



VOICE/TDD (540) 373-3223

FAX (540) 371-3753

meeting notice

TO: Board of Directors

FROM: Gregory Sokolowski, Secretary
Joe Wickens Executive Director

SUBJECT: Board of Directors Meeting
Tuesday, April 18, 2023 5:00 PM
Rappahannock Area CSB – Board Room 208
600 Jackson Street, Fredericksburg, VA 22401

DATE: April 15, 2023

A Board of Directors Meeting has been scheduled for Tuesday, April 18 at 5:00 PM, Rappahannock Area CSB – Board Room 208, 600 Jackson Street, Fredericksburg, VA 22401.

Looking forward to seeing everyone on April 18, 2023.

Best,

GS/JW

Enclosure (Agenda Packet)

RAPPAHANNOCK AREA COMMUNITY SERVICES BOARD
BOARD OF DIRECTORS MEETING
April 18, 2023
In-Person

600 Jackson Street, Board Room 208
 Fredericksburg, VA 22401

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	ii. Sharon Spangler – Office Associate II – Stafford		
	iii. Megan Toler – Coordinator, Reimbursement – Fredericksburg		
	b. <u>Ten Years</u>		
	i. Lydia Strain – Direct Support Person – Belmont SAP		
IV.	EMPLOYEE OF THE QUARTER (3 rd Quarter)		
	a. Teresa McDonnel – Lead Human Resources Specialist - Fredericksburg		
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X. BOARD TIME Beebe

XI. ADJOURNMENT Beebe

March 2023 Board of Directors Meeting Minutes

Call to order

A meeting of the Board of Directors of Rappahannock Area Community Services Board was held March 21, 2023 at 600 Jackson Street. *Attendees included:* Nancy Beebe, Claire Curcio, Glenna Boerner, Ken Lapin, Jacob Parcell, Greg Sokolowski, Matt Zurasky, Carley Hurd, Melodie Jennings, Jacque Kobuchi, Michelle Runyon, Stephanie Terrell, Amy Umble, Michelle Wagaman, Joe Wickens, and Brandie Williams. *Not present:* Linda Carter, Susan Gayle, Susan Muerdler, Sarah Ritchie, Carol Walker, Melissa White

February 21, 2023 Minutes Board of Directors

The Board of Directors approved the minutes from the February meeting.

ACTION TAKEN: The Board approved the minutes.

Moved by: Claire Curcio

Seconded by: Jacob Parcell

I. Employee Service Awards

Joe Wickens announced that the following employees celebrated an anniversary for their service:

a. Five Years

- i. Daisha Smith – Direct Support Professional, ICF – Lucas Street ICF

b. Ten Years

- i. Angela D’Angelo – Respite Group Home Supervisor – Myers Drive
- ii. Joseph Tanoh – Direct Support Professional, ICF RAAI – Kings Highway, RAAI

II. An Ounce of Prevention by *Michelle Wagaman, and Melodie Jennings-Program Manager, Healthy Families Rappahannock Area*

Michelle Wagaman gave a presentation reviewing prevention and outreach services offered to the community, focusing on the prevention efforts geared toward children.

Melodie Jennings reported on the Healthy Families program and what programs, services, and assistance are offered for families. Melodie also reviewed events that Healthy Families have for the families and community.

III. Consent Agenda

- a. **RECOMMENDED: PROGRAM PLANNING AND EVALUATION COMMITTEE, March 14, 2023**

- i. Information Only – Extraordinary Barriers List
- ii. Information Only – Independent Assessment Certification and Coordination Team Update (IACCT)
- iii. Information Only – Information Technology/Electronic Health Record Update
- iv. Information Only – Crisis Intervention Team Assessment Center Report
- v. Information Only – Emergency Custody Order/Temporary Detention Order
- vi. Information Only – January Waitlist
- vii. Information Only – Licensing Reports
- viii. Information Only – Data Highlights
- ix. Information Only – Strategic Plan FY23 Mid-Year Executive Summary

b. RECOMMENDED: FINANCE COMMITTEE March 14, 2023

- i. Information Only – Board Deck, Financial Reports
- ii. Information Only – Financial Summary

c. RECOMMENDED: PERSONNEL COMMITTEE March 14, 2023

- i. Information Only – January Retention Report
- ii. Information Only – January EEO Report and Recruitment Update
- iii. Classification, Compensation, and Benefits Study
- iv. Classification and Compensation Recommendations

ACTION TAKEN: The Board approved the Consent Agenda.

Moved by: Matt Zurasky

Seconded by: Clair Curcio

IV. Items for Full Board Review

a. Licensing Report

- i. Stephanie Terrell reviewed the licensing reports provided, and actions taken for reports.

ACTION TAKEN: The Board approved the Licensing Report

Moved by: Jacob Parcell

Seconded by: Glenna Boerner

b. Substance Abuse and Mental Health Services Administration FY2023 Grants for the Benefit of Homeless Individuals.

- i. Brandie Williams reviewed what the application process for this grant, asking the Board to approve the submission of the grant application. Brandie reported that our focus will be to help the homeless gain better access to mental health care and that we will be able to partner with other agencies to have more outreach to the homeless community.

ACTION TAKEN: The Board approved the SAMHSA FY23 Grants for the Benefit of Homeless Individuals.

Moved by: Matt Zurasky

Seconded by: Glenna Boerner

c. RACSB Comprehensive Behavioral Health Care Clinic and Crisis Receiving Center Project

- i. Brandie Williams gave an overview of funding application, for assisting with covering the construction cost of the CRC. Also covered that we had 26 letters of support from our local elected officials and other partners in the community to assist in the application process for this grant.

ACTION TAKEN: The Board approved the RACSB Comprehensive Behavioral Health Care Clinic and Crisis Receiving Center Project.

Moved by: Matt Zurasky

Seconded by: Jacob Parcell

d. Financial Report

- i. Matt Zurasky reviewed the financial report provided.

ACTION TAKEN: The Board approved the Financial Report

Moved by: Matt Zurasky

Seconded by: Claire Curcio

V. Report from the Executive Director

- a. Joe Wickens reported Leeland Road Group Home will be temporarily closed due to staffing shortages. The residents and staff will be temporarily placed in three other group homes. Joe also stated that we are in the process of implementing strong marketing and recruitment campaign.
- b. Joe reported that a result of the settlement from the Opioid Abatement Authority localities in Planning Region 16 are receiving funds due to this settlement to assist in the Opioid crisis. Joe stated that there is another portion of this settlement that is designated for regional projects that requires two or more localities to partner and apply for funds to be able to launch new or expand upon existing programs. RACSB has met meeting with representatives of each locality to discuss who would be interested in partnering and what projects would be supported.
- c. Joe gave an update on the Roxbury property. After meeting with surveyor, architect, and legal counsel, we are moving forward with a preliminary site plan to be reviewed in April by the City of Fredericksburg. Our goal is to break ground in the spring of 2024.
- d. Joe stated that the VACSB conference will be held in Norfolk, VA, May 3-5th. If Board Members are interested in attending to please contact Joe and Brandie.

VI. Report of Directors and Coordinators

- a. Clinical Services, Jacquie Kobuchi reminded that localities continue to see waitlists, but hopes that the results of the compensation study will help with recruitment and will begin to see the numbers on the waitlists drop. Jacque then reported that the position for the school-based therapist was filled in partnership with Caroline County Public Schools, who will meet with school board to discuss final approval for services scheduled to start mid-April.
- b. Human Resources, Michelle Runyon reported that she is working with Amy Umble on preparing a recruitment campaign and having a job fair on April 12 at Sunshine Lady House.
- c. Public Information, Amy Umble stated there will be a Plant Sale on Friday, March 31 at RAAI, the Garden Party will be in April and tickets will be available on our website by the end of this week.
- d. Prevention, Michelle Wagaman reminded that the Healthy Families Open House is in April. Michelle reported that earlier this month, concluded the Trauma Informed Leadership series and now have 26 community members that are certified Trauma Informed Leaders.

VII. Board Time

- a. Claire Curcio thanked staff.
- b. Glenna Boerner thanked staff.
- c. Matt Zurasky thanked staff especially ID/DD staff in honor of down syndrome awareness day.
- d. Jacob Parcell thanked staff.
- e. Ken Lapin thanked the Board members and the staff.

VIII. Adjournment

The meeting adjourned at 6:05 PM.

Board of Directors Chair

Executive Director

March 2023 Program Planning and Evaluation Committee Meeting Minutes

Call to order

A meeting of the Program Planning and Evaluation Committee of Rappahannock Area Community Services Board was held at 600 Jackson Street on April 11, 2023. *Attendees included:* Ken Lapin, Jacob Parcell, Glenna Boerner, Matt Zurasky, Claire Curcio, Nancy Beebe, Sarah Ritchie, Amy Jindra, Joe Wickens, Amy Umble, Michelle Wagaman, Jacque Kobuchi, Michelle Runyon, Tina Cleveland, Carley Hurd, Stephanie Terrell, Nadine Mayo, and Brandie Williams. *Absent:* Linda Carter, Susan Gayle, Melissa White, Carol Walker and Greg Sokolowski.

Extraordinary Barriers List

Patricia Newman reviewed the case of one individual on the Extraordinary Barriers List. Barriers to placement include identifying and being accepted to a Developmental Disability Group Home.

Independent Assessment Certification and Coordination Team Update – March 2023

Jacque Kobuchi told the Committee that RACSB received 21 referrals and completed 20 IACCT referrals in March. Nine were from Spotsylvania, four from Stafford, four from Caroline, two from King George, and two from the City of Fredericksburg.

Information Technology/Electronic Health Record Update

Brandie Williams said that the information technology department closed 1023 help tickets in March. She also provided updates on required state reporting projects, and staffing changes.

Crisis Intervention Team (CIT) Assessment Center Report – February 2023

Jacque Kobuchi reported that the CIT Assessment Center assessed 22 individuals in the month of March 2023: Fredericksburg 7; Caroline 2; King George 0; Spotsylvania 5; Stafford 8; Other (out of area) 0.

Emergency Custody Order and Temporary Detention Order Report – February 2023

Jacque Kobuchi told the Committee that emergency services staff completed 406 emergency evaluations in February 2023. 83 Emergency Custody Orders (ECO) were issued, 93 Temporary Detention Orders were executed. Six individuals were sent to the state hospital as a bed of last resort.

Wait List - February 2023

Stephanie Terrell reported that 220 individuals were waiting more than 30 days for outpatient therapy appointments as of March 31, 2023. As of April 5, 2023, there were five older adolescents and adults and zero children under the age of 13 waiting longer than 30 days for a psychiatry intake appointment.

The Community Support Services waiting lists included: Mental Health Residential, 6 (needs, 0; referral, 4; acceptance, 2); Developmental Disability Residential, 97 (needs, 92; referral, 5; acceptance, 0); Assertive Community Treatment, 16 (needs, 8; referral, 11, acceptance, 0); and DD Waiver Services, 812.

QA Chart Reviews

Stephanie Terrell told the Committee that RACSB obtained approval for one Corrective Action Plans (CAP) during the month of March. Leeland Road Group Home corrective actions have been made.

Data Highlights

Brandie Williams reviewed reports on behavioral health and developmental disability performance measures. She told the Committee that RACSB is committed to using data-driven decision-making to improve performance and quality.

Opioid Abatement Authority Local and Regional Funding Project Proposal

Brandie Williams reported to the Committee that RACSB has met both individually and as a regional cohort with the localities we serve to work together to identify projects which could be supported by the localities' direct funding and also opportunities for interested localities to partner to apply for the Cooperative Projects funding.

Other Business

Nancy Beebe reminded the Committee about the art show that will be held at The Kenmore Club on April 13, 2023 from 10:00 AM - 2:00 PM.

Joe Wickens reminded the Committee that the Board Tour would be taking place on April 25, 2023. He also asked the Committee to RSVP to Amy U., if they plan to attend.

Amy Jindra reported to the Committee that the Garden Party for RAAI will be held on April 20, 2023 from 6:00-8:00 PM.

Brandie Williams reminded the Committee the time to RSVP for the VACSB Conference will be coming to a close soon.

Adjournment

The meeting adjourned at 12:02 PM

Board of Directors Chair

Executive Director



Voice/TDD (540) 373-3223 | Fax (540) 371-3753

NOTICE

To: Program Planning and Evaluation Committee Nancy Beebe, Glenna Boerner, Claire Curcio, Ken Lapin, Susan Muerdler, Jacob Parcell, Sarah Ritchie, Carol Walker, Matt Zurasky

From: Joseph Wickens
Executive Director

Subject: Program Planning and Evaluation Meeting
April 11, 2023, 10:30 AM
600 Jackson Street, Board Room 208. Fredericksburg, VA

Date: April 06, 2023

A Program Planning and Evaluation Committee meeting has been scheduled for Tuesday, April 11, 2023 at 10:30 a.m. The meeting will be held at 600 Jackson Street, Board Room 208, Fredericksburg, VA 22401.

Looking forward to seeing you on April 11, 2023 at 10:30 AM

Cc: Nancy Beebe, Chairperson

RAPPAHANNOCK AREA COMMUNITY SERVICES BOARD
Program Planning and Evaluation Committee Meeting

April 11, 2023 – 10:30 AM

600 Jackson Street, Room 208 Fredericksburg, VA 22401

Agenda

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X.	Other Business, <i>Beebe</i>	

MEMORANDUM

TO: Joe Wickens, Executive Director

FROM: Patricia Newman – Mental Health Case Management Supervisor
Elizabeth Wells – Lead State Hospital Liaison & NGRI Coordinator
Chanda Bernal – Adult Mental Health Case Manager

PC: Brandie Williams – Deputy Executive Director
Jacqueline Kobuchi, LCSW – Clinical Services Director
Amy Jindra – Community Support Services Director
Nancy Price – MH Residential Coordinator
Tamra McCoy – ACT Coordinator
Jennifer Acors – Coordinator Developmental Services Support Coordination

SUBJECT: Extraordinary Barriers List (EBL)

DATE: April 11, 2023

RACSB currently has one individual on the Extraordinary Barriers List (EBL) who is hospitalized at Northern Virginia Mental Health Institute (NVMHI). Individuals ready for discharge from state psychiatric hospitals are placed on the EBL when placement in the community is not possible within 7 days of readiness, due to barriers caused by waiting lists, resource deficits, or pending court dates.

Northern Virginia Mental Health Institute

Individual #1: Was placed on the EBL 3/15/23. Barriers to discharge include identifying and being accepted to a Developmental Disability Group Home. This individual has diagnosis of both a Developmental Disability and mental health concerns. A group home has been identified and a meeting between the individual and the group home took place on 3/31/23. The group home would like this individual to transition from the hospital to the Regional, Education, Assessment, Crisis Services, Habilitation (REACH) therapeutic home first before discharging to their program. An interview with REACH will be requested and other group homes will continue to be explored as potential backups to this placement. This individual will have a Developmental Disability waiver and will not require Discharge Assistance Program (DAP) funding.

MEMORANDUM

To: Joe Wickens, Executive Director
From: Donna Andrus, Child and Adolescent Support Services Supervisor
Date: April 5, 2023
Re: Independent Assessment Certification and Coordination Team (IACCT) Update

I am writing to provide an update to the Independent Assessment Certification and Coordination Team (IACCT) program. The Department of Medical Assistance Services (DMAS) with Magellan launched the IACCT program July 1, 2017. The Rappahannock Area Community Services Board is the IACCT provider for Planning District 16.

RACSB received twenty-one IACCT referrals and completed twenty assessments in the month of March. There was one no-show. Twelve referrals were initial IACCT assessments and nine were re-authorizations. Nine were from Spotsylvania, four from Stafford, four from Caroline, two from King George and two from the City of Fredericksburg. Of the twenty completed assessments in March, eleven recommended Level C Residential, four recommended Level B Group Home, two recommended community based services and two reauthorizations recommended discharge. One assessment has been completed but the IACCT is still in process so there is not a recommendation yet. One recommendation for residential was over turned by Magellan as they did not feel it met medical necessity. One completed assessment initially recommended group home placement however the foster child disrupted within a few days and the recommendation was then residential level of care.

Attached is the monthly IACCT tracking data for March 2023.

Report Month/Year	Mar-23
1. Total number of Referrals from Magellan for IACCT:	21
1.a. total number of auth referrals:	12
1.b. total num. of re-auth referrals:	9
2. Total number of Referrals per county:	
Fredericksburg:	2
Spotsylvania:	9
Stafford:	4
Caroline:	4
King George:	2
Other:	0
3. Total number of extensions granted:	4
4. Total number of appointments that could not be offered within the prescribed time frames:	0
5. Total number of "no-shows":	1
6. Total number of cancellations:	0
7. Total number of assessments completed:	20
8a. Total number of ICA's recommending: residential:	11
8b. Total number of ICA's recommending: therapeutic group home:	4
8c. Total number of ICA's recommending: community based services:	2
8g. Total number of ICA's recommending: Other:	0
8h. Total number of ICA's recommending: no MH Service:	0
9. Total number of reauthorization ICA's recommending: requested service not continue:	2
10. Total number of notifications that a family had difficulty accessing any IACCT-recommended service/s:	

To: Joe Wickens, Executive Director

From: Suzanne Poe, IT Coordinator

Re: Information Technology and Electronic Health Record Update

Date: April 4, 2023

This report provides an update on projects related to Information Technology and the Electronic Health Record. Information is provided on state reporting initiatives, facility technology needs, and on-going projects.

Information Technology and Electronic Health Record Update

IT Systems Engineering Projects

During March 2023, 1098 tickets were closed by IT Staff compared to February – 1050, and January – 983. In 2022, the IT department averaged closure of 1,023 tickets per month.

During the week of March 20, 2023, IT finished the technical support for Permanent Supportive Housing program's move to the Bowman Center. Technical support included wiring, phone placement and setup, and all users were connected to the network. During the following week, IT supported ACT South's transition from 401 Bridgewater to 405 Bridgewater. Phones and printers were moved to the new location and setup.

Community Consumer Submission 3

The February 2023 CCS was submitted on March 29, 2023.

Waiver Management System (WaMS)

DBHDS has released their new 2023 specifications for ISP version 3.4. Netsmart and the IT team have implemented the ISP changes into the Avatar test system and are waiting for DBHDS to open the WaMS testing period. IT staff are continuing to meet with DBHDS, WaMS, and Netsmart to discuss ISP 3.4 changes/testing period. The testing period for the upcoming ISP changes will begin April 1, 2023 and end on April 30th. All the setup is complete and testing will commence once the period is open. Changes will go-live on May 1, 2023.

Trac-IT Early Intervention Data System

In November, RACSB program and IT staff attended a demo on the upload functionality for Trac-It. This functionality will be key for our ability to meet expanded data requirements when the new date for that implementation is announced. After the demo, there were system-wide concerns around the functionality. We met as part of the DMC Trac-IT workgroup with DBHDS Part C Staff to express our concerns. DBHDS advertised an updated EHR demo kick off which was held at the end of March 2023. Both program staff and information technology staff attended the webinar. The presenter of the webinar indicated that there had been no changes in functionality since last May and ended the webinar an hour early due to multiple concerns being expressed by participants.

Zoom

We continue to utilize Zoom for telehealth throughout the agency.

- March 2023 – 2,821 video meetings with a total of 7,479 participants
- February 2023 – 2,475 video meetings with a total of 6,731 participants
- January 2023 – 2,402 video meetings with a total of 6,668 participants
- Average from January to December 2022 was 2,800 video meetings and 8,154 Participants
- Average from January to December 2021 was 3,648 video meetings and 11,087 Participants

Avatar

On March 20, 2023, Netsmart installed the Bells Group Note patch into our Avatar system. On March 21, IT met with the Bells team to set up the general structure of the group note for the SUD programs. SUD staff are currently testing the initial setup, and confirming the note functions as expected.

Staffing

The IT department hired Rebecca Ackley as the Data Analyst. Rebecca is currently employed as the RCS Accountant for RACSB and will transfer to IT on April 17, 2023. There remains 1 IT Specialist vacancy.

MEMORANDUM

To: Joe Wickens, Executive Director
From: Tabitha Taylor, Emergency Services Law enforcement liaison
Date: April 5, 2023
Re: Crisis Assessment Center and CIT report March

The CIT Assessment Center assessed 22 individuals in the month of March 2023. The number of persons served by locality were the following: Fredericksburg 7; Caroline 2; King George 0; Spotsylvania 5; Stafford 8.

A dispatcher training took place where six dispatchers were able to complete the training.

Please see attached CIT data sheet

March 2023 RACSB CIT Assessment Center Data				
Date	Number of ECOs Eligible To Utilize CAC Site	Number of Individuals Assessed at CAC Site	Locality who brought Individual	Locality working at the Assessment Site
3/1/2023	3	1	Stafford	n.a
3/2/2023	2	0	n.a	Spotsylvania
3/3/2023	1	1	Fredericksburg	Spotsylvania/Stafford
3/4/2023	3	0	n.a	Spotsylvania
3/5/2023	3	1	Spotsylvania	Spotsylvania/Stafford
3/6/2023	2	0	n.a	Spotsylvania/Stafford
3/7/2023	1	0	n.a	Spotsylvania/Fredericksburg
3/8/2023	3	1	Caroline	Spotsylvania/Stafford
3/9/2023	3	2	Spotsylvania; Stafford	Spotsylvania
3/10/2023	1	0	n.a	Stafford
3/11/2023	4	2	Fredricksburg(2)	King George
3/12/2023	3	1	Fredericksburg	King George/Spotsylvania
3/13/2023	4	1	Spotsylvania	Spotsylvania/Stafford
3/14/2023	3	0	n.a	Spotsylvania
3/15/2023	0	0	n.a	Spotsylvania/Fredericksburg
3/16/2023	2	2	Fredericksburg(2)	Spotsylvania/Fredericksburg
3/17/2023	1	0	n.a	Spotsylvania
3/18/2023	4	1	Stafford	Spotsylvania
3/19/2023	1	1	Stafford	Spotsylvania
3/20/2023	5	1	Stafford	Spotsylvania
3/21/2023	4	1	Stafford	Spotsylvania
3/22/2023	3	1	Spotsylvania	Spotsylvania
3/23/2023	4	0	n.a	Spotsylvania/Fredericksburg
3/24/2023	4	1	Spotsylvania	Spotsylvania/Fredericksburg
3/25/2023	4	0	n.a	Spotsylvania/King george
3/26/2023	1	0	n.a	Stafford/Spotsylvania
3/27/2023	2	0	n.a	Spotsylvania/Stafford
3/28/2023	1	0	n.a	Spotsylvania/Stafford
3/29/2023	4	2	Stafford(2)	Spotsylvania
3/30/2023	2	1	Fredericksburg	Spotsylvania
3/31/2023	2	1	Caroline	Spotsylvania/Stafford
Total	80	22		
Total Assessments at Center in March: 22				
Brought by:	Cumulative Total:			
Caroline	2	147	Cumulative number of Assessment since September 2016: 3264	
Fred City	7	1013		
Spotsylvania	5	966		
Stafford	8	1009		
King George	0	125		
Other	0	4		

MEMORANDUM

To: Joe Wickens, Executive Director

From: Kari Norris, Emergency Services Coordinator

Date: April 5, 2023

Re: Emergency Custody Order (ECO)/Temporary Detention Order (TDO) Report – March, 2023

In March 2023, Emergency Services staff completed 406 emergency evaluations. Eighty-three emergency custody orders were assessed and ninety-three total temporary detention orders served of the 406 evaluations. Staff facilitated six admissions to a state hospital. One adult admission went to Catawba and the other adult admission went to NVMHI. Four children and adolescent admissions went to CCCA.

A total of 17 individuals were involuntarily hospitalized outside of our catchment area in February. No individuals were able to utilize alternative transport, while one was appropriate he was a post-committed individual therefore ineligible.

Please see attached data reports.

DATE: 4.5.2023

Emergency Services Activity Reports					
Month	Contacts	Evaluations	ECOs	TDOs Issued	TDOs Executed
November 2020		413	88	88	88
December 2020		373	75	79	79
January 2021		374	88	89	89
February 2021		358	84	83	83
March 2021		465	82	100	100
April 2021		449	92	100	100
May 2021		507	93	93	93
June 2021		453	95	95	92
July 2021		379	76	74	74
August 2021		394	86	77	77
September 2021		517	98	86	86
October 2021		422	60	72	72
November 2021		425	59	60	60
December 2021		401	67	66	66
January 2022		355	74	63	63
February 2022		442	87	64	64
March 2022		375	74	81	81
April 2022		390	85	87	87
May 2022		417	92	73	73
June 2022		342	75	66	66
July 2022		343	77	83	83
August 2022		367	79	76	76
September 2022		341	66	76	76
October 2022		351	70	75	75
November 2022		359	69	73	73
December 2022		296	55	51	51
January 2023		389	81	86	86
February 2023		340	65	67	67
March 2023		406	83	93	93

FY23 CSB/BHA Form (Revised: 06/28/2022)

CSB/BHA	Rappahannock Area Community Services Board			Month	March 2023							
1) Number of Emergency Evaluations	2) Number of ECOs			3) Number of Civil TDOs Issued	4) Number of Civil TDOs Executed				5) Number of Criminal TDOs Executed			
	Magistrate Issued	Law Enforcement Initiated	Total		Minor	Older Adult	Adult	Total				
	406	39	44		83	89	10	1		82	93	4
					0					0		
					0					0		

FY '23 CSB/BHA Form (Revised: 06/28/2022)

CSB/BHA	Rappahannock Area Community Services Board	Reporting month	March 2023	No Exceptions this month		
Date	Consumer Identifier	1) Special Population Designation <small>(see definition)</small>	1a) Describe "other" in your own words <small>(see definition)</small>	2) "Last Resort" admission <small>(see definition)</small>	3) No ECO, but "last resort" TDO to state hospital <small>(see definition)</small>	
3/6/23	108754	Child with ID/DD		Yes	No	CCCA
3/13/23	108780	Child with ID/DD		Yes	No	CCCA
3/21/23	109016	Adolescent with ID/DD		No	Yes	CCCA
3/29/23	47227			Yes	No	Catawba
3/30/23	40541			Yes	No	NVMHI
3/31/23	63409	Adolescent		Yes	No	CCCA

ALTERNATIVE TRANSPORT DATA March 2023

Date	ID	LE DEPT	Location of Individual	Receiving Hospital	Travel time Round Trip (minutes)	ECO Y or N	Gender	Age	TDO criteria	Presented for AT: Y or N	Reason for Decline
3/2/23	98873	Stafford	MWH-ED	Riverside	240	no	M	18	Danger to others; Inability to care	No	Assaultive and impulsive
3/5/23	108223	Spotsylvania	MWH-ED	Catawba	402	yes	M	48	Inability to care	Yes	Post commitment
3/6/23	108754	Stafford	MWH-ED	CCCA	240	yes	M	10	Danger to others	No	Aggression
3/13/23	109523	Spotsylvania	MWH-ED	North spring	198	yes	M	12	Danger to self and others	No	Too impulsive
3/13/23	108780	Spotsylvania	MWH-ED	CCCA	240	yes	M	8	Danger to self and others	No	Impulsive and aggressive
3/14/23	36706	Stafford	MWH-ED	Clearview Psych	644	yes	F	51	Danger to self	No	Unpredictable
3/14/23	109491	Caroline County	MWH-ED	Dickenson	746	yes	F	61	Inability to care	No	Elopement risk
3/20/23	109603	Stafford	SRMC ED	Poplar Springs	160	yes	M	23	Inability to care	No	Elopement risk
3/21/23	109016	Stafford	MWH-ED	CCCA	240	no	F	12	Danger to self and others	No	Aggressive/Unpredictable
3/22/23	96331	Fredericksburg	MWH-ED	Pavilion at Williamsburg	180	no	F	26	Inability to care	No	Elopement risk
3/22/23	54318	Spotsylvania	MWH-ED	Poplar Springs	160	no	M	42	Inability to care	No	Catatonia preventing transport/unpredictable
3/22/23	95815	Fredericksburg	MWH-ED	Poplar Springs	160	yes	F	40	Danger to self	No	Elopement risk
3/25/23	2291	King George	MWH-ED	Poplar Springs	160	yes	M	30	Inability to care; Danger to self	No	Impulsive
3/27/23	80534	Fredericksburg	MWH-ED	Poplar Springs	160	yes	F	19	Danger to self	No	Elopement risk
3/29/23	47227	Spotsylvania	MWH-ED	Catawba	402	yes	F	62	Inability to care	No	Limited mobility/Inability to ambulate
3/30/23	40541	Spotsylvania	MWH-ED	NVMHI	100	yes	M	37	Danger to others; Inability to care	No	Elopement risk
3/31/23	63409	Caroline	MWH-ED	CCCA	240	yes	F	14	Danger to others; Inability to care	No	Transportation risk; Uncooperative

Total Out of Area

17

Total Utilized % Utilized Total Appropriate for AT

0

0%

1

6%

MEMORANDUM

To: Joe Wickens, Executive Director
From: Stephanie Terrell, Director of Compliance and Human Rights
Date: April 5, 2023
Re: March 2023 Waiting Lists

Identified below you will find the number of individuals who were on a waiting list as of March 31, 2023.

OUTPATIENT SERVICES

- Clinical services: As of March 31, 2023, there are 220 individuals on the wait list for outpatient therapy services.
 - Individuals are placed on the wait list if they cannot be seen at a regularly scheduled appointment within 30 days of request. Individuals who fall in a priority category are seen during open access.
 - Due to an increase in request for outpatient services, the Fredericksburg Clinic implemented a waitlist for new clients seeking outpatient services beginning October 5, 2021, the Spotsylvania Clinic implemented a waitlist beginning May 2022, and the Caroline Clinic implemented a waitlist beginning November 2022.
 - The waitlist in Fredericksburg is currently at 80 clients.
 - The waitlist in Spotsylvania is currently at 70 clients.
 - The waitlist in Caroline is currently at 70 clients.
 - This is a decrease of 55 from the February 2023 waitlist.
 - If an individual is not in a priority category the following may occur: 1) he or she may be placed on a waiting list and called weekly by a therapist to review presenting situation, individuals are then offered an appointment as one becomes available; 2) if an individual has private insurance staff will assist in locating a private provider if the individual does not wish to wait for an appointment. Staff are working to avoid scheduling an individual too far into the future as this increases the likelihood of no-shows.
 - Clinical services are initiated through Same Day Access. Due to COVID-19 concerns, Same Day Access appointments are scheduled versus having multiple individuals come to the clinic and having to wait for their appointment time. Same Day Access schedules are as follows:
 - Fredericksburg Clinic: Monday, Wednesday, and Thursday 8:30a.m. to 2:30 pm
Tuesday 9:30am – 2:30PM
 - King George Clinic: Tuesday-1:00 pm-5:00 pm and Wednesday- 8:00 am- 12:00 pm
 - Stafford Clinic: Tuesday and Thursday 9:00 am – 12:00 pm
 - Spotsylvania Clinic: Tuesday, Wednesday, and Thursday 9:00 am – 2:00 pm
 - Caroline Clinic: Tuesday and Thursday 8:30am – 11:30 am
 - Psychiatry intake: As of April 5, 2023, there are five older adolescents and adults waiting longer than 30 days for their intake appointment. This is an increase of two from the February 2023 waitlist. The furthest out appointment is 6/27/2023. There is no children age 13 and below waiting longer than 30 days for their intake appointment. This is a decrease of one from the February 2023 wait list.

