

# HRCSB Board Report – December 2024

Rebekah Brubaker (Executive Director) Barbara Brady (Administrative Services) John Malone (Developmental Services) George Nipe (Behavioral Health Services) Andrea Skaflen (Crisis Services) Adam Yoder (Comm. Mental Health Services)

# Message from the Executive Director

As we celebrate the holiday season, I am reminded of the strength, resilience, and progress of the individuals and families we serve. In the spirit of gratitude and joy, our agency is committed to fostering a sense of community and support, ensuring that everyone—regardless of their challenges—feels valued and empowered. Whether through offering special holiday events (Thanksgiving meals, Christmas parties, etc.) providing resources (donation drive), or simply sharing moments of connection, we are reminded of the importance of hope, compassion, and care. It is also important to recognize and appreciate the dedication of our staff, who continue to make a profound impact on the lives of those in need. I am deeply grateful for the community of staff who are able to celebrate the successes, create space for the losses and champions the next great idea – without each of them, this agency wouldn't be able to provide the needed services to our clients and our community.

Rebekah Brubaker, LPC

## Administrative Services

### Compliance

The Compliance team has been focusing on cross-training this month. We have an extremely skilled Credentialing Specialist who works with agency staff, the Board of Counseling and the various MCOs to ensure that all staff have updated credentials established. She is working with the Authorizations team to teach them the various tasks of tracking credentialing work, ensuring that we have continuity of operations in this critical area. Also, the Quality Improvement specialists are learning form building in Credible so that more than one individual knows this important skill.

Additionally, our Authorizations Specialist Becky Smoker recently went above and beyond in helping area veterans successfully transition to HRCSB services. With the departure of a local therapist, we were seeing an influx of veteran referrals – which includes a complex authorization



process. She contacted the VA and our intake staff and has streamlined a process to ensure that coverage is ready and available for any new veteran client.

### Information Technology (IT)

IT Support Specialist Jacob Miska has been hired as our Network Administrator. This has been a long recruitment and we are thrilled to have Jacob take the role. He has been "the face of IT" for two years, welcoming and providing orientation to new staff and we are happy to have him expand his IT skills and experience in networking. Recruitment for an IT Specialist has begun.

### Clerical

The Clerical team continues its systematic update of patient contact and insurance data, helping with our billing and revenue efforts. The team is also very appreciative of the support from Compliance staff (and Medical Practice manager Erica Martin) for providing early morning backup to enable them to have regular Clerical Staff meetings during business hours. This is the first time in recent history that the Clerical staff have been able to meet and discuss business on a consistent basis and they are appreciative of the coverage.

### Facilities

Dickson Sommers Facilities Specialist, has been busy planning for winter, including securing snow removal service contracts and ensuring we are ready for Inclement Weather. The entire team held a prep meeting to review our procedures for weather closings or delays. Dickson also spent a good part of the last month tracking down a HVAC line leak, which was then successfully resolved.

### **Risk Management**

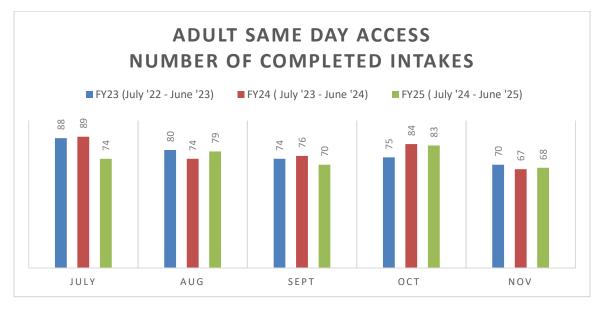
Josh Dyke Risk Management Specialist, is participating in the cross-training in the Compliance Department, learning both how to create forms in Credible and assisting with MCO audits. He is also finishing all trainings for staff, including the roll-out of Credible Serious Incident Report project. He is working with data specialists to create a report from Credible for the SIR data, to simplify his reporting responsibilities.

