



FAIRFAX-FALLS CHURCH COMMUNITY SERVICES BOARD MEETING

Garrett McGuire, Chair

Wednesday, September 29, 2021, 5:00 p.m.

Will be held electronically due to the COVID-19 pandemic

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

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Meeting ID: 825 7170 8410 • Passcode 476550

MEETING AGENDA

- | | | |
|---|---------------------------------|---------------------|
| 1. Meeting Called to Order | Garrett McGuire | 5:00p.m. – 5:10p.m. |
| 2. Roll Call, Audibility and Preliminary Motions | Garrett McGuire | 5:00p.m. – 5:10p.m. |
| 3. Amendments to the Meeting Agenda | Garrett McGuire | 5:00p.m. – 5:10p.m. |
| 4. Discussion with General Assembly | Garrett McGuire | 5:10p.m. – 6:10p.m. |
| Introductions | | |
| General Overview of CSB Services | | |
| Overview of County and Regional Legislative Priorities | | |
| Open Discussion and Q&A Session | | |
| 5. Matters of the Public | Garrett McGuire | 6:10p.m. |
| 6. Approval of the August 25, 2021, Meeting Minutes | Garrett McGuire | 6:15p.m. |
| 7. Director’s Report | Daniel Herr | 6:15p.m. – 6:30p.m. |
| A. Services Update | | |
| B. COVID-19 Update | | |
| C. Other Updates | | |
| 8. Actions Items | | |
| A. Department of Behavioral Health and Developmental Services (DBHDS) State Opioid Response (SOR) Grant Application | Lyn Tomlinson & Michael T. Lane | 6:30p.m. – 6:45p.m. |
| B. CSB Year-End Report | Lisa Flowers | 6:45p.m. – 7:00p.m. |

Closed Session: Discussion of a personnel matter as permitted by Virginia Code Section 2.2-3711(A)(1) and consultation with legal counsel employed 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).

9. Adjournment

Meeting materials are posted online at www.fairfaxcounty.com/municipal/community-services-board/board/archives or may be requested by contacting Joseline Cadima at 703-324-7827 or at joseline.cadimasalvatierrade@fairfaxcounty.gov



FAIRFAX - FALLS CHURCH

**Community
Services Board**

Virtual Session with General Assembly Delegation

**Garrett McGuire, CSB Board Chair
Daryl Washington, CSB Executive Director**

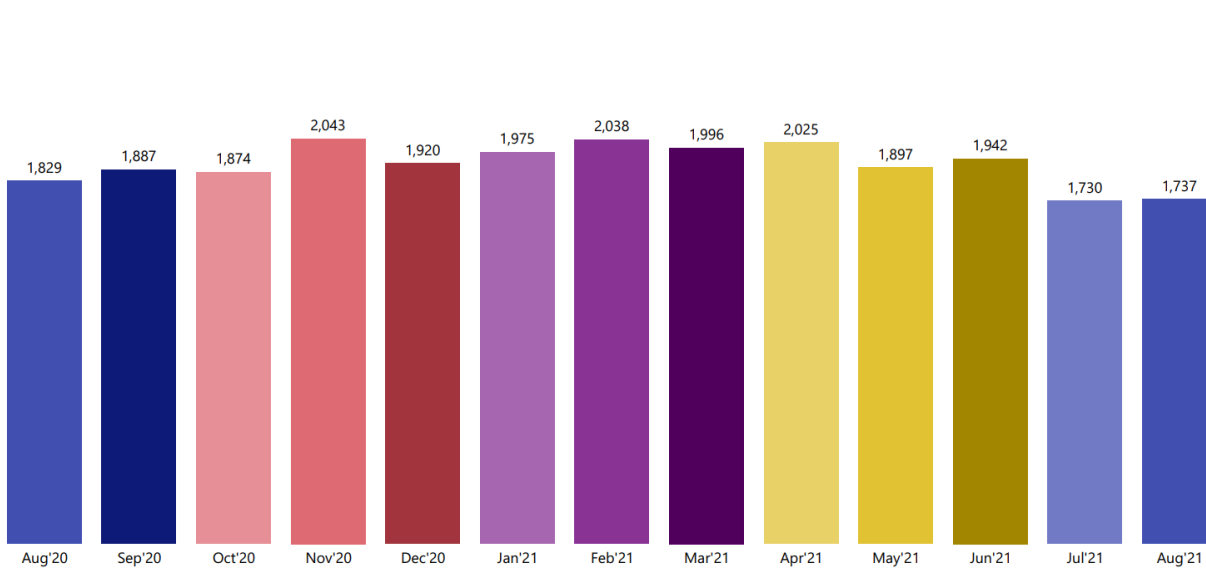
September 29, 2021

AGENDA ITEM
#4.1

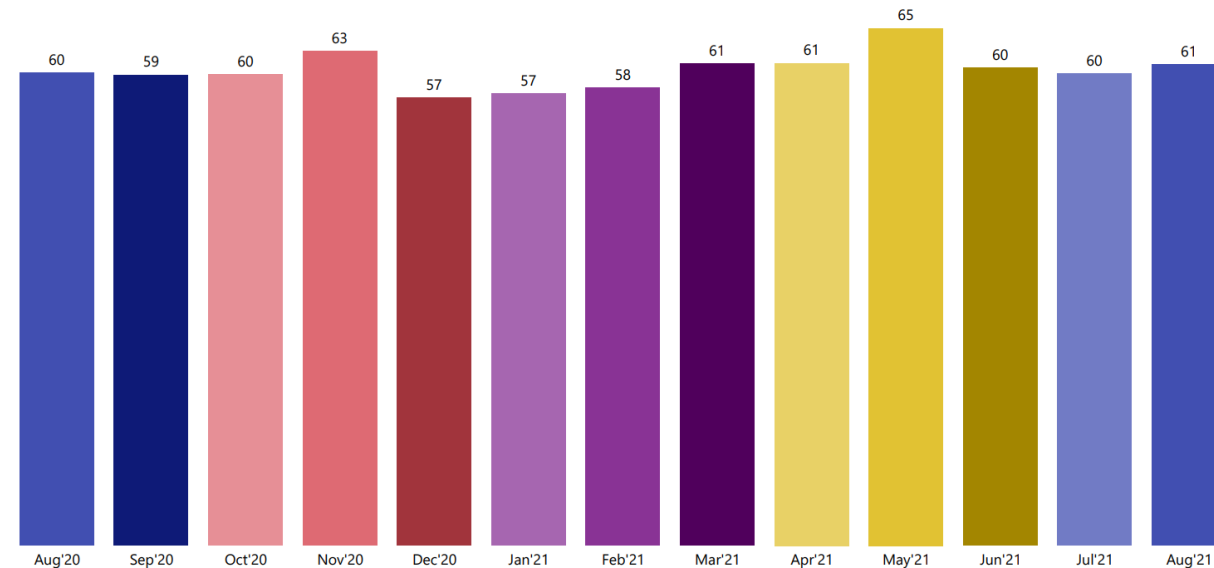
2020 – 2021 Services Update



Agency Wide - Average Clients Served per Day
Excludes Emergency, Residential, and Employment & Day



