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## **FAIRFAX-FALLS CHURCH CSB BOARD MEETING**

Dan Sherrange, Chair

**Wednesday, October 25, 2023, 5:00 PM**

Sharon Bulova Center for Community Health

8221 Willow Oaks Corporate Drive, Level 3, Room 3-314 West Fairfax,  
VA 22031

### **MEETING AGENDA**

- |                                                               |                  |
|---------------------------------------------------------------|------------------|
| <b>1. Meeting Called to Order</b>                             | Dan Sherrange    |
| <b>2. Roll Call, Audibility and Preliminary Motions</b>       | Dan Sherrange    |
| <b>3. Amendments to the Meeting Agenda</b>                    |                  |
| <b>4. Discussion with General Assembly</b>                    | Daryl Washington |
| Introductions                                                 |                  |
| Overview of County and Regional Legislative Priorities        |                  |
| Open Discussion and Q&A Session                               |                  |
| <b>5. Matters of the Public</b>                               | Dan Sherrange    |
| <b>6. Approval of the September 27, 2023, Meeting Minutes</b> | Dan Sherrange    |
| <b>7. Director's Report</b>                                   | Daryl Washington |
| A. County, Regional, State and Cross Agency Initiatives       |                  |
| <b>8. Matters of the Board</b>                                | Dan Sherrange    |
| <b>9. Committee Reports</b>                                   |                  |
| A. Service Delivery Oversight Committee                       | Anne Whipple     |
| B. Compliance & Executive Committee                           | Dan Sherrange    |
| C. Fiscal Oversight Committee                                 | Claudia Volk     |
| D. Other Reports                                              |                  |
| <b>10. Adjournment</b>                                        |                  |

Meeting materials are posted online at [www.fairfaxcounty.com/municipal-services-board/board/archives](http://www.fairfaxcounty.com/municipal-services-board/board/archives) or may be requested by contacting Sameera Awan at 703-324-7827 or at [Sameera.Awan@fairfaxcounty.gov](mailto:Sameera.Awan@fairfaxcounty.gov)



FAIRFAX - FALLS CHURCH

**Community  
Services Board**

# Session with General Assembly Delegation

Daniel Sherrange, CSB Board Chair  
Daryl Washington, CSB Executive Director

October 25, 2023



FAIRFAX - FALLS CHURCH

**Community  
Services Board**

# 2024 Legislative Priorities

# CSB Workforce Crisis



## Issue: CSB is facing a workforce crisis.

- According to a 2022 Joint Legislative Audit Review (JLARC) report, the average turnover rate among CSB direct care staff in FY22 was 25.2%.
- Despite local investments in new hiring incentives, significant staff vacancies in critical services positions remain – currently 121 vacancies.
- Service challenges are only heightened due to the lack of qualified clinical staff to operate needed community programs.

## Opportunity #1: Make regional investments in the community behavioral health and disability services workforce.

- Funding to ensure CSB can offer salaries competitive with the prevailing market rates.
- Funding to repay student loans with a commitment of working in the public sector.

## Opportunity #2: Enhance the workforce pipeline in Northern Virginia

- Expedite credentialing and decrease regulatory requirements to reduce regulatory/administrative burdens.
- Fund one new DBHDS funded FTE position to support the region in collaborating with academic resources.

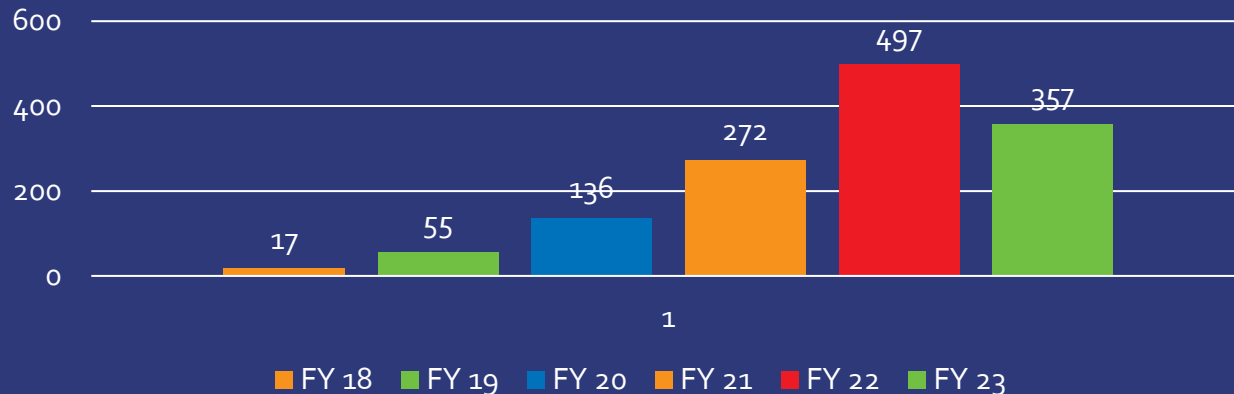
# Behavioral Health Crisis Response



## Issue: Growing Need to Expand Community-Based Response to Behavioral Health Crisis

- Inadequate capacity to support people in the community remains one of the contributing factors to the hospital bed crisis.
- 357 admissions to NVMHI were from other areas of the Commonwealth, 55% of all admissions (slightly down from 57.2% in FY22).

**Region 2 Year-over-Year  
Out-of-Area Diversions to NVMHI**



## Opportunity #1: Expand community-based crisis programs in Region 2

- Regional funding to expand critical crisis programs, including \$2.8 million for Fairfax County's well-established short-term Crisis Center to include 16 Adult 2 hour crisis recliners.

## Opportunity #2: Invest in programs and services that increase Region 2 community capacity

- Create a secure court-sanctioned alternative facility for individuals ready for discharge but held back by their NGRI status.
- Provide Region 2 CSBs access to Behavioral Health (BH) and Developmental Services (DS) programs for discharged state hospital patients.
- Develop intensive community-based housing programs that meet the clinical needs of individuals.
- Develop a specialized, 24/7 community-based program to serve as a viable alternative to hospitalization for individuals with developmental disabilities.

