

Regional Support Teams

State Fiscal Year 2023, 4th 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 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 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:

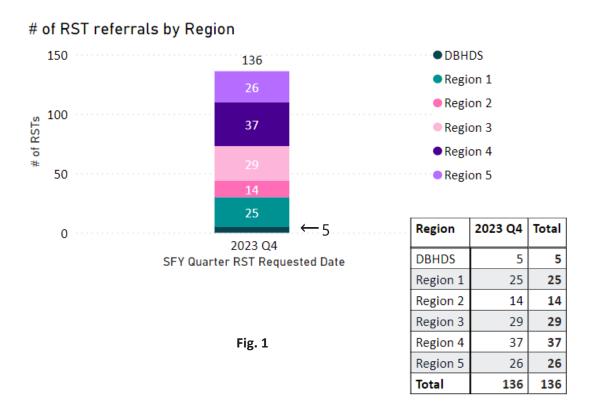
- Barrier selection was initially included as an open text box, which required reformatting to a barrier listing with radio buttons so that barrier data can be pulled from the system.
- Tool tips were missing from the system for each of the barrier reasons, which were included to provide guidance to 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 approved for the VIC to ensure that the first and last name of the selected Support Coordinator is captured in the form.

In the 4th quarter FY23, no referrals were accepted outside of the WaMS system.

RST Referral Data

There was a total of 136 referrals made with a RST requested date occurring in Q4 FY23 with the largest number seen in region 4 (37) and the lowest in region 2 (14) (Fig. 1).



When considering the number of unique individuals, the 136 referrals are attributed to 135 unique individuals. Of those actively enrolled in a DD Waiver, 114 receive Community Living waiver and one had the Family and Individual Supports waiver, and one had Building Independence waiver (Fig 2). Twelve individuals did not have a DD Waiver or were not on the wait list. There were seven people on the DD Waitlist: four on Priority 1, three on Priority 2, and none on Priority 3 (Fig. 3).

of Individuals Actively Enrolled on a Waiver by Type

Waiver Type # of individuals* % of Total

Building Independence 1 0.7%

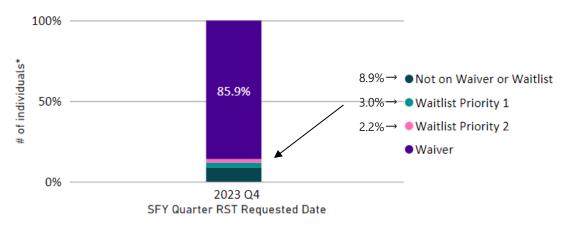
Community Living 114 98.6%

Family and Individual Supports 1 0.7%

Total 116 100.0%

Fig. 2

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



	202	3 Q4
Waiver Status Collapsed	# of Individuals	% of Individuals
Waiver	116	85.9%
Not on Waiver or Waitlist	12	8.9%
Waitlist Priority 1	4	3.0%
Waitlist Priority 2	3	2.2%
Total	135	100.0%

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

133 referrals were submitted were from individuals living in the community while three were submitted for individuals residing in the training center setting. Based on a review of data submitted, it was determined that the three referrals attributed to training centers were coded incorrectly by submitters. Following this review, it was determined that there were no training center referrals and all 136 referrals received during Q4 are attributable to the community (Fig. 4).

of RST Identified as Community Referrals and Reason

SFY Quarter	2023 Q4	
Community Referral	# of RSTs	% of RSTs
No	0	0.0%
Yes	136	100.0%
Total	136	100.0%

Fig. 4

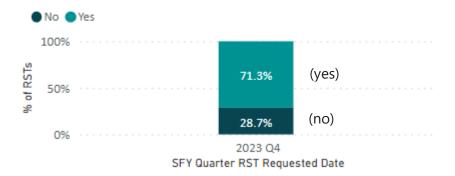
The three community referrals that were submitted as training center referrals were reviewed to determine the correct community referral reason with two considering a move to a nursing facility or ICF and one considering a group home of five or more beds. These three reasons have been added to the 133 community referral reasons, which brings the total number of community referrals to 136 (Fig. 5).

