Human Services

PROGRAM DESCRIPTION

The Human Services program includes services for individuals with mental illness, intellectual disability, and substance use disorders; 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, the Department of Neighborhood Community 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 disability, and substance use disorders, 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.

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 needs of specific communities. This approach also has allowed Fairfax County to participate in the national trend to engage and serve the community more effectively. In addition, co-locating service providers in regional facilities has enabled the County to promote the one-stop shopping idea. It has also fostered collaboration and better flow of information among various service providers. Co-location of services has facilitated implementation of professional development initiatives for the work force that have helped improve the quality of services. 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 also in that these services are delivered in a variety of settings including: 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 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 services and revitalization of communities by:

- 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 appropriate service providers in a readily accessible and user-friendly environment and by strengthening communication and collaboration amongst Human Service agencies to achieve common goals. Service delivery centers need to strategically and comprehensively integrate the human element and work environment to optimize 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 to reduce costs associated with service delivery; and

- Promoting economic vitality and supporting 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 publicly-funded agency that plans, organizes and provides a system of services for residents of Fairfax County and the cities of Fairfax and Falls Church who have mental illness, substance use disorders, and/or intellectual disabilities. The CSB also provides early intervention services for infants and toddlers who have, or are at risk of having, developmental delays. These services, as well as community outreach, education and prevention efforts, benefit the entire community.

CSB staff and contracted service providers include psychiatrists, psychologists, nurses, counselors, therapists, case managers, peer specialists, and administrative and support staff, as well as over 2,000 dedicated volunteers and interns. The CSB partners with community organizations, schools, other Fairfax County agencies and many other groups to provide a safety net of vital services for the community's most vulnerable residents. The CSB is mandated by state law, and operates as part of Fairfax County government's human services system. It is one of 40 such entities in the Commonwealth of Virginia, which has 39 Community Services Boards and one Behavioral Health Authority (BHA).

The CSB has refined its system-wide service structure in recent years to facilitate the provision of integrated treatment for individuals with complex needs and provide greater opportunities for sharing staff expertise, information and resources throughout the organization. Nationally, the average lifespan of people with serious mental illness is 25 years shorter than that of the general population, due to preventable, treatable diseases such as hypertension and diabetes. A key priority for the CSB is to improve overall health outcomes and access to primary health care services for the individuals it serves, many of whom have poor or no access to such services.

The CSB is operating in an increasingly challenging environment. Current economic projections indicate limited growth in the region and the potential for significant, negative impact at the national, state and local levels. Resources for community services are declining, while the need for services steadily grows. This region has witnessed an influx of veterans with conditions such as brain injuries and post-traumatic

stress disorder who require mental health and substance use services. Over the next several years, CSBs across Virginia will begin serving people with autism spectrum disorders and developmental disabilities in response to new State mandates. Increased CSB employment and day services, case management, and support coordination are needed to meet the needs of individuals transitioning from state training centers and others on wait lists, as a result of the 2012 settlement agreement between the United States Department of Justice (DOJ) and the Commonwealth of Virginia reaffirming the rights of Virginians with intellectual and developmental disabilities to receive community based services.

The CSB has also documented a critical need for community-based treatment and residential services for persons with mental illness, substance use or co-occurring disorders who are aging or have intensive 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 in Fairfax County is projected to increase 70 percent between 2012 and 2030. Likewise, the population of aging adults with mental illness, substance use disorders and intellectual disabilities is projected to grow at a similar rate over the next 18 years.

The combined mental health, medical and physical care concerns of this population will require our system to develop significant capacity for their specialized treatment and housing needs. Over 1,700 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, lack of rental subsidies, insufficient auxiliary grant rates for assisted living care and a dearth of physically accessible housing have hindered the development of these housing and service options.

Finally, according to the 2013 National Survey on Drug Use and Health, the number of individuals reporting abuse of or dependence on pain relievers and heroin has risen dramatically since 2002. The CSB's medical and social detoxification center usage reflects this trend: an increasing percentage of individuals on monthly wait lists require medical detoxification.