PSYCHIATRY INTAKE – As of April 5, 2023 the number of individuals waiting longer than 30 days for a regularly scheduled psychiatric intake appointment include:

Adults		Children: Age 13 and below
○ Fredericksburg –	5 (3)	0 (0)
○ Caroline –	0 (0)	0 (1)
○ King George –	0 (0)	0 (0)
○ Spotsylvania –	0 (0)	0 (0)
○ Stafford –	0 (0)	0 (0)
Total	5 (3)	0 (1)

Appointment Dates	
<i>Fredericksburg Clinic</i>	
	5/5/2023 5/4/2023 5/11/2023 5/18/2023 6/27/2023
<i>Caroline Clinic</i>	
	N/A
<i>King George</i>	
	N/A
<i>Spotsylvania Clinic</i>	
	N/A
<i>Stafford Clinic</i>	
	N/A

Community Support services:

Waitlist Definitions

Needs List - A person is placed on the Needs List when an individual, family member, RACSB staff, or external agency notifies that particular program service that the individual needs services provided by that program.

Referral - Persons are placed on this Referral List when services have been requested and all necessary documentation for the referral process is submitted to the program Coordinator. At this time, the person is placed on the Referral List and removed from the Needs List.

All referrals are sent to the Coordinator for initial review. The Coordinator determines that all information is in the packet and makes a disposition for acceptance, rejection, or assessment. The Coordinator will forward the referral packet to the appropriate staff for assessment. Time frame for completion of assessment is also be indicated.

If the assessment leads to acceptance, the client will be placed on the acceptance list. If the assessment leads to a decision which does not involve acceptance, the program Coordinator will reach a decision about disposition of the referral.

Acceptance List - This list includes all persons who have been assessed for services and accepted to the program. These individuals are waiting for appropriate supports.

MH RESIDENTIAL SERVICES - 6

Needs List: 0
Referral List: 4
Acceptance List: 2

Count by County:

Caroline 2
King George 0
Fredericksburg 1
Spotsylvania 1
Stafford 0
Culpepper 2

- We have two individuals who are on the acceptance list. One moves into Home Road on 4/1 and the other moves into Lafayette BH on 4/3. We have two individuals on the referral list. Both have had their CSS assessment and are waiting for/to complete their first pass. We had two individuals on the referral list from Western state, one declined a second pass because we are too far from his family and the other was declined after his first pass due to weapons/drugs safety issue.

Intellectual Disability Residential Services – 97

Needs List: 92
Referral List: 5
Acceptance List: 0

Count by County:

Caroline 10
King George 7
Fredericksburg 8
Spotsylvania 34
Stafford 37
Richmond 1

Assertive Community Treatment (ACT)– 16

Caroline: 1
Fredericksburg: 7
King George: 0
Spotsylvania: 4
Stafford: 4
Homeless/Unknown/Incarcerated/Hospitalized: 2

Total Needs: 8
Total Referrals: 11
Total Acceptances: 0

Total program enrollments = 50

Admissions: 1
Discharges: 1

- During the month of March, an ACT South client, who has been receiving services since 2016, was discharged. This client experienced a medical emergency during an ACT program staff weekly medication management home visit in December 2022. She needed emergent treatment and was hospitalized with hyperglycemia and COVID. The client had been living alone and her daughter wanted to take care of her mother because of her medical issues. After discharge, the client relocated to Hampton and resides with her daughter. This client is now receiving adult case/medication management with Hampton/Newport News Community Services Board. ACT staff were proactive with assisting the client and her daughter with obtaining continued services in Hampton.
- ACT SOUTH was scheduled to enroll a client today who was discharged yesterday from Northern Virginia Mental Health Institute. We met with this potential client last month while she was hospitalized and she met criteria for services. She was detained yesterday in Fairfax jail after discharge for outstanding warrants. She is expected to be enrolled in ACT SOUTH once she is released.
- ACT North re-enrolled a client this month who requested discharge in 2021. She had been receiving ACT services from 2019 to 2021. This client has been receiving adult case/medication management from the RACSB but she struggled with medication adherence. She has been hospitalized multiple times for psychiatric treatment since discharge from ACT. The most recent hospitalization occurred March 2023. Since re-enrollment, she has been very engaged with ACT services including medication adherence.
- In addition, ACT South has client at RRJ. We continue to collaborate with program coordinator Portia Bennett for continuity of services. Our ACT North client, who was at RRJ, is now incarcerated at Nottoway Correctional Center. He is expected to be released in May 2023.

ID/DD Support Coordination

There are 812 individuals on the waiting list for a DD waiver. This is an increase of 6 from last month.

P-1 341
P-2 185
P-3 286

RAAI – 39

Caroline: 3
Fredericksburg: 2
King George: 3
Spotsylvania: 15
Stafford: 9
Other: 7

Total Referrals: 33
Total Assessing: 1
Total Acceptances (waiting to add more days): 5

Total program enrollments = 110

MEMORANDUM

To: Joe Wickens, Executive Director
From: Stephanie Terrell, Director of Compliance and Human Rights
Date: April 5, 2023
Re: Licensing Reports

The Department of Behavioral Health and Developmental Services' (DBHDS), Office of Licensing issues licensing reports for areas in which the Department finds agencies in non-compliance with applicable regulations. The licensing report includes the regulatory code which applies to the non-compliance and a description of the non-compliance. The agency must respond to the licensing report by providing a corrective action plan (CAP) to address the areas of noncompliance.

Rappahannock Area Community Services Board (RACSB) obtained approval for one Corrective Action Plan (CAP) during the month of March 2023. Leeland Road Group Home received a report due to an incident which occurred involving a resident of Leeland.

The attached CAP provides addition details regarding the citation and RACSB's response.

**DEPARTMENT OF BEHAVIORAL HEALTH AND DEVELOPMENTAL SERVICES
CORRECTIVE ACTION PLAN**

License #: **101-01-001**
Organization Name: **Rappahannock Area Community Services Board**

Date of Inspection: **03-22-2023**
Program Type/Facility Name: **01-001 Leeland Road Group Home**

<u>Standard(s) Cited</u>	<u>Comp</u>	<u>Description of Noncompliance</u>	<u>Actions to be Taken</u>	<u>Planned Comp. Date</u>
12VAC35-105-150. (4) - The provider including its employees, contractors, students, and volunteers shall comply with: 4. Section 37.2-400 of the Code of Virginia and related human rights regulations adopted by the state board;	N	Leeland Road Group Home This regulation was NOT MET as evidenced by: See OHR citation below.		
12VAC35-115-110. A. - Each individual is entitled to be completely free from any unnecessary use of seclusion, restraint, or time out.	N	Leeland Road Group Home This regulation was NOT MET as evidenced by: CHRIS Abuse #20230009 & CHRIS Abuse #20230010/Incident date: 2.21.2023 & 2.28.2023 "Seclusion" means the involuntary placement of an individual alone in an area secured by a door that is locked or held shut by a staff person, by physically blocking the door, or by any other physical or verbal means, so that the individual cannot leave it. Provider substantiated for seclusion due to the following: <ul style="list-style-type: none"> • While conducting a routine check in the home, the staff observed a recliner placed against the space between the end of resident's bedrail and the foot board. The recliner was placed in this position in order to physically block the individual from leaving the room. Physically blocking an individual from leaving the room meets the regulatory definition of seclusion.	PR) 03/29/2023 PR: The staff members responsible for the incidents were each put on administrative leave following the discovery of the incident. They will receive corrective coaching by 4/15/23 to ensure they understand the dynamics of providing safety supports in such a way that are not intrusive or secluding in nature for individuals. Systematically, Human Resources will continue to conduct mandated background checks and ensure at onboarding that no barrier crimes are present in the past of any potential employee. All RACSB staff, volunteers, and contractors will be required to undergo an annual Human Rights training to help ensure continued promotion and support of individuals' rights and freedoms. Newly hired staff will be assigned this course upon hire during the week of their agency	4/15/2023

**DEPARTMENT OF BEHAVIORAL HEALTH AND DEVELOPMENTAL SERVICES
CORRECTIVE ACTION PLAN**

License #: 101-01-001

Organization Name: Rappahannock Area Community Services Board

Date of Inspection: 03-22-2023

Program Type/Facility Name: 01-001 Leeland Road Group Home

<u>Standard(s) Cited</u>	<u>Comp</u>	<u>Description of Noncompliance</u>	<u>Actions to be Taken</u>	<u>Planned Comp. Date</u>
			<p>orientation.</p> <p>Program leaders will monitor staff and continue to ensure all Human Rights regulation violations are immediately reported to RACSB's Office of Consumer Affairs. They will likewise ensure best person-centered practices are being followed by staff through direct and indirect supervision (viewing cameras, ongoing discussion of person-centered plans and practices, conducting random direct supervision of staff working with individuals).</p> <p>The Quality Assurance team will monitor incident reports and any allegations or reports of human rights violations on a daily basis to help ensure systematically that incidents of this nature are identified and mitigated quickly.</p> <p>Any staff member suspected or alleged to violate the Code of Virginia and any related human rights regulations adopted by the state board will immediately be put on administrative leave pending the outcome of an investigation.</p> <p>OHR/OLR) Accepted 03/29/2023</p>	

**DEPARTMENT OF BEHAVIORAL HEALTH AND DEVELOPMENTAL SERVICES
CORRECTIVE ACTION PLAN**

License #: 101-01-001

Date of Inspection: 03-22-2023

Organization Name: Rappahannock Area Community Services Board

Program Type/Facility Name: 01-001 Leeland Road Group Home

<u>Standard(s) Cited</u>	<u>Comp</u>	<u>Description of Noncompliance</u>	<u>Actions to be Taken</u>	<u>Planned Comp. Date</u>
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General Comments / Recommendations:		
I understand it is my right to request a conference with the reviewer and the reviewer's supervisor should I desire further discussion of these findings. By my signature on the Corrective Action Plan, I pledge that the actions to be taken will be completed as identified by the date indicated.		
<hr style="border: 0; border-top: 1px solid black; margin-bottom: 5px;"/> Cassie Purtlebaugh, Human Rights	<hr style="border: 0; border-top: 1px solid black; margin-bottom: 5px;"/> (Signature of Organization Representative)	<hr style="border: 0; border-top: 1px solid black; margin-bottom: 5px;"/> Date
C = Substantial Compliance, N = Non Compliance, NS = Non Compliance Systemic, ND = Non Determined		

To: Joe Wickens, Executive Director

From: Brandie Williams, Deputy Executive Director

Re: Data Highlights Report for Program Planning and Evaluation

Date: April 4, 2023

The Rappahannock Area Community Services Board is committed to using data-driven decision-making to improve performance, quality, and demonstrate the value of services. This report will provide an overview of the new and on-going Behavioral Health and Developmental Disability performance measures.

Department of Behavioral Health and Developmental Services Performance Dashboard

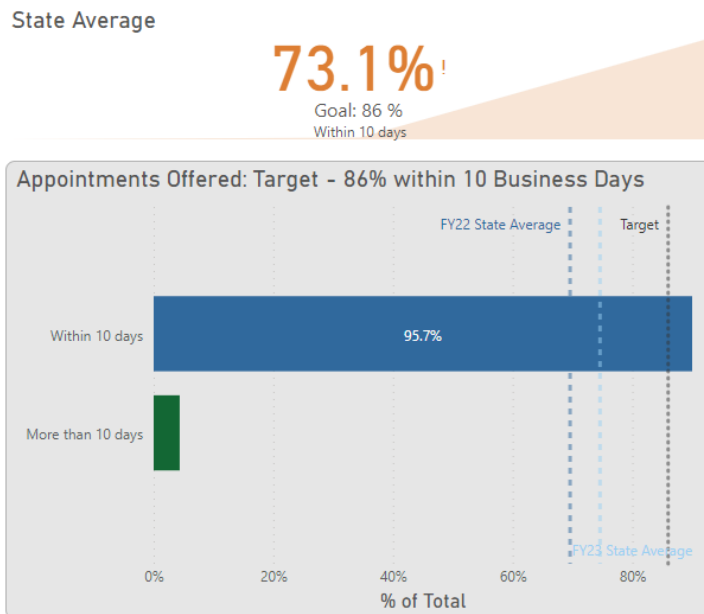
This month's report will detail the new measures and ongoing measures set by DBHDS as performance metrics. The targets indicated have been set by DBHDS and are subject to change at the department's discretion. These targets did not take effect until July 1, 2021.

Behavioral Health Measures

Same Day Access

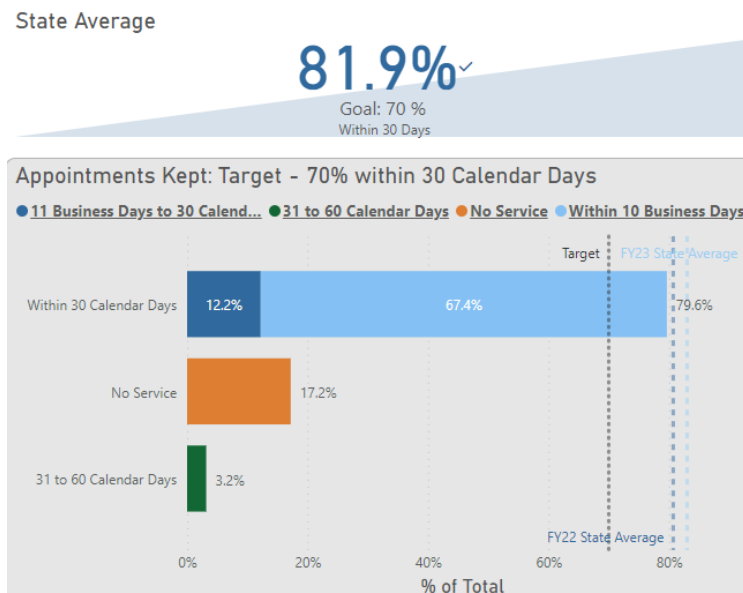
Measure #1: SDA Appointment Offered: Percentage of individuals who receive a Same Day Access assessment and were recommended for services through the CSB who were offered a follow-up appointment within 10 business days. The benchmark is set at 86%.

Current Month's Performance- December 2022 (95.7%)



Measure #2: SDA Appointment Kept: Percentage of individuals who receive a Same Day Access assessment and were recommended for services through the CSB who attended that follow-up appointment within 30 calendar days. The benchmark is set at 70%.

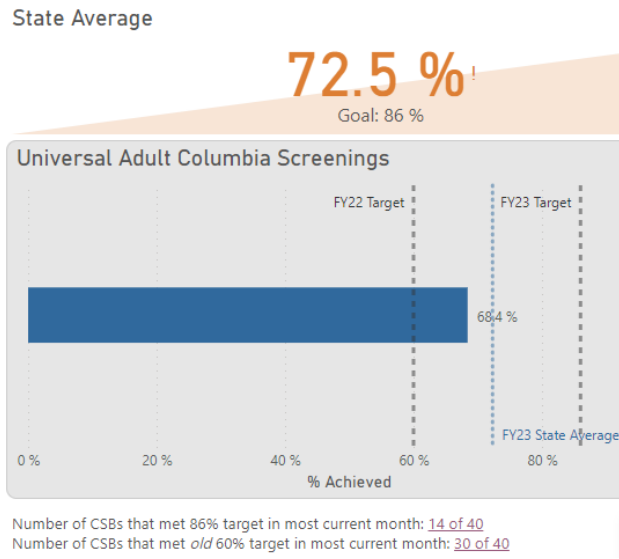
Current Month's Performance- November 2022 (79.6%)



Suicide Risk Assessment *The reports for these measures are still in development by DBHDS. These results are provided for a general idea of RACSB performance, but are not finalized or official.

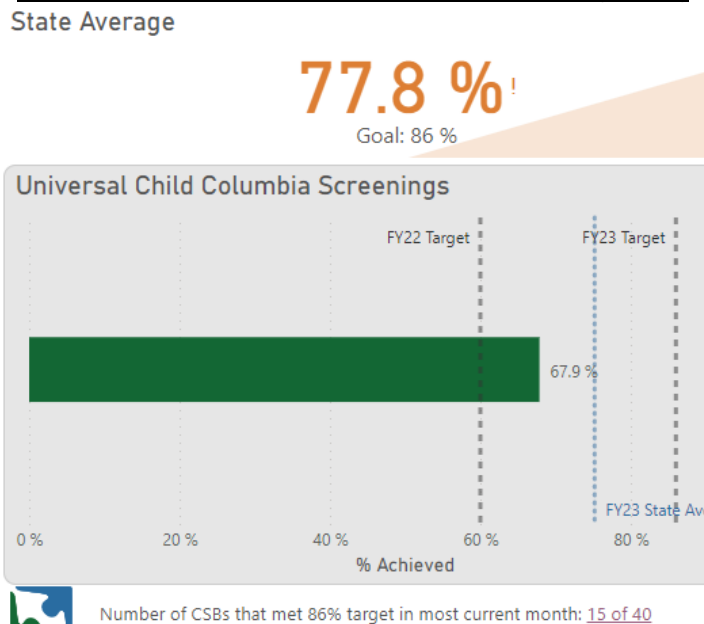
Measure #1: Universal Adult Columbia Screenings: Percentage of adults who are 18 years old or older and have a new MH or SUD program opening (denominator) who received a suicide risk assessment completed within 30 days before or 5 days after case opening(enumerator). The benchmark is set at 60 % for FY22 and 86% for FY23.

Current Month's Performance-December 2022 (68.4%)



Measure #2: Child Suicide Assessment: Percentage of children who are 7 through 17 years old who have a new MH or SUD program opening (denominator) who received a suicide risk assessment completed within 30 days before or 5 days after case opening(enumerator). The benchmark is set at 60 % for FY22 and 86% for FY23. *Not yet benchmarked in performance contract.

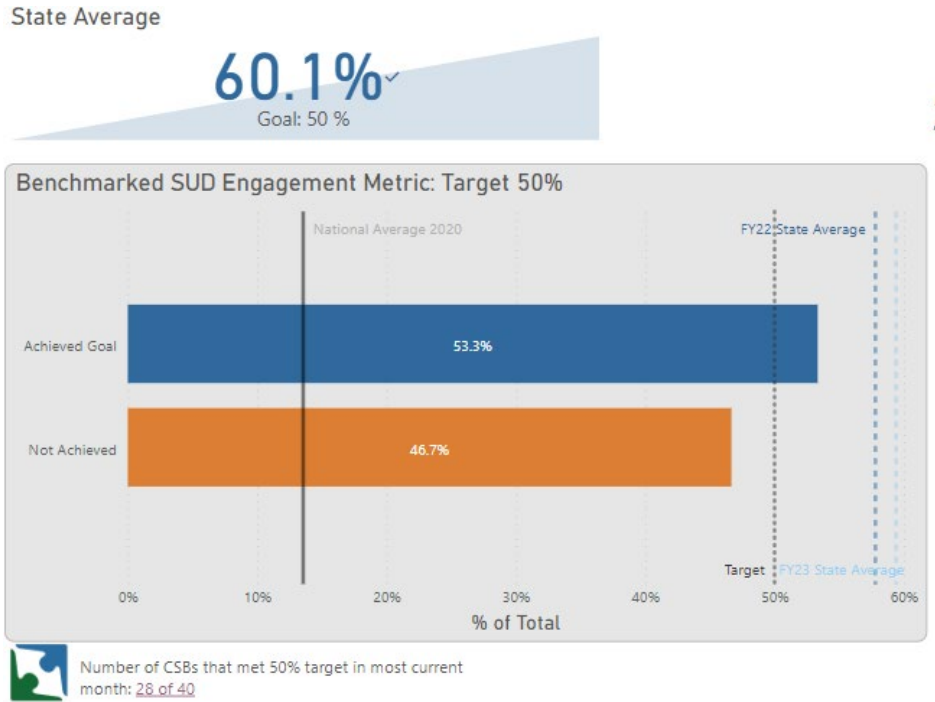
Current Month's Performance- December 2022 (67.9%)



Substance Use Disorder Engagement Measures

Engagement of SUD Services: Percentage of adults and children who are 13 years old or older with a new episode of SUD services as a result of a new substance use disorder (SUD) diagnosis (denominator, who initiated any SUD service within 14 days of diagnosis and who received two or more additional SUD services within 30 days of the first service (numerator). Benchmark is 50%.

Current Month's Performance- Jan 2023 (53.3%)



Developmental Disability Measures

Percent receiving face-to-face and In-Home Developmental Case Management Services

Definition: Percent of total individuals with an ID/DD Waiver who meet criteria for Enhanced Case Management who received a face-to-face case management service within the reporting month and previous case management visit was 40 days or less. *Target: 90%*

Definition: Percent of total individuals with an ID/DD Waiver who meet criteria for Enhanced Case Management who received **In-Home** face-to-face case management services every two months. *Target: 90%.*

DBHDS has not provided an updated visualization of the ID/DD Case Management Measures at this time

ECM Face to Face: January 2023- 76%

ECM Face to Face with Telehealth included: January 2023- 92%

ECM In-Home: January 2023- 79%

To: Joe Wickens, Executive Director

From: Brandie Williams, Deputy Executive Director

Re: Opioid Abatement Authority Local and Regional Funding Project Proposal

Date: April 5, 2023

The Opioid Abatement Authority (OAA) was established by the Virginia General Assembly in 2021 as an independent entity to abate and remediate the opioid epidemic in the Commonwealth. Financial assistance offered through the OAA consists of settlement funds paid to Virginia by prescription opioid manufacturers and companies in the prescription opioid distribution network.

Distribution to Cities and Counties (15% of OAA Funds)

Each city and county in Virginia is eligible to receive a specific amount of OAA funding in accordance with the statewide MOU. In order to obtain these funds, the city or county will be required to agree to certain terms and conditions and must apply to the OAA for approval of the use of those funds.

Distributions for Cooperative Projects involving Multiple Cities and/or Counties (35% of OAA Funds)

In addition, the OAA will award funds for projects involving two or more cities and/or counties working together on an opioid abatement/remediation project.

In considering potential awards, the OAA Board is directed by the statute to prioritize:

- Programs or organizations with an established record of success (expansion of existing program or implementation in a new city or county);
- Programs in communities with a high incidence of opioid use disorder or opioid death rate, relative to population;
- Programs in historically economically disadvantaged communities; and,
- Applications that include a monetary match from or on behalf of the applicant, with higher priority given to an effort with a larger matching amounts

Considering that a minimum of 15% will be allocated to participating cities and counties and at least another 35% will be provided for cooperative projects with participating cities and counties, this means that a total of at least 50% of the Opioid Abatement Fund will be distributed out to Virginia's cities and counties.

Distribution to State Agencies (15% of OAA Funds)

The OAA will also be distributing funds to state agencies through a separate process for opioid abatement/remediation projects.

Unrestricted Funds (35% of OAA Funds)

Lastly, the unrestricted portion of the Opioid Abatement Fund is designed to allow the Board the ability to support opioid abatement/remediation projects in other ways such as the OAA's "Gold Standard" Incentive for Cities and Counties. This is also where the OAA funds its administrative costs.

The Rappahannock Area Community Services Board has met both individually and as a regional cohort with the localities we serve to work together to identify projects which could be supported by the localities' direct funding and also opportunities for interested localities to partner to apply for the Cooperative Projects funding.

Please find the proposed projects attached. Each locality is currently taking the proposal to the Board of Supervisors/City Council for consideration.

Proposed Mobile MAT Budget-Regional Funding

Salaries	
Position	Total Cost w/ Taxes and Fringe
MAT Program Manager	\$88,151.42
Certified Substance Abuse Counselor	\$64,853.42
Nurse (RN)	\$88,151.42
Peer Recovery Specialist	\$47,379.92
Nurse Practitioner	\$187,167.92
	\$475,704
Treatment	
Drug/Medical Supplies	15,000.00
Drug Screens	14,000.00
Labwork	6,000.00
Medical Services	6,000.00
Contingency Management	3,000.00
Treatment Materials	1,000.00
	45,000.00
Mobile Medical Unit	
One time purchase	\$170,000
Ongoing maintenance, insurance, gas	\$5,000
	\$175,000.00
Total Year One Cost:	\$695,704
Cost Per Years 2-5	\$525,704

Proposed Co-Occurring Crisis Stabilization Opioid Service Expansion-Funded through locality OAA funding match

Salaries	
2 PT Nurses	\$ 85,000.00
1 FT CSAC	\$ 60,000.00
1 PT Certified Peer Recovery Specialist	\$ 20,000.00
Additional Expenses	
Rappahannock Creative Healthcare Medical Oversight	\$ 66,000.00
Substance-Use/Co-Occurring Training	\$ 10,000.00
Withdrawal medications	\$ 5,000.00
Participant Resources	\$ 1,000.00
Total Annual Expenses	\$ 247,000.00

Virginia Opioid Abatement Authority Application for Awards for Cooperative Projects Involving Cities and Counties

1. Contact Information

This application is for cooperative projects consisting of a cooperative partnership between at least two cities and/or counties within the same Department of Behavioral Health and Developmental Services (DBHDS) region.

Complete this table for all cities and/or counties involved in the cooperative partnership.

Name of City/County	Contact Person	Mailing Address	Phone #	Email
Caroline				
Fredericksburg				
King George				
Spotsylvania				
Stafford				

2. Fiscal Agent

a. One of the participating cities or counties must serve as the fiscal agent for the cooperative project. The fiscal agent will be responsible to ensuring compliance with both financial and programmatic reporting requirements on behalf of the cooperative partnership.

b. City/County Serving as Fiscal Agent _____ city county

c. Physical address: _____

d. Mailing address: _____
(if different than physical address)

e. Contact Person for this application

i. Name: _____

ii. Job Title: _____

iii. Office Phone: _____ Cell Phone: _____

iv. Email: _____

3. Agreements

a. Attach a copy of the cooperative partnership agreement between the participating cities and/or counties for the project. The agreement should also designate the city or county selected as fiscal agent for the cooperative project. A SAMPLE agreement is available here.

i. If any participating city and/or county elects to allocate a portion of its Individual Distribution from the OAA to this regional project, the Cooperative Partnership Agreement should clearly document the commitment and amount.

4. Signature

Signature section must be completed by a person designated with signatory authority in the MOU/MOA noted in Part 3.a of this application.

"I swear or affirm that all information contained in and attached to this application is true to the best of my knowledge."

Signature _____

Print Name _____

Title _____

Date _____

5. Project Proposal

Complete the information below for the project the cooperative partnership is requesting to be funded.

a. Is this project:

A new effort for the participating cities/counties.

A proposed supplement or enhancement to a project or effort that is already in place.

How long has the project existed? _____

A combination of enhancing an existing project/effort with new components.

How long has the project existed? 2014

b. Provide a brief narrative description of the proposed project including the requested term (1-5 years).

Planning District 16 would like to partner with the Rappahannock Area Community Services Board to expand opioid treatment and recovery services through implementation mobile services for Medication Assisted Treatment (MAT) and expansion of co-occurring residential crisis stabilization to include detoxification services through the Sunshine Lady House for Wellness and Recovery. The mobile team will include a program manager, nurse practitioner, certified substance abuse counselor (CSAC), and a peer recovery specialist. Planning District 16 includes the City of Fredericksburg along with Caroline, King George, Spotsylvania and Stafford Counties. Planning District 16 includes rural areas with limited transportation options and mobile services will help alleviate barriers to treatment. The mobile program would be licensed as an Office Based Opioid/Addiction Treatment facility and staff will facilitate inductions, urine and saliva drug screens, medication administration, case management, counseling, peer supports and other harm reduction strategies including Naloxone and fentanyl test strip distribution. The mobile team would connect with each locality at least once per week. Sunshine Lady House for Wellness and Recovery, RACSB's Residential Crisis Stabilization, was constructed to offer medical detox services for those experience mental health crises in conjunction with active substance use. The program shut down the detox services in the spring of 2020, while continuing to provide crisis stabilization. In 2022, RACSB voluntarily permanently closed detox services due to the inability to adequately meet staffing requirements. We are seeking funding to renew and enhance medical detox services at Sunshine Lady House. In order to enhance services, we seek funding to add a full time certified substance abuse counselor (CSAC), 2 additional part time nurses, and 1 additional certified peer recovery specialist (CPRS) to the existing staffing. We are also seeking funding for the medical provider services required to provide oversight. We are also looking to fund training for all staff on substance use and co-occurring needs. In addition, funding would offset withdrawal medications not covered by insurance and patient resources.

Funding is requested for a five year term. A combination of local and regional funding will support the project implementation

c. Describe the objectives of this project

1. Provide access to medication for individuals with Opioid Use Disorders in all localities within our catchment area at least once/week.
2. Enroll at least 5 people per mobile unit locality within the first two months.
3. Decrease overdose rates through improving access to treatment and naloxone.
4. Reducing the use of emergency or inpatient hospitalizations to address the needs of individuals experiencing co-occurring behavioral health crisis.
5. Mitigate the high correlation between mental health challenges and substance use. Individuals suffering from significant mental health issues have significantly higher rates of substance use. The converse is also true. Most individuals struggling with addiction have an underlying, untreated mental health disorder.
6. Provide comprehensive patient care to stabilize individuals and promote access to on-going community treatment.

d. How was the need determined and how does that need relate to abatement?

In 2020, Planning District 16 lost 127 community members to fatal drug/poison overdoses per the Office of the Chief Medical Examiners' Annual Report. The number of community members lost in 2019 was 83. The Rappahannock Area CSB's current MAT program has touched over 650 individuals with opioid use disorders since its inception in June of 2017. Local treatment efforts have been a huge accomplishment, but an unmet need remains.

