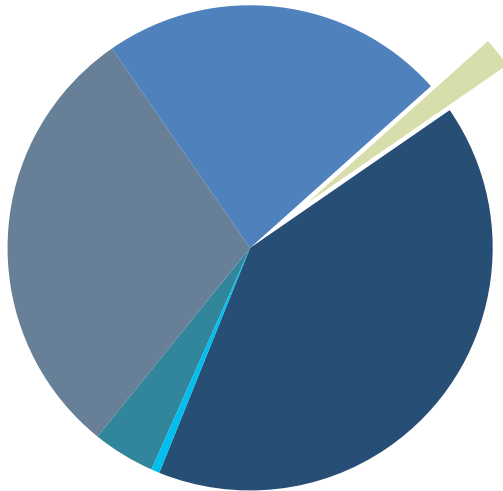


## Mission Statement

The Prince William Health District is dedicated to promoting optimum wellness, preventing illness, responding to emergencies, and protecting the environment and health of our residents.



**Expenditure Budget:**  
**\$3,764,420**



*2.0% of Human Services*

### Programs:

- Maternal & Child Health: \$309,685
- General Medicine: \$2,318,103
- Environmental Health: \$899,254
- Administration/Emergency Preparedness: \$237,378

**Human Services Expenditure Budget:**  
**\$188,203,455**

## 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](#) (Immunization of patients against certain diseases), [22.1-270](#) (Pre-school physicals examinations), [32.1](#) (Health) and [3.2-6562.1](#) (Rabies Control)

**County Code:** [Chapter 3](#) (Amusements), [Chapter 8](#) (Environmental Protection), [Chapter 10](#) (Concession Stands at Youth Activities), [Chapter 12](#) (Massage Establishments), [Chapter 22 Article 1](#) (Refuse, In General), [Article II](#) (Refuse, Storage), [Article V](#) (Trash, Garbage, Refuse, Litter and Other Substances Health and Safety Menaces), [Chapter 23 Article III](#) (Individual Sewage Disposal Systems), [Chapter 25.1](#) (Swimming Pools, Spas and Health Clubs), [Chapter 30](#) (Water Supply)



## Expenditure and Revenue Summary

Expenditure by Program	FY18 Actuals	FY19 Actuals	FY20 Actuals	FY21 Adopted	FY22 Proposed	% Change Budget FY21/ Budget FY22
Maternal & Child Health	\$774,014	\$774,014	\$309,685	\$309,685	\$309,685	0.00%
General Medicine	\$1,444,601	\$1,400,628	\$1,934,366	\$2,414,279	\$2,318,103	(3.98%)
Environmental Health	\$907,368	\$908,035	\$906,189	\$899,793	\$899,254	(0.06%)
Administration/Emergency Preparedness	\$160,966	\$170,202	\$167,009	\$162,378	\$237,378	46.19%
<b>Total Expenditures</b>	<b>\$3,286,949</b>	<b>\$3,252,878</b>	<b>\$3,317,249</b>	<b>\$3,786,134</b>	<b>\$3,764,420</b>	<b>(0.57%)</b>

