FAIRFAX - FALLS CHURCH
Community Services Board

FAIRFAX-FALLS CHURCH COMMUNITY SERVICES BOARD MEETING

Dan Sherrange, Chair

Wednesday, November 13, 2024, 5:00 PM

Sharon Bulova Center for Community Health
8221 Willow Oaks Corporate Drive, Level 3, Room 3-314 West Fairfax, VA 22031

MEETING AGENDA

1.	**Meeting Called to Order**	**Dan Sherrange**
2.	**Roll Call, Audibility and Preliminary Motions**	**Dan Sherrange**
3.	**Matters of the Public**	**Dan Sherrange**
4.	**Amendments to the Meeting Agenda**	**Dan Sherrange**
5.	**Approval of the October 23, 2024, Meeting Minutes**	**Dan Sherrange**
6.	**Staff Presentation**	**Eileen Bryceland**
	A. Behavioral Health Outpatient & Case Management Services (BHOP)	
7.	**Director's Report**	**Daryl Washington**
	A. County, Regional, State and Cross Agency Initiatives	
	B. Youth Services and Crisis Response Centers	
	C. DD Waivers	
8.	**Matters of the Board**	**Dan Sherrange**
9.	**Committee Reports**	
	A. Service Delivery Oversight Committee	**Evan Jones**
	B. Compliance & Executive Committee	**Dan Sherrange**
	C. Fiscal Oversight Committee	**Andrew Scalise**
	D. Other Reports	
10.	**Closed Session:** ***Discussion of a personnel matter as permitted by Virginia Code Section 2.2-3711(A)(1) and consultation with legal counsel employed by a public body regarding specific legal matters requiring the provision of legal advice by such counsel, as permitted by Virginia Code Section 2.2-3711(A)(8).***	
11.	**Adjournment**	

Meeting materials are posted online at www.fairfaxcounty/community-services-board/board/archives or may be requested by contacting Sameera Awan at 703-324-7827 or at Sameera.Awan@fairfaxcounty.gov

FAIRFAX-FALLS CHURCH COMMUNITY SERVICES BOARD
MEETING MINUTES
OCTOBER 23, 2024

The Fairfax-Falls Church Community Services Board met in regular session at the Sharon Bulova Center for Community Health, 8221 Willow Oaks Corporate Drive, Room 3-314 West, Fairfax, VA 22031.

1. **Meeting Called to Order**

   Board Chair Dan Sherrange called the meeting to order at 5:00 PM.

2. **Roll Call, Audibility, and Preliminary Motions**

   PRESENT: **BOARD MEMBERS:** BOARD CHAIR, DAN SHERRANGE; ANDREW SCALISE; BETTINA LAWTON; DARIA AKERS; EVAN JONES; KAREN ABRAHAM; SRILEKHA PALLE; SHEILA COPLAN JONAS; PATRICIA ZISSIOS; JIM GILLESPIE; ANNE WHIPPLE; CAPTAIN DANIEL WILSON; RON FITZSIMMONS

   ABSENT: **BOARD MEMBERS:** SARAH COUGHTER; ROBERT BARTOLOTTA

   Also present: Executive Director Daryl Washington, Deputy Director of Clinical Operations Abbey May; Deputy Director of Clinical Operations Barbara Wadley-Young; Deputy Director of Administrative Operations Jean Post; Director of Medical Services Dr. Debra O'Beirne; Division Director of Developmental Disabilities and Support Coordination Eileen Bryceland; Division Director of Contract and Supportive Services Kevin Lafin; Division Director of Nursing Services Yusuf Enum; Legislative and Grants Analyst Elizabeth McCartney; Director of Administration & Policy Shweta Adyanthaya; Healthcare Systems Director Jennifer Aloi and Board Clerk Sameera Awan.

3. **Matters of the Public**

   None were presented.

4. **Amendments to the Meeting Agenda**

   The meeting agenda was provided for review; no amendments were made.

   BOARD MEMBER CONSENSUS TO AMEND AGENDA ITEM NO. 4

5. **Approval of the Minutes**

   The minutes of the Executive Committee Meeting held on September 25, 2024, were distributed for review. Committee member Bettina Lawton proposed minor revisions under Agenda Item #8, reflected in the second paragraph, third line from the bottom, where the phrase "public library" was changed to "public catalog." Additionally, under the Executive Director's report, the last sentence of the first paragraph was revised to now read: "The survey results show a response rate exceeding 76%."

   MOTION TO ADOPT SEPTEMBER 25, 2024, MEETING MINUTES WAS MOVED BY BOARD MEMBER ANDREW SCALISE, SECONDED BY BOARD MEMBER BETTINA LAWTON.

MOTION TO ADOPT WAS APPROVED BY ANDREW SCALISE, JIM GILLESPIE, EVAN JONES, BETTINA LAWTON, SHEILA COPLAN JONAS, DARIA AKERS, ANNE WHIPPLE; PATRICIA ZISSIOS AND DAN SHERRANGE AND KAREN ABRAHAM. CAPTAIN DANIEL WILSON; RON FITZSIMMONS AND SRILEKHA PALLE ABSTAINED.

6. Director's Report

A. Youth Services and Crisis Response Centers

Deputy Director of Clinical Operations Abbey May provided shared resources, allowing for an expansion of youth programs. As of August 2024, all three community-based teams are operational. Teams are now located at Hybla Valley, the James Lee Community Center, and the Herndon Neighborhood Resource Center. These teams are actively taking individuals into the programs, which is an exciting development. The Youth Medication-Assisted Treatment team, launched in June 2024, is also underway. An RFP has been issued for youth detox services, which the regional office plans to reissue in October, with several vendors already expressing interest.

Previously, a short-term residential program known as Leland House, located in the Centerville area and contracted through United Methodist Family Services, provided services until the contractor requested to terminate their contract effective November 7, 2024. This decision will be followed by an official notice. The longstanding service program has faced utilization challenges in recent years. In June, the program was asked to consider transitioning to a crisis stabilization service due to increased demand for higher understanding and crisis-oriented care; however, the provider opted not to move forward with this model.

To address this need, the current RFP aims to secure services incorporating youth detox and a crisis stabilization component. The packet, Agenda Item #6B, includes a summary of services under the Children's Services Act (CSA), which aims to improve access to care for children and their families in partnership with state and community providers. This act facilitates comprehensive, wrap-around services at all levels of care, helping to ensure alternatives remain available even with the Leland House program's closure.

B. DD Waivers

Deputy Director of Clinical Operations Barbara Wadley-Young shared that the Slot Allocation Committee is meeting on October 24th to assign slots to the final group of individuals. The teams expect that, within two to three weeks after this, all individuals will have support coordinators assigned, who will handle the enrollment and preparation for services. Current hiring numbers look promising, though they'll be monitoring closely for any pressure points in the upcoming quarter, as this year marks the first instance of back-to-back high allocation numbers.

Additionally, they are awaiting a response from the Assistant Commissioner on a request for assistance. The Assistant Commissioner has offered to provide training for new staff and has been asked if they can also assist with intake and possibly some monitoring processes. This

support would be instrumental in managing the high volume of activities associated with the waiver startup.

C. County, Regional, State and Cross Agency Initiatives

Executive Director Daryl Washington provided updates on developments at both regional and state levels. Recently, the governor announced an additional $4 million in one-time funding to build out crisis-receiving centers in the region. However, new funding has yet to be allocated for ongoing operational costs. Mr. Washington remains in discussions with the state and is optimistic that the state will offer support once discussions reach the stage of location purchase or similar needs. Key areas of uncertainty include the amount of state assistance available for both property acquisition and building renovations and ongoing operational costs for these programs.

As the fiscal agent for the regional office, the regional office is entirely state-funded, allowing for certain flexibilities not available within the CSB. Additionally, the regional office has approximately $5.5 million in retained earnings from state funds, which could potentially support these initiatives. Despite being just one vote in regional funding decisions, Fairfax has a significant 48% share of the region, which could influence allocations. Some regional projects, such as the development at the former Gander Mountain building near Potomac Mills Mall, are already fully funded for construction. Current efforts are focused on securing funds for youth services, adult services in Fairfax, and any remaining unmet building needs in Loudoun. Mr. Washington expressed confidence that additional funds will be forthcoming, but ongoing operational costs remain a primary focus.

D. Legislative Update

Board Chair Dan Sherrange reported that Board member Jim Gillespie, Deputy Director Barbara Wadley-Young, and he met with Senator Saddam Salim. The meeting was very productive, as the senator was open and engaged, showing a keen interest in CSB. He expressed a willingness to carry out a budget amendment for one of their initiatives in the upcoming legislative process, specifically regarding the waiver and rate issues. They discussed the possibility of adding funding to the Fairfax County budget to address these needs. Mr. Sherrange mentioned that they would follow up with the senator if they decided to pursue this route.

