



HRC SB Board Report – June 2024

Rebekah Brubaker (Executive Director)
Barbara Brady (Administrative Services)
John Malone (Developmental Services)

George Nipe (Behavioral Health Services)
Andrea Skaflen (Crisis Services)
Adam Yoder (Comm. Mental Health Services)

Message from the Executive Director

We are pleased to hear that the Governor’s Budget was approved in mid-May. It is always appreciated when the budget process can move forward, as it allows the CSB system, among other entities, to plan for the future and make final decisions for the upcoming fiscal year. We are currently waiting to receive the final FY25 Performance Contract from the Department of Behavioral Health and Developmental Services (DBHDS). Based on the initial draft that was received in April, there appears to be minimal changes for this upcoming fiscal year.

During the month of May, several members of HRC SB leadership, representing different clinical areas of the agency, participated with other community leaders and organizations in a 2-day Cross-System Mapping for our community. The focus of the Cross-System Mapping is to look at community-based solutions for Justice-Involved individuals with mental health and substance use issues. The event was well attended with several action items for the community to continue to strive towards, including increasing access to crisis services, increased collaboration among emergency response teams throughout the community and increasing engagement and follow up with individuals post incarceration. HRC SB will continue to be an active participant in the conversation and the solutions being brought forward.

Rebekah Brubaker, LPC

Administrative Services

Compliance

Our Compliance Manager Dana Dewing began an extended leave in late May, and her team has stepped up to cover various audit, regulatory and investigation tasks. We continue to work closely with the Finance Department on their updates to our electronic health record system,



especially in the area of insurance coverage and authorizations. We are also stepping into a busy time of year for Credentialing, ensuring that everyone's registrations and license updates are complete and recorded. All of this activity is providing excellent opportunities for cross-training, and the team is taking advantage of this.

Risk Management

Our Risk Manager is handling a Human Rights Complaint and will submit his findings to the Executive Director soon. This month he handled numerous Serious Incident Reports and answered questions regarding CHRIS reports and has continued his Emergency Responsiveness Training at all staff meetings.

Facilities

Dickson Sommers, our Maintenance Manager, has spearheaded our effort to get a reliable coffee machine plus affordable (and hopefully improved) coffee. And he has been successful! After months of dealing with a faulty machine, the new machine is installed and has upgraded the coffee quality considerably. The coffee-drinking staff are very happy. He has accomplished many other things – significant repairs at a rental property, landscaping projects and upgrades, registering new vehicles, etc. – and is staying extremely busy.

Clerical

The Clerical team has had a relatively quiet month. After the departure of team member Alicia Lobo to the Infant and Toddler Connection (ITC) group, they have pulled together to handle staff shortages and other pressures. We are recruiting for another team member.

