

## MINUTES

### REGULAR MEETING OF THE ALLEGHANY HIGHLANDS COMMUNITY SERVICES BOARD

Thursday, July 25, 2019

The Alleghany Highlands Community Services Board held the July Board meeting on July 25, 2019 at 4:00 p.m. at the Admin office located at 205 E. Hawthorne Street, Covington, VA.

PRESENT: Anne Dean, Teresa Johnson, Connie Back, Nolan Nicely, Brenda Woodie, Bob McCallister

ABSENT: Bill Gilliland, Lisa Hicks, Terrie Wright

Also present: Ingrid W. Barber, Executive Director; Cathy Schiffer, Director of Mental Health and Substance Use Services; Crystal Homer, Human Resources Manager, Adam Kenny, IT Manager and Patty Flanagan, Finance Manager

Also absent: Angie Goodbar, Director of Developmental Services, Lynn Brackenridge, QI Manager and Adam Kenny, IT Manager

Anne Dean, Vice Chair, called the meeting to order at 4:00 p.m.

#### APPROVAL OF MINUTES OF May 16, 2019 REGULAR MEETING

MOTION: That the Board approve the minutes of the May 16, 2019 regular meeting.

MOTION: Nolan Nicely, Jr.

SECOND: Teresa Johnson

VOTE: Unanimous

#### PROGRAM REPORTS

##### Mental Health & Substance Abuse

Cathy Schiffer presented the following report:

- Alleghany Highlands Community Services, Alleghany Highlands Healthy Youth Coalition and Alleghany County Sheriff's Office have partnered to implement a Project Sticker Shock in our community. Project Sticker Shock is a youth led prevention program that supports existing community activism, cooperative efforts and community capacity building to combat underage drinking and its related problems. It seeks to reach those persons 21 years of age or older who might illegally purchase alcohol and provide it to minors. Youth will visit participating retailers accompanied by staff members from AHCS, Alleghany County Sheriff's Office and Alleghany Highlands Healthy Youth Coalition. They will place prevention stickers on multi-packs of alcohol products that might appeal to underage drinkers. The stickers display a warning message about the penalties for purchasing or providing alcohol to minors.
- On June 19th, three Case Management staff attended the Regional Military Culture and Suicide Prevention Summit. This event was hosted at VMI. Ben Shaw from the VA Dept. of Veterans Services spoke in regards to military culture. West Dickens from the VA Medical Center spoke on Lethal Means Safety Planning and Rebecca Textor of DBHDS shared an overview of Lock and Talk Virginia.
- Alleghany Highlands Healthy Youth Coalition participated in the Cork and Pork Festival this year. Coalition members handed out medication lock boxes, medication disposal kits, cable locks and trigger locks. During the months of May and June, these totals equaled 81 Medication Locking

Devices, 21 trigger locks, 14 Cable Locks, and 31.6lbs of medications were dropped off. Seventeen community members were trained in ASIST, 3 in ACES, and 3 in Safe Talk.

