



**FAIRFAX-FALLS CHURCH COMMUNITY SERVICES BOARD**

**Martha Lloyd, Chair**

**Fairfax County Government Center**

**12000 Government Center Parkway, Conference Rooms 9 & 10**

**Fairfax, Virginia 22035**

**Wednesday, September 28, 2011**

**7:30 p.m.**

- |     |   |                   |           |
|-----|---|-------------------|-----------|
| 1.  | <b>Meeting Called to Order</b>              | Martha Lloyd      | 7:30 p.m. |
| 2.  | <b>Matters of the Public</b>                |                   | 7:35 p.m. |
| 3.  | <b>Board Recognition</b><br>Peggy Kane      |                   | 7:40 p.m. |
| 4.  | <b>Amendments to the Meeting Agenda</b>     | Martha Lloyd      | 7:45 p.m. |
| 5.  | <b>Consent Agenda</b>                       |                   | 7:50 p.m. |
| 6.  | <b>Matters of the Board</b>                 |                   | 7:55 p.m. |
| 7.  | <b>Action Items</b>                         |                   | 8:15 p.m. |
|     | A. Grant Application: AI's Pals             | Jamie MacDonald   |           |
|     | B. Grant Application: Community Housing     | Bill Belcher      |           |
|     | C. FY 2013 Base Budget                      | Bill Belcher      |           |
|     | D. ID-DD Waivers: Request to Co-Sign Letter | Woody Witt        |           |
| 8.  | <b>Information Items</b>                    |                   | 8:30 p.m. |
|     | A. Electronic Health Record Update          | Cathy Pumphrey    |           |
|     | B. Balanced Score Card                      | Cathy Pumphrey    |           |
| 9.  | <b>Executive Director's Report</b>          | George Braunstein | 8:55 p.m. |
|     | A. FY 2013 Budget Reductions                |                   |           |
|     | B. Regional Acute Care Update               |                   |           |
|     | C. State Update Managed Care                |                   |           |
|     | D. Minority Mental Health Awareness Awards  |                   |           |
|     | E. Other                                    |                   |           |
| 10. | <b>Adjournment</b>                          |                   | 9:20 p.m. |

Consent Agenda

Motion:

I move that the Board include the items listed on the Consent Agenda:

- A. Approval of minutes of the July 27, 2011, Board meeting.
- B. Acceptance of minutes of the July 20, 2011 Executive Committee meeting.
- C. Acceptance of minutes of the September 6, 2011 Executive Committee meeting.
- D. Acceptance of minutes of the September 7, 2011 Intellectual Disabilities/Developmental Disabilities Workgroup meeting.
- E. Acceptance of minutes of the September 14, 2011 Substance Use Disorders/Mental Health Workgroup meeting.

Fairfax-Falls Church Community Services Board  
July 27, 2011

The Board met in regular session at the Fairfax County Government Center, 12000 Government Center Parkway, Conference Rooms 9 and 10, in Fairfax.

The following CSB members were present: Pam Barrett, Mary Ann Beall, Susan Beeman, Jessica Burmester, Lynne Crammer, Mark Gross, Jean McNeal, Mattie Palmore, Mark Sites, Lori Stillman, Woody Witt, and Jane Woods

The following CSB members were absent: Martha Lloyd, Diane Hofstadter, and Glenn Kamber

The following CSB staff were present: Gary Axelson, Anita Baker, Bill Belcher, George Braunstein, Belinda Buescher, Ginny Cooper, Evan Jones, Dave Mangano, Cathy Pumphrey, Jenna Rosenberger, Jim Stratoudakis, Will Williams, Alan Wooten

Also present were other county staff, private sector staff and members of the public.

1. Meeting Called to Order

Major Mark Sites called the meeting to order at 7:36 p.m.

2. Board Recognition

Ms. Nancy Mercer and Ms. Jill Egle were recognized for their outstanding work as Co-Executive Directors of the Arc of Northern Virginia. The Board and staff thanked them for their work and wished them well on their future endeavors.

3. Amendments to the Meeting Agenda

There were no amendments to the Meeting Agenda.

4. Matters of the Public

There were no matters of the public.

5. Consent Agenda

➤ Ms. Mary Ann Beall moved the Board approve the Consent Agenda with the following items included:

- A. Approval of minutes from the June 22, 2011 Board meeting
- B. Acceptance of minutes of the May 25, 2011 External Committee meeting
- C. Acceptance of minutes of the June 14, 2011 Executive Committee meeting
- D. Acceptance of minutes of the June 22, 2011 External Committee meeting
- E. Acceptance of minutes of the July 6, 2011 ID/DD Workgroup meeting

The motion was seconded and approved.

6. Matters of the Board

- A. Ms. Jane Woods acknowledged that Mr. George Braunstein gave an excellent, informed presentation to Medicaid and DBHDS at a hearing earlier in the week.
- B. Ms. Mattie Palmore noted that one of the CSB's consumers was hit by a car last Friday. His funeral will be Thursday at Woodlawn United Methodist Church.
- C. Major Sites noted that the External Committee will be planning another forum on Mental Health First Aide November 5<sup>th</sup> in South County. A second forum will be held at the Northern Virginia Community College Annandale Campus.
- D. Major Sites noted that the Board will be planning a retreat in late September or early October. The Board discussed possible dates.

7. FY 2012 State Performance Contract

A. Public Hearing

Major Mark Sites opened a public hearing for the FY 2012 State Performance Contract. Seeing that no one was present to speak the public hearing was closed.

B. Board Action

Ms. Beall moved that the Board approved the State Performance Contract. The motion was seconded and approved.

8. Action Items

- A. Carryover Budget Review – Mr. Bill Belcher reviewed the Carryover Budget with the Board members.

Ms. Jessica Burmester moved that the CSB approve the FY 2011 Carryover Budget adjustments. The motion was seconded and approved.

