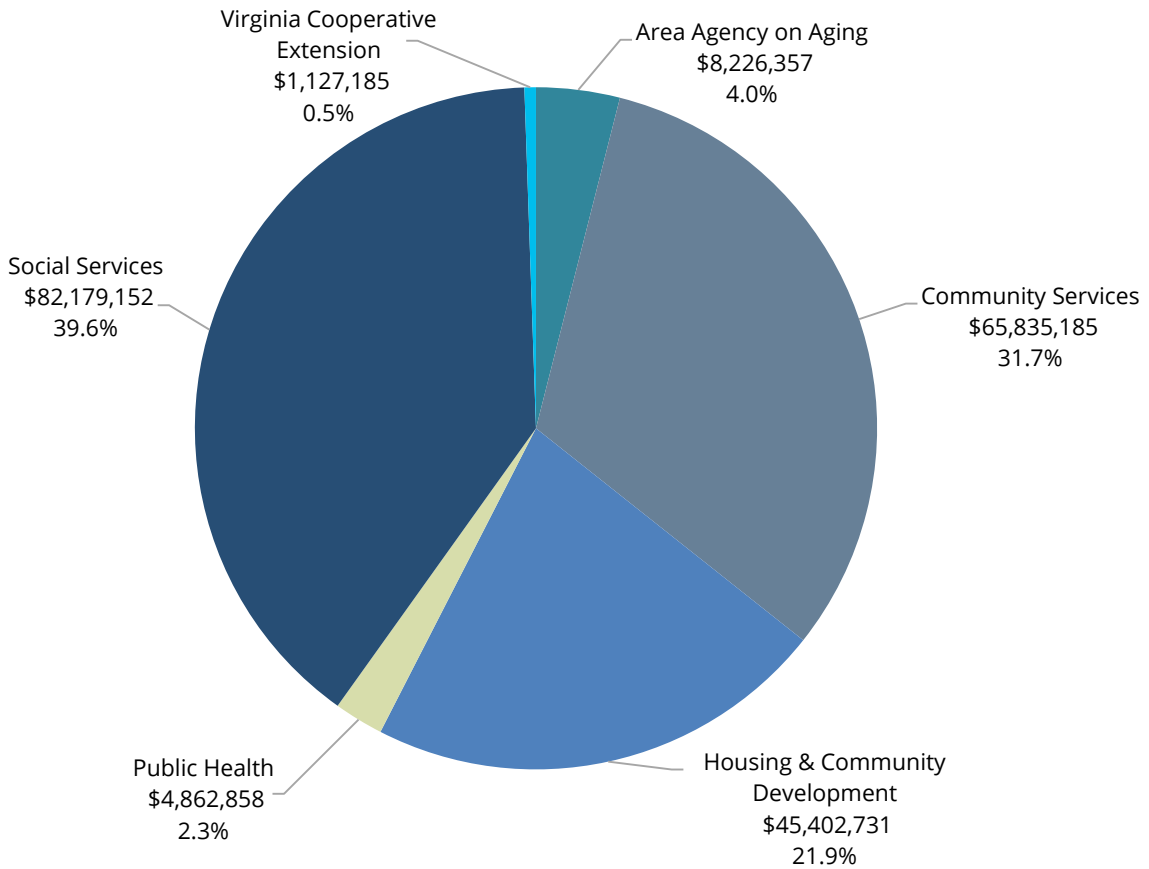


# Human Services



## Human Services Expenditure Budget: \$207,633,469

Totals may not add due to rounding.



### Average Tax Bill

Human Services accounted for \$319 and 6.58% of the average residential tax bill in FY23.

## Department & Agencies

- ▶ Area Agency on Aging
- ▶ Community Services

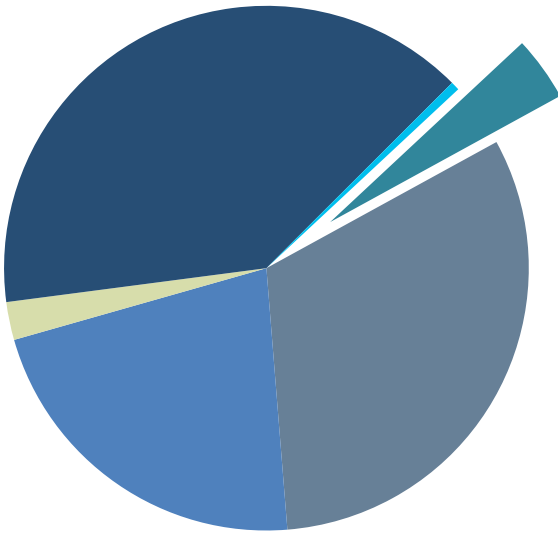
- ▶ Housing & Community Development
- ▶ Public Health

- ▶ Social Services
- ▶ Virginia Cooperative Extension

# Area Agency on Aging

## 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:**  
**\$207,633,469**

**Expenditure Budget:**  
**\$8,226,357**



*4.0% of Human Services*

### Programs:

- Home & Community Based Services: \$1,709,360
- Supportive Services: \$1,321,001
- Senior Centers: \$1,869,441
- Fiscal & Administration: \$3,292,496
- Long-Term Care Ombudsman: \$34,060

## 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.

# Area Agency on Aging

## Expenditure and Revenue Summary



Expenditure by Program	FY19 Actuals	FY20 Actuals	FY21 Actuals	FY22 Adopted	FY23 Adopted	% Change Budget FY22/ Budget FY23
Home & Community Based Services	\$1,414,347	\$1,432,483	\$1,323,353	\$1,657,976	\$1,709,360	3.10%
Supportive Services	\$1,008,552	\$946,865	\$1,031,254	\$1,248,071	\$1,321,001	5.84%
Senior Centers	\$1,166,006	\$1,343,099	\$1,561,624	\$1,784,980	\$1,869,441	4.73%
Fiscal & Administration	\$2,406,658	\$2,756,382	\$3,552,622	\$3,102,715	\$3,292,496	6.12%
Long Term Care Ombudsman	\$0	\$0	\$37,975	\$32,508	\$34,060	4.77%
<b>Total Expenditures</b>	<b>\$5,995,562</b>	<b>\$6,478,830</b>	<b>\$7,506,828</b>	<b>\$7,826,250</b>	<b>\$8,226,357</b>	<b>5.11%</b>

### Expenditure by Classification

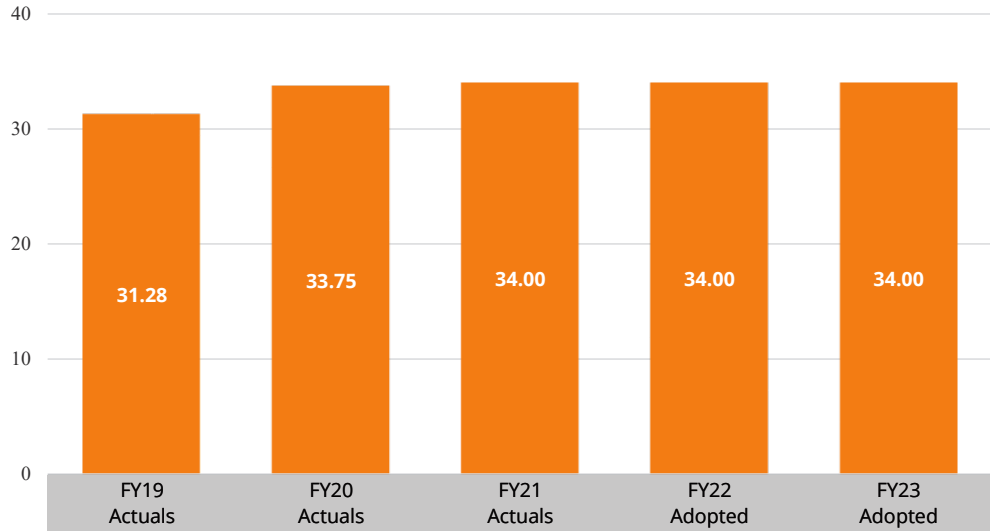
Salaries and Benefits	\$2,383,785	\$2,811,136	\$3,467,340	\$3,096,447	\$3,288,635	6.21%
Contractual Services	\$2,470,311	\$2,752,745	\$2,931,455	\$3,174,559	\$3,260,591	2.71%
Internal Services	\$178,302	\$191,200	\$182,867	\$155,776	\$253,764	62.90%
Purchase of Goods & Services	\$954,053	\$679,319	\$917,179	\$1,388,468	\$1,412,367	1.72%
Leases & Rentals	\$9,110	\$8,894	\$7,988	\$11,000	\$11,000	0.00%
Amortization	\$0	\$35,534	\$0	\$0	\$0	-
<b>Total Expenditures</b>	<b>\$5,995,562</b>	<b>\$6,478,830</b>	<b>\$7,506,828</b>	<b>\$7,826,250</b>	<b>\$8,226,357</b>	<b>5.11%</b>

### Funding Sources

Revenue from Federal Government	\$896,489	\$939,854	\$1,176,426	\$1,332,690	\$1,332,690	0.00%
Use of Money & Property	\$2,225	\$1,425	\$0	\$2,250	\$2,250	0.00%
Revenue from Other Localities	\$412,956	\$461,460	\$371,909	\$454,565	\$446,212	(1.84%)
Miscellaneous Revenue	\$143,847	\$152,756	\$227,530	\$88,942	\$88,942	0.00%
Charges for Services	\$139,237	\$106,991	\$25	\$145,700	\$145,700	0.00%
Revenue from Commonwealth	\$449,466	\$533,650	\$452,544	\$460,889	\$460,889	0.00%
<b>Total Designated Funding Sources</b>	<b>\$2,044,220</b>	<b>\$2,196,136</b>	<b>\$2,228,435</b>	<b>\$2,485,036</b>	<b>\$2,476,683</b>	<b>(0.34%)</b>
<b>Net General Tax Support</b>	<b>\$3,951,342</b>	<b>\$4,282,694</b>	<b>\$5,278,393</b>	<b>\$5,341,214</b>	<b>\$5,749,674</b>	<b>7.65%</b>
<b>Net General Tax Support</b>	<b>65.90%</b>	<b>66.10%</b>	<b>70.31%</b>	<b>68.25%</b>	<b>69.89%</b>	

# Area Agency on Aging

## Staff History by Program



	FY19 Actuals	FY20 Actuals	FY21 Actuals	FY22 Adopted	FY23 Adopted
Home & Community Based Services	9.20	9.20	9.00	9.00	9.00
Supportive Services	5.93	6.68	6.13	7.94	7.94
Senior Centers	10.35	12.07	12.07	11.01	11.01
Fiscal & Administration	5.80	5.80	5.80	5.80	5.80
Long-Term Care Ombudsman	0.00	0.00	1.00	0.25	0.25
<b>Full-Time Equivalent (FTE) Total</b>	<b>31.28</b>	<b>33.75</b>	<b>34.00</b>	<b>34.00</b>	<b>34.00</b>

## Future Outlook

**No Wrong Door** – As the Commonwealth of Virginia continues to expand the No Wrong Door network in the community, a person’s access to long-term services and supports will improve. The County conducted a study on No Wrong Door, it identified key areas across all human services departments. Citizens in the County will benefit from continual focus to improve access for all human services programs. A coordinated point of entry to human services will be critical to service delivery as the population continues to grow and people are living in the community with more complex social and health issues.

