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Executive Director

Donna Stanley Financial Officer

Lisa KilgoreBusiness Manager



Michael O'Donnell Board Chair

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Chair

Virginia Meador

Bobby Cassell

City of Norton

Delores Belcher

Secretary

* Names throughout this report have been changed to protect privacy.

A Message from the Executive Director & Board Chair

2020. A year of **challenges**. A year of **loss**. A year of **reflection**. A year of **opportunities**. A year of **growth**. A year of **expansion** and **innovation**.

Planning District One Behavioral Health Services and our partner Frontier Health stayed the course, remaining focused on our communities and the individuals we serve during this year — despite COVID 19. When we saw needs in our community, we expand services to meet those needs. We **expanded** CITAC operating hours, outpatient services and Medication Assisted Treatment Services. We worked diligently to **engage** our communities and the people we serve in recovery, in prevention services and in developing additional services for individuals with developmental disabilities. The challenges of COVID-19 hit in March which led to **opportunities** to change and **innovate** the delivery of services to meet those needs by using technology to deliver services remotely when needed and to deliver face-to-face services safely and effectively when required.

The Board of Directors want to express our appreciation to our staff and Frontier Health staff who demonstrated their commitment to the individuals in our communities by continuing to work and ensuring the well-being of the individuals in our services, by learning new skills for safe service delivery and by caring for others when our communities were in crisis.

We hope you will take a moment and celebrate with us as you read just a few of the many remarkable stories that happened this year in this annual report.

We could not have done this without our Board of Directors – Thank You. We could not have done this without our Community Partners – Thank You. We could not have done this without the support and resources of our Local Governments – Thank you. And Finally, Thank You to Frontier Health and the staff who work in our communities. Your partnership in our community and in our services is invaluable.

In Memory of Donna Stanley

Our community and our team lost a treasured member this year. Donna worked more than 30 years in our services in various roles, more recently as Finance Officer for PD1BHS. Donna was a force to be reckoned with in her community, in her church, in her family and with her work. Her smile and her laughter will forever be treasured and remembered. Thank You Donna, you made our world a better place.

In Memory of Sam Dillon

Sam served our nation in the Air Force and he served our community as Executive Director for PD1BHS for more than 30 years. Sam was one of a kind, always had a smile and a love for learning. He had more interests and hobbies than you can imagine – and wanted you to share in those interests. He was dedicated to the services that he knew would make a difference in the lives of the people in our community. Rest in Peace Sam Dillon.

Sandra O'Dell

Executive Director

Michael O'Donnell

Board Chair

Leadership Team

Kristie Hammonds

Associate Director President & CEO of Frontier Health

Eric Greene

Clinical Director Senior Vice President of Virginia Services

Wendy Burgin

Community Support Services
Director

Regina Lawson

Intellectual Disabilities Director

Heather Crouse

Child & Adolescent Services
Director

Mary Alice Fields

Emergency Services Director

Debbie Moore

Substance Use Disorders
Director

Melissa Smith

Director of Virginia Early Childhood & Developmental Case Management

SUCCESS STORY: A PATH TO REDEMPTION



Johnny's Journey

Scared, traumatized, neglected, unfocused, depressed, and confused are some of the feelings Johnny reported when he sought treatment. He did not like large crowds or meeting new people. One of Johnny's biggest fears was being judged because of his slight intellectual disability and social awkwardness. Johnny was encouraged by his friend to seek counseling. Johnny attempted to contain his symptoms to try to fit in with society's "so-called" standards. He found a job, hoping to be more self-sufficient, but was terminated after a disagreement with his *supervisor.* The loss of his job and confidence resulted in negative feelings creeping back into his mind, including thoughts of depression and suicide. Johnny agreed to seek help at the local Behavioral Health clinic. Through therapy, he learned what his triggers were and how to manage his symptoms with healthy coping skills. Johnny was able to achieve independent living, and, at first glance, things seemed to be going well for him. Even though it appeared as if Johnny was greatly improving, he continued to feel alone and experienced more mental health symptoms.

