

Virginia Department of Behavioral Health & Developmental Services

Provider Data Summary

State Fiscal Year 2022-23 November 1, 2022

# Provider Data Summary



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### Introduction

This is the seventh Provider Data Summary Report that provides updates on the status of DD Waiver service availability and activities completed by the Office of Provider Development (OPD) in the Division of Developmental Services (DDS) at the Department of Behavioral Health and Developmental Services (DBHDS).

## **Executive Summary**

As with previous reports, the focus is on identifying service development needs based on a review of developmental disability (DD) waiver population and authorization data in each locality in Virginia. The "Baseline Measurement Tool (BMT)," which is used by OPD in conducting this review, has been updated to include changes in the data from 5/1/2022 to 10/31/22. The BMT was modified in the last report to 1) reduce it to only the core elements needed to assess service development, and 2) to calculate service provision based on where individuals reside. In reviewing the data in this manner, DBHDS is able to establish the number of unique providers offering a particular service to individuals who reside in each locality giving a more accurate reflection of service reach.

Providers are encouraged to review the BMT in conducting market research and in strategic planning efforts. Provider Data Summary webinars continue on a semiannual basis to provide a forum for sharing the results of ongoing analysis of the opportunities for DD services development across all regions. Webinars include a basic overview of findings, provide support on using the data provided, and encourage the development of business acumen in the DD provider community (for more information see <a href="http://www.advancingstates.org/initiatives/hcbs-business-acumen-center">http://www.advancingstates.org/initiatives/hcbs-business-acumen-center</a>.)

As with previous reports, there is consideration of a subset of DD Waiver services considered more integrated or critical, which include: Benefits Planning, Community Coaching, Community Engagement, Community Guide, Electronic Home-Based Services, Employment and Community Transportation, Independent Living Supports, In-home Supports, Peer Mentoring, Shared Living, Supported Living, Crisis Support Services, Private Duty Nursing, Skilled Nursing, and Sponsored Residential. As of the last report, the BMT has been updated to include group home residential services identified as supporting fewer than four individuals with DD and those homes supporting five or more.

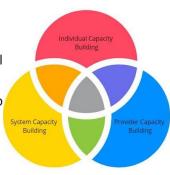
Following the Executive Summary, this report provides data visualizations in three sections: Key Performance Measures, Regional Data, and Identified Gaps. The Executive Summary provides updates on various efforts to support provider development, the Key Performance Measures section focuses on measures designed to track Virginia's success in moving to more integrated options, the Regional Data section provides information specific to each region around availability, and the Identified Gaps section encourages the exploration of opportunities based on barriers identified through the Regional Support Team referral process.

The Provider Data Summary Report provides a means to track provider development efforts and communicate changes observed in the DD services system over time. In order to more effectively accomplish its mission, Provider Development was reorganized into three distinct capacity-building teams at the following levels - Individual, Provider, and System.

In February 2020, the reassignment of Community Resource Consultants (CRCs) occurred across these three areas, providing access to one CRC in each capacity-building area per region.

### Primary outcomes include:

- **Individual**: People with developmental disabilities live personally meaningful lives in their community of choice.
- **Provider**: Providers of developmental disability waiver services have access to information and technical assistance that supports best practices.
- **System**: DBHDS provides resources for supports coordinators and providers that are based on promising and best practices in supporting people with developmental disabilities in Virginia.



The Provider Development Contact Sheet has been updated to simplify which team to contact when:

Individual Team	Provider Team	System Team
If you are a PERSON WHO RECEIVES SERVICES or a FAMILY MEMBER -or- A SUPPORT COORDINATOR who needs assistance with RST or crisis situations -or- A PROVIDER or PROSPECTIVE PROVIDER who needs assistance with HCBS:	If you are a <b>PROVIDER or</b> <b>PROSPECTIVE PROVIDER</b> who needs assistance with something other than HCBS:	If you are a SUPPORT COORDINATOR who needs assistance with something other than RST or crisis situations:

A copy of the Provider Development contact chart is available online under Announcements at <a href="https://dbhds.virginia.gov/developmental-services/provider-development">https://dbhds.virginia.gov/developmental-services/provider-development</a>.

Data in this report are compared across three points in time – Baseline 2018, May 2022, and October 2022 so that a more meaningful understanding of progress can be achieved. This report provides a means to share Virginia's success in meeting measures established under the Settlement Agreement. Measures related to case management are reported through the Case Management Steering Committee semiannual report. Measures in this report include:

- Data continues to indicate an annual 2% increase in the overall DD waiver population receiving services in the most integrated settings
- Data continues to indicate that at least 90% of individuals new to the waivers, including for individuals with a "supports need level" of 6 or 7, since FY16 are receiving services in the most integrated setting
- The Data Summary indicates an increase in services available by locality over time
- 95% of provider agency staff meet provider orientation training requirements
- 95% of provider agency direct support professionals (DSPs) meet competency training Requirements
- At least 95% of people receiving services/authorized representatives participate in the development of their own service plan
- At least 75% of people with a job in the community chose or had some input in choosing their job
- At least 86% of people receiving services in residential services/their authorized representatives choose or help decide their daily schedule
- At least 75% of people receiving services who do not live in the family home/their authorized representatives chose or had some input in choosing where they live
- At least 50% of people who do not live in the family home/their authorized representatives chose or had some input in choosing their housemates

In addition to the above measures, we have included a variety of data about the individuals in the DD population, as well as the providers who are approved to support them. These additions align with requirements set forth in the Settlement Agreement joint filing from January 2020 (per V.D.6).

DBHDS has continued to make progress with various initiatives designed to improve DD waiver provider capacity in Virginia. The following list highlights the status of Provider Development activities since the last report:

The My Life My Community (MLMC) Provider Database and Provider Designation Process were launched on November 15, 2019. All DD Waiver providers are encouraged to register on the database, which will serve as the centralized location for finding DD services in Virginia. As of April 2022, 235 providers registered and have DD Professional Membership at the MLMC Provider Database. Collectively, four providers hold badges in Autism, Accessibility, Behavioral Support, and Complex Health Supports. Providers can check their status on the database and, if needed, register at the following location: http://mylifemycommunityvirginia.org/taxonomy/mlmc-menu-zone/verify-or-register-new-provider-profile.

The Office of Provider Development continues to hold statewide Provider Roundtable meetings quarterly via webinar. The July 2022 Provider Roundtable was attended by 388 participants, and the October 2022 Roundtable had 357 participants. These meetings serve as a forum to exchange information about topics impacting providers and support coordination, as well as provide space for shared learning. In May 2022, the Office of Provider Development began hosting a second Provider Roundtable meeting, also held

quarterly on the month following the Provider Roundtable meetings, referred to as the "Presentation Forum," to consolidate and share more in-depth training on a variety of topics. The May 2022 Presentation Forum hosted 520 attendees and the August 2022 forum, 246.

Provider Development Activities from May 1, 2022 to October 31, 2022 included Community Resource Consultants meeting with 23 unique providers seeking to diversify or expand services. Region 1 had four providers, Region 2 had four providers, Region 3 had one provider, Region 4 had twelve providers, and Region 5 had three providers. The Developmental Disabilities Waiver services being added or considered by current providers include: Workplace Assistance (1), Group Home (5), Group Home with Skilled Nursing (1), Therapeutic Consultation – Behavior Analysis/Consultation (1), Employment & Community Transportation (1), In-Home Supports (1), Independent Living Supports (1), Community Guide (1), Community Housing Guide (1), Supported Living (1), Supported Employment (1), Group Day (2), Community Engagement (2), Community Coaching (1), Sponsored Residential (1), and Services Facilitation (1) and Group Home for children. Barriers include difficulty locating correct training in COVLC, lack of availability of DD Waiver slots, difficulty locating acceptable property for home, and regulations not permitting provider to expand services while on a conditional license.

Provider Development distributed Employment and Community Transportation forms and processes to the provider community through the listserv on 11/15/21. The Arc of Virginia has initiated the training of Peer Mentors. CRCs are available to work with providers interested in being an administrative agency for this service. For the report period from May 2022 through October 31, 2022, data related to Peer Mentoring includes:

There are currently 14 trained and credentialed Mentors across VA. Of the 14, 5 are actively matched with a Mentee, 2 are inactive and one resigned. While the Mentors are currently employed by one organization, and another organization is in the process of on-boarding as a secondary provider. Mentors will be able to choose if he or she would want to be employed with both Providers or maintain a singular employer. The Provider information is shared with the Mentee, he or she is able to choose the best Mentor regardless of the Provider.

Professional Development Training occurred on Sep 28, 2022 and was attended by 6 of the active Mentors. Prior to training, Mentors submitted topics of interest that were included in the training as open discussions forum and/or scenarios. Both options provide the Mentors a chance to learn and connect from one another while also having their questions and/or concerns answered. Mentors also received a review of the 2-day original training they attended.

In August, during The Arc's Convention, a Mentor and Mentee assisted in building and presented the Peer Mentor Supports Training to a standing-room group of participants. At the end of the presentation, the 8 Mentors who were present, all participated in a "Speed Matching" activity with potential Mentees.

The Arc continues to support the Alliance for Self-Advocates meetings and is assisting the Virginia Board for People with Disabilities in efforts to improve information access for individuals and families.

The Jump-Start Funding Program has awarded \$149,377.95 during this reporting period. Funds continue to be available to assist providers with expansion of integrated services in all regions and now include Skilled Nursing, Private Duty Nursing, Children's Sponsored Residential and Behavioral Consultation. Program requirements have been revised to allow for submission of application prior to the identification of individuals intending to use the new and/or expanded services. Information on how to apply as well as JumpStart funding requirements can be accessed at <a href="http://dbhds.virginia.gov/developmental-services/provider-development">http://dbhds.virginia.gov/developmental-services/provider-development</a>.

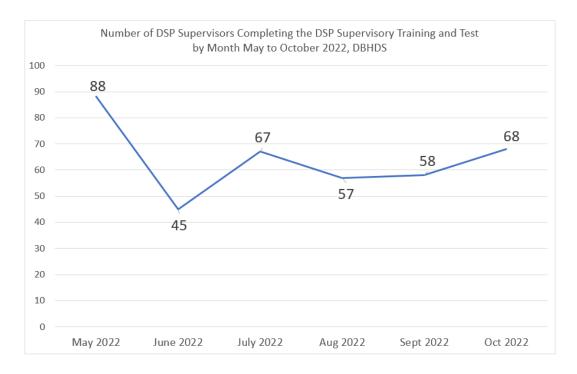
The Office of Provider Development held a Provider Readiness Education Program (PREP) in July 2022 to orient new providers to the DD Waiver service system. This invitational training was attended by 63 providers.

The Office of Provider Development has continued to work to create virtual methods of providing training to providers throughout the Commonwealth by creating virtual, on-demand methods of accessing training in the Commonwealth of Virginia Learning Center (COVLC), including Person-Centered ISP Training Modules and Part V Plan for Supports Training. In addition to on-demand and live, virtual trainings, the Office of Provider Development has started to return to offering in-person Part V and documentation trainings as the pandemic slows to a close.

Instructor Led Remote (virtual) versions of The Learning Community for Person Centered Practices (TLCPCP)'s Community Connections and Person-Centered Thinking classes continue to be available, as well as in-person versions of those Plan Facilitation classes. To register for one of these classes, visit <u>https://personcenteredpractices.partnership.vcu.edu/</u>

The DSP Supervisory Training was updated and expanded to meet indicators of the DOJ Settlement Agreement, and it was made available on the Commonwealth of Virginia Learning Center (COVLC) July 1, 2020. This training consists of three modules that take approximately 2 ½ hours to complete. It is mandatory for new DSP Supervisors and optional for DSP Supervisors who have already received a certificate of completion of the previous version of the training in COVLC. Supervisory completion counts from May 2022 through October 2022 are provided in the graph below.

**Method**: A data set obtained from the Commonwealth of Virginia Learning System is filtered to identify the number of individual supervisors who completed the Curriculum and Supervisory Training Module 3, which includes the knowledge-based test. The test must be passed as 80% or higher for successful completion.



### Next steps for Provider Development include:

- continuing a quality improvement initiative focused on increasing the use of Employment and Community Transportation across all regions.
- reviewing Provider Modules with stakeholders and communicating plans to provide related resources and information with the provider community through online and other training events.
- working directly with providers to address barriers to service provision with a concentrated focus on Community Guide, Employment and Community Transportation, Peer Mentoring, Crisis Supports Services, and Skilled Nursing
- developing a Planning Guide for individuals and families for use regardless of access to waiver services
- continued participation in the community of practice initiative around Charting the Lifecourse©
- increasing the number of providers per region identified as having expertise to support people with complex needs.

