

Rappahannock-Rapidan Community Services Board and Area Agency on Aging
Annual Report of Operations for Fiscal Year 2006

July 1, 2005 through June 30, 2006

Mission: To improve the quality of life for individuals and families served by providing comprehensive mental health, mental retardation, substance abuse, and aging services that are consumer-focused, community-based, promote dignity, choice, and social integration.

This report provides information on:

- Organizational accomplishments;
- Consolidated service and financial information;
- Corporate Compliance; and,
- Performance Analysis for 2006

Organizational Accomplishments

1. **Clinical Services** operations provide outpatient mental health assessment, counseling, psychiatric services; outpatient and residential substance abuse services; and, early intervention services for infants and toddlers.
 - a. Emergency and Outpatient Access Services
 - i. The number of face-to-face evaluations increased by 13% from fiscal 2005 (1,058 to 1,195), with the most significant growth in the more rural localities of Madison, Orange and Rappahannock. This program has emphasized value of face-to-face evaluations whenever feasible for improved assessments and dispositions.
 - ii. The amount of time it takes to respond to emergency calls is monitored on an ongoing basis. Baseline times have been established at two minutes during regular clinic hours and eighteen minutes after-hours. These baselines will be used to establish expectations and improvements in future years.
 - iii. 141 bed days of acute psychiatric care were purchased from private hospitals for 25 individuals providing local, inpatient care as an alternative to admission to Western State Hospital in Staunton. The average length-of-stay was 5.6 days. Contracts for acute inpatient care are in place with seven providers, and the agency is part of a program that seeks to purchase short-term acute care services in lieu of hospitalization in a State facility for all emergency admissions.
 - iv. Referral source and consumer satisfaction surveys were completed to gather and use information from key stakeholders. The information demonstrated overall consumer satisfaction with the access process, but referral source surveys showed dissatisfaction with the process and delays in first appointments. Accordingly, the access process is being evaluated and goals for improving access times have been established.
 - b. Mental Health Outpatient Services

- i. In response to referral source feedback, average wait times are being routinely monitored and used to measure performance for fiscal 2007.
 - ii. Outpatient services are provided in three full time outpatient clinic settings located in Warrenton, Culpeper and Orange.
 - iii. Continuity of Care performance (length of time it takes to see a patient following hospital discharge) has shown significant improvement. RRCSB extended its program to include discharges from private psychiatric hospitals and went from being 3% below the State average in performance to 26% above the State average. The goal is to see a patient for face-to-face services within 7 days of discharge and medication access within 14 days.
- c. Psychiatric Services
 - i. A full time Psychiatric Nurse Practitioner position has been established to provide services to all outpatient clients through the three outpatient clinics.
 - ii. The outpatient pharmacy program successfully transitioned to oversight from State Board of Pharmacies with new procedures governing funding for and access to psychotropic medications through the Community Resource Pharmacy.
 - iii. A full time Medication Technician assists consumers in accessing benefits under the Medicare Part D program and works with clients in programs providing reduced cost medications for those who are financially eligible.
- d. Substance Abuse Outpatient Services
 - i. Acu-detox, an evidenced-based practice for substance use disorders, has been implemented.
 - ii. All staff involved in substance abuse services received Matrix training, an evidenced-based model using cognitive behavior techniques.
 - iii. The results of a stakeholder satisfaction survey have been used to change intake methods for criminal justice referrals.
- e. Women's Alternatives (specialized substance abuse program)
 - i. Staff developed and implemented a program marketing effort in response to declining participation. This effort also established more routine meetings with local probation officers.
 - ii. Acu-detox was also introduced in the Women's Alternatives program.
- f. Boxwood Substance Abuse Treatment Program
 - i. Overall utilization was at 76%, despite dramatic changes in funding routinely used to purchase Boxwood services by referral sources and an increase in the daily rate.
 - ii. An overall 8% decrease in cancellations was achieved due to an improved communication process with referral sources.
 - iii. Based on referral source needs, new program developments in co-occurring treatment and an anger management program were developed and implemented.
 - iv. RRCSB received Board of Supervisors approval for the Conditional Use Permit on property recently purchased for a replacement facility for the

Boxwood program.

