COLONIAL BEHAVIORAL HEALTH BOARD MEETING

DATE: October 1, 2024

LOCATION: Colonial Behavioral Health, 473 McLaws Circle, Williamsburg, VA 23185

WELCOME AND CALL TO ORDER: 3:00pm

BOARD MEMBERS PRESENT:

Mr. Ryan Ashe - James City County

Mr. Tarun Chandrasekar - Williamsburg

Mr. John Collins - York County

Ms. Wendy Evans - Williamsburg

Dr. Dawn Ide - City of Poquoson

Mr. Bruce Keener - York County

Ms. Denise Kirchbaum - James City County

Mr. Steven Miller - York County

Ms. Kristen Nelson - York County

Ms. Erin Otis - James City County

Ms. Amber Richy - York County

Ms. April Schmidt - York County (via Microsoft Teams)

Ms. Donyale Wells - James City County

Mr. Roy Witham - James City County

BOARD MEMBERS ABSENT:

Dr. John Shaner - City of Poquoson

CBH STAFF PRESENT:

David Coe, Kristy Wallace, Katie Leuci, Dan Longo, Nancy Parsons, Kyra Cook, Linda Butler, Patty Hartigan

GUESTS: None

PUBLIC COMMENT: None

CONSENT CALENDAR:

The consent calendar was presented for approval of the following meeting minutes:

- September 3, 2024, Board of Directors Meeting
- September 3, 2024, Services and Evaluation Committee Meeting
- September 17, 2024, Executive Committee Meeting

John Collins made a motion to accept the consent agenda as presented. Denise Kirschbaum seconded the motion, and it passed unanimously.

DISCUSSION/INFORMATIONAL ITEMS:

- Strategic Plan Quarterly Update Kyra Cook
 - CBH's Strategic Plan will be updated on a quarterly basis and presented to the Board for review. Quarter 1 updates were shared; the Board did not have any comments.
- McLaws Circle Update –David Coe

CBH has leased 473 McLaws Circle for the last 12 years; during which time there have been issues including foundation, roof, leaking and mold. Consequently, CBH is in communication with the landlord and requesting a full building assessment within 30 days and 15 days after the assessment is complete, CBH is requesting feedback regarding remediation. Relocation is not ideal but may be needed.

November 5th Board Meeting (Election Day) – David Coe
 Our scheduled November Board Meeting falls on Election Day. The board agreed to cancel the November Board meeting; our next Board meeting will take place in December 2024.

ACTION ITEMS:

- A-1 Legislative Priorities for 2025 General Assembly David Coe
 - 3 priorities and 1 future priority were discussed during the Board Meeting:
 - Priority Developmental Disability (DD) Waiver Services: Funding for Additional Support Coordinators: addition of 3500 waiver slots; request funding to support onboarding for these new positions.
 - 2. **Priority Substance Use Disorder (SUD) Services**: increase rates will although for compensation increases for CSB workforce
 - 3. **Priority Prevention Services**: Increase in general funds that are dedicated to prevention services.
 - 4. Future Priority Support for New Campus

Denise Kirschbaum made a motion that the Board of Directors approve the attached CBH Legislative Priorities for the 2025 Session of the Virginia Assembly. Steven Miller seconded this motion, and it passed unanimously.

• A-2 CBH Board of Directors - Remote Participation Policy - David Coe

The Executive Committee previously discussed the Remote Participation Policy, and the changes made during the 2024 Session of the General Assembly. The Executive Committee provided recommendations to each of the four changes; the recommendations were brought to the Board with a motion to approve.

Bruce Keener made a motion to push the Remote Participation Policy back to the Executive Committee (clean up verbiage and add protocols and procedures). Wendy Evans seconded this motion, and all were in favor.

After discussion it was affirmed that CBH does want to have a Remote Participation Policy. The Executive Committee will revisit this Policy at their next meeting, make recommended updates and present the updated recommendations to the Board at the December Board Meeting.

EXECUTIVE DIRECTOR'S REPORT: (the following topics were discussed during Board Meeting, full report is included in packet)

Agency Issues:

Conveyance of the CBH parcel in the Cardinal Ridge development has been delayed from September to November, at the earliest. The Transportation Board is scheduled to meet on October 23rd, and at that meeting we believe they will take action to release VDOT from responsibility of Schmidt Lane. We hope this is the last state-level regulatory issue to navigate and the rest of the process will go forward without delay.

Regional Issues:

Marcus Alert – CBH's implementation was delayed by one year. DBHDS recently informed several CSB's that the funding has been withdrawn due to an "accounting error." What, if any, impact this has on CBH is unknown.

David Coe shared with the Board that Kyra Cook applied and was accepted to be a part of the Rural Investment Collaborative sponsored, in part, by the Federal Reserve. Hopefully her participating will result in drawing down funds in support of the new campus.

ADJOURNMENT:

Upon a motion to adjourn the meeting made by Bruce Keener and a second by Denise Kirschbaum, the meeting was adjourned at 4:12pm.

NEXT MEETING:

Date: Tuesday, December 3, 2024

Location: 473 McLaws Circle, Williamsburg, VA 21385

Time: 3:00pm

Donyale Wells, Secretary

*s*he. Chair

AGENDA COLONIAL BEHAVIORAL HEALTH BOARD MEETING OCTOBER 1, 2024 3:00 PM

- Welcome and Call to Order
- Roll Call
- Public Comment
- Consent Calendar
 - Approval of the following meeting minutes:
 - September 3, 2024, Board of Directors Meeting
 - o September 3, 2024, Services & Evaluation Committee Meeting
 - o September 17, 2024, Executive Committee Meeting
- Discussion/Informational Items
 - Strategic Plan Quarterly Update K. Cook
 - McLaws Circle Office Update D. Coe
 - November 5 Board Meeting (Election Day) D. Coe
- ACTION ITEMS
 - A-1 Legislative Priorities for 2025 General Assembly D. Coe
 - A-2 CBH Board Remote Participation Policy D. Coe
- Executive Director's Report D. Coe
- Adjournment
 - Next Meeting: Tuesday, November 5, 2024 (tentative)

