

HHS COMMITTEE #1
April 28, 2011
Worksession

MEMORANDUM

April 27, 2011

TO: Health and Human Services Committee

FROM: Linda McMillan, Senior Legislative Analyst *LM*
Vivian Yao, Legislative Analyst *VY*

SUBJECT: **Worksession: FY12 Operating Budget**
Department of Health and Human Services
Children, Youth and Families
Behavioral Health and Crisis Services

Those expected for this worksession:

Uma Ahluwalia, Director, Department of Health and Human Services (DHHS)
Brian Wilbon, Chief Operating Officer, DHHS
Kim Mayo, Budget Team Leader, DHHS
Kate Garvey, Chief, Children, Youth and Families
Dr. Raymond Crowell, Chief, Behavioral Health and Crisis Services
Beryl Feinberg, Office of Management and Budget
Trudy-Ann Durace, Office of Management and Budget

Excerpts from the County Executive's Recommended Budget for Children, Youth, and Families is attached at ©1-5 and for Behavioral Health and Crisis Services at © 24-29.

I. Children, Youth and Families

For FY12, Children, Youth, and Families is organized into nine program areas. This service area provides protection, prevention, intervention, and treatment services for children and their families and education, support, and financial assistance for parents, caretakers, and individuals.

The following tables provide an overview of budget and workyear trends for the service area. Overall from the FY11 original budget (before savings plan) to the FY12 recommended budget, funding is proposed to decrease by of \$4,431,890 (7.1%) and workyears to decrease by 9.1 (2.1%). A part of

the overall net change in workyears is the restoration of workyears associated with the FY11 furlough and the shifting of workyears associated with the transfer of the Juvenile Justice Services program to Behavioral Health and Crisis Services.

Children, Youth, and Families Expenditures	FY10 Budget	FY11 Budget	FY12 Rec	Change FY11 to FY12
Child Welfare Services	\$ 22,084,190	\$ 21,524,050	\$ 21,619,120	0.4%
Conservation Corps	\$ 856,730	\$ 400,000	\$ -	-100.0%
Linkages to Learning	\$ 5,200,520	\$ 4,893,390	\$ 4,753,430	-2.9%
Juvenile Justice Services	\$ 5,016,680	\$ 3,565,750	\$ -	-100.0%
Positive Youth Development	\$ -	\$ 2,361,560	\$ 2,039,000	-13.7%
Early Childhood Services	\$ 2,868,020	\$ 3,209,640	\$ 2,852,040	-11.1%
Parent Support Services	\$ 633,570	\$ -	\$ -	
Infants and Toddlers	\$ 3,555,430	\$ 3,531,840	\$ 3,677,650	4.1%
Child Care Subsidies	\$ 10,577,230	\$ 3,803,430	\$ 3,124,320	-17.9%
Income Supports	\$ 15,415,290	\$ 15,388,730	\$ 16,499,770	7.2%
Child and Adolescent School and Community Based Services	\$ 3,522,020	\$ 3,201,190	\$ 2,914,940	-8.9%
Service Area Administration	\$ 370,860	\$ 378,170	\$ 345,590	-8.6%
TOTAL	\$ 70,100,540	\$ 62,257,750	\$ 57,825,860	-7.1%

Children, Youth, and Families Workyears	FY10 Budget	FY11 Budget	FY12 Rec	Change FY11 to FY12
Child Welfare Services	209.6	202.7	205.9	1.6%
Conservation Corps	27.2	3.7	0	-100.0%
Linkages to Learning	5.6	5.3	4.6	-13.2%
Juvenile Justice Services	17.7	12.3	0	-100.0%
Positive Youth Development	-	5.8	7.5	29.3%
Early Childhood Services	13.3	10.8	10.9	0.9%
Parent Support Services	0.0	0.0	0.0	
Infants and Toddlers	9.9	13.1	10.9	-16.8%
Child Care Subsidies	22.7	22.3	16.4	-26.5%
Income Supports	147.2	145.6	155.1	6.5%
Child and Adolescent School and Community Based Services	4.2	3	3.2	6.7%
Service Area Administration	2.9	2.8	3.8	35.7%
TOTAL	460.3	427.4	418.3	-2.1%

A number of components in this service area are being reviewed jointly with the Education Committee, including Early Childhood Services, Services to Children with Special Needs, Child Care Subsidies, Linkages to Learning, and particular contracts in Child and Adolescent School and Community Based Services. Issues relating to these topics are not addressed in this packet and have been detailed for the joint HHS and Education Committee.

Changes to the Conservation Corps program will be reviewed in a joint meeting of the PHED and HHS Committees on April 29.

Testimony: The Council received testimony from the Commission on Children and youth (©16) advocating broadly for education and community programs that keep children healthy and safe. The Commission expressed concern regarding proposed reductions to support services for children and youth and to teen services specifically.

A. Child Welfare Services

For FY12, the Executive is recommending a total of \$21,619,120 and 205.9 workyears, which is a net increase of \$95,070 and 3.2 workyears from the FY11 approved level. Services provided by the program include protective and rehabilitative services, investigations, and supportive services related to family preservation, kinship care, foster care, adoption, and in-home aide services.

The Executive is recommending the following adjustments to Child Welfare Services.

Child Welfare Services	Dollars	WY	Fund
Shift Funding to Multicultural Intervention Project for Victims of Child Abuse from State HB669	\$ 300,000	3	Grant
Replace: VOCA Grant - For Two Full-time Community Services Aide III Positions	\$ 148,050	2	General
Decrease Cost: Court Appointed Special Advocate Contractual Services	\$ (5,200)	0	General
Decrease Cost: Post-Adoption Contractual Services	\$ (9,690)	0	General
Decrease Cost: Tree House Contract for Abused Children	\$ (25,420)	0	General
Abolish 2 Full-time Social Worker Positions	\$ (242,470)	-2	General
Miscellaneous Adjustments	\$ (70,200)	0.2	General and Grant

1. Shifting of VOCA-Related Positions Community Service Aide III positions

- **Shift Funding to Multicultural Intervention Project for Victims of Child Abuse from HB669** **\$300,000**
- **Replace VOCA Grant for 2 Full-time Community Service Aide III Positions** **\$148,050**

The Executive is recommending that (1) three Community Service Aide III positions be shifted from HB669 to the Victims of Crime Act (VOCA) grant (2) and two positions be replaced with funding through County general funds with FFP revenue reimbursement. VOCA positions provide the following services to child abuse victims for whom English is a second language and/or for whom the U.S. is not their country of origin: case management, language interpretation and translation; information and referral; advocacy; and safety planning. **Council staff recommends approval.**

2. Decrease Cost: Court Appointed Special Advocate Contract - \$5,200

The Executive is recommending a reduction of \$5,200 (5%) to a contract with the Court Appointed Special Advocates of Montgomery County. The contract provides for the services of case managers who oversee more than 100 volunteers. The volunteers represent the interests of children who are involved with Child Welfare in court. The reduction may result in fewer volunteers being recruited and trained, and fewer matches between advocates and children. However, the organization may be able to mitigate the reduction through fundraising efforts.

In FY10, 345 children were served by 289 volunteers at a contract level of \$108,350. As of December 31, 2010, there were 235 cases, including 200 children assigned to volunteers and 35 children waiting for assignment of an advocate.

Council staff recommends approval.

3. Decrease Cost: Post Adoption Contractual Services - \$9,690

The Executive is recommending a 5% reduction to a contract with the Center for Adoption and Support and Education, which provides a range of therapeutic and support services to children, youth, and post-adoptive families. The services including assessments, case management/service coordination, crisis intervention, individual and family therapy, support groups for parents and children/teens, and trainings. The Department has explained that the reduction will not devastate the program, and it will still be able to provide a full range of services to fewer clients (estimated at 3). **Council staff recommends approval.**

4. Decrease Cost: Tree House Contract for Abused Children - \$25,420

The Executive has recommended a \$25,420 reduction to the Tree House Child Assessment Center, a public-private partnership which provides health and mental health services to children who have been abused physically and sexually and neglected in their medical care. Administrative services for the organization are provided through a contractual agreement with the Primary Care Coalition. The Tree House actively pursues donations as well as public and private grants.

Executive staff expects the reduction to be offset through present reserves and future proceeds from aggressive fundraising efforts. However, if other funding does not become available in FY12, the reduction would result in the decrease of medical (50 hours of physician time) and mental health (408 hours of therapy) services.

The following table provides an overview of the Tree House program's budget, fundraising accomplishments, and numbers served from FY08-FY10. The table shows that the program's total funding from grants, contributions, and fees has been increasing. Additional service and budget data from the organization's FY10 Annual Report is attached ©17-21.

	FY08	FY09	FY10
Total Budget	\$791,435	\$1,045,888	\$1,035,629
Total Funding from Grants, Contributions, and Fees	\$80,000	\$ 87,258	\$ 156,567
Total Number of Children Served	1,041	899	1,056

Council staff recommends approval. The Committees may be interested in requesting a mid-year report from the Tree House on its fundraising achievements and the impact of these efforts on maintaining service levels in FY12.

5. Abolish 2 Full-time Social Worker Positions -\$242,470

The Executive is recommending the abolishment of two vacant full-time Social Worker positions. The Social Worker III position had been responsible for providing clinical social work and case management services for foster children preparing to transition to independent living from foster care. The position acted as a lead worker who mentored and provided case consultation to other unit staff. The caseload functions of the position were absorbed by the remaining five social workers in the Independent Living Unit.

The Social Worker II position had been responsible for providing clinical social work and case management services for children living with relatives. Once the position became vacant, the caseload functions were absorbed by the remaining six social workers in the Kinship Unit.

Council staff recommends approval.

6. Miscellaneous Adjustments -\$70,200

Miscellaneous Adjustments account for restoration of furlough, FY12 recommended benefit change, annualizations and other items impacting more than one program. The category also includes the mid-year creation of two part-time positions. **Council staff recommends approval.**

7. Other Child Welfare Related Contracts

The Executive has also recommended the following reductions to contracts for services related to the Child Welfare Program, but are included in the Behavioral Health Planning and Management Program in Behavioral Health and Crisis Services.

	Dollars	WY	Fund
Reduce Foster Care Families Mental Health Services	\$ (21,210)	0	General
Reduce Contract for Parenting Skills to 20 Families	\$ (27,450)	0	General
Eliminate Attachment and Bonding Support Services for Child Welfare Services Clients	\$ (57,630)	0	General

- **Reduce Foster Care Families Mental Health Services** **-\$21,210**

This proposed reduction would eliminate the contract with the Institute for Family Center Services for mental health services to children and foster families. Council staff understands that services under the contract include home-based crisis stabilization services that prevent removal of the child. Although Executive staff states that services provided under this contract are provided by other sources including the Home-Based Therapy Services and the Crisis Center, it is unclear whether these alternative services would prevent a child's removal from the home. Services under the contract are provided to approximately 13 children per year.

Council staff is concerned about the impact of the contract elimination on children who would otherwise be removed from their home without these services. The Committee should ascertain if other comparable services that prevent the removal of children from their homes are available. If not, Council staff recommends adding \$21,210 to the reconciliation list. If the contract is ultimately retained, the Committee may want to discuss the possibility of shifting this funding to Child Welfare Services given its direct connection with these services.

- **Reduce Contract for Parenting Skills to 20 Families** **-\$27,450**

The Executive is recommending a 17% reduction to a contract with Family Services Agency - Frameworks for Families for case management and parenting skills to families at risk for child abuse and/or neglect. As a result of this reduction, 11 referred families will not receive the intervention. BCHS avoided reductions to this service between FY08-FY11, but has recommended this reduction to avoid additional reductions for BCHS direct services programs.

Before approving this reduction, the Committee may want to ascertain whether any alternatives to this funding exist or whether Family Services Agency will be able to mitigate the impact on families through other resources. The Committee may want to explore whether this contract should be managed by Child Welfare Services.

- **Eliminate Attachment and Bonding Support Services** **-\$56,630**

The Executive has proposed the elimination of all Child Welfare attachment and bonding services for young children in this contract with the Reginald S. Lourie Center. The services for birth or adoptive parents and their children help determine if reunification with the family of origin is in the best interest of a child that has come into the care of Child Welfare Services. The reduction represents 25% of the entire contract with the Lourie Center. The remaining funds provide therapeutic nursing and mental health support services for emotionally disturbed pre-school children.

The elimination of these services is problematic. Council staff is not aware of other options for the services that the Lourie Center provides for young children. Council staff recommends that the Committee place \$56,630 on the reconciliation list to restore the services provided by the Lourie Center. The Committee may also want to explore whether this contract would fit better in the Children, Youth, and Families service area.

Performance Measures

Council staff notes that the program is making progress in reducing the number of children placed in out-of-home care. Data trends from FY10 and FY11 show a decreasing number of children placed in foster care, a decreasing number of children in residential placements, and an increasing number of children placed with relatives.

	FY10 Monthly Average	FY11 to Date Monthly Average
Children in Foster Care	314.3	296.8
Children Placed with Relatives	128.6	135.5
Children in Residential Placements	112.3	98.5

B. Positive Youth Development

For FY12, the Executive is recommending a total of \$2,039,000 and 7.5 workyears, which is a net decrease of \$322,560 and increase of 1.7 workyears from the FY11 approved level. The program focuses on positive youth development, gang prevention, and intervention for youth who are at-risk of gang involvement and those already involved in gang activity. Services include the Upcounty and Crossroads Youth Opportunity Centers (YOC), the High School Wellness Center, and the Street Outreach Network.

The Executive is recommending the following adjustments to this program.

Positive Youth Development	Dollars	WY	Fund
Add Family Intervention Grant	\$ 64,300	1	Grant
Add ARRA FY09 Justice Assistance Grant (JAG)	\$ 60,010	0.5	Grant
Decrease Miscellaneous Operating Expenses	\$ (20,040)	0	General
Eliminate Upcounty Youth Opportunity Center Grant	\$ (450,000)	0	Grant
Miscellaneous Adjustments	\$ 23,170	0.2	General and Grant

1. Add Family Intervention Grant \$64,300

The Family Intervention Grant provided funding to support parents and families of gang involved youth in designated communities with family strengthening services, case management, guidance for parents and advocacy regarding gang prevention and intervention. A Program Specialist position was created midyear, and the position was filled in 2010 for 8 months. During that time the goal of serving 100 families in the County was surpassed. Because the person in the position resigned, a budget modification was requested in order to reprogram the funds to support the Upcounty YOC. **Council staff recommends approval.**

2. Add ARRA FY09 Justice Assistance Grant \$60,010

The County received funding to provide employment support to gang-involved youth with the goal of finding employment for at least 50 gang-involved youth. The program is in the preliminary phase of implementation, and a part-time CSA III was hired two months ago to implement the program. DHHS has worked with the Office of Workforce Development,

Maryland Multicultural Youth Centers, and other community providers to identify youth and avoid any overlap in services. **Council staff recommends approval.**

3. Decrease Miscellaneous Operating Expenses -\$20,040

The Executive is recommending a reduction to miscellaneous operating expenses for supplies, flex funds and materials used to support services from the Street Outreach Network. Executive staff reports that some of the activities for the youth may have more limited access to materials as a result of this reduction. **Council staff recommends approval.**

4. Eliminate Upcounty Youth Opportunity Center Grant -\$450,000

Although the federal U.S. Department of Justice grant that supported the Upcounty Youth Opportunity Center is ending, services at the Upcounty YOC will continue. Funding will be provided through federal and local sources: \$200,000 from a new federal earmark; \$60,000 from the reprogrammed Family Intervention Grant; and \$190,000 from reprogrammed County funding that had been used for Gang Wrap services. Because the Gang Wrap funding served only 7 to 10 youth per year on average, the Department felt that using it to support the Upcounty YOC instead would benefit a greater number of youth. Updates on Crossroads and Upcounty YOC programs are provided at ©10-11. **Council staff recommends approval.**

5. Miscellaneous Adjustments \$23,170

Miscellaneous Adjustments account for restoration of furlough, FY12 recommended benefit change, annualizations and other items impacting more than one program. **Council staff recommends approval.**

C. Juvenile Justice Services

The Executive’s budget recommends the shifting of Juvenile Justice Services from Children, Youth, and Families to Behavioral Health Planning and Management. Executive staff explained that the services provided in this program, specifically the Screening and Assessment Services for Children and Adolescents (SASCA) are more closely aligned with the substance abuse and mental health services provided through Behavioral Health and Crisis Services. The shift is intended to strengthen the continuum of care for children and families. Executive staff will be present to explain the reasoning behind this shift.

The adjustments that are being recommended for Juvenile Justice Services include:

Juvenile Justice Services	Dollars	WY	Fund
Abolish a Full-time Principal Administrative Aide Position and Absorb in the Urine Monitoring Program	\$ (82,070)	-1	General
Reduce Public Education and Prevention Grant	\$ (118,070)	0	Grant
Reduce Community Mental Health Grant	\$ (157,620)	-1	Grant
Miscellaneous Adjustments	\$ (3,207,990)	-10	General and Grant

1. Abolish a Full-time Principal Administrative Aide Position and Absorb in the Urine Monitoring Program **-\$82,070**

The Executive is recommending the abolishment of a filled full-time Principal Administrative Aide (PAA) position. The position is responsible for collecting urine specimens for SASCA clients 2 times per week for two adolescent treatment centers. The PAA delivers the specimens to the Urine Monitoring Program and ensures the centers have supplies for urine collection. Executive staff suggests that this responsibility could be shifted to the Urine Monitoring Program. **Council staff recommends approval.**

2. Reduce Public Education and Prevention Grant **-\$118,070**

The Executive is recommending a reduction to the Public Education and Prevention Grant, also known as the Substance Abuse Prevention Grant. Funding is no longer available for the Strengthening Families component of this grant, which served youth 11-17 whose parents were enrolled in substance abuse treatment. As a result, this family education program will no longer be offered as an adjunct to treatment. **The Committee may be interested in understanding whether there are other options for family education services for youth whose parents are enrolled in substance abuse treatment. Council staff recommends approval.**

3. Reduce Community Mental Health Grant **-\$157,620**

The reductions the Community Mental Health Grant reflected in the Executive's budget submission are technical adjustments to align with the FY11 budget and have already been implemented. The reductions were in the following areas:

- Reduce Mental Health Clinic fund
- Decrease cost to pharmacy budget
- Reduce case management budget
- Shift a Family Intervention Specialist Position from CMHG to Family Intervention Intergovernmental Agreement Grant

Council staff recommends approval.

4. Miscellaneous Adjustments **-\$3,207,990**

Miscellaneous Adjustments account for restoration of furlough, FY12 recommended benefit change, annualizations and other items impacting more than one program. The category also includes the shift of the Juvenile Justice Services Program to Behavioral Health Planning and Management.

Council staff recommends approval.

D. Income Supports

For FY12, the Executive is recommending a total of \$16,499,770 and 155.1 workyears, which is an increase of \$1,111,040 and 9.5 workyears from the FY11 approved level. The program provides basic resources of case assistance, food supplements, and medical assistance for low-income families and individuals.

The Executive is recommending the following adjustments to Income Supports.

Income Supports	Dollars	WY	Fund
Replace HB669 Grant- Income Support Triage and Greeters	\$ 106,200	0	General
Miscellaneous Adjustments	\$ 1,004,840	9.5	General and Grant

1. Replace HB669 Grant - Income Support Triage and Greeters \$106,200

The Executive is recommending \$106, 200 for partial year funding for the part-time broker staff for Triage and supplemental funding for the Greeters (in addition to the funds from the State Department of Human Resources). This program was previously fully funded from our DHR grant. The following describes the roles of Greeters and Triage Workers (see also ©9-10):

Greeter: Meets customers entering the lobby of each Income Support Office and determines if customer are in the right office, if they have an appointment, if they are dropping off documents, or if this is their first time coming to the office. Assists customers with completing applications, contacting their worker for basic questions, or other needs. Greeters are recruited from TANF participants by the Employment Services Vendor.

Triage Worker: Participates in triage dialogue with customers and provides appropriate referrals, contacts, information, directions, and education regarding identified needs. Reviews Income Supports/Emergency Services application and completes preliminary eligibility screening. Screen food stamp customers for expedited service. Checks status of client in system and enters pertinent information, performs inquiry and verification into CARES system, and schedules appointments for IS/ES customers. Triage consists of three work years in each office, two full-time merit staff and two part-time contractual broker staff.

During FY12, the department will look at possible process changes in this program and additional sources of funding to determine how to meet this urgent need as the volume of new customers continues to grow.

Council staff recommends approval.

2. Miscellaneous Adjustments \$1,004,840

Miscellaneous Adjustments account for restoration of furlough, FY12 recommended benefit change, annualizations and other items impacting more than one program. The category also includes the shifting of four workyears from Child Care Subsidies, the shift of a Manager III position from Behavioral Health and Crisis Services, the mid-year creation of a Program Manager position, and the shift of one workyear from the Office of the Chief Operating Officer.

Workyears were shifted to address the major workload increases in the Income Support eligibility programs. Staff carries caseloads of over 600-700 assistance units at any point in time and application volume has increased 42 % over the past year. The WY shift does not impact child care subsidy programs. **Council staff recommends approval.**

E. Child and Adolescent Services

For FY12, the Executive is recommending \$2,914,940 and 3.2 workyears, which is a decrease of \$286,250 and increase of .2 workyear compared to the FY11 approved level. This program area delivers a variety of services through contracts with many different partners in the community.

Council staff notes that other contracts administered by DHHS that are part of this program and involve collaboration with the school system are being reviewed jointly with the Education Committee.

The Executive is recommending the following adjustments to Child and Adolescent School and Community Based Services.

Child and Adolescent School and Community Based Services	Dollars	WY	Fund
Decrease Non-Safety Net Services to Low-Income Vietnamese Families	\$ (3,330)	0	General
Decrease After School and Weekend Enrichment Programs - Non-Safety Net Services	\$ (4,850)	0	General
Decrease Prevention Services Contract	\$ (8,080)	0	General
Decrease Mentoring Services and Academic Enrichment Programs (Non-Safety Net Services)	\$ (9,270)	0	General
Decrease Miscellaneous Operating Expenses for Program Area	\$ (30,450)	0	General
Eliminate Security Contract	\$ (55,800)	0	General
Miscellaneous Adjustments	\$ (73,640)	0.2	General

1. Reductions to Non-Safety Net Services

The Executive proposed a 5% reduction to the following contracts because they do not deliver safety net services. Despite the reductions, the Department has acknowledged the important nature of the services delivered.

- **Decrease Non-Safety Net Services to Low-Income Vietnamese Families-Maryland Vietnamese Mutual Society** **-\$3,330**

The Executive is recommending a \$3,330 reduction to the FY11 funded level of \$66,600. Services include parent training to increase participation in their children's education and other support services for seniors and newcomers. The reduction will affect some operating expenses. Service data for the program is included at ©12. **Council staff recommends approval.**

- **Decrease Afterschool and Weekend Enrichment Programs-Washington Youth Foundation and Family Learning Solutions**

- **Washington Youth Foundation** **-\$2,250**

The Executive is recommending a \$2,250 reduction to the FY11 funded level of \$45,000. The program provides afterschool and weekend Math and English classes for newly arrived low-income students. Reductions have affected personnel and operating expenses. Service data for the program is attached at ©13.

- **Family Learning Solutions** **-\$2,600**

The Executive is recommending a \$2,600 reduction to the FY11 funded level of \$52,000. The program provides afterschool, mentoring and tutoring services for K-6th grade, at-risk, immigrant children and youth in the Wheaton area. Reductions have affected operating expenses; however, Family Learning Solutions will maintain the same scope of services as in FY11. Service data for the program is attached at ©13.

- **Decrease Prevention Services Contract-Community Bridges** **-\$8,080**

The Executive is recommending an \$8,080 reduction to the FY11 funded level of \$161,600. The Community Bridges program provides youth empowerment and leadership services to 3rd to 12th grade girls. Programs are currently offered at 17 MCPS schools. Reductions have affected personnel expenses. Service data for the program is included at ©13.

The Council received testimony in support of continued funding for the organization (©22-23).

- **Decrease Mentoring Services and Academic Enrichment Programs-Asian American LEAD and Washington Youth Foundation**

- **Asian American LEAD** **-\$5,940**

The Executive is recommending a \$5,940 reduction to the FY11 funded level of \$118,800. The program provides afterschool academic enrichment and mentoring for youth at five Middle Schools and two High Schools. The program also offers additional one-on-one tutoring for students that need extra homework help at the Wheaton Community Center. Reductions have affected personnel and operating expenses; however, AA Lead will maintain the same scope of services as in FY11. Service data for the program is attached at ©14.

- **Washington Youth Foundation** **-\$3,330**

The Executive is recommending a \$3,330 reduction to the FY11 funded level of \$66,600. The program provides mentoring for youth, youth leadership camps, and parent trainings. The reduction will affect some operating expenses. Service data for the program is included at ©12.

1. Decrease Miscellaneous Operating Expenses for Program Area -30,450

The savings proposed for miscellaneous operating expenses are a result of negotiated contract savings. Executive staff reports that there is no service impact due to this reduction. **Council staff recommends approval.**

2. Eliminate Security Contract -55,800

The Executive is proposing the elimination of a security contract, which provides funding for a security guard, a security system, and staff training for the Maryland Multicultural Youth Center-Latin American Youth Center staff at their Silver Spring site. The resource is not provided to any other organization that deals with at-risk youth and is considered part of the operational responsibilities of the organization. There will be no service impact whatsoever due to this reduction. **Council staff recommends approval.**

3. Miscellaneous Adjustments -73,640

Miscellaneous Adjustments account for restoration of furlough, FY12 recommended benefit change, annualizations and other items impacting more than one program. **Council staff recommends approval.**

F. Service Area Administration

The Executive is recommending \$345,490 and 3.8 workyears for this program area in FY12, which is a decrease of \$32,580 and an increase of 1 workyear compared to the FY11 approved level. All increases are classified as Miscellaneous Adjustments, which account for restoration of furlough, FY12 recommended benefit change, annualizations and other items impacting more than one program. The adjustments also include the shifting of a Manager II from Child Care Subsidies.

Council staff recommends approval.

II. Behavioral Health and Crisis Services

Excerpts from the County Executive's Recommended Budget are attached at © 24-29.

For FY12, the Executive is recommending funding of \$37.488 million and 192.7 workyears for Behavioral Health and Crisis Services (BHCS). This is a small decrease (0.7%) from the FY11 approved budget of \$37.747 million for this service area. However, the Department has shifted about \$3 million dollars and 10.3 workyears from Children, Youth, and Family Services' Juvenile Justice program to BHCS' System Planning and Management program. Had Juvenile Justice Services not been shifted, BHCS would have been proposed to have a reduction of about 7%. The HHS Committee will have discussed this program shift as a part of Children Youth, and Family Services.

As background for this discussion, the testimony and 2009-2010 Annual Report of the Alcohol and Other Drug Abuse Task Force is attached at © 30-44 and the 2009 Report of the Victim Services Advisory Board is attached at © 45-56.

It is important to note that while the County’s Operating Budget will have an appropriation of about \$37 million for behavioral health services; most of the funding for mental health services is outside of the County budget through payments made by the State under the fee-for-service process. Much of this is through Medicaid and State payments for those who are not eligible for Medicaid but are eligible for the State’s Primary Adult Care (PAC) program. In FY10 these payments equaled about \$48 million. Some of the reductions to State mental health grants to the County over the past few years have been due to decisions by the State to move providers for a variety of services into a fee-for-service model.

Significant issues facing Montgomery County in the adult mental health/ behavioral health system include the need to serve clients who are not eligible for the public mental health system and the need to enlist providers with a wide range of language capabilities. The County also estimates that seniors are under-served given that the percentage of service dollar used for seniors is well below their percentage of the total county population. The County is working to better serve Veterans through the Veterans Collaborative which is providing training to clinicians on issues such as PTSD and traumatic brain injury, and by making efforts to coordinate services with the Veterans Administration. The County is also seeing an increase in the number of dually diagnosed clients. DHHS estimates that about 14% of clients in the public mental health system are dually diagnosed but they utilize about 29% of system expenditures.

The following tables provide overview budget and workyear information.