### Expenditure by Classification

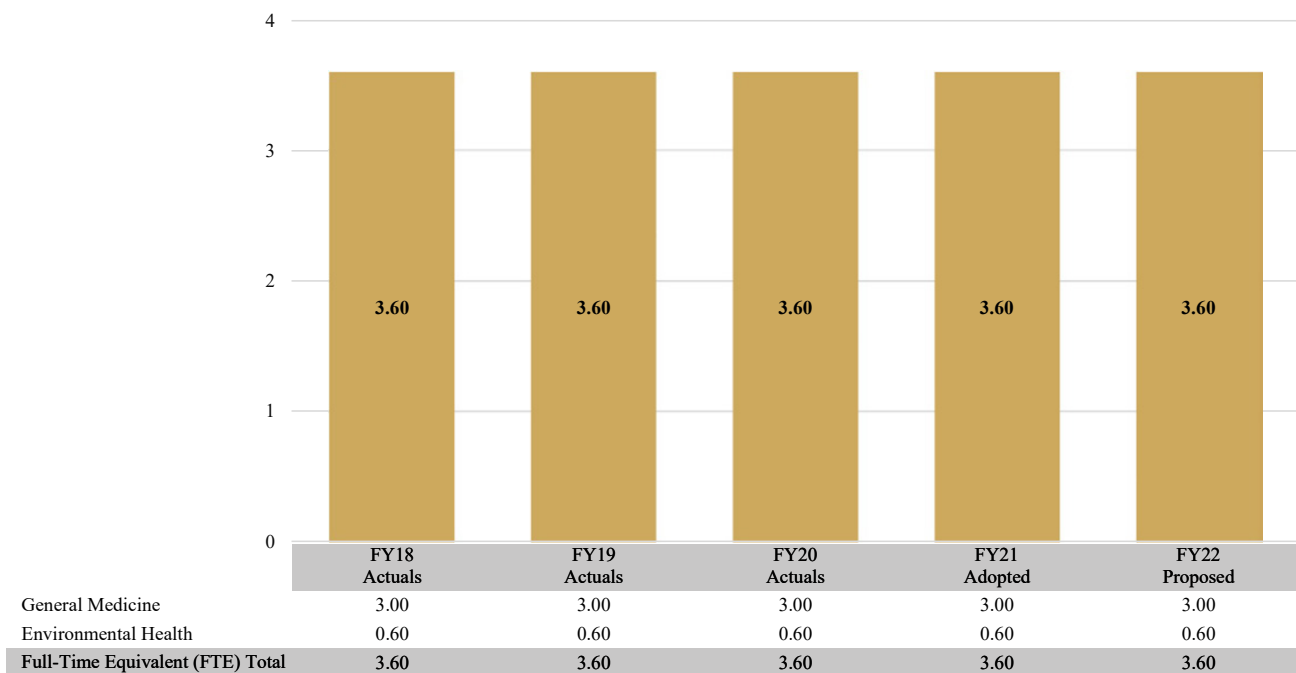
Salaries & Benefits	\$193,907	\$146,517	\$211,339	\$641,172	\$654,541	2.09%
Contractual Services	\$0	\$0	\$120	\$1,415	\$1,415	0.00%
Internal Services	\$43,849	\$52,934	\$46,587	\$33,435	\$33,435	0.00%
Purchase of Goods & Services	\$3,049,193	\$3,053,427	\$3,059,204	\$3,110,112	\$3,075,030	(1.13%)
<b>Total Expenditures</b>	<b>\$3,286,949</b>	<b>\$3,252,878</b>	<b>\$3,317,249</b>	<b>\$3,786,134</b>	<b>\$3,764,420</b>	<b>(0.57%)</b>

### Funding Sources

Permits & Fees	\$152,129	\$212,407	\$186,162	\$176,746	\$176,746	0.00%
Revenue from Other Localities	\$79,728	\$79,728	\$96,408	\$75,885	\$75,885	0.00%
Revenue from Commonwealth	\$435,467	\$338,269	\$311,286	\$303,397	\$303,397	0.00%
<b>Total Designated Funding Sources</b>	<b>\$667,324</b>	<b>\$630,404</b>	<b>\$593,856</b>	<b>\$556,028</b>	<b>\$556,028</b>	<b>0.00%</b>
<b>Net General Tax Support</b>	<b>\$2,619,625</b>	<b>\$2,622,474</b>	<b>\$2,723,393</b>	<b>\$3,230,106</b>	<b>\$3,208,392</b>	<b>(0.67%)</b>
<b>Net General Tax Support</b>	<b>79.70%</b>	<b>80.62%</b>	<b>82.10%</b>	<b>85.31%</b>	<b>85.23%</b>	



## Staff History by Program



## Future Outlook

**Pandemic Response** – The Prince William Health District (PWHD) PWHD will continue to direct significant resources to include disease surveillance, investigation, and containment toward the COVID-19 response. Now that vaccines are available PWHD will implement and monitor a COVID-19 immunization program for the community at large under the direction of the President, Governor, and the Virginia Department of Health. The district depends heavily on the Medical Reserve Corp (MRC), to provide the Greater Prince William Area with a cadre of over 800 volunteers, with clinical and administrative experience, who are assisting in vaccine dispensing operations, in response to this active public health emergency. From January 2020 to December 2020 the MRC provided over 7,045 hours in COVID-19 response. Fit testing Long Term Care Facility staff to protect themselves from COVID-19 positive residents, staffing community testing events initiated through the PWHD and Prince William County, assisting organizations in screening staff and visitors prior to entering establishments are just some of the activities the MRC has performed during the pandemic response.

**Future Public Health** – The Centers for Disease Control and Prevention recommends public health professions follow the 10 Essential Public Health Services (EPHS) which is considered a best practice. EPHS provides a framework for public health to promote the health of all people in all communities. Recently, this framework has been updated to incorporate health equity into public health work. The PWHD will work with community partners to promote policies, systems, and a community environment that supports an equal opportunity for all residents to be healthy.

**Community Health Services** – PWHD continues to manage threats to the health of the community while promoting healthy behaviors and a strong start in life. PWHD will continue its work to mitigate infectious diseases facing the community such as sexually transmitted infections, tuberculosis, and vaccine preventable diseases through surveillance, prevention, treatment, and case management.

