# **SEPTEMBER 2020 BOARD MINUTES**

September 14, 2020 | 4:00 PM | 500-B, 500 Old Lynchburg Rd

# ATTENDEES

## Members Present

Barbara Barrett, Chair

#### Stephen Wunsh

David Szwedo

John Kronstain

James Murphy

**Diane Jacobs** 

Nora Demleitner

Peggy Whitehead, Secretary

Edna Harris

Helayna Banks

Tom Worosz

**Others Present** Lisa Beitz, Executive Director

Kathy Williams, Senior Director

Lisa Hearl, Staff

Members Absent Ms. D Pryor

# **MEETING MINUTES**

I. Call to Order

Ms. Barrett called the meeting to order at 4:00 PM.

#### II. Welcome

Ms. Barrett welcomed everyone to the meeting.

#### **III.** Comments from the Public

There was no public at this time.

#### IV. Chair's Remarks

Ms. Barrett welcomed Tom Worosz to the Board. He represents Louisa County. The Board members introduced themselves.

#### V. Executive Director's Report

Ms. Beitz introduced herself, Kathy Williams, and Lisa Hearl to the Board. At this time the agency is still primarily telehealth. The Leadership Team makes these decisions based on positivity percentage as well as environmental factors such as school starting and flu season. The agency is trying to provide six weeks' notice to programs reopening. At this time that will only be Friendly Oaks, providing small day programming. Some other programs have been able to do the same, with staff taking residential consumers to the site and back with consistent staffing.

The General Assembly is in special session based on a number of pieces of legislation they needed to address that was diverted at the begging of pandemic. There are some critical pieces impacting CSBs. Ms. Beitz highlighted the area around funding that supports services and placement for people coming out of state hospitals, \$7.5 million diverted to fund the pandemic. During the General Assembly, the VACSB advocated for it to be allotted to DAP and it has not been. We'll know at the end of the General Assembly if that money has been restored. If it is not, the challenge will be not having the funds to help people stabilize in the community post discharge from state hospitals, which will slow down discharges or put people in services of placements that don't meet their needs, but don't require DAP funding. The second thing of note for the special session is STEP VA. Currently working on the step for mobile crisis, the funding has been pulled for the pandemic. At this time we are unable to move forward with community infrastructure. Executive Order 70 talks about state hospital census crisis (not enough beds, people needing to go to the hospital); what the impact has been is people are sitting at the emergency departments without an available bed to go to, but not safe to go home or back into their community. State hospitals became the safety net, required to take these people, now, because private hospitals are overrun and state hospitals are overrun with more people than beds that people in crisis are sitting in emergency departments waiting for a bed. Then you take covid as a challenge, and many hospitals are requiring a covid negative test confirmation prior to admission, which backs up our system even more. Then once a person is cleared medically, the request from our state department and our governor is that law enforcement, who maintains custody of under and ECO, that law enforcement delay transportation from the emergency department to the hospital where they are going to get treatment until medical clearance happens. Law enforcement is saying they aren't able to wait. People are waiting days, and law enforcement doesn't have the

resources to do this. The system, statewide, is at odds, in that there's not enough hospital beds, there's more people in crisis, and our community partners (CSBs, emergency departments, medical personnel, law enforcement) all have the same challenges in terms of staffing capacity and inability to help one person get from A to B to C to get the treatment that they need. UVA, our local crisis assessment center, says they can no longer take custody of an ECO from law enforcement. This isn't just a local issue, but statewide. It has been taken to the Department and VACSB and to UVA as well. Unfortunately this situation leaves the person in need, not being well served.

Our staff are seeing more acuity in both people in crisis and people we serve ongoing. Our staff have higher stress. We have higher call outs for illness. We have more people on FMLA and we are offering EAP for supports. We are significantly under staffed in terms of margin of depth on our bench when people call in sick or don't show up for work. We are making hard choices and the most recent hard choice is that we are pausing admissions to Women's Treatment Center so that we can ensure safety and support in our Wellness Recovery Center, diverting staff to Crisis Stab to support people coming in. Mohr Center is open and what we are seeing is that people are relapsing and having a hard time maintaining their sobriety during the pandemic. Violence has increase, child abuse has increased, depression and anxiety have increased, and so has substance abuse. We are working hard to communicate these challenges and what we are doing to maintain levels of service to our community partners and inviting conversation and questions around it. At last count, we were at 56 people at ALF, which is covid free. DD residential services, which has early covid, has now stabilized. Our MH residential has not had any positive covid cases. Staff and visitors are screened when they enter our buildings. Any positive cases are documented to staff through an email by Ms. Beitz, leaving out any personal information. Ms. Beitz commends staff, especially who work in 24 hour locations, for coming in and serving people well. The agency is in a stable enough position to be able to maintain the level of services and staffing we currently have, through this pandemic, barring any unexpected developments

### VI. Consent Agenda

Ms. Barrett asked for any corrections to the consent agenda. The consent agenda was unanimously approved.

### VII. Closed Session

Ms. Barrett I move that the Board go into a closed meeting in compliance with Va. Code § 2.2-3712 for the purposes of: Discussion of personnel matters pursuant to 2.2-3711.A.1. The motion was seconded by Ms. Demleitner and unanimously approved.

Ms. Barrett wanted to acknowledge and thank the staff at Region Ten for providing exceptional services to our consumers during such a trying time.

The Fundraising Committee will meet the 15<sup>th</sup>. Ms. Barrett reminded members to notify her of which committees they wish to serve on. Ms. Beitz is happy to help coordinate Zoom meetings for community meetings.

Ms. Beitz indicated that a Board Orientation and refresher will be scheduled in October. Further information will be forthcoming. Ms. Beitz asked for any questions pertaining to police reform, co-response models and the role of Region Ten. What is true is that VA CSBs are the entity to respond to people experiencing a psychiatric emergency who need assessment for hospitalization and the entity that executes a TDO. Whether we are in a co-responder model or we are responding to a request for psychiatric evaluation, Region Ten has a role. What is also true is that we would not develop a model, a program, a plan that we think is great as an individual entity without involving you, staff, partnerships, state department, our community needs. We are listening to that and understanding our role. Region Ten is not leading the way in police reform.

The Board adjourned into closed session.

The Board hereby certifies as follows in compliance with Va. Code §2.2-3712(D):

To the best of each individual board member's knowledge, only public business matters lawfully exempted from open meeting requirements under Va. Code §2.2-3711 and only such public business matters as were identified in the motion by which the closed session was convened were heard, discussed or considered in the closed meeting.

#### **VIII. Other Business**

There was no other business at this time.

IX. Adjournment The meeting was adjourned.