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, chronic mental illness, substance use disorder, 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. For example, Woodburn Crisis Care is housed in an single family home that runs on a septic system, has numerous barriers for those with mobility and sensory limitations, and has a layout that requires extra staffing to ensure 24/7 monitoring and supervision. This facility does not have the capacity to serve the complex needs of 16 individuals with co-occurring serious mental illness and substance use disorders who are at risk of harming themselves or others, especially individuals with physical and sensory disabilities or uncontrolled medical conditions. Woodburn Crisis Care is the County's only crisis stabilization facility.

Numerous changes within and outside the service system are impelling the CSB to re-think its service models and explore different types of facilities to support these revised models. The CSB is transforming its service delivery system to respond to initiatives such as the Beeman Commission, the Housing Blueprint, the County's Ten Year Plan to End Homelessness and the Department of Justice's Settlement Agreement with the Commonwealth of Virginia and state/federal health care reform. The CSB strives to accomplish its goals even as shrinking resources challenge its capacity to deliver needed services. To develop and operate cost-effective facilities that support delivery of critically needed services in a person-centered manner, the CSB is reconfiguring its capital needs program and focusing on opportunities to develop different business models that include shared facility use or co-locating programs such as outpatient and/or residential treatment with primary care clinics or supportive housing, public-private ventures, and targeted use of county resources. In addition, the CSB has begun to identify opportunities for adaptive re-use or expansion of the County-owned buildings it occupies, rather than developing new sites. The CSB currently has several feasibility studies underway, including a review of the cost to

renovate two residential treatment facilities, Crossroads and A New Beginning, so they are better equipped to serve individuals with primary substance use disorders who also experience mental illness. Another study is examining the cost to reconfigure and expand Cornerstones, a residential treatment facility serving individuals with serious mental illness and substance use disorders who typically have acute psychiatric symptoms and medical issues. Shared dormitory style rooms would be converted to single rooms, and the facility would be expanded to include on-site supportive housing for individuals moving from the treatment to the re-entry phase of the program. The Fairfax Detoxification Services site is being studied to determine the cost to reconfigure the facility to accommodate a crisis stabilization service delivery model. A new feasibility study will identify sites, conceptual designs, cost estimates and financing options for up to four intermediate care facilities serving individuals who are transitioning from state training centers or who, due to age-related conditions, need a higher level of care than group homes provide.

Department of Family Services

The Office for Children (OFC) in the Department of Family Services advances the care, education and healthy development of Fairfax County children from birth through elementary school and supports the Fairfax County childcare community in providing safe, educational care that helps prepare children for lifelong success. Support services provided by OFC programs include permitting and monitoring family childcare homes in the County and subsidizing childcare fees of families with low and moderate incomes who are working to attain and/or maintain their economic self-sufficiency. The Child Care Assistance and Referral (CCAR) program offers the Fairfax community information about County childcare providers and centers, tips for choosing quality childcare, and assistance with identifying child care options. CCAR staff also track and respond to federal and state child care legislation. Direct services provided by OFC include the School-Age Child Care (SACC) program, providing before and after-school childcare services for working families throughout the county, and operating the Fairfax County Employees' Child Care Center for children of County employees. OFC also administers the Head Start and Early Head Start programs, which provide early childhood education and comprehensive services to income eligible pregnant women and families with children from birth to five years of age.

OFC actively works to increase the supply and quality of child care services and programs in the County by recruiting family child care providers, providing professional development and technical assistance to the County's child care workforce, and sponsoring the Child Care Adult Care Food Program. OFC's participation in the Virginia Preschool Initiative (VPI) program ensures that quality preschool programs are available for eligible four-year-olds. With an emphasis on school readiness, OFC actively collaborates with community organizations, the business community, county agencies, public schools, families and early childhood and school age childcare professionals to support the success of the County's children in kindergarten and beyond.