**Environmental Health Services** – PWHD updated practices to reflect changes to Virginia codes during the last year that require onsite staff to refer customers and clients to licensed private sector onsite sewage system designers. With these changes, staff can dedicate more time to community assessment, field inspections, quality assurance and programmatic oversight of existing onsite sewage systems, public health outreach, education, and enforcement.

## General Overview

**A. FY21 Public Health Funding** – The Commonwealth of Virginia partners with localities to provide public health services through a cooperative arrangement. Currently, the cooperative budget is funded 55% by state funds and 45% by PWC matching funds. The County enters into an annual agreement with the Virginia Department of Health to provide the 45% funding necessary to operate PWHD. The County also provides local support above the match amount for certain local optional services. In FY21, state funding for PWHD was \$2,908,140, County match funding was \$2,114,183, and local support routed through the state was \$1,119,840. The County also provided an additional \$552,111 in local expenditure budget support for staffing (salary supplement), operations, and community partnerships above the amount included in the annual agreement. The cities of Manassas and Manassas Park provide reimbursement to the County for services rendered based on a shared services agreement with the County. Total FY21 state and County budgeted expenditures for the PWHD were \$6,694,163, with the County providing a total of \$3,786,134.

## Budget Initiatives

### A. Budget Shift

#### 1. Funding for Medical Reserve Corp (MRC) Coordinator – Administration/Emergency Preparedness

Budget Shift	\$75,000
Agency Impact	\$75,000
FTE Positions	0.00

**a. Description** – During the FY21 budget process the state notified PWHD that it would no longer fund the MRC coordinator position. The MRC provides Greater Prince William Area with a cadre of over 700 volunteers with clinical and administrative experience who assist in operations, whether it be a community event or a response to an active public health emergency. The COVID-19 response showed the importance of having a ready-to-go volunteer organization, which provided in calendar year 2020 over 7,045 hours in medical volunteer hours in pandemic response. This initiative is funded from a shift of available funds within PWHD budget when the Free Clinic community partner ceased operations at the end of FY20. There is no net impact on the general fund budget.

**b. Service Level Impacts** – Without this position it would be difficult for PWHD to respond to a community health emergency. Activities such as fit testing Long Term Care Facility staff to protect themselves from infectious positive residents, staffed community testing events initiated through the PWHD and PWC, assists organizations in screening staff and visitors prior to entering the facilities would not happen. The MRC, outside of a global pandemic, assists in community events, hosts CPR classes, and participates in exercises to prepare for activations. The MRC is essential for medical surge capacity for both emergencies and emerging public health community response.

## Program Summary

### Maternal & Child Health

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

Key Measures	FY18 Actuals	FY19 Actuals	FY20 Actuals	FY21 Adopted	FY22 Proposed
Infant deaths per 1,000 live births	3.3	4.2	3.8	5.6	4.5
Infant deaths per 1,000 live births (Black, non-hispanic)	-	-	-	-	7.5
Infants born with late/no prenatal care per 1,000 live births*	68.0	82.1	79.7	35.5	-
Children born in PWC with low birth weight	7.7%	7.3%	6.8%	7.0%	-

\*FY20 actuals are calculated on a calendar not fiscal basis by the state, which causes a delay or change in reporting.

# Public Health

Program Activities & Workload Measures (Dollar amounts expressed in thousands)	FY18 Actuals	FY19 Actuals	FY20 Actuals	FY21 Adopted	FY22 Proposed
<b>Women's Wellness</b>	<b>\$310</b>	<b>\$310</b>	<b>\$310</b>	<b>\$310</b>	<b>\$310</b>
Women served in women's wellness clinics	894	947	384	900	600
<b>WIC</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
Participants in the WIC program at the end of the fiscal year	7,296	7,345	7,456	7,000	7,000
Overweight participant children (age 2 yrs - 5 yrs.) at end of fiscal year, % children ≥ 85th percentile	-	-	-	-	20%

Prior to FY20, PWHD funded and tracked Prenatal Care activity, in FY19, \$464K was permanently shifted to General Medicine program (Other Communicable Disease Services).

## General Medicine

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

Key Measures	FY18 Actuals	FY19 Actuals	FY20 Actuals	FY21 Adopted	FY22 Proposed
Pre-admission nursing home screenings completed within 30 days	86%	80%	92%	90%	90%
Patients completing tuberculosis preventive therapy treatment	88%	65%	89%	90%	90%
Vaccine-preventable disease cases per 100,000 population	11	10	14	10	10
Non-vaccine preventable reportable conditions/100,000 population	95	101	98	101	100
Diagnosed chlamydia cases/100,000 population	418	494	548	500	500
Diagnosed gonorrhea cases/100,000 population	76	75	89	75	75
Diagnosed syphilis cases/100,000 population	-	-	-	-	11
Newly diagnosed HIV cases per 100,000 population	12	9	12	10	-