- v. The Matrix program and Acu-detox were implemented at Boxwood with greater recognition of the treatment issues for co-occurring disorders.

g. Infant / Toddler Connection

- i. The program has met 100% of the 45 day timeline for evaluations for all new referrals.
- ii. Referral growth continued with numbers served increasing from 238 in Fiscal 2005 to 264 in Fiscal 2006.

h. Prevention Services

- i. A national Suicide Prevention Grant was received in October for \$210,000 over three years. This grant has provided funding for training of over 700 adults and 600 students in the region with significant media coverage on issues related to teen suicide prevention.
- ii. The program held its second summer prevention camp.
- iii. Mental health and suicide prevention / education presentations were held with all school divisions in the region.

i. Current Priorities

- i. Continue to work toward accreditation of outpatient programs.
- ii. Monitor outpatient access times and establish realistic improvement goals.
- iii. Develop and implement new transformation programs in emergency services focused on a greater variety of treatment choices for acute care interventions.
- iv. Sponsor a Child and Family Community Partnership Conference for public/private providers in March 2007.
- v. Work with an architect in the final design and specifications for the new facility to replace the Boxwood physical plant.

2. **Community Support** operations provide long term case management, rehabilitation and residential supports for adults with mental illness and mental retardation; advocacy and case management supports for senior citizens; and, In-Home supports for seniors.

a. Residential Services

- i. Leafin Lane Apartments, a 23-unit independent living apartment complex for seniors is now in operation. A Grand Opening was held on June 23 attended by local officials, RRCSB-AAA members, RRCSB-AAA staff and some of the initial tenants.
- ii. After over ten years at a location in the Town of Culpeper, the new Liberty Group Home moved to a location in a rural part of Culpeper County. Consumers and staff made a successful transition to the new location that provided improved facility accessibility.
- iii. A new Group Homes Manager position was developed and filled. This position will focus on the oversight of our nine residential programs for adults with mental retardation.
- iv. Increases in the supported living program in Fauquier County resulted in two new consumers receiving in-home supports from Residential Counselors in their own homes.

- v. 72% of residential consumers met their planned community integration goals in fiscal 2006. This represents a 2% decrease from the prior year but the variety of choices has improved.
 - vi. The overall staff vacancy rate for residential staff was 7.1%, a decrease of 4.3% over the previous year.
- b. Case Management
- i. Case management staff played the lead regional role in providing resources and education for seniors in the implementation of the new Medicare Part D program.
 - ii. Staff increased collaboration with local high schools to provide continuity of services for students graduating from Special Education programs.
 - iii. Internal monitoring tools were implemented to maintain high documentation standards in case management records.
 - iv. The program instituted an effectiveness measure by completing 667 Quality of Life surveys for consumers in services for varying lengths of time (3 months to 3 years). 81% of those surveyed reported overall life satisfaction, and a positive correlation was established between increased satisfaction with increase time receiving case management services.
- c. Psychosocial Rehabilitation – Visions – Culpeper
- i. A new Program Manager was hired in May 2006 following the promotion of the former manager to a senior position within the organization.
 - ii. An Advisory Council with staff, member and community participants began regular meetings.
 - iii. The program has achieved an excellent evaluation of readiness for accreditation.
- d. Bridges Rehabilitation Program: Warrenton and Orange
- i. Consumer choices of program electives have been increased at both locations to include a new emphasis on empowerment and social / personal skills.
 - ii. New volunteer experience opportunities are being provided to consumers with programs such as Head Start, Nursing Homes, and landscaping projects in the local community.
 - iii. A new Business Plan and emphasis of paid work opportunities has led to new contracts with the US Army Reserve Center in Culpeper, Leafin Lane Apartments, Infant / Toddler Connection of Culpeper, and other RRCSB-AAA programs.
 - iv. New outcome measures in both programs have brought about an improved focus on community integration activities.
- e. In-Home Services for Aging Consumers
- i. A new Coordinator for In-Home Services was hired in April 2006.
 - ii. A facility for a new Adult Day Care Program in Culpeper was secured for the development of the program in fiscal 2007.
- f. Aging Together Partnership
- i. The Aging Together Partnership moved into its first year of implementation funding with the hiring of a Communications Specialist

and four County Resource Specialists. This partnership is moving forward on its previously developed work plan focused on long term care issues in the region. The RRCSB-AAA is a partnering agency and fiscal agent for this project funded through the Robert Wood Johnson Foundation.

- g. Current Priorities
 - i. Develop and open a new 4 bed group home for adults with serious mental illness as part of transformation programs.
 - ii. Expand the supported living program allowing for increased placements and support for new referrals for adults with mental illness as part of transformation initiative.
 - iii. Increase staff training for person centered planning.
 - iv. Apply for and achieve vendor status with the Department of Rehabilitative Services for Supported Employment.
 - v. Increase marketing of work and employment opportunities in the community.

