

BOARD OF DIRECTORS MEETING MINUTES
September 7, 2021

This RBHA Board of Directors Meeting was held as an electronic meeting pursuant to Ordinance No. 2021-181 (City Council for the City of Richmond, June 28, 2021) due to the disaster represented by the spread of COVID-19.

Board members and staff participated by teleconference/videoconference via Zoom. The general public was able to participate by teleconference/videoconference via Zoom.

RBHA Board members present: Dr. Joy Bressler; Scott Cannady; Irvin Dallas, Vice Chair; Dr. Cheryl Ivey Green, Chair; Karah Gunther; Shauntelle Hammonds; Melodie Patterson; Dr. Andrew Ramsey; **Malesia "Nikki" Taylor** and Eduardo Vidal.

RBHA Board members absent: Denise Dickerson, Secretary/Treasurer; Colleen Howarth; Dr. Brian Maiden; and Dr. Cynthia Newbille.

Staff present: Dr. John Lindstrom, CEO; Amy Erb; Bill Fellows; Susan Hoover; Dr. Jim May; Shenee McCray; Carolyn Seaman; Cristi Zedd and Meleese Evans, Executive Assistant.

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 July 6, 2021 were approved with a motion by Scott Cannady and seconded by Karah Gunther. The motion carried by the following Board member vote: (8:2), Melodie Patterson and Eduardo Vidal were not present during the vote.
- Public Comment: None.

Employee Recognitions

- Kristie Walthall, Administrative Assistant II with Adult Mental Health's Assertive Community Treatment team, was recognized as employee of the month.
- The Crisis Stabilization Unit in Adult Mental Health was recognized as team of the month.

Board Chair Report - Dr. Cheryl Ivey Green

- Dr. Green extended gratitude to all staff, on behalf of the full Board, for all the work they do; and, thanked the Board members who were able to make it out to the mural unveiling and Carolyn Seaman for leading the event.
- Dr. Green encouraged the Board to be advocates, as well as support the Foundation.
- Dr. Green encouraged all to attend the VACSB's virtual Public Policy Conference next month.

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.**

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.**
- Carolyn Seaman shared the Mural Video. The video will be used on-going with agency presentations, employee recruitment and employee onboarding.

Committee Reports:

Access & Service Delivery Committee – Malesia “Nikki” Taylor

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

Advocacy & Community Education Committee – Scott Cannady

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

Executive Committee – Dr. Cheryl Ivey Green

- The Executive Committee met and approved the development of a vaccine and mask mandate policy by management.
- The Executive Committee also approved proceeding with future Board and Committee meetings by electronic means based on the emergency status of the City of Richmond policies pertaining to the COVID pandemic.

Finance Committee Report – Bill Fellows, Chief Financial Officer -
on behalf of Denise Dickerson

- May’s cash was over a million dollars greater than April’s cash, and RBHA’s net income at that point was \$19.2 million. That contained funding in programs deferred in FY 22, so in June deferred \$9.1 million and cash at the end of June was up another million dollars from the end of May.
- Standing before audit adjustments, RBHA is showing \$9.1 million in net income at the end of FY 21.
- Collected more than expected in July. Collected \$2.8 million in cash and collected above budget in August as well.
- In general, RBHA’s financials are strong. Anticipate having May through August financials to present at the next Board meeting.
- The RBH Foundation line of credit will be discussed at October’s board meeting.

Human Resources Committee –Irvin Dallas

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

Nominating & By-Laws Committee – Dr. Joy Bressler

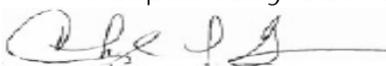
- The Nominating and By-Laws Committee has not met since the last board meeting.

Presentation: Homeless and Residential Services was presented by Katie Chlan, LCSW, Program Manager II, Adult Mental Health Residential Services and Special Projects. The presentation is included with today’s meeting minutes.

The meeting adjourned at 5:04 p.m. with a motion by Irving Dallas; seconded by Dr. Joy Bressler.

The next Board of Director’s meeting will take place on Tuesday, October 5, 2021 at 3:00 p.m.

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**
September 7, 2021

When the RBHA Board of Directors held its hybrid (mixed in-person and virtual) meeting on July 6, I sensed a renewed energy and optimism. The COVID-19 pandemic seemed to be going in the right direction, with low positivity rates and improving vaccination levels across the state. We submitted a FY 22 budget built on the expectation that we would be soon resuming more typical (pre-pandemic) operations, with more and more staff returning to the office and residential programs returning to full capacity in stepwise fashion. What a jolt to now be back in full mitigation mode. The rapid spread of the Delta variant snapped us back to the reality that this public health crisis is still with us. Uncertainty has become a persistent state. And, while optimism waffles from day to day, one constant has been the high level of determination and commitment demonstrated by agency staff and leadership. I wish to thank the RBHA Board of Directors for staying informed, remaining engaged, and providing the support necessary to adapt and perform under these most difficult conditions.

In the last few weeks, we have experience scattered COVID-19 positives across much of the agency. This includes the North Campus, REACH, and our Adult Residential Crisis Stabilization unit. Each case resulted in brief disruptions in admissions and rigorous testing. Amid year-end closing and audit activities, we experienced COVID-19 positives within the Finance department.

Fortunately, our service modifications and public health mitigation strategies remain in place and, with the trend toward various forms of vaccine mandates sweeping across federal, state, and **local governments, the RBHA Board's Executive Committee was**

briefed on August 12. The committee expressed support for a vaccine mandate at RBHA is determined necessary by me, in consultation with agency leadership. The Executive Committee also supported return to full virtual board meetings until the end of the calendar year.

The Executive Leadership Team researched and deliberated on the pros and cons of adopting a vaccine mandate, examining the substance of the state and City of Richmond mandate, as well as health systems including VCU. In the end, the ELT unanimously supported the recommendation to develop and implement a mandate. The adopted policy is attached, but in summary, all RBHA employees must be fully vaccinated or have an approved accommodation plan under provisions for medical or religious exemptions, by October 15. The HR department and staff from Planning, Research, Development and Evaluation worked together to push out a mandatory staff survey for reporting status and uploading proof of vaccination.

A staff vaccination mandate is a serious step and has not been undertaken lightly. As a health care agency, it is incumbent on us to take steps to meet standards of care and do what is necessary to make the workplace as safe as possible. Taking this step, according to all credible guidance, will reduce the chances of us spreading COVID-19 to our clients and each other. It will also reduce the risk of more serious illness among our staff when breakthrough infections occur.

Staff Vacancies

As reported in the media, almost all sectors of the economy are experiencing staffing challenges. The public behavioral health system in Virginia has not been immune and, in the context of the pandemic and our high number of high-touch, public facing services, RBHA has certainly felt the effects. This is further compounded by the number of new positions related to STEP VA expansion, Marcus Alert, and new funds awarded by DBHDS for

the development of a Crisis Receiving Center on the North Campus.

A recent survey conducted by VACSB revealed 18 percent average vacancies in FY 21, compared with 15 percent in FY 20. **The average turnover rate was 21 percent. RBHA's pattern was** similar, but at 24 percent total turnover in FY 21. High vacancy numbers shift the workload, making work more challenging overall. Time spent in recruiting and training at the program level has increased. The impact on HR staff is tremendous as the number of transactions related to on-boarding and off-boarding staff are, well to put it simply, off the charts. We are in the process of implementing a small refer a friend bonus for staff who refer successful candidates. We are also searching for the means to provide hiring and retention bonuses. To be clear, we are currently operating with the thinnest staffing in most areas. Always critical in residential and crisis services, this is now a real challenge in case management units. We can only increase caseload sizes so far. That limit has been reached, leaving over 300 individuals in need of case management services yet to be assigned.

Mural Unveiling

August 12 was a wonderful day, giving us an opportunity to pause and kickoff the 25th Anniversary celebration. We were honored to have the Mayor speak at the official unveiling of the spectacular mural adorning the Canal Street end of our main **office building. Hamilton Glass's interpretation of the themes of** inclusion, diversity, hope, and recovery offered by you, staff, and our branding team, in my view, was spot on. Carolyn Seaman, thank you for leading and orchestrating this effort. I thank all who participated including RBH (collective) board members, consumers, staff, the branding team, and all our supporters.