Behavioral Health and Crisis Services Expenditures in \$000's	FY10 Budget	FY11 Budget	FY12 Recommend	Change FY11 Budget to FY12 Rec
System Planning and Management	7,512	7,898	9,483	20.1%
Behavioral Health and Specialty Services	2,756	2,502	2,433	-2.8%
Behavioral Health Comm Support Services	7,475	6,942	6,597	-5.0%
Criminal Justice Behavioral Health Svcs	2,463	2,484	2,403	-3.3%
Outpatient Addiction Services (OAS)	4,037	3,868	3,835	-0.9%
Victims Assistance/Sexual Assault Svcs	2,614	2,595	4,624	78.2%
Child/Adolescent Mental Health Svcs	3,382	3,078	2,962	-3.8%
24-Hour Crisis Center	4,300	4,154	3,987	-4.0%
Seniors/Persons w Disabilities Mental Hlth Services	1,855	627	609	-2.9%
Abused Persons Program	3,252	3,043	-	-100.0%
Service Area Administration	584	556	555	-0.2%
TOTAL	40,230	37,747	37,488	-0.7%

Behavioral Health and Crisis Services Workyears	FY10 Budget	FY11 Budget	FY12 Recommend	Change FY11 Budget to FY12 Rec
System Planning and Management	13.7	18.8	22.3	18.6%
Behavioral Health and Specialty Services	21.4	17.6	18.1	2.8%
Behavioral Health Comm Support Services	21.4	20.9	20.5	-1.9%
Criminal Justice Behavioral Health Svcs	19.2	18.5	19.1	3.2%
Outpatient Addiction Services (OAS)	29.2	30.9	29.2	-5.5%
Victims Assistance/Sexual Assault Svcs	18.4	18.4	27.2	47.8%
Child/Adolescent Mental Health Svcs	17.2	16.0	16.6	3.8%
24-Hour Crisis Center	37.5	34.0	33.9	-0.3%
Seniors/Persons w Disabilities Mental Hlth Services	10.0	2.0	2.0	0.0%
Abused Persons Program	17.8	15.4	0.0	-100.0%
Service Area Administration	3.9	3.7	3.8	2.7%
TOTAL	209.7	196.2	192.7	-1.8%

A. Behavioral Health Planning and Management

The Executive is recommending funding of \$9,483,170 and 22.3 workyears for this program area that houses services required of DHHS as the State-mandated local mental health authority (Core Service Agency). This program area provides programming for people with serious persistent mental illness and serious emotional illness and the development of the continuum of care that is focused on recovery and allowing people to live in the least restrictive clinically appropriate setting. Starting in FY12, this program will also house Juvenile Justice Programs including Screening and Assessment Services for Children and Adolescents (SASCA), early intervention and day treatment programs.

Behavioral Health Planning and Management	Dollars	WYs	Fund
Add a Family Intervention Specialist - Intergovernmental Agreement	145,000	1.0	Grant
Eliminate Hospital Diversion Program in SORT Grant	(989,220)	-5.0	Grant
Abolish PT Therapist II and FT Supervisory Therapist	(222,550)	-1.6	General
Eliminate Attachment and Bonding Support - Child Welfare Clients	(57,630)	0.0	General
Decrease Cost of Residential Rehabilitation Supplement and Shift a Portion of Cost to Community Mental Health Grant	(56,850)	0.0	Grant
Abolish PT Program Manager I in HHS Office of Consumer Affairs	(44,430)	-0.5	General
Reduce Contract for Parenting Skills for 20 Families	(27,450)	0.0	General
Reduce Mental Health Services for Foster Care Families	(21,210)	0.0	General
Reduce Administration Fee for 7 Outpatient Mental Health Clinic Contracts	(14,260)		General
Shift Shelter Plus Care Funds from General Fund to Grant Fund	(9,310)	0.0	General
Shift Shelter Plus Care Funds from General Fund to Grant Fund	9,310	0.0	Grant
Decrease Contract Mental Health Services for Consumers in Assisted Living	(9,020)	0.0	General
Shift Community Mental Health Grant costs from Personnel Costs to Operating Expenses	-	-0.1	Grant
Miscellaneous Adjustments	2,892,270	9.7	General and Grant

**1. Add Family Intervention Specialist
+\$145,000 and 1.0WY – Grant Fund (not a new function)**

The purpose of this effort is to intervene with youth and their families, assess their needs, and engage them into needed treatment to break the cycle of violence and re-offending. Treatment may include drug treatment, job placement, anger management, and others. This budget action is because the position is being moved into a grant for FY12 that was not available in FY11. **Council staff recommends approval.**

**2. Eliminate the Hospital Diversion Program funded by the State Senior Outreach Response Team (SORT) Grant
(\$989,220) and (5.0)WYs – Grant Fund**

Last spring, the Council discussed that the State was reducing the Senior Outreach Team grant funding by \$387,640. A part of the SORT grant was to be used for a Hospital Diversion program that would allow the evaluation and referral to community placements of seniors who are at risk of psychiatric hospitalizations. In FY10, the County received \$979,000 for the SORT grant. The FY11 budget assumed that the County would receive \$1,190,640 (which it did not). The result of State action is that the amount the County expects to receive in FY12 is \$201,420. This is a \$998,220 reduction from budget to budget. Five Therapist II positions that were to be funded by the SORT grant are being abolished. They are currently vacant because these reductions have already occurred.

The County does continue to provide some services for this purpose through contract services. Attached at © 57-58 is information from The Sante Group on senior services provided in Montgomery County. In FY10, 961 home visits were provided by the Senior Outreach Program and 427 home visits were provided by the Hispanic Outreach Program. In addition, 242 seniors attended “drop-in groups” provided at five senior centers and there were 143 consultations with staff from Aging and Disabilities.

**3. Abolish a Full-time Supervisory Therapist
Abolish a Part-time Therapist II in the Child and Adolescent Mental Health Clinic
(\$222,550) combined and (1.6) WYs**

These particular reductions to the County’s Child and Adolescent Mental Health Clinic are not expected to impact direct services because the part-time Therapist position is currently vacant and the Supervisory Therapist position, while filled, is not providing direct treatment. However, Council staff notes that this clinic is a very important part of the child and adolescent mental health system as it serves children that are not eligible for the fee-for-service public mental health system or have needs not addressed through contractual providers. **Council staff recommends approval.**

In terms of the public mental health system, in FY10, 3,885 children and adolescents were served (a 11% increase from FY09) as well as 624 transition age youth (an 18% increase

from FY09). Interestingly, the cost to the State’s system for treating adolescents in Montgomery County declined because of the reduced use of residential treatment centers.

4. Eliminate Attachment and Bonding Support for Child Welfare Clients (\$57,630) and 0.0WYs

This issue is addressed on page 6 of the packet under Children, Youth, and Families.

**5. Decrease Cost of Residential Rehabilitation Supplement by 5%
Transfer a portion of Cost for Residential Rehabilitation Supplement for Transition Age Youth from General Fund to Grant Fund (\$56,850) and 0.0WYs**

This is a \$56,850 reduction to the General Fund but is two separate policy decisions.

5(a) 5% reduction - \$44,565

As with the County DD Supplement, Montgomery County has given a supplement to providers of residential rehabilitation services. Residential rehabilitation services are funded by the State through a fee-for-service system but because of the higher cost of housing in Montgomery County compared to other areas of the State, the County has provided this supplement to help defray costs. The subsidy has been based on the number of beds the vendor provides to the system.

The Executive is recommending a 5% reduction in the subsidy for 3 vendors.

	Beds	FY11 Funding	5% Reduction	FY12 Funding
Family Services Inc	76	189,965	9,498	180,467
Rock Creek Foundation	30	71,942	3,597	68,345
St. Luke’s House*	103	315,657	15,783	299,874
Threshold Services	109	313,750	15,687	298,063
Total Reduction		891,314	44,565	846,749

*two contracts

At the worksession on Aging and Disabilities Services, the HHS Committee decided to recommend restoration of the DD Supplement but to place the restoration on the reconciliation list in two increments. The first would result in a 3% reduction and the second would restore the cut completely. **If the Committee wants to make a similar recommendation for the supplement for residential rehabilitation, the first increment would be \$17,830 (which would leave a 3% reduction) and the second increments would be \$26,735.**

5(b) Shift from General Funds to Grant Funds - \$12,280

For two providers of residential services to Transition Age Youth, the supplement amount would not be reduced in FY12 but it would be shifted from the General Fund to Grant Funds.

	FY11 Funding	Amount of Shift	% Being Shifted
Community Connections	57,594	7,940	13.8%
Guide	31,474	4,340	13.8%

Services to Transition-Aged Youth are a priority for the Department and the focus of work being completed under the funding from the Casey Foundation. Council staff recommends approval of this shift but notes that it then reduces by \$12,280 grant funding that would have previously been used for other purposes. **Council staff recommends approval.**

6. Eliminate Part-time Program Manager I in Office of Consumer Affairs (\$44,430) and (0.5)WYs

This is the reduction of a part-time filled position. The Department will assign the workload to the other remaining staff. **Council staff recommends approval.**

7. Reduce Contract for Parenting Skills for 20 Families (\$27,450) and 0.0WYs

This issue is addressed on page 6 of this packet under Children, Youth, and Families.

8. Shift Shelter Plus Funding from General Fund to Grant Fund \$0 and 0.0WY net change – (\$9,310 from the General Fund)

The Department has proposed shifting \$9,310 in funding for the contract for Shelter Plus Care program from the General Fund to the Grant Fund. There is no reduction to the program. **Council staff recommends approval.**

9. Decrease General Fund portion of Contract for Consumers in Assisted Living (\$9,020) and 0.0WYs

The total FY11 contract for these services is \$676,744 of which \$9,020 is from the County General Fund and the remainder is funded through the State’s Community Mental Health Grant. The loss of County funds will reduce the contract by about 1%. **Council staff recommends approval.**

The next item addressing recent changes to the Community Mental Health Grant. There is a \$100,000 reduction to the base of this contract. The Committee should discuss with the Department the expected impact from this reduction.

10. Changes to State’s Community Mental Health Block Grant since the March 15th Budget

DHHS has provided the following information regarding the revised amount for the Community Mental Health Grant.

The FY12 budget for the Community Mental Health Grant is \$4.7 million, which is pending DHMH approval.

This includes a \$331,000 reduction to both Core Service Agency Personnel and OE budgets, and reductions in several vendor contracts. There is no state fund reduction to the Silver Spring Wellness Center budget in FY12.

The proposed state reductions in FY12 are:

	State Reductions
Personnel	34,000
Miscellaneous Operation	11,000
CLARC	39,000
On Our Own	71,000
MHA-Transportation	34,000
OMHC Administrative Fee	42,000
Adventist - Potomac Manor	100,000
Total	331,000

As noted in the above table, one of the additional reductions that is proposed is to the **Computer Learning and Resource Center (CLARC)**. Last year, the Council concurred with the Executive’s recommendation to eliminate \$47,370 in County Funding for this program that provides job training and computer literacy programs for individuals who have experienced serious and persistent mental illness. CLARC continued to receive funding through the Community Mental Health Grant. The Department had informed CLARC that the State had requested that CLARC move toward a fee-for-service model and away from a grant funded model. The impact of the FY11 reduction was that CLARC eliminated a computer training instructor. CLARC has told the Department they will try to move toward billing for services but this transition has not started and may be difficult without an instructor and with some of the program being provided through a drop-in program.

Public Hearing testimony provided by CLARC is attached at © 59-70. In addition, the County Executive is recommending a Community Grant of \$16,000 for CLARC’s wellness program. CLARC has also applied for a Council Grant in the amount of \$43,500 which would help to restore funding eliminated in FY11. The Executive’s Community Grant and the Council

grant will be a part of the full Council's review of Community Grants (tentatively scheduled for May 17th).

A reduction is proposed for the On Our Own organization. The organization has not been fully operational but is reorganizing and is identified by the State as a consumer run organization. It is not clear what the impact of this reduction will be in FY12 given the organization's current status.

In addition to CLARC and On Our Own, a third wellness and recovery center is run by Affiliated Sante (Silver Spring Wellness and Recovery Center). There are no additional reductions recommended for this program. In FY11, the County provided \$29,726 and the States' Community Mental Health Grant provided \$76,500 for this program. Affiliated Sante has applied for a \$50,000 Council Grant. As with CLARC, the grant request will be addressed by the full Council on grants day.

11. Reduce Funds for Outpatient Mental Health Clinic Administrative Fee by 5% (\$4,350) and 0.0WYs

This reduction is not specifically shown in the budget book. The Department is proposing reducing the County funds provided to three vendors to assist with their clinic administrative funds. The reductions are recommended for Adventist Healthcare (\$194); Affiliated Sante (\$1,900) and Family Services, Inc. (\$2,256). **Council staff recommends approval.**

12. Miscellaneous Adjustments \$2,892,270 and 9.7WYs

In addition to the restoration of furloughs, accounting for group benefit adjustments, and other minor budget changes, the miscellaneous changes for this program area include the shifting of positions from the Juvenile Justice Program. **Council staff recommends approval.**

B. Behavioral Health Specialty Services

The Executive is recommending funding of \$2,432,720 and 18.1 workyears for this program that provides assessment, diagnostic evaluation, psychotropic medication evaluation, medication management, individual, family, and group therapy, and case management services. The program has been working to increase service to English limited clients and those with specialized cultural needs. The program also provides immediate (but brief) case management, therapy, and medication services to people being discharged from a hospital or jail until they can be linked into the community outpatient system.

Behavioral Health Specialty Services	Dollars	WYs	Fund
Miscellaneous Adjustments	(69,540)	0.5	General and Grant

The only recommended changes are miscellaneous adjustments. **Council staff recommends approval.**

C. Behavioral Health Community Support Services

The Executive is recommending \$6,597,220 and 20.5 workyears for this program area that houses Community Case Management Services, the Urine Monitoring Program, and the Program/Contract Monitoring Unit. Program/Contract Monitoring ensures compliance by certified providers that provide de-tox services, outpatient and intensive outpatient treatment, residential halfway houses and long-term residential care for people with addiction or co-occurring disorders.

Behavioral Health Community Support Services	Dollars	WYs	Fund
Abolish FT Social Worker IV Supervisory Position	(102,780)	-1.0	General
Reduce Lawrence Court Half Way House Program	(130,600)	0.0	General
Miscellaneous Adjustments	(111,100)	0.6	General and Grant

1. Abolish Full-time Social Worker IV Supervisory Position (\$102,780) and (1.0) WYs

The Department has determined that it can reassign supervisory duties and abolish this position. **Council staff recommends approval.**

2. Reduce Funds for Lawrence Court Halfway House Program (\$130,600) and 0.0 WYs

For FY11, the County has \$346,750 in the BHCS budget for services provided by the Lawrence Court Halfway House. Lawrence Court provides treatment and transitional housing 18 people (generally 12 men and 6 women). These people have gone through de-tox and initial substance abuse treatment but need time in a transitional, structured program. They are generally in the program 3 to 6 months and pay about \$75 per week, depending on their income.

The Department is recommending a \$130,600 reduction to this contract for FY12. This reduction is based on the assumption that the program will move into a fee-for-service structure once it is certified as an outpatient intensive treatment program. Reimbursement for billed services would then go directly from the State to the vendor, resulting in the need for less money from the County. The Department's budget assumption is that Lawrence Court will be able to start the fee-for-service billing July 1. The Department notes that in addition to reimbursement from Medicaid/PAC that the State has also received an Access to Recovery Grant from SAMHSA that may provide funding to Lawrence Court.

Council staff understands that the vendor is working cooperatively with the Department to put a fee-for-serve structure in place. However, Council staff understands that there is work that still needs to be completed and that it is unlikely that billing can start at the beginning of FY12. The Alcohol and Other Drug Abuse Council asked the County Council to restore \$70,000 to the Lawrence Court program to assist with this transition and put it on a more reasonable timeframe.

Council staff agrees and recommends the Committee put \$70,000 on the reconciliation list for this purpose. The HHS Committee has previously discussed some other transitions that have required more time than was originally allocated in the budget. This halfway house program is an important part of the County treatment system and it would be unfortunate if it could not serve the maximum number of clients during FY12.

In addition to discussing this issue, the Committee may also want to discuss with the Department the trends and capacity in the Level 1 (outpatient) segment of the substance abuse treatment system. During the last two years, there have been substantial reductions in the County grant funding of these services, but as is the case in other parts of the system, some of this is because programs have been required to move to a fee-for-service model. The budget data indicates that in FY10, 763 people were served and that this has now dropped to 450. Is the system as a whole really able to serve only about 450 or are others being served directly through fee-for service program? If not, does the Department have any estimates of the unmet need in this treatment area?

3. Miscellaneous Adjustments
(\$111,100) and 0.6WYs

Miscellaneous adjustments account for the restoration of furloughs, group benefit adjustments, and other minor budget changes. **Council staff recommends approval.**

D. Criminal Justice Behavioral Health Services

The Executive is recommending \$2,403,550 and 19.1 workyears for this program that provide the Clinical Assessment and Triage Services Team (CATS), Community Re-Entry Services (CRES) program, and the Jail Addiction Service (JAS) program to people being booked into (CATS), released from (CRES), or residing at (JAS) the county jail.

Criminal Justice/Behavioral Health Services	Dollars	WYs	Fund
Miscellaneous Adjustments	(79,950)	0.6	General and Grant

The only recommended changes are miscellaneous adjustments. **Council staff recommends approval.**

E. Outpatient Addiction Services

The Executive is recommending \$3,853,000 and 29.2 workyears for this program area that provides comprehensive outpatient treatment, treatment and case management for Drug Court clients, and medication assisted treatment to county residents.

Partial Year General Funds for FT Therapist II in Drug Court (End of SAMHSA Grant)	59,100	0.6	General
Adult Drug Court - Shift from Personnel Cost to Operating Exepense	-	(1.1)	Grant
Abolish FT Supervisory Therapist in Drug Court and FT Therapist II in C	(229,920)	(2.0)	General
Miscellaneous Adjustments	138,200	0.8	General and Grant

1. Partial Year General Funds for FT Therapist II in Drug Court + \$59,100 and 0.6WYs

The Adult Drug Court has been funded in part by a SAMHSA Capacity Expansion Grant which allowed the Adult Drug Court to grow from an original capacity of 30 to 100. This grant will end in FY12 (September 2011). The Department recommends continuing this Therapist position with General Funds once the grant expires. There are regulations regarding the caseload for Therapists and so a reduction in Therapist directly impacts the capacity of the program.

Council staff recommends approval.

2. Technical Change – Shift workyears from personnel cost to operating expenses \$0 and 1.1WYs

This is an alignment of the workyears with the expenditures. **Council staff recommends approval.**

3. Abolish Full-time Supervisory Therapist in Adult Drug Court Abolish Full-time Therapist II in Outpatient Addiction Services (\$229,920) and (2.0)WYs

These positions have been grouped together although they are from two separate programs. The Supervisory Therapist is not expected to impact the capacity of the Drug Court because it is not providing direct service. The workload associated with the abolishment of the Therapist in Outpatient Addiction Services will be re-distributed. **Council staff recommends approval.**

4. Miscellaneous Adjustments
\$138,200 and 0.8WYs

Miscellaneous adjustments account for restoration of furloughs, group benefit adjustments, and other minor budget changes. **Council staff recommends approval.**

F. Domestic Violence, Sexual Assault, and Trauma Services Program

The Executive is recommending \$4,623,890 and 27.2 workyears for this program which provides information, referral, psychiatric services, court accompaniment, and other services to victims of sexual assault and other crimes.

Abolish 2 PT and 1 FT Therapist II Positions - VASAP	(345,610)	(2.6)	General
Eliminate Contract for Human Trafficking Outreach Education and Legal Services - VASAP	(62,570)	-	General
Abolish Grant Funding for Staff at Silver Spring Courthouse	(21,610)	(0.3)	Grant
Net Change to Victim Compensation Fund Match	1,890	-	General
Miscellaneous Adjustments (includes APP Move)	2,457,230	11.7	General and Grant

1. Abolish 2 Part-Time and 1 Full-time Therapist II positions in VASAP
(\$345,610) and (2.6) WYs

This specific reduction is part of a reorganization within DHHS to combine the Abused Persons Program (APP) and the Victim Assistance and Sexual Assault Program (VASAP), align services with the Family Justice Center, and make some changes in the service delivery model to crime victims. Some of the budget changes are included in the “miscellaneous adjustments” for this program area.

Currently:

- The **Abused Persons Program** is headed by a Manager III position.
- There are 2 Supervisory Therapist positions, a part-time psychiatrist (.25WYs), and a Program Manager providing supervision
- There are 6 Therapist positions
- There are 7 Client Assistant Specialists
- There is one Full-time and one Part-time Principal Administrative Aide

- **VASAP** is headed by a Manager III position.
- There are 2 Supervisory Therapists and a contract psychiatrist providing supervision.
- There are 10 Therapist positions
- There are 6 Client Assistant Specialists
- There is one Office Services Coordinator and one full-time and one part-time Principal Administrative Aides.

The following changes are proposed:

- One of the Manager III positions will be abolished and both APP and VASAP will be headed by one Manager III.
- Three Client Assistance Specialists will be transferred to the Sheriff's Office as they serve clients at the Family Justice Center. While there is not reduction to the overall County budget, there is reduction to the DHHS budget and an increase to the Sheriff's budget from this change (\$179,620 and 2.5WYs).
- Three Therapist positions will be abolished. Two of these positions are filled and one is vacant.
- Two part-time vacant Client Assistant Specialist positions are being abolished.
- The combined program will have 4 Supervisory Therapists and one Program Manager to oversee 13 Therapists and 11 other staff.
- Eliminate contract for legal services (\$42,890)

The APP and VASAP programs are extremely important resources for all victims of crime (VASAP) and specifically victims of domestic violence (APP). Information on VASAP, APP, and the Family Justice Center is at © 71-80. The Council has received testimony and correspondence from several people sharing their personal stories of the help they have received. Generally, therapists have a caseload of 40-50 clients. There is a waiting list of about 10 at any given time. However, when the Department was faced with reductions throughout the behavioral health section, it determined that it can reduce the administration of these programs and shift the service delivery model with less impact on the mental health system than would result from having to take additional reductions in other areas of the overall service area.

The Department is also looking at changes in the service model. Currently, while most victims are served for a relatively short period of time (less than one year) some are served for several years. The Department is looking to shift to more of a trauma response model, which is the model used in the Safe Start program that serves children who have observed domestic violence. Under such a model, therapy is provided for a limited time and then if an assessment is made that the client needs longer term care, they are transitioned to private insurance or the public system through the Access Team. Such changes should allow the programs to serve the same number of clients with fewer staff therapists.

In addition to the changes in DHHS, there is a \$254,420 and 3 workyear reduction recommended in the Police Department which would abolish 3 of 6 of the Client Service Assistant who provide victims services in the six District Stations. Currently, the Victim Assistants reach out to victims of all types of crimes (misdemeanors and felonies), provide on-site assistance, may transport victims, and help victims in obtaining reports and applying for compensation benefits. They refer to many programs including the Crisis Center, APP, Adult Protective Services, the Montgomery County Mediation Center, and Immigration Services. Under the proposed reduction, one Victim Assistance would now be responsible for two police districts. In 2010, 8,993 victims were served with 1,063 of those related to a domestic violence crime (© 81-86). Under the proposed reduction, the Police Department expects there will be little ability to reach out to victims of Part II crimes and less ability to assist domestic violence victims. There will be a loss of language capacity in the Police Department.

Lastly, while this item shows up later in the Abused Persons Program, the Department is recommending the elimination of the contract with Catholic Charities to provide legal assistance to women who are victims of domestic violence. The Department is making this recommendation for budgetary purposes but also expects that there are other programs and pro-bono services that will help to fill any gap.

Council staff has the following recommendations and comments:

Council staff recommends approval of the merging of the APP and VASAP programs and agrees that a single Manager III can oversee both.

Council staff recommends approval of the transfer of the 3 Client Assistant Specialists as these positions are aligned with the Family Justice Center. Staff from the Family Justice Center has said this is an appropriate move.

Council staff recommends approval of the reduction of the one vacant and two filled Therapist positions (that would now be in the combined program) with the understanding that the Department is working to change their service model and that the Department will provide an update to the HHS Committee in November on how the programs have been reconfigured and any wait lists that have occurred.

Council staff recommends approval of the elimination of the contract for legal services.

Council staff is concerned about the reduction in the Police Department's victim assistance program and the impact it may have on referrals to other programs and services such as victim transport and assistance with applying for compensation. While some reduction is probably appropriate, a 50% reduction may be too significant. Council staff is taking this issue back to the Public Safety Committee for further review.

***2. Eliminate Client Assistant Specialist at the Silver Spring Courthouse
(\$21,610) and (0.3)WY***

This position has already been abolished because the ARRA grant that was covering the cost has ended. Last spring, the Committee was informed that this grant would end during FY11. Volunteers are providing some outreach services two days per week. **Council staff recommends approval.**

***3. Increase Victims Compensation Fund Match
+\$1,890***

This provides the required increased funding for the Victims Compensation Fund. Council staff notes that the Victim Service Advisory Board's shares that they were able to raise

over \$5,000 in donations for the fund and that they are going to continue to explore ways to raise additional funds to assist victims. **Council recommends approval.**

4. Eliminate Contracts for Human Trafficking Education, Outreach, and Legal Services (\$62,570)

This reduction will eliminate the contract with CASA de Maryland, Inc. to help educate people about human trafficking and provide legal and social services to victims. The Department has recommended eliminating this contract for budgetary reasons.

Council staff recommends approval in terms of the DHHS budget. CASA de Maryland has applied for a Council grant to continue this program. This grant will be a part of the worksession at the full Council in Council grants.

5. Miscellaneous Adjustments +\$2,457,230 and 11.7WYs

In addition to the restoration of furloughs, accounting for group benefit adjustments, and other minor budget changes, the miscellaneous changes for this program area include the shifting of positions from the Abused Persons Program. **Council staff recommends approval.**

G. Child and Adolescent Mental Health Services

The Executive is recommending \$2,961,520 and 16.6 workyears for this program that provides comprehensive mental health treatment to children, youth, and their families through Child and Adolescent Mental Health Services, the Home-based Treatment Team, and the System of Care Development and Management Team.

Child and Adolescent Mental Health	Dollars	WYs	Fund
Mental Health and Substance Abuse Services to 3 Families	(2,390)	-	General
Miscellaneous Adjustments	(114,540)	0.6	General and Grant

1. Mental Health and Substance Abuse Services to 3 Families (\$2,390)

This is a 5% reduction to the contract with the Jewish Social Service Agency and will leave \$45,320 in place to provide mental health and substance abuse services to low-income children and their families. **Council staff recommends approval.**

2. Miscellaneous Adjustments
(\$114,540) and 0.6WYs

Miscellaneous adjustments account for the restoration of furloughs, group benefit adjustments, and other minor budget changes, the miscellaneous changes for this program area. **Council staff recommends approval.**

H. 24-Hour Crisis Center

The Executive is recommending \$3,986,910 and 33.9 workyears for this program that provides telephone, walk-in, mobile crisis outreach, and residential services to people experiencing a situational, emotional, or mental crisis.

24-Hour Crisis Center	Dollars	WYs	Fund
Reduce Taxi Services for Crisis Center and Abused Persons Program	(2,640)	-	General
Shift Funding for Crisis Hotline to Community Mental Health Grant	(5,910)	-	General
Miscellaneous Adjustments	(158,880)	-0.1	General and Grant

1. Reduce Taxi Service for Crisis Center and Abused Persons Program
(\$2,640)

This is a 10% reduction in the amount available for taxi cab vouchers. About \$20,000 will remain in the budget. **Council staff recommends approval.**

2. Shift \$5,910 in Funding for the Crisis Hotline to Mental Health Grant

The Department proposes shifting a portion of the cost of the crisis hotline to grant funding. There would be no change in service. **Council staff recommends approval.**

3. Miscellaneous Adjustments
(\$158,880) and (0.1)WY

Miscellaneous adjustments account for the restoration of furloughs, group benefit adjustments, and other minor budget changes, the miscellaneous changes for this program area. **Council staff recommends approval.**

I. Mental Health Services for Seniors and Persons with Disabilities

The Executive is recommending \$608,880 and 2.0WYs for this program that provides outreach mental health services for seniors who cannot or will not access office based services as well as working with stressed caregivers. The program also provides mental health services to people who are hearing impaired.

