# February 2026 Board of Directors Meeting Minutes

## I. CALL TO ORDER

A meeting of the Board of Directors of the Rappahannock Area Community Services Board was held on February 17, 2026, at 600 Jackson Street and called to order by Chair, Jacob Parcell, at 3:00 p.m. *Attendees included*: Nancy Beebe, Claire Curcio, George Dallas, Susan Gayle, Greg Sokolowski, Ashley Terry, Carol Walker, Melissa White, Bridgette Williams, and Matthew Zurasky. *Absent*: Tiffany Haynes, Shawn Kiger, and Ken Lapin.

## II. MINUTES, BOARD OF DIRECTORS, **December 16, 2025**

The Board of Directors moved to approve the minutes from the December 16, 2025 meeting.

ACTION TAKEN: The Board approved the December 16, 2025 minutes.
Moved by: Ms. Bridgette Williams
Seconded by: Ms. Claire Curcio

## III. PUBLIC COMMENT

No Action Taken

## IV. SERVICE AWARDS/RETIREMENTS

Mr. Joe Wickens recognized all employees with awards:

5 years

**Tilisha Minor,** Manager, Belmont, Supervised Apartment Program

**Janet Victory,** Case Manager, Rappahannock Regional Jail

**Takia Kirk,** MH Residential Specialist, Crisis Stabilization (not present)

**Zainabu Koroma,** Direct Support Professional, Merchant Sq. Supervised Apartment Program (not present)

10 years

**Vickie Parker,** Direct Support Professional, DD Residential Floater

**Robert Rezendes,** Compliance Specialist

**Ashley Smith**, Direct Support Professional, Scottsdale Estates Group Home

**Gillian Crisp,** Day Support Aide, Kings Hwy. (not present)

15 years

**Amy Jindra**, Director of Crisis Intervention Services

**Margith Vaz,** MH Residential Counselor, Home Road Supervised Apartment Program

**Lisa Walker,** Manager, New Hope Estates Group Home

Retirements

**Anne Longenecker,** Special Educator, PEID – with 26 years

**Sherrie Johnson,** Licensed Child/Adolescent Therapist – with 30 years

**both retirees received a personalized 3D Crystal Award*

V. EMPLOYEE OF THE QUARTER – Joy Allen, Developmental Support Coordinator, Stafford

VI. BOARD CORE BEHAVIORS, *Ms. Claire Curcio*

Ms. Curcio reminded the Board that we want to have open, honest and respectful communications with each other – we want to ask the tough questions while we are in the room and not afterward, and then move on to the next level of decision making.

VII. BOARD PRESENTATION, **Young Adult Survey (YAS)**, *Ms. Michelle Wagaman-*
Ms. Michelle Wagaman presented a PowerPoint overview of the third iteration of the Virginia Young Adult Survey (YAS), a statewide survey of young adults ages 18 to 25 designed to assess prevention needs within this population. She explained that the survey provides valuable local-level data used to inform prevention planning efforts. The survey is overseen by Omni, with Community Services Boards, coalitions, and community networks supporting participant recruitment within their respective communities.

