

Testimony of Bettina Lawton
On Behalf of the Fairfax-Falls Church Community Services Board
House Appropriations and Senate Finance Committees
Virginia General Assembly
January 6, 2021

Good morning. My name is Bettina Lawton, and I am Chair of the Fairfax-Falls Church Community Services Board. We are the largest CSB in Virginia, serving Fairfax County and the cities of Fairfax and Falls Church. Our CSB provides services to over 20,000 individuals who have challenges relating to mental health, substance use disorder and developmental disabilities.

On behalf of the CSB Board, I ask that you support funding increases for Discharge Assistance Planning, opioid and substance use disorder services, and the ongoing implementation of STEP-VA. Funding for developmental disability waiver slots should also be a priority as new waivers do not keep pace with the growing waitlist.

However, I must bring to your attention two proposed changes that would hinder the CSB's ability to provide critical and effective services at the community level as we work to address the ongoing psychiatric hospital bed crisis and serve clients with serious mental illness.

First, please remove Region 2 from the Governor's recommendation to transfer Local Inpatient Purchase of Service (LIPOS) from the local CSB to the Department of Behavioral Health and Developmental Services (DBHDS). This is not a "zero-sum transfer of funding" as asserted in the budget. LIPOS is a local community program that CSBs in Region 2 rely upon for managing the state psychiatric hospital bed crisis. Our CSB and Region 2 have effective administrative practices and local partnerships in place to purchase private hospital beds to divert individuals from state hospital admission. Region 2 has the lowest utilization rate of state hospital bed days in the Commonwealth.

The proposed change would increase our region's state hospital bed usage, negatively impact our region's robust mental health continuum, and increase DBHDS administrative expenses for LIPOS monitoring. Centralizing critical funds and decreasing aid to localities even further will not improve census management at state facilities. Instead, funding for DBHDS to partner with Northern Virginia CSBs in building community residential capacity is needed.

I also ask that you oppose changes to the section of the code (37.2-505) dealing with discharge planning. The proposed DBHDS code change would allow the practice of discharging clients with serious mental illness into the community without appropriate community-level services and supports. Without appropriate support, individuals will likely be re-hospitalized in a short period of time. This would make the state hospital bed crisis worse, and lead to a larger number of adverse incidents in the community. Addressing discharge delays in Northern Virginia can be done by investing in appropriate community capacity to meet individual needs. The CSB hopes to partner with DBHDS to address challenges with the discharge planning process in a more effective way.

Thank you for your time and continued support.

Testimony of Bettina Lawton
On Behalf of the Fairfax-Falls Church Community Services Board
Fairfax County Delegation
Virginia General Assembly
January 9, 2021

Good morning, my name is Bettina Lawton. I am chair of the Fairfax-Falls Church Community Services Board, which serves Fairfax County and the cities of Fairfax and Falls Church. The CSB provides services to over 20,000 individuals who have challenges relating to mental health, substance use and developmental disabilities.

I bring to your attention two proposed changes that would damage Northern Virginia's effective hospital diversion efforts and severely hinder our ability to meet the needs of individuals with serious mental illness.

First, please remove Region 2 from the Governor's recommendation to transfer Local Inpatient Purchase of Service (LIPOS) from the local CSB to the Department of Behavioral Health and Developmental Services (DBHDS). This is not a "zero-sum transfer of funding" as asserted in the budget. LIPOS is a local community program that CSBs in Region 2 rely upon for managing the state psychiatric hospital bed crisis. The proposed change would increase our region's state hospital bed usage, negatively impact our region's robust mental health continuum, and increase DBHDS administrative expenses for LIPOS monitoring. Centralizing critical funds and decreasing aid to localities even further will not improve census management at state facilities

I also ask that you oppose changes to the section of the code (37.2-505) dealing with discharge planning. The proposed code change would allow the practice of discharging clients with serious mental illness to the community without appropriate community-level services and supports. These individuals will likely be re-hospitalized in a short period of time. Addressing discharge delays in Northern Virginia can be done by investing in appropriate community capacity to meet individual needs. The CSB hopes to partner with DBHDS to address challenges with the discharge planning process in a more effective way.

Thank you for your time.