FAIRFAX FALLS-CHURCH COMMUNITY SERVICES BOARD FISCAL OVERSIGHT COMMITTEE MEETING MINUTES
SEPTEMBER 19, 2024

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**

   Committee Chair Andrew Scalise called the meeting to order at 4:06 PM

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

   PRESENT: **BOARD MEMBERS:** COMMITTEE CHAIR ANDREW SCALISE; DAN SHERRANGE; EVAN JONES; KAREN ABRAHAM; BETTINA LAWTON

   ABSENT: **BOARD MEMBERS:** CAPTAIN DANIEL WILSON; PATRICIA ZISSIOS

   Also present: Deputy Director of Administrative Operations Jean Post; Deputy Director of Clinical Operations Abbey May; Chief Financial Officer Elif Ekingen; Director of Medical Services Dr. Debra O'Beirne; 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.

5. **Approval of Minutes**

   The minutes from the August 22, 2024, Fiscal Oversight Committee Meeting were presented for review and revision.

   MOTION TO ADOPT AUGUST 22, 2024, MEETING MINUTES AS AMENDED WAS MOVED BY COMMITTEE MEMBER DAN SHERRANGE, SECONDED BY COMMITTEE MEMBER BETTINA LAWTON.

   THE MOTION TO ADOPT WAS APPROVED BY DAN SHERRANGE, BETTINA LAWTON, KAREN ABRAHAM AND EVAN JONES. ANDREW SCALISE ABSTANED.

6. **Administrative Operations Report**

   Deputy Director of Administrative Operations Jean Post presented the CSB Human Resources Positions Vacancy Report during Agenda Item #6.1, detailing the vacancies as of September 7, 2024, based on the pay period. The top table highlighted CSB's vacant positions, noting that the number had decreased by one, leaving 126 vacancies, rather than the expected reduction of seven from the previous pay period.

It was explained that an investigation into contributing factors identified the employment cycle, particularly its slow pace, as the main reason for the delays. While processes are being completed quickly, the cycle itself remains time-consuming, and further details were provided on how this impacts operations. The lower table highlighted vacancies in key service areas, showing slight increases in behavioral health outpatient services and jail-based services, which rose to nine from 6 and 11 from 8, respectively. Vacancies in emergency services remained stable or decreased slightly, with youth and family outpatient services dropping to 11 from 13, and support coordination down to 19 from 20.

Jean also provided updates on administrative positions as of September 4th. Of the 17 HR merit positions, there were two vacancies, both related to newly created positions requiring workforce planning, which has now been completed. Out of 10 data analytic positions, three were vacant, with two in workforce planning and one in active recruitment. The fiscal and revenue management department, consisting of 41 positions, now includes NCO contracting (Network Contracting Offices), and it has four vacancies, with two in NCO, one in procurement, and one in revenue management. The compliance and risk management team, with 29 positions, had three vacancies, two of which were due to promotions following spring workforce planning, with recruitment now in its early stages.

State-level data comparing CSB vacancies to state vacancies was presented, with an emphasis on its preliminary nature and the plan to provide access to the platform once it stabilizes. The exit survey results were also reviewed, revealing 27 separations, including 18 resignations, four retirements, two transfers, one termination, and two separations for medical reasons. Over the past two months, the exit survey completion rate stood at 54%, with 14 individuals completing the survey. When asked about the primary reason for separation, no one cited supervision or management, which continued the trend from FY24. Responses varied with no clear trend, though the data will continue to be monitored. Of the six individuals who commented on pay, four indicated they left for significantly higher compensation elsewhere.

7. **Clinical Operations Report**

Deputy Director of Clinical Operations Abbey May presented the Youth and Adult Behavioral Health Outpatient (BHOP) Time to Treatment report, referencing Agenda Item #7.1. Overall, the average time to treatment for adults increased slightly to 14 days, up from 13 in July 2024, but still down from 17 days in May and June 2024, showing positive progress for adult outpatient services. Similarly, the average wait time for youth decreased to 11 days for the first available appointment, compared to 12 days in July. For adults, 60% were offered an appointment within 14 days, while 71% of youth were offered one within 10 days.

