

HRCBSB Board Report – January 2021

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

John Malone (Developmental Services)
Barbara Brady (Administrative Services)

Message from the Executive Director

More than once over the recent holiday weeks we received notice from Alison Land, Commissioner of the Department of Behavioral Health and Developmental Services (DBHDS), of the “closed admissions” for four (4) state hospitals at this time and an operating census of 97.2% across all 9 facilities. While there are COVID positive patients in all state facilities at this time, with corresponding staff quarantined at their homes who have tested positive, only four are diverting admissions to other facilities. This strain on the state facilities certainly has downstream effects on the entire crisis response system including on our local ability to respond quickly when seeking inpatient resources. We remain hopeful that the release of two COVID vaccines will begin to ease the implications of this pandemic across Virginia. In late December 2020, HRCBSB was notified that those receiving programming and/or working in residential services are eligible for the Moderna or Pfizer vaccine in early January 2021 as part of the first round of doses available to long-term care facilities (1a priority). There is indeed a light at the end of the tunnel.

Ellen Harrison, LPC, MBA

Administrative Services

Construction Update

The biggest changes in the construction project are probably already quite visible to all. The entrances and parking lots have changed as of the first week of January, given the HRCBSB yet another “under construction” look. The crew is doing a considerable amount of digging and underground work in the area beside and behind Arbor House, so the exit and entrance lanes had to be changed. The construction team and staff working with them continue to provide information to clients, visitors and staff to ensure a safe environment in spite of these significant changes.

Beyond that, progress continues on the building, even including making up for some lost time from the trusses. The roof shingles, flashing, conduit and utility work all continue on schedule. But, be careful going in and out of the CSB, and watch where you park, because this is definitely a work in progress.

IT, Clerical, Compliance and Risk Management

Some highlights out of the Compliance, Risk Management, IT and Clerical Departments for the month of December include:

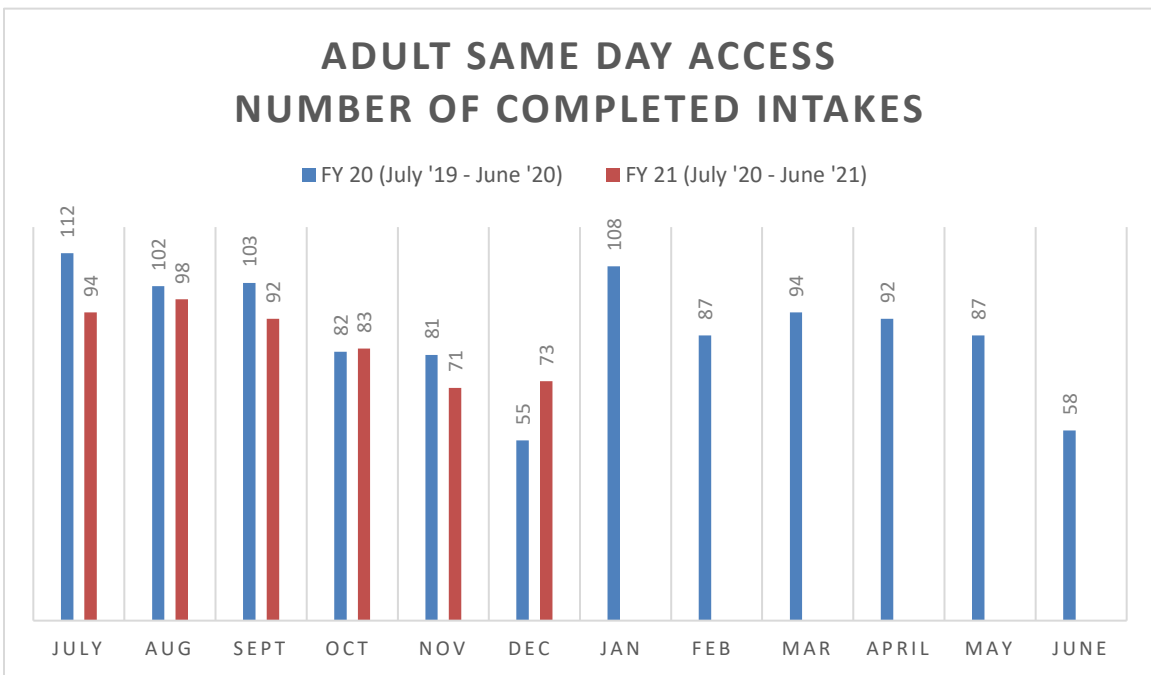
- The IT Department hosted a kick-off meeting for a new phone system project, implementing a state of the art phone system to the HRCSB main buildings beginning December 28. HRCSB awarded the Voice over Internet Protocol (VoIP) Phone System RFP to Netmaker Communications out of Winchester, VA. The software is versatile and will enhance the staff's capability to intercommunicate and communicate with clients, while both onsite and offsite. This will provide a better customer service experience for our clients and community, being able to serve from anywhere. In addition, because of the technology, we will be saving at least 40% in telecommunications costs vs the current phone infrastructure in place. The project is to take approximately one month to upgrade all phones.
- We handled the first significant snowfall safely and efficiently, with the CSB ready to function smoothly starting at 10:00 a.m. the morning following the snowfall. Kudos to John Malone and Dan Jenkins for handling the on-site inspections, ensuring that all was safe for returning clients and employees.
- The Clerical Team has added new language for COVID screenings, trying to avoid unnecessary lengthy delays in scheduling for clients who may be ill with other known medical causes, such as allergies or sinus problems. While this has been slightly complicated to navigate, it is allowing the medical team and clinicians to continue seeing patients safely and promptly.
- Our new QI specialist is training up in her new position. She has assisted in trainings of new staff and continues to learn the documentation and regulations of the different programs in order to complete chart reviews. Her reviews and expertise will be valuable to staff across the agency.
- The IT Department rolled out a Cyber Security training through the agency MyLearningPointe system for all agency personnel. Given the importance of this subject, we are expecting 100% compliance with the requirement.
- As part of the State's COVID-19 vaccination program, we provided data related to staffing and clientele to our local health district, DBHDS, Department of Medical Assistance Services, and the Virginia Department of Health (VDH). As a result, VDH designated the staff and clients of our residential facilities (Park Road and Market

