



Community Services Board

FAIRFAX-FALLS CHURCH CSB BOARD MEETING

Bettina Lawton, Chair

Wednesday, January 27, 2021, 5:00 p.m.

Will be held electronically due to the COVID-19 pandemic

Live audio of the meeting may be accessed by dialing:

1-866-434-5269 and entering the Participant Access Code #343216

- | | | |
|--|---------------------|-----------|
| 1. <i>Meeting Called to Order</i> | Bettina Lawton | 5:00 p.m. |
| 2. <i>Roll Call and Audibility</i> | Bettina Lawton | |
| 3. <i>Preliminary Motions</i> | Bettina Lawton | |
| 4. <i>Matters of the Public</i> | Bettina Lawton | |
| 5. <i>Amendments to the Meeting Agenda</i> | Bettina Lawton | |
| 6. <i>Approval of the December 16, 2020 CSB Board Virtual Meeting and the January 21, 2021 CSB Board Member Retreat Workgroup Draft Minutes</i> | Bettina Lawton | |
| 7. <i>Staff Presentation</i> | | |
| A. Individual & Family Affairs and Peer Services | Michael T. Lane | |
| 8. <i>Electronic Health Record implementation</i> | Daryl Washington | |
| 9. <i>Director's Report</i> | Daryl Washington | |
| A. Services Update | | |
| B. COVID-19 Update | | |
| C. Other Updates | | |
| 10. <i>Matters of the Board</i> | | |
| 11. <i>Legislative Reports</i> | | |
| 12. <i>Action Items</i> | | |
| A. Approval of CSB Board Policy #1600 | Sheila Coplan-Jonas | |
| B. Approval of CSB Board By-laws | Bettina Lawton | |
| 13. <i>Closed Session: Consultation with legal counsel employed or retained 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).</i> | | |
| 14. <i>Adjournment</i> | | |

Meeting materials will be posted online at www.fairfaxcounty.com/municipal/community-services-board/board/archives or may be requested by contacting Erin Bloom at 703-324-7827 or at erin.bloom@fairfaxcounty.gov

Fairfax-Falls Church Community Services Board

Virtual Meeting Minutes

December 16, 2020

The Board met electronically due to the COVID-19 pandemic that has made it unsafe to physically assemble a quorum in one location or to have the public present. Access was made available via video and audio conference call to CSB Board members, CSB staff, and members of the public. The meeting notice, including participation instructions, was posted electronically and on the building in which the meeting is typically held. Additionally, attendees were provided an opportunity to register for public comment during the 30 minutes prior to the meeting being called to order.

The following CSB members were present: Bettina Lawton Chair; Jennifer Adeli; Karen Abraham; Daria Akers; Robert Bartolotta; Captain Derek DeGeare; Sheila Coplan Jonas; Larysa Kautz; Garrett McGuire; Srilekha Palle; Edward Rose; Andrew Scalise; Sandra Slappey, and Anne Whipple.

The following CSB Board members were absent: Daniel Sherrange; and Ken Garnes

The following CSB staff was present: Georgia Bachman; Jessica Burris; Evan Jones; Lisa Flowers; Shana Grady; Michael T. Lane; Elizabeth McCartney; Louella Meachem; Linda Mount; Michael Neff; Cindy Tianti; Lyn Tomlinson; Barbara Wadley-Young; Kristen Werner; and Marla Zometsky

1. Meeting Called to Order

Bettina Lawton, CSB Board Chair, called the meeting to order at 5:09 p.m.

2. Roll Call and Audibility

Ms. Lawton conducted a roll call with each CSB Board Member present, as identified above, to confirm that a quorum of CSB Board members was present and audible. Ms. Lawton passed the virtual gavel to CSB Board Vice Chair Jennifer Adeli to make several motions required to start the meeting.

A motion was offered confirming that each member's voice was audible to each other member of the CSB Board present, this motion was seconded by Edward Rose and passed unanimously.

3. Preliminary Motions

CSB Board Chair Bettina Lawton made a motion that the State of Emergency caused by the COVID-19 pandemic makes it unsafe for the CSB Board to physically assemble and unsafe for the public to physically attend any such meeting, and that as such, FOIA's usual procedures, which require the physical assembly of this CSB Board and the physical presence of the public, cannot be implemented safely or practically.

A further motion was made that this Board may conduct this meeting electronically through a dedicated audio-conferencing line, and that the public may access this meeting

by calling 1-877-336-1829 and using participant code 7703575. Motions were seconded by Edward Rose and unanimously approved.

Ms. Lawton made a final motion that that all the matters addressed on today's agenda are statutorily required or necessary to continue operations and the discharge of the CSB Board's lawful purposes, duties, and responsibilities. The motion was seconded by Edward Rose and unanimously passed.

4. Matters of the Public

Two members of the public attended via conference call to provide comment on concerns related to the consideration of contracting for some services including residential substance use disorder treatment that are currently provided by CSB staff.

5. Recognition

Offering a reminder that Ken Garnes was retiring from the Board this month, Bettina Lawton shared the content of a certificate developed for Mr. Garnes expressing appreciation for his eight years of dedicated and valued service to the residents of Fairfax County and the cities of Fairfax and Falls Church.

6. Amendments to the Meeting Agenda

The meeting agenda was provided for review. Bettina Lawton noted that the agenda incorrectly listed approval of the August 2020 CSB Board draft minutes, asking that this be revised to correctly indicate the November 2020 minutes. Following this revision, Edward Rose made a motion to approve the agenda as revised that was unanimously passed.

7. Approval of the Minutes

Draft minutes of the November 18, 2020 virtual meeting of the Fairfax-Falls Church Community Services Board were presented for review. As no further revisions were suggested, Edward Rose made a motion for approval, which was seconded by Captain Derek DeGeare and passed unanimously.

8. Staff Presentation

Louella Meachem directed attention to the presentation slides displayed on the meeting screen noting that each section would be provided by a senior staff member from the identified area. Highlights of the presentations are provided below:

- Ms. Meachem clarified that she is the Director of four service areas including Nursing, EAR (Engagement Assessment & Referral), WHPP (Wellness, Health Promotion, and Prevention), and Primary Care Integration. Ms. Meachem introduced team members Shana Grady, Assessment Unit Manager & Health Care Integration Program Director and Kristen Werner, Assessment Unit Supervisor who will present the EAR information, and Marla Zometsky, Wellness, Health Promotion, and Prevention Manager who will provide the WHPP service area presentation.
- *Nursing*: included in the review of each slide was clarification that FIT testing includes medical clearance of staff to ensuring a proper fit of the N-95 respirator masks to the wearer.

- *EAR*: staff management of the revisions to service delivery as well as the numbers of individuals served due to COVID-19 were highlighted, noting the successful implementation of telehealth service delivery and increased teleworking. Lessons learned while adjusting to the changes have resulted in some planned service improvements including increased focus on equity and some changes to the initial contact process.
- *WHPP*: the review of the slides included some clarification to WHPP programs including the DBHDS Priority Prevention Strategies that are statewide initiatives. Some additional details were provided to include:
 - *Al's Pals* is a program for childcare providers and some kindergartens on social/emotional learning and development in children up to age eight.
 - *SOR (State Opioid Response Grant)* supports opioid abuse prevention and intervention programs.
 - *Regional Suicide Prevention* supports several programs including Kognito and CrisisLink and supports the Fairfax Prevention Coalition.
 - *Counter Tools* offers merchant education to the approximately 638 vendors in Fairfax County on the sale of tobacco products to minors.
 - *ACE (Adverse Childhood Experiences) Interface Training*: is a presentation on the impact of adversity in childhood that impacts physical and mental health. The CSB, FCPS (Fairfax County Public Schools) and the Trauma Informed Community Network partner in this initiative.
 - *Community Coalition Development*: includes several programs and initiatives illustrated in the materials provided.

Members and staff engaged in robust discussion following the presentations.

9. Director's Report

Multiple agency updates were provided by CSB staff as listed below.

- Assistant Deputy of Community Living Treatment & Supports, Barbara Wadley-Young provided an update to the placement of the individuals impacted by the Etron contract cancellation, noting that services are now contracted through ECHO. Efforts are ongoing to work with the impacted individuals and their families to transition all 49 of the individuals.
- Director of Clinical Operations, Lyn Tomlinson directed attention to the Time to Treatment charts included in the meeting materials (9A-1 – 9A-4). Noting little change in the youth wait times and only minor improvements to adult wait times, this was attributed to increased staff vacancies primarily attributed to pandemic leave.
- Referencing the Substance Use Disorder Residential waiting list charts (9D-1 – 9D-5), Ms. Tomlinson highlighted the decreased census primarily attributed to meeting physical distance requirements. It was further reported that between July 2019 and June 2020, a total of 38 individuals were provided Substance Use Disorder contract or Purchase of Service (POS) services. Bettina Lawton requested additional information related to the data provided on the FY18 – FY20 SUD Residential Programs Service Totals (9D-4).

- Director of Analytics and Evaluation, Linda Mount, provided an overview of the Clients Served-Average Weekly Count charts (9A-5 – 9A-14) clarifying that the data reflects the number of individuals served each day by week. It was further clarified that a light blue bar graph line indicates an individual receiving services while a dark blue line indicates face-to-face or televideo or telehealth services were provided.
- Deputy Director of Administrative Operations, Michael Neff, providing an update to COVID-19 procedures, reported a significant increase in CSB staff testing positive. It was confirmed that communication and vigilance/awareness has increased. Additionally, cleaning protocols have been strengthened. It was clarified that meetings are held via technology, and if meeting in-person, vigorous physical distancing is employed.
- Mr. Neff also provided an overview of the HR report (9C-3) highlighting the total vacant general merit positions is 86, just under the vacancy breakeven point (VBP) of 89 set by DMB (Department of Management and Budget). Mr. Neff described recent efforts to track the daily number of staff on leave, offering a reminder of the numerous leave options during COVID. It was discovered that total staff vacancies have totaled more than 300 positions (out of 1,237) in a day, further supporting the need for flexibility from DMB for increased hiring.
- Mr. Neff, directing attention to the chart on page 9D-5 in the meeting materials, reported the data provided the costs for directly operating the Substance Use Disorder Residential programs. Mr. Neff and Ms. Burris provided an overview of the table including the methodology employed, noting the data covers the three prior fiscal years.
- Further, Mr. Neff referred to comments from previous CSB Board meetings, provided clarification for offering an RFP (Request for Proposal) vs. an RFI (Request for Information) when seeking vendors. An RFI *can* include a request for a cost proposal, however, the vendor is not held to the proposal provided if/when also submitted an RFP.
- Jessica Burris, Chief Financial Officer, provided an overview of the financial documents some highlights of which included:
 - *November Modified Fund Statement:* Better than expected non-county revenue was attributed to an atypical third payment as noted in State DBHDS and Federal Pass Thru SAPT Block Grant line items that will be reconciled in December. The CSB was reimbursed approximately \$280K in reprocessed claims following an internal audit conducted by a contracted MCO (Managed Care Organization).
 - *Variable Revenue Analysis:* Overall, revenue is exceeding expectations, noting minor differences in the target vs. actuals.
- Elizabeth McCartney, Legislative Liaison, directed attention to the document titled VACSB Budget Priorities for State Fiscal Year 2022 (Virginia Association of Community Services Board) noting that this document is typically included in the legislative packets that were provided in support of legislative outreach in October 2020. It was confirmed that any update to the VACSB budget priorities

will be provided once published. Additionally, Ms. McCartney confirmed that Governor Northam had released the final budget amendments allowing the draft testimony provided by CSB Board members at the January Budget Hearings to be finalized.

Members and staff engaged in robust discussion following each report.

10. Matters of the Board

Bettina Lawton reported that initial revisions to the CSB Board Bylaws were nearly completed, noting that a draft copy will be forwarded to the full CSB Board for further review and recommendation. Members were encouraged to review and reply in a timely manner. A reminder was offered that the draft By-laws will be submitted at the January 2021 CSB Board meeting for approval to send to the Board of Supervisors for final approval in February 2021.

11. Action Item

A. *CSB Board Policy Approval*

CSB Board policy #2120 was submitted to the CSB Board for final review and approval. Acknowledging that no further recommendations were forthcoming Sheila Jonas made a motion to approve the policies as submitted that was seconded by Daria Akers and unanimously approved.

There being no further business to come before the CSB Board, the meeting was adjourned at 7:24 p.m.

Actions Taken - -

- Motions required to start the virtual meeting including roll call & audibility, safety, electronic meeting and public access, and continuity in government were offered by Bettina Lawton, seconded, and passed.
- The November 18, 2020 CSB Board Meeting minutes were approved as presented.
- Additional information related to the data provided on the FY18 – FY20 SUD Residential Programs Summary (9D-4) will be provided to the Board.
- CSB Board policy #2120 was approved.

Date Approved

Staff to the CSB Board

Fairfax-Falls Church CSB Board Member
Retreat Workgroup Minutes
January 21, 2021

A workgroup of the Fairfax-Falls Church Community Services Board (Board) was held virtually via Zoom and AT&T Bridge Line conference call. The workgroup was conducted electronically due to the COVID-19 pandemic that has made it unsafe to physically assemble a quorum in one location or to have the public present. Access was made available via video and audio conference call to CSB Board members, CSB staff, and members of the public. The meeting notice, including participation instructions, was posted electronically and on the building in which the meeting is typically held. Additionally, attendees were provided an opportunity to register for public comment during the 30 minutes prior to the meeting being called to order.

The following CSB members attended virtually: Bettina Lawton Chair; Jennifer Adeli; Karen Abraham; Daria Akers; Robert Bartolotta; Captain Derek DeGeare; Larysa Kautz; Srilekha Palle; Edward Rose; Andrew Scalise; Daniel Sherrange; Sandra Slappey, and Anne Whipple.

The following CSB Board members were absent: Sheila Coplan Jonas; and Garrett McGuire

The following CSB staff was present: Daryl Washington and Lyn Tomlinson

Presenters included: Cynthia Bailey, Deputy County Attorney, County of Fairfax

1. Meeting Called to Order

CSB Board Chair Bettina Lawton called the meeting to order at 5:00 p.m.

2. Roll Call and Audibility

Ms. Lawton conducted a roll call with each CSB Board Member present, as identified above, to confirm that a quorum of CSB Board members was present and audible. Ms. Lawton passed the virtual gavel to CSB Board Vice Chair Jennifer Adeli to make several motions required to start the meeting.

A motion was offered confirming that each member's voice was audible to each other member of the CSB Board present, this motion was seconded by Edward Rose and passed unanimously.

3. Preliminary Motions

CSB Board Chair Bettina Lawton made a motion that the State of Emergency caused by the COVID-19 pandemic makes it unsafe for the CSB Board to physically assemble and unsafe for the public to physically attend any such meeting, and that as such, FOIA's usual procedures, which require the physical assembly of this CSB Board and the physical presence of the public, cannot be implemented safely or practically.

A further motion was made that this Board may conduct this meeting electronically through a dedicated audio-conferencing line, and that the public may access this meeting

by calling 1-877-336-1829 and using participant code 7703575. Motions were seconded by Edward Rose and unanimously approved.

Ms. Lawton made a final motion that that all the matters addressed on today's agenda are statutorily required or necessary to continue operations and the discharge of the CSB Board's lawful purposes, duties, and responsibilities. The motion was seconded by Edward Rose and unanimously passed.

4. Matters of the Public

None were offered.

5. Closed Session

At 5:15 p.m. a motion was offered, seconded, and passed to go into Closed Session for consultation with legal counsel regarding specific legal matters requiring the provision of legal advice by such counsel--specifically legal advice to the Board regarding their obligations and responsibilities to produce public records and adhere to the open meeting requirements under the Virginia Freedom of Information Act, privacy matters under HIPAA, and the retention of records under the Virginia Public Records Act.

6. Reconvene Open Session

At 6:05 p.m. the Board reconvened the open session at which time a motion was offered, seconded and passed, that in accordance with Virginia Code Section 2.2-3712, the CSB Board certify that, to the best of each member's knowledge, only public business matters lawfully exempted from open meeting requirements under the Virginia Freedom of Information Act and only such public business matters as were identified in the motion by which the Closed Session was convened were heard, discussed, or considered in Closed Session.

There being no further business to come before the Board, a motion to adjourn was offered, seconded, and carried. The meeting was adjourned at 6:08 p.m.

Actions Taken –

- ◆ Board entered Closed Session
- ◆ Board reconvened Open Session

Date

Staff to the CSB Board



FAIRFAX - FALLS CHURCH

**Community
Services Board**

Peer Support Services

Office of Individual and Family Affairs (OIFA)

**Michael T. Lane, M.A. Ed., NCPS
January 2021**

Why Peer Support?



FAIRFAX - FALLS CHURCH

Community Services Board

- Shared Experience of Disconnection
 - Trauma
 - Unsustainable way of life
 - Criminality
 - Reality not shared by others
 - Devastated Relationships
 - Irreversible Consequences
- Promotes
 - Hope
 - Choice



Why Peer Support?



FAIRFAX - FALLS CHURCH

Community Services Board

- Evidence Based
 - ↑ Housing Stability
 - ↑ Treatment Retention
 - ↑ Access to Social Supports
 - ↓ Hospitalization
 - ↓ Criminal Justice Involvement
 - ↓ Substance use
 - ↓ Relapse Rate
- Cost Effective
- Promotes System Transformation



Example Services



FAIRFAX - FALLS CHURCH

Community Services Board

- Education on recovery and wellness pathways and options
- Recovery planning
- Resource Connection
- Liaison with clinical staff
- Coaching through the experience of trying new skills, treatment, and relationships
- A model of:
 - Creating and sustaining healthy relationships
 - Successful employment
 - Effectively coping with trauma
 - Having fun in Recovery
 - Becoming one's best self



Where to Find Peer Support



FAIRFAX - FALLS CHURCH

Community Services Board

CSB Programs Served

- Emergency Services*
- Mobile Crisis*
- Crisis Care
- Jail Diversion
- Intensive Case Management*
- Program for Assertive Community Treatment (PACT)
- Homeless Support (PATH)
- Supportive Residential*
- Merrifield Front Door**
- Intensive Outpatient (IOP) at Reston** and Chantilly**
- Cornerstones Residential Treatment
- Turning Point (Early Psychosis)*
- Peer Overdose Response Team (PORT)*
- Striving to Achieve Recovery Program (STAR) at the jail*
- Substance Outreach Monitoring & Engagement (SOME)*
- Mental Health Case Management at Gartlan* and Reston**

*Programs in which the number of individuals receiving a peer support service was tracked in FY20

** Newly available peer support services in FY21

Peer Support Budget



FAIRFAX - FALLS CHURCH

Community Services Board

- CSB Peer Specialists
 - \$2M
 - 35 positions
 - 9 Training Positions
- Contracted Services
 - \$1.7M
 - 4 Peer Recovery Centers*
 - Peer Employment Support
 - BeWell Program*
 - Jail Re-Entry Support**



*Programs in which the number of individuals receiving a peer support service was tracked in FY20

** Newly available peer support services in FY21

Number Served



FAIRFAX - FALLS CHURCH

Community Services Board

- Fiscal Year 2020
 - 5,195 individuals
 - In the 13 programs tracking this data (directly operated and contracted)
- Fiscal Year 2021
 - 7 additional programs track data on peer support services.



