

**Regional Support Teams** 

State Fiscal Year 2023, 3<sup>rd</sup> Quarter



### **Overview**

Five Regional Support Teams (RSTs) were implemented in March 2013 by the Department of Behavioral Health and Development Services (DBHDS) with Virginia's emphasis 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 skilled 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 CRC Contacts**

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

- 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 Third Quarter of FY23 (January- March 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 became available in June 2023 to assist 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 initial adjustments to the WaMS RST module during this first quarter following the transition.

By January 20, 2023, a few defects and changes were identified and requested to improve the system. These system edits include:

- Barrier selection was initially included as an open text box, which required reformatting to a barrier listing with radio buttons so that barrier data can be pulled from the system.
- Tool tips were missing from the system for each of the barrier reasons, which were included to provide guidance to users on barrier descriptions.

- A corrected defect occurred where recommendations that were entered into the tracker by the RST for CSB review were disappearing from the tracker form. Where the recommendations were disappearing, no corrections could be made due to the status being "pending submitter closure."
- Confirmation of late reasons was added to the RST-completed portion of the referral to ensure that lateness is confirmed by the RST.
- To clarify for users and improve data quality, a data label was improved to provide more detail, which states "If yes, SC confirms the CRC recommendations resolved the barrier to the individual/Authorized Representative's satisfaction?"
- Added a level 1 RST submission review, so that the CRC can receive and, if needed, return the initial submission back to the SC for editing.
- Added a level 2 submission review, following the SC acting on the CRC recommendations, so that
  the RST Coordinator can confirm that the correct option (i.e., barriers resolved or not resolved
  following CRC) was entered or submit back to the SC for correction.
- One additional update has been requested to the VIC to ensure that the first and last name of the selected Support Coordinator is captured in the form.

In the 3<sup>rd</sup> quarter FY23, eleven referrals accepted outside of the WaMS system because they were submitted before the WaMS go live date and fell into the 3rd quarter meetings for their regions. Of these 11, three were late due to 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), and two due to the individual moving to a less integrated setting without CSB prior notification (Reason C). None of these referrals were late an Individual has moved to a less integrated setting prior to a scheduled RST Meeting (Reason A).

These referrals are noted below (Table 1) and will be used in calculating timeliness measures but are excluded from other WaMS data charts presented during this first month following transition.

#### Referrals External to WaMS for Q3 FY23

		Late counts			
Region	Total count	Reason A	Reason B	Reason C	
Region 1	3	0	1	0	
Region 2	2	0	0	1	
Region 3	1	0	0	0	
Region 4	4	0	2	1	
Region 5	1	0	0	0	
Totals	11	0	3	2	

Table 1

### **RST Referral Data**

There was a total of 135 referrals made with a RST requested date occurring in Q3 FY23 with the largest number seen in region 4 (54) and the lowest in region 3 (17) (Fig. 1).

## # of RST referrals by Region



Region	2023 Q3	Total
DBHDS	4	4
Region 1	27	27
Region 2	12	12
Region 3	17	17
Region 4	54	54
Region 5	21	21
Total	135	135

Fig. 1

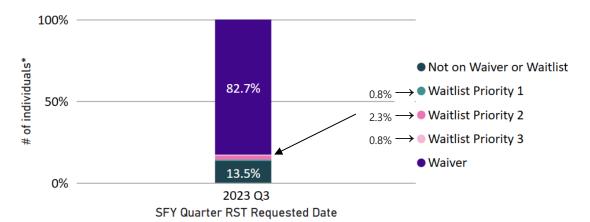
When considering the number of unique individuals, the 135 referrals are attributed to 133 unique individuals. Of those actively enrolled in a DD Waiver, 109 receive Community Living Waiver and 1 had the Family and Individual Supports Waiver (Fig 2). No referrals occurred for individuals receiving the Building Independence waiver. Eighteen individuals did not have a DD Waiver or were not on the wait list. There were five people on the DD Waitlist: one on Priority 1, three on Priority 2, and one on Priority 3 (Fig. 3).

### # of Individuals Actively Enrolled on a Waiver by Type

	2023 Q3		
Waiver Type	# of individuals*	% of Total	
Community Living	109	99.1%	
Family and Individual Supports	1	0.9%	
Total	110	100.0%	

Fig. 2





	2023 Q3		
Waiver Status Collapsed	# of Individuals	% of Individuals	
Waiver	110	82.7%	
Not on Waiver or Waitlist	18	13.5%	
Waitlist Priority 2	3	2.3%	
Waitlist Priority 1	1	0.8%	
Waitlist Priority 3	1	0.8%	
Total	133	100.0%	

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

Fig. 3

129 of referrals submitted were from individuals living in the community while six were submitted for individuals residing in the training center setting. Based on a review of data submitted, it was determined that the six referrals attributed to training centers were coded incorrectly by CSBs. Following this review, it was determined that there were no training center referrals and all 135 referrals received during Q3 are attributable to the community (Fig. 4).

