annual Reporting of Waiting Lists for Mental Health Services* report meets requirements in the 2022-23 General Appropriations Act, Senate Bill (S.B.) 1, 87th Legislature, Regular Session, 2021 (Article II, Health and Human Services Commission [HHSC], Rider 50). This rider requires HHSC to report semi-annually to the Legislative Budget Board and Governor regarding waiting lists for mental health services.

Rider 50 requires the report to include waiting list and expenditure data for community mental health services for adults and children, forensic state hospital beds, and maximum security forensic state hospital beds for each local mental health authority and local behavioral health authority (LMHA/LBHA), state facility, and contracted entity. Required data include:

- Number of people waiting for all services;
- Number of underserved¹ people waiting for additional services;
- Number of people removed from the waiting list;
- Funds expended to remove people from the waiting list in the third and fourth quarters of fiscal year 2021;
- Average number of days on a waiting list; and
- Whether waiting lists are due to operational or other short-term factors; or long-term issues, such as insufficient capacity.

Data Context and Limitations

The community mental health waiting list is a point-in-time calculation of the total number of people waiting for mental health services during the last month of the respective quarter of fiscal year 2021, May 2021 for the third quarter, and August 2021 for the fourth quarter. During any given reporting period, the list will change as people are added or removed daily for various reasons (e.g., admitted to

¹ Term used to designate persons who received a lower level of care than recommended based on assessment scores.

services, no longer interested in services, receiving services elsewhere, no longer able to be contacted).

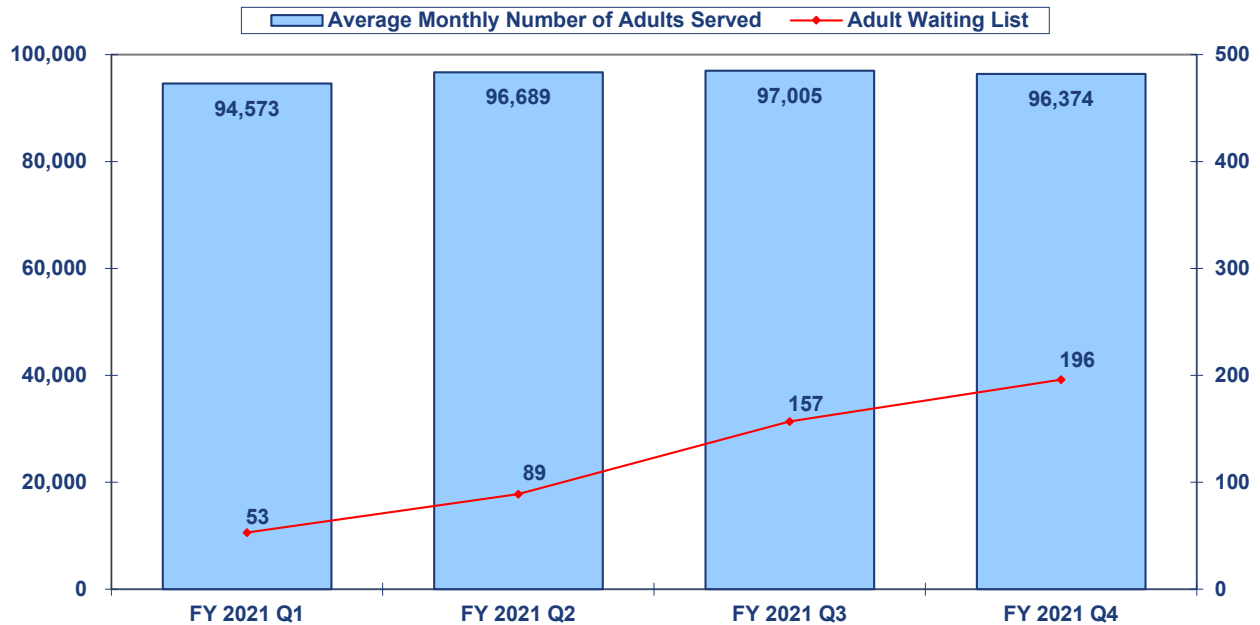
HHSC anticipates additional funding associated with waiting list reduction which would increase numbers served and reduce the waiting list. However, if demand increases beyond the total funded capacity for community mental health services, a waiting list may remain despite the effective use of additional funding and LMHA/LBHA's success in meeting its contracted targets.