473 McLaws Circle, Williamsburg

3:00 PM

COLONIAL BEHAVIORAL HEALTH BOARD MEETING

DATE: September 3, 2024

LOCATION: Colonial Behavioral Health, 473 McLaws Circle, Williamsburg, VA 23185

WELCOME AND CALL TO ORDER: 3:00pm

BOARD MEMBERS PRESENT:

Mr. Ryan Ashe – James City County

Mr. Tarun Chandrasekar - Williamsburg

Mr. John Collins - York County

Ms. Wendy Evans – Williamsburg

Mr. Bruce Keener – York County

Ms. Denise Kirchbaum – James City County

Mr. Steven Miller – York County

Ms. Erin Otis – James City County

Ms. Amber Richy – York County

Ms. April Schmidt - York County (via Microsoft Teams)

Dr. John Shaner - City of Poquoson

Ms. Donyale Wells – James City County

Mr. Roy Witham – James City County

BOARD MEMBERS ABSENT:

Dr. Dawn Ide – City of Poquoson

Ms. Kristen Nelson – York County

CBH STAFF PRESENT:

David Coe, Kristy Wallace, Katie Leuci, Dan Longo, Nancy Parsons, Kyra Cook, Marsha Obremski, Linda Butler

GUESTS: None

PUBLIC COMMENT: None

CONSENT CALENDAR:

The consent calendar was presented for approval of the following meeting minutes:

- June 4, 2024, Board of Directors Meeting
- June 26, 2024, Services and Evaluation Committee Meeting

Dr. John Shaner made a motion to accept the consent agenda as presented. John Collins seconded the motion, and it passed unanimously.

Discussion/Informational Items:

Multi-Factor Authentication for CBH Email – Katie Leuci
 Beginning on October 1, 2024, CBH staff (to include our board members) will be required to use

Multi-Factor Authentication to access CBH email. When a second form of authentication is required, security is increased. CBH will gain another level of protection against malicious cyberattacks, data compromises, automated attacks, and brute force attacks.

The Microsoft Authenticator app will be utilized for Multi-Factor Authentication. Kristy Wallace will send app installation directions to board members.

• Space Needs Analysis – Kyra Cook/David Coe

The architects are recommending three buildings in addition to the crisis services center, approximately doubling CBH's current space.

- York-Poquoson (from 4,200 sq ft to 10,000 sq ft) new construction somewhere near current location
- Day Services (from 12,500 sq ft to 20,000 sq ft) location TBD
- Outpatient/Administration (from 17,500 sq ft to 50,000 sq ft) located at Cardinal Ridge
 - 50,000 sq ft is likely too much
 - Includes expansion of Rx, and OP (youth and adult) services space which will better serve the community
 - Primary/Dental care and shared space (conference rooms, etc. at 10k sq ft) are likely too robust and we will continue to study

Our next step is to set up meetings with local governments to discuss land and financing after we get draft budgets together.

A question arose from board member: Are these new buildings a part of the \$12m? No. The \$12m is strictly for the creation of the Crisis Services Center (CSC).

• Fundraising Survey – David Coe

Virginia Thumm presented at our Board Planning Day. She requested that our board members complete a survey; paper copies of survey were provided in today's board meeting for those board members that had not had the chance to fill it out. Board buy-in through process is essential. The feedback received from the survey will be included in Virginia Thumm's final report.

• Integrated Care – Leadership Team

The joint meeting with CBH and OTMDC to discuss integrated care with stakeholders will take place on Monday, September 9, 2024, at the James City County Recreation Center, beginning at 8:00am. The "Non-Purpose" of this meeting will not be to revisit the decision not to collaborate together. The main reason for the joint meeting is to allow everyone to hear the same story, at the same place and to ask questions.

A future goal of CBH has been to provide integrated care to those that we serve, whether we partner with another provider or not. Southeastern Virginia Health System has shown interest in collaborating with CBH.

A Letter of Intent (LOI) signed by both CBH and Southeastern was provided to board members. Services would mainly take place at our new location at Cardinal Ridge. The timing is good – if CBH develops our own integrated care facility, having a partner beside us to assist in the building's plans will be a bonus.

David will share CBH's decision to move on with OTMDC prior to the joint meeting on September 9th to prevent OTMDC from being caught off-guard.

Mr. Roy Witham requested clarification on what exactly the board was being asked to endorse.

1. CBH is moving forward with another provider.

2. The board is being requested to endorse the planning process for integrated care.

Mr. Bruce Keener made a motion to support the endorsement of the planning process for integrated care with a different partner. Dr. John Shaner seconded the motion, and it passed unanimously.

ACTION ITEMS:

A-1 Consumer Advisory Council Guidelines Revision - Marsha Obremski

The following recommended revisions have been made the Advisory Council Guidelines:

- 1. Under "Selection of Advisory Council Members," the initial Council membership will be set up to allow for rotating terms to foster continuity in process from year to year (half of the council will serve one-year terms, the other half will serve two-year terms)
- 2. In order to align with CCBHC guidelines, membership on the Council is restricted to CBH consumers or their family members. The original Guidelines would have allowed individuals who had never received services at CBH to be a Council member.
- 3. Member terms are defined as two years, with reappointments based on reapplication by current members. Also, individuals successfully discharged from services are allowed to complete any unexpired term (this issue was unaddressed in the original version).
- 4. With some turnover expected in most years, the annual training/orientation of members has been added.

A recommended motion was made that the CBH Board approve the amended Advisory Council Guidelines with the following understandings:

- CBH staff will solicit and review applications for membership and submit them to the Board's Executive Committee, along with staff recommendations for appointment; and
- o That the terms of inaugural Council members will being on January 1, 2025.

