



**BOARD OF DIRECTORS  
MEETING MINUTES  
SEPTEMBER 24, 2019**

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The Southside Community Services Board of Directors met, in Open Session at noon on September 24, 2019, in the Chipps Conference Room, at the SSCSB Administration Building in Clarksville, Frances Clark, Board Chair, presided.

**ATTENDANCE**

**MEMBERS PRESENT**

Frances Clark (Chair)  
Ron Thornhill (Vice-Chair)  
Betty Adams (Secretary)  
Winona Proffitt  
Joe Trickey, Jr.

**MEMBERS ABSENT**

Evella Hutcheson (Treasurer)  
Ivan Hargrove  
Pat Taylor  
Chris Wilson

**OTHER ATTENDEES**

*SSCSB staff members:*

Beth Engelhorn, Executive Director  
Galyna Hightower, Director of Financial Services  
Sharon Gavitt, Director of Human Resources  
Nicole Lewis, Director of Quality & Compliance  
Helen Deslauriers, Clerk of the Board

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**PROCEEDINGS**

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**I. CALL TO ORDER**

The meeting was called to order at 12:04 p.m. by Frances Clark, Board Chair. A quorum of Board members being present, and the meeting having been duly convened, the Board was ready to proceed with business.

**II. APPROVAL OF BOARD MINUTES**

The minutes from the last Board of Directors Meeting, held on July 25, 2019, were approved as presented.

**III. PUBLIC COMMENTS**

None

**IV. EMPLOYEE OF THE MONTH – JUNE, AUGUST and SEPTEMBER 2019**

***Sharon Gavitt, Director of Human Resources***

The Employee of the Month for June, Kenan Tyner-Smith, Prevention Coordinator, for August, Helen Deslauriers, Business Operations Manager | Executive Assistant, and for September, Valaria Seamans, Community Support Program Supervisor MCSP/HCSP, were each presented to the Board.

Newly appointed Board Member, Winona Proffitt, representing Mecklenburg County, and Nicole Lewis, the new Director of Quality & Compliance for SSCSB, were introduced.

## V. OLD BUSINESS

**Item A: Real Estate Disposition (Update)** – Rainbow House has been sold. Insurance, utilities, lawn care...etc. have been cancelled and proceeds from the sale have been received, leaving us no further connection to this property. The old BCSP facility has had renewed interest and we expect an offer any day now. Again, since we are selling this facility “as is,” because of the building’s many documented issues, we expect low proceeds from this sale.

## VI. FINANCIAL REPORT

### *Galyna Hightower, Director of Financial Services*

The cash balance is slightly elevated this month. AR increased for the first two (2) months of FY20. We had an increase in prepaid insurance which is reflected in the report. There are not too many changes as EOFY adjustments have not yet been posted, and the annual audit is not yet complete. We have received complete annual local funding revenues from Mecklenburg and Brunswick, with Halifax paying their first quarter as expected.

We still have some unexpended restricted funds for Medical Assisted Treatment as we have had difficulty finding a certified/licensed provider, but we are working hard to get these programs up and running with funding set aside for this purpose.

At this point in the fiscal year the budget should be tracking at 16.67%. At 18% MEDICAID revenue is running above budgeted levels. Last year at this time we were 3% below budget in MEDICAID revenue, so this is a very positive turn-around, which would seem to augur well for the year. Currently expenses are running at 15%. The budget has been slightly adjusted from that approved by the Executive Committee and ratified by the Board in July.

## VII. NEW BUSINESS

**Item A: SSCSB Website Redesign** – There has been no real improvements made to the SSCSB website since 2012. Feedback has shown that those accessing it find it “hard to navigate” ...”too static and uninteresting” ...”can’t find needed information.” There have also been increasing complaints that the links and tabs do not always work, making some pages inaccessible. We, along with the Southside Wellness Coalition, met with vendors to solicit some ideas regarding website structure and design. After listening to the presentations we focused on Foxglove MARKETING (pka Soapbox), also selected by the coalition to design their website, as providing the options at the best price. Subsequent to that meeting we met with Foxglove again to discuss content, functionality, etc., after which they provided us with a proposal. We are asking the Board to authorize us to move forward with this project.

**MOTION:** Upon motion made by B. Adams, duly seconded by R. Thornhill, the following resolution, unanimously carried.

**RESOLUTION:** *BE IT RESOLVED*, that the Board of Directors, Southside Community Services Board, in regular meeting assembled, authorizes the Executive Director to enter into a

contract with Foxglove MARKETING TO build and design a 20-page website for SSCSB as proposed: \$7500 (each additional page requested – \$300/pg) and an ongoing maintenance fee of \$50/mo.

