



COMMONWEALTH of VIRGINIA

NELSON SMITH
COMMISSIONER

DEPARTMENT OF
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June 30, 2022

To: The Honorable Glenn A. Youngkin, Governor
The Honorable Janet D. Howell, Chair, Senate Finance and Appropriations Committee
The Honorable Barry D. Knight, Chair, House Appropriations Committee
Michael Maul, Director, Department of Planning and Budget

Fr: Nelson Smith, Commissioner, DBHDS *NS*

RE: Item 1.B.2.n.6., Chapter 1 Enactment Clause

Dear Senator and Delegate:

Pursuant to Item 1.B.2.n.6. of the Chapter 1, Acts of Assembly, Special Session I 2021, the purpose of this letter is to report on the development of programs served by state hospitals with dementia and is meant to satisfy both the December 1, 2021 requirement and the June 30, 2022 requirement. Specifically, the language states:

\$1,650,000 to the Department of Behavioral Health and Developmental Services (720) to expand a pilot program to serve approximately 60 additional individuals with a primary diagnosis of dementia who are ready for discharge from state geriatric behavioral health hospitals to the community and who are in need of nursing facility level care. Funding for the pilot program shall be dependent upon an agreement between the department and the Community Services Board in the jurisdiction the pilot program is located. The Department shall report to the Governor, the Chairs of the House Appropriations and Senate Finance and Appropriations Committees, and the Director of the Department of Planning and Budget on the design and implementation of the pilot program by December 1, 2021, with a report on the program's outcomes, including data on hospital readmissions and program sustainability by June 30, 2022..

Funds were allocated to DBHDS in an effort expand and replicate a pilot project for individuals in state psychiatric hospitals in need of nursing home care, specifically those with dementia. Valley Health Care partnered with DBHDS and Mount Rogers Community Services to support individuals leaving the state hospitals, but needing nursing care in February 2021. This project saw initial success in transitioning these individuals. These funds were allocated to replicate these project specifically for those with a primary diagnosis of dementia using this preliminary

data. As of Jan 31, 2022, the overall success of the program is outlined below (referrals are since January 31, 2021).

Referrals	Accepted	Admitted	Current Census	Acceptance Rate
127	58	50	37	45%

As of January 2022, only two individuals (four percent) were re-hospitalized within 30 days. This is well below the state 30-day readmission rate. Additionally, individuals admitted to this program were on the extraordinary barriers to discharge list (EBL) for an average of 21 days. DBHDS is planning to expand on these successes.

Process

DBHDS worked with local community services boards (CSBs) and nursing home partners in the Tidewater, greater Richmond, and Fredericksburg areas to identify new programs for implementation. While interest from nursing partners was positive initially, DBHDS vetted several nursing home partners who were unfortunately unable to follow through expectations of the program. One particular partner was unwilling to accept liability for patients, instead wanting DBHDS or the CSB to maintain liability. Other partners had interest in the program, but did not have capacity in their current homes to accommodate an expansion. As a result, DBHDS was unable to operationalize additional pilots until February 2022. DBHDS and its partners ultimately chose to pursue a new nursing home partnership with Western Tidewater CSB and Waverly Nursing Home, and to expand the Valley Nursing Home and Mount Rogers CSB.

Pilot Program Characteristics

The Nursing Home Pilot Program consists of a partnership between a local nursing facility and the CSB. The nursing facility agrees to create a unit for individuals with a primary diagnosis of dementia leaving the state psychiatric facility. In addition to the provision of beds, the program includes additional behavioral health staff and training.

The goals of the program include:

1. To provide appropriate placement for individuals needing nursing home level of care at discharge who have mental health needs/behavioral disturbances at baseline.
2. To support staff in nursing home settings by providing behavioral health expertise and hands on services and interactions
3. To reduce hospitalizations for individuals in nursing facilities with behavioral health needs by providing preventative interventions in home setting.
4. To assist in successfully transitioning patients from state psychiatric facility to nursing facility.

The below staffing suggestions are in addition to staff otherwise required in nursing homes. The staff will provide support for regional state hospital discharges to nursing facilities for up to 180 days post discharge. The staff would be hired, retained, supervised, and supported by the local CSB with funds from DBHDS. The partnership success is dependent on the nursing home and CSB working together and having ownership of staff in the project. Suggested staffing for the program includes:

Nursing Home Liaisons – Duties include but are not limited to: Providing assistance to individuals with day-to-day activities, monitor behavior, records and collect data on

individuals' progress, and communicate with treatment team, stakeholders, and DBHDS. Providing direct care to individuals in a one-on-one or group setting to implement skill acquisition and behavior reduction treatments as identified by but not limited to, licensed behavioral analyst. Collecting and recording data on individual behavior. In addition, assist with the training of individuals, stakeholders, and long-term care staff. Providing oversight for a safe and supportive environment for individuals, peer relationships, long-term care staff, and others. Carrying out clinical assessments and other administrative duties. Refer, monitor, coordinate, and advocate for services.

Specialized Geriatric BH Social Worker - Works entirely in the nursing home, may even be NH employee that is invoiced to the CSB. Provides NH social work duties including assessments, but has specialized behavioral health knowledge skills and abilities.

Quality of Life Activities Director - Works entirely in the nursing home may even be NH employee invoiced to the CSB. Provides activities to the individuals in the behavioral health unit. These activities are geared toward BH interventions and specialized geriatric activities.

Enhanced BH Tech (Hourly) - DBHDS would pay for the initial hire and training of the positions- these positions are as needed for higher intensity individuals as potential 1:1 for transition into the home. They would be funded by a Discharge Assistance Program (DAP) plan for those who needed it.

Project Update and Projected Outcomes

DBHDS executed the agreements with Mount Rogers CSB and Western Tidewater CSB for projects to begin in December 2021. The expected outcomes for programs are as follows:

1. Increased acceptance of state hospital patients to nursing facilities. With the support of this program, identified nursing home facilities will accept individuals who otherwise would have been denied due to history of mental health symptoms or behavioral disturbances.
2. Increased stability of individuals in nursing facility settings, and decrease in readmissions to psychiatric hospitals. Individuals served by this program will have a 30-day readmission rate of less than seven percent in each twelve month period. The state average is 8.8 percent.
3. Decrease number of days between an individual being identified as ready for discharge and the date of discharge from state facilities for individuals identified to need nursing home care by 10 percent.

Valley Nursing Home

Mount Rogers CSB executed an agreement to expand the Valley Nursing Home. Since December 2021, Valley has admitted five additional individuals with dementia to the Summit Program. None of the individuals admitted have been re-hospitalized. They are currently working within their building to add an additional 20 beds. As of June 16, 2022, they have accepted three additional individuals for the project.

Waverly Nursing Home

Western Tidewater CSB entered into an agreement with Waverly Nursing Home and began accepting admissions in March 2022. Since that time, they have admitted five individuals with dementia to the nursing facility. None of the accepted individuals have been re-hospitalized.

There are discussions of expanding the services with the organization that runs Waverly, YAD Nursing Group, to develop 15 dementia-specific beds in another facility. These beds would be part of a locked unit for those needing this level of care.

Conclusion

To effectively measure the success of these programs, DBHDS needs a full year of data. DBHDS anticipates an effective review of the programs and expansion of programs to be available by March 2023. DBHDS will continue to keep the General Assembly updated regarding the utilization and oversight of these funds. We continue to search our beds and partners for the process.

Cc: John Littel, Secretary, Health & Human Resources
Susan E. Massart
Mike Tweedy