Information Technology

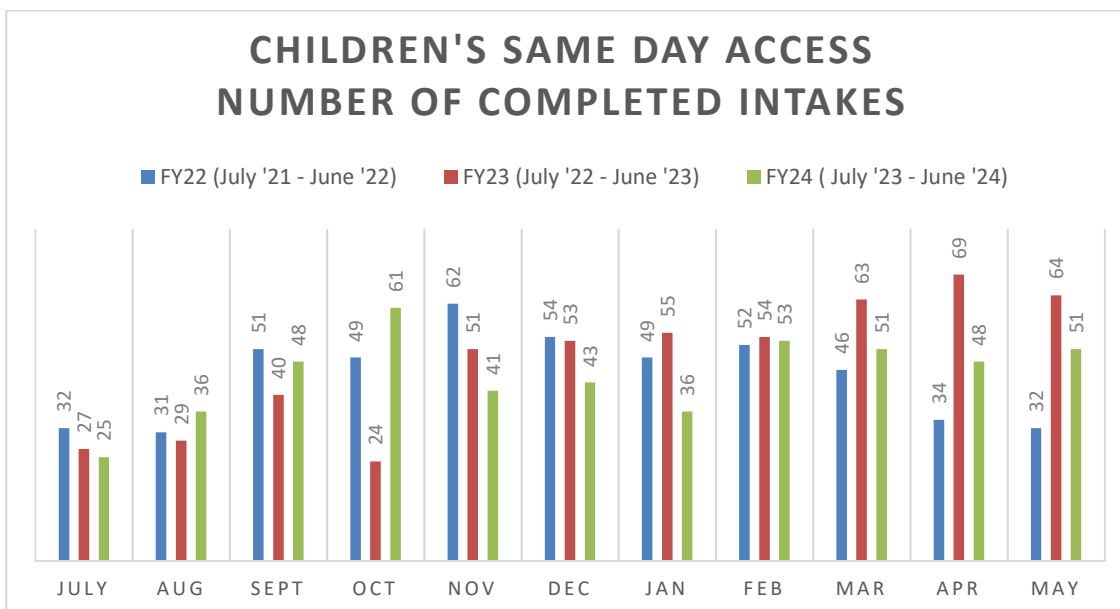
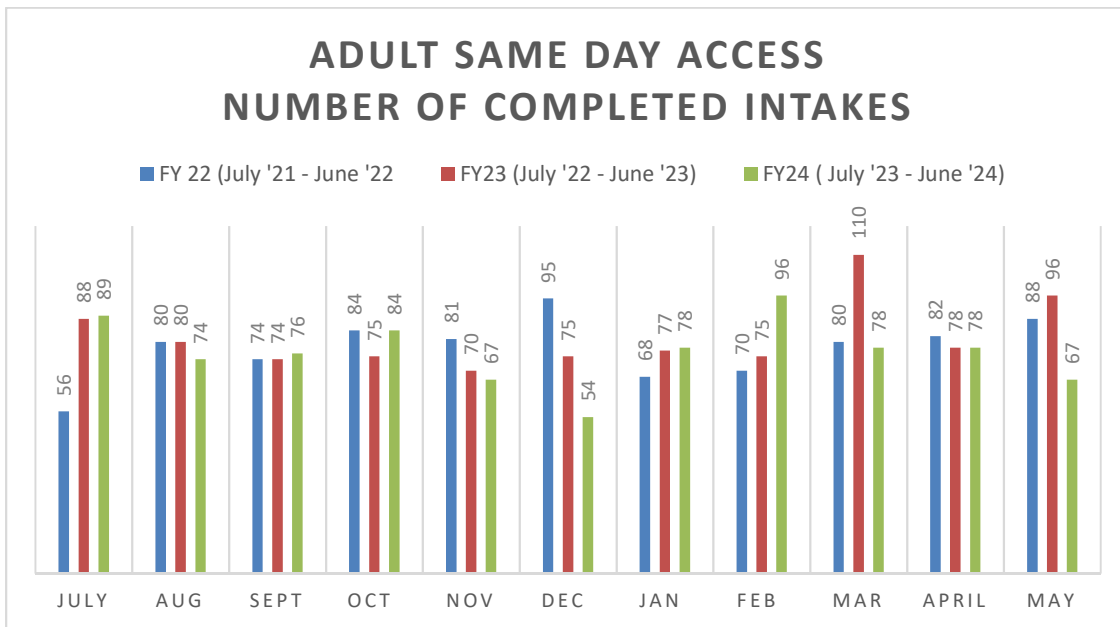
The IT team has been busy with the Munis Financial System changeover, especially James Jenkins and Kristina Winegard. Kristina's arrival as the system administrator has been greatly appreciated during this transition time. It has been stressful few weeks but the light is at the end of the tunnel for this phase of the project. Data and Business Analyst Brandy Larramore arrived and hit the ground running. She is close to knowing and understanding much of the work involved with the required state reporting and internal Agency Performance Report. Her enthusiasm is welcome. The rest of the IT team continues to provide great customer service and working with other departments on mutually challenging issues, especially those with the Compliance and Finance Departments.

Finally, we reluctantly announce that IT Manager James Jenkins is moving on effective Friday, June 7. James accomplished a great deal during his two-year tenure here and we thank him for that. He leaves a skilled, cohesive team behind; however, he will be missed. Recruitment for a new IT Manager is on-going.

