

MINUTES

Rappahannock Area CSB

July PPE Meeting

Tuesday, July 10, 2018, 10:30 am - 12:00 pm

600 Jackson Street, Fredericksburg VA 22401

In Attendance

Al Collins; Amy Umble; Andrea Merwin; Beth Elkins; Brandie Williams; Debra Draper; Donna Andrus; Elizabeth Wells; Greg Bundrick; Jacque Kobuchi; Jim Howard; Joe Wickens; Karen Kallay; Ken Lapin; Kheia Hilton; Linda Ball; Matt Zurasky; Patricia Newman; Sharon Killian; Stephanie Terrell; Stephen Curtis

Not In Attendance

Tina Sears

A. CLOSED MEETING VA CODE 2.2-3711 A(4), A(7) & A(15)

It was moved by Kheia Hilton and seconded by Matt Zurasky that the Program Planning and Evaluation Committee of the Rappahannock Area Community Services Board convene in a closed meeting pursuant to Virginia Code §2.2 – 3711 A(4) for the protection and privacy of individuals in personal matters not related to public business; Virginia Code §2.2 – 3711 A(7) to receive a briefing by staff pertaining to litigation, where such briefing would affect the litigation posture of RACSB if held in open session; and Virginia Code §2.2 – 3711 A(15) to discuss medical records excluded from 2.2 – 3711 pursuant to subdivision 1 of 2.2 – 3705.5.

Upon reconvening, Kheia Hilton called for a certification from all Committee members that, to the best of their knowledge, the Committee discussed only matters lawfully exempted from statutory open meeting requirements of the Freedom of Information Act; and only public business matters identified in the motion to convene the closed meeting.

A roll call vote was conducted:

Linda Ball – aye Kheia Hilton – aye
Debbie Draper – aye Ken Lapin – aye
Jim Howard – aye Matt Zurasky—aye
Karen Kallay—aye Al Collins – aye
Beth Elkins - aye

Move: Kheia Hilton Second: Matt Zurasky Status: Passed

B. Emergency Services Activity and TDO Exception Report

Jacque
Kobuchi

Jacque Kobuchi reported that Emergency Services staff completed 404 emergency evaluations and assisted with 103 emergency custody orders and 109 temporary detention orders in June. In 19 instances, state psychiatric facilities were used as facilities of last resort. In these instances, 16 individuals went to Western State Hospital, one to Commonwealth Child and Adolescents, one to Piedmont Geriatric Hospital, and one to Southeastern Virginia Mental Health Institute (because Western State was at capacity).

ATTACHMENT I

C. CIT Assessment Center Report

Kari Norris

Jacque Kobuchi reported that the CIT Assessment Center assessed 35 individuals in June 2018 (Fredericksburg, 13; Caroline, 1; King George, 0; Spotsylvania, 13; and Stafford, 8).

In June, the CIT program manager received training to become a Mental Health First Aid trainer to provide classes to new recruits in the police academy. She also organized a schedule for ride-along sessions with law enforcement officers to foster relationships between law enforcement and mental health communities.

ATTACHMENT II

D. Independent Assessment Certification and Coordination Team (IACCT) Update

Donna
Andrus

Donna Andrus reported that RACSB received 14 IACCT referrals in June. Of these, 13 were completed and one did not show up for the assessment. Seven were initial assessments and seven were for re-authorization of services.

ATTACHMENT III

E. Information Technology and Electronic Health Record Update

Suzanne
Poe

Brandie Williams updated the Committee on information technology and electronic health record system. She told the Committee that: polycom technology had been tested in an assisted care facility so an individual with limited mobility could access telemedicine services; daily meetings occur around Waiver Management System integration; a kickoff meeting for the new Avaya phone system was held; and RACSB is ready to test Avatar Community Consumer Submission state extracts once the state releases its software.

ATTACHMENT IV

F. Lucas and Ross Drive ICF VDH Recertification Survey

Steve
Curtis

Steve Curtis reported that the Virginia Department of Health conducted on-site visits of the Ross Street and Lucas Drive intermediate care facilities. The survey noted seven deficiencies of state regulations. A plan of correction was submitted to the state, and all of the citations have been corrected.

ATTACHMENT V

G. Myers Drive Respite Quarterly Report

Steve Curtis

Stephen Curtis provided a quarterly update on the use of the Myers Drive Respite Home. From April 1 through June 30, 39 individuals used the respite program for adults with developmental disability. Revenue for that quarter was \$41,936.47. This money came from Medicaid, private pay, and a grant from the Robert Cullen O'Neill Fund through the Community Foundation.

