

**BOARD OF DIRECTORS MEETING MINUTES
February 2, 2021**

This meeting of the Richmond Behavioral Health Authority (RBHA) Board was held through electronic communication means due to the current State of Emergency and due to safety concerns stemming from the coronavirus pandemic. Board members, staff, and the general public were able to participate by teleconference/videoconference via Zoom.

RBHA Board members present were: Dr. Joy Bressler; Scott Cannady; Irvin Dallas, **Vice Chair**; Colleen Howarth; Dr. Cynthia Newbille; Melodie Patterson; Eduardo Vidal; Denise Dickerson, **Secretary/Treasurer**; Dr. Cheryl Ivey Green, **Chair**; Karah Gunther and Dr. Andrew Ramsey.

RBHA Board members absent: Sabrina Gross; Chelsea Higgs-Wise and Malesia "Nikki" Taylor.

Staff present: Dr. John Lindstrom, **CEO**; Amy Erb; Bill Fellows; Susan Hoover; Dr. Jim May; Shenée McCray; Carolyn Seaman; Michael Tutt; Cristi Zedd and Meleese Evans.

RBHA's Legal Counsel: Jon Joseph of Christian & Barton, LLP.

Guests: None.

Proceedings:

- The meeting was called to order at 3:02 p.m. by Dr. Cheryl Ivey Green.
- The Board meeting minutes for January 5, 2021 were approved with a motion by Dr. Cynthia Newbille and seconded by Denise Dickerson. The minutes were unanimously approved, with the abstention of Dr. Joy Bressler and Colleen Howarth who were not present at that meeting.
- **Public Comment:** None.

Wayne Hamilton Blanks Service in Recovery Award Recognition –

- Richard Schellenberg was recognized as the Community Member receiving the Wayne Hamilton Blanks Service in Recovery Award.
- Michael Branch was recognized as the RBHA employee receiving the Wayne Hamilton Blanks Service in Recovery Award.

Board Chair Report- Dr. Cheryl Ivey Green

- Dr. Green thanked and encouraged Dr. Lindstrom, the Leadership Team and all the staff who continue to keep the Authority going and continue to ensure services are moving forward while maintaining a safe environment.
- Dr. Green asked board members to be sure they are advocating and reminded them to make calls to legislators on the VACSB Advocacy Phone Blitz Day this Thursday.
- Dr. Green asked Scott Cannady to forward any legislation to Meleese Evans to send to the Board.
- Dr. Green will meet with Dr. Lindstrom to ensure committee members are assigned appropriately and encouraged board members to peruse the list of board committees.

Chief Executive Officer's Report- Dr. John Lindstrom

- The CEO Report was discussed and is included in today's board meeting packet and with today's meeting minutes.
- Dr. Lindstrom encouraged board members to call or email him anytime they have questions or concerns.

RBH Foundation Report – Carolyn Seaman

- The Foundation Development Report was discussed and is included in today's board meeting packet and with today's meeting minutes.
- Year End Appeal Results with new branding shows a 33% increase in monetary donations, a 947% increase in tangible item donations, 44 new Facebook followers and our Instagram followers have doubled.

Committee Reports:

Access & Service Delivery Committee - Scott Cannady

- The Access & Service Delivery Committee has not met since the last board meeting.

Advocacy & Community Education Committee

- The Advocacy and Community Education Committee has not met since the last board meeting.

Executive Committee – Dr. Cheryl Ivey Green

- The Executive Committee has not met since the last board meeting.

Finance Committee – Denise Dickerson

- Total cash in the bank at December 31st was \$21.9 million, and RBHA's share of that cash is \$5.3 million.
- RBHA's current operating reserve ratio is at 0.87 or just under 2 months of expenses.
- Gross Accounts Receivables for December was 10.8 million and 6.2 after allowances for bad debt.
- The note payable balance at December 31st is \$3 million and has been recorded in the liabilities section of the Balance Sheet.

Human Resources Committee – Irvin Dallas

- The Human Resources Committee has not met since the last board meeting.

Nominating & By-Laws Committee – Dr. Joy Bressler

- The Nominating and By-Laws Committee has not met since the last board meeting.