Behavioral Health Services

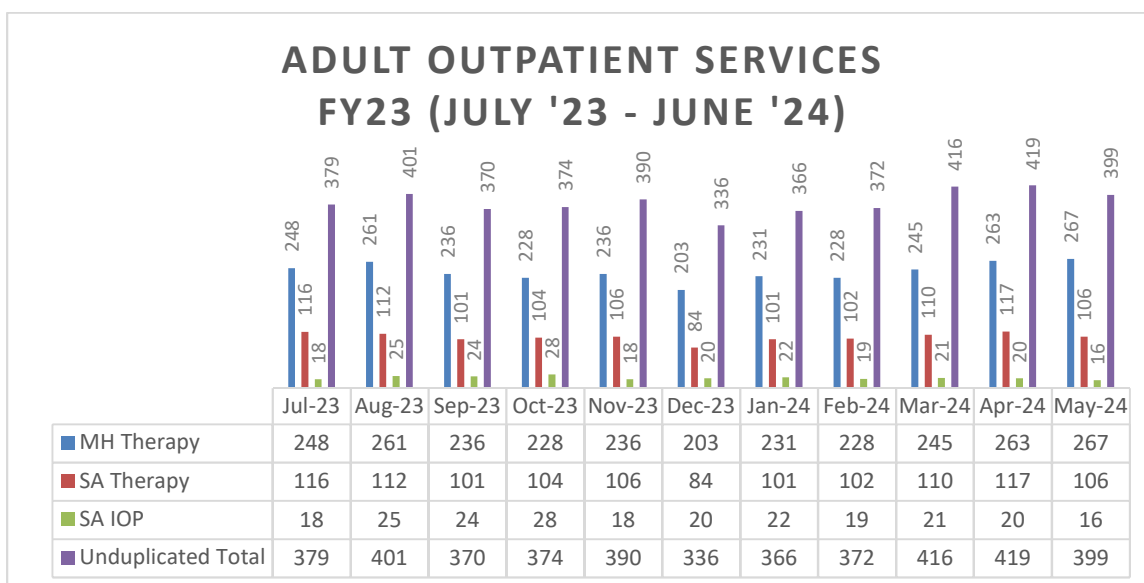
Same Day Access (SDA) – Adult & Child

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 May, the Same Day Access team completed 67 intakes for adults and 51 intakes for child/adolescent clients. Interestingly this was well below average for adult intake numbers this year but was above the average for children/adolescent intakes.



Outpatient Therapy Services – Adult

For the month of May the Adult Outpatient Team provided individual and group therapy for 267 individuals in mental health focused treatment, and for 106 individuals primarily working on substance use related issues. We also served 16 individuals in our Substance Use Disorder focused Intensive Outpatient Program. While the number of SUD clients seen in May was right around average, this was the lowest level of utilization of our IOP, and the highest number of MH clients seen this year.



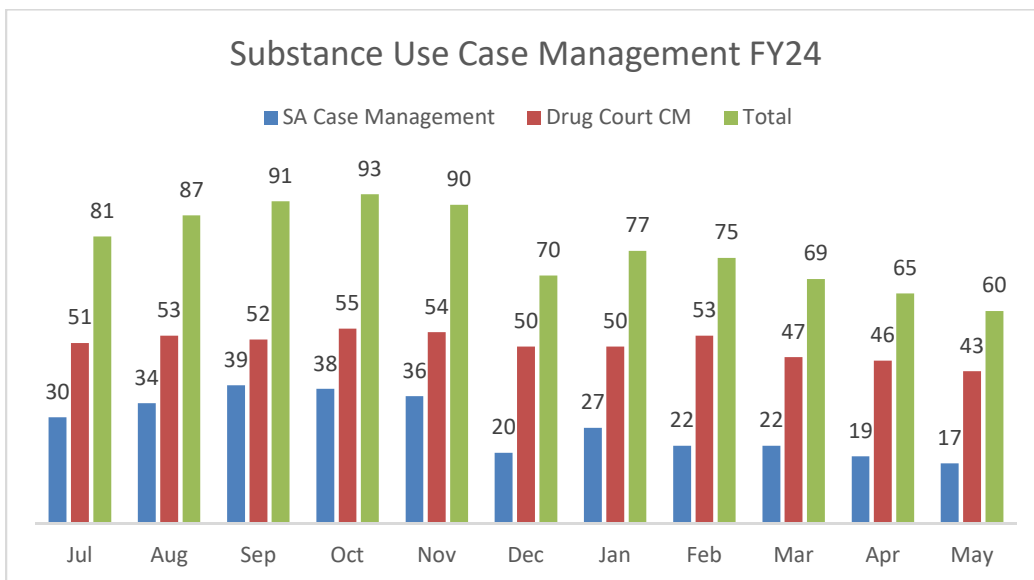
Child Outpatient and Early Intervention - School Based Services

