

Behavioral Health Services Inventory - Behavioral Health Capacity in Fairfax County Public Schools and Fairfax County Government Across the Continuum of Supports						
<i>Mental Health and Substance Abuse Services</i>						
Services	Population Served	Description of Service (describe catchment/population)	Tools/Evidence-Based Practice & Method of Treatment	Information (referrals, web sites, trainings, etc.)	Resources - Staffing/Budget	Assessment of service (need more, need to evaluate/redesign/ measures of effectiveness available)
<b>Community Services Board</b>						
<b>Medical Services - (Psychiatric, Nursing, and Pharmacy)</b>	Ages 5-18 # Served - 748	Psychiatry, nursing and pharmacy services to youth served in CSB programs, as needed. Services are provided face-to-face or via telepsychiatry.		<a href="http://www.fairfaxcounty.gov/csb/">http://www.fairfaxcounty.gov/csb/</a>	FY15 Budget – \$1,295,031	
<b>Prevention (Wellness, Health Promotion, and Prevention Services)</b>	Ages 3-18 # Served – 1,447	Evidence-based services to youth to mitigate risks of mental health and substance abuse issues and prevent need for more intensive services. Services are designed to strengthen emotional health by teaching skills and coping strategies. Programs include Mental Health First Aid, Kognito suicide prevention training, Raising Safe Kids, Girls Circle, Nurturing Parents Program, Too Good for Drugs, etc.	Screening and intervention. Health and awareness-raising campaigns including: Suicide Prevention; Mental Health Promotion; Underage Drinking; Tobacco Cessation/Prevention; Primary Health Care Integration; Prescription Drug Abuse Prevention; Peer Support; and Safe Handling of Medications	<a href="http://www.fairfaxcounty.gov/csb/services/wellness-health-promotion.htm">http://www.fairfaxcounty.gov/csb/services/wellness-health-promotion.htm</a>	FY 2015 Budget – \$1,192,703	Cost-benefit ratios for early treatment and prevention for addictions and mental illness programs range 1:2 to 1:10, \$1 in investment yields \$2 to \$10 cost savings in health, criminal and juvenile justice, educational, and lost productivity, as well as other costs

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<p><b>Prevention</b></p> <p><i>(Wellness, Health Promotion, and Prevention Services)</i></p> <p><i>(continued)</i></p>			<ul style="list-style-type: none"> <li>• Counseling or education                             <ul style="list-style-type: none"> <li>▪ Skill building programs</li> <li>▪ Programming for youth experiencing early signs of substance use or mental health illness</li> <li>▪ Coordinated community-focused workshops designed to promote healthy behaviors and lifestyles to include: Mental Health First Aid; Girls Circle; Leadership &amp; Resiliency; Too Good for Drugs; Road DAWG; ACT Against Violence; Parents Raising Safe Kids</li> </ul> </li> </ul>			

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<b>Wellness, Health Promotion, and Prevention Services</b>  <i>(Al's Pals: Kids Making Healthy Choices)</i>	Ages 3-8	Services are designed to develop social and problem-solving skills and self-control to prevent use of tobacco, alcohol, and other drugs.	Early childhood prevention curriculum and teacher training to develop pro-social skills, self-control, problem-solving, healthy decision making and positive coping	<a href="http://www.vfhy.org">http://www.vfhy.org</a>	FY15 budget - \$60,000	
<b>Call Center</b>  <i>(Engagement Assessment &amp; Referral)</i>	Ages 5-18  # Served - 1,313	Assessment, information and referral services, including services provided by CSB as well as community partners. Based on an initial assessment and urgency of need, youth are either referred to Emergency Services, offered a scheduled appointment with a clinician specializing in services for youth, or referred to community partners.	Engagement, Assessment and Referral services: Call Center - entry and referral services	<a href="http://www.fairfaxcounty.gov/csb/services/assessment.htm">http://www.fairfaxcounty.gov/csb/services/assessment.htm</a>	FY 2015 Budget - \$184,441	

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<b>Emergency – (Emergency, Mobile Crisis and Crisis Hotline)</b>	Ages 5-18  # Served - 1,231	Comprehensive walk-in services available 24/7 at the Merrifield Center for youth in acute mental health or substance abuse crisis, including psychosis, intoxication, suicidality, aggression, and illness impacting their ability to care for themselves. The Mobile Crisis Unit (MCU), operating 8am-12am, is the “mobile” component to Emergency Services responding in the community to evaluate and intervene with at-risk youth. Crisis hotline services include response to phone and text 24/7.	Crisis Intervention; psychiatric evaluations; medications; admissions - voluntarily and involuntarily - to Crisis Stabilization Units or Psychiatric Hospitals Emergency Services: recovery-oriented crisis intervention, crisis stabilization, risk assessments, evaluations for emergency custody orders and temporary detention orders, voluntary and involuntary admission to public and private psychiatric hospitals and the three regional crisis stabilization units. It also provides psychiatric and medication evaluations to include prescribing and dispense medications.	<a href="http://www.fairfaxcounty.gov/csb/services/acute-care.htm">http://www.fairfaxcounty.gov/csb/services/acute-care.htm</a>	FY15 Budget – \$778,106	Service utilization based on "response time" (from initial presentation until seen by ES/MCU clinical staff for assessment/intervention) and also percentage of individuals served diverted from psychiatric hospitalization

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			MCU: Services include crisis intervention, crisis stabilization, risk assessments, evaluations for emergency custody orders and temporary detention orders, voluntary and involuntary admission to public and private psychiatric hospitals and the three regional crisis stabilization units. Civil Commitment: Clinical psychologist evaluations; provide expert testimonies for jurisdictional system			
<b>Early Intervention (Infant &amp; Toddler Connection)</b>	Ages 0-3  # Served 3,372	Assessment and early intervention services for infants and toddlers who have a developmental delay or a diagnosis that may lead to a developmental delay. Services include physical, occupational and speech therapy; developmental			FY 15 Budget - \$ 6,896,186 (Cost Center G762004) \$4,020,660 (Cost Center 1760001)	

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		services; medical, health and nursing services; hearing and vision services; service coordination; assistive technology (e.g., hearing aids, adapted toys and mobility aids); family training and counseling; and transportation.				
<b>Outpatient (Y &amp; F Outpatient)</b>	Ages 4-18 and families  # Served - 2,237 Outpatient  VICAP Ages 4-21	Assessment, therapy, case management, and crisis intervention services to youth who have mental health, substance use and/or co-occurring disorders and their families. Includes school-based services at Cedar Lane and Quander Road, several pre-schools and South County Headstart as well as the Virginia Independent Clinical Assessment Program (VICAP) providing independent clinical assessment in the Medicaid and FAMIS children's community mental health	Family-focused outpatient services for children and adolescents who have mental health, substance use and/or co-occurring disorders. <ul style="list-style-type: none"> <li>▪ Infant and Early Childhood program</li> <li>▪ Case management for service/resource coordination, CSA, and medication management</li> <li>▪ School based services provided to Cedar Lane and Quander Road (10 hours per week each), several pre-schools and South County</li> </ul>	<a href="http://www.fairfaxcounty.gov/csb/services/outpatient.htm">http://www.fairfaxcounty.gov/csb/services/outpatient.htm</a>	FY15 Budget - \$5,421,521	Service utilization based on consumer-focused treatment plan goals and objectives for treatment and case management

