

Regional Support Teams

State Fiscal Year 2024, 3rd 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.

- 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 FY24 (January – March 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 135 referrals made with an RST requested date occurring in Q3 FY24 with the largest number seen in Region 4 (41) and the lowest in Regions 2 (23) and 5 (23) (Fig. 1).

Fig. 1 (note: factoring in 13 missed referrals brings the referral count to 148 with 135 submissions)

Region	2024 Q3	Total
DBHDS	9	9
Region 1	27	27
Region 2	23	23
Region 3	23	23
Region 4	41	41
Region 5	25	25
Total	148	148

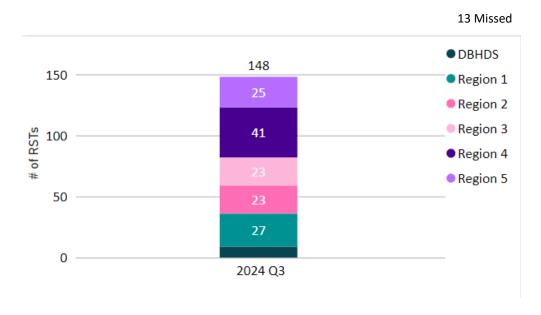


Fig. 1

When considering the number of unique individuals, the 135 referrals are attributed to 135 unique individuals plus the 13 missing referrals (148). Of those actively enrolled in a DD Waiver, 120 receive Community Living waiver, 9 have the Family and Individual Supports waiver, and none have Building Independence waiver (Fig 2). 14 individuals did not have a DD Waiver or were not on the wait list. There were five people on the DD Waitlist, and one individual had two referrals bringing the count to 147 when including missing referrals (Fig. 3).

of Individuals Actively Enrolled on a Waiver by Type

	2024 Q3	
Waiver Type	# of individuals*	% of Total
Community Living	120	93.1%
Family and Individual Supports	9	6.9%
Total	129	100.0%

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

	2024 Q3		
Waiver Status Collapsed	# of Individuals	% of Individuals	
Waiver	129	87.8%	
Not on Waiver or Waitlist	14	9.5%	
Waitlist Priority 3	2	1.4%	
Waitlist Priority 1	1	0.7%	
Waitlist Priority 2	1	0.7%	
Total	147	100.0%	



Fig. 3

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

135 referrals were submitted for individuals living in the community while 0 were submitted for individuals residing in the training center setting. 13 referrals were missed in reporting (Fig. 4, top row). All 135 referrals received during Q3 are attributed to the community.

of RST Identified as Community Referrals and Reason

	2024 Q3		
Community Referral	# of RSTs	% of RSTs	
Missing referrals	13	8.8%	
Yes	135	91.2%	
Total	148	100.0%	

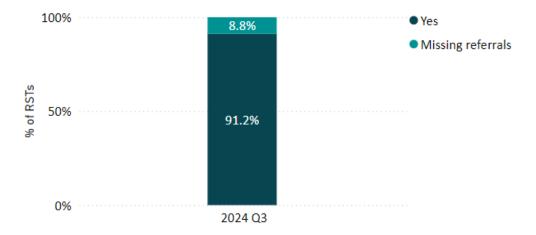


Fig. 4
(note: all 135 referrals were community referrals as stated above, 13 referrals were missing as reported in row 1)

Community Referral Reason	2024 Q3
At REACH without disposition	3
Difficulty finding resources in the community within any timeframe	7
Difficulty finding services in the community within 3 months of receiving a slot	1
Moving to a group home of five or more individuals	79
Moving to a nursing home or ICF	41
Pattern of repeatedly being removed from the home	4
Total	135

Fig. 5

Of the 135 referrals submitted, 102 (68.9%) were related to a need for residential services. (Fig. 6)

of RST identified as Residential Services

	2024 Q3		Total	
_	# of RSTs	% of RSTs	# of RSTs	% of RSTs
Missing referrals	13	8.8%	13	8.8%
No	33	22.3%	33	22.3%
Yes	102	68.9%	102	68.9%
Total	148	100.0%	148	100.0%



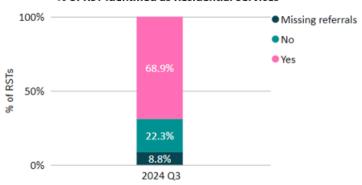


Fig. 6

Regional Support Teams – FY24 Q3 Considering the source of community referrals, the largest number was submitted by Chesterfield CSB (19). (Fig. 7)