### Notable updates in this report include:

• There was an increase in the number of DD providers from 1254 to 1588 since the last semi-annual report.

- Adults with DD residing in nursing facilities decreased from 338 in April 2022 to 210 in October 2022.
- 72% of localities in Virginia have an integrated living result of 86% or higher.
- Increases were seen across all regions for all waivers with the exception of Building Independence Waiver in Region 1, which saw a decrease of four individuals from the last report.
- Authorizations for Electronic Home-based Supports increased by 89.8% moving from 49 to 93 over six months.
- Individual/SDM Choice continues to be primary reason people choose less integrated settings based on Regional Support Team data with the highest numbers seen in Regions 3 and 4.

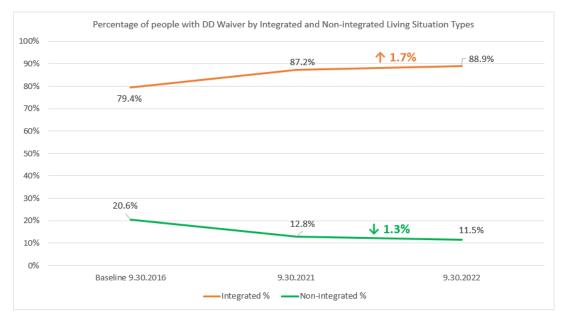
Providers are encouraged to download and use the Baseline Measurement Tool, which contains Waiver Management System data from current waiver authorizations. The BMT provides baseline and subsequent data on integrated services, collected at six month intervals, across all cities and counties in Virginia. The BMT also considers the DD Waiver population in each locality including type of waiver and Supports Intensity Scale<sup>®</sup> (SIS<sup>®</sup>) level. The BMT, webinar slideshows, and other materials related to available Provider Development are for download online at http://www.dbhds.virginia.gov/developmental-services/provider-development. Any specific questions about the report can be directed to the Office of Provider Development at DBHDS (eric.williams@dbhds.virginia.gov).

## PERFORMANCE MEASURES AND DEMOGRAPHICS

This section contains information about the results of various performance measures and additional data that helps in understanding the DD system of supports and services in Virginia. This content will be included in future reports to provide a more comprehensive understanding of services and people who access them.

Measure 1: Data continues to indicate an annual 2% increase in the overall DD waiver population receiving services in the most integrated settings. The chart below illustrates the overall trend in living situations for people with DD Waiver from baseline to September 30, 2022. Over the course of the last year, there has been an overall shift of 1.7% change toward more integrated settings. Measure not met at a 1.7% annual increase. A decrease in less integrated settings was seen at 1.3% for the same time period.

**Method:** The DBHDS HCBS Residential Settings Report developed from WaMS data provides the results included here. Table 2 of the report provides baseline and subsequent data at six-month intervals regarding the number and percentage of the DD waiver population residing in integrated and non-integrated settings based on service authorizations. Integrated change is derived from this report and visualized below (Report ID DR0055).



	Integrated #	Integrated %	Non-integrated #	Non-integrated %
Baseline 9.30.2016	9425	79.4%	2446	20.6%
9.30.2021	13458	87.2%	1969	12.8%
9.30.2022	14178	88.9%	1770	11.5%

**Integrated living situations by locality as of 10.25.22** (sorted from most to least integrated) **Source:** Individual's location reported as county in WaMS (Report ID DR0022)

Locality	Integrated	Non-Integrated	Total	% Integrated
Statewide	14,334	1,668	16,002	89.6%
Appomattox County	40		40	100.0%
Bedford City	4		4	100.0%
Bland County	10		10	100.0%
Buchanan County	36		36	100.0%
Buckingham County	16		16	100.0%
Charles City	6		6	100.0%
Colonial Heights City	35		35	100.0%
Covington City	11		11	100.0%
Craig County	7		7	100.0%
Emporia City	8		8	100.0%
Falls Church City	3		3	100.0%
Floyd County	50		50	100.0%
Fluvanna County	25		25	100.0%
Franklin City	26		26	100.0%
Grayson County	41		41	100.0%
Greene County	26		26	100.0%
Greensville County	12		12	100.0%
Highland County	8		8	100.0%
Isle of Wight County	31		31	100.0%
King and Queen County	9		9	100.0%
Lancaster County	6		6	100.0%
Lee County	33		33	100.0%
Lexington City	6		6	100.0%
Madison County	21		21	100.0%

Integrated Residential by Locality as of 10/25/2022

Locality	Integrated	Non-Integrated	Total	% Integrated
Manassas Park City	4		4	100.0%
Middlesex County	20		20	100.0%
Northampton County	38		38	100.0%
Northumberland County	11		11	100.0%
Norton City	5		5	100.0%
Pittsylvania County	176		176	100.0%
Poquoson City	6		6	100.0%
Powhatan County	51		51	100.0%
Pulaski County	69		69	100.0%
Smyth County	84		84	100.0%
Southampton County	24		24	100.0%
Staunton City	69		69	100.0%
Surry County	3		3	100.0%
Waynesboro City	53		53	100.0%
Westmoreland County	16		16	100.0%
York County	65		65	100.0%
Norfolk City	431	2	433	99.5%
Danville City	213	1	214	99.5%
Montgomery County	128	1	129	99.2%
Augusta County	168	2	170	98.8%
Louisa County	65	1	66	98.5%
Warren County	57	1	58	98.3%
Other County	48	1	49	98.0%
Amherst County	182	5	187	97.3%
Culpeper County	98	3	101	97.0%
Chesapeake City	417	16	433	96.3%
James City County	75	3	78	96.2%
Campbell County	171	7	178	96.1%
Nottoway County	24	1	25	96.0%

Integrated Residential by Locality as of 10/25/2022

Locality	Integrated	Non-Integrated	Total	% Integrated
Botetourt County	44	2	46	95.7%
Washington County	82	4	86	95.3%
Suffolk City	208	11	219	95.0%
Harrisonburg City	74	4	78	94.9%
Williamsburg City	18	1	19	94.7%
Lynchburg City	238	14	252	94.4%
Roanoke City	134	8	142	94.4%
Rappahannock County	16	1	17	94.1%
Loudoun County	343	22	365	94.0%
Wythe County	62	4	66	93.9%
Dinwiddie County	76	5	81	93.8%
Wise County	89	6	95	93.7%
Carroll County	202	14	216	93.5%
Bedford County	175	13	188	93.1%
Orange County	67	5	72	93.1%
Fauquier County	80	6	86	93.0%
Lunenburg County	13	1	14	92.9%
Spotsylvania County	290	23	313	92.7%
Prince George County	75	6	81	92.6%
Portsmouth City	278	23	301	92.4%
Virginia Beach City	850	71	921	92.3%
Caroline County	47	4	51	92.2%
Roanoke County	255	22	277	92.1%
Galax City	34	3	37	91.9%
Fredericksburg City	56	5	61	91.8%
Alleghany County	42	4	46	91.3%
Hopewell City	49	5	54	90.7%
Halifax County	76	8	84	90.5%
Henry County	103	11	114	90.4%

Integrated Residential by Locality as of 10/25/2022

Locality	Integrated	Non-Integrated	Total	% Integrated
King William County	28	3	31	90.3%
Hanover County	232	25	257	90.3%
Prince William County	610	66	676	90.2%
Newport News City	291	32	323	90.1%
Brunswick County	27	3	30	90.0%
King George County	25	3	28	89.3%
Albemarle County	121	15	136	89.0%
Fairfax County	1376	175	1551	88.7%
Amelia County	15	2	17	88.2%
Hampton City	265	36	301	88.0%
New Kent County	22	3	25	88.0%
Accomack County	58	8	66	87.9%
Richmond County	68	10	78	87.2%
Radford City	20	3	23	87.0%
Franklin County	99	15	114	86.8%
Arlington County	167	26	193	86.5%
Chesterfield County	1049	171	1220	86.0%
Patrick County	24	4	28	85.7%
Petersburg City	129	22	151	85.4%
Rockbridge County	45	8	53	84.9%
Henrico County	608	121	729	83.4%
Gloucester County	74	15	89	83.1%
Giles County	34	7	41	82.9%
Dickenson County	29	6	35	82.9%
Page County	24	5	29	82.8%
Richmond City	264	55	319	82.8%
Alexandria City	95	20	115	82.6%
Shenandoah County	74	19	93	79.6%
Bristol City	38	10	48	79.2%

Integrated Residential by Locality as of 10/25/2022

Locality	Integrated	Non-Integrated	Total	% Integrated
Stafford County	216	57	273	79.1%
Charlotte County	26	7	33	78.8%
Martinsville City	33	9	42	78.6%
Salem City	33	9	42	78.6%
Fairfax City	7	2	9	77.8%
Rockingham County	127	37	164	77.4%
Tazewell County	61	19	80	76.3%
Scott County	44	14	58	75.9%
Essex County	18	6	24	75.0%
Russell County	50	17	67	74.6%
Frederick County	128	44	172	74.4%
Buena Vista City	8	3	11	72.7%
Goochland County	23	9	32	71.9%
Charlottesville City	54	22	76	71.1%
Nelson County	27	11	38	71.1%
Winchester City	57	24	81	70.4%
Cumberland County	19	9	28	67.9%
Mecklenburg County	64	31	95	67.4%
Prince Edward County	50	35	85	58.8%
Bath County	4	3	7	57.1%
Manassas City	9	7	16	56.3%
Sussex County	20	16	36	55.6%
Clarke County	11	9	20	55.0%
Mathews County	17	30	47	36.2%

Integrated Residential by Locality as of 10/25/2022

Measure 2: Data continues to indicate that at least 90% of individuals new to the waivers, including for individuals with a "supports need level" of 6 or 7, since FY16 are receiving services in the most integrated setting. The tables below provide data that illustrates that 95% of all people new to the DD waivers reside in integrated settings in FY22 and among those, 882 people with Supports Intensity Scale 6 or 7 receive services in integrated settings. Based on feedback from the consultant for the Independent Reviewer, DBHDS altered its method of reporting to provide a cumulative total for all FY since July 1, 2016. The cumulative result for all individuals newly enrolled since 2016 is provided below. At 95%, this measure is met.

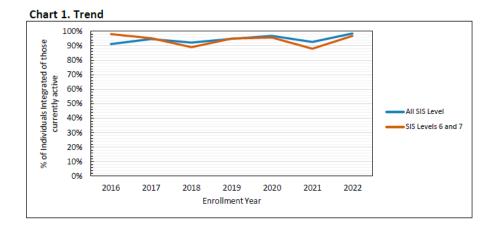
**Method**: WaMS enrollments during the fiscal year are counted for all new individuals and separately for new individuals with SIS Levels 6 & 7. Service authorization data is reviewed following a six-month post-period where residential setting is confirmed. (Report ID DR0017)

**Table 1.** Percent of Individuals enrolled in a waiver 7/1/2016-4/30/2022 who arecurrently active but do not have approved authorization for a Non-IntegratedService in the post period (4/1/2022 thru 10/31/2022)

Term	#
Numerator	5,615
Denominator	5,912
Answer	95.0%

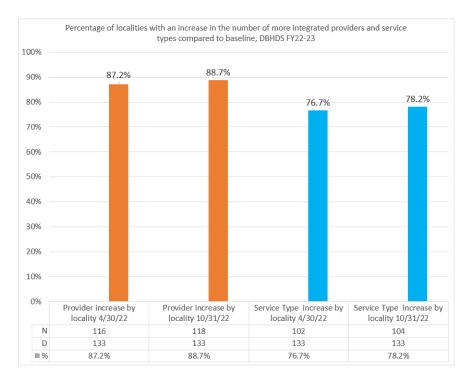
**Table 2.** Percent of Individuals enrolled in a waiver 7/1/2016-4/30/2022 who are currently active and with *a SIS Level 6 or 7* but do not have approved authorization for a Non-Integrated Service in the post period (4/1/2022 thru 10/31/2022)

Term	#
Numerator	882
Denominator	938
Answer	94.0%



**Measure 3: The Data Summary indicates an increase in services available by locality over time.** This chart reports the number of localities demonstrating an increase in the number of providers, within the locality, offering more integrated or specialized services above the established baseline and/or showing an increase in the number of integrated or specialized service types offered, within the locality, above the established baseline. Data reflects the comparison in numbers between April 2022 and October 2022 compared against the baseline in 2018. Provider growth increased by two localities in October 2022 compared to baseline. Gains were also seen in service type when compared to baseline in October of 2022 with an increase seen in 104 localities in October of 2022 compared to 102 in April of 2022.

