



COMMONWEALTH of VIRGINIA

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Wednesday June 22, 2016: 1:00 – 4:00 p.m.

Capitol Building, House Room 3

Members Present: Dr. Jack Barber (Interim Commissioner DBHDS), Connie Cochran (DBHDS), Dev Nair (DBHDS), Peggy Balak (DBHDS), Heidi Lawyer (VBPD), Catherine Harrison (DRS and CIAC), Jamie Liban (ARC), Jennifer Faison (VACSB), Dorothy Powell (Hope House), Lisa Poe (VNPP), Bradford Hulcher (Autism Org: Autism Society of Central Va), Heather Dooley (DD Case Management); Dan H. Reichard III (Stand Up, Inc).

Members Absent Norma Draper (Family of individual in the community); Ingrid W. Barber (Alleghany Highlands CSB); Katherine Olsen (Peer Mentor - Voices of VA), Lara Ladin (Fairfax-Falls Church CSB); Karen Tefelski (vaACCSES), Maureen Hallaway (Resources for Independent Living, Inc), Margaret Graham (Loudon County CSB)

Call To Order Welcome and Introductions: Connie Cochran, Assistant Commissioner, Developmental Services

The Assistant Commissioner welcomed the stakeholder group as well as the audience and thanked them for their attendance.

Budget Updates

Cherice Jackson (DBHDS), Financial Services Manager

The FY16 expenditures through May 31st are on track. The largest variances occur around some of the IT projects. The Office of Licensing has a request for proposal for a new system that is awaiting approval. DBHDS has asked for money to be carried over. The Commonwealth can take back carry over funds (unexpended balances) except for DOJ related expenses where there is a mandatory care over provision. However, DBHDS is required to submit a request to the Governor which has always been approved in the past. This year's carry over funds equal approximately 4 million dollars.

There are several potential uses for carry forward. The main one is transitional/bridge funding, particularly with the delay in the revised waiver rate. There are some individuals who have more extensive needs who are being served by providers who require additional funding to provide the higher level of supports. This list is subject to change based on the actual carry forward amount.

The Appropriations Act approved over 100 million dollars for DBHDS over the biennium. This is the first time the Commonwealth has received significant money for housing and there was an increase from 21 to 22 million for crisis services. Some of the DOJ funds are at DMAS or DARS. The Health Support Network (HSN) is receiving an additional 1.3 million to help with medical and rehabilitation services in Southwest Virginia.

Trust Fund Budget Actions –\$750,000 was spent from the Trust Fund in FY16. This amount will be increased to 4.6 million in FY17 with 1.1 million being used for transition services which are one time supports for individuals moving from training centers to the community. The current Trust Fund balance is 2.9 million. There is no update on the sale of the NVTC property but when the property is sold the money will first be appropriated before it can be expended.

The savings from closing the training centers has increased each year and the projected savings by the end of FY17 is expected to be 61 million dollars. For FY16, the Commonwealth is on track to save approximately 41 million. The Commonwealth does not realize savings until the facility is closed completely.

Training Center Updates

Debbie Smith (DBHDS), Director, TC Discharges and Community Integration

Ms. Smith shared a chart showing the TC census has reduced by 80% since 2000. A graph showed that based on the rate of decline, the census would still have reached 0 by 2029, instead of 2020 with the downsizing effort. The rates of admission have been decreasing for quite some time.

Ms. Smith summarized the types of homes and day activities individuals are choosing once they move to the larger community. SWVTC is scheduled to close in 2018. There are 98 individuals currently living there. DBHDS is working with 15 established providers and working to develop 9 more providers who will be able to provide a total of 106 potential options for individuals from SWVTC moving into the community.

Questions and Answers: The stakeholders posed questions related to the types of homes individuals are choosing, and the role of the RST in increasing the number of individuals moving to more integrated settings, emphasizing that this is a concern posed by the Independent Reviewer in his Reports to the Court. Ms. Smith explained the changes the Community Integration Team and the Training Centers have made to send referrals to the RST earlier in the process and to increase the support to the RST by establishing a RST Coordinator position at central office. The Stakeholders requested to see a RST report and Ms. Smith stated that a report would be available to the public soon. An additional question was posed related to the type of education a case manager (CM) is receiving related to the RST. Ms. Balak stated that it is very clear in Settlement Agreement (SA) when referrals should be made. Stakeholders requested more information about which providers have been awarded funds to develop services. Once all of the providers sign the formal agreement, information will be shared publicly.

Update on the Settlement Agreement

Peggy Balak, Settlement Agreement Advisor

Ms. Balak gave a general update on Settlement Agreement including providing a brief summary of the 8th Report to the Court released on June 6th. The Commonwealth was found to be in compliance with 62/121 provisions. Progress noted in the following areas:

- Supported Employment: Four provisions that address data that must be collected and analyzed, moved from non-compliance to compliance;
- Independent Housing: one of the two provisions moved from non-compliance to compliance
- RQC review of SE data;
- Data warehouse reporting on CHRIS data moved the requirement for real time web-based incident reporting system into compliance.