Emergency - Average Clients Served per Day





FAIRFAX - FALLS CHURCH

**Community
Services Board**

2022 Legislative Priorities

DD Waivers

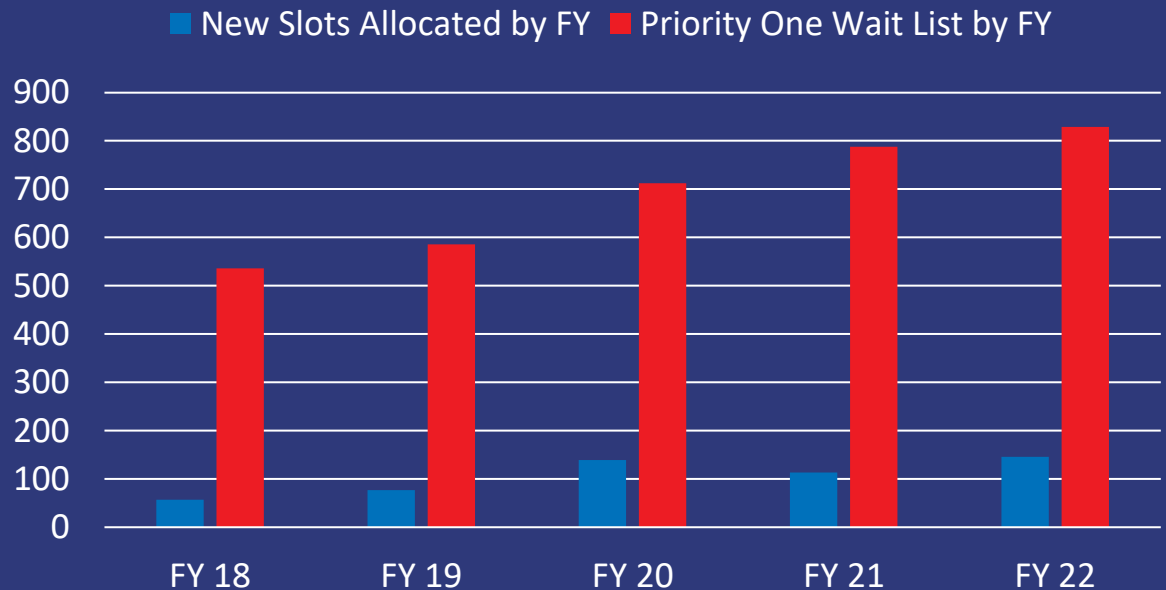


Issue: New waivers are not keeping pace with the growth of the developmental disabilities waiver wait list.

- In Fairfax, 2,684 people are on the wait list, including 829 on the Priority One wait list.
- Since Dec. 2020, Fairfax has seen its Priority One wait list grow by nearly 18 percent (703 to 829).
- Statewide, 14,058 people are on the wait list, including 3,446 on the Priority One wait list.
- The Priority One wait list averages over 3,000 annually in Virginia. In 2021, some progress was made when the GA added 435 additional waiver slots, bringing the FY 22 state total to 985.

Opportunity: Eliminate the Priority One DD waiver wait list.

Fairfax County



Hospital Bed Crisis



Issue: Ongoing shortage of available state hospital beds.

- COVID-19 has only amplified the state hospital bed crisis as staffing issues at hospitals impact bed availability and have led to the closing of admissions at certain state hospitals.
- Individuals on the Extraordinary Barrier List (EBL) exacerbate the hospital census crisis by retaining individuals who could be discharged if there was appropriate community capacity to meet their needs.

Opportunity: Invest in programs and services that develop community capacity to help alleviate the state hospital bed crisis.

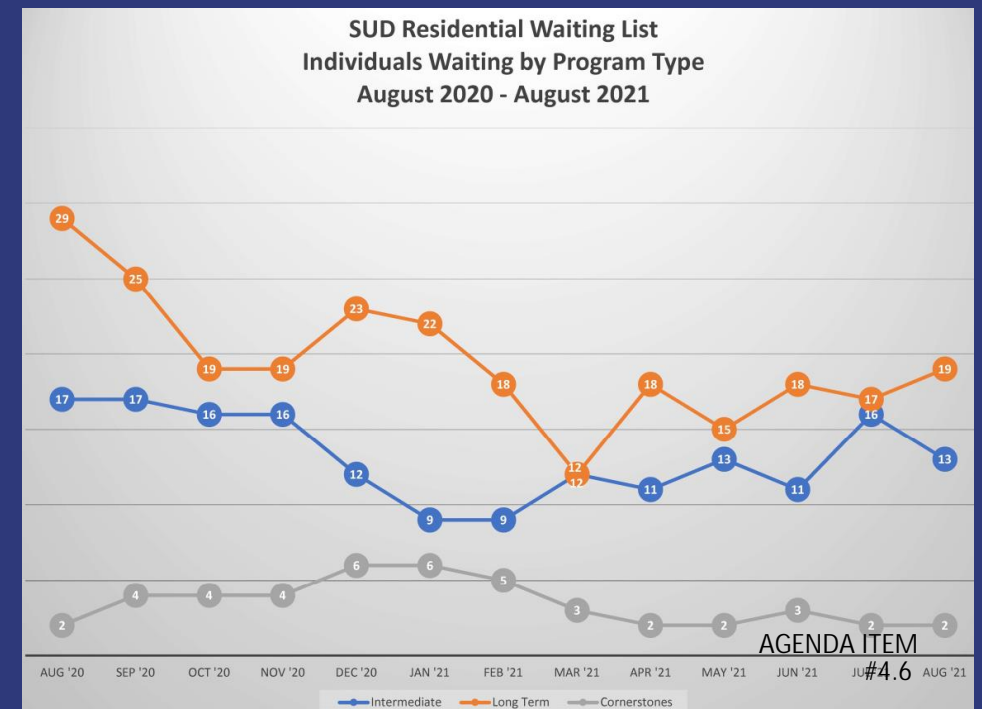
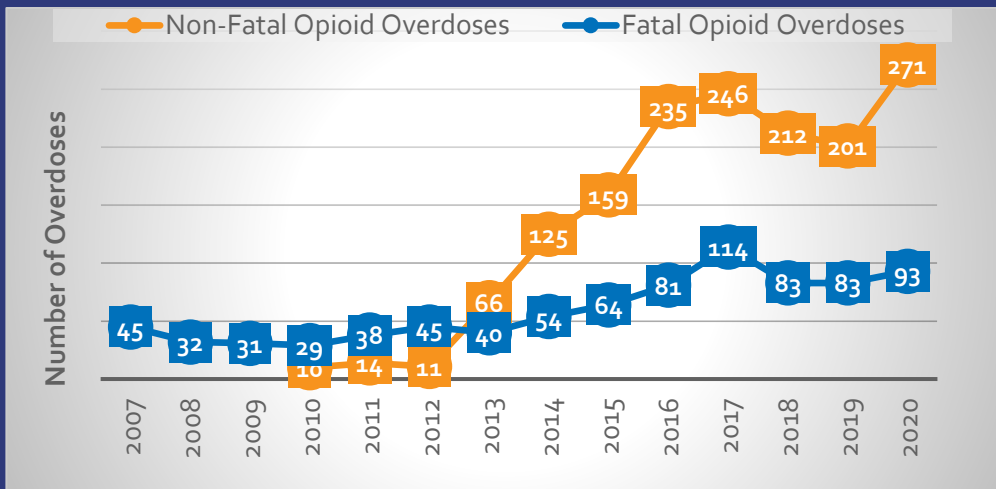
- Inadequate capacity to support people in the community remains one of the main contributing factors to the bed crisis.
- As of Aug. 24, Region 2 had 5 older adults on the Piedmont Geriatric EBL, 4 of which need a specialized 24/7 supervised residential program
- On Aug. 18, Region 2 had 21 adults on the NVMHI EBL, 18 of which need a specialized 24/7 supervised residential program.

Opioid Epidemic

Issue: The opioid epidemic continues to impact the Fairfax County Health District.

- For fatal drug overdoses, opioids have contributed the highest numbers of cases going back to 2007.

Opportunity: Additional support to expand ARTS as ARTS reimbursement rates do not cover the cost of providing needed 24/7 care.



STEP-VA, Crisis Services and Marcus Alert



Issue: Insufficient funding for implementation of mandated STEP-VA services and the new Marcus Alert system.

- Region 2 is facing a \$42.5 million funding shortfall for full implementation of STEP-VA.
- The Fairfax-Falls Church CSB is facing a \$20 million shortfall for its implementation of STEP-VA.
- To provide co-responder coverage at 4 of the 9 Fairfax Police substations 7 days a week for 10 hours a day will cost \$3.9 million.