**Growth of the Elderly Population** – Currently, approximately 12% of the population in Prince William County area are age 60 and older. By the year 2030, it is projected that approximately 19% of the population will be age 60 and older. With an increasing focus on healthy living, the population is living longer every year. As a result, the ability to live in the community with chronic conditions will be the biggest challenge as the model for long term services and supports shifts from an institutional model to more personal choice. 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 that will most likely bring an increase in reports of elder abuse and financial exploitation.

**Changing Social and Recreational Needs** – The County will have to determine how best to serve the social and recreational needs of a changing population of older adults, to include a virtual element. It is important that the senior centers continue to be a focal point in the community for the older adult population by serving meals and offering socialization and recreation in an environment specific for older adults. The new generation of older adults is seeking more diverse programming, including classes which are catered specifically on reducing isolation and improving overall well-being. Healthier, more engaged older adults within the community can mean less resources required in other sectors of local government. As the County’s Senior Centers age, this issue must be considered.

# Area Agency on Aging

## General Overview

**A. Redistribution of Internal Service Fund (ISF) Technology Budget** – The County annually allocates all information technology (IT) costs to agencies through an ISF, using the approved cost basis for each technology activity. Technology activities include computer support (hardware replacement, software licenses, and helpdesk customer services), IT security, business systems support (public safety communications, financial systems, human services systems, etc.), geographic information system, web services, capital equipment replacement, messaging, cloud storage, network and infrastructure services, telecommunications, and radio. The cost basis is calculated through a formula derived from the Department of Information Technology's (DoIT) ISF fee schedule.

For FY23, ISF costs have been revised to align and more accurately reflect overall technology activities with current department specific technology services. Costs are adjusted to reflect agency technology usage more accurately, as tracked by DoIT billing systems using the updated methodology. In FY23, the Area Agency on Aging (Aging) technology bill increases by \$97,987. No technology service levels are changed, and there is no impact to the technology services individual agencies currently receive. For additional information on the countywide impact and methodology of redistributing technology charges, please see the Budget Highlights section of this document.

**B. Revenue Decrease for Shared Services (City) Billings** – The billings represent reimbursement from the City of Manassas and Manassas Park for services rendered in the previous year. Services rendered include activities within public safety, community development, and human services functional areas. Amounts are calculated using an annual cost allocation report. As a result of the annual report, Aging's allocation decreased \$8,353.

## Budget Initiatives

### A. Budget Initiatives

#### 1. Increase for Birmingham Green – Fiscal & Administration

Expenditure	\$86,032
Revenue	\$0
General Fund Impact	\$86,032
FTE Positions	0.00

**a. Description** – This initiative funds the increase associated with inter-governmental cost sharing agreement for Birmingham Green, a residential long term care facility for the frail elderly and disabled adults in Northern Virginia. Growth in the elderly population and facility costs have resulted in an increase in Prince William County's utilization and cost at Birmingham Green.

**b. Service Level Impacts** – Continued support of the County's residents living at Birmingham Green.

# Area Agency on Aging

## Program Summary

### Home & Community Based (H&CB) Services

The H&CB Services program serves the most at-risk, frail, older adults in the Prince William Area with the Adult Day Healthcare and the Home Care Assistance Programs to help them to remain in the community for as long as possible.

Key Measures	FY19 Actuals	FY20 Actuals	FY21 Actuals	FY22 Adopted	FY23 Adopted
Clients reporting that H&CB services helped them stay in their community	98%	100%	98%	98%	98%
Family care-givers who are better able to meet work or other family obligations	90%	100%	90%	93%	93%

Program Activities & Workload Measures <i>(Dollar amounts expressed in thousands)</i>	FY19 Actuals	FY20 Actuals	FY21 Actuals	FY22 Adopted	FY23 Adopted
<b>Home Services</b>	<b>\$749</b>	<b>\$788</b>	<b>\$668</b>	<b>\$891</b>	<b>\$901</b>
Home services clients served	158	219	118	190	190
Average days on waitlist for home services	4	9	49	10	15
<b>Community Based Services</b>	<b>\$666</b>	<b>\$644</b>	<b>\$655</b>	<b>\$767</b>	<b>\$808</b>
Community based clients served	40	35	NR	35	35
Average days on waitlist for community based services	123	105	245	110	115

### 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 residents with information to make informed decisions about their service options within the Prince William Area.

Key Measures	FY19 Actuals	FY20 Actuals	FY21 Actuals	FY22 Adopted	FY23 Adopted
Clients reporting that supportive services helped them stay in their homes	100%	100%	100%	99%	99%
Clients reporting that services helped navigate the aging & disability network	94%	100%	100%	99%	99%

Program Activities & Workload Measures <i>(Dollar amounts expressed in thousands)</i>	FY19 Actuals	FY20 Actuals	FY21 Actuals	FY22 Adopted	FY23 Adopted
<b>Information and Care Coordination</b>	<b>\$928</b>	<b>\$857</b>	<b>\$938</b>	<b>\$1,139</b>	<b>\$1,207</b>
People receiving services	595	767	629	600	600
Information requests addressed	3,597	1,689	3,628	2,000	3,000
People served in supportive services	1,681	1,126	1,116	1,200	1,200
<b>Medicare Counseling</b>	<b>\$80</b>	<b>\$90</b>	<b>\$93</b>	<b>\$109</b>	<b>\$114</b>
People counseled for Medicare health insurance	1,114	891	741	1,000	1,000

# Area Agency on Aging

## Senior Centers

The Senior Centers program operates the Manassas Senior Center and the Woodbridge Senior Center, and the virtual senior center, 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	FY19 Actuals	FY20 Actuals	FY21 Actuals	FY22 Adopted	FY23 Adopted
Participants reporting that senior centers helped them stay in the community	100%	93%	NR	97%	93%
Meals on Wheels recipients stating that meals helped them stay in the community	100%	100%	100%	99%	99%

Program Activities & Workload Measures <i>(Dollar amounts expressed in thousands)</i>	FY19 Actuals	FY20 Actuals	FY21 Actuals	FY22 Adopted	FY23 Adopted
<b>Senior Centers</b>	<b>\$1,166</b>	<b>\$1,343</b>	<b>\$1,562</b>	<b>\$1,785</b>	<b>\$1,869</b>
Senior center participants	1,411	1,068	NR	1,000	1,000
Meals served (congregate and Meals on Wheels)	57,526	53,369	101,170	58,000	58,000

## 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	FY19 Actuals	FY20 Actuals	FY21 Actuals	FY22 Adopted	FY23 Adopted
People served by community partners and contractual agreements	1,484	1,248	1,550	800	800
County provides appropriate facilities & services for seniors & caregivers	87%	87%	90%	90%	89%

Program Activities & Workload Measures <i>(Dollar amounts expressed in thousands)</i>	FY19 Actuals	FY20 Actuals	FY21 Actuals	FY22 Adopted	FY23 Adopted
<b>Area Plan on Aging</b>	<b>\$697</b>	<b>\$772</b>	<b>\$1,344</b>	<b>\$811</b>	<b>\$915</b>
FTE value of volunteer hours contributed	9.00	6.00	NR	6.00	4.00
<b>Birmingham Green</b>	<b>\$1,680</b>	<b>\$1,954</b>	<b>\$2,179</b>	<b>\$2,262</b>	<b>\$2,348</b>
Bed days of County residents at Birmingham Green	29,525	27,679	22,785	27,000	25,000
<b>Bluebird Tour Program</b>	<b>\$30</b>	<b>\$30</b>	<b>\$30</b>	<b>\$30</b>	<b>\$30</b>
Tour participants	936	672	NR	600	900

# Area Agency on Aging

## Long-Term Care Ombudsman

The Virginia Long-Term Care (LTC) Ombudsman advocates to help resolve problems, protect rights, and promote a better quality of care for residents within the long-term care and assisted living facilities in the Prince William Area.

Key Measures	FY19 Actuals	FY20 Actuals	FY21 Actuals	FY22 Adopted	FY23 Adopted
Ombudsman cases at LTC facilities per number of beds	-	-	0.09%	0.40%	0.40%

Program Activities & Workload Measures <i>(Dollar amounts expressed in thousands)</i>	FY19 Actuals	FY20 Actuals	FY21 Actuals	FY22 Adopted	FY23 Adopted
<b>Long-Term Care Ombudsman*</b>	<b>\$0</b>	<b>\$0</b>	<b>\$38</b>	<b>\$33</b>	<b>\$34</b>
Inquiries processed from LTC facilities	341	277	180	300	300

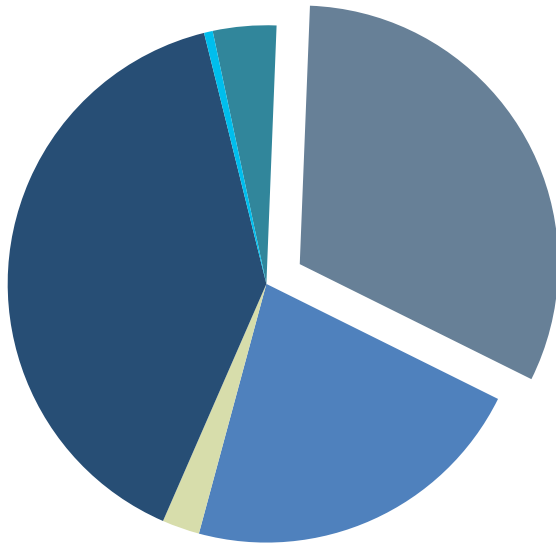
\*As of FY21, the Ombudsman activity from Human Rights became a separate program in Aging.



# Community Services

## Mission Statement

Community Services is committed to improving the wellbeing of residents of Prince William County, the City of Manassas, and the City of Manassas Park who are affected by, or are at-risk of, developmental delays and disabilities, mental illness, and/or substance use disorders through the provision and coordination of community-based resources that respect and promote the dignity, rights, and full participation of individuals and their families.



**Human Services Expenditure Budget:**  
**\$207,633,469**

**Expenditure Budget:**  
**\$65,835,185**



*31.7% of Human Services*

### Programs:

- Administrative Services: \$5,249,791
- Drug Offender Recovery Services: \$1,877,716
- Early Intervention: \$5,521,722
- Access and Emergency Services: \$11,251,398
- Medical Services: \$4,385,418
- MH Day Support & Employment Services: \$2,184,937
- MH Residential Services: \$10,167,498
- DD Day Support/Employment Services: \$3,803,298
- ID/DD Day Residential Services: \$571,026
- Youth Substance Abuse and Mental Health Services: \$5,533,728
- DD Case Management: \$7,038,150
- Clinical Behavioral Health Program (CBHP): \$4,357,968
- Comprehensive Outpatient Recovery Program (CORP): \$3,892,535

## Mandates

The County is mandated to establish a Community Services Board, which serves as the single point of entry into publicly funded mental health, developmental, and substance abuse services. Mandated Community Services Board services include (1) emergency services, (2) same-day mental health screening services, (3) outpatient primary care screening and monitoring services for physical health indicators and health risks and follow-up services for individuals identified as being in need of assistance with overcoming barriers to accessing primary health services, including developing linkages to primary health care providers, and (4) case management services subject to the availability of funds appropriated.