B. Approval of Associate Committee Members

Mr. Mark Gross moved that the Board accept the following as Associate Members of the SUDs/MH Workgroup. The motion was seconded and approved with one opposition. Ms. Woods moved that the Board reopen discussion on the motion that they just passed. The motion was seconded with one opposition. Ms. Woods moved that the Board accept the following Associate Workgroup Members as members of the SUDs/MH Workgroup so long as each attests that it is a viable, actively meeting group. The motion was seconded by Mr. Gross and unanimously approved.

C. 2011 Fairfax County Human Services Issue Paper

Mr. Witt moved that the Board endorse the recommendations for the 2012 Fairfax County Human Services Issue Paper as revised. The motion was seconded and approved.

#### D. Profile and Core Characteristics

Ms. Lynne Crammer moved that the Board approve the Profile and Core Characteristics of a CSB Board member. The motion was seconded and approved.

#### 9. Information Items

- A. FY 2011 Fourth Quarter Fiscal Report – Mr. Belcher presented the Fourth Quarter Fiscal Report to the Board.
- B. FY 2011 Fee Client Write Off Report – Ms. Ginny Cooper reported out to the Board on the state of collections and status of uncollected revenues. Ms. Cooper then answered questions from Board members.

#### 10. Executive Director's Report

- A. Mr. Braunstein passed around the letter sent to the Board by Ms. Renee Alberts. Mr. Braunstein also shared with the Board the protests of consumers with the Community Readiness Program in Springfield and the positive outcome that the situation engendered. Mr. Braunstein shared a letter of thanks for services received from the ITC from a mother who brought in an infant four years ago. Mr. Braunstein asked the Board's permission to send a letter on behalf of the Board and received permission to do so. Mr. Braunstein also shared a letter of thanks for administrative assistant Edgar Ayala at the Reston site and received permission to send him a letter of thanks on behalf of the Board.
- B. Child Screening for Medicaid Services Update – Mr. Braunstein noted that the process is going well and this will be removed as a regular update item.
- C. Regional Acute Care Update – Fairfax City has decided that INOVA will need to rezone to create the Regional Crisis Center. INOVA is considering whether or not to look at alternative locations. The region is planning other sites to locate the crisis center as well as engaging the State about how to utilize the empty beds at the Institute.
- D. State Budget Update – Mr. Braunstein shared that this past Monday the state had a hearing regarding the ID and DD Waivers. Mr. Braunstein shared his opinion of the proposals put forth by the state. The ID and DD advocates united in their opinions against the ideas proposed by the state at the hearing. Mr. Braunstein then discussed the VACSB public policy paper with the Board. The alcohol and drug, child services and mental health all came through in a good manner and they align well with the state office's priorities as well. Mr. Braunstein also noted that he believes that the time is close where DMAS will ask for input on handling all the Medicaid under managed care by July of next year. Mr. Braunstein will share the information once it is available. The VACSB has been working for over a year in interviewing managed care companies to see if there is one that they could partner with and to see if there is one where the CSBs could maintain more control. Mr. Braunstein noted that he made need to convene a special Board session if this should occur before the next scheduled meeting. The ID and DD medical care could be covered by managed care, but the waiver part would not be included. Mr. Braunstein then discussed some of the options that are available once this happens.

Actions Taken –

- (a) The Consent Agenda was approved as presented.
- (b) The FY2012 State Performance Contract was approved as presented.
- (c) The Carryover Budget Review was approved as presented.
- (d) The Associate Committee Members were approved as amended.
- (e) The FY2011 Human Services Issue Paper was approved as amended.
- (f) The Profile and Core Characteristics of a CSB Board Member was approved as amended.

There being no further business to come before the Board, the meeting was adjourned at 9:23 p.m.

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Date Approved

Jenna Rosenberger, Clerk to the Board

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Fairfax-Falls Church Community Services Board  
Executive Committee  
July 20, 2011

The Executive Committee of the Fairfax-Falls Church Community Services Board met in regular session on July 20, 2011 at 7:30 p.m. at the Pennino Building, 12000 Government Center Parkway, Conference Rooms 9 and 10, Fairfax, Virginia.

The following Committee members were present: Martha Lloyd, Chair; Susan Beeman; George Braunstein; Lynne Crammer; Mark Gross; Mark Sites; Jane Woods

The following Committee members were absent: Woody Witt

The following CSB staff was present: Carolyn Castro-Donlan and Jenna Rosenberger

1. Meeting Called to Order

The meeting was called to order at 7:40 p.m.

2. Approval of the June 15, 2011 Minutes

➤ Ms. Lynne Crammer moved that the Executive Committee minutes of June 15, 2011 be approved as presented. The motion was seconded and unanimously carried.

3. Adoption of the Agenda

➤ Ms. Crammer moved that the Executive Committee agenda of July 20, 2011 be adopted as presented. The motion was seconded and unanimously carried.

4. Matters of the Executive Committee

A. Substance Use Disorders/Mental Health Workgroup Report – Ms. Susan Beeman reported that due to the volume of information received at the June meeting, the July meeting of the SUDs/MH Workgroup was cancelled. The next meeting will be in September. Staff is utilizing the time to analyze the data received at the June meeting regarding housing. The Committee then discussed when and in what method to publish Ms. Jeannie Cummins Eisenhower's report. It was concluded that the report would be distributed to all Board members the week of August 1<sup>st</sup> and will be presented in detail at the September 14<sup>th</sup> SUDs/MH Workgroup meeting.

B. Intellectual Disability/Developmental Disability Workgroup Report – Mr. Mark Gross reported that at the ID/DD Workgroup meeting Mr. Woody Witt updated the members on the activities of the Autism/DD Workgroup that is a collaboration between CSB Board members and staff.

C. Internal Committee Report – Mr. Gross reported that the Internal Committee did not meet in June or July.

- D. External Committee Report – Major Mark Sites reported that the Committee had a presentation by Pat with Access Hope of Northern Virginia Community College. They are interested in partnering with the CSB. Major Sites noted that the Committee is considering planning a Mental Health First Aide Forum in collaboration with Access Hope in September at the Northern Virginia Community College Annandale Campus. Major Sites also informed the Committee that the planned Mental Health First Aide Forum in South County will be moved to November 5<sup>th</sup>. The Committee then reviewed the Fairfax County Human Services Position Paper in preparation for the upcoming legislative sessions.
- E. Other Matters from Committee Members – Ms. Martha Lloyd noted that the Board will have a retreat in either late September or October. She will announce it at the July Board meeting and solicit dates from the Board members at that time. The focus of the retreat will be on the Board’s accomplishments over the past year and it’s priorities for the coming year. Ms. Lloyd suggested that the retreat occur for 2.5 hours prior to a regularly-scheduled meeting or on another weeknight.

