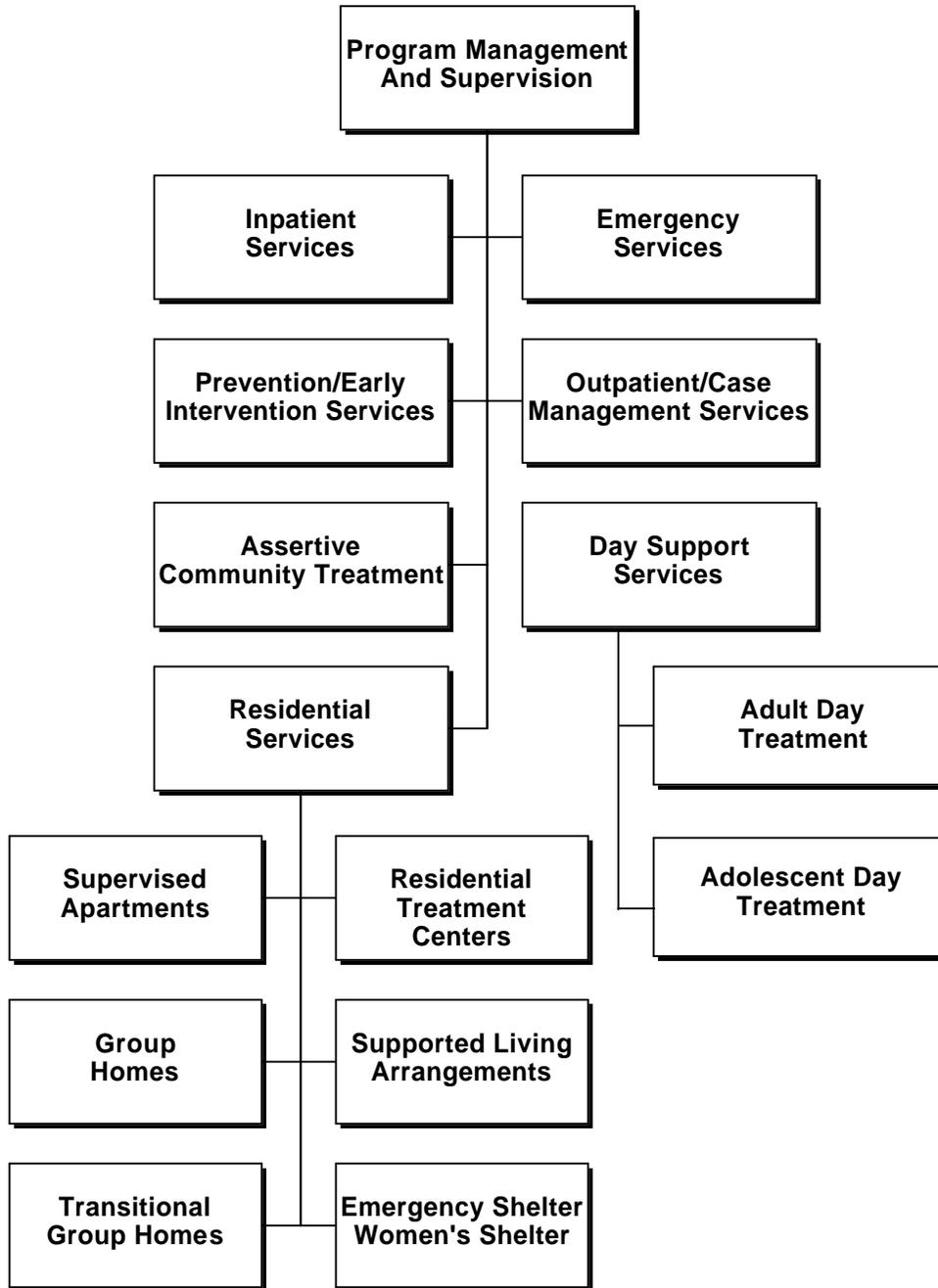


# MENTAL HEALTH SERVICES



# FUND 106-30

## CSB MENTAL HEALTH SERVICES

### *Agency Position Summary*

420	Regular Positions (-1)	/	410.85	Regular Staff Years (-1.0)
<u>32</u>	Grant Positions	/	<u>28.30</u>	Grant Staff Years
452	Total Positions (-1)	/	439.15	Total Staff Years (-1.0)

### **Position Detail Information**

#### MERIT REGULAR POSITIONS:

#### PROGRAM MANAGEMENT AND SUPERVISION

1	Director - Mental Health Programs
1	Director - CSB Planning and Development
1	Senior Supervisory Psychiatrist
6	Mental Health Division Directors
1	Director of Clinical Operations
2	MH/MR/ADS Senior Clinicians, 1 PT
2	Mental Health Managers
2	Mental Health Supervisor/Specialists, 1 PT
2	Management Analysts I
1	Business Analyst II
1	Medical Records Administrator
1	Volunteer Services Coordinator II
1	Administrative Assistant V
5	Administrative Assistants IV
12	Administrative Assistants III
<u>31</u>	Administrative Assistants II
70	Positions
69.0	Staff Years

#### INPATIENT SERVICES

1	MH/MR/ADS Senior Clinician
1	Position
1.0	Staff Year

#### EMERGENCY SERVICES

##### General Emergency

1	Mental Health Manager
2	Emergency/Mobile Crisis Supervisors
10	Mental Health Supervisor/Specialists
<u>5</u>	Psychiatrists
18	Positions
18.0	Staff Years

#### Forensic Services

1	Mental Health Manager
4	MH/MR/ADS Senior Clinicians
2	Mental Health Supervisor/Specialists
3	Clinical Psychologists
<u>2</u>	Psychiatrists
12	Positions
12.0	Staff Years

#### Mobile Crisis Unit

1	Mental Health Manager
2	Emergency/Mobile Crisis Supervisors
<u>4</u>	Mental Health Supervisor/Specialists
7	Positions
7.0	Staff Years

#### Entry Services

1	Mental Health Manager
<u>3</u>	Mental Health Therapists
4	Positions
4.0	Staff Years

#### DAY SUPPORT SERVICES

##### Adult Day Treatment

2	Mental Health Managers
1	Mental Health Supervisor/Specialist
8	MH/MR/ADS Senior Clinicians
1	Mobile Clinic Driver
<u>1</u>	Psychiatrist
13	Positions
12.5	Staff Years

##### Adolescent Day Treatment

1	Mental Health Manager
2	MH/MR/ADS Senior Clinicians
1	Mental Health Supervisor/Specialist
2	Mental Health Therapists
<u>1</u>	MR/MH/ADS Aide
7	Positions
7.0	Staff Years

# FUND 106-30

## CSB MENTAL HEALTH SERVICES

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### RESIDENTIAL SERVICES

#### Supervised Apartments

1	Mental Health Manager
4	Mental Health Supervisor/Specialists
8	Mental Health Therapists
13	Positions
13.0	Staff Years

#### Res. Treatment Center - Leland House Crisis Care

1	Mental Health Manager
1	Mental Health Supervisor/Specialist
8	Mental Health Therapists
3	Mental Health Counselors
1	Cook
14	Positions
14.0	Staff Years

