



ARLINGTON COUNTY, VIRGINIA

County Board Agenda Item Meeting of December 9 2006
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DATE: November 27, 2006

SUBJECT: Regional Discharge Assistance State funds for consumers and crisis stabilization

C. M. RECOMMENDATIONS:

1. Appropriate \$130,685 from the Virginia Department of Mental Health, Mental Retardation, and Substance Abuse Services (101.364501) to the Department of Human Services (DHS) (101.52132) for three consumers' Individual Service Plans upon discharge from Northern Virginia Mental Health Institute (NVMHI).
2. Appropriate \$187,273 from the Virginia Department of Mental Health, Mental Retardation, and Substance Abuse Services (101.364501) to the Department of Human Services (101.52132) to purchase two beds for regional use at the ACCESS program in Arlington, a crisis stabilization program operated by Fellowship Health Resources.

ISSUES: Should DHS use the Regional Discharge Assistance State funds for three consumers and for the purchase of two crisis stabilization beds at ACCESS?

SUMMARY: The five Community Service Boards (CSB) in Northern Virginia have managed a regional Discharge Assistance and Diversion project for more than 15 years. The dollars are targeted for census reduction at our local state psychiatric hospital (NVMHI) and for diversion of mentally ill individuals from the state hospital.

BACKGROUND: The regional Discharge Assistance and Diversion (DAD) committee is comprised of CSB staff from Northern Virginia who is responsible for discharge planning and emergency services at the five CSBs. The committee also includes staff from NVMHI, Western State Hospital, and the Department of Mental Health, Mental Retardation, and Substance Abuse Services. This committee routinely monitors and approves, discharge plans for the more challenging patients at NVMHI. The dollars for these plans are approved by this regional body and the dollars are directed to the CSBs from the Fairfax/Falls Church CSB which is the fiscal agent for these funds.

Plans are routinely presented that range from \$15,000 to \$110,000 to manage seriously mentally ill, multiply impaired individuals in highly specialized placements throughout the Commonwealth. Other projects are also approved which relate to the diversion of seriously mentally ill individuals from the state hospital, such as regional crisis stabilization programs. All placements are monitored by the respective CSB staff and modified as necessary. It is not unusual to develop plans which are later modified or cancelled due to changing needs on the part of the consumers.

County Manager: _____

Staff: Leslie Weisman, Behavioral Healthcare, DHS

DISCUSSION: The \$130,685 is a combination of three Individual Service Plans (ISPs).

a. The first plan in the amount of \$69,000 for the first consumer is to cover services with Wall Residences, Inc., a residential provider providing home-based placements throughout southern and central Virginia for seriously mentally ill individuals. This plan is likely to cost a minimum of \$69,000 annually as this consumer is extremely difficult to manage and will require additional staffing. The consumer has not been discharged from NVMHI and therefore the final ISP cost is prorated for FY07.

b. The second consumer in the amount of \$38,685 was placed at Brighton Gardens of Arlington, a Sunrise Assisted Living Facility, in December 2005.

c. The third consumer is still at NVMHI. The \$23,000 will be needed to pay for additional staffing at a specialized highly intensive apartment. This consumer is diagnosed with severe mental illness as well as substance abuse, mental retardation and a criminal history. The dollar figure will be prorated for FY07 once an apartment can be located.

The \$187,273 is the cost for purchase of two beds at ACCESS, the crisis stabilization program in Arlington operated by Fellowship Health Resources, Inc. The DAD committee will fund the two beds for FY07 and they can be used regionally. These beds are used as an alternative to hospitalization for consumers in crisis.

FISCAL IMPACT: None. There is no impact on net tax support.