



**VIRTUAL MEETING  
OF THE  
BOARD OF DIRECTORS**

**Thursday, February 25, 2021, 5:00 p.m.**

**Board Officers**

Thomas F. Morehouse, III, **Chair**

Venerria Thomas, **Vice Chair**

Steven Bond, Esq., **Treasurer**

June R. Owens, **Secretary**

**Members of the Board of Directors**

Ann Abdullah      Sheriff Karen Bowden

Chris Bowman      Steven Brown

Arva Davidson      Randie Dyess, Jr.

Jane Hobbs      Charisse Mullen

Mary Stewart      Elva Williams Hunt



## *V i s i o n*

*The Hampton-Newport News Community Services Board is the premier provider of behavioral health and intellectual and developmental disability services. We are recognized throughout Virginia for our leadership, excellence and commitment to service. We earn this distinction by creating a community where people can find their own strength and become self-determining.*

## *M i s s i o n*

*To provide a comprehensive continuum of services and supports promoting prevention, recovery, and self-determination for people affected by mental illness, substance use, and intellectual and developmental disabilities, and advancing the well-being of the communities we serve.*



## **Strategic Planning Goals (2017 - 2021)**

### **Strategic Objective #1**

**Continue to develop the administrative systems and service array necessary to maintain and further Hampton-Newport News Community Services Board's reputation as THE premier provider in the context of the changing Virginia's behavioral health system.**

### **Strategic Objective #2**

**Pursue further revenue diversification and expansion of services, supports and prevention activities so that Hampton-Newport News Community Services Board can improve the quality of life for the individuals, families and communities we serve.**

### **Strategic Objective #3**

**Celebrate and communicate the Hampton-Newport News Community Services Board's performance and reputation as a center of excellence and center of influence, through on going engagement of the community we serve.**

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### ***Red Folder Items***

- - - *Committee Reports: Nomination & Selection; Budget, Finance & Audit; Community Relations / Governmental Affairs*
- - - *Media Articles*



**DATE:** February 18, 2021  
**TO:** Members of the Board of Directors  
**FROM:** Natale Christian, Executive Director  
**SUBJECT:** **Virtual Meeting of the Board of Directors  
February 25, 2021 at 5:00 p.m.**

Dear Members of the Board:

February has proven to be a very busy yet productive month. Thank you for your time and attention as we set our priorities for the remainder of this fiscal year. As you may recall, this month employees will receive the one time supplemental payment due to their hard work and dedication shown during the pandemic.

This month, we have three Standing Board Committee Meetings. **The Nominations and Selection Committee met on Thursday February 4 at 2:00 p.m., the Budget, Finance, and Audit Committee will meet on February 22 at 4:00 p.m., followed by the CRGA meeting at 4:30 p.m.** As a reminder we will continue to meet virtually and Zoom links will be sent out in advance.

Please remember that all Board Standing Committee Meetings are open to Members of the Board of Directors for the Hampton-Newport News Community Services Board.

We look forward to meeting with you next week.

NWC:jj  
Enclosures

# **ELECTRONIC MEETING OF THE BOARD OF DIRECTORS**

**Thursday, February 25, 2021, 5:00 p.m.**

## **A G E N D A**

- 1. Welcome & Call to Order**
- 2. Remarks of the Chair**
  - COVID-19 Pandemic Statement
  - Electronic Meeting Special Rules
  - Meeting Roll Call
- 3. Public Comment Period**
- 4. Action Items**
  - **A-1.** Minutes of the Board of Directors Meetings January 28, 2021
  - **A-2.** Recommendations of Nomination and Selection Committee  
Board of Director Appointment and Reappointments
- 5. Standing Board Committee Reports**
  - Nomination and Selections
  - Budget, Finance and Audit
  - Community Relations and Governmental Affairs
- 6. Information Items**
  - **I-1** COVID-19 Update
  - **I-2** Legislative Update
- 7. Clinical Division Program Highlights**
  - Program Overview, Peer Recovery Services ~ Renee Cox, Program Coordinator
- 8. Adjournment**

## MEETING OF THE BOARD OF DIRECTORS

Thursday, February 25, 2021, 5:00 p.m.

### Electronic Meeting Special Rules

While the Commonwealth of Virginia remains under the current State of Emergency due to the COVID-19 Pandemic, Members of the Board of Directors for the Hampton-Newport News Community Services Board, an entity of local government, shall conduct its monthly Board of Director Meetings by synchronous electronic medium as a way of providing immediate, spontaneous interaction between meeting participants. This opportunity comes to Members of the Board of Directors under the legal opinion of CSB Counsel, Patrick McDermott, Esq., in compliance with the legal opinion of State Attorney General Mark Herring to the Commonwealth of Virginia dated March 20, 2020.

Special Rules, or conduct, of the Board of Directors for the Hampton-Newport News Community Services Board during the use of electronic meetings shall be as follows:

1. **Ample Notice of Electronic Meetings** shall be provided to Members of the Board no less than one week before the scheduled meeting(s) and shall provide:
  - a. The date and time of the meeting; and
  - b. The telephone number and access code to connect to the electronic meeting.
2. **All Members of the H-NNCSB Board of Directors shall call into Electronic meetings 15 minutes before the start of scheduled meeting(s);** and announce themselves at the first opportunity after joining the meeting, but may not interrupt a speaker for the purpose of doing so.
3. Once Members announce themselves after joining the meeting, **it is respectfully requested that the Member “Mute”** their personal telephones so as not to interrupt the meeting with background noise.
4. **Technical Malfunctions and Requirements.** Each Member is responsible for his or her own connection to the telephone conference call; and no action shall be invalidated on the grounds that the loss of, or poor quality of, a Member’s individual connection prevented him or her from participating in the meeting.

- 5. Once the meeting is called to order by the Board Chair, a verbal Roll Call will be taken** to: (1) confirm meeting participants, (2) confirm that a Board Meeting quorum exists; and (3) take note of any Members of the Public present on the call.

*Please note that a Roll Call may be requested by any Member of the Board following the departure of any Member, or following the taking of any Vote for which the announced totals add to less than a quorum.*

- 6. To seek recognition by the Board Chair and obtain the floor during the Electronic Meeting**, a Member shall address the Chair, and state his or her own name to be recognized, but may not interrupt a speaker for the purpose of doing so. The Board Chair shall call the name of the Member who wishes to be recognized in the order of the request.
- 7. All Motions** are to be made orally by Members once obtaining the floor or being recognized by the Board Chair.
- 8. All Votes** shall be taken by roll call, except that only the number of votes on each side and the number of members present, but not voting, shall be entered into the minutes unless the Board orders a fully recorded roll-call vote. **Business may also be conducted by unanimous consent.**
- 9. Members needing to disconnect** from the meeting prior to adjournment shall announce their departure as soon as practical, but may not interrupt a speaker for the purpose of doing so. *It is respectfully requested that Members of the Board do not disconnect from the electronic meeting during the Motion or Voting process.*

## **ACTION ITEMS**

February 25, 2021

### **A-1. Board Approval of the Minutes of the Board of Director Meetings from January 28, 2021**

**Issue:** Board Approval of the Minutes of the Board of Director Meetings held on January 28, 2021.

**Background:** Minutes of the Board are provided to Members of the Board of Directors for their review in Board packet distributed on February 18, 2021.

**ACTION:** Board approval of the Minutes of the Board of Director Meetings held January 28, 2021.

**Enclosure:** January 28, 2021 meeting Minutes.

### **A-2. Nomination and Selection Committee Recommendation**

**Issue:** FY2022 Board of Director Membership

**Background:** Members of the Nomination and Selection Committee held their meeting on Thursday, February 4, 2021 at 2:00 p.m. to discuss Board Membership scheduled to expire on June 30, 2021, in the cities of Hampton and Newport News. At the Board of Directors Meeting scheduled on Thursday, February 25, 2021, Members of the Nomination and Selection Committee will recommend that the Board approve the reappointments of Hampton Board Members and the appointment of a new member for the vacancy in the City of Newport News. Please be advised that specific information regarding upcoming appointment and reappointments will be provided at the Board of Directors Meeting.

**Action:** Board approval of the reappointment of Members of the Board of Directors whose Membership terms are scheduled to expire on June 30, 2021, and the appointment of a new member to fill the vacancy in the City of Newport News.

## INFORMATION ITEMS

### **I-1. COVID-19 Update**

As we enter the New Year, the Agency continues to offer remote services for most Agency programs in order to help contain the spread of COVID-19. The month of January was by far the most active in number of staff who tested positive with a total of 24 employees, compared with 11 employees for the months of November and December. Since the tracking of COVID-19 cases began in March of 2020, 65 staff have tested positive as of January 31st. By comparison, approximately 350 staff have tested negative since March. Most negative tests were the result of staff who were required to test after working in the workspace with other staff who tested positive.

The Agency experienced a number of positive cases among both staff and clients in our Residential sites and one of our day programs. Bright Beginnings day program remained closed for the last several days of the month due to multiple positive cases. The Agency has been diligent in requiring testing for all staff when there is a positive case in a program. We continue to practice safety measures that have been helpful in identifying cases early on, and we have swiftly made staffing adjustments as necessary to help contain the spread.

During the month, we developed processes and obtained equipment that allows Agency medical staff to provide rapid testing to individuals seeking admission to programs such as the Regional Crisis Stabilization Center and the Southeastern Family Project. Providing onsite testing will allow admissions to occur in a more timely manner as testing in local hospitals is not always readily available. The Agency continues to have an adequate supply of personal protective equipment (PPE) and back fills orders as needed to ensure that staff have the necessary equipment to safely perform their duties. Additional supplies will be ordered to assist staff with carrying out the rapid testing which requires full protective dressing during administration.

Several staff were able to obtain the COVID-19 vaccine through partnership with Riverside Hospital. Although the initial plan was to obtain the vaccine through the Virginia Department of Health (VDH), we found it difficult to obtain the vaccine supply and were fortunate to be able to partner with Riverside to provide this opportunity to our staff. Approximately 300 staff registered to receive the vaccine. Several individuals residing in our Residential programs also received the vaccine and several more are scheduled to receive it in early February. While the Agency is not requiring the vaccine at this time, we are strongly encouraging all staff to get vaccinated. We continue to work on educating the staff about the vaccine and have launched a series of video testimonials from Agency leadership personnel who have received it.

## **I-2. Legislative Update**

### **General Assembly Regular Session Overview**

The legislature adjourned its regular session on Monday February, 8, 2021, with legislative work only half complete, and immediately prepared to reconvene in a special session on Wednesday, February 10, 2021, to finish the job. Responding to the pandemic is one of the major legislative areas still unresolved. Since convening on January 13<sup>th</sup>, each chamber has finished work on its own bills and sent them to the other for consideration. Due to a procedural issue, the regular session was kept to 30 days instead of the customary 46 for an odd-numbered year. Governor Ralph Northam called a special session beginning on February 10<sup>th</sup>, to make up the difference.

### **General Assembly Budget**

The House and Senate have not acted on revisions to the \$141 billion two-year budget that Gov. Ralph Northam introduced in December. The assembly money committees have delayed the release of their budgets because of the transition between the regular session and the special session. They also await announcement, later in the month, of the additional revenue the state is expected to collect from income, sales and other taxes to support the general fund for core government services.

Earlier this month, we sent, to the eight legislators representing our area, the following communication regarding our support of specific budget amendments.

*The Hampton-Newport News Community Services Board supports the following Budget Amendments to the 2020-2022 Biennial State Budget*

### **Developmental Disability Retainer Payments**

- **313 7h Hope**
  - [GF \$45M GF (FY21)] Developmental Disability Retainer payments for 1/1 – 6/30/21 based on 65% of authorization of 2/1/20
- **313 16s Hanger**
- **313 22s Lucas**
- **313 30s Barker**
  - [GF \$35M (FY21)] Developmental Disability Retainer payments for 1/1 – 6/30/21 based on 65% of authorization of 2/1/20
- **313 14h Hope**
  - [GF \$35M (FY21)] Developmental Disability Retainer payments for 1/1 – 6/30/21 based on average monthly retainer from 4/1 – 7/31/21

*H-NNCSB fully supports a continuation of CARES Act subsidies to supplement funding of our day support program for individuals with developmental disabilities (Creative Options).*

### **Waiver Slots and Rates**

- **313 29h Sickles**

- [GF \$7M / NGF \$7M] Add 425 Family and Individual Support (FIS) waiver slots
- 313 6s Barker
  - [GF \$34.9M / NGF \$34.9M] Add 2,109 Family and Individual Support (FIS) waiver slots
- 313 24s Barker
  - [GF \$48.7M / NGF \$48.7M] Updates rates for Developmental Disability Waivers based on the most recent rebasing efforts
- 313 8s Barker
  - [GF \$1.7M / NGF \$1.7M] Raise Supported Living rate to Group Home Rate
- 320 1s Hanger
  - [GF \$350K (FY21)] Rebase of Developmental Disability Waiver Services

*We are thankful for the continued funding of DD Waiver slots, but, there are still thousands of families waiting for critical Waiver services. Receiving a Waiver slot will enable an individual who needs developmental services and supports to live a life that is fully integrated in the community. The H-NNCSB serves approximately 970 adults and children who have developmental disabilities in case management, residential homes, and day support services. Currently our agency has 483 individuals on the Waiver Waiting List.*

#### **Local Inpatient Purchase of Service (LIPOS) Funding**

- 321 1h Reid
  - [GF \$8.8M] Eliminate the local inpatient purchase of service (LIPOS) transfer to DBHDS
- 321 #2s Favola
  - [GF \$8.8M] Eliminate the Transfer of local inpatient purchase of service (LIPOS) Funding to DBHDS Central Office

*Our CSB heavily relies on LIPOS funding for community programming. LIPOS funds should be used to fully reimburse CSBs for their LIPOS expenditures and not diverted to state-managed LIPOS activities.*

#### **Permanent Continuation of Telehealth**

- Item 313 11h Sickles
  - [L] Permanent continuation of telehealth in Developmental Disability Waivers; DMAS shall work with Developmental Disability Waiver Advisory Committee (DDWAC) to establish rate methodologies
- Item 313 28s Vogel
  - [L] Permanent continuation of telehealth in Developmental Disability Waivers; DMAS shall work with Developmental Disability Waiver Advisory Committee (DDWAC) to establish rate methodologies

*H-NNCSB fully supports the permanent continuation of these important allowances for telehealth as this is currently working very well for our staff and the individuals that we serve.*

**MARCUS Alert**

- **Item 322 #3s Boysko**
  - **[GF \$3M] Mental Health Alert System Implementation (For the MARCUS Alert Program - HB 5043 and SB 5038 adopted in the 2020 Special Session I)**

*H-NNCSB supports the goals of the Marcus Alert Legislation and we look forward to working with DBHDS and our law enforcement community partners to design a process that will work best for our communities. While the legislation gives us enough flexibility to meet the spirit of the law while adapting our processes to the communities we serve, we are counting on the General Assembly to provide sufficient funding to do so. The Governor's introduced budget contains \$3M for the first five sites to be implemented by December 1, 2021. The legislation requires a second round of five sites to be implemented by July 1, 2023, so the additional funding needs to be made available in FY22 and included in the base budget to support development and implementation.*

**Medicaid Expansion**

- **322 1h Hudson**
  - **[GF \$9.3M] Restores the CSBs' base funds taken because of Medicaid expansion**

**Permanent Supportive Housing**

- **322 #4s Dunnivant**
  - **[GF \$6.5M] from the general fund the second year to fund 500 additional new permanent supportive housing units**

**Revenue Generated from Marijuana Legalization**

- **479 #4h Freitas**
  - **[L] Direct Portion of Revenue Generated from Marijuana Legalization to Addiction Recovery Programs**

**Behavioral Health Loan Repayment Program**

- **295 #1h Carr**
  - **[GF \$1.6M] Restore Funds for Behavioral Health Loan Repayment Program**
- **295 #1s Deeds**
  - **[GF \$1.6M] Behavioral Health Loan Repayment Program**
- **295 #4s Barker**
  - **[GF \$2.25M] Behavioral Health Loan Repayment Program**

## CLINICAL DIVISION PROGRAM HIGHLIGHTS

### Addiction and Recovery Treatment Services (ARTS)

Anthony Crisp, Director

#### Division Goals

- Goal 1:** *To focus on staff retention and building staff morale by establishing a work climate that fosters teamwork and an appreciation of each person's position and duties.*
- Goal 2:** *To provide services that are person-centered and evidence-based with a primary focus on trauma-informed care, treatment/service engagement, adherence and retention and recovery-based.*
- Goal 3:** *To ensure that Peer Recovery Services are fully integrated in services offered as a means to engage and retain persons served to help persons served reach their recovery pathways.*
- Goal 4:** *To maintain current level of service infrastructure by billing were appropriate and continue to monitor workflow to assure service and billing targets are met.*

#### Overview

**Hampton Roads Clinic (HRC/HRC+):** HRC offers medication assisted treatment (MAT) to adults with a long history of opioid use disorders (OUD). HRC offers a full range of diagnostic and clinical services, which include a clinical and a medical assessment, methadone medications, in-depth substance use education and a full range of counseling, care coordination, and recovery support services.

