

AGREEMENT

THIS AGREEMENT ("AGREEMENT") is made as of this 3rd day of December, 2018, by and among; VIRGINIA HOSPITAL CENTER, ARLINGTON HEALTH SYSTEM, a Virginia not-for-profit corporation ("VHC"); and the COUNTY BOARD OF ARLINGTON COUNTY, VIRGINIA, a body corporate and politic ("County"). VHC and County are collectively referred to as the "Parties" and each individually as a "Party".

RECITALS:

- R-1. VHC operates a not-for-profit hospital in Arlington County, Virginia, known as "Virginia Hospital Center".
- R-2. The County established the Arlington County Community Services Board ("CSB") in 1968 which sets policy for and assures the administration of the provision of mental health, developmental disabilities and substance use services by Arlington County fulfilling duties and responsibilities as set forth in §37.2-500 *et seq.* of the Code of Virginia (1950), as amended.
- R-3. The County designated the CSB as an "administrative policy community services board" as defined by Va. Code §37.2-500. Pursuant to this statutory designation and the August 13, 2018 Memorandum of Agreement between the CSB and the Arlington County Manager: i) the CSB is a citizen board appointed by the County Board of Arlington County; ii) the Arlington County Department of Human Services ("DHS") staff carries out the duties of the CSB; and iii) DHS and the CSB are charged with administering and monitoring matters relating to behavioral health in the community of Arlington County.
- R-4. DHS, the CSB and the Arlington Mental Health Alliance have identified a need within the community for assisting children and adolescents in psychiatric crises.
- R-5. As a result of the foregoing, the County and VHC have agreed to collaborate on a pilot program to encourage the diversion of youth from: (i) psychiatric hospitalization and repeated visits to the emergency room; (ii) residential treatment; and (iii) the Arlington County juvenile justice system, (the "Program").
- R-6. The Parties desire to set forth their understandings with regard to the Program as hereinafter set forth.

NOW THEREFORE, in consideration for the mutual promises set forth below, and other valuable consideration, the adequacy of which is hereby acknowledged, the parties agree as follows:

1. Incorporation. The Recitals hereinabove set forth are incorporated as a part of this AGREEMENT as if fully set forth herein.
2. Establishment of Program. The Parties agree in good faith to establish the Program in accordance with "Diversion First: A Pilot to Divert Arlington Youth with Behavioral Health Crises from Hospitalization," attached as Exhibit A to this AGREEMENT. (the "CSB

Memorandum”).

3. Financial Support. Provided that the County implements the Program, VHC agrees to contribute to the County for the purposes of defraying the cost of one qualified clinician to be hired by the County and other expenses of the Program, the total amount of Five Hundred Thousand and No/100 Dollars (\$500,000.00) (the “VHC Contribution”). The VHC Contribution shall be paid in five equal installments of One Hundred Thousand and No/100 Dollars (\$100,000.00) each, with the first One Hundred Thousand and No/100 Dollars (\$100,000.00) of the VHC Contribution to be made to the County by VHC within thirty (30) days from receipt by VHC of written notice from the County Manager, or his designee that the Program has begun implementation (the “Program Implementation Commencement Date”), following the initial One Hundred Thousand and No/100 (\$100,000.00) contribution, VHC shall continue its support of the Program by the contribution to the County for use in the Program, of the sum of One Hundred Thousand and No/100 Dollars (\$100,000.00) on each of the first, second, third and fourth anniversary dates of the Program Implementation Commencement Date.

4. Notices. Notice required or which may be given pursuant to this AGREEMENT shall be given to the other Party shall be in writing, and shall be delivered by United States certified mail, return receipt requested, with proper first-class postage prepaid, properly and fully addressed, as follows:

If to the County: County Manager
Arlington County
2100 Clarendon Boulevard, Suite 302
Arlington, Virginia 22201

With a copy to: Director, Department of Human Services
Arlington County
2100 Washington Blvd. Fourth Floor
Arlington, Virginia 22204

If to Virginia Hospital Center: President/CEO
Virginia Hospital Center
1701 N. George Mason Dr.
Arlington, Virginia 22205

With a copy to: Chief Legal Counsel
Virginia Hospital Center
1701 N. George Mason Dr.
Arlington, Virginia 22205

Notices shall be effective upon receipt, except in the case of notices sent by United States certified mail, return receipt requested, with proper first-class postage prepaid, notice shall be effective three (3) days after mailing.

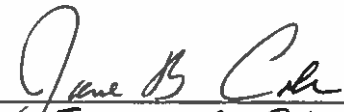
5. Cooperation. The Parties shall cooperate with each other in good faith in working toward the establishment of the Program consistent with the goals outlined in the CSB Memorandum.

6. Conditions Precedent to VHC's Obligations. The obligations of VHC under this AGREEMENT are effective thirty (30) days after the approval by the County of Rezoning Z 2606-18-1, Site Plan # 177 and Use Permit U-2203-79-3 or the conclusion of any appeal, whichever is later. If Site Plan #177 is not approved by the County by November 27, 2018, either Party may withdraw from this Agreement upon written notice to the other Party.