5. Amendments to the Board Agenda

The draft Board meeting agenda was provided for information and review.

6. Preparation for Board Work Session

Mr. Gross told the Committee that the Board Work Session’s goal will be to determine how the meeting between the CSB and Board of Supervisors should be structured. The current idea is to have the Chair make a twenty minute opening statement followed by forty minutes of question and answers by the Board of Supervisors. The Chair will address the CSB’s accomplishments and long-term needs and challenges. Major Sites noted that the group will most likely break into sessions so all Board members have a change to participate.

7. Board Planning Calendar

The Board Planning Calendar was provided for information and review.

Executive Director’s Report

Child Screening Update – Mr. George Braunstein reported that the child screening program was implemented on Monday and the first consumer was seen at 9:00 a.m. The program has been moving forward and Mr. Braunstein has no knowledge of any problems. A member of the staff met with NoVACo, which represents private providers in the area, and answered their questions. Mr. Braunstein informed the Committee that people seeking these assessments go through the CSB’s front door system and that there are several therapists donating their time to meet the program’s requirements.

Regional Acute Care Center Update – Mr. Braunstein updated the Committee on the status of the regional acute care center; it appears uncertain if INOVA will continue to negotiate with the City of Fairfax and they may begin looking for alternate sites. The City has stated that for the facility to be opened it must be rezoned from an area that provides medical care to behavioral care. Mr. Braunstein also noted that the region is searching for funding for an ID/DD acute care site that provides both mobile and intensive respite care.

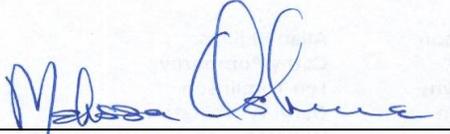
General Assembly Session Planning – Mr. Braunstein reminded the Committee that he has distributed the final positions taken by the VACSB. On Monday, July 25<sup>th</sup> there will be a public hearing in Richmond for the waiver proposals, at which Mr. Braunstein has been invited to make a public comment. The Committee discussed the waiver system and proposals that are likely to be made. On August 2<sup>nd</sup> there will be a hearing at the George Mason University Library in Annandale for the public to discuss what the state should do in regards to transitioning people out of training centers and into the community.

There being no further business to come before the Executive Committee, the meeting was adjourned at 8:40 p.m.

Actions Taken –

(a) The minutes of the June 15, 2011 Executive Committee meeting were approved.

September 21, 2011  
Date Approved



on behalf of  
Jenna Rosenberger, Clerk to the Board

Fairfax-Falls Church Community Services Board  
Executive Committee  
September 6, 2011

The Executive Committee of the Fairfax-Falls Church Community Services Board met in regular session on September 6 at 7:30 p.m. at the Pennino Building, 12000 Government Center Parkway, Conference Rooms 4 and 5, Fairfax, Virginia.

The following Committee members were present: Martha Lloyd, Chair; George Braunstein; Lynne Cramer; Mark Sites; Jane Woods

The following Committee members were absent: Susan Beeman; Mark Gross; Woody Witt

The following Board members were present: Jessica Burmester

The following CSB staff was present: Cathy Pumphrey and Jenna Rosenberger

1. Meeting Called to Order

The meeting was called to order at 6:02 p.m.

2. Adoption of the Agenda

Ms. Lynne Cramer moved that the order of the agenda be rearranged. The motion was seconded and approved. Ms. Jane Woods moved that the agenda be adopted as amended. The motion was seconded and approved.

3. Preparation for Board of Supervisors Meeting

Major Mark Sites and Ms. Cathy Pumphrey summarized the discussion held at the Board Work Session in July and explained the attachments. The Committee discussed the Challenges section of the handout and ways to best present the information. The Committee decided to strengthen the Accomplishments list and rearrange the Challenges list to make it more like the Accomplishments list; they also worked on developing a sense of context for the meeting.

4. Behavioral Health Care Partnership of Virginia Agreement

Mr. Braunstein presented an amended copy of the Behavioral Healthcare Partnership of Virginia Membership Agreement that had been sent to the Board previously. Mr. Braunstein explained the context and timing of pushing this agreement, including that the Secretary intends to have an RFP issued by mid-October for Medicaid funded services. Mr. Braunstein noted that he would like to inform the CSB Board and sign the document, barring any objections from the Executive Committee. This agreement will allow the Partnership to negotiate with the managed care system. Mr. Braunstein took questions from the Committee regarding the agreement.

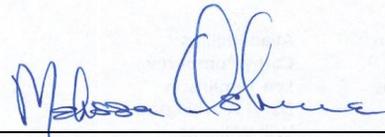
The Committee then returned to discussing the layout of the document for the Board of Supervisors meeting.

There being no further business to come before the Executive Committee, the meeting was adjourned at 7:02 p.m.

Actions Taken –

(a) The Committee agenda was adopted as amended.

September 21, 2012  
Date Approved

 on behalf of  
Jenna Rosenberger, Clerk to the Board

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Virginia Foundation for Healthy Youth Grant ApplicationIssue:

Board approval authorization is requested for the Fairfax-Falls Church Community Services Board (CSB) Wellness and Health Promotion to apply for and, if awarded, accept Virginia Foundation for Healthy Youth funding totaling \$180,000, for three years, at \$60,000 per year. Funds will be used to implement the program *Al's Pals: Kids Making Healthy Choices*, described below, in collaboration with partner preschool organizations.

Recommended Motion:

I move that the Board approve Wellness and Health Promotion's request to apply for and, if awarded, accept three years of Virginia Foundation for Healthy Youth funds of \$180,000.