Street) as individuals to be offered some of the first of the vaccines. Those will likely be administered within the next few weeks to the residential staff and clients who choose to accept them.

Adult Behavioral Health Services

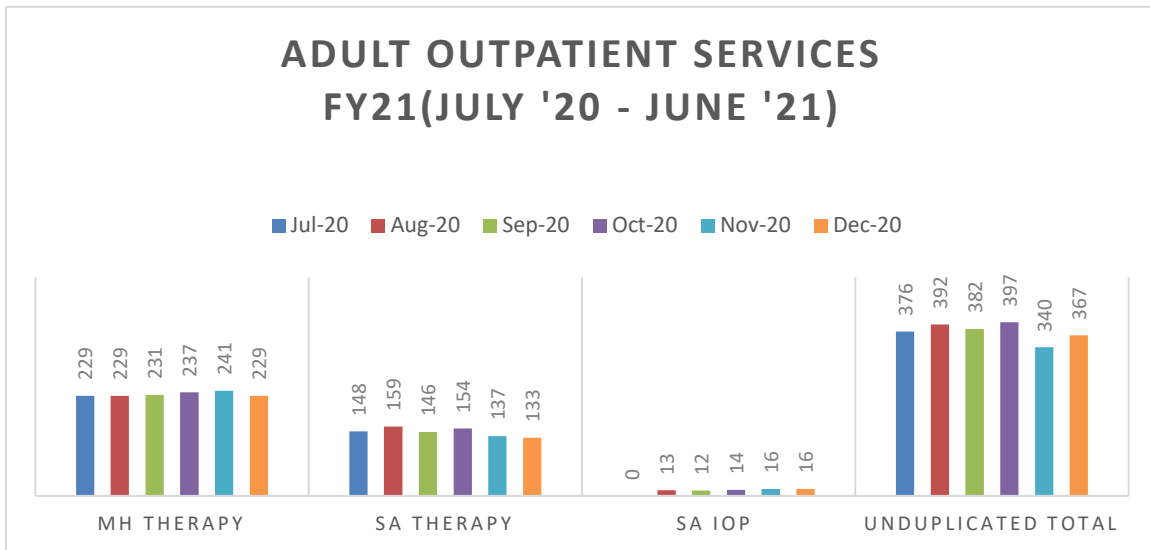
Same Day Access - Adult Services

We have continued to provide Same Day Access through telehealth (video conferencing and/or telephone) and in-person options. Since the end of November, we have strongly encouraged whenever possible for individuals to complete their intake via telehealth in efforts to reduce the foot traffic during this time of increased rates of positive cases of COVID in our community. We have also continued our hybrid system of scheduling and offering same day availability for intakes whenever possible. For the month of December (Dec 1-30), we completed 73 adult intakes.



