

SB176/HB888 Workgroup on Placements in Virginia for People with Neurocognitive Disorders and Neurodevelopmental Disabilities

Secretary of Health and Human Resources

Welcome and Introductions – HHR Secretary Janet V. Kelly

Overview of SB176/HB888 workgroup charge, reenactment language, and Joint Legislative Audit and Review Commission (JLARC) report

Dr. Alexis Aplasca, Senior Clinical Advisor for Behavioral Health Transformation, Office of the Secretary, Health and Human Resources, and Deputy Commissioner for Clinical and Quality Management, DBHDS

Current Processes and Programs

- Review current Temporary Detention Order (TDO) and Involuntary Admission process
Curt Gleeson, Assistant Commissioner, Division of Crisis Services, DBHDS
- Programs currently operated by DBHDS and CSBs to support individuals with neurodevelopmental disabilities and neurocognitive experiencing behavioral health challenges

Heather Norton, Acting Deputy Commissioner, Community Services, DBHDS

Suzanne Mayo, Assistant Commissioner, Division of Facilities Services, DBHDS

Breakout Discussions and Report Back to Workgroup

Next Steps/Adjourn

Workgroup enactment language:

“That the Secretary of Health and Human Resources shall convene a work group of relevant stakeholders, including representatives from local community services boards, the Virginia Hospital and Healthcare Association, and the Office of the Executive Secretary of the Supreme Court of Virginia to (i) evaluate the current availability of placements for individuals with neurocognitive disorders and neurodevelopmental disabilities who would otherwise be placed in state psychiatric hospitals; (ii) identify and develop placements and services other than state psychiatric hospitals that would better support such individuals, especially individuals whose behaviors or symptoms are solely a manifestation of such disorders and disabilities, including through enhanced Medicaid reimbursements and a Medicaid waiver for individuals with neurocognitive disorders; (iii) specify any additional funding or statutory changes needed to prevent inappropriate placements of such individuals in state psychiatric hospitals; (iv) provide recommendations for training of magistrates and community services boards related to the implementation of this act; and (v) report the work group's findings and recommendations to the Chairmen of the House Committee on Appropriations, the Senate Committee on Finance and Appropriations, the House Committee on Health and Human Services, and the Senate Committee on Education and Health by November 1, 2024.”

Discussion Questions

1. How do the treatment needs of individuals with primary diagnoses of neurocognitive disorders and neurodevelopmental disabilities differ?
2. What are the top three most significant barriers and needs in Virginia's system of care for people with neurocognitive disorders and neurodevelopmental disabilities?
3. What supports (e.g. regulatory changes, licensing changes, etc.) do existing congregate care residential settings (residential treatment, group homes, sponsor homes, family homes, assisted living facilities, nursing homes) need that they don't currently have to admit and successfully support individuals with neurocognitive disorders when they exhibit challenging behaviors?
4. Same question as above but for individuals with neurodevelopmental disabilities?
5. What programs and services have you heard about or experienced in Virginia that have been effective or successful that you would like to see have greater access or be expanded? What about in other states?