	2024 Q3	
CSB ▲	# of RSTs	% of RSTs
ALLEGHANY HIGHLANDS CSB	1	0.7%
BLUE RIDGE CSB	6	4.1%
CHESAPEAKE INTERGRATED BEHAV HEALTHCARE	3	2.0%
CHESTERFIELD CSB	19	12.8%
CITY OF VA BEACH CSB MHMRSAS	5	3.4%
COLONIAL BEHAVIORAL HEALTH	1	0.7%
CROSSROADS CSB	2	1.4%
CUMBERLAND MNTL HLTH CTR	3	2.0%
DANVILLE-PITTSYLVANIA COM SERV	1	0.7%
DBHDS	8	5.4%
DBHDS on Behalf of HDMC & Highlands CSB	1	0.7%
DICKENSON COUNTY BEHAVIORAL HEALTH SVCS	1	0.7%
DISTRICT 19 MEN HLTH SER	1	0.7%
Encompass Community Supports (Formerly RAPPAHANNOCK RAPIDAN CSB)	1	0.7%
FAIRFAX-FALLS CHURCH CSB	18	12.2%
GOOCHLAND POWHATAN MENTAL HLTH	2	1.4%
HAMPTON-NN CSB	8	5.4%
HANOVER COUNTY COMMUNITY SERVICES	4	2.7%
HARRISONBURG-ROCKINGHAM CSB	3	2.0%
HENRICO AREA MENTAL HLTH & DEVLPMNTL SVC	7	4.7%
HIGHLANDS CMNTY SVCS BOARD	2	1.4%
LOUDOUN COUNTY CSB	3	2.0%
MIDDLE PENINSULA NORTHERN NECK CSB	2	1.4%
MOUNT ROGERS CSB	3	2.0%
NEW RIVER VALLEY COMMUNITY SERVICES	2	1.4%
NORFOLK COMMUNITY SERVICES BOARD	2	1.4%
NORTHWESTERN COMMUNITY SVCS	9	6.1%
PIEDMONT COMMUNITY SERVICES	3	2.0%
Total	148	100.0%

^{*} Eight referrals were submitted by DBHDS with one additional referral submitted by DBHDS on behalf of HDMC and Highlands.

Fig. 7

The RST referral collects the desired region where an individual prefers to live and access services. 38 referrals indicated that the person wanted to receive services in Region 4 (28.1% of submitted referrals). 16.3% of submitted referrals reflected a desire to receive services in Region 3 (22). (Fig 8, note submitted referrals = 135)

150 Region I 135 Region II Region III 100 Region IV # of RSTs 38 Region V 22 50 **Desired Region** 23 2024 Q3 Region I 23 2024 Q3 23 Region II Region III 22 38 Region IV 29 Region V Total 135

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 Q3. (Fig. 9)

Does CRC Recommend Emergency Meeting	2024 Q3	Total
No	135	135
Total	135	135

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 Q3, data was pulled from RST confirmations for 135 referrals and 13 missed referrals for a total count of 148. (Fig. 10)

Region	ReferringAgency	1. No late criteria apply	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	implement RST Recommendation(s)	4. Reason C: Individual moved without CSB notification	5. Missing referrals	Total
DBHDS	Total	2	2	5			9
Region 1	Total	16		7	2	2	27
Region 2	Total	19	2	2			23
Region 3	Total	16		7			23
Region 4	Total	20	1	13	2	5	41
Region 5	Total	16	1	2		6	25
Total		89	6	36	4	13	148

Fig. 10

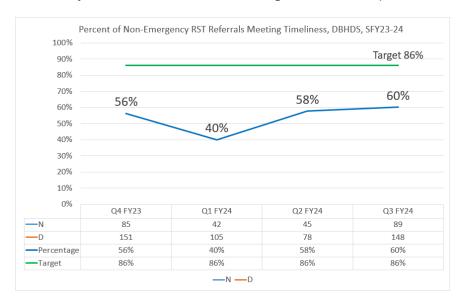
A "Late Referral" is defined as a referral where:

- 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 13 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.

