

## COLONIAL BEHAVIORAL HEALTH BOARD MEETING

**DATE: June 6, 2023**

**PLACE: Colonial Behavioral Health, 473 McLaws Circle, Williamsburg, VA 23185**

**CALL TO ORDER: 3:59 p.m.**

**BOARD MEMBERS PRESENT:**

Dr. Al Brassel- York County  
 Ms. Sheri Newcomb – York County  
 Mr. Ryan Ashe- James City County  
 Ms. Hazel Braxton- Williamsburg  
 Mr. Reynaldo Carpio- York County  
 Mr. John Collins- York County  
 Ms. Wendy Evans- Williamsburg  
 Ms. Denise Kirschbaum- James City County  
 Mr. Steven Miller- York County  
 Ms. Kristen Nelson- York County  
 Ms. Erin Otis- James City County  
 Col. Roy Witham – James City County

**BOARD MEMBERS ABSENT:**

Dr. Dawn Ide-Poquoson  
 Ms. Donyale Wells- James City County

**PUBLIC COMMENT:**

None; no guests were in attendance.

**STAFF PRESENT:**

Mr. David Coe  
 Ms. Linda Butler  
 Ms. Kyra Cook  
 Ms. Katie Leuci  
 Mr. Dan Longo  
 Ms. Marsha Obremski  
 Ms. Nancy Parsons  
 Ms. Chaenn Thomas  
 Ms. Ashleigh Cooke

**GUESTS:**

None

**CONSENT CALENDAR:**

The Consent Calendar was presented for approval of the following minutes:

- April 26, 2023, Services & Evaluation Committee Meeting
- May 2, 2023 Board of Directors Meeting
- May 16, 2023 Executive Committee Meeting
- May 16, 2023, Administration Committee Meeting

Ms. Ryan Ashe motioned to approve all the meeting minutes listed above as presented. The motion was seconded by Mr. Ryan Ashe and passed unanimously.

**ANNOUNCEMENTS:**

- **Board Planning Day**
  - Full-day session has been set for August 25, 2023, at the Stryker Center, 412 North Boundary Street, Williamsburg, VA 23185. Details to follow throughout the summer.

**ACTION ITEM(S):****A1: FY 24-25 Performance Contract Approval.**

- The three-page summary of the Performance Contract provided by the Department of Behavioral Health and Developmental Services (DBHDS) was presented, along with highlighted revisions.
- Ms. Wendy Evans motioned that the FYs 2024-2025 Performance Contract between Colonial Behavioral Health and the Commonwealth of Virginia/DBHDS be approved. Ms. Ryan Ashe seconded the motion. The motion was unanimously approved.

**A2: Nominating Committee Proposed Slate of Officers**

- Ms. Wendy Evans presented the proposed slate of officers for Fiscal Year 2024:
  - **Chair:** Sheri Newcomb (YC)
  - **Vice-Chair:** Ryan Ashe (JCC)
  - **Secretary:** Hazel Braxton (WB)
  - **Treasurer:** John Collins (YC)
  - **Member at Large:** Erin Otis (JCC)
- Per Ms. Evans, Poquoson is not represented in the recommended slate.
- There was a motion from the Nominating Committee that the proposed Fiscal Year 2024 Slate of Officers be elected by the CBH Board of Directors; the motion was unanimously approved.

**A3: CBH Operations Continuation Plan- Summer 2023**

- The CBH Director provided the Board with an Operations Continuation Plan ahead of his scheduled international travel beginning July 14, 2023. The plan was presented and discussed. Mr. John Collins suggested a contingency plan beyond Summer 2023. The Board agreed they would look into that at a later time.
- Mr. Roy Witham motioned to approve the Summer 2023 Operations Continuation Plan for the period beginning Thursday, July 14, 2023, through Wednesday, August 2, 2023. The temporary authority granted under this Plan shall be limited to actions that must be addressed during that time period. Mr. John Collins seconded the motion. The motion was unanimously approved.

**A4: Termination of CBH COVID-19 Vaccine Mandate**

- Background information pertaining to the current COVID-19 Vaccine Mandate was reviewed, along with two options as to how we should proceed with the existing policy. Discussion.
- The Executive Committee motioned that the CBH Board Rescind the CBH COVID-19 Vaccination Policy immediately but continue to support COVID-10 mitigation effects in a manner consistent with endemic diseases, including compliance with local, state, and federal authorities. No second required; all approved.

**Ms. Hazel Braxton motion for closed session at 4:30 p.m., to discuss Mr. Coe's Annual Performance Evaluation. Ms. Denise Kirschbaum seconded the motion. All staff exited to meeting.**

**Closed session ended at 4:50 p.m. Mr. David Coe, Ms. Chaenn Thomas, and Ms. Ashleigh Cooke returned to the meeting.**

Mr. Ryan Ashe motioned that Mr. Coe's contract be extended. Ms. Hazel Braxton seconded the motion. All approved.

**EXECUTIVE DIRECTOR'S REPORT:**

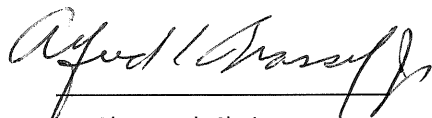

The Executive Directors Report was provided in writing by Mr. David Coe and distributed to Board Members. Discussion.

The following items were also presented in addition to written report:

- Ms. Chaenn Thomas provided a written recruitment update.
- Mr. David Coe reported that the decision to sell the group home will only be made unless we cannot find other community use consistent with our mission.

**ADJOURNMENT:**

Ms. Hazel Braxton made a motion to adjourn, seconded by Ms. Denise Kirschbaum. The motion passed unanimously. The meeting adjourned at 5:17 p.m. The next meeting is scheduled for 2:00 p.m. on Friday, August 25<sup>th</sup>.