Adult Outpatient Services

The Adult Outpatient therapy team continues to provide services to individuals via telehealth (video conferencing and/or telephone) and in-person. For the month December (Dec 1-30), we provided mental health therapy to 229 unique clients, for substance use therapy services, we provided 133 unique individuals and in our SA IOP program, we served 16 unique individuals, for a total of 367 unduplicated clients served in therapy services.

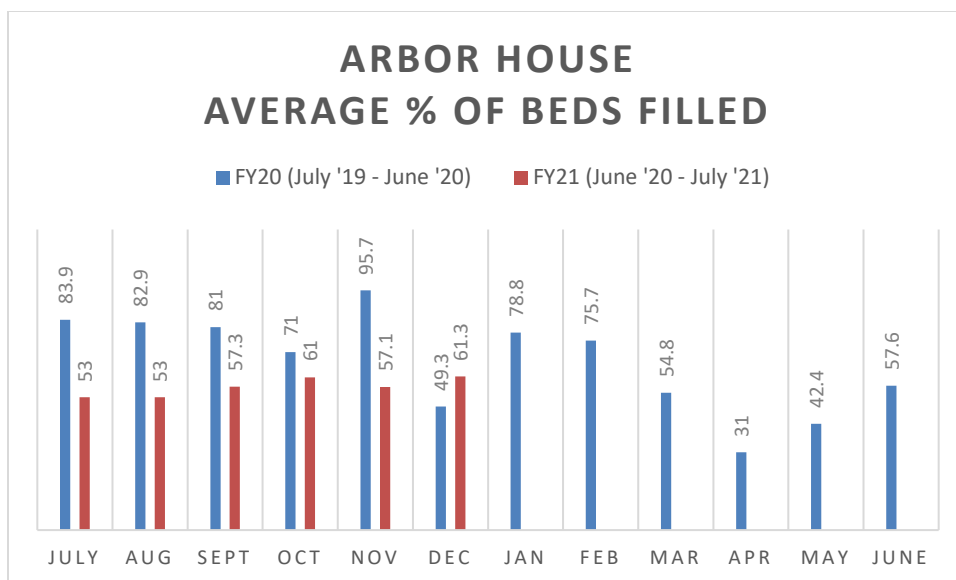


Substance Abuse Case Management Services

In October, we received additional funding through the State Opioid Response Grant to provide treatment and recovery support services to individuals with history of opioid or stimulant related substance use disorders. Through this funding, we have been able to add an additional substance use case manager to our outpatient team to assist individuals in accessing medication-assisted treatment (MAT), residential treatment and other community supports. Substance use case managers can play a vital role in someone’s recovery journey, from assisting in finding housing, providing information on potential employment opportunities, providing support to get to and from medical appointments and facilitating access to higher levels of care as clinically appropriate.

Arbor House (Crisis Stabilization Unit)

Arbor House has continued to set our maximum capacity at 5 individuals. This decision was made to ensure that each individual could have their own bedroom. We will continue to assess the ability to safely resume a 7-bed capacity over the coming months. For December, (Dec 1-30), our bed utilization was 61.3% based on 7-bed capacity; while our utilization rate based on the 5-bed capacity was 89%.



Community Recovery Services

Mental Health Case Management (MHCM)

We are currently providing mental health case management services to 371 individuals. The team continues to provide support to individuals with serious mental illness through identifying needs, assisting clients in accessing services and monitoring clients' engagement and follow through in services. The team has been able to provide support both in person and via telephone contacts.

We are pleased to have Trey Childs join our mental health case management team at the beginning of December. We currently have 10 full-time case managers who provide on-going support to individuals with serious mental illness.

Mental Health Peer Support Services

We currently have two hourly staff that provide mental health peer supports to 21 of our mental health case management clients. Peers are individuals with their own personal lived experience with mental illness and/or substance use recovery. Our Peer Supports help provide an additional point of support for our clients. They are able to assist with outings in the community and provide another means of socialization and support through peer interaction.