**Item B: Albert HUD Vouchers form 2016 (Write-Off)** – There are still three outstanding vouchers from 2016 for Alberta Manor, a HUD property, for which we have still not received payment. Due to a PRAC that went un-renewed by HUD for over a year we had 15 outstanding vouchers. Of those vouchers 12 got paid, but three of them did not. Many repeated attempts to process these for payment over the last three years has resulted in rejection after rejection with no resolution available from HUD Voucher Processing or the TRACS Help Desk. Our auditors have strongly encouraged us to consider this revenue as lost and to write it off.

**MOTION:** Upon motion made by R. Thornhill, duly seconded by B. Adams, the following resolution, unanimously carried.

**RESOLUTION:** *BE IT RESOLVED*, that the Board of Directors, Southside Community Services Board, in regular meeting assembled, votes to authorize the Executive Director to write-off the unrealized revenue in the amount of \$3417.

**Item C: October Board Meeting Reschedule** – Since the Executive Director will be unable to attend the Board Meeting schedule for October 22, 2019, the Board was asked if the meeting date could be changed to October 29, 2019. In general consensus the Board agreed to the change of date.

**Item D: Non-Smoking Campaign** – After consulting with a number of CSBs regarding their non-smoking policies, the idea was brought to the Board to consider instituting an agency-wide non-smoking policy at SSCSB, which would restrict staff being allowed to smoke on agency property. A few CSBs have instituted this type of policy, with others showing interest in doing the same. Should SSCSB pursue this it would require a comprehensive long-term roll-out program where we would offer education, cessation classes, etc. incrementally phasing it in before putting any final restrictions in place. The health of our employees is of major concern and one that the agency takes seriously. After some discussion the Board requested that additional research be done as to what impact taking this action might have; that an investigation be made into what programs and assistance might be available through our health insurance provider; and that a complete implementation program be developed and brought to the Board for their review.

**Item E: JBS (DBHDS) Needs Assessment** – JBS is a consulting firm contracted by DBHDS to travel to each CSB and assess their Behavioral Health needs and then report their findings to the Department. Their process involve interviewing our program directors, managers, supervisors, line staff, and clients in all areas of service provision from Prevention to Peer Support and everything in between. We have little information regarding what they are looking for or what they will be asking. They have rescheduled with us a number of times, but it now looks like they will be here on October 10<sup>th</sup> and 11<sup>th</sup>. Representing the Board for their assessment, Ms. Clark, the Board Chair, has been scheduled to meet with them on the first day.

## **VIII. EXECUTIVE DIRECTOR'S REPORT**

### **State and DBHDS Updates**

#### **STATE HOSPITALS**

- Hospital Census - The average census for all state hospitals (excluding CCCA and maximum security at CSH) for the week of August 26, 2019 was 92%. PGH utilized 100% or more of its bed capacity at 103.3%, and five other state hospitals were above 95% by the end of the week.
- Geriatric Admissions - Despite best efforts, Piedmont Geriatric Hospital served patients at capacity last week and delayed one admission due to the lack of available geriatric beds systemwide. This continues to be a top priority for DBHDS as senior leaders consider options to provide relief. Geriatric admissions to PGH continue to be delayed with 4 last week and one currently due to the census pressures. DBHDS Facility Services shared a message of collaboration with CSBs prior to the Labor Day weekend to ensure all partners were aware of the state hospital status.
- Additional Beds at Catawba Hospital - DBHDS plans to add 28 beds to Catawba Hospital in FY 2020 and an additional 28 beds (for 56 beds total) in FY 2021 to help manage the state hospital census emergency. Even with the addition of these 56 beds at Catawba, state hospitals would continue to operate close to or over capacity. Importantly, these beds are considered temporary and would be in place until long-range efforts to slow the state hospital census growth are deployed, including continuing community investments, strategies to reduce TDO admissions to state hospitals discussed in the SB 1488 workgroup, and the anticipated completion of the Western State Hospital expansion at the end of FY 2021. Adding more state beds is not the preferred direction of Virginia's behavioral health system; however, it is clear the state hospitals need immediate capacity to manage the increasing census trends. Positive outcomes for people with serious mental illness are better achieved through a robust community services system that helps people maintain wellness and avoid restrictive, expensive inpatient interventions.
- Alternative Transportation Update - The Alternative Transportation staff will be traveling to North Carolina this week to visit the G4S central dispatch system in use there. This statewide, centralized driver dispatch will be the model for the system that will be used to implement alternative transportation operations in Virginia. The last of the three Alternative Transportation stakeholder groups for Region 3 were held in Abingdon on Thursday, Sept 5., with over 80 participants registered to attend the event. Region 3 is the first region in the statewide roll out of alternative transportation services.
- Millennium Electronic Health Record (EHR) - The Millennium Project Team has been working closely with all DBHDS hospitals and centers to develop and implement the EHR. The latest includes ordering of equipment that will be used for training and staff access. In addition, collaborative workshops continue on all aspects of system development. Next month, three hospitals will have Clinical Process Reviews designed to provide an exhaustive overview of clinical workflows, determine areas for additional discussion, and identify support needs for rollout in 2020. In addition, required equipment has begun to arrive and will be received by hospitals in the coming weeks.
- Pre-discharge Medicaid Access - DBHDS established a partnership with DMAS to pilot pre-discharge access to Medicaid for individuals leaving state hospitals. DMAS and Cover Virginia are implementing this initiative with Central State Hospital using Cover Virginia's

