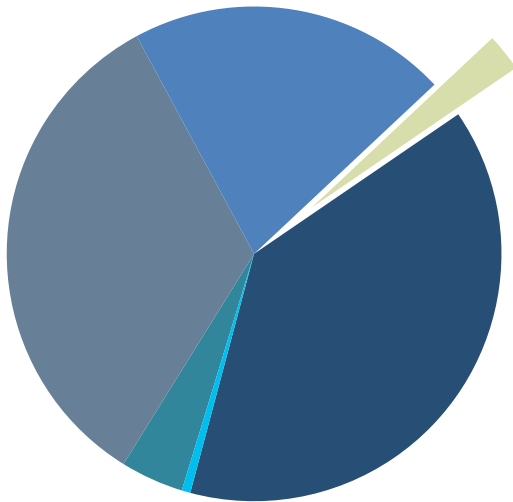


Mission Statement

The Department of Public Health (Public Health) is dedicated to promoting optimum wellness and a healthy environment. As the community's Chief Health Strategist, Public Health will work beyond traditional public health programs and services to build strong cross-sector community coalitions that address the social determinants of health to ensure health equity, and to make Prince William County the healthiest community in Virginia.



Human Services Expenditure Budget:
\$218,750,375

Expenditure Budget:
\$5,355,516



2.4% of Human Services

Programs:

- Maternal & Child Health: \$306,588
- General Medicine: \$3,396,044
- Environmental Health: \$915,209
- Administration/Emergency Preparedness: \$737,675

Mandates

Each year Prince William County enters into a Local Government Agreement with the Virginia Department of Health. Services rendered based on this agreement are provided by Public Health. State mandated services provided on behalf of Prince William County by Public Health includes childhood immunizations, pre-school physicals for school entry, rabies control, and vital records.

The Board of County Supervisors has enacted additional local mandates for which Public Health has responsibility.

State Code: [32.1-46](#) (Immunization of patients against certain diseases), [22.1-270](#) (Preschool physical examinations), [32.1](#) (Health) and [3.2-6562.1](#) (Rabies exposure; local authority and responsibility plan)

County Code: [Chapter 3](#) (Amusements), [Chapter 8](#) (Environmental Protection), [Chapter 10](#) (Concession Stands at Youth Activities), [Chapter 12](#) (Massage Establishments), [Chapter 22 Article I](#) (Refuse, In General), [Article II](#) (Refuse, Storage), [Article V](#) (Trash, Garbage, Refuse, Litter and Other Substances Health and Safety Menaces), [Chapter 23 Article III](#) (Individual Sewage Disposal Systems), [Chapter 25.1](#) (Swimming Pools, Spas and Health Clubs), [Chapter 30](#) (Water Supply)

Expenditure and Revenue Summary



Expenditure by Program	FY20 Actuals	FY21 Actuals	FY22 Actuals	FY23 Adopted	FY24 Proposed	% Change Budget FY23/ Budget FY24
Maternal & Child Health	\$309,685	\$1,205,691	\$309,685	\$309,685	\$306,588	(1.00%)
General Medicine	\$1,934,366	\$1,701,364	\$3,157,529	\$3,153,709	\$3,396,044	7.68%
Environmental Health	\$906,189	\$580,769	\$906,704	\$895,737	\$915,209	2.17%
Administration/Emergency Preparedness	\$167,009	\$163,685	\$242,932	\$503,727	\$737,675	46.44%
Total Expenditures	\$3,317,249	\$3,651,509	\$4,616,849	\$4,862,858	\$5,355,516	10.13%