VIII. PROGRAM REPORTS

A. COMMUNITY SUPPORT SERVICES, *Ms. Lacey Fisher Curtis*

1. **Program Update -** Ms. Fisher Curtis provided program updates across service areas, noting that Day Support has expanded community-only groups operating out of the YMCA, resulting in increased community engagement and revenue. DD Residential experienced an increase in vacancies over the past two months due to two deaths and several medical discharges. Referrals are being closely monitored to support timely placements. DD Support Coordination received 36 additional waivers in January and continues recruitment efforts to maintain staffing levels amid program growth and turnover; an Intake Support Coordinator position was added to focus on individuals new to waivers, services, and screening processes. Mental Health Residential reported that Home Road remains fully occupied with no vacancies. Permanent Supportive Housing received two referrals in January that remain in process and currently serves 77 individuals with 14 units available. Board discussion included the new DBHDS application process, with leadership noting that while more comprehensive, it captures important information upfront to better determine service appropriateness. Clarification was also provided regarding the Community Outreach Case Manager position. Hiring criteria and interview questions are being refined as the role is re-filled to better align with program expectations and support long-term retention.
2. **Residential Vacancies** – Ms. Fisher Curtis reported that 3 individuals have moved into Myers Drive Respite, with 2 additional move-ins scheduled within the next 60 days, 1 at Myers Drive Respite and 1 at Igo Road Group Home. Current vacancies remain at Leeland, Devon, Ruffins, and 1 at Igo Road, primarily due to higher medical needs. MH Residential admitted 1 new individual to Home Road, bringing that program to full capacity. At Lafayette, 3 transitional beds and 1 community bed remain vacant. Additionally, 2

individuals were successfully discharged to utilize ACT resources in the community, representing positive discharges.

## B. CRISIS INTERVENTION SERVICES, *Ms. Amy Jindra*

1. **Program Update** – Ms. Jindra reported that the winter storm was a central focus of program operations in January and expressed appreciation to staff for their exceptional efforts. Several staff members stayed multiple nights at Sunshine Lady House after being snowed in, while others experienced injuries from icy conditions or were involved in traffic accidents while traveling to work. Family members also assisted in supporting staff, reflecting a strong collective effort to maintain program operations. She further shared that ACT services continue to expand, Sunshine Lady House is exploring additional strategies to address barriers to admission, and Emergency Services partnered with the Stafford Sheriff's Department Co-Response Team and Juvenile Detectives to provide targeted psychoeducation for youth in crisis.
2. **Emergency Custody Order (ECO)/Temporary Detention Order (TDO) Report – January 2026** – Ms. Jindra stated that Emergency Services staff completed 171 emergency evaluations in January. Fifty-six individuals were assessed under Emergency Custody Orders (ECOs), and 64 Temporary Detention Orders (TDOs) were served. Staff facilitated one admission to Western State Hospital. Additionally, 3 individuals were involuntarily hospitalized outside the agency's catchment area during January.
3. **Crisis Intervention Team (CIT) and Co-Response Report** – Ms. Jindra reported that the CIT Assessment Center served 15 individuals during the month of January. She presented a chart detailing the number of Emergency Custody Orders (ECOs) by locality, the number of individuals transferred into Crisis Assessment Center (CAC) custody, and those who could have utilized the Assessment Center if additional capacity had been available. The Spotsylvania Co-Response Team served 21 individuals in January, while the Stafford Co-Response Team served 27. Recruitment efforts continue for the Fredericksburg Co-Response Therapist position. There was no CIT training in the month of January; however, they are collaborating with Quantico to provide CIT training for military officers.
4. **Sunshine Lady House –** Ms. Jindra reported that Sunshine Lady House received 59 referrals during the month, accepted 49, and admitted 36 individuals. Several individuals declined admission due to snowstorm-related travel concerns, while three individuals already receiving care at Snowden or Spotsylvania Regional elected to remain there longer. Additional referrals required a higher level of medical care prior to admission and three individuals required inpatient medically managed detox services. January utilization totaled 165 bed days, reflecting a 46% utilization rate.

   Ms. Jindra further reported that staff met with Rappahannock Creative Healthcare, a contracted partner, to review detox services and referral practices. The review focused particularly on alcohol detox due to delayed symptom onset and the potential for rapid medical deterioration. Admissions involving alcohol detox require careful individual assessment and observation during the initial days of care. The discussion confirmed that higher-acuity detox services require an on-site medical team; therefore, advanced cases continue to be referred to Spotsylvania Regional's voluntary detox unit.