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. Homeless shelters can no longer meet "crisis/emergency" needs of homeless families in the community. The County shelters are full to capacity every night of the week throughout the year. The use of motels to shelter families is limited in the community as an option of last resort as they do not offer an ideal environment for families, especially for the children in these families. Permanent housing opportunities are needed and partnerships to develop and obtain this type of housing are 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. Funding for feasibility studies

was approved at the *FY 2014 Third Quarter* for the Embry Rucker Community Shelter, Patrick Henry Family Shelter, Bailey's Crossroads Community Shelter and Eleanor Kennedy Shelter. The Embry Rucker Community Shelter is planned for inclusion in the Reston Town Center North redevelopment. The Bailey's Shelter will be relocated due to redevelopment of the current site at Bailey's Crossroads. All four homeless shelters are proposed to be included on the 2016 Human Service/Community Development Bond Referendum.

CURRENT PROJECT DESCRIPTIONS

1. **School Age Child Care Centers** (Countywide): This is continuing project for which an annual contribution is funded to offset school operating and overhead costs associated with School-Age Child Care (SACC) centers. In FY 2017, funding of $1,000,000 is included for the County's annual contribution.

2. **Reston Town Center North Redevelopment** (Hunter Mill District): Approximately $60,000,000 to develop and rezone an overall master plan that reconfigures and provides integrated redevelopment of various Fairfax County and Inova properties at Reston Town Center North (south of Baron Cameron Avenue between Town Center Parkway and Fountain Drive). The plan maximizes the development potential consistent with the needs of the community and in conformance with the Comprehensive Plan Amendment approved in February 2013. Three facilities impacted by the redevelopment are the Reston Regional Library, the Embry Rucker Shelter, and the North County Human Services Center. The County plans to solicit development proposals under the PPEA guidelines, as the Phase 1 Development for the two County-owned parcels, known as Blocks 7 and 8, on which the library and shelter are currently located. Part 1 of the Phase 1 solicitation was issued in summer 2015 to prequalify development partners and the evaluation and community coordination process is underway. The County will solicit a future Phase 2 PPEA for the remaining parcels, including the parcel containing the North County Human Services Center, after a Development Agreement is signed by Fairfax County and Inova. Funding of $1,600,000 has been provided for the master planning effort and EDA bond financing is anticipated for implementation of the plan.

3. **East County Human Services Center** (Mason District): $125,500,000 is proposed for a new East County Human Services Center of which $4,525,000 is currently funded for initial design phases, rezoning and developer negotiations. Funding was provided from 2004 Human Services Bonds remaining from completed projects to support initial design work for this project. This facility will provide enhanced service delivery to the residents of the Eastern part of the County. This project supports a consolidation of existing leased facility spaces in the service area to a consolidated Human Services site with the goal to address the residents' needs in an effective and efficient manner by co-locating agencies in this center. Development options are being evaluated in the current site of the Bailey's Crossroads homeless shelter with the adjacent private property for a possible real estate exchange and coordinated private residential development. Full design work is projected to begin in 2016 and construction is anticipated to begin in 2018. It is anticipated that EDA bonds will finance the County's share of project.

4. **Bailey Crossroad's Community Shelter.** (Mason District): $14,167,258 to fund the relocation of the Bailey's Shelter. The Shelter is an emergency homeless shelter that accommodates 50 adults and serves as a day time drop-in center and main operations center for the region's hypothermia prevention program. The facility is over 27 years old and has had no major renovations since it was constructed. Redevelopment of the current site will create the need for the shelter to be relocated. The County has been working on a redevelopment plan associated with the southeast area of the County. In order to facilitate the scope and the schedule of the redevelopment of the south-east area site, the County would purchase a new site for the homeless shelter relocation and construct a new homeless shelter on that site. Relocation of the Bailey Crossroads Community Shelter is one of the first steps to allow for the redevelopment of the Baileys Crossroads area. A temporary shelter site is also required to meet the redevelopment timelines. The County will lease a temporary site for the temporary relocation until a permanent site is identified for the new shelter facility. On the new site, the Office to Prevent and End Homelessness, may also leverage the property and services to provide a more cost effective solution to reducing homelessness by adding new permanent supportive housing units. This project is scheduled to be funded as part of the 2016 Human Services/Community Development Bond Referendum.