Permanent Supportive Housing (PSH)

Our PSH program currently has eleven individuals enrolled with one currently in an apartment. Our team is currently working with the other ten participants to locate appropriate housing options in the Harrisonburg area. The team continues to face the challenges of low housing availability for low-income housing/apartments. We continue to work with our community partners to develop relationships with local landlords and with property management companies in efforts to establish a positive working relationship.

Summit House (Psychosocial Rehabilitative Services)

Our Summit House staff organized several holiday activities to help members celebrate and enjoy the season in a socially distant and responsible manner including viewing Christmas themed movies, hosting a holiday meal and a gift exchange. Although this season was unlike any other, we are thankful that we are able to continue to provide a modified version of what our clients appreciate and enjoy about our programming, the activities and the opportunity to be with others.

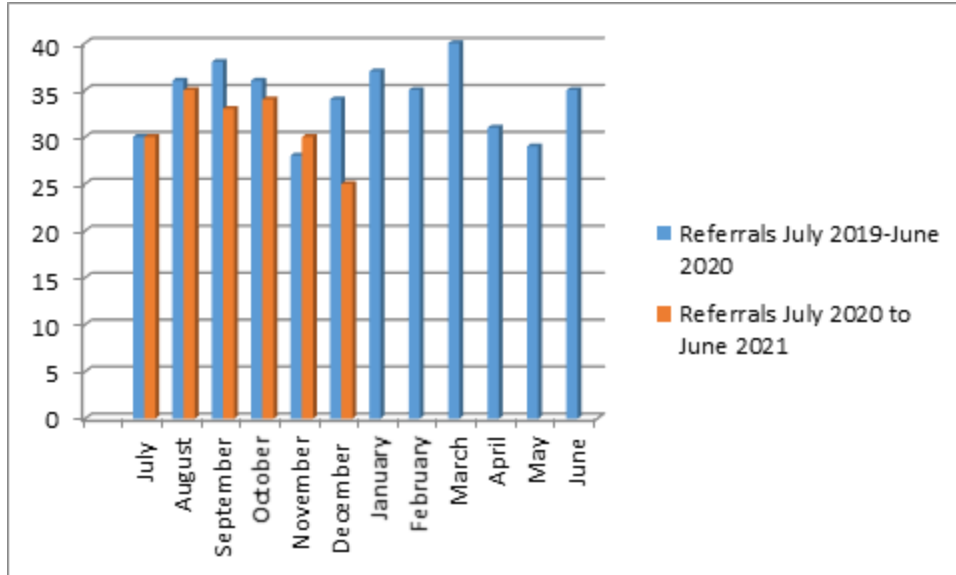
Western State Hospital

For the month of October, Western State Hospital (WSH) Census report, we had an average census of 8 and a census/100000 population of 6.1. There has been a decline in admissions to WSH due to the hospital being over capacity and diverting admissions to other hospitals.

Child and Family Services

Infant and Toddler Connection

Our December finish number for children in services was 196, with 25 new referrals. Our December 1 Child Count, that determines funding for the following year was 201, our highest ever. We welcomed Maddie Brothers to our staff and she will be doing service coordination full time. The ITC Facebook page is in place and it includes direct referral information for the families in our community. We continue to deliver most services through telehealth, and will not do in person services for the month of January.



Wellness and Prevention

This month we have collaborated with the Futuro Latino coalition to develop Spanish language lawn signs. We will also look to collaborate with other community partners to make signs in Arabic, Swahili, and Russian.