Since the 2017 opening, RACSB's medication assisted treatment program has worked to reduce barriers to treatment through paying for transportation for eligible individuals, assisting individuals to obtain health insurance through Medicaid, changing our program license from an OTP to an OBOT in order to reduce dosing frequency, assisting individuals in overcoming childcare barriers, and working with our local jail to improve transitions for those leaving incarceration.

An ongoing barrier for many seeking services continues to be the distance from RACSB's Fredericksburg clinic. A mobile unit will remove this barrier by allowing RACSB to bring the clinic's services closer to those in need.

Prior to Covid over 160 individuals annually utilized detox services at the Sunshine Lady House. Due to staffing shortages, particularly with nursing staff, Sunshine Lady House has not been able to resume medically managed withdrawal. Providing comprehensive coverage for addressing an individual's whole health, is one of Sunshine Lady House's main goals. The detox services are one facet of the program's efforts to support individual stability. Through the effective introduction to effective supports and on-going services, Sunshine Lady House is able to prevent inpatient hospitalizations and assure greater individual outcomes. The program allows for individuals to receive needed care through a crisis while linking to needed resources including substance use therapies/treatments, medication management, outpatient therapy, peer supports, housing, and other community services.

**Application for Awards for Cooperative
Projects Involving Cities and Counties**

- e. Who are the targeted beneficiaries, and how many persons are expected to participate per year?

The target population is residents of Planning District 16 with Opioid Use Disorders. We estimate serving approximately 50-100 individuals per year through our mobile program. Targeted populations are individuals who meet criteria for Residential Crisis Stabilization services and need medical detox. We anticipate approximately 200 individuals per year utilizing medical detox under the umbrella of Sunshine Lady House services.

- f. Briefly describe (name or organization, description of role, budget, etc.) the organization(s), including any sub-recipients or contractors (if known) that will be involved in this project. Attach any contracts and/or memoranda of understanding/agreement. If not fully executed, a draft or a narrative describing the scope of services may suffice.

Rappahannock Area Community Services Board (RACSB) will be the sub-recipient for this project. Mobile MAT Expansion would be covered with funding received through this regional application. Total funding requested is Year-One- \$695,704 with subsequent years at \$525,704. This request includes salaries for 5 new staff positions (\$475,704), treatment supplies and services (\$45,000), and one-time purchase of Mobile Medical Unit (\$175,000). The SLH expansion of detox services would be funded through a match using participating locality OAA funding throughout the grant period. Total locality funding would be \$247,000 annually. This budget includes salaries for one full-time and three part-time new staff positions (\$165,000) and additional supplies, oversight, medications, and participant resources (\$82,000).

**Application for Awards for Cooperative
Projects Involving Cities and Counties**

g. Is the project classified as evidence-based?

Yes

No

If yes, attach supporting information to this application.

h. Is the project classified as evidence-informed?

Yes

No

If yes, attach supporting information to this application.

i. Has this project been certified or credentialed by a state/federal government agency, or other organization/non-profit?

Yes

No

If yes, attach supporting information to this application.

j. Has this project received any awards or recognition?

Yes

No

If yes, attach supporting information to this application.

k. Does this project have components other than opioid-related treatment as defined?

No, it is 100% related to opioid treatment

Yes, there are other substances involved

If yes, what is the approximate percentage of the project that covers opioid-related abatement (i.e., 20% of the patients who seek services have opioid-related disorders)?

The mobile MAT expansion will be 100% related to opioid treatment. Services provided for the SLH detoxification services will be directed to individuals with opioid-related disorders. Approximately 10% of individuals accessing Sunshine Lady House require detox services due to opioid use. However, the program serves many more who may not need detox at the time of admission but struggle with active opioid use. Consequently, the requested services will support approximately 45% of the individuals accessing crisis stabilization.

**Application for Awards for Cooperative
Projects Involving Cities and Counties**

- I. Attach a budget for that minimally includes FY2024 with line-item details for the project. If carry-over of OAA funds from FY2024 into FY2025 is expected, include this in the line-item budget. If there is intention to renew the funding (maximum of 4 renewals), include the projected budget for each subsequent fiscal year.
 - i. If a city or county in the cooperative partnership is allocating any of its Direct Distributions and/or any of its Individual Distributions from the OAA to this cooperative project, include line items for each as funding sources for the project.
- m. Complete and attach the project timeline workbook for the project minimally for FY2024. If there is intention to renew the funding (maximum of 4 renewals), complete the timeline for each subsequent fiscal year.
- n. Complete and attach the performance measurement workbook for the project minimally for FY2024. If there is intention to renew the funding (maximum of 4 renewals), include the complete the performance measures for each subsequent fiscal year.
- o. *(Optional)* Attach any additional narrative materials explaining the project, along with any research, data, plans, letters of support, articles, or other items that may assist the OAA Board of Directors in making an award decision for this project.

Virginia Opioid Abatement Authority

Sample Cooperative Agreement

WHEREAS, the mission of the Virginia Opioid Abatement Authority (OAA) is to abate and remediate the opioid epidemic in the Commonwealth through financial support in the form of grants, donations, or other assistance; and

WHEREAS, the OAA operates a financial assistance program to support certain cooperative partnerships of cities and/or counties in Virginia that implement regional efforts to treat, prevent, and reduce opioid use disorder and the misuse of opioids; and

WHEREAS, the cities and/or counties listed below have committed to work together to develop and jointly submit an application for regional cooperative partnership funding from the OAA; and

WHEREAS, at least two of the cities and/or counties listed below are located within the same region of the Department of Behavioral Health and Developmental Services; and

WHEREAS, the cities and/or counties and other organizations listed below agree they will execute a legally binding agreement formalizing the cooperating partnership if the application for financial assistance is approved; and

WHEREAS, the cities and/or counties and other organizations listed below agree that insert name of city or county will serve as the fiscal agent for the cooperative partnership if it is awarded; and

WHEREAS, the cities and/or counties and other organizations listed below seek a total of insert amount in grant funding from the OAA for Fiscal Year 2024.

WHEREAS, insert name of city or county has committed to allocate enter amount of its Individual Distribution from the OAA to this project for Fiscal Year 2024.

NOW, THEREFORE, BE IT RESOLVED, the cities and/or counties and other organizations listed below hereby authorize insert name of city or county acting as fiscal agent to execute the cooperative partnership grant application to the Virginia Opioid Abatement Authority and to execute all documents in connection therewith.

Name of City, County, or Organization	Printed Name of Authorized Signor	Title of Authorized Signor	Signature

***Italicized section is optional and only required if a participating city or county is allocating their Individual Distribution to the project. If multiple cities and/or county are allocating, create an additional line for each.*

April 2023 Finance Committee Meeting Minutes

Call to order

A meeting of the Finance Committee of Rappahannock Area Community Services Board was held at 600 Jackson Street on **April 11, 2023**. *Attendees included:* Ken Lapin, Jacob Parcell, Glenna Boerner, Matt Zurasky, Claire Curcio, Nancy Beebe, Sarah Ritchie, Amy Jindra, Joe Wickens, Amy Umble, Michelle Wagaman, Jacque Kobuchi, Michelle Runyon, Tina Cleveland, Carley Hurd, Stephanie Terrell, Nadine Mayo, Megan Toler and Brandie Williams. *Absent:* Linda Carter, Susan Gayle, Melissa White, Carol Walker and Greg Sokolowski.

February 2023 Board Deck

Tina Cleveland and Megan Toler reviewed a Board Deck summary of financial reports, including:

- Cash Investments, which totaled \$23,504,370 in February 2023.
- Investment Portfolio Summary, which showed an estimated income balance of \$172,780.00 as of February 28, 2023.
- Fee Revenue Reimbursement, with current year-to-date collections of \$24,679,502 which was a 21% increase from the previous year.
- Write-Off Report, which totaled \$385,616.71 for February 2023.
- Health Insurance Account, with year-to-date monthly premiums totaling \$2,613,162.32 and claims and fees totaling \$1,727,789.78.
- Other Post-Employment Benefits, which had a balance of \$2,073,354.11 as of February 28, 2023.
- Payroll Statistics, which showed that employees were paid an average of 453 overtime hours per pay period in FY23 and an average of 3,628 leave hours per pay period.

February 2023 Financial Summary Report

Tina Cleveland and Nadine Mayo reviewed the February financial summary report with the Committee. Overall, FY23 balances currently show a net gain of \$5.5 million, with \$2 million of that being in restricted funds.

DBHDS One Time Funding Opportunities

Brandie Williams reported to the Committee that DBHDS has offered three funding opportunities for Community Services Boards. She said that RACSB has applied for each of the opportunities which include: One-Time Mental Health Block Grant Flexible Funding; Grants to Improve Critical Financial and Data Management Infrastructure; and OBRA FY22 Reallocation Grants.

Adjournment

The meeting adjourned at 12:45 PM

Board of Directors Chair

Executive Director



Voice/TDD (540)373-3223 / Fax (540) 371-3733

NOTICE

To: Finance Committee: Susan Gayle, Susan Muerdler, Jacob Parcell, Carol Walker, Melissa White, Matt Zurasky

From: Joseph Wickens
Executive Director

Subject: Financial Committee Meeting
April 11, 2023, 12:00 PM
600 Jackson Street, Board Room 208, Fredericksburg, VA

Date: April 06, 2023

A Finance Committee meeting has been scheduled for Tuesday, April 11, 2023 at 12:00 PM. The meeting will be held at 600 Jackson Street, Board Room 208, Fredericksburg VA 22401.

Looking forward to seeing you on April 11, at 12:00 PM

Cc: Matt Zurasky, Chairperson

RAPPAHANNOCK AREA COMMUNITY SERVICES BOARD

Finance Committee Meeting

April 11, 2023 – 12:00 PM

600 Jackson Street, Room 208 Fredericksburg, VA 22401

Agenda

I.	Finance Committee Board Deck	3
	a. Summary of Cash Investments	
	b. Summary of Investment Portfolio	
	c. Fee Revenue Reimbursement	
	d. Fee Collection YTD and Quarterly	
	e. Write-Off Report	
	f. Health Insurance Account	
	g. OPEB	
	h. Payroll Statistics	
II.	Financial Summary, <i>Cleveland</i>	13
III.	DBHDS One Time Funding Opportunities, <i>Williams</i>	17
IV.	Other Business, <i>Zurasky</i>	

Finance Committee

APRIL 11, 2023

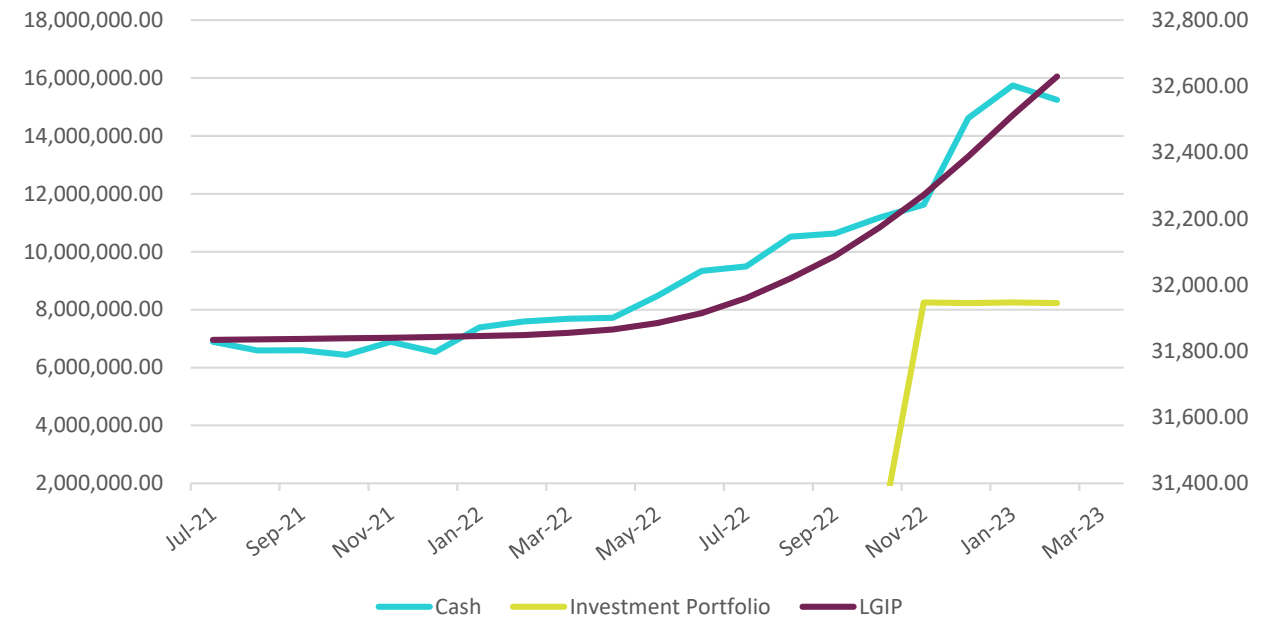
Summary of Cash Investments

Depository		Rate	Maturity Date
Atlantic Union Bank			
Checking	\$ 15,246,111	1.50%	N/A
Investment Portfolio			
Cash Equivalents	5,271,289.40	1.19%	
Fixed Income	2,954,340.00	3.72%	
Certificates of Deposit	-	0.00%	6/21/2024
Total Atlantic Union Bank	\$ 23,471,740		
Other			
Local Gov. Investment Pool	\$ 32,630	0.09%	N/A
Total Investments	\$ 23,504,370		

	\$ Change	% Change
Change from Prior Month	\$ (521,991)	-2.2%
Change from Prior Year	\$ 4,629,168	25%

Average # Months Reserves on Hand: 6.01

Cash and Cash Equivalents



Summary of Investment Portfolio

Asset Description	Shares/Face Value	Market Value	Total Cost	Unrealized Gain/Loss	Est. Income	Current Yield
Balance at 12/31/2022	\$ 8,294,365.83	\$ 8,228,444.55	\$ 8,239,711.54	\$ (11,266.99)	\$ 261,728.00	3.18%
Balance at 1/31/2023	\$ 8,378,256.66	\$ 8,251,634.22	\$ 8,252,541.72	\$ (907.50)	\$ 209,252.00	2.54%
Fidelity IMM Gov Class I Fund #57	\$ 1,406,374.26	1,406,374.26	\$ 1,406,374.26	\$ -	\$ 62,780.00	4.46%
US Treasury Bill (1/25/2024)	\$ 1,000,000.00	955,199.36	\$ 955,129.17	\$ 70.19		
US Treasury Bill (6/15/2023)	\$ 1,000,000.00	\$ 977,361.81	\$ 977,916.87	\$ (555.06)		
US Treasury Bill (11/30/2023)	\$ 1,025,000.00	\$ 979,198.97	\$ 981,732.90	\$ (2,533.93)		
US Treasury Bill (12/28/2023)	\$ 1,000,000.00	\$ 953,155.00	\$ 955,364.35	\$ (2,209.35)		
Total Cash Equivalents	\$ 5,431,374.26	\$ 5,271,289.40	\$ 5,276,517.55	\$ (5,228.15)	\$ 62,780.00	1.19%
US Treasury Note (3/31/2024)	\$ 1,000,000.00	\$ 969,770.00	\$ 973,575.00	\$ (3,805.00)	\$ 22,500.00	2.31%
US Treasury Note (10/15/2025)	\$ 1,000,000.00	\$ 991,700.00	\$ 1,005,781.25	\$ (14,081.25)	\$ 42,500.00	4.23%
US Treasury Note (11/30/2024)	\$ 1,000,000.00	\$ 992,870.00	\$ 1,004,914.69	\$ (12,044.69)	\$ 45,000.00	4.48%
Total Fixed income	\$ 3,000,000.00	\$ 2,954,340.00	\$ 2,984,270.94	\$ (29,930.94)	\$ 110,000.00	3.72%
Balance at 2/28/2023	\$ 8,431,374.26	\$ 8,225,629.40	\$ 8,260,788.49	\$ (35,159.09)	\$ 172,780.00	2.09%

Fee Revenue Reimbursement

AGED CLAIMS		Current Month		Prior Month		Prior Year	
		%	\$	%	\$	%	\$
Total Claims Outstanding	Total	100%	\$5,871,217	100%	\$5,243,858	100%	\$6,484,854
	Consumers	47%	\$2,757,222	42%	\$2,606,507	35%	\$2,269,116
	3rd Party	53%	\$3,113,995	58%	\$2,637,350	65%	\$4,215,738
Claims Aged 0-29 Days	Consumers	6%	\$333,651	2%	\$200,361	6%	\$366,550
	3rd Party	53%	\$3,104,142	53%	\$2,566,086	58%	\$3,384,477
Claims Aged 30-59 Days	Consumers	1%	\$43,010	6%	\$20,593	1%	\$69,741
	3rd Party	1%	\$64,562	2%	\$51,270	1%	\$77,153
Claims Aged 60-89 Days	Consumers	0%	\$17,079	0%	\$326,343	1%	\$78,274
	3rd Party	0%	\$23,746	1%	\$34,953	1%	\$58,260
Claims Aged 90-119 Days	Consumers	5%	\$318,196	2%	\$12,864	3%	\$203,894
	3rd Party	0%	\$6,066	1%	\$43,822	1%	\$72,528
Claims Aged 120+ Days	Consumers	35%	\$2,045,285	33%	\$2,046,346	26%	\$1,550,657
	3rd Party	-1%	-\$84,521	1%	-\$58,780	11%	\$623,320

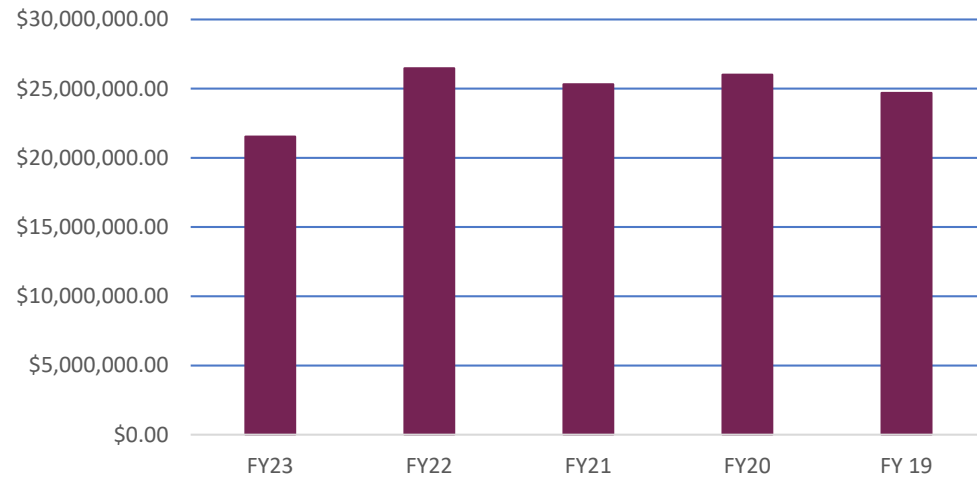
CLAIM COLLECTIONS	
Current Year To Date Collections	\$24,679,502
Prior Year To Date Collections	\$20,449,774
\$ Change from Prior Year	\$4,229,728
% Change from Prior Year	21%

Fee Revenue Reimbursement – Without Credits

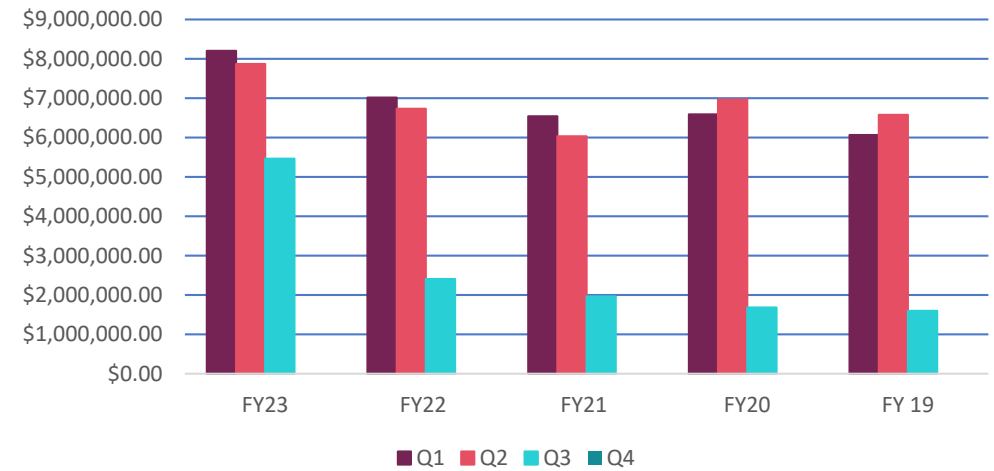
AGED CLAIMS		Current Month		Prior Month		Prior Year	
		%	\$	%	\$	%	\$
Total Claims Outstanding	Total	100%	\$5,871,217	100%	\$5,243,858	100%	\$6,484,854
	Consumers	47%	\$2,757,222	42%	\$2,606,507	35%	\$2,269,116
	3rd Party	53%	\$3,113,995	58%	\$2,637,350	65%	\$4,215,738
Claims Aged 0-29 Days	Consumers	6%	\$333,651	2%	\$200,361	6%	\$366,550
	3rd Party	53%	\$3,104,142	53%	\$2,566,086	58%	\$3,384,477
Claims Aged 30-59 Days	Consumers	1%	\$43,010	6%	\$20,593	1%	\$69,741
	3rd Party	1%	\$64,562	2%	\$51,270	1%	\$77,153
Claims Aged 60-89 Days	Consumers	0%	\$17,079	0%	\$326,343	1%	\$78,274
	3rd Party	0%	\$23,746	1%	\$34,953	1%	\$58,260
Claims Aged 90-119 Days	Consumers	5%	\$318,196	2%	\$12,864	3%	\$203,894
	3rd Party	0%	\$6,066	1%	\$43,822	1%	\$72,528
Claims Aged 120+ Days	Consumers	35%	\$2,045,285	33%	\$2,046,346	26%	\$1,550,657
	3rd Party	1%	\$67,441	1%	-\$58,780	11%	\$623,320

Fee Collection YTD and Quarterly

Year to Date Fee Collections



Quarterly Fee Collections



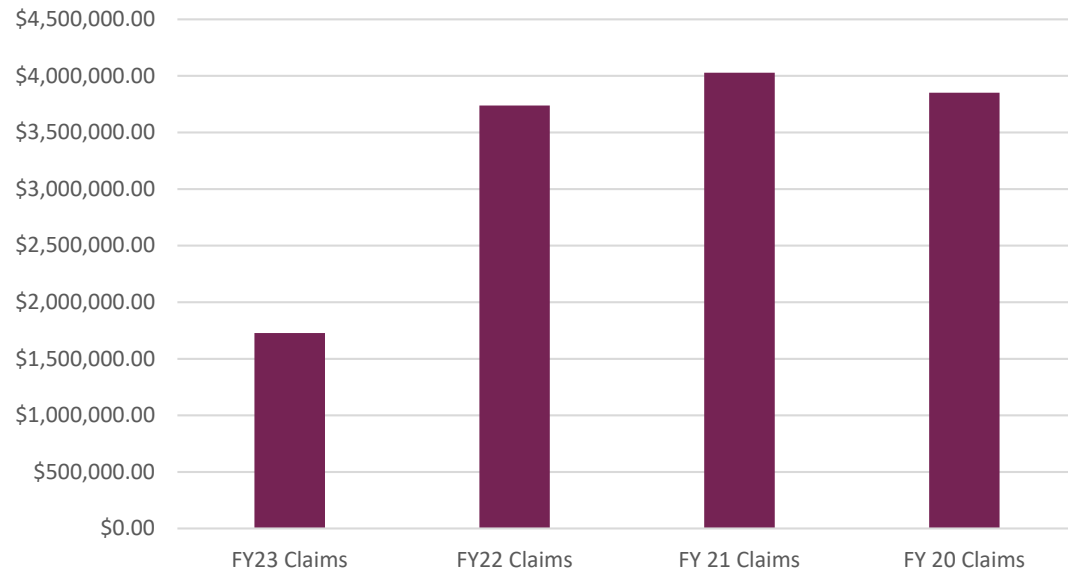
Write Off's – Current Month & YTD

Month: February 2023		
Write Off Code	Current Year	Prior Year
BAD ADDRESS	\$1,546.93	\$ -
DECEASED	\$155.00	\$6,722.05
NO FINANCIAL AGREEMENT	\$3,376.97	\$2,247.61
SMALL BALANCE	\$46.89	\$58.09
UNCOLLECTABLE	\$260.00	\$952.81
FINANCIAL ASSISTANCE	\$350,280.97	\$18,214.85
NO SHOW	\$400.00	\$760.00
MAX UNITS/BENEFITS	\$1,920.88	\$5,643.08
PROVIDER NOT CREDENTIALLED	\$8,450.80	\$4,778.98
DIAGNOSIS NOT COVERED	\$275.00	\$3,918.00
NON-COVERED SERVICE	\$3,033.13	\$1,623.26
SERVICES NOT AUTHORIZED	\$8,546.83	\$12,536.48
PAST BILLING DEADLINE	\$2,944.11	\$37,671.14
INCORRECT PAYER	\$2,639.20	\$470.00
INVALID MEMBER ID	\$625.00	\$ -
INVALID POS/CPT/MODIFIER	\$130.00	\$ -
NO PRIMARY EOB	\$985.00	\$ -
TOTAL	\$385,616.71	\$95,596.35

Year to Date July 2022 - February 2023			
Write Off Code	Current YTD	Jan 2023 Clean Up	Prior YTD
BAD ADDRESS	\$1,546.93		\$949.57
BANKRUPTCY	\$3,750.55		\$690.63
DECEASED	\$4,361.95		\$7,112.05
NO FINANCIAL AGREEMENT	\$62,233.38	\$13,171.93	\$31,157.39
SMALL BALANCE	\$1,386.92	\$0.74	\$761.78
UNCOLLECTABLE	\$158,458.91	\$152,852.75	\$11,943.46
FINANCIAL ASSISTANCE	\$1,668,371.19		\$1,643,757.06
NO SHOW	\$3,010.00		\$3,722.66
MAX UNITS/BENEFITS	\$92,482.03	\$13,440.00	\$36,542.79
PROVIDER NOT CREDENTIALLED	\$65,654.49	\$12,170.00	\$56,683.16
DIAGNOSIS NOT COVERED	\$2,595.00	\$100.00	\$3,918.00
NON-COVERED SERVICE	\$126,720.02	\$76,117.09	\$109,743.58
SERVICES NOT AUTHORIZED	\$162,847.28	\$9,023.96	\$259,952.19
PAST BILLING DEADLINE	\$69,161.06	\$21,409.64	\$91,434.75
MCO DENIED AUTH	\$18,279.56		\$6,560.18
INCORRECT PAYER	\$90,752.04	\$13,530.79	\$22,547.51
INVALID MEMBER ID	\$4,945.00		\$360.00
INVALID POS/CPT/MODIFIER	\$2,139.00	\$2,009.00	\$ -
NO PRIMARY EOB	\$4,777.32	\$3,792.32	\$ -
TOTAL	\$2,543,472.63	\$317,618.22	\$2,287,836.76

Health Insurance

Year-to-Date Health Insurance Claims

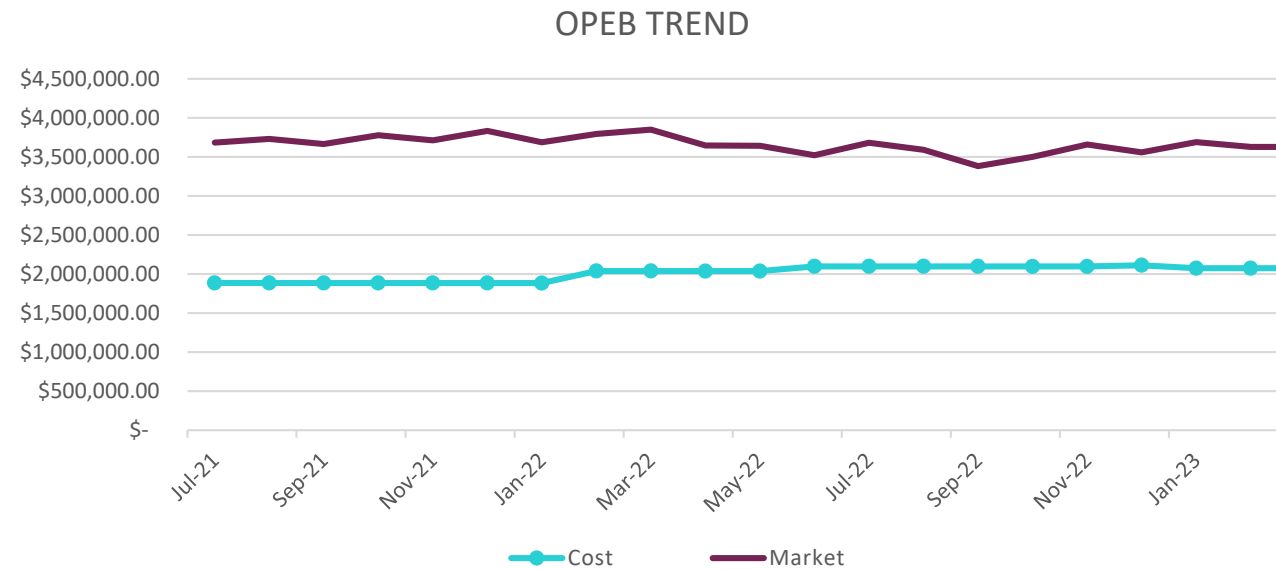


FY 2023	Monthly Premiums	Additional Premium Contributions	Monthly Claims & Fees	Interest	Balance
Beginning Balance					\$381,873.61
July	\$338,553.32		\$284,427.57	\$39.03	\$436,038.39
August	\$329,546.48		\$212,109.53	\$13.80	\$553,489.14
September	\$323,477.09		\$223,419.72	\$65.66	\$653,612.17
October	\$309,999.97		\$208,892.49	\$86.00	\$754,805.65
November	\$328,240.35		\$159,945.92	\$108.99	\$923,209.07
December	\$333,861.33		\$264,646.91	\$213.06	\$992,636.55
January	\$324,183.90		\$178,875.09	\$413.34	\$1,138,358.70
February	\$325,299.88		\$195,472.55	\$444.12	\$1,268,630.15
YTD Total	\$2,613,162.32	\$0.00	\$1,727,789.78	\$1,384.00	\$1,268,630.15

