



Regional Support Teams

State Fiscal Year 2025, 1st Quarter

Overview

Five Regional Support Teams (RSTs) were implemented in March 2013 by the Department of Behavioral Health and Development Services (DBHDS). Virginia's focus through RSTs is on supporting individuals with developmental disabilities in the most integrated community setting that is consistent with their informed choice of all available options and opportunities. Each Regional Support Team (RST) consists of professionals well-versed in supporting individuals with developmental disabilities within a community setting. This expertise extends to individuals with exceptional behavioral and medical requirements, highlighting the RST's comprehensive capability in meeting diverse needs.

Purpose

- A. To identify and seek to resolve individual, regional, or system barriers that prevent individuals from receiving services in the most integrated setting of their choice.
- B. To make recommendations for resolving barriers to receiving services in integrated settings.

RSTs seek to ensure that no individual in the target population moves to a nursing facility or congregate setting with five or more individuals unless the move is consistent with the individual's needs and informed choice. This process involves a comprehensive review conducted by both a DBHDS Community Resource Consultant (CRC) and, when the referral criteria are met, by the Regional Support Team (RST). This dual review ensures that any such transition is well-informed and consistent with the individual's unique circumstances and desires.

Target Population for referrals to RST

- A. Individuals with intellectual/developmental disability (I/DD), who:
 - 1. Live in training centers,
 - 2. Meet the ID or DD Waivers waitlist criteria, and
 - 3. Meet the criteria for referral to the RST as outlined in III.E and IV.D.3 of the Settlement Agreement (SA).

Referral Criteria for RST Review

- a.) within five calendar days of an individual being presented with any of the following residential options:
 - i. an intermediate care facility,
 - ii. a nursing facility,
 - iii. a training center, or a
 - iv. group home with a licensed capacity of five beds or more;
- b.) if the CSB is having difficulty finding services within 30 calendar days after the individual's enrollment in the waiver; or
- c.) immediately when an individual is displaced from his or her residential placement for a second time.

Criteria for RST Referrals and Consultation

- 1. Prior to or immediately after a service has not been identified within 3 months of receiving a waiver slot.

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2. Within five calendar days of an individual being presented with any of the following residential options: an intermediate care facility, a nursing facility, a training center, or a group home with a licensed capacity of five beds or more.
3. Immediately when family expresses any interest in a setting considered to be less integrated. (timing of referral is key to RST making recommendations for more integrated options)
4. Immediately when an individual is displaced from his or her residential placement for a second time.
5. Immediately if the individual is moving before the next scheduled RST meeting. Please submit and identify the referral as being late for that reason.
6. Immediately once the SC is notified that a person has already moved to a less integrated setting. Please submit and identify the referral as being late due to the lack of notification.

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Data Collection Period

- A. This reporting period is the First Quarter of FY25 (July-September 2024).

RST Source System Transition

To enhance the reliability and accuracy of data, the transition from manual and spreadsheet-based methods to the Waiver Management System (WaMS) took place on January 1, 2023 for both the Regional Support Team referral form and the Virginia Informed Choice form. This shift empowers DBHDS to utilize contemporary software for data management and visualization, significantly reducing the potential for human errors.

Back-end data, which first became available in June 2023, assists in the development of this report, which is based on data gathered through the WaMS platform and visualized using Microsoft PowerBI. The structure and content of this report will undergo further refinement in upcoming quarters. Any modifications to the reporting approach are duly documented within the report itself and stem from any adjustments to the WaMS RST module.

RST Referral Data

There was a total of 121 referrals made with an RST requested date occurring in FY25 first quarter with the largest number seen in Region 3 (27) and the lowest in Regions 2 (20) and Regions 4 and 5 (23 (Fig. 1).

Fig. 1 (note: factoring in 9 missed referrals brings the referral count to 121 with 112 submissions)

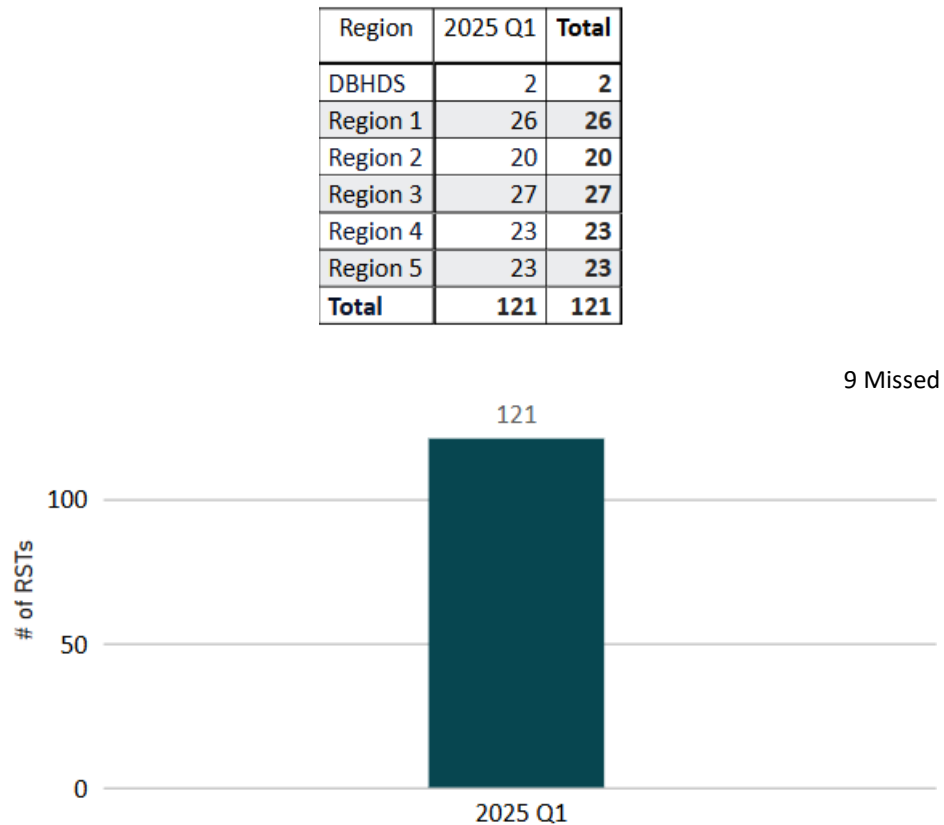


Fig. 1

When considering the number of unique individuals, the 121 referrals are attributed to 121 unique individuals plus the 9 missing referrals (130). Of those actively enrolled in a DD Waiver, 93 receive Community Living waiver, 5 have the Family and Individual Supports waiver, and zero have Building Independence waiver (Fig 2). 12 individuals did not have a DD Waiver or were not on the wait list. There were three people on the DD Waitlist (Fig. 3).