Additionally, they met with Delegate Paul Krizek, accompanied by Board Secretary Andrew Scalise and Barbara Wadley-Young. Delegate Krizek is a strong supporter of CSB and has a good understanding of its challenges, given his position on the Appropriations Committee. He expressed readiness to support any budget amendments that might arise and showed interest in several other topics discussed during the meeting. Overall, Dan felt that both meetings were beneficial in advancing their initiatives.

Board Member Andrew Scalise noted that one key takeaway from their recent meeting was the value of one-on-one discussions, which allow for varied perspectives. Each delegate

approaches issues differently, which can help when communicating with their colleagues. Delegate Krizek, in particular, emphasized the importance of illustrating the costs of inaction. While adding to their budget is essential, he stressed the need to demonstrate to his colleagues in the southern part of the state why Fairfax requires this differential. He pointed out that it would be helpful to show what the state could end up paying if this differential isn't implemented. He even suggested contacting a colleague from the southern region to gain further insights. This perspective was valuable for framing their message in a way that might resonate with other delegates.

Board Member Jim Gillespie reported on the meeting with Delegate David Bulova, where he was accompanied by Board member Karen Abraham and Deputy Director Jean Post. During the meeting, Delegate Bulova suggested they reach out to Delegate Mark Sickles and emphasized the importance of staying informed about what will be included in the governor's budget. He noted that it would benefit them to know whether their initiatives would be part of the budget, making it easier to advocate for their needs. Jim mentioned that he began reviewing the annual report during the meeting. He noted that Delegate Bulova has a solid understanding of CSB's operations and was very supportive of their efforts.

Board Member Karen Abraham noted that Delegate Bulova seemed to appreciate that they approached him with targeted priorities rather than a lengthy list of requests. He expressed that this focused approach was very helpful. Delegate Bulova inquired whether their initiatives would be included in the governor's request or if they would require an amendment, stating that he preferred to play offense rather than defense.

Board Member Andrew Scalise reported meeting with Delegate Kathy Tran, during which Board member Bettina Lawton and Executive Director Daryl Washington joined him. The meeting was very productive, and Delegate Tran also referred them to Delegate Sickles. Andrew found it surprising that there appeared to be a lack of understanding regarding the significant difference in their waitlist compared to other areas in the state. He noted that it took some time for Delegate Tran to grasp the implications of the 1,200 new waivers in Fairfax, especially in contrast to other locations that might receive up to five. Andrew felt this point needed to be emphasized more clearly, as it didn't seem fully perceived.

Nonetheless, Delegate Tran was very helpful; each meeting provided a unique perspective. For her, the key concern was understanding the broader impact on Fairfax County services. She inquired about the consequences of not increasing rates or reimbursing 60 support coordinators, emphasizing that with these resources, they could fulfill their obligations under the waiver program, regardless of how many waivers were issued.

E. Electronic Healthcare Record Update

Healthcare Systems Director Jennifer Aloi provided updates on their recent progress. She noted that the contracts with NextGen Healthcare had been signed; if anyone missed the last meeting, the contract was finalized on September 25th. The official kickoff with NextGen

Healthcare is scheduled for November 7th, including a three-hour session featuring an executive alignment component. Although the official kickoff is still to come, they have already begun work on the project. A hosting session was held with the team responsible for setup, during which they discussed parameters and started gathering information.
A list of users within the organization has been compiled, and most sub-users have already signed up for what is being termed "look and feel" training. This training focuses not on the system itself but on how the NextGen products will integrate and function together, providing insights for frontline staff and revenue processes. This approach aims to help super users understand how the various components connect as they design and configure the system. A few staff members will attend the Next Step annual conference next week to participate in behavioral health-focused sessions and other relevant presentations.

F. CSB Strategic Plan

Director of Administration & Policy Shweta Adyanthaya presented the Strategic Planning Overview and Process, aiming to provide a brief overview while inviting input, thoughts, impressions, and feedback on involvement. She noted that the last iteration of the CSB strategic plan was developed in 2018. In creating the next generation of the plan, they are considering the county-wide strategic plan, the Community Engagement Framework, priorities specific to the CSB, and well-written Health and Human Services plans.

It was emphasized that a well-crafted plan effectively aligns stakeholders around key priorities, facilitates strategy communication, and engages internal and external stakeholders to motivate and retain their involvement.

Currently, the process is in the gathering input stage, which involves conducting a SWOT analysis, SKEPTIC assessment, visioning sessions, Future Wheel exercises, surveys, interviews, and focus groups. The next steps include analyzing the data to identify themes and developing clear goals and objectives that are Specific, Measurable, Achievable, Relevant, and Time-bound (SMART). Ensuring these goals align with the CSB's mission, vision, and values is crucial.

The action plan will translate the strategic goals into a detailed framework, defining the steps, resources, and timelines required to achieve each goal. Tasks will be assigned to key Subject Matter Experts (SMEs), milestones will be set to track progress, and key performance indicators will be established to measure success.

7. Matters of the Board

Board Chair Dan Sherrange reminded the board members to be aware of the upcoming meetings in November and December, considering the holiday season. He noted that the meetings have been scheduled earlier due to the short month and end-of-year holidays. He suggested that the Board Clerk, Sameera, send out the calendar since the November and December meetings are irregularly scheduled.

He also shared that the Time to Treatment numbers is the best they've been in a long time, which is very important. He urged the board members to inform their supervisors that the time to treatment numbers reported to the state and a favorable vacancy rate are very positive. He expressed confidence that they keep everything moving forward and stated that the financial report looks great.

Additionally, he mentioned that the visit to the jail was an incredible experience and requested that the CSB staff continue to organize similar opportunities for them to learn and engage with the activities taking place. He expressed gratitude to Board Member Captain Dan Wilson for his support in facilitating the visit, praising the efforts of both his team and the sheriff's team for a job well done.

8. <u>Committee Reports</u>

A. Service Delivery Oversight Committee

Committee Chair Evan Jones reported that he became ill in the middle of the month, which prevented him from leading the meeting. However, Board member Jim Gillespie stepped in at the last minute and did an excellent job. During the meeting, they had a presentation on supported housing, which Evan described as a fantastic program that significantly helps keep people from returning to therapy or the hospital. He highlighted how effectively the program supports individuals in moving forward therapeutically. He also noted that with each meeting, he continues to learn more about the CSB and its great work despite having been involved for many years. **The next Service Delivery Oversight Committee meeting is Wednesday, December 4, 2024, at 5:00 PM.**

B. Compliance and Executive Committee

Chair of the Compliance Committee, Dan Sherrange noted that Director of Quality Improvement Joan Rodgers presented the CSB Board Audit Report, the CSB Board CAP Report, and the CSB Board Annual Training Data. **The next meeting of the Compliance Committee will be held on Wednesday, November 6, 2024, in conjunction with the Executive Committee meeting starting at 4:00 PM.**

C. Fiscal Oversight Committee

Committee Chair Andrew Scalise provided a brief update on the October meeting. He noted that Board Chair Dan had already covered the statistics showing that vacancies and treatment times are decreasing, which is a positive trend. From a financial perspective, Andrew highlighted the significance of the Fiscal Oversight Committee's work, particularly for taxpayers, as it illustrates the real impact of these improvements on the budget. He mentioned that in previous years, they reported significant unspent funds, such as $40 million or $20 million, but now that spending is occurring, they can deliver the desired services. While this is a positive message, Andrew acknowledged that it also brings challenges. He expressed concern about potential future budget issues as demand for services increases. Specifically, he raised concerns about the hiring and retaining support coordinators in light of new waivers. He emphasized the importance of monitoring whether they are experiencing a high turnover of staff, which could hinder their ability to maintain

adequate staffing levels. Andrew indicated that they would continue to assess these issues monthly. **The next Fiscal Oversight Committee meeting is Thursday, November 14, 2024, at 4:00 PM.**

9. Closed Session

AT 6:49 PM, BOARD CHAIR DAN SHERRANGE MOTIONED TO MEET IN CLOSED SESSION WITH ONLY BOARD MEMBERS AND CSB STAFF. THIS MOTION WAS SECONDED BY COMMITTEE MEMBER BETTINA LAWTON AND APPROVED BY ANDREW SCALISE, DARIA AKERS, EVAN JONES, KAREN ABRAHAM, SRILEKHA PALLE, SHEILA COPLAN JONAS, PATRICIA ZISSIOS, JIM GILLESPIE, CAPTAIN DANIEL WILSON, RON FITZSIMMONS, ANNE WHIPPLE AND BETTINA LAWTON.

