Agency Plan

## Mission Statement

The Department of Behavioral Health and Developmental Services provides leadership and service to implement and improve Virginia's system of quality treatment and prevention services and supports for individuals and families whose lives are affected by mental health or substance use disorders or by developmental disabilities. It seeks to promote dignity, choice, recovery, and the highest possible level of participation in work, relationships, and all aspects of community life for individuals receiving services.

#### Vision Statement

We envision an individual-driven system of services and supports that promotes self-determination, empowerment, recovery, resilience, health, and the highest possible level of participation in all aspects of community life, including work, school, family and other meaningful relationships.

#### Values

### Focus First on Individuals Receiving Services

Our decisions and actions consider first the best interests of individuals who receive services and their families. We respect the potential and capacity of each individual who receives services. We value and support the healing and recovery process.

## Responsiveness to External and Internal Customers

We seek input and involvement from our customers. We share ideas and remain open to different opinions. We listen to and respect what our customers say and respond promptly to their requests.

## Partnership and Collaboration

We create opportunities for partnerships, encourage teamwork, and support each other to succeed. We accept shared ownership and seek win-win (mutually acceptable) solutions. We communicate openly and clearly. We are willing to take risks as we look for creative solutions and new ways of solving problems. We make decisions and resolve problems at the level closest to the issue.

## Professionalism, Integrity, and Trust

We recognize and celebrate individual and team successes. We use valid data that reflect best practices and positive results and outcomes. We take responsibility for ourselves, for our actions, and for how these actions affect others. We develop a supportive and learning environment and work continuously to improve the quality of the services we provide. We keep our word and deliver what we promise. We incorporate our values into everyday decisions.

## Stewardship

We protect the assets and interests of the entire services system. We value and take care of staff. We use the Commonwealth's resources in the most effective and efficient manner.

## Information Technology

# **Current Operational IT Investments**

See the Health and Human Resources Investment Management Strategic Plan for the 2012-2014 Biennium.

## Factors Impacting the Current Agency IT

See the Health and Human Resources Investment Management Strategic Plan for the 2012-2014 Biennium.

## **Proposed IT Solutions**

The Department's IT program provides coordination, guidance, oversight, and support to central office and state facility IT programs, including IT infrastructure transformation activities, security, compliance, and web and application development. With new IT leadership, the Department is involved in an assessment of the agency's information technology, including its existing infrastructure and infrastructure needed to meet business objectives. This assessment is examining ITS staff skills, particularly with respect to the adoption of new technologies or integration strategies across the supported applications; software development processes and practices that facilitate cross-project communication and collaboration; application and project inventory organization and management; facility IT infrastructure and central office support; and IT infrastructure (system hardware and software) support. The goal of this assessment is to provide Department executive leadership with strategic and tactical recommendations to:

- Strengthen IT leadership and management;
- Improve communication, collaboration, and efficiency;
- Enhance project, portfolio, and organizational change management capability;
- Upgrade technical skills necessary for the adoption of modern technologies and software development methodologies; and
- Increase agency IT capacity to meet emerging business requirements.

Implementation of assessment recommendations will require a combination of more efficient use of existing staff capabilities and resources, by expansion of staff as

required to introduce absent skill sets, and by achieving alignment between budget and organizational demand.

Two new requirements are increasing the scope and complexity of the Department's ITS work and capacity. First is the requirement to align with and support the strategic plan of the HHR Secretariat. This includes implementation of an electronic health record that meets meaningful use requirements in each state facility and conformance of applicable Department systems to standards for data exchange. The second is the requirement to support implementation of the U.S. Department of Justice settlement agreement, including increased quality management and oversight processes. These drivers present an environment demanding rapid coordinated change, navigated and measured by information and analysis. Both will create increased demands regarding the pace, quality, and capabilities for information technology systems development, deployment and adoption in support of healthcare delivery to Virginians.

## Financial Overview

State training centers operated by the Department of Behavioral Health and Developmental Services (Department) are funded with 12 percent general fund and 88 percent non-general fund dollars. Non-general fund dollars are derived from the collection of fees from Medicaid, Medicare, private insurance, private payments, and federal entitlement programs related to patient care.

Budget Component	2013 GF	2013 NGF	2014 GF	2014 NGF
Base	30,788,419	219,562,507	30,788,419	219,562,507
Changes to Base	1,334,659	10,744,550	1,334,659	10,744,550
Total	32,123,078	230,307,057	32,123,078	230,307,057

# Agency Goals

• Implement self-determination, empowerment, recovery, resilience, and person-centered core values at all levels of the behavioral health and developmental services system through policy and practices that reflect the unique circumstances of individuals receiving services and supports.

Goal Summary and Alignment

This goal envisions the alignment of services system policies, regulatory requirements, funding incentives, administrative practices, and services and supports with the core values of self-determination, empowerment, recovery, and resilience at the state and local levels. This includes implementation of community-focused services and supports that enable individuals with intellectual disability to live full and productive lives in their communities.

Implementation of this goal is essential to the Department's progress in advancing its vision and achieving the promise of a Commonwealth of Opportunity for individuals receiving behavioral health or developmental services and supports.

# Long Term Goal

Inspire and support Virginians toward healthy lives and strong and resilient families.

Societal Indicator: Life Expectancy

• Build and sustain services capacity necessary to provide person-centered services and supports when and where they are needed, in appropriate amounts, and for appropriate durations.

