

HRCBSB Board Report – September 2018

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Message from the Executive Director

The final figures for retraction of state general funds to all 40 CSBs has yet to be released for both FY2019 and FY2020. The budget reduction is part of the larger Medicaid Expansion bill passed by the General Assembly in 2018 and predicated on the assumption that the funds can be recouped through higher volumes of billing for services rendered to Medicaid recipients. The total system budget reduction is \$11.5 million in FY2019 and \$25 million in FY2020. Discussions across the state on the formula for distribution for these cuts were finalized mid-summer and CSBs are tasked with opting for the FY2019 start-date for retractions as soon as final figures are released.

“The System Transformation Excellence and Performance (STEP-VA) is an innovative initiative for individuals with behavioral health disorders featuring a uniform set of required services, consistent quality measures, and improved oversight in all Virginia communities (dbhds.virginia.gov).” The first of 9 steps involved the implementation of Same Day Access in all 40 CSBs with a completion date of January 2019. Primary Care (medical) screening is the second step and will be defined and operationalized in FY2019. A cross-disciplinary team is currently deliberating the parameters of the screening and anticipated outcomes as a result of each screening. This formative process should be wrapped up by mid-fall and will quickly be moved to implementation before winter 2018.

Ellen Harrison, LPC, MBA

Administrative Services

Building Update

Mather Architects continue to work on layout configurations for the interior of the Main Street building and the renovation at McNulty Center. This iterative process is helping us to refine space and location priorities among the various departments and flow of visitor traffic. In addition, site planning is beginning to provide detailed surveys of each

property which will include property lines, topography, above and below ground utilities, structures, roads, easements, setbacks, and zoning.

Same Day Access Model

The Department of Behavioral Health and Developmental Services (DBHDS) has contracted with MTM Services, the developers of the Same Day Access Model, to offer SPQM (Service Process Quality Management) to each CSB for the next two years. This system is designed to utilize current service data without any additional keying of data, and provide graphical and table based reports that are user friendly. SPQM will not replace any current reporting but is supposed to make the information more informative for the needs of the larger system and to each Board. We are currently reviewing the SPQM contract and business associate agreement.

Training

Lieutenant Cindy Cull-Wright of the Rockingham County Sheriff's Department provided a Threat Response workshop on two separate occasions in August to enable as many CSB staff as possible to attend. Response was very good with about 130 staff in attendance at one of the two sessions. Lt. Cull-Wright provided an active shooter response presentation in 2015 that was very positively received and we felt fortunate to have her back again to help educate staff on ideas for planning and response to threatening events. This unfortunately remains an all too relevant topic and one that we plan to continue to address with assistance from the newly created Risk Management Specialist position.

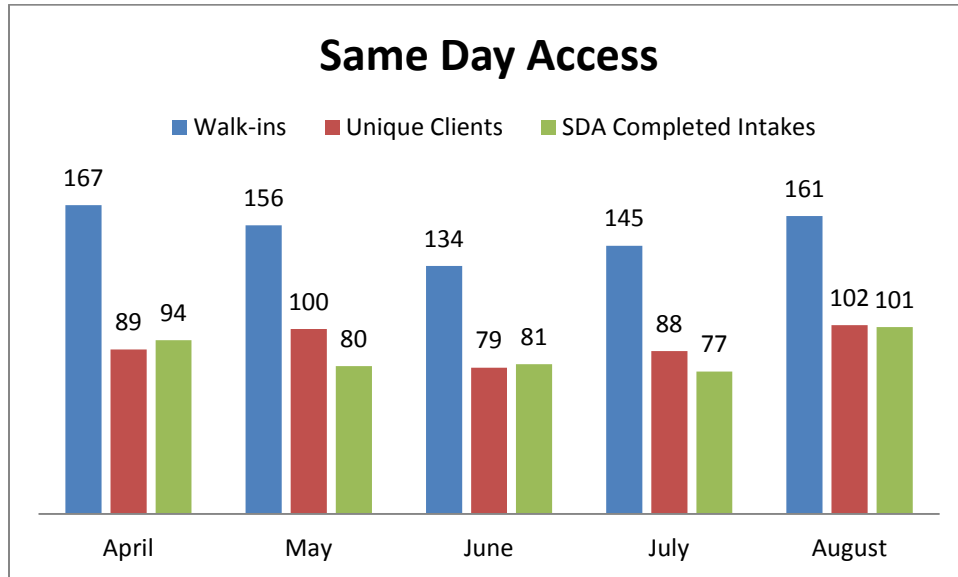
Adult Behavioral Health Services

Same Day Access – Adult Services

During the month of August, our SDA team was able to complete 101 same day intakes for adults. This is the highest number of completed intakes since we made changes in March to our same day access process. Although we continue to provide immediate access to an increasing number of individuals, we also had an increase in those turned away due to lack of available staff. In July we turned 2 individuals away and during August we turned away 11 individuals due to lack of staff availability. We will continue to monitor the flow of clients coming into our system to do our best to meet the demands when possible.

