

# FAIRFAX-FALLS CHURCH COMMUNITY SERVICES BOARD FISCAL OVERSIGHT COMMITTEE VIRTUAL MEETING

Dan Sherrange, Chair

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

Thursday, April 20, 2023, 4:00 PM

This meeting can also be attended via electronic access through Zoom

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# **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 March 16, 2023, Meeting Minutes	Dan Sherrange
6.	<ul><li>Administrative Operations Report</li><li>A. Caseload Capacity Report Challenges</li><li>B. Forensic Discharge Planning FY 2024</li></ul>	Daryl Washington
7.	Clinical Operations Report	Lyn Tomlinson
8.	Financial Status A. Modified Fund Statement B. FX-FC CSB Expenditures-Budget vs. Actuals	Elif Ekingen
9.	Open Discussion	Dan Sherrange
10.	Adjournment	Dan Sherrange

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

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# FAIRFAX FALLS-CHURCH COMMUNITY SERVICES BOARD FISCAL OVERSIGHT COMMITTEE VIRTUAL MEETING MINUTES MARCH 16, 2023

The CSB Fiscal Oversight Committee met in regular session at the Sharon Bulova Center, 8221 Willow Oaks Corporate Drive, Level 3, Room 3-314, West, Fairfax, VA 22031

# 1. Meeting Called to Order

Acting Committee Chair Andrew Scalise called the meeting to order at 4:04 PM

# 2. Roll Call, Audibility, and Preliminary Motions

PRESENT:BOARD MEMBERS: COMMITTEE CHAIR DAN SHERRANGE; JENNIFER ADELI;<br/>KAREN ABRAHAM; CAPTAIN DANIEL WILSON; BETTINA LAWTON; ANDREW<br/>SCALISE; SANDRA SLAPPEY-BROWNABSENT:BOARD MEMBERS: CLAUDIA VOLK

<u>Also present</u>: Executive Director Daryl Washington, Deputy Director of Clinical Operations Lyn Tomlinson, Deputy Director of Administrative Operations Jean Post, Acting Chief Financial Officer Tom Young, Director of Analytics & Evaluation Linda Mount 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.

# **UNANIMOUS CONSENT TO APPROVE AGENDA ITEM NO. 4**

# 5. Approval of Minutes

Committee minutes for February 16, 2023, Fiscal Oversight Committee Meeting was provided for review and revision. Committee Member Bettina Lawton noted action item No. 5; her name is misspelled under motions. Following this, Andrew Scalise motioned to approve the presented minutes and unanimously approved.

# 6. Administrative Operations Report

**Executive Director Daryl Washington** provided the CSB Human Resources Vacancy Report and noted that the grant and non-grant positions had been added to the report. We have a slight vacancy count overall but no significant trend. Human resources have approved the appeal for sign-on bonuses from \$5-10K for the Intervention Specialist position.

#### 7. <u>Clinical Operations Report</u>

**Deputy Director of Clinical Operations Lyn Tomlinson** provided the Adult Behavioral Health Outpatient BHOP Service Capacity Report and Support Coordination Service Capacity Report.

**Director of Analytics & Evaluation Linda Mount** presented the CSB Status Report and Quarterly Performance Measures.

#### 8. Financial Status

**Financial Chief Officer Tom Young** provided the Adult Behavioral Health Outpatient BHOP Service Capacity Report, Youth Outpatient Time to Treatment, and Support Coordination Service Capacity Report.

\*Committee Chair Dan Sherrange joined the meeting.

#### 9. Information Item

**Executive Director Daryl Washington** requested approval for the Fairfax-Falls Church Community Services Board to apply for and accept FY 2024 Congressionally Directed Spending from the Health Resources and Services Administration (HRSA) if funding is included in the final FY 2024 federal spending bill.

# MOVED BY BOARD MEMBER ANDREW SCALICE, SECONDED BY BOARD MEMBER DAN SHERRANGE TO APPROVE AGENDA ITEM NO. 9A

#### 10. Open Discussion

**Committee Member Andrew Scalise** reminded the committee that there would not be a CSB Fiscal Oversight Meeting in July 2023 to give the CSB Staff enough time to finalize their data and create financial reports.

UNANIMOUS CONSENT TO CANCEL JULY 20, 2023, FISCAL OVERSIGHT COMMITTEE MEETING

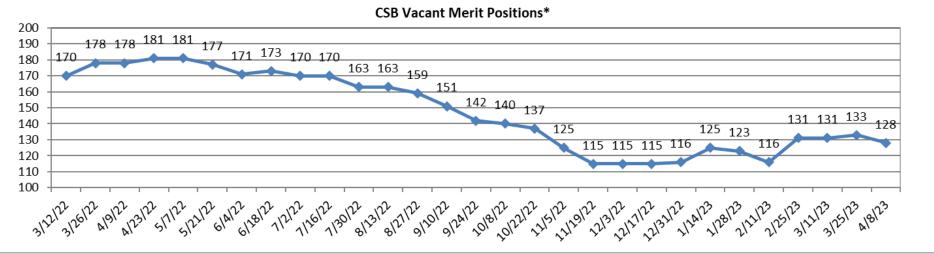
**Committee Chair Dan Sherrange** proposed that the December 14, 2023, Fiscal Oversight Committee meeting be held virtually.

# 11. Adjournment

MOVED BY COMMITTEE MEMBER ANDREW SCALISE TO ADJOURN THE MEETING AT 5:15 PM.

