

HRCSB Board Report – October 2018

Ellen Harrison (Executive Director)
Lynn Grigg (Child and Family Services)
Rebekah Brubaker (Adult Behavioral Health)

John Malone (Developmental Services)
Holly Albrite (Administrative Services)

Message from the Executive Director

Dr. Hughes Melton, Commissioner for the Department of Behavioral Health and Developmental Services, visited the HRCSB campuses for adult services and children’s services on September 20, 2018, spending several hours meeting with employees both impromptu and planned. He spent time listening to our reasons for celebration of success and hopes for the future in terms of the building out the public safety net of Virginia. He was quite interested in our long history of collaborating with colleges and universities around practicum and internship opportunities for students pursuing a variety of careers. HRCSB can proudly tout that we have hired many of our student placements, including those requiring supervision towards licensure, and thus “growing our own”. Dr. Melton has certainly begun his tenure as Commissioner at run by having already completed site visits of well over half of the 40 CSBs since starting in April 2018. We look forward to working closely with our state leadership around such important initiatives as STEP-VA and Medicaid Expansion.

Ellen Harrison, LPC, MBA

Administrative Services

The Board’s Quarterly Report will be held until next month’s meeting due to the training occurring this month.

Licensing Regulations – Incident Reporting

Changes to the Department of Behavioral Health and Developmental Services (DBHDS) licensing regulations became effective on September 1st and include new requirements regarding what qualifies as a client-involved serious incident and what follow up must be done in response. There are now three defined levels of incidents ranging from a Level I encompassing minor injuries up to a Level III which includes assaults and deaths. There are investigation and reporting requirements related to the more serious levels II and III that require prescribed analysis, documentation, and additional reporting. There are still many questions statewide about how to interpret and operationalize some of the requirements which seem more geared to inpatient settings and the developmental disability population. As of October 1st, we are pleased to welcome Dan Jenkins as the agency’s first Risk Management Specialist, a position created in part to proactively respond to these increased licensure requirements. We also look

forward to using his expertise in the areas of facility safety/security, disaster preparedness, and associated quality improvement activities and follow-up.

Medicaid

Efforts are still underway to prepare for the Medicaid Medallion 4 managed care initiative, which will include individuals previously insured under Medallion 3 and Family Access to Medical Insurance Security (FAMIS). Our region will go live in November with covered individuals choosing or being assigned to one of six managed care organizations (MCOs). Because of our experience with the Commonwealth Coordinated Care Plus (CCC Plus) program that began this past January, we feel well prepared to handle this transition which will bring almost all Virginia Medicaid eligible individuals into an MCO health plan. We anticipate about 200 current clients, mostly children, will transition to Medallion 4.

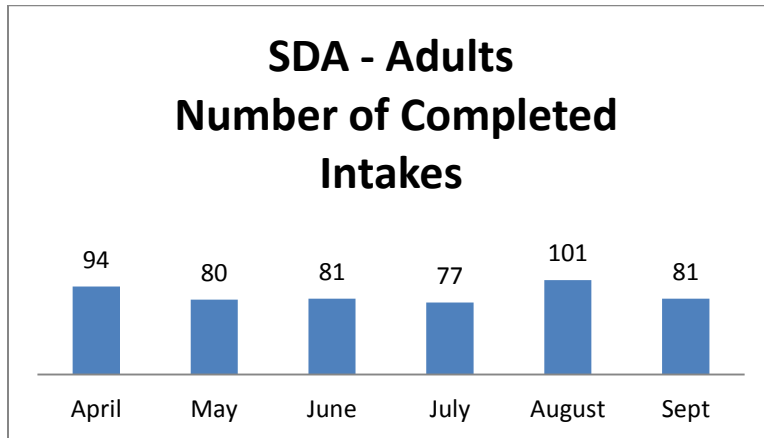
Clerical

Unexpected staff shortages, especially in key positions, are always challenging as we were reminded of in clerical services during September, but staff’s ability to pull together and truly work as a team were inspiring. Much appreciation is expressed to clerical staff for stepping up and embodying the best of CSB culture!

Adult Behavioral Health Services

Same Day Access – Adult Services

The end of September marks six months of our relaunching of Same Day Access (SDA). Numerous changes were made to improve our ability to address the increasing demands for services, including adjusting staffing patterns, increasing staffing capacity, gaining efficiencies in administrative and clinical documentation and improving policies to address client level of engagement. The SDA team continues to review the process and outcomes to ensure that we continue to stay on track with our goal of providing access to services at the point clients are ready to engage. During September, the team was able to complete 81 same day intakes for adults.



Adult Outpatient Services

Adult Outpatient Services provide a combination of individual and group therapy services. Clients are generally given group therapy services at the start of outpatient therapy with the option of individual therapy once they have engaged in services. We currently offer ten different types of groups. Several groups we offer more than once a week at varying times to better meet the needs of our client's availability. We have several groups that are tailored to specific needs, including a Spanish-speaking mental health group, a women's substance use group and a women's trauma focused group.

