



GPCS BOARD MEETING
September 8, 2025 at 4:30 P.M.
Pathways (Goochland)

AGENDA

- I. Minutes of the August 4, 2025 Board Meeting
Pages: 2-5
***Action: Approve or amend August 2025 minutes.**
- II. Public Comment
- III. Presentation on FOIA
Pages: N/A
***Informational**
- IV. Powhatan Building Updates -- Toby
Pages: N/A
***Informational**
- V. Additional Holiday Hours
Pages: N/A
***Informational**
- VI. Strategic Plan
Pages:
***Action: Approve the FY26-FY28 Strategic Plan**
- VII. Reports
 - a. Board Chair
 - b. Senior Developmental Services Director
 - c. Senior Clinical Director
 - d. Senior Administrative Director
 - e. Executive Director
 - f. Other Reports***Informational**
- VIII. Closed Session: E.D. Performance Evaluation
Pages: N/A
- IX. Adjourn

Next Meeting: October 6, 2025. Location: **Village conference room** in Powhatan

GOOCHLAND POWHATAN COMMUNITY SERVICES
MINUTES
August 4, 2025

Goochland Powhatan Community Services Board of Directors held its August 2025 meeting on Monday, August 4, 2025, in Powhatan.

Present

Michael Asip
James Babcock
Stephen Hancock
Joyce Layne-Jordan
Sandra Leabough
Linda Revels
Hannah Robicheau
Erin Tierney-Butler

Absent

Marcus Allen
Crystal Neilson-Hall

Staff Attending

Toby Fritz
Carinne Kight
Lateshia Brown
Allison Middleton
Jason Chatman

Welcome and Introductions e

Mike Asip welcomed all attending Board members and thanked them for joining the meeting. There were no additions to the agenda. Toby introduced the two new Board members Hannah Robicheau and Erin Tierney-Butler.

Minutes

June 2025 meeting minutes were reviewed for approval. No edits were noted.

ACTION: Motion to approve June 2025 meeting minutes as amended was made by S. Hancock, seconded by J. Babcock. Motion approved by all in attendance, none opposed. Motion carried.

Public Comment

None

Presentation

Allison Middleton, Substance Use Recovery (SUR) Manager, presented on the various services that the SUR unit provide. These services include Pathways, which is a peer led community-based program held once a week in each county. Other programs include substance use disorder case management, substance use outpatient therapy, office-based addiction treatment, peer support services, and mobile outreach.

Powhatan Building Updates

Toby reported that over the next six months he and the leadership team will be coordinating with the builder on infrastructure like IT within the building. The anticipated date of seeing movement on the building is based solely on weather. Rick's contractor is finishing up a job which has been delayed due to weather, which is delaying his move to our building.

Strategic Plan

Toby reported that he sent the final draft of the strategic plan to the board in July. He explained that leadership team focused on the key things that can be accomplished in the next three years and that's what is included in the plan. He noted that there are six key focus areas

- a. Communication: Strengthening how we connect internally and with our community
 - a. To support this area, we are trying to be more intentional at which events we attend. Additionally, noted in this point is the development of a communications focused staff for events and digital media and getting the message out there with marketing.
- b. Growth and Development: Expanding services, technology, and facilities to meet evolving needs.
 - a. Leadership will develop an intentional plan to support this key point. Evaluate where service gaps exist and plan around those.
- c. Community Partnerships: Increasing our visibility and collaborative impact through strong relationships.
 - a. This key point focuses on developing visibility in terms of being out in the community events but also looking at referral networks and enhancing same day access process.
- d. Financial Sustainability: Ensuring long-term stability and responsible resource management.
 - a. This includes being good stewards with money provided to us. Ensure sustainable and competitive compensation as well as program development to increase revenue.
- e. Service Delivery: Becoming the preferred provider of high-quality, individualized care.
 - a. GPCS will be known as provider of choice in the counties, in order to do that evaluate how to continually improve across all services provided.
- f. Staff Development: Fostering a supportive, growth-oriented, and high-performing workplace.
 - a. Support an environment where we can be known as an employer of choice. This includes becoming certified as a great place to work through the great place to work survey.

Toby reported that he will provide the Board with quarterly reports on the strategic plan implementation. Mike asked the board members to take time and review the strategic plan in full as they will vote on approval of it next month. Any questions board members have can be emailed to Toby so he can report back and include all board members in the responses. Mike suggested a large chart of what's due when as identified in the plan. Suggestion was for a graphic with table/timeline

Toby informed the board that in conjunction with development of the strategic plan, the agency worked together to develop new values for the agency. Toby distributed a survey to the agency and then based on that survey the leadership team conducted a "value madness" competition where the suggested values were put up against each other and voted on. Once down to six there was significant conversation at the all staff meeting around these last six and the final three were chosen; Advocate, Collaborate, and Trust.