The Child/Adolescent Outpatient team provided individual therapy services to 423 clients, and at times their families, in the month of May. Currently we have 595 individuals enrolled in child/adolescent therapy services. Both the services provided, and enrollment number, are slightly above average for this fiscal year. The team remains two FTE's down, it will be back to full strength before the end of June with one of our new teammates starting first thing next week!

Our Early Intervention Clinicians, who work at various schools in the city and county, provided 227 client contacts to 70 different individuals. This is the second lowest amount of client contacts provided by this team, and the number of individuals seen was well below average for the year. This is almost certainly due to that team losing a full-time member relatively recently.

Substance Use Case Management Services

There is small team of case managers that operate within the Adult Outpatient team that focuses on working with client’s who struggle with substance use issues, and are frequently legally involved (probation, Drug Court, etc.) In the month of May our SUD case managers served 60 individuals, with 43 of those being referrals from the local drug court program. Both numbers fall below average for this fiscal year.



Care Coordination Services

The Care Coordination team continues to offer assistance for clients that either do not meet criteria for case management or, in some cases, are awaiting being opened to case management. Overall the team served 22 clients for the month of May which represents the fewest clients served by the Care Coordination team since it launched in August, immediately following a month where the CC team set their record of 47 clients served in April. Finding resources related to housing and income needs were the two most common issues that the CC team helped clients out with this month.

Children’s Mental Health Outreach Services

Referrals numbers continue to be high for the 3 teams of Children’s Mental Health Outreach Services: Case Management, Case Supports, and Family Care Coordination, though the referral waitlist has continued to be maintained right around 30 clients. Each service reflects variations in funding sources as well as case intensity, with FCC clients tending to be the most complex and labor intensive as those client have either already been removed from the home, or are in



danger of being removed. Final billing numbers for May are not yet fully in, but in looking at the full numbers for April 299 clients and families were served by the three teams which sets a new high of client utilization for the fiscal year and marks two months in a row of 290+ clients being served by our children's case managers and family care coordinators.

Behavioral Health Wellness

The Behavioral Health Wellness (BHW) team continues to offer trainings and promote education and awareness of mental health and substance use related issues in our community. This month the BHW team completed 6 general education sessions for community health workers related to mental health, substance use, and trauma. They also led 3 REVIVE Lay Rescuer Trainings for both community health workers and general community members, 1 2 hour Mental Health Basis training for 13 clients of Church World Services, and 1 8 hour Mental Health First Aid training for general community members.

Other highlights from the month included participation in an event at Harrisonburg High School that was part of recognizing May as Mental Health Awareness Month, as well as attending the Harrisonburg Farmers market providing a number of Rapid REVIVE trainings and providing information on important resources. The BHW team also ran a Facebook campaign related to National Fentanyl Awareness Day which had a reach of 415 people.

Community Mental Health Services

There are approximately 375 unduplicated individuals in our Community Mental Health Services (CMHS) programs. The CMHS department consists of services to adults age 18 and older with a diagnosis of serious mental illness such as schizophrenia, bipolar, major depressive disorder, or schizoaffective disorder. CMHS programs include Case Management, Supervised Living Residential, Mental Health Skillbuilding Service, Peer Recovery Services, Permanent Supportive Housing, Psychosocial Rehabilitation and Assertive Community Treatment.

Adult Mental Health Case Management (MHCM)

The Adult MHCM team has benefitted from several months of staffing stability, but marked the retirement of seasoned HRCSB case manager Lisa Bange at the end of May. Lisa had worked as an Adult MHCM for the last 2 ½ years, but touched countless lives in her many years of service working at Summit House, at Dayton House residential program, and in her first role with the agency as a Community Living coach. Our team has benefited from the wisdom and caretaking spirit of Lisa, and we wish her well in her retirement.