Director of Peer Support



FAIRFAX - FALLS CHURCH

**Community
Services Board**

- **Oversee Peer Specialists**
 - Quality Assurance
 - Scope
- **Strategic Planning**
- **Consultation on program implementation**
- **Training development and delivery**
- **Personnel Issues**



OIFA Staffing: 32 Positions



FAIRFAX - FALLS CHURCH

**Community
Services Board**

Leadership

- 1 Director
- 1 Manager (new)
- 2 Supervisors
- 1 Human Service Worker IV (Supervisor)
- 1 Management Analyst

Direct Service Staff

- 1 Human Service Worker I
- 15 Peer Support Specialists (Managed by OIFA)
 - 4 Merit
 - 11 Non-Merit
- 10 Peer Support Specialists in Residence (non-Merit)
- 18 Peer Support Specialists (Managed by other service areas)
 - 9 Merit
 - 10 non-Merit

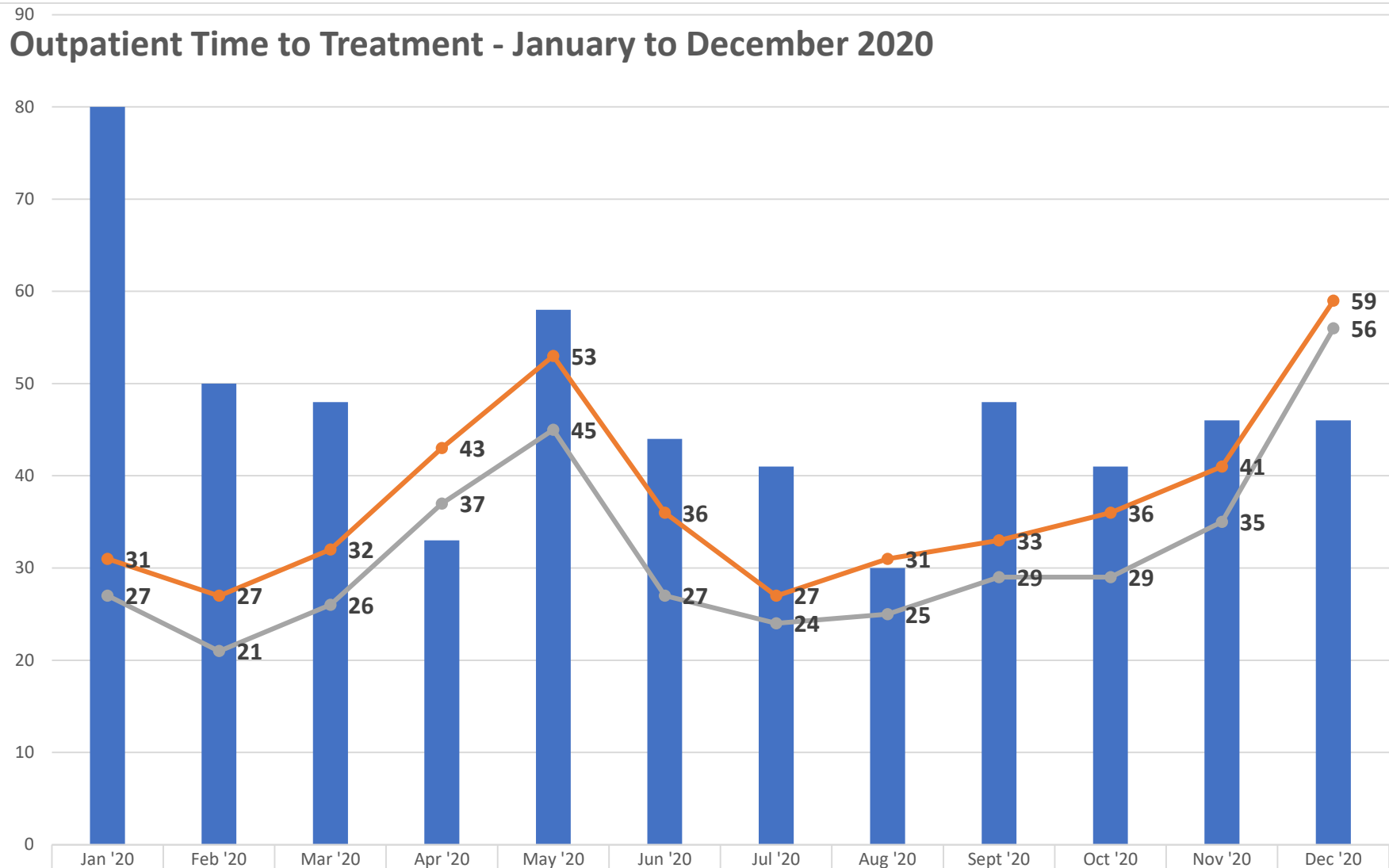


FAIRFAX - FALLS CHURCH

**Community
Services Board**

Questions?

Adult Outpatient Time to Treatment - January to December 2020

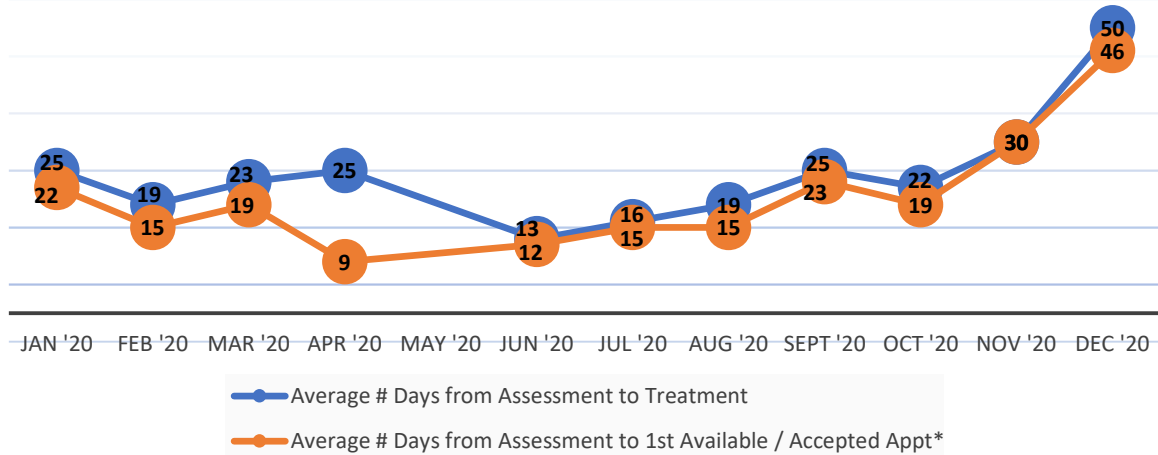


	Jan '20	Feb '20	Mar '20	Apr '20	May '20	Jun '20	Jul '20	Aug '20	Sept '20	Oct '20	Nov '20	Dec '20
# Adults Who Attended 1st Treatment Appt	80	50	48	33	58	44	41	30	48	41	46	46
Average # Days from Assessment to Treatment	31	27	32	43	53	36	27	31	33	36	41	59
Average # Days from Assessment to 1st Available / Accepted Appt*	27	21	26	37	45	27	24	25	29	29	35	56

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

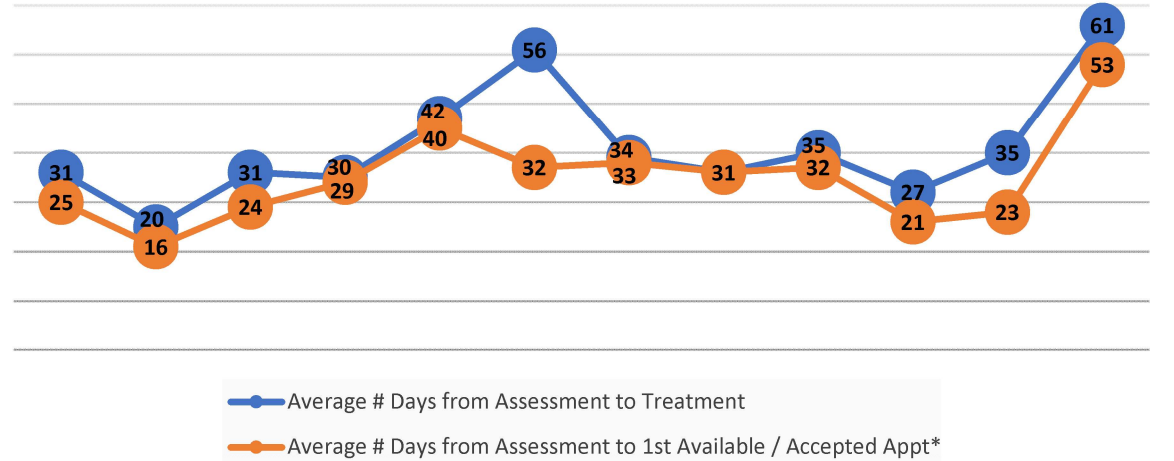
Adult Outpatient Time to Treatment - January to December 2020 by Site

Chantilly Average Time to Treatment



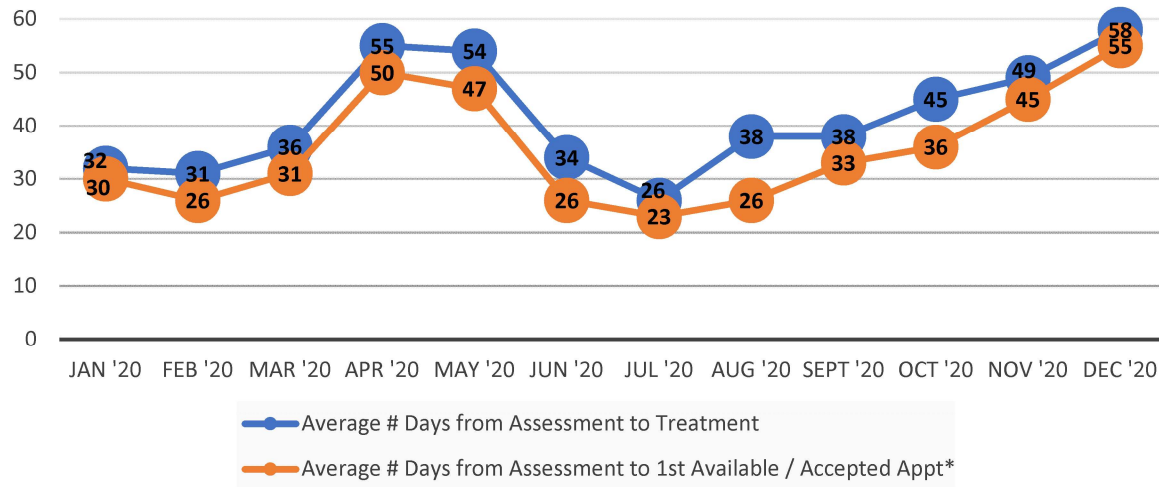
**there were no referrals from Entry & Referral that began services in May at Chantilly

Gartlan Average Time to Treatment

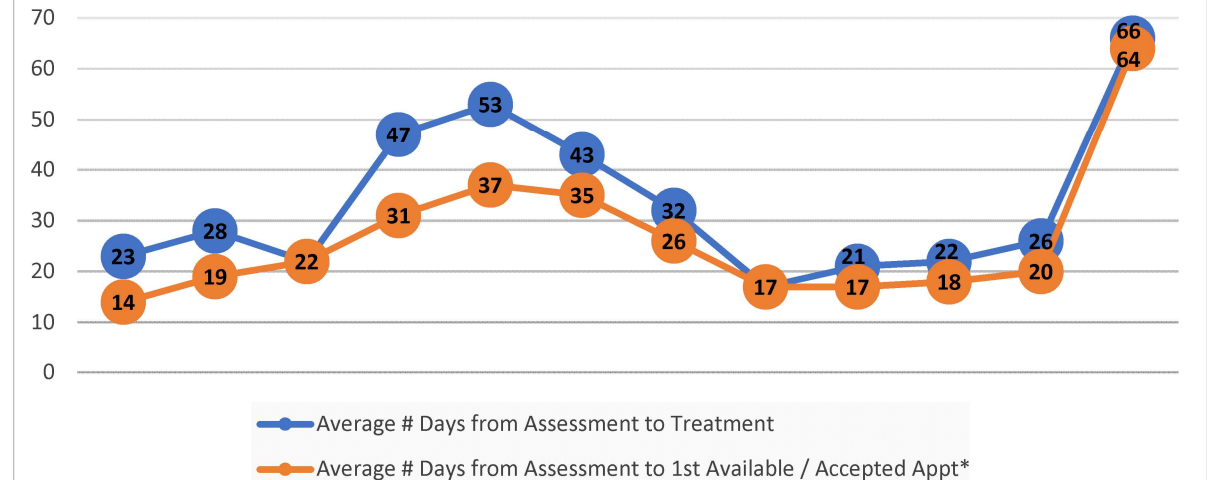


**time from Assessment to Orientation and 1st offered/accepted was the same for Aug '20

Merrifield Average Time to Treatment

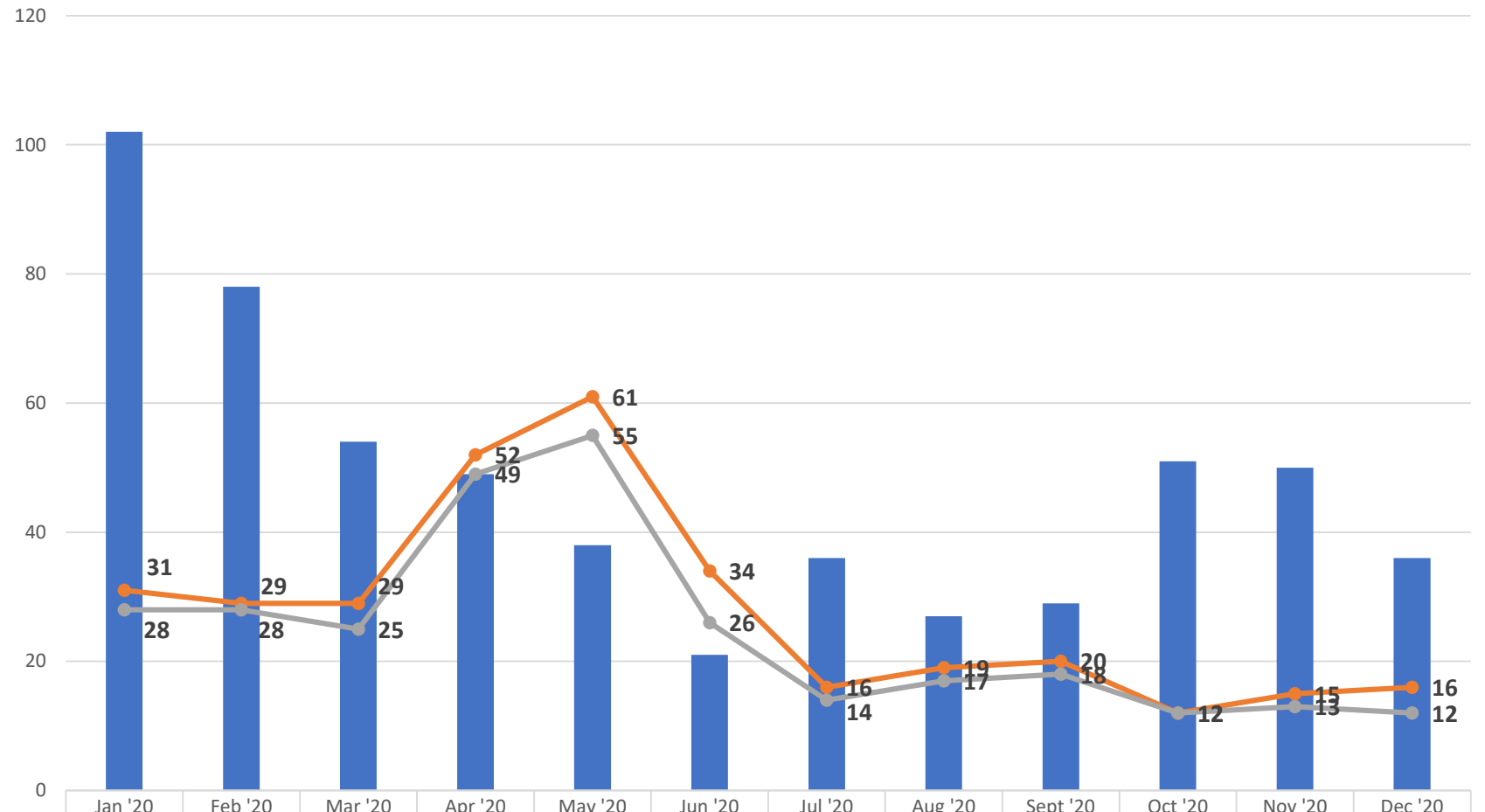


Reston Average Time to Treatment



**time from Assessment to Orientation and 1st offered/accepted was the same for Aug '20

Youth Outpatient Time to Treatment - January to December 2020

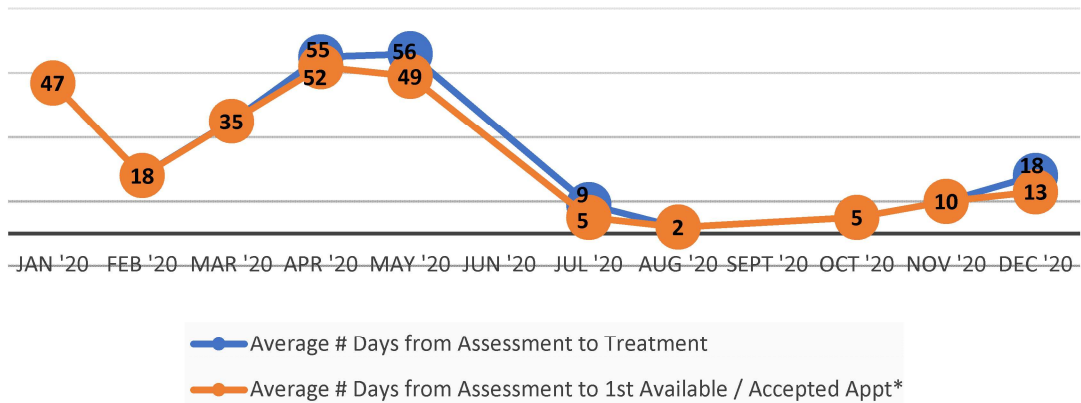


	Jan '20	Feb '20	Mar '20	Apr '20	May '20	Jun '20	Jul '20	Aug '20	Sept '20	Oct '20	Nov '20	Dec '20
# Youth Who Attended 1st Treatment Appt	102	78	54	49	38	21	36	27	29	51	50	36
Average # Days from Assessment to Treatment	31	29	29	52	61	34	16	19	20	12	15	16
Average # Days from Assessment to 1st Available / Accepted Appt*	28	28	25	49	55	26	14	17	18	12	13	12

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

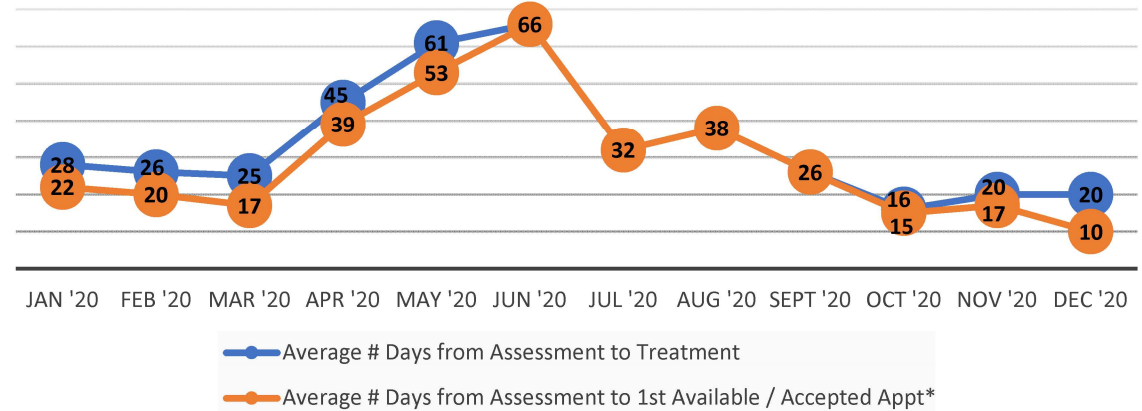
Youth Outpatient Time to Treatment - January to December 2020 by Site

Chantilly Average Time to Treatment



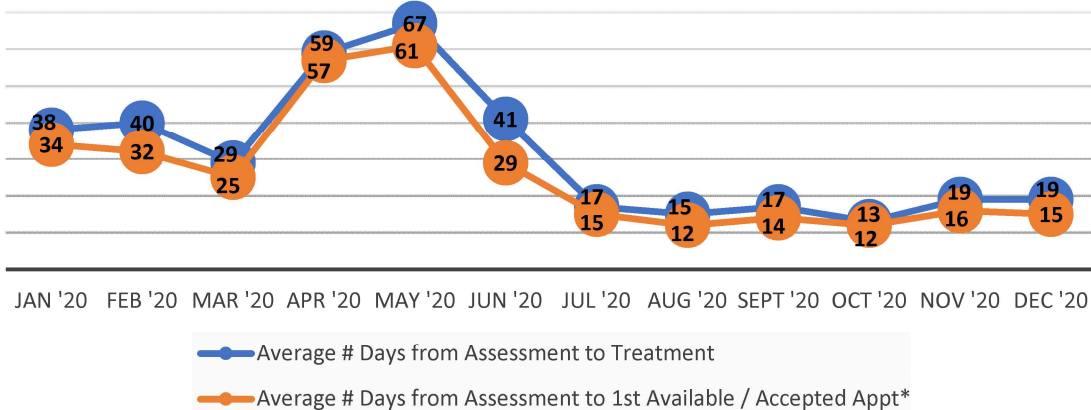
For Chantilly, average days from assessment to treatment AND average days from assessment to 1st available/accepted are the same for Jan - Mar 2020 , Aug '20, Oct '20 & Nov '20; For June '20 & Sept'20, no new clients received orientation @ Chantilly

