

GOAL

Develop a state-wide, comprehensive crisis system with robust ancillary supports; create and maintain appropriate training, facilitate ongoing professional development for state-wide crisis system; maintain quality of existing systems in place for state-wide crisis system

DESIRED OUTCOME	PARTY / DEPT RESPONSIBLE	ACTION STEPS	DUE DATE
<p>DBHDS will add a provision to the CSB Performance Contract requiring CSBs to identify children and adults who are at risk for crisis through a screening at intake, and if the individual is identified as at risk for crisis needs, refer the individual to REACH to ensure that when needed the initial crisis assessments are conducted in the home.</p>	<p style="text-align: center;">Division of Developmental Services</p>	<ol style="list-style-type: none"> 1. Determine language in performance contract and work through Office of Management Services 2. Determine crisis risk tool and implement with all CSBs 	<ol style="list-style-type: none"> 1. For FY21 Performance Contract, early spring 2020 2. Launch 7/1/2020
<p>DBHDS will add a provision to the CSB Performance Contract requiring, for individuals who receive ongoing case management, the CSB case manager to assess an individual's risk for crisis during face to face visits and refer to REACH when a need is identified.</p>	<p style="text-align: center;">Division of Developmental Services</p>	<ol style="list-style-type: none"> 1. Determine language in performance contract and work through Office of Management Services 2. Determine crisis risk tool and implement with all CSBs 	<ol style="list-style-type: none"> 1. For FY21 Performance Contract, early spring 2020 2. Launch 7/1/2020
<p>DHBDS will establish criteria for use by CSBs to determine "risk of hospitalization" as the basis for making requests for crisis risk assessments.</p>	<p style="text-align: center;">Division of Developmental Services</p>	<ol style="list-style-type: none"> 1. Crisis risk tool includes risk of hospitalization criteria for REACH crisis referral 	<ol style="list-style-type: none"> 1. Launch 7/1/2020

<p>DBHDS will ensure that all CSB Executive Directors, Developmental Disability Directors, case management supervisors, and case managers receive training on how to identify children and adults receiving active case management who are at risk for going into crisis. Training will also be made available to intake workers at CSBs on how to identify children and adults presenting for intake who are at risk for going into crisis and how to arrange for crisis risk assessments to occur in the home or link them to REACH crisis services. DBHDS will add a provision to the CSB Performance Contract requiring training on identifying risk of crisis for case managers and intake workers within 6 months of hire.</p>	<p>Division of Developmental Services</p>	<ol style="list-style-type: none"> 1. Determine language in performance contract and work through Office of Management Services 2. Create training on crisis risk tool, necessity of prevention services, in home assessment v. out of home crisis assessment, etc. 3. Launch training with associated tracker for CSB performance on completing training 	<ol style="list-style-type: none"> 1. For FY21 Performance Contract, early spring 2020 2. Launch 7/1/2020 3. Launch 7/1/2020
<p>DBHDS will implement a quality review process conducted initially at six months, and annually thereafter, that measures the performance of CSBs in identifying individuals who are at risk of crisis and in referring to REACH where indicated.</p>	<p>Division of Developmental Services</p>	<ol style="list-style-type: none"> 1. Determine method of measurement, CSB data submission or tracker via WaMS 2. Launch quality reviews 	<ol style="list-style-type: none"> 1. First review to occur no later than January 2021 2. First review to occur no later than January 2021
<p>86% of children and adults who are known to the system will receive</p>		<ol style="list-style-type: none"> 1. Abovementioned training has focus on national best practice for crisis services, prevention planning, etc. 2. Ongoing data monitoring 	<ol style="list-style-type: none"> 1. Training launch July 2020

