

Testimony to the Board of Supervisors – FY 2018 Budget
Gary Ambrose, Chairman
Fairfax-Falls Church Community Services Board
April 6, 2017

Good afternoon, I am Gary Ambrose, Chairman of the Fairfax-Falls Church Community Services Board. I am here with my Board colleagues, Suzette Kern and Bettina Lawton, to thank you for your support and to offer our perspective on the FY 2018 Advertised Budget.

CSB helps people of all ages who have mental health challenges, substance use disorders, and developmental delays and disabilities. Last year, we served over 22,000 residents of Fairfax County and the cities of Fairfax and Falls Church.

Our services have a far-reaching, positive impact. The entire community benefits when someone gets appropriate treatment for mental illness and regains the ability to work and care for their family. Generations of suffering can end when a young person with substance use disorder achieves recovery. When someone with developmental disabilities is able to participate in work and community life, the whole community wins.

As our CSB Executive Director likes to say: “We all do better when we ALL do better.”

We appreciate the strong support CSB receives from the Board of Supervisors and County leaders. Even in this difficult budget year, the FY 2018 Advertised Budget includes \$2.3 million and 22 full-time staff positions for CSB to carry out our newly expanded, mandated support coordination responsibilities for people with developmental disabilities.

We also want to thank you for your leadership and support for Diversion First, which has accomplished so much since the Merrifield Crisis Response Center opened in January 2016. Your vision and commitment to this effort has made all the difference. We trust that you share our concern about the need to continue its implementation and remarkable progress.

We know that the County’s economic challenges require that you make some hard choices this year to ensure a balanced budget. Within this context, we support the two budget reductions the Advertised Budget contains for CSB, which will save the County over \$833,000.

The first reduction eliminates CSB's Youth Day Treatment program. Youth in the current program have other community options for treatment and in-home services that are covered by other state and local funding streams. This reduction saves the County \$460,000 and eliminates four full-time equivalent staff positions. Employees in the program will be deployed to provide critical services in CSB's youth behavioral health continuum.

The second reduction eliminates CSB's Community Readiness and Support Program. This saves over \$373,000 and four full-time equivalent staff positions. Contracted service providers in Northern Virginia have sufficient capacity to serve clients in this program. CSB will be working in partnership with all stakeholders to implement a careful transition plan for all current clients. Program staff will be moved to unfilled positions in other important CSB services.

Our Board is convinced that the **three most urgent challenges** we face are these:

1. **Decriminalize mental illness.** We have made great progress with Diversion First in its first year, with 375 people diverted from potential arrest. But much more can and must be done, and more resources are needed.
2. **Combat the opioid epidemic.** As overdose fatalities increase, our wait lists for treatment services continue to grow. CSB is on the front lines in this battle.
3. **Provide permanent, supported housing for people we serve.** How can people recover, if they have no secure place to live, stabilize and work on their recovery?

These three issues impact the lives of thousands of our neighbors, coworkers, friends and family members. Their ramifications can be felt in our local economy, schools, social services and criminal justice systems. We can, and must, address them, for well-being of our entire community. Suzette Kern will provide more information about each issue.

Thank you for your strong support and continued partnership.

Testimony to the Board of Supervisors – FY 2018 Budget
Suzette Kern, Vice Chair
Fairfax-Falls Church Community Services Board
April 6, 2017

Good afternoon, I am Suzette Kern, Vice Chair of the CSB Board.

I believe that everything we do at the CSB is important. But one issue rises to the top of our priority list – the need to **decriminalize mental illness**. CSB is a key player in the County’s Diversion First initiative, which provides alternatives to incarceration for people with mental illness and disabilities who have low-level encounters with law enforcement.

With your leadership, we have made good progress in diverting people at the point of potential arrest. In 2016, there were 1,580 police-involved cases brought to the Merrifield Crisis Response Center for mental health assessment, and 375 people were diverted from potential arrest.