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		rehabilitative service authorization process.	Headstart ▪ VICAP- staff conduct Medicaid screening/eligibility determinations (40 per month) (FY15 assessments completed, 303			
<b>Day Treatment</b>	Ages 13-18 and families  #Served - 55	Day treatment services for youth with mental health and/or substance use issues whose treatment needs cannot be met through office visits at an outpatient site. Youth attend the program all day, five days/week for three to six months. FCPS provides an alternative school at the site, with youth attending school in the morning and therapy in the afternoon.		<a href="http://www.fairfaxcounty.gov/csb/services/outpatient.htm">http://www.fairfaxcounty.gov/csb/services/outpatient.htm</a>	FY15 Budget - \$825,592	

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<b>Youth Resource Team – Discharge Planning and Case Management)</b>	Ages 5 - 22 and families  # Served - 111	State-mandated discharge planning for youth in the Commonwealth Center for Children and Adolescents and state-funded private hospital placements as well as case management services for children with serious emotional disturbance or co-occurring disorders, including those mandated to be served under the Comprehensive Services Act (CSA).	Discharge planning from hospitals <ul style="list-style-type: none"> <li>▪ Manage state/regional hospitalization bed funds (LIPOS program)</li> <li>▪ Transition plans for youth released from juvenile corrections (State Dept. Juvenile Justice)</li> <li>• Monitor youth in court ordered outpatient treatment</li> </ul>		FY15 Budget – \$701,571	
<b>Intensive Care Coordination (Wraparound Fairfax)</b>	Ages 3-18 and families  # Served - 123	Intensive wraparound services for youth who are at high risk for residential or out-of-home placement, or who are currently served away from home and transitioning back to their home community. Services include home-	Wraparound and intensive care coordination is a family-driven, team-based service planning and implementation process that develops community-based service strategies, which integrate the needs of the child, the family and the requirements of the		FY15 Budget – \$649,380	



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		based services, respite care and other ancillary services, such as recreation and transportation, to support the family's plan of care.	mandated child service agencies. Services provided include: assessment; facilitation; monitoring service plans; and case management support. Services are provided for up to 15 months and are designed to enable youth to remain safely in the community with their families.			
<b>Case Management &amp; Treatment</b>  <b>(Mental Health Initiative)</b>		Mental health case management and treatment services for youth with serious emotional disturbance who reside in the community and are not mandated to be served under the Comprehensive Services Act (CSA).	<ul style="list-style-type: none"> <li>▪ Licensed and standardized psychological testing instruments for depression, anxiety, thought disorders, TF CBT</li> <li>▪ motivational interviewing, stages of change</li> <li>▪ CAMS suicide intervention,</li> <li>▪ Psychiatric evaluation and treatment</li> </ul>	<a href="http://www.fairfaxcounty.gov/csb/services/court-based.htm">http://www.fairfaxcounty.gov/csb/services/court-based.htm</a>	FY15 Budget – \$515,529	Treatment services greatly reduced in BETA and JDRDC. Cost shifting to the JDRDC for psychological evaluations.

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**Community Services Board (continued)**

<p><b>Youth &amp; Family Contracts –</b>   <b>(Residential Treatment - Leland House)</b></p>	<p>Ages 12-17 adolescent boys and girls</p>	<p>Leland House, an eight bed psychiatric crisis care residential program, provides therapeutic services for adolescents experiencing a psychiatric emotional or behavioral crisis who are unable to remain in their family home or current setting until the crisis is resolved. Services are designed to divert adolescents from more intensive and long-term service options, such as psychiatric hospitalization.</p>	<p>Leland is a 45 day crisis stabilization program utilizing Circle of Courage concepts with individual, family and group modalities; CBT and behavior interventions, including process orientation.</p>	<p><a href="http://www.fairfaxcounty.gov/csb/services/intensive-community.htm">http://www.fairfaxcounty.gov/csb/services/intensive-community.htm</a></p>	<p>FY15 Budget - \$592,203</p>	
<p><b>Youth &amp; Family Contracts –</b>   <b>(Emergency Shelter, Case Management)</b></p>	<p>Emergency Shelter                      Ages 13-17                      Outreach and Case Management                      Ages 18-24                       # Served 67</p>	<p>Alternative House provides emergency shelter, support coordination, outreach and case management services to homeless youth.</p>	<ul style="list-style-type: none"> <li>▪ 24/7 Shelter services for homeless youth 13-17 years of age</li> <li>▪ Outreach and case management services to youth 18-24 years of age, who are homeless, and locate and refer youth to suitable low-cost housing that is convenient to work, school and/or other sources of support</li> <li>▪ Provide training, support and referrals to prevent future homelessness</li> </ul>	<p><a href="https://thealternativehouse.org">https://thealternativehouse.org</a></p>	<p>FY 15 Budget - \$173,685</p>	

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<b>Support Coordination</b>	Ages 5-18	Assessment, evaluation, case management and monitoring services for youth with intellectual/developmental disability, as well as their families, to access essential services and supports to meet basic needs and attain maximum level of independence, productivity and integration into the community.	Assessment, Collaborating with the individual to develop and monitor a service plan, Family and community supports, Counseling, Crisis intervention, Intake and discharge planning, and Assist with accessing community-based services outside the CSB .	<a href="http://www.fairfaxcounty.gov/csb/services/support-coordination.htm">http://www.fairfaxcounty.gov/csb/services/support-coordination.htm</a>	FY15 Budget - \$2,393,597	
<b>Residential Treatment</b> <i>(Crossroads Youth)</i>	Program Closed 6/30/2015	Residential treatment services to adolescent males aged 14-17 with high substance abuse involvement, co-occurring disorders and higher sociopathic traits			FY15 Budget – \$1,461,448	

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<b>Residential Treatment (Sojourn)</b>	Program Closed 12/31/14	Residential treatment services in an eight-bed community-based therapeutic group home, Medicaid Level B, for girls aged 13-17 with serious emotional disturbance and/or co-occurring substance use disorders. A three to nine months program for girls experiencing co-occurring, depression, mood instability disorders, and PTST/multi-trauma exposure experiencing depression. Treatment plans include case management, therapeutic services and community wraparound referrals and support			FY15 Budget – \$615,431	
<b>Respite (ACRS Direct ACRS Contracts)</b>	Ages 5 – 18 # Served 144	Subsidy for respite care services for families of youth with intellectual disabilities or serious mental illness.	Group homes, Supervised apartments, Drop-in sponsored living, Respite Care	<a href="http://www.fairfaxcounty.gov/csb/services/community-residential.htm">http://www.fairfaxcounty.gov/csb/services/community-residential.htm</a>	FY 15 Budget - \$212,341	