John Collins motioned that the amended Advisory Council Guidelines be approved. Bruce Keener seconded this motion and it passed unanimously.

EXECUTIVE DIRECTOR'S REPORT:

Agency Issues:

Conveyance of the CBH parcel in the Cardinal Ridge development is currently scheduled to be completed at the JCC Board of Supervisor's September 10th meeting.

We received two bid responses to our RFP. The Evaluation Team is collecting additional information from both bidders.

Mobile Crisis went live on July 1st. Our team is working on plans to publicize the availability of this service now and in the future.

Permanent Supportive Housing has placed approximately 40% of the available slots.

We will be expanding our Child & Adolescent outpatient and case management services.

A "Make a Gift" button can now be found on our website.

Community Issues:

Two local awareness and fundraising events will take place in October: The Arc 5k (October 5th) and NAMI Williamsburg NAMI Walk (October 26th). CBH staff will be participating in both events. CBH and OTMDC promised the community that their agreed upon process and results would be shared

with primary local funders. The joint meeting will take place on Monday, September 9, 2024, at 8:00am. CBH board members have been invited, along with many others.

Regional Issues:

Planning for Marcus Alert Plan has been delayed to 2027.

Public Policy:

A state budget was approved in mid-May.

Two additional reports were included with this report:

- 1. Preliminary CBH FY 2025 End of Year Financial Report
- 2. Summer 2024 Recruitment & Hiring Update from CBH Human Resources

ADJOURNMENT:

Upon a motion by Wendy Evans and a second by Roy Witham to adjourn, the meeting was adjourned at 4:02pm.

NEXT MEETING:

Date: Tuesday, October 1, 2024

Location: 473 McLaws Circle, Williamsburg, VA 21385

Time: 3:00pm

Meeting Minutes

Minutes of: Services and Evaluation Committee

Date: September 3, 2024

Present: Denise Kirschbaum, Steven Miller, Amber Richey, Roy Witham, Dan Longo, Linda Butler

Absent: April Schmidt, Patricia Hartigan

- 1. Members of the Committee convened to determine meeting time.
 - Committee meeting time
 - i. Committee decided to continue with 4th Wednesday s at 4:00 at 473 McLaws
 - ii. Committee decided not to meet September 25, 2024
 - iii. Next meeting to be October 23, 2024
 - iv. Discussion included upcoming holidays in November and December interfering with availability of committee to convene meetings those months.
 - Committee opted to elect chair
 - i. Steven Miller will serve as committee chair for upcoming year
- 2. Adjournment

The meeting was adjourned at 4:20 p.m.

Submitted by: Linda Butler

Next Meeting

Date: October 23, 2024 Time: 4:00 p.m.

Location: 473 McLaws Circle

COLONIAL BEHAVIORAL HEALTH

EXECUTIVE COMMITTEE MEETING 473 McLaws Circle, Williamsburg September 17, 2024, at 4:00pm

Call to Order

Executive Committee Meeting was called to order at 4:00pm.

Roll Call

Committee Members Present:

Committee Members Absent:

Ryan Ashe

Erin Otis

Wendy Evans
John Collins

Donyale Wells

CBH Staff Present:

David Coe, Kyra Cook, Chaenn Thomas, Nancy Parsons, Kisha Young, Kristy Wallace

Updates

Public Hearing - PPEA RFP #A240325

Ryan Ashe opened the public hearing at 4:02pm. Kisha Young presented the Public Hearing Notice: PPEA proposals received from Loughridge & Co. LLC and Henderson Inc. regarding the design and construction of a crisis services center on Ironbound Rd. The public hearing was closed by Ryan Ashe at 4:08pm.

PPEA Update (Kyra)

CBH provided JCC easement information for Cardinal Ridge property. The land conveyance from JCC to CBH is scheduled to take place at the October JCC Board of Supervisors meeting.

Board Remote Participation Policy (David)

The Executive Committee made a motion to move forward with all three recommendations (adding that those present virtually will count towards the quorum). Wendy Evans approved of this motion and the motion was seconded by John Collins. All members of committee were in favor.

Strategic Plan Update (Kyra)

CBH's Strategic Plan Quarter 1 update was shared. There is a concern around specificity although it was explained that more detailed information will be provided as certain tasks are completed.

FY 2024 Audit (Nancy)

A decision was made by the Executive Committee to accept the report as written. If there are concerns, the Executive Committee will request additional information.

Finance Director's Report (Nancy)

Nancy shared with the Executive Committee YTD Revenues and Expenditures (attached). The committee is pleased with the updated format of report.

Recruitment & Hiring Update (Chaenn)

Please refer to the attached Recruitment & Hiring Update as of 9/17/2024.

Review

Establishment of 10/1/2024 BoD Agenda

The agenda will resemble the agenda for today's Executive Committee agenda. It was mentioned that our November BoD meeting falls on Election Day. It was suggested that we add this topic to the BoD agenda for October; the Executive Committee did not have any additional items to add.

Items from the Committee

There were no items from the Committee.

Adjournment

Wendy Evans made a motion to adjourn the meeting at 4:48pm. John Collins seconded this motion.