As he continued in treatment, Johnny's case manager approached him about attending Psychosocial Rehabilitation Program where he could continue to develop skills to understand his symptoms as well as develop new skills needed to be successful in the future. Johnny agreed to give the program a chance. Johnny's first day at the Psychosocial Rehabilitation program was a bit uncomfortable for him but he eventually developed friendships and a support system with other people who shared his feelings and had similar experiences.

He built a social network, learned to be around crowds- although still uncomfortable- and felt more adept at conversation and making friends. Johnny is now able to share his journey with other people to help erase the stigma surrounding his mental health symptoms by attending and speaking at regional and state conferences. He assists staff with organizing workshops and even spoke to a crowd of two hundred people at the last conference.

In 2019, Johnny was accepted as a candidate for a local Sheltered Employment program due to his initiative, work ethic and the sustained progress he's making in his recovery. Johnny works three days a week currently and he uses many skills he learned at the Psychosocial Rehabilitation program that has helped him be successful.

As with most journeys, the road isn't always smooth, but pushing through the hard spots is just part of the journey. Johnny understands that life will not always be easy, and his mental health symptoms will always be present, but he has a better grasp on what it takes to push through these moments because he knows he is never alone on the road to recovery. Sometimes you meet others on the journey that were meant to help you, guide you, and be your saving grace when all feels insignificant and lost. Johnny is more enlightened by his experiences. He hopes to become a recovery coach, so he can help others as they travel through the journey of recovery, knowing that they aren't alone and there is help.

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RESPOND: RESPONDING TO THE NEED



VA CITAC Center

Planning District One Behavioral Service's Crisis Intervention Therapeutic Assessment Center (CITAC) began operations on May 3rd, 2019. Located on the campus of Norton Community Hospital, there are two primary goals of CITAC, with the most important being to provide a safe and comfortable area in which persons under an Emergency Custody Order (ECO) may be evaluated by a Mental Health Professional. The second goal of CITAC is to minimize the amount of time law enforcement officers are taken out of service to retain custody of ECO's. The CITAC center is staffed with a Law Enforcement Officer, a Frontier Health Crisis Pre-Screener and the crisis call center is open 365 days a year from noon to midnight. CITAC serves as a service point in which persons in the midst of a mental health crisis, who are subsequently encountered by law enforcement, may be evaluated by a mental health professional while remaining in the custody of a Law Enforcement Officer in a more patientfocused setting.

A Story of HOPE:

The crisis triage call line received a call from a male named "Steve" in distress. tearful, suicidal and had reported he was overdosing while driving around in his car. Crisis Triage was able to get enough information to pass off to our Emergency Services team for follow-up before Steve disconnected the line.

Our Emergency Services team tried several times to contact the man via the number he called from. With no answer, we were left with leaving him a message in hopes he would call back, he did not. Due to severe storms in the area that day, phone lines went down. The Emergency Services team coordinated with Wise County EMS dispatch to

locate Steve by pinging his cell phone for

location.

The EMS Dispatch Supervisor immediately put things in place to ensure the man could be located by sending another deputy to the address they were familiar with. This officer went by the residence, knowing what Steve drove due to having contact with him in the past, but was unable to locate him. The Supervisor was able to get Steve to answer the phone and he reported he had a plan and was going to do it this time, no one was going to stop him! He also reported no one would find him because at this time he was already two states away. He was tearful on the phone, and obviously still in distress. Because of the statements and reports he made to the Supervisor, he was able to authorize pinging the cell number for location.

Through EMS dispatch and the phone company, they tracked Steve up and down the interstate. They had many different people talking to him via phone including negotiators, investigators and other officers. Dispatch entered him into the national database (NCIC) as an endangered person in case he was found. Through the multiple collaborations and efforts, they were able to get him to drive himself to the Washington County Sheriff's Office. The EMS Dispatch Supervisor and the WCSO took out an Emergency Custody Order (ECO) to get him the help he needed.

Through the team work and assistance of multiple entities across bordering counties, a life was saved! What a tremendous story to be able to tell! The CITAC program, along with the multiple partnership between hospitals and law enforcement are truly making a difference in our communities!

