



HRCBSB Board Report – August 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

Over the last month, the teams have been wrapping up reporting requirements for fiscal year 2024 and helping to bring the fiscal year to a closure. As we are closing out items, we look to this coming fiscal year with anticipation and excitement for the possibilities that await us this year. For example, for clinical programs, we are excited about the slow but steady growth of our Assertive Community Treatment program and team. We are excited about the impact the program is having on the first few clients enrolled in the program and being able to support them to maintain stability and independence in our community. We can see the potential for even greater impact on more clients as we continue to enroll more participants. We are excited about the impact that our Care Coordination activities are having with our clients and assisting them to get connected with community resources to address housing, employment, and healthcare needs to new a few. We are hopeful and optimistic that several internal projects and upgrades to software systems, while challenging to get set-up and implemented, will ultimately improve our systems and ability to achieve our goals. We are also seeing new employees joining the HRCBSB community which is helping us meet the increased demands for our services and provides new perspectives to help the agency continue to evolve and grow.

Rebekah Brubaker, LPC

Administrative Services

Compliance

The Compliance Department handled a number of audits this month, including 16 chart reviews. One was an on-site audit related to our DD services. QI Specialist Michelle Blumling and a DD staff member spent the day finding information and answering questions, and the resulting audit was clean. We greatly appreciate the effort of the Compliance Team to answer auditors' requests and demonstrate the agency's high standards. Nicole Ocheltree has been busy these past two months training Data and Business Analyst Brandy on the various state reports due regularly. We appreciate Nicole stepping up to handle our state data reporting these past months.



Michelle Blumling, our QI Specialist/Training Coordinator, has successfully transitioned our CPR/First Aid courses from the American Heart Association to the American Red Cross. It has taken a great deal of work, and preparation, but the newly certified instructors will now be able to train more people at one time.

Risk Management

Josh Dyke our Risk Management Specialist, has finished his circuit of Emergency Response training after visiting the Assertive Community Treatment (ACT) and Infant and Toddler Connection (ITC) staff meetings last month. He will soon be launching a new effort on Serious Incident Report training for now until the end of the calendar year.

Josh also worked with Compliance Manager Dana Dewing and Community Mental Health Director Adam Yoder on our Corrective Action Plan (CAP) response to DBHDS. They created a Transition Plan for the ACT team to demonstrate how the unit will function as staff recruiting continues.

Josh participated in Shenandoah Valley wide emergency planning Steering Committee meeting in Staunton in late July. This group is being convened by local officials over the coming year to plan for a variety of emergency situations, and Josh will represent HRCSB.

Facilities

Facilities Specialist Dickson Somers has handled a number of appliance failures at our various properties this month, including a number of HVAC units. Many of our units are over 20-years old and keeping them functioning can be a challenge. Dickson has also spent a great deal of time this month to successfully comply with fire and elevator inspection requirements. Finally, Dickson has been rock solid in adapting to the new Munis financial management system, creating countless purchase orders and learning more about the system than most other users. He is a resource to his colleagues.

Clerical

Clerical has been short-staffed with some unexpected extensive outages. Clerical Manager Jeannie Turner is happy to report that a new staff member will be starting Monday, August 12. We are excited to welcome Loida Campos Buruca to the team.

Information Technology (IT)