### # of RST Identified as Community Referrals and Reason

SFY Quarter	2023 Q3		
Community Referral	# of RSTs	<b>▽</b> % of	RSTs 🔻
No		0	0.0%
Yes	13	35	100.0%
Total	13	35	100.0%

Fig. 4

The six community referrals that were submitted as community referrals were reviewed to determine the correct community referral reason with five considering a move to a nursing facility or ICF and one considering a group home of five or more beds. These six reasons have been added to the 129 community referral reasons, which brings the total number of community referrals to 135 (Fig. 5).

SFY Quarter RST Requested Date		2023 Q3
Community referral reason	¥	Count of RST Referrals 🔻
At REACH without disposition		6
Difficulty finding resources in the community within any timeframe		5
Moving to a group home of five or more individuals		90
Moving to a nursing home or ICF		26
Pattern of repeatedly being removed from the home		8
Total		135

Fig. 5

Of the 135 referrals submitted, 98 (72.6%) were related to a need for residential services. (Fig. 6)

# % of RST identified as Residential Services



	2023 Q3	Total		
•	# of RSTs	% of RSTs	# of RSTs	% of RSTs
No	37	27.4%	37	27.4%
Yes	98	72.6%	98	72.6%
Total	135	100.0%	135	100.0%

Fig. 6

Considering the source of community referrals, the largest number (20) were submitted by Chesterfield CSB. Eleven CSBs submitted only one referral. (Fig. 7)

SFY Quarter RST Requested Date	2023 Q3	
Submitter	# of RSTs	% of RSTs
BLUE RIDGE CSB	2	1.5%
CHESAPEAKE INTERGRATED BEHAV HEALTHCARE	1	0.7%
CHESTERFIELD CSB	20	14.8%
CITY OF VA BEACH CSB MHMRSAS	3	2.2%
COLONIAL BEHAVIORAL HEALTH	3	2.2%
CROSSROADS CSB	8	5.9%
CUMBERLAND MNTL HLTH CTR	4	3.0%
DBHDS*	4	3.0%
DISTRICT 19 MEN HLTH SER	2	1.5%
FAIRFAX-FALLS CHURCH CSB	9	6.7%
GOOCHLAND POWHATAN MENTAL HLTH	3	2.2%
HAMPTON-NN CSB	8	5.9%
HANOVER COUNTY COMMUNITY SERVICES	2	1.5%
HARRISONBURG-ROCKINGHAM CSB	8	5.9%
HENRICO AREA MENTAL HLTH & DEVLPMNTL SVC	14	10.4%
HIGHLANDS CMNTY SVCS BOARD	3	2.2%
HORIZON BEHAVIORAL HEALTH	3	2.2%
LOUDOUN COUNTY CSB	1	0.7%
MOUNT ROGERS CSB	5	3.7%
NEW RIVER VALLEY COMMUNITY SERVICES	1	0.7%
NORFOLK COMMUNITY SERVICES BOARD	1	0.7%
NORTHWESTERN COMMUNITY SVCS	1	0.7%
PIEDMONT COMMUNITY SERVICES	1	0.7%
PLANNING DISTRICT ONE CSB	1	0.7%
Portsmouth CSB	1	0.7%
PORTSMOUTH DEPT OF BEHAVIORAL	3	2.2%
PRINCE WILLIAM COUNTY CSB	2	1.5%
RAPPAHANNOCK AREA COMMUNITY SERVICES BRD	7	5.2%
RAPPAHANNOCK RAPIDAN CSB	1	0.7%
REGION TEN CMMNTY SVCS BRD	3	2.2%
RICHMOND BHVRL HLTH AUTHORITY	5	3.7%
ROCKBRIDGE AREA COMMUNITY SVS BOARD	3	2.2%
VALLEY CSB	1	0.7%
WESTERN TIDEWATER COMMUNITY SERVICES BOA	1	0.7%
Total	135	100.0%

<sup>\*</sup> Four referrals submitted by DBHDS

The RST referral collects the desired region where an individual prefers to live and access services. 58 referrals indicated that the person wanted to receive services in Region 4 (43%). Only ten percent of referrals reflected a desire to receive services in Region 2 (13). (Fig 8)