Historical Data	Average Monthly Claims	Monthly Average Difference from PY	Highest Month
FY 2023	\$215,974	(\$95,540)	\$284,428
FY 2022	\$311,513	(\$24,129)	\$431,613
FY 2021	\$335,642	\$14,641	\$588,906
FY 2020	\$321,002		\$378,562

Other Post Employment Benefit (OPEB)

	Cost Basis	Cost Variance From Inception	Market Basis	Market Variance From Inception
Initial Contribution	\$ 954,620		\$ 954,620	
FY 2022 Year-End Balance	\$ 2,097,261	\$ 1,142,641	\$ 3,520,345	\$ 2,565,725
Balance at 7/31/2022	\$ 2,096,641.74	\$ 1,142,021.74	\$ 3,680,816.76	\$ 2,726,196.76
Balance at 8/31/2022	\$ 2,096,641.74	\$ 1,142,021.74	\$ 3,590,000.78	\$ 2,635,380.78
Balance at 9/30/2022	\$ 2,096,641.74	\$ 1,142,021.74	\$ 3,382,530.44	\$ 2,427,910.44
Balance at 10/31/2022	\$ 2,096,030.84	\$ 1,141,410.84	\$ 3,500,553.56	\$ 2,545,933.56
Balance at 11/30/2022	\$ 2,096,030.84	\$ 1,141,410.84	\$ 3,659,065.82	\$ 2,704,445.82
Balance at 12/31/2022	\$ 2,111,456.33	\$ 1,156,836.33	\$ 3,556,967.87	\$ 2,602,347.87
Balance at 1/31/2023	\$ 2,073,354.11	\$ 1,118,734.11	\$ 3,689,164.71	\$ 2,734,544.71
Plus Current Accrued Income				
Realized Gain/(Loss)				
Unrealized Gain/(Loss)			\$ (61,745.79)	
Fees & Expenses				
Transfers/Contributions				
Balance at 2/28/2023	\$ 2,073,354.11	\$ 1,118,734.11	\$ 3,627,418.92	\$ 2,672,798.92



Payroll Statistics

Employees / Leave* / Overtime



Indicators	FY 2021 Average Per Pay Period	FY 2022 Average Per Pay Period	FY 2023 Average Per Pay Period
# Employees Paid	514	506	496
Leave Hours	3,850	4,196	3,628
Overtime Hours	102	279	453

RACSB
FY 2022 FINANCIAL REPORT
Fiscal Year: July 1, 2022 through June 30, 2023
Report Period: July 1, 2022 through February 28, 2023

MENTAL HEALTH

PROGRAM	REVENUE			EXPENDITURES			ACTUAL VARIANCE	VARIANCE / REVENUE
	BUDGET * FY 2023	ACTUAL YTD	%	BUDGET FY 2023	ACTUAL YTD	%		
INPATIENT	20,000	10,400	52.00%	20,000	13,800	69.00%	(3,400)	-33%
OUTPATIENT	2,078,691	1,989,056	95.69%	2,078,691	1,450,880	69.80%	538,175	27%
MEDICAL OUTPATIENT	3,849,822	2,603,532	67.63%	3,849,822	2,789,465	72.46%	(185,933)	-7%
ACT NORTH	880,238	648,523	73.68%	880,238	570,069	64.76%	78,454	12%
ACT SOUTH	843,563	550,458	65.25%	843,563	398,232	47.21%	152,226	28%
CASE MANAGEMENT ADULT	937,373	655,101	69.89%	937,373	611,128	65.20%	43,973	7%
CASE MANAGEMENT CHILD & ADOLESCENT	800,057	536,061	67.00%	800,057	483,424	60.42%	52,637	10%
PSY REHAB & KENMORE EMP SER	681,878	498,847	73.16%	681,878	414,777	60.83%	84,070	17%
PERMANENT SUPPORTIVE HOUSING	1,275,349	1,393,112	109.23%	1,275,349	767,313	60.16%	625,799	45%
CRISIS STABILIZATION	1,928,225	1,218,828	63.21%	1,928,225	1,001,972	51.96%	216,856	18%
SUPERVISED RESIDENTIAL	440,930	295,099	66.93%	440,930	341,513	77.45%	(46,414)	-16%
SUPPORTED RESIDENTIAL	893,956	570,903	63.86%	893,956	569,199	63.67%	1,704	0%
JAIL DIVERSION GRANT	156,523	134,194	85.73%	156,523	100,876	64.45%	33,318	25%
SUB-TOTAL	14,786,607	11,104,114	75%	14,786,607	9,512,648	64%	1,591,466	14%
* Budget excludes program subsidies								

DEVELOPMENTAL SERVICES

PROGRAM	REVENUE			EXPENDITURES			ACTUAL VARIANCE	VARIANCE / REVENUE
	BUDGET * FY 2023	ACTUAL YTD	%	BUDGET FY 2023	ACTUAL YTD	%		
CASE MANAGEMENT	3,105,473	2,223,816	71.61%	3,105,473	2,114,283	68.08%	109,532	5%
DAY HEALTH & REHAB *	4,136,396	2,653,662	64.15%	4,136,396	2,876,704	69.55%	(223,042)	-8%
GROUP HOMES	5,580,946	4,625,068	82.87%	5,580,946	3,397,013	60.87%	1,228,055	27%
RESPIRE GROUP HOME	229,325	102,467	44.68%	229,325	351,686	153.36%	(249,219)	-243%
INTERMEDIATE CARE FACILITIES	4,091,920	2,438,443	59.59%	4,091,920	2,533,216	61.91%	(94,773)	-4%
SUPERVISED APARTMENTS	1,525,310	1,756,756	115.17%	1,525,310	1,028,515	67.43%	728,242	41%
SPONSORED PLACEMENTS	2,047,818	1,890,595	92.32%	2,047,818	1,320,720	64.49%	569,875	30%
SUB-TOTAL	20,717,187	15,690,807	75.74%	20,717,187	13,622,138	65.75%	2,068,669	13%
* Budget excludes program subsidies								

RACSB
FY 2022 FINANCIAL REPORT
Fiscal Year: July 1, 2022 through June 30, 2023
Report Period: July 1, 2022 through February 28, 2023

SUBSTANCE ABUSE

PROGRAM	REVENUE			EXPENDITURES			ACTUAL VARIANCE	VARIANCE / REVENUE
	BUDGET * FY 2023	ACTUAL YTD	%	BUDGET FY 2023	ACTUAL YTD	%		
OUTPATIENT	1,818,448	1,020,306	56.11%	1,818,448	1,030,123	56.65%	(9,817)	-1%
MAT PROGRAM	987,709	294,051	29.77%	987,709	603,362	61.09%	(309,311)	-105%
CASE MANAGEMENT	154,511	108,686	70.34%	154,511	82,369	53.31%	26,318	24%
RESIDENTIAL	161,757	115,081	71.14%	161,757	40,606	25.10%	74,475	65%
PREVENTION	808,950	647,154	80.00%	808,950	362,342	44.79%	284,812	44%
LINK	400,397	399,556	99.79%	400,397	136,368	34.06%	263,188	66%
SUB-TOTAL	4,331,772	2,584,834	60%	4,331,772	2,255,170	52%	329,664	13%

* Budget excludes program subsidies

SERVICES OUTSIDE PROGRAM AREA

PROGRAM	REVENUE			EXPENDITURES			ACTUAL Variance	VARIANCE / REVENUE
	BUDGET * FY 2023	ACTUAL YTD	%	BUDGET FY 2023	ACTUAL YTD	%		
EMERGENCY SERVICES	1,371,467	1,656,493	120.78%	1,327,096	701,649	52.87%	954,844	58%
CHILD MOBILE CRISIS	311,007	224,387	72.15%	320,728	177,867	55.46%	46,521	21%
CIT ASSESSMENT SITE	294,556	216,142	73.38%	289,481	232,019	80.15%	(15,876)	-7%
CONSUMER MONITORING	130,859	116,153	88.76%	139,646	130,487	93.44%	(14,334)	-12%
HOSPITAL CONSUMER MONITORING	193,975	0	0.00%	193,975	124,624	64.25%	(124,624)	0%
ASSESSMENT AND EVALUATION	592,509	337,708	57.00%	739,048	261,404	35.37%	76,304	23%
SUB-TOTAL	2,894,374	2,550,883	88.13%	3,009,974	1,628,048	54.09%	922,835	36%

* Budget excludes program subsidies

RACSB
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ADMINISTRATION

PROGRAM	REVENUE			EXPENDITURES			ACTUAL VARIANCE
	BUDGET * FY 2023	ACTUAL YTD	%	BUDGET FY 2023	ACTUAL YTD	%	
ADMINISTRATION	130,574	176,863	135.45%	130,574	176,863	135.45%	0
PROGRAM SUPPORT	66,768	75,617	113.25%	66,768	75,617	113.25%	0
SUB-TOTAL	197,342	252,479	127.94%	197,342	252,479	127.94%	0
ALLOCATED TO PROGRAMS				4,268,473	3,052,188	71.51%	

* Budget excludes program subsidies

PROGRAM	REVENUE			EXPENDITURES			ACTUAL VARIANCE	VARIANCE / REVENUE
	BUDGET * FY 2023	ACTUAL YTD	%	BUDGET FY 2023	ACTUAL YTD	%		
TRANSPORTATION	0	0	0.00%	0	0	0.00%	0	0%
TOTAL	0	0	0.00%	0	0	0.00%	0	0%

* Budget excludes program subsidies

FISCAL AGENT PROGRAMS
PART C AND HEALTHY FAMILY PROGRAMS

PROGRAM	REVENUE			EXPENDITURES			ACTUAL VARIANCE	VARIANCE / REVENUE
	BUDGET * FY 2023	ACTUAL YTD	%	BUDGET FY 2023	ACTUAL YTD	%		
INTERAGENCY COORDINATING COUNCIL	1,710,296	1,457,196	85.20%	1,710,296	837,712	48.98%	619,484	43%
INFANT CASE MANAGEMENT	725,520	585,480	80.70%	725,520	467,696	64.46%	117,784	20%
EARLY INTERVENTION	2,041,058	1,124,937	55.12%	2,041,058	1,320,064	64.68%	(195,126)	-17%
TOTAL PART C	4,476,874	3,167,614	70.76%	4,476,874	2,625,472	58.65%	542,142	17%
HEALTHY FAMILIES	178,886	328,562	183.67%	178,886	43,923	24.55%	284,639	87%
HEALTHY FAMILIES - MIECHV Grant	403,497	159,357	39.49%	403,497	262,606	65.08%	(103,249)	-65%
HEALTHY FAMILIES-TANF & CBCAP GRANT	531,457	171,168	32.21%	531,457	357,756	67.32%	(186,588)	-109%
TOTAL HEALTHY FAMILY	1,113,840	659,087	59.17%	1,113,840	664,285	59.64%	(5,198)	-1%

RACSB
FY 2022 FINANCIAL REPORT
Fiscal Year: July 1, 2022 through June 30, 2023
Report Period: July 1, 2022 through February 28, 2023

RECAP FY 2023 BALANCES

	REVENUE	EXPENDITURES	NET	NET / REVENUE
MENTAL HEALTH	11,104,114	9,512,648	1,591,466	14%
DEVELOPMENTAL SERVICES	15,690,807	13,622,138	2,068,669	13%
SUBSTANCE ABUSE	2,584,834	2,255,170	329,664	13%
SERVICES OUTSIDE PROGRAM AREA	2,550,883	1,628,048	922,835	36%
ADMINISTRATION	252,479	252,479	0	0%
OTHER	0	0	0	0%
FISCAL AGENT PROGRAMS	3,826,701	3,289,757	536,944	14%
TOTAL	36,009,817	30,560,240	5,449,578	15%

Restricted Funds	\$ 1,977,271
Unrestricted Funds	3,474,566
Total	\$ 5,449,578

RECAP FY 2022 BALANCES

	REVENUE	EXPENDITURES	NET	NET / REVENUE
MENTAL HEALTH	4,626,349	3,495,658	1,130,691	24%
DEVELOPMENTAL SERVICES	5,073,687	4,776,594	297,093	6%
SUBSTANCE ABUSE	2,007,967	1,031,817	976,150	49%
SERVICES OUTSIDE PROGRAM AREA	803,430	696,248	107,182	13%
ADMINISTRATION	34,201	34,200	2	0%
OTHER	2,000	20,016	(18,016)	-901%
FISCAL AGENT PROGRAMS	1,566,679	1,298,910	267,769	17%
TOTAL	14,114,314	11,353,443	2,760,871	20%

	\$ Change	% Change
Change in Revenue from Prior Year	\$ 21,895,504	155.13%
Change in Expense from Prior Year	\$ 19,206,798	169.17%
Change in Net Income from Prior Year	\$ 2,688,707	97.39%

*Unaudited Report

To: Joe Wickens, Executive Director

From: Brandie Williams, Deputy Executive Director

Re: Department of Behavioral Health and Developmental Services One-Time Funding Requests

Date: April 5, 2023

Within the past month, the Department of Behavioral Health and Developmental Services has offered three funding opportunities for Community Services Boards. The Rappahannock Area Community Services Board has applied for each of the opportunities as described below.

One-Time Mental Health Block Grant Flexible Funding:

DBHDS accepted proposals from CSBs for one-time Community Mental Health Services Block Grant Funding to provide comprehensive, community mental health services to adults with serious mental illnesses and children with serious emotional disturbances. These on-time funds must be expended by September 30, 2023. One of the acceptable uses of the funding is to support behavioral health service provision to individuals who are uninsured. RACSB provides approximately \$106,000 per month in services to uninsured individuals. We requested \$157,000 in one-time funding to represent 25% of the total amount of services to this population in the next 6 months. We indicated that if there were additional funds available, we would be able to obligate up to the \$636,000 by the September 30, 2023 deadline.

Grants to Improve Critical Financial and Data Management Infrastructure

DBHDS has a total of up to \$4,600,000 available in one-time grants to support data infrastructure. Funds will be awarded with high priority placed on one-time funding requests for CSBs with financial systems and process that are greater than 10 years old and/or those systems that do not have the capability for fund, project and cost accounting. Since 2008, the Rappahannock Area Community Services Board has maintained financial accounting and service-level data electronically. However, this data has been housed in separate systems, relying on a manual process to connect the information. This limits the amount of reporting, forecasting, and efficient fund accounting. This proposal would build the infrastructure needed to automate the ingestion of data housed in our electronic health record, myAvatarNX, into our financial accounting platform Great Plains. By modernizing the data exchange from a manual process to an automated one, the data exchange will be more robust, efficient, and meet the new requirements for reimbursement model funding which requires a detailed level of fund accounting across multiple funding programs. To provide the foundation to address complex reporting requirements, this proposal also includes funding to access Jet Reporting capabilities maximizing the use of the combined data. Finally, this proposal would set the foundation for automated exchange of both financial and electronic health record data to funding sources, including DBHDS, in the future. The estimated timeline for project completion is within 4 months of award date. Total funding requested is \$122,600 in one-time funding.

OBRA FY22 Reallocation Grants

DBHDS has a balance of unspent OBRA funds that would normally go to serve individuals with ID/DD residing in nursing facilities. OBRA funding is traditionally used to purchase goods or services for individuals that would not otherwise be covered by Medicaid. The reallocated funds are not limited to the definition above as long as they assist the ID/DD population with priority placed on funding projects that better integrate individuals into the community. These funds cannot be used to directly pay CSB staff salaries or benefits. RACSB received \$430,505 from a similar opportunity last year to support RAAI Day Support. RAAI is requesting funds to offset just a portion of the deficit from this fiscal year. Being such an integrated part of the community involves a variety of costs. Vehicle related expenses like fuel, repair, and maintenance are all needed things to be present in the localities. Each of RAAI's sites have wheelchair accessible vans that allow for community integration and access for the individuals, regardless of mobility needs. Assisting individuals' access to the community costs \$376,081 in vehicle related expenses. Going into the community is not enough for the individuals RAAI supports. The program strives for individuals to be present and play an active role, doing the things that everyone does in their lives. Going to museums, the movies, dining out, and amusement parks are just some of the things the individuals RAAI supports chose. Participating in these activities cost \$117,273 but RAAI feels it important to get individuals back involved in the things they loved doing. One of the most impactful ways, RAAI involves the community is through the Horticulture program. Having seasonal planting activities and sales throughout the year helps the individuals at RAAI learn valuable skills as we assess for community readiness and appropriate interactions for future prevocational opportunities in their community. \$50,530 are the annual costs, without including salaries, associated with maintaining our valuable horticulture program. Finally, a well-trained workforce is required to provide high-quality support for our individuals accessing the community to ensure access and safety. The program supports \$56,097 in staff training. RACSB is asking for \$299,990 of the \$599,981 in total cost across these activities.

April 2023 Prevention/Public Information Committee Meeting Minutes

Call to order

A meeting of the **Prevention/Public Information Committee of Rappahannock Area Community Services Board** was held at 600 Jackson Street on **April 11, 2023**. *Attendees included:* Ken Lapin, Jacob Parcell, Glenna Boerner, Matt Zurasky, Claire Curcio, Nancy Beebe, Sarah Ritchie, Amy Jindra, Joe Wickens, Amy Umble, Michelle Wagaman, Jacque Kobuchi, Michelle Runyon, Tina Cleveland, Carley Hurd, Stephanie Terrell, Nadine Mayo, and Brandie Williams. *Absent:* Linda Carter, Susan Gayle, Melissa White, Carol Walker and Greg Sokolowski.

Communications Update

Amy Umble reviewed internal and external communications efforts throughout the agency. She updated the Committee on the Free Lance-Star columns, digital marketing reach, and the intranet re-launch and renaming “Spark”.

Virginia Substance Abuse Prevention Block Grant Annual Report 2022-23

Michelle Wagaman updated the Committee on the prevention block grants. She reviewed building community connections, preventing suicide through lock and talk efforts, promoting mental health and preventing suicide, raising awareness to address adverse childhood experiences, and preventing youth tobacco use.

Synar Inspection Results

Michelle Wagaman reviewed the inspection results, the toll of tobacco in Virginia, and the main focus for RACSB tobacco prevention efforts is to educate retailers to keep tobacco products out of the hands of minors.

Healthy Families Rappahannock Area Annual Quality Assurance Site Visit Report

Michelle Wagaman reviewed the annual quality assurance site visit on January 30-31, 2023. She reported the areas reviewed included: current staffing; screening and engagement; home visiting; supervision; training; quality management; assurances for General Assembly; and Healy Families America assurances. She stated that overall, the site is performing well and meeting quality standards. It is considered a thriving program with a strong connection to the community.

Rappahannock Area Kids on the Block City Arts Commission Grant

Michelle Wagaman reported that the RAKOB plans to apply to the City of Fredericksburg for the Government Challenge Grant. It is a matching grant program that combines local monies with state monies to support 501c3 Arts Organizations with operating funds. She stated that if select the RAKOB will receive the funds in the fall of 2023.

FDA Approves First Over-the-Counter Naloxone Nasal Spray

Michelle Wagaman told the Committee that on March 29, 2023, the U.S. Food and Drug Administration approved the first nonprescription, “over-the-counter” naloxone nasal spray, Narcan. She reported that RACSB established a Memorandum of Agreement with the Virginia Department of Health (VDH) to begin dispensing Naloxone in February 2020. Since that time, we have dispensed 1,964 doses of Naloxone.

Adjournment

The meeting adjourned at 1:20 PM



Voice/TDD (540) 373-3223 | Fax (540) 371-3753

NOTICE

To: Public Information/Prevention Committee: Melissa White, Nancy Beebe, Linda Carter, Greg Sokolowski

From: Joseph Wickens
Executive Director

Subject: Public Information/Prevention Committee Meeting
April 11, 2023, 12:30 PM
600 Jackson Street, Board Room 208. Fredericksburg, VA

Date: April 06, 2023

A Public Information/Prevention Committee meeting has been scheduled for Tuesday, April 11, 2023 at 12:30 PM. The meeting will be held at 600 Jackson Street, Board Room 208, Fredericksburg, VA 22401.

Looking forward to seeing you on April 11, 2023 at 12:30 PM.

Cc: Melissa White, Chairperson

RAPPAHANNOCK AREA COMMUNITY SERVICES BOARD

Prevention/Public Information Committee Meeting

April 11, 2023 – 12:30 PM

600 Jackson Street, Room 208 Fredericksburg, VA 22401

Agenda

I.	The Free Lance-Star Columns, <i>Umble</i>	3
II.	Digital Marketing Reach, <i>Umble</i>	8
III.	Intranet Re-launch “Spark”, <i>Umble</i>	10
IV.	Virginia Substance Abuse Prevention Block Grant Annual Report 2022-23, <i>Wagaman</i> ..	14
V.	Synar Inspection Results, <i>Wagaman</i>	18
VI.	Healthy Families Rappahannock Area Annual Quality Assurance Site Visit Report, <i>Wagaman</i>	25
VII.	Rappahannock Area Kids on the Block City Arts Commission Grant, <i>Wagaman</i>	40
VIII.	FDA Approves First Over-the-Counter Naloxone Nasal Spray, <i>Wagaman</i>	42
IX.	Other Business, <i>White</i>	

The Free Lance-Star Columns

RACSB has a monthly column in The Free Lance-Star. This began as a collaboration with the Rappahannock Area Health District, but is now solely RACSB and focuses on behavioral health and disabilities.

ALERT | TOP STORY

HEALTH MATTERS: A new year means a new you, but go easy on yourself

Amy Umble
Dec 31, 2022



The chance to press the reset button, consider new goals and set resolutions can be positive. But unrealistic expectations can make the best intentions backfire. Dilok Klaisataporn, istockphoto

Amy Umble

After December's pandemonium and decadence, January offers opportunities for order and discipline.

The chance to press the reset button, consider new goals and set resolutions can be positive. But unrealistic expectations can make the best intentions backfire.

About 90% of people don't follow through on their New Year's resolutions. For many, this can simply mean not dropping 20 pounds or learning a new language. But it can also lead to anxiety, self-loathing and/or depression.

So how can we take the good parts of goal setting without decreasing mental wellness? Be realistic about setting goals. And be flexible about your path to achieving them. Above all, set goals that are meaningful to you. Many New Year's resolutions center around what society thinks we need—to be thinner or richer or to trade up in homes, cars or relationships. Consider changes that really will make you happier, not changes that will look good on social media.

People are also reading...

- 1 **Spotsylvania supervisors hear demands for increased school funding**
- 2 **Riverbend High School graduate awarded scholarship to attend Virginia Tech**
- 3 **A Florida toddler found in an alligator's mouth was put in the lake by his father, police say**
- 4 **Angel Reese defends gesture toward Caitlin Clark after LSU title win, calls out double standard**

Additionally, make mental health a priority as you plan for 2023 by:

Taking time for self-care. This does not have to be bubble baths and scented candles. It can include prioritizing your health—making appointments to see your doctor, dentist, therapist, psychiatrist, etc. Or making sure that each month includes an activity that will bring you joy or peace.

Do plan to get moving. But you don't have to join a gym or resolve to run a marathon. Exercise boosts mental health, but that exercise doesn't have to be something you dread. Find something you enjoy that also encourages you to move your body—peaceful walks, gardening, playing with children or pets, dancing, juggling ...

Be kind to yourself. Berating someone or shaming them doesn't help them make positive changes—and that includes yourself.

Choose a fun resolution. Resolve to compliment a stranger every day, post a positive social media picture weekly, or take a monthly road trip. Resolve to learn a hobby that intrigues you or to watch a new movie each month. Commit to weekly date nights. Or decide this is the year you're going to take a foreign trip or visit that flea market you've been thinking about for more than a decade.

Or create a fun path to your goal. If you want to tackle something more serious like losing weight, getting organized or budgeting, make sure to keep yourself motivated. Set a realistic path with specific goalposts and offer yourself fun rewards along the way.

Find a tribe. Surround yourself with people who will support you and your goal. This could be friends and family or it could mean finding a new group. You can find local or social media groups dedicated to a variety of hobbies or goals. If you want to improve your photography, there are local photo groups. Or there are running clubs if you're trying for a marathon. Social media offers a wide array of support, too. Just make sure to find a tribe that shares your goals, not one that will shame you along the way.

If you need extra support, RACSB offers virtual groups for people seeking recovery from substance use disorders and/or mental illness. You can find a list of groups, meeting times and details for joining online: rappahannockareacsb.org/peer-support-services.

Amy Umble is communications coordinator for Rappahannock Area Community Services Board. This organization serve Fredericksburg and Caroline, King George, Spotsylvania and Stafford counties.

Around The Web



Grow Anywhere Key Lime Tree | Seed Gifts: Grow Your Own Plant Kits

UncommonGoods



Value Pack Stickers - Caregiver

The Happy Planner



Gutter Guards for One-story House: How Much Would It Cost?

LeafFilter Partner



Fredericksburg: You Might Be Surprised by These Junk Removal Prices (Search Here)

Junk Removal | Search Ads

ALERT | TOP STORY

HEALTH MATTERS

HEALTH MATTERS: This month love should be more than flowers, jewelry

Amy Umble

Feb 4, 2023



Give your loved one a space to vent and share their frustrations, no matter how mundane or bizarre.

Patryk Kosmider, istockphoto

Amy Umble

Hearts and candy cover store shelves this time of year—a cheerful celebration of love.

But true love—whether for a relative, friend or significant other—can be challenging. And it requires more than annual offerings of flowers and jewelry.

Even more so when your loved one has a mental illness, addiction or developmental disability. This is a struggle that most of us face at some point, so I asked the employees of Rappahannock Area Community Services Board to offer some tips. They provided a wealth of knowledge.

Talk openly about mental health and offer help in connecting to services. Even if they don't take the help right away, they are aware and can reach out when they are ready. If you need help finding resources, you can turn to rappa hannockareacsb.org or mhafred.org/helpline.

Detach with love and take care of yourself. Like the analogy of the oxygen mask on airplanes—where flight instructions remind you to put your mask on before helping others put one on—when caring for loved ones, we must take care of ourselves first to be able to help others.

People are also reading...

- 1 **Dairy Queen will sell Blizzards for 85 cents to celebrate summer menu. Here's what to know.**
- 2 **Letter: Religious freedom eroding in Virginia**
- 3 **14 books to be removed from Spotsylvania County school libraries**

A good way to support is not have unrealistic expectations. Do what works for the person or your family. Even if that means missing out on what you thought would be a fun time, a tradition or a rite of passage. If there is something they just can't handle and you know that, don't try to force it just because it's a "special day" or a holiday or because other people are around.

Drop everything and just focus on them for a few minutes every day. Give them a space to vent and share their frustrations, no matter how mundane or bizarre. While in that space, be entirely supportive. Be the person they can trust. Pick another time to address issues that need attention—at this time, just listen. For many people suffering from mood disorders, anxiety, hallucinations, or delusions, having someone they know they can trust is essential. Creating that safe space gives you the foundation you will need to tackle other issues—such as medication compliance, hygiene, drug use, household chores.

Always know that recovery from mental illness and substance use disorder is possible—even when it feels impossible.

Understand the value of connecting with someone who's been there. There are many Facebook groups filled with other people who share your plight (I personally am in six Facebook groups for parents of children with autism). And when it comes to treatment for mental illness or substance use disorder, peer supports are available to guide individuals on the journey through recovery. RACSB has several peer-led, drop-in support groups, including a new one to specifically help people who are grieving while in recovery from addiction.

Educate yourself. This will help you find resources for yourself and your loved one. Additionally, you will be able to learn about behaviors, habits or challenges that are common to your loved one's illness, addiction or disability. You will also find strategies that have helped others.

Amy Umble is communications coordinator for Rappahannock Area Community Services Board. This organization serve Fredericksburg and Caroline, King George, Spotsylvania and Stafford counties.

Around The Web



Personalize T

Discount Mugs



The Adventure Challenge Scrapbook | Arts, Crafts & DIY Kits, Kids Craft & Cra...

UncommonGoods



Gutter Guards for One-story House: How Much Would It Cost?

LeafFilter Partner



Value Pack Stickers - Caregiver

The Happy Planner

Digital Marketing Reach

RACSB uses digital platforms to get the word out about its work and to spread hope by sharing information and resources.

The metrics for these platforms includes:

- Website Traffic
 - January 2023
 - 9,300 new users
 - 63,000 page views
 - February 2023
 - 8,700 new users
 - 58,000 page views
 - March 2023
 - 9,900 new users
 - 68,000 page views
- Google Business Listing
 - January 2023: 3,640 interactions
 - February 2023: 2,951 interactions
 - March 2023: 3,354 interactions
- LinkedIn:
 - January 2023
 - 52 page views
 - February 2023
 - 51 page views
 - March 2023
 - 100 page views

RAPPAHANNOCK AREA
COMMUNITY SERVICES BOARD

- Facebook
 - January 2023
 - 2,601 page reach
 - 1,912 page likes
 - 19 posts
 - February 2023
 - 4,315 page reach
 - 1,912 page likes
 - 21 posts
 - March 2023
 - 6,058 page reach
 - 1,912 page likes
 - 53 posts
- Instagram
 - January 2023
 - 151 page reach
 - 325 followers
 - 4 posts
 - February 2023
 - 114 page reach
 - 325 followers
 - 3 posts
 - March 2023
 - 199 page reach
 - 325 followers
 - 15 posts




Intranet Re-launch “Spark”

RACSB launched its new intranet on March 2. We held a competition to name the intranet and the communications committee selected “Spark.” The committee held a spark-themed launch party with snacks, a scavenger hunt and free t-shirts (design below).



RAPPAHANNOCK AREA COMMUNITY SERVICES BOARD

This is what the original intranet looked like.

