	Alth Support Team (RAFT) ADSD/RAFT Dr. Bridgett Whitehead 571-357-0274
Program Purpose	Discharge older adults from psychiatric hospitals to long-term care communities and divert older adults from admission to psychiatric hospitals, ensuring equal access to older adults across the region.
Program Information	 RAFT is a regional program affiliated with the Northern Virginia Regional Projects Office. This program provides intensive multidisciplinary mental health treatment to adults 65 years and older discharged or diverted from state psychiatric institutions to local long-term care facilities in Northern Virginia. Multidisciplinary treatment includes intensive case management, psychotherapy, medication management and health education to clients living in partner assisted living and nursing home facilities. RAFT staff facilitate training for long-term care facility staff, home health care agencies and the community to develop skills and increase competency in mental health topics to prevent psychiatric hospitalizations. RAFT provides case consultation and on-call support to facilities to prevent hospitalization and the discharge of clients when challenging situations arise. To be eligible for RAFT services individuals must: be referred by one of the 5 Community Service Boards (CSB), a resident of the City of Alexandria, Arlington, Fairfax, Loudoun or Prince William County, 65 years of age or older, diagnosed with a serious mental illness or dementia with challenging behaviors, require a level of treatment not available, and are psychiatrically hospitalized or are at risk of psychiatric hospitalization. RAFT is fully funded by federal and state grants. RAFT subsidizes rental assistance payments to Assisted Living Facilities (ALF) to reduce costs for clients. In FY 2024, RAFT received an additional 95K for one time funding to offset ALF subsidies. These funds will help to subsidize up to 2 additional RAFT clients discharged from Piedmont hospital. Regional Long-Term Care Partners: Assisted Living Facilities: Pacifica of Sterling (Loudoun), The Tribute at One Loudoun (Loudoun), Avalon Assisted Living Homes (Fairfax), Home Elder Care (Fairfax), The Beverly (Fairfax), and Birmingham Green (Pr

community. The program offers short term and emergency respite beds with Lansdowne and Avalon Assisted Living communities. Respite helps relieve the pressure, stress, and worry caregivers face in managing the care needs of their loved one living with dementia. Eligibility requirements include being a resident of region 2 (City of Alexandria, Arlington, Fairfax-Falls Church, Loudoun, or Prince William counties), age 55 or older, an existing diagnosis of dementia or exhibition of dementia behavioral symptoms and living in the community in their homes or the homes of family members or other caregivers. Referrals can come from individual family members, government agencies (e.g., APS, AAA, CSBs), and community agencies who serve older adults in the community (e.g., home health
community agencies who serve older adults in the community (e.g., home health care agencies).

Service Delivery Model

- In FY 2024, RAFT has continued to provide services, both, in-person and virtually. The team also closely monitors the presence of COVID and other infectious outbreaks to determine if in-person services are appropriate.
- It is expected that in FY 2025, RAFT will continue to use the same hybrid service delivery model.

PM1: How much did we do?

Staff

Total 10.6 FTEs:

- 1 FTE Supervisor
- **RAFT Clinical Program:**
- 4 FTE Therapists
- 1.0 FTE Psychiatric Nurse
- 0.5 FTE Administrative Specialist
- 0.1 FTE Psychiatrist (16 hours/month)

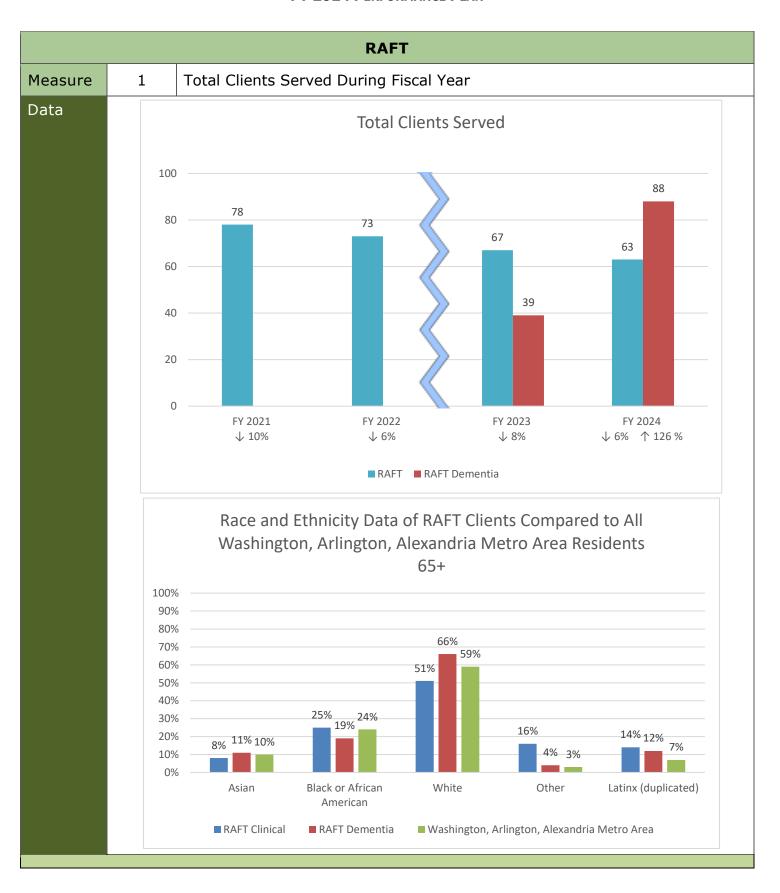
RAFT Dementia Program:

