

Department of Behavioral Health

www.dbh.dc.gov
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Table RM0-1

Description	FY 2017	FY 2018	FY 2019	FY 2020	% Change
	Actual	Actual	Approved	Proposed	from FY 2019
OPERATING BUDGET	\$269,060,757	\$276,425,561	\$283,401,254	\$319,075,165	12.6
FTEs	1,392.5	1,424.8	1,408.8	1,405.9	-0.2

The mission of the Department of Behavioral Health (DBH) is to support prevention, treatment, resiliency, and recovery for District residents with mental health and substance use disorders through the delivery of high-quality, integrated services.

Summary of Services

The DBH will: (1) ensure that every individual seeking services is assessed for both mental health and substance use disorder needs, (2) increase the capacity of the provider network to treat co-occurring disorders, (3) establish and measure outcomes for individuals with co-occurring mental health and substance use disorders as well as single illnesses with recovery as the goal, and (4) enhance provider monitoring to ensure high quality service.

The agency's FY 2020 proposed budget is presented in the following tables:

FY 2020 Proposed Gross Funds Operating Budget and FTEs, by Revenue Type

Table RM0-2 contains the proposed FY 2020 budget by revenue type compared to the FY 2019 approved budget. It also provides FY 2017 and FY 2018 actual data.

Table RM0-2

(dollars in thousands)

	Dollars in Thousands							Full-Time Equivalents					
	Actual FY 2017	Actual FY 2018	Approved FY 2019	Proposed FY 2020	Change from FY 2019	% Change*	Actual FY 2017	Actual FY 2018	Approved FY 2019	Proposed FY 2020	Change from FY 2019	% Change	
Appropriated Fund													
GENERAL FUND													
Local Funds	231,904	236,814	249,752	263,117	13,366	5.4	1,143.0	1,161.8	1,225.1	1,222.1	-3.0	-0.2	
Dedicated Taxes	0	0	0	200	200	N/A	0.0	0.0	0.0	0.0	0.0	N/A	
Special Purpose Revenue Funds	2,862	2,910	2,352	2,352	0	0.0	32.0	36.8	15.2	15.2	0.0	0.0	
TOTAL FOR GENERAL FUND	234,766	239,723	252,103	265,669	13,566	5.4	1,175.0	1,198.6	1,240.3	1,237.3	-3.0	-0.2	

Table RM0-2

(dollars in thousands)

Appropriated Fund	Dollars in Thousands						Full-Time Equivalents					
	Actual FY 2017	Actual FY 2018	Approved FY 2019	Proposed FY 2020	Change from FY 2019	% Change*	Actual FY 2017	Actual FY 2018	Approved FY 2019	Proposed FY 2020	Change from FY 2019	% Change
FEDERAL RESOURCES												
Federal Grant Funds	18,512	22,033	14,831	35,758	20,927	141.1	113.9	113.0	94.8	90.8	-3.9	-4.1
Federal Medicaid Payments	1,773	1,137	2,024	2,844	820	40.5	6.0	5.0	5.0	5.0	0.0	0.0
TOTAL FOR FEDERAL RESOURCES	20,284	23,170	16,854	38,601	21,747	129.0	119.9	118.0	99.8	95.8	-3.9	-3.9
PRIVATE FUNDS												
Private Grant Funds	212	391	442	436	-5	-1.2	3.0	1.0	1.0	0.0	-1.0	-100.0
Private Donations	28	13	289	161	-128	-44.2	0.0	0.0	0.0	0.0	0.0	N/A
TOTAL FOR PRIVATE FUNDS	240	404	730	597	-133	-18.2	3.0	1.0	1.0	0.0	-1.0	-100.0
INTRA-DISTRICT FUNDS												
Intra-District Funds	13,770	13,129	13,713	14,207	494	3.6	94.6	107.3	67.8	72.8	5.0	7.4
TOTAL FOR INTRA-DISTRICT FUNDS	13,770	13,129	13,713	14,207	494	3.6	94.6	107.3	67.8	72.8	5.0	7.4
GROSS FUNDS	269,061	276,426	283,401	319,075	35,674	12.6	1,392.5	1,424.8	1,408.8	1,405.9	-2.9	-0.2

*Percent change is based on whole dollars.

Note: If applicable, for a breakdown of each Grant (Federal and Private), Special Purpose Revenue type and Intra-District agreement, please refer to **Schedule 80 Agency Summary by Revenue Source** in the **FY 2020 Operating Appendices** located on the Office of the Chief Financial Officer's website.

FY 2020 Proposed Operating Budget, by Comptroller Source Group

Table RM0-3 contains the proposed FY 2020 budget at the Comptroller Source Group (object class) level compared to the FY 2019 approved budget. It also provides FY 2017 and FY 2018 actual expenditures.

Table RM0-3

(dollars in thousands)

Comptroller Source Group	Actual FY 2017	Actual FY 2018	Approved FY 2019	Proposed FY 2020	Change from FY 2019	Percentage Change*
11 - Regular Pay - Continuing Full Time	98,432	98,910	109,791	109,722	-69	-0.1
12 - Regular Pay - Other	8,797	9,449	9,501	8,535	-966	-10.2
13 - Additional Gross Pay	5,371	6,397	3,995	3,995	0	0.0
14 - Fringe Benefits - Current Personnel	25,497	26,477	29,872	31,879	2,007	6.7
15 - Overtime Pay	2,730	3,608	1,578	1,521	-57	-3.6
SUBTOTAL PERSONAL SERVICES (PS)	140,827	144,841	154,738	155,653	915	0.6
20 - Supplies And Materials	5,123	5,707	5,208	6,381	1,172	22.5
30 - Energy, Communication and Building Rentals	2,027	1,395	1,902	1,561	-341	-17.9
31 - Telecommunications	911	766	688	704	16	2.4
32 - Rentals - Land and Structures	5,816	6,045	6,398	6,629	231	3.6
34 - Security Services	4,569	3,858	3,250	2,881	-370	-11.4
35 - Occupancy Fixed Costs	108	195	217	697	480	221.4

Table RM0-3

(dollars in thousands)

Comptroller Source Group	Actual FY 2017	Actual FY 2018	Approved FY 2019	Proposed FY 2020	Change from FY 2019	Percentage Change*
40 - Other Services and Charges	10,123	11,855	10,420	24,175	13,755	132.0
41 - Contractual Services - Other	33,210	32,258	30,449	39,550	9,100	29.9
50 - Subsidies and Transfers	65,972	69,118	69,781	80,455	10,674	15.3
70 - Equipment and Equipment Rental	373	388	349	390	41	11.8
SUBTOTAL NONPERSONAL SERVICES (NPS)	128,234	131,585	128,663	163,423	34,759	27.0
GROSS FUNDS	269,061	276,426	283,401	319,075	35,674	12.6

*Percent change is based on whole dollars.

FY 2020 Proposed Operating Budget and FTEs, by Division/Program and Activity

Table RM0-4 contains the proposed FY 2020 budget by division/program and activity compared to the FY 2019 approved budget. It also provides FY 2017 and FY 2018 actual data. For a more comprehensive explanation of divisions/programs and activities, please see the Division/Program Description section, which follows the table.