#### Res. Treatment Center - Gregory Rd. Crisis Care

2	Mental Health Supervisor/Specialists
5	Mental Health Therapists
2	Mental Health Counselors
9	Positions
9.0	Staff Years

#### Group Home - Franconia Road

1	Mental Health Supervisor/Specialist
3	Mental Health Therapists
4	Mental Health Counselors
8	Positions
8.0	Staff Years

#### Group Home - My Friend's Place

1	Mental Health Supervisor/Specialist
4	Mental Health Therapists
1	MH/MR/ADS Senior Clinician
3	Mental Health Counselors
9	Positions
9.0	Staff Years

#### Group Home - Sojourn House

1	Mental Health Supervisor/Specialist
5	Mental Health Therapists
1	MH/MR/ADS Senior Clinician
2	Mental Health Counselors
9	Positions
9.0	Staff Years

#### Homeless Services - Shelter

3	Mental Health Supervisor/Specialists
10	Mental Health Therapists
13	Positions
13.0	Staff Years

#### Transitional Group Home - Patrick Street

1	Mental Health Manager
1	Mental Health Supervisor/Specialist
3	Mental Health Therapists
3	Mental Health Counselors
8	Positions
8.0	Staff Years

#### Transitional Group Home - Beacon Hill

4	Mental Health Therapists
3	Mental Health Counselors
7	Positions
7.0	Staff Years

#### Emergency Shelter - Women's Shelter

1	Mental Health Supervisor/Specialist
6	Mental Health Therapists
2	MH/MR/ADS Senior Clinicians
9	Positions
9.0	Staff Years

#### Cornerstones Dual Diagnosis Facility

1	Mental Health Supervisor/Specialist
1	Mental Health Therapist
3	Mental Health Counselors
1	MH/MR/ADS Senior Clinician
6	Positions
6.0	Staff Years

# FUND 106-30

## CSB MENTAL HEALTH SERVICES

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### Residential Intensive Care

1 Mental Health Manager  
 2 Mental Health Supervisor/Specialists  
 1 Mental Health Therapist  
 1 Assistant Residential Counselor  
 5 Positions  
 5.0 Staff Years

### Residential Extensive Dual Diagnosis

1 Mental Health Supervisor/Specialist  
 1 Mental Health Therapist  
 1 Mental Health Counselor  
 3 Positions  
 3.0 Staff Years

### PACT Residential Assistance

1 Mental Health Counselor  
 1 Position  
 1.0 Staff Year

### Community Living Assistance

1 Mental Health Supervisor/Specialist  
 1 Mental Health Therapist  
 1 Assistant Residential Counselor, PT  
 3 Positions  
 2.5 Staff Years

### Supportive Services

1 Mental Health Supervisor/Specialist  
 4 Mental Health Therapists  
 5 Positions  
 5.0 Staff Years

### OUTPATIENT/CASE MANAGEMENT SERVICES

#### Adult and Family Services

4 Mental Health Managers  
 7 Mental Health Supervisor/Specialists  
 19 MH/MR/ADS Senior Clinicians, 2 PT  
 2 Mental Health Therapists  
 1 Nurse Practitioner  
 4 Psychiatrists, 2 PT  
 1 Psychology Intern  
 38 Positions  
 36.1 Staff Years

#### Older Adult Services

1 Mental Health Supervisor/Specialist  
 5 MH/MR/ADS Senior Clinicians  
 3 Mental Health Therapists  
 1 Psychiatrist, PT  
 10 Positions  
 9.5 Staff Years

### Youth and Family Services

5 Mental Health Managers  
 7 Mental Health Supervisor/Specialists  
 16 MH/MR/ADS Senior Clinicians, 1 PT  
 7 Mental Health Therapists  
 2 Psychiatrists, 2 PT  
 7 Clinical Psychologists  
 3 Psychology Interns  
 47 Positions  
 45.75 Staff Years

### Comprehensive Support Services

4 Mental Health Managers  
 9 Mental Health Supervisor/Specialists  
 18 MH/MR/ADS Senior Clinicians, 1 PT  
 13 Mental Health Therapists, 2 PT  
 1 Mental Health Counselor  
 4 Psychiatrists, 1 PT  
 1 Psychology Intern  
 50 Positions  
 48.0 Staff Years

### Special Outpatient Case Management

1 Mental Health Manager  
 2 Mental Health Supervisor/Specialists  
 5 MH/MR/ADS Senior Clinicians  
 2 Mental Health Therapists  
 10 Positions  
 10.0 Staff Years

### Infant/Toddler - LINCS

1 Mental Health Supervisor/Specialist  
 3 MH/MR/ADS Senior Clinicians, 1 PT  
 4 Positions  
 3.5 Staff Years

### PREVENTION/EARLY INTERVENTION SERVICES

#### Prevention

1 Mental Health Supervisor/Specialist (-1)  
 1 Positions (-1)  
 1.0 Staff Years (-1.0)

#### Early Intervention

2 Mental Health Supervisor/Specialists  
 2 MH/MR/ADS Senior Clinicians, 1 PT  
 2 Mental Health Therapists, 1 PT  
 6 Positions  
 5.0 Staff Years

# FUND 106-30

## CSB MENTAL HEALTH SERVICES

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**MERIT GRANT POSITIONS:**

**RESIDENTIAL SERVICES**

**Supervised Apartments**

2 Mental Health Therapists, 2 PT  
 2 Positions  
 1.0 Staff Year

**Franconia Road**

1 Mental Health Manager  
 1 Position  
 1.0 Staff Year

**PATH/McKinney - Homeless Shelters**

2 Mental Health Therapists  
 2 Positions  
 2.0 Staff Years

**Residential Intensive Care**

2 Mental Health Therapists  
 1 Assistant Residential Counselor  
 3 Positions  
 3.0 Staff Years

**Residential Extensive Dual Diagnosis**

2 Mental Health Therapists  
 1 Mental Health Counselor  
 3 Positions  
 3.0 Staff Years

**Extension Apartments**

3 Mental Health Therapists  
 3 Positions  
 3.0 Staff Years

**OUTPATIENT SERVICES**

**Ryan White CARE Act**

1 MH/MR/ADS Senior Clinician  
 1 Position  
 1.0 Staff Year

**PREVENTION/EARLY INTERVENTION**

**Sexual Assault Prevention Grants**

3 Mental Health Therapists, 3 PT  
 1 Human Services Coordinator II, PT  
 1 Volunteer Service Coordinator I, PT  
 5 Positions  
 2.5 Staff Years

**PROG. OF ASSERTIVE COMMUNITY TREATMENT**

1 Mental Health Manager  
 3 Mental Health Supervisor/Specialists  
 3 Mental Health Therapists  
 1 Psychiatrist, PT  
 3 Public Health Nurses III  
 1 Administrative Assistant III  
 12 Positions  
 11.8 Staff Years

PT Denotes Part-Time Positions  
 (-) Denotes Abolished Position

# FUND 106-30

## CSB MENTAL HEALTH SERVICES

### Agency Mission

To provide countywide leadership, ensuring that consumers and/or their families receive quality clinical and community support programs by managing, supervising, planning, evaluating, and allocating resources of the directly operated and contractual mental health programs of the Fairfax-Falls Church Community Services Board (CSB) and collaborating with agencies, consumers, and advocates.