South County Average Time to Treatment

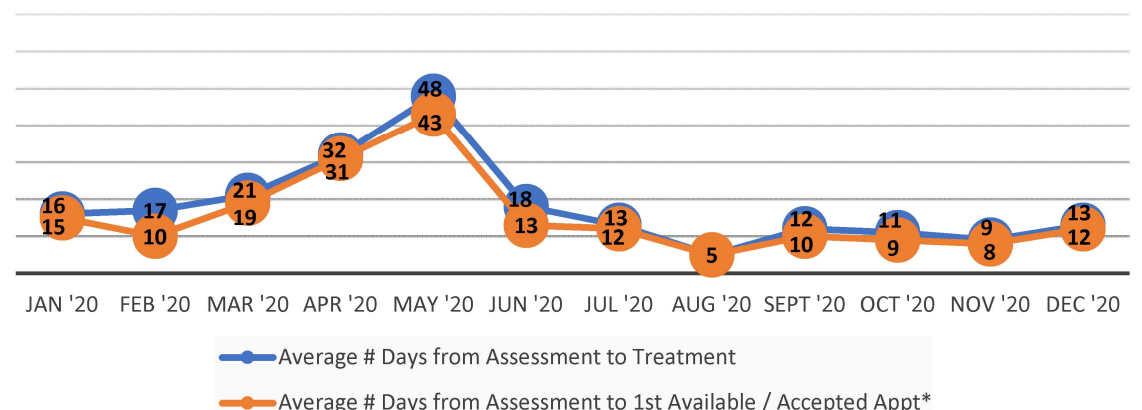


For South County, average days from assessment to treatment AND average days from assessment to 1st available/accepted is the same for Jun '20, Jul '20, Aug '20 & Sept '20

Merrifield Average Time to Treatment



Reston Average Time to Treatment

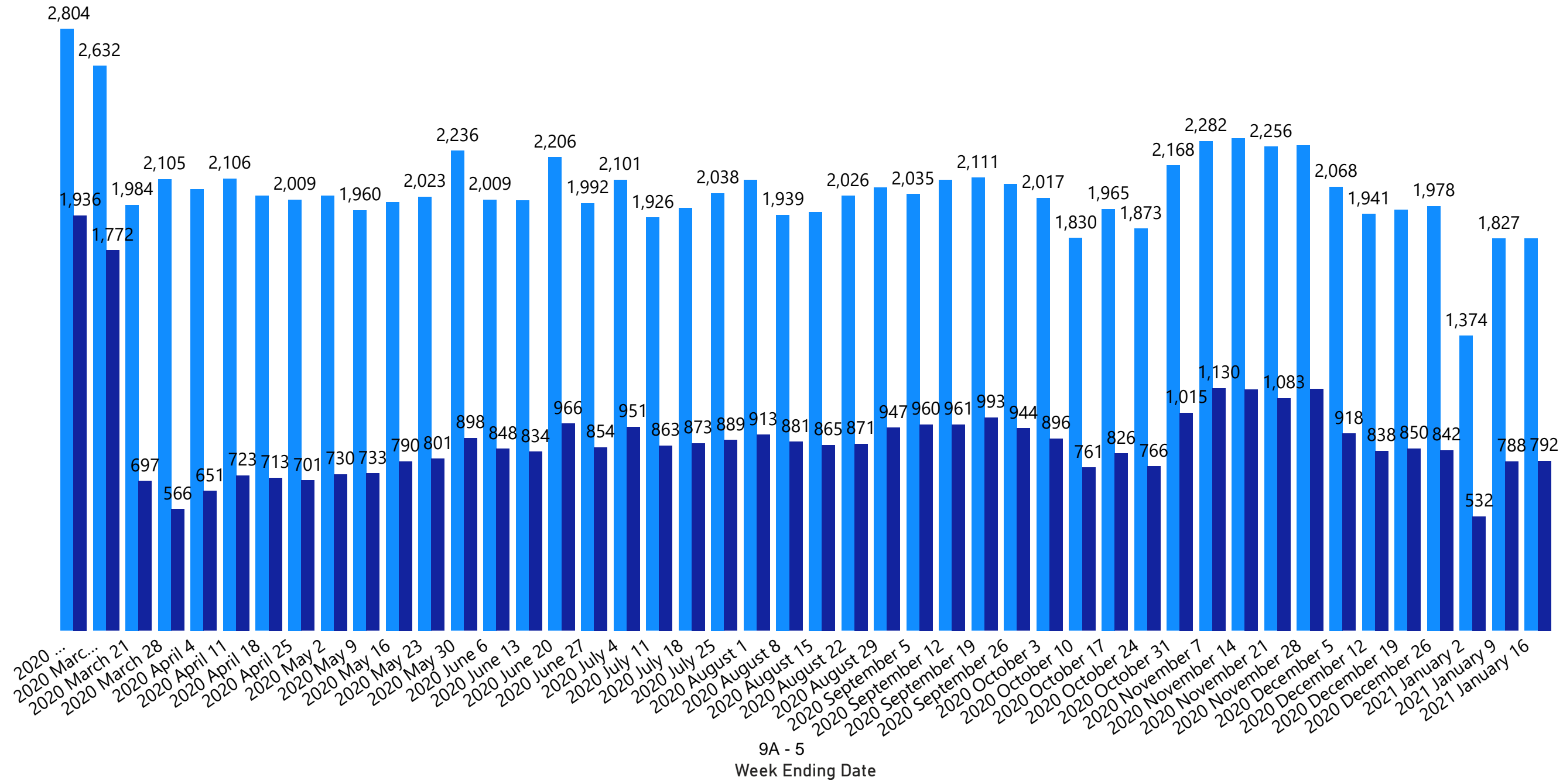


For Reston, average days from assessment to treatment AND average days from assessment to 1st available/accepted is the same for Aug'20

CSB Overall- Average Weekly Count Of Clients Served

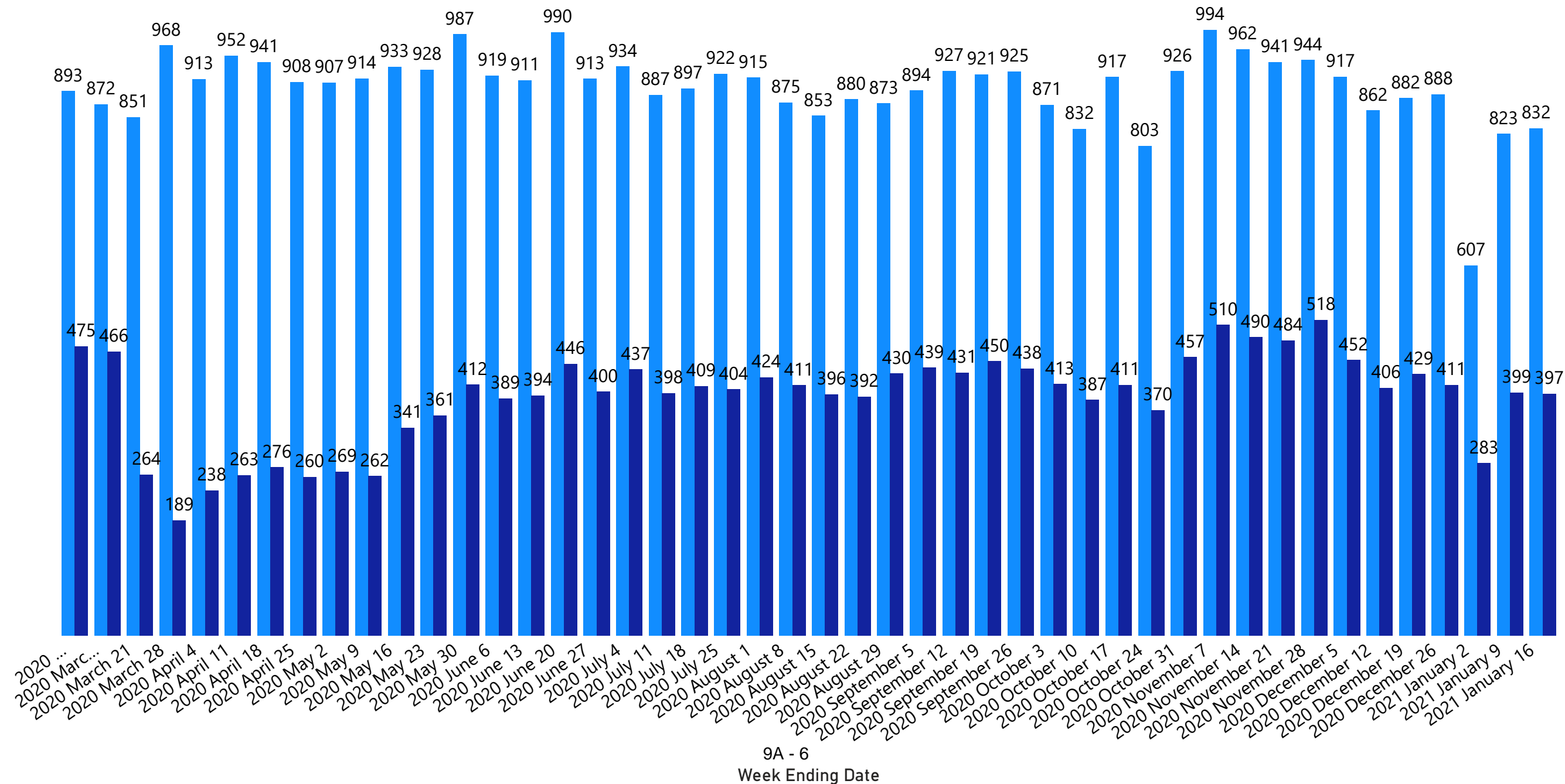
Excludes Emergency & Residential

● Avg. Client Ct. ● AVG.F2F



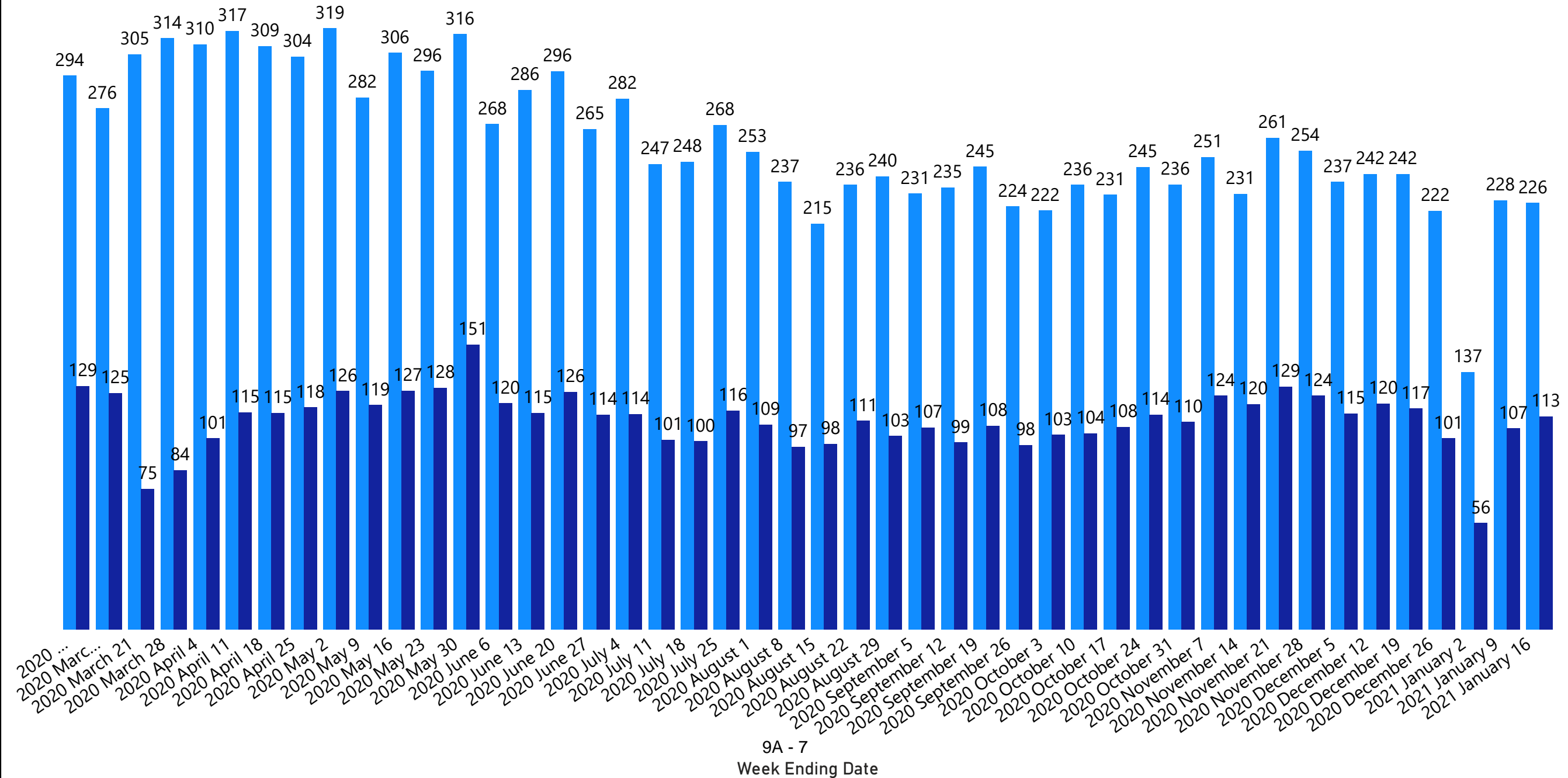
BH Adult Outpatient-Average Weekly Count Of Clients Served

● Avg. Client Ct. ● AVG.F2F



BH Youth Outpatient-Average Weekly Count Of Clients Served

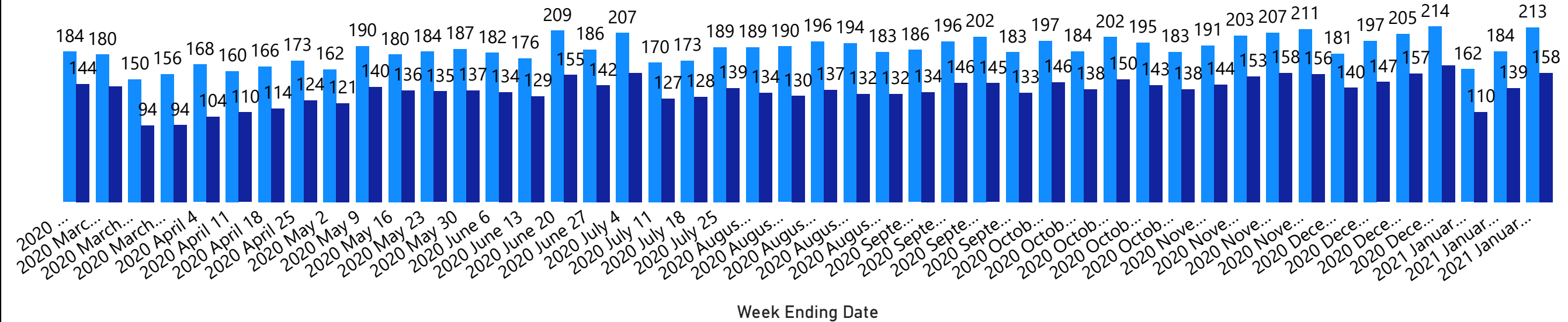
● Avg. Client Ct. ● AVG.F2F



9A - 7
Week Ending Date

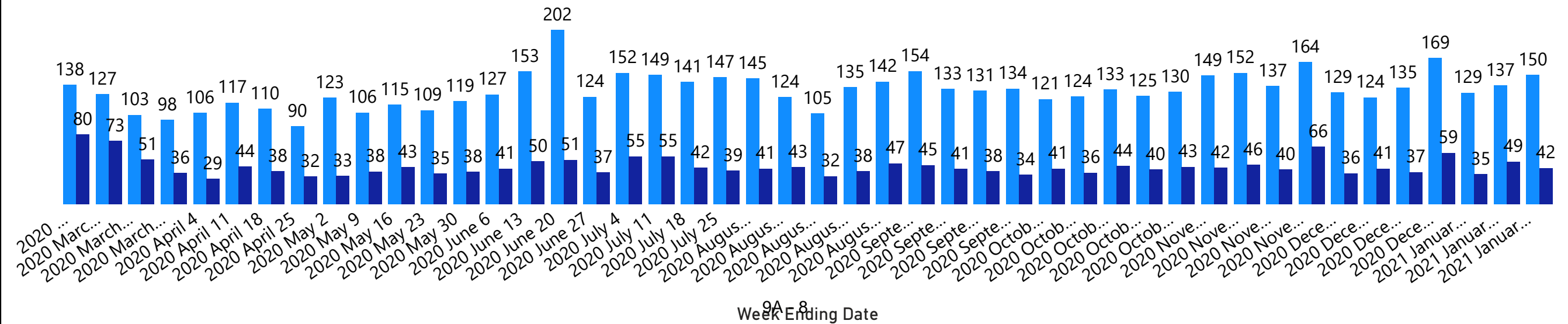
Doctors & NP - Average Weekly Count Of Clients Served

● Avg. Client Ct. ● AVG.F2F



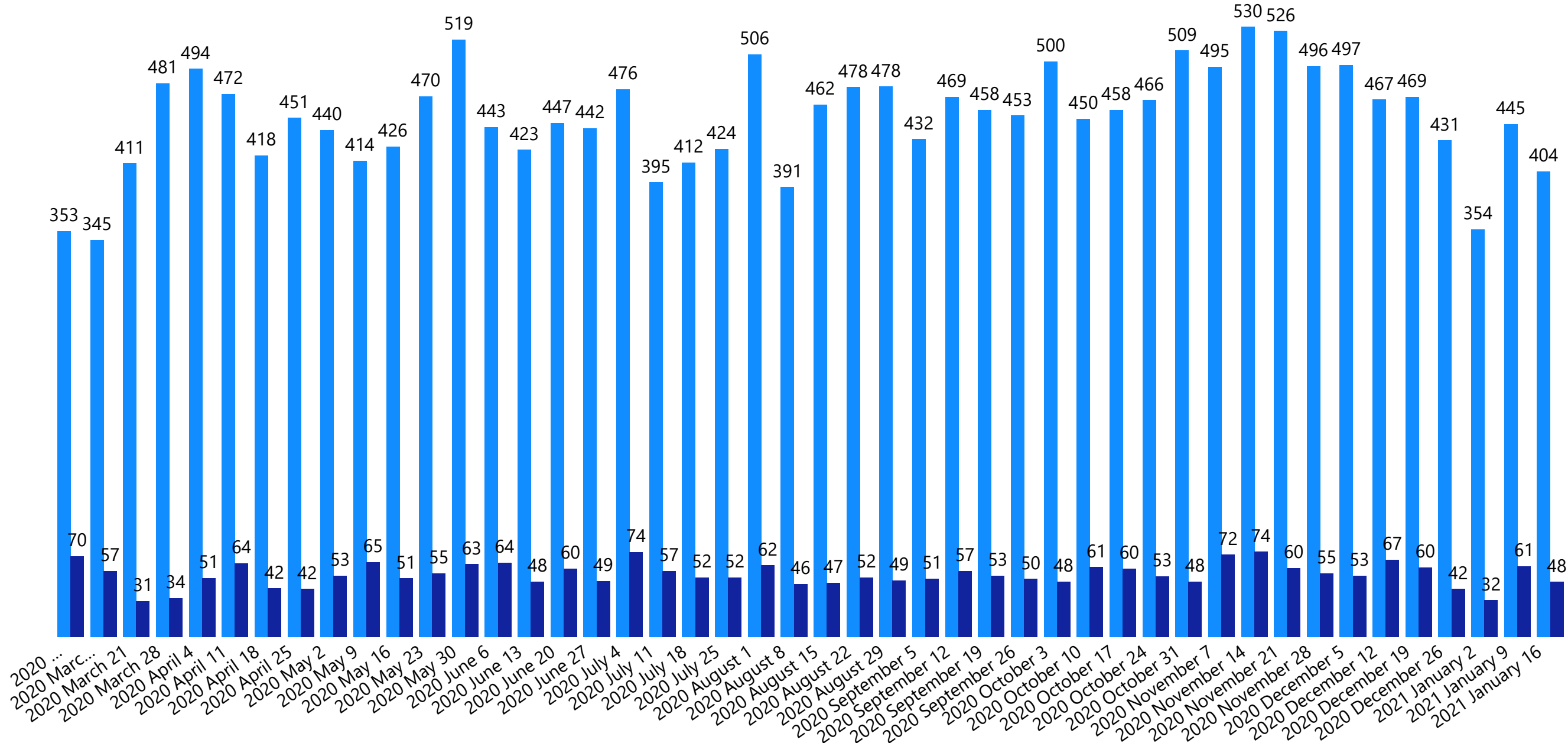
Outpatient Nursing - Average Weekly Count Of Clients Served