The next important “intercept point” for diversion involves the courts. Unfortunately, the Advertised Budget includes no new funding for this next stage of diversion implementation. We urge you to support the proposal presented on March 21 to your Public Safety Committee to **add \$1.9 million to the FY 2018 budget for Diversion First**. This will provide additional CSB and public safety staff to support diversion efforts in the courts and 24/7 law enforcement coverage at the MCRC.

Our second challenge is to **combat the opioid epidemic**. CSB is at the forefront of the battle, with our detoxification and treatment services, and Revive training. The state provides some funding, but solutions like medically assisted treatment remain grossly underfunded. Increasingly powerful and deadly drugs are appearing in our region. **As overdose fatalities increase, our wait lists for treatment services continue to grow**, even though we have been able to serve more individuals by decreasing the length of stay.

To address this urgent, growing crisis we need to increase services in four key areas:

- Medication Assisted Treatment teams;
- Support for people when they “step down” from intensive levels of care;
- More medical staff at residential treatment programs; and
- Peer support outreach to individuals during treatment and after an overdose.

At the request of the Human Services Council, I have included additional information with my written testimony describing what we need and what it will cost.

Our third priority is housing. Having a safe, stable place to live is critical for successful recovery and life in the community. We do not have enough affordable permanent housing in our community for people with behavioral health challenges and developmental disabilities. We are only addressing a tiny percentage of the need. In a recent survey, our CSB case managers reported that 733 individuals currently being served are in need of affordable housing. As a community, we can and must do more.

Thank you for considering these critical challenges as you make difficult budget decisions. And as always, thank you for your support.

CSB Opioid Crisis Service Delivery Needs

During CSB testimony at the Human Services Council on March 9, the Council asked the CSB to provide an estimate of service needs and costs to more adequately address the crisis. The following is our response to that request, in order of priority.

Expand Community Based Medication Assisted Treatment (MAT) Services

MAT is an evidence based practice that has been shown to be effective at treating individuals in the community who are addicted to opioids. CSB currently operates one community MAT program on a very limited outpatient basis at Merrifield serving 55 individuals. Additionally, 45 other individuals receive MAT services in our different CSB residential treatment programs. We would like to expand these services in order to address the opioid crisis in a cost effective way. To expand this service, the following resources will be needed.

Each MAT team would have the capacity to serve 70 individuals in the community, and would consist of 8.5 staff. *It is estimated that at least two teams are needed to serve the Fairfax community.*

1 Supervisor	\$116,000
4 Behavioral Health Clinicians	\$402,720
2 Peer Support Specialists	\$139,178
1 Nurse	\$87,505
0.5 Psychiatrist or Nurse Practitioner under physician supervision	\$63,825
Medication and Operational Costs	\$ 213,000
Total cost per team to serve 70 individuals	\$1,022,228
TOTAL COST for two teams to serve 140 individuals	\$2,044,456

Expand Community Step Down Programs for Individuals Leaving Higher Levels of Care

Since the opioid crisis has struck the Commonwealth, all CSB service areas that serve individuals with substance use disorders have experienced a high number of referrals. A treatment trend we are seeing is the occurrence of relapse when individuals step down to a lower level of care. In order to interrupt this ongoing trend, CSB needs increased staff to provide community-based supports when individuals leave its intensive outpatient (IOP) and residential programs.

