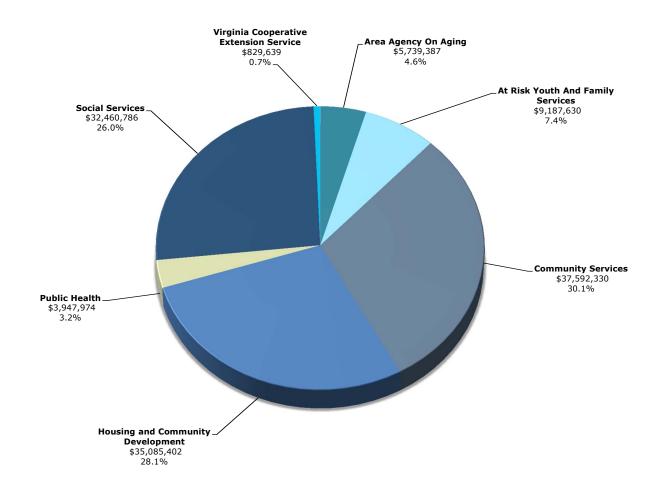


HUMAN SERVICES





Human Services Expenditure Budget: \$124,843,148



Average Tax Bill: Human Services accounted for \$174 and 4.9% of the average residential tax bill in FY 15.

DEPARTMENTS & AGENCIES

- > Area Agency on Aging
- ➤ At-Risk Youth & Family Services
- **➤** Community Services
- ➤ Housing & Community Development
- ➤ Public Health

- ➤ Social Services
- ➤ Virginia Cooperative Extension



2013-2016 STRATEGIC PLAN



Human Services

Goal Statement: The County will provide human services to individuals and families most at risk, through innovative and effective leveraging of state and federal funds and community partnerships.

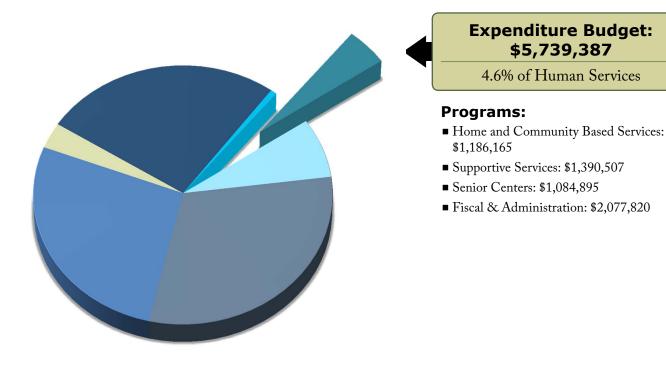
	FY 15 Budget Targets
State hospitalization of seriously mentally ill individuals per 100,000 population	≤175
Permanent placement of foster children	38%
TANF participants engaged in work activities	51%
Reoccuring cases of child abuse	1.05%
Reoccuring cases of adult abuse	5%
Point-in-time homeless count	410
Satisfaction with Aging's ability to help people stay in their homes	98%
Employment placements for special education students after graduation	>45.5%
90 day turnaround rate for mentally ill and/or substance abusing youth in residential placements	62%
Day support and training placements for individuals with autism	175
Clients served by community partners and contractual agreements	65,667
Volunteer hours provided to support human service agencies	28,279





Mission Statement

The Area Agency on Aging will empower independence and enhance the quality of life and enjoyment of aging by offering a supportive network for older persons and their family caregivers through advocacy, education, coordination and implementation of programs and services in the tri-jurisdictional area.



Human Services Expenditure Budget \$124,843,148

Mandates

The Area Agency on Aging does not provide a state or federal mandated service. Some federal grants require certain activities be performed; however, these are not considered mandates since the County is not obligated to accept the grant funding.

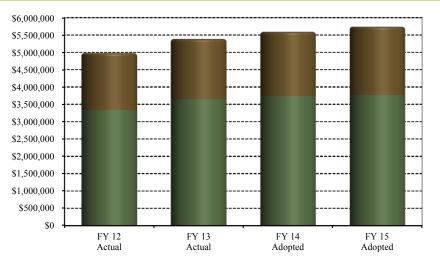




Expenditure and Revenue Summary

					% Change
	FY 12	FY 13	FY 14	FY 15	Adopt 14/
Expenditure by Program	Actual	Actual	Adopted	Adopted	Adopted 15
1 Home and Community Based Services	\$926,952	\$1,146,197	\$1,185,225	\$1,186,165	0.08%
2 Supportive Services	\$831,047	\$880,555	\$1,358,750	\$1,390,507	2.34%
3 Senior Centers	\$768,735	\$796,036	\$1,071,303	\$1,084,895	1.27%
4 Fiscal & Administration	\$2,042,391	\$2,464,815	\$1,975,150	\$2,077,820	5.20%
Total Expenditures	\$4,569,125	\$5,287,603	\$5,590,428	\$5,739,387	2.66%
Expenditure by Classification					
1 Personal Services	\$1,481,158	\$1,557,100	\$1,685,555	\$1,761,882	4.53%
2 Fringe Benefits	\$392,592	\$455,933	\$481,100	\$477,715	-0.70%
3 Contractual Services	\$1,804,882	\$2,053,310	\$2,061,070	\$2,128,403	3.27%
4 Internal Services	\$126,986	\$176,945	\$132,445	\$140,439	6.04%
5 Other Services	\$688,023	\$924,342	\$1,219,258	\$1,219,948	0.06%
6 Capital Outlay	\$0	\$98,139	\$0	\$0	0.00%
7 Leases & Rentals	\$8,225	\$10,048	\$11,000	\$11,000	0.00%
8 Transfers	\$67,259	\$11,786	\$0	\$0	0.00%
Total Expenditures	\$4,569,125	\$5,287,603	\$5,590,428	\$5,739,387	2.66%
Funding Sources					
1 Revenue from Use of Money and Property	\$2,779	\$2,000	\$250	\$2,250	800.00%
2 Charges for Services	\$232,336	\$206,186	\$199,500	\$199,500	0.00%
3 Miscellaneous Revenue	\$53,456	\$39,409	\$43,586	\$44,586	2.29%
4 Revenue From Other Localities	\$401,304	\$319,572	\$170,852	\$300,577	75.93%
5 Revenue From Commonwealth	\$221,524	\$316,334	\$313,618	\$326,668	4.16%
6 Revenue From Federal Government	\$700,124	\$820,400	\$1,094,845	\$1,065,444	-2.69%
7 Non-Revenue Receipts	\$1,496	\$242	\$0	\$0	0.00%
8 Transfers In	\$29,000	\$24,000	\$24,000	\$24,000	0.00%
Total Designated Funding Sources	\$1,642,019	\$1,728,143	\$1,846,651	\$1,963,025	6.30%
Net General Tax Support	\$3,339,501	\$3,656,755	\$3,743,777	\$3,776,362	0.87%
Net General Tax Support	73.09%	69.16%	66.97%	65.80%	

Expenditure History







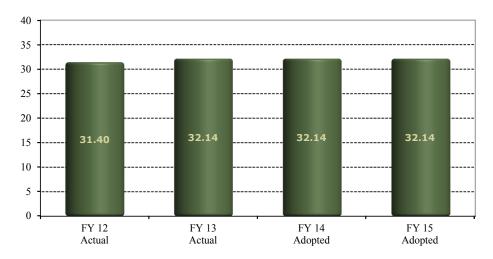




Staffing History







Staffing by Program



	FY 12	FY 13	FY 14	FY 15
	Actual	Actual	Adopted	Adopted
1 Home and Community Based Services	8.95	8.95	8.95	8.95
2 Supportive Services	6.58	6.58	6.78	6.78
3 Senior Centers	10.42	10.96	10.96	10.96
4 Fiscal & Administration	5.45	5.65	5.45	5.45
Full-Time Equivalent (FTE) Total	31.40	32.14	32.14	32.14

Future Outlook

People are Living Longer - The average life expectancy from birth today is 78.7 years. If one lives to be 65, life expectancy is 84 and if one lives to be 75, life expectancy is 87. This means that people who retire at 65 will live another 20.5 years on average. This will bring various demands from recreational opportunities to job training as persons over 65 desire to remain in or return to the workforce for both economic and personal reasons. While many of the growing older population will be healthier and wealthier than previous generations of older adults, there will be a greater divide between the healthy and wealthy and the health-compromised with low income (source: Centers for Disease Control). In order for this more complex group to stay in the community, they will need more coordinated services between acute care, provided by medical professionals, and long term services and supports provided by the Agency on Aging.

More Significant Needs of the Very Old - Persons over the age of 85 are the oldest cohort of older adults. This segment of the population is the fastest growing in America. The ability to live in the community with chronic disease(s) will be the biggest challenge as the service model for long term services and supports shifts from the current institutional model to more personal choice, which includes living in the community. We will see longer waiting lists for Adult Day Healthcare, in-home personal care and Meals on Wheels to include special diet needs. Transportation and family







caregiver support needs will also stress the current system. Alzheimer's disease, the aging of persons with intellectual/developmental disabilities and the aging of their caregivers will require more multi-disciplinary approaches and the synthesis of expertise.

The increase in the older adult population and the desire of all persons with disabilities to live in the community will most likely bring an increase in abuse and possibly more social isolation.

All County departments will be affected by the demographic shift and service silos will have to be removed as multiple departments serve the same customer. Agency on Aging, Social Services, Community Services, Fire & Rescue, Housing & Community Development, Public Health District, and community partners can all be providing services to the same person. The ability to coordinate service, share data and keep it as simple as possible for the customer will require increased communication and referral through *No Wrong Door*.

Coordination, Information & Referral - The coordination between health care providers and the Agency's long term services and supports will be critical, as will improving the local Human Services information and referral system so that people can receive current, appropriate information immediately and in a seamless manner. This No Wrong Door Initiative needs to serve persons of all ages who need long term services and supports. It is important to recognize that when a person needs long term services and supports, their age is less important than their functional ability. Long term services, support systems and referral protocols do not need to be redundant and fractured.

Social and Recreational Needs - Prince William will have to determine how best to serve the social and recreational needs of a changing population of older adults. The new generation of older adults may likely seek recreational centers that serve a mix of ages and offer more choices for physical and mental well-being over traditional Senior Centers for socialization. As the County's Senior Centers age, this is an issue that must be considered. Meals in a congregate setting, as required by the Older Americans Act, are currently provided in the Senior Centers and may need to be provided differently and separately from recreational centers.

General Overview

- A. Internal Service Fund (ISF) Technology Billing The County allocates all technology costs to agencies through an ISF. The Department of Information Technology (DoIT) annually recalculates each agency's ISF bill, using the approved cost bases for each technology activity. Technology activities include phone, radio and computer support, business systems support, GIS, web services, capital equipment and administration. In FY 15, Aging's technology bill increased by \$7,994 to \$110,360.
- **B.** Compensation Adjustment The County uses a budget control measure known as salary lapse in all general fund agencies with more than 20 employees. Salary lapse reduces employee compensation to account for turnover and the associated savings when longer term employees are replaced by individuals coming in at lower points on the pay scale. The amount of anticipated savings allocated to each agency is directly related to the number of FTEs in the general fund portion of the agency. In FY 15 Aging's salary lapse changed by \$897 to -\$17,926.
- **C.** Annual Reconciliation In accordance with <u>BOCS Resolution 13-696</u>, the Area Agency on Aging's FY 14 budget was amended to reconcile with the state and federal program allocations. The net impact of the reconciliation was an overall budget reduction of \$13,351. The program impact is as follows: Home and Community Based Services, -\$10,500; Supportive Services, \$2,767; and Senior Centers, -\$5,618. These changes have been carried over into the FY 15 budget.





- **D.** Compensation Increase Compensation adjustments totaling \$40,913 are made to support the following rate changes:
 - 5% Retiree Health;
 - -0.21% and -1.21% VRS employer rate for Plan I and Plan II employees, respectively;
 - 2.7% Health Insurance;
 - 3% Pay-for-Performance;
 - 0.13% Group Life; and
 - 1% Salary adjustment to offset the required VRS contribution by Plan I and some Plan II employees.

Additional detail concerning these adjustments can be found in the Unclassified Administrative section of Non-Departmental.

E. Community Partners Funding Increase - This initiative reflects a 3% increase in the donation to the community partners in the agency budget totaling \$5,786. The increase supports existing service levels. The total donation amount provided to agency community partners is \$198,648 in FY 15. For additional detail please refer to the Community Partners section.

Program Summary

Home & Community Based Services

The Home & Community Based Services Program serves the most at-risk, frail, older adults in the Prince William Area with the Adult Day Healthcare@Woodbridge and the Home Care Assistance Programs to help them remain in the community for as long as possible. The federal transportation grants are also managed in this program, to include the Travel Training partnership with PRTC.

Key Measures	FY 12 Actual	FY 13 Actual	Trend	FY 14 Adopted	FY 15 Adopted
Home and Community-Based Services clients who report that service helped them remain in their homes	95%	98%	1	95%	99%
Family care-givers who report they are better able to meet work or other family obligations	94%	93%	1	95%	94%

 \uparrow Trending Upward \leftrightarrow Stable \downarrow Trending Downward

Program Activities & Workload Measures

	FY 12 <u>Actual</u>	FY 13 <u>Actual</u>	FY 14 <u>Adopted</u>	FY 15 <u>Adopted</u>
Home Services	\$443,725	\$636,756	\$660,847	\$644,712
Clients served	111	117	_	120
Persons wait listed (quarterly average)	0	20	10	15
Community Based Services	\$483,227	\$509,441	\$524,378	\$541,453
Clients served	70	43	65	50
Persons wait listed (quarterly average)	0	0	10	0

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Supportive Services

The Supportive Services Program provides a wide range of long-term support services such as Veteran Assistance, Medicare Counseling, Hospital Care Transitions, Caregiver Support, Assessment and Care Coordination and Information to the public about Aging and Disability Services. This program provides citizens with information to make informed decisions about their services options within the Prince William Area.

Key Measures	FY 12 Actual	FY 13 Actual	Trend	FY 14 Adopted	FY 15 Adopted
Participants who report that Supportive Services have helped them remain in the community	<u>—</u>	<u> </u>		<u>—</u>	85%
Clients/families who indicate that information provided assisted them in navigating the network of aging and disability services		_			95%

 \uparrow Trending Upward \leftrightarrow Stable \downarrow Trending Downward

Program Activities & Workload Measures

	FY 12 <u>Actual</u>	FY 13 <u>Actual</u>	FY 14 <u>Adopted</u>	FY 15 Adopted
Assessment and Care Coordination	\$185,576	\$248,352	\$1,048,459	\$1,077,016
People receiving services	495	489	_	500
Communication, Referral, Information and Assistance (CRIA)	\$565,859	\$549,480	\$249,676	\$237,217
Information requests addressed	6,092	6,463		6,500
Medicare Counseling	\$79,612	\$82,723	\$60,615	\$76,274
People counseled for Medicare health insurance	1,562	1,506	925	1,550

Senior Centers

The Senior Centers Program operates the Senior Center@Manassas and the Senior Center@Woodbridge, providing recreation, exercise, nutrition, health and wellness programs for persons 55 and older. The programs serve to reduce isolation, promote health and may prevent rapid decline from debilitating conditions.

Key Measures	FY 12 Actual	FY 13 Actual	Trend	FY 14 Adopted	FY 15 Adopted
Participants who report that the Senior Centers have helped them remain in the community	<u> </u>	_		_	85%
Meals on Wheels participants who report that meals have helped them remain in the community	99%	95%	1	100%	97%







Program Activities & Workload Measures

	FY 12 <u>Actual</u>	FY 13 <u>Actual</u>	FY 14 <u>Adopted</u>	FY 15 Adopted
Senior Centers	\$768,735	\$796,035	\$1,071,303	\$1,084,895
Senior Center participants	1,264	1,138	1,500	1,250
Meals served (Congregate and Meals on Wheels)	45,610	48,623	47,050	50,000

Fiscal & Administration

The Fiscal & Administration Program connects the delivery of services and the administrative support that plans, monitors, and accounts for those services. The Bluebird Tour Program, Agency Volunteer intake and Birmingham Green are also managed in the Fiscal & Administration Program.

