



Children's Services Act Program Newsletter

CHILDREN'S MENTAL HEALTH DAY OPEN HOUSE— A ROARING SUCCESS

In this Issue:

- **Children's Mental Health Day Open House**
- **What To Do When Encumbrances Span Two Fiscal Years**
- **Transformative Culture: The Call for Psychological Safety**
- **Film Screening of Broken Places**
- **Meeting the Needs of All Families— A Resource Guide**

For the first time, a Children's Mental Health Open House was held at the Merrifield Center on Thursday, May 9, 2019. The event was hosted by [Fairfax-Falls Church Community Services Board](#), [Healthy Minds Fairfax](#) and the Children's Behavioral Health Collaborative, in recognition of **National Children's Mental Health Awareness Day**. Participants learned about new and pre-existing programs being offered in the community to address children's mental health challenges.



The event featured speakers, activities for children, professionals, and adults. National Children's Mental Health Awareness Day shines a national spotlight on the importance of caring for every child's mental health and reinforces that positive mental health is essential to a child's healthy development.

CSB Executive Leadership brought smiles to many faces as they served ice cream to children, their families and other community participants. Preceding the event, a proclamation was issued on May 7, 2019 in the Government Center auditorium, by Board of County Supervisors' Hudgins and McKay.

Featured Event Speakers Included:

- **Lisa Hamp**, a survivor of the 2007 Virginia Tech tragedy. Lisa shared the skills and tools she used to overcome and thrive despite the trauma she experienced.
- **Dr. Adelaide Robb**, Chief of Psychiatry at Children's National, shared research and trends on youth suicide and how it manifests in a variety of child disorders.



Children's Services Act Office

Question, concerns or compliments ... Please don't hesitate to let us know!

DFSCSA@fairfaxcounty.gov
703.324.7938

(Continued on page 4)

WHAT TO DO WHEN A SERVICE AUTHORIZATION HAS TO SPAN TWO FISCAL YEARS

As you know, fiscal year 2019 ends June 30th. This is important because of the encumbrances you will be filling out for services authorized in the new few months. And any corrections you may be doing to encumbrances you've recently completed.



Remember ... any service authorization that spans FY19 and FY20 needs to be encumbered on **2 separate forms**. AND, the encumbrance for FY20 (July 1 forward) **needs to be held until the end of June**. This is to ensure

the correct costs are reflected from the providers in case there are changes to rates and/or contracts.

Below is an example of what your encumbrances might look like for an authorization of 150 hours of HB services from April 16 to November 16, 2019.

Remember, this needs 2 separate Encumbrance forms.

Encumbrance #1: April 16 to June 30, 2019

PROVIDER	TYPE OF SERVICE (code from table)	UNIT RATE (see Provider Directory)	# OF UNITS (per hour/day/month/ etc.)	SERVICE DATE (mm/dd/yy)	
				BEGIN	END
Acme Counseling	FSS-IFPS	\$63/hr	60 hrs	4-16-19	6-30-19

Encumbrance #2: July 1 to October 16, 2019

PROVIDER	TYPE OF SERVICE (code from table)	UNIT RATE (see Provider Directory)	# OF UNITS (per hour/day/month/ etc.)	SERVICE DATE (mm/dd/yy)	
				BEGIN	END
Acme Counseling	FSS-IFPS	\$67/hr	90 hrs	7-1-19	10-16-19

TRANSFORMATIVE CULTURE: THE CALL FOR PSYCHOLOGICAL SAFETY

Have you ever made a mistake at work —maybe even one that could have affected you, your teammate, or a client's safety?

If you're a human who helps other humans for a living, the answer is a prevailing yes. None of us do the work perfectly. Mistakes aren't intentional, but it's hard to get it right every time. Clinicians and human service professionals, in general, are tasked with making high-consequence choices at alarmingly fast rates.

Did you tell anyone about your mistake?

If you didn't, you're not alone. A healthcare study found, when confronted with a patient's adverse outcome, most physicians are unwilling to admit an error (Gallagher, Garbutt, & Waterman, 2006). It's hard to imagine disclosing mistakes to teammates would be much higher, even though processing a mistake and receiving feedback and support is crucial to professional development and gives teammates an opportunity to learn too.

There are lots of reasons why we aren't prone to vulnerable disclosures—liability concerns, fear of seeming “less than” or incapable. However, talking about concerns, being honest about personal experiences, and processing undesired outcomes is central to innovation. Safe, engaged, reliable teams have to innovate to succeed in an increasingly complex and dynamic environment. Additionally, consensus-based decision making involves reflection, engagement, and even some productive debate as the care team (which includes the client) reaches an understanding of the family's story and shared vision for transformation. *True, informed, consensus—without psychological safety—would be quite a*

(Continued on page 3)

challenging achievement, arguably an impossible one.

Psychological safety is a shared belief that people are accepted, supported, respected, and free to take interpersonal risks (Edmonson, 2019). While trust is about whether or not we believe others will behave supportively when we take an interpersonal risk, psychological safety is about a shared practice that others actually do behave supportively when those risks are taken.

