



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

**Jennifer Adeli, Chair**

Thursday, August 19, 2021, 4:00 p.m.

Will be held electronically due to the COVID-19 pandemic

**Dial by your location to access live audio of the meeting:**

+1 301 715 8592 US (Washington DC)                      +1 669 900 9128 US (San Jose)  
+1 646 558 8656 US (New York)                            +1 253 215 8782 US (Tacoma)  
+1 312 626 6799 US (Chicago)                            +1 346 248 7799 US (Houston)

**Meeting ID: [963 6411 6054](https://www.zoom.us/j/96364116054) • Passcode: 891057**

MEETING AGENDA

1. Meeting Called to Order *Jennifer Adeli*
2. Matters of the Public
3. Amendments to the Meeting Agenda *Jennifer Adeli*
4. Review of July 15, 2021, Meeting Minutes *Jennifer Adeli*
5. Administrative Operations Report *Daniel Herr*
  - A. Position Status
  - B. Letter to Money Committee Chairs Regarding Funding to Address State Hospital Closures
6. Clinical Operations Report *Lyn Tomlinson*
7. Financial Status *Jessica Burris*
  - A. FX-FC CSB Expenditures-Budget vs. Actuals
  - B. Modified Fund Statement
  - C. Variable Revenue Report
8. FY 2021 End of Year Report *Jennifer Adeli*
9. Open Discussion
10. Adjourn

# CSB Fiscal Oversight Committee Meeting Minutes

July 15, 2021

The Fiscal Oversight Committee of the Fairfax-Falls Church Community Services Board met in regular session at the Merrifield Center, 8221 Willow Oaks Corporate Drive, Fairfax, VA.

## Members in Attendance:

**In-Person:** Chair, Jennifer Adeli; Karen Abraham; Captain Derek DeGeare; Andrew Scalise; and Daniel Sherrange

**Remote:** Bettina Lawton (joined late, traveling out of state)

## Members Absent Sandra Slappey Brown

**Staff:** Daryl Washington, Georgia Bachman, Daniel Herr, Linda Mount, and Jessica Burris

### 1. Meeting called to order.

The meeting was called to order at 4:04 p.m.

### 2. Matters of the Public.

None were presented.

### 3. Amendments to the meeting agenda

As no recommendations were forthcoming, Captain Derek DeGeare offered a motion to accept the meeting agenda as presented that was unanimously approved.

### 4. Review of meeting minutes

The June 17, 2021, meeting minutes were offered for review. Captain Derek DeGeare made a motion to approve the minutes as presented, which was seconded by Karen Abraham and approved with Daniel Sherrange abstaining.

### 5. Administrative Operations Report

Daniel Herr provided updates to recent activities including:

- The contract with Welligent for a new Electronic Health Record (EHR) has been signed and is anticipated to be fully implemented over the next 14 months (September 2022).
- A NIP (Not in Package) was submitted to the Board of Supervisors (BOS) to provide an update to the suspension of admissions at five of the eight state psychiatric hospitals due to staffing shortages. Recognizing the cyclical impact this will have on local and statewide resources, efforts to relieve the impact include working with local private partners to locate available beds and creative discharge planning. It was noted that this will also greatly impact law enforcement coverage at the MCRC (Merrifield Crisis Response Center) for exchange of custody. This is primarily related to TDOs (Temporary Detention Orders) as officers/deputies are required to remain with an individual with a TDO until the individual is hospitalized. Planning also includes the expected reduction in census when admissions resume.
- An update to carryover and the use of one-time funds was provided. Due to the projected balance of end-of-year money, it is anticipated that some will be reclaimed by DMB (Department of Management and Budget) during carryover. It was clarified

# CSB Fiscal Oversight Committee Meeting Minutes

July 15, 2021

that the use of one-time funds for current initiatives may safeguard those funds to allow continued implementation of the initiatives with some flexibility.

- The Virginia General Assembly passed a law that allows local county governments to participate in collective bargaining with unions.
- An update to the salary compression and employee surveys was provided. Members and staff engaged in discussion of results received to date and proposed solutions. The CSB Board will be provided a summary report once available.

Mr. Herr directed attention to the HR Update report provided in the meeting materials. It was noted that the increase in vacancies was partially due to the new positions added to the report.

## Clinical Operations Report

In the absence of Lyn Tomlinson, Georgia Bachman provided an overview of the Clinical Operations Reports included in the meeting materials. Some highlights included:

- The decreases in the (SUD) Substance Use Disorder Residential Waiting List over the last several months was partially attributed to the resumption of pre-COVID capacity, acknowledging that there continue to be a high number of staff vacancies in residential settings.
- Acknowledging the increase in Adult Outpatient Time to Treatment, it was noted that high staff vacancies continue. Mitigation efforts include engagement staff and supervisors focusing on regular communication and outreach to individuals on the monitoring lists. A pilot program was launched that provides individuals on the monitoring wait list with information for optional resources. A new system for tracking first appointment offered and accepted but missed or cancelled has been implemented.
- Youth Time to Treatment reflects an increase in the number of individuals attending outpatient services in June 2021. This was partially attributed to the reduction of barriers to intake and assessment. Televideo services also contribute as services can be provided regardless of catchment area.

## 6. Financial Status

Jessica Burris provided an overview of the financial reports, including the following:

### A. *Program Budget vs. Actuals – Expenditures and Unrestricted*

It was clarified that the approximate \$1.7M expense for the Opioid Task Force is primarily related to operating expenses. Ms. Burris offered a reminder that this report will continue to be provided for review in response to member requests.

### B. *Modified Fund Statement*

- A reminder was offered that this report reflects end of the year data with only limited adjustments anticipated.
- The end of year revenue is approximately \$1.8M higher than anticipated partially attributed to surplus state funds.
- Operating expenses were a little higher than anticipated at approximately \$17M primarily in Compensation and Fringe related to COVID expenses including

# CSB Fiscal Oversight Committee Meeting Minutes

July 15, 2021

Employment & Day contract services. Also included are unspent FY2020 carryover funds of approximately \$8M.

- The FY2021 year-end balance of approximately \$39M includes the Reserve funds detailed in the notes.
- Approximately \$450K in COVID expenditures will be reimbursed by FEMA (Federal Emergency Management Agency) and will be reflected in a subsequent period.

## C. *Variable Revenue Report*

- A reminder was offered of the reduction in state revenue to compensate for the anticipated increases from Medicaid Expansion. It was highlighted that the tracking charts reflect better than expected revenue.

Daryl Washington, noting a delay with individuals seeking services, reported expectations that once face-to-face assessments resume, individuals will begin to seek services earlier as there has been some avoidance during the pandemic.

## 7. FY 2021 End of Year Report

Jennifer Adeli provided an update to development of the End of Year Report, offering a reminder of the timeline and announcement of the identified report topics. There are six identified critical issue areas that include STEP-VA, (System, Transformation, Excellence and Performance), State Psychiatric Hospital Bed Crisis, Opioid Epidemic, Medicaid, Diversion First including Marcus Alert, and Developmental Disability (DD) services. CSB operations and personnel topics include Compliance, Healthcare Systems including the new EHR (Electronic Health Record), Human Resources, and the One Fairfax initiative.

The projected timeline is:

- 8/25/2021 – Draft to CSB Leadership
- 8/30/2021 – Draft to CSB Board Chair
- 9/3/2021 – Draft to full CSB Board
- 9/10/2021 – Turn-around for CSB Board review/comment to cover letter and report. Revisions sent to \*\*\*\*
- 9/17/2021 – Final review/comment of draft by CSB Board, revisions sent to \*\*\*\*
- 9/22/2021 – Approval by CSB Board to forward to BOS/Cities
- 10/23/2021 – Submission to the BOS and the Mayors of the cities of Fairfax and Falls Church.

Members and staff engaged in robust discussion.

There being no further business to come before the Fiscal Oversight Committee, the meeting was adjourned at 5:40 p.m.

## **Action Items/Responsible Party Required Prior to Next Meeting:**

## **Issues to Communicate to CSB Board:**

# CSB Fiscal Oversight Committee Meeting Minutes

July 15, 2021

**Agenda Items for Next Meeting:**

Next Scheduled Fiscal Oversight Committee meeting

**Thursday, August 19, 4:00 p.m.**

**Merrifield Center, 8221 Willow Oaks Corporate Drive, Fairfax, VA  
Room 3-314, West**

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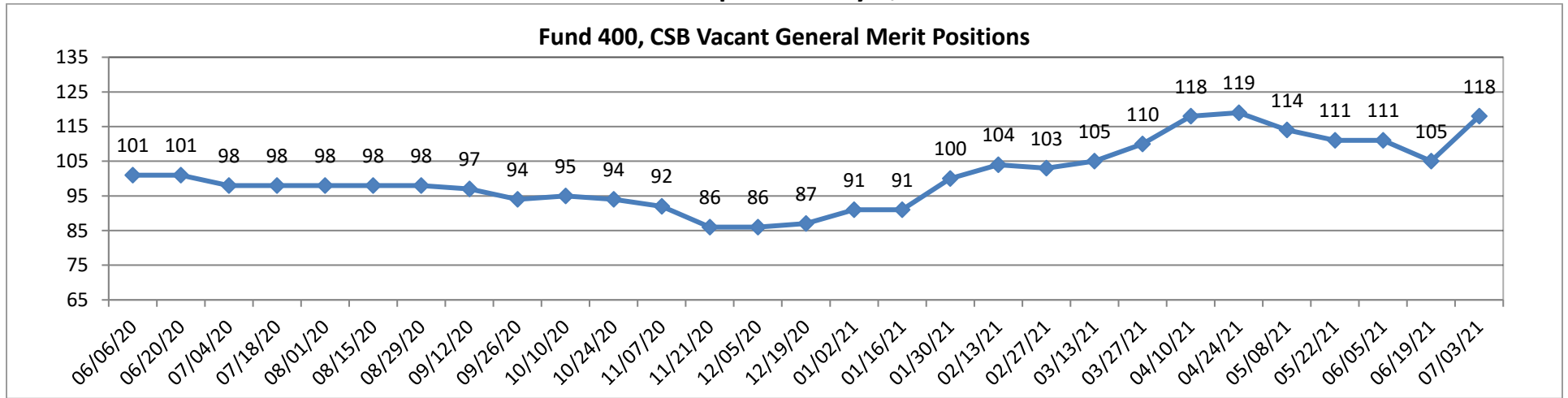
Date Approved

