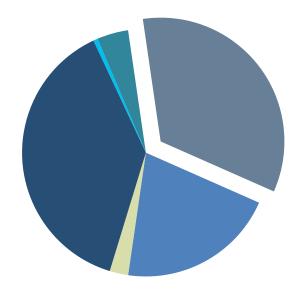
Mission Statement

Community Services is committed to improving the wellbeing of residents of Prince William County, the City of Manassas, and the City of Manassas Park who are affected by, or are at-risk of, developmental delays and disabilities, mental illness, and/or substance use disorders through the provision and coordination of community-based resources that respect and promote the dignity, rights, and full participation of individuals and their families.



Human Services Expenditure Budget: \$220.850.375

Expenditure Budget: \$74,908,401



33.9% of Human Services

Programs:

- Administrative Services: \$9,892,535
- Adult Behavioral Health and Recovery Services: \$10,162,457
- Developmental Disability Services: \$11,656,271
- Early Intervention Services for infants and Toddlers: \$6,346,308
- Emergency, Access, and Trauma Services: \$15,323,495
- Medical Services: \$4,613,923
- Mental Health and Co-Occurring Community Support Services: \$11,038,003
- Youth Behavioral Health and Recovery Services: \$5,875,409

Mandates

The County is mandated to establish a Community Services Board, which serves as the single point of entry into publicly funded mental health, developmental, and substance abuse services. Mandated Community Services Board services include (1) emergency services, (2) same-day mental health screening services, (3) outpatient primary care screening and monitoring services for physical health indicators and health risks and follow-up services for individuals identified as being in need of assistance with overcoming barriers to accessing primary health services, including developing linkages to primary health care providers, and (4) case management services subject to the availability of funds appropriated.

Under the Marcus-David Peters Act, Community Services is mandated to implement a Marcus Alert system. The Marcus Alert system will serve to divert those experiencing a behavioral health crisis from a primarily law enforcement response to a behavioral system of care.

In addition, subject to the availability of funds appropriated, core services may include a comprehensive system of inpatient, outpatient, day support, residential, prevention, early intervention, and other appropriate mental health, developmental, and substance abuse services necessary to provide individualized services and support to persons with mental illness, developmental disabilities, or substance abuse.

State Code: <u>37.2-500</u> (Purpose; community services board; services to be provided), <u>37.2-504</u> (Community services boards; local government departments; powers and duties), <u>37.2-311.1</u> (Comprehensive crisis system; Marcus alert system; powers and duties of the Department related to comprehensive mental health, substance abuse, and developmental disability crisis services)

Expenditure and Revenue Summary



Expenditure by Program	FY20 Actuals	FY21 Actuals	FY22 Actuals	FY23 Adopted	FY24 Adopted	% Change Budget FY23/ Budget FY24
Administrative Services	\$5,194,974	\$5,753,861	\$6,043,565	\$5,249,791	\$9,892,535	88.44%
Adult Behavioral Health and Recovery Services	\$7,345,330	\$7,915,965	\$8,470,218	\$10,128,220	\$10,162,457	0.34%
Developmental Disability Services	\$8,029,552	\$8,591,681	\$8,549,702	\$11,412,473	\$11,656,271	2.14%
Early Intervention Services for Infants and Toddlers Emergency, Access and Trauma Services Medical Services	\$4,330,743 \$5,442,672 \$2,842,060	\$4,789,167 \$6,070,919 \$2,963,742	\$4,867,606 \$6,566,031 \$2,990,260	\$5,521,722 \$11,251,398 \$4,385,418	\$6,346,308 \$15,323,495 \$4,613,923	14.93% 36.19% 5.21%
Mental Health and Co-Occurring Community Support Services Youth Behavioral Health and Recovery Services	\$10,103,087 \$3,641,111	\$9,056,433 \$3,994,636	\$11,768,551 \$4,614,904	\$12,352,434 \$5,533,728	\$11,038,003 \$5,875,409	(10.64%) 6.17%
Total Expenditures	\$46,929,530	\$49,136,404	\$53,870,838	\$65,835,185	\$74,908,401	13.78%

