Goochland Powhatan
COMMUNITY SERVICES
Connect. Grow. Thrive.

GPCS BOARD MEETING AGENDA

September 14, 2026 at 4:30 P.M.

Pathways

I. Welcome

II. Minutes of August 3rd, 2026, Board Meeting
Pages:
***Action: Approve or amend August 2026 minutes.**

III. Public Comment

IV. Floating Holiday proposal
Pages:
***Action: Approve or amend the proposal for one additional floating holiday**

V. FY2027 Performance Contract
Pages:
***Action: Approve the FY2027 Performance Contract**

VI. Fiscal Management
a. *Reserve Adequacy & Governance Policy draft - Informational
b. **GPCS-managed bank account proposal - Action
Pages:
***Draft policy is for review**
****Action: Approve or amend the proposal for bank selection**

VII. Facility Updates
Pages: N/A
***Informational**

VIII. Reports
a. Board Chair
b. Senior Developmental Services Director
c. Senior Clinical Director
d. Senior Administrative Director
e. Executive Director
f. Other Reports
***Informational**

IX. Closed Session:
Pages: N/A
***Action: Motion to enter closed session, and certification of closed session actions taken at end of session.**

X. Adjourn

Next Meeting: October 5th, 2026.
Location: Powhatan Village Conference room – (1st Floor)

GOOCHLAND POWHATAN COMMUNITY SERVICES
MINUTES
August 3, 2026

Goochland Powhatan Community Services Board of Directors held its May 2026 meeting on Monday, August 3, 2026, in Powhatan.

Present	Absent
Marcus Allen	Rudy Gregory
Michael Asip	
Stephen Hancock	
Joyce Layne-Jordan	
Sandra Leabough	
Crystal Neilson-Hall	
Linda Revels	
Hannah Robicheau	
Erin Tierney-Butler	

Staff Attending
Toby Fritz
Lateshia Brown
Carinne Kight

Welcome
Mike Asip welcomed all attending Board members and thanked them for joining the meeting. There were no additions to the agenda.

Minutes
The minutes of June 2026 meeting were reviewed for approval. No edits were noted.

ACTION: A motion to approve the June 2026 meeting minutes was made by C. Neilson-Hall and seconded by M. Allen. All in favor, no opposition. The motion carried.

Public Comment
None

Presentation: FY26 in review
Toby provided the Board with a review of the last 12 months. In the presentation Toby noted that GPCS had a strong performance in FY26, serving 1,309 residents with 42,214 services and achieving a 71% successful discharge rate along with a Net Promoter Score of 74 and 100% satisfaction from surveyed consumers. Major accomplishments included being certified as a Great Place to Work, successful advocacy that restored critical school based service funding, expansion of regional crisis partnerships, and staff led groups addressing improvements as noted in the Great Place to Work survey. The agency was able to provide bonuses, tuition assistance, and a no-cost health plan to enhance the workforce

experience. Construction of the Powhatan facility advanced with services expected to launch in April 2027, and FY2027 priorities were set to complete the transition, modernize the agency's website, and deepen staff recognition and communication practices.

Presentation: Budget for FY27

Toby presented the final FY27 budget. He reported that a balanced budget was achieved through restructuring certain priorities, including the realignment of the front office and reimbursement units under a single manager, and by leaving unfilled the position vacated due to employee retirement in May.

During the review, Toby noted that 83% of revenue is restricted, and 81.5% of the budget is allocated to personnel. He also highlighted anticipated increases in building expenses this year due to higher rent and utility costs associated with the move into the new Powhatan building. The budget includes a 3% cost-of-living adjustment for all employees hired prior to April 1, 2026. Additionally, the 9.1% increase in insurance costs was largely absorbed within the proposed budget.

To achieve balance, reductions were made, including the elimination of a CSA case manager position, a community engagement position, and the previously identified front desk position. Toby emphasized that no services were impacted by these reductions; however, contributions to capital and auto funds could not be continued under this budget.

Facility Updates

Toby provided an update on the construction progress for the new facility, noting that most windows have been installed and interior work is underway, with remaining exterior doors scheduled for later installation. He shared photos of the developing Monacan space to illustrate the ongoing interior progress. Toby noted that there were some questions about the partition in the all-purpose room, as Rick was unsure about it being included in building plans, however Toby and Rick have worked closely, and reviewed plans and the partition was included from the beginning.

Reports

Board Chair –

Mike expressed appreciation to the team for providing thorough written program reports, noting that their clarity and detail from Lateshia and Lisette and their staff, Jeanine, and Maitlin—allowed the Board to efficiently review key updates without extended presentations.

Mike also noted that looking ahead, a briefing on school based services, including an overview of the service model, how mental health supports are integrated within schools, and how the program balances instructional time and confidentiality would be helpful. He suggested that a school administrator participating in that discussion would be nice, to provide additional context.