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<b><i>Court Involved Youth</i></b>  <b><i>(Assessment, Evaluation, and Case Management)</i></b>	Ages 12-17  # Served 314	Assessment, evaluation, individual and family therapy, crisis intervention and case management services for youth involved with the Juvenile and Domestic Relations District Court by reason of run-away, out of control or truant behavior or criminal activity.	Assessment, evaluation, consumer monitoring and emergency treatment services		FY15 Budget – \$815,682	
<b><i>Court Involved Youth</i></b>  <b><i>(Mental Health Juvenile Detention)</i></b>	Ages 12-17	Assessment, evaluation, consumer monitoring and emergency treatment services for children and adolescents placed in juvenile detention centers.	Assessment, evaluation, consumer monitoring and emergency treatment services		FY15 Budget – \$111,724	
<b><i>Court Involved Youth</i></b>  <b><i>(Mental Health Child &amp; Adolescent Services)</i></b>	Ages 12-17	Intensive care coordination and wrap-around services for youth involved with the Juvenile and Domestic Relations District Court as well as psychiatric services for youth placed in juvenile detention centers.	ICC, wrap-around and psychiatric services	<a href="http://www.dbhds.virginia.gov/individuals-and-families/mental-health-services">http://www.dbhds.virginia.gov/individuals-and-families/mental-health-services</a>	FY15 Budget – \$75,000	

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<b><i>Community Services Board (continued)</i></b>						
<b><i>Behavioral Health - (Turning Point)</i></b>	Ages 16 – 25 # Served 21	Early intervention and treatment of behavioral health needs for young adults experiencing First-Episode Psychosis (FEP). Recovery After an Initial Schizophrenia Episode (RAISE) model and Coordinated Special Care (CSC) team-based, collaborative, recovery-oriented approach involving the youth, treatment team, and family.	RAISE and CSC team-based recovery (youth, treatment team, and family), outreach, medication, cognitive and behavioral skills training, supported employment and education, case management, and family psycho-education.	<a href="http://www.dbhds.virginia.gov/individuals-and-families/mental-health-services/coordinated-specialty-care-for-young-adults">http://www.dbhds.virginia.gov/individuals-and-families/mental-health-services/coordinated-specialty-care-for-young-adults</a>	FY15 Budget - \$422,691	
<b><i>Regional Suicide Prevention</i></b>	Ages 5 - 18	Comprehensive suicide prevention and intervention planning initiative between CSB, other human service agencies, FCPS, and community and faith-based partners. Includes web-based and text referral services for individuals at-risk of suicide 24/7.	Screening, counseling and referral services	<a href="http://www.fairfaxcounty.gov/csb/region/">http://www.fairfaxcounty.gov/csb/region/</a>	FY15 Budget - \$0	

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**Community Services Board (continued)**

<p><b>Regional Crisis Stabilization</b>  (Regional Developmental Children’s Crisis Stabilization)</p>	<p>Ages 5 - 18</p>	<p>Services are designed to provide a system of care for children with intellectual and developmental disabilities in crisis due to mental health or behavioral challenges, diverting them from unnecessary institutional placements. Services include continuing care coordination, psychiatric and behavioral health specialist services and training for families and providers.</p>		<p><a href="http://www.fairfaxcounty.gov/csb/region/">http://www.fairfaxcounty.gov/csb/region/</a></p>	<p>FY15 Budget - \$0</p>	
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<p><b>Regional Crisis Stabilization</b>  <b>Mental Health Children’s Crisis Stabilization</b></p>	<p>Ages 5 - 18</p>	<p>Crisis stabilization, psychiatric support, and local inpatient psychiatric hospitalization services</p>	<p>Care coordination, psychiatric and behavioral health specialist services, and training for families and providers.</p>	<p><a href="http://www.fairfaxcounty.gov/csb/region/">http://www.fairfaxcounty.gov/csb/region/</a></p>	<p>FY15 Budget - \$356,438</p>	
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<b>Department of Family Services</b>						
<b>Prevention/Early Intervention</b>		Preventative services are provided to families with risk factors and/or with early signs of child abuse/ neglect issues. Services include home visiting for parents with new infants (HFF), parenting education groups for parents and children (PEP), and leveraging community and school partnerships to identify formal and informal sources of family support to improve child and family well-being (NN).	HFF – Ages & Stages Questionnaire (ASQ-3) validated Developmental Screening Tool, Nurse Child Assessment Satellite Training (NCAST) Parent-Child Interaction Assessment -PEP – Adult-Adolescent Parenting Inventory (AAPI-2), Nurturing Parenting Curriculum, Incredible Years Curriculum (0-4), Active Parenting (adolescent) -NN – NCFAS evidence-based family functioning assessment tool	<u>Healthy Families America</u> <a href="http://www.preventchildabuse.org/index.php/about-us/about-hfa">http://www.preventchildabuse.org/index.php/about-us/about-hfa</a>  <u>Nurturing Parenting</u> <a href="http://www.nurturingparenting.com">http://www.nurturingparenting.com</a>  <u>Incredible Years</u> <a href="http://incredibleyears.com/programs/parent">http://incredibleyears.com/programs/parent</a>  <u>Active Parenting</u> <a href="http://www.activeparenting.com/">http://www.activeparenting.com/</a>  <u>National Family Preservation Network</u> <a href="http://www.nfpn.org/assessment-tools">http://www.nfpn.org/assessment-tools</a>	HFF 29.5.SYE nonprofit staff; 6 SYE county staff (RBA says 31.93)  PEP – 7.5 SYE (from RBA, includes grant)  NN – 11 SYE (3 grant funded) (from RBA)	County and state funding for prevention services is vulnerable as it has been repeatedly cut/ under-resourced. Higher demand than capacity to meet need. Programs are evidence-based and have outcomes that demonstrate their efficacy. Measures include: Improvement in parenting attitudes (PEP), Improvement in parent-child interaction (HFF), Lack of CPS
Healthy Families	HFF – 530 families, 515 children served in FY15					
Parenting Education programs	PEP – 347 families, 501 children served in FY15					
Neighborhood Networks	NN – 63 families, 163 children served in FY 15					
OFC – Head Start						



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<b>Treatment/Care Coordination</b>		Intervention with children and families who have either experienced or are at risk of child abuse/neglect. Services include case management, care coordination, and placement services  <b>Mental health and substance abuse treatment services are funded through Comprehensive Services Act (see CSA section).</b>	SDM Safety, Risk Strengths& Needs Assessments		FC&A – 85 SYE	The CYF Division of DFS is in the implementation and monitoring phase of an extensive realignment effort. An evaluation of services is a component of this effort. Measures include keeping children safely with their families, decreasing the length of time children are in foster care, increasing the # of children who exit foster care to permanency  The lack of evidence-based treatment providers
Foster care & Adoption	FC&A – 368 children served in FY15		Family Partnership Meetings		CPS – 54.52 SYE	
CPS	CPS – 2,506 reports of child abuse / neglect in FY15		Family Finding		PPS – 52 SYE	
Protection & Preservation Services	PPS – 624 families, 1,732 children served in FY15		Permanency Coordination		FEP – 8 SYE	
Family Engagement Program	FEP – 725 meetings held in FY13		Strengthened parent-child visitation practices			