The MHCM team is adjusting to start of the Assertive Community Treatment (ACT) team, and the phasing out of HRCSB community based mental health skillbuilding services. We are looking forward to the continued growth of the ACT team and the team's ability to more effectively serve the needs of some of the most acute clients. We will need to adjust and creatively explore ways to meet the needs of clients who will no longer be able to have skillbuilding services through HRCSB. The MHCM team is exploring some options for adjusting caseloads to meet the needs of medically intensive clients.

Peer Recovery Services

In March the Peer Program welcomed two new Peer Recovery Specialists. Tara Moats is our peer in the Permanent Supportive Housing program. She has completed the Department of Behavioral Health and Disability Service's 72 Hour Peer Recovery Specialist training and is looking forward to becoming certified, and then registered with the Virginia Board of Counseling. Tara will also be providing peer support services to the residents at Harrisonburg Redevelopment and Housing Authorities' Commerce Village apartments twenty hours a week. Hallie Hartman is hired as the Assertive Community Treatment (ACT) team Peer. Hallie is a certified, and registered peer recovery specialist with the Board of Counseling, and is providing support for members enrolled in the ACT Program. Xander Levien, is a Board of Counseling certified and registered substance used disorder peer recovery specialist and has a growing caseload and has done an amazing job of helping his clients find, and sustain, recovery. Anna Kelly, is a mental health peer recovery specialist who is certified and registered with the Board of Counseling. She continues to excel at helping her clients form a healthy support system. Anna has been assisting her clients in creating Wellness Recovery Action Plans and as a reward for the clients' hard work she took them to Lake Anna this month as a social outing.

Each of our peer recovery specialists in the program is in the process of becoming REVIVE! trained so that they can provide naloxone (NARCAN), and harm reduction supplies, to identified clients.

We are excited for the growth that has taken place with the goal of expanding our Peer Recovery Services into other programs in the agency.

Permanent Supportive Housing (PSH)

Highlights of the Permanent Supportive Housing program have been the hiring of a PSH Case Manager in May. Adding to our team to help our clients succeed in our program by assessing client needs, linking them to resources and monitoring the effectiveness of those resources in supporting independent living.

PSH Supervisor and the Lead Housing Specialist have been working on networking to find landlords who are willing to work with our PSH program. Since January, we have recruited two



new landlords who are making apartments available to program clients. A real estate developer is planning to build 17 efficiency units next summer with the hope of filling all of the units with PSH clients.

PSH Housing Specialists and our Program Assistant attended an Excel spreadsheet training provided by our regional Continue of Care office. The training benefits the PSH program in keeping up with client tracking and data.

Between the months of February through May, PSH has moved 7 clients into apartments.

We have 30 clients actively enrolled in our PSH services, one of them being unhoused and 4 clients are incarcerated.

Summit House Psychiatric Rehabilitation Service

Summit House currently has 55 active members and 6 full-time staff. We are continuing to take referrals. Member participation in work units has increased. All participation in work units is voluntary and strongly encouraged as part of the day's activities. Most members complete at least one task each day of attendance. The Maintenance Unit has planted a garden. Unfortunately, a groundhog ate some of the plants. We are working to put up some chicken wire to prevent this from recurring. The Kitchen Unit continues to make and clean up lunch for Summit House every day. The Clerical Unit answers phones, makes announcements, produces a quarterly newsletter, prints sign in sheets, activity sign-up and makes birthday cards for members.

Summit House provides members with a variety of psychoeducation and socialization groups covering topics such as bipolar disorder, Dialectical Behavior Therapy, artwork, driver's education preparation, and sexual health and wellness to name a few. Of note, Summit House members lead some of the groups.

Summit House programming includes community integration and social recreation opportunities. Community integration and social recreation activities provide Summit House members with opportunities to participate in the community in activities that they might have difficulty accessing otherwise. In addition, community based activities provide an opportunity for members to practice skills in a different setting with staff available if needed or wanted for support. Two popular activities this past month were going to the Wood Grill restaurant and the Massanutten Technical College Car & Truck Show. Summit House also had a fun and successful Memorial Day picnic with grilled cheeseburgers, hotdogs and bratwurst at Hillandale Park. Summit House continues to volunteer at the SPCA and the Habitat for Humanity ReStore. Some members have goals of volunteering in the community on their own in the future. Now that it is spring, the Summit House members are receiving donations of organic vegetables from Radical



Roots Farm again this year. These foods are incorporated into the program’s daily lunches and also individually packed for members to take home.

