



Overview: TDO Transportation Delays

Workgroup of Joint Subcommittee to Study Mental Health
Services in the 21st Century

May 4, 2021

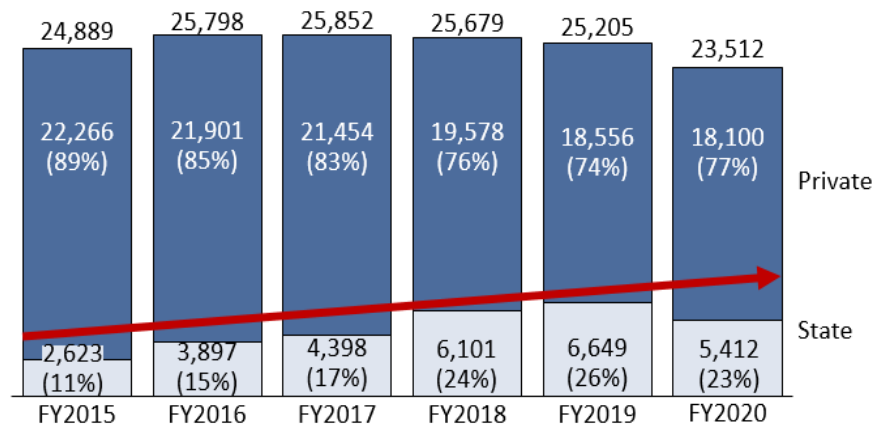


Alison Land, FACHE
Commissioner
Virginia Department of
Behavioral Health
and Developmental Services

Problem: State Hospital Census is Dangerously High

COVID-19 Admissions Closures in FY 2021

- Catawba
- Central State
- N VA Mental Health Institute
- Piedmont Geriatric Hospital
- S VA Mental Health Institute
- SW VA Mental Health Institute



	Eastern State	Western State
2019	99%	97%
2020	99%	96%
2021	97%	97%

ESH and WSH are the only state hospitals that did not close admissions due to COVID-19

Current Efforts to Address Delays

Short-Term:

- Statewide implementation of Alternative Transportation
- 24 hour DBHDS “on-call” team to resolve problems and delays
- Emergency contracts with providers to divert admissions or provide step-down options
- Offering vaccination to all staff and patients
- Ongoing active recruitment and retention efforts
- Improving discharge processes and pace of discharges

Long-Term:

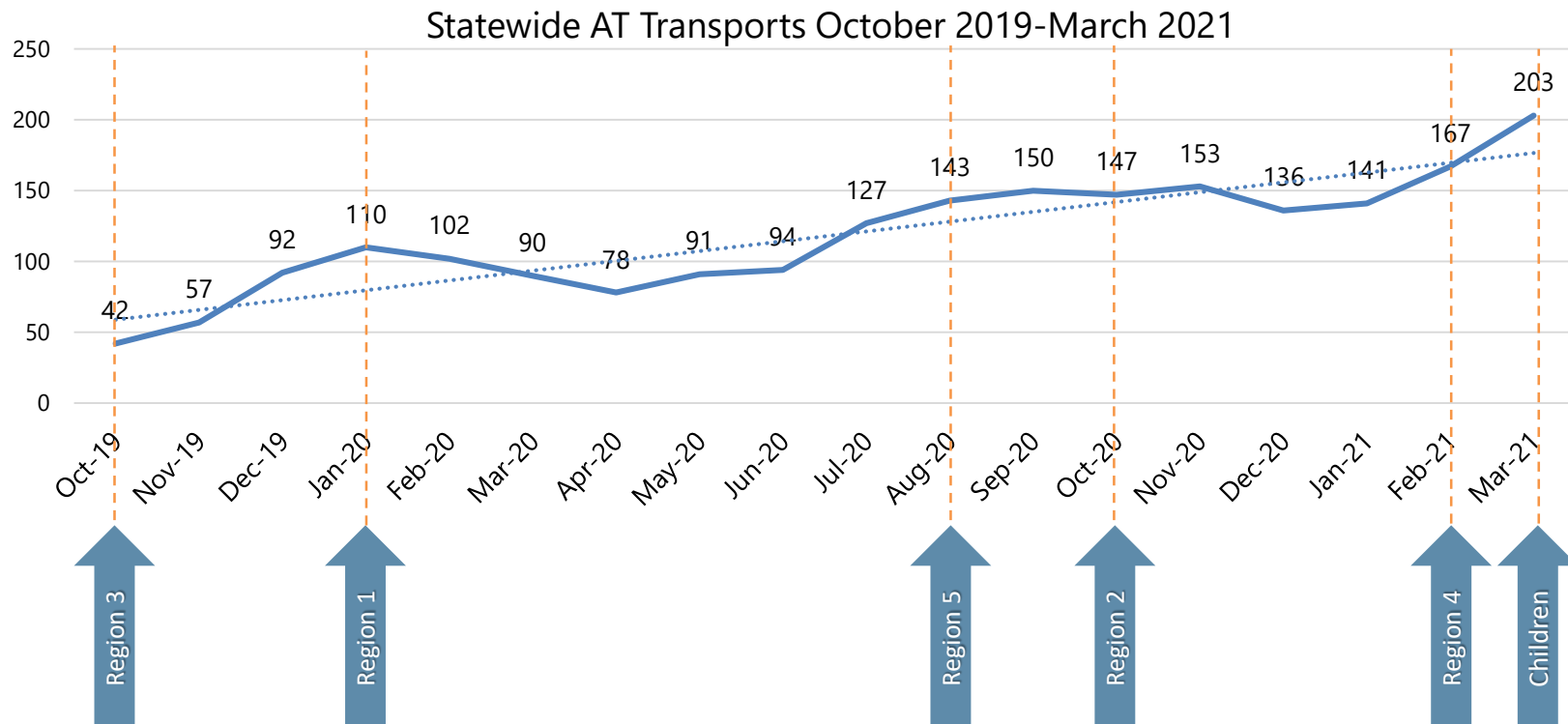
- Implementation of a full crisis continuum
- Implementation of STEP-VA
- Behavioral Health Enhancement/BRAVO

Potential Solutions

- Now
 - Expand G4S contract or incentivize private hospitals to provide sitter/security options
 - Take action to require EDs to provide treatment when patient transport is delayed
 - Continue private hospital pilots and contract development
- FY22 and beyond
 - Increase ability to recruit and retain direct care staff
 - Fund crisis continuum, including crisis receiving centers that include drop-off, crisis intervention, 23 hour observation and crisis stabilization
 - Continue STEP-VA and Behavioral Health Enhancement implementation
 - Reconsider the future footprint for Central State Hospital

REFERENCE SLIDES

Alternative Transportation is Now Available Statewide



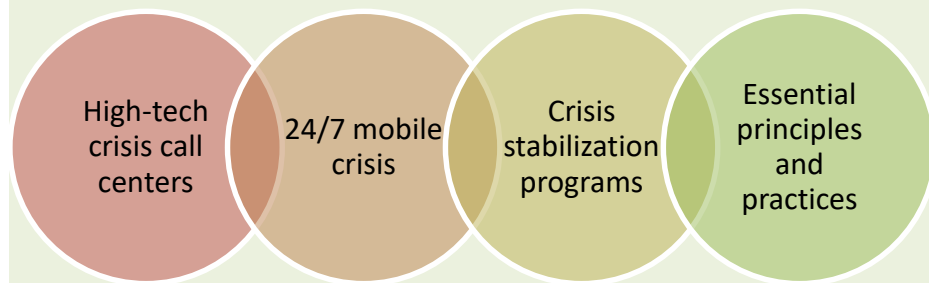
DBHDS Continues to Contract with Providers