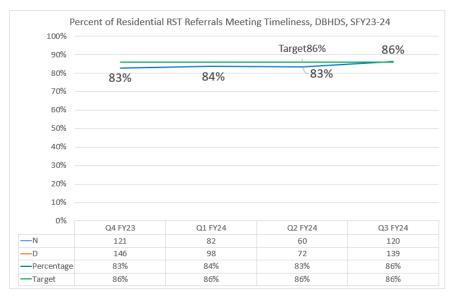
Results for the 3rd Quarter FY24 are provided below:

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, 126 CSB-submitted referrals, 9 DBHDS-submitted community referrals, 0 accepted outside of WaMS, and 13 missed community referrals. A total of 148 referrals were submitted or missed in Q3. For this reporting period, the result is 60% (89/148) 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 126 CSB-submitted community referrals in WaMS, 0 accepted outside of WaMS, and 13 missed CSB community referrals. A total of 139 referrals were submitted or missed by CSBs in Q3. 13 were not provided and another 6 were reported as late for Reason A, for a total of 19 late referrals related to CSB accountability (13.7% late). For this reporting period, the result is 86.3% (120/139) timely, which exceeds 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 Q3 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?)

	202	Total	
Region	No	Total	
Region I	24	24	24
Region II	23	23	23
Region III	23	23	23
Region IV	38	38	38
Region V	27	27	27
Total	135	135	135

Numerator and Denominator	Count
Numerator = Number of referrals confirmed as resolved	N/A
within the 9-month timeframe calculated	
in WaMS	
Denominator = Number of RST referrals where the	0
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.	

Table 1

Referral Submissions by Source for Q3 FY24 (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

Location	Submitter	1. No late criteria apply	2. Reason A	3. Reason B	4. Reason C	5. Missing referrals	Total
DBHDS	Total	2	2	5			9
DBHDS	DBHDS	1	2	5			8
DBHDS	DBHDS for HDMC & Highlands	1					1
Region 1	Total	16		7	2	2	27
Region 1	ALLEGHANY HIGHLANDS	1					1
Region 1	ENCOMPASS			1			1
Region 1	HARRISONBURG-ROCKINGHAM	1		2			3
Region 1	NORTHWESTERN	7		1		1	9
Region 1	RAPPAHANNOCK AREA	6			1		7
Region 1	REGION TEN	1		2			3
Region 1	ROCKBRIDGE AREA				1		1
Region 1	VALLEY			1		1	2
Region 2	Total	19	2	2			23
Region 2	FAIRFAX-FALLS CHURCH	17	1				18
Region 2	LOUDOUN COUNTY	1	1	1			3
Region 2	PRINCE WILLIAM COUNTY	1		1			2
Region 3	Total	16		7			23
Region 3	BLUE RIDGE	5		1			6
Region 3	CUMBERLAND	2		1			3
Region 3	DANVILLE-PITTSYLVANIA			1			1
Region 3	DICKENSON COUNTY	1					1
Region 3	HIGHLANDS	2					2
Region 3	MOUNT ROGERS	3					3
Region 3	NEW RIVER VALLEY	1		1			2
Region 3	PIEDMONT	1		2			3
Region 3	SOUTHSIDE	1		1			2
Region 4	Total	20	1	13	2	5	41
Region 4	CHESTERFIELD	9		7	1	2	19
Region 4	CROSSROADS	1			1		2
Region 4	DISTRICT 19					1	1
Region 4	GOOCHLAND POWHATAN			2			2

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Region 4	HANOVER	3	1				4
Region 4	HENRICO AREA	4		2		1	7
Region 4	RICHMOND	3		2		1	6
Region 5	Total	16	1	2		6	25
Region 5	CHESAPEAKE	2		1			3
Region 5	CITY OF VA BEACH	3	1			1	5
Region 5	COLONIAL					1	1
Region 5	HAMPTON-NN	8					8
Region 5	MIDDLE PENINSULA NORTHERN NECK	2					2
Region 5	NORFOLK					2	2
Region 5	PORTSMOUTH	1				2	3
Region 5	WESTERN TIDEWATER			1			1
Total		89	6	36	4	13	148

Fig. 12

RST Recommendations

Of the 135 referrals submitted through WaMS, 87 (64.4%) of referrals included recommendations from RSTs (Fig. 14). Further, of the 135 referrals, 67 (53.7%) were not considering more integrated services. (Fig. 15)