Summit House once again has an operating snack bar. The snack bar is an ongoing fundraiser for the Pear Street Fund. The Pear Street Fund provides Summit House members with funding to do things that they might not be able to do otherwise. This year, Summit House is once again planning a “big” trip. Look for some Pear Street Fundraisers to fund a Summit House trip to King’s Dominion later this summer!

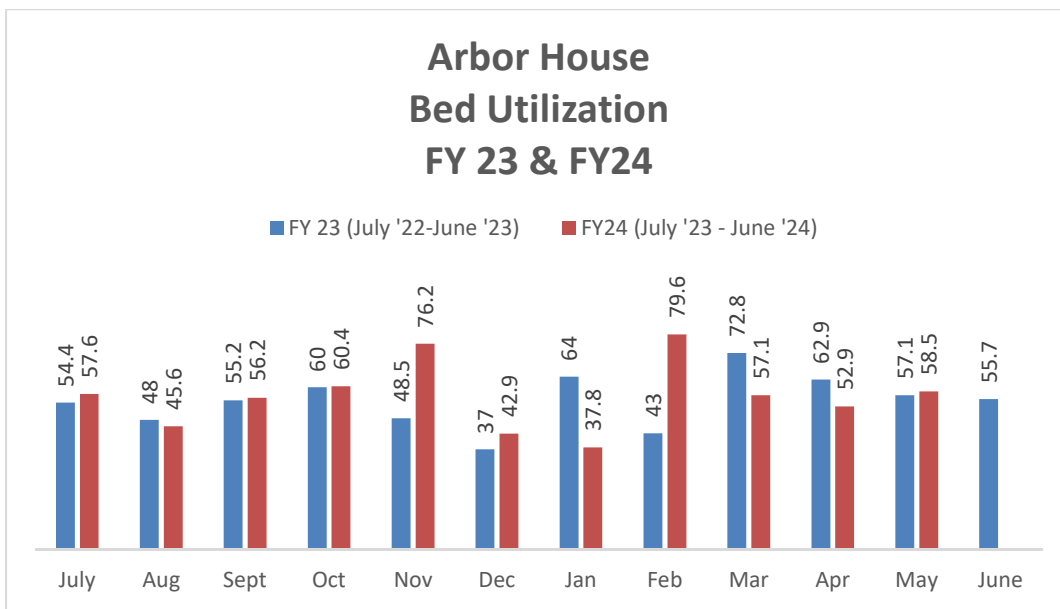
Western State Hospital (WSH)

Western State Hospital census report for April of 2024, HRCSB had a census per 100,000 of 12.7, and an average census of 17. Our region, Health Planning Region 1, had an average census per 100,000 of 9.3, and an average census of 163. HPR 1 consists of nine CSB’s: Alleghany Highlands, Encompass, Harrisonburg Rockingham, Horizon, Northwestern, Rappahannock Area, Region Ten, Rockbridge Area, and Valley.

Crisis Services

Arbor House (Crisis Stabilization Unit)

Arbor House continues to make efforts to build relationships with referring agencies in order to improve utilization and avoid higher levels of care whenever possible. The new Coordinator is taking on that challenge of building resources for the program, both for referrals and community supports for discharging clients. During the month, staff reviewed 24 referrals from within the HRCSB catchment area and throughout the region and offered admission to 17 individuals in crisis. May was certainly a month of celebration at Arbor House; seven staff members completed their graduate programs in Psychology, Clinical Mental Health, and Social Work. The relationships with local Universities gives an opportunity for HRCSB to collaborate in building strong clinicians in the field through diverse experiences within the agency and community.



Emergency Services

In this challenging market for recruiting licensed or licensed eligible clinicians, it can be even more challenging to recruit into Emergency Services. This team functions as the safety net for the agency and community, providing around the clock coverage for individuals in their most vulnerable moments of crisis. While the continued close relationship with Community Crisis Services works to provide resources to individuals in order to divert from the ECO/TDO process, ES continues to provide interventions while facing staffing shortages. During May, ES staff completed 44 Prescreening evaluations that have resulted in 20 Temporary Detention Orders (TDO), 14 voluntary admissions to a private hospital, and 6 releases to community supports. The dedication of this team in obtaining beds at private hospitals resulted in only one admission to a state facility during the month.