- 1 FTE Data Specialist
- 3 FTE Dementia Specialists
- 1 FTE Dementia Outreach Coordinator

Customers and Service Data

	FY 2021	FY 2022	FY 2023	FY 2024
Total Clients Served During Fiscal Year	78	73	106	151
RAFT Clinical	78	73	67	63
RAFT Dementia*			39	88
Client RAFT Census at End of Fiscal Year	57	52	53	52
Nursing Home	25	23	21	16
Assisted Living Facility	25	26	25	28
Monitoring	7	3	7	8

	*RAFT Dementia program started in FY 2023 Q3.	
PM2: How well did we do it?		
2.1	Timely Progress Note Documentation	
2.2	Customer Satisfaction	
2.3	Effectiveness of Training	
PM3: Is anyone better off?		
3.1	Clients maintained in the community without admission or readmission to a psychiatric institution	
3.2	Utilization by region	



Data <u>Su</u>mmary

- In FY 2024, there was a 6% (63) decrease in the number of clients served by the RAFT clinical program.
- The RAFT Dementia support program exceeded the anticipated number of clients served in FY 2024. The RAFT Dementia Support program served 88 clients, a 126% increase over the prior year.
- 78% of RAFT Dementia Support Program clients are people living with dementia and 22% are caregivers.

What is the story behind the data?

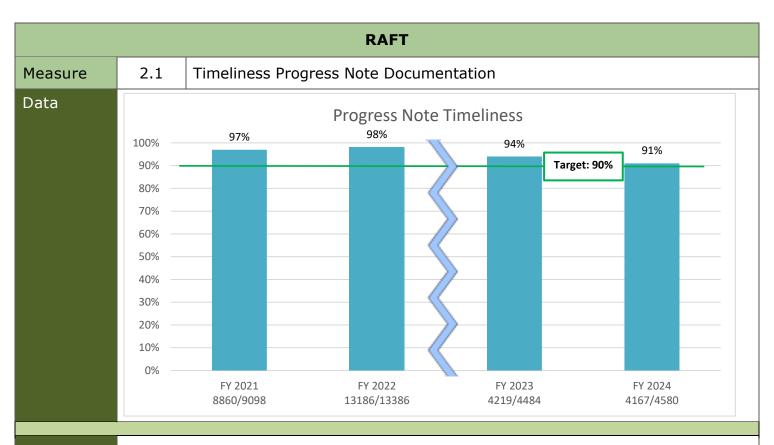
- Over the past three fiscal years, the RAFT clinical program served fewer individuals. As the number of nursing clients decreased due to natural attrition, the admissions have been steady, but not enough to keep pace with the attrition rate.
- During this fiscal year, 9 individuals closed to RAFT. Of these 9, 6 passed away who were from the original group of RAFT clients, and 3 moved to different locations. There were 7 new admissions to the program in FY 2024.
- With 9 clients closed to RAFT, more aggressive outreach efforts were attempted to garner referrals by meeting with long-term care Executive Directors in Alexandria, Fairfax, Prince William, and Loudoun to consider working with RAFT as a new partner.
- In FY 2023 the RAFT Dementia program was partially operational. It went fully operational in FY 2024. In program year 2, FY24, the program has significantly expanded its outreach efforts in all 5 jurisdictions which has led to a steady interest and an increase in services. The 126% can be attributed to serving clients for a full year.
- The RAFT Clinical team provided consultation to 107 entities, including facilities, government agencies, and hospitals. Consultations are received by phone and offer clinical guidance, recommendations, and behavior management advice.
- The Dementia Support Program conducted outreach to 403 organizations, and a total of 21,410 people within Region 2 in an attempt to increase referrals and services. These organizations have included home health agency providers, faith communities, Adult Days, APS, local hospitals, independent retirement communities and law enforcement.