#### **Number of Individuals Served / Admissions / Discharges:**

During the months of December 2020-January 2021, we served a total of 231 individuals; 30 individuals were served through HRC+ (our SAMHSA Grant Program). We had a total of 11 admissions and 13 discharges (HRC/HRC+).

#### **Staff Vacancies / New Hires:**

We have a vacant LPN (PRN) position. This position is needed to provide back-up during the week and to cover weekend and holiday shifts. We also have a Therapist I and a SUD Counselor (HRC+) vacancy.

**External Trainings / Conferences:**

Various staff attended a sponsored DMAS webinar entitled: An Overview of Opioids and Stimulants.

**Community Events/ Participation:** None due to COVID-19 Restrictions

**STEP-VA Progress / Milestones and Other relevant program-specific information:**

In December all clients were provided with a Holiday Newsletter, which contained information on accessing free toys and food for the holiday; program treatment schedules, recovery tips, and other supportive resources.

The revised Client Handbook has been printed and the Peer Recovery Specialist is assisting with the construction of the booklet.

The medical staff continues to provide face-to-face services to clients utilizing PPE. The clinical and peer staff continue to provide services via zoom and telehealth.

The Virginia Department of Medical Assistance (DMAS) is providing PPE, primarily masks, to all of the state's opioid treatment programs (OTP).

In December, 27 OTP clients were eligible to have their 2020 MAT services billed under their Medicare plan.

**Relevant Regional, Association Notes and Council Information:**

Continued weekly pandemic updates with the State Methadone Authority.

**Audits / Reviews:**

HRC received a 3-year licensure approval, resulting from the program's licensure review in November, 2020.

Compiling information for the upcoming Federal Block Grant audit in February

**Program Challenges / Significant Issues:**

Promoting methadone treatment services utilizing a street outreach approach continues to be a challenge due to COVID-19 restrictions; thereby, resulting in a reduction in enrollment.

Onsite face-to-face groups remain suspended due to the pandemic; thus renders groups unavailable to those individuals who do not have the hardware to participate in groups via zoom. Individual sessions are still intact.

Establishing working partnerships for direct referrals for MAT with first responders, i.e., police, EMTs and hospitals still remain a challenge. Efforts to improve this partnership will continue.

**Partners in Recovery (PIR):** PIR offers comprehensive, integrated addiction and mental health treatment in a single program. Services include outpatient counseling, Medication Assisted Treatment (Buprenorphine & Vivitrol), psychiatric and medication management services for individuals experiencing substance use and mental health disorders.

**Number of Individuals Served / Admissions / Discharges:**

For the months of December 2020 – January 2021, we served 380 in Medication Management. We had 18 admissions and 31 discharges. For OBOT (Medication Assisted Treatment), we served 67 individuals; 0 admissions and 1 discharge. For Outpatient Therapy (RU 143/437), we served 247 individuals; 21 admissions and 28 discharges. Our SOAR Peers provided support to 133 individuals and received 34 warm-line calls.

**Staff Vacancies / New Hires:**

A vacant SOAR Peer Recovery Specialist position is expected to be filled on 2/1/2021.

**STEP-VA Progress / Milestones and Other relevant program-specific information:**

Dr. Kimberly Dexter, Nurse Practitioner, obtained her DEA Rx Waiver approval which will allow her to prescribe buprenorphine (Suboxone) medication to up to 30 individuals in a year. This will assist us to continue to meet the demand of individuals with opioid use disorders.

The SOAR Peers are continuing to facilitate (4) morning and (1) evening treatment readiness groups weekly.

The peers have been trained and is completing documentation, i.e. individual and group notes into Profiler.

**Relevant Regional, Association Notes and Council Information:**

ARTS Director, Tony Crisp, is a member of the VACSB Training & Development Committee and we have been meeting to evaluate plenary speakers and workshop options for the Spring Conference.

**Audits / Reviews:**

Compiling information for the upcoming Federal Block audit in February

Quarterly chart review continues

**Program Challenges / Significant Issues:**

Adjusting schedules for staff with school age children. We met the challenge by adjusting hours and workflows.

**Adult Drug Courts:** The Hampton and Newport News Drug Treatment Courts and The Hampton Veterans Treatment Docket are specialized courts given the responsibility to handle cases involving non-violent felony with substance use and co-occurring mental health disorders through a comprehensive system of supervision, drug testing, substance use treatment, and regular court appearances.

**Number of Individuals Served / Admissions / Discharges:**

Hampton Drug Treatment Court to include the Hampton Veterans Docket served a total of 16 participants. There were no new admissions and six (6) successful discharges.

Newport News Adult Drug Court served a total of 24 participants. There was one (1) new admission, three (3) terminations and four (4) successful discharges.

**Staff Vacancies / New Hires:**

There continues to be a vacant therapist position. We held interviews and selected a candidate, however she did not accept.

**External Trainings / Conferences:**

All clinical staff are participating in webinars on addiction and various counseling techniques.

**Community Events/ Participation:**

Staff have not participated in any community events since the pandemic began.

**STEP-VA Progress / Milestones and Other relevant program-specific information:**

All participants are performing daily check-ins to maintain intensive supervision. Participants are also attending group as required by their phase, as well as, individual sessions by way of zoom.

Five (5) participants successfully completed the Hampton Drug Treatment Court and one participant successfully completed the Hampton Veterans Track on December 1, 2020.

The Newport News Adult Drug Court's Advisory Committee met on December 7, 2020. The committee approved the use of medication assisted treatment by NNADC participants. Also, four (4) participants successfully completed the Newport News Adult Drug Court on December 16, 2020.

**Relevant Regional, Association Notes (you belong to) and Council Information:**

ARTS Director, Tony Crisp, was an active participant on the State Veteran Strategic Planning Workgroup, which was held on 12/9/2020. Recommendations will be included in upcoming curriculums for Veterans Dockets.

**Audits / Reviews:**

Quarterly chart reviews continue to yield positive compliance.

The program is maintaining data entry in compliance with the requirements of the Supreme Court of Virginia's MIS system.

**Program Challenges / Significant Issues:**

Hampton Drug Court and the veteran's docket have a significantly low census. The referrals have been extremely low since the beginning of the pandemic. Outreach to the commonwealth attorney's office and the public defender's office has been unsuccessful.

Several clients have absconded from the program and the relapse rate has increased. This is a direct result of the decrease in contact due to the pandemic.

Prior to the pandemic both drug courts used the evidence based treatment Moral Reconciliation Therapy. This treatment process is not effective with the use of telehealth.

**South-Eastern Family Project (SEFP):** is licensed both as a 3.5 & 3.1 comprehensive residential treatment program for pregnant and postpartum women diagnosed with a substance use disorder. Gender specific substance use treatment services are provided in a healthy, stable, and secure environment.

**Number of Individuals Served / Admissions / Discharges:**

Census was very low for the months of December-January. We served one (1) individual in December; 2 individuals were served in January. We had 1 admission and 0 discharges during this reporting period. The pandemic has presented major challenges to obtain referrals, to have referrals follow-through (COVID test) and then engage the new enrollee into services while being quarantined for a period of 5 days.

**Staff Vacancies / New Hires:**

Our vacancies include the Residential Manager, the Clinical Services Coordinator, a Peer Recovery Specialist, 1CSA II (FTE), 2 CSA II (PT), and 1 CSA II (PRN).

New Hires include: Darnise Thompson, CSA II; a former employee at SEFP, rejoined the SEFP team in December and Shanequa Lassiter, Peer Recovery Specialist, a former Peer with the H-NNCSB, who joined the team in January.

**External Trainings / Conferences:** Internal trainings only

**Community Events/ Participation:** None, due to COVID Restrictions

**STEP-VA Progress / Milestones and Other relevant program-specific information:**

Staffing was reconfigured to enhance and strengthen both the clinical programming and marketing functions at SEFP. A licensed Clinical Services Coordinator position was created to replace the vacant Residential Supervisor position. This position will have clinical oversight and provide clinical services to the residents. The Program Manager's position will have a stronger role in administrative operations and program promotion.

A Resource data base continues to be developed to provide SEFP with a detailed contact list of stakeholders for future mass emailing about program offering.

The program leadership participated in a Zoom meeting with Rachelle Butler and Angie Williams, representatives of Open Table. Open Table is an evidence-based relational model used to provide support and friendship to pregnant and parenting women with substance use disorder. Open Table volunteers meet on a weekly basis to work with the individual or family seeking support to create positive change. Discussions centered on the benefits of this program to the individuals served at HRC and SEFP.

**Relevant Regional, Association Notes (you belong to) and Council Information:**

The program leadership participated in the monthly Substance Use in Pregnant and Parenting Women Collaborative meeting. This group agreed on a Vision and Mission statement, which reads: *“To ensure, enhance and leverage an accessible, integrated, compassionate, culturally sensitive, and responsive system of care and services supporting pregnant and parenting women with substance use disorder and their children to achieve optimal health and wellness in Eastern Virginia.”*

**Audits / Reviews:**

Federal Block Grant (FBG) Review

**Program Challenges / Significant Issues:**

Client admissions continue to be a challenge for the program in the face of the COVID-19 restrictions. Individuals' attitudes and motivation for entering residential care that requires a pre-treatment COVID-19 test, and a 5-day quarantine, has impacted community referrals and client follow-through significantly. Referrals from the local correctional facilities and criminal justice agencies have also been impacted by the Pandemic.

COVID-19 restrictions continue to prevent the current residents from the experience of attending community recovery meetings, as well as, limit outings for the current residents.

Residents are not able to have face-to-face visits with family at this time due to the COVID-19 restrictions, communication with family has been limited to phone calls and virtual visits.

There are also challenges with public networking, promotions and outreach to the community due to the COVID-19 restrictions.

**ARTS Case Management Services:** Case Management meets the personal, interpersonal, occupational/educational and social needs to adults who are diagnosed with substance use and/or co-occurring disorders (substance use and mental health disorders). We do this through various specialized services: Case Management Services for Men, Project Link (women and their children, birth through age 7), Special Outreach via our Women's Services Navigator and Re-entry positions; linkage to residential treatment, managed withdrawal services and housing supports via SARPOS and contracted services: Inner Reflections (Jail-based SUD Counseling Services) and Substance Use Screening and Education Program with the cities of Hampton and Newport News' VIEW/TANF Programs.

**Number of Individuals Served / Admissions / Discharges:**

Project Link served 191 women and children; 14 admissions and 10 discharges; Case Management Services for Men served 135; 8 admissions and 13 discharges; Inner Reflections-over 56 offenders were screened for services; no admissions or discharges. Re-entry-0 screened; 0 referred for services; Women's Services Navigator-0 screened; 0 referred for services; SARPOS- 10 people were served. In addition there were 57 care coordination contacts provided through our contracted VIEW/TANF Service with 4 individuals referred for additional support

**Staff Vacancies / New Hires:**

1 Project Link Case Manager Position was filled during this period. There are 3 current vacancies which are being recruited at this time; 2 Project Link Case Managers and the Women's Services Navigator.

**External Trainings / Conferences:**

ARTS Case Management staff attended the following trainings: Self-Care for Criminal Justice Professionals across the Sequential Intercept Model (SIM): Considerations for Intercepts 0-2, Digital Peer Recovery, and COVID Vaccination Informational Webinar.

**Community Events/ Participation:**

None this past month due to the COVID-19 restrictions

**STEP-VA Progress / Milestones and Other relevant program-specific information:**

ARTS Case Management celebrated the holidays with a Zoom Celebration and monthly staff meetings highlight “Shining Stars” from the month which can be a peer or supervisor in the program. Agency anniversaries are also celebrated during the monthly meeting.

**Relevant Regional, Association Notes and Council Information:**

The ARTS CM Program Manager and the HRC Clinical Administrator met with Administrators from *Open Table* an evidence-based program that helps create and sustain a social support system for pregnant and parenting women in Virginia. The program is hoping to establish a group (“*table*”) in this area.

The ARTS CM Program Manager, Kat Cannady, attended the Targeted Communities Hampton Workgroup chaired by the Hampton Department of Aging and Rehabilitative Services which is a collaborative effort to support individuals with disabilities in the Hampton Roads area. The workgroup also provided a training, “*Addressing the Opioid Crisis- Across America and in Virginia,*” for professionals across the state.

**Audits / Reviews:**

A DBHDS audit concluded this period with positive feedback received regarding ARTS Case Management Comprehensive Assessments and timeliness of documentation. Program leadership provided additional training and increased supervision to monitor program documentation.

Compiling information for the upcoming Federal Block Grant audit

**Program Challenges / Significant Issues:**

COVID-19 Emergency precautions continue to be in place and the majority of the staff continue to work remotely. School resumed this month and parents, both staff and clients, began navigating children attending school virtually.

**Peer Recovery Services:** Peer Recovery Services at H-NNCSB promotes hope, self-determination, choice, and multiple pathways to the recovery process. Peer Recovery Services support and assist an individual through a process of change to improve the individual’s health, recovery, resiliency and wellness; live a self-directed life; and strive to reach their full potential.

**Number of Individuals Served / Reached:**

Peer Recovery Coordinator supported 20 Board’s PRS (Peer Recovery Specialists) who have reached many individuals (in and out of services) experiencing difficulties with both mental health and substance use issues.

**Staff Vacancies / New Hires:**

Two (2) new hires that started in January. Thomas Dixon BHD and Shanequa Lassiter SEFP.

**External Trainings / Conferences:**

Recovery Education Event hosted by VOCAL on Dec 22, 2020; Recovery Leadership Academy Pre Assessment and Follow Up January 19, 2021.

**Community Events / Participation:** None

**Milestones and Other relevant program-specific information:**

Peer Recovery Coordinator (PRC) started a Peer Recovery Specialist (PRS) Certification Exam Study group for Agency's PRSs that have not received PRS Certification. Two study sessions were held on Dec 3 and January 14. Currently there are 5 PRSs attending. PRC will meet with PRS every month to support them by facilitating a refresher course using the curriculum offered by Rhode Island Peer Recovery Specialist Exam Study Guide.

**Relevant Regional, Association Notes and Council Information:**

The Peer Recovery Coordinator participated in the following meetings:

A meeting with DMAS on December 16 to discuss regulations about Peer Billing; the Virginia Recovery Institute (VRI) Stakeholders Meeting; the PRS Stakeholders Meeting; the Regional Leadership Team Meeting and Region V Consumer Advisory Council (CAC) Meeting.