Expenditure by Classification

Total Expenditures	\$46,929,530	\$49,136,404	\$53,870,838	\$65,835,185	\$74,908,401	13.78%
Payments to Other Local Agencies	\$0	\$0	\$0	\$5,508	\$5,508	0.00%
Debt Maintenance	\$48,516	\$0	\$24,258	\$24,258	\$24,258	0.00%
Depreciation Expense	\$4,911	\$4,911	\$3,274	\$0	\$0	-
Reserves & Contingencies	\$0	\$0	\$0	\$0	(\$160,053)	-
Leases & Rentals	\$155,241	\$127,196	\$105,642	\$177,206	\$140,125	(20.93%)
Capital Outlay	\$0	\$0	\$39,125	\$130,000	\$80,000	(38.46%)
Purchase of Goods & Services	\$1,720,827	\$1,738,620	\$2,001,760	\$3,072,473	\$5,303,097	72.60%
Internal Services	\$2,159,612	\$2,345,885	\$2,364,658	\$2,489,090	\$2,549,483	2.43%
Contractual Services	\$7,800,673	\$5,883,373	\$8,276,557	\$12,929,284	\$12,796,858	(1.02%)
Salaries & Benefits	\$35,039,751	\$39,036,420	\$41,055,565	\$47,007,366	\$54,169,125	15.24%

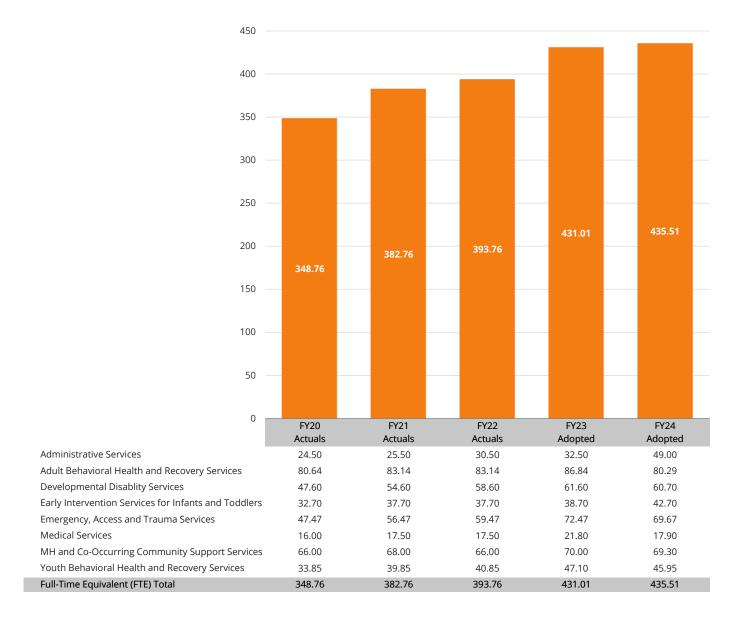
Funding Sources

Revenue from Federal Government	\$3,219,009	\$2,228,680	\$3,720,613	\$3,006,866	\$3,118,779	3.72%
Use of Money & Property	\$112	\$31	\$0	\$0	\$0	-
Revenue from Other Localities	\$3,389,460	\$2,850,764	\$3,501,233	\$3,733,068	\$3,980,235	6.62%
Miscellaneous Revenue	\$36,557	\$82,485	\$56,743	\$25,712	\$25,712	0.00%
Charges for Services	\$929,752	\$881,674	\$1,809,040	\$740,071	\$740,071	0.00%
Revenue from Commonwealth	\$18,528,115	\$18,331,516	\$18,049,330	\$22,409,417	\$24,957,471	11.37%
Transfers In	\$0	\$0	\$82,277	\$0	\$0	-
Total Designated Funding Sources	\$26,103,005	\$24,375,151	\$27,219,236	\$29,915,134	\$32,822,268	9.72%
Net General Tax Support	\$20,826,525	\$24,761,254	\$26,651,602	\$35,920,051	\$42,086,133	17.17%
Net General Tax Support	44.38%	50.39%	49.47%	54.56%	56.18%	

In FY21, \$42K was incorrectly charged to Administrative Services program rather than Early Intervention Services for Infants and Toddlers program.