During this closed session, the board will discuss specific legal matters related to a reimbursement issue, as permitted by Virginia Code Section 2.2-3711(A)(8).

Committee Members participated in person.

Board members Daria Akers, Srilekha Palle, and Jim Gillespie left at 7:28 pm while the closed session was still in progress.

AT 7:45 PM BOARD CHAIR DAN SHERRANGE MOVED THAT THE COMMITTEE RETURN TO A PUBLIC, OPEN SESSION MEETING; THIS MOTION WAS SECONDED BY BOARD MEMBER BETTINA LAWTON.

At 7:45 PM, the Board reconvened the open session. At that time, a motion was offered, seconded, and passed with each member certifying, to the best of their knowledge, that only public business matters were lawfully exempted from open meeting requirements prescribed by the Virginia Freedom of Information Act and only such general business matters identified in the motion to convene a closed meeting were heard, discussed, or considered by the Community Services Board in closed session.

10. Adjournment

A motion to adjourn the meeting was made by Board Member Bettina Lawton and seconded by Board Member Patricia Zissios. The motion was approved unanimously, and the meeting was adjourned at 7:46 PM.

Date Approved

CSB Board Clerk

FAIRFAX - FALLS CHURCH
Community Services Board

Behavioral Health Outpatient Adult Program Services (BHOP)

Eileen Bryceland, LCSW, CSB Director
October 23, 2024

AGENDA ITEM
#6A.1

Agenda

FAIRFAX - FALLS CHURCH
Community Services Board

- About us
  - Who we are
  - What we do
  - Where we are
  - Highlight programs
- Budget, Metrics, Positions
- Looking ahead

Who We Are
Staffing=132 positions

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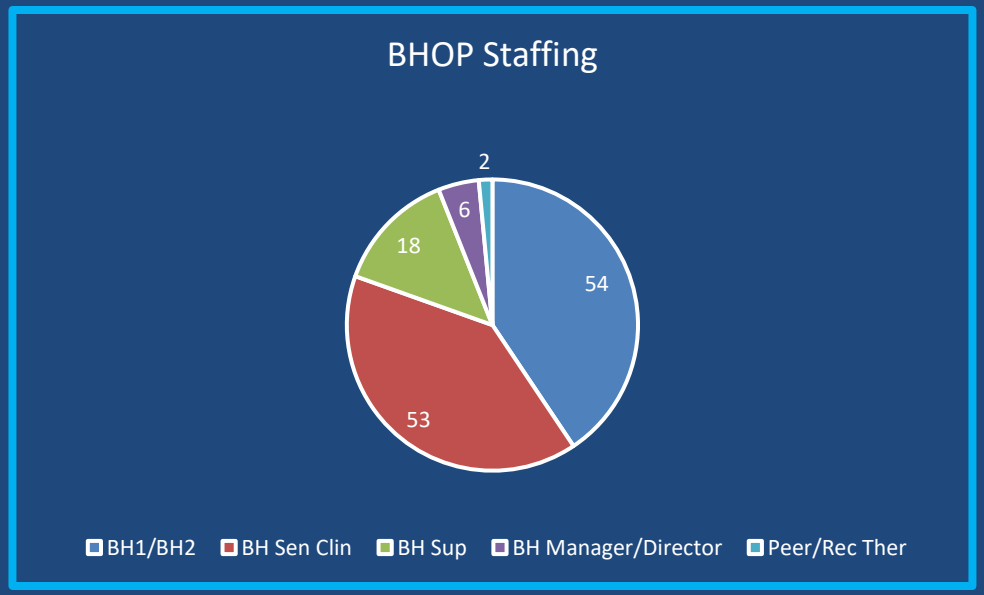
Community Services Board

Leadership Team
- 1 Director
- 5 Behavioral Health Managers
- 18 BH Supervisors

Line Staff
- 54 staff are BH1 or BH2 (Behavioral Health Clinicians)
- 53 staff are BH Senior Clinicians
- 1 Peer Support Specialist
- 1 Rec Leader III
- Prescribers – 30 part-time and full-time

123 Filled Positions
9 Vacant Positions



What We Do

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Community Services Board

- Outpatient Case Management
- Outpatient Mental Health Therapy
- Intensive Outpatient SUD Treatment Programs (ARTS 2.1)
- Turning Point Program for Young Adults
  - First Episode Psychosis and Clinically High Risk
- Intensive Stabilization Unit
- Psychiatry and Nursing collaboration

What We Do

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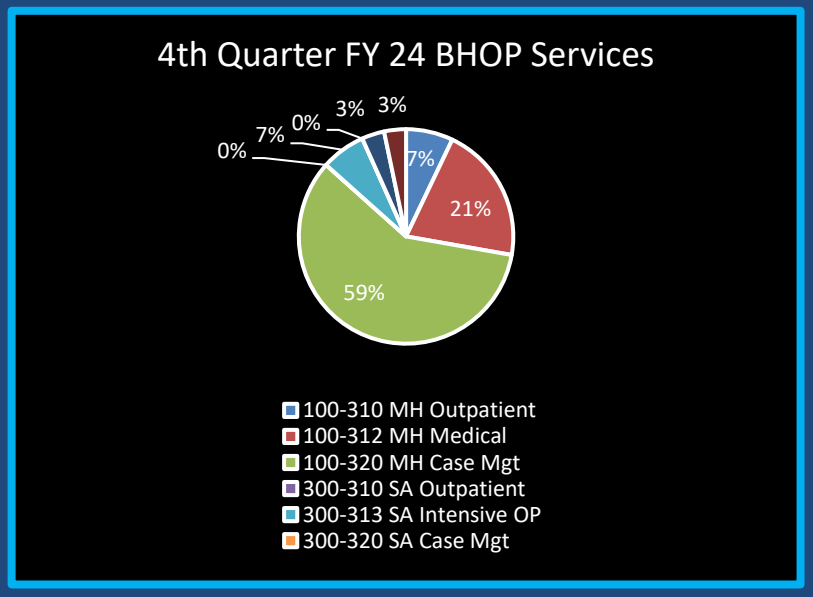
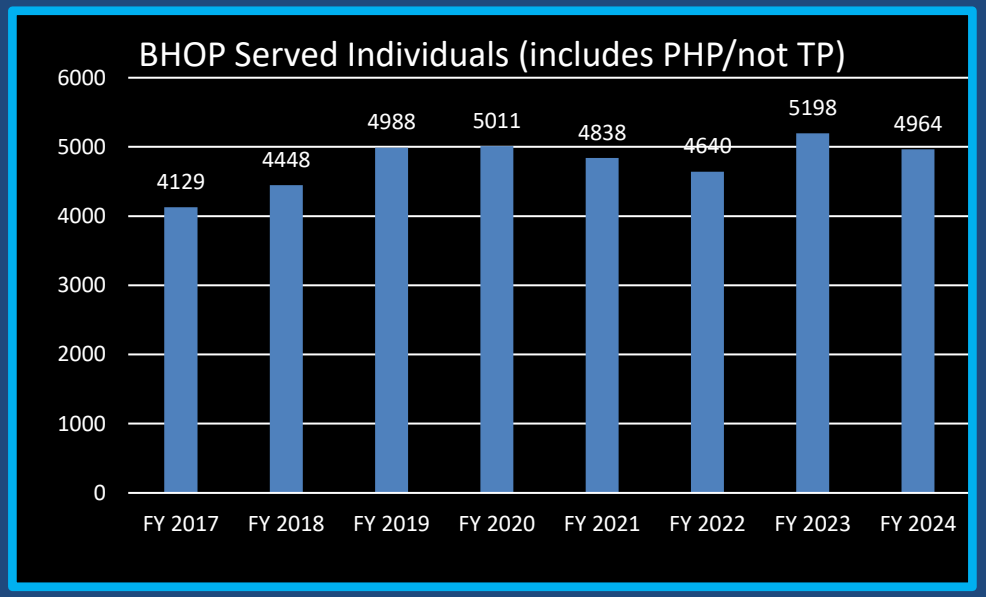
Community Services Board

Our priority population is SMI/ SUD/ DD underinsured individuals. Case Management and medication are our primary function. Outpatient treatment is growing with STEP VA Outpatient and ARTS /IOP.

- In FY 24: BHOP Served 4,732 individuals across 4 outpatient and 3 residential sites.
- In FY 24: BHOP Served 161 individuals in the First Episode Psychosis Program.
- In FY 24: BHOP Served 232 individuals in the Intensive Stabilization Unit.