Goal Summary and Alignment

This goal envisions statewide availability of a consistent array of person-centered developmental services and supports that enable individuals to participate as fully as possible in all aspects of community life. Developmental services and supports exemplify clinical and management best and promising practices. They are flexible, appropriately tailored to the needs of individuals receiving services, and provided as close to the individual's home and natural supports as possible. Individuals in crisis and those with severe or complex conditions can easily access services and supports that prevent or reduce their use of more intensive interventions. For those individuals receiving care in training centers, person-centered services prepare them for successful integration back into the community.

Implementation of this goal is essential to the Department's progress in advancing its vision and providing the array of services and supports required to achieve a Commonwealth of Opportunity for individuals with intellectual disability.

# Long Term Goal

Inspire and support Virginians toward healthy lives and strong and resilient families.

Societal Indicator: Life Expectancy

• Perform the core functions of the behavioral health and developmental services system in a manner that is efficient, effective, and responsive to the needs of individuals receiving services and their families.

Goal Summary and Alignment

This goal envisions consistent implementation of clinical, administrative, and funding policies and practices that support and sustain service quality and appropriateness, protect individual human rights, and promote efficiency and cost-effectiveness. Quality improvement processes use clearly defined performance and outcomes measures to demonstrate quality and track progress in achieving services system goals and priorities. The services system promotes stewardship and wise use of services system

funds, human resources, and capital infrastructure. Full advantage would be taken of federal funding opportunities, including Medicaid, to implement recovery-oriented and person-centered services. Affirmative actions are taken to identify and eliminate unnecessary variability; streamline functions to realize savings and achieve operational efficiencies; and break down funding and service silos through cross-agency initiatives.

Implementation of this goal is essential to the Department's progress in advancing its vision, implementing Commission on Government Reform and Restructuring (Executive Order #2 2010) recommendations, and documenting progress in achieving a *Commonwealth of Opportunity* for all Virginians, including individuals receiving developmental services and supports.

Long Term Goal

Inspire and support Virginians toward healthy lives and strong and resilient families.

Societal Indicator: Life Expectancy

Programs and Service Areas for Agency

- 19708: Facility-Based Education and Skills Training
- · 42102: Inpatient Pharmacy Services
- 43007: Inpatient Medical Services
- 43010: State Intellectual Disabilities Training Center Services
- 498: Facility Administrative and Support Services

#### Customers

Pre-Defined Customer Group	User Specified Customer Group	Customers Served Annually	Potential Annual Customers	Projected Trend in # of Customers
Consumer	Individuals served in state training centers	1,130	1,130	
Consumer	Individuals served on the Central Virginia Training Center nursing unit	34	34	

#### Kev Risk Factors

- Transition of individuals to appropriate community settings: Compliance with the DOJ settlement agreement requires unprecedented expansion of developmental services and supports that are necessary for training center residents to move to integrated community settings and to address the needs of those in the community who are waiting for services. Centers perform intensive pre-move and transition activities, participate in the resolution of barriers to discharge, and perform post-move monitoring. These activities will help individuals living in training centers and those who support them identify and make informed choices regarding specific supports and services necessary to live successfully in the most integrated setting possible.
- Workforce retention during transition: Training centers must maintain sufficient numbers of trained professional, direct care, ancillary, and support staff in order to
  provide quality supports and services that address the needs of individuals who continue to receive services at the centers. Adequate staffing is essential to assure
  provision of services and supports that prepare individuals for successful discharge and maintain a safe environment for individuals receiving supports and services.
  Workforce training, recruitment, retention, and placement activities to maintain balanced staffing and appropriate competency levels will be a particular challenge
  at those centers scheduled for closure.
- Training center unit closures: In order to financially support implementation of the settlement agreement, Virginia plans to downsize one and close four state
  training centers over the next eight years. As the number of beds decline and buildings are closed, training centers must reconfigure remaining units to maintain
  appropriate staffing coverage and operational efficiency.

## Products and Services

Training centers provide highly-structured residential care and training and supports in areas such as language, self-care, independent living, socialization, academic skills, and motor development focused on developing skills needed for successful community living. Services and supports include medical and psychiatric assessment; occupational, speech, physical, and recreational therapies; short-term respite and emergency care; habilitation and skill acquisition for community integration; educational services and vocational, pre-vocational, and work training that promote independence and the highest possible level of participation in paid or non-paid (volunteer) work.

Training centers have implemented consistent discharge planning processes with residents and their authorized representatives and work actively with individuals, their authorized representatives, and CSBs to identify community placements that meet their individual needs. Center staff also participates in post-discharge monitoring.

Training centers provide a broad range of medical, dental, laboratory, and nursing services, but most predominantly include skilled nursing provided on the CVTC nursing facility unit, infirmary services, and services provided in medical clinics or by referral from training centers to local acute care hospitals through the DBHDS special hospitalization program.

Although their traditional function has focused on long-term care, training centers also provide short-term respite and emergency care and offer an array of dental, behavioral, and other therapeutic services and supports to individuals receiving community-based supports through Regional Community Support Centers.

## Trends

# Rankings & Customer Trends

As additional community services and supports required in the Settlement Agreement with the U.S. Department of Justice (DOJ) are brought on line and training center closures occur, the number of individuals remaining in training centers will decline significantly.