Timing:

Immediate Board action is requested as the grant submission deadline is October 21, 2011. Grant awards will be announced in early 2012; the grant award period begins July 1, 2012 ending on June 30, 2015.

Background:

The Virginia Foundation for Healthy Youth (VFHY) issued a Request for Proposals (RFP) on August 19, 2011 to fund three-year contracts to provide tobacco use prevention programs for youth. The VFHY (formerly known as Virginia Tobacco Settlement Foundation) was created in 1999 by the General Assembly to distribute monies from the Virginia Tobacco Settlement Fund for the purpose of restricting the use of tobacco products by minors. This RFP provides funds to local organizations and agencies to provide tobacco use prevention programs for youth. Programs must be selected from the VFHY approved compendium. This grant award will run from July 1, 2012 through June 30, 2015. RFP information can be found at <http://healthyouthva.org/funding.asp#3yrgrants>.

The Fairfax-Falls Church CSB will collaborate with home based, private and non-profit, faith-based, and the Fairfax County Public Schools childcare education programs in implementing the program. This project will build organizational capacity to deliver proven prevention programs while strengthening skills in young children receiving the program.

The *Al's Pals* program is an early childhood prevention curriculum and teacher training program for children ages three to eight years old. Using 46 interactive lessons, *Al's Pals* develops children's pro-social skills, self-control, problem-solving abilities and an

understanding that they are not to use tobacco, alcohol, and other drugs. Program outcomes include increased pro-social skills, such as appropriate expression of feelings, demonstration of self-control, interpersonal problem-solving, healthy decision-making, and positive coping.

Grant funds will be used to provide early childhood prevention training for teachers, instructional assistants and administrators; to provide small awards to participating organizations to cover costs of substitute teachers during the two day training period; to purchase the *AI's Pals* curriculum kit for each participating classroom; and for program evaluation. The curriculum consists of 46 lessons of approximately 15 minutes each, to be delivered in sequence twice a week by a trained classroom teacher. Teachers and their instructional assistants are authorized to use the *AI's Pals* curriculum only upon completion of a two-day introductory training session, provided with grant funds. The training addresses ways to apply the concepts of resiliency and protective factors to early childhood education. The funding requested will provide training for 30 teachers and administrators annually, and implement the program in 40 classrooms with 700 children. Grant funds will also be used for part-time temporary grant manager position to provide logistical support, maintain communication with participants, monitor the implementation of the program for in-classroom quality assurance, provide oversight of any required data collection and prepare required reports.

The *AI's Pals* compendium has been designated a Model Program by the Center for Substance Abuse Prevention (CSAP), USDHHS; a Promising Program by the Office of Safe and Drug Free Schools, USDOED; and as an Evidence-Based Social-Emotional Learning Program by the Collaborative for Academic, Social and Emotional Learning (CASEL).

Fiscal Impact:

The Virginia Foundation for Healthy Youth will provide funding of \$180,000 over a three-year period. Funds will be disbursed at a maximum of \$60,000 per year. The Fairfax-Falls Church CSB will receive the grant funds and will enter into a Grant Agreement with participating schools and organizations for conduct of the program.

There is no match required for the grant.

Creation of Positions:

No new positions will be required for this grant. A part time temporary status position manages the current VFHY grant project and, if new funding is awarded, will continue to provide project management for this grant.

Staff:

Carolyn Castro-Donlan, Deputy Director, Fairfax-Falls Church CSB  
Jamie MacDonald, Wellness and Health Promotion, Fairfax-Falls Church CSB

*Authorization for the Community Services Board to Apply for and Accept a Grant of up to \$3,738,964 for Community Housing Funds from the Virginia Department of Behavioral Health and Developmental Services for the purpose of construction/ rehabilitation of two waiver certified homes for up to 12 current residents of the Central Virginia Training Center*

ISSUE:

Authorization for the Community Services Board to Apply for and Accept a Grant of up to \$3,738,964 for Community Housing Funds from the Virginia Department of Behavioral Health and Developmental Services for the purpose of construction/ rehabilitation of two waiver certified homes for 12 current residents of the Central Virginia Training Center

RECOMMENDED MOTION:

I move that the Fairfax-Falls Church Community Services Board authorize the application and acceptance of funds in the amount \$3,738,964 for Community Housing Funds from the Virginia Department of Behavioral Health and Developmental Services. Upon receipt of the approval, staff will request approval from the Board of Supervisors and request an expenditure appropriation and commensurate revenue increase of the award amount.

TIMING:

Immediate. The period to utilize the funds begins August 5, 2011 and runs through February 5, 2013.

BACKGROUND:

Virginia has five state-operated Intermediate Care Facilities for the Mentally Retarded (ICF/MRs) that provide long term care to individuals with intellectual and related disabilities in institutional settings. These facilities vary in size from 181 individuals served at Southeastern Training Center in Chesapeake to 484 individuals served at Central Virginia Training Center (CVTC) in Lynchburg. Currently, there are 124 individuals in training centers whose residence of origin is Fairfax County. While the majority was able to secure services at the Northern Virginia Training Center in Fairfax County, nearly 25% relocated as far away as CVTC in order to obtain the level of care they needed.

The Medicaid program now offers a similar level of care through its Home and Community-Based Waiver program, which provides a variety of services, including residential and vocational support, environmental modifications, respite care, personal emergency response systems, and personal attendant care, among others. Individuals living in ICF/MR settings have the option to transition back to their communities of origin and receive home and community-based services if they choose. However, those who wish to transition from long-term institutions to the community often face numerous

hurdles including: insufficient resources to cover the cost of housing, a dearth of accessible housing in the community, and lack of funding to obtain basic household items and furniture.

The Virginia Department of Behavioral Health and Developmental Services (DBHDS) diverted approximately \$10M in capital funding from training centers to build small community ICF/MRs and Medicaid Waiver Group Homes. The funding comes from a taxable bond issued by the Virginia Public Building Authority. The General Assembly pays the principal and interest on the bond, so it essentially functions like a forgivable loan. Community Services Boards (CSBs) may apply for 100% financing for the capital costs of acquisition and rehabilitation or new construction of Medicaid Waiver group homes. However, the CSB must own the facility for the period of the bond financing (e.g., 20 years) and must use the facility for the purpose of providing community housing for individuals with intellectual disabilities from CVTC.

