Human Services

PROGRAM DESCRIPTION

The Human Services program consists of mental health, intellectual disabilities, substance abuse programs, child care services and support to individuals and families who are homeless. The Fairfax-Falls Church Community Services Board, the Department of Family Services and the Office for Children, Community and Recreational Services and the Health Department are the major providers of these services.

LINK TO THE COMPREHENSIVE PLAN

Fairfax County's Comprehensive Plan has established a number of objectives and policies in order to:

- ✓ Develop human services centers to serve the eastern and western portions of the County.
- ✓ Provide for the residential needs of persons with mental illness, intellectual disabilities, and substance abuse problems through small and large supervised and supported residential services located Countywide.
- ✓ Develop adequate transitional housing for homeless families, and provide for the before- and after-school child care needs of 15 percent of children attending elementary schools.
- ✓ Locate public health offices to maximize accessibility to the service population.
- ✓ Expand and renovate the Woodburn mental health center.

Source: 2007 Edition of the Fairfax County Comprehensive Plan, Areas I, II, III, & IV, and the Policy Plan Element, Human Services Section, as amended.

CURRENT PROGRAM INITIATIVES

Over the past several years, the County has implemented a regional approach to the human service delivery system. This approach allows for drawing on regionally based staff from multiple agencies to respond to the strengths and needs of specific communities. This approach also has allowed Fairfax County to participate in the national trend to nurture citizen and community engagement more effectively. In addition, co-locating the service providers has enabled regional facilities to promote the one stop shopping idea. It has also fostered collaboration and better flow of information among various service providers. Implementation of the professional development initiatives for the work force has improved the quality of services and has been possible because of the service areas co-location. The Human Services system is unique among the County service systems in that it not only delivers a wide spectrum of services through both private and public agencies, but these services are delivered in a variety of settings which include: private homes, satellite field offices, residential group homes, senior centers, health care facilities and regional co-located service centers.

The County continues to develop a comprehensive Human Services Capital Improvement Plan (CIP) with a vision that addresses efficient delivery of human services to meet individual and community needs and supports the sensitivity to the trends most likely to influence and impact County government programs and services. These facilities are viewed as community focal points, instead of institutional government

buildings. The goals of the Human Services CIP promote co-location of provided services and revitalization of communities including:

- Allowing future growth of the service areas that meet the community's existing requirements and emerging needs identified through the socio-economic indicators as well as demographic parameters and trends;

- Providing efficient service delivery by co-locating pertinent service providers in a readily accessible and user-friendly environment. Service delivery centers need to strategically and comprehensively integrate the human element and work environment to achieve optimization in service delivery;

- Exercising principles of sound financial management and balancing the planned service delivery centers with the fiscal capacity of the County. The current commercially leased human services facilities may more effectively be replaced with County owned centers in order to stop incurring excessive expenses for delivery of services; and

- Promoting economic vitality and supporting high quality of life. The focus of future development is shifting from accommodating new growth to that of redevelopment and providing more lifestyle choices for an increasingly diverse population.

Fairfax County will experience a steady increase in the number and percentage of persons age 65 and older due to longer life spans and the number of persons currently between 60 and 65 who are expected to remain County residents. This increase in the aging population will increase the demand for programs that provide support and respite for caregivers and care for those without family caregivers. It will also increase the need for adult day health care, community health care network and senior assisted living, as well as initiatives such as Program of All-Inclusive Care for the Elderly (PACE). Several CIP projects are currently in place to respond to the already occurring trends in the County.

Fairfax-Falls Church Community Services Board

The Fairfax-Falls Church Community Services Board (CSB) is the point of entry for residents of Fairfax County and the cities of Fairfax and Falls Church into the publicly-funded system of services for people with mental illness, substance use disorders, and intellectual and developmental disabilities. The CSB's mission is to support people to live self-determined and productive lives within the community. Individuals may access CSB services through its Engagement, Assessment & Referral system, which includes a Call Center and Homeless Outreach. Others enter the system through the CSB's Jail- and Court-Based Services or Acute Care Services such as the Mobile Crisis Unit, Detoxification Center or Crisis Stabilization program. CSB outpatient treatment services are available to those who need additional support such as school or office-based counseling and service coordination. Individuals with more intensive, short-term treatment needs may receive Day Treatment, Partial Hospitalization, Intensive Community Treatment, Therapeutic Residential Services or Residential Treatment. The CSB provides Intensive Service/Support Coordination, Supportive Residential Services and Community Residential Services with 24 hour support to individuals who need longer term support to develop independent living skills and assistance to live in the community. Some services, such as group homes, respite care and day support are provided through contractual arrangements. The CSB also offers Wellness and Health Promotion programs in the community, including alcohol and drug abuse prevention education for youth, Mental Health First Aid training, and Wellness Recovery Action Planning, a peer-led self-management intervention for adults who are working through mental health challenges and life issues.