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**Department of Neighborhood and Community Services**

<b>Community &amp; Teen Centers</b>	Programs for school-aged children	<p>After School Programs-free drop-in program recreation activities, homework assistance, field trips, snacks</p> <ul style="list-style-type: none"> <li>•RecQuest Program-structured 11-week summer camp for children 6-12 with emphasis on developing lifelong leisure skills.</li> <li>•Technology Programs (Computer Learning Centers &amp; Computer Clubhouses) - computer instruction, graphics, music, robotics</li> <li>• Family &amp; Community Programs/Community Events: Holiday Socials; Prevention Programs; health/wellness; ESL Programs; Family Movie Nights</li> </ul> <p>County staff provides positive role models for teens and they provide teens with the skills necessary to make good decisions, improve personal resiliency and to have fun.</p>	<p>Results Based Accountability (RBA)- Finalizing measurable outcomes as to how our participants are better off through Results Based Accountability.</p> <p>Positive Behavioral Intervention Support (PBIS)-an incentive program that rewards positive behaviors being implemented in community and teen centers along with FCPS to measure the success of behavior changes.</p> <p>Kids at Hope - The “Kids at Hope” philosophy is founded on the belief that all children are capable of success...no exceptions.</p>	Coordinated Services Planning (222-0880 emergency services line) are social workers able to provide resources for families in need.	<p>Community/teen center staff certified in Mental Health First Aid needed.</p> <p>Partnership with VIP/Teen Centers Summer Programs-NCS teen centers and FCPS partnered this summer, one in each region, for the month of July to provide a camp program for middle and high school-age youth.</p>	<p>Youth with behavioral health needs that staff not equipped to deal with.</p> <p>-Center staff have a strong rapport with the youth and serve as positive role models</p> <p>-Centers provide a safe and supervised place for youth to participate in recreation programs after school and summer.</p> <p>Strong partnerships and collaborations with community.</p>
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<b>Behavioral Health Services Inventory - Behavioral Health Capacity in Fairfax County Public Schools and Fairfax County Government Across the Continuum of Supports</b>						
<b><i>Mental Health and Substance Abuse Services</i></b>						
<b>Services</b>	<b>Population Served</b>	<b>Description of Service (describe catchment/population)</b>	<b>Tools/Evidence-Based Practice &amp; Method of Treatment</b>	<b>Information (referrals, web sites, trainings, etc.)</b>	<b>Resources - Staffing/Budget</b>	<b>Assessment of service (need more, need to evaluate/redesign/ measures of effectiveness available)</b>
<b><i>Department of Neighborhood and Community Services (continued)</i></b>						
<b><i>Family Resource Centers</i></b>	Parents/families in the Culmore and Central Springfield communities	Family Resource Centers serve families in the Culmore and Springfield/Franconia communities. They focus on parenting and family support and offer a variety of programs, resources, and activities	Evidence-based parenting programs, such as Parents Raising Safe Kids	Coordinated Services Planning (222-0880 emergency services line) are social workers able to provide resources for families in need.	Alternative House runs the centers through a contract with the County	
<b><i>Therapeutic Recreation</i></b>	Individuals with disabilities	Therapeutic Recreation Services offers a variety of programs, social clubs, and camps to provide opportunities for people with disabilities to acquire the skills that enable them to participate in the recreation and leisure programs of their choice. Staff also provides support and advocacy to individuals who wish to participate in general recreation activities		<a href="http://www.fairfaxcounty.gov/ncs/trs">http://www.fairfaxcounty.gov/ncs/trs</a>		

Behavioral Health Services Inventory - Behavioral Health Capacity in Fairfax County Public Schools and Fairfax County Government Across the Continuum of Supports						
<i>Mental Health and Substance Abuse Services</i>						
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<b>Department of Neighborhood and Community Services (continued)</b>						
<b>Middle School After-School Program</b>	Middle school students	Fairfax County Public Schools offers comprehensive, high-quality after-school activities that provide opportunities for middle school. After-school activities are being implemented so that youth have greater opportunities for success in developing the attitudes, skills, knowledge, and abilities to live healthy lives, become productive adults, and to thrive in the workplaces and communities of the 21st century. Free and offered 5 days/week.				Implemented by FCPS. 75% of funding comes from NCS, and NCS serve as key liaisons and partners in program development and delivery.
<b>Partners in Prevention Fund</b>	Children, youth, and families	Implementation of evidence-based prevention programs on a variety of topics by community-based organizations	Current programs include: <ul style="list-style-type: none"> <li>• Suicide Prevention: SOS and Lifelines</li> <li>• Teen Dating Abuse Prevention: Safe Dates</li> <li>• Obesity Prevention: Energize our Families, Media Smart Youth, Catch Kids Club</li> </ul> Parenting: Strengthening Families, Parents Raising		Community-based organizations are contracted by NCS to implement the programs	

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			Safe Kids			
Fairfax County Public Schools						
<b>Prevention and intervention Services</b>	187,000 enrolled students  (embedded at every level, every school across FCPS)  Psychology and social work individual and group for 2014-15 = 74,000  1297 calls to Parent Clinic; some handled as telephone consults and 357 appointments scheduled June – August 2015	Classroom instruction/lessons on mental wellness - i.e. positive peer relationships, bullying and harassment, goal setting, managing stress, pro-social skills  Group and individual counseling including trauma informed care  Mentoring Programs Staff and Parent trainings  Parent Clinic - multiple languages  Crisis Response and Support	School-based collaborative teams: -Positive Behavior Intervention Supports (PBIS) -Attendance committee -Child study/student support team -Local Screening Committees Evidence informed Tools/Methods i.e.: -Check & Connect -SOS/ACT -Social Skills Curriculum - HOPS - Kimochis -Unstuck & On Target -Safe Dates -Girl Circle - Boys Council	Wellness Week/Depression Awareness  Bullying and Harassment Awareness & Training grades 7-12  Annual staff training on sexual and gender based harassment  Depression and Positive Mental Health website  Crisis Intervention website  Bullying Prevention and Intervention	112 school psychologists  102.5 school social workers	Reduced discipline referrals  Youth survey data  Reduction in residential placements  Improved attendance  Increased student engagement

**Behavioral Health Services Inventory - Behavioral Health Capacity in Fairfax County Public Schools and Fairfax County Government Across the Continuum of Supports**  
***Mental Health and Substance Abuse Services***

Services	Population Served	Description of Service (describe catchment/population)	Tools/Evidence-Based Practice & Method of Treatment	Information (referrals, web sites, trainings, etc.)	Resources - Staffing/Budget	Assessment of service (need more, need to evaluate/redesign/ measures of effectiveness available)
			-Coping Cat -PREPaRE trained - national crisis response curriculum	website  Military Connected Youth website  Resiliency Project Website		