of Individuals Actively Enrolled on a Waiver by Type

Waiver Type	2025 Q1	
	# of individuals*	% of Total
Community Living	98	95.2%
Family and Individual Supports	5	4.8%
Total	103	100.0%

Fig. 2

of Unique Individuals with an RST in the Quarter by Waiver Status

Waiver Status Collapsed	2025 Q1	
	# of Individuals	% of Individuals
Waiver	103	87.3%
Not on Waiver or Waitlist	12	10.2%
Waitlist Priority 3	2	1.7%
Waitlist Priority 2	1	0.8%
Total	118	100.0%

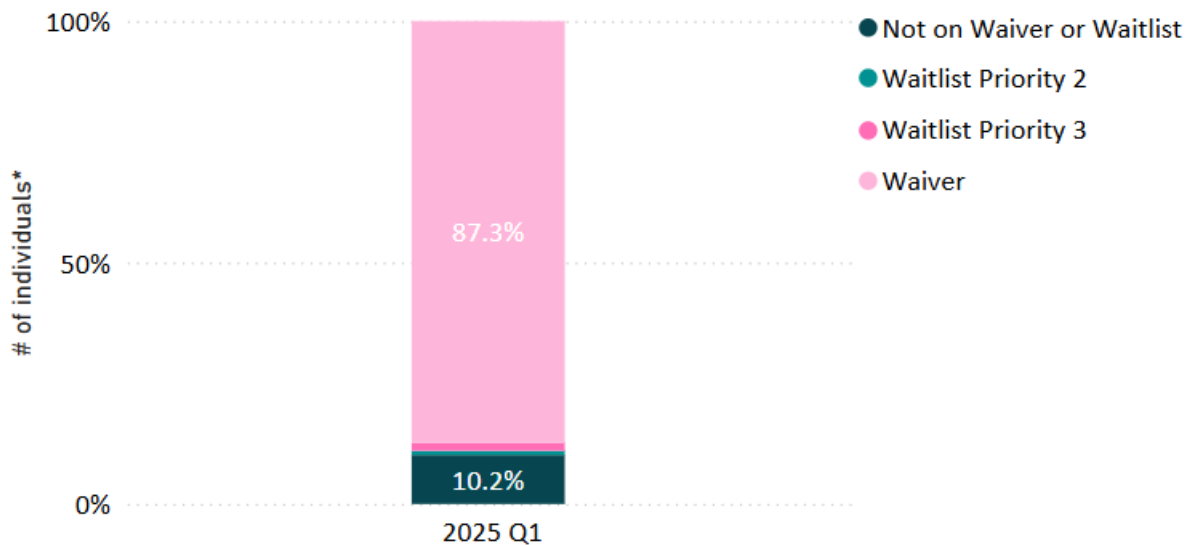


Fig. 3

** unique count of individuals but not RSTs; one person can have more than 1 RST in a quarter.*

112 referrals were submitted for individuals living in the community while 0 were submitted for individuals residing in the training center setting. 9 referrals were missed in reporting (Fig. 4, top row). All 112 referrals received during Q1 are attributed to the community.

of RST Identified as Community Referrals and Reason

Community Referral ▲	2025 Q1	
	# of RSTs	% of RSTs
Missing referrals	9	7.4%
Yes	112	92.6%
Total	121	100.0%

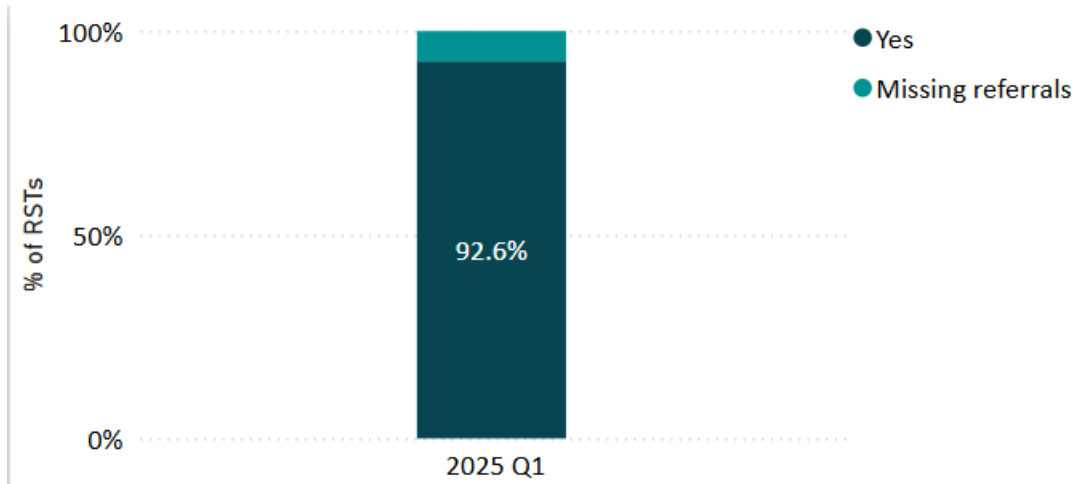


Fig. 4

(note: all 121 referrals were community referrals as stated above, 9 referrals were missing as reported in row 1)

Community Referral Reason	2025 Q1
At REACH without disposition	4
Difficulty finding resources in the community within any timeframe	2
Difficulty finding services in the community within 3 months of receiving a slot	2
Moving to a group home of five or more individuals	80
Moving to a nursing home or ICF	19
Pattern of repeatedly being removed from the home	5
Total	112

Fig. 5

Regional Support Teams – FY25 Q1

Of the 112 referrals submitted, 90 (74.4%) were related to a need for residential services. (Fig. 6)

	2025 Q1		Total	
▲	# of RSTs	% of RSTs	# of RSTs	% of RSTs
Missing referrals	9	7.4%	9	7.4%
No	22	18.2%	22	18.2%
Yes	90	74.4%	90	74.4%
Total	121	100.0%	121	100.0%