Reports

Board Chair –

Mike thanked all the board members for their continued, or new, participation on the board and for entrusting him as chair. He also noted his appreciation for all that staff are doing at the organization. He let the board know background and how some of his passions coincide with the mission of GPCS. Including workforce development and engaging consumers who are in school and supported as minors with the school and special education systems but then reach adulthood and don't have that support. He discussed possibly partnering with DARS for workforce development. Mike also reported that he and Toby met recently and will continue to meet regularly. There will be a closed session to discuss Toby's evaluation.

Senior Developmental Services Director –

Lateshia noted that Toby provided the quality report drafted by the compliance director. On the document there is a section in relation to developmental services and audit results. Recently developmental services had three audits/reviews within six weeks DMAS, HSAG, and Licensing. Results from HSAG have not been received yet, however the other two audits did result in some citations. These citations were anticipated as many were related to documenting potential risks and have already been addressed with the implementation of the updated ISP developed by DBHDS. The new ISP format ensures all potential risks are addressed. Developmental services has a quality assurance coordinator within the team who tracks all citations and monitors progress on existing Corrective Action Plans.

Senior Clinical Director –

No report

Senior Administrative Director –

Carinne reported that there has been a lot of movement within the organization lately including a developmental services case manager moving to a mental health case manager position and an emergency services clinician moving into a mental health outpatient clinician position. As such there are currently vacancies in the positions they are vacating. Also there continues to be a need for in-home support specialists. The board discussed the use of job fairs and platforms like indeed for recruiting and discussed the low turnover and vacancy rates the agency has.

Executive Director –

Toby noted that he sent out his executive report last week. He highlighted a few items from the report including new funds received. He reminded them that in a meeting earlier this month they were informed of GPCS losing money due to a new DBHDS funding allocation for Step-VA funds. He noted that since then GPCS has been notified they will get a one-time grant to offset the funds that were lost. Toby also noted that he is participating in a group to evaluate this funding formula and further changes to the allocations. Another funding stream that is being received is \$108,000 in federal funds to support school-based services. These funds will be received through Goochland schools as they have been approved for the federal grant again in FY2026. This grant supports the GPCS school-based clinicians. Toby is talking with Powhatan schools to determine if they received the grant as well.

At approximately 5:35 p.m., S. Hancock moved that the Board convene in a closed meeting pursuant to Virginia Code § 2.2-3711. for Discussion, consideration, or interviews of prospective candidates for employment; assignment, appointment, promotion, performance, demotion, salaries, discipline, or resignation of specific public officers, appointees, or employees of any public body. S. Leabough seconded this motion, and the Board unanimously approved it.

Reconvened in Regular Session

Whereas the Goochland-Powhatan Community Services Board of Directors convened in a closed meeting on this date pursuant to an affirmative recorded vote and in accordance with the provision of the Virginia Freedom of Information Act; and whereas § 2.2-3712.D of the Code of Virginia requires a certification by this Board that such closed meeting was conducted in conformity with the Virginia Freedom of Information Act. Now therefore, be it resolved that the Goochland Powhatan Community Services Board of Directors certifies that, to the best of each member's knowledge, only public business matters lawfully exempted from open meeting requirements under the Freedom of Information Act, and only such public business matters as were identified in the motion convening the closed meeting were heard, discussed, or considered by the Board.

ACTION: Motion made by J. Babcock to certify conformity of the closed meeting and to reconvene the regular session, seconded by S. Leabough. All members affirmed this.

The meeting was adjourned at 6:04 pm.

Jamie Babcock, Secretary
JB/ck

Date

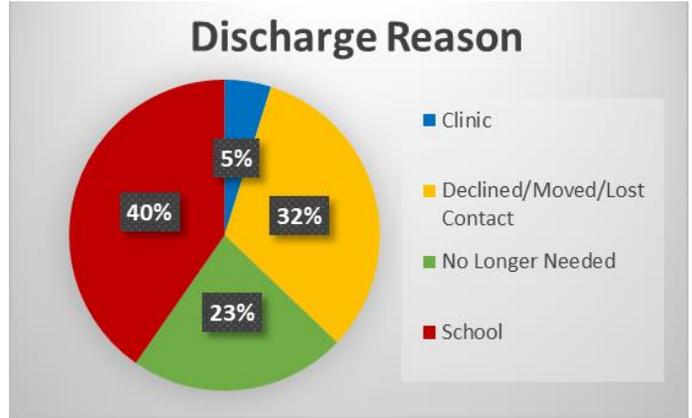
DEVELOPMENTAL SERVICES

September 2025 Board Report

Parent-Infant Education Program (PIEP)

We had 7 referrals to PIEP in August, 7 children were discharged, and we served 61 families with active IFSPs (another 12 in the intake process).