2. Adult and Children's Community Mental Health Services Waiting List Data

Adult Community Mental Health Services

The following chart compares the average monthly number of adults served and the adult waiting list for fiscal year 2021 by fiscal year quarter.²

Chart 1. Adult Community Mental Health Waiting List³



² Source: Client Assignment Registration system as of September 21, 2021.

³ Figures are Average Monthly Number of Adults Served per Legislative Budget Board performance measures. The adult waiting list is the number of adults waiting for all services in the last month of the fiscal quarter.

Tables 1 and 2 show the required report elements for the community mental health services waiting list for adults.

Table 1. Number of Adults Waiting for All Services or Removed from the Waiting List, and Average Days Adults Were on a Waiting List⁴

LMHA/LBHA	No. Waiting for All Services		No. Removed from Waiting List		Average No. of Days on Waiting List	
	Q3	Q4	Q3	Q4	Q3	Q4
Camino Real Community Services	79	132	2	6	40	77
Community Healthcore	3	0	1	0	69	0
Heart of Texas Regional MHMR Center	29	8	1	4	127	181
MHMR Authority of Brazos Valley	46	56	1	0	84	138
Tri-County Behavioral Healthcare	0	0	1	0	76	0
Total	157	196	6	10	79	132

⁴ Figures indicate data for LMHAs/LBHAs with a waiting list in the last month of the fiscal quarter.

Table 2. Number of Underserved Adults Waiting for Additional Services by an LMHA/LBHA

LMHA/LBHA ⁵	No. of Underserved Adults ⁶	
	Q3	Q4
Anderson/Cherokee Community Enrichment Services	0	1
Andrews Center	29	33
Austin Travis County Integral Care	254	243
Behavioral Health Center of Nueces County	57	42
Betty Hardwick Center	12	13
Bluebonnet Trails Community Services	2	1
Border Region Behavioral Health Center	38	37
Camino Real Community Services	7	5
Center for Health Care Services	37	28
Center for Life Resources	53	51
Central Counties Services	5	3
Coastal Plains Community Center	0	1
Denton County MHMR Center	9	15
Emergence Health Network	14	14
Gulf Bend Center	11	8
Gulf Coast Center	11	13
Heart of Texas Regional MHMR Center	2	2
Hill Country MH and DD Center	2	0
MHMR Authority of Brazos Valley	61	78
Pecan Valley Centers	27	54
Spindletop Center	27	36
StarCare Specialty Health System	119	144
Texoma Community Center	1	0
Tri-County Behavioral Healthcare	76	78
Tropical Texas Behavioral Health	258	272
West Texas Centers	3	0
Total	1,115	1,172

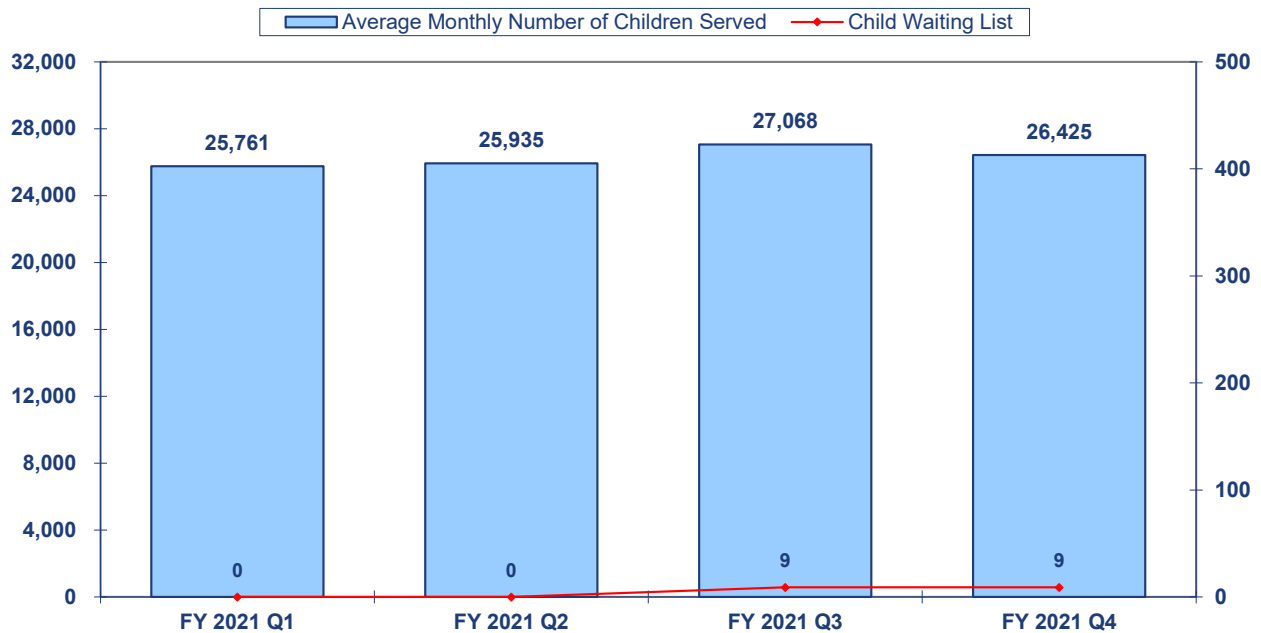
⁵ Includes LMHAs/LBHAs with underserved adults in the last month of the fiscal quarter.