**Method**: Data in the baseline measurement tool is calculated through an Excel formula that compares the total number of types of services operating in each locality on a given date per tab, which is then compared back to the number that were operating in each locality at baseline. To establish meeting this target, growth must be seen in one or more localities in provider count and/or the number of types of services offered and be greater than losses across provider counts and/or service types. (Report ID DR0058)



### Measure 4: 95% of provider agency staff meet provider orientation training requirements.

Success with this measure is dependent on providers completing the Quality Services Review (QSR) process without DBHDS being notified through an alert related to DSP competency. Health, Safety, and Wellbeing Alerts (HSW) related to a lack of training are reported through the Provider Quality Review (PQR) process. All providers receiving an alert are informed of the nest quarterly DSP Competency training session provided by the Office of Developmental Services. At 85% measure not met.

**Method**: The following PQR elements and procedures contribute to the determination of success with the measure:

### 39 How many employee records had documentation of provider-based orientation training?

• If number listed in question 39 is less than number listed in 36 (Number of employee records reviewed), the reviewer will complete and submit HSW alert (employee record reviewed without proof of provider-based orientation training).

### 41 How many employee records have proof of competency-based training?

• If number listed in question 41 is less than number listed in 36 (Number of employee records reviewed), the reviewer will complete and submit HSW alert (employee record reviewed without proof of competency-based training).

### 45 List staff without evidence of advanced competency training

• If the reviewer listed the staff name in question 45 of the employees reviewed in question 44, (How many employees serving someone in tier 4 have documentation of advanced competency

training?), reviewer will complete and submit HSW alert (employee record reviewed without proof of advanced competency training).

# Measure 5: 95% of provider agency direct support professionals (DSPs) meet competency training requirements.

Success with this measure is dependent on providers completing the Quality Services Review (QSR) process without DBHDS being notified through an alert related to DSP competency. Alerts for observed DSP competency concerns are provided through the Person-Centered Review (PCR) process. Counts for individuals with level six and seven support needs where an alert occurred are provided in results. All providers receiving an alert are informed of the nest quarterly DSP Competency training session provided by the Office of Developmental Services. At 91% measure not met.

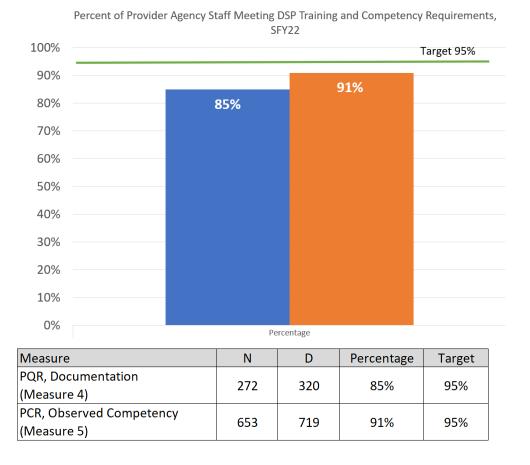
**Method**: The following PCR elements and procedures contribute to the determination of success with the measure:

91 For individuals with behavioral support plans, were staff addressing behaviors per the BSP?

- IF REVIEWER SELECTS "No", reviewer will complete and submit HSW alert.
- 92 Were staff adhering to medical and behavioral protocols as outlined in the plan?
  - IF REVIEWER SELECTS "No", reviewer will complete and submit HSW alert.

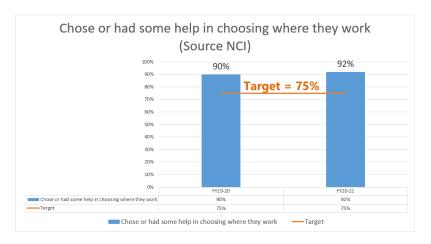
### 93 Did staff appear to understand the person's support needs?

- IF REVIEWER SELECTS "No", reviewer will complete and submit HSW alert.
- 94 Did the staff demonstrate competence in supporting the individual?
  - IF REVIEWER SELECTS "No", reviewer will complete and submit HSW alert.
- 107 Are staff able to describe things important to and important for the individual?
  - IF REVIEWER SELECTS "No", reviewer will complete and submit HSW alert.
- 108 Was staff able to describe the outcomes being worked on in this environment?
- IF REVIEWER SELECTS "No", reviewer will complete and submit HSW alert.
- 109 Could the staff describe the medical support needs of the individuals?
  - IF REVIEWER SELECTS "No", reviewer will complete and submit HSW alert.
- 110 Were staff familiar with medical protocols to support the person?
  - IF REVIEWER SELECTS "No", reviewer will complete and submit HSW alert.
- 112 Could the staff describe behavioral support needs?
  - IF REVIEWER SELECTS "No", reviewer will complete and submit HSW alert.
- 113 Were staff familiar with behavioral protocols to support the person?
- IF REVIEWER SELECTS "No", reviewer will complete and submit HSW alert.
- 115 Does the staff know what medications the person is taking?
  - IF REVIEWER SELECTS "No", reviewer will complete and submit HSW alert.
- 116 Can the staff list the most common side effects of the medications the person is on?
  - IF REVIEWER SELECTS "No", reviewer will complete and submit HSW alert.



### **QSR Round 4 Result for Measures 4 and 5**

**Measure 6:** At least 75% of people with a job in the community chose or had some input in choosing their job. The following chart is derived from the National Core Indicators In-Person Survey (IPS) State Report 2019-20 Virginia (VA) Report. Results indicate that a combined 90% of those surveyed who had a job (n=51) either chose or had some input on choosing their job. FY 20-21 results show an increase of 2% to 92% (n=52). Measure met. **Source**: National Core Indicators Virginia Report



**Measure 7: At least 95% of people receiving services in residential settings/their authorized representatives participate in the development of their own service plan.** 100% for Q4 FY22 and Q1 FY23. Measure met.

**Measure 8:** At least 86% of people receiving services in residential settings/their authorized representatives choose or help decide their daily schedule. 100% for Q4 FY22 and Q1 FY23. Measure met.

Measure 9: At least 75% of people receiving services who do not live in the family home/their authorized representatives chose or had some input in choosing where they live. 99.9% for Q4 FY22 and Q1 FY23. Measure met.

Measure 10: At least 50% of people who do not live in the family home/their authorized representatives chose or had some input in choosing their housemates. 99.8% for Q4 FY22 and Q1 FY23. Measure met.

**Method:** Data for these measures are derived from WaMS ISP Quarterly Aggregate reports by combining the numerators and then the denominators for FY22 Quarters 2 and 3 in each instance. To determine the same results for individuals receiving residential services, the number of "yes" responses for each of the same columns are filtered by service and then combined into a single result using the following 3 service columns: "Cur ServiceAuth Group Home, Cur ServiceAuth Sponsored Home, and Cur ServiceAuth Supported Living."

	All Individuals			Residential Only		nly
Q4 FY22 and Q1 FY23	N	D	Result %	N	D	Result %
Measure 7: At least 95% of people receiving services in residential						
settings/their authorized representatives participate in the	6190	6194	99.9%	2579	2579	100.0%
development of their own service plan.						
Measure 8: At least 86% of people receiving services in residential						
settings/their authorized representatives choose or help decide their	6193	6194	100.0%	2579	2579	100.0%
daily schedule.						
Measure 9: At least 75% of people receiving services who do not live in						
the family home/their authorized representatives chose or had some	6190	6194	99.9%	2577	2579	99.9%
input in choosing where they live.						
Measure 10: At least 50% of people who do not live in the family						
home/their authorized representatives chose or had some input in	6186	6194	99.9%	2574	2579	99.8%
choosing their housemates.						

### Demographics

In order to understand the composition of the DD waiver and waiting list, the following section includes data specific to the types of services received, including who receives them and where they are provided. Regional data is provided when available.

### Individuals on the Waiver Waiting List

The two following tables provide information about people on the DD waiver waiting list. Below, you will find a breakdown of DBHDS regions as of March 2023 by priority (table 1) and by time on the list (table 2). **Source:** WaMS waitlist data (Report ID DR0018)

### PROVIDER DATA SUMMARY – November 1, 2022

DBHDS Region	Priority 1	Priority 2	Priority 3	Total	Percent
1	736	906	1,172	2,814	19%
2	1,597	2,158	1,241	4,996	34%
3	332	846	820	1,998	14%
4	574	1,459	687	2,720	18%
5	237	942	1,084	2,263	15%
Total	3,476	6,311	5,004	14,791	100%
Percent	24%	43%	34%	100%	

Table 1. Count of Individuals on Waitlist by DBHDS Region and Priority

### Table 2. Count of Individuals on Waitlist by Time on Waitlist and Age

		A				
Time on Waitlist	<18.0	18.0 to <22.0	22.0 to <65	65+	Total	Percent
<1.0 year	311	70	104	6	491	3%
1.0 to <3.0 years	2,026	553	674	26	3,279	22%
3.0 to <5.0 years	2,119	702	896	24	3,741	25%
5.0 to <10.0 years	2,786	841	1,429	27	5,083	34%
10+ years	537	467	1,166	27	2,197	15%
Total	7,779	2,633	4,269	110	14,791	100%
Percent	53%	18%	29%	1%	100%	

[1] Region is determined by CSB

[2] Time on Waitlist considers only the most recent time on Waitlist for each individual.

**Residential setting by size and type as defined by the Integrated Residential Services Report (Source)** Comparison of living situations between 9.30.16 and 9.30.22 (Report ID DR0055)

Cottlement Living Situation	Integrated		eline 2016 %	9.30.	% Change from	
Settlement Living Situation	Setting Yes	#	70	#	%	Baseline
Group Home (Less than or equal to 4 bed)	res	2,189	18.4%	3,197	20.0%	+46%
Other Group Home	No					-28%
(greater than 4 bed)		2,446	20.6%	1,770	11.1%	
Sponsored Residential	Yes	1,513	12.7%	1,998	12.5%	+32%
Supported Living	Yes	50	0.4%	228	1.4%	+356%
Living with Family *	Yes	5,459	46.0%	7,789	48.8%	+43%
Living Independently	Yes	214	1.8%	804	5.0%	+276%
Building Independence *	Yes	0	0.0%	162	1.0%	+ infinity
Total		11,871	100.0%	15,948	100.0%	+34%

# Day services by type as defined by the Integrated Day Services Report (source)

Comparison of day situations between 9.30.16 and 3.31.22 (Tables 1 and 2 below). (Report ID DR0023)

				% change
		Baseline		from
Service	Procedure Code	9/30/2016	9/30/0222	Baseline
Individual Supported Employment	H2023	295	672	120%
Group Supported Employment	H2024x	701	320	- <b>5</b> 5%
Workplace Assistance	H2025	6	51	967%
Community Engagement	T2021	130	2,110	1518%
Community Coaching	97127x, T2013x	7	209	3043%
Group Day Support*	97150, T2025, 97537	-	5,274	0%

### Additional population demographics

In order to understand the composition of the DD waiver, the following tables include data specific to the types of services received, including who receives them and where they are provided. Regional data is provided when available.

**Method:** Data is transferred from the baseline measurement tool related to individuals with waivers. Data related to ICF/IIDs, Nursing Facilities, Housing, and the training center are reported by subject matter experts who track census data in each area respectively. (Report IDs DR0058, DR0020). Arrows represent change from the last report.

