EXHIBIT NO. 1

City of Alexandria, Virginia

MEMORANDUM

DATE: DECEMBER 7, 2006

TO: THE HONORABLE MAYOR AND MEMBERS OF CITY COUNCIL

FROM: JAMES K. HARTMANN, CITY MANAGER

SUBJECT: ALEXANDRIA COMMUNITY SERVICES BOARD FY 2006 ANNUAL REPORT

ISSUE: Alexandria Community Services Board’s FY 2006 Annual Report.

RECOMMENDATION: That City Council receive the Alexandria Community Services Board’s FY 2006 Annual Report.

DISCUSSION: The Alexandria Community Services Board (CSB) consists of a group of 16 volunteers appointed to oversee the City’s publicly funded mental health, mental retardation and substance abuse services and provide policy direction to the Department of Mental Health, Mental Retardation and Substance Abuse (Department).

The Department’s operational structure consists of Acute Care Services, which provides time-limited services like emergency care and short-term outpatient care; Extended Care Services, which provides long-term services like residential and vocational programs; Child, Family and Prevention Services, which provides treatment and prevention programs to youth and families; and Administration, which includes finance, information management, human resources, quality assurance and risk management.

Included in the FY 2006 Annual Report are: the CSB’s Strategic Plan, an overview of revenues and expenditures and highlights of accomplishments, including:

- **CSB expenditures totaled $24.83 million dollars. CSB programs served 3,682 Alexandrians** with mental illness, mental retardation or substance dependency, most of whom received services in more than one program.

- **Demographics showed that approximately 46% of CSB consumers were African American. Whites comprised just over 31% of consumers, Hispanics made up 18% of consumers, and other races made up 5% of CSB consumers. Of these consumers, over 85% earned less than $25,000 annually.**
• The Alexandria Board of Architectural Review (B.A.R.) approved the CSB’s application for exterior changes to the building that will house the Safe Haven Program. The Safe Haven Program will be partially funded by the U.S. Department of Housing and Urban Development and will provide a safe place to live for homeless persons who have mental health and sometimes co-occurring substance use disorders. City residents appealed the B.A.R. decision; however, the City Council unanimously voted to deny the appeal. Although a lawsuit over the Safe Haven Program was filed by a resident, the CSB continues to work on the project in order to meet the needs of the vulnerable homeless and disabled Alexandrians who may otherwise remain unserved.

• Emergency Services (ES) responded to requests for services for 761 individuals. ES provides 24-hour telephone and face-to-face crisis intervention services to individuals having a serious mental health and/or substance abuse problem. Clinicians respond to emergency calls from persons in crisis or from others in the community (e.g., family members, police, fire, schools and other community groups) about a person in crisis.

• The Child Assessment and Treatment Center for Healthy Kids (CATCH) opened to provide assessment and treatment services for children ages 0-5 who are victims of child abuse and neglect. The Center addresses mental health, medical, developmental and social services for the children involved. This is a collaboration between the CSB, the Health Department and the Department of Human Services.

• The CSB was awarded $880,000 in grants to provide a variety of programs and services. The two most significant of these grants include one for $110,000 in ongoing annual funds to provide mental health services to youth in the Northern Virginia Juvenile Detention Center and a System of Care grant for $475,000 in ongoing annual funds to expand capacity to serve youth in the most natural setting and to strengthen the system of care for children with serious emotional problems. Ultimately, less reliance on out-of-state residential care is expected to save $72,000 a year for each child who remains in the community.

• The Cultural Competence and Diversity Committee was reconstituted. The Committee continued the implementation of the Cultural Competence Plan with focus on increasing staff diversity and staff sensitivity to cultural diversity, strengthening ties with community organizations that serve diverse populations, and enhancing the CSB environment to create cultural appeal.