Recommendations	Target Dates
 Provide targeted outreach and training to subsidized Assisted Living communities (ALF) to expand potential ALF RAFT partners. 	• FY 2025 Q2
 Partner with private psychiatric hospitals for potential referrals to RAFT. 	• FY 2025 Q2
Partner with existing RAFT communities to identify additional eligible client referrals from existing population. This work began between the two teams: RAFT Clinical and RAFT Dementia where a new referral for dementia who did not meet eligibility was successfully served in the RAFT clinical	• FY 2025 Q4
 program. Explore greater opportunities for both RAFT Clinical and 	• FY 2025 Q3
 Dementia Teams to consider eligible community referrals. Identify 2-3 RAFT Dementia metrics for the performance measurement plans. 	• FY 2025 Q3

- The Dementia Team will continue to focus on expansion of services to more diverse populations, cross-collaborating with APS, Adult Day, ADRC programs which are more likely to serve a growing number of caregivers. The team will also target outreach to bilingual staff serving caregivers of diverse and multicultural backgrounds.
- FY 2025 Q3
- Complete a SWOT Analysis with DBHDS to determine priority populations for outreach and education
- FY 2025 Q2

Forecast

 FY 2025, it is anticipated that RAFT's Clinical Team will serve 73-75 clients and the RAFT Dementia Team will serve 95 clients.



Data Summary

- In FY 2024, RAFT entered 91% of progress notes on time 4,167/4,580 exceeding the target of 90%.
- Starting in FY 2023, progress note timeliness data collection was changed to deduplicate notes that had multiple providers and group notes.

What is the story behind the data?

- In FY 2024, RAFT continued in-person services for clients in long-term care communities, as COVID and health safety allowed.
- In FY 2024, RAFT experienced turnover in both clinical staff and leadership which led to a
 decrease in notes entered on time.
- A 5-month vacancy of one RAFT clinician led to existing 3 RAFT clinicians to take additional caseloads. Due to caseload size, RAFT clinicians were able to exceed the target rate.
- RAFT staff continued to work as a mobile treatment team within five counties in Northern
 Virginia and provided services both in person as well as virtually dependent upon the presence
 of COVID in partnering communities. When providing services in person throughout the
 region, challenges included driving time to facilities, internet connectivity and software
 availability.

ommendations	Target Dates
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- Continue to monitor timeliness of documentation.
- Continue to collaborate with CRT team regularly.
- Revisit practices of reviewing timeliness during supervisors, and identify barriers and solutions.
- Encourage staff to use the CSB Dashboards for documentation stats.
- Consider discontinuing and replacing metric if timeliness target is exceeded for the next two fiscal years.
- Quarterly
- Quarterly
- FY 2025 Q2
- Quarterly
- FY 2025 Q4

Forecast

• FY 2025, anticipate at least 90% of progress notes will be entered within one business day.



Data Summary

- One hundred and twenty-nine (129) surveys were distributed to families, guardians, facility administrators and community partners. Of the surveys distributed, there was a 36% response rate with 48 responses received, with a satisfaction rate of 95%.
- Surveys are distributed annually and were initiated in May of FY 2024, with recurring reminders.
- In FY 2024 satisfaction surveys were distributed via email, using Microsoft Forms, and in-person.

What is the story behind the data?

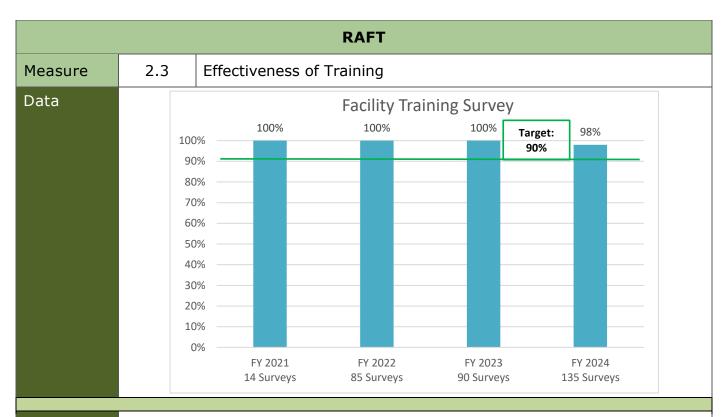
- FY 2024 RAFT survey responses reflected a 95% *Agree* or *Strongly Agree* response rate regarding satisfaction. Responses also reflected a 5% *Neutral* response rate, while responses of *Strongly Disagree* and *Disagree* had a 0% response rate.
- The email to collect surveys was sent early May to mid-June, and the survey was left open for approximately 6 weeks. Email was the primary method of distribution and resulted in a very low response rate (36%) which can be attributed to consistent turnover of facility staff.
- Comments received include:
 - "RAFT services are impactful and make a positive difference in the lives of clients/patients/loved ones. The support, training, and education they offer to senior serving professionals is very much appreciated and impactful as well. The monthly newsletter is something I look forward to receiving and sharing with others every month"