Demographic	Total	Region	Region	Region	Region	Region	
		1	2	3	4	5	
Number of Individuals in all DD waivers	16197个	3447个	2955个	2772个	3368个	3655个	
Number of Individuals with BI Waiver	312↓	37↓	69个	64个	70个	72个	
Number of Individuals with FIS Waiver	4197个	938个	1115个	562个	688个	894个	
Number of Individuals with CL Waiver	11688个	2472个	1771个	2146个	2610个	2689个	
Number of Individuals in Training Centers	68↓					68↓	
Number of children residing in ICF/IIDs	107↓						
Number of children residing in NFs	58↓						
Number of adults residing in ICF/IIDs	432↓						
Number of adults residing in NFs	210↓						
Number of Individuals in independent housing	1879 个						
Demographic		Total					
				(unique)			
Number of licensed DD providers				1588 个			
Number of providers of supported employment				43↓			
Number of ICF/IID non-state operated beds for c	116						
Number of ICF/IID non-state operated beds for a	dults	488 🗸					
Number of independent housing options				1229			

Licensed DD Services as of 10/31/22	Count of Providers
DD Case Management Service	40
DD Center-Based Respite Service	6 个
DD Children Group Home Residential Service	35 个
DD Day Support Service	390 个
DD Group Home Service	588 个
DD Group Home Service - REACH	2
DD In-home Respite Service	17 个
DD Outpatient Service/Crisis Stabilization - REACH	14 个
DD Residential Respite Service	31 个
DD Sponsored Residential Home Service	153 个
DD Supervised Living Service	44 个
DD Suportive In-home Service	259 个
Group Home Service - REACH	6 个
ICF-IID	21 个
ICF-IID for Children and Adolescents	2
Grand total provider count for all services	1588

### **DD** Waiver Service Authorizations

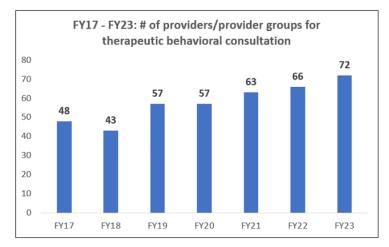
### **Source:** WaMS service authorizations

#### Services Active: 05/01/2022 to 10/31/2022

Table 1. Total number of unique individuals authorized for each Service Type in the six month window, Total and by DBHDS Primary Region and Levels

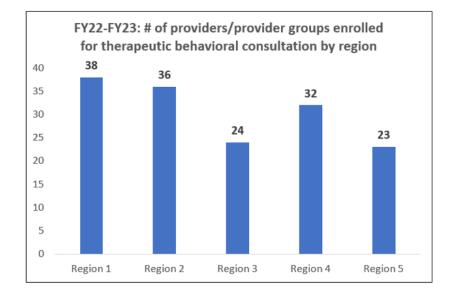
							Total	Total
							SIS©	SIS©
Service Type	Total	Region 1			•	•	Level 6	Level 7
Assistive Technology	347	101	132	31	34	49	34	39
Benefits Planning Services	120	34	32	12	18	24	2	5
Community Coaching	264	76	50	47	45	46	16	76
Community Engagement	2421	818	305	463	253	582	64	135
Community Guide	70	16	40	4	3	7	1	2
Community-Based Crisis Supports	127	5	42	36	44	0	2	23
Companion	277	41	210	1	1	24	6	31
Companion - CD	1165	368	169	174	265	189	30	69
Crisis Support Services	16	1	15	0	0	0	0	4
Electronic-based Home Supports	128	42	61	4	3	18	3	8
Employment & Community Transportation	18	4	12	0	0	2	1	1
Environmental Modifications	84	27	17	3	11	26	28	11
Group Day Support	6006	1,196	979	865	1,636	1,330	306	362
Independent Living Supports	152	9	50	35	21	37	0	0
Individual & Family Caregiver Training	5	0	2	0	0	3	0	0
In-home Supports	2021	281	360	422	218	740	91	89
Integrated Group Residential	3432	561	686	444	917	824	273	342
NonIntegrated Group Residential	1962	404	365	290	575	328	140	67
Peer Mentoring	4	0	2	0	2	0	0	1
PERS	22	8	9	4	0	1	3	1
Personal Assistance - AD	833	81	531	38	51	132	103	52
Personal Assistance - CD	4292	1,204	722	863	751	752	540	263
Private Duty Nursing	357	35	167	31	45	79	282	10
Respite	4413	1,119	1,109	631	729	825	477	293
Shared Living	3	0	0	1	2	0	0	0
Skilled Nursing	194	62	33	60	3	36	72	7
Sponsored Residential	2339	609	104	616	349	661	291	297
Supported Employment, Group	362	34	134	6	123	65	1	8
Supported Employment, Individual	785	225	139	149	184	88	12	28
Supported Living	178	51	16	8	80	23	1	5
Therapeutic Consultation	2240	340	615	243	626	416	103	374
Transition Services	1	0	0	0	0	1	0	0
Workplace Assistance	67	30	17	6	14	0	0	1
Total # of Unique Individuals	15,711	3,332	2,888	2,746	3,192	3,553	1,410	1,092

### **Behavioral Services Providers**



Developmental Services and Office of Clinical Quality Improvement 11.1.22 (final 4.14.23)

The data above display the number of providers and/or provider organizations providing therapeutic consultation behavioral services over the past six fiscal years (note: FY23 data is through early December 2022). It should be noted that the counts presented may display individual practitioners that have a solo practice consisting of one behaviorist, as well as larger provider groups that have many behaviorists employed and are providing this waiver service.



The graph above displays the number of providers and/or provider organizations by region that are providing therapeutic consultation behavioral services to individuals from FY22 through FY23 (note: data are through early December 2022). When reviewing these data, it should be noted that numerous providers deliver services to individuals across multiple Community Services Boards and regions of the state. Therefore, a total count of providers in the histogram above will exceed the total number of providers that are delivering this service.

**Method:** Bi-annually, a report is created in an Excel document using data derived from the Virginia Waiver Management System. This report captures all individuals and associated providers that have a service authorization for therapeutic consultation services. These data are examined specific to providers to arrive at a count of providers that are delivering therapeutic consultation behavioral services. Data are also regionalized based on the health planning regions in which providers are currently delivering services.

## Spotlight on Measurability in Virginia's PC ISP

# Develop a simple, observable statement that describes what will be attempted. Make it specific.

Kayla cooks dinner.

This is the support activity! Next, we need to define the measure based on the type of support provided.

2. <u>Choose the support type first</u> and then make it **measurable**. Will supports be routine, for skill-building, or health and safety? Just choose one type of support per support activity. Remember, an individual can have more than one activity per outcome when two (or more) types of support are needed.

### **Routine Support**

Kayla cooks dinner weekly through her next annual meeting.

Skill-building Support

Kayla gathers three needed menu items for dinner without support at least once per week for six weeks in a row.

Health & Safety Support

Kayla follows her mealtime protocol daily to ensure proper nutrition until it is removed by her physician. This is the measure! Choose whether the person wants routine supports, wants to develop skills with this activity, or will have supports needed to be healthy and safe. If skillbuilding is being attempted, pick one skill that is based on the person's gifts and talents or what they want to learn. Keep it simple and in a "yes" and "no" format, so that progress is easier to determine.

Answer 3, 4, and 5 and revise the measure as needed to improve the wording.

### 3. Is the measure achievable?

Does the measure appear achievable for the person? Does it match the type of support they want and what they want to achieve?

### 4. Is the measure relevant?

Does the measure reflect the person? Does it make sense knowing who they are, what they enjoy, and how they want their life to be?

### 5. Is the measure time-bound?

For routine supports, does the measure include how often the activity will occur through the target date?

For skill-building, does the measure reflect one specific skill that will be the focus of skill-development? Does the measure include how often the skill will be observed and how long the person will be successful to ensure learning?

For health & safety supports, does the measure describe what protocol or methods will be used to help the person remain safe and which qualified professional will determine that the supports are no longer needed?

Using the SMART Framework to Develop Support Activities in Virginia's PC ISP

> SMART stands for Specific, Measurable, Achievable, Relevant, and Time-bound. To follow the SMART framework, wording must be:

- explicit in what is to be accomplished,
- quantifiable in some way,
- realistic and within reach,
- significant and aligned with broader efforts,
- and time-bound with a deadline.

By using SMART, individuals and organizations can improve their focus, accountability, and decisionmaking about implementing actions and tracking outcomes.

To the left is an example of how one support activity under the outcome "Kayla tries more foods, in order to have more variety in her diet," is addressed. The activity "Kayla cooks dinner" is expressed in three ways based on the focus of support. The measure selected from the three options is determined with Kayla and added to her Person-Centered ISP (PC ISP) in the Part V Plan for Supports.

#### Read more at:

https://townhall.virginia.gov/L /ViewGDoc.cfm?gdid=6379

### **Children's and Youth Residential**

Based on the information provided here, showing the regional breakdown of providers and number of children/youth supported, a limited number of children currently receive congregate residential services under the DD waiver in Virginia with none receiving these services in region 2 currently. The data provided in the three tables below are based on approved service authorization lines as of 10/31/22. The region determined by service zip code and provider tax identifier for individuals from birth age less than 18. **Source**: WaMS Service Authorizations (Report ID DR0019)

Data based on Approved Service Authorization Lines Over Reported Period: May 1, 2022 thru October 31, 2022 Region determined by Service Zip Code by Provider Tax Identifier Birth Age less than 18 years as of October 31, 2022.

Table 1. Counts of distinct individuals by	y Authorization and Region.
--	-----------------------------

Approved Authorization		Pr		Distinct			
Approved Authorization	1	2	3	4	5	Total	%
Group Home 4 or Fewer	0	0	3	4	0	7	24%
Group Home 5 or More	0	0	0	0	0	0	0%
Sponsored Residential	1	1	5	2	13	21	72%
Distinct Total	1	1	8	6	13	29	100%
	3%	3%	28%	21%	45%	100%	

Table 2. Counts of Providers (distinct Tax Identifiers) by Authorization and Region. For those Authorizations listed in Table 1.

Approved Authorization		Prima		Distinct			
Approved Authorization	1	2	3	4	5	Total	%
Group Home 4 or Fewer	0	0	2	1	0	2	22%
Group Home 5 or More	0	0	0	0	0	0	0%
Sponsored Residential	1	1	4	2	5	7	78%
Distinct Total	1	1	3	3	4	9	100%
Percent	11%	11%	33%	33%	44%	100%	

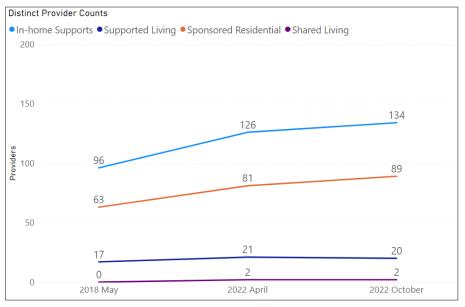
Table 3. Children's Residential Providers. Counts are of Children.

		Primary DBHDS	Primary DBHDS													
		Region 1	Region 2		Prin	hary DBHD	S Region 3	1	Prim	ary DBHDS Regio	on 4	Pr	rimary DBHD	S Region 5		
		MADISON									GUM			NEWPORT	VIRGINIA	
		HEIGHTS	FAIRFAX	ABINGDON	FLOYD	GALAX	ROANOKE	WYTHEVILLE	CHESTER	CHESTERFIELD		CHESAPEAKE	HAMPTON	NEWS	BEACH	
Provider Name	Tax Identifier		22030	24211	24091	24333	24019	24382	23836	23832	23065	23321	23666	23601	23455	Total
Arrows of Purpose	831305799	-	-	-	-	-	-	-	-	-	-	1	-	-	-	1
COMMUNITY SERVICES OF VA INC	542041107	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1
DEPAUL COMMUNITY RESOURCES	541108079		-	1	-	-	3	-	-	-	-	-	-	-	-	4
FELTS SUPPORTS FOR LIVING, LLC	461193921	-	-	-	-	1	-	2	-	-	-	-	· -	-	-	3
SERENITY C & C INC	711038747		-	-	-	-	-	-	1	-	-	-	-	7	-	8
SUNRISE COMMUNITY OF VIRGINIA INC	521929588		1	-	-	-	-	-	-	-	-	-	-	-	-	1
TEEN OPTION INC	270672590	-	-	-	-	-	-	-	-	4	-	-	-	-	-	4
TRADITIONAL CARE SERVICES	465731445	-	-	-	-	-	-	-	-	-	-	-	4	-	-	4
WALL RESIDENCES INC	541959395	1	-	-	1	-	-	-	-	-	1	-	-	-	-	3
1	otal Children	1	1	1	1	1	3	2	1	4	1	1	4	7	1	29
Total Providers by	Tax Identifier	1	1					3			3				4	9

Distinct Totals are not additive: Due to service or provider changes during the reporting period, the same Individual or Provider may appear in more than one category. For the same reason, percentages add to more than 100%.

