

Level of Care Reviews 4th Quarterly Report FY22

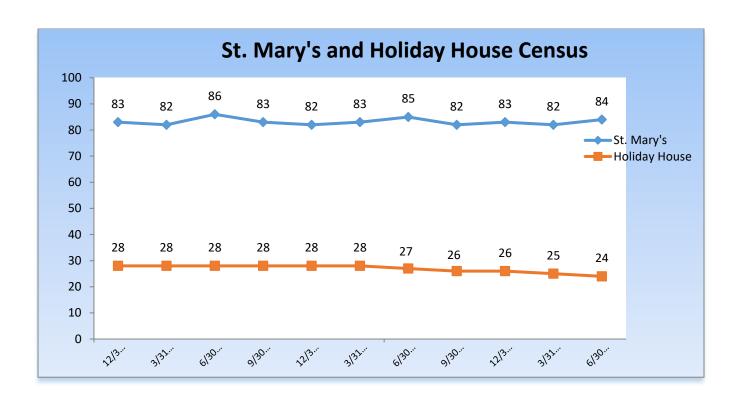
Census

The Family Resource Consultant Manager (FRCM) continues to work closely with the Director of Social Work at St. Mary's and the Social Worker at Holiday House to maintain accurate information regarding the census. In the past timely communication regarding admissions presented a challenge to maintaining accurate census information, however since the implementation of Single Point of Entry, the FRC has been better able to track admissions and ask for status updates for pending applications.

During the fourth quarter of FY22 (April 1, 2022 – June 30, 2022), there were **2** admission and **3** discharge at Holiday House leaving the census at **24**. St. Mary's Home had **5** admissions and **3** discharges bringing the census to **84**. The total census as of June 30, 2020 remains at **108**.

Table 1: St. Mary's and Holiday House Census

Date	Holiday House	St. Mary's	Total
January 1, 2017	26	82	108
April 1, 2017	27	84	111
July 1, 2017	28	83	111
September 30, 2017	26	85	111
December 31, 2017	26	84	110
March 31, 2018	27	86	113
June 30, 2018	28	85	113
September 30, 2018	27	86	113
December 31, 2018	27	84	111
March 31, 2019	28	86	114
June 30, 2019	28	88	116
September 30, 2019	27	86	113
December 31, 2019	28	83	111
March 31, 2020	28	82	110
June 30, 2020	28	86	114
September 30, 2020	28	83	111
December 31, 2020	28	82	110
March 31, 2021	28	83	111
June 30, 2021	27	85	112
September 30, 2021	26	82	108
December 31, 2021	26	83	109
March 31, 2022	25	82	107
June 30, 2022	24	84	108



Children's ICFs

1st Quarter

Cumulative Data								
Census as of January 1, 2017	Total Children Admitted to date (1/1/17-9/30/2021)	Total Children Discharged to date (1/1/17-9/30/2021)	Deaths	Census as of end of 4 th Quarter FY21				
108	73	68	5	108				
	1 st Quarter FY22 (July 1, 2021 – September 30, 2021)							
Census July 1, 2021	Admissions	Discharges	Level of Care Reviews (Indicator 18.12)	Post Move Monitoring Contacts				
112	2	6	27	6				

2nd Quarter

Cumulative Data

Census as of January 1, 2017	Total Children Admitted to date (1/1/17-12/31/2021)	Total Children Discharged to date (1/1/17-12/31/2021)	Deaths	Census as of end of 2 nd Quarter FY22			
108	77	71	5	109			
2 nd Quarter FY22 (October 1, 2021– December 31, 2021)							
Census October 1, 2021	Admissions	Discharges	Level of Care Reviews (Indicator 18.12)	Post Move Monitoring Contacts			
108	4	3	22	8			

3rd Quarter

Cumulative Data								
Census as of January 1, 2017	Total Children Admitted to date (1/1/17-3/31/2022)	Total Children Discharged to date (1/1/17-3/31/2022)	Deaths	Census as of end of 3rd Quarter FY22				
108	80	76	5	107				
	3 rd Quarter FY22 (Januyary1, 2022– March 31, 2022)							
Census January 1, 2022	Admissions	Discharges	Level of Care Reviews (Indicator 18.12)	Post Move Monitoring Contacts				
109	3	5	30	7				