As noted, staff availability has been an on-going challenge. We strive to have the right balance of qualified staff available to complete the clinical intake. During the month of August, we added an additional clinician, Meg Cusack to our team as a full-time Same

Day Access Clinician. We are excited to have her as part of our agency and team. This additional staff person will help us continue to expand the capacity for same day access intakes, as well as, additional outpatient therapy capacity.



Adult Outpatient Services

Our Adult outpatient team continues to be impacted by the increasing numbers of individuals seeking services through Same Day Access. We provided mental therapy services to 262 individuals and another 132 individuals received substance use therapy services (this includes individual, group and Intensive Outpatient Therapy services). Both areas saw an increase of approximately 10% more clients served than the previous month.

We are excited to share that our locality’s Drug Court Program was the recipient of a Substance Abuse Mental Health Services Administration grant. A portion of the grant will provide additional resources to expand substance use services within our agency and provide targeted treatment to participants within the Drug Court program. The grant will allow our community to increase the number of participants in the Drug Court program from 20 to 40 participants per year.

Arbor House (Crisis Stabilization Unit)

For August, Arbor House our 7-bed crisis stabilization unit, had a 58.1% bed utilization, which means we averaged 4 ≥ beds filled. For fiscal year 2019, we have an average utilization rate of 69.6%, this is below the 75% utilization required by Department of Behavioral Health and Developmental Services (DBHDS).

Community Recovery Services

Summit House is a psychosocial rehabilitative service (PSR) that provides opportunities for members to engage in targeted activities to restore, and at times enhance, the individual's ability to manage their mental health symptoms. This can occur through educational opportunities, one-on-one coaching, trainings and/or a general facilitation of independent living skills through group and individual activities. In addition the program works to enhance social and interpersonal skills of the members.

During the month of August, Summit House members had several opportunities to participate in community outings. These activities help to facilitate opportunities for learning and applying skills learned and practiced during programming at Summit House. At the beginning of the month, 10 members and 2 staff visited The Great Smokey Mountains in Pigeon Forge Tennessee and spent the day at Dollywood Theme Park. On the way to Tennessee the group stopped and visited at Stepping Stones in Abingdon Virginia, which is a PSR program operated by Highlands Community Services Board. This visit provided the members and staff an opportunity to visit with others, learn about their members and program. The trip also provided an opportunity for several members to take on additional leadership responsibilities by being the primary planners and coordinators of the member trip. It was an exciting and rewarding experience for all that participated. In addition to the Tennessee trip, Summit House members had the opportunity to attend a Washington National's Baseball game and the Rockingham County fair; both events were well attended and enjoyed by the members.

Mental Health Case Management

Mental Health Case Management (MHCM) provides the overall care coordination for the majority of the clients who are accessing services within the Community Recovery Services team. A significant part of their job is to assess, link and monitor support services for clients. This can include helping to access social security and disability benefits, addressing housing needs, linking to medical providers, and providing overall support and resources to clients.

One of the members of our MHCM team is in a position designated to work with discharge planning for clients who are being discharged from state hospitals. Our Community Liaison position works closely with the staff at the state hospitals and within our agency to coordinate services for clients following their discharge. This position helps to provide support to clients during the transitional period between being discharged and services starting in the community. In addition, they are working as part

of the overall treatment team at the state hospitals to address any barriers to the client being discharged from the hospital.