SFY Quarter RST Requested Date	2023 Q4
Community referral reason	Count of RST referrals 🔻
At REACH without disposition	5
Difficulty finding resources in the community within any timeframe	4
Difficulty finding services in the community within 3 months of receiving a slot	2
Moving to a group home of five or more individuals	87
Moving to a nursing home or ICF	33
Pattern of repeatedly being removed from the home	5
Total	136

Fig. 5

Of the 136 referrals submitted, 97 (71.3%) were related to a need for residential services. (Fig. 6)

% of RST identified as Residential Services



	2023 Q4		Total	
•	# of RSTs	% of RSTs	# of RSTs	% of RSTs
No	39	28.7%	39	28.7%
Yes	97	71.3%	97	71.3%
Total	136	100.0%	136	100.0%

Fig. 6

Considering the source of community referrals, the largest number (18) were submitted by Chesterfield CSB. Four CSBs submitted only one referral. (Fig. 7)

SFY Quarter RST Requested Date

2023 Q4

Submitter	# of RSTs	% of RSTs
ALLEGHANY HIGHLANDS CSB	2	1.5%
ARLINGTON MENTAL HEALTH	4	2.9%
BLUE RIDGE CSB	4	2.9%
CHESAPEAKE INTERGRATED BEHAV HEALTHO	2	1.5%
CHESTERFIELD CSB	18	13.2%
CITY OF VA BEACH CSB MHMRSAS	5	3.7%
COLONIAL BEHAVIORAL HEALTH	3	2.2%
CROSSROADS CSB	2	1.5%
CUMBERLAND MNTL HLTH CTR	6	4.4%
DBHDS*	5	3.7%
DISTRICT 19 MEN HLTH SER	2	1.5%
FAIRFAX-FALLS CHURCH CSB	5	3.7%
HAMPTON-NN CSB	11	8.1%
HANOVER COUNTY COMMUNITY SERVICES	2	1.5%
HARRISONBURG-ROCKINGHAM CSB	2	1.5%
HENRICO AREA MENTAL HLTH & DEVLPMNT	9	6.6%
HORIZON BEHAVIORAL HEALTH	3	2.2%
LOUDOUN COUNTY CSB	2	1.5%
MIDDLE PENINSULA NORTHERN NECK CSB	3	2.2%
MOUNT ROGERS CSB	3	2.2%
NEW RIVER VALLEY COMMUNITY SERVICES	7	5.1%
NORTHWESTERN COMMUNITY SVCS	6	4.4%
PIEDMONT COMMUNITY SERVICES	5	3.7%
Piedmont CSB	1	0.7%
PLANNING DISTRICT ONE CSB	1	0.7%
PORTSMOUTH DEPT OF BEHAVIORAL	1	0.7%
PRINCE WILLIAM COUNTY CSB	3	2.2%
RAPPAHANNOCK AREA COMMUNITY SERVIC	3	2.2%
REGION TEN CMMNTY SVCS BRD	7	5.1%
RICHMOND BHVRL HLTH AUTHORITY	4	2.9%
ROCKBRIDGE AREA COMMUNITY SVS BOARD	2	1.5%
SOUTHSIDE CSB	2	1.5%
WESTERN TIDEWATER COMMUNITY SERVICE	1	0.7%
Total	136	100.0%

^{*} Five referrals were submitted by DBHDS

The RST referral collects the desired region where an individual prefers to live and access services. 37 referrals indicated that the person wanted to receive services in Region 4 (27.2%). Only twelve percent of referrals reflected a desire to receive services in Region 2 (16). (Fig 8)

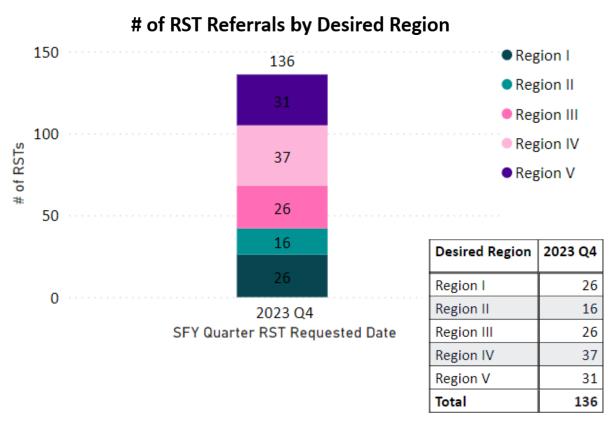


Fig. 8

of Emergency Referrals by CSB and Reason

No emergency referrals occurred or were confirmed by Community Resource Consultants as emergencies in Q4. (Fig. 9)