**Fairfax County Public Schools (continued)**

<b>Prevention and intervention Services (continued)</b>	All secondary and elementary school staff – required training  Available to all secondary school students	On-line avatar based training on suicide prevention		Kognito <i>at-risk</i> suicide prevention training  Kognito <i>Step In Speak Up</i> recommended  Kognito <i>Friend to Friend</i> presented in 10 <sup>th</sup> grade health and available to all students		
	All school staff and parents; selected youth age 16 and over	Youth Mental Health First Aid		YMHFA for students, staff and parents	11 school psychologists and 11 school social workers trained as trainers	

Behavioral Health Services Inventory - Behavioral Health Capacity in Fairfax County Public Schools and Fairfax County Government Across the Continuum of Supports						
<i>Mental Health and Substance Abuse Services</i>						
Services	Population Served	Description of Service (describe catchment/population)	Tools/Evidence-Based Practice & Method of Treatment	Information (referrals, web sites, trainings, etc.)	Resources - Staffing/Budget	Assessment of service (need more, need to evaluate/redesign/ measures of effectiveness available)
	Students attending non-traditional schools/programs	Counseling, behavioral support, teacher/parent consultation			3 school-based psychologists & 5 social workers	As above and Improved graduation rates
<b>Fairfax County Public Schools (continued)</b>						
<b>Assessment and evaluation</b>	187,000 school-aged students threat assessments 2014-15 - 453  suicide risk assessments 2014-15 =3,038  2014-15 initial = 4,924	Progress Monitoring and Consultation -Assessment services available to all students: -Threat Assessment -Behavioral Assessment -Suicide Risk Assessment -Mental Health Assessment  Depression screening – 19 high schools and 12 middle schools – <i>schools that did not do a formal screening did depression education activities</i>  -Evaluation services available for special education consideration and in support of discipline/hearings office	Assessment: evidence informed standard protocols  Evaluation: Standardized, normed protocols	Referral sources: Student Teacher/staff Parent	See above  (112 school psychologists  102.5 school social workers perform these functions)	Increased parent/guardian engagement

Behavioral Health Services Inventory - Behavioral Health Capacity in Fairfax County Public Schools and Fairfax County Government Across the Continuum of Supports						
<i>Mental Health and Substance Abuse Services</i>						
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	Re-evaluations 2014-15 = 8,620	cases; Evaluations for students in residential facilities throughout US				
	Preschool Aged Children 2 - 5years old Available to all FC residents	Developmental evaluations	Play based and standardized evaluations of development; sociocultural histories with parents	Early Childhood Assessment Team – 7 psychologists; 7 school social workers		
<b>Fairfax County Public Schools (continued)</b>						
<b>Treatment</b>	Students with significant social/emotional/ behavioral/ developmental concerns	Intensive intervention and counseling services provided in public day school sites, multiple comprehensive services sites, and special education centers; collaboration with private providers, agency personnel, treatment facilities, and families	As above		35 school social workers  38 school psychologists	Reduction in residential placement  Reduction in suspensions and expulsions  Maintenance in least restrictive environment  Number of referrals to community based services and emergency services



**Behavioral Health Services Inventory - Behavioral Health Capacity in Fairfax County Public Schools and Fairfax County Government Across the Continuum of Supports**  
***Mental Health and Substance Abuse Services***

Services	Population Served	Description of Service (describe catchment/population)	Tools/Evidence-Based Practice & Method of Treatment	Information (referrals, web sites, trainings, etc.)	Resources - Staffing/Budget	Assessment of service (need more, need to evaluate/redesign/ measures of effectiveness available)
	High school students who require short-term mental health stabilization interventions	Intensive intervention and counseling to the students; parent education; and community connections when a student's capacity to participate in the educational setting is severely impacted by mental health issues or when a student is experiencing difficulty with transitioning back to the educational setting after receiving mental health services outside of the school environment	Cognitive behavioral approaches and evidence informed practices	Project AWARE High Schools (Centreville, Fairfax, Falls Church, South Lakes and West Potomac)	Behavioral Health Clinicians: 3 school psychologist; 2 school social workers	Student access to short-term mental health stabilization interventions  Increased success with transitions back into the school setting from a mental health challenge

***Fairfax County Public Schools (continued)***

<b><i>Case Management/ Care Coordination</i></b>	Students accessing CSA services  Lead case managed 202 cases in 2014-2015	Collaborate with county agency personnel to secure necessary services for students/ families; Coordinate all services for families available through FCPS and externally	Child and Adolescent Needs And Strengths assessment	All school social workers are trained on the CANS and the process		Effectiveness reduced by lack of availability to convene a team based planning meeting; Difficulty securing services
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Behavioral Health Services Inventory - Behavioral Health Capacity in Fairfax County Public Schools and Fairfax County Government Across the Continuum of Supports						
<i>Mental Health and Substance Abuse Services</i>						
Services	Population Served	Description of Service (describe catchment/population)	Tools/Evidence-Based Practice & Method of Treatment	Information (referrals, web sites, trainings, etc.)	Resources - Staffing/Budget	Assessment of service (need more, need to evaluate/redesign/ measures of effectiveness available)
<b>Health Department</b>						
<b><i>Patient Care Services (PCS), Women, Infant &amp; Children (WIC), and Community Health Care Network (CHCN)</i></b>	Students, parents, and staff in FCPS, FCCPS, maternity/postpartum clients, WIC clients: nursing women, infants, or children under five years of age, children and youth of all ages seeking services in	Focus on prevention with a goal of healthy babies/children/youth through a variety of programs including maternity and other services in the clinic and field. Identification of needed behavioral health services of our clients (receiving public health services) and referral of these individuals to appropriate resources. These youth are identified through the School Health Room, Health Department Clinics, Field Services including	Edinburgh Postnatal Depression Scale (EPDS)  Patient Health Questionnaire (PHQ-4 and 9)  Behavioral Health Risks Screening Tool  Abuse Assessment Screen (A.A.S.)/Domestic Violence and Trauma Screening Tools  Generalized Anxiety Disorder 7-Item Scale (GAD-7)	Referrals for further screening or treatment to:  CSB, FCPS psychologists, social workers, and counselors, HFF, MCH, Nurse Family Partnership, DFS-CPS, Office for Women & Domestic & Sexual Violence	CHCN:  3 FTE's: mental health therapists on contract with Molina Healthcare Inc.  1 psychiatrist from CSB who visits each CHCN site once a month.  Mental Health Coordinator for our	A need for more postpartum support groups for individuals with limited English proficiency.  Better accessibility to behavioral health resources.  Universal screening tool for children and youth that can be used in any setting and is accepted as a referral document for services  Improve A.A.S. screening

**Behavioral Health Services Inventory - Behavioral Health Capacity in Fairfax County Public Schools and Fairfax County Government Across the Continuum of Supports**  
**Mental Health and Substance Abuse Services**

