



The Arlington Community Services Board
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James Mack
ACCSB Chair

December 16, 2015
Sequoia III
2120 Washington Blvd.
Arlington, Virginia
7:00 pm - Full Board Meeting

Beth Tschopp
Executive Director

Present: James Mack, Jarrod Nagurka, Erica Jackson, David Gardner, Carol Skelly, Linda Kelleher, Jay Ternent, Asha Patton-Smith, Wayne Bert, Brian Berke, Barbara Jones, Leslie Gosling, Shauna Alonge, Atima Omara, Judy Deane

Excused: Joanne Del Toro, Keith Whyte

Staff: Beth Tschopp, Kelly Mauller, Anita Friedman

Public Comment(s)

There were no public comments.

Approval of the December 16, 2015 ACCSB Meeting Minutes

Chair Mack called for a motion to approve the November 18, 2015 ACCSB Full Board meeting minutes. Ms. Alonge motioned to approve the minutes, Ms. Patton-Smith seconded the motion, and the minutes were approved with several corrections.

Staff Recognition

Aubrey Graham, Mental Health Therapist, Mental Health Jail Services, was nominated to receive the December 16, 2015 CSB staff recognition award. Suzanne Somerville, Supervisor, Mental Health Jail Services spoke about Ms. Graham. She stated that Ms. Graham is a meticulously hard worker. Ms. Somerville added that Ms. Graham works with the most acutely mentally ill individuals in the jail and cited an incident when Ms. Graham went above and beyond to assist the individual. Ms. Graham stated that she is glad that she has been able to make the contributions that she has. She noted the importance of her working relationships with the Deputies. Dr. Joe Bullock, Substance Abuse Services Bureau Chief, thanked the CSB for advocating for the Mental Health services that are provided in the jail. Mr. Ternent stated that the staff in the jail are fortunate to have good relationships with BHD staff.

Mr. Ternent stated that Interim County Manager, Mark Schwartz, presented the Mental Health staff in the jail an award for excellence this week.

Presentation: Parent, Infant Education (PIE) Program

Chair Mack introduced Leah Davidson, Program Supervisor, Arlington County Public School Health. Ms. Davidson presented about the PIE Program. She stated that the PIE Program is an early intervention program tasked with implementing services in accordance with State and Federal Regulations.

Ms. Davidson stated that PIE serves children from birth to their third birthday with a documented developmental delay, atypical development or developmental diagnosis. She noted that PIE is part of the Department of Human Services, within the Division of Public Health. She added that within the division, PIE is located in the School Health Bureau.

Ms. Davidson provided an overview of the early intervention process. Ms. Davidson stated that early intervention is family centered and intended to build the capacity of the most important adults in a child's life. She added that early intervention is based on current child development research related to how very young children learn.

The early intervention process is as follows:

- Children are referred to services; mostly from parents and pediatricians
- An intake/developmental screening is provided
- Eligibility is determined - there are three types of eligibility determinations
 - 25% developmental delay - determined using an approved screening tool
 - Atypical development - determined by tool and clinical observation
 - Diagnosed condition with a high likelihood in resulting in developmental delay
 - Genetic disorders such as Down Syndrome
 - Autism
 - Cerebral Palsy
- An assessment is provided for service planning
- An Individual Family Service Plan (IFSP) is developed
- IFSP is implemented
- IFSP is reviewed periodically
- Eligibility is reviewed annually
- Transition planning is conducted

Ms. Davidson provided an overview of the services that PIE does and does not provide to children with Autism.

Early Intervention /PIE does:

- Address the barriers present for children with autism using a variety of evidence based strategies
- Provide information to families on signs and symptoms associated with autism
- Make referrals to local Developmental Pediatricians or clinics when families express interest in a diagnostic evaluation
- Make referrals for autism-specific treatments such as Applied Behavior Analysis (ABA)

Early Intervention/PIE does not:

- Have specific services that are only for children with autism
- Provide direct, therapist-child only interventions such as ABA or Floor Time

Ms. Alonge asked how many families the PIE Program has served. Ms. Davidson responded that, at any given time, 250 to 300 families receive services and over a period of one year approximately 500 families receive PIE services.

Ms. Deane asked if bilingual staff are available. Ms. Davidson responded that bilingual staff are available.

Ms. Deane asked what percentage of families receiving PIE services are non-English speaking. Ms. Davidson responded that 5% to 10% of families receiving services are non-English speaking.

Ms. Jones asked if the issue of parents not having a peer group is being addressed. Ms. Davidson responded that a focus of the program is to be able to continue parent connection groups.

Discussion: Reinstatement of Administrative Committee

Chair Mack opened a discussion about reinstating the CSB Administrative Committee. The committee has been suspended indefinitely due to lack of staffing. He asked the members to consider reinstating the committee and to provide feedback about what the responsibilities of the committee should include at the January 20, 2016 CSB full board meeting.

Mr. Nagurka stated that he, Ms. Jackson and Ms. Del Torro will provide an overview of their meeting regarding board development at the January 20, 2016 CSB full board meeting.

Ms. Jackson noted that mentorship from term expired CSB members to guide new CSB members on how to be more involved in board advocacy was discussed during the November 2015 CSB retreat.

