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

**Evan Jones, Chair**

**Wednesday, December 4, 2024, 5:00 PM**

Will be held electronically

### **MEETING AGENDA**

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| <b>1. Meeting Called to Order</b>   | <b>Evan Jones</b>                               |
| <b>2. Roll Call, Audibility and Preliminary Motions</b>                     | <b>Evan Jones</b>                               |
| <b>3. Matters of the Public</b>   | <b>Evan Jones</b>                               |
| <b>4. Amendments to the Meeting Agenda</b>                                  | <b>Evan Jones</b>                               |
| <b>5. Approval of the October 9, 2024, Meeting Minutes</b>                  | <b>Evan Jones</b>                               |
| <b>6. Peer Recovery Services Presentation</b>                               | <b>Michael T. Lane</b>                          |
| ▪ <i>by Michael T. Lane, Cynthia Evans, and Dianna Taylor: CSB Services</i> | <b>Cynthia Evans/Dianna Taylor</b>              |
| ▪ <i>by Tonya Henderson: Centers for Opportunity</i>                        | <b>Tonya Henderson</b>                          |
| ▪ <i>by Brittany Roberts-Martin: Chris Atwood Foundation</i>                | <b>Brittany Roberts-Martin</b>                  |
| ▪ <i>by Brittney White: HopeLink Behavioral Health</i>                      | <b>Brittney White</b>                           |
| <b>7. Legislative Update</b>  | <b>Shweta Adyanthaya</b>                        |
| <b>8. Northern Virginia Regional Office Update</b>                          | <b>Sebastian Tezna</b>                          |
| <b>9. Community Partner Reports, Updates, and Concerns</b>                  | <b>Evan Jones</b>                               |
| <b>10. Staff Reports</b>  | <b>Barbara Wadley-Young &amp;<br/>Abbey May</b> |
| <b>11. Adjournment</b>  |   |

Meeting materials are posted online at [Community Services Board | Community Services Board \(fairfaxcounty.gov\)](https://www.fairfaxcounty.gov/csrb) or may be requested by contacting Sameera Awan at [Sameera.Awan@fairfaxcounty.gov](mailto:Sameera.Awan@fairfaxcounty.gov)

**FAIRFAX FALLS-CHURCH COMMUNITY SERVICES BOARD  
SERVICE DELIVERY OVERSIGHT COMMITTEE MEETING MINUTES  
OCTOBER 9, 2024**

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

**1. Meeting Called to Order**

Acting Committee Chair Jim Gillespie called the meeting to order at 5:00 PM.

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

**PRESENT:**       **BOARD MEMBERS:** ACTING COMMITTEE CHAIR JIM GILLESPIE;  
SHEILA COPLAN JONAS; ROBERT BARTOLOTTA; ANNE WHIPPLE;  
SARAH COUGHTER; SRILEKHA PALLE; DARIA AKERS (FAIRFAX, VA);  
EVAN JONES (BURKE, VA)

**ABSENT:**       **BOARD MEMBERS:** CAPTAIN DANIEL WILSON

**Associate Members in Attendance:** Maureen Gum, Langley Residential Support Services (LRSS); Laura Fonner, HopeLink Behavioral Health; Diane Monnig, ARC of Northern Virginia; Rebecca Sutter, Doctor of Nursing Practice at George Mason University; Joe Getch, HopeLink Behavioral Health; Susan Keenan, Community Living Alternatives (CLA); Sharon Denisar, Fairfax County Public Schools (FCPS); Sean McGinnis, Hartwood Foundation, Inc. (HFI); Paul Donohue, Every Citizen Has Opportunities (ECHO); Adelaide Etse, R. A. Quarshie Healthcare, LLC (QHC); Pat Vinson, Job Discovery, Inc. (JDI); Randy Shusman, Pathway Homes, Inc. (PHI); Taquanda Dixon, Melwood; Michel Kahak, Kahak, Inc.; Robert Britton; Janet Burmester; Belinda Laryea; Gordon Dean; Katherine Vitale; Cynthia Koshatka, Northern Virginia Mental Health Foundation (NVMHF)

**Staff in Attendance:** Deputy Director of Clinical Operations Barbara Wadley-Young; Deputy Director of Clinical Operations Abbey May; Legislative and Grants Analyst Elizabeth McCartney; Sebastian Tezna Division Director of NVRPO; Division Director of Developmental Disabilities and Support Coordination Sierra Simmons; Division Director of BHOP Eileen Bryceland; Division Director of Contract and Supportive Services Kevin Lafin; Director of the DBHDS Office of Community Housing Kristin Yavorsky, Behavioral Health Manager of Supportive Community Residential Mike Suppa 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 October 9, 2024, Service Delivery Oversight Committee Meeting Minutes were provided for review; no amendments were made.