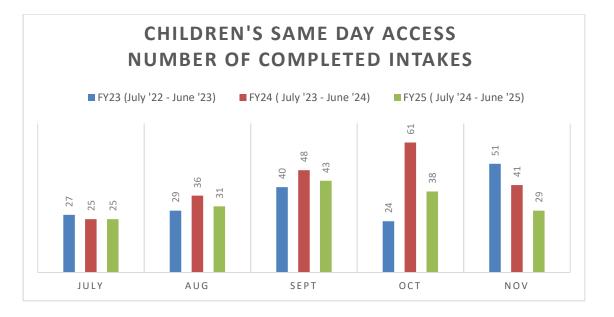
## **Behavioral Health Services**

### Same Day Access (SDA) – Adult & Child

We continue to provide walk-in intakes for adults on Mondays, Wednesdays and Fridays as well as scheduled intakes for children and families on Tuesdays and Thursdays. So far for the month of November, the Same Day Access team has completed 68 intakes for adults and 29 intakes for child/adolescent clients. Both numbers are either at, or near, the lowest monthly mark for the fiscal year so far but a slow-down in intakes around this time of year is not uncommon.





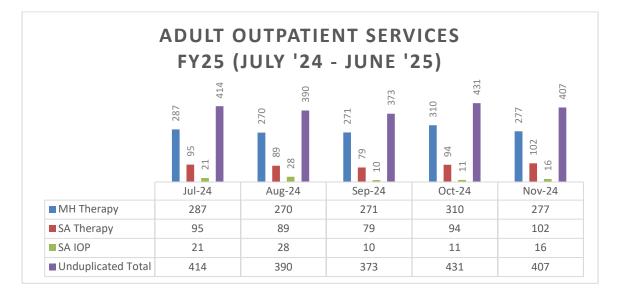


### **Outpatient Therapy Services – Adult**

Thus far in the month of November the Adult Outpatient Team has provided individual and group therapy for 277 individuals in mental health focused treatment, and for 102 individuals primarily working on substance use related issues. We also served 16 individuals in our substance use focused Intensive Outpatient Program. In the overall picture these numbers are right around average for the fiscal year, and our IOP utilization hit its highest mark in the last three months. The search to replace the open therapy position on the Adult OP team is still

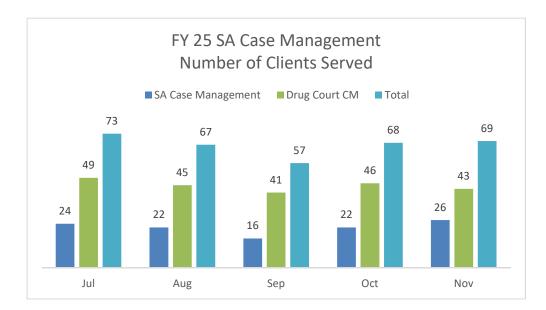


ongoing, but several promising candidates have been interviewed so we are hopeful to have an announcement of a new teammate in the near future.



### SUD Case Management - Adult

In the month of November our SUD case managers have served 69 individuals, with 43 of those being referrals from the local Recovery Court (formerly Drug Court) program. Both numbers fall right around average for the fiscal year. The team continues to have excellent capacity to serve clients in this program and is able to quickly enroll newly referred clients as well.





### **Care Coordination Adult and Child**

The Care Coordination team continues to offer assistance for clients that either do not meet criteria for case management or, in some cases, are awaiting being opened to case management. Overall the team served 28 clients for the month of November which is the lowest number so far this year. Finding resources related to housing and medical care were by far the most common category of needs addressed by the team this month.

### **Child Outpatient and Early Intervention - School Based Services**

The Child/Adolescent Outpatient team has provided individual therapy services to 405 clients, and at times their families, in the month of November. Currently we have 549 individuals enrolled in child/adolescent therapy services. While the number of clients enrolled is still somewhat below average, the number of therapy sessions provided is above average for the fiscal year so far.

Our Early Intervention Clinicians provided 391 supportive sessions to 102 clients in the month of November. To give this some context, in the previous fiscal year the EIC team averaged providing around 228 sessions to 85 clients so we are obviously very pleased with the level of utilization of our EIC services. We continue to advertise for the two remaining EIC positions.

