The Virginia Acute Psychiatric and CSB Bed Registry Initiative Update:

Background:

- The Department of Behavioral Health and Developmental Services (DBHDS) has been working with the Virginia Hospital and Healthcare Association (VHHA), community services board representatives and Virginia Health Information (VHI) to develop a web-based psychiatric bed registry to collect, aggregate, and display data on the availability of acute beds in public and private inpatient psychiatric facilities and residential crisis stabilization units (CSUs) of community services boards (CSBs).

- Hosted by VHI, the Virginia Acute Psychiatric and CSB Bed Registry will be implemented state wide.

Purpose:

- The web-based bed registry is intended to provide descriptive information about each public and private inpatient psychiatric facility and each CSB and private residential crisis stabilization unit to CSB emergency services providers and psychiatric hospitals that need immediate access to inpatient or residential crisis services for individuals.

- The web data base will include information about the potential availability of beds at each facility.

- Hospitals and Residential CSUs will maintain current program profiles. The bed census is envisioned to be updated at least daily by hospital and CSU staff.

Benefits:

- The bed registry is a 24-hour on-line system to enable CSBs and psychiatric hospitals to query bed availability at psychiatric hospitals (including state hospitals) and residential CSUs based on the most recent updates and enhance communication among providers.

- It will provide information for emergency services staff about potential bed availability and facilities to contact first, but would not eliminate need to call facilities for updated information and to discuss case specifics.

- It is designed to enable CSB and hospital users to more efficiently target and determine the availability of appropriate beds in Virginia facilities using various search parameters within the registry data base

- Queries can be tailored to specific needs (e.g., region, patient type, level of security, etc).

- CSBs, CSUs and state hospitals will be required by DBHDS to participate. Although participation by private hospitals is voluntary, these providers have been partners in this initiative.

- The registry will enable DBHDS administrators to monitor, measure, and evaluate usage and bed availability through various report features.
Limitations:

- The accuracy, credibility and reliability of the bed registry system will depend on the frequency of its updates (bed availability changes constantly during a 24-hour period) and the completeness and currency of facility profiles.
- Having an “available bed” is a necessary, but not sufficient, requirement to actually access a bed for needed care. Multiple factors may affect the actual availability and/or appropriateness of that bed for a specific proposed client. The provision of clinical information and medical clearance must be completed before an admission decision can be made.
- The registry will not replace the need to communicate clinical information regarding a potential admission, but it will be a useful tool in facilitation of triage to an appropriate placement.

Implementation:

- Development of the application (the bed registry) and user tutorials was completed as of November 2013.
- As of December 2013, DBHDS and VHHA identified a single administrative point of contact for each CSB, state psychiatric hospitals, residential crisis stabilization units and private psychiatric hospital providers.
- Written communication about the Website launch went out from DBHDS January 6, 2014.
- A webinar training for administrative contacts and bed registry users is being developed and will be conducted January 14, 2014 by DBHDS with support from VHHA and VHI. This training will be recorded and available on line.
- Daily bed census data entry begins January 15, 2014. As of this date, you and others you designate should become accustomed to the bed registry and how it works, practice your daily data maintenance and generally fine-tune your operating procedures so that the bed registry will be of optimal benefit.
- Beta testing with limited CSB users searching for beds will also be conducted in February.
- We anticipate full operational use of the bed registry in early March.
- If you have technical questions about the website (e.g., managing your facility data, using your login, etc.), please contact:
  Deborah Waite
  VHI Operations Manager
  deborah@vhi.org
- For non-technical or general questions regarding the Psychiatric Bed Registry, please contact:
  William O’Bier
  Department of Behavioral Health & Developmental Services
  804-225-4242
  william.obier@dbhds.virginia.gov
- A representative group of stakeholders will be convened to monitor the implementation process and use of the bed registry. DBHDS, VHHA and VHI will monitor implementation and bed registry utilization and provide feedback for continuous quality improvement.