Trend	Name	Trend Area

Training center discharges	Increase
Community involvement	Increase
Discharge preparations	Increase

Performance Highlights: Service Performance & Productivity Initiatives

A critical part of the comprehensive effort to comply with settlement agreement milestones is the safe and successful transition of individuals currently residing at a training center to the most integrated community settings. Training centers use a standardized discharge process involving personal support teams and CSB case managers that provide specific options for types of community placements, services, and supports based on the individual's needs and desires. In FY 2013, 155 individuals transitioned to the community. To prepare individuals for community integration, training centers are providing vocational training and educational services to residents. Individuals residing on the CVTC nursing facility unit are participating monthly in off-campus activities.

Management Discussion & Analysis

### Future Direction, Expectations, and Priorities

To financially support settlement agreement implementation, Virginia has downsized SEVTC to 75 beds and will be closing SVTC (FY 2014), NVTC (FY 2015), SWVTC (FY 2018) and CVTC (FY 2020). As the number of beds decline and buildings are closed, training centers must reconfigure remaining units to maintain appropriate staffing and operational efficiency. This is essential to prepare individuals for successful discharge and maintain safe environments. DBHDS also will use annual consultative audits (ACAs) by teams of other training center colleagues and central office staff to review and provide feedback on center operations and offer ideas and tools to improve service delivery.

Scheduled training center closures will affect about 3,000 staff. Workforce training, recruitment, retention, and placement activities to maintain balanced staffing and appropriate competency levels will be a particular challenge at centers scheduled for closure. DHDS is implementing a progressive retention plan that pays bonuses at the end of each quarter to viable working staff at SVTC meeting all specified performance criteria. This plan will be extended as other center closure dates near. Affected employees will receive:

- Information about future employment options and programs to improve employability;
- On-site workforce development resource assistance and resources; and
- Placement assistance from other state agencies, state facilities, CSBs, and private providers.

DBHDS is developing a plan to transition Regional Community Support Centers currently at the training centers to community-based Regional Health Supports Networks. This plan will identify unmet needs and recommend strategies and resources needed to develop services that will uniquely support these services each region.

## 19708: Facility-Based Education and Skills Training

#### Description

Facility-Based Education and Skills Training Services consist of educational services and vocational, pre-vocational, and work training that promote independence and the highest possible level of participation in paid or non-paid (volunteer) work.

## Mission Alignment and Authority

Facility-Based Education and Skills Training Services are designed to improve individuals' person-centered work skills, thereby promoting choice, self-worth, and satisfaction.

State statutory authority for training center education and skills training services follows:

Chapter 3 of Title 37.2 of the Code of Virginia establishes the Department of Behavioral Health and Developmental Services. Section 37.2-304 outlines the duties of the Commissioner, including supervising and managing state training centers, which provide education and skills training services.

The federal Individuals with Disabilities Education Act defines who receives special education services in state training centers.

### Customers for this Service Area

## Anticipated Changes to Customers Base

- Virginia's population is increasing, becoming more culturally diverse, and growing older. The customer base for state training centers will reflect these demographic trends.
- The number of individuals served in training centers will continue to decline significantly.
- Proportionately greater numbers of individuals continuing to be served in training centers will have significant or complex needs or will experience serious medical
  conditions requiring specialized services and supports. These include pervasive physical disabilities or medical conditions such as scoliosis, gastrointestinal
  problems, either hearing or visual deficit, or both, or neurological conditions in addition to an intellectual disability.
- Increasingly, individuals receiving services in training center will be non-ambulatory (requiring specialized wheelchairs) or will need significant staff assistance to walk.
- The proportion of individuals receiving services in training center with at least one psychiatric diagnosis or significant behavioral challenges is anticipated to increase.

### **Current Customer Base**

Pre-Defined Customer Group	User Specified Customer Group	Customers Served Annually	Potential Annual Customers	Projected Trend in # of Customers
Consumer	Individuals served in training centers	994	994	Decrease

## Partners for this Service Area

Partner	Description
Community services boards and behavioral health authority (CSBs)	Training centers participate with CSBs in discharge planning and post-discharge monitoring.
Federal agencies	Training center intermediate care facility (ICF) and skilled nursing beds must be certified by the Centers for Medicare and Medicaid Services (CMS) to receive Medicaid reimbursement for services provided.
Individuals receiving services, family members, and advocacy organizations	Training centers work closely with individuals receiving services and their families to assure their active and meaningful involvement in developing plans of care, providing service and supports, and discharge planning.
Private providers (for profit and non-profit organizations)	Training centers purchase inpatient medical care for individuals receiving their services.
State agencies	Training centers work with a number of state agencies that coordinate services or provide operational, financial, or workforce consultation or oversight to assure appropriate implementation of regulations and management requirements.
Virginia institutions of higher education (colleges, universities, and community colleges)	Training centers collaborate with academic medical centers, academic programs of other colleges and universities, and community colleges to address workforce issues, promote the implementation of evidence-based and other promising practices, and to train the services system's current and emerging workforce.

## Products and Services

## Factors Impacting the Products and/or Services

Provision of pre-vocational and vocational training and employment services is affected by the increasing age, physical needs, and challenging behaviors of individuals receiving those services and the availability of competitive employment opportunities.

## Anticipated Changes to the Products and/or Services

Services will increasingly focus on vocational and employment skills that will enable individuals to successfully transition to the community.

## Listing of Products and / or Services

Facility education and skills training include habilitation, occupational, physical, music and speech, and recreation therapy; vocational and employment services.

