

# HRCBS Board Report – October 2019

<b>Ellen Harrison</b> (Executive Director)	<b>John Malone</b> (Developmental Services)
<b>Lynn Grigg</b> (Child and Family Services)	<b>Holly Albrite</b> (Administrative Services)
<b>Rebekah Brubaker</b> (Adult Behavioral Health)	<b>Mary Ansell</b> (Chief Financial Officer)

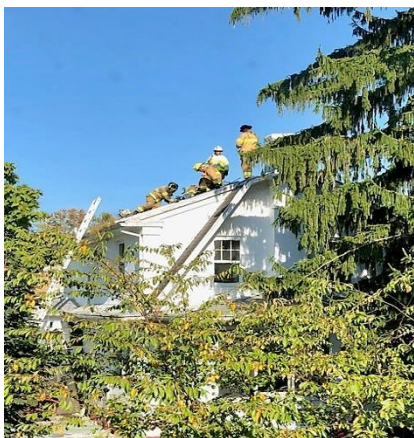
## Message from the Executive Director

*Excuse our mess* – at all levels. As you are well aware, HRCBS is in the midst of a major construction endeavor as noted below. We are essentially increasing our clinic space by 55% to accommodate current needs and immediate-future growth due largely to state initiatives. The programming renovations coming from the Department of Behavioral Health and Developmental Services, the Department of Medical Assistance Services and the Virginia Department of Health are creating a similar construction zone across the Commonwealth for public and private providers. The parallel between our local dust and debris is amazingly similar to the dust and debris of such state-level initiatives. Like our physical expansion and renovation of space, the expansion and renovation of clinical services for persons with mental health, substance use and developmental disabilities is also critical to the health of our communities. So please excuse our mess....we’re in the midst of a serious redesign and look forward to sharing our progress with the community we serve.

*Ellen Harrison, LPC, MBA*

## Administrative Services

### Building Update



The construction phase of the project is beginning! Asbestos removal was completed at the 1361 North Main Street property, known as the Sampson house, followed by the Harrisonburg Fire Department’s use of the site for training on September the 20<sup>th</sup>. The picture below shows them hard at work going through the metal roof with a chainsaw. Demolition of the 1361 property will occur the week of September 30<sup>th</sup>. Work on the addition and renovation at the McNulty Center will also begin on the 30<sup>th</sup> with the fencing off

of the construction area, putting up safety/warning signs, and the start of outside demolition to include removal of architectural features from the building's façade so that they can be replaced at the end of construction. This ability to reuse materials in this way will allow continuity in the building's appearance after renovations have been completed.

We are keeping staff informed by way of board-wide informational emails as well as exploring other ways to prepare staff and our visitors regarding all that will come with the challenges of construction and the excitement of the new space.

### **Anthem Gold Card Program**

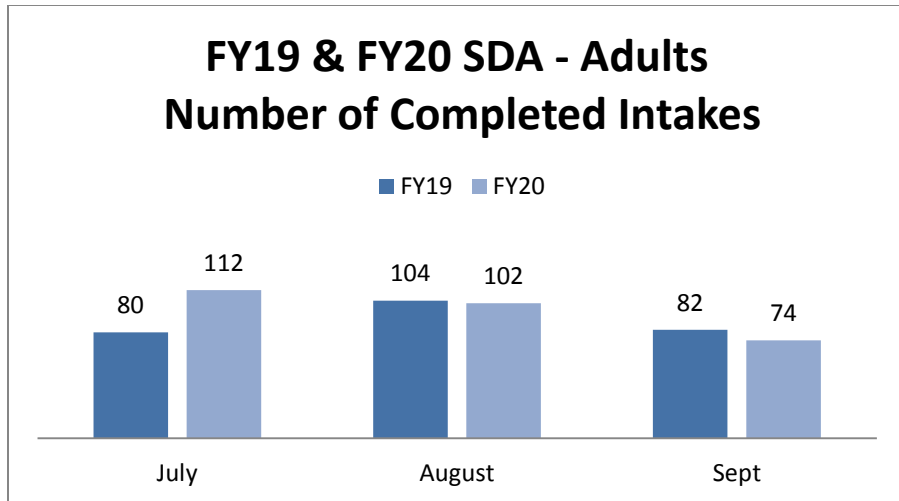
HRCBSB continues to have a gold card designation with Anthem for its Medicaid behavioral health services which means that we do not have to request authorizations or registrations for services, saving time, complexity, and effort. During September, we were invited and participated in the first provider meeting for gold card CSBs and private provider members throughout the state. We learned that they will begin sending us five outcome measures derived from claims data looking to determine if things like emergency room visits decrease over time with the provision of services. We expect more of this type of outcome measures from the other Medicaid managed care organizations.