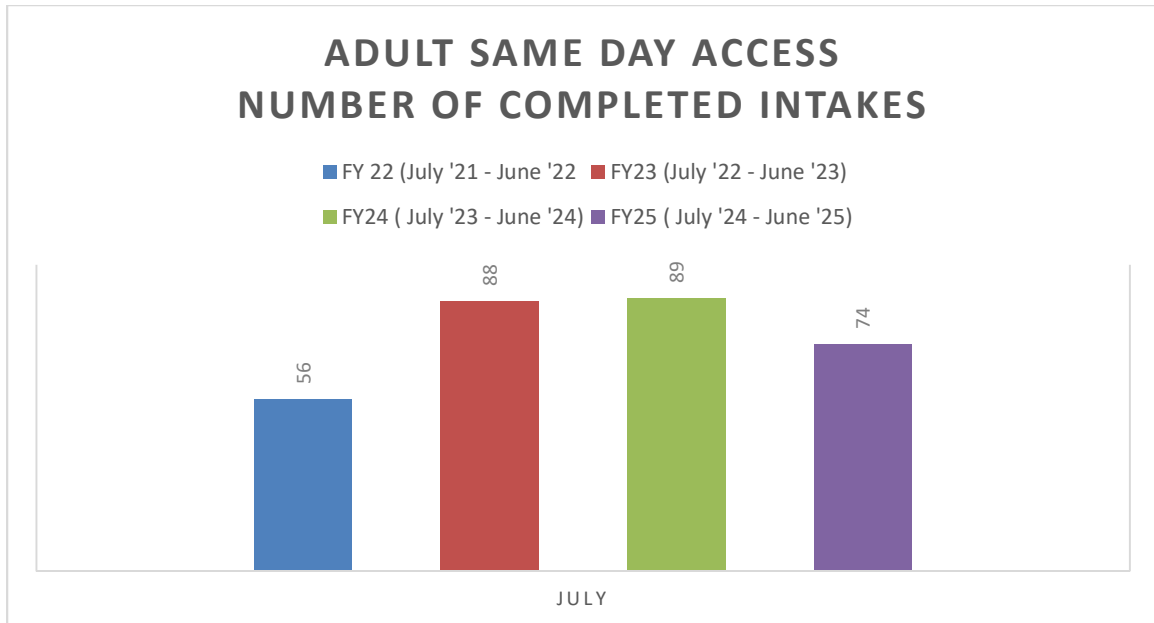
New IT Manager Jeremy Wilson started with HRCSB on Monday, July 29. He comes to us with a wealth of experience from a variety of different workplaces and companies, providing him with

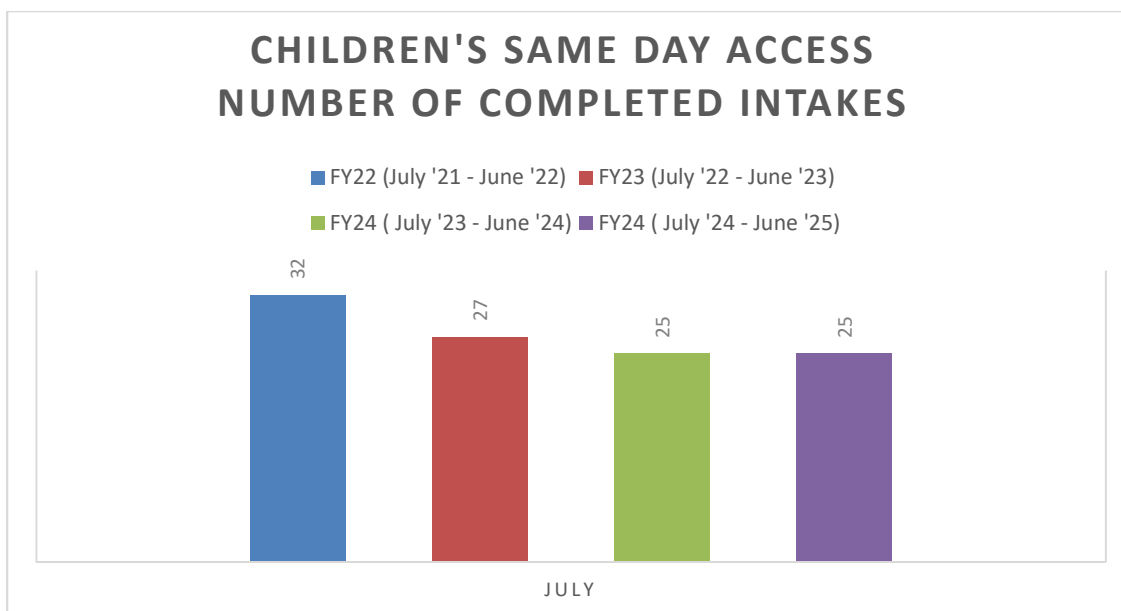
a wide spectrum of skills that will prove useful to us. His team is currently briefing him on HRCSB systems and processes.

