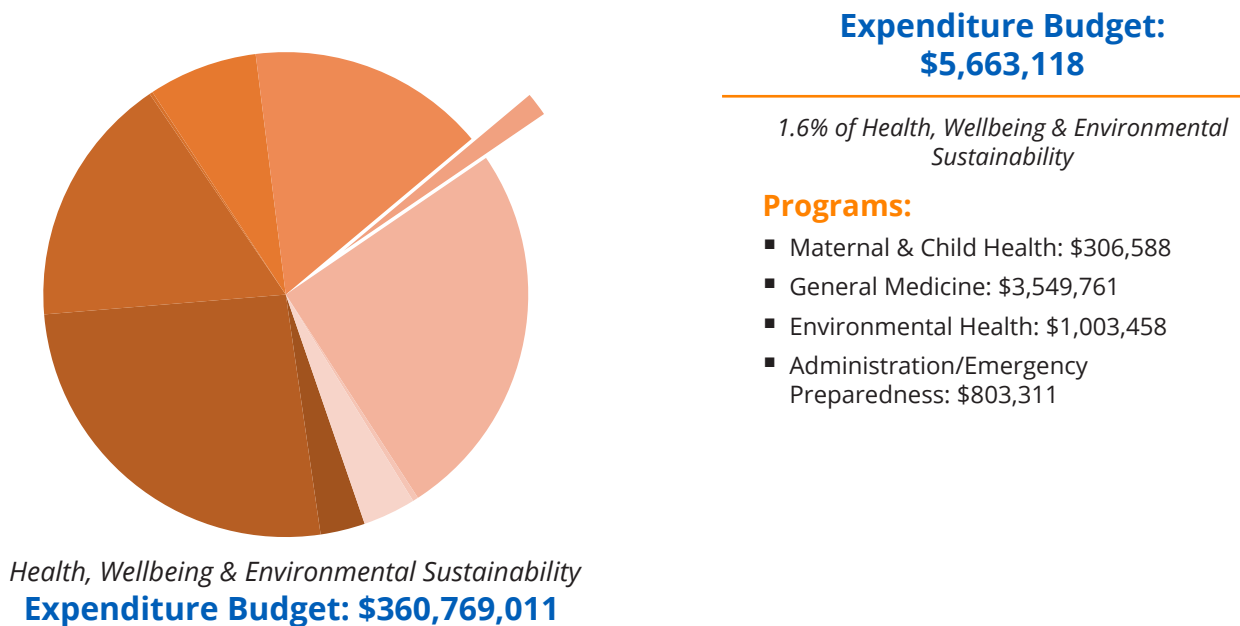


Public Health

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.



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), [35.1-14](#) (Regulations governing restaurants; advisory standards for exempt entities)

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	FY22 Actuals	FY23 Actuals	FY24 Actuals	FY25 Adopted	FY26 Adopted	% Change Budget FY25/ Budget FY26
Maternal & Child Health	\$309,685	\$309,685	\$309,685	\$306,588	\$306,588	0.00%
General Medicine	\$3,157,529	\$3,008,905	\$3,235,625	\$3,542,657	\$3,549,761	0.20%
Environmental Health	\$906,704	\$905,420	\$913,162	\$904,297	\$1,003,458	10.97%
Administration/Emergency Preparedness	\$242,932	\$264,648	\$282,960	\$267,484	\$803,311	200.32%
Total Expenditures	\$4,616,849	\$4,488,658	\$4,741,432	\$5,021,026	\$5,663,118	12.79%