5. **Eleanor Kennedy Shelter** (Mt Vernon District): $12,000,000 to fund the renovation of the Eleanor Kennedy Shelter. The Shelter is an emergency homeless shelter located on the Fort Belvoir Military Reservation that is leased indefinitely to Fairfax County. The facility accommodates beds for 38 men and 12 women. The facility can also accommodate an additional 15 people, in a trailer, for overflow capacity year round and another 10 during cold weather (hypothermia). A renovation and expansion to the Eleanor Kennedy Shelter is essential to meet the ever increasing emergency homeless population and their needs within Fairfax County including a large number of homeless veterans. In addition, this facility has not had any significant infrastructure improvements made since its inception as a shelter almost 30 years ago. This project is scheduled to be funded as part of the 2016 Human Services/Community Development Bond Referendum.

6. **Embry Rucker Community Shelter** (Hunter Mill): $12,000,000 to fund the relocation of the Embry Rucker Community Shelter. The Shelter provides temporary emergency shelter and is comprised of 42 beds (10 rooms) for families, 28 beds for unaccompanied adults (20 men and women) and 10 beds for cold weather overflow (hyperthermia). The one story 11,000 square feet facility was constructed in 1987 and has had no major renovations. Redevelopment of the site will create the need for the shelter to be relocated. The Office to Prevent and End Homelessness, may also leverage the property and services to provide a more cost effective solution to reducing homelessness by adding new permanent housing units. This project is scheduled to be funded as part of the 2016 Human Services/Community Development Bond Referendum.

7. **Patrick Henry Family Shelter** (Mason District): $12,000,000 to fund the renovation or replacement of the Patrick Henry Shelter. The Patrick Henry Shelter provides emergency 30-day accommodations to homeless families. The shelter has a capacity to serve 7 families with an additional 2 emergency overflow units available. A renovation or replacement is greatly needed for the Patrick Henry Family Shelter to meet the growing needs of Fairfax County's homeless family population resulting from limited affordable housing. Improvements are needed to the facilities' community and shared family spaces due to high utilization, age of the facility and normal wear and tear from every day use of the building. This project is scheduled to be funded as part of the 2016 Human Services/Community Development Bond Referendum.

PROJECT COST SUMMARIES
HUMAN SERVICES
($000's)