# # of RST Referrals by Desired Region

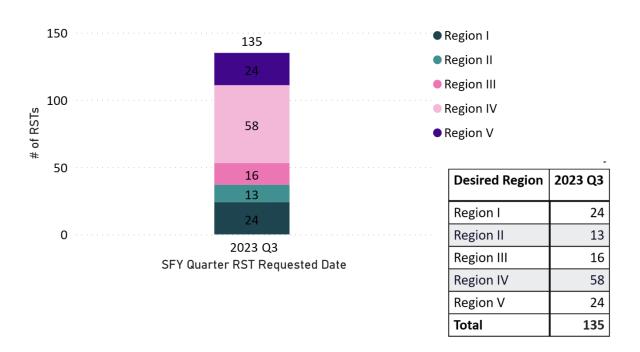


Fig. 8

### # of Emergency Referrals by CSB and Reason

Two emergency referrals were confirmed by Community Resource Consultants as emergencies in Q3. Both were for individuals who were homeless at the time of referral. (Fig. 9)

Does CRC Recommend Emergency Meeting	2023 Q3	Total
No	133	133
Yes	2	2
Total	135	135

SFYQ ▲	CSB	Primary Emergency Referral Criteria Description	# of RSTs
2023 Q3	CHESTERFIELD CSB	Currently homeless	1
2023 Q3	FAIRFAX-FALLS CHURCH CSB	Currently homeless	1
Total			2

Fig. 9

#### **Late Referrals**

Due to system updates required during the first month of implementation, late data confirmed by the RST was supplemented with late assertions made by CSBs. 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), and Reason C (Individual moved without CSB notification). For these counts in Q3, data was pulled from RST confirmations for 51 referrals, and supplemented with CSB-asserted reasons for 84 referrals. (Fig. 10)

Region	Sum of 1. No late criteria apply	Sum of 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	Sum of 3. Reason B: Individual has or will move without sufficient time to implement RST Recommendation(s)	Sum of 4. Reason C: Individual moved without CSB notification	Sum of 6. Missed
DBHDS	1		3		0
Region 1	13	1	12	1	1
Region 2	11		1		1
Region 3	9	1	5	2	0
Region 4	33	4	16	1	5
Region 5	15	1	4	1	2
<b>Grand Total</b>	82	7	41	5	9

Fig. 10

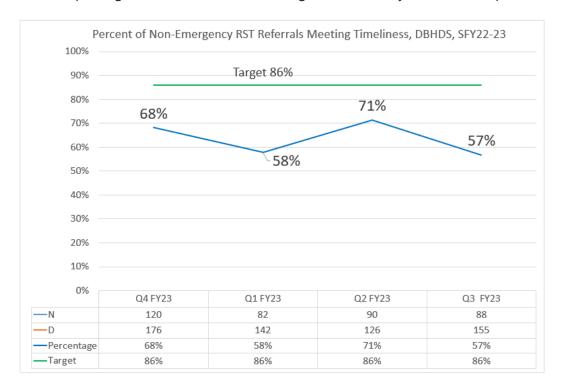
A "Late Referral" is defined as a referral where:

- 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).

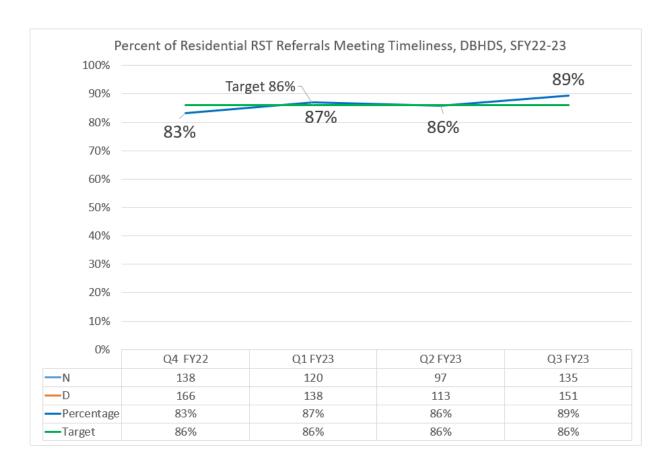
These four reasons provide data related to calculating two measures monitored by the Case Management Steering Committee. The following charts reflect the lateness of RST referrals. By conducting a review of WaMS service authorization data, it was determined that 9 additional referrals were needed but were not submitted by CSBs. 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 3rd Quarter FY23 are provided below:

**86% of all statewide non-emergency referrals, as such referrals are defined in the DBHDS RST Protocol.** There were 0 Training Center referrals, 131 CSB-submitted referrals, 4 DBHDS-submitted community referrals, 11 accepted outside of WaMS, and 9 missed community referrals. A total of 155 referrals were submitted or missed in Q3. For this reporting period, 67 referrals were late for reasons A, B, C, or missed in reporting (43.2%) while the remaining 88 were timely (56.8%). (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 131 CSB-submitted community referrals in WaMS, 11 accepted outside of WaMS, and 9 missed CSB community referrals. A total of 151 referrals were submitted or missed by CSBs in Q3. 9 were not provided and another 7 were reported as late for reason A for a total of 16 late referrals related to CSB accountability (10.6% late). For this reporting period, the result is 89.4% (135/151) timely, which exceeds the target of 86%.



Graph 2

# **Referral Submissions by Source**

## **No Late Criteria Apply (Fig.11)**

			1. No late criteria	
Region -	ReferringAgency	Ŧ	apply	Ţ
DBHDS	DBHDS		1	
Region 1	HARRISONBURG-ROCKINGHAM CSB		4	
Region 1	RAPPAHANNOCK AREA COMMUNITY SERVICES BRD		5	
Region 1	RAPPAHANNOCK RAPIDAN CSB		1	
Region 1	REGION TEN CMMNTY SVCS BRD		2	
Region 1	ROCKBRIDGE AREA COMMUNITY SVS BOARD		1	
Region 2	FAIRFAX-FALLS CHURCH CSB		8	
Region 2	LOUDOUN COUNTY CSB		1	
Region 2	PRINCE WILLIAM COUNTY CSB		2	
Region 3	BLUE RIDGE CSB		1	
Region 3	CUMBERLAND MNTL HLTH CTR		2	
Region 3	HIGHLANDS CMNTY SVCS BOARD		1	
Region 3	MOUNT ROGERS CSB		2	
Region 3	NEW RIVER VALLEY COMMUNITY SERVICES		1	
Region 3	PIEDMONT COMMUNITY SERVICES		1	
Region 3	PLANNING DISTRICT ONE CSB		1	
Region 4	CHESTERFIELD CSB		9	
Region 4	CROSSROADS CSB		4	
Region 4	GOOCHLAND POWHATAN MENTAL HLTH		3	
Region 4	HANOVER COUNTY COMMUNITY SERVICES		2	
Region 4	HENRICO AREA MENTAL HLTH & DEVLPMNTL SVC		12	
Region 4	RICHMOND BHVRL HLTH AUTHORITY		3	
Region 5	CHESAPEAKE INTERGRATED BEHAV HEALTHCARE		1	
Region 5	CITY OF VA BEACH CSB MHMRSAS		2	
Region 5	COLONIAL BEHAVIORAL HEALTH		2	
Region 5	HAMPTON-NN CSB		7	
Region 5	NORFOLK COMMUNITY SERVICES BOARD		1	
Region 5	PORTSMOUTH DEPT OF BEHAVIORAL		2	
			82	

Fig. 11

Late referrals for Reasons A, B and C (Fig. 12)

	son A: Lower numbers improve CSB pliance and statewide performance.	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
Region	ReferringAgency	less integrated setting
Region 1	HARRISONBURG-ROCKINGHAM CSB	1
Region 3	BLUE RIDGE CSB	1
Region 4	CHESTERFIELD CSB	2
Region 4	DISTRICT 19 MEN HLTH SER	1
Region 4	HENRICO AREA MENTAL HLTH & DEVLPMNTL SVC	1
Region 5	PORTSMOUTH DEPT OF BEHAVIORAL	1
		7

Reason B: Lower numbers improve statewide performance		3. Reason B: Individual has or will move without sufficient time to implement RST
Region -	ReferringAgency	Recommendation(s)
DBHDS	DBHDS	3
Region 1	HARRISONBURG-ROCKINGHAM CSB	3
Region 1	HORIZON BEHAVIORAL HEALTH	3
Region 1	RAPPAHANNOCK AREA COMMUNITY SERVICES BRD	2
Region 1	REGION TEN CMMNTY SVCS BRD	1
Region 1	ROCKBRIDGE AREA COMMUNITY SVS BOARD	2
Region 1	VALLEY CSB	1
Region 2	FAIRFAX-FALLS CHURCH CSB	1
Region 3	CUMBERLAND MNTL HLTH CTR	1
Region 3	HIGHLANDS CMNTY SVCS BOARD	1
Region 3	MOUNT ROGERS CSB	3
Region 4	CHESTERFIELD CSB	9
Region 4	CROSSROADS CSB	4
Region 4	DISTRICT 19 MEN HLTH SER	1
Region 4	HENRICO AREA MENTAL HLTH & DEVLPMNTL SVC	1
Region 4	RICHMOND BHVRL HLTH AUTHORITY	1
Region 5	CITY OF VA BEACH CSB MHMRSAS	1
Region 5	HAMPTON-NN CSB	1
Region 5	PORTSMOUTH DEPT OF BEHAVIORAL	1
Region 5	WESTERN TIDEWATER COMMUNITY SERVICES BOA	1
		41