Key Measures	FY 12 Actual	FY 13 Actual	Trend	FY 14 Adopted	FY 15 Adopted
People served by community partners and contractual agreements	1,336	2,489	†		2,500
Citizens agreeing that the County provides appropriate facilities and services for seniors and caregivers (community survey)	89%	89%	\leftrightarrow	89%	89%

 \uparrow Trending Upward \longleftrightarrow Stable \downarrow Trending Downward

	FY 12 <u>Actual</u>	FY 13 <u>Actual</u>	FY 14 <u>Adopted</u>	FY 15 <u>Adopted</u>
Area Plan on Aging	\$541,415	\$672,598	\$588,786	\$610,002
FTE equivalent of volunteer hours contributed	10.03	8.46	11.00	9.00
Birmingham Green	_	_	\$1,332,365	\$1,413,818
County residents served in Birmingham Green facilities	114	115	115	115
Bluebird Tour Program	\$53,260	\$52,390	\$54,000	\$54,000
Tour participants	759	831	700	850
Grants and Computers	\$1,447,717	\$1,739,828	_	_





A. Budget Initiatives

1. Increase Birmingham Green Support

Expenditure \$81,453
Revenue \$0
General Fund Impact \$81,453
FTE Positions 0.00

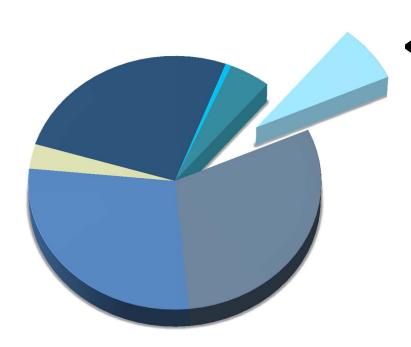
- **a. Description** Birmingham Green provides housing to the County's most vulnerable adults in need of specialized skilled nursing, dementia and/or behavioral care. Birmingham Green provides affordable units for low income adults with disabilities and assisted living units for low income elderly to residents of the localities participating in the interjurisdictional operating agreement. As of January 2014, 67 Prince William County residents live at Birmingham Green 38 in the nursing home, 19 in units for adults with disabilities, and 10 in the affordable units for the elderly. In accordance with the agreement, the County share of the operating costs has decreased by \$6,192 and the one-time costs, to include an engineering evaluation of the nursing facility, a feasibility study of the District Home building, and technology upgrades, are \$87,645, for a total of \$81,453. General fund support decreases by \$24,768, FY 16 through FY 19.
- b. Service Level Impacts Existing service levels are maintained.





Mission Statement

At-Risk Youth & Family Services will provide our citizens with a community-based collaborative process to determine appropriate and effective services that are least restrictive, child-centered and family-focused for troubled youth so that the family can successfully manage or eliminate debilitating conditions.



Expenditure Budget: \$9,187,630

7.4% of Human Services

Program:

- At-Risk Youth & Family Services: \$9,005,797
- Family Preservation & Support Services: \$181,833

Human Services Expenditure Budget \$124,843,148

Mandates

The Prince William County is mandated by the state to provide services for court-ordered residential, community-based services and foster care clients. At-Risk Youth & Family Services provides this mandated service.

State Code: 2.2-5211-5212, 63.2-319, 900, 903, 905, 1105

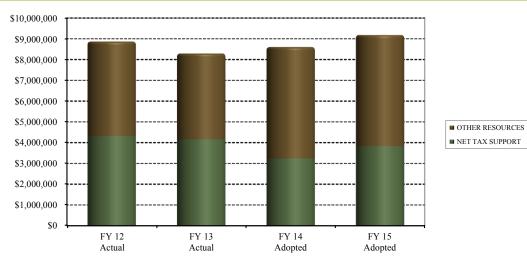




Expenditure and Revenue Summary

					% Change
	FY 12	FY 13	FY 14	FY 15	Adopt 14/
Expenditure by Program	Actual	Actual	Adopted	Adopted	Adopted 15
1 At-Risk Youth & Family Services	\$8,669,121	\$8,094,673	\$8,410,885	\$9,005,797	7.07%
2 Family Preservation & Support Services	\$197,834	\$198,806	\$194,621	\$181,833	-6.57%
Total Expenditures	\$8,866,955	\$8,293,479	\$8,605,506	\$9,187,630	6.76%
Expenditure by Classification					
1 Personal Services	\$298,845	\$316,160	\$316,953	\$378,178	19.32%
2 Fringe Benefits	\$83,756	\$111,954	\$114,363	\$137,728	20.43%
3 Contractual Services	\$73,172	\$69,000	\$72,233	\$58,444	-19.09%
4 Internal Services	\$7,191	\$1,845	\$5,544	\$15,866	186.18%
5 Other Services	\$8,140,131	\$7,543,269	\$7,849,964	\$8,350,965	6.38%
6 Transfers Out	\$263,860	\$251,251	\$246,449	\$246,449	0.00%
Total Expenditures	\$8,866,955	\$8,293,479	\$8,605,506	\$9,187,630	6.76%
Funding Sources					
1 Miscellaneous Revenue	\$0	\$0	(\$4,185)	\$0	-100.00%
2 Revenue From Commonwealth	\$4,558,251	\$4,013,598	\$4,935,076	\$4,926,706	-0.17%
3 Revenue From Federal Government	\$0	\$120,098	\$0	\$0	
4 Transfers In	\$645,440	\$423,893	\$427,031	\$424,803	-0.52%
Total Designated Funding Sources	\$5,203,691	\$4,557,589	\$5,357,922	\$5,351,509	-0.12%
General Tax Support	\$3,034,321	\$3,296,604	\$3,247,584	\$3,836,121	18.12%
General Tax Support	34.22%	39.75%	37.74%	41.75%	

Expenditure History





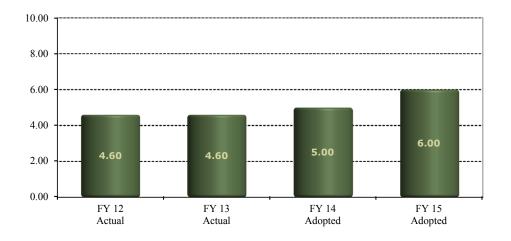




Staffing History







Staffing by Program



	FY 12	FY 13	FY 14	FY 15
	Actual	Actual	Adopted	Adopted
1 At-Risk Youth & Family Services 2 Family Preservation & Support Services	4.60	4.60	5.00	6.00
	0.00	0.00	0.00	0.00
Full-Time Equivalent (FTE) Total	4.60	4.60	5.00	6.00

Future Outlook

Increase in Demand - The school population has been increasing steadily and will continue to grow. The total number of children with dysfunctional and destructive behaviors will likely increase proportionally.

Uncertainty in Health Care Services and Costs - Financial management of program costs entails maximizing the use of all available private and public insurances prior to utilizing program funds. With implementation of the Affordable Health Care Act, private policy owners and service providers are now confused about what mental health and behavioral health services are covered and by how much. Public insurance (i.e., Medicaid) is now managed by a different contractor (Magellan) for Virginia, and the transition has created uncertainty regarding approval and denial of services.

State Imposed Local Match for Medicaid Services - Whenever a client is approved for Medicaid-qualified services funded through At-Risk & Family Services (ARYFS), that locality's ARYFS program must reimburse the state with a local match. This is unique, in that localities are not required to reimburse the state for other Medicaid funded services. This additional 'cost' has created a shortfall in state reimbursements to Prince William County's (PWC) ARYFS by approximately \$600,000. Efforts to fix this problem will likely result in denying needed services and increasing overall unit costs.







Strengthening Public/Private Partnerships - The service needs of our residents are dynamic and unpredictable. We have had to deal with issues of gangs, substance abuse, cyber bullying, child sex offenders, etc. as they arise. Planning for what the next prevalent issue might be is not possible. However, overcoming them when they arise is possible because of the priority we've placed on creating and maintaining strong public/private provider partnerships. The latest developing issue is gang-controlled sex trafficking victims. ARYFS is working with various residential treatment facilities that are secure (i.e., "locked") to create new services for the most at-risk victims. In the past, these clients have had to be sent to out-of-state facilities.

De-Institutionalizing Children - Children with behaviors that create a safety risk to themselves and/or others are placed in treatment facilities with 24/7 care. The risk of using this type of service is when children are institutionalized for too long, they develop behaviors that can make it more difficult for them to reunite successfully with their family and function in society upon discharge. A taskforce of public and private provider representatives was formed to create opportunities for the ARYFS program to reduce the number of children in long-term placements for over nine months.

General Overview

- A. Internal Service Fund (ISF) Technology Billing The County allocates all technology costs to agencies through an ISF. The Department of Information Technology (DoIT) annually recalculates each agency's ISF bill, using the approved cost bases for each technology activity. Technology activities include phone, radio and computer support, business systems support, GIS, web services, capital equipment and administration. In FY 15, ARYFS' technology bill increased by \$7,615 to \$13,159.
- **B.** Compensation Increase Compensation adjustments totaling \$10,880 are made to support the following rate changes:
 - 5% Retiree Health;
 - -0.21% and -1.21% VRS employer rate for Plan I and Plan II employees, respectively;
 - 2.7% Health Insurance;
 - 3% Pay-for-Performance;
 - 0.13% Group Life; and
 - 1% Salary adjustment to offset the required VRS contribution by Plan I and some Plan II employees.

Additional detail concerning these adjustments can be found in the Unclassified Administrative section of Non-Departmental.

- C. Prince William County Public Schools Funding Increase This item reflects a revenue increase of \$7,376 from the Schools to ARYFS for on-going provision of services. The operational transfer will defray the cost of residential and community-based services for mandated special education children whose needs cannot be served by existing school system programs and reduces County tax support.
- **D.** Community Partners Funding Increase This initiative reflects a 3% increase in the donation to the community partners in the agency budget totaling \$1,001. The increase supports existing service levels. The total donation amount provided to agency community partners is \$34,357 in FY 15. For additional detail please refer to the Community partners section.





Program Summary

At-Risk Youth & Family Services

ARYFS is a locally managed interagency program created by the state's Comprehensive Services Act for At-Risk Youth and Families in 1993. ARYFS enhances our local human service systems of care as an additional resource for the following public agencies in need of services for the clients: (1) Department of Social Services for Child Protection Services and Foster Care; (2) School Division for Special Education services outside of the public school system's resources; (3) Juvenile Court Services Unit for Probation and Parole; (4) Community Services for mental health treatment needs and (5) Health District for medical matters. All service plan decisions require a collaborative review and approval by a Family Assessment and Planning Team (FAPT) staffed by the previously listed public agencies, a private provider representative and a parent representative.

Key Measures	FY 12 Actual	FY 13 Actual	Trend	FY 14 Adopted	FY 15 Adopted
Clients with improved functional assessment score upon case closure	63.4%	59.5%	1	66%	50%
Parent/guardians participating in inter-agency meetings who are satisfied with service delivery	94%	98%	1	95%	85%
Residential treatment services completed within nine months	57%	60%	1	40%	62%
Foster care youth served without use of residential services	83%	76%	Ţ	84%	70%

	FY 12 <u>Actual</u>	FY 13 <u>Actual</u>	FY 14 <u>Adopted</u>	FY 15 <u>Adopted</u>
Community-Based Services	\$2,329,833	\$2,527,588	\$1,629,492	\$2,234,471
Youth served	676	728	690	710
Residential Services	\$4,439,853	\$3,844,421	\$4,900,000	\$4,403,243
Youth served	132	110	140	105
Foster Care	\$1,632,532	\$1,449,525	\$1,587,333	\$1,988,414
Youth served	206	203	210	225
Administration	\$266,903	\$237,654	\$294,060	\$379,669
Total youth served	739	741	750	750

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AT-RISK YOUTH & FAMILY SERVICES



A. Budget Initiatives

1. Increase Residential Services Activity

Expenditure \$500,000
Revenue \$0
General Fund Impact \$500,000
FTE Positions 0.00

- **a. Description** This increase provides \$500,000 for residential services requiring a local match for Medicaid-funded services in FY 15.
- **b.** Service Level Impacts
 - Residential Services Youth Served:

FY 15 w/o Addition | 100 FY 15 w/ Addition | 105

B. Budget Shifts

1. Shift Residential Services to Foster Care and Community-Based Services

Budget Shift \$1,000,000 Agency Impact \$0 FTE Positions 0.00

- **a.** Description Funding is shifted from the Residential Services activity to the Foster Care and Community-Based Services activities to address a revenue shortfall in state reimbursements and adjust service delivery to clients. Whenever a client is approved for Medicaid-qualified services funded through ARYFS, that locality's ARYFS program must reimburse the state with a local match. This is unique, in that localities are not required to reimburse the state for other Medicaid funded services. The \$1,000,000 shift in revenues and expenditures will be included in each year of the five year plan.
- **b.** Service Level Impacts
 - Residential Services Youth Served:

FY 15 w/o Shift | 110 FY 15 w/ Shift | 100

• Foster Care Youth Served:

FY 15 w/o Shift | 205 FY 15 w/ Shift | 225

• Clients with improved functional assessment score upon case closure:

FY 15 w/o Shift | 66% FY 15 w/ Shift | 50%

• Parent/guardians participating in inter-agency meetings who are satisfied with service delivery:

FY 15 w/o Shift | 95% FY 15 w/ Shift | 85%

• Foster care youth served without use of residential services:

FY 15 w/o Shift | 80% FY 15 w/ Shift | 70%





2. Shift 1.0 FTE from Department of Social Services

Expenditure \$54,902
Revenue \$0
General Fund Impact \$54,902
FTE Positions 1.00

- **a. Description** One Accounting Assistant II position shifted from the Department of Social Services to help manage the administrative workload in ARYFS.
- b. Service Level Impacts Existing FY 15 service levels are maintained with this shift.

Family Preservation & Support Services (FPSS)

FPSS is a federally funded grant program to support local efforts designed to prevent the unnecessary separation of children from their families, improve the quality of care and services to children and their families and ensure permanency for children by reuniting them with their parents, by adoption or by another permanent living arrangement. The federal grant is Promoting Safe and Stable Families (PSSF). The organization of FPSS is similar to ARYFS to provide collaborative oversight on the distribution and use of PSSF grant funds for services that address family support, family preservation, time-limited family reunification and adoption promotion and support.

Key Measures	FY 12 Actual	FY 13 Actual	Trend	FY 14 Adopted	FY 15 Adopted
Repeat cases of founded abuse	1.15%	1.15%	\leftrightarrow	≤1.75%	≤1.75%
Social Services family reunification clients remaining reunified with their families after six months	100%	100%	\leftrightarrow	95%	95%

 \uparrow Trending Upward \leftrightarrow Stable \downarrow Trending Downward

	FY 12 <u>Actual</u>	FY 13 <u>Actual</u>	FY 14 <u>Adopted</u>	FY 15 <u>Adopted</u>
Prevention Services	\$145,835	\$146,807	\$145,138	\$127,230
Clients served	1,449	1,258	1,220	130
Early Intervention Services Clients served	\$51,999 52	\$51,999 44	\$49,483 40	\$54,603





A. Budget Reductions

1. Reduce Promoting Safe & Stable Family (PSSF) Grant Funds from Social Services Budget Reconciliation

Expenditure (\$13,789)
Revenue (\$13,789)
General Fund Impact \$0
FTE Positions 0.00

- **a.** Description As part of the FY 14 Department of Social Services Budget Reconciliation approved on July 23, 2013 (BOCS Resolution 13-452), \$13,789 in revenue and expenditure support have been reduced for the PSSF program within At-Risk Youth and Family Services. The \$13,789 reduction in revenues and expenditures will be included in each year of the five year plan.
- b. Service Level Impacts
 - Prevention Services Clients Served

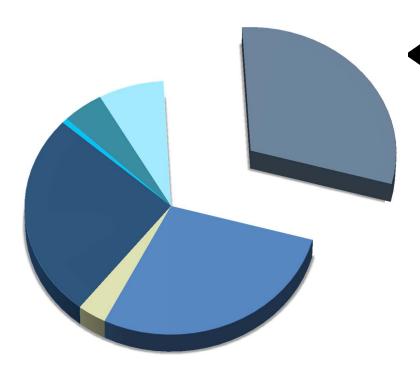
FY 15 w/o Reduction | 1,140 FY 15 w/ Reduction | 130





Mission Statement

We are committed to improving the quality of life for people with or at risk of developing mental disabilities and substance abuse problems and to preventing the occurrences of these conditions. We do this through a system of caring that respects and promotes the dignity, rights and full participation of individuals and their families. To the maximum extent possible, these services are provided within the community.



Human Services Expenditure Budget \$124,843,148

Expenditure Budget: \$37,592,330

30.1% of Human Services

Programs:

- Emergency Services: \$3,124,445
- Intellectual Disability Residential Services: \$788,085
- Mental Health Residential Services: \$5,185,400
- Mental Health Day Support & Employment Services: \$1,758,137
- Early Intervention Services: \$3,923,825
- Youth Substance Abuse & Mental Health Services: \$3,033,059
- Intellectual Disability Case Management Services: \$3,203,401
- Intellectual Disability Day Support Services: \$3,403,878
- Mental Health Outpatient Services: \$3,237,800
- Substance Abuse Adult Outpatient Services: \$2,269,431
- Drug Offender Recovery Services: \$1,650,722
- Administrative Services: \$3,364,478
- Medical Services: \$2,649,669

Mandates

The County is mandated to establish a Community Services board provide emergency services and, subject to the availability of appropriated state funds, case management services. The Community Services board is the single point of entry into publicly funded mental health, developmental and substance abuse services.