Under the Marcus-David Peters Act, Community Services is mandated to implement a Marcus Alert (MA) system. The MA system will serve to divert those experiencing a behavioral health crisis from a primarily law enforcement response to a behavioral system of care.

In addition, subject to the availability of funds appropriated, core services may include a comprehensive system of inpatient, outpatient, day support, residential, prevention, early intervention, and other appropriate mental health, developmental, and substance abuse services necessary to provide individualized services and support to persons with mental illness, developmental disabilities, or substance abuse.

**State Code:** [37.2-500](#) (Purpose; community services board; services to be provided), [37.2-504](#) (Community services boards; local government departments; powers and duties), [37.2-311.1](#) (Comprehensive crisis system; Marcus alert system; powers and duties of the Department related to comprehensive mental health, substance abuse, and developmental disability crisis services)

# Community Services



## Expenditure and Revenue Summary

Expenditure by Program	FY19 Actuals	FY20 Actuals	FY21 Actuals	FY22 Adopted	FY23 Adopted	% Change Budget FY22/ Budget FY23
Administrative Services	\$4,443,166	\$5,194,974	\$5,753,861	\$5,532,275	\$5,249,791	(5.11%)
Drug Offender Recovery Services	\$1,604,252	\$1,560,733	\$1,547,498	\$1,743,393	\$1,877,716	7.70%
Early Intervention	\$4,359,341	\$4,330,743	\$4,789,167	\$5,035,171	\$5,521,722	9.66%
Access and Emergency Services	\$5,111,206	\$5,442,672	\$6,070,919	\$6,445,544	\$11,251,398	74.56%
Medical Services	\$2,569,187	\$2,842,060	\$2,963,742	\$3,642,043	\$4,385,418	20.41%
MH Day Support & Employment Services	\$1,882,998	\$1,841,267	\$2,026,056	\$2,042,572	\$2,184,937	6.97%
MH Residential Services	\$7,397,512	\$8,261,820	\$7,030,377	\$9,281,406	\$10,167,498	9.55%
DD Day Support/Employment Services	\$2,506,578	\$2,381,189	\$2,155,642	\$3,500,602	\$3,803,298	8.65%
ID/DD Day Residential Services	\$789,688	\$941,043	\$898,725	\$772,399	\$571,026	(26.07%)
Youth Substance Abuse and Mental Health Services	\$3,499,778	\$3,641,111	\$3,994,636	\$4,588,674	\$5,533,728	20.60%
DD Case Management	\$4,521,262	\$4,707,320	\$5,537,315	\$5,860,860	\$7,038,150	20.09%
Clinical Behavioral Health Program (CBHP)	\$4,014,287	\$3,335,577	\$3,526,015	\$3,797,965	\$4,357,968	14.74%
Comprehensive Outpatient Recovery Program (CORP)*	\$2,198,396	\$2,449,020	\$2,842,453	\$3,385,584	\$3,892,535	14.97%
Public Safety Resilience Program	\$357,798	\$0	\$0	\$0	\$0	-
<b>Total Expenditures</b>	<b>\$45,255,451</b>	<b>\$46,929,530</b>	<b>\$49,136,404</b>	<b>\$55,628,488</b>	<b>\$65,835,185</b>	<b>18.35%</b>

\*Community Services changed the name of Substance Abuse Adult Outpatient to Comprehensive Outpatient Recovery Program (CORP) and Mental Health Outpatient Program to Clinical Behavioral Health Program (CBHP) at the end of FY21.

### Expenditure by Classification

Salaries & Benefits	\$33,113,136	\$35,039,751	\$39,036,420	\$40,822,197	\$47,007,366	15.15%
Contractual Services	\$7,844,733	\$7,800,673	\$5,883,373	\$9,908,185	\$12,929,284	30.49%
Internal Services	\$2,172,670	\$2,159,612	\$2,345,885	\$1,983,178	\$2,489,090	25.51%
Purchase of Goods & Services	\$1,835,063	\$1,720,827	\$1,738,620	\$2,572,996	\$3,072,473	19.41%
Capital Outlay	\$84,388	\$0	\$0	\$134,960	\$130,000	(3.68%)
Leases & Rentals	\$176,292	\$155,241	\$127,196	\$177,206	\$177,206	0.00%
Depreciation Expense	\$4,911	\$4,911	\$4,911	\$0	\$0	-
Debt Maintenance	\$24,258	\$48,516	\$0	\$24,258	\$24,258	0.00%
Payments to Other Local Agencies	\$0	\$0	\$0	\$5,508	\$5,508	0.00%
<b>Total Expenditures</b>	<b>\$45,255,451</b>	<b>\$46,929,530</b>	<b>\$49,136,404</b>	<b>\$55,628,488</b>	<b>\$65,835,185</b>	<b>18.35%</b>

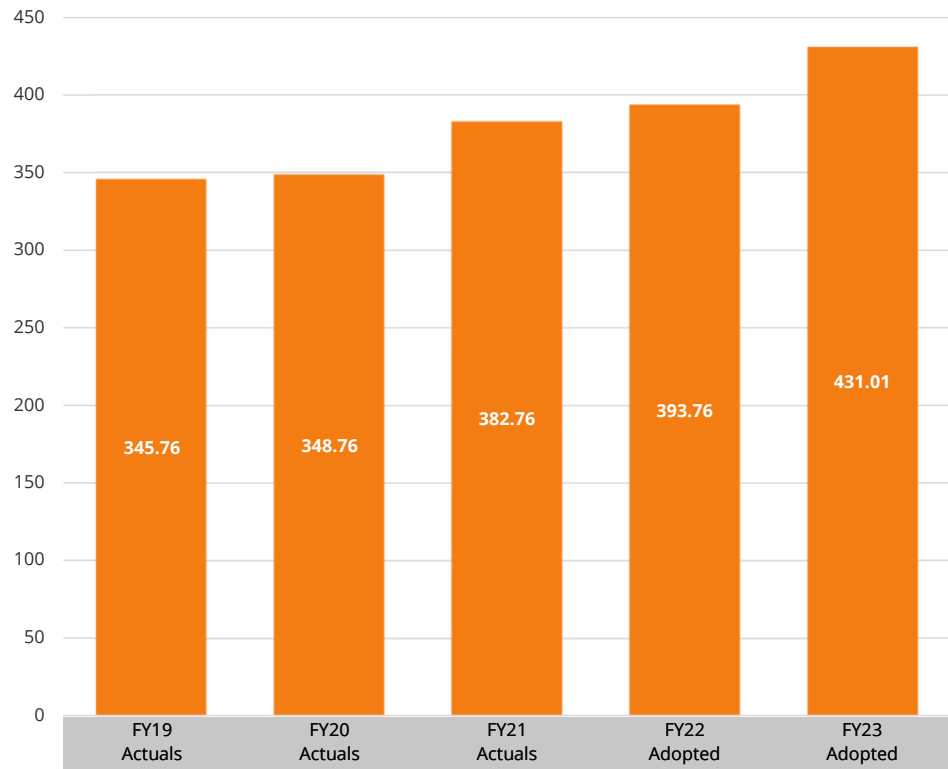
### Funding Sources

Revenue from Federal Government	\$2,846,331	\$3,219,009	\$2,228,680	\$2,958,329	\$3,006,866	1.64%
Use of Money & Property	\$115	\$112	\$31	\$0	\$0	-
Revenue from Other Localities	\$2,957,901	\$3,389,460	\$2,850,764	\$3,501,222	\$3,733,068	6.62%
Miscellaneous Revenue	\$36,104	\$36,557	\$82,485	\$25,712	\$25,712	0.00%
Charges for Services	\$1,151,371	\$929,752	\$946,829	\$740,071	\$740,071	0.00%
Revenue from Commonwealth	\$17,629,115	\$18,528,115	\$18,331,516	\$20,199,655	\$22,409,417	10.94%
<b>Total Designated Funding Sources</b>	<b>\$24,620,937</b>	<b>\$26,103,005</b>	<b>\$24,440,306</b>	<b>\$27,424,989</b>	<b>\$29,915,134</b>	<b>9.08%</b>
<b>Net General Tax Support</b>	<b>\$20,634,514</b>	<b>\$20,826,525</b>	<b>\$24,696,099</b>	<b>\$28,203,499</b>	<b>\$35,920,051</b>	<b>27.36%</b>
<b>Net General Tax Support</b>	<b>45.60%</b>	<b>44.38%</b>	<b>50.26%</b>	<b>50.70%</b>	<b>54.56%</b>	

In FY21, \$42K was incorrectly charged to Administrative Services program rather than Early Intervention program.

# Community Services

## Staff History by Program



	FY19 Actuals	FY20 Actuals	FY21 Actuals	FY22 Adopted	FY23 Adopted
Administrative Services	25.50	24.50	25.50	30.50	32.50
Drug Offender Recovery Services	14.40	14.40	14.40	14.40	14.10
Early Intervention	32.70	32.70	37.70	37.70	38.70
Emergency Services	44.47	47.47	56.47	59.47	72.47
Medical Services	14.00	16.00	17.50	17.50	21.80
MH Day Support & Employment Services	20.00	20.00	20.00	19.00	19.00
MH Residential Services	45.00	46.00	48.00	47.00	51.00
DD Day Support/Employment Services	0.20	0.20	0.20	0.20	0.20
ID/DD Day Residential Services	3.00	3.00	2.00	2.00	0.00
Youth Substance Abuse and MH Services	33.85	33.85	39.85	40.85	47.10
DD Case Management	44.40	44.40	52.40	56.40	61.40
Clinical Behavioral Health Program	42.38	44.38	38.38	38.38	40.38
Comprehensive Outpatient Recovery Program	21.87	21.87	30.37	30.37	32.37
Public Safety Resilience Program	4.00	0.00	0.00	0.00	0.00
<b>Full-Time Equivalent (FTE) Total</b>	<b>345.76</b>	<b>348.76</b>	<b>382.76</b>	<b>393.76</b>	<b>431.01</b>

## Future Outlook

**Re-Investment in Behavioral Health** – Recognizing the need to improve access, quality and consistency of behavioral health services across Virginia, in 2017, the General Assembly set the Systems Transformation Excellence and Performance (STEP-VA) initiative in motion, with the goal of expanding access to nine core services across Virginia’s public behavioral health system. In the FY2022 Budget, the Prince William Board of County Supervisors (BOCS) adopted Community Services (CS) five-year budget plan, in recognition of the need to increase resources for community-based behavioral health and developmental services in the County. Since that time, the COVID epidemic’s impact on those with mental health and substance use disorders has increased the demand for behavioral health services on an already stretched system of care. A study conducted by the Centers for Disease Control indicated that 40% of people identified as having serious mental health problems showed a significant increase in symptoms, including anxiety, depression, and overdose in response to the public health emergency.