	2024 Q3				
CreatedRSTRecResBarrier	# of RSTs	% of RSTs			
No	48	35.56%			
Yes	87	64.44%			
Total	135	100.00%			

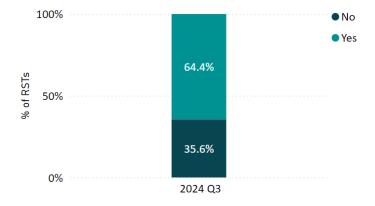


Fig. 14

More Integrated Services were Considered SFY Quarter RST Requested Date 2024 Q3

•	# of RSTs % of RSTs
No	68 42.0%
Yes	67 58.0%
Total	135 100.0%



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 3rd quarter of FY24, 45.9% (62) of the referrals were processed through Team VI. (Fig.16)

	2024 Q3		
Created TeamDescription	# of RSTs	% of RSTs	
Team I	20	14.81%	
Team II	17	12.59%	
Team III	7	5.19%	
Team IV	23	17.04%	
Team V	6	4.44%	
Team VI	62	45.93%	
Total	135	100.00%	

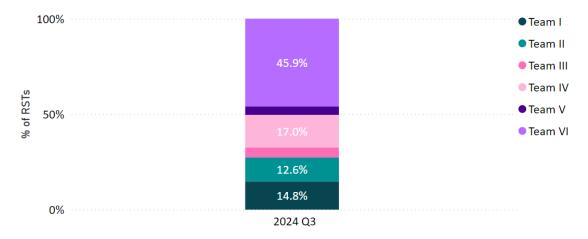


Fig. 16

Distribution of referrals reviewed by Team VI

As seen below, most referrals reviewed in Q3 are attributed to Regions III and IV at 24.19% and 25.81% respectively. (Fig. 17)

	2024 Q3		
Associated Desired Region	# of RSTs	% of RSTs	
Region I	5	8.06%	
Region II	6	9.68%	
Region III	15	24.19%	
Region IV	16	25.81%	
Region V	20	32.26%	
Total	62	100.00%	

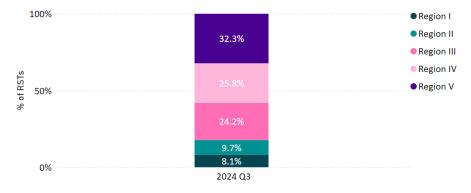


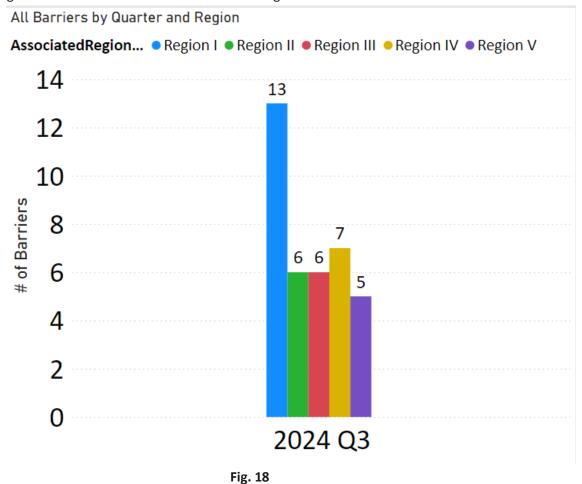
Fig. 17

Barriers

Data in the 3rd 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.



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 13 and 7 of the 37 barriers identified. Barriers and the related services and regions are shown below. (Fig. 19).

Barrier to Service	Considered Service Option	Region I	Region II	Region III	Region IV	Region V	Total
Individual/SDM Choice	Total	2		3	1	1	7
Individual/SDM Choice	Group Home Residential (4 or fewer)	1		2	1	1	5
Individual/SDM Choice	Sponsored Residential	1		1			2
Lack of behavioral expertise	Total	1	1		2	3	7
Lack of behavioral expertise	Community Coaching				1		1
Lack of behavioral expertise	Group Home Residential (4 or fewer)	1	1			1	3
Lack of behavioral expertise	In-Home Support Services					1	1
Lack of behavioral expertise	Sponsored Residential				1	1	2
Lack of medical expertise	Total	2		3	2		7
Lack of medical expertise	Group Home Residential (4 or fewer)	1		1	1		3
Lack of medical expertise	Sponsored Residential	1		2	1		4
Lack of mental health expertise	Total		1				1
Lack of mental health expertise	Group Home Residential (4 or fewer)		1				1
Lack of provider at referral (other than integrated residential)	Total	3	1		1		5
Lack of provider at referral (other than integrated residential)	AD Personal Assistance Services	1					1
Lack of provider at referral (other than integrated residential)	Community- Based Crisis Supports	1					1
Lack of provider at referral (other than integrated residential)	Shared Living		1				1