- 3. **Nutrition / Transportation** services operate five senior centers, home delivered meals, volunteer programs and a comprehensive transportation network for RRCSB-AAA services.
 - a. Food Service Operations
 - i. All menus were reviewed and updated by a Registered Dietician to include the addition of special diets.
 - ii. An internal employee was promoted to the Chief Cook position following the retirement of the prior incumbent.
 - b. Senior Center Services
 - i. The number of people served in this program increased by 10% from last year. Major fund raising activities both regionally and at each Center resulted in over \$40,000 to support senior socialization and recreational activities.
 - c. Home-Delivered Meals
 - i. The number of people served in this program increased by 17% from last year.
 - d. Retired Senior Volunteer Program
 - i. 326 seniors performed 36,430 hours of service at numerous volunteer stations in the region. The driving program logged 671 trips for a total of 48,602 miles, primarily for taking individuals to medical appointments.
 - e. Transportation
 - i. This department increased its wheelchair transport capability with the utilization of three new vehicles funded under a grant program.
 - ii. An enhanced vehicle maintenance program resulted in a net reduction in the number of road service calls.
 - iii. An internal review of processes has resulted in improvements to the level of Medicaid reimbursements received for routine transportation.
 - f. Older Workers Program
 - i. Clients of this program successfully transitioned to a Federal training

program with no interruption in training.

g. Current Priorities

- i. A new marketing and information brochure is under development to present nutrition programs of the agency.
- ii. The Central Kitchen has instituted a structured Cook cross-training program for improved consistency of coverage for the various food service demands.
- iii. Collaboration with the Aging Together Partnership is ongoing focused on individual County Resource Specialists working as a team to improve accessibility of long term care information in each locality.
- iv. Transit is evaluating collaboration opportunities with other local providers in a region wide effort.
- v. The transportation program is planning for expanded capability to serve a new group home program and the Culpeper Adult Day Care program.

4. Administrative Services Operations

a. Financial Management

i. Reimbursement

1. Credit / debit card swipe machines were installed at Bradford Road and at each outpatient clinic.
2. Reports for programs on reimbursement performance and monitoring were improved to allow for more effective management tracking.

ii. Accounting

1. All employees transitioned to Direct Deposit payroll.
2. The budget revision process and subsequent reporting for senior management and the Board of Directors was simplified.

b. Human Resources

- i. A new employee evaluation instrument and program was developed for implementation in fiscal 2007.
- ii. During fiscal 2006 one hundred positions were advertised at a per position advertising cost of approximately \$1,038, for a total expenditure of \$103,882.
- iii. Eighteen Workers Compensation claims for benefits were processed, down from nineteen in fiscal 2005 and from 27 in fiscal 2004. A multiple-year initiative in collaboration with our insurance carrier has been successful in reducing the number of claims and is beginning to reduce premiums.

c. Information Technology

- i. A comprehensive data tracking system was successfully implemented resulting in improved external reporting and more informative reports for use by management in decision-making.
- ii. The IT Department also successfully implemented a fully electronic initial contact form giving managers quick access to initial contact information for improved management and resource allocation.

- d. Procurement
 - i. The department converted the agency’s long distance carrier to Virginia Department of Information Technology resulting in a substantial overall reduction in long distance charges.
 - ii. Traditional petty cash accounts were changed to managed credit cards resulting in improved controls and easier access for day-to-day program needs.
- e. Current Priorities
 - i. Increase use of web-based advertising and recruitment / agency information.
 - ii. Complete and launch agency website.
 - iii. Develop Cultural Competency program for staff
 - iv. Continue assessment of business practices against accreditation standards.

Services Provided

<u>Mental Health</u>		
<u>Service</u>	<u>Individuals Served</u>	<u>Service Amount</u>

<u>Mental Health</u>		
Behavioral Healthcare Services - Outpatient and Emergency Services	3,111	27,102 hours of counseling, evaluation, psychiatric evaluation and treatment to all ages.
Case Management	587	14,021 hours of services to children and adults
Psychosocial Rehabilitation (Visions)	69	37,339 hours of service to adults with long term mental illness
Supported Living	32	10,470 hours of services to individuals being supported in their own apartments.