Service Expansion

Without going into too many details, we are in the midst of staffing up in some areas related to DBHDS targeted funds. These include:

Clinical positions for Co-Response and Community Care (Marcus Alert) – 5 positions

Mobile Crisis (Regional) – 12 to 13 positions

Veteran’s Navigator (Regional)

Clinical Trainer (Regional)

Regional Crisis Call Center

 Call Center Liaison

 Service Navigator

Peer Specialist & Training Academy (Regional)

Marcus Alert Coordinator (Regional)

Quality Reviews and Part C Audit

During the late spring and summer, the Developmental Services has undergone several important external reviews by DBHDS. RBHA continues to perform well across the board. Our Part C services meet or exceed expectations on all performance indicators. Case management quality reviews, with the focus largely on DOJ performance indicators, have gone exceedingly well. This is truly an amazing accomplishment, especially in the face of COVID restrictions and staff turnover. Of note, the entire case management staff on the Child DS team turned over in the last year.

VACSB

The October VACSB conference, originally planned as an in-person event at the Hotel Roanoke, will once again be virtual. Meleese has distributed registration information.

Attached you will find several VACSB documents which address advocacy, budget, and personnel vacancies. Please use this information in any opportunities you might have for advocacy this fall, going into the next legislative session.

Respectfully submitted,

A handwritten signature in black ink, appearing to read "John P. Lindstrom", with a long horizontal flourish extending to the right.

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

		Chapter:	
		Policy #:	
		Effective Date:	8/19/21
Policy Title:	Employee Mandatory COVID-19 Vaccination Policy	Revision Date:	
Department:	Human Resources	Page #:	1 of 2
Approval:	<i>John P. Lindstrom</i>		

Purpose:

Richmond Behavioral Health Authority is committed to the health and safety of our staff and clients. **Now more than ever, RBHA’s critical role is vital to** the health and well-being of the citizens of Richmond and the entire Commonwealth. There has already been a significant increase in demand for behavioral health services as a result of COVID-19 and significant consequences if a program suddenly closes or is forced to reduce services.

In accordance with RBHA’s duty to provide and maintain a workplace that is free of known hazards, RBHA has adopted a mandatory COVID-19 vaccination policy, which includes boosters, as support by CDC guidance, to safeguard the health of our staff and their families; our clients and visitors; and the community at large. This policy will comply with all applicable laws and is based on guidance from the Centers for Disease Control and Prevention and local health authorities, as applicable.

Additional Authority:

Federal, state, and local governing authorities may provide guidance regarding appropriate safety measures and those authorities are likely to follow Center for Disease Control (CDC) and World Health Organization (WHO) guidelines. Additional authority to adopt such policy has been provided by the RBHA Board of Directors.

Scope:

This policy applies to all employees, contracted employees and service providers, volunteers who work in service programs and other departments, interns and fellows as practicable, regardless of work location. Proof of vaccination is required as determined by Human Resources unless a reasonable accommodation is approved. Staff not in compliance with this policy will be suspended without pay pending termination.

Procedures

Staff are required to complete a new mandatory Red Cap COVID-19 Vaccine Status Survey AND upload proof of full Covid-19 vaccination regimen by October 15, 2021. Instructions on how to upload proof of vaccination will be

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provided. The federal government is providing vaccines free of charge to all people living in the United States, regardless of their health insurance status. If you need assistance in locating where to find a vaccine please click the following link: vaccinefinder.org.

Full & Part Time employees will be granted up to 2 of hours of time to receive vaccinations. Employees are to work with their managers to schedule appropriate time to comply with this policy.

Employees will be required to provide either proof of vaccination or be approved for a reasonable accommodation, by the HR department, to be exempted by **October 15, 2021** as a condition of employment.

If you have misplaced your vaccination card or would like to obtain additional copies of proof of vaccination, please click the following link: <https://vase.vdh.virginia.gov/vacapps/f?p=545:1>

Failure to comply with the deadline will result in termination.

Reasonable Accommodation

Employees in need of an exemption from this policy due to a medical reason, or because of a sincerely held religious belief, must submit a completed Request for Accommodation form to the Human Resources department to begin the interactive accommodation process by **September 8, 2021**.

Accommodations will be granted where they do not cause RBHA undue hardship or pose a direct threat to the health and safety of others. As such, employees who are granted reasonable accommodations to waive the vaccination requirement against COVID-19 will be required to complete the Weekly Testing Survey and upload weekly proof of COVID-19 PCR test results by 12 pm every Friday.

The employee may obtain the testing at a site of their choice. If staff encounter difficulties scheduling a PCR test, please contact HR. Full time employees with the approval of their supervisor will be allowed flex time to take the test.

If an employee fails to provide weekly proof, they will be suspended without pay pending termination. All full time and part time employees must sign an

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acknowledgement form stating they have received a copy of the policy via MyLearning Pointe.

Please click the link to find testing sites:

<https://www.vdh.virginia.gov/coronavirus/covid-19-testing-sites/>.

Closing:

The work you do is an extremely vital community service. We care for some of the most vulnerable individuals in our community who rely on us now more than ever. We have people in our residential programs who need around the clock care, and individuals coming for clinical services dealing with anxiety on top of chronic mental health or substance use issues. When we continue to provide these essential services through ensuring the safest workplace possible, we can then bill for these services and, in turn, compensate you for this very critical work.

As news of COVID-19 continues to evolve, you may find yourself growing **increasingly anxious. If so, rest assured you're not** alone. Remember, your Employee Assistance Program (EAP) is available 24/7 to provide you and members of your household with confidential support during challenging times. Call 800-865-1044 to talk to a counselor for in-the-moment support or a work/life specialist who can assist you in identifying resources to meet your individual needs. Get a referral for visits to manage stress, anxiety, and other issues. Most Providers are offering virtual/telephonic sessions. At www.anthemepap.com **you'll find tips, tools** and resources for COVID-19 and more.

COVID-19 has changed daily living for all of us in ways we never imagined. When you came to work for the RBHA, you committed to helping individuals who need extra support. Everyone, ranging from our healthcare staff to our administrative support staff, works hard every day- thus helping these individuals to live fearlessly. You are setting an extraordinary example of commitment, professionalism, and solidarity.

Thank you.

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Exceptions:

This policy does not apply to independent provider organizations, who have a contractual relationship with RBHA, at their location.

This policy will remain effect until modified or rescinded.



Virginia Association of Community Services Boards

DRAFT Budget Priorities

2022-2024 Biennium

ALL OF US FIRST

The VACSB requests that policy makers, including the Governor and the General Assembly, put **ALL OF US FIRST**. This means that the entire public system for behavioral health and developmental disability services needs to be prioritized, as well as the individuals served in the system.

Putting **ALL OF US FIRST** means that for every dollar the Governor and the General Assembly decide to invest in state psychiatric facilities and training centers, at least an equal investment needs to be made in community-based care.

The individuals served in this system cannot continue to suffer due to the perpetual “zero sum” thinking where what one side of the system gains comes at the expense of the other side of the system. **Mutual gain should be the goal if we want to benefit the individuals we serve.**

Addressing the CSB Workforce Crisis

In order to continue and enhance community-based care, CSBs must have funding to provide recruitment and retention incentives for their staff. **VACSB’s top priority is a \$167.5M investment in recruitment and retention initiatives for CSBs including quarterly recruitment and retention bonuses, funds to create a path to licensure by paying for clinical supervision hours and funding for loan repayments and scholarships.**

Continued STEP-VA Funding

STEP-VA is a long-term approach to creating a baseline level of supports and services in every CSB catchment area. There is a need for funding to enhance services that are in the late phases of implementation as well as funding to support the implementation of services slated for implementation according to the mandate in the Code of Virginia.

As such, VACSB is advocating for **\$9M** in ongoing general funds to fully fund the outpatient step of STEP-VA, the funding for which was reduced by that amount due to false assumptions that CSBs would be made whole through billing for this service with Medicaid expansion. VACSB believes additional funding is needed in this step to enhance CSBs’ ability to meet their Same Day Access (SDA) metrics regarding first offered appointment and to account for the increase in assessments through SDA that have resulted in a greater demand for this service.

VACSB is also advocating for **\$25M** in ongoing general funds to fully fund the case management and care coordination steps of STEP-VA.

Developmental Disability Waiver Provider Rebase for Reimbursement Rates

The Waiver rate rebase is intended to account for costs that have increased since 2014 and added costs for the Department of Justice (DOJ) quality assurance requirements. As well, the planned minimum wage increases in the next five years should also be accounted for and worked into the rebase rates. Without this rebase, CSBs and other providers will face additional workforce shortages which may put these services at risk.

The VACSB requests funding equal to the increases proposed in the Burns and Associates rate study.

Priority One Wait List for DD Waiver Services

VACSB requests **\$12M** to decrease the priority one wait list by approximately 1,350 individuals. Roughly 13,800 people with DD are on the Waiver wait list for community-based services. Receiving a Waiver slot enables an individual who needs DD services and supports to live a life that is fully integrated in the community.

