

HRCSB Board Report - March 2023

Rebekah Brubaker (Executive Director)

Adam Yoder (Community Recovery Services)

Vacant (Behavioral Health Services)

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

Message from the Executive Director

Over the last two months, I have had the opportunity to attend department/team meetings and be present with employees as we talked together about some of the challenges and opportunities that is before us as an agency. Our employees are passionate about their work and about making a difference in our community. They are quick to comment on what is working well and provide possible solutions on how we could be better. I have greatly appreciated the chance to get to know more of our employees and have learned a great deal from each one of the conversations. These conversations are helping to inform several important goals for leadership, including looking at ways to continue to provide high quality services, increasing and/or improving access to services, recruiting retraining and developing quality staff and maintaining a fiscally resilient organization.

Rebekah Brubaker, LPC

Administrative Services

<u>Compliance</u> The previously reported CAP from DBHDS Licensure was submitted Friday, February 24 and we received word on Tuesday, February 28 that it was accepted fully, with no questions or revisions. It was great work by the Compliance team of Dana Dewing and Josh Dyke, as well as ID/DD management John Malone and Rob Slaubaugh. Congratulations all.

The Compliance team finished an Anthem audit in the midst of responding to the CAP. Also, with a change instituted by the new DMAS system with the MCOs, Compliance re-enrolled all agency licensed staff in the DMAS system by the March 1 deadline. Kudos to Credentialing Specialist Jessica Bradshaw for this significant effort.

<u>Facilities</u> Our facilities manager has been working on upgrading the lighting systems to LED at both Summit House and now Arbor house, decreasing our electricity costs in the long-run. In addition, working towards finishing the A/V infrastructure of the main building, painting a screen in the Training Room for presentations, mounting a television in the Finance conference room and mounting a camera for the Training Room.

<u>Risk Management</u> Our Risk Management Specialist is beginning a series of Incident Report Trainings at agency staff meetings. This is a new effort to regularize this training, in response recommendations from the Licensure review.



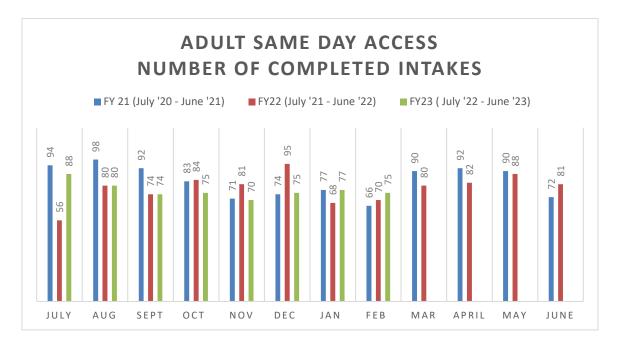
<u>Clerical</u> The Clerical team is busy recruiting for a vacancy and handling various interpreter questions and improved processes.

<u>IT</u> The IT group continues to recruit for a Network Administrator. Upcoming projects include replacing our Exchange email server and our Internet web filter. IT is also assisting in researching automated Human Resource Information Systems (HRIS), and will join an HR and Finance visit to Region 10 CSB to review and discuss their system.

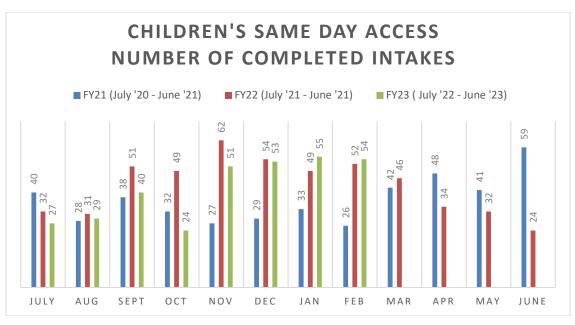
Behavioral Health Services

Same Day Access (SDA) – Adult & Child

We provide walk-in intakes for adults on Mondays, Wednesdays and Fridays and scheduled intakes for children and families on Tuesdays and Thursdays. For the month of February, the Same Day Access team completed 75 intakes for adults and 54 intakes for child and adolescent services. This month we celebrated Dana Stonebraker, one of our SDA Clinician, who completed all requirements to receive her Clinical Social Worker license (LCSW). Dana has been working towards this goal for the past several years, which requires 3000 hours of supervised clinical work and passing the Board of Social Work exam.



