



MEETING OF THE BOARD OF DIRECTORS

**Thursday, June 26, 2025, 5:00 p.m.
300 Medical Drive, Hampton, VA 23666**

Present: Mrs. Mary Miller, Treasurer; Dr. Mark Bell; Mrs. Ginger Blount-Moore; Sheriff Karen Bowden; Ms. Madonna Flores; Dr. Cynthia Gaither; Dr. Kristie Norwood; Mrs. Gisele Russell; and Ms. Hui-Shan Walker.

Staff: Dr. Daphne Cunningham; Ms. Raymona Barnes; Dr. Melanie Bond; Ms. Keisha Carroll; Ms. Joy Cipriano; Mr. Tony Crisp; Mr. Ryan Dudley; Dr. Baltej Gill; Ms. Allie Griffing; Mrs. Lisa Hogge; Ms. Cheryl Johnson; Ms. Denae Mention; Mr. Tom Miller; Mrs. Allison O'Brien; Mrs. Rhonda Perry; Ms. Cam Strowbridge; Mr. Jon Warren; Ms. Deirdre Watson; Dr. Cathee Wolford; and Mrs. Jae Hee Jackson.

Absent: Ms. Ann Abdullah; Mr. Steven Brown; Dr. Diane Griffiths; Mr. Ryan Kotrch; Mrs. Mary Stewart; Dr. Tarita Stonewall; and Dr. Tamara Temoney-Porter.

Members of the Public and

Other Guest(s): Mr. Brown left before the meeting began.

CALL TO ORDER

Members of the Board, Guests, and Staff were welcomed to the Meeting of the Board of Directors for the Hampton-Newport News Community Services Board (H-NNCSB) by Mrs. Mary Miller, Treasurer, who called the meeting to order at 5:06 p.m. on June 26, 2025.

REMARKS OF THE CHAIR

After Mrs. Miller welcomed the Members of the Board of Directors, she gave Dr. Daphne Cunningham, Executive Director, the floor.

Dr. Cunningham welcomed everyone to the last meeting of the fiscal year and thanked the Members in attendance. She stated there would be a presentation later in the evening, continuing the division program update from the May meeting by staff from Adult Comprehensive Outpatient Services. She asked staff to introduce themselves: Denae Mention, Program Manager for ACT; Cheryl Johnson, Program Manager for Psycho Social Programs; Dr. Cathee Wolford, Regional Deaf Services Counselor; and her two interpreters, Allie Griffing and Cam Strowbridge. Finally, other staff present introduced

themselves: Mr. Jon Warren, Clinical Services Administrator from Adult Comprehensive Outpatient's Rapid Access program and Ms. Deirdre Watson, Budget & Reporting Manager from Financial Services.

PUBLIC

COMMENT

None

ACTION ITEMS

A-1. Board Approval of the May 22, 2025, Board of Directors Meeting Minutes

Issue: Board Approval of the Minutes of the Board of Directors Meeting held on May 22, 2025.

Background: The Board meeting minutes were provided to Members of the Board of Directors for review in the Board package distributed on June 18, 2025.

ACTION: There being no discussion or comments, the Minutes of the Board of Directors Meeting held on May 22, 2025, were approved as presented.

A-2. Recommendation from the Nomination & Selection Committee – FY2026 Slate of Officers

Issue: Recommendation to the Board of Directors, the approval of the Proposed FY2026 Slate of Officers.

Background: Each year, in compliance with Article VIII, Section 4(c), of the Board By-Laws, Members of the Nomination and Selection Committee have the annual responsibility of preparing a Proposed Slate of Officers to present at the May Meeting of the Board of Directors so that an election of Officers can be held at the June Meeting of the Board.

ACTION: Board approved the Nomination & Selection Committee's recommendation to approve the FY2026 Slate of Officers. There were no nominations from the floor.

Chair: Mr. Steven Brown (second term)

Vice Chair: Dr. Kristie Norwood (first term)

Treasurer: Mrs. Mary Miller (second term)

Secretary: Ms. Madonna Flores (first term)

A-3. Recommendation from the Nomination & Selection Committee – Board Approval of Interim Performance Evaluation for Executive Director

Issue: Recommendation to the Board of Directors the approval of Executive Director's Interim Performance Evaluation

Background: The Nomination and Selection Committee presents the Board of Directors a recommendation. As per DBHDS requirements and Board By-Laws the performance evaluation of the Executive Director is reviewed annually.

Mrs. Russell provided a summary from the closed meeting session, and stated the

Committee Members reviewed the feedback provided by the Board of Directors and noted the excellent job Dr. Cunningham has done in the past six months.

ACTION: Board approved the Nomination and Selection Committee's recommendation to approve the Executive Director's Interim Performance Evaluation.