Mental Health Srv - Seniors and People w/Disabilites	Dollars	WYs	Fund
Miscellaneous Adjustments	(18,010)	0	General and Grant

I. Miscellaneous Adjustments (\$18,010) and 0WYs

Miscellaneous adjustments account for the restoration of furloughs, group benefit adjustments, and other minor budget changes, the miscellaneous changes for this program area. **Council staff recommends approval.**

J. Abused Persons Program

The Executive has recommended merging this program with victim services that were discussed as Item F in this memo.

Abused Persons Program	Dollars	WYs	Fund
Stop Domestic Violence Now Grant - Shift from Personnel to Operating	-	(0.5)	Grant
Eliminate Gudelsky Foundation Grant	(15,000)	-	Grant
Eliminate Legal Services for Women Program	(42,980)	-	?
Abolish FT Manager III due to Consolidation	(162,140)	(1.0)	General
Abolish 2 Client Assistant Specialists			
Shift 3 Client Assistant Specialists from DHHS to Sheriff			
Miscellaneous Adjustments	(2,603,800)	-10.8	General and Grant

K. Service Area Administration

The Executive is \$555,050 and 3.8 workyears in this program that includes service wide administration. The only recommended changes are miscellaneous adjustments. **Council staff recommends approval.**

Service Area Administration	Dollars	WYs	Fund
Miscellaneous Adjustments	(1,330)	0.1	General and Grant

Children, Youth, and Family Services

FUNCTION

The mission of Children, Youth, and Family Services is to promote opportunities for children to grow up safe, healthy, ready for school, and for families and individuals to be self-sufficient. This mission is realized through the provision of protection, prevention, intervention, and treatment services for children and their families, and through education, support, and financial assistance for parents, caretakers, and individuals. These services work to build on the strengths of both the individual and the community in addressing issues of child development, abuse, neglect, health, and economic security.

PROGRAM CONTACTS

Contact Kate Garvey of the HHS - Children, Youth, and Family Services at 240.777.1101 or Trudy-Ann Durace of the Office of Management and Budget at 240.777.2778 for more information regarding this service area's operating budget.

PROGRAM DESCRIPTIONS

Child Welfare Services

This program provides protective, rehabilitative, and supportive services for children who are maltreated and for their families. This program also provides supportive and financial help to relatives, foster, and adoptive parents. Investigations, protective services, kinship care, foster care, adoption, and in-home aide services are also provided through this program. Family Preservation Services provide social services to families with children who are at risk of removal from home due to neglect or abuse.

Program Performance Measures	Actual FY09	Actual FY10	Estimated FY11	Target FY12	Target FY13
Percent of reduction in the number of children placed in out-of-home care ¹	0	5	10	10	10
Percentage of families receiving in-home services who do not have a child protective service investigation with an abuse or neglect finding within one year after receiving services	95	98	98	98	98

¹ In FY09, a greater focus on the use of relative and community members enabled more children to remain with their parents, thus reducing the number of children in out-of-home care.

FY12 Recommended Changes	Expenditures	WYs
FY11 Approved	21,524,050	202.7
Shift: Funding to Multicultural Intervention Project for Victims of Child Abuse From HB669	300,000	3.0
Replace: VOCA Grant - For Two Full-time Community Services Aide III Positions	148,050	2.0
Decrease Cost: Court Appointed Special Advocate Contractual Services	-5,200	0.0
Decrease Cost: Post-Adoption Contractual Services	-9,690	0.0
Decrease Cost: Tree House Contract for Abused Children	-25,420	0.0
Reduce: Abolish Two Full-time Social Worker Positions	-242,470	-2.0
Miscellaneous adjustments, including restoration of employee furloughs, employee benefit changes, changes due to staff turnover, reorganizations, and other budget changes affecting more than one program	-70,200	0.2
FY12 CE Recommended	21,619,120	205.9

Notes: Miscellaneous adjustments include HB669 shifts (captured in the department-wide crosswalk) and mid-year creation of two part-time positions.

Conservation Corps

The Conservation Corps has shifted from Children Youth and Family Services to Behavioral Health Planning and Management in Behavioral Health and Crisis Services.

FY12 Recommended Changes	Expenditures	WYs
FY11 Approved	400,000	3.7
Eliminate: Conservation Corps Contract with Offsetting Reduced Scope Program in Economic Development	-417,630	-3.7
Miscellaneous adjustments, including restoration of employee furloughs, employee benefit changes, changes due to staff turnover, reorganizations, and other budget changes affecting more than one program	17,630	0.0
FY12 CE Recommended	0	0.0

Notes: Miscellaneous adjustments include the elimination of this program.

Linkages to Learning

This program is a collaboration among the Department of Health and Human Services (HHS), Montgomery County Public Schools, and local public and private human service agencies to provide school-based prevention and early intervention services to students and families of elementary and middle school communities with the highest indicators of poverty. These integrated social, health, mental health, and educational support services are designed to address the non-academic issues that may interfere with a child's success in school.

Program Performance Measures	Actual FY09	Actual FY10	Estimated FY11	Target FY12	Target FY13
Percentage of clients receiving mental health services who demonstrated maintained or improved behavior at termination of treatment, regardless of reason for termination ¹	82	79	80	80	80
Percentage of clients satisfied with services	94	96	95	95	95

¹ The Department has been seeing a higher degree of complexity in cases being referred over the past year, seemingly in direct proportion to the economic crisis and its effect on families. This coupled with the administrative burdens on therapists has caused a slight decline.

FY12 Recommended Changes	Expenditures	WYs
FY11 Approved	4,893,390	5.3
Eliminate: Abolish Two Part-time Therapists II Positions in the Linkages to Learning Therapeutic Recreation Program	-125,300	-1.0
Miscellaneous adjustments, including restoration of employee furloughs, employee benefit changes, changes due to staff turnover, reorganizations, and other budget changes affecting more than one program	-14,660	0.3
FY12 CE Recommended	4,753,430	4.6

Juvenile Justice Services

Juvenile Justice Services has shifted from Children Youth and Family Services to Behavioral Health Planning and Management in Behavioral Health and Crisis Services.

FY12 Recommended Changes	Expenditures	WYs
FY11 Approved	3,565,750	12.3
Decrease Cost: Abolish a Full-time Principal Administrative Aide Position and Absorb in the Urine Monitoring Program	-82,070	-1.0
Reduce: Public Education and Prevention Grant	-118,070	0.0
Reduce: Community Mental Health Grant	-157,620	-1.0
Miscellaneous adjustments, including restoration of employee furloughs, employee benefit changes, changes due to staff turnover, reorganizations, and other budget changes affecting more than one program	-3,207,990	-10.3
FY12 CE Recommended	0	0.0

Notes: Miscellaneous adjustments includes the shift of this program to Behavioral Health Planning and Management.

Positive Youth Development

This program focuses on positive youth development, gang prevention, and intervention for those youth who are at-risk of gang involvement and those already involved in gang activity. The key elements include a Youth Violence Prevention Coordinator that manages and monitors the following: an Up-County and Down-County Youth Opportunity Center, High School Wellness Center, and the Street Outreach Network. Services and supports are provided through community based work, community education, service provision and partnerships.

FY12 Recommended Changes	Expenditures	WYs
FY11 Approved	2,361,560	5.8
Add: Family Intervention Grant - Positive Youth Development	64,300	1.0
Add: American Recovery and Reinvestment Act (ARRA)-FY09 Justice Assistance Grant (JAG) Recovery Grant	60,010	0.5
Decrease Cost: Miscellaneous Operating Expenses for Positive Youth Development	-20,040	0.0
Eliminate: Up County Youth Opportunity Center Grant	-450,000	0.0
Miscellaneous adjustments, including restoration of employee furloughs, employee benefit changes, changes due to staff turnover, reorganizations, and other budget changes affecting more than one program	23,170	0.2
FY12 CE Recommended	2,039,000	7.5

Early Childhood Services

This program focuses on increasing the quality of early care and education programs available to young children throughout Montgomery County through technical assistance, consultation, and training for providers. This program also includes the development of strategies to increase the supply of quality early care and education programs and services. Parent Support Services

2

(now titled Family Support Services) program was previously a separate program, but is now included in Early Childhood Services. These support services delivered through contracts between HHS, the State, and private non-profits, support parents as their children's first and most important teacher. The services primarily target families and children with risk factors such as, poverty, health issues, and isolation. They include voluntary screening of newborns and services such as, "Learning Parties, home visits, health and parenting education, screening of children to identify special needs, and family support.

Program Performance Measures	Actual FY09	Actual FY10	Estimated FY11	Target FY12	Target FY13
Percentage of families that are receiving parent support services that do not have involvement with child welfare by the time the child is five years old	100	100	100	100	100
Percentage of family child care workforce who successfully completed one or more trainings offered by the Montgomery County Child Care Resource and Referral Center ¹	40	40	45	50	50

¹ Due to the impact of the economy on child care providers and increased training fees (due to the budget cuts to the Child Care Resource and Referral Center), participation in training classes is down and expected to take a few years to recover.

FY12 Recommended Changes	Expenditures	WYs
FY11 Approved	3,209,640	13.1
Decrease Cost: Community-Based Pre-Kindergarten Contract	-16,290	0.0
Reduce: Abolish a Full-time Program Manager I Position	-106,340	-1.0
Decrease Cost: Technical Services Contract to New Child Care Providers	-109,030	0.0
Reduce: Child Care Resource and Referral Grant	-141,720	-1.7
Miscellaneous adjustments, including restoration of employee furloughs, employee benefit changes, changes due to staff turnover, reorganizations, and other budget changes affecting more than one program	15,780	0.5
FY12 CE Recommended	2,852,040	10.9

Notes: Miscellaneous adjustments include the creation of a part-time Program Manager II position.

Infants and Toddlers

This program, provides evaluation, assessment, family support, and early intervention services to families with children from birth to age five when there is a concern about development, or when a developmental delay is documented. The services are delivered using a family-centered approach and are provided by staff employed by Montgomery County Public Schools, HHS, and private community service providers.

Program Performance Measures	Actual FY09	Actual FY10	Estimated FY11	Target FY12	Target FY13
Number of children served	3,825	3,952	3,952	3,952	3,952
Percentage of families that understand their child's special needs	82	82	82	82	82

FY12 Recommended Changes	Expenditures	WYs
FY11 Approved	3,531,840	10.8
Enhance: Maryland Infants and Toddlers Grant	187,930	0.0
Miscellaneous adjustments, including restoration of employee furloughs, employee benefit changes, changes due to staff turnover, reorganizations, and other budget changes affecting more than one program	-42,120	0.1
FY12 CE Recommended	3,677,650	10.9

Child Care Subsidies

This program provides child care subsidies and support for eligible low-income families who work or are in a work activity and families receiving Temporary Cash Assistance, and actively participating in job search or job preparation, or another work activity. The Child Care Subsidy Program is the single point of entry for both the State and Federally-funded Purchase of Care program and the County's Working Parents Assistance program.

Program Performance Measures	Actual FY09	Actual FY10	Estimated FY11	Target FY12	Target FY13
Number of families authorized to receive a subsidy (per fiscal year) ¹	582	537	540	540	540

¹ This is calculated as the number of families with approved vouchers for any portion of the fiscal year. Note that not all approved vouchers are fully used.

FY12 Recommended Changes	Expenditures	WYs
FY11 Approved	3,803,430	22.3
Reduce: Working Parents Assistance Program Subsidies (No Reduction to Families Already Enrolled)	-50,000	0.0
Decrease Cost: Abolish a Full-time Income Assistance Program Specialist III Position	-66,280	-1.0

	Expenditures	WYs
Miscellaneous adjustments, including restoration of employee furloughs, employee benefit changes, changes due to staff turnover, reorganizations, and other budget changes affecting more than one program	-562,830	-4.9
FY12 CE Recommended	3,124,320	16

Notes: Miscellaneous adjustments include the shift of 4.0 workyears to Income Supports, a Manager II position to this Service Area Administration, and a part-time position from the Office of the Chief Operating Officer to this program.

Income Supports

This program serves low-income families and individuals facing significant challenges by providing basic resources of cash assistance, food supplements, and medical assistance. This program determines eligibility for: Temporary Cash Assistance (TCA); Temporary Disability Assistance Program (TDAP); Refugee Cash Assistance (RCA); Food Supplement Program (FSP) (formerly known as Food Stamps); Community Medical Assistance (MA), and Refugee Medical Assistance. This program also manages a required employment program for applicants and recipients of TCA.

Program Performance Measures	Actual FY09	Actual FY10	Estimated FY11	Target FY12	Target FY13
Percentage (increase) in families accessing Food Stamps as a support to self sufficiency measured as the number of families applying for Food Stamp assistance (compared to FY05 as the base year)	57	87	119	125	125
Average 12 month earnings gain rate for current and former Temporary Cash Assistance (TCA) recipients who are placed in jobs (%) ¹	92	NA	60	60	60
Average 12 month job retention rate for current and former TCA recipients who are placed in jobs (%) ²	73	NA	80	80	80

¹ FY09 is the most recent data available for this measure due to an 18 month time lag.

² FY09 is the most recent data available for this measure due to an 18 month time lag.

FY12 Recommended Changes	Expenditures	WYs
FY11 Approved	15,388,730	145.6
Replace: HB669 Grant - Income Support Triage and Greeters	106,200	0.0
Miscellaneous adjustments, including restoration of employee furloughs, employee benefit changes, changes due to staff turnover, reorganizations, and other budget changes affecting more than one program	1,004,840	9.5
FY12 CE Recommended	16,499,770	155.7

Notes: Miscellaneous adjustments include the shift of 4.0 workyears from Child Care Subsidies, the shift of a Manager III position from Behavioral Health and Crisis Services, the mid-year creation of a Program Manager position, and the shift of 1.0 workyear from the Office of the Chief Operating Officer to this program.

Child and Adolescent School and Community Based Services

Services provided through this program include respite care, community empowerment efforts, single-parent family services, family services, youth services, and family outreach efforts. The program also provides for the coordination, planning, and implementation of a number of key interagency initiatives among public and private agencies in the community to meet the needs of children, youth, and their families.

Program Performance Measures	Actual FY09	Actual FY10	Estimated FY11	Target FY12	Target FY13
Percentage of juveniles who received services from these contract providers and demonstrated a reduction in risky behavior	92	90	90	90	90

FY12 Recommended Changes	Expenditures	WYs
FY11 Approved	3,201,190	3.0
Decrease Cost: Non-Safety Net Services to Low-Income Vietnamese Families	-3,330	0.0
Decrease Cost: After School and Weekend Enrichment Programs - Non-Safety Net Services	-4,850	0.0
Decrease Cost: Prevention Services Contract	-8,080	0.0
Decrease Cost: Mentoring Services and Academic Enrichment Programs - Non-Safety Net Services	-9,270	0.0
Decrease Cost: Miscellaneous Operating Expenses for Child and Adolescent School and Community Based Services	-30,450	0.0
Reduce: Saturday School Contract by 5%	-40,270	0.0
Decrease Cost: Eliminate Security Contract	-55,800	0.0
Eliminate: Contractual Services for Recruiting Volunteer Tutors for MCPS Students and Shift a Portion to Mentoring and Intergenerational Program	-60,560	0.0
Miscellaneous adjustments, including restoration of employee furloughs, employee benefit changes, changes due to staff turnover, reorganizations, and other budget changes affecting more than one program	-73,640	0.0
FY12 CE Recommended	2,914,940	3.2

Service Area Administration

This program provides leadership and direction for the administration of Children, Youth, and Family Services.

FY12 Recommended Changes	Expenditures	WYs
FY11 Approved	378,170	2.8
Miscellaneous adjustments, including restoration of employee furloughs, employee benefit changes, changes due to staff turnover, reorganizations, and other budget changes affecting more than one program	-32,580	1.0
FY12 CE Recommended	345,590	3.8

Notes: Miscellaneous adjustment includes the shift of a Manager II from Child Care Subsidies.

PROGRAM SUMMARY

Program Name	FY11 Approved		FY12 Recommended	
	Expenditures	WYs	Expenditures	WYs
Child Welfare Services	21,524,050	202.7	21,619,120	205.9
Conservation Corps	400,000	3.7	0	0.0
Linkages to Learning	4,893,390	5.3	4,753,430	4.6
Juvenile Justice Services	3,565,750	12.3	0	0.0
Positive Youth Development	2,361,560	5.8	2,039,000	7.5
Early Childhood Services	3,209,640	13.1	2,852,040	10.9
Infants and Toddlers	3,531,840	10.8	3,677,650	10.9
Child Care Subsidies	3,803,430	22.3	3,124,320	16.4
Income Supports	15,388,730	145.6	16,499,770	155.1
Child and Adolescent School and Community Based Services	3,201,190	3.0	2,914,940	3.2
Service Area Administration	378,170	2.8	345,590	3.8
Total	62,257,750	427.4	57,825,860	418.3

**FY12 CE Recommended Budget
Council Staff Questions**

General CYF Questions

Child Welfare

What three positions were shifted from the VOCA grant to the HB669? What will these three positions do?

Three (#13245, 13249, 13458) CSA III positions were shifted *from* HB669 to VOCA-funding and two positions (#13250, 15514) that were funded under the VOCA grant in HB669 were replaced with funding through County general funds, with FFP revenue reimbursement. All VOCA positions provide the following services to child abuse victims for whom English is a second language and/or for whom the U.S. is not their country of origin: case management, language interpretation and translation; information and referral; advocacy; and safety planning.

Were the two full-time social worker positions being recommended for abolishment vacant? What work did they perform? Have their responsibilities been re-assigned? What is the anticipated impact on children and their families?

Yes, the two full-time social workers positions were vacant. The Social Worker III position (#12856) had been responsible for providing clinical social work and case management services for foster children preparing to transition to independent living from foster care. This position acted as a lead worker who mentored and provided case consultation to other unit staff. Once the position became vacant, the caseload functions were absorbed by the remaining five (5) social workers in the Independent Living Unit. The Social Worker II position (#12561) had been responsible for providing clinical social work and case management services for children living with relatives. Once the position became vacant, the caseload functions were absorbed by the remaining six (6) social workers in the Kinship Unit.

What were the two part-time positions created mid-year as described in the miscellaneous adjustments for the program area?

Two part-time (.5 WY) Community Services Aide (#16599 and #16600) positions were created mid-year to staff the Family Connections/Kinship Connections Matter Project, which is a new DHR project. Both positions serve as Kinship Navigators who provide outreach services to families who are providing Informal Kinship Care. Informal Kinship Care applies when a child is living with a relative and is not in the care, custody, or guardianship of the local department. Services can include assistance in obtaining temporary cash assistance, food stamps, child support, childcare subsidies, counseling services, school enrollment and legal guardianship.

For the following contract reductions in Behavioral Health Planning and Management, please explain (1) what percent of the total contract is being proposed for reductions; (2) the rationale for the proposed reductions; (3) a description of the services provided under the contracts being recommended for reduction including numbers served for FY10 and FY11 to date, if available, and (4) the impact of the reduction, if known.

- Institute for Family Centered Services - mental health services (\$21,210)
- Families Services Agency-Frameworks for Families - parenting skills to 20 families (\$27,450)
- Reginald S. Lourie Center-attachment and bonding for services for child welfare (\$57,630)

Institute for Family Centered Services - mental health services (\$21,210)

1) 100%

- 2) The services provided under this contract are similar to services provided through other sources – such as the Home-Based Therapy Services and the Crisis Center.
- 3) This contract provides crisis and mental health services to approximately 13 children per year.
- 4) The elimination of this contract will impact approximately 13 children and foster families who will no longer have access to this service.

Families Services Agency-Frameworks for Families – Case management and parenting skills to 75 families at risk for child maltreatment (\$27,450)

- 1) 17% reduction of the total contract
- 2) BHCS held this program harmless between FY08 and FY11 in an effort to avoid reducing the service. Reductions in other BHCS programs in previous and current years now make this reduction necessary to avoid additional reductions in Behavioral Health direct service programs.
- 3) Reduction amount \$27,450 to provide service coordination and parenting skills training to referred families that are identified as at risk of child abuse and/or neglect.
- 4) This will reduce service capacity from 75 to 64 families. 11 referred families will not receive this intervention.

Reginald S. Lourie Center-attachment and bonding services for young children involved with child welfare services (\$57,630)

- 1) This reduction eliminates all funding for Child Welfare attachment and bonding services in this contract. It represents 26% of entire contract with Lourie Center. The remaining funds provide therapeutic nursing and mental health support services for emotionally disturbed pre-school children.
- 2) BHCS held this program harmless between FY08 and FY11 in an effort to avoid reducing the service. Reductions in other BHCS programs in previous and current years now make this reduction necessary to avoid additional reductions in Behavioral Health direct service programs.
- 3) Reduction amount \$57,630 fund the services for attachment and bonding services between birth or adoptive parents and their children for the purpose of determining if reunification with family of origin is in the best interest of a child that has come into the care of Child Welfare Services. The provider served 44 children in FY10 and project serving approximately 40 children in FY11.
- 4) Estimate 40 children will not receive the attachment and bonding services in FY12.

Conservation Corps

Why is the program being recommended for elimination? Please describe the RFP solicitation process for a Conservation Corps vendor. Please provide program and outcomes data for FY10 and FY11.

The program is being recommended for elimination due to the historic high cost per participant of the program and the lack of appropriate bids to provide the service through a non-profit partner.

Description of RFP process:

A Pre-Bid conference was held on Wednesday, November 17th to explain the RFP process to potential bidders. The RFP was officially advertised with a closing date of December 15, 2010. One RFP was received. A panel of three served as the Qualification and Selection Committee (QSC). A written review was conducted by the QSC and the potential bidder was scored with the minimum number of points required to move to the next phase of the RFP, an oral interview. On January 26, 2011 Student Conservation Association, Inc. (bidder) of Arlington, Virginia, but were not awarded the RFP based on

the costs of their proposal compared to number of corps members served and length of program for participants (\$500,000 for 24 participants for 24 weeks).

Conservation Corps Outcomes-

FY11

16 graduates (completion of program)

0 Enrollments

3 Non-completions

FY10

This information will be submitted separately

(Non-completions is the date corps member actually dropped out/quit/resigned/terminated from program.)

It appears that \$200,000 is being transferred to the Department of Economic Development to support workforce services for youth through Latin American Youth Center. Will this funding support the same population of youth served by the Conservation Corps? What services will be provided?

Yes. It is anticipated that youth from 16 to 23 who have faced barriers to employment will gain life skills, GED and education supports, employment skills, work experience, training and ultimately employment through this funding.

Juvenile Justice Services

Please explain why this program area was shifted to behavioral health planning and management. The services provided through Juvenile Justice Services (JJS), specifically the Screening and Assessment Services for Children and Adolescents (SASCA) are more closely aligned with the substance abuse and mental health services provided through BHCS. It is felt that the continuum of care for children and families will be strengthened by locating JJS in BHCS.

Is the full-time principal Administrative Aide position being recommended for abolishment vacant? If so, when did it become vacant and what were the responsibilities of the position? What is the anticipated impact of the abolishment?

The position is currently filled. The PAA collects urine specimens 2x per week for two adolescent treatment centers. The PAA collects & delivers adolescent samples for SASCA clients. The PAA delivers these specimens to the Urine Monitoring Program (UMP) and ensures the centers have supplies for urine collection. This responsibility could be shifted to the Urine Monitoring Program.

Please describe the impact of the grants reductions for the Public Education and Prevention Grant and the Community Health Grant.

Public Education and Prevention Grant a.k.a Substance Abuse Prevention Grant – For three years the Strengthening Families component of this grant, served youth 11-17 whose parents were enrolled in substance abuse treatment. As funding is no longer available this target population will no longer be offered this family education program as an adjunct to treatment.

Community Mental Health Grant – The reductions shown in the budget book are technical adjustments to align with the FY11 budget. The reductions have already taken place. The reductions were in the following areas:

- Reduce Mental Health Clinic fund
- Decrease cost to pharmacy budget
- Reduce case management budget
- Shift a Family Intervention Specialist Position from CMHG to Family Intervention Intergovernmental Agreement Grant

Positive Youth Development

Please provide a description of the Family Intervention Grant. What position is being created?

The Family Intervention Grant provided funding to support parents and families of gang involved youth in designated communities to provide family strengthening, case management, guidance and advocacy in the area of gang prevention and intervention for parents. The Program Specialist position has already been created (as a mid year creation) and the position was filled in 2010 for 8 months and during that time the goal of the grant of serving 100 families in the County was surpassed. The person in the position resigned and so a budget modification was requested in order to reprogram the funds to support the UpCounty YOC.

Please provide an update on the ARRA FY09 Justice Assistance Grant (JAG) Recovery Grant.

The purpose of the grant is to provide employment supports to gang involved youth. The goal is to find employment for at least 50 gang involved youth. Two months ago a part time CSA III was hired to implement this program. We are currently in preliminary phase of implementation. We have worked closely with the Office of Workforce Development, MMYC, and other community providers to identify youth and avoid any overlap in services.

What miscellaneous operating expenses for Positive Youth Development are being reduced? Is there an anticipated service impact from this reduction?

The reductions are in supplies, flex funds and materials used for programming for youth receiving services from the Street Outreach Network. Some of the activities for the youth may be limited due to this reduction.

With the elimination of grant funding for the Upcounty Youth Opportunity Center, will services continue? What funding will support continued operations? Please provide a program and outcomes update on the Crossroads and Upcounty centers for FY10 and FY11 to date.

Yes, it will continue. The funding for the UYOC comes from \$260,000 in federal funds (\$200,000 from a new earmark and \$60,000 reprogrammed from the Family Intervention Grant – noted above) and a reprogramming of \$190,000 that had been used for the Gang Wrap services. The Gang Wrap project was serving 7 to 10 youth per year on average and it was felt that this use of funds would ensure greater number of youth benefit from the funding. For program and outcome update, please see the “updates” section.

Income Supports

Please describe income support triage and greeter services.

Upon entering the lobby of each Income Support Office, customers are met by a **Greeter** prior to going to the reception desk. The greeter determines if the customer is in the right office, if they have an appointment, if they are dropping off documents or if this is their first time coming to the office. The greeter will direct the customer or help them, depending on their needs. The Greeter will also assist customers in the lobby with questions related to the completion of applications for benefits or to contact their worker for basic questions.

Greeters are recruited from TANF participants by our Employment Services Vendor and they are recommended to the Office Managers for an interview. If selected, the greeter participates in a 60-90 day work experience period while receiving their TANF cash benefit and at the end of that period, if successful; the greeter will be hired for additional months totaling a one year assignment. During the last two months of the assignment, the greeters are assigned several hours per week with the Employment Services Vendor for a re-assessment and job search for a permanent job. Originally there was funding for two greeters (funded by DHR); since that funding has been lost, there is only one greeter per office lobby.

All customers with a new presenting need will receive a face-to-face **triage** dialogue. The dialogue will consist of a review of the "List of Service Need" screening tool. The **triage worker** will provide the customer with appropriate referrals, contacts, information, directions and education regarding all identified needs. In addition, the triage worker will review the Income Supports/Emergency Services application and will complete a preliminary eligibility screening for ES and IS customers. All customers who identify Food Stamps as a need will be screened at this time for expedited food stamps. The triage worker will search the county data base to see if the customer is already in the system and update the system for repeat customers and create a new record for new customers. The worker will perform an inquiry and verification into the CARES system, schedule appointments for ES and IS (same day if available) and enter all pertinent service information into the system. Triage consists of three work years in each office, two full time merit staff and two part time contractual broker staff.

The \$106, 200 will provide partial year funding for the part time broker staff for Triage and supplemental funding for the Greeters (in addition to the funds from DHR). During FY12, the department will look at possible process changes in this program and additional sources of funding to determine how to meet this urgent need as the volume of new customers continues to grow. This program was previously fully funded from our DHR grant.

Please explain the reasoning behind shifting work years from other program areas into Income Supports. What impact will there be on services provided in the other program areas?

Workyears were shifted to address the major workload increases in the Income Support (IS) eligibility programs. Staff in IS carry caseloads of over 600-700 assistance units at any point in time and application volume has, given the economic downturn, increased 42 % over the past year. Caseloads include Food Stamps, TDAP for single disabled adults, Maryland Medical Assistance and Temporary Cash Assistance (with related work program components). Fiscal functions for POC were already absorbed by MSDE prior to significant shifts and the fiscal support afforded IS staff benefits first the customers and both programs. The WY shift does not impact CCSP.