  
Dr. Al Brassel, Chairman  
Hazel Braxton, Secretary

## Colonial Behavioral Health Board of Directors Meeting

June 6, 2023, 4:00 P.M.

### AGENDA

1. Welcome and Call to Order
2. Roll Call
3. Public Comment
4. Consent Calendar:
  - a. Please consider approval of the following meeting minutes:
    - i. April 26, 2023, Services & Evaluation Committee Meeting
    - ii. May 2, 2023, Board of Directors Meeting
    - iii. May 16, 2023, Executive Committee Meeting
    - iv. May 16, 2023, Administration Committee Meeting
5. Reminder:
  - a. Board Planning Day
    - i. Friday, 8/25/2023
    - ii. Stryker Center, City of Williamsburg
    - iii. Details to follow through the summer.
6. Action Items:
  - a. A-1: FYs 2024-2025 Performance Contract Approval
  - b. A-2: FY 2024 Board Officer Elections
  - c. A-3: Summer 2023 CBH Operations
  - d. A-4: CBH Vaccine Mandate Policy Termination
7. Executive Director's Report
8. CLOSED SESSION
  - a. Review of Executive Director Performance
  - b. Consideration of FY 2024 Executive Director Contract
9. Return to Open Session and Action on Closed Session Items as Needed
10. Adjournment



## Meeting Minutes

Minutes of: Services and Evaluation Committee Date: April 26, 2023
---

**Present:** Al Brassel, John Collins, Denise Kirschbaum, Steven Miller, Roy Witham, Kyra, Cook, Linda Butler

**Absent:** n/a

---

1. Welcome and Call to Order

The meeting was called to order at 4:00 pm

2. Program Presentation

- Aileen Early and Belinda Norfleet presented information regarding People's Place services.

3. Future Presentation Schedule

- May – DD Group Home and DD Day Services
- June – AOP or Children's Services/GWAC requested

4. Adjournment

The meeting was adjourned at 4:45p.m.

---

Submitted by: Linda Butler

### Next Meeting

Date: 05/24/2023

Time: 4:00pm

Location: 473 McLaw's

Evaluation Services Committee  
CBH Service Provider Presentations

**Purpose:** To assist Board members in responding when asked how CBH services are benefitting the community

**Date of Presentation:** 4/26/2023

**Name of Service:** Psychosocial Rehabilitation/People's Place

**Nature & Scope of Service:** The Psychosocial Rehabilitation Services program/People's Place serves individuals with serious mental illness (SMI). A range of structured activities and supports are offered that are designed to assist members to reach their personal goals and objectives. Services are planned individually using a person-centered approach which engages the individual, the family (when applicable), and the provider team. The program assists participants to develop skills in the areas of symptom management, wellness, independent living, social skills development, and community integration. The overall goal is to empower participants to attain and maintain the highest quality of life possible in the community. The program provides services to individuals for up to five days a week. Groups on a variety of topics, opportunities to participate in work units, and community outings are provided. Currently there are 32 members and another 4 scheduled for intakes. 28 of the members have Medicaid funding. 1 Member receives Discharge Assistance Plan (DAP) funds and 3 members do not have Medicaid and are self-pay.

Criteria	Self-Rating	Tangible (measured) Indicators	Intangible (qualitative) Indicators
1. How effective are your services at accomplishing their stated goals?	2	Attendance is back to pre-COVID levels and growth is indicated. Individuals state satisfaction with services and desire to attend more frequently. Participation in specific groups has increased from previous years. Nearly a third of individuals at PP are either working, going to school, or are actively preparing for work with the Department of Rehabilitative Services. No one required psychiatric hospitalization in the past six months.	-Positive Indicators: During the pandemic PSR acted as a vital link for individuals. Many felt isolated and out of touch and found great comfort in the routine contact with their specialists. Improved quality of life of individuals served, as evidenced by increased engagement, improved mood, improved hygiene, increased self-control, and greater independence. -Negative Indicators: Growth of the program continues to be limited due to lack of staff. Also, unable to expand on activities, particularly those in the community due to lack of staffing. With additional staff more diversified activities and one to one consult could take place. Manager's time would also be more

			efficiently utilized to create new activities, research ideas, and to oversee overall quality of the program.
2. How efficient are your services (cost relative to scope of services provided)?	2	<p>The reimbursement rate is low with a full day of services generating approximately \$56 in revenue. Costs associated with operating the program, however, include vehicles, building maintenance, food and funds for recreational supplies/activities, and staff salaries.</p> <p>COVID also dramatically impacted the billing structure due to severely depleting blocks of time needed to bill. Census numbers were greatly affected initially which impacted billing due to the need for continued social distancing. Numbers are finally beginning to reach pre-COVID status.</p>	<p>The reimbursement rate is not comparable to the large amount of planning, implementation, and clinical and physical oversight that the program needs to run.</p> <p>Currently, PP is unable to increase the census while maintaining the integrity of the program with only two full time direct service staff. With the full time and STEP-VA part time positions filled, the program number could potentially increase by nearly a third which would dramatically increase revenue.</p>
3. How relevant are your services (nature of services relative to current need)?	3	<p>The skills taught at PP through groups provide awareness about symptom management, health, communication, and socialization. Units such as the Canteen and Cooking teach basic, frequently hands on skills that can be carried over into individuals' daily lives. Recently a new grant was awarded that will provide for the opportunity for individuals to learn basic computer skills. Special activities focus on relevant topics providing an array of possibilities for individuals to discover interests that they may not have realized they had.</p>	<p>We utilize person-centered planning by focusing on the wants and needs of each individual.</p> <p>The skills that are presented can be used at home and at work which can improve the quality of the lives of the individuals who attend. Having skills that are presented and practiced at PP promotes consistency in other areas of life and increases confidence and self-esteem.</p>
4. How sufficient are your services (scope of services relative to current demand)?	3	<p>Most individuals have at least one of the following 3 goals: working, making friends, living independently. The groups, units, and individualized services provided address all of these. Referrals continue to indicate interest and continue to cite at least one of these</p>	<p>As stated previously, the skills presented and practiced at PP, when used consistently by individuals in their daily lives, empowers them to be more independent and to feel more confident in their endeavors for employment, independent living, and interpersonal relationships.</p>