RACSB EMPLOYEE INTRANET			
BACSB Website	DBHDS Website	VACSB Website	List of DSM-IV Codes
<p>Frequently Visited Pages</p> <p>Forms in Alpha Order</p> <p>Agency Job Listings</p> <p>Board of Directors Meeting Highlights</p> <p>Staff Contact Information</p> <p>Updated Phone List 2019</p> <p>My Learning Pointe (eLearning Provider)</p> <p>Social Media</p> <p>RYAN RSCF Monitor Ryan on Twitter</p>	 <p>ARTS Initial Service Authorization Request Form (effective July 1, 2018)</p> <p>ARTS Extension Service Authorization Request Form (effective July 1, 2018)</p> <p>Trauma-Informed Training</p> <p>Fitness Incentive Form</p> <p>Enjoy the latest issue of Inside RACSB</p> <p>Financial Agreement</p> <p>Financial Information</p> <p>Training Enhance Services to Veterans, Active Duty Members, and Their Families:</p> <p>Military Cultural Competency Training for Clinical Staff:</p> <ul style="list-style-type: none"> Center for Deployment Psychology and Veteran's Affairs 75 minute overview PsychArmor MCC Veteran 101 and 201 in-depth training on several topics Center for Deployment Psychology and Veterans Affairs (8 hour-1 module training) <p>The 2015-2016 Guide to VA Landlord-Tenant Law & Local Rental Housing in Planning District 16 is a helpful guide when helping individuals with housing issues.</p> <p>View February 2018 Issue of Inside RACSB</p> <p>Make sure you don't fall behind in your trainings. Here is the 2018 training calendar.</p> <p>Want to know when you'll be getting paid? Check out the Payroll Calendar for the 2018.</p> <p>Compendium Dec 16 22</p>	<p>FORMS</p> <p>PACT Referral Form</p> <p>Scanning Record Index</p> <p>Forms in Alphabetical Order</p> <p>Medicaid ID Waiver Forms</p> <p>Person-centered/Support Intensity Scale</p> <p>Crisis Stabilization Forms</p> <p>Personnel & Payroll Information/Forms</p> <p>Purchasing & Budget Forms</p> <p>Virginia Independent Clinical Assessment (VICA) Forms</p> <p>GAP Eligible Diagnosis Codes</p> <p>DSP and Supervisors Competencies</p> <p>DSP Training PowerPoint</p> <p>Emergency Services & TDO Exception Report (Regional)</p> <p>ES & TDO Exception Report (CSBBHA)</p> <p>PERSONNEL</p> <p>HR Request Form</p> <p>Flexible Spending Accounts</p> <p>RACSB Job Listings</p> <p>Employee Handbook</p> <p>Personnel & Payroll Information/Forms</p> <p>Welcome New Employees</p> <p>DSP and Supervisors Competencies</p> <p>DSP Training PowerPoint</p> <p> Email Human Resources Manager Terry Moore</p> <p>QUALITY ASSURANCE</p> <p>Virginia Medicaid Portal - Provider Manuals and Messages</p> <p>Comprehensive Plan 2016 - 2022</p> <p>RACSB Surveys</p> <p>Records Management</p> <p>Q.A. Frequently Asked Questions</p> <p> TOOLBOX (Resources)</p> <p>HUMAN RIGHTS FORMS</p> <p>Advance Psychiatric Directives and WRAP Plans</p> <p>Alleged Abuse Form</p> <p>Authorized Representative Forms</p> <p>Community Format Complaint Form</p>	

And this is Spark

Spark Home Documents Who we are How we work Resources Kudos Frequently Asked Questions Edit

Published 3/28/2023 Edit

Check out pictures from our holiday party and other events!
Go to employee photo galleries →

Our latest HopeStarter of the Quarter: Ramon Test!

Got a burning question? Check out our FAQs.

Hope Starter Shout Outs

Get to Know a Hope Starter

Hey there, HopeStarter
Thank you for being part of our team! Our goal is to serve the community by providing desperately needed services for people with behavioral health concerns and/or developmental disabilities. And

Learn more about RACSB:
Our leadership
Our people

Things you can do here:
Read the Latest Kudos
Recognize a Coworker

Spark March Analytics:

- Home page was viewed 471 times
- Kudos page was viewed 83 times
- FAQ page was viewed 44 times
- Employee galleries page was viewed 56 times
- Get to Know a HopeStarter page was viewed 70 times

RAPPAHANNOCK AREA
COMMUNITY SERVICES BOARD



- What is your name? **Linda Church**
- What is your job title? **Mental Health RN, QMHP**
- How long have you worked at RACSB? **5 yrs , 6 months**
- What drew you to your job? **Behavioral health understanding is so needed in the community**
- What drew you to RACSB? **Because it serves our community, by serving the most vulnerable populations regarding mental health, drug addiction and ID**
- What is the best thing about your job? **The feeling of helping clients “see the light” and the encouragement I may be able to give them along with emotional support. And I work with the best group of nurses ever! A great team!**
- What is the biggest challenge about your job? **When clients miss their appts resulting sometimes in a decline in their MH**
- What does a typical day look like in your job? **Constant multi-tasking work with hardly any down time. There is no typical day. lol**
- What is your team like? **The best team of nurses I have ever worked within the 31 yrs of nursing!**
- What is your biggest accomplishment? **In life , being a nurse for 30+ years and still enjoy helping others.**
- What do you wish people knew about your job? **How difficult it is constantly multi-tasking, the many may hats we wear, the many behind the scenes things we have to do and how busy it is!**

This is an example of the Get to Know a HopeStarter feature

Substance Abuse Block Grant Annual Report – CSB Level (July 2021 to June 2022)

The Office of Behavioral Health Wellness with the Department of Behavioral Health and Developmental Services (DBHDS) contract with OMNI Institute for the evaluation of CSB prevention efforts.

As part of this effort, OMNI compiles a customizable report that highlights prevention activity data for required FY2021-22 Substance Abuse Block Grant-funded strategies.

The five required Block Grant strategies are the heart of the report:

- Building Community Connections (Coalitions)
- Lock and Talk Virginia
- Promoting Mental Health and Preventing Suicide
- Raising Awareness to Address Adverse Childhood Experiences (ACEs)
- Preventing Youth Tobacco Use (Counter Tools)

The report for Rappahannock Area Community Services Board (RACSB) is attached. Please note, this report is only for initiatives and strategies funded by the Substance Abuse Block Grant. It is not all inclusive of all RACSB Prevention Services activities.

Rappahannock Area Substance Abuse Prevention Block Grant

Annual Report: July 2021 to June 2022

The Substance Abuse Prevention Block Grant is funded by the Substance Abuse and Mental Health Services Administration (SAMSHA) and is distributed to all 40 Virginia Community Service Boards (CSBs) through the Department of Behavioral Health and Developmental Services (DBHDS). These funds allow communities to plan, implement, and evaluate activities that prevent substance use. Through a data-driven decision-making process, CSBs engage their communities by enacting efforts such as coalition development, trainings, community events, and media campaigns. This report includes information regarding the prevention efforts of Rappahannock Area Community Service Board.



Why Prevention Matters



Prevention efforts can **stop substance use before it begins** – particularly among youth and adolescents – by promoting a healthy future for our community.



Research shows that **every dollar spent on substance use prevention saves up to \$65** in medical costs. Prevention efforts save not only lives, but money.



We **build caring community networks** through efforts that target shared risk and protective factors.

2022: The Year At-A-Glance

5

Localities served

372K

Community population

1.1M

Engagements with community members



RACSB actively attends numerous community walks and events throughout the year.



Building Community Connections

Our coalitions inform and engage our communities in substance use prevention through CADCA and/or CCoVA membership. Coalitions support strategy implementation and are key in creating a network of community stakeholders that care.

2 active coalition(s)
with **137 members**
representing **20 sectors**



Preventing Suicide through Lock and Talk Efforts

Lock and Talk educates communities on storing and securing lethal means while distributing safety devices. Lock and Talk also engages communities through information dissemination strategies.



179,118
Impressions/
reach

Materials Distributed:



Promoting Mental Health and Preventing Suicide

Trainings such as Mental Health First Aid (MHFA) or Applied Suicide Intervention Skills Training (ASIST) help participants identify, understand, and respond to the signs of mental health or substance use challenges. Participants leave equipped to connect people to resources and care.



34

Trainings



599

People Trained

"I've never been in a training like this. You all are awesome in details while keeping attention. I feel that you all connect with these things, in turn, giving a vibe of 'I understand you and I care!'"

Janet N.



Raising Awareness to Address Adverse Childhood Experiences

ACE Interface trainings disseminate ACE and resilience science in diverse communities. Participants learn about the biological, health, and social impacts of ACEs and how to support the health and well being of community members.



29

Trainings



690

People Trained

Sectors trained:

- School Staff
- Law Enforcement
- Non-profits
- Parents/Caregivers



Preventing Youth Tobacco Use

By providing education to tobacco and nicotine retailers across our catchment area, we are able to prevent youth tobacco use through reduced access.



251

Merchants visited

Materials distributed:

- CounterMats
- Community Resources
- Posters/Flyers

Prevention In Action!



RACSB Provides Lock and Talk Resource Bags for Suicide Prevention Month

In September 2021, the RACSB Prevention team assembled 500 Lock and Talk Virginia resource bags to provide to school counselors, social workers, psychiatrists, and nurses. Bags were also given to local pediatrician and orthodontist offices. The bags contained a set of posters as well as mirror decals, wallet resource cards, and other suicide prevention information.

Left, members of the RACSB Prevention team pose with the 500 resource bags.

For more info, contact us at prevention@rappahannockareacsb.org
www.rappahannockareacsb.org

This report was prepared in partnership with the OMNI Institute, Virginia's evaluation partner for the Substance Abuse Block Grant. OMNI is a non-profit social science consultancy based in Denver, CO.



Synar Inspection Results and “The Toll of Tobacco in Virginia”

2022 Synar Inspection Results

The Synar Amendment requires states to have laws prohibiting the sale and distribution of tobacco products to minors. In Virginia, CSB Prevention teams are tasked with providing merchant education to tobacco retailers every two years. The retailers are inspected by the USDA and/or ABC who are tasked with enforcement.

In 2022, there were 20 retail outlets inspected within Planning District 16. Of those four (4) were found in violation for a violation rate of 20%. The state retail violation rate is 16.5% (below the 20% threshold set by the Synar Amendment). Failure for Virginia to maintain a state retailer violation rate below 20% will result in the loss of Substance Abuse Block Grant funds.

Background:

In July 1992, Congress enacted the Alcohol, Drug Abuse, and Mental Health Administration Reorganization Act, which includes an amendment (section 1926) aimed at decreasing youth access to tobacco. This amendment, named for its sponsor, Congressman Mike Synar of Oklahoma, requires states (that is, all states, the District of Columbia, Puerto Rico, the U.S. Virgin Islands, and six Pacific jurisdictions) to enact and enforce laws prohibiting the sale or distribution of tobacco products to individuals under the age of 18.

States must comply with the Synar Amendment in order to receive their full Substance Abuse Prevention and Treatment Block Grant (SABG) awards.

Public Law 116-94, signed on December 20, 2019, superseded this legislation and increased the minimum age for tobacco sales from 18 to 21.

The Synar Amendment was developed in the context of a growing body of evidence about the health problems related to tobacco use by youth, as well as evidence

about the ease with which youth could purchase tobacco products through retail sources. The Synar program has been successful in preventing youth tobacco use.

States are required to:

- Enforce underage access laws to a degree that reasonably can be expected to reduce the illegal sale of tobacco products to individuals under the age of 21.
- Conduct annual, unannounced inspections that provide a valid probability sample of tobacco sales outlets accessible to minors.
- Report their sampling methodology and results of the annual Synar survey as a part of the Annual Synar Report no later than December 31. This includes the State's sampling methodology, Synar survey results, Synar inspection report, and the Synar inspection protocol.
- Revise their methodology, inspection reports, and inspection protocols, to include the revised age requirements (under 21). In addition, the Synar survey results must now include results for sales to youth and young adults under the age of 21.
- Achieve a noncompliance rate of no more than 20% (SAMHSA requires that each state reduce its retailer violation rate below 20%).

<https://www.samhsa.gov/synar>

Virginia passed Tobacco 21 legislation effective July 1, 2019. Federally, the legislation went into effect on December 20, 2019.

“The Toll of Tobacco in Virginia”

Annually, the Campaign for Tobacco-Free Kids releases an annual report by state. This “toll of tobacco” provides a snapshot of adolescent tobacco use as well as state deaths attributed to smoking. The report also shared tobacco-related monetary costs by state which looks at health care expenses as well as productivity losses due to smoking-caused illness and death.

Virginia ranks 44th in state cigarette tax per pack (\$0.60). The state average tax is \$1.91 per pack.

2022 Synar Inspection Results by CSB Catchment Area

HPR I	Outlets Inspected	Violations	Violation Rate
Alleghany-Highlands	3	0	0.00%
Harrisonburg-Rockingham	13	1	7.69%
Horizon	29	2	6.90%
Northwestern	25	2	8.00%
Rappahannock Area	20	4	20.00%
Rappahannock Rapidan	11	1	9.09%
Region Ten	21	0	0.00%
Rockbridge	9	2	22.22%
Valley	11	1	9.09%
Regional Totals	142	13	9.15%

2019 Rate	2018 Rate	2017 Rate	2016 Rate	2015 Rate	2014 Rate	2013 Rate
33.33%	n/a	50.00%	0.00%	0.00%	0.00%	12.50%
0.00%	0.00%	0.00%	11.10%	0.00%	0.00%	n/a
10.53%	4.76%	4.35%	5.88%	21.10%	14.29%	8.33%
7.69%	20.00%	14.29%	11.11%	4.80%	0.00%	10.17%
13.33%	5.26%	10.00%	13.64%	0.00%	7.14%	4.84%
0.00%	37.50%	0.00%	0.00%	0.00%	18.18%	10.00%
5.56%	40.00%	0.00%	0.00%	33.30%	8.33%	7.55%
20.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
57.14%	0.00%	0.00%	0.00%	0.00%	0.00%	10.00%
12.63%	11.83%	5.48%	6.98%	6.58%	5.33%	17.08%

HPR II	Outlets Inspected	Violations	Violation Rate
Alexandria	8	2	25.00%
Arlington	13	4	30.77%
Fairfax-Falls Church	56	11	19.64%
Loudoun Cnty	16	3	18.75%
Prince William	31	9	29.03%
Regional Totals	124	29	23.39%

2019 Rate	2018 Rate	2017 Rate	2016 Rate	2015 Rate	2014 Rate	2013 Rate
60.00%	20.00%	0.00%	37.50%	0.00%	0.00%	8.57%
20.00%	0.00%	0.00%	0.00%	7.10%	6.67%	25.58%
18.60%	22.22%	27.78%	4.35%	17.20%	16.95%	12.21%
13.33%	0.00%	0.00%	7.69%	6.30%	6.25%	4.76%
36.84%	11.11%	5.88%	9.09%	3.70%	0.00%	12.86%
23.91%	15.29%	14.10%	9.09%	6.86%	5.97%	36.18%

HPR III	Outlets Inspected	Violations	Violation Rate
Blue Ridge	25	3	12.00%
Cumberland Mountain	8	1	12.50%
Danville-Pittsylvania	23	4	17.39%
Dickenson Cnty	4	0	0.00%
Highlands	10	1	10.00%
Mt Rogers	19	3	15.79%
New River Vally	19	3	15.79%
Piedmont Reg.	22	5	22.73%
Pl. Dist. 1	18	1	5.56%
Southside	11	2	18.18%
Regional Totals	159	23	14.47%

2019 Rate	2018 Rate	2017 Rate	2016 Rate	2015 Rate	2014 Rate	2013 Rate
33.33%	20.83%	0.00%	16.67%	4.30%	5.88%	n/a
0.00%	50.00%	22.22%	37.50%	10.00%	0.00%	13.51%
14.29%	0.00%	25.00%	6.25%	0.00%	18.18%	15.38%
25.00%	0.00%	0.00%	0.00%	0.00%	0.00%	28.57%
16.67%	18.18%	20.00%	0.00%	11.10%	0.00%	4.35%
33.33%	20.00%	11.11%	20.00%	7.70%	11.11%	6.98%
0.00%	6.67%	14.29%	0.00%	13.30%	15.38%	8.51%
28.00%	0.00%	0.00%	0.00%	35.70%	0.00%	2.08%
20.00%	0.00%	28.57%	16.67%	10.00%	0.00%	9.38%
16.67%	0.00%	12.50%	0.00%	0.00%	0.00%	0.00%
19.53%	10.78%	11.70%	8.82%	9.21%	5.06%	24.33%

Next Page

HPR IV	Outlets Inspected	Violations	Violation Rate
Chesterfield	25	3	12.00%
Crossroads	16	2	12.50%
Goochland-Powhatan	5	0	0.00%
Hanover	13	2	15.38%
Henrico	29	5	17.24%
Pl. Dist. 19	30	8	26.67%
Richmond	33	3	9.09%
Regional Totals	151	23	15.23%

2019 Rate	2018 Rate	2017 Rate	2016 Rate	2015 Rate	2014 Rate	2013 Rate
13.33%	12.50%	0.00%	4.35%	10.50%	12.50%	5.56%
25.00%	5.56%	0.00%	0.00%	7.70%	16.67%	9.38%
0.00%	0.00%	0.00%	0.00%	33.30%	0.00%	12.50%
0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	5.88%
16.67%	0.00%	0.00%	11.11%	12.10%	10.53%	16.67%
0.00%	0.00%	17.65%	9.09%	12.00%	14.29%	9.38%
30.00%	0.00%	33.33%	22.22%	24.00%	25.00%	11.48%
13.68%	4.05%	6.58%	7.04%	14.23%	11.28%	25.35%

HPR V	Outlets Inspected	Violations	Violation Rate
Chesapeake	21	4	19.05%
Colonial	11	2	18.18%
Eastern Shore	10	1	10.00%
Hampton-Newport News	24	6	25.00%
Middle Peninsula	15	5	33.33%
Norfolk	20	3	15.00%
Portsmouth	9	1	11.11%
VA Beach	29	4	13.79%
Western Tidewater	9	2	22.22%
Regional Totals	148	28	18.92%
State Total	724	116	16.50%

2019 Rate	2018 Rate	2017 Rate	2016 Rate	2015 Rate	2014 Rate	2013 Rate
0.00%	0.00%	6.67%	0.00%	6.30%	0.00%	8.51%
8.33%	9.09%	7.14%	0.00%	33.30%	14.29%	8.57%
33.33%	0.00%	0.00%	66.67%	0.00%	0.00%	5.26%
27.78%	16.67%	23.08%	23.08%	8.30%	9.52%	15.38%
10.00%	8.33%	33.33%	0.00%	10.00%	0.00%	17.50%
25.00%	22.22%	0.00%	0.00%	5.30%	33.33%	17.19%
25.00%	0.00%	33.33%	0.00%	0.00%	0.00%	10.34%
12.90%	7.69%	4.76%	15.00%	6.50%	3.45%	15.19%
5.00%	20.00%	20.00%	0.00%	9.10%	0.00%	20.00%
14.29%	10.10%	11.43%	10.42%	8.76%	6.73%	13.10%
16.80%	10.60%	10.10%	9.50%	10.40%	9.00%	10.73%

*2020 and 2021 data missing due to COVID-19

Visit Completed?	Sale Made?	Trade Name	Incident Address	City	State	Zip Code	CSB	Violation Source	Reason For No Inspection
Rappahannock Area CSB									
Yes	Yes	dollar general	206 N Main St	Bowling Green	VA		Rapp Area	Synar	
Yes	Yes	sheetz 10	10 Washington Square Plz	Fredericksburg	VA		Rapp Area	Synar	
Yes	Yes	pit stop 23807	23807 Rogers Clark Blvd	Ruther Glen	VA		Rapp Area	Synar	
Yes	Yes	mr fuel	23818 Rogers Clark Blvd	Ruther Glen	VA		Rapp Area	Synar	
Yes	No	giant	5701 Plank Rd	Fredericksburg	VA		Rapp Area	Synar	
Yes	No	pit stop ruther glen	24270 Rogers Clark Blvd	Ruther Glen	VA		Rapp Area	Synar	
Yes	No	walmart 0205	125 Washington Square Plz	Fredericksburg	VA		Rapp Area	Synar	
Yes	No	wawa food market #663	10630 Courthouse Rd	Fredericksburg	VA		Rapp Area	Synar	
Yes	No	7 eleven 1036	1036 Stafford Lakes Pkwy	Fredericksburg	VA		Rapp Area	Synar	
Yes	No	nomad vapor	4607 Southpoint Pkwy	Fredericksburg	VA		Rapp Area	Synar	
Yes	No	mountain view store	1259 Mountain View Rd	Fredericksburg	VA		Rapp Area	Synar	
Yes	No	fas mart #35	5022 Plank Rd	Fredericksburg	VA		Rapp Area	Synar	
Yes	No	walgreens #12135	10600 Rollingwood Dr	Fredericksburg	VA		Rapp Area	Synar	
Yes	No	wawa	10600 Patriot Hwy	Fredericksburg	VA		Rapp Area	Synar	
Yes	No	vapa motive	338 Amaret St	Fredericksburg	VA		Rapp Area	Synar	
Yes	No	dollar general	10586 Tinsbloom Mill Ln	King George	VA		Rapp Area	Synar	
Yes	No	loves	23845 Rogers Clark Blvd	Ruther Glen	VA		Rapp Area	Synar	
Yes	No	fas mart #48	11625 Brock Rd	Spotsylvania	VA		Rapp Area	Synar	
Yes	No	weis markets	9801 Courthouse Rd	Spotsylvania	VA		Rapp Area	Synar	
Yes	No	wawa #665	72 Austin Park Dr	Stafford	VA		Rapp Area	Synar	
No	N/A	gulf gas	2120 Plank Rd	Fredericksburg	VA		Rapp Area	Synar	Permanant
No	N/A	bjs wholesale club	3985 Plank Rd	Fredericksburg	VA		Rapp Area	Synar	Membersh
No	N/A	la surianita	1215 Snowden St	Fredericksburg	VA		Rapp Area	Synar	Does not se
No	N/A	walmart	10001 Southpoint Pkwy	Fredericksburg	VA		Rapp Area	Synar	Does not se
No	N/A	sunshine market	24252 Jefferson Davis Hwy	Ruther Glen	VA		Rapp Area	Synar	Permanant
No	N/A	the snack shack	8901 Courthous Rd	Spotsylvania	VA		Rapp Area	Synar	Does not se

Retailers highlighted in yellow fail the inspection. Retailers highlighted in red we not able to be inspected. The reason is indicated to the right.



THE TOLL OF TOBACCO IN VIRGINIA

Tobacco Use in Virginia

- High school students who smoke: 5.5% [Girls: 4.8% Boys: 6.1%]
- High school males who smoke cigars: 5.8%
- High school students who use e-cigarettes: 19.9%
- Kids (under 18) who try cigarettes for the first time each year: 11,100
- Additional Kids (under 18) who become new regular, daily smokers each year: 970
- Adults in Virginia who smoke: 12.4% [Men: 13.4% Women: 11.5% Pregnant Females: 6.2%]

Nationwide, youth smoking has declined significantly since the mid-1990s. The 2019 Youth Risk Behavior Survey (YRBS) found that the percentage of high school students reporting that they have smoked cigarettes in the past month decreased to 6.0 percent in 2019, the lowest level since this survey began in 1991. The high school smoking rate has declined by a remarkable 84 percent since peaking at 36.4 percent in 1997. The 2022 National Youth Tobacco Survey, using a different methodology than the YRBS, found that 2.0% of high school students smoke cigarettes. 12.5 percent of U.S. adults currently smoke, significantly less than the 18.9 percent in 2011 and the 15.5 percent in 2016.

Deaths in Virginia From Smoking

- Adults who die each year in Virginia from their own smoking: 10,300
- Proportion of cancer deaths in Virginia attributable to smoking: 29.5%
- Virginia kids who have lost at least one parent to a smoking-caused death: 6,900
- Kids alive in state today who will ultimately die from smoking: 150,000 (given current smoking levels)

Nationally, smoking alone kills more people each year than alcohol, AIDS, car crashes, illegal drugs, murders, and suicides combined. For every person who dies from smoking, at least 30 more are suffering from serious smoking-caused disease and disability.

Tobacco-Related Monetary Costs in Virginia

- Annual health care expenditures in the State directly caused by tobacco use: \$3.61 billion
 - State Medicaid program's total health expenditures caused by tobacco use: \$522.1 million
- Estimated annual health care expenditures in Virginia from secondhand smoke exposure: \$176.5 million
- Citizens' state/federal taxes to cover smoking-caused gov't costs: \$750/household
- Productivity losses from smoking-caused premature death in Virginia: \$3.29 billion
- Productivity losses from smoking-caused illness in Virginia: \$6.10 billion

Productivity losses are from smoking-caused shortened work lives and illness that may impact the ability to work, including absenteeism, non-productivity at work, and inability to work due to disability. Not included in the above costs are other non-health costs caused by tobacco use, including direct residential and commercial property losses from smoking-caused fires and smoking-caused cleaning and maintenance costs.

Tobacco Industry Advertising and Other Product Promotion

- Estimated portion spent in Virginia each year: \$368.4 million

Spending includes the top cigarette, smokeless, and e-cigarette companies. Research has concluded that tobacco industry marketing causes youth to start and continue using tobacco products, and has found that youth are more sensitive to the marketing than adults.

Virginia Government Policies Affecting the Toll of Tobacco in Virginia

- Annual State tobacco prevention spending from tobacco settlement and tax revenues: \$11.9 million [National rank: 28 (with 1 the best), based on percent of CDC recommendation. CDC recommendation: \$91.6 million. Percent of CDC recommendation: 13.0%]
- State cigarette tax per pack: \$0.60 [National rank: 44th (average state tax is \$1.91 per pack)]

Campaign for Tobacco-Free Kids / January 18, 2023

Sources

Youth smoking. 2019 Youth Risk Behavior Survey (YRBS) Current smoking = smoked in past month. The 2019 YRBS found that 6.0% of U.S. high school kids smoke. The 2022 National Youth Tobacco Survey (NYTS), using a different methodology than the YRBS, found that 2.0% of U.S. high school kids smoke. **Male youth cigar smoking.** 2019 YRBS. The 2019 National YRBS found that 7.4% of US high school males smoke cigars. The 2022 NYTS, using a different methodology than the YRBS, found that 3.5% of high school males smoke cigars. **Youth e-cigarette use.** 2019 YRBS. The 2019 National YRBS found that 32.7% of U.S. high school kids use e-cigarettes. The 2022 NYTS, using a different methodology than the YRBS, found that 14.1% of U.S. high school kids use e-cigarettes. **New youth smokers.** Estimate based on U.S. Dept of Health & Human Services (HHS), “Results from the 2021 National Survey on Drug Use and Health: Summary of National Findings and Detailed Tables,” with the state share of the national number estimated proportionally based on the projected number of youth smokers ages 0-17 reported in U.S. Department of Health and Human Services (HHS), *The Health Consequences of Smoking—50 Years of Progress: A Report of the Surgeon General*, 2014, <https://www.cdc.gov/tobacco/sgr/50th-anniversary/index.htm>.

Adult smoking. State: CDC, BRFSS 2021 online data: <https://www.cdc.gov/brfss/brfssprevalence/index.html>. Because of changes in methodology, state-specific adult smoking rates cannot be compared to data prior to 2011. Florida adult smoking rate from CDC 2020 BRFSS online data. National: CDC, “Tobacco Product Use Among Adults—United States, 2020,” *MMWR* 71:397-405, March 18, 2022, <https://www.cdc.gov/mmwr/volumes/71/wr/pdfs/mm7111a1-H.pdf>. **Pregnant Females.** CDC, “Cigarette Smoking During Pregnancy: United States, 2016,” *NCHS Data Brief*, 305, February 2018, <https://www.cdc.gov/nchs/data/databriefs/db305.pdf>. **Adult deaths.** CDC, *Best Practices for Comprehensive Tobacco Control Programs, 2014*, <https://www.cdc.gov/tobacco/stateandcommunity/guides/pdfs/2014/comprehensive.pdf>. Smoking-related disease and disability from CDC, *Smoking & Tobacco Use*, http://www.cdc.gov/tobacco/data_statistics/fact_sheets/fast_facts/index.htm#toll. **Smoking-Attributable Cancer Deaths.** Islami, F, et al., “Person-years of life lost and lost earnings from cigarette smoking-attributable cancer deaths, United States, 2019,” *International Journal of Cancer*, August 10, 2022. Includes 13 smoking-related cancers: oral cavity, pharynx, esophagus, stomach, colorectum, liver and intrahepatic bile duct (liver), pancreas, larynx, lung and bronchus (lung), cervix uteri (cervix), kidney and renal pelvis (kidney), urinary bladder, and acute myeloid leukemia. **Lost Parents.** Leistikow, B, et al., “Estimates of Smoking-Attributable Deaths at Ages 15-54, Motherless or Fatherless Youths, and Resulting Social Security Costs in the United States in 1994,” *Preventive Medicine* 30(5):353-360, May 2000, and state-specific data from author. **Projected youth smoking deaths.** HHS, *The Health Consequences of Smoking: 50 Years of Progress. A Report of the Surgeon General*, 2014.

Costs caused by tobacco use (NOTE: To make all of the cost data more comparable, some figures have been adjusted to 2018 dollars by the CDC’s methodology of using the Bureau of Economic Analysis’ price indexes for Gross Domestic Products). **Health and productivity costs caused by tobacco use.** CDC, *Best Practices for Comprehensive Tobacco Control Programs, 2014*; CDC, Smoking Attributable Mortality, Morbidity and Economic Costs (SAMMEC), <https://www.cdc.gov/statesystem/HealthConsequencesandCosts.html>; Shrestha, SS, et al., “Cost of Cigarette Smoking—Attributable Productivity Losses, U.S., 2018,” *AJPM*, July 27, 2022; CDC, *State Data Highlights, 2006* [and underlying CDC data/estimates], https://www.cdc.gov/tobacco/data_statistics/state_data/data_highlights/2006/pdfs/datahighlights06rev.pdf. State Medicaid program expenditures are before any federal reimbursement. State Medicaid program expenditures may be conservative because they do not account for increases in utilization nor reflect the effects of Medicaid expansion under the Affordable Care Act. **SHS Costs.** Behan, DF, et al., *Economic Effects of Environmental Tobacco Smoke*, Society of Actuaries, March 31, 2005, <https://www.soa.org/493831/globalassets/assets/files/research/projects/etsreportfinaldraftfinal-3.pdf> [nationwide costs allocated to state based on its share of all U.S. smokers]. **State-federal tobacco tax burden.** Equals Virginia residents’ federal & state tax payments necessary to cover all state government tobacco-caused costs plus the residents’ pro-rated share, based on state populations, of all federal tobacco-caused costs. See above and Xu, X, et al., “U.S. healthcare spending attributable to cigarette smoking in 2014,” *Preventive Medicine*, 2021, with other state government tobacco costs taken to be 3% of all state smoking-caused health costs, as in CDC, “Medical Care Expenditures Attributable to Smoking—United States, 1993,” *MMWR* 43(26):1-4, July 8, 1994. **Examples of other tobacco-related costs.** U.S. Treasury Dept., *Economic Costs of Smoking in the U.S. & the Benefits of Comprehensive Tobacco Legislation*, 1998; Chaloupka, FJ & Warner, KE, “The Economics of Smoking,” in Culyer, A & Newhouse, J (eds), *Handbook of Health Economics*, 2000; Miller, P, et al., “Birth and First-Year Costs for Mothers and Infants Attributable to Maternal Smoking,” *Nicotine & Tobacco Research* 3(1):25-35, 2001; Nat’l Fire Protection Association, *Home Fires Started by Smoking*, January 2019, <https://www.nfpa.org/News-and-Research/Data-research-and-tools/US-Fire-Problem/Smoking-Materials>.

