

# Discussion of potential 2024 staff work



**Executive Committee** 

June 3, 2024

### **Outstanding questions after BHC May meeting**

- How could additional focus be placed on healthcare workforce issues?
- Are monitoring efforts comprehensive enough to drive accountability?
- What programs should be prioritized for monitoring and evaluation?
  - Can we get the bandwidth to monitor Permanent Supportive Housing (PSH)?
  - Should monitoring efforts be prioritized toward STEP-VA or PSH?
  - Are there opportunities to drill down further into STEP-VA this year?
- What should be the scope of a study on assault & battery against law enforcement?
   Is the most recent legislation a suitable legal vehicle that requires more buy-in from stakeholders, or should VA find a new legal mechanism by looking at other states?



### Workplan revisions made to address questions raised in May

Potentially not feasible in 2024 Added since May

BHC roles	May 2024	June 2024 (revised)
1. Tracking current efforts	<ul> <li>Crisis services implementation</li> <li>Healthcare workforce programs</li> </ul>	<ul> <li>Crisis services implementation</li> <li>Healthcare workforce programs</li> <li>Collaborate with VHWDA</li> </ul>
2. Monitoring program implementation	<ul> <li>Key system metrics</li> </ul>	<ul> <li>Key system metrics         <ul> <li>Private hospitals capacity for TDOs</li> </ul> </li> <li>Program monitoring schedule</li> </ul>
	<ul><li>Permanent supportive housing</li><li>Follow ups on STEP-VA</li></ul>	<ul><li>Permanent supportive housing</li><li>Follow ups on STEP-VA</li></ul>
3. Conducting research	<ul> <li>Aligning crisis services</li> <li>Study of HB 267 / SB 357*</li> </ul>	<ul><li>Aligning crisis services</li><li>Law enforcement training</li></ul>
4. Building and maintaining knowledge	<ul> <li>BHC meetings at service locations</li> <li>BH 101 training</li> <li>Youth mental health learning cohort</li> </ul>	<ul> <li>BHC meetings at service locations</li> <li>BH 101 training</li> <li>Youth mental health learning cohort</li> <li>Competency and restoration policy academy</li> </ul>
5. Facilitating legislative and budget actions	<ul> <li>BHC legislative agenda</li> </ul>	<ul> <li>BHC legislative agenda</li> </ul>

Potential workstreams

\*Referred from Virginia Disability Commission



### Proposed 2024 BHC workplan

BHC roles / staff workstreams	Source	<b>Tentative completion</b>
1. Tracking current efforts		
a. Crisis services implementation	Budget language, SB 574	December
b. Healthcare workforce programs	Staff recommendation	September
c. Collaborate with VHWDA	Staff recommendation	December
2. Monitoring program implementation	BHC directed	
a. Key system metrics		July, October
<ul> <li>Private hospitals capacity for TDOs</li> </ul>		
b. Program monitoring schedule		September
c. Permanent supportive housing		October
d. Follow ups on STEP-VA		December
3. Conducting research		
a. Aligning crisis services	SB 574	November (interim), October 2025 (final)
b. Law enforcement training	Staff recommendation	TBD
4. Building and maintaining knowledge	BHC directed	
a. BHC meetings at service locations		September
b. BH 101 training		October
c. Youth mental health learning cohort		November
d. Competency and restoration policy academy		June
5. Facilitating legislative and budget actions		
a. BHC legislative agenda	BHC directed	November/December



#### **Placing greater focus on healthcare workforce**

- Collaborate with Virginia Healthcare Workforce Development Authority (VHWDA) to learn about and support efforts to address workforce crisis
   Del. Willett can help identify opportunities as Chair of VHWDA
- Foster communication and coordination across entities
  - Undertake collaborative initiatives
  - Share findings and information
  - \_ Sponsor legislative action, if needed

Staff lead: Nathalie Molliet-Ribet Scheduled completion: December 2024, ongoing



### Driving accountability by tracking changes in desired outcomes

- Continually improve key metrics reporting by adding indicators of success
  - E.g., start tracking underutilization of private psychiatric hospital beds identified by JLARC in 2023 to identify whether admissions trends are changing