- AHCS Prevention Coordinator, Chelsea Dunaway completed Youth Mental Health First Aid Training (YMHFA). YMHFA is designed to teach parents, family members, caregivers, teachers, school staff, peers, neighbors, health and human services workers, and other caring citizens how to help an adolescent (age 12-18) who is experiencing a mental health and/or addictions challenge and/or is in crisis. AHCS now has two YMHFA trainers and two adult MHFA trainers.
- Members of the Leadership team and several Supervisors attended the VACSB conference in Williamsburg, VA on May 1st, 2nd, and 3rd. DBHDS and VACSB continue to offer education and guidance surrounding the execution, strategies, and plans as each CSB implements the objectives of STEP-VA.
- Sarah Diffenbaugh, LPC intern attended a three day CIT training in Harrisonburg, VA. She is currently acting as the CIT Supervisor to aid the team in preparations for opening. This role will be paramount to the establishment of policies, procedures, and roles and responsibilities of staff at the site. Of note, Sarah has completed her internship hours and can now sit for the licensure exam. Susan Chittum, LPC intern, Community and Residential Support Supervisor, has also completed her internship and will sit for her licensure on September 4, 2019.
- In May, AHCS hired a full-time Peer Specialist whose primary duties are to engage and connect with individuals that are brought to the CIT site on an ECO. Rick Martin has been trained in MHFA and is scheduled for ASIST in September 2019.
- AHCS has hired a new psychiatrist Dr. Nene who will begin tele-psych services beginning August 2019.
- On June 18th, ACHS had a successful site visit by Nicole Gore, DBHDS and Jean Hoyt, VDH. AHCS began the implementation of the Zero Suicide Grant in April 2018 and Ms. Gore and Ms. Hoyt visited AHCS to determine the successful implementation of the grant's objectives in AHCS' procedures, policies, prevention, treatment, and follow up.
- Four clinic staff have been trained in the Government Performance and Results Act (GPRA), a required outcome measure for the State Opioid Response (SOR) grant that AHCS received in March for \$40,000. This grant provides a multitude of incentives to those individuals who struggle with Opioid Addiction in the Medication Assistance Program (MAT). Allowable expenses are treatment, medications, urine screens, transportation, childcare and supplies. Peer specialists are being utilized in the program to complete the GPRA and enter into the OMNI Institute's database for analysis.

#### Developmental Services

Ingrid Barber provided the following report for Angela Goodbar:

- Community Involvement and Innovation: Community involvement is vital for the individuals served by Alleghany Highlands Community Services. The program employees were engaged in planning events and activities for the individuals throughout May and June. On May 16th, friends and family gathered for a Luau at Merryfield. They were excited to have their guests, fancy food, games, and tropical décor. They had a cookout and visit to the Covington City Pool on June 23rd. The individuals from Friendship Residence and the participants of the day support program enjoyed a day at the Safari Park in Lexington in May. A group of individuals in the community engagement program visited WDBJ7 for a tour and an opportunity to meet with the newscasters. The individuals from the day support program continue to go to the Lexington Movie Theater and YMCA monthly. The choir and bells group also volunteer at the local nursing homes.

- Support Coordination: The Department of Behavioral Health and Developmental Services (DBHDS) allotted AHCS two new waiver slots for FY 19. Support Coordination received a DBHDS Licensure Review with two minimal findings. Corrections were reviewed and approved by licensure.
- Residential Programs: Merryfield Residence is at full capacity with all nine beds filled. Friendship Residence has one vacancy and seven beds filled. Virginia Department of Health conducted their annual survey of Merryfield on June 9th-11th. The VDH surveyors were complimentary of the condition of the building and the direct services provided in the home. The Fire Marshall arrived in June to review compliance with the Fire Life Safety Code. Angie Goodbar, Director met with the Merryfield contractors to complete the yearly performance evaluations and renew contracts. AHCS representatives continue to meet quarterly with Alleghany Family Pharmacy for collaboration and continuity of care. The Independent Review Committee and Behavioral Advisory Committee meets quarterly to review all behavior plans that include restrictions.
- Public Guardian Partnership: The PGP board met regularly to receive program updates and work on updating the program by-laws. AHCS recently renewed the annual contract with the Department of Aging and Rehabilitation Services (DARS). The Department will be conducting an annual monitoring visit July 29th- August 1st.
- Infant/ Toddler Program: The Annual Record Review for Local Early Intervention Determinations was completed for FY 2019. The AHCS local system was found at 100% compliance regarding the 45 day timeline from referral to IFSP (or finding an infant or toddler ineligible), 30-day timeline for start of services after an IFSP is written, and timelines for transition planning. Additionally, our local system exceeded state targets for Child Find (percentage of infants and toddlers who enter EI services per local population) for birth-1 (5.80 to state target of 1.26), and birth - 3 (7.21 to state target of 2.89). Melissa Zimbardo, EI Service Coordinator, completed a month long series of on-line/phone conference trainings on adult learning strategies to support caregivers in early intervention.
- Grants: AHCS received estimates on refinishing the floors at Friendship. The total cost of the work, moving/storing the furniture, and to relocate the individuals will be \$15,000. AHCS requests board approval to submit two grant applications: Grant to Alleghany Foundation-AHCS will submit an application in the amount of \$12,500 to refinish the floors, cover cost of moving/ storing furniture, and temporary relocation of the individuals. Grant to Foundation of Rockbridge, Bath, and Alleghany- AHCS will submit an application in the amount of \$2,500 to acquire the remaining cost to refinish the floors downstairs at Friendship Residence. The grant application will be submitted by August 1st.
- The DS Director attended the Regional DS Council and REACH Advisory Meetings. The DS Director attended the Public Guardianship Board Meeting, multidisciplinary team meetings, and the Guardianship Conference in Staunton. The Director participated in the VACSB Conference May 1st-3rd in Williamsburg.

