

HRCSB Board Report - July 2023

Rebekah Brubaker (Executive Director)

Adam Yoder (Comm. Mental Health Services)

George Nipe (Behavioral Health Services)

John Malone (Developmental Services)
Barbara Brady (Administrative Services)
Andrea Skaflen (Crisis Services)

Message from the Executive Director

This last month, I had the opportunity to speak with the County Board of Supervisors and provide a report on how HRCSB used Opioid Abatement Funds provided by Rockingham County to help address the opioid epidemic. Over the last several months, our Behavioral Health Team and our Coordinator of Peer Services have been working collaboratively to create an education awareness media campaign coupled with harm reduction resources. The team has been providing REVIVE trainings throughout the community and giving out harm reduction kits to community members. Our goal has been to increase knowledge of not only the issue but also the resources available to individuals and their loved ones to help reduce the risk of accidental overdoses and increase the likelihood of accessing treatment. I appreciated the opportunity to speak directly about an important initiative and to be able to highlight that HRCSB does more than just treatment services, we strive to address mental health, substance abuse and developmental issues as early as possible through prevention and early intervention efforts.

Rebekah Brubaker, LPC

Administrative Services

<u>Compliance</u> The Credentialing Specialist was busy this month finalizing all practitioner registrations in the DMAS new online portal, MES. It has been a tedious process. Our specialist also had to update our Malpractice Insurance for each staff member after having received our renewal only four days before the fiscal year end. She was successful in accomplishing the task as well. The Compliance Manager and Risk Management Specialist have been working closely with both DBHDS Licensing and clinical managers on the issue of Crisis Planning. The collaborative work with Compliance and clinical supervisors has resulted in tangible and positive steps to address DBHDS concerns.

<u>Facilities</u> Summit House has received a great deal of attention this month, with a new HVAC unit (thus replacing the 3rd of 6 units that are over 28 years old) and a cleaned and resealed gazebo structure. Members and staff at Summit House are grateful for both upgrades.

Dickson Sommers and Michelle Blumling from the Compliance Department have been hanging art and decorations around the building this month. Photographs by staff member Anna Jones adorn the North Entrance and the Adult Outpatient area, and Case Manager Lisa Bange assisted with selection of the art and adding plants. Staff and clients alike have complimented their work.



Below are a few pictures of just some of their efforts. We are grateful for their hard work in beautifying the Main building and the McNulty Center.

<u>Risk Management</u> Our Risk Management Specialist has created a new version of the Serious Incident Report form to include information as to how HRCSB staff respond to certain serious incidents. He has also finished a proposal for a Code Blue, Shelter in Place, protocol that will now go to the Executive Director and Management Team for review.

<u>Clerical</u> The Clerical team is fully staffed as of July 3. Now that is definitely a reason to celebrate!

<u>IT</u> The IT team continues to prepare for the online email migration and collecting bids for the network upgrade project, to take place later this summer.







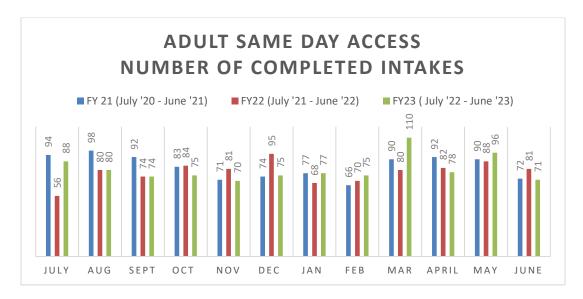




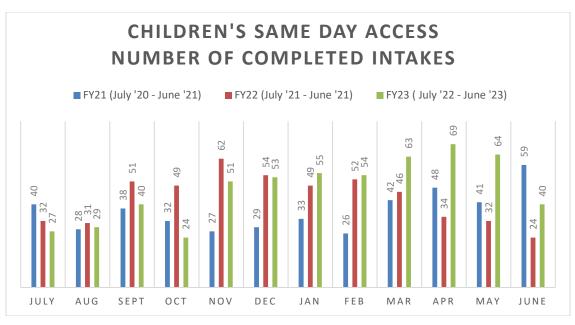
Behavioral Health Services

Same Day Access (SDA) - Adult & Child

We continue to provide walk-in intakes for adults on Mondays, Wednesdays and Fridays as well as scheduled intakes for children and families on Tuesdays and Thursdays. For the month of June, the Same Day Access team completed 69 intakes for adults and 39 intakes for child/adolescent clients.