<u>Mental Retardation</u>		
<u>Service</u>	<u>Individuals Served</u>	<u>Service Amount</u>
Case Management	262	9,725 hours of service to adults with mental retardation
Group Homes	44	14,122 hours of services for adults with mental retardation in RRCSB-AAA operated group homes
Supported Living	29	9,780 hours of support to adults with mental retardation in their own apartments
Infant/Toddler	264	5,127 hours of services to infants with developmental delay and their families. Continues to be the fastest growing program in the organization.
Day Rehabilitation (Bridges)	105	105,300 for adults with mental retardation receiving day rehabilitation services

<u>Substance Abuse</u>		
<u>Service</u>	<u>Individuals Served</u>	<u>Service Amount</u>

<u>Substance Abuse</u>		
Behavioral Healthcare, Outpatient and Emergency	518	3,749 hours of services for adults with primary substance abuse in need of evaluation and treatment
Case Management	336	703 hours of services providing support and linkage to needed services
Women's Programs	50	2,291 days of services to women in need of day treatment for substance abuse
Residential Treatment	430	10,552 days of services to the region (Boxwood) in a 28-day program

<u>Aging</u>		
<u>Service</u>	<u>Individuals Served</u>	<u>Service Amount</u>
Advocacy	923	Services for seniors needing assistance with needs and linkage to community resources
Adult Day Care	10	Adult Day Care services for seniors
In-Home Personal Care	18	Medicaid funded in-home personal care
Senior Centers	374	Nutrition and education / socialization programs for senior in all five localities
Home Delivered Meals	233	Hot and frozen meals delivered to seniors in all five localities
Volunteer Services	334	Volunteers, age 55 and better providing services for RRCSB-AAA programs and the community at large
Transportation Services	1,493,738 Miles	Transportation services to and from RRCSB-AAA programs and Didlake.
Older Worker Program	11	Paid work opportunities for older workers. Program ended June 30, 2006.

Consolidated Financial Data ¹
Revenue Sources

¹ Unaudited - Report consolidates information from both State and Federal fiscal years.

<u>Source</u>	<u>Amount</u>	<u>Comments</u>
State of Virginia	\$3,300,146	
All Local Sources	1,043,370	
Fees for Services	6,474,471	
Federal Funds	2,230,839	
Other Sources	575,399	
Other Transfers	2,640,522	
Grand Total Revenue	\$16,264,747	Total revenue down \$199,700 from prior year.

Expenditures

<u>Source</u>	<u>Amount</u>	<u>Comments</u>
Personnel	\$10,573,980	Increase of \$1,362,662 from prior year. Implemented new class/comp program.
Staff Development	49,323	
Facility Expense	1,430,229	
Equipment / Supplies	1,084,146	
Travel / Transportation	543,126	
Professional Services	920,235	
Other	360,628	
Sub-Total	14,961,667	
Admin + Food Service	1,614,173	
Transportation	549,097	
Aging Services	25,236	
Part C Transfer	148,260	
Sub-Total: Transfers	2,336,766	
Grand Total Expenses	\$17,298,433	

<u>Source</u>	<u>Amount</u>	<u>Comments</u>
Grant Total Revenues	\$16,264,747	
Revenues – Expenditures	(\$1,033,686)	Current year deficit reduced prior year fund balances. Deficit also includes purchase of property for new Boxwood development for \$647,000.

Corporate Compliance

1. Risk Management

- a. Health and Safety: During Fiscal 2006 staff reported 377 incidents through the RRCSB-AAA incident reporting processes for significant events. The significant growth from Fiscal 2005 (280 events) stem primarily from improved reporting of medication errors. The agency senior management team and Health and Safety Committee have focused specific attention to this issue resulting in improved reporting and staff training. The Committee has also approved and implemented a falls assessment and prevention program focused on nutrition and transit services. An improved quarterly reporting system has been implemented that takes critical Health and Safety data and recommendations through the senior executive staff quarterly and is provided to the Board of Directors on the same schedule as information.
- b. Disaster Mental Health Preparedness: Several initiatives this year focused on both internal and external disaster preparedness activities. These activities included:
 - i. Development of a basic All Hazards Disaster Mental Health Plan that outlines RRCSB responses to local and regional disasters.
 - ii. Development of Memorandum of Understandings with key players.
 - iii. Initial development of internal disaster recovery plans.
 - iv. Collaboration with Health Department and other local agencies to identify special populations and develop plans to assist them in the event of an emergency.
 - v. Training of 39 RRCSB staff in Disaster Mental Health 101.
- c. Accessibility: This year specific staff were identified at each program location as the contact points for accessibility concerns. An Accessibility Barrier Report was developed as a standard method for reporting issues. In February a diversity and etiquette training was added to routine new employee orientation. Also this year:
 - i. RRCSB-AAA's Human Rights posters were updated in English and Spanish.
 - ii. Fire Safety Evacuation Materials (low literacy format) were implemented in certain programs.
 - iii. Additional handicapped parking spaces were added at the Bradford Road offices to increase availability for both staff and consumers.

