

Update on State Hospital Bed Census, Crisis System Transformation, and Substance Use Disorder Services in Virginia

Behavioral Health Commission

September 22, 2021

Agenda

- I. Update on state hospital bed census crisis
- II. Crisis system transformation efforts and use of ARPA dollars
- III. Overview of funding for substance use disorder services

BED CENSUS CRISIS

Update on the state mental health hospitals

Status of State Hospital Civil TDO Admission Closures – All State Hospitals are Now Open

- On July 9, 2021 DBHDS ordered five of Virginia’s eight adult state hospitals to close civil TDO admissions to reduce their bed capacity and build staffing levels.
- No existing patients were discharged in an unsafe manner. As staffing improved, hospitals reopened on a limited basis and beds are being incrementally increased.
- DBHDS used emergency facility funds to procure additional contract staff, and for direct care recruitment and retention bonuses. ARPA funds will extend the bonuses to the end of the fiscal year.
- Called on private hospitals to make all available beds for TDO treatment open to accept all types of patients.
- Virginia needs every possible step down and long-term care facility to accept patients who are ready for discharge from state facilities.
- **All state hospitals are now reopened.**

Staffing Levels Continue to be a Challenge

- **Staffing vacancies are well over 20% and up to 53% in facilities across the Commonwealth.**
- Current direct care compensation falls well below market value.
- DBHDS had over 1,000 state facility vacancies in March 2019. These shortages have been exacerbated by the pandemic and now stand at **1,604**.
- Facilities are funded to operate at 90% staffing, but with the current vacancies, state hospitals are operating at direct care staffing levels as low as 60-70% in some facilities.
- At the same time, state hospitals are frequently operating at 100%+ bed utilization.
- Safety of both staff and patients is a significant and serious concern.

	CCCA	CH	CSH	ESH	HDMC	NVMHI	PGH	SEVTC	SVMHI	SWVMHI	VCBR	WSH
Direct Care (DSAs, LPNs, RNs)	55%	55%	26%	48%	37%	13%	46%	21%	30%	18%	41%	46%
Practitioners (internists, psychiatrist)	0%	0%	8%	29%	0%	0%	20%	100%	33%	0%	100%	4%

Picture of Bed Census Given Staff Shortages

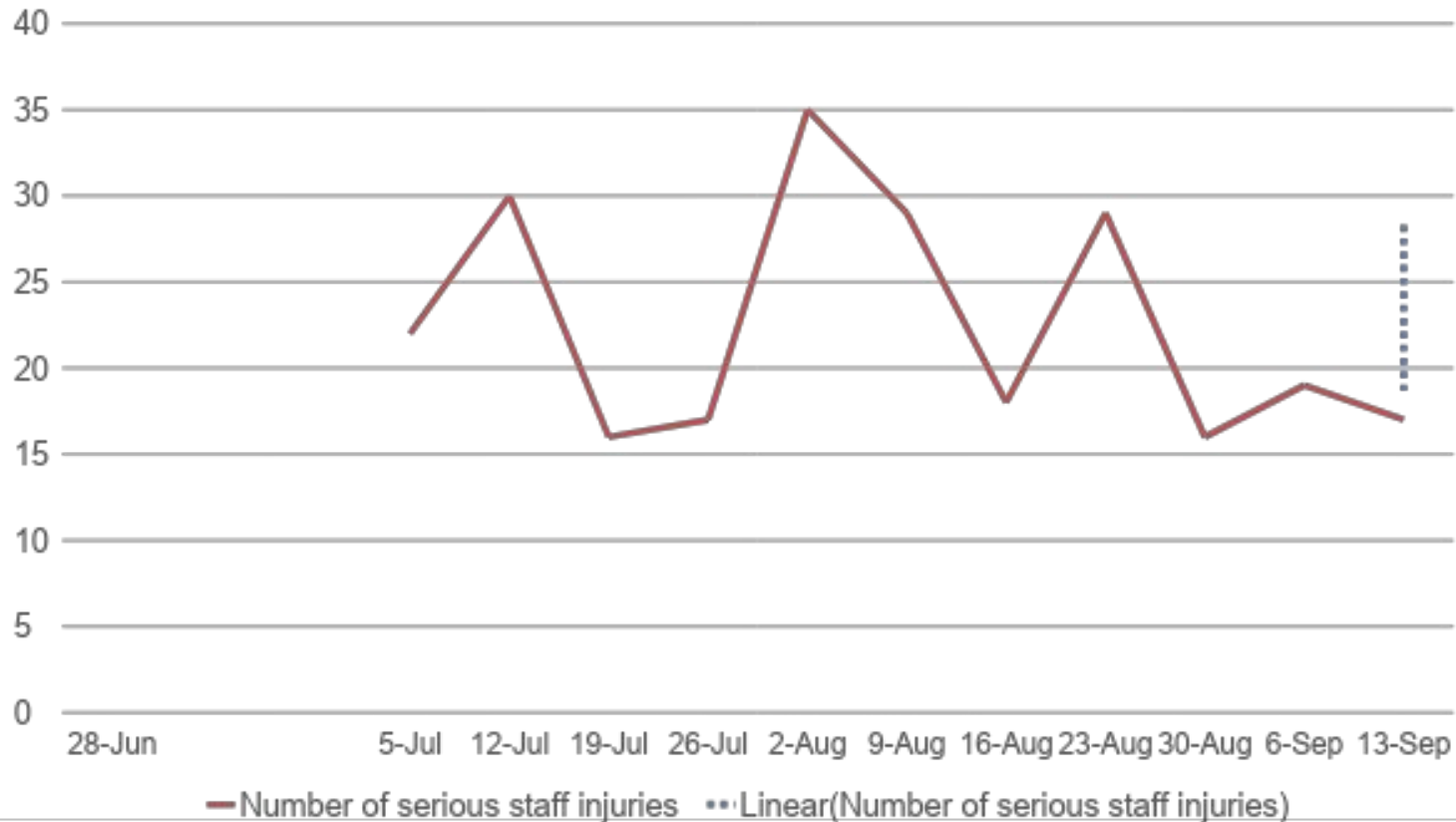
Date	Total Beds (max)	Staffed Beds open to civil and forensic TDOs*	Unstaffed beds	Current Census
9.17.21	1,328	1,080	248	1,062