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 July, the Same Day Access team completed 74 intakes for adults and 25 intakes for child/adolescent clients. On average for Fiscal Year 2024 (July 1, 2023 – June 30, 2024) we completed 76 adult intakes per month and 44 intakes per month for child/adolescent intakes. Generally, during the summer months and in particular the month of July, we see a decrease in children/families seeking services, which is consistent for July 2022, July 2023 and now July 2024. While the team completed less intakes for children and families, the sense is that those new clients coming in are presenting with very intense symptoms and situations. Based on previous years, we anticipate seeing an increase in children and families seeking services starting in August.





Outpatient Therapy Services – Adult

For the month of July, the Adult Outpatient Team provided individual and group therapy for 287 individuals in mental health focused treatment, and for 95 individuals primarily working on substance use related issues. We also served 21 individuals in our substance use focused Intensive Outpatient Program. While the number of clients seen in typical substance use therapy was lower than average, the IOP client numbers were right at average, the number of mental health therapy clients seen was the third most in any month going back to 2020. Once again it should be highlighted that with new therapist Levi Fuller joining later in August, the Adult OP team will be fully staffed for the first time in a little over a year!

Child Outpatient and Early Intervention - School Based Services

The Child/Adolescent Outpatient team provided individual therapy services to 391 clients, and at times their families, in the month of July. Currently we have 584 individuals enrolled in child/adolescent therapy services. The number of clients enrolled is right around average, while the number of clients actually seen for therapy is somewhat lower than average but again this is expected around this time of year. It might also be noted that our two new therapists, Ashley Oginz-Wilson and Alysha Scott, have finished all of their orientation and training and are both seeing new clients and building up their caseloads.

Our Early Intervention Clinicians (EIC) remain on break but they are only a couple of weeks away from starting back up with services. Unfortunately, we have had a recent resignation from the EIC team, but we also have a new clinician, Andrea Yoder, starting with us in August. We have



also had a number of promising interviews lately so hopefully we will have news about even more new members joining the EIC team soon.

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 July our SUD case managers served 73 individuals, with 49 of those being referrals from the local drug court program. Both numbers fall a little below average for the year, but it also might be noted the team is currently one staff down with one of our case managers out on maternity leave.

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 59 clients for the month of July, which is, not only well above average for the program, but is by far the most clients served by the Care Coordination team since the program started. Finding resources related to housing, income, and medical care were the most common needs served by the team, but it also might be noted that they helped 5 people gain admission to inpatient treatment for drug/alcohol use.

Children's Mental Health Outreach Services

The waitlist for Case Management, Case Supports, and Family Care Coordination 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 clients have either already been removed from the home, or are in danger of being removed. Final billing numbers for July are not in yet, but in looking at the full numbers for June 289 clients and families were served which is the first time in three months 290+ clients were not served, but that is still well above the average for the past year. Unfortunately one of our case managers resigned so she could go be closer to home, but the interview process is well underway and we've already met with a couple of very promising candidates.

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 1 REVIVE Lay Rescuer Training at the Harrisonburg Central Library, 1 Mental Health First Aid training for 19 community members from Sentara RMH and

Shenandoah Valley Head Start, and 1 “Understanding Adverse Childhood Experiences (ACES)” workshop for 20 members of the community (also hosted at the Harrisonburg Central Library).

Other highlights from the month included attending the Harrisonburg Farmers Market, providing resources to community members like 10-minute Rapid REVIVE trainings, as well as providing naloxone and fentanyl test strips to those who participated in the training. Utilizing the agency Facebook page the BHW team highlighted July being BIPOC Mental Health Awareness Month and a little over 200 individuals interacted with that material. Finally, it should be noted that 120 radio ads were run in cooperation with Harrisonburg Radio Group and it is estimated that those ads reached over 6,200 listeners. These ads highlighted the Lock and Talk and 988 programs.