Table RM0-4

(dollars in thousands)

Division/Program and Activity	Dollars in Thousands					Full-Time Equivalents				
	Actual FY 2017	Actual FY 2018	Approved FY 2019	Proposed FY 2020	Change from FY 2019	Actual FY 2017	Actual FY 2018	Approved FY 2019	Proposed FY 2020	Change from FY 2019
(1000) AGENCY MANAGEMENT										
(1010) Personnel	1,735	2,167	1,780	1,766	-15	15.8	16.5	15.0	15.0	0.0
(1015) Training and Employee Development	374	396	433	430	-3	3.0	3.1	3.0	3.0	0.0
(1017) Labor Relations	415	432	480	475	-5	3.0	3.1	3.0	3.0	0.0
(1020) Contracting and Procurement	22	0	0	0	0	0.0	0.0	0.0	0.0	0.0
(1030) Property Management	3,280	3,983	1,212	1,211	-2	2.0	2.0	4.0	4.0	0.0
(1040) Information Technology	5,915	0	0	0	0	27.0	0.0	0.0	0.0	0.0
(1050) Financial Management-Agency	1,407	2,368	2,411	2,594	183	11.8	22.3	19.0	19.0	0.0
(1055) Risk Management	191	0	0	0	0	1.0	0.0	0.0	0.0	0.0
(1060) Legal Services	781	0	0	0	0	4.4	0.0	0.0	0.0	0.0
(1080) Communications	20	0	0	0	0	0.0	0.0	0.0	0.0	0.0
(1085) Customer Services	59	0	0	0	0	0.0	0.0	0.0	0.0	0.0
(1087) Language Access	60	0	0	0	0	0.0	0.0	0.0	0.0	0.0
(1088) Claims Administration	0	878	1,054	577	-476	0.0	12.4	10.0	5.0	-5.0
(1089) Health Information Management	0	709	749	611	-138	0.0	9.3	9.0	7.0	-2.0
(1091) Office of Administration Operations	0	1,242	10,346	10,335	-10	0.0	2.1	9.0	7.0	-2.0
SUBTOTAL (1000) AGENCY MANAGEMENT	14,259	12,176	18,465	18,000	-465	67.8	70.8	72.0	63.0	-9.0
(100F) DBH FINANCIAL OPERATIONS										
(110F) DBH Budget Operations	725	784	850	852	2	4.7	5.2	5.0	5.0	0.0
(120F) DBH Accounting Operations	952	910	973	1,018	45	9.1	9.3	9.0	9.0	0.0
(130F) DBH Fiscal Officer	290	330	339	337	-2	2.0	2.1	2.0	2.0	0.0
SUBTOTAL (100F) DBH FINANCIAL OPERATIONS	1,967	2,024	2,161	2,207	46	15.8	16.5	16.0	16.0	0.0

Table RM0-4

(dollars in thousands)

Division/Program and Activity	Dollars in Thousands					Full-Time Equivalents				
	Actual FY 2017	Actual FY 2018	Approved FY 2019	Proposed FY 2020	Change from FY 2019	Actual FY 2017	Actual FY 2018	Approved FY 2019	Proposed FY 2020	Change from FY 2019
(1800) BEHAVIORAL HEALTH AUTHORITY										
(1810) Office of the Director/ Chief Exec Officer	1,488	1,617	1,502	1,934	432	6.9	8.3	8.0	11.0	3.0
(1820) Consumer and Family Affairs	1,449	1,723	2,088	2,041	-47	3.0	10.3	10.0	10.0	0.0
(1865) Office of Policy Support	495	0	0	0	0	3.9	0.0	0.0	0.0	0.0
(1866) Office of Strat. Planning and Grant Mgmt	1,064	0	0	0	0	1.0	0.0	0.0	0.0	0.0
(1880) Office of Accountability - QI/Audit	79	0	0	0	0	0.0	0.0	0.0	0.0	0.0
(1881) OA - Certification/Licensure	805	0	0	0	0	6.9	0.0	0.0	0.0	0.0
(1882) OA - Investigations	300	0	0	0	0	2.0	0.0	0.0	0.0	0.0
(1883) Office of Accountability - Program Integ	1,258	0	0	0	0	9.0	0.0	0.0	0.0	0.0
(1884) Office of Council and Community Affairs	12	0	0	0	0	1.0	0.0	0.0	0.0	0.0
(1885) Office of Ombudsman	144	306	377	384	7	1.0	3.0	3.0	3.0	0.0
(1886) Adult Services - Forensic	812	0	0	0	0	1.0	0.0	0.0	0.0	0.0
(1887) Outpatient Forensic Services Division	1,563	0	0	0	0	13.8	0.0	0.0	0.0	0.0
(1888) Legal Services	0	760	844	830	-14	0.0	4.6	4.5	4.5	0.0
(1889) Legislative and Public Affairs	0	785	1,019	642	-377	0.0	7.2	8.0	5.0	-3.0
SUBTOTAL (1800) BEHAVIORAL HEALTH AUTHORITY	9,469	5,192	5,829	5,830	1	49.4	33.4	33.5	33.5	0.0
(3800) ST. ELIZABETHS HOSPITAL										
(3805) Office of the Chief Executive	521	563	509	503	-6	2.0	2.1	2.0	2.0	0.0
(3810) Office of Clinical and Medical Svs - SEH	17,335	18,208	21,462	22,988	1,527	114.3	126.9	116.0	117.0	1.0
(3815) Engineering and Maintenance - SEH	4,454	3,553	4,289	4,158	-131	19.7	18.6	19.0	19.0	0.0
(3820) Fiscal and Support Services - SEH	2,153	2,382	849	716	-133	3.0	1.0	2.0	2.0	0.0
(3828) Quality and Data Management	1,679	1,341	1,396	1,394	-3	16.7	11.4	11.0	11.0	0.0
(3830) Housekeeping - SEH	2,388	2,819	2,878	2,938	61	49.2	46.9	49.0	47.0	-2.0
(3835) Materials Management - SEH	1,216	1,542	1,615	1,612	-4	9.8	9.3	8.0	8.0	0.0
(3845) Nursing - SEH	41,000	45,678	42,846	43,802	956	417.9	432.1	434.8	434.8	0.0
(3850) Nutritional Services SEH	2,874	3,498	3,796	3,931	135	27.7	28.0	28.1	28.1	0.0
(3860) Security and Safety - SEH	4,729	4,853	4,562	4,291	-271	21.6	31.7	33.0	31.0	-2.0
(3865) Transportation and Grounds - SEH	532	898	772	763	-9	4.9	5.2	5.0	5.0	0.0
(3870) Off of the Chief of Staff - SEH	78	216	110	110	0	2.0	1.0	0.0	0.0	0.0
(3875) Off of the Chief Operating Officer - SEH	1,022	1,046	1,074	1,019	-55	10.8	10.3	10.0	10.0	0.0
(3880) Office of Chief Clinical Officer - SEH	10,304	10,966	12,435	12,364	-72	113.2	113.5	115.0	115.0	0.0
SUBTOTAL (3800) ST. ELIZABETHS HOSPITAL	90,285	97,564	98,593	100,589	1,996	812.8	838.0	833.0	830.0	-3.0

Table RM0-4

(dollars in thousands)