Expenditure by Classification

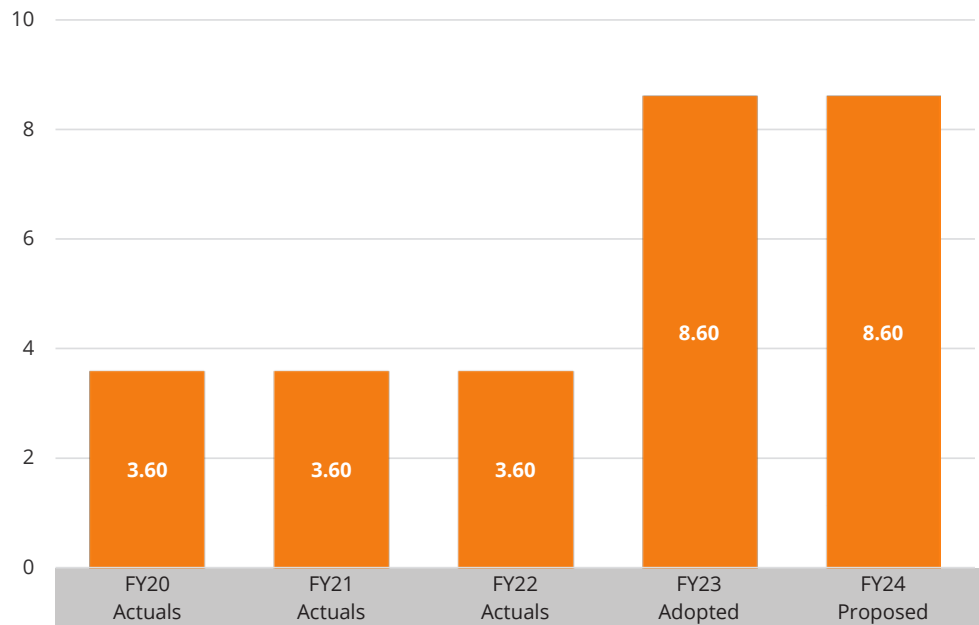
Salaries & Benefits	\$211,339	\$272,716	\$1,494,217	\$1,705,190	\$2,223,642	30.40%
Contractual Services	\$120	\$95	\$97	\$1,415	\$1,415	0.00%
Internal Services	\$46,587	\$42,363	\$49,037	\$61,008	\$60,560	(0.73%)
Purchase of Goods & Services	\$3,059,204	\$3,336,335	\$3,073,497	\$3,095,246	\$3,100,865	0.18%
Reserves & Contingencies	\$0	\$0	\$0	\$0	(\$30,966)	-
Total Expenditures	\$3,317,249	\$3,651,509	\$4,616,849	\$4,862,858	\$5,355,516	10.13%

Funding Sources

Permits & Fees	\$186,162	\$176,033	\$189,666	\$176,746	\$176,746	0.00%
Revenue from Other Localities	\$96,408	\$75,907	\$75,566	\$104,653	\$104,653	0.00%
Miscellaneous Revenue	\$0	\$127	\$71	\$0	\$0	-
Revenue from Commonwealth	\$311,286	\$515,472	\$815,269	\$303,397	\$303,397	0.00%
Total Designated Funding Sources	\$593,856	\$767,538	\$1,080,572	\$584,796	\$584,796	0.00%
Net General Tax Support	\$2,723,393	\$2,883,971	\$3,536,278	\$4,278,062	\$4,770,720	11.52%
Net General Tax Support	82.10%	78.98%	76.60%	87.97%	89.08%	

In FY21, \$896K was incorrectly coded to Maternal and Child Health program rather than General Medicine program.

Staff History by Program



	FY20 Actuals	FY21 Actuals	FY22 Actuals	FY23 Adopted	FY24 Proposed
Maternal & Child Health	0.00	0.00	0.00	0.00	0.00
General Medicine	3.00	3.00	3.00	3.00	3.00
Environmental Health	0.60	0.60	0.60	0.60	0.60
Administration/Emergency Preparedness	0.00	0.00	0.00	5.00	5.00
Full-Time Equivalent (FTE) Total	3.60	3.60	3.60	8.60	8.60

Future Outlook

Health Equity – A future public health workforce that will be more reflective of the health district’s population and include a skill base consistent with modern public health needs. To achieve health equity, Prince William Health District (PWHD) will strive to ensure that diversity, equity, and inclusion is at the center of public health initiatives and continue to convene multi-sector community partners with this same goal as the PWHD cannot address health equity alone.

Collective Impact – PWHD continues to assume the role of the convener by working closely with multi-sector public, private and nonprofit sectors to drive more public health innovation and modernization as well as ensuring health equity.

Communication and Emerging Public Health Issues – As evident over the last few years and consistent with world globalization, PWHD will continue to actively prepare for and respond to emerging diseases and public health threats to the community. PWHD continues to acknowledge the importance of communicating and demonstrating to others the value of public health investment, and the benefits of including community members in developing effective communication strategies.