Permanent Supportive Housing

VACSB is requesting an additional **\$20M** to support Permanent Supportive Housing (PSH) in the 4 DBHDS regions not funded in the special session budget.

Adequate housing and a range of community behavioral health and developmental disability service options are vital to keeping individuals stable in the community, rather than cycling back into the hospital system. Appropriate housing is a significant barrier to discharge from state psychiatric hospitals. Increased funding for PSH will reduce the hospital census pressures by having the ability to discharge individuals from the hospital as soon as they are clinically ready. 87% of individuals served in PSH remained stably housed for at least one year, according to DBHDS data, which saved \$12.2M in state psychiatric bed day costs.

Candidates by District Number-Nov. 2, 2021 Election

* Incumbent									
District	Democrat	Information about Democratic Candidate (*Asterisk after name means incumbent)	Campaign Email	Campaign Phone	Republican	Information about Republican Candidate (*Asterisk after name means incumbent)	Campaign Email	Campaign Phone	Other Party
HD 1	Christopher Tomlinson	WITHDREW FROM RACE			Terry Kilgore*				
HD 2	Candi King*	(Jennifer Carroll Foy sought other office) Candi helps families with special needs children navigate the education system - https://www.candikingforva.com/			Gina Ciarcia	Military wife and teacher - https://www.ginaforvirginia.com/ little money raised - info@GinaForVirginia.com			
HD 3	Lasandra Thompson	WITHDREW FROM RACE			Will Morefield*				
HD 4	Leslie Merris	WITHDREW FROM RACE			Will Wampler*				Andrew Rose - Libertarian - very little raised - MH Counselor - Wants to end most taxes and end Govt setting reimbursement rates for healthcare services
HD 5	Mathew Matsunaga	https://mat4va.org/ / \$0 raised	No contact info		Israel O'Quinn*				
HD 6	Lily Formato	WITHDREW FROM RACE			Jeff Campbell*				
HD 7	Derek Kitts	Retired Army - https://kitts4delegate.com	info@kitts4delegate.com		Marie March	Nothing about our areas - https://mariemarch.com/	No Contact Information		
HD 8	Dustin Wimbish	Army vet, father of 8, stay at home dad, adoptive parent, foster parent - https://wimbish4delegate.com/	No contact info		Joe McNamara*				
HD 9	Bridgette Craighead	https://www.bridgettefordelagate.com/ - Nothing about our areas	No contact info		Wren Williams (Del. Poindexter lost Primary)	Nothing about our areas - https://wrenwilliamsva.com/about/	No Contact Information		
HD 10	Wendy Gooditis*	Brother died from MH - Incumbent			Nick Clemente	More funding for MH solutions and properly fund police. - Mental health permeates everyone's life. All have experienced personal loss, and statistics show that in 2020 alone, suicide was the 10th leading cause of death in Virginia and the 2nd leading cause for ages 10-34. This is a health crisis that needs to be addressed, and we must take action now. Nick will champion mental health awareness and work to bring in more funding for mental health solutions in Virginia. - https://www.nickclemente.com/meet-nick		(571) 707-4471	
HD 11	Sam Rasoul*				Charlie Nave	Nothing about our areas - civil rights attorney - http://charlienave.com/the-better-way/			
HD 12	Chris Hurst*				Jason Ballard	Nothing about our areas - fully fund police, sees the benefit of telehealth - https://ballardfordelegate.com/			
HD 13	Danica Roem*				Christopher Stone	Nothing about our areas - fully fund police - https://christopherstoneva.com			
HD 14	Rhett Deitz	degree in social work. Her passion for social work transitioned into a career in field politics in Virginia - https://www.deitz4delegate.com			Danny Marshall*				
HD 15	Emily Scott	Little \$ raised - List Mental Health Services as one of her priorities	https://www.scottfordelegate.net/		Todd Gilbert*				
HD 16	Chance Trevillian	No website, Little \$ raised - https://www.dailykos.com/stories/2021/5/23/2031756/-Why-Should-We-Allow-Life-s-Circumstances-to-Limit-Our-Possibilities	https://www.facebook.com/ChanceTrevillianForHD16/		Les Adams*				

HD 17	Becca Kenney	\$0 Raised - https://twitter.com/Becca_Keeney			Chris Head*			
HD 18	Douglas Ward	Private Practice - Infectious Diseases - https://drdougfordelegate.com/			Michael Weibert*			
HD 19	Wendy Rowden	No website, Little Raised			Terry Austin*			Dean D Davison - has website - rasied little - is a meteorogists consultant - https://davison4delegate.com/
HD 20	Randall Wolf	1 Priority Listed: Justice reform and behavioral health crisis care - https://www.wolf4delegate20.com/			John Avoli*			
HD 21	Kelly Fowler*				Tanya Gould	Works on human trafficking / human rights - https://tanyagouldfordelegate.com/		
HD 22	Greg Eaton	No website, \$0 raised			Kathy Byron*			
HD 23	Natalie Short	No website, \$0 raised			Wendell Walker*			
HD 24	Sam Soghor	Little \$ Raised - https://www.sam24th.com/			Ronnie Campbell*			
HD 25	Jennifer Kitchen	https://www.electjenniferkitchen.com/platform - Nothing about our areas			Chris Runion*			
HD 26	William Helsley	Big on healthcare for all, attorney - does a lot of pro bono work - https://www.helsleyfordelegate.com/			Tony Will*			
HD 27	Debra Gardner	Ensure we have affordable mental health care and legitimate recovery support - Served on the Virginia Drug Treatment Court Advisory Committee, the Virginia Substance Abuse Services Council - https://debragardnerfordelegate.com/			Roxann Robinson*			Henry Staruk - I support relieving some of the pressure from our fine law enforcement officers through alternative response teams, rehabilitation programs, and sentencing for drug and mental health related calls. Too much is already asked of these heroes without expecting them to be mental health and therapeutic experts.
HD 28	Joshua Cole*				Tara Durant	Nothing about our areas - https://taradurant.com/		
HD 29	Delmara Bayliss	https://baylissfordelegate.com/ - Before law school worked as a social worker trainee			Bill Wiley*			
HD 30	Annette Hyde	son diagnosed w bipolar at age 8, long time ago, supports single payer insurance - https://anneteservesva.com/			Nick Freitas*			
HD 31	Elizabeth Guzman*				Ben Baldwin	Nothing about our areas - https://www.benbaldwinva.com/		
HD 32	David Reid*				Scott Pio	Nothing about our areas - https://scottpio.com/		Nicholas Allegro - No website, \$0 raised
HD 33	Paul Siker	Is a moderate - Good government should strive to provide a social safety net to those most in need. - https://www.paulsiker.com/			Dave LaRock*			
HD 34	Kathleen Murphy*				Gary Pan	Addressing youth mental health issues are Gary's top priorities. Youth mental health is another casualty of COVID-19, and Gary has listened to dozens of parents concerned with their child's development. Investing in awareness, resources and counselors to address mental health will be critical to avoiding a lost generation of Virginians. - Gary will fight to ensure that there is a greater level of youth mental health awareness and resources available to help those in need - https://panforvirginia.com/		