Staff History by Program





Future Outlook

Crisis Receiving Center (CRC) and Community Services (CS) Programs – CS is thrilled to be moving forward with the initial phase of a Regional CRC in Prince William County (PWC). The CRC is based on the Crisis NOW Model and will provide treatment and services for those experiencing mental health and substance use crises. Supported and championed by the Board of County Supervisors (BOCS) and aligned with the Department of Behavioral Health and Developmental Services (DBHDS) crisis services transformation, the CRC with all phases completed aims to serve adults and adolescents in crisis by providing 23-hour observation services and crisis stabilization residential beds. Over the next, estimated 18 months, several PWC agencies will collaborate to design and build out leased property in Woodbridge, VA. CS will, also, be involved in awarding a contract to an experienced vendor to operate the program. Several CS treatment programs and services will move to the building to offer services and supports for individuals needing assistance beyond the CRC; this will, also, assist with space needs for the agency. The CRC will not only assist those experiencing a behavioral health crisis with walk-in treatment in their community but will prioritize those individuals under emergency custody of law enforcement, thereby minimizing the workload of law enforcement.

Access to Services, Supports, and Treatment – The demand for treatment services has ramped up during the pandemic with depression and anxiety rising 25% globally. In addition, the spikes in fentanyl-related overdoses, especially for schoolaged youth increased nationally by 6.1%. CS has been responding to this increased demand for services by expanding the continuum of community-based services to include opening a Trauma Treatment Program in FY23; expanding Behavioral Health, Wellness, and Prevention Services; increasing access to service coordination for individuals with Developmental Disabilities; and increasing specialty treatment services for infants and toddlers with developmental delays, yet there is an increasing need and increasing wait for obtaining these services.

Improve Workforce Retention and Development – A national workforce shortage has left behavioral health and developmental disability treatment providers struggling to meet increased demands for services and the ability to recruit and retain qualified employees is becoming more difficult. The Covid-19 pandemic exacerbated the workforce shortage in these areas and the need for behavioral health counselors is projected to grow 23% from 2020-2030, which is much faster than the average for all occupations. There are 14 child and adolescent psychiatrists in VA to support every 100,000 people under 18. The number one goal of the Commissioner of DBHDS is to strengthen the workforce systemwide. Studies have identified a systems approach is needed that will ensure salaries are competitive and include incentives to work in the public sector; further develop career pipelines; address regulatory and licensing barriers and burdens; and address safety and work/life balance concerns. CS will continue working on initiatives to help recruit and retain qualified staff who have a passion to work in the community providing developmental disability services and supports and behavioral health treatment.

Increased Data Requirements – Over the past several years, the state agency, DBHDS has developed multi-independent databases that have created duplicative data entry and substantial manual reporting requirements which have added to existing significant administrative burdens. Further, as data requests increase, the multisystem platforms and interoperability needs increase which require more specialized information technology assistance involving additional technology and data analytics to meet reporting requirements, respond promptly to audits, and assist staff with having the most appropriate technological devices by which to perform their administrative tasks and take required trainings. Currently, CS technology needs are served centrally through PWC Department of Information Technology. The increasing needs require additional support to address needed devices, upgrading electronic health records, state and county data reporting, and these multisystem platforms in a highly flexible, responsive time frame, and with specific knowledge of the CS environment.