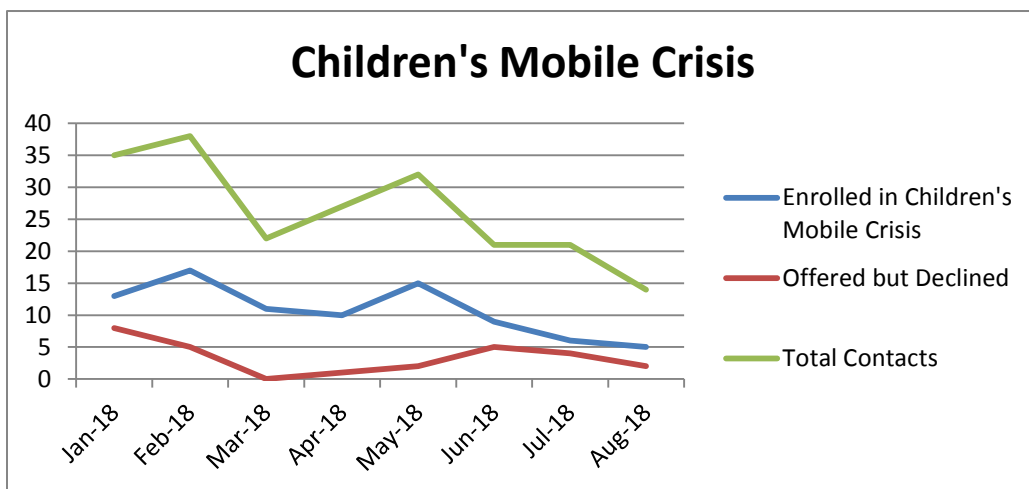
Western State Hospital

For the month of July, Western State Hospital (WSH) Census report, we had an average census of 19 and a census/100000 population of 14.3.

Child and Family Services

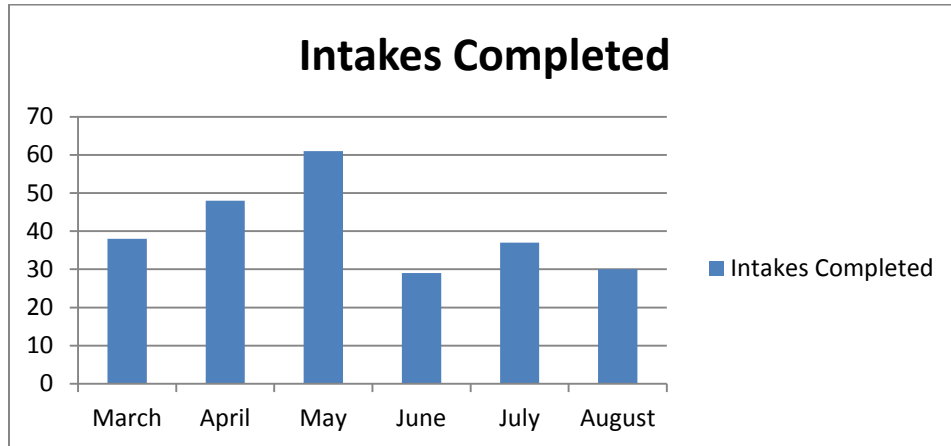
Children’s Case Management and Case Support

During August, we served 195 children in our case management and case support services. We are happy to welcome an undergraduate intern to our team for the fall semester from the JMU psychology program. Our Family Care Coordination program is increasing in the past few months as we work with the Court Services Unit and Department of Social Services to bring more children home from residential placements. John Wilson has been working with the principal of the new alternative school, Rockingham Academy (RA), to increase mental health support during the day to students with anger management and social skills challenges. Brandy Haden and Lynn Grigg have been working with RA to become a Trauma Informed School and have already held two in-school workshops for the entire staff. We will continue to have at least monthly contact with the school in a consultative and training capacity. It is not surprising that our Children’s Mobile Crisis program had a relatively slow month in August. We only received 15 inquiries during the month, but we are expecting an increase with the beginning of school.



Same Day Access

After six months of same day access we have yet to see a pattern emerge. We will continue to offer intakes three days a week and will adjust the number of available therapists for this service as needed.



