Summary of Themes

The Fairfax County Human Services Council sponsored “Can We Talk? A Dialogue With Human Services Advisory Groups: Working Together to Effectively Support Better Outcomes for Fairfax County Residents” on Saturday, January 26, 2013. As part of that dialogue, questions were posed to participants of three breakout sessions. Summary of themes identified in discussions are noted below. Individual breakout session notes follow (starting on page 4).

1. *How does this information affect how you think about the HS system?*

   - The community needs to be informed about services available to them
   - Many human services are interrelated and interdependent
   - The human services system has taken too many cuts and services are not available to everybody who needs them
   - Cultural issues (e.g., mental illness stigma) are barriers to service
   - Community needs better information on the effectiveness of government services

2. *Based on what you heard from other groups today, was there anything that might impact the work of your advisory group or organization?*

   - Need to enhance outreach to community at large on human services needs in community
   - The voices of people needing human services must be sought and heard – in representation on advisory councils, in responding to policy and budget choices facing the county, and in development of community solutions to problems

3. *In your personal opinion, what is your advisory, advocacy, or service organization’s top 3 priorities for the coming year? Why are these priorities?*

   **AREAS Identified included:**

   - Basic needs for those in deep poverty
   - Prisoner re-entry initiatives
   - Housing First
   - Address fragmented services: need common rules, strategies, etc.
   - Residential treatment is important as transitional housing
   - Service integration, intake
   - Service access (e.g., transportation)
   - Continued dialogue among the human services advisory groups
   - Services to military families and returning veterans
   - Children with multiple service needs
4. What trends should the Council be aware of? What hasn’t been addressed that should be?

- Trends discussed in all three groups included the following:
  - Resources are stretched because of increases in number of school age and senior populations – growth in autism spectrum disorder diagnoses also mentioned
  - Health Care Reform and benefit for low income persons – and implications for services providers in implementation
  - Need for transportation supports for human services clients and low income persons
  - Health emergencies can destroy a household’s financial resources
  - Jobs for less skilled workers are harder to find
  - Workers need a real living wage
  - Need more affordable housing for working families
  - Affordable housing is rarely located near the residents’ jobs
  - Donations to help those in need are down (clothing, furniture, money)
  - Declining federal funding (affordable housing mentioned)
  - Need for more in-home services and supports for seniors

5. What are some ways in which we could work collaboratively to address the most important priorities for the HS system?

In all three groups, participants agreed that more coordination among service providers is needed. Several individuals noted the importance of county staff to collaborate with the private and nonprofit providers. Several participants also identified the need to conduct outreach with the business community to fundraise for services to be provided. This implies a marketing strategy for the Council to consider. More collaboration is needed.

Strategies suggested to enhance collaboration:

- Regional service delivery and approaches were suggested
- Interactive web site for community to identify needs
- Study how to best respond to individuals as they have/identify needs
- Advocate for primary prevention (especially early childhood and family: pre-K, academic readiness, mental health screenings, re-entry, early intervention, housing, and emergency shelter.)
- Advisory groups work together to engage the business community to participate in solutions
- Advocacy for enhanced state funding for Medicaid financed services
6. **Given the expected budget outlook for the future, how should the community make decisions on resources for the HS system?**

- Ideas included requesting the BOS to set aside 2 cents for the affordable housing trust fund to generate revenues to create affordable housing opportunities.

- Research other communities on ways they deliver services – partner for delivery - work with the business community – outsource.

- Throughout the discussions, some individuals questioned the role of government, and wonder to what extent Fairfax County assumes governmental responsibility. Some of the overriding questions include:

  1. How much does the county work with private providers to deliver services?
  2. How are priorities established when facilities are built – what is needed and what is a luxury?
  3. What areas should the county get out of the business of providing?
  4. Who decides which services should be cut when there is not enough money for existing structure/programs?
  5. Is the county doing all it can to fundraise and leverage funding opportunities?
  6. What advocacy is being done to increase resources from the state and federal governments to the locality?
  7. What public policy advocacy needs to be done with the state and federal levels of government to support human services delivery at the local level?
  8. How can the county’s human services system grow capacity?
  9. Could the human services system benefit by strengthening advocacy? For example, the county could consider advocating with private health-care insurers to offer health care coverage for consumers of mental health and substance abuse services, as well as consumers of other county human services.
  10. What are the results we want to see this year? Next year?
Notes from Group 1

- **In-Home Care and Services for Older Persons and Seniors**
  - Service delivery is sometimes inconsistent.
  - Additional services and more-intense services are needed for elderly and disabled persons.
  - These trends will continue as the population ages—and ages in place.
  - Some seniors and older persons are reluctant to disclose disabilities.
  - Programs across the human services system should be modified to address the particular needs of seniors and older persons.