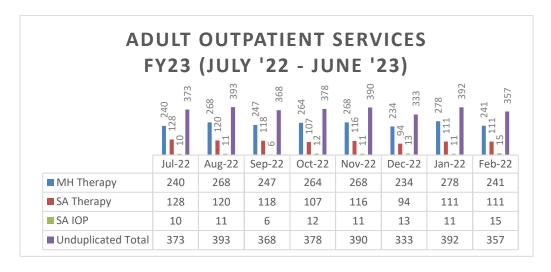




Outpatient Services – Adult and Child

For the month of February, in adult outpatient therapy, we provided mental health therapy to 241 individuals, for substance use therapy services, we served 111 individuals and in our SA IOP program, we served 11 individuals, for a total of 357 unduplicated individuals served in therapy services. In adult therapy services, our team provides both individual and group therapy for mental health and substance use related treatment services. We are in the process of recruiting for an Adult Outpatient clinician, as we had a member of our team transition into private practice at the end of January.

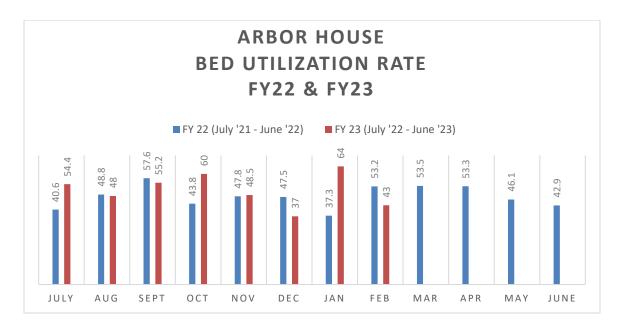
Children's Outpatient services continues to provide individual and family therapy services to our clients. For the month of February, in child outpatient therapy, we provided services to 445 individuals and their families. Currently we have 572 individuals enrolled in children's therapy services. We are in the process of recruiting for a Child and Adolescent clinician position, as we had a member of our team transition to another opportunity.





Arbor House (Crisis Stabilization Unit)

We are pleased to announce that starting March 1, 2023, Arbor House returned to 7-bed capacity. This has been a long time coming and we are excited to be able to return to our prepandemic bed capacity. In February, our bed utilization rate was 43% based on 7-bed capacity; our utilization rate based on the 5-bed capacity was 60%. Our average for the fiscal year based on the 5-bed capacity is 71.9%.



Behavioral Health Wellness

The Behavioral Health Team is excited to announce that the team is expanding and have added a new team member; Jonny Morris started with the team in February. HRCSB received funding through Department of Behavioral Health and Developmental Services (DBHDS) Office of Behavioral Health Wellness targeting capacity building within communities. Coalition development is one of the strategies to help increase capacity within communities. Jonny's work will primarily focus on supporting the development of the Healthy Community Collaborative (HCC), one of the local coalition's that the Behavioral Health Team has been partnering with over the last several years.

Our team continues to be active in providing trainings within our agency and within the community. This past month many of the training opportunities focused around suicide prevention and awareness; the team held an Applied Suicide Intervention Skills Training (ASIST) for HRCSB employees, did a 1 hour training on suicide prevention and intervention for 100 employees at Partner's Excavation Co (picture below) and another 1 hour training on the same



topic to Crisis Intervention Team (CIT) training participants. The team also provided on 8-hour Mental Health First Aid training to Athletic Trainers at James Madison University.