Presentation: Multi-Systemic Therapy (MST) was presented by Paulette Skapars, LCSW, Director of Children's Mental Health Services and Jewel Kindred, LCSW, Clinical Supervisor in Children's Mental Health Services. The presentation is included with today's meeting minutes.

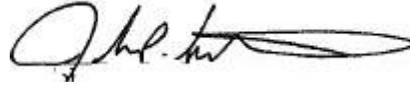
The meeting adjourned at 4:43 p.m. with a motion by Dr. Cynthia Newbille and seconded by Denise Dickerson.

The next Board of Director's meeting will take place on **Tuesday, March 2, 2021 at 3:00 p.m. by teleconference/videoconference via Zoom.**

Respectfully Submitted:



Dr. Cheryl Ivey Green
RBHA Board Chair



Dr. John P. Lindstrom
Chief Executive Officer

Richmond Behavioral Health Authority
Board of Directors
Chief Executive Officer's Report
February 2, 2021

As there are few if any significant developments to report since the January meeting of the RBHA Board of Directors, the February report will primarily focus on challenges and opportunities looking forward. Yes, services continue to operate under the protocols modified or adapted months ago. We still must manage staffing challenges, periodic service curtailment due to COVID-19 positivity and contact tracing, and be responsive to changes afoot resulting from federal, state, and local developments. As of last week, 154 of those we serve have tested positive for COVID-19, as have 52 RBHA employees. We continue to admit individuals to services at a high rate. All work planned/contracted on North Campus facilities has been completed. A ribbon-cutting event officially opening the restored Children's Services Center and Walking Trail is scheduled for March 11. Details to follow.

FY'20 Annual Report

Final edits are in process. We are only a few weeks behind our typical schedule. Expect the FY 20 Annual Report published within the next week. It will be a bit shorter in length and sharply focused on accomplishments, contextualized with some of the powerful language describing what it takes to achieve our mission.

STEP-VA and Marcus Alert Planning

Over the next few months, our region and respective Boards within will learn of funds available in FY 21 to support STEP-VA expansion. The most significant funding will be to expand adult mobile crisis services. The allocation will be regionally and RBHA will be the operating entity, building upon the CReST (children and youth) and REACH (individuals with developmental disabilities) already in operation. A major goal is to integrate these services and establish a regional response hub and call center.

The first statewide stakeholders meeting in support of developing the Marcus Alert occurred last week. As you will recall, the Marcus Alert legislation focuses on improvements to law enforcement response to encounters involving individuals with behavioral health issues. A framework is to be developed and approved by June 1 of this year, with implementation in 5 initial sites (distributed by region) by December 1. The City of Richmond will be one of the 5 initial jurisdictions.

On a related note, RBHA will gear up to coordinate and provide live Crisis Intervention Team training for local law enforcement with the first class to occur in March. The Richmond Police Department, VCU Police, and Richmond Sheriff's Office have all reached out, seeking to restart live classes.

FY 22 Budget Development

Each year it seems that the process of developing our budget proposal becomes more complicated and this year is perhaps the most complex of all. Issues to be addressed include revenue history, continuing impact of COVID-19, and service redesign associated with DMAS's Behavioral Health Enhancement initiative. The budget development process will begin in earnest later this month with analysis of staffing costs, operating expenses, and FY 21 financial data. Two RBHA workgroups will help inform the process: Revenue Cycle Management and a new group focusing on necessary changes and new opportunities under Behavioral Health Enhancement. Other factors to be considered include the status of RBHA's ongoing funding from the City of Richmond (3.428 million) and a supplemental request for 355,000 in support of a Law Enforcement-Behavioral Health co-response model.

Continuing Infrastructure Needs

With the expansion of **Outpatient and Medical Services** (primary care screening, primary care, and office based opioid treatment or OBOT), we began the process of planning for the eventual repurposing of space in our 107 S. Fifth Street location. We undertook the development of design and construction drawings prior to the pandemic. The project was subsequently posted for bids. Proposals were received and evaluated, but due to financial uncertainties and the pandemic, the process was put on hold. An executive summary reflecting this history and need is attached. We are in the process of developing a strategy to fund the project and will submit for board action once completed.