C. CLINICAL *Ms. Jacque Kobuchi*

1. **Program Update –** Ms. Kobuchi reported that the school-based therapist position serving the City of Fredericksburg, which is partially funded by the Mary Washington Healthcare Foundation, will now have the remaining portion of funding supported by Fredericksburg City Schools. This decision reflects the school system's recognition of the value of the position. As a result, the therapist will remain in place, ensuring continued services and program stability.
2. **State Hospital Census Report** -Ms. Kobuchi shared that there are currently four individuals on the Extraordinary Barriers List. There are 27 individuals that are at state hospitals receiving treatment from our catchment area.
3. **Same Day Access -** Ms. Kobuchi shared data on the number of intakes completed at our outpatient clinics and the percentage of those completed through Same Day Access. Individuals not seen through SDA received scheduled appointments, many times at their request or based on their needs.

D. COMPLIANCE, *Ms. Stephanie Terrell*

1. **Program Update –** Ms. Terrell reported that training will be conducted for a new maintenance ticketing system that will allow maintenance requests to be submitted and tracked electronically, improving the department's ability to triage and manage issues efficiently. She also shared that the agency has developed an electronic audit tool through QI Folio for use by Emergency Services. In addition, an audit tool has been created for the ID/DD Residential program to conduct peer audits; the tool mirrors the compliance team's chart audit process to promote consistency and strengthen quality oversight.
2. **Quality Assurance Report –** Ms. Terrell stated the Quality Assurance staff completed chart reviews for the following programs: Drug Court; and Project LINK. Corrective Action Plans were submitted for all discrepancies.
3. **Point-In-Time Survey –** Ms. Terrell reported that RACSB continues to utilize its point-in-time survey to gather feedback from individuals served and stakeholders to improve service delivery and overall satisfaction. The nine-question survey was distributed during the week of July 14, 2025, at all six outpatient clinics to individuals who attended appointments. A total of 777 surveys were completed, representing an 81% response rate from the 959 individuals seen during the survey period. While improved from recent years, response rates remain below pre-COVID levels, which averaged 93% in FY2020 and have remained under 72% since FY2022.
4. **Licensing Reports –** Ms. Terrell reported that the Department of Behavioral Health and Developmental Services (DBHDS) Office of Licensing issues reports when areas of non-compliance with regulatory requirements are identified, requiring agencies to submit corrective action plans. RACSB received approval for one corrective action plan during the month of January and ten corrective action plans during December. The attached report provides additional details regarding the citations and RACSB's corrective actions.

The Board moved to approve the Corrective Action Plans
ACTION TAKEN: The Board approved the Corrective Action Plans
Moved by: Mr. Matt Zurasky
Seconded by: Ms. Nancy Beebe

E. COMMUNICATIONS, *Ms. Amy Umble*

1. **Communications Update -** Ms. Umble provided Board members with copies of the RACSB Annual Report, the VACSB Annual Report, and the January newsletter. She noted that the February newsletter was not available due to computer issues. Ms. Umble also shared that community event season is beginning.

F. PREVENTION & EARLY INTERVENTION, *Ms. Michelle Wagaman*

1. **Program Update –** Ms. Wagaman reported that the Virginia Young Adult Survey is open through April 30, 2026, targeting individuals ages 18–25, with Germanna Community College serving as an official survey partner. The first resilience-focused virtual Lunch and Learn was held January 29, 2026, with 43 attendees. Additionally, Healthy Families Rappahannock Area will participate in a February 26, 2026 roundtable hosted by the U.S. Department of Health and Human Services regarding MIECHV Program federal funding.
2. **Healthy Families Women and Girls Fund Application –** Ms. Wagaman requested Board approval to submit a $50,000 grant application to the Community Foundation of the Rappahannock River Region's Women & Girls Fund for a one-year initiative titled *"Breaking Barriers to Employment for Mothers in Planning District 16."* The project aims to support approximately 154 mothers enrolled in Healthy Families Rappahannock Area by providing employment readiness training, financial literacy education, and workforce connection opportunities to promote family stability and economic self-sufficiency.