# DD Waivers

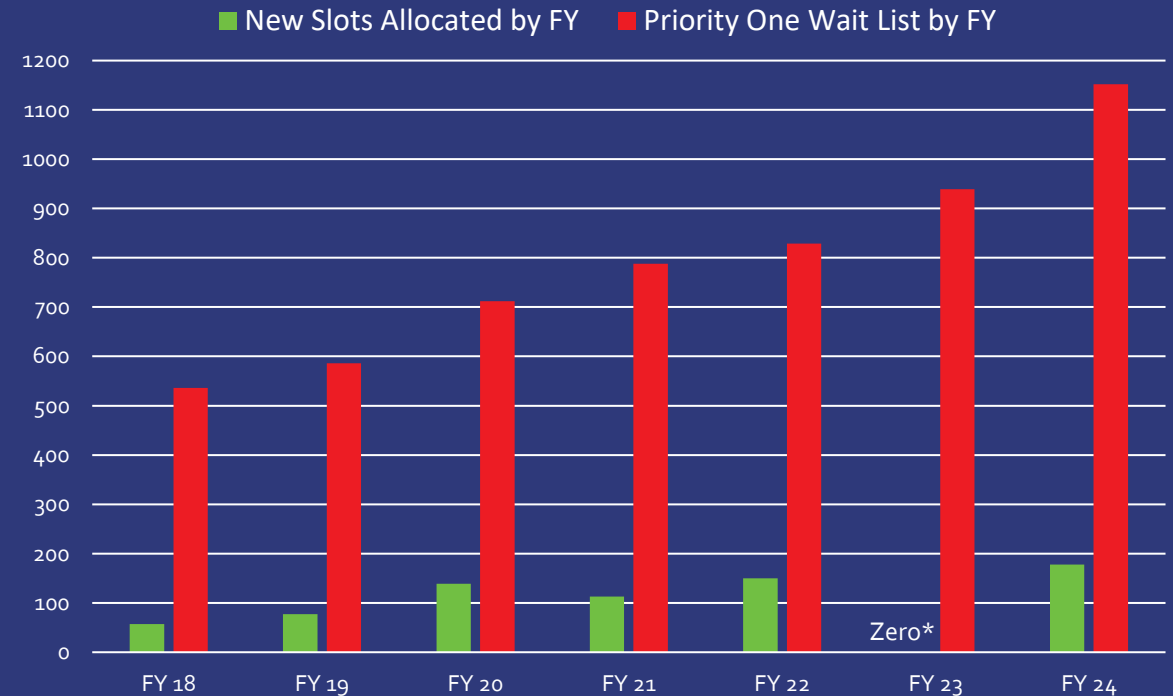


## Issue: New waivers are not keeping pace with the growth of the DD waiver wait list.

- In Fairfax, 2,944 people are on the wait list, including 1,152 on the Priority One wait list.
- Statewide, over 15,000 people are on the wait list, including 3,680 on the Priority One wait list.
- The need in Fairfax is three times that of any other jurisdiction.
- Ensuring that reimbursement rates support quality community-based DD services is critical when working to eliminate the Priority One wait list.

## Opportunity: Eliminate the Priority One DD waiver wait list.

### Fairfax County



\*Zero new waivers were issued for FY23 as the GA delayed the new waivers to FY24.

# Core Behavioral Health Services



## Issue: Insufficient funding for mandated STEP-VA services.

- At no point during STEP-VA implementation has the Commonwealth provided adequate funding for any of the newly mandated services.
- The gap in funding needed versus funding allocated greatly impacts our CSB because of the population size of our constituents.
- It is critical that DBHDS continues to move Virginia toward becoming a Certified Community Behavioral Health Clinic (CCBHC) state. DBHDS has currently pressed pause on implementation of statewide CCBHC's.

## Opportunity: Sustained investments in core behavioral health services

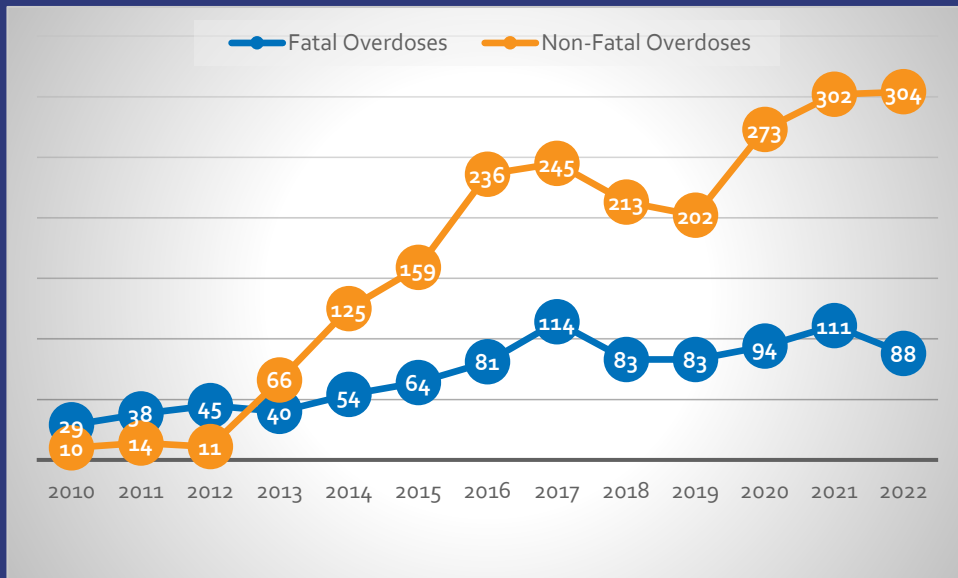
- Revisit funding amounts to ensure CSBs can cover cost of delivering services and support additional staff needed to meet increased demand.
- Align all CSBs with the CCBHC model, provide CCBHC certification for all 40 CSBs, and implement the prospective payment system (to be done statewide or for each interested region).

# Opioid Epidemic

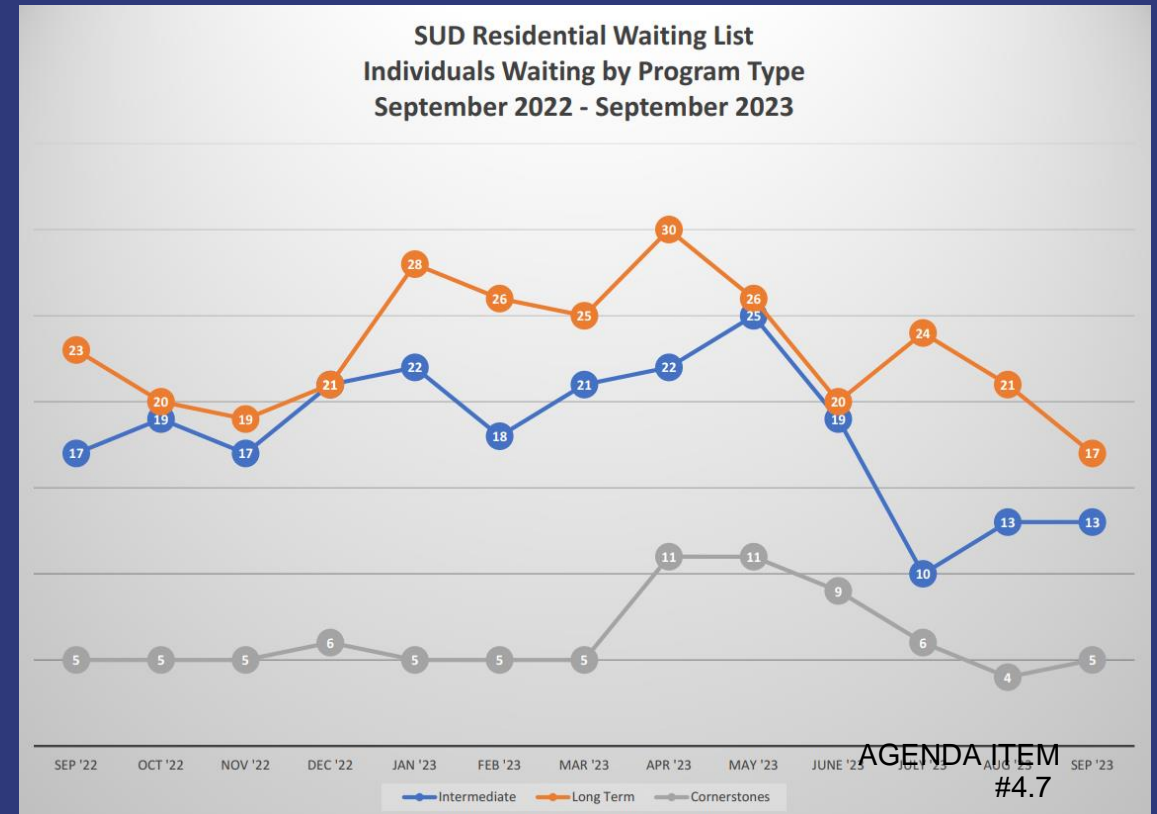


**Issue: The opioid epidemic continues to impact the Fairfax County Health District.**

- For fatal drug overdoses, opioids have contributed the highest numbers of cases going back to 2007.
- There were 88 opioid deaths in the Fairfax County Health District in 2022 – all but 1 involving fentanyl.