Agency Summary					
Category	FY 2002 Actual	FY 2003 Adopted Budget Plan	FY 2003 Revised Budget Plan	FY 2004 Advertised Budget Plan	FY 2004 Adopted Budget Plan
Authorized Positions/Staff					
Years					
Regular	424/ 415.35	423/ 414.35	421/ 411.85	418/ 408.85	420/ 410.85
Grant	32/ 28.3	32/ 28.3	32/ 28.3	32/ 28.3	32/ 28.3
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Expenditures:					
Personnel Services	\$30,811,053	\$31,345,669	\$32,281,616	\$32,340,777	\$32,335,328
Operating Expenses	5,986,808	4,348,223	7,551,837	4,126,223	4,376,223
Capital Equipment	0	0	0	0	0
<b>Subtotal</b>	<b>\$36,797,861</b>	<b>\$35,693,892</b>	<b>\$39,833,453</b>	<b>\$36,467,000</b>	<b>\$36,711,551</b>
Less:					
Recovered Costs	(\$882,638)	(\$1,056,432)	(\$1,056,432)	(\$744,676)	(\$125,786)
<b>Total Expenditures</b>	<b>\$35,915,223</b>	<b>\$34,637,460</b>	<b>\$38,777,021</b>	<b>\$35,722,324</b>	<b>\$36,585,765</b>
Revenue:					
Fairfax County	\$25,294,031	\$21,470,040	\$22,244,749	\$21,997,652	\$22,686,412
Fairfax City	405,061	405,061	405,061	405,061	405,061
Falls Church City	203,466	203,466	203,466	203,466	203,466
State MHMRSAS	7,038,464	7,224,221	6,737,126	6,271,597	6,446,278
State Other	24,601	19,751	19,735	15,011	15,011
Federal Block Grant	1,364,674	1,359,794	1,359,794	1,461,943	1,461,943
Federal Other	1,329,057	83,755	3,662,822	63,995	63,995
Medicaid Option	1,151,276	1,410,701	1,821,440	1,957,263	1,957,263
Program/Client Fees	1,494,155	1,292,416	1,372,526	1,482,740	1,482,740
CSA Pooled Funds	786,500	1,043,035	810,702	1,043,035	1,043,035
Miscellaneous	132,007	125,220	125,220	125,220	125,220
Fund Balance	(3,308,069)	0	14,380	695,341	695,341
<b>Total Revenue</b>	<b>\$35,915,223</b>	<b>\$34,637,460</b>	<b>\$38,777,021</b>	<b>\$35,722,324</b>	<b>\$36,585,765</b>

## FUND 106-30 CSB MENTAL HEALTH SERVICES

Summary by Cost Center					
Category	FY 2002 Actual	FY 2003 Adopted Budget Plan	FY 2003 Revised Budget Plan	FY 2004 Advertised Budget Plan	FY 2004 Adopted Budget Plan
Program Management and Supervision	\$4,783,209	\$5,592,087	\$5,620,388	\$5,600,435	\$5,411,440
Inpatient Services	49,638	67,041	67,041	70,754	70,754
Emergency Services	3,356,084	3,186,511	3,081,583	3,337,272	4,389,708
Day Support Services	1,560,469	1,732,933	1,591,608	1,691,796	1,691,796
Residential Services	10,460,281	9,842,782	10,110,088	10,318,763	10,318,763
Outpatient/Case Management Services	13,090,027	12,806,010	13,605,087	13,328,644	13,328,644
Prevention/Early Intervention Services	1,726,844	675,138	3,719,319	608,245	608,245
Assertive Community Treatment	888,671	734,958	981,907	766,415	766,415
<b>Total Expenditures</b>	<b>\$35,915,223</b>	<b>\$34,637,460</b>	<b>\$38,777,021</b>	<b>\$35,722,324</b>	<b>\$36,585,765</b>

### ***Board of Supervisors' Adjustments***

***The following funding adjustments reflect all changes to the FY 2004 Advertised Budget Plan, as approved by the Board of Supervisors on April 28, 2003:***

- ◆ A net increase of \$433,546 and 3/3.0 SYE Clinical Psychologist positions and 1/1.0 SYE Mental Health Supervisor/Specialist position in Mental Health Services to restore criminal justice diagnostic and crisis intervention services at the Adult Detention Center. This adjustment results in an increase of \$183,546 in Personnel Services, an increase of \$250,000 in Operating Expenses, and a decrease of \$618,890 in Recovered Costs. As a result, CSB staff will continue to provide non-court-ordered forensic evaluations and timely crisis intervention services to decrease the risk of potentially suicidal and predatory inmates harming themselves, other inmates, and Office of the Sheriff staff. This adjustment reflects the Mental Health component of a \$1.4 million increase and restoration 7/7.0 SYE positions to the CSB under a redesigned program of service delivery at the Adult Detention Center and Pre-Release Center which is supported by \$1,187,013 in funds transferred from the Office of the Sheriff and \$243,711 in restored State funds from the Department of Mental Health, Mental Retardation, and Substance Abuse Services (DMHMRSAS) as a result of General Assembly action. The remaining component of this \$1.4 million increase may be found in Alcohol and Drug Services.
- ◆ A decrease of \$188,995 reflects reduced funding for the Pay for Performance program. Based on the approved 25 percent reduction, the FY 2004 program will result in reductions in the increases employees will receive based on their performance rating, capping employees to a maximum of 5.25 percent. This adjustment leaves in place the Pay for Performance program in preparation for system redesign for FY 2005.

## FUND 106-30 CSB MENTAL HEALTH SERVICES

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***The following funding adjustments reflect all approved changes to the FY 2003 Revised Budget Plan from January 1, 2003 through April 21, 2003. Included are all adjustments made as part of the FY 2003 Third Quarter Review:***

- ◆ A net increase of \$546,128 is included which reflects an increase of \$732,873 due to various internal funding adjustments and alignments between CSB agencies included to reflect updated expenditure needs for the remainder of FY 2003, partially offset by a decrease of \$186,745 in adult day support services due FY 2003 State budget reductions announced in October 2002. The expenditure reduction of \$186,745 is associated with abolishing 1/1.5 SYE positions (1/1.0 SYE Mental Health Therapist and 0/0.5 SYE Psychiatrist) in the Mental Health Partial Hospitalization Program as well as one-time expenditure savings due to managed position vacancies in the Adult Day Support program.
- ◆ An increase of \$1,669,835 is included to appropriate new federal grant awards, new program years of ongoing federal grant awards, and adjustments to current year federal grant awards, including \$80,188 in Federal Title IV-E funds from the Virginia Department of Social Services (VDSS) for case management and other related services for children at risk of out-of-home placement, \$40,682 in federal funds from the Virginia Department of Corrections as part of the Virginia Serious and Violent Offender Reentry (VASAVOR) Initiative, \$71,197 for renewal of the Mental Health Ryan White Title I grant, \$24,030 for renewal of the V-Stop grant, \$24,652 for renewal of the Sexual Assault and Prevention grant, and \$1,429,086 in Federal Emergency Management Agency (FEMA) funding for the Project Resilience Regular Services grant.
- ◆ Transfer of 2/2.0 SYE positions from Mental Health Services to Alcohol and Drug Services to support the Steps to Recovery Program.