4th Quarter

	Cumulative Data							
Census as of January 1, 2017	Total Children Admitted to date (1/1/17-6/30/2022)	Total Children Discharged to date (1/1/17-6/30/2022)	Deaths	Census as of end of 4 th Quarter FY22				
109	87	82	5	108				
	4 th Quarter FY22 (4/1/2022-6/30/2022)							
Census April 1, 2022	Admissions	Discharges	Level of Care Reviews	Post Move Monitoring Contacts				

			(Indicator 18.12)	
107	7	6	22	11

^{*}Census as of January 1, 2017 corrected to reflect 109 instead of 108 (HH-27, SMH-82)

Level of Care Reviews

During the third quarter of FY22 (April 1, 2022 – June 30, 2022), **19** Level of Care Reviews were completed for St. Mary's Home and **3** were completed for Holiday House with one being modified reviews (completed by staff) due to Covid-19 outbreaks. Issues noted during the 4th quarter review mainly centered around the accurate completion of the VIDES. Additionally, the lack of interdisciplinary team members participation in the Plan of Care was also cited as an area of noncompliance. FRC continues to offer recommendations regarding areas of noncompliance. The facilities are provided 6 months to respond to these areas and other recommendations. Effective June 17, 2022 FRC began receiving notification regarding incidents being entered in CHRIS. Incidents entered ranged from peer to peer contact, and medication errors to fractured bones. All incidents were entered in a timely manner.

Table 2: Completed Level of Care Reviews

Facility	Completed	Utilization	Utilization	Certification	Certification	Plan of	Plan of	Discharge	Discharge
		Plan	Plan Non	Compliant	Non	Care	Care Non	Planning	Planning
		Compliant	Compliant		Compliant	Compliant	Compliant	Compliant	Non
									Compliant
St.	19	19	0	15	4	17	2	19	0
Mary's									
Holiday	3	3	0	2	1	3	0	3	0
House									
Total	22	22	0	17	5	20	2	22	0

Level of Care Review Schedule

Level of Care (LOC) Reviews are completed approximately 60 days prior to the beneficiary's annual review. This allows FRC to provide feedback regarding areas of non-compliance from the previous year so that appropriate steps can be taken to address them as the ISP is being developed for the coming plan year. A total of **30** LOC Reviews were completed during the 3rd quarter of FY22.

Facility	Apr 2022	May 2022	Jun 2022
St.	9	6	4
Mary's			
Holiday	0	2	1
House			
Total	9	8	5

Single Point of Entry (Indicator 18.10)

The Single Point of Entry process for admission into Intermediate Care Facilities was implemented effective May 1, 2018.

Identifier	Diverted	Admitted	Denied	Pending	Discharged	Date of LOC
			Admission			Review
1		1/31/2020				Nov 2020
2	May 2018					
3		10/18/18				Sept 2019
4		8/9/18				July 2019
5	Dec 2018					
6			X			
7		12/3/18			9/16/19	Nov 2019
8		9/11/18			3/20/19	Aug2019
9		7/10/18			9/15/2021	June 2019
10		8/14/18				June 2019
11	Feb 2019					
12		11/26/18				Sept 2019
13		11/12/18				Sept 2019
14		3/18/19				Feb 2020
15		12/27/18			2/17/19	Oct 2019
16					Death	7/4/2020
17		12/20/18			3/4/2020	CVTC
18		1/15/19			8/17/2020	Nov 2019
19		3/5/19				Jan 2020
20		- 1:-1:-	X			
21		3/19/19				Jan 2020
22		2/18/19				Dec 2019
23		3/26/19				Jan 2020
24		12/12/19				Nov 2020
25		4/8/19			3/21/2020	Feb 2020
26		5/28/19				Mar 2020
27		7/16/19			11/22/2021	May 2020
28	7/26/19					
29		7/26/19			7/17/2022	June 2020
30		9/15/2020				July 2021
31				Placement		
				in		
22	11/10/10			community		
32	11/18/19	0/24/10			10/14/19	July 2020
34		9/24/19 10/1/19			10/14/19	July 2020
35		11/12/19				July 2020 Sept 2020
36		11/12/19			Death	Sept 2020 Sept 2020
30		11/20/13			8/25/2020	σερί 2020
37		12/13/19			3,23,2020	Nov 2020
Identifier	Diverted	Admitted	Denied	Pending	Discharged	Date of LOC
lacitation	Diverted	7 tallilleed	Admission	i ciidiiig	Districtiged	Review
38		4/1/2020				Jan 2021
39		4/14/2020				Feb2021
40		3/6/2020				Jan 2021
41		5/13/2020				Mar 2021
42		1/21/2020				Nov 2020
43		6/15/2020				April 2021
44	Tuned 22	• •		Transition	1/14/2021	
	on			to Adult		
	5/20/2020			ICF		
45		5/1/2020			3/2/2022	Feb 2021