Psychological safety seems simple, but the nuances are relevant. Consider the following attributes of psychological safety (Frankel, Haraden, Federica, & Lenoci-Edwards, 2017):

- Anyone can ask questions without feeling stupid.
- Anyone can solicit feedback without seeming incompetent.
- Anyone can be respectfully candid about concerns without being viewed as “negative.”
- Anyone can suggest ideas without sounding disruptive.

Psychological safety is the cornerstone of a Safety Culture—the attitudes, values, behaviors supporting a safe and engaged workforce. In child welfare, growing evidence suggests team-based Safety Culture behaviors correlate to the entries, exits, and re-entries of children in state care. In an analysis of child welfare professionals, higher psychological safety correlated to less emotional exhaustion (Cull, 2018).

In considering whether or not the culture of your workplace supports psychological safety, think through these statements (Edmonson, 2019):

- If someone makes a mistake, is it often held against them?
- Can people bring up problems and tough issues?
- Is it difficult to ask others for help?
- Is it safe to take an interpersonal risk?

- Are peoples’ unique skills and talents used?

Psychological safety is a shared experience. We can all support it, but none of us can singlehandedly accomplish psychological safety alone. Leaders are capable of the most widespread change, but all people are responsible for culture. And like most cultural phenomenon, it’s a journey of improvement and not a single stroke destination.

If you’re looking for some ways to improve psychological safety to advance a safety culture in your workplace, consider these possibilities:

- **Be present.** Psychologically safe cultures value active listening, situational humility, and empowering people to exercise voice when they have a concern.
- **Language drives culture,** so be intentional about it. Rather than refer to a direct care workforce as “workers,” consider the term “professionals.”
- **Cultivate avenues for “speaking up.”** This may look like confidential reporting systems, where people can privately (but not anonymously) report safety issues.
- **Be wary of bias.** While it’s impossible to entirely avoid, self-awareness is key. Hindsight, outcome, and fundamental attribution error are among the worst.
- **Gossip is the pollution of good culture** and yes—you can be held guilty by association. Candidly and respectfully ask those who gossip to stop.
- When looking into **an undesirable client outcome, lead for learning and offer support to professionals assigned to the client.** Conduct “studies” instead of “investigations.”
- Consider **Psychological Safety and Accountability concurrent experiences;** they are best practiced together. It’s not a balance so much as an integration.

The above is a condensed version of the blog post by Tiffany Lindsey, EdD, LPC-MHSP published on the [TCOM Conversations Blog](#).

- A panel of **FCPS students** shared their work on community projects focused on assisting with eliminating mental health stigmas, encouraging help-seeking behaviors and their own lived their experiences.



Over 300 participants also had the opportunity to:

- View and discuss a documentary “More than Sad,” which addresses depression, de-mystifies treatment, and has an encouraging message to those seeking help;
- Hear from Jen Marr, founder of Inspiring Comfort, which teaches people how to provide comfort to others, effectively and safely;
- Take pictures with the DC Divas; Sheriff’s Department’s Child ID Program; Face Painting; Henna; Art; BeWell Hoola-Hooping; Yoga with Yoda; and an Instrument Petting Zoo; and
- Gain the tools necessary to help youth in our community by attending a resource fair featuring representatives from the CSB’s [Turning Point program](#), [Healthy Minds Fairfax](#), [Fairfax County Public Schools Student Wellness](#), [Inova Health Systems](#), [Dominion Hospital](#), and many others that participated in the 18 provider tables.



You can find more information and photos from the event on the [CSB’s FairfaxNet blog](#).

CANS Certification

The Child Adolescent Needs and Strengths Assessment (CANS) is a mandatory uniform assessment required for children and youth served through the Children’s Services Act. New CANS users and those who need to recertify can do so at

<https://www.Schoox.com/login.php>.

Users must pass the CANS exam with a score of .70 or more. Please send a copy of your certificate to CSA via fax at 703.653.1369.

For info on how to create an account on the CANS training website, please download the “How To” Guide at <https://praedfoundation.org/wp-content/uploads/2018/08/Schoox-How-To-08072018.pdf>.

Upcoming Trainings & Public Meetings

County employees can register through Employee U by searching for “CSASOC”. Non-county and FCPS staff can register at: <https://www.fairfaxcounty.gov/hocode/EReg/Registration.aspx?groupID=87>

CSA Part II: Facilitating Family

Resource Meetings

Thursday, May 30, 9am—Noon
Pennino, Room 206

Wraparound—Why Do I Need It?

Thursday, June 6, 1pm—3pm
Herrity Building, Room 107

CSA Part III: Accessing CSA Services

Wednesday, June 19
9:30am—12:30pm
Herrity Building 107

Have ideas about possible training topics?

We’d love to hear from you!

Please contact Patricia Arriaza at patricia.arriaza@fairfaxcounty.gov with your thoughts.