Opportunity: Fully fund STEP-VA and increase funding for implementation of Marcus Alert community care teams in Region 2.

- Full funding for STEP-VA crisis services supports adult mobile crisis services and Regional Crisis Call Centers, which will be designated Virginia's 988 mental health and suicide crisis hotlines (a federal effort required to be in effect by July 16, 2022).

CSB Workforce Crisis



Issue: CSB is facing a workforce crisis.

- The pandemic exacerbated the significant workforce crisis in medical and behavioral health care.
- There are 2,400 vacancies across all of the CSBs in Virginia.
- Our CSB is dealing with significant staff vacancies in critical services positions, currently at over 150 vacancies.
- Service challenges are only heightened due to the lack of qualified clinical staff to operate needed community programs.

Opportunity: Improve pathways for employment from high schools to universities to workforce and increase funding to improve retention and recruitment of CSB workforce.

- Retention for present employees
- Loan repayment programs



FAIRFAX - FALLS CHURCH

**Community
Services Board**

Questions and Discussion



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AGENDA ITEM
#4.9

**FAIRFAX-FALLS CHURCH COMMUNITY SERVICES BOARD
VIRTUAL MEETING MINUTES
AUGUST 25, 2021**

The Executive Committee of the Fairfax-Falls Church Community Services 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 web conferencing platform 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 offered an opportunity to register for public comment during the 30 minutes prior to the meeting being called to order.

1. Meeting Called to Order

Board Chair Garrett McGuire called the meeting to order at 5:00 p.m.

PRESENT: **BOARD MEMBERS:** GARRETT MCGUIRE (ALEXANDRIA, VA), BOARD CHAIR; KAREN ABRAHAM (FAIRFAX, VA); JENNIFER ADELI (GREAT FALLS, VA); DARIA AKERS (FAIRFAX, VA); ROBERT BARTOLOTTA (FALLS CHURCH,VA); SHEILA COPLAN JONES (ALEXANDRIA, VA); CAPTAIN DEREK DEGEARE (LOUDOUN COUNTY, VA); LARYSA KAUTZ (ALEXANDRIA, VA); BETTINA LAWTON (VIENNA, VA); SRILEKHA PALLE (FAIRFAX, VA); DIANA RODRIGUEZ (MCCLEAN, VA); EDWARD ROSE (FALLS CHURCH, VA); ANDREW SCALISE (FAIRFAX, VA); DAN SHERRANGE (CHANTILLY, VA); ANNE WHIPPLE (GREAT FALLS, VA)

ABSENT: **BOARD MEMBERS:** SANDRA SLAPPEY BROWN

Also present: Executive Director Daryl Washington, Deputy Director of Clinical Operations Lyn Tomlinson, Deputy Director of Administrative Operations Daniel Herr, Chief Financial Officer Jessica Burris, Communications Director Lisa Flowers, Deputy County Attorney Cynthia Tianti; Director of Analytics & Evaluation Linda Mount, Legislative and Grants Analyst Elizabeth McCartney, Service Director for Children, Youth and Families Jim Gillespie, and Board Clerk Joseline Cadima

Board Chair Garrett McGuire 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. Board Chair Garrett McGuire passed the virtual gavel to Committee Vice Chair Dan Sherrange to make several motions required to begin 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 Committee Member Daria Akers and passed unanimously.

Preliminary Motions

Board Chair Garrett McGuire 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 video and web conferencing platform, that may be accessed via Meeting ID:

991 3995 4309 and Passcode: 272086. Motions were seconded by Committee Member Captain Derek DeGeare and unanimously approved. Board Chair Garrett McGuire 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 Committee Member Captain Derek DeGeare and unanimously passed.

2. Recognition

Board Chair Garrett McGuire presented a Certificate of Appreciation to Committee Member Bettina Lawton on behalf of the board and highlighted her achievements during her tenure as CSB Board Chair.

3. Matters of the Public

None were presented.

4. Amendments to the Meeting Agenda

The meeting agenda was provided for review, no amendments were made.

MOVED BY BOARD MEMBER BETTINA LAWTON, SECONDED BY BOARD MEMBER CAPTAIN DEREK DEGEARE TO APPROVE AGENDA ITEM NO. 4

AYES: BOARD MEMBERS: GARRETT MCGUIRE (ALEXANDRIA, VA), BOARD CHAIR; KAREN ABRAHAM (FAIRFAX, VA); JENNIFER ADELI (GREAT FALLS, VA); DARIA AKERS (FAIRFAX, VA); ROBERT BARTOLOTTA (FALLS CHURCH, VA); SHEILA COPLAN JONES (ALEXANDRIA, VA); CAPTAIN DEREK DEGEARE (LOUDOUN COUNTY, VA); LARYSA KAUTZ (ALEXANDRIA, VA); BETTINA LAWTON (VIENNA, VA); SRILEKHA PALLE (FAIRFAX, VA); DIANA RODRIGUEZ (MCCLEAN, VA); EDWARD ROSE (FALLS CHURCH, VA); ANDREW SCALISE (FAIRFAX, VA); DAN SHERRANGE (CHANTILLY, VA); ANNE WHIPPLE (GREAT FALLS, VA)

NOES: BOARD MEMBERS: NONE

ABSTAIN: BOARD MEMBERS: NONE

ABSENT: BOARD MEMBERS: SANDRA SLAPPEY BROWN

5. Approval of the Minutes

CSB Board meeting minutes of the July 28, 2021 were provided for review.

MOVED BY BOARD MEMBER BETTINA LAWTON, SECONDED BY BOARD VICE CHAIR DAN SHERRANGE TO APPROVE AGENDA ITEM NO.5

AYES: BOARD MEMBERS: GARRETT MCGUIRE (ALEXANDRIA, VA), BOARD CHAIR; KAREN ABRAHAM (FAIRFAX, VA); JENNIFER ADELI (GREAT FALLS, VA); DARIA AKERS (FAIRFAX, VA); ROBERT BARTOLOTTA (FALLS CHURCH, VA); SHEILA COPLAN JONES (ALEXANDRIA, VA); CAPTAIN DEREK DEGEARE (LOUDOUN COUNTY, VA); LARYSA KAUTZ

(ALEXANDRIA, VA); BETTINA LAWTON (VIENNA, VA); SRILEKHA PALLE (FAIRFAX, VA); DIANA RODRIGUEZ (MCCLEAN, VA); EDWARD ROSE (FALLS CHURCH, VA); ANDREW SCALISE (FAIRFAX, VA); DAN SHERRANGE (CHANTILLY, VA); ANNE WHIPPLE (GREAT FALLS, VA)

NOES: BOARD MEMBERS: NONE

ABSTAIN: BOARD MEMBERS: NONE

ABSENT: BOARD MEMBERS: SANDRA SLAPPEY BROWN

6. Director's Report

A. Services Update

Deputy Director of Clinical Operations Lyn Tomlinson noted the time to treatment for individuals is still undergoing delays due to the need for staff, executive leadership will be exploring the venue of purchase of services to remedy this on-going problem.

Service Director for Children, Youth and Families Jim Gillespie commented on a joint meeting with providers who shared information regarding the current need for behavioral health services among children and youth, the available services and how to access them, and how to increase capacity for these services.

B. COVID-19 Update

Deputy Director of Clinical Operations Lyn Tomlinson reported that County Executive Brian Hill has officially stated that all county employees must be fully vaccinated by October 11, 2021, which is also the return-to-work date in which employees will have an allowance for teleworking up to 60% of their time; employees can request exemptions for the vaccine due to religious or medical reasons will be considered; commented the Emergency Operations Center is still having weekly calls to provide updates, the most recent notification is having sufficient Personal Protective Equipment at the moment.