HD 35	Mark Keam*			Kevin McGrath	\$0 raised https://mcgrath4va.com/			
HD 36	Ken Plum*			Matthew Lang	Nothing about our areas -military, foreign security, local police experience - https://langforva.com/			
HD 37	David Bulova*			Kenny Meteiver	Former military - https://kennyfordelegate.com/			
HD 38	Kaye Kory*			Tom Pafford	Little \$ Raised - Against too many accomidations being made for transgender - thinks it can harm nontransgender kids. - https://pafford4va.com/			
HD 39	Vivian Watts*			Maureen Brody	Little \$ Raised - https://www.brodyforvirginia.com/issues.html - Suicides and drug hospitalizations are up. Mental well-being is down. And to this day, scientific data do not support the policies state officials have mandated. I will work with the Bureau of Insurance as well as the Department of Health to improve Virginia's mental and physical health policies for all ages.			
HD 40	Dan Helmer*			Harold Pyon	Website does not say much yet - nothing about our areas - Big jobs creator combining govt & private sector - https://www.haroldpyon.com/			
HD 41	Eileen Filler-Corn*			John Wolfe	\$0 raised, no website			
HD 42	Kathy Tran*			Ed McGovern	Federal and Army career in Resource management for command posts - https://www.edmcgovernva.org/?page_id=22			
HD 43	Mark Sickles*			Brenton Hammond	Was with secret service, now does defense contracting - https://www.brentonfordelegate.com/			Aveesh Jain - Can't find wewbsite
HD 44	Paul Krizek*			Richard Hayden	Voice for the most vulnerable among us – the unborn, seniors, and those with special needs - https://www.haydenfordelegate.com/			
HD 45	Elizabeth Bennett-Parker	Beat Mark Levine in Primary - Impressive Resume, but nothing on our issues https://www.elizabethfordelegate.com/your-priorities		JD Maddox	small busniess owenr and former Deputy Coordinator of the government's counter-disinformation Global Engagement Center, as an advisor to the Secretary of Homeland Security, - https://www.maddoxforvirginia.com/			
HD 46	Charniele Herring*			Kyle Rooney	WITHDREW FROM RACE			
HD 47	Patrick Hope*			Laura Hall	No money raised - No website			
HD 48	Rip Sullivan*			Edward Monroe	website doesn't say much - he is a teacher https://www.monroefor48th.org/			
HD 49	Alfanzo Lopez*			Timothy Kilcullen	Little money raised - https://www.kilcullenforvirginia.com/			
HD 50	Michelle Maldonado	Business teaches HUMAN FLOURISHING, EMOTIONAL INTELLIGENCE & MINDFUL BUSINESS TRANSFORMATION - https://www.michelle4va.com/meet-michelle		Steve Pleickhardt	dentist - wants to lower the cost of healthcare - http://votedrsteve.com/			
HD 51	Briana Sewell	https://sewellfordelegate.com/ - Worked for Congressman Connolly - led Virginia Campaign for a Family Friendly Economy		Tim Cox	Third Party Contrcator / Navy Reserves - https://timcoxforvirginia.com/why-tim/			
HD 52	Luke Torian*			Maria Martin	https://mmartin4virqinia.com/ - strange wordinq - "Mental health has increased tremendously in 2020 due to the pandemic"			
HD 53	Marcus Simon*			Sarah White	consultant to help restaurants thrive - https://www.sarah4va.com/about.html			
HD 54	Eric Butterworth	can't find website, Little \$ Raised		Bobby Orrock*				
HD 55	Rachel Levy	Lists adequate funding and resources for mental health services / Exploring expanding who can qualify for Medicaid / Funding mental health services and interventions when appropriate in place of police involvement / Treating drug use as a substance abuse & mental health (and not criminal) matter - PhD in Educational Leadership and Policy - https://rachelfordelegate.org/issues/		Buddy Fowler*				

HD 56	Blakely Lockhart	<p><u>Saving Lives</u> I have studied addiction in-depth as part of my neuroscience degree and understand many of the intricacies of this dangerous illness and the threats that it poses. We must take bold action now because we are losing too many of our friends, neighbors, and family members to substance abuse.</p> <p><u>More Support Systems</u> Addiction is an illness and we must create more support systems so that community members can receive the help that they need. Sadly, many people in the rural areas of our district do not have access to the same resources that others in more suburban or urban areas do. As your delegate, I pledge to open more addiction treatment systems in the 56th district and fight to de-stigmatize addiction. Also - list disability services. https://www.lockhartfordelegate.com/</p>			John McGuire*			
HD 57	Sally Hudson*				Philip Hamilton	Nothing about our areas - https://hamiltonforvirginia.wordpress.com/		
HD 58	Sara Ratcliffe	<p>https://saraforva.com/priorities-read-more/ - Would direct additional resources to community-based mental health treatment options and substance abuse counseling, including making sure these options are covered by insurance. - worked in DC on tobacco control, preventive health, health access equity, civil rights including religious liberty and reproductive freedom -</p>			Rob Bell*			
HD 59	Ben Moses	critical care physician and anesthesiologist at the University of Virginia - https://benmosesforva.com/meet-ben/			Matt Fariss*			Louis Scicli - https://louisfordelegate.com/ / samll business owner / former LEO - conservatie
HD60					James Edmunds*	No Opponent		
HD 61	Trudy Berry	Rural communities need local clinics that can provide more of the services that hospitals offer. The lack of public transportation makes it difficult for some people to travel out of town for medical treatment in a larger clinic or a hospital. These local clinics should be equipped with x-ray and mammogram machines, they should have staff and supplies to apply a cast to a broken arm or leg - Former Airforce - undergrad and Certificate in Social Policy and Administration. - https://www.trudyberry.com/about-trudy/			Tommy Wright*			Joe Paschal - https://joe4southside.com/
HD 62	Jasmine Gore	Hopewell Mayor very ambitious - https://www.gorefordelegate.com/			Carrie Coyner*			
HD 63	Lashrece Aird*				Kim Taylor	Run automotive repair businesses - https://kimtaylorva.com/		
HD 64	Michael Drewry	No website yet - farmer and attorney - Little \$ Raised			Emily Brewer*			
HD 65	Catlin Coakley	Politics reporter - Lists addressing the health care provider shortage with targeted workforce development programs, and increase support for community health centers to expand access to care. Invest in the public programs that build social and economic equity, including education, mental health, resources for people experiencing housing insecurity, and economic development. - https://www.coakleyfordelegate.com/	Contact Form	No Phone Number	Lee Ware*			
HD 66	Katie Sponsler	Both kids have Autism Spectrum and gifted. Knowing that people on the spectrum and with mental illness are more likely to be killed and arrested by law enforcement has increased her devotion to police reform. Constantly fighting for healthcare for the services they need. Has Lymphomia from past military job.	Katie@katiesponsler.com	(804) 601-0766	Mike Cherry	Completed training as a peer-to-peer counselor and Crisis Intervention Management team member / Head of School at Life Christian Academy, been City Council in Colonial Heights since 2016 - https://mikecherryforva.com/	lauren@mikecherryforva.com	No phone number
HD 67	Karrie Delaney*				Bob Frizzelle	can't find website		

HD 68	Dawn Adams*				Mark Earley, Jr	Attorney a his dad's law firm. Nothing about our areas - https://www.markearleyforva.com/get-involved	info@markearleyforva.com	No phone number	
HD 69	Betsy Carr*				Sheila Furey	Child, adolescent, and adult psychiatrist who has practiced in the Richmond area for over 20 years. She has worked as an advocate for children in public schools and has provided care to children in residential treatment and juvenile detention. Her passion for serving children and helping families led her to begin teaching brain exercises to help children and adults overcome learning disabilities. - Dr Furey opposes managing mental illness and substance use with incarceration - https://furey4delegate.com/#about	No Contact Information		
HD 70	Delores McQuinn*								David Vaught - Independent - https://www.vaughtfordelegate.com/#priorities
HD 71	Jeff Bourne*				Nancye Hunter	Can't find website - no money raised			
HD 72	Schuyler VanValkenburg*				Christopher Holmes	Nothing about our areas - https://christopherholmes4delegate.com/	info@christopherholmes4delegate.com	No phone number	
HD 73	Rodney Willett*				Mary Margaret Kastelberg	Business & finance background - Nothing about our areas https://www.kastelberg4va.com/priorities	info@kastelberg4va.com	(804) 404-6175	
HD 74	Lamont Bagby*				Jimmy Brooks	No Website / NO \$0 Raised			
HD 75	Roslyn Tyler*				Otto Wachsmann	Pharmacists - Nothing about our areas - https://www.ottowachsmann.com/about	info@OttoWachsmann.com	No phone number	
HD 76	Clint Jenkins*				Michael Dillender	former Navy now financial planner - Nothing about our areas - https://mikedillender.com/about/	Contact Form	No phone number	
HD 77	Cliff Hayes*				Geoffrey Burke	Nothing about our areas - https://www.geoffreyburke4va.com/news/category/in-the-news/	Contact Form	(757) 916-3236	
HD 78	Melanie Cornelisse	Little money Raised - https://www.melanie4va.com			Jay Leftwich*				
HD 79	Nadarius Clark (Steve Heretick lost primary)	Nothing about our areas - https://www.clarkfordelegate.com/			Lawrence Mason	Navy Veteran. First Responder - Nothing about our areas - https://masonforva.com/	lawrence@masonforva.com		
HD 80	Don Scott*				Deanna Stanton	No website yet			
HD 81	Jeffrey Feld	Podiatrist and owns medical practice at multiple locations - https://feldfordelegate.com/	staff@feldfordelegate.com	(757) 366-1403	Barry Knight*				Jeff Staples - Progressive - better access for Virginians to mental health care - more low cost housing -
HD 82	Scott Flax	Attorney - nothing about our areas - does support criminal justice reform https://www.flaxfordelegate.com/focus	No contact info		Anne Ferrell Tata (Jason Miyares sought other office)	Christian Media professional - https://teamtata.org/gallery - Nothing about our areas	info@teamtata.org		
HD 83	Nancy Guy*				Tim Anderson	Nothing about our areas - https://www.timforva.com/platform	TIM@TIMFORVA.COM	(757) 201-4109	
HD 84	Kim Melnyk	Past Teacher, now small business owner - https://kimfordelegate.com/#meet-kim	No contact info		Glenn Davis*				