Senior Developmental Services Director –

Lateisha informed the Board that the focus for Developmental Services has been the launch of the new Developmental Services Access Program, noting that the team is focused on increasing awareness of available DD resources and simplifying the process for individuals seeking placement on the waiver waitlist. She reported that walk-in access hours began July 1 and are offered on Tuesdays and Thursdays in Goochland and on Tuesdays in Powhatan. These specific days were selected to allow for a phased rollout and to ensure consistent staffing coverage for anyone seeking assistance during access hours.

Senior Clinical Director –

Toby provided Lisette's update as she was unable to attend the meeting. He noted that recently clinical services have hired 4 clinicians. Two of those are school based clinicians and two are substance use disorder clinicians. He also reminded the board that Hopefest is scheduled for August 29th from 11-2.

Senior Administrative Director –
Carinne reviewed current vacancies with the Board, which includes the continued opening for In-Home Support Services for part-time DSPs as well as a full-time Peer Recovery Specialist, which was just posted this week. She informed the Board that the independent financial auditors will be out at the end of the month to complete the FY26 audit. Additionally, DBHDS is putting out many surveys for completion that the administrative team is working on in conjunction with the clinical team.

Executive Director –
Toby highlighted the Developmental Services Access Program introduced earlier in the meeting, noting that the initiative represents excellent work by Lateshia, LaTasha, and their teams and reflects a significant advancement in how the agency supports individuals seeking DD resources. He informed the Board that state funding for staff raises and bonuses exceeded initial projections, allowing for strong bonus support this year. He also reminded members that the Board approved the FY budget in June based on estimated state funding with the understanding that any change over 5% would require re-approval; as the actual change is only 1%, no further Board action is needed. The Director reported ongoing work to secure bids for access control and security camera systems across all agency buildings. Bids received included $161,000 from one vendor and $130,000 from another, with the lower estimate tied to the ability to use the VCU cooperative purchasing agreement pending completion of the required procurement steps. He noted that this project may be appropriate for excess reserves and clarified that the scope covers all facilities, not solely the new building.
Toby also reminded Board members of the VACSB conference in October. Asking them to let him know if any were interested in attending so he could get registration and hotel set up for them.

ACTION: Motion made by C. Neilson-Hall to adjourn, seconded by M. Allen. All members affirmed, meeting adjourned

The meeting was adjourned at 5:15 pm.

_____ _____

Joyce Layne-Jordan, Secretary Date
JLJ/ck

MEMORANDUM

To: GPCS Board of Directors
From: Toby Fritz, Executive Director
Date: September 4, 2026

Subject: FY27 Floating Holiday Proposal

Background: The Governor recently granted state employees four additional hours of paid holiday time on Friday, September 4, before the Labor Day weekend. Because the announcement came shortly before the holiday, GPCS was not in a position to close with the same short notice without disrupting scheduled appointments and other services. Powhatan County responded by closing County offices for the full day on September 4.

Recommendation: Staff who currently receive floating holidays would receive one additional floating holiday during FY27. The additional day would be used in the same manner as other GPCS floating holidays, with normal scheduling and supervisory approval. This approach recognizes the additional holiday time provided by the Governor while allowing GPCS to maintain services and honor appointments already scheduled.

Requested Board Action: Approve one additional FY27 floating holiday for each employee who currently receives floating holiday benefits.

FY2026–2027 Performance Contract — Amendment 4
GPCS has one two-year contract with DBHDS for FY26 and FY27. It was updated by amendment rather than replaced. Amendment 4 took effect July 1, 2026.

What changed:
Medicaid billing — Required by state budget language (Item 299 #8s). GPCS must maximize billing and collection of Medicaid payments across all covered services, report total Medicaid revenue to DBHDS annually, and put mechanisms in place to inform clients how to apply for Medicaid coverage. The client-education requirement is new; the billing and reporting language was expanded.
Quality measures (Exhibit B) — Revised to clarify behavioral health quality management core measures, set benchmarks, track progress toward targets, and add quality improvement initiatives addressing systemic issues. *Specific measures are in Exhibit B, which is a separate document.*
Reporting calendar (Exhibit E) — Now specifies due dates for performance contract submissions, financial data, program data, local government audits, and CPA audits for FY26–27. Also sets dates for state and federal fund disbursements to GPCS and clarifies local match due dates.
Federal grant terms (Exhibit F) — Adds a Health and Human Services addendum on civil rights compliance, and restores SAMHSA Charitable Choice language that had been removed. DBHDS states these are non-negotiable conditions of receiving federal funds as a subrecipient. *Specific terms are in Exhibit F.*
Program requirements (Exhibit G) — Clarifies terms, conditions, and points of contact for programs GPCS receives on a recurring basis with established baseline requirements. Purpose is to reduce the number of separate Exhibit D documents both parties must process and track.
IT security (Exhibit I) — Newly added to the contract. Covers compliance with state and federal laws protecting sensitive healthcare data, intended to limit data security risk to both DBHDS and GPCS. *Specific requirements are in Exhibit I.*
DOJ Settlement (Exhibit M) — Updated for clarity on DOJ compliance and alignment with the quality improvement strategy. Non-negotiable.
Administrative procedures (Addendum I) — Appendix C on unspent balances rewritten entirely for consistency with DBHDS policy and General Assembly funding expectations. Appendix E adds development of Medicaid billing performance indicators by a DBHDS workgroup in the first quarter of SFY27. Appendix F restores language dropped when the Core Services Taxonomy sunset. New required training for CSB Executive Directors and CFOs covering role clarity, compliance, and system access.
Indirect cost rates — DBHDS revised its policy to clarify federal and state indirect cost rate requirements.
Local match — No change to the contract. DBHDS is directed to examine alternatives to the current 10% local match on state CSB funding and report recommendations to the Behavioral Health Commission by November 1, 2026 (Item 299 #1s).