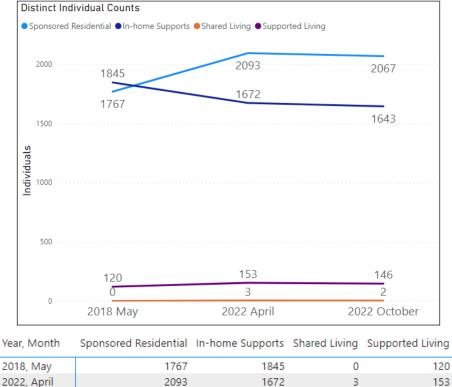
## Statewide Provider Counts and Individual Authorizations per Service

**Method:** The data in section derives from the 4/30/22 version of the Baseline Measurement Tool by comparing the baseline data to the 4/22/22 and 10/31/22 aggregate provider and individual service authorization counts. (Report ID DR0058)

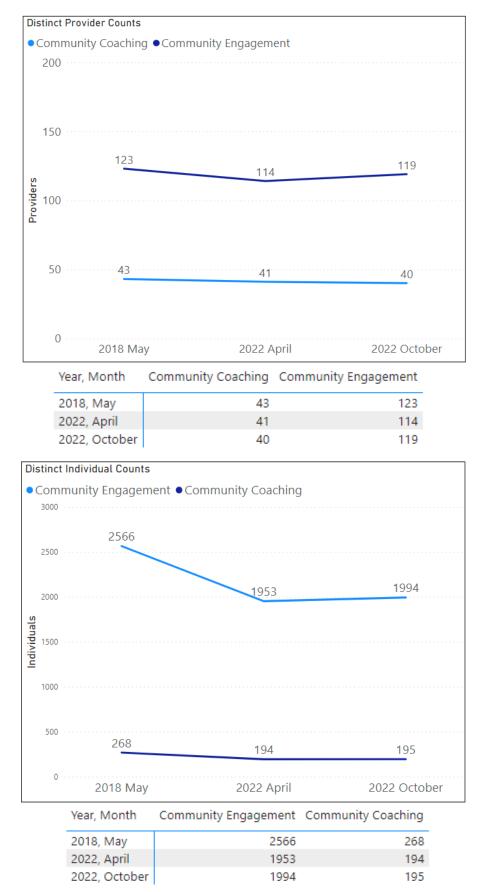


Year, Month In-home Supports Supported Living Sponsored Residential Shared Living

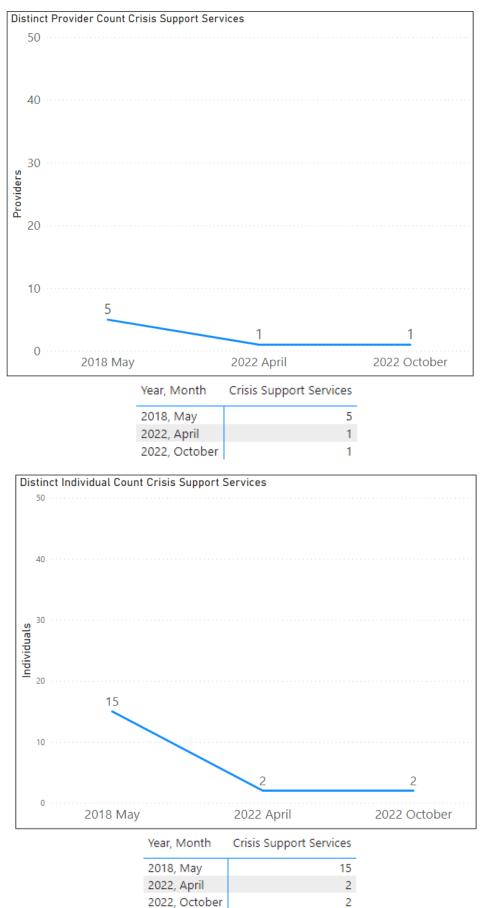
2018, May	96	17	63	0
2022, April	126	21	81	2
2022, October	134	20	89	2

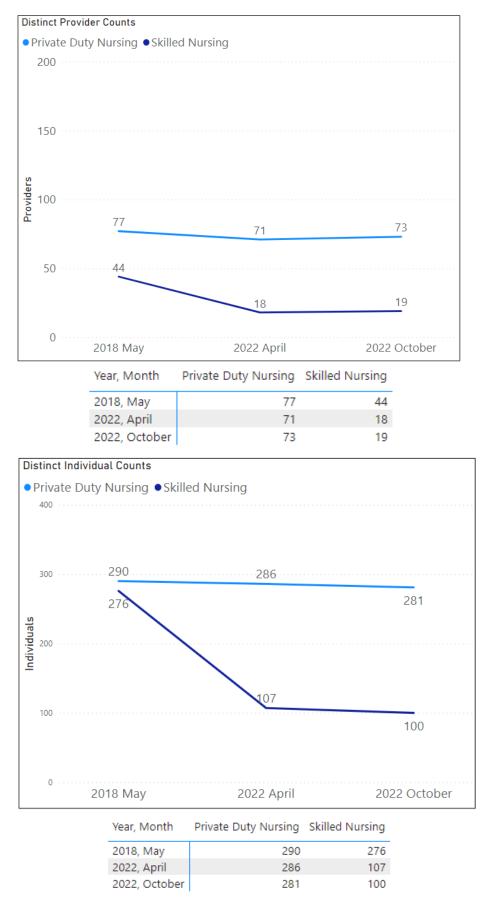


2010, May	1707	1045	0	120
2022, April	2093	1672	3	153
2022, October	2067	1643	2	146

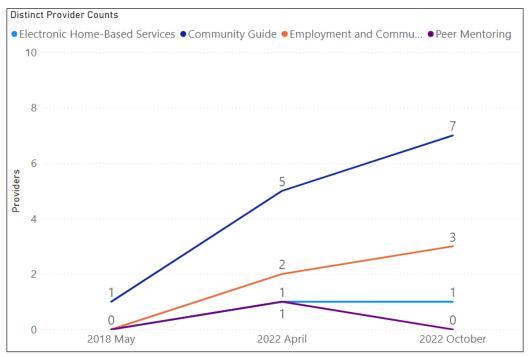


Developmental Services and Office of Clinical Quality Improvement 11.1.22 (final 4.14.23)



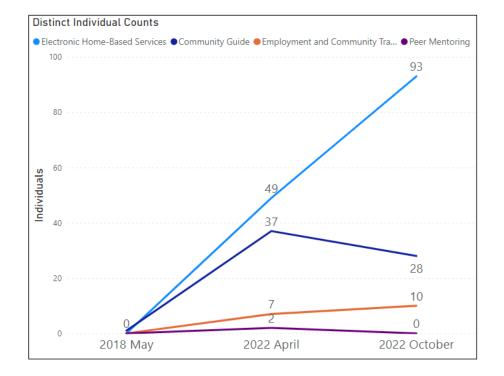






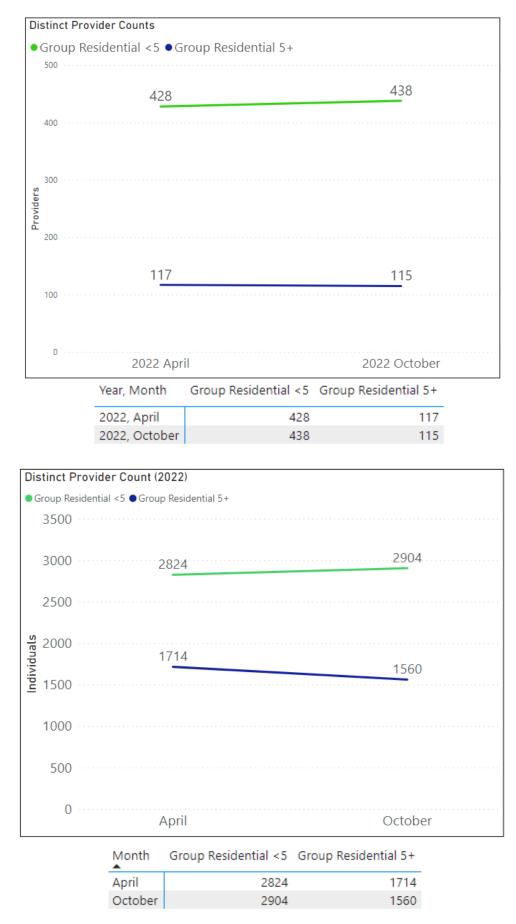
Year, Month Electronic Home-Based Services Community Guide Employment and Community Transportation Peer Mentoring

2018, May	0	1	0	0
2022, April	1	5	2	1
2022, October	1	7	3	0



Year, Month	Electronic Home-Based Services	Community Guide	Employment and Community Transportation	Peer Mentoring
2018, May	0	1	0	0
2022, April	49	37	7	2

2022, October



### PROVIDER DATA SUMMARY – November 1, 2022

**REGIONAL DATA** 

In order to increase a provider's ability to consider service expansion, this section reports availability across four subareas in each region. The data is based on a the numbers and lettering detailed below. In addition, these subareas are incorporated into the Baseline Measurement Tool for easy sorting.

**Method**: The data used in the development of this section derives from the 4/30/22 Baseline Measurement Tool. Data is transferring from the 5/10/18, 4/30/22, and 10/31/22 data tabs using Power Bi to determine provider counts per service by the following regions. (Report ID DR0058)

Region I						
1-A	1-B	1-C	1-D			
Caroline County	Augusta County	Harrisonburg City	Nelson County			
Fredericksburg City	Highland County	Rockingham County	Louisa County			
King George County	Staunton City	Frederick County	Albemarle County			
Spotsylvania County	Waynesboro City	Page County	Charlottesville City			
Stafford County	Alleghany County	Shenandoah County	Fluvanna County			
Culpeper County	Covington City	Warren County	Greene County			
Madison County	Bath County	Winchester City	Amherst County			
Orange County	Buena Vista City	Clarke County	Appomattox County			
Fauquier County	Lexington City		Bedford County			
Rappahannock County	Rockbridge County		Campbell County			
			Lynchburg City			

Region II						
2-A	2-B	2-C	2-D			
Alexandria City	Fairfax City	Loudoun County	Manassas City			
Arlington County	Fairfax County Falls Church City		Manassas Park City Prince William County			

	Regi	on III		
3-A	3-B	3-C	3-D	
Botetourt County	Franklin County	Carroll County	Buchanan County	
Craig County	Danville City	Galax City	Russell County	
Roanoke City	Pittsylvania County	Grayson County Tazewell Coun		
Roanoke County	Henry County	Bland County	Dickenson County Bristol City	
Salem City	Martinsville City	Wythe County		
Giles County	Halifax County	Floyd County	Washington County	
Montgomery County	Mecklenburg County	Pulaski County	Smyth County	
	Brunswick County	Radford City	Lee County	
	Patrick County		Norton City	
			Scott County	
			Wise County	

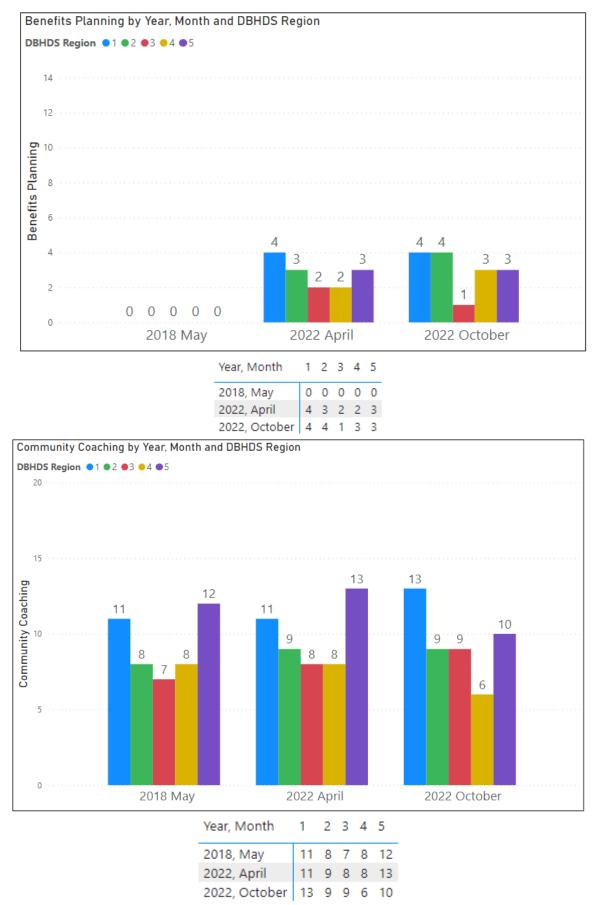
Region IV						
4-A	4-B	4-C	4-D			
Chesterfield County	Amelia County	Charlotte County	Dinwiddie County			
Colonial Heights City	<b>Buckingham County</b>	Lunenburg County	Greensville County			
Hanover County	Cumberland County	Nottoway County	Hopewell City			
Charles City County	Goochland County	Prince Edward County	Petersburg City			
Henrico County	Powhatan County	Emporia City	Prince George County			
New Kent County			Surry County			
Richmond City			Sussex County			