Date Approved

Clerk to the Board



\*Note: 1/14/2023 reflects a change in reporting to include vacancies in Funds 400 & 500. All data reported prior to 1/14/2023 represents only Fund 400

		areas	incia		herit po			5 1050	11ai 400 allu grafit 500)							
Service area	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan		February		March	
<b>F</b>													17 CIS		11 CIS	
Emergency Svcs/MCU	18	22	23	21	23	29	27	21	20	19	21	20	1 Human Srv Worker I	16	1 Human Srv Worker I	
5463/14160													2 Peer Supp Spec		4 BHS II	
													2 BHS II		4 BHS II	
Debeudenel Heelth											3 BH Sr. Clin		2 BH Sr. Clin			
Behavioral Health – Outpatient Svcs	21	27	18	17	16	8.5	14.5	10.5	7	5	8	8		10	1 BHN Clin/Case Mgr	
outputient oves															1 LPN	
													3 BH Supv		2 BH Supv	
Youth & Family –	11	12	13	11	9	7	5	4	3	3	2	3	3 BH Sr. Clin	5	5 BH Sr. Clin	
Outpatient Svcs	11	12	15		5	,	5	4	5	,	2	5		5		
Support	27	27	28	30	29	23	22	18	18	11	6	7	7 DDS II	7	7 DDS II	
Coordination	27	27	20	30	23	25	22	10	10	11	0	/		/		
														1 BH Mgr		1 BH Mgr
													6 BHS II		6 BHS II	
ADC/ Jail Diversion	8	11	8	8	8	9	8	9	14	15	11	16	1 BHS I	15	1 BHS I	
													4 BH Supv		3 BH Supv	
													4 BH Sr. Clin		4 BH Sr. Clin	
				_				_					1 BH Sr. Clin		1 BH Sr. Clin	
EAR	3	4	4	3	3	2	1	1	1	1	2	2	1 BH Supv	1		

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

# **Caseload Capacity Report Challenges**

Caseload Size Target:	30
Size of a large Service area:	100 FTE's
Total Target with no external or internal Factors:	3000

#### **Typical Complicating Factors**

- 10%-30% of the team does not have a full caseload of 30 due to being new staff (Will use projection of 20% of staff having a 50% caseload)
  - 20 staff x 15 caseload = 300 individuals (reduction of 300 over full capacity)
- 10-25% of teams have an 80% caseload due to complexity of individuals or staff transitioning to a new position.
  - 20% of team = 20 staff x 80% caseload = 480 individuals served (reduction of 120 over full capacity)
- 4 % of team on FML
  - 4 staff x 30 individuals = Reduction of 120 individuals

Total capacity reduction of 540 or 18%.



COMMONWEALTH of VIRGINIA

NELSON SMITH COMMISSIONER

DEPARTMENT OF BEHAVIORAL HEALTH AND DEVELOPMENTAL SERVICES Post Office Box 1797 Richmond, Virginia 23218-1797 Telephone (804) 786-3921 Fax (804) 371-6638 www.dbhds.virginia.gov

# Notice of Funding: Forensic Discharge Planning FY 2024

#### 1. Purpose:

Provided in conjunction with internal service delivery at the jail, Forensic Discharge Planning begins with the screening and assessment of psychiatric, medical, social services, employment, and residential needs, as well as risk factors, as soon as possible after an individual's admission to jail. Discharge planning includes the development of discharge plans that prioritize goals and objectives that reflect needs. It also consists of care coordination with community providers and community supervision agencies, including the exchange of treatment records, communication of treatment needs, and linkage of clients with available services and support options upon release. Discharge planning should begin as soon as possible upon entry into the jail and prior to release, and it should continue into the community until the individual is connected with the appropriate services and supports - ideally no less than 30 days post-release to ensure a smooth transition, and up to 90 days. Please reference the attached document 'Forensic Discharge Planner Protocol for Community Services Boards & Local and Regional Jails' [Revised 7/31/19] for expectations regarding forensic discharge planning services. Further, SOAR [SSI/SSDI Outreach & Recovery] certification will be required for Forensic Discharge Planners – training will be arranged by DBHDS.

Forensic Discharge Planners will utilize the APIC Model [Assess, Plan, Identify and Coordinate] to effectively provide case management and discharge planning services for incarcerated individuals with Severe Mental Illness.

Funding will be utilized to create staff positions in Community Services Boards and will be implemented at jails with a high percentage of inmates with serious mental illness. The Department of Behavioral Health and Developmental Services (DBHDS) is issuing this Notice of Funding for localities interested in submitting a proposal.

#### 2. Background:

The Department of Behavioral Health and Developmental Services (DBHDS) supports a variety of Jail Diversion initiatives that are supported and managed by the Office of Forensic Services. The goal of these initiatives is to identify individuals diagnosed with serious mental illnesses (SMI) and co-occurring disorders (early identification), to divert

these individuals away from the criminal justice system or from penetrating more deeply after arrest/incarceration, and to connect individuals to meaningful services and treatment.

The over-representation of individuals with behavioral health challenges in the criminal justice system motivates us to support services that can be provided to individuals during their incarceration as well as when they are released from jail. According to the State Compensation Board's (SCB) 2022 annual study, nearly 31.64% of the assessable general population of inmates incarcerated in Virginia jails were known or suspected to have mental illness, and 18.22% were known or suspected to have a serious mental illness.