BHOP Adult Team Locations

FAIRFAX - FALLS CHURCH
Community Services Board

14150 Parkeast Circle
Chantilly, VA 20151
703-968-4000

8119 Holland Road
Alexandria, VA 22306
703-360-6910

- Eighteen multidisciplinary outpatient teams
- Evidence based treatment: DBT, TREM, and CPT (STEP VA OP)
- Behavioral Health Case Management (STEP VA CM)
- Medication Management and Addiction Medication
- 7 Intensive Outpatient SUD Groups
- Older Adult Specialists
- Hearing Impaired Services/American Sign Language Services
- Neighborhood Health and Healthworks Partnership

8221 Willow Oaks Drive
Fairfax, VA 22031
703-559-3000

1850 Cameron Glen Drive
Reston, VA 20190
703-481-4100

BHOP Adult Surveys

14150 Parkeast Circle
Chantilly, VA 20151
703-968-4000

"I am happy with the services I have received from the Fairfax-Falls Church Community Services Board (CSB)." = 88% (N=293)

"If someone needed services for mental health, substance use, and/or a developmental disability, I would recommend the CSB.". = 87% (N=292)

Qualitative comments:

- *I recommend CSB all the time to people. I give out the emergency number and the regular number.*
- *CSB is an outstanding place for people with mental illness to get better.*
- *Thankful that the CSB has helped me a lot along my journey.*
- *I'm out of proper words to describe how deeply grateful I am for the counseling and guidance I've been provided for the past 2.5 years.*
- *The services that the case managers provide are crucial to the outcomes of the medication management.*
- *I pray God to bless all the staff of the CSB and give them long life to continue their good work of charity. Thank you. GOD BLESS AMERICA.*

8221 Willow Oaks Drive
Fairfax, VA 22031
703-559-3000

8119 Holland Road
Alexandria, VA 22306
703-360-6910

1850 Cameron Glen Drive
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703-481-4100

Community Partnerships

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Community Services Board

- **The Lincolnian Assisted Living**
  - Serves 30+ out of 52 residents with 3 part-time staff. In partnership with CSM, Fairfax Department of Housing and DFS.
- **Stevenson Place Assisted Living**
  - Operated by Pathway Homes, Inc., an assisted living facility (ALF), serves 37 residents, up to 24/7 support.
- **New Horizons**
  - Operated by Gateway Homes, Inc, an intensive community-based residential treatment home, serves 16 residents, 24/7 support.

4710 N Chambliss St,
Alexandria, VA

4113 Stevenson Street
Fairfax, VA

8247 Gregory Drive
Alexandria, VA

Intensive Stabilization Unit
Survey Outcomes

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Community Services Board

Since July 1, 2023, 106 individuals have been treated in ISU.

SATISFACTION STATEMENT	AVERAGE RESPONSE RATING (1-4 Strongly Disagree – Strongly Agree)
I am satisfied with the help I have received from my clinician/treatment team.	3.92
The services I have received have helped me to deal more effectively with my own recovery.	3.76
I feel respected and supported by my clinician/treatment team.	3.88
I have increased my coping skills as a result of the services I received.	3.66
The groups that I attend are helpful and support my recovery.	3.73

"It helped me process and challenge thought processes and traps I had been stuck in that were keeping me from growth and effectively managing my emotions."
- ISU Graduate May 2024

ISU data – 1/23/23 – 5/22/24 (from start of ISU program launch)

Intensive Stabilization Unit

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Community Services Board

- **January 23, 2023:** ISU program launched as a fully virtual service.
- **March 2024:** ISU program pivoted services to include both telehealth options and in-person services at the Gartlan Center.

The ISU program has been a successful intervention that allows for more flexibility to continue to meet the needs of the community.

Currently working with the CSB Fiscal Team to transition budget from being separate to integrated into the rest of the BHOP program. This allows for services to be integrated with state performance contract reporting.

Turning Point
Functional Outcomes and Staffing

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Community Services Board

- Since August 2018, 619 individuals have been referred to the program with 285 individuals being served.

- Once enrolled, individuals in the program have experienced:
  - 82% reduction in the number of hospital bed days
  - 89% reduction in the number of days spent in jail
  - 65% of individuals have enrolled/re-enrolled in educational programs (68% returning to full-time)
  - 52% of individuals have obtained employment (40% working full-time)

TP – Functional Outcomes reviewed clients currently enrolled in the program as of August 2024.

Turning Point
Functional Outcomes

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Community Services Board

- Quality of Life

(How satisfied are you with your life as a whole on a scale of 0-10?)

- At baseline: 5.6
- At 2 Years in the program: 8

"Now I feel like I have all the tools necessary to live a normal life and manage my symptoms. My parents and I have a healthy relationship, and I feel like I have a lot of friends to lean on for support. I look forward to getting my masters at Shenandoah as well as my wildlife rehabilitation certification in the coming years. I often refer to Turning Point as the net which caught me from falling down a giant well." **-Turning Point Alumni 2023**

TP –The quality of life data came from a review of all clients enrolled from 2022-August 2024.

BHOP Adult Team Budget

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Community Services Board

- **FY 2024 Overall Revenue actual:** $7,266,146

  Expenditures actual: $17,809,146

- **FY 2024 Turning Point Grant:** $1,007,742
- **FY 2024 Clinically High Risk for Psychosis Program (CHR-P):** $400,000

Note: TP – FEP Grant Dollars = 10% set aside of general assembly budget. CHRP money is SAMHSA grant money fixed for four years. We are in year three.

BHOP Looking Ahead

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Community Services Board

- Retention feedback from staff
  - Upward mobility through seamless grade steps in addition to promotions
  - Training and educational opportunities
  - Supervision towards licensure
  - Reduced paperwork burden
- TREATT (The Rapid Engagement and Assessment Transition Team)
  - Monitoring services
  - Improving time to treatment and community transition
    - Neighborhood Health/Healthworks/JSSA etc.
- STEP VA CM
- STEP VA OP –Trauma focused care. Additionally growing evidence-based programming for OP therapy.

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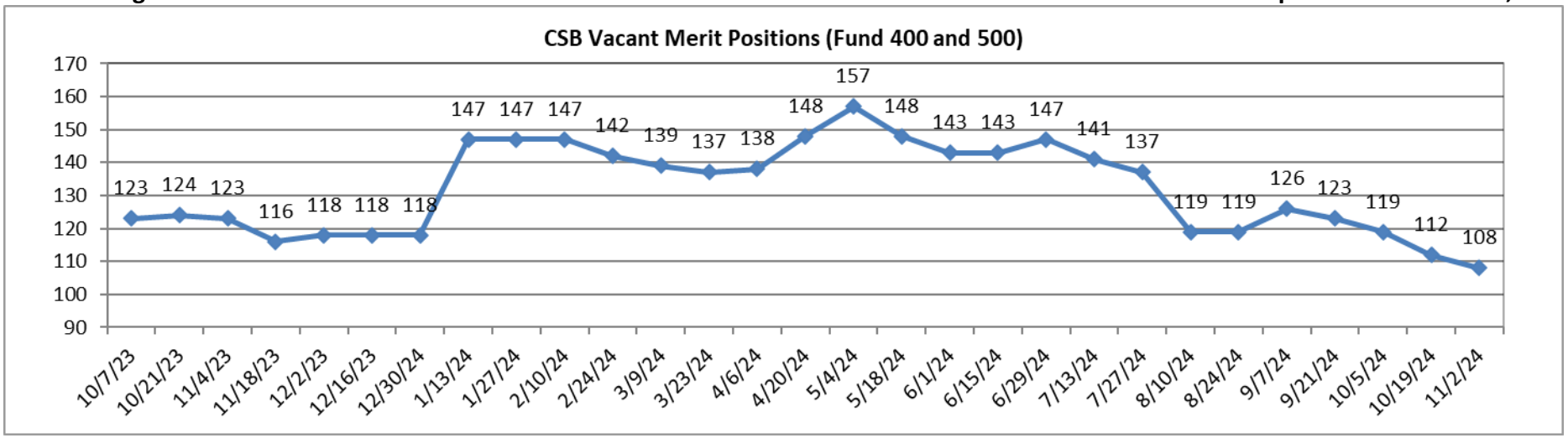
Community Services Board

Questions?