#### Financial Overview

Budget Component	2013 GF	2013 NGF	2014 GF	2014 NGF
Base	7,984,330	971,937	7,984,330	971,937
Changes to Base	347,064	7,347	347,064	7,347
Total	8,331,394	979,284	8,331,394	979,284

Objectives for this Service Area

### Objectives for this Service Area

### Objective

Provide appropriate vocational or pre-vocational training and employment services and supports to individuals served in state training centers.

#### Description

Provision of educational and vocational, pre-vocational, and employment services aligns with the Department's responsibility to provide person-centered services and supports that promote self-determination, independence, and community integration to individuals served in state training centers. The objective supports the Department's Creating Opportunities strategic priorities to emphasize integrated and supported employment opportunities for individuals receiving services in state training centers.

## Objective Strategies

- Develop or modify current vocational and pre-vocational training and employment services to address the needs residents who are growing older or who have severe physical and medical conditions or challenging behaviors.
- Expand the use of person-centered practices in the provision of vocational and pre-vocational training and employment services.
- Work with community services boards and other vocational and employment services providers to increase access to community-based vocational and employment services for individuals receiving training center services.

## Alignment to Agency Goals

• Build and sustain services capacity necessary to provide person-centered services and supports when and where they are needed, in appropriate amounts, and for appropriate durations.

#### Measures

• Percentage of individuals in training centers receiving vocational training or educational services.

Measure Class | Agency Key | Measure Type | Outcome | Preferred Trend | Increase | Frequency | Annually

# Data Source and Calculation

Source: Training center reports to the Department of Behavioral Health and Developmental Services. Reports provide counts of individuals involved in paid or non-paid work activities. Calculation: Number of individuals receiving vocational training or employment services on the last day of the fiscal year divided by the total number of individuals served.

## 42102: Inpatient Pharmacy Services

#### Description

Inpatient Pharmacy Services consist of medication selection and procurement, storage, ordering and prescribing, preparation and dispensing, administration, and monitoring. Medication orders are prepared, packaged, compounded (if needed), labeled and then sent directly to the individual's unit for administration by nursing staff.

#### Mission Alignment and Authority

State training centers provide medications that appropriately alleviate the symptoms of and distress associated with an individual's medical condition or disability, or both.

State statutory authority for training center inpatient pharmacy services follows:

Chapter 3 of Title 37.2 of the Code of Virginia establishes the Department of Behavioral Health and Developmental Services. Section 37.2-304 outlines the duties of the Commissioner, including supervising and managing the Department and its state training centers, which provide inpatient pharmacy services.

#### Customers for this Service Area

## Anticipated Changes to Customers Base

- Virginia's population is increasing, becoming more culturally diverse, and growing older. The customer base for state training centers will change to reflect these demographic trends.
- The number of individuals served in training centers will continue to decline significantly.
- Proportionately greater numbers of individuals served in training centers will have extensive or complex needs or will experience serious medical conditions
  requiring specialized services and supports. These include pervasive physical disabilities or medical conditions such as scoliosis, gastrointestinal problems, either
  hearing or visual deficits, or both, or neurological conditions in addition to an intellectual disability.
- Increasingly, individuals receiving services in training centers will be non-ambulatory (requiring specialized wheelchairs) or will need significant staff assistance to walk.
- The proportion of individuals receiving services in training centers with at least one psychiatric diagnosis or significant behavioral challenges is anticipated to increase
- Changes to the Virginia Medical Assistance Program resulting from federal health care reforms under the Patient Protection and Affordable Care Act (PPACA) will likely have a significant impact on Virginia's publicly-funded behavioral health and developmental services system and the individuals served by this system.

## Current Customer Base

Pre-Defined Customer Group	User Specified Customer Group	<b>Customers Served Annually</b>	Potential Annual Customers	Projected Trend in # of Customers
Consumer	Individuals served in state training centers	994	994	Decrease

## Partners for this Service Area

Partner	Description
Pharmacy oversight agencies	Training centers assure that its pharmacy operations meet regulatory requirements

## Products and Services

# Factors Impacting the Products and/or Services

Inpatient pharmacies will continue to experience increasing medication costs. These costs may be offset somewhat as patents for certain medications expire and generic medications become available.

The pharmacist shortage in Virginia and nationally make recruitment and retention of pharmacists extremely difficult.

## Anticipated Changes to the Products and/or Services

Inpatient pharmacy information systems must be replaced as part of the Department's implementation of an electronic health record system in state training centers.

# Listing of Products and / or Services

Inpatient pharmacy services include medication, selection, procurement, preparation, dispensing; management, and education, and pharmacy service oversight and cost containment.

## Financial Overview

2013 GF	2013 NGF	2014 GF	2014 NGF
40,732	4,851,294	40,732	4,851,294
0	14,693	0	14,693
	40,732	40,732 4,851,294	

Total 40,732 4,865,987 40,732 4,865,987

## Objectives for this Service Area

# Objectives for this Service Area

## Objective

Provide appropriate pharmacy services to individuals receiving services and supports in state training centers.

#### Description

Medications dispensed by inpatient pharmacies are an important component in treating medical conditions experienced by individuals receiving state training center services.

## Objective Strategies

- · Continually evaluate and ensure the capacity of state training center pharmacies to bill a variety of third party insurance plans.
- Ensure that current state training center pharmacies' procedures and capabilities comply with state requirements and federal programs.
- Implement 30-day and 90-day medication reviews as required by federal and state regulatory agencies (Medicare, Medicaid, and Virginia Board of Pharmacy).
- · Monitor inventory to reduce excess inventories and price discrepancies while ensuring the availability of normal stock levels for medications.
- Monitor physician prescribing practices to identify potential prescribing issues and take appropriate actions.