46		9/15/2020				July 2021
47		10/7/2020				Aug 2021
48		9/22/2020				July 2021
49		12/9/2020				Oct 2021
50		12/2/2020				Oct 2021
51	Х	12/2/2020				001 2021
52	Λ	12/2/2020			1/5/2021	Oct 2021
53		3/2/2021			1/3/2021	Jan 2022
54		4/12/2021				Feb 2022
55		3/9/2021				Jan 2022
56		3/16/2021				Jan 2022 Jan 2022
57		Admitted to an adult				Jan 2022
37		ICF				
58		ICI	Х			
59		1/26/2021				Nov2021
60		9/8/2021				July 2022
61		5/4/2021				Mar 2022
					- 1- 1 1	
62		6/29/2021			5/31/2022	April 2022
63		10/5/2021				Aug 2022
64		8/2/2021			11/15/2021	June 2022
65		10/4/2021				Aug 2022
66			Х			
67	Х	(not screened)				
68		10/26/2021				Aug 2022
69		12/20/2021			2/14/2022	Oct 2022
70		Admitted to an Adult ICF				
71		1/18/2022				Nov 2022
72		4/19/2022				
73		Admitted to an Adult ICF				
74				Х		
75		2/8/2022				Dec 2022
76		3/14/2022			5/2/2022	Jan 2023
77		5/25/2022				Mar 2023
78		6/29/2022				Apr 2023
79		5/17/2022				Mar 2023
80		6/21/2022				Apr 2023
81		6/14/2021				Apr 2023
82		6/7/2022				Apr 2023

VIDES (Indicator 18.10)

1st Quarter

Cumulative Data-VIDES (May 1, 2018-September 30, 2021)

Total Screened	Total Diverted	Total Pending	Total Admitted	Total Referred to RST	Total Denied Admission
66	7	3	49	66	3

1st Quarter FY22-VIDES								
(July 1, 2021-September 30, 2021)								
Total Screened Total Diverted Total Pending Total Total Referred Total Denie								
			Admitted	to RST	Admission			
4	1	3	2	4	0			

Additional Data						
Total Remaining in ICF	Total Discharged/Death prior to Annual LOC Review	Total remaining in the ICF at the time of next Annual Level of Care Review				
40	6	17				

2nd Quarter

Cumulative Data-VIDES (May 1, 2018-December 31, 2021)						
Total Screened Total Total Pending Total Diverted Adm				Total Referred to RST	Total Denied Admission	
70	7	1	53	70	4	

2 nd Quarter FY22-VIDES						
(October 1, 2021-December 31, 2021)						
				Total Referred to RST	Total Denied Admission	
4	0	1	4	4	1	

	Additional Data						
Total Remaining in ICF	Total Discharged/Death prior to Annual LOC Review	Total remaining in the ICF at the time of next Annual Level of Care Review					
42	7	18					

3rd Quarter

Cumulative Data-VIDES (May 1, 2018-March 31, 2022)						
Total Screened	Total Diverted	Total Pending	Total Admitted	Total Referred to RST	Total Denied Admission	
75	7	1	56	75	4	

3 rd Quarter FY22-VIDES						
(January 1, 2022-March 31, 2022)						
Total Screened	Total Diverted	Total Pending	Total	Total Referred	Total Denied	
Admitted to RST Admission						
5	0	1	3	5	0	