● Avg. Client Ct. ● AVG.F2F



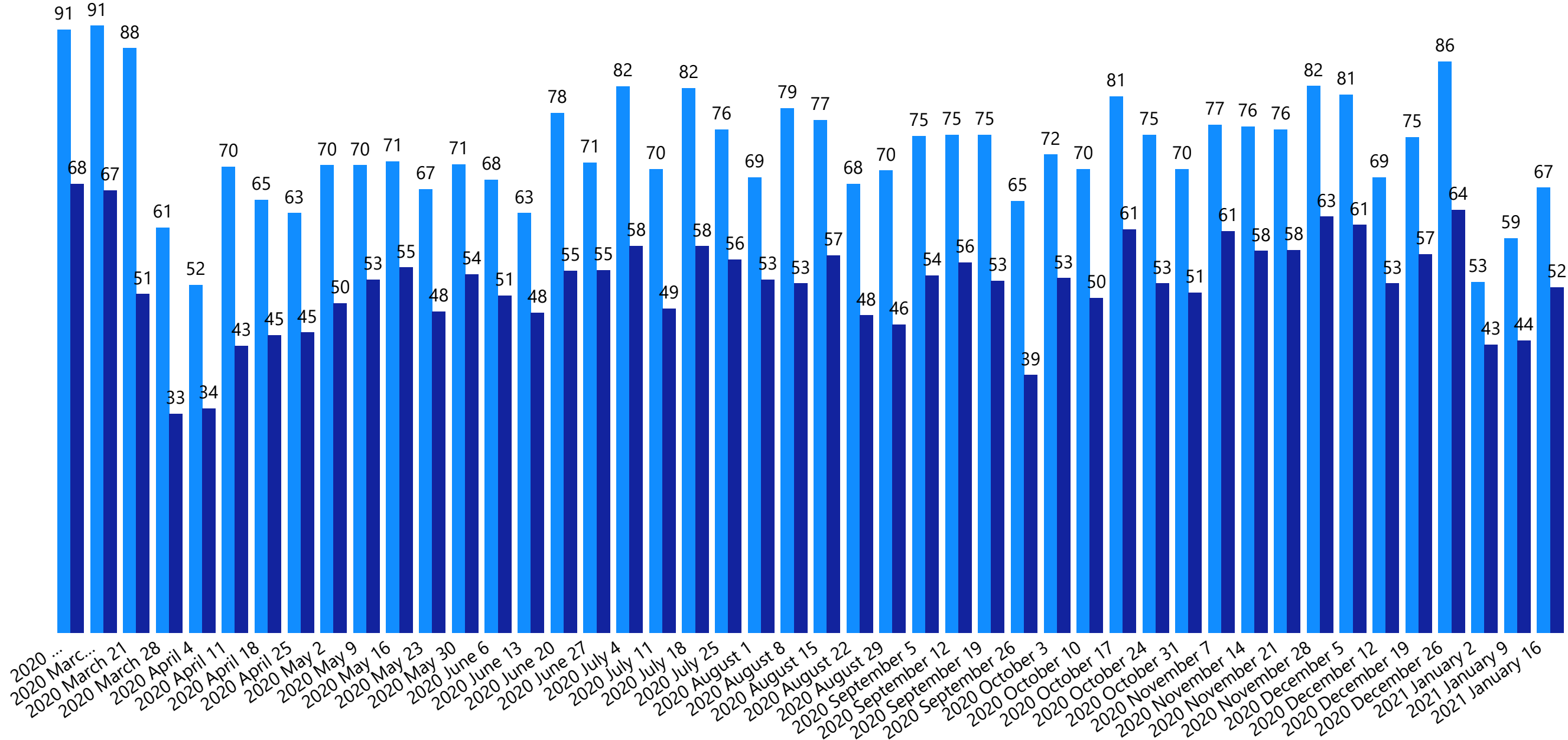
Support Coordination-Average Weekly Count Of Clients Served

● Avg. Client Ct. ● AVG.F2F



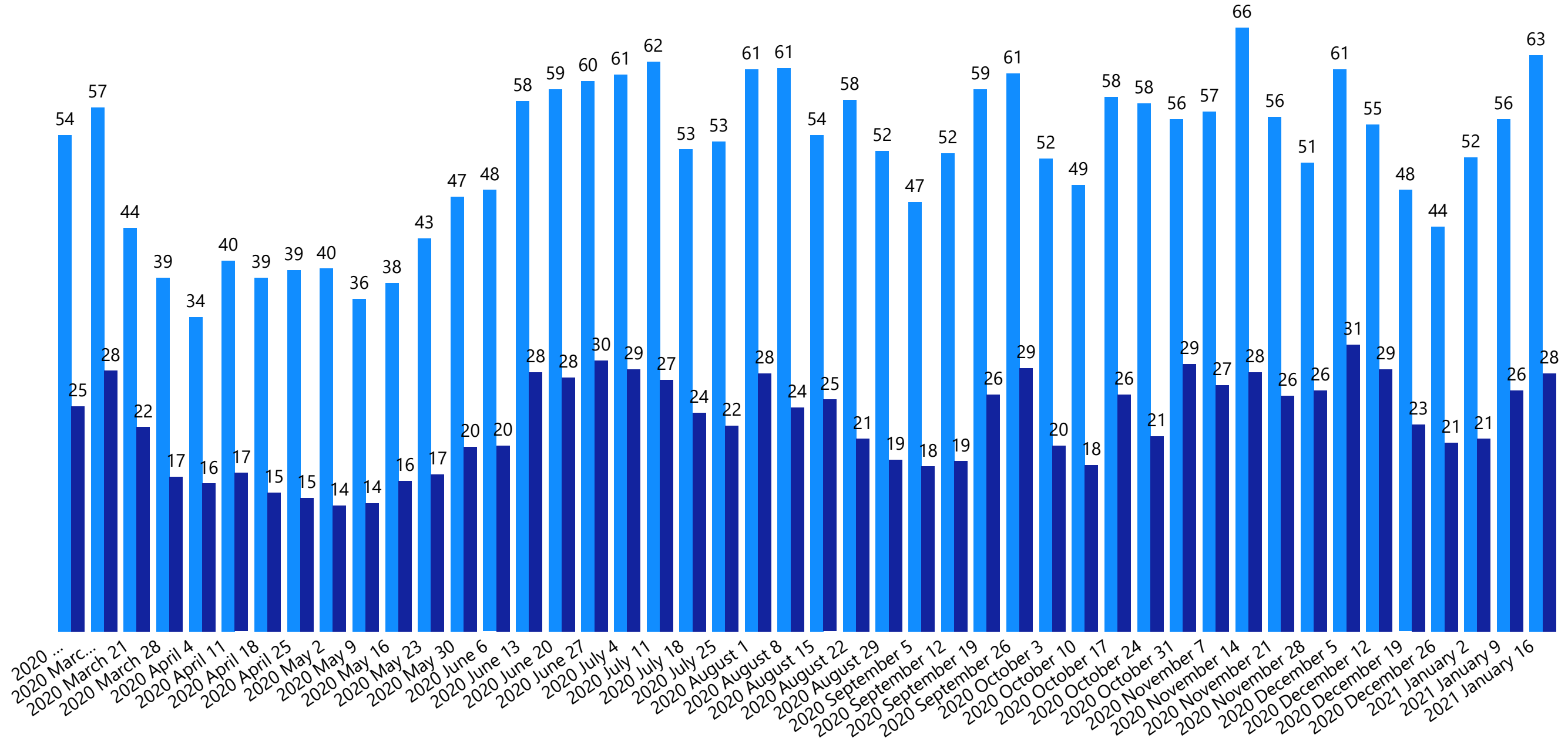
ADC/JDC/Court-Average Weekly Count Of Clients Served

● Avg. Client Ct. ● AVG.F2F

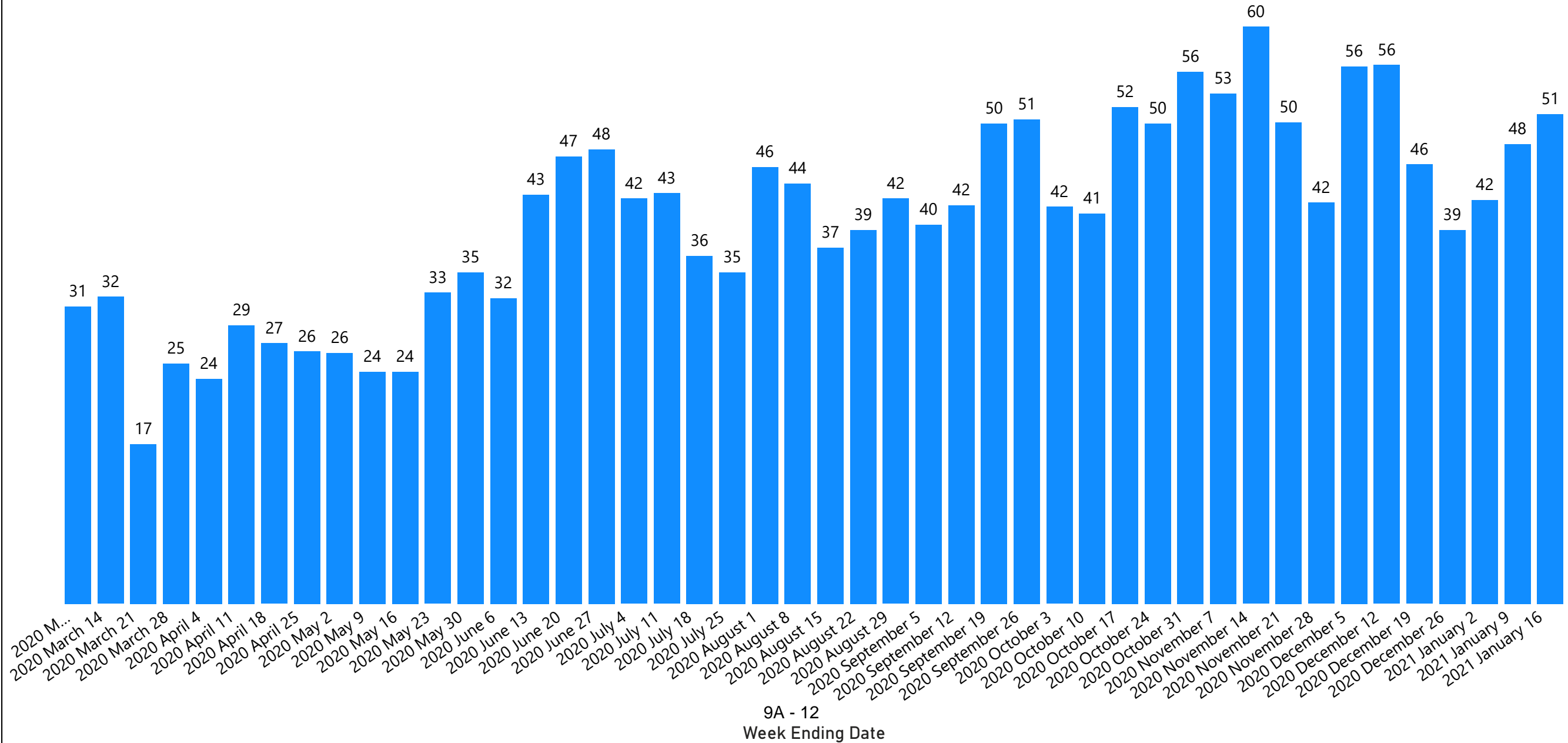


Emergency-Average Weekly Count Of Clients Served

● Avg. Client Ct. ● AVG.F2F

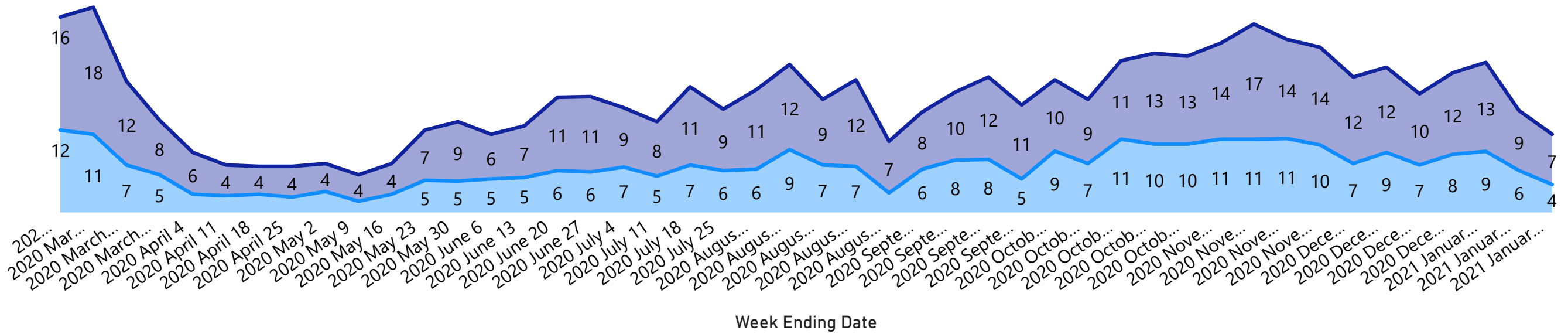


Emergency - Weekly Average Count Of Telephone Calls

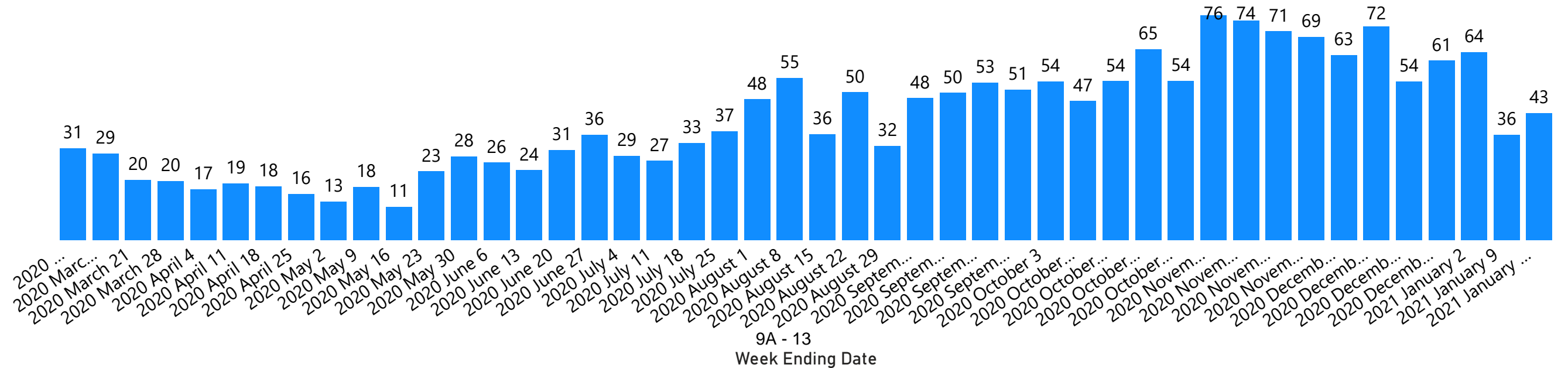


EAR-Weekly Average Count of Screening & Assessments By Day

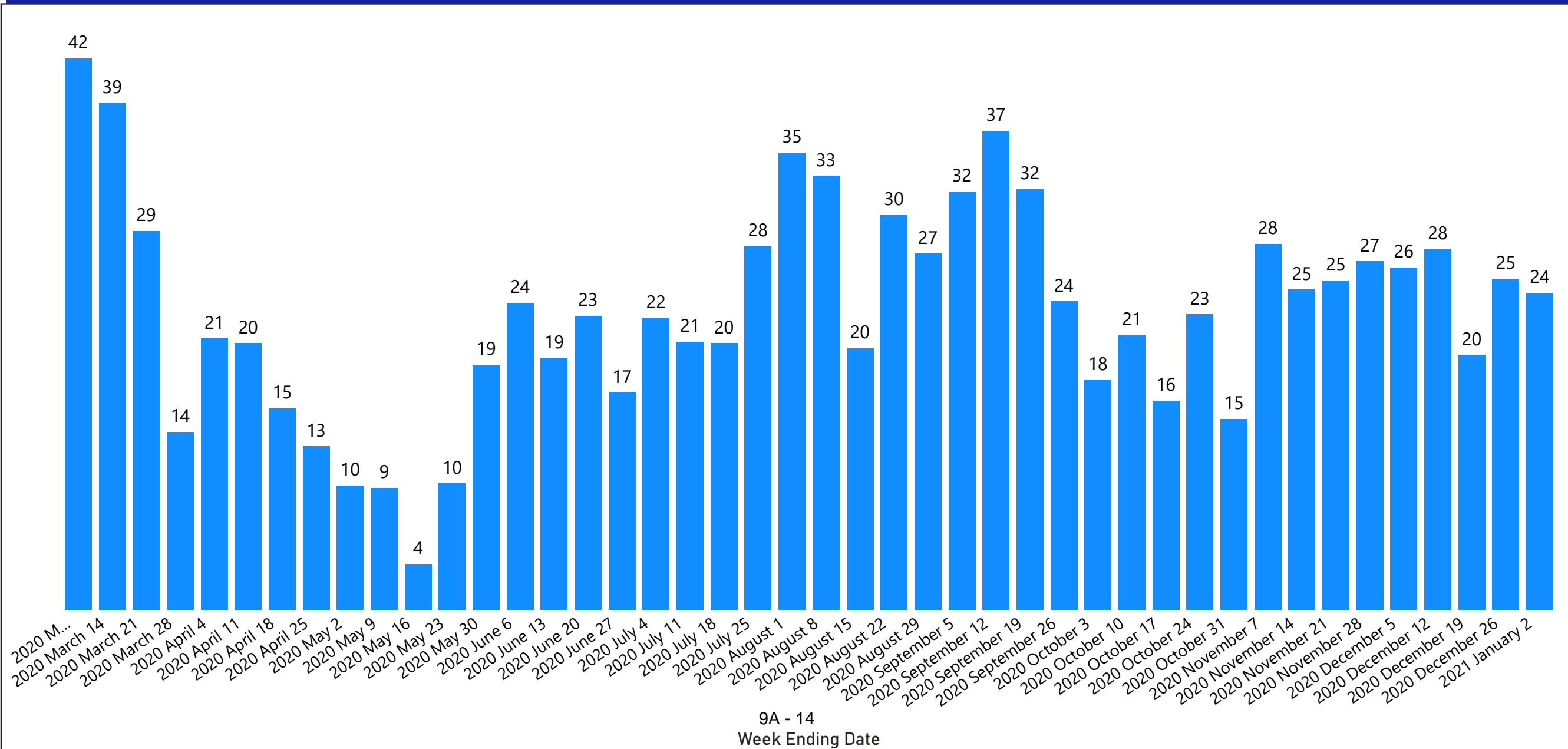
● average daily assessment ● average daily screening



EAR-Weekly Average Count Of Clients By Day

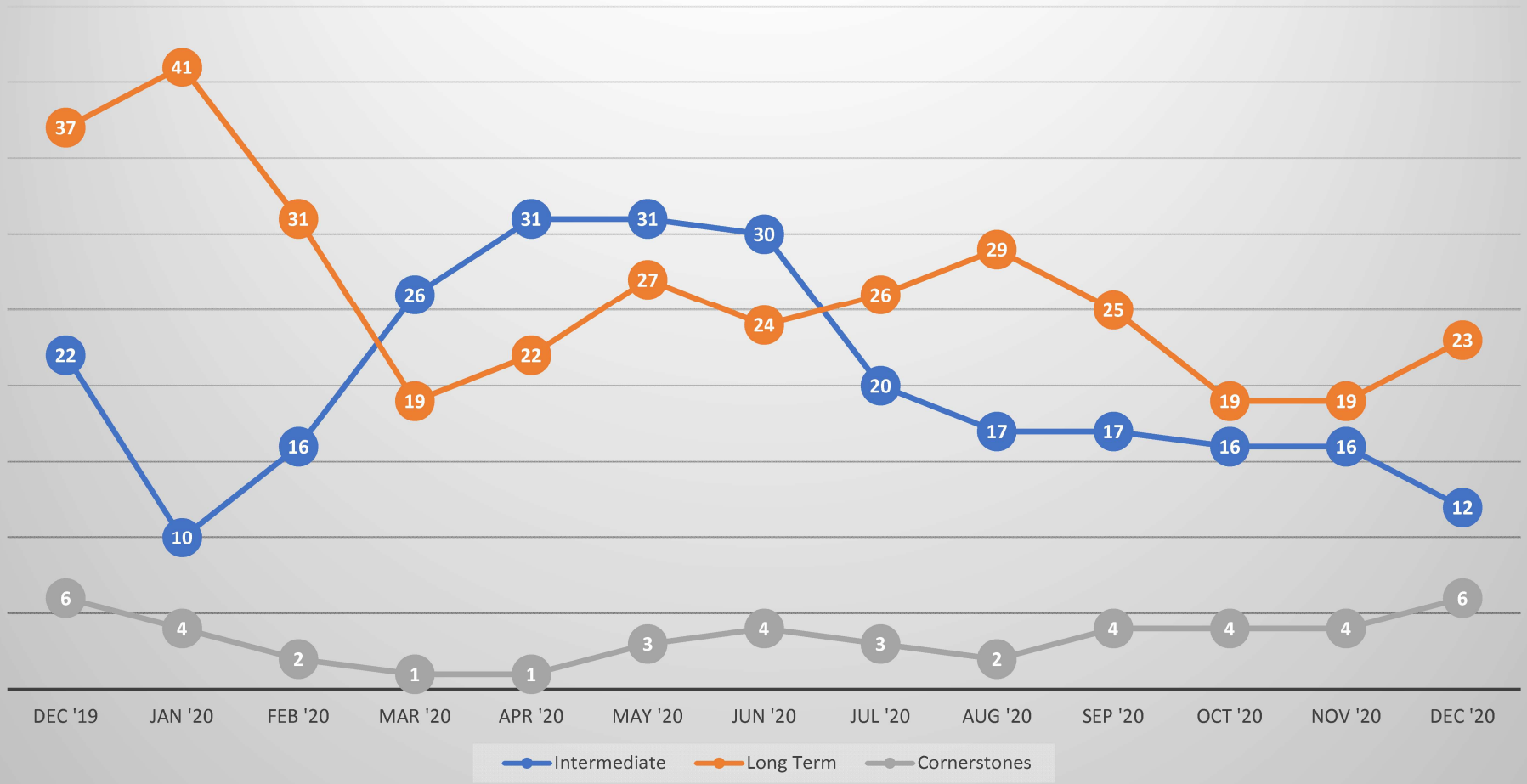


Call Center-Weekly Average Count of Calls



SUD Residential Waiting List

Individuals Waiting by Program Type
December 2019 - December 2020



Fairfax-Falls Church Community Services Board
Fund 40040 Statement
December FY 2021