Funding for Opioid Prevention and Treatment – While the overdose rate per 100,000 population was lower in 2022 (6.1%) than in 2021 (6.3%), it remains higher than any single year from 2015–2019. Individuals of all ages are impacted by opioid abuse. As the County begins receiving settlement distributions from pharmaceutical distributors and opioid manufacturers, CS will be working with other County agencies on using these funds to promote prevention, harm reduction efforts, and treatment to combat this crisis. The Opioid Abatement Authority, established in 2021 by the General Assembly will provide additional and ongoing local, regional, and state opioid abatement efforts. CS will continue to provide Medication Assisted Treatment (MAT), outpatient services and assist individuals in getting the higher levels of treatment and care that they need. Prevention efforts will also increase public awareness around illicit drugs being laced with fentanyl and harm reduction techniques. MAT and Medications for Opioid Use Disorders are evidence-based treatments that CS will continue to expand in the community.

General Overview

- **A.** Reconcile the FY2023 CS Budget to the State Performance Contract Each year, CS completes a budget reconciliation to match revenue and expenditure adjustments that become known after the County's annual budget is adopted, specifically the reconciliation of state and federal revenues to the state performance contract. During FY23, the reconciliation provided an increase in ongoing revenue support of \$559,967. The ongoing funding supports the following programs:
 - Early Intervention services to meet development needs of children from birth to age three and their families.
 - Individuals with serious mental illness, substance abuse disorders or serious emotional disturbance, in developing or regaining independent living skills in support of long-term recovery.
 - Greater Prince William County Prevention Coalition to expand trauma informed community network support for behavioral health, suicide, alcohol, tobacco, and gambling.

There was also an increase in ongoing budgeted Medicaid revenues to ensure no County funding is necessary to fully-fund these initiatives. The funding created 4.00 FTEs including (1.00 FTE) Assistant Director of Human Services, and (3.00 FTEs) Senior Clinical Services Caseworkers. This item was approved by <u>BOCS Resolution 22-559</u>. There is no impact on local general fund tax support.

- **B.** Adjustment to Existing Positions The FY2024 Budget includes a reduction of 0.50 FTE to reconcile total positions supported by state and federal revenues as approved in <u>BOCS Resolution 21-431</u>.
- **C.** Fleet Maintenance Redistribution Funding to support gasoline and vehicle maintenance was redistributed to agencies in an effort to reflect historical actuals more accurately. This reallocation of existing budget increases the CS FY2024 Budget by \$28,229.
- **D. CS Consolidation of Programs and Reorganization** CS reorganized the program structure and consolidated thirteen programs to eight programs. All services remain the same. Due to the change, there is 16.50 FTE increase to program Administrative Services to centralize administrative services causing the program budget to increase by \$4.6M. This CS reorganization has no net impact on the budget. Centralized administrative services will allow for an equal allocation across all services to meet accurate accounting, reporting, and financial monitoring for all stakeholders.

Additionally, during the program reorganization process, \$2.0M for Crisis Stabilization Services is moved from the Mental Health and Co-Occurring Community Support Services program to the Emergency, Access, and Trauma Services program to be combined with Emergency Services activities. This re-aligns the local County budget with the state DBHDS Performance Contract. This reorganization has no net impact on the CS budget, with no impact on the services provided through this program.

	FY2024 Budg	et Progra	m Changes	
# of Programs	Programs - FY2023 Budget		# of Programs	Programs - FY2024 Budget
1	Administrative Services	>>>	1	Administrative Services
2	Early Intervention	>>>	2	Early Intervention Services for Infants and Toddlers
3	Medical Services	>>>	3	Medical Services
4	Access and Emergency Services	>>>	4	Emergency, Access, and Trauma Services
5	Youth Substance Abuse and Mental Health Services	>>>	5	Youth Behavioral Health and Recovery Services
6 7 8	DD Day Support/Employment Services ID/DD Day Residential Services DD Case Management	>>>	6	Developmental Disability Services
9 10	MH Day Support & Employment Services MH Residential Services	>>>	7	Mental Health and Co-Occurring Community Support Services
11	Clinical Behavioral Health Program (CBHP)			
12	Comprehensive Outpatient Recovery Program (CORP)	>>>	8	Adult Behavioral Health and Recovery Services
13	Drug Offender Recovery Services (DORS)			