YEAR TO DATE REVENUES AND EXPENDITURES as of August 31, 2024

REVENUE

	TOTAL	R	ECEIVED	BUDGET		
CATEGORY	BUDGET		YTD	YTD	% RECEIVED	BALANCE
State	\$ 11,886,290	\$	2,205,689	\$ 1,981,048	111%	\$ 224,641
Local	\$ 3,974,000		463,417	662,333	70%	\$ (198,917)
Fees	\$ 6,706,586		935,912	1,117,764	84%	\$ (181,852)
Grants/Other	\$ 1,053,577		86,617	175,596	49%	\$ (88,979)
Total Revenue	\$ 23,620,453	\$	3,691,635	\$ 3,936,742	94%	\$ (245,107)

EXPENDITURES

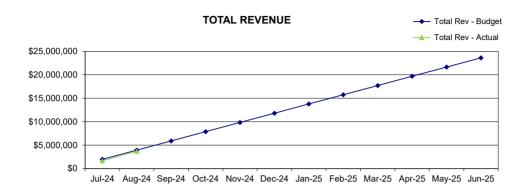
CATEGORY	TOTAL BUDGET	E	XPENDED YTD	E	SUDGET YTD	% EXPENDED	BALANCE
Personnel	\$ 18,169,922	\$	2,569,581	69	2,795,373	92%	\$ 225,792
Staff Development	\$ 94,313	\$	11,233		15,719	71%	4,486
Facility	\$ 1,555,055	\$	152,206		259,176	59%	106,970
Equipment and Supplies	\$ 844,721	\$	94,022		140,787	67%	46,765
Transportation	\$ 189,529	\$	5,011		31,588	16%	26,577
Consultant and Contractual	\$ 2,618,345	\$	214,420		436,391	49%	221,971
Miscellaneous	\$ 148,569	\$	15,899		24,761	64%	8,863
Total Expenditures	\$ 23,620,453	\$	3,062,372	\$	3,703,794	83%	\$ 641,423

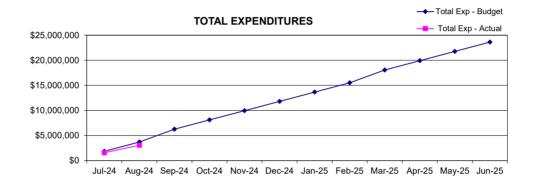
CARRY FORWARD EXPENDITURES

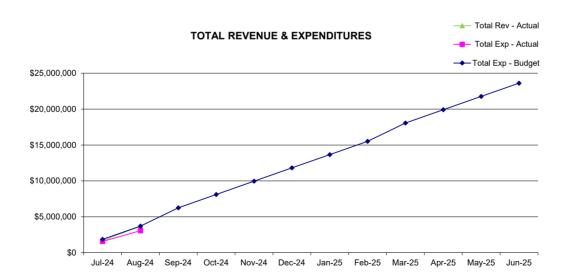
CARRI FURWARD EXPE	NULLUKES			
CATEGORY		EXPENDED YTD		
Personnel		\$	1,698	
Staff Development		\$	307	
Facility		\$	-	
Equipment and Supplies		\$	1,484	
Transportation		\$	16	
Consultant and Contractual		\$	-	
Miscellaneous		\$	32	
Total Carry Forward Expenditures		\$	3,537	
Total Expenditures		\$	3,065,909	
Operating Margin		\$	629,263	

Unless noted otherwise, all amounts are modified cash basis: revenues recognized when earned and received; expenditures upon disbursement

YEAR TO DATE SUMMARY as of 08/31/24



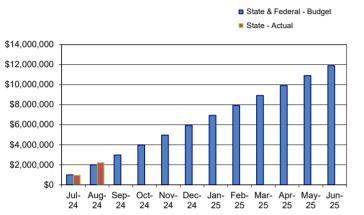






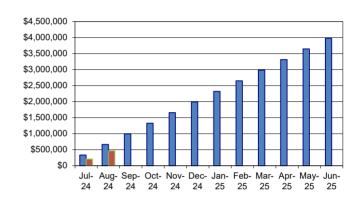
YEAR TO DATE REVENUE as of 08/31/24



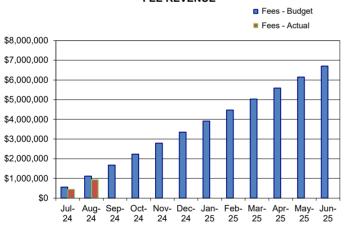


LOCAL REVENUE

■ Local - Budget

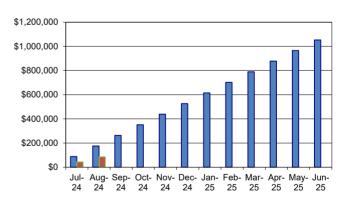


FEE REVENUE



GRANTS & OTHER REVENUE

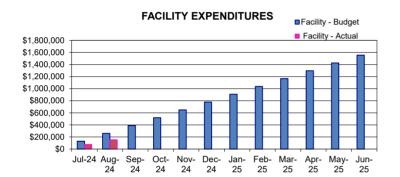
■ Grants/Other - Budget■ Grants/Other - Actual



YEAR TO DATE EXPENDITURES as of 08/31/24

PERSONNEL EXPENDITURES Personnel - Budget Personnel - Actual \$20,000,000 \$18,000,000 \$16,000,000 \$14,000,000 \$12,000,000 \$10,000,000 \$8,000,000 \$6,000,000 \$4,000,000 \$2,000,000 \$0 Aug- Sep-24 24 Oct- Nov- Dec-Jan- Feb- Mar- Apr- May- Jun-

24 24 24 25 25 25 25



TRANSPORTATION EXPENDITURES ■ Transportation - Budget ■ Transportation - Actual \$200,000 \$180,000 \$160,000 \$140,000 \$120,000 \$100,000 \$80,000 \$60,000 \$40,000 \$20,000 \$0 Jul-24 Aug-Sep-Dec-Oct-Feb-Mar-May-

Jan-

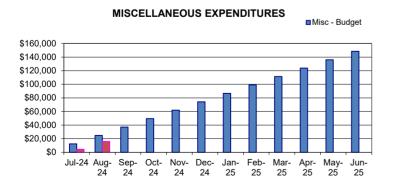
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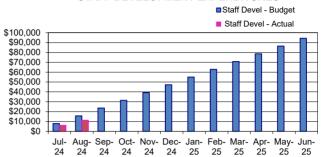
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Jun-

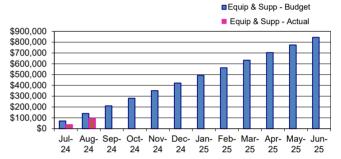
Nov-



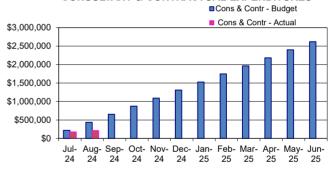
STAFF DEVELOPMENT EXPENDITURES



EQUIPMENT & SUPPLIES EXPENDITURES



CONSULTANT & CONTRACTUAL EXPENDITURES



From: Chaenn Thomas

To: <u>David Coe</u>; <u>Kristina Wallace</u>
Subject: Recruitment status 09/17/24

Date: Monday, September 23, 2024 8:50:38 AM

Recruitment Status Update: 08/24/2024-09/17/2024

As of 08/24/2024 CBH was actively recruiting 27 Positions of which 21 were Full-time positions and six are PRN/WAR positions.