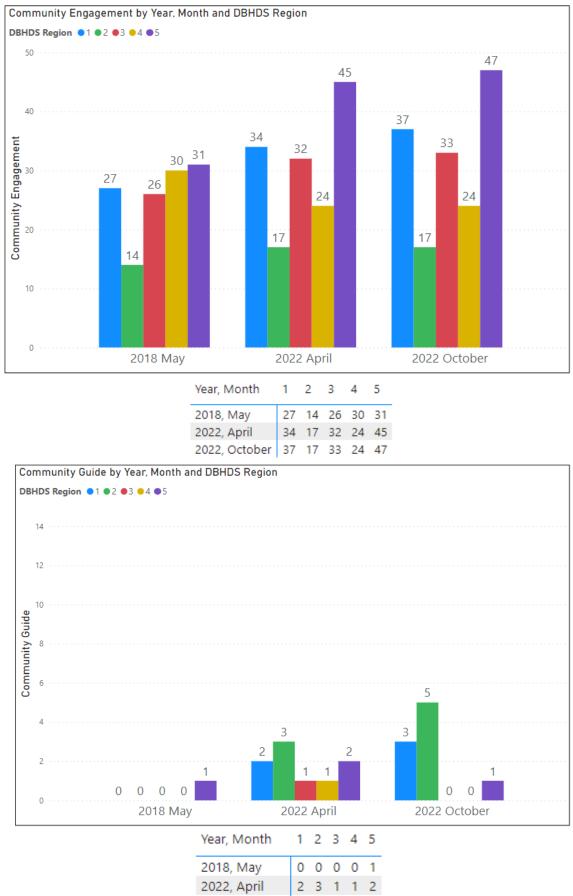
### Region V

5-A	5-B	5-C	5-D				
Essex County	Accomack County	James City County	Chesapeake City				
Gloucester County	Northampton County	Poquoson City	Norfolk City				
King and Queen County		Williamsburg City	Portsmouth City				
King William County		York County	Virginia Beach City				
Lancaster County		Hampton City	Franklin City				
Mathews County		Newport News City	Isle of Wight County				
Middlesex County			Southampton County				
Northumberland County			Suffolk City				
Richmond County							
Westmoreland County							

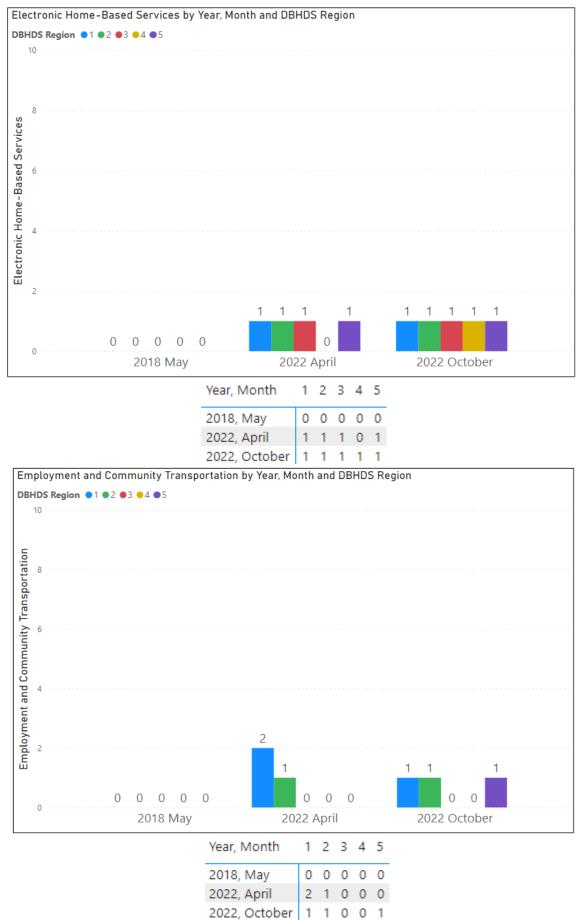
If you would like to see service change in a particular locality or area, apply filters in the Baseline Measurement Tool to explore service change across the sub-regions listed above. The following data reflect provider change per service at the regional level.

	<pre>&lt; Location&gt;</pre>					
DBHDS Region	Sub Region			BI waiver	FIS waiver	C waiv
<b>v</b>	-	CSB T	City/County	-	-	
1	1-A	RapA	Caroline County	0	12	3
1	1-A	RapA	Fredericksburg City	2	13	31
1	1-A	RapA	King George County	0	6	2:
1	1-A	RapA	Spotsylvania County	3	82	21
1	1-A	RapA	Stafford County	3	75	18
1	1-A	RapR	Culpeper County	1	20	8
1	1-A	RapR	Fauquier County	0	32	5
1	1-A	RapR	Madison County	0	4	1
1	1-A	RapR	Orange County	2	27	4
1	1-A	RapR	Rappahannock County	0	2	9
1	1-B	ALLE	Alleghany County	0	12	3:

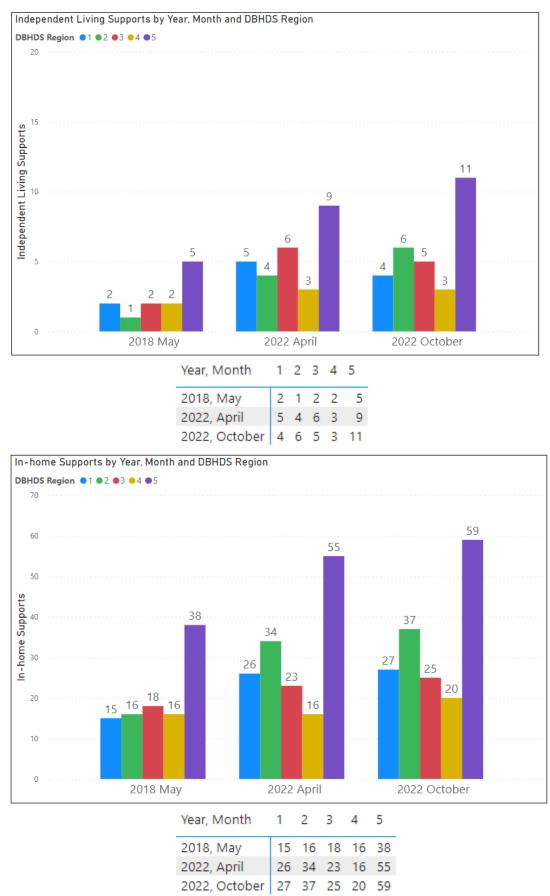


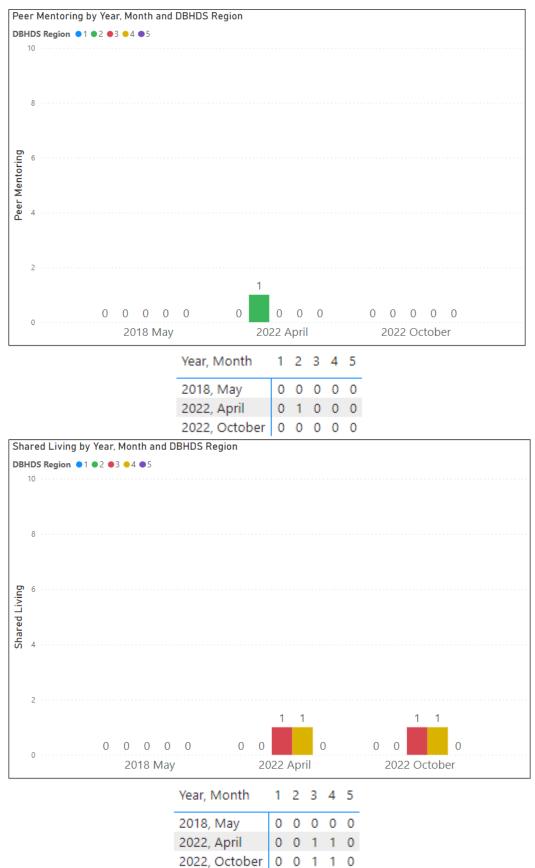


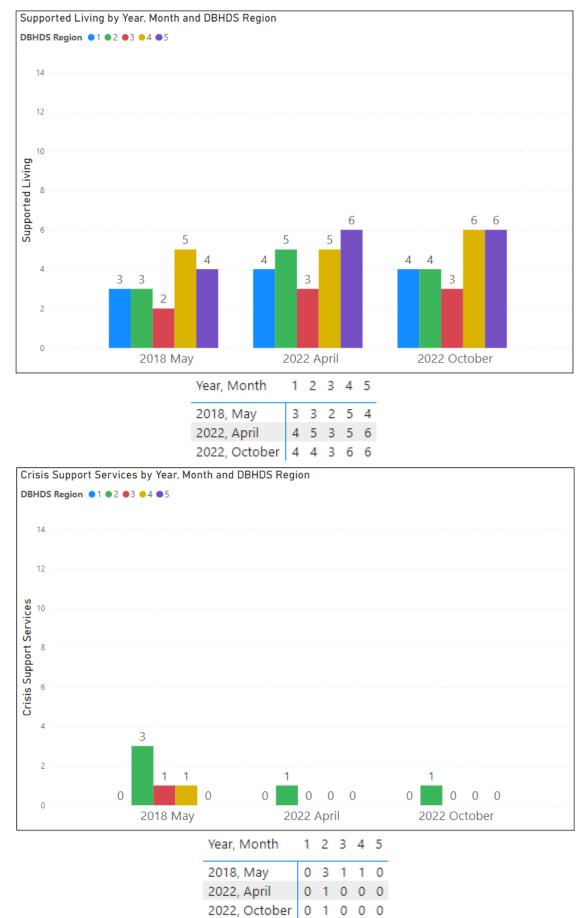
2022, October 3 5 0 0 1

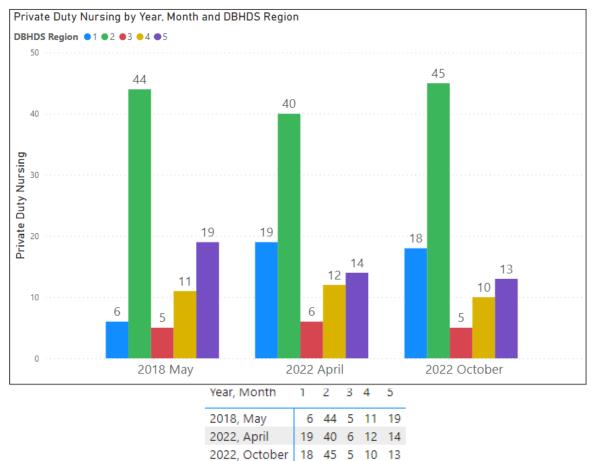


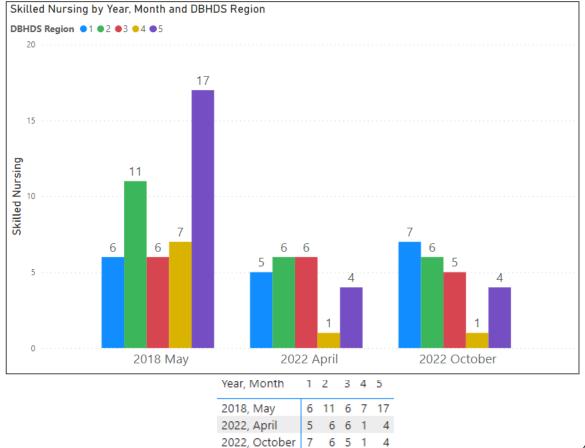
Developmental Services and Office of Clinical Quality Improvement 11.1.22 (final 4.14.23)