   The Board moved to approve the Grant Application
   ACTION TAKEN: The Board approved the Grant Application
   Moved by: Mr. George Dallas
   Seconded by: Ms. Bridgette Williams

*The Board took a ten-minute break*

G. FINANCE, *Ms. Sara Keeler*

1. **Program Update** – Ms. Keeler reported that Kerlos Amir, Accounting Coordinator, resigned effective Friday. She also shared that Edward Laban has joined the agency as Financial Analyst and comes with strong references.
2. Ms. Keeler reviewed the Summary of Cash Investments.
3. Ms. Keeler reviewed the Other Post Employment Benefit.
4. Ms. Keeler reviewed the Health Insurance.
5. Ms. Keeler reviewed the Summary of Investments.
6. Ms. Keeler reviewed the Fee Revenue Reimbursement and Collections.
7. Ms. Keeler reviewed the Write-Off Report.
8. Ms. Keeler reviewed the Payroll Statistics.

Mr. Zurasky noted discrepancies in the Write-Off Report, observing that the Non-Covered Service totals did not align between November's Current Month-to-Date and December's Prior Month-to-Date figures. Ms. Keeler explained that the reports reflect a snapshot in time and that figures may continue to change after reporting deadlines. She indicated she would follow up with the Reimbursement

Coordinator for clarification and will review the reporting process to ensure consistency in the numbers presented to the Board.

During discussion of overtime hours, Mr. Zurasky asked which programs account for the majority of overtime. Ms. Keeler reported that overtime primarily occurs within Residential services. When asked about a target overtime level, Ms. Keeler stated the budget assumes zero overtime and that leadership monitors trends and unexpected increases. Mr. Wickens added that while the goal remains zero overtime, the agency has not yet achieved that target.

9. Ms. Keeler reviewed the Financial Summary.

Mr. Zurasky noted an error in the December financial summary under the Substance Abuse table (page 138), specifically related to the Expenditures Budget amount and percentage. Ms. Keeler stated that the correction had previously been made and she was unsure why the update did not save; she will review the report and make the necessary corrections.

The Board moved to approve the financial summaries for November and December, subject to necessary corrections.
ACTION TAKEN: The Board approved the financial summaries for November and December, subject to necessary corrections.
Moved by: Mr. Matthew Zurasky
Seconded by: Ms. Carol Walker

H. HUMAN RESOURCES, *Mr. Derrick Mestler*

1. **Program Update** – Mr. Mestler reported on several initiatives related to the strategic plan. He shared that Human Resources has begun providing feedback to employees regarding the January employee engagement survey, which achieved over 60% participation. Directors are currently reviewing results and finalizing action steps, including follow-up communication to employees and updates for the Board.

   Mr. Mestler also reported that the agency has engaged the University of Mary Washington's Office of Continuing Professional Studies to conduct a Leadership Assessment. The assessment will help identify gaps in leadership development and inform the creation of a structured leadership education program for current and future RACSB leaders.

   Additionally, Mr. Mestler noted that he attended the Rappahannock Region Healthcare Collaborative.
2. **Applicant and Recruitment Update –** Mr. Mestler noted that for the month of January, RACSB received 376 applications. Of the applications, 43 applicants listed the RACSB applicant portal as their recruitment source, 29 stated employee referrals as their recruitment source, and 300 listed job boards as their recruitment source. At the end of January, there were 30 open positions, 19 full-time, 11 part-time.

3. **Turnover Report** – Mr. Mestler reported that Human Resources processed a total of five employee separations during the month of January, including four voluntary separations and one involuntary separation. Ms. Terry inquired about the positions held by departing staff. Mr. Mestler noted that the information was not available by position but referred Board members to page 146 of the packet, where separations are detailed by organizational unit.

I. DEPUTY EXECUTIVE DIRECTOR, *Ms. Brandie Williams*

1. **Program Update** – Ms. Williams reported that DBHDS and CSBs continue coordination related to the Enterprise Data Warehouse (EDW) and HL7 Expansion cycle. RACSB remains the lead Netsmart CSB for MyAvatar users following the June 30, 2025 go-live and is utilizing a new data quality dashboard to improve error tracking and resolution. RACSB also chairs the DMC Data Mapping Workgroup supporting integration of reporting requirements into the EDW. Final HL7 expansion specifications have been released to vendors.