Facility	Total Beds (max)	Staffed Beds open to civil and forensic TDOs*	Unstaffed beds	Current Census
CAT	110	85	25	84
CSH	166	133	33	136
ESH	302	242	60	238
NVMH	134	134	0	128
PGH	123	85	38	84
SVMH	72	54	18	53
SWVMH	179	179	0	170
WSH	246	172	74	169
	1,328	1,080	248	1,062
			18.67%	

*Staffed beds may remain understaffed versus the staffing grid at a particular facility and/or unit. In that case, the staffing level to reduce incidents/injuries has been reached and is continuing to be monitored.

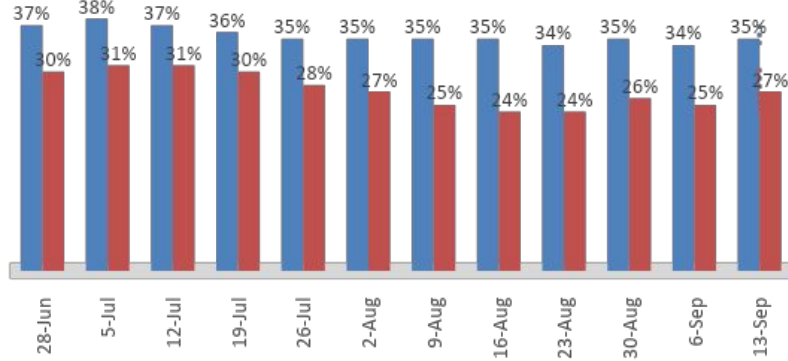
This is a point-in-time picture of the census. The census fluctuates daily. There are times when all of these hospitals are operating at 100 percent of their staffed capacity.