The Region V CAC is seeking to offer 4 trainings to the community free of charge, if approved for the DBHDS' Consumer Innovation (CI) Grant to pay for facilitators. Trainings will be on Ethics, Advocacy, and MH/SUD Connectedness for PRS w/o lived experience in these areas and LGBTQIA+ Connectedness.

## **Adult Care Coordination**

**Bob Deisch, Director**

**Division Goals**

*Goal 1:* Adult Care Coordination programs will provide opportunities for staff to develop their skills and also provide training and opportunities to advance into leadership roles.

**Adult MH Case Management (AMHCM):** CMs cover for Supervisors and Supervisors cover for Managers. Encouraging CMs and Supervisors to attend applicable trainings that are available.

**Programs of Assertive Community Treatment (PACT):** All staff are regularly encouraged to participate in training and opportunities that will help them advance in

their careers (i.e. seeking licensure, taking advantage of additional trainings offered by the agency, and returning to school for continued education). We currently require all staff to complete a 10 hour course on Motivational Interviewing as utilizing MI is considered best practice on an ACT team. One of the peers is working towards accruing enough CEUs to apply for international certification.

*Goal 2: Adult Care Coordination programs will focus on staff retention and increasing staff morale by establishing a work climate that fosters teamwork and an appreciation of each person's position and duties.*

**AMHCM:** Working from home is going well for CM morale. Unable to do birthday get together. We all help with problem solving when issues arise while working from home and use team work to meet client's needs.

**PACT:** Daily team meetings readily lend themselves as a great opportunity to foster teamwork. These are currently being held via Zoom. Staff are encouraged to assist and support each other. The Manager, Supervisor, and RN Supervisor strive to set the tone of a supportive environment. Instances of staff assisting and covering for their teammates occur on almost a daily basis.

*Goal 3: Adult Care Coordination will maximize collaboration between Primary Health Care and Behavioral Health Care to benefit the individuals served.*

**AMHCM:** Still referring clients to SEVHS. Monitoring BMI. Scheduling Medicaid cabs, sending bus tickets and calling client's to remind them of their appointments.

**Discharge Planning Team:** Staff continue to provide linkages to medical care, including referrals to primary care providers.

**PACT:** PACT staff, primarily the nursing staff, continue to coordinate to ensure that all individuals' medical appointments are scheduled accordingly. Individuals are assisted with appointments based on individual's needs. Some individuals are accompanied to all of their appointments and some individuals are able to coordinate their medical care independently.

*Goal 4: Adult Care Coordination programs with waiting lists will strive to eliminate the waiting list to expedite individuals accessing services.*

**AMHCM:** 2 Medicaid cases assigned and 4 have be opened. The wait list is 68.

**PACT:** – PACT enrolled three individuals from the wait list over December and January. The team also has been carefully reviewing referrals to ensure lesser intensive supports have been tried before accepting individuals to the wait list. We are optimistic that with our current staffing trends we will be able to continue to enroll from the wait list.

**PACT Forensic** - PACT Forensic currently does not have a wait list.

## **Program Overview**

**Adult Mental Health Case Management** serves individuals who have a Serious Mental Illness or Serious Mental Illness and Co-occurring Substance Use Disorders. We assist individuals with linkage to services in the community such as: housing, SSI benefits, applying for and maintaining Medicaid, Food, Clothing, Psychiatric Services, Therapy, SA Treatment, Vocational, PCPs, Medication and any other services or needs that may arise. AMHC Monitors the services to insure all of our individuals needs are met.

**State Hospital Discharge Planning** team provides case management and discharge planning services to individuals admitted to State psychiatric facilities. The team advocates for individuals' needs, monitors individuals' progress with treatment goals, and coordinates optimal transition to the community.

**Reinvestment Case Management** provides discharge planning and short term case management services for the uninsured at local psychiatric hospitals.

**Mobile Crisis Response Team (MCRT)** provides intensive support services to individuals recently discharged from psychiatric facilities or at risk for hospitalization. The team provides coping skills education, recovery tools, and linkages to CSB and community resources.

**The Program of Assertive Community Treatment (PACT)** is an intensive, community based, interdisciplinary treatment program for adults with serious mental illness. Individuals must be high risk of hospitalization, homelessness, or intervention from the legal system to qualify. It is expected individuals would have tried less intensive community supports with limited success prior to being referred to PACT.

**Mental Health Regional Supervised Housing program (Transcend)** is a twelve bed facility. Staff work closely with the individuals to engage them in treatment such as psychiatric, substance abuse, medical and any other services that they may need. Staff assist with obtaining a psychosocial day program and other community agencies that will meet their needs. The individual's independent living skills are assessed and staff provide education and instruction in those identified areas. Services are individualized based on each individual's goals, needs and desires.

**Projects for Assistance in Transition from Homelessness (PATH) and Newport News Outreach** provide outreach to individuals that are experiencing homelessness and who have a Serious Mental Illness. The goal is to engage these individuals into services for mental health treatment and other resources and services to increase community integration and reduce the reoccurring risk of homelessness.

**Safe Harbors Permanent Supported Housing** addresses the needs of chronic homeless individuals with Housing First Model. Once the individuals are housed staff work with the individual at the individuals pace to address various needs such as mental health and or substance abuse treatment, benefits and medical services can be addressed. Client's pay rent and maintain their apartments. Staff assist with Activities of Daily Living Skills Training, assistance with treatment needs, transportation and housing applications (among many other things). The

goal is to move the client at their pace into the community with supports and again reduce the risk of reoccurring homelessness.

**Number of Individuals Served/Admissions/Discharges:**

**AMHCM:** 540 clients served 454 have full Medicaid. 4 Admissions and 7 Discharges

**State Hospital Discharge Planning:** Staff continue to monitor Civil and Not Guilty by Reason of Insanity (NGRI) forensic cases.

**December 2020:** Central State Hospital (CSH)-6 consumers; Piedmont- 1 consumer; Eastern State Hospital (ESH)-59 consumers; 27 admissions, and 20 discharges.

NGRI cases-44 NGRI Acquittes; 26 consumers admitted to the State Hospital and 18 Acquittes in the community on conditional release. One Acquittee in the community was removed from conditional release. One Acquittee at ESH has been granted conditional release, but remains at ESH until a nursing home bed is located.

**January 2021:** Central State Hospital (CSH)-6 consumers; Piedmont-1 consumer; Southwestern Virginia Mental Health Institute (SWVMHI)-1 consumer; Northern Virginia Mental Health Institute (NVMHI)-8 consumers; Western State Hospital- 4 consumers; Eastern State Hospital (ESH)-60 consumers.

NGRI cases- 44 NGRI Acquittes; 27 consumers admitted to the State Hospital and 17 Acquittes in the community on conditional release. One new NGRI was admitted to CSH under a temporary custody order pending independent evaluations. One Acquittee at ESH has been granted conditional release, but remains at ESH until a nursing home bed is located.

**Reinvestment Case Management:**

**December 2020-** 12 acute care admissions and 9 discharges.

**January 2021** - 8 acute care admissions and 11 discharges.

**Mobile Crisis Response Team:**

**December 2020-** 26 consumers served.

**January 2021** -28 consumers served.

**PACT:** At the end of January we had 92 enrolled individuals, 21 of those enrolled under the forensic enhancement. We had three discharges over December and January. Two individuals unfortunately passed away and one individual moved out of area and was connected to the CSB in that area. We had four admissions. Three individuals were enrolled from the wait list and one individual was transferred from the CBH PACT team after she moved to our area.

**Mental Health Regional Supervised Housing program:** This reporting period there were eleven individuals served.

**PATH and Newport News Outreach:** PATH and Newport News Outreach have a flexible case load of about 20-30 each. Newport News Outreach and PATH have had clients in local hotels paid for with special COVID-19 funds. Most shelters are not at full capacity because of COVID-19 restrictions and self-distancing. NN Outreach has a current case load of 18. This is a little low but two individuals have moved onto PSH with the Safe Harbor program. PATH has a current case load of 22. Three clients have started the process to move to Safe Harbor PSH Program. Outreach has been limited with COVID-19. NN Outreach and PATH staff are offering limited outreach hours at the Four Oaks Day Center and Both Newport News and Hampton winter shelters. In December As of January Safe Harbor has 28 residents. Two clients have just received Section 8 Vouchers and will be moving next month. One client will be moving to income based housing in the Newport News Community. Two clients in the past 2 months has moved to Newport News Public Housing Program.

**Emergency Housing / Shelter:** Remains at 50% capacity to provide self-distancing and safety for residents. As of January the Emergency Housing is full (50% capacity).

**Staff Vacancies/New Hires:**

**PACT:** As of the end of January we had one LPN vacancy and a vacancy for the Employment Counselor. We had an accepted candidate for the LPN who elected not to proceed with starting employment for personal reasons. We had several and individual apply for the employment counselor position who unfortunately did not meet the minimum criteria. We had one new staff start in a Clinician position in January and another staff that started in the other Clinician position February 1<sup>st</sup>.

**Mental Health Regional Supervised Housing program:** During this reporting period we had two positions available for a Part Time CSA on Sat/Sun 4pm-12:30am and another part time CSA on Sunday 8-4:30pm. We had one interview last week for this position and have turned in a hiring packet for this person. She accepted the Saturday and Sunday 4-12:30pm position.

**Safe Harbors Permanent Supported Housing:** Both vacant positions in Safe Harbor have been filled. One employee has started in December and one employee has started in January. Both have great experience and will be an asset to our Safe Harbor Team. PATH has an open position for a PATH Outreach Assistant. Currently this position is on hold until outreach efforts can be expanded when COVID-19 restrictions lift.

When there is a shortage of staff or the training of new staff David Hudson with NN Outreach and Sara Pastian with Safe Harbors have been very helpful. Both David and Sara cover for the supervisor when she is on leave. Both are learning tasks of the supervisor to make sure the team runs smoothly when needed.

**AMHCM:** One CM on Maternity Leave. One CM on medical leave.

**External Trainings/Conferences:**

**PACT:** PACT Program Manager still participates in what is now a monthly virtual meet-up hosted by the UNC Institute for Best Practices in which issues related to providing PACT services in a pandemic are discussed with PACT providers across the US (and even some in other countries). PACT Program Manager and PACT Supervisor also participated in a virtual meeting with PACT leads from across the state of Virginia to discuss PACT related issues.

**PATH/Newport News Port & Safe Harbors Permanent Supported Housing:** All staff that participate in HMIS data entry have trainings every quarter. PATH staff have webinars on program changes and best practices. Two staff are SOAR trained to assist with Social Security Applications. These two employees have a quarterly training that is attended over Zoom.

**Community Events/Participation:**

**Mental Health Regional Supervised Housing program:** Staff are actively engaging individuals in community activities as needed such as bank and store runs. They are closely monitored by staff to ensure that they are wearing their masks. Temperature checks are being conducted before and after return to the program and increased handwashing is occurring. Some of our individuals are attending a day program 3x a week. Staff continue to have increased groups in the home and many residents participate and enjoy the low impact exercise groups and chair yoga. Staff play games and create art in groups as well.

**PATH/Newport News Port:** The Annual Point in Time (PIT Count) was held the last week in January. Four employees from Homeless Services Participated. This is the annual count of the un-sheltered homeless individuals on the Virginia Peninsula. This year staff were able to do an observation count to be safe with current COVID-19 restrictions. The Hampton and Newport News Police assisted staff with the count. Data was entered through an app on their smart phones. The Planning Council will evaluate this data. This data will assist with securing funds for existing and new programs in this area for the homeless.

**STEP-VA progress/milestones and other relevant program-specific information:** N/A

**Relevant Regional or Council Information:**

**PATH:** PATH was awarded \$3900.00 in extra funds. This will assist with buying much needed outreach supplies and other related client expenses. So far PATH has assisted with food for 2 families and have purchased some outreach supplies. Hospitality for the Homeless has provided PATH and Newport News Outreach about 30 kits that included personal hygiene items and masks.

**Audits/Reviews:**

**Mental Health Regional Supervised Housing program:** A peer review was completed by Program Manager which shows Transcend at 90%. Random chart reviews will continue at the program level throughout the year.

**AMHCM:** Our last Targeted CM review score was 93.5%

**Program Challenges/Significant Issues:**

**State Hospital Discharge Planning:** During the month of January, there was a significant increase in diversions to State Hospitals outside of Region V, due to Eastern State Hospital having limited bed availabilities, partially due to an increase in quarantine units due to COVID-19 cases.

**PACT:** The pandemic continues to restrict our ability to provide the intensity of face to face service that the program typically provides. We have been able to modify services and provide more service via telephone. This resulted in difficulties in meeting our revenue targets. In October new billing guidelines from DMAS were implemented and this increased our billing. We exceeded our billing targets in December and January for PACT and were slightly under for both months for Forensic. A new reimbursement rate and structure will go into effect 7/1. The new reimbursement rate will be based on a per diem rather than units.

**Mental Health Regional Supervised Housing program:** Challenges this reporting period continue to be the difficulties of navigating COVID-19 and the ever changing guidelines/restrictions. Manager will continue to meet with residents and staff individually and as a group to provide updates on COVID-19 and supervision. Visitation has been a challenge for our individuals. We have been doing our best to encourage phone calls and video chats with family. We are hoping in the next reporting period to have residents walking to the store, having visits with family members, and going out on pass with family.

**PATH/Newport News Port & Safe Harbors Permanent Supported Housing:** Staff are all taking precautions to assist clients and remain safe. Staff continuously educates clients on safe behaviors, awareness of the virus and to practice good hygiene. Limited face to face time is a challenge. More outreach is needed. PATH and Newport News Outreach are challenged by not having “Walk in Wednesday”. Staff is attempting to provide services safely and the best way we currently can to meet this fragile population needs.

Many staff has participated in receiving the COVID-19 Vaccine. Regular Flu shots were distributed through the VDH in both winter shelters.

**Crisis Services**  
**Ryan Dudley, Director**

**Division Goals**

***Goal 1:** Crisis Services’ programs will continually examine service delivery models and work-flow and as appropriate make adjustments to ensure efficient and timely response.*

*Goal 2: Enhance collaborative relationships with our Stakeholder partners to develop and build onto sustainable responses to challenges encountered with addressing emergency psychiatric needs.*

*Goal 3: Crisis Services will ensure active representation at the local, regional and statewide levels participating in planning, development and implementation for future models of Crisis & Forensic Services in Virginia.*

### **Program Overview**

**Emergency Services (ES)** provides assessments, support and referral 24/7 for individuals who are experiencing a behavioral health crisis in a community settings, including conducting mandated prescreening evaluations in order to determine need for involuntary hospitalization. ES works very closely with our Law Enforcement, Hospitals, Magistrates, Jails and other treatment providers and also maintains a unique partnership with Sentara Careplex Hospital (SCH) providing all behavioral health assessments in their Emergency Department (ED).

### **Number of Individuals Served/Admissions/Discharges:**

During the months of December and January, ES conducted 257 & 313 assessments respectively also participating in approximately 175 Commitment Hearings. HNNCSB had 18 Safety Net Bed (SNB) admissions to the State Hospital each of those months along with 3 C&A admissions to CCCA. Based on challenges of identifying an accepting psychiatric bed, including the “bed of last resort”, ES’s involvement in cases has extended from hours to across shifts to days while responding to new crises.

Of the 18 January SNBs, 10 required diversion to one of four different alternative state hospitals due to inability to secure an accepting private bed throughout the state or at ESH. This included 6 of the last 7 state hospital admissions making January the highest volume month encountered for state hospital diversions. In addition, 4 “Criminal TDOs” were issued in December and 1 in January for individuals in corrections custody.