Services	Population Served	Description of Service (describe catchment/population)	Tools/Evidence-Based Practice & Method of Treatment	Information (referrals, web sites, trainings, etc.)	Resources - Staffing/Budget	Assessment of service (need more, need to evaluate/redesign/ measures of effectiveness available)
	clinics  CHCN: Teens and adults enrolled and receiving care at the three CHCN clinics	Maternal Child Health (MCH), Healthy Families Fairfax (HFF), and Nurse Family Partnership, Individual Child Development Clinics, and Community Health Care Network (CHCN).  CHCN provides limited behavioral health services and an on-site mental health therapist is available.	Cognitive Behavioral Therapy (CBT)  Solution-focused Therapy  Motivational Interviewing (MI)  Dialectical Behavior Therapy (DBT)  Acceptance/Mindfulness-based Therapies  Stress Management Classes	Services, Northern Virginia Family Services (NVFS)	Perinatal Maternal Mental Health Project services via Northern VA Family Services available for Healthy Families clients through their CareFirst grant	tool to include questions on human trafficking, strangulation, stalking and reproductive coercion.  Need for staff training on updated tools and appropriate follow-up.  Development of trauma-informed services/workforce

**Juvenile and Domestic Relations District Court**

<b>Probation Supervision</b>	Probation Officers supervise approximately 600 juveniles daily.  Youth must have been under the age of 18 years when charged but may continue receiving services until age 21 years.  Jurisdiction over	Youth placed on probation by the Juvenile Court for offenses ranging from truancy, runaways, to misdemeanors (larceny, vandalism) to felonies (Burglary, Grand Larceny) and serious violent felonies (Malicious Wounding, Gang Participation, Sexual Assaults, and	Available continuum of services within the CSU that allows staff to place youth in most appropriate level of intervention while maintaining youth in the local community  Use of structured decision making tools at key decision points in system – Detention Assessment Instrument, Youth Assessment and Screening Instrument –	In a point-in-time survey of 33 JDRDC CSU juvenile probation officers responsible for the supervision of 550 juvenile offenders, with 2/3 of those staff responding, it was reported that 173 of these juveniles had an identified behavioral	CSB Juvenile Forensic Unit; 2 FT psychologists (S28)  1 PT psychologists (S28) vacant  -2 limited term PT psychologists (1 vacant)  1 FT Substance Abuse Counselor II (vacant/shared costs CSB/JDRDC)  2 FT Substance Abuse	Additional need for the following services:  -Group counseling  -Sexual victimization  -Outpatient substance abuse treatment  -Drug/alcohol education  -Anger management  -Individual counseling  -Inpatient substance
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**Behavioral Health Services Inventory - Behavioral Health Capacity in Fairfax County Public Schools and Fairfax County Government Across the Continuum of Supports**  
**Mental Health and Substance Abuse Services**

Services	Population Served	Description of Service (describe catchment/population)	Tools/Evidence-Based Practice & Method of Treatment	Information (referrals, web sites, trainings, etc.)	Resources - Staffing/Budget	Assessment of service (need more, need to evaluate/redesign/ measures of effectiveness available)
	<p>offenses occurring in the 19th District; (Fairfax County, Fairfax City, Towns of Herndon/Vienna) regardless of youth residence.</p>	<p>Robbery).  If behavior of youth comes under the statutory authority of the JDRDC, the CSU must provide case management services and probation supervision</p>	<p>that allow CSU staff to more effectively target services  Strengthening field probation and residential staff behavior change skills – motivational interviewing, cognitive behavioral interventions</p>	<p>health need.  Of those 173 cases, 15 juveniles were on a waiting list for CSB intake and services.</p>	<p>Counselors II Intake (vacant)  Contracts with Multicultural Clinical Center to provide psychological evaluations, and sex offender assessment and treatment with an annual budget of \$163,000.</p>	<p>abuse treatment  -Mental health evaluation and counseling  Need an additional supervisory level staff person (s-30) to manage the staff and array of services being provided by the Forensics unit.</p>

**Juvenile and Domestic Relations District Court (continued)**

<p><b>Beta Post-Disp. Sentencing/ Treatment Program</b></p>	<p>Program serves adolescent males between 14 and 18 years of age. It is typically six months residential services and six months of community aftercare. Youth are under court probation supervision and typically have a new offense or a violation of probation that is</p>	<p>Youth are currently under court probation supervision in Fairfax County, have committed a wide range of criminal offenses both felony and misdemeanor which includes crimes against persons and property. Crimes involving fraud, health and safety, peace and order and the administration of justice. In addition to the criminal history the resident population also may be</p>	<p>The program provides individual, group and family counseling and an on-site Alternative School. They utilize Cognitive Behavior Therapy, Dialectical Behavior Therapy, Motivational Interviewing, Multi-Family Group based on the Nurturing Parenting Program and the Phoenix</p>		<p>1 FT psychologist (S-28)  1 SAC II (S-23)</p>	<p>In the best interest of clients, service needs to be reliable and on-going. We have experienced repeated reductions in positions (4 to 2) as well as job freezes where no substance abuse services were available for the</p>
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Behavioral Health Services Inventory - Behavioral Health Capacity in Fairfax County Public Schools and Fairfax County Government Across the Continuum of Supports						
<i>Mental Health and Substance Abuse Services</i>						
Services	Population Served	Description of Service (describe catchment/population)	Tools/Evidence-Based Practice & Method of Treatment	Information (referrals, web sites, trainings, etc.)	Resources - Staffing/Budget	Assessment of service (need more, need to evaluate/redesign/ measures of effectiveness available)
	adjudicated by the court and results in the court ordered placement. Youths entering the program have either committed a very serious offense or are repeat offenders that require immediate removal from the community.	addressing issues of ADHD, Conduct disorder, Mood disorder, depression, PTSD, Substance Abuse/Dependence, bipolar or Oppositional Defiance Disorder. Residents may also have a history of abuse and neglect and/or gang involvement. Residents have typically not been successful in outpatient services.	curriculum.  The program uses the Adverse Childhood Experiences Assessment(ACE), Texas Christian University Assessment tool to measure criminal thinking and motivation and the Family Assessment Measure III			clients.
<i>Juvenile and Domestic Relations District Court (continued)</i>						
<b>Mental Health Unit in JDC and SCII</b>	Two programs serve male and female youth between 13 and 18 years of age. The SCII program services status and lower level criminal offenders. The detention center serves more serious offenders who are	Most of the youth are residents of Fairfax County but we also have youth from other jurisdictions in the Commonwealth as well as individuals from other states who may commit crimes in Fairfax County. Youth have been court ordered into the programs with offenses ranging from truancy, runaways (SC II only) to misdemeanor offenses of larceny, assault	The JDC staff administers the MAYSI II and the clinicians review all results and respond accordingly based on need. Clinicians also do mental status exams with residents identified through the MAYSI instrument. For trauma assessments they use the Trauma Symptoms Index and		1 FT psychologist (\$28) (assigned 20+ hours per week to emergency services).  1 FT Mental Health Therapist (\$23)  1 FT Senior Clinician (\$25)  -grant funded	

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	considered to be a danger to themselves or others. In addition to the criminal/ status history the residents have a host of other issues which include mental health, substance abuse and	etc., to felony offenses of burglary, grand larceny, malicious wounding, gang participation, sexual assaults, robbery and murder.  The JDC/ SCII staff handles the day to day care of the residents. The CSB mental health clinicians review all intakes and screen youth for mental health	the Adolescent Psychopathology Scale. Staff utilize Cognitive Behavior Therapy (CBT), Trauma Focused CBT, Motivational Interviewing, Individual, Group and Family Psychotherapy, Expressive Therapy (Sand-Tray).			
<i>Juvenile and Domestic Relations District Court (continued)</i>						
<b><i>Mental Health Unit in JDC and SCII (continued)</i></b>	educational challenges. The Detention Center had 558 admissions last fiscal year. SCII had 212 admissions last fiscal year.	concerns. They consult with JDC staff on managing youth in the program, provide crisis stabilization, screening for psychiatric hospitalization as well as referring youth for medication assessments. Provides court ordered emergency evaluations and trauma assessment	While youth entering these programs have a host of mental health issues the primary areas are Substance Abuse/Dependence, Conduct Disorder, Mood Disorder and PTSD.			