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### ***County Executive Proposed FY 2004 Advertised Budget Plan***

#### **Purpose**

Mental Health Services provides County/City-wide leadership in the management, supervision, planning, evaluation, and resource allocation of local, State, Federal, and other resources to ensure that consumers and families of persons with serious mental illness and serious emotional disturbance receive quality clinical and community support services. Mental Health Services has responsibility and authority for managing the seven directly-operated community mental health center sites and oversight of the purchase of services from contractual mental health organizations included in the Fairfax-Falls Church Community Services Board (CSB). The seven mental health service sites and contract agencies ensure countywide access to mental health care.

Services are broken into eight specific categories, or Cost Centers. They include the *Program Management and Supervision* Cost Center, providing management, programming, financial monitoring, training, and general support services. The *Inpatient* Cost Center provides acute care inpatient psychiatric beds at Inova's Mount Vernon Hospital for CSB patients who are medically indigent and provides service coordination and discharge planning. The *Emergency* Cost Center provides 24 hour-per-day comprehensive psychiatric emergency services to individuals in crisis situations. The *Day Support* Cost Center provides an intensive, highly-structured stabilization, evaluation, and treatment setting for adults with serious mental illness and adolescents with serious emotional disturbance, including those who are dually diagnosed. The *Residential* Cost Center provides residential treatment and supported residential services to adults with serious mental illness and youth with serious emotional disturbance. The *Outpatient and Case Management* Cost Center provides an array of treatment services to adults, children, and their families. The *Program for Assertive Community Treatment* (PACT) team offers outreach and treatment services for individuals with serious mental illness. Finally, the *Prevention and Early Intervention* Cost Center provides consultation to community agencies, the public, and other providers.

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## CSB MENTAL HEALTH SERVICES

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### Key Accomplishments

- ◆ Provided a comprehensive program – funded through a Federal Emergency Management Agency (FEMA) grant – to help citizens impacted by the events of September 11<sup>th</sup>. Target groups include families and friends of individuals killed in the terrorist attacks, people from different cultures who are at risk for scapegoating or who come from countries where they have already been traumatized by violence and warfare, vulnerable geriatric populations, and some school children at risk for post traumatic stress disorder. The services of this initiative have largely been delivered in the community – not in the mental health centers – and have been very well received.
- ◆ Began a comprehensive review of the way mental health day support services are delivered, seeking input from consumers, contractors, and other agencies. This process will continue into the Spring of 2003 and will result in a redesign of programs to reflect best clinical practice.
- ◆ Conducted a comprehensive needs analysis and a survey of other mental health systems. Began a major restructuring of Adult Services based upon these findings towards a goal of integrating service delivery across adult outpatient programs, developing managerial expertise as resources in key clinical areas, and increasing responsibility for the quality of clinical services.
- ◆ Established a team of senior staff to assess the cost and utilization of psychotropic medications, resulting in a change to the CSB Fee Policy that will reduce the volume of medications purchased by the CSB and institute a co-payment for persons for whom the CSB purchases medications.
- ◆ Developed and implemented a consolidated hospital discharge planning team.
- ◆ Began staff training on the Assessment and Treatment Planning module of SYNAPS, CSB's client management information system, to prepare staff completing clinical assessments on-line. By the end of 2002, nearly all clinical staff were trained.
- ◆ Implemented a plan to respond to a new law concerning the timely community placement of hospitalized clients who are misdemeanant NGRI's (Not Guilty by Reason of Insanity).
- ◆ Participated in multi-agency programs and task forces focused on developing countywide emergency plans and procedures to respond to natural or man-made disasters.
- ◆ Served as the Crisis Link Liaison, providing on-going clinical consultation to the Northern Virginia Hotline staff and volunteers.
- ◆ Provided the following professional training and staff development activities:
  - educational presentations to CSB staff on psychopharmacology, with Emergency Service psychiatrists serving as presenters;
  - legal training to 80 Mental Health staff on the court process, testifying, and clinician rights and responsibilities. Faculty included a forensic psychologist, the County attorney, and a supervisor from Child Protective Services;
  - training to clinical staff on treating traumatized children and adolescents. The instructor was a national expert from Sheppard Pratt Hospital;
  - two-day training to approximately 50 staff on personality disorders, led by a nationally recognized expert. The training was hosted in conjunction with the Department of Family Services;
  - training to clinical staff on youth and adult anxiety disorders; and

## **FUND 106-30**

# **CSB MENTAL HEALTH SERVICES**

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- two 10-hour training workshops on Dialectical Behavior Therapy which is useful for impulsive clients with self-mutilating or suicidal tendencies or borderline personality disorders for approximately 50 staff, with Mental Health staff providing the training.
- ◆ Implemented a countywide backup transportation system that allows consumers without access to private or public transportation to attend day treatment/partial hospitalization programs.
- ◆ Continued to expand a treatment model in conjunction with Adult Residential Services that coordinates shelter care with day treatment allowing vulnerable consumers to have relatively continuous supervision and treatment.
- ◆ Helped initiate a women's and children's HIV support group in the South County area to assist social services workers in caring for this population.
- ◆ Collaborated with INOVA to help provide HIV treatment and support services in their Juniper Clinic.
- ◆ Established a Spanish Entry and Referral Line that creates a single point of contact for Spanish-speaking clients requesting mental health services. This function is staffed by a bilingual clinical social worker and has been very successful at eliminating a long existing barrier to mental health services for Spanish-speaking consumers.
- ◆ Participated in the County's new inter-agency Hoarding Task Force. The task force targets individuals with severe hoarding behavior and concomitant failure to maintain a safe and healthy home environment who often come to the attention of Mental Health Services through the Fire Marshal, Health Department, Police Department, and Adult Protective Services.
- ◆ Implemented an agreement with Fairfax County Public Schools by which therapists in Youth and Family Services work in non-categorical pre-schools with the children and parents identified by teachers as needing mental health intervention.