The importance of implementing evidence-based treatment approaches to address mental health and substance use disorders is recognized by the Department of Behavioral Health and Developmental Services (DBHDS), and Virginia’s Department of Medical Assistance Services through the Behavioral Health Redesign for Access, Value and Outcomes (BRAVO) project initiative. BRAVO is a comprehensive system that focuses on access to behavioral health services that are high quality, evidence-based, and trauma informed and provides increased rates to encourage expansion of providers to meet the service demands. On July 1, 2021, BRAVO implemented service coverage for Mental Health (MH) Partial Hospitalization Program, MH Intensive Outpatient, and Assertive Community Treatment. On December 1, 2021, BRAVO will implement service coverage for Multisystemic Therapy, Functional Family Therapy, Mobile Crisis, Community Stabilization, 23-hour Observation and Residential Crisis Stabilization to further the plan for fully integrated behavioral health services that provide a full continuum of care.

**Transforming the Behavioral Health Crisis System** – The Marcus-David Peters Alert Act, known as Marcus Alert, was signed into law in November 2020. The Act modifies the Code of Virginia to add [9.1-193](#). Mental health awareness response and community understanding services (Marcus) alert system and the addition of the Code of Virginia [37.2-311.1](#). These laws require DBHDS to develop a comprehensive crisis system based on national best practice models and composed of a crisis call center (988), community care and mobile crisis teams, crisis stabilization centers, and the Marcus Alert system. DBHDS is developing these efforts through their Systems Transformation Excellence and Performance (STEP-VA) initiative.

Marcus Alert and STEP-VA initiatives are building the infrastructure of a statewide comprehensive behavioral health crisis response system. December 2021, CS became the first Community Service Board (CSB) in Region 2 (Northern Virginia) to implement the mandated protocols and policies to divert behavioral health crises from a primarily law enforcement response to a behavioral system of care. STEP-VA funding will provide for a regional crisis call center to receive and respond to individuals experiencing behavioral health crisis and dispatch local and regional crisis mobile response teams. Marcus Alert legislation requires specialized training for law enforcement to ensure safety when law enforcement assistance is needed in response to a behavioral health crisis. By July 2022, 988 will be the 3-digit phone number for individuals in crisis to connect nationwide to suicide prevention and mental health crisis counselors through the regional crisis call center. The BOCS has directed CS to explore the establishment of a Crisis Receiving Center (CRC) within Prince William County (PWC) for residents experiencing a behavioral health crisis, as an alternative to psychiatric hospitalization. PWC and CS regional partners are in the process of building a robust behavioral health crisis response system, to provide a therapeutic, health focused approach to behavioral health emergencies. The crisis response system under development includes services across the continuum, including 988/Regional Crisis Call Center, Regional Mobile Crisis, an Engagement and Outreach Team, a Co-Responder Team, and a CRC.

**Workforce Retention and Development** – Staffing shortages have resulted in five of the eight Virginia state inpatient psychiatric facilities having to put a hold on admissions. Community-based providers of behavioral health treatment and developmental disability services are experiencing the same workforce shortages in all areas of operations that the inpatient facilities experience. There were not enough behavioral health professionals in Virginia before COVID 19, and the public health emergency has increased the need for mental health and substance abuse treatment providers. Increased regulations and requirements further stress the service delivery system. Many treatment providers have left the profession. All these factors create challenges to developing and retaining a quality workforce.

# Community Services

**Addiction** – Drug overdose deaths continue to climb in Virginia. The rising presence of fentanyl found in many substances has contributed to this increase. Methamphetamine was a factor in 17% of Virginia’s drug deaths in 2020 and is now one of the most frequently cited substance abuse addictions. Virginia legislation legalizing marijuana, as well as gambling and casino regulations, has created new challenges when planning for prevention, treatment, and recovery supports. In addition to treatment efforts aimed at reaching and engaging high risk individuals early, such as Medication Assisted Treatment (MAT), Behavioral Health and Wellness efforts will work toward providing education to the public and increasing awareness and prevention of substance use and other clinical addictions and the promotion of mental health wellness.

## General Overview

- A. Reconcile the FY22 CS Budget to the State Performance Contract** – Each year, CS completes a budget reconciliation to match revenue and expenditure adjustments that become known after the County’s annual budget is adopted, specifically the reconciliation of state and federal revenues to the state performance contract. During FY22, reconciliation provided an increase in on-going revenue support of \$1,227,965. This was not a typical reconciliation item due to additional funding awards from the STEP-VA initiative. The on-going funding supports the following programs: implementation of the mandated Marcus Alert project, expansion of services for outpatient programs, Peer and Family Support, and for Service Member Veterans and Families. There was also an increase in on-going budgeted Medicaid revenues to ensure no County funding is necessary to fully-fund these initiatives. The funding created 9.5 FTE, (1.0 FTE) Clinical Services Case Management Manager, (3.0 FTE) Senior Clinical Services Caseworks, (4.0 FTE) Clinical Service Caseworkers, and (1.5) Clinical Services Caseworker Associates. This item was approved by [BOCS Resolution 21-431](#). There is no impact on local general fund tax support.
- B. Additional Reconciliation of State Performance Contract Funds** – In September 2021, the BOCS approved [BOCS Resolution 21-507](#) which increased CS’s FY22 Budget in the amount of \$422,832 on-going funding and \$1,444,527 in one-time funding. On-going funding was increased to address administrative and programming staffing needs. Contractual support and services were increased to support Early Intervention Part C Infant and Toddler Connection. Virginia Department of Juvenile Justice provided funding for a part-time position to shift to a full-time position. A total of 3.2 FTE was created with the on-going state funding, (1.2 FTE) Clinical Services Caseworker, (1.0) Fiscal Analyst, and (1.0) Fiscal Specialist. There is no impact on local general fund tax support.
- C. Appended Reconciliation of State Performance Contract Funds** – In March 2022, the BOCS approved [BOCS Resolution 22-140](#) which increased CS’s FY22 Budget in the amount of \$86,069 in on-going funding, \$692,641 in one-time funding, and the reallocation of \$82,573 from [BOCS Resolution 21-507](#). The Mental Health Block Grant received an on-going funding increase of \$42,675 and the Administrative Services program received as part of the Performance Contract an increase of \$15,967 in on-going support. Since the approval of Resolution 21-507 there has been a significant increase in service demand for Support Coordination, which is a service delivered by CS staff. To meet this need and to maintain compliance with Part C service requirements contractual funds were reallocated to support one Clinical Service Caseworker. To accomplish this goal CS increased Medicare on-going revenue by \$27,427 and reallocated \$82,573 from the prior Resolution to fully support the position.
- D. Forensic Discharge Planning Funding** – In July 2021, CS received a grant in the amount of \$230,926 from DBHDS for forensic discharge planning funding. CS will work with the PWC Adult Detention Center (ADC) to provide jail discharge planning and post-release follow-up services to inmates with Serious Mental Illness (SMI). The ADC is ranked among the top seven with the highest SMI population out of the 21 Regional Jails that participated in the 2016 State Compensation Board survey. CS created two Clinical Services Caseworker positions to track, monitor and connect individuals directly to CS through the Reentry Program. [BOCS Resolution 21-430](#) was approved by the BOCS for on-going funding of \$203,433 to support this initiative. There is no impact on local general fund tax support.
- E. Redistribution of Internal Service Fund (ISF) Technology Budget** – The County annually allocates all information technology (IT) costs to agencies through an ISF, using the approved cost basis for each technology activity. Technology activities include computer support (hardware replacement, software licenses, and helpdesk customer services), IT security, business systems support (public safety communications, financial systems, human services systems, etc.), geographic information system, web services, capital equipment replacement, messaging, cloud storage, network and infrastructure services, telecommunications, and radio. The cost basis is calculated through a formula derived from the Department of Information Technology’s (DoIT) ISF fee schedule.

# Community Services

For FY23, ISF costs have been revised to align and more accurately reflect overall technology activities with current department specific technology services. Costs are adjusted to reflect agency technology usage more accurately, as tracked by DoIT billing systems using the updated methodology. In FY23, the CS's technology bill increases by \$313,070. No technology service levels are changed, and there is no impact to the technology services individual agencies currently receive. For additional information on the countywide impact and methodology of redistributing technology charges, please see the Budget Highlights section of this document.

- F. Shift from Social Services (Homeless Services) to CS (Projects for Assistance in Transitioning the Homeless (PATH) and Clinical Homeless Services (CHS))** – In the adopted FY2022 Budget, an initiative was approved to provide on-going funding for positions providing homeless services in PWC's Ferlazzo Building. One position was shifted from DSS with a salary and benefits budget of \$94,650 to CS, PATH and CHS programs. The Clinical Services Caseworker position will support the Homeless Navigation Center - East, a "one-stop shop" for improved service delivery and management of the clients' needs. CS will provide services to reduce homelessness and improve mental and behavioral health services.
- G. Revenue Increase for Shared Services (City) Billings** – The billings represent reimbursement from the City of Manassas and Manassas Park for services rendered in the previous year. Services rendered include activities within public safety, community development, and human services functional areas. Amounts are calculated using an annual cost allocation report. As a result of the annual report, CS revenue increased \$231,846.
- H. Removal of One-Time Costs** – One-time costs of \$54,960 associated with the CS's staffing plan added in FY22 Budget have been removed in the FY2023 Budget.

## Budget Initiatives

### A. Budget Initiatives

#### 1. Adult Crisis Receiving Center (CRC) – Emergency Services

Expenditure	\$2,700,000
Revenue\$	0
General Fund Impact	\$2,700,000
FTE Positions	0.00

- a. Description** – On March 9, 2021, the BOCS issued [Directive 21-23](#) which directed the County Executive to explore the possibility of having a County CRC and Trauma Treatment Program for the provision of mental health services in the community. The total scope of the project includes annual contractual funding for psychiatric services associated with 8 inpatient beds and 8 recliners for adult clients. The estimated general fund impact is \$2.7 million. The CRC will increase capacity and access for citizens experiencing a behavioral health crisis reducing time to treatment. An improved efficiency of having local resources is reducing interaction with law enforcement. Without the local CRC the Police Department is legally mandated to maintain custody of the citizen in crisis until a temporary detention order hearing can be conducted and crisis bed identified. Having a local CRC will help police officers return quickly to patrol duty.
- b. Service Level Impacts** – Having a local CRC will allow the local Police Department and Co-Responder teams to transport clients experiencing mental health crisis directly to the CRC, reducing the time to treatment which aligns with PWC's Co-Responder initiatives funded in the FY21 and FY22 budgets. This initiative addresses several areas in the County's [2021-2024 Strategic Plan](#). Under Health, Wellbeing, & Human Services goal CS will be providing services covering a range of action strategies one of which is to reduce waiting lists for human services. Another area is the Safe and Secure Community goals by increasing the use of diversion from the legal/court system.