ATTACHMENT: Alexandria Community Services Board FY 2006 Annual Report

STAFF: Michael Gilmore, Ph.D., Executive Director, Alexandria Community Services Board
annual report
a year in review

fiscal year 2006
July 1, 2005-June 30, 2006

Department of Mental Health, Mental Retardation and Substance Abuse
A Message from the Chair and the Executive Director 1
About the CSB, Vision, Mission, Values and Strategic Plan 2
Financial Information 4
Consumer, City and Employee Demographics 5
Persons Served by Extended Care Services 6
Highlights of Extended Care Services 7
Persons Served by Acute and Emergency Care Services 8
Highlights of Acute Care and Emergency Services 9
Highlights of Child, Family and Prevention Services And Persons Served 10
Highlights of Volunteer Programs, Training and Special Projects in Child, Family and Prevention Services 11
Highlights of Administration 12
Outstanding Employees 13
Program Site Directory Back cover
a message from the chair and executive director

It is our pleasure to present you with an overview of the Alexandria Community Services Board’s activities during Fiscal Year 2006. The pages of this report highlight our financial information and our accomplishments, and provide a glimpse of the treatment outcomes achieved by the people we serve as they move toward recovery and independence. With the support of staff, volunteers, private contractors and the Alexandria City Council, we served 3,682 persons with mental illness, mental retardation and substance dependency.

We are grateful to our staff for their invaluable services and the government officials who have supported our work, and we are continually inspired by the determination of our consumers and their families. The CSB is thriving and will continue to make a difference in the lives of Alexandrians. It is an honor to be able to guide our community’s behavioral health services. We encourage and appreciate any comments or suggestions.

Mary Riley, Chair
Michael Gilmore, Ph.D., Executive Director

In Memoriam

David O’Brien was a member of the Alexandria CSB from March of 2002 until his untimely death in July of 2006. David was a kind and thoughtful man who was always armed with a smile and a nice word for others. He showed a strong dedication to serving persons with disabilities, in particular those with serious mental illness. David served as a board member to several organizations including the Mental Health Consumer Association, the National Alliance on Mental Illness and the Laurie Mitchell Employment Center. He was a counselor and mentor for Family TEAMWORK, and he worked diligently to increase the scope of recovery services offered in the region by serving on the Northern Virginia Regional Strategic Planning Partnership’s “Recovery Work Group.”

The CSB Board members and staff discovered that the often burdensome task of enhancing services was lightened by David’s delightful sense of humor and his personal goal of telling at least one joke at each Board meeting. David’s advocacy for persons with mental illness was cut short by his death. The CSB commends David O’Brien for his committed work and expresses its deepest appreciation for his efforts to improve the services offered in Alexandria.
about the alexandria csb

The Alexandria Community Services Board (CSB) was established in 1969 to set policy for and administer Alexandria’s publicly funded mental health, mental retardation and substance abuse services. The CSB is a group of citizen volunteers who are appointed by and report to the City Council.

In collaboration with the City Manager, the CSB selects an Executive Director who also serves as the Director of the City’s Department of Mental Health, Mental Retardation and Substance Abuse. Most of the CSB’s services are provided through the Department; however, the CSB also purchases services from private contractors. The Department has an administrative division and three operating divisions: Acute and Emergency Care Services, Extended Care Services, and Child, Family and Prevention Services.

vision, mission and values

The CSB’s vision is to achieve and maintain the optimal level of mental, emotional and behavioral health for all Alexandria residents. The mission is to provide effective and cost-efficient mental health, mental retardation and substance abuse prevention and treatment services that measurably improve the quality of life for Alexandria’s neediest residents. The CSB values:

- Promotion of each individual’s and family’s worth, dignity and right to reach full potential through self-determination, empowerment and recovery.
- Access to services without discrimination regardless of one’s ability to pay, language or cultural background.
- Cost-efficient and quality services based on ethical and innovative best practices that are proven to be effective.
- Prevention and early intervention services designed to lessen the negative effect of mental illness, mental retardation and substance abuse in the community.
- A qualified, diverse and motivated workforce.

Our youth are the future of this City. It is our job to see that they succeed, and that their families have the support they need. The City has a strong commitment to early childhood education, before and after school and healthy families programs that ensure that our children and their families are safe and healthy. This is a city government that cares.