Looking at the last 12 months of data for children who were discharged from PIEP after receiving services, the majority of children who still needed support pursued IEP services from our schools. While the process to transition to school-based services may only take a few months on paper, we begin planning for this transition with the family as soon as the first treatment plan is written. Most of the children transitioning to school will do so at the start of the academic year, in late August or early September, so we start putting things in motion for these families in March and April. This ensures there will be time to consider every option without time pressure, including offering conferences with the schools, connecting families with previous graduates, and then preparing the family for the changes to come.



This ensures there will be time to consider every option without time pressure, including offering conferences with the schools, connecting families with previous graduates, and then preparing the family for the changes to come.

Submitted by Jeanine Vassar,
Program Manager, Parent-Infant Education Program

Developmental Services Support Coordination (ID/DD)

Developmental Services (DS) Support Coordinators consistently work to ensure individuals have access to essential community-based services and resources. Their responsibilities include linking, referring, and closely monitoring services, as well as safeguarding the health and safety of all individuals. The Support Coordinators and the Support Coordinator Manager participated in ongoing meetings such as Adult Crisis Advisory Council, Provider Data Summary, SCQR data review, and HSAG review, throughout the month to foster professional development and enhance service delivery. We will be wishing one of our Support Coordinators well in September as she leaves to begin a new position within the agency, however we're excited to welcome a new member to the team. We are actively interviewing candidates to fill the position.

| | |
|------------------------------------|------------|
| Active CM (Medicaid) | 105 |
| Active CM (Non-Medicaid) | 0 |
| Waiver Breakdown | |
| Community Living | 58 |
| Family & Individual | 46 |
| Building Independence | 1 |
| Active Waiver Total | 105 |
| Non-waiver Active CM | 0 |
| Total Individuals Served | 105 |
| Transfers | 0 |
| DD Waiver Wait List Numbers | |
| Priority 1 | 3 |
| Priority 2 | 31 |
| Priority 3 | 36 |
| Wait List Total | 70 |

Submitted by LaTasha Dodson,
Program Manager, Developmental Services (DS) Support Coordination

In Home Support Services

Developmental Services

We currently have 14 individuals enrolled in the In-Home Support Program, and 12 are actively receiving services. We're actively recruiting staff, with a full-time position interview scheduled for August 29th.

The individuals in the program have been busy enjoying the summer. Two have been volunteering: one at a local church's food pantry and clothes closet, and another with Shalom Farms.

Our DSPs (Direct Support Professionals) have been helping the individuals stay engaged and socialized with a variety of fun outings, including:

- Local libraries for crafts and movie nights
 - Shopping at malls, flea markets, and other stores
 - Movies at Henrico Theater
 - Church
 - Bowling and Sky Zone
 - Swimming at the YMCA pool
 - Visiting a friend's house for swimming
 - Going out for ice cream
 - Cookouts
 - Saturday morning breakfasts at Cracker Barrel and/or Rise and Shine Diner.
- As was mentioned in last month's board report, one consumer experienced the beach for the first time, a few pictures included from this trip.

Submitted by: Lisa Williams,
Program Manager, In Home Support Services

Developmental Services Quality Assurance

In August, the Developmental Services Quality Assurance (DS QA) Coordinator continued to support the Developmental Services Teams by ensuring regulatory compliance and high-quality service delivery. Two key reviews were completed this month: the Support Coordinator Quality Review (SCQR) and Health Services Advisory Group (HSAG) Round 7.

Support Coordinator Quality Review (SCQR)

We've identified significant data discrepancies between our internal records and the data reported by the state. Our internal data shows a higher compliance rate with state targets compared to the state's official report. This was a collaborative effort involving the DS QA Coordinator, the Developmental Services Case Management Program Manager, and Business Analyst. We've reported these inconsistencies to the DHBDS Data Warehouse, which is currently investigating our concerns. Despite these data issues, our internal review indicates that the agency is on target for most of the indicators and Individual Support Plan (ISP) measures reviewed.

Health Services Advisory Group (HSAG) Round 7

In response to the HSAG Round 7 report, we've requested technical assistance to clarify specific findings and ensure our response is accurate and complete. The DS QA Coordinator is currently working with the DS Program Managers to finalize our official response, which is due by the September 8, 2025, deadline.

