Rappahannock Area Community Services Board
Board of Directors October 2026 Meeting Minutes

Attendees: *Claire Curcio, George Dallas, Susan Gayle, Phyllis Guasp, Ken Lapin, Jacob Parcell, Ashley Terry, Caroline Teter, Carol Walker, Melissa White, Bridgette Williams, Matt Zurasky*
Absent: *Nancy Beebe, Karen Sokolowski*

I. Call to Order

The meeting was called to order at approximately 3:00 p.m. Mr. Zurasky presided while Mr. Parcell was delayed in traffic. A quorum was present.

II. Minutes, Board of Directors, September 15, 2026

Ms. Williams moved to approve the September 15, 2026 Board of Directors meeting minutes as presented. Ms. Walker seconded the motion. The motion carried unanimously.

III. Public Comment

No members of the public offered comment.

IV. Employee Service Awards

Mr. Wickens recognized employees for service milestones, including five-year honorees Carly Hecker, Keeyana Lee (not present), Suli Lisk, Tarah Stanley (not present), and Christina Turberville; ten-year honoree Laurie Strother; fifteen-year honoree Judy Thompson; and twenty-five-year honoree Stephen Curtis. Honorees in attendance expressed appreciation for their colleagues and the opportunity to serve RACSB.

V. Employee of the First Quarter

Mr. Wickens recognized Amenah Heath, Assistant Coordinator of Mental Health Residential, as FY2027 First Quarter Employee of the Quarter. Ms. Heath expressed gratitude for the recognition and her coworkers. Mr. Zurasky commended the inspiring nominations and thanked RACSB employees for their contributions.

VI. Board Core Behaviors

The Board was reminded of the importance of communicating honestly and openly during its deliberations.

VII. Crisis Receiving Center Presentation

Ms. Jen Weatherford of Worley Associates Architects reviewed the proposed Crisis Receiving Center renovation, including separate youth and adult intake, 23-hour observation and crisis stabilization areas, secure law-enforcement access, shared clinical support spaces, safety and accessibility features, and limited second-floor work. Staff described the anticipated assessment, stabilization, and discharge process. In response to Board inquiries, the presenter clarified the loading-dock elevation and covered sally port, the condition and possible future use of the second floor, and the placement of electrical equipment. Leadership also discussed recently approved federal Center for Medicaid Service (CMS) waiver flexibility affecting crisis stabilization bed limits and emphasized that the facility had been deliberately designed around the requirements known during planning.

VIII. Program Reports

A. Community Support Services

1. Program Update

Ms. Fisher-Curtis reported upcoming RAAI community activities, including Trunk or Treat and participation in the Spotsylvania Christmas parade. Developmental Disability Residential launched an electronic medication administration record on October 1. Former Support Coordination Coordinator

Jennifer Acors received an ARC Catalyst for Change award. All individuals formerly served at Home Road had transitioned to community placements. In response to a Board inquiry about donations to the Kenmore Club yard sale, staff explained that donations were accepted at Kenmore Club weekdays during October, from 8:00 a.m. to 4:00 p.m., with details shared through social media.

2. Developmental Disabilities and Mental Health Residential Vacancies

Three individuals moved into Developmental Disability apartment programs, with another move-in anticipated in November; group-home vacancies remained under assessment. Liberty and River were full, while Lafayette had three vacant beds. Leadership noted that decisions about filling those beds must consider forthcoming Community Psychiatric Support and Treatment (CPST) service changes. Permanent Supportive Housing served 84 individuals and reported seven open slots.

B. Crisis Intervention Services

1. Program Update

Ms. Jindra reported that the agency was exploring properties for a peer-led wellness center and had filled an ACT vacancy. Sunshine Lady House anticipated having three full-time nurses by the end of October. In response to a Board question about the return of former nurses, staff explained that two former employees returned following changes in their circumstances and a PRN nurse elected to become full time after scheduling and staffing adjustments. Staff also met with Department of Veterans Services representatives to discuss emergency custody and detention processes.

2. Emergency Services Emergency Custody Order/Temporary Detention Order

Emergency Services completed 234 prescreenings in September, including 67 under emergency custody orders and 87 involving temporary detention orders. Three individuals were admitted to state hospitals, an unusual occurrence for the service area.

3. Emergency Services Crisis Intervention Team and Co-Response

Fifteen individuals were transferred from law enforcement custody at the crisis assessment location, where hours remain reduced because of funding constraints. Co-response teams served 32 individuals in Spotsylvania and 33 in Stafford; the Fredericksburg team was expected to begin operations by the end of November. Twenty-four law-enforcement officers completed Crisis Intervention Team training. In response to an inquiry about refresher training, staff described topic-specific refresher opportunities rather than routinely repeating the full course.

4. Sunshine Lady House Utilization

Sunshine Lady House reported 53 percent utilization. Four individuals self-referred, although two required a different level of medical care. The program served another individual under a temporary detention order, bringing the total to four since July. Staff highlighted that some individuals subsequently chose to remain or return voluntarily after their involuntary legal status ended.