-Mayor William D. Euille, 2006 State of the City Address
The CSB continues to strive to meet the following goals by the end of Fiscal Year 2009:

**Goal 1.** Operate high quality residential programs, including a Safe Haven, that will serve persons with the greatest residential service needs.

**Goal 2.** Meet the case management needs of existing consumers, as determined by steadily decreasing wait list numbers, positive responses to needs assessments and assignment of appropriate caseload size to staff.

**Goal 3.** Meet the mental health, mental retardation and substance abuse needs of the elderly residents of Alexandria, as evidenced by steadily declining wait list numbers, positive responses to needs assessments and assignment of appropriate caseload size to staff.

**Goal 4.** Determine through assessment of stakeholder satisfaction, consumer accessibility and satisfaction, and measures of cost-effectiveness whether child, family and prevention services should be provided by the Department, contracted to outside providers, or provided through a combination of the two.

**Goal 5.** Ensure that the inpatient psychiatric needs of Alexandria residents are met by working with the regional consortium of Community Services Boards, private providers, consumers and advocates.

**Goal 6.** Ensure that immigrant, refugee and other diverse populations have improved access to services as evidenced by stakeholder reports and needs assessments.

**Goal 7.** Provide quality mental health, mental retardation and substance abuse services with clear and consistent eligibility criteria and guidelines regarding the scope and intensity of services that will be provided and the length of time that services will be provided.

Highlights of the progress that has been made over the last fiscal year in achieving these goals are included in each of the Division sections that follow.

As mother and daughter we have seen the City accomplish many things. In particular, it has changed our attitudes about individuals with special needs. The group home across the street from our house has enriched our lives. Please make sure we take care of those who will be served at the future Safe Haven and who cannot always speak for themselves. We will be the ones who benefit.

- Rochelle Givens, Letter to City Council
The numbers below reflect the CSB’s activities for Fiscal Year 2006. The most significant change from Fiscal Year 2005 is the creation of the Child, Family and Prevention Services division from what had previously been reported between three divisions: Prevention, Acute Care and Extended Care.

In addition to providing services through the Department of Mental Health, Mental Retardation and Substance Abuse, the CSB also purchases services from the private sector for its consumers. Contracted consumer services, primarily vocational, residential and early intervention, cost $871,563 in FY 2006 and represented 3.5% of the CSB’s total expenditures.

### FY 2006 Revenue and Expenditures

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<tr>
<th>Revenue Source</th>
<th>$ (millions)</th>
<th>%</th>
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<tbody>
<tr>
<td>City of Alexandria</td>
<td>14.23</td>
<td>57.3%</td>
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<tr>
<td>Commonwealth of Virginia</td>
<td>3.58</td>
<td>14.4%</td>
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<tr>
<td>Medicaid</td>
<td>2.71</td>
<td>10.9%</td>
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<tr>
<td>Federal Government</td>
<td>2.13</td>
<td>8.6%</td>
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<tr>
<td>Consumer &amp; Insurance Fees</td>
<td>2.15</td>
<td>8.7%</td>
</tr>
<tr>
<td>Other</td>
<td>0.03</td>
<td>0.1%</td>
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<tr>
<td><strong>Total</strong></td>
<td><strong>24.83</strong></td>
<td><strong>100.0%</strong></td>
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<table>
<thead>
<tr>
<th>Expenditures by Service Area</th>
<th>$ (millions)</th>
<th>%</th>
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<tbody>
<tr>
<td>Acute and Emergency Care</td>
<td>8.83</td>
<td>43.9%</td>
</tr>
<tr>
<td>Extended Care</td>
<td>12.57</td>
<td>51.0%</td>
</tr>
<tr>
<td>Child Family and Prevention</td>
<td>3.43</td>
<td>5.1%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>24.83</strong></td>
<td><strong>100.0%</strong></td>
</tr>
</tbody>
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1 Administration expenditures totaling $2,745,602 (11% of total expenditures) were allocated to the service divisions as overhead and are included in the division expenditures shown above. The numbers shown above do not include vehicle depreciation, information technology equipment replacement charges, and motor vehicle equipment replacement charges. Activities associated with the City’s shelter program and Medicaid waiver services provided by contract agencies are also not included above.
The CSB served 3,682 Alexandrians during FY 2006.