### Quality Improvement

Ingrid Barber provided the following report for Lynn Brackenridge:

#### **UR, Compliance and EHR:**

- Incident Reports Processed – 41 in May and 44 in June

- # CHRIS Reportable – 9 in May and 14 in June
  - Safety Inspections – 2 in May and 2 in June
  - Level I RCA – 32 in May and 30 in June
  - Level II RCA – 7 in May and 14 in June
  - Level III RCA – 2 in May and 0 in June
- As of 9/1/18 Root Cause Analysis (RCA) must be conducted on all Level II or Level III incident reports. The types of incidents that fall in the categories of Level II or III are listed below:

Level II

- Serious Injury
- Missing Individual
- Emergency room or urgent care visit when not used in lieu of a primary care visit
- An unplanned psychiatric or medial hospital admission
- Choking incidents that require direct physical intervention by another person
- Ingestion of any hazardous material
- Diagnosis of the following: bowel obstruction, decubitus ulcer or increase in severity level, or aspiration pneumonia

Level III

- Death of an individual
- A sexual assault of an individual
- A serious injury of an individual that results in or likely will result in permanent physical or psychological impairment
- A suicide attempt by an individual admitted for services that result in a hospital admission

CAPS:

6/10/19 - Merryfield – VDH CAP

6/19/19 - Merryfield – State Fire Marshall

Other:

Participation in Meetings/Trainings/Committees by QI staff:

- Safety Meetings, VACSB QL Meeting and VACSB Credible Users Meeting

AUDIT schedule:

- During the month of May, the DBHDS Licensure Specialist reviewed 75 Mental Health Case Management records. No citations were found during review.
- Annual renewal license submitted for 127-10-001 (Adult In-home Respite Service) & DBHDS Licensure Specialist reviewed program. No citations were found during review.

Human Resources

Crystal Homer reported the following:

Loss Report:

- Worker's Comp Claims –
  - \$54,434.82 FY19 total, FY18 None
    - \$47,000 knee injury,

- \$359.82 fall
- \$2,075.00 needle puncture
- Auto Claims
  - Auto Physical Damage – \$3,842.00 incurred FY19, FY18 was \$613.84
  - Auto Liability Claims – \$7,1632.12 incurred FY19, FY18 was \$2,808.71
- Property Claims – None for FY19

With trends up in worker’s comp and auto claims, we will likely see an increase in the FY21 premiums.

**Separation:**

See attached turnover reports from BambooHR

**Staff Development:**

- The following shows compliance (YTD) for required mandatory training courses. This report is completed around the 15<sup>th</sup> of each month.

January 2018 -144 staff with 96% completing required courses  
 February 2018 -147 staff with 95% completing required courses  
 March 2018 -145 staff with 93% completing required courses  
 April 2018 -146 staff with 94% completing required courses  
 May 2018 – 148 staff with 93% completing required courses  
 June 2018 – 147 staff with 92% completing required courses  
 July 2018 – 144 staff with 93% completing required courses  
 August 2018 – 142 staff with 95% completing required courses  
 September 2018 – 142 staff with 94% completing required courses  
 October 2018 – 140 staff with 96% completing required courses  
 November 2018 -142 staff with 97% completing required courses  
 December 2018 -139 staff with 96% completing required courses  
 January 2019 -143 staff with 90% completing required courses  
 February 2019 -141 staff with 95% completing required courses  
 March 2019 -139 staff with 95% completing required courses  
 April 2019 -138 staff with 96% completing required courses  
 May 2019 -138 staff with 95% completing required courses  
 June 2019 -138 staff with 96% completing required courses