As of 09/17/2024 CBH has filled four (2 internal hires and 2 external hires) additional full-time positions that begin between 09/01 and 09/16/2024 time period.

Additionally, there are two PRNs (1 internal/1 external) and one (1) full-time position onboarding during the next two (09/30 & 10/14/24) scheduled orientations. Additionally, there are two recommendations for hire in pending acceptance of position status.

The hires referenced brings the active recruitment to eighteen (18) full-time positions and six (6) ongoing PRN/WAR position as of 09/17/2024.

Chaenn Thomas
Director of Human Resources
CThomas@colonialbh.org
Administrative office: 757-253-4061



Colonial Behavioral Health
SERVING JAMES CITY COUNTY, CITY OF POQUOSON,
CITY OF WILLIAMSBURG & YORK COUNTY
www.ColonialBehavioralHealth.org

Goal	Objectives	Strategies/Tactics	Quarter 1	Quarter 2	Quarter 3	Quarter 4
		Analyze consumer feedback survey data				
		Evaluate the efficiency regarding access to services	Director of Crisis and			
		-Rapid response to behavioral health crisis	Access on staff &			
		-Faster entry to outpatient services	beginning evaluation.			
	Meet consumer expectations by improving services	Incorporate treatment and service innovations and best practices				
		-Rapid acting medications for stabilization	Will align with			
Services Goal		-Medical screening technologies	development of new			
Adjust service delivery to match the evolving		-Redesign Opportunities Unlimited	facilities.			
landscape, consumer expectations, and		-Redesign pyschosocial rehabilitation				
community needs.		Expand or enhance exisiting or new services	PSH currently serving			
community needs.		-Permanent Supportive Housing	X consumers.			
		-Broadened waiver services	A consumers.			
	Expand or develop programming to meet community needs	Development new services				
		-Mobile Crisis -Crisis Receiving Center	Mobil Crisis launched			
		-Crisis Stabilization	July 2024.			
		-Crisis stabilization -Supported Employment				
		Invest in recruitment platforms				
		-Affinity groups				
		-Triad Healthcare Recruiting				
		Explore agency-wide retention practices				
	Focus on workforce recruitment and retention	-Schedule flexibility				
		-Benefits structure				
		-Career advancement pathways -Culture connectivity -				
Operations Goal		-Culture connectivity - Staff feedback				
Ensure agency sustainability through business		Determine federal indirect cost rate				
	Conduct fiscal analysis in anticipation of new funding models	Explore cost-based reimbursement				
operations reflective of changing healthcare		-ссвнс				
and workfource landscapes.			Policy adopted by			
		Update governance structure	Board. First cohort			
		-Advisory Council	will begin January			
	Improve operations to realize efficiencies		2025.			
		Institute cost benefit analysis processes				
		-New grant and program evaluation Develop new facility staffing models	_			
		-Preparation for consolidation of new construction				
		Treparation to consolidation of new construction				
		Land/facility acquisition				
		-Acquire surplus Eastern State Hospital land				
		-Acquire land and/or facilities appropriate for Day Support services				
		-Acquire land and/or facilities appropriate for service delivery in the eastern most part of the				
	Develop master plan for new campus and appropriate satellite	CBH catchment area				
	facilities	Space needs analysis and design				
Infrastructure Goal		-Develop a York Poquoson plan inclusive of design -Develop an Opportunities Unlimited plan inclusive of design	Space needs analysis complete.			
		-Develop an Opportunities onlimited plan inclusive of design -Develop new campus plan inclusive of design	complete.			
		Develop new compas plan inclusive of design				
Develop and execute long-term dacility,		Facility development and construction				
Develop and execute long-term dacility, technology, and infrastructure plans to support		Facility development and construction				
Develop and execute long-term dacility,		Facility development and construction -Begin construction of facilities Administrative efficiencies via software solutions				
Develop and execute long-term dacility, technology, and infrastructure plans to support		Facility development and construction -Begin construction of facilities Administrative efficiencies via software solutions -Maximize consumer engagement via use of EHR patient portal				
Develop and execute long-term dacility, technology, and infrastructure plans to support		Facility development and construction -Begin construction of Tacilities Administrative efficiencies via software solutions -Maximize consumer engagement via use of EHR patient portal -Develop process to collect fees for telehealth				
Develop and execute long-term dacility, technology, and infrastructure plans to support	Continue refinement and execution of the existing technology plan to	Facility development and construction - Begin construction of facilities - Administrative efficiencies via software solutions - Maximize consumer engagement via use of EHR patient portal - Develop process to collect fees for telehealth - Conduct software audit to reduce use of paper				
Develop and execute long-term dacility, technology, and infrastructure plans to support		Facility development and construction				
Develop and execute long-term dacility, technology, and infrastructure plans to support	Continue refinement and execution of the existing technology plan to	Facility development and construction -Begin construction of Tacilities -Administrative efficiencies via software solutions -Maximize consumer engagement via use of EHR patient portal -Develop process to collect fees for telehealth -Conduct software audit to reduce use of paper Cyber security -Continue to improve disaster preparedness				
Develop and execute long-term dacility, technology, and infrastructure plans to support	Continue refinement and execution of the existing technology plan to	Facility development and construction				
Develop and execute long-term dacility, technology, and infrastructure plans to support	Continue refinement and execution of the existing technology plan to	Facility development and construction -Begin construction of Tacilities -Administrative efficiencies via software solutions -Maximize consumer engagement via use of EHR patient portal -Develop process to collect fees for telehealth -Conduct software audit to reduce use of paper Cyber security -Continue to improve disaster preparedness	"Make a Giff" button			
Develop and execute long-term dacility, technology, and infrastructure plans to support	Continue refinement and execution of the existing technology plan to	Facility development and construction -Begin construction of Tacilities -Administrative efficiencies via software solutions -Maximize consumer engagement via use of EHR patient portal -Develop process to collect fees for telehealth -Conduct software audit to reduce use of paper Cyber security -Continue to improve disaster preparedness	"Make a Gift" button added to website.			
Develop and execute long-term dacility, technology, and infrastructure plans to support	Continue refinement and execution of the existing technology plan to	Facility development and construction	"Make a Gift" button added to website. Designated fund			