We have begun the process of evaluating our **Electronic Health Record** (Profiler) as to functionality and support. Growing data and reporting demands over the years, a promised but yet to be delivered primary care module, and waning support have led us to this point. Representatives of Administration, including Information Technology, services, and finance will work with one of our contractors, NTS, to develop recommendations.

Respectfully submitted,



John P. Lindstrom, Ph.D., LCP
Chief Executive Officer

Executive Summary
Renovation of First Floor at 5th Street Location
February 2, 2021

Statement of Need

The Board was informed in the February 2020 board meeting that the RBHA Executive Leadership Team identified the need for increased office space for outpatient and medical services on the first floor due to the following:

- increased demand for OBOT services,
- increased number of individuals being admitted to RBHA as a result of Rapid Access, Medicaid expansion, and Behavioral Health Enhancement
- need to integrate psychiatry and primary care services and
- expansion of primary care services as requirement of the CCBHC grant.

Project Description

The plan calls for repurposing unused space in Medical Records and reconfiguring existing offices/cubicles on the first floor to create 11 new offices, 3 exam rooms, an expanded nursing station, an extra bathroom, increased waiting area for Rapid Access and the RICH/Medical services area, meeting rooms and an extra pickup window for the pharmacy.

Project Time Line

- MEP drawings were completed in April/May 2020.
- The IFB for construction services was posted in September 2020 closed on October 6, 2020.
- Due Diligence completed and top 3 companies vetted in October
- Top three companies sent a letter informing them that notification of evaluation and approval will exceed 90-day acceptance period in December 2020.
- Company with lowest bid rescinded their bid in January 2021.
- Next lowest bid to be presented to RBHA Board of Directors on February 2, 2021
- Upon approval from the Board, contract will be awarded within 10 to 15 business days
- Contract specified that project must be completed in 6 months.

Lowest bid

- \$ 484,400.00

Project Funding

- CCBHC grant
- RBHA.....

**RBHA Board Meeting
Development Report – February 2, 2021**

Richmond Behavioral Health Foundation

YTD Income (minus grants) to RBHF: \$7524.67 (as of December 31, 2020)

YTD grants awarded: \$51,320 (as of December 31, 2020)

YTD gifts-in-kind: \$57,816.40 (as of December 31, 2020)

YTD Total Revenue: \$116,639.23

	Current Year (FY21)	Previous Year (FY20)	Two Years Ago (FY19)
	Total Grants/Requests Submitted in FY21 (July 1, 2020 – June 30, 2021)	Total Grants/Requests Submitted in FY20 (July 1, 2019 – June 30, 2020)	Total Grants/Requests Submitted in FY19 (July 1, 2018 – June 30, 2019)
Number of Submitted Grants/Requests	5 Total: \$106,320	2 carryover from FY19 (\$40,000) 10 (TOTAL: \$151,000)	9 \$418,500 and up to \$500,000 (TOTAL: \$918,500)
Number of Funded Grants/Requests	3	7	5
Dollar Value of Awarded Grants/Requests	\$51,320	\$142,000	\$59,795
Number of Pending Grants/Requests	0	0	2
Dollar Value of Pending Grants/Requests	\$0	0	\$40,000
Number of Denied Grants/Requests/Postponed	2	2 - denied 3 – cancelled (COVID)	3
Dollar Value of Denied or Partially Funded Grants/Requests	\$55,000	\$59,000	\$821,500.00
Gifts in Kind Monetary Value	\$57, 816.40	\$57,671.25	\$9,342.00
Volunteer Hours	1362	863	200

RBHA Board Meeting Development Report – February 2, 2021

Update on Grants and Gifts: See attached chart

Communications:

- Moving close to roll out of all brand components with employees and beginning transition to incorporating Brand Identity – internally and externally
- Next Steps:
 - Brand Standards Manual to be completed
 - Print Collateral Strategic Plan to be finalized
 - Begin transition of internal documents and external facing communications
- Developing a Communications Plan
- Developing a Social Media Plan
- Beginning work on Employee Recruitment Plan

- Branding Roll Out to Staff took place October 29th via Zoom Webinar

Key Metrics:

- 414 Employees registered for the webinar; 352 attended
- Direct feedback was received from 151 attendees, over 40% of all attendees
- Despite the challenging COVID backdrop, 89% of feedback was extremely positive
- Only 2% of attendees provided negative constructive feedback
- 59 Employees volunteered to participate in upcoming aspects of the re-branding process (i.e., marketing, event planning, etc.)
- Logo Presentation to RBHA Board for vote to adopt – September 1, 2020 – ADOPTED
- RBH Brochure and RBHF Insert is complete

Volunteer Appeals/Events:

- RBHF Board is actively pursuing additional Board Members
- Initial Planning for a North Campus – CSC and Walking Trail – Ribbon Cutting Event
- Exploring additional DIY Volunteer Project Kits to initiate:
 - Indoor Activity Kits – for children & adults
 - Outdoor Activity Kits – for children (for spring)
- DIY Volunteer Project Outcomes:
 - Volunteer Service Hours:
 - Painted Rocks for NC Walking Trail: 58
 - Nourishment Kits: 449
 - Hygiene Kits: 252
 - Cold Weather Item Kits: 1266
- DIY Volunteer Project Impact:
 - Items have been distributed to 17 RBHA programs for distribution to individuals and families in need
- Planning several Volunteer Appeals in partnership with Hands On Greater Richmond - primary goal is to connect with individuals in the community and establish new relationships
 - Painted Rocks – North Campus Walking Trail
 - Hygiene Kits – Marshall Center, MRTC, PACT, Homeless Services
 - Nourishment Kits – Homeless Services

**RBHA Board Meeting
Development Report – February 2, 2021**

- Cold Weather Kits – to grow our Giving Tuesday Cold Weather Item Collection
- Walking Trail – North Campus – November 2020 – Work to begin this week – tentatively scheduling 2 small volunteer opportunities around the installation of the walking trail

Appeals:

- Year End Appeal Results with new branding:
 - 33% increase in monetary donations
 - 947% increase in tangible donations
 - 44 new page followers on Facebook
 - Doubled our followers on Instagram
- Annual Appeal Campaign begins this week
 - Mailing
 - Email
 - Social Media Campaign
- Annual Appeal to begin in late October – first wide distribution of the new RBH brochure
- Planning a campaign for the Children’s Services Center at North Campus – Outdoor Needs – primary goal is to involve/reach community members and increase community awareness of RBHA – Spring 2021
- GIVING TUESDAY – December 1, 2020 – plans underway for securing cold weather clothing items
- United Way Employee Campaign – November 16, 2020



Multi-Systemic Therapy

A Children's Mental Health Evidence Based Program

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Multi-Systemic Therapy (MST) The Basics

- ▶ **The Mental Health Division's 2nd Longest Operating Evidence Based Program (EBP), Beginning in 2002!**
- ▶ **Target Population:** Youth Ages 11 to 17 ½, Involved in the Juvenile Justice System
- ▶ **Time-Limited:** Duration in Services - 4 Months
- ▶ **Intensive Treatment:** 3 to 5+ Therapeutic Contacts Per Week
- ▶ **Community-Based:** Services Delivered In Homes, Schools, Juvenile Courts & PO's Offices, Anywhere in the Youth & Family's Larger Environment
- ▶ **Continuum of Care:** Individual & Family Counseling, 24-Hour Crisis Support, and Clinical Case Management
- ▶ **Funding:** AMI Kids, Serving as Department of Juvenile Justice's MCO

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Multi-Systemic Therapy (MST) The Goals

-  Reduce Recidivism & Eliminate Behaviors Leading to Arrests
-  Reduce Out of Home Placements & Keep Families Together
-  Increase Youth's Participation in Pro-Social Activities 
-  Engage Parents & Empower Them with Skills & Resources
-  Increase School Participation & Youth's Vocational Interests 

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Multi-Systemic Therapy (MST) The Youth Assessment & Screening Instrument

YASI: The Wheel



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Multi-Systemic Therapy (MST)

The Model

- ▶ Empirically Validated Approaches
 - *Cognitive-Behavioral Individual Therapy
 - *Contingency-Management Interventions
 - *Experiential Family Therapy
 - *Structural Family Therapy
 - *Genograms & Family Systems Therapy
- ▶ Licensed by Evidence-Based Services (EBS)
 - *MST Assessment is conducted to "Find the fit".
 - *Overarching & Intermediary Goals are established in MST Treatment Plan, and reviewed on weekly Case Summaries .
 - *"Drivers" to negative behaviors and barriers to progress are identified & targeted for change.