**Opportunity: Provide funding for MAT across all treatment settings, with a particular focus on youth.**



AGENDA ITEM #4.7





FAIRFAX - FALLS CHURCH

**Community  
Services Board**

# Questions and Discussion



[www.fairfaxcounty.gov/csb](http://www.fairfaxcounty.gov/csb)



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AGENDA ITEM  
#4.8

**FAIRFAX-FALLS CHURCH COMMUNITY SERVICES BOARD  
MEETING MINUTES  
SEPTEMBER 27, 2023**

The Fairfax-Falls Church Community Services Board met in regular session at the Sharon Bulova Center for Community Health, 8221 Willow Oaks Corporate Drive, Level 3, Room 3-314, West, Fairfax, VA 22031.

**1. Meeting Called to Order**

Board Chair Dan Sherrange called the meeting to order at 5:02 PM.

**2. Roll Call, Audibility, and Preliminary Motions**

**PRESENT:**     **BOARD MEMBERS:** BOARD CHAIR, DAN SHERRANGE; ROBERT BARTOLOTTA; SHEILA COPLAN JONAS; ANDREW SCALISE (FAIRFAX, VA); BETTINA LAWTON; CLAUDIA VOLK; JIM GILLESPIE; EVAN JONES; DARIA AKERS; KAREN ABRAHAM (FAIRFAX, VA)

**ABSENT:**     **BOARD MEMBERS:** GARRETT MCGUIRE; ANNE WHIPPLE; CAPTAIN DANIEL WILSON; SRILEKHA PALLE

**Also present:** Executive Director Daryl Washington, Deputy Director of Administrative Operations Jean Post, Deputy Director of Community Living Barbara Wadley- Young, Healthcare Systems Director Jennifer Aloi, Director of Individual and Family Affairs Michael T. Lane, and Board Clerk Sameera Awan.

**3. Matters of the Public**

None were presented.

**4. Amendments to the Meeting Agenda**

The meeting agenda was provided for review, no amendments were made.

**BOARD MEMBER CONSENSUS TO APPROVE AGENDA ITEM NO. 4**

**5. Approval of the Minutes**

The July 26, 2023, CSB Board Meeting Minutes were provided for review, no amendments were made.

**MOTION TO ADOPT JULY 26, 2023, MEETING MINUTES WAS MOVED BY BOARD MEMBER JIM GILLESPIE, SECONDED BY BOARD MEMBER EVAN JONES.**

**MOTION TO ADOPT WAS APPROVED BY ANDREW SCALISE, SHEILA COPLAN JONAS, BETTINA LAWTON, CLAUDIA VOLK, AND ROBERT BARTOLOTTA. BOARD MEMBERS DAN SHERRANGE KAREN ABRAHAM, AND DARIA AKERS ABSTAINED.**

## 6. Staff Presentation

**Director of Individual and Family Affairs Michael T. Lane** delivered a staff presentation on Peer and Recovery Services. Over the past year, the recovery services division underwent a name change, previously known as The Office of Individual and Family Affairs (OIFA). This rebranding was primarily undertaken to align with the focus on recovery services, better representing their work. Despite the name change, they continue to emphasize amplifying the voices of individuals with lived experiences in mental health and substance use challenges, as it remains an integral part of their mission. Recovery and wellness programs are crucial in supporting individuals in their recovery from mental health challenges and substance abuse. These programs provide hope, healing, and the tools to help individuals reach their goals. There are Certified Peer Specialists (CPSs) to facilitate recovery. CPSs are individuals with lived experience in mental health challenges, substance use disorders, or both who have successfully achieved stable recovery. They are trained to assist others on their recovery journey. They provide individual support, helping set career, recovery, health, or financial goals, facilitate effective communication with service providers, connect individuals to community resources, and share their experiences, strengths, and hope. There are also recovery centers, which serve as spaces for individuals in recovery from mental health challenges and substance abuse to find hope, healing, and tools to reach their goals. Peer Recovery Specialists (PRSs) and volunteers at these centers foster an environment where peers support one another in achieving independence in housing, education, and employment. They create a sense of community, share skills and talents, discover available resources, and provide a network for building self-confidence. These centers offer social activities and an informal setting for individuals who have walked similar paths to connect, find inspiration, and continue their recovery journey together.

## 7. Director's Report

### A. County, Regional, State and Cross Agency Initiatives

**Executive Director Daryl Washington** delivered a briefing on the Governor's recently approved expanded budget, with all the slated modifications scheduled to be implemented on January 1, 2024, as documented under Agenda Item #7A.1 through #7A.11. Within the report, there is an allocation of \$58M specified for the enhancement of the crisis system. These funds are anticipated to be apportioned among the five CSB regions throughout the state. There is an allocation of \$10M for mobile crisis services. These funds will be used to partner with hospitals across the state to establish what is referred to as a psychiatric emergency room. Additionally, efforts will be made to expand children's psychiatry services, building on a previously existing statewide consultation program. The aim is to strengthen this service and facilitate primary care physicians' prescribing and consultation services. This will broaden the range of individuals with the knowledge and access to consultation for enhancing and expanding the psychiatric medication prescription for youth when necessary. There is also funding to expand supervised residential care, primarily for individuals transitioning from the state hospital to the community. These individuals will typically require moderate to intensive residential treatment to support their integration into the community. It's important to note that these funds are usually allocated to the region, not individual CSBs. There is \$18M earmarked for CSB staff compensation, potentially doubling to \$36M in the upcoming budget. An additional \$4.3M is allocated for System Transformation Excellence and Performance (STEP VA). In the realm of developmental

disability services, the significant development is the introduction of new waivers. Specifically, there will be 500 new waiver slots; the allocation to the Fairfax-Falls Church CSB is estimated to be between 80 and 100, with precise figures yet to be determined. Finally, concerning Medicaid, many Medicaid services received an increased reimbursement percentage during the public health emergency. When the public health emergency concludes, this bump in reimbursement rates will be reinstated as of January 1<sup>st</sup>. Essentially, this results in no net gain or loss.

The Board of Supervisors (BOS) approved the carryover with several youth-focused initiatives to note. The first initiative is the Youth Medication Assisted Treatment (MAT) Service, which expands the CSB's limited treatment program. This move directed the CSB to apply for local opioid abatement funds, with an application already submitted. The relevant group met on Thursday, September 21<sup>st</sup>, but there has yet to be an official word regarding the outcome. The final approval will be contingent on BOS endorsement. The second initiative is the Youth Mental Health Outreach and Engagement and Intervention Program. This program empowers the CSB to provide outreach, mental health screening, engagement, assessment, therapy, and case management in various community settings across the county. This includes non-traditional settings and different geographical locations, encompassing north, central, and south county areas. The goal for youth services is expanding youth mental health support, particularly in non-traditional settings. Further details were intentionally left somewhat vague, as implementation details are still under consideration. The CSB aims to commence this program with a team of six, distributed strategically across areas identified as high need through heat mapping. The third initiative is the Youth Crisis Services and Re-entry Program, which involves establishing a youth crisis stabilization program, including a crisis receiving center. This program will offer crisis stabilization, detox treatment, and aftercare, making it the most financially substantial option. The CSB has been granted permission to investigate establishing a youth 24/7 service and program focusing on detox and residential treatment for youth with substance use issues. The intention here is to pivot from the initial request and explore a facility capable of holding at least four different licenses while retaining the same facility size.