**Tú haces que
el mundo sea
MARAVILLOSO**



<https://www.hrcsb.org/>
 Futuro Latino Coalition

State Opioid Response Grant

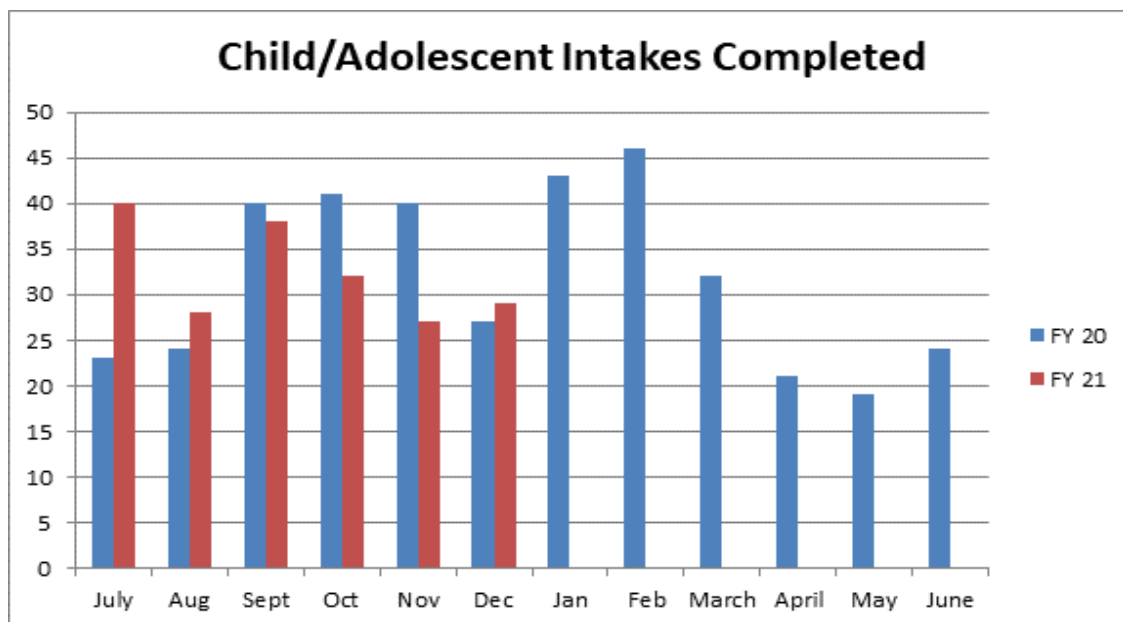
We received a promise of \$70,000 per year for a two-year cycle to address the needs in our community for opioid and stimulant prevention. We will be creating an hourly position to help with all the activities that will be generated by the grant requirements, to include the distribution of medication lock boxes, and deactivation packets, and other overdose prevention activities.

Suicide Prevention

Activities for suicide prevention were minimized due to the holidays in December. Brandy presented to the Suicide Prevention Interagency Advisory group meeting on December 10th concerning Region 1’s highlights for the year.

Out Patient Therapy

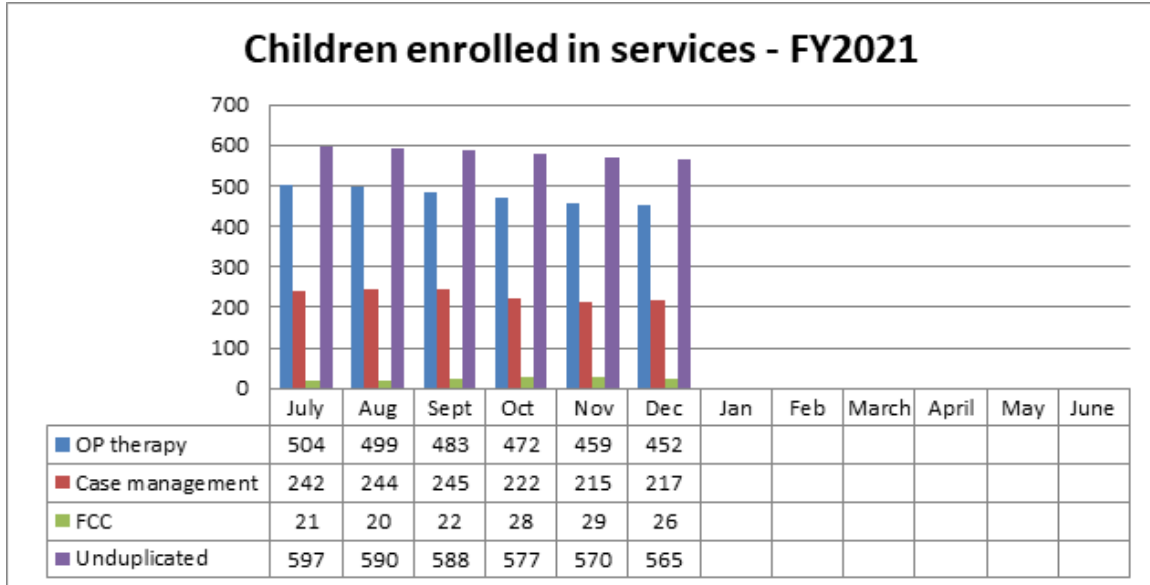
We completed 29 intakes for the month of December. We currently have 452 children and adolescents open to therapy services. Our Early Intervention (EI) in-school clinicians are serving 167 students Rockingham County and the Harrisonburg City middle and high schools. We completed our recruitment for the EI vacancy and will be onboarding our new clinician in mid-January.