C. Other Updates

Deputy Director of Clinical Operations Lyn Tomlinson provided the timeline for the Year-End Report includes submittal to Board Chair Garrett McGuire by September 7, 2021 and submittal to the full board by September 10, 2021, and approval at the Board Meeting on September 29, 2021, the Annual Report will be sent to the Board of Supervisors in October 2021; noted the Dulles Expo Center is housing Afghani refugees and local CSB's have been notified to provide support by mental health professionals

Deputy Director of Administrative Operations Daniel Herr reported an update on State Hospitals which now has three of the five hospitals resuming their admissions services, one notable change for the Commonwealth Center for Children and Adolescents is the number of operating beds which decreased from 48 to 18 which is causing a significant delay to providing services; mentioned a collaborative letter which was shared with board members was sent to Senate Finance Committee and House Appropriations Commission to prioritize CSB services

that are related to discharges, investments in the workforce development, and to strengthen the community continuum of care; an additional letter was sent to the Commissioner on behalf of several coalitions requesting for collaboration and consultation related to the closure of state hospitals which includes adequate investment in alternative services; implementation of the Electronic Health Record is on track and meeting the proposed schedule; workforce surveys continue to be a priority, one survey was sent this past April of 2021 to individuals who left our agency who notes the reasons for their departure being compensation, lack of promotion, workload and supervision; the new hire survey has a 53% response rate which range from moderate to high response rates indicating problems with the time and length of the hiring process; the engagement survey for the current workforce will be sent and finalized by August 31, 2021 and preliminary data will be available to share in October 2021; the Department of Human Resources has agreed to review of the most difficult to fill positions to provide recommendation for the FY 2023 Budget.

Legislative and Grants Analyst Elizabeth McCartney mentioned the FY 2022 General Assembly Session will be held virtually on the September 29, 2021, Board Meeting, noted that invitations have been sent to general assembly delegation, a PowerPoint presentation and one page talking point document with key asks for the upcoming session will be sent to board members prior to the meeting.

Board Member Discussion Included: clarification on purchase of services to address time to treatment issues, anticipation of financial problems to follow through with the purchases of services and the lead time for implementation; expectation of push back from staff on vaccine mandate and how will this impact the already short staffing problems; percentage of employees that are requesting religious exemptions; Fairfax County member coordinator for the Afghani refugee program.

Deputy Director of Clinical Operations Lyn Tomlinson provided clarification on purchase of services which brings in private partners to provide CSB services and mentioned this is a temporary measure and does not anticipate any problems with the budget; responded the Health Department is providing education and on-site vaccines to counter off any problems with vaccine mandates and it is not known what percentage of employees will request any exemptions; will return with more information on the delegated county coordinator for the Afghani refugee program.

7. Marcus Alert Update Presentation

Executive Director Daryl Washington provided the staff report and presentation.

8. Matters of the Board

Board Member Daria Akers commented on a conversation with Regional Director Jean Post regarding delayed services from the REACH Program, which provides Crisis Services for Special Needs Adult and Youth individuals, it's been noted that a follow-up will occur to receive metrics.

Board Member Dan Sherrange mentioned the completion of the Metrics Report from the Ad Hoc Metrics and Reports Committee which will be presented in the October Board meeting, invited board members to join and be part of the Ad Hoc Strategic Planning Group which will have it's first meeting in October.

Board Chair Garrett McGuire noted that the off-site Board Member retreat has a proposed date of February 2022; the End Year Report will be sent to all board members for review and input by September 10, 2021; mentioned that meetings will be held virtually for the next few months.

9. Committee Reports

A. Service Delivery Oversight Committee

CSB SDOC Board Chair Anne Whipple reported conversations with associate members regarding their return to in person services and how the renewed COVID surge is further affecting their return to normality; associations noted challenges with staffing and transportation needs; noted that Lyn Tomlinson is putting together a focus group of our service providers for Aimee Brobst for the Countywide Strategic Plan on September 14, 2021 at 5:00p.m. **The next meeting is Wednesday, October 13, 2021, at 5:00 p.m.**

B. Compliance Committee

Board Chair Garrett McGuire noted the committee received an update regarding the smooth and on-time implementation for Comply Track reports. **The next meeting is Wednesday, September 15, 2021, at 5:00 p.m.**

C. Fiscal Oversight Committee

Committee Chair Jennifer Adeli mentioned a higher revenue than expected due to additional funds from state and federal funds; noted that staff is actively working the hiring, recruiting, and retaining of staff, and highlighted that emergency services had zero vacancies which is an area that is very important to our services. **The next meeting is Thursday, September 16, 2021, at 4:00 p.m.**

D. Other Reports

Board Chair Garrett McGuire mentioned the attached Committee Membership Appointments List is up to date.

10. Action Items

- A. Department of Behavioral Health and Developmental Services (DBHDS) Grant for A-CRA Partnership

Youth and Family Service Director Jim Gillespie provided the staff report.

MOVED BY CAPTAIN DEREK DEGEARE, SECONDED BY BOARD MEMBER BETTINA LAWTON TO APPROVE AGENDA ITEM NO. 10

AYES: BOARD MEMBERS: GARRETT MCGUIRE (ALEXANDRIA, VA), BOARD CHAIR; KAREN ABRAHAM (FAIRFAX, VA); JENNIFER ADELI (GREAT FALLS, VA); DARIA AKERS (FAIRFAX,

VA); ROBERT BARTOLOTTA (FALLS CHURCH,VA); SHEILA COPLAN JONES (ALEXANDRIA, VA); CAPTAIN DEREK DEGEARE (LOUDOUN COUNTY, VA); LARYSA KAUTZ (ALEXANDRIA, VA); BETTINA LAWTON (VIENNA, VA); SRILEKHA PALLE (FAIRFAX, VA); DIANA RODRIGUEZ (MCCLEAN, VA); EDWARD ROSE (FALLS CHURCH, VA); ANDREW SCALISE (FAIRFAX, VA); DAN SHERRANGE (CHANTILLY, VA); ANNE WHIPPLE (GREAT FALLS, VA)

NOES: BOARD MEMBERS: NONE

ABSTAIN: BOARD MEMBERS: NONE

ABSENT: BOARD MEMBERS: SANDRA SLAPPEY BROWN

11. Adjournment

Board Member Daria Akers made the motion to adjourn the meeting at 6:52 p.m.

AYES: BOARD MEMBERS: GARRETT MCGUIRE (ALEXANDRIA, VA), BOARD CHAIR; KAREN ABRAHAM (FAIRFAX, VA); JENNIFER ADELI (GREAT FALLS, VA); DARIA AKERS (FAIRFAX, VA); ROBERT BARTOLOTTA (FALLS CHURCH,VA); SHEILA COPLAN JONES (ALEXANDRIA, VA); CAPTAIN DEREK DEGEARE (LOUDOUN COUNTY, VA); LARYSA KAUTZ (ALEXANDRIA, VA); BETTINA LAWTON (VIENNA, VA); SRILEKHA PALLE (FAIRFAX, VA); DIANA RODRIGUEZ (MCCLEAN, VA); EDWARD ROSE (FALLS CHURCH, VA); ANDREW SCALISE (FAIRFAX, VA); DAN SHERRANGE (CHANTILLY, VA); ANNE WHIPPLE (GREAT FALLS, VA)

NOES: BOARD MEMBERS: NONE

ABSTAIN: BOARD MEMBERS: NONE

ABSENT: BOARD MEMBERS: SANDRA SLAPPEY BROWN

Date Approved

Staff to the CSB Board

Department of Behavioral Health and Developmental Services (DBHDS) State Opioid Response (SOR) II Grant Proposal

Issue:

CSB Board approval for the Fairfax-Falls Church Community Services Board to apply for and, if awarded, accept funding from the Virginia Department of Behavioral Health and Developmental Services (DBHDS) for a State Opioid Response (SOR) II Grant.