#### **B. Electronic Healthcare Record Update**

**Healthcare Systems Director Jennifer Aloï** reported that the Corporate Data Warehouse (CDW) team responsible for developing the data warehouse delivered a presentation at the Data Management Committee Interoperability Summit on Friday, September 22nd. During their presentation, they provided a comprehensive overview of the progress made in constructing the Data Warehouse. The summit was attended by various organizations, including CSB, the Department of Medical Assistance Services (DMAS), the Department of Behavioral Health and Developmental Services (DBHDS), and external vendors who also made presentations. Jennifer was pleased to report that the CDW team performed exceptionally well, and the summit was efficiently organized. Following the summit, the team initiated generating reports from the Data Warehouse. The initial reports produced demonstrated robust functionality and accuracy. Consequently, they are delighted to announce that they have given the green light to proceed, and they are now officially running a series of reports from the Data Warehouse.

## 8. Matters of the Board

**Board Chair Dan Sherrange** delivered a presentation on the CSB Year-End Fiscal Summary for FY 2023 and reviewed the previous year's financial results. He explained that the allocated resources were displayed on the left side of Agenda Item #9B.2, while the right side showcased the expenditures. The Board Chair Sherrange noted a carryover of \$35M, which had been previously discussed. He also highlighted improved spending performance in the current year, attributed to increased spending in labor categories and improved cost management. These standard reports are regularly provided by the CSB. Mr. Sherrange also mentioned that the next CSB board meeting is scheduled for October 25<sup>th</sup> at the Sharon Bulova Center, where the General Assembly will attend. During this meeting, they will have the opportunity to brief legislators on key points and discuss various issues with them. He encouraged board members to engage in personal outreach to the legislators.

**Board Member Daria Akers** inquired about the rationale behind scheduling the meeting with legislators on October 25<sup>th</sup>, considering Election Day is just two weeks later. She suggested the possibility of meeting in November after the election results are known.

**Board Chair Dan Sherrange** clarified that this matter had been previously discussed to determine the best approach. He explained that the October meeting would involve inviting the current legislators who are already familiar with the CSB. In November, there will be a follow-up effort to brief any newly elected legislators on the CSB's key legislative points.

## 9. Committee Reports

### A. **Service Delivery Oversight Committee**

There was no meeting for September 2023. **The next Service Delivery Oversight Committee meeting is Wednesday, October 11, 2023, at 5:00 PM.**

### B. **Compliance Committee**

Compliance Committee Chair Dan Sherrange had no updates or information to share from the September 2023 meeting. **The next meeting of the Compliance Committee will be held on Wednesday, October 18, 2023, in conjunction with the Executive Committee meeting starting at 4:00 PM.**

### C. **Fiscal Oversight Committee**

Fiscal Oversight Committee Chair Claudia Volk provided a report on recent developments. She noted that the CSB had submitted a 7% budget reduction request for Fiscal Year 2025 by the end of August 2023, which has already been submitted. Claudia also highlighted a substantial reduction in the vacancy rate, with a 35% decrease compared to the previous year. Specifically, there has been a notable improvement in Emergency Service vacancies, which reached a 13-month low. As of mid-August 27, offer letters and 3 hiring packages were in progress. Lastly, she mentioned that the budget carryover was scheduled for presentation to the BOS on August 26<sup>th</sup> and was approved as submitted. **The next Fiscal Oversight Committee meeting is Thursday, October 19, 2023, at 4:00 PM.**

**10. Adjournment**

A motion to adjourn the meeting was made by Board Member Bettina Lawton and seconded by Board Member Daria Akers. The motion was approved unanimously, and the meeting was adjourned at 7:02 PM.

\*Board Members also participated remotely via Zoom.

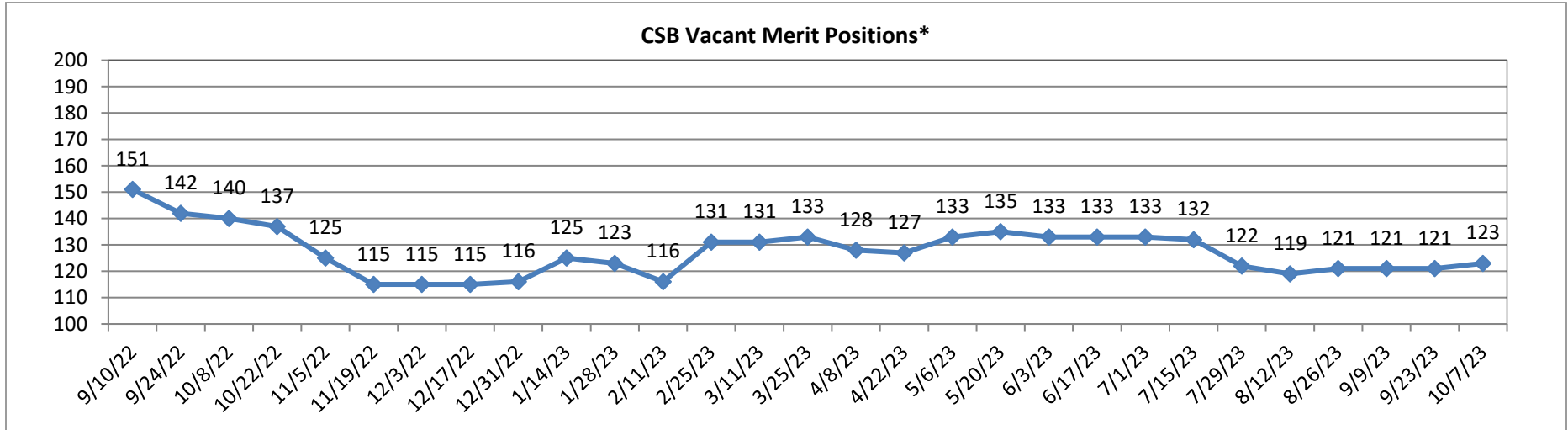
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Date Approved

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CSB Board Clerk

DRAFT



\*Note: 1/14/2023 reflects a change in reporting to include vacancies in Funds 400 & 500. All data reported prior to 1/14/2023 represents only Fund 400

**Vacancies in critical areas\*** \*includes all merit positions (all funds – regular 400 and grant 500)

Service area	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	August		September	
												Count	Breakdown	Count	Breakdown
Emergency Svcs/MCU	27	21	20	19	21	20	16	14	15	13	10	10	4 CIS	9	3 CIS
													2 Peer Support Spec		2 Peer Support Spec
													1 BH Mgr		1 Emer/Mobile Crisis Supv
													3 BHS II		3 BHS II
Behavioral Health – Outpatient Svcs	14.5	10.5	7	5	8	8	10	9	11	10	11	11	10 BHS II	10	10 BHS II
													1 BH Sr. Clin		
Youth & Family – Outpatient Svcs	5	4	3	3	2	3	5	5	7	7	5	7	4 BH Sr. Clin	5	4 BH Sr. Clin
													3 BHS II		1 BHS II
Support Coordination	22	18	18	11	6	7	7	10	9	9	10	7	7 DDS II	7	7 DDS II
ADC/ Jail Diversion	8	9	14	15	11	16	15	11	13	13	8	8	2 BHS I	5	1 BHS I
													5 BHS II		3 BHS II
													1 BH Sr. Clin		1 BH Sr. Clin
EAR	1	1	1	1	2	2	1	3	4	3	3	1	1 BH Sr. Clin	2	2 BH Sr. Clin