HD 85	Alex Askew*				Karen Greenhalgh	Was pregnancy crisis counselor then started Cyber Tygr - cyber security business. "It is imperative that healthcare continues to adapt to involve telemedicine and more over the counter treatments. Virginia continues to lack the resources to improve care in the field of mental health and treatment programs." Karen is well versed and experienced in the field of healthcare as she is a nationally renowned expert in ensuring the privacy and safety of patients through her business, Cyber Tygr. - https://www.karengreenhalgh.com/	contact@karengreenhalgh.com		
HD 86	Irene Shin (Ibraheem Samirah lost in primary)	"Mental health care is healthcare. I believe that affordable and quality coverage must include mental health treatment. I support universal screening in our schools for early signs of mental health issues, integrating mental and physical health systems so that mental healthcare is included in primary care, and ensuring all mental health prevention tools are available to different language communities. As a Delegate, I will work with my colleagues and community stakeholders to make sure every Virginian has the care they deserve." - https://www.ireneforva.com/about-irene	hello@ireneforva.com		Julie Perry	Histor teacher - nothing about our issues - https://julieforhouse.com/			
HD 87	Suhas Subramanyam*				Greg Moulthrop	Tech startup company - worked on a number of issues ranging from the opioid epidemic, national drug stockpile, and securing the pharmaceutical supply chain as an expert in economics and supply	campaign@gregmoulthrop.com		
HD 88	Kecia Evans	https://levansfordelegate.org/-22-years-in-criminal-justice			Phillip Scott	Baby has Edwards Syndrome. - https://www.philscottva.com/meet-ph	info@philscottva.com	(540) 923-0326	Tim Lewis - Nothing on our issues - https://www.tim4va.com/m
HD 89	Jay Jones*				Hahns Copeland	Engineer and Dept of Defense contracts. Virginia schools must re-double or even quadruple its emphasis on early intervention with more effectively diagnose and treat dyslexia and other similar learning disabilities. - https://www.hahnscoeland.com/	hahnscoelandfordelegate@gmail.com	757-438-7677	
HD 90	Angelia Williams Graves	Became delegate January 2021 - Was Norfolk City Council for 10 years. Served as the city's Vice Mayor from 2013-2016			Sylvia Bryant	business administrator at multi-state construction company	Sylvia@sylviabryantva.com		
HD 91	Martha Mugler*				A.C. Cordoza	cyber security for Newport News Shipbuilding where he focuses on keeping our Naval assets safe against enemy threats	cordozaforvirginia@gmail.com		Charles West
HD 92	Jeion Ward*				Benjamin Siff	Noting about our areas - https://www.siff4va.com/	https://www.siff4va.com/		
HD 93	Mike Mullin*				Jordan Gray	Teaches 6th grade social studies - nothing about our areas - https://www.grayfordelegate.com/about-jordan.html	jordan@grayfordelegate.com	757-542-0499	
HD 94	Shelly Simonds*				Russ Harper	Nothing on our issues - https://russfordelegate.com/	russfordelegate@gmail.com	757-232-5908	
HD 95	Cia Price*				David Wilson	Organized ask the city to create an alert system for disabled, elderly, and mentally unstable people. - https://www.davidwilsonfordelegate.org/		757-781-4613	
HD 96	Mark Downey	Pediatrician - invest in preventative care to reduce the epidemic of untreated chronic diseases that lead to expensive medical interventions down the line, costing us all. We have to prevent health problems before they snowball into other issues that affect the individual as well as our communities. This is particularly true for mental health and addiction , which can spiral quickly into critical situations that cost opportunities to contribute to our communities in addition to expensive health care and correctional bills, often paid by taxpayers directly. Prevention is less expensive than reactivity for all of us. - https://downeyforvirginia.com/		757-663-4362	Amanda Batten*				

HD 97	Scott Stan	Universal access to healthcare - https://stanforvirginia.org/	No contact info		Scott Wyatt*			
HD 98	Ella Webster	Dr. for Health Districts all over the Eastern Region - health coverage & affordability for everyone - https://ella4the98th.com/priorities/	info@ella4the98th.com	(804) 505-4898	Keith Hodges*			
HD 99	Linwood Blizzard	Pastor, calculus teacher, former chemical engineer - https://blizzardfordelegate.com/	info@blizzardfordelegate.com		Margaret Ransone*			
HD 100	Finale Norton	26 years at Bank of America - https://www.norton4delegate.com/	norton4delegate@gmail.com		Rob Bloxom*			

* Incumbent

Senators and Delegates per CSB Catchment Area

Richmond Behavioral Health Authority	Delegate	Dawn Adams - D - 68th	(804) 698-1068	(804) 698-1068	District Office	DeIDAdams@house.virginia.gov	Richmond	
Richmond Behavioral Health Authority	Delegate	Betsy Carr* - D - 69th	(804) 698-1069	(804) 698-1069	District Office	DeIBCarr@house.virginia.gov	Richmond	
Richmond Behavioral Health Authority	Delegate	Delores McQuinn* - D - 70th	(804) 698-1070	(804) 698-1070	District Office	DeIDMcQuinn@house.virginia.gov	Richmond	
Richmond Behavioral Health Authority	Delegate	Jeff Bourne - D - 71st	(804) 698-1071	(804) 698-1071	District Office	deljbourne@house.virginia.gov	Richmond	
Richmond Behavioral Health Authority	Senator	Jennifer L. McClellan - D - 9th	(804) 698-7509	(804) 698-7509	District Office	district09@senate.virginia.gov	Richmond	
Richmond Behavioral Health Authority	Senator	Ghazala Hashmi - D - 10th	(804) 698-7510	(804) 698-7510	District Office	district10@senate.virginia.gov	Richmond	Senator Sturtevent lost
Richmond Behavioral Health Authority	Senator	Joe Morrissey - D - 16th	(804) 698-7516	(804) 737-1626	District Office	district16@senate.virginia.gov	Richmond	

VACSB 2021 Public Policy Brochure Guidance Document

“ALL OF US FIRST”

Suggestions for Use of the VACSB 2021 Public Policy Brochure and the Inclusion of Local CSB Information

Below you will find the VACSB’s draft budget priorities for the 2022 General Assembly session. VACSB will also support budget amendments from its advocacy partners once they are advanced.

The VACSB believes that the overriding message to local and state decision-makers should be the following:

The VACSB requests that policy makers, including the Governor and the General Assembly, put **ALL OF US FIRST**. This means that the entire public system for behavioral health and developmental disability services needs to be prioritized, as well as the individuals served in the system.

Putting ALL OF US FIRST means that for every dollar the Governor and the General Assembly decide to invest in state psychiatric facilities and training centers, at least an equal investment needs to be made in community-based care.

The individuals served in this system cannot continue to suffer due to the perpetual “zero sum” thinking where what one side of the system gains comes at the expense of the other side of the system. **Mutual gain should be the goal if we want to benefit the individuals we serve.**

VACSB’s DRAFT Budget Priorities for the 2022-2024 Biennium

Addressing the CSB Workforce Crisis

In order to continue and enhance community-based care, CSBs must have funding to provide recruitment and retention incentives for their staff. **VACSB’s top priority is a \$167.5M investment in recruitment and retention initiatives for CSBs including quarterly recruitment and retention bonuses, funds to create a path to licensure by paying for clinical supervision hours and funding for loan repayments and scholarships.**

Continued STEP-VA Funding

STEP-VA is a long-term approach to creating a baseline level of supports and services in every CSB catchment area. There is a need for funding to enhance services that are in the late phases of implementation as well as funding to support the implementation of services slated for implementation according to the mandate in the Code of Virginia.

As such, VACSB is advocating for **\$9M** in ongoing general funds to fully fund the outpatient step of STEP-VA, the funding for which was reduced by that amount due to false assumptions that CSBs would be made whole through billing for this service with Medicaid expansion. VACSB believes additional funding is needed in this step to enhance CSBs' ability to meet their Same Day Access (SDA) metrics regarding first offered appointment and to account for the increase in assessments through SDA that have resulted in a greater demand for this service.