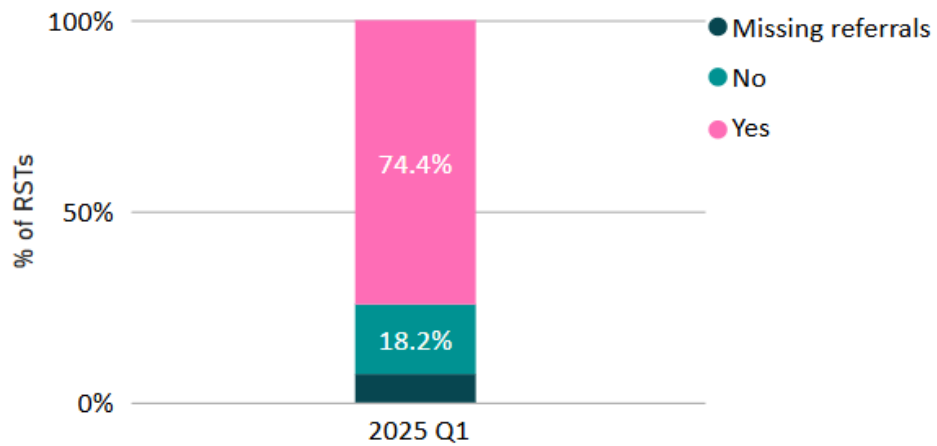


Fig. 6

Regional Support Teams – FY25 Q1

Considering the source of community referrals, the largest number was submitted by Northwestern (15). (Fig. 7)

CSB	# of RSTs	% of RSTs
ALLEGHANY HIGHLANDS	2	1.65%
ARLINGTON	3	2.48%
BLUE RIDGE	9	7.44%
CHESAPEAKE	3	2.48%
CHESTERFIELD	7	5.79%
CITY OF VA BEACH	6	4.96%
CROSSROADS	3	2.48%
CUMBERLAND	2	1.65%
DBHDS	2	1.65%
DISTRICT 19	6	4.96%
FAIRFAX-FALLS CHURCH	12	9.92%
HAMPTON-INN	9	7.44%
HARRISONBURG-ROCKINGHAM	2	1.65%
HENRICO AREA	4	3.31%
LOUDOUN COUNTY	1	0.83%
MIDDLE PENINSULA NORTHERN NECK	5	4.13%
MOUNT ROGERS	1	0.83%
NEW RIVER VALLEY	8	6.61%
NORTHWESTERN	15	12.40%
PLANNING DISTRICT	6	4.96%
PRINCE WILLIAM COUNTY	4	3.31%
RAPPAHANNOCK AREA	3	2.48%
REGION TEN	1	0.83%
RICHMOND	3	2.48%
ROCKBRIDGE AREA	2	1.65%
SOUTHSIDE	1	0.83%
VALLEY	1	0.83%
Total	121	100.00%

* Two referrals were submitted by DBHDS.

Fig. 7

Regional Support Teams – FY25 Q1

The RST referral collects the desired region where an individual prefers to live and access services. 25 referrals indicated that the person wanted to receive services in Region 3 (22.3% of submitted referrals). 20.5% of submitted referrals reflected a desire to receive services in Region 1 and Region 5 (23). (**Fig 8, note submitted referrals = 112**)

of RST Referrals by Desired Region

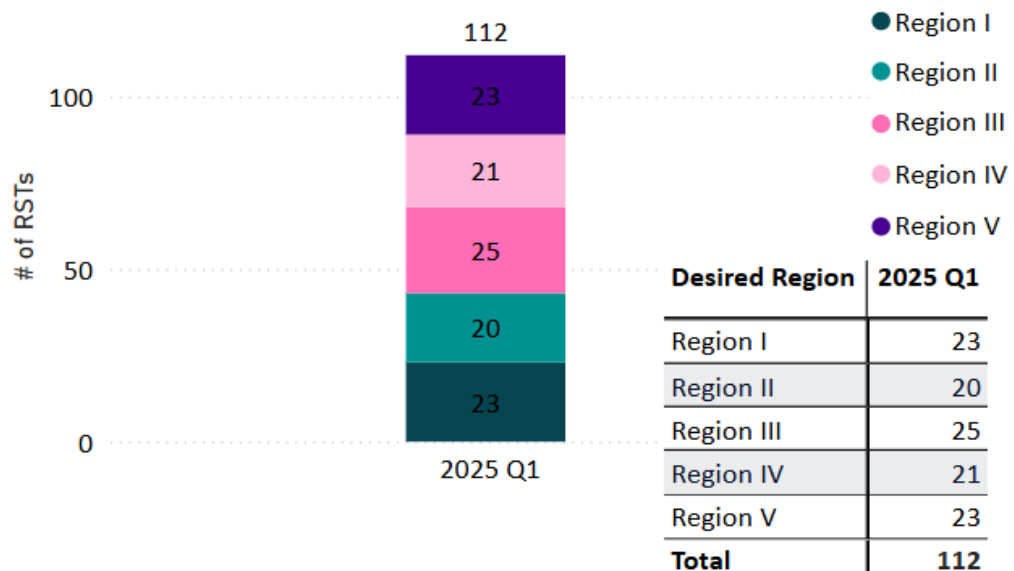


Fig. 8

of Emergency Referrals by CSB and Reason

Two emergency referrals were submitted and were confirmed by Community Resource Consultants as an emergency in Q1. (Fig. 9)

Does CRC Recommend Emergency Meeting ▲	2025 Q1	Total
No	110	110
Yes	2	2
Total	112	112

Fig. 9

Late Referrals

The export of data from the PowerBI dashboard for referral counts by CSB includes the number that did not meet any late criteria, the number that met Reason A (Individual has or will move prior to the RST meeting due to SC not submitting the referral within 5 calendar days of presenting a less integrated setting), Reason B (Individual has or will move without sufficient time to implement RST Recommendation(s), Reason C (Individual moved without CSB notification), and missed referrals. For these counts in Q1, data was pulled from RST confirmations for 112 referrals and 9 missed referrals for a total count of 121. (Fig. 10)