Arbor House (Crisis Stabilization Unit)

For September, Arbor House our 7 – bed crisis stabilization unit, had a 51.0% bed utilization, which means we averaged 4 ≥ beds filled. For fiscal year 2019, we have an average utilization rate of 46.9%, this is below the 75% utilization required by Department of Behavioral Health and Developmental Services (DBHDS). One explanation for the drop in our bed utilization this past month, was due to a brief period of time when we did not accept outside of catchment referrals due to the pending hurricane and concerns for safety in the event that our area was significantly impacted by the potential storm.

Community Recovery Services

Mental Health Case Management (MH CM)

We had two staff transitions that occurred during the month of August. We are happy to report that we were able to fill those positions in a timely manner. In mid-September, Andrew Classsen and Nina Yanez-Brant joined our case management team. We currently have ten mental health case managers working with close to 425 clients.

Summit House – Psychosocial Rehabilitative Services (PSR)

During September, Summit House had its annual car wash fund raiser. This fall the members raised \$556.02. These funds will be used to support member activities throughout this coming year. The members and Summit House staff are very thankful to all who were able to come out and show their support by getting their vehicle washed that day.

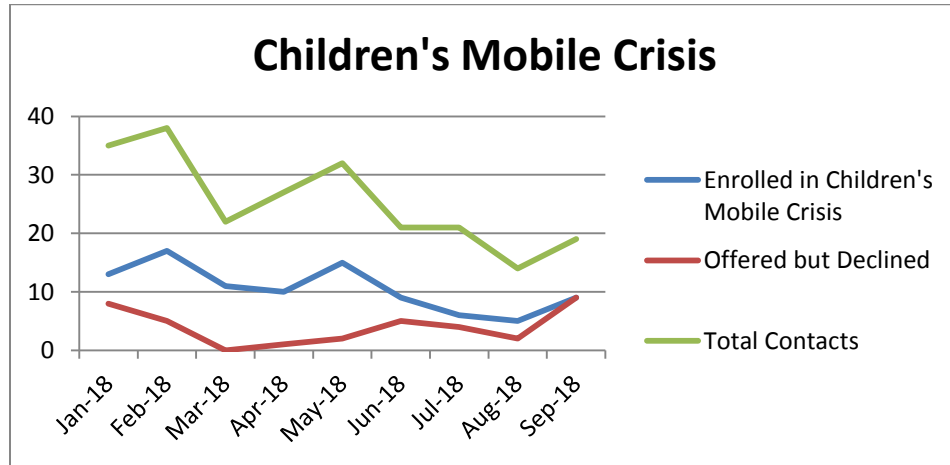
Western State Hospital

For the month of August, Western State Hospital (WSH) Census report, we had an average census of 20 and a census/100000 population of 15.3.

Child and Family Services

Children’s Mobile Crisis

Children’s Mobile Crisis is beginning to see an uptick in referrals. We had a total of 19 children and adolescents referred during a crisis episode. Nine of the referrals came from Emergency Services, Access, or other internal sources, six came from the schools, three from families, and one from a private provider.

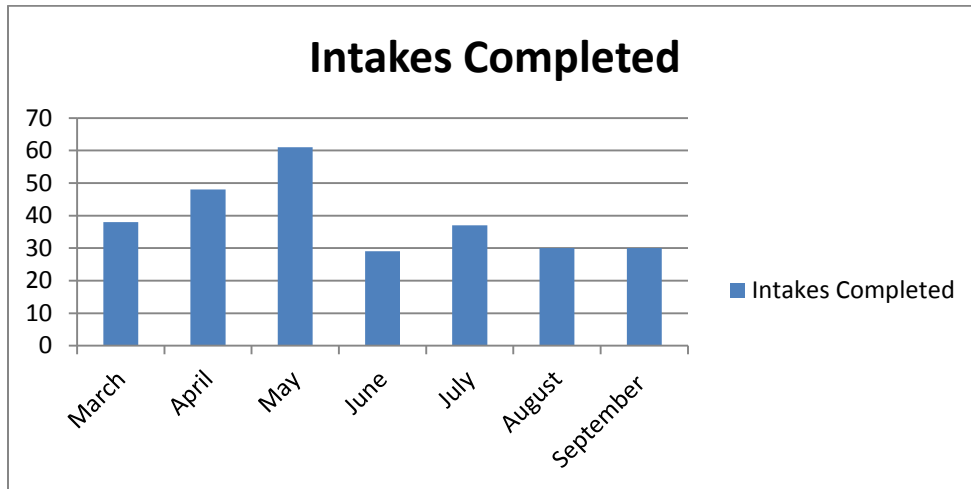


Behavioral Health and Wellness Coordinator

September was Suicide Prevention/Awareness month and we were able to put an announcement in the Daily News Record and provide brochures and posters to Harrisonburg High School to assist with their Suicide Prevention Week student service events. In our ongoing Opioid Prevention Treatment and Recovery (OPT-R) efforts we are contracting with Tracy Koblisch to provide 10 REVIVE! trainings this fiscal year. We also have obtained 302 Lock Boxes in two sizes. They can accommodate medications or a small hand gun. We partnered with Harrisonburg High Schools Student Ambassadors and bought mirror decals for the school bathrooms and other glass surfaces that have positive messages for all students. We were able to have some translated into Spanish, Kurdish and Arabic. We also worked with Rockingham Academy and several High Schools for the same decals for their buildings.