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Clerk to the Board

DRAFT

**Fiscal Oversight Committee  
CSB HR Update – July 6, 2021**



**FY22: 15 full-time positions will be added; increase at 7/3/21 reflects 4 of these positions; the remaining 11 are still in process.**

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

Service area / program	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June		July	
<b>Emergency Svcs/MCU</b>	3	3	3	3	2	2	3	4.5	3.5	3.5	1	1	1 CIS	0	
<b>Behavioral Health – Outpatient Svcs</b>	16	14	13	11	7	7	6	10	11	11	12	8	4 BHS II 3 LPN 1 BHN Clin/Case Mgr.	11	6 BHS II 2 BH Sr. Clin 3 LPN
<b>Youth &amp; Family – Outpatient Svcs</b>	6	4	3	4	4	4	7	8	9	9	9	6	4 BH Sr. Clin 1 BHS II 1 BH Mgr.	5	3 BH Sr. Clin 1 BHS II 1 BH Mgr.
<b>Support Coordination</b>	11	11	10	8	8	8	8	8	10	12	12	10	13 DDS II	15	13 DDS II 2 DDS III
<b>ADC/ Jail Diversion</b>	6	7	9	9	8	7	9	7	7	9	10	10	9 BHS II 1 BH Mgr.	10	9 BHS II 1 BH Mgr.

July 29, 2021

The Honorable Janet D. Howell  
Chair, Senate Finance & Appropriations Committee  
Senate of Virginia  
Post Office Box 2608  
Reston, Virginia 20195

The Honorable Luke Torian  
Chair, House Appropriations Committee  
Virginia House of Delegates  
4222 Fortuna Plaza, Suite 659  
Dumfries, Virginia 22025

Dear Chairwoman Howell and Chairman Torian:

As representatives of seven jurisdictions in the Virginia Department of Behavioral Health and Developmental Services (DBHDS or “department”) Northern Region, we are writing to express our concern about the disruption in care to individuals in need of hospitalization due to the temporary closure of admissions to five of the eight adult state psychiatric hospitals and the census reduction of the only state hospital for youth from 48 to 18 beds. This decision creates unilateral risk to our communities. It is our understanding that lack of workforce and safety led Commissioner Land to close civil Temporary Detention Order (TDO) admissions to the adult facilities and significantly reduce the bed capacity at the youth facility. We support Governor Northam’s recently announced plan to use both American Rescue Plan Act dollars and budget dollars to address the issues raised by Commissioner Land.

In the meantime, we currently have no indication when civil TDO admissions to the adult facilities may resume, and the need for TDO beds remains unmet. Some of our communities’ most vulnerable will need to board in private hospital Emergency Rooms, restrained to a bed with law enforcement supervision until a TDO bed is secured, or the individual is released without receiving critically needed inpatient treatment. This scenario increases demand on law enforcement and our emergency rooms while likely exacerbating the individual’s crisis experience.

Therefore, as you work on the budget for Special Session II beginning on August 2, we ask that you consider financial supports for our collective behavioral health safety net and the following recommendations:

*Prioritize CSB Services for Hospital Discharges*

Consider additional community funding to allow individuals on the Extraordinary Barriers List (EBL) who require 24/7 supports to transition to the community. This would include, but not be limited to, investing in community residential treatment alternatives for individuals with serious mental illness. In addition, funding designated within the biennium budget for the CSBs and regional partners will enable them to address discharge barriers through targeted-strategic community supports and services that would move individuals off the EBL and into community-based services. The funding would need to include one-time build out costs as well as ongoing funds to cover staffing and operations.

*Prioritize Workforce Development*

The decrease in the state hospital workforce attributed to this crisis is not an isolated issue experienced by state hospitals. Both private and public behavioral health systems across the

state's behavioral health continuum have been citing staffing shortages as one of their primary challenges in recent years. In addition to any short-term proposals, our communities and those we serve will benefit from funding provided to invest in education and workforce development and compensation across the continuum of specialties required to support life span needs for individuals diagnosed with serious mental illness, serious emotional disturbances, substance use disorders, and developmental and intellectual disabilities.

*Strategic Development of Behavioral Health Continuum*

Consider funding to invest in community capacity including evidence-based practices in prevention, outpatient therapy, crisis services, and residential treatment. These community supports, reinforced through STEP-VA, have been successful in increasing access to behavioral health services. Funding for these practices, in combination with investments that address recommendations of the 2020 *Virginia Behavioral Health System Needs Assessment Report*, are critical to developing the overall behavioral health continuum necessary to stabilize individuals within our communities.

We appreciate your consideration of these recommendations as the continued closure of the state psychiatric facilities has negative and lasting affects to the Commonwealth's behavioral healthcare system, and more importantly to individuals in need of more intensive services.

Sincerely,



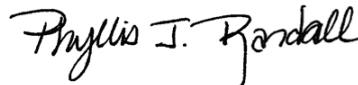
Justin Wilson, Mayor  
City of Alexandria