	1. No late criteria apply	2. Reason A: Individual has or will move prior to the RST meeting due to SC not submitting the referral within 5 calendar days of presenting a less integrated setting	3. Reason B: Individual has or will move without sufficient time to implement RST Recommendation(s)	4. Reason C: Individual moved without CSB notification	5. Missing referrals	Total
Region	# of RSTs	# of RSTs	# of RSTs	# of RSTs	# of RSTs	# of RSTs
DBHDS	1		1			2
Region 1	10		14		2	26
Region 2	15	1	4			20
Region 3	18	4	4	1		27
Region 4	13	3	3	1	3	23
Region 5	11	1	7		4	23
Total	68	9	33	2	9	121

Fig. 10

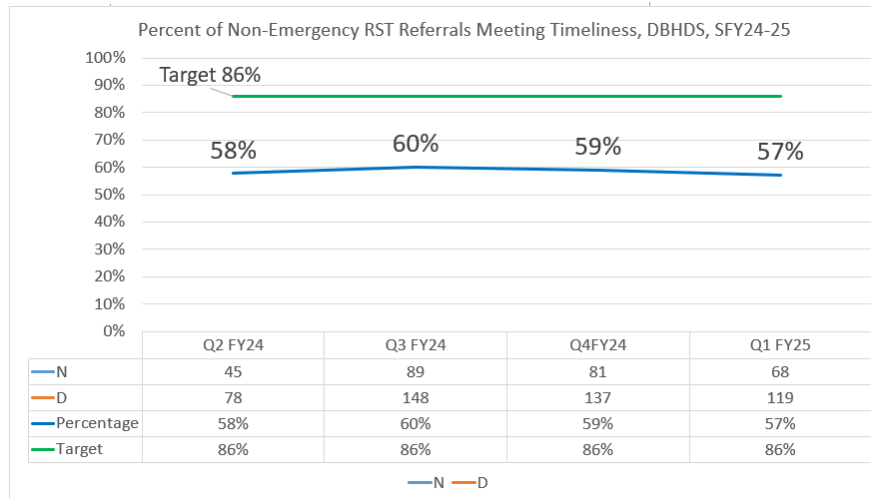
A “Late Referral” is defined as a referral where:

- an Individual has moved to a less integrated setting prior to a scheduled RST Meeting (Reason A);
- an Individual is planning to move to a less integrated setting without sufficient time to implement RST recommendation(s) and consultation with CRC/CIM/RST Coordinator has not occurred (Reason B); or
- an Individual has moved to a less integrated setting without CSB prior notification (Reason C).
- an individual moved to a group home of five or more beds and an RST referral was not provided (missed).

These four reasons provide data related to calculating two measures monitored by the Case Management Steering Committee. The following charts reflect the lateness of RST referrals. By conducting a review of WaMS service authorization data, it was determined that 77 additional referrals were needed but were not submitted. CSBs receive compliance results reflecting actual counts and the names of individuals missed, so that choice can be provided and documented for each person. There are two indicators related to the timeliness of RST referrals.

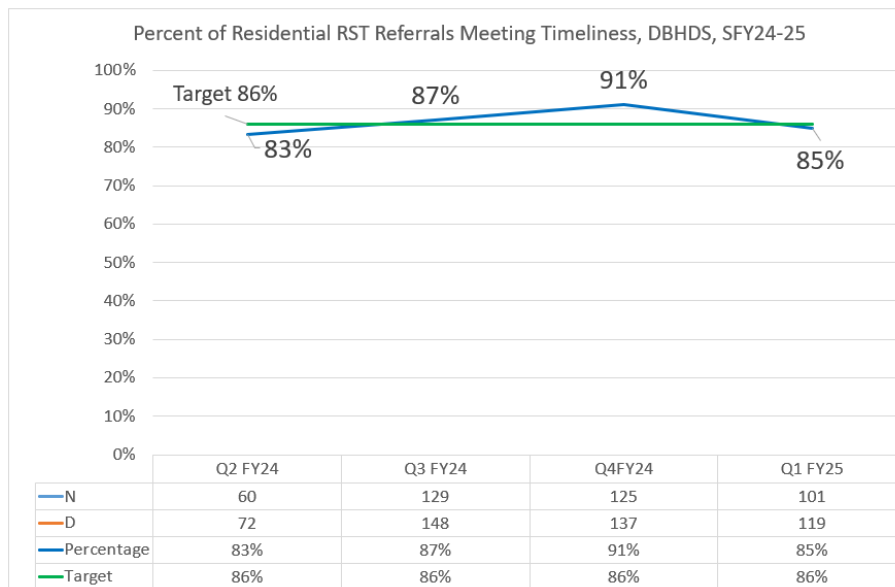
Results for the 1st Quarter FY25 are provided below:

86% of all statewide non-emergency referrals, as such referrals are defined in the DBHDS RST Protocol, meet the timeliness requirements of the DBHDS RST Protocol. There were 0 Training Center referrals, 108 CSB non-emergency referrals, 2 DBHDS non-emergency referrals, and 9 missed referrals. A total of 119 non-emergency referrals were submitted or missed in Q1. For this reporting period, the result is 57.1% (68/119) timely, which does not meet the target of 86%. (Graph 1). Note: Two emergency referrals have been removed from this calculation.



Graph 1

86% of all statewide situations meeting criteria for referral to the RSTs with respect to home and community-based residential services are referred to the RSTs by the case manager as required by the DBHDS RST Protocol. There were 110 CSB-submitted community referrals with 9 late for Reason A and 9 missed. A total of 119 referrals were submitted or missed in Q1 with 18 late or missed referrals related to residential accountability (15% late). For this reporting period, the result is 85% (101/119) timely, which does not meet the target of 86%. (Graph 2)



Graph 2

A third measure related to the RST process required by the Settlement Agreement is stated as “People with a DD waiver, who are identified through indicator #13 of III.D.6, desiring a more integrated residential service option (defined as independent living supports, in-home support services, supported living, and sponsored residential) have access to an option that meets their preferences within nine months. No referrals in Q1 met the criteria for this measure. A regional summary is provided below. (Table 1)

RST Referral Form Question: Are more integrated residential options (to include Independent Living Services, In-home Support Services, Supported Living, Sponsored Residential) not operating in the desired location, if requested?)