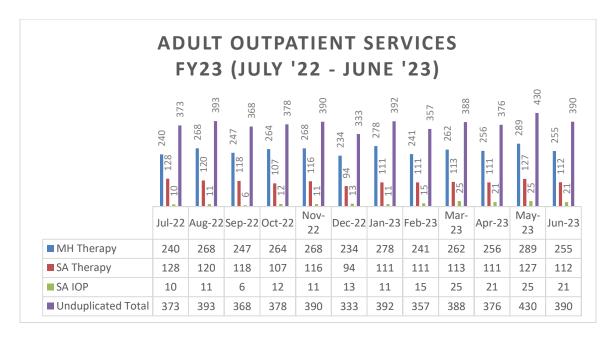






Outpatient Services – Adult and Child

For the month of June the Adult Outpatient Team provided individual and group therapy for 255 individuals in mental health focused treatment, and for 112 individuals primarily working on substance use related issues. We also served 21 individuals in our substance use focused Intensive Outpatient Program. The Adult Outpatient team has recently received an accepted offer for a new therapist and is actively recruiting to fill the other open position on the team.



The Child/Adolescent Outpatient team provided individual therapy services to 406 individuals and their families in the month of June. Currently we have 652 individuals enrolled in child/adolescent therapy services. Lyndsay Humphries, who currently works within our Adult



Outpatient team, remains on track to join the Child/Adolescent Therapy team in July which will fill the final remaining vacancy on the team.

Behavioral Health Wellness (BHW)

The Behavioral Health Wellness (BHW) team continues to be very active in the community participating in a number of events throughout the month of June as well as providing a variety of trainings for various community partners. One event to highlight is their participation in the planning, and implementation, of the 2nd Annual Harrisonburg Youth Leadership Summit where 18 teens from Harrisonburg spent the day at the Lucy F Simms Center engaging in leadership development and substance use prevention programming. The team also hosted a booth at the Harrisonburg Farmer's market this month where they provided Rapid REVIVE trainings (10 minute training in opioid overdose response and naloxone administration) to 20 members of the community. Other community partners who received training from the BHW team this month include Harrisonburg-Rockingham County Department of Social Services; Harrisonburg Redevelopment & Housing Authority; HRCSB's Early Intervention Clinicians; People Helping People, Boys & Girls Club, Church World Service Youth Summer Camp, and Brethren Woods Camp.

The BHW team has also done quite a bit of work aimed at increasing education and awareness in the community regarding opioid use, prevention, harm reduction and treatment. Through the team's initiative and coordination with community partners information was disseminated utilizing multiple types of media including the development and launch of a webpage on the existing Wellness Connection website, sending Every Door Direct Mail Mailers to all residential mailboxes and PO Boxes in Rockingham County (25,695 mailers sent in total), playing radio ads May-September on 8 local radio stations, and advertisements on both Facebook and Instagram.

Community Mental Health Services

Adult Mental Health Case Management

The last six months have been marked by multiple staff transitions and a steady stream of client referrals with numerous referrals prioritized as hospital discharges. We've had three staff start in new roles within the team, and two new staff begin in the case manager role. We are currently covering a caseload for a case manager on extended medical leave and are facing the departure of our only remaining bilingual Spanish case manager at the beginning of July. Our two newest staff are not yet at full caseload capacity.

Referrals have been steady, and combined with the staff transitions noted above, has resulted in one of the longer referral lists for case management services in recent memory. The lack of available resources in the community, especially in affordable housing and Assisted Living



Facility placements are challenges for both clients and staff. Yet, the case management team continues to pull together, supporting each other, and doing excellent work for our clients.

Peer Recovery Services

Peer Services is growing! In March we hired an hourly Mental Health Peer to the team. She is scheduled to take her peer recovery certification exam in July and then she will become registered, which will allow her to bill third party insurance for services. She is working towards building her roster of clients which has allowed us to place clients in services that have been on a referral list for several months. We are currently conducting interviews for an hourly substance used disorder peer, as well as a Drug Court peer. Our program will be receiving a peer intern in the fall through Recovery Corps, a national nonprofit recovery organization. The intern will work towards their peer certification during their time with us and be utilized to expand group offerings.

In April, our staff led a seven week group at Summit House focusing on self-care and journaling. It was such a success that the peer staff will return to Summit House in July to lead groups two days a week. We will begin a series of groups, with the first two focusing on boundaries and helping clients understand their diagnoses and medication.

