

Response to Questions on the FY 2010 County Lines of Business & Schools Program Review Processes Public Process - Fall 2008

Request By: Supervisor Foust

Question: Provide examples of benefits of programs on the Fairfax-Falls Church Community Services Board's (CSB) proposed reduction list.

Response: Below are seven examples of CSB's Lines of Business that encompass many of the programs on the CSB's proposed reduction list, and examples of their benefits (with the specific reductions noted). While not mentioned during the meetings, detailed and complete examples of benefits of programs on the CSB's proposed reduction list are also indicated on slides 24-69, *LOB Highlights*, of the CSB's LOB presentation to the BOS on November 14, 2008.

LOB with Program Components on the Proposed Reduction List	Program Benefits/Highlights
<p>106-13: MR Day Support and Vocational Services</p> <p>Reductions (#1, 3, 4, 7, 8, 19)</p>	<p>Slides #52-54: This LOB provides support and training for individuals with intellectual disabilities to work and participate in community activities and experience the same opportunities for full inclusion as people without disabilities. These services enable individuals with MR to: continue and enhance the vocational and social skills they acquired while in school; earn wages and benefits for the work they perform; pay taxes on their earnings; and contribute and participate more fully in their communities. It also assists families of individuals with intellectual disabilities (especially families with individuals who have severe medical or behavioral needs) by providing a safe and engaging environment for their family member during the day. This assistance enables them to participate in their own gainful employment outside of the home and other activities of daily family living. In addition, County participation in this LOB leverages approximately \$8.7 million in Medicaid funds paid directly to private providers of MR day support and vocational services throughout Northern Virginia.</p>
<p>106-05: Youth and Family Mental Health Services</p> <p>Reductions (#5, 11, 13, 21)</p>	<p>Slides #35-37: Treatment and case management services for youth and their families can have lasting positive effects and limit the need for services in the future. Successful treatment returns youth to their normal development, to include academic success and positive peer and family relationships. Parenting skills are also enhanced. Approximately 2,200 consumers and their family members are served per year. In collaboration with Juvenile Court, DFS, and CRS, MH Youth and Family has committed its resources to provide integrated and coordinated behavioral health services to youth and families who are most at risk of being placed in congregate or residential care. These resources are focused on reducing out of home placements allowing youth to remain in our community. The County's CSA program currently has 225-250 youth in residential placements at an average cost of \$150,000 per year. With concerted and focused efforts, it is hoped to reduce that number by 15-20 percent within two years.</p>

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<p>106-03: Mental Health Adult and Family Services</p> <p>Reductions (#2, 5, 6, 11, 13, 22, 23, 28)</p>	<p>Slides #30-32: These services have allowed for hospital diversion and step down to the community through utilization of intensive community day support programs and intensive case management, which decreases the length of inpatient stay. A cross-system referral process allows for comprehensive review of day support and vocational services to support rapid response and access to services. The Jail Diversion program provides pre- and post-booking intensive case management services focused on decreasing the number of mental health consumers that interface with the criminal justice system. Discharge planning services are provided to the State and Private Bed Purchase local hospitals to safely transition consumers to the community. These services decrease psychiatric hospitalization and length of stay; support consumers in maintaining housing; support consumers' efforts to pursue vocational goals; assist in decreasing the cycle of criminal justice involvement; and help maintain consumer and community safety.</p>
<p>106-17: CSB Emergency, Crisis and Detoxification Services</p> <p>Reductions (#10, 12, 16, 26)</p>	<p>Slides #64-65: These services provide a continuum of emergency mental health and substance abuse services to: ensure short-term safety for both the individual and the community; assess and stabilize crisis situations; and link individuals to services that address ongoing needs. Individuals served present in acute mental health or substance abuse crisis, including psychosis, intoxication, suicidality, aggression, and illness impacting the individual's ability to care for himself. Individuals in acute crisis require immediate intervention to protect life, health, and the community. These services intervene to stabilize and acute situation, thus promoting individual and community safety. Crisis and Detoxification services routinely work in partnership with other emergency response agencies including Police, Sheriff, Courts, and Magistrates to intervene and stabilize high risk emergency situations.</p>
<p>106-06: ADS Adult Outpatient Treatment Services</p> <p>Reductions (#9, 17)</p>	<p>Slides #38-39: Treating individuals with a brief history of substance abuse is both effective and cost-effective in reducing not only alcohol and other drug consumption, but also the associated health and social consequences—and criminality, while enhancing health and productivity. This LOB provides cost-effective and accessible substance abuse and co-occurring (SA/MH) treatment services in the community. It allows individuals to maintain employment, housing and family stability. Individuals accessing services are at high-risk of relapse and/or return to criminal behavior. Most of the individuals served are court referred and/or in crisis (i.e., at risk to themselves, their family members, and/or the public). This treatment opportunity often prevents the need for more expensive residential treatment, and decreases the utilization of jail and hospital beds. Approximately 65 percent of consumers complete outpatient treatment. In FY 2008, 1,605 individuals received services, 93 percent of consumers were satisfied with services, and 83 percent achieved improvement in employment/school status after 30 days of treatment.</p>

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<p>106-15: Early Intervention for Infants and Toddlers</p> <p>Reduction (# 30)</p>	<p>Slides #58-60: This LOB improves developmental and educational outcomes and reduces the need for more intrusive, expensive and intensive interventions in the future. The period from birth through three is the primary time that changes can occur in brain development that will have the most impact for the future of the child. Research indicates that every dollar spent on intervention during this age saves seven dollars down the road. Many children exit the early intervention system and do not access special education services in the public schools. Additionally, the strategy of providing support to parents increases their ability to meet the needs of their child. Furthermore, this LOB enables leveraging of over \$1.7 million in federal and state Part C funds, approximately \$341,000 in Medicaid funds, and over \$225,000 in third-party insurance payments for early intervention services.</p>
<p>106-02: CSB Prevention Services</p> <p>Reductions (#14)</p>	<p>Slides #27-29: Programming includes services to children, adolescents, adults, families, and older adults. There is capacity to provide services in varied formats and in multiple languages. In FY 2008, 20,390 persons were involved in prevention activities. Prevention is implied in all County vision elements. Evidence-based prevention practices build community capacity with outcomes that speak to individual and community indicators of strength and resilience. Prevention is responsible stewardship and governance because it is proactive and seeks to spot trends and needs before a crisis and the need for treatment services. Outcomes consistently show positive change such as improved problem-solving skills, coping skills, increased knowledge, reduced behavioral incidents, and positive attitudinal shifts. School outcomes include improved attendance and GPA. Services consistently meet or exceed County performance measures. These services were previously identified by the BOS for expansion to all high schools in two year intervals until 2016.</p>