# Community Services

## 2. FY23 CS Staffing Plan – Development Disability (DD) Case Management; DD Day Support and Employment Services; Emergency Services (ES); Medical Services; Clinical Behavioral Health Program (CBHP); Mental Health (MH) Residential Services; Youth Substance Abuse and MH Services

Expenditure	\$2,483,605
Revenue	\$210,000
General Fund Impact	\$2,273,605
FTE Positions	20.00

- a. **Description** – This initiative funds the FY23 CS staffing plan consisting of 20.0 positions. First-year costs breakdown is \$2,269,635 for on-going and \$213,970 in one-time funding. The total for this initiative is \$2,483,605 with the state providing revenue support of \$210,000 to reduce the general fund impact to \$2,273,605. The below information breaks down the increase in program capacity for the community.
- b. **DD Case Management** – The initiative increases case management support for individuals on waitlists for disability waivers. DD Case Management will have capacity to increase client services by 120 clients from 1,270 clients in FY22 to 1,390 clients in FY23. DD Case Management will increase by three positions, one Senior Clinical Services Caseworker, and two Clinical Services Caseworkers. There is also one-time funding for two vehicles.
- c. **DD Day Support and Employment Services** – DD Day Support Services will receive an increase of \$300K in contractual support to provide general day care or day program services. DD Day Support Services will have capacity to increase client services by 30 clients from 55 clients in FY22 to 85 clients in FY23.
- d. **Emergency Services (ES)** – This initiative adds increased funding for Access and Emergency Services will improve ES response time and help reduce the incarceration of mentally ill people. Access serves as the entry point for MH and substance abuse services. Access assessments will increase capacity by 375 clients from 1,950 clients in FY22 and 2,325 clients in FY23. ES will increase by eight positions, one Human Services Program Manager, one Clinical Services Case Management Manager, and six Clinical Services Caseworkers.
- e. **Medical Services** – Medical Services provides psychiatric evaluations, medication, and assessments for medical follow-up evaluations for clients. Capacity will increase by 350 clients from 2,200 in FY22 to 2,550 in FY23. Medical Services will increase by three positions, one Human Services Specialist, one Clinical Services Case Manager, and one Clinical Services Caseworker.
- f. **Clinical Behavioral Health Program (CBHP)** – At the end of FY21, CS changed the Mental Health Outpatient Program to CBHP. CBHP provides outpatient case management and treatment services to adults with behavioral health or mental health illness and provides services for families of the adult in crisis. The program will increase capacity by 60 clients from 1,700 in FY22 to 1,760 in FY23. CBHP will increase by two Administrative Technician positions.
- g. **Mental Health (MH) Residential Services** – MH Residential Services assists adults with serious mental illnesses to remain as independent as possible in the community. MH Residential Services will increase by one Administrative Technician position.
- h. **Youth Substance Abuse and MH Services** – Clients helped by case management services will increase capacity by 60 clients from 275 in FY22 to 335 in FY23. Youth Substance Abuse and MH Services will increase by three positions, two Clinical Services Caseworkers, and one Administrative Technician.
- i. **Service Level Impacts** – This initiative addresses several areas in the County's [2021-2024 Strategic Plan](#). Under Health, Wellbeing, & Human Services goal CS will be providing services covering a range of action strategies one of which is to reduce waiting lists for human services. This initiative also supports the action strategy to expand or enhance the continuum of community-based care and treatment services that address human service needs on a pathway to self-sufficiency and stability. Another area is the Safe and Secure Community goals CS will work with other emergency agencies to develop and test comprehensive action plans to ensure adequate coordination that provide customer assistance.

# Community Services

### 3. Five-Year Staffing Plan – Below is a summary of the staffing initiatives included in the FY2023-2027 Five-Year Plan:

Title	Programs Supported	FTE	FY23	FY24	FY25	FY26
FY23 Staffing Plan	DD Case Management; DD Day Support Services; Emergency Services; Medical Services; CBHP; MH Residential Services; Youth Substance Abuse and MH Services	20.00	\$ 2,483,605	\$ 2,330,986	\$ 2,330,986	\$ 2,330,986
FY24 Staffing Plan	DD Case Management; DD Day Support/Employment Services; Emergency Services; CBHP; Youth Substance Abuse and MH	11.00	\$ -	\$ 1,796,110	\$ 1,706,284	\$ 1,706,284
FY25 Staffing Plan	DD Case Management; DD Day Support/Employment Services; Drug Offender Recovery Services; Early Intervention; Emergency Services; Comprehensive Outpatient Recovery Program; Youth Substance Abuse & MH Services	22.00	\$ -	\$ -	\$ 2,629,969	\$ 2,450,317
FY26 Staffing Plan	Administrative Services; DD Case Management; DD Day Support Services; Early Intervention; Youth Substance Abuse and MH	9.00	\$ -	\$ -	\$ -	\$ 1,243,542
<b>Expenditure</b>			<b>\$ 2,483,605</b>	<b>\$ 4,127,096</b>	<b>\$ 6,667,239</b>	<b>\$ 7,731,129</b>
<b>Revenue</b>			<b>\$ 210,000</b>	<b>\$ 444,000</b>	<b>\$ 892,000</b>	<b>\$ 1,257,000</b>
<b>Net General Fund Impact</b>			<b>\$ 2,273,605</b>	<b>\$ 3,683,096</b>	<b>\$ 5,775,239</b>	<b>\$ 6,474,129</b>

## Program Summary

### Administrative Services

Administrative Services includes Accounting and Procurement, Management Information Systems, Human Resources Management, and Leadership and Management Oversight. 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 possible return on investment of tax dollars.

Key Measures	FY19 Actuals	FY20 Actuals	FY21 Actuals	FY22 Adopted	FY23 Adopted
Change in fee revenue received from prior fiscal year	19.0%	3.7%	17.0%	2.4%	5.0%
Customers rating services as helpful	90%	92%	90%	90%	90%

Program Activities & Workload Measures (Dollar amounts expressed in thousands)	FY19 Actuals	FY20 Actuals	FY21 Actuals	FY22 Adopted	FY23 Adopted
<b>Accounting &amp; Procurement</b>	<b>\$1,685</b>	<b>\$1,815</b>	<b>\$1,918</b>	<b>\$1,512</b>	<b>\$1,695</b>
Fees collected	\$7.4M	\$7.7M	\$8.5M	\$7.9M	\$8.2M
<b>Management Information Systems</b>	<b>\$1,026</b>	<b>\$1,115</b>	<b>\$1,311</b>	<b>\$1,335</b>	<b>\$681</b>
Customers rating services as helpful	90%	92%	90%	90%	90%
<b>Human Resources Management</b>	<b>\$229</b>	<b>\$212</b>	<b>\$248</b>	<b>\$187</b>	<b>\$282</b>
<b>Leadership &amp; Management Oversight</b>	<b>\$1,505</b>	<b>\$2,053</b>	<b>\$2,321</b>	<b>\$2,499</b>	<b>\$2,592</b>
Total agency clients served	10,135	9,275	10,699	10,100	10,500

In FY21, \$42K was incorrectly charged to Administrative Services program rather than Early Intervention program.



# Community Services

## Drug Offender Recovery Services

Provides a comprehensive drug treatment continuum of care for offenders with the most severe drug dependence disorders. Avoids gaps in services that result in relapse and recidivism through close collaboration with the ADC and probation agencies. Services include assessments, individual and group therapy, MAT, high intensity drug trafficking area (HIDTA), residential and jail-based treatment, and family support.

Key Measures	FY19 Actuals	FY20 Actuals	FY21 Actuals	FY22 Adopted	FY23 Adopted
Criminal Justice clients who stop using drugs	50%	45%	42%	45%	45%
Drug Offender Rehab Module clients who do not return to the ADC within 3 years	72%	75%	82%	75%	75%

Program Activities & Workload Measures <i>(Dollar amounts expressed in thousands)</i>	FY19 Actuals	FY20 Actuals	FY21 Actuals	FY22 Adopted	FY23 Adopted
<b>ADC Services</b>	<b>\$1,065</b>	<b>\$1,099</b>	<b>\$1,187</b>	<b>\$1,117</b>	<b>\$1,193</b>
Inmates treated in male and female dormitories	174	144	68	170	100
<b>Community Criminal Justice Services</b>	<b>\$541</b>	<b>\$462</b>	<b>\$362</b>	<b>\$627</b>	<b>\$685</b>
HIDTA clients served	66	72	56	60	60
Intensive case management clients served	170	88	NR	125	-

## Early Intervention

Early Intervention services are provided by Virginia licensed and Part C certified physical therapists, occupational therapists, speech-language pathologists, and early childhood special educators and service coordinators for infants and toddlers, birth through two years 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	FY19 Actuals	FY20 Actuals	FY21 Actuals	FY22 Adopted	FY23 Adopted
Early intervention services clients who do not require special education	56%	53%	49%	53%	52%
Children demonstrating improved acquisition and use of knowledge and skills	67%	61%	53%	62%	60%
Families report services helped their family to help their child develop & learn	86%	89%	85%	82%	85%

Program Activities & Workload Measures <i>(Dollar amounts expressed in thousands)</i>	FY19 Actuals	FY20 Actuals	FY21 Actuals	FY22 Adopted	FY23 Adopted
<b>Assessment and Service Coordination</b>	<b>\$1,899</b>	<b>\$1,909</b>	<b>\$2,108</b>	<b>\$2,284</b>	<b>\$2,611</b>
Infants, toddlers, and families served by assessment and coordination	1,357	1,310	1,472	1,450	1,400
<b>Therapeutic and Educational Services</b>	<b>\$2,460</b>	<b>\$2,422</b>	<b>\$2,639</b>	<b>\$2,751</b>	<b>\$2,911</b>
Infants, toddlers, and families served by therapeutic and educational services	1,104	1,040	1,129	1,330	1,100

In FY21, \$42K was incorrectly charged to Administrative Services program rather than Early Intervention program.

# Community Services

## Access and Emergency Services

Serves as the point of entry for all behavioral health services within CS. Provides state-mandated 24-hour crisis intervention services, as well as Same Day Access for comprehensive assessments for residents seeking CS services.

Key Measures	FY19 Actuals	FY20 Actuals	FY21 Actuals	FY22 Adopted	FY23 Adopted
Cases diverted from inpatient treatment	44%	32%	60%	28%	50%
Emergency Services clients satisfied with services received*	96%	95%	NR	95%	95%

\*Due to COVID-19 health concerns the standard process in which CS gathers client satisfaction feedback was put on hold.

Program Activities & Workload Measures <i>(Dollar amounts expressed in thousands)</i>	FY19 Actuals	FY20 Actuals	FY21 Actuals	FY22 Adopted	FY23 Adopted
<b>CS Intake and Emergency Telephone Services</b>	<b>\$1,145</b>	<b>\$1,188</b>	<b>\$1,323</b>	<b>\$1,375</b>	<b>\$4,416</b>
Access assessments completed	2,192	1,613	1,831	1,950	2,325
<b>Emergency Services</b>	<b>\$3,966</b>	<b>\$4,255</b>	<b>\$4,746</b>	<b>\$5,071</b>	<b>\$6,835</b>
Emergency Services clients served	2,926	2,439	2,351	3,000	2,400

## Medical Services

Provides psychiatric evaluations, medication, MAT, and assessments as to the need for medical follow-up to clients. Nursing staff maintains medication records and inventory, conduct primary care screenings, and provide patient care as directed by psychiatrists. Medical Services also provides medical consultation to staff regarding their clients, as well as education to staff and clients regarding psychotropic medication.