Katie Cristol, Vice Chair  
Arlington County



Jeffrey McKay, Chairman  
Fairfax County



Phyllis J. Randall, Chair At-Large  
Loudoun County



Ann B. Wheeler, Chair At-Large  
Prince William County



David Snyder, Legislative Committee Chair  
City of Falls Church



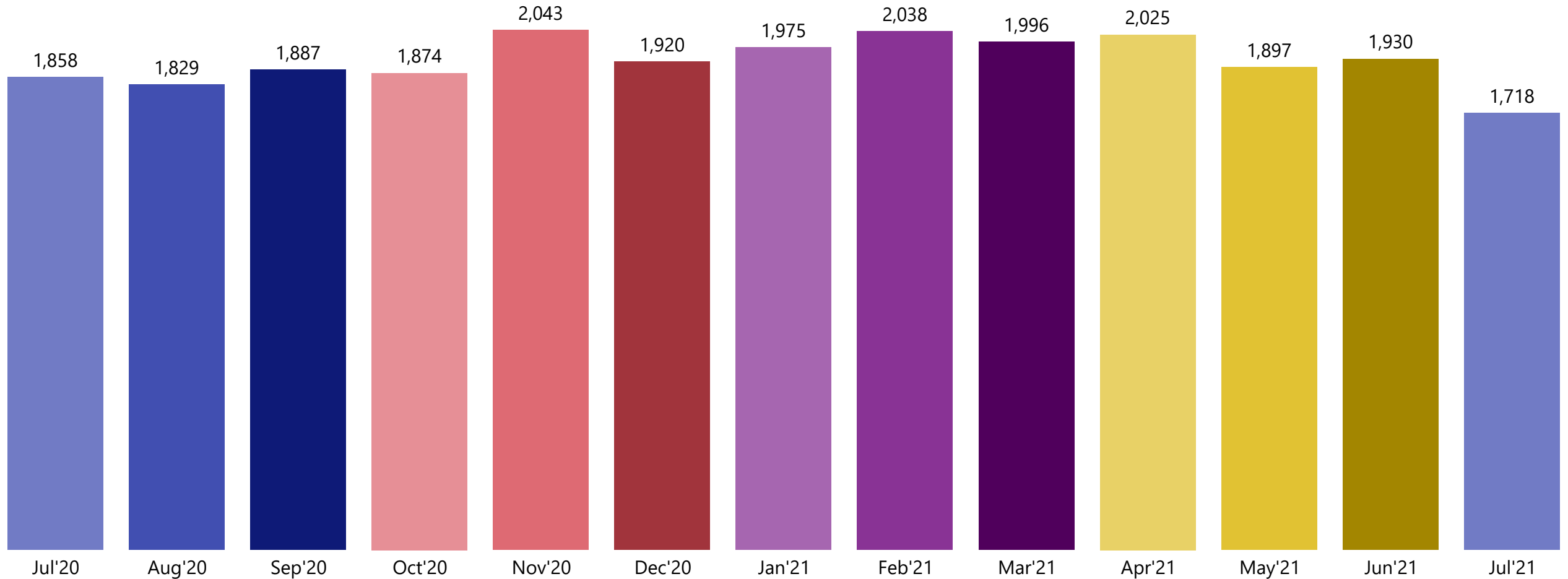
David L. Meyer, Mayor  
City of Fairfax



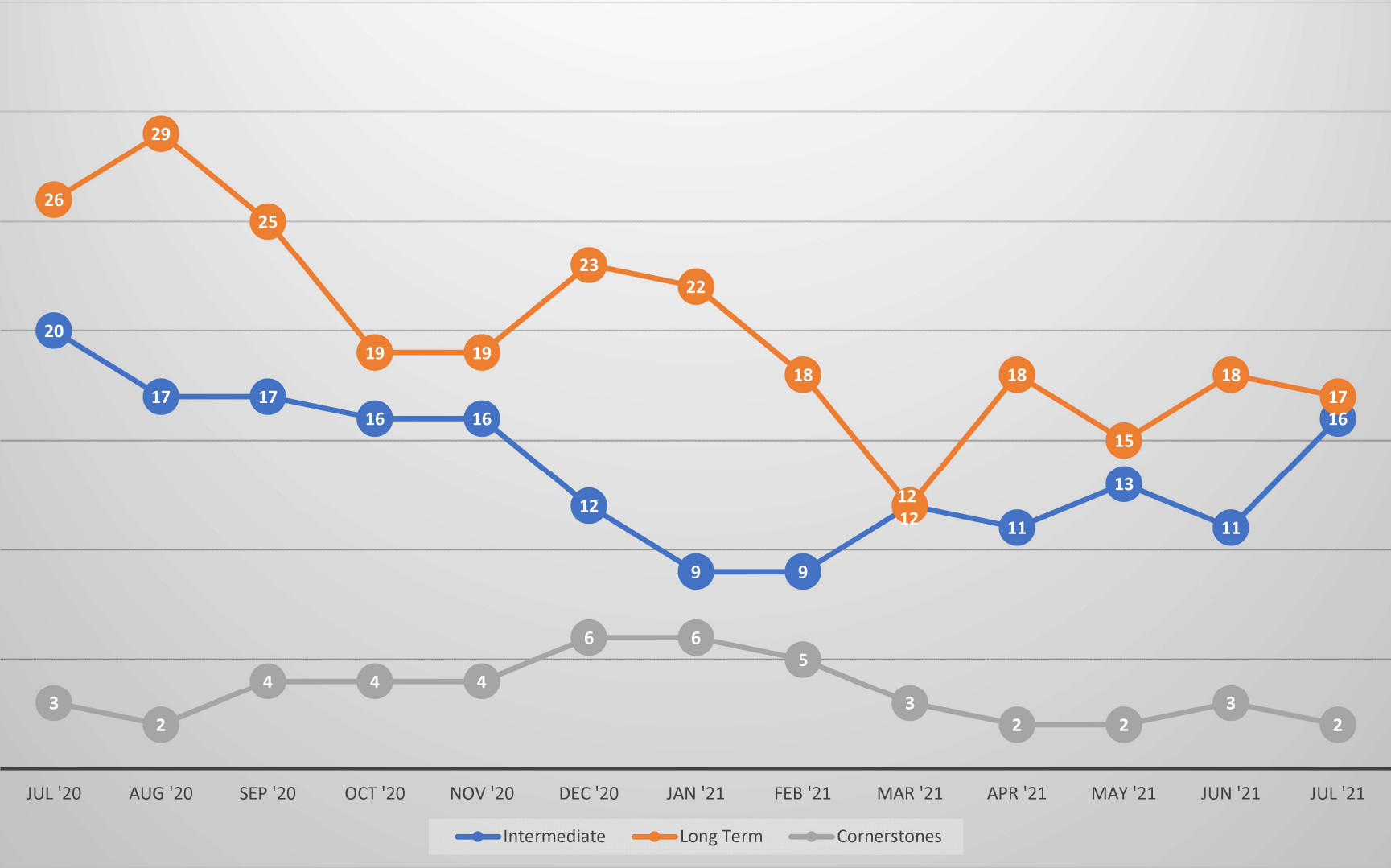
CC: Members of the Senate Finance & Appropriations Committee  
Members of the House Appropriations Committee  
Ms. Susan Massart, Legislative Fiscal Analyst, House Appropriations Committee  
Mr. Mike Tweedy, Legislative Fiscal Analyst, Senate Finance & Appropriations  
Committee

# Agency Wide - Average Clients Served per Day

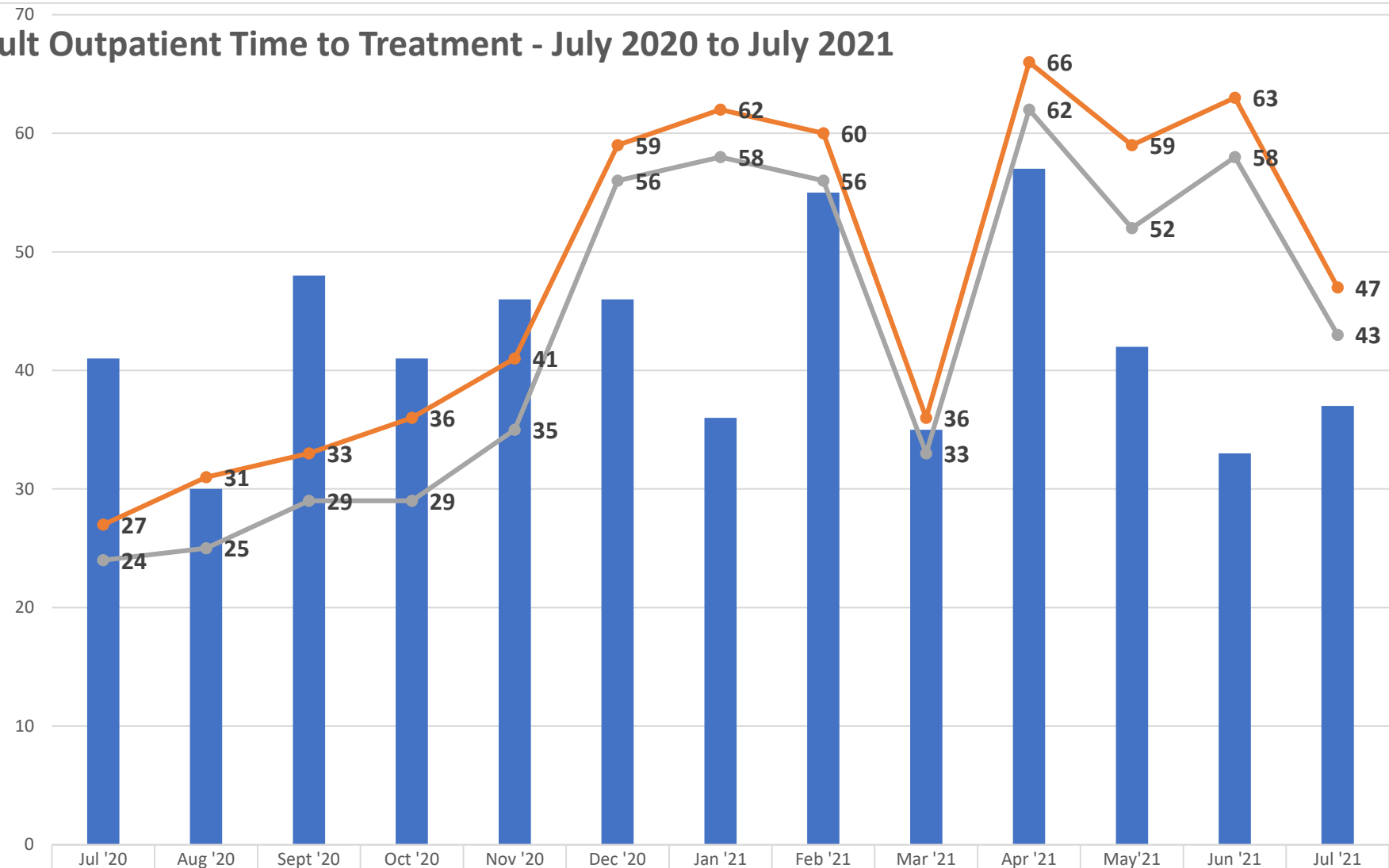
Excludes Emergency, Residential, and Employment & Day



# SUD Residential Waiting List Individuals Waiting by Program Type July 2020 - July 2021



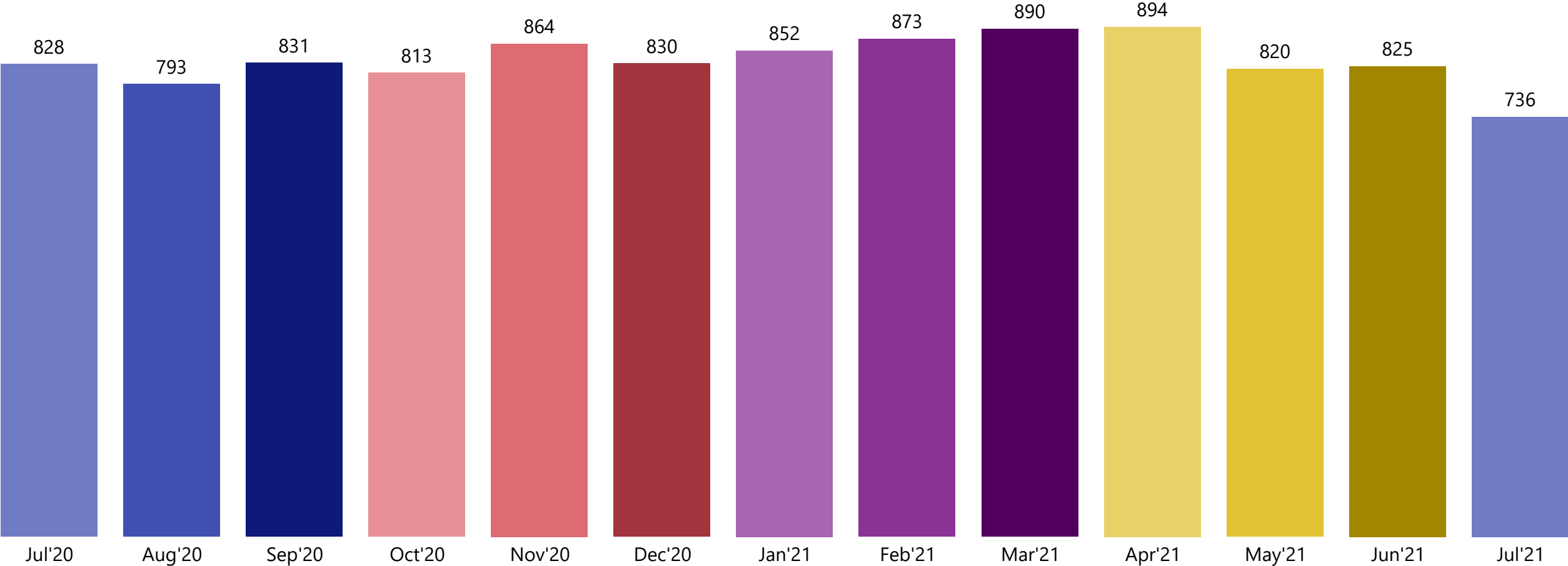
## Adult Outpatient Time to Treatment - July 2020 to July 2021