## Alignment to Agency Goals

• Build and sustain services capacity necessary to provide person-centered services and supports when and where they are needed, in appropriate amounts, and for appropriate durations.

#### Measures

• Percentage of individuals in training centers prescribed anti-psychotic medications.

Measure Class Other Agency Measure Type Outcome Preferred Trend Decrease Frequency Annually

### Data Source and Calculation

Data Source: Department of Behavioral Health and Developmental Services pharmacy information system Calculation: Number of individuals receiving more than two antipsychotic medications divided by the number of individuals prescribed at least one antipsychotic medication

Program / Service Area Plan (3 of 5)

## 43007: Inpatient Medical Services

#### Description

Inpatient Medical Services include a broad range of medical, dental, laboratory, and nursing services, but most predominantly include skilled nursing provided on the Central Virginia Training Center nursing facility unit, infirmary services, and services provided in medical clinics or by referral from training centers to local acute care hospitals through the Department's special hospitalization program.

### Mission Alignment and Authority

Inpatient medical services focus on alleviating the symptoms and distress associated with an illness or medical condition. Acute symptom resolution or management is a prerequisite for active and meaningful individual involvement and participation in other state training center services and supports.

Statutory authority for state training center inpatient medical services follows:

Chapter 3 of Title 37.2 of the Code of Virginia establishes the Department of Behavioral Health and Developmental Services. Section 37.2-304 outlines the duties of the Commissioner, including supervising and managing the Department and its state training centers, which provide inpatient medical services.

The federal Centers for Medicare and Medicaid Services (CMS) certifies training center skilled nursing facility beds operated by the Department.

#### Customers for this Service Area

#### Anticipated Changes to Customers Base

- Virginia's population is increasing, becoming more culturally diverse, and growing older. The customer base for inpatient medical services will change to reflect these demographic trends.
- Individuals served in training centers are increasingly presenting with pervasive physical disabilities or medical conditions such as scoliosis, gastrointestinal
  problems, hearing or visual deficits, or neurological conditions in addition to an intellectual disability. Proportionately greater numbers of those individuals will
  experience serious conditions requiring medical services and supports.
- Changes to the Virginia Medical Assistance Program resulting from federal health care reforms under the Patient Protection and Affordable Care Act (PPACA) will likely have a significant impact on Virginia's publicly-funded behavioral health and developmental services system and the individuals served by this system.

## **Current Customer Base**

Pre-Defined Customer Group	User Specified Customer Group	Customers Served Annually	Potential Annual Customers	Projected Trend in # of Customers
Consumer	Individuals served on the Central Virginia Training Center nursing unit	78	78	Stable

## Partners for this Service Area

Partner	Description
Community services boards and behavioral health authority (CSBs)	Training centers participate with CSBs in discharge planning and post-discharge monitoring.
Federal agencies	Training center skilled nursing beds must be certified by the Centers for Medicare and Medicaid Services (CMS) to receive Medicaid reimbursement for services provided.
Individuals receiving services, family members, and advocacy organizations	Training centers work closely with individuals receiving services and their families to assure their active and meaningful involvement in developing plans of care, providing service and supports, and discharge planning.
Private providers (for profit and non-profit organizations)	Training centers participate with private providers in discharge planning and post-discharge monitoring. Training centers purchase inpatient medical care for individuals receiving their services.
State agencies	Training centers work with a number of state agencies that coordinate services or provide operational, financial, or workforce consultation or oversight to assure appropriate implementation of regulations and management requirements.
Virginia institutions of higher education (colleges, universities, and community colleges)	Training centers collaborate with academic medical centers, academic programs of other colleges and universities, and community colleges to address workforce issues, promote the implementation of evidence-based and other promising practices, and to train the services system's current and emerging workforce.

## Products and Services

# Factors Impacting the Products and/or Services

- Demand for ancillary medical services will increase as individuals served in state training centers develop acute and chronic medical conditions associated with aging.
- Clinical, environmental, and administrative standards set by the Centers for Medicare and Medicaid Services are likely to continue to become more complex, burdensome, and more expensive to oversee and implement.

# Anticipated Changes to the Products and/or Services

No changes are anticipated.

## Listing of Products and / or Services

Inpatient medical services include skilled nursing care; physician, nursing, psychology, and dental services; speech and audiology; physical, occupational, respiratory, and recreational therapy; radiation/X-ray; lab; medical supply; medical clinics; and special hospitalization (purchase of medical care from local hospitals).

#### Financial Overview

Budget Component	2013 GF	2013 NGF	2014 GF	2014 NGF
Base	16,133,856	12,034,003	16,133,856	12,034,003
Changes to Base	694,127	10,036,735	694,127	10,036,735
Total	16,827,983	22,070,738	16,827,983	22,070,738

Objectives for this Service Area

## Objectives for this Service Area

#### Objective

Offer or arrange for medical and nursing facility (skilled) services appropriate to the particular medical needs of individuals receiving services in state training centers.

#### Description

State training centers must address the medical and nursing facility service needs of individuals receiving services and supports.