- **Medicaid**
  - Medicaid recipients are often more fortunate in the frequency and breadth of services received.
  - But, the state Medicaid system is not adequately funded. Many applicants are turned down because of the lack of state funding; the county then becomes the service provider by default.
  - Medicaid Waiver is a separate but related option to Medicaid, but it is not adequately funded by the state.
  - The county continues advocating for additional funding from the state for Medicaid but the state has many competing priorities.

  **RECOMMENDATION:** The human services system could consider developing and implementing an educational effort with the community and with county staff about the services available under the Medicaid and Medicaid Waiver programs. Although there are funding constraints, these programs provide needed services if they can be accessed.

  **RECOMMENDATION:** The Human Services Council’s Policy Committee could explore these areas:
  
  1. How can the county’s human services system grow capacity?
  2. Could the human services system benefit by strengthening advocacy? For example, the county could consider advocating with private health-care insurers to offer health care coverage for consumers of mental health and substance abuse services, as well as consumers of other county human services.
  3. What are the results we want to see this year? Next year?

- **Stability of the Human Services System and the Safety Net of Services**
  
  **MAJOR CHALLENGE:** Coordination of Services
  
  - Service providers are struggling to meet the needs of the community.
  - The inadequacy of a unified intake system at human services sites should be addressed.
The county’s website should be redesigned so that it is user-friendly, intuitive, and offers easy-to-follow links to specific services.

Cross-Board Representation by community members could help improve coordination of services that are provided by community groups and/or county departments (e.g., similar to the model used by the Consolidated Community Funding Advisory Committee).

**MAJOR CHALLENGE: Prevention**

- There seems to be challenges with some county leaders understanding the benefits and interconnectedness of prevention services to the whole human services system.
- It may be difficult to conduct a cost-benefit analysis of the benefits of prevention services but the community and staff know the importance of prevention (e.g., “an ounce of prevention is worth a pound of cure.”)
- Perhaps the community could offer business cases to help support prevention initiatives and quantify the benefits of prevention services.
- Prevention also affects other areas of local government (e.g., public safety and public works). There may be business cases in those non-human services areas that may be applicable to the human services system.
- Group members provided mentioned several programs that would benefit from additional prevention support: re-entry; early intervention; housing; and emergency shelter.

**MAJOR CHALLENGE: Improve Understanding of Domestic and Sexual Violence Issues**

- The county could consider ways to create a better understanding of domestic and sexual violence, such as encouraging and/or sponsoring cross-training among service providers.
- The county could consider repurposing unused housing units to accommodate victims of domestic and sexual violence.

**MAJOR CHALLENGE: Housing**

- Safe and affordable housing is the core of many human services. It is a basic need.
- Housing should not just be affordable, it should be sustainable, stable, and accessible.
- Maybe the county should have another community forum on just Housing issues.
- Housing also is a major component of a strong prevention program.

**Limited Resources and Trends Affecting the Human Services System**

- Tight budgets are the “new normal”
- A “new conversation” between the community and county leaders about the resources required to support human services is needed. The community should challenge the
notion that “the budget is what it is.” Continued incremental slicing of the human services “financial pie” is disruptive, counter-productive, and wasteful.

- The Fairfax County Human Services Council decided several years ago to focus its budget recommendations primarily on the expenditure side of the budget equation rather than on expenditures and revenues. Perhaps the Council should consider developing recommendations on the revenue side as well as the expenditure side.
- The group discussed in general the two “Trends, Factors, and Emerging Needs...” documents. The information contained within the documents reinforced the sentiment that a “new conversation” about resource allocation is needed.
- The number of children who have complex needs should be researched and addressed.
Notes from Group 2

The group leader asked for comments from those in the room.

Question 4 TRENDS

1. Noted population trends that cross systems:
   - Increase in school age population
   - Increase in elderly population
   - Impact of Health Care Reform
   - Need for transportation

2. Need to do more with less

3. Budget planners may not know the impact of the cuts they propose; need to hear from the community

4. Learn from what other, less affluent counties do or provide

5. Transportation – it’s hard to get to work on public transportation

6. Affordable housing is rarely located near the residents’ jobs

7. The cuts to mental health services have been too deep; need more funding

8. Affordable housing – much more is needed

9. Big increase in the number and needs of people with Autism

10. Community Action Advisory Board needs more low income voices.
    - Maybe use Facets?
    - Post flyers at foodbanks?