**MOTION TO ADOPT OCTOBER 9, 2024, MEETING MINUTES WAS MOVED BY COMMITTEE MEMBER SHEILA COPLAN JONAS, SECONDED BY COMMITTEE MEMBER ROBERT BARTOLOTTA.**

**MOTION TO ADOPT WAS APPROVED BY JIM GILLESPIE, EVAN JONES, SHEILA COPLAN JONAS, SARAH COUGHTER, ROBERT BARTOLOTTA AND DARIA AKERS.**

**6. DBHDS Housing Initiative: Present Overview & Future Outlook**

**Director of the DBHDS Office of Community Housing Kristin Yavorsky** provided an overview of the CSB Supportive Housing Partnerships. Her presentation focused on the core components, state and local needs, and the application of permanent supportive housing (PSH) for individuals with serious mental illness (SMI). While DBHDS also oversees housing initiatives for populations with developmental disabilities and substance use disorders, Kristin concentrated on PSH for adults with SMI, discussing funding strategies, outcomes, and local partnerships, including those in Fairfax County.

The pressing need for PSH spans multiple populations, with a particular focus on adults with serious mental illness. While DBHDS also serves individuals with developmental disabilities and substance use disorders, the greatest demand and funding are allocated to those with serious mental illness. PSH has demonstrated significant outcomes, including improved housing stability and reduced reliance on institutional settings such as hospitals and jails. In Fairfax County, which has the highest need in Virginia, these efforts specifically target populations experiencing chronic homelessness and those transitioning from state hospitals.

In discussing the statewide demand, Kristin noted the need for approximately 7,200 PSH units across Virginia, with 1,200 required in Fairfax County alone. She emphasized the importance of local partnerships in meeting this need and highlighted the significant role of CSBs in coordinating referrals and managing resources. DBHDS has secured increased funding for PSH programs, growing from \$2 million in FY16 to \$86 million in FY24. This investment supports nearly 3,000 slots across 29 CSB catchments in Virginia, with over 300 in Northern Virginia. The outcomes are compelling: 91% of tenants remain housed for at least a year, and state hospital costs have been reduced by 76%, translating to \$30 million in cost avoidance.

Strategic initiatives in Fairfax County include a new assertive community treatment (ACT) team by Pathways and a contract with the Housing Authority for 300 rental assistance slots. Additional service contracts with CRI and Hopelink focus on tenancy supports, aiding individuals in securing and maintaining housing. CSBs also implement evidence-based practices, such as Critical Time

Intervention, to support individuals transitioning from institutional settings to stable housing. These efforts are bolstered by technical assistance and training to ensure high-fidelity in-service delivery.

Further efforts to expand PSH include partnerships with affordable housing developers to increase the availability of rental units. DBHDS is leveraging resources like the Low-Income Housing Tax Credit program and investing \$6 million in new rental unit development. Additionally, Supportive Housing Institutes are fostering collaboration among housing developers, service providers, and other stakeholders to ensure successful implementation of PSH projects. These initiatives not only address critical housing needs but also advance equity by providing stable housing options for overrepresented populations in systems like homelessness, justice involvement, and crisis care.

## **7. Community Provider Overview of Permanent Supportive Housing**

**VP of Supported Housing with Pathway Homes Randy Shusman** provided an overview of Supported Housing through Pathway Homes, a behavioral health agency dedicated to addressing housing needs for individuals with serious mental illnesses and other disabilities. In 2024, Pathway Homes served over 1,900 individuals across Virginia, Washington, D.C., and Central Florida. It is the largest nonprofit Permanent Supportive Housing (PSH) provider in Northern Virginia, managing 138 owned units and more than 450 leased units across the region. The agency's programs are built on the evidence-based PSH model, which combines flexible, voluntary, recovery-focused services with access to safe and affordable housing. This approach has proven to be cost-effective, particularly for individuals with complex needs who frequently experience homelessness or utilize costly institutional and emergency care services. Evidence supports that stable housing promotes housing security and significantly reduces homelessness.

Pathway Homes employs a Housing First approach, which boasts a 95% retention rate for individuals remaining in PSH year after year. The services provided include Permanent Supported Housing, Psychiatric Assisted Living Facilities, Assertive Community Treatment, Mental Health Skill Building, Crisis Stabilization, Case Management, Tenancy Support, and Homeless Outreach. The organization thrives on successful partnerships with Community Service Boards, the Virginia Department of Behavioral Health and Developmental Services (DBHDS), leasing communities, private landlords, and housing developers, including those utilizing Low-Income Housing Tax Credits (LIHTC).