Because the CSB primarily serves people with low incomes, there is a discrepancy between the City’s median household income of $66,116 \(^1\) and that of CSB consumers. Nearly 39% of CSB consumers earned $4,999 or less annually. Approximately 23% earned between $5,000 and $9,999; 13% earned between $10,000 and $14,999; 13% earned between $15,000 and $24,999; and 12% earned $25,000 or more.

The racial make-up of CSB consumers is not reflective of the City population. Approximately 46% of consumers were African American, compared to 23% City-wide. Whites comprise 31% of consumers, compared to 60% City-wide. Hispanics, who are represented here within several racial categories and in “other,” made up nearly 18% of consumers, compared to 15% City-wide. Other races made up 5% of CSB consumers.

Nearly half (47%) of CSB consumers were aged 30-54, compared to 44% City-wide. Children made up 25% of consumers, compared to 18% City-wide. Of these child consumers, 13% were aged 10-19 and 12% were aged 0-9. Persons aged 20-29 comprised the next largest age group (16%), compared to 21% City-wide. Only 12% of consumers were age 55 or older compared to 17% City-wide.

Forty-two percent of Board consumers were female, compared to 52% City-wide, and 58% were male compared to 48% City-wide.

\(^1\) U.S. Bureau of Census American Community Survey

Race and Ethnicity of Full-time Board Staff:

- Asian 3%
- Black 54%
- White 35%
- Hispanic* 5%
- Other 3%

* Hispanics may also be represented within the other four non-Hispanic racial categories above.
**Persons Served by Extended Care Services**

**Case Management** coordinates services, monitors the care consumers receive from CSB programs and other agencies, and helps consumers maintain their entitlements. There were 378 persons served in mental health case management, 182 served in substance abuse case management and 128 in mental retardation case management.

**Day Support** provides daily support and rehabilitation for persons with mental illness or mental retardation. There were 173 persons who received mental health day support and 51 who received mental retardation day support.

**Vocational Services** helps people with disabilities develop job skills and obtain employment.

- *Individual Competitive Employment* helps people to find and maintain employment in the community. There were 38 persons with mental illness or mental retardation who participated.

- *Group-Supported Employment* enables groups of persons to work in the community with support and supervision. There were 13 persons with mental illness or mental retardation who participated.

- *Sheltered Employment* provides work at a discrete site, where consumers learn skills, work under the supervision of staff and earn wages. There were three persons with mental illness or mental retardation who participated.

**Residential Services** provides permanent or transitional living arrangements, support, supervision and training for persons with mental illness, mental retardation or for those who are recovering from substance dependency.

- *Group homes* provided housing, training, support and supervision to 96 people.

- *Supervised apartments* provided housing and support services to 125 people.

In *Contracted Residential Treatment*, the CSB pays for a person to go to a live-in treatment facility for substance dependency. There were 38 persons who received contracted residential treatment.

In *Supported Living*, persons live in non-CSB residences while receiving drop-in support from CSB staff who assist them with daily living skills. Supported Living served 74 persons with mental illness or mental retardation.
highlights of extended care services

The Alexandria Board of Architectural Review (B.A.R.) approved the CSB’s application for exterior changes to the building that will house the Safe Haven Program. The Safe Haven will be partially funded by the U.S. Department of Housing and Urban Development and will provide a safe place to live for homeless persons who have mental health and sometimes co-occurring substance use disorders. City residents appealed the B.A.R. decision; however, the City Council unanimously voted to deny the appeal. Although a lawsuit over the Safe Haven was filed by a resident, the CSB continues to work on the project in order to meet the needs of the vulnerable homeless and disabled Alexandrians who may otherwise remain unserved.

The psychosocial rehabilitation program, the West End Club, has flourished during its second year at the new location. Many new groups have been formed, including a Mental Health Education Group, run by former CSB board member Jack Seed, M.D.; a member-run Craft and Socialization Group; and Budgeting, Peer Support, Goal Setting and Communication groups. The number of Clubhouse members increased to 173 people (up from 158 last fiscal year) and expected service hours were exceeded by 26%.