Child and Adolescent School and Community-Based Services

What is being reduced in terms of miscellaneous operating expenses for the program area (\$30,450)?

What service impact will there be, if any, as a result of this reduction?

This savings is the result of negotiated contract savings. There is no service impact due to this reduction.

Updates

Please provide updates for the following programs:

- **Youth Opportunity Centers (Crossroads and Upcounty)**

Crossroads Youth Opportunity Center

In FY10:

292 clients were served.

92% Latino

8% African American

61 clients received mental health services.
292 hours of mental health service hours were provided to clients
24 clients were provided job readiness training
8 clients acquired jobs
133 clients completed participation in positive youth development programs
26 parents completed parent support group program
18 clients completed GED training program
5 clients passed GED test
30 clients received tattoo removal services
287 referrals were made for clients

49% of clients improved school performance and participation
46% of clients improved relationship with parents
41% of clients increased their self-esteem.
39% of clients demonstrated a greater ability to resolve conflicts without resorting to violence
64% of clients improved their self-efficacy to refuse drug use
75% of those clients who were not in gangs improved their self-efficacy to refuse joining a gang

In FY11:

Currently serves 194 clients.
161 Latino and 33 African American Youth served
60% clients ages 14 to 17
128 clients have received case management services
141 males, 53 females

30 clients have participated in the Noyes Outreach Program
16 youth have received their GEDs
60 clients received mental health services
52 clients received job readiness services
35 parents have participated in parent support groups
12 clients have received tattoo removal services
40 clients participate in positive youth development programs

Up County Youth Opportunity Center

A total of 135 youth have been engaged.
A total of 91 clients are being served.
73 Latino, 16 African American, and 2 other youth served

22 Youth received GED services
77 GED sessions provided
68 clients received group level interventions
37 clients receiving referral services
53 clients referred for other services
62 clients have participated in positive youth development programs
489 hours of individual intervention services have been delivered

Contract questions

Please confirm that all contractors have been notified of reductions proposed by the Executive to contracts in DHHS. Yes, all contractors have been notified of the reductions.

For the following contracts recommended for a reduction of 5%, please provide (1) the rationale for these specific reductions, (2) a description of the services provided under the contracts including numbers served for FY10 and FY11 to date, if available, (3) the impact of the reduction, if known.

1. Unless otherwise noted, the rationale for the reductions to the following contracts was that although these contracts provide a very important service to children who might not otherwise receive this service – they are not safety net services.

- **Maryland Vietnamese Mutual Association (non-safety net services to low-income Vietnamese families)(\$3,330)**
2. This contract provides parent training to increase participation in their children's education and other support services for seniors and for newcomers:

Vietnamese Parenting Enrichment Project (VPEP), 2.Golden Age Project for Seniors (GAPS), 3.New Americans Advocacy Services (NAAS)

FY10 #'s served:

- 9 parents and their family members received home visits and training through the Vietnamese Parenting Enrichment Project (VPEP),
- 169 seniors received 479 services (such as referrals, phone calls to help them process services/benefits requests, translation/interpretation of documents) through the Golden Age Project for Seniors (GAPS),
- 42 newcomers received 54 services through the New Americans Advocacy Services (NAAS)

FY11 #s served: (September-10 through December-10)

- 4 parents and their families members received 24 home visits and 86 other services through the Vietnamese Parenting Enrichment Project (VPEP).
- 109 seniors received 291 services through the Golden Age Project for Seniors (GAPS),
- 15 newcomers received 22 services through the New Americans Advocacy Services (NAAS)

3. Reductions have affected some operating expenses

- **Washington Youth Foundation (Mentoring and academic enrichment programs - non safety net services) (\$3,330)**
2. Provides mentoring for youth, two youth leadership camps and parent trainings. Individual and group mentoring sessions are available. Each leadership camp includes 3-4 training sessions. 6-8 parent seminars are offered per year.

FY10 #'s served:

- 101 youth received mentoring services, they participated in 234 one-on-one and 124 group mentoring sessions
- 213 youth and 30 adults participated in two (2) leadership camps
- 97 adults participated in four (4) parent education seminars

FY11 #s served: (September-10 through December-10)

- 36 youth received mentoring services, they participated in 108 one-on-one and 37 group mentoring sessions
- 63 youth and 20 adults participated in two (2) leadership camps
- 51 adults participated in four (4) parent education seminars

3. Reductions have affected personnel and operating expenses
- Washington Youth Foundation (After school and weekend enrichment programs - non-safety net services) (\$4,850) Correction- Washington Youth Foundation was reduced by \$2,250

Washington Youth Foundation- After School (\$-2,250)

2. Provides after-school and weekend school, Math and English classes for newly arrived low-income students. Students register per quarter.

FY10 #s served:

- 123 youth participated in after-school program
- 141 youth participated in weekend-school program

FY11 #'s served: (September-10 through December-10)

- 89 youth participated in after-school program
- 44 youth participated in weekend-school program

3. Reductions have affected personnel and operating expenses

Family Learning Solutions, Inc. (after-school, mentoring and tutoring services contract) (\$-2,600)

2. Provides after school, mentoring/tutoring services for (K-6th) at-risk immigrant children and youth in the Wheaton area.

FY10 #s served:

- 25 children and youth from the Wheaton area participated in the after-school program
- Each participant received one-on-one tutoring services

FY11 YTD #s served:

- 36 children and youth from the Wheaton area participated in the after-school program.
- Each participant receives one-on-one tutoring services.

3. Family Learning Solutions will maintain the scope of services as in FY11. Reductions have affected operating expenses.

- Community Bridges (prevention services contract) (\$8,080)

2. Provides youth empowerment and leadership to 3rd to 12th grade girls. For elementary and middle school girls Jump Start Girls!, LUNA, Dream Catchers, and Glow for the high school girls. Programs are currently offered at 17 MCPS schools.

FY10 #'s served:

- Over 250 girls participated in one of the 4 programs
- 100 youth, parents and community members served through their Annual Conference
- 60 parents served through 1 family empowerment workshop in September-09
- Expanded services to 6 additional schools

FY11 #s served: (September-10 through December-10)

- 223 girls participating in one of the 4 programs
- 60 parents served through 1 family empowerment workshop in September-10

3. Reductions have affected personnel expenses.

- Asian American LEAD (Mentoring and academic enrichment programs - non safety net services) (\$5,940)
Provides after-school-academic enrichment for youth, mentoring for youth at 5 Middle Schools, 2 High Schools and offers additional one-on-one tutoring for students that need extra help with homework at the Wheaton Community Center. AALEAD also recruits and trains volunteers to work with the participants in academic enrichment providing tutoring and mentoring.
 2. FY10 #s served:
 - Over 100 youth participated in after-school-academic enrichment programs.
 - Over 20 youth served through mentoring program

FY11 #s served: (September-10 through February-11)

 - 143 youth currently participating in after-school-academic enrichment programs. 99 in MS and 44 in HS.
 - 21 youth served through mentoring program
 - Offered 6 hours of training to general volunteers and 12 hours of training to volunteers selected to do mentoring.
 3. AA Lead will maintain the same scope of services as in FY11. Reductions have affected personnel and operating expenses

- Court-Appointed Special Advocate Program of Montgomery County (\$5,200)
 2. CASA case managers oversee more than 100 volunteers who represent what is in the best interest of children who are involved with Child Welfare, in court. Children also have attorneys who represent them in court.
 3. Reduced hours of the case managers will result in fewer volunteers being recruited and trained. Therefore, fewer matches can be made between advocates and children. In FY10, 345 children were served by 289 volunteers, at a contract cost of \$108,350. During the first six months of FY11, CASA served 289 children. As of December 31, 2010, there were 235 children's cases open, including 200 children assigned to volunteers and 35 children waiting for assignment of an advocate.

- Center for Adoption and Support and Education (\$9,690)
 1. In terms of a rationale for the reduction, a 5% reduction would not devastate this program – the program would still be able to provide a full range of services to fewer clients
 2. This contract provides a range of therapeutic and support services to children, youth and post-adoptive families including assessments, case management/service coordination, crisis intervention, individual and family therapy, support groups for parents and children/teens, and trainings.
 3. At an average cost of \$2,982/client, it is estimated that 3 clients will not receive services, as a result of this reduction. In FY10, 65 of clients were served.

- Tree House Child Assessment Center of Montgomery County Maryland (\$25,420)
 1. It was felt that this reduction may be able to be absorbed due to fundraising efforts by the Primary Care Coalition.
 2. The Tree House Child Assessment Center, a public-private partnership, provides health and mental health services to children who have been abused physically and sexually, and neglected in their medical care. Services include medical exams, mental health assessments, mental health therapy, multi-disciplinary reviews, forensic interviews, and victim advocacy

for abused children and their families. Administrative services of The Tree House are provided through a contractual agreement with the Primary Care Coalition. The Tree House actively pursues donations as well as public and private grants.

3. It is expected that this reduction will be offset through present reserves and future proceeds from aggressive fundraising efforts. In FY10, the Tree House served 1056 children, across all funding sources. The reduction if not covered through other funds would result in the decrease of hours of medical services and mental health services including individual therapy, and family therapy by 50 hours of physician time and 408 hours of mental health therapy, respectively, in FY12.

- Please describe the security contract that is proposed for elimination for the LAYC-Maryland Multicultural Youth Center. What is the reason for eliminating the contract?

This security contract provides funds for a security guard, a security system and staff training for the MMYC staff in their Silver Spring site. This resource is not provided to any other organization that deals with at-risk youth and is considered part of the operational responsibilities of the organization. There will be no service impact whatsoever due to this reduction.

**TESTIMONY of the
MONTGOMERY COUNTY COMMISSION ON CHILDREN AND YOUTH before the
MONTGOMERY COUNTY COUNCIL on the
FY12 Operating Budget**

Good evening. Thank you very much for taking the time to hear from the Commission on Children and Youth. I am Chris DiMisa, one of 7 youth members on the Commission. The Commission believes that Montgomery County Council members have always been true champions for children and youth, and we appreciate your continued support.

We come here tonight to ask you to consider the whole child, in and out of school, when making budgetary decisions. We support targeted and equitable funding, focusing on both education and community programs that keep our children healthy and safe. We believe that the County Executive’s recommended FY12 operating budget strives to strike a balance between education and critical services that prepare children to live and learn.

In reviewing the proposed budget, however, we are struck by the across the board reductions to the entire system of support services for children and youth. Our concerns focus on the cumulative effects that a lot of ‘little’ cuts will have on our children. Can the County confidently proclaim that it can effectively and measurably meet the needs of children most at-risk when programs are so significantly reduced? The Commission encourages you to review the budget as it affects all children and honestly evaluate the point at which services can longer be delivered with any effective outcome, and become little more than window dressing.

Of special concern are teens, among the most vulnerable populations in our community. While the County Executive’s budget makes efforts to protect vulnerable citizens, it seems that the proposed reductions to a significant number to teen programs and effective prevention and intervention programs, do not recognize the risks of our youth. The County engages in talk about how to prevent my peers and me from engaging in risky – and costly – behaviors such as drug and alcohol use, sexual behaviors, and joining gangs, etc. In fact, this budget represents a step back. The Commission is concerned that the County is positioning itself to merely shift costs from prevention and intervention *now* to pricier crisis care and remediation in the near future. Adolescents in need will always show up in our system. They can be either engaged in positive youth activities or at crisis centers or in the juvenile justice system. The County’s safety net will only strain and tear if we do not provide for our youth.

By significantly reducing service to children and teens, the previous advances in the areas of health, hunger and safety in the County will be lost. The cuts ignore growing demands in Montgomery County for services not seen 10 years ago. The challenge to the County is how to provide for this population of future voters and taxpayers.

The Commission does not envy your position. We realize budget decisions are tough. However, when it comes to our children, the decision isn’t really that tough. If we cannot provide for them now how can we expect them to provide for themselves in the future? We urge you to re-consider the impact the cuts will have on the youth in our County. We urge you to re-instate some of the vital prevention efforts that protect our young people from falling through the cracks. Finally we urge you to persevere and stay strong in the face of State pressure for additional cuts in youth programs. This fortitude is the only way to protect the future of our children.

Thank you.

Financial Statement FY 10 (Unaudited)

July 1, 2009 - June 30, 2010

The Tree House Child Assessment Center of Montgomery County Maryland Operating Budget for Fiscal Year 2010 (July 1, 2009–June 30, 2010)

INCOME

County Contracts	\$529,830
County In-Kind (salaries)	308,232
Foundation Grants	24,947
Federal Grants	70,550
Contributions	36,070
Service Fees	25,000
In-kind Donations (facilities)	<u>41,000</u>
TOTAL INCOME	<u>\$1,035,629</u>

EXPENSES

Staffing

Director	\$112,732
Mental Health Specialist	110,500
Nurse Case Manager	58,500
Therapist	62,500
Therapist	37,500
Therapist	37,500
Therapist	14,300
Therapist	14,000
Therapist	13,000
Therapist	13,000
IT	18,000
Office Coordinator	58,167
Medical Services	182,450
Administrative Assistant	41,760
Victim Advocate	35,000
Forensic Interviewer	50,000
Development Specialist	<u>25,000</u>
Subtotal Salaries	\$883,909

Facilities

Furnishings and Equipment	\$1,500
Supplies	5,000
Postage	5,000
Printing	6,500
Training (MDT staff)	5,000
Travel (local)	1,000
Transportation for Clients	30,000
Community Outreach	1,000
Program Evaluation	1,000
Software License Fee	<u>1,500</u>
Subtotal Facilities	\$57,500

In-Kind

Rent, phones, computers, supplies, electricity, water, etc.; all in-kind	\$35,000
Background Checks	1,000
Legal Advice	<u>5,000</u>
Subtotal In-Kind	\$41,000

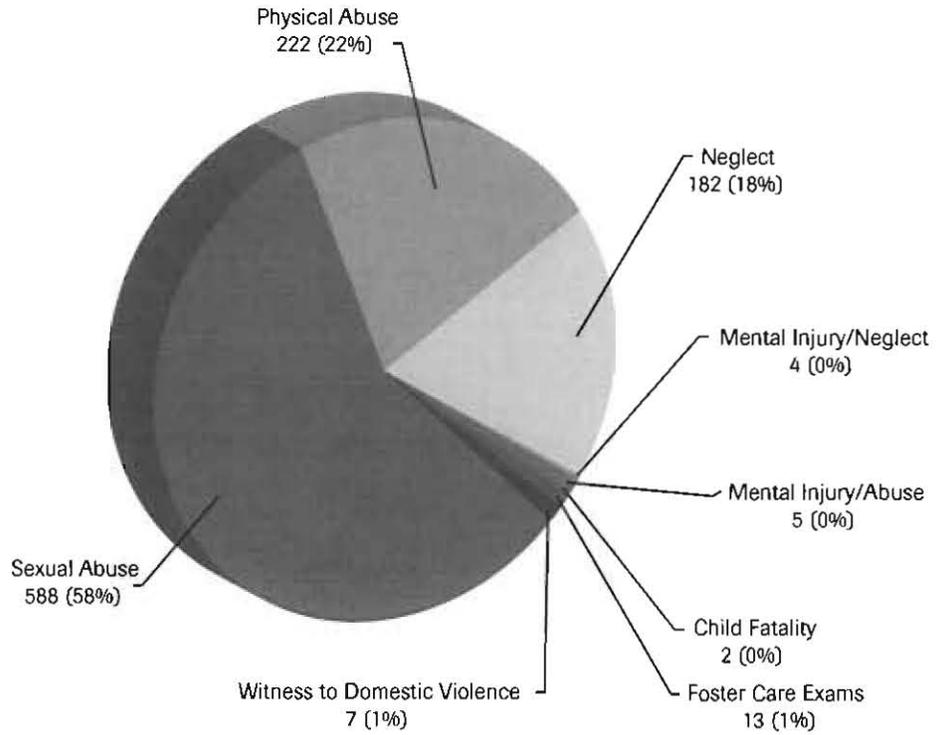
Subtotal Expenses	\$982,409
Indirect Costs (9.1% of \$584,830)	<u>53,220</u>
TOTAL EXPENSES	<u>\$1,035,629</u>

Clients Served—Victimization and Gender Data

July 1, 2009 - June 30, 2010

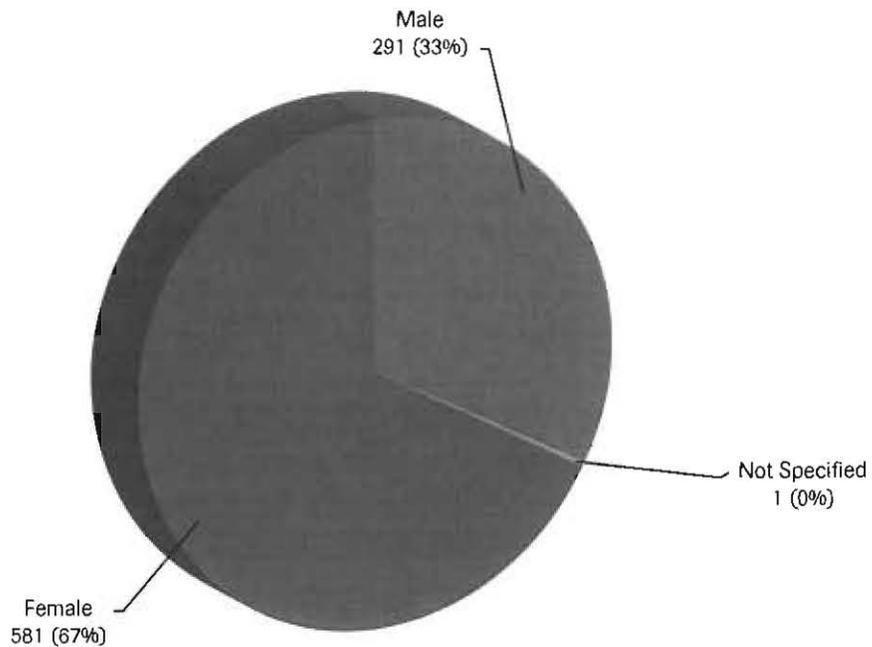
Type of Victimization

New Clients: 873
 Ongoing Clients: 183
 Total Clients: 1,056



* Type of Victimization is based on new clients only; often children experience more than one type of victimization.

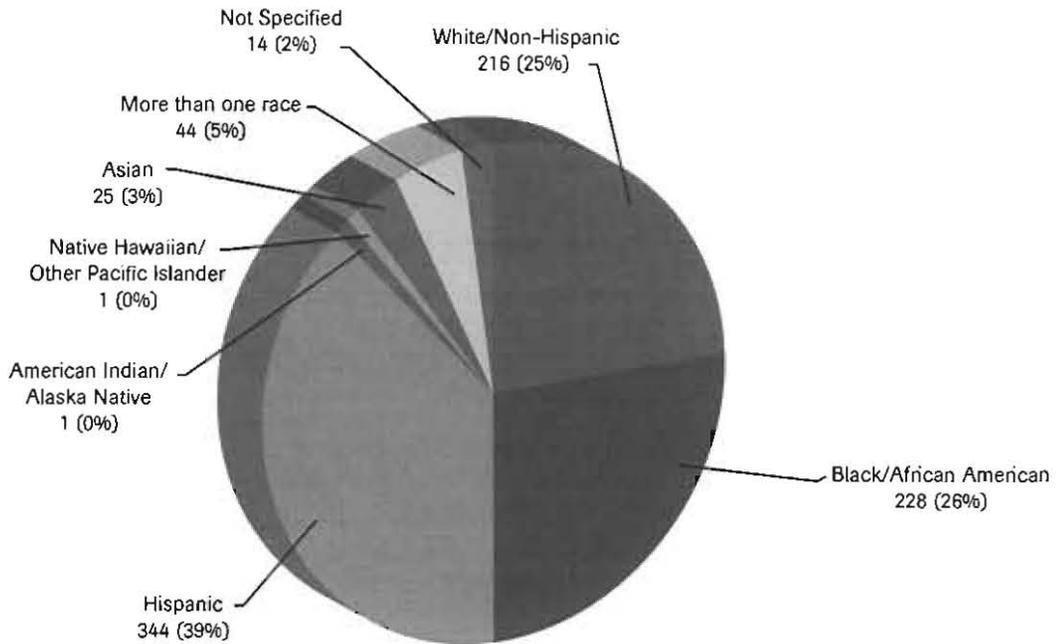
Gender



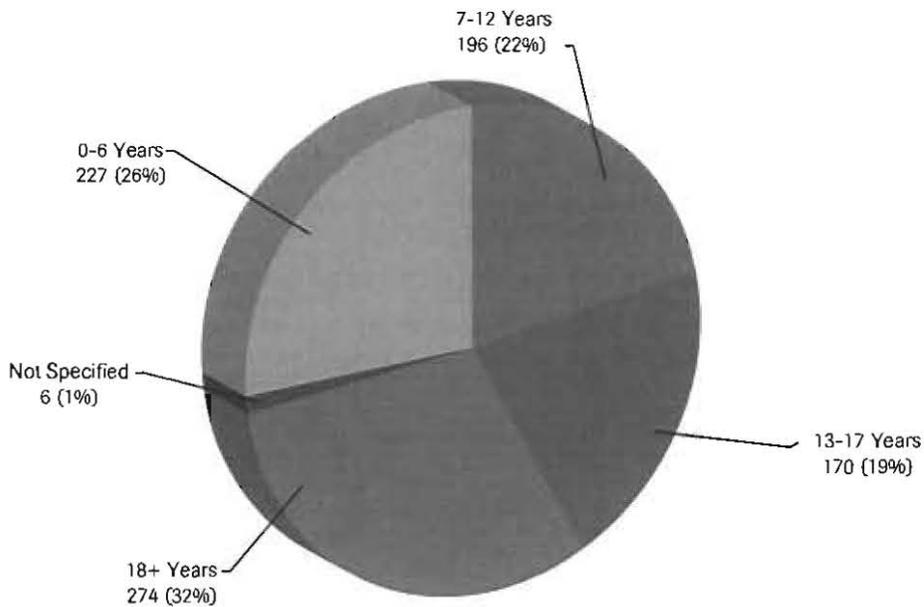
Clients Served—Race and Age Data

July 1, 2009 - June 30, 2010

Race



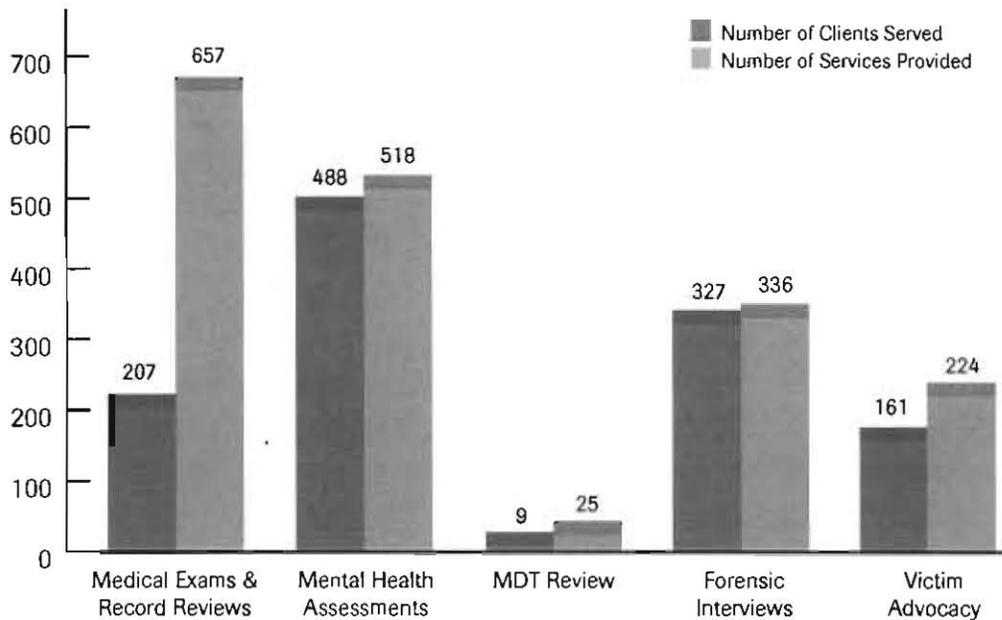
Age



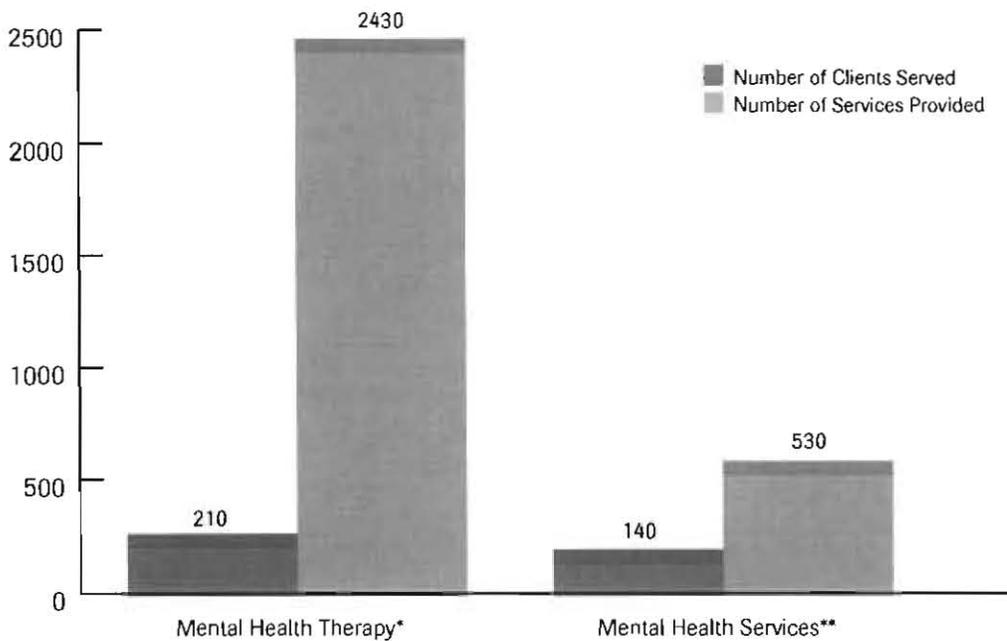
Clients Served and Services Provided

July 1, 2009 - June 30, 2010

Medical Exams & Record Reviews, Mental Health Assessments, Multidisciplinary Team Reviews (MDT), Forensic Interviews, and Victim Advocacy



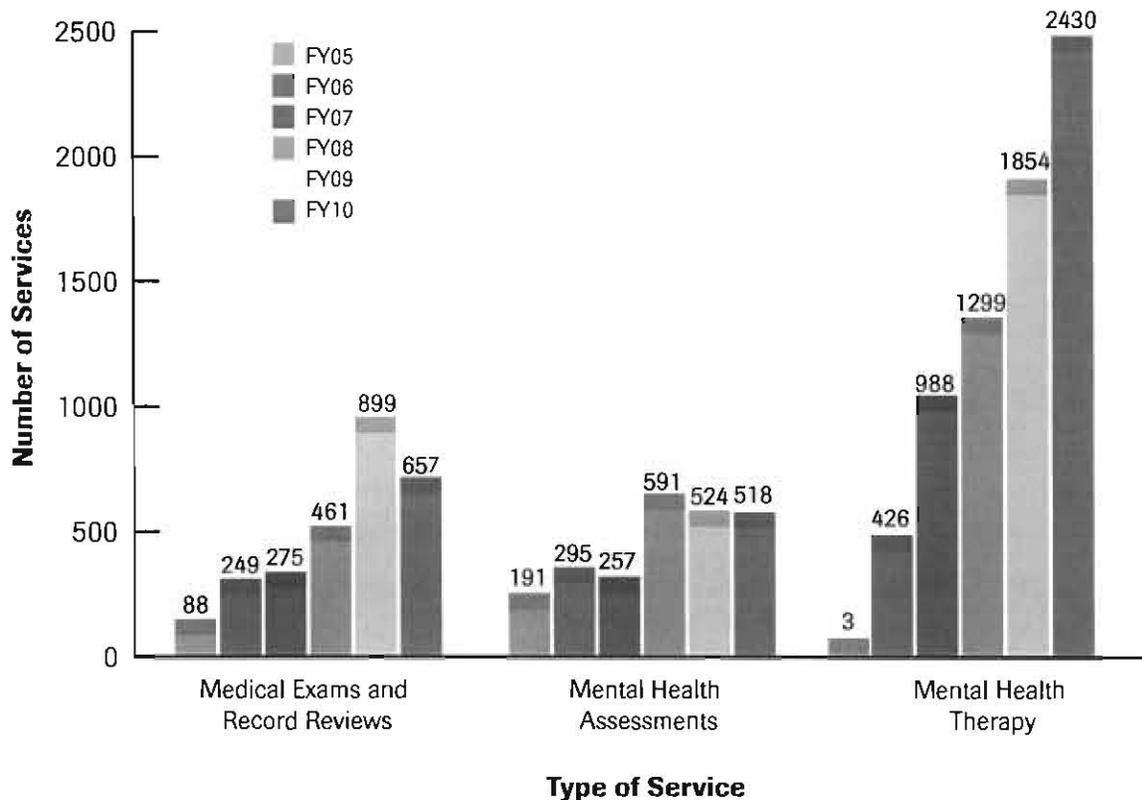
Services Provided by Mental Health Therapists



* Mental Health Therapy includes individual therapy, group therapy, and family therapy.