Staff lead: Nathalie Molliet-Ribet Scheduled completion: Quarterly, ongoing



# Adopting schedule of program monitoring and evaluation to ensure efforts are comprehensive and efficient

- BHC could develop rolling list of programs to monitor and evaluate
  - Comprehensive list would include major programs and initiatives funded by the GA
  - \_ All member suggestions would be captured and considered
- Prioritization criteria could be used to determine scheduling (e.g., funding alignment with BHC strategic goals)
- Initial list and schedule would be approved by BHC members
  - Updated annually as needed
- With a pre-approved schedule, staff could complete work on one program and efficiently transition to the next without having to wait for the next annual workplan

Staff lead: Nathalie Molliet-Ribet Scheduled completion: September 2024



# Adding bandwidth to monitor and evaluate Permanent Supportive Housing (PSH)

- COVES fellow will conduct background research and first stages of program monitoring and evaluation through end of August
- Additional BHC position will conduct all monitoring
  - Will wrap up any remaining PSH activities
  - Targeting August 2024 hiring date

Staff lead: Kiara Brown / TBD Scheduled completion: October 2024, ongoing



# Monitoring and evaluation efforts on STEP-VA currently limited due to lack of reliable data and accepted measures

- 2023 BHC report on STEP-VA found that the program
  - has not fully achieved its goal to expand access, in part due to funding constraints
  - lacks adequate metrics and data to determine whether quality has improved
- Data and metrics needed to further evaluate STEP-VA will not be available until 2025
- 2024 budget language offered by BHC members directs DBHDS and Secretary of HHR to make data and metrics available, and to understand funding gap
  - Develop all final STEP-VA performance measures and benchmarks for all services, and ensure that performance measures are designed to capture outcomes in CSB performance contracts Identify the upmet need for each STEP VA service and estimate the peet of satisfying the need
  - Identify the unmet need for each STEP-VA service and estimate the cost of satisfying the need
     Report to BHC by December 2024
- DBHDS executing on system transformation to obtain reliable data that can be used to measure outcomes; expected completion December 2024

Staff lead: Nathalie Molliet-Ribet Scheduled completion: December 2024



\*Tentative, subject to contents of final budget

### Researching alternatives to affirmative defense for individuals with mental illness and other disorders\* charged with ABLEO does not appear needed at this time

- 2024 legislation (affirmative defense) garnered support from broad array of stakeholders compared to prior years
  - Most law enforcement did not oppose
  - GA passed House Bill 267 (Watts) and Senate Bill 357 (Boysko) in 2024, Governor vetoed
- Additional information about other states' practices unlikely to facilitate passage
- Meeting between patrons and opposed stakeholders could help alleviate remaining stakeholder concerns

\*Other disorders may include neurocognitive disorders and neurodevelopmental disabilities; ABLEO: assault and battery against a law enforcement officer



## Examining how to expand LEO training could help improve interactions with and reduce arrests of individuals with a mental illness and other disorders\*

- Affirmative defense legislation would help individuals with a mental illness after they have been arrested for ABLEO
  - Still face negative impact of arrests and potential incarceration
- Expanded crisis services should help reduce how frequently law enforcement is involved with individuals in a mental health crisis or with another disorder\*, and charges for ABLEO
- When law enforcement needs to be involved, training such as CIT can help minimize negative interactions and circumstances that can lead to an arrest
- Unclear to what extent law enforcement receives adequate training, and what barriers might prevent training
  - BHC staff could examine this question as part of its research on aligning crisis services with the civil admissions process

\*Other disorders may include neurocognitive disorders and neurodevelopmental disabilities; ABLEO: assault and battery against a law enforcement officer

Staff lead: Claire Mairead Scheduled completion: November 2024, interim

**BHC +** 11

### Appendix



# Mapping current efforts and tracking progress on crisis services and workforce programs for behavioral health care providers