### Objective Strategies

- · Assure that the Central Virginia Training Center nursing facility unit meets federal Centers for Medicare and Medicaid Services (CMS) requirements.
- · Continue partnerships with local hospitals to assure continuity of treatment for individuals who require medical or surgical treatment in local hospitals.
- Maintain sufficient numbers of trained staff to ensure ancillary medical and nursing facility services provided in state training centers are sufficient to provide
  quality care.
- Provide funds to assure ancillary medical and nursing facility services and special hospitalization needs are met for individuals receiving services in state training centers.

#### Alignment to Agency Goals

• Build and sustain services capacity necessary to provide person-centered services and supports when and where they are needed, in appropriate amounts, and for appropriate durations.

### Measures

• Percentage of individuals residing on the Central Virginia Training Center nursing facility unit who participate monthly in off campus activities.

Measure Class Other Agency Measure Type Outcome Preferred Trend Increase Frequency Annually

## Data Source and Calculation

Data Source: Central Virginia Training Center (CVTC) reports to the Department of Behavioral Health and Developmental Services Calculation: Number of individuals on the CVTC nursing facility unit who participate monthly in off-campus activities divided by the number of individuals on the CVTC nursing facility unit

Program / Service Area Plan (4 of 5)

## 43010: State Intellectual Disabilities Training Center Services

#### Description

State Intellectual Disabilities Training Center Services consist of highly-structured residential care and training and supports in areas such as language, self-care, independent living, socialization, academic skills, and motor development focused on developing skills needed for successful community living. Although their traditional function has focused on long-term care, training centers also provide short-term respite and emergency care and offer an array of dental, behavioral, and other therapeutic services and supports to individuals receiving community-based supports through Regional Community Support Centers. The Department operates five training centers: Northern Virginia Training Center (NVTC) in Fairfax, Southeastern Virginia Training Center (SEVTC) in Chesapeake, Southside Virginia Training Center (SVTC) in Petersburg, Central Virginia Training Center (CVTC) in Lynchburg, and Southwestern Virginia Training Center (SWVTC) in Hillsville. All training centers meet federal requirements for designation as an Intermediate Care Facility for Individuals with Intellectual Disability (ICF/IID).

#### Mission Alignment and Authority

State training centers provide person-centered services and supports to individuals with intellectual disability who present complex medical needs and behavioral challenges that require highly intensive and structured environments of care. Training centers have developed strong ties with the communities they serve and each provides a variety of specialized services that support community systems and divert potential admissions.

State statutory authority for state training center services follows:

Chapter 3 of Title 37.2 of the Code of Virginia establishes the Department of Behavioral Health and Developmental Services. Section 37.2-304 outlines the duties of the Commissioner, including supervising and managing the Department and its training centers, which provide intensive residential training and supports; and

Chapter 8 (§§ 37.2-800 to 37.2-847) of Title 37.2 of the Code of Virginia addresses admissions to and discharges from training centers.

The federal Centers for Medicare and Medicaid Services certifies all ICF/IID beds in training centers operated by the Department.

#### Customers for this Service Area

### Anticipated Changes to Customers Base

- Virginia's population is increasing, becoming more culturally diverse, and growing older. The customer base for state training centers will reflect these demographic trends.
- The number of individuals served in training centers will continue to decline significantly.
- Proportionately greater numbers of individuals served in training centers will have extensive or complex needs or will experience serious medical conditions
  requiring specialized services and supports. These include pervasive physical disabilities or medical conditions such as scoliosis, gastrointestinal problems, either
  hearing or visual deficits, or both, or neurological conditions in addition to an intellectual disability.
- Increasingly, individuals receiving services in training centers will be non-ambulatory (requiring specialized wheelchairs) or will need significant staff assistance to walk.
- The proportion of individuals receiving services in training centers with at least one psychiatric diagnosis or significant behavioral challenges is anticipated to increase.

## Current Customer Base

Pre-Defined Customer Group	User Specified Customer Group	Customers Served Annually	Potential Annual Customers	Projected Trend in # of Customers
Consumer	Individuals served in state training centers	994	994	Decrease

## Partners for this Service Area

Partner	Description
Community services boards and behavioral health authority (CSBs)	Training centers participate with CSBs in discharge planning and post-discharge monitoring.
Federal agencies	Training center intermediate care facility beds must be certified by the Centers for Medicare and Medicaid Services to receive Medicaid reimbursement for services provided.
Individuals receiving services, family members, and advocacy organizations	Training centers work closely with individuals receiving services and their families to assure their active and meaningful involvement in developing plans of care, providing service and supports, and discharge planning.
Private providers (for profit and non-profit organizations)	Training centers participate with private providers in discharge planning and post-discharge monitoring. Training centers purchase inpatient medical care for individuals receiving their services.
State agencies	Training centers work with a number of state agencies that coordinate services or provide operational, financial, or workforce consultation or oversight to assure appropriate implementation of regulations and management requirements.
Virginia institutions of higher education (colleges, universities, and community colleges)	Training centers collaborate with academic medical centers, academic programs of other colleges and universities, and community colleges to address workforce issues, promote the implementation of evidence-based and other promising practices, and to train the services system's current and emerging workforce.

## Products and Services

# Factors Impacting the Products and/or Services

• In order to financially support implementation of the DOJ Settlement Agreement, Virginia has planned to close 4 of the 5 training centers over the next decade.

- Census reductions required to implement this plan will have a significant impact on training center operations.
- The increasingly complex needs of individuals receiving care in training centers will require a well-trained workforce skilled in evidence-based person-centered practices.
- Clinical, environmental, and administrative standards set by the Centers for Medicare and Medicaid Services require heightened vigilance and resources to
  maintain adequate physical plans and compliance with standards.

