

# Training Center Community Integration Project

Status Update

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# Census Reduction Goals

Fiscal Year	SVTC	SEVTC	NVTC	SWVTC	CVTC	Indiv. D/C**	Waivers in SA
2012	40	n/a	n/a	0	20	60	60
2013	84	25	25	15	35	184	160
2014	111		64	20	25	220	160
2015			64	20	50	134	90
2016				40	56	96	85
2017				40	50	90	90
2018				38	50	88	90
2019					35	35	35
2020					26	26	26

\*\*More individuals are anticipated to be discharged than waiver slots because some individuals choose MFP slots, some choose ICFs, and natural deaths occur over the period of the agreement.

# Moves July 1 2012-January 2 2013

Name of TC	Census	Moves 7-1-12 through 6-30-13	Group Home	Sponsored	ICF	NF	Returned to TC	Family/ Own Home	Homes with 5 or more	More than 1 Program on the same site
CVTC	315	14	4	3	6	0	0	1	1	7
NVTC	148	4	3	1	0	0	0	0	2	0
SEVTC	92	12	3	0	8	1	0	0	0	7
SVTC	166	29	27	0	0	2	1	0	13	0
SWVTC	167	6	1	4	0	0	0	1	0	0
Total	888	65	38	8	14	3	1	2	16	14

**DBHDS**

Virginia Department of  
Behavioral Health and  
Developmental Services

# **Southeastern Virginia Training Center Community Integration Project**

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# As of January 4, 2013

- Current census is 92
- Construction of 15 homes completed
- 54 individuals living in 11 cottages
- Old cottages on the property will be demolished once moves have been completed

# Census Reduction Goals

<b># of individuals moving</b>	<b>Community Program</b>	<b>Target Move Date</b>
3	W. Tidewater ICF/ID	Feb/March 2013
3	Hampton/Newport News ICF/ID	Feb/March 2013
8	Virginia Beach ICF/ID	Early Spring 2013
9	Chesapeake ICF/ID	Early Summer 2013

# SEVTC Con't Movement

- There are 14 additional families who have indicated they are willing to have their loved one moving into a community setting.
- Approximately half of these individuals will require more support than the current waiver offers and/or specialized services such as increased staffing, START, or 24 hour access to nursing services.

## **Planning and Transition from Training Centers and Case Management,**

- Individual Review study (Individual Reviews) focused on fifty-nine individuals
- Sample of thirty-two individuals was randomly selected
- A monitoring tool was developed and implemented
- Reviews were completed by a two-person team of experts
- Format included visits, interviews, observation and document review



The Reviewer stated he “is pleased to report that the Commonwealth has demonstrated a good faith effort to comply with the Agreement’s requirements that have been monitored. Considerable progress has been made.”

## **Discharge Planning and Transition from Training Centers**

- has made impressive progress.
- New discharge and post-move monitoring processes were implemented on time at all the Training Centers

Positive outcomes related to the individuals' moves:

- Increased skill development
- more participation in community integration activities
- increased family involvement
- reduction in targeted behaviors
- more choices given to individuals

Positive outcomes related to the individuals' homes were:

- (95.8%) of the 24 individuals with identified need had been provided all needed supports for adapted environ. and equipment;
- (96.9%) of their homes were free of any safety issues;
- (100%) of their homes were clean and had adequate food and supplies; and
- (92.3%) of their homes were located near community resources.

Monitor implementation of service plan to ensure timely additional referrals.

Ensure that staff are aware of and monitor the major side effects of psychotropic medications.

Ensure that Personal Support Team (PST) and case managers considering recommending more integrated day activities (supported employment etc.).

Ensure that the pre-move monitoring and post-move monitoring process evaluates and verifies individuals are offered meaningful opportunities to discover interests.

Ensure that PST and case managers provide reliable information to individuals and ARs regarding community options

including connecting with peers and their families, who are already living the in community.

Ensure that all of an individual's medical practitioners are identified before the individual moves.

Strengthen service provider staff training and monitoring systems to support the health and wellness of individuals with the most complex needs

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including connecting with peers and their families, who are already living the in community.

Ensure that all of an individual's medical practitioners are identified before the individual moves.

Strengthen service provider staff training and monitoring systems to support the health and wellness of individuals with the most complex needs

# Questions?

Thank you all for coming today

Any Questions?

# SVTC Campus Changes

Status Update

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# Staffing

- When closure first announced, lost substantial number of staff
- Staffing has stabilized
  - Commitment of some staff to remain with individuals until discharged
  - Some employees eligible for WTA
  - Implementation of a Progressive Retention Bonus Plan
- Highest turnover in direct care staff; now stabilized from 17 per month to 7 per month

# Staffing Reductions

- Layoffs will begin in early Spring and will align with census reduction
- Employees continue to receive:
  - Development of Career Center – offers training, counseling and use of computers
  - Regular communication by administration
  - Career counseling
  - Certified Nursing Assistant courses offering
  - Job fairs

# Building Closures

- As a result of census reduction and layoffs, facility has closed buildings
  - Building 93, Cottage 21
  - Several cottages are partially closed
- Crepe Myrtle building (Bldg 82) – Program Support Services

## Continued Commitment to indiv's. living at SVTC

- Facility had successful CMS survey week of November 8, 2012
- Substantiated abuse/neglect cases reduced from 31 in 2011 to 9 in 2012
- Overall incidents reduced in 2012 from 170 for first 6 months to 127 for second 6 months (25% reduction)