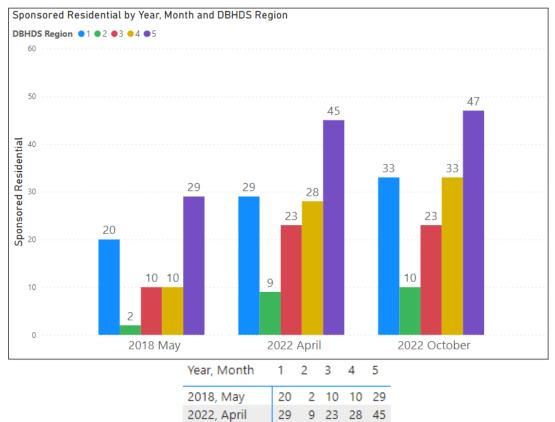


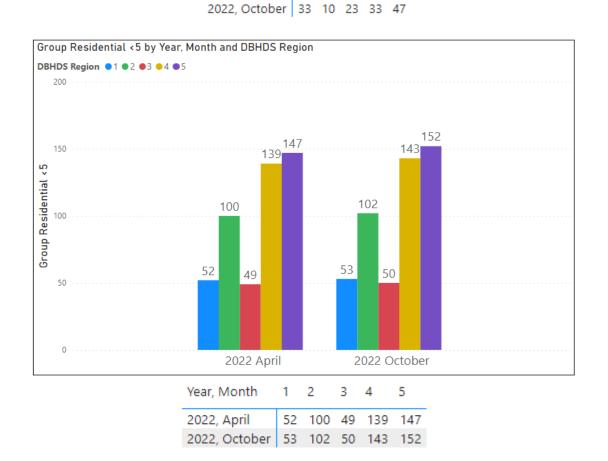


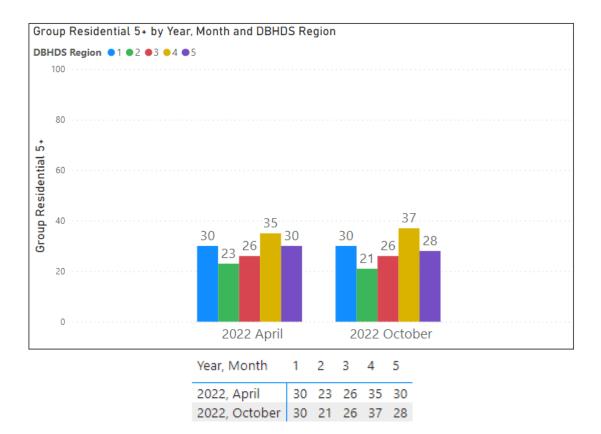




Developmental Services and Office of Clinical Quality Improvement 11.1.22 (final 4.14.23)







## IDENTIFIED GAPS

Provider Development leads five Regional Support Teams (RSTs) designed to provide support with ensuring informed choice and with removing barriers to more integrated service options across Virginia. This section highlights findings from RST processes.

DBHDS is integrating the RST referral process into the Waiver Management System to ease communication, tracking and data reporting. RST barrier data is included in this Provider Data Summary report. Moving RST processes into WaMS is expected to ease communication across involved stakeholders and enhance reporting capabilities. Due to additional time needed to secure funding and develop the module, the transition of the RST process into WaMS is planned for August 2022. At the time of this report, development is in the final stages, after which guidance can be developed and training and testing can proceed.

The barriers for the most integrated services are evaluated for frequency and location. The charts below provide details on five themes identified in the RST referral process and the distribution across regions during the 3<sup>rd</sup> and 4<sup>th</sup> quarters FY22 RST reports. The data results are consolidated into the categories provided. Barriers counts listed below are not inclusive of all possible barriers and may be duplicated across referrals. These charts represent the frequency a barrier was reported by region, upon initial referral, and within one of five given themes. Five referrals fell outside of themed areas as reported below. Additional themes will be developed to accommodate any emergency trends in the data.

**Method**: The data used in this section is derived from the 3<sup>rd</sup> and 4<sup>th</sup> quarters FY22 RST reports by combining and categorizing the results in the Barriers Section for each Region.

#### **Barrier Themes**

Individual/SDM Choice includes: Individual/ SDM/LG chooses less integrated option; Individual/Substitute Decision Maker (SDM)/Legal Guardian (LG) not interested in discussing/exploring options/refuses supports; Individual/SDM/LG does not choose provider after visit/still exploring community options

Lack of provider at referral includes: Services and activities unavailable in desired location; Professional Behavioral staff-Psychiatric, PBS facilitator, Applied Behavioral Analyst, or other specialist unavailable; Professional Behavioral staff-Dental, nursing or any medical specialist unavailable

**Provider/setting match** includes: Provider has determined placement is not a good match provider is not willing/able to support individual; Community location is not adapted for physical access (not wheelchair accessible or ADA compliant);

**Lack behavioral expertise** includes: Direct Support Staff-may not have experience or demonstrate competency to provide support with behavioral expertise

**Lack medical expertise** includes: Direct Support Staff-may not have experience or demonstrate competency to provide support with medical expertise

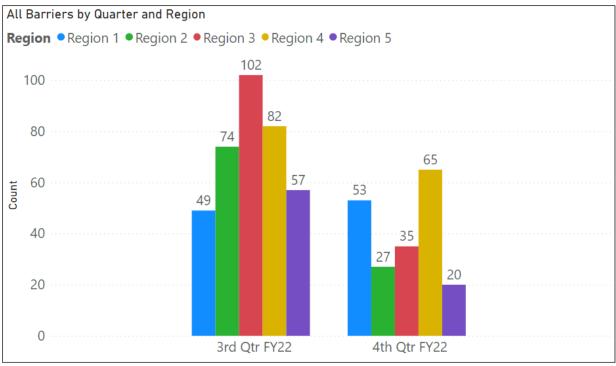
**Lack mental health expertise** includes: Direct Support Staff-may not have experience or demonstrate competency to provide support with mental health expertise

**Program readiness** includes: location not adapted for physical access; service/provider development and/or loss in construction, renovations, environmental modifications, and/or staffing, on-boarding, and/or licensing; Service/Provider Development or Loss-

Construction/Renovations/Environmental Modifications/Staffing/On-boarding/Licensing

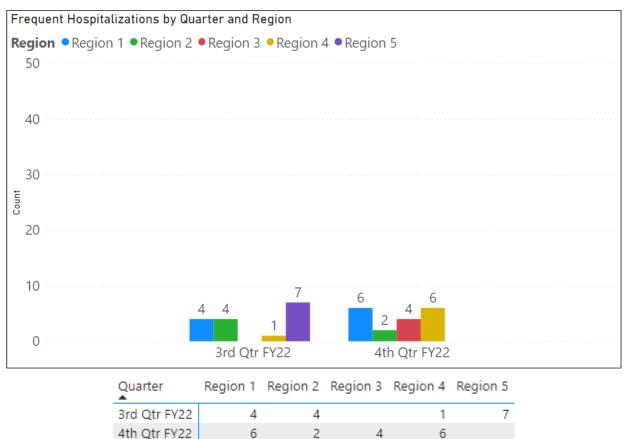
**Frequent Hospitalizations** includes: Individual has frequent medical and/or mental health hospitalizations; unexpected or late medical interventions

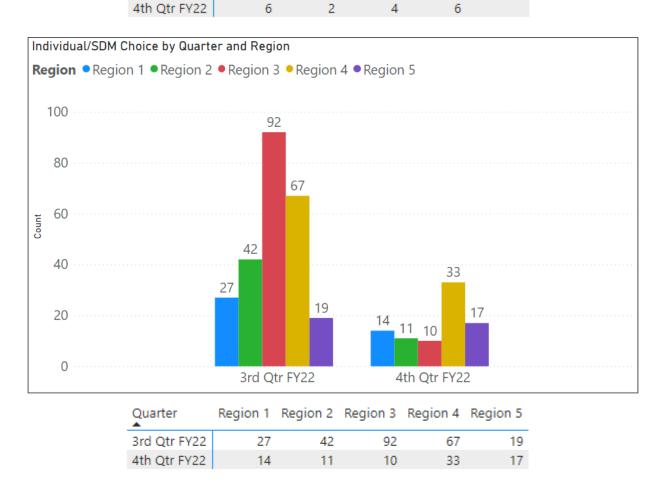
Services not in current waiver includes: Services not available under currently enrolled waiver

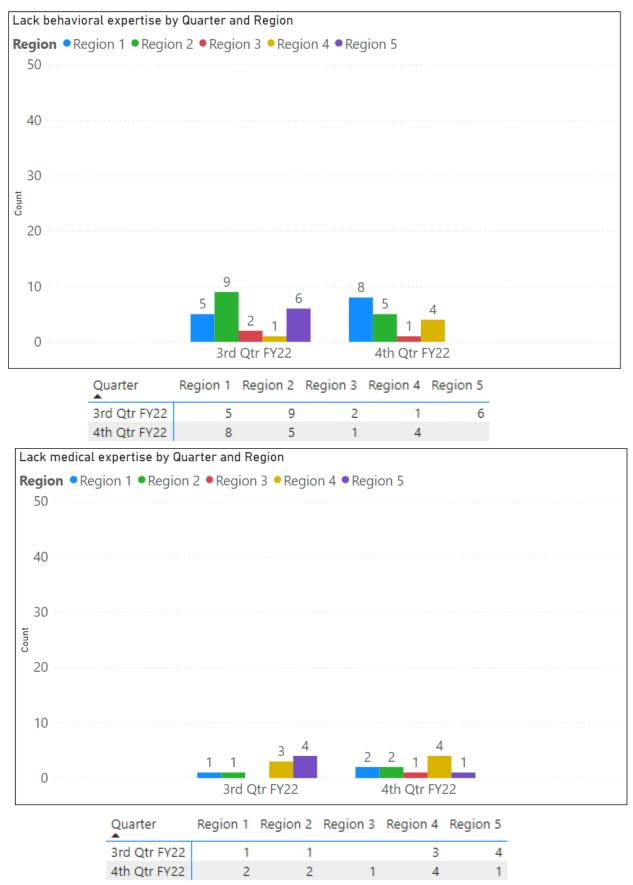


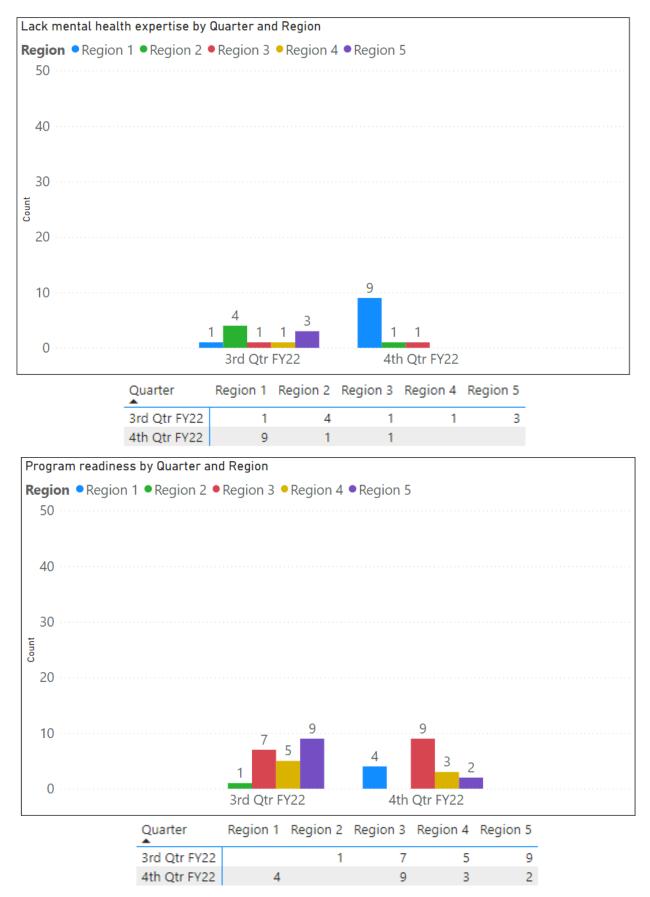
Quarter	Region 1	Region 2	Region 3	Region 4	Region 5
3rd Qtr FY22	49	74	102	82	57
4th Qtr FY22	53	27	35	65	20