# Public Health

Program Activities & Workload Measures (Dollar amounts expressed in thousands)	FY18 Actuals	FY19 Actuals	FY20 Actuals	FY21 Adopted	FY22 Proposed
<b>Sexually Transmitted Disease</b>	<b>\$247</b>	<b>\$247</b>	<b>\$247</b>	<b>\$247</b>	<b>\$247</b>
Persons seen for sexually transmitted disease services*	914	865	511	1,000	800
HIV clients linked to medical care	83%	83%	85%	90%	-
<b>Other Communicable Disease Services</b>	<b>\$918</b>	<b>\$870</b>	<b>\$1,398</b>	<b>\$1,826</b>	<b>\$1,840</b>
Patients receiving tuberculosis preventive therapy	78	77	84	100	100
Suspected tuberculosis follow-ups	119	115	69	130	130
Reportable conditions investigated	1,939	1,543	1,690	1,900	2,000
Private provider reports of positive Sexually Transmitted Infections (STI) for review and follow up	-	-	866	1,000	1,000
<b>Chronic Disease Services</b>	<b>\$116</b>	<b>\$116</b>	<b>\$116</b>	<b>\$116</b>	<b>\$116</b>
Persons screened for nursing home pre-admission and personal care services	676	679	631	700	700
<b>Primary Health Care Services</b>	<b>\$163</b>	<b>\$167</b>	<b>\$173</b>	<b>\$225</b>	<b>\$115</b>
Clients served by community partners	2,943	2,484	2,732	3,132	578

\*Due to the public health response to COVID-19 and limitations in providing face to face clinical services during the pandemic.

## Environmental Health

This program enforces state and local codes and regulations designed to protect the public health and safety of all residents of and visitors to the Prince William area. This is accomplished by enforcing regulations pertaining to food, food establishments, day care facilities, hotels, summer camps, campgrounds, swimming pools, private wells, 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. Due to Virginia code changes, the onsite staff will spend more time on community assessment, field inspections, quality assurance, and programmatic oversight of existing onsite sewage systems, public health outreach, education, and enforcement.

Key Measures	FY18 Actuals	FY19 Actuals	FY20 Actuals	FY21 Adopted	FY22 Proposed
The number of foodborne illness complaints in PWC investigated	-	-	41	75	75
Septic tank owners in compliance with Chesapeake Bay Preservation Act	76%	77%	78%	80%	80%
On-site sewage applications completed within 15 days	95%	82%	91%	95%	95%
Founded health and safety menaces corrected	95%	93%	95%	95%	95%
Humans potentially exposed to rabies	787	1,046	1,072	1,100	1,100
Swimming pools in compliance with County code requirements	90%	85%	90%	90%	90%
Food establishments in PWC without founded complaints of food borne illness	99%	99%	N/R	-	-

# Public Health

Program Activities & Workload Measures (Dollar amounts expressed in thousands)	FY18 Actuals	FY19 Actuals	FY20 Actuals	FY21 Adopted	FY22 Proposed
<b>On-site Sewage System Permits and Maintenance</b>	\$271	\$268	\$268	\$268	\$268
New on-site sewage applications completed	152	178	208	160	200
Septic tank pump-outs assured	10,729	10,962	11,217	11,200	11,500
<b>Water Supply Protection</b>	\$64	\$64	\$64	\$64	\$64
Repairs to on-site systems (remedial and preventive)	236	265	104	250	200
<b>Inspection Services</b>	\$427	\$431	\$429	\$423	\$423
Food establishment inspections	1,761	1,514	1,123	2,100	2,100
Swimming pool inspections	47	295	258	400	300
<b>Environmental Complaint Investigations</b>	\$95	\$95	\$95	\$94	\$94
Total environmental complaints investigated	276	244	257	300	300
<b>Rabies Control</b>	\$50	\$50	\$50	\$50	\$50
Animal quarantines completed	701	939	967	1,000	1,000

## 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 PWC and the Cities of Manassas and Manassas Park.

Key Measures	FY18 Actuals	FY19 Actuals	FY20 Actuals	FY21 Adopted	FY22 Proposed
Community events during which all hazards preparedness education is provided	29	15	25	15	20
Customers reporting that they received the information or services they needed	98%	NR	98%	98%	99%

Program Activities & Workload Measures (Dollar amounts expressed in thousands)	FY18 Actuals	FY19 Actuals	FY20 Actuals	FY21 Adopted	FY22 Proposed
<b>Leadership and Management Oversight/Emergency Preparedness</b>	\$161	\$170	\$167	\$162	\$237
Deployable Medical Reserve Corps volunteers	435	393	819	435	850
Emergency response exercises conducted in collaboration with outside partners	8	9	2	8	4
State and County fees for services collected	\$937K	\$909K	\$902K	\$1M	-