- **E.** Revenue Increase for Shared Services (City) Billings The billings represent reimbursement from the City of Manassas and Manassas Park for services rendered in the previous year. Services rendered include activities within public safety, community development, and human services functional areas. Amounts are calculated using an annual cost allocation report. As a result of the annual report, the CS allocation Increased \$247,167.
- **F.** Additional Reconciliation of State Performance Contract Funds On February 28, 2023, the BOCS approved BOCS Resolution 23-095 which increased the CS FY23 Budget in the amount of \$2,100,000 in ongoing state funding. In FY23, state funds were appropriated to support the CRC capital project for youth program startup and facilities renovations. In FY24 and onwards these state funds will be budgeted and appropriated in the CS budget to support ongoing adolescent CRC short-term residential and 23-hour observation crisis services to serve youth ages 14-18. An Assistant Director of Human Services for Youth Behavioral Health and Recovery Services (1.00 FTE) was created to support ongoing youth operations. There is no impact on local general fund tax support.
- **G.** Base Budget Shift from CS to Criminal Justice Services (CJS) for Intensive Supervision and Treatment for Sex Offenders program For efficient business management and accurate accounting, \$55,000 is shifted from CS to CJS for the sex offender treatment program. The program services include psych evaluations, assessments, and supervision for post-adjudication misdemeanor offenders. In the past, CS was managing the budget, encumbrances, and payments for these services.

Program Summary

Administrative Services

The responsibility of Administrative Services is to work with the CS staff, community, and governmental stakeholders to ensure the daily operations and service infrastructure supports are effective and efficient to best meet the community needs. It includes leadership and management oversight, accounts payable, receivable, and procurement, business administration, human resources, information systems, quality improvement and control, and business support.

Key Measures	FY20 Actuals				
Change in fee revenue received from prior fiscal year	3.7%	17%	3.5%	5%	5%
Customers rating services as helpful	92%	90%	92%	90%	90%

Program Activities & Workload Measures (Dollar amounts expressed in thousands)	FY20 Actuals		FY22 Actuals		FY24 Adopted
Accounting & Procurement	\$1,815	\$1,918	\$1,919	\$1,695	\$1,849
Fees collected	\$7.7M	\$8.5M	\$8.8M	\$8.2M	\$8.3M
Management Information Systems	\$1,115	\$1,311	\$1,276	\$681	\$2,977
MIS customers rating service as helpful	92%	90%	92%	90%	90%
Leadership & Management Oversight	\$2,265	\$2,569	\$2,848	\$2,874	\$5,066
Total agency individuals served	9,275	10,699	11,294	10,500	11,500

In FY21, \$42K was incorrectly charged to Administrative Services program rather than Early Intervention program.

Adult Behavioral Health and Recovery Services

Provides outpatient treatment services, case management, comprehensive drug treatment services to adults and their families for individuals with a behavioral health, mental health, substance use, or co-occurring disorder. Services include individual, family, and group therapy, evaluations, case coordination, case management, peer support, community referrals and comprehensive drug treatment services to adults ages 18 and older diagnosed with a serious mental illness (SMI) and/or co-occurring disorders and involve the client's family as clinically indicated. Case Management (CM) services identify and link individuals to community resources that facilitate community integration. Outpatient treatment services provide evidence-based, trauma-informed, culturally competent, individual and group therapy. A comprehensive drug treatment continuum of care provides justice-involved individuals who have the most severe drug dependence disorders recovery services including assessments, MAT, high intensity drug trafficking area (HIDTA) services, residential and jail-based treatment, and family support to avoid gaps that result in relapse and recidivism through close collaboration with the Adult Detention Center (ADC) and probation agencies.