# 2023 CSB Board and Committee Meetings

## Fairfax-Falls Church Community Services Board

	Service Delivery Oversight Committee	Compliance Committee	Executive Committee	Fiscal Oversight Committee	CSB Board
2023 Meetings	2 <sup>nd</sup> Wednesday 5:00 PM	3 <sup>rd</sup> Wednesday 4:00 PM	3 <sup>rd</sup> Wednesday 4:30 PM	3 <sup>rd</sup> Thursday 4:00 PM	4 <sup>th</sup> Wednesday 5:00 PM
January	*	*	18	19	25
February	8	*	15	16	22
March	*	*	15	16	22
April	12	19	19	20	*
May	*	*	17	18	24
June	14	*	21	22	28
July	*	*	19	*	26
August	9	16	16	17	*
September	*	*	20	21	27
October	11	*	18	19	25
November	*	*	8**	16**	15**
December	6**	13**	13**	14**	*

\*No Meeting

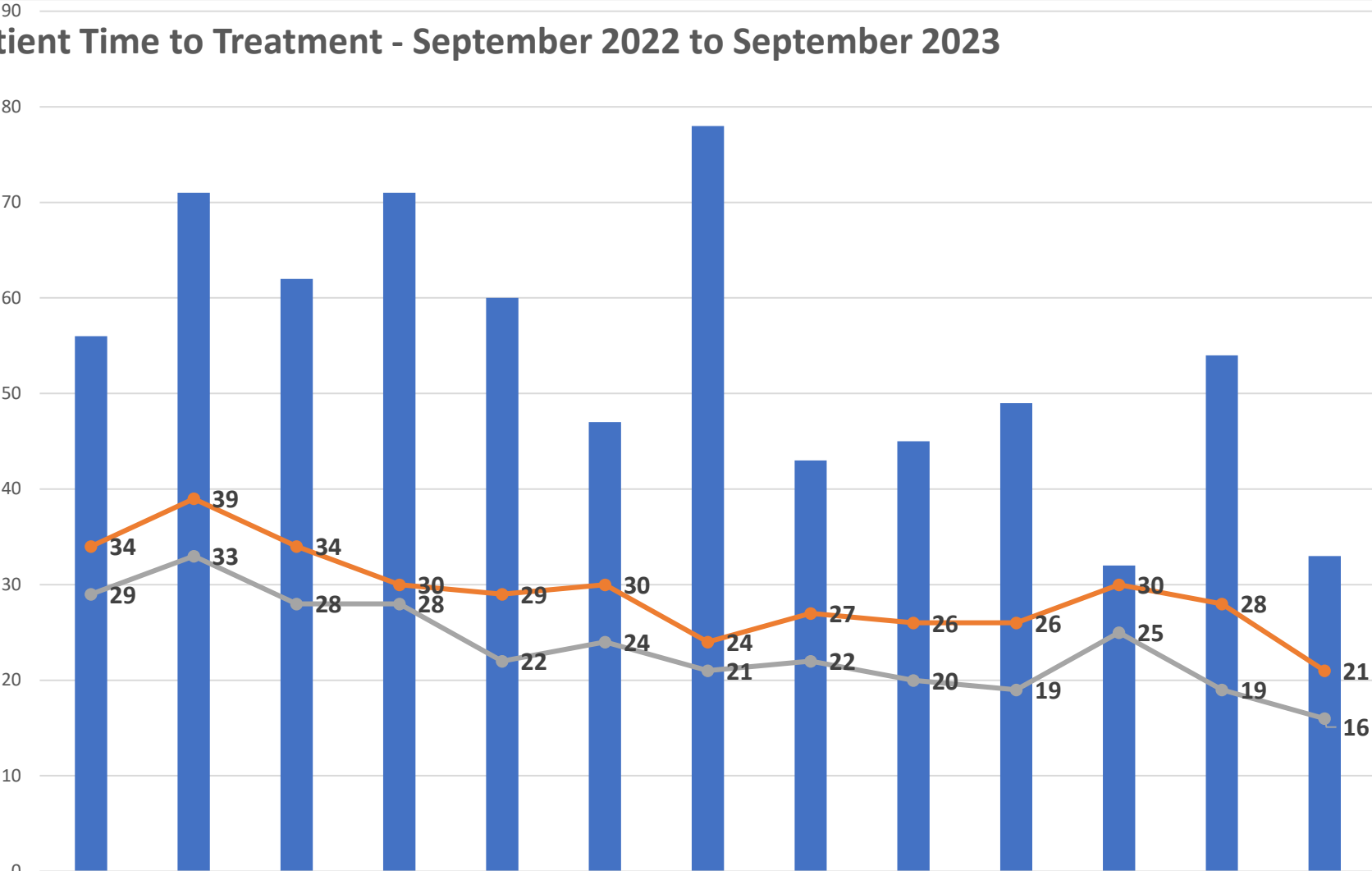
\*\* Meeting date changed to accommodate holiday schedule