	FY 2021 Approved Budget	FY 2021 YTD Budget	FY 2021 Actuals Thru December 2020	Variance from YTD Budget	FY 2021 Projection
Beginning Balance (Est)	26,163,913				26,163,913
F Fairfax City	2,218,100	1,109,050	1,109,050	-	2,218,100
F Falls Church City	1,005,368	502,684	502,684	-	1,005,368
F State DBHDS ¹	7,527,316	3,763,658	4,261,249	497,591	7,527,316
F Federal Pass Thru SAPT Block Grant	4,053,659	2,026,830	2,275,944	249,115	4,053,659
V Direct Federal Food Stamps	154,982	77,491	22,529	(54,963)	154,982
V Program/Client Fees	3,994,251	1,997,126	2,183,966	186,841	4,264,942
V CSA	858,673	429,337	314,621	(114,715)	784,380
V Medicaid Option	12,518,068	6,259,034	4,254,955	(2,004,079)	8,022,735
V Medicaid Waiver	2,962,684	1,481,342	3,687,642	2,206,300	7,376,752
V Miscellaneous	14,100	7,050	66,498	59,448	265,993
Non-County Revenue	35,307,201	17,653,601	18,679,138	1,025,537	35,674,227
General Fund Transfer	147,554,569	147,554,569	147,554,569	-	147,554,569
Total Available	209,025,683	165,208,170	166,233,707	1,025,537	209,392,709
Compensation ²	84,104,115	45,286,831	39,585,693	5,701,139	84,080,124
Fringe Benefits ³	37,187,394	20,023,981	16,677,426	3,346,555	37,350,564
Operating ⁴	69,145,965	34,572,983	24,964,817	9,608,165	53,448,231
Recovered Cost (WPF0)	(1,738,980)	(869,490)	(554,204)	(315,286)	(1,738,980)
Capital	76,469	38,235	60,627	(22,392)	(22,392)
Transfer Out	1,500,000	1,500,000	1,500,000	-	1,500,000
Total Disbursements	190,274,963	100,552,540	82,234,358	18,318,181	174,617,548
Ending Balance	18,750,720				34,775,162
DD MW Redesign Reserve ⁵	2,500,000		2,500,000		2,500,000
Medicaid Replacement Reserve ⁶	2,800,000		2,800,000		2,800,000
Opioid Epidemic MAT Reserve ⁷	300,000		300,000		300,000
Diversion First Reserve ⁸	994,245		994,245		994,245
COVID Revenue Impact Reserve ⁹	2,000,000		2,000,000		2,000,000
Electronic Health Record Reserve ¹⁰	3,000,000		3,000,000		
Unreserved Balance	7,156,475				26,180,917

Key

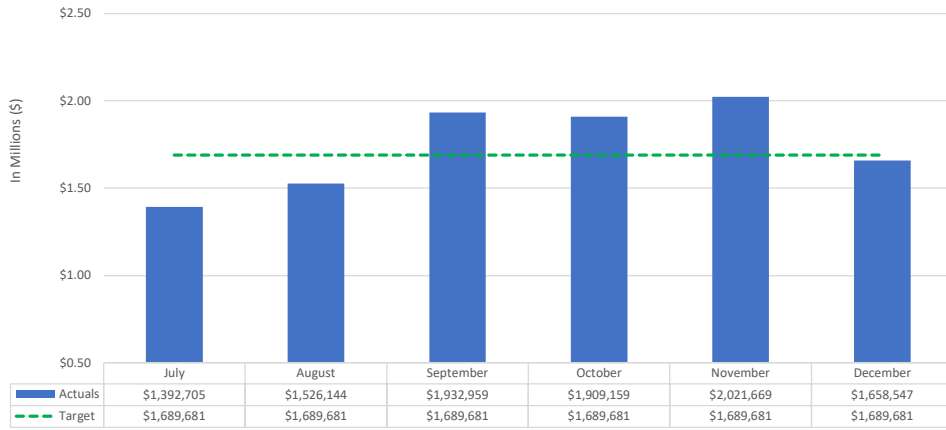
- F Fixed Annual Allocations
- V Variable Revenue based on number of services provided and total billing collections

Comments

- 1 FY21 Budget for State Funds Due to Medicaid Expansion, DBHDS reduced our revenue by ~\$4.4M.
- 2-4 FY21 Expenditures budget has not been adjusted for FY20 budget realignment exercise, therefore compensation and benefits budgets are understated and operating budget is overstated. Operating Budget now includes FY20 Carryover Request of \$5.8M for encumbrances, of which \$250K is allocated from Diversion First Reserve to cover costs associated with medical clearances.
- 5 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.
- 6 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.
- 7 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.
- 8 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 FY20 Carryover for costs associated with medical clearances.
- 9 As a result of COVID-19, the CSB is forecasting a negative impact to variable revenue in FY21. Since COVID-19 began, the CSB has seen a decline in services provided to our clients, resulting in less billable revenue (since April 2020, there's been a 40% decrease in billable revenue). We anticipate this being an ongoing issue until there is a vaccine or other factor that would allow the CSB to operate at full capacity.
- 10 Establish a reserve of \$3,000,000 for the implementation of a new electronic health record. The current electronic health record contract with the incumbent Credible will end on August 24, 2021. Even though we have 5-year renewal option year to exercise, the CSB elected to move forward with procuring a new EHR that can support the current and future agency behavioral health requirements. This primary procurement vehicle was the HCSIS procurement released in August 14, 2018 looking for a single EHR vendor to support Health Department and CSB requirements and to promote moving to an integrated healthcare platform. The final HCSIS down-select resulted in two possible vendors and no single vendor solution. The needs of our CSB dictates a progressive and more stable EHR platform capable of aligning itself with the future of our CSB. EHR platforms routinely become obsolete base on growing innovations in technology. We have been with our current incumbent vendor since March 2011.

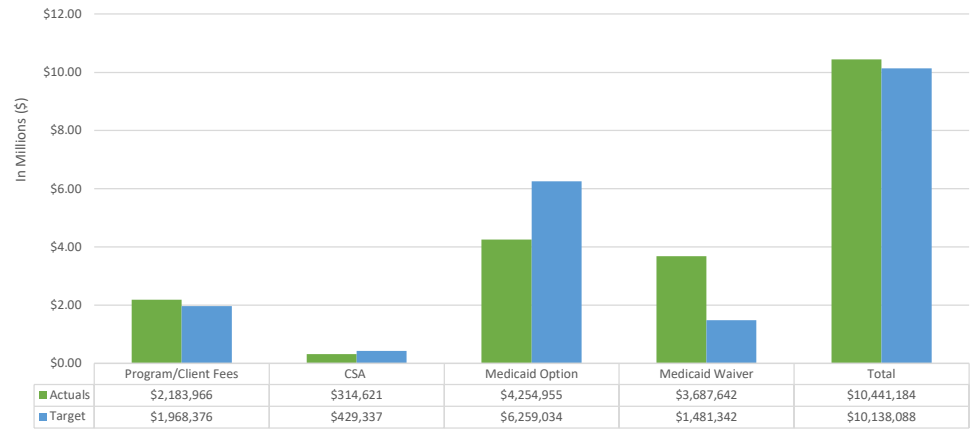
December FY21 YTD Revenue Analysis

Variable Revenue by Month
FY21
Actuals vs. Target



*Adjusted target is reflective of expected Medicaid expansion revenue (\$4.4M for FY21)

Variable Revenue by Category
FY21 Year to Date
Actuals vs. Target



**Fiscal Oversight Committee
CSB HR Update – January 25, 2021**

Fund 400, CSB Vacant General Merit Positions

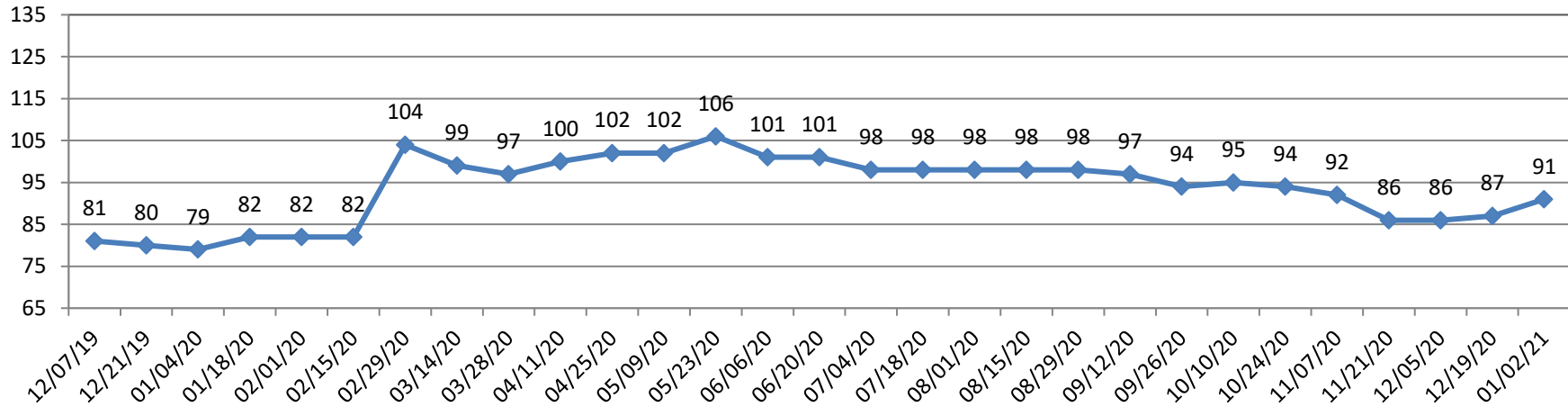


Figure 1: Increase in February 2020 reflects 24 non-merit conversions.

Vacancies in critical areas* *includes all merit positions (all funds - regular and grant)

Service area / program	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	December		January	
Emergency Svcs/MCU	3	5	6	5	6	5	3	3	3	3	2	2	2 CIS	3	2 CIS 1 Peer Support Spec.
Behavioral Health – Outpatient Svcs	6	6	13	13	13	15	16	14	13	11	7	7	2 BHS II 3 BH Sr. Clin. 1 BHN Clin/Case Mgr. 1 LPN	6	2 BHS II 3 BH Sr. Clin. 1 LPN
Youth & Family – Outpatient Svcs	2	3	5	6	6	6	6	4	3	4	4	4	3 BH Sr. Clin. 1 BHS II	7	6 BH Sr. Clin. 1 BHS II
Support Coordination	24	25	19	16	18	15	11	11	10	8	8	8	8 DDS II	8	8 DDS II
ADC/ Jail Diversion	12	10	8	8	5	4	6	7	9	9	8	7	5 BHS II 1 BH Sup. 1 BH Mgr.	9	7 BHS II 1 BH Sr. Clin. 1 BH Mgr.

Fairfax-Falls Church CSB

Strategic Plan and Critical Focus Areas

2021

Access to timely and appropriate services and supports to individuals and families.

- Complete re-design of the walk-in assessment business process.
- Develop a plan to update services as needed to reflect changes in Behavioral Health Enhancement.
- Explore ways to support individuals who do not meet priority access guidelines and those awaiting CSB services.
- Work with CSB and County HR to strategize on ways to increase recruitment and retention for CSB staff.
- Conduct random exit interviews to see if there are themes regarding staff leaving.
- Analyze exit interviews to determine if there are trends with staff departures. Act on results.

Provide quality services and supports.

- Strengthen BI (Business Intelligence) Dashboard to track productivity for informed decisions.
- Revise Measures to reflect “better off” along with productivity.

Strengthen the health of the entire community, including people receiving services.

- Continued refinement of primary healthcare screening and follow-up with individuals identified as having metabolic syndrome.
- Increase in % of individuals who have healthcare insurance and provider.
- Continued implementation of One Fairfax equity plan.

Ensure Efficient and Effective Utilization of Resources.

- Complete electronic healthcare record contracting process.
- Begin work of new electronic healthcare record launch.
- Examine potential for key services that should be contracted (i.e., PACT (Program for Assertive Community Treatment), Residential, Crisis).
- Continue to update business practices in revenue cycle and maximizing revenue.
- Plan for continued impact of COVID-19 on clinical services.

Global Focus Area: Address client and staff safety regarding COVID 19.

- Mitigation of possible and actual risks and exposures.
- Maintaining continuity of operations.
- Proper staffing for programs.
- Vaccinations for CSB clients and staff.
- Rapid COVID-19 testing for clients and staff when there is an outbreak.



DFS CSB Partnership

Processing New Medicaid, SNAP and General Relief Applications

Pilot
Summary

Streamlined application process through:

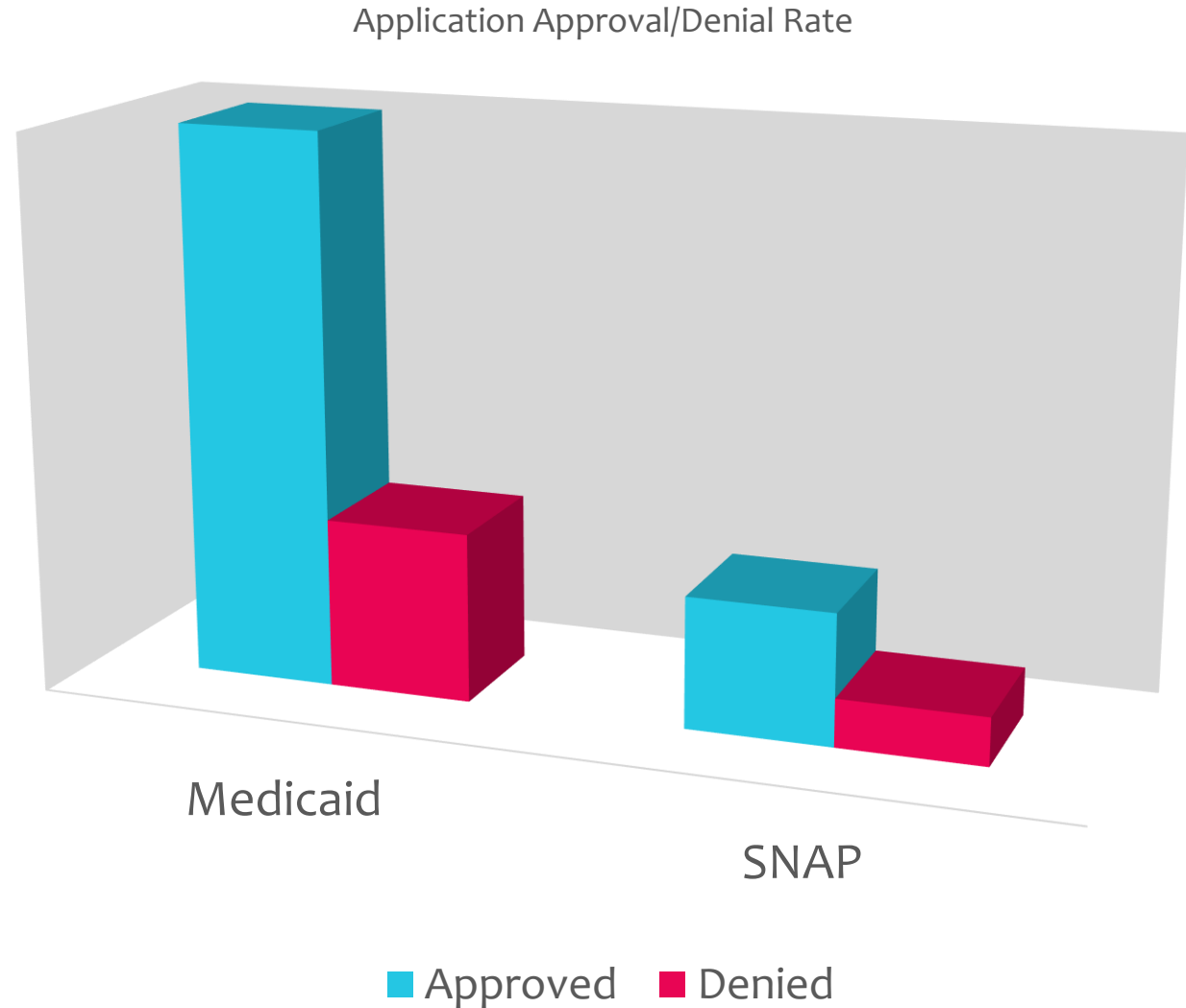
- Reduced Medicaid processing time
- Specific CSB/DFS staff processing cases
- First contact resolution
- Reduced Medicaid denial rate
- Reduced SNAP denial rate

Goals

Reporting Period: February 4 to September
30, 2020

Applications & Approvals

	Medicaid	SNAP
Applications Submitted	270	67
Approved	206 (76%)	49 (73%)
Denied	63 (23%)	18 (27%)
Transferred	1(1%)	0



Medicaid Application Processing Times

Pilot

- Average processing 4.7 days
- Same date approval 115 (56%)

Days from submission to Approval	Count of Approvals	Percent
Within 5 days	168	81.9%
6-9 days	7	3.4%
10- 20 days	11	5.4%
21- 45 days	19	9.3%
Total	205	100%

DFS-SS

Month	Total Processed	Overdues > 45 days	Timely Processed	Avg. # of days to process timely
Jun 2020	2389	89	2300	13.2
July 2020	2445	104	2341	13.7
Aug 2020	2224	96	2128	14.5
Sep 2020	2403	97	2306	15.0

SNAP Applications Processing

Based on client's request a SNAP application could be completed along with Medicaid or as a stand-alone application.
Total benefits issued to clients at approval: \$9,519.00

Submissions & Approvals

- 67 applications were submitted
- 49 approved (73%)
 - 46 approved within a week (94%)
 - 15 applications approved **same day**

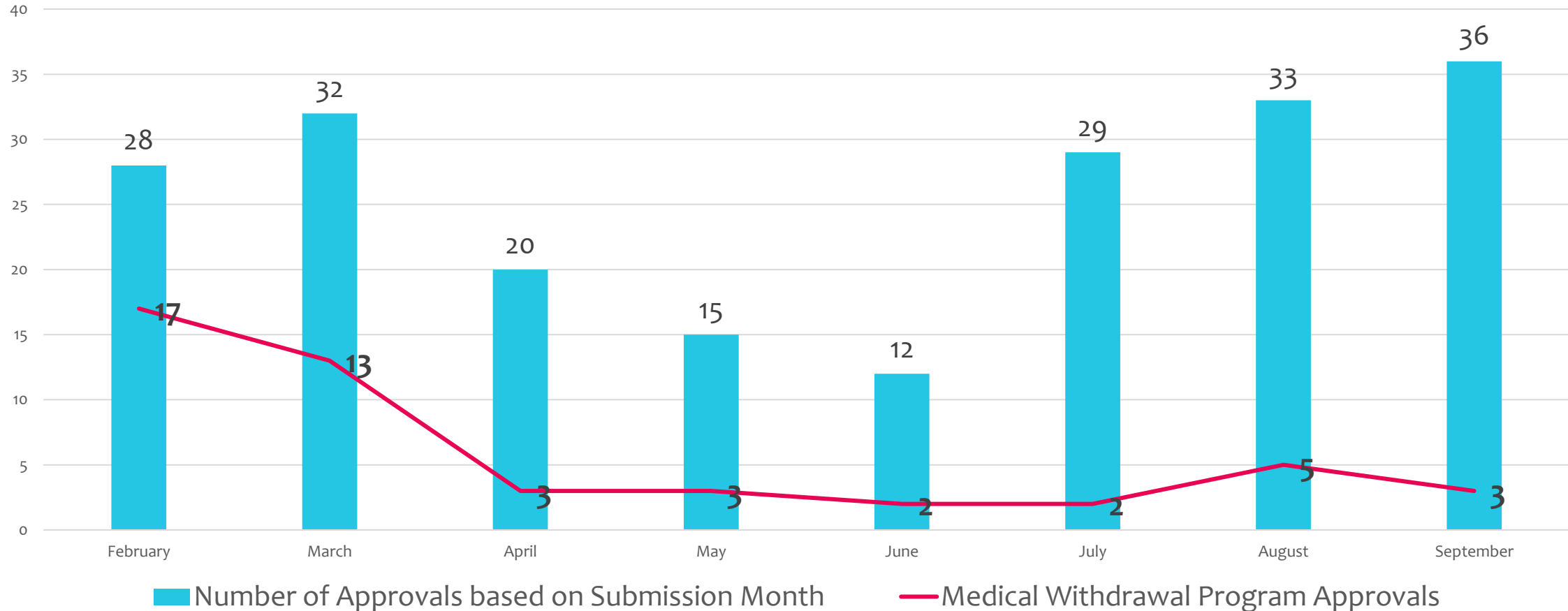
DFS-SS

- Average processing 8-11 days
- Expedited processing 4.8 - 5.1 days

Medical Withdrawal Program Approvals

For the **48 clients** were **approved** the billing sum for the services received in the program is **\$217,343**, from which **\$181,085** have been paid, **\$26,758** is pending payment, and **\$9,500** is being reconciled.