### **Staff Vacancies/New Hires:**

We are presently recruiting for 1 full-time vacancy with 2 staff currently training to become Certified Prescreeners. Two ES Counselors, Stephanie Lee and Alonya Thomas, both who have served the agency for years successfully passed their Licensed Clinical Social Work exams at the end of January. Program Manager, Gina O’Halloran continues to do an outstanding job managing around the clock response to increasingly complex cases requiring collaboration with stakeholders’ partners who often look to CSB to manage variables although we are unable to resolve and outside our purview.

### **Relevant Regional or Council Information:**

Ms. O’Halloran and Crisis Director participate in Weekly HPRV ES Council Calls and monthly ES Council Meetings that assist our CSBs to collaboratively evaluate and address critical issues

faced by respective departments resulting from lack of accepting psychiatric beds including “Bed of Last Resort”, inconsistency from hospitals, lack of clear or conflicting guidance regarding the Civil Commitment process, and more recent variations in interpretations of Code that further affects efforts to access psychiatric care. Crisis Director serves as a representative on the Regional Leadership Operational Guidance Workgroup, Regional Crisis Task Force, Regional Operations Committee, and the Statewide Behavioral Health Enhancement Crisis Workgroup. In addition, H-NNCSB coordinates a quarterly Stakeholder’s Meeting to collectively address challenges including the aforementioned. We last met on January 26th, although met several other times during the quarter, which we also had representation for DBHDS present.

### **Program Challenges/Significant Issues:**

The most significant challenges continue to arise from the absence of psychiatric beds or timely review of referrals by hospitals to access them that results in individuals remaining in the custody of law enforcement and in Emergency Departments (ED) for extended durations. These were very problematic prior to the pandemic, but has since led to even more challenging circumstances with individuals both COVID and Non-COVID with Temporary Detention Orders (TDO) to receive treatment at the state hospital but remain in the ED with minimal or no psychiatric treatment on “delayed admission” status. This status has progressed to now extending periods into the TDO process requiring Commitment Hearings to occur “bedside” in the ED, but without the state hospital or DBHDS involvement despite orders designating them as the treating facility. Lack of involvement has led to other challenges as ES attempts to access care as if the individual under “Bed of Last Resort” would have been admitted, CSBs nor stakeholders would be involved. Instances have occurred across the state with individuals being released directly from the ED without being admitted to a psychiatric hospital despite being ordered for involuntary hospitalization and for some involuntary commitment to the state hospital. Often psychiatric hospitals will not review our evaluation until they have a resulted negative COVID-19 and other lab work obtained which has led to other unnecessary delays and requiring ES bed search to expand across the state. Consequentially, ES’s involvement in cases have extended to hours, across shift and in a high volume of cases, now days despite having issued a TDO for State Hospital per “Bed of Last Resort” legislation.

Pressures to stakeholders and CSB has exponentially grown impacted by these circumstances unforeseen as the Code of Virginia requires the state hospital must serve as the “Bed of Last Resort” if the CSB had not found an accepting private bed prior to the expiration of an Emergency Custody Order (ECO). Difficulties have begun to impact strong relationships locally, as experienced by other CSBs due to expectations that we are able to resolve issues outside of our control, authority or purview and with these agencies now reviewing and interpreting what their statutory role is at this time without resolution from DBHDS forthcoming. As a result, ES has now been working through scenarios due to some interpretations of one law enforcement agency that they are no longer able to retain custody of individuals past a certain period of time if not placed, which differs from guidance of Magistrate and Regional Magistrate. As a result, there are individuals still untreated that have eloped from ED as ES continues to pursue a possible psychiatric bed. In cases where individuals have not eloped and we were successful in later finding a bed willing to accept, the absence of law enforcement involvement then becomes a barrier to obtain secure transportation to access the bed. Longer ED waits has led to Involuntary

Commitments to the state hospital for individuals still in the ED. If a bed is found after that period, Sherriff's Offices must now transport including in localities that they would not otherwise be involved in the Civil Commitment process. These challenges have been playing out across the state with unique variations as DBHDS is called on to further intervene in their statutory duties.

**Regional Crisis Stabilization Center (RCSC)** is an 11-bed residential crisis stabilization / ambulatory detox program serving HPR5 offering an alternative to acute psychiatric hospitalization for individuals experiencing a crisis as a result of behavioral health or co-occurring needs. The multidisciplinary approach offers rapid access for the brief intervention through psychiatry, nursing, therapy, psychoeducation, peer recovery supports, a structured milieu and comprehensive care coordination.

#### **Number of Individuals Served/Admissions/Discharges:**

The program continues to operate with "Single Room Occupancy" (6-beds) and has been fortunate not to have required closure at any time as other CSUs have.

#### **Staff Vacancies/New Hires:**

Recruitment for positions has continued to be challenging which since formally assuming all nursing and psychiatric technician staffing on August 1st, formerly provided via contract by Riverside Behavioral Health Center (RBHC). Presently, we are recruiting for the following positions: RN Supervisor, Part-time RNs, and Part-time Psychiatric Technicians. The Care Coordinator was filled at the end of January, following the incumbent transitioning to the PACT Team.

#### **STEP-VA progress/milestones and other relevant program-specific information:**

H-NNCSB continues to advocate with other CSBs and seek clarity on DBHDS's plan for CSUs in upcoming Crisis steps for STEP-VA regarding operational plans. In addition, enhanced rates for CSUs related to Behavioral Health Enhancement is anticipated to be delayed until December 2021.

#### **Relevant Regional or Council Information:**

A Statewide CSU meeting has been scheduled for February 18th and is anticipated to address new Exhibits of the Performance Contract. Several meetings have been held during recent months following DBHDS's notification to CSBs of changes and new "expectations" despite absence of additional funding from DBHDS and without reimbursement rate changes for services provided. The HPRV CSU Workgroup, chaired by Ms. Christian and including Mr. Clark and Crisis Director is scheduled to meet on February 26th.

#### **Program Challenges/Significant Issues:**

The most significant challenges to the program are related to staffing the 24/7 program, in particular RNs and Psych. Techs. Program Manager, Ron Clark continues to coordinate a limited pool of staff around the clock despite vacancies, including performing duties for other vacancies

or staff “Call-Outs” and responding to needs around the clock. Human Resources continues to work closely with the program to address.

**Jail Diversion (JD) Services** works collaboratively with our partners to identify persons being placed in correctional custody for minor offenses who may be experiencing acute behavioral health crisis, offering alternatives for clinical placement. Additionally, Jail Diversion staff provide brief therapeutic intervention to individuals in correctional custody in an effort to avoid psychiatric decompensation and lengthened incarceration, also assisting to engage/reengage them with clinical supports at release.

**Number of Individuals Served/Admissions/Discharges:**

At the conclusion of January, Jail Diversion Case Manager was following 33 individuals in custody assisting with community care needs post jail release. Jail Diversion staff continue to be available to work with partners to divert individuals with mental illness from correctional custody to more appropriate community based treatment placements. Clinician provides assessments/sessions to individuals identified by the jail provided via telehealth and continue to work with our partners in both jails. Currently, 7 individuals detained in Hampton City Jail receive CSB psychiatry.

**Restoration Services (RS)** are provided to individuals found by the Court as “Incompetent to Stand Trial” and may include education and treatment which can occur in either community or correctional settings. The goal is to assist individuals with regaining psychiatric stability and allowing them to participate with their attorney in their criminal defense.

**Number of Individuals Served/Admissions/Discharges:**

Program continues to respond to orders for Restoration Services, originating from Juvenile Domestic Relations (JDR), General District (GDC) and Circuit Court from both cities and includes cases from Courts in other localities for individuals residing in our catchment. Currently, Ms. Dubose, Program Manager is providing services to 17 community restoration cases in addition to others having recently dispositioned. The Director coordinated a meeting with DBHDS on Feb. 4th and confirmed that H-NNCSB’s volume and turnaround of community restoration orders are among highest of the 40 CSBs. We anticipate volume of orders will remain steady and likely increase, another indirect effect of the lack of psychiatric beds due to increase of criminal charges for individuals otherwise may have been referred for assessment for voluntary or involuntary hospitalization.

**Program Challenges/Significant Issues:**

The greatest challenge is ensuring responsiveness to increased orders and anticipating future trajectory based on contributing factors external to the Court with limited staff providing services. We will continually evaluate needs.

**Behavioral Health Dockets (BHD)** are non-adversarial approaches by the judicial system, treatment providers and involved stakeholders to address the needs of individuals with serious mental illness who have become involved in the criminal justice system. Through ongoing support

and supervision the Court (General District) and Team assists individuals as they engage in services and address challenges to prevent further penetration within the criminal justice system.

**Number of Individuals Served/Admissions/Discharges:**

Newport News Behavioral Health Docket (NN BHD) is current serving 15 participants with 12 pending referrals. The docket meets the 1st and 3rd Thursday of each month with Judge Hoffman presiding.

Hampton Behavioral Health Docket (HBHD) is serving 8 participants. The docket is held the 1st and 3rd Monday of each month with Judge Smith presiding.

Ms. Dubose, along with staff assigned to the individual dockets, continues to work closely with the Judges and other stakeholders to further resource the docket while also ensuring the provision of appropriate services are available to meet their specific needs.

**Staff Vacancies/New Hires:**

Following transition of former Therapist to C&A COS in December, we were able to hire both our new Therapist and Peer Recovery Specialist in January. H-NNCSB has been requested by City of Hampton to participate in discussions related to a potential grant that would further support HBHD's efforts. In addition, our Docket Coordinator for NN BHD will be on extended leave anticipated to begin in late February which will necessitate Ms. Dubose providing increased support.

**Program Challenges/Significant Issues:**

The key limitations remains service delivery limitations due to COVID-19. However, both Courts are active with Hearings and consistently review potential referrals.

**Forensic Discharge Planning (FDP)** provides discharge planning and re-entry case support for individuals with Serious Mental Illness (SMI) in custody at Hampton Roads Regional Jail (HRRJ). H-NNCSB partners with three other CSBs (Chesapeake, Norfolk, & Portsmouth) as part of a DBHDS Grant which funds positions for each CSB, dedicated psychiatry time, and temporary funding for re-entry needs.

**Number of Individuals Served/Admissions/Discharges:**

At the conclusion of January, FDP was providing intensive supports to 18 individuals in the community following release from custody and 57 others deemed eligible but still in HRRJ. It is notable that in November, HRRJ transferred approximately 255 inmates back to city jails due to critical staffing.

**Staff Vacancies/New Hires:**

Three full-time Forensic Discharge Planners (FDP) are assigned to the program.

### **Relevant Regional or Council Information:**

The Collaborative which includes DBHDS and each of four CSBs meets monthly to address challenges with the project, including those resulting from the Pandemic, required reporting, and collaborative efforts among the CSBs, HRRJ and Wellpath, the jail's medical contractor. The next meeting is scheduled for February 10th. Lt. Col. Jeff Vergakis, Newport News Sheriff's Office is currently the Interim Superintendent following the retirement of Col. Christopher Walz.

### **Program Challenges/Significant Issues:**

The most significant challenge remains the limitations to access to inmates due to COVID-19 restrictions. DBHDS reported that other FDP programs planned for implementation in the Governor's original budget will be delayed.

### **Crisis Intervention Team (CIT) & CIT Assessment Center (CITAC)**

- Crisis Intervention Team (CIT) is a "Best Practice Model" of training and intervention for law enforcement personnel assisting individuals experiencing behavioral health crisis.
- CITAC provides Hampton Police Division (HPD) the ability to transfer custody of individuals under Emergency Custody Order (ECO) to onsite law enforcement (contracted NNSO) at Sentara Careplex during operational hours, enabling their return to other public service duties.

### **Number of Individuals Served/Admissions/Discharges:**

CITAC currently operates seven days a week from 12pm-8pm, following the addition of weekends in October utilizing "carry forward funds" with NNSO Deputies accepting onsite transfers. Utilization continues to increase with 191 assessments and 69 transfers of custody during the 2nd Quarter, the highest for both categories since our implementation. Transfers of custody enables HPD to return to other public safety activities and saving of substantial man hours. NNSO has continues to be a strong partner despite encountering some very difficult circumstances resulting from aforementioned challenges with civil commitment process and varying interpretations of custody.

### **Program Challenges/Significant Issues:**

Ms. Dubose, Forensic Manager, and Crisis Director worked closely with HPD, NNPD, and NNSO to schedule CIT Training for December 7th-11th, however the training was canceled the week prior related to a COVID-19 outbreak with one of the police departments. Ms. Dubose will be participating in Colonial Behavioral Health's CIT Training in March. CSBs have consulted with one another regarding implementing training during the pandemic.

**Newport News Community Assistance Response (NN CARE)** is a collaborative initiative with Newport News Police Department (NNPD) and Fire Department (NNFD) that will provide an alternative response to calls related to behavioral health, substance use, or homelessness. The

program will pair a Medic and CSB Counselor for response to these calls and to assist in providing referral and linkage to services. The design is modeled after the CAHOOTS (Crisis Assistance Helping Out On The Streets) in Eugene, OR which has been replicated in communities across the country.

**Number of Individuals Served/Admissions/Discharges:**

H-NNCSB and NNFD have each begun recruitment efforts following the signing of the MOU and will attempt to coordinate hire dates and training.

**Staff Vacancies/New Hires:**

Recruitment for the two full-time Mental Health Professionals is underway with the positions funded by the City of Newport News through NNFD's budget.

**External Trainings/Conferences:**

NN CARE collaborative most recently met on January 12th in preparation for the program to be implemented, including dispatch protocols with the 911 Center.

**Program Challenges/Significant Issues:**

We continue to address the challenges for multi-agency implementation that will ensure safe and coordinated response. An MOU has been signed and as HNNCSB and NNFD attempt to align recruitment, start dates and training with NNFD and NNPD. It appears that it will be some time before the City is able to have the "outfitted" CARE van as it works with a vendor. However, the City will identify use of Motor Pool vehicle enabling the Team's response until delivery.

**Developmental Services**  
**Carol McCarthy, Director**

**Division Goals**

*Goal 1: To maintain financial performance necessary for the continuing provision of quality services.*

*Goal 2: To pursue an expansion of services and training so that H-NNCSB can offer quality services to DD Individuals.*

*Goal 3: To assist individuals with developmental disabilities in leading more productive and autonomous lifestyles, and to promote healthy choices through premier services, advocacy, and education.*

## **Program Overview**

### **Residential Services:**

During the past few months the Waiver and ICF homes have experienced an increase in positive tested individuals and staff. There was a significant increase in the numbers which is most likely due to staff being exposed during the Christmas and New Years. The COVID-19 Protocols and Procedures were followed to ensure the protection of individuals and staff. As part of the agencies protocols, the staff receive an additional \$6.25 per hour for working in homes that have a positive individuals and/or due to significant staffing challenges related to COVID-19.

The DOJ Settlement Agreement has changed the landscape of waiver services. One area that changed is the decreased number of Community Living Waiver slots (CL) that are requested by DBHDS. The waiver services that are the main focus are sponsored and independent living. As a result of the challenges in filling our vacancies, several plans are being developed to evaluate the group homes based on the individuals and their medical care needs. The plan is to downsize Briarfield to an eight bed and possibly reduce Cornerstone to a five bed home. We are in the beginning stages of this plan. It is becoming challenging to fill the vacant beds due to above mentioned variable.

Currently, there are 3 FT Direct Support Professional vacancies and 12 PT. We continue to make headway with virtual recruitment efforts. Also, the H-NNCSB has a contract with Delta-T which is a referral agency supplying workforce solutions and recruitment in behavioral, mental health, social work & education fields. We are hopeful that this contract will assist in filling our vacancies.