C. Clinical Services

1. Program Update

Ms. Kobuchi described clinical training opportunities and the expansion of therapy groups to increase access and provide services responsive to community needs. Dr. Williams will transition into the Medical Director role in February ahead of Dr. Young’s April retirement. A long-serving locum tenens psychiatrist accepted a permanent position beginning in November, supporting continuity of care and reducing contract staffing costs.

2. State Hospital Census

Thirty-two individuals from the RACSB service area were receiving care in state hospitals, including eight new admissions during the reporting period; six individuals had been discharged. Staff described continuing efforts to secure community placements for individuals facing extraordinary discharge barriers, including one person accepted to a group home and awaiting an available opening.

3. Same Day Access

Same Day Access continued to serve a substantial number of individuals, while scheduled intake appointments accommodated transportation needs, parents' work schedules, and children's school schedules. Stafford Clinic intake capacity was expected to improve following the start of a newly hired employee in mid-October.

4. State Opioid Response Award

RACSB received a State Opioid Response award of $868,586.88 for the federal fiscal year beginning in October, less than the total requested but sufficient, together with service billing, to continue medication-assisted treatment services, including care for uninsured individuals.

D. Compliance

1. Program Update

The written Compliance program update was provided without additional discussion.

2. Licensing Reports

Ms. Terrell presented three approved corrective action plans. One concerned a late incident report; staff explained that repeated late reporting within a rolling twelve-month period could affect licensure. Two reports arose from related concerns about staff conduct, including delayed reporting and an incident involving inappropriate physical contact with an individual. Leadership explained that the separate reports were unusual because related findings are often combined.

Ms. Williams moved to accept the licensing corrective action plans as presented. Ms. Curcio seconded the motion. The motion carried unanimously.

3. DRPT Grant Compliance Review

Mr. Curtis reviewed RACSB's first Department of Rail and Public Transportation compliance review and reported a favorable result with limited policy and documentation findings. The approximately $303,000 grant supports about 80 percent of the purchase cost of five accessible vehicles. Board members asked about vehicle cost, fleet size, replacement criteria, maintenance, fleet management, and adequacy of current transportation resources. Staff explained that vehicle costs vary by configuration, that the fleet includes approximately 80 vehicles, and that replacement decisions rely on mileage, condition, program demand, and monthly tracking. The agency generally provides the 20 percent match and may reinvest eligible proceeds from disposed grant-funded vehicles. Staff also described centralized fuel tracking and fleet oversight by Clark Thomas.

4. CARF Report

Ms. Terrell reported that CARF surveyors reviewed nine program areas against 1,891 standards and issued only six recommendations: two concerning health and safety, two technology, one medication management, and one program structure. The quality improvement plan was submitted and approved. Board members praised the exceptionally favorable findings and the work of the Compliance team and agency staff. The next survey is anticipated in approximately two years.

E. Communications

1. Monthly Update

Ms. Umble reported strong participation in the employee and family picnic and described Mission: HopeStarter, a new agency-wide initiative connecting employees with RACSB's mission and the work of other programs. Participation represented a broad cross-section of agency locations and roles.

2. Communications Report October

Communications continues extensive work to meet the April digital-accessibility deadline, including remediation of historical Board packets and online content. Staff emphasized that accessibility supports both regulatory compliance and public access to RACSB services.

F. Prevention & Early Intervention

1. Program Update

Ms. Wagaman reported that Early Intervention and Infant and Toddler Support Coordination employees transitioned to remote work, allowing RACSB to discontinue a leased office. Healthy Families graduated twelve families. Teen Mental Health First Aid instruction resumed at Caroline and James Monroe high schools, continuing a multi-year partnership with school divisions. Staff highlighted suicide-prevention outreach, safe medication disposal activities, and Ms. Wagaman's statewide Collaboration Champion recognition.

2. State Opioid Response (SOR) Prevention Funding FY2027

Prevention received $255,719.80 in State Opioid Response prevention funding to support prevention specialist positions, REVIVE! training supplies, community outreach, and ACE Interface presenter training.

3. Healthy Families Grant Application

Ms. Wagaman requested approval to apply for $125,294 through the Virginia Department of Health Maternal Care Initiative to support a full-time home visitor dedicated to Caroline and King George counties. The position would focus on maternal support, relationship-building, and connections to community resources, without Medicaid-targeted case management, and would be fully grant-funded.

Ms. Terry moved to approve the Healthy Families grant application as presented. Ms. White seconded the motion. The motion carried unanimously.

G. Finance

1. Program Update

Ms. Brandie Williams provided the monthly update and reviewed the financial reports and timing of reimbursements and restricted funding.

2. Summary of Cash Investments

The Board reviewed the summary of cash investments.

3. Health Insurance

The health insurance report was included in the Board packet.

4. Summary of Investment

The Board reviewed the investment summary.

5. Fee Revenue Reimbursement

The Board reviewed fee revenue reimbursement results.

6. Write-off Report

The Board reviewed write-off activity and the impact of delayed reimbursements and Medicaid spend-down amounts on reported balances.