Children’s Case Management

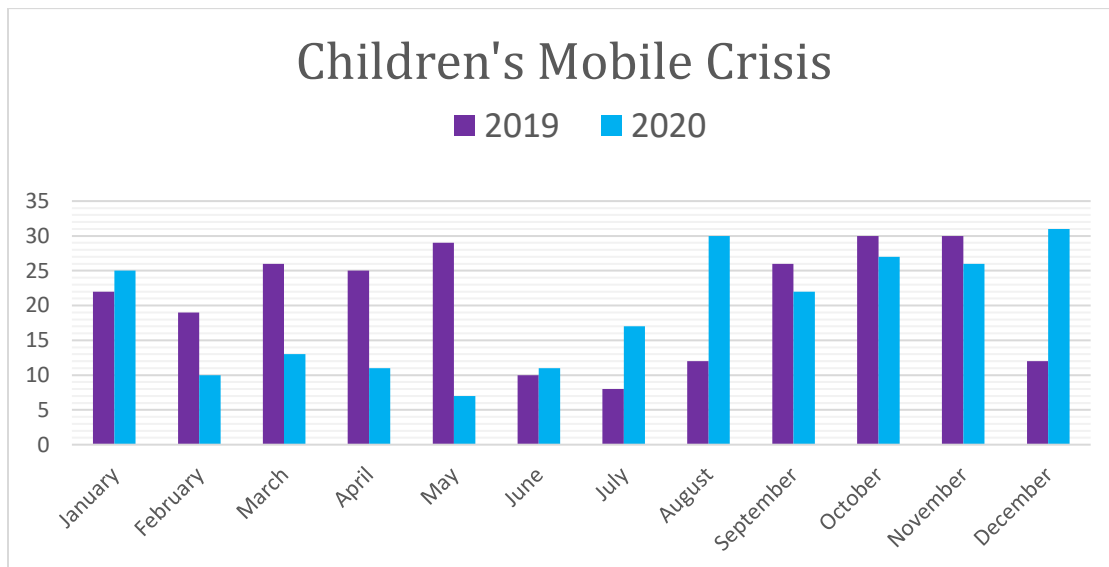
In December, we had 217 children in case management services. For the past four years our case management staff have organized a Christmas/Holiday assistance program for our clients. In 2019 we were able to help 75 families with gifts for the children, and in 2020 we were about to help 109 families. We were fortunate to have 56 sponsors to help

in this effort. We are grateful for the generosity of Lantz Construction, Mather’s Architect Group, and a private donation from a local family, along with all the CSB staff who took on our families in a very difficult year.



Children’s Mobile Crisis

The stress of school disruption, pandemic restrictions and challenging family life have led to a high volume of calls for children and adolescents in crisis. This December saw more than twice as many calls as December of 2019.



Developmental Services

Developmental Disabilities (DD) Case Managers billed 293 units for the month of November, with contracted DD case managers from Valley Associates for Independent Living completing an additional 19 billable units. Case managers also completed 671 separate contacts to assist with linking clients to services, or monitoring their satisfaction. They also completed 19 annual ISPs, which by way of a data exchange are automatically updated into the Waiver Management System (WaMS) daily.