GOOCHLAND POWHATAN COMMUNITY SERVICES

Reserve Adequacy & Governance Policy

Adopted by the Board of Directors: _____

It is the policy of Goochland Powhatan Community Services (GPCS) that an operating reserve will be maintained to protect the continuity of services during interruptions or delays in funding and to provide the Board of Directors a consistent standard for assessing GPCS's financial position. The following policy establishes the level of operating reserves GPCS will maintain, how that level is calculated, and how reserves are to be used.

A. POLICY STATEMENT

1. GPCS will maintain operating reserves equal to no less than six months of budgeted operating expenses, calculated on a rolling forward basis.
2. GPCS will maintain an additional 10% cash flow buffer above the six-month reserve amount.
3. Reserves held in excess of the combined target described above will be used judiciously, and only as approved under this policy.

B. SIX-MONTH RESERVE TARGET

1. The six-month reserve target is the sum of GPCS's budgeted operating expenses for the six months immediately following the current month.
    i. An amount calculated as of August 15, for example, is based on budgeted expenses for September through February.
    ii. Because the target is forward-looking and rolling, it is recalculated each month and will change as the fiscal year progresses and as annual budgets are adopted or amended.

C. CASH FLOW BUFFER

1. GPCS will maintain reserves equal to 110% of the six-month reserve target described above.
    i. The additional 10% is a cash flow buffer, intended to absorb short-term fluctuations in cash flow, unbudgeted or unanticipated expenses, and timing risk affecting state, federal, local, and grant-funded revenue.
    ii. The buffer is sized to cover GPCS's exposure for the remainder of the current month if an adverse funding event occurred with no advance warning. It is not intended to replace lost funding over an extended period.
    iii. In combination with the buffer, GPCS expects certain revenue to continue regardless of a disruption to government or grant funding, such as fee-for-service revenue from billing third-party payers for outpatient services.

D. USE OF EXCESS RESERVES

1. Reserves held above the combined six-month-plus-buffer target (the "Reserve Target") are excess reserves.

2. GPCS will use excess reserves judiciously and in accordance with any restrictions imposed on portions of the reserves.
3. Excess reserves may be used for one-time investments that advance GPCS's mission and strategic priorities, such as employee bonuses, benefits such as student loan assistance or tuition reimbursement, capital needs, service development, technology, and facility improvements.
4. Proposed uses of excess reserves in excess of $_____ require Board approval and are subject to the condition that the resulting reserve balance does not fall below the Reserve Target.

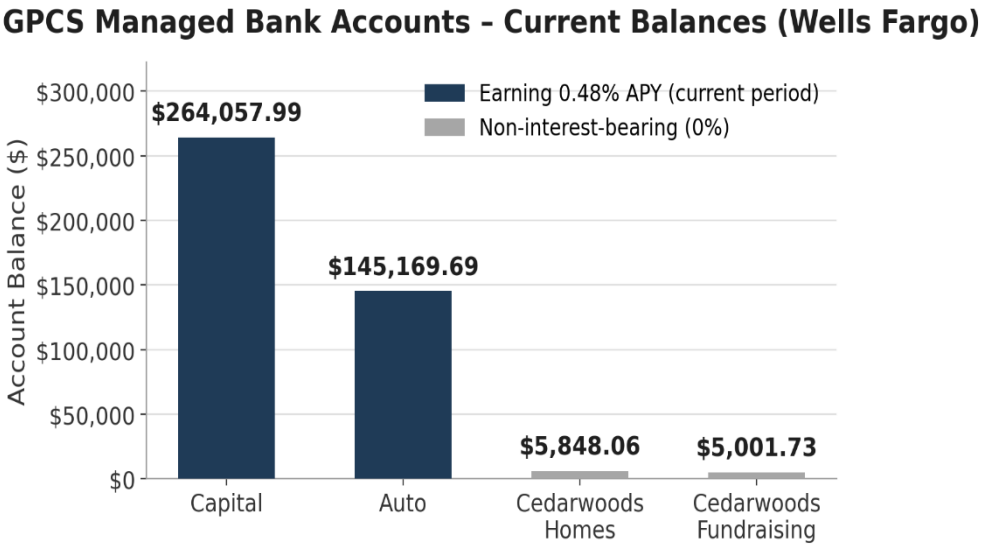
E. MONITORING AND REPORTING

1. The Executive Director will monitor the reserve balance against the six-month reserve target no less than quarterly and will report on the balance available for one-time investments.
2. If the reserve balance falls below 80% of the six-month reserve target, the Executive Director will notify the Board and present a plan and timeline to restore reserves.