		areas as the reason for requesting the referral.	
5. How satisfied are consumers of your services?	3	Reportedly very satisfied as indicated in documentation. Most Individuals returned after COVID and were eager to resume in-person services as is evidenced by the numbers. Also, more recent referrals are from younger people who want to "get out and do things"; while other individuals continue to participate even after 5 or more years.	Frequently, when activities are missed on a specific day, the staff get requests for a make-up day because individuals don't want to miss anything. Staff receive positive feedback after activities and groups as well as comments made to Case Managers and other providers. Case managers and other providers at CBH recognize and acknowledge the value of the program to the individuals they serve.
Self-Rating Codes : 3 = Highly; 2=Moderately; 1=Minimally			

Obstacles that threaten optimal service provision (continue on back as necessary):

-Lack of staff presents obstacles by limiting flexibilities in service provision, and census growth, and therefore limits increased revenue as well. Currently, 2 positions posted have received no applications in 2023.

-Qualifications for PSR positions: The Qualified Mental Health designation limits the pool of qualified applicants substantially due to its stringent regulatory status demanding specific degrees/amount of experience/requirement of oversight by LMHPs on a clinical level.

-Billing structure combined with transportation issues: The services are billed per 2 consecutive hours (one unit), 4.99 hours is (2 units). Due to late arrivals/early departures from the program billing is directly affected. Also, interruptions for appointments with other providers can be a strain on potential revenue.

-Competition from Private providers: There are at least two private providers that are operating in Newport News. They offer inducements such as cigarettes or free coffee to their participants to promote sustained attendance.

-Regulatory requirements for documentation put additional strain on staff especially when providing coverage is already difficult with the current staffing limitations.

## **Overview of Psychosocial Rehabilitation Services:**

**People's Place serves multiple individuals for up to five days a week.**

- Groups are provided on a variety of topics, with opportunities to participate in work units and community outings.
- Clients attend up to 5 days a week for at least 2 hours a day. Hours are 8:30 to 3:30, however most clients leave between 12:30 and 1:30.
- Approximately 18 clients attend each day.
- Age range: 18\* and over. \*If individual is no longer in high school.

**Number of Clients and break down of clients:**

- People's Place currently serves 32 members. 28 of the members currently have Medicaid funding. 1 Member receives DAP funds and 3 members do not have Medicaid and are self-pay. We are currently accepting referrals and have 4 in process.
- NGRI Status: We currently have 3 individuals who have Conditional Release Plans and 3 others who have been released from this status but have opted to continue at People's Place to maintain the connections they have made.

**Number of staff and staff qualifications:**

- PP has a total of 2 full time direct service staff but is funded for 3 full time staff and 1 part time staff
- Staff are supervised by the Psychosocial Services Manager, Psychosocial Services Coordinator and Director of Behavioral Services
- All positions are Qualified Mental Health Professionals which is a one-time certification process completed at the time of hire.
- Specific clinical supervision required by an LMHP.

**Eligibility criteria:**

Must meet at least 2 of the following:

- At risk of psychiatric hospitalization, homelessness, or isolation from social supports.
- Health or safety is jeopardized due to deficits in ADLs
- Repeated interventions documented by the mental health, social services, or judicial system are or have been necessary.
- Unable to recognize personal danger or recognize significantly inappropriate social behavior.

In addition, the individual must also meet one of the following:

- Have experienced long-term or repeated psychiatric hospitalizations; or
- Experience difficulty in activities of daily living skills and interpersonal skills; or
- Have a limited or non-existent support system; or
- Be unable to function in the community without intensive intervention; or
- Require long-term services to be maintained in the community.

# MAY "WELLNESS CHALLENGE"

## 2023

### PEOPLE'S PLACE GROUPS

MON	TUE	WED	THUR	FRI
1 (Physical Fitness & Nutrition) 10:00- Current health Trends/ Fad Diets- Leslie 11:00-Smoking/Five Steps to Intervention- Jen	2 10:00- Benefits of Quitting Smoking and how to Quit- Jen 11:00- How having good rela- tionship benefit your physical health- Leslie	3 10:00- Healthy Tips for Eating- Lisa 11:00- Positive Body Image- Jen	4 10:00 a.m.- 5 Senses Ex- ercise (Mindfulness)- Jen 11:00- Portion Control- Leslie	5 10:00- Chair Exercises- Jen 11:00 a.m.- Benefits of Water- Leslie
8 (Emotional)  10:00- Emotional Charades- Leslie 11:00- Healthy vs Unhealthy Coping Skills- Jen	9  10:00- Sleep Quiz- Jen 11:00- Communicating Feelings- Leslie	10  10:00- What I love About- My Body- Leslie 11:00- Self Care-Setting Healthy Boundaries-Millie	11  10:00- Anger Manage- ment Guide: Best Tech- niques and Exercise- Jen 11:00- Self Love Bingo- Belinda	12  10:00- Development of As- sertiveness Skills not Pas- sive or Aggressive Ones-Jen 11:00- Foods that Improve Your Mood- Leslie
15 (Social Community & Environmental) 10:00- Good Friend vs. Bad- Leslie 11:00- Social Cues Worksheet- Belinda	16 10:00- How Connecting to Nature helps with your mental health- Jen 11:00- Roll The Dice- Belinda	17 10:00 a.m.- What we have in common with others- Leslie 11:00- Social Activity- Belinda	18 10:00- What Makes a Perfect Day-Leslie 11:00- Wellness Bingo- Jen	19 10:00- Social Activity- Leslie (M&M's) 11:00 a.m.- Wellness Hangman- Leslie
22 Occupational  10:00- 7 Ways to Reduce Stress- Jen 11:00- Resources for Taking a Class- Leslie	23  10:00- How to Eat Healthy for Less/Price Is Right- Leslie 11:00- Finding A Hobby- Belinda	24  10:00- Work, Do I need to Work - Jen 11:00- Budget/Make a Budget- Leslie	25  10:00- Volunteering- Jen 11:00- Exploring a New Hobby- Belinda	26  10:00- 12noon Exploring Hobbies (all staff)
29  Memorial Day Holiday Program Closed	30 Spiritual Values & Ethics 10:00 a.m.- Discussion on Ethics- Belinda 11:30 a.m.- Walking Group	31 10:00- Guided Meditation- Leslie 11:00 a.m.- Wellness Walk- All Staff	Inclement Weather: Call (757) 220-3200 Or scroll the bottom of the local television channels	**Bring lunch each day**  Microwave available at 11:30 a.m. daily