### **Children's Mental Health Outreach Services**

Though our child/adolescent intake numbers remain in the average range, the demand for Case Management, Case Supports, and Family Care Coordination services continues to be high. Each service reflects variations in funding sources as well as case intensity, with FCC clients tending to be the most complex and labor intensive as those client have either already been removed from the home, or are in danger of being removed. Final billing numbers for November are not in yet, but in looking at the full October numbers 247 clients and families were served. While this is a little less than average, we are still getting our newest case managers caseload build up and we have been operating down one full time position on the FCC team. We are also in the midst of the transition from one of our case managers (Hayley Wagner) becoming a Family Care Coordinator, so overall capacity for that team has been below average but we hope to get everything back to full strength soon.

### **Behavioral Health Wellness**

The Behavioral Health Wellness (BHW) team continues to offer trainings and promote education and awareness of mental health and substance use related issues in our community. This month the BHW team completed 3 REVIVE Lay Rescuer Trainings at Massanutten Regional Library, the Family Life Resource Center, and on JMU campus for the school's Biology Department. The team also provided a 1 hour presentation on Mental Health Wellness & Leadership for young adults at the recent Horizon Conference that was also hosted on JMU campus.



The BHW team completed two more school based projects this month. A Calm Room was completed at Harrisonburg Academy providing some more options to HA students for safe, sensory friendly, and trauma informed space when needed. The team also packaged, and disseminated, 500 Resiliency Kits to both Harrisonburg City, and Rockingham County Schools. These kits contain wellness and sensory supporting items that a student can use to help with emotional regulation like fidgets, journals and coloring supplies.

In terms of general events in the community this does tend to be a slower time of year for the BHW team, primarily as the change in weather limits a lot of opportunities for community engagement that typically occur during warmer times of the year. But with that said the team did host a table at the Harrisonburg Farmer's Market this month and ended up providing Rapid REVIVE training to 6 members of our community.

# **Community Mental Health Services**

There are approximately 384 unduplicated individuals in our Community Mental Health Services (CMHS) programs. The CMHS department consists of services to adults age 18 and older with a diagnosis of serious mental illness such as schizophrenia, bipolar, major depressive disorder, or schizoaffective disorder. CMHS programs include Case Management, Supervised Living Residential, Mental Health Skillbuilding Service, Peer Recovery Services, Permanent Supportive Housing, Psychosocial Rehabilitation, State Hospital Discharge Coordination and Assertive Community Treatment.

In November, our CMHS team met in the training room for a Fall Gathering. We enjoyed a baked potato bar, along with cookies and cider. We discussed the topic of staff burnout, and setting boundaries with clients. Small group conversations resulted in a list of ways staff can get support for problem solving relating to client challenges. There were forty staff present together.

### Adult Mental Health Case Management

The Adult Mental Health Case Management team will have three vacant positions as of the first week in December, with a new case manager to start in mid-December. The months of October and November also saw a higher than usual number of priority referrals- clients coming through intake as a discharge from a behavioral health hospitalization. Despite this, our team tried to celebrate the successes, however large or small. A case manager was able to prevent an eviction by coordinating with his client and the property manager, and linked the client to some rental assistance. Case managers helped clients access the polls on Election Day to vote. A case manager worked tirelessly to support a client from homelessness, through multiple hospitalizations, to a new place of stability and security in an assisted living facility placement.



### Permanent Supportive Housing (PSH)

The PSH Lead Housing Specialist and PSH Supervisor attended a Housing Virginia's Most Vulnerable conference in Richmond for two days in October. The session topics included exploration of the challenges that individuals with unsatisfactory criminal and credit histories face when seeking housing; strategies to engage partners from various industries in addressing housing and homelessness issues; the practical aspects of coordinated entry; strategies and best practices for helping tenants transition from supportive housing to more independent living; and individual choice in the transition from homelessness.

The month of November PSH moved in two new clients- one into an apartment in Broadway and the other into an apartment in Rockingham County.

We have 32 individuals enrolled in our Permanent Supportive Housing program who are housed. We have 38 individuals on our referral list.