Tobacco industry marketing. U.S. Federal Trade Commission (FTC), *Cigarette Report for 2020*, October 2021, <https://www.ftc.gov/system/files/documents/reports/federal-trade-commission-cigarette-report-2020-smokeless-tobacco-report-2020/p114508fy20cigaretterreport.pdf> [data for top 4 manufacturers only]; FTC, *Smokeless Tobacco Report for 2020*, October 2021, <https://www.ftc.gov/system/files/documents/reports/federal-trade-commission-cigarette-report-2020-smokeless-tobacco-report-2020/p114508fy20smokelesstobacco.pdf> [data for top 5 manufacturers only]; FTC, *E-Cigarette Report for 2019-2020*, August 31, 2022, https://www.ftc.gov/system/files/ftc_gov/pdf/E-Cigarette%20Report%202019-20%20final.pdf [data for top 5 manufacturers only]. **Tobacco marketing influence on youth.** HHS, *Preventing Tobacco Use Among Youth and Young Adults: A Report of the Surgeon General*, 2012, <https://www.cdc.gov/tobacco/sgr/2012/index.htm>. National Cancer Institute (NCI), *The Role of the Media in Promoting and Reducing Tobacco Use*, Smoking and Tobacco Control Monograph No. 19, 2008, http://cancercontrol.cancer.gov/tcrb/monographs/19/m19_complete.pdf. See, also, Campaign factsheet, *Tobacco Marketing to Kids*, <http://www.tobaccofreekids.org/research/factsheets/pdf/0008.pdf>.

Virginia spending to reduce tobacco use and ranking. Campaign for Tobacco-Free Kids, et al., *Broken Promises to Our Children: The 1998 State Tobacco Settlement 24 Years Later*, January 13, 2023, <http://tfk.org/statereport>. CDC-recommended spending levels, *Best Practices for Comprehensive Tobacco Control Programs*, 2014. **Virginia cigarette tax and rank.** Orzechowski & Walker, *The Tax Burden on Tobacco*, 2020 [industry-funded annual report], with updates from state agencies and media reports. State average includes all taxes currently in effect.

Related Campaign for Tobacco-Free Kids Fact Sheets, available at:
<http://www.tobaccofreekids.org> or <https://www.tobaccofreekids.org/us-resources>.

Healthy Families Rappahannock Area Annual Quality Assurance Site Visit Report

Healthy Families Virginia conducted their annual quality assurance site visit of the local Healthy Families Rappahannock Area site on January 30 – 31, 2023.

Areas reviewed include: overall impressions; current staffing; screening and engagement; home visiting; supervision; training; quality management; policies and procedures; governance and administration; assurances for General Assembly; and Healthy Families America assurances.

Overall, the site is performing well and meeting quality standards. It is considered a thriving program with a strong connection to the community.

HEALTHY FAMILIES VIRGINIA
Families Forward Virginia
8100 Three Chopt Road, Suite 212
Richmond, Virginia 23229



ANNUAL QUALITY ASSURANCE SITE VISIT REPORT

Date: February 7, 2023

Dear Melodie Jennings,

Enclosed is the final report of the Healthy Families Rappahannock Area onsite visit, conducted on January 30th and January 31st, 2023 by Hadith Zalzala, TA/QA Specialist for Healthy Families Virginia (HFV). This report summarizes the impressions and recommendations of the TA/QA Specialist, who represents Healthy Families Virginia (HFV) and Prevent Child Abuse Virginia (PCAV). The completed site visit consisted of a pre-site review of assessment surveys, program outcomes, team meeting and Advisory/Board of Directors meeting minutes, job descriptions and new staff resumes, quality assurance analyses, and current Evaluation Outcomes. The review included examining family files, supervision documentation, training records, and verification of background checks. In addition, group discussions were conducted with home visitors, assessment workers, program management, and a host agency representative, as well as home visit and supervision shadows with same day follow-up and feedback.

This report includes both strengths and next steps for further growth. Where appropriate, *8th Edition Healthy Families America Best Practice Standards (HFA BPSs)* or *Healthy Families Virginia Best Practice Recommendations (BPRs)* are cited. The recommended next steps can provide an opportunity for updating your annual *Quality Improvement Plan* and planning for technical assistance based upon program needs.

GENERAL IMPRESSIONS

Healthy Families Rappahannock Area (HFRA) has had a great year. With all the new changes, HFRA is a thriving program. In reviewing and having an open discussion with the staff, the program has built a strong positive relationship with the community they serve. Here are some exciting things the program has achieved this past year. A church within their community (Strong Tower Church) donated \$5,000 to the program. The site had an open house in April 2022, where they invited community agencies to learn more about the Healthy Families Program. The site also received a mini-grant from Mary Washington Hospital of \$5,000 to focus on Maternal Care for the Black and Brown community. The Program Manager recruited five new board members this past year. The staff also talk about how cohesive they are as a team. As the direct staff is

telework, they have found different ways to stay connected by doing birthday celebrations and self-care lead team meetings. The site has its annual holiday drive-thru celebration for families as they give out resources, toys, and hundred-dollar gift cards to families. Great job! This past fiscal year the site has developed new partnerships with agencies and organizations in the community to serve families with thanksgiving food baskets and prenatal gift bags. The program has a partnership with a local food bank. Every Tuesday, the food bank truck is outside their main office giving out food to families within the program. Even with the challenges of families being ill with COVID and other seasonal viruses, this site has maintained capacity and home visit rates. Great Job Rappahannock Area!

CURRENT STAFF

POSITION:	FTE
Program Manager	
1. Melodie Jennings	1.0
Program Supervisor	
1. Martacelis Fuentes	1.0
2. Laurie Strother	1.0
TOTAL MANAGEMENT:	3.00
POSITION:	FTE
Family Resource Specialist	
1. Bryanda Monge-Vega	1.0
TOTAL ASSESSMENT STAFF:	1.00
POSITION:	FTE
Family Support Specialist	
1. Jennifer Berry	1.0
2. Janee Vennie	1.0
3. Carmen Lopez	1.0
4. Melissa Humphrey	1.0
5. Kathleen Fragosa	1.0
6. Lixlia Planell-Jones	1.0
7. Ana Janina Morales	1.0
8. Ivy Lee	1.0
TOTAL HOME VISITORS:	8.00

SCREENING AND ENGAGEMENT

Description of Eligibility Criteria (1-1.A): Parents residing in the City of Fredericksburg or the Counties of Caroline, King George, Spotsylvania, or Stafford (Planning District 16) who receive prenatal care through the Virginia Department of Health Rappahannock Area Health District and/or give birth at Mary Washington Hospital, Stafford Hospital, or Spotsylvania Regional Hospital.

SCREEN AND ASSESSMENT DATA CHART

DATA ANALYSIS DATES	FY20 07/19- 06/20	FY21 07/20- 06/21	FY22 07/21- 6/22	COMMENTS
Target Population/Births	2162	4421	4421	Data Source: DVH Data Year: 2020
Positive Screens	376	249	302	
Negative Screens	60	13	64	
TOTAL SCREENS	436	262	366	
% OF TARGET POPULATION SCREENED	20%	17%	12%	
Positive Assessments	126	116	137	
Negative Assessments	94	56	60	
TOTAL ASSESSMENTS	220	172	197	
% OF POSITIVE SCREENS ASSESSED	57.2%	67%	54%	
Declined Assessment	3	5	0	
Not Assessed for Other Reasons	86	3	0	
TOTAL SCREENS NOT ASSESSED	89	8	0	
Offered Home Visits	125	113	133	
Verbally Accepted Home Visits	111	101	101	
Completed 1st Home Visits	14	89	80	
HOME VISIT ACCEPTANCE RATE	88.8%	79%	60%	

Strengths and Challenges:

Healthy Families Rappahannock Area (HFRA) service a large community. The program serves all of District 16 in the state of Virginia. As the site is adjusting to in-person visits, they are doing the same in outreach and assessments. (1.1A) The program has reconnected with all previous referral sources and has developed new referral partnerships. During the visit, the site was at full capacity and has maintained capacity throughout the fiscal year. When speaking with the FRS, she stated that even with the program being at capacity she will still give families resources and information about the program as she feels the assessment is a part of the engagement process. The HFRA team has done a great job of getting the word out about the Healthy Families Program. They have done some exciting outreach within their

community. It shows in their data as they had an increase in self-referrals this past year. Some of the outreach the FRS has done this past year is visiting clinics that serve a large population of Hispanics, returning to the Mary Washington Hospital to complete screening, and going to the health department. (1.1B & 1.1C)

During the interview discussion with the FRS, we had a rich conversation on how she is implementing the FROG Scale. The FRS discussed how her process of intake happens once she receives the screening and the steps she takes to engage families in completing the FROG scale. Once a FROG scale is scheduled, the FRS explains that she always comes in with a warm hello and starts with an icebreaker so families can feel comfortable with her. She stated it takes about an hour to complete the assessment unless she has to do both parents (mom and dad). (1.2B) She stated her challenge has been engaging in conversation around domains 1 and 11 family environment and social connections. TA/QA Specialist did some TA support on how to ask follow-up and opened ended questions around those two domains. The overall quality of the FROG scale is uniform and has a great narrative of the families' stories. (2.1B). FRS talked about how she reflects on scoring and families' narratives with the supervisor during reflective supervision and states it is helpful. TA/QA Specialist reviewed the FROG assessment and the overall assessment looks great. The area of growth is scoring and more detailed information in a few domains where more information may have been needed to score more accurately. (The three that need more focus are Family Environment, Social Connections, and Stressful Childhood Experiences.) (2.1B)

This past year the site has seen an increase in the Afghan immigration population within the community. The site feels this is great and they are eager to support these families. They have found it to be more challenging in doing so. During the FRS and Supervision discussions, Afghan families are more likely to score low or refuse the services. An area of concern is when completing the FROG scale, FRS stated the mom doesn't speak any English only the dad. The dad will translate the question to the mom and then tell the FRS that everything is okay or good. The issue is FRS is not sure if there is a language barrier or communication barrier at this time. The site is working on finding ways to communicate with these families to be able to offer those services soon.

Next Steps:

Both FRS and Supervisor review the HFA FROG Scale Conversation Starters and FROG Scale Scoring Guide to gain more information around scoring and asking follow up question during assessment.

HOME VISITING

FAMILY SUPPORT WORKER CASELOAD CAPACITY

	6 month average 07/2022-12/2022	
Home Visitor (FTE)	Case Load	Case Weight
Jennifer B.	20.33	19.92
Carmen L.	21.50	21.81
Kathleen F.	22.17	24.25
Janina M.	23.67	22.00
Melissa H.	7.33	11.75
Ivy Lee	21.17	29.25
Lixlia P.	24.17	20.33
Janee V.	15.00	15.21
Program Totals:	155.40	164.52

HOME VISIT RATES

% OF FAMILIES RECEIVING AT LEAST 75% OF HOME VISITS DUE

HOME VISITOR	1ST QUARTER 07/01/2022 – 09/30/2022			2ND QUARTER 10/01/2022 – 12/31/2022			COMMENTS
	# of families	# of families with ≥75%	Quarterly Home Visit Rate	# of families	# of families with ≥75%	Quarterly Home Visit Rate	
Jenny B.	19	18	95%	16	14	88%	
Kathleen F.	23	18	78%	21	18	86%	
Melissa H.	10	10	100%	9	8	89%	
Ivy L.	20	17	85%	22	16	73%	
Carmen L.	19	15	79%	13	12	92%	
Ana M.	24	22	92%	23	23	100%	
Lixlia P.	22	22	100%	22	21	95%	
Janee V.	14	14	100%	17	15	88%	

PROGRAM TOTALS	151	136	90%	143	127	89%	
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PROGRESS TOWARD OBJECTIVES

BPS	Description	Based On	Met HFA Standard?	Met HFV Evaluation Objective?	Comments
6-3.D	CHEERS Check In	VDSS Quarterly Report	Yes	Yes	
6-5.B	ASQ-3	VDSS Quarterly Report	Yes	Yes	
6-5.C	ASQ-SE	Review	Yes		
7-2.B & C	Immunization rates	VDSS Quarterly Report	Yes	Yes	
7-4.B	Prenatal depression screening	Review	Yes		TA reviewed 12 screening
7-4.C	Postnatal depression screening	Review	Yes		TA reviewed 8 screening
7-4.D	Depression screening for subsequent births	Review	N/A		None reviewed.

Strengths and Challenges:

Healthy Families Rappahannock Area (HFRA) FSSs have done a great job keeping families engaged this past year. You will see in the above home visit rate chart; in the past two-quarters home visits rates have been at or over 80% and staff has maintained their capacity rates as well. (4.2B) During the interview discussion with FSSs, the team talked about how they engage families and build trust with families. During the 1st home visit when they are completing enrollment paperwork, one FSS talked about how she brings them a goodie bag and resources that will support the family. One FSS talked about how she meets them at their level and allows them to lead the visit. Another talked about how they tell their personal story to help families feel comfortable. In the 1st quarter, the site was at 100% home visit rates! Great Job! They had a

few challenges in 2nd quarter as the families were ill with COVID and other flu-like illnesses. Also, two FSSs have been out on Medical Leave, yet the team has stepped in and supported the families even though all staff is at capacity. (4.2B) TA/QA Specialist spoke with FSSs about Family Services Plans (FSP) and how they are implementing them with families. FSS talked about how they first discuss FSP with supervisors weekly. They talked about when talking to families about the FSP they do it naturally and organically within the visit. They use celebration, talk about the success of families, and meeting their goals. FSSs talked about many of the goals they have developed with families are strategies that come from the FSP. FSS talked about how they work to make sure goal setting and FSP goes hand in hand with each other. TA/QA Specialist reviewed FSP and goals in CASIE, the FSS uses a tool called reachable goals to help families break down the goal process so families can have more success in meeting milestones from the FSP and their personal goals that may not be a part of the FSP. (6.1C & 6.2B). The area of growth for the HFRA program FSS staff is the use of reflective strategies within CHEERS documentation. TA/QA Specialist reviewed six months of home visit logs from each FSS. The trend is the overuse of Accentuate the Positive (ATP). In reviewing the home visit logs, there were observation times where reflective strategies such as explore and wonder, and or problem talk could have been used. During the shadowing visit, it was observed reflective strategies are been used, but the FSSs have not documented them regularly. (6.3B & 6.3C) Yet, the FSS has had many successes with families this past year. Here of a few of the family's successes: (1) A teen mom completed high school this year. (2) A mom attending college. (3) A mom and dad engaging with the target child, an increase of dad engagement with family to assist mom with cooking and cleaning, feeding the baby, and being active in PCI at home visits. TA/QA Specialist reviewed the transition planning of several families. The FSS team does a good job of having conversations with families about their transition out of the program. During the discussion, one FSS talks about how she has contacted the local Head Start Program, and when she has a family who is ready for the transition, she helps them start the enrollment process into the program. The team talks about how they want to make sure families have success when they leave the program. (4.4B)

The team also talked about the changes in the diversity of the families. The FSS team talks about how they are having more conversations around DEI, racism, and cultural traditions. They are also participating in the deep hard conversation around race. I give kuddos to this team as they are doing the work to not only support families but they do very well working together as a team.

Next Steps:

Refresher training on CHEERS and Reflective Strategies.

SUPERVISION

SUPERVISION FREQUENCY AND DURATION

MARTACELLIS FUENTES SIX MONTH AVERAGE: 07/22 – 12/22				
HOME VISITOR	SESSIONS EXPECTED	SESSIONS RECEIVED @ REQUIRED DURATION	SUPERVISION RATE	REQUIRED TIME PER SESSION
Ana J.M.	23	22	96%	1 hr. 30 min.
Ivy L.	25	24	96%	1 hr. 30 min.
Lixlia P.J.	24	22	92%	1 hr. 30 min.
Bryanda M.V.	25	24	96%	1 hr. 30 min.
PROGRAM AVERAGES	97	92	95%	2.00

LAURIE STROTHER SIX MONTH AVERAGE: 07/22 – 12/22				
HOME VISITOR	SESSIONS EXPECTED	SESSIONS RECEIVED @ REQUIRED DURATION	SUPERVISION RATE	REQUIRED TIME PER SESSION
Jennifer B.	26	24	92%	1 hr. 30 min.
Carmen L.	18	17	94%	1 hr. 30 min.
Kathleen F.	25	24	96%	1 hr. 30 min.
Janee V.	26	24	92%	1 hr. 30 min.
Melissa H.	16	15	94%	1 hr. 30 min.
PROGRAM AVERAGES	111	104	94%	2.00

Strengths and Challenges:

The HFRA program supervisors have done a great job of building their teams. Even though they are under two different program structures (VDSS & MIECHV) they work seamlessly with each other. As you can see both supervision frequency and duration rates are above 90%. (12.1B) Excellent Job! During our interview conversation, the supervisors talked about their processes of reflective supervision and how they support the direct staff. Supervision is happening weekly, they both talked about how they have an open-door policy and they make sure that staff feels welcome and open to express how they are feeling and how they feel about the work with families. Area of growth is how they are documenting in supervision notes, can be more reflective, and the use of more reflective strategies around CHEERS and how FSS/FRS is processing the work. (6.3E) In shadowing one supervisor it was reflective and clinical throughout the supervision. (12.2B) There was active listening, and open-ended questioning and ideas were

being expressed. The supervisor works with staff on being reflective of the work they are doing but also reflective on how they are feeling and their overall well-being. The program is at full capacity. The program supervisors understand that many of the families they work with are high-risk. The focus is not only to help with PCI and bonding but to help some families with the case management piece as they find more families need more help just to make it. Overall, I think the program does a great job of finding resources for the families they serve. (8.2B) When talking with supervisors, they weekly check FSP to see who needs updates and those who need to have one developed. The supervisors do a good job of communicating with FSS the importance of the FSP and the development of family goals. (6.1B) During supervision shadowing, I observe the supervisor talking with FSS about level changes and caseload as they start to look at families who are ready to move from level 1 to level 2. (4.2C).

The Program Manager has done a great job of developing her management team. They work cohesively together as they are all back in the office. I enjoyed seeing how they communicate with each other during the site visit. In discussion with all three managers, they discussed how things are going with the program and where they saw challenges. I observed and reviewed documents program (analysis) on how and when the site is faced with challenges, they work as a team to find solutions and implement them. The site has taken major steps in DEI. As their CQI/PDSA is focusing on DEI and the program has taken the plunge of having the hard conversations around racism by starting the work around the workbook, "The Racial Healing Handbook" that I suggested to them last year. The program has even partnered with an outside DEI person to facilitate the conversation. Great Job!

Next Steps:

Refresher training on CHEERS and Reflective Strategies.

TRAINING

Strengths and Challenges:

0 out of 0 staff have completed the required Child Abuse and Neglect orientation training (10-2.D Safety Standard).

0 out of 0 new staff completed their CORE training within 6 months of hire or when they are scheduled to complete (10-4.A-C; Essential Standards).

Any Program Manager hired or after January 1, 2018 **DID** complete Implementation Training within 18 months of hire (10-5). 12 out of 12 staff have completed the required annual Child Abuse and Neglect training (11-4.B).

8 out of 8 staff have completed required wrap-around training topics within 3 months of hire (11-1.A-D)

8 out of 8 staff have completed required wrap-around training topics within 6 months of hire (11-2.A-G)

8 out of 8 staff have completed required wrap-around training topics within 12 months of hire (11-3.A-E)

12 out of 12 staff with at least one year tenure have received ongoing training which takes into account the individual's knowledge and skill base (11-4.A). The site does have a fully developed Orientation and Training Plan which includes "Stop-Gap" Training elements for each staff role (10-1). Yes.

Next Steps:

None at this time.

QUALITY MANAGEMENT

Strengths and Challenges:

The site does have an *Annual Quality Assurance Plan (QAP)*, which they update annually (GA-2.A); its most recent iteration is dated July 31, 2022.

The site has been actively participating in Continuous Quality Improvement efforts (GA-2.B) and submitting at least one PDSA cycle per quarter (as required by the VDSS Budget Assurances).

The site does have a *Family Satisfaction Survey*, which they update annually (5-4.A); its most recent iteration is dated November 1, 2021.

The site does have a *Staff Satisfaction Survey*, which they update annually (5-4.A); its most recent iteration is dated August 22, 2022. The site also has a *Staff Retention & Satisfaction "analysis" which they update every other year (9-4); its most recent iteration is dated August 22, 2022.*

The site does have an *Acceptance Rate Analysis*, which they update every two years (1-4.B); its most recent iteration is dated January 28, 2021.

The site does have a *Retention Analysis*, which they update every two years (3-4.B); its most recent iteration is dated October 19, 2021.

The site does have a *Equity Plan*, which they update every two years (5-4.B Essential Standard); its most recent iteration is dated June 30, 2022. This was presented to the site's advisory/governance board; strengths and strategies for growth were identified, discussed, and implemented (5-4.C).

Any reports made of suspected CAN (GA-4.B Safety Standard)

Next Steps:

None at this time.

POLICIES AND PROCEDURES

Strengths and Challenges:

The site has not made changes to their policies and procedures since the last site visit. These were reviewed by the TA/QA on March 3, 2022.

The site's policies and procedures are in alignment with the 8th Edition *Healthy Families America Best Practice Standards* (GA-6).

The site's Governing Board has worked as an effective team to plan and develop site policy and procedures prior to finalization (GA-1.C).

The site is in compliance with 6 out of 6 *Healthy Families America's Safety Standards* and 16 out of 16 *Essential Standards*.

Next Steps:

None at this time.

GOVERNANCE AND ADMINISTRATION

Strengths and Challenges:

The site does have adequate funding to meet the program's basic needs for the coming year and has 11 funding streams.

During the course of the site visit a meeting was conducted with Michelle Wagaman, Prevention Services Coordinator, an representative from the host agency.

Next Steps:

None at this time.

ASSURANCES FOR GENERAL ASSEMBLY

Strengths and Challenges:

The site has met all the required budget assurances for Virginia Department of Social Services.

0 out of 0 staff met their job qualifications (9-1.D Essential Standard) and 0 out of 0 have passed required background and Child Protective Services record checks. (9-3.B Safety Standard).

The Program Manager has attended 4 out of 4 Director's meetings held so far. Attendance at all meetings is required.

The site fully participates in the statewide evaluation and, per their most recent VDSS Annual Report, met or exceeded 16 out of 17 statewide objectives for Fiscal Year 2022.

The site's practices are in compliance with Federal Equal Opportunity Employment (EOE) laws.

The site is fully accredited by Healthy Families America as part of a multi-site system.

HEALTHY FAMILIES AMERICA ASSURANCES

Strengths and Challenges:

- All policies and procedures are aligned and in compliance with HFA Best Practices (see *Policies and Procedures*).
- All required background check reports have been completed for all new hires (see *Assurances for General Assembly*).
- There is a full training plan in place (see *Training*).
- A staff retention review was completed if needed.
- A staff satisfaction survey was completed and improvement strategies are in place as needed (see *Quality Management*).
- Transition Plans for families preparing to leave the program are in place and are used as tools to prepare families for graduation.
- The site adheres to all Safety and Essential standards (see *Policies and Procedures*).
- All new hires meet *HFA Best Practice Standards*.

Site utilizes a depression screening tool with all enrolled families at required intervals.

Respectfully submitted,

Hadith Zalzala
TA/QA Specialist, Healthy Families Virginia

Date initially submitted: February 17, 2023

Date finalized: February 21, 2023

**Rappahannock Area Kids on the Block
City Arts Commission Grant**

The Rappahannock Area Kids on the Block (RAKOB) plans to submit an application to the City of Fredericksburg for the Government Challenge Grant. It is a matching grant program that combines local monies with state monies to support 501c3 Arts Organizations with operating funds. (The Rappahannock Area Community Services Board is not responsible for providing any additional funding.)

The Fredericksburg Arts Commission will review all applications before submitting the selected grant applications to the Virginia Commission for the Arts in April. If included, RAKOB will receive the funds in fall 2023.

The program received notification on October 19, 2022 of an award in the amount of \$1,100 for the 2023 grant cycle.

FY 2014	\$1,400
FY 2015	\$1,250
FY 2017	\$480
FY 2018	\$1,430
FY 2019	\$1,500
FY 2021	\$1,050
FY 2022	\$2,000
FY 2023	\$1,100
Total of Awards:	\$10,210



The Rappahannock Area Kids on the Block

More than a puppet show!

Our mission is to educate and expose youth to cultural, health and safety topics while promoting awareness of community issues through the inspiration of bunraku stylized puppetry arts.

For more than thirty years the Rappahannock Area Kids on the Block, (RAKOB) have been performing educational topics in the bunraku style of puppetry for the City of Fredericksburg Virginia and the surrounding communities. RAKOB strives to explore this popular Japanese style of puppet theater with a very unique selection of child like hand crafted puppets, who role play life stories using props and realistic movements.

RAKOB productions layer stories with diverse topics addressing a multitude of contemporary cultural and societal issues impacting today's youth. Scripts utilize relevant youth language and attitudes to immerse audiences in the puppet scenarios. Each puppet character is portrayed by a trained, volunteer puppeteer/actor who brings each memorable character to life during the forty-five minute production accompanied by music and singing.

In addition to public and private performances, RAKOB holds educational workshops for youth and adults interested in puppet arts, anyone ages ten and older can learn the RAKOB bunraku stylized puppet performing training to become RAKOB troupe puppeteer.

Established in 1991 as a 501.3.c disabilities, diversity awareness and arts education program for youth. RAKOB uses puppets to role play positive solutions to contemporary problems.

RAKOB's scripts cover 32 topics using 24 puppet characters and performing to 3000 plus individuals annually in Fredericksburg Virginia and the surrounding communities at no cost. We believe that by providing our programs to nonprofit community based organization's such as the YMCA, Stafford Junction, Parks and Recreation and to "AT RISK" under served neighborhoods such as Garrison Woods, and Hazel Hill, we can inspire a young person's interest in arts and music education while teaching important life lessons.

***Rappahannock Area Kids on the Block, Inc.
600 Jackson Street Fredericksburg, Virginia 22401
540-940-2325***

<https://rappahannockareacsb.org/portfolio-view/rappahannock-area-kids-on-the-block/>

FDA Approves First Over-the-Counter Naloxone Nasal Spray

On March 29, 2023, the U.S. Food and Drug Administration approved the first nonprescription, “over-the-counter” naloxone nasal spray, Narcan (4 milligram (mg) naloxone hydrochloride nasal spray).

Naloxone is a medicine that can rapidly reverse an opioid-related overdose. It has been shown to be a critical tool to prevent fatal overdoses, connect more people to treatment for substance use disorder, and save lives. This action to make this naloxone product available without a prescription will pave the way for the life-saving medication to be sold directly to consumers in places like drug stores, convenience stores, grocery stores and gas stations, as well as online.

The timeline for availability and price of this OTC product is determined by the manufacturer. The FDA will work with all stakeholders to help facilitate the continued availability of naloxone nasal spray products during the time needed to implement the Narcan switch from prescription to OTC status, which may take months. Other formulations and dosages of naloxone will remain available by prescription only.

Narcan nasal spray was first approved by the FDA in 2015 as a prescription drug. In accordance with a process to change the status of a drug from prescription to nonprescription, the manufacturer provided data demonstrating that the drug is safe and effective for use as directed in its proposed labeling. The manufacturer also showed that consumers can understand how to use the drug safely and effectively without the supervision of a healthcare professional. The application to approve Narcan nasal spray for OTC use was granted priority review status and was the subject of an advisory committee meeting in February 2023, where committee members voted unanimously to recommend it be approved for marketing without a prescription.

RACSB established a Memorandum of Agreement with the Virginia Department of Health (VDH) to begin dispensing Naloxone in February 2020. Since that time, we have dispensed 1,964 doses of Naloxone.



https://www.fda.gov/news-events/press-announcements/fda-approves-first-over-counter-naloxone-nasal-spray?utm_medium=email&utm_source=govdelivery

April 2023 Personnel Committee Meeting Minutes

Call to order

A meeting of the Personnel Committee of Rappahannock Area Community Services Board was held at 600 Jackson Street on **April 11, 2023**. *Attendees included:* Ken Lapin, Jacob Parcell, Glenna Boerner, Matt Zurasky, Claire Curcio, Nancy Beebe, Sarah Ritchie, Amy Jindra, Joe Wickens, Amy Umble, Michelle Wagaman, Jacque Kobuchi, Michelle Runyon, Tina Cleveland, Carley Hurd, Nadine Mayo, and Brandie Williams. *Absent:* Linda Carter, Susan Gayle, Melissa White, Carol Walker and Greg Sokolowski.

March 2023 Retention Report

Michelle Runyon reported that Human Resources processed a total of 12 employee separations, resulting in a Retention Rate of 98.00% for the month of March 2023.

March 2023 EEO Report and Recruitment Update

Michelle Runyon told the Committee that RACSB received 106 applications through March 31st. This is an increase of 7.07% to the month of February 2023, and an increase of 47.22% when compared to the month of March 2022.

March 2023 Retention Report

Michelle Runyon reported to the Committee that recruitment efforts are going well, there are radio advertisements currently playing on four radio stations, as well as a spot on News Talk with Ted Schubel.

Adjournment

The meeting adjourned at 1:30 PM



Voice/TDD (540) 373-3223 | Fax (540) 371-3753

NOTICE

To: Personnel Committee: Susan Gayle, Linda Carter, Glenna Boerner, Claire Curcio, Sarah Ritchie, Greg Sokolowski , Carol Walker

From: Joseph Wickens
Executive Director

Subject: Personnel Committee Meeting
April 11, 2023, 1:00 PM
600 Jackson Street, Board Room 208. Fredericksburg, VA

Date: April 06, 2023

A Personnel Committee meeting has been scheduled for Tuesday, April 11, 2023 at 1:00 PM. The meeting will be held at 600 Jackson Street, Board Room 208, Fredericksburg, VA 22401.