Eileen Bryceland, CSB Division Director
Eileen.Bryceland@fairfaxcounty.gov

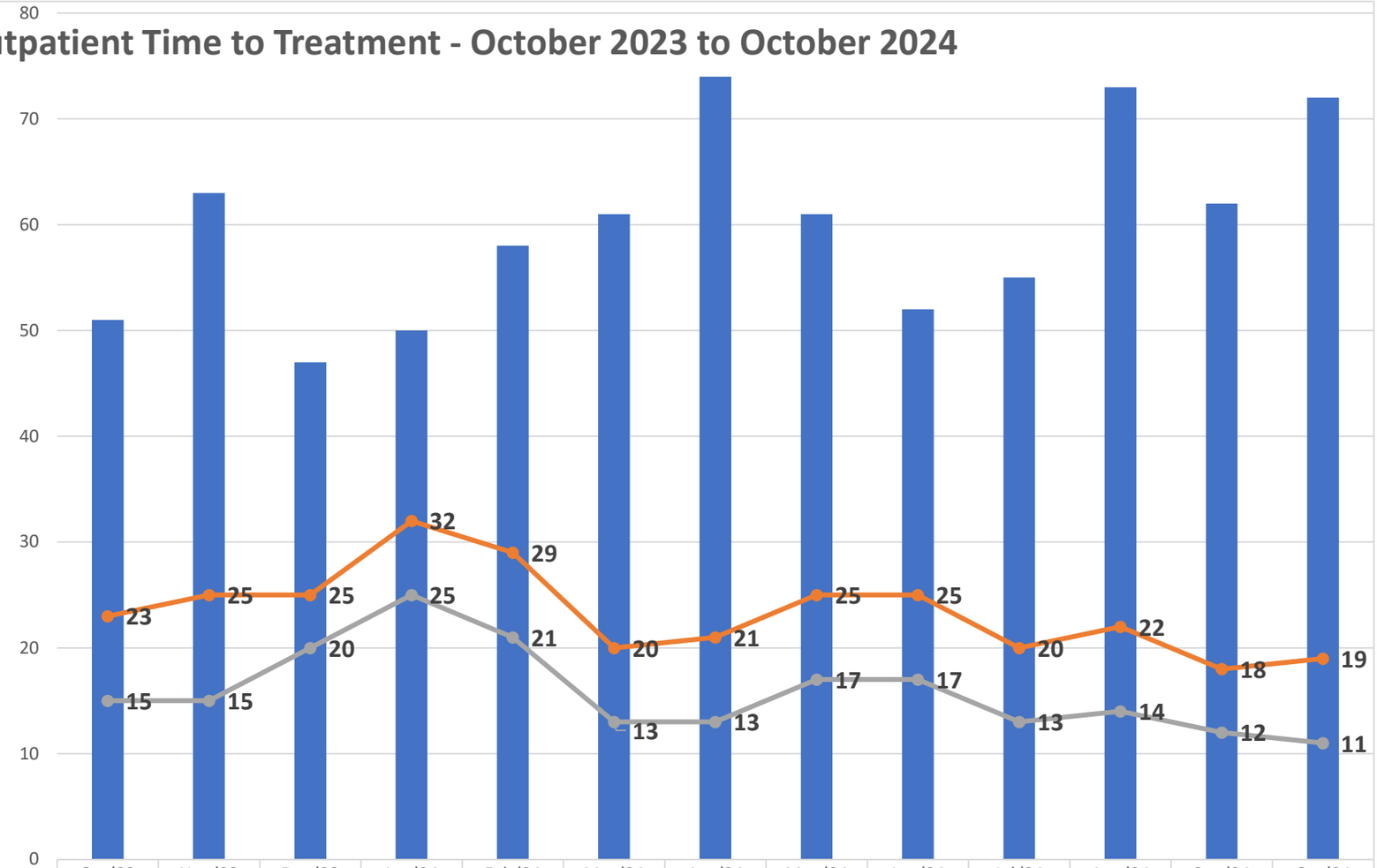


**Note: Increases in vacancies partially attributed to the establishment of 18 positions in January 2024, plus 10 established in April, another 8 in May, and 9 in June.*

Vacancies in critical areas* *includes all merit positions (all funds – regular 400 and grant 500)

Division	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May /Jun	Jul	Aug	Sep	October		November	
Emergency Svcs/MCU	10	11	11	12	13	12	13	10	7	5	5	5	2 CIS 2 Peer Support Spec 1 BHS II	5	1 CIS 2 Peer Support Spec 2 BHS II
BHOP	8	7	8	10	9	10	9	9	6	6	9	4	4 BHS II	8	4 BHS II 4 BH Sr Clin
Youth & Family – Outpatient Svcs	4	4	4	17	18	18	20	17	16	13	11	8	4 BH Sr Clin 3 BHS II 1 Peer Support Spec	8	3 BH Sr Clin 4 BHS II 1 Peer Support Spec
Support Coordination	6	5	7	10	8	6	13	17	24	20	19	19	19 DDS II	14	14 DDS II
Jail & Court-Based Svcs	6	8	9	13	12	9	14	11	9	8	11	8	3 BHS II 2 BH Sr Clin 1 Peer Support Spec 2 BH Supv	8	2 BHS II 3 BH Sr Clin 1 Peer Support Spec 2 BH Supv
EAR	1	1	1	1	1	1	0	2	2	1	1	2	1 BHS II 1 BH Sr Clin	2	1 BHS II 1 BH Sr Clin

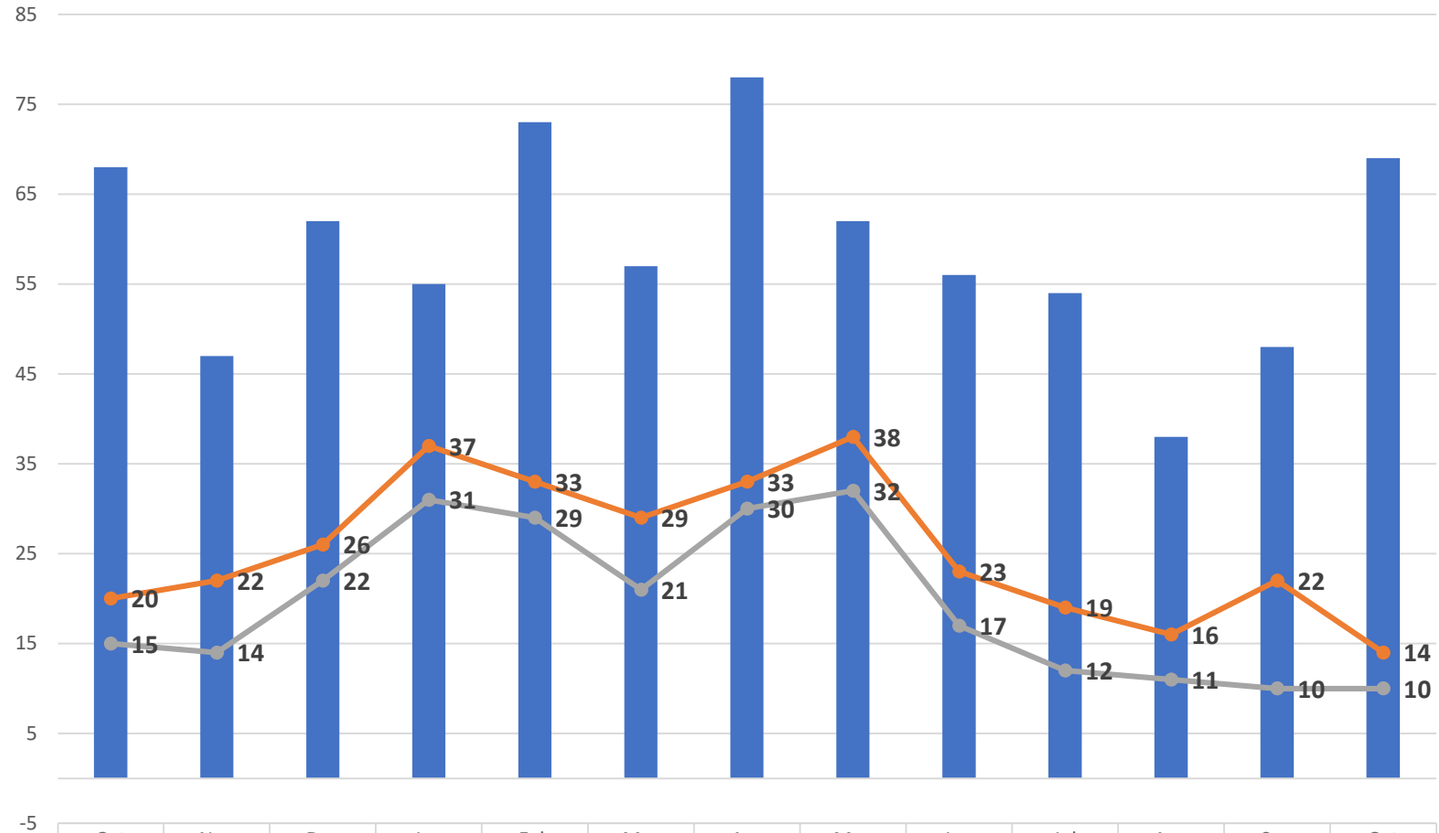
Adult Outpatient Time to Treatment - October 2023 to October 2024