Does CRC Recommend Emergency Meeting	2023 Q4	Total
No	136	136
Total	136	136

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 Q4, data was pulled from RST confirmations for 98 referrals, and supplemented with CSB-asserted reasons for 38 referrals. (Fig. 10)

Row Labels 🔻 Su	m 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. Total Referrals Missed in CSB Reporting
DBHDS	0	<u> </u>	5		
Region 1	17	2	5	1	5
Region 2	13		1		1
Region 2 Region 3	13 15	1	1 12	1	1
•		1 3	1 12 10	1 2	6
Region 3	15	1 3 4		1 2	6 3

Fig. 10

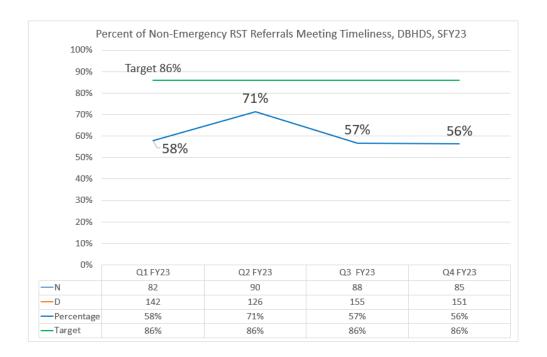
A "Late Referral" is defined as a referral where:

- 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 15 additional referrals were needed but were not submitted. CSBs receive compliance results reflecting actual

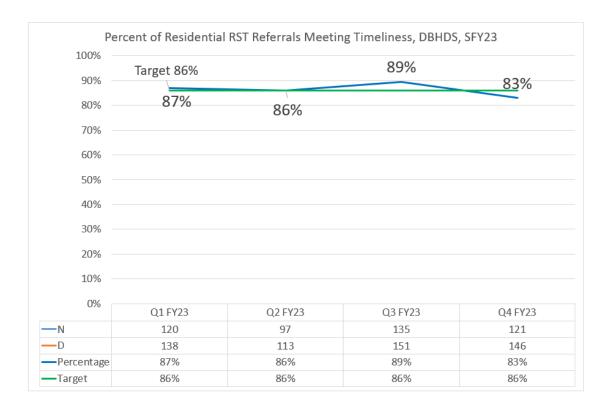
counts and the names of individuals missed, so that choice can be provided and documented for each person. There are two indicators related to the timeliness of RST referrals. Results for the 4th Quarter FY23 are provided below:

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, 131 CSB-submitted referrals, 5 DBHDS-submitted community referrals, 0 accepted outside of WaMS, and 15 missed community referrals. A total of 151 referrals were submitted or missed in Q4. For this reporting period, the result is 56.3% (56% rounded, 85/151) 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 131 CSB-submitted community referrals in WaMS, 0 accepted outside of WaMS, and 15 missed CSB community referrals. A total of 146 referrals were submitted or missed by CSBs in Q4. 15 were not provided and another 10 were reported as late for reason A for a total of 25 late referrals related to CSB accountability (17.1% late). For this reporting period, the result is 82.9% (83% rounded, 121/146) timely, which does not meet the target of 86%.



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 Q4 met 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?)

	2023	Total	
Region	No	Total	
Region I	25	25	25
Region II	14	14	14
Region III	29	29	29
Region IV	38	38	38
Region V	30	30	30
Total	136	136	136

Table 1

Referral Submissions by Source for Q4 FY23

No Late Criteria Apply (Fig.11)

