



Regional Support Teams

State Fiscal Year 2024, 2nd 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.

Regional Support Teams – FY24 Q2

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 Second Quarter of FY24 (October- December 2023).

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 73 referrals made with an RST requested date occurring in Q2 FY24 with the largest number seen in Region 1 (19) and the lowest in Region 5 (5) (Fig. 1).

Fig. 1 (note: factoring in five missed referrals brings the referral count to 78 with 73 submissions)

of RST referrals by Region

Region	2024 Q2	Total
DBHDS	6	6
Region 1	19	19
Region 2	9	9
Region 3	18	18
Region 4	16	16
Region 5	5	5
Total	73	73

of RST referrals by Region

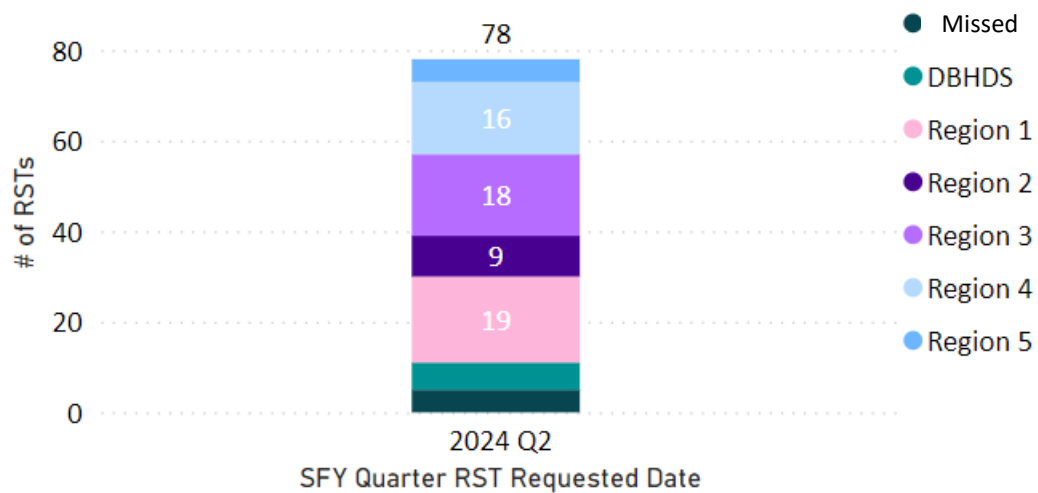


Fig. 1

Regional Support Teams – FY24 Q2

When considering the number of unique individuals, the 73 referrals are attributed to 73 unique individuals plus the five missing referrals (78). Of those actively enrolled in a DD Waiver, 51 receive Community Living waiver, six had the Family and Individual Supports waiver, and one had Building Independence waiver (Fig 2). 17 individuals did not have a DD Waiver or were not on the wait list. There were three people on the DD Waitlist with Priority 2 (Fig. 3).

of Individuals Actively Enrolled on a Waiver by Type

Waiver Type	2024 Q2	
	# of individuals*	% of Total
Building Independence	1	1.7%
Community Living	51	87.9%
Family and Individual Supports	6	10.3%
Total	58	100.0%

Fig. 2

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

Waiver Status Collapsed	2024 Q2	
	# of Individuals	% of Individuals
Waiver	58	74.4%
Not on Waiver or Waitlist	17	21.8%
Waitlist Priority 2	3	3.8%
Total	78	100.0%

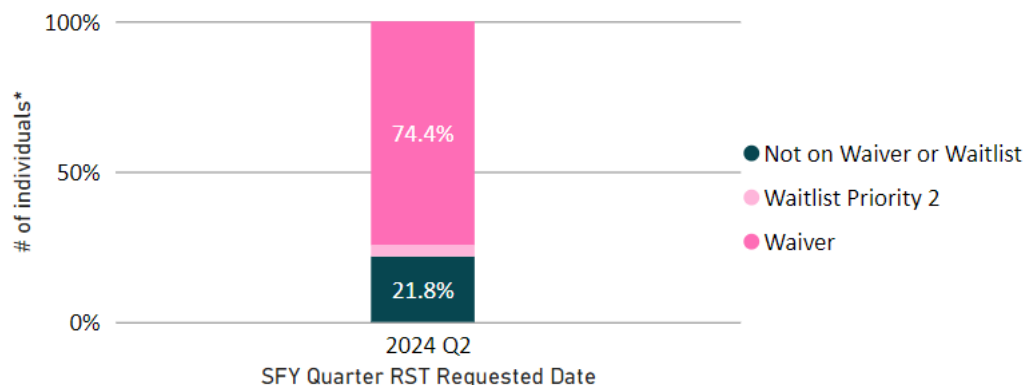


Fig. 3

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

Regional Support Teams – FY24 Q2

73 referrals were submitted were from individuals living in the community while 0 were submitted for individuals residing in the training center setting. 5 referrals were missed in reporting (Fig. 4, top row) **Based on a review of data submitted, it was determined that the two referrals attributed to training center were coded incorrectly by submitters.** It was determined that there were no training center referrals, and all 73 referrals received during Q2 are attributed to the community. The two community referrals that were submitted as training center referrals were reviewed to determine the correct community referral reason with both considering a move to a nursing home or ICF.