Develop and execute long-term dacility, technology, and infrastructure plans to support	Continue refinement and execution of the existing technology plan to	Facility development and construction -Begin construction of Tacilities -Administrative efficiencies via software solutions -Maximize consumer engagement via use of EHR patient portal -Develop process to collect fees for telehealth -Conduct software audit to reduce use of paper Cyber security -Continue to improve disaster preparedness	added to website.			
Develop and execute long-term dacility, technology, and infrastructure plans to support	Continue refinement and execution of the existing technology plan to	Facility development and construction -Begin construction of Tacilities Administrative efficiencies via software solutions -Maximize consumer engagement via use of EHR patient portal -Develop process to cellect feets for telehealth -Conduct software audit to reduce use of paper Cyber security -Continue to improve disaster preparedness -Complete migration to the cloud	added to website. Designated fund			
Develop and execute long-term dacility, technology, and infrastructure plans to support	Continue refinement and execution of the existing technology plan to improve administrative efficiencies and ensure security	Facility development and construction Begin construction of facilities Administrative efficiencies via software solutions -Maximize consumer engagement via use of EHR patient portal -Develop proces to collect fees for telehealth -Conduct software audit to reduce use of paper Cyber security -Continue to improve disaster preparedness -Complete migration to the cloud Capital Campaign -Accept donations directly or via a third party	added to website. Designated fund established at Williamsburg Community			
Develop and execute long-term dacility, technology, and infrastructure plans to support	Continue refinement and execution of the existing technology plan to improve administrative efficiencies and ensure security	Facility development and construction	added to website. Designated fund established at Williamsburg			
Develop and execute long-term dacility, technology, and infrastructure plans to support and enhance services.	Continue refinement and execution of the existing technology plan to improve administrative efficiencies and ensure security	Facility development and construction	added to website. Designated fund established at Williamsburg Community			
Develop and execute long-term dacility, technology, and infrastructure plans to support and enhance services. Resources Goal	Continue refinement and execution of the existing technology plan to improve administrative efficiencies and ensure security	Facility development and construction	added to website. Designated fund established at Williamsburg Community			
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Develop and execute long-term dacility, technology, and infrastructure plans to support and enhance services. Resources Goal Ensure agency sustainability by creating and	Continue refinement and execution of the existing technology plan to improve administrative efficiencies and ensure security Develop mechanisms to finance the new campus	Facility development and construction	added to website. Designated fund established at Williamsburg Community			
Develop and execute long-term dacility, technology, and infrastructure plans to support and enhance services. Resources Goal Ensure agency sustainability by creating and implementing long-term resource development	Continue refinement and execution of the existing technology plan to improve administrative efficiencies and ensure security Develop mechanisms to finance the new campus	Facility development and construction	added to website. Designated fund established at Williamsburg Community Foundation.			
Develop and execute long-term dacility, technology, and infrastructure plans to support and enhance services. Resources Goal Ensure agency sustainability by creating and	Continue refinement and execution of the existing technology plan to improve administrative efficiencies and ensure security Develop mechanisms to finance the new campus	Facility development and construction	added to website. Designated fund established at Williamsburg Community Foundation. OTMDC integration			
Develop and execute long-term dacility, technology, and infrastructure plans to support and enhance services. Resources Goal Ensure agency sustainability by creating and implementing long-term resource development	Continue refinement and execution of the existing technology plan to improve administrative efficiencies and ensure security Develop mechanisms to finance the new campus	Facility development and construction	added to website. Designated fund established at Williamsburg Community Foundation. OTMDC integration partnership ended.			
Develop and execute long-term dacility, technology, and infrastructure plans to support and enhance services. Resources Goal Ensure agency sustainability by creating and implementing long-term resource development	Continue refinement and execution of the existing technology plan to improve administrative efficiencies and ensure security Develop mechanisms to finance the new campus	Facility development and construction	added to website. Designated fund established at Williamsburg Community Foundation. OTMDC Integration partnership ended. Signed Letter of Intent			
Develop and execute long-term dacility, technology, and infrastructure plans to support and enhance services. Resources Goal Ensure agency sustainability by creating and implementing long-term resource development	Continue refinement and execution of the existing technology plan to improve administrative efficiencies and ensure security Develop mechanisms to finance the new campus	Facility development and construction Begin construction of Tacilities Administrative efficiencies via software solutions Administrative efficiencies via software solutions Maximize consumer engagement via use of EHR patient portal Develop process to collect fees for techealth Conduct software audit to reduce use of paper Cyber security Continue to improve disaster preparedness -Complete migration to the cloud Capital Campaign -Accept donations directly or via a third party -Grant prospecting Develop relationship with lending insitution to put together a capital stack and leverage existing holdings Increase awareness to seek new clients -Business community outreach -Marketing budget Explore sharing resources to drive efficiencies	added to website. Designated fund established at Williamsburg Community Foundation. OTMDC integration partnership ended. Signed Letter of Intent with Southeastern			
Develop and execute long-term dacility, technology, and infrastructure plans to support and enhance services. Resources Goal Ensure agency sustainability by creating and implementing long-term resource development	Continue refinement and execution of the existing technology plan to improve administrative efficiencies and ensure security Develop mechanisms to finance the new campus	Facility development and construction	added to website. Designated fund established at Wittlamsburg Community Foundation. OTMDC Integration partnership ended. Signed Letter of Intent with Southeastern Virginia Health			
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CBH Legislative Priorities 2025 General Assembly Session

Background:

The usual and customary approach we have utilized for legislative priorities has been to address specific programs, tasks or projects. Our current set of circumstances makes the 2025 General Assembly session a challenging one for this approach.