General Overview

- A. FY23 Public Health Funding** – The Commonwealth of Virginia partners with localities to provide public health services through a cooperative arrangement. Currently, the cooperative budget is funded 55% by state funds and 45% by Prince William County (PWC) matching funds. The County enters into an annual agreement with the Virginia Department of Health to provide the 45% funding necessary to operate Public Health. The County also provides local support above the match amount for certain local optional services. In FY23, state funding for Public Health was \$2,894,766 and the County match funding was \$2,368,445. The County also provided an additional \$2,494,413 in local expenditure budget support for staffing, local salary supplement, operations, and community partnerships above the amount included in the annual agreement. The cities of Manassas and Manassas Park provide reimbursement to the County for services rendered based on a shared services agreement with the County. Total FY23 state and County budgeted expenditures for the Public Health were \$7,757,624, with the County providing a total of \$4,862,858.
- B. Local Salary Supplement for PWHD State Employees** – In the FY2022 Budget, PWHD state employees received a 20% local salary supplement. The supplement continues in the Proposed FY2024 Budget for PWHD’s 101 state employees. The proposed local salary supplement is \$1,376,936 – a \$226,936 increase from the FY2023 Budget based on a proposed 7% salary increase included in state budget proposals. The County’s 20% local salary supplement remains unchanged. The intent of the local salary supplement is to assist PWHD with retention and recruitment in the Northern Virginia labor market.

Program Summary

Maternal & Child Health

The Maternal & Child Health program improves the health of women and children in the PWHD by assessing their needs and assuring that quality services are accessible. PWHD accomplishes this through program monitoring and evaluation, public and customer education, consultation and training, and building and maintaining public/private partnerships. Integration of substance use and depression screening into PWHD clinical services helps to ensure healthy birth outcomes and improves women’s health. The Women, Infants and Children (WIC) program is provided through non-local funding. These services assure the implementation of evidence-based practices, as well as capacity building and strengthening of the local infrastructure to meet the health needs of women and children. The client base for this program is the population at large.

Key Measures	FY20 Actuals	FY21 Actuals	FY22 Actuals	FY23 Adopted	FY24 Proposed
Infant deaths per 1,000 live births	3.8	5.1	4.6	4.5	4.5
Infant deaths per 1,000 live births (Black, non-hispanic)	-	12.3	9.3	7.5	7.5

Program Activities & Workload Measures <i>(Dollar amounts expressed in thousands)</i>	FY20 Actuals	FY21 Actuals	FY22 Actuals	FY23 Adopted	FY24 Proposed
Women's Wellness & WIC	\$310	\$1,206*	\$310	\$310	\$307
Women seen in EWL cancer screening program	-	-	-	-	90
Women served in women's wellness clinics	384	84	165	200	-
Participants in the WIC program at the end of the fiscal year	7,456	8,381	8,938	8,400	8,900
Overweight participant children (age 2 yrs - 5 yrs) % children ≥ 85th percentile	-	-	NR	20%	20%

*In FY21, \$896K was incorrectly coded to Maternal and Child Health program rather than General Medicine Program. During COVID-19 pandemic certain programs were moved to virtual meetings, the data for the Overweight participant children (age 2 yrs - 5 yrs) % children ≥ 85th percentile measure was not collected in the virtual meeting, in person meetings are expected to resume in the Spring of 2023.

Public Health

General Medicine

The General Medicine program improves the health of all residents in the community by monitoring, investigating, controlling, and reporting the spread of communicable diseases including tuberculosis (TB), vaccine preventable diseases, sexually transmitted infections (STI), and other communicable diseases, especially emerging diseases of public health significance. PWHC collaborates with community partners to assess and address environmental strategies, and system changes that will prevent chronic diseases, encourage healthy lifestyles, and improve access to care for persons with health disparities. The district works with community healthcare providers to ensure the proper treatment of communicable disease such as STIs and TB. PWHC works with County agencies and community partners to ensure that persons requiring nursing home placement or in-home personal care services are screened and referred to the appropriate service. The client base for this program is the entire population of the PWHC.

Key Measures	FY20 Actuals	FY21 Actuals	FY22 Actuals	FY23 Adopted	FY24 Proposed
Pre-admission nursing home screenings completed within 30 days	92%	95%	60%	90%	90%
Patients completing tuberculosis preventive therapy treatment	89%	81%	68%	90%	90%
Vaccine-preventable disease cases per 100,000 population	14	2	6	10	10
Non-vaccine preventable reportable conditions/100,000 population	98	5,536	8,876	100	1,000
Diagnosed chlamydia cases/100,000 population	548	418	419	500	500
Diagnosed gonorrhea cases/100,000 population	89	96	102	90	100
Diagnosed syphilis cases/100,000 population	-	-	11	15	15
Newly diagnosed HIV cases per 100,000 population	12	9	8	-	-