Issues of concern were noted primarily in the area of crisis stabilization: Two provisions went from compliance to non-compliance due to concerns about sufficient capacity across regions. Money was requested during the General Assembly Session and appropriated to address crisis capacity.

The Independent Reviewer (IR) made 13 recommendations and requested a response from the Commonwealth by September 30, 2016 in the areas of Transitioning children from nursing facilities and large ICFs/IID; Individual and Family Supports Program; Case Management; Crisis and behavioral supports capacity; Integrated Day services; Supported Employment; Provider Capacity; and Licensing and Investigations.

A Status Conference was held with Judge Gibney in April. Discussion revolved around the successful legislative session and the waiver redesign; an update on the Quality Improvement Committee; progress with independent housing; progress related to diversion & transition of children in nursing facilities; ongoing work towards developing a single point of entry for ICFs/IID

Ms. Balak reported that DBHDS is in the process of negotiating the Outcome Timeless, with meetings occurring at least weekly. Focus is on Children in ICFs/IID; and, Quality Management. There are continued talks between the parties on addressing the needs of individuals with complex behavioral challenges and future discussions planned in the area of individuals with complex medical needs as well as integrated community living options.

Implementation of the Waiver Redesign has been delayed from July 1st to August 1st. Updates are shared regularly with stakeholders via email blasts and Medicaid Memos.

Ms. Balak noted that the Stakeholders are coming to the end of their 2-year term. The Commissioner will begin to reappoint this body by late summer or early Fall. A request was made to email Jae Benz if there is an interest to remain on the Board for another term or with a request to not be reconsidered. This will be taken into account when considering candidate nominations.

Stakeholder Feedback on Recommendations from 8th Report to the Court (Facilitated Discussion)

Connie Cochran, Assistant Commissioner of Developmental Services

Mr. Cochran facilitated a discussion, related to the Independent Reviewer's (IR) recommendations, by posing questions to the SA Stakeholder Group related to Case Management and Systems Capacity since both are closely linked within the Settlement Agreement and are interdependent upon the ultimate ability of the Commonwealth to comply with requirements embodied within the intent of the agreement. Both Case Management and Systems Capacity were reviewed in detail by consultants and are addressed in recommendations from the Independent Reviewer. A summary of the questions posed and the responses given are provided as an attachment

Public Comment

Ms. Fidura, a member of the Stakeholder Group, provided feedback related to providers and capacity. She stated that to a large degree there is the myth/assumption that every time a service cannot be found that the answer to the problem is capacity and this is what the Independent Reviewer is hearing. One way to address a "capacity issue" is for a provider and an individual to form a relationship and for a provider to develop services around the specific needs of that person. If you have relationship with families and they want new things then perhaps the provider can grow in that area because of the relationship. Ms. Fidura indicated that the good news about the waivers is that they are flexible and providers are pretty flexible too. Furthermore, if a provider is offered an opportunity with adequate amount of reimbursement, the Commonwealth will begin to see huge changes in service capacity.

Ms. Fidura stated that if providers have a good strong business base, including receiving adequate revenue, they may have sufficient capacity to try providing a service will less revenue return. It may not be necessary for the Commonwealth to look for new providers to create a new system focused on certain specific populations but concentrate instead on increasing the talent of current providers. Ms. Fidura concluded with maintaining that it is hard for a provider to start from

scratch because of a relatively small population. It will be important to continue to look at the high rate of staff turnover, the revenue cap, increases in health insurance and the new overtime laws. All of those challenges will affect the ability of providers to increase their capacity to serve individuals with more extensive support needs.

Closing Remarks

Dr. Jack Barber, Interim Commissioner for DBHDS

Dr. Barber closed the meeting with commending the Stakeholders for engaging in a remarkable discussion. It is a very intense time period surrounding the waiver redesign and changes in case management but all of that intensity so far has been about the mechanics. It really will become more of a huge culture change about how people get their services and the move to integration. People who are new to the services are going to expect more and this will be a challenge to both the system and the CMs. Our data systems will help us see if what we are doing is working and satisfying the outcomes we are striving for. The system 5 years from now will be looking very different than now. The greater flexibility and tilting towards integration will be further along and everyone around the table and the audience has the responsibility to make that happen.

Next Meeting: September 14, 2016 from 1-4:00 pm at the **Capitol Building, House Room 3**

Topics for next time: DBHDS will review 2 topics that work together to discuss. Stakeholders would like information on the specific plans for achieving the goals for children in Nursing Facilities and in ICFs/IID NH/ICF. Stakeholders have asked to receive the questions a few days in advance.

Adjournment – Adjourned at 3:50 pm.