Community Crisis Services

During May, the Crisis Response continued to build partnerships with local first responders to maximize the ability to serve community members in crisis. The team made contact with 17 new adult clients and two new child/adolescent clients. There was also 54 follow-up services provided to individuals in order to promote community-based stability. When there was a need for a higher level of care the team was able to step in and issue 2 Officer Initiated Emergency Custody Orders (OIECO) by the RCSO Deputy on the team and facilitate seven hospital transports.

The Community Case Manager and Co-responding Community Paramedic continue to build their network of referrals and connections in the community through resources, peer support, and

treatment options. The process of referrals from HPD has been improved for efficiency and ability to respond quickly to community members, which opened the door for someone to see immediate changes in their mobility and independence. During this month, the Community Paramedic and Case Manager responded to 22 referrals for a total of 52 since the team became operational three months ago. There were 12 individuals connected to community resources and 11 who were able to access treatment. May also brought a new level of community coordination as the team met with local PD, Sentara staff, CRU, and the Blue Ridge Free Clinic to optimize services available to a client.

Developmental Services

DD Case Management

Developmental Disabilities (DD) Case Managers billed 305 units for the month April of with DD case managers from Valley Associates for Independent Living completing an additional 23 billable units. Case managers completed 623 separate contacts to assist with linking clients to services, or monitoring their satisfaction, including 248 face to face visits. They also completed 26 annual ISPs.

Currently we have 337 individuals receiving DD Case Management services, including 225 receiving Waiver services. Of those, 43 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 203 individuals on the DD Waiver Waiting list awaiting services. There are 43 individuals on Priority one status, followed by on 88 Priority 2, and 72 on priority 3. We received 6 requests for services, completed 6 screenings, and placed 4 people on the waiting list.

We are currently undergoing record reviews by DBHDS, through their contracted agency the Health Services Advisory Group, as well as via completion of the mandated Support Coordinator Quality Review process. These regular reviews are an important aspect of the Commonwealth's efforts to meet full compliance with Department of Justice Settlement Agreement. The latest judicial hearing to address compliance was scheduled for May, however the hearing was postponed after a continuance was issued. We are awaiting further information.

Infant and Toddler

We currently have three open full time positions, a Speech and Language Pathologist, an Occupational Therapist, and a new Service Coordinator position. Interviews are ongoing. We were pleased to welcome Alicia Lobo to our team as clerical support staff!

We continue to see referrals trending down slightly for the 2024 calendar year. We are still anticipating meeting our fiscal year program target of 455.

May was Early Intervention Awareness month. Throughout the month we used our Infant and Toddler Facebook page to highlight our staff and to provide some educational information on the specific roles played by various providers, such as Speech as Language Pathologists, Developmental Specialist, Physical Therapists, and Occupational Therapists.

Month	2016-2017	2017-2018	2018-2019	2019-2020	2020-2021	2021-2022	2022-2023	2023-2024
July	17	20	31	30	30	35	42	40
August	30	40	38	36	35	42	44	45
September	31	36	33	38	33	29	30	45
October	18	35	30	36	34	26	38	38
November	31	30	27	28	30	29	41	31
December	22	28	35	34	24	39	25	32
January	38	31	44	37	41	22	49	28
February	24	32	35	35	31	29	48	33
March	31	30	32	40	34	55	58	53
April	30	43	34	32	38	53	50	34
May	48	20	33	25	26	45	55	40
June	34	32	25	35	45	38	35	
Total Referrals	353	377	397	406	401	442	515	419
Child Count-Dec 1	127	162	173	195	201	193	225	259

We were pleased to welcome Chris Miller and Tammi Craver from the Harrisonburg Rockingham Department of Social Services for an informational session for our entire Developmental Disabilities department. Chris and Tammi provided an excellent, interactive training on a variety of issues related to both Adult Protective and Child Protective Services. We look forward to inviting them back again.