Region	2025 Q1		Total
	No	Total	
Region I	24	24	24
Region II	20	20	20
Region III	27	27	27
Region IV	21	21	21
Region V	20	20	20
Total	112	112	112

Numerator and Denominator	Count
Numerator = Number of referrals confirmed as resolved within the 9-month timeframe calculated in WaMS	N/A
Denominator = Number of RST referrals where the RST confirmed the barrier stated as “Are more integrated residential options (to include Independent Living Supports, In-home Support Services, Supported Living, Sponsored Residential) not operating in the desired location, if requested?” as yes.	0

Table 1

Referral Submissions by Source for Q1 FY25 (Fig.12)

Reason A: Individual has or will move prior to the RST meeting due to SC not submitting the referral within 5 calendar days of presenting a less integrated setting

Reason B: Individual has or will move without sufficient time to implement RST Recommendation(s)

Reason C: Individual moved without CSB notification

CSB/BHA Submitter	1. No late criteria apply	2. Reason A: Individual has or will move prior to the RST meeting due to SC not submitting the referral within 5 calendar days of presenting a less integrated setting	3. Reason B: Individual has or will move without sufficient time to implement RST Recommendation(s)	4. Reason C: Individual moved without CSB notification	5. Missing referrals	Total RSTs
ALLEGHANY HIGHLANDS	2	0	0	0	0	2
ARLINGTON	3	0	0	0	0	3
BLUE RIDGE	8	0	1	0	0	9
CHESAPEAKE	1	0	1	0	1	3
CHESTERFIELD	2	0	2	1	2	7
CITY OF VA BEACH	2	0	1	0	3	6
CROSSROADS	3	0	0	0	0	3
CUMBERLAND	1	0	1	0	0	2
DBHDS	1	0	1	0	0	2
DISTRICT 19	3	1	1	0	1	6
FAIRFAX-FALLS CHURCH	10	0	2	0	0	12
HAMPTON-INN	4	0	5	0	0	9
HARRISONBURG-ROCKINGHAM	1	0	0	0	1	2
HENRICO AREA	3	1	0	0	0	4
LOUDOUN COUNTY	0	0	1	0	0	1
MIDDLE PENINSULA NORTHERN	4	1	0	0	0	5
MOUNT ROGERS	1	0	0	0	0	1
NEW RIVER VALLEY	8	0	0	0	0	8
NORTHWESTERN	1	0	13	0	1	15
PLANNING DISTRICT	0	4	1	1	0	6
PRINCE WILLIAM COUNTY	2	1	1	0	0	4
RAPPAHANNOCK AREA	3	0	0	0	0	3
REGION TEN	0	0	1	0	0	1
RICHMOND	2	1	0	0	0	3
ROCKBRIDGE AREA	2	0	0	0	0	2
SOUTHSIDE	0	0	1	0	0	1
VALLEY	1	0	0	0	0	1
Total	68	9	33	2	9	121

Fig. 12

RST Recommendations

Of the 112 referrals submitted through WaMS, 80 (71.4%) of referrals included recommendations from RSTs (Fig. 14). Further, of the 112 referrals, 56 (41.5%) were not considering more integrated services. (Fig. 15)

CreatedRSTRecResBarrier	2025 Q1	
	# of RSTs	% of RSTs
No	32	28.57%
Yes	80	71.43%
Total	112	100.00%

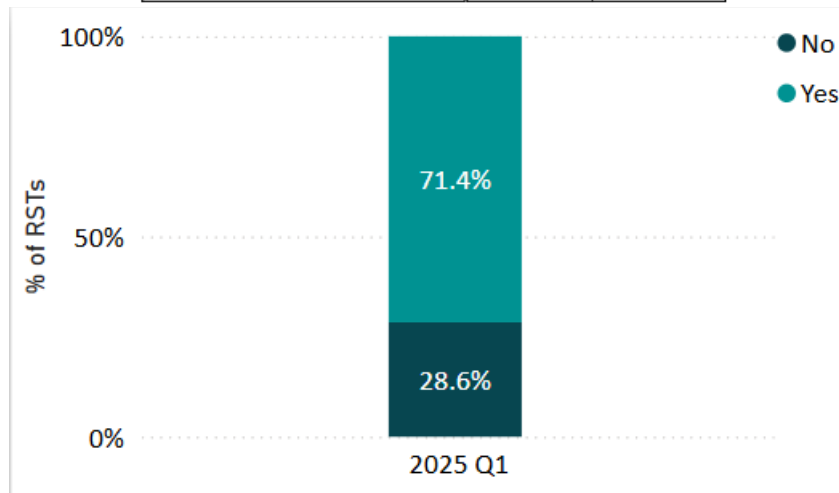


Fig. 14

More Integrated Services were Considered

SFY Quarter RST Requested Date 2025 Q1

	# of RSTs	% of RSTs
No	56	41.5%
Yes	56	58.5%
Total	112	100.0%

Regional Support Teams – FY25 Q1

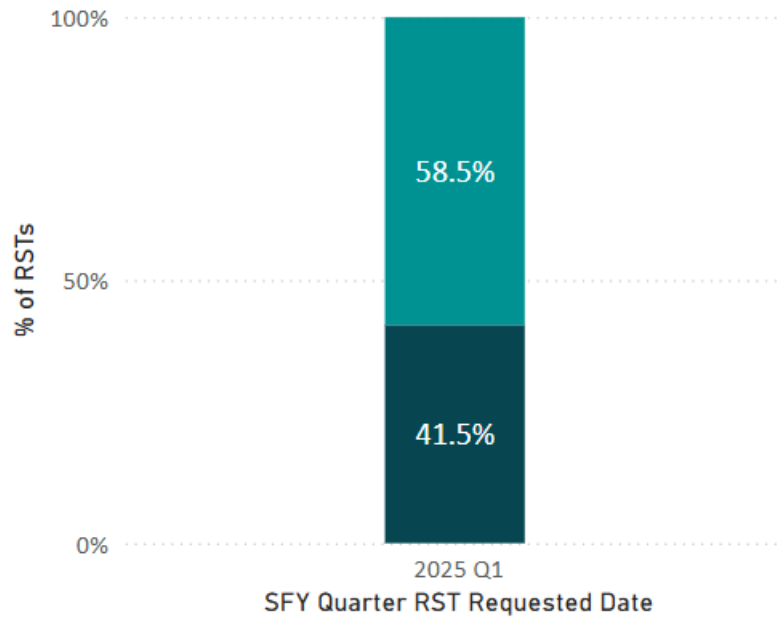


Fig. 15

Referrals by Regional Support Team

There are six regional support teams. Five of these teams support their relative DBHDS regions and one (Team VI) was formed to improve the timeliness of the referrals systemwide. Through a Quality Improvement Initiative (QII), it was determined that Reason B (Individual has or will move without sufficient time to implement RST Recommendation(s)) was the most significant factor impacting timeliness. By holding a cross-regional team once per month, referrals that would have been late are processed in time for recommendations to be made and acted on. In the 1st quarter of FY25, 44.6% (50) of the referrals were processed through Team VI. (Fig.16)