- d. Reports to Regulatory Agencies: Eleven reports (1 – Serious Injury, 9 – Deaths) were reported to regulatory bodies. All of these events are reviewed for analysis of causal factors and prevention. Of the nine reported deaths, one was a suspected suicide that was clinically reviewed by management.

2. Consumer Affairs and Human Rights

- a. Staff Training: During Fiscal 2006 Human Rights orientation was provided for 43 participants. During this year primary responsibility for this was moved to program managers. After evaluating this shift in responsibility, however, we are planning on moving this back to being a primary responsibility of Quality Analyst staff to assure completion and continuity. Quality Analyst staff provided training on Human Rights, Privacy, and subpoena handling to 219 employees in Fiscal 2006. An improved Human Rights reporting program involving quarterly reports to the senior executive staff with recommendations was instituted. These reports are also shared with the Local Human Rights Committee and the Board of Directors as information.
 - b. Complaint Handling: During Fiscal 2006 thirteen informal and five formal Human Rights complaints were handled to the satisfaction of the consumer.
 - c. Investigations: During Fiscal 2006 we had 20 allegations of abuse compared with 15 in Fiscal 2005. All of these allegations were in agency residential programs. Following investigation 4 of the 20 were founded.
 - d. Privacy: The agency Privacy Officer conducted 21 privacy issue consultations with staff this year. An increase has been seen in both the number of record subpoenas (8 in Fiscal 06, 6 in Fiscal 05) and number of witness subpoenas (23 in Fiscal 06, 10 in Fiscal 05). Education about this risk area continues to be reinforced through staff training and special sessions with legal counsel at Clinical Services in-service training.
 - e. Referral Source Satisfaction: Local Departments of Social Services and School System Special Education Departments participated in satisfaction surveys this year. The Special Education Department survey results were shared with staff, but response rate was poor despite follow-up phone calls. The Social Services survey resulted in significant information indicating areas of both satisfaction and dissatisfaction with access to agency programs. As a result of the Social Services survey, several meetings have been held with local social services staff to improve communication and collaboration. This has led to greater sensitivity to social services needs and service delivery improvements where feasible. The results of this survey have been reviewed with recommendations from the senior executive staff. This information is also shared with the Board of Directors.
3. Regulatory Compliance: All RRCSB-AAA programs have maintained full licensed status throughout the year from the applicable regulatory authorities. Announced and unannounced visits were conducted by reviewers from both the Department of Mental Health, Mental Retardation and Substance Abuse Services, as well as the Department of Medical Assistance Services (Medicaid).
 4. Quality Record Reviews / Archives: During Fiscal 2006, 245 records from outpatient services were randomly pulled for all providers and evaluated for basic compliance with

agency quantitative record requirements. Significant issues were identified for the provider for correction in the record. Throughout the year overall numbers of those scoring in the satisfactory range improved from 28% to 59%. This quantitative assessment will continue in Fiscal 2007 aimed at coordinating the results with the Data Quality Work Group. Individual programs and divisions have their own qualitative record review tools that examine the quality of treatment planning and service delivery documentation.

5. Corporate Compliance Summary: During Fiscal 2006 there were no reportable findings under the agency Corporate Compliance program. This program is currently being refined for communication to all staff to support the integrity of the overall third-party billing process.

Performance Analysis for 2006

1. During Fiscal 2006 core work groups were formalized with an organized reporting structure for both senior management and the Board of Directors. In future annual reports these work groups will report on their major activities and agency performance using priorities established by the Planning, Development and Performance Improvement work group. The core work groups are:
 - a. Planning, Development and Performance Improvement
 - b. Health, Safety and Accessibility
 - c. Human Rights
 - d. Data Quality
 - e. Information Technology
 - f. Workforce Development
 - g. Organizational Compliance
 - h. Outcomes Management
 - i. Service Satisfaction
 - j. Risk Management

Many of the individual programs of the RRCSB-AAA maintain more detailed individual annual reports that are available to interested parties. Additional information is available to any interested party by contacting:

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