Fairfax-Falls Church CSB has applied for capital funding to acquire and rehabilitate or newly construct two, fully accessible, energy efficient, six bedroom group homes in Fairfax County. The total development cost is estimated at \$1.8M per home. The CSB will purchase the homes and will then solicit a Request for Proposals for (1) the design and renovation/construction of the homes, and (2) the provision of licensed residential support services within the homes. The selected residential services vendor will be required to sign a triple net lease with the CSB to rent each home, and will bill Medicaid Waiver for the residential supportive services provided to the residents. The monthly rent the CSB charges will cover depreciation on the property asset and a contribution to a replacement reserve for capital items. The individuals who transition from CVTC to the group homes will apply for Medicaid Waivers through Virginia's Money Follows the Person (MFP) Program, which provides Medicaid Waivers and other transition services to individuals who move from long-term care institutions to community-based services. Each group home can serve up to four residents funded through MFP in the first year, and can then expand if desired.

#### FISCAL IMPACT:

If awarded, the \$3,738,964 will directly offset any expense incurred for acquisition and capital and costs for the construction/habilitation of two waiver certified homes. This project is not included in the FY 2012- FY 2016 Capital Improvement Program, but will be reflected in the Advertised FY 2013 – FY 2017 Capital Improvement Program. There is no match requirement for this grant.

#### CREATION OF POSITIONS:

No positions will be established with this award.

#### STAFF:

George Braunstein, Executive Director CSB  
Jeannie Cummings-Eisenhour, CSB Investment and Development Manager  
Bill Belcher, CSB Fiscal Administrator

*Intellectual Disabilities and Developmental Disabilities (ID-DD) Waivers: Request to Co-Sign Letter*

ISSUE:

The Arlington Community Services Board is requesting the Fairfax-Falls Church Community Services Board join as a co-signer to the attached letter to the Department of Behavioral Health and Developmental Services which recommends some restructuring to the ID and DD waiver reimbursement system as well as expansion of services to individuals with autism spectrum disorders.

RECOMMENDED MOTION:

I move that the Fairfax-Falls Church Community Services Board co-sign the letter to the Department of Behavioral Health and Developmental Services.

BACKGROUND:

Further information will be provided at the September 28<sup>th</sup> Fairfax-Falls Church Community Services Board meeting.

BOARD MEMBER:

Woody Witt

STAFF:

George Braunstein, Executive Director CSB  
Alan Wooten, Intellectual Disability Director

Enclosure:

Draft Letter to the Department of Behavioral Health and Developmental Services

September 20, 2011

Department of Behavioral Health and Developmental Services  
Attn: Jim Stewart, Commissioner  
P.O. Box 1797  
Richmond, VA 23218-1797

Dear Commissioner Stewart:

We, the undersigned representatives of Region II Community Services Boards (CSBs), are writing to provide recommendations for changes in the Intellectual Disabilities (ID) and Developmental Disabilities (DD) waivers.

**Issue #1: Community placement of individuals leaving the State training centers and placement of high-need individuals living in the community who need intensive services.**

In order to successfully discharge people from NVTC and CVTC (and serve high-need individuals currently living in the community who would otherwise be referred to the training centers), the State must restructure the ID waiver reimbursement system so that these individuals can be supported in the community. This recommendation is consistent with the following studies and reports: (1) the February 2011 Department of Justice Report; (2) the 2007 "A Study of the Mental Retardation Service System in Virginia" by the Virginia Department of Behavioral Health and Developmental Disability; and (3) the November 2010 Northern Virginia Planning Report. All of these reports recommend changes in the Waiver rate and rate methodology in order to place fewer restrictions on the service providers regarding reimbursements, as well as provide increases in the reimbursement amounts.

**Specific recommendations:**

- Modify the ID Waiver rate structure to allow for additional discrete reimbursement rates to support individuals with intensive behavioral, personal care, and physical needs. We will support the DBHDS/ODS proposal for an exceptional rate differential as long as the higher rate is available to community Waiver slot-holders and is available to group homes regardless of size.
- Modify the ID Waiver structure to allow for reimbursement for general supervision, overnight supports and general health and safety supports to meet the individual needs of recipients and adequately reimburse providers for all services provided.
- Establish and maintain annual cost of living rate adjustments to reflect cost increases and consumer price indices.

In addition to revisions in the waiver rate structure, the following changes would facilitate the expansion of community capacity to serve high-need individuals:

- Broaden the allowable uses of State Capital Funds (i.e. Community Housing Funds) beyond the construction of community-based intermediate care facilities and Waiver-funded group homes for persons discharged from Central Virginia Training Center. Allow current community residents to be admitted to these community ICFs and group homes, thereby preventing future admissions to training centers.
- Shorten the waiting time for initial reimbursements by DMAS to newly-certified and licensed community-based intermediate care facilities. Initial reimbursement delays of three to four months or more discourage providers from establishing additional intermediate care facilities in the community.

Please note that the Region II CSBs oppose the removal of individuals from the training centers against their wishes or those of their families/guardians.

**Issue #2: Merging of the ID and DD waivers and expansion of services to individuals with autism spectrum disorders.**

The Region II CSBs support Virginia's proposal to merge the Intellectual Disability (MR/ID) Waiver with the Individual and Family Developmental Disabilities Support (DD) Waiver, consistent with House Document No. 8 from 2009, "Assessment of Services for Virginians with Autism Spectrum Disorders," in particular: (1) adopt a single definition of developmental disabilities in Virginia (2) establish Community Services Boards as the single point of entry for the developmental disabilities system; and (3) increase funding to Community Services Boards to allow expansion of the current array of services to persons with developmental disabilities. In particular, Region II CSBs support the extension of waiver funding for residential services to all recipients of the new consolidated waiver. While this will increase the State's waiting list, we believe that it is essential that the waiting list reflect an accurate accounting of need for all those who meet the level of functioning eligibility criteria, even if the result is that the numbers are larger.