<p>REACH crisis assessments at home, the residential setting, or other community setting (non-hospital/CSB location).</p>	<p>Division of Developmental Services</p>		<p>2. Data collection system is already in place</p>
<p>The Commonwealth will provide a directive and training to state-operated psychiatric hospitals to require notification of CSBs and case managers whenever there is a request for an admission for a person with a DD Diagnosis. Via the morning reporting process, the Director of Community Support Services or designee will notify the REACH Director or designee of admission for follow up. DBHDS will request and encourage private psychiatric hospitals to notify the emergency services staff of the CSB serving the jurisdiction where the individual resides of requests for admissions and admissions of individuals with a DD diagnosis.</p>	<p>Division of Developmental Services</p>	<ol style="list-style-type: none"> 1. Current performance contract stipulates this directive 2. Morning reporting process is in place 3. Request and encouragement of linking to the CSB, ES, and REACH for private admissions 	<ol style="list-style-type: none"> 1. Completed 2. Occurs ongoing, in place 3. Formalized request to VHHA to occur by 7/1/2020
<p>The Commonwealth will track admissions to state-operated psychiatric hospitals and those to private hospitals as it is made aware, to determine whether there has been a referral to REACH and will implement a review process to determine if improvement strategies are indicated.</p>	<p>Division of Developmental Services</p>	<ol style="list-style-type: none"> 1. Data tracker established 2. Quarterly data analysis review 	<ol style="list-style-type: none"> 1. Data are being tracked currently 2. Reviews ongoing each quarter

<p>95% of children and adults admitted to state-operated and private psychiatric hospitals who are known to the CSB will be referred promptly (within 72 hours of admission) to REACH.</p>	<p>Division of Developmental Services</p>	<ol style="list-style-type: none"> 1. Current performance contract requires referral in state psychiatric hospitals, private hospitals will be encouraged to promptly refer 	<ol style="list-style-type: none"> 1. State hospitals in place, private hospital requests will be ongoing
<p>DBHDS will implement a quality review process for children and adults with identified significant behavior support needs (Support Level 7) living at home with family that tracks the need for in-home and personal care services in their homes. DBHDS will track the following in its waiver management system (WaMS): a. The number of children and adults in Support Level 7 identified through their ISPs in need of in-home or personal care services; b. The number of children and adults in Support Level 7 receiving the in-home or personal care services identified in their ISPs; and c. A comparison of the hours identified as needed in ISPs to the hours authorized.</p>	<p>Division of Developmental Services</p>	<ol style="list-style-type: none"> 1. Establish data tracking/comparison tool for data pull out of WaMS. 2. Pull data from WaMS monthly or quarterly and compare hours identified for these services v. hours needed 	<p>Data pull commences 7/1/20</p>
<p>Semi-annually, DBHDS will review a statistically significant sample of those children and adults with identified significant behavior support needs (Support Level 7) living at home with family. DBHDS will review the data</p>	<p>Division of Developmental Services</p>	<ol style="list-style-type: none"> 1. Determine statistically significant sample from each data pull, monthly or quarterly 2. Contact families that are selected from statistically significant sample 3. Analysis of data from WaMS and family interviews to determine any needed subsequent action steps 	<p>To coincide with each data pull, ongoing quarterly</p>

<p>collected in 1.a-c and directly contact the families of individuals in the sample to ascertain: a. If the individuals received the services authorized; b. What reasons authorized services were not delivered; and c. If there are any unmet needs that are leading to safety risks. Based on results of this review, DBHDS will make determinations to enhance and improve service delivery to children and adults with identified significant behavior support needs (Support Level 7) in need of in-home and personal care services.</p>			
<p>DBHDS will, on a semi-annual basis, assess REACH teams for: 1) whether REACH team staff meet qualification and training requirements; 2) whether REACH has developed Crisis Education and Prevention Plans (CEPPs) for individuals, families, and group homes; and 3) whether families and providers are receiving training on implementing CEPPs. Outcomes to be achieved: 86% of REACH staff will meet training requirements 86% of initial CEPPs are developed within 15 days of the assessment 86% of families and</p>	<p>Division of Developmental Services</p>	<ol style="list-style-type: none"> 1. Audits of REACH staff qualifications and training requirement adherence every 6 months 2. Data are collected and reported out quarterly 3. Data are collected and reported out quarterly 4. For measures that are below threshold, pivot steps are indicated to programs and corrective action if required 	<ol style="list-style-type: none"> 1. Occurring every other quarter 2.-4. Occurring ongoing every quarter