	Oct '23	Nov '23	Dec '23	Jan '24	Feb '24	Mar '24	Apr '24	May '24	Jun '24	Jul '24	Aug '24	Sep '24	Oct '24
# Adults Who Attended 1st Treatment Appt	51	63	47	50	58	61	74	61	52	55	73	62	72
Average # Days from Assessment to Treatment	23	25	25	32	29	20	21	25	25	20	22	18	19
Average # Days from Assessment to 1st Available / Accepted Appt*	15	15	20	25	21	13	13	17	17	13	14	12	11

***Average number of days from Assessment to Date of First Available Appointment (if known) OR from Assessment to Date of First Accepted Appointment**

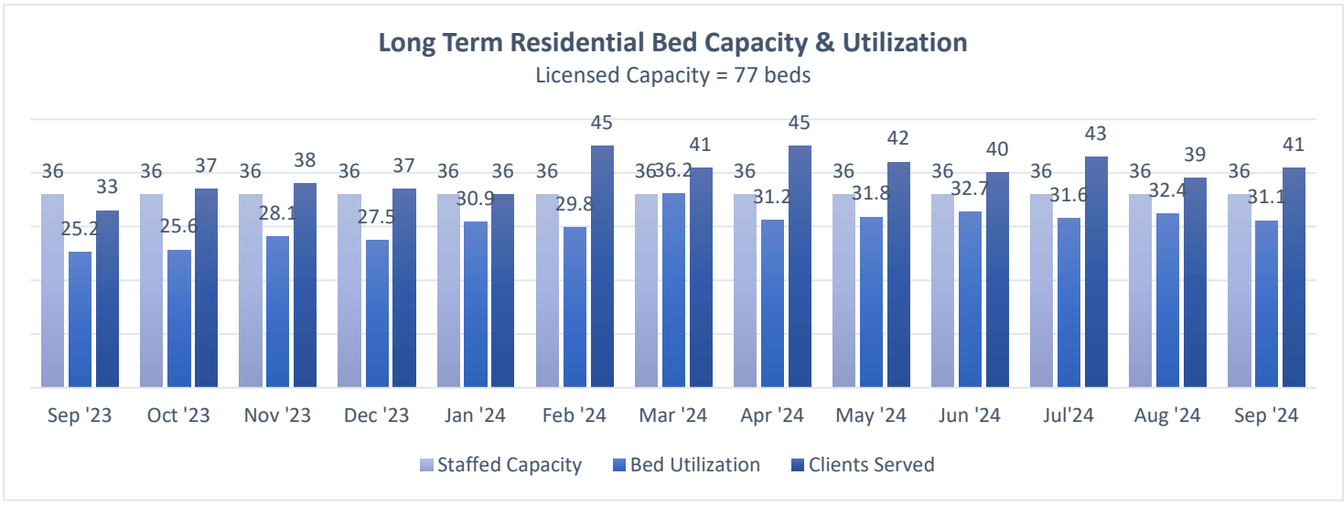
Youth Outpatient Time to Treatment - October 2023 to October 2024

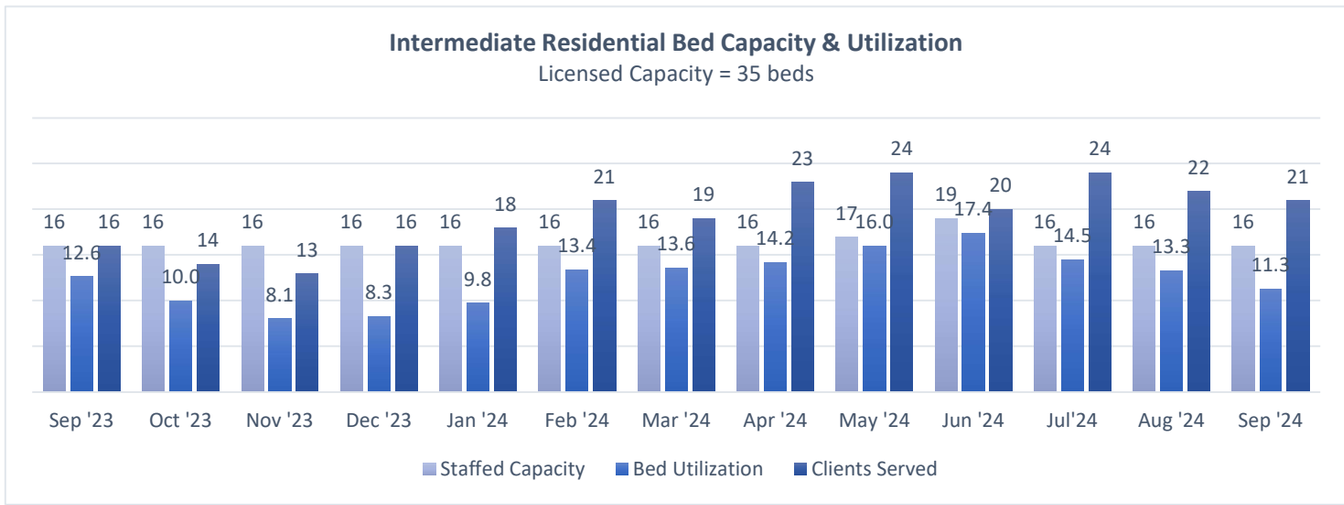


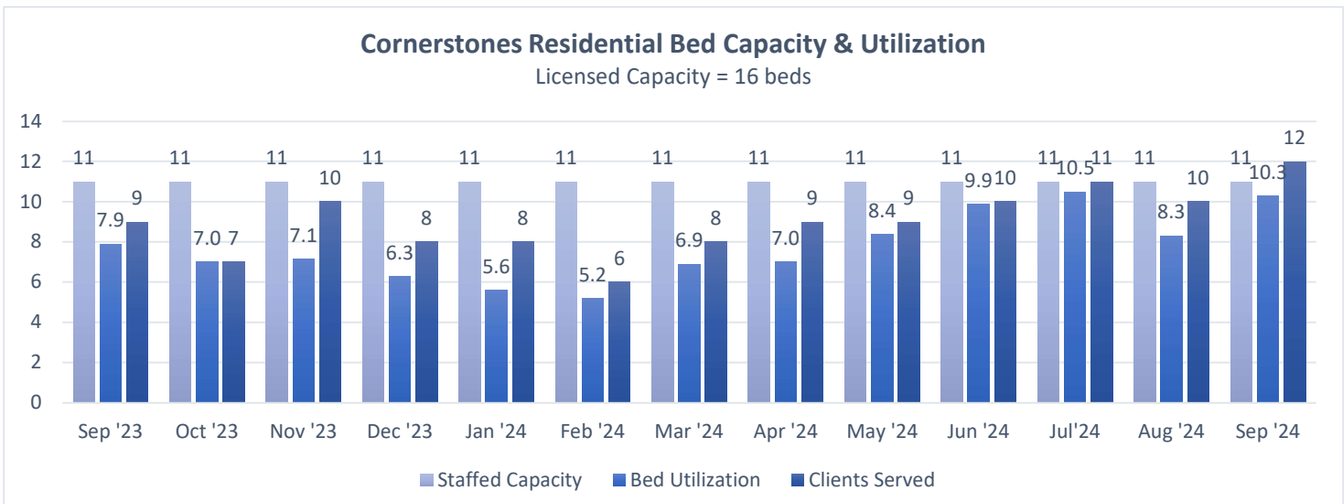
	Oct '23	Nov '23	Dec '23	Jan '24	Feb '24	Mar '24	Apr '24	May '24	Jun '24	Jul '24	Aug '24	Sep '24	Oct '24
# Youth Who Attended 1st Treatment Appt	68	47	62	55	73	57	78	62	56	54	38	48	69
Average # Days from Assessment to Treatment	20	22	26	37	33	29	33	38	23	19	16	22	14
Average # Days from Assessment to 1st Available / Accepted Appt*	15	14	22	31	29	21	30	32	17	12	11	10	10