State Code: 37.2-500, 37.2-504







Expenditure and Revenue Summary

	FY 12	FY 13	FY 14	FY 15	% Change
Expenditure by Program	Actual	Actual	Adopted		Adopt 14/ Adopted 15
1 Emergency Services	\$2,934,679	\$3,026,153	\$3,027,982	Adopted \$3,124,445	3.19%
2 Intellectual Disability Residential Services	\$699,572	\$724,737	\$773,165	\$788,085	1.93%
3 Mental Health Residential Services	\$3,661,620	\$4,338,344	\$4,989,032	\$5,185,400	3.94%
4 Mental Health Day Support & Employment Services	\$1,617,083	\$1,524,466	\$1,612,952	\$1,758,137	9.00%
5 Early Intervention Services	\$3,305,427	\$3,317,673	\$3,519,343	\$3,923,825	11.49%
6 Youth Substance Abuse & Mental Health Services	\$2,861,104	\$3,003,138	\$2,930,554	\$3,033,059	3.50%
7 Intellectual Disability Case Management Services			\$2,930,334		7.42%
, ,	\$2,059,923	\$2,483,319		\$3,203,401	
8 Intellectual Disability Day Support Services	\$3,227,608	\$2,961,608	\$3,403,103	\$3,403,878	0.02%
9 Mental Health Outpatient Services	\$3,051,614	\$3,004,303	\$3,303,524	\$3,237,800	-1.99%
10 Substance Abuse Adult Outpatient Services	\$2,129,706	\$2,234,641	\$2,322,442	\$2,269,431	-2.28%
11 Drug Offender Recovery Services	\$1,453,786	\$1,496,629	\$1,637,986	\$1,650,722	0.78%
12 Office of Executive Director	\$1,087,987	\$1,128,123	\$1,126,381	\$0	-100.00%
13 Administrative Services	\$2,154,054	\$2,037,829	\$2,074,274	\$3,364,478	62.20%
14 Medical Services	\$2,056,658	\$2,206,315	\$2,341,292	\$2,649,669	13.17%
Total Expenditures	\$32,300,821	\$33,487,278	\$36,044,123	\$37,592,330	4.30%
Expenditure by Classification					
1 Personal Services	\$17,638,376	\$17,798,843	\$18,824,924	\$20,155,074	7.07%
2 Fringe Benefits	\$4,996,783	\$5,558,993	\$6,043,826	\$6,184,364	2.33%
3 Contractual Services	\$6,761,778	\$6,886,808	\$7,689,740	\$7,663,640	-0.34%
4 Internal Services	\$1,273,597	\$1,342,248	\$1,306,098	\$1,470,607	12.60%
5 Other Services	\$1,272,658	\$1,484,167	\$2,000,995	\$1,940,105	-3.04%
6 Debt Maintenance	\$24,258	\$24,258	\$24,258	\$24,258	0.00%
7 Capital Outlay	\$0	\$36,594	\$0	\$0	
8 Leases & Rentals	\$146,031	\$151,197	\$154,282	\$154,282	0.00%
9 Transfers Out	\$187,340	\$204,170	\$0	\$0	_
Total Expenditures	\$32,300,821	\$33,487,278	\$36,044,123	\$37,592,330	4.30%
Funding Courses					
Funding Sources	\$5.500	Φ0	0.0	Φ.	
1 General Property Taxes	\$5,500	\$0	\$0	\$0	10.200
2 Charges for Services	\$822,043	\$832,973	\$671,071	\$740,071	10.28%
3 Miscellaneous Revenue	\$29,668	\$58,737	\$25,712	\$160,883	525.71%
4 Revenue From Other Localities	\$2,388,410	\$2,270,256	\$2,463,021	\$2,819,329	14.47%
5 Revenue From Commonwealth	\$11,596,701	\$11,821,621	\$12,976,470	\$13,488,794	3.95%
6 Revenue From Federal Government	\$2,635,245	\$2,671,747	\$2,588,069	\$2,553,516	-1.34%
7 Transfers In	\$0	\$0	\$114,060	\$0	-100.00%
Total Designated Funding Sources	\$17,477,567	\$17,655,334	\$18,838,403	\$19,762,593	4.91%
General Tax Support	\$15,847,319	\$17,354,343	\$17,205,720	\$17,829,737	3.63%
General Tax Support	49.06%	51.82%	47.74%	47.43%	

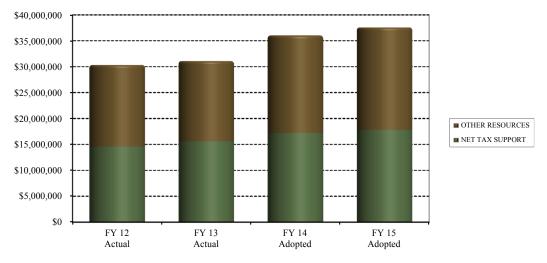


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COMMUNITY SERVICES



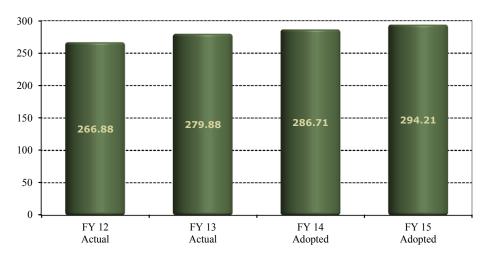
Expenditure History



Staffing History







Staffing by Program



	FY 12	FY 13	FY 14	FY 15
	Actual	Actual	Adopted	Adopted
1 Emergency Services	28.09	28.09	29.92	29.92
2 Intellectual Disability Residential Services	2.10	2.10	2.00	2.00
3 Mental Health Residential Services	29.90	32.90	32.90	33.90
4 Mental Health Day Support & Employment Services	18.20	18.20	18.20	18.20
5 Early Intervention Services	24.70	28.70	28.70	32.20
6 Youth Substance Abuse & Mental Health Services	29.62	29.65	29.60	29.60
7 Intellectual Disability Case Management Services	23.40	27.40	32.50	36.50
8 Intellectual Disability Day Support Services	0.20	0.20	0.20	0.20
9 Mental Health Outpatient Services	39.45	40.45	40.45	39.45
10 Substance Abuse Adult Outpatient Services	21.85	21.85	21.85	21.84
11 Drug Offender Recovery Services	14.40	14.40	14.40	14.40
12 Office of Executive Director	6.25	6.85	6.85	0.00
13 Administrative Services	15.75	15.15	15.15	22.00
14 Medical Services	12.97	13.94	13.99	14.00
Full-Time Equivalent (FTE) Total	266.88	279.88	286.71	294.21





Future Outlook

Resources - Public resources cannot sufficiently meet the need for treatment, day support and residential assistance of every individual with mental illnesses, intellectual and developmental disabilities and/or substance abuse problems. It is important that Community Service (CS) function as the safety net for people with identified illnesses and conditions. Additionally, to be effective requires a broad partnership among the private sector, public sector and non-profit organizations. Community leaders must work with state and federal decision makers to synergize all public funding sources to stitch the safety net together effectively. Local officials must find opportunities to encourage private practitioners to treat those with moderate and less complex illnesses and seek public/private partnerships to create new treatment methods and innovations within the community. This multi-dimensional effort will improve the lives of more people, increase self-sufficiency of individuals and organizations and encourage those who have received assistance to offer assistance to others in need.

Changes in Intellectual Disability/Developmental Disability (ID/DD) Waiver - The Department of Behavioral Health and Disability Services and Department of Medical Assistance Services (DMAS) are working on a plan to change the ID/DD Waiver. That plan will be presented to the Virginia Legislature and Center of Medicaid and Medicare Services for implementation in FY 16. This schedule means that the development and implementation of new day support and residential rates for people in the Training Centers and community will remain the same for at least two more years. However, whatever changes in waiver services and rates are approved will impact service levels once implemented. One key area of expected change is how to address the growing demand for autism support. The change in waiver services and rates must address what services to fund and how to fund those services for people with autism. There are currently hundreds of children and adults in the Prince William area with autism who will be served with the expected changes to the waiver.

Department of Justice/Commonwealth of Virginia Settlement - The settlement between Virginia and Department of Justice (DOJ), which gave Virginia ten years to address its deficiencies in supporting the intellectual and/or developmentally disabled, continues to be a challenge. The DOJ settlement requires Virginia to find ways to properly serve and support individuals with intellectual and/or developmental disabilities. However, changes necessary to provide adequate funding and support have not been implemented. One key area of need that must be addressed is support to those with autism. Today there are only a few providers offering appropriate professional services to autistic individuals, therefore any changes to serve them will require a significant expansion and development of the continuum of services they need. It is important to note that funding for services is a state responsibility; service delivery is a CS responsibility.

Managed Care - The most significant change in managed care began December 1, 2013, when DMAS transitioned its payment and administrative operation to the managed care company Magellan Behavioral Health. Magellan Behavioral Health will impose the following changes to managed care services: 1) authorizing limits on the amount of services provided; 2) restricting payments to providers who have professional licenses; 3) limiting the kinds of services that will be paid; and 4) imposing more documentation requirements. The changes for providers are predictable because of their history in other states that have made the same changes.

Coordination of Services - New requirements stipulate that Medicaid and Medicare patients who receive mental health and/or substance abuse treatment must have their treatment coordinated with primary health care doctors. While this is a significant benefit to the overall quality of care to the individual, it is important to note that the cost of increased time spent by CS therapists and doctors to identify and to coordinate care with primary health care physicians in the community will not be reimbursable.





General Overview

- A. Internal Service Fund (ISF) Technology Billing The County allocates all technology costs to agencies through an ISF. The Department of Information Technology (DoIT) annually recalculates each agency's ISF bill, using the approved cost bases for each technology activity. Technology activities include phone, radio and computer support, business systems support, GIS, web services, capital equipment and administration. In FY 15, Community Service's technology bill increased by \$51,429 to \$1,297,468.
- **B.** Compensation Adjustment The County uses a budget control measure known as salary lapse in all general fund agencies with more than 20 employees. Salary lapse reduces employee compensation to account for turnover and the associated savings when longer term employees are replaced by individuals coming in at lower points on the pay scale. The amount of anticipated savings allocated to each agency is directly related to the number of FTEs in the general fund portion of the agency. In FY 15, CS' salary lapse changed by \$4,016 to -\$160,612.
- **C.** Budget Reconciliation Each year, CS completes a budget reconciliation of state and federal revenues to the state performance contract. \$136,216 in on-going revenue and expenditure support was identified through the FY 14 reconciliation and was approved by BOCS Resolution 13-622 on October 15, 2013. Existing service level impacts will be maintained with this adjustment and the \$136,216 in revenues and expenditures is included in each year of the five year plan starting with FY 15.
- **D.** Program/Activity Reorganization This item reorganizes CS, specifically moving the Leadership & Management Oversight activity from the Office of Executive Director Program to the Administrative Services Program to better reflect actual service provision and eliminate the Office of Executive Director program.
- **E.** Compensation Increase Compensation adjustments totaling \$514,353 are made to support the following rate changes:
 - 5% Retiree Health;
 - -0.21% and -1.21% VRS employer rate for Plan I and Plan II employees, respectively;
 - 2.7% Health Insurance;
 - 3% Pay-for-Performance;
 - 0.13% Group Life; and
 - 1% Salary adjustment to offset the required VRS contribution by Plan I and some Plan II employees.

Additional detail concerning these adjustments can be found in the Unclassified Administrative section of Non-Departmental.

- **F.** Revenue Increase for City Billings City billings is a reimbursement from the City of Manassas and Manassas Park for services rendered in the previous year. Historically, the total city billing reimbursement is used to balance the County-wide budget at budget recap and later allocated to specific agencies. Community Services' FY 15 allocation is an increase of \$356,308.
- **G. Community Partners Funding Increase** This initiative reflects a 3% increase in the donation to the community partners in the agency budget totaling \$12,294. The increase supports existing service levels. The total donation amount provided to agency community partners is \$422,089 in FY 15. For additional detail please refer to the Community Partners section.





Program Summary

Emergency Services

Provides telephone and in person crisis intervention services on a 24 hour basis to individuals experiencing mental health, substance abuse or intellectual disability emergencies. Clients are provided with clinical services immediately if necessary and are connected to the appropriate level of care which can range from outpatient services at CS to immediate involuntary inpatient care at a local or state psychiatric facility.

Key Measures	FY 12 Actual	FY 13 Actual	Trend	FY 14 Adopted	FY 15 Adopted
Cases diverted from inpatient treatment	62%	62%	\leftrightarrow	57%	60%
Clients satisfied with services received	89%	93%	†	90%	90%
County provides appropriate facilities and services to people with mental illness and/or intellectual disability (community survey)	84%	84%	\leftrightarrow	≥84%	≥84%

Trending Upward

↔ Stable

↓Trending Downward

	FY 12 <u>Actual</u>	FY 13 <u>Actual</u>	FY 14 <u>Adopted</u>	FY 15 Adopted
CS Intake and Emergency Telephone Services	\$674,669	\$667,397	\$672,162	\$432,769
Telephone contacts received and processed	31,865	48,115	32,900	35,500
Emergency Services	\$2,260,009	\$2,358,756	\$2,355,820	\$2,691,676
Clients served	2,822	2,748	2,780	2,785





Intellectual Disability Residential Services

Adults with Intellectual Disabilities are provided support services directly or by contract that assist them in remaining as independently as possible in their community. For adults who cannot live independently, licensed vendors in the community who accept ID waivers provide 24 hour residential care to assist them with health care, skill development and community integration.

Key Measures	FY 12 Actual	FY 13 Actual	Trend	FY 14 Adopted	FY 15 Adopted
Client family satisfaction	98%	90%	1	90%	90%
County provides appropriate facilities and services to people with mental illness and/or intellectual disability (community survey)	84%	84%	\leftrightarrow	≥84%	≥84%

Program Activities & Workload Measures

	FY 12 <u>Actual</u>	FY 13 <u>Actual</u>	FY 14 <u>Adopted</u>	FY 15 <u>Adopted</u>
Group Home Services	\$87,900	\$88,328	\$120,000	\$120,000
Clients served	159	181	156	164
Supported Living Services Clients served	\$611,672 20	\$636,409 25	\$653 , 165	\$668,085 25

Mental Health Residential Services

Assist adults with serious mental illnesses to remain as independent as possible in the community by providing directly or contracting for a variety of levels of clinical services to assist them in maintaining their level of functioning; or connect with vendors who provide 24 hour residential care for those adults who cannot remain outside of institutional settings without that level of support.

Key Measures	FY 12 Actual	FY 13 Actual	Trend	FY 14 Adopted	FY 15 Adopted
Clients successfully engaged in services and maintained in the community	99%	94%	1	99%	95%
Clients expressing satisfaction with service provided	98%	95%	1	96%	95%
County provides appropriate facilities and services to people with mental illness and/or intellectual disability (community survey)	84%	84%	\leftrightarrow	≥84%	≥84%





Program Activities & Workload Measures

	FY 12 <u>Actual</u>	FY 13 <u>Actual</u>	FY 14 <u>Adopted</u>	FY 15 Adopted
Supportive Residential In-Home Services	\$2,032,456	\$2,079,592	\$2,293,014	\$2,383,503
Clients served	142	131	155	155
Intensive Residential Services	\$462,822	\$495,758	\$463,871	\$464,606
Clients served in group homes	24	24	25	24
Crisis Stabilization Services	\$585,500	\$1,145,287	\$1,614,740	\$1,614,740
Clients served	131	158	246	200
Intensive Community Treatment (ICT) Services	\$580,842	\$617,707	\$617,407	\$722,551
Clients served	51	50	50	50

A. Budget Initiatives

1. Add Federal Funding for Projects for Assistance in Transitioning the Homeless (PATH) Program

Expenditure \$36,518
Revenue \$36,518
General Fund Impact \$0
FTE Positions 0.00

- **a. Description** PATH is a federal grant that supports service delivery to individuals with serious mental illnesses, as well as individuals with co-occurring substance use disorders, are homeless or at risk of becoming homeless. This item was approved by <u>BOCS Resolution 13-665</u> on November 7th, 2013. The \$36,518 in revenues and expenditures will be included in each year of the five year plan. There is no general fund impact.
- **b.** Service Level Impacts Existing service levels will be maintained.





Mental Health Day Support & Employment Services

Provides psychosocial rehabilitation services and/or supported employment services through a variety of programs. Service goal is to help persons with severe mental illness, cognitive disabilities and/or co-occurring disorders to improve their capabilities and the quality of their lives by providing meaningful opportunities to integrate in and contribute to their community of choice.

Key Measures	FY 12 Actual	FY 13 Actual	Trend	FY 14 Adopted	FY 15 Adopted
Clients who maintain employment for more than 90 days	84%	78%	1	83%	76%
Psycho-social rehabilitation clients who maintain or improve functioning level	88%	96%	†	83%	83%
Vocational Services clients reporting satisfaction with services	98%	96%	Ţ		91%
County provides appropriate facilities and services to people with mental illness and/or intellectual disability (community survey)	84%	84%	\leftrightarrow	≥84%	≥84%

 \uparrow Trending Upward \leftrightarrow Stable \downarrow Trending Downward

	FY 12 <u>Actual</u>	FY 13 <u>Actual</u>	FY 14 <u>Adopted</u>	FY 15 <u>Adopted</u>
Day Support Services	\$1,038,595	\$1,000,775	\$1,009,530	\$1,105,920
Clients served	137	135	141	134
Employment Services	\$578,488	\$523,691	\$603,422	\$652,217
Clients served	135	134	150	150





Early Intervention Services for Infants & Toddlers with Disabilities

Early Intervention services are provided by licensed and certified physical therapists, occupational therapists, speech-language pathologists, early childhood special educators and service coordinators for infants and toddlers, birth to three year's old who have a diagnosed condition affecting their development, qualitative concerns with their development or a delay of at least 25% in one or more developmental areas. Services are intended to help the child develop the necessary motor, communication, social-emotional, feeding and play skills to be an active member of their family and community.