⁶ Data does not include persons in a lower level of care due to "consumer refused."

Children's Community Mental Health Services

The following chart compares the average monthly number of children served and children's waiting list for fiscal year 2021 by fiscal year quarter.⁷

Chart 2. Children's Community Mental Health Waiting List Trend⁸



⁷ Source: Client Assignment Registration system as of September 21, 2021.

⁸ Figures are Average Monthly Number of Children Served per Legislative Budget Board performance measures. The child waiting list is the number of children waiting for all services in the last month of the fiscal quarter.

Tables 3 and 4 show required report elements for the community mental health services waiting list for children.

Table 3. Number of Children Waiting for All Services or Removed from the Waiting List and Average Days Children Were on a Waiting List⁹

LMHA/LBHA	No. Waiting for All Services		No. Removed from Waiting List		Average No. of Days on Waiting List	
	Q3	Q4	Q3	Q4	Q3	Q4
Camino Real Community Services	9	9	0	0	45	99
Total	9	9	0	0	45	99

Table 4. Number of Underserved Children Waiting for Additional Services by LMHA/LBHA

LMHA/LBHA ¹⁰	No. Underserved ¹¹	
	Q3	Q4
Andrews Center	1	2
Austin Travis County Integral Care	0	1
Behavioral Health Center of Nueces County	30	12
Bluebonnet Trails Community Services	30	10
Burke Center	0	3
Community Healthcore	26	53
Denton County MHMR Center	1	0
Helen Farabee Centers	0	1
MHMR Authority of Brazos Valley	0	2
Pecan Valley Centers	25	12
Permian Basin Community Centers	0	1
Texoma Community Center	2	1
Tropical Texas Behavioral Health	71	72
Total	186	170

⁹ Figures indicate data for only LMHA with a waiting list in the last month of the fiscal quarter.

¹⁰ Includes LMHAs/LBHAs with underserved children in the last month of the fiscal quarter.

¹¹ Data does not include children in a lower level of care due to "consumer refused."

Funds Expended to Remove Individuals on the Waiting Lists

The 2020-21 General Appropriations Act, H.B. 1, 86th Legislature, Regular Session, 2019 (Article II, HHSC, Rider 63) appropriated \$59,055,770 to address waiting lists and increase outpatient mental health treatment capacity at the LMHAs and LBHAs. HHSC has fully allocated these funds among LMHAs and LBHAs, encumbered the funds onto their contracts, and distributed all state fiscal year 2020 and 2021 outpatient funds.

Factors Impacting Community Mental Health Waiting Lists for Adults and Children

The LMHAs/LBHAs with waiting lists faced workforce shortages, including challenges in recruiting and retaining psychiatrists, licensed clinicians, and qualified mental health professionals. These short-term issues were due primarily to longer-term difficulties remaining competitive with outside employment opportunities, while also having limited funding to retain existing staff or to recruit new staff.

Challenges were greater in rural and underserved areas. For example, Camino Real Community Services, whose adult waiting list comprised the majority of the total adult community mental health waiting list and was the only LMHA with a children's waiting list, continued to overserve clients while being located in a designated healthcare professional shortage area.