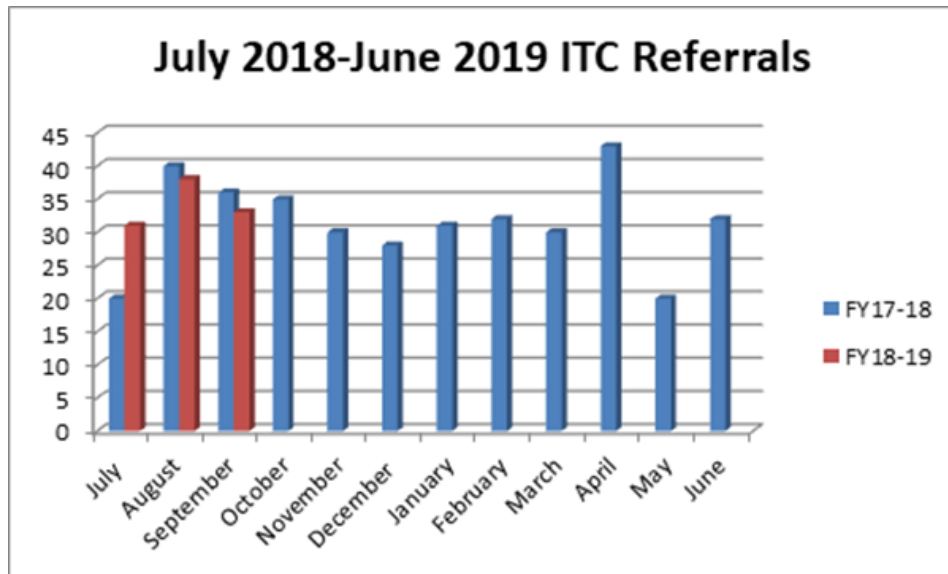
Same Day Access and Clinical Services

We are pleased that our school based Early Intervention workers are in their schools and starting to meet staff, administrators and students. We now have 5 workers who are in both Middle and High Schools of the City and County. Our outpatient team welcomes two new therapists in October. This will help to get our children off a waitlist and relieve the pressure on the current therapists with very high caseloads. We also utilize our case managers and have a current client count of 199. We serve 16 in our Intensive Care Coordination and 7 in our Court Services in-home program. Our intakes are staying steady and we completed 30 in the month of September.



Infant and Toddler Connection

The Infant and Toddler Connection of Harrisonburg-Rockingham CSB had 33 new referrals this month for services. That brings the total up to 101 referrals from July through September. This past month we added two new Developmental Specialist contractors and we are currently recruiting for a full time Speech Therapist to help handle the 169 children on our caseload.



Developmental Services

Developmental Disabilities (DD) Case Managers billed 283 units for the month of August, establishing a new high for monthly billings! Congratulations to Developmental Disabilities Case Management Supervisor Rob Slaubaugh and his team. Contracted DD case managers completed an additional 16 billable units. Case Managers also completed 295 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 445 non-face to face billable activities, and 24 service plans in September.

We had 12 new requests for Waiver Screenings in September, more than double our monthly average. As expected, Rockingham County and Harrisonburg City Schools are becoming more familiar with our referral process and are ensuring that many eligible students are getting screened. Our Developmental Disabilities Waiver screener completed 7 screenings in September. We currently have 221 individuals on the DD Waiver Waiting list awaiting a Waiver Slot. Of that 221, 75 are “priority one” or deemed most in need of services (immediately).

The Waiver Slot Allocation Team met in September and completed the difficult task of assigning eleven new Developmental Disability Waiver Slots. We are thankful for our dedicated community members who volunteer for this committee.

A brief update on the Center for Medicare and Medicaid (CMS) Final Rule. Beginning in 2014, CMS instituted new guidelines for all Home and Community Based waivers in the country. These guidelines were implemented to ensure that individuals receiving services under any waiver had full access to the benefits of community living, and that they had the opportunity to receive services in the most integrated setting appropriate. Each state was required to submit a transition plan outlining how they were going to be in full compliance with these new guidelines over the next several years. Providers not in compliance would not be eligible to provide services under the waiver. Virginia has just completed a provider self-assessment to gather information on where gaps exist in provider readiness. Providers should be receiving feedback from the Department of Behavioral Health and Developmental Services over the next several weeks regarding their current state of readiness. The deadline for full compliance is March of 2022.