Community Mental Health Services

There are approximately 370 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, Hospital Discharge Coordination and Assertive Community Treatment.

Assertive Community Treatment

One of our clients who had been struggling with severe symptoms of his mental illness (hallucinations, paranoia, delusions, pressured speech), has shown progress and in a variety of ways. Prior to this, he would regularly arrive at the agency and present in a confrontational and agitated manner, which concerned staff and clients in the waiting room. It was common for numerous interventions by emergency services to de-escalate the client. The team's capacity to offer specialized services have allowed us to consistently provide him with medication and a spending stipend on a daily basis seems to have assisted with alleviating some of his symptoms. He has become calm, goal-directed, and oriented to reality. There has not been an emergency intervention needed because of his behaviors over the recent weeks.

Two staff members attend the Assertive Community Treatment 101 training this month. The program is continuing to develop processes and procedures that enhance the team's capacity to coordinate well and reach goals for client care and treatment modality fidelity. The team admitted its first client into an outpatient substance use program who had previously been ambivalent about receiving services. The team is growing in its understanding of best practices when working with individuals with co-occurring disorders.

Our program's housing specialist began training and coordinating with our agency's Permanent Supportive Housing team and has taken on more responsibilities to oversee housing needs for our clients in recent weeks.

Hospital Discharge Coordination

We are currently recruiting a hospital discharge liaison to assist and coordinate with state psychiatric hospital discharge planning. We are receiving applications and leads weekly. We have two interviews scheduled for early August. The number of patients from our catchment at state hospitals has decreased overall the last couple of months due to successful discharge planning and coordination.

HRCSB continues to collaborate with several state hospitals on discharge planning needs. Clients with court ordered treatment remains at 10 individuals. Hospital admissions include individuals with mental health treatment needs, forensic needs, competency restoration and Not Guilty by Reason of Insanity cases.

Case Management

The Adult Mental Health Case Management team has a staff vacancy, but continues to work together to meet the needs of our existing and new clients. The lack of affordable housing in Harrisonburg City and Rockingham County continues to be one of the most significant challenges that case management clients and case managers face, and the team works daily



with our clients who are homeless both directly on housing and on other needs caused by this unmet basic need. We are grateful for the work of the Permanent Supportive Housing team at HRCSB to build relationships with landlords and solutions for homeless and unstably housed clients.

The CM team in July implemented a specialized caseload for clients with intensive and complex physical health needs in response to the ending of community based Mental Health Skill Building services at HRCSB. The CM team worked creatively together on transfers and caseload adjustments to more effectively meet the needs of clients who need consistent intensive support to ensure their continued stability.

Permanent Supportive Housing Program

Permanent Supportive Housing (PSH) program is looking for property to renovate or new construction to possibly house our clients and manage the property. In doing so, CSB has signed two Memorandum of Understanding (MOU) to provide support services to clients who would live in new construction. One property for possibly 17 new build efficiencies or 5 new build efficiencies to begin building summer 2026.

Housing Specialist and Program Assistant completed a housing market study to show data of housing issues in Harrisonburg. The housing study will be shared to City of Harrisonburg in hopes to provide more affordable housing for our clients within our city limits.

In the months of June and July Permanent Supportive Housing Team has moved in 1 client.

We have 30 clients enrolled in our Permanent Supportive Housing program, 3 of them being unhoused and 1 client is incarcerated. We have 40 clients on our referral/waiting list.

Permanent Supportive Housing Specialists plan to move a client in to an apartment at the beginning of August when a unit is ready. Due to our connection with landlords, there will be 3 additional properties vacant in coming weeks for us to possibly move our unhoused clients if they chose to do so.

Summit House Psychosocial Rehabilitation Program

Summit House has about 50 active members and remains fully staffed. Summit House has completed 5 intakes for new members and 2 discharges since June 1, 2024. Summit House is actively seeking referrals for new members.