Created TeamDescription	2025 Q1	
	# of RSTs	% of RSTs
Team I	20	17.86%
Team II	11	9.82%
Team III	6	5.36%
Team IV	14	12.50%
Team V	11	9.82%
Team VI	50	44.64%
Total	112	100.00%

Regional Support Teams – FY25 Q1

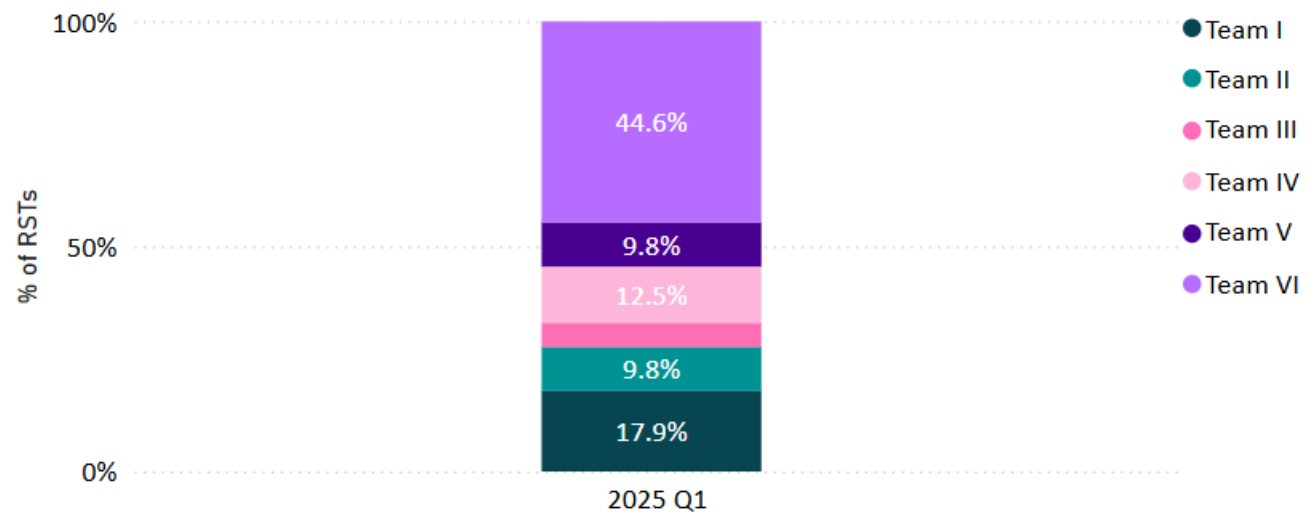


Fig. 16

Distribution of referrals reviewed by Team VI

As seen below, most referrals reviewed in Q1 are attributed to Regions III, II, and V at 36%, 20%, respectively. (Fig. 17)

Associated Desired Region	2025 Q1	
	# of RSTs	% of RSTs
Region I	3	6.00%
Region II	10	20.00%
Region III	18	36.00%
Region IV	9	18.00%
Region V	10	20.00%
Total	50	100.00%

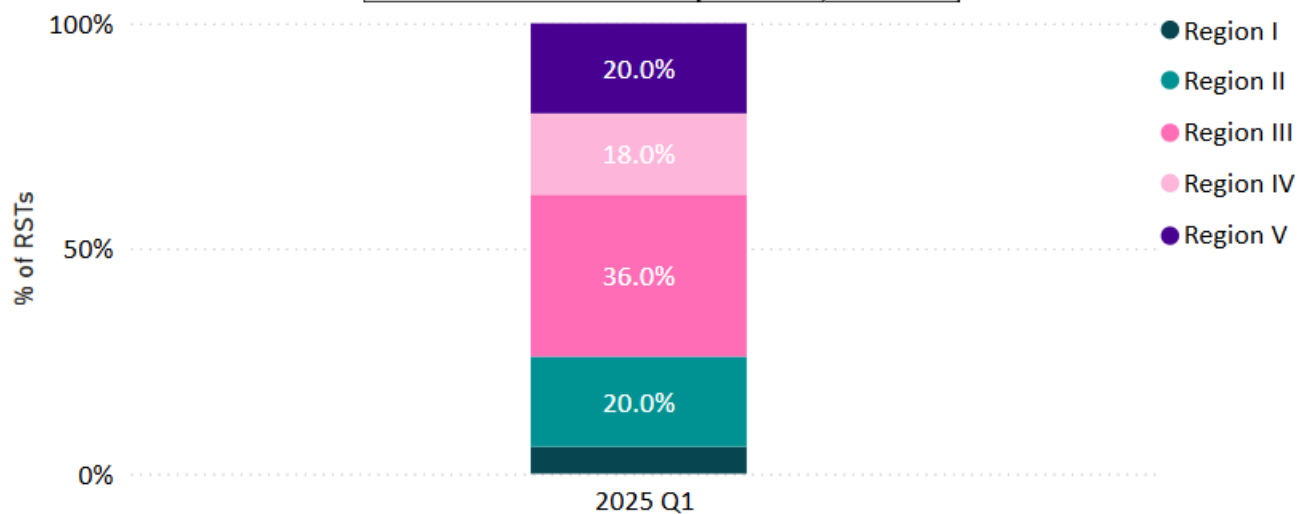


Fig. 17

Barriers

Data in the 1st quarter FY25 reflects all barriers identified across regions and services. Barrier data reflects all barriers identified based on seeking services in the desired region.

Barriers by Region and Service

The largest number of barriers were identified in Region 4.