Expenditure by Classification

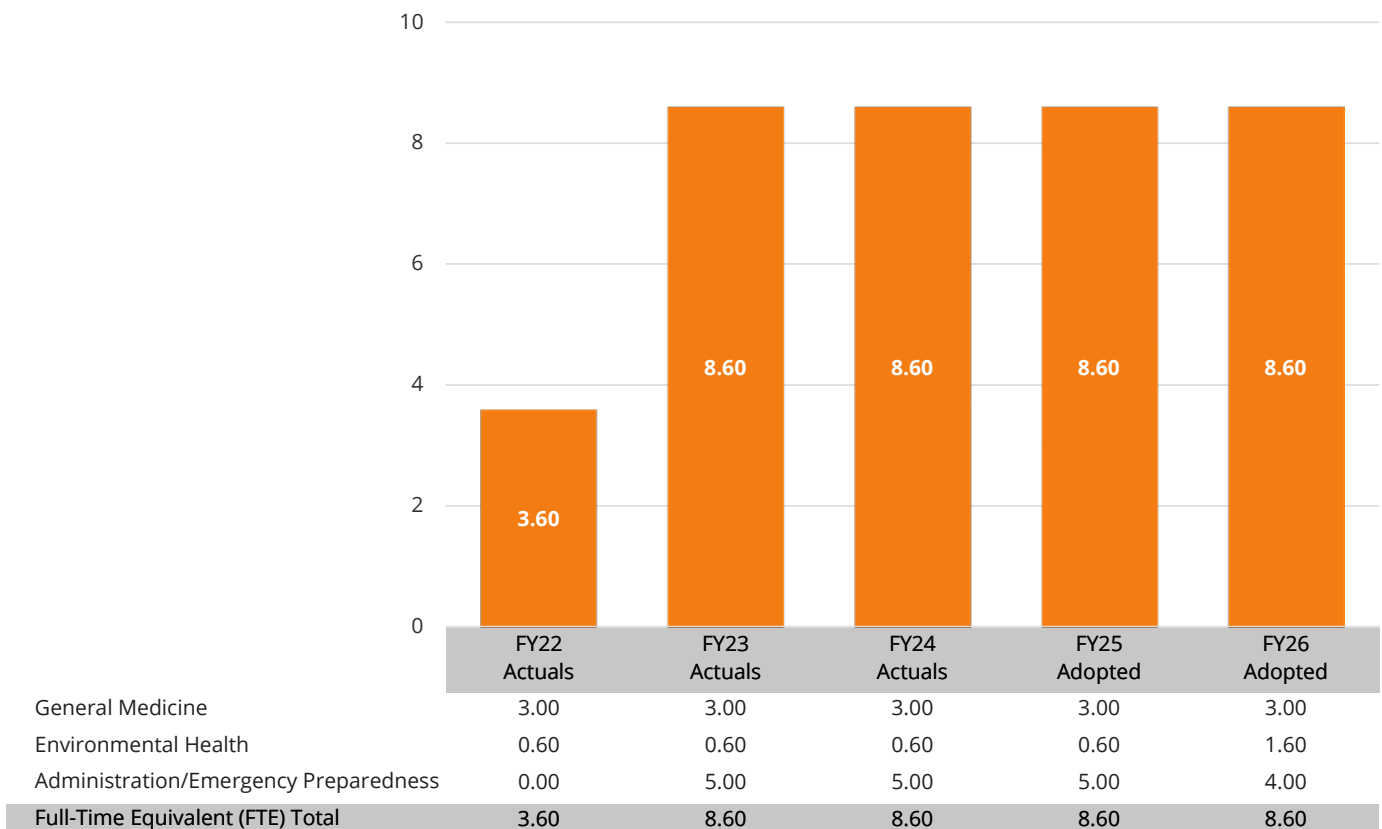
Salaries & Benefits	\$1,494,217	\$1,338,530	\$1,562,023	\$1,885,612	\$2,486,666	31.88%
Contractual Services	\$97	\$95	\$94	\$1,415	\$1,415	0.00%
Internal Services	\$49,037	\$78,633	\$80,049	\$60,560	\$60,560	0.00%
Purchase of Goods & Services	\$3,073,497	\$3,071,401	\$3,099,266	\$3,104,405	\$3,145,443	1.32%
Reserves & Contingencies	\$0	\$0	\$0	(\$30,966)	(\$30,966)	0.00%
Total Expenditures	\$4,616,849	\$4,488,658	\$4,741,432	\$5,021,026	\$5,663,118	12.79%

Funding Sources

Permits & Fees	\$189,666	\$208,208	\$151,520	\$176,746	\$176,746	0.00%
Revenue from Other Localities	\$75,566	\$104,650	\$111,588	\$115,052	\$118,771	3.23%
Miscellaneous Revenue	\$71	\$5	\$20	\$0	\$0	-
Revenue from Commonwealth	\$815,269	\$822,979	\$297,650	\$403,397	\$403,397	0.00%
Total Designated Funding Sources	\$1,080,572	\$1,135,842	\$560,778	\$695,195	\$698,914	0.53%
Net General Tax Support	\$3,536,278	\$3,352,816	\$4,180,654	\$4,325,831	\$4,964,204	14.76%
Net General Tax Support	76.60%	74.70%	88.17%	86.15%	87.66%	



Staff History by Program



Future Outlook

Prevention, Education, and Outreach – One of the core tenants of public health is prevention. The Prince William Health District (PWHD) seeks to prevent disease and create a healthy environment by engaging with the community through a variety of channels, be they social media, in-person events or engagement with community partners. Education and outreach are key elements in the effort to create a healthy environment and prevent negative health outcomes. The county's growing population has increased the demand for such services and will require increased support for outreach and education.