RESPOND: RESPONDING TO THE NEED



Medication Assisted Treatment (MAT)

Planning District One Behavioral Services' Medication-assisted treatment (MAT) program combines the use of medications and behavioral therapy to treat individuals who have substance use disorders. MAT is one of many options for treating opioid use disorders and one of the many tools that can be used to assist individuals in their recovery. Since 2005, we have offered MAT in a safe, controlled and conservative manner to assist persons with opioid addiction.

The MAT program combines both medication, behavioral health services like individual and group counseling as well as peer support services to provide comprehensive care approach.



A Story of **HOPE**:

Bob began services at Wise County Behavioral Health Services in 2017. He lives in Southwest Virginia with his wife and mother and works locally. He was prescribed opioids for a past work-related injury and received physical therapy for a couple of months, and then his prescription for narcotics ended. Realizing he had become addicted, he enrolled in a Suboxone clinic for about five years and later weaned himself down to 4mg daily for a year with help of a friend supplying medication. Bob realized he still needed help as he was still addicted and decided to participate in the MAT Program.

He had a long-term goal to transition from Suboxone to Vivitrol. From the beginning, he was able to participate fully in the program and stay engaged. He received motivation and encouragement from others in the program which helped him in his addiction recovery. One of his key inspirations for keeping him on his recovery path is his wife, son, and grandchildren. Bob has remained focused on his recovery goals throughout the duration of the MAT program and has not currently experienced any relapses.





- 33_% State
- 4_% Local
- 13_% Federal
- 33_% Medicaid
- 14_% Other Fees
- 4_% Other Funds

Total: \$16,664,910

Sources of Support

State: 33% of funds come from the State of Virginia.

Local: 4% of funds come from the local governments of Lee, Scott,

and Wise Counties, along with the City of Norton.

Federal: 13% of funds are federally administered by the State of Virginia. **Medicaid: 33%** of funds are fees from medicaid for services provided.

Other Fees: 14% are funds from other fees. Included in other fees are sliding scale fees paid by individuals, insurance payments, Medicare fees, foster care, supportive service fees, parenting group and vocal rehab fees.

Other Funds: 4% are other funds. Included in other funds are workshops, data-line grant, client earned funds and transportation.

2019-2020 Sessions

17,029 Mental Health / Alcohol & Drug Outpatient

4,863 Intellectual Disabilities Case Management

17,681 Mental Health Case Management

4,542 Crisis

18,051 Intensive In-Home Services

31,432 ID Day Support Days

11,518 Intensive/Supervised Residential

3,803 Supportive Residential

3,817 ID Employment Vocational Rehabilitation

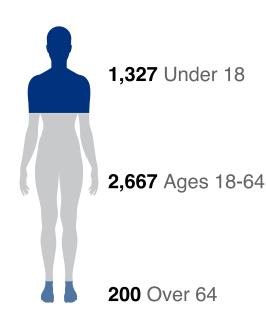
1,302 Prevention Hours

3,588 ID Early Intervention Services

2,748 MH Psychosocial Days

4,194 Served

PD1BHS / Frontier Health provided services to 4,194 unduplicated individuals addressing mental health, intellectual and developmental disability, substance use, prevention, early intervention and crisis needs.



Impact

PD1BHS / Frontier Health Sessions for the 4,194 Individuals Served During 2019-2020.

Total Jobs

Direct Impact

25

Total Impact **287**

225

Ripple Effect

\$1,740,370

Ripple Effect

62

Total Impact

Total Labor Income

Direct Impact **\$9,594,100**

\$11,334,470

Total Economic
Output

Direct Impact **\$16,082,098**

Ripple Effect **\$3,081,330**

Total Impact

\$19,163,428

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INNOVATE: CREATING NEW WAYS TO SERVE



Same Day Access

Through the Virginia Department of Behavioral Health and Developmental Services STEP-VA plan, PD1 implemented Same Day Access (SDA) for those seeking mental health and addiction services. This program provides quick access to behavioral health services during walk-in hours without an appointment. This allows us to provide care "in the moment" rather than having to wait for an appointment. SDA allows us the opportunity to address mental health needs through preventative care, helping to avoid emergencies and hospital admissions. SDA allows us to more quickly meet the needs of those seeking services.