** Mental Health Services includes services defined by VOCA (Victims of Crime Act - state program that transfers federal dollars) other than therapy. This includes information & referral phone, information & referral person, personal advocacy, assistance with compensation claims, notification of victim rights, follow-up contact, crisis counseling, criminal justice support/advocacy, and MDT.

Services Provided by Fiscal Year *Fiscal Year '05 - Fiscal Year '10*



The Truth About Child Abuse

- ★ A report of child abuse is made every **ten seconds**.
- ★ Almost **five children die** every day as a result of child abuse.
- ★ The estimated annual cost of child abuse and neglect in the United States for 2007 is **\$104 billion**.
- ★ Abused children are 25% more likely to experience teen pregnancy.
- ★ Children who have been sexually abused are **2.5 times more likely to abuse alcohol**.



April 7, 2011
8210 Roanoke Ave
Unit 203
Takoma Park, MD 20912

ALB?
VY

Montgomery County Council
100 Maryland Avenue
Rockville, Maryland 20850

RE: Testimony on behalf of **Community Bridges**

Dear Members of the Council,

Good afternoon and thank you for your time. My name is Rosemary Harmon. I am giving this testimony in support of the county continuing to fund the programs of Community Bridges, a non-profit that serves girls and their families in Montgomery County.

I am so strongly in support of this program because of its positive affect on so many of the county's youths. My two daughters started this program while attending Rolling Terrace Elementary School. Both Shikara and Shakeisha were in "Jump Start Girls/Adelante Niñas," in elementary school. They both continued in "Jump Start" through middle school and both participated in high school with Community Bridges' "GLOW" program.

My eldest daughter who is just completing her 2nd semester at Montgomery College in Takoma Park, decided while working with Community Bridges that she would like to spend time working with children and creating activities for them because it was so exciting to help youth learn. She saw that excitement in Community Bridges staff who worked with her.

She enjoyed the round table discussions and the talks where they were able to express themselves to other adults who weren't parents but were clearly interested in what she had to say.

My daughter Shakeisha who is a junior at Montgomery Blair High School has had the opportunity to be interviewed at her school to talk about the program and share what she feels is beneficial to through the program.

Shakeisha often would come home and share some of the discussions that they have had. She had expressed to me that the transition to high school was difficult and she sometimes felt alone. But she always said that she felt at home during Community Bridges' GLOW program. The more she participated, the more she was to starting to feel compelled to make a difference in peoples' lives. It was amazing! She is now single-mindedly pursuing a career in family services and social work. She has searched colleges for her career choice, spoken to some people in the field and consistently searches for programs that will allow her to familiarize herself with said field. Shakeisha started out in high school feeling like being there was the major accomplishment and now thanks to Community Bridges staff and the interest she and I are convinced that they have in the lives of the area students she is clear about the path to her future.

The support of this organization accompanied by the morals instilled in our children has me convinced that the program can make a very positive change in the lives of so many low income and immigrant families in this community and assists us all in reaching a common and very productive goal in the lives of our children.

Sincerely,

Rosemary Harmon

Behavioral Health and Crisis Services

FUNCTION

The mission of Behavioral Health and Crisis Services (BHCS) is to foster the development of, and to ensure access to a comprehensive system of services for children, youth and families, adults, and seniors in crisis or with behavioral health needs. BHCS is committed to providing culturally and linguistically competent care and to the use of evidence based or best practices along a continuum of care. BHCS works with the State's public mental health and substance abuse system, other HHS service areas, county agencies and the community to provide strength-based and integrated services to persons in need.

PROGRAM CONTACTS

Contact Raymond L. Crowel of the HHS - Behavioral Health and Crisis Services at 240.777.1488 or Trudy-Ann Durace of the Office of Management and Budget at 240.777.2778 for more information regarding this service area's operating budget.

PROGRAM DESCRIPTIONS

Behavioral Health Planning and Management

As the State mandated local mental health authority, this program is responsible for the planning, management, and monitoring of Public Mental Health Services for children with serious, emotional impairments (SEI), and adults with a serious and persistent mental illness (SPMI). This include persons with co-occurring mental illness and substance abuse disorders, homeless persons with SPMI, and persons with SPMI who have been incarcerated and/or are on conditional release. This program is responsible for the ongoing development of a resiliency and recovery oriented continuum of quality mental health services that provide for consumer choice and empowerment, while assuring consumers have access to clinically appropriate and cost effective behavioral health services. In addition, Behavioral Health Planning and Management partners with the Mental Hygiene Administration in the provision and authorization of hospital diversion services aimed at providing diversion to the most clinically appropriate least restrictive setting for the individuals it serves. This program area also now includes Juvenile Justice Services and the Conservation Corps (both programs shifted from Children Youth and Family Services). Juvenile Justice Services (JJS) supports the County's comprehensive approach by integrating screening, assessment, case management, community services, treatment with the juvenile justice legal process, and substance abuse prevention, which provide support and education to promote healthy behaviors and lifestyles. The Conservation Corps is now administered through a contract that seeks to increase the employability of out-of-school, at-risk 17 to 24 year old youth by providing opportunities for personal growth, education, and training. The Services provided through these programs, in particular Screening and Assessment Services for Children and Adolescents (SASCA), are closely aligned with the substance abuse and mental health services provided in Behavioral Health and Crisis Services.

Program Performance Measures	Actual FY09	Actual FY10	Estimated FY11	Target FY12	Target FY13
Percentage of adult clients receiving services who demonstrate a higher degree of Social Connectedness and Emotional Wellness ¹	82.8	NA	82.3	82.3	82.3
Percentage of child and adolescent clients receiving services who demonstrate a higher degree of Social Connectedness and Emotional Wellness ²	94	NA	93.5	93.5	93.5
Percentage of offenders under age 18 who are diverted to substance abuse education or mental health treatment programs who do not re-enter the correction system within 12 months of being assessed compliant with requirements ³	90	92	90	90	90

¹ Results are calculated using Outcome Measurement System (OMS) data released by DHMH. OMS data release for FY10 will be delayed until March 2011.

² Results are calculated using Outcome Measurement System (OMS) data released by DHMH. OMS data release for FY10 will be delayed until March 2011.

³ The correction system refers to the juvenile justice or adult correction systems. Assessment is done to determine compliance with requirements. This measure is by definition a 12 month follow-up of clients, so actual FY10 data reports recidivism rate of clients served in FY09.

FY12 Recommended Changes	Expenditures	WYs
FY11 Approved	7,897,830	18.8
Add: Family Intervention Specialist - Intergovernmental Agreement (IGA)	145,000	1.0
Technical Adj: Shift Personnel Costs to Operating Expenses - Community Mental Health Grant	0	-0.1
Decrease Cost: Contract for Assisted Living Services for Mental Health Consumers	-9,020	0.0
Shift: Operating Expenses in Shelter Plus Care Program from General Fund to Grant Fund	-9,310	0.0

	Expenditures	WYs
Decrease Cost: Outpatient Mental Health Clinic Administration Fee Across Seven Contracts	-14,260	0.0
Reduce: Foster Care Families Mental Health Services	-21,210	0.0
Reduce: Contract for Parenting Skills to 20 Families	-27,450	0.0
Decrease Cost: Abolish a Part-time Program Manager I Position in HHS Office of Consumer Affairs	-44,430	-0.0
Decrease Cost: Residential Rehabilitation Supplement Budget and shift a Portion to the Community Mental Health Grant	-56,850	0.0
Eliminate: Attachment and Bonding Support Services for Child Welfare Services Clients	-57,630	0.0
Decrease Cost: Abolish a Part-time Therapist II Position in Child and Adolescent Mental Health Clinic and a Full-time Supervisory Therapist Position	-222,550	-1.6
Reduce: Eliminate the Hospital Diversion Program in SORT Grant	-989,220	-5.0
Miscellaneous adjustments, including restoration of employee furloughs, employee benefit changes, changes due to staff turnover, reorganizations, and other budget changes affecting more than one program	2,892,270	9.7
FY12 CE Recommended	9,483,170	22.3

Notes: Miscellaneous adjustments includes the shift of the Juvenile Justice Program from Children, Youth, and Family Services to this program.

Behavioral Health Specialty Services

Behavioral Health Specialty Services includes both the Adult Behavioral Health and the Access to Behavioral Health Services programs. The Adult Behavioral Health program provides a comprehensive range of mental health services including assessment, diagnostic evaluation, psychotropic medication evaluation, and medication monitoring. Individual, family, and group psychotherapy are available, as well as case management services. Eligibility is limited to Montgomery County residents who have a high level of acuity and are involved in multiple systems in the community. Many of these individuals are unable to receive Public Mental Health System services or the level of care necessary to effectively stabilize their illness. This program has expanded capacity to provide services to Limited English Proficiency (LEP) clients and those with specialized cultural and language needs. The Access to Behavioral Health Services program provides assessments for clinical necessity and financial eligibility for consumers needing outpatient mental health services including those with a co-occurring disorder, and linkages to those eligible for the Public Mental Health System or community resources. This program also provides for Montgomery County adult residents, walk-in substance abuse assessments including co-occurring disorders and linkages to the range of services in the Addiction Services continuum. Safety Net Services, a service within Access to Behavioral Health Services, provides immediate, brief psychiatric, and case coordination services (16 hours a week) for clients eligible for the Public Mental Health system who are discharged from a psychiatric hospital/jail who need immediate psychotropic medications until they can be linked to a community Outpatient Mental Health program.

Program Performance Measures	Actual FY09	Actual FY10	Estimated FY11	Target FY12	Target FY13
Percentage of clients showing improvement in functioning and decreased symptoms – based on the symptoms list ¹	81	83	83	83	83

¹ Percentage is based on discharged clients.

FY12 Recommended Changes	Expenditures	WYs
FY11 Approved	2,502,260	17.6
Miscellaneous adjustments, including restoration of employee furloughs, employee benefit changes, changes due to staff turnover, reorganizations, and other budget changes affecting more than one program	-69,540	0.5
FY12 CE Recommended	2,432,720	18.1

Behavioral Health Community Support Svcs

Behavioral Health Community Support Services is composed of three sub-programs: Community Case Management Services, Urine Monitoring Program, and Program/Contract Monitoring Unit. These programs provide: 1) case management services to Temporary Cash Assistance (TCA) clients, women who are homeless, adults incarcerated at the Montgomery County Correctional Facility, and other clients who are “high-end” users of services and involved in multiple programs within HHS, 2) urine testing services to clients referred by the courts, child welfare, the criminal justice system and others required to submit to urine surveillance or who require or request urine screening and testing, and 3) the Program/Contract Monitoring Unit monitors contract compliance for addiction and co-occurring treatment with certified providers who contract with the Department to provide detoxification, outpatient, intensive outpatient, residential halfway house, combined care, and long-term residential treatment services to enhance the quality of care available to Montgomery County residents.

Program Performance Measures	Actual FY09	Actual FY10	Estimated FY11	Target FY12	Target FY13
Number of persons served in Level 1 Outpatient Treatment ¹	571	763	450	450	450
Percentage of decrease in substance abuse for patients completing treatment (Level 1 Outpatient Treatment) ²	86	78	75	75	75

¹ These measures are for the Adult Level 1 treatment programs only. The projected FY11-FY13 numbers of persons served reflects State and Local reductions for Level 1 Outpatient Substance Abuse Treatment Services and the trend for substance abuse treatment moving to Fee For Service system under PAC & MA.

² This is a new performance measure established by the Alcohol and Drug Abuse Administration.

FY12 Recommended Changes	Expenditures	WYs
FY11 Approved	6,941,700	20.9
Reduce: Abolish a Full-time Social Worker IV Supervisor Position	-102,780	-1.0
Reduce: Substance Abuse Treatment Services for the Lawrence Court Half Way House Program	-130,600	0.0
Miscellaneous adjustments, including restoration of employee furloughs, employee benefit changes, changes due to staff turnover, reorganizations, and other budget changes affecting more than one program	-111,100	0.6
FY12 CE Recommended	6,597,220	20.5

Criminal Justice/Behavioral Health Services

Criminal Justice/Behavioral Health Services is composed of three programs: (1) Clinical Assessment and Triage Services (CATS), (2) Community Re-Entry Services (CRES), and (3) Jail Addiction Services (JAS). CATS provides assessment and post-booking diversion services within 24 hours of booking to inmates with behavioral health issues upon entry into the Montgomery County Detention Center. JAS is an intensive jail-based residential addiction treatment program for inmates who suffer with substance related disorders at the Montgomery County Correctional Facility. CRES provides court advocacy and release planning for inmates at the Montgomery Correctional Facility by assessing inmates' behavioral health needs and coordinating access to services in the Community.

Program Performance Measures	Actual FY09	Actual FY10	Estimated FY11	Target FY12	Target FY13
Percentage of successful Jail Addiction Services (JAS) clients who were not reincarcerated in the MCCF within the next fiscal year following program completion	79	80	80	80	80

FY12 Recommended Changes	Expenditures	WYs
FY11 Approved	2,483,500	18.5
Miscellaneous adjustments, including restoration of employee furloughs, employee benefit changes, changes due to staff turnover, reorganizations, and other budget changes affecting more than one program	-79,950	0.6
FY12 CE Recommended	2,403,550	19.1

Outpatient Addiction Services (OAS)

OAS provides comprehensive and quality outpatient, intensive outpatient, drug court, and medication assisted treatment services to adult residents of Montgomery County, who are diagnosed with substance use disorders or co-occurring mental health and substance use disorders. Priority populations include people who are indigent, homeless, medically compromised, women who are pregnant or those with infants, individuals involved with the criminal justice system, and people with HIV/AIDS.

Program Performance Measures	Actual FY09	Actual FY10	Estimated FY11	Target FY12	Target FY13
Percentage of clients who completed treatment plan upon discharge (% is based on discharged clients)	30	37	39	40	41

FY12 Recommended Changes	Expenditures	WYs
FY11 Approved	3,867,620	30.9
Replace: SAMHSA Capacity Expansion Grant - Partial Year Funding for a Full-time Therapist II Position in the Adult Drug Court	59,100	0.6
Technical Adj: Shift Personnel Costs to Operating Expenses - Adult Drug Court Capacity Grant	0	-1.1
Reduce: Abolish a Full-time Supervisory Therapist Position in Drug Court Services and a Full-time Therapist II Position	-229,920	-2.0
Miscellaneous adjustments, including restoration of employee furloughs, employee benefit changes, changes due to staff turnover, reorganizations, and other budget changes affecting more than one program	138,200	0.8
FY12 CE Recommended	3,835,000	29.2

Domestic Violence, Sexual Assault, and Trauma Services Program

This new program is the result of the merger of the Victims Assistance and Sexual Assault Program (VASAP) and Abused Persons Program (APP). The Domestic Violence, Sexual Assault, and Trauma Services Program provide integrated clinical services to victims of domestic violence, sexual assault, and general crime. All victims may be assessed and receive short term counseling and psychiatric care as well as a variety of specialty services geared to their particular need. Programming for domestic violence also includes information and referral, crisis intervention, safety planning, and placement in emergency shelter. Assessment and counseling are also provided to those who have been abusive towards their partners. Services are provided on-site at the Family Justice Center as well as at 1301 Piccard Drive. Also provided at 1301 Piccard Drive is programming for victims of sexual assault,

which includes outreach twenty-four hours/day seven days/week through volunteer support to rape and sexual assault victims at hospitals and police stations, information and referral, and assistance with crime victim compensation.

Program Performance Measures	Actual FY09	Actual FY10	Estimated FY11	Target FY12	Target FY13
Percentage of adult victims of sexual assault and general crime who show a decrease in symptoms after treatment (as measured by Post-traumatic Stress Disorder (PTSD) Checklist – Civilian (PCL-C) clinical scales)	86	88	85	85	
Percentage of child victims of sexual assault and general crime who show a decrease in symptoms after treatment (as measured by the Child's Reaction to Traumatic Events Scale (CRTES) clinical scales)	78	79	78	78	78

FY12 Recommended Changes	Expenditures	WYs
FY11 Approved	2,594,560	18.4
Increase Cost: Net Changes to the Victims Compensation Fund Match	1,890	0.0
Eliminate: American Recovery and Reinvestment Act (ARRA) - Silver Spring Courthouse	-21,610	-0.3
Reduce: Eliminate the Contract for Human Trafficking Outreach Education and Legal Services in Victim Assistance and Sexual Assault Services	-62,570	0.0
Reduce: Abolish Two Part-time and One Full-time Therapist II Positions in Victim Assistance and Sexual Assault Program	-345,610	-2.6
Miscellaneous adjustments, including restoration of employee furloughs, employee benefit changes, changes due to staff turnover, reorganizations, and other budget changes affecting more than one program	2,457,230	11.7
FY12 CE Recommended	4,623,890	27.2

Notes: Miscellaneous adjustments include the shift of the Abused Persons Program to this program.

Child and Adolescent Mental Health Services

Child and Adolescent Mental Health Services is comprised of three components that provide or support comprehensive mental health treatment and care coordination services to children, youth, and their families that are individualized, culturally, and linguistically appropriate and administered in the least restrictive, most conducive environment. The Child and Adolescent Outpatient Mental Health Service provides assessment, psychiatric, and therapeutic treatment to children and adolescents with serious emotional impairments. The Home-based Treatment Team provides specialized, evidence-based mobile treatment specifically for children and families involved with Child Welfare Services. The System of Care Development and Management Team collaborates with Local and State partners to plan, develop, and manage publicly-funded (State and County) mental health and care coordination services for children and adolescents. All three components are guided by the principles that services should be child focused, family driven, and culturally competent.

Program Performance Measures	Actual FY09	Actual FY10	Estimated FY11	Target FY12	Target FY13
Percentage of clients who meet their treatment goals at the time of discharge ¹	71	71	73	73	73

¹ Percentage is based on number closed.

FY12 Recommended Changes	Expenditures	WYs
FY11 Approved	3,078,450	16.0
Decrease Cost: Mental Health and Substance Abuse Services to Three Families	-2,390	0.0
Miscellaneous adjustments, including restoration of employee furloughs, employee benefit changes, changes due to staff turnover, reorganizations, and other budget changes affecting more than one program	-114,540	0.6
FY12 CE Recommended	2,961,520	16.6

24-Hour Crisis Center

This program provides telephone, walk-in, mobile crisis outreach, and crisis residential services to persons experiencing situational, emotional, or mental health crises. The Crisis Center provides all services, twenty-four hours/day seven days/week. Much of the work of the Crisis Center focuses upon providing the least restrictive community-based service that is appropriate to the client's situation. Many of the services provided are alternatives to more traditional mental health services. Psychiatric crisis resources are used to prevent hospitalizations and suicides. Disaster mental health services include crisis management and consultation for disasters and community crises. The Crisis Center coordinates the mental health response during disasters and community critical incidents. During the off-hours (after 5:00 p.m., weekends, and holidays), crisis back-up services are provided for various health and human services needs when the clients' primary service providers are not available.

Program Performance Measures	Actual FY09	Actual FY10	Estimated FY11	Target FY12	Target FY13
Percentage of students identified by schools to be at risk who are stabilized utilizing community resources without hospital intervention	94	96	95	95	95

FY12 Recommended Changes	Expenditures	WYs
FY11 Approved	4,154,340	34.0
Decrease Cost: Taxi Services for Crisis Center and Abused Person Program	-2,640	0.0
Shift: Funding for the Hotline Contract for Crisis Center to the Community Mental Health Grant	-5,910	0.0
Miscellaneous adjustments, including restoration of employee furloughs, employee benefit changes, changes due to staff turnover, reorganizations, and other budget changes affecting more than one program	-158,880	-0.1
FY12 CE Recommended	3,986,910	33.9

Mental Health Svcs: Seniors & Persons with Disabilities

This program provides outreach mental health services for seniors who cannot or will not access office based services as well as persons experiencing caregiver stress. It provides Prevention and Early Intervention services for seniors by providing drop in groups at senior centers, psycho education, consultation to assisted living providers, Housing Opportunities Commission (HOC) resident counselors and senior center directors, and mental health training for providers of services for seniors. This program also provides mental health services to persons who are deaf or hearing impaired.

Program Performance Measures	Actual FY09	Actual FY10	Estimated FY11	Target FY12	Target FY13
Percentage of surveyed homebound seniors reporting an improvement in their quality of life as measured by Mental Health Statistics Improvement Program (MHSIP) Consumer Survey Scale ¹	N/A	72	70	70	70

¹ FY10 is the baseline year.

FY12 Recommended Changes	Expenditures	WYs
FY11 Approved	626,890	2.0
Miscellaneous adjustments, including restoration of employee furloughs, employee benefit changes, changes due to staff turnover, reorganizations, and other budget changes affecting more than one program	-18,010	0.0
FY12 CE Recommended	608,880	2.0

Abused Persons Program

The Abused Persons Program is now included in the Domestic Violence, Sexual Assault, and Trauma Services Program.

Program Performance Measures	Actual FY09	Actual FY10	Estimated FY11	Target FY12	Target FY13
Percentage of clients receiving therapy who demonstrate improvement on a domestic violence rating scale	80	81	81	81	81

FY12 Recommended Changes	Expenditures	WYs
FY11 Approved	3,043,380	15.4
Technical Adj: Shift Personnel Costs to Operating Expenses - Stop Domestic Violence Now Grant	0	-0.5
Eliminate: Gudelsky Foundation Grant	-15,000	0.0
Eliminate: Legal Services Program for Women	-42,980	0.0
Decrease Cost: Abolish a Full-time Manager III Position due to Consolidated Programs	-162,140	-1.0
Decrease Cost: Abolish Two and Shift Three Client Assistant Specialist Positions to the Office of the Sheriff	-219,460	-3.1
Miscellaneous adjustments, including restoration of employee furloughs, employee benefit changes, changes due to staff turnover, reorganizations, and other budget changes affecting more than one program	-2,603,800	-10.8
FY12 CE Recommended	0	0.0

Notes: Miscellaneous adjustments include the shift of this program to the Domestic Violence, Sexual Assault, and Trauma Services Program.

Service Area Administration

This program provides leadership, oversight, and guidance for the administration of Behavioral Health and Crisis Services.

FY12 Recommended Changes	Expenditures	WYs
FY11 Approved	556,380	3.7
Miscellaneous adjustments, including restoration of employee furloughs, employee benefit changes, changes due to staff turnover, reorganizations, and other budget changes affecting more than one program	-1,330	0.1
FY12 CE Recommended	555,050	3.8

PROGRAM SUMMARY

Program Name	FY11 Approved		FY12 Recommended	
	Expenditures	WYs	Expenditures	WYs
Behavioral Health Planning and Management	7,897,830	18.8	9,483,170	21.0
Behavioral Health Specialty Services	2,502,260	17.6	2,432,720	18.0
Behavioral Health Community Support Svcs	6,941,700	20.9	6,597,220	20.5
Criminal Justice/Behavioral Health Services	2,483,500	18.5	2,403,550	19.1
Outpatient Addiction Services (OAS)	3,867,620	30.9	3,835,000	29.2
Domestic Violence, Sexual Assault, and Trauma Services Program	2,594,560	18.4	4,623,890	27.2
Child and Adolescent Mental Health Services	3,078,450	16.0	2,961,520	16.6
24-Hour Crisis Center	4,154,340	34.0	3,986,910	33.9
Mental Health Svcs: Seniors & Persons with Disabilities	626,890	2.0	608,880	2.0
Abused Persons Program	3,043,380	15.4	0	0.0
Service Area Administration	556,380	3.7	555,050	3.8
Total	37,746,910	196.2	37,487,910	192.7



Alcohol and Other Drug Abuse Advisory Council

HHS Budget Reductions that Impact Adult Addictions

- **Reduction of the Lawrence Court Halfway House Budget by \$130,600**
 - This is 1/3 of the LCHWH Budget
 - Efforts will be made to covert the program to an Intensive Outpatient Program with some Half Way House bed availability
 - IOP Services and assistance seeking employment and job support would be included and be reimbursable by Medicaid
 - Retaining \$70,000 of the \$130,600 would assist the vendor – Powell Recovery Inc. with this transition
- **Four Positions were also eliminated form the Adult Addictions and Juvenile Justice programs:**
 - Social Worker IV for Community Case Management
 - Supervisory Therapist for the Adult Drug Court Program
 - Therapist II for the Intensive Outpatient Program at OAS
 - Principal Administrative Aide (PAA) Juvenile Justice
- **ADAA may also be eliminating:**
 1. SAMHSA funding for the Prevention Coordinator position;
 2. Approximately an additional \$130,000 in funding from the ADAA Block Grant is also anticipated
 - Where this reduction will be taken is still to be determined
- **Funding to support Housing Alternatives for XYZ was not included in the County Executives Budget and is still needed as a Community Grant - \$10,000**
- **The “Under One Roof” primary health care clinic was discontinued last year when the Grant funding ran out.**
 - Primary Health Care is still desperately needed for the Adult Substance Abusing population many of whom are also homeless



Alcohol and Other Drug Abuse Advisory Council

ANNUAL REPORT 2009-2010

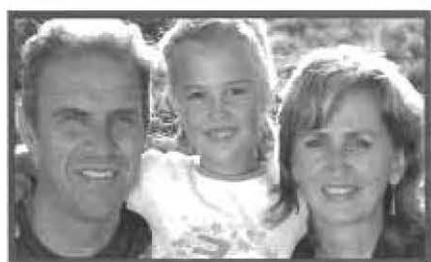
Inside this issue:

Montgomery County Government
Department of Health & Human Services

The goal of the Alcohol and Other Drug Abuse Advisory Council is to express the view of the community in the formulation and administration of alcohol and other drug abuse prevention and treatment services in Montgomery County. Members of the Alcohol and Other Drug Abuse Advisory Council serve as community representatives, who provide guidance to the County Executive and the County Council in identifying prevention and treatment needs and reviewing the county's efforts in addressing those needs. The Advisory Council will make recommendations in support of, or to improve, current prevention and treatment efforts.

- Prevention Works
- Treatment is Effective
- People Recover
- Early detection and timely treatment saves lives and resources

Letter of Transmittal	2
AODAAC Membership	3
AODAAC Meeting Highlights	4
Recovery Month Event	6
2010 Public Forum	7
What A Dime Buys—Raising the State	8
Drug Forfeiture Funds	9
AODAAC Policy Priorities	10
AODAAC Budget Priorities	11
Montgomery County Continuum of Care	12
Drug and Alcohol Resource Links	13
Contact Information	14





Letter of Transmittal to:

Honorable Isiah Leggett, Montgomery County Executive

Honorable Nancy Floreen, President, Montgomery County Council

Uma S. Ahluwalia, Director, Montgomery County Department of Health and Human Services

The Alcohol and Other Drug Abuse Advisory Council is pleased to submit its 2009-2010 Annual Report. The AODAAC is comprised of a group of committed citizens, representing a wide range of backgrounds and interests, whose goal is to keep you, the County Council, and the Director of the Department of Health and Human Services (DHHS) informed of pertinent alcohol and other drug abuse issues within Montgomery County.