A work group was developed to evaluate whether current case management practices are meeting consumer needs. The group is examining program eligibility requirements, staff caseload size, consumer wait lists, caseload models and service statistics and making comparisons with other CSBs and industry standards. The analysis will guide the allocation of case management resources to ensure that the highest quality services are being delivered with the greatest possible efficiency.

The Residential Program and the Art Institute of Washington continued a partnership through which a team of interior design students worked with CSB staff in the beautification of a group home. The volunteer designers redecorated the New Hope Group Home using existing pieces and new furnishings. On a slim budget, the dining and living areas of the home were transformed into inviting settings for the seven residents to enjoy. A second group of students from the Catholic Work Camp volunteered to stain the fences of two CSB group homes.

Improved residential fee collection led to a 15% increase in revenue from payments received from consumers of group homes and apartments. In a joint effort between clinical and administrative staff, timely payment was enforced. As consumers understand the importance of budgeting and timely payments, they acquire skills that can enable them to consider more independent housing options in the future.
Outpatient Mental Health and Substance Abuse Services provides individual, group and family therapy, and psychological testing. There were 731 persons who received mental health outpatient services and 772 persons who received substance abuse outpatient services.

Emergency Services (ES) provides 24 hour a day telephone and face-to-face crisis intervention services to individuals having a serious mental health and/or substance abuse problem. Clinicians respond to emergency calls from persons in crisis or from others in the community e.g., family members, police, fire, schools, clergy and other community organizations regarding a person in crisis. ES responded to requests for services for 761 individuals.

Adult Detention Center Services help inmates adjust to incarceration and provides therapeutic programs. The Sober Living Unit (SLU) helps inmates addicted to drugs and alcohol develop skills for a life of sobriety. The Critical Care Unit stabilizes persons with psychiatric crises, and staff working in the general jail population provide individual and group counseling. There were 145 people who received substance abuse services, 85 who received mental health services, and 232 inmates who received emergency mental health care.

Social Detoxification provides a short-term treatment environment for persons who are withdrawing from alcohol or drugs and enables them to accept further treatment as appropriate. People may come to the Detox Center voluntarily or the police may bring persons to the Detox Center in lieu of incarceration. There were 502 people served in the Detoxification program.

Methadone Maintenance helps adults stop using narcotics by prescribing and carefully monitoring methadone, a synthetic narcotic, which does not produce a "high" and minimizes the discomfort of withdrawal. Consumers are expected to participate in regular counseling sessions and abstain from all illegal drugs and alcohol use while in the program. There were 133 persons who received methadone treatment.

The Psychiatric Services Unit coordinates psychiatric and nursing services. Medical and nursing staff work to maximize consumers’ functioning through the use of medication, monitoring and education. The Unit served 1,253 consumers and provided 5,177 hours of service (109% of the goal).

There are times in a man's life when he's most thankful for being alive. Right now is that time in my life. I have dreams and aspirations I couldn't see earlier when I didn't love myself. I think my mother would be smiling now knowing I have a chance.

-Sober Living Unit Participant (Adult Detention Center)
Outpatient Mental Health staff began offering Anger Management groups. Other groups offered by the team included a Women's Therapy Group, a Men's Therapy Group, a Trauma Recovery Group for Spanish-speaking women and Dialectical Behavior Therapy, an empirically validated treatment approach for borderline personality disorder, anxiety and other disorders.

Case management and psychiatric staff helped consumers navigate the new Medicare Part D Program. Staff helped over 80 consumers understand the process, evaluate their options and enroll in the most appropriate prescription benefit plan to meet their needs.

The Methadone Program received its second three-year accreditation from CARF. The program received “no recommendations” from CARF during the survey, indicating that the program was in complete conformity with standards. This is an honor shared by only 3% of all programs in the United States.

Services of the Substance Abuse Day Support Program were combined with the Outpatient Substance Abuse Team. As a result, the team is able to offer nine additional groups, including more evening groups, to consumers.