**Recruitment: Please visit our website to link to the new BambooHR careers site**

Recruitment reports attached

**General Updates:**

- Working on updates to HR policies and procedures
- MAT brochure developed and completed
- Continuing to finalize timekeeping implementation with finance
- Compensation studies completed for difficult to attract positions
- Enhanced benefits for fitness memberships and 457b plan contribution beginning July as additional support for financial and health wellness
- Check out our events on Facebook and share!

### IT Manager Report:

Ingrid Barber provided the following report for Adam Kenny:  
Duties performed or in progress since May 2019:

#### **Help Desk:**

- Total number of Credible Requests - 661
- Total number of IT Tickets - 1124

#### **EHR:**

- Implemented CCS changes for FY2020
- Completed end of year CCS submission
- Submitted Jan-June 2019 SPQM data
- Reviewed pharmacy data with Lynn for Genoa

#### **Hardware and Networking:**

- Installed TVs at Lifeskills and Mental Health Clinic
- Worked with contractor to wire Mental Health for new wireless access points
- Installed Ubiquiti surveillance camera at admin for testing purposes
- Installed and configured new router for Lifeskills
- Configured and installed new wireless access points at Mental Health

#### **Other:**

- Attended quarterly Credible User Group meeting
- Attended monthly DMC meeting
- Attended reimbursement meeting
- Attended bi-weekly leadership meetings
- Attended Cybersecurity conference presented by EN Computers
- Presented in new hire orientation
- Submitted monthly CCS report
- Visited new CIT Assessment location for network planning and began process of configuration of wiring

### Financial Reports

- Financial reports were submitted by Patty Flanagan. She went over the FY19 & FY20 Letter of Notification comparisons.

### **EXECUTIVE DIRECTOR'S REPORT AND RECOMMENDATIONS**

Ingrid Barber provided the following report:

#### **Agency Issues**

1. Myers and Stauffer still has not finalized our 2018 ICF cost report.
2. The lease was finalized with Hospital Corporation of America for the CIT Assessment Site on June 1, 2019. Keys were issued, and some furnishings and decorations have been ordered. Cathy Schiffer

and I have been interviewing candidates for the supervisor and pre-screen positions. The officers have been hired by the Alleghany County Sheriff's office, and they have completed field training. The officers will attend CIT training out of the area to ensure that they are trained before the site opens. The assessment site is currently being painted and clean, and we have requested that a sink unit be removed from one of the offices. We are aiming to open sometime in mid-August.

3. The impact of Medicaid Expansion/**Medicaid Expansion Data** - DBHDS Finance, in coordination with DMAS and a CSB workgroup, has developed and fielded a financial template for capturing data on the revenue generation at CSBs due to the expansion of Medicaid. This information will inform decision makers on any gap or shortfall in CSB revenue for FY 2019 as well as projections for FY 2020. We continue to await word regarding any state funds that may be provided to mitigate the losses we are experiencing from Medicaid expansion implementation. We do not expect to receive any word until at least August.
4. Audit with Robinson, Farmer and Cox Associates – The agency audit is scheduled for August 26 and 27, 2019. An engagement letter will be signed by Ingrid Barber and Lisa Hicks. The letter explains the audit process, what they will be reviewing, what kind of reports will be produced, internal controls, management responsibilities, fees, etc. We will also engage with Mary Earhart, CPA, for year-end closure of our financial records to ensure we are in compliance. She will be here August 12 and 13, 2019.
5. The FY 19 and 20 Performance Contract is included in your packet. We will need Board approval under the Code of Virginia Title 37.2. Scope of changes include CSB Accountability requirements, and data reporting.