- BHC staff to develop wholistic map of efforts aimed at developing crisis system and obtain detailed progress updates
  - BHC offered budget language directing HHR Secretary to report on plan for spending 2023-2024 crisis funding by December 2024, with semi-annual updates\*
- Leveraging JCHC work to identify programs that bolster behavioral health care workforce and to assess their performance
  - \_ JCHC reviewing all health care workforce programs, including behavioral health, in 2024
- Collaborate with VHWDA to share knowledge and present information to BHC members

Staff lead: Nathalie Molliet-Ribet Scheduled completion: December 2024, ongoing

\*Tentative, subject to contents of final budget



# Monitoring and evaluating performance of permanent supportive housing

- Permanent supportive housing (PSH) integrates basic behavioral health services and primary care with stable housing for individuals with a serious mental illness
- Effective implementation can promote wellness, prevent homelessness, avoid unnecessary hospital admissions, and facilitate discharge from inpatient care
- PSH has received increasing funding through a variety of agencies and programs
   \$70M through DBHDS in FY24, up from \$17M in FY21
- Some outcomes are tracked, but no comprehensive evaluation of all PSH components
- BHC staff to analyze utilization and outcome data across funding streams and evaluate effectiveness of PSH in improving long-term outcomes
  - Identify potential improvements needed
  - Help evaluate whether / how much additional funding should be invested

Staff lead: Kiara Brown / TBD Scheduled completion: October 2024, ongoing



# Reporting on key metrics with objective, timely analysis of systemic issues of interest to members

- Data and objective analysis has not been consistently available to legislators wishing to understand major issues facing the behavioral health system
   E.g., state hospital capacity and waitlists; TDO patients in private hospitals
- Multiple metrics have been tracked consistently since 2022 to form a baseline, identify trends, and provide early warnings
- Staff will continue working with BHC members and agency staff to identify opportunities to improve report and keep metrics relevant
  - Balance against reporting burden on agencies

Staff lead: Nathalie Molliet-Ribet Scheduled completion: Quarterly, ongoing



# Researching how to align civil admissions laws and processes with Virginia's evolving crisis system

- Virginia has invested millions to build a crisis response system in recent years but has not fully modernized the statutory/regulatory infrastructure needed for services to be fully used
- Civil commitment process appears especially misaligned with delivery of crisis services, creating barriers for treating patients in least restrictive environment
- SB 574 (Deeds) directs the BHC to study how to effectively align current civil admissions laws and processes with Virginia's crisis response system
- Staff will examine how to optimize the use of crisis services for individuals under ECO/TDO

   Identify key statutory, regulatory, licensing, training, and reimbursement pain points and make
   recommendations to address them
- Interim briefing November 2024, final briefing fall 2025

Staff lead: John Barfield, Nathalie Molliet-Ribet Scheduled completion: November 2024, interim



# Enhancing knowledge of behavioral health delivery system, major issues, and potential solutions

- Hold 3 BHC meetings at provider locations to better understand treatment settings and consumer needs
  - E.g., CSB, crisis receiving center; inpatient hospital; regional jail with mental health services
- Provide members with "behavioral health 101" training
  - Staff and subject-matter experts present key information about the behavioral health system and major issues
- Staff invited to participate in one of 8 state "learning cohorts" on funding youth mental health services
  - Team includes BHC, Voices for Virginia's Children, ChildSavers
  - National project funded by Annie E. Casey Foundation

Staff lead: Nathalie Molliet-Ribet Scheduled completion: December 2024, ongoing



### Facilitating legislative and budget action

- BHC and peer organizations (e.g., JLARC, JCHC, Crime Commission) to present relevant research findings and recommendations to improve Virginia's system
   BHC members vote throughout the year on which recommendations to adopt as part of the Commission's 2025 legislative agenda
- Finalize BHC recommendations & agenda in November 2024, by prefiling deadline
- Staff to work with DLS on prefiling and drafting bills, and with money committee staff on budget language
  - Support members throughout the session with talking points, presenting to committees and redrafting, as needed

Staff lead: Nathalie Molliet-Ribet Scheduled completion: December 2024, session





Next meeting June 12, 2024 at 2:30

Eanes Pittman Public Safety Training 6610 Public Safety Way Chesterfield, VA 23832

Visit bhc.virginia.gov for meeting materials