A-4. Recommendation from the Budget, Finance, & Audit Committee – FY2026 Budget and Draft Performance Contract

Issue: Budget, Finance & Audit Committee Request for Approval of FY2026 Budget and Draft Performance Contract.

Background: Members of the Committee review the Annual Operating Budget, including the Principles, Environment, Assumptions, Highlights, and Concerning Budget Trends. The budget requires formal approval from the H-NNCSB Board of Directors as well as the cities of Hampton and Newport News. The Performance Contract is the official agreement between CSBs and the State. The 40 CSBs have been required to sign annual contracts with the Virginia Department of Behavioral and Developmental Services (DBHDS). The contract serves as a performance, reporting, and accountability document between DBHDS and CSBs. It includes the scope of services and responsibilities for CSBs and DBHDS; the values, roles, and responsibilities of the partners in the public behavioral health system; and general statutory, regulatory, policy and other requirements. The Performance Contract will be posted to the Hampton-Newport News Community Services Board website and will remain for 30 days for public comment. After 30 days, the contract will be submitted to both Cities of Hampton and Newport News for approval.

ACTION: Board approved the Budget, Finance & Audit Committee's Request for Approval of the FY2026 Budget and Draft Performance Contract.

A-5. Recommendations from the Budget, Finance, & Audit Committee

Issue: Recommendation from the Budget, Finance, & Audit Committee to renew the line of credit for FY2026 and approve the rate increase for Mentor Services

Background: Recommend the approval of the line of credit renewal of \$5,000,000 to ensure compliance with the Performance Contract and approve the rate increase for Mentor Services from \$45 to \$55 per hour.

ACTION: Board approved the Budget, Finance, & Audit Committee's recommendations to renew the line of credit and rate increase for Mentor Services.

A-6. Recommendation from the By-Laws Committee

Issue: Update Policy #12 Selection of the Executive Director

Background: In accordance with the Hampton-Newport News Community Services Board By-Laws, Articles IX and X, By-Laws and Policies are to be reviewed and approved annually by Members of the Board.

ACTION: Board approved to add language to Policy #12 to reflect New Executive Directors need for an Interim Performance Evaluation.

A-7. Board Approval of the FY2026 Meeting Dates**Issue:** FY2026 Board of Directors Meeting Dates**Background:** Members of the Board of Directors are presented the FY2026 Board Meeting Schedule. Please note that while our Board Meetings are generally scheduled on the fourth Thursday of each month, the November, and December meetings are scheduled earlier due to the holiday season.

September 25, 2025	February 26, 2026
October 23, 2025	March 26, 2026
November 20, 2025 *	April 23, 2026
December 18, 2025 *	May 28, 2026
January 22, 2026	June 25, 2026

* Note: Meetings held earlier in the month.

ACTION: Board approved the FY2026 Meeting dates.**STANDING BOARD
COMMITTEE REPORTS****By-Laws** Members of the By-Laws Committee held a virtual meeting via Zoom on Monday, June 16, 2025 at 3:00 p.m.

Dr. Daphne Cunningham, Executive Director, read Article VIII, Section 6. By-Laws. This Committee shall be responsible for conducting a review of the Board By-Laws on an annual basis. This Committee shall also be responsible for conducting an annual review of the Board Policies.

Dr. Cunningham then referred to the 2024 Code of Virginia Updates for Behavioral Health and Developmental Disability Services and focused on 37.2-508 Performance Contract. Dr. Cunningham advised that some paragraphs were expanded and more details given. After discussion, the Committee determined no changes were needed to the current Board By-Laws.

She then shared the summary of bills approved by the General Assembly which will be effective from July 1, 2025. Code changes for Virginia's Behavioral Health and Developmental Disability System. Once Legislative Information System (LIS) has the 2025 updates, the Committee will meet to review the changes. The Committee will also verify that the language in the By-Laws mirrors the language in the Code of Virginia.

Next, Dr. Cunningham looked at Board Policy #12, Selection of Executive Director. A new Executive Director is now required by the Department of Behavioral Health and Developmental Services to have an Interim Performance Evaluation, so the language in Policy #12 should be amended to add the requirement.

After discussion, the Committee Members determined that language regarding the Interim Performance Evaluation of New Executive Directors should be added to Policy #12.

There being no additional business, the meeting adjourned at 3:25 p.m.

Board Quality Management

Members of the Board Quality Management Committee held a Zoom Meeting on Wednesday, June 4, 2025, to receive the quarterly update from the Quality Management Division of the Hampton-Newport News Community Services Board (H-NNCSB). Their review included reports on Regulatory and Compliance and Human Rights/Serious Incidents/Sentinel Events. The meeting was called to order at 4:01 p.m. and Ms. Flores welcomed everyone to the final meeting of FY2025.