#### Anticipated Changes to the Products and/or Services

- To meet Department and U.S. Department of Justice settlement agreement requirements to assure the successful transition of individuals to appropriate community settings, training centers must perform intensive pre-move and transition activities, participate in the resolution of barriers to discharge, and perform post-move monitoring. These activities will help individuals living in training centers and those who support them identify and make informed choices regarding specific supports and services necessary to live successfully in the most integrated setting.
- Training centers are working to improve the cultural and linguistic competence of staff so they can better address the supports and communication needs of
  individuals and families in a culturally relevant manner.
- Advances in information technology such as the electronic health record will improve staff clinical communication, strengthen quality assurance and oversight, and reduce medication errors.

### Listing of Products and / or Services

State training center services include medical and psychiatric assessment; occupational, speech, physical, and recreational therapies; short-term respite and emergency care; habilitation and skill acquisition for community integration; and dental, behavioral, and other therapeutic services and supports to individuals receiving community-based supports through Regional Community Support Centers.

#### Financial Overview

Budget Component	2013 GF	2013 NGF	2014 GF	2014 NGF
Base	1,147,047	132,233,855	1,147,047	132,233,855
Changes to Base	30,697	440,807	30,697	440,807
Total	1,177,744	132,674,662	1,177,744	132,674,662

#### Objectives for this Service Area

## Objectives for this Service Area

### Objective

Offer a comprehensive array of person-centered services and supports that promote self-determination and community participation.

## Description

This objective conforms to the Department's responsibility to operate training centers and its goal of promoting self-determination and person-centered training center services, supports, and enrichment activities. The objective would be affected by implementation of the Department's Creating Opportunities strategic initiative to transform the Commonwealth's developmental services system.

## Objective Strategies

- Achieve operational efficiencies resulting from training renovations and the construction of community residential services with state bond funds.
- Continue to reduce bed utilization at the remaining training centers through aggressive monitoring of service plans and discharge efforts that enable individuals to be integrated more quickly into the community.
- Enhance the provision and use of best practice guidelines and evidence-based approaches in the provision of care to individuals receiving training center services.
- Implement a career path for direct services associates to improve recruitment and retention efforts and provide training through the College of Direct Support.
- Implement strategies at each training center, including the Supports Intensity Scale<sup>™</sup>, that facilitate person-centered planning and promote opportunities for self-determination and community participation.
- Implement the plan to close Southside Virginia Training Center through the safe and successful transition of individuals currently residing at the training center to the most integrated community settings.
- Maintain compliance with federal Centers for Medicare and Medicaid Services expectations and improve the quality and effectiveness of developmental services
  through training, technical assistance, and oversight of program performance and services recipient outcomes.
- Maintain sufficient numbers of trained staff and equipment at each training center to provide supports and services that are appropriate to the populations served and sufficient to assure quality and safety of individuals receiving supports and services.
- Utilize training center expertise to provide specialized medical, dental, and clinical services that are not available to individuals receiving community developmental services.

# Alignment to Agency Goals

- Implement self-determination, empowerment, recovery, resilience, and person-centered core values at all levels of the behavioral health and developmental
  services system through policy and practices that reflect the unique circumstances of individuals receiving services and supports.
- Build and sustain services capacity necessary to provide person-centered services and supports when and where they are needed, in appropriate amounts, and for appropriate durations.

## Measures

· Percent change in the census of training centers.

Measure Class	Agency Key	Measure Type	Outcome	Preferred Trend	Decrease	Frequency	Quarterly
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Data Source and Calculation

Data Source: Department of Behavioral Health and Developmental Services monthly Comparative Direct Care Costs report Calculation: Difference between the year-to-date bed days provided during the current fiscal year and the previous fiscal year divided by the year-to-date bed days provided in the previous fiscal year

• Percentage of individuals with an intellectual disability in Virginia who receive training center services.

Measure Class Agency Key Measure Type Outcome Preferred Trend Decrease Frequency Annually

Data Source and Calculation

Data Source AVATAR, the Department of Behavioral Health and Developmental Services state facility information system, and Weldon Cooper age distribution population estimates Calculation: The rate is calculated by dividing the number of individuals served in all training centers by the estimated prevalence of individuals with an intellectual disability in Virginia (1 percent of Virginia's population ages 6 and over) multiply by 100.

Program / Service Area Plan (5 of 5)

# 498: Facility Administrative and Support Services

#### Description

Facility Administrative and Support Services consist of general management and direction, computer services, food and dietary services, housekeeping services, linen and laundry services, physical plant services, power plant operations, and training and education services. These functions are essential for state training center provision of services and supports.

### Mission Alignment and Authority

Facility Administrative and Support Services support the mission of the Department by providing the administrative framework so state training centers can provide quality care in a safe and clean environment and comply with administrative and financial requirements.

State statutory authority for training center administration and support services follows:

Chapter 3 of Title 37.2 of the Code of Virginia establishes the Department of Behavioral Health and Developmental Services. Section 37.2-304 outlines the duties of the Commissioner, including supervising and managing the Department and its state facilities, which provide administrative and support services; and

Chapter 7 of Title 37.2 of the Code of Virginia authorizes the Department to perform certain functions related to the operation of state facilities, including facility administrative and support services.