specialized processing unit that currently processes pre-release Medicaid applications for individuals in correctional settings. The pilot is expected to result in seamless access to Medicaid so that individuals have immediate health coverage for community-based treatment and supports that promote stability and recovery and, thereby, reduce re-hospitalization.

## **BEHAVIORAL HEALTH COMMUNITY SERVICES**

- Same-day Access and Outpatient Services - Same-day access has been initiated in all CSBs, and is fully implemented at 23 CSBs. As expected, this is increasing demand for outpatient services across CSBs. DBHDS has distributed the first round of funding for outpatient services, primarily being used to increase clinical capacity for youth and adult services at each CSB. Additionally, CSBs have worked together to develop regional training plans to enhance trauma-informed and evidence based services across the Commonwealth. Between outpatient services and regional training, CSBs will increase clinical capacity by two FTEs and receive regionally-determined training in evidence based practices for child and family services, mental health, and substance use.
- Regional Data Sharing on the Opioid Epidemic - The greater Roanoke region area is the second in Virginia to adopt software to share data pertaining to the addiction epidemic. Expansion of the data platform into the Roanoke area will cost \$1.6 million, which comes from part of an \$8.7 million federal grant to the state, administered through DBHDS. Qlarion Inc., a Reston-based data firm, will work closely with the Roanoke Valley Collective Response coalition to incorporate data submitted by its members into the system. The platform combines data from local agencies, such as police departments, courts and hospitals, into one clearinghouse. Localities can use that data to identify trends in drug uses and overdoses.
- Permanent Supportive Housing - At the end of FY 2019, 746 individuals with serious mental illness were living in PSH, including 135 who moved to PSH directly from a state hospital. DBHDS is establishing new permanent supportive housing (PSH) programs across the state in partnership with Rappahannock Area CSB; Chesapeake Integrated Behavioral Health; and a regional partnership with Southside, Piedmont, and Danville-Pittsylvania CSBs. New state PSH funds for adults with serious mental illness, increased capacity in the Auxiliary Grant in Supportive Housing, and additional federal housing choice vouchers are all being used to support this expansion. DBHDS, in partnership with VOCAL, is providing a series of regional trainings on Wellness Recovery Action Planning (WRAP) and housing. The trainings promote the voice of the individual in choosing and maintaining housing of their own. In addition, nearly 200 service providers are expected to participate in a series of trainings through September on the evidence-based practice standards for permanent supportive housing and building provider capacity in PSH. Trainings are being held in partnership with the Virginia Housing Alliance with national experts from CSH (Corporation for Supportive Housing).

- Peer Recovery Support Training - Total peer recovery specialist trained as of August 2019 is 1642. Total number of trainers statewide is 76, and total number of supervisor trained is 443.
- Barrier Crime Workgroups - Two workgroups to address barrier crimes are underway. DBHDS is leading a workgroup to develop a standardized screening tool and common screening charges across Virginia. This will help alleviate some concern of risk in evaluating applicants for risk of recidivism. DBHDS is leading a cross agency/stakeholder workgroup to discuss the impact of the barrier crimes Code on the behavioral health workforce, and brainstorm potential options to mitigate the impact.
- Military and Veterans Affairs – DBHDS, Department of Veterans Services (DVS), National Guard, Veterans Health Administration (VHA) and local Community Services Board (CSB) partners (including Valley CSB, Fairfax County CSB, New River Valley Community Services, Richmond Behavioral Health Authority, and Western Tidewater CSB) hosted six Military Culture and Suicide Prevention Summits from May 31st to August 16th. Over 500 community services, providers were trained in Military Cultural Competency, Lethal Means Safety Planning for Suicide Prevention, and Resources for Military and Veteran families. The statewide summits were an outreach and education initiative of the Governor’s Challenge to Prevent Suicide among Military Service Members, Veterans, and Families.