   Ms. Williams further noted that the VACSB Administrative Policy Committee continues Performance Contract negotiations with DBHDS. DBHDS performance dashboards remain unavailable during the EDW transition, and RACSB participated as a beta tester, recommending additional development prior to release.
2. **Legislative Updates & Priorities –** Ms. Williams reported that RACSB continues to support advocacy efforts through participation in the Virginia Association of Community Services Boards (VACSB), which monitors legislation and advocates for behavioral health services statewide. Alison Standring and Brandie Williams represent RACSB on the VACSB Public Policy Committee.

   Ms. Williams reviewed key items from the Governor's introduced budget, including DBHDS funding and program changes, grants-to-localities adjustments, and DMAS proposals affecting crisis services, developmental disability waiver services, and behavioral health redesign. Ms. Williams will continue monitoring legislative developments and their potential impact on RACSB services.

   Mr. Wickens then directed Board members to page 160 of the Board packet and highlighted Health Bill HB1282 regarding licensure by endorsement for licensed substance abuse treatment practitioners, introduced by Board member Ms. Bridgette Williams. Mr. Wickens invited Ms. Bridgette Williams to provide an update. Ms. Bridgette Williams reported that the bill has passed the House, advanced to the Senate with unanimous support. She expressed appreciation for the Board's recognition.
3. **RACSB Strategic Plan Second Quarter Update** – Ms. Brandie Williams reported that implementation of the Strategic Plan continues to progress, with programs beginning to measure outcomes and demonstrate progress toward established goals. She noted that all programs have developed quantifiable measures for both effectiveness and access objectives,

representing a significant milestone for several areas. Tentative benchmarks have been established to track performance as metrics are implemented and monitored.

## IX. REPORT FROM THE EXECUTIVE DIRECTOR, *Mr. Joseph Wickens*

Mr. Wickens reported that Governor Abigail Spanberger has appointed Daryl Washington, Executive Director of the Fairfax-Falls Church Community Services Board, as Commissioner of the Virginia Department of Behavioral Health and Developmental Services. Mr. Wickens noted that Mr. Washington's appointment is encouraging given his familiarity with CSB system strengths and challenges.

Mr. Wickens also recommended moving regular Board meetings from the third Tuesday of the month to the fourth Tuesday to allow additional time for staff to compile and review reports prior to distribution. He explained that programs currently work under tight timelines to prepare materials and that the additional week could improve report stability and review time. Board members discussed potential impacts, including concerns about financial reporting timelines and individual scheduling conflicts. Staff noted that the long-term goal is to finalize prior-month financial information by mid-month to support improved reporting timelines.

Following discussion, Mr. Parcell recommended tabling the matter until the next Board meeting to allow members time to review their schedules and consider the proposed change. The Board agreed to revisit the discussion at the next meeting, and the upcoming meeting will remain scheduled for the third Tuesday.

Mr. Wickens reported on the agency's response to the recent snowstorm which resulted in a four-day office closure. He noted that several outer county clinics were able to reopen sooner as road conditions improved. Mr. Wickens commended staff and leadership for quickly adapting operations to ensure continuity of services, including the use of telehealth for outpatient services. He recognized staff efforts to maintain operations under challenging conditions and shared that he signed fifty-two letters acknowledging employees who went above and beyond during the event. In response to a question from Mr. Zurasky, Mr. Wickens confirmed that no facility damages were reported.