We also strongly recommend that services under the consolidated waiver be assigned on the basis of urgency of need, rather than length of time on the waiting list.

Thank you in advance for your consideration of these recommendations. Please feel free to contact us with any questions or comments.

Sincerely,

# UPDATING THE CSB ELECTRONIC HEALTH RECORD

FAIRFAX-FALLS CHURCH COMMUNITY SERVICES BOARD  
STATUS REPORT  
SEPTEMBER 19, 2011

1

Cathy Pumphrey, MA LPC DCC, Director of Informatics

## THE CSB

- Serves the community as the public agency responsible for planning, organizing and providing services to persons with a mental illness, intellectual disability or substance use disorder.
- CSB services are provided in centers, residential facilities, group homes and houses as well as the community.
- **Approximately 1200 staff provided services to 20,000 individuals in FY2010.**

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## CSB Technology Strategic Goals- FY2010 to FY2015

### BUSINESS, FINANCIAL AND CLINICAL OPERATIONS ARE SUPPORTED BY THE CSB EHR

- 24/7/365 availability (remote and on-site access) via web interface
- State of the Art Technologies; meets certification/meaningful use
- Health Information Exchange with consumers and providers

### DATA/INFORMATION IS ACCURATE, AVAILABLE AND SECURE

- HIPAA compliant
- Data is succinct and real time
- Ability to retrieve and report information
- Training supports good data practices
- Information accessible in emergencies

### SYSTEM AND TECHNICAL SUPPORTS ARE TIMELY AND ADDRESS NEEDS

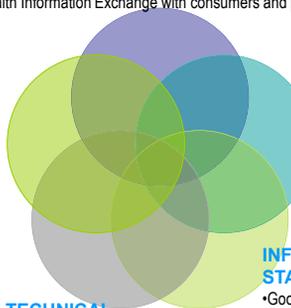
- Staff training and support meet needs
- Vendor/CSB/DIT identification of needs and supports
- CSB/DIT Clearly defined path of communication and action

### HARDWARE SUPPORTS BUSINESS PRACTICE

- Wireless lap tops/PDA's
- Blackberries/Cell Phones w/ GPS
- Mobile technologies
- State of the art best practices

### INFRASTRUCTURE SUPPORTS STAFF NEEDS

- Good Speed and Consistency across sites
- Adequate storage
- Encrypted email/secure communication for staff with staff; consumers/family members with staff



Updated 6/11

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## BACKGROUND

- The CSB implemented its current EHR in 1999
- All behavioral health and intellectual disability services are documented and billed out of the EHR
- This provides continuity of care across all CSB sites and programs, improving the quality, efficiency and effectiveness of services
- There have been changes in both CSB business processes and technology since the 1999 purchase
- Although there have been some software updates, the HITECH Act of 2009 instituted additional requirements that require more extensive functionality.
- The major requirement is related to the "Meaningful Use" of EHRs, with a target date of 2014.
- The Beeman Commission also recognized the need for and recommended updates in its 2008 report to the Board of Supervisors.

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## RFP PROCESS AND REQUIREMENTS

- CSB staff, DIT staff, consumers and the CSB Board, framed the requirements for the EHR RFP that was issued in December 2010.
- Selection Advisory and Technical Advisory Committees reviewed proposals and narrowed the choice of vendors.
- Evaluation of vendor functionality was compared against requirements identified by staff to assist them in doing their job, evidence based clinical and business practices, and best practice technology standards.
- A list of Health Department requirements was attached to the CSB RFP and vendors could respond to this as an RFI item. The different stages of readiness of the CSB and Health Department were recognized.

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## KEY REQUIREMENTS FOR THE NEW CSB EHR

- The software vendor must be "**certified**" in order to facilitate the CSB meeting the Meaningful Use Requirements set out in the HITECH Act of 2009.
  - includes functionality such as ePrescribing, consumer access to information, and the capacity for Health Information Exchange.
- The RFP outlined a number of **interfaces**, through the use of HL7 as well as data extraction.
  - includes immediate electronic verification of Medicaid status, an interface with SAP, and ultimately connection through the Nationwide Health Information Network.
- Supports the **integration of primary care and behavioral healthcare information**.
  - includes both the documentation of information, as well as data exchange with other providers, consumers and their families.

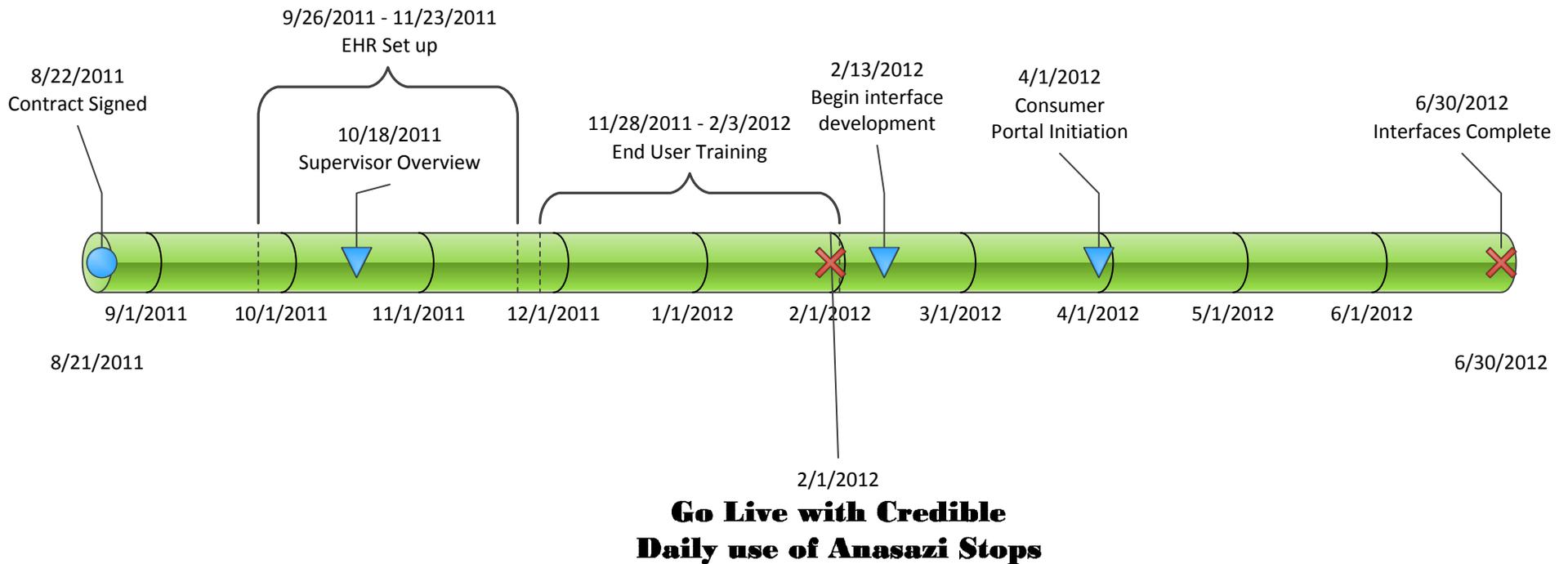
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## KEY RFP REQUIREMENTS (CONTINUED)