"Every person in Virginia should be able to access quality public behavioral health services, no matter who they are, how much money they make, or their insurance status. Virginia's Community Service Boards are the front-line providers of mental health treatment, and when someone is in urgent need of clinical services, it is important that they receive care in a timely manner. Same Day Access removes many of the barriers to mental health care and helps individuals get treatment wherever they may live in the Commonwealth." - Governor Northam

Sessions & People

A Story of *HOPE*:

Amy moved to Wise County, Virginia from another state and struggled with establishing services for her mental health needs. She was receiving an injectable medication that provided 4-6 weeks of stabilizing benefits from her previous care giver and before her move received her last injection. She worked to find resources but was unsuccessful and after experiencing auditory and visual hallucinations, she visited a local emergency department.

The ER was concerned about her and contacted the Emergency Services team to help evaluate her needs. The emergency team member spoke with Amy and after spending some time discussing care and preferences, made a recommendation for her to visit Wise County Behavioral Health Services accessing their Same Day Services. Same Day Services is a way to engage individuals when it's convenient for them instead of waiting for days or weeks to access needed care.

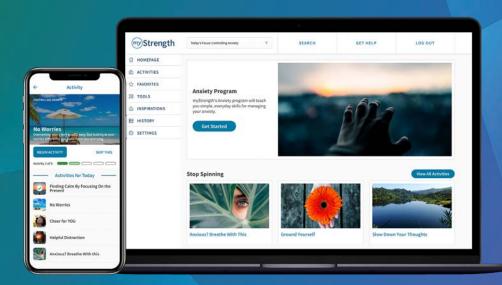
Amy came for services the next day and was provided a diagnostic assessment and was scheduled with a provider that same week to resume her medication therapy. Amy remains in services at Wise County Behavioral Health for therapy and medication management and reports that since receiving her injection, her symptoms have stabilized. She says that the ability to access services in this rapid manner helped her avoid an unnecessary hospitalization.



Sessions **1,598**



Engage: Bringing resources & AWARENESS TO OUR COMMUNITIES





Because of the unique and longstanding relationship between Planning District One Behavioral Services and Frontier Health as our service provider, many opportunities are available to our communities. The myStrength program is an example of how our contracted services benefit our communities in addition to the entire service area we collectively serve.

Finding support to focus on emotional health is important, that is why Frontier Health made available a completely free mental health platform myStrength for both Frontier Health employees and for those in the communities Frontier Health serves. myStrength is a 24/7 interactive tool with clinically-proven wellness resources as well as spiritual and inspirational resources to help with anxiety, depression, insomnia, diabetes, substance use, smoking cessation, nutrition, loneliness and isolation.

While this is certainly not a substitute for face to face therapy or tele-therapy, it has shown to be 83% as effective as traditional therapy when used regularly. Many individuals are dealing with loneliness and isolation during the COVID-19 Pandemic and need access to tools outside of regular therapy hours and availability so this tool is offered to ensure the individuals served by Frontier Health and the communities we serve can obtain the mental health care they need while we all navigate this new existence.

55%

GROWTH IN USE SINCE FEBRUARY 2020

38%

OF INDIVIDUALS
REPORTED CLINICAL
IMPROVEMENT

91%

OF USERS STATED THIS TOOL WAS HELPFUL!





Engage: Bringing resources & AWARENESS TO OUR COMMUNITIES



VA Prevention Project Sticker Shock

Prevention Services works diligently to provide the community with basic prevention strategies and resources to enhance protective factors, such as promoting positive mental and emotional well-being and decreasing known risk factors, like peer pressure and availability of drugs. Prevention strategies raise awareness of the dangers of alcohol, tobacco, and other drug use. It promotes good parenting skills, which is also the first defense against drug abuse. These strategies also provides mentoring to youth, mobilizes communities to establish environments that enhance positive personal development, promotes a healthy lifestyle and changes the community norms.

Project Sticker Shock is a community strategy designed to prevent adults 21 or older from purchasing alcohol and providing it to underage youth by raising community awareness about Virginia laws. Participants involved placed stickers with a warning message about the penalties for providing alcohol to anyone under 21 and or using a fake ID to purchase alcohol on cases of alcohol. Project sticker shock encourages partnership between community organizations, youth, parents, retail establishments, law enforcement and media.