Division/Program and Activity	Dollars in Thousands					Full-Time Equivalents				
	Actual FY 2017	Actual FY 2018	Approved FY 2019	Proposed FY 2020	Change from FY 2019	Actual FY 2017	Actual FY 2018	Approved FY 2019	Proposed FY 2020	Change from FY 2019
(4800) BEHAVIORAL HEALTH SERVICES AND SUPPORTS										
(4805) Office of the Deputy Director - BHSS	21,337	0	0	0	0	12.8	0.0	0.0	0.0	0.0
(4810) Organizational Development - BHSS	1,871	0	0	0	0	17.0	0.0	0.0	0.0	0.0
(4815) Adult Services - Support Housing - BHSS	12,334	0	0	0	0	13.8	0.0	0.0	0.0	0.0
(4820) Adult Services-Supportive Housing - BHSS	96	0	0	0	0	0.0	0.0	0.0	0.0	0.0
(4835) Care Coordination - BHSS	1,503	0	0	0	0	14.8	0.0	0.0	0.0	0.0
(4845) Comprehensive Psych Emer Prog (CPEP) - BHSS	-6	0	0	0	0	0.0	0.0	0.0	0.0	0.0
(4855) Homeless Outreach Services - BHSS	-12	0	0	0	0	0.0	0.0	0.0	0.0	0.0
(4860) Children and Youth - BHSS	14,088	-5	0	0	0	45.8	0.0	0.0	0.0	0.0
(4865) Early Childhood and School MH Pgm - BHSS	7,838	0	0	0	0	75.6	0.0	0.0	0.0	0.0
(4870) Integrated Care - BHSS	2,607	0	0	0	0	7.8	0.0	0.0	0.0	0.0
SUBTOTAL (4800) BEHAVIORAL HEALTH SERVICES AND SUPPORTS	61,656	-5	0	0	0	187.7	0.0	0.0	0.0	0.0
(4900) ACCOUNTABILITY										
(4905) Office of Accountability	0	287	240	238	-3	0.0	2.2	1.1	1.1	0.0
(4910) Investigations	0	507	517	505	-12	0.0	4.1	4.0	4.0	0.0
(4920) Licensure	0	471	532	564	32	0.0	4.1	4.0	4.0	0.0
(4930) Certification	0	1,028	1,187	1,024	-163	0.0	9.3	9.0	8.0	-1.0
(4940) Program Integrity	0	1,850	1,865	1,704	-162	0.0	15.4	14.0	13.0	-1.0
SUBTOTAL (4900) ACCOUNTABILITY	0	4,143	4,341	4,033	-307	0.0	35.2	32.1	30.1	-2.0
(5800) CLINICAL SERVICES DIVISION										
(5810) Office of the Chief Clinical Officer	1,401	2,927	5,315	6,826	1,511	4.9	8.3	9.0	20.0	11.0
(5820) Physicians Practice Group	1,221	0	0	0	0	13.1	0.0	0.0	0.0	0.0
(5830) Behavioral Health Services	2,691	881	957	937	-21	25.5	7.3	7.0	7.0	0.0
(5831) Behavioral Health Services - Adult	0	2,295	3,706	3,588	-118	0.0	25.0	24.5	23.5	-1.0
(5832) Behavioral Health Services - Child	0	1,419	2,258	1,487	-771	0.0	16.6	16.0	11.0	-5.0
(5836) Behavioral Health Services - Pharmacy	0	1,421	1,388	1,411	23	0.0	5.3	5.0	5.0	0.0
(5840) Comprehensive Psych Emer Prog-CPEP	8,349	2,039	1,205	1,205	-1	64.2	8.3	8.0	8.0	0.0
(5841) Psychiatric Emergency Services - CPEP	0	6,777	5,364	5,461	97	0.0	42.3	40.5	41.5	1.0
(5842) Homeless Outreach / Mobile Crisis - CPEP	0	2,827	4,984	4,957	-27	0.0	23.9	26.2	26.2	0.0
(5850) Homeless Outreach Services	924	-1	0	0	0	8.1	0.0	0.0	0.0	0.0
(5860) Pharmacy	1,916	0	0	0	0	7.7	0.0	0.0	0.0	0.0
(5870) Access Helpline	0	1,856	2,034	1,851	-183	0.0	16.5	19.0	18.0	-1.0
(5880) Forensics	0	3,458	5,867	5,836	-31	0.0	19.6	33.0	33.0	0.0
(5890) Assessment and Referral Center (ARC)	0	2,507	2,362	2,646	284	0.0	28.9	27.0	27.0	0.0
SUBTOTAL (5800) CLINICAL SERVICES DIVISION	16,503	28,405	35,440	36,204	764	123.4	201.7	215.3	220.3	5.0

Table RM0-4

(dollars in thousands)

Division/Program and Activity	Dollars in Thousands					Full-Time Equivalents				
	Actual FY 2017	Actual FY 2018	Approved FY 2019	Proposed FY 2020	Change from FY 2019	Actual FY 2017	Actual FY 2018	Approved FY 2019	Proposed FY 2020	Change from FY 2019
(5900) SYSTEM TRANSFORMATION										
(5901) System Transformation										
Administration	0	126	0	0	0	0.0	1.0	0.0	0.0	0.0
(5905) Office of System Transformation	0	847	772	763	-9	0.0	5.1	5.0	5.0	0.0
(5910) Info Systems Innovation/Data Analytics	0	3,320	1,910	2,694	784	0.0	4.1	4.0	4.0	0.0
(5911) ISIDA - Data/Performance Mgmt	0	1,772	1,813	1,831	17	0.0	15.4	14.0	13.0	-1.0
(5912) ISIDA - Information Systems	0	1,564	1,637	1,623	-14	0.0	13.4	13.0	13.0	0.0
(5913) ISIDA - Technology Infrastructure	0	794	1,013	1,057	44	0.0	9.3	9.0	9.0	0.0
(5920) Strategic Mgmt and Policy	0	2,136	1,528	1,317	-211	0.0	6.2	4.0	3.0	-1.0
(5930) Network Development	0	1,406	1,374	1,394	20	0.0	13.3	10.0	10.0	0.0
(5940) Training Institute	0	614	663	736	73	0.0	5.2	5.0	5.0	0.0
SUBTOTAL (5900) SYSTEM TRANSFORMATION	0	12,579	10,710	11,415	704	0.0	72.9	64.0	62.0	-2.0
(6800) ADDICTION PREVENTION AND RECOVERY ADMIN										
(6810) Office of Senior Deputy	715	0	0	0	0	3.0	0.0	0.0	0.0	0.0
(6820) Deputy Director for Operations	8,664	0	0	0	0	25.9	0.0	0.0	0.0	0.0
(6830) Deputy Director for Administration	2,856	0	0	0	0	18.3	0.0	0.0	0.0	0.0
(6840) Prevention Services	5,355	0	0	0	0	13.5	0.0	0.0	0.0	0.0
(6850) Performance Management	489	0	0	0	0	4.1	0.0	0.0	0.0	0.0
(6855) Deputy Director for Treatment	8,007	-9	0	0	0	51.1	0.0	0.0	0.0	0.0
(6870) Implementation of Drug Treatment Choice	12,206	0	0	0	0	0.0	0.0	0.0	0.0	0.0
SUBTOTAL (6800) ADDICTION PREVENTION AND RECOVERY ADMIN	38,292	-9	0	0	0	115.7	0.0	0.0	0.0	0.0
(6900) COMMUNITY SERVICES										
(6901) Community Services										
Administration	0	65	200	200	0	0.0	1.0	0.0	0.0	0.0
(6905) Office of Community Services	0	6,845	1,737	1,667	-70	0.0	8.2	6.0	6.0	0.0
(6910) Prevention and Early Intervention	0	760	1,123	1,137	14	0.0	3.1	3.0	3.0	0.0
(6911) Prevention/Early Interven-Early Chldhood	0	1,957	1,097	1,116	20	0.0	10.3	9.0	9.0	0.0
(6912) Prevention/Early Interven-Sch Ment Hlth	0	6,335	9,362	16,057	6,695	0.0	63.2	58.0	67.0	9.0
(6913) Prevention Substance Use Disorder	0	4,231	3,888	2,204	-1,684	0.0	10.0	12.0	11.0	-1.0
(6914) Gambling Treatment and Intervention	0	0	0	200	200	0.0	0.0	0.0	0.0	0.0
(6920) Specialty Care	0	6,015	1,716	2,592	877	0.0	2.0	2.0	3.0	1.0
(6921) Specialty Care - Community-Based Service	0	2,537	2,889	2,870	-18	0.0	12.3	15.0	15.0	0.0
(6922) Specialty Care - New Initiatives	0	1,997	799	22,510	21,712	0.0	12.9	8.0	7.1	-0.9
(6930) Linkage and Assessment	0	3,675	2,728	2,463	-265	0.0	2.1	3.0	4.0	1.0
(6931) Linkage and Assessment/Assessment Center	0	1,300	506	493	-13	0.0	5.2	5.0	5.0	0.0
(6932) Linkage and Assessment/Co-Located Prgms	0	1,054	748	540	-208	0.0	9.4	6.0	5.0	-1.0
(6933) Linkage and Assessment - PRTF	0	571	564	568	3	0.0	4.1	5.0	5.0	0.0
(6940) Housing Development	0	28,128	26,638	29,761	3,122	0.0	7.3	7.0	7.0	0.0

Table RM0-4

(dollars in thousands)