- **Easy access and usability** for end users
  - includes a hosted, web interface, as well as the ability to use mobile technologies to address the increasingly community based provision of CSB services
- The ability to meet the **documentation needs** of the wide range of services provided by the CSB
  - includes assessments, short and long term interventions, residential treatment and support services.
- The capacity to **provide outcome and quality improvement data** and depict this for a variety of customers.
  - Includes information on services, productivity, consumer outcomes, and financial forecasting, provided through business intelligence tools.

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# Fairfax-Falls Church CSB Timeline for Transition to Credible EHR



**Note- timeline contains tentative high level milestones**

As of 9/19/11

Fairfax-Falls Church Community Services Board  
 FY2011  
 Fourth Targets as of June 30, 2011

Perspective	Short Term Strategic Objectives	Strategies/Actions/Measure	Actual/Target	Detail of data
<b>CUSTOMERS</b>	1. Ensure that services are available, timely and efficient	a. % of CSB programs that meet standards for timeliness of access to services	50%/75%  3 out of 6  (5/6 would be 83%)	Composite of the following: # meeting standard <u>ADS</u> - 55% adults scheduled within 10 days; <u>56%</u> youth scheduled within 10 days <u>IDS</u> - 100% scheduled within 10 days <u>ITC</u> - 100% receiving assessment within 45 days <u>MH</u> - 98% adults scheduled within 10 days; <u>57%</u> youth within 10 days
		b. % of programs meeting identified capacity		
		b. % of staff meeting productivity standards developed by the program		

Fairfax-Falls Church Community Services Board  
 FY2011  
 Fourth Targets as of June 30, 2011

Perspective	Short Term Strategic Objectives	Strategies/Actions/Measure	Actual/Target	Detail of data
<b>SERVICE QUALITY</b>	2. Ensure that services are effective and meet individual needs	a. Housing- % showing improved living arrangement from admission to discharge	ADS 11% MHS 13%	Baseline for adults discharged in 3 <sup>rd</sup> quarter 2011: <b>ADS</b> - 72% remained in private residence <b>MHS</b> - 81% remained in private residence
		b. Employment/School/Meaningful activity - % un employed at admission employed when discharged	ADS- 20% MHS- 23%	adults discharged in 3 <sup>rd</sup> quarter 2011 Unemployed at admission & employed at discharge
		c. Primary Care/Medical Home- % indicating they have a primary care provider (in the CSB EHR)	61%	99% of field completed
	3. Maintain performance in key risk management indicators	a. Review and track corporate compliance to identify potential areas of vulnerability	100%/100%	Quarterly reports with % compliance in key areas- Program Licensure, Medicaid Regulatory Compliance. 2 licensing visits; 4 HR Complaints resolved
		b. Compliance with Medicaid Required Provider Credentials	92%/ 100%	# of licensed staff needing to update credentials according to Medicaid standards by March 1, 2011
<b>FINANCE</b>	4. Ensure that the CSB is operationally sound	a. Evaluate performance through monthly monitoring of fee revenue versus target	104%/100%	Monthly fee report with % achieved toward target
		b. Noncompliance rate for prior authorization for Medicaid services	16% CM, 5% MHSS/Day Tx /0%	% not submitted at the end of the month- CM; MHSS/Day Tx
<b>EMPLOYEES</b>	5. Maintain a high quality workforce	a. Promotions opportunities filled by CSB employees	10/11	61 positions filled, 11 of them promotions

**Fairfax-Falls Church Community Services Board**  
**FY2011 Balanced Scorecard**  
**Annual Trend Summary**

Improved or maintained good performance

- ✓ Fee revenue meeting or exceeding target in all quarters
- ✓ Documentation of primary care provider in EHR
- ✓ Consistent measure of more than 60% of active consumers with primary care provider; targeted efforts to increase access to and use of primary care services.
- ✓ Risk Management activities, including compliance

Baseline data- average for the year

- % of individuals unemployed at the beginning of services that are employed when leaving services

ADS	38%
MHS	28%
- % of individuals leaving services with an improved living arrangement

ADS	7.5%
MHS	11.1%

Areas for review and update

- Service redesign and new EHR will result in new approach to capturing program capacity and productivity measures
- With Front Door redesign, reworking tracking timeliness of access to services