of RST Identified as Community Referrals and Reason

Community Referral	2024 Q2	
	# of RSTs	% of RSTs
▲	5	6.4%
No	2	2.6%
Yes	71	91.0%
Total	78	100.0%

Fig. 4

(note: all 78 referrals were community referrals as stated above, five referrals were missing as reported in row 1)

Community referral reason	2024 Q2
▲	
Difficulty finding services in the community within 3 months of receiving a slot	3
Moving to a group home of five or more individuals	40
Moving to a nursing home or ICF	22
Pattern of repeatedly being removed from the home	6
Total	71

(note: adding the two miscoded referrals increases the Moving to a nursing home or ICF count to 24 with a new total of 73)

Fig. 5

Regional Support Teams – FY24 Q2

Of the 73 referrals submitted, 56 (76.7%) were related to a need for residential services. (Fig. 6) **Note two referrals submitted incorrectly are attributed to seeking residential services bringing the total to 58 or 79% of referrals.**

of RST identified as Residential Services

	2024 Q2		Total	
	# of RSTs	% of RSTs	# of RSTs	% of RSTs
No	17	23.3%	17	23.3%
Yes	56	76.7%	56	76.7%
Total	73	100.0%	73	100.0%

% of RST identified as Residential Services

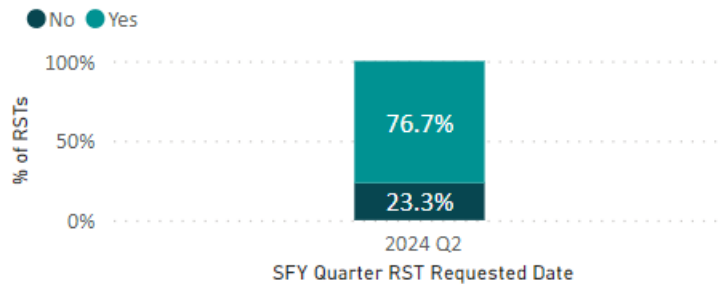


Fig. 6 (two additional referrals submitted incorrectly are attributed to seeking residential services)

Regional Support Teams – FY24 Q2

Considering the source of community referrals, the largest number was submitted by Chesterfield CSB (8). (Fig. 7)

SFY Quarter RST Requested Date	2024 Q2	
	CSB	# of RSTs
ARLINGTON MENTAL HEALTH	1	1.3%
BLUE RIDGE CSB	3	3.8%
CHESAPEAKE INTERGRATED BEHAV	3	3.8%
CHESTERFIELD CSB	8	10.3%
COLONIAL BEHAVIORAL HEALTH	1	1.3%
CROSSROADS CSB	3	3.8%
DANVILLE-PITTSYLVANIA COM SERV	1	1.3%
DBHDS	6	7.7%
DISTRICT 19 MEN HLTH SER	1	1.3%
Encompass Community Supports	2	2.6%
FAIRFAX-FALLS CHURCH CSB	6	7.7%
GOOCHLAND POWHATAN MENTAL HLTH	1	1.3%
HAMPTON-NN CSB	1	1.3%
HARRISONBURG-ROCKINGHAM CSB	3	3.8%
HENRICO AREA	3	3.8%
HORIZON BEHAVIORAL HEALTH	5	6.4%
MIDDLE PENINSULA NORTHERN NECK CSB	1	1.3%
MOUNT ROGERS CSB	4	5.1%
NEW RIVER VALLEY COMMUNITY SERVICES	1	1.3%
NORTHWESTERN COMMUNITY SVCS	5	6.4%
PIEDMONT COMMUNITY SERVICES	6	7.7%
PRINCE WILLIAM COUNTY CSB	2	2.6%
RAPPAHANNOCK AREA COMMUNITY SERVICES BF	5	6.4%
RICHMOND BHVRL HLTH AUTHORITY	2	2.6%
SOUTHSIDE CSB	4	5.1%
Total	78	100.0%

* Six referrals were submitted by DBHDS

Fig. 7

Regional Support Teams – FY24 Q2

The RST referral collects the desired region where an individual prefers to live and access services. 19 referrals indicated that the person wanted to receive services in Region 1 (24%). Only 10% of referrals reflected a desire to receive services in Region 2 (8). **(Fig 8, note five missed referrals reported in row 1)**