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Lack of provider at referral (other than integrated residential)	Sponsored Residential	1			1		2
No integrated residential provider operating in desired area	Total	1					1
No integrated residential provider operating in desired area	Group Home Residential (4 or fewer)	1					1
Provider available, but access delayed	Total	1	3				4
Provider available, but access delayed	AD Personal Assistance Services		1				1
Provider available, but access delayed	CD Respite	1					1
Provider available, but access delayed	In-Home Support Services		1				1
Provider available, but access delayed	Supported Living		1				1
Provider/setting match	Total	3			1	1	5
Provider/setting match	CD Personal Assistance Services				1		1
Provider/setting match	Group Home Residential (4 or fewer)	1					1
Provider/setting match	Sponsored Residential	2					2
Provider/setting match	Therapeutic Consultation					1	1
Total		13	6	6	7	5	37

Fig. 19

The RST referral form specifically asks all submitters to report concerns with transportation. For Q3 FY24, nine of 135 referrals reported concerns, which was 6.67% of all referrals. (Fig. 20)

	2024 Q3					
•	# of RSTs % of RSTs					
No	126	93.33%				
Yes	9	6.67%				
Total	135	100.00%				



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 59 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.

SFY Quarter RST Requested Date	2024 Q3			Total
CreatedReferringAgencyRegionDescription	Closed	Pending Submitter Closure	Total	
Region I	17	7	24	24
Region II	12	11	23	23
Region III	16	7	23	23
Region IV	14	24	38	38
Region V	16	11	27	27
Total	75	60	135	135