## **Adult Behavioral Health Services**

### **Same Day Access - Adult Services**

During the month of September, we increased the number of staff available to provide intakes. Our goal continues to balance the demand for access with our ability to serve individuals in our secondary services, such as outpatient therapy, mental health case management and medical services. For the month of September (Sept. 1 – Sept 24) we provided 74 adult intakes.

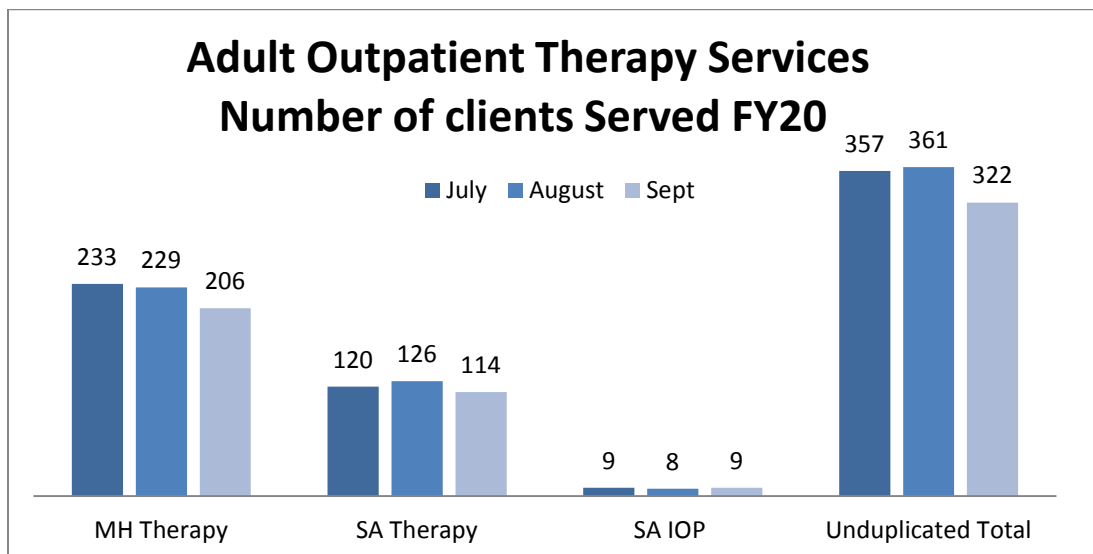
At the end of September, Rebekah Huffstetler resigned as one of our SDA clinicians. We have started recruiting for her replacement. Additionally, to provide more oversight and clinical support to the SDA team, we have started recruiting for a Supervisor of Same Day Access. The new position will provide greater support to the frontline staff and be available to help oversee the process more directly in efforts to reduce wait times, increase communication across programs and will provide some direct services to help bridge any gaps in services as new clients begin engaging in services.



### Adult Outpatient Services

In September (Sept 1 – Sept 24), the adult outpatient team provided mental health therapy services to 206 individuals, 114 individuals received substance use therapy services and another 9 individuals received our intensive outpatient program for a total of 322 unique individuals served.

We continue our recruitment efforts for an additional adult outpatient clinician to expand our capacity to provide individual and group mental health and substance use treatment services.