DBHDS	DBHDS	0
	ALLEGHANY HIGHLANDS CSB	2
Region 1 Region 1	HARRISONBURG-ROCKINGHAM CSB	2
_		
Region 1	HORIZON BEHAVIORAL HEALTH	3
Region 1	NORTHWESTERN COMMUNITY SVCS	
Region 1	RAPPAHANNOCK AREA COMMUNITY SERVICES BRD	1
Region 1	RAPPAHANNOCK RAPIDAN	0
Region 1	REGION TEN CMMNTY SVCS BRD	7
Region 1	ROCKBRIDGE AREA COMMUNITY SVS BOARD	1
Region 1	VALLEY CSB	0
Region 2	ALEXANDRIA CSB	0
Region 2	ARLINGTON MENTAL HEALTH	3
Region 2	FAIRFAX-FALLS CHURCH CSB	5
Region 2	LOUDOUN COUNTY CSB	2
Region 2	PRINCE WILLIAM COUNTY CSB	3
Region 3	BLUE RIDGE CSB	0
Region 3	CUMBERLAND MNTL HLTH CTR	1
Region 3	DANVILLE-PITTSYLVANIA CSB	0
Region 3	DICKENSON CSB	0
Region 3	HIGHLANDS CSB	0
Region 3	MOUNT ROGERS CSB	1
Region 3	NEW RIVER VALLEY COMMUNITY SERVICES	7
Region 3	PIEDMONT COMMUNITY SERVICES	3
Region 3	PLANNING DISTRICT ONE CSB	1
Region 3	SOUTHSIDE CSB	2
Region 4	CHESTERFIELD CSB	9
Region 4	CROSSROADS CSB	2
Region 4	DISTRICT 19 MEN HLTH SER	1
Region 4	GOOCHLAND POWHATAN MENTAL HLTH	0
Region 4	HANOVER COUNTY COMMUNITY SERVICES	2
Region 4	HENRICO AREA MENTAL HLTH & DEVLPMNTL SVC	6
Region 4	RICHMOND BHVRL HLTH AUTHORITY	2
Region 5	CHESAPEAKE INTERGRATED BEHAV HEALTHCARE	2
Region 5	CITY OF VA BEACH CSB MHMRSAS	3
Region 5	COLONIAL BEHAVIORAL HEALTH	3
Region 5	EASTERN SHORE CSB	0
Region 5	HAMPTON-NN CSB	9
Region 5	MIDDLE PENINSULA NORTHERN NECK CSB	1
Region 5	NORFOLK CSB	0
Region 5	PORTSMOUTH DEPT OF BEHAVIORAL	0
Region 5	WESTERN TIDEWATER COMMUNITY SERVICES BOA	0
Total		85

Fig. 11

Late referrals for Reasons A, B and C for Q4 FY23 (Fig. 12)

	Lower numbers improve CSB e and statewide performance.		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
Submitter	ReferringAgency	▼	T.
Region 1	HORIZON BEHAVIORAL HEALT	TH .	1
Region 1	RAPPAHANNOCK AREA COMM	MUNITY SERVICES BRD	1
Region 3	PIEDMONT COMMUNITY SER	VICES	1
Region 4	CHESTERFIELD CSB		2
Region 4	HENRICO AREA MENTAL HLTF	1 & DEVLPMNTL SVC	1
Region 5	HAMPTON-NN CSB		1
Region 5	MIDDLE PENINSULA NORTHE	RN NECK CSB	2
Region 5	WESTERN TIDEWATER COMM	IUNITY SERVICES BOA	1
Total			10

	3: Lower numbers improve tewide performance	3. Reason B: Individual has or will move without sufficient time to implement RST Recommendation(s)
Submitter	▼ ReferringAgency	▼
DBHDS	DBHDS	5
Region 1	HORIZON BEHAVIORAL HEALTH	1
Region 1	NORTHWESTERN COMMUNITY SVCS	2
Region 1	RAPPAHANNOCK AREA COMMUNITY SERVICES BRD	1
Region 1	ROCKBRIDGE AREA COMMUNITY SVS BOARD	1
Region 2	ARLINGTON MENTAL HEALTH	1
Region 3	BLUE RIDGE CSB	3
Region 3	CUMBERLAND MNTL HLTH CTR	5
Region 3	MOUNT ROGERS CSB	2
Region 3	PIEDMONT COMMUNITY SERVICES	2
Region 4	CHESTERFIELD CSB	7
Region 4	DISTRICT 19 MEN HLTH SER	1
Region 4	RICHMOND BHVRL HLTH AUTHORITY	2
Region 5	CITY OF VA BEACH CSB MHMRSAS	2
Region 5	HAMPTON-NN CSB	1
Region 5	PORTSMOUTH DEPT OF BEHAVIORAL	1
Total		37

Reason C: Lower numbers improve statewide performance.			4. Reason C: Individual moved without CSB notificatio	n
Submitter	ReferringAgency	<u>-</u>		J
Region 1	NORTHWESTERN CO	MMUNITY SVCS	1	
Region 3	BLUE RIDGE CSB		1	
Region 4	HENRICO AREA MEN	TAL HLTH & DEVLPMNTL SVC	2	
Total			4	