### **FY 2004 Initiatives**

- ◆ Consolidate management of mental health and alcohol and drug services provided at the Adult Detention Center and the Pre-Release Center to maximize program efficiencies and achieve cost savings. Mental Health staff will continue to provide court-ordered forensic evaluations, stabilization/management of seriously mentally ill inmates, and crisis intervention services to potentially suicidal and seriously mentally ill inmates. Alcohol and Drug Services staff will continue to work within the Adult Detention Center and the Pre-Release Center to provide court-ordered evaluations and substance abuse treatment services to approximately 375 inmates per year.
- ◆ Design and implement a Crisis Care Facility for children and youth in Fairfax County who do not require psychiatric hospitalization but do require diagnostic assessment and targeted treatment in a short-term secure residential setting.
- ◆ Continue the Youth and Family Services initiative in specialized pre-kindergarten programs with children and parents identified by teachers as needing mental health intervention.
- ◆ Combine the two Crisis Care facilities for Adults into one centrally located, state-of-the-art, handicap accessible facility. The improved, renovated facility, to be known as "Woodburn House," will accommodate more high-risk clients including those with dual diagnoses, mental illness/mental retardation as well as mental illness/substance abuse.
- ◆ Continue negotiations with Prince William County for utilization of Adult Crisis Care Services.

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# CSB MENTAL HEALTH SERVICES

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- ◆ Develop and implement an automated Initial Assessment/Screening tool for Entry and Referral Services to maximize efficiency and to create a seamless transfer of clinical information from entry to the intake therapist.
- ◆ Investigate current and potential revenue sources to enhance non-County revenues.
- ◆ Complete relocation of Mental Health staff to new multi-agency County building in the South County area, which includes program staff from Youth Services, Victim Assistance Network, ADAPT, and Prevention. Immediate access to other agencies such as Alcohol and Drug Services, Health Department, and Department of Family Services provides better staff collaboration and enhances County services.
- ◆ Complete and implement a major redesign of Mental Health Day Support Services.
- ◆ Continue the initiative to responsibly contain the costs of psychotropic medications and to evaluate how medications will be utilized and distributed.
- ◆ Redevelop the Gregory Road site and relocate Residential Extensive Dual Diagnosis program from Lynley Terrace to Gregory Road.
- ◆ Continue to improve the partnership with a private contractor providing additional mental health treatment for children, youth, and families at the five outpatient treatment locations.
- ◆ Develop strategies with the school system to engage mental health treatment services for families requiring those services in addition to special education services. This initiative will be piloted in FY 2003 and expanded in FY 2004.

It should be noted that State budget reductions were announced in October 2002 and State DMHMRSAS funding to CSB was reduced by 10 percent. Mental Health Services anticipates a loss of \$186,745 in State DMHMRSAS revenues in FY 2003 which is completely offset by an expenditure reduction in adult day support services, including the abolishment of 1/1.5 SYE positions (1/1.0 SYE Mental Health Therapist and 0/0.5 SYE Psychiatrist). Mental Health Services anticipates a loss of \$130,665 in State DMHMRSAS revenues in FY 2004 which is completely offset by an expenditure reduction in adult day support services, including the abolishment of 1/1.5 SYE positions noted.

### **FY 2004 Budget Reductions**

As part of the FY 2004 Advertised Budget Plan, in addition to the State reductions noted above, an increase of \$344,829 in program and client fees and reductions totaling \$288,841 and 1/1.0 SYE position are proposed by the County Executive for this agency. This includes:

- ◆ Increase of \$344,829 in program and client fees due to enhanced revenue collection efforts for residential and outpatient services for individuals with mental illness;
- ◆ Reduction of \$216,639 in mental health medical services by reducing the use of exempt limited-term psychiatrists, delaying enhancements to the pharmacy program, decreasing the volume of medications that CSB purchases on behalf of individual clients, and instituting a co-payment for those whose medication CSB directly purchases; and
- ◆ Reduction of 1/1.0 SYE Mental Health Supervisor/Specialist position and associated funding of \$71,842 in the Prevention program, eliminating depression education and suicide prevention programs to 20 alternative school sites and parenting education programs for approximately 140 families.

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# CSB MENTAL HEALTH SERVICES

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As part of the FY 2004 Advertised Budget Plan, a reduction totaling \$369,443, offset by an adjustment in Recovered Costs of \$369,443, and 4/4.0 SYE positions are included. Based on the County Executive's direction to reduce FY 2004 expenditures, the Sheriff consulted with the County Executive and has recommended the following adjustment which impacts the CSB:

- ◆ Reduction of 3/3.0 SYE Clinical Psychologist positions and 1/1.0 SYE Mental Health Supervisor/Specialist position, or 44 percent of existing staffing levels, and associated funding of \$369,443, resulting in a reduction of non-court-ordered forensic evaluations performed for the Office of the Sheriff. Potentially suicidal and predatory inmates will not receive timely crisis intervention services, increasing the risk of self-harm and harm to other inmates and Office of the Sheriff staff. In addition, court-ordered forensic evaluations will be moved from the Adult Detention Center to an offsite CSB facility, requiring Office of the Sheriff staff to shackle, transport, and remain with inmates while comprehensive evaluations are conducted.

### Performance Measurement Results

The Performance Measures that have been developed by the Office of Mental Health Services provide a tool that can be used to assess the effectiveness of the broad range of service programs that are provided to the citizens of Fairfax County who have mental health needs. These indicators are used to evaluate the operations of programs across all cost centers and include Emergency Services, Outpatient Services, Residential Services, Day Support, and Contract Agency Services.

The mission of the Emergency Services unit is to provide immediate and comprehensive psychiatric services to individuals who are in crisis. Emergency Services' goal is to help individuals resolve their crisis and avoid hospitalization unless clinically needed. In FY 2002, Emergency Services staff was very successful in meeting their goal, as 96 percent of individuals served by the Emergency Services professional staff were able to deal with their crises in the community and consequently avoided hospitalization. The expectation is that the number of individuals who are able to avoid hospitalization in FY 2003 and FY 2004 will continue to be high.

A major goal for individuals with serious mental illness is to have their own home and live in the community with the appropriate clinical and residential supports. The goal of the Supportive Living Program is to provide the needed clinical services and supports to make this possible. In FY 2002, 98 percent of all consumers served in this program were able to stay in their own housing arrangement for the entire year continuing into the next fiscal year. Consumers served in this program will continue to receive the needed clinical and other supports from the professional staff.

Provision of quality services is dependent on feedback from the consumers who receive the services. The Adult and Family Program has utilized a State mandated consumer satisfaction instrument, in addition to focus groups, to solicit information from consumers about their experience with the services provided. From the responses received, 88 percent of the consumers who completed the surveys expressed overall satisfaction with the services that they received. Based on feedback received, staff will use the information as part of the CSB's continuous quality improvement efforts. For FY 2003 and FY 2004, the goal is to achieve at least an 85 percent satisfaction rate.

For those programs that are not meeting their performance goals, reviews will be conducted to determine what changes or modifications may be necessary to bring the indicators in line with performance goals for the agency.