*VACSB is also advocating for **\$25M** in ongoing general funds to fully fund the case management and care coordination steps of STEP-VA.*

Developmental Disability Waiver Provider Rebase for Reimbursement Rates

The Waiver rate rebase is intended to account for costs that have increased since 2014 and added costs for the Department of Justice (DOJ) quality assurance requirements. As well, the planned minimum wage increases in the next five years should also be accounted for and worked into the rebase rates. Without this rebase, CSBs and other providers will face additional workforce shortages which may put these services at risk.

The VACSB requests funding equal to the increases proposed in the Burns and Associates rate study.

Priority One Wait List for DD Waiver Services

VACSB requests **\$12M** to decrease the priority one wait list by approximately 1,350 individuals. Roughly 13,800 people with DD are on the Waiver wait list for community-based services. Receiving a Waiver slot enables an individual who needs DD services and supports to live a life that is fully integrated in the community.

Permanent Supportive Housing

VACSB is requesting an additional **\$20M** to support Permanent Supportive Housing (PSH) in the 4 DBHDS regions not funded in the special session budget.

Adequate housing and a range of community behavioral health and developmental disability service options are vital to keeping individuals stable in the community, rather than cycling back into the hospital system. Appropriate housing is a significant barrier to discharge from state psychiatric hospitals. Increased funding for PSH will reduce the hospital census pressures by having the ability to discharge individuals from the hospital as soon as they are clinically ready. 87% of individuals served in PSH remained stably housed for at least one year, according to DBHDS data, which saved \$12.2M in state psychiatric bed day costs.

LOCAL INFORMATION INSERTS FOR THE VACSB PUBLIC POLICY BROCHURES

The use of a simple format with bulleted information will best convey the information.

Inserts can be up to 8.5 x 11 in size.

The VACSB Recommends that your Local Inserts Contain Some or All of the Following:

- Workforce development challenges faced by the CSB/BHA in providing access to care;
- Accomplishments with regard to services for adults, children and families, particularly STEP-VA successes;
- Summary of the children and adults served in each service area within your CSB/BHA;
- Any outcomes that your CSB/BHA might have with regards to the Department of Justice Settlement Agreement;
- Regional successes/collaborations;
- New and/or continuing needs in your community;
- Unique and innovative programs within your CSB/BHA and their outcomes;
- One or two brief and compelling stories of consumer success and need, focusing on recovery.

Recommended Ways to Use the Brochures with Local Information:

- Local information should be prepared, discussed with Board members, and then inserted into the brochures.
- As board members convey the needs of consumers to the local and state officials, these brochures should be used as discussion pieces and are to be left with the official as an advocacy and public information vehicle.
- Even if you have tried unsuccessfully in the past to set up an appointment with your elected officials, don't give up. Try again!
- Normally VACSB would encourage you to use this brochure for events, breakfasts, receptions, or other opportunities that come about. VACSB understands that because of the pandemic virtual meetings might be more populate than in person meetings. VACSB is providing you with an electronic version of the public policy brochure that can be emailed out with your local information.
- If you would like VACSB to set up and facilitate a Zoom "Meet and Greet" for you and your delegates and senators, please let Hilary Piland know! As we all know Zoom meetings can be very useful and efficient. This can be a great way for you to reach multiple senators and delegates at one time. As well, it is great for senators and delegates to see and hear from the executive director. As VACSB has said in a past Meet and Greet invitation, "No one knows the system of care better than your local CSB Executive Director!"

What Legislators Should be Asked to Do:

- Call the governor and let him know that funding for each of the budget priorities listed above, **especially the workforce incentives item**, is critical for CSBs to continue to serve some of the most vulnerable populations of people in our communities.

- Communicate with a [House Appropriations](#) or [Senate Finance](#) (“money committee”) member and ask for influence with both the governor’s budget and the legislative budget. Ask him/her to call the governor and the chair of the committee for his influence with the governor.

Local Officials:

- Ask for influence in the governing body’s support of the VACSB budget priorities and support communicating to the governor and General Assembly members.

Consumers/Families:

- Can communicate directly with the governor and General Assembly members in favor of VACSB budget priorities and accompanying needs.

Time Frame:

- Visits and communication should be made throughout the fall, so that you can follow up during the General Assembly session in January.

Resources:

- [Who is my legislator?](#)
- [House of Delegates Contact List](#)
- [Senate Contact List](#)
- [Contact Governor Northam](#)
- [Virginia Legislative Information System](#)

Questions:

Please direct any questions to Hilary Piland, VACSB Public Policy Manager, at hpiland@vacsb.org or 804-330-3141.

VACSB September 2021 Advocacy Message

The only way for Virginia to get ahead of its census crisis at state psychiatric facilities is to continue to increase its investment in community-based services that help divert people from needing a state hospital level of care as well as having services available, such as outpatient and permanent supportive housing, so people can leave the state hospitals as soon as they are clinically ready. This means addressing the “front door” and the “back door” of state hospitals.

None of this will be possible unless Virginia puts [ALL OF US FIRST](#).

This means that the entire public system for behavioral health and developmental disability services needs to be prioritized, as well as the individuals served in the system.

Putting [ALL OF US FIRST](#) means that for every dollar the Governor and the General Assembly decide to invest in state psychiatric facilities and training centers, at least an equal investment needs to be made in community-based care.

The individuals served in this system cannot continue to suffer due to the perpetual “zero sum” thinking where what one side of the system gains comes at the expense of the other side of the system. [Mutual gain should be the goal if we want to benefit the individuals we serve.](#)

[In addition to the points made above, please use VACSB’s Draft Budget priorities below for the September advocacy message...](#)

VACSB DRAFT Budget Priorities for 2022-2024 Biennium

[Addressing the CSB Workforce Crisis](#) (see breakdown for these funds below this list of budget priorities) In order to continue and enhance community-based care, CSBs must have funding to provide recruitment and retention incentives for their staff. **VACSB’s top priority is a \$167.5M investment in recruitment and retention initiatives for CSBs including quarterly recruitment and retention bonuses, funds to create a path to licensure by paying for clinical supervision hours and funding for loan repayments and scholarships.**

Please include your CSB’s point in time vacancy numbers and turnover rate. The workforce survey which shows each CSB’s workforce numbers is attached with the email that contained this message. For example:

1. XYZ CSB currently has XYZ vacancies out of XYZ total positions.
2. XYZ CSB had an XYZ % turnover rate in FY2021.

Continued STEP-VA Funding

STEP-VA is a long-term approach to creating a baseline level of supports and services in every CSB catchment area. There is a need for funding to enhance services that are in the late phases of implementation as well as funding to support the implementation of services slated for implementation according to the mandate in the Code of Virginia.

As such, VACSB is advocating for **\$9M** in ongoing general funds to fully fund the outpatient step of STEP-VA, the funding for which was reduced by that amount due to false assumptions that CSBs would be made whole through billing for this service with Medicaid expansion. VACSB believes additional funding is needed in this step to enhance CSBs' ability to meet their Same Day Access (SDA) metrics regarding first offered appointment and to account for the increase in assessments through SDA that have resulted in a greater demand for this service.

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The VACSB requests funding equal to the increases proposed in the Burns and Associates rate study.

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More on Workforce Incentives

- VACSB is advocating that the Governor's budget includes funding for CSBs to provide work force incentives for recruiting and retention of staff. **A large amount of Federal ARPA funds were allotted for state hospitals to provide staff recruiting and retention incentives. Now the CSBs need a proportionate level of funding.**
- VACSB is working with DBHDS leadership to advocate that the Governor's budget includes funds for CSB staffing incentives.