The Peer Program Supervisor continued to participate in the Recovery Leadership Academy, facilitated by Virginia Commonwealth University and sponsored by the Department of Behavioral Health and Developmental Service's Office of Recovery Services. Our peer supervisor has also been elected to serve as Co-Chair of the newly established Mental Health/Substance Use Disorder Peer Council for the Virginia Association of Community Service Boards.

Psychiatric Rehabilitation (Summit House)

Summit House has continued to grow the number of participants. The overall number of members involved in the Summit House program has increased over the last 6 months. In addition, the number of members attending Summit House daily is up.

Summit House celebrated its 40th anniversary the first week June. Each day of the week focused on a different decade in which Summit House has been a part of the community. On that Friday, Summit House celebrated the present with 34 members in attendance. That is the highest number of members in attendance this year.

As of June 2023, all four of the general advocate positions have been filled. Summit House continues to advertise for the open clinical advocate position. Filling all the general advocate positions will allow Summit House to engage in more activities in the community. In addition, Summit House is continuing to expand on groups offered as part of the daily routine. Through a Department of Behavioral Health and Developmental Services grant to support Psychiatric



Rehabilitation, Summit House was able to purchase a number of curriculums for leading groups intended for persons with severe and persistent mental illness.

Summit House has also had improvements to the facility. Most noticeably, faulty flooring was replaced in the front area and hallway, with the costs covered by the warrantees. Large kitchen appliances have been repaired so they are working safely and efficiently. The gazebo has been weatherized for the winter months thanks to the HRCSB maintenance staff.

Supervised Living Residential (Market Street House)

A recent success for our program is that a resident who was on pass from the state hospital for a number of years was able to be conditionally released into the community. This resident has worked very hard to get where they are, and residential staff are proud to be part of their journey. Another of our residents was able to pay off their court fees and has been consistently holding down their first job in years. Other residents, who haven't necessarily achieved large milestones in these past 6 months, have been participating in skill building with our staff and growing their knowledge base and implementing new habits. The compassion, knowledge, and life experience brought by our staff has built rapport and trust with our clients and continues to empower residents to maintain a growth mindset even when faced with challenges.

The residential program also celebrated exciting milestones among staff! This summer, we had three staff and an intern who graduated from their education programs: one undergraduate degree, two masters, and one nursing degree. With residential being one of the few programs in the agency that has hourly positions, we've been fortunate to be the workplace where people finishing their education have had their first introduction to the field. Two of our full-time staff are currently working on their Masters in Social Work degrees. The staff that aren't recently graduated or enrolled in school are also committed to learning as they attend trainings throughout the year on various topics ranging from REVIVE trainings to Affirming care for Gender Non-Conforming Individuals to Macroaggressions in Every Day Life.

Western State Hospital

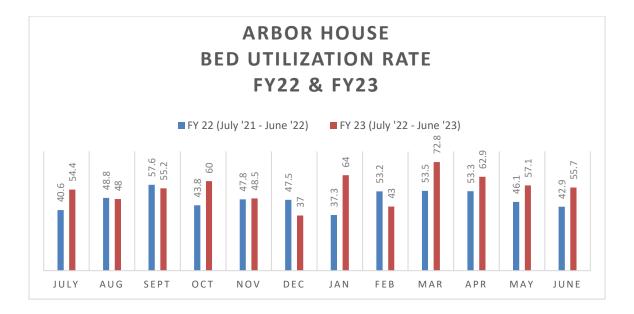
Western State Hospital census report for May of 2023, HRCSB had a census per 100,000 of 11.6, and an average census of 15. Our region, Health Planning Region 1, had an average census per 100,000 of 9.4, and an average census of 148. HPR 1 is made up of 9 CSB's: Alleghany Highlands, Harrisonburg Rockingham, Horizon, Northwestern, Rappahannock Area, Rappahannock-Rapidan, Region Ten, Rockbridge Area and Valley.



Crisis Services

Arbor House (Crisis Stabilization Unit)

Arbor House has been operating at a 7-bed capacity for the several months, after operating at a 5-bed capacity for the last several years. In June, our bed utilization rate was 55.7% based on 7-bed capacity; our average bed utilization for the year is 67.9%. Our target goal is to have at least 75% bed utilization for the year and we continue to work with agency and community providers to facilitate referrals and ensure efficient use of the resources. During this month Arbor House completed the upgrades allowed through the one-time funds received through the Department of Behavioral Health and Developmental Services (DBHDS). This includes a new courtyard fence that allows better privacy to protect client confidentiality and lower maintenance to reduce future costs.