7. Binding Effect. This AGREEMENT shall be binding upon the Parties and shall be governed by the laws of the Commonwealth of Virginia.

WITNESS the following signatures.

VIRGINIA HOSPITAL CENTER, ARLINGTON
HEALTH SYSTEM, a Virginia not-for-profit
corporation

By: 
Name: JAMES B COLE
Title: CEO
Date: 11/12/18

[additional signature page to follow]

COUNTY

THE COUNTY BOARD OF ARLINGTON
COUNTY, VIRGINIA a body corporate and politic

By:
County Manager

Approved as to Form:

By:
County Attorney



DIVERSION FIRST: A Pilot to Divert Arlington Youth with Behavioral Health Crises from Hospitalization

Issue: Lack of Resources for Children in Crisis

Arlington Community Services Board (CSB), the Arlington Mental Health Alliance, and the Arlington community are concerned about the lack of resources for children and youth in psychiatric crisis. Many of these youths have emerging behavioral health issues of a complex nature. Over the past two fiscal years, Arlington CSB evaluated 477 adolescents for hospitalization resulting in 44 TDOs and 67 known voluntary admissions. In addition, Virginia Hospital Center (VHC) has an average of 15 youth per month waiting in the Emergency Department for medical screening and placement in a psychiatric bed for hours and sometimes days due to the scarcity of community-based emergency behavioral health interventions.

Objective: Divert Youth from Hospital/Residential Treatment/Juvenile Justice System

Virginia Hospital Center and the Arlington CSB will pilot a collaboration to divert Arlington youth from psychiatric hospitalization, residential treatment, and the juvenile justice system with targeted funding for a licensed clinician who will provide crisis services, pre-screening (if required) and intensive care coordination. The goal is to keep our target population in the community with their families by intervening at crisis points when youth present at VHC or the CSB's Crisis Intervention Center. This clinician will be skilled in de-escalation, assessing the family's strengths and needs; and identifying services for immediate intervention, if appropriate. Additionally, a key role for this professional will be to provide intensive care coordination to ensure that the family and youth receive wraparound services to prevent future crises. Youth (up to the age of 22) who are released from VHC after treatment for a behavioral health crisis will be eligible for this intensive care coordination, as well. The purpose for including this cohort is to avoid future hospitalizations.

Priority Population

- Arlington residents up to age 22 who present in the VHC ED with behavioral health concerns
- Non-Arlington residents who present in the VHC ED up to age 22 with behavioral health concerns
- Arlington youth referred to the CSB for assessment for psychiatric hospitalization
- Arlington youth at risk of residential placement due to behavioral health concerns
- Arlington youth at risk of penetration of the juvenile justice system due to behavioral health needs

EXHIBIT A

- Prioritization of those with the most serious behavioral presentation, most vulnerable and/or under-resourced
- VHC patients (up to age 22) who have been discharged after receiving treatment for a behavioral health issue.

Services

One licensed clinician will provide:

- pre-screening for children and youth;
- mobile de-escalation and crisis stabilization of child and family;
- intensive care coordination to include strengths/needs assessment and high-fidelity wraparound services;
- liaison between VHC, CSB and community resources;
- collaboration with CSB, VHC, the Pediatric Clinic, Children's Services Act (CSA) staff, APS, Court Services Unit, and other partners;
- collection of quantitative and outcome data to demonstrate the value of this intervention in preventing emergency room visits, among other desirable outcomes; and
- data shall be reported quarterly at meetings with VHC, CSB, Mental Health Alliance Partnership Group and other stakeholders.

Cost

- Estimated annual cost of a licensed clinician (salary + benefits) as of this date is \$122,000. VHC will pay \$100,000 annually for the period of the five-year pilot for a total of \$500,000, and the County will absorb any ancillary costs. The Clinician would be an Arlington County employee supervised by the CSB and housed in the Sequoia complex.

Anticipated Outcomes

- Diversion from VHC ED, residential treatment and juvenile justice
- Reduced length of stay when hospitalized
- School attendance/graduation
- Reduction in re-admissions to hospital, residential treatment
- Stabilization in community
- Return to family
- Improvement/stabilization of functioning as assessed by DLA-20 or another tool
- Zero suicide/ decreased aggressive behaviors
- Expedited medical screening when hospitalization required
- Family compliance of wraparound resources
- Youth/family/key stakeholder satisfaction with services and outcomes

EXHIBIT A

Evaluation of Success

- Quarterly review by VHC/CSB/Mental Health Alliance Partnership Group to include a person with lived experience
- Revision of pilot as needed and assessed by the Partnership Group
- Annual reports to the VHC Board, the CSB and the County Manager.

Advantages for Arlington and the Virginia Hospital Center

- Effective response to the needs of families who have children and youth with behavioral health needs
- Diversion of children and adolescents from VHC emergency department
- Early identification and intervention of emerging behavioral health needs
- A coordinated system of care for the target population and integration with existing services
- Affirmative response to the stated needs of the community.