Summit House provides members with various opportunities. On Tuesday afternoons, members have the opportunity to get free organic vegetables from Radical Roots Farm. Summit House had a fun time celebrating July 4th one day early at Hillendale Park with a picnic, music and games. Summit House is looking forward to going to King's Dominion on August 6, 2024. It is the first "big" trip since 2020. Current groups at Summit House are Healthy Communication, Self-esteem, Painting, Money Management, Managing Conflict, Tobacco Cessation, Driver's



Education preparation, Art Therapy, Co-occurring Disorders, Managing Grief, Walking/Leisure, Bingo, Dialectical Behavioral Therapy (DBT) and some topics to be determined. Summit House's Community Integration Unit continues to volunteer at the Rockingham Harrisonburg Society for the Prevention of Cruelty to Animals (SPCA) and at Habitat for Humanity's ReStore. Three Summit House members have been invited to a volunteer appreciation lunch by the ReStore.

Summit House also comes with its own challenges. About 13 groundhogs have been caught in live traps around Summit House. The groundhogs had chewed through wiring for the alarm system and had eaten some of the plants in Summit House's own garden. We have put up chicken wire around the garden to protect it. The hot weather has required that we water the garden.

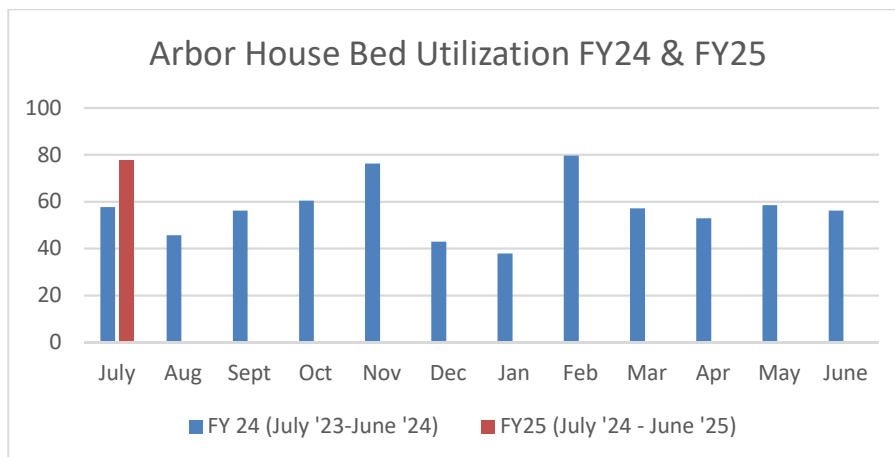
Western State Hospital (WSH)

Western State Hospital census report for May of 2024, HRCSB had a census per 100,000 of 10.8, and an average census of 14. Our region, Health Planning Region 1, had an average census per 100,000 of 9.5, and an average census of 166. 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)

In August, the Arbor House bed utilization rate was 77.6% that is a significant improvement over the same month last year. Intentional efforts are being made to improve the utilization rate, which are apparent in this improvement. While the program continues to face staffing challenges, specifically nursing, staff have worked to use strategic scheduling in order to reduce the effect on the program. Arbor House was also able to onboard four new hourly staff members in order to build the team for the best possible service provision and coverage. During August, Arbor House staff coordinated with other HRCSB departments and local community partners to accept 10 referrals from the HRCSB catchment area and our regional partners.



Emergency Services

Emergency Services continues to provide immediate crisis services in the agency and community; meeting the needs of any client in crisis to be able to determine the least restrictive treatment available. While continuing to operate with several open positions, this team provides 24/7 service delivery to community members during critical moments and is faced with increasing administrative expectations as required for the process. During July the team completed 58 Prescreening evaluations that have resulted in 22 Temporary Detention Orders (TDO), 20 voluntary admissions to private hospitals, and 8 releases to community supports. With the challenges at our state hospitals related to capacity, this team does tremendous work only utilizing that option when all other resources have been exhausted. For the month of July, this has resulted in only three admissions to a state facility, one of those forensic and one geriatric (fewer private facilities serve this population).