11. Need to add resources; any further cuts will require cuts in services, for both government and non-profits

12. Deliver services differently – one CSB in Virginia now contracts out all its services to save money. This needs to be studied with community input.

13. Us vs. Them – we can’t continue to fight over the pie. Government and the private sector need to work better together. Maybe the Human Services Council could lead this effort.
14. County is spending millions to rebuild Woodburn MH Center – that money should be going into services. [This comment got a lot of discussion, because the new facility is being built privately by Inova Health System, not the county]

15. Should the county government expand, or should more be done by the private sector?

16. Need to expand the private funding available, such as corporate funding; the county should facilitate that.

17. Needs, current and emerging – a recent Facets client survey showed:
   - Health emergencies can destroy a household’s financial resources
   - Jobs for less skilled workers are harder to find
   - Workers need a real living wage
   - Need more affordable housing for working families

18. SkillSource doesn’t work with the hardest to employ

19. Donations are down – many fewer furniture donations; need county-wide assistance, money, storage space and volunteers.

20. Need better coordination of services – the county can better disseminate service information.

21. Need to do better at identifying resources, as in the TANF dollars that were redeployed for services several years ago.

22. How can we best set priorities? What can the community forgo? Need to better coordinate services.

23. Do we have services that aren’t really necessary?

24. DFS is serving many more people with the same number of staff through re-design of its delivery system.

25. Need to co-locate services, both government and non-profits (i.e. Connections for Hope).

26. Resources don’t have to be money – could be good or services (in-kind)

27. Most issues are regional – need to work with neighboring jurisdictions

28. The county needs to transfer more services to the community, as with the new non-profit health centers
29. Need more meetings like this to create energy. The CCFP came from the HSC, so the process works.

30. The county shouldn’t set priorities without consulting with the community; the human service priority areas were created without community input.

31. Issues of wounded veterans – housing, transportation, jobs and mental health services are all needed. Easter Seals is trying to address those needs.

32. The county should inform the private sector (corporate/business) of needs with which they could help.

33. Tragic stories from individuals can’t be the way we define needs; the HSC needs a different/better process.

34. The county should create an interactive website for people to identify needs.

35. The county has a great human resource guide on its website.

36. Need to do more collaborating.

37. Need to raise taxes, not cut services. Bring back the dedicated penny for affordable housing and increase it to 2 cents.
Notes from Group 3

1. How does this information affect how you think about the HS system?

- Important to see information in cross-cutting issues
- Helps to look at the whole: Are we doing the best we can do?
- We need to communicate a standard to explain to legislators that we’re below that standard (e.g., TANF)
- Drug abuse as a risk factor/key element behind all other issues (e.g., homelessness, poverty, juvenile crime)
- How do we organize HS to improve quality of life (macro view)? How do we also best respond to the individual (micro view, triage, diversion)?
- Advocate primary prevention (especially early childhood and family: pre-K, academic readiness, mental health screenings)
- Business community (through talent and money) should be doing more
- Need to support work of non-profits
- Look systemically and holistically; address silos

2. Based on what you heard from other groups today, was there anything that might impact the work of your advisory group or organization?

- Focus on/prioritize chronically homeless
- Framing the issue or position is important, e.g., Operation Backpack is a one-time TANF payment for school supplies, but has bipartisan support
- Cultural issues (e.g., mental illness stigma) as barriers to service
- Unintended consequences of mandated reporting
- Assess progress on stated common goals and priorities

3. In your personal opinion, what are your advisory, advocacy, or service organization’s top 3 priorities for the coming year? Why are these priorities?

- Basic needs for those in deep poverty
- Prisoner re-entry initiatives
- Housing First
- Address fragmented services: need common rules, strategies, etc
- Residential treatment is important as transitional housing
- Service integration, intake
- Service access (e.g., transportation)

4. What trends should the Council be aware of? What hasn’t been addressed that should be?

- Declining housing funding (federal and local)
5. What are some ways in which we could work collaboratively to address the most important priorities for the HS system?

6. Given the expected budget outlook for the future, how should the community make decisions on resources for the HS system?

- Three questions:
  - What do we want to do?
  - What do we do?
  - What do we think we do?
- What is the need? What is the shortfall?
- Beware of branding us as a county of need when we’re already trying to brand ourselves as a great county to bring your business to. How can we harness the business community to make investments in HS?

Group 3 Summary

- Cross-cutting: Awareness of services, don’t operate in a vacuum
- See HS issues as cross-cutting issues
- Homelessness and substance abuse are factors to be addressed
- Needs: county and HS role
- Questions: What does the county do? What do residents think we do? How are we doing? How do we compare to other jurisdictions? (particularly given our resources)