Fig. 12

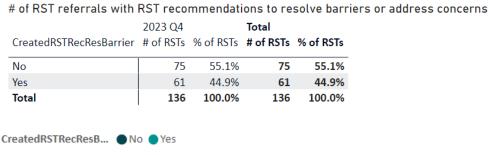
Missed Referrals (Fig. 13)

Missed Referrals: Lower numbers improve CSB compliance and statewide performance.		6. Total Referrals Missed in CSB Reporting
Submitter	▼ ReferringAgency	T.
Region 1	HARRISONBURG-ROCKINGHAM CSB	1
Region 1	REGION TEN CMMNTY SVCS BRD	4
Region 2	PRINCE WILLIAM COUNTY CSB	1
Region 4	CHESTERFIELD CSB	4
Region 4	DISTRICT 19 MEN HLTH SER	2
Region 5	CHESAPEAKE INTERGRATED BEHAV HEALTHCARE	1
Region 5	CITY OF VA BEACH CSB MHMRSAS	1
Region 5	NORFOLK CSB	1
Total		15

Fig. 13

RST Recommendations

Of the 136 referrals submitted through WaMS, 61 (44.9%) of referrals included recommendations from RSTs (Fig. 14). Further, of the 136 referrals, 75 (55.1%) were not considering more integrated services. (Fig. 15)



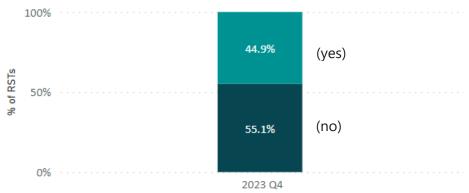


Fig. 14

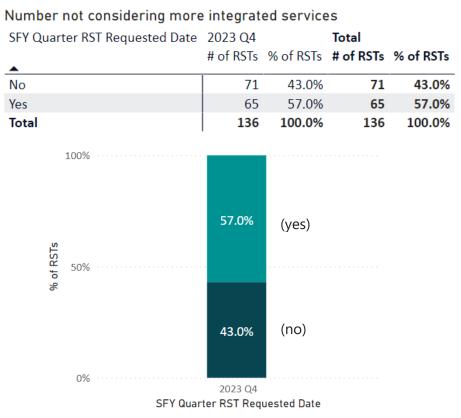
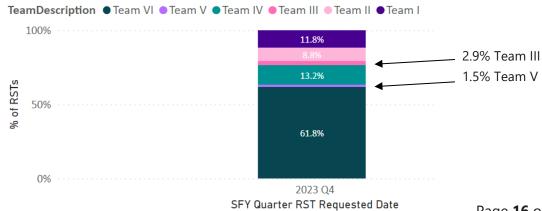


Fig. 15

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 made and acted on. In the 4th quarter of FY23, 61.8% of the referrals were processed through Team VI. (Fig.16)



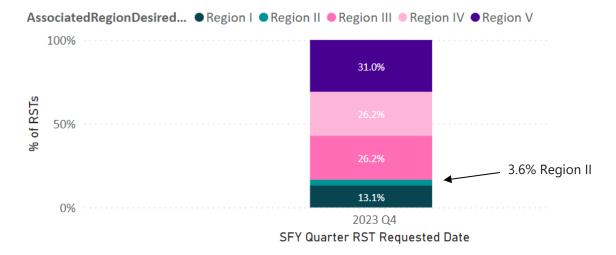
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SFY Quarter RST Requested Date	2023 Q4		Total	
TeamDescription ▲	# of RSTs	% of RSTs	# of RSTs	% of RSTs
Team I	16	11.8%	16	11.8%
Team II	12	8.8%	12	8.8%
Team III	4	2.9%	4	2.9%
Team IV	18	13.2%	18	13.2%
Team V	2	1.5%	2	1.5%
Team VI	84	61.8%	84	61.8%
Total	136	100.0%	136	100.0%

Fig. 16

Distribution of referrals reviewed by Team VI

As seen below, most referrals reviewed by Team VI are attributed to Regions III, IV and V at 26.2%, 26.2% and 31% respectively. (Fig. 17)



SFY Quarter RST Requested Date	2023 Q4		Total	
As sociated Region Desired Description	# of RSTs	% of RSTs	# of RSTs	% of RSTs
Region I	11	13.1%	11	13.1%
Region II	3	3.6%	3	3.6%
Region III	22	26.2%	22	26.2%
Region IV	22	26.2%	22	26.2%
Region V	26	31.0%	26	31.0%
Total	84	100.0%	84	100.0%

Fig. 17

Barriers

Data in the 4th quarter FY23 reflects all barriers identified across regions and services. Barrier data reflects all barriers identified based on seeking services in the desired region.