The New Horizons Treatment Center, located on Gregory Drive in Alexandria, opened in July 2010.

The local system of community-based services for people with mental illness, intellectual disabilities and alcohol or drug dependency is operating in an increasingly challenging environment: growing numbers of people lack health insurance; fewer private hospitals can finance inpatient treatment; long-term care options are out of reach for most families; and resources for community services are declining. At the same time, the need for services is steadily growing. This region has witnessed an influx of veterans coping with brain injuries, post-traumatic stress disorder, and other conditions who require numerous mental health services. New State mandates call for CSBs across Virginia to begin serving people with autism spectrum disorders and developmental disabilities in several years. The Department of Justice settlement agreement with the Commonwealth of Virginia in January 2012 mandated that the Commonwealth develop a plan to increase independent living options for individuals with intellectual and developmental disabilities who are currently (1) residing in a state training center, an intermediate care facility or a skilled nursing facility or (2) on the waiting list for a Medicaid Intellectual Disabilities or Developmental Disabilities Home & Community Based Waiver. Local CSBs will be integral to the development and execution of this plan. The CSB has also documented the critical need for community-based treatment and residential services for persons with mental illness and substance abuse problems who are aging or have co-occurring and intensive mental health and medical needs. Nearly one in twenty adults receiving ongoing CSB services is over the age of 60. The baby boom cohort is experiencing the onset of physical health issues associated with aging, yet they are expected to live longer than any previous generation. The population of persons age 65 and older is projected to increase 274 percent between 2010 and 2030. Therefore, the population of aging adults with mental illness, intellectual disabilities and substance abuse disorders is likely to similarly grow over the next 20 years. The combined medical, mental health and physical care concerns of this population will require our system to develop significant capacity for their specialized housing needs. Over 1,800 individuals are currently on CSB waiting lists for affordable housing, congregate residential services such as group homes, assisted living, and/or residential treatment facilities. The loss of market rate affordable housing, funding shortages and a lack of physically accessible housing have hindered the development of these services. Finally, in recent years, the number of individuals reporting abuse of prescription drugs (opiates, in particular) seems to be rising. In addition, the number of young (18 – 30 year old) opiate dependent people appears to be increasing. The CSB's medical and social detoxification center reports it turns away approximately 500 people a year due to lack of space.

Demographic trends indicate, if increased demands for services are unmet, many residents will be at greater risk for life threatening health problems caused by aging, substance abuse, chronic mental illness and homelessness. The lack of appropriate treatment facilities and supportive housing options often interferes with discharge planning, disrupts the recovery process, and puts individuals at risk of homelessness, incarceration, hospitalization or institutionalization.

The CSB has actively participated in the CIP process since 1985 and has received funding for the construction of several projects, most recently the renovation and expansion of the Gartlan Mental Health Center (formerly the Mount Vernon Mental Health Center) and the renovation and expansion of the Gregory Drive facility to accommodate the relocation of a therapeutic mental health and substance abuse program. CSB staff has participated in the design of the new CSB treatment facilities at the Mid-County Human Services Building, which will soon be ready for construction. In addition, the CSB was awarded funding from the Virginia Department of Behavioral Health and Developmental Services in August 2011 to acquire and renovate or construct two, fully accessible, six-bedroom group homes. These homes will serve adults with intellectual disabilities whose residence of origin is Fairfax County, but who currently receive therapeutic and supportive services from Central Virginia Training Center in Lynchburg, Virginia. The combination of affordable, fully accessible housing and Medicaid-funded home and community based services will enable these individuals to once again live in the area they call home, near family and friends.