Reason C: Lower numbers improve statewide performance.		4. Reason C: Individual moved without CSB					
Region -	ReferringAgency	Ŧ	notification	T			
Region 1	NORTHWESTERN COMMUNITY SVCS		1				
Region 3	CUMBERLAND MNTL HLTH CTR		1				
Region 3	HIGHLANDS CMNTY SVCS BOARD		1				
Region 4	RICHMOND BHVRL HLTH AUTHORITY		1				
Region 5	COLONIAL BEHAVIORAL HEALTH		1				
			5				

The 11 referrals submitted outside of WaMS (Fig 13) were identified as having three referrals late for Reason B and two late for reason C as reported below. (Fig. 14)

#### Non-WaMS referrals

		Total	11	
Non-WaMS	RAPPAHANNOCK RAPIDAN		1	2023 Q3
Non-WaMS	VALLEY CSB		1	2023 Q3
Non-WaMS	RAPPAHANNOCK AREA		1	2023 Q3
Non-WaMS	FAIRFAX		2	2023 Q3
Non-WaMS	VIRGINIA BEACH		1	2023 Q3
Non-WaMS	HENRICO CSB		1	2023 Q3
Non-WaMS	SOUTHSIDE CSB		1	2023 Q3
Non-WaMS	CROSSROADS CSB		2	2023 Q3
Non-WaMS	GOOCHLAND POWHATAN MENTAL HLTH		1	2023 Q3

Fig. 13

			5b. Non-WaMS Reason
Region -	ReferringAgency	-	B* <b>.</b> ▼
Region 1	RAPPAHANNOCK RAPIDAN CSB		1
Region 4	CROSSROADS CSB		1
Region 4	HENRICO AREA MENTAL HLTH & DEVLPMNTL SVC		1
			3
			5c. Non-WaMS Reason
Region 🕶	ReferringAgency	-	C* 🔽
Region 2	FAIRFAX-FALLS CHURCH CSB		1
Region 4	CROSSROADS CSB		1
			2

Fig. 14

### Missed Referrals (Fig. 15)

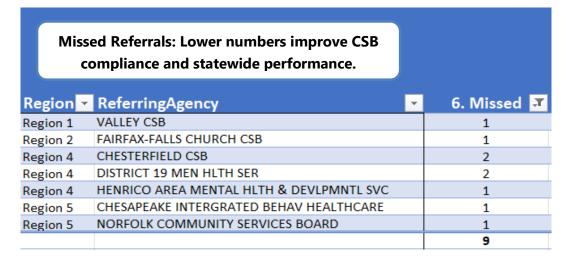


Fig. 15

### **RST Recommendations**

Of the 135 referrals submitted through WaMS, 67 (49.6%) of referrals included recommendations from RSTs. Further, of the 135 referrals, 53 (46.4%) were not considering more integrated services. (Fig. 16)

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

	2023 Q3		iotai	
CreatedRSTRecResBarrier	# of RSTs	% of RSTs	# of RSTs	% of RSTs
No	68	50.4%	68	50.4%
Yes	67	49.6%	67	49.6%
Total	135	100.0%	135	100.0%

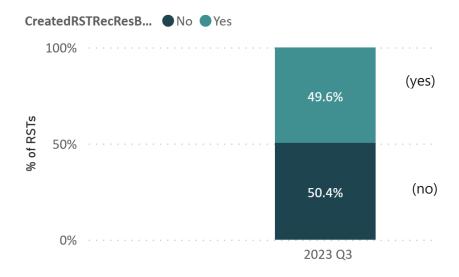


Fig. 16

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SFY Quarter RST Requested Date	2023 Q3			
•	# of RSTs	% of RSTs	# of RSTs	% of RSTs
No	82	53.6%	82	53.6%
Yes	53	46.4%	53	46.4%
Total	135	100.0%	135	100.0%