GPCS Managed Bank Account Proposal

TO: GPCS Board of Directors
FROM: Toby Fritz, Executive Director
DATE: September 4, 2026
RE: GPCS Managed Bank Account Proposal

Overview



GPCS manages four accounts held at Wells Fargo: two small Cedarwoods accounts (fundraising and homes), an account for CSB capital expenditures, and an account for CSB auto expenditures. Current balances and annual percentage yields as of 9/4/2026 are shown in the graph. The Cedarwoods accounts do not earn any interest, and the Auto and Capital accounts earned an annual percentage yield of 0.48% for the most recent period.

Our experience with Wells Fargo has been challenging and has not met GPCS's customer service expectations. The rates offered are low. These accounts are used by GPCS to pay select expenses, such as the regular payment for Credible licenses. These are ACH payments that are not permitted to be processed through the main GPCS account currently held by Goochland County.

Process

GPCS leadership evaluated banking needs and determined that operational and fiscal stewardship needs required a review of alternative banking options that could better meet these needs. GPCS interviewed three banks to evaluate alternatives to Wells Fargo: Citizens and Farmers Bank (C&F Bank) on August 19, and Towne Bank and United Bank, both on August 26.

The first and most important criterion was compliance with Virginia law. As a public body, GPCS may hold its funds only with a bank the Commonwealth has approved as a "qualified public depository" under Virginia's Security for Public Deposits Act (Code of Virginia § 2.2-4400 et seq.). This law requires that any balance above the standard $250,000 federal deposit insurance limit be protected — either because the bank pledges collateral to cover the uninsured portion, or because the deposits are spread across a network of participating banks so the full balance stays within federal insurance limits. A bank that does not participate in this program cannot legally hold GPCS's public funds.

Beyond that threshold requirement, GPCS also weighed the following criteria, with compliance with Virginia law — as the foremost considerations:

- Preservation of capital and its availability when needed, while maximizing the potential return GPCS can earn, consistent with Virginia statute
- Branch locations within GPCS's Goochland/Powhatan catchment area
- Quality of customer service
- Ability to manage accounts online, including multiple user logins
- Ability to make ACH payments
- Security measures and compliance with Virginia statutes
- Interest rates available on deposits

Recommendation

United Bank was eliminated from consideration. Following the August 26 meeting, United Bank contacted GPCS by phone to confirm that it does not participate in the Security for Public Deposits Act — a statutory requirement for holding GPCS's public funds. This eliminated United Bank from further consideration.

Towne Bank presented a strong proposal and confirmed that it complies with Security for Public Deposits Act reporting requirements. Towne Bank remains a good option for GPCS to consider in the future. Current rates offered are lower than Citizens and Farmers Bank.

GPCS leadership recommends moving GPCS-managed accounts to Citizens and Farmers Bank (C&F). C&F has already been providing good customer service on the Cedarwoods Certificates of Deposit. During fiscal year 2026, GPCS also worked with C&F to move the CSB's credit cards to a program managed through a C&F partner, which improved GPCS's ability to manage its credit limit and gave GPCS an electronic way to report and monitor credit card expenses. C&F complies with the required Virginia statutes and offers better rates than GPCS currently receives at Wells Fargo or those offered currently by Towne Bank.

As of early September 2026, C&F quoted GPCS a Community Money Market rate of 3.25% APY on balances over $100,000 (3.00% APY for balances between $50,000 and $99,999), and an insured cash sweep money market option yielding 2.00% that can spread deposits above $250,000 across multiple institutions for expanded FDIC coverage. These rates were quoted directly by C&F and are subject to change.

Action

The request is to authorize the transition of GPCS-managed accounts for the CSB to C&F Bank.

MOTION: I move that the GPCS Board of Directors authorize GPCS leadership to transition GPCS-managed bank accounts for the CSB – the Capital and Auto funds - from Wells Fargo to Citizens and Farmers Bank (C&F Bank), and to take the steps necessary to complete that transition.

DEVELOPMENTAL SERVICES
September 2026 Board Report

Parent-Infant Education Program (PIEP)

Four children have been referred to PIEP so far in August. Two children have been discharged and we've served 76 children with active IFSPs (plus 12 more in the intake process).

While August means tax-free school shopping and replanning your commute to factor in all those buses, it also means a small exodus from PIEP as many of our families elect to discharge early to begin IEP services when all the other children are starting school. We help families prepare by talking through skills and schedules for preschool but we also have to prepare the parents for the differences between Early Intervention and Early Childhood Special Education. Even though we're sometimes described as "special education for babies" because we're also part of IDEA, the move to school-based services isn't just our program plus a cute lunchbox. Our treatment plans are called IFSPs because they're Individualized Family Service Plans – based on their family routines and priorities. Parents and caregivers are coached to provide the interventions to their own child because that's how children learn at this age, but once children reach preschool age, it's just as natural for them to learn straight from a teacher. IEPs are written in the context of the school environment and how to support them as a student. Parents are still part of the team that writes the plan but once they sign it, it's up to the school to implement it day to day. After months or years of being the agent of change for their child, this can be just as big a change as putting their baby on the big yellow bus.