Division/Program and Activity	Dollars in Thousands					Full-Time Equivalents				
	Actual FY 2017	Actual FY 2018	Approved FY 2019	Proposed FY 2020	Change from FY 2019	Actual FY 2017	Actual FY 2018	Approved FY 2019	Proposed FY 2020	Change from FY 2019
(6950) Residential Support Srvs/Care Continuity	0	620	552	558	6	0.0	5.2	4.0	4.0	0.0
(6960) Implementation of Drug Treatment Choice	0	14,190	13,583	13,583	0	0.0	0.0	0.0	0.0	0.0
(6970) Behavioral Health Rehab	0	12,845	12,845	12,845	0	0.0	0.0	0.0	0.0	0.0
(6980) Behavioral Health Rehab- Local Match	0	21,232	26,888	29,434	2,545	0.0	0.0	0.0	0.0	0.0
SUBTOTAL (6900) COMMUNITY SERVICES	0	114,357	107,862	140,798	32,936	0.0	156.2	143.0	151.1	8.1
(7800) BEHAVIORAL HEALTH FINANCING/FEE FOR SVC										
(7810) Behavioral Health Information Management	319	0	0	0	0	3.9	0.0	0.0	0.0	0.0
(7820) Behavioral Health Rehabilitation Svcs	8,942	0	0	0	0	0.0	0.0	0.0	0.0	0.0
(7825) Behavioral Health Rehab Svcs-Local Match	25,742	0	0	0	0	0.0	0.0	0.0	0.0	0.0
(7870) Claims Administration/Billing	1,293	0	0	0	0	11.8	0.0	0.0	0.0	0.0
(7880) Provider Relations	335	0	0	0	0	4.2	0.0	0.0	0.0	0.0
SUBTOTAL (7800) BEHAVIORAL HEALTH FINANCING/FEE FOR SVC	36,631	0	0	0	0	19.9	0.0	0.0	0.0	0.0
TOTAL PROPOSED OPERATING BUDGET	269,061	276,426	283,401	319,075	35,674	1,392.5	1,424.7	1,408.8	1,405.9	-2.9

(Change is calculated by whole numbers and numbers may not add up due to rounding)

Note: For more detailed information regarding the proposed funding for the activities within this agency's programs, please see **Schedule 30-PBB Program Summary by Activity** in the **FY 2020 Operating Appendices** located on the Office of the Chief Financial Officer's website. "No Activity Assigned" indicates budget or actuals that are recorded at the division/program level.

Division Description

The Department of Behavioral Health operates through the following 8 divisions:

Behavioral Health Authority – plans for and develops mental health and substance use disorders (SUD) services; ensures access to services; monitors the service system; supports service providers by operating DBH's Fee for Service (FFS) system; provides grant or contract funding for services not covered through the FFS system; regulates the providers within the District's public behavioral health system; and identifies the appropriate mix of programs, services, and supports necessary to meet the behavioral health needs of District residents.

This division contains the following 5 activities:

- **Office of the Director/Chief Executive Officer** – leads management and oversight of the public behavioral health system; directs the design, development, communication, and delivery of behavioral health services and supports; and identifies approaches to enhance access to services that support recovery and resilience;

- **Consumer and Family Affairs** – promotes and protects the rights of individuals with behavioral health disorders; encourages and facilitates consumer and client and family leadership of treatment and recovery plans; and ensures consumer and client voice in the development of the behavioral health system. The Administration also promotes consumer and client leadership, manages the peer certification training, and provides expertise on the consumer and client perspective and is made up of the following teams: Peer Support, Consumer Engagement, Consumer Rights, Quality Improvement and Saint Elizabeths;
- **Office of Ombudsman** – identifies and helps consumers and clients resolve problems, complaints and grievances through existing processes; educates on available services and helps to maximize outreach; refers individuals when appropriate to other District agencies for assistance; and comments on behalf of residents on District behavioral health policy, regulations and legislation;
- **Legal Services** – provides legal advice to the Director on all aspects of DBH’s operations and activities; drafts, researches and/or reviews legislation, regulations, and policies affecting DBH’s mission and programs; and formulates strategic advice on DBH program development and compliance and oversight activities; and
- **Legislative and Public Affairs** – develops, leads and coordinates the agency’s public education, internal and external communications, and public engagement and outreach initiatives; manages legislative initiatives and acts as the liaison to the District Council; facilitates responses to constituent complaints and service requests; and provides information and support for special projects.

Saint Elizabeths Hospital (SEH) – provides inpatient psychiatric, medical, and psycho-social person-centered treatment to adults to support their recovery and return to the community. The hospital’s goal is to maintain an active treatment program that fosters individual recovery and independence as much as possible. The hospital is licensed by the District’s Department of Health, and meets all the conditions of participation promulgated by the federal Centers for Medicare and Medicaid Services.

This division contains the following 14 activities:

- **Office of the Chief Executive** – provides overall executive management and leadership for all services and departments of Saint Elizabeths;
- **Office of Clinical and Medical Services – SEH** – provides the clinical, operational, strategic, and cultural leadership necessary to deliver care that is high-value (in terms of cost, quality and patient experience) to support their recovery and reintegration into the community;
- **Engineering and Maintenance – SEH** – provides maintenance and repairs to ensure a functional, safe, and secure facility to maximize the benefits of the therapeutic environment;
- **Fiscal and Support Services – SEH**– provides for the formulation, execution, and management of the hospital’s budget, billing and revenue operations; approves and finances all requests for procurements; and oversees the overall financial integrity of the Hospital to ensure the appropriate collection, allocation, utilization and control of resources;
- **Quality and Data Management** – provides quality improvement utilizing performance improvement techniques; uses data and research to guide clinical practices; provides oversight of reporting functions; and manages the reporting functions from the electronic medical record;
- **Housekeeping – SEH** – maintains a clean and sanitized environment to enhance the therapeutic environment and level of clinical performance;
- **Materials Management – SEH**– receives and delivers materials, supplies, postal and laundry services; maintains an inventory of goods, replenishes stock, and performs electronic receiving for all goods and services;
- **Nursing Services – SEH** – provides active treatment and comprehensive, high quality 24-hour nursing care through a recovery-based therapeutic program; establishes the training curriculum for all levels of hospital staff and ensures compliance with training programs for clinical and clinical support staff to maintain the health and safety of patients and staff;
- **Nutritional Services – SEH** – provides optimum nutrition and food services, medical nutrition therapy and nutrition education services in a safe and sanitary environment;

- **Security and Safety – SEH** – provides a safe and secure facility for patients, visitors, and staff to support a therapeutic environment;
- **Transportation and Grounds – SEH** – manages the resources, administrative functions, contracts, and personnel; and provides transportation and maintenance services, including solid and medical waste disposal, and snow and ice removal;
- **Office of the Chief of Staff – SEH** – primarily responsible for the organization, ongoing management and oversight of key hospital administrative functions; regularly interacts and coordinates with medical staff and executive leadership; and serves as liaison with external partners including the Department of Corrections, DC Superior Court, and the District of Columbia Hospital Association;
- **Office of the Chief Operating Officer – SEH** – provides the operational, strategic, and cultural leadership necessary to plan, direct, and manage major administrative functions. This ensures the provision of high quality services while also meeting the needs of individuals in care and external stakeholders. The Chief Operating Officer regularly interacts and coordinates with finance, information systems, human resources, performance improvement, and risk management; and
- **Office of the Chief Clinical Officer – SEH** – provides clinical leadership and interdisciplinary treatment teams; and ensures the provision of social work services, treatment programs, rehabilitation services, utilization review, and volunteer services.

Accountability Division – oversees provider certification, mental health community residence facility licensure, program integrity, quality improvement, major investigations, incident management, claims audits, and compliance monitoring. Issues annual Medicaid and local repayment demand letters, annual quality reviews, and annual provider scorecards.