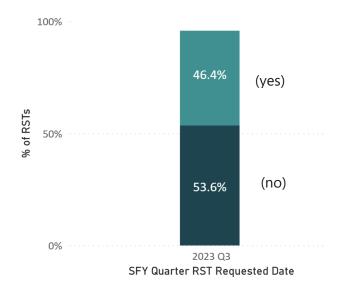
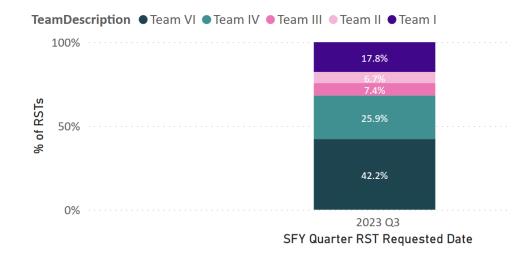


Fig. 17

# **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 made and acted on. In the 3<sup>rd</sup> quarter of FY23, 42.2% of the referrals were processed through Team VI. (Fig.18)

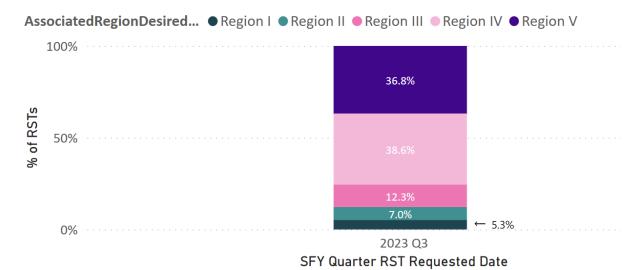


SFY Quarter RST Requested Date	2023 Q3		Total		
TeamDescription ▲	# of RSTs	% of RSTs	# of RSTs	% of RSTs	
Team I	24	17.8%	24	17.8%	
Team II	9	6.7%	9	6.7%	
Team III	10	7.4%	10	7.4%	
Team IV	35	25.9%	35	25.9%	
Team VI	57	42.2%	57	42.2%	
Total	135	100.0%	135	100.0%	

Fig. 18

## Distribution of referrals reviewed by Team VI

As seen below, the majority of referrals reviewed by Team VI are attributed to Regions IV and V and 38.6% and 36.8% respectively. (Fig. 19)



SFY Quarter RST Requested Date 2023 Q3 Total AssociatedRegionDesiredDescription # of RSTs | % of RSTs | # of RSTs % of RSTs 3 5.3% 5.3% Region I 4 7.0% 7.0% Region II 4 7 Region III 12.3% 7 12.3% 38.6% Region IV 22 38.6% 22 Region V 21 36.8% 21 36.8% **57** 100.0% **57** 100.0% Total

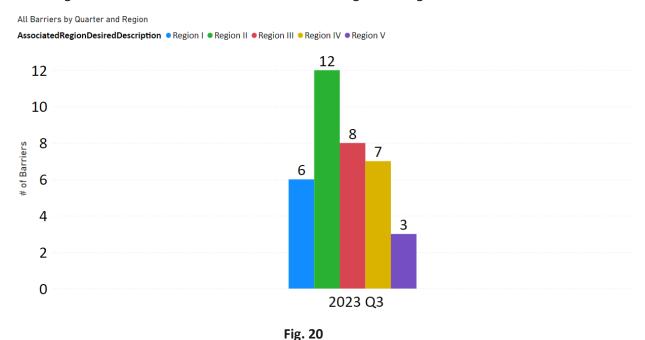
Fig. 19

### **Barriers**

Barrier data for Q3 FY23 was impacted by missing elements in the RST WaMS User Interface, which were corrected as a defect by the vendor during the quarter. Data in the 4<sup>th</sup> quarter FY23 will reflect all barriers identified across regions and services. Barrier data that was captured following system correction in Q3 are reported below.

# **Barriers by Region and Service**

The largest number of barriers were identified in Region 2. (Fig.20)



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 2. Excluding 13 occurrences, which were not captured due to the system update, the largest number was related to a lack of behavioral expertise in Regions 1, 2, and 5 (Fig. 21).