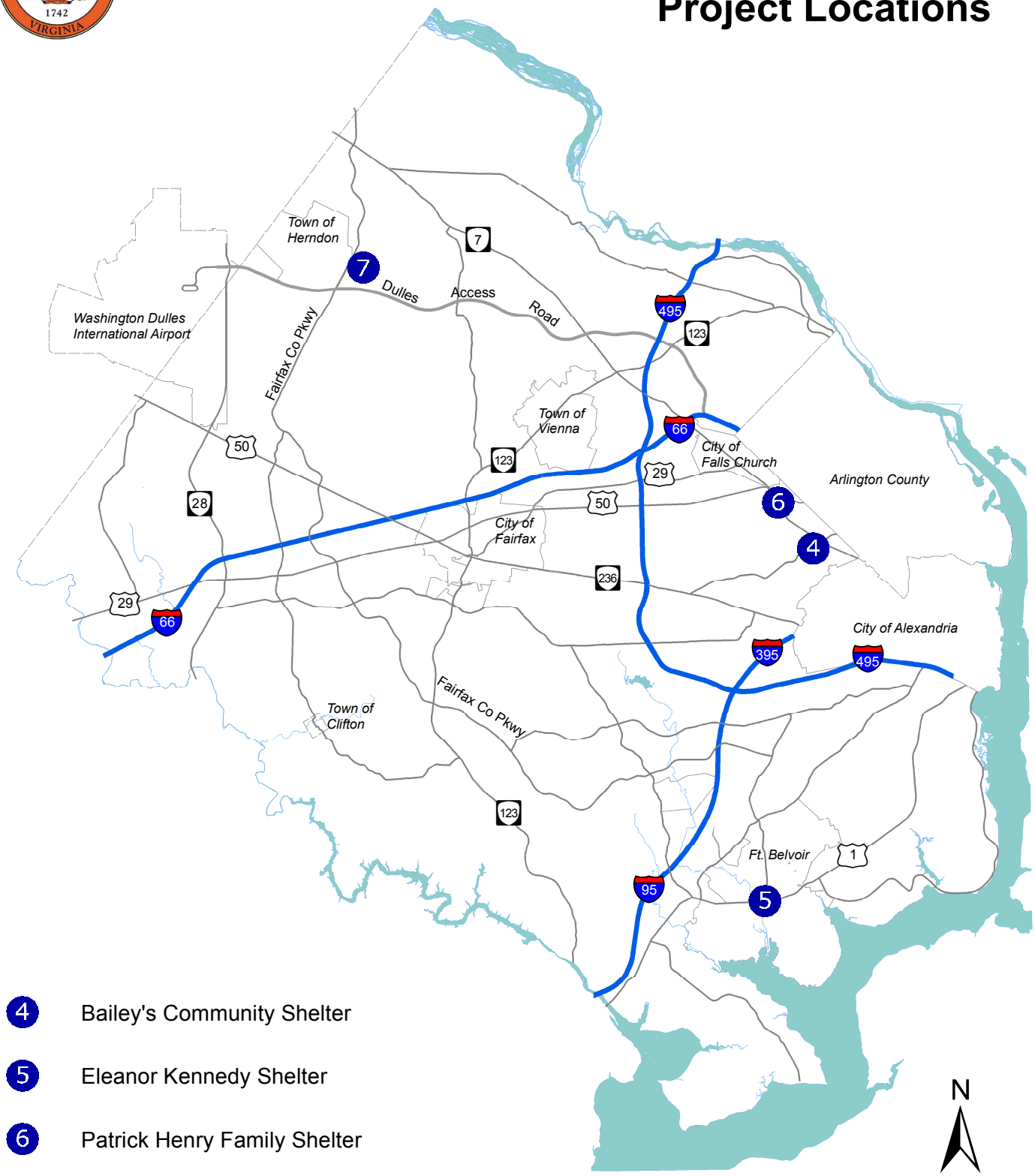
	Project Title/ Project Number	Source of Funds	Budgeted or Expended Through FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	FY 2021	Total FY2017-FY2021	Total FY2022-FY2026	Total Project Estimate
1	School Age Child Care Centers / 2G25-012-000	G	***C***	***1,000***	1,000	1,000	1,000	1,000	5,000	5,000	10,000
2	Reston Town Center North Redevelopment / 2G25-079-000	G, X	***1,600***	10,000	48,400				58,400		60,000
3	East County Human Services Center / HS-000004	G, X	***4,525***			5,730	48,000	48,000	101,730	19,245	125,500
4	Bailey's Community Shelter / HS-000013	B	***1,167***	1,000	600	1,200	3,000	3,000	8,800	4,200	14,167
5	Eleanor Kennedy Shelter / TBD	B	***0***		600	1,200	3,000	3,000	7,800	4,200	12,000
6	Patrick Henry Family Shelter / TBD	B	***0***		600	1,200	3,000	3,000	7,800	4,200	12,000
7	Embry Rucker Community Shelter / TBD	B	***0***		600	1,200	3,000	3,000	7,800	4,200	12,000
	TOTAL		***$7,292***	$12,000	$51,800	$11,530	$61,000	$61,000	$197,330	$41,045	$245,667

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



4 Bailey's Community Shelter

5 Eleanor Kennedy Shelter

6 Patrick Henry Family Shelter

7 Embry Rucker Community Shelter

Distance in Miles
0 1 2 3 4

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.