9/22/11

CSB FY 2013 Budget Reduction Items		DRAFT			9/1/2011				
Service Area	Item	At 1% Only	At 3% Only	At 5% Only	Execution	FY 2012 Budget Est.	Budget Reduction as % of FY 2012 Budget Plan		
							1% cut	3% cut	5% cut
Acute Stabilization Services	revenue Establish crisis stabilization service at Fairfax Detox Center	\$100,000	\$100,000	\$100,000	Establish reimbursable crisis stabilization service capacity for medically monitored individuals at the Fairfax Detox Center.	3,128,744	3%	3%	3%
Central Administration	credit Prioritize Regional Recovery initiatives allocation to cover 1/1.0 SYE in Consumer and Family Affairs	\$50,000	\$50,000	\$50,000	Prioritize existing and ongoing allocation of Regional Recovery funds to cover Consumer and Family Affairs WRAP Training Specialist personnel costs which will reduce dollars for other recovery initiatives.	168,694	30%	30%	30%
Community Residential & Contractual Services	revenue Raise Medicaid Waiver revenue target for directly operated ID group homes	\$75,000	\$75,000	\$75,000	Raise Medicaid Waiver revenue target for directly operated ID group homes by prioritizing consumers with Medicaid coverage for placement.	2,596,003	3%	3%	3%
Outpatient - Adult	exp cut Utilize least costly method for language translations	\$100,000	\$200,000	\$250,000	Establish new protocol identifying telephonic translation services as the approved method of delivery, replacing face-to-face interpreter services. Explore viability of repurposing clinical and/or administrative positions for site-specific interpreters. Total cost of CSB interpreter services in FY 2011 was \$664,207.	664,207	15%	30%	38%
Outpatient - Adult	revenue Restructure Residential Admissions Unit clinicians to deliver intensive outpatient services	\$2,753	\$5,000	\$7,500	Expand reimbursable intensive outpatient service capacity for consumers waiting for residential treatment.	279,719	1%	2%	3%

CSB FY 2013 Budget Reduction Items		DRAFT			9/1/2011				
Service Area	Item	At 1% Only	At 3% Only	At 5% Only	Execution	FY 2012 Budget Est.	Budget Reduction as % of FY 2012 Budget Plan		
Outpatient - Youth	<p>credit</p> <p>Repurpose State MHI funds to cover 2/2.0 SYE on CSA Resource Team (This funding is also known as CSA non-mandated funds allocated to CSBs by State DBHDS)</p>	\$150,000	\$150,000	\$150,000	Repurpose existing State allocation to cover CSB CSA Resource Team personnel costs which will reduce State dollars for individual purchase of service. Currently, 33% of State MHI dollars are used for CSB personnel costs. Leaves \$193,000 of MHI State purchase of service dollars. In combination with local MHI funds budgeted in CSB, there would be \$688,355 available for purchase of service or other non-mandated CSA covered activities.	838,355	18%	18%	18%
Residential Treatment	<p>credit</p> <p>Prioritize HIDTA admissions to Crossroads Adult program</p>	\$100,000	\$100,000	\$100,000	Use HIDTA grant funds to purchase treatment for eligible consumers admitted to Crossroads Adult program.	2,286,514	4%	4%	4%
Supportive Residential	<p>revenue</p> <p>Raise Medicaid Targeted Support Services revenue target</p>	\$75,000	\$75,000	\$75,000	Prioritize consumers with Medicaid coverage for service.	2,105,574	4%	4%	4%
Therapeutic Residential Services	<p>revenue</p> <p>Raise Medicaid Targeted Support Services revenue target</p>	\$100,000	\$100,000	\$100,000	Prioritize consumers with Medicaid coverage for service.	199,630	50%	50%	50%

CSB FY 2013 Budget Reduction Items		DRAFT			9/1/2011				
Service Area	Item	At 1% Only	At 3% Only	At 5% Only	Execution	FY 2012 Budget Est.	Budget Reduction as % of FY 2012 Budget Plan		
Transportation	exp cut Assume brokership of transportation services for IDS consumers resulting in a net savings		\$100,000	\$200,000	Expand transportation options at best available price and increasing flexibility through day support provider network, mileage reimbursement, etc. The figures shown here reflect the difference between the current FASTRAN funded level that would shift to CSB's responsibility to broker services and what could be saved if CSB assumed brokership role for __% of the ridership. The 5% item suggests a larger savings if __% were shifted to CSB's brokership.	1,648,373	0%	6%	12%
Wellness and Health Promotion	exp cut Eliminate 1/1.0 SYE and operating budget previously funded by the Fairfax County Public Schools	\$99,500	\$99,500	\$99,500	In FY 2011, Fairfax County Public Schools terminated funding for Prevention Services and Student Assistance Program. The CSB absorbed the funding within its existing budget but the proposed reduction will eliminate CSB funding too.	3,005,578	3%	3%	3%
Wellness and Health Promotion	exp cut Eliminate counselor positions: - Total of 3/3.0 SYE under 3% - An additional 4/4.0 SYE for a total of 7/7.0 SYE under 5%.		\$210,495	\$491,154	Utilize public and private partners, consumers, and volunteers in the design and delivery of wellness and health promotion activities at 8.5% below current funded levels under 3% item or 11% under 5% item.	3,005,578	0%	7%	16%
Vocational and Day Support Services	exp cut Implement overhaul of both cost and payment structures for vocational and day support services		\$1,501,765	\$2,983,112	Design new cost structure by implementing a service voucher to cap purchase dollars per individual per year. This would include a cap on purchase dollars per individual with Medicaid Waiver which has underwritten the payment structure for several of the private vendors.	13,151,227	0%	11%	23%
<b>TOTALS</b>		<b>\$852,253</b>	<b>\$2,766,760</b>	<b>\$4,681,266</b>					
DMB Issued Targets		852,253	2,766,760	4,681,266					

CSB FY 2013 Budget Reduction Items		DRAFT			9/1/2011		
Service Area	Item	At 1% Only	At 3% Only	At 5% Only	Execution	FY 2012 Budget Est.	Budget Reduction as % of FY 2012 Budget Plan
		-	0	(0)			
	Revenue gains	\$352,753	\$355,000	\$357,500			
	Credit CSB cost center from Grants	\$300,000	\$300,000	\$300,000			
	Expenditure cuts	\$199,500	\$2,111,760	\$4,023,766			
	<b>Totals</b>	<b>\$852,253</b>	<b>\$2,766,760</b>	<b>\$4,681,266</b>			
		-	0	(0)			
	Revenue gains	41%	13%	8%			
	Credit CSB cost center from Grants	35%	11%	6%			
	Expenditure cuts	23%	76%	86%			
	<b>Totals</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>			