People's Place opens at 8:30 a.m. Monday-Friday (757) 253-4382/Member Phone (757) 253-4386

# MAY 2023 / WELLNESS CHALLENGE MONTH

## Exercise Offerings/Additional Information

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
1 <i>Walking—12:30 p.m.</i>	2 <i>Walking—12:30 p.m.</i>	3 <i>Walking—12:30 p.m.</i>	4 <i>Walking—12:30 p.m.</i>	5	6
8 <i>Walking—12:30 p.m.</i>	9 <i>Walking—12:30 p.m.</i>	10 <i>Walking—12:30 p.m.</i>	11 <i>Walking—12:30 p.m.</i>	12 <i>Walking—12:30 p.m.</i>	13
15 <i>Walking—12:30 p.m.</i>	16 <i>Walking—12:30 p.m.</i>	17 <i>Walking—12:30 p.m.</i>	18 <i>Walking—12:30 p.m.</i>	19 <i>Walking—12:30 p.m.</i>	20
22 <i>Walking—12:30 p.m.</i>	23 <i>Walking—12:30 p.m.</i>	24 <i>Walking—12:30 p.m.</i>	25 <i>Walking—12:30 p.m.</i>	26 <i>Walking—12:30 p.m.</i>	27
29 <b>Memorial Day Holiday Program Closed</b>	30 <i>Walking—12:30 p.m.</i>	31 <i>Walking—12:30 p.m.</i>		People's Place: (757-253-4382 <b>Member Line:</b> (757) 253-4386	

# Monthly Wellness Challenge *May 2023*

Name: \_\_\_\_\_

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	31			

**\*\* Goals each day should be achievable \*\***

**\*\*Place a Check for each day you accomplished your goal\*\***



## COLONIAL BEHAVIORAL HEALTH BOARD MEETING

**DATE:** May 2, 2023

**PLACE:** Colonial Behavioral Health, 473 McLaws Circle, Williamsburg, VA 23185

**CALL TO ORDER:** 3:59 p.m.

**BOARD MEMBERS PRESENT:**

Dr. Al Brassel- York County  
Ms. Sheri Newcomb – York County  
Ms. Hazel Braxton- Williamsburg  
Mr. Reynaldo Carpio- York County  
Mr. John Collins- York County  
Ms. Wendy Evans- Williamsburg  
Ms. Denise Kirschbaum- James City County  
Mr. Steven Miller- York County  
Ms. Kristen Nelson- York County  
Ms. Donyale Wells- James City County  
Col. Roy Witham – James City County

**BOARD MEMBERS ABSENT:**

Mr. Ryan Ashe- James City County  
Dr. Dawn Ide-Poquoson  
Ms. Erin Otis- James City County

**STAFF PRESENT:**

Mr. David Coe  
Ms. Linda Butler  
Ms. Kyra Cook  
Mr. Dan Longo  
Ms. Marsha Obremski  
Ms. Nancy Parsons  
Ms. Chaenn Thomas  
Ms. Ashleigh Cooke

**GUESTS:**

Ms. Pat Evers- League of  
Women Voters

**PUBLIC COMMENT:**

Ms. Pat Evers brought voter fact brochures and distributed to members.

**CONSENT CALENDAR:**

The Consent Calendar was presented for approval of the following minutes:

- March 7, 2023 Board of Directors Meeting
- March 15, 2023 Public Awareness Committee Meeting
- March 21, 2023 Executive Committee Meeting
- March 21, 2023 Administration Committee Meeting
- March 22, 2023 Services & Evaluation Committee Meeting
- April 18, 2023 Executive Committee Meeting
- April 18, 2023 Administration Committee Meeting
- April 19, 2023 Public Awareness Committee Meeting

Ms. Hazel Braxton motioned to approve all of the meeting minutes listed above as presented. The motion was seconded by Mr. John Collins and passed unanimously.

#### **PRESENTATIONS:**

- **Annual Report Data-** *Mr. Reynaldo Carpio*
- **Special Projects Initiatives-** *Ms. Kyra Cook*

#### **ANNOUNCEMENTS:**

- **Board Planning Day**
  - Full-day session has been set for August 25, 2023. Location TBD.
- **Slate of Board Officers**
  - The Following slate was presented and will be voted on at the June BOD meeting:
    - **Chair:** Sheri Newcomb (YC)
    - **Vice-Chair:** Ryan Ashe (JCC)
    - **Secretary:** Hazel Braxton (WB)
    - **Treasurer:** John Collins (YC)
    - **Member at Large:** Erin Otis (JCC)
- **David Coe's Performance Evaluation**
  - Mr. Coe's performance evaluation was distributed to all members; return envelope included.