Accommodate: Thanksgiving, Christmas Day, and New Year's Day Holidays

**Note:** All in person Committee and Board meetings are held at the Sharon Bulova Center, Room 3-314, West



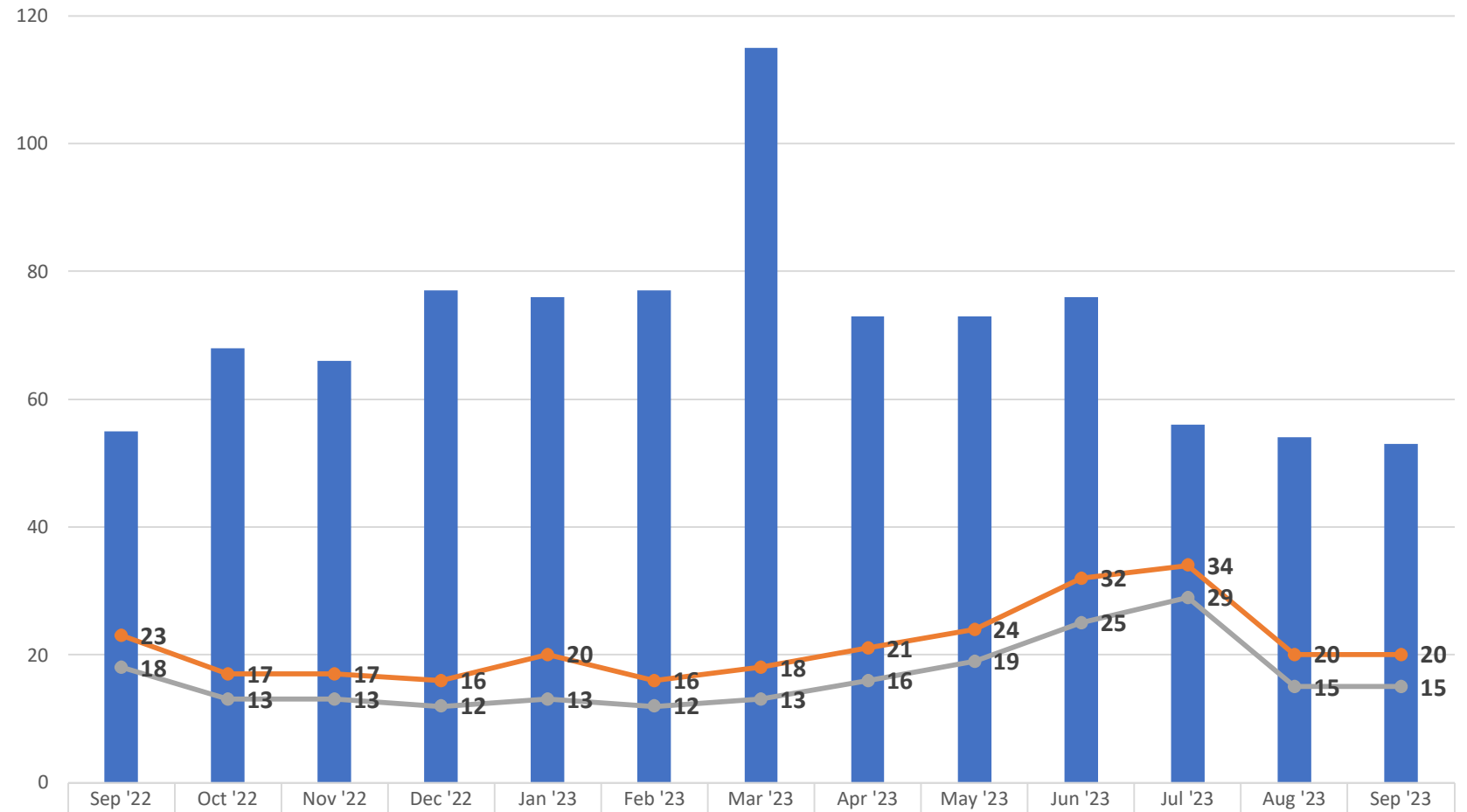
# Adult Outpatient Time to Treatment - September 2022 to September 2023



# Adults Who Attended 1st Treatment Appt	56	71	62	71	60	47	78	43	45	49	32	54	33
Average # Days from Assessment to Treatment	34	39	34	30	29	30	24	27	26	26	30	28	21
Average # Days from Assessment to 1st Available / Accepted Appt*	29	33	28	28	22	24	21	22	20	19	25	19	16

\*Average number of days from Assessment to Date of First Available Appointment (if known) OR from Assessment to Date of First Accepted Appointment

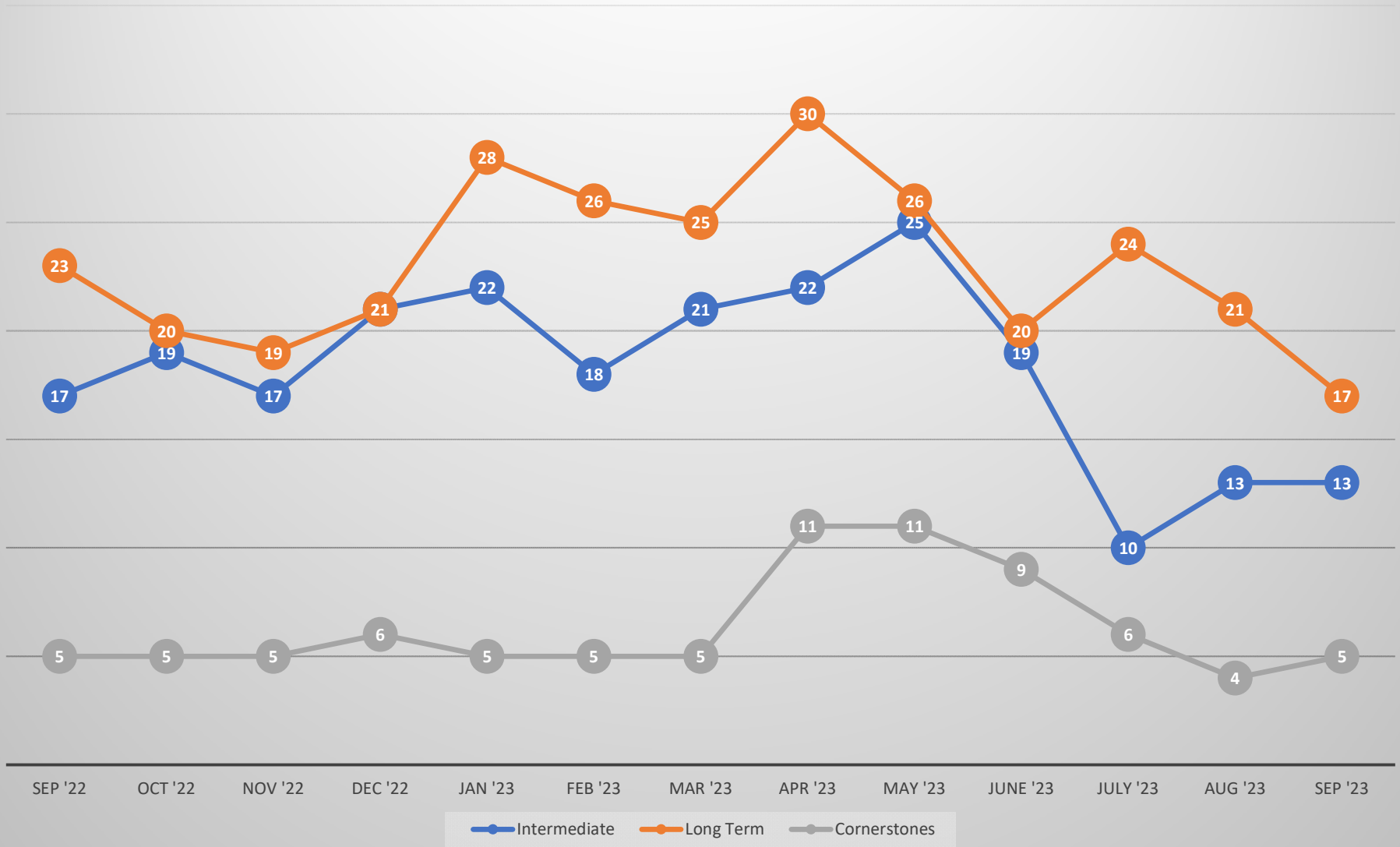
## Youth Outpatient Time to Treatment - September 2022 to September 2023



# Youth Who Attended 1st Treatment Appt	55	68	66	77	76	77	115	73	73	76	56	54	53
Average # Days from Assessment to Treatment	23	17	17	16	20	16	18	21	24	32	34	20	20
Average # Days from Assessment to 1st Available / Accepted Appt*	18	13	13	12	13	12	13	16	19	25	29	15	15

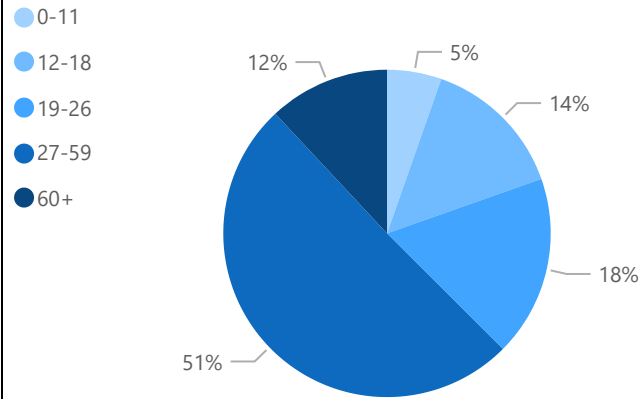
\*Average number of days from Assessment to Date of First Available Appointment (if known) OR from Assessment to Date of First Accepted Appointment