## X. BOARD TIME

A. Ms. White congratulated Ms. Jindra on her fifteen years of service and expressed appreciation to her staff for their hard work during the recent storm. She also commended Ms. Wagaman on her presentation and thanked the Finance team for their continued efforts. Ms. White noted interest in exploring survey opportunities with younger populations due to increasing concerns related to vaping in schools and expressed appreciation to Ms. Williams for her advocacy efforts.
B. Ms. Gayle, thank you for all that you do. I'm really looking forward to the results of the Young Adult Survey to see how that impacts our community.
C. Ms. Walker, thank you everyone, appreciate your service, congratulations Brandie, I've done some conferences as well and to have you in the top ten every time that's great. As always, I appreciate the detail everyone gives as well as the transparency.
D. Mr. Dallas, thanks for the great ice storm support, truly is amazing, the vignettes in report were pretty fun to read of the service given. Diana, thank you for handling my

inquiry I sent you. I'm also interested in any ride around program you may have so I can get better context and understanding.

E. Ms. Curcio, I enjoyed reading about the storm collaboration, thank you for putting that kind of detail in the reports for us, I'm also very impressed with the changes in the accuracy of the reporting so thank you.
F. Ms. Beebe, thank you everybody, great job Brandie, always enjoy Michelle's report, congratulations Amy on fifteen years. Great job with the snow.
G. Ms. Williams, she said it all, and I'm glad HR didn't fire anyone.
H. Ms. Terry, special thank you to all the employees who received service awards and congratulations to them. I'm looking forward to the Young Adult Survey and the progression of that. I enjoyed seeing the Valentine's Day sale and I'm looking forward to the Spring sale as well. It's nice to see that Home Road is 100% occupied. I also want to say thank you to all the staff who persevered through this weather because that ice was treacherous. The point-in-time survey, a shout out to all, I saw so many great things, I even tried to write down names but my list became so long-so just kudos to everyone there. Great work to Healthy Families and good luck on their visit. I would love to hear an update about that at our next meeting. I will be back to support with the birthday event – I have some donations that you're collecting for that project. Great work with compliance, finance and HR. Thank you to Brandie, Alison, and also Ms. Williams for being such a strong voice and advocate for us.
I. Mr. Zurasky, thank you Mr. Wickens for sending out those appreciation letters to staff. I wondered how we were going to recognize people and I appreciate that people got recognized for their extra efforts. I also want to say my thanks for everyone who made sure our clients had their needs meet at that time.
J. Mr. Sokolowski, thank you. I'm glad to see we are all in one piece after the storm. Glad to see everyone is healthy.
K. Mr. Parcell, thank you everyone for the great reports. Looking back a year from now we are in a much better place from an initial performance side, we have received our first read out of the strategic plan also we are going to see a much more refined version of our actual reporting, so please reach out to Mr. Wickens if there are ways the Board can better support you in your jobs let us know. If there are ways we can better provide you feedback in these sessions let us know and we will talk about those and go over it. Thank you for all the hard work, it really means a lot.

## XI. CLOSED MEETING – VA CODE § 2.2 – 3711 A (4), A (7), and A (15)

Mr. Parcell requested a motion for a closed meeting. Matters to be discussed:
- CRC

It was moved by Mr. Parcell and seconded by Mr. Zurasky that the Board of Directors of the Rappahannock Area Community Services Board convene in a closed meeting pursuant to Virginia Code § 2.2 – 3711 A (4) for the protection and privacy of individuals in personal matters not related to public business; and Virginia Code § 2.2 – 3711 A (15) to discuss medical records excluded from 2.2 – 3711 pursuant to subdivision 1 of 2.2 – 3705.5.

The motion was unanimously approved.

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

A roll call vote was conducted:

Greg Sokolowski – Voted Aye
Nancy Beebe – Voted Aye
Susan Gayle – Voted Aye
Ashley Terry– Voted Aye
Melissa White – Voted Aye
Claire Curcio – Voted Aye
Jacob Parcell – Voted Aye
Matthew Zurasky – Voted Aye
Bridgette Williams – Voted Aye
Carol Walker – Voted Aye
George Dallas – Voted Aye

The meeting adjourned at 6:16 PM.

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Board of Directors Chair Executive Director