Looking forward to seeing you on April 11, 2023 at 1:00 PM.

Cc: Susan Gayle, Chairperson

RAPPAHANNOCK AREA COMMUNITY SERVICES BOARD

Personnel Committee Meeting

April 11, 2023 – 1:00 PM

600 Jackson Street, Room 208 Fredericksburg, VA 22401

Agenda

- I. March Retention Report, *Runyon*3
- II. March EEO Report, *Runyon*7
- III. Other Business, *Gayle*



MEMORANDUM

To: Joe Wickens, Executive Director

From: Michelle Runyon, Human Resources Director

Date: April 4, 2023

Re: Summary – Retention Report – **March 2023**

Human Resources processed a total of **12** employee separations for the month of **March, 2023**. Ten of the separations were voluntary and 2 were terminations for cause, all 12 employees were full-time.

Five resignations were submitted due to other employment & two were submitted due to personal reasons, two were due to job abandonment and 1 moved. We processed 3 additional terminations, one retired and two didn't complete NEO.

According to the attached report, the Retention Rate for **March** was 98.00% and the turnover rate was 2.0%. Annualized turnover comparison is included.

RACSB RETENTION & TURNOVER REPORT
Feb-23

ORGANIZATIONAL UNIT	NUMBER OF TERMS	VOLUNTARY	INVOLUNTARY	EXPLANATION
Administrative	0	1	0	Other Employment
Unit Totals	0	1	0	
Clinical Services	0	1	0	Other Employment
Unit Totals	0	1	1	Cause
Community Support Services	0	0	1	Cause
	0	3	0	Other Employment
	0	2	0	Personal
	0	2	0	Job Abandonment
		1	0	Moving
Unit Totals	0	8	1	
				1 Exhausted Leave
Grand Totals for the Month	0	10	2	

Total Employees for the Month	600
Retention Rate	98.00%
Turnover Rate	2.00%

Total Separations	12
Part-time Separations	0.00%
Full-time Separations	100.00%

RACSB Turnover 2020

<u>Employees</u>	<u>Jan-20</u>	<u>Feb-20</u>	<u>Mar-20</u>	<u>Apr-20</u>	<u>May-20</u>	<u>Jun-20</u>	<u>Jul-20</u>	<u>Aug-20</u>	<u>Sep-20</u>	<u>Oct-20</u>	<u>Nov-20</u>	<u>Dec-20</u>	<u>2020 Year End</u>
Average Total Positions	624	624	624	624	624	624	624	624	624	624	624	624	624
Monthly Terminations*	8	3	10	7	4	7	11	16	11	17	12	6	112
Turnover by Month YTD	1.28%	0.48%	1.60%	1.12%	0.64%	1.12%	1.76%	2.56%	1.76%	2.72%	1.92%	0.96%	17.95%
Cumulative Turnover YTD	0.16%	1.76%	3.37%	4.49%	5.13%	6.25%	8.01%	10.58%	12.34%	15.06%	16.99%	17.95%	17.95%
Average % Turnover per Month YTD	0.16%	0.88%	1.12%	1.12%	1.03%	1.04%	1.14%	1.32%	1.37%	1.51%	1.54%	1.50%	1.50%

*Monthly Terminations Do Not Include: Employee Retirements, Employees Not Able to Return from Disability Leave, Employees Not Completing NEO, Interns/Volunteers

RACSB Turnover 2021

<u>Employees</u>	<u>Jan-21</u>	<u>Feb-21</u>	<u>Mar-21</u>	<u>Apr-21</u>	<u>May-21</u>	<u>Jun-21</u>	<u>Jul-21</u>	<u>Aug-21</u>	<u>Sep-21</u>	<u>Oct-21</u>	<u>Nov-21</u>	<u>Dec-21</u>	<u>2021 Year End</u>
Average Total Positions	601	601	601	601	601	601	601	601	601	601	601	601	601
Monthly Terminations*	10	4	6	13	13	13	13	6	13	11	11	15	128
Turnover by Month YTD	1.66%	0.67%	1.00%	2.16%	2.16%	2.16%	2.16%	1.00%	2.16%	1.83%	1.83%	2.50%	21.30%
Cumulative Turnover YTD	0.17%	2.33%	3.33%	5.49%	7.65%	9.81%	11.97%	12.97%	15.13%	16.96%	18.79%	21.29%	21.29%
Average % Turnover per Month YTD	0.17%	1.16%	1.11%	1.37%	1.53%	1.64%	1.71%	1.62%	1.68%	1.70%	1.71%	1.94%	1.94%

*Monthly Terminations Do Not Include: Employee Retirements, Employees Not Able to Return from Disability Leave, Employees Not Completing NEO, Interns/Volunteers

RACSB Turnover 2022

<u>Employees</u>	<u>Jan-22</u>	<u>Feb-22</u>	<u>Mar-22</u>	<u>Apr-22</u>	<u>May-22</u>	<u>Jun-22</u>	<u>Jul-22</u>	<u>Aug-22</u>	<u>Sep-22</u>	<u>Oct-22</u>	<u>Nov-22</u>	<u>Dec-22</u>	<u>2022 Year End</u>
Average Total Positions	600	600	600	600	600	600	600	600	600	600	600	600	600
Average Number of PRN's	43	43	42	41	39	38	38	43	42	42	45	45	42
Monthly Terminations*	11	13	11	7	8	16	17	13	13	9	5	2	125
Turnover by Month YTD	1.83%	2.17%	1.83%	1.17%	1.33%	2.67%	2.83%	2.17%	2.17%	1.50%	0.83%	0.33%	20.83%
Cumulative Turnover YTD	0.17%	4.00%	5.83%	7.00%	8.33%	11.00%	13.83%	16.00%	18.17%	19.67%	20.50%	20.83%	20.83%
Average % Turnover per Month YTD	0.17%	2.00%	1.94%	1.75%	1.67%	1.83%	1.98%	2.00%	2.02%	2.19%	2.05%	1.89%	1.89%

*Monthly Terminations Do Not Include: Employee Retirements, Employees Not Able to Return from Disability Leave, Employees Not Completing NEO, Interns/Volunteers

RACSB Turnover 2023

<u>Employees</u>	<u>Jan-23</u>	<u>Feb-23</u>	<u>Mar-23</u>	<u>Apr-23</u>	<u>May-23</u>	<u>Jun-23</u>	<u>Jul-23</u>	<u>Aug-23</u>	<u>Sep-23</u>	<u>Oct-23</u>	<u>Nov-23</u>	<u>Dec-23</u>	<u>2023 Year End</u>
Average Total Positions	600	600	600	600	600	600	600	600	600	600	600	600	600
Monthly Terminations*	11	9	12										32
Turnover by Month YTD	1.83%	1.50%	2.00%										5.33%
Cumulative Turnover YTD	0.17%	3.33%	5.33%										0.00%
Average % Turnover per Month YTD	0.17%	1.67%	1.11%										0.00%

*Monthly Terminations Do Not Include: Employee Retirements, Employees Not Able to Return from Disability Leave, Employees Not Completing NEO, Interns/Volunteers

RECRUITMENT REPORT 2023

MONTHLY RECRUITMENT	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	TOTAL YTD
External Applicants Hired:													
Part-time	7	5	3										12
Full-time	6	10	13										16
Sub Total External Applicants Hired	13	15	16										28
Internal Applicants Moved:													
Full-time to PRN As Needed	4	3	3										7
Full-time to Part-time		1											1
Part-time to PRN As Needed													0
Part-time to Full-time													0
PRN As Needed to Part-time		1											1
Lateral Transfer		1											1
Non-Lateral Change in Position													0
Promotion	1	1	7										2
Temporary to Regular													0
PRN As Needed to Full-Time													0
Temporary Promotion													0
Intern to Full-time	1												1
Sub Total Internal Applicant Moves	6	7	10										13
													0
Total Positions Filled:	19	22	34										41
Total Applications Received:													
Actual Total of Applicants:	75	62	83										137
Total External Offers Made:	20	15	18										35
Total Internal Offers Made:	9	7	18										16



Office of Human Resources
600 Jackson Street • Fredericksburg, VA 22401 • 540-373-3223
RappahannockAreaCSB.org

MEMORANDUM

To: Joe Wickens, Executive Director

From: Teresa McDonnel, Human Resources Specialist

Date: April 4, 2023

Re: Summary – March 2023 EEO Report and Recruitment Update

RACSB received **106** applications through March 31, 2023. This is an **increase** of **7.07%** compared to the month of February 2023, and an **increase** of **47.22%** when compared to the month of March 2022.

RACSB received **1,008** resumes and advertised **22** positions through Indeed for **March 2023**.

Of the applications received, 45 applicants listed the RACSB applicant website as their recruitment source, 35 stated employee referrals as their recruitment source, and 22 listed Indeed.com as their recruitment source.

According to the attached list, there are currently **136** open positions. New positions account for **5** of the open positions.

A summary is attached indicating external applicants hired, internal applicants moved, and actual number of applicants applying for positions in the month of **March 2023**.

EEO Report 2023

APPLICANT DATA	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23
Female	35	24	31	45	30	41	35	29	25	22	46	33	51
Male	11	3	13	11	9	11	12	4	2	8	5	27	6
Not Supplied	26	30	25	33	44	38	36	35	29	41	54	39	49
Total	72	57	69	89	83	90	83	68	56	71	105	99	106
ETHNICITY													
Caucasian	13	13	22	30	19	30	28	14	17	9	39	27	31
African American	27	16	17	24	17	18	19	16	7	19	18	26	25
Hispanic	5	5	5	3	4	5	2	5	1	2	8	7	7
Asian		1	1			1		1	2	1	1	3	2
American Indian	1		1	1	1		1	1					
Native Hawaiian												2	
Two or More Races													
RECRUITMENT SOURCE													
Newspaper Ads								1		4	2	3	
RACSB Website	33	27	28	39	28	31	28	26	25	27	48	53	45
RACSB Intranet	5	2	5	7	3	6	6	2	1	2	2	7	4
Employee Referrals	15	23	18	30	29	30	27	23	19	22	37	26	35
Radio Ads	1		1			4			1				
Indeed.com	17	9	11	15	11	13	24	13	9	16	19	9	22
VA Employment Commission	3	2	7	2	2	1			2	4		2	2
Monster.com													
Other -	3		3	4	5	2	2	2	2	2	1	6	1
Colleges/Handshake				1									1
Facebook											1		
Multi Site Search				1	1	2	2						1
NHSC													
Linked In						1							
Goodwill referral													
Zip Recruiter							1	3	1		2	5	3
Job Fair	1			1			2		2	2	2	2	1
Total # of Applicants	59	47	52	77	59	72	64	57	42	60	75	62	83

Open Positions Report - March 31, 2023						
Date Posted	Position No.	Position Title	Location	RU	Full-time/Part-time	
5/27/2022	127-2022	ADMIN	Property Maintenance Technician	Fredericksburg	1000 FT	
1/24/2023	016-2023	ADMIN	Finance Office Associate	Fredericksburg	1000 PT	
2/17/2023	035-2023	ADMIN	IT Specialist (PC & Network Support)	Fredericksburg	1000 FT	
3/21/2023	069-2023	ADMIN	Coordinator, Information Technology	Fredericksburg	1000 FT	
3/28/2023	079-2023	ADMIN	Accounting Specialist	Fredericksburg	1000 FT	
3/28/2023	078-2023	ADMIN	Accounts Payable Technician	Fredericksburg	1000 FT	
3/28/2023	063-2023	ADMIN	Landscape Technician 1 - Seasonal	Fredericksburg	1100 FT	
				7		
1/10/2022	003-2022	CLINICAL	Psychiatrist	Fredericksburg	FT	
3/27/2023	071-2023	ADMIN	Office Associate II	Fredericksburg	1100 FT	
3/27/2023	072-2023	ADMIN	Office Associate II	Fredericksburg	1100 FT	
3/29/2023	080-2023	ADMIN	Office Associate II	Fredericksburg	1100 FT	
7/20/2022	183-2022	CLINICAL	Emergency Services Therapist - Overnight	Fredericksburg	2000/4000 FT	
1/20/2023	005-2023	CLINICAL	Emergency Services Therapist	Fredericksburg	2000/4000 FT	
3/28/2023	076-2023	CLINICAL	Asst. Coordinator, Emergency Svcs - Comm Based	Fredericksburg	2000/4000 FT	
6/9/2021	123-2021	CLINICAL	Child/Adolescent ES Therapist	Fredericksburg	2070 FT	
1/20/2023	003-2023	CLINICAL	Child/Adolescent ES Therapist	Fredericksburg	2070 FT	
1/20/2023	004-2023	CLINICAL	Child/Adolescent ES Therapist	Fredericksburg	2070 FT	
9/20/2021	265-2021	CLINICAL	Peer Recovery Specialist MH	Fredericksburg	2200 FT	
1/28/2022	030-2022	CLINICAL	MH Therapist (Jail Based)	RRJ Stafford	2200-4200/6430 FT	
9/27/2022	246-2022	CLINICAL	MH Nurse - LPN/RN	Outpatient Clinics	2201 FT	
6/1/2022	125-2022	CLINICAL	MH Therapist	Caroline	2210 FT	
11/18/2022	298-2022	CLINICAL	MH/SA Outpatient Therapist	Caroline	2210 FT	
12/27/2022	323-2022	CLINICAL	Office Manager I	Caroline	2210 FT	
3/9/2023	048-2023	CLINICAL	MH/Substance Abuse Therapist	Fredericksburg	2220/4200/6430 FT	
8/22/2022	227-2022	CLINICAL	Child/Adolescent Therapist	Stafford	2200/6430 FT	
1/28/2022	029-2022	CLINICAL	MH Therapist	Stafford	2250/6430 FT	
1/5/2023	325/2022	CLINICAL	MH/Substance Abuse Therapist	Stafford	2250/4250 FT	
4/15/2022	106-2022	CLINICAL	Child/Adolescent Therapist (Safe Harbour)	Spotsylvania	2400 FT	
9/21/2021	199-2021	CLINICAL	Family Support Peer	Spotsylvania	2500 PT	
7/8/2022	172-2022	CLINICAL	Child/Adolescent MH Case Manager	Stafford	2500 FT	
8/30/2022	240-2022	CLINICAL	Senior Child & Adolescent Case Manager	Stafford	2500 FT	
7/23/2021	200-2021	CLINICAL	Therapist/Office On Youth	Fredericksburg	4200 PT/FT	
12/1/2022	306-2022	CLINICAL	Substance Abuse Therapise (P&P)	RRJ Stafford	4200 FT	
7/13/2021	174-2021	CLINICAL	S. A. Therapist	Fredericksburg	4220 FT	
3/30/2022	092-2022	CLINICAL	S.A. Therapist, Women's Services	Spotsylvania	4220 FT	
1/26/2021	350-2021	CLINICAL	SA Therapist, Women's Services	Fredericksburg	4260 FT	
1/20/2023	006-2023	CLINICAL	SA Peer Recovery Specialist	RRJ	4261 FT	
4/28/2021	083-2021	CLINICAL	MH/SA Therapist - Detention Based	RRJ	4290 FT	
3/24/2021	056-2021	CLINICAL	SA Therapist/Case Manager	Fredericksburg	4296 FT	
8/11/2022	217-2022	CLINICAL	Project LINK Specialist, SUD	RC	4970 FT	
2/24/2023	030-2023	CLINICAL	MH Therapist - Intakes	Fredericksburg	6430 FT	
				35		
3/3/2023	043-2023	CSS	Coordinator	Crisis Stabilization	2770 FT	
3/15/2023	059-2023	CSS	Therapist	Crisis Stabilization	2770 FT	
6/10/2022	148-2022	CSS	Nurse Manager - RN	Crisis Stabilization	2770 FT	
7/15/2022	182-2022	CSS	MH Nurse - RN/LPN	Crisis Stabilization	2770 FT	
9/9/2022	231-2022	CSS	MH Nurse - RN/LPN	Crisis Stabilization	2770 FT	
9/13/2022	253-2022	CSS	MH Nurse - RN/LPN	Crisis Stabilization	2770 FT	
12/28/2022	321-2022	CSS	MH Nurse - RN/LPN	Crisis Stabilization	2770 FT	
12/28/2022	322-2022	CSS	MH Residential Specialist	Crisis Stabilization	2770 FT	
2/17/2023	034-2023	CSS	MH Residential Specialist	Crisis Stabilization	2770 FT	
3/15/2023	057-2023	CSS	MH Residential Specialist	Crisis Stabilization	2770 FT	
3/15/2023	058-2023	CSS	MH Residential Specialist	Crisis Stabilization	2770 FT	
12/1/2022	303-2022	CSS	Cook	Crisis Stabilization	2770 FT	
12/28/2022	320-2022	CSS	Peer Recovery Specialist	Crisis Stabilization	2770 FT	
				13		
12/28/2022	318-2022	CSS	Psychoosocial Advocate	Kenmore Club	2680 FT	
1/30/2023	019-2023	CSS	MH Supv Apartment Asst. Mgr	Lafayette	2786 FT	
12/21/2021	345-2021	CSS	MH Residential Counselor	Lafayette	2786 PT	
8/12/2022	220-2022	CSS	MH Residential Counselor II	Home Rd	2778 FT	
7/11/2022	170-2022	CSS	MH Residential Counselor I	Home Rd	2778 FT	
12/1/2022	305-2022	CSS	Office Associate II - ACT South	401 Bridgewater	2372 FT	
3/15/2023	060-2023	CSS	Develplmental Svcs Support Coordinator	River Club	3400 FT	
8/30/2022	242-2022	CSS	Develplmental Svcs Support Coordinator	Caroline	3400 FT	
5/24/2022	129-2022	CSS	Develplmental Svcs Support Coordinator	Stafford	3400 FT	

Date Posted	Position No.	Position	Position Title	Location	RU	Full-time/Part-time
8/17/2022	225-2022	CSS	Infant/Child Support Coordinaoor	PEID		3500 FT
8/1/2022	309-2021	CSS	Speech/Language Pathologist	PEID		3910 FT
2/1/2023	023-2023	CSS	Office Associate II	PEID		3910 FT
					12	
3/21/2023	064-2023	CSS	Horticulture Specialist	RAAI		Split FT
2/17/2023	032-2023	CSS	Direct Support Professional - Day Support	RAAI KH		3652 FT
3/9/2023	049-2023	CSS	Direct Support Professional - Day Support	RAAI KH		3652 FT
3/28/2023	074-2023	CSS	Direct Support Professional - Day Support	RAAI KH		3652 FT
3/28/2023	077-2023	CSS	Direct Support Professional - Day Support	RAAI KH		3652 FT
6/24/2021	158-2021	CSS	Direct Support Professional - Day Support	RAAI KH		3652 PT
6/24/2021	159-2021	CSS	Direct Support Professional - Day Support	RAAI KH		3652 PT
7/26/2021	196-2021	CSS	Direct Support Professional - Day Support	RAAI KH		3652 PT
2/9/2022	046-2022	CSS	Direct Support Professional - Day Support	RAAI KH		3652 PT
2/6/2022	308-2022	CSS	Direct Support Professional - Day Support	RAAI KH		3652 PT
3/20/2023	066-2023	CSS	Direct Support Professional - Day Support	RAAI KG		3653 PT
3/20/2023	056-2023	CSS	Direct Support Professional - Day Support	RAAI Spotsylvania		3654 PT
1/13/2023	007-2023	CSS	Direct Support Professional - Day Support	RAAI Stafford		3655 FT
3/28/2023	075-2023	CSS	Direct Support Professional - Day Support	RAAI Stafford		3655 FT
3/8/2023	046-2023	CSS	Direct Support Professional - Day Support	RAAI Stafford		3655 PT
1/6/2023	326-2022	CSS	Direct Support Professional - ICF Team	RAAI KH		3656 FT
7/11/2022	174-2022	CSS	Direct Support Professional - Day Support	RAAI ICF		3656 PT
					18	
3/21/2022	079-2022	CSS	Direct Support Professional - ICF	Wolfe Street ICF		3771 FT
7/27/2020	115-2020	CSS	ICF Nurse - LPN	Wolfe Street ICF		3771 FT
5/4/2021	089-2021	CSS	ICF Nurse - LPN	Wolfe Street ICF		3771 FT
12/8/2020	218-2020	CSS	ICF Nurse - LPN	Wolfe Street ICF		3771 FT or PT
9/8/2022	247-2022	CSS	Direct Support Professional - ICF	Wolfe Street ICF		3771 FT
12/6/2022	309-2022	CSS	Direct Support Professional - ICF	Wolfe Street ICF		3771 FT
8/10/2022	213-2022	CSS	Direct Support Professional - ICF	Wolfe Street ICF		3771 PT
3/10/2023	054-2023	CSS	Direct Support Professional - ICF	Wolfe Street ICF		3771 PT
2/1/2023	021-2023	CSS	Intermediate Care Facility Manager	ICF Ross		3792 FT
10/13/2022	278-2022	CSS	Direct Support Professional - ICF	ICF Ross		3792 FT
1/20/2023	012-2023	CSS	Direct Support Professional - ICF	ICF Ross		3792 FT
3/10/2023	052-2023	CSS	Direct Support Professional - ICF	ICF Ross		3792 FT
7/12/2022	179-2022	CSS	Direct Support Professional - ICF	ICF Ross		3792 PT
3/10/2023	053-2023	CSS	Direct Support Professional - ICF	ICF Ross		3792 PT
8/27/2020	141-2020	CSS	ICF Nurse - LPN	ICF Ross		3792 PT
2/17/2023	029-2023	CSS	Assistant Group Home Manager	ICF Lucas		3793 FT
1/13/2023	010-2023	CSS	Direct Support Professional - ICF	ICF Lucas		3793 FT
1/30/2023	017-2023	CSS	Direct Support Professional - ICF	ICF Lucas		3793 FT
3/3/2023	045-2023	CSS	Direct Support Professional - ICF	ICF Lucas		3793 FT
11/1/2022	292-2022	CSS	Direct Support Professional - ICF	ICF Lucas		3793 PT
11/9/2020	196-2020	CSS	ICF Nurse - LPN	ICF Lucas		3793 FT
1/30/2023	018-2023	CSS	ICF Nurse - LPN	ICF Lucas		3793 FT
					22	
2/17/2023	031-2023	CSS	Group Home Manager	Leeland Road		3772 FT
2/24/2023	039-2023	CSS	Assistant Group Home Manager	Leeland Road		3772 FT
8/30/2022	244-2022	CSS	Direct Support Professional - Residential	Leeland Road		3772 PT
10/13/2022	275-2022	CSS	Direct Support Professional - Residential	Leeland Road		3772 PT
11/18/2022	300-2022	CSS	Direct Support Professional - Residential	Stonewall Estates		3773 FT
2/24/2023	038-2023	CSS	Direct Support Professional - Residential	Stonewall Estates		3773 FT
7/18/2022	187-2022	CSS	Direct Support Professional - Residential	Stonewall Estates		3773 PT
7/18/2022	188-2022	CSS	Direct Support Professional - Residential	Stonewall Estates		3773 PT
8/10/2022	211-2022	CSS	Direct Support Professional - Residential	Devon Drive		3774 PT
2/18/2022	056-2022	CSS	Direct Support Professional - Residential	Ruffins Pond		3775 PT
3/15/2023	062-2023	CSS	Assistant Group Home Manager	Piedmont		3776 FT
10/30/2022	289-2022	CSS	Direct Support Professional - Residential	Piedmont		3776 FT
1/13/2023	009-2023	CSS	Direct Support Professional - Residential	Piedmont		3776 FT
2/10/2023	026-2023	CSS	Direct Support Professional - Residential	Piedmont		3776 PT
6/3/2022	078-2022	CSS	Direct Support Professional - Residential	Igo Rd		3777 PT
1/20/2023	324-2022	CSS	Direct Support Professional - Residential	New Hope		3778 PT
1/13/2023	008-2023	CSS	Direct Support Professional - Residential	Scottsdale Estates		3779 FT
1/26/2022	026-2022	CSS	Direct Support Professional - Residential	Scottsdale Estates		3779 PT
9/10/2021	102-2021	CSS	Direct Support Professional - Residential	Scottsdale Estates		3779 PT
3/15/2023	055-2023	CSS	Direct Support Professional - Residential	Belmont SAP		3781 FT
3/28/2023	070-2023	CSS	Direct Support Professional - Residential	Merchants Square SAP		3784 FT
4/20/2022	105-2022	CSS	Direct Support Professional - Residential	Merchants Square SAP		3784 PT
1/6/2023	327-2022	CSS	Direct Support Professional - Residential	Galveston Rd		3790 FT
6/23/2022	178-2021	CSS	Direct Support Professional - Residential	Galveston Rd		3790 PT

Date	Position		Position		RU	Full-time/ Part-time
Posted	No.		Title	Location		
12/29/2021	348-2021	CSS	Direct Support Professional - Residential	Churchill		3791 PT
2/10/2023	025-2023	CSS	Direct Support Professional - Residential	Churchill		3791 PT
9/30/2022	270-2022	CSS	Direct Support Professional - Residential	Myers Drive Respite		3794 FT
9/29/2022	271-2022	CSS	Direct Support Professional - Residential	Myers Drive Respite		3794 FT
9/29/2022	274-2022	CSS	Direct Support Professional - Residential	Myers Drive Respite		3794 FT
					29	
3/15/2023	051-2023	HF	Family Support Specialist	Healthy Families		5560 FT
					2	
Positions on Hold						
3/29/2021	058-2021	ADMIN	Administration Office Support	Fredericksburg		1000 FT
3/23/2020	056-2020	CLINICAL	Lead, ES Therapist	Fredericksburg		2000/4000 FT
9/25/2019	189-2019	CLINICAL	Psychologist II	Stafford		2250 FT
8/18/2020	127-2020	CLINICAL	Drug Court Surveillance Officer	Fredericksburg		4200 FT
9/15/2022	260-2022	CSS	Nurse Manager II	ID/DD		Split FT
				Total Open Positions:	136	

March 2023 Executive Committee Meeting Minutes

Call to order

A meeting of the Executive Committee of Rappahannock Area Community Services Board was held at 600 Jackson Street on March 21, 2023. *Attendees included:* Ken Lapin, Nancy Beebe, Greg Sokolowski, and Joe Wickens.

Executive Director FY2023 Work Plan Review

Mr. Wickens reviewed his FY 2023 end of year performance goals and discussed successes and challenges of the year. Committee provided an evaluation of Mr. Wickens' performance.

Executive Director's FY 2024 Contract

Committee reviewed the employment agreement and discussed the annual compensation. Committee unanimously recommended the continuation of Mr. Wickens' FY 2024 agreement and extended the contract period starting April 1, 2023 through June 30, 2024 to fall in line with the fiscal year. Committee adjourned at 6:35pm.

To: Joseph Wickens, Executive Director

From: Jacqueline Kobuchi, Director of Clinical Services

Date: April 12, 2023

Re: Report to RACSB Board of Directors for April Board Meeting

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Outpatient Services

The Caroline Clinic established a waiting list on 11/17/2022 and the waiting list remains active. Clinic completed 22 intakes in March for our priority populations and also contacted individuals on our waiting list for weekly check-in. We also started a weekly substance abuse group and continue to offer an adult wellness group. Lili Spain accepted one of the vacant therapist positions to start in April and the clinic now has one clinician vacancy.

During the month of March, the Fredericksburg Clinic and Children’s Services Clinic completed over 100 intakes for outpatient therapy and medication management. Out of the 100 intakes completed, 58 of the intakes were scheduled the same day that individuals requested services. We continue to provide services over ZOOM and in person at both locations. We continue to recruit for two Office Associate II positions, a Medical Records Office Associate, a Mental Health Peer Recovery Specialist, an Intake Therapist, and a MH/SUD Therapist at the Fredericksburg Clinic. The three Child/Adolescent Therapists at the Children’s Services Clinic have completed Trauma and Grief Component Therapy for Adolescent training and look forward to incorporating it into their practice.

The King George Clinic continues to offer the weekly in person women’s and men’s substance abuse groups. This month we had one man successfully graduate from the program. King George Clinic staff completed 36 new client intakes during the month of March. Staff attended a training on Ethics, “When the Client and Guardian Disagree,” and a training on Motivational Interviewing entitled “Eliciting hope and the possibility of post-traumatic growth.”

The King George Clinic had a recent success where an individual receiving services has been out of work for an extended period of time related to their mental health. This individual has seen improvements across several areas including medication compliance, regularly attending therapy, self-care and mood stability. This individual was able to meet their goal of returning to work.

The therapists at the Spotsylvania Clinic completed 53 assessments in March. The clinic continues to be on a waitlist that therapists contact weekly to check-in and provide updates. The clinic welcomed the new Men’s Substance Use Therapist, Eric Bell. A hiring packets was submitted for the Office Associate Position. Dayton Olsen, Mental Health/Substance Use therapist’s last day is 4/12/2023. He has been working part time at the Spotsylvania Clinic. The clinic continues to have one Substance Use Therapist vacancy. Staff celebrated Melissa Dannemiller, Child and Adolescent Therapist, as she recently became a Licensed Social Worker!

The School-Based Therapy program continues to grow. The School-Based team has been collaborating with Caroline School staff to launch in their schools mid-April. The School-Based Therapist with Fredericksburg City continues to provide therapy to students in five schools. She conducted three additional intakes in March. She also participated in training to become certified in Trauma-Focused Cognitive Behavioral Therapy. The Safe Harbor Therapist completed an additional eight assessments this month. She

continues to provide Trauma Focused Cognitive Behavioral therapy to children who have disclosed abuse through Forensic Interviews. The therapist completed her hours towards licensure to become a Licensed Professional Counselor!

During the month of March, the Stafford Clinic completed 14 intakes for outpatient therapy and medication management. The waitlist remains active at the Stafford Clinic. We continue to provide services over ZOOM and in person. Leslie Bottoms, Resident in Counseling, was promoted to the Stafford Clinic Coordinator position. She worked previously as a therapist at the Fredericksburg Clinic.

Emergency Services

In March 2023, Emergency Services saw an increase in evaluations completed. The Emergency Services Coordinator participated in a strategic planning retreat as part of her role on the executive board for the Virginia CIT Council. VACIT is looking at how to expand as a 501C3 and serve the state CIT programs. The Governor's Prompt Placement Taskforce also had a meeting to review the taskforce's progress. The ES Coordinator sat on a subcommittee for this task force. The state is working towards improving the state-wide waiting list for psychiatric inpatient placement for temporarily detained individuals and working to make the process more transparent. Local law enforcement received their initial feedback for their Marcus Alert plan submissions. All feedback was overall positive with a few minor missing action items being asked of the jurisdictions. The ES Coordinator also posted new positions for emergency services as funded through Marcus Alert to expand co-response in Spotsylvania and Stafford counties along with hiring Peer Support Specialist to join the co-response teams. Lastly, a second Assistant Coordinator for ES will be sought out to oversee the CIT program and provide direct supervision to other local community based crisis services including the co-response teams.

