

The Problem:

Sandra **most likely met criteria** for a civil commitment long before she was ever offered one, leaving her cycling in and out of jail for 15+ years

In the state-contracted hospital bed, Sandra has **no autonomy or purpose**. She is detached from any sense of community.

Sandra has a high level of need but has **nowhere** to go and **nobody** to support her outside of the hospital. Jail should not be the default residential option

Next Steps:

Utilizing **civil commitments**connects people to the care they
deserve and keeps them out of
jails and off the streets

Community-based long-term settings allow people to live with purpose and dignity despite the need for a high level of care

Appropriate step-down facilities to support people who need long-term care that doesn't rise to the acuity of hospitalization



Appropriate stepdown care can be modeled after retirement communities based on level of need:

- Independent living
- Supported living
- 24/7 nursing care
- Locked, secure option

Right now, our continuum of care has nothing between the hospital and the streets

Many people wrongfully assume that Texas State Hospitals are appropriate settings for long-term care. After all, isn't that the **only option?**The State Hospital is just that: **a hospital**. Confined to a small room, you have no autonomy, independence, freedom, or meaning.

Everyone deserves to live with purpose and dignity

For people needing long-term care, we need appropriate **step-down solutions**. There is currently **no long-term community-based care** in Texas. Expanding these options gets people out of state hospitals, frees up beds, and allows these individuals the autonomy and dignity they deserve.



Read the state audit on competency restoration and state hospital beds



See an easy-to-read breakdown of the audit from Texas Jail Project