The Outpatient Substance Abuse Team incorporated a new treatment method into their programming. The Matrix Model is a sixteen-week intensive substance abuse treatment program that has been shown to be particularly effective with persons addicted to stimulants. The program includes motivational and cognitive behavioral strategies, as well as an educational component aimed at teaching participants about the effects of addiction on the brain. Participants' family members are encouraged to attend family educational groups to better understand why their loved ones relapse.

The treatment schedule in Detox underwent many changes to include adding an health education group, 12 step meetings hosted by NA and AA, more education and support groups, and more recreational activities like art and walking. In addition, services of a physician are now regularly available to Detox consumers.

The Sober Living Unit staff worked with the Sheriff's Office to start a GED program for consumers being treated in the Men’s Sober Living Unit at the Alexandria Detention Center. A SLU consumer serves as an assistant teacher.

Staff in Emergency Services received several intensive trainings including a three-day training in Critical Incident Stress Management by the International Critical Incident Stress Foundation, and training in Disaster Mental Health offered by the American Red Cross. Two staff persons participated with the Alexandria Police Department's Hostage Negotiations Team.

I was able to say what was on my mind without being judged. I was able to cry without being yelled at. With the help I received here I was finally able to tell my dad my feelings toward him and the damage he has caused me. I am healing.

-Mental Health Consumer

Dr. Kurt Brandt, Substance Abuse Medical Supervisor
The Child Assessment and Treatment Center for Healthy Kids (CATCH) opened to provide assessment and treatment services for children ages 0–5 who are victims of child abuse and neglect. The Center addresses mental health, medical, developmental and social services for the children involved. This is a collaboration between the CSB, the Health Department and the Department of Human Services.

The Home-Based Team created a play room for use in developing parent-child bonding, during therapeutic visitation between children and parents who have temporarily lost custody. The play room also allows parents to observe how their children play, which is particularly useful for traumatized children. A mirror in the room allows clinicians or parents to observe without being present in the room.

Development of a new Child Advocacy Center (CAC) is well underway. The CAC is a child-friendly environment where children who are victims or witnesses of crimes will be interviewed and will receive services along with non-offender family members. Two private foundations are supporting the CAC, which will open in late 2006. Prevention and treatment services will also be available.

The Substance Abuse Prevention Team provided 17 different programs in City public schools and other community locations including: Get Real About Violence, Kids are Terrific Summer Camp, Life Skills Training, Decisions 101, Get Real About Tobacco, Young Stars Success Mentoring, Teens of Promise at Carpenter’s Shelter, and the TC Self Defense Class. Groups offered for parents included: Hablamos en Confianza, a Latina support group, and the Ramsay Parent Education Group.

The Preschool Prevention Team served over 500 children in 28 classrooms, including 16 Head Start classes, delivering the AI’s Pals curriculum, which increases social skills and reduces problem behaviors in children. Staff provided 472 consultations to teachers and 176 consultations to parents regarding their children. In addition, the Team provided 39 parent workshops, 15 preschool teacher training events and 536 early intervention mental health sessions to children, families and individual adults. The Team also provided group therapy and activities to children and families at two Alexandria homeless shelters.

Service delivery outcomes indicated that 121 youth received outpatient mental health services, 173 youth received outpatient substance abuse services, and 120 children received home-based mental health services. PIE, a program that evaluates infant and toddler development and provides early intervention to those with disabilities, served 363 children. An additional 300 children received other services in the Division such as mental health evaluations and early intervention.

Two girls hugging at the KAT Camp Family Picnic.

The Youth and Family records I reviewed were excellent and contained some of the best documentation I have seen nationally! The assessments were comprehensive, the interpretive summaries were written like true clinical analysis, the plans were person-centered and the goals were stated in the words of the person served. The assessments did a good job of identifying the individual’s and family’s strengths.

-CARF Consultant
highlights of volunteer programs, training and special projects in child, family and prevention services

During the fiscal year, 77 volunteers provided 3,229 hours of service. Volunteer representative payees managed the finances of 73 consumers, volunteers visited the residents of group homes, served as guardians and authorized representatives for consumers, and served on several CSB volunteer-run boards including Friends of the Mental Health Center and the Local Human Rights Committee.