This division contains the following 5 activities:

- **Office of Accountability** – leads the Accountability Division by providing oversight and management of all of the agency’s certification, licensure, incident management, and program integrity activities;
- **Investigations** – conducts major investigations of sentinel events and major unusual incidents, presents a disposition of the matter, and develops the final investigative report submitted to the agency Director, General Counsel, and other appropriate parties to ensure the needs and treatment goals of individuals in care are identified and addressed;
- **Licensure** – reviews and processes applications for licensure for Mental Health Community Residence Facilities (MHCRF), monitors MHCRF operators’ compliance with agency regulations and policies, and generates and enforces statements of deficiencies and corrective action plans when necessary;
- **Certification** – reviews and processes applications for certification and recertification for behavioral health providers, monitors provider compliance with agency certification regulations and policies, and generates and enforces statements of deficiencies and corrective action plans when necessary; and
- **Program Integrity** – provides oversight of certified providers through audits and reviews to ensure that they meet or exceed service delivery and documentation standards for mental health rehabilitation and substance use disorder services, and that they comply with agency policies and procedures and applicable District and federal laws and regulations.

Clinical Services Division – provides person-centered, culturally competent outpatient psychiatric treatment and supports to children, youth and adults to support their recovery; and coordinates disaster and emergency mental health programs.

This division contains the following 11 activities:

- **Office of the Chief Clinical Officer** – supervises and sets standards for the provision of clinical care throughout the agency and public behavioral health system for children, youth, and adults; oversees community hospitals that treat agency consumers on an involuntary basis; and serves as the petitioner in guardianship cases, and oversees the agency’s disaster response for the city;
- **Behavioral Health Services** – directs and manages mental health services at two agency-operated locations;

- **Behavioral Health Services – Adult** – provides clinical assessment and treatment of persons who are 18 years of age and older who present with mental health concerns, and provides urgent same-day evaluations for persons in crisis that do not arise to the level of needing an emergency room visit;
- **Behavioral Health Services – Child** – provides clinical assessment and treatment for children up to 7 years old who present with challenging social, emotional and disruptive behaviors that cause impairment in functioning at home, in school/daycare, and in the community;
- **Behavioral Health Services – Pharmacy** – provides psychiatric medications for residents enrolled in the public behavioral health system who are uninsured and unable to pay for medications;
- **Comprehensive Psychiatric Emergency Program (CPEP)** – provides emergency mental health services to adults 18 years of age and older, including immediate and extended observation care to individuals who present in crisis, as well as services in the community; and participates in the District’s cold weather alert response;
- **Psychiatric Emergency Services – CPEP** – provides immediate access to multi-disciplinary emergency psychiatric services 24/7, assesses and stabilizes psychiatric crises of patients who present voluntarily or involuntarily who live or visit the District, and formulates appropriate next level of care in the community or at other treatment facilities. Serves as the first contact for behavioral health services in the District and the primary provider of crisis stabilization to high profile and high service utilizer patients;
- **Homeless Outreach / Mobile Crisis – CPEP** – Homeless Outreach connects homeless individuals and families with behavioral health services and assists in the District’s encampment protocol. Mobile Crisis provides crisis intervention and stabilization services to residents and visitors who are experiencing psychiatric crises in the community or at home; services include linkage to DBH, psychoeducation, treatment compliance support, and grief and loss services to individuals after a traumatic event;
- **Access Helpline** – enrolls consumers into services, authorizes appropriate units and duration of services based on clinical review of medical necessity criteria and capacity limits, ensures District residents receive crisis services, and provides telephonic suicide prevention and other counseling as appropriate;
- **Forensics** – provides and oversees continuum of behavioral health and others services for justice-involved individuals from pre-arrest to post-incarceration to ensure their successful return to the community; and
- **Assessment and Referral Center (ARC)** – assesses and refers adults seeking treatment for substance use disorders to appropriate services, such as detoxification, inpatient, medication-assisted treatment, outpatient substance use disorder treatment programs, or recovery support services.

Systems Transformation Division – conducts research, analysis, planning and evaluation leading to defined individual, service, and system outcomes; identification of needs, resources and strategies to improve efficiency as well as collaboration among and between internal and external partners; development and implementation of learning opportunities to advance system change; and greater effectiveness of the overall service delivery system.

This division contains the following 8 activities:

- **Office of System Transformation** – leads development and implementation of programmatic, organizational, and system change management process; and manages the agency’s grant process, from identifying opportunities to submitting reports to grantors;
- **Information Systems Innovation and Data Analytics (ISIDA)** – provides and maintains high-quality hardware and software applications that support the provision and monitoring of consumer and client services, and produces and analyzes data for decision-making;
- **ISIDA – Data and Performance Management** – meets the agency’s data reporting and analysis needs by working with staff to identify what information is needed, creating reports and dashboards that present and make the information accessible, and helping staff understand what the information means and how it can be used to improve performance;
- **ISIDA – Information Systems** – ensures continuity of operations and functionality improvement of existing practice management, billing, electronic health record applications and other systems, as well as providing business analysis support when the need for new systems is identified;

- **ISIDA – Technology Infrastructure** – manages the agency’s technical backbone, including server maintenance, asset inventory management, distribution of personal hardware, telecommunication, and multi-functional device support and management;
- **Strategic Management and Policy** – develops programmatic regulations, policies and procedures to support the agency’s mission, and develops the agency’s Performance Plan and Performance Accountability Report;
- **Network Development** – monitors and provides technical assistance to individual providers and/or the provider network at large on emerging clinical, care coordination, administrative and organizational issues that need to be addressed to ensure and enhance the provision of services; and
- **Training Institute** – enhances the knowledge and competencies of the DBH provider network, and internal and external customers, through performance-based and data-driven learning environments.

Community Services Division – develops, implements and monitors a comprehensive array of prevention, early intervention and community-based behavioral health services and supports for adults, children, youth, and their families that are culturally and linguistically competent; and supports resiliency, recovery and overall well-being for District residents who have mental health and substance use disorders.

This division contains the following 19 activities:

- **Community Services Administration** - provides support services for community-based programs to ensure the coordination of services among and between internal and external partners to achieve programmatic results;
- **Office of Community Services** – leads oversight and management of the agency’s integrated community-based, prevention, early intervention, and specialty behavioral health programs;
- **Prevention and Early Intervention** – develops and delivers prevention and early intervention services, education, support, and outreach activities to help inform and identify children, youth, and their families who may be affected by some level of mental health and/or substance use disorder issue;
- **Prevention and Early Intervention – Early Childhood** – provides school-based and center-based early childhood mental health supports and child and family-centered consultation to child development center staff and families to build their skills and capacity to promote social/emotional development and to prevent, identify, and respond to mental health issues among children in their care;
- **Prevention and Early Intervention – School Mental Health**– provides school-based, primary prevention services to students and school staff, early intervention, and treatment to students and parents, and consultation to individual teachers;
- **Prevention Substance Use Disorder** – ensures comprehensive prevention systems by developing policies, programs, and services to prevent the onset of illegal drug use, prescription drug misuse and abuse, alcohol misuse and abuse, and underage alcohol and tobacco use;
- **Gambling Treatment and Intervention**– provides support services for the prevention, treatment, and research of gambling addictions;
- **Specialty Care** – develops, implements, and ensures sustainability of specialized and evidence-based behavioral health programs for adults, adolescents, transition-aged youth, children, and their families;
- **Specialty Care – Community–Based Services** – oversees development, implementation and monitoring of a comprehensive array of community-based mental health and substance use disorders services including evidenced-based and promising practices, implemented within the behavioral health provider network to address the needs of adults, children, youth, and their families;
- **Specialty Care – New Initiatives** – provides overall technical direction and administration of a broad range of grant-funded projects and other new initiatives, tracks and monitors their progress and outcomes, and makes recommendations on their integration and full-scale implementation;
- **Linkage and Assessment** – provides mental health and substance use disorder screening, assessments, and referrals for adults, children, youth, and families, ensuring they have easy access to a full continuum of quality behavioral health services and supports;