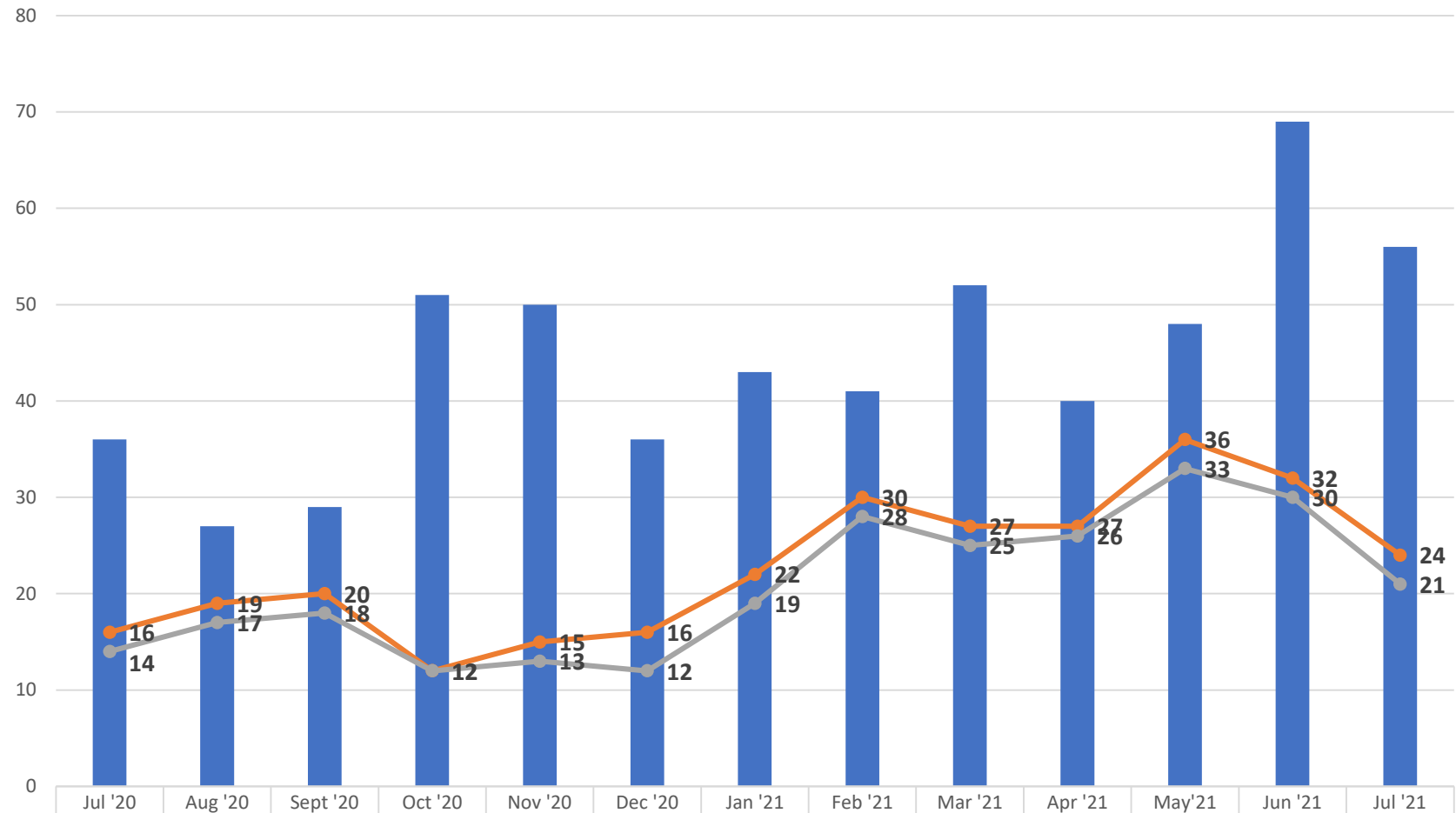
# Adults Who Attended 1st Treatment Appt	41	30	48	41	46	46	36	55	35	57	42	33	37
Average # Days from Assessment to Treatment	27	31	33	36	41	59	62	60	36	66	59	63	47
Average # Days from Assessment to 1st Available / Accepted Appt*	24	25	29	29	35	56	58	56	33	62	52	58	43

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

# Adult BH Outpatient - Average Clients Served per Day



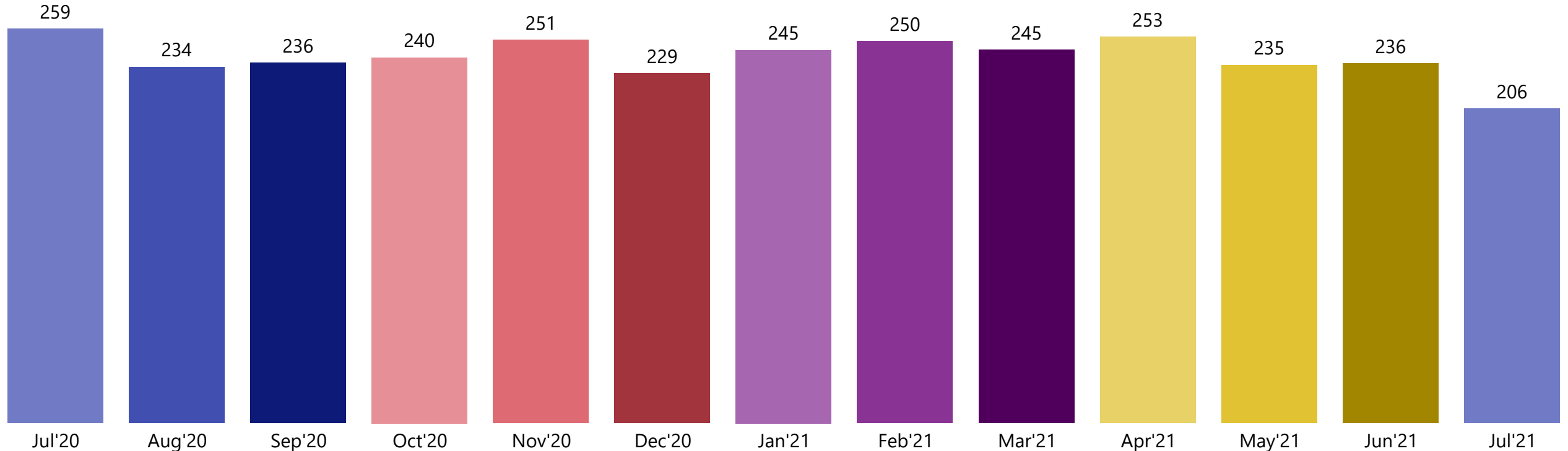
## Youth Outpatient Time to Treatment - July 2020 to July 2021



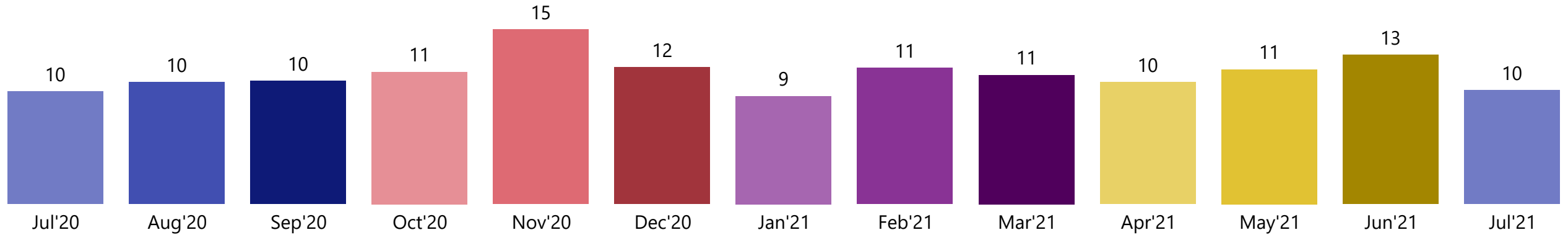
# Youth Who Attended 1st Treatment Appt	36	27	29	51	50	36	43	41	52	40	48	69	56
Average # Days from Assessment to Treatment	16	19	20	12	15	16	22	30	27	27	36	32	24
Average # Days from Assessment to 1st Available / Accepted Appt*	14	17	18	12	13	12	19	28	25	26	33	30	21

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

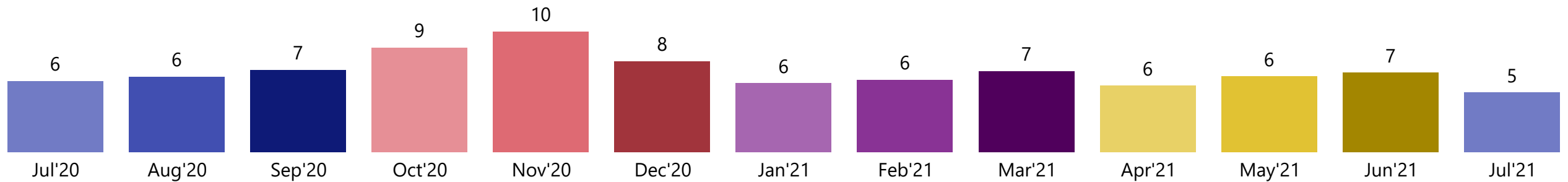
# Youth BH Outpatient - Average Clients Served per Day