#### **ACTION ITEM(S):**

##### **A1: Proposed FY 2024 Budget**

- Ms. Parsons presented the proposed budget. Discussion.
- There was a motion from the administration committee that the proposed Interim Colonial Behavioral Health FY 2024 Operating Budget and Capital Improvement Plan be approved. The motion was unanimously approved.

##### **A2: Candidates' Forum**

- The Executive Committee recommended that the Board agree to sponsor a post-primary forum for 2023 General Assembly candidates prior to the 11/7/2023 election, with participation in the forum limited to candidates (with names on the official ballot) seeking the following seats:
  - 24<sup>th</sup> Senate District
  - 26<sup>th</sup> Senate District
  - 69<sup>th</sup> House District
  - 71<sup>st</sup> House District
  - 86<sup>th</sup> House District
- Discussion. Motion Withdrawn.

#### **EXECUTIVE DIRECTOR'S REPORT:**

The Executive Directors Report was provided in writing by Mr. David Coe and distributed to Board Members. Discussion.

The following items were also presented in addition to written report:

- Ms. Nancy Parsons presented the financials as of 3/31/2023. Discussion.
- Ms. Chaenn Thomas provided a recruitment update. Per Ms. Thomas, there were 23 Vacancies as of 4/17/2023.

#### **ADJOURNMENT:**

Ms. Wendy Evans made a motion to adjourn, seconded by Ms. Donyale Wells. The motion passed unanimously. The meeting adjourned at 5:32 p.m. The next meeting is scheduled for 4:00 p.m. on June 6<sup>th</sup>.



Colonial Behavioral Health: Wellness, Support & Recovery Services

## Meeting Minutes

<p>Minutes of : Executive Committee Date: 5/16/2023</p>
---

Present: Dr. Alfred Brassel, Ryan Ashe, Hazel Braxton, John Collins, and Wendy Evans

Staff Present: David Coe, Nancy Parsons, Chaenn Thomas, and Ashleigh Cooke

Absent: Sheri Newcomb

### 1. Call to Order

- The meeting was called to order at 3:59 p.m. by Dr. Brassel.

### 2. New Business

- Closed Session for June BOD Meeting:
  - Dr. Brassel would like to add a closed session to June's agenda to discuss David Coe's performance evaluation.
- Summer Committee Meetings:
  - Dr. Brassel would like to review the summer committee meeting schedule at the upcoming June BOD meeting.
- Nominating Committee Elections:
  - Protocol Reviewed. Discussion.
- Vaccine Mandate:
  - Current Vaccine Policy Reviewed. Discussed the end of CMS' vaccine mandate and how this impacts our current policy.
- CBH Operations-July/Early August:
  - David will be out of the country from 7/14 – 8/2. He has designated the following individuals to handle matters outlined below in his absence:
    - Operations/Contracts- Marsha Obremski
    - Finance- Nancy Parsons
    - Human Resources- Chaenn Thomas

### 3. Old Business

- Candidates Forum:
  - The committee decided they will not move forward with this idea.
- Annual Board Planning Day- August 25<sup>th</sup>:
  - The meeting will take place at the Stryker Center. Because we cannot enter the building until 9:00 a.m., our start time will be 9:30 a.m.
  - We will need to culminate with a BOD meeting, which will begin at 2:00 p.m.

### 4. Conclusions, Recommendations, Actions

- Mr. Collins motioned that the CBH Board rescind the CBH COVID-19 Vaccination Policy immediately but continue to support COVID-19 mitigation efforts in a manner consistent with endemic diseases, including compliance with local, state, and federal authorities. Ryan Ashe seconded the motion.
- Dr. Alfred Brassel motioned that all employees comply with the standard vaccine recommendations from the Virginia Department of Health. John Collins seconded the motion.
- The committee recommends that we move forward with hosting a Board of Directors Planning Day on August 25, 2023. Location to be determined.

### 5. Adjournment

- Ms. Hazel Braxton motioned to adjourn the meeting at 4:20 p.m.; Mr. Ashe seconded the motion.
- 

Submitted by: Ashleigh Cooke

**Next Meeting**

Date: TBD

Time:

Location:



## Meeting Minutes

Minutes of : Administration Committee Date: 5/16/2023
--

Present: Dr. Alfred Brassel, Ryan Ashe, Hazel Braxton, John Collins, and Wendy Evans

Staff Present: David Coe, Nancy Parsons, Chaenn Thomas, and Ashleigh Cooke

Absent: Sheri Newcomb

---

1. Call to Order

- The meeting was called to order at 4:21 p.m. by Mr. Ryan Ashe.

2. Financial Report:

- YTD Revenues and Expenditures as of 4/30/2023 reviewed by Ms. Parsons.

3. FY 2024/2025 Performance Contract Amendment:

- Ms. Parsons presented an abbreviated version of the performance contract for review and discussion.

4. Recruitment Update:

- Ms. Thomas presented the recruitment overview, reporting there are 25 Vacancies as of 5/16/2023.

5. Conclusions, Recommendations, Actions

- Dr. Brassel motioned that the FY 2024/2025 Performance Contract between Colonial Behavioral Health and the Department of Behavioral Health and Developmental Services be approved. Mr. Collins seconded the motion.
- Dr. Brassel recommended that the BOD look at the Bylaws to review the role of the Administration Committee to determine if it can be assumed by the Executive Committee.

6. Adjournment

- Mr. Collins motioned to adjourn the meeting at 4:33 p.m.; Dr. Brassel seconded the motion.
- 

Submitted by: Ashleigh Cooke

**Next Meeting**

Date: TBD

Time:

Location:

## **FYs 2024-2025 Performance Contract Approval**

### **Background:**

The Commonwealth requires the execution of a Performance Contract as the standardized vehicle through which all state and federal funding is provided to CSBs. It will align with our Operating Budget (once all state funding notices have been received), and outlines service delivery/output expectations as well as CSB reporting requirements. Without an approved and executed Performance Contract, the Commonwealth of Virginia does not have a legal pathway to provide funding to CSBs, including CBH. This contract covers the fiscal years beginning July 1, 2023, and ending June 30, 2025.