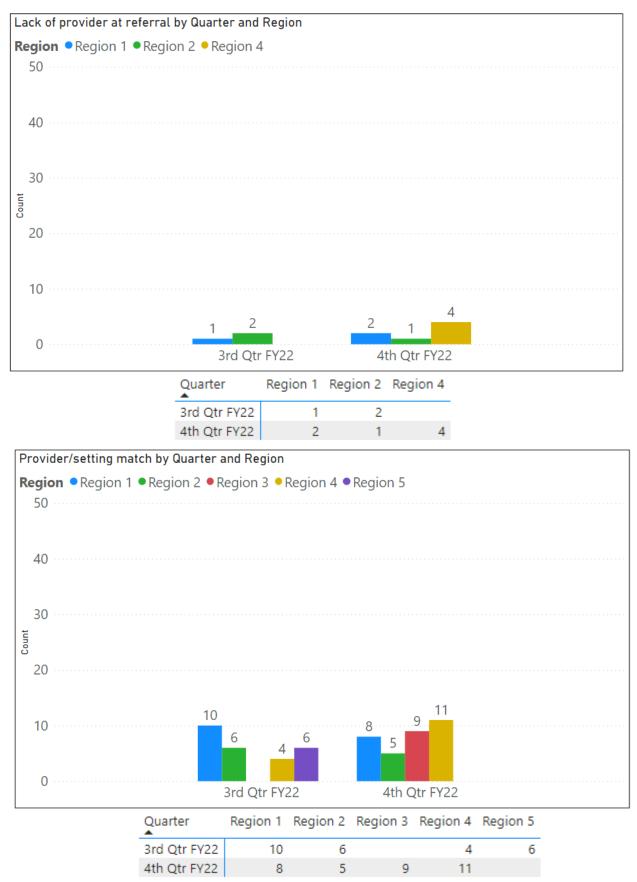
#### **Regional Data by Barrier and Quarter**

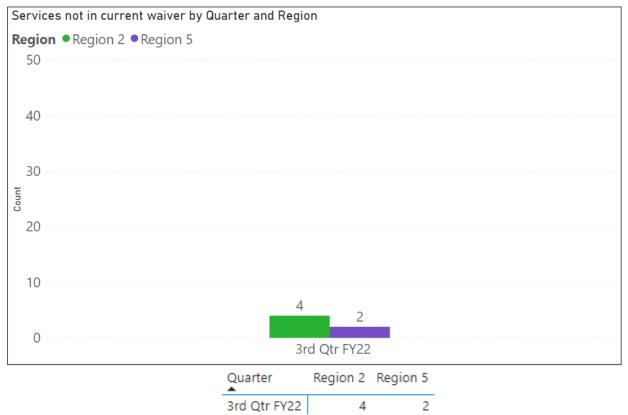












## Regional RST Barrier Data by Service (Q3 and Q4 FY22)

Sum of Barrier: Individual/SDM Choice	-					
	<ul> <li>Region 1</li> </ul>	Region 2	Region 3	Region 4	Region 5	Grand Total
CD/AD Personal Assistance Services		2				2
4th Qtr FY22		2				2
- Group Day Services	1					1
3rd Qtr FY22	1					1
Group Home Residential	31	43	91	83	36	284
3rd Qtr FY22	18	36	84	59	19	216
4th Qtr FY22	13	7	7	24	17	68
Independent Living Supports		1		2		3
3rd Qtr FY22		1		2		3
In-home Support Services	1	1	1	1		4
3rd Qtr FY22		1		1		2
4th Qtr FY22	1		1			2
□ Other	4	1	6			11
3rd Qtr FY22	4	1	6			11
Private Duty Nursing		1				1
4th Qtr FY22		1				1
Shared Living		1		1		2
3rd Qtr FY22		1		1		2
Skilled Nursing	2					2
3rd Qtr FY22	2					2
Sponsored Residential	2	2	3	11		18
3rd Qtr FY22	2	1	2	2		7
4th Qtr FY22		1	1	9		11
□Supported Living		1	1	2		4
3rd Qtr FY22		1		2		3
4th Qtr FY22			1			1
Grand Total	41	53	102	100	36	332

## PROVIDER DATA SUMMARY – November 1, 2022

Sum of Barrier: Frequent Hospitalization	s	-				
	Region 1	Region 2	Region 3	<b>Region 4</b>	Region 5	Grand Total
Group Home Residential	8	4	4	3	5	24
3rd Qtr FY22	3	2		1	5	11
4th Qtr FY22	5	2	4	2		13
Independent Living Supports				1		1
4th Qtr FY22				1		1
□ Other		1				1
3rd Qtr FY22		1				1
Private Duty Nursing		1				1
3rd Qtr FY22		1				1
Shared Living				1		1
4th Qtr FY22				1		1
Skilled Nursing					1	1
3rd Qtr FY22					1	1
Sponsored Residential	2			1	1	4
3rd Qtr FY22	1				1	2
4th Qtr FY22	1			1		2
Supported Living				1		1
4th Qtr FY22				1		1
Grand Total	10	6	4	7	7	34

Sum of Barrier: Lack of behavioral expertise	-					
· · · · · · · · · · · · · · · · · · ·	Region 1	Region 2	Region 3	Region 4	Region 5	Grand Total
CD/AD Personal Assistance Services		1				1
3rd Qtr FY22		1				1
□ CD/AD Respite		1				1
3rd Qtr FY22		1				1
Center-based Crisis Supports	1					1
4th Qtr FY22	1					1
Community-Based Crisis Supports	1					1
4th Qtr FY22	1					1
Crisis Support Services	1					1
4th Qtr FY22	1					1
□Group Home Residential	8	9	2	4	4	27
3rd Qtr FY22	4	5	2	1	4	16
4th Qtr FY22	4	4		3		11
□In-home Support Services		3				3
3rd Qtr FY22		2				2
4th Qtr FY22		1				1
∃ Other					1	1
3rd Qtr FY22					1	1
Private Duty Nursing	1					1
4th Qtr FY22	1					1
Sponsored Residential	1		1	1	1	4
3rd Qtr FY22	1				1	2
4th Qtr FY22			1	1		2
Grand Total	13	14	3	5	6	41

Sum of Barrier: Lack of medical expertise	-					
	Region 1	Region 2	Region 3	Region 4	Region 5	Grand Total
CD/AD Personal Assistance Services					1	1
3rd Qtr FY22					1	1
Group Home Residential	2	3		6	3	14
3rd Qtr FY22		1		2	2	5
4th Qtr FY22	2	2		4	1	9
In-home Support Services					1	1
3rd Qtr FY22					1	1
- Other				1		1
3rd Qtr FY22				1		1
Sponsored Residential	1		1			2
3rd Qtr FY22	1					1
4th Qtr FY22			1			1
Grand Total	3	3	1	7	5	19

Sum of Barrier: Lack of mental health exper	tise	*					
· .	w	Region 1	Region 2	Region 3	Region 4	Region 5	Grand Total
Center-based Crisis Supports		1					1
4th Qtr FY22		1					1
Community-Based Crisis Supports		1					1
4th Qtr FY22		1					1
Crisis Support Services		1					1
4th Qtr FY22		1					1
□Group Home Residential		6	5	1	1	2	15
3rd Qtr FY22		1	4	1	1	2	9
4th Qtr FY22		5	1				6
Private Duty Nursing		1					1
4th Qtr FY22		1					1
Sponsored Residential				1		1	2
3rd Qtr FY22						1	1
4th Qtr FY22				1			1
Grand Total		10	5	2	1	3	21

Sum of Barrier: Lack of provider at referral		-			
	Ŧ	Region 1	Region 2	Region 4	Grand Total
□Group Home Residential		2	1	3	6
3rd Qtr FY22		1	1		2
4th Qtr FY22		1		3	4
Private Duty Nursing		1	2		3
3rd Qtr FY22			1		1
4th Qtr FY22		1	1		2
Skilled Nursing				1	1
4th Qtr FY22				1	1
Grand Total		3	3	4	10

Sum of Barrier: Program Readiness		-				
	<ul> <li>Region</li> </ul>	1 Region 2	Region 3	8 Region 4	Region 5	Grand Total
CD/AD Personal Assistance Services					2	2
3rd Qtr FY22					2	2
□CD/AD Respite					1	1
3rd Qtr FY22					1	1
□Group Home Residential	4	1	16	8	7	36
3rd Qtr FY22		1	7	5	6	19
4th Qtr FY22	4		9	3	1	17
Skilled Nursing					1	1
4th Qtr FY22					1	1
Grand Total	4	1	16	8	11	40

### PROVIDER DATA SUMMARY – November 1, 2022

Sum of Barrier: Provider/setting match	-					
V	Region 1	Region 2	Region 3	Region 4	Region 5	Grand Total
□ Center-based Crisis Supports				1		1
3rd Qtr FY22				1		1
□Group Home Residential	8	10	7	8	5	38
3rd Qtr FY22	4	5		3	5	17
4th Qtr FY22	4	5	7	5		21
□Independent Living Supports	8			1		9
3rd Qtr FY22	4					4
4th Qtr FY22	4			1		5
□In-home Support Services				1		1
4th Qtr FY22				1		1
Private Duty Nursing		1				1
3rd Qtr FY22		1				1
Shared Living				1		1
4th Qtr FY22				1		1
Sponsored Residential	2		2	2	1	7
3rd Qtr FY22	2				1	3
4th Qtr FY22			2	2		4
□ Supported Living				1		1
4th Qtr FY22				1		1
Grand Total	18	11	9	15	6	59

Sum of Barrier: Services not in current waiver	•		
	Region 2	Region 5	Grand Total
CD/AD Personal Assistance Services	1	1	2
3rd Qtr FY22	1	1	2
□CD/AD Respite	1		1
3rd Qtr FY22	1		1
In-home Support Services	1	1	2
3rd Qtr FY22	1	1	2
Therapeutic Consultation	1		1
3rd Qtr FY22	1		1
Grand Total	4	2	6

	Benefits Planning		Community Engagement		Electronic Home- Based Services	Employment and Community Transportation	Independent Living Supports	In-home Supports	Peer Mentoring	Shared Living	Supported Living	Crisis Support Services	Private Duty Nursing	Skilled Nursing	Sponsored Residential	Group Residential <5	Group Residential 5+
1-A	2	2	11	2	1	0	0	11	0	0	1	0	14	3	8	16	7
1-B	0	2	9	1	1	0	1	6	0	0	0	0	0	0	10	8	3
1-C	3	6	14	1	0	1	1	8	0	0	3	0	4	4	9	14	12
1-D	2	6	15	0	1	0	2	14	0	0	0	0	1	2	23	23	11
2-A	2	0	3	0	1	0	2	12	0	0	2	0	3	1	2	9	6
2-B	4	8	12	5	1	1	4	29	0	0	1	0	28	2	8	66	13
2-C	1	0	6	1	1	0	3	11	0	0	0	0	12	3	2	15	2
2-D	2	3	7	1	1	0	3	17	0	0	1	1	21	3	5	37	5
3-A	0	6	13	0	0	0	3	11	0	0	0	0	1	2	11	13	7
3-B	1	5	15	0	1	0	2	17	0	1	2	0	1	1	15	25	13
3-C	0	2	7	0	0	0	0	7	0	0	1	0	3	2	8	9	4
3-D	0	0	9	0	1	0	0	4	0	0	0	0	3	1	7	11	7
4-A	3	5	20	0	1	0	3	18	0	1	6	0	9	1	26	114	28
4-B	0	0	5	0	0	0	0	3	0	0	1	0	0	0	6	7	2
4-C	0	0	4	0	0	0	0	2	0	0	0	0	1	0	4	6	4
4-D	0	2	9	0	0	0	0	5	0	0	0	0	2	0	15	52	9
5-A	1	0	8	0	1	0	0	7	0	0	2	0	3	1	7	12	6
5-B	0	0	2	0	0	0	0	0	0	0	1	0	1	0	3	4	2
5-C	1	3	18	0	1	1	1	22	0	0	1	0	4	2	25	26	9
5-D	3	10	34	1	1	1	10	45	0	0	2	0	12	1	41	120	16

# Priority Services as of 10/31/22

Priority Services and related Regions								
Benefits Planning – Regions 3, 4, and 5	Peer Mentoring - Regions 1, 2, 3, 4, and 5							
Community Guide – Regions 1, 3, and 5	Shared Living - Regions 1, 2, 3, 4, and 5							
Electronic Home-Based Supports – Regions 1, 2, 3, 4, and 5	Supported Living - Regions 1, 2, 3, 4, and 5							
Employment and Community Transp – Regions 1, 2, 3, 4, and 5	Crisis Support Services - Regions 1, 2, 3, 4, and 5							
Independent Living Supports – Regions 1, 4, and 5	Skilled Nursing - Regions 4 and 5							