# FUND 106-30

## CSB MENTAL HEALTH SERVICES

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### Funding Adjustments

*The following funding adjustments from the FY 2003 Revised Budget Plan are necessary to support the FY 2004 program:*

- ◆ A net increase of \$494,785 in Personnel Services is included which is primarily attributable to an increase of \$1,576,802 associated with salary adjustments necessary to support the County's compensation program and an increase of \$13,149 in new grant funding. This amount is partially offset by a decrease of \$523,216 for a one-time Federal Emergency Management Agency (FEMA) Project Resilience grant included as part of the FY 2003 funding level, a decrease of \$130,665 in adult day support services associated with abolishing 1/1.5 SYE positions (1/1.0 Mental Health Therapist and 0/0.5 SYE Psychiatrist) due to a loss of State DMHMRSAS revenues, and a decrease of \$441,285 associated with abolishing 5/5.0 SYE positions across several Mental Health programs due to County budget reductions.
- ◆ A decrease of \$1,645,275 in Operating Expenses reflects a decrease of \$14,332 in encumbered and unencumbered carryover included in the FY 2003 funding level, a decrease of \$1,410,550 in one-time expenditures associated with the FEMA grant noted above, a decrease of \$216,639 in medical services and drugs and medicine due to County budget reductions, and a decrease of \$3,754 in DVS charges.
- ◆ A net decrease of \$311,756 in Recovered Costs reflects a decrease of \$369,443 due to the elimination of 4/4.0 SYE of 13/13.0 SYE positions charged to the Office of the Sheriff for mental health-related services provided in detention facilities, partially offset by an increase of \$57,687 due to necessary Personnel Services adjustments for the remaining 9/9.0 SYE positions charged to the Office of the Sheriff.

*The following funding adjustments reflect all approved changes in the FY 2003 Revised Budget Plan since passage of the FY 2003 Adopted Budget Plan. Included are all adjustments made as part of the FY 2002 Carryover Review and all other approved changes through December 31, 2002:*

- ◆ As part of the *FY 2002 Carryover Review*, an increase of \$1,923,598 reflects the carryover of unencumbered funds to continue the workload associated with existing grant awards, revisions to existing grant awards, and new grant program year awards. Of this total, \$1,232,241 reflects the automated carryover of unexpended grant balances and \$652,029 reflects adjustments to the FEMA grant noted above.
- ◆ As part of the *FY 2002 Carryover Review*, 1/1.0 SYE position was redirected from Fund 117, Alcohol Action Safety Program, to Mental Health Services to provide clinical support in the Comprehensive Support Services program.

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## Program Management and Supervision

<b>Cost Center Summary</b>					
Category	FY 2002 Actual	FY 2003 Adopted Budget Plan	FY 2003 Revised Budget Plan	FY 2004 Advertised Budget Plan	FY 2004 Adopted Budget Plan
Authorized Positions/Staff Years					
Regular	68/ 67	69/ 68	69/ 68	70/ 69	70/ 69
<b>Total Expenditures</b>	<b>\$4,783,209</b>	<b>\$5,592,087</b>	<b>\$5,620,388</b>	<b>\$5,600,435</b>	<b>\$5,411,440</b>

### Goal

To provide management, programming, financial monitoring, training, and general support services to ensure that treatment interventions are delivered in an efficient and effective manner throughout Mental Health Services.

### Performance Measures

#### Objectives

- ◆ To provide management support services to Mental Health (MH) Services so that 70 percent of service quality and outcome indicators are achieved.

Indicator	Prior Year Actuals			Current Estimate	Future Estimate
	FY 2000 Actual	FY 2001 Actual	FY 2002 Estimate/Actual	FY 2003	FY 2004
<b>Output:</b>					
Percent of mental health performance indicators (service quality and outcome) achieved (1)	60%	62%	80% / 57%	70%	70%

(1) Reflects service quality and outcome indicators achieved across Mental Health directly-operated and contracted programs.

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## Inpatient Services

Cost Center Summary					
Category	FY 2002 Actual	FY 2003 Adopted Budget Plan	FY 2003 Revised Budget Plan	FY 2004 Advertised Budget Plan	FY 2004 Adopted Budget Plan
Authorized Positions/Staff Years					
Regular	1/ 1	1/ 1	1/ 1	1/ 1	1/ 1
<b>Total Expenditures</b>	<b>\$49,638</b>	<b>\$67,041</b>	<b>\$67,041</b>	<b>\$70,754</b>	<b>\$70,754</b>

### Goal

To facilitate admissions, inpatient consultation, treatment and discharge planning activities related to all CSB clients admitted to the Inova Mount Vernon Hospital and who are referred to the full time on-site CSB hospital liaison. This includes all CSB clients admitted and/or readmitted to the two contract beds the CSB purchases from Inova for CSB clients who are medically indigent, as well as all other CSB clients admitted and/or readmitted to the Inova Mount Vernon Hospital.

### Performance Measures

#### Objectives

- ◆ To provide appropriate linkages with Mental Health, Mental Retardation and/or Alcohol and Drug Services to at least 90 percent of clients admitted to the Inova-Mount Vernon Hospital who are referred to the full time on-site CSB hospital liaison.

Indicator	Prior Year Actuals			Current Estimate	Future Estimate
	FY 2000 Actual	FY 2001 Actual	FY 2002 Estimate/Actual	FY 2003	FY 2004
<b>Output:</b>					
Persons served	193	272	300 / 250	250	250
<b>Efficiency:</b>					
Annual cost per client (1)	\$487	\$300	\$213 / \$255	\$268	\$283
<b>Outcome:</b>					
Percent of clients referred to the CSB hospital liaison that are linked with appropriate Mental Health, Mental Retardation and/or Alcohol and Drug Services	NA	94%	90% / 96%	90%	90%

(1) Beginning in FY 2001, indicator reflects net cost to the County.

# FUND 106-30 CSB MENTAL HEALTH SERVICES



## Emergency Services

Cost Center Summary					
Category	FY 2002 Actual	FY 2003 Adopted Budget Plan	FY 2003 Revised Budget Plan	FY 2004 Advertised Budget Plan	FY 2004 Adopted Budget Plan
Authorized Positions/Staff Years					
Regular	41/ 41	41/ 41	41/ 41	37/ 37	41/ 41
<b>Total Expenditures</b>	<b>\$3,356,084</b>	<b>\$3,186,511</b>	<b>\$3,081,583</b>	<b>\$3,337,272</b>	<b>\$4,389,708</b>

### Goal

To provide 24 hours-per-day comprehensive psychiatric emergency services which include performing all pre-admission screenings and mobile crisis unit services in order to assist individuals in a crisis situation.

### Performance Measures

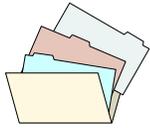
#### Objectives

- ◆ To provide stabilization services outside of the hospital to 90 percent of clients seen in General Emergency Services.

Indicator	Prior Year Actuals			Current Estimate	Future Estimate
	FY 2000 Actual	FY 2001 Actual	FY 2002 Estimate/Actual	FY 2003	FY 2004
<b>Output:</b>					
Cost Center: Emergency - Service hours provided	60,147	62,726	62,726 / 62,384	61,750	61,750
Cost Center: Emergency - Persons seen	6,686	7,096	7,096 / 6,106	6,600	6,600
Activity: General Emergency - Service hours provided	35,237	35,910	35,910 / 33,417	34,850	34,850
Activity: General Emergency - Persons seen	6,207	5,080	5,644 / 5,053	5,300	5,300
<b>Efficiency:</b>					
Activity: General Emergency - Annual cost per client (1)	\$375	\$0	\$0 / \$0	\$0	\$0
<b>Outcome:</b>					
Activity: General Emergency - Percent of clients who receive stabilization services outside of the hospital	96%	97%	90% / 96%	90%	90%

(1) Beginning in FY 2001, indicator reflects net cost to the County. As this program is 100 percent funded by non-County funding sources, the net cost to the County is \$0.