Pursuant to the *AODAAC By-Laws, Bill 40-91 (1991), Bill 7-95 (1995)*, the Council is mandated on an annual basis: to identify local alcohol and other drug abuse program needs, to review the county submission to the State of Maryland Alcohol and Other Drug Abuse Plan, to make recommendations to the state Alcohol and Drug Abuse Administration regarding that plan, to issue an annual report to the County Executive, County Council, and the Director of Health and Human Services regarding the Council's view of the needs of the alcohol and drug abuse prevention and treatment system in the county, to evaluate the progress, and identify the actions necessary to improve local alcohol and drug abuse prevention and treatment programs.

The AODAAC had a very successful year, demonstrated by the highlights of our Recovery Month Event and Public Forum which focused on gathering data for a snapshot of County substance abuse prevention and treatment needs. The Advisory Council continued to advocate for Montgomery County resources to maintain the substance abuse prevention and treatment system. Even during these difficult economic times, Montgomery County government has been generous in their support of behavioral health and related programs, including services for children, youth and families, drug courts, gang prevention, and criminal justice. The support from the County has been significant and the Advisory Council is extremely appreciative to the County Executive and the County Council for their support.

We would like to acknowledge Councilmember Duchy Trachtenberg who has always supported our efforts and has been our biggest advocate, DHHS Director Uma Ahluwalia for continuing to meet with the Boards, Commissions, and Councils to keep us informed of important health and human services issues; Richard Kunkel, Adult Addiction Services Manager, and the Addictions Management staff for their outstanding support in providing the AODAAC with the resources needed to assist the Advisory Council in its work. This report is the result of our combined efforts.

AODAAC MEMBERSHIP 2009-2010

Voting Members

OFFICERS

D'Artanyon Yarborough,
Chair, Multi-Cultural
Diversity

Alan Trachtenberg,
Co-Vice Chair, Substance
Abuse Prevention

Patricia Sullivan, Co-Vice
Chair, Business

MEMBERS

Steve Coulter, General
Public

Paul Harrington, General
Public

Lee Jansky, General Public

Julie Kiltz, Student

Ryan King, General Public

A.J. Mitchell, General Public

Howard Moss, Treatment

Eric Sterling, Legal

Damon Stevenson, Rela-
tive of a Recipient of Care

James Sutton, Individual in
Recovery

Charles Thomas, Clergy

Joseph Wakanhala, Gen-
eral Public

Roni White, PTA



Ex-Officio Members

Richard Kunkel—Montgomery Co. Dept. of Health and Human Services

Rita Rumbaugh—Montgomery Co. Public Schools, Safe and Drug Free Schools

Suzy Malagari—Department of Correction and Rehabilitation

Emily DeTitta and Diana Muller —Department of Liquor Control

Elizabeth Arnold—Mental Health Advisory Committee

Samantha Davis—Victim Services Advisory Board

Health & Human Services Resource Staff

Angela Talley —Juvenile Justice Services

Dorothy Moore—Substance Abuse Prevention

Hardy Bennett—Criminal Justice Behavioral Health Services

Catherine McAlpine—Behavioral Health Community Support Services

Larry Gamble—Outpatient Addiction and Mental Health Services

Tracey Butler —Adult Addiction Services, Staff Liaison

MEETINGS

Meetings are generally held the second Thursday of each month, September through June, 7:00pm-9:00pm, at 401 Hungerford Dr., 1st Floor Conference Center, Rockville, MD 20850. All meetings are open to the public and the Advisory Council welcomes visitors. Please call 240-777-4392 for any schedule or location changes.



AODAAC 2009-2010 MEETING HIGHLIGHTS

September 2009

- 2008 Montgomery County police data indicates that 9% of all arrests were simple marijuana possession charges. Arrest costs should be discussed with a police representative. Should the AODAAC get involved with marijuana legalization or decriminalization issues.
- The last two Treatment Committee meetings included treatment clients and their concerns about certain treatment programs.
- Drug asset forfeiture money could possibly be used for substance abuse prevention and treatment. A motion was made "Whereas addiction treatment is crime prevention, therefore be it resolved that the Montgomery County Drug Enforcement Forfeiture Fund regulations be amended to include as an authorized use of funds for 'drug abuse treatment and prevention services'."
- Approximately 200 people attended the Recovery Month Event at Eastern Middle School on September 16th.
From surveys received and informal feedback, the event was very successful.

October 2009

- AODAAC drafted and presented testimony at the Montgomery County's Community Development Advisory Council (CDAC) public hearing.
- Legal Representative Eric Sterling is updating the By-Laws which include mandates for AODAAC's state functions plus adding a standing Harm Reduction committee.

November 2009

- Harm Reduction issues discussed: Good Samaritan Law, Needle Exchange Program, Naloxone, Harm Reduction speakers to attend meetings, ways to advocate through the legislative process.
- New state fee for service system through Medicaid reform and Primary Adult Care instead of block funding for outpatient treatment programs.
- Interest in collaborating with the Veterans Affairs Commission.
- Avery Road Combined Care clients have been advocating for the alcohol tax increase at the state level.
- Prevention Works and DC Needle Exchange presented information on their mobile unit, needle exchange, HIV testing and referrals to treatment and other services.

December 2009

- Recovery Oriented Systems of Care (ROSC) Presentation
- Review and approval of the Montgomery County Strategic Plan for Alcohol and Drug Abuse
- Prevention Committee discussion of the impact on the Student Assistance Program at MCPS which has been heavily affected by Safe and Drug Free Schools funding cuts. Need to focus on reaching out to PTA's. The committee will look into preparing testimony for the MCPS School Board Operating Budget hearings to support prevention education in the schools.

January 2010

AODAAC ANNUAL PUBLIC FORUM

3 Main Themes:

- 1) Need for wrap-around services such as: supportive and transitional housing, case management, vocational rehabilitation, treatment for co-occurring disorders, and ongoing counseling for individuals coming out of treatment.
- 2) Mentors for youth to help keep them on track
- 3) Importance of more comprehensive re-entry programs that help individuals return to the community from incarceration.

AODAAC 2009-2010 MEETING HIGHLIGHTS**February 2010 – No meeting – inclement weather****March 2010**

- Discussion of Under One Roof Primary Health Care clinic housed at Outpatient Addiction Services is closing. Group discussed developing a petition to send to all boards, commissions and committees for signatures and write letters of support.
- The group created talking points for meeting with the County Executive.
- Adhoc State Matters Committee following the 10 cent alcohol tax increase bill.
- Tour and overview of the Men's Emergency Shelter, Chase Partnership and Safe Havens.

April 2010

- Presentation from Drawing the Line on Substance Abuse Education.
- Treatment Committee reviewing and improving Medication Assisted Treatment Orientation Manual.
- Adhoc Harm Reduction Committee – working on barriers to treatment.
- Adhoc Recovery Month Committee chose September 15 as event date.
- MCPS Student Video contest.

May 2010

- Avery Road Treatment Center overview and tour of facility.
- Interviewing and Nominating Committee members chosen.
- It was decided to have the annual September Recovery Month Event be recognized as the official September AODAAC meeting.
- Adhoc Strategic Plan Committee recommended adding "Recovery Oriented Systems of Care" to the Strategic Plan.
- Adhoc State Matters committee reported that the AODAAC is now codified in State law.
- Eric Sterling reported on the Drug Overdose Reduction Act.

June 2010

- The updated Montgomery County Strategic Plan for Alcohol and Drugs was approved.
- Keeping It Safe – Student Video Contest
- Prevention Committee looking into ways of starting a conversation with MCPS.
- Treatment Committee looking into how the AODAAC can help treatment providers have better access pharmacotherapy.



SEPTEMBER 16, 2009 * 5:00 pm—8:00 pm

**MONTGOMERY COUNTY
RECOVERY MONTH CELEBRATION**
***BUILDING BRIDGES TO
RECOVERY***



**Eastern Middle School Cafeteria
300 University Blvd. East
Silver Spring, MD, 20901**



WHO ATTENDED?

Those providing bridges to recovery:

- **Community agencies**
- **Employers**
- **Family and friends**
- **Advocates**

Keynote Speaker:

The Honorable Nelson W. Rupp, Jr.

Live Entertainment

Door Prizes

Refreshments

Resource Tables

**PLEASE RSVP: 240-773-0100 or
celebraterecovery2009@gmail.com**

This event was sponsored by the Alcohol and Other Drug Abuse Advisory Council, MCPS Safe and Drug Free Schools, Avery Road Combined Care, Women Who Care Ministries, Montgomery County Community Partnership, and the Stairway to Hope Foundation.

Alcohol and Other Drug Abuse Advisory Council (AODAAC)**2010 PUBLIC FORUM**

**Mt. Calvary Baptist Church
608 North Horners Lane
Rockville, MD 20850**

The AODAAC invited the public to a forum which was held on January 14, 2010 in the Fellowship Hall at Mt. Calvary Baptist Church. Approximately 50 people were in attendance. AODAAC Public Forum Chair Steve Coulter opened the forum and discussed AODAAC's mission and the purpose of the forum which was to give the public an opportunity to share their thoughts and concerns in regards to substance abuse prevention, intervention, treatment, and legislation.

Members of the Alcohol and Other Drug Abuse Advisory Council serve as community representatives, who provide guidance to the County Executive and the County Council in identifying prevention and treatment needs and reviewing the County's efforts in addressing those needs. The Council will make recommendations in support of, or to improve, current prevention and treatment efforts.

Article III, Sections F and H of the Alcohol and Other Drug Abuse Advisory Council (AODAAC) By-Laws state that the Council shall: Conduct or participate in, each year, one or more public forums concerning alcoholism and other drug abuse. Serve as the forum at which community-perceived problems regarding alcohol and other drug abuse prevention and treatment services in Montgomery County can be discussed and recommendations made to the Directors of the Department of Health and Human Services and other departments.

SUMMARY OF PUBLIC FORUM DISCUSSION**First Speakers: Lily (Person in Recovery) and her mother**

Lily spoke about her experiences in treatment and recovery and the importance of maintaining funding for treatment programs. Lily's mother spoke about how important intervention is for helping people get into treatment and described her experience with a police officer that helped her daughter get into treatment.

Second Speaker: Arthur (Case Manager and Person in Recovery)

Arthur stressed the importance of wrap-around services, supportive and transitional housing, case management, vocational rehabilitation, treatment for co-occurring disorders, and ongoing counseling for individuals coming out of treatment. He also expressed concern about the lack of prevention services at the elementary school level.

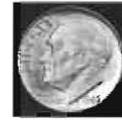
Third Speaker: CJ (Person in Recovery)

CJ spoke about his multiple treatment episodes and the lack of support he experienced. He stressed the importance of youth having mentors to help them keep on track.

Fourth Speaker: Patrick (Person in Recovery)

Client told about his 16 year incarceration and how he became addicted to heroin while in prison. He expressed his gratitude about being in a residential treatment program and how it is helping him re-enter back into the community – social networking, vocational, alcohol and drug counseling. He stressed the importance of re-entry programs helping individuals return to the community from incarceration.

Baltimore Sun Editorial Sunday, December 6, 2009



WHAT A DIME BUYS

Conventional wisdom in Maryland's State House holds that lawmakers never, ever raise taxes in an election year. The notion is so deeply embedded in the Annapolis political class that it might as well be carved in marble and offered as the official state slogan.

Yet abandoning that custom in 2010 would give state legislators an opportunity to strike a blow against alcohol abuse, underage drinking, murder, rape and other acts of violence across Maryland, while simultaneously sparing the public from the worst effects of budget reductions forced by the current economic downturn.

That could not only prove a godsend for the state's most vulnerable residents and provide much-needed funding for schools, health care and other basic necessities that are on the government chopping board - it may also reduce the need for local governments to raise property taxes in the near future.

All that is required is the political will to raise Maryland's excise tax on alcohol, an assessment that's been kept so low for so long that it has become a hindrance to the public's health and well-being. The tax currently amounts to about one penny a drink for beer and two cents for wine and distilled spirits, rates left untouched by inflation for so long, they've become among the lowest in the nation.

As a recent report prepared by two professors from the Johns Hopkins University Bloomberg School of Public Health makes clear, raising that tax to the equivalent of about 10 cents per drink would pay huge dividends. By their estimate: 14,987 fewer cases of alcohol dependence, 37 fewer deaths (many of them traffic-related), 13 fewer rapes, 316 fewer assaults, 21 fewer robberies, 67 fewer incidents of severe violence against children and 19 fewer cases of fetal alcohol syndrome each year.

That may seem a leap of faith, but Professors David H. Jernigan and Hugh Waters say they have the real-world experience to back it up - dozens of studies showing that whenever states raise the tax on alcohol, drinking (and excessive drinking) declines. They predict the higher tax would reduce consumption in Maryland by slightly under 5 percent; the public health benefits accrue from that.

The impact on underage drinking is particularly important as surveys show 1 in 4 high school-age Marylanders admit to being binge drinkers, meaning they consumed five or more drinks within two hours at least once in the past 30 days. About one-third of teen deaths are alcohol-related.

The liquor industry is a potent political force in Annapolis and will no doubt offer the usual protestation that the tax would hurt tavern owners and other small employers. But a 5 percent loss in sales seems minor compared to the many lives saved.

The higher tax would raise about \$214.4 million in new revenues for a state that is already facing a budget shortfall next year of as much as \$2 billion. Without the tax increase, the state is likely to reduce local aid, a decision bound to pressure the counties to raise property taxes - if not next year, then soon.

If history is any guide, lawmakers are bound to be reluctant to raise taxes next year. But protecting the alcohol industry at the expense of schools and other vital services (not to mention bankrupting local government) may raise the ire of voters more.

Polls have long shown a majority of Marylanders favor an alcohol tax increase. Voting nay on alcohol taxes next year may cause producers and distributors to pour a lot more money into campaign coffers, but it won't help state delegates and senators win re-election.

Liquor taxes by state per gallon

	TOP 5	SPIRITS	BEER	WINE
1	Alaska	\$12.80	\$2.50	\$1.07
2	Alabama	\$18.78	\$1.70	\$1.05
3	Georgia	\$3.79	\$1.51	\$1.01
4	Virginia	\$20.13	\$1.51	\$0.2565
5	Washington	\$26.45	\$0.87	\$0.26

	BOTTOM 5	SPIRITS	BEER	WINE
46	Texas	\$2.40	\$0.20	\$0.20
47	Missouri	\$2.00	\$0.42	\$0.06
48	MARYLAND	\$1.50	\$0.40	\$0.09
49	Wisconsin	\$3.25	\$0.25	\$0.06
50	Colorado	\$2.28	\$0.28	\$0.08

Montgomery County Council

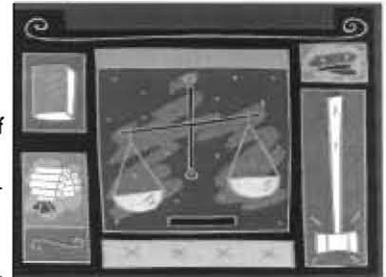
For Immediate Release November 17, 2009

Montgomery Council Unanimously Approves Expanded Uses of Drug Forfeiture Funds

Bill 35-09, Whose Chief Sponsor Was Councilmember Duchy Trachtenberg, Will Allow Money Seized From Drug Criminals To Be Used for Drug Treatment and Prevention Programs

ROCKVILLE, Md., November 17, 2009—The Montgomery County Council today unanimously approved Expedited Bill 35-09 that will allow money seized from criminals convicted of drug-related crimes to be used for drug treatment and prevention programs. The bill, whose chief sponsor was Councilmember Duchy Trachtenberg, was co-sponsored by Council President Phil Andrews, Council Vice President Roger Berliner and Council Members Marc Elrich, George Leventhal and Nancy Navarro.

The bill amends current law that restricts the use of Drug Enforcement Forfeiture Funds to “expenses related to enforcement of laws regarding controlled dangerous substances.” The Drug Enforcement Forfeitures Fund (DEFF) contains money that is forfeited to the County under state law as drug-related contraband. The fund includes cash and the proceeds of the sale of real and personal property seized during drug enforcement actions. The DEFF had a balance of \$2,686,145 at the beginning of Fiscal Year 2009 and had approximately \$2.3 million at the beginning of FY10.



Councilmember Trachtenberg, who chairs the Council’s Management and Fiscal Policy Committee and serves on its Health and Human Services Committee, said a change in the law regarding how forfeited funds could be spent will be important as the County continues to face budget shortfalls that are impacting programs, such as drug prevention and drug treatment programs.

“Drug prevention and treatment programs, and the operation of the Drug Court, are important parts of a successful campaign to reduce the use of controlled dangerous substances,” said Councilmember Trachtenberg. “Recent severe shortfalls in County revenue make it important to look for alternative sources to fund these critical programs. It is hard to think of a better use of money seized from drug offenders than to allocate it toward people who want help for their drug-related problems.”

Allocating DEFF funds for drug treatment and prevention programs will increase the non-tax supported alternative funding available for these critical programs. “This is a timely and most appropriate use of these funds,” said Council President Andrews. “At a time when we are forced to make difficult fiscal decisions, it is essential that critical programs such as rehabilitating drug offenders continue to have adequate funding.”

Expedited Bill 35-09 also will require quarterly reporting to the Council on the DEFF revenue and expenses. The Council is responsible for appropriating the funds in the DEFF. Regular reports will provide important information to help the Council in appropriating these funds in the most effective way.

The quarterly reports on the fund, which will be made by the Police Department, will include an update on the current balance in the fund, information on recent deposits from forfeitures and details on recent expenditures from the fund.

“This legislation is another example of good government,” said Council Vice President Berliner. “We need to carefully manage our scarce resources—now more than ever—and this bill is a step in the right direction.”

In September, the Montgomery County Alcohol and Other Drug Abuse Advisory Council (AODAAC) unanimously adopted a motion in support of what has evolved to become Expedited Bill 35-09. The resolution read: “Whereas addiction treatment is crime prevention, therefore be it resolved that the Montgomery County Drug Enforcement Forfeiture Fund regulations be amended to include as an authorized use of funds ‘drug abuse treatment and prevention services.’”

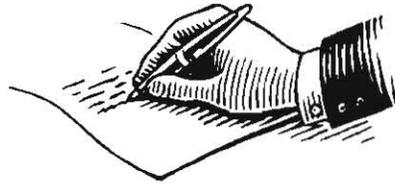
###

Eric E. Sterling, J.D.,

Representative of the Legal Profession

Alcohol and Other Drug Abuse Advisory Council, Montgomery County, MD (term expires 2012)

AODAAC FY10 POLICY PRIORITIES



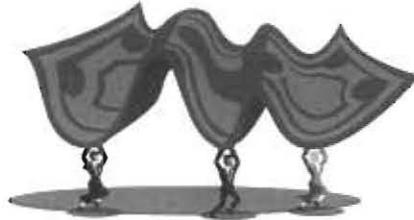
Benefits of Addiction Treatment

- ◆ Addiction prevention and treatment services saves \$\$\$\$.
- ◆ Addiction treatment saves lives.
- ◆ Addiction prevention and treatment services make the community safer.
- ◆ People in recovery “give back” to their community.
- ◆ Addiction prevention and treatment services strengthen families.
- ◆ Addiction prevention and treatment services coupled with primary health care services preserve and protect the health of the community.
- ◆ HIV/AIDS prevention.
- ◆ Provides treatment for a myriad of primary health care problems: hypertension, diabetes, high cholesterol, dental, vision, and hearing, etc.
- ◆ A lack of adequate treatment and health care services affect the rest of the human services system: criminal justice, hospital emergency rooms, detention facilities, child welfare, employment.

IN OUR ROLE AS THE STATE-MANDATED LOCAL DRUG AND ALCOHOL ABUSE COUNCIL, THE AODAAC RECOMMENDS A STATE TAX INCREASE ON ALCOHOLIC BEVERAGE PRODUCTS FOR THE PURPOSE OF REDUCING CONSUMPTION BY UNDERAGE YOUTH AND TO FUND LOCAL ALCOHOL AND DRUG PREVENTION AND TREATMENT PROGRAMS.

Current funding for the continuum of addiction treatment services consists of Federal, State, and locally generated dollars. Over the past two years efforts to increase the tax on sales of alcohol at the state level have failed. An article in the Baltimore Sun, December 30, 2007 by Bradley Olson stated that taxes have not increased since 1955 in the case of alcohol, and 1972 for beer and wine. The article went on to say that “a survey last year commissioned by the Baltimore chapter of the Open Society Institute found that of 1,214 likely Maryland voters more than two-thirds of those support increasing alcohol taxes to support funding for alcohol and drug treatment.” Alcohol taxes were once intended to keep prices high enough to deter excessive use. However, these taxes have not kept pace with general inflation, and the real price of beer has actually dropped in the past 30 years. The five states with the highest beer taxes have significantly lower rates of teen binge drinking than the states with the lowest taxes. **MARYLAND IS RANKED 8TH LOWEST IN THE COUNTRY!** (Join Together – Advancing Effective Alcohol and Drug Policy, Prevention, and Treatment. Raise Alcohol Taxes)

AODAAC FY10 BUDGET PRIORITIES



Maintain Current Funding Levels for the County's Continuum of Services

We want to voice our appreciation for the commitment shown in maintaining current funding levels for the continuum of services and supports to date. We also want to caution that any cuts in funding at this time will seriously compromise current services and supports, and could well harm the community at large. Simply put, the current continuum is operating at a floor that cannot absorb any reductions. **It is important to note that for every \$1.00 that goes into treatment, the public saves \$7.00 in health care and criminal justice related costs. (1994 CALDATA Study)**

Maintain Current Level of Outpatient Adolescent Substance Abuse Treatment:

Level funding is needed to maintain the Outpatient continuum of services at the current level. Adolescent substance abuse treatment services are provided primarily through contracted services. For FY10, the Juvenile Justice Programs funded 120 adolescent treatment slots county-wide, a reduction of 80 from 2009 just to *maintain the same level of services*. The contractors are continuing to provide close to 200 treatment slots without full funding, but this will not be sustainable in future years. Research shows that alternatives to incarceration, such as mental health and substance abuse treatment, and effective after care, are supports through which adolescents can get their lives back on track. The use of scientifically proven interventions in the community with juvenile offenders reduces recidivism by 38 percent and saves \$10 for every taxpayer dollar spent. (*Rehabilitating Juvenile Offenders. The MacArthur Foundation*)

Maintain Current Substance Abuse Prevention Funding

There is insufficient funding to continue the Under 21 Grant program at current levels; \$41,440 serving 41 diverse organizations reaching approximately 15,289 youth countywide. All levels will be decreased by more than 50% in FY11. The Strengthening Families Program grant is scheduled to end June 30, 2010.

THE AODAAC SUPPORTS ADDITIONAL FUNDING SUPPORT BECAUSE OF THE ELIMINATION OF THE SAFE AND DRUG FREE SCHOOLS AND COMMUNITIES PROGRAM GRANT

Due to the FY 2010 Federal appropriation for Safe and Drug Free Schools, Montgomery County Public Schools lost federal support for important programs. This is a huge problem and a gigantic mistake because it will decimate the substance abuse and violence prevention infrastructure that is currently in place in our state.

Currently, there is:

- **NO** gang prevention or awareness for school staff or parents' seminars in targeted communities
- **NO** gang prevention community forums or early intervention for gang-related behaviors among students
- **NO** youth violence/ bullying prevention community and school seminars
- **NO** alcohol and other drug prevention/ intervention staff development
- **NO** student assistance programs at secondary schools
- **NO** awareness/ drug policy development with non-public school staff
- **NO** continued professional development courses in juvenile justice for school staff
- **NO** continued professional development courses for staff working with children affected by family drug abuse

MONTGOMERY COUNTY CONTINUUM OF CARE

ADULT TREATMENT SERVICES

Access to Behavioral Health Services 255 Rockville Pike, Suite 145, Rockville ■ **Substance Abuse 240-777-4710/Mental Health 240-777-1770** Responsible for intake, assessment, referral and case management services to Montgomery County's Adult Alcohol and Drug Treatment Continuum of Care, whether voluntary or court ordered. Services also include children and adult mental health intake and eligibility assessment, Residential Services Management, Urine Monitoring, Walk-in Intake, and Intensive Day Treatment programs.

PROGRAMS	TYPE/ LENGTH OF STAY
Level I Outpatient Addiction Treatment Providers: Suburban Hospital, Counseling Plus, Outpatient Addiction Services, Journeys for Adults, Journey to Self Understanding, Family Health Center	Outpatient - 1-3 times per week/6 months
Outpatient Addiction Services Journeys Program for Women	Intensive Outpatient - 9+ hours per week/9-18 months
Avery Road Combined Care	Intensive Outpatient - 20+ hours per week/9-18 months
Outpatient Addiction Services – Methadone Maintenance	Outpatient - 5 days week/Ongoing
Jail Addiction Services	Confined - 8-9 week treatment program
Avery Road Treatment Center	Non-Hospital Detoxification 3-5 days
Montgomery General Hospital	Hospital Detoxification 1-5 days
Avery Road Treatment Center	Intermediate Care – residential treatment 21-28 days
Lawrence Court Halfway House	Residential - 3-6 mos.
Avery House for Women & Children	Residential - 6-9 mos.
Avery Road Combined Care (Co-Occurring Disorders)	Residential - 6-18 mos.
Phoenix Program / Second Genesis	Residential - 6-9 mos.

CHILD & ADOLESCENT TREATMENT SERVICES

Child and Adolescent Outpatient Mental Health Services 240-777-1450 ■ 8818 Georgia Ave., Silver Spring Provides family-focused outpatient services to children and adolescents with mental health, addiction or behavioral problems who have Medicaid or no health insurance.

PROGRAMS	TYPE/LENGTH OF STAY
Substance Abuse Screening for Children and Adolescents (SASCA)	Assessment: 2x week for 4-6 weeks Drug and Alcohol Education: 2 sessions/4 hrs. and 6 sessions/9hrs.
KHI Services and Suburban	Outpatient - 6 months
Journeys	Intensive Outpatient - 5 days a week; approximately 20 hrs. a week
State funded and operated programs	Same as Outpatient provided in a 24-hr. live-in setting.
Access to full resources of an acute care hospital or psychiatric hospital.	Planned regimen of 24-hour medically-directed evaluation, care, and treatment.

DRUG AND ALCOHOL RESOURCE LINKS**Alcohol and Other Drug Abuse Advisory Council (AODAAC) Website**

County Website:

<http://www.montgomerycountymd.gov/hhstmpl.asp?url=/content/hhs/BoardsAndCommissions/AODAAC.asp>**State of Maryland Alcohol and Drug Abuse Administration (ADAA)**www.maryland-adaa.org**Substance Abuse and Mental Health Services Administration (SAMHSA)**www.samhsa.gov**National Institute on Alcohol Abuse and Alcoholism (NIAAA)**www.niaaa.nih.gov**National Institute on Drug Abuse (NIDA)**www.nih.nida.gov**Center for Substance Abuse Research (CESAR)**www.cesar.umd.edu**Parents – The Anti-Drug**www.theantidrug.com**National Organization on Fetal Alcohol Syndrome (NOFAS)**www.nofas.org

Substance Abuse Prevention Provides community education, outreach, information and technical assistance. Program areas include: alcohol, tobacco and other drug abuse prevention; HIV prevention; injury prevention; Five-A-Day nutrition education; and smoking cessation. Contact: Dorothy Moore. Telephone: 240-777-1116. Address: 7300 Calhoun Place, #600, Rockville, MD 20855.

Looking for substance abuse treatment? The State Alcohol and Drug Abuse Administration's (ADAA) online Resource Directory is a complete listing of all certified treatment programs in Maryland. The directory is searchable by location (county, address, and/or zip code), level of service (inpatient, outpatient, IOP, etc.), populations served, and "other services" such as DWI education and/or treatment, co-occurring disorder services, court assessment, etc. Go to the ADAA website at: www.maryland-adaa.org, click on Community Services, then go to the ADAA Treatment Locator Resource Directory or call 410-402-8600.