#### **DEVELOPMENTAL DISABILITY (DD) SERVICES**

- Public Private Education Act (PPEA) for Central Virginia Training Center (CVTC) - The proposed PPEA with Horizon Opportunities, Inc. for partial use of CVTC was determined to be not financially sustainable and therefore not a viable option into the future. There are currently 40 individuals remaining at CVTC. CVTC continues to move forward with community integration efforts for the remaining individuals in advance of the training center’s closure by June 30, 2020.
- Community DD Housing - In FY 2019, DBHDS assisted 138 individuals in the DOJ Settlement Agreement population with moving into independent housing. A total of 956 individuals with developmental disabilities are now living in their own home, exceeding the FY 2019 target by 20%.
- DOJ Settlement Agreement - The Independent Reviewer sent draft study proposals, and study kick-off calls were completed for seven study areas: Licensing and Human Rights Investigations, Mortality Review, Transportation, Regional Support Teams, Provider Training, Integrated Day and Supported Employment, and the Individual Service Review. The Independent Reviewer and his expert consultants will be completing on site visits to individuals in Northern, Eastern, and Southwestern Regions in September.
- Waiver Operations - All CSBs have received training on the use of the Individual Planning Calendar and DBHDS staff are offering it as needed to new support coordinators or those who need a little more assistance. DBHDS met with DMAS regarding some final edits to the DD waiver proposed permanent regulations. FY 2020 DD waiver slots have been

assigned at 23 CSBs. Next steps are to ensure that all FY 2020 Waiver slot assignments are completed by the end of September.

- Waiver Rates - A second meeting was held with Burns & Associates and a group of CSB and private providers regarding DBHDS' plans for a DD waivers' rates refresh/rebase. This was followed up with a meeting of DBHDS, DMAS and Burns & Associates to discuss possibilities for rates associated with quality or outcomes expectations. Next steps are to determine the best course of action regarding DD waiver rates: refresh or rebase, and to award the SIS® contractor RFP as soon as possible.
- Individual Family Support Program (IFSP) - Last month, IFSP sent notifications to all individuals on the DD waiting list (approximately 4,200 people) detailing eligibility for IFSP grant funds and case management and provided information on how to access community resources.
- Durable Medical Equipment (DME) - The Mobile Rehab Engineer (MRE) Team provided the following rehab engineering services for durable medical equipment (DME) to individuals in the community (not including services provided to Hiram Davis Medical Center or Central Virginia Training Center (CVTC)) during the 4th Quarter of FY 2019: 1,933 repairs to 1,346 pieces of equipment and made six custom adaptations - 81% of the repairs completed reduced the risk of bodily injury, 18% reduced the risk of infection transmission, and 2% were minor adjustments needed for comfort and ease of use.
- Statewide Regional Community Nursing - DBHDS will be hosting the 2nd Statewide Regional Community Nursing meeting October 22, 2019, in Radford.
- Fall Prevention Training - DBHDS provided an online fall prevention training for DBHDS licensed providers who report a fall with serious injury to complete. The providers who follow through and access this training will be tracked as a part of the Key Performance Indicators objectives.

#### **LICENSING AND HUMAN RIGHTS**

- Licensing Incident Management - In August, DBHDS Licensing initiated a pilot of the Incident Management Unit in Region 4. During their initial two weeks of the pilot, they triaged a total of 157 incidents, which included 17 individuals that had prior, similar incidents. There will be ongoing efforts to evaluate the incident management pilot, with a plan to begin expanding to other parts of the state after September 30, 2019.
- Computerized Human Rights Information System (CHRIS) - The new CHRIS reporting interface also went live on August 5, 2019.

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#### **COUNTY**

There is nothing new to report on county and CSB relationships other than to report that the executive director was asked to be a member of the board of directors for the Chamber of Commerce for Clarksville and to chair the advisory board for Lake Country Area on Aging. Both have been accepted and I will become active in both in December.

## **AGENCY**

### **Behavioral Health**

- **STEP VA**
  - We were able to implement Same Day Access in Halifax. They started providing this service August 5th and been consistent with the service since that time.
  - Mobile crisis is in the planning stage. We are working with the greater region 3 to develop a regional response as well as a CSB plan for providing the services. They will start with the child population. This has required us to look at our ES department as a whole and review the organization of the department, the location of services and how we might need to make some changes to this for future services.
  - We continue to work on outpatient development with continued training, development of processes and consistent evaluation of the quality of the changes via STEP VA.
- Behavioral health therapists in adults are all up and operating, we currently have one opening in our adult therapists in Mecklenburg to provide substance use treatment. We have hired a child therapist in Brunswick, so at this time we have one opening for a child therapist in Halifax.
- Emergency services has hired all the day time positions. We currently have one open position in Halifax for our full time after hours' services. This is being filled with part time staff and at this time is being well managed.