ATTACHMENT VI

H. Devon Drive Group Home HUD Management and Occupancy Review

Steve Curtis

Steve Curtis reported that the U.S. Department of Urban Housing and Development surveyed the Devon Drive Group Home. No deficiencies were found and the home received an "above average" rating.

ATTACHMENT VII

I. Waiver Management Systems Integration

Jen Acors updated the Committee on the Waiver Management System. She told the Committee that the support coordinators are waiting for new forms and hoping for seamless integration to the new state system.

ATTACHMENT VIII

J. Kenmore Club Meals/USDA and Virginia Department of Health's Child and Adult Care Food Program

Amy Jindra told the Committee that Kenmore Club follows the Virginia Department of Health's Child and Adult Care Food Program guidelines and the USDA recommendations for meal offerings.

ATTACHMENT IX

K. Data Highlights--FY 2019 Behavioral Health Performance Measures

bwilliams

Brandie Williams reported that the Department of Behavioral Health and Developmental Services sends out performance measures monthly. She told the Committee that the behavioral health measures will change, probably within

the next few months. She said that the clinical services department have been looking at the new data requirements.

ATTACHMENT X

L. 2017 Pay for Performance Incentive Award

bwilliams

Brandie Williams told the Committee that RACSB was awarded \$7,507 from Anthem for meeting outcomes for clinical services. This is the second year in a row that RACSB has received a pay-for-performance award for meeting quality outcomes set by the insurance companies.

ATTACHMENT XI

M. Wait List

Stephanie Terrell

Stephanie Terrell told the Committee that there were 26 individuals on the wait list for outpatient mental health services as of June 30. Nine individuals are waiting for mental health residential services (needs=0; referral=7; acceptance=2). There are 145 individuals waiting for developmental disability residential services (Needs=139; referral=5; acceptance=1). A total of 73 individuals have enrolled in the Program for Assertive Community Treatment, and there are 26 people on the wait list for PACT (needs=19; referral=7).

ATTACHMENT XII

The Committee passed a resolution recommending the Board approve the wait list as presented.

Move: Al Collins Second: Ken Lapin Status: Passed

N. DBHDS Office of Licensing Corrective Action Plans

Stephanie
Terrell

Move: Al Collins Second: Ken Lapin Status: Passed

1. Developmental Disability Group Home

Stephanie Terrell

Stephanie Terrell reported that on March 30, Quality Assurance staff submitted documentation to DBHDS for a mortality review. This review consisted of three months of service documentation for an individual who lived in an RACSB group home and who died. Two citations were received in regard to that documentation. In response, developmental disability residential services updated regulations relating to emergencies.

ATTACHMENT XIII

The Committee passed a motion recommending the Board approve the Corrective Action Plan as presented.

Move: Linda Ball Second: Ken Lapin Status: Passed

a. Medication Assisted Treatment Program

Stephanie Terrell

Stephanie Terrell reported that a licensing inspection of Medication-Assisted Treatment services occurred on May 8. RACSB received a licensing citation. The corrective action plan includes creating a document checklist for contracted personnel and providing evidence of a provider's education in treatment of individuals with opioid addiction.

ATTACHMENT XIV

The Committee passed a resolution recommending the Board approve the Corrective Action Plan as presented.

Move: Al Collins Second: Karen Kallay Status: Passed

O. FY 2019 Corporate Compliance Plan

Stephanie Terrell

Stephanie Terrell reported that the Board of Directors annually reviews and approves the agency's Corporate Responsibility Resolution.

ATTACHMENT XV

The Committee passed a motion recommending the Board approve the FY 2019 Corporate Compliance Plan as presented.

Move: Al Collins Second: Karen Kallay Status: Passed

P. Bylaws Review

Stephanie Terrell

Stephanie Terrell reported that the Board of Directors reviews the agency's bylaws. These were last approved in 2015.

ATTACHMENT XVI

Q. August Board Meetings

Joe Wickens told the Committee that members usually vote to suspend the August meetings.

The Board approved a resolution to cancel the August meeting of the Program Planning and Evaluation Committee.

Move: Al Collins Second: Beth Elkins Status: Passed

R. Adjournment (Kheia Hilton)

The meeting adjourned at 12:16 p.m.