The following are specific workforce incentive funding requests that VACSB sent to the Commissioner of DBHDS. The goal is that these requests will be included in the Governor's budget, which will be introduced to the General Assembly and the public on December 16th, in advance of the 2022 General Assembly Session:

- *\$151,040,000 in FY23 for \$4,000 quarterly recruitment bonuses to support 1,593 new hires and \$4,000 quarterly retention bonuses to support 7,847 existing CSB employees.*
- *\$7,800,000 in FY23 to create a path to licensure by paying for up to 200 clinical supervision hours for up to 600 CSB staff.*
- *\$8,533,333 in FY23 to provide loan repayments to 80 clinicians and scholarships for 80 clinicians.*
- *VACSB also request that DBHDS advocate for funding for items the association put forward in the context of the ARPA funds. VACSB can put dollar figures on any of the items DBHDS is willing to support on its behalf. The full proposal is [here](#) and VACSB would just be looking for funding in the physical infrastructure and IT/Administrative support categories assuming the workforce items are covered in the above dollar figures.*

August 2021 CSB Workforce Survey – Totals Shows Calculations

Email Address	Name & Position	What was your CSB's average vacancy rate across all positions in FY2021 (July 1, 2020 – June 30, 2021)	What was your CSB's average vacancy rate across all positions in FY2020 (July 1, 2019 – June 30, 2020)	How many vacancies does your CSB currently have (point in time, at the time of this survey)?	What is the percentage of CSB staff that have turned over in FY2021 (July 1, 2020 – June 30, 2021)? (employee turnover rate is calculated by dividing the number of employees who left the company by the average number of employees in FY2021. This number is then multiplied by 100 to get a percentage)	What is the percentage of staff that have turned over in FY2020 (July 1, 2019 – June 30, 2020)? (employee turnover rate is calculated by dividing the number of employees who left the company by the average number of employees in FY2020. This number is then multiplied by 100 to get a percentage)
mrunyon@rappahannockareacsb.org	Michelle Runyon, HR Director	12.00%	8.50%	109	17.12%	16.76%
lmorris@portsmouthva.gov	Lizzie Morris, Personnel Analyst	26%	23%	32	6%	10%
mseward@hrscsb.org	Muriel Seward, Human Resources Manager	36%	26%	20	27%	22%
rbengland@frontierhealth.org	Human Resources Director	21%	17%	41	23.10%	21.00%
kshort@crossroadsccb.org	Kathleen Short - HR Director	14%	10%	16	11.42%	10.00%
rhairston@piedmontccb.org	Ronald Hairston Director of Human Resources	7.63%	7.14%	52	33%	27%
smaskey@pwcgov.org	Smita Maskey, Sr. HR Analyst	8.17%	8.20%	51	13.82%	14.80%
Laura.fekishazy@regionten.org	Laura Fekishazy, Director of Human Resources	5.50%	3.30%	61	2.70%	20.50%
lmatthews@wtccb.org	Lara Matthews, HR Director	13.87%	9.10%	80	34.10%	23.93%
dstreet@cmccb.com	Donita Street, Director of Human Resources	18.64%	15.85%	43	23.68%	17.16%
kathleen.wine@loudoun.gov	Kathleen Wine, HR Branch Manager	11.73%	11.75%	62	7.20%	9.95%
jlawson@hanovercounty.gov	Janet Lawson, Director of Human Resources	18%	11%	11	15%	13.50%
Rrfaison@d13ccb.com	Rachel Faison, HR Associate II	25%	18%	29	20.20%	24.60%
pilka@chesterfield.gov	Amanda Pilk	26.89%	20.59%	246 (this number is large because it includes part-time positions)	25.50%	17.40%
kbaker@highlandccb.org	Kathie Baker-Forester, Director of Human Resources	12.14%	5.23%	35	12.11%	4.14%
jayne.shanholtz@nwccb.com	Jayne Shanholtz Human Resources Manager	19%	18%	62	25.91%	25.91%
dbonniwell@brbh.org	Debbie Bonniwell, CEO	37.50%	24.60%	87 (out of 433 total positions)	30%	28%
dcoe@colonialbh.org	David Coe	17.81%	7.46%	36	22.53%	8.57%
mhicks@hncsb.org	HR Manager	8%	5%	71	34%	33%
hsavage@esccb.org	Heather Savage	20.60%	4.64%	11	36.06%	19.16%
salucas@nrvc.org	HR Director	Unable to calculate due to lack of reporting on talent platform	Unable to calculate due to lack of reporting on talent platform	81	20%	24%
ekindell@arlingtonva.us	Erica R Kindell, DHS HR Manager	30%	62%	50	6%	11%
michele.mathis@rscsb.org	Michelle Mathis	12.10%	17.80%	25	22.45%	23.15%
chomer@shccb.org	Crystal Homer Human Resources manager	22%	23%	28	20.66%	21.43%
edw16@henrico.us	Robin Edwards, HR Manager	13%		69	15%	14.20%
danilo.dejesus@alexandriava.gov	Danilo DeJesus - HR Analyst	14%	13%	51	15%	19%
clewis@dpcs.org	Cindy Lewis	21%	22%	74	20.60%	14.90%
daizy.rose@dcbhs.com	Daisy M. Rose, Executive Assistant	5%	5%	7	7.20%	5.60%
kchavis@southsidebh.org	Kameelah Singleton Human Resource Generalist & Training Supervisor	3%	3%	45	42%	27%
Tuttm@rbha.org	Michael Tutt	15.49%	7.04%	136	24.58%	14.08%
twarden@mpnn.state.va.us	HR Director	29%	35%	72	29%	22%
lvanlandingham@chesapeakeibh.net	Lisa Vanlandingham - Administrative Services Director	19.88%	17.03%	69	12.20%	13.10%
dcriner@vscb.org	Derek Criner, HR Director	unknown	unknown	30	unknown	34.80%
snadams@vbgov.com	Talent and Acquisition Supervisor	29.49%	23.51%	232 (is probably including part-time positions)	21.14%	22.06%
		10%		133 out of 1,141 total positions - 92 of those 133 positions are with direct service positions	don't have	don't have
lynn.perkins-anderson@norfolk.gov	Lynne-Perkins Anderson, Administrative	33%	32.50%	120	22.95%	16.46%

	Totals:	18% average vaccacny rate for all CSBs for FY2021 - updated after Norfolk's submission and this average rate stayed the same even after including PD1's correct number.	15% average vaccacny rate for all CSBs for FY2020 - updated after Norfolk's submission and this average rate stayed the same even after including PD1's correct number.	Total vaccancies is 2,377 out of 36 CSBs - Average is 66 unfilled positions per CSB - These numbers reflect the change in PD1's numbers	21% average turnover rate for all CSBs in FY21 - updated after Norfolk's submission and this relefcts PF1's corected number	19% average turnover rate for all CSBs in FY20 and this relefcts PF1's corected number
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Calculations Below are from the Numbers Above (Hilary rounded up when putting in totals in above)

What was your CSB's average vacancy rate across all positions in FY2021 (July 1, 2020 - June 30, 2021)	What was your CSB's average vacancy rate across all positions in FY2020 (July 1, 2019 - June 30, 2020)	How many vacancies does your CSB currently have (point in time, at the time of this survey)?	What is the percentage of CSB staff that have turned over in FY2021 (July 1, 2020 - June 30, 2021)? (employee turnover rate is calculated by dividing the number of employees who left the company by the average number of employees in FY2021. This number is then multiplied by 100 to get a percentage)	Numbers in this column are from the column to the left. Took out the "unknown ones" and the decimal points to get an average.	What is the percentage of staff that have turned over in FY2020 (July 1, 2019 - June 30, 2020)? (employee turnover rate is calculated by dividing the number of employees who left the company by the average number of employees in FY2020. This number is then multiplied by 100 to get a percentage)	Numbers in this column are from the column from the left. Took out the "don't have one" and the decimal points.
12	9	109	17.12%	17	16.78%	17
26	23	32	6%	6	10%	10
36	26	20	27%	27	22%	22
21	17	41	Updated PD1# - 23.1%	23	21.00%	21
14	10	16	11.42%	11	10.00%	10
8	7	52	33%	33	27%	27
8	8	51	13.82%	14	14.80%	15
5	3	61	2.70%	3	20.50%	21
13	9	80	34.10%	34	23.93%	24
18	16	43	23.68%	24	17.16%	17
12	12	62	7.20%	7	9.95%	10
18	11	11	15%	15	13.50%	14
25	18	29	20.20%	20	24.60%	25
27	21	246	25.50%	26	17.40%	17
12	5	35	12.11%	12	4.14%	4
19	18	62	25.91%	26	25.91%	26
37	25	87	30%	30	28%	28
18	8	36	22.53%	23	8.57%	9
8	5	71	34%	34	33%	33
20	5	11	36.06%	36	19.16%	19
12	18	81	20%	20	24%	24
22	23	50	6%	6	11%	11
13	13	25	22.45%	22	23.15%	23
14	22	28	20.66%	21	21.43%	21
21	5	69	15%	15	14.20%	14
5	3	51	15%	15	19%	19
3	7	74	20.60%	21	14.90%	15
15	35	7	7.20%	7	5.60%	6
29	17	45	42%	42	27%	27
20	24	136	24.58%	25	14.08%	14

		12	18	81	20%	20		24%	24
		22	23	50	6%	6		11%	11
		13	13	25	22.45%	22		23.15%	23
		14	22	28	20.66%	21		21.43%	21
		21	5	69	15%	15		14.20%	14
		5	3	51	15%	15		19%	19
		3	7	74	20.60%	21		14.30%	15
		15	35	7	7.20%	7		5.60%	6
		29	17	45	42%	42		27%	27
		20	24	136	24.58%	25		14.08%	14
		29	33	72	29%	29		22%	22
		10	456	69	12.20%	12		13.10%	13
		33	divided by 31	30	unknown	21		34.80%	35
		583	equals 14.6	232	21.14%	23		22.06%	22
		divided by 33		133	don't have	700		don't have	16
		equals 17.6		120	22.95%	divided by 34		16.46%	651
				2377		equals 20.5			divided by 35
				divided by 36					equals 18.6
				equals 66					