### **Psychosocial Rehabilitation (Summit House)**

Last month, Summit House hosted the first, and hopefully annual, Virginia Leadership Network (VLN) retreat for both staff and members. The VLN is a network of persons involved with advocating and promoting psychosocial rehabilitation in Virginia. Summit House hosted staff and members from Lakeside Center in Henrico County, Health and Wellness in Richmond, and the West End Wellness Center in Alexandria. Members from each program shared about their program and what was special to them about it. Each program contributed to lunch for all by bringing food to share. The day ended with concurrent tournaments of spades, kings' corners, corn hole, and crazy eights. Health and Wellness won all that tournaments except corn hole, which Summit House won. It was wonderful to have multiple programs together to get acquainted and learn from each other.

### Supervised Living Residential (Market Street)

The last several months in Residential have been full of celebrations! Between our Halloween Party, multiple birthdays (both residents and staff), a sobriety milestone, and our annual Thanksgiving dinner we have had the opportunity to share our joy with one another over many community meals and Fun Fridays. Residents have also celebrated personal milestones such as completing classes and gaining more independence through their hard work. Everyone is currently anxious to start decorating for Christmas and we have many holiday season and winter themed meals and activities planned for December!

Our residents and staff have been doing amazing work with their skill building, and almost every resident has exceeded the minimum expectation for hours engaged in skill building activities each week. One resident has been learning to cook meals for himself for the first time, one resident is currently taking college courses and doing skill building with staff about study habits and school-life balance, multiple residents are always eager to learn more about their diagnoses



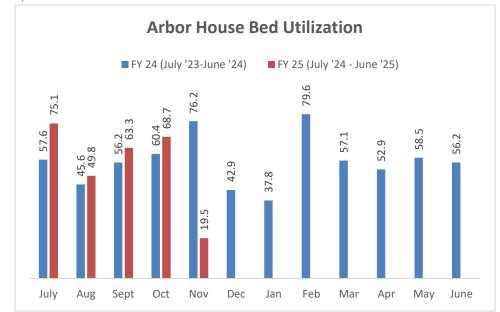
and medications, and multiple residents are attending gym sessions regularly and learning about form, post-workout meals/snacks, and SMART goals.

### **Crisis Services**

Managing utilization rates for crisis services is always a balance of perspective. As part of a larger organization of comprehensive services, successful crisis services means individuals have been provided with meaningful connections back to those other services and the crisis services are no longer needed. The goal of this department is to be good stewards of the resources that the agency and community have entrusted to the teams, never to pursue increased need for the services we have. As I look across the spectrum of the crisis department, I see utilization as a whole and continue to make efforts toward increased access and understanding of the services we have available to serve the community.

### Arbor House (Crisis Stabilization Unit)

Throughout the month, staff at Arbor House and leadership have had many conversations about the low utilization. There have been reviews of previous years' utilization and conversations with local partners to explore potential referrals and consistent trends across acute services. The staff has worked diligently to reach out to referral sources and ensure that we are communicating the availability to support individuals in crisis. The team has also used this time to complete deep cleaning projects and update guidance documents. During November, Arbor House staff coordinated with other HRCSB departments and local community partners to accept 24 referrals from our local and regional partners. The acceptance rate for this month was approximately 38% with medical acuity continuing to be the most common reason for denial (9 out of 15).





### **Emergency Services**

As we approach the holiday season, it is important to note that the Emergency Services team continues to meet the needs of the clients and community during those times of respite for the agency. This team meets that need while it continues recruitment for an open fulltime position and additional after-hours support. During November, Emergency Services completed 41 Prescreening evaluations that have resulted in 15 Temporary Detention Orders (TDO), 14 voluntary admissions to a private hospital, and 9 releases to community supports. As seen in other crisis services, the number of prescreen services for the month is down 67% from the previous month. The team utilized this time to complete agency trainings and create procedures related to the agency Mandatory Outpatient Treatment (MOT) protocols.

#### **Community Crisis Services**

During the month of November, Crisis Response Unit (CRU) made contact with 20 new adult clients, made 55 mental health follow-ups, 3 new adolescents, 4 Officer Initiated ECO's, 1 Magistrate issued ECO requested by the CRU Supervisor, 4 voluntary transports to the hospital, and 3 transports to support initiation of services at the CSB. Community Crisis Services staff attended the Virginia Conference and Professional Development in Roanoke, Virginia. Attending this conference allowed for staff to network with other Crisis intervention Team members across the state. Those in attendance had the privilege to learn from nationally recognized experts in the field so those tools can be used within our community and aid in growing the program.