Barriers by Region and Service

The largest number of barriers were identified in Region 4. No barriers were reported in Region 5 on Q4. (Fig.18)

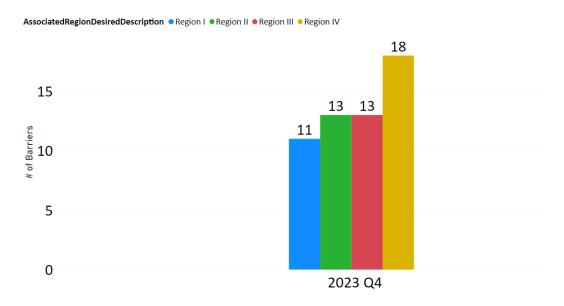


Fig. 18

In the transition to WaMS, barrier labels were streamlined to common themes and the primary barrier became required for each more integrated service considered. This transition is expected to result in more manageable and meaningful barrier data for analysis and trending over time. Barrier data assists with a statewide gap analysis conducted semi-annually. The largest number of barriers were encountered in Region 4, which accounted for 18 of the 55 barriers identified. Twenty-seven referrals or 49% of the total number were related to individual and SDM choice. Barriers and the related services and regions shown below. (Fig. 19).

		SFY 23	Region	Region	Region	Region	
Barrier to Service	Considered Service Option	Quarter 4	ı	II	III	IV	Total
Individual/SDM Choice	Total		6	9	6	6	27
·	Group Home Residential (4 or fewer)	Total	3	3	2	4	12
	Group Home Residential (4 or fewer)		3	3	2	4	12
	Independent Living Supports	Total		1			1
	Independent Living Supports			1			1
	In-Home Support Services	Total		2			2
	In-Home Support Services			2			2
	Shared Living	Total		1			1
	Shared Living			1			1
	Skilled Nursing	Total			1		1
	Skilled Nursing				1		1
	Sponsored Residential	Total	3	1	3	1	8
	Sponsored Residential		3	1	3	1	8
	Supported Living	Total		1			1
	Supported Living			1			1
	Therapeutic Consultation	Total				1	1
	Therapeutic Consultation					1	1
Lack of behavioral expertise	Total		3			1	4
·	Group Home Residential (4 or fewer)	Total	2			1	3
	Group Home Residential (4 or fewer)		2			1	3
	Sponsored Residential	Total	1				1
	Sponsored Residential		1				1
Lack of medical expertise	Total				2	2	4
·	Group Home Residential (4 or fewer)	Total			1	2	3
	Group Home Residential (4 or fewer)				1	2	3
	Sponsored Residential	Total			1		1
	Sponsored Residential				1		1
Lack of mental health	Total			1			1
	Group Home Residential (4 or fewer)	Total		1			1
	Group Home Residential (4 or fewer)			1			1
Lack of provider at referral	Total						
(other than integrated				1	3	3	7
residential)							
-	CD Personal Assistance Services	Total			1		1
	CD Personal Assistance Services				1		1
	Group Home Residential (4 or fewer)	Total				1	1
	Group Home Residential (4 or fewer)					1	1
	Independent Living Supports	Total				1	1
	Independent Living Supports					1	1
	In-Home Support Services	Total			1		1
	In-Home Support Services				1		1
	Sponsored Residential	Total		1	1	1	3
	Sponsored Residential			1	1	1	3
No integrated residential	Total						
provider operating in desired			1			1	2
area							
	Group Home Residential (4 or fewer)	Total	1				1
	Group Home Residential (4 or fewer)		1				1
	Sponsored Residential	Total				1	1
	Sponsored Residential					1	1
Provider available, but access	Total						
delayed						1	1
•	Sponsored Residential	Total				1	1
	Sponsored Residential					1	1
			1				

Provider/setting match	Total		1	2	2	4	9
	Crisis Support Services	Total				1	1
	Crisis Support Services					1	1
	Group Home Residential (4 or fewer)	Total		2	1	2	5
	Group Home Residential (4 or fewer)			2	1	2	5
	Sponsored Residential	Total			1	1	2
	Sponsored Residential				1	1	2
	Supported Living	Total	1				1
	Supported Living		1				1
Total			11	13	13	18	55