Key Measures	FY 12 Actual	FY 13 Actual	Trend	FY 14 Adopted	FY 15 Adopted
Children completing early intervention services who do not require special education	57%	51%	1	≥58%	53%
Children receiving services demonstrate improved acquisition and use of knowledge and skills					69%
Families report services have helped their family to help their child develop and learn	<u>—</u>				77%

Program Activities & Workload Measures

	FY 12 <u>Actual</u>	FY 13 <u>Actual</u>	FY 14 <u>Adopted</u>	FY 15 Adopted
Assessment and Service Coordination	\$1,370,746	\$1,319,713	\$1,380,060	\$1,605,692
Infants, toddlers and families served	1,140	1,150	1,052	1,100
Therapeutic and Educational Services	\$1,934,680	\$1,997,960	\$2,139,283	\$2,318,133
Infants, toddlers and families served	972	951	692	926

A. Budget Initiatives

1. Add State Funding for Early Intervention Program

Expenditure \$286,176
Revenue \$286,176
General Fund Impact \$0
FTE Positions 3.50

- **a.** Description On August 6, 2013, <u>BOCS</u> Resolution 13-484 accepted state revenues for one Early Intervention Service Coordinator, one and a half Early Intervention Specialists and one Early Intervention Supervisor to support the Early Intervention Program. This program provides services for children with diagnosed handicapped conditions and/or developmental delays. The \$286,176 in revenues and expenditures will be included in each year of the five year plan. There is no general fund impact.
- b. Service Level Impacts Existing service levels will be maintained.







Youth Mental Health & Substance Abuse Services

Provide services to youth with mental health and/or substance abuse disorders in local high schools, outpatient clinic and in-home. Services provided include assessment, individual, family and group therapy, intensive in-home treatment, case management and high intensity drug trafficking area (HIDTA) prevention.

Key Measures	FY 12 Actual	FY 13 Actual	Trend	FY 14 Adopted	FY 15 Adopted
Clients completing treatment who improve in functioning	80%	77%	1	75%	75%
Clients satisfied with services	93%	97%	†	95%	95%
Teen clients who stop using drugs/alcohol		71.6%			71.6%
HIDTA prevention client change in grade point average	0.82	0.57	1	0.70	0.70
HIDTA prevention client change in school absences	(37%)	(36%)	1	(40%)	(35%)

	FY 12 <u>Actual</u>	FY 13 <u>Actual</u>	FY 14 <u>Adopted</u>	FY 15 <u>Adopted</u>
In-School Substance Abuse Treatment Services	\$780,452	\$842,056	\$847,479	\$881,018
Clients served	1,088	1,201	1,200	1,200
Clinic-Based Mental Health Treatment and Substance Abuse Treatment Services	\$595,643	\$614,764	\$634,465	\$657,990
Clients served	427	402	425	425
In-Home Mental Health and Substance Abuse Treatment Services	\$1,019,274	\$1,053,881	\$955,430	\$979,592
Clients served	118	154	125	125
Prevention Services	\$465,732	\$492,438	\$493,181	\$514,459
Prevention activity participants (students and parents)	206	203	180	210





Intellectual Disability Case Management Services

Provides support and connections to community resources and services for individuals who have an intellectual disability and may need assistance accessing supports in the community.

Key Measures	FY 12 Actual	FY 13 Actual	Trend	FY 14 Adopted	FY 15 Adopted
Program clients successfully maintained in the community	99%	99%	\leftrightarrow	96%	99%
Clients and family members satisfied with services	98%	91%	Ţ	90%	90%
County provides appropriate facilities and services to people with mental illness and/or intellectual disability (community survey)	84%	84%	\leftrightarrow	≥84%	≥84%

 \uparrow Trending Upward \leftrightarrow Stable \downarrow Trending Downward

Activities Program Activities & Workload Measures

	FY 12 <u>Actual</u>	FY 13 <u>Actual</u>	FY 14 <u>Adopted</u>	FY 15 Adopted
Case Management Services	\$2,059,923	\$2,483,319	\$2,982,093	\$3,203,401
Clients served	622	652	765	810

A. Budget Initiatives

1. Add Three Therapist II Positions and One Administrative Support Coordinator II Position for Intellectual Disability Case Management Services

Expenditure \$135,171
Revenue \$135,171
General Fund Impact \$0
FTE Positions 4.00

a. Description - The addition of three Therapist II FTEs and one Administrative Support Coordinator II FTE for the Intellectual Disability Case Management Services Program continues PWC's commitment to respond proactively to the U.S. Department of Justice (DOJ) settlement with the Commonwealth of Virginia. This settlement includes the planned closure of the Northern Virginia Training Center (NVTC) in 2015 and directly impacts County residents with intellectual and developmental disabilities living in institutions or in the community. The settlement also increases case management responsibilities by increasing face to face direct contact from once every 90 days to once a month for all 366 current Medicaid funded cases. The settlement also requires increased monitoring of vendors that report to the agencies of Licensing and Human Rights, both within the State Department of Behavioral Health and Developmental Services. These positions will continue to address the increased workload by working with the transitioning NVTC residents, families and potential service providers. The partial year cost for these positions in FY 15 is \$135,171; for FY 16 and ongoing, annual expenditures will be increased to \$273,051 to account for full year costs. Annual revenues is increased from \$135,171 to \$256,825 for increased case management Medicaid support. General fund support is increased by \$16,226 each year from FY 16 through FY 19.







b. Service Level Impacts

Case Management Services:

Clients Served:

FY 15 w/o Addition | 765 FY 15 w/ Addition | 810

Intellectual Disability Day Support Services

Vendors provide services in the community to individuals with Intellectual Disabilities that provide general day care or day program services to enable individuals to acquire, improve or maintain functional abilities, or obtain competitive employment.

Key Measures	FY 12 Actual	FY 13 Actual	Trend	FY 14 Adopted	FY 15 Adopted
Program clients successfully maintained in the community	97%	95%	1	95%	95%
Clients who are satisfied with program services	98%	98%	\leftrightarrow	95%	98%
County provides appropriate facilities and services to people with mental illness and/or intellectual disability (community survey)	84%	84%	\leftrightarrow	≥84%	≥84%

	FY 12	FY 13	FY 14	FY 15
	<u>Actual</u>	<u>Actual</u>	<u>Adopted</u>	<u>Adopted</u>
Day Care Services	\$577,744	\$593,662	\$581,038	\$581,232
Clients served	70	77	74	72
Day Support Services	\$977,351	\$909,088	\$1,044,990	\$1,045,183
Clients served	37	34	43	58
Sheltered Employment Services	\$661,868	\$558,281	\$751,038	\$751,232
Clients served	29	27	35	29
Supported Employment Services	\$1,010,645	\$900,577	\$1,026,037	\$1,026,231
Clients served	103	101	103	109





Mental Health Outpatient Services

Provides outpatient case management and treatment services to adults with serious mental illness and their families. Services include individual, family and group therapy, evaluations, case management and medication management.

Key Measures	FY 12 Actual	FY 13 Actual	Trend	FY 14 Adopted	FY 15 Adopted
Seriously mentally ill clients completing treatment who improve in functioning	90%	77%	1	75%	80%
Clients satisfied with services received	98%	95%	1	90%	95%
County provides appropriate facilities and services to people with mental illness and/or intellectual disability (community survey)	84%	84%	\leftrightarrow	≥84%	≥84%

 \uparrow Trending Upward \leftrightarrow Stable \downarrow Trending Downward

Program Activities & Workload Measures

	FY 12 <u>Actual</u>	FY 13 <u>Actual</u>	FY 14 <u>Adopted</u>	FY 15 <u>Adopted</u>
Seriously Mentally Ill Adult and Family Services	\$3,051,614	\$3,004,303	\$3,303,524	\$3,237,800
Clients served	1,238	1,270	1,325	1,275

Substance Abuse Adult Outpatient Services

Provides outpatient treatment services to adults with substance use disorders and their families. Services include individual, family and group therapy, evaluations, case coordination and community referrals.

Key Measures	FY 12 Actual	FY 13 Actual	Trend	FY 14 Adopted	FY 15 Adopted
Clients who are substance free upon completion of treatment		65%			65%
Customers satisfied with services received	99%	97%	1	90%	90%

	FY 12 <u>Actual</u>	FY 13 <u>Actual</u>	FY 14 <u>Adopted</u>	FY 15 <u>Adopted</u>
Adult Substance Abuse Services	\$2,129,612	\$2,234,641	\$2,322,442	\$2,269,431
Clients served	1,334	1,377	1,335	1,335







A. Budget Initiatives and Shifts

1. Modification of Positions within Substance Abuse Adult Outpatient Services

Expenditure	\$O
Revenue	\$0
Budget Shifts	\$45,116
General Fund Impact	\$ O
FTE Positions	0.00

- **a.** Description -. This shift eliminates two part-time positions, a 0.50 CS Therapist II and a 0.25 Therapist III and creates a .75 Therapist II position within Substance Abuse Adult Outpatient Services. This item was adopted by the Board of County Supervisors on February 11, 2014, per BOCS Resolution 14-81.
- **b.** Service Level Impacts Existing FY 15 service levels will be maintained.

Drug Offender Recovery Services

Provide a comprehensive drug treatment continuum of care for offenders with the most severe drug dependence disorders, including HIDTA prevention. Avoid gaps in services that result in relapse and recidivism through close collaboration with the Adult Detention Center (ADC) and probation agencies. Services include assessments, individual and group therapy, case management, medication assisted treatment, residential and jail-based treatment and family support.

Key Measures	FY 12 Actual	FY 13 Actual	Trend	FY 14 Adopted	FY 15 Adopted
Criminal Justice clients who stop using drugs	50%	40%	1	50%	45%
Drug Offender Rehabilitation Module (DORM) clients who do not return to the ADC within 3 years	71%	69%	1	67%	67%

	FY 12 <u>Actual</u>	FY 13 <u>Actual</u>	FY 14 <u>Adopted</u>	FY 15 <u>Adopted</u>
Adult Detention Center Services	\$964,937	\$941,873	\$996,461	\$1,005,516
Inmates treated in male and female dormitories	175	188	180	190
Community Criminal Justice Services	\$488,850	\$554,756	\$641,524	\$645,206
HIDTA clients served	70	63	80	65
Intensive case management clients served	171	97	200	125





Administrative Services

Administrative Services of CS includes the areas of Accounting and Procurement, Management Information Systems, Human Resources Management and Leadership and Management Oversight. Accounting and Procurement is responsible for the fiscal and budget management and reporting, State and County reporting, client billing and reimbursement and procurement. Management Information System coordinates with the CS Client Information Management System/Electronic Health Record. Human Resource Management coordinates with CS management and County Human Resources regarding all personnel matters, including hiring, benefits coordination, annual employee performance review process and tracking of employee education and certifications. It is the responsibility of Leadership to work with the CSB, staff and community stakeholders to ensure these services are effective and provide the best return on investment of tax dollars possible.

Key Measures	FY 12 Actual	FY 13 Actual	Trend	FY 14 Adopted	FY 15 Adopted
Change in fee revenue received from prior fiscal year	+32.4%	-2.6%	1	+5.0%	+2.4%
Customers rating services as helpful	<u>—</u>	95%			95%

 \uparrow Trending Upward \leftrightarrow Stable \downarrow Trending Downward

Program Activities & Workload Measures

	FY 12 <u>Actual</u>	FY 13 <u>Actual</u>	FY 14 <u>Adopted</u>	FY 15 <u>Adopted</u>
Accounting and Procurement	\$1,115,989	\$1,229,734	\$1,002,760	\$1,037,395
Fees collected	\$5.43m	\$5.29m	\$5.00m	\$5.00m
Management Information Systems	\$849,787	\$632,885	\$885,917	\$970,346
Customers rating services as helpful	95%	94%	90%	90%
Human Resources Management	\$188,278	\$175,210	\$185,597	\$194,917
Resumes received from Human Resources	369	355	400	370
Leadership and Management Oversight	\$1,087,987*	\$1,128,122*	\$1,126,381*	\$1,161,820
Total agency clients served	7,661	8,295	8,041	8,100

^{*}Includes Office of Executive Director Program totals (see General Overview, Item D.)

A. Budget Initiative

1. Increase Human Services Technology Applications Support

Expenditure \$40,225 Revenue (\$114,060) General Fund Impact \$154,315 FTE Positions 0.00







- **a. Description** This initiative funds the increase in maintenance support of the human services technology systems and the shift in funding sources from the Technology Improvement Plan (TIP) Holding Account to the general fund. The budget is located in CS' 4000 series, providing revenue to the Information Technology internal service fund. The general fund support for the maintenance of human service systems in the TIP totals \$801,206, FY 15 through FY 19.
- **b.** Service Level Impacts Existing service levels are maintained.

Medical Services

Provide psychiatric evaluations, assessments as to the need for medication and medical follow-up to clients. Nursing staff maintain medication records and inventory and provide patient care as directed by psychiatrists. Medical Services also provides medical consultation to other staff regarding clients, as well as education about psychotropic medication to staff and clients.

Key Measures	FY 12 Actual	FY 13 Actual	Trend	FY 14 Adopted	FY 15 Adopted
Customers satisfied with services received	90%	84%	↓	86%	90%
County provides appropriate facilities and services to people with mental illness and/or intellectual disability (community survey)	84%	84%	\leftrightarrow	≥84%	≥84%

	FY 12 <u>Actual</u>	FY 13 <u>Actual</u>	FY 14 <u>Adopted</u>	FY 15 <u>Adopted</u>
Medical Services	\$2,056,658	\$2,206,315	\$2,341,292	\$2,649,669
Total clients served	2,009	2,043	2,397	2,600



HOUSING & COMMUNITY DEVELOPMENT



Mission Statement

The Office of Housing & Community Development will develop affordable housing opportunities and neighborhood resources for low and moderate-income area residents by implementing appropriate policies and programs, which provide a safe and healthy environment in which to work and play.



Expenditure Budget: \$35,085,402

28.1% of Human Services

Programs:

- Community Preservation & Development: \$4,879,746
- Housing Finance & Development: \$1,026,053
- Rental Assistance: \$29,169,603
- Not Program Related: \$10,000

Human Services Expenditure Budget \$124,843,148

Mandates

The Office of Housing & Community Development does not provide a state or federal mandated service. Some federal grants require certain activities to be performed; however, these are not considered mandates since the County is not obligated to accept the grant funding.



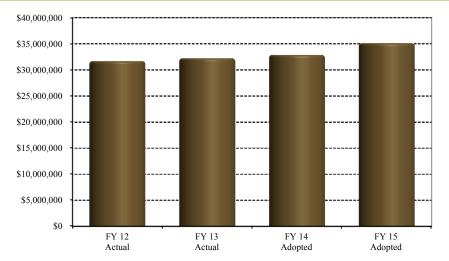




Expenditure and Revenue Summary

					% Change
	FY 12	FY 13	FY 14	FY 15	Adopt 14/
Expenditure by Program	Actual	Actual	Adopted	Adopted	Adopted 15
1 Community Preservation & Development	\$2,288,111	\$1,631,369	\$2,081,464	\$4,879,746	134.44%
2 Housing Finance & Development	\$222,709	\$845,397	\$927,899	\$1,026,053	10.58%
3 Rental Assistance	\$29,029,790	\$29,535,724	\$29,677,935	\$29,169,603	-1.71%
4 Transitional Housing Prop Management	\$131,688	\$187,376	\$168,646	\$0	-100.00%
5 Housing Trust Fund	\$9,640	\$10,350	\$10,200	\$10,000	-1.96%
Total Expenditures	\$31,681,938	\$32,210,216	\$32,866,144	\$35,085,402	6.75%
Expenditure by Classification					
1 Personal Services	\$1,664,532	\$1,638,468	\$1,752,667	\$1,727,768	-1.42%
2 Fringe Benefits	\$521,167	\$575,858	\$588,549	\$555,955	-5.54%
3 Contractual Services	\$1,807,312	\$1,263,958	\$1,752,391	\$4,343,375	147.85%
4 Internal Services	\$130,283	\$144,903	\$117,524	\$111,533	-5.10%
5 Other Services	\$27,305,097	\$28,497,419	\$28,440,050	\$28,239,623	-0.70%
6 Capital Outlay	\$48,740	\$0	\$90,000	\$0	-100.00%
7 Leases and Rentals	\$20,469	\$21,499	\$46,932	\$30,880	-34.20%
8 Transfers Out	\$184,338	\$68,111	\$78,031	\$76,268	-2.26%
Total Expenditures	\$31,681,938	\$32,210,216	\$32,866,144	\$35,085,402	6.75%
Funding Sources					
1 Revenue from Use of Money & Prop	\$69,870	\$28,538	\$25,000	\$15,000	-40.00%
2 Charges for Services	\$3,287,989	\$4,402,407	\$3,723,190	\$5,124,233	37.63%
3 Miscellaneous Revenue	\$0	\$61,597	\$25,000	\$30,000	20.00%
4 Revenue From Commonwealth	\$27,654	\$0	\$0	\$0	
5 Revenue From Federal Government	\$25,778,172	\$26,921,748	\$29,021,905	\$29,874,358	2.94%
6 Non-Revenue Receipts	\$4,889	\$2,561	\$0	\$0	
7 Fund Balance	\$2,461,828	\$726,122	\$49,967	\$0	-100.00%
Total Designated Funding Sources	\$31,630,402	\$32,142,973	\$32,845,062	\$35,043,591	6.69%
Net General Tax Support	\$51,536	\$67,243	\$21,082	\$41,811	98.33%
Net General Tax Support	0.16%	0.21%	0.06%	0.12%	

Expenditure History



■ OTHER RESOURCES
■ NET TAX SUPPORT



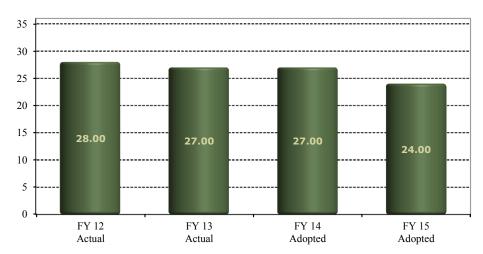




Staffing History



Full-Time Equivalent (FTE) Positions



Staffing by Program



	FY 12 Actual	FY 13 Actual	FY 14 Adopted	FY 15 Adopted
1 Community Preservation & Development	4.68	3.30	2.80	4.33
2 Housing Finance & Development	1.26	0.98	1.11	0.92
3 Rental Assistance	21.65	21.74	21.74	18.69
4 Transitional Housing Prop Management	0.39	0.91	1.29	0.00
5 Housing Trust Fund	0.02	0.07	0.06	0.06
Full-Time Equivalent (FTE) Total	28.00	27.00	27.00	24.00

Future Outlook

Federal Budget Decisions Impact Local Economy - Office of Housing & Community Development (OHCD) is a County agency that receives the vast majority of its funding from the federal government for federal housing programs such as Community Development Block Grant (CDBG), Home Investment Partnerships program, Emergency Solutions Grant (ESG) and Housing Choice Voucher program (HCVP). The biggest of these programs is the HCVP which currently provides rental assistance to an average of 1,764 low income families in Prince William per month. Through this program, over \$29 million annually of federal money is brought into the Prince William economy primarily through payments to landlords and homeowners.