In preparation for the upcoming RedCap review of all the group homes there has been a concerted effort to educate the staff through virtual meetings on new regulations, DOJ Settlement Agreement, and expectations of providers. Most recently, a new documentation template was developed as a way to capture many of the documentation expectations per the Home and Community Based Services (HCBS).

### **Support Coordination:**

The program continues to provide services to approximately 900 individuals with intellectual and developmental disabilities which includes children and adults. Support Coordination continues to receive referrals for services and screens individuals for the waiver waiting list. Most recently, DBHDS has developed a new waitlist portal in which families and individuals will complete annual forms to remain on the waiting list.

During the past few months, the support coordinators have been introduced to upcoming changes to include: New ECM Service Codes, New Regulations aligning the Person Centered Review Grace period, and the New Individual Service Plan. The new Individual Service Plan will assist in the support coordinators not reporting certain data elements that are now reported through CCS3.

The Support Coordinator's continue to work from home utilizing Zoom meetings to perform annual reviews and contact with individuals on their caseloads. If there is a serious incident or reported medical concerns of an individual, the Support Coordinator does a home visit, of course with PPE.

Currently, there is one vacancy that has been posted since November in children's support coordination. One candidate applied and declined due to salary. No other applicants have applied or they did not meet the criteria for the job. In adult support coordination, there are two vacancies.

### **Day Support:**

Presently, seventeen individuals are in attendance and receive daily support services. During the past few months several individuals from Aberdeen (ICF) began attending the day program. Creative Options has not experienced an outbreak of COVID-19, mostly due to the individuals remaining with their housemates in a room together when attending the day program. This plan has been successful in limiting exposures. In addition, the individuals are wearing their mask when at the program. It is obvious that the individual's participation in the program help to support and influence positive mental health amid these unprecedented times

Safety measures remain a priority in the day program. Each employee and individual continues to have a temperature check upon entry into the program. Additionally, the individuals have a temperature check upon departure from the program. Employees and individuals are asked to stay home when they are ill. Individuals continue to wear a mask without issues which is a protocol for individuals to attend the day program.

As a result of the long term impact of COVID-19 on the day program, a plan will be developed to down size the program based on the social distancing requirements. It appears that the capacity will be approximately 50 which includes staff and individuals. The board members will be updated on all changes as the plan is developed and implemented.

### **Number of Individuals Served/Admissions/Discharges/Waiting List:**

There are currently 56 individuals served in the Residential Programs. There are several vacancies (Duval-1, Cornersotne-1, Winburn-1).

The Wavier Waiting list consist of the following: *Priority 1-27, Priority 2- 289, & Priority 3-175.*

Currently there are *497 individuals receiving the Community Living Wavier, 112- Family and Individual Support Waiver, and 21-Building Independence Waiver.* The total number receiving wavier services is 630.

**External Trainings/Conferences:**

Due to COVID-19 there has been no external trainings.

**Community Events/Participation:**

Due to COVID-19, community events have not been occurring. All families are aware that there is no visitation and families are encouraged to send cards, utilize Zoom, and phone calls to communicate with their loved one.

**STEP-VA progress/milestones and other relevant program-specific information:**

Residential Services continues to work toward meeting the Department of Justice (DOJ) and Home and Community Based Settings (HCBS) requirements. As noted, the residential program is expected to have a “settings review” by DBHDS to determine if they meet the HCBS requirements. Currently, the Program Specialist is providing training and education in all of the HCBS requirements. These trainings were offered to supervisors, residential counselors, and direct support professionals to promote choice and community engagement to individuals in the residential program.

Support Coordination Quarterly Reviews (SCQR) are being completed and analyzed for further training needs to enhance the skills of the staff. SCQR’s are desk audits that are a DBHDS requirement and result in a look behind audit to ensure that the responses are actually documented in the Electronic Health Record.

**Relevant Regional or Council Information:**

The program continues to update its emergency preparedness plan as information is disseminated by VDH and the CDC and incorporating where needed to comply with best practices and regulatory expectations. Most recently, VDH informed the DS Director that anyone that has been exposed to COVID-19 should wait 5 to 7 days before being tested.

**Audits/Reviews:**

The ICF’s are preparing for an in-person annual survey that has been reinstated by CMS. The wavier program are preparing for the “settings review” which is part of the RedCap Survey. All wavier programs must meet the HCBS Settings Rule to remain a licensed provider.

**Program Challenges/Significant Issues:**

Within the Residential Programs, the key issue is staffing and filling vacancies.

## Medical Services Division

**Dr. Baltej Gill, Director**

### Division Goals

*Goal 1: To meet the defined daily and monthly targets and explore reasons when not met.*

*Goal 2: Strive to retain current Physicians, Nurses, Therapists, Counselors and Support staff to provide timely and safe care to the individuals we serve.*

*Goal 3: Continue to grow the integration of behavioral health and physical health care with encouraging use of onsite Pharmacy and Primary Care Services on campus as well as care coordination in the community.*

### Program Overview

**Adult Comprehensive Outpatient Services (ACOS):** ACOS provides Psychiatric Consultation and ongoing Medication Management for Adults dealing with mental health issues. Therapy services and Peer Support services are also offered to provide our individuals with an outlet to express their feelings, gain support, and learn more adaptive coping skills.

#### **Number of Individuals Served/Admissions/Discharges:**

ACOS Medication Management including Geriatric Services currently has 2341 individuals enrolled. Dr. Posadas continues to help us in seeing some new Program Enrollments for us. Two new program enrollments are being scheduled with Dr. Posadas daily. Thirty nine intakes were scheduled in January and 25 attended the appointment. Medication Management had 70 new program enrollments scheduled for January and 55 attended which yielded a show rate of 79%. Thirty seven hospital discharge appointments were scheduled and 37 attended which yielded a show rate of 76%.

Services continue to be mainly provided through Telehealth via Zoom or direct telephone. We are seeing new evaluations and hospital discharges in office “Zoom room” for those not having Zoom access at home. Most deaf and hard of hearing individuals are seen face to face in the clinic and interpreting services are provided. Nurses continue to see individuals face to face for injection appointments and in instances when individuals are seen face to face in the clinic following medication management appointments.

#### **Staff Vacancies/New Hires:**

ACOS is vacant 2 LPN positions (Care Coordinator Position and a Caseload position). Four LPN candidates have been interviewed this month, and offers by HR are pending.

#### **Community Events/Participation:**

Due to COVID-19, most community events are on hold.

Kristy Polewczak attended a virtual meeting for the Peninsula Forensic Center (PEAFC).

**STEP-VA progress/milestones and other relevant program-specific information:**

Primary Screening labs continue to be done and are sent to primary care physicians/providers and individuals are encouraged to follow up with Primary Care Providers or get linked with a provider if they do not have an established provider. Ongoing teaching is provided to reiterate the importance of medical follow up.

**Program Challenges/Significant Issues:**

All staff continue to display resiliency throughout the COVID-19 pandemic to provide quality care to the individuals we serve. Nursing and Support Staff have additional demands placed on them to include the logistics involved in setting up telehealth/ZOOM appointments, coordinating and faxing labs and other forms/ letters to providers that are working remotely, and a notable increase in volume of crisis calls from our individuals who are struggling with increased anxiety and exacerbation of other symptoms due to the impact of COVID -19. Our vulnerable individuals are requiring a lot more support and reassurance during this time.

ACOS had some individuals that reported to staff that they tested COVID -19 positive, but these individuals had not been seen in the clinic for face to face appointments for several months. We had one staff member who was quarantined following a direct exposure to a family member, but she tested negative. No cases of any COVID-19 positive cases among staff in the month of January.

The new phone system installed initially presented some challenges, but IT has worked hard to resolve those issues.

Staff continue to submit and support individuals through 757 Funding in meeting various needs during this pandemic. Individuals have voiced much gratitude when we have been able to assist them with financial needs and some have been referred to resources in the community for rental assistance and utility bills.

Consumer Satisfaction Surveys are on hold due to COVID-19.

January has been a transitional period due to training of new nurses, but they have caught on quickly and have settled into their new roles and are doing very well. ACOS is very grateful to our dedicated staff who continue to persevere thru this challenging time. We are exploring some ways we can try and increase morale and team building to promote an optimal work environment and satisfaction amongst our staff. We received some great ideas from staff.

**Jon Warren, Clinical Services Administrator  
Outpatient Therapy**

**Division Goals**

**Goal 1:** To meet the defined daily and monthly targets and explore reasons when not met.

**Goal 2:** Strive to retain current Physicians, Nurses, Therapists, Counselors and Support staff to provide timely and safe care to the individuals we serve.

**Goal 3:** Continue to grow the integration of behavioral health and physical health care with encouraging use of onsite Pharmacy and Primary Care Services on campus as well as care coordination in the community.

### **Program Overview**

**Adult Comprehensive Outpatient Services (ACOS)** provides Psychiatric Consultation and ongoing Medication Management for Adult with behavioral health issues. Psychotherapy services such as individual, family, and group therapy are offered to assist individuals in developing coping skills to reduce frequency and severity of mental health symptoms, improving overall functioning, and achieving increased fulfillment in life.

ACOS has the Regional Deaf Services Coordinator, Dr. Paula Markham, Psy. D., LCP, who coordinates services throughout HPR-V Region. Dr. Markham provides evaluation, consultation, and direct treatment planning, including individual counseling, family counseling, educational sessions, and discharge/aftercare planning for the deaf, hard of hearing, and late deafened individuals we serve.

### **Number of Individuals Served / Admissions / Discharges:**

#### ACOS Therapy

- 417 active cases
- 57 enrolled with no assigned therapist (due to former therapists resignations)
- 69 discharges
  - December 2020: 51
  - January 2021: 18

#### Rapid Access: 27 assessments

- ACOS assignments: 8
- PIR assignments: 9
- Assessment only: 10

#### Regional Deaf Services: 26 enrolled

- New assignments: 2
- Discharges: 3

During the month of December 2020, Two (2) ACOS Licensed Therapists resigned. One of which was due to being promoted to a management position with Child & Adolescent Services. As a result, ACOS Therapy services were at capacity. Both Rapid Access clinicians as well as the Clinical Services Administrator have taken on small caseloads to fulfill the need due to staff vacancies.

Due to capacity issues at both Partners in Recovery and ACOS Therapy, Rapid Access has been screening individuals seeking outpatient therapy services and referring those who have insurance to private providers when possible. ACOS Therapy is accepting individuals with no insurance and also those who have extensive MH needs where private practice may not be appropriate. Rapid Access completed 27 assessments during the month of December 2020 and January 2021. As of

1/5/2021, Partners in Recovery communicated they are no longer at capacity and are able to receive clients from Rapid Access. ACOS Therapy remains at capacity.

Psychotherapy and assessment services at ACOS continue to be provided via audio telehealth (direct telephone) or video telehealth via Zoom platform. Telehealth psychotherapy services is a vital tool to provide therapy accessibility while providing a safe work environment for our clinicians.

Dr. Markham, LCP (Deaf Services) made two (2) referrals to Medication Management and one (1) referral to the Deaf Castle PSR program in December. She completed the PSR diagnostic assessment and program enrollment of two (2) referrals in December and January. Dr. Markham, LCP has increased therapy services for those with individual challenges with socialization.

Dr. Markham has advocated for a transitional period for two (2) individuals who had moved out of state. ACOS is in the process of developing a policy concerning telehealth for individuals who move out of the H-NNCSB catchment area and require ongoing services. At this time, the provider is to assist the individual with connecting to treatment services in the community to which the individual moved. The Engagement Specialist at ACOS may assist in this endeavor.

#### **Staff Vacancies / New Hires:**

ACOS Therapy recently hired a new licensed therapist with a start date on 2/1/2021. ACOS Therapy is currently in the process of hiring the second vacant position and has two prospective candidates.

#### **External Training / Conferences:**

During the months of December 2020 and January 2021, two (2) licensed therapists from ACOS received training on Personality Disorders. The ACOS Clinical Services Manager received a training on treating trauma with IDD population.

Dr. Markham attended Zoom meetings on 12/10/20 and 1/29/21 with Regional Deaf Services colleagues which included regional coordinators from NOVA and SW Virginia and the State and Regional Deaf Services Coordinator from the Valley CSB.

Dr. Markham attended the Tidewater Academy of Clinical Psychologists (TACP) Executive Council meeting via Zoom on 1/25/21. Dr. Markham has served continuously on the TACP Executive Council in various capacities since 2009.

#### **Community Events / Participation:**

On 1/19/2021, Julius Smith, LPC, Clinical Services Manager for ACOS provided an in service training via video conference to Congressman Robert C. "Bobby" Scott's staff at their request in response to the events which occurred at the U.S. Capital Building on 1/6/2021. The training provided resources concerning mental wellness, self-care, and awareness of mental health needs during times of increased stress and uncertainty.

### **STEP-VA Progress / Milestones and Other Relevant Program-Specific Information:**

Rapid Access was at a 100% success rate in offering appointments within the 10-business day mandate after the initial assessment. This rate does not take into account individuals who were referred out to private practice due to capacity issues.

### **Program Challenges / Significant Issues:**

ACOS Therapy continues to be at capacity due to having two vacant licensed therapist positions. The remaining therapists at ACOS Therapy continue to be resilient in accepting new cases and operating above individual billable targets. With the loss of the second full-time therapist, consumers were placed on a waitlist to continue services and may consider seeking services in the private sector. It is noted that many private practices are increasing to capacity as well which seems to be related to one private practice, Christian Psychotherapy, closing suddenly in January 2021.

ACOS Therapy and Rapid Access continue to provide services via telehealth. Four (4) ACOS therapists are working from home. The remaining staff continue to complete daily COVID-19 self-screening and temperature checks when entering the building, practice social distancing, wear a face covering in the building, and practice ongoing universal precautions to reduce the risk of COVID-19 transmission.

The Rapid Access Engagement Specialist has been assisting the nursing staff with additional demands placed on them when patients need help with housing assistance, securing food assistance, utilities, and other immediate needs in connecting with community resources.

### **Bright Beginnings Psychosocial Rehabilitation Program - December 2020/January 2021:**

#### **Division Goals**

*Goal 1: To meet the defined daily and monthly targets and explore reasons when not met.*

*Goal 2: Strive to retain current Physicians, Nurses, Therapists, Counselors and Support staff to provide timely and safe care to the individuals we serve.*

*Goal 3: Continue to grow the integration of behavioral health and physical health care with encouraging use of onsite Pharmacy and Primary Care Services on campus as well as care coordination in the community.*

#### **Program Overview**

Bright Beginnings is a psychosocial day program that follows components of a clubhouse model offering each individual a sense of importance, ownership and empowerment through his or her contributions in keeping their clubhouse alive and operating. Bright Beginnings has a mission to recognize that every person has a need to engage in meaningful activity outside the home. The program provides training, support and supervision to adults with serious mental illness in the clubhouse and/or community environments. The program provides an environment of

encouragement and support where individuals can build self-esteem and self-confidence in a normalized setting. Our services increase opportunities and skill levels for successful community reintegration in the least restrictive setting and focus on an individual's strengths and abilities, maximizing skills and improving overall functioning level. The program operates Monday through Friday from 8:00 am to 3:30 pm with various social, recreational, educational, skill training, and meaningful activities offered daily to promote empowerment, growth, and confidence.