Key Measures	FY19 Actuals	FY20 Actuals	FY21 Actuals	FY22 Adopted	FY23 Adopted
Medical Services customers satisfied with services	94%	93%	90%	91%	90%

Program Activities & Workload Measures <i>(Dollar amounts expressed in thousands)</i>	FY19 Actuals	FY20 Actuals	FY21 Actuals	FY22 Adopted	FY23 Adopted
<b>Medical Services</b>	<b>\$2,570</b>	<b>\$2,842</b>	<b>\$2,964</b>	<b>\$3,643</b>	<b>\$4,386</b>
Total clients served by Medical Services	2,227	2,119	2,241	2,200	2,550

# Community Services

## 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	FY19 Actuals	FY20 Actuals	FY21 Actuals	FY22 Adopted	FY23 Adopted
Clients who maintain employment for more than 90 days	87%	92%	86%	90%	89%
Psychosocial rehabilitation clients who maintain or improve functioning level	100%	94%	91%	90%	93%
Vocational Services clients reporting satisfaction with services	94%	94%	93%	95%	95%

Program Activities & Workload Measures (Dollar amounts expressed in thousands)	FY19 Actuals	FY20 Actuals	FY21 Actuals	FY22 Adopted	FY23 Adopted
<b>Day Support Services</b>	<b>\$1,150</b>	<b>\$1,129</b>	<b>\$1,253</b>	<b>\$1,251</b>	<b>\$1,356</b>
Clients served by day support services	110	97	84	105	100
<b>Employment Services</b>	<b>\$734</b>	<b>\$712</b>	<b>\$773</b>	<b>\$791</b>	<b>\$829</b>
Clients served by employment services	261	226	177	256	252

## Mental Health Residential Services

Assists 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	FY19 Actuals	FY20 Actuals	FY21 Actuals	FY22 Adopted	FY23 Adopted
Clients successfully engaged in services and maintained in the community	97%	96%	98%	95%	95%
Clients expressing satisfaction with service provided	86%	86%	87%	90%	90%

Program Activities & Workload Measures (Dollar amounts expressed in thousands)	FY19 Actuals	FY20 Actuals	FY21 Actuals	FY22 Adopted	FY23 Adopted
<b>Supportive Residential In-Home Services</b>	<b>\$2,424</b>	<b>\$2,489</b>	<b>\$2,645</b>	<b>\$2,795</b>	<b>\$3,179</b>
Clients served by supportive residential in-home services	157	139	152	150	150
<b>Intensive Residential Services</b>	<b>\$922</b>	<b>\$1,358</b>	<b>\$714</b>	<b>\$1,518</b>	<b>\$1,518</b>
Clients served in group homes	32	30	15	15	15
<b>Crisis Stabilization Services</b>	<b>\$1,899</b>	<b>\$1,921</b>	<b>\$995</b>	<b>\$1,947</b>	<b>\$1,947</b>
Clients served by crisis stabilization services	236	205	97	250	200
<b>Intensive Community Treatment (ICT) Services</b>	<b>\$1,557</b>	<b>\$1,641</b>	<b>\$1,752</b>	<b>\$1,897</b>	<b>\$2,038</b>
Clients served by ICT services	75	86	107	90	115
<b>Young Adult Services (YAS)</b>	<b>\$592</b>	<b>\$853</b>	<b>\$923</b>	<b>\$1,123</b>	<b>\$1,484</b>
Clients served in YAS	48	46	47	50	50

# Community Services

## Developmental Disability Day Support/Employment Services

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

Key Measures	FY19 Actuals	FY20 Actuals	FY21 Actuals	FY22 Adopted	FY23 Adopted
Program clients successfully maintained in the community	94%	94%	90%	96%	96%
Clients who are satisfied with program services	97%	90%	90%	98%	98%

Program Activities & Workload Measures <i>(Dollar amounts expressed in thousands)</i>	FY19 Actuals	FY20 Actuals	FY21 Actuals	FY22 Adopted	FY23 Adopted
<b>Day Care Services</b>	<b>\$485</b>	<b>\$668</b>	<b>\$698</b>	<b>\$583</b>	<b>\$584</b>
Clients served by day care services	80	48	31	55	85
<b>Day Support Services</b>	<b>\$1,204</b>	<b>\$857</b>	<b>\$761</b>	<b>\$1,163</b>	<b>\$1,313</b>
Clients served by DD day support services	37	35	16	52	55
<b>Sheltered Employment Services</b>	<b>\$154</b>	<b>\$11</b>	<b>\$6</b>	<b>\$576</b>	<b>\$577</b>
<b>Supported Employment Services</b>	<b>\$664</b>	<b>\$846</b>	<b>\$691</b>	<b>\$1,178</b>	<b>\$1,329</b>
Clients served by supported employment services	81	80	58	92	92

## Intellectual/Developmental Disability Day Residential Services

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

Key Measures	FY19 Actuals	FY20 Actuals	FY21 Actuals	FY22 Adopted	FY23 Adopted
Client family satisfaction	96%	94%	97%	95%	95%

Program Activities & Workload Measures <i>(Dollar amounts expressed in thousands)</i>	FY19 Actuals	FY20 Actuals	FY21 Actuals	FY22 Adopted	FY23 Adopted
<b>Group Home Services</b>	<b>\$181</b>	<b>\$259</b>	<b>\$256</b>	<b>\$120</b>	<b>\$120</b>
Clients served by group home services	247	250	254	255	255
<b>Supported Living Services</b>	<b>\$608</b>	<b>\$682</b>	<b>\$643</b>	<b>\$652</b>	<b>\$451</b>
Clients served by supported living services	26	21	21	30	30

# Community Services

## Youth Substance Abuse & Mental Health Services

Provides services to youth with mental health and/or substance abuse disorders in local public high schools, outpatient clinics, and homes. Services provided include assessment, individual, family and group therapy, case management, behavioral health wellness, and HIDTA prevention.

Key Measures	FY19 Actuals	FY20 Actuals	FY21 Actuals	FY22 Adopted	FY23 Adopted
Clients completing treatment who improve in functioning	83%	73%	48%	75%	75%
Clients satisfied with services	95%	96%	93%	95%	95%
Teen clients who stop using drugs/alcohol	65%	64%	79%	65%	65%
Grade point average improvements for HIDTA prevention clients*	+0.70	NR	NR	+0.70	+0.70
Reduced school absences for HIDTA prevention clients*	51%	NR	NR	40%	40%

\*Due to COVID-19 data was not collected for FY20 and FY21 for both HIDTA measures.

Program Activities & Workload Measures (Dollar amounts expressed in thousands)	FY19 Actuals	FY20 Actuals	FY21 Actuals	FY22 Adopted	FY23 Adopted
<b>Behavioral Health Wellness Services</b>	<b>\$3,495</b>	<b>\$876</b>	<b>\$916</b>	<b>\$1,129</b>	<b>\$1,565</b>
Prevention activity participants (students and parents)	309	519	1,380	400	400
<b>Case Management</b>	<b>\$3</b>	<b>\$1,781</b>	<b>\$1,897</b>	<b>\$2,017</b>	<b>\$2,273</b>
Clients served by case management	245	301	292	275	335
<b>Outpatient Services</b>	<b>\$0</b>	<b>\$984</b>	<b>\$1,183</b>	<b>\$1,443</b>	<b>\$1,696</b>
Clients served by outpatient	1,565	1,227	923	1,657	1,657

## Developmental Disability Case Management

Provides case management, support, and connections to community resources and services for individuals who have a DD and may need assistance accessing supports in the community. Serves all ages with priority to adults and all DD waiver recipients.

Key Measures	FY19 Actuals	FY20 Actuals	FY21 Actuals	FY22 Adopted	FY23 Adopted
Clients successfully maintained in the community	96%	97%	97%	98%	98%
Clients and family members satisfied with services	89%	90%	97%	93%	93%

Program Activities & Workload Measures (Dollar amounts expressed in thousands)	FY19 Actuals	FY20 Actuals	FY21 Actuals	FY22 Adopted	FY23 Adopted
<b>Case Management Services</b>	<b>\$4,519</b>	<b>\$4,707</b>	<b>\$5,537</b>	<b>\$5,861</b>	<b>\$7,038</b>
Clients served by DD case management services	1,004	1,051	1,131	1,270	1,390

# Community Services

## Clinical Behavioral Health Program (CBHP)\*

Provides outpatient case management and treatment services to adults and their families for individuals with a behavioral health or mental health illness. Services include individual, family, and group therapy, evaluations, case coordination, case management, peer support, and community referrals. Provides case management and outpatient treatment services to adults ages 18 and older diagnosed with a serious mental illness and/or co-occurring disorders and involve the client's family as clinically indicated. Case management services identify and link individuals to community resources that facilitate community integration. Outpatient Treatment services provide evidence-based, trauma-informed, culturally competent, individual and group therapy. All treatment services are time limited.

Key Measures	FY19 Actuals	FY20 Actuals	FY21 Actuals	FY22 Adopted	FY23 Adopted
Seriously mentally ill clients completing treatment who improve in functioning	35%	36%	56%	40%	40%
Clients satisfied with services received	96%	86%	93%	90%	90%

Program Activities & Workload Measures <i>(Dollar amounts expressed in thousands)</i>	FY19 Actuals	FY20 Actuals	FY21 Actuals	FY22 Adopted	FY23 Adopted
<b>Seriously Mentally Ill Adult and Family Services</b>	<b>\$4,010</b>	<b>\$3,336</b>	<b>\$3,525</b>	<b>\$3,798</b>	<b>\$4,358</b>
Clients served by seriously mentally ill adult and family services	1,981	1,751	1,747	1,700	1,760

\*CS changed the name of Mental Health Outpatient to CBHP at the end of FY21.

## Comprehensive Outpatient Recovery Program (CORP)\*

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

Key Measures	FY19 Actuals	FY20 Actuals	FY21 Actuals	FY22 Adopted	FY23 Adopted
Clients who are substance free upon completion of treatment	71%	74%	75%	75%	75%
Customers satisfied with services received	98%	95%	96%	95%	95%

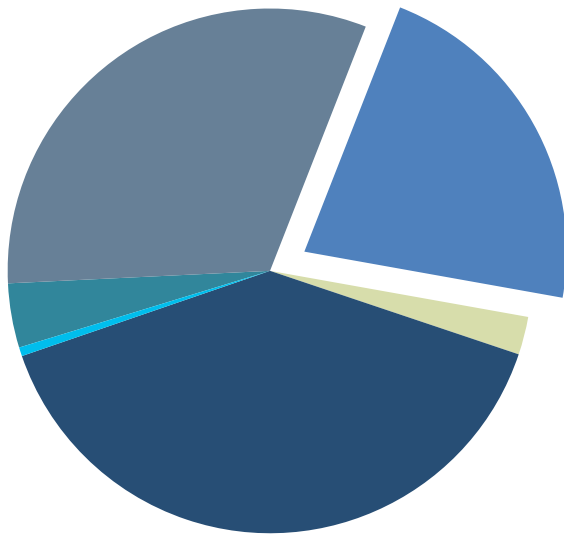
Program Activities & Workload Measures <i>(Dollar amounts expressed in thousands)</i>	FY19 Actuals	FY20 Actuals	FY21 Actuals	FY22 Adopted	FY23 Adopted
<b>Adult SA Services</b>	<b>\$2,198</b>	<b>\$2,449</b>	<b>\$2,841</b>	<b>\$3,386</b>	<b>\$3,893</b>
Clients served by adult SA services	984	722	826	900	850

\*CS changed the name of Substance Abuse Adult Outpatient to CORP at the end of FY21.