Community Health Assessment – The PWHD is working with a variety of community partners and health care providers to create an assessment of current health needs in the community. A community health assessment gives organizations comprehensive information about the community's current health status, needs, and issues. This information can help develop a community health improvement plan by justifying how and where resources should be allocated to best meet community needs. This information generated by the plan will be shared with key stakeholders, local government and the community at large.

Increasing Demand for Services – Population growth is creating increased demand for services. Growth in the restaurant sector has created an increase in the number of inspections performed per annum, with a 11.7% increase year over year and a 35.7% increase from FY20 to FY23. The demand for long-term care screenings has also increased approximately 26% over the same period.

Loss of COVID-era Federal Funding – The loss of federal funding from Covid relief and prevention efforts will eliminate critical positions and hinder the district's ability to respond to not only sudden or severe public health emergencies, but also routine public health functions. The loss of the Community Outreach Team will decrease the district's ability to utilize the Mobile Clinic Unit to address the needs of diverse and geographically isolated populations. The outreach team was

instrumental in providing services to school age children who were not able to attend school due to their immunization status.

Data Driven – PWHD is striving to create a system that allows staff to harness the power of new types of data, and to think and act in systems perspective so that PWHD may address environmental, economic, and social determinants of health faster and relay information to partners in a meaningful way.

General Overview

- A. FY2025 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 PWHD. The County also provides local support above the match amount for certain local optional services. In FY25, state funding for PWHD was \$3,134,331 and the County match funding was \$2,564,453. The County also provided an additional \$2,456,573 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 FY25 state and County budgeted expenditures for PWHD were \$8,155,357, with the County providing a total of \$5,021,026.
- B. Local Salary Supplement for PWHD State Employees** – Beginning in FY22, PWHD state employees received a 20% local salary supplement, and the supplement continues in the FY2026 Budget for 104 state employees. The local salary supplement is \$1,543,511 which is a \$56,200 increase from FY25 based on a 3% anticipated state salary increase. 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.
- C. Revenue Increase for Shared Services (City) Billings** – The billings represent reimbursement from the City of Manassas and Manassas Park for services rendered in the previous year. Services rendered include activities within all functional areas except for Government Operations, Performance & Innovation. Amounts are calculated using the Consumer Price Index for All Urban Consumers (CPI-U) for the Washington-Arlington-Alexandria area (2024 CPI-U increased 3.2%). As a result of the annual report, the PWHD allocation increased \$3,718.

Budget Initiatives

A. Budget Shifts

1. Shift Existing Public Health Positions for Community Health Outreach – Administration/Emergency Preparedness and Environmental Health

Position Shift Value	\$575,811
Agency Impact	\$0
FTE Position	0.00

- a. Description** – On October 20, 2020, the Board of County Supervisors issued [BOCS Directive 20-83](#) to explore creating a County-operated Public Health Department. During a [budget work session](#) on March 8, 2022, a transition model was presented, proposing five new County positions, partially funded in FY23 and fully in FY24. However, funding for these positions was frozen in FY25 since the transition to a County operated Public Health Department could not be completed as reflected in the Public Health budget documents. The FY2026 Budget shifts the five existing Public Health positions to sustain community outreach efforts initiated with federal pandemic relief funding which will be exhausted in June 2025. Four positions (3.00 Senior Education and Outreach Instructors and 1.00 Administrative Coordinator) will continue the community health outreach team, allowing for ongoing education and immunization partnerships with schools. Last spring, 2,337 students were vaccinated, and without this initiative, community engagement will decline. Additionally, one Senior Code Inspector position will support the Environmental Health program, enforcing health codes amid the food industry's growth in the County.
- b. Service Level Impacts** – This initiative supports several community campaigns and partnerships on social determinants of health that work to increase prevention, provide education, and reduce stigma towards obtaining treatment and services.

Public Health

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	FY22 Actuals	FY23 Actuals	FY24 Actuals	FY25 Adopted	FY26 Adopted
Infant deaths per 1,000 live births	4.6	5.1	4.6	4.5	4.5
Infant deaths per 1,000 live births (Black, non-hispanic)	9.3	7.6	8.6	7.5	7.5

Program Activities & Workload Measures (Dollar amounts expressed in thousands)	FY22 Actuals	FY23 Actuals	FY24 Actuals	FY25 Adopted	FY26 Adopted
Women's Wellness & WIC	\$310	\$310	\$310	\$307	\$307
Women seen in EWL cancer screening program	-	-	74	150	150
Participants in the WIC program at the end of the fiscal year	8,938	7,983	8,221	8,900	8,900
Overweight participant children (age 2 yrs - 5 yrs) % children ≥ 85th percentile	-	-	5%	20%	20%

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. PWHd 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 diseases such as STIs and TB. PWHd 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 PWHd.