Recommended Motion:

I move that the Board approve applying for and accepting, if awarded, funds totaling \$675,097 for a SOR II Grant.

Background:

CSB Board authorization for the Fairfax-Falls Church Community Services Board (CSB) to apply for and accept \$675,097 if awarded a grant from DBHDS. The State Opioid Response (SOR) II Grant for the grant period of October 1, 2021 - September 30, 2022, will build on previously funded and approved SOR II activities from the September 2020 proposal. Each year SOR funds are disbursed by DBHDS throughout the state for projects providing direct substance use disorder and opioid use disorder (OUD) programs and services to address prevention, treatment, and recovery in communities.

Continued funding for recovery dollars will support one peer supervisor and one senior-level peer specialist currently serving individuals in the Fairfax County Adult Detention Center (ADC) and Intensive Outpatient Programs (IOP). Continued funding will also go toward trainings for these peer specialist positions.

New funding for recovery dollars is requested for an additional full-time, benefited senior peer support specialist to work within the CSB's successful Peer Outreach Response Team and a data analyst position to coordinate SOR activities, GPRAs, and other data needs. This also includes data and evaluation needs of four non-SOR CSB peer support programs directly addressing the opioid crisis. The two new positions will support existing CSB programs.

New funding is also requested for treatment dollars to build on previously funded partnership activities at the ADC, including medication assisted treatment (MAT) for individuals currently incarcerated. New funding is requested for one licensed senior clinician position to conduct assessment, which require a licensed or licensed eligible staff member. This position will also act as a liaison from ADC to Office-Based Opioid Treatment (OBOT) and provide case/care coordination, release planning, other referrals and conduct the GPRA. Additional treatment dollars are requested for the medications

needed for MAT provided at the ADC. This funding will pay for MAT while the individual is incarcerated and to transition the person until they land in OBOT or other CSB treatment program.

Funding is also requested to support SOR II Year 2 activities like needed trainings and supplies for staff funded by this grant.

Timing:

Board action is requested on September 29, 2021. The grant period is for October 1, 2021, to September 30, 2022.

Fiscal Impact:

State funding in the amount of \$675,097 is being requested. There is no Local Cash Match required to accept this award. This funding will be available until September 30, 2022, with no renewal beyond that time. There are 3/3.0 FTE new grant position and 2/2.0 current grant positions associated with this award. The County is under no obligation to continue funding this position when the grant funding expires.

Creation of Positions:

If awarded, this grant will create 3/3.0 FTE new positions and support 2/2.0 current positions.

Staff:

Lyn Tomlinson, Deputy Director of Clinical Operations
Michael T. Lane, Director Individual & Family Affairs

State Opioid Response II Grant

Summary of Grant Proposal

Grant Title:	State Opioid Response (SOR) II Grant
Funding Agency:	Virginia Department of Behavioral Health and Developmental Services (DBHDS)
Applicant:	Fairfax-Falls Church Community Services Board (CSB)
Funding Amount:	State funding of \$675,097
Proposed Use of Funds:	<p>Funds in the State Opioid Response II grant period from October 1, 2021 – September 30, 2022, will be used to build on previously funded and approved SOR II activities from the September 2020 proposal. Each year SOR funds are disbursed by DBHDS throughout the state for projects providing direct substance use disorder and opioid use disorder (OUD) programs and services to address prevention, treatment, and recovery in communities. SOR II activities will take place at the Fairfax Adult Detention Center (ADC), CSB’s Intensive Outpatient Programs (IOP), CSB’s Office-Based Opioid Treatment, and with CSB’s Peer Outreach Response Team.</p> <p>New recovery funding is proposed for one FTE senior peer support specialist to work within the CSB’s successful Peer Outreach Response Team and a data analyst position to coordinate SOR activities, GPRAs, and other data needs. Recovery funding will also support two current peer support positions serving individuals in the ADC and IOP.</p> <p>Treatment funding is proposed for one FTE licensed senior clinician at the ADC to conduct assessments and serve as liaison from ADC to OBOT. Funding will also pay for MAT while the individual is incarcerated and to transition the person until they land in OBOT or other CSB treatment program.</p>
Performance Measures:	<p>Serve 25 individuals in the ADC’s STAR (Striving to Achieve Recovery) program operating in a special detention unite within the ADC.</p> <p>Serve 35 individuals within CSB’s IOP program.</p> <p>Serve 100 individuals with a history of overdose that are at high-risk of overdose and other substance use emergency through CSB’s Peer Outreach Response Team.</p> <p>Successfully transition individuals from the ADC to OBOT clinic.</p>

Adherence to the Government Performance and Results act (GPRA) survey requirements to measure the participant outcomes of social connectedness, drug and alcohol use, and use of recovery and treatment services.

Grant Period:

October 1, 2021 – September 30, 2022

FY 2021 Year-End Report of the Fairfax-Falls Church Community Services Board

Issue:

The attached FY 2021 Year-End Report, prepared by the Fiscal Oversight Committee, for the year ending June 30, 2021, is presented for approval by the CSB Board. Information provided in the report includes financial status information, highlights of key program areas that are being closely monitored by our Board, and a discussion of critical issues for the agency and, most importantly, for the people in our community who need our services. Once the FY 2021 Year-End Report and cover letter are approved by the CSB Board, they will be forwarded to the Board of Supervisors and the Mayors of the cities of Falls Church and Fairfax.

Recommended Motion:

I move that the Board approve the FY 2021 Year-End Report for submission to the Fairfax County Board of Supervisors and the Mayors of the cities of Falls Church and Fairfax.

Background:

At the Board's direction, the Fiscal Oversight Committee prepares and submits a FY 2021 Year-End Report to the Board of Supervisors and the Mayors of the cities of Falls Church and Fairfax. The report is prepared on an annual basis and is presented to the CSB Board as an action item requesting approval. Once approved, the report is transmitted under the signature of the Chair of the Board.

Fiscal Impact:

None

Board Member:

Garrett McGuire
CSB Board Chair

Enclosed Document:

Attachment A - Fairfax-Falls Church Community Services Board FY 2021 Year-End Report and Cover Letter



Community Services Board

TO: Fairfax County Board of Supervisors
Mayors, Cities of Fairfax and Falls Church

FROM: Board of the Fairfax-Falls Church Community Services Board (CSB)

DATE: [Insert date]

SUBJECT: Fairfax-Falls Church Community Services Board FY 2021 Year-End Report

Chairman McKay and Members of the Board of Supervisors,

As Chair of the Fairfax-Falls Church Community Services Board (CSB), I am pleased to present the CSB's FY 2021 Year-End Report highlighting our major accomplishments and challenges. The Board of Supervisor's commitment, funding, and strong partnership allows us to continue to provide critical services to our most vulnerable residents, especially in the midst of the COVID-19 pandemic.

In FY 2021, the CSB provided mental health, substance use disorder, and developmental disability services to more than 20,000 people. The numbers below are unduplicated within each service type. However, individuals may have received more than one type of service.

- 6,304 individuals received CSB Emergency Services and 3,420 received same day walk-in screening and assessments. 93% of persons receive emergency services within one hour.
- 5,004 people with developmental disabilities received support coordination services.
- 1,716 individuals received peer support services in the community.

