

### **Summary: Implementation of STEP-VA**

#### WHAT WE FOUND

# First step has been implemented with positive results, but goals have not been fully achieved

All 40 CSBs have implemented step one of STEP-VA, same-day access to behavioral health assessments, reducing wait times for individuals who previously had to schedule appointments up to 40 days in advance. Nineteen of the 20 CSBs that currently track assessment data report assessing at least 70 percent of individuals on the day they walk in during designated hours. However, the number of hours and locations available for

same-day assessments varies across CSBs, and it is not clear whether the availability of same-day assessments meets community needs.

Although consumers' needs are assessed more rapidly, they are not necessarily receiving needed follow-up services more quickly after the assessment. Some CSBs report they are struggling to provide follow-up services within the 10-day goal, such as outpatient behavioral health services or case management (steps three and eight). Additional funding for outpatient services was included in the FY20 budget.

### Second step to be implemented on time, but could require significant changes that detract from future steps

#### WHY WE DID THIS STUDY

Virginia's community behavioral health system is two years into the four-year implementation timeline for STEP-VA. The General Assembly directed JLARC to review the initial implementation and the plans to successfully implement STEP-VA in the future.

#### **ABOUT STEP-VA**

STEP-VA is a long-term initiative designed to improve the community behavioral health services available to all Virginians. Virginia has appropriated a total of \$60 million through FY20 to begin implementation. All 40 CSBs in Virginia are statutorily required to provide all STEP-VA services by July 2021.

CSBs are on schedule to begin step two by July 2019, which will provide a primary care screening to consumers at higher risk for physical health issues. All 40 CSBs began receiving funding to check the blood pressure and body mass index of consumers with serious mental illness or serious emotional disturbance. After this initial change is fully operational, CSBs will be required to expand primary care screenings to all consumers, but CSBs are concerned that the work required to do this will detract from other, higher priority STEP-VA services, such as expanded outpatient and crisis services.

# Sufficient oversight and coordination by DBHDS are necessary for effective implementation

Successful implementation of STEP-VA requires strong central leadership and coordination, but the Virginia Department of Behavioral Health and Developmental Services (DBHDS) did not have a full-time staff person dedicated to STEP-VA for the first 18 months. The agency hired a STEP-VA project manager in February, but senior leadership is still provided by the commissioner and chief deputy commissioner, who also are leading several other major initiatives and overseeing agency operations. Initial

cost estimates for STEP-VA included funding for central oversight, but all of the funds appropriated to date have been spent to provide services at CSBs, as directed by the Appropriation Act.

Insufficient central leadership has led to fragmented communication between DBHDS and the CSBs. Additionally, DBHDS distributed funding to the CSBs for the first two steps without understanding and accounting for each CSB's current capacity to meet its community's needs. Providing strong leadership and aligning funding allocations with needs are essential to achieving STEP-VA's goal of providing consistent access to quality behavioral health services across the Commonwealth.

## Effectively planning for and implementing remaining steps requires more time

DBHDS and the CSBs are halfway through a four-year implementation timeline, but seven of the nine steps remain to be implemented. Given the scope of this transformation at all 40 CSBs, the current deadline is likely too short to effectively plan and implement each step. Rushing the remaining steps risks ineffective implementation and eroding progress made on the first two steps. Effective planning includes the completion of requirements, performance measurements, and funding allocation plans before money is spent.

CSBs can continue making progress on meeting their most critical needs in the short-term even though full STEP-VA implementation requires more time. DBHDS can reprioritize the remaining steps so that the services needed most can be funded and implemented while planning continues on the remaining steps.

## WHAT WE RECOMMEND Legislative action

- Allow DBHDS to use a portion of future STEP-VA funding to support central oversight and coordination functions at DBHDS.
- Extend the deadline for all services to begin at CSBs until July 1, 2022.
- Require DBHDS to complete the requirements, performance measures, and funding allocation plans for each step before the Department of Accounts releases funding.

#### **Executive action**

- DBHDS should work with CSBs to develop metrics that will measure if consumers are able to be assessed on the same day they visit a CSB, and whether same-day access hours are sufficient at each CSB.
- DBHDS should pilot phase two of primary care screening at a subset of CSBs before initiating it at all 40 CSBs.
- DBHDS should dedicate a full-time senior staff position to oversee and coordinate STEP-VA implementation.
- DBHDS should prioritize the implementation of remaining steps based on CSB needs.

The complete list of recommendations is available on page v.