The goal of these funds is to enhance forensic discharge planning services for individuals with SMI in Virginia jails. These funds will be dispersed to a community-based provider who will be responsible for providing services in the jail.

Community Services Boards Currently Funded for FDP Programs: Arlington Chesapeake – Regional Eastern Shore Henrico Highlands – Regional Prince William Rappahannock Rapidan Richmond Behavioral Health Authority Blue Ridge Valley Virginia Beach

# 3. Proposal Requirements and Format:

- a. Submission Deadline: Responses should be submitted as an attachment via email to <u>Ashley.Anderson@dbhds.virginia.gov</u> no later than 5 pm on Friday, May 12<sup>th</sup>, 2023.
- b. Proposal Format: Proposals should be no more than 3 pages in length, including funding request. Proposals should be submitted <u>by email only and include the name, title and phone number of the primary contact for this project on the cover page.</u> All attachments or appendices should be sent electronically with the proposal document.
- c. Proposals will be submitted by the Community Services Board (CSB) serving the Jail. <u>If there is more than one CSB serving a Regional Jail, then letters of support will need to be provided from all CSBs collaborating with the lead CSB submitting the application.</u> Individual awards will vary dependent upon actual amounts requested and total number of sites selected.
- d. Required Elements:

Need for Funding & Project Description:

- Demonstrate the need for the funding, including a description of the existing processes and services available to persons with severe mental illness at the local or regional jail where you intend to provide services.
- Provide data that describes the estimated number of individuals in the local or regional jail with severe mental illness, as well as an estimate of how many would qualify for services. Describe any current gaps that this project will attempt to address.
- Provide a detailed description of the proposed program.
- Discuss the relationship between the Community Service Board (CSB) and the jail, and how this will contribute to successful implementation of the project plan.
- List any potential barriers to implementation/success of the project and plans to address those barriers.
- Proposals should demonstrate increased access to treatment/services/resources via the project. Please describe how this funding will expand access and/or build on existing services.

<u>Implementation Plan</u>: Submit a realistic timeline for when services will begin, including specific objectives, responsible person/organization, and anticipated completion dates. It is expected that operation will begin within 60 days of receiving the award.

<u>Detailed Budget & Narrative</u>: Provide a detailed budget and budget narrative for the period of July 1<sup>st</sup>, 2023 through June 30<sup>th</sup>, 2024 (FY 2024) that includes a description of how funds will be utilized. It is expected that funds will be used primarily for staff/personnel. Funds cannot be used for vehicle purchases. Funds should not supplant any existing funding alternatives. Include any additional funding sources that will supplement funds received under this grant, including federal or local contributions. **Funding will be issued in warrant payments beginning July 2023.** 

<u>Goals/Objectives/Outcome Measures:</u> Describe the goals/objectives of the project include an estimate of how many clients will be served in the year, what types of services will be provided (note use of Evidence Based Practices if applicable), and any estimate of cost savings associated with the implementation of this project. Describe how the program will measure its success and how the data will be collected. Post award, recipients will be required to submit quarterly performance metrics through upload to the Sftp server. DBHDS does not require applicants to submit performance measures data with their applications. Instead, applicants should discuss their proposed methods for collecting data for performance measures in their application.

<u>Letters of Support/Memoranda of Understanding between CSB and Jail:</u> Letters of Support must be signed by the date of proposal submission. MOUs must be signed by the date the program is operationalized. These can be included as additional attachments/appendices and will <u>not</u> count against the page limit for the proposal.

#### 4. Selection Criteria:

Awards may be up to **\$197,637**. The number of programs awarded funding will be dependent upon the total number of proposals selected for funding and the amounts requested.

- a. Collaboration: Historical and ongoing collaboration, strong leadership and collaboration between the CSB and jail, and fiscal partnerships as well as mutually beneficial resource sharing.
- b. Programmatic Activity: Proposals will be scored on the ability for applicants to display a clear and cohesive plan in regards to program development and implementation as well as a comprehensive understanding and commitment to best practices for forensic discharge planning and case management. Proposals will demonstrate the ability to operationalize the principles of both the APIC and RNR models.
- c. Effective Use of Resources: Three factors will be analyzed: First, cost-effective budgeting of resources requested. Second, effective leveraging of additional available resources, including in-kind, local or grant funding, and collaborative pooling of partner agency funds. Third, effective development of a practical timeline and action plan for ongoing program sustainability. Program sustainability will be a critical part of this evaluation process therefore programs should be able to demonstrate how they will sustain or scale services if there is reduction in funds in future years.
- d. Evaluation, Data Collection, and Outcome Measures: All programs selected for funding will be required to work with DBHDS to provide data collection/evaluation. In addition, successful recipients will demonstrate a strong commitment to and plan for evaluation and, if currently collecting information, this should be included in the submission.