Approvals & Medical Withdrawal Program Approvals

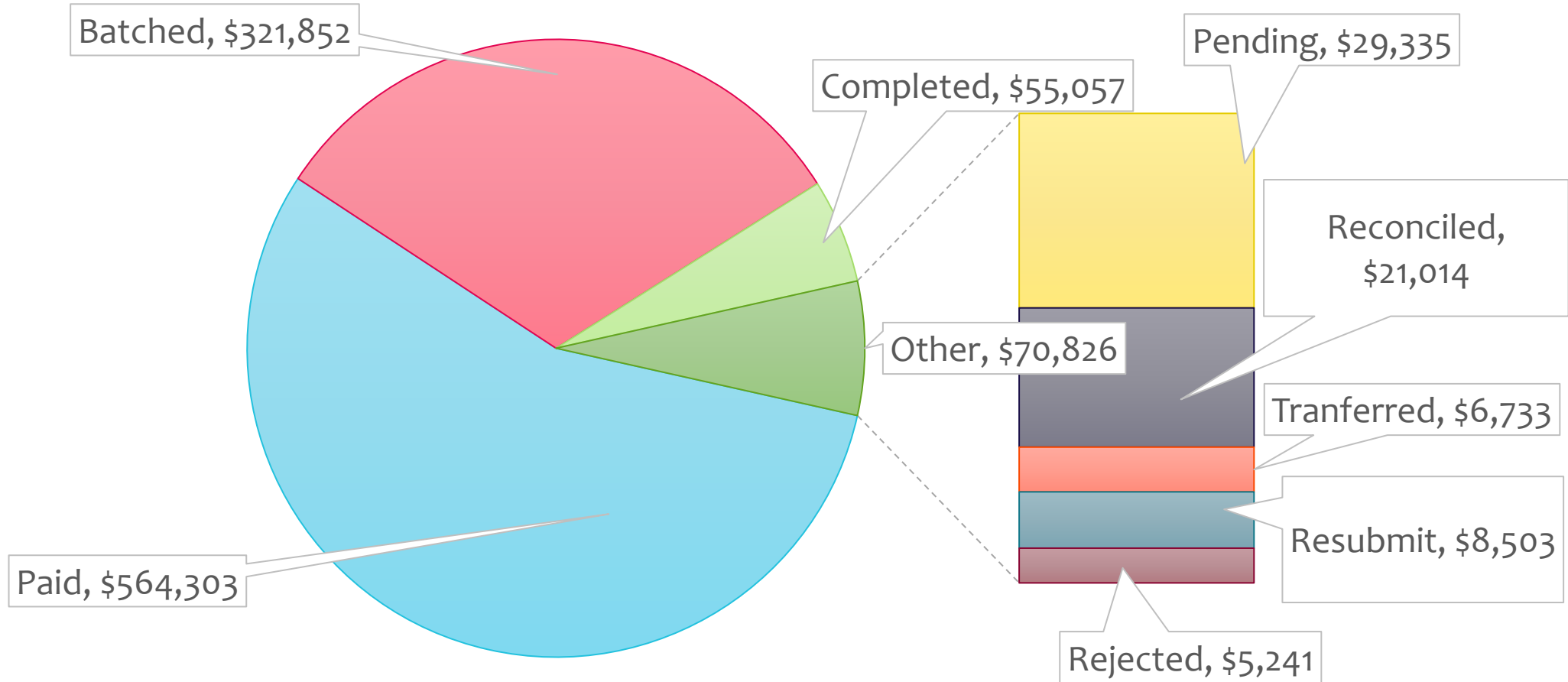


Summary

Month	Applications Submitted	Approvals based on Submission	Services Provided 02/01 - 11/09	Sum of Billing Rate for services recorded in Credible
February	34	28	761	\$286,735
March	41	32	749	\$216,057
April	26	20	482	\$142,947
May	24	15	213	\$44,634
June	18	12	71	\$19,922
July	35	29	557	\$158,191
August	42	33	384	\$116,234
September	50	36	138	\$27,317
TOTAL	270	205*	3355	\$1,012,038

9C - 8

Services Payment Status



Summary

Month	Applications Submitted	Approvals based on Submission	Services Provided 02/01 - 11/09	Sum of Billing Rate for services recorded in Credible
February	34	28	761	\$286,735
March	41	32	749	\$216,057
April	26	20	482	\$142,947
May	24	15	213	\$44,634
June	18	12	71	\$19,922
July	35	29	557	\$158,191
August	42	33	384	\$116,234
September	50	36	138	\$27,317
TOTAL	270	205*	3355	\$1,012,038

Recommendations

1. Commit both departments to continue the work of the pilot

2. Staffing

- Designate intake workers knowledgeable in SNAP, Medicaid and GR applications
- Focus on retention of benefits
- CSB to support the ongoing operations of the benefit team

3. Technology

- Create a Microsoft Teams & Power Automate
- Explore providing CSB staff with access to systems (Spider, MMIS or VaCMS) to aid in screening clients to avoid duplication and delays

Enhanced Behavioral Health Services for Virginia

Vision

Implement fully-integrated behavioral health services that provide a full continuum of care to Medicaid members. This comprehensive system will focus on access to services that are:



High Quality

Quality care from quality providers in community settings such as home, schools and primary care



Evidence-Based

Proven practices that are preventive and offered in the least restrictive environment



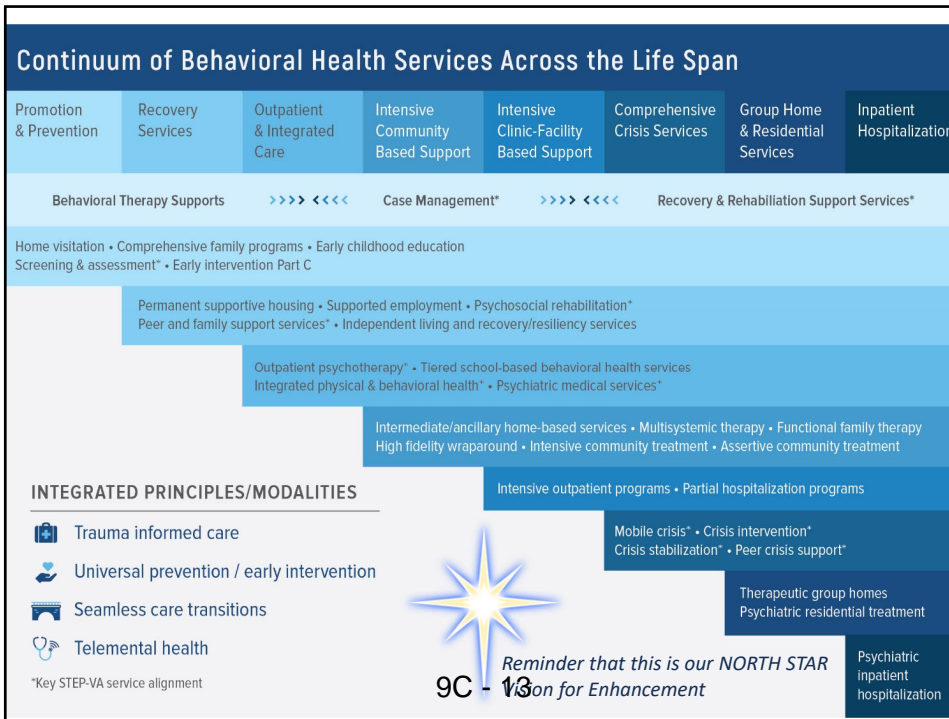
Trauma-Informed

Better outcomes from best-practice services that acknowledge and address the impact of trauma for individuals



Cost-Effective

Encourages use of services and delivery mechanism that have been shown to reduce cost of care for system



Enhancement Brings Alignment Across Initiatives

BH Enhancement Leverages Medicaid Dollars to Support Cross-Secretariat Priorities

Enhancement & Family First Prevention Services Act

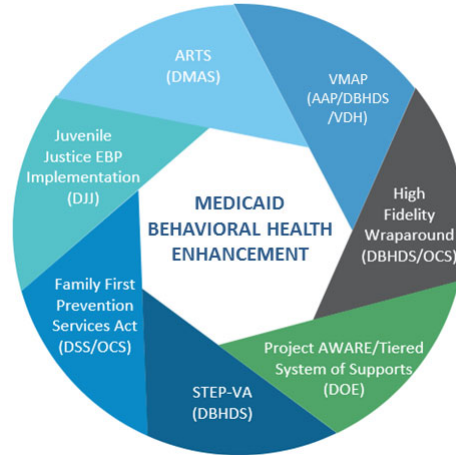
Focused on workforce development, evidence-based programs, prevention-focused investment, improving outcomes, and trauma informed principles

Enhancement & Juvenile Justice Transformation

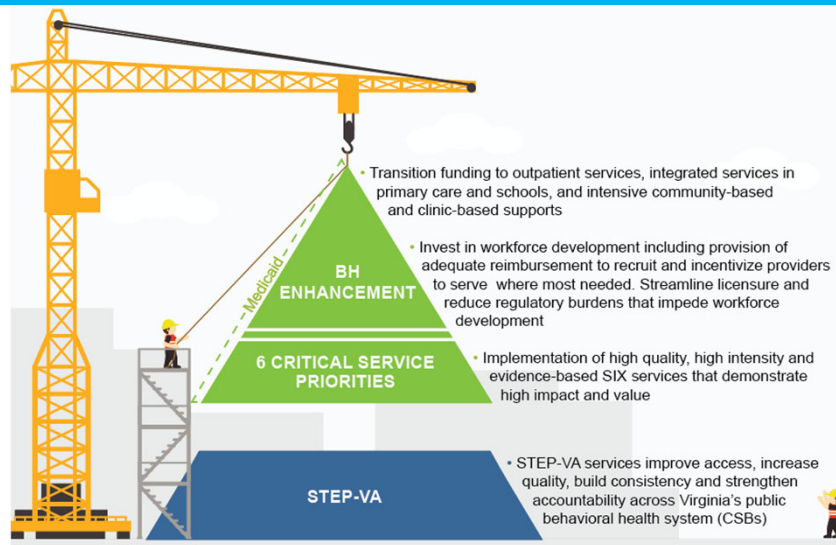
Supports sustainability of these services for the provider community, particularly in rural settings who have struggled with maintaining caseloads and business models when dependent on DJJ or CSA

Enhancement & Governor's Children's Cabinet on Trauma Informed Care

BH Enhancement continuum is built on trauma-informed principles of prevention and early intervention to address adverse childhood experiences



Enhancement of Behavioral Health and STEP-VA



Enhancement of Behavioral Health Services

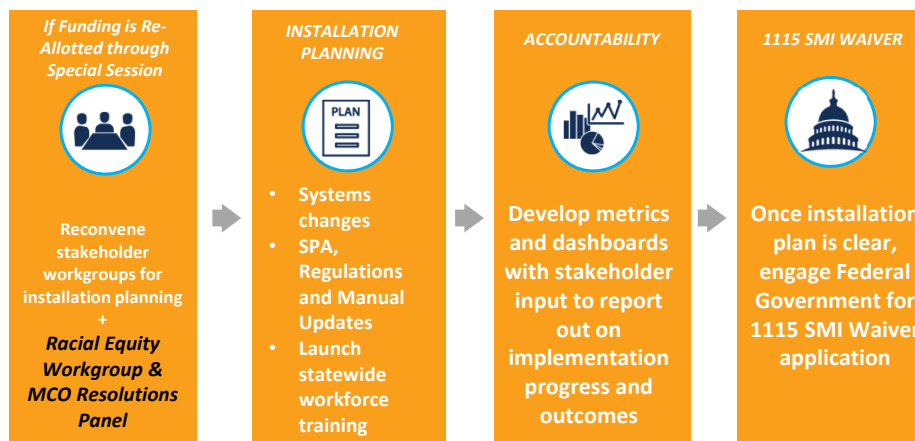
Special Session 2020: Revised Implementation VERSION 2

	Fiscal Year 21-22
General Fund	\$10,273,553
Non-General Funds	\$14,070,322
TOTAL FUNDS	\$24,343,875

Implementation July 2021
 Assertive Community Treatment
 Partial Hospitalization
 Intensive Outpatient Programs

Implementation December 2021
 Multi-Systemic Therapy
 Functional Family Therapy
 Comprehensive Crisis Services
 (23 hour beds, Residential Crisis,
 Community Based Stabilization,
 Mobile Crisis Intervention)

Enhancement Implementation Steps: Revised



Throughout this process, we commit to continued interagency partnership with DBHDS as well as continued alignment efforts with DSS-DOE-DJJ-DOC



CSB Board Update on 2021 Virginia General Assembly Session Activities

The 2021 General Assembly session began on Wednesday, January 13, and is expected to adjourn on Saturday, February 27. During the fall of 2020, board members from the Fairfax-Falls Church Community Services Board met with legislators to share the CSB Board's 2021 priorities. In December, the governor shared his recommendations for amending the biennium budget. After reviewing Governor Northam's budget recommendations and Department of Behavioral Health and Developmental Services recommendations, CSB shared two significant concerns with legislators at the House Appropriations and Senate Finance Committees hearing on January 6, 2021, and the Fairfax County Delegation hearing on January 9, 2021. CSB Board testimonies can be viewed online: <https://www.fairfaxcounty.gov/community-services-board/board/news>.

Key budget items relating to CSB priorities:

Governor Northam proposed amendments to the 2020-2022 Biennium Budget were released in December. In January, General Assembly members submitted their amendments to the budget bills ([HB 1800](#); [SB 1100](#)). Below is a brief overview of areas of concern to CSB.

State Psychiatric Hospital Bed Crisis

The Governor's budget includes a recommendation to transfer Local Inpatient Purchase of Service (LIPOS) from the local CSB to the Department of Behavioral Health and Developmental Services (DBHDS). This is a major concern to the Fairfax-Falls Church CSB as it is not a "zero-sum transfer of funding" as asserted in the budget. LIPOS is a local community program that CSBs in Region 2 rely upon for managing the state psychiatric hospital bed crisis. Our CSB and Region 2 have effective administrative practices and local partnerships in place to purchase private hospital beds to divert individuals from state hospital admission. Region 2 has the lowest utilization rate of state hospital bed days in the Commonwealth. CSB has shared with legislators that centralizing critical funds and decreasing aid to localities even further will not improve census management at state facilities. Instead, funding for DBHDS to partner with Northern Virginia CSBs in building community residential capacity is needed.

As of January 25, budget amendments have been introduced in the Senate (Chief Patron: Favola) and House (Chief Patron: Reid) to eliminate the transfer of LIPOS funding to the DBHDS central office.

STEP-VA

The governor's budget provides \$80,000 GF in FY 2021 and \$691,612 GF in FY 2022 for administrative costs for implementation of the "Marcus Alert" legislation enacted in the 2020 special session. DBHDS has yet to make the determination on which localities will get the initial funding. One of CSB's concerns with the new Marcus Alert system was that funds would be taken from STEP-VA to cover the costs of another new state initiative. A budget amendment has been introduced in the Senate (Chief Patron: Boysko) to allocate \$3 million in FY 2022 to implement the new protocols related to the Marcus is a step to ensure money for this new initiative is not carved out of existing STEP-VA funds.

Opioid Epidemic

The Governor's budget recommendation proposes to restore \$881,306 GF and \$1.3 million NGF to add Preferred Office-Based Opioid Treatment model for all members with moderate to high-risk SUD.

DD Services

As in past years, there are member budget amendments to address the Priority One DD Medicaid waiver waitlist and DD waiver rates. CSB staff will continue monitoring these amendments to see which are included in the conference report.

Other Budget Items of Interest

- The Governor’s budget recommendation increases funding for the Virginia Housing Trust Fund – \$40.7 million
- The Governor’s budget recommendation provides funding to support the diversion and discharge of individuals with dementia from state hospitals, to include contracts to support serving individuals in private settings and funding for a pilot mobile crisis program targeted toward individuals with a diagnosis of dementia – \$3.5 million.

Key bills addressing CSB-related issues and/or activities:

As a result of this year’s short session and limits on the number of bills legislators can introduce, there are fewer bills for CSB staff to review. So far, CSB staff completed 110 bill reviews to identify problematic and beneficial bills for the county government affairs team as they prioritize legislation to discuss with General Assembly members. Below are some of the bills introduced as of January 25 that CSB is closely monitoring.

Hospital Census – Discharge Planning

Of major concern to CSB is SB 1304. This bill comes at the urging of DBHDS and would require CSBs to implement discharge plans after the individual has already been discharged. The change to section 37.2-505 of the code would allow the practice of discharging clients with serious mental illness to the community without appropriate services and supports being accessible and available at the time of discharge. CSB believes this would increase state hospital recidivism and render many of our community’s vulnerable mentally ill population homeless. CSB has communicated with legislators that addressing discharge delays in Northern Virginia can be done by investing in appropriate community capacity to meet individual needs. Discharging precipitously, without creating additional community resources, would only increase hospital readmission rates, and homelessness.

Region 2 CSBs are strongly opposed to this code change as is VACSB. The Fairfax County Board of Supervisors took a position of “Oppose” on this bill at the January 22, 2021, Legislative Committee meeting.

Bill Number	Bill Sponsor	Bill Title	BOS Position	Bill Status
SB 1304	McPike, J	Community services boards; discharge planning.	Oppose	Assigned to Senate Education and Health - Subcommittee on Health

Mandatory Outpatient Treatment

CSB is concerned with this bill as it could become a significant unfunded mandate for the CSBs. California and New York expanded their MOT programs, but they put millions into additional community-based treatment services. The new requirements for CSBs included in the introduced version of the bill are also of concern. Overhauling Virginia’s MOT process with the goal of making it more useable has been a major focus of the Joint Subcommittee to Study Mental Health Services in the Commonwealth in the 21st Century. This bill will likely move forward. CSB is currently monitoring amendments to this bill.

Bill Number	Bill Sponsor	Bill Title	BOS Position	Bill Status
HB 2166	Hope, P	Involuntary admission; provisions governing involuntary inpatient & mandatory outpatient treatment.		Assigned to House Health, Welfare and Institutions – Subcommittee on Behavioral Health

Criminal Justice System

Local and Regional Jails

Of concern to CSB is HB 1874, which would create an unfunded mandate for behavioral health staff in jails to perform a service in a set period of time.

Bill Number	Bill Sponsor	Bill Title	BOS Position	Bill Status
HB 1874	Coyner, C	Behavioral health; assessments in local correctional facilities.		Reported out of House Health, Welfare and Institutions with Substitute

Specialty Dockets

HB 2236 would add flexibility to the docket process to allow for the transfer of supervision where a person on a behavioral health docket does not live where they were in court. It retains decision-making with the local docket team.

Bill Number	Bill Sponsor	Bill Title	BOS Position	Bill Status
HB 2236	Bell, R	Behavioral health docket; transfer of supervision.		House Courts – Criminal subcommittee recommends reporting with substitute

Behavioral Health Treatment

HB 2008 would make a positive change by seeking to ensure patients with a DSM-5 diagnosis do not unnecessarily have their treatment disrupted because of prior authorization issues.