of RST Referrals by Desired Region

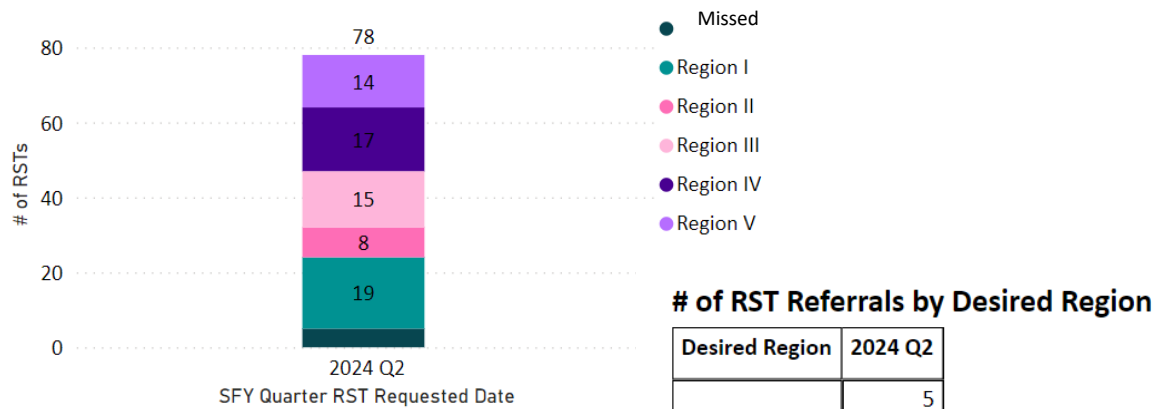


Fig. 8

of Emergency Referrals by CSB and Reason

No emergency referrals occurred or were confirmed by Community Resource Consultants as emergencies in Q2. (Fig. 9)

Does CRC Recommend Emergency Meeting	2024 Q2	Total
No	73	73
Total	73	73

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 Q2, data was pulled from RST confirmations for 73 referrals and 5 missed referrals for a total count of 78. (Fig. 10)

Location	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)	5. Missed	Total
DBHDS	Total	0	5	1	0	6
Region 1	Total	10	2	7	1	20
Region 2	Total	9	0	0	0	9
Region 3	Total	12	3	3	1	19
Region 4	Total	10	1	5	2	18
Region 5	Total	4	1	0	1	6
Total		45	12	16	5	78

Fig. 10

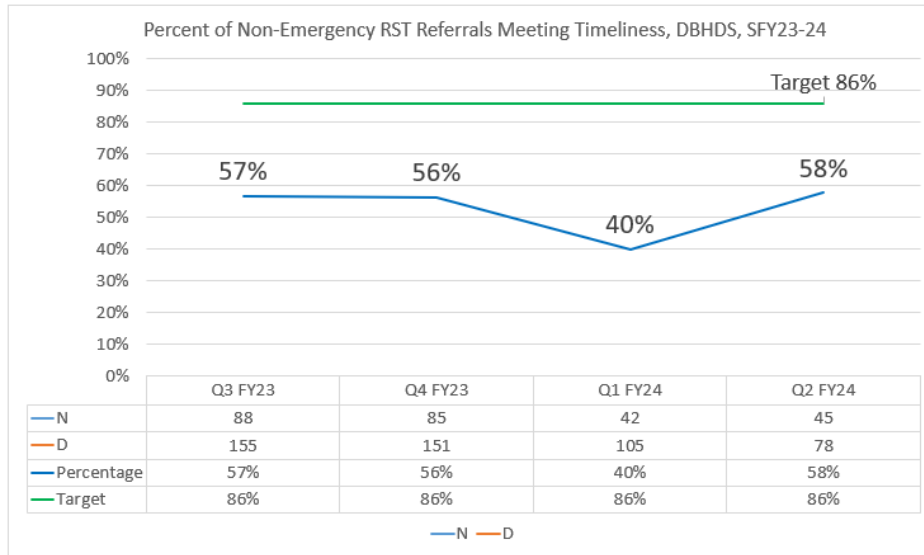
A “Late Referral” is defined as a referral where:

- 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 5 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.

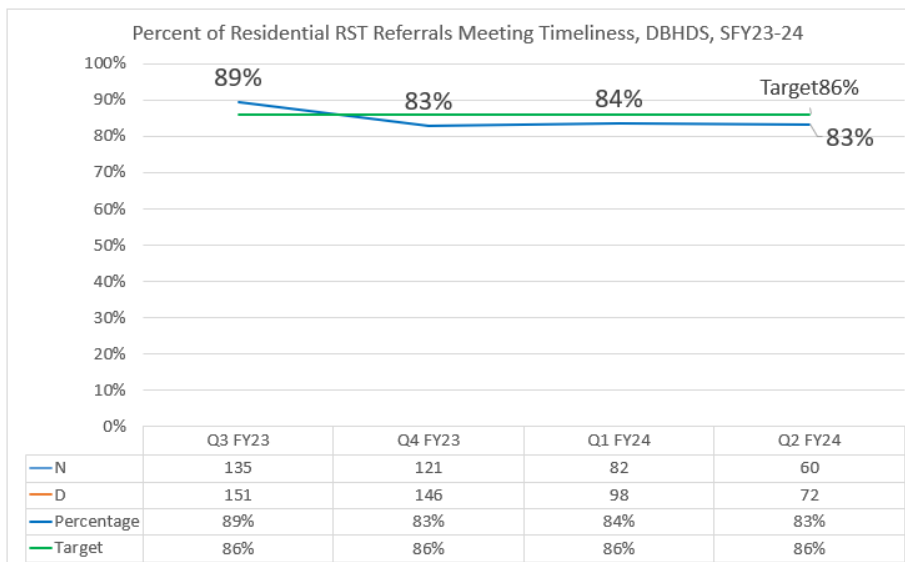
Results for the 2nd Quarter FY24 are provided below:

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, 67 CSB-submitted referrals, 6 DBHDS-submitted community referrals, 0 accepted outside of WaMS, and 5 missed community referrals. A total of 78 referrals were submitted or missed in Q2. For this reporting period, the result is 58% (45/78) timely, which does not meet the target of 86%. (Graph 1)



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 67 CSB-submitted community referrals in WaMS, 0 accepted outside of WaMS, and 5 missed CSB community referrals. A total of 72 referrals were submitted or missed by CSBs in Q2. Five were not provided and another 7 were reported as late for Reason A, for a total of 12 late referrals related to CSB accountability (17% late). For this reporting period, the result is 83% (60/72) timely, which does not meet the target of 86%. (Graph 2)



Graph 2

Regional Support Teams – FY24 Q2

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 Q2 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	2024 Q2		Total
	No	Total	
Region I	19	19	19
Region II	10	10	10
Region III	17	17	17
Region IV	18	18	18
Region V	9	9	9
Total	73	73	73

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 Q2 FY24 (Fig.12)

Location	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)	5. Missed	Total
DBHDS	Total	0	5	1	0	6
DBHDS	DBHDS	0	5	1	0	6
Region 1	Total	10	2	7	1	20
Region 1	Encompass	0	1	1	0	2
Region 1	HARRISONBURG-ROCKINGHAM	2	0	1	0	3
Region 1	HORIZON	1	1	3	0	5
Region 1	NORTHWESTERN	3	0	1	1	5
Region 1	RAPPAHANNOCK AREA	4	0	1	0	5
Region 2	Total	9	0	0	0	9
Region 2	ARLINGTON	1	0	0	0	1
Region 2	FAIRFAX-FALLS CHURCH	6	0	0	0	6
Region 2	PRINCE WILLIAM COUNTY	2	0	0	0	2
Region 3	Total	12	3	3	1	19
Region 3	BLUE RIDGE	2	1	0	0	3
Region 3	DANVILLE-PITTSYLVANIA	1	0	0	0	1
Region 3	MOUNT ROGERS	3	0	1	0	4
Region 3	NEW RIVER VALLEY	1	0	0	0	1
Region 3	PIEDMONT	4	2	0	0	6
Region 3	SOUTHSIDE	1	0	2	1	4
Region 4	Total	10	1	5	2	18
Region 4	CHESTERFIELD	2	1	3	2	8
Region 4	CROSSROADS	3	0	0	0	3
Region 4	DISTRICT 19	1	0	0	0	1
Region 4	GOOCHLAND POWHATAN	1	0	0	0	1
Region 4	HENRICO AREA	2	0	1	0	3
Region 4	RICHMOND BHVRL HLTH	1	0	1	0	2
Region 5	Total	4	1	0	1	6
Region 5	CHESAPEAKE	1	1	0	1	3
Region 5	COLONIAL	1	0	0	0	1
Region 5	HAMPTON-NN	1	0	0	0	1
Region 5	MIDDLE PENINSULA NORTHERN	1	0	0	0	1
Total		45	12	16	5	78

Fig. 12

RST Recommendations

Of the 73 referrals submitted through WaMS, 49 (62.8%) of referrals included recommendations from RSTs (Fig. 14). Further, of the 73 referrals, 33 (47.7%) were not considering more integrated services. (Fig. 15)

of RST referrals with RST recommendations to resolve barriers or address concerns

CreatedRSTRecResBarrier	2024 Q2		Total	
	# of RSTs	% of RSTs	# of RSTs	% of RSTs
	5	6.4%	5	6.4%
No	24	30.8%	24	30.8%
Yes	49	62.8%	49	62.8%
Total	78	100.0%	78	100.0%

of RST referrals with RST recommendations to resolve barriers or address concerns

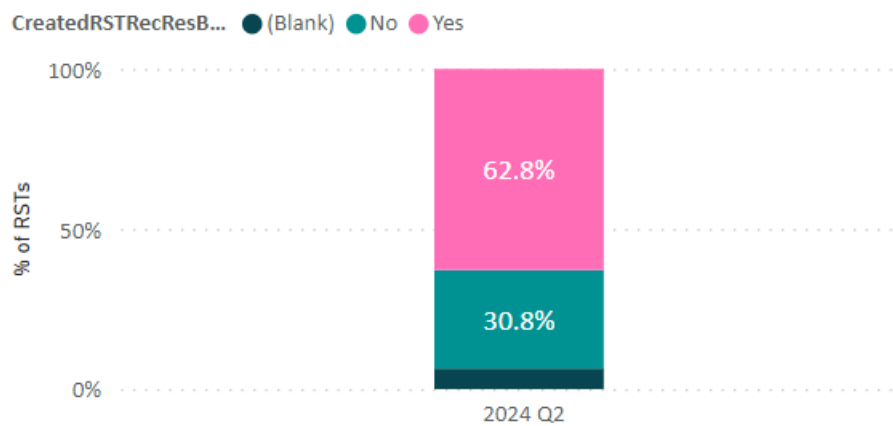


Fig. 14

Number not considering more integrated services

SFY Quarter RST Requested Date	2024 Q2		Total	
	# of RSTs	% of RSTs	# of RSTs	% of RSTs
	5	5.8%	5	5.8%
No	40	46.5%	40	46.5%
Yes	33	47.7%	33	47.7%
Total	78	100.0%	78	100.0%