# 5. Timeline for Award Process:

The timeline for the funding process is as follows: April 7<sup>th</sup>, 2023: Notice of Funding issued April 17<sup>th</sup>, 2023: Q & A/ Technical Assistance Support Call with Ashley Anderson (11am) – **Please reach out to Ashley Anderson directly by email to** 

# request an invite to the meeting.

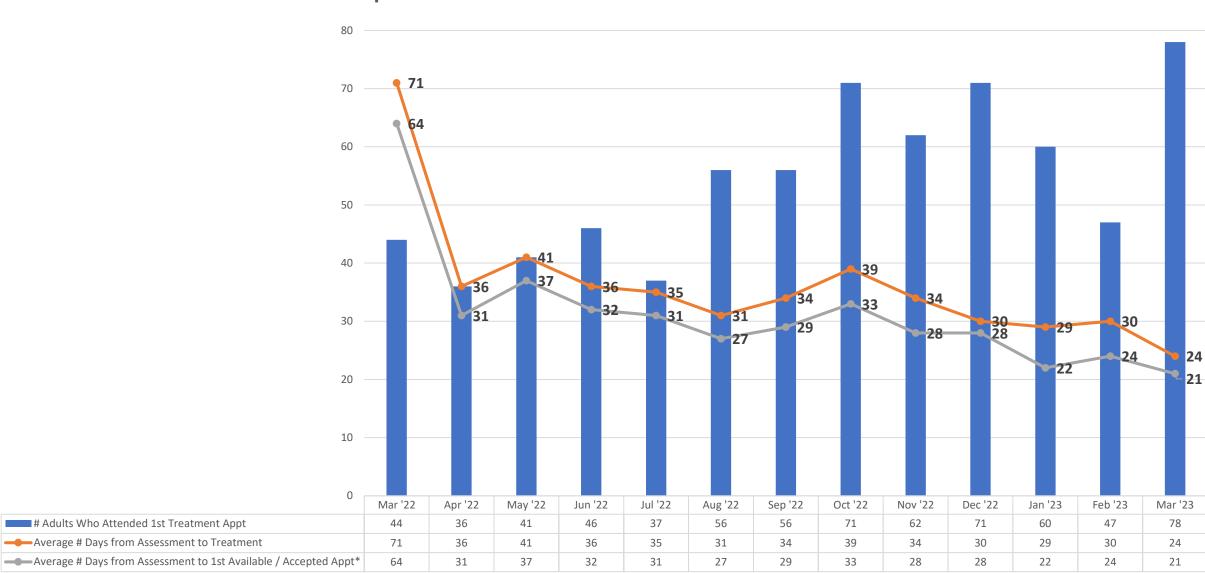
May 12<sup>th</sup>, 2023: Application Deadline (5pm) June 2<sup>nd</sup>, 2023: Notice of Awards July 1<sup>st</sup>, 2023: Award payments begin in the bi-monthly warrants (Exact date of first warrant payment TBD)

#### 6. Inquiries:

Please direct any inquiries regarding this application process to: Ashley Anderson, LCSW – Division of Forensic Services 804-944-6918