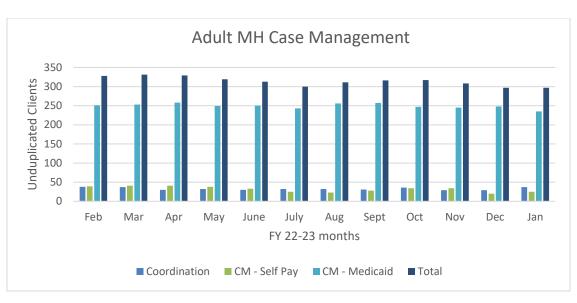
We continue to see the impact that the pandemic has had on a generation of children and youth. Our families, school systems and other child-serving services are on the frontlines of trying to help children and families navigate the impact. In response to a need from Rockingham County Public School's elementary school counselors, members of the Behavioral Health Team, the Children's Outpatient and School-based Early Intervention Clinicians provided a 3 hour Collaborative Problem solving workshop for 22 school counseling from RCPS elementary schools. HRCSB staff helped to facilitate conversations and problem solving around not only ways to support and work with students, but also how to support one another in addressing the complex needs of their students, as well as, identifying community resources, challenges and opportunities.

Community Recovery Services

Adult Mental Health Case Management

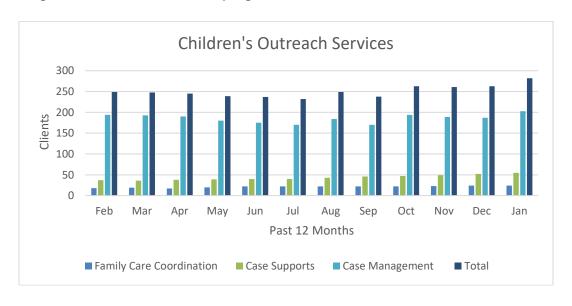
The program has enjoyed hosting our first undergraduate social work intern. She has been kept busy with agency orientation, shadowing case managers, providing transportation, daily living supports and spending time at other Community Recovery Services sites. It has also been a month of transitions for staff. Our Hospital Liaison resigned and we are fortunate to have refilled the position quickly, but with a current adult case manager. That leaves one full time vacancy and one half time vacancy on our case management team.





Children's Mental Health Community Supports

As viewed in the chart below, the number of cases in each of our three programs (Family Care Coordination, Case Supports and Case Management) has increased this past winter and fall. The number of case support cases (Child Services Act funded) is at an all-time high. The increasing number of Family Care Coordination cases has us seeking to hire a third staff in that program.

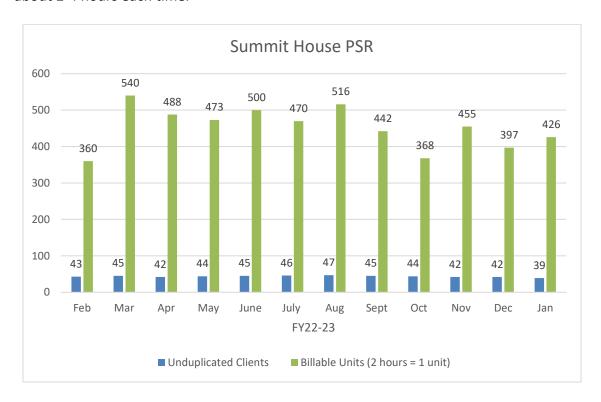


Psychiatric Rehabilitation (Summit House)

In February, we added a fourth general advocate staff to the team. At present we are hiring for a Clinical Advocate. This role will prioritize completing third party insurance



assessments and authorizations for psychosocial rehabilitation services. Participant members receive an initial clinical assessment to determine their needs and establish their treatment goals. Assessments are then completed annually and also updated following significant life changes. Authorizations are required every six months. Participation levels vary with some members attending daily and others only 1 day per week or every couple of weeks. Most members average attending twice per week for about 2-4 hours each time.