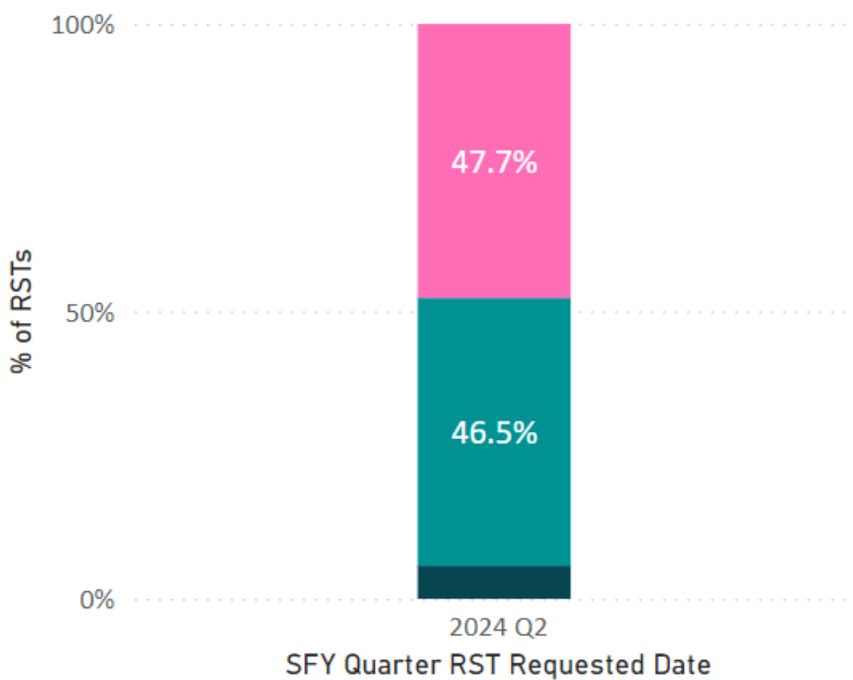


Fig. 15

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 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 2nd quarter of FY24, 56.4% (44) of the referrals were processed through Team VI. (Fig.16)

Teams

SFY Quarter RST Requested Date	2024 Q2		Total	
TeamDescription ▲	# of RSTs	% of RSTs	# of RSTs	% of RSTs
	5	6.4%	5	6.4%
Team I	12	15.4%	12	15.4%
Team II	4	5.1%	4	5.1%
Team III	6	7.7%	6	7.7%
Team IV	7	9.0%	7	9.0%
Team VI	44	56.4%	44	56.4%
Total	78	100.0%	78	100.0%

Teams

TeamDescription ● Team VI ● Team IV ● Team III ● Team II ● Team I ● (Blank)

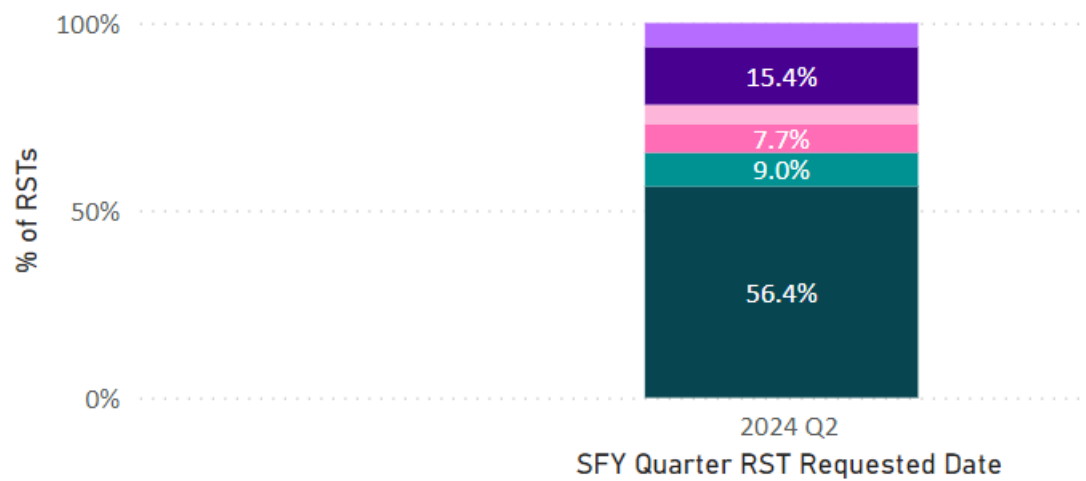


Fig. 16

Distribution of referrals reviewed by Team VI

As seen below, most referrals reviewed by Team VI in Q2 are attributed to Regions IV and V at 25% and 29.5% respectively. (Fig. 17)