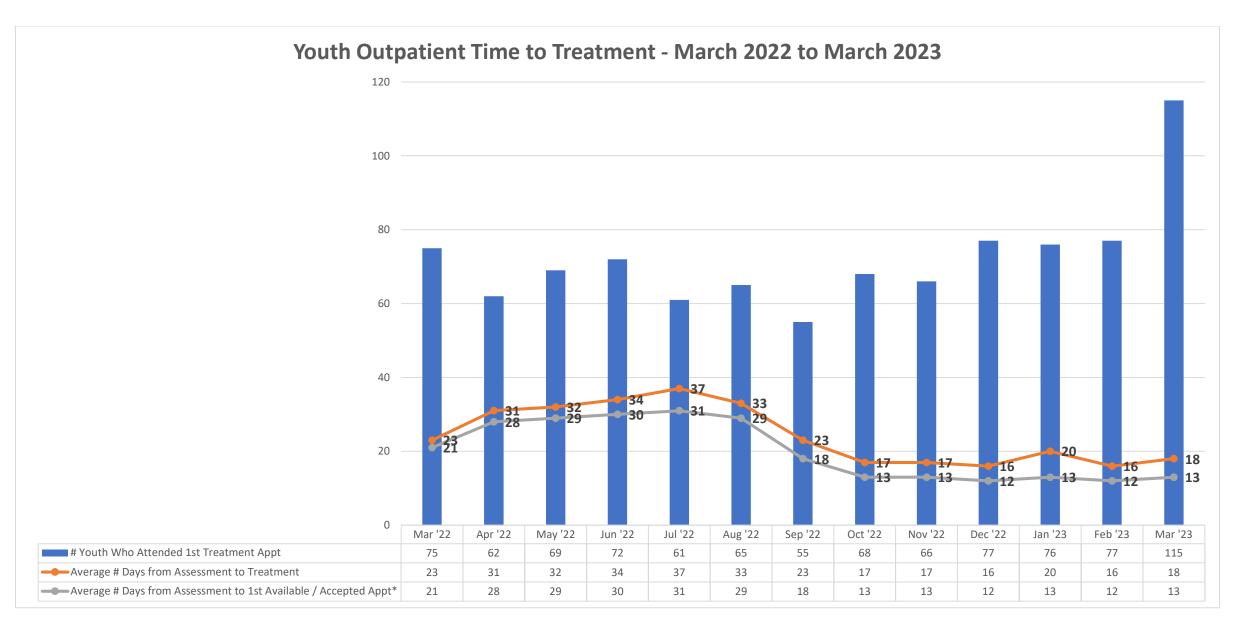
Ashley.Anderson@dbhds.virginia.gov

# Adult Outpatient Time to Treatment - March 2022 to March 2023



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

90

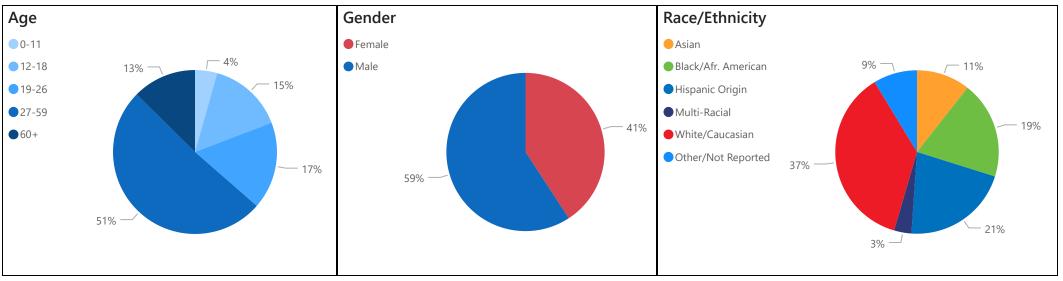


# \*Average number of days from Assessment to Date of First Available Appointment (if known) OR from Assessment to Date of First Accepted Appointment



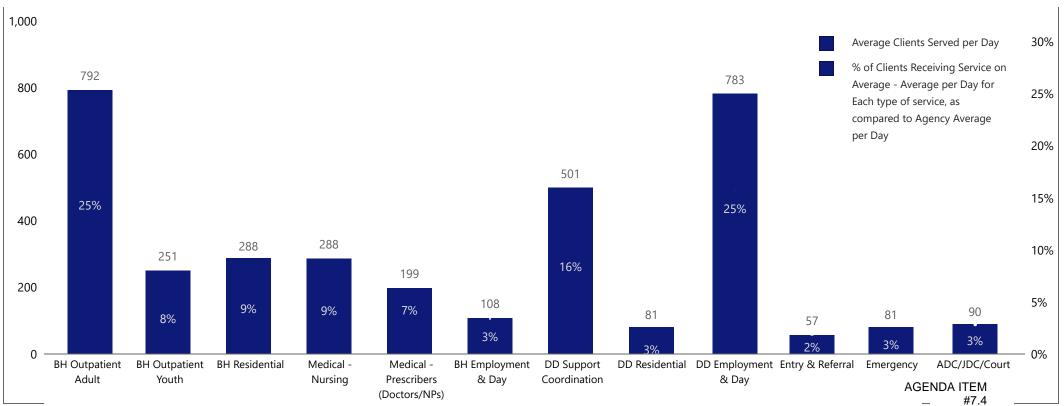


# **CSB** Status Report



# Average Clients Served per Day by Type of Service - February 2023

Agency Average Served per Day in February 2023 = 3,002



Com	nunity ces Boai		lividu	als Ser	ved b	y Mo	nth by	Туре	of Sei	vice F	eb'22	- Feb	'23			
Service Area	Feb'22	Mar'22	Apr'22	May'22	Jun'22	Jul'22	Aug'22	Sep'22	Oct'22	Nov'22	Dec'22	Jan'23	Feb'23	Monthly Variance	Yearly Variance	# Served Past 12 Months
All Individuals Served	8,854	9,416	9,052	9,162	9,169	8,806	9,137	9,184	9,079	9,234	9,050	9,538	9,620	0.9%	▲ 8.7%	21,340
3H Outpatient Adult	3,047	3,091	3,058	3,052	3,091	3,067	3,199	3,175	3,191	3,238	3,278	3,309	3,320	0.3%	▲ 9.0%	5,204
3H Outpatient /outh	911	951	969	1,001	1,020	955	918	894	928	946	964	993	1,037	4.4%	<b>1</b> 3.8%	2,034
3H Residential	415	463	458	430	428	422	428	433	442	441	433	435	450	3.4%	8.4%	1,387
Medical - Nursing	1,226	1,380	1,323	1,228	1,359	1,354	1,418	1,404	1,424	1,307	1,324	1,392	1,406	1.0%	<b>1</b> 4.7%	3,738
Medical - Prescribers	2,553	2,897	2,580	2,645	2,779	2,636	2,805	2,625	2,760	2,664	2,534	2,713	2,580	-4.9%	1.1%	6,612
BH Employment & Day	361	379	378	350	351	346	346	355	337	310	307	322	314	-2.5%	-13.0%	631
DD Support Coordination	2,529	2,751	2,455	2,535	2,629	2,431	2,524	2,518	2,385	2,520	2,301	2,613	2,691	3.0%	<b>6</b> .4%	5,060
DD Residential	85	85	85	85	85	84	84	84	84	84	84	82	81	-1.2%	<b>▼</b> -4.7%	86
DD Employment & Day	919	1,024	1,038	1,063	982	976	1,109	1,124	1,145	1,148	1,170	1,163	1,150	<b>▼</b> -1.1%	<b>4</b> 25.1%	1,338
Entry & Referral (EAR)	611	699	645	620	622	566	600	617	542	523	544	607	620	2.1%	1.5%	5,114
EAR Screenings	379	420	396	354	380	362	379	396	383	393	400	449	421	-6.2%	▲ 11.1%	4,141
EAR Assessments	165	206	179	177	160	172	215	233	251	218	240	234	256	<b>9</b> .4%	▲ 55.2%	2,419
Emergency	841	993	880	935	852	808	915	869	876	869	858	976	947	-3.0%	<b>1</b> 2.6%	6,776
ADC/JDC/ Court	488	559	546	540	574	557	609	639	663	628	645	655	657	0.3%	<b>4</b> 34.6%	2,781