Peer Support Program

The program is pleased to have hired Carol Williams as the new hourly mental health Peer Recovery Specialist, and she begins this month. Peer programming consists of individual services in the community, support groups at the CSB and group outings around the Shenandoah Valley.

Supervised Living Residential (Market Street)

Residential continues to accept community referrals as well as hospital discharges. We are admitting two new community referrals this month.

Western State Hospital (WSH)

WSH census report for January of 2023, HRCSB had a census per 100,000 of 6.4, and an average census of 8. Our region, HPR 1, had an average census per 100,000 of 8.3, and an average census of 130. Health Planning Region 1 is made up of 9 CSB's: Alleghany



Highlands, HRCSB, Horizon Behavioral Health, Northwestern, Rappahannock Area, Rappahannock-Rapidan, Region Ten, Rockbridge Area and Valley.

Developmental Services

DD Case Management

Developmental Disabilities (DD) Case Managers billed 290 units for the month, with DD case managers from Valley Associates for Independent Living completing 22 additional billable units. Case managers completed separate 637 contacts to assist with linking clients to services, or monitoring their satisfaction, including 224 face to face visits. They also completed annual 18 annual ISPs.

Currently we have 338 individuals receiving DD Case Management services, including 234 receiving Waiver services. Of those, 48 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. There are 221 individuals on the DD Waiver Waiting list awaiting services. There are currently 47 individuals on Priority 1 status, followed by 96 on Priority, and 78 on priority 3. We received 2 new referrals, and completed 3new waiver screenings. We added 1 individual to the waiver waiting list.

The Waiver Slot allocation committee met in February to assign 2 Family and Individual Slots (FIS), and 3 Community Living (CL) slots to individuals on the DD Waiver Waiting list. The FIS slots will primarily be used by individuals seeking some sort of Personal Assistance or Respite services in their home. The CL slots are used by individuals who are currently seeking residential placements. It is our hope that we will be able to utilize the 3 CL slots to find local residential options for individuals seeking placements in our area. Although local providers are still having some ongoing staffing issues, we do have some local residential options available.

The DD Case Management team operated with two vacant case management positions for February. A huge thank you to the rest of the team for pitching in and taking on extra duties.

HIR CSB

Infant and Toddler

Referral numbers continue to be the story, with another high monthly total of 45 referrals. Thus far, the program is +63 over last year's count at the same date, and we are currently 72% toward our yearly referral goal of 435. The ITC program continues to grow in order to meet the needs of the community, this month adding a new Infant Toddler Development Professional position. We still have one opening for a full time Speech Language Pathologist.

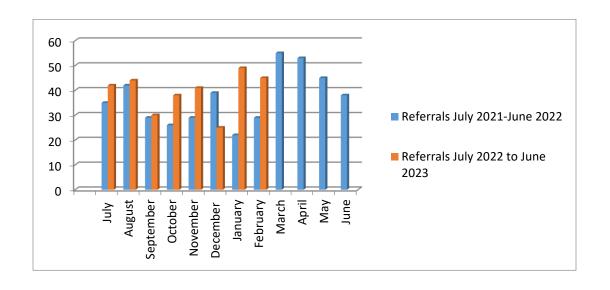
The Phase 2, full implementation for the Trac-it data system is scheduled for December 11th, 2023. At that date, all data elements must be in the Trac-it, as it will be the system of record. There are currently two distinct paths towards full implementation. The first is to utilize our current electronic health record for billing, and have data uploaded into Trac-it. Alternately, we can enter directly into Trac-it and use an extract to generate billing. We are exploring both options.