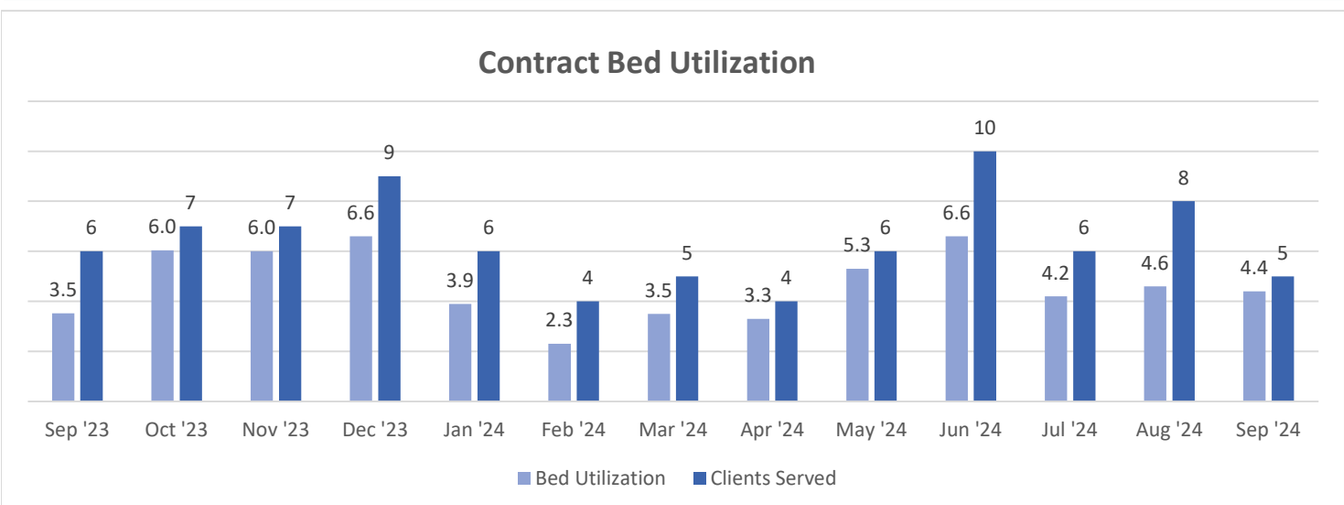
*Average number of days from Assessment to Date of First Available Appointment (if known) OR from Assessment to Date of First Accepted Appointment

SUD Residential Capacity & Utilization by Month - September 2023 to September 2024





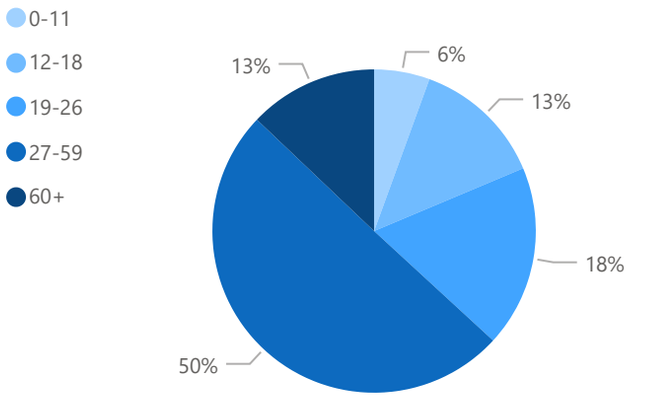




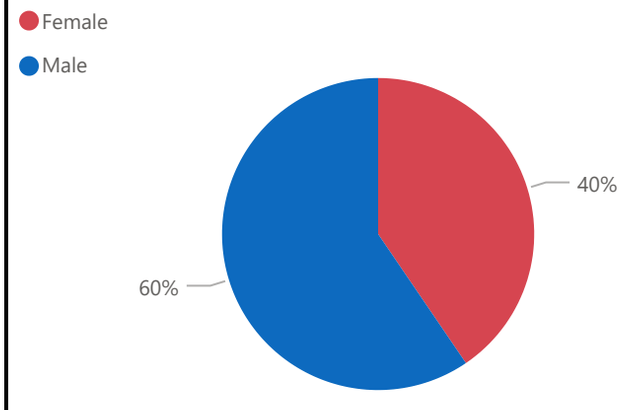
FAIRFAX - FALLS CHURCH
Community Services Board