Public Meetings

CPMT

Friday, May 31, 1pm—3pm
Government Center, Room 232

ICC Stakeholders

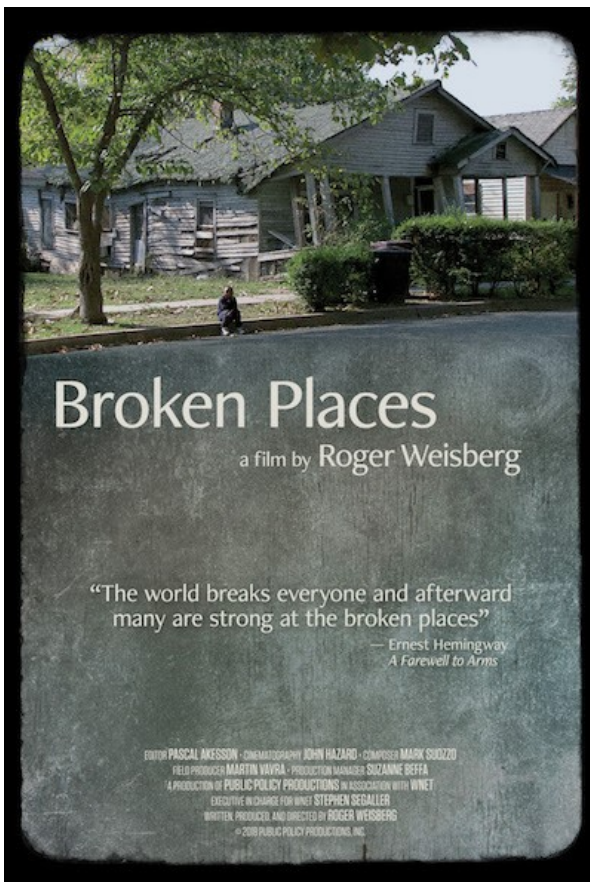
Friday, June 7, 10am—Noon
Pennino, Room 930A



Trauma-Informed Community Network

Part of the Partnership for a Healthier Fairfax

Please join the Fairfax County Trauma-Informed Community Network for a screening of the documentary Broken Places. The film will be followed by an opportunity for audience discussion and a panel presentation. This event is FREE and open to the public. Registration is encouraged, but not required.



Why are some children permanently damaged by early adversity while others are able to thrive? To help answer this question, film maker Roger Weisberg dug into his extensive film archives to update a few of the stories of the abused and neglected children he filmed decades ago. Viewers are given a unique time lapse perspective on how the trauma these children experienced shaped their lives as adults. BROKEN PLACES interweaves these longitudinal narratives with commentary from a few national renowned experts in neurobiology and early childhood development in order to illuminate the devastating impact of childhood adversity as well as the factors that can foster resilience.

Tuesday, May 28th 9:00– 11:30 am

<https://ticnbrokenplacescreeningmay28th.eventbrite.com>

Monday, June 17th 6:30– 9:00 pm

<https://ticnbrokenplacescreeningjune17th.eventbrite.com>

TIP OF THE MONTH

Juliana Swanson

When you have a service/case open for a client with CSA, and that service or case ends, you should **CLOSE** that case with CSA even if your case is still open in OASIS for other reasons. Open cases in Harmony (CSA) automatically generate reminders for updated CANS, expired consents, Case Service Summaries and other requirements that you do not want to get when your case has been closed. A service ending **DOES NOT** automatically close your CSA case. **To close your CSA case** please submit a completed Case Status Change form and other required documents to:

DFSCSA@fairfaxcounty.gov.

Cases that have been closed in Harmony can easily be reopened later if you need to request new services, simply by submitting a funding request.



MEETING THE NEEDS OF ALL FAMILIES— A RESOURCE GUIDE

It is essential that individuals working with families consider the diversity of families and diverse family structures and situations. To highlight the rich diversity and unique needs of today’s families, the Family-Run Executive Director Leadership Association (FREDLA) has compiled a resource guide - Meeting the Needs of ALL Families. The resource was developed in recognition of National Children’s Mental Health Awareness Month in May.

The guide is intended to serve as a resource for families and providers to access information that may be particularly relevant for supporting a family. Meeting the Needs of ALL Families is designed to remind all of us that each family is unique, leaving its members to be the only ones to define it – in their way, from their culture and through their truth.

The [guide can be downloaded](https://theinstitute.umaryland.edu/) from the TA Network’s website at <https://theinstitute.umaryland.edu/>.

meeting the needs
of **ALL**
families



QUESTIONS/CONCERNS ABOUT POSSIBLE FRAUD?

If you have concerns about service delivery, the Service Summaries distributed by CSA are a good mechanism for reporting those concerns. CSA program staff are also always available to discuss any questions or concerns you may have.

Additionally, a more formal process can be followed by contacting the Fairfax County Fraud Hotline at 703.787.3243 to report an allegation. The calls are reviewed and followed up on by the Internal Audit Office.