In FY 2021, the CSB faced challenges and opportunities in ongoing key issue areas, some of which are described in more detail in the attached report including:

- A continued focus on access to timely and appropriate services and supports to individuals and families.
 - Ongoing work with CSB and County HR to strategize on ways to increase recruitment and retention of CSB staff
 - Ongoing problem solving and partnership to manage the state psychiatric hospital bed shortage
 - Beginning a complete re-design of the walk-in assessment business process
 - Exploring ways to support individuals who do not meet priority access guidelines and those awaiting CSB services

- Continuing to address client and staff safety regarding the continued impact of COVID-19 while maintaining continuity of operations
- Ensuring efficient and effective utilization of resources
 - Expanding the CSB's ability to maximize service provision revenue
 - Completing the electronic healthcare record (EHR) contracting process
 - Continuing to update business practices in revenue cycle and maximizing revenue.
- Addressing the heroin and opioid epidemic
- Expanding Diversion First initiatives to enhance ongoing decriminalization of mental illness
- Implementing new state mandated requirements for individuals with developmental disabilities

As we continue to work through the COVID-19 pandemic, the CSB has risen to meet the demands of the community as we all face unprecedented challenges. We cannot do it alone, and your dedication to the CSB through generous funding helps us achieve our common goal of bettering our community. We understand the fiscal challenges you face in making difficult budget decisions and we are deeply appreciative of your leadership. As always, we welcome your review, comments, and questions regarding our report.

[Insert Garrett's signature]

Garrett McGuire

Fairfax-Falls Church Community Services Board (CSB)
FY 2021 Year-End Report
Covering period July 1, 2020 to June 30, 2021

This report highlights key program areas and discusses the agency’s critical issues. The CSB Board appreciates the ongoing support of the Board of Supervisors, which allows us to continue to serve residents of Fairfax County and the cities of Fairfax and Falls Church who need our services. We remained focused on delivering high-quality and essential services to residents living with challenges relating to mental health, substance use disorder and developmental disabilities.

CONTINUED DELIVERY OF SERVICES THROUGH COVID-19

FY 2021 was a year like no other as our community was battling the COVID-19 pandemic from day one. In one short year, COVID-19 wiped out in-person access to thousands in our community, strained frontline employees, and pushed some individuals and families further into isolation. School closures, contact restrictions, and economic challenges profoundly affected our families, workplaces, and communities, amplifying the needs of those most vulnerable to mental health challenges and substance use.

The CSB remained dedicated to providing support and strengthening the systems upon which our community relies – from in-person and telehealth services, expanded trainings, new partnerships, as well as broader outreach and communications being provided in additional languages. The pandemic led to the re-organization of family life, which has disproportionately affected individuals with developmental disabilities, their families, and other disadvantaged and marginalized communities. In many cases, it laid bare the widening gap between those who have easy access to critical services and support and those who do not have access or know where to find it.

The crisis also revealed the strength and character of the CSB and its staff. We continued to learn through the pandemic, and it was evident that access to care became more important than ever before. In FY 2021, more than 20,000 individuals received our mental health, substance use disorder, or developmental disability (DD) services. Over 6,300 residents received CSB emergency services. Our planning, through completion of our Continuity of Operations Plan (COOP) in FY 2020 and other strategic measures, as well as continued diligence over the health and safety of our staff and individuals we serve, ensured that our critical functions and most of our services continued during this once in a lifetime event.

However, a national shortage of workers in critical healthcare fields remains a hindrance to growth and sustainability. In the face of continued staffing shortages, the CSB is working diligently to continue its work in prioritizing retention, recruitment and hiring. In the summer of 2021, as the world was engaged in recovering and rebuilding as the pandemic waned, the second wave of the pandemic exacerbated by the Delta variant brought even more challenges.

Undaunted, we are reimagining what is possible by building new health and well-being systems, driven by a revolution in the treatment of substance use disorders within the court system, and creating new forums for collaboration, coordination, and action. The progress we achieved during the most challenging year of our agency's history was substantial and lasting. With FY 2021 behind us, we can persevere and grow again, but we cannot do it alone. The long-term, large-scale changes required by the vulnerable individuals we serve requires concerted action with existing and new partnerships. The CSB is proud to stand with county leadership, our partners, and our community with hope and optimism, undaunted by the challenges before us. Together, we will seize this moment in history and reimagine a better future for our families, our workforce, the individuals we serve, and our community.

CRITICAL ISSUE AREAS

SYSTEM TRANSFORMATION, EXCELLENCE AND PERFORMANCE (STEP-VA) MANDATES

Enacted in 2017, the Commonwealth's STEP-VA initiative continues to be a priority for the agency. Fairfax County has continued to provide significant funding and support for implementation of the Commonwealth's System Transformation, Excellence and Performance in Virginia (STEP-VA). Although the Virginia Department of Behavioral Health and Developmental Services (DBHDS) has provided funding for STEP-VA, the funding is significantly below what is required for a locality of our size.

Implementation of Phase 1 of STEP-VA Mobile Crisis expanded the services collectively known as "REACH" (Regional, Education, Assessment, Crisis Services, Habilitation). The REACH services include mobile response for those with a developmental disability. In addition, and as a result of increased funding from DBHDS, the capacity of our Children's Regional Crisis Response Program, known as "CR2", has nearly doubled.

STATE PSYCHIATRIC HOSPITAL BED CRISIS

In FY 2021, CSB conducted over 1,700 mental health evaluations related to temporary detention orders – a 50% increase from FY 2015. One of the reasons there is a statewide psychiatric bed crisis has been the nearly 400% increase in the number of temporary detention orders through FY 2021. The Northern Virginia region is the only region in the Commonwealth that has been able to increase the number of temporary detention orders by private psychiatric hospital beds. The Fairfax-Falls Church CSB continues to be one of the lowest users of the psychiatric hospital beds per capita.

Amid the state psychiatric hospital bed crisis, Fairfax County's ongoing local investments ensured one of the lowest per capita hospitalization rates in the Commonwealth (6 residents per every 100,000 as compared to the statewide average of 16 residents per 100,000). The CSB continuously adapted to multiple state hospitals opening and closing throughout the year using alternative solutions to meet emergency constituent needs. With additional discharge assistance

funding and staff, it is feasible to lower the rate by expanding our case management and discharge planning staff. By reducing the extent of hospital stays and emergency services, cost savings can be achieved and reapplied to other critical programs. The employment of additional discharge planners will reduce emergency services and judicial support costs.

The Psychiatric Crisis Stabilization unit that quickly opened in September 2020 at the Alternative Incarceration Branch (AIB) in cooperation with the Fairfax County Sheriff's Office is an example of the CSB's successful partnership with other local resources to address this crisis. In addition, in early 2021, the Woodburn Place Crisis stabilization unit moved to a newly renovated location which allowed the program to accept and treat individuals with extremely complex mental health and substance use histories. Efforts are underway to further expand crisis stabilization services in the Chantilly area during the Fall of 2021.

HEROIN AND OPIOID EPIDEMIC

In the Fairfax Health District (including Fairfax County and the cities of Fairfax and Falls Church), opioids are the number one cause of unnatural death, with 94 opioid deaths in 2020; all but six were due to fentanyl. Hospitals in the Fairfax Health District reported a 38 percent increase in the number of emergency room visits for opioid overdoses (including heroin and non-heroin) in 2020 relative to 2019. The number of such visits in the first quarter of 2021 trended higher than the same period in 2020 and raised concerns about it continuing to trend upwards throughout 2021. This indicates that the opioid epidemic continues to impact the Fairfax County Health District.

The CSB provided support and treatment in many ways. Medication-assisted treatment was expanded and the number of individuals waiting for residential treatment decreased from 49 in July 2020 to 35 in July 2021. The Sheriff's Office's jail-based MAT program in the Adult Detention Center launched in July 2020 and saw early success with former inmates staying engaged and successfully connecting in unprecedented numbers to CSB's Addiction Medicine Clinic.

Since its inception, almost 3,900 individuals have received REVIVE! training, a free course on how to administer opioid reversal medication. In FY 2021, more than 650 individuals were trained in REVIVE! with more than 400 naloxone distributed via the trainings. Partnerships continued with the Peer Outreach Response Team (PORT), the Fairfax County Fire and Rescue and Police Departments connecting individuals encountered by public safety for non-fatal overdoses to PORT for recovery action planning, discussion of treatment and support group options, REVIVE! training, and more.

