

Legislation Details (With Text)

File #:	14-5454	Name:		
Туре:	Grant Application	Status:	Agenda Ready	
File created:	6/10/2016	In control:	City Council Legislative Mee	eting
On agenda:	6/28/2016	Final action:		
Title:	Consideration of Approval to Accept State Funds to Develop a Program of Assertive Community Treatment (PACT) within the Department of Community and Human Services.			
Sponsors:				
Indexes:				
Code sections:				
Attachments:				
Date	Ver. Action By	٨	ction	Result

City of Alexandria, Virginia

MEMORANDUM

DATE: JUNE 22, 2016

TO: THE HONORABLE MAYOR AND MEMBERS OF CITY COUNCIL

FROM: MARK B. JINKS, CITY MANAGER /s/

DOCKET TITLE:

Consideration of Approval to Accept State Funds to Develop a Program of Assertive Community Treatment (PACT) within the Department of Community and Human Services.

ISSUE: Consideration of approval for the Alexandria Department of Community and Human Services (DCHS) to accept funds from the Virginia Department of Behavioral Health and Developmental Services (VDBHDS) to develop a Program of Assertive Community Treatment (PACT) Team and authorization to create up to eight net new City staff positions for that team which will provide intensive community-based services to adults with serious mental illness and/or co-occurring substance use disorders.

<u>RECOMMENDATION</u>: That City Council:

- Approve DCHS's receipt of approximately \$850,000 starting in FY 2017 in annual ongoing funding from VDBHDS to develop a PACT team, beginning July 2016. The funding would become part of DCHS's ongoing Performance Contract with VDBHDS;
- 2) Authorize the creation of up to eight (8) FTE positions to staff the PACT team as required by VDBHDS and state licensing; and
- 3) Authorize the City Manager to execute the necessary documents that may be required.

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BACKGROUND: PACT is a client-centered, recovery-oriented mental health service

delivery model that has received substantial empirical support for facilitating community living, psychosocial rehabilitation, and recovery for persons who have the most severe and persistent mental illnesses, have severe symptoms and impairments, and have not benefited from traditional mental health programs. Key characteristics of PACT programs are:

- PACT serves clients with severe and persistent mental illnesses that are complex, have devastating effects on functioning, and, because of the limitations of traditional mental health services, may have gone without appropriate services. Consequently, the client group is often over represented among the homeless and in jails, prisons and hospitals.
- PACT services are delivered by a group of no fewer than ten multidisciplinary mental health staff who work as a team and provide the majority of the treatment, rehabilitation, and support services to no more than 120 clients, maintaining a specified ratio of no more than 1:10 staff to clients. The team provides intensive services (contacts may be as frequent as two to three times per day) which are based on client need and a mutually agreed upon plan between the client and PACT staff. The team provides 24/7 coverage and members of the team share responsibility for addressing the needs of all PACT clients.
- PACT services are individually tailored with each client and address the preferences and identified goals of each client. The approach with each client emphasizes relationship building and active involvement in assisting individuals with severe and persistent mental illness to make improvements in functioning, to better manage symptoms, and to achieve individual goals.
- The PACT team is mobile and delivers services in community locations to enable each client to find and live in their own residence and find and maintain work in community jobs rather than expecting the client to come to the program. Seventy-five percent or more of the services are provided outside of the program offices in locations that are comfortable and convenient for clients.
- PACT services are delivered in an ongoing rather than time-limited framework to aid the process of recovery and ensure continuity of caregiver. Severe and persistent mental illnesses are episodic disorders and many clients benefit from the availability of a longer-term treatment approach and continuity of care. This allows clients opportunity to recompensate, consolidate gains, sometimes slip back, and then take the next steps forward to continue recovery.

PACT is a well-established, evidence-based and licensed service utilized in over half of the Community Services Boards (CSB) in Virginia, including those in Arlington, Fairfax-Falls Church and Prince William Counties. Recent action by the Virginia General Assembly resulted in funding availability to create a total of nine additional PACT teams in the state over the FY 2017 to FY 2018 biennium. VDBHS sent a notice to local Community Service Boards requesting that Boards indicate if there was interest in creating a PACT team in their community. Alexandria responded to the State affirming interest, and as a result of this informal process was notified on May 26, that Alexandria was selected to receive approximately \$850,000 annually in ongoing funding for a PACT team, beginning July 1, 2016. In this instance there was no grant application process.

DISCUSSION: While Alexandria has a continuum of mental health services in place, there remains a gap in DCHS's ability to provide intensive, integrated treatment and ongoing support to the most severely ill clients. A PACT team will provide an interdisciplinary team that affords a very low client to staff ratio, around-the-clock accessibility, and mobile, non-center based services that can support clients much more comprehensively. This approach makes services available to clients who are not willing or able to utilize traditional models of service. A recent review of individuals who could benefit from PACT services identified approximately 80 adults known to DCHS who have serious mental illness, have refused treatment, are physically frail or homebound and/or have other barriers to consistently accessing services in existing settings. This includes approximately 25 older adults. Within Northern Virginia, Alexandria has for many years maintained the highest per capita rate of individuals who are hospitalized under Temporary Detention Order. PACT teams have established track records in reducing hospitalizations for individuals with serious mental illness.

State licensing dictates the staffing structure of a PACT team, prescribing the types and minimum numbers of FTEs and the maximum client to staff ratio. If receipt of funding is approved, in upcoming weeks, DCHS will be clarifying the specific City job classifications that will comprise the Alexandria PACT team. A total of ten positions will be required and a tentative staffing plan includes:

1.0 FTE Mental Health Team Leader (Grade 21)
3.0 FTE Registered Nurse (Grade 19)
1.0 FTE Vocational Services Specialist (Grade 19)
2.0 FTE Therapist (Grade 16)
1.0 FTE Direct Support Technician (Grade 12)

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1.0 FTE Fiscal Officer 1 (Grade 19)1.0 FTE Clinical Psychiatrist (Grade 29)

10.0 FTE's

It is anticipated that a combination of regular City staff and contract positions will be utilized. Some existing staff positions within DCHS will be engaged in the work of the PACT team so that fewer than ten newly created positions will be required.

FISCAL IMPACT: Funding is approximately \$850,000 annually beginning in FY 2017 and ongoing with no match required. Where possible, DCHS will also bill Medicaid for eligible PACT services. Some existing positions within DCHS will be leveraged to provide part of the required total complement of 10 FTEs on the PACT team so that no more than eight net new positions would be added. No additional City General funds will be requested to develop the PACT program. There are no funds currently available in the DCHS budget to continue the PACT program should State funding be discontinued in the future.

STAFF:

Debra Collins, Deputy City Manager Kate Garvey, Director, Department of Community & Human Services (DCHS) Suzanne Chis, Deputy Director, DCHS Morgan Routt, Director, Office of Management and Budget Carol Layer, LCSW, Director, Center for Adult Services, DCHS Raphael Obenwa, Director, Finance, DCHS