\* 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
ΔΠ	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/IDC/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 There was an increase in the overall numbers served compared to the prior month & year, which is partly due to increases in adult & youth behavioral health outpatient, jail-based, and developmental employment & day programs.
- BH Outpatient Adult The number of individuals served is trending higher over the past several months due to increases in adult mental health outpatient & case management services in the Behavioral Health Outpatient (BHOP) program and medication assisted treatment 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. There is a 14% increase in the number served compared to February 2022.
- BH Residential The number served increased in February, partly due to increases in SUD residential admissions. As compared to the prior year, it appears as if there was a significant increase in the number served. However, this is due to a temporary decrease in February 2022, with slowed admissions at some residential treatment programs due to staff vacancies and COVID cases.
- 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 served is trending lower as compared to the prior year. The implementation of a new evidence-based practice program model in the Supported Employment program requires reduced caseload sizes and it is anticipated that numbers may remain lower as compared to previous years.
- DD Support Coordination There is typically monthly variation based on quarterly and annual review cycles. In February, there was an increase in numbers served due to new waivers and an increase in assessment services.
- 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. New residential placements through community partners are waiver funded.
- DD Employment & Day There has been an upward trend in this service area with a 25% increase over the prior year. Developmental employment & day programs have been able to reopen from closures that were necessary during the pandemic, along with new graduate placements and people returning to service who had deferred during the pandemic. This service area experiences some reductions over the summer months due to the summer break for some self-directed services.
- Entry & Referral– For Entry and Referral the number of clients receiving screenings, assessments, and served overall is trending higher, with significant increases in the number of screenings and assessments provided compared to the prior year.
- Emergency There is some monthly fluctuation in the demand for Emergency services. All clients who present for services are evaluated by Emergency services staff.
- ADC/JDC/Court Jail and court services are continuing to trend higher compared to the prior year. The jail census was
  significantly reduced earlier in the pandemic due to health and safety issues. The number of individuals is also trending higher
  since August, primarily due to an increase in referrals, including substance use clients receiving medication assisted treatment.

#### **FUND STATEMENT**

	FY 2023 REVISED Budget (1)	FY 2023 - 9 Months YTD Budget * (2)	FY 2023 YTD Actuals March (3)	Variance from YTD Budget (3 - 2)	FY 2023 Projection (4)	FY 2023 Projection vs FY 2023 REVISED Budget (4-1)
Est. Beginning Balance	45,581,191	45,581,191	45,581,191	-	45,581,191	-
F Fairfax City	2,479,063	1,859,297	-	(1,859,297)	2,479,063	-
F Falls Church City	1,123,651	842,738	-	(842,738)	1,123,651	-
F State DBHDS	8,451,543	6,338,657	6,925,844	587,187	8,451,543	-
F Federal Pass Thru SAPT Block Grant	4,053,659	3,040,244	3,950,288	910,044	4,053,659	-
V Direct Federal Food Stamps	154,982	116,237	82,761	(33,476)	110,347	(44,635)
V Program/Client Fees	4,296,500	3,222,375	4,094,495	872,120	5,459,327	1,162,827
V CSA	890,000	667,500	642,979	(24,521)	857,306	(32,694)
V Medicaid Option	8,582,708	6,437,031	10,179,748	3,742,717	13,572,997	4,990,289
V Medicaid Waiver	7,000,000	5,250,000	7,061,609	1,811,609	9,415,479	2,415,479
V Miscellaneous	124,800	93,600	93,600	-	124,800	-
Non-County Revenue	37,156,906	27,867,680	33,031,325	5,163,645	45,648,173	8,491,267
General Fund Transfer	165,445,478	165,445,478	165,445,478	-	165,445,478	-
Total Available	248,183,575	238,894,349	244,057,994	5,163,645	256,674,842	8,491,267
Compensation	101,422,808	70,335,357	67,539,714	2,795,643	97,391,522	4,031,286
Fringe Benefits	42,963,615	29,794,691	29,048,525	746,166	41,887,652	1,075,963
Operating	68,855,754	51,641,815	36,905,163	14,736,653	49,206,883	19,648,871
Recovered Cost (WPFO)	(1,568,760)	(1,176,570)	(953,943)	· · · ·	(1,271,924)	(296,836)
Capital	468,298	351,224	263,573	87,651	351,430	116,868
Transfer Out	10,000,000	10,000,000	10,000,000	-	10,000,000	-
Total Disbursements	222,141,715	160,946,517	142,803,032	18,143,485	197,565,564	(24,576,151)
Ending Balance	26,041,860	77,947,831	101,254,962		59,109,278	33,067,418
DD MW Redesign Reserve <sup>1</sup>	2,500,000				-	
Medicaid Replacement Reserve <sup>2</sup>	2,800,000				-	
Opioid Epidemic MAT Reserve <sup>3</sup>	50,000				-	
Diversion First Reserve <sup>4</sup>	5,853,866				-	
Unreserved Balance	14,837,994				59,109,278	
** Opioid Settlement Funds	10,152,020	7,614,015	2,134,988	5,479,027	10,152,020	-

\* FY2023 YTD Budget for Revenue is spread for the remaining 3 months and Expenses prorated

\*\* For presentation purposes only as it has been setup as a separate grant

F Fixed Annual Allocations

V Variable Revenue based on number of services provided and total billing collections

1 The DD Medicaid Waiver Redesign Reserve ensures the County has sufficient funding to provide services to individuals with developmental disabilities in the event of greater than anticipated costs due to the Medicaid Waiver Redesign effective July 1, 2016.