### Substance Abuse Case Management Services

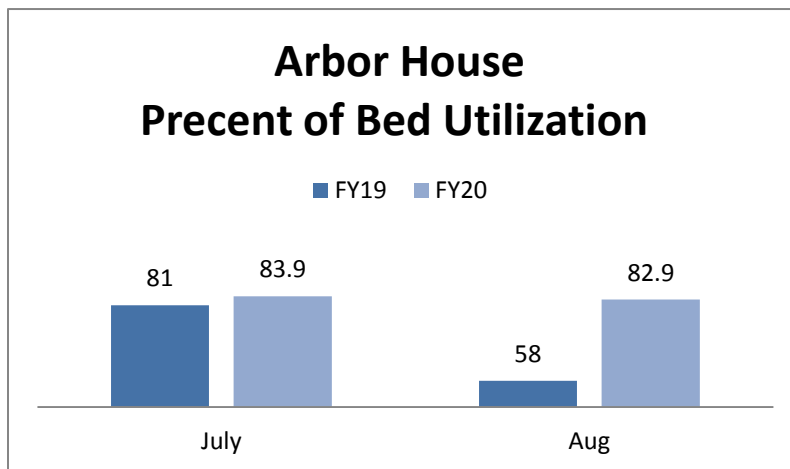
We provide case management services to individuals who have a substance use diagnosis and have case management needs such as, needing assistance in finding employment opportunities, accessing additional treatment services such as residential treatment services and locating and accessing housing opportunities. We currently have one full-time employee who does SA CM with our clients. During the month of September, they provided services to 45 individuals.

### State Opioid Response Grant

In the Spring of 2019, we received state funding to help individuals access Medication-assisted treatment (MAT) to help address the opioid epidemic. Since receiving the funding, we have been able to provide or link 38 individuals to treatment services either within our agency or within the community.

### Arbor House (Crisis Stabilization Unit)

For August, our bed utilization was 82.9% which means we continued to average  $\geq 5$  beds filled. For FY2020, our year to date is bed utilization 83.4%, which is above the 75% utilization required by Department of Behavioral Health and Developmental Services (DBHDS).



### Community Recovery Services

#### Mental Health Skill Building

At the beginning of September, we welcomed Ati'yah Cash to our Mental Health Skill Building team. We are very pleased to have her join our team and agency. As a Mental Health Skill Builder she will be working with individuals with serious mental illness who

need assistance with learning independent living skills, such as learning how to manage medications, scheduling and keeping doctor appointments, budgeting, person hygiene, cooking, and overall wellness and nutrition. We provided services to 35 individuals during the month of September. This is slightly lower than on average number of served in mental health skill building services which is due a current full-time vacancy which we are in the process of recruiting.

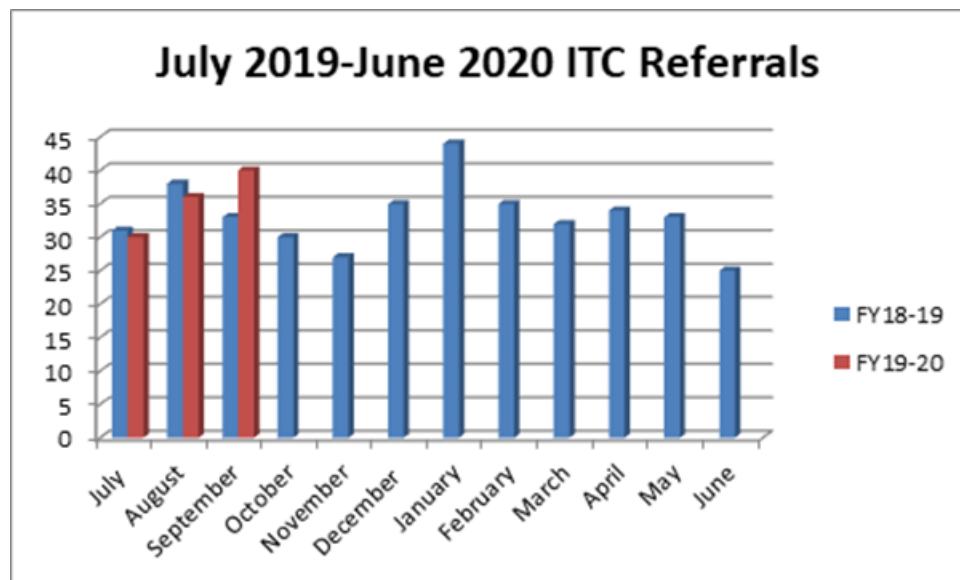
### Western State Hospital

For the month of August, Western State Hospital (WSH) Census report, we had an average census of 17 and a census/100000 population of 12.7.