Emergency Services

Our Emergency Services Team continues to serve our community members during moments of behavioral health crisis. During June the team has completed 42 Prescreening evaluations that have resulted in 21 Temporary Detention Orders (TDO), 14 voluntary admissions to a private hospital, and 10 releases to community supports. The perseverance of this team in obtaining beds at private hospitals resulted in only one admission to a state facility over the month. This team serves as a resource to every other department in the agency, meeting the needs of any client in crisis to be able to determine the least restrictive treatment available. Emergency Services staff also serves as the crisis resource for the community, answering calls 24 hours a



day. The team is also pursuing opportunities to partner with other services in the agency to provide clients with the most effective and efficient services possible.

Community Crisis Services

During June we continued to develop the agency's community crisis services. Chuck Prater, Supervisor of Community Crisis Services, was able to travel to Washington State in order to attend the co-responder conference. This allowed HRCSB staff to network with other co-responders and get information related to best practice service delivery and training. The sessions were geared toward both mental health and law enforcement in order to deepen their understanding of each other's' roles and how best to handle difficult situations, specifically in crisis situations.

During June he was able to begin piloting the child and adolescent community crisis services and develop the agency infrastructure needed to have a successful program.

In addition to developing the community crisis programs for children and adults, Chuck has continued to serve with the co-responding Crisis Response Unit and provide 17 encounters during this month.

Developmental Services

DD Case Management Services

Developmental Disabilities (DD) Case Managers billed 304 units for the month of May with DD case managers from Valley Associates for Independent Living completing an additional 22 billable units. Case managers completed 689 separate contacts to assist with linking clients to services, or monitoring their satisfaction, including 232 face to face visits. They also completed 36 annual ISPs.

Currently we have 338 individuals receiving DD Case Management services, including 236 receiving Waiver services. Of those, 56 require Enhanced Case Management, meaning they have recently received crisis services, emergency medical services, or are at significant risk as determined by the Support Intensity Scale. For those receiving Enhanced Case Management, support coordinators must complete face to face at least one time per calendar month, with no more than 40 days between visits, with 2 out of every 3 visits occurring in the client's home. There are 220 individuals on the DD Waiver Waiting list awaiting services. There are currently 49 individuals on Priority 1 status, followed by 94 on Priority, and 77 on priority 3. We received 5 new referrals, completed5 new waiver screenings, and added 4 individuals to the waiting list. We were able to fill two open case management positions, with both new hires to begin in July. We again want to thank the DD Case Management team for maintaining both high billing numbers as well as providing high quality services while being short staffed. To assist with more quickly filling open positions, we have created a DD Case Management Trainee position, so that we can bring individuals onto our team who meet educational requirements, but who do not yet have the required knowledge, skills, and abilities needed for the position.



We received our FY 24 Family and Individual Supports waiver slot allocation in June. Harrisonburg Rockingham received of the 500 8 slots awarded. The number of slots awarded to each CSB is determined by a formula which includes the population of the locality, the percentage of individuals receiving Medicaid in that locality, and the number of individuals on the DD Waiver waiting list, Priority one at the local CSB.

Infant and Toddler

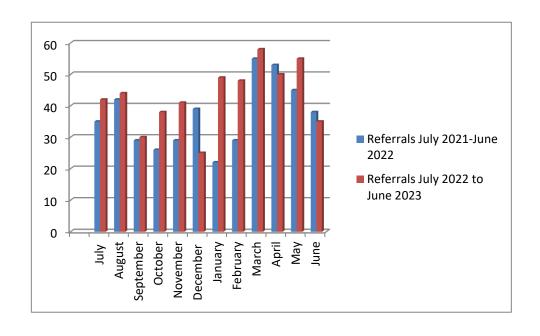
The infant and toddler program completed, and passed, their annual statewide record review. There were some corrections needed regarding thirty day initiation of services, as well as some issues regarding documentation of transition services, however overall the review was successful. The positive outcome is especially noteworthy given both the significant numbers of clients that have entered the program this year, as well as ongoing implementation of the new Trac-it data system. Significant kudos to the team.