CSB FY17 Local Budget Priorities

Ms. Tschopp provided an overview of the draft CSB FY17 Proposed Local Budget Recommendations to the County Board. It was noted that the Governor's FY17 budget will be announced on December 17th.

The initial CSB draft recommendations for the FY17 Arlington County Budget are as follows:

- Primary/Behavioral Healthcare Initiative with Neighborhood Health - Fund contracted service for Physicians and Nurse Practitioners to continue seeing clients in Arlington County facilities. The cost for service would be approximately \$100,000 per year.

In 2011 Arlington received a \$1.6 million dollar grant from the Substance Abuse and Mental Health Services Administration (SAMHSA) to pilot a primary/behavioral healthcare partnership with Alexandria's Neighborhood Health Clinic. The overall goal of the demonstration grants were to introduce primary care into the provision of behavioral healthcare in order to reduce mortality and contain costs. The pilot has been successful in connecting Arlington County residents with appropriate primary care; for some the only primary care they receive. The Mental Health Centers of Excellence Act, passed by Congress in 2014, requires that all providers of behavioral healthcare that wish to receive federal funds provide or contract primary healthcare services by 2017. Collaborating with Neighborhood Health, Arlington County CSB has been able to improve efficiencies and health outcomes for over 300 citizens. SAMHSA's four year grant period ends in September 2016 but there is a remainder of sustainable costs.

- Behavioral Healthcare Division - Fund 2 FTE Integrated Dual Diagnosis Treatment (IDDT) Care Managers to assist in the transition of Seriously Mentally Ill (SMI) individuals into integrated care: Primary/Behavioral, Economic Independence and Dual-Diagnosis Treatment (SMI and Substance Abuse). The cost is approximately \$164,000.

Arlington County CSB currently serves approximately 1,600 unique clients at any given time. Recent evidence based assessments reveal nearly 80% of these consumers may be dually diagnosed with both a Substance Use/Dependence Disorder as well as a Serious Mental Illness. Under current practice structure, there is capacity to service approximately 650 of these citizens within the CSB.

These consumers are very high utilizers of all social and community services and are at increased risk for self-harm and victimization. Virtually all of these consumers have multiple physical and behavioral health conditions, disabilities and co-morbid medical conditions. Research shows that 5% of consumers utilize

nearly 95% of healthcare dollars. Each additional chronic condition is associated with an increase of \$8,400 per year.

Ms. Skelly stated that the Developmental Disabilities (DD) sub-committee has discussed several topics for possible inclusion in the CSB's local budget recommendations. She noted that the topics do not have dollar amounts attached to them.

1. Propose a DD regional initiative for children currently residing in nursing homes to be placed in a community based setting utilizing a model similar to the adult model.
2. Adequate rent allocation for the relocation of the Ballston Woodmont Weavers. Ms. Friedman responded that the County has adequate funding to allocate for any additional rent above the current cost.
3. Department of Justice Settlement Agreement – the intent at the state level is to bring individuals diagnosed with DD and have been on the DD waiver waiting list under the CSB ID umbrella. There is a possibility that some of these individuals would be eligible for day vocational programs but the State is unwilling to provide the identities of those individuals to the CSB.

Ms. Deane stated that the Mental Health Committee had not yet made recommendations, but would do so at its early January meeting.

ACCSB Executive Director's Report

- ✓ Ms. Tschopp reported out about the group homes. She stated that only minor incidents were reported.
- ✓ Ms. Anita Friedman, Department of Human Services Director, expressed concern over perceived negative interactions between staff, family members or committee members.
- ✓ Ms. Tschopp addressed communication between the CSB, staff, clients and client's family members. She stated that it is the role of the CSB and staff to assist clients in advocating for their needs and to establish good communication and relationships with the families of clients. Communication guidelines will be a discussion item at the January 11, 2016 CSB Executive Committee meeting.

ACCSB Chair's Report

- ✓ Chair Mack announced that 3 individuals graduated from the Drug Court Program on December 10th. He noted that a total of 8 individuals have graduated from the Drug Court Program over the last 18 months and that there have been no repeat offenders.
- ✓ Chair Mack reported that he and Ms. Deane met with Senator Favola to discuss how the CSB can move forward with advocating for the expansion of the Mental Health and Psychiatric ward at Virginia Hospital Center (VHC). He noted that Ms. Deane has drafted a letter of support to the incoming County Board Chair regarding VHC's acquisition of the Edison Complex.

Ms. Deane stated that the draft letter requests that at least one CSB member be included in all relevant commissions, committees and planning groups that will be set up as this process moves forward. The draft letter also requests that appropriate CSB staff be included in staff planning groups and that an independent member of the National Alliance on Mental Illness (NAMI) be appointed to any relevant bodies.

Report Out on ACCSB Retreat Initiatives

- On behalf of Anne Hermann, Ms. Deane thanked the members for contributing to the Secret Santa gift cards for the residents of the Mary Marshall Assisted Living Residence (MMALR).

Adjournment

The Arlington County Community Services Full Board meeting was adjourned by Chair Mack at 9:10 p.m.

Respectfully submitted by Kelly Mauller