## SUD Residential Waiting List Individuals Waiting by Program Type September 2022 - September 2023

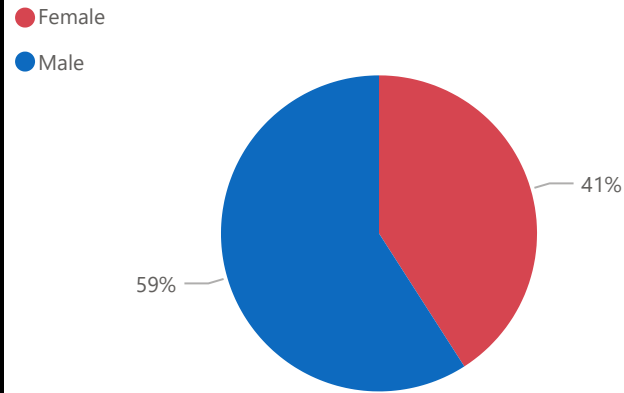


# CSB Status Report

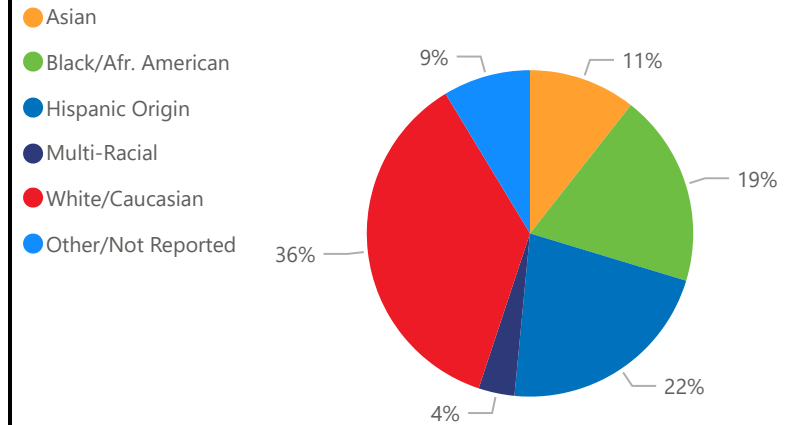
## Age



## Gender

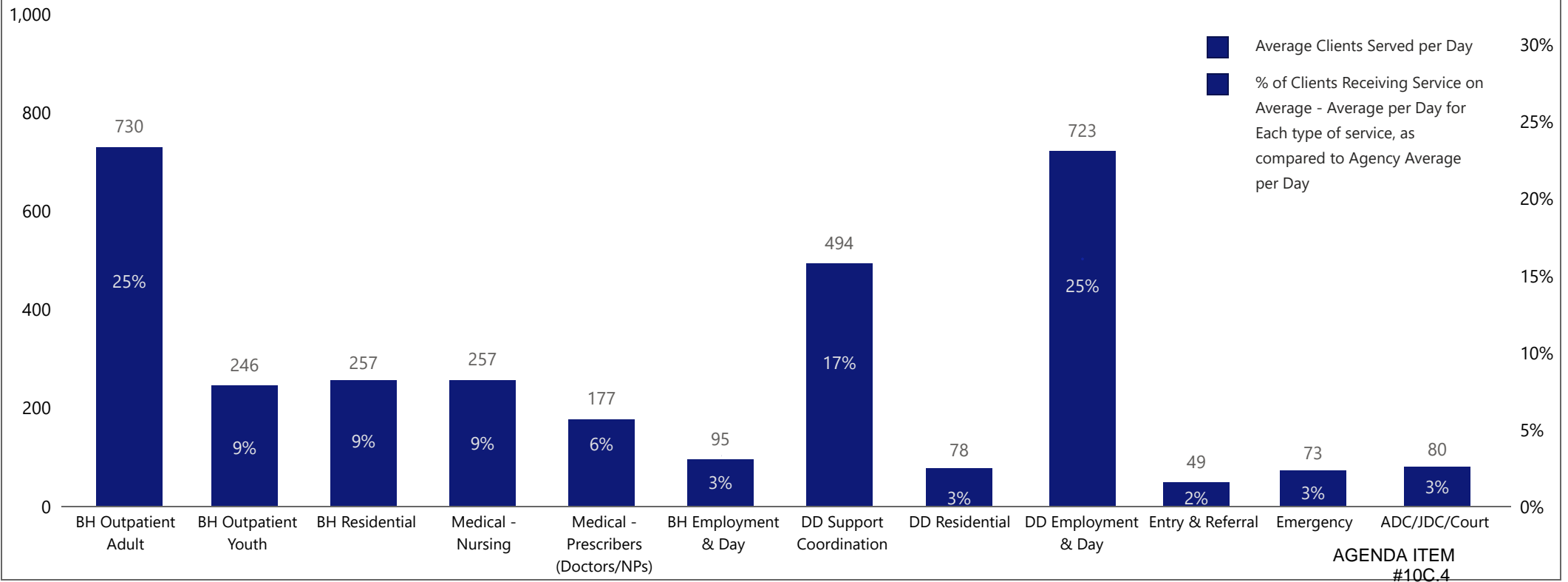


## Race/Ethnicity



## Average Clients Served per Day by Type of Service - August 2023

Agency Average Served per Day in August 2023 = 2,782





## Individuals Served by Month by Type of Service Aug'22 - Aug'23

Service Area	Aug'22	Sep'22	Oct'22	Nov'22	Dec'22	Jan'23	Feb'23	Mar'23	Apr'23	May'23	Jun'23	Jul'23	Aug'23	Monthly Variance	Yearly Variance	# Served Past 12 Months
All Individuals Served	9,137	9,184	9,079	9,234	9,050	9,541	9,638	10,025	9,646	9,898	9,667	9,219	9,689	▲ 5.1%	▲ 6.0%	22,023
BH Outpatient Adult	3,199	3,175	3,191	3,238	3,278	3,309	3,323	3,411	3,259	3,334	3,258	3,227	3,289	▲ 1.9%	▲ 2.8%	5,352
BH Outpatient Youth	918	894	928	946	964	993	1,038	1,146	1,142	1,178	1,166	1,069	1,063	▼ -0.6%	▲ 15.8%	2,088
BH Residential	428	433	442	441	433	436	453	470	455	460	445	438	437	▼ -0.2%	▲ 2.1%	1,410
Medical - Nursing	1,418	1,404	1,424	1,307	1,324	1,392	1,406	1,522	1,400	1,333	1,316	1,405	1,416	▲ 0.8%	▼ -0.1%	3,706
Medical - Prescribers	2,805	2,625	2,760	2,664	2,534	2,713	2,583	2,927	2,489	2,715	2,566	2,485	2,679	▲ 7.8%	▼ -4.5%	6,544
BH Employment & Day	346	355	337	310	307	322	314	327	304	323	322	317	324	▲ 2.2%	▼ -6.4%	624
DD Support Coordination	2,524	2,518	2,385	2,520	2,301	2,613	2,691	2,858	2,729	2,801	2,734	2,544	2,862	▲ 12.5%	▲ 13.4%	5,322
DD Residential	84	84	84	84	83	81	79	79	79	78	78	78	78	= 0.0%	▼ -7.1%	85
DD Employment & Day	1,109	1,124	1,145	1,148	1,170	1,163	1,154	1,162	1,143	1,149	1,074	1,057	1,146	▲ 8.4%	▲ 3.3%	1,358
Entry & Referral (EAR)	600	617	542	523	544	607	620	801	731	791	746	666	763	▲ 14.6%	▲ 27.2%	5,581
EAR Screenings	379	396	383	393	400	449	421	556	452	531	491	450	486	▲ 8.0%	▲ 28.2%	4,615
EAR Assessments	215	233	251	218	240	234	256	279	203	221	160	142	187	▲ 31.7%	▼ -13.0%	2,507
Emergency	915	869	876	869	858	976	947	990	836	985	879	834	938	▲ 12.5%	▲ 2.5%	6,858
ADC/JDC/ Court	609	639	663	628	645	656	664	678	599	576	602	540	614	▲ 13.7%	▲ 0.8%	2,861