Serious Injuries are Trending Downward



Vacancy Rate Changes by Position

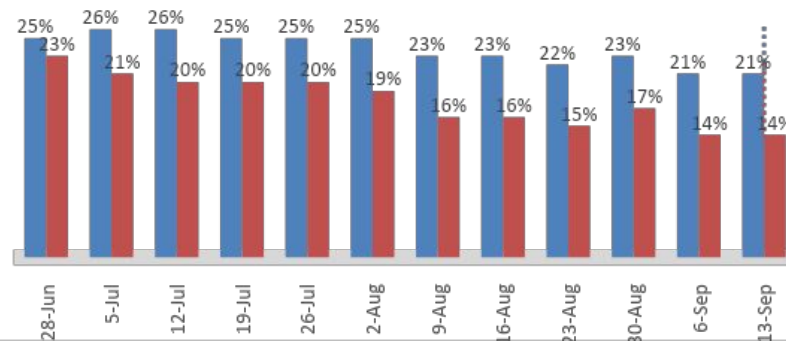
Direct Care Associate Vacancy Changes



LPN Vacancy Changes



RN Vacancy Changes



■ Vacancy Rates

■ Vacancy Rates including Contract Workers

New Hires are Increasing While Separations Decrease



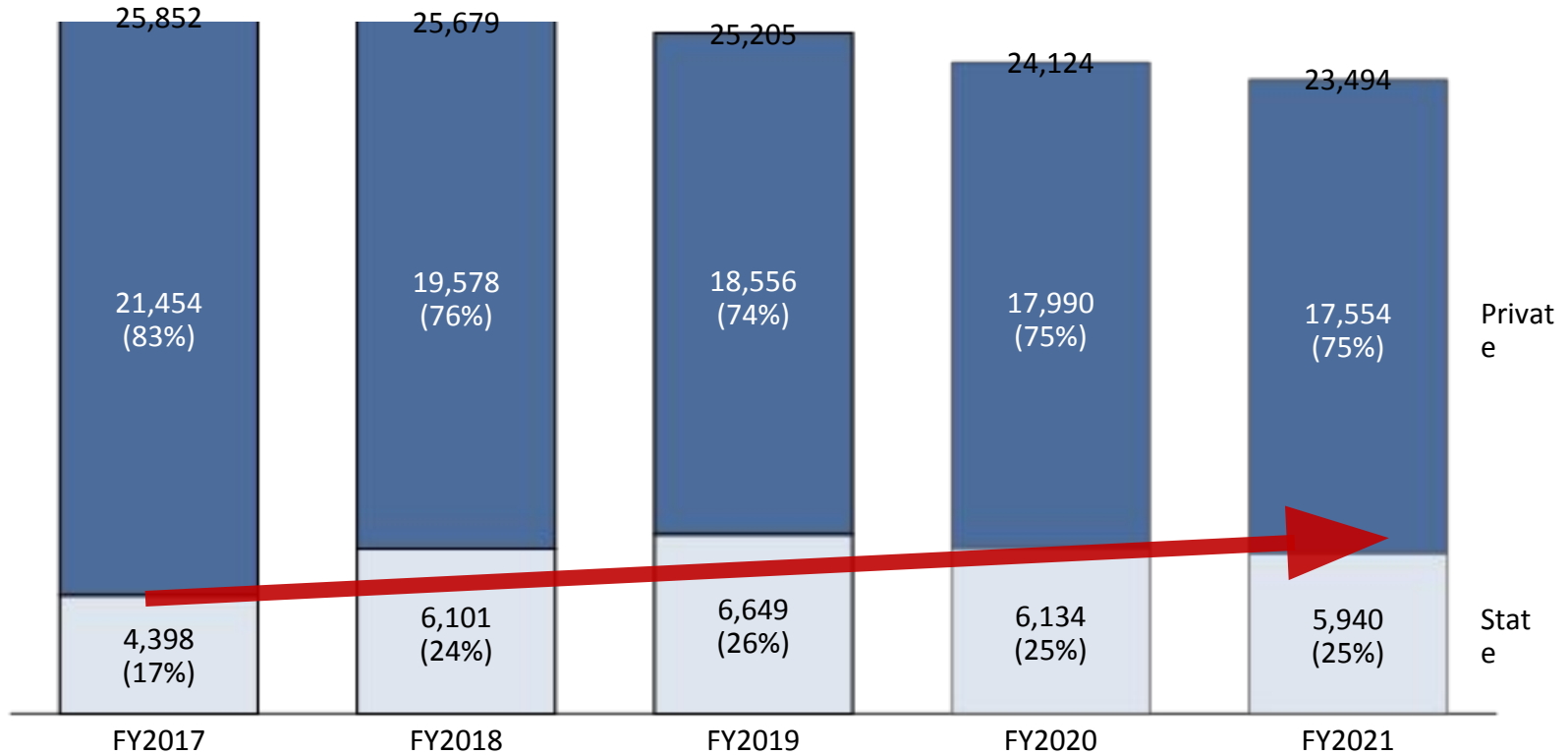
New Funds to Strengthen Staffing and Census

- 2021 Special Session allocated bonuses for Direct Care Staff at Behavioral Health Hospitals and Training Centers
 - FY 2022- \$45 million for bonuses to direct care staff
 - FY 2023- Governor's intention to fund \$76.9 million for salary adjustments
- ARPA funds will expand pilot programs for individuals with dementia who are ready for discharge and need nursing care
 - FY 2022- \$1.65 million
 - FY 2023 – Governor's intention to fund \$1.65 million
- \$5M in ARPA funds for permanent supportive housing in Northern Virginia to assist with bed crisis at state facilities