## Entry & Referral - Average Clients Screened per Day

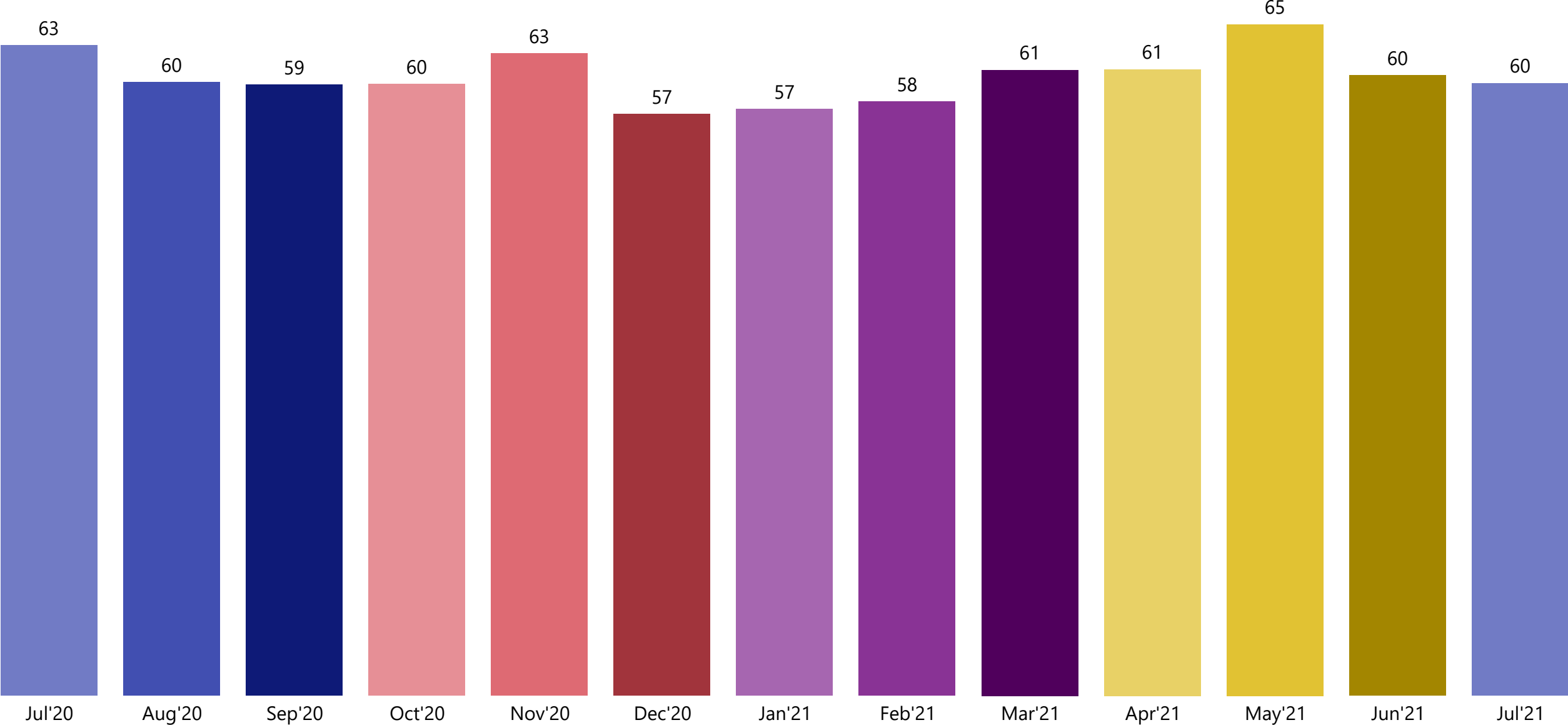


## Entry & Referral - Average Clients Assessed per Day





# Emergency - Average Clients Served per Day



Fairfax-Falls Church Community Services Board  
Expenditures  
Program Budget vs. Actuals  
JULY FY22 YTD

SERVICE/PROGRAM AREA	FUND 400-C40040 (UNRESTRICTED FEDERAL, LOCAL AND STATE)			FUND 500-C50000 (RESTRICTED FEDERAL, STATE AND OTHER)			TOTAL UNRESTRICTED, RESTRICTED FEDERAL, STATE AND OTHER		
	Budget	Actuals	Variance	Budget	Actuals	Variance	Budget	Actuals	Variance
<b>G761501 - CSB Office of the Deputy Director - Clinical</b>									
<i>G761001004 - Consumer &amp; Family Affairs</i>	\$ -	\$ 34	\$ (34)				\$ -	\$ 34	\$ (34)
<i>G761001008 - Medical Services</i>	\$ -	\$ 296	\$ (296)				\$ -	\$ 296	\$ (296)
G761501002 - Consumer & Family Affairs	\$ 171,637	\$ 169,609	\$ 2,028	\$ (483)	\$ (120,944)	\$ 120,461	\$ 171,154	\$ 48,664	\$ 122,489
G761501003 - Medical Services	\$ 1,568,893	\$ 572,439	\$ 996,454	\$ 10,833	\$ -	\$ 10,833	\$ 1,579,726	\$ 572,439	\$ 1,007,287
G761501004 - Opioid Task Force	\$ 424,429	\$ 107,493	\$ 316,936				\$ 424,429	\$ 107,493	\$ 316,936
G761501005 - Utilization Management	\$ 64,483	\$ 34,729	\$ 29,755				\$ 64,483	\$ 34,729	\$ 29,755
<b>G761501 - CSB Office of the Deputy Director - Clinical Total</b>	<b>\$ 2,229,442</b>	<b>\$ 884,600</b>	<b>\$ 1,344,842</b>	<b>\$ 10,350</b>	<b>\$ (120,944)</b>	<b>\$ 131,295</b>	<b>\$ 2,239,792</b>	<b>\$ 763,655</b>	<b>\$ 1,476,137</b>
<b>G762001 - Engagement Asmt &amp; Referral Services</b>									
<i>G761001011 - Wellness Health Promotion Prevention</i>	\$ -	\$ 3,943	\$ (3,943)				\$ -	\$ 3,943	\$ (3,943)
G762001001 - EAR Program Management	\$ 46,446	\$ 14,379	\$ 32,068	\$ 54	\$ -	\$ 54	\$ 46,500	\$ 14,379	\$ 32,121
G762001002 - Entry, Referral, & Assessment	\$ 322,504	\$ 104,250	\$ 218,255	\$ 12,142	\$ (173,442)	\$ 185,584	\$ 334,647	\$ (69,192)	\$ 403,839
G762001004 - Wellness Health Promotion Prevention	\$ 245,561	\$ 98,798	\$ 146,763	\$ 3,663	\$ 16,236	\$ (12,574)	\$ 249,224	\$ 115,034	\$ 134,189
<b>G762001 - Engagement Asmt &amp; Referral Services Total</b>	<b>\$ 614,512</b>	<b>\$ 221,370</b>	<b>\$ 393,142</b>	<b>\$ 15,858</b>	<b>\$ (157,206)</b>	<b>\$ 173,064</b>	<b>\$ 630,370</b>	<b>\$ 64,164</b>	<b>\$ 566,206</b>
<b>G762002 - Emergency &amp; Crisis Care Services</b>									
G762002001 - Emergency & Crisis Care Svcs Program Mgm	\$ 23,702	\$ 9,196	\$ 14,505				\$ 23,702	\$ 9,196	\$ 14,505
G762002002 - Adult Crisis Stabilization	\$ 394,304	\$ 214,803	\$ 179,501				\$ 394,304	\$ 214,803	\$ 179,501
G762002004 - Emergency	\$ 723,143	\$ 310,164	\$ 412,979	\$ 17,441	\$ 14,056	\$ 3,385	\$ 740,584	\$ 324,220	\$ 416,364
<b>G762002 - Emergency &amp; Crisis Care Services Total</b>	<b>\$ 1,141,149</b>	<b>\$ 534,164</b>	<b>\$ 606,985</b>	<b>\$ 17,441</b>	<b>\$ 14,056</b>	<b>\$ 3,385</b>	<b>\$ 1,158,590</b>	<b>\$ 548,220</b>	<b>\$ 610,370</b>
<b>G762003 - Residential Treatment &amp; Detoxification Services</b>									
G762002003 - Detoxification & Diversion	\$ -	\$ 41,812	\$ (41,812)				\$ -	\$ 41,812	\$ (41,812)
G762003001 - Residential Treatment Program Management	\$ 22,725	\$ 15,986	\$ 6,739				\$ 22,725	\$ 15,986	\$ 6,739
G762003002 - Residential Admissions & Support	\$ 91,019	\$ 32,606	\$ 58,414				\$ 91,019	\$ 32,606	\$ 58,414
G762003003 - A New Beginning	\$ 401,454	\$ 204,610	\$ 196,844				\$ 401,454	\$ 204,610	\$ 196,844
G762003004 - Crossroads Adult	\$ 378,987	\$ 144,343	\$ 234,644				\$ 378,987	\$ 144,343	\$ 234,644
G762003005 - New Generations	\$ 162,667	\$ 80,670	\$ 81,997				\$ 162,667	\$ 80,670	\$ 81,997
G762003006 - Cornerstones	\$ 255,810	\$ 121,952	\$ 133,858				\$ 255,810	\$ 121,952	\$ 133,858
G762003007 - Residential Treatment Contract	\$ 50,000	\$ 564	\$ 49,436				\$ 50,000	\$ 564	\$ 49,436
G762003008 - Detoxification Services	\$ 495,124	\$ 156,204	\$ 338,920				\$ 495,124	\$ 156,204	\$ 338,920
<b>G762003 - Residential Treatment &amp; Detoxification Services Total</b>	<b>\$ 1,857,788</b>	<b>\$ 798,748</b>	<b>\$ 1,059,040</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 1,857,788</b>	<b>\$ 798,748</b>	<b>\$ 1,059,040</b>
<b>G762005 - Youth &amp; Family Services</b>									
G762005001 - Youth & Family Program Management	\$ 38,770	\$ 10,817	\$ 27,953				\$ 38,770	\$ 10,817	\$ 27,953
G762005002 - Youth & Family Outpatient	\$ 685,821	\$ 259,599	\$ 426,222				\$ 685,821	\$ 259,599	\$ 426,222
<i>G762005003 - Youth &amp; Family Day Treatment</i>							\$ -	\$ -	\$ -
G762005004 - Youth Resource Team	\$ 181,993	\$ 76,667	\$ 105,326	\$ 6,670	\$ 17,598	\$ (10,928)	\$ 188,663	\$ 94,265	\$ 94,398
G762005005 - Wraparound Fairfax	\$ 93,786	\$ 42,428	\$ 51,358				\$ 93,786	\$ 42,428	\$ 51,358
G762005006 - Court Involved Youth	\$ 55,691	\$ 30,215	\$ 25,476	\$ 103	\$ 27	\$ 76	\$ 55,794	\$ 30,242	\$ 25,552
G762005009 - Youth & Family Contract	\$ 67,958	\$ 32,152	\$ 35,807				\$ 67,958	\$ 32,152	\$ 35,807
<b>G762005 - Youth &amp; Family Services Total</b>	<b>\$ 1,124,018</b>	<b>\$ 451,878</b>	<b>\$ 672,141</b>	<b>\$ 6,773</b>	<b>\$ 17,625</b>	<b>\$ (10,852)</b>	<b>\$ 1,130,791</b>	<b>\$ 469,502</b>	<b>\$ 661,289</b>
<b>G762006 - Diversion &amp; Jail-Based Services</b>									
<i>G763006002 - Forensic Services</i>	\$ -	\$ 56,427	\$ (56,427)	\$ 7,626	\$ 942	\$ 6,684	\$ 7,626	\$ 57,369	\$ (49,743)
<i>G763006007 - Jail Diversion</i>	\$ -	\$ 59,162	\$ (59,162)	\$ 4,671	\$ 24,368	\$ (19,697)	\$ 4,671	\$ 83,530	\$ (78,858)
G762006002 - Jail Diversion	\$ 253,644	\$ 55,069	\$ 198,576						
G762006003 - Forensic Services	\$ 291,189	\$ 35,987	\$ 255,202				\$ 291,189	\$ 35,987	\$ 255,202