The Trac-it system is still on schedule for a full implementation date of December 2023. As noted previously, we continue to work with DBHDS to determine how to best incorporate our billable activities into the system.

| Month | 2016- 2017 | 2017- 2018 | 2018-2019 | 2019- 2020 | 2020- 2021 | 2021- 2022 | 2022- 2023 |
|-------------------|---------------|---------------|-----------|---------------|---------------|---------------|---------------|
| Wildian | 2017 | 2010 | 2010 2013 | 2020 | LVLI | LVLL | 2023 |
| July | 17 | 20 | 31 | 30 | 30 | 35 | 42 |
| August | 30 | 40 | 38 | 36 | 35 | 42 | 44 |
| September | 31 | 36 | 33 | 38 | 33 | 29 | 30 |
| October | 18 | 35 | 30 | 36 | 34 | 26 | 38 |
| November | 31 | 30 | 27 | 28 | 30 | 29 | 41 |
| December | 22 | 28 | 35 | 34 | 24 | 39 | 25 |
| January | 38 | 31 | 44 | 37 | 41 | 22 | 49 |
| February | 24 | 32 | 35 | 35 | 31 | 29 | 48 |
| March | 31 | 30 | 32 | 40 | 34 | 55 | 58 |
| April | 30 | 43 | 34 | 32 | 38 | 53 | 50 |
| May | 48 | 20 | 33 | 25 | 26 | 45 | 55 |
| June | 34 | 32 | 25 | 35 | 45 | 38 | 35 |
| | | | | | | | |
| Total Referrals | 353 | 377 | 397 | 406 | 401 | 442 | 515 |
| | | | | | | | |
| Child Count-Dec 1 | 127 | 162 | 173 | 195 | 201 | 193 | |



| | | Augu | Se | Oc | | | | | | | | Jun | YT |
|----------------------------------|------|------|-----|------|-----|-----|-----|-----|----------|-------|----------|-----|-----|
| Month: | July | st | pt | t | Nov | Dec | Jan | Feb | Mar | April | May | e | D |
| | | | | | | | | | | | | | |
| Total Referrals | 42 | 44 | 30 | 38 | 41 | 25 | 49 | 48 | 58 | 50 | 55 | 35 | 515 |
| Monthly | 72 | 77 | 30 | 30 | 71 | 23 | 77 | 70 | 36 | 30 | 33 | 33 | 313 |
| Referral | | | | | | | | | | | | | |
| Goal | 40 | 40 | 35 | 30 | 30 | 40 | 30 | 35 | 40 | 40 | 40 | 35 | 435 |
| Number of children | 200 | 202 | 200 | 20.4 | 202 | 206 | 205 | 201 | 20.4 | 222 | 225 | 240 | |
| enrolled | 298 | 303 | 280 | 284 | 282 | 286 | 295 | 291 | 304 | 323 | 325 | 340 | |
| Data for | | | | | | | | | | | | | |
| Referrals | | | | | | | | | | | | | |
| _ | | | | | | | | | | | | | |
| Parent Declines/No Contact | 16 | 14 | 15 | 14 | 14 | 16 | 17 | 11 | 16 | 14 | 11 | 1 | |
| | | | | | | | | | | | | | |
| Transfers | 0 | 3 | 0 | 1 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| | | | | | | | | | | | | | |
| Not Eligible | 7 | 5 | 3 | 3 | 2 | 1 | 3 | 7 | 7 | 2 | 5 | 1 | |
| In Process | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 5 | 25 | 33 | |
| in Process | 0 | 0 | 0 | 0 | 0 | U | 0 | 0 | 1 | 3 | 25 | 33 | |
| Deceased | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| _ 0000000 | , | J | U | J | J | J | | J | J | J | J | 3 | |
| Active | 19 | 22 | 12 | 20 | 24 | 8 | 29 | 30 | 34 | 24 | 14 | 0 | |
| | | | | | | | | | | | | | |





Human Resources

The last several months our Human Resources Department have been working on end of fiscal year items related to open enrollment for benefits for all employees. With the start of the new fiscal year, Human Resources will be tackling an on-going reporting project requested by the Department of Behavioral Health and Developmental Services (DBHDS) on employee position vacancies and salary compensation. Each CSB will be reporting out information on a quarterly basis to provide to DBHDS. It is our understanding that this information it will be utilized to advocate and inform the General Assembly about the on-going need to support CSBs in workforce development and retaination of employees through more competitive salaries.

HRCSB continues to experience turnover, however, we have also been able to hire several of our position vacancies. We have seen success in being able to fill our case management positions and several administrative support positions. Below is a graph of our numbers for employment changes for the 2nd quarter of the calendar year. In addition, we are also expanding several departments due to the increase in need and/or due to funding opportunities; we have created seven new direct service or supervisory positions. We continue to explore recruitment strategies, as well as, looking at meaningful ways to retrain and development the employees that are currently working at HRCSB

