

Regional Support Team Referral

Regional Support Team (RST) Referral Instructions

- For individuals enrolled or awarded a waiver slot, review and completion of the **Virginia Informed Choice (VIC)** is required prior to submission of an RST referral. The Support Coordinator/Case Manager/Training Center Designee completes the VIC and retains a signed copy of the document in the individual's file. **Virginia Informed Choice completed and submitting with RST Referral** — Checked box indicates VIC completed & submitted
- The Support Coordinator/Case Manager/Training Center Designee completes the Regional Support Team Referral.
- **Community Resource Consultant (CRC)/Community Integration Manager (CIM) consultation is required prior to an RST Referral submission.**
- Submit VIC (if required) and RST Referral to the secure RST mailbox: RST.Referrals@DBHDS.virginia.gov. — Indicates that this is the 2nd RST referral submitted for Sam

Date completed: 5/28/2019	Agency: Virginia CSB	Region of Agency: Central Region
First name: Sam	Last name: Smith	Suffix: Select one
Unique ID: 01234	Date of Birth: 11/2/72	# Of Referrals to RST: 2nd
Referring party: Sally Coordinator	Phone number: 804-555-5555	Contact email: sallyc@virginiacsb.com
Supervisor: Syd Supervisor	Phone number: 804-555-5559	Supervisor's email: syds@virginiacsb.com
Current Living Situation: Family home Other- please describe	City/County (of current residence): Henrico	Provider name: N/A

RST review requested in desired region: Central Region	City/County (of desired service location): Henrico, Chesterfield, Richmond, Williamsburg — Indicate all locations of preference
---	--

If services are unavailable in desired region, services are considered in following regions:	Eastern Region	Select region
--	----------------	---------------

Referral Criteria		
Request for an Emergency Meeting: In jeopardy of becoming homeless Reason for Late Referral: Select one	Community Required: Moving to a group home of five or more individuals	Training Center Required: Select one Completed by TC CIM for TC individuals ONLY
Move in date: Enter date Anticipated move in date: 6/24/2019	Other: Select one	If Other is selected, please describe: Description

Unavailable financial support limiting access to resource/s (Check all that apply) — Indicate financial barrier status

<input type="checkbox"/> Medicaid: Select one	<input type="checkbox"/> DD Waiver slot: Select one	<input type="checkbox"/> Customized rate: Select one
<input checked="" type="checkbox"/> Crisis funds: Application pending	<input type="checkbox"/> Housing: Select one	<input type="checkbox"/> Other-please describe

Barriers related to Waiver Service Options or Other in desired location (Please use key below to identify barriers)

1. Employment and Day Options	Select unavailable service	List multiple services and barrier #(s)
2. Self-Directed Options (may be Agency Directed)	Select unavailable service	List multiple services and barrier #(s)
3. Residential Options	For multiple services provide list	Sponsored Residential: 12 Own Home/Apt: 12
4. Crisis Support Options	Select unavailable service	List multiple services and barrier #(s)
5. Medical and Behavioral Support Options	Select unavailable service	List multiple services and barrier #(s)
6. Additional Options	Select unavailable service	List multiple services and barrier #(s)
7. Other	Description	List corresponding barrier number(s)

Barrier Key (Choose all barrier numbers that apply and place in the applicable list above)

1	Services not available under currently enrolled waiver
2	Services and activities unavailable in desired location
3	Community location is not adapted for physical access (not wheelchair accessible or ADA compliant)
4	Direct Support Staff- may not have experience or demonstrate competency to provide support with behavioral expertise
5	Direct Support Staff- may not have experience or demonstrate competency to provide support with mental health expertise
6	Direct Support Staff- may not have experience or demonstrate competency to provide support with medical expertise
7	Professional Behavioral staff- Psychiatric, PBS facilitator, Applied Behavioral Analyst, or other specialist unavailable
8	Professional Medical staff- Dental, nursing or any medical specialist unavailable
9	Accessible transportation unavailable
10	Individual/SDM/LG chooses less integrated option
11	Individual/Substitute Decision Maker (SDM)/Legal Guardian (LG) not interested in discussing/exploring options/refuses supports
12	Individual/SDM/LG does not choose provider after visit/still exploring community options
13	Frequent hospitalizations- medical and/or mental health hospitalizations
14	Delay in move and/or acceptance to a more integrated setting- due to unexpected or late medical interventions
15	Provider has determined placement is not a good match- provider is not willing/able to support individual
16	Service/Provider Development or Loss- Construction/Renovations/Environmental Modifications/Staffing/On-boarding/Licensing
17	Other (please list all other barriers below)

Provide any information you think may be helpful in the RST review process and/or other barriers not identified above. — Please provide a brief summary of the case as it pertains to the referral reason

Sam has been living with family since being discharged from Poplar Springs 2 weeks ago (Major Depressive Disorder, Borderline Personality Disorder, and Mild ID). This arrangement was temporary as his sister agreed to let him stay pending touring of waiver options. His sister is providing support with medication administration and Sam was connected with REACH supports prior to discharge and has had no issues. Sam was offered several residential options including sponsored placement, group home with 5 or more beds and his own apartment. Sam is his own guardian. He has chosen to reside in a 6 bed GH operated by Dedicated Homes and is scheduled to move on 6/24/19. His sister has stated that she would like him moved by 6/17/19 as she will be going on vacation and Sam is not allowed to stay at her home alone. SC is working diligently to find respite placement for 6/17/19-6/23/19 as the selected provider is not able to accept him prior to 6/24/19. Referred due to choice of less integrated option and impending homeless status. He has no significant medical or legal issues that require specialized supports.

CIM/CRC Consultation Recommendations

CRC consulted with SC on 5/28/19. Advised SC of potential respite providers and suggested touring to identify temporary placement. SC should see if new provider is able to come visit at the respite placement once chosen.