\* Monthly variance compares current month to previous month; Yearly variance compares current month to the same month in previous calendar year (Ex: May 2021 compared to May 2020). Number Served Past 12 Months is an unduplicated count of clients served in each area in the 12 months prior to end of the reporting period (ex: June 2021 - May 2021).

## Service Definitions

All	Includes all individuals receiving services from the Community Services Board. Includes services for people of all ages who have mental illness, substance use disorders and/or developmental disabilities.
BH Outpatient Adult	Individuals receiving services from adult outpatient behavioral health programs. Includes the following service areas/programs: Behavioral Health Outpatient (BHOP) - MH Outpatient, MH Case Management, SUD Intensive Outpatient, Turning Point, Partial Hospitalization; Intensive Community Treatment - Intensive Case Management, PACT, Discharge Planning, PATH; Jail Diversion; Medication Assisted Treatment. Includes individuals receiving engagement, monitoring and treatment services.
BH Outpatient Youth	Individuals receiving services from youth behavioral health outpatient programs. Includes the following service areas/programs: Youth & Family Outpatient - MH Outpatient, MH Case Management, SUD Outpatient; Youth & Family Intensive - Wraparound Fairfax, Resource Program, Youth Discharge Planning. Includes individuals receiving assessment, monitoring, and treatment services.
BH Residential	Individuals receiving services from behavioral health residential programs. Includes the following service areas/programs: Supportive Community Residential - directly operated and contracted residential services; SUD Residential Treatment - Crossroads, Cornerstones, A New Beginning, New Generations; Youth Residential - Leland House; Wellness Circle Residential Crisis Stabilization, Fairfax Detoxification.
Medical - Nursing	Individuals receiving Nursing services in an outpatient setting.
Medical - Prescribers	Individuals receiving services from a prescriber (psychiatrist or nurse practitioner). Services are provided in a variety of treatment settings, including outpatient, residential, assessment, and emergency services.
BH Employment & Day	Individuals receiving behavioral health individual or group supported employment services.
DD Support Coordination	Individuals receiving developmental support coordination services. Includes individuals receiving targeted case management, monitoring, and assessment services.
DD Residential	Individuals receiving developmental disability residential services. Includes directly operated group homes and apartments, and locally funded contracted residential placements.
DD Employment & Day	Individuals receiving developmental day support services; individual, group, or sheltered employment services; and self-directed services. Includes both waiver and locally-funded services.
Entry & Referral (EAR)	Individuals receiving behavioral health entry and referral services. Includes Adult & Youth walk-in screening and assessment clinical services, case coordination, and call center referrals.
EAR Screenings	Individuals receiving behavioral health screening services at Entry & Referral.
EAR Assessments	Individuals receiving behavioral health assessment services at Entry & Referral.
ADC/JDC/Court	Individuals receiving CSB jail-based or court services. Includes CSB services provided at the Adult Detention Center, Juvenile Detention Center and adult participants in specialty court dockets (Veterans' Docket, Mental Health Docket, Drug Court).

### Notes:

#### Page 1:

- Demographics – Typically little change in demographics over time. Reflects demographic characteristics of all individuals served in the reporting month.
- Average Clients Served per Day by Type of Service – Compares average served per day in each service area to the agency-wide average number served. Individuals may receive more than one type of service per day and totals may be greater than 100%.

#### Page 2:

- Numbers reported show the unduplicated number of clients served in each service area. Individuals may receive multiple services each month within a service area and may receive more than one type of service each month.
- The Monthly Variance compares the reporting month to the prior month. The Yearly Variance compares the reporting month to the same month in the previous calendar year.
- All Individuals Served - The number of individuals served has increased by 6% compared to the previous year. The overall increase is partly due to increases in adult & youth behavioral health outpatient, and developmental support coordination and employment & day programs.
- BH Outpatient Adult – There is a 3% increase as compared to August 2022 due to increases in adult mental health outpatient & case management services in the adult Behavioral Health Outpatient (BHOP) program and in medication assisted treatment services.
- BH Outpatient Youth – This service area typically sees an increase in referrals and individuals served in the late fall that continues throughout the school year and drops off over the summer months. There is a 16% increase as compared to August 2022, including an increase in individuals receiving substance use and medication assisted treatment services.
- BH Residential – There is a 2% increase in the number of individuals served compared to August 2022, with reductions in recent months as some residential programs have slowed admissions due to staff vacancies and reductions have occurred through attrition in the Residential Intensive Care (RIC) program.
- Medical – Nursing & Prescribers (Psychiatrists & Nurse Practitioners) serve individuals in a variety of treatment settings. There is regular fluctuation in the number of clients served based on the needs of the clients.
- BH Employment & Day – The number served is trending lower as compared to the prior year. The Supported Employment program implemented a new evidence-based model in the Fall of 2022. This model prescribes smaller caseload sizes while providing intensive, individual support, a rapid job search and placement in employment, time-unlimited in-work support, increased collaboration between service providers, and support for both the employee and employer.
- DD Support Coordination – There is typically monthly variation based on quarterly and annual review cycles. The number of individuals served is trending higher compared to last year due to new waivers and an increase in assessment services.
- DD Residential – Includes all individuals served in directly operated residential programs and locally-funded contract placements. The number of individuals served each month is trending lower overall due to reductions in the directly operated group home census and locally funded contract placements through natural attrition. New residential placements through community partners are waiver funded.
- DD Employment & Day – There has been an upward trend in this service area with a 3% increase over the prior year as programs have reopened and individuals have returned to programming. Developmental employment & day programs have been able to reopen from closures that were necessary during the pandemic, along with new graduate placements and people returning to service who had deferred during the pandemic. This service area experiences reductions over the summer months due to the summer break for some self-directed services.
- Entry & Referral– The number of clients receiving screenings, assessments, and served overall has been trending higher compared to the prior year. In more recent months, there was a decrease in the number of individuals receiving assessment services as compared to March 2023 due to a combination of staff turnover and some decreased client demand for services.
- Emergency – There is monthly fluctuation in the demand for Emergency services. All individuals who present for services are evaluated by Emergency services staff.
- ADC/JDC/Court – The number of individuals served has been trending higher over the past year with the jail population and referrals increasing, including for individuals with substance use disorder receiving medication assisted treatment. The number of individuals served in recent months has trended lower, partly due to staff vacancies in the Jail Services program. Individuals are triaged and served in order of priority, with all individuals seen within 14 days of referral.