Status of Contracts with Private Hospitals

Contract	Description	Projected Annual Cost	Est # served as of 8/31/21
Contract for ALF Services at Commonwealth Senior Living Fellowship CSU	Reduce Geriatric census by diversion/step down of eligible patients to assisted living facility	\$250,000	65
CSU Agreement (exhibit D, not contract)	Adult step-down from state hospital during COVID	\$810,000	ended 6/2021
Inpatient Psychiatric Beds for Adults and Geriatrics with Williamsburg Pavilion	Agreement with CSB CSUs for diversion	\$48,000	8
Gateway Homes TGH and PSH	Reduce Adult Bed Census through diversion or step down of eligible TDOs and long term stays	\$500,000	95
Three CSB-run ALFs	Transitional Group Homes	\$4,200,000	153
Jewish Family Services/Guardianship	ALFs for state hospital discharges	\$4,368,000	156
Inpatient Psychiatric Beds for Children and Adolescents with UHS	Provide guardianship services for those discharged from state facilities	\$600,000	133
Mt Rogers Nursing Home	Provide inpatient beds for diversion of children who would otherwise go to CCCA	\$250,000	100
Mount Rogers CSB	Provide nursing home beds for those with extraordinary BH needs by providing specialized BH staff at the nursing home	\$900,000	37
Western Tidewater CSB	Interdisciplinary older adult specialty team (Exhibit D)	\$700,000	In development
Carilion Comprehensive Psychiatric Emergency Program (census pilot)	Memory care beds/specialized interdisciplinary team for dementia care (Exhibit D)	\$1,630,000	In development
Riverside Addiction Services	Divert individuals in ED from inpatient hospitalization	\$2,500,000	In development
	Provide detox. IOP, and PHP in order to divert		

TDO Admissions by Fiscal Year



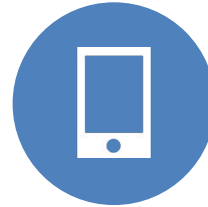
CRISIS SYSTEM TRANSFORMATION

Update on mobile teams and crisis receiving centers

Building and Expanding Crisis Receiving Centers

- Crisis receiving centers (CRCs) allow for individuals to walk in for service or be brought in by law enforcement, either voluntarily or involuntarily.
- Three main components of CRCs include (either co-located or in close proximity):
 1. Urgent care behavioral health services
 2. 23-hour observation beds
 3. 16-bed residential crisis stabilization unit

Four Core Elements of Crisis System Transformation



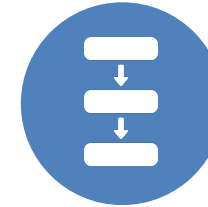
High-tech Crisis Call Centers



24/7 Mobile Crisis



Crisis Receiving Centers



Essential Principles & Practices

Call Center - \$5M (data platform); \$4.6M for call Center Staff (FY22)

Mobile Crisis- \$16.9M (FY20-FY22)

CRCs- \$7M (BG), 4.2M (CITAC-\$2.1M Ongoing and \$2.1M one time)

New Investments in Crisis System Transformation

- Funding will be distributed in 2-3 months based on:
 - Gaps in the system identified from proposals submitted through a block grant RFP process
 - Looking at unmet statewide need that will directly impact state hospital census

	State ARPA funds	CAA & ARPA Supplemental BG	TOTAL
	\$10.0M Total		
Mobile Crisis Teams	\$6.5 million	N/A	\$6.5 million
Crisis Receiving Centers	\$3.5 million	\$7 million	\$10.5 million

**Both the CAA and ARPA supplemental BG funds include a 5% Required Set Aside*

SUBSTANCE USE DISORDER SERVICES

Overview of investments to date

ARPA and Supplemental Block Grants

- ARPA State and Local - Special Session 2021
 - Expand community-based substance use treatment services
 - FY 2022-23: \$5 million to expand treatment services
 - Current discussions include: transition aged youth services, SUD services development and training for providers serving individuals with intellectual Disability, robust service expansions in areas of SUD services not already covered through opioid funds (Other substances)
 - FY 2023-24: \$5 million (Governor's Intention)
 - Support recovery residences
 - FY 2022-23: \$10 million to make grants to members of the Virginia Association of Recovery Residences for recovery support services
- Supplemental Block Grants (CAA and ARPA)

POCKET SLIDES

Special Session II 2021 Funding for State Hospitals

Personal Protective Equipment at State Facilities

- FY 2022- \$1.2 million for PPE
- FY 2023- \$1.2 million for PPE (Governors' intention)

Ventilation and Water Sewer Systems at State Facilities

- FY 2022- \$50 million for renovation/replacement of ventilation and water or sewer systems at state facilities