	Contract Name	Description or Purpose
Emergency COVID-19 Contracts	ALF Services at Commonwealth Senior Living	Diversion or step down of eligible state geriatric patients to Assisted Living Facility
	Fellowship CSU	Adult step-down beds from state facilities during COVID
	CSU Agreement (Exhibit D)	Agreement with CSB CSUs for diversion
Contracts that existed prior to COVID-19	Diamond Healthcare adult/geriatric	Diversion or step down of eligible TDOs and long term stays
	Gateway Homes ALF and TGH	Assisted living facilities and Transitional Group Homes
	Poplar Springs	Diversion of eligible TDOs
	Jewish Family Services/ Guardianship	Guardianship services for those discharged from state facilities
	Funds to be Reinvested from Contract Underspending	Additional dollars for census initiatives
New FY21 funds for diversion/ step-down contracts	Children's Inpatient Funds	Diversion of children who would otherwise go to CCCA (CHKD)
	Various CSB - Exhibit D	CSB Residential Beds, more funds for IDAPs, transitional housing
	Mt Rogers Nursing Home	Providing specialized BH staff at the nursing home for those with extraordinary behavioral health needs
	RFP for LTC/ALF services	Solicitation of proposals to address Memory Care, ALF and LTC needs of patients ready for discharge at State Facilities.
	VHHA Pilot Programs	Various contracts to relieve census pressures

Crisis System Transformation is Underway

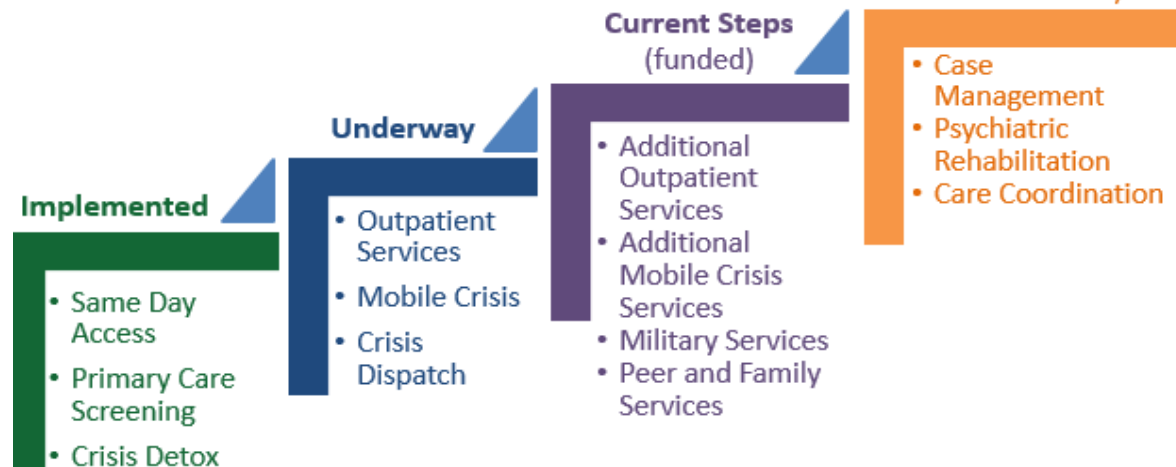
- **Marcus Alert** (2020 Special Session, HB5043/SB5038) stakeholder group is well underway. RFP went out for the crisis call center outlined in the legislation. State plan is due July 1, 2021, with the first five Marcus Alert programs in place by Dec. 1, 2021.
- SB1302 (2021) establishes the crisis call center as the **9-8-8 National Suicide Prevention Lifeline** contact point, in line with federal legislation.
- **23-hour crisis stabilization units (CSUs) and crisis intervention team assessment centers (CITACs)**, together with mobile crisis teams, are vital to the crisis continuum, addressing needs of those experiencing behavioral health crises as well as state hospital census challenges.

Four Core Elements for Transforming Crisis Services



Continuum of Care Development Across the Lifespan Continues

System Transformation, Excellence, Performance (STEP-VA)



Behavioral Health Redesign for Access, Value & Outcomes (BRAVO)

1. Multi-Systemic Therapy
2. Functional Family Therapy
3. Partial Hospitalization Program
4. Intensive Outpatient Program
5. Program of Assertive Community Treatment
6. Comprehensive Crisis Services

Beyond these critical community services, DBHDS is working to improve health information technology to eventually implement modern payment structures and a framework for quality improvement.