Fig. 19

The RST referral form specifically asks all submitters to report concerns with transportation. For Q4 FY23, five of 136 referrals reported concerns, which was 3.7% of all referrals. (Fig. 20)

SFY Quarter RST Requested Date 2023 Q4

	# of RSTs	% of RSTs
•		
No	131	96.3%
Yes	5	3.7%
Total	136	100.0%

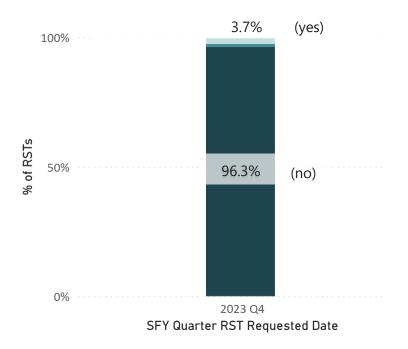


Fig. 20

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 73 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		2023 Q4		Total
ReferringAgencyRegionDescription ▼	Closed	Pending Submitter Closure	Total	
Region V	21	9	30	30
Region IV	10	28	38	38
Region III	14	15	29	29
Region II	5	9	14	14
Region I	13	12	25	25
Total	63	73	136	136

Fig. 21

RST Workflow Status by Submitter (Fig. 25)

Region	Referring Agency	SFY Quarter	RST Workflow Status	# of RSTs
Region I	ALLEGHANY HIGHLANDS CSB	2023 Q4	Closed	2
Region I	HARRISONBURG-ROCKINGHAM CSB	2023 Q4	Closed	2
Region I	HORIZON BEHAVIORAL HEALTH	2023 Q4	Closed	2
Region I	NORTHWESTERN COMMUNITY SVCS	2023 Q4	Closed	4
Region I	REGION TEN CMMNTY SVCS BRD	2023 Q4	Closed	1
Region I	ROCKBRIDGE AREA COMMUNITY SVS	2023 Q4	Closed	2
Region I	HORIZON BEHAVIORAL HEALTH	2023 Q4	Pending Submitter Closure	1
Region I	NORTHWESTERN COMMUNITY SVCS	2023 Q4	Pending Submitter Closure	2
Region I	RAPPAHANNOCK AREA COMMUNITY	2023 Q4	Pending Submitter Closure	3
Region I	REGION TEN CMMNTY SVCS BRD	2023 Q4	Pending Submitter Closure	6

Region	Referring Agency	SFY Quarter	RST Workflow Status	# of RSTs
Region II	ARLINGTON MENTAL HEALTH	2023 Q4	Closed	1
Region II	FAIRFAX-FALLS CHURCH CSB	2023 Q4	Closed	1
Region II	LOUDOUN COUNTY CSB	2023 Q4	Closed	2
Region II	PRINCE WILLIAM COUNTY CSB	2023 Q4	Closed	1
Region II	ARLINGTON MENTAL HEALTH	2023 Q4	Pending Submitter Closure	3
Region II	FAIRFAX-FALLS CHURCH CSB	2023 Q4	Pending Submitter Closure	4
Region II	PRINCE WILLIAM COUNTY CSB	2023 Q4	Pending Submitter Closure	2

Region	Referring Agency	SFY Quarter	RST Workflow Status	# of RSTs
Region III	BLUE RIDGE CSB	2023 Q4	Closed	2
Region III	CUMBERLAND MNTL HLTH CTR	2023 Q4	Closed	1
Region III	MOUNT ROGERS CSB	2023 Q4	Closed	1
Region III	NEW RIVER VALLEY COMMUNITY SEF	2023 Q4	Closed	6
Region III	PIEDMONT COMMUNITY SERVICES	2023 Q4	Closed	1
Region III	PLANNING DISTRICT ONE CSB	2023 Q4	Closed	1
Region III	SOUTHSIDE CSB	2023 Q4	Closed	2
Region III	BLUE RIDGE CSB	2023 Q4	Pending Submitter Closure	2
Region III	CUMBERLAND MNTL HLTH CTR	2023 Q4	Pending Submitter Closure	5
Region III	MOUNT ROGERS CSB	2023 Q4	Pending Submitter Closure	2
Region III	NEW RIVER VALLEY COMMUNITY SEF	2023 Q4	Pending Submitter Closure	1
Region III	PIEDMONT COMMUNITY SERVICES	2023 Q4	Pending Submitter Closure	4
Region III	Piedmont CSB	2023 Q4	Pending Submitter Closure	1