2 The Medicaid Replacement Reserve, for the implementation of Medicaid Expansion to a potential 600 consumers and will provide support with the transition of funding from the State support to Medicaid fees.

3 The Opioid Use Epidemic Reserve provides flexibility, consistent with the Board of Supervisors' FY 2018-FY 2019 Budget Guidance, as the County continues to work with national, state, and regional partners on strategies to combat the opioid epidemic.

4 The Diversion First Reserve represents one-time savings that were realized in FY 2017 as a result of longer than anticipated recruitment times to fill new positions and savings in operating expenses to pay for medical clearances. This funding will be reallocated as part of a future budget process based on priorities identified by the Board of Supervisors. This reserve has been reduced by \$250K at FY 2020 Carryover for costs associated with medical clearances.

#### Fairfax-Falls Church Community Services Board Operating Expenditures Program Budget vs. Actuals FY 2023 March YTD

	FUND 400-C40040 (UNRESTRICTED FEDERAL, LOCAL AND STATE)							
SERVICE/PROGRAM AREA		ICTE		ND S				
	Budget		Actuals		Variance			
G761501 - CSB Office of the Deputy Director - Clinical								
G761501002 - Consumer & Family Affairs	\$ 2,177,906		1,596,077		581,829			
G761501003 - Medical Services	\$ 14,760,026		9,114,253		5,645,774			
G761501004 - Opioid Task Force	\$ 4,275,690	\$	1,800,848		2,474,842			
G761501005 - Utilization Management	\$ 802,444	•	426,571		375,873			
G761501 - CSB Office of the Deputy Director - Clinical Total	\$ 22,016,066	\$	12,937,748	\$	9,078,318			
G762001 - Engagement Asmt & Referral Services								
G762001001 - EAR Program Management	\$ 436,230	\$	290,164	\$	146,066			
G762001002 - Entry, Referral, & Assessment	\$ 3,155,715	\$	2,292,754	\$	862,961			
G762001003 - Outreach	\$ 54,894	\$	71,186	\$	(16,292)			
G762001004 - Wellness Health Promotion Prevention	\$ 2,603,952	\$	1,265,928	\$	1,338,024			
G761001011 - Wellness Health Promotion Prevention	\$ -	\$	9,024	\$	(9,024)			
G762001 - Engagement Asmt & Referral Services Total	\$ 6,250,791	\$	3,929,055	\$	2,321,736			
G762002 - Emergency & Crisis Care Services								
G762002001 - Emergency & Crisis Care Svcs Program Mgm	\$ 217,209	\$	244,042	\$	(26,833)			
G762002002 - Adult Crisis Stabilization	\$ 3,789,545	\$	3,087,451	\$	702,094			
G762002003 - Detoxification & Diversion	\$ 246,596	\$	66 <i>,</i> 593	\$	180,003			
G762002004 - Emergency	\$ 9,671,941	\$	5,437,762	\$	4,234,178			
G762002 - Emergency & Crisis Care Services Total	\$ 13,925,291	\$	8,835,848	\$	5,089,442			
G762003 - Residential Treatment & Detoxification Services								
G762003001 - Residential Treatment Program Management	\$ 217,128	\$	156,162	\$	60,966			
G762003002 - Residential Admissions & Support	\$ 886,315	\$	678,312	\$	208,003			
G762003003 - A New Beginning	\$ 3,943,739	\$	2,910,813	\$	1,032,926			
G762003004 - Crossroads Adult	\$ 3,651,188	\$	2,828,939	\$	822,250			
G762003005 - New Generations	\$ 1,624,786	\$	1,175,592	\$	449,195			
G762003006 - Cornerstones	\$ 2,723,679	\$	1,523,601	\$	1,200,078			
G762003007 - Residential Treatment Contract	\$ 748,038	\$	317,667	\$	430,371			
G762003008 - Detoxification Services	\$ 5,011,266	\$	3,326,150	\$	1,685,116			
G762003 - Residential Treatment & Detoxification Services Total	\$ 18,806,140	\$	12,917,236	\$	5,888,904			
G762005 - Youth & Family Services								