Workforce issues have been supported well by the General Assembly in recent years, and those issues have <u>somewhat</u> improved. At this time, there are other and possibly significant changes in the works related to new credentials and Medicaid reimbursement — but those developments are in the realm of regulatory advocacy rather than legislative advocacy.

Therefore, it is proposed that the Board support our state association (VACSB) priorities this year for use and guidance as we approach the upcoming session. These priorities will be accompanied by talking points for use with legislators as we begin those meetings. The first 3 priorities are directly drawn from the VACSB.

We will be seeking funding to support our capital efforts, but we are a year away from being able to be specific in our advocacy in this area. However, laying the foundation for the 2026 request should be part of this year's advocacy strategy.

It is likely that we will need to expand our attention to other items that may arise from the Governor's budget (due to be released December 18th).

Recommended Motion:

That the Board of Directors approve the attached CBH Legislative Priorities for the 2025 Session of the Virginia General Assembly.

CBH LEGISLATIVE PRIORITIES 2025 Session

PRIORITY – DEVELOPMENTAL DISABILITY (DD) WAIVER SERVICES: FUNDING FOR ADDITIONAL SUPPORT COORDINATORS

The 2024 general assembly funded 3,440 new developmental disability Waiver slots to address the "Priority One" waitlist. This is an historic level of funding and is approximately twice the number of Waiver slots funded in a typical biennium. CBH appreciates the general assembly's large investment in DD Waiver services. However, since CSBs are the single point of entry for Waiver services and are the sole providers of Waiver support coordination, it will be critical that the general assembly provide funds for CSBs to onboard the additional support coordinators needed for the large number of DD Waiver slots forthcoming throughout this biennium. CSBs cannot bill Medicaid during the onboarding process of a new support coordinator, which takes about six months. Therefore, CSBs will be requesting the funds needed to cover the onboarding time period of each new support coordinator hired, before Medicaid billing can occur.

PRIORITY – SUBSTANCE USE DISORDER (SUD) SERVICES

CSBs are requesting a 12.5% rate increase for the Substance Use Disorder (SUD) services that did not receive the permanent 12.5% rate increase other behavioral health services received. Those services are: Office Based Addiction Treatment (OBAT), Opioid Treatment Program (OTP), Partial Hospitalization Program (PHP) and Intensive Outpatient Program (IOP). CSBs are experiencing workforce challenges in all areas of services, including SUD services. Increasing rates is one way to increase compensation for CSB workforce.

PRIORITY – PREVENTION SERVICES

Prevention services are an important part of how CSBs serve the community across a full continuum. During the pandemic, federal funding through the Consolidated Appropriation Act (CAA) and American Rescue Plan Act (ARPA) allowed CSB prevention staff to expand programs for their communities. Schools, police departments and other community partners appreciate how robust and active CSB prevention programs have become. CAA funds ended recently, and ARPA funds will end in September of 2025. To account for this loss, CBH is requesting an increase in general funds that are dedicated to prevention services. This will allow the CSB prevention staff to continue its robust array of services in every community of the Commonwealth.

FUTURE PRIORITY – SUPPORT FOR NEW CAMPUS

CBH is preparing to build out a new set of facilities to improve access to an expanded continuum of services throughout our service area. While we are not yet ready to make any specific requests at this time, we will be seeking state general funds in 2026 to support a portion of the costs for what we believe will be "cutting edge" care currently not available anywhere else in Virginia.

CBH BOARD OF DIRECTORS – REMOTE PARTICIPATION POLICY

Changes to the Code of Virginia § 2.2-3708.3 (contained in HB894 and SB734) during the 2024 Session of the General Assembly:

1. Amends the number of all-virtual public meetings that public bodies, with certain exceptions, may convene in a calendar year to no more than two times per calendar year or 50 percent of the meetings held per calendar year rounded up to the next whole number, whichever is greater. Current law limits the number of all-virtual public meetings to no more than two times per calendar year or 25 percent of the meetings held per calendar year rounded up to the next whole number, whichever is greater. For CBH, this would mean we could theoretically convene up to 50% of our Board meetings as fully remote. Our current Policy does not allow fully remote meetings outside of a declared emergency status.

<u>Executive Committee Position</u>: We should not amend this part of our Policy to allow for fully remote meetings in non-emergency situations.

2. Language in the previous bill only allowed members attending in person to be counted toward establishment of the meeting quorum. That language has been removed.

Executive Committee Position: Allow remote attendees to count toward the meeting quorum.

3. Members of the public body attending remotely will be considered absent during any period during which their visual connection is disabled, or audio communication is interrupted.

<u>Executive Committee Position</u>: We amend our current Policy to reflect this for future meetings. In essence, this would mean that Board member cameras will need to be turned on to participate remotely.

4. Previous legislation required public bodies to only adopt a Remote Participation Policy once prior to initiating the practice in non-emergency situations. The 2024 legislation requires public bodies to approve such a policy at least annually.

Executive Committee Position: Amend our current Policy to reflect this requirement.

MOTION FROM THE EXECUTIVE COMMITTEE:

That the Board of Directors approve the amendments to the "Board Member Remote Participation in Board and Committee Meetings" Policy as described above and as attached.