The Federal Public Health Emergency will end May 11th and while it impacts the use of telehealth for other programs, the use of telehealth has been added to the federal regulations for Early Intervention birth to three. This will be used as a last and only option in providing services

| Month | 2016- 2017 | 2017- 2018 | 2018- 2019 | 2019- 2020 | 2020- 2021 | 2021- 2022 | 2022- 2023 |
|--------------|---------------|---------------|---------------|---------------|---------------|---------------|---------------|
| | | | | | | | |
| July | 17 | 20 | 31 | 30 | 30 | 35 | 42 |
| August | 30 | 40 | 38 | 36 | 35 | 42 | 44 |
| September | 31 | 36 | 33 | 38 | 33 | 29 | 30 |
| October | 18 | 35 | 30 | 36 | 34 | 26 | 38 |
| November | 31 | 30 | 27 | 28 | 30 | 29 | 41 |
| December | 22 | 28 | 35 | 34 | 24 | 39 | 25 |
| January | 38 | 31 | 44 | 37 | 41 | 22 | 49 |
| February | 24 | 32 | 35 | 35 | 31 | 29 | 45 |
| March | 31 | 30 | 32 | 40 | 34 | 55 | |
| April | 30 | 43 | 34 | 32 | 38 | 53 | |
| May | 48 | 20 | 33 | 25 | 26 | 45 | |
| June | 34 | 32 | 25 | 35 | 45 | 38 | |
| | | | | | | | |
| Total | | | | | | | |
| Referrals | 353 | 377 | 397 | 406 | 401 | 442 | 314 |
| | | | | | | | |
| Child Count- | | | | | | | |
| Dec 1 | 127 | 162 | 173 | 195 | 201 | 193 | |



| Month: | July | August | September | October | November | December | January | February |
|-------------------------|------|--------|-----------|---------|----------|----------|----------|----------|
| | | Ŭ | · | | | | <u>'</u> | <u>'</u> |
| | | | | | | 0.5 | | |
| Total Referrals | 42 | 44 | 30 | 38 | 41 | 25 | 49 | 45 |
| Monthly Referral | | | | | | | | |
| Goal | 40 | 40 | 35 | 30 | 30 | 40 | 30 | 35 |
| Number of | | | | | | | | |
| children enrolled | 298 | 303 | 280 | 284 | 282 | 286 | 295 | 291 |
| Data fau Dafaurala | | | | | | | | |
| Data for Referrals | | | | | | | | |
| Parent | | | | | | | | |
| Declines/No | | | | | | | | |
| Contact | 16 | 14 | 15 | 14 | 14 | 12 | 12 | 1 |
| | | | | | | | | |
| Transfers | 0 | 3 | 0 | 1 | 1 | 0 | 0 | 0 |
| | | | | | | | | |
| Not Eligible | 7 | 5 | 3 | 3 | 2 | 1 | 0 | 0 |
| | | | | | | | | |
| In Process | 0 | 0 | 0 | 0 | 0 | 4 | 28 | 44 |
| Deceased | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Deceaseu | U | U | U | U | U | U | U | U |
| Active | 19 | 22 | 12 | 20 | 24 | 8 | 9 | 0 |





Other Agency Information

An ongoing challenge that many industries have faced in recent years is recruiting and retaining qualified employees. We have experienced our share of turnover and longer than average vacancies which spurred an initiative of conducting a "Stay" Survey brought forward by our Employee Engagement Committee. The goal of the survey was to gain a better understanding of why employees are staying and why might they consider leaving. The survey was conducted in early January and results were disseminated throughout the organization in early February. We were pleased with the overall response rate of 85% of employees completing the survey. We learned that 66.5% of our current employees are not looking for employment elsewhere primarily because they like working for their supervisor and being part of their team, as well as, experiencing a positive work environment/culture. We also learned that 33.5% of our employees have actively looked for other employment, primarily due to current salary not meeting their needs, as well as, concerns with work environment and ability to work from home. The survey has created opportunities for conversations to occur throughout the organization to look at what is working well within our teams/departments and possible areas of improvement. Our goal is to continue to take into consideration the feedback from employees as leadership continues to make decisions on the future of the agency.