Additional Data

Total Remaining in ICF	Total Discharged/Death prior to Annual LOC Review	Total remaining in the ICF at the time of next Annual Level of Care Review
43	9	22

4th Quarter

Cumulative Data-VIDES (May 1, 2018-June 30, 2022)						
Total Screened Total Total Pending Total Total Referred Total Denie						
Diverted Admitted to RST Admission						
81	7	1	63	81	4	

4 th Quarter FY22-VIDES (April 1, 2022-June 30, 2022)						
Total Screened	Total Diverted	Total Pending	Total Admitted	Total Referred to RST	Total Denied Admission	
6	0	0	7	6	0	

Additional Data					
Total Remaining in ICF	Total Discharged/Death prior to Annual LOC Review	Total remaining in the ICF at the time of next Annual Level of Care Review			
47	10	22			

Demographics

The majority of the beneficiaries residing at both St. Mary's Home for Children (43%) are between the ages of 11 and 17 year. Conversely, the majority of beneficiaries at Holiday House (42%) are between the ages of 18 to 20 years.

At St. Mary's Home for Children, there is a relatively even distribution of each gender; with males representing 51% of the beneficiaries and females representing 49%. Conversely, Holiday House is 33% female and 67% male.

There is a relatively even distribution of children residing at St. Mary's with a length of stay of 7 months to 5 years (49%); and more than 5 years (43%). This is also true for children residing at Holiday House; 46% have a length of stay between 7 months and 5 years and 46% have a length of stay of more than 5 years.

Table 4: Demographic Information

		Age		Aging Out	Ge	nder	Length of Stay		у
Facility	0-10	11-17	18-20	21-22	Male	Female	0	7	Greater
	Years	Years	Years	Years			months-	months-5	than 5
							6	Years	Years
							Months		
St.	26	36	16	6	43	41	7	41	36
Mary's									
Holiday									
House	2	9	10	3	16	8	2	11	11
Total	28	45	26	9	59	49	9	52	47

Additional Information

For 1st Quarter FY22

- VIDES process: Four families/legal guardians received a phone contact to discuss more integrated options. The Community Transition Guide was emailed to all four families/legal guardians. (Indicator 18.10)
- Community Transition Guides are mailed/emailed during January 2021 and June 2021. Guides are also provided upon request. (Indicator 18.13)
- Twenty nine of the SPE individuals have completed their initial LOC reviews. (Indicator 18.12)
- Eleven of the SPE individuals are awaiting their initial LOC reviews. (Indicator 18.12)
- There were no children in the ten and under category discharged this quarter. (Indicator 18.15)
- Six families of children 10 and under were contacted in July 2021 for the quarterly calls. Twelve messages were left with families and seven calls were attempted. (Indicator 18.15)
- Twenty seven annual contacts were completed with families to develop/update the Family Outreach Plan. (Indicator 18.16, 18.17, &18.18)
- Four Admission Awareness Letter and five Active Discharge Letters were provided to Community Services Boards. One discharge to CHKD for hospitalization with the goal of returning to St. Mary's Home. No letter was sent to the CSB. (Indicator 18.22)
- Eight families were linked to the VCU Family to Family Network of Virginia this quarter. Two families responded and were provided support. Three families did not respond and were closed. One parent requested no further contact. Two referrals were received the last week of September 2021 and will be reported on in the 2nd Quarter FY22 report. (Indicator 18.19)
- Twelve adults were screened through Single Point of Entry this quarter.

For 2nd Ouarter FY22

- VIDES process: Four families/legal guardians received a phone contact to discuss more integrated options. The Community Transition Guide was emailed to all four families/legal guardians. (Indicator 18.10)
- Community Transition Guides are mailed/emailed during January 2021 and June 2021. Guides are also provided upon request. (Indicator 18.13)
- Thirty three of the SPE individuals have completed their initial LOC reviews. (Indicator 18.12)
- Eleven of the SPE individuals are awaiting their initial LOC reviews. (Indicator 18.12)
- There was one child in the ten and under category discharged this quarter. (Indicator 18.15)
- Eighteen families of children 10 and under were contacted in October 2021 for the quarterly calls. Nine messages were left for families. (Indicator 18.15)
- Thirty nine annual contacts were completed with families to develop/update the Family Outreach Plan. (Indicator 18.16, 18.17, &18.18)
- Four Admission Awareness Letter and three Active Discharge Letters were provided to Community Services Boards. (Indicator 18.22)
- Eighteen families were linked to the VCU Family to Family Network of Virginia this quarter. Ten families responded and were provided support. Six families did not respond and were closed. Two families are awaiting additional contacts. (Indicator 18.19)
- Three adults were screened during 2nd quarter. The cases were submitted to RST for review.