Friends of the Alexandria Mental Health Center and the CSB hosted the screening of Out of the Shadow. The film chronicles the life of a woman who suffers from schizophrenia and illustrates the painful problems of a family as they cope with their mother's illness and the inadequate health system. Over 140 people attended the event and numerous group borrowed the film for their own showing.

The Division was awarded $880,000 in grants to provide a variety of programs and services. A grant for $110,000 in ongoing annual funds will provide mental health services to youth in the Northern Virginia Juvenile Detention Center. A System of Care grant for $475,000 in ongoing annual funds will expand capacity to serve youth in the most natural setting and to strengthen the system of care for children with serious emotional problems. Ultimately, less reliance on out-of-state residential care is expected to save $72,000 a year for each child who remains in the community.

The Division began offering free, confidential on-line screening and referral for depression, anxiety, post-traumatic stress and bipolar disorders at www.alexandrava.gov/mhmrsla/. Approximately 165 people completed the screening. This service is provided through Screening for Mental Health.

Following are highlights of the trainings offered to all CSB staff in FY 06:

- Person-Centered Therapy by Diane Grieder, M.Ed.
- Inter-Agency Child Mental Health by Eliana Gil, Ph.D
- Psychotropic Medications by Joseph Corbo, MD
- Cross Cultural Ethics by Michael Gillette, Ph.D
- Liability & Risk Management by George McAndrews, Asst. City Attorney
- SASSI-Substance Abuse Screening Inventory by Hugh Marr, Ph.D.
- Ethics: Intrafamily Disputes by Michael Gillette, Ph.D
- Secure Attachments by Bill Whelan, Psy.D.
- Navigating the Mental Retardation Waiver by Martha Boyer
- Alexandria Public Schools Special Ed Process by Kate Moran, M.Ed.
- Child Sex Abuse Assessment and Treatment by Eliana Gil, Ph.D
- Engaging Families in Treatment by NAMI
- Suicide: Insights from a Survivor by Terry Wise, J.D.

The helpful thing is that since I started talking to my therapist, she has given me more possibilities and has made me realize that anyone can listen to me. The key is that they have to be respectful to me, and now, I'm brave enough to share.

-Child Consumer
The Cultural Competence and Diversity Committee was reconstituted. The Committee continued the implementation of the Cultural Competence Plan with focus on increasing staff diversity and staff sensitivity to cultural diversity, strengthening ties with community organizations that serve diverse populations, and enhancing the CSB environment to create cultural appeal.

Administration and program staff prepared for the CSB’s fourth CARF Survey to take place in Fiscal Year 07. In order to receive CARF accreditation, the programs and administration must comply with strict guidelines for the care of consumers. Programs to be surveyed for the first time include Adult Outpatient Mental Health Services, Youth and Family Services and the Supported Living Program. The majority of CSB programs are accredited. The goal is that all programs will be accredited by 2009.

The Ethics Committee worked with consultant, Michael Gillette, Ph. D., to develop guidelines for the micro-allocation of resources within programs when funds are insufficient to serve all persons in need. The guidelines aid in making difficult decisions about who will be eligible for services and the levels of prioritization.

Management Information Systems (MIS) staff continued to implement the Anasazi electronic record keeping system and began testing remote wireless access for clinicians to connect with this consumer database. Mental Retardation Case Management and Vocational Services were the newest programs to begin using an electronic treatment planning system. MIS also continued progressing towards a “paperless record” and has discontinued the practice of printing out and filing consumer progress notes.

A new financial assessment instrument, Maximum Ability to Pay (MAP), was developed and conversion from the former assessment system was completed. MAP determines the amount consumers pay for services based on their income and family size, and adjusts any remaining balance beyond their monthly obligation so that there is no longer the need to manually write off individual services.