# Housing & Community Development

## Mission Statement

The Office of Housing & Community Development will transform lives by developing 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.



**Human Services Expenditure Budget:**  
**\$207,633,469**

**Expenditure Budget:**  
**\$45,402,731**



*21.9% of Human Services*

### Programs:

- Community Preservation & Development: \$5,253,493
- Housing Finance & Development: \$1,822,338
- Rental Assistance: \$38,089,348
- Affordable Housing Support: \$237,552

## 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.

# Housing & Community Development

## Expenditure and Revenue Summary



Expenditure by Program	FY19 Actuals	FY20 Actuals	FY21 Actuals	FY22 Adopted	FY23 Adopted	% Change Budget FY22/ Budget FY23
Community Preservation & Development	\$2,370,807	\$2,404,803	\$3,102,257	\$4,685,709	\$5,253,493	12.12%
Housing Finance & Development	\$998,406	\$421,811	\$390,180	\$1,604,977	\$1,822,338	13.54%
Rental Assistance	\$28,377,015	\$28,477,904	\$29,336,102	\$36,822,332	\$38,089,348	3.44%
Affordable Housing Support	\$93,619	\$2,161,668	\$486,971	\$229,958	\$237,552	3.30%
<b>Total Expenditures</b>	<b>\$31,839,846</b>	<b>\$33,466,187</b>	<b>\$33,315,510</b>	<b>\$43,342,977</b>	<b>\$45,402,731</b>	<b>4.75%</b>

### Expenditure by Classification

Salaries & Benefits	\$2,198,586	\$2,328,230	\$2,468,852	\$2,252,548	\$2,586,835	14.84%
Contractual Services	\$1,882,068	\$3,618,448	\$1,614,960	\$3,776,229	\$4,265,161	12.95%
Internal Services	\$134,985	\$122,649	\$133,957	\$101,704	\$101,704	0.00%
Purchase of Goods & Services	\$27,478,523	\$27,241,887	\$28,798,640	\$37,028,571	\$38,235,106	3.26%
Leases & Rentals	\$30,569	\$21,780	\$17,340	\$40,732	\$40,732	0.00%
Transfers Out	\$115,116	\$133,193	\$281,761	\$143,193	\$173,193	20.95%
<b>Total Expenditures</b>	<b>\$31,839,846</b>	<b>\$33,466,187</b>	<b>\$33,315,510</b>	<b>\$43,342,977</b>	<b>\$45,402,731</b>	<b>4.75%</b>

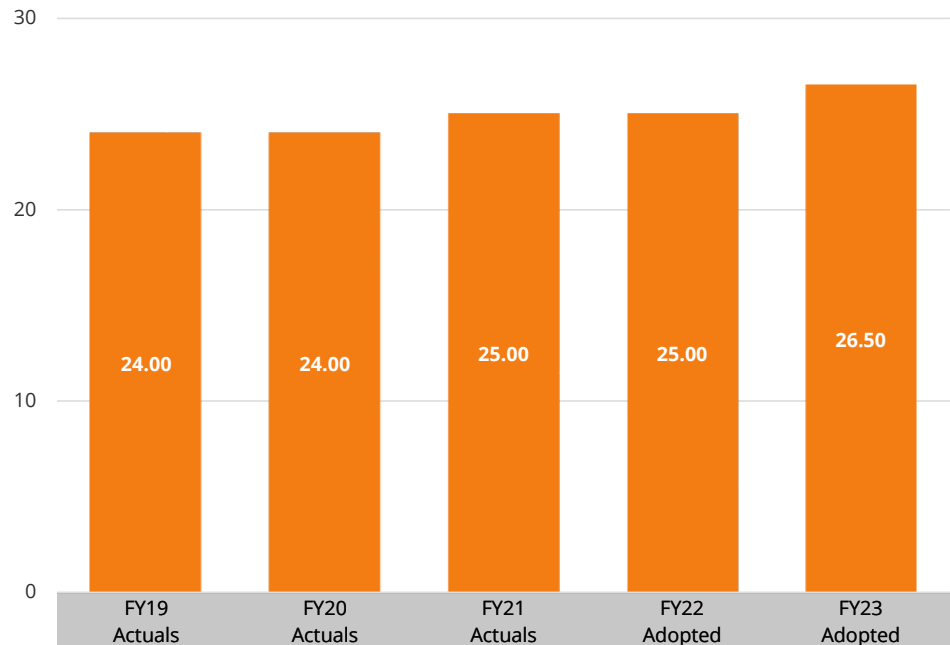
### Funding Sources

Revenue from Federal Government	\$28,190,920	\$28,817,020	\$32,399,746	\$34,954,940	\$36,746,078	5.12%
Miscellaneous Revenue	\$0	\$0	\$0	\$145,000	\$145,000	0.00%
Non-Revenue Receipts	\$0	\$0	\$5,711	\$0	\$0	-
Charges for Services	\$2,743,311	\$2,380,911	\$1,025,053	\$7,970,100	\$7,970,100	0.00%
Revenue from Commonwealth	\$0	\$155,887	\$458,972	\$0	\$0	-
Transfers In	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000	0.00%
<b>Total Designated Funding Sources</b>	<b>\$30,944,231</b>	<b>\$31,363,817</b>	<b>\$33,899,482</b>	<b>\$43,080,040</b>	<b>\$44,871,178</b>	<b>4.16%</b>
<b>(Contribution to)/Use of Fund Balance</b>	<b>\$759,974</b>	<b>\$2,017,768</b>	<b>(\$801,114)</b>	<b>\$45,796</b>	<b>\$314,412</b>	
<b>Net General Tax Support</b>	<b>\$135,641</b>	<b>\$84,602</b>	<b>\$217,141</b>	<b>\$217,141</b>	<b>\$217,141</b>	<b>0.00%</b>
<b>Net General Tax Support</b>	<b>0.43%</b>	<b>0.25%</b>	<b>0.65%</b>	<b>0.50%</b>	<b>0.48%</b>	



# Housing & Community Development

## Staff History by Program



	FY19 Actuals	FY20 Actuals	FY21 Actuals	FY22 Adopted	FY23 Adopted
Community Preservation & Development	3.02	3.97	3.93	3.87	3.87
Housing Finance & Development	1.00	1.00	0.73	0.74	0.74
Rental Assistance	19.98	19.03	19.59	19.64	21.14
Affordable Housing Support	0.00	0.00	0.75	0.75	0.75
<b>Full-Time Equivalent (FTE) Total</b>	<b>24.00</b>	<b>24.00</b>	<b>25.00</b>	<b>25.00</b>	<b>26.50</b>

## Future Outlook

**Increased Cost of Affordable Housing** – In the administration of the Housing Choice Voucher Program (HCVP), Small Area Fair Market Rent (SAFMR) established at the ZIP code level replaced the 50th percentile Fair Market Rents previously required for metropolitan areas with high concentrations of voucher families. SAFMRs are intended to provide families residing in low-income areas the opportunity to move to areas with higher rents, thereby making them affordable. Public Housing Authorities are required to use SAFMRs in establishing families' payment standards. This change has increased the payment standards for the HCVP. In addition, due to COVID-19 and eviction moratoriums, some landlords are requesting higher rents to cover their losses during the pandemic. Increased rents increase program costs, thereby reducing the number of people served.

**500 Families Waiting for Affordable Housing** – The waiting list for the HCVP was last opened December 2010 with more than 8,500 applicants. Currently, there are approximately 500 applicants on the waiting list. The Office of Housing & Community Development (OHCD) anticipates assisting an additional 100 elderly and/or disabled families currently on its waiting list in FY23.

**Special Voucher Program Funds** – The U.S. Department of Housing and Urban Development (HUD) created new voucher programs (Emergency Housing Vouchers - EHV) in FY21. OHCD was awarded 53 vouchers to address homelessness in FY22. It is anticipated that additional funding will become available for which OHCD will apply. In addition to EHV, OHCD has applied for additional funds for Veterans Affairs Supportive Housing (VASH) vouchers to assist veterans with rental assistance.

# Housing & Community Development

## General Overview

- A. FY22 Budget Reconciliation** – Prince William County (PWC) adopted its FY2022 Budget prior to the County receiving its final FY21 budget allocation from the U.S. Department of Housing & Urban Development. The County adjusted the OHCD budget ([BOCS Resolution 21-400](#)) to reflect the actual allocations awarded from all sources. The FY22 budget reconciliation resulted in a \$4,812,337 increase in revenue and expenditures as well as a 1.50 increase in full-time equivalent (FTE) employees in FY22. The FTE increase was for a full-time Housing Program Analyst (1.00 FTE) who will perform case management and a part-time Housing Program Technician (0.50 FTE) to conduct inspections.
- B. Revenue Support for Fair Housing Testing** – The FY2023 Budget includes a \$30,000 increase in the transfer from OHCD to the Human Rights Office for Fair Housing Testing. Prince William County, in conjunction with the Metropolitan Washington Council of Governments, has begun a process of developing the next Regional Analysis of Impediments to Fair Housing Choice (Regional Fair Housing Plan). The Regional Fair Housing Plan is completed every five years to “affirmatively further fair housing” as required by the Fair Housing Act of 1968 and the Housing and Community Development Act of 1974. The Regional Fair Housing Plan plays an important role in helping Prince William County decide how to prioritize its HUD funding. As subrecipients in previous years, the County received Community Development Block Grant funds from the Housing Department to conduct Fair Housing Testing.

## Program Summary

### Community Preservation & Development

Community Planning & Development administers two federal programs through the U.S. Department of Housing and Urban Development (HUD)—the Community Development Block Grant (CDBG) program and the Emergency Solutions Grant (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 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 is 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 transitional housing units for families referred by local shelters.

Key Measures	FY19 Actuals	FY20 Actuals	FY21 Actuals	FY22 Adopted	FY23 Adopted
Persons provided with housing and other related services - CDBG	1,101	2,094	2,748	2,094	2,094
Persons provided with homelessness prevention and emergency shelter	1,107	998	881	1,107	881
Families completing transitional housing program & moving to permanent housing	25%	50%	100%	66%	50%

# Housing & Community Development

<b>Program Activities &amp; Workload Measures</b> <i>(Dollar amounts expressed in thousands)</i>	<b>FY19 Actuals</b>	<b>FY20 Actuals</b>	<b>FY21 Actuals</b>	<b>FY22 Adopted</b>	<b>FY23 Adopted</b>
<b>Housing Rehabilitation</b>	<b>\$1,733</b>	<b>\$1,318</b>	<b>\$1,821</b>	<b>\$4,125</b>	<b>\$4,680</b>
Substandard single-family housing units rehabilitated	15	8	6	12	8
<b>Community Improvement &amp; Housing Supportive Services</b>	<b>\$450</b>	<b>\$949</b>	<b>\$1,178</b>	<b>\$298</b>	<b>\$307</b>
Persons provided with homelessness prevention and emergency shelter services	1,107	998	881	1,107	881
Improvement projects managed	15	16	14	15	14
<b>Manage Transitional Housing at Dawson Beach</b>	<b>\$187</b>	<b>\$137</b>	<b>\$103</b>	<b>\$262</b>	<b>\$266</b>
Homeless families served	8	6	5	8	8

## Housing Finance & Development

PWC, along with 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 PWC 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 that develops affordable housing for the community it serves.