Community Crisis Services

Community Crisis Services welcomed a new Supervisor, Rebekah Holland, LPC has taken on the role and has led the team to one of the busiest months in the program. The team continues to grow and develop the services that will reduce the risk of hospitalization and allow individuals to be served within their community. The Crisis Response Unit (CRU) engaged 41 new clients during the month including 4 child/adolescent clients, completed 89 follow-up services, 3 officer initiated Emergency Custody Orders (OIECO), served 3 Magistrate Issued Emergency Custody Orders (MIECO), followed up on 44 referrals from HRCSB, 6 in progress 911 follow-ups, 28 follow-ups for calls for service (911 calls), and provided 3 voluntary rides to SRMH. The goal of the team is to outreach individuals in the community in order to provide and connect with services that will ultimately reduce the need for future law enforcement involvement and serve clients in the least restrictive environment.

Developmental Services

DD Case Management

Developmental Disabilities (DD) Case Managers billed 304 units for the month June of with DD case managers from Valley Associates for Independent Living completing an additional 21 billable units. Case managers completed 635 separate contacts to assist with linking clients to services, or monitoring their satisfaction, including 203 face to face visits. They also completed 40 annual ISPs.

DD Case Managers completed their DBHDS training on the new Individual Services Plan (4.0). The new state-mandated plan contains several modifications intended to better meet Department Of Justice Settlement Agreement requirements for data collection and service improvement. Unfortunately, we were notified that there will be an indefinite delay in implementation of the new plan due to the need for further testing.

In July we worked with DBHDS to complete the on-site review of our Support Coordinator Quality Review documentation. Thank you to our Quality Improvement staff for sitting in on the review, and for all the assistance in completing the reviews.

Currently we have 346 individuals receiving DD Case Management services, including 262 receiving Waiver services. Of those, 49 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 235 individuals on the DD Waiver Waiting list awaiting services. There are 59 individuals on Priority one status, followed by 100 on Priority two, and 76 on priority three. We received 4 requests for services, completed 16 screenings, and placed 23 people on the waiting list.

We received confirmation from DMAS and DBHDS regarding our allocation of DD Waiver Slots for FY25. We will be receiving 24 Family and Individual Support Slots, and 3 Community Living slots, for disbursement quarterly. As a refresher, Medicaid waiver slots are the source of funding for all waiver services in Virginia, including such services as personal assistance, supported living, group home placement, day supports, assistive technology, etc. Each year Virginia's General Assembly approves a certain number of waiver slots. These slots are then allocated to each CSB based upon several factors, including population and number of



individuals on the DD Waiver waiting list. Once those slots are allocated to a CSB, we begin the process of working with a local Waiver Slot Allocation Committee (WSAC), whose task is to review individuals on our Waiting List to determine which individuals receive a slot. In this process, it is the CSB’s responsibility to maintain an accurate Waiting list, provide the WSAC with accurate information to assist with their decisions, and then to assist clients with obtaining services once they receive a DD Waiver slot.

Infant and Toddler

The Infant and Toddler Connection team provides Occupational Therapy, Physical Therapy, Speech Therapy, Developmental Services, and Support Coordination for children from birth to age three. The majority of these services take place out in the community, in the child’s homes where our staff can provide the services as part of a family coaching model. We currently have full time Speech and Service Coordination position open, as well as hourly Occupational Therapy and Speech Therapy Positions.

The team welcomed Rebecca Metcalf, new Occupational Therapist to the team in July. Her addition will help to address the current waiting list for services which has grown as a result of months of high referrals (see chart below) paired with some ongoing position vacancies.

Month	Referrals July 2023-June 2024	Referrals July 2024 to June 2025
July	40	35
August	45	
September	45	
October	38	
November	31	
December	32	
January	28	
February	33	
March	53	
April	34	
May	45	
June	29	

We were pleased to welcome several students from the James Madison University psychology program to spend the day with us, meeting with providers and getting a better understanding as to the importance of early intervention. We look forward to future opportunities to partner with JMU in this area.