### **Community Issues**

1. I will be working with the Commonwealth Attorney and various stakeholders on seeking a drug court for the Alleghany Highlands. A meeting is scheduled for August 21, 2019.

### **State/Regional/Federal Issues**

1. **DOJ Settlement Agreement** - DBHDS received the DOJ Independent Reviewer's 14th Report to the Court which is now posted on the DBHDS website. Virginia gained compliance on four additional provisions in Section III of the Settlement Agreement; and maintained all previously determined (70) compliance ratings. New compliance ratings were added related to creating waiver slots, crisis services, and case management. Negotiations have resumed with the Department of Justice attorneys on final Quality and Risk management compliance indicators and should be complete this October.
2. Step-VA Update-See Handout-Planning for STEP VA service definitions and metrics continues, with the intent being to "get ahead" of the process to facilitate deeper and more focused planning for future steps. It is essential that this process result in a truly integrated system of care in lieu of a mere collection of services. It is also essential that expectations align with allocated funding. The next steps being planned are Crisis services and a combination of Case Management/Care Coordination/Psychiatric Rehabilitation.
3. The state has launched an Alternative Transportation pilot program that is currently in Phase I, this CSB will be involved in Phase III. Alternative transportation provides individuals, under a commitment order and who are in crisis, with unrestrained transport in a secure vehicle.
4. As part of its enhanced role in evaluating health and human resources programs, the Joint Legislative Audit and Review Commission (JLARC) received two reports on June 17, both dealing with aspects of the state's publicly funded behavioral health system. JLARC staff discussed the

complexity of the current funding structure for CSBs, pointing out that CSBs receive the majority of their funding from Medicaid reimbursements, state General Funds, and local contributions. The report notes that the Department of Behavioral Health and Developmental Services (DBHDS) allocates the majority of the state General Funds to the individual CSBs based on historical funding levels, which often reflect funding models that were developed in the past to support particular services or initiatives. JLARC staff note that DBHDS does not take Medicaid reimbursements, which can vary among CSBs, into account when allocating state funding. The report advocates for delaying the initiation of the remaining steps by one year in order to ensure that funding is distributed in a manner that factors in demand for services as well as individual CSBs' capacity, and that requirements and performance measures are fully vetted before funding is allocated. JLARC staff encouraged the General Assembly to improve DBHDS's capacity to oversee the programs and communicate with CSBs, perhaps by appropriating some funding for administrative costs.

5. The Virginia Behavioral Health Redesign workgroup, which was developed to address redesigning the delivery of behavioral health services across the state, has determined committee members from nominations from CSBs and private provider networks for stakeholder implementation workgroups. The workgroup will be sending communication to update us on large-scale progress and plans for the time being and then to schedule a full stakeholder workgroup with the original members for later this summer once we have made progress with the implementation groups. Priorities are included in your packet.
6. Behavioral Health Needs Assessment-The two-day site visit being planned for all CSBs must be done by October 12, 2019 and teams from the consulting firms and DBHDS will be involved in this process. Arlington CSB is going to be a pilot site. These visits are planned to be intensive. Interviews with Execs, key staff, Board if possible, individuals served, families – the gamut. CSBs will be responsible for setting up client focus groups to interview. This process will intersect with Redesign, rate study, and STEP. After the site review of each CSB, within 10 days, the plan is to give to CSBs a data profile (CCS 3 info has already been exchanged) and summary with strength identified and “opportunities to explore” with an eye on STEP-VA services. Final assessment report expected after January 1, 2020.

### **Public Policy**

1. The VACSB 2019 Public Policy Conference will be held at the Hotel Roanoke and Conference Center on October 2-4, 2019.

### **OLD BUSINESS:**

1. ICF Cost Report update- this has not been finalized as of today
2. Update of Jail Services/CIT update – The lease has been signed, keys have been issued and furniture has been ordered. Interviews have taken place and several positions filled. Soft opening is planned for mid-August.
3. Department of Justice Agreement Update – DBHDS has received the DOJ 14<sup>th</sup> Report to the Court. Negotiations have resumed and should be complete in October.
4. Medicaid Expansion/Cuts update – A financial template has been completed to capture data on revenue generation at CSBs due to Medicaid expansion. This will provide data to decision makers.
5. Step-VA Update – (System Transformation Performance and Excellence) - Planning continues for service definitions and metrics with more planning for future steps. Expectations must align with funding. Detailed information is included.