7. Financial Summary, August

Ms. Brandie Williams explained material timing and restricted-fund items affecting the August financial results. Permanent Supportive Housing included substantial restricted carryforward funds; DBHDS denied an initial exception request to redirect a portion toward the Crisis Receiving Center, and RACSB appealed. Ms. Williams also described pending Marcus Alert carryforward authorization, web-grant reimbursements, spend-down receivables, and other amounts owed across mental health, substance use, jail, and community programs. Board members questioned the apparent Permanent Supportive Housing surplus, potential uses of restricted balances, and favorable Developmental Disability residential variances. Management clarified that timing and carryforward amounts do not

represent unrestricted operating revenue and agreed to continue developing reporting that emphasizes service capacity and utilization. After excluding restricted and pass-through amounts, the adjusted favorable net result was approximately $1,675,847.08.

Ms. Gayle moved to approve the August financial summary as presented. Ms. Walker seconded the motion. The motion carried unanimously.

8. Local Funding Request

Ms. Brandie Williams presented the FY2028 joint locality funding request of $2,551,811, approximately $477,000 above the prior approved amount. The request was structured to support the statutory minimum local contribution relative to state funding. Ms. Williams explained that local allocations are informed by the distribution of individuals served and that RACSB provided more than $2.3 million in financial assistance while receiving approximately $2 million in locality support in the prior year. Board members asked when localities consider the requests, whether elected officials receive information beyond the standardized application, and how RACSB could better communicate return on investment and service outcomes. Ms. Williams described the limitations of the application format, prior presentations to local governing bodies, and interest in renewed peer-locality funding comparisons. Board members encouraged stronger direct advocacy and sharing of community impact information.

Mr. Lapin moved to approve submission of the FY2028 local funding request as presented. Ms. Guasp seconded the motion. The motion carried unanimously.

H. Human Resources

Human Resources presented earlier in the meeting than its position on the printed agenda.

1. Program Update

Mr. Mestler reported that the annual employee engagement survey had launched and approximately 20 percent of employees responded on the first day. Results will be reviewed later in the year to assess progress on employee engagement priorities.

2. Applicant and Recruitment Update

Applicant flow remained strong. At the end of September, approximately 25 positions were posted, and Human Resources continued monitoring vacancies and internal promotional opportunities.

3. September Turnover Report

Turnover continued to follow the seasonal downward trend observed in recent years. Seven separations were reported for September, all voluntary.

I. Deputy Executive Director

1. Monthly Update

Ms. Brandie Williams highlighted the October launch of an electronic medication administration documentation platform and an automated appointment reminder system offering text and telephone confirmations, cancellations, and rescheduling. Ms. Williams continued addressing electronic health record reporting errors and participating in planning for state waiver management system updates and replacement.

2. Legislative Updates and Priorities

Ms. Brandie Williams reviewed preliminary DMAS and DBHDS budget requests ahead of the Governor’s proposed budget. Leadership expressed concern about a proposal to reduce reimbursement for mobile crisis, 23-hour crisis stabilization, and crisis stabilization services by approximately 20 percent to fund the new CPST benefit. Ms. Williams also discussed the transition away from legacy behavioral health services, the need for adequate developmental disability waiver rates, and a requested increase in Part C Early Intervention funding. Another concern was the proposed transfer of funds from allocations intended for direct CSB support to central-office funding,

potentially increasing administrative burden and reimbursement delays. RACSB will continue monitoring and advocating on these issues.

IX. Report from the Executive Director

Mr. Wickens reminded members of the Stafford program tour scheduled for October 27 and the Board of Directors Holiday Celebration scheduled for December 15. He thanked Board members and staff for their participation and support.

X. Board Time

Board members expressed appreciation for the Crisis Receiving Center design and the planning behind it, as well as the service-award recipients and the many agency accomplishments presented. Members commended the CARF survey results, DRPT grant and compliance review, opioid-related funding, Prevention & Early Intervention recognition, expanded high-school mental health education, clinical service improvements, and staff efforts to connect individuals with meaningful supports. Several members commented on the value of client success stories and shared positive community feedback about RACSB services. A member also emphasized the importance of stronger advocacy for local financial support. Board members thanked staff for their work and commitment to the community.

XI. Closed Session- VA CODE § 2.2 – 3711 A (4), A (7), and A (15)

Mr. Parcell requested a motion for a closed meeting.

It was moved by Ms. Curcio and seconded by Ms. Walker 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.

Matters to be discussed:

CRC, Peer-Led Wellness Stay Program and Legal Case

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.

Ms. Ashley Terry departed the meeting at 6:00 p.m.

A roll call vote was conducted:

Claire Curcio-Voted Aye	George Dallas- Voted Aye
Susan Gayle-Voted Aye	Phyllis Guasp-Voted Aye
Ken Lapin-Voted Aye	Caroline Teter-Voted Aye
Carol Walker-Voted Aye	Melissa White-Voted Aye
Bridgette Williams-Voted Aye	Matt Zurasky-Voted Aye

The meeting adjourned at 6:11 PM.

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Board of Directors Chair Executive Director