Submitted by Naomi Robinson,
Developmental Services Quality Assurance Coordinator

Day Support Services (ID/DD)

Monacan

Monacan Services is excited to welcome a new full-time DSP to the program starting September 2nd. Our program currently serves 19 consumers.



Recently, Monacan consumers attended Special Needs Bible School at Graceland Baptist Church. It was a wonderful week filled with friends from the community, along with singing, dancing, and games that everyone enjoyed.

This month, the consumers are eager to return to volunteering with Backpacks of Love after taking a summer break while school was out. They truly enjoy helping pack snack bags for school-age children to take home over the weekend.

As we move into the season ahead, Monacan is looking forward to all the fun Fall and Halloween festivities to come!

Submitted by Maitlin Ware,
Program Manager, Monacan Services

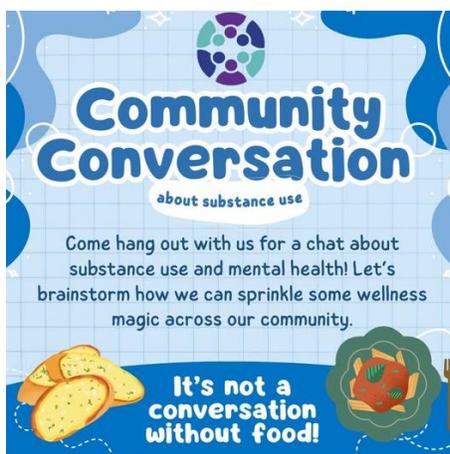
Clinical Board Report- July 2025

Prevention

Travis Fellows partnered with the Chickahominy Health District to teach 11 participants Adult Mental Health First Aid. Even in a virtual format, the class was engaging and well received. Goochland Pharmacy requested drug deactivation kits to help patrons safely dispose of unwanted medications and reduce overdose risk. They are also exploring new ways to share *Lock and Talk* supplies with community members who may be more vulnerable while using medication. Travis continued representing Goochland Powhatan Community Services in the ongoing project with the Virginia Department of Health and the plan was completed in July.

Robin attended the interdepartmental *In Their Shoes* training hosted by Jordan Schellin and Julie McIsaac. The session offered a powerful perspective on the journey of someone experiencing addiction and other challenges. I left with a deeper understanding of why there's no simple solution when it comes to accessing resources—yet I also believe we can, step by step, make the system easier to navigate. Following that training, Travis and I co-facilitated an ACEs class for 13 participants. Many were surprised by the research showing how early adversity—including suicide risk—can impact families across generations. The hopeful takeaway: well-placed strategies really can change the trajectory.

RSAAC Community Conversation – RSAAC hosted its first *Community Conversation on Substance Use* with five participants. The group generated creative ideas for future outreach and marketing, especially ways to reach people who might not be able to attend daytime events.



Substance Use and Mental Health Recovery Team:

The SUR team had the opportunity to provide Mobile Outreach support, Community led groups, Rapid Revive training, and clinical and case management services to consumers during the month of July.

Our Peer Recovery Specialists facilitated community groups for recovery and started to mentor two Region 4 Peer Interns this month. Two of the Peer Recovery Specialists accompanied the Powhatan County Mobile Outreach Coordinator to The Free Clinic in Powhatan to provide Rapid REVIVE training to their staff and participated in the Interdepartmental Training in Powhatan County. One of our Peer Recovery Specialists completed SMART Family and Friends training and will be offering this support group to the Powhatan and Goochland communities in August.

Our Substance Use clinicians continue to lead clinical groups and are connecting more consumers with long-term support. Our clinicians also conducted 81 group and individual therapy sessions. Both Clinicians and the SUR Manager attended the VSIAS Conference in Williamsburg to learn more about Substance Use trends and supports in the state.

Our Mental Health Case Management team conducted 24 case management appointments and continue to provide wraparound supports to consumers to ensure timely access to psychiatric, medical, and community services. Our Substance Use Case manager/Care Coordinator supported clients and community members in accessing appropriate resources and treatment options and continued to maintain services with 18 individuals this reporting period.

Our team started the planning process for HopeFest, our Overdose Awareness Event scheduled for August and we can't wait to share how this event turns out and the number of people we will connect to resources in our community.

Outpatient Team:

MHOP: 237 clients (107 child, 130 adults)

SUDOP: 17 clients (3 youth and 14 adults)

We conducted interviews for open MHOP positions and one CSA case support position. We have chosen candidates that will be starting in August and September.