## Child and Family Services

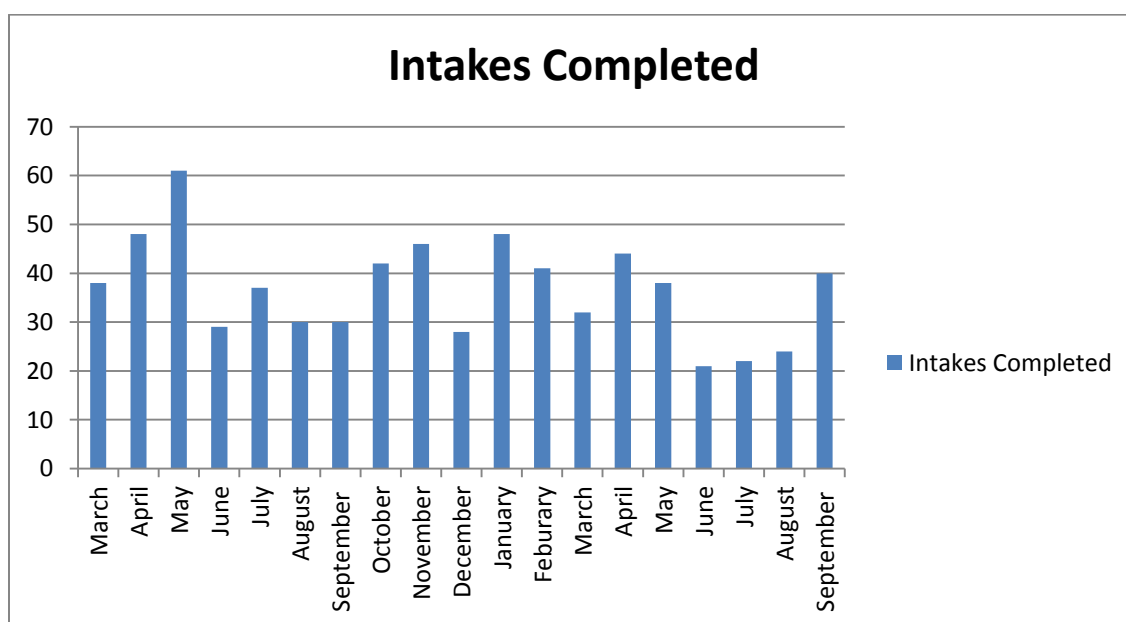
### Infant and Toddler Connection

The Infant and Toddler Connection received 40 new referrals for the program in September. Our monthly child count was 175. We are getting our new Occupational Therapist and Developmental Specialist trained and serving a small, but growing caseload. We are recruiting for a fulltime Physical Therapist and Speech Therapist. Our long time speech therapist, Diane Robey will be retiring in December of this year and we will need to replace her as quickly as possible. We continue to enjoy working with our two JMU practicum students.