Dr. Alicia Gaston, Quality Assurance and Improvement Manager, presented updates for the period from January and May 2025. Points of discussion were: Audits, Record Reviews, Risk Management, and Service Modifications.

Dr. Gaston stated there were four audits and the preliminary findings have been favorable with no citations. Next, she reported that the Utilization Review Specialist conducted many record reviews and these reviews were at 93% compliance. The Quarterly Program-Driven Record Reviews scored 93% overall compliance for January through March.

Next, Ms. Halima Rhea, Compliance and Standards Manager, provided a summary of the January 21 through May 31, 2025 Human Rights/Serious Incidents/Sentinel Events to the Committee.

In incident reporting, there were 1,027 total incident reports submitted to the QM team. Only 61 of them (6%) met the criteria that required that they be reported to DBHDS Office of Licensing.

There were 10 deaths of individuals served by the H-NNCSB during this period. However, no deaths occurred on CSB properties or during provision of services.

There was a total of four Human Rights investigations in this period; of these, one investigation was substantiated and three were unsubstantiated. One Corporate Compliance investigation was unsubstantiated. There were two serious incident reviews with one substantiated and one unsubstantiated.

The Agency received four Corrective Action Plans issued by the Office of Human Rights and Licensing due to the following violations: late reporting; client fall; medication error; dignity/staff attitudes and actions.

Next, Ms. Rhea noted there were no Authorized Representatives approved by the Agency in this period.

Ms. Rhea shared the Clinical Documentation Training Specialist facilitated over 50 clinical documentation courses this reporting period, including one

specifically designed for the Agency's hearing-impaired staff. There was also a program specific training session developed for the Housing program.

Ms. Rhea shared that the QM team attended the May VACSB conference that included many topics relevant to the team. These included: Artificial Intelligence in Healthcare; Collaboration with Emergency Departments; Inclusive Recovery Cities; and the Quality Leadership Council.

Ms. Flores thanked everyone for attending the meeting and advised that the next Committee meeting will be in FY2026.

Strategic Planning

Members of the Strategic Planning Committee held their quarterly meeting on Tuesday, June 24, 2025 via Zoom virtual meeting. The meeting was called to order at 4:03 p.m. The full report can be found in the red folders.

Dr. Bond, Director of Quality Management & Corporate Compliance, presented her update on the Strategic Plan. She began by stating the five core teams have been meeting to prepare for the end of the current Strategic Plan and develop the new one. It is a period of review and reflection on things that went well and things that need improvement. The main question is "What do we want to accomplish?"

She provided detailed areas of greatest impact and areas for growth for Focus Areas #1 through #5, Strategies #1 through #16. The full report is in the red folder.

As a reminder, the five focus areas are: Awareness and Engagement; Client Access and Experience; Client and Community Health Outcomes; Organizational Climate and Culture; and Administrative Oversight and Fiscal Stability.

The 16 Strategies are as follows:

- Strengthen the CSB's overall engagement with local nonprofit, community-based, and government organizations.
- Support our partners in assessing the need for prevention and early behavioral health interventions and to refer individuals to the CSB or other community support.
- Develop an engagement and communications plan to strengthen the CSB's use of its website and social media platforms as vehicles for health education and community outreach.
 - Build out a new client portal as part of the CSB's new Electronic Health Records (EHR) system to provide clients with access to basic health information, and the ability to communicate with the CSB.
 - Develop a plan to maintain and grow our use and support of Telehealth post-pandemic, and to improve accessibility for clients.

- Explore the development of a standardized client intake process based on the ongoing evaluation of our services and modifications based on community need.
- Continue to implement key elements of System Transformation Excellence and Performance (STEP-VA).
- Develop a comprehensive service delivery process that includes the individuals and addresses the needs of individuals we serve.
- Respond to social determinants of health in our community to improve the health outcomes of those we serve.
- Ensure our workforce feels supported and is engaged in their work and mission of the CSB.
- Improve the flow, frequency and energy of internal communications.
- Cultivate a culture of empathy and care by improving diversity, inclusion and belonging throughout the Agency.
- Ongoing enhancement of the administrative systems and services array while continuing to meet the behavioral healthcare needs of our community and oversight bodies.
- Address recruitment, retention, and employee engagement, to develop opportunities and care paths which further our reputation as an employer of choice.
- Maintain and strengthen fiscal health, through sound budgetary and accounting practices, in order to ensure financial stability and growth.
- Increase advocacy efforts to urge policymakers, legislators, and others to prioritize initiatives to improve the quality of life for individuals facing behavioral health, developmental and substance use challenges.

Some notable areas of impact include: the expanded use of social media to engage with the communities; development of the MyHealthPointe patient portal; the use of telehealth; the focus on cultivating a culture that encourages employee engagement and continuing education; increased engagement with community partners; enhanced crisis services including the opening of the BJ Roberts Behavioral Health Center; efforts toward employee recruitment and retention; reactivation of the Consumer Family Advisory Council; maintaining fiscal health despite the financially challenging environment; and shoring up Information Technology to enhance many aspects of the Agency's programs. The Agency focuses on the employee not just the clients and service programs.