Community Opioid Step Down Staff:

Needed for Each Residential Program (CSB has two)

• 2 Behavioral Health Clinicians	\$201,360
• 2 Peer Support Specialists	\$139,178
• 0.2 Nurse Practitioner or Psychiatrist	\$25,528
Total for Each Residential Step Down:	\$366,066
TOTAL COST for Two Residential Step Downs	\$732,132

Needed for Each Intensive Outpatient Program Site: (CSB has 3 IOP sites)

- 1 Behavioral Health Clinician \$100,680
- 1 Peer Support Specialist \$69,589
- 0.15 Psychiatrist or Nurse Practitioner \$20,000

Total per Intensive Outpatient Program Site **\$190,269**

TOTAL COST for Three Intensive Outpatient Program Sites: \$570,807

Strengthen Medical Services at Residential Programs

Individuals in residential treatment programs have complex medical needs, the need for medication assisted treatment (MAT), and quicker access to medical detoxification beds. The CSB’s detoxification program has a capacity of 25 beds; 13 of those can handle medical detoxification and 12 can accommodate clinically managed detoxification. CSB also needs additional medical staff to strengthen the services provided at its residential programs.

Upgrade 12 Existing Beds at Detox Center to Medical Detoxification Beds

- 1 Supervisor \$116,000
 - 1 Nurse Practitioner \$127,644
 - 3 Licensed Practical Nurses (LPNs) \$262,515
 - 2 Behavioral Health Nurses (BHNs) \$116,000
- Total for expanding number medical detox beds \$622,159**

Strengthen Medical Services and MAT at Other Residential Programs

- 1 Physician \$202,456
 - 1 Nurse Practitioner \$127,644
 - 1 BHN Nurse \$116,000
- Total for strengthening medical services \$446,100**

Provide Outreach Services to Individuals Post-Overdose

CSB has been partnering with law enforcement and the health department to monitor overdose occurrence and the use of naloxone in the Fairfax community. CSB would like to employ Peer Support Specialists to provide community outreach and engagement services to individuals as quickly as possible after any identified overdoses in the community. The staff can also be sent into the community to reach out to individuals who are at risk of overdose and try to engage them into clinical services.

6 Peer Support Specialists \$417,534

Testimony to the Board of Supervisors – FY 2018 Budget
Bettina Lawton, Secretary
Fairfax-Falls Church Community Services Board
April 6, 2017

Good afternoon. I am Bettina Lawton, Secretary of the CSB Board. My testimony focuses on FY 2018 funding levels for CSB developmental disabilities services.

CSB has new, legally mandated responsibilities to implement a redesigned system of services, funded through Medicaid waivers, for people with developmental disabilities. We are very grateful that the Advertised Budget includes an **additional** \$2.3 million and 22 new staff positions so we can carry out our new, mandated support coordination responsibilities.

Concerns have been expressed that the Advertised Budget contains no **new** funding for CSB's **Employment and Day Services**.

CSB is **not** mandated to provide employment and day services, but we have provided the services to people in our community with intellectual disability for many years, thanks to generous local funding. CSB is now challenged to provide services to people who have developmental disabilities **other than** intellectual disability, as well as to people we have traditionally served.

The advertised budget does **not** reduce funding for Employment and Day services; it just doesn't **increase** the funding. In fact, this service receives **more** funding than any other CSB Line of Business -- about \$26 million.

We believe the CSB has sufficient reserves to fund employment and day services for the anticipated number of 2017 FCPS special education graduates who will request them, and for other newly eligible individuals in the community who seek services in the near term.

For the long term, however, given the projected number of people who are **newly** eligible, the Board of Supervisors directed CSB to develop a new service model that would be both **equitable and sustainable**.

On February 21, the CSB presented to you the primary components of such a model, to be phased in during FY 2017 and 2018. Only new participants will be impacted; there will be no change for current service recipients.

The new model gives priority access to individuals who have a Medicaid waiver. Those without a waiver who demonstrate exceptional hardship will be served through local funding set aside by the Board of Supervisors. When that funding is exhausted, eligible individuals will be placed on a wait list, in order of need.

We believe this plan enables us to continue a non-mandated but valuable service in a way that can be sustained economically and equitably, while prioritizing individuals with the greatest need.

We recognize the difficult budget decisions you face this year. We support and appreciate the funding provided in the FY 2018 Advertised Budget for CSB developmental disabilities services.

Thank you.