Although resource constraints have limited the CSB's ability to grow in some areas and to address certain critical needs, the numerous changes occurring within and outside the service system are impelling the CSB to re-think its service models and explore whether different types of facilities can support these models. As the CSB continues to re-shape its service delivery system over the next year, it will simultaneously begin to reconfigure its capital needs program. Proposed projects will reflect: (1) treatment and service paradigms that promote recovery and self-determination, (2) additional populations the CSB will serve (e.g., people with autism, "Wounded Warriors"), (3) key activities such as the goals and objectives of the County's Ten Year Plan to End Homelessness, the Blueprint for Housing, the Beeman Commission, and federal Money Follows the Person demonstration projects, (4) opportunities to craft different business models that include shared facility use/co-locating programs, public-private

ventures, and effective use of county resources (e.g., affordable dwelling units), (5) new state and federal health care reform requirements, (6) the Department of Justice settlement agreement, and (7) the restructuring of management and systems at the CSB, Human Services and County levels. The intent of this planning process is to identify critically needed facilities that will provide the most person-centered, efficient, effective and collaborative CSB services.

Department of Family Services

The Office for Children (OFC) in the Department of Family Services (DFS) provides direct and support services to meet the child care needs of families in Fairfax County. These services advance the care, education and healthy development of children from birth through intermediate-school age. Through subsidized child development and family enhancement programs, low-income families are assisted in becoming self-sufficient and in breaking the cycle of poverty. The support services provided by OFC programs include coordinating all County-sponsored child care services for efficient delivery to residents, monitoring the child care provided in small home-based child care businesses in Fairfax County, tracking and responding to Federal and State child care legislation and subsidizing child care fees of low and moderate income families using child care centers and family day care homes. The agency actively works to increase the supply of child care services and programs in the County by recruiting qualified providers for home-based care and by developing and funding new community-based child care centers. In addition, OFC works cooperatively with the business community to develop employer-sponsored child care benefit programs. The County also provides training and technical assistance to providers of child care in order to help them maintain and upgrade the quality of care for children. Parents are assisted in locating child care through the Child Care Resource System (CCRS) and when selecting a family day care home are assured of a safe child-care environment when such a setting has been issued a permit by the County.

Direct services provided by OFC programs include operating the School-Age Child Care (SACC) program in County elementary schools, and operating the Fairfax County Employees' Child Care Center for the children of County employees. The agency also administers the Head Start program (3-5 year-old children) for low-income families and operates and administers the Early Head Start program for low-income pregnant women and families with children from birth through two years of age.

Office to Prevent and End Homelessness

The Office to Prevent and End Homelessness administers the County's homeless shelter system in partnership with non-profit service providers. Services to the homeless include homeless prevention and rapid-rehousing services, medical/health care in the homeless shelters, drop-in centers for the unsheltered homeless, and hypothermia centers developed in partnership with the community. Currently, there are five homeless shelters in the County, two serving homeless individuals, two serving families only and one serving both families and single adults. The County shelters are full to capacity every night of the week throughout the year. Homeless shelters can no longer meet "crisis/emergency" needs of homeless families in the community. At any given time, there is an average of 80 families waiting 8-12 weeks for placement in the family shelters. While some homeless families are able to live with relatives or friends until space at the family shelters become available, other homeless families have no other alternatives and end up living on the street or in other places not suitable for human habitation such as abandoned buildings, automobiles or in the woods. While motels are a last resort, it is not an ideal environment for families, especially for the children in these families. Permanent housing opportunities are needed and partnerships to develop/obtain such housing will be strongly supported.

In light of the continuing demand for homeless services, Fairfax County is looking to make significant changes in the way services are delivered. Members of the community have responded to the County call for ending homelessness. Community representatives have joined with non-profit organizations, faith communities, businesses and County staff to develop new strategies for preventing and ending homelessness. One strategy to be examined is how all of the shelters could be used differently. In some areas, homeless shelters have been converted to permanent housing and/or assessment and triage centers. These centers are used to assist homeless and potentially homeless persons and to rapidly provide access to the most appropriate available housing and supportive services options. The Katherine K. Hanley Family Shelter opened in August 2007; however, the four remaining shelters are all more than 20 years old and do not meet modern standards for accessibility or enhanced service delivery. The wear and tear of the shelters which are full every night of the year is significant. Planning for major renovations to these shelters is required in the near future.

CURRENT PROJECT DESCRIPTIONS

1. **School Age Child Care Centers** (Countywide): This is continuing project for which a contribution of $750,000 per year is funded to offset school operating and overhead costs associated with SACC centers.