Key Measures	FY20 Actuals		FY22 Actuals	FY23 Adopted	FY24 Adopted
Individuals enrolled in CBHP services that maintain or improve in functioning	36%	56%	64%	40%	65%
Individuals satisfied with CBHP services received	86%	93%	93%	90%	90%
Individuals who are substance free upon completion of CORP treatment	74%	75%	77%	75%	75%
Criminal Justice individuals, receiving DORS services, who stop using drugs	95%	96%	97%	95%	95%
Criminal Justice individuals who stop using drugs	45%	42%	81%	45%	45%
Individuals who do not return to the ADC DORS program within 3 years	75%	82%	64%	75%	75%

Program Activities & Workload Measures (Dollar amounts expressed in thousands)	FY20 Actuals	FY21 Actuals	FY22 Actuals	FY23 Adopted	FY24 Adopted
Clinical Behavioral Health Program (CBHP), SMI Adult & Family Services	\$3,336	\$3,526	\$3,952	\$4,358	\$4,305
Individuals served by CBHP	1,751	1,747	1,121	1,760	1,150
Distinct visits in CBHP	-	-	37,865	-	37,000
Comprehensive Outpatient Recovery Program (CORP), Adult Substance Abuse Services	\$2,449	\$2,841	\$2,968	\$3,893	\$3,893
Individuals served by CORP	722	826	796	850	800
Individuals served by CORP groups	-	-	498	-	475
Drug Offender Recovery Services (DORS)	\$1,099	\$1,187	\$1,146	\$1,193	\$1,270
Individuals served in ADC	144	68	110	100	100
DORS Community Criminal Justice Services	\$462	\$362	\$405	\$685	\$695
HIDTA individuals served	72	56	73	60	-
Individuals served in DORS outpatient	-	-	158	-	100
DORS assessments completed	-	-	184	-	125
Individuals served in Medication Assisted Treatment	-	-	223	-	200
Grade point average improvements for HIDTA prevention clients	NR	NR	66%	70%	70%
Reduced school absences for HIDTA prevention clients	NR	NR	56%	40%	40%

Developmental Disability Services

Provides case management, support, and connections to community resources and services for individuals who have a developmental disability (DD) and may need assistance accessing supports to assist them in remaining independent in their community. These mandated services provide supports to all ages with priority to adults and those with a DD waiver to maintain a healthy and safe life. For adults with DD who cannot live independently, licensed vendors in the community who accept DD waivers provide 24-hour residential care to assist them with general day care, day program services to enable individuals to acquire, improve or maintain functional abilities, health care, skill development, and community integration, or obtain competitive employment.

Key Measures	FY20 Actuals				
Individuals successfully maintained in the community through DS & SE services	94%	90%	99%	96%	97%
Individuals who are satisfied with DS & SE services	90%	90%	87%	98%	95%
Family satisfaction for individuals served by Residential Services	94%	97%	97%	95%	95%
Individuals successfully maintained in the community through CM services	97%	97%	99%	98%	97%
Family satisfaction for individuals served by CM services	90%	97%	94%	93%	94%

Program Activities & Workload Measures (Dollar amounts expressed in thousands)	FY20 Actuals		FY22 Actuals	FY23 Adopted	FY24 Adopted
Day Care Services	\$668	\$698	\$968	\$584	\$798
Individuals served by Day Care Services	48	31	37	85	48
Day Support Services	\$857	\$761	\$709	\$1,313	\$1,400
Individuals served by Day Support Services	35	16	30	55	55
Supported Employment Services	\$857	\$697	\$258	\$1,906	\$1,377
Individuals served by Supported Employment Services	80	58	58	92	70
Group Home Services	\$259	\$256	\$280	\$120	\$186
Individuals served by Group Home Services	250	254	256	255	255
Individuals funded by Community Services in group homes	-	-	3	-	3
Supported Living Services	\$682	\$643	\$199	\$451	\$427
Individuals served by Supported Living Services	21	21	13	30	15
Case Management Services	\$4,707	\$5,537	\$6,136	\$7,038	\$7,468
Individuals served by Case Management Services	1,051	1,131	1,338	1,390	1,400

Early Intervention Services for Infants and Toddlers

Early Intervention (EI) services are provided by Virginia licensed and Part C certified physical therapists, occupational therapists, speech-language pathologists, early childhood special educators, social workers, and early intervention assistants/service coordinators for infants and toddlers, birth to three years old who have a disability, developmental delay or are displaying atypical development. Services are intended to help infants and toddlers develop the necessary motor, communication, social-emotional, feeding and play skills to be an active member of their family and community. Supports and services are provided to assist parents and other caregivers to help their child learn and grow through everyday activities.