**Behavioral Health Services Inventory - Behavioral Health Capacity in Fairfax County Public Schools and Fairfax County Government Across the Continuum of Supports**  
***Mental Health and Substance Abuse Services***

Services	Population Served	Description of Service (describe catchment/population)	Tools/Evidence-Based Practice & Method of Treatment	Information (referrals, web sites, trainings, etc.)	Resources - Staffing/Budget	Assessment of service (need more, need to evaluate/redesign/ measures of effectiveness available)
		and referral services. Assist case managers and families in identifying community resources to address service needs when clients are released from detention or SCII.				

***Juvenile and Domestic Relations District Court (continued)***

<b><i>Juvenile Intake</i></b>	Juvenile Intake Officers screen estimated 5,000 complaints each year from citizens, family members, school officials, and law enforcement to determine the appropriate response such as diversion from official court action	Intake officers provide diversion services to youth and families including Diversion Hearings, where sanctions and referral to mandatory treatment programs are imposed, and Monitored Diversion (90 day period of informal probation supervision) where case management supervision is provided including assessment and program referrals. In FY 2013 886	Intake officers use a Structured Decision Making model for determining which cases are appropriate for diversion in lieu of formal court action. In cases where a petition is taken, the intake staff utilizes a Detention Assessment Instrument to determine if a youth must be taken into custody, released into a		Programs with Fee for Services:  CSB - Diversion 101 for substance abuse  ASAP - SAFE (substance/alcohol focused education)  NASP - YES (shoplifting program)  Calvary Counseling Center - TIP	On-going family counseling services beyond crisis intervention and diversion period.  Access to immediate mental health services for youth and families who require clinical assessment and treatment for significant issues ranging from depression, trauma, suicidal ideation, etc., in locations accessible to
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**Behavioral Health Services Inventory - Behavioral Health Capacity in Fairfax County Public Schools and Fairfax County Government Across the Continuum of Supports**  
**Mental Health and Substance Abuse Services**

Services	Population Served	Description of Service (describe catchment/population)	Tools/Evidence-Based Practice & Method of Treatment	Information (referrals, web sites, trainings, etc.)	Resources - Staffing/Budget	Assessment of service (need more, need to evaluate/redesign/ measures of effectiveness available)
	to formal petitions to issuance of detention orders.	were diverted, 92 Monitored Diversion cases, 782 Informal Diversion hearings, and  12 cases referred to Restorative Justice.	detention alternative program, or released. Intake staff utilize Motivational Interviewing model in communicating with youth and parents, and the Youth Assessment Screening Instrument when planning for diversion case management.		(shoplifting program)  2.5 FTE Family Counselors	the family and in their native language.  Access to immediate substance abuse evaluation and treatment services that can be available with the duration of the 90 day diversion period at locations that are accessible to the family and in their native language.

**Juvenile and Domestic Relations District Court (continued)**

<b>Boys Probation House / Foundations Program (Girls)</b>	Serves youth 13 to 18 9 to 12 month placement. Youth are under court probation supervision and have a new offense or a violation of probation that is adjudicated by the court and results in the court ordered placement. Youth entering these programs have failed to benefit from community and home based services. They have committed a	Youth are Fairfax County residents who have committed a wide range of criminal offenses or are status offenders with extreme high risk behaviors and lacking adequate supervision. In addition to the criminal and status offense history the resident populations also may be addressing issues of Substance Abuse/ Dependence, ADHD,	The program provides individual, group and family counseling. An on- site Fairfax County Alternative School.  They utilize Cognitive Behavioral Therapy (CBT), Dialectical Behavioral Informed Practices, Motivational Interviewing, Expressive Therapy (Sand-Tray), Trauma		CSB-SAC I (S-20) Assigned to Foundations  CSB-No clinician at BPH (S-25). Was assigned to CSB system in November 2015. Other CSB Forensic staff will be assigned to give	We need two Substance Abuse Sr. Clinicians (S-25). Cost is approximately \$67,000.00 plus benefits for each position.  We need additional services for Psychological
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	serious offense or are repeat offenders or involved in extreme high risk behavior in the community. Many of the youth in BPH will be placed there on a suspended commitment to the Department of Juvenile Justice. BPH had 26 admissions last fiscal year. Foundations had 22 admissions last fiscal year.	Conduct Disorder, PTSD, Abuse and Neglect, Domestic Violence, Mood Disorder, Depression, Attachment and Anxiety Disorders, Emotional and Cognitive Disabilities, Family Dysfunction, immigration issues and gang involvement.	Focused CBT, Family Systems Approach to interventions and counseling.		limited substance abuse services to BPH.	Assessments for all youth entering these programs. Cost approximately \$35,000.00.
<i>Juvenile and Domestic Relations District Court (continued)</i>						
<b>Transitional Living Program (TLP)</b>	Serves youth 17-19 6-8 months in placement. Youth are under court supervision and have a new offense or violation of probation that is adjudicated by the court and results in court ordered	Youth are Fairfax County residents who have committed a wide range of offenses or have been previously sentenced to commitment to DJJ. Residents may be addressing substance abuse or mental health issues.	The program is designed to provide independent living skills, continued education and general purpose counseling around pro-social skills utilizing CBT and MI		No CSB Services	

Behavioral Health Services Inventory - Behavioral Health Capacity in Fairfax County Public Schools and Fairfax County Government Across the Continuum of Supports <i>Mental Health and Substance Abuse Services</i>						
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	placement. Youth entering this program have failed to benefit from community and home-based services and are aging out of the system and may not be able to remain at home. They had 14 admissions for fy2014					
<b>Juvenile and Domestic Relations District Court (continued)</b>						
<b>Interdisciplinary Team (IDT)</b>	When a child is adjudicated as a Child in Need of Supervision (Truancy or Runaway) or a Child in Need of Services the client may be referred to the Interdisciplinary Team for further	Youth referred to the IDT are residents of Fairfax County who have been adjudicated of status offenses or found to be in need of services.	Multiple disciplines provide assessments for completion of IDT report unique to client. Assessments are determined by the needs of each client and may include: Family assessment; Substance Abuse Assessment, Mental		CSB representative provides assessment as needed to address client's needs.	Current CSB representative