Dr. Bond shared that opportunities for growth include: further diversification of social media tools to expand community engagement, specifically with young people; the development of a comprehensive communication plan that captures the collective efforts of the Agency's programs; a solidified plan to implement the MyHealthPointe portal; determining the next steps in the discussion on implementing a central intake process; and better incorporating the use of public health data to gain a better understanding of the impact of social determinants of health for the communities we serve.

The next Steps for the Strategic Planning team will be:

Schedule ongoing monitoring meetings with the five Strategic Focus Teams

Monitor progress of Action Items and deliverables
Begin planning for next Strategic Planning cycle

Dr. Norwood stated that she appreciated the holistic approach and hard work on the Strategic Plan. I also appreciated all the elements considered such as administrative, fiscal, human resources, and leveraging technology as well as social media to address various issues such as wait times or patient care. Thank you, Dr. Bond, for your extensive report.

There being no additional business, Dr. Norwood thanked the team and the meeting adjourned at 5:00 p.m.

EXECUTIVE DIRECTOR UPDATE

Mrs. Miller thanked the committee members for all their hard work. She stated the Members of the Board received Clinical Division Program Highlights on pages 9 through 39 of the Board Package. Next, she gave the floor again to Dr. Cunningham.

Dr. Cunningham stated the By-Laws Committee report was presented during the Action Items and the remaining two committees reported during the standing committee reporting time. She reviewed some of the items in the red folder, which contained the detailed presentations from the committee meetings as well as the upcoming presentation. She sincerely thanked everyone for their hard work during a busy year, with many moving parts, including the retirement of Natale Christian as Executive Director and herself transitioning into the role.

She re-introduced Dr. Mark Bell and Dr. Cynthia Gaither, incoming Board Members, to the everyone. Dr. Bell thanked everyone for an opportunity to serve on the H-NNCSB Board of Directors and to try and improve the quality of life for members of the community. Dr. Gaither shared she was an educator in the Newport News Public Schools, teaching 6th through 8th graders business technology. She looks forward to not only helping children but the larger community.

Next, Dr. Cunningham thanked the Members of the Board for returning the performance evaluations to Mrs. Kimberly Thompson, Human Resources Director. She thanked the Board Members who attended the Employee Recognition luncheon to recognize the staff for their service and dedication to H-NNCSB. The CSB cannot do the work needed without our staff upholding the Agency and reinforcing who we are with their work.

Dr. Cunningham stated the BJ Roberts Behavioral Health Center has opened and different divisions have been moving into the Center. This project also had many moving parts that required a heavy lift by many people so she thanked everyone again.

Finally, she gave the floor to Mrs. Allison O'Brien, who introduced Cheryl Johnson, Denae Mention, and Dr. Cathee Wolford for part two of the Adult

Comprehensive Outpatient Services (ACOS) presentation.

Ms. Johnson began her presentation on the Psychosocial Rehabilitation Program at H-NNCSB, Bright Beginnings. She shared the mission and the program requirements, described some of the group and social activities, and the benefits of PSR. Ms. Johnson also presented testimonials from program participants.

Sheriff Bowden asked about the number of clients in Bright Beginnings, and Ms. Johnson stated the program is building back up to 55-60 client enrollment with regular attendance being 25-30 individuals. Some limitations are due to the space in Building 100. Sheriff Bowden also asked for the hours of operation, which is 8:30 a.m. until 3:30 p.m. Dr. Norwood asked about how long clients participate in the program and Ms. Johnson said it depends on the client, but the average is 1-2 years. Ms. Johnson shared the program does try to step down the clients to other services.

Next, Ms. Mention provided an overview of the Assertive Community Treatment (ACT) and the admission criteria, the types of assistance, and explained help is provided where and when it is needed, as they arise, and not always in an office or hospital. She also emphasized the team structure of the division.

Dr. Bell asked if the ACT clients are referred by specific services such as jails or hospitals and Ms. Mention stated referrals come from a variety of sources, such as hospitals, in-house programs, jails, and staff.

Dr. Wolford began her presentation on Deaf Anxiety and what it means, providing examples of some of the struggles due to language inequality. She then described the numerous roles and services provided in the Regional Deaf Services program.

Dr. Cunningham thanked the presenters for providing information about their programs and the work they do at H-NNCSB.

ADJOURNMENT

There being no additional business, the Meeting of the Board of Directors for the Hampton-Newport News Community Services Board adjourned at 6:05 p.m.



Mary Miller
Board Treasurer



Ms. Ann Abdullah
Secretary