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

In-Home Support Services:

In-Home Support Services currently serves 14 active clients, maintaining consistent care through a few staffing transitions. Recently, a new Direct Support Professional (DSP) successfully transitioned to working with a client whose previous caregiver departed, ensuring only a brief disruption in service. The In- Home team remains focused on helping individuals achieve personal growth and stay actively connected to their communities. For example, when a client who loves bowling wanted to visit specific venues, his new DSP helped him select his preferred location and successfully registered him for the remainder of the summer at a discounted rate. In addition, staff regularly go above and beyond to support families, illustrated by a DSP who recently drove a client to the VCU Dental Clinic because the individual's aging mother felt uncomfortable navigating city traffic.

In Home Staff also helped individuals with chores around the house to build confidence and everyday living skills. This includes supporting them with routine tasks like washing and changing bed linens, doing their own laundry, and keeping their bedrooms clean. They also work together on general household responsibilities, like taking out the trash, taking sorted items to the recycling center, and loading or unloading the dishwasher. Finally, individuals practiced preparing their own snacks and vacuuming, mastering the daily routines needed to live comfortably at home.

Other chosen activities that the consumers participated in and enjoyed were:

- Trips to get haircuts
- Trips to the nail salon
- The YMCA for swimming
- The Glen Allen Cultural Art Center
- Henrico Theater
- Bowling
- Different libraries
- Kings Dominion
- Maymont Park
- The Richmond Metro Zoo
- Bass Pro Shop
- Green Top Sporting Goods
- Various Parks
- Beaverdam Creek Battlefield
- Summer Market at Ginter Park Presbyterian Church
- International Dancing Festival
- Shopping at many different stores and malls

Of course, the clients loved going out to eat. Some met up every week for breakfast, while others enjoyed the occasional lunch or dinner out. Some of the restaurants chosen to dine out at were: Cracker Barrel, Bojangles, Rise & Shine Diner, Chick Fil A, Subway, Panera Bread, Arby's, Panda Express, Applebee's and many more.

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

Developmental Services Support Coordination (ID/DD)

Developmental Services Support Coordinators empower independence by linking individuals to vital community resources while prioritizing the highest standards of health, safety, and proactive advocacy. At the core of our mission is a commitment to ensuring the well-being of those we serve, providing them with the necessary tools to thrive within the community.

Active CM (Medicaid)	114
Active CM (Non-Medicaid)	0
Waiver Breakdown	
Community Living	60
Family & Individual	55
Building Independence	1
Active Waiver Total	**114**
Non-waiver Active CM	0
Transfers	0
Total Individuals Served	**114**
DD Waiver Wait List Numbers	
Priority 1	1
Priority 2	26
Priority 3	29

To better serve our community, the Developmental Services team launched a new direct-access process to streamline Developmental Disability (DD) waiver waitlist assessments. Individuals and families can visit our offices to complete an assessment on the spot or schedule one for a future date. Support Coordinators are available on-site every Tuesday in Powhatan, and on Tuesdays and Thursdays in Goochland. This month, we served our first DD access walk-in at our Powhatan office; the family arrived with all required documentation and met the criteria to be added to the waitlist.

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

Developmental Services Quality Assurance

The Health Services Advisory Group (HSAG) concluded its Round 8 review. For GPCS, Round 8 focused exclusively on Support Coordination services. The Developmental Services Quality Assurance Coordinator collaborated with the Support Coordination Program Manager to review findings and develop a quality enhancement plan.

Additionally, the Developmental Services Quality Assurance Coordinator reviewed performance outcomes and provided feedback to our Regional Quality Improvement Specialist. GPCS met targets for 13 out of 15 case management data measures. Overall, performance remains positive and is generally aligned with statewide performance. We will continue to monitor outcomes and focus on meeting established performance targets.

Submitted by Naomi Robinson,
Developmental Services Quality Assurance Coordinator

Day Support Services

Monacan Services is supporting 20 consumers in the program.

Monacan Services has continued to have a busy and exciting summer filled with a variety of activities and opportunities. The consumers recently enjoyed a week full of tie-dye activities, where they created their own colorful shirts and socks to take home and enjoy.

The consumers also had the opportunity to attend Bible School at Graceland Baptist Church. Everyone had a wonderful time participating in worship, singing, dancing, and playing a variety of games. It was a great opportunity for the consumers to get out into the community, socialize, and enjoy time together.

Monacan Services is looking forward to continuing to make the most of the remaining summer days and creating more fun and meaningful experiences for everyone in the program.