Barrier to Service	Considered Service Option	SFY23 Q3		Region II	Region III	Region IV	Region V	Total
Individual/SDM Choice	Total			4				4
Individual/SDM Choice	Group Home Residential (4 or fewer)	Total		2				2
Individual/SDM Choice	Shared Living	Total		1				1
Individual/SDM Choice	Therapeutic Consultation	Total		1				1
Lack of behavioral expertise	Total		3	1			2	6
Lack of behavioral expertise	CD Personal Assistance Services	Total	1					1
Lack of behavioral expertise	Group Home Residential (4 or fewer)	Total	2	1			1	4
Lack of behavioral expertise	Therapeutic Consultation	Total					1	1
Lack of medical expertise	Total				3			3
Lack of medical expertise	Group Home Residential (4 or fewer)	Total			3			3

Lack of provider at referral (other than integrated residential)	Total			1	2	1	1	5
Lack of provider at referral (other than	Community				_			_
integrated residential)	Engagement	Total			1			1
Lack of provider at referral (other than	Group Home							
integrated residential)	Residential (4 or fewer)			1				1
		Total						
Lack of provider at referral (other than	Skilled Nursing						1	1
integrated residential)		Total					1	1
Lack of provider at referral (other than	Sponsored Residential				1	1		2
integrated residential)		Total			1	1		2
No integrated residential provider	Total		1		1			2
No integrated residential provider	Sponsored Residential		1		1			2
operating in desired area		Total	1		1			2
Pre System Update	Total		2	3	2	3	3	13
Pre System Update	Group Home							
	Residential (4 or fewer)		1	1	2	3	3	10
		Total						
Pre System Update	Sponsored Residential	Total		2				2
Pre System Update	Supported Living	Total	1					1
Provider available, but access delayed	Total		1				1	2
I	Total							
Provider available, but access delayed	Group Home							
			<del>-</del>				1	1
	Group Home	Total					1	1
	Group Home	Total Total	1				1	<b>1</b>
Provider available, but access delayed	Group Home Residential (4 or fewer)			1			1	
Provider available, but access delayed  Provider available, but access delayed	Group Home Residential (4 or fewer) Sponsored Residential			1 1			1	1

Fig. 21

The RST referral form specifically asks all submitters to report concerns with transportation. For Q3 FY23, three of 135 referrals reported concerns, which was 2.2% of all referrals. (Fig. 22)

# **Transportation Concerns**

	# of RSTs	% of RSTs
_		
No	132	97.8%
Yes	3	2.2%
Total	135	100.0%

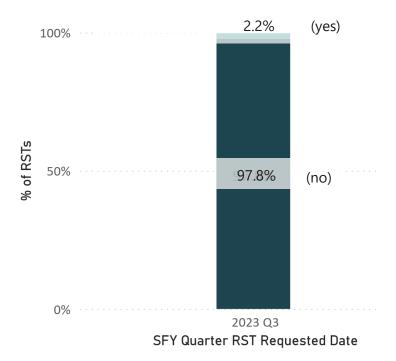


Fig. 22

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 Q3 met criteria for this measure. A regional summary is provided below. (Fig. 23)

**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?)

	2023	Total	
Region	No	Total	
Region I	27	27	27
Region II	12	12	12
Region III	17	17	17
Region IV	53	53	53
Region V	26	26	26
Total	135	135	135

Fig. 23

### **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 44 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. 24) Regional statuses by CSB are provided in Fig. 25.

## # of RST referrals by Region

SFY Quarter RST Requested Date	2023 Q3			Total
ReferringAgencyRegionDescription ▼	Closed	Pending Submitter Closure	Total	
Region V	17	9	26	26
Region IV	32	21	53	53
Region III	11	6	17	17
Region II	7	5	12	12
Region I	24	3	27	27
Total	91	44	135	135

Fig. 24

# **RST Workflow Status by Submitter**

Region	ReferringAgency	SFY Quarter	RST Workflow Status	# of RSTs
Region I	HARRISONBURG-ROCKINGHAM CSB	2023 Q3	Closed	8
Region I	HORIZON BEHAVIORAL HEALTH	2023 Q3	Closed	3
Region I	NORTHWESTERN COMMUNITY SVCS	2023 Q3	Closed	1
Region I	RAPPAHANNOCK AREA COMMUNITY SERVICES BRD	2023 Q3	Closed	5
Region I	RAPPAHANNOCK AREA COMMUNITY SERVICES BRD	2023 Q3	Pending Submitter Closure	2
Region I	RAPPAHANNOCK RAPIDAN CSB	2023 Q3	Closed	1
Region I	REGION TEN CMMNTY SVCS BRD	2023 Q3	Closed	3
Region I	ROCKBRIDGE AREA COMMUNITY SVS BOARD	2023 Q3	Closed	3
Region I	VALLEY CSB	2023 Q3	Pending Submitter Closure	1

Region	ReferringAgency	SFY Quarter	RST Workflow Status	# of RSTs
Region II	FAIRFAX-FALLS CHURCH CSB	2023 Q3	Closed	5
Region II	LOUDOUN COUNTY CSB	2023 Q3	Closed	1
Region II	PRINCE WILLIAM COUNTY CSB	2023 Q3	Closed	1
Region II	FAIRFAX-FALLS CHURCH CSB	2023 Q3	Pending Submitter Closure	4
Region II	PRINCE WILLIAM COUNTY CSB	2023 Q3	Pending Submitter Closure	1