All Barriers by Quarter and Region

AssociatedRegion... ● Region I ● Region II ● Region III ● Region IV ● Region V

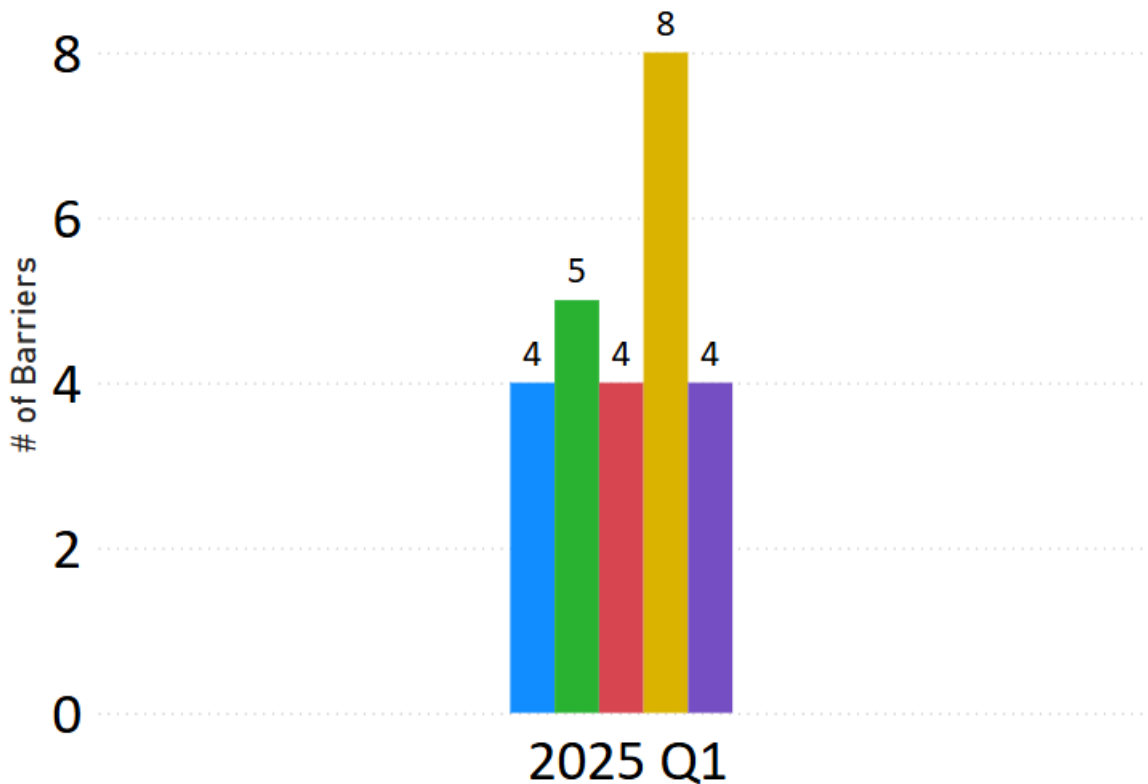


Fig. 18

In the transition to WaMS, barrier labels were streamlined to common themes and the primary barrier became required for each more integrated service considered. This transition is expected to result in more manageable and meaningful barrier data for analysis and trending over time. Barrier data assists with a statewide gap analysis conducted semi-annually. The largest number of barriers were encountered in Region 4, which accounted for 8 of the 25 barriers identified. Barriers and the related services and regions are shown below. (Fig. 19).

Regional Support Teams – FY25 Q1

Barrier to Service	Region I	Region II	Region III	Region IV	Region V	Total
<input type="checkbox"/> Individual/SDM Choice	1	2			2	5
Group Home Residential (4 or fewer)	1	2			1	4
Sponsored Residential					1	1
<input type="checkbox"/> Lack of behavioral expertise				1		1
Group Home Residential (4 or fewer)				1		1
<input type="checkbox"/> Lack of medical expertise	1	1	2	1		5
Group Home Residential (4 or fewer)	1	1	2	1		5
<input type="checkbox"/> Lack of mental health expertise					1	1
Supported Living					1	1
<input type="checkbox"/> Lack of provider at referral (other than integrated residential)	2		1	4		7
Group Home Residential (4 or fewer)	1			1		2
Private Duty Nursing				1		1
Sponsored Residential	1		1	1		3
Therapeutic Consultation				1		1
<input type="checkbox"/> No integrated residential provider operating in desired area			1	2		3
Group Home Residential (4 or fewer)				1		1
Sponsored Residential			1	1		2
<input type="checkbox"/> Provider available, but access delayed		1			1	2
Group Home Residential (4 or fewer)		1			1	2
<input type="checkbox"/> Provider/setting match		1				1
Private Duty Nursing		1				1
Total	4	5	4	8	4	25

Fig. 19

The RST referral form specifically asks all submitters to report transportation concerns. For Q1 FY25, six of 112 referrals reported concerns, which was 5.36% of all referrals. (Fig. 20)