Department of Liquor Control, Outreach Office Provides alcohol education and youth alcohol prevention to both the community and to alcohol licensed businesses, as well as outreach, information and technical assistance. Program areas include: youth alcohol prevention; adult host responsibility and alcohol law and regulation training and information. Telephone: 240-777-1904. Address: 16650 Crabbs Branch Way, Rockville, MD 20852.
dlc@montgomerycountymd.gov

The **Maryland Adolescent Survey** is conducted to determine the nature, extent, and trend of alcohol, tobacco, and other drug use among adolescents. To access the latest report, log on to www.marylandpublicschools.org, click on Newsroom, then Special Reports, and then [2007 Maryland Adolescent Survey](#).

HOW TO CONTACT YOUR LOCAL OFFICIALS



Isiah Legett

The County Executive can be reached at:

Executive Office Building
101 Monroe St., 2nd Floor
Rockville, MD 20850
240-777-2500 (V)
240-777-2544 (TTY)
ocemail@montgomerycountymd.gov



The County Council can be reached at:

100 Maryland Avenue
Rockville, MD 20850
240-777-7900 (V)
240-777-7914 (TTY)
240-777-7888 (FAX)
County.Council@montgomerycountymd.gov

Montgomery County Council: Standing, left to right: Mike Knapp, Nancy Navarro, George Leventhal, Vice President Valerie Ervin and Marc Elrich. Seated (L to R): President Nancy Floreen, Roger Berliner, Phil Andrews and Duchy Trachtenberg.

ALCOHOL AND OTHER DRUG ABUSE ADVISORY COUNCIL

401 Hungerford Drive, 4th Floor
Rockville, MD 20850

Contact: Tracey Butler, Staff Liaison 240-777-4392

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Easy Access to Information about all Montgomery County, Health & Human Services

HHS Main Telephone 240-777-1245 / TTY: 240-777-1295
Richard Kunkel, Adult Addiction Services 240-777-1310
Dorothy Moore, Substance Abuse Prevention 240-777-1116
Angela Talley, Juvenile Justice Services 240-777-1493

VICTIM SERVICES ADVISORY BOARD

2009
ANNUAL REPORT



MONTGOMERY COUNTY, MARYLAND

VICTIM SERVICES ADVISORY BOARD

Montgomery County, Maryland
2009 Annual Report
Advocating for the Victims of Crime

Contents:

Page 1
Mission Statement
Mandate

Page 2
Message from the Chair,
Samantha Davis

Page 3
Membership and Meetings

Page 4
Major Issues

Page 6
Budget Priorities 2010

Page 7
Budget Priorities 2011

Page 8
Summary Outreach Victim
Services

Visit Our Website:
<http://www.montgomerycountymd.gov/hhsrmp1.asp?url=/content/hhs/vasap/dvhrd.asp>
Or
www.montgomerycountymd.gov/vasap (Click on Advisory Board)

MISSION STATEMENT

To support Montgomery County's commitment to serving victims of crime, including rape, domestic violence, sexual assault, homicide survivors, adults molested as children, terrorism, hate violence, robbery, driving while intoxicated (DWI) and vehicular manslaughter, assault, battery, burglary, arson, larceny, stalking, carjacking, purse snatching, harassment and vandalism and bullying.

MANDATE

The Board must periodically

- review available services and facilities for victims and their families;
- determine needs of the victim and family services/programs;
- submit at least one report annually to the County Executive and County Council on the progress of programs to victims and their families along with the actions needed to improve those programs;
- make recommendations for appropriate allocation of funds in accordance with agreed upon priorities and consideration of financial resources.

The Board also assists the Director of the Department of Health and Human Services (DHHS) in the development of the Annual Victim Services and Families Plan, and acts as a local advocate for victim services programming.

Montgomery County Code -- Art. VII, Section 24-56.

MESSAGE FROM THE CHAIR, SAMANTHA DAVIS

Dear County Executive Leggett:

It is with great enthusiasm that I greet you on behalf of the Victim Services Advisory Board (VSAB). We have worked tirelessly this year to advocate for Montgomery County's victims and their families. A major part of our work this year has been trying to find ways to tackle the issue of bullying in schools and to be a voice for those who are often unheard or ignored. Additionally, we have worked on the issue of insuring that the resources housed in Montgomery County are made available to any student in the public school system who reports that a fellow student has victimized them. With this in mind we have remained vocal in letting the County Council and Montgomery County Public Schools (MCPS) know how important reporting and referral is to our Board and to the well-being of students as reporting mechanisms are improved.

We will continue to make sure that these improvements remain and continue, but as we enter the New Year we do it with many goals on our minds. Chief among these is to make sure that the offices within our county and our county's government maintains their resources to serve the community. It is our belief that the positions that are currently in place should be protected even in these tough economic times because we know that in these times there will continue to be victims who need victim services in this county. Additionally, we will be working to assess each area where victims are helped, so that by this time next year we will be able to give an even more accurate assessment of how those who give and receive services in this county view the resources. We are a committed board that can ably give advice on how our peers in this community be served.

I thank you for this opportunity to share our report and our advice that we hope will impact our community positively.

Sincerely,

Samantha Y. Davis, Chair
Victim Services Advisory Board

MEETINGS AND MEMBERSHIP

MEETINGS

The Board meets the fourth Thursday of each month, from 7:00 to 9:00 p.m., at the Office of the Montgomery County Department of Health and Human Services, 1301 Piccard Drive, Fourth Floor Conference Room, Rockville, Maryland 20850. The Board does not meet in August and combines its November and December sessions into one meeting. All meetings are open to the public.

MEMBERSHIP

Tazeen Ahmad	Linda Anderson
Saundra Barnhard	Kim Barry
Toni Zollicoffer-Brown	Samantha Davis
Kareem Davis	Rachel Goldfarb
Marille Herrmann	Virginia Baran Lyons
Parker OShea	Mathew Quinn
Rabbi David Rose (Clergy)	William C. Smith Jr.
George Sims	Beverly Stern
Naureen Weissman	JudithWhiton

EX-OFFICIO MEMBERSHIP

Ellen Alexander, Montgomery County Police Department (MCPD)
George Simms, State's Attorney's Office (SAO)
Nadja Cabello, Victim Assistance and Sexual Assault Program (VASAP)
Dudley Warner (DHHS)
Eugene Morris (DHHS)

FORMER MEMBERS 2009

Arleen Anderson
Pascale Leone
Lester Stano (Clergy)
Debbie Kempl
Norman Workman
Ethel Burnett

MAJOR ISSUES

Maryland's Diminution of Credit Program

Maryland's Diminution of Credit program allows for all state inmates to significantly reduce time they serve of their sentence in exchange for positive behavior. Under the program any inmate, including violent offenders can earn up to 20 days off for every 30 days served. Members of the Board expressed concern in the leniency of this program and felt that it allows inmates to shave off too much of their initial sentence. The Board supports the Police Department recommendation to install a truth in sentencing program for violent offenders, which would require violent criminals to serve 85% of a sentence before they are eligible for a parole hearing. The Board would focus on bringing community awareness to the dangers posed by diminution of credits to the populace. Board Vice-Chair, William Smith, wrote several op-ed articles to local newspapers on this topic to increase public awareness of the issue.

Delay in Processing Claims with CICB

The issue of delayed processing and inconsistencies in claims approval and denials with the State's Criminal Injuries Compensation Board (CICB) continues to be of concern for the Victim Assistance and Sexual Assault Program. Ellen Alexander and Nadja Cabello reported on the lack of response from the CICB to VSAB's letter regarding CICB's poor customer service for Montgomery County victims of crime, particularly those victims with questionable immigration status. There is additional concern that the new requirements for documentation of legal residency will prevent Montgomery County victims of crime from receiving compensation from the State CICB. Furthermore, the lack of Spanish speaking investigators at the CICB provides another disadvantage to many victims. The Board will continue to monitor these issues until there is progress and resolution.

Outreach to Crime Victims in Public Schools

The Victim Services Advisory Board continues its commitment in ensuring that students in Montgomery County Public Schools that are victims of crime and are in need of specialized crime victim counseling receive it in a timely fashion. Though a database was formulated to track the number of crime events that occur in schools, there is no codified method of referral or a way to track referrals to crime victim services. Children who are victimized and go unnoticed or untreated for the emotional issues associated with victimization can have major issues during their adulthood.

Board Chair, Samantha Davis, gave testimony on victim services before the DHHS Subcommittee. A prime subject was outreach to youth victims of bullying and a request that MCPS develop a protocol for dealing with victims and ensuring their referral to County services such as Victim Assistance and Sexual Assault Program and Abused Persons Program (APP). Board members feel that MCPS database on violent incidents be made available to the public and to County services.

Board reviewed and made recommendations on the MCPS policy on Bullying, Harassment, or Intimidation which is currently being considered by the Board of Education.

Fundraising

Throughout the year the Board explored various venues by which funds could be raised for the Crime Victims' Compensation Fund. Tazeen Ahmad was able to secure two donations that totaled \$5000 for the fund. The Ahmadiyya Muslim Community, whose National Headquarters are in Silver Spring Maryland donated \$2500 to the fund and Humanity First, a non-profit based in Baltimore, Maryland also donated \$2500. It was noted that Montgomery County Government matches donations two to one for the County's Crime Victims' Compensation Fund therefore the fund received a total of \$15,000 to help crime victims in Montgomery County.

The Fundraising committee of the Board will continue to explore ways to raise additional funds for the Fund. The law that governs Montgomery County Government Crime Victims' Compensation Fund states that 10% of monies collected be spent to advertise and hold fundraising events.

BUDGET PRIORITIES FOR 2010

The mission of the Board is to support Montgomery County's commitment to serving victims of crime. In these difficult budgetary times, victim services should not be reduced because they are part of the County government's fundamental responsibilities.

Additionally, growth in the County population, particularly within the immigrant and non-English speaking community, has resulted in a greater need for these services. Providing these services will require additional funds, staff, and resources.

With that, the Board has outlined five areas as budgetary priorities for calendar year 2010:

1. Abused Persons Program

- Transitional housing (and/or increased shelter) for domestic violence victims, particularly undocumented immigrants
- Additional workers to reduce waitlist for offender counseling

2. Victim Assistance and Sexual Assault Program

- Spanish and French speaking case workers to serve waitlist for torture victims
- A courthouse-based victim advocate

3. Police

- County vehicle to transport victims

4. State's Attorney's Office

- Funds for lost wages, meals and transportation for victims testifying in court and parents of juvenile victims

5. Sheriff's Office

- Ensure that federal grant funding for prosecution/victim services continues to be funded

BUDGET PRIORITIES FOR 2011

Overview:

The Victim Services Advisory Board is continuing in its mission to support Montgomery County's commitment to serving victims of crime. Currently, we are continuing our focus on several areas including:

- Impact of Bullying in Public Schools and Outreach to Crime Victims in Public Schools
- Maryland's Diminution of Credit for State Inmates
- Delay in Processing Claims with CICB
- Adequate Staffing for Victim Services Providers
- Crime Victims' Compensation Fund

As we enter 2010, we are reflecting on the interviews that our members conducted with local victim services organizations, both public and non-profit. Our budget concerns reflect the needs articulated by the interviewees.

Budget Priorities:

During this unprecedented budget shortfall, we, as a Board, are aware that it is a time when more spending is a near impossibility. Our overwhelming recommendation is to first do no harm. We request that positions that assist our victims are not eliminated. There are positions in the police department, sheriff's department, APP and VASAP, that are vacant and we ask that they be filled and that positions that are frozen be exempt from the hiring freeze. During this time of economic crisis, the needs of the victims and the volume of victims have increased, so these resources are needed to maintain the same level of service.

Through our interviews, victim services providers did identify needs that need to be met once the budget crisis is over and we feel that we would be remiss not to mention them. They are as follows:

- Abused Persons Program
 - Transitional housing (and/or increased shelter) for domestic violence, human-trafficking victims, particularly undocumented immigrants
- Victim Assistance and Sexual Assault Program
 - Spanish and French speaking victim assistant to serve waitlist for torture victims
 - A courthouse-based victim advocate – once the short term American Recovery and Reinvestment Act of 2009 (ARRA) grant expired
- Police
 - County vehicle to transport victims
- State's Attorney's Office
 - Funds for lost wages, meals, transportation for victims testifying in court and parents of juvenile victims

SUMMARY OF VSAB INTERVIEWS WITH VICTIM-SERVING PROGRAMS

Background

During the past year, VSAB members conducted interviews with representatives from eight victim services agencies and organizations in Montgomery County. The purpose of the interviews was to gain a clear, in-depth understanding of the range of services available to victims of violence, to identify strengths and areas of need within local programs, and to solicit suggestions for how the Victim Services Advisory Board could help local agencies and organizations sustain and scale-up their programs.

Scope of Interviews

The interview focused on the populations served by each program, types of services offered, programmatic strengths and areas of need, challenges, and ways VSAB can help programs advance their goals. Each interviewee was asked the following questions about his/her program:

- *What does your program do? Whom do you serve?*
- *What funds do you have at your disposal?*
- *How many people do you serve?*
- *What are your program's strengths? What is your program doing well?*
- *What is your program's greatest need?*
- *What do you think needs to change in terms of services or public policy?*
- *If you had a wish list what would be on it? If you had additional funding, what would you do with it?*
- *What are new opportunities or initiatives you are pursuing?*
- *What are challenges your program faces?*
- *How can the Board help you in its capacity as an advisory committee to the Montgomery County Council and Executive?*
- *What are your priorities for victims in the county?*

Strengths

Agencies and organizations serving victims of violence in our county are involved in remarkable and innovative efforts to combat domestic violence, sexual assault, bullying, stalking, child abuse, elder abuse, and other forms of violence. The eight programs explored through VSAB interviews collectively serve tens of thousands of people each year. Some key strengths identified both within programs and within the community include:

- Competent, experienced, and dedicated staff;
- Improved community awareness of abuse and violence;
- County emphasis on systems change, or addressing the "bigger picture" of violence in our community;
- Integration of services at the Family Justice Center;
- Coordination between the county police, the State's Attorney's Office, VASAP, and other agencies;

- Breadth of services, e.g., counseling for family members of suicide victims and tutoring for survivors of domestic violence;
- Effective fundraising strategies;
- Responsiveness to victims
- Professionalism among staff members

Needs and Challenges

The majority of the programs are struggling to meet the needs of a higher volume and increasingly diverse population of victims. Furthermore, the increase of Internet crimes has presented new challenges for law enforcement, victim service providers, and prosecutors. Better community awareness of local resources is to be celebrated, but it has also presented a challenge for programs because they must serve a larger number of victims with funding sources that can be flat, declining, or unstable. Interviewees identified the following major program needs:

- Additional personnel and volunteers, such as trilingual therapists (including those fluent in American Sign Language), more prosecutors, staff to fill evening and weekend hours, forensic medical care providers, volunteer advocates, and others;
- Additional and stable funding sources, particularly to address losses due to the economic crisis;
- Better collaboration and coordination across programs serving victims of domestic violence
- Enhanced community outreach and awareness.

Table 1: Areas of Need in Local Victim Services Organizations

Agency / Organization	RESOURCES			ADVOCACY AND SUPPORT		
	Materials and Supplies	Funding / Fundraising	Additional and Specialized Personnel	Policy	Community Outreach	Advocacy to County and State Gov't
Domestic Violence Unit / Montgomery County Sheriff's Office			X		X	
Betty Ann Krahnke Center Shelter	X	X			X	X
Victim Assistance and Sexual Assault Program	X	X	X	X		X
Victims' Rights Foundation		X			X	
Interfaith Coalition Against Domestic Violence		X				X
State's Attorney's Office		X	X		X	
MCPD Victim Assistance Unit	X		X		X	X
Abused Persons Program		X			X	

How VSAB Can Help

Interviewees described the various ways that VSAB can support them, principally through advising the County Council and Executive. Specific suggestions include:

- Support requests for additional funding, for everything from reimbursement for expenses incurred to program expansion;

- Promote—in the community and to county government—program expansion and long-range goals, such as more outreach in schools, a Guiding Light program in local places of worship, more aggressive investigations of elder abuse, and others;
- Emphasize the need for resources to meet agencies' mandates—programs need funding to do what they are required by law to do; and
- Advocate for more coordinated and effective policies, such as more stringent consequences for offenders and policies that support a victim-friendly environment. It was noted that some regulations create complications for families being served by the new Family Justice Center.

Acknowledgments

VSAB is grateful to the representatives of these organizations for offering their time in participating in interviews. Interviewees' ideas and input are valuable to VSAB as the Board identifies its priorities for 2010 and beyond.

- Hannah Sassoon - Domestic Violence Unit / Montgomery County Sheriff's Office
- Felicia I. Kolodner, Clinical Director; and Kareem Davis - Betty Ann Krahnke Center Shelter
- Nadja Cabello, Director - Victim Assistance and Sexual Assault Program
- Victims' Rights Foundation
- Interfaith Coalition Against Domestic Violence
- George Simms - State's Attorney's Office
- Ellen Alexander - MCPD Victim Assistance Unit
- Eugene Morris - Abused Persons Program

ATTENDANCE AT EXTERNAL MEETINGS & TRAININGS

February

County Executive meeting with Boards and Commissions

March

Meeting with HHS Director on FY 2010 County Budget Presentation

May

Board tour of the newly opened Family Justice Center

July

Council DHHS Committee Hearing with Boards and Commissions

DHHS Subcommittee Hearing on Victim Services in DHHS

October

Meeting of Criminal Justice Coordinating Commission (CJCC)

November

Meeting with HHS Director

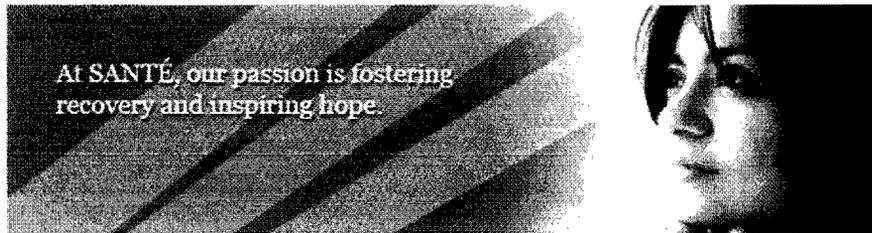
GUEST SPEAKERS

Throughout the year, various victim services experts made insightful educational presentations to the Board. Of special note, as it pertained to our outreach project was the presentation done by Capt. Patty Walker of Major Crimes Division, MCPD, reported on the need for Diminution Credit (DC) Reform. Currently DC allows for the deduction of confinement for good behavior; each credit means one day less confinement and 20 credits are currently allowed per month. The Police Department is concerned that it will lead to the early release of violent criminals and urged board to focus on community awareness of the dangers posed by diminution credits to the populace

Bethany Holliday, victim assistant from the Sheriff's Office reported on her position as a victim advocate and gave a brief overview of the new Family Justice Center, a one-stop shop for victims of domestic violence.

ADMINISTRATIVE SUPPORT

Nadja Cabello and Deborah Howard are the staff support for the Board.



SERVICES | CRISIS RESPONSE SERVICES | TREATMENT AND RECOVERY SERVICES

search the site

SEARCH

Senior Services

Montgomery County, Maryland

Phone number: 301-572-6585 ext. 2190

Hispanic Seniors Outreach program: 301-572-6585 ext. 2190

Services offered:

The following services and programs are free to homebound seniors, 60 years of age and older, who reside in Montgomery County, Maryland. Services are offered in English and Spanish.

- In-home Therapy with Homebound Seniors: Assessments, brief psychotherapy and practical support helps homebound individuals and families deal with issues like difficult behaviors, stress, depression, adjustment and chronic disease management.
- Hispanic Outreach Program: This program provides culturally sensitive, bi-lingual short-term therapy and gero-psychiatric care to homebound seniors in our community who speak Spanish.
- Gero-psychiatric Consultation: In-home consultations with an English or Spanish speaking psychiatrist can determine appropriate treatment interventions. These recommendations are shared with the primary care physician for ongoing care.
- Family Therapy: Families experiencing lifespan transitions, strong emotional response to the health of a senior or caregiver stress may benefit from psychotherapy services.
- Educational Seminars for Seniors: Classes on mental health and wellness issues for seniors. The primary goal of these seminars is mental illness prevention and early intervention for seniors.
- Professional Consultations & Educational Seminars: Free case consultation, staff training and collaborative activities are offered to aging service professionals and community organizations that provide services to seniors in Montgomery County.
- Drop-in Support Groups for Seniors: Community outreach and drop-in support groups are offered throughout Montgomery County. Drop-in groups offered at Senior Centers are designed to decrease social isolation, help seniors make friends and encourage learning about self-care and wellness.
- Mental Health Support for Caregivers: Professionals that understand the unique mental health needs of seniors and caregivers offer ongoing education and support services to caregivers in our community.

Population Served:

There are approximately 92,000 seniors living in Montgomery County. The following are indications that a senior might have problems that might be addressed by our programs:

- Unexplained decrease or increase in appetite
- Increased anger or irritability
- Rapid mood changes
- Unusual or disorganized behavior
- Makes statements about suicide or an "empty life"
- Isolating self from others
- Sleeping too much or too little
- Unusually quiet
- Tearful without apparent cause
- Highly suspicious of others and makes false accusations
- Refuses to leave home (despite being physically able to leave)
- Hearing voices or seeing things that others do not hear or see

If you are in immediate need of behavioral health services and live within the designated counties, please use these phone numbers.

MARYLAND

Anne Arundel County	410-768-5522
Baltimore County	410-931-2214
Eastern Shore	888-407-8018
Prince George's County	301-429-2185

NORTH CAROLINA

Mecklenburg County	704-566-3410(opt.1)
--------------------	---------------------

- Inability to maintain personal hygiene
- Excessive collection and retention of newspapers, trash, unopened sale items, clothing, paper, rotting food, animals (hoarding)

Program Staff:

Staff includes licensed mental health clinicians and psychiatrists trained in gero-psychiatric care and senior mental health.

Program eligibility:

- Montgomery County resident, aged 60 or older
- Individual is at risk for or has a suspected mental health concern and who is not currently receiving other mental health treatment
- Senior must be homebound: unable or unwilling to leave the home for treatment

To refer a senior for our services, please fill out our Referral Form by clicking here.

[HOME](#)

[ABOUT](#)

[SERVICES](#)

[LOCATIONS](#)

[NEWS & RESOURCES](#)

[CAREERS](#)

[CONTACT US](#)

Affiliated Santé Group © 2011 All Rights Reserved



Computer Learning and Resource Center, Inc.

12301 Old Columbia Pike
Suite 220
Silver Spring, MD 20904
Phone: 301-622-6007

Founded 1989
Fax: 301-622-6009
E-mail: clarc1@verizon.net
www.clarcinc.org

April 6, 2011

Dear President Valerie Ervin and County Council Members:

My name is Todd Haven, and I am here to represent Computer Learning and Resource Center, also known as CLARC. On behalf of the organization, including our students, staff and Board of Directors, some of whom are here today to show their support, I wish to thank you for this opportunity to speak.

The Computer Learning and Resource Center, (CLARC), founded in 1989, is a non-profit organization dedicated to helping people with a serious and persistent mental illness improve their lives and experience social and economic recovery.

An estimated one in four adults suffers from a diagnosable mental disorder in a given year. About 6% of the population or 1 in 17 people have a serious mental illness. Mental disorders are the leading cause of disability in the United States and occur in Montgomery County at about the same rate as nationwide.

Unless you know someone with a mental illness or had a family member with a mental illness, you may not realize, that without treatment and support, that these individuals have a lower life expectancy by 20 years, have a higher rate of suicide, make up about 25% of the homeless population, and have increased problems with police, their employers, and their families. Without support from CLARC and similar organizations, there is an increase in hospitalizations and more problems arise in the community.

Our organization seeks to solve these problems and help mental health consumers achieve positive outcomes that benefit our county, their families and themselves. This is achieved in the CLARC program when fully funded by the following:

Our wellness and recovery program is a full time operation. The center is open five days a week for 40 hours to the members. After the initial appointment, mental health consumers become members and use the facility as they wish. They socialize with others and enroll in classes. Acceptable manners of relating to others are reinforced and making commitments to achievable goals occur.

The wellness and recovery center is built around specialty workshops in card making, letter writing, online job search, making business cards and some recreational events. Membership meetings are held semi-annually to review the effectiveness of this program. Online access to the WRAP program is facilitated and employment workshops are scheduled. WRAP is a plan of system and recovery employing self-help tools and support systems to aid in recovery and wellness. Each year about 100 referrals to Manna are made, as well as other referrals to mental health professionals, C-4, Interfaith, HOC, and other day mental health programs. A bilingual

staff member provides referral assistance, natural support and computer assistance. Workshops on nutrition, general health, and dressing for success will be held.

Our advanced Wellness and Recovery Center/Drop-in Center consists of access to two computer labs containing 20 computers, a scanner and laser printers for resume creation, job search and personal use. The computer labs are outfitted with high speed internet, typing and vocabulary tutorials in Spanish and English, a full range of Microsoft Office programs, desktop publishing tutorials, basic programming, QuickBooks tutorials and math tutorials. Computer assessment packages similar to testing used by temporary staffing agencies are used for testing, independent study, and reinforcement. Individual progress booklets are kept on each member. Learning the internet has proved to be a lifeline for interaction with family and friends as well as a means to find employment. A computer/career library, job bank, a health/wellness library, student lounge and kitchen provide a supportive environment for peer support and help minimize marginalization and isolation in the community. Since our members have full-time access without an appointment, there is a welcoming support center available when there are trying times at home or at work. Our staff is supportive and helpful. Family members are appreciative that there is support outside of their home.

Last year approximately 2400 visits were conducted at the center and 139 Montgomery county residents were served. We serve a diverse immigrant community who are underserved by social service agencies in eastern Montgomery County. This fact has been noted many times in our local newspapers. Referrals are accepted from local hospitals, the Charles Gilchrest Center for Cultural Diversity, Montgomery Cares, the faith community, and from other mental health consumers. Our student population reflects the diversity of our county and nearly 100% fall within the "extremely low income" category as defined by Federal poverty guidelines. Our location is handicapped accessible and convenient to both Metro bus and Ride-on for county wide accessibility.

The second component of the CLARC program is the computer training program. When fully funded our center will be staffed with two full time employees and three part-time staff, one of whom is bilingual. The return of the instructor/employment specialist will provide job training, computer training, and administrative support to the wellness center. The instructor will train mental health consumers in beginning to advanced MS Office programs, desktop publishing programs, and run employment related workshops relevant to mental health consumers. Topics such as ADA law, work incentives, resume strategies, networking, and interviewing techniques for obtaining a job will be held.

CLARC has demonstrated employment outcomes which contribute to a diverse workforce and to the financial stability of mental health consumers. Last year two individuals obtained full-time positions and fourteen individuals maintained their part-time jobs. Forty-eight residents have maintained employment in the last 3 years. The outcomes of our program merit strong support.

Letter to President Ervin and the MCCC

April 6, 2011

Page 3

Our program has been invaluable in promoting recovery, self-sufficiency, enhanced self-esteem and vital living for residents of Montgomery County.

The CLARC Wellness and Recovery Center understands that those who have a mental illness have dreams and goals like everyone else. Mental health consumers should have the opportunity to go to work, to be self-sufficient and participate in the community at large. With your support, mental health consumers in Montgomery County will have this opportunity.

Thank you for your consideration. I look forward to your support.

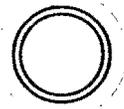
Sincerely,

Todd Haven
Board President

***Member of Non-Profit Montgomery, Safety Net Coalition, Mental Health Association, NAMI,
and the Montgomery County Coalition for the Homeless.***

(61)

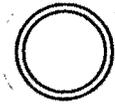
Computer Learning and Resource Center, Inc. (CLARC)



**A NON-PROFIT MENTAL HEALTH CENTER
LOCATED IN MONTGOMERY COUNTY, MD WITH
CONTINUING OPERATIONS FOR OVER 20 YEARS.**

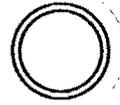
12301 Old Columbia Pike, #220
Silver Spring, MD 20904
Phone: 301-622-6007
Web: www.clarcinc.org
Contact: Diane McManigal, Exec. Dir.

Services Provided Under County Grant



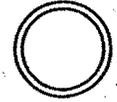
- Over 40 computer application courses taught annually including Word, Excel, Access, PowerPoint, Internet and more. Several levels are taught.
- 27 different computer and business courses including Business math and English are offered.
- Business English is particularly liked by people who aspire to enter the business world.
- Provide technical assistance and over 2,000 computer sessions per year.