### **Number of Individuals Served/Admissions/Discharges:**

**December 2020:** Bright Beginnings PSR had 48 individuals enrolled in services in December 2020. 35 individuals were seen at program site for face to face group services and 5 individuals were seen via telehealth, plus some individuals participated in both. There were 7 program discharges for various reasons to include: successful completion of services (2), did not attend after initial intake completed (1), transfer to another PSR (1), and decline of services despite staff recommendation (3). PSR licensed clinicians completed 4 new admissions with one attending consistently, two waiting on COVID-19 test results, and one starting the first week of January. We continue to contact members on our waiting list to schedule intakes and accepting new referrals however, new members have to submit a negative COVID-19 test prior to starting face to face group services at program site. Initial intakes are completed via telehealth with licensed clinicians at this time. Currently have 22 individuals on wait list.

We have had lots of success with re-opening program site for face to face group services with no issues during the month of December. Members continue to use face masks, practice social distancing and follow staff direction for cleaning/sanitizing and hand washing.

Bright Beginnings PSR had a daily average attendance of 15 members in December, which is up 1 from November's average of 14. Our highest day of attendance was 17 and our lowest day was 10. Our total billing units for the month of December was 819 which is 135 units higher than November's units of 684. We are at about 60% of our monthly target (1384) with limits on daily attendance capacity due to social distancing requirements. December was open for 21 days with 1 holiday closing.

PSR Counselor Caseloads have been low and averaging between 8-10 individuals per counselor. Due to lower daily capacity and several discharges, intent is to build caseloads up to 10-12 per counselor which continues to be challenging with discharges and lack of follow through on new intakes.

**January 2021:** Bright Beginnings PSR had 45 individuals enrolled in services in January 2021. 33 individuals were seen at program site for face to face group services and 5 individuals were seen via telehealth, plus some individuals participated in both. There were 4 program discharges for various reasons to include; successful completion of services (1), did not attend after initial intake completed (2), and decline of services despite staff recommendation (1). PSR licensed clinicians completed 4 new admissions with one attending consistently, and three waiting on COVID-19 test results. We continue to contact members on our waiting list to schedule intakes and accepting new referrals however, new members have to submit a negative COVID-19 test

prior to starting face to face group services at program site. Initial intakes are completed via telehealth with licensed clinicians at this time. Currently have 21 individuals on wait list.

Unfortunately on 1/20, Bright Beginnings had a member test positive for COVID-19 therefore, the program was closed for two weeks out of precaution and since this time we have had five staff members test positive and one additional member test positive for a total of 7 members/staff testing positive in January. This is the first issue we have had with COVID-19 at program site since re-opening for group services in August. We plan to re-open on Monday 2/8 with all members and staff having to test, self-quarantine and seek medical care if needed. Members continue to use face masks, practice social distancing and follow staff direction for cleaning/sanitizing and hand washing. We will be supplying additional disposable masks at program site and encouraging members to wear a new one daily instead of their reusable cloth masks.

Bright Beginnings PSR had a daily average attendance of 14 members in January, which is down 1 from December. Our highest day of attendance was 17 and our lowest day was 12. Our total billing units for the month of January was 431, which is 388 lower than December and due to program closure for 7 billable days. We are at about 31% of our monthly target (1384) with limits on daily attendance capacity due to social distancing requirements and taking precaution to close program due to potential COVID-19 exposure. January was open for 12 billable days, 2 holidays and COVID-19 precautionary closure for 7 days.

PSR Counselor Caseloads have been low and averaging between 8-10 individuals per counselor. Due to lower daily capacity and several discharges, intent is to build caseloads up to 10-12 per counselor which continues to be challenging with discharges and lack of follow through on new intakes.

#### **Staff Vacancies/New Hires:**

Bright Beginnings PSR has 3 vacant part-time Peer Recovery Specialist positions and will not recruit for these position until the program is able to return to normal functioning and capacity.

#### **Community Events/Participation:**

Bright Beginnings PSR had their holiday party in December on 2 days to ensure everyone could attend and participate based on limited attendance due to social distancing requirements. Santa visited and took pictures, we had a photo booth, made holiday cookies and gingerbread houses, did raffle prizes and holiday crafts, and lots of other holiday activities throughout the month of December. No community outings offered at this time due to increase in COVID-19 cases in our area.

Bright Beginnings PSR did not have any community outings in January, we continue to do all of our activities at program site due to increase in COVID-19 cases in our area. We offer various educational groups, social activities, recreational activities, skill building activities and units to foster a learning environment that is productive and socially enhancing.

**STEP-VA progress/milestones and other relevant program-specific information:**

Clinicians completing DLA-20 for identified PSR individuals to measure improvement in treatment.

**Relevant Regional or Council Information:**

PSR Manager, Cheryl Johnston, participated in the Virginia Leadership Network (VLN) Virtual Meeting on December 11<sup>th</sup>. VLN mission is to network and promote recovery through sharing of information and advocacy for PSR programs.

**Program Challenges/Significant Issues:**

**December 2020:** Bright Beginnings PSR attendance was consistent, but lower than we would like to see. We are trying to maintain 15-20 members a day. Several members continue to participate in telehealth via phone calls with counselor and Zoom groups in the Community Room for total of 13 telehealth units, which has decreased over the months as member seem to lose interest in telehealth or do not find it to be beneficial. There were no issues with members being exposed to COVID-19 and no positive cases with our members or staff since reopening on August 3<sup>rd</sup> for staff and August 4<sup>th</sup> for members at program site for face to face services. We do face daily challenge of reminding members to wear masks all day or keep them pulled up when not eating or drinking, and educating on importance of social distancing.

**January 2021:** Bright Beginnings PSR attendance was consistent in January and the goal is to maintain 15-20 members a day with social distancing requirements in place. Several members continue to participate in telehealth via phone calls with counselor and Zoom groups in the Community Room for total of 9 telehealth units, which has decreased over the months as members seem to lose interest in telehealth or do not find it to be beneficial. We had 2 members and 5 staff test positive for COVID-19 in January leading to precaution of closing program January 21<sup>st</sup> for 2 weeks to allow all members and staff to test, self-quarantine and return healthy with no further risk of exposure. Members have had difficulty accessing test locations and required a lot of assistance from program manager, case managers and other providers or family to go to COVID-19 testing locations or schedule appointments with providers and/or transportation. This is the first positive test we have endured since re-opening our program site for staff and members in August. We will continue to enforce protocols in place and encourage use of disposable masks versus reusable cloth masks.

## Youth And Family Services

**Lisa S. Hogge, Director**

### Shared Agency and Division Goals

1. *Continue development of H-NNCSB and the Y&F Division as the leader in integrated, comprehensive behavioral healthcare services.*
2. *Continue to invest in staff development resources to ensure the Hampton-Newport News Community Services Board retains its position as an employer of choice and center of excellence in providing behavioral healthcare services.*
3. *Maintain key 3<sup>rd</sup> party payers, expand and maximize current revenue sources, and explore new, profitable service opportunities.*
4. *Maximize collaboration and integrate with local or regional primary care systems and behavioral health and developmental services providers.*
5. *Expand relationships with stakeholders, consumers and advocates to inform service delivery, market state of the art services and communicate organizational successes to the larger behavioral healthcare and developmental services system.*
6. *Celebrate and communicate Hampton-Newport News Community Services Board's performance and reputation as a center of excellence and center of influence, through ongoing engagement of the community we serve.*

### Division Updates

Based on the generous support of those who contributed to the H-NNCSB Holiday Fundraising Drive, the division provided gift cards to more than 100 families in need of assistance during the holiday season in December. The case management, therapeutic mentor, and outpatient programs promptly distributed gift cards to families to support them during the holidays.

The Youth and Family Services division was responsive to those children and families displaced when services were abruptly discontinued due to the unexpected closure of Christian Psychotherapy Services in January 2021. Assistance and service linkage was provided to eight families, offering immediate connection to crisis, psychiatric, therapy, and case management services.

Youth and Family staff have expressed great appreciation for the Agency's assistance to gain early access to the COVID-19 vaccines designated for healthcare workers, as well as for the educational information provided about vaccines, to support both Agency employees and the individuals that we serve.

### **Child and Adolescent Comprehensive Outpatient Services**

#### Program Overview

#### **C&A COS Psychiatric and Outpatient Services**

Short-term, solution focused mental health and substance abuse services provided to young people and families. The range of services include individual, group, and family therapy, comprehensive psychiatric evaluations, social assessments, and medication education and management.

### **C&A Psychological Assessment and Evaluation Services**

Comprehensive psychological testing and evaluation, including personality, educational, parental competency, court, disability, developmental, vocational, and neuropsychological evaluations.

### **Children's Mobile Crisis**

Comprehensive assessment, short-term crisis counseling, safety planning, linkages, coordination, and follow up. Services are provided by a Licensed Professional. The program addresses concerns that place a youth at risk of psychiatric hospitalization, prevent future crisis, and provide services in the least restrictive setting.

### **Children's Behavioral Health Urgent Care Center (CBHUCC)**

Rapid assessment and crisis intervention for children and adolescents experiencing a mental health crisis. Services are provided in safe, clinically supervised treatment environment. Service goals include resolving the current crisis, engaging and empowering parents to move forward, and developing a comprehensive discharge plan that links children and families with clinical supports in their home communities.

### **Number of Individuals Served/Admissions/Discharges:**

#### **Child and Adolescent Psychiatric**

- 434 youth served
- 21 new enrollments
- 37 discharges

#### **Child and Adolescent Therapy & Rapid Access**

- 245 total youth served
- 21 Rapid Access enrollments
- 15 discharges

#### **Child and Adolescent Psychological Services**

- 14 youth served

#### **Children's Mobile Crisis Intervention**

- 6 youth served

#### **Children's Behavioral Health Urgent Care Center**

- 9 youth received crisis services
- 6 youth received crisis psychiatric services

**Independent Coordination, Certification, and Assessment Team**

- 3 Initial & 1 Reassessment IACCTs completed

**Staff Vacancies/New Hires:**

- Tiffany Jefferson, LCSW, began as the Manager of CBHUCC effective November 30, 2020.

**External Trainings/Conferences:**

- Natasha Mobley, LPC, Children's Mobile Crisis, completed the remaining sessions of the High Fidelity Wraparound (HFW), with the final training held on February 4, 2021. Ms. Mobley provides the clinical supervision for the Intensive Care Coordination team, which implements HFW, an evidence-informed and highly intensive community intervention for youth at risk of or currently in residential treatment.

**Community Events/Participation:****Children's Behavioral Health Urgent Care Center**

- Efforts continue to coordinate with local schools and assist families in crisis. The regional partnerships remain strong, with the CBHUCC addressing crisis and psychiatric needs of children and families throughout Hampton Roads.

**Child and Adolescent Comprehensive Outpatient Services**

- In December 2020, through support from the Agency Holiday Fundraising Drive, C&A COS provided gift cards to 30 families in need of assistance during the holiday season.
- The Hampton Balanced Approach to Success and Empowerment (BASE) meeting was held on January 12, 2021, with updates provided to the team about the immediate availability of Youth and Family continuum of services. Discussion and problem solving took place to resolve issues for student internet access and strategies to engage students in virtual learning.
- Since awarded a SAMHSA COVID-19 Emergency Grant on November 20, 2020, C&A COS, has completed five new therapy enrollments, serving youth and their families under this grant. Families will continue to be identified and services provided in accordance with grant requirements.
- Hampton City Schools and C&A COS is currently planning to implement additional substance abuse education and anger management services for youth, targeting a group therapy format. It is anticipated that approximately 18 youth will be referred for services, which are targeted for March 2021.

**STEP-VA progress/milestones and other relevant program-specific information:**

- Rapid Access assessments remain available for youth and families to obtain immediate treatment. Families are connected to other needed services to comprehensively address their needs.

- C&A COS has one therapist trained in Functional Family Therapy (FFT), a short-term, intensive therapy and multi-system intervention targeted to serve youth ages 11-18 years old with juvenile justice, mental health, school, or child welfare involvement. FFT is strengths based and focuses on engagement, motivation, relational assessment, behavior change and generalization.
- Five therapists attended the initial training for Ecosystemic Structural Family Therapy (ESFT) on February 3, 2021, sponsored by the Region V Training Committee. The remaining ESFT training will be held on February 17<sup>th</sup> and March 3<sup>rd</sup>, 2021. Completion of training for this empirically based model supports the C&A COS Therapists to meet the STEP-VA requirement for outpatient behavioral healthcare providers to have expertise in the treatment of trauma related conditions.

#### **Relevant Regional or Council Information:**

- The Region V Child and Family Council met on January 22, 2021. The meeting discussion included updates on the Regional Training Committee, Child Crisis, and Evidence Based Practices.
- The Region V Crisis Taskforce met on January 25, 2021. This meeting's focus included updates on Children's Crisis services, Adult Crisis Planning, and Geropsychiatric/Dementia Crisis Care.

#### **Audits/Reviews:**

Quality assurance activities continue to be completed by the program, inclusive of record reviews.

#### **Program Challenges/Significant Issues:**

As virtual school instruction continues into the second semester of the 2020-2021 school year, the crisis and outpatient programs adapt services and assistance to families to support them during this unprecedented time. The COVID-19 emergency has impacted families' physical and emotional health, with new financial stressors and risk for trauma exposure or loss. The C&A COS clinicians are sensitive to and actively addressing the comprehensive needs of children and their families during this extremely challenging time. With the recent SAMHSA COVID-19 Emergency Grant award, C&A COS is able to further extend opportunities to work with local school systems to assist children and families to be successful in the school setting.

#### **Therapeutic Mentor Services**

##### **Program Overview**

The mission of the Therapeutic Mentor Services Program is to help youth in our community develop a sense of self-worth and self-confidence and to promote their personal growth by encouraging and enhancing their academic, social, vocational, independent living, athletic and expressive skills. The program provides in and out-of-home education, behavioral interventions, training and crisis management services to children and adolescents with moderate to severe emotional disturbances, developmental delays, or substance abuse and their families. Services

include provision of crisis intervention, behavioral intervention, participation in treatment planning, outreach, service provider linkage, monitoring, advocacy, daily living support, independent living skills, vocational instruction, medication monitoring, supportive counseling and positive role modeling.

**Number of Individuals Served/Admissions/Discharges:**

There are currently 109 individuals being served in the program. During the month of December, there was one admission and four discharges. In January, there were three intakes completed and two discharges. There is one additional referral pending for admission in February.

**Staff Vacancies/New Hires:**

The program is managed by Ms. Erica Booth with support from Dr. Patricia Singleton, Clinical Supervisor. There are currently 12 full time staff and 10 part time staff. The program has one full-time vacancy and one part time vacancy effective February 12, 2021.

**External Trainings/Conferences:**

To date, all staff members are up to date on required Agency trainings to include the Infectious Disease Preparedness and Response Plan Trainings. In addition, staff are continuing to meet the CEUs requirements established by the Virginia Board of Counseling to ensure their QMHP licenses remain current.

**Community Events/Participation:**

The program returned to in-person services on October 11, 2020 on a limited basis. Approximately 40 percent of program enrolled youth are receiving in-person services for a portion of their hours of service. The remainder of their services are provided through telehealth. Consumers and guardians are screened for COVID-19 symptoms in a safe and respectful manner, before each face to face activity. This includes the review of the symptoms, recent exposures to those with COVID-19, and recent travel to areas with high COVID-19 activity in the past 14 days with the client and parent. Program staff oriented all clients and families to the precautionary measures that are being taken to ensure the health and safety of employees and clients. Precautionary measures include a combination of masking, hand washing, use of hand sanitizer, social distancing and the use of disinfecting sprays or wipes. In-person contacts are planned for outdoors, at the consumer's home where precautionary measures are taken and social-distancing protocols are followed. The plan for offering client transportation is currently pending and a decision to provide transportation is contingent upon the COVID-19 trends improving in the Commonwealth and per the H-NNCSB health and safety standards.