# FUND 106-30 CSB MENTAL HEALTH SERVICES



## Day Support Services

Cost Center Summary					
Category	FY 2002 Actual	FY 2003 Adopted Budget Plan	FY 2003 Revised Budget Plan	FY 2004 Advertised Budget Plan	FY 2004 Adopted Budget Plan
Authorized Positions/Staff Years					
Regular	21/ 21	21/ 21	20/ 19.5	20/ 19.5	20/ 19.5
<b>Total Expenditures</b>	<b>\$1,560,469</b>	<b>\$1,732,933</b>	<b>\$1,591,608</b>	<b>\$1,691,796</b>	<b>\$1,691,796</b>

### Goal

To provide intensive, highly-structured, stabilization, evaluation, and treatment settings for adults with serious mental illness, adolescents with serious emotional disturbance, and dually diagnosed (mental health/substance abuse) clients in order to increase their functional capacity and decrease the need for lengthy hospital stays or institutionalization.

### Performance Measures

#### Objectives

- ◆ To improve individual Global Assessment of Functioning (GAF) scores by at least 10 points for 70 percent of adults served.
- ◆ To improve functional level, as measured by the Child and Adolescent Functional Assessment Scale (CAFAS), by 20 or more points for 50 percent of adolescents served.

Indicator	Prior Year Actuals			Current Estimate	Future Estimate
	FY 2000 Actual	FY 2001 Actual	FY 2002 Estimate/Actual	FY 2003	FY 2004
<b>Output:</b>					
Cost Center: Day Support - Clients served	266	300	283 / 263	210	210
Cost Center: Day Support - Service hours provided	44,306	55,531	49,919 / 59,118	41,440	41,440
Activity: Adult Day Treatment - Clients served	227	232	232 / 196	172	172
Activity: Adult Day Treatment - Service hours provided	33,237	37,236	37,236 / 34,042	27,840	27,840
Activity: Adolescent Day Treatment - Clients served	39	38	38 / 37	38	38
Activity: Adolescent Day Treatment - Service hours provided	11,609	13,411	13,411 / 15,949	13,600	13,600
<b>Efficiency:</b>					
Activity: Adult Day Treatment - Annual cost per client (1)	\$3,988	\$2,703	\$2,942 / \$3,476	\$4,924	\$4,991
Activity: Adolescent Day Treatment - Annual cost per client (1)	\$12,753	\$2,819	\$5,153 / \$2,523	\$6,929	\$6,922

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Indicator	Prior Year Actuals			Current Estimate	Future Estimate
	FY 2000 Actual	FY 2001 Actual	FY 2002 Estimate/Actual	FY 2003	FY 2004
<b>Service Quality:</b>					
Activity: Adolescent Day Treatment - Percent of clients and family members satisfied with services	92%	90%	90% / 70%	90%	90%
<b>Outcome:</b>					
Activity: Adult Day Treatment - Percent of clients demonstrating improvement of 10 points or more in GAF score	67%	72%	80% / 68%	70%	70%
Activity: Adolescent Day Treatment - Percent of clients demonstrating improvement of 20 or more points in level of functioning as measured by CAFAS	31%	67%	65% / 48%	50%	50%

(1) Beginning in FY 2001, indicator reflects net cost to the County.



### Residential Services

Cost Center Summary					
Category	FY 2002 Actual	FY 2003 Adopted Budget Plan	FY 2003 Revised Budget Plan	FY 2004 Advertised Budget Plan	FY 2004 Adopted Budget Plan
Authorized Positions/Staff Years					
Regular	132/ 131.5	130/ 129.5	128/ 127.5	124/ 123.5	122/ 121.5
Grant	14/ 13	14/ 13	14/ 13	14/ 13	14/ 13
<b>Total Expenditures</b>	<b>\$10,460,281</b>	<b>\$9,842,782</b>	<b>\$10,110,088</b>	<b>\$10,318,763</b>	<b>\$10,318,763</b>

### Goal

To provide residential treatment and supported residential services to adults with mental illness and youth with serious emotional disturbance in order to assist these adults and children with residing in the community through treatment, support, and case management.

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## Performance Measures

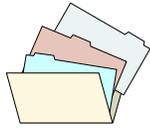
### Objectives

- ◆ To enable 78 percent of clients served to move to a more independent level of residential setting within one year.
- ◆ To enable 85 percent of clients served to maintain stable housing for one year or more.

Indicator	Prior Year Actuals			Current Estimate	Future Estimate
	FY 2000 Actual	FY 2001 Actual	FY 2002 Estimate/Actual	FY 2003	FY 2004
<b>Output:</b>					
Cost Center: Residential - Clients served	1,155	1,795	1,795 / 3,956	3,900	3,900
Activity: Supervised Apartments - Clients served	188	149	169 / 236	230	230
Activity: Supervised Apartments - Service days provided	34,074	31,611	32,843 / 57,590	54,346	54,346
Activity: Supportive Living - Clients served	280	246	246 / 265	260	260
Activity: Supportive Living - Service hours provided	2,163	14,307	14,307 / 16,069	16,000	16,000
<b>Efficiency:</b>					
Activity: Supervised Apartments - Annual cost per client (1)	\$6,912	\$4,741	\$4,600 / \$3,582	\$3,233	\$3,443
Activity: Supportive Living - Annual cost per client (1)	\$2,595	\$1,296	\$731 / \$718	\$692	\$747
<b>Service Quality:</b>					
Activity: Supervised Apartments - Length of wait for admission (months)	3	3	6 / 6	6	6
Activity: Supportive Living - Length of wait for admission (months)	4	4	4 / 12	4	4
<b>Outcome:</b>					
Activity: Supervised Apartments - Percent of clients able to move to a more independent level of residential setting upon discharge	72%	78%	80% / 78%	78%	78%
Activity: Supportive Living - Percent of clients maintaining stable housing for one year or more	78%	80%	75% / 98%	85%	85%

(1) Beginning in FY 2001, indicator reflects net cost to the County.

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## Outpatient and Case Management Services

Cost Center Summary					
Category	FY 2002 Actual	FY 2003 Adopted Budget Plan	FY 2003 Revised Budget Plan	FY 2004 Advertised Budget Plan	FY 2004 Adopted Budget Plan
Authorized Positions/Staff Years					
Regular	153/ 146.85	153/ 146.85	154/ 147.85	159/ 152.85	159/ 152.85
Grant	1/ 1	1/ 1	1/ 1	1/ 1	1/ 1
<b>Total Expenditures</b>	<b>\$13,090,027</b>	<b>\$12,806,010</b>	<b>\$13,605,087</b>	<b>\$13,328,644</b>	<b>\$13,328,644</b>

### Goal

To provide an array of treatment services based upon clinical need in order to improve the functional capacity of adults with serious mental illness and adolescents with serious emotional disturbance. Outpatient Services include short-term focused treatment, such as individual, couples, family, group, and play therapy. Medication management is provided in all programs. Case Management, outreach, family education, and support are also provided.