Fairfax-Falls Church Community Services Board  
Expenditures  
Program Budget vs. Actuals  
JULY FY22 YTD

SERVICE/PROGRAM AREA	FUND 400-C40040 (UNRESTRICTED FEDERAL, LOCAL AND STATE)			FUND 500-C50000 (RESTRICTED FEDERAL, STATE AND OTHER)			TOTAL UNRESTRICTED, RESTRICTED FEDERAL, STATE AND OTHER		
	Budget	Actuals	Variance	Budget	Actuals	Variance	Budget	Actuals	Variance
<b>G762006 - Diversion &amp; Jail-Based Services Total</b>	\$ 544,834	\$ 206,645	\$ 338,189	\$ 12,298	\$ 25,310	\$ (13,013)	\$ 303,487	\$ 176,886	\$ 126,601
<b>G763001 - Behavioral Health Outpatient &amp; Case Mgmt Svcs</b>									
G763001001 - Behavioral Health OP & CM Program Mgmt	\$ 21,635	\$ 7,907	\$ 13,728				\$ 21,635	\$ 7,907	\$ 13,728
G763001002 - Adult Outpatient & Case Management	\$ 1,487,030	\$ 603,560	\$ 883,470				\$ 1,487,030	\$ 603,560	\$ 883,470
G763001005 - Adult Partial Hospitalization	\$ 131,440	\$ 50,669	\$ 80,771				\$ 131,440	\$ 50,669	\$ 80,771
<b>G763001 - Behavioral Health Outpatient &amp; Case Mgmt Svcs Total</b>	\$ 1,640,105	\$ 662,136	\$ 977,969	\$ -	\$ -	\$ -	\$ 1,640,105	\$ 662,136	\$ 977,969
<b>G763002 - Support Coordination Services</b>									
G763002001 - Support Coordination Program Management	\$ 23,854	\$ 5,018	\$ 18,836				\$ 23,854	\$ 5,018	\$ 18,836
G763002002 - Support Coordination	\$ 1,340,171	\$ 461,862	\$ 878,310				\$ 1,340,171	\$ 461,862	\$ 878,310
G763002003 - Support Coordination Contracts	\$ 48,750	\$ (1,174)	\$ 49,924				\$ 48,750	\$ (1,174)	\$ 49,924
<b>G763002 - Support Coordination Services Total</b>	\$ 1,412,775	\$ 465,706	\$ 947,069	\$ -	\$ -	\$ -	\$ 1,412,775	\$ 465,706	\$ 947,069
<b>G763003 - Employment &amp; Day Services</b>									
G763003001 - Employment & Day Program Management	\$ 211,054	\$ 28,214	\$ 182,841				\$ 211,054	\$ 28,214	\$ 182,841
G763003002 - Behavioral Health Emp & Day Direct	\$ 74,853	\$ 222,796	\$ (147,943)				\$ 74,853	\$ 222,796	\$ (147,943)
G763003003 - Behavioral Health Emp & Day Contract	\$ 204,495	\$ 168,343	\$ 36,152	\$ 32,374	\$ 14,524	\$ 17,850	\$ 236,869	\$ 182,867	\$ 54,002
G763003004 - ID Emp & Day Direct	\$ 19,840	\$ -	\$ 19,840				\$ 19,840	\$ -	\$ 19,840
G763003005 - ID Emp & Day Contract	\$ 1,854,808	\$ 416,425	\$ 1,438,383				\$ 1,854,808	\$ 416,425	\$ 1,438,383
G763003006 - ID Emp & Day Self-Directed	\$ 204,074	\$ 432,997	\$ (228,923)				\$ 204,074	\$ 432,997	\$ (228,923)
<b>G763003 - Employment &amp; Day Services Total</b>	\$ 2,569,126	\$ 1,268,776	\$ 1,300,350	\$ 32,374	\$ 14,524	\$ 17,850	\$ 2,601,500	\$ 1,283,300	\$ 1,318,200
<b>G763004 - Assisted Community Residential Services</b>									
G763004001 - Assist Community Residential Prog Mgmt	\$ 17,956	\$ 7,870	\$ 10,086				\$ 17,956	\$ 7,870	\$ 10,086
G763004002 - Asst Comm Residential Direct	\$ 1,026,074	\$ 469,069	\$ 557,004				\$ 1,026,074	\$ 469,069	\$ 557,004
G763004003 - Asst Comm Residential Contract	\$ 375,000	\$ (5,080)	\$ 380,080				\$ 375,000	\$ (5,080)	\$ 380,080
G763004004 - Stevenson Place	\$ 88,828	\$ (79,664)	\$ 168,493				\$ 88,828	\$ (79,664)	\$ 168,493
<b>G763004 - Assisted Community Residential Services Total</b>	\$ 1,507,858	\$ 392,195	\$ 1,115,663	\$ -	\$ -	\$ -	\$ 1,507,858	\$ 392,195	\$ 1,115,663
<b>G763005 - Supportive Community Residential Services</b>									
G763005001 - Support Community Residential Prog Mgmt	\$ 124,073	\$ 59,073	\$ 65,000				\$ 124,073	\$ 59,073	\$ 65,000
G763005002 - Supportive Residential Direct	\$ 220,558	\$ 103,284	\$ 117,275				\$ 220,558	\$ 103,284	\$ 117,275
G763005003 - RIC	\$ 322,046	\$ 179,958	\$ 142,088				\$ 322,046	\$ 179,958	\$ 142,088
G763005008 - New Horizons	\$ 178,317	\$ 8,138	\$ 170,178				\$ 178,317	\$ 8,138	\$ 170,178
G763005009 - Support Community Residential Contract	\$ 250,000	\$ 154,166	\$ 95,834				\$ 250,000	\$ 154,166	\$ 95,834
<b>G763005 - Supportive Community Residential Services Total</b>	\$ 1,094,994	\$ 508,726	\$ 586,269	\$ -	\$ -	\$ -	\$ 1,094,994	\$ 508,726	\$ 586,269
<b>G763006 - Intensive Community Treatment Svcs</b>									
G762001003 - Outreach	\$ -	\$ 16,358	\$ (16,358)	\$ (0)	\$ 13,492	\$ (13,492)	\$ (0)	\$ 29,850	\$ (29,850)
G763006001 - ICT Program Management	\$ 18,040	\$ 9,926	\$ 8,113				\$ 18,040	\$ 9,926	\$ 8,113
G763006003 - Assertive Community Treatment	\$ 192,793	\$ 94,997	\$ 97,797				\$ 192,793	\$ 94,997	\$ 97,797
G763006004 - Intensive Case Management	\$ 292,414	\$ 125,614	\$ 166,800				\$ 292,414	\$ 125,614	\$ 166,800
G763006005 - Discharge Planning	\$ 92,993	\$ 52,210	\$ 40,783	\$ 530	\$ (8,620)	\$ 9,151	\$ 93,523	\$ 43,589	\$ 49,934
G763006008 - Outreach	\$ 65,225	\$ 10,308	\$ 54,917				\$ 65,225	\$ 10,308	\$ 54,917
<b>G763006 - Intensive Community Treatment Svcs Total</b>	\$ 661,464	\$ 309,412	\$ 352,053	\$ 530	\$ 4,871	\$ (4,341)	\$ 661,995	\$ 314,283	\$ 347,712
<b>Program Budget Total</b>	\$ 16,398,064	\$ 6,704,353	\$ 9,693,711	\$ 95,625	\$ (201,764)	\$ 297,388	\$ 16,240,045	\$ 6,447,521	\$ 9,792,524
<b>Non-Program Budget Total<sup>1</sup></b>	\$ 3,085,179	\$ 1,801,663	\$ 1,283,515	\$ -	\$ -	\$ -	\$ 3,085,179	\$ 1,801,663	\$ 1,283,515
<b>TOTAL FUND</b>	\$ 19,483,243	\$ 8,506,016	\$ 10,977,227	\$ 95,625	\$ (201,764)	\$ 297,388	\$ 19,578,868	\$ 8,304,253	\$ 11,274,615