Key Measures	FY22 Actuals	FY23 Actuals	FY24 Actuals	FY25 Adopted	FY26 Adopted
Pre-admission nursing home screenings completed within 30 days	60%	34%	74%	50%	90%
Patients completing tuberculosis preventive therapy treatment	68%	85%	83%	90%	90%
Vaccine-preventable disease cases per 100,000 population	6	11	6	10	10
Non-vaccine preventable reportable conditions/100,000 population	8,876	83	132	100	100
Diagnosed chlamydia cases/100,000 population	419	404	401	450	450
Diagnosed gonorrhea cases/100,000 population	102	102	125	100	100
Diagnosed syphilis cases/100,000 population	11	12	16	15	15

Public Health

Program Activities & Workload Measures (Dollar amounts expressed in thousands)	FY22 Actuals	FY23 Actuals	FY24 Actuals	FY25 Adopted	FY26 Adopted
Sexually Transmitted Disease	\$247	\$247	\$247	\$245	\$245
Persons seen for sexually transmitted disease services	374	577	575	600	600
Other Communicable Disease Services	\$2,679	\$2,533	\$2,747	\$3,050	\$3,057
Patients receiving tuberculosis preventive therapy	58	45	148	100	100
Suspected tuberculosis follow-ups	143	88	225	100	100
Reportable conditions investigated	62,398	29,748	1,711	2,000	2,000
Private provider reports of positive STI's for review and follow-up	2,843	2,509	3,105	3,000	3,000
Chronic Disease Services	\$116	\$116	\$116	\$115	\$115
Persons screened for nursing home pre-admission and personal care services	785	961	1,124	1,000	1,150
Primary Health Care Services	\$115	\$112	\$125	\$133	\$133
Clients served by community partners	906	523	831	500	700

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	FY22 Actuals	FY23 Actuals	FY24 Actuals	FY25 Adopted	FY26 Adopted
The number of foodborne illness complaints in PWC investigated	57	69	79	100	90
Septic tank owners in compliance with Chesapeake Bay Preservation Act	81%	83%	80%	85%	85%
On-site sewage applications completed within 15 days	93%	85%	94%	95%	95%
Founded health and safety menaces corrected	90%	95%	90%	95%	95%
Humans potentially exposed to rabies	989	1,108	1,149	1,150	1,175
Swimming pools in compliance with County code requirements	95%	95%	90%	95%	95%

Public Health

Program Activities & Workload Measures (Dollar amounts expressed in thousands)	FY22 Actuals	FY23 Actuals	FY24 Actuals	FY25 Adopted	FY26 Adopted
On-site Sewage System Permits and Maintenance	\$268	\$264	\$270	\$271	\$370
New on-site sewage applications completed	363	462	285	300	325
Septic tank pump-outs assured	11,950	12,496	12,118	12,900	12,500
Water Supply Protection	\$64	\$64	\$64	\$64	\$64
Number of new well applications	-	-	65	100	120
Inspection Services	\$429	\$429	\$431	\$426	\$426
Food establishment inspections	783	1,261	1,357	2,100	1,500
Swimming pool inspections	198	240	347	350	400
Environmental Complaint Investigations	\$95	\$98	\$97	\$94	\$94
Total environmental complaints investigated	101	121	166	200	220
Rabies Control	\$50	\$50	\$50	\$50	\$50
Animal quarantines completed	1,117	831	787	1,100	800

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	FY22 Actuals	FY23 Actuals	FY24 Actuals	FY25 Adopted	FY26 Adopted
Community events during which all hazards preparedness education is provided	2	10	51	17	60
Customers reporting that they received the information or services they needed	99%	99%	99%	99%	99%

Program Activities & Workload Measures (Dollar amounts expressed in thousands)	FY22 Actuals	FY23 Actuals	FY24 Actuals	FY25 Adopted	FY26 Adopted
Leadership and Management Oversight/Emergency Preparedness	\$243	\$265	\$283	\$267	\$803
Deployable Medical Reserve Corps volunteers	1,023	1,019	959	1,100	1,000
Emergency response exercises conducted in collaboration with outside partners	-	20	9	20	20
Community outreach (number of events)	-	-	-	-	90
Onsite school immunizations (number of children seen)	-	-	-	-	2,400