2. **Willow Oaks (Woodburn) Mental Health Center** (Providence District**):** $101,000,000 for the design and construction of a 200,000 square foot replacement facility for the current Woodburn Mental Health Center and a consolidation of Community Service Board programs currently located in lease space. The County has entered into a two phase Contract of Sale with Inova Health Systems for the transfer of approximately 15 acres of land including the Woodburn Mental Health Center and Woodburn Place in exchange for an approximate 5 acre parcel/pad site at Willow Oaks II, a $15 million cash payment, and a ten year lease of 40,000 square feet within the new Mid County Center building. The first phase of the Contract of Sale was approved in early 2011. The second phase is expected to be approved in March 2012. Funding of $7,780,000 in General Obligation bond funding is available approved as part of the fall 2004 Human Services/Juvenile Facilities Bond Referendum. Approximately one half of the $15 million from INOVA had been received to date and the remaining funding is anticipated to be supported by savings from lease consolidation, and economic development bonds. Construction bids are expected to be received by March 2012.

3. **North County Human Services Center Feasibility Study** (Hunter Mill District): Funding of $150,000 was originally earmarked for a feasibility study to examine the possibility of expanding the North County Human Services Center. Funding of $125,000 has been re-directed to the East County Human Services project below based on a potential Public Private Partnership which may accelerate the East County project.

4. **East County Human Services Center** (TBD): $125,000 was redirected from the North County Human Services project listed above to begin space programming and environmental assessment work on a new East County Human Service Center. This project supports a co-located Human Services service delivery site and is being evaluated as a Public Private Partnership project. This facility will provide enhanced service delivery to the residents of the Eastern part of the County. The goal for this facility will be to address the residents' needs in an effective and efficient manner by co-locating agencies in this center.

5. **County Cemetery** (TBD): $498,000 for acquisition and site improvements to support a County Indigent Cemetery. Virginia Code mandates that the County shall bear the expenses for unclaimed bodies, and the County cemetery on Jermantown Road has reached capacity. The County is currently contracting with private cemeteries for this service. The Board of Supervisors approved the purchase of a cemetery and staff is proceeding with the acquisition to provide a long term solution for this need.

6. **CSB Group Homes** (TBD): $3,738,964 for the acquisition and rehabilitation or construction of two Medicaid Waiver certified group homes. Funding has been allocated to Fairfax County from the Virginia Department of Behavioral Health and Developmental Services (DBHDS) to acquire and rehabilitate or newly construct two, fully accessible, energy efficient, six-bedroom group homes is estimated at $1.8 million per home. The Fairfax-Falls Church CSB will receive 100 percent financing for the capital costs of acquisition and rehabilitation or new construction of two Medicaid Waiver group homes. The CSB must own these facilities for the period of the bond financing (e.g., 20 years) and must use the facilities for the purpose of providing community housing for individuals with intellectual disabilities. The CSB will then solicit a Request for Proposals for the provision of licensed residential support services within the homes. The selected residential services vendor lease each home from the CSB, and 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 future capital renewal items. The individuals who transition to the group homes would 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 by the Fairfax-Falls Church Community Services Board.

PROJECT COST SUMMARIES
HUMAN SERVICES
($000's)