- **Linkage and Assessment – Assessment Center** – provides the Superior Court of the District of Columbia with court-ordered, high-quality, comprehensive, culturally competent mental health consultation, and psychological and psychiatric evaluations, for children and related adults with involvement in child welfare, juvenile justice and family court;
- **Linkage and Assessment – Co-Located Programs** – oversees the co-location of DBH clinicians at various District government agencies and community-based sites, to conduct early behavioral health screenings, assessments, and consultations, and to make service referrals to the behavioral health provider network;
- **Linkage and Assessment – PRTF** – provides centralized coordination and monitoring of placement, continued stay, and post-discharge of children and youth in psychiatric residential treatment facilities (PRTF). Oversees the coordination of the PRTF medical necessity review process;
- **Housing Development** – develops housing options and administers associated policies and procedures governing eligibility, access to housing, and issuance of vouchers for eligible individuals in the agency’s system; monitors providers’ compliance with contracts and provides technical assistance to providers on the development of corrective action plans; and develops and monitors grant agreements pertaining to housing development and funding of housing vouchers;
- **Residential Support Services and Care Continuity** – determines individuals’ housing needs and level of support; provides referrals to landlords; assures properties are inspected and approved; monitors service provision according to individualized clinical treatment plans; assures coordination and resolves problems among landlords, tenants, and providers; and conducts regular reviews to transition ready individuals to more independent, least restrictive community-based settings of their choice;
- **Implementation of Drug Treatment Choice** – provides subsidies and transfers for substance use disorder treatment services only;
- **Behavioral Health Rehabilitation** – provides Local funding for the payment of claims to providers for District residents who receive mental health rehabilitation services that are locally funded only and/or who are otherwise not eligible for Medicaid; and
- **Behavioral Health Rehabilitation – Local Match** – allocates Local funding as the match to Medicaid payment of claims to providers for District residents who are Medicaid-eligible and receive mental health and substance use disorder services that are funded by Medicaid.

Agency Management – provides for administrative support and the required tools to achieve operational and programmatic results. This division is standard for all agencies using performance-based budgeting.

Agency Financial Operations – provides comprehensive and efficient financial management services to, and on behalf of, District agencies so that the financial integrity of the District of Columbia is maintained. This division is standard for all agencies using performance-based budgeting.

Division Structure Change

Department of Behavioral Health has no division structure changes in the FY 2020 proposed budget.

FY 2019 Approved Budget to FY 2020 Proposed Budget, by Revenue Type

Table RM0-5 itemizes the changes by revenue type between the FY 2019 approved budget and the FY 2020 proposed budget. For a more comprehensive explanation of changes, please see the FY 2020 Proposed Budget Changes section, which follows the table.

Table RM0-5

(dollars in thousands)

DESCRIPTION	DIVISION/PROGRAM	BUDGET	FTE
LOCAL FUNDS: FY 2019 Approved Budget and FTE		249,752	1,225.1
Removal of One-Time Costs	Multiple Programs	-1,092	-15.0

Table RM0-5

(dollars in thousands)

DESCRIPTION	DIVISION/PROGRAM	BUDGET	FTE
LOCAL FUNDS: FY 2020 Recurring Budget		248,660	1,210.1
Increase: To support the costs of pre-existing programmatic initiatives	Community Services	2,529	0.0
Increase: To support operational requirements	Multiple Programs	1,813	0.0
Increase: To Support IDCR Expenditures (one-time increase)	St. Elizabeths Hospital	892	14.0
Decrease: To align personal services and Fringe Benefits with projected costs	Multiple Programs	-2,146	-14.0
Enhance: To support the expansion of School Mental Health Services and Supports	Community Services	6,090	1.0
Enhance: To support increased Mental Health Community Residential Facility (MHCRF) rates	Community Services	3,173	0.0
Enhance: To support escalating pharmaceutical costs	St. Elizabeths Hospital	1,100	0.0
Enhance: To support an 24-hour outreach transformation team	Clinical Services Division	1,007	11.0
LOCAL FUNDS: FY 2020 Mayor's Proposed Budget		263,117	1,222.1
DEDICATED TAXES: FY 2019 Approved Budget and FTE		0	0.0
Enhance: To prevent, treat, and research gambling addiction	Community Services	200	0.0
DEDICATED TAXES: FY 2020 Mayor's Proposed Budget		200	0.0
FEDERAL GRANT FUNDS: FY 2019 Approved Budget and FTE		14,831	94.8
Increase: To align budget with projected grant awards	Multiple Programs	20,431	0.0
Increase: To align personal services and Fringe Benefits with projected costs	Multiple Programs	496	-3.9
FEDERAL GRANT FUNDS: FY 2020 Mayor's Proposed Budget		35,758	90.8
FEDERAL MEDICAID PAYMENTS: FY 2019 Approved Budget and FTE		2,024	5.0
Increase: To align budget with projected federal Medicaid reimbursements	Multiple Programs	820	0.0
FEDERAL MEDICAID PAYMENTS: FY 2020 Mayor's Proposed Budget		2,844	5.0
PRIVATE GRANT FUNDS: FY 2019 Approved Budget and FTE		442	1.0
Decrease: To align budget with projected grant awards	Multiple Programs	-5	-1.0
PRIVATE GRANT FUNDS: FY 2020 Mayor's Proposed Budget		436	0.0
PRIVATE DONATIONS: FY 2019 Approved Budget and FTE		289	0.0
Decrease: To align budget with projected revenues	St. Elizabeths Hospital	-128	0.0
PRIVATE DONATIONS: FY 2020 Mayor's Proposed Budget		161	0.0
SPECIAL PURPOSE REVENUE FUNDS: FY 2019 Approved Budget and FTE		2,352	15.2
No Change		0	0.0
SPECIAL PURPOSE REVENUE FUNDS: FY 2020 Mayor's Proposed Budget		2,352	15.2
INTRA-DISTRICT FUNDS: FY 2019 Approved Budget and FTE		13,713	67.8
Increase: To align budget with projected revenues	Multiple Programs	494	5.0
INTRA-DISTRICT FUNDS: FY 2020 Mayor's Proposed Budget		14,207	72.8
GROSS FOR RM0 - DEPARTMENT OF BEHAVIORAL HEALTH		319,075	1,405.9

(Change is calculated by whole numbers and numbers may not add up due to rounding)

FY 2020 Proposed Budget Changes

The Department of Behavioral Health's (DBH) proposed FY 2020 gross budget is \$319,075,165, which represents a 12.6 percent increase over its FY 2019 approved gross budget of \$283,401,254. The budget is comprised of \$263,117,213 in Local funds, \$200,000 in Dedicated Taxes, \$35,757,902 in Federal Grant funds, \$2,843,597 in Federal Medicaid Payments, \$436,345 in Private Grant funds, \$161,153 in Private Donations, \$2,351,648 in Special Purpose Revenue funds, and \$14,207,309 in Intra-District funds.

Recurring Budget

The FY 2020 budget for DBH includes a reduction of \$1,092,000 to account for the removal of one-time funding appropriated in FY 2019, which includes \$892,000 and 15.0 Full-Time Equivalents (FTEs) to support costs associated with a reduced cost allocation plan and \$200,000 to support the study of Mental Health and Substance Abuse in Immigrant Communities Act of 2017.

Mayor's Proposed Budget

Increase: A proposed Local funds increase of \$2,528,557 will be used in the Community Services division and will allow DBH to continue to provide prevention, intervention and treatment services and supports for children, youth and adults with mental and/or substance use disorders. A proposed Local funds increase of \$1,813,210 will be used across multiple divisions in nonpersonal services to include professional services and supplies.

A one-time Local funds increase of \$892,000 and 14.0 FTEs in the Saint Elizabeths Hospital (SEH) division will be used to absorb costs associated with a reduced cost allocation plan.