Regarding Substance Use Disorder (SUD) residential capacity utilization, the teams have continued closing the gap between capacity and utilization. The numbers for long-term and intermediate care are quite close, with significant increases in utilization at the Cornerstone facility over the past few months. A pause is being placed on some projects related to residential treatment services. The consolidation of the Cornerstone program into the New Beginnings site and revisions to program models, such as variable lengths of stay, will continue. Additionally, the development of an Access Care Management (ACM) outpatient level of care and a rapid admissions unit remains ongoing.

Director of Analytics & Evaluation Linda Mount presented the CSB Status Report and Quarterly Performance Measures, focusing on data from July, as referenced in Agenda Item #7.4. During this reporting period, the number of individuals served across the agency increased by 4% compared to the previous year. These increases were primarily seen in the adult behavioral health outpatient program, support coordination, employment and day services, Medication Assisted Treatment (MAT), and emergency services programs. Specifically, adult behavioral health outpatient programs saw an 8% increase, largely driven by case management, therapy services at BHOP, MAT, and peer services.

In contrast, behavioral health residential services experienced a decline in the number of individuals served compared to the previous year, partly due to decreases in contracted supportive services and attrition in the Resources for Integrated Care (RIC) program. A temporary slowdown in admissions at Wellness Circle, caused by COVID-positive cases, contributed to a decrease in individuals served for this report.

Behavioral health employment and day programs showed a 12% increase over the previous year, primarily due to the filling of vacancies in the support and employment program. Developmental Disability (DD) support coordination saw a 6% increase compared to the prior month, with expectations for continued growth as additional waivers are allocated in the coming year. DD employment and day programs also trended upward, showing a 7% increase over the prior year, driven by new placements, though there is a typical seasonal drop during the summer due to self-directed services.

For entry and referral, after a detailed review, it was noted that while there was a recent drop in screenings, this could be attributed to both lower demand and the efficiency of a new model. The data suggests that fewer individuals are being carried over from month to month, as they are now moving through the assessment process more quickly.

Emergency services reported an 18% increase compared to the previous year, partially due to the expansion of the co-responder program and increased demand, which fluctuates monthly. At the Adult Detention Center (ADC), the number of individuals served increased by 7% compared to the previous month, largely due to a reduction in position vacancies during this reporting period.

8. <u>**Financial Status**</u>

Chief Financial Officer Elif Ekingen delivered the staff report, providing updates on the Modified Fund Statement and the Expenditures-Budget vs. Actuals Financial Reports, as referenced in Agenda Item #8.1. This report detailed the public statement as of June 30, 2024, and highlighted key budget adjustments made throughout the year, including transfers from operating to personnel.

There was a surplus of nearly $14 million on the revenue side, with $2.5 million coming from state revenue allocated for salary and health costs. An additional $130,000 resulted from updated Memorandums of Understanding (MOUs) with cities, leading to slightly higher billing than the previous year. Federal grants also increased, contributing $633 thousand to the year-end balance. Performance for fee-for-service revenues remained steady, with an average of $29.8 million this year compared to $30 million last year, including Medicaid waiver revenue.

On the expenditure side, actual compensation costs were higher than in previous years, totaling $1.4 million by fiscal year-end. A grant partly offset this increase. Operating expenses totaled $9 million, but after accounting for encumbered funds, $6 million was carried forward to the next fiscal year. Recovered costs, which refer to reimbursement for work performed on external projects, continued to decline. It was noted that $1.5 million in recovered costs is unlikely to be fully recouped, necessitating an adjustment.

At fiscal year-end 2024, the overall surplus amounted to $24 million, with $4 million already distributed. Some carryover decisions, including $2.5 million, are still pending, and the full details are available on the website. As part of the FY 2025 budget, approval was received for eight support coordination positions, though the original request was for 25. More positions are anticipated during future quarterly processes, such as in the third quarter. The Department of Management and Budget (DMB) granted permission to dual encumber positions until they are officially created.

A plan was outlined to transfer $15 million back to the general fund, helping manage the year-end balance. Capital expenses were also identified, with $1.9 million dedicated to renovations at the Sharon Bulova Center and earmarked for IT projects, particularly the EHR system, with gradual support planned to move forward.

9. **<u>Adjournment</u>**

A motion to adjourn the meeting was made by Committee Member Bettina Lawton and seconded by Committee Member Dan Sherrange. The motion was approved unanimously, and the meeting was adjourned at 5:38 PM.

10/31/2024 | 15:00:13 EDT
Date Approved

DocuSigned by:
Sameera Awan
Clerk to the Board