Outpatient Services

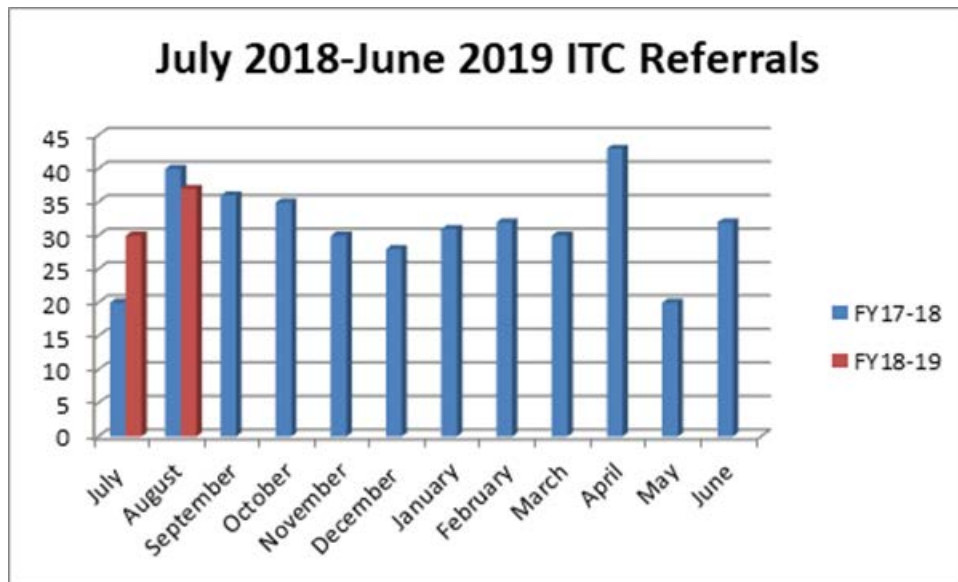
The big news for our children’s outpatient staff is that two of our full-time therapists are leaving us by the end of September. Stephanie May is taking advantage of a social work opportunity at a local hospital and Erin Trzell is going to take a position in another CSB that is much closer to her home. We will miss them very much. We have been advertising for the positions and are encouraged by our applications thus far. Our additional school based counselor positions have been hired and are in the process of being fully oriented. They will be starting in the schools in the beginning of September.

Behavioral Health and Wellness Coordinator

Our Behavioral Health and Wellness coordinator has been busy with community outreach during August. We hosted a booth at the local Hispanic Festival to talk about services offered at the CSB. We also provided trigger locks, medication lock boxes, and cable locks as a part of our suicide prevention efforts. We hosted a booth at the Broadway High School’s Back to School Night to explain our services and talk about trauma and the impact on learning. We provided a Mental Health First Aid to EMU’s counseling center as well as the congregation of a few local Mennonite Churches.

Infant and Toddler Connection

The Infant and Toddler Connection worked hard in August to transfer 31 children to school based services. We received 37 referrals this past month which makes for 67 this fiscal year. We currently have a child count of 166 infants and toddlers. We are happy to start a new developmental services provider and a new hourly occupational therapist.



Developmental Services

Developmental Disabilities (DD) Case Managers billed 280 units for the month of August, tying our highest ever monthly total. Contracted DD case managers completed an additional 17 billable units. Case Managers also completed 323 separate face-to-face visits with clients, either in their home, at their work or day support, or here at the CSB. During each visit, in accordance with Department of Justice settlement agreement guidelines, Case Managers are documenting client satisfaction with services, that their current treatment plan is being implemented properly, and identifying any previously unidentified risks, injuries, needs, or other change in status. Case Managers also completed an additional 501 non-face-to-face billable activities, and 29 service plans in August.

We had 6 new requests for service in August, with a noticeable uptick in requests when Rockingham county and Harrisonburg City schools began their school year. Our Developmental Disabilities Waiver screener completed 5 screenings in August. We currently have 227 individuals on the DD Waiver Waiting list awaiting services. Of that 227, 84 are “priority one” or deemed most in need of services immediately.

It was confirmed that our FY2019 slot allocation is 9 slots total (2 Community Living Slots, and 7 Family and Individual support slots). In a fairly quick turnaround, a Waiver Slot Allocation meeting is set to take place on September 17th. As a way of reminder, the Waiver Slot Allocation Committee is made up of community volunteers who meet as



needed to review the cases of those individuals on the waiver waiting list, and to determine who receives a waiver slot.

Barring an unexpected setback, we should begin automatically uploading services plans from our electronic health record, Credible, to the statewide waiver management system, WaMS, sometime in September. This process began over a year ago when the Department of Behavioral Health and Developmental Services requested that all service plan data be entered into WaMS in order to make the service authorization process more efficient. In order to prevent case managers from entering data into two systems, CSB's have been working with electronic health record vendors to automate the process. We will be troubleshooting the new process over the next several weeks with a small sample before full implantation across the whole team. The HRCSB IT and Compliance teams have been of great assistance throughout this process.