Program Activities & Workload Measures <i>(Dollar amounts expressed in thousands)</i>	FY20 Actuals	FY21 Actuals	FY22 Actuals	FY23 Adopted	FY24 Proposed
Sexually Transmitted Disease	\$247	\$247	\$247	\$247	\$245
Persons seen for sexually transmitted disease services	511	275	374	500	500
Other Communicable Disease Services	\$1,398	\$1,234	\$2,679	\$2,665	\$2,907
Patients receiving tuberculosis preventive therapy	84	25	58	100	100
Suspected tuberculosis follow-ups	69	20	143	100	100
Reportable conditions investigated	1,690	34,306	62,398	2,000	2,000
Private provider reports of positive STI's for review and follow-up	866	2,926	2,843	3,000	3,000
Chronic Disease Services	\$116	\$115	\$116	\$116	\$115
Persons screened for nursing home pre-admission and personal care services	631	672	785	700	700
Primary Health Care Services	\$173	\$105	\$115	\$125	\$129
Clients served by community partners	2,732	801	906	828	825

In FY21, \$896K was incorrectly coded to Maternal and Child Health program rather than General Medicine Program.

Public Health

Environmental Health

The Environmental Health program enforces state and local codes and regulations designed to protect the public health and safety of all residents of and visitors to the Prince William area. This is accomplished by enforcing regulations pertaining to food, food establishments, day care facilities, hotels, summer camps, campgrounds, swimming pools, private wells, on-site sewage disposal systems, and other environmental health laws. Regulatory activities include permitting, inspections, testing, monitoring, and legal action when voluntary compliance is not achieved. Due to Virginia code changes, the onsite staff will spend more time on community assessment, field inspections, quality assurance, and programmatic oversight of existing onsite sewage systems, public health outreach, education, and enforcement.

Key Measures	FY20 Actuals	FY21 Actuals	FY22 Actuals	FY23 Adopted	FY24 Proposed
The number of foodborne illness complaints in PWC investigated	41	34	57	75	75
Septic tank owners in compliance with Chesapeake Bay Preservation Act	78%	79%	81%	80%	83%
On-site sewage applications completed within 15 days	91%	94%	93%	95%	95%
Founded health and safety menaces corrected	95%	95%	90%	95%	95%
Humans potentially exposed to rabies	1,072	954	989	1,100	1,100
Swimming pools in compliance with County code requirements	90%	90%	95%	90%	95%

Program Activities & Workload Measures <i>(Dollar amounts expressed in thousands)</i>	FY20 Actuals	FY21 Actuals	FY22 Actuals	FY23 Adopted	FY24 Proposed
On-site Sewage System Permits and Maintenance	\$268	\$152	\$268	\$264	\$282
New on-site sewage applications completed	208	232	363	255	275
Septic tank pump-outs assured	11,217	11,578	11,950	11,700	12,500
Water Supply Protection	\$64	\$64	\$64	\$64	\$64
Number of new well applications	-	-	-	-	50
Inspection Services	\$429	\$240	\$429	\$423	\$426
Food establishment inspections	1,123	520	783	2,100	2,100
Swimming pool inspections	258	170	198	300	300
Environmental Complaint Investigations	\$95	\$74	\$95	\$94	\$94
Total environmental complaints investigated	257	107	101	300	300
Rabies Control	\$50	\$50	\$50	\$50	\$50
Animal quarantines completed	967	835	1,117	1,000	1,100

Public Health

Administration/Emergency Preparedness

The Administration/Emergency Preparedness program integrates state, regional, and local jurisdictions' public health emergency preparedness plans to respond to terrorism and other public health threats to include pandemics. In addition, this program supports the ability of hospitals and health care systems to prepare for and respond to bioterrorism and other public health and health care emergencies, in particular by having a robust cache of Medical Reserve Corp volunteers. The client base for this program is comprised of all residents of PWC and the Cities of Manassas and Manassas Park.

Key Measures	FY20 Actuals	FY21 Actuals	FY22 Actuals	FY23 Adopted	FY24 Proposed
Community events during which all hazards preparedness education is provided*	25	NR	2	15	15
Customers reporting that they received the information or services they needed*	98%	NR	99%	98%	98%

*Public Health did not hold community events or administer surveys for the customers to give feedback on information received during FY21 due to the COVID-19 pandemic.

Program Activities & Workload Measures <i>(Dollar amounts expressed in thousands)</i>	FY20 Actuals	FY21 Actuals	FY22 Actuals	FY23 Adopted	FY24 Proposed
Leadership and Management Oversight/Emergency Preparedness	\$167	\$164	\$243	\$504	\$738
Deployable Medical Reserve Corps volunteers	819	1,100	1,023	1,100	1,100
Emergency response exercises conducted in collaboration with outside partners	2	0	0	4	2