Submitted by Maitlin Ware,
Program Manager, Monacan Services

Clinical Board Report July 2026

During the month of July, the clinical management team had their team building, which was at Gnome and Raven, a themed escape room. We were challenged with being in a Wizard's castle and worked together well as our skills allowed us to tackle different tasks. We had a great time and we were able to get out successfully in the hour time limit! Lisette participated in the filming of the story telling campaign for Powhatan's Stories of Hope. Lisette met with a variety of community partners including the YMCA, The Pavilion rep, and the Region 4 988 follow up coordinator.

Substance Use and Mental Health Recovery Team:

The Substance Use and Mental Health Recovery team continues to provide Clinical and case management services to clients, Peer led community groups, Mobile Outreach supports, and AcuWellness to the community and during Powhatan Community Matters programming.

Our Peer Recovery Specialists continue to facilitate community recovery-oriented groups in Goochland and Powhatan to support those in recovery or those supporting someone in recovery. GPCS peers continued to support 6 individuals in direct peer services and as well as outreach tabling events, to include the Goochland and Powhatan Farmer's Markets this season. Our peer team welcomed Gannon Walsh, a Region 4 Peer Intern, this month and we look forward to supporting him in becoming a Peer Recovery Specialist. We have started planning our annual HopeFest event to take place in August and are looking forward to providing the community with a recovery-oriented day to honor those impacted by substance use and mental health challenges.

Our Substance Use outpatient team welcomed two new clinicians, Ainsley Miller and Alyce Laverty, to GPCS this month. They have started their onboarding orientation, and we look

forward to having them support our substance use and mental health outpatient clients in the coming months. The team was supported by our mental health outpatient clinicians in conducting 70 Substance use outpatient services to 28 consumers during this transition.

Our Mental Health Case Management team provided 208 case management services and continue to provide wrap-round supports to 58 consumers to ensure timely access to psychiatric, medical, and community services, with 5 successful case management discharges. Our Substance Use Case manager/Care Coordinator successfully conducted 46 case management and OBAT services and supported 12 individuals case management and care coordination support this month.

Our Substance Use case manager and SUR manager attended the annual Virginia Summer Institute for Addiction Studies conference in Williamsburg this month and gained insight on substance use supports and treatment in the state to support our team and clients.

Mental Health Outpatient Team

MHOP: 267 clients, Adult: 141, Child: 167

SUDOP:15 adult clients, Child: 0

Med services: 134 visits with 125 unique clients

In July, our Goochland SBS continued to provide summer groups to youth and partnered with local Parks and Rec for their summer youth programs to increase mental health awareness. Last school year, our 3 SBS clinicians served 96 clients in the schools. Our clinicians were able to support students, counselors and teachers, providing support, psychoeducation and filling the need for more dedicated mental health care within the schools which decreased the school staff's workload, enabling teachers to do what they do best, while also caring for their own mental health. Our team provided several trainings throughout the school year on topics such as suicide awareness, parent burn out, test anxiety, stress management, grief, and stigma. The schools have expressed gratitude for our partnership and have identified the continued need for more SBS clinicians to be able to meet the needs so we have hired a new SBS clinician for Powhatan to serve in the middle and high school.

With our partnership with Goochland Schools, we applied for and were awarded a private grant with VHCF which allowed us to hire a 3rd SBS clinician to serve in two of the higher need Goochland elementary schools and one of our clinicians will be spending 1 day at the 3rd Elementary school so all schools in the Goochland district will be served!

Two stories from the clinicians:

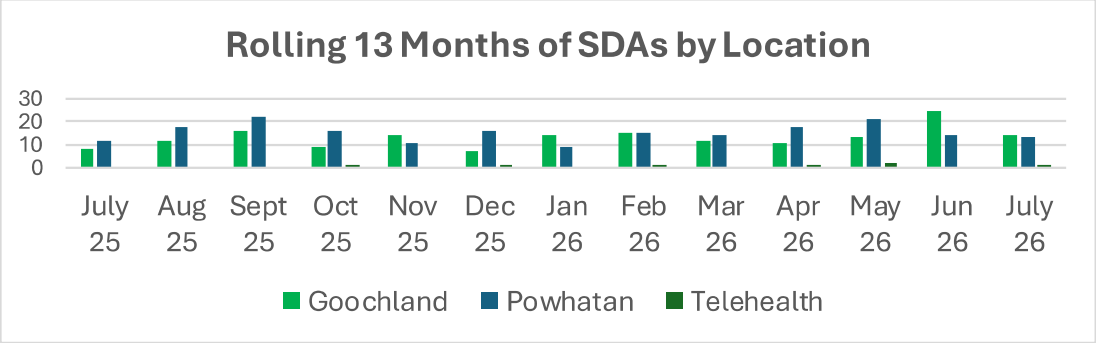
"I had an elementary student that had so much trouble straying in class and school and he frequently cried and would shut down and refuse to do work. He worked with me for about 6 month and worked through his daily stress, need for control, and anxieties with play at school. He no longer had issues in school and home was going smoother especially getting him to school. I have noticed that the students are also just happy to have an additional safe and understanding face at the school".