POLICY: Board Member Remote Participation in Board and Committee Meetings

A member of the Board may participate in a meeting of the Board (both committees and full Board meetings) through electronic communications from a remote location that is not open to the public as provided in Code of Virginia § 2.2-3708.3 subject to the following requirements:

- 1. On or before the date of a meeting a member wishing to participate from a remote location in a meeting of the Board shall notify the Board or Committee Chair that the member is unable to attend the meeting due to:
 - a. the member is unable to attend the meeting due to a personal matter, and identifying with specificity the nature of the personal matter, or
 - b. notify the Board or Committee Chair that the member is unable to attend a meeting due to a temporary or permanent disability or other medical condition that prevents the member's physical attendance, or a family member's medical condition that requires the member to provide care for such family member, thereby preventing the member's physical attendance.
- 2. If remote participation is approved, regardless of the reason by reason of a personal matter, the Board shall record in its minutes the specific nature of the personal matter and the remote location from which the absent member participated, which remote location need not be open to the public. If remote participation is approved by reason of a personal matter, the minutes shall identify the specific nature of the personal matter cited by the member. If remote participation is by reason of a temporary or permanent disability or medical matter, the Board's minutes shall record that the member participated through electronic communication means because of a disability or medical condition that prevented his attendance or because a family member's medical condition required the member to provide care for such family member, thereby preventing the member's physical attendance. If the absent member's remote participation is by reason of a personal matter is disapproved because such participation would violate this policy, such disapproval shall be recorded in the Board's minutes with specificity.
- 3. Remote participation by reason of a personal matter shall be limited in each calendar year to two meetings, or 25 percent of the meetings held per calendar year rounded up to the next whole number, whichever is greater. Accounting for remote Committee attendance shall be maintained separately from Board meeting attendance.
- 4. A quorum of the Board or Committee must be physically assembled at the primary or central meeting location. Any member attending the meeting remotely must be both audible and visible to all in attendance in the meeting, either remotely or in person. If at any time during the meeting either of these conditions are not met, the member shall be considered absent for that portion of the meeting.
- 5. The Board shall arrange for the voice of the absent member to be heard by all persons in attendance at the primary or central meeting location.
- 6. In the event of a declaration of emergency issued by the Governor in accordance with Code of Virginia section 44-146.7 or by the Board in accordance with Code of Virginia section 44-146.21, the Board and its Committees may meet without a quorum physically assembled at one location as provided in Code of Virginia section 2.2- 3708.2(A)(3)15.2-3708.2(3), provided that the catastrophic nature of the declared emergency makes it impractical or unsafe to assemble a quorum in a single location, and the purpose of the meeting is to address the emergency. In such event, the Board shall comply with the notice and public access requirements specified in Code of Virginia section 2.2-3708.2(A)(3).

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- The nature of the emergency, the fact that the meeting was held by electronic communication means, and the type of electronic communication means by which the meeting was held shall be stated in the minutes.
- 7. In the event of the adoption of or a continuation of a government ordinance pursuant to Code of Virginia section 15.2-1413 by reason of enemy attack or other disaster, the Board may approve remote participation by members on such terms and conditions as may appear necessary or expedient.
- 8. This Policy shall be either amended or renewed by the Board on an annual basis.
- 9. This Policy shall be deemed effective 10/1/2024 upon approval.

COLONIAL BEHAVIORAL HEALTH Executive Director's Report – October 2024

Agency Issues

- 1. Conveyance of the CBH parcel in the Cardinal Ridge development was originally scheduled to be completed at the JCC Board of Supervisors' September 10th meeting but was postponed until October 8th. The land will be owned by Colonial Community Services, Inc. upon final conveyance.
- 2. Two responses were made to our RFP for design/construction of the crisis services facility. The Evaluation Team collected additional information from both bidders and selected Henderson Inc. to work out the details of an Interim Agreement. Work completed under an Interim Agreement will bring the design of the facility to between 30% 50% completion. The *Intent to Award Notice* can be found at https://www.colonialbh.org/about-us/procurement/. Under PPEA Guidelines, an Interim Agreement can be executed as early as 30 days after the Intent to Award is announced.
- 3. Dan Longo, Director of Behavioral Health Services, has announced his intent to retire from CBH at the end of this calendar year. He has contributed mightily to CBH and to services in our area, and he will be missed. Recruitment will be commencing immediately.

Community Issues

- 1. The latest CIT training (ended 9/20) included two staff from Colonial Community Corrections as well as new General District Court Judge Matthew Danielson. Their inclusion was preparatory for the planned BH Court docket (state application in review).
- 2. Permanent Supportive Housing has either placed or is working with active referrals that will fill 80% of our housing slots. We have a total of 25 slots funded by DBHDS.
- 3. On November 13th, Patty Hartigan will be leading a community stakeholder meeting to discuss CBH's plans for crisis services (including ES, CSU, CRC, Mobile Crisis and CITAC). There will be other meetings in the future for broader audiences, but this initial meeting is intended to operationally target collaborating agencies and public safety stakeholders who will be referring to or coordinating care with these CBH services.
- 4. The community stakeholders' meeting regarding integrated care work between OTMDC and CBH was held September 9th with an attendance of almost 40 persons.
- 5. Integrated care meetings with Southeastern VA Health System (SEVHS) begin this month.

Regional Issues

1. Colonial's scheduled Marcus Alert implementation was delayed by one year. DBHDS has recently informed several CSBs that their budgeted \$600K funding has been withdrawn due to an "accounting error." This may allow time for DBHDS to address internal issues.

Public Policy

- 1. We have begun to schedule meetings with General Assembly officials. Senator McDougle will be making his first CBH visit on October 22nd from 12-2 PM at McLaws Circle. The rest of our elected officials will be scheduled as soon as possible.
- 2. Governor Youngkin's proposed budget will be released on December 18, 2024.

Respectfully submitted, David A. Coe