The priority population served by Pathway Homes aligns with DBHDS criteria for PSH. This includes individuals with SMI who are either residing in state psychiatric facilities and are interested and eligible for PSH, chronically homeless or at risk of becoming chronically homeless, living in assisted living facilities or similar residential environments but able and willing to transition into PSH, or unstably housed individuals who frequently use hospital or criminal justice system intervention

Pathway Homes has achieved significant success in its mission. The organization provides affordable housing to individuals who otherwise could not afford it in the area and helps them maintain stable housing. It is widely respected as a PSH provider and community partner, delivering high-fidelity programs with strong outcomes. Staff members take pride in seeing clients grow and thrive, while the organization's nimble and creative approach allows it to remain innovative in tackling housing challenges. Dedicated PSH staff are central to these successes.

However, the organization also faces considerable challenges. A lack of affordable housing remains a persistent issue, and operating PSH is costly, with expenses tied to switching units, legal actions, maintenance, and renovations. The demand for services is vast and ongoing, requiring a cross-system approach and careful allocation of resources. Maintaining strong relationships with landlords can also take time and effort. Additionally, the high-stress nature of the work can lead to staff burnout, adding another layer of complexity to the critical work performed by Pathway Homes.

## 8. CSB Permanent Supportive Housing Services

**Behavioral Health Manager of Supportive Community Residential Mike Suppa** presented a detailed overview of the Additional Housing Collaboration with the Fairfax Housing Authority, focusing on Agenda Item #7.1. The permanent supportive housing program currently consists of 158 units, with 120 units funded by the state and 38 units funded by the county through the Diversion First Housing initiative. Clinical support for these units is provided by a Behavioral Health Supervisor and three Behavioral Health I positions.

The proposed expansion includes 300 new units, 250 of which are funded by the state and managed through housing department certificates for individuals with serious mental illness. The additional 50 units will be managed by the Pathway Homes ACT (Assertive Community Treatment Program) team, directly contracted with the state. While the CSB will handle referrals for all 300 units, clinical services for the 50 units managed by Pathway Homes will not be the CSB's responsibility.

Key roles and responsibilities outlined include:

- **Screening and Referrals:** A Behavioral Health Supervisor will act as the referral coordinator, collecting referrals based on state-determined priorities: state hospital patients, individuals in residential settings needing relocation, chronically homeless individuals, and high utilizers of jail and mental health systems. A committee from the CSB will assist in scoring and prioritizing these referrals.
- **Critical Time Intervention (CTI) Team:** A new initiative for the CSB, this evidence-based practice involves a 6-9 month intensive program to help individuals get and stay in housing. CTI workers will collaborate with supportive housing teams contracted by the state, focusing on tenancy support activities.

- **Administering Client Assistance Funding:** The CSB coordinates funding for clients' needs, such as furniture and security deposits, when they move into new housing. A Behavioral Health Supervisor oversees this process.
- **Ongoing Engagement and Clinical Support:** The current engagement and clinical support for the existing units will continue and expand as the program grows. CTI workers may shift to engagement roles as the program evolves.

In summary, Mr. Suppa detailed a comprehensive plan to expand and enhance the permanent supportive housing program, emphasizing the collaboration between the CSB, state, and county to provide critical support to individuals with serious mental illness.

## 9. Legislative Update

**Legislative and Grants Analyst Elizabeth McCartney** distributed a printed draft of the legislative program recommendations, highlighting key points for the legislative liaisons. The CSB has been collaborating with the County Government Affairs team to update the County's annual legislative program document. This document is revised throughout the fall, followed by a meeting of the Legislative Committee of the Full Board of Supervisors, which will vote on it in December 2024. The document will be released for public feedback during the November 2024 Board meeting and subsequently approved in December 2024.

The CSB has proposed several edits to this year's program based on developments from the last session and shifting priorities. One of the key areas addressed is Medicaid Services. This year's biannual budget included a significant investment in new waiver slots, which the CSB is closely monitoring. The CSB expressed the need to prioritize new slots in future budgets and included more detailed language on rates, particularly for support coordination and case management, to ensure individuals with complex behavioral and medical needs receive adequate services. The CSB addressed Medicaid reimbursement rates for behavioral health services, stressing the importance of rates that cover the total cost of services and advocating for a Northern Virginia differential, which is currently included with waiver rates but requires an increase.

In the behavioral health section, the CSB enhanced language regarding permanent supportive housing, emphasizing the need for support services that enable individuals to succeed in such housing environments.