Quality Assurance staff developed a Streamlining Committee to reduce the paperwork burden of clinicians. The Committee has eliminated the need for a large portion of paperwork for consumers receiving medication only, thereby freeing one full-time position from the task of managing paperwork and allowing this position to shift to conducting case management for consumers.
outstanding employees

Each year, the CSB recognizes individual employees and teams of employees whose quality of work and dedication have been extraordinary over the previous year. Nominations are submitted by CSB staff and reviewed for selection by a committee that includes Board members and CSB consumers. Winners receive a plaque and a monetary award. The CSB salutes these individuals and our many other outstanding employees.

individual employees

Carmen Getty  Olayinka Olarinde
Deborah Gibson  Christy Parker
Jasmine Gillison  Monique Rushing
Janis Gold  Susan Tatum
Randy Gross  Harry Wachsmuth
Janet Gartner  Deborah Warren
Florence Hagan-Horry  Dennis Watkins
Jaime Henao  Jonathan Zeitlin
Louis Jackson
Paula Knighton

employee teams

Substance Abuse Therapists
Barbara Arnold
Jennifer Barnett
Sam Bauman
Judi Booker
Leonard Brisendine
Kim Burson
Robert Copeland
Ronald Eldridge
Jaime Henao
Jonathan Zeitlin

SA Prevention Therapists
Sandra Canas
Ann Fierstos
Teddy Jones
James “Chucky” Moore
Debra Smalley
Angela Wilbon

Arlandria Clinic Therapists
Omayra Hunt
Rhonda Williams

Residential Directors
Renee Chandler
Melissa Johnson
John Thomas

Detox
Beverly Cooper
Percy Mitchell
Adu Poku
Shawnta Wilkins
Cecilia Wisdom

I was always at war with myself. Doing things I didn’t want to do. Waking up in strange places. Reckless, drunk, stoned. Remorseful when I was sober. I was full of broken resolves, frustrated hopes, running into walls and dizzy. Therapy has taught me to stop hurting myself. I’ve faced my inner conflicts and believe in myself.

-SA Consumer
720 North Saint Asaph Street

- Alexandria Community Services Board Administrative Offices, 703.838.4455, TDD 703.838.6400
- Intake, Acute and Emergency Care Services, 703.838.6400
- Child, Family and Prevention Services, 703.838.4455
- Public Information, Volunteers and Human Rights, 703.838.4455

2355-A Mill Road

- Substance Abuse Services, 703.838.4525, TDD 703.838.4235
- Detox Center, 703.838.4482

4480 King Street

- West End Club, 703.838.4706
- Parent Infant Education Program, 703.838.5067
- Child Assessment and Treatment Center, 703.838.4708
- Extended Care Administrative Offices, 703.838.5011

3105 Colvin Street 703.519.5932, TDD 703.370.5138

- Mental Retardation sheltered, supported and competitive employment
- Mental Retardation case management

Residential Sites (Group Homes and Supervised Apartments)

- Ten group homes throughout Alexandria
- Fifty-three supervised condos/apartments throughout Alexandria

Other Community Service Sites:

- Adolescent Health Clinic
- Alexandria City Public Schools and Recreation Centers
- Over 15 Alexandria preschools and 16 Head Start classes
- Alexandria Community Shelter
- Carpenter’s Shelter
- Alexandria Detention Center
- Alexandria Juvenile & Domestic Relations Court Services Unit
- Alexandria Adult Probation and Parole Office

See our web site at www.alexandriava.gov/mhmrsa/
COA Contact Us: CSB Annual Report

Time: [Tue Dec 12, 2006 15:39:58] IP Address: [65.54.154.118]

Response requested: []

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Subject: CSB Annual Report

It is my understanding that you will receive the CSB's Annual Report for Fiscal Year 2006 this evening.

I've read the report as linked on your web site and while, there is some sparse detail as to the sources CSB's funds, there is virtually no information regarding how the funds were spent. Page eight breaks it down into three general Service areas, but there are no financial details along the lines that would reasonably be considered an "annual report."

Comments:

It occurs to me that money is tight and the issues are so important that there should be transparency and clear accountability on all City Programs, especially one such as the CSB which impacts so many lives.

Please let me know, am I missing something? Is there a more detailed report?

Should the City Council accept such a report without the expenditures being accounted for?

Sincerely