Referring Agency	SFY Quarter	RST Workflow Status	# of RSTs
CHESTERFIELD CSB	2023 Q4	Closed	2
COLONIAL BEHAVIORAL HEALTH	2023 Q4	Closed	1
CROSSROADS CSB	2023 Q4	Closed	1
HANOVER COUNTY COMMUNITY SEF	2023 Q4	Closed	2
HENRICO AREA MENTAL HLTH & DEV	2023 Q4	Closed	2
RICHMOND BHVRL HLTH AUTHORITY	2023 Q4	Closed	2
CHESTERFIELD CSB	2023 Q4	Pending Submitter Closure	16
CROSSROADS CSB	2023 Q4	Pending Submitter Closure	1
DISTRICT 19 MEN HLTH SER	2023 Q4	Pending Submitter Closure	2
HENRICO AREA MENTAL HLTH & DEV	2023 Q4	Pending Submitter Closure	7
RICHMOND BHVRL HLTH AUTHORITY	2023 Q4	Pending Submitter Closure	2
	CHESTERFIELD CSB COLONIAL BEHAVIORAL HEALTH CROSSROADS CSB HANOVER COUNTY COMMUNITY SEF HENRICO AREA MENTAL HLTH & DEV RICHMOND BHVRL HLTH AUTHORITY CHESTERFIELD CSB CROSSROADS CSB DISTRICT 19 MEN HLTH SER HENRICO AREA MENTAL HLTH & DEV	CHESTERFIELD CSB COLONIAL BEHAVIORAL HEALTH CROSSROADS CSB HANOVER COUNTY COMMUNITY SEF HENRICO AREA MENTAL HLTH & DEV RICHMOND BHVRL HLTH AUTHORITY CHESTERFIELD CSB CROSSROADS CSB DISTRICT 19 MEN HLTH SER HENRICO AREA MENTAL HLTH & DEV 2023 Q4 DISTRICT 19 MEN HLTH SER HENRICO AREA MENTAL HLTH & DEV 2023 Q4 DOWN THE PROPERTY OF THE PR	CHESTERFIELD CSB COLONIAL BEHAVIORAL HEALTH CROSSROADS CSB HANOVER COUNTY COMMUNITY SEF HENRICO AREA MENTAL HLTH & DEV CHESTERFIELD CSB CROSSROADS CSB 2023 Q4 Closed Closed Closed Closed Closed Closed Closed Closed CHESTERFIELD CSB 2023 Q4 Closed CHESTERFIELD CSB 2023 Q4 Closed CHESTERFIELD CSB 2023 Q4 Pending Submitter Closure DISTRICT 19 MEN HLTH SER 2023 Q4 Pending Submitter Closure HENRICO AREA MENTAL HLTH & DEV 2023 Q4 Pending Submitter Closure

Continued

Region	Referring Agency	SFY Quarter	RST Workflow Status	# of RSTs
Region V	CITY OF VA BEACH CSB MHMRSAS	2023 Q4	Closed	4
Region V	COLONIAL BEHAVIORAL HEALTH	2023 Q4	Closed	1
Region V	DBHDS	2023 Q4	Closed	3
Region V	HAMPTON-NN CSB	2023 Q4	Closed	11
Region V	MIDDLE PENINSULA NORTHERN NEC	2023 Q4	Closed	2
Region V	CHESAPEAKE INTERGRATED BEHAV F	2023 Q4	Pending Submitter Closure	2
Region V	CITY OF VA BEACH CSB MHMRSAS	2023 Q4	Pending Submitter Closure	1
Region V	COLONIAL BEHAVIORAL HEALTH	2023 Q4	Pending Submitter Closure	1
Region V	DBHDS	2023 Q4	Pending Submitter Closure	2
Region V	MIDDLE PENINSULA NORTHERN NEC	2023 Q4	Pending Submitter Closure	1
Region V	PORTSMOUTH DEPT OF BEHAVIORAL	2023 Q4	Pending Submitter Closure	1
Region V	WESTERN TIDEWATER COMMUNITY	2023 Q4	Pending Submitter Closure	1

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	CSB(s) - Community Service Board(s)	
percentages		
Closed – RST made recommendations and final	Open - 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.	
DBHDS - Department of Behavioral Health and	Pending - Pended - RST made recommendations	
Developmental Services	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)	