More than 8,600 Families Waiting for Affordable Housing - Federal funding for our affordable housing programs continues to decline. Should this trend continue OHCD's ability to serve the most at-risk members of our community with housing solutions will be limited. The largest impact from decreased funding levels is anticipated with the HVCP that provides rental assistance for low income families, many of whom are elderly and/or disabled. Due to current funding reductions OHCD cannot utilize approximately 294 of the baseline 2,058 vouchers. At the current level of funding, it will take six to eight years before the 1,985 households with elderly and disabled individuals now on our waiting list of 8,616 families can be served.







Community Development Funding Continues to Decline - OHCD is also concerned about possible funding reductions in the Community Development programs. In FY 13 funding to these programs was reduced by approximately 16%. Because of the County's population growth our CDBG allocation has increased slightly over the past year. Also, because of federal programing changes, the ESG program funding was increased to fund the Department of Housing and Urban Development's (HUD) new Rapid Rehousing program for rehousing the homeless. The Home Investment Partnerships program has had continued decreases in funding. Total funding has been reduced by 33% from the FY 12 funding level of \$847,491 to \$567,720. Any future reductions will affect our ability to assist community partners that provide housing services in the community such as permanent supportive housing, homeless services and housing counseling. Other services, like direct assistance to low income homeowners to assist them with necessary repairs to their homes, and home buying assistance, which provides first-time homebuyers with down-payment and closing cost assistance, will be affected as well.

Focus Shifts to Strengthening Family Sufficiency - OHCD must investigate alternative funding sources and increase family self-sufficiency efforts to reduce costs in order to assist additional families. Self-sufficiency efforts this past year include expanding program activities to all program participants, expanding outreach to community partners and expanding the program curriculum to focus on these five key area – Education, Employment Readiness & Entrepreneurship, Financial Fitness, Health and Wellness and Strengthening Families. OHCD will also have to pursue opportunities to partner with other County agencies and community organizations that provide viable affordable housing solutions for County citizens. One example of this will come from the release of funding from the county's Housing Preservation and Development Fund (HPDF) in CY 2014. These funds will be available through a competitive process to successful applicant(s) for providing affordable housing solution/options within the county. Another example is OHCD's partnership with the Department of Social Service and Skill Source, a local nonprofit for assisting Temporary Assistance for Needy Families (TANF) recipients with finding employment or internships with local employers.

General Overview

- A. Internal Service Fund (ISF) Technology Billing The County allocates all technology costs to agencies through an ISF. The Department of Information Technology (DoIT) annually recalculates each agency's ISF bill, using the approved cost bases for each technology activity. Technology activities include phone, radio and computer support, business systems support, GIS, web services, capital equipment and administration. In FY 15, OHCD's technology bill increased by \$3,009 to \$81,570.
- **B.** Reorganization OHCD shifted the Transitional Housing Property Management activity into the Community Preservation and Development program, thereby eliminating Transitional Housing Property Management as a free-standing program.
- **C. 2013 Federal Sequestration** The sequester eliminated the funds needed to provide rental assistance to 243 Prince William area families and caused the elimination of 1.97 vacant FTE positions. The program impacts by program are as follows:

Sequestration Impact						
Program	Revenue	Expenditure	FTE			
Community Preservation & Development	(\$61,882)	(\$73,799)	0.00			
Housing Finance & Development	(\$545)	\$8,759	0.00			
Rental Assistance	(\$1,432,813)	(\$1,432,813)	(1.97)			
Total Impact	(\$1,495,240)	(\$1,497,853)	(1.97)			







D. Adopted Plans and Contracts - The adopted Consolidated Plan, the Intergovernmental Agreement with Northern Virginia Regional Commission (NVRC) for the 2013-2014 Housing for People with AIDS contract, and the 2013 contract for Administrative Costs, Portability Billing and Self Sufficiency Grant impacts by program are as follows, including the elimination of 0.03 vacant FTE position (a portion of one of the FTE cut in Rental Assistance above):

Adopted Plans and Contracts					
Program	Revenues	Expenditures	FTE		
Community Preservation & Development	\$876,037	\$831,749	(0.03)		
Housing Finance & Development	\$80,175	\$91,626	0.00		
Rental Assistance	\$963,382	\$871,839	0.00		
Not Program Related	\$0	(\$62)	0.00		
Total Impact	\$1,919,594	\$1,795,152	(0.03)		

- **E.** Compensation Increase Compensation adjustments totaling \$25,831 are made to support the following rate changes:
 - 5% Retiree Health;
 - -0.21% and -1.21% VRS employer rate for Plan I and Plan II employees, respectively;
 - 2.7% Health Insurance;
 - 3% Pay-for-Performance;
 - 0.13% Group Life; and
 - 1% Salary adjustment to offset the required VRS contribution by Plan I and some Plan II employees.

Additional detail concerning these adjustments can be found in the Unclassified Administrative section of Non-Departmental.

- **F.** Use of Fund Balance The proposed FY 15 budget included, as a revenue source, \$25,831 from OHCD's fund balance. To eliminate this as a revenue source, a vacant Housing Program Specialist position (1 FTE) was eliminated as part of the FY 15 budget, and resources were shifted to align with anticipated federal funding.
- **G. Community Partner** OHCD has partnered with Open Door, through the Council of Governments, to provide affordable housing. The partnership is shifted from an interjurisdictional agreement to a community partner donation in the FY 15 budget. This initiative reflects a 3% increase in the donation to the community partner in the agency budget totaling \$322. The increase supports existing service levels. The total donation amount provided to the agency community partner is \$11,404 in FY 15. For additional detail please refer to the Community Partners section.







Program Summary

Community Preservation & Development

The Community Preservation & Development Division administers two federal programs through HUD, the CDBG program and the ESG program. The County has a Cooperative Agreement with the Cities of Manassas and Manassas Park to conduct their housing and community development activities. A portion of the CDBG funds are set aside on a competitive basis to eligible outside agencies for specific eligible activities that meet CDBG National Objectives and further the Prince William Area's goals and objectives, as stated in the five year consolidated plan. The largest portion of CDBG funds are devoted to housing rehabilitation activities of owner occupied low and moderate-income households. The ESG funding is provided to local shelters towards operating costs and programs to rapidly rehouse the homeless. Additionally, the Stewart B. McKinney Homeless Assistance Act of 1988 and the Base Closure and Realignment Act mandated that federal agencies make any usable surplus real property available to units of government and non-profits organizations for sheltering the homeless. The County received property under the Act in March 1994 with a 30 year deed restriction to use the property solely for serving the homeless. OHCD operates seven (7) transitional housing units for families referred by local shelters.

Key Measures	FY 12 Actual	FY 13 Actual	Trend	FY 14 Adopted	FY 15 Adopted
Persons provided with housing and other related services - CDBG	795	361	1	266	361
Persons provided with homelessness prevention and emergency shelter services - ESG	1,344	1,169	1	1,344	1,169
Families assisted by OHCD with low-income housing	2,573	2,950	↑	2,573	2,950
Families successfully completing the transitional housing program and moving to permanent housing		100%		_	75%

 \uparrow Trending Upward \longleftrightarrow Stable \downarrow Trending Downward

	FY 12 <u>Actual</u>	FY 13 <u>Actual</u>	FY 14 <u>Adopted</u>	FY 15 <u>Adopted</u>
Housing Rehabilitation	\$1,684,127	\$706,532	\$1,295,031	\$3,230,039
Substandard single-family housing units rehabilitated	12	13	12	20
Community Improvement & Housing Supportive Services	\$603,984	\$677,432	\$786,432	\$798,707
Persons provided with homelessness prevention and emergency shelter services Improvement projects managed	1,344 17	1,169 13	1,344 14	1,169 13
Manage Transitional Housing at Dawson Beach Homeless families served	_ _	_ _	_ _	\$851,000 7





A. Budget Initiatives

1. Use of Prior Year Funding

Expenditure \$1,824,142
Revenue \$1,824,142
General Fund Impact \$0
FTE Positions 0.00

- **a. Description** HUD has identified \$1,824,142 in unspent prior appropriations available for OHCD for community preservation, allowing for additional rehabilitated units.
- **b.** Service Level Impacts The service level impact of this initiative is as follows:
 - Substandard single family housing units rehabilitated:

FY 15 w/o Addition | 12 FY 15 w/ Addition | 20

Housing Finance & Development

Prince William County, including the Cities of Manassas and Manassas Park through a Cooperative Agreement, receives an annual allocation of Home Investment Partnerships funding from HUD. The program objective is to provide decent affordable housing to low-income households; expand the capacity of non-profit housing providers; strengthen the ability of state and local governments to provide housing; and leverage private-sector participation. Federal funds are utilized for the First-Time Homebuyer Program which provides down payment and closing cost assistance for residents of Prince William County and the cities of Manassas and Manassas Park. Also, at least 15% of the allocation is set aside for specific activities to be undertaken by a special type of non-profit called a Community Housing Development Organization (CHDO) that develops affordable housing for the community it serves.

Key Measures	FY 12 Actual	FY 13 Actual	Trend	FY 14 Adopted	FY 15 Adopted
Federal and state funds used to assist eligible households to become first-time homebuyers	\$55,660	\$446,420	1	\$487,194	\$446,420
Private mortgage financing generated on behalf of first-time homebuyers	\$0.2m	\$1.6m	1	\$1.0m	\$1.6m
Families assisted by OHCD with low-income housing	2,573	2,950	1	2,573	2,950

	FY 12 <u>Actual</u>	FY 13 <u>Actual</u>	FY 14 <u>Adopted</u>	FY 15 <u>Adopted</u>
Homeownership Assistance	\$222,709	\$503,737	\$927,899	\$1,026,053
Families assisted to become first-time homebuyers	1	9	5	7
Affordable housing units added, with counseling to the				
families that rent or purchase the units	_	_	_	25







Rental Assistance

The Rental Assistance Unit manages the Housing Choice Voucher program, which is a federally funded rental assistance program. Funding is provided through HUD to assist eligible low-income County residents with obtaining safe, decent and affordable housing.

Key Measures	FY 12 Actual	FY 13 Actual	Trend	FY 14 Adopted	FY 15 Adopted
Eligible elderly and disabled persons in HCVP provided with rental assistance	40%	40%	\leftrightarrow	40%	40%
Family Self Sufficiency Grant families who successfully meet program goals	95%	88%	Ţ	93%	90%
Rental income paid to local property owners on behalf of families	\$24.0m	\$23.5m	1	\$24.0m	\$23.0m
Annual HCVP performance evaluation score from HUD	100%	100%	\leftrightarrow	98%	98%
Families assisted by OHCD with low-income housing	2,573	2,950	†	2,573	2,950

 \uparrow Trending Upward \leftrightarrow Stable \downarrow Trending Downward

	FY 12 <u>Actual</u>	FY 13 <u>Actual</u>	FY 14 <u>Adopted</u>	FY 15 Adopted
Housing Assistance Program Payments	\$27,181,399	\$23,364,018	\$27,646,642	\$27,425,388
Families provided with rental assistance	2,248	2,243	2,143	1,900
Housing Assistance Program Administration	\$1,848,391	\$1,900,711	\$2,031,294	\$1,744,215
Participant eligibility determinations	2,098	2,071	1,971	1,971





Transitional Housing Program Management (shifted into CP&D)

The Stewart B. McKinney Homeless Assistance Act of 1988 and the Base Closure and Realignment Act of 1988 mandated that federal agencies make any usable surplus real property available to units of government and non-profits organizations for sheltering the homeless. In 1994 the County received federal property with a 30 year deed restriction to use the property solely for serving the homeless. OHCD operates seven (7) transitional housing units for families referred by local shelters.

Key Measures	FY 12 Actual	FY 13 Actual	Trend	FY 14 Adopted	FY 15 Adopted
Families successfully completing the program and moving to permanent housing	75%	100%	†	75%	
Families assisted by OHCD with low-income housing	2,573	2,950	†	2,573	

Trending Upward	↔ Stable	↓ Trending Downward
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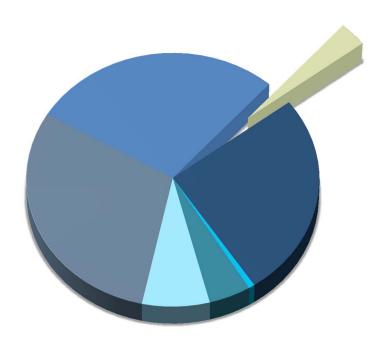
	FY 12 <u>Actual</u>	FY 13 <u>Actual</u>	FY 14 <u>Adopted</u>	FY 15 Adopted
Manage Transitional Housing at Dawson Beach	\$131,688	\$136,000	\$168,646	_
Homeless families served	7	7	7	_





Mission Statement

Public Health will promote optimum health and the adoption of healthful lifestyles; assure access to vital statistics, health information, preventive health, environmental health and dental services; and assist Prince William County, the city of Manassas and the city of Manassas Park in emergency preparedness efforts.



Expenditure Budget: \$3,947,974

3.2% of Human Services

Programs:

■ Maternal & Child Health: \$1,139,424

■ General Medicine: \$1,632,991

■ Dental Health: \$149,205

■ Environmental Health: \$858,323

■ Administration/Emergency Preparedness: \$168,031

Human Services Expenditure Budget \$124,843,148

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 the Prince William Health District. State mandated services provided on behalf of Prince William County by Prince William Health District include childhood immunizations, pre-school physicals for school entry, rabies control and vital records - death certificates.

The Board of County Supervisors has enacted additional local mandates for which Prince William Health District has responsibility.