We also will have two first year VCU MSW interns join us in late August.

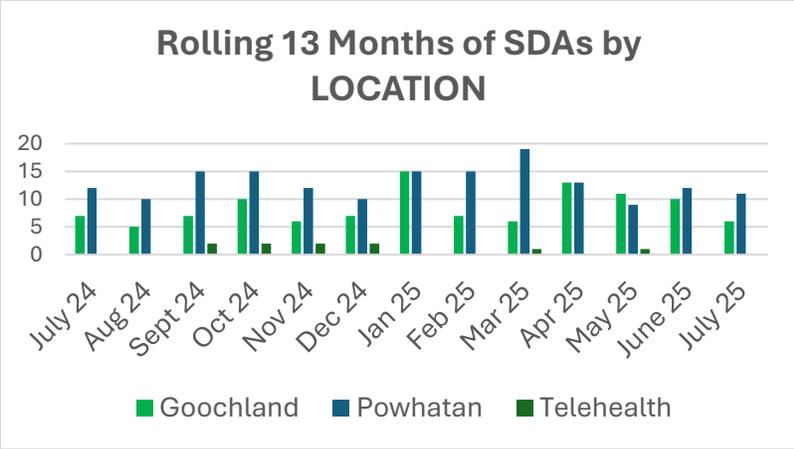
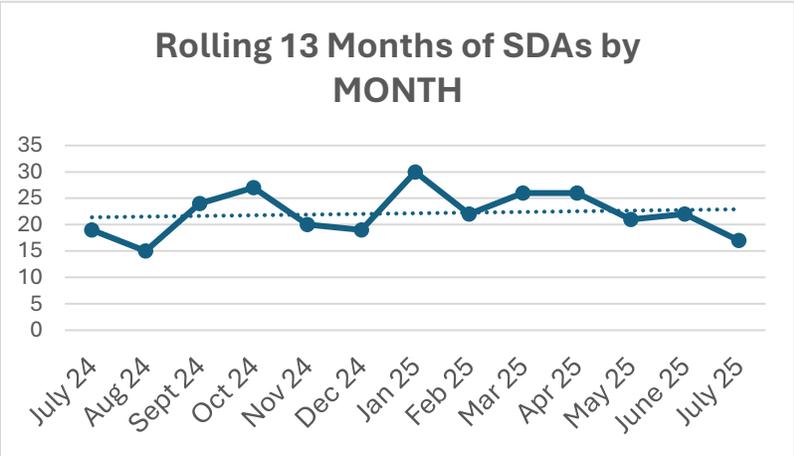
SBS: All our SBS clinicians are now certified and trained to provide CM for kids in the schools that are referred and qualify for that service. Are still providing individual therapy as well.

We received positive feedback regarding our summer groups:

- Goochland FAPT/families identified the D&D group has been great and helpful!
- Partnership with Goochland Parks and Rec summer groups went well they would love to have us join in next summer and do more with their programs if possible.
- Email from parent on Worry worriers summer group: "I wanted to say thank you for putting together this camp this summer!!! [My child] has had some struggles with "big feelings" and we found that your camp has given her some very valuable tools. And she shared with us some of these things that she never had before. It's opened up some dialogue that is invaluable. Thank you again for the opportunity to help our kids. You have made a huge difference in their growth and I hope the program continues!!! Thank you!"

Emergency Services/Access Team

SDA: In July 2025, the Access Team completed 17 SDA assessments, 11 assessments in the Powhatan Clinic, and 6 in the Goochland Clinic. This is a slight decrease compared to previous months, which is a usual pattern for summer months. On 7/30/25, 2 members of the team attended County-wide training related to consumers who live with Substance Use Disorder. This training included an interactive activity related to services that individuals impacted by substance use may access. The goal was to help the participants in the training understand the experience of an individual who is seeking help. During this month comprehensive assessment was implemented with success. We learned that the average time of initial evaluation increases by an average of 15-20 minutes due to the assessment being more detailed in nature and clinicians learning this new tool and process.



Emergency Services: The Access Team provided 22 emergency services in July 2025. There were 4 Hospital Liaison Visits, 10 ES Phone Calls, 1 Crisis Interventions, and 4 Prescreen Evaluations completed by other CSBs. This month, the Emergency Services Manager attended 2 meetings regarding facility referrals utilizing a statewide platform, Behavioral Health Link. The purpose of the meetings is to discuss issues with the utilization of the platform with various stakeholders, including DBHDS, the technical support, private and state facilities, and the CSBs Emergency Services Departments, to improve the process of placement of individuals in mental health crisis in psychiatric facilities.