### Performance Measures

#### Objectives

- ◆ To enable 75 percent of clients served to reach 75 percent of their treatment goals at discharge.

Indicator	Prior Year Actuals			Current Estimate	Future Estimate
	FY 2000 Actual	FY 2001 Actual	FY 2002 Estimate/Actual	FY 2003	FY 2004
<b>Output:</b>					
Cost Center: Outpatient and Case Management - Clients served	8,736	5,282	5,292 / 5,071	5,100	5,100
Cost Center: Outpatient and Case Management - Service hours provided	118,986	179,835	179,835 / 162,091	179,835	179,835
Activity: Adult and Family - Clients served	2,433	2,202	2,202 / 1,929	2,100	2,100
Activity: Adult and Family - Service hours provided (1)	31,879	53,358	53,358 / 31,988	53,358	53,358
<b>Efficiency:</b>					
Activity: Adult and Family - Annual cost per client (2)	\$1,354	\$799	\$823 / \$1,085	\$913	\$990

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Indicator	Prior Year Actuals			Current Estimate	Future Estimate
	FY 2000 Actual	FY 2001 Actual	FY 2002 Estimate/Actual	FY 2003	FY 2004
<b>Service Quality:</b>					
Activity: Adult and Family - Percent of satisfied clients	93%	87%	90% / 88%	85%	85%
<b>Outcome:</b>					
Activity: Adult and Family - Percent of clients who meet 75 percent of treatment goals at discharge (3)	39%	77%	80% / 80%	75%	75%

(1) In FY 2002, service hours provided were relatively low due to difficulties with staff documentation of clinical time. Work continues on ensuring complete documentation of clinical service time and it is expected that all of the data will be captured and entered for FY 2003.

(2) Beginning in FY 2001, indicator reflects net cost to the County.

(3) Beginning in FY 2001, CSB began utilizing a new methodology to calculate whether treatment goals have been met. This results in a higher percentage of clients meeting the discharge goal.



## Prevention/Early Intervention Services

Cost Center Summary					
Category	FY 2002 Actual	FY 2003 Adopted Budget Plan	FY 2003 Revised Budget Plan	FY 2004 Advertised Budget Plan	FY 2004 Adopted Budget Plan
Authorized Positions/Staff Years					
Regular	8/ 7	8/ 7	8/ 7	7/ 6	7/ 6
Grant	5/ 2.5	5/ 2.5	5/ 2.5	5/ 2.5	5/ 2.5
<b>Total Expenditures</b>	<b>\$1,726,844</b>	<b>\$675,138</b>	<b>\$3,719,319</b>	<b>\$608,245</b>	<b>\$608,245</b>

### Goal

To offer prevention and early intervention services for at-risk populations, as well as educate families, community agencies, the public, and other providers about the needs of individuals with mental illness.

### Performance Measures

#### Objectives

- ◆ To enable 70 percent of participants in the Men's Program to successfully complete the program.
- ◆ To enable 98 percent of individuals completing the Men's Program (ADAPT) to avoid being returned to the program by the Courts.

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Indicator	Prior Year Actuals			Current Estimate	Future Estimate
	FY 2000 Actual	FY 2001 Actual	FY 2002 Estimate/Actual	FY 2003	FY 2004
<b>Output:</b>					
Persons served in Men's Program	357	297	297 / 304	300	300
Service hours provided	4,195	3,115	3,115 / 3,130	3,115	3,115
<b>Efficiency:</b>					
Annual cost per client (1)	\$396	\$273	\$296 / \$267	\$216	\$303
<b>Outcome:</b>					
Percent of clients not returned to Men's Program by the Courts	100%	99%	98% / 100%	98%	98%
Percent of Men's Program participants who complete program	73%	74%	74% / 68%	70%	70%

(1) Beginning in FY 2001, indicator reflects net cost to the County.



### Program of Assertive Community Treatment (PACT)

Cost Center Summary					
Category	FY 2002 Actual	FY 2003 Adopted Budget Plan	FY 2003 Revised Budget Plan	FY 2004 Advertised Budget Plan	FY 2004 Adopted Budget Plan
Authorized Positions/Staff Years					
Grant	12/ 11.8	12/ 11.8	12/ 11.8	12/ 11.8	12/ 11.8
<b>Total Expenditures</b>	<b>\$888,671</b>	<b>\$734,958</b>	<b>\$981,907</b>	<b>\$766,415</b>	<b>\$766,415</b>

### Goal

To provide assertive, out of the office, treatment, rehabilitation and support services to adults with severe and persistent mental illness. Persons served by PACT Teams have symptoms and impairments not effectively treated by the usual and customary outpatient services and, who, for reasons related to their mental illness, resist or avoid involvement with office based mental health services. The majority of persons served by PACT are therefore at risk of hospitalization, homelessness, or incarceration. PACT Team staffing standards are a maximum of 10:1 consumer to staff ratios, and the PACT Team is available 24-hours-per-day, 365-days-per-year and works with the consumer, no matter whether the consumer deteriorates or grows. The PACT Team provides psychiatric treatment with supervised medication management, crisis intervention, care management, dual diagnosis (alcohol or other drug) services, vocational support, side-by-side life skills training, and family education to persons with severe and persistent mental illnesses at their homes, work sites, and other environments of need.

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## Performance Measures

### Objectives

- ◆ To improve community tenure by increasing the number of days PACT consumers reside in the community. Specifically, after one year of participation in the PACT program, to enable 85 percent of PACT participants to reside in the community at least 300 days during the following 12 months without incidents of hospitalization, incarceration, or homelessness.

Indicator	Prior Year Actuals			Current Estimate	Future Estimate
	FY 2000 Actual	FY 2001 Actual	FY 2002 Estimate/Actual	FY 2003	FY 2004
<b>Output:</b>					
Clients served	37	89	89 / 85	89	89
Service hours provided	13,261	15,621	15,621 / 15,909	15,621	15,621
<b>Efficiency:</b>					
Annual cost per client (1)	\$18,773	\$0	\$0 / \$449	\$1,665	\$0
<b>Service Quality:</b>					
Percent of clients satisfied with services	90%	90%	90% / 100%	90%	90%
<b>Outcome:</b>					
Percent of clients who reside in the community at least 300 days in the 12 months after one year of participation in the PACT program (2)	NA	NA	90% / 84%	85%	85%

(1) Beginning in FY 2001, indicator reflects net cost to the County.

(2) The first consumers were admitted and enrolled in PACT during FY 2000. This outcome measure takes effect one year after a consumer participates in the PACT program. Therefore, data prior to FY 2002 is not available.