**STEP-VA progress/milestones and other relevant program-specific information:**

Medicaid funding is not applicable to Therapeutic Mentor Services. Youth must be approved for funding through the Family Assessment and Planning Team (FAPT) or Adoption Subsidy process.

**Audits/Reviews:**

Program manager and clinical services supervisor continue to review client records monthly during individual supervision with staff.

**Program Challenges/Significant Issues:**

Staff have continued to have a minimum of at least twice weekly contacts with program enrolled youth. Services are provided primarily through telehealth service delivery. Clients receiving partial in-person services receive a combination of both individual face to face contact and telehealth service delivery. During telehealth sessions, youth are engaged both individually and in a group setting with their peers via a shared screen. Peer groups have engaged youth in therapeutic games to further assist with identifying emotions, developing problem solving skills, advancing and demonstrating learned socialization skills and recognizing strengths in self and others.

Additionally, the program continues to provide workshops that focus on trauma based modules, self-esteem and self-worth, art and journaling activities to channeling unwanted feelings through art and journaling, managing anxiety and solution focused methods to excel at virtual learning. In addition, program enrolled youth continue to participate individually or in group, via a shared screen, arts and crafts activities. During the months of December and January, these activities have included a gingerbread decorating contest, making care packages for the homeless and creating holiday gifts for family members. Multiple youth in the program are also participating in bi-weekly virtual pizza parties to encourage ongoing behavioral success. Additionally, the program continues to offer both a clothing and a hygiene closet to program youth which has been helpful in furthering a positive self-concept for youth we serve.

During the month of November, 12 program enrolled youth and their families received support from the Holiday Fundraising Drive. Also, the program continues to provide clothing and hygiene items to those in need which has been helpful in furthering a positive self-concept for youth we serve.

**Juvenile Justice Services****Program Overview**

The Juvenile Justice Services continuum is comprised of the Newport News Juvenile Drug Treatment Court (NNJDTC), Clinical Services within the Hampton and Newport News Court Services Units and Clinical Services within Newport News Secure Detention. The program provides mental health and substance use screenings, comprehensive assessments, short term therapeutic interventions, and crisis intervention to youth who present before the Hampton and Newport News Juvenile and Domestic Relations Courts and/or Court Services Unit. Services are provided to youth in the community or to those remanded to Secure Detention. Additionally, Newport News Juvenile Drug Treatment Court program offers an intensive substance use program for non-violent adolescents (ages 12-17 at admission) and their families who are in the community or ordered to the Post-Dispositional program within Secure Detention.

**Number of Individuals Served/Admissions/Discharges:**

There are currently 27 juveniles remanded to Secure Detention. Detainees are discharged on a continuous basis as they are released at Court. The number of juveniles has remained consistent over the last few months.

Three individuals are being served within the NN Juvenile Drug Treatment Court and one individual is being assessed for the program and is receiving psychoeducational services.

The Hampton & Newport Court Services Units render services via assessments, screenings, mental health consults, and SA/MH groups. There were 16 youth were served over the last in the month within the Hampton-Court Services Unit and 51 within the Newport News Court Services Unit. All group participants were discharged after the completion of services. Juvenile Justice Services will continue to engage court-involved youth who are in the community and Secure Detention.

**Staff Vacancies/New Hires:**

There have been no personnel changes during this reporting period.

**External Trainings/Conferences:**

Ms. Dozier participated in a virtual training “**Specialty Docket Coordinators meeting**” on December 1<sup>st</sup>, 2020. This training served to enhance the knowledge and skills for providing oversight to Juvenile Drug Court youth.

**Community Events/Participation:**

Due to COVID-19, the Juvenile Justice programs limited their participation in community events. The HCSU did deliver self-care and schools supplies, to participating JJCM and CM families. Drug Court provided families with two gift cards in addition to a small donation provided by the “Friends of Drug Court” to enjoy their holiday.

**STEP-VA progress/milestones and other relevant program-specific information:**

NNJDTC continues to use virtual drug court hearings, oral drug testing, minimal in-person urinalysis, and telehealth services to ensure the safety of clients and staff during COVID-19. All programs continue to use trauma-informed as well as culturally sensitive interventions to engage clients and families.

**Relevant Regional or Council Information:**

It is important to note that Judge Judith Kline, Chief Judge for the NN Juvenile Drug Court will be retiring on March 31, 2021. Also of note, Leon Semper assumed the responsibilities of Drug Court NNCSU Probation Officer on September 28, 2020. On October 2, 2020. Ms. Michele Fremen assumed the role of Commonwealth Attorney for the Drug Court Team.

**Audits/Reviews:**

Quality assurance activities are completed at the program and help promote quality care for the individuals who receive services.

**Program Challenges/Significant Issues:**

The low census of the NNJDTC program remains as a program challenge. The exclusionary criteria of weapon charges coupled with the slowing down of courtroom appearances during COVID-19 has significantly impacted referrals. Strategies such as the use of additional screening tools, quicker access to Judges for Drug Court assessments, and courtroom marketing materials are being employed to address the issue.

There has also been program collaboration with the Newport News Public Schools Student Support office and Director of Disciplinary Affairs to identify, assess, and address the needs of youth with more intensive substance use needs.

**Children's Mental Health Case Management and Intensive Care Coordination****Program Overview**

Case Management is an essential and unifying factor in the Y&F's service delivery system. The case manager serves as the single point of contact and support for the family and child regardless of the level of treatment. The case manager provides ongoing assessment of needs, linking and coordination of services and monitoring of services for young people with serious emotional disturbances or substance use disorders. The mission of case management help the child achieve and maintain optimal functioning in the least restrictive, most normative community setting.

**Intensive Care Coordination (ICC)**

The ICC program provides a high level of behavioral health assessment and coordination to families with children who have behavioral health needs and are in, or at risk of an out of home placement. Services are provided to families with complex care needs that may benefit from multi-Agency planning and collaboration.

**Healthy Families Case Management**

Specialized Healthy Families Case Management services are provided through partnerships with the Hampton and Newport News Departments of Human Services where the Parents as Teachers curriculum is implemented to promote parent education, early learning and school readiness.

**Number of Individuals Served/Admissions/Discharges:**

The program operates with a manager, 7 Case Management Supervisors, 26 fulltime case managers and 4 Intensive Care Coordinators.

**Child and Adolescent Case Management**

- 537 children and adults served
- 16 new intakes
- 3 discharges

**Intensive Care Coordination**

- 35 youth served
- 3 new intakes

**Hampton Healthy Families Case Management**

- 99 children served
- 4 new intakes

**Newport News Healthy Families Case Management**

- 88 children and adults served
- 4 new intakes

**Staff Vacancies/New Hires:**

There are 22 fulltime C&A MH CM case managers and 4 Intensive Care Coordinators (ICC). The Healthy Families programs have 7 case managers. One new ICC and 2 new HF case managers began in January 2021. There are currently 2 case manager vacancies and 3 case manager resignations were received in December and January.

**Community Events/Participation:**

Throughout the COVID-19 pandemic, there has been ongoing coordination with each school system through the CSA/FAPT processes, inclusive of accepting referrals to assist with coordinating services, provision of crisis intervention, and facilitating FAPT referrals. Throughout this period, there has been communication and coordination with the Hampton and Newport News Student Services and Special Education departments to assist students and their families through provision of psychiatric services, case management, outpatient, and crisis intervention.

The Case Management Assessment Team continues to offer immediate access to families in need of case management for linkage to clinical services both within the CSB and to our private partners in the community.

Collaborative meetings continue with between the H-NNCSB and leadership of Healthy Families programs for Hampton and Newport News to promote coordination in the partnerships and to meet program standards.

Hampton Community Assessment Team meetings are held on a regular basis to make recommendations for individuals who have a CHINS Truancy or CHINS Runaway petitions.

**STEP-VA progress/milestones and other relevant program-specific information:**

The Case Management department continues to assist families in connecting to Rapid Access for their outpatient needs. Also, the Supervisors continue to educate stakeholders and community providers on how to connect to Rapid Access for services both children and the other members of their family.

**Relevant Regional or Council Information:****Audits/Reviews:**

Each supervisors completes monthly chart reviews for their team and provides feedback to each CM.

**Program Challenges/Significant Issues:**

As the pandemic continues, Case Managers are actively assisting families with linkage to all resources needed for virtual learning and to receive their behavioral health support.



## **VIRTUAL MEETING OF THE BOARD OF DIRECTORS**

**Thursday, January 28, 2021, 5:00 p.m.**

**Virtual Meeting**

### **CALL TO ORDER**

Members of the Board, Guests, and Staff were welcomed, via Zoom, to the Virtual Meeting of the Board of Directors for the Hampton-Newport News Community Services Board (H-NNCSB) by Mr. Thomas Morehouse III, Board Chair, who called the meeting to order promptly at 5:00 p.m. on January 28, 2021. He also wished everyone a very happy new year.

### **REMARKS OF THE CHAIR**

In his remarks, Mr. Morehouse asked that Members of the Board remain mindful that Virtual Board of Director Public Meetings will continue to be conducted using the Zoom medium in efforts to comply with the current State of Emergency and Social Distancing requirements that remain in full force and effect in the Commonwealth of Virginia due to the COVID-19 Pandemic. Furthermore, and in compliance with electronic meeting regulations, Mr. Morehouse announced that in efforts to assist with conducting effective electronic meetings, Members of the Board of Directors would find included in their Board Package, required “Special Rules” for their review and use during the meeting. He asked that all meeting participants take time to review the Special Rules in order that the most professional electronic meetings of the Board of Directors can be held during this time of the Pandemic.

### **ROLL CALL**

#### **Board of Directors**

Mr. Morehouse called the Roll of the Members of the Board of Directors for the Hampton-Newport News Community Services Board who confirmed their Zoom Meeting attendance, then muted their listening devices and turned on their cameras, as instructed. In addition, Mr. Morehouse advised everyone the meeting may be recorded. In attendance were: Mrs. Venneria Thomas, Vice Chair; Mr. Steven Bond, Treasurer; Mrs. June Owens, Secretary; Sheriff Karen Bowden; Councilman Chris Bowman; Councilman Steven Brown; Dr. Arva Davidson; Ms. Ann Abdullah; Mr. Randie Dyess; Mrs. Jane Hobbs; Attorney Charisse Mullen; Mrs. Mary Stewart; and Dr. Elva Hunt

## **Executive Leadership**

### **Team and other**

**H-NNCSB Staff:** Dr. Daphne Cunningham performed the Roll Call of the Executive Leadership Team and other H-NNCSB staff which confirmed the attendance of: Mrs. Natale Christian; Dr. Daphne Cunningham; Mrs. Raymona Barnes; Mrs. Sherry Hunt; Mr. Anthony Crisp; Dr. Melanie Bond; Ms. Kimberly Thompson; Mrs. Carol McCarthy; Mr. Thomas Miller; Mr. Robert (Bob) Deisch; Mr. Ryan Dudley, Mrs. Joy Cipriano and Mrs. Jae Hee Jackson. Mr. Morehouse acknowledged additional staff member Ms. Laurie Ratledge was in attendance, representing Medication Management Services.

### **Members of the Public and**

**Other Guest(s):** Shaeron King, Department of Parks, Recreation & Leisure Services, Therapeutic Recreation Coordinator.

## **PUBLIC COMMENT**

The Board of Directors received no public comment during the January 28, 2021 meeting.

## **ACTION ITEM**

### **A-1. Board Approval of the Minutes of the Board of Directors Meeting from December 17, 2020**

**Action** There being no discussion or comments, the Minutes of the Board of Directors Meeting from December 17, 2020 were approved as presented.

### **A-2. Nomination and Selection Committee Recommendation**

Mrs. Mary Stewart, Nomination and Selection Committee Chair, summarized the Thursday, January 7, 2021 Committee meeting and requested approval to send to the Newport News City Council the Committee's recommendation for reappointment of Dr. Arva Davidson and Dr. Elva Hunt, with their new terms effective July 1, 2021.

The Nomination and Selection Committee will present recommendations for reappointments for the City Of Hampton during the February 25, 2021 Board of Directors meeting.

**Action** There being no discussion or comments, Members of the Board of Directors for the Hampton-Newport News Community Services Board approved the Nomination and Selection Committee's recommendation for reappointment of Dr. Arva Davidson and Dr. Elva Hunt and will submit their names to the Newport News City Council.

**A-3. Budget Finance and Audit Committee Recommendation**

Mr. Steven Bond, Budget, Finance & Audit Committee Chair, summarized the Monday, January 25, 2021 Committee meeting by stating that Ms. Raymona Barnes provided Members of the Committee with the Key Areas of Focus: maximizing revenue and utilizing resources to improve provision and access to behavioral health. In addition, the Committee discussed the current fiscal environment with the impact to CSB expenditures and revenue, where operating margins continue to decline. There are five major items that were considered in putting together the FY2022 Operating Budget. These items included Strategic Plan Initiatives, Staff Compensation, Program Revenue, Operating Expenses, and other Unfunded Needs. Mrs. Barnes also provided Members of the Committee with in depth information regarding these items and updated members on the impact of COVID-19.

Mr. Bond requested the Board of Directors approve the FY2022 Budget Planning Assumptions and Budget Timeline as submitted.

**Action** There being no discussion or comments, Members of the Board of Directors unanimously approved the FY2022 Budget Planning Assumptions and Budget Timeline.

## **STANDING BOARD COMMITTEE REPORTS**

### **Nomination and Selection**

Mrs. Mary Stewart, Committee Chair, reported the Nomination and Selection Committee held its first meeting on Thursday, January 7, 2021 at 2:00 p.m. At this meeting Members reviewed the Board Membership Tenure Status Report and addressed the upcoming reappointments of members whose terms are set to expire. Committee Members also discussed the process and timeline for the Performance Evaluation of the Executive Director, Mrs. Natale Christian.

During the meeting, Committee Members completed a review of the upcoming reappointments of current Members of the Board of Directors whose terms are scheduled to expire on June 30, 2021.

Dr. Hunt advised that Newport News Board Member terms scheduled to expire at the end of this fiscal year include that of Dr. Arva Davidson, and Dr. Elva Hunt; both have agreed to be recommended to the Newport News City Council to serve another 3 year term.

The Committee also reviewed and agreed on the process, evaluation tools, and timeline for the Annual Performance Evaluation of our Executive Director. The next steps in the process include receipt of Mrs. Christian's Self-Appraisal, as well as the Board's much needed participation in the evaluation process. The Performance Evaluation Tools and self-appraisal will be provided to Members of the Board at the March 25, 2021 Board Meeting.

The Committee approved sending reappointment recommendations to the Board of Directors for review at the January 28 meeting. They also approved presenting the Performance Evaluation process and timeline to the Board.

A full report has been provided to Board of Directors in the red folder.

The Committee's next meeting will be held virtually on Thursday, February 4, 2021 at 2:00 p.m.

**Budget, Finance  
And Audit**

Mr. Steven Bond, Committee Chair, reported that the Budget, Finance and Audit Committee held its Virtual meeting on Monday, January 25 at 4:00 p.m. Mr. Bond informed the Board that members also reviewed the financial statement and other information for the H-NNCSB and its entities, namely the Hampton-Newport News Property, Co., Inc., Share-a-Homes of the Virginia Peninsula, and Trust for the Disabled Persons.

Mr. Bond noted that Mrs. Raymona Barnes, Interim Chief Financial Officer, presented the FY2022 Budget Planning Assumptions and Budget Timeline to the Committee. She also updated the Committee on CSB Cash Balances, Aging and Earned Revenue Report, Unbilled Services review, the Health Insurance for FY2020, as well as CSB Divisional Net Income through December 2020. Overall, Mrs. Barnes reminded Members that year over year, balances for the CSB and its entities have been consistent and very stable. Also, that despite the pandemic most programs are achieving their budgetary targets and currently the clinical teams continue to do an amazing job providing telehealth services which has been instrumental in achieving revenue targets. As a result, it was announced that the Agency would be providing one-time supplemental payments to full and part time employees in appreciation for their hard work in sustaining services during the pandemic.