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	assessment and recommendations for disposition. There were 36 cases referred to the IDT for calendar year 2015.		Health Assessment and YASI Pre-Screen Assessment.			
<b>Office of Comprehensive Services for At Risk Youth</b>						
<b>Prevention Services</b>	None					
<b>Treatment Psychiatric services</b>	Referral Sources FY 2015: -FCFS - 58 -CSB - 18 -DFS/PPS - 2 -DFS Foster Care & Adoption - 60 -JDRDC - 13 -Falls Church City Schools - 7	Placement of youth outside of their family homes in licensed residential care programs for 24-hour supervised care to groups of youth.  Residential programs provide intensive treatment services			\$9,404,944  38 community providers	CPMT has set the goal of reducing use of long-term psychiatric residential treatment by 10% annually, and re-investing those resources into in-home services, care

**Behavioral Health Services Inventory - Behavioral Health Capacity in Fairfax County Public Schools and Fairfax County Government Across the Continuum of Supports**  
***Mental Health and Substance Abuse Services***

Services	Population Served	Description of Service (describe catchment/population)	Tools/Evidence-Based Practice & Method of Treatment	Information (referrals, web sites, trainings, etc.)	Resources - Staffing/Budget	Assessment of service (need more, need to evaluate/redesign/ measures of effectiveness available)
	Ages 8-23	including: medication management, nursing care, occupational therapy, crisis stabilization, assessment, social skills training, group therapy, individual therapy, and family therapy.				coordination and other community-based services.

***Office of Comprehensive Services for At Risk Youth (continued)***

<b><i>Treatment Intensive in home</i></b>	Referral Sources FY 2015: FCPS – 174 DFS: CPS – 21; PPS – 106 -Foster Care & Adoption - 77 JDRDC: - 18 CSB - 47 Falls Church City Schools - 1 Falls Church	Services provided to youth and their families when the youth are living at home. Intensive services are provided typically, but not solely, in the residence of a youth who is at risk of being removed from the home or who is being transitioned home from	Applied Behavior Analysis (ABA)		\$2,411,545  23 community providers	Placements in long-term residential and group home programs were reduced by 46%, from 157 youth in January 2009 to 70 in September 2015, largely due to the effective use of intensive in-home services and
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<b>Behavioral Health Services Inventory - Behavioral Health Capacity in Fairfax County Public Schools and Fairfax County Government Across the Continuum of Supports</b>						
<b><i>Mental Health and Substance Abuse Services</i></b>						
<b>Services</b>	<b>Population Served</b>	<b>Description of Service (describe catchment/population)</b>	<b>Tools/Evidence-Based Practice &amp; Method of Treatment</b>	<b>Information (referrals, web sites, trainings, etc.)</b>	<b>Resources - Staffing/Budget</b>	<b>Assessment of service (need more, need to evaluate/redesign/ measures of effectiveness available)</b>
	Juvenile Court - 4 Ages: 0-23	an out-of-home placement. Services may include: crisis intervention and treatment; individual and family counseling; life, parenting, and communication skills; and 24 hour per day emergency response.				intensive care coordination. Service expansions are funded through re-investment of residential expenditures.
<b><i>Office of Comprehensive Services for At Risk Youth (continued)</i></b>						
<b><i>Treatment Outpatient Therapy</i></b>	Referral sources: FCPS -36 DFS: CPS – 15; PPS – 31; Foster Care & Adoption - 110 JDRDC - 6 Falls Church Juvenile Court – 4 FCCPS - 1 CSB - 9 Ages: 0-23	Individual, family or group therapy	Trauma informed care		\$617,592  43 Providers used in FY 2015	CSA only funds outpatient therapy when Medicaid or private insurance are not available to do so.
<b><i>Care Coordination</i></b>	190 children served in FY 2015	Intensive level of support for youth at high risk for	High Fidelity		\$1,011,308	Placements in long-term residential and

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<i>Mental Health and Substance Abuse Services</i>						
Services	Population Served	Description of Service (describe catchment/population)	Tools/Evidence-Based Practice & Method of Treatment	Information (referrals, web sites, trainings, etc.)	Resources - Staffing/Budget	Assessment of service (need more, need to evaluate/redesign/ measures of effectiveness available)
	(CSB-137; UMFS-72) FCPS: -110 DFS: CPS-3; Family Preservation-13; Foster Care & Adoption-9 CSB-55 JDRDct-16 Falls Church City Schools-1 Falls Church Juvenile Court-1	residential or out-of-home placement; and youth in placement and transitioning back to their home community Services and supports, are guided by the needs of the youth secondary to the completion of a strengths and needs discovery, are developed through a wraparound planning process that results in an individualized and flexible plan of care for the youth and family.	Wraparound		2 providers	group home programs were reduced by 46%, from 157 youth in January 2009 to 70 in September 2015, largely due to the effective use of intensive in-home services and intensive care coordination.
<i>Office for Women and Domestic and Sexual Violence Services</i>						
<b>Prevention Services</b>	Youth & children who may or may not have been affected by violence	Respect Ur d8 – teen dating program; awareness of safe dating issues	Multi-session offerings for teens		0.75 SYE S-25 (partial use the Youth Education & Outreach Specialist’s position)	Evaluations are completed by participants at the end of the presentation
	Adult Women – Spanish speaking	Mujeres Transformando Vidas (Women Transforming Lives)	Weekly meetings		0.25 SYE S-27 (partial use of Prevention & Education Coordinator’s position)	Evaluations are completed by group members bi-annually
<b>Intervention services</b>	Children whose mothers are	Curriculum based groups explore several	Multi-session groups divided by age		0.33 SYE S-25 (partial use of Children’s	Client report of effectiveness of

Behavioral Health Services Inventory - Behavioral Health Capacity in Fairfax County Public Schools and Fairfax County Government Across the Continuum of Supports						
<i>Mental Health and Substance Abuse Services</i>						
Services	Population Served	Description of Service (describe catchment/population)	Tools/Evidence-Based Practice & Method of Treatment	Information (referrals, web sites, trainings, etc.)	Resources - Staffing/Budget	Assessment of service (need more, need to evaluate/redesign/ measures of effectiveness available)
	attending DV support groups in the community	topics related to violence, safety, and resiliency			Counselor); approximately 5 trained volunteers	services as measured using RBA goals
<b>Intervention services (continued)</b>		Parent consultations	2 parent consultation sessions address specific needs of family related to children	Education on child development and strategies for helping their children for parents whose homes have been impacted by DV	0.25 SYE S-27 (partial use of Children's Services Coordinator	Parent feedback as collected and measured using RBA goals
<i>Office for Women and Domestic and Sexual Violence Services (continued)</i>						
<b>Intervention services (continued)</b>	Children and teens who have been victims of non-incest sexual violence	8-10 sessions with a trained counselor for issues related to victimization FY 2013 : 38 clients	Licensed counselors and social workers provide trauma-informed counseling		0.30 SYE S-27 (partial use of Sexual Assault Counselor)	Client report of effectiveness of services as measured using RBA goals