- "RAFT team is amazing and provides critical specialized interventions and support. Thank you!"
- "RAFT is an excellent program and staff are engaging and very knowledgeable about community services."
- "Thank you for all your support. You made a big difference in loved one's care! We do appreciate all that you do!"
- o "They have been working really hard to make it better for the client"
- "The RAFT team is great, they are so helpful and a great resource even if clients don't fit into their services"

Recommendations	Target Dates
Administer surveys to families upon placement in RAFT. Ensure surveys are translated in appropriate language using our LEP contracted providers. Explore administering the survey at different times of the year.	• FY 2025 Q1
 Administer facility surveys quarterly to capture staffing changes. 	• FY 2025 Q1
Continue to conduct a variety of survey distribution methods including electronic, and in person.	Ongoing
Utilize RAFT admin specialist to update and confirm email contacts quarterly for communities and assist with distribution of surveys.	• FY 2025 Q1
 RAFT program will create a RAFT Clinical Training video to be included in partner facility staff onboarding this will help to enhance greater understanding of RAFT services and promote a 	• FY 2025 Q2
 higher response rate for survey completion. Collaborate with the Dementia Team to conduct a SWOT analysis to determine ways to improve survey response rate. 	• FY 2025 Q3

Forecast

FY 2025: Anticipate 90% of those surveyed will indicate satisfaction with the program.



Data Summary

- In FY 2024, 98% of respondents agreed that training was effective.
- Response rate for the in-person training survey was 55% (106/193) The response rate for virtual trainings was 21% (29/130).
- In FY 2024 there were 240 in-person training attendees, and 145 virtual training attendees, 511 in-person special event attendees, and 5,115 individuals who opened the newsletter.
- The survey was administered at 11 (9 in-person and 2 virtual) trainings. There was a total of 14 trainings provided.

What is the story behind the data?

- RAFT continued in-person trainings during FY 2024. A total of 193 individuals were surveyed through QR coding and paper during in-person trainings. In-person trainings allowed RAFT staff to distribute and collect satisfaction surveys. Of the 193 surveyed at the in-person training, 106 returned the satisfaction surveys. The attendees responded they were very satisfied with the training and the satisfaction rate was 98%.
- A total of 130 individuals were surveyed in virtual trainings and 29 responded. The satisfaction rate for the virtual training was 99%.
 - "The presenters were well-prepared and knew the material. It was varied and interesting."
 - \circ "I really enjoyed the interactive aspect of this program."
 - "Very practical discussion of how to handle typical situations."
 - "Easy to understand the purpose of the presentation. Effective PowerPoint slides"
- During FY 2024, RAFT provided a combination of training methods including the RAFT monthly newsletters, virtual training and in-person training. Monthly analytics are