**Opioid Grant Funding and MAT Services:** As you know we have had some difficulty getting these services up and running due to having difficulty obtaining providers. We have hired our Nurse Practitioner and she started her position in September. She will be obtaining her waiver to provide MAT and will be able to assist with the delivery of services. We also have options with telemedicine to begin services initially.

In another area we began discussions with CMH-VCU to determine if that would be an option with them as well. They have three providers who have the waiver and have expressed some interest in working with us. We will have to see where that goes.

We have recently applied for another grant that will provide us with funds to bring MAT, peer services and case management to the regional jails. We met with Meherrin River Regional Jail to begin discussions on how to move this forward.

**CIT Training:** We provided a second CIT training to local law enforcement and graduated 17 individuals from the program. We will be providing a third training in October and are working on training 100% of law enforcement, clinicians, first responders, and dispatchers in our area.

### **Community Services – Developmental Disabilities**

- **Waiver Management System (WaMS) update:** While the CSB's had been promised that this system would be fully functional, this has not truly happened. Our staff has been creative and has developed a system that eliminates the need to do dual documentation.

- **Day Support and Community Engagement:** We continue to try to build our day support programs and build on community engagement. This has improved in all locations. We currently struggle with having enough vehicles. We are currently looking at how to reduce the number of large vehicles (or repurpose them) and purchase smaller vehicles.

We have looked at the idea of developing a horticulture program for the day support programs and are investigating grants, fundraising and donations to see how to get this started.

**Property Sales:** Rainbow house has closed and we have had some interest on the old CSP building. This individual is looking at how to get the property rezoned. If we do not get more interest we will be looking to our real estate agent as to next steps.

We have not located any property in Broadnax at this time that would suit the project of a new CSP program. We will be discussing this with our real estate agent to determine how to broaden our search.

**Telequality Appeal:** There has been no new news on this. I will be moving the responsibility for this to Allen Roberts our new IT manager. He and I will be working with Telequality to keep this in our focus.

**Quality and Compliance:** Nicole Lewis started in her position on September 16. We have moved Teresa Park to her new supervisor Sharon Gavitt and she will be working with Sharon on developing a more robust training system for the at orientation and throughout the year.

New Grants and Programs:

**Permanent Supportive Housing:** We applied for and received regional funding for this program. We are the only region in the state that is doing this as a region.

**Data Reporting:** In working with Tammy Hudson, Data Manager, on the data to report to the board, she determined that the previous data submitted to the board contained information that was not accurate. We have decided to rely on the data that is submitted to DBHDS and other state reporting bodies to keep our data reports consistent. This may show a significant difference in our numbers of unduplicated individuals as we are not counting individuals that did not receive services with us. We will continue to work on this data reporting to create a report that is accurate and meaningful to the board.

**Other Executive Director activities:**

- Regional Mobile Crisis Meetings
- Supervision of regional manager
- Salary Scale review
- Site visits for Halifax Behavioral Health, John H Northington Center
- Participated in National Night Out
- Review of SOR Grant for Opiate use
- Fiscal Audit Completed
- Spoke at Deacon's Convention in South Hill

- Review of how to reinstate Medicaid while incarcerated

NOTE: B. Adams departed the Board Meeting at 1:30 PM.

**X. CLOSED SESSION**

In accordance with posted agenda item a motion was made that the meeting enter into closed session for the purpose of reviewing and discussing a personnel matter in compliance with Code of Virginia §22-3711 (A)(1) Motion was seconded and passed by unanimous vote. Board entered closed session at 1:59 PM.

Meeting returned to regular session at 2:39 PM. The Chair polled the Board, with each Board Member certifying, by individual affirmative vote, that to the best of each Board Member's knowledge, only those matters lawfully exempted from open meeting requirements, and only such public business matters as were identified in the motion by which the closed session was convened were heard, discussed, or considered while in closed session.

**XI. ADJOURNMENT**

The next Board of Directors meeting is scheduled for Tuesday, October 29, 2019 (as rescheduled during this Board Meeting). There being no further business to come before the Board, the meeting was adjourned at 2:40 PM.

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**SUBMITTED FOR APPROVAL BY**

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**H. I. Deslauriers, Clerk**  
**SSCSB Board of Directors**

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**Date of Approval**