Teams

SFY Quarter RST Requested Date	2024 Q2		Total	
	# of RSTs	% of RSTs	# of RSTs	% of RSTs
Region I	6	13.6%	6	13.6%
Region II	5	11.4%	5	11.4%
Region III	9	20.5%	9	20.5%
Region IV	11	25.0%	11	25.0%
Region V	13	29.5%	13	29.5%
Total	44	100.0%	44	100.0%

Teams

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

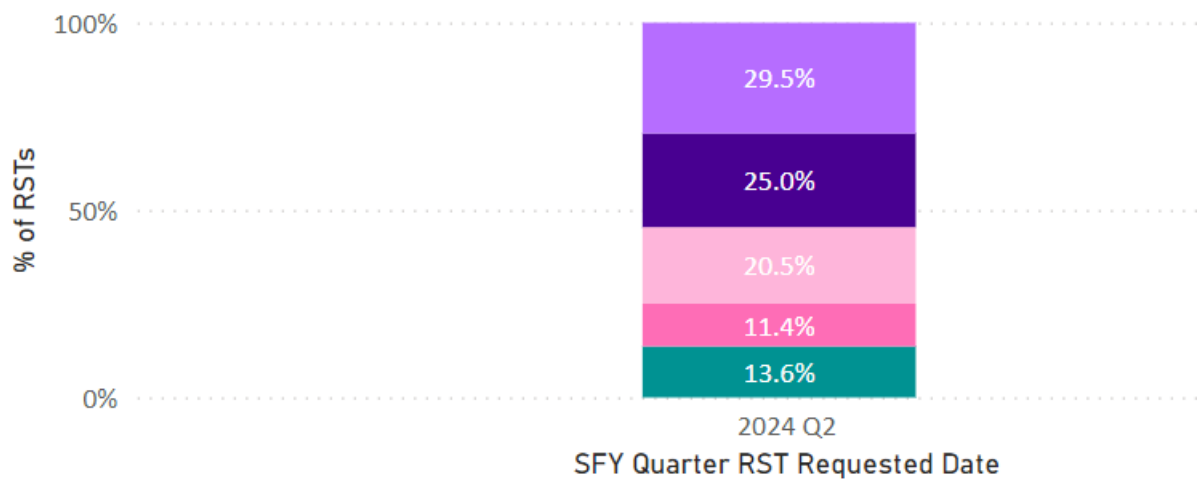


Fig. 17

Barriers

Data in the 2nd quarter FY24 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 Regions 1 and 4.

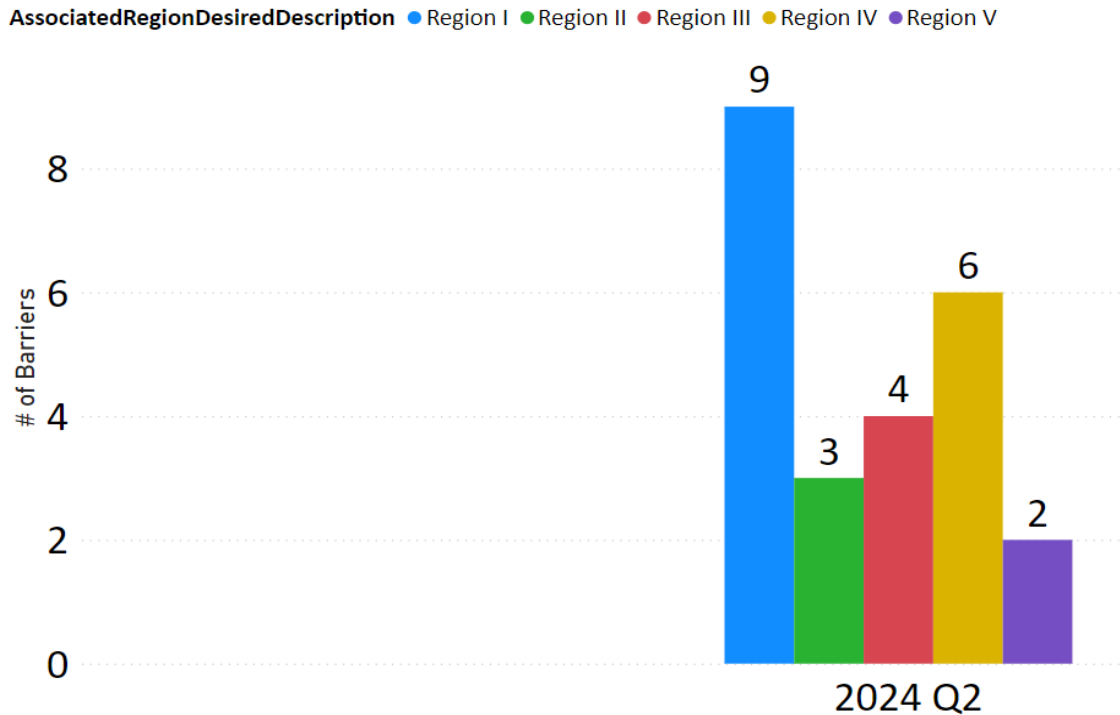


Fig. 18

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 Regions 1 and 4, which accounted for 9 of the 6 of the barriers identified. Barriers and the related services and regions are shown below. (Fig. 19).