Computer Job Training



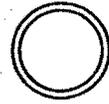
- Administer a sophisticated training and assessment program.
- Deliver a progression of computer training courses that is flexible and supportive to individuals who have had a history of learning failures or disability related issues.
- Created a reference study guide that is hands-on to learn necessary computer skills.

Employment Services



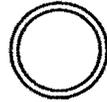
- The employment specialist has worked here 10 years. This has resulted in the development of:
- Extensive knowledge of Montgomery County employers.
- Knowledge to assist students with online job applications and job search.
- Knowledge of range or resumes for people with disabilities.

Employment Disability Resources for Students

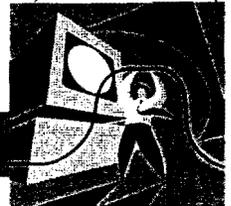


- Knowledgeable about ADA law.
- Demonstrates cultural competence and sensitivity to student's needs.
- Runs employment workshops and practices interviewing techniques.
- Knowledgeable about income supports and work incentives.

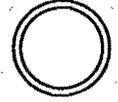
Benefits to Students



- Supportive and safe learning lab environment open 6 days a week.
- Classes with homework, tests, and attendance are appreciated by our students and provide for the obtainment of computer skills.
- A progression of computer classes are taught.
- ❖ Students with a disability are finding and keeping employment. Forty-eight of our students are maintaining jobs which they have held for at least 3 years. A database stores their records.
- We are the only learning center in Montgomery County specifically geared to those with a history of a psychiatric illness and we are flexible with meeting this need. Students feel at ease here.
- Technology keeps changing and students need this resource.
- After job placement technical and supportive assistance is given.
- In commitment to a diverse workforce in Montgomery County and the stated commitment by the County Executive, Mr. Isiah Leggett, to hire more people with psychiatric disabilities, Computer Learning and Resource Center is a helpful partner.

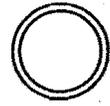


Benefits to Students



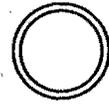
- Learning new skills.
- Use of internet for work and social connectivity.
- Development of self-confidence, self-esteem, independence and resiliency.
- Lessens depression and improves well-being.
- More involvement in our community.

Benefit to the Community



- Promotion of social and economic integration into the community.
- Creation of a population that is self-reliant, independent, empowered and satisfied with the quality of life in Montgomery County.
- Provides for a trained workforce.
- Demonstrable and confirmed employment outcomes.
- Increased computer literacy.
- Provides a safety net for a specific population.

History of our Budget



- We have been partially funded by Montgomery County government since 1992.
- We have been part of the DHHS base since that time and “annualized in 1999.”
- We have demonstrated the criteria of being in existence for a relatively long period of time.
- We have been integrated into the County’s service delivery system.
- We have provided an efficient use and productive use of resources.

*See Section G of County Budget.



Department of Health and Human Services

Programs

Victim Assistance and Sexual Assault Program (VASAP)

1301 Piccard Drive
Suite 4100
Rockville, Maryland 20850

Main phone: 240-777-1355
Crisis line: 240-777-HELP (4357)

TTY: 240-777-1347
FAX: 240-777-1329

Whom We Serve

All Montgomery County residents who are victims of crime or victims of crimes committed in Montgomery County and their families and significant others are eligible for services from VASAP.

VASAP serves victims of crimes such as rape, sexual assault, homicide (surviving family and friends), driving while intoxicated (DWI), and vehicular manslaughter victims, bullying, terrorism, torture, hate violence, robbery, carjacking, purse snatching, assault, battery, stalking, harassment, auto theft, burglary, arson, larceny, vandalism, and adult survivors of childhood sexual abuse.

Fees for ongoing counseling services are charged on a sliding scale, based on ability to pay. No one is denied services due to lack of funds.

All other victim assistance services are free. This includes court companions, criminal justice advocacy, assistance in applying for the Crime Victims' Compensation Fund, and other non-counseling services.

- Hours:
- Crisis: Telephone or Walk In, 24 hours a day, seven days a week.
 - Program Office: Monday - Friday, 8:30 a.m. to 5:00 p.m.
 - Counseling: By appointment. Evening hours are available Monday through Thursday.

- Home
- Services We Offer
- Whom We Serve
- How To Find Us
- About Our Staff
- Volunteering/Donating
- Advisory Board
- Public Education
- Publications
- Links



Department of Health and Human Services

Programs

Victim Assistance and Sexual Assault Program (VASAP)

1301 Piccard Drive
Suite 4100
Rockville, Maryland 20850

Main phone: 240-777-1355
Crisis line: 240-777-HELP (4357)

TTY: 240-777-1347
FAX: 240-777-1329

About Our Staff

All therapists have at least a Master's degree in human services. Additionally, they have years of experience and extensive training in rape trauma syndrome, post-traumatic stress, and crisis intervention. Therapists working with homicide survivors, that population that has lost a loved one to murder, are also experienced in specialized bereavement issues resulting from a crime. VASAP therapists are familiar with individual, couple, family, and group modalities and techniques. An unusual aspect of the therapeutic role is as a liaison with the local police department in helping clients who want assistance through the criminal justice system. VASAP therapists also work closely with the Montgomery County school system in providing assistance to school nurses and guidance counselors. They also provide educational presentations to both students and parent groups when requested on the areas of acquaintance rape and general crime.

Assistance with the criminal justice system is provided by Victim Assistants who have at least a Bachelor's degree. Victim Assistants are knowledgeable and experienced in the Criminal Justice System, and are very able and willing court companions. Resources beyond VASAP, for victim referrals to other helpful agencies for clients include referrals to support groups, legal resources, liaisons with the police and the State's Attorney's office, and links to compensation programs for clients.

All services are augmented by trained volunteers.

- Home
- Services We Offer
- Whom We Serve
- How To Find Us
- About Our Staff
- Volunteering/Donating
- Advisory Board
- Public Education
- Publications
- Links



Department of Health and Human Services

Programs

Victim Assistance and Sexual Assault Program (VASAP)

1301 Piccard Drive
Suite 4100
Rockville, Maryland 20850

Main phone: 240-777-1355
Crisis line: 240-777-HELP (4357)

TTY: 240-777-1347
FAX: 240-777-1329

Services We Offer

VASAP can help if you become a victim of crime, including rape or sexual assault. The following services are available to victims of crime, their family and significant others.

- 24-hour telephone and walk-in crisis counseling, information, and referral.
- 24-hour crisis outreach counseling services for victims of sexual assault at hospitals and police stations.
- Individual and group counseling, by appointment.
- Psychiatric evaluation, treatment, and consultation.
- Support groups for surviving family and friends of homicide and vehicular homicide victims.
- Assistance through the criminal justice system, including support and accompaniment during legal procedures and collaboration with the police, state's attorney's office, and other county agencies upon client request.
- Assistance in applying to the Maryland Criminal Injuries Compensation Board and coordination of the claim with the Board.
- Compensation for income-eligible victims from the Montgomery County Crime Victims' Compensation Fund.
- Anonymous third party reporting of rape and sexual offenses to the Montgomery County Police Department upon client request.
- Educational programs on victim rights, sexual assault/rape, crime prevention for professionals and community groups.

VASAP offers the following specialized groups. An assessment interview will be arranged to determine readiness for group. Coordination with current treatment providers is essential. Potential group members should call VASAP at 240-777-1355.

- *Adults Molested as Children Group*: Beginning groups meet for 10 weeks. After completing a beginning group, clients are eligible for the advanced group from the fall through the spring.
- *Adult Sexual Assault Support Group*: This group meets for eight-week sessions to provide a supportive, understanding, and trusting environment in which victims of sexual assault/attempted sexual assault will have an opportunity to examine and process the effects of the assault, both on themselves and others. Members must be over 18 years of age when the assault occurred.
- *Adult Homicide/DWI Survivors Group*: This group provides a safe environment for group members to begin to come to terms with the reality of their loss in the company of others who have experienced a similar loss. The goals of the group are to familiarize group members with the impact of violence on their grief experience, explain and normalize individual stress responses to traumatic loss, predict the course of the grief and help members understand and accept its variability, and to start the slow journey to recovery providing opportunity for

Home
Services We Offer
Whom We Serve
How To Find Us
About Our Staff
Volunteering/Donating
Advisory Board
Public Education
Publications
Links

individual follow-up and contact with individual therapeutic staff.

- *Adult Victims of Crime Stress Management Group*: This group is offered to all VASAP adult clients. There are a total of six sessions designed to teach five relaxation techniques: deep breathing, progressive muscle relaxation, guided imagery, affirmations and dance/movement.
- *Child and Adolescent Group*: This group is offered at select Montgomery County Public Schools as well as at VASAP, as needed.

The goals of the Victim Assistance and Sexual Assault Program are:

- To ensure that professional and volunteer services are made available to all victims.
- To encourage the establishment of formalized procedures and sensitive treatment of victims within the medical community and criminal justice system.
- To develop each citizen's awareness of the threat that sexual assault and general crime imply within our community.
- To increase the conviction rate of assailants and thereby decrease the number of sexual assaults and general crime by providing professional, volunteer, and advocacy services to victims.

[Alert](#) | [Awards](#) | [Privacy Policy](#) | [User Rights](#) | [Accessibility](#) | [Disclaimer](#) | [County Code](#) | [RSS](#) | [Blogs](#)
Copyright 2002- 2011 Montgomery County Government All Rights Reserved



Department of Health and Human Services

Programs

Victim Assistance and Sexual Assault Program (VASAP)

1301 Piccard Drive
Suite 4100
Rockville, Maryland 20850

Main phone: 240-777-1355
Crisis line: 240-777-HELP (4357)

TTY: 240-777-1347
FAX: 240-777-1329

How You Can Help

There are many ways that you can help. You can volunteer with us or you can donate printer cartridges, cell phones or monetarily.

BE A VOLUNTEER

As a VASAP volunteer you can:

- Conduct outreach to county hospitals and police stations for sexual assault/rape victims
Accompany and support victims during the court process
Use interpretive skills
Assist with community awareness and public relation projects
Help with administrative needs
Apply to become a member of the Victim Services Advisory Board

- Home
Services We Offer
Whom We Serve
How To Find Us
About Our Staff
Volunteering/Donating
Advisory Board
Public Education
Publications
Links

Outreach Volunteers provide 24-hour crisis counseling and companion services to victims of rape and sexual assault at Montgomery County hospitals and police stations. Volunteers must be at least 21 years old, be a Montgomery County resident and be able to make a one year commitment. They must also have access to private transportation and have a valid driver's license.

Court Companion Volunteers staff Montgomery County District courthouse offices, in Rockville and Silver Spring. Volunteers assist crime victims seeking peace and protective orders by helping them complete necessary paperwork and, if requested, accompany them in the court proceeding. Volunteers are asked to commit to providing one morning per week for a year; afternoon hours are also available.

VASAP provides training and bi-lingual volunteers are strongly encouraged to apply.

If you are interested in volunteering with VASAP, please fill out our application form and submit it to us. We will then contact you for a follow-up interview.

DONATE

There are two separate funds that accept donations that will help victims of crime. The first fund is called the Crime Victims' Compensation Fund Account. This fund is matched 2 to 1 by the county. For example, if you donate \$25, the county will match this amount by \$50 and the fund will receive a total donation of \$75. The fund assists income eligible victims of crime with crime related losses such as medical and funeral expenses, wage losses and property replacement.

The second fund is called the Victim Assistance and Sexual Assault Program Trustee Account. This fund can be used to buy clothes for needy victims of crime, replace clothes that are retained as part of

75

evidence collection for sexual assault victims, provide transportation to victims in need as well as help support the VASAP volunteer component and other program needs.

To donate to either fund, please specify which fund you would like to donate to and send a check or money order to:

**The Victim Assistance and Sexual Assault Program
1301 Piccard Drive, Suite 4100
Rockville, Maryland 20850**

Recycle your cell phones!

VASAP is also collecting used cell phones. This is also environmentally friendly. Your generous efforts will result in a donation to VASAP of up to \$110 per cell phone. The cell phones you donate will be either re-marketed, recycled, or re-programmed to be used as 911 cell phones for emergency use to law enforcement and other emergency agencies to benefit victims and the disadvantaged. Please contact VASAP via [email](#) or call us at 240-777-1355 for more information.

You can also donate unused toiletries to VASAP in order for us to add that extra touch in helping crime victims.

Your donations may be tax deductible. Please consult your tax adviser.

[Alert](#) | [Awards](#) | [Privacy Policy](#) | [User Rights](#) | [Accessibility](#) | [Disclaimer](#) | [County Code](#) | [RSS](#) | [Blogs](#)
Copyright 2002- 2011 Montgomery County Government All Rights Reserved

476

APP

Definitions:

Equality and respect in relationships are the keystone of strong families and communities. Family violence damages individuals, families, and communities. Partner abuse is the form of family violence which is the use of, or threat of, force by one person to maintain power and control over a spouse or partner.

Our Mission:

The Abused Persons Program provides services and advocacy that

- enhance safety for victims and children,
- promote changes in attitude and behavior by perpetrators of domestic violence,
- increase the community's resolve to not tolerate intimate violence, and
- build a coordinated community response to domestic violence.

About Us

The Abused Persons Program serves victims of domestic violence (spouse or partner abuse) in Montgomery County by providing:

- Someone to talk to: 24 hour Crisis Line and individual and group counseling to provide support and information to individuals who have been abused by their intimate partners. The program also offers counseling or referrals to appropriate community partners for couples recovering from abuse.
- Advocacy: information about and assistance in seeking legal protections available to victims and their children
- Shelter: emergency shelter for victims fleeing abuse until they can return home or move to safety.
- Counseling for children exposed to domestic violence:
- Counseling for those who are abusive: assessment and counseling for those who have been abusive to their mates.
- Community Education: the Program provides speakers to community groups and participates in events to build community awareness of the problem of domestic violence, services available and what we all can do to end abuse.

Whom do we serve?: Any Montgomery County resident who is a victim of partner abuse in any kind of intimate relationship or who has committed partner abuse and would like help to stop being abusive.

Our commitment to diversity: Services are offered without regard to language, gender, sexual orientation, culture or religion.

Fees: There are no fees for emergency services and all fees are on an ability-to-pay basis. No one is denied services due to lack of funds.

☎ 240-777-4195 - weekdays

☎ 240-777-4673 - 24 hours

1301 Piccard Drive (corner of W. Gude Drive and Piccard Drive)
Rockville MD 20850

Email: APP@montgomerycountymd.gov

77



Frequently Asked Questions

Do I need an appointment?

No. You can walk in for services.

Where can I park?

There is free garage parking on the Jefferson Street side, as well as street parking. The Center is also within walking distance from Rockville Metro Station.

Can I bring my children with me?

Yes. We have a specially designed play room and kitchen facilities for children.

May I bring a friend for support?

Yes. However, when you speak to one of the professional staff, your friend may be asked to wait in the reception area.

Will it cost me anything for legal services?

No. There are no fees for any services at the Montgomery County Family Justice Center.

Can I get Protective Order Services at the Family Justice Center?

Yes. Staff can assist you with filing your petition for protection.

Can I return for additional services?

Yes. We encourage you to take advantage of all appropriate services.



Community Partners

- Montgomery County Sheriff's Office
- Montgomery County State's Attorney's Office
- Montgomery County Department of Health and Human Services
 - Abused Persons Program
 - Child Welfare Services
 - Emergency Services
- Montgomery County Department of Police
- Montgomery County Department of Correction and Rehabilitation
- Montgomery County Office of Community Partnerships
- House of Ruth, Maryland
- Catholic Charities of the Archdiocese of Washington, Inc. Immigration Legal Services
- STTAR Center – Counseling
- Maryland Department of Child Support Enforcement
- Safe Start Services for children exposed to domestic violence
- Interfaith Community Against Domestic Violence
- Child Assessment Center – Treehouse (off-site)
- Montgomery County Family Justice Center Foundation, Inc. – Non - Profit and Supporting Partner www.mcfjcfoundation.org



A community partnership providing help for hurting families



Montgomery County
FAMILY JUSTICE CENTER
600 Jefferson Street
Rockville, Maryland 20852
240-773-0444
www.montgomerycountymd.gov/FJC

Crisis Line 24 Hour Assistance
240-777-4000



About Us

The Montgomery County Family Justice Center is a comprehensive one stop shop for victims of family violence and their children. The center co-locates multiple agencies to provide coordinated advocacy, law enforcement, civil legal services and social services for wrap-around support for families. Your safety is our first priority. Our goal is to help you in a specially designed facility where you and your children can feel safe and comfortable.

Who Is Eligible?

Anyone who is experiencing or has experienced domestic violence is eligible to receive services. Children are welcome to use the child friendly environment while their parent is receiving services.

Available Services

- Safety Planning – staff at the Center will work with you on an individualized, comprehensive safety plan.
- Legal Advocacy – advocates can assist you in filing for a protective order or with criminal charges.
- Legal Representation for Civil Protective Orders – the House of Ruth has a staff of civil attorneys to represent you at a Protective Order hearing at no charge.

- Counseling for you and your children – you can meet with a counselor and make arrangements for further individual or group counseling services.
- Criminal Investigation – you can meet with a detective or prosecutor about possible criminal charges or to discuss a pending case.
- Immigration Consultation under Federal Violence Against Women Act (VAWA) – an attorney can meet with you in a confidential setting to explain the VAWA provisions to protect battered immigrants.
- Emergency Protective Orders – an advocate can assist you with filing your petition for protection.
- Shelter Placement – staff can assist you and your children in accessing a confidential shelter as part of your safety plan.
- Referral To Safe Havens for pets – if your pet needs shelter, you can receive information on how the Humane Society can help.
- Snacks and play room for your children to relax.
- Child Assessment Center (off site) – you can be referred to the Treehouse Child Assessment Center for services for your children if they have been hurt or witnessed domestic violence.
- Chaplaincy program - Chaplains will be available for spiritual support and guidance.



Fees

There are no fees for services at the Family Justice Center.



Location



The Family Justice Center is located at 600 Jefferson Street, Suite 500, Rockville, Maryland (on Route 355, the intersection of Rockville Pike and Jefferson Street). The Family Justice Center is accessible by public transportation, the Rockville Metro Station, and is near the Rockville District and Circuit courts.

Hours

The Family Justice Center is open Monday – Friday 8:30 a.m. – 5:00 p.m.

240-773-0444



COUNTY MARYLAND

Family Justice Center

ESCAPE is 744003

Frequently Asked Questions

Who is eligible?

Anyone who is experiencing or has experienced domestic violence is eligible to receive services. Children are welcome to use the child-friendly environment while their parent is receiving services.

Do I need an appointment?

No. You can walk in between 9 am - 5 pm, M-F, except the County holidays.

Where can I park?

There is a free parking garage in the building on the Jefferson Street side and there is a street parking.

Can I bring my children with me?

Yes. We have a specially designed playroom for children.

May I bring a friend for support?

Yes. However when you speak to one of the professional staff, your friend may be asked to wait in one of the waiting areas.

Will it cost me anything for legal services?

No. There are no fees for services at the Montgomery County FJC.

Can I get a Protective Order at the FJC?

Yes. A staff member will also be happy to assist you in filling out the paperwork and answer any questions you may have.

Can I return for additional services?

Yes. The FJC is a one-stop-shop, but you can return as often as you need to access additional services.

**2010 Yearly Statistics for Montgomery County
Department of Police's Victim Assistance Unit**

Number of Victims Served – 8,993

Crime Classification	# of Victims Contacted	Method of Contact
0100 (Homicide)	24	Phone or in person
0200 (Rape - child)	18	Phone or in person
0200 (Rape - adult)	20	Phone or in person
0300 (Robbery)	822	Phone or in person
0400 (Aggravated Assault)	436	Phone or in person
0500 (Burglary)	1,114	Phone or letter
0600 (Larceny)	1,328	Phone or letter
0800 (Assault)	1,799	Phone or in person
1400 (Vandalism)	1,059	Phone or letter
Other Offenses Includes less occurring offenses such as auto theft, ID theft, purse snatching, harassment and stalking, Violation of Protection Orders, police information, DUI, threatening phone calls, etc.	2,373	Phone, in person, letter
Totals	8993	

Total Number of Cases Domestic Partner Violence Related – 1,063

General Referrals for Emergency Financial, Emotional, Legal, Housing, Prescription or Utility Assistance

(Please note that referrals numbers capture total referrals made to any one agency - not if the referral was necessarily taken by victim or appropriate family member. Referrals are made either in person, by phone or by including information on a referral agency in a packet of information sent to the victim)

- Abused Persons Program – 1,153
- Adult Protective Services - 86
- Commission for Women - 360
- Crisis Center – 1,193
- Family Crimes Division - 66
- Human Rights Commission - 3
- Montgomery County Mediation Center – 399
- Immigration Services - 58

Food Bank(s) - 177
Pro Bono Counseling Services - 91
Sheriff's Dept (Alert Team) – 71
Family Justice Center - 57
State's Attorney's Office Victim Assistance Unit - 80
VASAP (Counseling) – 4,183
Other: (to include governmental, community or faith-based organizations for social service benefits and assistance) - 953

Total Program Referrals: 8,930

Total Crime Victim Compensation Referrals: 648

Criminal Injuries Compensation Board (administered through the State) – 253
Montgomery County's Compensation Fund (administered through VASAP) - 395

Total Court Accompaniment to aid at trial, applying for protective/peace orders, etc.: 382

(Please note that court accompaniment is not a primary duty of the Unit as other programs handle the majority of court accompaniment. These numbers reflect either requests from other agencies to assist or accompanying victims who refuse referrals to other programs for this assistance.)

Job Loss Impact - Victim Assistance Unit

Unit Overview:

Primary Mission: To assist victims in the immediate aftermath of criminal victimization by assessing the primary victim and/or secondary victims/witnesses for short- and long-term emotional, financial and personal safety needs and then connecting the victim and or secondary victims/witnesses with appropriate local, state or federal programs and services to meet identified needs.

Secondary Mission: To assist community residents who need support and referral services for cases involving sudden death, traffic and pedestrian fatalities; and suicides.

Unit Structure: Six, full-time Client Assistance Specialist (CAS) and one Program Manager II. There is a seventh position allotted to the Unit but that position has been assigned elsewhere in the Department. The Unit is decentralized and a CAS is assigned to each district station. Additionally, CASs work cases from Gaithersburg City and Chevy Chase where there are no dedicated victim assistance positions. The Unit assists Rockville City Police when their victim assistance staff is off duty.

The Unit is the only program in Montgomery County that provides on-scene and out-of-office response. Unit members are available to respond to crime scenes, victims' homes, hospitals, accompany victims to court and the commissioner's office and other service locations if requested by the responding officer or is in the best interest of the victim if they are to receive timely, emergency services. In addition, the Unit is the **only** program that also provides services and outreach to family members of sudden death, pedestrian fatalities, suicide and some fatal automobile accidents.

Population Served: All crime victims and/or witnesses, family members and others impacted by the crime.

Caseload Statistics: Since its creation (FY02 –FY11), the Unit has provided supportive services to victims in nearly 100,000 cases (a case may have one victim or multiple victims and/or family members (secondary victims) seeking information, referrals and supportive services.

Impact of Staffing Cuts:

Based on a projected cut of three Client Assistant Specialists positions within the Victim Assistance Unit, the following impact will be realized by victims and the Department:

- The loss of one of two Spanish-speaking staff. With the county's large Spanish-speaking, immigrant population, one staff member is not sufficient to meet the need of all Spanish-speaking clients, thereby resulting in some victims not receiving timely, emergency services. Additionally, the remaining Spanish-speaking staff member will most likely not have time to handle both an English- and Spanish-speaking caseload if she alone is responsible for translation services to the Unit's high number of Spanish-speaking clients, especially those of domestic violence; therefore, her English-speaking caseload would have to be re-assigned among the two remaining CASs.
- The loss of our only sign language interpreter, who does assist throughout the Department, deaf residents who need assistance.
- The loss of two positions held by licensed clinical therapists, who while not assigned a specific duty to provide victim counseling, are called on to respond to crime scenes or other settings when crisis intervention is required.
-
- The inability to respond to sudden death, traffic and pedestrian fatalities, and suicides and the Unit is the *ONLY* program in the County to offer services to county residents of these types of cases.
- The combined yearly loss of 6,240 work hours will translate into significantly less comprehensive services for victims of violence and most probably no services or referrals to victims of property and other non-violent crimes, e.g., identity theft, as preference will be given to victims of violence or to victims who had a personal encounter with their assailant.

For example, in 2010 CASs responded to 3,119 crimes involving some measure of violence (1,063 of these were domestic violence related). With the proposed staffing level for FY12, these victims would be allotted a total of **2 hours** of service per case. These 2 hours of TOTAL allotted time might include: responding out to a victims' location if needed; accompanying a victim to the commissioner's office or court to get protective orders; talking with landlords, creditors or employers; helping victims complete, file and follow up with criminal injury compensation claims to address lost wages or medical bills related to the crime; referring and following up with referrals for counseling, social services; working with detectives for follow up to victims' questions; property return; and a variety of other needs. The impact of a reduction in workforce will be that victims who do require this level of service won't be allotted enough time for many of their needs. It will also mean other victims, such as a victim of burglary or of other serious Part I property crime might not get any services or at best a packet of crime prevention information mailed to them. Lesser property crime victims would get no service at all – impacting the Department with potential compliance issues to mandated victim rights services or by requiring responding officers more of the responsibility to ensure that victims received information and services outlined by law so the Department remains in compliance to these laws. **If using annual figures for 2010 –**

5,874 cases would receive minimal at best but most likely no outreach at all.

- The inability to staff all six district stations creating a delay of critical, emergency victim-related services to victims whose cases will fall in either of the two stations that will not have an assigned a CAS. The reduction in staffing levels will leave only three advocates to staff six stations.
- Severely curtailed opportunities to work out in the community or to identify new community service partners to partner with to continue to find new, appropriate referrals and benefits to crime victims because of high caseloads will take all of the Unit's time.
- With decreased staff, there will be no way to shift caseloads for coverage, as is done now, in the event of illness or annual leave to shift caseloads temporally to one the remaining three CASs. This will impact the time and the level of services that victims in those uncovered stations receive, if at all during someone's absence.

Benefits to Department:

Statutory Victims Rights at Law Enforcement Level

In addition to helping Montgomery County residents rebound as much as possible after a criminal victimization, the Victim Assistance Unit, with its emergency assessment of emotional, financial and safety planning plays a key role in the Department's compliance to several statutory requirements to crime victims. Article 47 of the Maryland Declaration of Rights grants certain rights to all crime victims, including property crimes. Those rights with specific assigned law enforcement responsibility require that victims:

- Be treated with dignity, respect, courtesy and sensitivity.
- Receive emergency help as needed.
- Be advised of law enforcement services available to protect victims and witnesses from harm.
- Be informed of any available financial assistance of social services.
- Receive help with expenses occurring as a result of the crime.
- Be assisted with prompt property return.

Additionally, Maryland law requires that all law enforcement officers, at first contact with all victims, provide the victim with a copy of the State's brochure entitled "Crime Victims and Witnesses: Your Rights and Services." It is Unit staff that ensures that the Department is in compliance with all mandatory victim-related rights and services. If the Unit did not perform these tasks for the Department, the responsibility would fall directly to the front-line officers. The State takes these victim rights' mandates so seriously that it has created a Compliance Coordinators position and a compliance hot-line in the Governor's Office of Crime Control & Prevention. Because of the direct efforts of the

Unit, the Department is the highest rated law enforcement agency in compliance in the state in regards to mandated victims' rights. There has only been one complaint made to the Compliance Coordinator by a victim who said he did received the mandated pamphlet from the responding officer; however, because each CAS also provides the victim with a mandated pamphlet, the complaint was deemed to be unfounded. However, should the Department fail to meet compliance, the following actions can occur:

- The Governor's Compliance Supervisor can conduct a Compliance Investigation to determine if there has been a violation and/or mistreatment of a victim.
- Present potential compliance violations to the Victims' Rights Compliance Review Committee and/or the Maryland State Board of Victim Services.

Perhaps more important, a poor compliance record may be considered and impact future state grant awards.