**NEW BUSINESS:**

1. State Alternative Transportation – Currently in Phase I, our CSB will be involved in Phase III.
2. Joint Legislative Audit and Review Commission (JLARC)-Based on two reports received, issues are being discussed related to the current funding structures for CSBs. Detailed information is included.
3. Behavioral health Redesign Workgroup – This workgroup will keep the CSBs updated on progress and plans on redesigning delivery of behavioral health services.
4. Virginia Behavioral Health System Assessment –This will be a two-day site visit and must be completed by October 12, 2019. After extensive interviews, a final assessment report will be sent after January 1, 2019. Detailed information is included.
5. Audit with Robinson Farmer and Cox Associates scheduled for August 26 and 27, Mary Earhart, PLLC Consulting scheduled for August 12 and 13. An engagement letter has been signed with details on the audit and Mary will ensure compliance of our financial records.
6. VACSB Meeting Calendar for FY 2019 and 2020 – Included in packet.
7. Approval of the FY 2019 and FY 2020 Performance Contract. This was included in the board packet emailed to the board for review.

MOTION: That the Board approve the FY 2019 and FY 2020 Performance Contract.

MOTION: Bob McCallister

SECOND: Nolan Nicely

VOTE: Unanimous

8. Approval of Grants – Foundation of Rockbridge, Alleghany and Bath/Alleghany Foundation (Flooring Friendship Residence). These were sent to the board via email for review.

MOTION: That the Board approve the Alleghany Foundation grant.

MOTION: Bob McCallister

SECOND: Nolan Nicely

VOTE: Unanimous

MOTION: That the Board approve the Foundation of Rockbridge, Alleghany and Bath grant.

MOTION: Teresa Johnson

SECOND: Bob McCallister

VOTE: Unanimous

**CLOSED SESSION**

CODE OF VIRGINIA: PERSONNEL 2.2-3711 A (1)

MOTION: That the Board enter closed session to discuss Personnel Matters, as authorized by the Code of Virginia Section 2.2-3711A(l):

MOTION: Nolan Nicely

SECOND: Connie Back

VOTE: Unanimous

TIME: 4:35 pm

**CERTIFICATION OF EXECUTIVE SESSION**

A signed roll call was taken for each member present who certified that to the best of the member's knowledge that:

Only public business matters lawfully exempted from opening meeting requirements by Virginia law were discussed in the closed meeting to which this certification applies; and only such public

business matters as were identified in the motion convening the closed meeting were heard, discussed or considered by the Alleghany Highlands Community Services Board.

Reconvene Regular Session:

MOTION: Brenda Woodie  
SECOND: Connie Back  
VOTE: Unanimous  
TIME: 4:54 pm

MOTION: That the Board approve an addendum to the Executive Director's contract as recommended by the Executive Committee:

MOTION: Connie Back  
SECOND: Teresa Johnson  
VOTE: Unanimous

MOTION: That the July 25, 2019 regular meeting of the Alleghany Highlands Community Services Board be adjourned:

MOTION: Bob McCallister  
SECOND: Nolan Nicely  
VOTE: Unanimous  
TIME: 4:57 pm

Adjourn

**Next Meeting:** Thursday, September 19, 2019 **Location:** Family Life Christian Center

- **Reminders: Thursday, September 19, 2019, 11:30 am, Annual Meeting Family Life Christian Center (mandatory for employees)**
- **The VACSB 2019 Public Policy Conference will be held at the Hotel Roanoke and Conference Center on October 2-4, 2019**
- **Planning and Advocacy Board Committee meeting~September 9, 2019 4:00 pm-Bill, Terrie, Brenda**