A VACSB Committee negotiates changes in the Contract each year prior to dissemination. Individual CSBs have not been granted the right to negotiate terms unilaterally; therefore, approval of the Contract is required to maintain operations in the future. Failure to do essentially closes the doors of the CSB.

The Performance Contract must be approved by local governments every biennium. This year marks the first year of the biennium, when the Contract is formally adopted; therefore, this Contract revision does require local government approval. In the first year of each biennium, contracts not approved by local governments by September 1 are still be deemed to be approved by the Commonwealth of Virginia.

The approved FY 2024 CBH Budget will serve as the financial basis for this 265-page contract/appendix combination. The terms of the Contract have been negotiated at the statewide level and are ready for approval.

Revisions to this Contract primarily consist of:

- Changes to monthly CSB invoice dates and revisions to language to compliance with current confidentiality regulations (HIPAA, PHI and BAA).
- Exhibit B: Updates to Continuous Quality Improvement (CQI) Process and CSB Performance Measures.
- Changes to Federal Grants and Federal Grant Requirements; and
- Changes in process for new funds and services to reduce administrative processes related to Contract management during the fiscal year.

Additional details are provided in the DBHDS cover letter attached to this Summary.

### **Recommended Motion:**

That the FYs 2024-2025 Performance Contract between Colonial Behavioral Health and the Commonwealth of Virginia/DBHDS be approved.



# COMMONWEALTH of VIRGINIA

NELSON SMITH  
COMMISSIONER

DEPARTMENT OF  
BEHAVIORAL HEALTH AND DEVELOPMENTAL SERVICES

Post Office Box 1797  
Richmond, Virginia 23218-1797

Telephone (804) 786-3921  
Fax (804) 371-6638  
[www.dbhds.virginia.gov](http://www.dbhds.virginia.gov)

April 3, 2023

## RE: FY 2024-2025 Community Services Performance Contract

Dear CSB Executive Directors,

The FY24-25 Community Services Performance Contract (PC) and supplemental documents, effective July 1, 2023, will be sent by April 4, 2023, through our DocuSign process for your review, posting for public comment and execution. Please keep in mind that the Department cannot provide any state-controlled funds after September 30th if the contract has not been signed. It is important for the smooth continuity of the process to have signed performance contracts returned to the Department as soon as practicable.

The performance contract is a transactional agreement between the Department and the Community Services Boards and Behavioral Health Authority community partners. Changes to this agreement may be made periodically to improve the business relationship, funding and delivery of program services for better alignment with the strategic initiatives of the Commonwealth. The Office of Management Services (OMS) would like to thank you all for working with us through this review process. Craig Camidge led OMS through some exciting and much needed collaborative work with the VACSB Policy/Admin Committee chaired by Phil Caldwell. The members of the VACSB Policy/Admin Committee are elected as the decision-making body for PC administration by the Community Services Boards and the OMS serves as the PC administrator and liaison between the Department and the VACSB Policy/Admin Committee.

We started this journey in July of last year and met every other week without fail for 2 hours to have some thoughtful conversations around needed and desired changes within the PC. Most of the work done by this group focused on the general terms and conditions of the PC, Addendum I: Administrative Requirements Processes and Procedures, and Exhibit B Continuous Quality Improvement (CQI). Other documents were discussed such as Addendum II: Partnership Agreement and Addendum III: Core Services Taxonomy but a decision was made that these documents needed input beyond the scope of this group. OMS also worked internally with the various offices responsible for certain sections of the PC to address any required changes, revisions for clarity, and remove any outdated or redundant information from certain PC documents.

We have now finalized the PC for FY 24-25. We encourage you take the time to familiarize yourself with all these documents to understand what is required of the CSBs but we would like to bring your attention to certain changes for this review period.

### 1. FY2024 and 2025 Community Services Performance Contract

- a. **Section 9 Billing and Payment Terms and Conditions**, the CSB invoice due date has been updated from the 10<sup>th</sup> to the 20<sup>th</sup> of the following month by the Department's Fiscal office.
  - b. **Section 13 Compliance with Laws** was review and revised by the Office of Attorney General and the Department's Chief Information Security Officer and the following language was revised for compliance with current law: HIPPA, PHI, and BAA.
2. **Exhibit B: Continuous Quality Improvement (CQI) Process and CSB Performance Measures** – Revisions were made to align with decisions made through collaboration between the Department and the Q&O Committee, DMC, STAC and VACSB Policy/Admin Committee. This entire exhibit was revised to remove unnecessary language, provide clarity and move other process and procedure type information to a technical manual that will be provided by the Department. The following are key material changes:
  - a. This version of Exhibit B will reflect performance measure expectations only related to behavioral health and not DD. The Department will need to do some work internally to decide the best path forward to incorporate DD performance measures in the future.
  - b. **Section II Benchmarks** now provides a link to the Department's Behavioral Health Measure Development and Review process to promote transparency between the Department and the CSBs.
  - c. **Section III Technical Assistance** clearly defines the technical assistance process and provides a link to the Exhibit B TA Request form for CSBs.
  - d. **Section IV Performance Monitoring** clearly defines and explains the Performance Improvement Process and Corrective Action Plan process only for this exhibit.
  - e. **Section V Performance Measures** clearly defines core performance measure requirements for certain services and/or activities for this exhibit.
  - f. **Section VI Additional Expectations and Elements Being Monitored**, this section outlines certain data elements and expectations for certain services and/or activities that were put into place prior to the data quality and benchmarking review process as of March 1, 2022 and are active expectations regarding CSB operations and implementation. However, the process for technical assistance, performance improvement plans, and corrective action plans as described Section IV and V does not apply to this section.
3. **Exhibit E: Performance Contract Schedule and Process**- This exhibit provides the CSBs specific due dates for Department required reporting submissions for CARS, CCS, local government audits and Certified Public Accountant (CPA) audits for FY24-25. It also provides specific dates for disbursement of state and federal funds to the CSBs.
4. **Exhibit F: Federal Grant Requirements** –This exhibit has been revised to reflect the current federal grants and their general and specific terms and conditions. These are required material changes that are not negotiable as a Subrecipient of federal funds. We encourage you to familiarize yourself with this information as a Subrecipient of federal funds.
5. **Exhibit G: Master Program Services Requirements** – This exhibit has been revised to provide terms and conditions for certain programs services that a CSB may provide to reduce the amount of Exhibits D the Department and CSBs will have to review, process, and track. Keep in mind that this is not inclusive of all programs/services a CSB may provide, just those that it may have received on a regular basis for review and execution that have well established baseline requirements, with minimal to no changes, and/or part of ongoing baseline funding received from the Department. The following are key material changes:
  - a. **Exhibit C: Regional Discharge Assistance Program (RDAP)** - the Department decided that these requirements did not need their own stand-alone exhibit and they have been moved to Exhibit G.