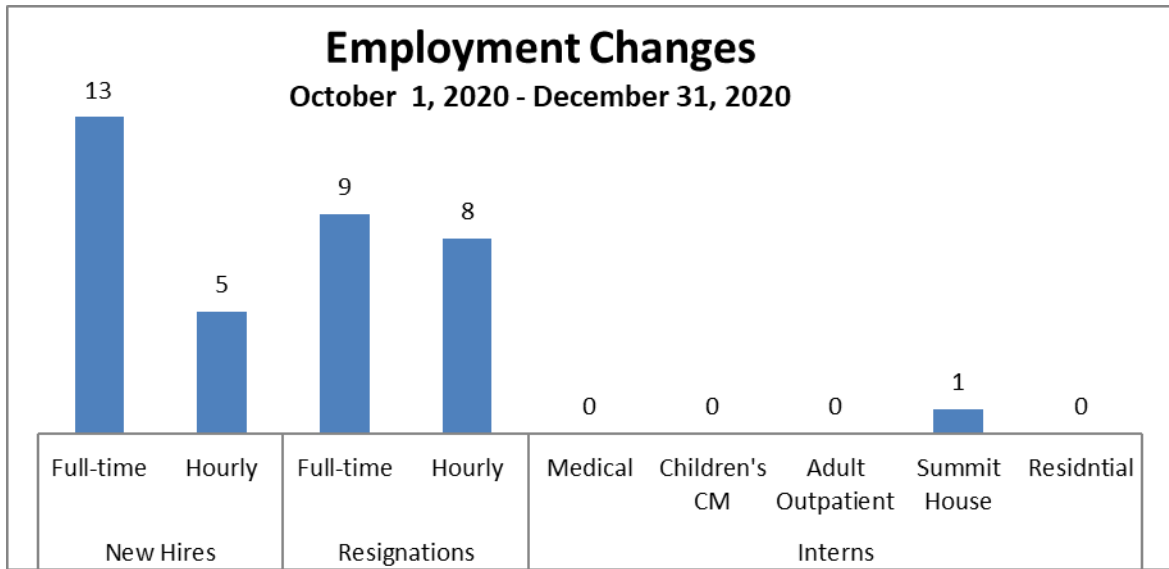
Currently we have 223 individuals receiving DD Waiver services. Of those, 67 require Enhanced Case Management, meaning they have recently received crisis services, emergency medical services, or are at significant risk as determined by the Support Intensity Scale. For those receiving Enhanced Case Management, support coordinators must complete face to face visits every 30 days, with 2 out of every 3 visits occurring in the client's home. The face to face requirements remain waived by DMAS. There are 202 individuals on the DD Waiver Waiting list awaiting services. There are currently 58 individuals on Priority 1 status, followed by 87 on Priority 2, and 57 on priority 3. We completed 3 waiver screenings and 1 intake in November.

The majority of our case managers continue to work from home on most days, with intermittent time in the office for meetings or other activities. Home visits or other client face to face visits remain quite rare, with most "face to face" documentation occurring via telehealth. We are expecting to continue to adhere to these precautions for the foreseeable future. Cases of COVID amongst our clients and private provider staff have become more common as the colder weather encroaches, and although we share the optimistic excitement regarding a vaccine, we're cognizant that the next several weeks will require steadfastness.

In December, we received the most recent report from the Department of Justice Settlement Agreement Independent Reviewer. As a brief background, the Commonwealth of Virginia entered into a settlement agreement with the US Department of Justice in 2011, with the goal to improve Virginia's developmental services system in numerous areas, including employment, community integration, access to crisis services, more independent living options, among others. The settlement agreement contains numerous agreed-upon compliance indicators, which are reviewed twice a year by the Independent Reviewer. As in previous reports, Virginia has shown areas of ongoing compliance and improvement, with several areas remaining out of compliance. Of note

in this latest report is the impact that the current health crisis has had on implementing improvement measures, specifically those which require a face to face contact, as well as ongoing issues with obtaining reliable data from disparate sources. The settlement agreement is set to end in June of 2021, however there does appear to be a high likelihood it will be extended. The full report can be viewed at dbhds.virginia.gov.

Human Resources



The above chart outlines employment changes as well as Internships from the 2nd Quarter October 1, 2020 – December 31, 2020. For this quarter, Harrisonburg-Rockingham Community Services Board added these full-time positions:

1. Payroll Specialist
2. Drug Court Peer Recovery Specialist
3. Substance Abuse Case Manager
4. Family Care Coordinator
5. Payee Specialist

Current staff composition:

- 18% Administrative
- 19% Licensed or License Eligible
 - 13% Serving Adults
 - 6% Serving Children
- 32% Hold a certificate to deliver services
- 10% Medical

Contractors were included in the overall total for percentages.