In Federal grant funds, an increase of \$20,431,347 is attributed to the Opioid Response grant funded through the U.S. Department of Health and Human Services. In response, DBH will provide services to individuals with a diagnosis of an opioid use disorder or to individuals with a demonstrated history of opioid overdose problems. DBH will eliminate 3.9 Federal Grant funded FTEs and is projecting a net increase of \$495,839 to align salaries and Fringe Benefit with projected expenses.

A proposed increase of \$819,818 in Federal Medicaid Payments will support personal services costs and aligns the budget with projected federal reimbursement for qualified Medicaid services. DBH has signed letters of intent with multiple District agencies to provide services that will benefit the citizens of the District of Columbia. These Intra-District funds are projected to increase by \$494,080 and will support an additional 5.0 FTEs across multiple divisions.

Decrease: The agency has projected a savings of \$2,146,330 in Local funds as it reduces 14.0 FTEs related to program efficiencies. A proposed net decrease of \$5,201 and 1.0 FTE in Private grant funds, and a proposed decrease of \$127,622 in Private Donation funds allocated to the Saint Elizabeths Hospital division will align these budgets with projected revenues.

Enhance: DBH will receive four Local fund enhancements. The Community Services division will receive \$6,089,694 and 1.0 FTE to support the expansion of school mental health services and supports. This investment will support non-billable services provided by community-based organizations. This division will also receive \$3,173,212, which will allow Mental Health Community Residential Facility (MHCRF) operators to improve current business operations deficits, leading to improved quality of care provided to District residents.

The SEH division will receive \$1,100,000 to support the increased need and cost of pharmaceuticals due to a change in patients' acuity and legal status. The Clinical Services division will receive \$1,007,307 and 11.0 FTEs for the creation of a mobile, multi-disciplinary 24-hour response team. It will provide crisis services to District residents that are experiencing a wide range of behavioral health distresses, including the addition of trauma specialists who can train DBH teams to respond to trauma and grief events.

DBH will provide \$200,000 in Dedicated Taxes to the Community Services division, which will be used to support a Gambling Addiction Treatment program.

Agency Performance Plan*

The Department of Behavioral Health (DBH) has the following strategic objectives for FY 2020:

Strategic Objectives

Strategic Objectives describe what the agency will do, at a high level, to achieve its mission. These are action-based sentences that define what an agency does for its customers, whether the customers are residents or other District agencies, and how that improves the District.

Objectives

1. Ensure the public behavioral health system is person-centered, and promotes and supports the leadership of peers with lived experience in recovery and the development of the system of care.
2. Ensure individualized mental health and substance use disorder services across the entire continuum of care from community-based treatment and support services to inpatient hospitalization, including justice-involved consumer competency restoration, to support the behavioral health, wellness and recovery of District residents.
3. Maximize housing resources and target the most vulnerable District residents with serious behavioral health challenges who are homeless, returning from institutions or moving to more independent living to prevent and minimize homelessness.
4. Heighten public awareness among District residents about mental health and substance use disorders and resources to increase their understanding of behavioral health, reduce stigma, and encourage prevention efforts and early identification and treatment.
5. Create and maintain a highly efficient, transparent, and responsive District government.

ACTIVITIES

Activities include the work that happens on a daily basis to help achieve the Strategic Objectives. Activity names come from the budget line items. This is further divided into “daily services” (ex. sanitation disposal), and long-term “key projects” that are high profile, one-time and span several years, (ex. redevelopment of Walter Reed Army Medical Center). Many agencies will mostly have daily services, whereas some agencies that have more of their budget come from capital funding will have several key projects.

1. Ensure the public behavioral health system is person-centered, and promotes and supports the leadership of peers with lived experience in recovery and the development of the system of care. (3 Activities)

Activity Title	Activity Description	Type of Activity
Consumer and Family Engagement	Ensure consumers and families are engaged and involved in the development and improvements of the service system.	Daily Service
Training	The DBH Training Institute provides opportunities for DBH and provider staff to enhance skills related to train-the-trainer modules.	Daily Service
D.C. Certified Peer Academy	This project provides technical assistance activities to engage peer leaders from the mental health and substance use communities.	Daily Service

2. Ensure individualized mental health and substance use disorder services across the entire continuum of care from community-based treatment and support services to inpatient hospitalization, including justice-involved consumer competency restoration, to support the behavioral health, wellness and recovery of District residents. (7 Activities)

Activity Title	Activity Description	Type of Activity
Early Childhood and School Mental Health Programs	Early Childhood and School Mental Health Program provides prevention, screening, early	Daily Service

2. Ensure individualized mental health and substance use disorder services across the entire continuum of care from community-based treatment and support services to inpatient hospitalization, including justice-involved consumer competency restoration, to support the behavioral health, wellness and recovery of District residents. (7 Activities)

Activity Title	Activity Description	Type of Activity
	intervention and treatment for children and youth in schools and Early Childhood Development Centers.	
Prevention interventions	Strategic preventive interventions aimed at preventing and/or delaying the onset of alcohol, tobacco, and other drug use among youth and adults.	Daily Service
Mental Health Services provided to adults	Community-based treatment services provided to adults who have a serious mental illness in order to assist them in their recovery.	Daily Service
Child/Youth Mental Health Services	Community-based treatment and supportive services provided to children, youth and young adults who have a serious mental illness or serious emotional disorder in order to assist them in their recovery.	Daily Service
Recovery Support Services	Clients in active treatment or in recovery from substance use disorders receive services to help them achieve and maintain their recovery.	Daily Service
Substance Use Disorder Treatment Services for youth and adults	Community-based services to assist people reach recovery from Substance use disorders.	Daily Service
Inpatient Psychiatric Services	Mental health services provided in the District's public psychiatric hospital for individuals who need an inpatient level of care to prepare them for return to the community.	Daily Service

3. Maximize housing resources and target the most vulnerable District residents with serious behavioral health challenges who are homeless, returning from institutions or moving to more independent living to prevent and minimize homelessness. (1 Activity)

Activity Title	Activity Description	Type of Activity
Housing Services	DBH consistently works to address the needs of its clientele by connecting them to a range of housing options based on their needs from independent living to more intensive care. Providing subsidies is a core function of housing services at the agency.	Daily Service

4. Heighten public awareness among District residents about mental health and substance use disorders and resources to increase their understanding of behavioral health, reduce stigma, and encourage prevention efforts and early identification and treatment. (2 Activities)

Activity Title	Activity Description	Type of Activity
Communication Strategies	Develop and implement communication strategies to promote recovery and well-being.	Daily Service
Outreach Activities	SUD Mobile Assessment and Referral Center (MARC) is a mobile unit which visits various communities and residents are offered screenings for SUD treatment, health screenings, HIV/AIDS, HEP C testing, education and linkage to services. During outreach activities staff engage residents for readiness for SUD treatment and provide them with behavioral health education and resource information. This heightens the awareness of SUD and treatment options, reducing the stigma associated with co-occurring disorders.	Daily Service

KEY PERFORMANCE INDICATORS

Key Performance Indicators measure how well an agency is achieving its Strategic Objectives. They are outcome-oriented and should be used to answer the question, “What does the agency need to measure to determine success?”