MEDICAID

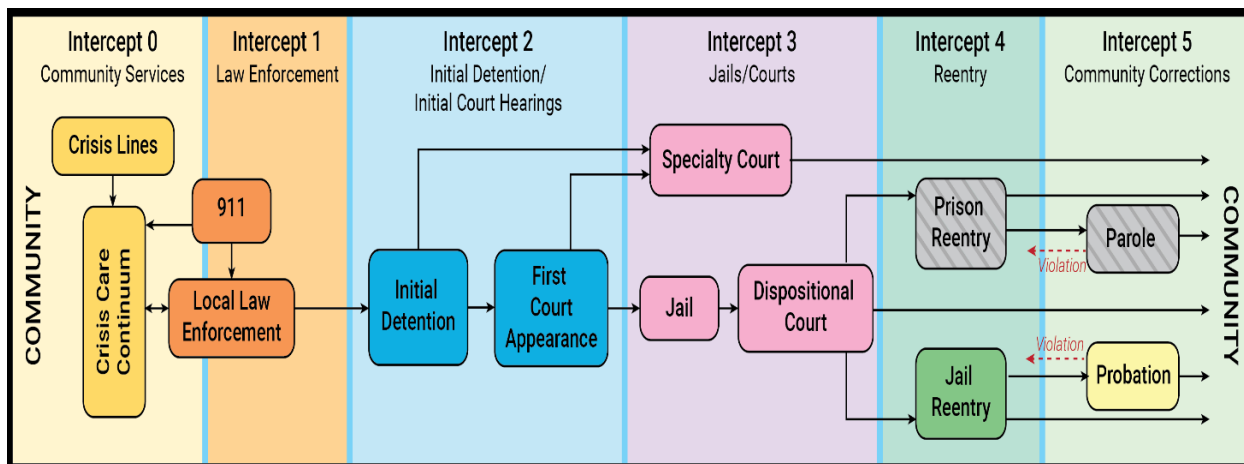
The CSB and DFS partnered on a pilot program which has now become part of our regular business practice. The goal of the program is to increase the number of individuals with health insurance in a shorter timeframe and also resulting in the number of individuals seeing a primary care provider. This program was started in early 2020. Between July 2020 and July 2021, the

percentage of individuals with Medicaid increased from 69% to 72% and the number of uninsured decreased from 15% to 12%.

DIVERSION FIRST

The countywide Diversion First initiative continues to make a difference in our community, providing alternatives to incarceration for people with mental illness, co-occurring substance use disorders and/or developmental disabilities who come into contact with the criminal justice system for low-level and/or non-violent offenses. Diversion First programs and services are possible due to Fairfax County’s investment and partnerships between the Fairfax-Falls Church Community Services Board, Sheriff’s Office, Fairfax County Police Department, Fire and Rescue Department, Courts, Department of Public Safety Communications, other county agencies and the community. Throughout FY 2021 the programs supporting the Diversion First mission have continued to provide services in a variety of settings, responding to the needs of the community.

Diversion First utilizes the Sequential Intercept Model (shown below), a national framework to inform strategies and community-based responses to the involvement of people with behavioral health issues in the criminal justice system. This framework provides a broad overview of the intercept points and examples of services for each intercept.



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During FY 2021, 484 individuals were diverted from potential arrest to the Merrifield Crisis Response Center (MCRC). Law enforcement transported 2,176 individuals to the MCRC, of which 1,553 were under an emergency custody order and 623 were voluntary transports. In FY 2021, MCRC continued to expand, and in partnership with Neighborhood Health, a Federally Qualified Health Center, the CSB launched onsite medical assessment at the MCRC for individuals who need inpatient hospitalization or crisis stabilization admission. The goals of the Medical Assessment Program (MAP) are to reduce patient and law enforcement time spent in Emergency Departments, increase the number of transfers of custody at the MCRC, reduce the number of injuries to the client and law enforcement, increase number of individuals connected to follow

up primary care services, and reduce costs by providing services in a non-emergency setting. Launched in October 2020, MAP has served more than 250 individuals. MAP assessment is completed in an average of 90 minutes, compared to an average of over four hours in emergency rooms.

In the spring of 2021, the CSB, Fairfax County Police Department, and the Department of Public Safety Communications (DPSC) collaborated to implement an exploratory “micro pilot” to learn about logistical and operational considerations for launching a primary response Co-Responder program in Fairfax County. During this micro pilot, a CSB Crisis Intervention Specialist and Crisis Intervention Team (CIT) trained police officer were paired to respond to 911 calls that were related to behavioral health issues. In addition to the co-responder team, a CSB Crisis Intervention Specialist was deployed to DPSC to serve as a “Behavioral Health Liaison” (BHL). The BHL provided public safety personnel with behavioral health resources, and researched calls to assist the Co-Response team. In the coming fiscal year, strategies to continue this initial effort will be explored. In FY 21, the CSB will also be preparing for Marcus Alert implementation. This recently enacted legislation is designed to enhance crisis response throughout the state.

The Community Response Teams (CRT), a CSB and public safety partnership, has built upon their success in providing outreach and care coordination to frequent utilizers of public safety services, with the goal of better outcomes for individuals served and more efficient utilization of public safety resources. The CRT has partnerships with several local agencies and community-based organizations, such as Inova Health System. The work of the CRT has attracted national attention, and the team has presented at national conferences and frequently consults with similar programs across the county to share successes and lessons learned. To date, more than 400 individuals have been referred to the CRT program.

Diversion First also provides opportunities for intervention throughout the criminal justice system. Individuals booked into the Adult Detention Center (ADC) are screened with the Brief Jail Mental Health Screening (BJMHS), and the CSB provides behavioral health services to many incarcerated individuals with a variety of behavioral health needs. In partnership with the Sheriff’s Office, the CSB provides Medication Assisted Treatment (MAT) services; linking individuals to medication and treatment supports to address opioid use disorder while they are incarcerated and at the high-risk time of release. The CSB provides services to the Sheriff’s Office’s Striving to Achieve Recovery (STAR) program a peer led, trauma informed, jail-based addiction recovery program. In FY 2021, in partnership with a local non-profit, the Chris Atwood Foundation, the CSB received grant funding to connect individuals participating in the MAT program to a Peer Recovery Specialist upon ADC release. Through this CSB grant, Peer Recovery Specialists provide one-on-one peer support, for MAT participants to access recovery housing, treatment programs and in developing harm reduction strategies.

The CSB is a strong partner of the specialty courts, providing program coordination and access to treatment services for these rapidly expanding programs. Individuals who are diverted to one of these specialty court programs participate in a structured program integrating treatment with court supervision. Successful outcomes for the program involve individuals achieving personal

goals rooted in recovery and, potentially, reduced or resolved charges. During FY 2021, despite the challenges of the COVID-19 pandemic, the Veterans Treatment Docket, Drug Court and Mental Health Dockets were at or near capacity of 25 people for each docket. The CSB also collaborates with Court Services to serve individuals in the Supervised Release Program, which provides intensive supervision in the community instead of incarceration.

In addition to community-based services and treatment, the CSB provides permanent supportive housing services for the Diversion First population, in partnership with New Hope Housing. Permanent supportive housing is 50% less expensive than incarceration, and typically, over 85% of those housed through this program have maintained housing and have had no additional psychiatric hospitalizations.

Successful expansion of a community-based crisis services mental health response will depend on increased funding for Marcus Alert implementation for program development and community care teams. The voluntary database component of the Marcus Alert system became available July of 2021. The Marcus Alert system will provide the appropriate response in the community when an individual is experiencing a mental health crisis.

The agency will participate in Phase II of the Marcus Alert initiative. This requires that the Fairfax-Falls Church community establish protocols by July 1, 2022 and recommendations for protocols will be submitted in a report to the Board of Supervisors and to the CSB Board prior to July 1. The planning process will include gathering community input including stakeholders' groups and broader communication efforts focusing on under-served communities, staffing needs, and funding proposals. A reminder was offered that state funding beyond the initial funding of \$600K is unlikely. Related to Marcus Alert protocols is Rapid SOS, a digital platform that provides a database for community members to register special needs information alerts for first responders. The alerts are assigned via cell phone number and can include the home address for identification as well; it does not work with land lines. The platform is anticipated to be operational by the end of June 2022.