Case Management

We are excited to announce that our team is fully staffed and regularly enrolling new individuals in Mental Health Case Management Services. Our referrals come from many different sources to include: therapists and other staff within RACSB, local hospitals, DSS, APS, private providers in the community, family and friends as well as individuals themselves. We also enroll all individuals who discharge from State Hospitals, in MHCM Services. We strive to offer an intake time within a week of speaking with the individual, in order to engage them in services and begin working toward linking them with additional resources and services.

Jail & Detention

Detention has a census of 41 residents. Currently, there is one group of CPP residents (7 males) and 4 residents in the Post D program (all males). Rappahannock Juvenile Center has decided to cease the CPP program effective July 1, 2023. Detention has two current vacancies for a full-time and a part-time therapist. The Mental Health Therapist position at the Jail has been filled and Grace Landolt will start on May 30, 2023. However, we have a new vacancy for the Diversion Therapist position. The MAT Peer Specialist position has also been filled and Joy Myers will join our team on April 17, 2023.

Specialty Dockets

During the month of March, the Specialty Dockets continued to welcome new participants and celebrated some graduations. The Behavioral Health Docket welcomed two new participants this month and had one unfortunate termination due to non-compliance. We welcomed two new Veterans Docket participants and are awaiting court dates for three others who have been evaluated and approved for participation. Juvenile Drug Court continues to operate with two participants. Adult Drug Court currently has 39 active participants and have several new referrals awaiting evaluations. The D21 Probation and Parole Therapist position continues to remain vacant at this time and this population is being served through the clinics where they reside. Our Veteran and Family Specialist Therapist has returned from medical leave and is beginning to take on Community Cares clients again.

Substance Use

Substance use programs continue to have one therapist vacancy and the Project LINK Specialist vacancy. One therapist position was filled, as the SUD Intern accepted a full-time position with RACSB beginning 5/30/2023. The SUD Coordinator and peer recovery specialists continue to serve on the Harm Reduction Subcommittee, under Be Well Rappahannock. One of our case managers and therapists continue to collaborate weekly with Rappahannock Regional Jail to improve service follow-through for those being released from jail with substance use histories. Our peer specialists continue to run several peer support groups for those seeking recovery from substance use.

HUMAN RESOURCES REPORT FOR THE BOARD OF DIRECTORS, **March 2023**:

Training

Human Resources held two New Employee Orientatio1 was part-time and two were interns.

Recruitment

In the month of **March**, we made eighteen offers to external applicants and ten offers to internal candidates.

Indeed continues to be our best source for applicants. We ran a total of 22 positions this month and received 1,008 resumes for the various positions, up from 586 resumes from the previous month.

Human Resources & Employee Relations

Congratulations to the following employee who have recently received promotions:

Leslie Bottoms	Clinic Coordinator II
Carla Anderson	Asst. Coordinator, Crisis Stabilization
Daniel Clark	Adult MH Case Manager
Stephanie Hines	Lead Specialist, Crisis Stabilization
Christina Martinez	Lead MH Residential Specialist

March Employee Events

The last Friday in March we wore purple to support child abuse prevention. Spark, the new intranet was launched with a party and employees received “Spark” shirts. The Employee Engagement Committee met and continues to plan events for the next few months employee picnics, holiday dinner, employee in-service, etc.

RACSB is proud to have such a dedicated, professional staff!

Michelle Runyon, HR Director

RACSB Board Report Compliance

Incident Report

- There were 201 Incident Reports entered into the Electronic Incident Report Tracker during the month of March. This is a decrease of 12 from February and a decrease of 2 from January. All incident reports submitted were triaged by QA staff. The top two categories of reports submitted were and Health Concerns (61 reports) and Individual Served Injury (28 reports).
- Quality Assurance Staff entered 20 incident reports into the Department of Behavioral Health and Developmental Services Electronic Incident reporting system. (9 Level 1, 15 Level 2, 5 Level 3); a decrease of 11 from February. There were no positive COVID cases reported, and eight COVID testing reports.
- There were no reports elevated to care concern by DBHDS. These are reports that based the Office of Licensing's review of current serious incident as well as a review of the recent incidents related to this individual, the Office of Licensing recommends the provider consider the need to re-evaluate the individual's needs as well as review the current individual support plan. DBHDS recommends provider review the results of root-cause analyses completed on behalf of this individual. In addition, take the opportunity to determine if systemic changes such as revisions to policies or procedures and/or reevaluating and updating risk management and/or quality improvement plan.
- DBHDS requires the conduction of a root cause analysis for selected incident reports. The root cause analysis must be conducted within 30 days of staff's discovery of the incident. QA staff requested specific programs, based on submitted incident report, to complete the required root cause analysis. Thirty-three root cause analysis were requested and 13 were completed. No expanded root cause analysis was required nor received in February.

Human Rights Investigations

QA staff initiated six and closed eight investigations during the month of March. **Four** investigations initiated regarded an allegation of neglect; two founded neglect allegations concerned two clients receiving ICF Residential services. Two neglect allegations involved medication errors; one involved an ICF Residential participant, one an ID/DD Residential participant. Both of these medication errors were unfounded as neglect. **One** investigation was regarding physical abuse (unfounded) which occurred in a DD Residential program. **One** investigation regarded an allegation of use of a restriction (founded) in an ID/DD Residential program. **Two** investigations were closed in March, and were unfounded for use of seclusion/ restraint in an ID/DD Residential program.

External Reviewers

- QA provided approximately 27 hours of document review to ensure completeness and correct information was provided in the QMR response/ CAP

- QA staff provided requested follow-up information to Brian Dempsey, Senior Licensing Specialist with the Department of Behavioral Health and Developmental Services (DBHDS), on 9 incident reports submitted into CHRIS.
- QA staff received six external chart review requests and responded to for 14 clients by submitting requested documentation.
- QA staff received and responded to 14 emails from various Human Rights Advocates regarding investigative reports, CHRIS reports and external providers. In addition, QA staff responded to various documentation request from the Advocates.
- QA staff received 4 phone calls and multiple emails from various programs with questions about incident reports, human rights, complaints, and root cause analysis (RCA) process.

Complaint call synopsis:

The QA team received three complaint calls in the month of March. One call concerned dissatisfaction with services; the client requested a new case manager at her PSH program. This was triaged to Nancy Price and was able to be resolved to the client's satisfaction. Two complaint calls concerned services in Outpatient services. One of these complaints was regarding the client's dissatisfaction and requesting a new doctor; this was triaged to Jacque. The other concern from outpatient was regarding the ability to wait in the waiting room. Both of these outpatient concerns were resolved to meet the client satisfaction.

The QA team received one feedback email from the anonymous feedback portal on the RACSB website regarding a potential concern for a client receiving ID/DD sponsored placement services. After looking into the concern, it was determined that the client was safe and the concerns left in the feedback were unsupported.

Trainings/Meetings

- 3/2 – Leeland Site visit
- 3/2 – SHRC Provider Roundtable
- 3/3 – Lucas Site Visit
- 3/6 – Investigation Interviews (2)
- 3/7 – Investigation Interview (5)
- 3/7 - NEO
- 3/8 – Investigation Interviews (2)
- 3/8 – NEO
- 3/9 – Meeting with Coordinators to discuss Quality Management Audit Results
- 3/9 – Q-Tips: Supervision (10am + 3pm)
- 3/20 – Investigation interviews (4)
- 3/21 – Investigation Interviews (4)
- 3/21 – NEO
- 3/21 – Audit review meeting (Jessica + Steve)
- 3/22 – NEO
- 3/22 – Compliance Committee Meeting
- 3/23 – Q-Tips: Medication Errors (10am + 3pm)
- 3/27 – Engagement Committee (Kat)

Prevention Services

Michelle Wagaman, Director
mwagaman@rappahannockareacsb.org
540-374-3337, ext. 7520

April 2023

Youth Education – We continue to partner with St. Paul’s and 4Seasons day care/preschool centers in King George County to facilitate curriculums including HALO (Healthy Alternatives for Little Ones) and Second Step. We have completed the pilot implementation of the Second Step Bullying Prevention Unit at Lewis and Clark Elementary School in Caroline County.

Vaping Prevention Education – We completed another round of high school education at King George High School in March. We facilitate vaping prevention education trainings as part of health classes.

Responsible Gaming and Gambling – Two staff members attended the CADCA Bootcamp on Prevention of Problem Gambling hosted by DBHDS the week of April 3 in Staunton. Nearly all 40 CSBs were represented. Region 1 worked together on a draft community map and logic model. Locally, we will engage stakeholders to finalize a logic model and plan specific to Planning District 16.



ASIST (Applied Suicide Intervention Skills Training) – Our trainer continue to collaborate with other CSBs to co-train in April. Our next ASIST training is scheduled for May 10 -11, 2023.

To register: <https://www.signupgenius.com/go/RACSB-ASIST-Training2023>

safeTALK – We held this 3-hour suicide alertness training on March 21, 2023. Our next training is scheduled for May 16, 2023.

To register: <https://www.signupgenius.com/go/RACSB-safeTALK-Training2023>

Mental Health First Aid – We continue to host this 8-hour course both virtually and in-person. We hosted an in-person Adult training in March and return to the Rappahannock Criminal Justice Academy twice in April. We continue discussions with Caroline County Public Schools and King George County Public Schools to bring teenMHFA to their high schools. We have finalized plans to train all staff at the Central Rappahannock Regional Library in September and October. We have added three (3) training dates to meet their needs.

To register:

Adult MHFA - <https://www.signupgenius.com/go/RACSB-MHFA-Training2023>

Youth MHFA - <https://www.signupgenius.com/go/RACSB-YouthMHFA-Training2023>

Lock and Talk Virginia – We are gearing up for another media campaign to recognize May as Mental Health Month. The focus will be on the “talk” part of Lock and Talk. If you haven’t already, please visit our new website at www.lockandtalk.org.

Save One Life (formerly REVIVE!) – We are moving forward with the separation from DBHDS’s REVIVE! program and launching Save One Life as our opioid awareness and Naloxone training. Virtual trainings via Zoom continue to be held 1-2 times per month. We continue to see an increase in community partners requesting naloxone trainings for their staff, volunteers, and clients served.

At the request of Stevenson Ridge, we trained their staff prior to prom season. We have been invited by the National Park Service to provide the training during their week-long conference. In April, we also returned to the University of Mary Washington to train faculty and staff. We are scheduled to train all 100+ of the Spotsylvania County DSS staff in May.

We will be facilitating the rapid version at two sites as part of Operation Medicine Cabinet on April 22, 2023. RACSB staff will be at Spotsylvania Regional Medical Center and Mary Washington Hospital.

To register for a REVIVE! training: https://bit.ly/VIRTUAL_REVIVE

To register for Narcan dispensing: https://bit.ly/RACSB_NARCAN

There is increased interest from community partners to expand Harm Reduction Initiatives in our community. Members of the Opioid Workgroup are researching options and in dialog with community leaders.

ACEs and Resilience – RACSB Prevention Services is resuming in-person trainings and continuing to collaborate with fellow CSBs to host virtual Understanding ACEs trainings. We have a virtual training scheduled for April 19, 2023 with 82 registered. Our next in-person training is scheduled for May 23, 2023. Additionally, we are supporting Mental Health America of Fredericksburg and the YMCA to host a Community Conversation around ACEs on April 15, 2023. RACSB Prevention Services is donating 10 copies of the book “What Happened to You” by Oprah Winfrey and Dr. Bruce Perry for a local book club around trauma-informed.

To register for in-person trainings: <https://www.signupgenius.com/go/RACSB-ACEsTrainings2023>

To register for virtual trainings: <https://forms.gle/mS9g5tZaQiuopFL08>

Community Resilience Initiative – We have resumed offering Course 1 Trauma Informed and Course 2 Trauma Supportive. These are 6-hour courses that cover brain science, the individual experiences and ways to build individual and community resilience.

To register: <https://www.signupgenius.com/go/RACSB-CRI-Training2023>

CRI is hosting their annual conference on the east coast for the first time. It will be held at the Hotel Roanoke (July 20-21, 2023).

Healthy Families Rappahannock Area (HFRA)

HFRA helps parents **IDENTIFY** the best version of themselves, **PARTNERS** with parents with success in parenting, and **EMPOWERS** parents to raise healthy children.

LOCALITY	NUMBER OF REFERRALS	ASSESSMENTS	NUMBER OF FAMILIES RECEIVING HOME VISITS	NEW ENROLLEES YEAR-TO-DATE
CAROLINE COUNTY	3	0	6	2
CITY OF FREDERICKSBURG	3	2	27	14
KING GEORGE COUNTY	2	0	6	2
SPOTSYLVANIA COUNTY	8	12	53	11
STAFFORD COUNTY	10	6	32	11
OUT OF AREA (REFERRED TO OTHER HF SITES)	0	0	0	0
TOTAL	26	20	124	40

- Healthy Families Rappahannock Area hired two new Family Support Specialists to replace Jennifer Berry (who was promoted to Program Supervisor for Healthy Families Henrico) and Janina Morales. Rebekah Shumaker will start with HFRA on April 17, 2023 and Carl Hurd will transfer effective April 30, 2023.
- HFRA made a connection with CHOICES and is now receiving referrals
- HFRA is working on building more community awareness with King George County by providing monthly playgroups. Additionally, we have met with Laurie Wages, Coordinator of Preschool and Mandated Services King George Public Schools, to seek opportunities to partner.
- Participated in the Migrant and Refugees meeting through Catholic Charities.
- Attended the King George Special Needs Resource Fair.
- Attended Beauty for Ashes meeting with staff, building community awareness.
- Please save the date of April 19, 2023 from noon to 3:00 p.m. for an open house and event in recognition of April as Child Abuse Prevention Month. Our office is located at 4605 Carr Drive, Fredericksburg, VA 22408 (between the car dealerships on Route 1 and Fredericksburg Academy).
- The April newsletter is included.



Healthy Families Rappahannock Area

April
2023



*Keeping you in
the loop...*



SHOUT OUTS

We would like to shout out our amazing Family Resource Specialist, Bryand "Bry"!

Bry has taken the idea of ensuring our community is AWARE and stays informed about Healthy Families. Every week in March, Bry was out sharing about Healthy Families to all that would listen at the community events and in April, she is hitting the ground even harder with events every weekend.

We are so thankful for this AMAZING team member!

HIGHLIGHTS FROM FEBRUARY

HFRA met with the representatives of Choices. we are excited about this new collaboration

Attended the Migrant and Refugees Meeting hosted by Catholic Charities

HFRA is working on developing more awareness in King George county. In collaborations with King George County Schools, we hope to establish a playgroup in this area.

HFRA had 7 participants participate in the state Equity Focus Group

**BRY
ROCKS!**



DATES TO REMEMBER

- Board Meeting April 14th, 11-12:30pm
- Open House April 19th, 12-3pm
- King George Family Fun Day May 6th, 2-7 pm



WITH THE SUPPORT OF
LOCAL
LAW ENFORCEMENT



OPERATION MEDICINE CABINET

April 22, 2023

10 a.m. to 2 p.m.

**Drop off your Expired or Unused Medications and Sharps!
Drive up, drop off and drive out! No questions asked.**

Eleven Locations to Serve You:

1. Stafford Hospital
101 Hospital Center
Boulevard
Stafford, VA 22554

**2. Mary Washington
Hospital Tompkins
Martin Medical Plaza**
1101 Sam Perry Boulevard
Fredericksburg, VA 22401

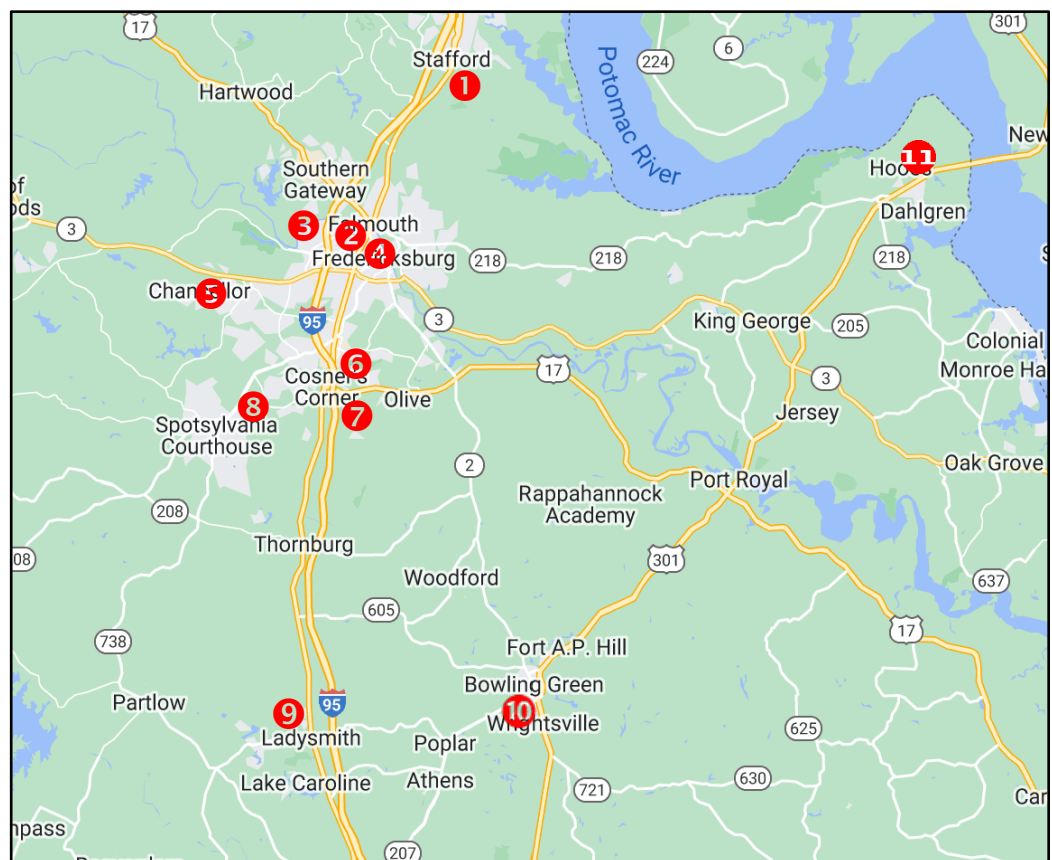
3. Wegmans
2281 Carl D. Silver Parkway
Fredericksburg, VA 22401
NO SHARPS ACCEPTED

**4. University of Mary
Washington Bell Tower**
1301 College Avenue
Fredericksburg VA 22401
NO SHARPS ACCEPTED

5. Chancellor's Village
12100 Chancellor's Village
Lane
Fredericksburg, VA 22407
NO SHARPS ACCEPTED

**6. Mary Washington
Healthcare
Emergency and Outpatient
Center – Lees Hill**
10401 Spotsylvania Avenue
Fredericksburg, VA 22408

**7. Spotsylvania Regional
Medical Center**
4600 Spotsylvania Parkway
Fredericksburg, VA 22408



8. CVS Courtland Commons
9767 Courthouse Road
Spotsylvania, VA 22553
NO SHARPS ACCEPTED

**9. Mary Washington Primary Care
and Pediatrics**
8051 Prosperity Way
Ruther Glen, VA 22546

10. Walgreens
104 West Broaddus Avenue
Bowling Green, VA 22427
NO SHARPS ACCEPTED

11. Walmart/Petco Parking Lot
16375 Merchant's Lane
King George, VA 22485
NO SHARPS ACCEPTED



**Mary Washington
Healthcare**



**RAPPAHANNOCK AREA
COMMUNITY SERVICES BOARD**

Community Support Services Board Report: April 2023

Developmental Disabilities (DD) Residential Services - Stephen Curtis

Sponsored Placement hosted a residential “Spring Fling” dance in March. Following 3 long years of being unable to gather as a program, we enjoyed a wonderfully cheerful and long overdue gathering with great food, fellowship, and dancing.

Four residential programs received unannounced visits in March from the DBHDS Licensing Specialist assigned to our RACSB programs. The visits went well with no citations incurred as a result of the onsite walkthroughs.

Three programs recently experienced Home and Community Based Service Setting reviews by DMAS and DBHDS. Thus far, we have a couple of items we are moving to slightly tweak in our programs based on their suggestions that will add value and complement our resident rights to privacy and access to community. This review is based off of continuing implementation steps to ensuring residents are granted the same opportunities in their community as people who are not utilizing services.

Assertive Community Treatment (ACT) – Tamra McCoy

Regarding ACT staff changes in April, Dianna Sloat was hired as the Peer Specialist for ACT SOUTH. Dianna is a certified peer recovery specialist and we are pleased she will be an integral part of ACT! Also, the ACT SOUTH TEAM relocated to the former office of the RACSB Permanent Supportive Housing program, 405 Bridgewater Street. Their office is next to the ACT, 401 Bridgewater location which is now occupied by ACT NORTH.

An ACT South client, who had been receiving services since 2016, was discharged. This client experienced a medical emergency during an ACT program staff weekly medication support home visit in December 2022. She needed emergent treatment and was hospitalized with hyperglycemia and COVID. The client had been living alone and her daughter wanted to take care of her mother because of her medical challenges. After the hospital discharge, the client relocated to Hampton and resides with her daughter. This client is now receiving adult case/medication management with Hampton/Newport News Community Services Board. ACT staff were proactive with assisting the client and her daughter with obtaining continued mental health supports in Hampton.

ACT SOUTH enrolled a client who had multiple agency emergency services contacts and psychiatric hospitalizations after he was diagnosed with schizophrenia last year. He initially did not want to enroll in services because of the intense nature of our program. The program coordinator and ACT South Team Lead met with the client in his home with his parents on a couple of occasions to discuss services only. The client consented to enrollment after he felt comfortable with our program. This is a testament to ACT meeting clients where they are because services are voluntary.

ACT North re-enrolled a client who requested discharge in 2021. She had been receiving ACT services from 2019 to 2021. This client has been receiving adult case/medication management from the RACSB but she struggled with medication adherence. She had been hospitalized multiple times for psychiatric

treatment since discharge from ACT. The most recent hospitalization occurred March 2023. Since re-enrollment, she has been very engaged with ACT services including medication adherence and she has resumed working part time.

Our program continues to provide ongoing supports in a wide array of circumstances.

Psychosocial Rehabilitation: Kenmore Club - Anna Loftis

Kenmore Club is currently planning for our upcoming art show that will take place in May, in lieu of the Art of Recovery. We are planning on selling the creations of the Kenmore Club members as a way to fundraise and promote awareness for Mental Health Month. The members have been working hard sewing, crafting, and creating wonderful things to sell. This month is our virtual Western State Hospital outreach, and a visit to Virginia House, another club house. We are continuing to go to the YMCA 3 days a week now, and participated in the YMCA's Adult Easter Egg hunt. We have our new set of OTA interns who are planning lots of fun groups this month. Our current enrollment is 80.

DD Day Support: Rappahannock Adult Activities, Inc. (RAAI) - Lacey Fisher

RAAI Spring Plant sale opened early this year. We are open Monday-Friday 10am-4pm and Saturday 9am-12pm.

RAAI Garden Party April 20th, tickets on sale here <https://rappahannockareacsb.org/product/garden-party-ticket/>

RAAI is currently supporting 110 individuals; with approx. 50 individuals on the waitlist for services. As staffing increases, waitlist is being addressed. We are currently fully staffed at our Caroline and Spotsylvania locations. We are seeing an uptick in resumes and applications. We will be attending RACSB's career fair on April 12th.

Audits continuing for HCBS at our Caroline and King George locations. We were not selected for HSAG audit round #5.

Developmental Disabilities Support Services - Jen Acors

A few DSSCs participated in Stafford County School's "I'm Determined" conference. We had an information table, as well as presented at a break out session regarding DD waivers.

The DSSC team hosted the first DD Waiver Screening day as a way to provide more accessibility to individuals in the community for screening for the DD waiver. We offered DD Waiver screenings on March 28th from noon until 6 pm to individuals who made appointments as well as walk-ins. (Staff were prepared to work until 8 pm to accommodate any walk-ins at 6 pm as a screening can take 2 hours or longer to complete.) As it was our first screening day, we did not know what to expect. We advertised on social media and with the Fredericksburg Area Council on Transition, which has members from all the area school systems as well as other community members. On March 28th we had the following numbers:

10 of the 12 individuals who scheduled an appointment for a screening, attended and were screened.

4 – walk ins were screened

- 1- Walk in referred to aging services – she was not screened as she does not have a developmental disability.
- 2- Walk ins did not bring the individual to be screened with them. They will be contacted to schedule a screening at a later date.
- 1- One person called during the day and will be contacted to schedule a screening.

We also had multiple other people call when they were made aware of the screening day, but they were not available. We have either already set up appointments for screenings for them or are in process of doing so.

Mental Health (MH) Residential Services - Amenah Price

-One individual discharged from residential and went to an ALF due to her increase in medical needs.

- Two individuals were admitted into residential from the community, one into Home Road and one into Lafayette Boarding House.

-We had five (5) referrals from Western state hospital for our transitional beds. One declined our services, one was declined due to drugs and weapons while on pass at HR. The other three (3) are currently all in the process of completing their passes now.

-Lafayette Boarding House had a new residential counselor who began.

- PSH had five (5) individuals who were approved for apartments and will have move-ins scheduled all in April. PSH currently has 36 clients total.

- PSH hired a new peer specialist who began in March.

-PSH moved into the new location at Bowman center on March 21st with no issues.

-The expansion plan for PSH was approved by DBHDS. They asked that the turnover rate be changed from 12% to 15% and formula be resubmitted. This was completed on 3/24/23 and sent. This will include adding another case manager and an office associate. The total for client capacity will go from 50 to 65 for the program.

Early Intervention: Parent Education and Infant Development (PEID) - Suzanne Haskell

There are currently 525 children enrolled in the program receiving a combination of services to include service coordination, speech therapy, physical therapy, occupational therapy and educational developmental services. We are offering all services face-to-face and giving the option for families to choose to be seen via zoom. Due to increased referrals, we are scheduling 15 consistent assessments per week as well as adding intermittent assessments in various counties. There are currently 16 providers on staff. We currently have an open position for a speech-language pathologist and an office associate.

MH Crisis Stabilization: Sunshine Lady House – Carla Anderson

Sunshine Lady House is temporarily closed, but we are making efforts to get the program back up and running. SLH is present on the social media platform, and on Monday we had the opportunity to share the needs of the program on B101.5.

Currently we have eleven open positions. Recently we had an interview with RN applicant, which looks promising. We have had two qualified applicants apply for the Coordinator position; had an interview already and the other interview has been scheduled. Within the last couple of days, we have had a Peer Specialist apply, and several MH Residential Specialist applicants, and plan to schedule interviews soon!

RACSB DEPUTY EXECUTIVE DIRECTOR REPORT

March 2023 Review

Community Consumer Submission 3 version 7.5 (CCS3 7.5)

The Community Consumer Submission 3 version 7.5 is the technical specifications for our state reporting data collection and extract. RACSB staff, Suzanne Poe and Brandie Williams serve on the joint CCS User Acceptance Testing group.

Trac-IT Early Intervention Data System

The go live date for the new Trac-It program, a state-wide data platform/electronic health record for Part C, was June 27, 2022. The new date for full implementation of additional 280+ data requirements has been announced as December 11, 2023. RACSB will have to use the extract functionality which is still in development in order to meet full implementation expectations.

Waiver Management System (WaMS)

RACSB continues to implement interoperability with our electronic health record, myAvatarNX with the state-wide Waiver Management System. RACSB staff participate in the development and implementation of annual changes to this system. Finalized specifications for the upcoming year's changes were provided in December 2022. The new changes will go live on May 1, 2023.

Opportunities for Partnership/Input:

- Presented at the King George County Board of Supervisor's meeting with information regarding our local funding request.
- Hosted DBHDS and Ernst & Young Consultants on-site for discussion around data exchange, KPIs, and Certified Community Behavioral Health Clinic standard metrics.
- Served as a reference and demo for myAvatar with Chesterfield, Richmond Behavioral Health Authority, Fairfax, and Danville-Pittsylvania CSB. Chesterfield and RBHA have awarded RFP to Netsmart. Hampton-Newport News went live on myAvatarNx on April 1, 2023.
- Selected to represent CSBs on the newly developed Data Exchange Steering Committee with senior DBHDS leadership and attended the kick-off meeting this past month.
- Completed multiple requests for one-time funding opportunities across clinical, community support, and administrative programming.
- Presented to Be Well Rappahannock collaborative on supporting youth mental health through innovative partnerships.
- Worked with Dr. Patti Lisk to submit joint grant to Claude Moore Foundation for a 2nd year of funding for our Rappahannock Area Behavioral Health Workforce Initiative. Posted the job advertisement for the Germanna Adjunct Faculty position for this program. Presented update on the program at a Claude Moore Foundation virtual panel.
- Met with Healing Station, a new counseling provider in our community.
- Introduced our new school-based therapist to Caroline County Public School's CARE Team meeting.
- Attended the 2nd DBHDS Developmental Disability Provider Issues Workgroup meeting.

Special Projects and Data Requests:

Operations programs participate in a variety of special projects/requests for data. Please find

examples of a few of these efforts:

- Represented the agency virtually at the VACSB Quality and Outcomes, Data Management Committee, WaMS statewide calls, DBHDS Data Quality Sub-committee, CCS Implementation Team meeting, Region 1 IT Council, UAT Team, new DBHDS Data Dashboard Committee, and DMC Technical Sub-committee.
- Led Subject Matter Expert Data Quality Committee with DBHDS to address questions regarding appropriate reporting of new initiatives.
- Completed STEP-VA implementation 6-month survey for DBHDS.
- Meet weekly on the core advisory group with DBHDS around the new Data Exchange implementation project.
- Chaired the March 2023 EDCC Collaborative meeting.
- Supported the submission of our mid-year financial reporting to DBHDS per the performance contract.
- Met with Netsmart State Reporting engineers to begin development of an automated state metric measures reporting dashboard specific to Virginia dashboard measures.
- Participated in CCPS Budget advisory committee.