The Community Paramedic continues to operate within Harrisonburg Fire Department while recruitment for the co-responding Community Case Manager and a Qualified Mental Health Professional (QMHP) is ongoing.

### **Crisis Intervention Team (CIT)**

CIT programs are community partnerships between law enforcement and behavioral health professionals to provide training for law enforcement and first responder personnel regarding mental health and crisis intervention skills. HRCSB has been partnering with our local community for 8 years to provide training in our community. Two of our senior staff members, Stephanie Fultz Senior Manager of Adult Outpatient Services and Denise Janocka Senior Manager of Emergency Services attended the Virginia CIT Coalition Conference with a number of our community partners in law enforcement. The conference is an opportunity to learn from other CIT programs across the state of Virginia and continue to grow our local program.





# **Developmental Services**

### **DD Case Management**

Developmental Disabilities (DD) Case Managers billed 331 units for the month of October. Case managers completed 639 separate contacts to assist with linking clients to services, or monitoring their satisfaction, including 241 face to face visits. They also completed 33 annual ISPs.

Currently we have 342 individuals receiving DD Case Management services, including 256 receiving Waiver services. Of those, 62 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 at least one time per calendar month, with no more than 40 days between visits, with 2 out of every 3 visits occurring in the client's home.

There are 254 individuals on the DD Waiver Waiting list awaiting services. There are 61 individuals on Priority one status, followed by 112 on Priority two, and 81 on priority three. There are 63 individuals on the waiting list who have been on the list for less than a year, followed by 56 who have been on the list from 1 to 5 years. We have two individuals who have been on the DD Waiver Waiting list for over 20 years. The current system in place to allocate slots to individuals does not factor in time on the waiting list as a determinant, so individuals can remain on the waiting list without receiving a slot as long as their living situation remains stable. We received 6 requests for services, completed 6 screenings, opened 2 new clients, and placed 6 people on the waiting list.



Case managers are working to complete Slot Allocation Referral Forms for the next round of DD waiver slots, set to be allocated in early December. Waiver slots are being allocated quarterly as part of the Department's efforts to eliminate the Priority 1 waiting list statewide. We added an additional case management position to the DD team, in large part to address the added number of clients which will require case management due to the influx of these waiver slots.

### Infant and Toddler Connection

In October the Infant at Toddler program completed 386 billable services related to the delivery of Speech Therapy, Occupational Therapy, or Developmental Services. Support Coordinators added an additional 148 services, including 68 face to face visits.

We continue to recruit for a full time Speech Therapist, Service Coordinator. We filled our clerical position.

We currently have 296 active enrollments as we head towards the December 1 child count. The child count is a once a year "snapshot" of our current enrollment. The number of clients enrolled on the date of the child count has a significant effect on our Federal funding. We expect our child count to be comparable to our child count from last December. We continue efforts to bring awareness to the ITC program and to identify children who may be eligible for services. In November we completed community screenings at Agape Childcare as part of those outreach efforts.

	2016-	2017-	2018-	2019-	2020-	2021-	2022-	2023-	2024-
Month	2017	2018	2019	2020	2021	2022	2023	2024	2025
July	17	20	31	30	30	35	42	40	34
August	30	40	38	36	35	42	44	45	40
September	31	36	33	38	33	29	30	45	44
October	18	35	30	36	34	26	38	38	52
November	31	30	27	28	30	29	41	31	30
December	22	28	35	34	24	39	25	32	
January	38	31	44	37	41	22	49	28	
February	24	32	35	35	31	29	48	33	
March	31	30	32	40	34	55	58	53	
April	30	43	34	32	38	53	50	34	
May	48	20	33	25	26	45	55	45	
June	34	32	25	35	45	38	35	29	
Total									
Referrals	353	377	397	406	401	442	515	453	200

### **Referrals per month**

									HR
									CSB
Child Count-									
Dec 1	127	162	173	195	201	193	225	259	

The Infant and Toddler Connection team spent part of a breezy afternoon at Camp Brethren Woods for a training and team-building retreat. Staff engaged in several facilitated activities related to communication and teamwork, and also found time for some pizza, s'mores, and lots of fun.