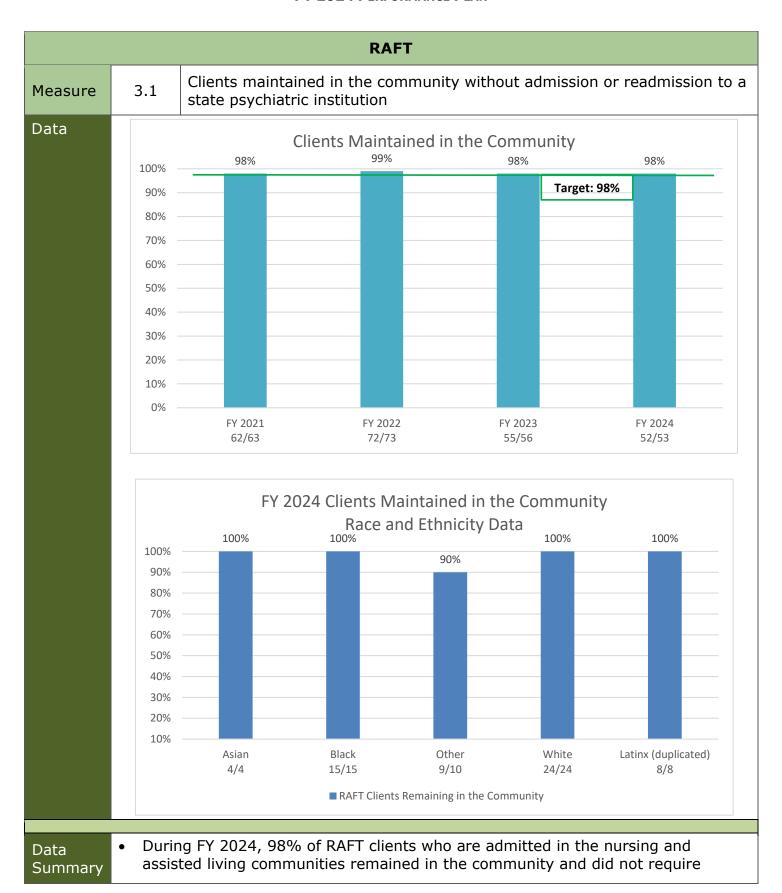
- captured to track how many recipients read the newsletter each time one is sent out (e.g., newsletter deliveries, frequency of newsletters being clicked and/or opened). This data is also tracked in a spreadsheet overseen by the Data Specialist.
- In FY 2024, RAFT created 9 newsletters which were distributed monthly via the RAFT Listserv with a total of 5,115 opening the newsletters. Topics within the newsletter reflected a focus on mental health wellness, anxiety and depression, suicide prevention, caregiver support, dementia, and challenging behaviors.
- In FY 2024, RAFT collaborated to host 8 special events in partnership with the Dementia Consortium, the Lake Anne Health Fair in Fairfax, Fairfax Adult Day, The Virginian Resource Fair, and the Older Adults Month Fair. Total in-person attendance for special events was 511.
- In FY 2024, RAFT partnered with INOVA systems in recognition of Older Americans Month offering free Dementia Simulation exercises to attendees. The Dementia Simulation activity was well received. They conducted another simulation in partnership with the Arlington Adult Day Program. They also offered trainings to local Area Agency on Aging, Crisis Intervention Team, Long-term Care Ombudsman, Adult Day and Adult Protective Services to provide training on RAFT and Dementia awareness. This was an enhanced group of providers building upon the recommendations from FY 2024. RAFT provided virtual training throughout the year on mental health topics including: "Aging and Mental Health"," Cultural Competency"," Dementia and Challenging Behaviors", and" Effective Communication and Behavior Management". Total attendance for virtual trainings was 145.
- In FY 2024, the RAFT program redesigned their brochures to reflect the specialized programs of both clinical and dementia teams. The brochures were translated in the following languages: Spanish, Amharic, Arabic, Vietnamese, and Farsi.
- In September 2023 the RAFT team created an outreach video highlighting key accomplishments and demographic data for the region that was debuted at the Annual NVAN Legislative Breakfast. This was a creative outreach tool that reached 80 professionals representing the regions AAA, home care agencies, elected officials, and Commission advocates.

Recommendations	Target Dates
Continue to survey each partner Assisted Living and Nursing Home Facility, Home Health Care Agencies and other interested community members regarding training priorities and interests.	• FY 2025 Q2
• Expand Dementia Simulation and Positive Approach to Care trainings to partner and advocate groups.	• FY 2025 Q2-Q3
RAFT Program Director to schedule 1:1 feedback sessions with existing partners.	• FY 2025 Q2
 Continue to expand training and partner facilities by offering customized webinar sessions in collaboration with the RAFT Dementia team. 	• FY 2025 Q3
Continue to assess next steps in training and/or new educational areas that can improve Facility staff's	• FY 2025 Q4

ability to work effectively with individuals with mental health and Dementia diagnoses.

Forecast

• FY 2025: Anticipate that at least 90% of those surveyed, who responded, will indicate that the training and newsletters are effective.



- psychiatric hospitalization at a local psychiatric hospital, a state psychiatric facility or through the Local Inpatient Purchase of Service (LIPOS) program.
- This data is recorded monthly in a tracking spreadsheet.