- b. **Exhibit I: Behavioral Health Wellness** - the Department decided that these requirements did not need their own stand-alone exhibit and they have been moved to Exhibit G.
6. **Exhibit J: Certified Preadmission Screening Clinicians Requirements**- This exhibit is no longer a stand-alone agreement and has been incorporated into this version of the PC.
7. **Addendum I: Administrative Requirements and Processes and Procedures**- Revisions were made for clarity and outdated or redundant information was removed.

**Timeline for Execution by July 1st**

**By April 7, 2023** - OMS will share the final version of the performance contract documents with all CSB Executive Directors for posting for public comment and final execution through DocuSign.

**By July 1, 2023** – Expectation that all CSB performance contracts are fully executed. Please keep in mind that the Department cannot provide any state-controlled funds after September 30<sup>th</sup> if the contract has not been signed.

The Department would like to thank you all for your service to the community and working with us.

All your hard work and dedication to both your communities and our community services system is much valued and appreciated.

If you need help or have questions, please email [performancecontractsupport@dbhds.virginia.gov](mailto:performancecontractsupport@dbhds.virginia.gov) or [contact our technical assistance number at 804-225-4242](tel:804-225-4242).

Thank you,



Chaye Neal-Jones  
Deputy Director  
Office of Management Services

**CBH NOMINATING COMMITTEE**

**PROPOSED SLATE OF OFFICERS**

**CBH Board of Directors**

**Fiscal Year 2024**

:

CHAIR:	Sheri Newcomb	(York)
VICE CHAIR	Ryan Ashe	(James City)
SECRETARY	Hazel Braxton	(Williamsburg)
TREASURER	John Collins	(York)
MEMBER AT-LARGE	Erin Otis	(James City)

**Motion from Nominating Committee:**

That the proposed Fiscal Year 2024 Slate of Officers be elected by the CBH Board of Directors.

### **CBH Operations Continuation Plan – Summer 2023**

#### **Background:**

CBH Executive Director David Coe has scheduled leave time for the purpose of international travel beginning July 14, 2023, and lasting through August 2, 2023. This will undoubtedly cause periods when access to agency systems and documents will be interrupted, so a plan to assure uninterrupted operations is needed.

Board approval is necessary to effectively enact a mitigation plan.

It is staff's recommendation that the attached Operations Continuation Plan be enacted to assure uninterrupted operations. This action would only be in effect for the duration of the Executive Director's leave time as described above.

#### **Recommended Motion:**

That the CBH Board approve the attached Operations Continuation Plan for the period beginning Thursday, July 14, 2023, through Wednesday, August 2, 2023. The temporary authority granted under this Plan shall be limited to actions and issues that must be addressed during the time period. The Executive Director is authorized to place additional restrictions on this authority if deemed necessary.

### **CBH Operations Continuation Plan – Summer 2023**

During the Executive Director's period of unavailability (7/14/23 – 8/2/23), the Colonial Behavioral Health Board of Directors grants temporary authority to the following Director-level CBH staff below to sustain agency operations.

1. Human Resource issues
  - a. Director of Human Resources Chaenn Thomas authorized to act in the stead of and on behalf of the Executive Director in this area.
2. Agency Finance Operations
  - a. Director of Finance Nancy Parsons authorized to act in the stead of and on behalf of the Executive Director in this area; and
3. Actions Required Specifically of the Executive Director –
  - a. Director Operations Marsha Obremski.
  - b. These include granting the authority to sign agency contracts and other agreements, lead agency Leadership meetings, manage CBH inclement weather-related emergency planning and response, and manage contingent actions in current policy required of the Executive Director.
4. Operations and leadership in other areas will continue uninterrupted.

This temporary authority should be limited to issues requiring operational execution during the Executive Director's absence. Actions that can reasonably be held until the Executive Director's return shall be delayed accordingly, but only if doing so will not put CBH at risk of noncompliance with local, state, federal policies/laws or existing agency policy.

The CBH Executive Director may add further restrictions to this Plan during execution so long as the Board's intent in approving this Plan is upheld.

## **Termination of CBH COVID-19 Vaccine Mandate**

### **Background:**

The CBH Board of Directors enacted a COVID-19 Vaccination Policy at its October 2021 meeting, mandating that all CBH employees be either fully vaccinated for COVID-19 OR receive an approved Religious or Medical Exemption (based on reasonable accommodation). This policy has been successfully implemented and managed for the duration of the COVID pandemic and currently remains in effect.