While the ongoing COVID-19 pandemic continued to bring challenges in FY 2021, it also brought opportunities for CSB to have even greater collaboration with partner agencies to meet the needs of the Diversion First population. The focus has remained on what can be accomplished when teams work together toward solutions and a common vision.

DEVELOPMENTAL DISABILITIES (DD) SERVICES

More than 2,600 of the over 13,000 individuals with DD on the statewide Medicaid waiver waiting list are served by the Fairfax-Falls Church CSB.

Face-to-face Support Coordination services resumed on May 1, 2021, as required by the Department of Justice Settlement Agreement (DOJSA). Employment & Day Services providers started phasing in face-to-face service delivery in May of 2021 and are gradually increasing

services as site capacity and staff resources allow. Ongoing engagement and re-engagement plans supported:

- An average of 78% sustained services for individuals with developmental disabilities in Individual Supported Employment Services (ISE) from July 2020 to June 2021.
- An average of 23% sustained services for individuals in Group Supported Employment (GSE) from July 2020 to June 2021, with an increase to 41% from May to June 2021.
- Day and Sheltered Service providers have steadily increased service capacity over several months, despite many needing to close due to COVID-19 exposures, with an increase to 33% in June 2021.

CSB contracted service providers served 81% of all individuals (813 of more than 1,300) enrolled in Day, Sheltered, and Group and Individual Supported Employment. The increase in individuals served in April and May were primarily attributed to vaccinations. Staffing shortages resulted in a moderate increase in the time to treatment performance metric. It is anticipated that employment sites will continue to see a significant increase in services in the fall of 2021. In a typical year, more than 1,500 individuals are served in Day Support, Sheltered, and Group and Individual Supported Employment. Employment & Day Services are phasing in face-to-face service delivery.

The Behavioral Health Services sector of employment services saw substantial success of the telehealth services provision. It is anticipated that employment and day sites will continue to see a significant increase in services in the Fall of 2021.

As we return pre-pandemic levels of in-person services, staffing shortages are expected to continue to be a challenge, especially due to the new individuals receiving waiver slots. The support coordination team is grateful to the Fairfax County Board of Supervisors for maintaining monies in the budget to assist with the 146 new waiver slots allocated to Fairfax-Falls Church for FY 2021. This will allow us to serve the additional individuals.

CSB BUSINESS OPERATIONS AND PERSONNEL

HEALTH CARE COMPLIANCE

The CSB's compliance program is focused on preventing, detecting, and correcting ethical and regulatory deficiencies. A highlight of FY 2021 was the launched of the revised Psychiatric Diagnostic Evaluation (PDE) in July. A workgroup of clinicians across service areas reviewed the existing flow of clinical information and recommended changes to enhance the clinical and interview experience for staff and individuals. The revised PDE replaced the Service Specific Provider Intake (SSPI). An assessment addendum remained and included new content. With the revised PDE in place, the CSB has a streamlined a standard assessment that combines all the requirements of the:

- Multidimensional Assessment required by Addiction & Recovery Treatment Services (ARTS),
- Comprehensive Needs Assessment required by Community Mental Health & Rehabilitation Services (CMHRS), and
- Psychiatric Diagnostic Evaluation required by Psychiatric Services (PS)

This combined standard assessment for the agency is one effort in moving away from individualized program forms and towards ensuring standardized data elements across our system.

INFORMATICS AND ELECTRONIC HEALTH CARE RECORD

The contract process for a new EHR (Electronic Health Record) was finalized in June of 2021. Welligent, the new provider, is a cloud based EHR platform with mobile apps providing comprehensive solutions to manage our caseload, schedule, documentation, and revenue cycle. The CSB formed a Health Record Implementation Team which has built a project plan in collaboration with DIT. It is projected to launch in the fall of 2022.

HUMAN RESOURCES

The national shortage of qualified behavioral health care professionals continues to increase pressure on our leadership team to meet the expanding constituent base and deliver services. Most of our clinical positions, including in the areas of nursing, behavioral health, developmental disabilities, and substance use disorders, require mandated specialty degrees, certifications, and licensure, as determined by ever-evolving state laws and licensing requirements. Due to these requirements, most health care related employers in our area are competing for the same group of qualified candidates. Some neighboring jurisdictions are offering \$10,000 more for case management/support staff.

In addition, an aging population and increasing needs of the individuals we serve, coupled with an aging workforce and projected retirements in the near-term means we anticipate additional staffing shortages ahead. Recruitment efforts were a strategic priority in FY 2021 and will remain critical to attract qualified talent, but equally important will be the efforts employed to ensure the retention of existing talent.

Steps in increase retention include:

- Exit surveys – Sent to staff who left the CSB from January to present.
- Staff engagement surveys – Expected to launch in early FY 2022. The results will not be implemented until well into 2022. Leadership at the CSB will be working internally with CSB staff and with county leadership to implement results of the survey as quickly as possible.
- Bonuses – Sign on and referral bonuses were approved for hard to fill positions.

- Internships – Expanded to include licensed counselors and will include a stipend for those supervising interns.
- Annuitants – Allowed the return of annuitants to address time to treatment concerns.
- Job Sharing – Converted some full-time merit positions to job sharing positions for clinicians who are looking to retain county benefits.
- Interviewing Flexibility – Exploration of options for virtual interviewing processes and development of generic job ads to broaden candidate pools.
- Salary Compression – Ongoing review for internal salary alignment of hard to fill positions including 466 clinicians.

Research began into a video-based interview system which will significantly reduce the time to hire and increase opportunities for more diverse and equitable hires.

ONE FAIRFAX

The CSB’s Equity Workgroup was born out of Fairfax County’s One Fairfax social and racial policy and consists of more than forty staff across all program areas and leadership levels. Our agency is resolved to use compassion, creative ideas, and our collective sense of humanity to ensure we are fostering and supporting a culture that acknowledges people’s feelings, their pain, and their trauma and to further strengthen our commitment to diversity, inclusion, and addressing systemic racism.

The pandemic has impacted every resident and all facets of the economy, but it has disproportionately impacted Black, Latinx, and low-income residents. In turn, this has exacerbated racial and social inequities among residents with the greatest need. The workgroup met regularly throughout FY 2021 and took strong action steps related to the social and racial disparities for those we serve and within our workforce. Workgroup members stepped up even more in FY 2021 and were our system’s ambassadors during this time of national and local unrest. They led difficult conversations about race amongst their colleagues, on panel and webinar discussions with regional and state experts and widened the dialogue to move us towards deeper understanding and action to create the changes needed.

Expansion of the popular webinar series focusing on mental health in the Black community continued through the fall of 2020. These virtual community discussions focused on shifting the narrative around mistrust, while exploring the relationship of trust between the Black community and a variety of systems. The final event in this series on trust discussed engagement with professionals in mental health, medical services, and law enforcement.

The CSB is committed to providing services and keeping those we serve and our staff safe especially in a COVID-19 world. The CSB also recognizes its responsibility to continue serving our communities and tackle the problems we were committed to prior to the pandemic. We will continue to review our business practices such as our legacy systems and manual processes, to further streamline our efforts and increase overall efficiencies and effectiveness. The CSB created

a full-time position to focus on equity issues and develop an agencywide plan on enhancing equitable services and workplace environment. The CSB anticipates filling this position in the fall of 2021.

As we move into our second year of COVID-19, challenges and opportunities exist. With our wide range of services, the ever-changing health care industry, and an increasing shortage of labor, we remain focused on serving the mental health, substance use and developmental disability needs of our community. Your continued support is vital in helping make a difference in our community.