Key Measures	FY20 Actuals			FY23 Adopted	FY24 Adopted
Early intervention services individuals who do not require special education	53%	49%	48%	52%	50%
Families report services helped their child develop & learn	89%	85%	87%	85%	85%
Children demonstrating improved acquisition and use of knowledge and skills	61%	53%	62%	60%	-

Program Activities & Workload Measures (Dollar amounts expressed in thousands)	FY20 Actuals				FY24 Adopted
Assessment and Service Coordination	\$1,909	\$2,108	\$2,276	\$2,611	\$2,747
Infants, toddlers, and families served by Assessment and Service Coordination	1,310	1,472	1,689	1,400	1,500
Therapeutic and Educational Services	\$2,422	\$2,639	\$2,592	\$2,911	\$3,600
Infants, toddlers, and families served by Therapeutic and Educational Services	1,040	1,129	1,317	1,100	1,300
Families satisfied with El services	-	91%	97%	-	94%

In FY21, \$42K was incorrectly charged to Administrative Services program rather than Early Intervention program.

Emergency, Access, and Trauma Services

Serves as the point of entry for all behavioral health services within CS. Provides state-mandated 24-hour crisis intervention services, as well as Same Day Access for comprehensive assessments for residents seeking CS services. Provides time-limited evidence-based trauma treatment for youth and adults. Teams with law enforcement in providing co-response to those experiencing behavioral health crisis in the community. Provides pre-screening assessments and discharge planning for individuals hospitalized in state psychiatric hospitals.

Key Measures	FY20 Actuals				
Individuals who received Emergency Services within 1 hour	-	-	96%	-	95%
Individuals meeting criteria for services	-	-	47%	-	50%
Cases diverted from inpatient treatment	32%	60%	52%	50%	-
Emergency Services clients satisfied with services received*	95%	NR	93%	95%	-

^{*}Due to COVID-19 health concerns in FY21, the standard process in which CS gathers individual satisfaction feedback was put on hold.

Program Activities & Workload Measures (Dollar amounts expressed in thousands)	FY20 Actuals		FY22 Actuals		
Access	\$1,188	\$1,323	\$1,217	\$4,416	\$1,546
Access assessments completed	1,613	1,831	1,659	2,325	2,000
Individuals triaged for services within the same day	-	-	2,150	-	2,320
Individuals offered an appointment within 10 days	-	-	752	-	1,000
Emergency Services*	\$4,255	\$4,746	\$5,349	\$6,835	\$13,778
Emergency Services individuals served	2,439	2,351	2,426	2,400	2,400
Individuals served by crisis stabilization services	205	97	64	200	250

^{*}Funding for Crisis Stabilization Services is moved from Mental Health and Co-Occurring Community Support Services to Emergency Services.

Medical Services

Provides psychiatric evaluations and assessments, medication management, outpatient addiction medicine otherwise known as MAT, psychiatric hospital preadmission medical screenings, crisis stabilization, risk assessments, jail-based forensic services, public health and infectious disease control, and assessments as to the need for medical follow-up to clients. Nursing staff maintains medication records and inventory, conduct primary care screenings, and provide patient care as directed by psychiatrists. Medical Services also provides medical consultation and coordination with other medical providers, staff, and clients regarding care coordination, as well as education to staff and clients regarding psychotropic medication.