## Other Children's Services

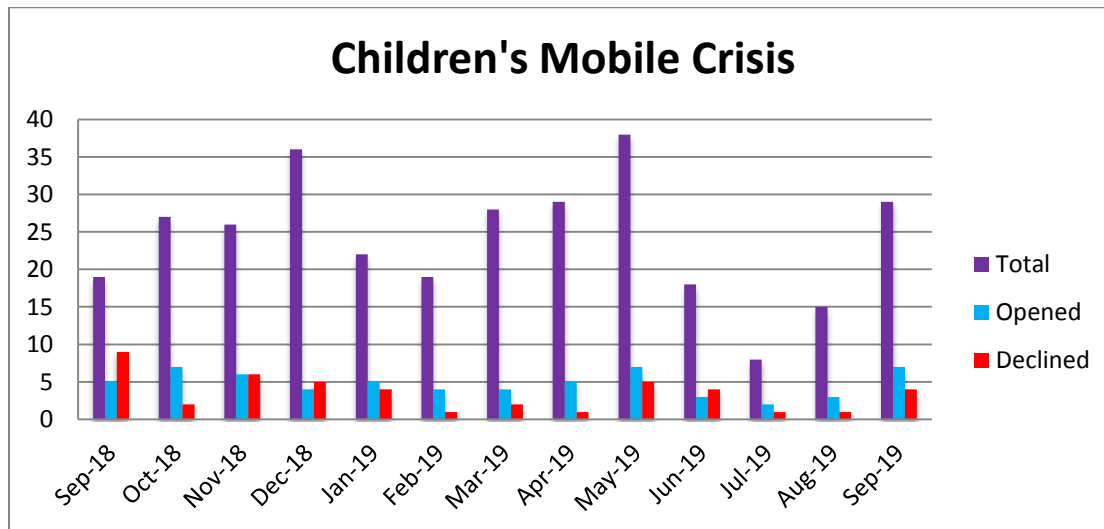
For the month of September we completed 40 intakes during same day access, which is more than we have completed since last April. We opened 28 new children and adolescents to outpatient services bringing our total to 509 children receiving therapy. We are very happy to welcome Kelly Zerfoss to our team of therapists. She comes to us from Maine with experience from many settings in the field of Social Work. All 8 of our Early Intervention Clinicians are in their assigned schools. We have a clinician in each of the Rockingham County High Schools and Middle Schools and in Harrisonburg High School and Thomas Harrison Middle School. They have been building relationships with the school staff and students and currently are seeing 141 students across the systems.



We currently are serving 227 children in mental health case management, and have 12 on the referral list. Family Care Coordination is serving 12 children and families in the community trying to make their transition from a residential facility back to the family and community as successful as possible. We are happy to be working with two JMU interns this semester and appreciate their extra help for some of our families.

For our Prevention services, in September we provided a presentation on mental health concerns, trauma, basic helper skills, and CSB Resources to the Neurodiversity Club at JMU and to the Student Leader group at EMU. We also worked with an alternative education teacher on incorporating resilience fostering strategies in the classroom. In our continued effort to work with the State Opioid Response grant we plan to have more lock boxes ordered and distributed.

Children’s Mobile Crisis (CMC) has seen quite an uptick in calls and referrals in the month of September. We received 29 crisis calls as compared to 15 the month before. Our worker opened 7 cases and 4 more were offered the service but declined to start crisis in favor of another service. CMC had 17 children and adolescents come in for face to face interventions.



### Developmental Services

There are 210 individuals on the DD Waiver Waiting list awaiting. There are currently 59 individuals on Priority 1 status or deemed most in need of services, followed by 92 on Priority 2, and 59 on priority 3. Of the 59 individuals on priority 1 status, 47 of them are 21 years of age or under. There were 6 new requests for waiver screening in September, with 6 screenings completed.

The Waiver Slot Allocation Committee met in early September, and 18 new DD waiver slots were assigned. Of those 18 newly assigned slots, 11 are going to individuals aged 20-30, 3 of them assigned to individuals under 16 years of age, and 3 of them to individuals over the age of 45. This illustrates that although our local waiting list is getting larger, it is also getting younger. Our agency has done a good job over the last several years of identifying individuals who are eligible to be screened for the DD waiver, and communicating with schools and other agencies to get those screenings completed.

Of those 18 newly assigned slots, 6 are already currently receiving case management services, meaning the team will be busy opening up 12 new cases in the next several weeks. We are happy to report that we will be moving into October as fully staffed,



even including an additional full time case management position which was filled in September.

The 18 individuals receiving slots will be enrolled beginning in October. For now, we have 214 individuals receiving DD Waiver services. Of those 214, 91 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 visits every 30 days, with 2 out of every 3 visits occurring in the client's home.

Over the next several weeks we will be working to comply with two state requirements related to the Department of Justice Settlement agreement. First, we will have to ensure that all our annual plans are entered into the state's online waiver management system (WaMS). This will have to occur either through an automated data transfer from our electronic health record or through direct entry from case managers. Secondly, we will be completing quarterly support coordinator record reviews via an online portal, with the data being aggregated and reviewed by the Department of Behavioral Health and Developmental Services staff.