A full report has been provided to Board of Directors in the red folder.

In closing, Mr. Bond announced that the next Budget, Finance and Audit Committee virtual meeting was scheduled for Monday, February 22, 2021 at 4:00 p.m.

**Community  
Relations /  
Governmental  
Affairs**

Mr. Chris Bowman, Committee Chair, reported that the Community Relations / Governmental Affairs Committee held its virtual meeting on Monday, January 25, 2021 at 4:30 p.m.

Mr. Bowman stated the Committee Members discussed several agenda items regarding General Assembly/Legislative Updates, Local Initiatives, COVID-19 & Vaccines, and Agency events. The Members also received an update on Substance Abuse and Addiction Recover Alliance (SAARA) activities by Ms. Frederika Jones, President, SAARA Virginia Board of Directors.

Under Legislative updates, Mrs. Sherry Hunt, Director of Communications and Business Development, provided an update on Senate Bill 1304 which was introduced by Senator McPike. The summary of the bill states that CSB discharge plans from state hospitals shall be completed within 30 days of an individual's date of discharge from a state hospital or training center. Current law requires that a discharge plan be completed prior to an individual's discharge. The bill reduces from within 30 days to within 72 hours of the individual's identification as ready for discharge the time by which a community services board must document its disagreement with the determination that an individual is ready for discharge from a state hospital or training center.

Committee Members discussed potential negative outcomes for discharged clients with serious mental illness, the negative impact on the CSB system as a whole, and efforts to join with our VACSB partners in opposition to this bill. Mrs. Hunt agreed to send a copy of talking points to Committee Members.

Mrs. Hunt also reported that the Statewide Marcus Alert Stakeholder group held its first meeting on January 25, 2021 and that Mrs. Natale Christian, Executive Director, has been selected to serve on the stakeholder group. The Committee Members congratulated Mrs. Christian's inclusion in the group and noted the significance of the role of the H-NNCSB in this critical initiative. Mrs. Christian advised that while she is on the committee, Virginia Beach will be the first CSB in our Region to implement the new Marcus Alert Model, further that Virginia Beach CSB has operated a co-responder model for quite some time.

Under Local Initiatives updates, Mrs. Natale Christian, Executive Director, congratulated Karen Bowden on being appointed Sheriff of the City of Hampton. Sheriff Bowden graciously acknowledged the Members and offered her continued support to the H-NNCSB in her new role as Sheriff. Sheriff Bowden highlighted the importance of the Agency's work in the community and expressed that she looked forward to a continued successful partnership.

Mrs. Christian also reported she has been asked by the Hampton City Manager's office to participate on the Hampton Violent Crimes Review Committee. This committee is a public safety, and public health partnership aimed at reducing gun violence in the city. She advised that she attended the initial introductory meeting earlier this month and looks forward to future meetings which will be held on a quarterly basis.

Mr. Ryan Dudley, Director of Crisis Services, presented two local updates, on the Hampton Behavioral Health Docket and the Newport News CAREs Co-Responder Model. Mr. Dudley reported there are currently 9 individuals in the Hampton Behavioral Health Docket as the program gets off the ground and that Judge Smith is the presiding Judge. He also reported that the Newport News CARE Co-Responder Team has been meeting regularly. This team consists of the CSB, 911 Call Center, Fire, and Police Departments in Newport News. The program is expected to be operational within the next few months with recruitment beginning by the end of January.

Dr. Daphne Cunningham provided an update on COVID-19 and vaccinations. The Agency is seeing an uptick in the number of positive COVID-19 cases for staff as well as individuals in the residential programs. The good news is that the majority of residents in the Intermediate Care Facilities, (ICFs), were able to receive the vaccines through Walgreens.

Dr. Cunningham also advised that approximately 300 employees received vaccinations through Riverside Hospital, which is approximately one third of the Agency's staff. Efforts are underway to educate staff about the safety of the vaccine, and also to get residents of all the residential programs vaccinated. Staff will continue to work with the Department of Health and community partners but also requested assistance from Committee Members to utilize their networks to expedite this vaccination process for CSB residential clients. The meeting continued with discussion surrounding messaging and ways to approach the general fear of receiving the vaccine.

In Agency news, Mrs. Hunt reported a summary of the successful holiday fundraisers in 2020 that raised funds to serve approximately 500 clients during the Thanksgiving and Christmas holiday season. Mrs. Christian highlighted that the Agency will celebrate its 50th Anniversary this year, and asked that any Member interested in serving on the planning committee to let her know.

Ms. Frederika Jones presented an update from the Substance Abuse and Recovery Alliance (SAARA) to include activities related to Peer Support, Advocacy, Training and local community involvement.

A full report has been provided to Board of Directors in the red folder.

In closing, Mr. Bowman notified the Board Members that the next Committee meeting was scheduled for Monday, February 22, 2021 at 4:30 p.m.

## **Strategic Planning**

Mr. Steven Brown, Committee Chair, reported that Committee Members met on Thursday, January 21, 2021 at 4:00 p.m. and reviewed the 2017-2021 Strategic Plan and discussed the need to begin the process of developing the 2022-2026 Strategic Plan.

Members of the Committee were provided with an in-depth review of the CSB's three Strategic Plan Objectives by way of progress summaries and comments received from Program Directors of various CSB divisions on both the Clinical and Administrative sides. CSB Divisions included: Addiction and Recovery Treatment Services, Developmental Services, Information Technology, Quality Management, Crisis Services, Outpatient Services, and Human Resources.

The COVID-19 pandemic has created new challenges for the CSB and the Agency has developed and implemented new ways of working in order to mitigate infection risks for staff and clients. The Executive Leadership Team discussed new teleworking arrangements, virtual meetings, and limited in-person interactions for all programs.

Staff provided updates on pursuing grant opportunities and leveraging Agency funds. The leadership team continues to look into creative ways to advocate for funding through all possible channels. Also in the areas of marketing and communications, new Agency brochures have been developed with two language versions, English and Spanish, which will be disseminated electronically through various channels. The Agency is also exploring other sources of revenue with third parties and building partnerships with local and regional stakeholders. Some activities have included the Give Local 757 Fundraising Campaign, a Holiday Fundraising, and local partnerships with the Newport News Fire & Police Departments in the development of the Community Assisted Response (CARE). The goal is to remain engaged and visible with our stakeholders.

Mr. Brown advised that the H-NNCSB leadership have worked diligently to maintain a culture of engagement and recognize staff contributions. They have supported telework to minimize the risk of infection and encouraged team-building events via Zoom. Despite the need for social distancing, managers and supervisors are trying to stay involved with their teams virtually.

Mrs. Christian advised that Mrs. Hunt has been in communication with a Consultant from the Richmond area regarding consultation on the development of the New Strategic Plan for 2022-2026. It will be helpful to have someone external guide the process so that staff can focus on the actual goals. Mrs. Hunt has begun Preliminary discussions with the consultant and will engage stakeholders and Partners in the communities. Mr. Brown requested that the Committee consider intentional ways of bringing in external partners to communicate the successes of the H-NNCSB.

Members of the Board and the Executive Director thanked the leadership team for all their hard work. Mr. Brown thanked Dr. Bond for her leadership of this Committee as she passes the baton to Mrs. Hunt for the development of the New Strategic Plan. Mr. Brown commended Dr. Bond's guidance throughout the process in the last few years that involved engaging staff and partners in developing the Plan. Mr. Brown expressed confidence in Mrs. Hunt's ability to take the Agency across the finish line with the new Strategic Plan.

A full report has been provided to Board of Directors in the red folder.

The next Committee meeting will be scheduled for June 2021, with an exact date to be determined.

## **Quality Management**

Dr. Elva Williams Hunt, Committee Chair, reported that Members of the Committee met on Wednesday, January 13, 2021 at 4:00 p.m. and were presented updates on Regulatory and Compliance Matters, Human Rights and Investigation Processes, as well as Regional and State Activity. The first presentation was provided by Mrs. Alicia Gaston, CSB Quality Assurance and Improvement Manager, who updated Members with regard to CSB audits, service modifications, quality record reviews, and other regulatory updates for the past quarter, October through December 2020.

Ms. Gaston also advised that there are three audits currently in progress: a Developmental and Behavioral Health Services, (DBHDS) Operational Review, a Department of Medical Assistance Services, Developmental Services Waiver Wait List Follow Up Review, and a DBHDS Health Services Advocacy Group, HSAG, Review. The team is also preparing for the upcoming 2021 CARF Accreditation in August of 2021. Further, the team has begun meeting with The Hampton Roads Opioid Clinic leadership team to prepare. Ms. Gaston also reported that Full and Targeted reviews were done on six licensed programs. And, finally, the Quality Management team and other CSB staff were certified as DLA-20 Trainers.

Members of the Board Quality Management Committee also received a presentation from Mrs. Karen Matthews, Compliance and Standards Manager, who provided updates on Local Human Rights as well as Serious Incident Reporting. During the reporting period of October through December 2020 there were a total of 488 incidents, however it was noted that only 31 required reporting to the Department of Behavioral Health and Developmental Disabilities Services, DBHDS. It was further reported that for the first time in five years, Adult IDD Case Management received a Citation and Corrective Action Plan (CAP) that resulted from a Mortality Review Investigation. Closer monitoring of an individual living in the community was cited.

Dr. Melanie Bond, Quality Management Director, provided Members with department updates and expressed how proud she was of the Quality Management Team. Dr. Bond also reiterated that H-NNCSB was notified that the Agency would be receiving a Triennial CARF audit in 2021.

Following a brief discussion, Dr. Hunt noted that the information provided allows Members of the Board to get a clearer understanding of what is accomplished by the Hampton-Newport News Community Services Board and speaks to the accountability and quality of the services provided.

A full report has been provided to Board of Directors in the red folder.

The Committee then discussed potential dates for the next meeting and agreed to meet in April 2021, in line with the Quality Management quarterly reporting period.

## **EXECUTIVE DIRECTOR UPDATE**

Mr. Morehouse noted the two Information Items in the Board Package and asked if the Members had any questions or comments regarding either the COVID-19 or Legislative Updates.

Mrs. Christian noted the very busy month of January and thanked the Members of the Board of Directors for their time and participation in the many meetings and phone calls, as well as being available to the H-NNCSB to accomplish goals of the Agency.

She further reported that in addition to the Cost of Living Allowance, COLA, rolling out, Agency staff will be given one-time bonuses. She attributed the Agency achieving success in not only reaching the budgetary goals but also

continuing to provide services at a high level to our communities to our staff. Mrs. Christian thanked the staff and also reinforced that the decision to give them a bonus was a tough decision, although the Agency is doing well now, the Pandemic continues. However, Mrs. Christian stated it was important to highlight the great work done by staff in caring for the clients we serve. Further that the Agency has very loyal, dedicated, and hard-working staff and we wanted to take this opportunity to thank and reward them.

Mrs. Christian moved on to discuss the 50<sup>th</sup> Anniversary and stated that she wants to use this opportunity to not only celebrate the important milestone but use the event to market the Agency to the communities. She asked that any Members of the Board interested in helping with the effort or if they had any ideas or suggestions to please reach out to her office.

Additionally, Mrs. Hunt provided an update to the Senate Bill 1304. Some fairly good news due to the Agency's advocacy efforts against the bill, which would have detrimental effects on the system. The Bill has been amended to address the concerns after a meeting with VACSB's Chair and Senator McPike. While the language regarding the 72 hours period that CSBs have to object to a plan remains in the bill, the language changes that would have allowed hospitals to discharge the individual prior to the completion of the individual's discharge plan has been removed. This is a very positive result. She advised that an enactment clause will be added to the Bill that requires DBHDS and VACSB to engage in a work group. The group will review the current process for discharging individuals from state hospitals, and develop potential options for the individual to be safely discharged into the community. The work group will provide recommendations and identify funding so individuals receive essential services upon discharge. She further advised that this work group will report its findings and conclusions to the Chairman of the House Committee on Health, Welfare, and Institutions Committee on Education and Health by September 1st of this year. Ms. Hunt stated that this was a very favorable outcome on this Bill and advocacy efforts were effective.

Members of the Board acknowledged the great news.

## **PROGRAM HIGHLIGHTS**

Mr. Morehouse announced that Members of the Board received Program Highlights from Division Directors of the Administrative Divisions which provides an overall viewpoint of what conspecific information to assist in the overall perspective of what continues to take place at the CSB during this time of the pandemic.

*Virtual Meeting of the Board of Directors  
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**CLOSING** There being no additional discussion from Members of the Board or Division Directors regarding their Program Highlights, Mr. Morehouse, and Mr. Bowman congratulated Sheriff Bowden again on her appointment and thanked her for her service. Members were reminded of the Monthly Planners provided in the back of their Board Packages for virtual events throughout the months of January and February.

**ADJOURNMENT** There being no additional business to be discussed, the Virtual Meeting of the Board of Directors for the Hampton-Newport News Community Services Board adjourned at 5:45 PM.

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Thomas F. Morehouse, III  
Board Chair

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Mrs. June Owens  
Secretary

*Respectfully Submitted,  
Jae Hee Jackson*

# FY21 Monthly Planner

## March 2021

01	10:00 AM	Regional Leadership Team Virtual Meeting
01	3:00 PM	Semi-monthly COVID-19 Call with DBHDS
02	9:00 AM	Weekly Deputy ED Leadership Meeting
02	11:30 AM	Executive Leadership Team
03	8:00 AM	DBHDS Bi-Monthly Update Meeting
03	9:00 AM	Weekly Communication/BD Meeting
03	10:00 AM	Quality Management Director Meeting
04	12:00 PM	H-NNCSB Monthly Physicians Meeting
05	10:00 AM	Weekly Fiscal Leadership Meeting
08	10:00 AM	Monthly HR Leadership Meeting
08	1:00 PM	MHWG: Single Access Point and Community Resources
08	3:00 PM	Marcus Alert Stakeholder Group Meeting
09	9:00 AM	Weekly Deputy ED Leadership Meeting
09	11:30 AM	Executive Leadership Team
09	1:30 PM	Steering Committee Meeting
<b>09</b>	<b>7:00 PM</b>	<b>Newport News City Council Meeting</b>
10	10:00 AM	Weekly Communication/BD Meeting
<b>10</b>	<b>6:30 PM</b>	<b>Hampton City Council Meeting</b>
12	10:00 AM	Weekly Fiscal Leadership Meeting
<b>11</b>	<b>2:00 PM</b>	<b>Nominations &amp; Selection Committee</b>
15	3:00 PM	Semi-monthly COVID-19 Call with DBHDS
16	9:00 AM	Weekly Deputy ED Leadership Meeting
16	10:00 AM	VACSB ED Forum
17	8:00 AM	DBHDS Bi-Monthly Update Meeting
17	9:00 AM	Weekly Communication/BD Meeting
19	10:00 AM	Weekly Fiscal Leadership Meeting
<b>22</b>	<b>4:00 PM</b>	<b>Budget, Finance &amp; Audit Committee</b>
<b>22</b>	<b>4:30 PM</b>	<b>Community Relations / Governmental Affairs Committee</b>
23	9:00 AM	Weekly Deputy ED Leadership Meeting
<b>23</b>	<b>7:00 PM</b>	<b>Newport News City Council Meeting</b>
24	9:00 AM	Weekly Communication/BD Meeting
<b>24</b>	<b>6:30 PM</b>	<b>Hampton City Council Meeting</b>
<b>25</b>	<b>5:00 PM</b>	<b>H-NNCSB Board of Directors Meeting</b>