ALL MST STRATEGIES ARE EVIDENCE-BASED OR EVIDENCE-INFORMED!
 A detailed "Program Implementation Review" (PIR) is provided twice per year.

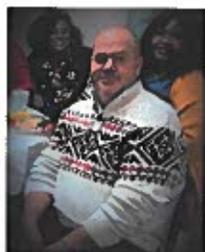
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Multi-Systemic Therapy (MST)

The Team



Kokeese
Watkins-Meeks



Matt Moore, LCSW



Sammy Jackson



Tiffany George

All MST Therapists ...

- > Are Master's Trained
- > Must Pass Rigorous Week-Long Initial MST Training
- > Participate in Weekly Supervision & Consultation, and Quarterly "Booster" Sessions with the MST Consultant
- > Are Rated by the Families Every Other Month on their *Fidelity to the Model* (Tool Used: Therapist Adherence Measure/TAM-R)

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Multi-Systemic Therapy (MST)

The Outcomes

FY2020 Data:

- ▶ Families Served = 59
- ▶ Average Length of Stay in Treatment = 107 Days/ 3 ½ Months
- ▶ Therapist Adherence Measure Score Average = 92%
- ▶ Successful Completion = 85%
- ▶ Discharge:Lack of Engagement = 5%
- ▶ Discharge:Placement (Detained or In More Restrictive Setting) = 8%
- ▶ Discharge:Administrative Reason/Moved = 2%

Ultimate & Instrumental Outcomes:

- ▶ Youth Continuing to Live at Home = 86%
- ▶ Youth Engaged in School and/or Work = 87%
- ▶ Youth With No New Arrests = 78%
- ▶ Improved Family Relations = 93%
- ▶ Improved Support Network = 93%
- ▶ Equipped with Parenting Skills to Handle Future Problems = 86%
- ▶ Improved Prosocial Activities & Peers = 86%
- ▶ Sustained Change = 86%
- ▶ Educational/Vocational Success = 79%

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Multi-Systemic Therapy (MST)

The Case of "Marquel"

BACKGROUND:

- ▶ Age: 12 Years, 2 Months/Looks Stated Age
- ▶ YASI Risk Level: Moderate/Moderate High
- ▶ Living Situation: In Home With Mother, 1 Younger Brother & 2 Older Sisters
- ▶ Academics: 6th Grader/Middle School Classes; Has IEP (ADHD, Labeled "Slow Learner")
- ▶ Charges: Grand Larceny (Auto), Destruction of Property, Unlawful Entry, Violation of Court Order (for Marijuana Positive Screen & School Suspension), Past Detention Stay of 3 Days
- ▶ Trauma History: Sexual Abuse (He & Brother), Father Erratic, Mother Struggles with Her Own MH & SUD Problems, Witnessed DV within Home & Violence in Community, Prior CPS Involvement
- ▶ Strengths: Enjoys School, Likes to Build Things/Wants to Work in Construction, Polite, Responds Well to Structure

MST GOALS:

- ▶ Legal: Successful Release from Probation
- ▶ Attitude: Comply with Household & PO Rules and Actively Participate in Services
- ▶ Aggression: Develop Healthy Ways to Cope with Anger
- ▶ *Skills: Develop Healthy Coping Skills to Problem-Solve in a Positive Way
- ▶ *Family: Mom Develop Healthy Coping Skills to Deal with Stress, Conflict within Home, and Increase Parental Supervision
- ▶ Specific Targets for Intervention:
 - >Solution-Focused Individual Counseling to explore Marquel's beliefs about consequences and enhance his skills related to making better, more positive choices
 - >Parenting Education & Supports to assist Mom
 - >In-Person TDT to keep Marquel engaged in academia & pro-social activities with same-age peers

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Multi-Systemic Therapy (MST)
The Q&A?