All relevant boards, agencies, and commissions have provided feedback to the County Government Affairs team, and the Legislative Committee will finalize the document in December. The CSB Board, under the leadership of the Board Chair, Dan, is currently determining how it will engage with the General Assembly this fall. Typically, the CSB develops focused talking points to present to the General Assembly through in-person meetings or visits to Richmond. Further updates will be provided as these plans are finalized.

## **10. Northern Virginia Regional Office**

**Division Director of NVRPO Sebastian Tezna** provided an update on the Northern Virginia Regional Projects Office (NVRPO), focusing on several key initiatives. He began with an update on crisis services, noting that the 16-bed adult crisis stabilization unit in Chantilly, which opened in June, had admitted 131 individuals from June 11<sup>th</sup> to August 31<sup>st</sup>, with 72 (approximately 55%) being temporary detention order (TDO) cases. This population, which would have previously been served outside the region, marks a promising start. Efforts are ongoing to refine the admissions process, and the region is optimistic about continuing this progress.

The NVRPO is excited about the opening of the full crisis receiving and stabilization center in Woodbridge, scheduled for mid-2025. This facility will include psychiatric urgent care, 23-hour observation, and crisis stabilization beds for adults and youth, providing a crucial local resource. Additionally, the Governor recently announced a \$4.1 million investment for a new crisis receiving center in Loudoun County to have three fully operational and established crisis stabilization units in Region 2 by 2026.

Sebastian also shared updates on the regional substance use disorder treatment program, which has been expanded to include both adults and youth involved with emergency services or crisis programs. This program, which serves as a last resort for uninsured individuals, will benefit Fairfax County as it provides services through its residential units, with regional payment support for Fairfax to serve clients from other areas.

Regarding the regional crisis call center, Region 2 is now the only region in the state where all CSBs have gone live with Marcus alert plans ahead of schedule. As of July 1, 2024, the three remaining jurisdictions in Northern Virginia launched their teams, and the regional crisis call center is now receiving communication from all peace officers' apps.

Finally, in September, the region hosted its second Support Coordinator Conference, attended by over 90 individuals. The conference provided valuable feedback on access to information and the quality of materials shared with attendees.

## **11. Community Partner Reports, Updates and Concerns**

**Assistant Clinical Director Emily Hollidge** provided a few brief updates regarding activities at HopeLink. The first update was related to the supportive housing initiative, one of the two teams mentioned in the recent DBHDS presentation. The team is prepared, eager to move forward with the next steps, and excited to contribute to the initiative.

The second update focused on HopeLink's New Care Navigation Program, which is in the early stages of development. This program, operated in partnership with Fairfax CSB, aims to offer a single point of access to mental health and substance use services for children and young people up to age 25. The goal is to help families navigate the often confusing process of connecting young individuals to necessary resources. Care navigators will conduct assessments both over the

phone and in person. Although still in the planning stages, with hiring and implementation underway, there is strong enthusiasm for the program's potential impact.

Lastly, Emily shared that HopeLink's annual fundraising benefit, *Imagine Hope*, is scheduled for Friday, November 1, 2024, at the Hilton McLean Tyson's Corner Center. Tickets are available for anyone interested in attending.

**President of NVMHF Cynthia Koshatka** shared that the upcoming fundraiser will be held on November 2, 2024, at 3:00 PM. The event will feature a play about dementia and Alzheimer's, written and performed by a board member with Alzheimer's disease. Cynthia described the play as very powerful, having seen it herself, and encouraged attendance, hoping that some in the audience would join. The fundraiser will take place at the Unitarian Universalist Congregation of Fairfax, and more information will be shared through various channels as the event approaches.

## **12. Staff Reports**

**Deputy Director of Clinical Operations Barbara Wadley-Young** provided updates on the ongoing efforts related to the priority one waivers. She highlighted the positive support from the governor and the state for covering these waivers. However, for Fairfax CSB, the coverage needs to be improved, with the county having to fund millions of dollars to support 1,200 individuals at any given time. This challenge arises because Medicaid coverage for support coordination services is inadequate. The team will need to grow by more than 45% to meet this demand. The initiative underscores the critical need for advocacy from the Board of Supervisors and others to address the reality of these funding gaps and the additional resources Fairfax County must provide to fulfill its mandated services.

## **13. Adjournment**

A motion to adjourn the meeting was made by Committee Member Robert Bartolotta and seconded by Committee Member Daria Akers. The motion was approved unanimously, and the meeting was adjourned at 6:32 PM.

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Date Approved

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Clerk to the Board