Region	ReferringAgency	SFY Quarter	RST Workflow Status	# of RSTs
Region III	BLUE RIDGE CSB	2023 Q3	Pending Submitter Closure	2
Region III	CUMBERLAND MNTL HLTH CTR	2023 Q3	Closed	3
Region III	CUMBERLAND MNTL HLTH CTR	2023 Q3	Pending Submitter Closure	1
Region III	HIGHLANDS CMNTY SVCS BOARD	2023 Q3	Closed	2
Region III	HIGHLANDS CMNTY SVCS BOARD	2023 Q3	Pending Submitter Closure	1
Region III	MOUNT ROGERS CSB	2023 Q3	Closed	3
Region III	MOUNT ROGERS CSB	2023 Q3	Pending Submitter Closure	2
Region III	NEW RIVER VALLEY COMMUNITY SERVICES	2023 Q3	Closed	1
Region III	PIEDMONT COMMUNITY SERVICES	2023 Q3	Closed	1
Region III	PLANNING DISTRICT ONE CSB	2023 Q3	Closed	1

Region	ReferringAgency	SFY Quarter	RST Workflow Status	# of RSTs
Region IV	CHESTERFIELD CSB	2023 Q3	Closed	13
Region IV	CROSSROADS CSB	2023 Q3	Closed	1
Region IV	HANOVER COUNTY COMMUNITY SERVICES	2023 Q3	Closed	1
Region IV	HENRICO AREA MENTAL HLTH & DEVLPMNTL SVC	2023 Q3	Closed	14
Region IV	RICHMOND BHVRL HLTH AUTHORITY	2023 Q3	Closed	3
Region IV	CHESTERFIELD CSB	2023 Q3	Pending Submitter Closure	7
Region IV	CROSSROADS CSB	2023 Q3	Pending Submitter Closure	7
Region IV	DISTRICT 19 MEN HLTH SER	2023 Q3	Pending Submitter Closure	2
Region IV	GOOCHLAND POWHATAN MENTAL HLTH	2023 Q3	Pending Submitter Closure	3
Region IV	HANOVER COUNTY COMMUNITY SERVICES	2023 Q3	Pending Submitter Closure	1
Region IV	RICHMOND BHVRL HLTH AUTHORITY	2023 Q3	Pending Submitter Closure	1

### **Continued**

Region	ReferringAgency	SFY Quarter	RST Workflow Status	# of RSTs
Region V	CHESAPEAKE INTERGRATED BEHAV HEALTHCARE	2023 Q3	Closed	1
Region V	CITY OF VA BEACH CSB MHMRSAS	2023 Q3	Closed	1
Region V	COLONIAL BEHAVIORAL HEALTH	2023 Q3	Closed	3
Region V	DBHDS	2023 Q3	Closed	1
Region V	HAMPTON-NN CSB	2023 Q3	Closed	8
Region V	Portsmouth CSB	2023 Q3	Closed	1
Region V	PORTSMOUTH DEPT OF BEHAVIORAL	2023 Q3	Closed	1
Region V	RICHMOND BHVRL HLTH AUTHORITY	2023 Q3	Closed	1
Region V	CITY OF VA BEACH CSB MHMRSAS	2023 Q3	Pending Submitter Closure	2
Region V	DBHDS	2023 Q3	Pending Submitter Closure	3
Region V	NORFOLK COMMUNITY SERVICES BOARD	2023 Q3	Pending Submitter Closure	1
Region V	PORTSMOUTH DEPT OF BEHAVIORAL	2023 Q3	Pending Submitter Closure	2
Region V	WESTERN TIDEWATER COMMUNITY SERVICES BOA	2023 Q3	Pending Submitter Closure	1

Fig. 25

# **Acronyms and Abbreviations**

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

### Key

N- Number of referrals - used to determine	CSB(s) – Community Service Board(s)	
percentages		
<b>Closed</b> – RST made recommendations and final	<b>Open</b> - Requested additional information from	
disposition has been made by individual/AR. This	Community SC/TC. RST has not made	
includes referrals that were submitted late to the RST.	recommendations.	
<b>DBHDS</b> - Department of Behavioral Health and	<b>Pending</b> - Pended - RST made recommendations	
Developmental Services	and awaiting final disposition.	
SFY/FY – State Fiscal Year	<b>Q</b> – 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)	