- VIDES process: Five families/legal guardians received a phone contact to discuss more integrated options. The Community Transition Guide was emailed to all four families/legal guardians. (Indicator 18.10)
- Community Transition Guides were mailed/emailed during January 2022. Guides are also provided upon request. (Indicator 18.13)
- Thirty five of the SPE individuals have completed their initial LOC reviews. (Indicator 18.12)
- Eight of the SPE individuals are awaiting their initial LOC reviews. (Indicator 18.12)
- There were two children in the ten and under category discharged this quarter. (Indicator 18.15)
- Twenty families of children 10 and under were contacted in October 2021 for the quarterly calls. Messages were left for five families. (Indicator 18.15)
- Four annual contacts were completed with families to develop/update the Family Outreach Plan. Messages were left for one family. (Indicator 18.16, 18.17, &18.18)
- Five Admission Awareness Letter and six Active Discharge Letters were provided to Community Services Boards. (Indicator 18.22)
- Three families were linked to the VCU Family to Family Network of Virginia this quarter. One family was linked to a Family Navigator, one family did not respond, and one family declined services. (Indicator 18.19)
- Six adults were screened during this quarter.

For 4th Quarter FY22

- VIDES process: Seven families/legal guardians received a phone contact to discuss more integrated options. The Community Transition Guide was emailed to all seven families/legal guardians. (Indicator 18.10)
- Community Transition Guides were mailed/emailed during June 2022. Guides are also provided upon request. (Indicator 18.13)
- Thirty seven of the SPE individuals have completed their initial LOC reviews. (Indicator 18.12)
- Fourteen of the SPE individuals are awaiting their initial LOC reviews. (Indicator 18.12)
- There were two children in the ten and under category discharged this quarter. (Indicator 18.15)
- Twenty two families of children 10 and under were contacted in for the quarterly calls. Messages were left for two families. (Indicator 18.15)
- Twenty two annual contacts were completed with families to develop/update the Family Outreach Plan. Messages were left for three family. (Indicator 18.16, 18.17, &18.18)
- Six Admission Awareness Letter and six Active Discharge Letters were provided to Community Services Boards. (Indicator 18.22)
- Five families were linked to the VCU Family to Family Network of Virginia this quarter. None responded to messages left by program. (Indicator 18.19)
- Seven adults were screened this quarter.

Diversions

There have been 7 diversions since May 1, 2018:

- 6011W (age 15- parent decided to take the individual home. Children's Hospital of King's Daughter assisted with securing needed equipment so that the individual could rehab at home)
- 3036T (age 7- parent decided to keep the individual at home. Case management services were added)
- 8473P (age 18- Individual received a CL slot back in Dec 2018)
- 5053W (age 18- Placed in foster care services with Barry Robinson. Individual transitioned home with services when she turned 18)
- 9043E (age 14- decided to maintain CL waiver slot, exploring sponsored residential services)

- 3004137897 (age 17- diverted to sponsor residential services)
- 3802040588 (age 10 -diverted to sponsored residential services)

Unavailable Service Tracker

Unique Identifier	Service	Region	Reason

^{*}There were no reports of unavailable services during this quarter*

Definitions:

Admission- admission occurs when the requesting facility completes their screening and review process and the individual moves into the facility.

Diversion- diversion occurs when the Substitute Decision Maker (SDM) and /or Legal Guardian (LG) agrees to explore and consequently selects more integrative options in the community.

Denial- denial occurs when the requesting facility completes the screening/review process and it is determined that the facility is unable to adequately meet the individual's needs.

Pending- pending status occurs when the SDM or LG declines to explore more integrated options and the facility is completing the screening/review process.