Fig. 21

ReferringAgency	SFY Quarter	RST Workflow Status	# of RSTs
ALEXANDRIA COMMUNITY SERV BD	2024 Q4	Pending Submitter Closure	1
ARLINGTON MENTAL HEALTH	2023 Q4	Pending Submitter Closure	3
ARLINGTON MENTAL HEALTH	2024 Q2	Pending Submitter Closure	1
ARLINGTON MENTAL HEALTH	2024 Q4	Pending Submitter Closure	1
BLUE RIDGE CSB	2023 Q3	Pending Submitter Closure	1
BLUE RIDGE CSB	2023 Q4	Pending Submitter Closure	1
BLUE RIDGE CSB	2024 Q1	Pending Submitter Closure	1
BLUE RIDGE CSB	2024 Q3	Pending Submitter Closure	2
BLUE RIDGE CSB	2024 Q4	Pending Submitter Closure	2
CHESAPEAKE INTERGRATED BEHAV HEALTHCARE	2023 Q4	Pending Submitter Closure	1
CHESAPEAKE INTERGRATED BEHAV HEALTHCARE	2024 Q2	Pending Submitter Closure	2
CHESAPEAKE INTERGRATED BEHAV HEALTHCARE	2024 Q3	Pending Submitter Closure	2
CHESAPEAKE INTERGRATED BEHAV HEALTHCARE	2024 Q4	Pending Submitter Closure	1
CHESTERFIELD CSB	2023 Q3	Pending Submitter Closure	4
CHESTERFIELD CSB	2023 Q4	Pending Submitter Closure	8
CHESTERFIELD CSB	2024 Q1	Pending Submitter Closure	2
CHESTERFIELD CSB	2024 Q2	Pending Submitter Closure	1
CHESTERFIELD CSB	2024 Q3	Pending Submitter Closure	14
CITY OF VA BEACH CSB MHMRSAS	2023 Q3	Pending Submitter Closure	2
CITY OF VA BEACH CSB MHMRSAS	2023 Q3 2023 Q4	Pending Submitter Closure	1
CITY OF VA BEACH CSB MHMRSAS	2023 Q4 2024 Q3	Pending Submitter Closure	3
COLONIAL BEHAVIORAL HEALTH	2024 Q1	Pending Submitter Closure	1
CROSSROADS CSB	2024 Q1 2023 Q3	Pending Submitter Closure	6
CROSSROADS CSB	2023 Q3 2023 Q4	Pending Submitter Closure	1
CUMBERLAND MNTL HLTH CTR	2023 Q4 2023 Q3	Pending Submitter Closure	1
CUMBERLAND MNTL HLTH CTR	2023 Q3 2023 Q4	Pending Submitter Closure	5
CUMBERLAND MNTL HLTH CTR	2024 Q3	Pending Submitter Closure	1
DANVILLE-PITTSYLVANIA COM SERV	2024 Q1	Pending Submitter Closure	1
DANVILLE-PITTSYLVANIA COM SERV	2024 Q3	Pending Submitter Closure	1
DBHDS	2024 Q2	Pending Submitter Closure	2
DBHDS	2024 Q2 2023 Q3	Pending Submitter Closure	3
DBHDS	2023 Q3 2023 Q4	Pending Submitter Closure	1
DBHDS	2023 Q4 2024 Q1	Pending Submitter Closure	3
DBHDS	2024 Q1 2024 Q2	Pending Submitter Closure	4
DBHDS	2024 Q2 2024 Q3	Pending Submitter Closure	5
DBHDS on Behalf of HDMC & Highlands CSB	2024 Q3 2024 Q3	Pending Submitter Closure	1
DBHDS on behalf of REACH	2024 Q3 2024 Q1	Pending Submitter Closure	1
DISTRICT 19 MEN HLTH SER	2024 Q1 2023 Q3	Pending Submitter Closure	
DISTRICT 19 MEN HLTH SER	2023 Q3 2023 Q4	Pending Submitter Closure	2
DISTRICT 19 MEN HLTH SER	2023 Q4 2024 Q4	Pending Submitter Closure	
Eastern Shore CSB		_	1
Eastern Shore CSB	2023 Q2 2024 Q4	Pending Submitter Closure Pending Submitter Closure	1
		_	2
Encompass Community Supports (Formerly RAPPAHAI		Pending Submitter Closure Pending Submitter Closure	2
FAIRFAX-FALLS CHURCH CSB	2024 Q3		8
FAIRFAX-FALLS CHURCH CSB	2024 Q4	Pending Submitter Closure	4