RBHA Board Meeting
Development Report – September 7, 2021

Richmond Behavioral Health Foundation

YTD Income (minus grants) to RBHF: \$2320.55 (as of August 31, 2021)

YTD grants awarded: 0

YTD gifts-in-kind: 0

YTD Total Revenue: \$2320.55 (includes GIK values)

	Current Year (FY22)	Past Year (FY21)	2 years ago (FY20)
	Total Grants/Requests Submitted in FY21 (July 1, 2021 – June 30, 2022)	Total Grants/Requests Submitted in FY21 (July 1, 2020 – June 30, 2021)	Total Grants/Requests Submitted in FY20 (July 1, 2019 – June 30, 2020)
Number of Submitted Grants/Requests	4 Total: \$300,500	7 Total: \$108,820	2 carryover from FY19 (\$40,000) 10 (TOTAL: \$151,000)
Number of Funded Grants/Requests	-	3	7
Dollar Value of Awarded Grants/Requests	-	\$51,320	\$142,000
Number of Pending Grants/Requests	4	1	0
Dollar Value of Pending Grants/Requests	\$300,500	\$15,000	0
Number of Denied Grants/Requests/Postponed	-	3	2 - denied 3 – cancelled (COVID)
Dollar Value of Denied or Partially Funded Grants/Requests	-	\$57,500	\$59,000
Gifts in Kind - Monetary Value (Includes Value of Volunteer Hours and Value of donated items)	-	\$68,357.20	\$57,671.25
Volunteer Hours	-	1551	863

Update on Grants and Gifts: See attached chart

RBHA Board Meeting Development Report – September 7, 2021

Communications/Marketing:

- Mural Complete – Mural Video Complete – will push out video via email, social media, and website
 - Video to be used on-going with agency presentations, employee recruitment, employee onboarding

25th Anniversary Plans:

- Open Houses – We are revising plans for the first 2 Open Houses scheduled during calendar year 2021
 - North Campus Programs, SUD, and Prevention Programs – Will be outlined and promoted on social media platforms and website
 - 5th St./Cary St./RICH Clinic - TBD

Volunteer Projects:

- DIY Volunteer Projects scheduled for drop offs on:
 - October 21st, November 30th, December 8th 11am – 2pm
 - Hygiene Kits, Nourishment Kits, Cold Weather Item Kits (see attached)
- In-Person Volunteer Event via Altria and Hands On Greater Richmond (up to 10 volunteers)
 - Hygiene Kits for North Campus residents
 - November 10, 2021 in the gym at North Campus

Appeals:

- Planning in progress for end of year donor appeal

Fundraising Events:

- Beginning Wednesday, September 8, 2021:
 - Signed, matted prints of the building mural available – limited number
 - T-Shirts with mural design available for purchase through Bonfire

Monthly Mission Messages:

- July 2021 – Emergency Health Profile
- August 2021 – REVIVE Training (Narcan)

Homeless and Residential Services

PRESENTED BY KATIE CHLAN, LCSW,
PROGRAM MANAGER II, ADULT MENTAL
HEALTH RESIDENTIAL SERVICES AND
SPECIAL PROJECTS
SEPTEMBER 7, 2021



1

Quick Overview (current)

- Total of 13 Direct Service Staff, and one Program Manager
- Total Combined Budget (FY 21) was over \$2,467,763
- Served a total of 421 Households during FY 2021
- Primary Focus – to end homelessness for the households we serve

2

Residential Support for Homeless Families

- Connects families who are in area emergency shelters with Public Housing through RRIIA (through a "set-aside" agreement)
- Operates two Transitional Apartments through a partnership agreement with Boaz and Ruth
- Staffed by one Housing Case Manager
- Funded primarily through CDBG dollars (federal funds passed down through the City of Richmond)
- Projected to serve 100 families for FY 21

3

CDBG – Core Activities

- Collaborates with emergency shelter staff (YWCA, Home Again, Housing Families First, CARITAS) to identify eligible families
- Assists families with completing application process through RRIIA
- Works with family to develop budget, connect all family members to appropriate services
- Provides up to 90 days of aftercare once families are housed
- Works with Boaz and Ruth to provide transitional housing to families who need a bit extra time

4

Projects for Assistance in Transition from Homelessness (PATH)

- Provides outreach and engagement to single individuals with a serious mental illness who are literally homeless
- Staffed by two full time Outreach Workers and one part time Peer Specialist
- Served a total of 158 individuals during FY 21
- Funded primarily through Federal SAMHSA dollars passed through DBHDS and City of Richmond Affordable Housing Trust Fund dollars. The program has also have secured additional funding related to pandemic needs
- This program serves as the connection point between RBHA Homeless Services and the Greater Richmond Continuum of Care

5

PATH – Core Activities

Provide	Respond	Build	Refer and connect	Collaborate
Provide daily outreach to known locations where people are living outside	Respond to requests from the community	Build relationships with those they are outreaching (this may take years)	Refer and connect to appropriate services when the person is ready	Collaborate daily with other outreach providers and Coordinated Entry (the Homeless Service System's "front door")

6

<p>Permanent Supportive Housing (PSH)</p>	<ul style="list-style-type: none">• Newest addition – Started 10/01/16 with 40 spots – As of 07/01/21, the program has grown to 188 spots• 3 Funding Sources<ul style="list-style-type: none">• Pregnant and Parenting Women (PPW)<ul style="list-style-type: none">• Staffed by 1 full time Housing Specialist, and 1 full time Case Manager (within the SUD division)• Funded through DBHDS• Served a total of 21 families in FY 2021
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<p>PSH Continued</p>	<ul style="list-style-type: none">• HUD<ul style="list-style-type: none">• Staffed by one PT Case Manager and one PT Housing Specialist• Funding comes through Department of Housing and Urban Development (HUD) and is awarded to the Continuum of Care• Served 16 individuals in FY 2021• DBHDS – Singles<ul style="list-style-type: none">• Staffed by two and a half full time Housing Specialists, one full time Case Manager, 1.5 full time Peer Specialists, one full time Program Assistant• Funding is awarded directly from DBHDS• Served 126 individuals in FY 2021
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PSH Expansion

- Will add an additional 40 spots for single individuals
- Will add an additional 9 staff
 - 3 Housing Specialists
 - Rental Assistance Administrator
 - 3 Case Managers (including a CTI CM)
 - Peer Bridger
 - PSH Program Supervisor
- Total Expansion funding – \$1,030,060

9

- **Housing Specialists**
 - Identify potential landlords and build relationships
 - Conduct HQS (Housing Quality Standards) inspections
 - Certify Fair Market Rent (FMR) and Rent Reasonableness for all properties
 - Calculate Rents
 - Respond to landlord concerns
 - Collaborate with case managers and other service providers to assist with housing stability

PSH – Core Activities

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- **Case Managers**

- Function in essentially the same way as standard Adult Mental Health Case Managers do, but with smaller caseloads, and expectation that majority of services be conducted in the person's home/the community
- Address clinical barriers to participants obtaining and maintaining permanent housing
- Respond to landlord concerns
- Collaborate with housing specialists and other service providers to assist with housing stability

PSH – Core
Activities

11

- **Peer Specialists**

- Offer unique perspective of someone who has lived experience to program participants
- Will have an increasingly prominent role for those exiting state hospitals
- Collaborate with housing specialists and case managers and other service providers to assist with housing stability

PSH – Core
Activities

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City of Richmond

- Funding (CDBG, Affordable Housing Trust Fund)
- Collaboration regarding outreach
- Homelessness Advisory Council

RBHF

- Partner for fundraising (foundations, private)
- Donation of goods
- Marketing and public awareness

Key Community Partners

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Key Community Partners

Continuum of Care (CoC) Pre-pandemic	CoC (current)
<ul style="list-style-type: none">• RBHA is an active member of the CoC• Board of Directors (Shenee McCray)• Data Review Committee, Policy Committee, Quality Improvement Committee, Coordinated Entry Committee)	<ul style="list-style-type: none">• All pre-pandemic activities• Weekly client-level case conferencing• Crisis planning and a more focused response

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Current Challenges

- Landlords/Housing Stock/Rental Market
- Staff Turnover and Staff Morale
- Lack of community-based services and resources

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Success Story

MRS. NORTH

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