In September 2021 (after the CBH Executive Committee had voted to move for the CBH policy), President Biden announced that healthcare workers employed in facilities receiving Medicaid and/or Medicare funding would be mandated for vaccination (or exemption). This Federal practice was put formally enacted in January 2022.

In more recent months, many sectors have been returning to a more “normal” status of operations, including in healthcare. Local hospital systems and other agencies (including CBH) have relaxed or eliminated masking mandates, etc.

While it has seemed evident to CBH staff leadership for some time that the vaccine mandate had served its purpose and could be safely rescinded, the CMS (Centers for Medicare & Medicaid Services) mandate was still in effect. As a result, any reversal of the CBH policy would not change our internal operations due to the requirements imposed on us by Federal regulation.

May 11, 2023, marked the end of the Federal Pandemic Emergency. This event has been accompanied by the end of vaccine mandates for Federal employees and contractors, and the effective end of the Federal CMS mandate as well.

As we are now moving into the endemic phase of COVID, and with the need for consistency in our policies and practices related to endemic disease states, we are left with the choice to either:

1. Elevate all pandemics (influenza, etc.) to require vaccination as a condition of employment for all CBH employees (NOT RECOMMENDED), or
2. Eliminate the COVID vaccine requirement and address it in the same manner as other endemics (encourage vaccination, universal precautions, stay at home when sick, etc.).

CBH will encourage staff to receive all vaccines recommended by local, state and federal authorities.

CBH staff leadership strongly recommends that the Board choose the second option effective immediately upon Board approval of the recommended motion.

### **Motion from Executive Committee (no second required):**

That the CBH Board rescind the CBH COVID-19 Vaccination Policy immediately but continue to support COVID-19 mitigation efforts in a manner consistent with endemic diseases, including compliance with local, state, and federal authorities.

**COLONIAL BEHAVIORAL HEALTH**  
**Executive Director's Report – June 2023**

**Agency Issues**

1. Residents of our Quarterpath group home will complete their relocation to their new location by mid-June. Beginning in July we will be able to entertain discussions with internal and external stakeholders regarding the future of that property. The most likely options are:
  - a. Using the location to support other community needs; or
  - b. Selling the property and using the funds to support new campus development.
2. Submission of the Federal SAMHSA grant for CCBHC development has been completed, and we now await determination of our application's status. Funding decisions are not scheduled until August 31, 2023.
3. We have experienced some positive movement related to recruitment of vacant positions in DD services. We are encouraged and hope this trend could soon translate to other CBH services as well.

**Community Issues**

1. Local Marcus Alert Plan efforts are once again underway, with the first draft of the Plan being developed at this time.
2. Our application to DBHDS for funding to support Forensic Discharge Planning at VPRJ was successful. We will move to hire one (1) full-time staff member to work exclusively with targeted individuals at VPRJ in need of support for services and supports upon release.
3. The recent round of visits with local governments and elected officials related to CBH's pursuit of surplus property at ESH and of integrated care is nearing completion. We are pleased with the support from each of our localities for these efforts. We are also experiencing a great deal of support from the professional land-and-property development community in providing in-kind support and expertise.
4. A Request for Proposals (RFP) is being released for a Space Needs Study needed to plan effectively for facility project costs. While some component parts may be addressed separately in terms of follow-through, the study will include all CBH office locations.

**Regional Issues**

1. While we have been approved for 25 Permanent Supportive Housing (PSH) units, we have not yet begun to receive any funds to support the effort. We understand DBHDS is working through some administrative processes in hopes of distributing these funds soon.

**Public Policy**

1. The General Assembly is not expected to approve a final FY 2024 state budget until late June at the earliest. We hope to present a "final" FY 2024 Budget at the August 25<sup>th</sup> meeting (which will be held at 2:00 PM at the end of the Planning Session).
2. The current advocacy plan leading up to the 2023 General Assembly elections will be to approach each candidate individually rather than conducting a public event.

Respectfully submitted,  
David A. Coe

## Recruiting Overview

Positions Vacant	Number of Vacancies	Positions Filled	External/Internal	Current Vacancies As of 05/26/2023
Administrative Assistant PRN	PRN Pool			Multiple
AOP Coordinator	1			1
Case Manager- MH/SA	1			1
Central Access Coordinator	1			1
Childrens Services Coordinator	1			1
Children's Clinical Manager	1	1	Internal	0
Crisis Counselor- PRN	PRN Pool			Multiple
Direct Support Professional (DSP/CSA I)-DD Day Support	3	3	Externals	0
Direct Support Professional I (DSP/CSA I) Res. Svcs.	2 (1 FT & 1 PT)			2
EHR Application Specialist	1			1
Emergency Services Coordinator	1	1	Internal	0
Emergency Services-Specialist	3 (1F-T & 2-PT)			3
Financial Information Analyst	1			1
Human Resources Specialist	1			1
Information Systems Business Analyst	1			1





Positions Vacant	Number of Vacancies	Positions Filled	External/Internal	Current Vacancies As of 05/26/2023
Licensed Eligible Therapist - Child & Adolescent Svcs.	2			2
Licensed Therapist- Adult Outpatient	2			2
Licensed Eligible Therapist- Central Access	1			1
Licensed Therapist – GWCAC	1			1
Nurse III-LPN DD Svcs.	1	1	External	0
Peer Specialist- Intern	PRN Pool			Multiple
Peer Support Specialist- Relief	PRN Pool			Multiple
NP/MD- Medical - PRN	1			1
Psychiatrist- PRN	1			1
Psychosocial Services Specialist	2 (1-1.0 FTE & 1-.50FTE)			2
Team Lead-DD Res. Svcs.	2	2	1 External;1 Internal	0
<b>TOTALS</b>	<b>31/4 Pool Positions</b>		<b>5 External &amp; 3 Internal</b>	<b>23/4 Pool Positions</b>