GOOCHLAND POWHATAN MENTAL HLTH	2023 Q3	Pending Submitter Closure	3
GOOCHLAND POWHATAN MENTAL HLTH	2024 Q3	Pending Submitter Closure	1
HANOVER COUNTY COMMUNITY SERVICES	2023 Q3	Pending Submitter Closure	1
HANOVER COUNTY COMMUNITY SERVICES	2024 Q3	Pending Submitter Closure	3
HANOVER COUNTY COMMUNITY SERVICES	2024 Q4	Pending Submitter Closure	1
HARRISONBURG-ROCKINGHAM CSB	2024 Q1	Pending Submitter Closure	1
HARRISONBURG-ROCKINGHAM CSB	2024 Q3	Pending Submitter Closure	1
HENRICO AREA MENTAL HLTH & DEVLPMNTL SVC	2023 Q4	Pending Submitter Closure	6
HENRICO AREA MENTAL HLTH & DEVLPMNTL SVC	2024 Q2	Pending Submitter Closure	2
HENRICO AREA MENTAL HLTH & DEVLPMNTL SVC	2024 Q3	Pending Submitter Closure	5
HIGHLANDS CMNTY SVCS BOARD	2023 Q3	Pending Submitter Closure	1
HORIZON BEHAVIORAL HEALTH	2024 Q2	Pending Submitter Closure	3
LOUDOUN COUNTY CSB	2023 Q2	Pending Submitter Closure	1
LOUDOUN COUNTY CSB	2024 Q1	Pending Submitter Closure	2
LOUDOUN COUNTY CSB	2024 Q3	Pending Submitter Closure	3
LOUDOUN COUNTY CSB	2024 Q4	Pending Submitter Closure	3
MIDDLE PENINSULA NORTHERN NECK CSB	2023 Q4	Pending Submitter Closure	1
MOUNT ROGERS CSB	2023 Q3	Pending Submitter Closure	1
MOUNT ROGERS CSB	2024 Q3	Pending Submitter Closure	1
NEW RIVER VALLEY COMMUNITY SERVICES	2023 Q4	Pending Submitter Closure	1
NEW RIVER VALLEY COMMUNITY SERVICES	2024 Q2	Pending Submitter Closure	1
NEW RIVER VALLEY COMMUNITY SERVICES	2024 Q4	Pending Submitter Closure	1
NORFOLK COMMUNITY SERVICES BOARD	2023 Q3	Pending Submitter Closure	1
NORFOLK COMMUNITY SERVICES BOARD	2024 Q1	Pending Submitter Closure	2
NORFOLK COMMUNITY SERVICES BOARD	2024 Q4	Pending Submitter Closure	1
NORTHWESTERN COMMUNITY SVCS	2023 Q4	Pending Submitter Closure	2
NORTHWESTERN COMMUNITY SVCS	2024 Q2	Pending Submitter Closure	2
PIEDMONT COMMUNITY SERVICES	2023 Q4	Pending Submitter Closure	4
PIEDMONT COMMUNITY SERVICES	2024 Q1	Pending Submitter Closure	1
PIEDMONT COMMUNITY SERVICES	2024 Q2	Pending Submitter Closure	2
PIEDMONT COMMUNITY SERVICES	2024 Q3	Pending Submitter Closure	1
Piedmont CSB	2023 Q4	Pending Submitter Closure	1
PLANNING DISTRICT ONE CSB	2024 Q1	Pending Submitter Closure	1
PORTSMOUTH DEPT OF BEHAVIORAL	2023 Q3	Pending Submitter Closure	2
PORTSMOUTH DEPT OF BEHAVIORAL	2023 Q4	Pending Submitter Closure	1
PORTSMOUTH DEPT OF BEHAVIORAL	2024 Q1	Pending Submitter Closure	1
PORTSMOUTH DEPT OF BEHAVIORAL	2024 Q3	Pending Submitter Closure	1
PRINCE WILLIAM COUNTY CSB	2024 Q4	Pending Submitter Closure	1
RAPPAHANNOCK AREA COMMUNITY SERVICES BRD	2023 Q2	Pending Submitter Closure	1
RAPPAHANNOCK AREA COMMUNITY SERVICES BRD	2023 Q3	Pending Submitter Closure	1
RAPPAHANNOCK AREA COMMUNITY SERVICES BRD	2023 Q4	Pending Submitter Closure	1
RAPPAHANNOCK AREA COMMUNITY SERVICES BRD	2024 Q1	Pending Submitter Closure	2
RAPPAHANNOCK AREA COMMUNITY SERVICES BRD	2024 Q2	Pending Submitter Closure	1
RAPPAHANNOCK AREA COMMUNITY SERVICES BRD	2024 Q3	Pending Submitter Closure	5
RAPPAHANNOCK AREA COMMUNITY SERVICES BRD	2024 Q4	Pending Submitter Closure	4
RAPPAHANNOCK AREA COMMUNITY SERVICES BRD	2024 Q3	Pending Submitter Closure	1

Regional Support Teams – FY24 Q3

REGION TEN CMMNTY SVCS BRD	2024 Q1	Pending Submitter Closure	1
REGION TEN CMMNTY SVCS BRD	2024 Q3	Pending Submitter Closure	1
RICHMOND BHVRL HLTH AUTHORITY	2023 Q2	Pending Submitter Closure	1
RICHMOND BHVRL HLTH AUTHORITY	2023 Q4	Pending Submitter Closure	2
RICHMOND BHVRL HLTH AUTHORITY	2024 Q1	Pending Submitter Closure	1
VALLEY CSB	2023 Q3	Pending Submitter Closure	1
WESTERN TIDEWATER COMMUNITY SERVICES BOA	2023 Q3	Pending Submitter Closure	1
WESTERN TIDEWATER COMMUNITY SERVICES BOA	2023 Q4	Pending Submitter Closure	1
			203

Fig. 22

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 SFY/FY – State Fiscal Year	Pending - Pended - RST made recommendations and awaiting final disposition. Q – Quarter
WaMS – Waiver Management System I/DD – Intellectual/Developmental Disability	R – Region RST(s) - Regional Support Team(s)
ICF – Intermediate Care Facility LG – Legal Guardian	SA - Settlement Agreement TC(s) - Training Center(s)