Barriers by Type and Services, FY24 Q2

Barrier to Service	Considered Service Option	Region I	Region II	Region III	Region IV	Region V	Total
Individual/SDM Choice	Total	2	1		3	2	8
	Group Home Residential (4 or fewer)	1	1		2	1	5
	In-Home Support Services					1	1
	Sponsored Residential	1			1		2
Lack of behavioral expertise	Total	3		2	1		6
	Group Home Residential (4 or fewer)	2		2			4
	Sponsored Residential	1					1
	Supported Living				1		1
Lack of medical expertise	Total	3			1		4
	Group Home Residential (4 or fewer)	2			1		3
	Sponsored Residential	1					1
Lack of mental health expertise	Total	1	1				2
	Group Home Residential (4 or fewer)	1	1				2
Lack of provider at referral (other than integrated residential)	Total			1			1
	Sponsored Residential			1			1
No integrated residential provider operating in desired area	Total			1			1
	Group Home Residential (4 or fewer)			1			1
Provider/setting match	Total		1		1		2
	Group Home Residential (4 or fewer)				1		1
	Therapeutic Consultation		1				1
Total		9	3	4	6	2	24

Fig. 19

The RST referral form specifically asks all submitters to report concerns with transportation. For Q2 FY24, six of 78 referrals reported concerns, which was 7.7% of all referrals. (Fig. 20)

Fig. 20 Note: Five missed referrals are reported in top row.

Transportation Concerns

SFY Quarter RST Requested Date	2024 Q2		Total	
	# of RSTs	% of RSTs	# of RSTs	% of RSTs
▲	5	6.4%	5	6.4%
No	67	85.9%	67	85.9%
Yes	6	7.7%	6	7.7%
Total	78	100.0%	78	100.0%

Regional Support Teams – FY24 Q2

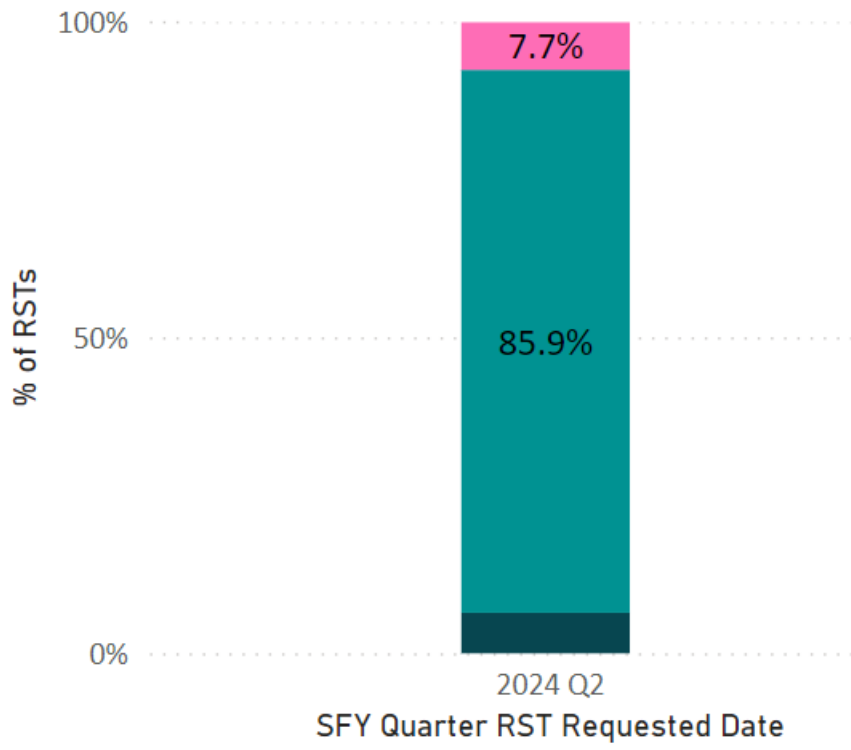


Fig. 20

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 28 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 statuses by CSB are provided in Fig. 22.

of RST referrals by Region

SFY Quarter RST Requested Date ReferringAgencyRegionDescription ▼	2024 Q2			Total
	Closed	Pending Submitter Closure	Total	
Region V	3	6	9	9
Region IV	12	6	18	18
Region III	10	7	17	17
Region II	9	1	10	10
Region I	11	8	19	19
	5		5	5
Total	5	45	28	78

Fig. 21, Note five missing referrals are reported in the row above totals.

