



Frequently Asked Questions about the Future of the DC Community Services Agency (DC CSA)

The Department of Mental Health (DMH) has submitted a report to the Council of the District of Columbia (Council) that details DMH's recommendation for the future governance and operation of the DC CSA. Below are responses to a number of questions that we hope clarifies the report and the implications for consumers and employees of DC CSA. As additional questions arise, responses to them will be added circulated and placed on DMH's website at www.dmh.dc.gov.

1. Why did DMH submit a report about the governance and operations of the DC CSA to the Council?

When the Department of Mental Health was established in 2001, the Council and the Dixon Court Ordered Plan required the government to provide mental health services directly through the DC CSA because the resources were not available in the community. However, there also was a recommendation that an evaluation take place after three years to determine if the government still needed to provide the services or if they could be provided by community based private providers.

After seven years without such an evaluation, the Council in June passed legislation that required DMH to submit a report by October 1, 2008. [Fiscal Year 2009 Budget Support Act of 2008", DC Law 17-0219]. Plus, the Dixon Court Monitor has urged DMH to conduct an evaluation of the DC CSA in his most recent reports to the Court.

DMH contracted with KPMG, LLP, a public accounting and advisory firm, to assist with preparing the report. As part of its assessment, KPMG conducted focus groups over the past six months with consumers, employees, the advisory board of the DC CSA, representatives of labor unions, and private providers. In addition to the focus groups, KPMG reviewed whether there was a difference between consumers served by the DC CSA and private providers, access to care issues and cost factors. The full analysis is contained within the KPMG report that is included in the report to the Council.

2. What does the report say?

The report determined that it is no longer necessary for the government to provide mental health services directly through the DC CSA that can be provided by community providers. Further, significant savings can be achieved if these services are not provided by the government, and the

savings provide an opportunity to redesign the public mental health system and increase the number of people eligible to be served.

Specific recommendations are that DMH:

- Discontinue direct provision of any services currently provided by the DC CSA that can be provided through the private provider network.
- Continue the operation of several unique services currently offered by the DC CSA. Those services are the pharmacy, the outpatient competency restoration program, the residency outpatient clinic, and multicultural issues.
- Expand the private provider network of assertive community treatment (ACT) programs.

3. Is this change due to the performance of the employees of the DC CSA?

The report is no reflection on the many skilled and dedicated staff who work at the DC CSA. The redesign is to create opportunities for a more robust public mental health system.

4. What happens next?

The report recommendations clearly will affect services to consumers and the future employment of DC CSA employees. Over the next three months, DMH is developing an implementation plan that includes timelines for closing enrollment in the DC CSA and transitioning consumers. The implementation plan, which will include participation by DC CSA employees and labor unions, must be submitted to the Council by December 31, 2008.

However, to make information available as quickly as possible, DMH has committed to set dates for certain activities by October 31:

- Date to close enrollment of new consumers in the DC CSA
- Date to freeze any new hires for the DC CSA
- Date to transition consumers to a new CSA
- Date when the DC CSA will stop delivering direct services

We are open to other ideas that require immediate attention. The Budget Support Act requires completion of the work described in the Implementation Plan by September 30, 2009.

5. Will DC CSA consumers continue to get services?

Yes, they will continue to receive the services as they do now. DMH is committed to ensuring that DC CSA is adequately staffed. The implementation plan will include various strategies for the consumer transition, including consumer fairs, face to face contacts and assertive outreach. This planning will actively involve current DC CSA staff who best know the individuals using the various services of the DC CSA. Our focus is to ensure that consumers are involved in the transition and have an opportunity to choose a new service provider.

6. What options are available to DC CSA employees?

All rights associated with a Reduction-in-Force as outlined in the District's personnel regulations, including payment of severance and accrued leave, will apply. An employee who meets the eligibility criteria can retire. In addition, an early out retirement plan is in effect through December 31, 2008. The Office of Human Resources will be actively involved to ensure that each employee is aware of all available options.

The Office of Human Resources will help employees by arranging job counseling, job readiness workshops and job fairs. DMH will be working with the private providers to encourage them to hire separated DC CSA employees.

7. How will the community be involved in developing the Implementation Plan?

From October 1 through December 31, DMH will meet with DC CSA employees, consumers, the Partnership Council, and others to develop an implementation plan that minimizes interruption of services, respects and affirms the rights of DC CSA employees, and contributes to a stronger public mental health system.

8. Where do I send additional questions?

All questions should be directed to Cathy Anderson at the Mental Health Authority who will be leading the transition office. She can be reached at (202) 673.7513 and Catherine.anderson@dc.gov.