"I worked with a high school student navigating anxiety that impacted her social life, sense of self, and attendance at school. The student worked with me for almost two years toward learning about her symptoms, building acceptance, and developing strategies to navigate her anxiety. She proved to herself that she could navigate daily stressors and consistently attend school and was able to graduate early".

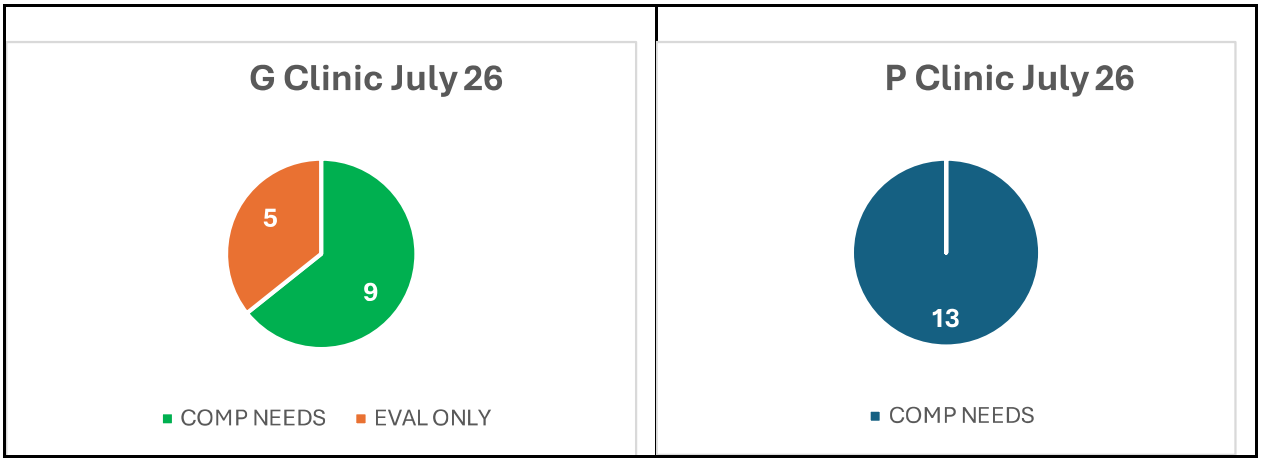
Emergency Services/Access Team

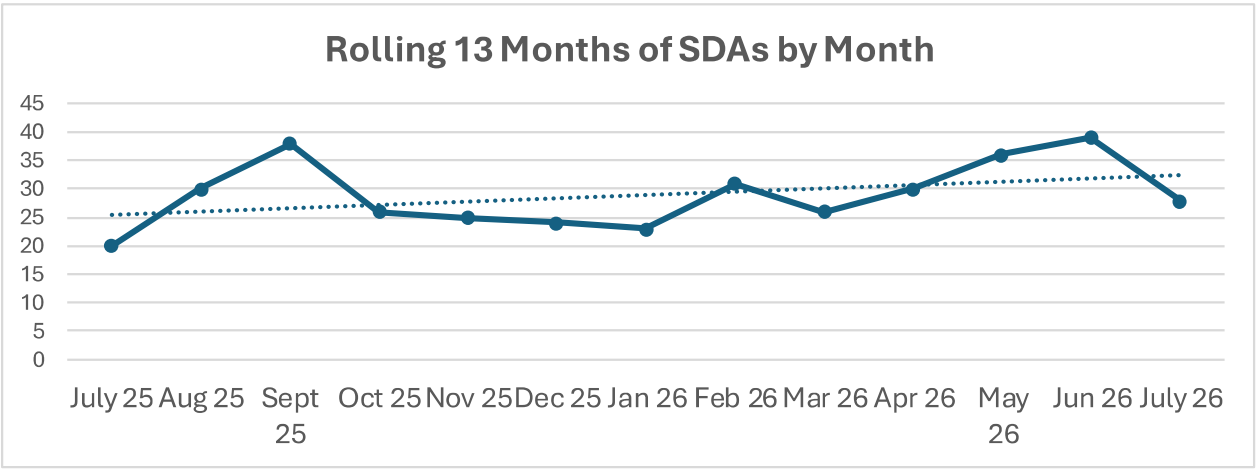
SDA:

In July 2026, the Access Team completed 28 Same Day Access (SDA) assessments, including 5



Substance Use Disorder (SUD) evaluations. Of these, 13 assessments were conducted at the Powhatan Clinic, 14 at the Goochland Clinic, and 1 telehealth assessment.