#### Fairfax-Falls Church Community Services Board Operating Expenditures Program Budget vs. Actuals FY 2023 March YTD

	FUND 400-C40040 (UNRESTRICTED FEDERAL, LOCAL AND STATE)							
SERVICE/PROGRAM AREA	•	ICTE	-	ND S	•			
	Budget		Actuals		Variance			
G762005001 - Youth & Family Program Management	\$ 360,831	•	155,622	•	205,209			
G762005002 - Youth & Family Outpatient	\$ 6,826,684		4,847,487	\$	1,979,197			
G762005004 - Youth Resource Team	\$ 1,813,250	\$	1,484,406	\$	328,844			
G762005005 - Wraparound Fairfax	\$ 940,399	\$	614,088	\$	326,311			
G762005006 - Court Involved Youth	\$ 542,945	\$	496,879	\$	46,066			
G762005009 - Youth & Family Contract	\$ 817,091	\$	338,141	\$	478,950			
G762005 - Youth & Family Services Total	\$ 11,301,200	\$	7,936,623	\$	3,364,577			
G762006 - Diversion & Jail-Based Services								
G762006002 - Jail Diversion	\$ 2,804,691	\$	3,115,363	\$	(310,671)			
G762006003 - Forensic Services	\$ 2,697,595	\$	1,256,290	\$	1,441,305			
G762006 - Diversion & Jail-Based Services Total	\$ 5,502,286	\$	4,371,652	\$	1,130,634			
G763001 - Behavioral Health Outpatient & Case Mgmt Svcs								
G763001001 - Behavioral Health OP & CM Program Mgmt	\$ 220,622	\$	198,989	\$	21,633			
G763001002 - Adult Outpatient & Case Management	\$ 14,562,734	\$	10,517,929	\$	4,044,805			
G763001005 - Adult Partial Hospitalization	\$ 1,313,674	\$	933,942	\$	379,732			
G763001 - Behavioral Health Outpatient & Case Mgmt Svcs Total	\$ 16,097,030	\$	11,650,860	\$	4,446,170			
G763002 - Support Coordination Services								
G763002001 - Support Coordination Program Management	\$ 220,819	\$	114,171	\$	106,648			
G763002002 - Support Coordination	\$ 13,339,821	\$	9,085,085	\$	4,254,737			
G763002003 - Support Coordination Contracts	\$ 620,857	\$	564,515	\$	56,341			
G763002 - Support Coordination Services Total	\$ 14,181,497	\$	9,763,771	\$	4,417,726			
G763003 - Employment & Day Services								
G763003001 - Employment & Day Program Management	\$ 2,688,349	\$	2,875,307	\$	(186,958)			
G763003002 - Behavioral Health Emp & Day Direct	\$ 803,561	\$	402,038	\$	401,523			
G763003003 - Behavioral Health Emp & Day Contract	\$ 2,677,283	\$	1,907,641	\$	769,642			
G763003004 - ID Emp & Day Direct	\$ 202,855	\$	-	\$	202,855			
G763003005 - ID Emp & Day Contract	\$ 23,892,344	\$	7,094,351	\$	16,797,992			
G763003006 - ID Emp & Day Self-Directed	\$ 2,554,548	\$	2,382,472		172,076			
G763003 - Employment & Day Services Total	\$ 32,818,939		14,661,810		18,157,130			
G763004 - Assisted Community Residential Services								

#### Fairfax-Falls Church Community Services Board Operating Expenditures Program Budget vs. Actuals FY 2023 March YTD

		F	UND 400-C40040		
SERVICE/PROGRAM AREA	(UNRESTR	ICTE	D FEDERAL, LOCAL A	ND S	TATE)
	Budget		Actuals		Variance
G763004001 - Assist Community Residential Prog Mgmt	\$ 176,768	\$	108,807	\$	67,961
G763004002 - Asst Comm Residential Direct	\$ 10,122,368	\$	6,870,268	\$	3,252,100
G763004003 - Asst Comm Residential Contract	\$ 4,669,385	\$	2,628,757	\$	2,040,629
G763004004 - Stevenson Place	\$ 1,163,008	\$	631,565	\$	531,443
G763004 - Assisted Community Residential Services Total	\$ 16,131,529	\$	10,239,397	\$	5,892,132
G763005 -Supportive Community Residential Services					
G763005001 - Support Community Residential Prog Mgmt	\$ 1,191,048	\$	873,961	\$	317,087
G763005002 - Supportive Residential Direct	\$ 2,320,368	\$	1,455,121	\$	865,247
G763005003 - RIC	\$ 3,230,599	\$	2,539,892	\$	690,707
G763005006 - Beacon Hill	\$ 44,285	\$	-	\$	44,285
G763005007 - Patrick Street	\$ 48,811	\$	(0)	\$	48,811
G763005008 - New Horizons	\$ 1,626,802	\$	86,271	\$	1,540,531
G763005009 - Support Community Residential Contract	\$ 3,564,860	\$	1,993,649	\$	1,571,211
G763005 -Supportive Community Residential Services Total	\$ 12,026,773	\$	6,948,895	\$	5,077,879
G763006 - Intensive Community Treatment Svcs					
G763006001 - ICT Program Management	\$ 169,030	\$	161,977	\$	7,053
G763006002 - Forensic Services	\$ 130,547	\$	0	\$	130,547
G763006003 - Assertive Community Treatment	\$ 1,905,379	\$	1,332,728	\$	572,652
G763006004 - Intensive Case Management	\$ 2,901,855	\$	1,883,059	\$	1,018,796
G763006005 - Discharge Planning	\$ 1,806,741	\$	452,493	\$	1,354,248
G763006007 - Jail Diversion	\$ 160,326	\$	(0)	\$	160,326
G763006008 - Outreach	\$ 604,494	\$	389,363	\$	215,132
G763006 - Intensive Community Treatment Svcs Total	\$ 7,678,373	\$	4,219,620	\$	3,458,753
Program Budget Total	\$ 176,735,917	\$	108,412,515	\$	68,323,401
Non-Program Budget Total <sup>1</sup>	\$ 45,405,798	\$	34,388,808	\$	11,016,990
TOTAL FUND	\$ 222,141,714	\$	142,803,032	\$	79,340,391