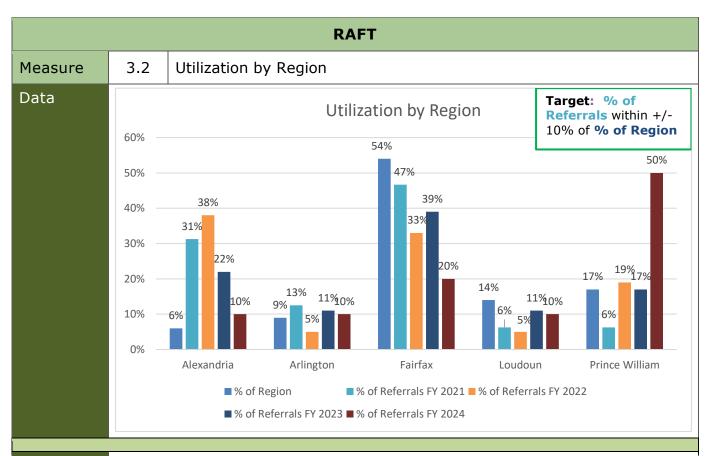
What is the story behind the data?

- The 98% of clients maintained in the community declined by 1% due the psychiatric hospitalization of one client in FY 2022 that was discharged and will be placed outside of region 2 in FY 2025.
- 98% of clients maintained in community is a cornerstone of the program and has been a strength of the program since its inception.
- The program has disaggregated race and ethnicity for the 52 clients who were maintained in the program. The RAFT program has effectively sustained the population of all groups within the community, with the exception of the "Other" population, which only has one individual residing outside of the community.
- RAFT continues to exceed the regional goal of maintaining at least 98% of clients in the
 community without requiring a local or state psychiatric hospitalization. RAFT training and
 support have been instrumental in the program's ability to maintain clients in the least
 restrictive environment.

Recommendations	Target Dates
 Continue with the current RAFT model and intensity of service provision, which have proven to be successful with clients served to date. Explore barriers to underrepresented populations' sustainability in the community. 	OngoingFY 2025 Q4

Forecast

FY 2025: Anticipate at least 99% of RAFT clients will remain in the community.



Data Summary

- According to the American Community Survey, of residents aged 65+ in the region, 6% are Alexandria residents, 9% are Arlington residents, 55% are Fairfax residents, 13% are Loudoun residents and 17% are Prince William residents.
- 10 referrals were received from the region in FY 2024 and a total of 7 clients were admitted to RAFT services.
- Referrals from Prince Williams were highest (50% or 5 referrals), followed by Alexandria (10% or 1 referral), Arlington (10% or 1 referral), Fairfax (20% or 2 referrals), and Loudoun (10% or 1 referral).

What is the story behind the data?

- In FY 2024, Alexandria referrals dropped to 10%, aligning closer to its population share of 6%. Arlington County referrals are at 10%, matching its population percentage of 9% and Loudoun County referrals are at 10%, still slightly below its population percentage of 13%. Utilization by Prince William County sharp increased to 50%, showing a substantial overrepresentation compared to its population share of 17%. This sharp increase in Prince William referrals is due the county having more clients planning for discharge from Piedmont.
- Utilization by Fairfax has significantly dropped to 20%, showing an increasing gap between its population share and referral percentage in comparison to their proportion of the target population (55%). There was a decrease in the number of Fairfax County residents entering Piedmont to be referred to RAFT. Individuals entering Piedmont are a primary source of RAFT referrals upon discharge to return to the Northern Virginian

region. There was also a decrease in the number of RAFT partner facilities in Fairfax in FY 2024.

• Piedmont state psychiatric hospital operated at less than 100% capacity and clients requiring psychiatric hospitalization were boarded in local hospital emergency departments until local beds became available.

Recommendations	Target Dates
 Continue to conduct outreach to build internal referral partnerships with facilities throughout the region. Continue to implement marketing of the RAFT program to all CSBs through a virtual platform, including emails, phone calls and the RAFT website to develop relationships and increase referrals. Due to COVID, marketing strategies have shifted to virtual outreach via email and newsletters. Continue to partner with CSBs early in hospitalization stabilization process to identify appropriate RAFT referrals. Continue to collaborate with Fairfax and Loudoun County's discharge planning teams to initiate early interventions and streamline processes as discharge status changes. Continue to prioritize referrals from underserved counties to achieve better utilization distribution. Increase targeted outreach to Fairfax CSB to increase the number of partners in Fairfax County. 	 Ongoing Ongoing Ongoing Ongoing FY 2025 Q4
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Forecast

• In FY 2025, it is projected that referrals will return to be in alignment with the percent of region.