1. Ensure the public behavioral health system is person-centered, and promotes and supports the leadership of peers with lived experience in recovery and the development of the system of care. (2 Measures)

Measure	New Measure/ Benchmark Year	FY 2017 Actual	FY 2018 Target	FY 2018 Actual	FY 2019 Target	FY 2020 Target
Number of new Certified Peer Specialists to include those in specialty tracks of family and youth	No	23	20	28	20	20
Number of people trained in Recovery Coaching	No	19	20	50	20	20

2. Ensure individualized mental health and substance use disorder services across the entire continuum of care from community-based treatment and support services to inpatient hospitalization, including justice-involved consumer competency restoration, to support the behavioral health, wellness and recovery of District residents. (8 Measures)

Measure	New Measure/ Benchmark Year	FY 2017 Actual	FY 2018 Target	FY 2018 Actual	FY 2019 Target	FY 2020 Target
Achieve a five percent increase in the number of developmental/behavioral health screenings completed by primary care providers over the previous fiscal year total.	No	Not Available	53,586	52,534	56,265	56,265
Achieve two percent increase in the number of individuals (adults and youth) reached through planned prevention strategies over previous fiscal year	No	Not Available	7705	20,695	7859	7859
Adult mental health consumers receive their first service within 30 days of enrollment	No	Not Available	New in 2019	New in 2019	75%	75%
Child mental health consumers receive their first service within 30 days of enrollment	No	Not Available	New in 2019	New in 2019	75%	75%
Consumers who are in need of linkage support at the Department of Corrections who are actually linked by DBH staff	No	Not Available	New in 2019	New in 2019	80%	80%
Percent of inpatient consumers restored to competency	No	Not Available	New in 2019	New in 2019	80%	80%
Percent of post fall assessments conducted with 72 hours of event	No	Not Available	90%	93.3%	90%	90%
Percent of the individuals referred to Resiliency Specialist, who were linked to bereavement services.	No	Not Available	New in 2019	New in 2019	90%	90%

3. Maximize housing resources and target the most vulnerable District residents with serious behavioral health challenges who are homeless, returning from institutions or moving to more independent living to prevent and minimize homelessness. (1 Measure)

Measure	New Measure/ Benchmark Year	FY 2017 Actual	FY 2018 Target	FY 2018 Actual	FY 2019 Target	FY 2020 Target
Number of housing subsidies to individuals who are mentally ill and homeless	No	23	50	52	50	50

4. Heighten public awareness among District residents about mental health and substance use disorders and resources to increase their understanding of behavioral health, reduce stigma, and encourage prevention efforts and early identification and treatment. (3 Measures)

Measure	New Measure/ Benchmark Year	FY 2017 Actual	FY 2018 Target	FY 2018 Actual	FY 2019 Target	FY 2020 Target
Achieve a ten percent increase in website traffic over the previous fiscal year	No	Not Available	850,011	957,646	935,000	935,000
Achieve a twenty percent increase in social media hits (Facebook and Twitter) over baseline established in FY17 previous fiscal year	No	Not Available	146,834	750,100	176,201	176,201
Increase number of public events over baseline established in FY17.	No	Not Available	583	638	699	699

5. Create and maintain a highly efficient, transparent, and responsive District government. (9 Measures)

Measure	New Measure/ Benchmark Year	FY 2017 Actual	FY 2018 Target	FY 2018 Actual	FY 2019 Target	FY 2020 Target
Contracts and Procurement - Average number of calendar days between requisition and purchase orders issued	No	16.9	Not Available	Data Forthcoming	Not Available	Not Available
Contracts and Procurement - Percent of Small Business Enterprise (SBE) annual goal spent	No	101.8%	Not Available	Data Forthcoming	Not Available	Not Available
Financial Management - Percent of local budget de-obligated to the general fund at the end of year	No	5.5%	Not Available	Data Forthcoming	Not Available	Not Available
Financial Management - Quick Payment Act (QPA) Compliance - Percent of QPA eligible invoices paid within 30 days	No	Not Available	Not Available	Data Forthcoming	Not Available	Not Available
Human Resource Management - Average number of days to fill vacancy from post to offer acceptance	No	Not Available	New in 2019	New in 2019	New in 2019	Not Available
Human Resource Management - Percent of eligible employee performance evaluations completed and finalized in PeopleSoft	No	85.1%	Not Available	Data Forthcoming	Not Available	Not Available
Human Resource Management - Percent of eligible employees completing and finalizing a performance plan in PeopleSoft	No	Not Available	Not Available	91.5%	Not Available	Not Available
IT Policy and Freedom of Information Act (FOIA) Compliance - Percent of open data sets identified by the annual	No	Not Available	Not Available	27.3%	Not Available	Not Available

**5. Create and maintain a highly efficient, transparent, and responsive District government.
(9 Measures)**

Measure	New Measure/ Benchmark Year	FY 2017 Actual	FY 2018 Target	FY 2018 Actual	FY 2019 Target	FY 2020 Target
Enterprise Dataset Inventory published on the Open Data Portal						
IT Policy and Freedom of Information Act (FOIA) Compliance - Percent of FOIA Requests Processed in more than 25 business days - statute requirements allow 15 business days and a 10 day extension	No	16.7%	Not Available	Data Forthcoming	Not Available	Not Available

WORKLOAD MEASURES

Workload Measures, also called inputs or outputs, quantify an activity, effort or process that is necessary to make progress towards the Strategic Objectives. They help answer the question; “How much are we doing?”

1. Prevention interventions

Measure	New Measure/ Benchmark Year	FY 2016 Actual	FY 2017 Actual	FY 2018 Actual
Number of prevention activities by Prevention Centers	No	Not Available	656	546

2. Mental Health Services provided to adults

Measure	New Measure/ Benchmark Year	FY 2016 Actual	FY 2017 Actual	FY 2018 Actual
Number of adults receiving a non-Crisis/Emergency Mental Health Rehabilitation Service (MHRS)	No	Not Available	54,291	18,842
Number of adults receiving Health Home services	No	Not Available	1788	1984

3. Child/Youth Mental Health Services

Measure	New Measure/ Benchmark Year	FY 2016 Actual	FY 2017 Actual	FY 2018 Actual
Number of children and youth diverted from Psychiatric Residential Treatment Facilities	No	Not Available	244	53
Number of children receiving non-Crisis/Emergency MHRS	No	Not Available	10,900	3605
The number of individuals referred to Resiliency Specialist	No	Not Available	Not Available	New in 2019

4. Housing Services

Measure	New Measure/ Benchmark Year	FY 2016 Actual	FY 2017 Actual	FY 2018 Actual
Number of people moving out of Saint Elizabeths Hospital into community settings	No	Not Available	343	261

5. Communication Strategies

Measure	New Measure/ Benchmark Year	FY 2016 Actual	FY 2017 Actual	FY 2018 Actual
Number of communications including press announcements and social media (Facebook and Twitter)	No	Not Available	122,362	996,136
Number of public outreach events	No	Not Available	398	628

6. Consumer and Family Engagement

Measure	New Measure/ Benchmark Year	FY 2016 Actual	FY 2017 Actual	FY 2018 Actual
Number of Certified Peers employed in meaningful work	No	Not Available	344	423

7. Recovery Support Services

Measure	New Measure/ Benchmark Year	FY 2016 Actual	FY 2017 Actual	FY 2018 Actual
Number of active clients enrolled in Environmental Stability Services	No	Not Available	261	1
Number of individual clients in treatment services who are also enrolled in recovery services	No	Not Available	161	178

8. Substance Use Disorder Treatment Services for youth and adults

Measure	New Measure/ Benchmark Year	FY 2016 Actual	FY 2017 Actual	FY 2018 Actual
Number of individuals enrolled in treatment services	No	Not Available	11,384	4825
Number of individuals receiving an intake assessment	No	Not Available	9645	5881

9. Inpatient Psychiatric Services

Measure	New Measure/ Benchmark Year	FY 2016 Actual	FY 2017 Actual	FY 2018 Actual
Average daily census of forensic patients	No	Not Available	678	162
Average daily census of non-forensic patients	No	Not Available	392	102

10. Outreach Activities

Measure	New Measure/ Benchmark Year	FY 2016 Actual	FY 2017 Actual	FY 2018 Actual
Number of people visiting the SUD Mobile Assessment and Referral Center (MARC)	No	Not Available	898	2249

Performance Plan End Notes:

*For more information about the structure and components of FY 2020 draft performance plans, please see the FY 2020 Proposed Budget and Financial Plan, Volume 1, Appendix E.

**Key Performance Indicators that are new may not have historical data and may only have FY 2020 targets.

*** District wide measures for the objective "Create and maintain a highly efficient, transparent and responsive District government" have been introduced as part of FY 2019 and FY 2020 Performance Plans and will be reported by the Office of the City Administrator (OCA). FY 2019 and FY 2020 are pilot years for this initiative, therefore not all data are available.