Fairfax-Falls Church Community Services Board  
 Expenditures  
 Program Budget vs. Actuals  
 JULY FY22 YTD

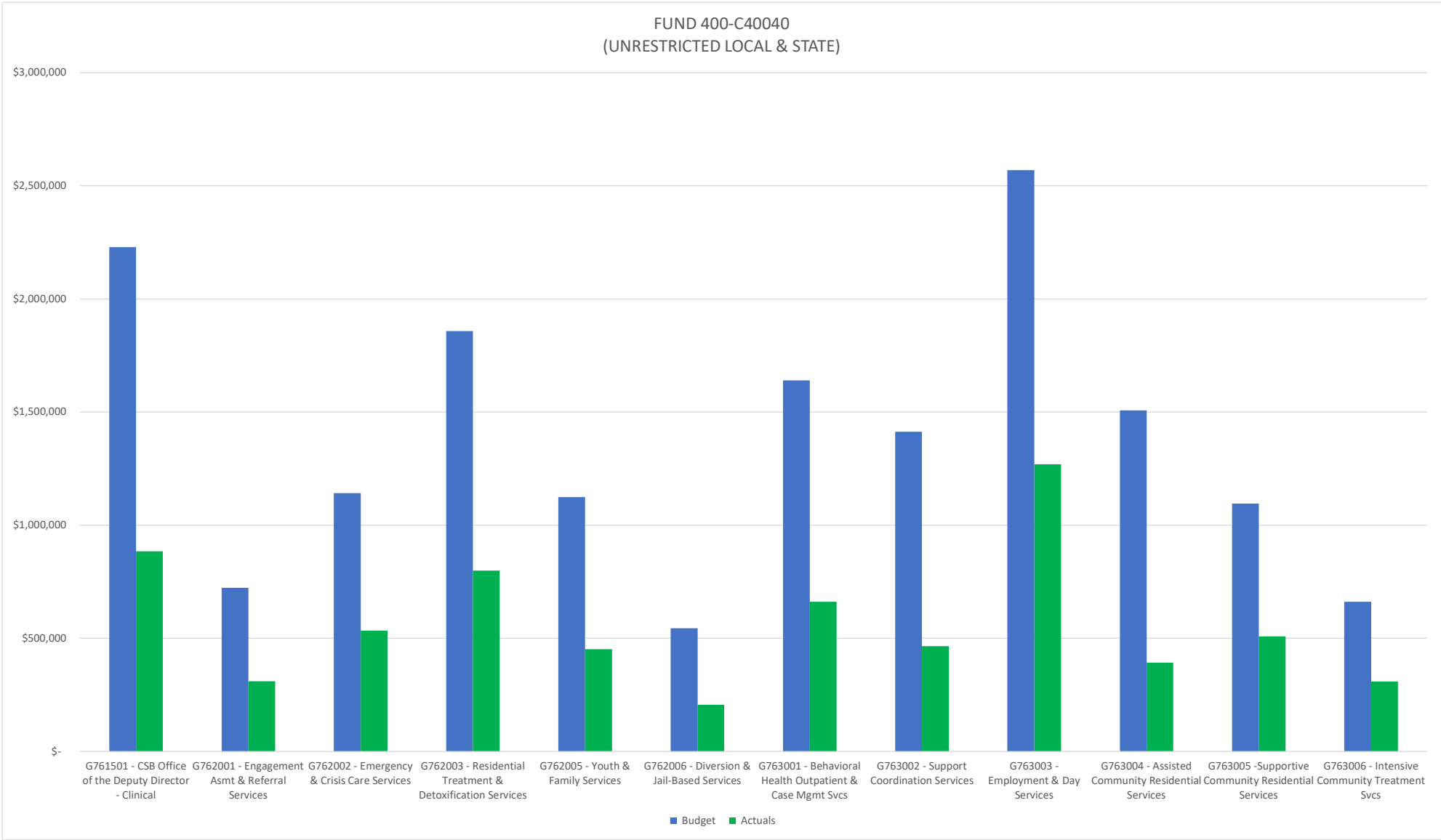
SERVICE/PROGRAM AREA	FUND 400-C40040 (UNRESTRICTED FEDERAL, LOCAL AND STATE)			FUND 500-C50000 (RESTRICTED FEDERAL, STATE AND OTHER)			TOTAL UNRESTRICTED, RESTRICTED FEDERAL, STATE AND OTHER		
	Budget	Actuals	Variance	Budget	Actuals	Variance	Budget	Actuals	Variance

**Comments**

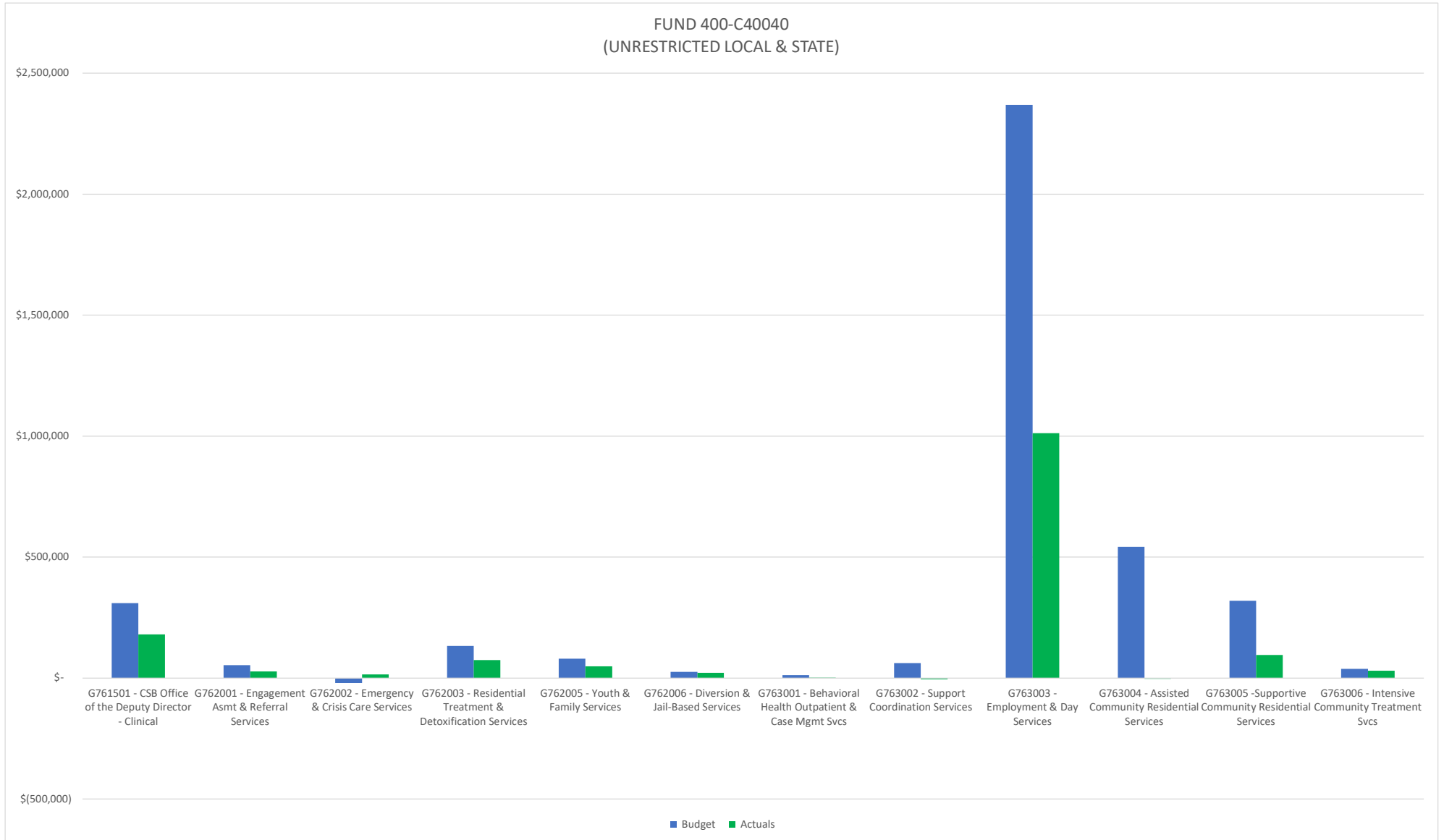
<sup>1</sup>Non-Program Budget Total includes all administrative areas (HR, Finance, Informatics, etc) and Regional.