Bill Number	Bill Sponsor	Bill Title	BOS Position	Bill Status
HB 2008	Heretick, S	Health insurance; authorization of drug prescribed for the treatment of a mental disorder.		House Labor and Commerce Subcommittee reports with amendments

Opioid Epidemic and Substance Use Disorder

There have been some positive activities related to substance use disorder. HB 1821 would add rendering care to the reasons an individual shall not be subject to arrest or prosecution. CSB also remains supportive of naloxone bills as they align with CSB efforts and will help reduce barriers to timely treatment of individuals overdosing.

Bill Number	Bill Sponsor	Bill Title	BOS Position	Bill Status
HB 1821	Bulova, D	Experiencing or reporting overdoses; prohibits arrest and prosecution.		Engrossed by House as amended
HB 1894	Kory, K	Certain employees of the Department of Juvenile Justice; naloxone or other opioid antagonist.		Passed House; Referred to Senate Committee on Education and Health

Marijuana Legalization

Efforts to legalize marijuana will be a major focus of this year's General Assembly. The County Board of Supervisors has yet to take a formal position on the main legalization bill. CSB will be monitoring the main legalization bill that is moving forward ([SB 1406](#)) and answering any questions the BOS may have as the bill relates to substance use prevention and treatment.

Developmental Disabilities

SB 1315 would provide improvements to the current system as people with disabilities are more likely to be arrested and charged with a crime. This bill would align with the county's diversion efforts to help stop the cycle of criminal justice involvement by making admissible the presence of a diagnosis of ID/DD throughout the criminal justice system. It would also ensure training on ID/DD for attorneys and public defenders. SB 1315 is a priority of the Arc of Northern Virginia and supported by VACSB.

HB 2198 proposes to study and make recommendations on the permanent use of virtual supports for individuals with intellectual and developmental disabilities. CSB will monitor this study. This bill is a priority of the Arc of Northern Virginia.

Bill Number	Bill Sponsor	Bill Title	BOS Position	Bill Status
SB 1315 / SB 1383	McClellan, J/ Favola, B	Criminal proceedings; consideration of mental condition.		Referred to Senate Judiciary Committee
HB 2047	Bourne, Jeffrey			Assigned to House Courts – Criminal Subcommittee
HB 2197	Runion, Chris	DMAS; work group to study options for the permanent use of virtual supports and increasing access to virtual supports and services; individuals with intellectual and developmental disabilities.		Reported from House Health, Welfare and Institutions

Workforce Issues

HB 1769 CSB supports this bill as it would have a positive impact on workforce issues. The bill would allow for appropriately credentialed staff to work across jurisdictions and support efforts to address the significant national behavioral health workforce shortage.

Bill Number	Bill Sponsor	Bill Title	BOS Position	Bill Status
HB 1769	Freitas, N	Health care providers, certain; licensure or certification by endorsement.		House Health, Welfare and Institutions – Subcommittee on Health Professions recommends reporting.

Approval of new CSB Board Policy #1600 – CSB Board Member Participation in Meetings by Electronic Communication

Issue

Approval of new CSB Board policy

Recommended Motion

I move that the Board approve new CSB Board policy #1600 as presented.

Background:

This policy was developed to provide for CSB Board member electronic attendance and participation in CSB Board meetings and Standing & Ad Hoc Committee meetings. CSB Board meetings have continued during the COVID pandemic under Governor Northam's Emergency Order. This policy provides direction for CSB Board member electronic attendance and participation during and after the state of emergency (COVID pandemic?) to allow for the resumption of Standing and Ad Hoc Committee meetings as scheduled and within the requirements of Va. Code and the Virginia Freedom of Information Act.

Timing

Approval of this policy is requested in January in anticipation of the approval of the revised CSB Board Bylaws at the February 23, 2021 Board of Supervisor's (BOS) meeting. Implementation of this CSB Board policy is allowed following BOS approval of revisions to the CSB Board Bylaws.

Attachments

- A. Attachment A: CSB Board Policy #1600 - CSB Board Member Participation in Meetings by Electronic Communication - *revisions visible*.
- B. Attachment B: CSB Board Policy #1600 - CSB Board Member Participation in Meetings by Electronic Communication - *revisions accepted*.

Board Member

Bettina Lawton, Chair

Policy Number: 1600
 Policy Title: CSB Board Member
 Participation in Meetings by
 Electronic Communication
 Date Adopted: TBD

Purpose

The purpose of this policy is to provide guidance for the members of the CSB Board who request electronic attendance at a meeting of the CSB Board or a Standing Committee.

Policy

This policy is adopted pursuant to the authorization of Va. Code § 2.2-3708.2 and is to be strictly construed in conformance with the Virginia Freedom of Information Act (VFOIA), Va. Code §§ 2.2-3700—3715.

This policy shall not govern an electronic meeting conducted to address a state of emergency declared by the Governor. Any meeting conducted by electronic communication means under such circumstances shall be governed by the provisions of Va. Code § 2.2-3708.2(A)(3).

Definitions

1. **“Board”** means the Fairfax – Falls Church Community Services Board and its standing and Ad Hoc committees.
2. **“Member”** means any member of the CSB Board.
3. **“Remote participation”, “remotely participate”, or “participate remotely”** means participation by a member of the CSB Board via telephonic, video, or other audio or combined audio and video electronic communication method where the member is not physically assembled with the other members of the CSB Board.
4. **“Meeting”** means a meeting as defined by Va. Code § 2.2-3701.
5. **“Notify” or “notifies,”** for purposes of this policy, means actual notice, including, but not limited to, email, text, telephone, or in-person notice.

Mandatory Requirements

Regardless of the reasons why the member is participating in a meeting from a remote location by electronic communication means, the following conditions must be met for the member to participate remotely:

1. A quorum of the CSB Board must be physically assembled at the primary or central meeting location; and
2. Arrangements have been made for the voice of the remotely participating member to be heard by all persons at the primary or central meeting location. If at any point during the meeting the voice of the remotely participating member is no longer able to be heard by all persons at the meeting location, the remotely participating member shall no longer be permitted to participate remotely.

Process to Request Remote Participation

1. On or before the day of the meeting, and at any point before the meeting begins, the requesting member must notify the CSB Board Chair (or the Vice-Chair if the requesting member is the Chair) that they are unable to physically attend a meeting due to disability, medical condition, or personal matter. If the absence is due to a personal matter, then the individual must provide an explanation. ↓
2. On or before the day of a meeting of a Standing (Or Ad Hoc?) Committee, and at any point before the meeting begins, the requesting member must notify the CSB Board Chair and the CSB Committee Chair that they are unable to physically attend a meeting due to a personal matter or a temporary or permanent disability or other medical condition that prevents their physical attendance at the meeting. OR If the requesting member is unable to attend a Standing Committee meeting, the requesting member must also notify the Standing Committee Chair.
3. The requesting member shall also notify the County staff liaison of their request, but their failure to do so shall not affect their ability to remotely participate.
4. Remote participation due to a personal matter is limited to two times per calendar year. There is no limit to the number of times that a member may participate remotely due to a temporary or permanent disability or other medical condition.
5. The requesting member is not obligated to provide independent verification regarding the reason that they are not able to physically attend the meeting.
6. The Chair (or the Vice-Chair if the requesting member is the Chair) shall promptly notify the requesting member whether their request is in conformance with this policy, and therefore approved or disapproved.

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Process to Confirm Approval or Disapproval of Participation from a Remote Location

When a quorum of the CSB Board has assembled for the meeting, the Board shall vote to determine whether:

1. The Chair's decision to approve or disapprove the requesting member's request to participate from a remote location was in conformance with this policy; and
2. The voice of the remotely participating member can be heard by all persons at the primary or central meeting location.

Recording in Minutes

1. If the member is allowed to participate remotely due to a disability or other medical condition, the CSB Board shall record in its minutes (1) the CSB Board's approval of the member's remote participation; and (2) the remote location from which the member participated.
2. If the member is allowed to participate remotely due to a personal matter, such matter shall be cited in the minutes with specificity, as well as whether this is the first or second meeting of the calendar year in which the member has participated remotely due to a personal matter, and the remote location from which the member participated.

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- 3. If a member’s request to participate remotely is disapproved, the disapproval, including the grounds upon which the requested participation violates this policy or VFOIA, shall be recorded in the minutes with specificity.

Closed Session

If the CSB Board goes into closed session, the member participating remotely shall ensure that no third party is able to hear or otherwise observe the closed meeting.

Strict and Uniform Application of This Policy

This Policy shall be applied strictly and uniformly, without exception, to the entire membership, and without regard to the identity of the member requesting remote participation or the matters that will be considered or voted on at the meeting.

Approved: _____

CSB Board Secretary

Date

References:

[Va. Code § 2.2-3708.2](#)

Virginia Freedom of Information Act (VFOIA), [Va. Code §§ 2.2-3700—3715](#)

[Va. Code § 2.2-3708.2\(A\)\(3\)](#)

Policy Adopted: TBD

Policy Number: 1600
 Policy Title: CSB Board Member
 Participation in Meetings by
 Electronic Communication
 Date Adopted: TBD

Purpose

The purpose of this policy is to provide guidance for the members of the CSB Board who request electronic attendance at a meeting of the CSB Board or a Standing Committee.

Policy

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2. On or before the day of a meeting of a Standing (Or Ad Hoc?) Committee, and at any point before the meeting begins, the requesting member must notify the CSB Board Chair and the CSB Committee Chair that they are unable to physically attend a meeting due to a personal matter or a temporary or permanent disability or other medical condition that prevents their physical attendance at the meeting. **OR** If the requesting member is unable to attend a Standing Committee meeting, the requesting member must also notify the Standing Committee Chair.
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4. Remote participation due to a personal matter is limited to two times per calendar year. There is no limit to the number of times that a member may participate remotely due to a temporary or permanent disability or other medical condition.
5. The requesting member is not obligated to provide independent verification regarding the reason that they are not able to physically attend the meeting.
6. The Chair (or the Vice-Chair if the requesting member is the Chair) shall promptly notify the requesting member whether their request is in conformance with this policy, and therefore approved or disapproved.

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Process to Confirm Approval or Disapproval of Participation from a Remote Location

When a quorum of the CSB Board has assembled for the meeting, the Board shall vote to determine whether:

1. The Chair's decision to approve or disapprove the requesting member's request to participate from a remote location was in conformance with this policy; and
2. The voice of the remotely participating member can be heard by all persons at the primary or central meeting location.

Recording in Minutes

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2. If the member is allowed to participate remotely due to a personal matter, **such** matter shall be cited in the minutes with specificity, as well as whether this is the first or second meeting of the calendar year in which the member has participated remotely due to a personal matter, and the remote location from which the member participated.

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Strict and Uniform Application of This Policy

This Policy shall be applied strictly and uniformly, without exception, to the entire membership, and without regard to the identity of the member requesting remote participation or the matters that will be considered or voted on at the meeting.

Approved: _____
CSB Board Secretary Date

References:

[Va. Code § 2.2-3708.2](#)

Virginia Freedom of Information Act (VFOIA), [Va. Code §§ 2.2-3700](#)—3715

[Va. Code § 2.2-3708.2\(A\)\(3\)](#)

Policy Adopted: TBD

Approval of Amendments to CSB Board Bylaws

Issue

Approval of Bylaws for the Fairfax Falls Church Community Services Board with proposed amendment.

Recommended Motion:

I move for approval of the CSB Board Bylaws as amended

Timing

The CSB Board Bylaws will be submitted for Board of Supervisors (BOS) approval at the February 23, 2021 meeting so that the Bylaws can become effective, as amended.

Background:

Revision to the CSB Board Bylaws includes review and recommendation from CSB Board members and posting for public comment. CSB Board Members and members of the public are offered a final opportunity for edits at the January 27, 2021 CSB Board meeting.

Amendments include:

- Adding a provision for CSB Board members to participate electronically in CSB Board and Committee meetings (Article VIII, Meetings).
- Removing references to Early Intervention Services as these services are now provided by Department of Family Services (Preamble, Article II: Purpose, Article III: Powers and Duties).
- Revising Standing Committees to establish the Service Delivery Oversight Committee and disestablish the Behavioral Health Oversight Committee and the Developmental Disabilities Committee;(Article VII: Executive Committee, Standing Committees and Ad Hoc committees).

Fiscal Impact

None.

Attachments

- Att. A: Consideration Item for Board of Supervisors Meeting, February 24, 2021
- Att. B: Fairfax Falls Church Community Services Board By-laws – edits visible.
- Att. C: Fairfax Falls Church Community Services Board By-laws – edits accepted, comments visible

Board Member

Bettina Lawton, Chair

Title Deadlines - It is important that you provide the title of your Board Agenda Items. Titles are provided for agenda planning purposes and to ensure that all the items intended to be submitted make it into the Board Package.

Please fill out and email the table below to Sara Girello and Angela Schauweker for each Board meeting.

	TITLE (DISTRICTS)	BOS DATE	AUTHOR	CONTACT INFO	TYPE OF ITEM
1.	Approval of Amended CSB Board Bylaws	2/23/2021	Daryl Washington	703-324-7089 or Daryl.Washington@f airfaxcounty.gov	Consideration
2.					
3.					
4.					

Bylaws of the Fairfax-Falls Church Community Services Board

Preamble

Subject to the provisions of:

- A. Chapter 5 (Community Services Boards) of Title 37.2 (Behavioral Health and Developmental Services) of the Code of Virginia, as amended, and,
- B. Joint Resolution adopted by the Board of Supervisors of Fairfax County on April 23, 1969, and by the Councils of the Cities of Fairfax and Falls Church on May 28, 1969, as amended, and,
- C. Other applicable laws and regulations.

Deleted: and Chapter 53 (Early Intervention Service System) of Title 2.2 (Administration of Government) as amended,

The following bylaws apply to, and govern the administration of, the Fairfax-Falls Church Community Services Board.

Article I: Name

As provided by action of the Board of Supervisors of Fairfax County and the Councils of the Cities of Fairfax and Falls Church on August 1, 1978, the name of this board is the FAIRFAX-FALLS CHURCH COMMUNITY SERVICES BOARD, hereinafter referred to as the "BOARD".

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Article II: Purpose

- A. Mental Health, Developmental Disabilities, and Substance Use Disorders Services – In conformity with the provisions of Va. Code § 37.2-500, this board is established as an administrative policy board whose general purpose shall be to ensure and oversee the establishment and operation of local mental health, developmental disabilities, and substance use disorder services.
- B. The core of services provided shall include emergency services and, subject to the availability of funds appropriated for them, case management services. The core of services may include a comprehensive system of inpatient, outpatient, day support, residential, prevention, and other appropriate mental health, developmental disabilities, and substance use disorder services necessary to provide individualized services and supports to persons with mental illnesses, developmental disabilities, or substance use disorders.

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The core of programs to be provided shall include (§2.2-5300) services provided through Part C of the Individuals with Disabilities Education Act (20 U.S.C. § 1431 et seq.), as amended, designed to meet the developmental needs of each child and the needs of the family related to enhancing the child's development and provided to children from birth to age three who have a 25 percent developmental delay in one or more areas of development, atypical development, or a diagnosed physical or mental condition that has a high probability of resulting in a developmental delay. ¶
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Article III: Powers and Duties

- A. Mental Health, Developmental Disabilities, and Substance Use Disorder Services – In order to implement the purpose, set forth in Article II hereof, pursuant to the requirements of [Va. Code § 37.2-504](#) and in accordance with the actions taken by the Board of Supervisors of Fairfax County and the Councils of the cities of Fairfax and Falls Church to establish the board as an administrative policy board, the board shall:
1. Review and evaluate all existing and proposed public community mental health, developmental disabilities, and substance use disorder services and facilities available to serve the community and such private services and facilities as receive funds through it and advise the local governing bodies of the political subdivisions that established it as to its findings.
 2. Pursuant to [Va. Code § 37.2-508](#), submit to the governing body of each political subdivision that established it, an annual performance contract for community mental health, developmental disabilities, and substance use disorder services for its approval prior to submission of the performance contract to the Virginia Department of Behavioral Health and Developmental Disability Services (“Department”).
 3. Within amounts appropriated therefore, provide such services as may be authorized under such performance contract.
 4. In accordance with its approved performance contract, enter into contracts with other providers for the delivery of services or operation of facilities.
 5. Make policies concerning the delivery of services or operation of facilities under its direction or supervision, subject to applicable standards, policies or regulations promulgated by the State Board of Behavioral Health and Developmental Services (“State Board”).
 6. Participate with local government in the appointment and annual performance evaluation of an executive director of community mental health, developmental disabilities, and substance use disorder services, according to minimum qualifications established by the Department, and prescribe his/her duties. The compensation of the executive director shall be fixed by local government in consultation with the board within the amounts made available by appropriation, therefore.
 7. Prescribe a reasonable schedule for fees for services provided by personnel or facilities under the jurisdiction or supervision of the board and establish procedures for the collection of the same. All fees collected shall be included in the performance contract submitted to the local governing bodies pursuant to subdivision 2 of this subsection and [Va. Code § 37.2-508](#) and shall be used only for community mental health, developmental disabilities, and substance use disorder purposes. The board shall institute a reimbursement system to maximize the collection of fees from persons receiving services under its jurisdiction or supervision consistent with the provisions of [Va. Code § 37.2-511](#) and from responsible third-party payors. The board shall not attempt to bill or collect fees for time spent participating in involuntary commitment hearings pursuant to [Va.](#)

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[Code § 37.2-814.](#)

8. Accept or refuse gifts, donations, bequests or grants of money or property from any source and utilize the same as authorized by the governing bodies of the political subdivisions that established it.
9. Seek and accept funds through federal grants. In accepting such grants, the board shall not bind the governing bodies of the political subdivision that established it to any expenditures or conditions of acceptance without the prior approval of such governing bodies.
10. Have authority, notwithstanding any provision of law to the contrary, to disburse funds appropriated to it in accordance with such regulations as may be established by the governing bodies of the political subdivisions that established it.
11. Develop joint annual written agreements, consistent with policies and procedures established by the State Board, with local school divisions; health departments; boards of social services; housing agencies, where they exist; courts; sheriffs; area agencies on aging; and regional Virginia Department for Aging and Rehabilitative Services offices. The agreements shall specify what services will be provided to consumers. All participating agencies shall develop and implement the agreements and shall review the agreements annually.
12. Develop and submit to the local governing body of each political subdivision that established it and to the Department the necessary information for the preparation of the Comprehensive State Plan for mental health, developmental disabilities and substance use disorder services pursuant to [Va. Code § 37.2-315](#).
13. Take all necessary and appropriate actions to maximize the involvement and participation of consumers and family members of consumers in policy formulation and services planning, delivery, and evaluation.
14. Institute, singly or in combination with other operating community services boards, administrative policy boards, local government departments with policy-advisory boards, or behavioral health authorities, a dispute resolution mechanism that is approved by the Department. The dispute mechanism enables consumers and family members of consumers to resolve concerns, issues, or disagreements about services without adversely affecting their access to or receipt of appropriate types and amounts of current or future services from the board.
15. Notwithstanding the provisions of [Va. Code § 37.2-400](#) or any regulations promulgated thereunder, release data and information about individual consumers to the Department so long as the Department implements procedures to protect the confidentiality of such information.
16. Carry out other duties and responsibilities as assigned by the governing body of each political subdivision that established it.

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 Establish and administer a local system of early intervention services in compliance with Part C of the Individuals with Disabilities Education Act (20 U.S.C. § 1431 et seq.) and all relevant state policies and procedures; ¶
 Implement consistent and uniform policies and procedures for public and private providers to determine parental liability and to charge fees for early intervention services pursuant to regulations, policies, and procedures adopted by the state lead agency in § 2.2-5304; and ¶
 Manage relevant state and federal early intervention funds allocated from the state lead agency for the local early intervention system, including contracting or otherwise arranging for services with local early intervention services providers. ¶

Article IV: Members and Terms of Office

- A. In accordance with [Va. Code § 37.2-502](#), as implemented by the Board of Supervisors of Fairfax County and the Councils of the cities of Fairfax and Falls Church, the board shall consist of sixteen members, thirteen of whom shall be appointed by the Board of Supervisors of Fairfax County, one of whom shall be designated by the Office of the Sheriff of Fairfax County; and one of whom shall be appointed by the Council of the City of Fairfax and one by the Council of the City of Falls Church. In accordance with [Va. Code § 37.2-501](#), one-third of the appointments shall be identified consumers or former consumers, or family members of consumers or family members of former consumers, at least one of whom shall be a consumer receiving services. The term of appointment is three years, and a person may serve only three, consecutive full terms.
- B. Vacancies shall be filled for unexpired terms in the same manner as original appointments. Persons appointed to fill a vacancy may serve three additional full terms.
- C. Members are expected to regularly attend all meetings. The board Chair may notify the Clerk to the Board of Supervisors if any board member misses three consecutive board meetings as well as meetings of the standing committee to which the board member has been appointed and this may serve as grounds for removal. Members may be removed from the board in accordance with the appointing authority policies and procedures governing removal from Boards, provided that such policies and procedures are consistent with the requirements of [the Virginia](#) Code.
- D. Each member of the board shall serve on at least one Standing Committee. If a board member misses three consecutive committee meetings, the member may be recommended for removal from the committee by the committee through the Committee Chair.
- E. Each member of the board shall conduct himself or herself cordially and appropriately to members of other governmental or private entities, members of the public or CSB staff, when representing the board.