CSB Status Report

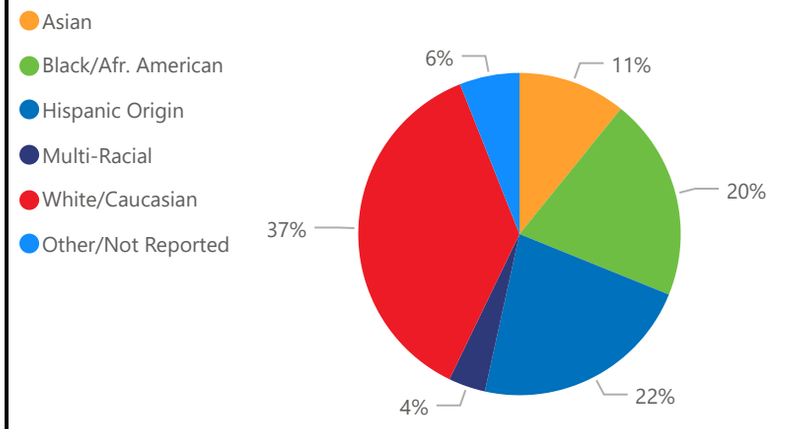
Age



Gender

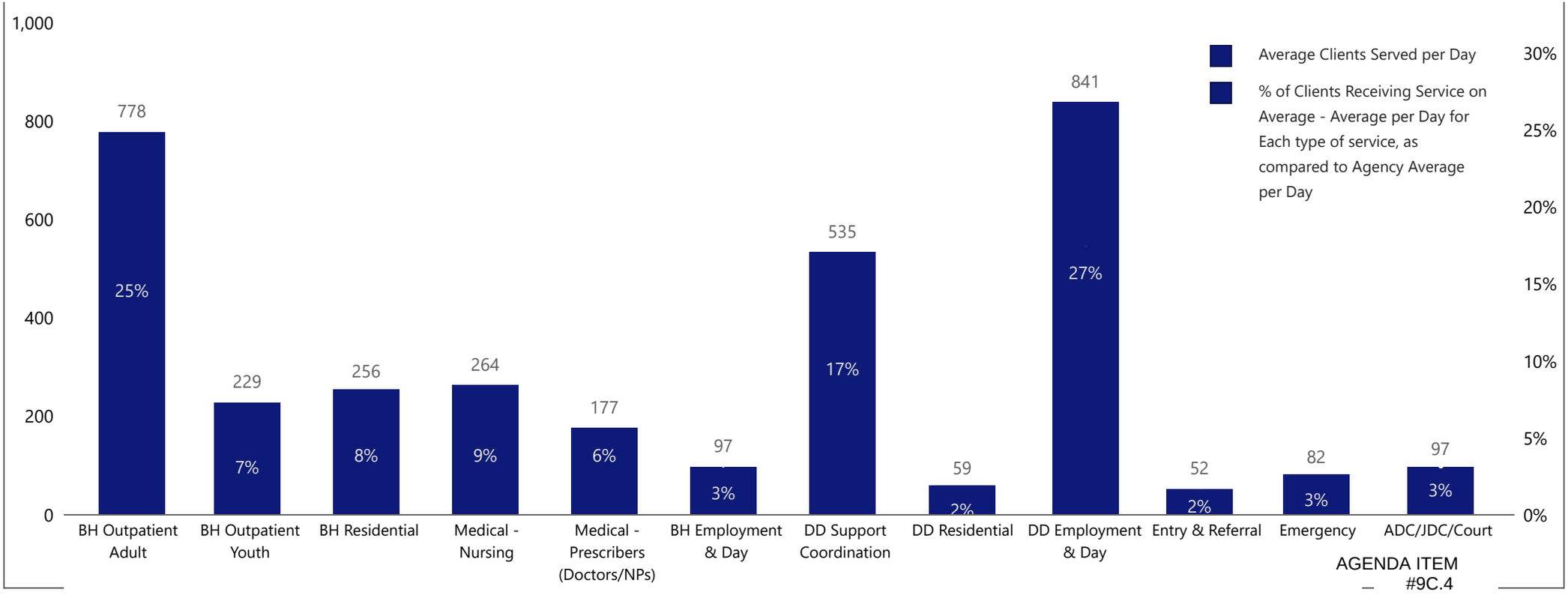


Race/Ethnicity



Average Clients Served per Day by Type of Service - September 2024

Agency Average Served per Day in September 2024 = 2,999



AGENDA ITEM
#9C.4

FAIRFAX · FALLS CHURCH Community Services Board

Individuals Served by Month by Type of Service Sep'23 - Sep'24

Service Area	Sep'23	Oct'23	Nov'23	Dec'23	Jan'24	Feb'24	Mar'24	Apr'24	May'24	Jun'24	Jul'24	Aug'24	Sep'24	Monthly Variance	Yearly Variance	# Served Past 12 Months
All Individuals Served	9,682	9,748	9,432	9,392	9,735	9,730	9,730	9,974	9,808	9,468	9,680	9,767	9,696	▼ -0.7%	▲ 0.1%	22,583
BH Outpatient Adult	3,149	3,220	3,217	3,209	3,343	3,354	3,375	3,428	3,397	3,376	3,492	3,469	3,388	▼ -2.3%	▲ 7.6%	5,957
BH Outpatient Youth	1,046	1,070	1,078	1,074	1,113	1,142	1,136	1,147	1,116	1,073	1,010	948	926	▼ -2.3%	▼ -11.5%	1,987
BH Residential	423	446	419	409	415	421	414	412	422	427	408	411	398	▼ -3.2%	▼ -5.9%	1,415
Medical - Nursing	1,385	1,453	1,378	1,314	1,381	1,366	1,449	1,444	1,359	1,374	1,483	1,497	1,421	▼ -5.1%	▲ 2.6%	3,637
Medical - Prescribers	2,416	2,680	2,446	2,339	2,593	2,579	2,534	2,573	2,546	2,314	2,453	2,549	2,411	▼ -5.4%	▼ -0.2%	6,313
BH Employment & Day	269	294	315	306	317	308	329	354	356	362	356	355	338	▼ -4.8%	▲ 25.7%	666
DD Support Coordination	2,800	2,693	2,603	2,616	2,741	2,730	2,725	2,760	2,717	2,651	2,803	2,821	2,807	▼ -0.5%	▲ 0.3%	5,272
DD Residential	79	78	78	78	78	76	75	72	72	65	62	59	59	= 0.0%	▼ -25.3%	78
DD Employment & Day	1,198	1,213	1,215	1,211	1,192	1,203	1,209	1,213	1,190	1,114	1,138	1,216	1,217	▲ <0.1%	▲ 1.6%	1,378
Entry & Referral (EAR)	738	649	653	571	608	668	656	718	642	594	594	614	652	▲ 6.2%	▼ -11.7%	5,562
EAR Screenings	495	433	460	386	444	470	483	513	456	421	385	426	468	▲ 9.9%	▼ -5.5%	4,522
EAR Assessments	171	164	202	147	200	196	188	199	181	174	166	191	203	▲ 6.3%	▲ 18.7%	2,107
Emergency	997	1,051	937	1,005	1,067	1,031	1,001	1,068	1,059	984	988	1,035	1,036	▲ <0.1%	▲ 3.9%	7,397
ADC/JDC/ Court	685	696	621	614	652	638	699	701	730	624	672	675	655	▼ -3.0%	▼ -4.4%	2,976

* Monthly variance compares current month to previous month; Yearly variance compares current month to the same month in previous calendar year (Ex: May 2021 compared to May 2020). Number Served Past 12 Months is an unduplicated count of clients served in each area in the 12 months prior to end of the reporting period (ex: June 2021 - May 2021).

Service Definitions	
All	Includes all individuals receiving services from the Community Services Board. Includes services for people of all ages who have mental illness, substance use disorders and/or developmental disabilities.
BH Outpatient Adult	Individuals receiving services from adult outpatient behavioral health programs. Includes the following service areas/programs: Behavioral Health Outpatient (BHOP) - MH Outpatient, MH Case Management, SUD Intensive Outpatient, Turning Point, Partial Hospitalization; Intensive Community Treatment - Intensive Case Management, PACT, Discharge Planning, PATH; Jail Diversion; Medication Assisted Treatment. Includes individuals receiving engagement, monitoring and treatment services.
BH Outpatient Youth	Individuals receiving services from youth behavioral health outpatient programs. Includes the following service areas/programs: Youth & Family Outpatient - MH Outpatient, MH Case Management, SUD Outpatient; Youth & Family Intensive - Wraparound Fairfax, Resource Program, Youth Discharge Planning. Includes individuals receiving assessment, monitoring, and treatment services.
BH Residential	Individuals receiving services from behavioral health residential programs. Includes the following service areas/programs: Supportive Community Residential - directly operated and contracted residential services; SUD Residential Treatment - Crossroads, Cornerstones, A New Beginning, New Generations; Youth Residential - Leland House; Wellness Circle Residential Crisis Stabilization, Fairfax Detoxification.
Medical - Nursing	Individuals receiving Nursing services in an outpatient setting.
Medical - Prescribers	Individuals receiving services from a prescriber (psychiatrist or nurse practitioner). Services are provided in a variety of treatment settings, including outpatient, residential, assessment, and emergency services.
BH Employment & Day	Individuals receiving behavioral health individual or group supported employment services.
DD Support Coordination	Individuals receiving developmental support coordination services. Includes individuals receiving targeted case management, monitoring, and assessment services.
DD Residential	Individuals receiving developmental disability residential services. Includes directly operated group homes and apartments, and locally funded contracted residential placements.
DD Employment & Day	Individuals receiving developmental day support services; individual, group, or sheltered employment services; and self-directed services. Includes both waiver and locally-funded services.
Entry & Referral (EAR)	Individuals receiving behavioral health entry and referral services. Includes Adult & Youth walk-in screening and assessment clinical services, case coordination, and call center referrals.
EAR Screenings	Individuals receiving behavioral health screening services at Entry & Referral.
EAR Assessments	Individuals receiving behavioral health assessment services at Entry & Referral.
ADC/JDC/Court	Individuals receiving CSB jail-based or court services. Includes CSB services provided at the Adult Detention Center, Juvenile Detention Center and adult participants in specialty court dockets (Veterans' Docket, Mental Health Docket, Drug Court).

Notes:

Page 1:

- Demographics – Typically little change in demographics over time. Reflects demographic characteristics of all individuals served in the reporting month.
- Average Clients Served per Day by Type of Service – Compares average served per day in each service area to the agency-wide average number served. Individuals may receive more than one type of service per day and totals may be greater than 100%.

Page 2:

- Numbers reported show the unduplicated number of clients served in each service area. Individuals may receive multiple services each month within a service area and may receive more than one type of service each month.
- The Monthly Variance compares the reporting month to the prior month. The Yearly Variance compares the reporting month to the same month in the previous calendar year.
- All Individuals Served – The number of individuals served overall is similar to the prior year. There have been recent increases in adult behavioral health outpatient, developmental support coordination, employment & day, medication assisted treatment, and emergency services programs, along with some decreases in residential programs that are reducing program census through attrition.
- BH Outpatient Adult – The number of individuals served has been trending higher over the past several months, with an 8% increase as compared to the prior year, partly due to increases in adult mental health case management & outpatient therapy, medication assisted treatment, ACT, and peer services.
- BH Outpatient Youth – This service area typically sees an increase in referrals and individuals served in the late fall that continues throughout the school year and drops off over the summer months. Compared to the prior year, there have been increases in the youth receiving medication assisted treatment services and peer services, along with recent decreased demand for mental health outpatient and case management services.
- BH Residential – The number of individuals served is 6% lower when compared to the prior year. Although there has been an increase in the SUD residential programs' census, there have been decreases in contracted residential supportive services and reductions through attrition in the Residential Intensive Care (RIC) program.
- Medical – Nursing & Prescribers (Psychiatrists & Nurse Practitioners) serve individuals in a variety of treatment settings. There is regular fluctuation in the number of clients served based on the needs of the clients.
- BH Employment & Day – The number of individuals served has been trending higher over the past several months, with a 26% increase as compared to the prior year, due to increases in the Supported Employment program as they've been able to fill vacant positions.
- DD Support Coordination – There is typically monthly variation based on quarterly and annual review cycles. The number of individuals served is expected to increase in the future due to the allocation of additional waivers in the upcoming year.
- DD Residential – Includes all individuals served in directly operated residential programs and locally-funded contract placements. The number of individuals served each month is trending lower overall due to reductions in the directly operated group home census and locally funded contract placements through natural attrition and new waivers. New residential placements through community partners are waiver funded.
- DD Employment & Day – There number of individuals served is similar to the prior month and year. This service area experiences reductions over the summer months due to the summer break for some self-directed services.
- Entry & Referral– The number of individuals served is trending higher, with increased demand for both adults and youth. Compared to July 2024, screenings and assessments have increased by over 22%. Entry & Referral is piloting a new model with the goal of improving efficiency, reducing client wait times, and placing focus on screenings to more quickly identify clients who need to move forward to an assessment, or link them to community resources when appropriate.
- Emergency – There is monthly fluctuation in the demand for Emergency services. All individuals who present for services are evaluated by Emergency services staff. There is a 4% increase compared to last year due to increased demand for Emergency Services, the expansion of the Co-Responder program, and an increase in the number of individuals served by the Community Response Team.
- ADC/JDC/Court – The number of individuals served has decreased slightly compared to the prior year, with fewer individuals served in both the adult & juvenile detention centers