### Customers for this Service Area

## Anticipated Changes to Customers Base

- Virginia's population is increasing, becoming more culturally diverse, and growing older. The customer base for state training centers will reflect these demographic trends
- The number of individuals served in training centers will decline significantly.
- Proportionately greater numbers of individuals continuing to be served in training centers will have significant or complex needs or will experience serious medical conditions requiring specialized services and supports. These include pervasive physical disabilities or medical conditions such as scoliosis, gastrointestinal problems, either hearing or visual deficits, or both, or neurological conditions in addition to an intellectual disability.
- Increasingly, individuals receiving services in training centers will be non-ambulatory (requiring specialized wheelchairs) or will need significant staff assistance to walk.
- The proportion of individuals receiving services in training centers with at least one psychiatric diagnosis or significant behavioral challenges is anticipated to increase.

## Current Customer Base

Pre-Defined Customer Group	User Specified Customer Group	Customers Served Annually	Potential Annual Customers	Projected Trend in # of Customers
Consumer	Individuals served in state training centers	994	994	Decrease

## Partners for this Service Area

Partner	Description			
Federal agencies Training center intermediate care facility (ICF) and skilled nursing beds must be certified by the Centers for Medicare and Medicaid Services (CMS) to receive Medicare reimbursement for services provided.				
Private providers and vendors				
State and local agencies	Training centers work with a number of state agencies that provide operational, financial, or workforce consultation and assistance to assure appropriate implementation of regulations and management requirements. Training centers work with local health departments and fire marshals to assure compliance with applicable standards.			

## Products and Services

# Factors Impacting the Products and/or Services

- Implementation of the settlement agreement between the Department and the U.S. Department of Justice (DOJ) requires that the Department develop a plan to close four of the five state training centers over the next decade. During the closure process, training centers must assure that appropriate levels of administration and support services continue as the center beds decline and buildings are closed.
- Recruitment and retention of state training centers' workforce will be a particular challenge for centers during the closure process. Retention will be complicated by the aging of the state training center workforce, particularly in rural areas where staff turnover has historically been less than in more urban areas.
- Physical plant conditions in most training centers have inherent inefficiencies that require immediate attention. Many buildings are in very poor condition and are
  inappropriately designed for individuals who are now residing in training centers.
- The 2009 American Recovery and Reinvestment Act requires health providers to implement electronic health record systems by 2014 to continue to bill Medicaid
  and Medicare. The state training center EHR clinical treatment/medical records module design must be integrated with facility billing and pharmacy modules and
  must allow for information exchange facilities and with CSBs and private providers through Commonwealth Gateway.
- New Governor's Executive Orders and changes in requirements of external agencies such as the Department of Accounts (DOA), Department of Human Resources
  Management (DHRM), Department of Planning and Budget (DPB), Department of General Services (DGS), and Virginia Information Technologies Agency (VITA)
  could affect performance of training center administrative and support services
- Annual increases in the costs of training center medications, energy, and other goods and services.

# Anticipated Changes to the Products and/or Services

No major changes in state facility administrative and support services are anticipated.

### Listing of Products and / or Services

Facility administrative and support services include administrative leadership and regulatory compliance; information technology support; food, housekeeping, linen and laundry, and physical plant services; and employee training and education services.

### Financial Overview

Budget Component	2013 GF	2013 NGF	2014 GF	2014 NGF
Base	5,482,454	69,471,418	5,482,454	69,471,418
Changes to Base	262,771	244,968	262,771	244,968
Total	5,745,225	69,716,386	5,745,225	69,716,386

Objectives for this Service Area

#### Objectives for this Service Area

#### Ohioctivo

Provide efficient and effective administration and support services at each state training center.

#### Description

Efficient and effective administration and support services must be in place if state training centers are to provide quality services in a safe and healthy environment. The objective is related to the Creating Opportunities strategic initiatives to enhance training center effectiveness and efficiency and implement an electronic health record

## Objective Strategies

- · Adhere to all safety regulations as prescribed by the Department of Environmental Quality pertaining to boiler inspections.
- · Adhere to all safety regulations as prescribed by the local Fire Marshall pertaining to building safety.
- · Adhere to Virginia Department of Health regulations pertaining to state training center food services operations, overall sanitation, and cleanliness.
- · Comply with Health Insurance Portability and Accountability Act (HIPAA) Privacy and Security Rule requirements.
- Continue to adhere to Prompt Payment Act, small purchase charge card usage, Payline participation, direct deposit participation, and other regulatory compliance requirements.
- Continue to assess opportunities to improve the effectiveness and efficiency of state training center administrative services.
- Implement an electronic health record system of clinical treatment/medical record, pharmacy, ancillary, and accounts payable modules at each state training center.
- Implement the plan to close Southside Virginia Training Center through the safe and appropriate reconfiguration of administrative and support services that correspond with center census reduction and building closures.
- Initiate repair activities at training centers where there is a critical need to better align environments of care with individual safety, security, and service and support needs.

## Alignment to Agency Goals

• Perform the core functions of the behavioral health and developmental services system in a manner that is efficient, effective, and responsive to the needs of individuals receiving services and their families.

## Measures

Average daily cost of state training center administration and support services.

Measure Class Productivity Preferred Trend Increase Frequency Quarterly

## Data Source and Calculation

Data Sources: Department of Accounts Commonwealth Accounting and Reporting System (CARS) and AVATAR, the Department of Behavioral Health and Developmental Services state facility information system Calculation: State training center expenditures for facility administration and support services (non-direct care) incurred year to date divided by the number of state training center facility year to date bed days