providers will receive training in implementing CEPPs			
Documentation indicates a decreasing trend in the total and percentage of total admissions as compared to population served and lengths of stay of individuals with DD who are admitted to state-operated and known by DBHDS to have been admitted to private psychiatric hospitals.	Division of Developmental Services	<ol style="list-style-type: none"> 1. Data are obtained internally from Facilities leadership 2. REACH data are obtained and compared for hospitalizations 	Analyze data and report out quarterly
For individuals with DD who are admitted to state-operated psychiatric hospitals and those known by DBHDS to have been admitted to private psychiatric hospitals, DBHDS will track the lengths of stay in the following categories: • those previously known to the REACH system and those previously unknown; admissions of adults and children with DD to psychiatric hospitals as a percentage of total admissions; and • median lengths of stay of adults and children with DD in psychiatric hospitals.	Division of Developmental Services	<ol style="list-style-type: none"> 1. Data are obtained internally from Facilities leadership 2. REACH data are obtained and compared for hospitalizations 	Analyze data and report out quarterly
The Commonwealth will establish and have in operation by June 30, 2019 two Crisis Therapeutic Home (CTH) facilities for children and will provide training to those supporting the child to assist the	Division of Developmental Services	<ol style="list-style-type: none"> 1. Homes contracted for with RBHA and Easter SealsUCP/Fairfax Falls Church CSB 2. Homes operational 	<ol style="list-style-type: none"> 1. In place 2. Target 6/30/19

child in returning to their placement as soon as possible.			
DBHDS will utilize waiver capacity set aside for emergencies each year to meet the needs of individuals with long term stays in psychiatric hospitals or CTHs.	Division of Developmental Services	<ol style="list-style-type: none"> 1. Emergency slots are allocated by GA each year, slots are being utilized for persons in emergencies to meet needs of long term hospitalized individuals or persons at CTH 	Occurring currently as needed
DBHDS will increase the number of residential providers with the capacity and competencies to support people with cooccurring conditions using a person-centered/trauma informed/positive behavioral practices approach to 1) prevent crises and hospitalizations, 2) to provide a permanent home to individuals discharged from CTHs and psychiatric hospitals.	Division of Developmental Services	<ol style="list-style-type: none"> 1. Establish RFP process and contract with vendors 2. Vendors determine sites, secure staff, complete licensing process 3. Ongoing quarterly reviews with vendors 4. Provider badging system to review and designate providers with higher behavioral expertise 	<ol style="list-style-type: none"> 1. Completed 2. Target date 1/1/2021 3. Ongoing through remainder of contract 4. Launched November 2019
86% of individuals with a DD waiver and known to the REACH system who are admitted to CTH facilities and psychiatric hospitals will have a community residence identified within 30 days of admission.	Division of Developmental Services	<ol style="list-style-type: none"> 1. Data tracker established 2. Weekly reviews of CTH guest status by Division of Developmental Services 3. Ongoing support on situations that challenge the system (no disposition despite waiver status) 	<ol style="list-style-type: none"> 1. In place 2. Ongoing weekly 3. Ongoing
To address the CTH stays of adults beyond 60 days, DBHDS will establish and operate two transition homes by June 30 2019.	Division of Developmental Services	<ol style="list-style-type: none"> 1. Homes contracted for with RBHA and Easter SealsUCP/Fairfax Falls Church CSB 2. Homes operational 	<ol style="list-style-type: none"> 1. Completed 2. Both homes are currently operational and accepting residents
The Commonwealth will implement out-of-home crisis therapeutic prevention host-home like services	Division of Developmental Services	<ol style="list-style-type: none"> 1. Complete Request for Information to drive subsequent Request for Proposal 2. Issue RFP 	<ol style="list-style-type: none"> 1. Completed 6/14/2019

<p>for children connected to the REACH system who are experiencing a behavioral or mental health crisis and would benefit from this service through statewide access in order to prevent institutionalization of children due to behavioral or mental health crises.</p>		<p>3. RFP review commences on proposals, contract with vendors</p>	<p>2. RFP close date 1/27/20 3. Spring 2020, contingent on content of proposals</p>
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