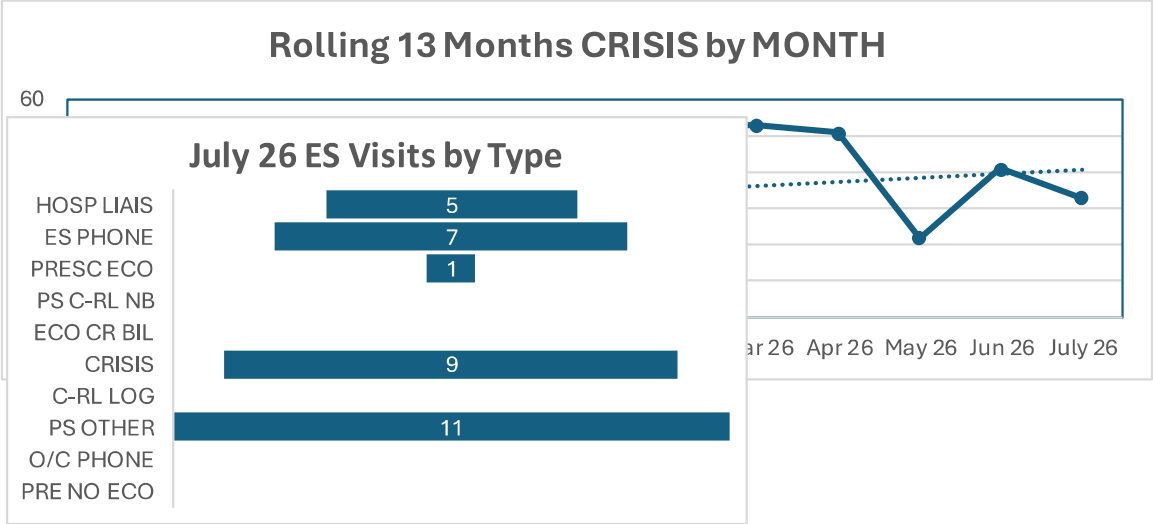


The implementation of WHODAS screening in July was successful, with minimal difficulties encountered during the process.

Emergency Services:

In June, the Access Team provided a total of 33 emergency services this month, including:

- 5 hospital liaison visits
- 7 Emergency Services (ES) phone calls
- 9 crisis interventions
- 1 prescreen evaluation conducted under an Emergency Custody Order (ECO)
- 11 prescreen evaluations completed by other Community Services Boards (CSB)
- 0 prescreen evaluations conducted without an Emergency Custody Order (No ECO)



The Emergency Services Manager continues to participate in recurring meetings related to facility referrals through the statewide Behavioral Health Link (BHL) platform, as well as the monthly Emergency Services Council and the bimonthly Region 4 Emergency Services Managers meetings. These collaborative meetings provide an opportunity to discuss current challenges, identify opportunities for improvement, and address specific aspects of the crisis services system at both the state and regional levels.

During the July Emergency Services Council meeting, Dr. Heather Zelle provided a presentation regarding changes to the Emergency Substantial Risk Orders (ESROs). The Council also discussed the potential implications of these changes for the ECO/TDO process and Certified Prescreeners.

On July 16, 2026, GPCS representatives met with representatives from RBH and visited the James River Juvenile Detention Center (JRJDC) to gain a better understanding of the facility, as well as its precautionary policies and procedures. The visit was intended to support the development and updating of GPCS and RBH procedures for responding to calls from JRJDC to Emergency Services. A follow-up meeting between GPCS and RBH will be coordinated in the coming weeks to review and update the current procedures.

During July, new team member Hadie Romero completed the practical portion of training required to become a Certified Pre-Admission Screening Clinician, an essential skill and a certificate within Emergency Services.

Behavioral Health & Wellness Team

In July, the Behavioral Health & Wellness team focused on year-end reporting, regional collaboration, prevention planning, and community outreach. Staff completed all required end-of-year reporting, including the Regional Suicide Prevention Initiative grant reports, Problem Gambling Prevention grant reports, and Prevention Block Grant reports. Travis

Fellows completed the annual setup of the Prevention Block Performance System (PBPS) infrastructure for the new grant year, establishing the reporting framework required for ongoing data collection. Following completion of this work, the Omni Institute approved the team's prevention plan and reporting channels, allowing July program data to be entered into the new reporting system. The team also completed all required PBPS data entry and remained current with state and federal reporting requirements.

Community collaboration remained a priority throughout the month. Staff continued participating in Recovery Partners meetings, working alongside community organizations to identify available resources, strengthen referral networks, and coordinate recovery and prevention efforts across the region. Travis also continued supporting the **Capes Over Vapes** initiative, which reported increased participation among youth and their families following changes to the event location and expanded marketing efforts. The team also maintained a presence at local farmers markets, where increased community engagement provided additional opportunities to distribute prevention information and connect residents with behavioral health resources.

Planning efforts continued for several upcoming initiatives. Staff scheduled Question, Persuade, Refer (QPR) suicide prevention trainings to be offered in September and continued coordinating community partners and logistics for the upcoming HOPE Fest event in August. Robin also participated in planning efforts for the Goochland Powhatan Community Services job fair in collaboration with agency leadership.

Professional development and regional planning continued throughout the month. Robin attended a substance use training focused on emerging youth substance use trends to strengthen local prevention efforts. Staff also participated in the Be Well VA strategic planning retreat in Hopewell, collaborating with regional partners to establish priorities for the coming year and strengthen the integration of suicide prevention and problem gambling prevention initiatives across Central Virginia.

In addition to Behavioral Health & Wellness responsibilities, staff continued supporting agency-wide initiatives, including ongoing development of the GPCS website.