State Code: 32.1-46 (Childhood Immunizations), 22.1-270 (Pre-school physicals for school entry); 32.1-254 (Vital Records - Death Certificates) and 3.2-6562.1 (Rabies Control)

County Code: Chapter 3 (<u>Amusements</u>), Chapter 8 (<u>Environmental Protection</u>), Chapter 10 (<u>Concession Stands at Youth Activities</u>), Chapter 12 (<u>Massage Establishments</u>), Chapter 22 (<u>General Environmental and Nuisances/Health and Safety Menaces</u>), Chapter 23 (<u>Individual Sewage Disposal Systems</u>), Chapter 25.1 (<u>Swimming Facilities</u>), Chapter 30 (<u>Water Supply</u>)



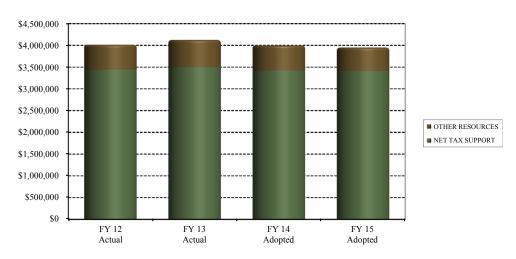




Expenditure and Revenue Summary

	FY 12	FY 13	FY 14	ESV 1.5	% Change
Expenditure by Program	FY 12 Actual	Actual	Adopted	FY 15 Adopted	Adopt 14/ Adopted 15
					•
1 Maternal & Child Health	\$1,161,345	\$1,207,706	\$1,159,877	\$1,139,424	-1.76%
2 General Medicine	\$1,658,110	\$1,664,790	\$1,666,500	\$1,632,991	-2.01%
3 Dental Health	\$149,475	\$155,468	\$149,205	\$149,205	0.00%
4 Environmental Health	\$867,137	\$895,781	\$853,329	\$858,323	0.59%
5 Administration/Emergency Preparedness	\$178,172	\$199,616	\$171,381	\$168,031	-1.95%
Total Expenditures	\$4,014,239	\$4,123,361	\$4,000,292	\$3,947,974	-1.31%
Expenditure by Classification					
1 Personal Services	\$249,210	\$214,808	\$257,183	\$223,625	-13.05%
2 Fringe Benefits	\$71,071	\$68,134	\$80,181	\$76,928	-4.06%
3 Contractual Services	\$520	\$461	\$1,815	\$1,815	0.00%
4 Internal Services	\$33,785	\$39,645	\$25,899	\$22,583	-12.80%
5 Other Services	\$3,659,653	\$3,800,314	\$3,635,214	\$3,623,023	-0.34%
Total Expenditures	\$4,014,239	\$4,123,361	\$4,000,292	\$3,947,974	-1.31%
Funding Sources					
1 Permits, Privilege Fees & Regular Licenses	\$158,319	\$167,028	\$151,013	\$151,013	0.00%
2 Non-Revenue Receipts	\$96	\$0	\$0	\$0	_
3 Revenue From Other Localities	(\$43,848)	(\$41,389)	\$198,347	\$156,158	-21.27%
4 Revenue From Commonwealth	\$458,800	\$492,932	\$228,351	\$228,351	0.00%
Total Designated Funding Sources	\$573,367	\$618,571	\$577,711	\$535,522	-7.30%
Net General Tax Support	\$3,440,872	\$3,504,789	\$3,422,581	\$3,412,452	-0.30%
Net General Tax Support	85.72%	85.00%	85.56%	86.44%	

Expenditure History





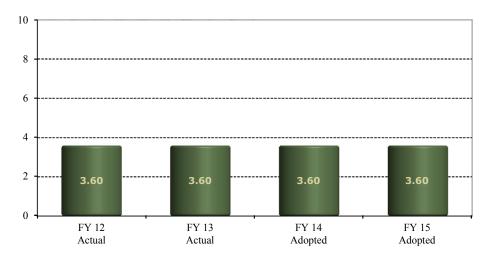




Staffing History







Staffing by Program



	FY 12 Actual	FY 13 Actual	FY 14 Adopted	FY 15 Adopted
1 Maternal & Child Health	0.00	0.00	0.00	0.00
2 General Medicine	3.00	3.00	3.00	3.00
3 Dental Health	0.00	0.00	0.00	0.00
4 Environmental Health	0.60	0.60	0.60	0.60
5 Administration/Emergency Preparedness	0.00	0.00	0.00	0.00
Full-Time Equivalent (FTE) Total	3.60	3.60	3.60	3.60

Note: Figures are for County positions only and do not include State positions totaling 91.00 FTE.

Future Outlook

Healthcare Environment - The dynamic health care environment and the uncertainty of the health care delivery system have created some emerging public health issues. Public health is the practice of preventing disease, encouraging environmental improvements and promoting health, which ostensibly helps to contain health care costs. We must continue to monitor how changes in the healthcare delivery system may be affecting public health.

Population Diversity - Prince William County has become a majority minority community, so addressing health disparities and differences in health status between people of different ethnic and racial backgrounds has become an emerging challenge. We must provide better health data and health information specific to all populations. We also must deliver appropriate information to increase health literacy and related health workforce development. In addition, integrating health considerations into planning and policy development to improve the health determinants of the entire Prince William area is an essential concept to understand and apply because the community's health is affected by the quality of the environment where our residents work, play and live. Therefore, it is important to consider community, individual, and environmental health during decision-making processes, such as neighborhood planning, to protect and to improve the health of our residents.







Emergency Management - The Prince William Health District (PWHD) Emergency Preparedness and Response program institutes initiatives to upgrade and integrate state, regional and local public health jurisdictions' preparedness to respond to terrorism and other public health emergencies such as natural and man-made disasters, including emerging diseases of public health significance. This program supports the ability of hospitals and health care systems to prepare for and respond to terrorism and other public health and health care emergencies. In addition, the services delivered are designed to develop emergency-ready communities. One key element to the Emergency Preparedness and Response program is the management of the Greater Prince William Medical Reserve Corps, a team of medical and non-medical volunteers who train to augment PWHD efforts during emergencies and public health events. Uncertainty in funding and potential reduction in federal funds for these efforts would impact the local community as planning, emergency management exercises, and response to public health emergencies that rely upon these services.

Continued Work Needed to Combat Communicable Disease - The PWHD's Communicable Disease Prevention, Investigation, Treatment and Control services work with local, regional, State and federal partners to prevent, detect, assess, respond, treat and control communicable diseases, emerging infections and terrorism related illnesses. Tuberculosis (TB) continues to become a more prevalent communicable disease in the community. The rise in TB now goes beyond the more common pulmonary TB, and complicated cases such as multi-drug resistant TB are becoming more prevalent. With increased global travel, the PWHD is detecting, treating, and mitigating the spread of communicable diseases that have not been previously common in Prince William County. Containing vaccine-preventable diseases has become a greater challenge due to emerging immunization practices.

Community Health Assessment Results - The PWHD recently completed and shared with the public a Community Health Assessment (CHA). The intent of the CHA is to provide valid and comprehensive information regarding the health of those residing within the Prince William Health District. The CHA was determined by utilizing secondary data sources and drawing from the results of a community-wide survey (Health Check Survey). The survey identified the following community public health concerns: the cost of health care, obesity, access to healthy foods, drug abuse, aging issues, mental health issues, dental care, alcohol abuse, lack of exercise and child abuse and neglect.

The PWHD hosted a series of three town hall meetings during which survey results and secondary data were presented and discussed to prioritize the identified public health issues. In addition, the PWHD facilitated similar meetings with local stakeholders (e.g., local and state officials, citizens, human service agencies, hospitals) to solicit their input concerning these issues.

Mental health and obesity were consistently identified as the priority public health issues for the community to address. Because research shows that behavioral and environmental factors in youth can affect mental health and obesity, the decision was made to focus on addressing these issues with children in the Prince William area. The PWHD is facilitating the development, implementation, and monitoring of a Community Health Improvement Plan that addresses these issues by promoting youth emotional wellbeing, with the goal to improve the emotional wellbeing of youth age 0-18 years in the Greater Prince William Area by helping youth develop skills and capacities that enable them to understand and navigate their world in healthy positive ways through targeted education and assessment. Childhood obesity is being addressed through the promotion of breastfeeding, which is shown to reduce the likelihood of obesity. The major focus of this initiative is to assist local hospitals in becoming designated breastfeeding friendly facilities.

Free Clinic Relocation - The Prince William Area Free Clinic has moved its services from PWHD clinics in Woodbridge and Manassas to a new consolidated health care facility at a church on the eastern end of the County. The community will need to monitor this change to ensure access to free primary care services remains available.





General Overview

- A. Internal Service Fund (ISF) Technology Billing The County allocates all technology costs to agencies through an ISF. The Department of Information Technology (DoIT) annually recalculates each agency's ISF bill, using the approved cost bases for each technology activity. Technology activities include phone, radio and computer support, business systems support, GIS, web services, capital equipment and administration. In FY 15, Public Health's technology bill decreased by \$3,316 to \$11,320.
- **B.** Community Partners Funding Increase This initiative reflects a 3% increase in the donation to the community partners in the agency budget totaling \$8,262. The increase supports existing service levels. The total donation amount provided to agency community partners is \$283,673 in FY 15. For additional detail please refer to the Community Partners section.
- C. Decrease in Revenue from Cities of Manassas and Manassas Park Financial support from the City of Manassas and Manassas Park, calculated according to the shared services agreement is decreased by \$31,335 and \$10,854, respectively.
- **D.** Compensation Increase Compensation adjustments totaling \$7,126 are made to support the following rate changes:
 - 5% Retiree Health;
 - -0.21% and -1.21% VRS employer rate for Plan I and Plan II employees, respectively;
 - 2.7% Health Insurance;
 - 3% Pay-for-Performance;
 - 0.13% Group Life; and
 - 1% Salary adjustment to offset the required VRS contribution by Plan I and some Plan II employees.

Additional detail concerning these adjustments can be found in the Unclassified Administrative section of Non-Departmental.





Program Summary

Maternal & Child Health

This program improves the health of women and children in the Prince William Health District by assessing their needs and assuring that quality services are accessible. This is accomplished through direct services, program monitoring and evaluation, public and customer education, consultation and training, and building and maintaining public/private partnerships. 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 direct services in this program is low income women and children who are uninsured or underinsured. Monitoring and education efforts serve the population at large.

Key Measures	FY 12 Actual	FY 13 Actual	Trend	FY 14 Adopted	FY 15 Adopted
Female clients of reproductive age seen in Health District clinics who have documented evidence of multivitamin with folic acid counseling	_	5.92%		_	24.00%
Children born in PWC with low birth weight	7.60%	7.00%	1	7.40%	7.00%
Infant deaths per 1,000 live births	6.0	4.2	1	5.8	5.6

 \uparrow Trending Upward \leftrightarrow Stable \downarrow Trending Downward

	FY 12 <u>Actual</u>	FY 13 <u>Actual</u>	FY 14 <u>Adopted</u>	FY 15 <u>Adopted</u>
Prenatal Care	\$690,199	\$717,871	\$688,952	\$688,952
Women served with prenatal care	696	366	600	350
Well Child Care	\$19,857	\$20,453	\$20,453	\$0
Children screened by Pediatric Primary Care Project	4,396	565	3,800	0
Women's Wellness	\$402,333	\$418,464	\$401,606	\$401,606
Women served in women's wellness clinics	1,665	1,671	1,710	1,710
Women, Infants and Children (WIC)	\$48,956	\$50,918	\$48,866	\$48,866
Participants in the WIC program at the end of the fiscal year	7,323	8,412	7,700	8,833





A. Budget Reductions

1. Eliminate Donation to Pediatric Primary Care Project

Expenditure (\$20,453)
Revenue \$0
General Fund Impact (\$20,453)
FTE Positions 0.00

- **a.** Description Public Health has analyzed the service provided by this community partner and determined that the actual number of children served in FY 13 was 565. No new clients were enrolled in FY 13. The return on investment of County funding for this program does not warrant a continued donation.
- **b. Service Level Impacts** Since no new clients were enrolled in the Pediatric Primary Care Project in FY 13, community service levels will be maintained.

General Medicine

This program improves the health of the community by:

- monitoring, investigating, controlling, and reporting the spread of communicable diseases including tuberculosis, vaccine preventable diseases, sexually transmitted diseases, and other communicable diseases, especially emerging diseases of public health significance;
- collaborating 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;
- 3) working 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 Prince William Health District.

Key Measures	FY 12 Actual	FY 13 Actual	Trend	FY 14 Adopted	FY 15 Adopted
Pre-admission nursing home screenings completed within 45 days	NA	43%			70%
Patients completing tuberculosis preventive therapy treatment	79%	85%	†	82%	90%
Vaccine-preventable childhood disease cases per 100,000 population	11.7	14.9	1	11.7	14.9





Program Activities & Workload Measures

	FY 12 <u>Actual</u>	FY 13 <u>Actual</u>	FY 14 <u>Adopted</u>	FY 15 <u>Adopted</u>
Sexually Transmitted Disease and AIDS Services	\$285,758	\$297,215	\$285,241	\$285,241
Persons seen for sexually transmitted disease services	1,405	1,312	1,400	1,400
Persons served by AIDS drug assistance services	142	173	140	140
Other Communicable Disease Services	\$988,543	\$971,074	\$989,637	\$947,866
Patients receiving tuberculosis preventive therapy	122	146	130	130
Suspected tuberculosis follow-ups	151	248	160	250
Chronic Disease Services	\$116,422	\$121,090	\$116,212	\$116,212
Persons screened for nursing home pre-admission and personal care services	413	448	400	450
Primary Health Care Services	\$267,387	\$267,387	\$275,410	\$283,672
Clients served by community partners	13,386	15,898	13,907	16,071

Dental Health

The Dental Health program provides clinical care and preventive services limited to uninsured low income children with significant barriers to care. In the community, prevention will be emphasized utilizing dental assistants to provide outreach activities beyond the dental health clinic to impact residents of all ages.

Key Measures	FY 12 Actual	FY 13 Actual	Trend	FY 14 Adopted	FY 15 Adopted
Medicaid eligible children with at least one sealant applied	10%	10%	\leftrightarrow		12%
Value of services delivered	\$635,775	\$616,529	1	\$650,000	\$280,000

 \uparrow Trending Upward \leftrightarrow Stable \downarrow Trending Downward

Program Activities & Workload Measures

	FY 12 <u>Actual</u>	FY 13 <u>Actual</u>	FY 14 <u>Adopted</u>	FY 15 Adopted
Dental Care	\$149,475	\$155,468	\$149,205	\$149,205
Total pediatric patient visits	1,952	1,829	2,000	840

Change in State Funding - The State has decided to change the focus of the Virginia Department of Health's dental care services from individual care to a preventive population-based focus, and has eliminated funding for local dental health programs. PWHD has chosen to continue the dental programs with local funding.





Environmental Health

This program enforces state and local codes and regulations that are 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, onsite sewage disposal systems, and other environmental health laws. Regulatory activities include permitting, inspections, testing, monitoring, and legal action when voluntary compliance is not achieved.

Key Measures	FY 12 Actual	FY 13 Actual	Trend	FY 14 Adopted	FY 15 Adopted
Food establishments in PWC without founded complaints of food borne illness	99.5%	99.5%	\leftrightarrow	97.0%	98.0%
Septic tank owners in compliance with Chesapeake Bay Preservation Act	74%	76%	↑	75%	75%
Discharge sewage systems in compliance with state regulations	57%	47%	1	70%	70%

 \uparrow Trending Upward \leftrightarrow Stable \downarrow Trending Downward

	FY 12 FY 13		FY 14	FY 15
	<u>Actual</u>	<u>Actual</u>	<u>Adopted</u>	<u>Adopted</u>
On-site Sewage System Permits and Maintenance	\$234,157	\$236,435	\$225,682	\$230,643
New on-site sewage applications completed	85	98	100	100
Water Supply Protection	\$64,349	\$66,929	\$64,233	\$64,233
Well samples collected for bacterial contamination	143	93	120	120
Repairs to on-site systems (remedial and preventive)	290	265	280	290
Inspection Services	\$398,934	\$413,334	\$395,185	\$395,185
Food establishment inspections	1,854	1,755	2,100	2,100
Environmental Complaint Investigations	\$96,519	\$102,971	\$95,159	\$95,193
Total environmental complaints investigated	201	287	200	250
Rabies Control	\$73,178	\$76,112	\$73,070	\$73,070
Animal quarantines completed	337	473	370	425





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. 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.

The client base for this program is comprised of all residents of Prince William County and the cities of Manassas and Manassas Park.

Key Measures	FY 12 Actual	FY 13 Actual	Trend	FY 14 Adopted	FY 15 Adopted
Increase in Medical Reserve Corps volunteers	42%	10%	1		15%
Community events during which emergency preparedness education is provided	NA	10			16
Customers reporting that they received the information or services they needed	NA	NA			80%

 \uparrow Trending Upward \leftrightarrow Stable \downarrow Trending Downward

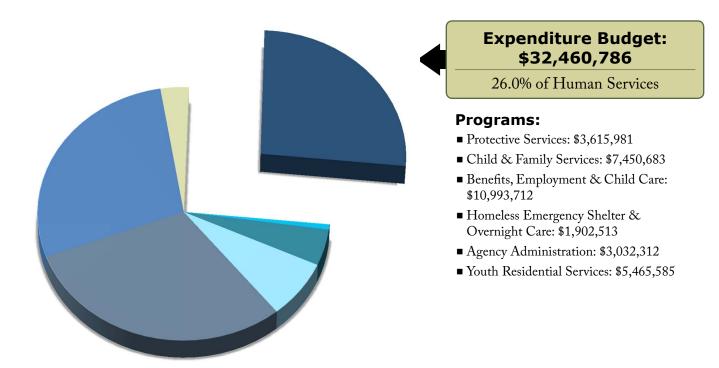
	FY 12 <u>Actual</u>	FY 13 <u>Actual</u>	FY 14 <u>Adopted</u>	FY 15 Adopted
Leadership and Management Oversight/ Emergency Preparedness	\$178,172	\$199,616	\$171,381	\$168,031
Public Health events that require emergency response plan activation	5	3	4	4
Medical Reserve Corps volunteers	496	545	520	600





Mission Statement

Enhance the quality of life in Prince William County by affording individuals and families the support, protection and safety necessary to enable them to build self-reliant lives.



Human Services Expenditure Budget \$124,843,148

Mandates

Prince William County is required by the state to establish a local board of social services to provide foster care, adoption, adoption assistance, child-protective services, domestic violence services, adult services, adult protective service or any other services mandates adopted by the State Board of Social Services. The Department of Social Services provides these mandated services.