To reduce the adult and child waiting lists, HHSC contacted LMHAs/LBHAs with a monthly waiting list to obtain feedback on the reasons for respective waiting list and efforts to reduce it. In cases of especially large waiting lists, HHSC provided technical assistance addressing workforce recruitment and retention strategies, training resources, and support for expanding service capacity through mental health teleservices.

3. Forensic State Hospital Bed Waiting List Data

The tables in this section show required data elements for the forensic state hospital bed waiting lists. HHSC’s state hospital system maintains two distinct lists of pending admissions for people on forensic commitments: one for people pending admission to a non-maximum-security unit; and one for people pending admission to a maximum-security unit.

Table 5. Non-Maximum-Security Forensic State Hospital Bed Waiting List

Data Element	Number ¹²	
	Q3	Q4
People Added to the Waiting List	572	564
People Removed from the Waiting List	537	444
People on the Waiting List	924	1037
Average Number of Days People Remained on Waiting List	176	174

Table 6. Maximum Security Forensic State Hospital Bed Waiting List

Data Element	Number ¹³	
	Q3	Q4
People Added to the Waiting List	169	167
People Removed from the Waiting List	180	93
People on the Waiting List	551	611
Average Number of Days People Remained on Waiting List	380	314

¹² Figures indicate data in the last month of the fiscal quarter.

¹³ Figures indicate data in the last month of the fiscal quarter.

Factors Impacting Forensic State Hospital Bed Waiting Lists

The table in this section shows the long- and short-term factors that impact the forensic waiting list.

Table 7. Factors Impacting Forensic State Hospital Bed Waiting Lists

Issue	Long- or Short-term	Description
Staffing shortages take beds offline	Long-term	<p>Recruitment and retention of direct care and professional staff are challenging due to a variety of factors, including the COVID-19 pandemic. HHSC continues exploring new recruitment efforts to improve hiring.</p> <p>Health and Specialty Care System (HSCS) is using telemedicine to extend psychiatric and psychological coverage. The state hospitals are expanding recruitment and retention efforts to include merits for nursing and direct care staff.</p>
Mitigation or remediation of life safety code issues	Long-term	<p>The Health and Specialty Care System (HSCS) is continuing to use deferred maintenance funds appropriated for this biennium for anti-ligature projects and other major maintenance needs to keep beds online; however, funds are insufficient to address all issues.</p> <p>While a significant investment has been made to address ligature remediation projects, the state hospital system still has unmet needs to help maintain a safe and healthy environment in aging buildings and infrastructure.</p>
COVID-19 precautions require that HHSC manage the state hospitals at a lower census	Short-term	<p>To create a safe environment for patients and staff, all state hospitals have created space for social distancing and quarantine space. The state hospitals request that individuals coming from jails be tested for COVID-19 prior to transfer to help reduce the amount of time patients are quarantined upon admission. With ongoing surges in COVID-19, the state hospitals have had to continue to implement clinical and operational protocols to help prevent patients and staff from contracting COVID-19 at the hospital.</p>

Issue	Long- or Short-term	Description
Demand exceeds capacity	Long-term	<p>The inability to successfully and safely discharge individuals into the community is a factor impacting the waiting list.</p> <p>Patients on a forensic commitment have longer lengths of stay on average, meaning discharge rates have slowed and fewer people can be served with existing beds. Discharge rates slowed during the pandemic due to limited court operations and community providers not accepting admissions. Ongoing challenges with limited resources for long-term state hospitals patients who are difficult to place continue to impact how quickly state hospital beds can turnover.</p> <p>The state hospitals have continued the work to expand, replace and renovate the state hospitals through various construction projects across the system. The state hospital system completed renovations to a 40-bed patient unit at San Antonio State Hospital, renovations are in the final stages of construction at Kerrville State Hospital to add 70 maximum security beds; construction is near complete on a new 264-bed hospital in Houston that will serve at least 168 patients who would typically be served in a state hospital; design efforts have been initiated on a new 200-bed hospital that will serve the Dallas/Fort Worth Metropolitan area; construction of a new patient complex at Rusk and full hospital replacement efforts at Austin and San Antonio State Hospitals continue which will provide clinical and operational efficiencies to the state hospitals.</p>

List of Acronyms

Acronym	Full Name
HHSC	Health and Human Services Commission
HSCS	Health and Specialty Care System
LBHA	Local Behavioral Health Authority
LMHA	Local Mental Health Authority
S.B.	Senate Bill