	2025 Q1	
	# of RSTs	% of RSTs
▲		
No	106	94.64%
Yes	6	5.36%
Total	112	100.00%

Regional Support Teams – FY25 Q1

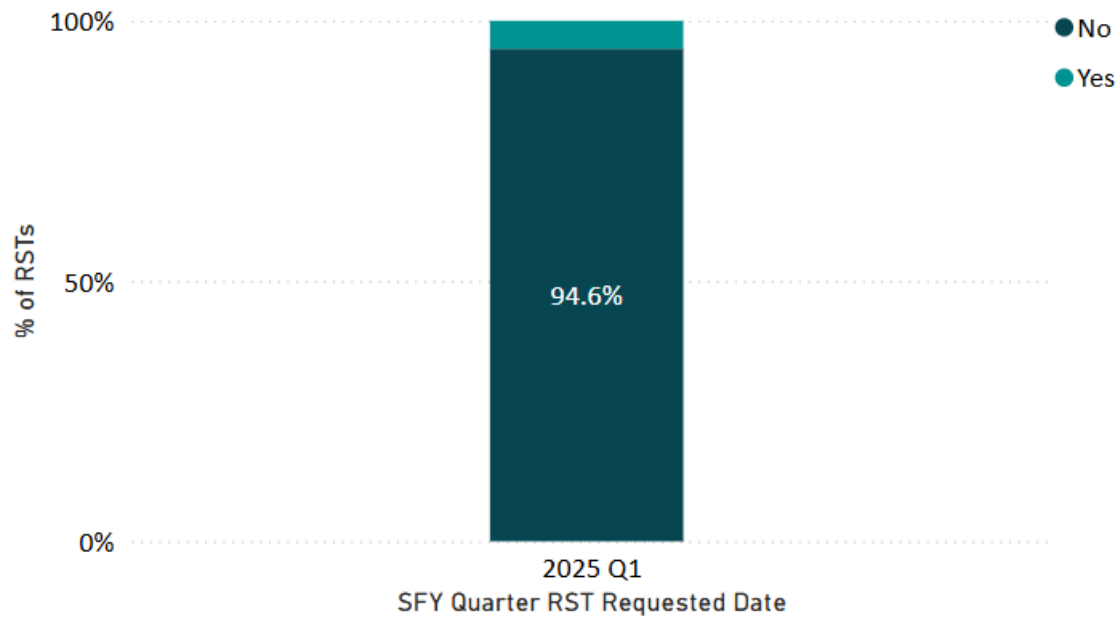


Fig. 20

RST Workflow Status

The tables below offer a breakdown of RST referrals, distinguishing between those that have already been closed and those that are awaiting closure by the CSB. Monitoring these numbers is essential for evaluating the efficiency of the RST process. CSBs have the capability to filter the outstanding referrals within the WaMS system, which allows for internal reviews and the resolution of pending submissions. As of the current report, there are 39 referrals that have been identified as pending status. These referrals will be reviewed by the DBHDS Case Management Steering Committee to explore ways to ensure they are closed more in a timely manner (Fig. 21). Regional pending numbers by CSB are provided in Fig. 22.

SFY Quarter RST Requested Date	2025 Q1			Total
CreatedReferringAgencyRegionDescription	Closed	Pending Submitter Closure	Total	
Region I	17	7	24	24
Region II	16	4	20	20
Region III	17	10	27	27
Region IV	7	14	21	21
Region V	16	4	20	20
Total	73	39	112	112

Fig. 21

Regional Support Teams – FY25 Q1

Location	Submitter	# of RSTs
Region I	NORTHWESTERN COMMUNITY SVCS	2
Region I	RAPPAHANNOCK AREA COMMUNITY SERVICES BRD	2
Region I	REGION TEN CMMNTY SVCS BRD	1
Region I	ROCKBRIDGE AREA COMMUNITY SVS BOARD	1
Region I	VALLEY CSB	1
Regional Total		7
Region II	ARLINGTON MENTAL HEALTH	1
Region II	FAIRFAX-FALLS CHURCH CSB	3
Regional Total		4
Region III	BLUE RIDGE CSB	4
Region III	CUMBERLAND MNTL HLTH CTR	1
Region III	MOUNT ROGERS CSB	1
Region III	PLANNING DISTRICT ONE CSB	3
Region III	SOUTHSIDE BEHAVIORAL HEALTH	1
Regional Total		10
Region IV	CHESTERFIELD CSB	4
Region IV	DBHDS	1
Region IV	DISTRICT 19 MEN HLTH SER	4
Region IV	HENRICO AREA MENTAL HLTH & DEVLPMNTL SVC	4
Region IV	RICHMOND BHVRL HLTH AUTHORITY	1
Regional Total		14
Region V	CHESAPEAKE INTERGRATED BEHAV HEALTHCARE	2
Region V	CITY OF VA BEACH CSB MHMRSAS	1
Region V	DBHDS	1
Regional Total		4
Total Pending Referrals		39

Fig. 22

RST Workflow Status Pending Submitter Closure (Fig 23)

All Quarters to Date	
Submitter	# of RSTs
ALEXANDRIA COMMUNITY SERV BD	1
ARLINGTON MENTAL HEALTH	5
BLUE RIDGE CSB	9
CHESAPEAKE BEHAV HEALTHCARE	6
CHESTERFIELD CSB	35
CITY OF VA BEACH CSB MHMRSAS	4
COLONIAL BEHAVIORAL HEALTH	1
CROSSROADS CSB	7
CUMBERLAND MNTL HLTH CTR	9
DANVILLE-PITTSYLVANIA COM SERV	1
DBHDS	23
DBHDS on Behalf of HDMC & Highlands CSB	1
DBHDS on behalf of REACH	1
DISTRICT 19 MEN HLTH SER	7
Eastern Shore CSB	2
Encompass Community Supports	2
FAIRFAX-FALLS CHURCH CSB	15
GOOCHLAND POWHATAN MENTAL HLTH	4
HANOVER COUNTY COMMUNITY SERVICES	5
HARRISONBURG-ROCKINGHAM CSB	2
HENRICO AREA MENTAL HLTH & DEVLPMNTL SVC	15
HIGHLANDS CMNTY SVCS BOARD	1
HORIZON BEHAVIORAL HEALTH	5
LOUDOUN COUNTY CSB	10
MIDDLE PENINSULA NORTHERN NECK CSB	1
MOUNT ROGERS CSB	2
NEW RIVER VALLEY COMMUNITY SERVICES	1
NORFOLK COMMUNITY SERVICES BOARD	4
NORTHWESTERN COMMUNITY SVCS	6
PIEDMONT COMMUNITY SERVICES	13
Piedmont CSB	1
PLANNING DISTRICT ONE CSB	4
PORTSMOUTH DEPT OF BEHAVIORAL	5
RAPPAHANNOCK AREA COMMUNITY SERVICES BRD	19
REGION TEN CMMNTY SVCS BRD	14
RICHMOND BHVRL HLTH AUTHORITY	5
ROCKBRIDGE AREA COMMUNITY SVS BOARD	1
SOUTHSIDE BEHAVIORAL HEALTH	1
VALLEY CSB	3
WESTERN TIDEWATER COMMUNITY SERVICES BOA	1
Grand Total	252

Acronyms and Abbreviations

The Key below contains the acronyms and abbreviations referenced in this report.

Key

N – Number of referrals – used to determine percentages	CSB(s) – Community Service Board(s)
Closed – RST made recommendations and final disposition has been made by individual/AR. This includes referrals that were submitted late to the RST.	Open - Requested additional information from Community SC/TC. RST has not made recommendations.
DBHDS – Department of Behavioral Health and Developmental Services	Pending - Pended - RST made recommendations and awaiting final disposition.
SFY/FY – State Fiscal Year	Q – Quarter
WaMS – Waiver Management System	R – Region
I/DD – Intellectual/Developmental Disability	RST(s) - Regional Support Team(s)
ICF – Intermediate Care Facility	SA - Settlement Agreement
LG – Legal Guardian	TC(s) – Training Center(s)