State Code: 63.2-1503; 22 Virginia Administrative Code (VAC) 40-700; 22 VAC 40-705; 22 VAC 40-720; 22 VAC 40-730 (Child Protective Services), 32.1-330, 63.2-1602 and 63.2-1804 (Adult Care), 63.2-319, 63.2-900, 63.2-903, 63.2-905, 63.2-1105, 2.2-5211 (Prevention & Assessments and Family Treatment), 2.2-5211 and 63.2-905 (Foster Care), 63.2-217, 63.2-319, 63.2-616, 63.2-801 (Benefits and Child Care), 63.2-608 et seq, (Employment Services) 63.2-324 (Agency Director)





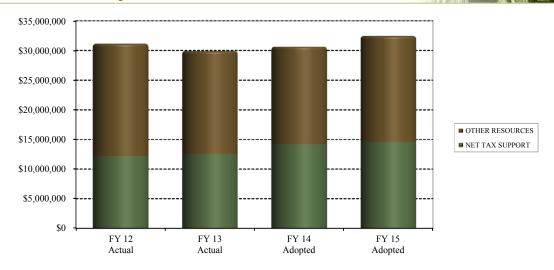
Expenditure and Revenue Summary

					% Change
	FY 12	FY 13	FY 14	FY 15	Adopt 14/
Expenditure by Program	Actual	Actual	Adopted	Adopted	Adopted 15
1 Protective Services	\$0	\$0	\$0	\$3,615,981	
2 Child and Family Services	\$0	\$0	\$0	\$7,450,683	_
3 Child Welfare	\$9,004,920	\$9,310,739	\$9,474,875	\$0	
4 Adult Services	\$1,037,550	\$960,387	\$1,045,591	\$0	
5 Benefits, Employment and Child Care	\$10,707,284	\$9,386,473	\$9,564,522	\$10,993,712	14.94%
6 Homeless Emergency Shelter and Overnight Care	\$1,961,992	\$1,650,126	\$1,736,212	\$1,902,513	9.58%
7 Agency Administration	\$3,409,605	\$3,332,043	\$3,451,696	\$3,032,312	-12.15%
8 Youth Residential Services	\$5,029,111	\$5,275,463	\$5,383,616	\$5,465,585	1.52%
Total Expenditures	\$31,150,461	\$29,915,231	\$30,656,512	\$32,460,786	5.89%
Expenditure by Classification					
1 Personal Services	\$16,427,241	\$16,496,629	\$17,024,247	\$17,708,057	4.02%
2 Fringe Benefits	\$5,187,892	\$5,721,061	\$6,024,395	\$5,999,201	-0.42%
3 Contractual Services	\$1,387,177	\$1,340,378	\$1,697,007	\$1,829,074	7.78%
4 Internal Services	\$1,136,194	\$1,269,590	\$968,496	\$996,477	2.89%
5 Other Services	\$6,562,536	\$4,665,730	\$4,688,919	\$5,643,318	20.35%
6 Capital Outlay	\$46,324	\$22,926	\$10,855	\$55,855	414.56%
7 Leases & Rentals	\$58,967	\$61,846	\$60,074	\$60,074	0.00%
8 Transfers Out	\$344,130	\$337,070	\$182,519	\$168,730	-7.55%
Total Expenditures	\$31,150,461	\$29,915,231	\$30,656,512	\$32,460,786	5.89%
Funding Sources					
1 Fines & Forfeitures	\$70	\$0	\$0	\$0	
2 Charges for Services	\$874,012	\$944,348	\$774,772	\$774,772	0.00%
3 Miscellaneous Revenue	\$50,344	\$102,220	\$44,400	\$44,400	0.00%
4 Revenue From Other Localities	\$14,868	\$18,156	\$25,340	\$15,687	-38.09%
5 Revenue From Commonwealth	\$6,626,375	\$5,868,204	\$5,542,975	\$6,436,535	16.12%
6 Revenue From Federal Government	\$11,211,492	\$10,285,834	\$9,946,471	\$10,444,073	5.00%
7 Non-Revenue Receipts	\$0	\$599	\$0	\$0	
8 Transfers In	\$157,931	\$105,621	\$103,475	\$111,632	7.88%
Total Designated Funding Sources	\$18,935,092	\$17,324,981	\$16,437,433	\$17,827,099	8.45%
Net General Tax Support	\$14,130,180	\$14,715,643	\$14,219,079	\$14,633,687	2.92%
Net General Tax Support	45.36%	49.19%	46.38%	45.08%	





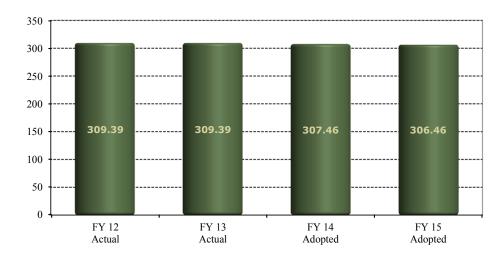
Expenditure History



Staffing History







Staffing by Program



	FY 12 Actual	FY 13 Actual	FY 14 Adopted	FY 15 Adopted
1 Protective Services	0.00	0.00	0.00	41.60
2 Child and Family Services	0.00	0.00	0.00	45.93
3 Child Welfare	78.33	79.53	79.53	0.00
4 Adult Services	5.80	6.00	6.00	0.00
5 Benefits, Employment and Child Care	120.53	121.53	120.00	131.00
6 Homeless Emergency Shelter and Overnight Care	4.30	4.30	3.30	4.30
7 Agency Administration	36.40	34.00	34.60	20.60
8 Youth Residential Services	64.03	64.03	64.03	63.03
Full-Time Equivalent (FTE) Total	309.39	309.39	307.46	306.46





Future Outlook

The Aging Population - The baby boom generation is approaching traditional retirement age. The number of adults in Virginia will reach 1.8 million by 2030; more than double than in 2000. Adults that reach the age of 65 and older begin to show signs of functional and cognitive limitations that may also restrict a person's ability to perform routine daily activities. The number of elderly people with functional or cognitive limitations impacts the need for assistance to include Long Term Services (LTS). About 80% of elderly people receiving such care live in the community. The remaining 20% obtain assistance in institutional settings, increasing the demand for Human Services. As the number of senior citizens increases, so do the number of older adults who are victims of mistreatment by family members, caretakers and others responsible for their wellbeing.

Individuals must continue to take steps to maintain their physical and cognitive health, engage in meaningful civic and social life of their communities and plan financially for a secure future. However, not all citizens have the means to make these steps and as a result, they become vulnerable in our community. Federal, state and local government, in partnership with corporate and non-profit partners, must collaborate to provide education information, to promote and to design livable communities and to ensure affordable, accessible services that offer support to older adults and family caregivers.

Technology Integration - In 2010, Virginia implemented a statewide technology initiative to reform the local social services' human services delivery system. The Commonwealth's initiative provided online, self-service access to social service benefit programs, 24 hours/day, 7 days/week. County citizens have the ability to apply for benefit programs online and see their eligibility review and status updates using the State's CommonHelp system. In October 2013, the state implemented a new Medicaid Eligibility Determination System (MADGI). The need for ongoing technology innovation is key to meet the demands and growing complexity of Human Services.

Federal/State Mandated Programs to Include Impacts of Medicaid Expansion - The Department of Social Services (DSS) must continue to meet the mandated program requirements as outlined by federal and state policies. The need for services continues to change throughout the County, which requires innovation and efficiency to meet the demand. Virginia opted not to expand Medicaid in the Commonwealth, opting instead to transform existing Medicaid policy and processes in Virginia. In the 2014 legislative session, the General Assembly will decide whether or not to expand Medicaid eligibility in Virginia. The County demographer estimates that the number of citizens eligible for Medicaid could potentially reach 13,400 if Medicaid is expanded. The majority of Medicaid recipients are children and adults. If enacted, this increase will have a major impact on the department.

General Overview

- **A. Compensation Adjustment** The County uses a budget control measure known as salary lapse in all general fund agencies with more than 20 employees. Salary lapse reduces employee compensation to account for turnover and the associated savings when longer term employees are replaced by individuals coming in at lower points on the pay scale. The amount of anticipated savings allocated to each agency is directly related to the number of FTEs in the general fund portion of the agency. In the FY 15 budget Social Services' salary lapse changed by \$9,750 to -\$172,235.
- **B.** Internal Service Fund (ISF) Technology Billing The County allocates all technology costs to agencies through an ISF. The Department of Information Technology (DoIT) annually recalculates each agency's ISF bill, using the approved cost bases for each technology activity. Technology activities include phone, radio and computer support, business systems support, GIS, web services, capital equipment and administration. In the FY 15 budget, Social Services' technology bill increased by \$30,688 to \$910,156.
- C. Roll FY 14 Social Services Budget Reconciliation (BOCS Resolution 13-452) into FY 15 Prince William County adopted its FY 14 budget on April 23, 2013 via BOCS Resolution 13-258. However, the County did not receive its final FY 14 budget allocations from the Virginia Department of Social Services (VDSS) until







- May 8, 2013. As a result each year the County must adjust its DSS budget to reflect the actual allocations awarded from all sources. If the funding adjustments are recurring, they are rolled forward into the subsequent fiscal year as part of the annual budget process. The FY 14 reconciliation results in a \$1,081,533 revenue and expenditure budget increase in FY 15. There is no additional general fund tax support.
- D. Roll BOCS Resolution 14-121 into FY 15 Overnight Care: In accordance with the management services contract for the Hilda Barg Homeless Prevention Center (HPC), the vendor is not authorized to directly receive local, state or federal funding for the services provided at the HPC. The vendor used to directly receive grant funds from the Office of Housing Development for the HPC. Now, these funds are being transferred to DSS and will be expended by DSS for services provided at the HPC. This is an administrative change only. This does not reflect an increase in the level of financial resources available to run the HPC. The revenue and expenditure budget in the Overnight Care program increased \$9,680. Molinari Juvenile Emergency Shelter Home: The Commonwealth has allocated \$8,106 to the Molinari Shelter to enable at-risk youth and court-involved youth to participate in the Youth Conservation Corps Program. Participants are paid a stipend for their involvement with projects that promote environmental protection. The revenue and expenditure budget increased \$8,106.
- E. New Programs and Realignment of Activities between Programs In FY 15, two new programs were created: Protective Services and Child and Family Services. The new programs are comprised of existing activities that have been shifted to align common goals. Also, the Agency Administration program has been broken down into four activities from one activity: Social Services Director's Office, Technology Support, Personnel Support and Fiscal Support. In prior years, Agency Administration included support personnel for all activities and some program managers. In FY 15, all the managers and support positions were shifted to the activity they primarily support. For example, ten positions in Agency Administration were shifted to Benefits, Employment and Child Care. (See table for detail).

	FY 14 Adopted		FY 15 Adopted	
Program	Activity	FTE	Activity	FTE
Protective Services (New in FY 15)	NA	-	Child Protective Services	36.
		-	Adult Protective Services	5.
		-		41.
Child & Family Services (New in FY 15)	NA	-	Foster Care	26.5
			Family Treatment	1
			Prevention & Assessments	
			Adult Care	1
				45.9
Child Welfare	Child Protective Services Investigations	33	NA	-
	Foster Care	27.53	NA	-
	Family Treatment	12	NA	-
	Prevention & Assessments	7	NA	-
		79.53		-
Benefits, Employment & Child Care	Employment Services	15.25	Employment Services	12
	Benefits & Child Care	101.65	Benefits & Child Care	115
	Fraud Investigations - BECC	3.1	Fraud Investigations - BECC	3
		120		13
Homeless Emergency Shelter & Overnight Care	Overnight Care	3.3	Overnight Care	4
		3.3		4
Adult Services	Adult Protective Services Investigations	4.6	NA	-
	Adult Care	1.4	NA	-
		6		-
Agency Administration	Agency Administration	34.6	Social Services Director's Office	
			Technology Support	
			Personnel Support	
			Fiscal Support	12
		34.6		20
Youth Residential Services	Secure Detention	45.53	Secure Detention	45.
	Juvenile Pretrial Supervision	6.25	Juvenile Pretrial Supervision	4.
	Molinari Juvenile Shelter	12.25	Molinari Juvenile Shelter	12.
		64.03		63.
	Total FTE	307.46		306.4







- **F.** Community Partners Funding Increase This initiative reflects a 3% increase in the donation to the community partners in the agency budget totaling \$17,313. The increase supports existing service levels. The total donation amount provided to agency community partners is \$594,422 in FY 15. For additional detail please refer to the Community Partners section.
- **G.** Decrease in Revenue from City of Manassas Park Financial support from the City of Manassas Park, calculated according to the shared services agreement is decreased by \$9,653.
- **H.** Compensation Increase Compensation adjustments totaling \$123,280 are made to support the following rate changes:
 - 5% Retiree Health;
 - -0.21% and -1.21% VRS employer rate for Plan I and Plan II employees, respectively;
 - 2.7% Health Insurance;
 - 3% Pay-for-Performance;
 - 0.13% Group Life; and
 - 1% Salary adjustment to offset the required VRS contribution by Plan I and some Plan II employees.

Additional detail concerning these adjustments can be found in the Unclassified Administrative section of Non-Departmental.

Program Summary

Protective Services

Protective Services has two mandated programs; Child Protective Services (CPS) and Adult Protective Services (APS). CPS screens and investigates allegations of abuse/neglect of children under the age of 18. APS screens and investigates allegations of abuse/neglect/exploitation of disabled or older adults.

Key Measures	FY 12 Actual	FY 13 Actual	Trend	FY 14 Adopted	FY 15 Adopted
Decrease reoccurring cases of adult abuse and neglect	7.30%	0.00%	1	6.00%	5.00%
Decrease reoccurring cases of child abuse and neglect	1.15%	0.72%	Ţ	1.10%	1.05%

 \uparrow Trending Upward \leftrightarrow Stable \downarrow Trending Downward





Program Activities & Workload Measures

	FY 12 <u>Actual</u>	FY 13 <u>Actual</u>	FY 14 <u>Adopted</u>	FY 15 <u>Adopted</u>
Child Protective Services (CPS) Investigations	\$2,940,587	\$2,642,918	\$2,704,878	\$3,096,413
Reports of alleged child abuse/neglect received by CPS	4,373	4,389	4,500	4,600
CPS complaints investigated & assessments completed	2,216	2,348	2,420	2,560
Founded CPS cases	435	416	450	450
Adult Protective Services (APS) Investigations	\$537,059	\$446,440	\$471,698	\$519,569
Reports of alleged adult abuse/neglect received by APS	736	652	760	700
APS complaints investigated	470	439	480	475
Founded APS cases	226	153	230	180

Child & Family Services

DSS provides counseling and case management services for children who have been abused and/or neglected. The program is designed to raise community awareness of abuse and neglect as well as to reduce risk to children. Child and Family Services also provides temporary and short term care for children whom have been abused and/or neglected.

Key Measures	FY 12 Actual	FY 13 Actual	Trend	FY 14 Adopted	FY 15 Adopted
Decrease reoccurring cases of child abuse and neglect	1.15%	0.72%	1	1.10%	1.05%
Increase permanency for foster care children	34%	32%	1	36%	38%

 \uparrow Trending Upward \longleftrightarrow Stable \downarrow Trending Downward

	FY 12	FY 13	FY 14	FY 15
	Actual	Actual	Adopted	Adopted
Foster Care	\$4,616,758	\$4,877,391	\$4,867,363	\$5,144,464
Children served in custodial foster care	206	203	210	205
Authorized foster care families	84	90	85	100
Family Treatment	\$748,273	\$998,178	\$1,062,154	\$1,036,974
Families served	212	387	220	400
Prevention and Assessments	\$699,302	\$792,253	\$840,480	\$800,286
Families served	308	295	320	310
Adult Care	\$500,491	\$513,947	\$573,893	\$468,959
Medicaid long-term care assessments	379	620	380	700





Benefits, Employment & Child Care

The Benefits, Employment & Child Care Division (BECC) is a multi-dimensional program whose primary focus is promoting self-reliance and prevention of dependency on public assistance. The administration of programs including SNAP (formerly Food Stamps), Medicaid, TANF, VIEW and Child Care Assistance contributes to family stabilization. The program serves Prince William County's most vulnerable residents in meeting their basic needs as they move toward achieving economic success.

Key Measures	FY 12 Actual	FY 13 Actual	Trend	FY 14 Adopted	FY 15 Adopted
TANF participants engaged in work activities	49%	51%	†	50%	51%
Medicaid cases reviewed within State mandated time frames (State mandate is 97%)	83%	90%	↑	90%	97%

Program Activities & Workload Measures

FY 12 <u>Actual</u>	FY 13 <u>Actual</u>	FY 14 <u>Adopted</u>	FY 15 <u>Adopted</u>
\$1,524,798	\$1,617,236	\$1,713,674	\$1,545,627
0	1,174	0	1,200
\$9,182,486	\$7,531,896	\$7,617,659	\$9,203,527
23,861	26,822	23,400	26,000
40,710	42,291	41,300	42,600
\$222,217	\$241,275	\$233,189	\$244,557
604	455	650	500
\$207,942	\$183,792	\$400,000	\$200,000
	Actual \$1,524,798 0 \$9,182,486 23,861 40,710 \$222,217 604	ActualActual\$1,524,798\$1,617,23601,174\$9,182,486\$7,531,89623,86126,82240,71042,291\$222,217\$241,275604455	Actual Actual Adopted \$1,524,798 \$1,617,236 \$1,713,674 0 1,174 0 \$9,182,486 \$7,531,896 \$7,617,659 23,861 26,822 23,400 40,710 42,291 41,300 \$222,217 \$241,275 \$233,189 604 455 650

A. Budget Reductions

1. Medicaid Eligibility Reimbursement Rate Increase

Expenditure \$0
Revenue \$300,000
General Fund Impact (\$300,000)
FTE Positions 0.00

- **a. Description** Effective October 1, 2013, Virginia was approved by the Center for Medicaid and Medicare (CMS) for enhanced Medicaid reimbursement. This enhanced reimbursement rate results in Prince William County receiving a 3% to 4% increase in the federal pass-through reimbursement rate. The annual average reimbursement rate, with this increase, is projected to be between 29% and 30%. Based on this new rate, DSS will receive an additional \$300,000 in federal pass-through money.
- **b.** Service Level Impacts Existing service levels are maintained.