*Gray/Italicized Font denotes closed cost centers.*

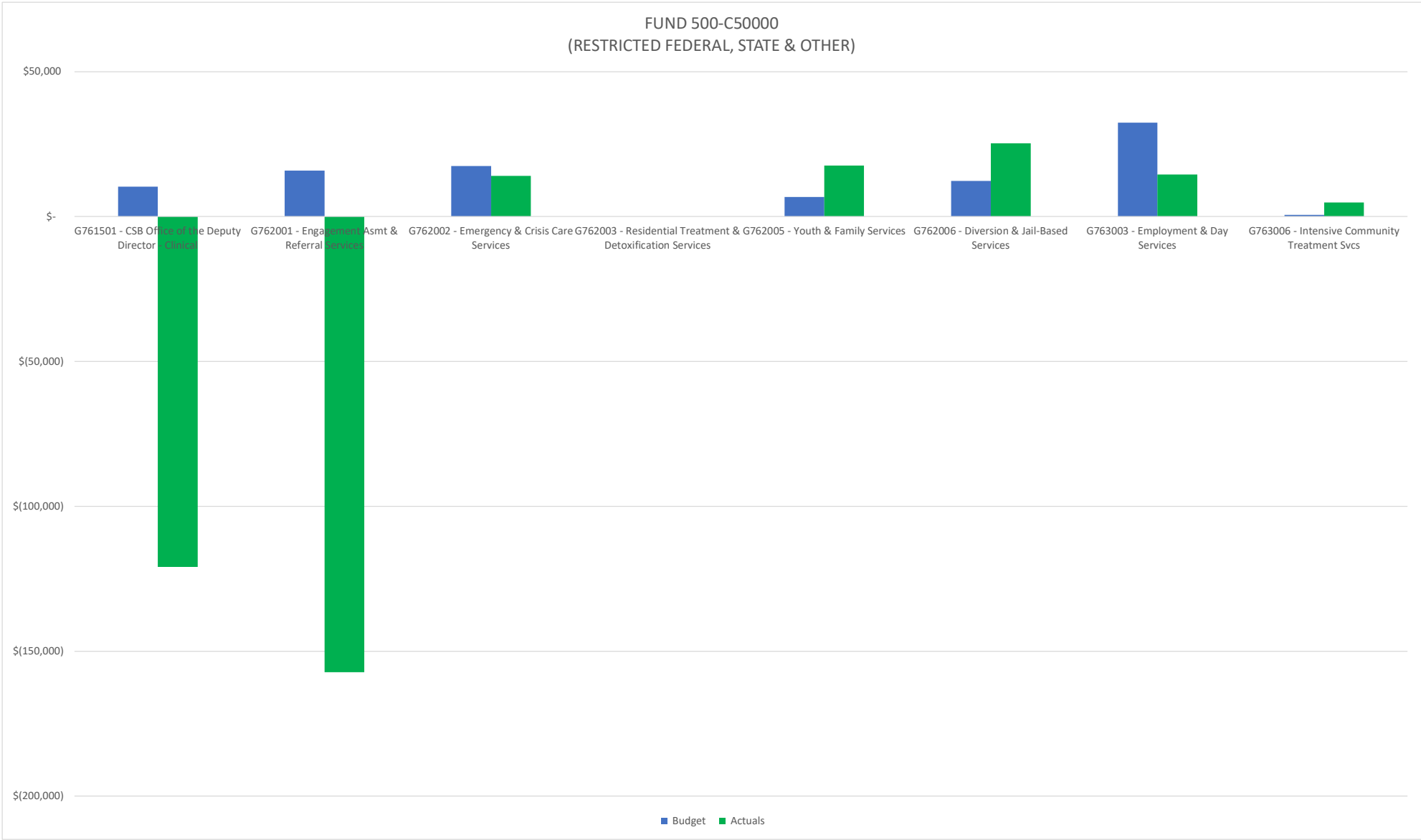
**Fairfax-Falls Church Community Services Board  
UNRESTRICTED Program Budget vs. Actuals  
JULY FY22 YTD**



**Fairfax-Falls Church Community Services Board  
UNRESTRICTED Program Budget vs. Actuals (OPEX Only)  
JULY FY22 YTD**



**Fairfax-Falls Church Community Services Board  
 RESTRICTED Program Budget vs. Actuals  
 JULY FY22 YTD**



Fairfax-Falls Church Community Services Board  
Fund 40040 Statement  
JULY FY 2022

	FY 2022 Approved Budget	FY 2022 YTD Budget	FY 2022 Actuals JULY YTD	Variance from YTD Budget
<b>Est. Beginning Balance</b>	<b>22,108,594</b>		<b>22,108,594</b>	
F Fairfax City	2,218,100	-	-	-
F Falls Church City	1,005,368	-	-	-
F State DBHDS	7,839,233	653,269	730,404	77,135
F Federal Pass Thru SAPT Block Grant	4,053,659	337,805	347,350	9,545
V Direct Federal Food Stamps	154,982	12,915	9,623	(3,292)
V Program/Client Fees	4,296,500	358,042	308,331	(49,711)
V CSA	890,000	74,167	70,050	(4,116)
V Medicaid Option	8,582,708	715,226	596,859	(118,366)
V Medicaid Waiver	7,000,000	583,333	623,635	40,302
V Miscellaneous	124,800	10,400	43,237	32,837
Non-County Revenue	36,165,350	2,745,157	2,729,490	(15,667)
General Fund Transfer	148,691,446	148,691,446	148,691,446	-
<b>Total Available</b>	<b>206,965,390</b>	<b>151,436,603</b>	<b>173,529,530</b>	<b>(15,667)</b>
Compensation	88,985,692	10,267,580	3,314,824	6,952,756
Fringe Benefits	38,263,820	4,415,056	1,529,048	2,886,008
Operating	58,576,044	4,881,337	2,187,673	2,693,664
Recovered Cost (WPF0)	(1,568,760)	(130,730)	-	(130,730)
Capital	600,000	50,000	1,081	48,919
<b>Total Disbursements</b>	<b>184,856,796</b>	<b>19,483,243</b>	<b>7,032,625</b>	<b>12,450,618</b>
<b>Ending Balance</b>	<b>22,108,594</b>			
DD MW Redesign Reserve <sup>1</sup>	2,500,000		2,500,000	
Medicaid Replacement Reserve <sup>2</sup>	2,800,000		2,800,000	
Opioid Epidemic MAT Reserve <sup>3</sup>	300,000		300,000	
Diversion First Reserve <sup>4</sup>	3,329,234		3,329,234	
COVID Revenue Impact Reserve <sup>5</sup>	2,000,000		2,000,000	
Electronic Health Record Reserve <sup>6</sup>	3,000,000		3,000,000	
<b>Unreserved Balance</b>	<b>8,179,360</b>			

**Key**

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

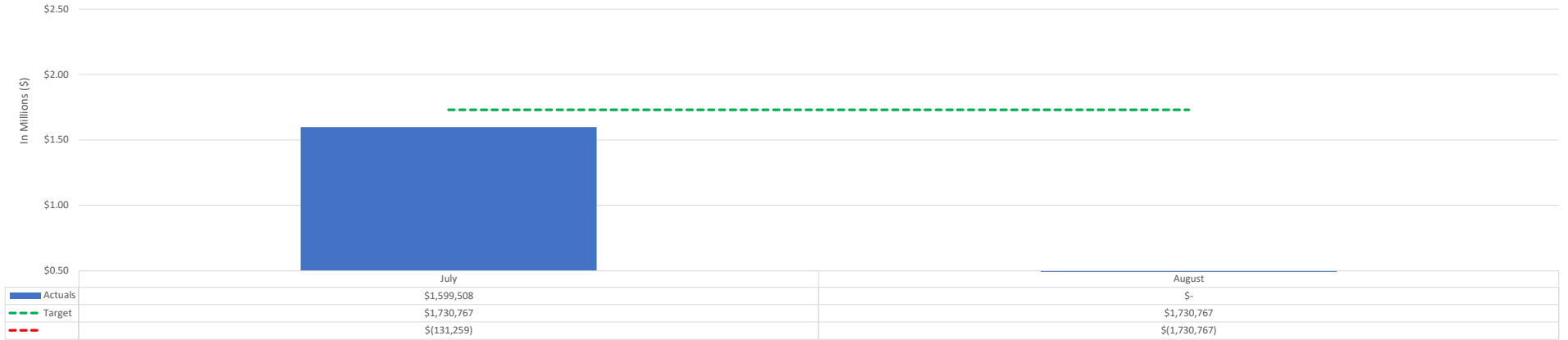
**Comments**

- 1 The DD Medicaid Waiver Redesign Reserve ensures the County has sufficient funding to provide services to individuals with developmental disabilities in the event of greater than anticipated costs due to the Medicaid Waiver Redesign effective July 1, 2016.
- 2 The Medicaid Replacement Reserve, for the implementation of Medicaid Expansion to a potential 600 consumers and will provide support with the transition of funding from the State support to Medicaid fees.
- 3 The Opioid Use Epidemic Reserve provides flexibility, consistent with the Board of Supervisors' FY 2018-FY 2019 Budget Guidance, as the County continues to work with national, state, and regional partners on strategies to combat the opioid epidemic.
- 4 The Diversion First Reserve represents one-time savings that were realized in FY 2017 as a result of longer than anticipated recruitment times to fill new positions and savings in operating expenses to pay for medical clearances. This funding will be reallocated as part of a future budget process based on priorities identified by the Board of Supervisors. This reserve has been reduced by \$250K at FY20 Carryover for costs associated with medical clearances.
- 5 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.
- 6 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.



July FY22 YTD Revenue Analysis

Variable Revenue by Month  
FY22  
Actuals vs. Target



Variable Revenue by Category  
FY22 Year to Date  
Actuals vs. Target