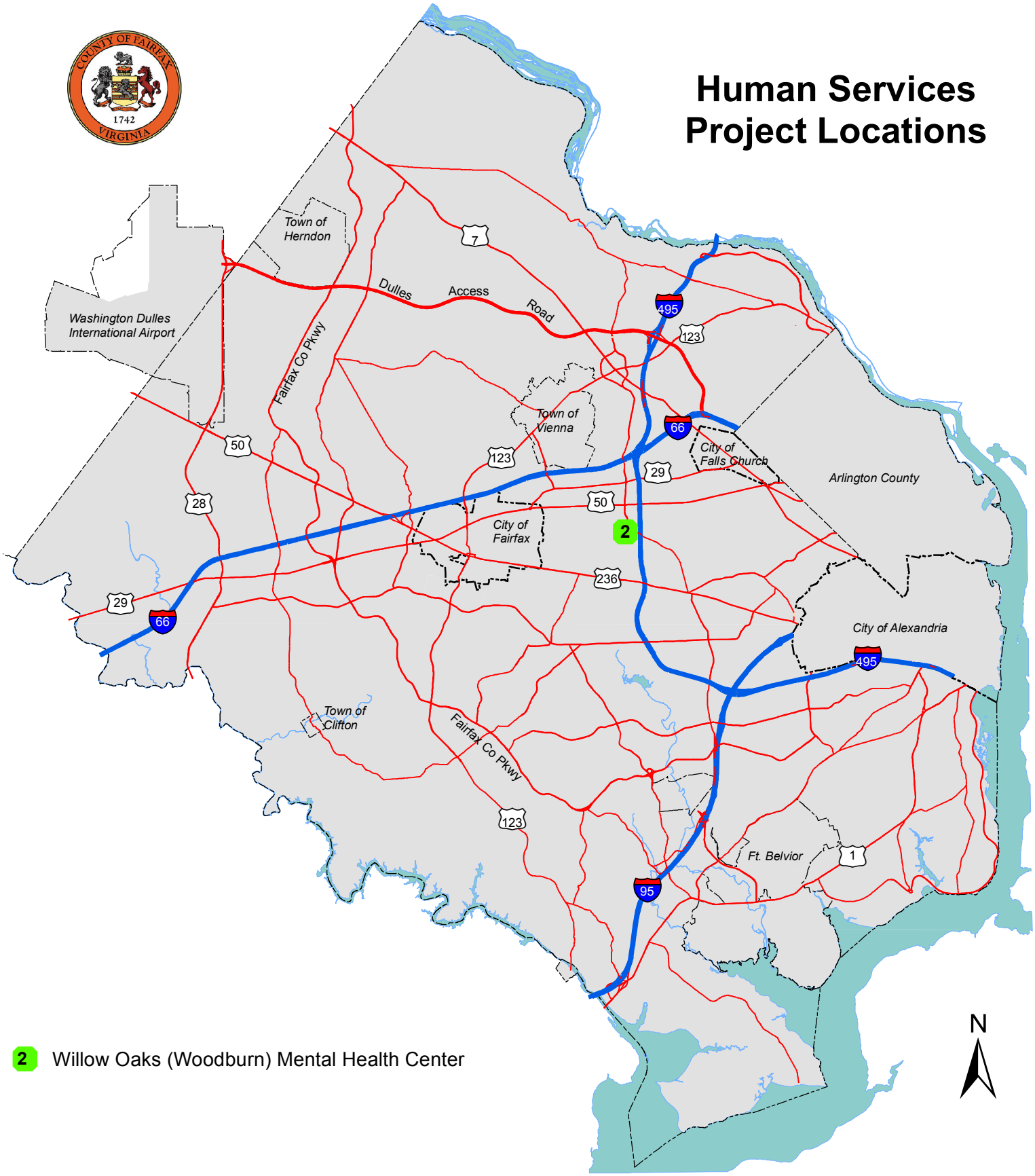
	Project Title/ Project Number	Source of Funds	Budgeted or Expended Through FY 2012	FY 2013	FY 2014	FY 2015	FY 2016	FY 2017	Total FY 2013-FY 2017	Total FY 2018-FY 2022	Total Project Estimate
1	School Age Child Care Centers / 007012	G	***C***	***750***	750	750	750	750	3,750	3,750	7,500
2	Willow Oaks (Woodburn) Mental Health Center / 04A003	B, X	***15,079***	***42,000***	***34,000***	***9,921***			85,921		101,000
3	North County Human Services Center Feasibility Study / 009505	G	***25***						0		25
4	East County Human Services Center/009701	G, U	***125***						0		125
5	County Cemetery	B	***298***	***200***					200		498
6	CSB Group Homes	S	***1,927***	***1,812***					1,812		3,739
	TOTAL		***$17,454***	$44,762	$34,750	$10,671	$750	$750	$91,683	$3,750	$112,887

Notes: Numbers in ***bold italics*** represent funded amounts. A "C" in the 'Budgeted or Expended' column denotes a continuing project.

Key: Stage of Development	
	Feasibility Study or Design
	Land Acquisition
	Construction

Key: Source of Funds	
B	Bonds
G	General Fund
S	State
F	Federal
X	Other
U	Undetermined

Human Services Project Locations



2 Willow Oaks (Woodburn) Mental Health Center

Note: Map numbers correspond to project descriptions in the text and cost summary tables. Only CIP projects with selected, fixed sites are shown on the map.