Key Measures	FY20 Actuals	FY21 Actuals	FY22 Actuals	FY23 Adopted	
Individuals satisfied with Medical Services	93%	90%	81%	90%	90%

Program Activities & Workload Measures (Dollar amounts expressed in thousands)	FY20 Actuals				
Medical Services	\$2,842	\$2,964	\$2,990	\$4,386	\$4,614
Individuals served by Medical Services	2,119	2,241	2,110	2,550	2,550

Mental Health and Co-Occurring Community Support Services

Assists adults with serious mental illnesses to remain as independent as possible in the community by providing directly or contracting for a variety of levels of clinical services to assist them in maintaining their level of functioning; or connect with vendors who provide 24-hour residential care for those adults who cannot remain outside of institutional settings without that level of support. Provides psychosocial rehabilitation services and/or supported employment services with a service goal to help persons with severe mental illness, cognitive disabilities, and/or co-occurring disorders to improve their capabilities and the quality of their lives by providing meaningful opportunities to integrate in and contribute to their community of choice.

Key Measures	FY20 Actuals		FY22 Actuals	FY23 Adopted	FY24 Adopted
Individuals who maintain employment for more than 90 days	92%	86%	80%	89%	89%
Psychosocial rehabilitation individuals who maintain or improve functioning lvl	94%	91%	89%	93%	93%
Vocational Services individuals reporting satisfaction with services	94%	93%	94%	95%	94%
Individuals successfully engaged in services and maintained in the community	96%	98%	94%	95%	96%
Individuals expressing satisfaction with MHRS service provided	86%	87%	87%	90%	90%

Program Activities & Workload Measures (Dollar amounts expressed in thousands)	FY20 Actuals		FY22 Actuals	FY23 Adopted	FY24 Adopted
Day Support Services	\$1,129	\$1,253	\$1,292	\$1,356	\$1,449
Individuals served by MH day support services	97	84	96	100	105
Employment Services	\$712	\$773	\$806	\$829	\$955
Individuals served by MH employment services	226	177	178	252	252
Supportive Residential In-Home Services	\$2,489	\$2,647	\$2,502	\$3,179	\$3,233
Individuals served by supportive residential in-home services	139	152	150	150	150
Intensive Residential Services	\$1,358	\$714	\$115	\$1,518	\$1,503
Individuals served in group homes	30	15	6	15	30
Crisis Stabilization Services*	\$1,921	\$995	\$4,401	\$1,947	\$0
Individuals served by crisis stabilization services	205	97	64	200	-
Intensive Community Treatment Services	\$1,641	\$1,752	\$1,653	\$2,038	\$2,210
Individuals served by Intensive Community Treatment services	86	107	80	115	95
Young Adult Services	\$853	\$923	\$999	\$1,484	\$1,689
Individuals served in Young Adult services	46	47	50	50	50

 $^{{\}bf *Funding \ for \ Crisis \ Stabilization \ Services \ is \ moved \ from \ Mental \ Health \ and \ Co-Occurring \ Community \ Support \ Services \ to \ Emergency \ Services.}$

Youth Behavioral Health and Recovery Services

Provides services to youth and their families 18 years or younger or who are still enrolled in high school and are experiencing mental health, substance use, or co-occurring issues. Services provided include assessment, individual, family and group therapy, crisis intervention, hospital discharge planning, case management, behavioral health and wellness, and HIDTA prevention with a goal to support children, adolescents, and families address the behavioral health challenges they face and gain the skills needed to build a bright future. Services are provided in local public high schools, criminal justice agencies, and in the community.

Key Measures	FY20 Actuals				
Youth completing treatment who maintained or improved in functioning	73%	48%	78%	75%	75%
Youth satisfied with services	96%	93%	95%	95%	95%
Teenagers who stop using drugs/alcohol	64%	79%	87%	65%	85%

Program Activities & Workload Measures (Dollar amounts expressed in thousands)	FY20 Actuals				
Behavioral Health Wellness Services	\$295	\$254	\$576	\$732	\$666
Prevention training and webinar participants	519	1,380	1,529	400	1,500
Case Management	\$581	\$662	\$722	\$833	\$881
Youth served by case management	301	292	281	335	295
Outpatient Services	\$2,765	\$3,079	\$3,317	\$3,969	\$4,328
Youth served by New Horizons treatment services	1,227	923	1,306	1,657	1,227