RST Workflow Status by Submitter (Fig. 22)
FY24 Q2

Location	Submitter	RST Workflow Status	# of RSTs
Region I	Encompass Community Supports	Pending Submitter Closure	2
Region I	HARRISONBURG-ROCKINGHAM CSB	Closed	3
Region I	HORIZON BEHAVIORAL HEALTH	Closed	2
Region I	HORIZON BEHAVIORAL HEALTH	Pending Submitter Closure	3
Region I	NORTHWESTERN COMMUNITY SVCS	Missed	1
Region I	NORTHWESTERN COMMUNITY SVCS	Closed	2
Region I	NORTHWESTERN COMMUNITY SVCS	Pending Submitter Closure	2
Region I	RAPPAHANNOCK AREA COMMUNITY	Closed	1
Region I	RAPPAHANNOCK AREA COMMUNITY	Pending Submitter Closure	4
Region II	ARLINGTON MENTAL HEALTH	Pending Submitter Closure	1
Region II	FAIRFAX-FALLS CHURCH CSB	Closed	1
Region II	FAIRFAX-FALLS CHURCH CSB	Pending Submitter Closure	5
Region II	PIEDMONT COMMUNITY SERVICES	Closed	1
Region II	PRINCE WILLIAM COUNTY CSB	Closed	2
Region III	BLUE RIDGE CSB	Closed	3
Region III	DANVILLE-PITTSYLVANIA COM SERV	Closed	1
Region III	MOUNT ROGERS CSB	Closed	1
Region III	MOUNT ROGERS CSB	Pending Submitter Closure	3
Region III	NEW RIVER VALLEY COMMUNITY SERVICES	Pending Submitter Closure	1
Region III	PIEDMONT COMMUNITY SERVICES	Closed	3
Region III	PIEDMONT COMMUNITY SERVICES	Pending Submitter Closure	2
Region III	SOUTHSIDE CSB	Missed	1
Region III	SOUTHSIDE CSB	Closed	2
Region III	SOUTHSIDE CSB	Pending Submitter Closure	1
Region IV	CHESTERFIELD CSB	Missed	2
Region IV	CHESTERFIELD CSB	Closed	5
Region IV	CHESTERFIELD CSB	Pending Submitter Closure	1
Region IV	CROSSROADS CSB	Closed	3
Region IV	DBHDS	Pending Submitter Closure	2
Region IV	DISTRICT 19 MEN HLTH SER	Closed	1
Region IV	GOOCHLAND POWHATAN MENTAL HLTH	Closed	1
Region IV	HENRICO AREA	Closed	1
Region IV	HENRICO AREA	Pending Submitter Closure	2
Region IV	RICHMOND BHVRL HLTH AUTHORITY	Closed	1
Region IV	RICHMOND BHVRL HLTH AUTHORITY	Pending Submitter Closure	1
Region V	CHESAPEAKE INTERGRATED BEHAV	Missed	1
Region V	CHESAPEAKE INTERGRATED BEHAV	Pending Submitter Closure	2
Region V	COLONIAL BEHAVIORAL HEALTH	Pending Submitter Closure	1
Region V	DBHDS	Pending Submitter Closure	4
Region V	HAMPTON-NN CSB	Closed	1
Region V	MIDDLE PENINSULA NORTHERN NECK CSB	Closed	1

RST Workflow Status Pending Submitter Closure (Fig 23)
All Quarters to Date

Location	Submitter	# of RSTs
Region I	Total	26
Region I	ENCOMPASS COMMUNITY SUPPORTS	2
Region I	HARRISONBURG-ROCKINGHAM	1
Region I	HORIZON	4
Region I	NORTHWESTERN	4
Region I	PLANNING DISTRICT ONE	1
Region I	RAPPAHANNOCK AREA	6
Region I	REGION TEN	7
Region I	VALLEY	1
Region II Total	Total	10
Region II	ARLINGTON	4
Region II	LOUDOUN COUNTY	3
Region II	PRINCE WILLIAM COUNTY	3
Region III Total	Total	29
Region III	BLUE RIDGE	4
Region III	CUMBERLAND	7
Region III	DANVILLE-PITTSYLVANIA	1
Region III	HIGHLANDS	1
Region III	MOUNT ROGERS	4
Region III	NEW RIVER VALLEY	3
Region III	PIEDMONT	8
Region III	SOUTHSIDE	1
Region IV Total	Total	46
Region IV	CHESTERFIELD	15
Region IV	CROSSROADS	7
Region IV	DBHDS	2
Region IV	DBHDS on behalf of REACH	1
Region IV	DISTRICT 19	3
Region IV	GOOCHLAND POWHATAN	3
Region IV	HANOVER	1
Region IV	HENRICO AREA	9
Region IV	RICHMOND BHVRL HLTH	5
Region V Total	Total	31
Region V	CHESAPEAKE INTERGRATED BEHAV HEALTHCARE	5
Region V	VIRGINIA BEACH	3
Region V	COLONIAL	1
Region V	DBHDS	11
Region V	EASTERN SHORE	1
Region V	MIDDLE PENINSULA NORTHERN NECK	1
Region V	NORFOLK	3
Region V	PORTSMOUTH	4
Region V	WESTERN TIDEWATER	2
Total		142

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)