Homeless Emergency Shelter & Overnight Care

Homeless Services provides a 30 bed shelter for families and single adults that offers comprehensive services including case management, job readiness, mental health counseling and medical referrals. Homeless Services also provides a 47 bed overnight shelter Winter Shelter for single adult men and women each year November 1 through March 31, from 6:30 p.m. to 7:00 a.m. The purpose of the shelter is to protect homeless residents from hypothermia during the winter season. The Homeless Services program provides financial and technical support to several community partners and HUD recipients.

Key Measures	FY 12 Actual	FY 13 Actual	Trend	FY 14 Adopted	FY 15 Adopted
Number of times a homeless individual is turned away due to bed unavailability	_	6,384		_	6,000
Point in time homeless count	467	447	1	432	410

Trending Upward	↔ Stable	↓ Trending Downward
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Program Activities & Workload Measures

	FY 12 <u>Actual</u>	FY 13 <u>Actual</u>	FY 14 <u>Adopted</u>	FY 15 <u>Adopted</u>
Overnight Care	\$1,618,119	\$1,625,666	\$1,736,212	\$1,902,513
Total shelter bed nights	56,154	56,251		57,000
Homeless Intervention	\$343,873	\$24,461	_	_

B. Budget Initiatives

1. New Contract Awarded for the Management of the Hilda Barg Homeless Shelter

Expenditure \$61,666
Revenue \$0
General Fund Impact \$61,666
FTE Positions 0.00

- a. Description The DSS operates the 32 bed Hilda Barg Homeless Prevention Shelter, a year round facility which provides short-term housing for homeless families and individuals in need of shelter. DSS contracts with an outside vendor to provide oversight and day-to-day management of the facility. The previous contract for management services expired September 30, 2013. There were no renewals left on the contract; therefore, DSS was required to solicit proposals. The new contract was awarded and it exceeded the previous contract award by \$61,666. The new contract amount is \$419,237.
- **b.** Service Level Impacts Existing service levels are maintained.







Agency Administration

Provide overall leadership, financial management, personnel functions and information technology services for the DSS.

Key Measures	FY 12 Actual	FY 13 Actual	Trend	FY 14 Adopted	FY 15 Adopted
Department-wide customer satisfaction	90%	87%	1	95%	95%

 \uparrow Trending Upward \leftrightarrow Stable \downarrow Trending Downward

Program Activities & Workload Measures

	FY 12 <u>Actual</u>	FY 13 <u>Actual</u>	FY 14 <u>Adopted</u>	FY 15 Adopted
Social Services Director's Office	\$3,187,387	\$3,309,481	\$3,451,696	\$1,488,164
Agency employees per 1,000 population	0.74	0.74	0.79	0.70
Technology Support		_	_	\$251,180
Information & network security audits completed	1	1	_	1
Personnel Support	_	_	_	\$291,701
Hiring cycle (advertisement to acceptance) is less than 90 days		_	_	90%
Fiscal Support	_	_	_	\$1,001,266
Payroll processed on schedule	99%	99%	_	98%

A. Budget Reductions

1. Shift 1.0 FTE to At-Risk Youth and Family Services (ARYFS)

Expenditure (\$54,902)
Revenue \$0
General Fund Impact (\$54,902)
FTE Positions (1.00)

- **a. Description** One Accounting Assistant II position shifted to ARYFS to help manage the administrative workload in ARYFS.
- **b.** Service Level Impacts Existing service levels are maintained.





Youth Residential Services

Youth Residential Services offers the community a balanced approach in providing public safety, accountability and competency development for at-risk youth.

Key Measures	FY 12 Actual	FY 13 Actual	Trend	FY 14 Adopted	FY 15 Adopted
Juvenile Pretrial Supervision clients re-offending while in the program	0	14	1	14	13
Molinari Juvenile Shelter Services clients re- offending while in the program	18	11			6
Rate of juvenile reconviction	23.2%	18.0%	1	23.2%	23.2%

 \uparrow Trending Upward \leftrightarrow Stable \downarrow Trending Downward

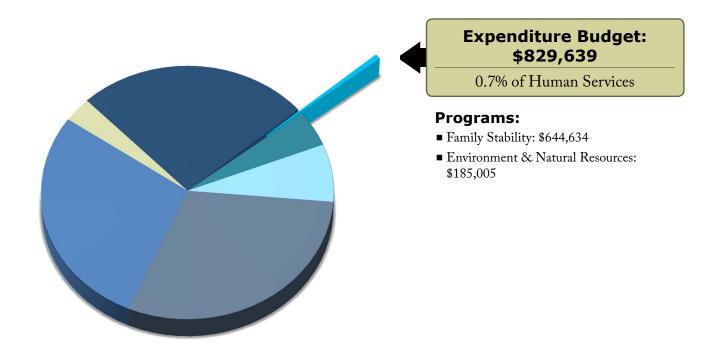
Secure Detention Juveniles admitted	FY 12 <u>Actual</u> \$3,411,750	FY 13 <u>Actual</u> \$3,616,689 684	FY 14 <u>Adopted</u> \$3,652,857	FY 15 <u>Adopted</u> \$3,743,696 637
Juveniles admitted Juvenile Pretrial Supervision Juveniles admitted	\$446,625 247	\$473,081 220	\$541,686 —	\$452,263 177
Molinari Juvenile Shelter Services Juveniles admitted	\$1,170,735 226	\$1,185,693 229	\$1,189,073 —	\$1,269,626 230





Mission Statement

Prince William Cooperative Extension enables people to improve their lives through the delivery of educational programs that use research based knowledge that is focused on individual, family and community issues and needs.



Human Services Expenditure Budget \$124,843,148

Mandates

Virginia Cooperative Extension, as an arm of Virginia Polytechnical Institute and State University, operates under a state mandate to inform the County when agricultural conditions warrant the declaration of a disaster and to provide assistance and information regarding disaster relief programs.

State Code: Section 3.2-503

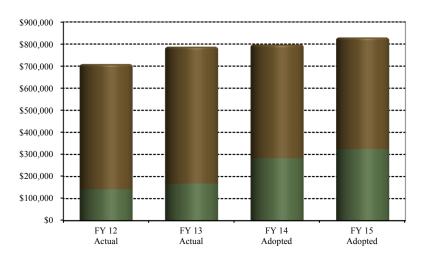




Expenditure and Revenue Summary

	FY 12	EV 13	FY 14	FY 15	% Change
Expenditure by Program	Actual	FY 13 Actual	Adopted	Adopted	Adopt 14/ Adopted 15
· · · · · · · · · · · · · · · · · · ·	\$517,146	\$592,217	\$624,718	\$644,634	3.19%
1 Family Stability	*	*	,	,	
2 Environment & Natural Resources	\$156,157	\$158,496	\$173,343	\$185,005	6.73%
3 Executive Management & Administration	\$3,413	\$3,598	\$0	\$0	0.00%
4 Contributions	\$32,385	\$33,357	\$0	\$0	0.00%
Total Expenditures	\$709,101	\$787,668	\$798,061	\$829,639	3.96%
Expenditure by Classification					
1 Personal Services	\$499,019	\$548,029	\$545,153	\$575,779	5.62%
2 Fringe Benefits	\$99,471	\$116,676	\$119,513	\$119,260	-0.21%
3 Contractual Services	\$1,693	\$774	\$1,650	\$1,650	0.00%
4 Internal Services	\$47,726	\$58,257	\$51,164	\$76,301	49.13%
5 Other Services	\$61,192	\$63,932	\$80,581	\$56,649	-29.70%
Total Expenditures	\$709,101	\$787,668	\$798,061	\$829,639	3.96%
Funding Sources					
1 Charges for Services	\$14,762	\$12,575	\$10,000	\$10,000	0.00%
2 Revenue From Other Localities	\$83,072	\$114,696	\$102,564	\$102,751	0.18%
3 Revenue from State Government	\$0	\$164,000	\$0	\$0	0.00%
4 Revenue From Federal Government	\$147,053	\$6,079	\$70,000	\$70,000	0.00%
5 Transfers In	\$322,085	\$322,082	\$332,005	\$322,085	-2.99%
Total Designated Funding Sources	\$566,972	\$619,432	\$514,569	\$504,836	-1.89%
Net General Tax Support	\$142,129	\$168,236	\$283,492	\$324,803	14.57%
Net General Tax Support	20.04%	21.36%	35.52%	39.15%	

Expenditure History



■ OTHER RESOURCES
■ NET TAX SUPPORT



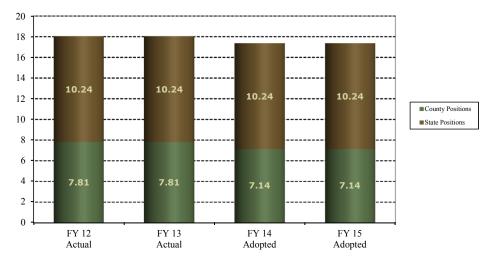




Staffing History







Staffing by Program



	FY 12 Actual	FY 13 Actual	FY 14 Adopted	FY 15 Adopted
1 Family Stability	13.56	13.56	13.56	13.56
County	6.04	6.04	6.04	6.04
State	7.52	7.52	7.52	7.52
2 Environment & Natural Resources	4.49	4.49	4.49	4.49
County	1.77	1.77	1.77	1.77
State	2.72	2.72	2.72	2.72
Total County	7.81	7.81	7.14	7.14
Total State	10.24	10.24	10.24	10.24
County Full-Time Equivalent (FTE) Total	7.81	7.81	7.14	7.14

Future Outlook

Population Growth - With the increase in population in Prince William County, and the Cities of Manassas and Manassas Park, we anticipate an increase in demand for our services. Wait lists already exist for 4-H camps and clubs, parent education classes, Chef's Club, and financial assessments. To support the increased need, we will continue to offer relevant volunteer training to provide the skills necessary to help staff keep pace with the increase in demand. We will also continue actively to recruit additional volunteers in the community to broaden our current volunteer base. We are also working as an agency to diversify our online resources to meet the needs of the public. By providing PowerPoint presentations, videos and other forms of digital media, our resources are made available to clientele when they want or need the information and have the time to view it.





Spanish Speaking Clientele - The increase in population has resulted in a growing demand for services in other languages, primarily Spanish. The Financial Education and Housing Counseling program, the Parent Education Program, the Environment and Natural Resources Program and the Supplemental Nutrition Assistance Program (SNAP) - Ed program currently offer varying levels of program services in Spanish. As demand increases, all of our program staff will make every effort to expand programming curriculum in Spanish and identify volunteers and staff who can help address this growing need.

Future PWC Services - Programs and services offered are based on needs identified through the Prince William Unit's situation analysis, Prince William County's Strategic Plan, collaboration with County agencies, research conducted at Virginia Tech and Virginia State and feedback through program evaluations. We welcome discussion and feedback for ways Virginia Cooperative Extension can strengthen families, the community and the environment.

General Overview

- A. Internal Service Fund (ISF) Technology Billing The County allocates all technology costs to agencies through an ISF. The Department of Information Technology (DoIT) annually recalculates each agency's ISF bill, using the approved cost bases for each technology activity. Technology activities include phone, radio and computer support, business systems support, GIS, web services, capital equipment and administration. In FY 15, Virginia Cooperative Extension's (VCE) technology bill increased by \$25,137 to \$76,301.
- **B.** State Salary Reimbursement The County has a cost sharing agreement with Virginia Tech to cover a portion of the personnel costs of state employees in VCE. A 2% state salary increase given in FY 14 requires an increase in County reimbursement of \$2,410.
- **C.** Compensation Increase Compensation adjustments totaling \$7,364 are made to support the following rate changes:
 - 5% Retiree Health;
 - -0.21% and -1.21% VRS employer rate for Plan I and Plan II employees, respectively;
 - 2.7% Health Insurance;
 - 3% Pay-for-Performance;
 - 0.13% Group Life; and
 - 1% Salary adjustment to offset the required VRS contribution by Plan I and some Plan II employees.

Additional detail concerning these adjustments can be found in the Unclassified Administrative section of Non-Departmental.

D. Community Partners Funding Increase - This initiative reflects a 3% increase in the donation to the community partner in the agency budget totaling \$1,001. The increase supports existing service levels. The total donation amount provided to agency community partners is \$34,358 in FY 15. For additional detail please refer to the Community Partners section.





Program Summary

Family Stability

The Family Stability program of VCE strengthens families by creating educational opportunities for both adults and children. Activities focus on nutrition, food safety, parenting skills, financial and housing education and 4-H positive youth development. While some activities address at-risk behaviors of adults and youth, all are open to everyone.

Key Measures	FY 12 Actual	FY 13 Actual	Trend	FY 14 Adopted	FY 15 Adopted
Parent Education participants able to use the information presented in the class to improve their family situation	_	98%		95%	95%
Nutrition Education survey respondents reporting the adoption of healthy nutrition and physical activity practices	61%	96%	†	60%	60%
Parents reporting that 4-H youth acquire life skills that lead to becoming productive and contributing citizens	97%	98%	1	95%	95%
Financial Education & Housing Counseling participants reporting adoption of a spending and savings plan to become financially stable and achieve future goals	_	_		_	90%
FTE equivalent of volunteer hours for the Family Stability Program	14.2	20.9	1	6.0	6.0

 \uparrow Trending Upward \leftrightarrow Stable \downarrow Trending Downward





Program Activities & Workload Measures

	FY 12 <u>Actual</u>	FY 13 <u>Actual</u>	FY 14 <u>Adopted</u>	FY 15 Adopted
Nutrition Education	\$23,556	\$26,102	\$25,442	\$33,377
Smart Choices Nutrition Education Program participants	1,598	972	1,200	1,200
Volunteers	102	124	50	50
4-H Youth Education	\$84,654	\$88,406	\$125,114	\$131,473
Youth enrolled in 4-H	827	743	700	700
Youth enrolled in 4-H Special Interest programs	52,636	71,663	50,000	50,000
Volunteers	1,008	1,059	700	700
Students enrolled in the Rainbow Therapeutic Riding Program	162	239	80	200
Financial Education and Housing Counseling	\$205,411	\$271,547	\$252,810	\$249,338
Families completing Home Ownership Seminar Series	206	178	200	150
Housing counseling participants	455	289	175	175
Volunteers	57	36	50	40
Parent Education	\$203,524	\$206,161	\$221,352	\$230,446
Participants completing Systematic Training for Effective	222	250	220	220
Parenting (STEP)	223	250	230	230
Participants completing When Families Get Angry (WFGA)	98	79	85	85
Participants completing Juvenile Justice Parenting Program (JJPP)	68	110	90	90
Volunteers	16	20	15	15
Contributions to Rainbow Riding (now merged with 4-H)	\$32,385	\$33,357	\$0	\$0

A. Budget Reductions

1. Decrease Housing and Financial Education and Counseling

Expenditure (\$9,920)
Revenue (\$9,920)
General Fund Impact \$0
FTE Positions 0.00

- a. Description Virginia Cooperative Extension has not received the anticipated revenue from the County's Department of Housing and Community Development for housing and financial education and counseling since FY 13. This reduction brings the projected revenue and expenditures in line with the actuals and with the FY 13 changes to service levels.
- **b.** Service Level Impacts Existing service levels will be maintained.





Environment & Natural Resources (ENR)

ENR provides educational programs that raise awareness and change behaviors, emphasizing best management practices for sustainable landscape management and water quality protection. Educational activities include classes, hands-on demonstrations, the BEST Lawns lawn education program and stormwater education, conducted by staff and Master Gardener volunteers. Audiences include agricultural producers, the green industry, pesticide applicators, homeowners associations, citizens, non-profit organizations and County agencies.

Key Measures	FY 12 Actual	FY 13 Actual	Trend	FY 14 Adopted	FY 15 Adopted
Surveyed program participants reporting that they adopted recommended water quality practices	84%	100%	1	90%	85%
Number of urban nutrient management acres	69.0	60.4	1	60.0	100.0
FTE equivalent of volunteer hours contributed to ENR	6.1	8.2	1	6.9	6.9

 \uparrow Trending Upward \leftrightarrow Stable \downarrow Trending Downward

	FY 12 <u>Actual</u>	FY 13 <u>Actual</u>	FY 14 <u>Adopted</u>	FY 15 Adopted
Environment and Natural Resources	\$156,157	\$158,497	\$173,343	\$185,005
Environmental Education participants	1,045	1,242	900	1,200
Number of volunteers	152	181	150	150
Executive Management & Administration (merged with ENR)	\$3,413	\$3,598	_	_