Article V: Officers and Their Duties

- A. Officers
The officers of the board shall consist of a Chair, immediate past Chair, Vice Chair, and a Secretary, each of whom shall have such powers and duties as generally pertain to such respective offices, as well as such powers and duties as from time to time may be conferred upon them by the board, and which shall specifically include, but not be limited to, the powers, duties and responsibilities set forth hereinafter in Sections 2, 3, and 4 of Article VI.
- B. Chair
The Chair shall preside at all meetings of the board; sign or cause to be signed the minutes when approved by the board and such other official documents required of him/her in the course of business of the board; appoint such committees as deemed necessary by the board for its operation and to serve as an *ex officio* member of all committees except the nominating committee; work closely with local public and private

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facilities, mental health, developmental disabilities, and substance use disorder associations of Virginia, and other groups interested in mental health, developmental disabilities and substance use disorder issues; maintain liaison with the Board of Supervisors of Fairfax County and the Councils of the Cities of Fairfax and Falls Church and the Department; and keep the Board of Supervisors, City Councils, and the Department's Commissioner advised and fully informed as to the activities and programs of the board.

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C. Vice Chair
In the absence of the Chair, the Vice Chair shall perform the duties of the Chair.

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D. Immediate Past Chair
In the absence of the Chair and the Vice Chair, the immediate past Chair shall perform the duties of the Chair.

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E. Secretary
The Secretary shall sign all policies after they have been approved or amended by the board and perform such other duties as requested by the Chair of the board. The Secretary also regularly reviews and updates the CSB Board Member Orientation Handbook. In the absence of the Chair, the Vice Chair, and the immediate past Chair, the Secretary shall perform the duties of the Chair.

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Article VI: Officers' Nomination, Election, and Term of Office

A. Nomination and Election
At its regular meeting in April of each year, the board shall appoint three of its members to serve as a nominating committee. The committee shall submit the name of at least one nominee for each of the offices of Chair, Vice Chair, and Secretary at the June meeting of the board at which meeting the election of officers of the board shall be held. Nominations also may be made from the floor. Members of the nominating committee shall be eligible for nomination, but no member shall be nominated whose consent to serve has not first been obtained. A majority of those present and voting shall constitute an election.

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B. Term of Office
The term of office of all officers shall be for one year, beginning on July 1 following the election, or until their respective successors are elected, but any officer may be removed from office, either with or without cause, at any time by the affirmative vote of a majority of all the members of the board. No officer may serve more than two consecutive terms in the same office.

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C. Vacancies
A vacancy in any office arising from any cause may be filled for the unexpired portion of the term as authorized by the board. The filling of a vacancy in office for the unexpired portion of a term will not prevent an officer from serving the two consecutive terms in the same office as proved in (B) above.

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D. Absences

In the absence of the Chair, Vice Chair, Secretary and immediate past Chair from any meeting, the board shall select one of its members to act in such capacity during that meeting.

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Article VII: Executive Committee, Standing Committees and Ad Hoc Committees

A. Executive Committee

There shall be an Executive Committee of the board. The purpose of the Executive Committee shall be to draft the agenda for the next full board meeting and to administer, subject to the authority and approval of the board, the required and necessary business of the board between regular meetings.

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The Executive Committee shall consist of the Chair, past Chairs continuing to serve on the board, Vice Chair, Secretary, and the Chairs of Standing Committees. The Executive Director shall serve as an *ex officio*, non-voting member of the Executive Committee.

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B. Standing Committees

Standing Committees shall be the Service Delivery Oversight Committee, and the Fiscal Oversight Committee. Their purpose shall be to review and make recommendations to the full board regarding policies, plans, service delivery proposals, budgets, grants, and such other matters as are referred to them by the board or Executive Committee.

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Members will be appointed by the Chair for a one-year appointment and may be reappointed to a Committee in subsequent years. The members of each Standing Committee shall elect from among the members a Chair or Co-Chairs for a one-year term. The Chair or Co-Chairs may be re-elected to an additional one-year term by the members.

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C. Ad Hoc Committees

Ad Hoc Committees may be established by the full board as needed. Those Committees may be established to address any issue for which the full board determines that the subject matter or issue cannot be adequately addressed by the Standing Committees. The members of each Ad Hoc Committee shall elect from among their members a Chair or Co-Chairs for a one-year term. The Chair or Co-Chairs may be reelected to an additional one-year term by the members.

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D. Associate Members for Standing and Ad Hoc Committees

Associate Members for Standing and Ad Hoc Committees are non-voting and may be appointed to each Standing or Ad Hoc Committee. Associate Members are individuals or representatives of organizations and agencies whose work and knowledge is deemed important to the Standing or Ad Hoc Committee. The Standing or Ad Hoc Committee may nominate representatives of the organizations and agencies they desire as Associate Members. These nominations shall be confirmed by a majority vote of the full board at the meeting at which they are nominated, unless, on motion of the board, the vote on confirmation is continued to a subsequent meeting of the full board. The term of each Associate Member shall be for one year from the date of their confirmation by the board.

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An Associate Member may be reappointed in subsequent or consecutive years to the Standing or Ad Hoc Committee on which they served. Vacancies may be filled at any time using this same process.

Article VIII: Meetings

A. Regular

Regular meetings of the board shall be held each month, as scheduled by the board.

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B. Special

Special meetings may be called by the board Chair or upon the request of two members of the board or the Executive Director. With agreement of the majority of board members, a special meeting may be convened. Public notice shall be given in accordance with the Virginia Freedom of Information Act.

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C. VFOIA

All meetings shall be open to the public except as provided under the Virginia Freedom of Information Act, Va. Code § 2.23700 et seq., as amended (“VFOIA”). Pursuant to Va. Code § 2.23701, “meeting” or “meetings” means the meetings including work sessions, when sitting physically, or through electronic communications means as permitted by the VFOIA, as a body or entity, or as an informal assemblage of (i) as many as three members or (ii) a quorum, if less than three, of the constituent membership, wherever held, with or without minutes being taken, whether or not votes are cast, of any public body.

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D. Quorum and Voting

A quorum is necessary for a vote. A majority of the membership of the board shall constitute a quorum. In making any recommendation, adopting any plan, or approving any proposal, action shall be taken by a majority vote of board members present and voting. Upon the request of any member, the vote of each member on any issue shall be recorded in the minutes. All votes of the board shall be taken during a public meetings, and no vote shall be taken by secret or written ballot or proxy.

Deleted: In order to transact business which requires a vote of the board, a quorum must be present. A quorum is a majority (PLUS ONE?) of the members of the board.¶

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Article IX: Parliamentary Procedures

Robert’s Rules of Order Newly Revised, latest edition shall govern the board in all cases to which they are applicable and in which they are not inconsistent with these bylaws.

Deleted: Every member, present in person or electronically(?) at any validly constituted meeting, shall be entitled to one vote. A majority vote of those members present and voting shall be determinative of any issue. A member is considered present for the purpose of voting if such member is participating remotely by electronic communication pursuant to any policy adopted by the board pursuant to Va. Code § 2.2-3708.2 of the Virginia Freedom of Information Act. No remotely participating member shall be counted towards a quorum pursuant to Va. Code § 2.2-3708.2(C)(2).

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Robert’s Rules of Order Newly Revised, latest edition,

Article X: Amendments

Recommendations to amend, alter or supplement these bylaws may be proposed at any regular meeting of the board. A two-thirds (2/3) vote of those present and voting is needed to send the recommended changes to the Board of Supervisors for their approval for the changes to be effective. Prior to any vote by the board, notice of the proposed changes must be given to each member of the board in writing no less than thirty days prior to the vote.

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Approved _____
CSB Board Chair

_____ Date

**Bylaws
of the
Fairfax-Falls Church Community Services Board**

Preamble

Subject to the provisions of:

- A. Chapter 5 (Community Services Boards) of Title 37.2 (Behavioral Health and Developmental Services) of the Code of Virginia, as amended, and,
- B. Joint Resolution adopted by the Board of Supervisors of Fairfax County on April 23, 1969, and by the Councils of the Cities of Fairfax and Falls Church on May 28, 1969, as amended, and,
- C. Other applicable laws and regulations.

The following bylaws apply to, and govern the administration of, the Fairfax-Falls Church Community Services Board.

Article I: Name

As provided by action of the Board of Supervisors of Fairfax County and the Councils of the Cities of Fairfax and Falls Church on August 1, 1978, the name of this board is the FAIRFAX-FALLS CHURCH COMMUNITY SERVICES BOARD, hereinafter referred to as the "BOARD".

Article II: Purpose

- A. Mental Health, Developmental Disabilities, and Substance Use Disorders Services – In conformity with the provisions of Va. Code § 37.2-500, this board is established as an administrative policy board whose general purpose shall be to ensure and oversee the establishment and operation of local mental health, developmental disabilities, and substance use disorder services.
- B. The core of services provided shall include emergency services and, subject to the availability of funds appropriated for them, case management services. The core of services may include a comprehensive system of inpatient, outpatient, day support, residential, prevention, and other appropriate mental health, developmental disabilities, and substance use disorder services necessary to provide individualized services and supports to persons with mental illnesses, developmental disabilities, or substance use disorders.

Article III: Powers and Duties

- A. Mental Health, Developmental Disabilities, and Substance Use Disorder Services – In order to implement the purpose, set forth in Article II hereof, pursuant to the requirements of Va. Code § 37.2-504 and in accordance with the actions taken by the Board of Supervisors of Fairfax County and the Councils of the cities of Fairfax and Falls Church to establish the board as an administrative policy board, the board shall:
1. Review and evaluate all existing and proposed public community mental health, developmental disabilities, and substance use disorder services and facilities available to serve the community and such private services and facilities as receive funds through it and advise the local governing bodies of the political subdivisions that established it as to its findings.
 2. Pursuant to Va. Code § 37.2-508, submit to the governing body of each political subdivision that established it, an annual performance contract for community mental health, developmental disabilities, and substance use disorder services for its approval prior to submission of the performance contract to the Virginia Department of Behavioral Health and Developmental Disability Services (“Department”).
 3. Within amounts appropriated therefore, provide such services as may be authorized under such performance contract.
 4. In accordance with its approved performance contract, enter into contracts with other providers for the delivery of services or operation of facilities.
 5. Make policies concerning the delivery of services or operation of facilities under its direction or supervision, subject to applicable standards, policies or regulations promulgated by the State Board of Behavioral Health and Developmental Services (“State Board”).
 6. Participate with local government in the appointment and annual performance evaluation of an executive director of community mental health, developmental disabilities, and substance use disorder services, according to minimum qualifications established by the Department, and prescribe his/her duties. The compensation of the executive director shall be fixed by local government in consultation with the board within the amounts made available by appropriation, therefore.
 7. Prescribe a reasonable schedule for fees for services provided by personnel or facilities under the jurisdiction or supervision of the board and establish procedures for the collection of the same. All fees collected shall be included in the performance contract submitted to the local governing bodies pursuant to subdivision 2 of this subsection and Va. Code § 37.2-508 and shall be used only for community mental health, developmental disabilities, and substance use disorder purposes. The board shall institute a reimbursement system to maximize the collection of fees from persons receiving services under its jurisdiction or supervision consistent with the provisions of Va. Code § 37.2-511 and from responsible third-party payors. The board shall not attempt to bill or collect fees for time spent participating in involuntary commitment hearings pursuant to Va.

Commented [BL1]: No need for this here since the addition earlier to “Va. Code”

Code § 37.2-814.

8. Accept or refuse gifts, donations, bequests or grants of money or property from any source and utilize the same as authorized by the governing bodies of the **political** subdivisions that established it.
9. Seek and accept funds through federal grants. In accepting such grants, the board shall not bind the governing bodies of the political subdivision that established it to any expenditures or conditions of acceptance without the prior approval of such governing bodies.
10. Have authority, notwithstanding any provision of law to the contrary, to disburse funds appropriated to it in accordance with such regulations as may be established by the governing bodies of the political subdivisions that established it.
11. Develop joint annual written agreements, consistent with policies and procedures established by the State Board, with local school divisions; health departments; boards of social services; housing agencies, where they exist; courts; sheriffs; area agencies on aging; and regional Virginia Department for Aging and Rehabilitative Services offices. The agreements shall specify what services will be provided to consumers. All participating agencies shall develop and implement the agreements and shall review the agreements annually.
12. Develop and submit to the local governing body of each political subdivision that established it and to the Department the necessary information for the preparation of the Comprehensive State Plan for mental health, developmental disabilities and substance use disorder services pursuant to Va. Code § 37.2-315.
13. Take all necessary and appropriate actions to **maximize** the involvement and participation of consumers and family members of consumers in policy formulation and services planning, delivery, and evaluation.
14. Institute, singly or in combination with other operating community services boards, administrative policy boards, local government departments with policy-advisory boards, or behavioral health authorities, a dispute resolution mechanism that is approved by the Department. The dispute mechanism enables consumers and family members of consumers to resolve concerns, issues, or disagreements about services without adversely affecting their access to or receipt of appropriate types and amounts of current or future services from the board.
15. Notwithstanding the provisions of Va. Code § 37.2-400 or any regulations promulgated thereunder, release data and information about individual consumers to the Department so long as the Department implements procedures to protect the confidentiality of such information.
16. Carry out other duties and responsibilities as assigned by the governing body of each political subdivision that established it.

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Article IV: Members and Terms of Office

- A. In accordance with Va. Code § 37.2-502 as implemented by the Board of Supervisors of Fairfax County and the Councils of the cities of Fairfax and Falls Church, the board shall consist of sixteen members, thirteen of whom shall be appointed by the Board of Supervisors of Fairfax County, one of whom shall be designated by the Office of the Sheriff of Fairfax County; and one of whom shall be appointed by the Council of the City of Fairfax and one by the Council of the City of Falls Church. In accordance with Va. Code § 37.2-501, one-third of the appointments shall be identified consumers or former consumers, or family members of consumers or family members of former consumers, at least one of whom shall be a consumer receiving services. The term of appointment is three years, and a person may serve only three, consecutive full terms.
- B. Vacancies shall be filled for unexpired terms in the same manner as original appointments. Persons appointed to fill a vacancy may serve three additional full terms.
- C. Members are expected to regularly attend all meetings. The board Chair may notify the Clerk to the Board of Supervisors if any board member misses three consecutive board meetings as well as meetings of the standing committee to which the board member has been appointed and this may serve as grounds for removal. Members may be removed from the board in accordance with the appointing authority policies and procedures governing removal from Boards, provided that such policies and procedures are consistent with the requirements of the Virginia Code.
- D. Each member of the board shall serve on at least one Standing Committee. If a board member misses three consecutive committee meetings, the member may be recommended for removal from the committee by the committee through the Committee Chair.
- E. Each member of the board shall conduct himself or herself cordially and appropriately to members of other governmental or private entities, members of the public or CSB staff, when representing the board.

Article V: Officers and Their Duties

- A. Officers
The officers of the board shall consist of a Chair, immediate past Chair, Vice Chair, and a Secretary, each of whom shall have such powers and duties as generally pertain to such respective offices, as well as such powers and duties as from time to time may be conferred upon them by the board, and which shall specifically include, but not be limited to, the powers, duties and responsibilities set forth hereinafter in Sections 2, 3, and 4 of Article VI.
- B. Chair
The Chair shall preside at all meetings of the board; sign or cause to be signed the minutes when approved by the board and such other official documents required of him/her in the course of business of the board; appoint such committees as deemed necessary by the board for its operation and to serve as an *ex officio* member of all committees except the nominating committee; work closely with local public and private

facilities, mental health, developmental disabilities, and substance use disorder associations of Virginia, and other groups interested in mental health, developmental disabilities and substance use disorder issues; maintain liaison with the Board of Supervisors of Fairfax County and the Councils of the Cities of Fairfax and Falls Church and the Department; and keep the Board of Supervisors, City Councils, and the Department's Commissioner advised and fully informed as to the activities and programs of the board.

C. Vice Chair

In the absence of the Chair, the Vice Chair shall perform the duties of the Chair.

D. Immediate Past Chair

In the absence of the Chair and the Vice Chair, the immediate past Chair shall perform the duties of the Chair.

E. Secretary

The Secretary shall sign all policies after they have been approved or amended by the board and perform such other duties as requested by the Chair of the board. The Secretary also regularly reviews and updates the CSB Board Member Orientation Handbook. In the absence of the Chair, the Vice Chair, and the immediate past Chair, the Secretary shall perform the duties of the Chair.

Article VI: Officers' Nomination, Election, and Term of Office

A. Nomination and Election

At its regular meeting in April of each year, the board shall appoint three of its members to serve as a nominating committee. The committee shall submit the name of at least one nominee for each of the offices of Chair, Vice Chair, and Secretary at the June meeting of the board at which meeting the election of officers of the board shall be held.

Nominations also may be made from the floor. Members of the nominating committee shall be eligible for nomination, but no member shall be nominated whose consent to serve has not first been obtained. A majority of those present and voting shall constitute an election.

B. Term of Office

The term of office of all officers shall be for one year, beginning on July 1 following the election, or until their respective successors are elected, but any officer may be removed from office, either with or without cause, at any time by the affirmative vote of a majority of all the members of the board. No officer may serve more than two consecutive terms in the same office.

C. Vacancies

A vacancy in any office arising from any cause may be filled for the unexpired portion of the term as authorized by the board. The filling of a vacancy in office for the unexpired portion of a term will not prevent an officer from serving the two consecutive terms in the same office as proved in (B) above.

D. Absences

In the absence of the Chair, Vice Chair, Secretary and immediate past Chair from any meeting, the board shall select one of its members to act in such capacity during that meeting.

Article VII: Executive Committee, Standing Committees and Ad Hoc Committees

A. Executive Committee

There shall be an Executive Committee of the board. The purpose of the Executive Committee shall be to draft the agenda for the next full board meeting and to administer, subject to the authority and approval of the board, the required and necessary business of the board between regular meetings.

The Executive Committee shall consist of the Chair, past Chairs continuing to serve on the board, Vice Chair, Secretary, and the Chairs of Standing Committees. The Executive Director shall serve as an *ex officio*, non-voting member of the Executive Committee.

B. Standing Committees

Standing Committees shall be the Service Delivery Oversight Committee and the Fiscal Oversight Committee. Their purpose shall be to review and make recommendations to the full board regarding policies, plans, service delivery proposals, budgets, grants, and such other matters as are referred to them by the board or Executive Committee.

Members will be appointed by the Chair for a one-year appointment and may be reappointed to a Committee in subsequent years. The members of each Standing Committee shall elect from among the members a Chair or Co-Chairs for a one-year term. The Chair or Co-Chairs may be re-elected to an additional one-year term by the members.

C. Ad Hoc Committees

Ad Hoc Committees may be established by the full board as needed. Those Committees may be established to address any issue for which the full board determines that the subject matter or issue cannot be adequately addressed by the Standing Committees. The members of each Ad Hoc Committee shall elect from among their members a Chair or Co-Chairs for a one-year term. The Chair or Co-Chairs may be reelected to an additional one-year term by the members.

D. Associate Members for Standing and Ad Hoc Committees

Associate Members for Standing and Ad Hoc Committees are non-voting and may be appointed to each Standing or Ad Hoc Committee. Associate Members are individuals or representatives of organizations and agencies whose work and knowledge is deemed important to the Standing or Ad Hoc Committee. The Standing or Ad Hoc Committee may nominate representatives of the organizations and agencies they desire as Associate Members. These nominations shall be confirmed by a majority vote of the full board at the meeting at which they are nominated, unless, on motion of the board, the vote on confirmation is continued to a subsequent meeting of the full board. The term of each Associate Member shall be for one year from the date of their confirmation by the board.

An Associate Member may be reappointed in subsequent or consecutive years to the Standing or Ad Hoc Committee on which they served. Vacancies may be filled at any time using this same process.

Article VIII: Meetings

A. Regular

Regular meetings of the board shall be held each month, as scheduled by the board.

B. Special

Special meetings may be called by the board Chair or upon the request of two members of the board or the Executive Director. With agreement of the majority of board members, a special meeting may be convened. Public notice shall be given in accordance with the Virginia Freedom of Information Act.

C. VFOIA

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Approved _____
CSB Board Chair

_____ Date