<b>Key Measures</b>	<b>FY19 Actuals</b>	<b>FY20 Actuals</b>	<b>FY21 Actuals</b>	<b>FY22 Adopted</b>	<b>FY23 Adopted</b>
Federal & state funds for households to become first-time homebuyers	\$983K	\$353K	\$974K	\$532K	\$974K
Private mortgage financing generated on behalf of first-time homebuyers	\$2.2M	\$876K	\$232K	\$900K	\$500K

<b>Program Activities &amp; Workload Measures</b> <i>(Dollar amounts expressed in thousands)</i>	<b>FY19 Actuals</b>	<b>FY20 Actuals</b>	<b>FY21 Actuals</b>	<b>FY22 Adopted</b>	<b>FY23 Adopted</b>
<b>Homeownership Assistance</b>	<b>\$998</b>	<b>\$422</b>	<b>\$390</b>	<b>\$1,605</b>	<b>\$1,822</b>
Families assisted to become first-time homebuyers	11	4	4	8	8
Affordable units added, with counseling to the families that rent/purchase units	19	10	9	14	8

# Housing & Community Development

## Rental Assistance

The Rental Assistance Unit manages the HCVP, 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.

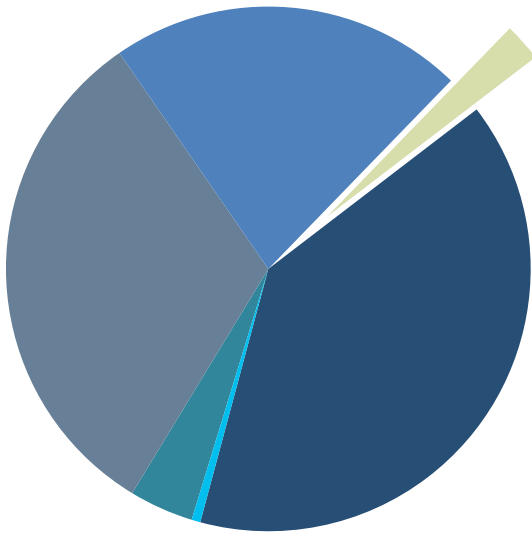
Key Measures	FY19 Actuals	FY20 Actuals	FY21 Actuals	FY22 Adopted	FY23 Adopted
Eligible elderly and disabled persons in HCVP provided with rental assistance	65%	47%	72%	61%	80%
Family Self Sufficiency Grant families who successfully meet program goals	20%	50%	83%	80%	83%
Rental income paid to local property owners on behalf of families	\$26.3M	\$24.0M	\$26.8M	\$29.0M	\$27.8M
Annual HCVP performance evaluation score from HUD	100%	100%	100%	98%	100%
Families assisted by OHCD with low-income housing	4,041	4,198	6,274	5,700	5,700

Program Activities & Workload Measures <i>(Dollar amounts expressed in thousands)</i>	FY19 Actuals	FY20 Actuals	FY21 Actuals	FY22 Adopted	FY23 Adopted
<b>Housing Assistance Program Payments</b>	<b>\$26,445</b>	<b>\$26,468</b>	<b>\$27,217</b>	<b>\$34,928</b>	<b>\$36,032</b>
Families provided with rental assistance	1,859	2,089	2,408	2,090	2,408
<b>Housing Assistance Program Administration</b>	<b>\$1,933</b>	<b>\$2,010</b>	<b>\$2,119</b>	<b>\$1,894</b>	<b>\$2,057</b>
Participant eligibility determinations	1,982	2,495	2,242	2,500	2,500
Families on the HVCP rental assistance waitlist	1,380	691	589	603	500

# Public Health

## Mission Statement

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



**Human Services Expenditure Budget:**  
**\$207,633,469**

**Expenditure Budget:**  
**\$4,862,858**



*2.3% of Human Services*

### Programs:

- Maternal & Child Health: \$309,685
- General Medicine: \$3,153,709
- Environmental Health: \$895,737
- Administration/Emergency Preparedness: \$503,727

## 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 Public Health. State mandated services provided on behalf of Prince William County by the Public Health includes 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 the Public Health has responsibility.

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

**County Code:** [Chapter 3](#) (Amusements), [Chapter 8](#) (Environmental Protection), [Chapter 10](#) (Concession Stands at Youth Activities), [Chapter 12](#) (Massage Establishments), [Chapter 22 Article 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)

# Public Health

## Expenditure and Revenue Summary



Expenditure by Program	FY19 Actuals	FY20 Actuals	FY21 Actuals	FY22 Adopted	FY23 Adopted	% Change Budget FY22/ Budget FY23
Maternal & Child Health	\$774,014	\$309,685	\$1,205,691	\$309,685	\$309,685	0.00%
General Medicine	\$1,400,628	\$1,934,366	\$1,701,364	\$3,117,718	\$3,153,709	1.15%
Environmental Health	\$908,035	\$906,189	\$580,769	\$899,254	\$895,737	(0.39%)
Administration/Emergency Preparedness	\$170,202	\$167,009	\$163,685	\$237,378	\$503,727	112.20%
<b>Total Expenditures</b>	<b>\$3,252,878</b>	<b>\$3,317,249</b>	<b>\$3,651,509</b>	<b>\$4,564,035</b>	<b>\$4,862,858</b>	<b>6.55%</b>

### Expenditure by Classification

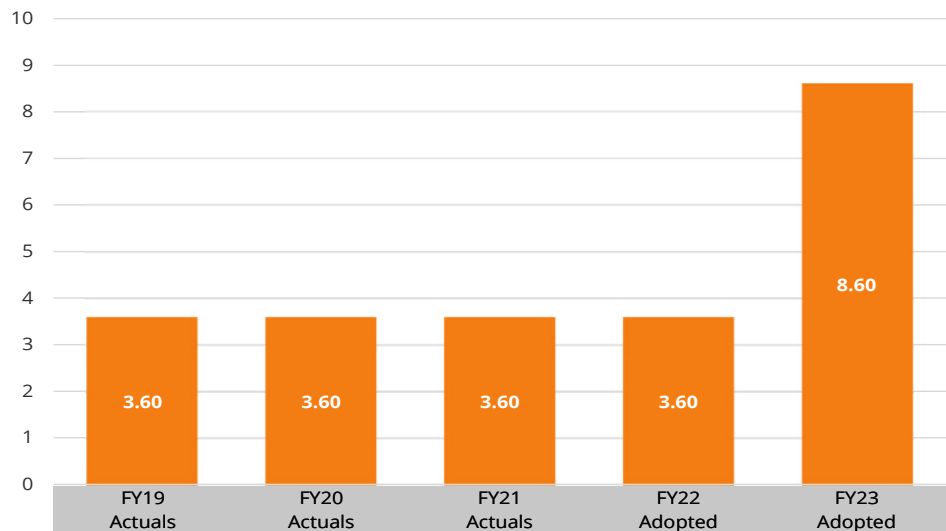
Salaries & Benefits	\$146,517	\$211,339	\$272,716	\$1,454,156	\$1,705,190	17.26%
Contractual Services	\$0	\$120	\$95	\$1,415	\$1,415	0.00%
Internal Services	\$52,934	\$46,587	\$42,363	\$33,435	\$61,008	82.47%
Purchase of Goods & Services	\$3,053,427	\$3,059,204	\$3,336,335	\$3,075,030	\$3,095,246	0.66%
<b>Total Expenditures</b>	<b>\$3,252,878</b>	<b>\$3,317,249</b>	<b>\$3,651,509</b>	<b>\$4,564,035</b>	<b>\$4,862,858</b>	<b>6.55%</b>

### Funding Sources

Permits & Fees	\$212,407	\$186,162	\$176,033	\$176,746	\$176,746	0.00%
Revenue from Other Localities	\$79,728	\$96,408	\$75,907	\$75,566	\$104,653	38.49%
Miscellaneous Revenue	\$0	\$0	\$127	\$0	\$0	-
Revenue from Commonwealth	\$338,269	\$311,286	\$515,472	\$303,397	\$303,397	0.00%
<b>Total Designated Funding Sources</b>	<b>\$630,404</b>	<b>\$593,856</b>	<b>\$767,538</b>	<b>\$555,709</b>	<b>\$584,796</b>	<b>5.23%</b>
<b>Net General Tax Support</b>	<b>\$2,622,474</b>	<b>\$2,723,393</b>	<b>\$2,883,971</b>	<b>\$4,008,326</b>	<b>\$4,278,062</b>	<b>6.73%</b>
<b>Net General Tax Support</b>	<b>80.62%</b>	<b>82.10%</b>	<b>78.98%</b>	<b>87.82%</b>	<b>87.97%</b>	

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

## Staff History by Program



Maternal & Child Health	0.00	0.00	0.00	0.00	0.00
General Medicine	3.00	3.00	3.00	3.00	3.00
Environmental Health	0.60	0.60	0.60	0.60	0.60
Administration/Emergency Preparedness	0.00	0.00	0.00	0.00	5.00
<b>Full-Time Equivalent (FTE) Total</b>	<b>3.60</b>	<b>3.60</b>	<b>3.60</b>	<b>3.60</b>	<b>8.60</b>

## Future Outlook

**Pandemic Response** – Public Health continues to direct significant resources to include disease surveillance, investigation, and containment toward the COVID-19 response. Vaccines are available to include the roll out of booster shots as Public Health continues to implement and monitor a COVID-19 vaccination response for the community at large, ensuring health equity is a cornerstone of the response.

**Future Public Health** – The COVID-19 response has led to a growing awareness of the essential role of public health and the underinvestment in public health agencies. The lack of consistent and stable public health funding affects the coordination and preparedness of the community to adequately deal with outbreaks, emerging public health issues and pandemics. Public health infrastructure provides communities the capacity to prevent disease, promote health and prepare for and respond to both acute and chronic health threats. Adequate infrastructure is the foundation for planning, delivering, evaluating, and improving public health.

**Community Health Services** – Public Health is working to ensure a strong, competent public health workforce by collaborating with schools of nursing to train current and future nurses to be public health ready as well as to build a pipeline of future public health nurses. Building a strong workforce will help Public Health continue to manage emerging infectious disease and other threats to the health of the community.

**Environmental Health Services** – Public Health is working to ensure a competent public health workforce by collaborating with colleges and the private sector to ensure hired staff can complete the required training and oversight of the work performed by the licensed private sector supplier.

## General Overview

**A. FY22 Public Health Funding** – The Commonwealth of Virginia partners with localities to provide public health services through a cooperative arrangement. Currently, the cooperative budget is funded 55% by state funds and 45% by Prince William County (PWC) matching funds. The County enters into an annual agreement with the Virginia Department of Health to provide the 45% funding necessary to operate Public Health. The County also provides local support above the match amount for certain local optional services. In FY22, state funding for Public Health was \$2,732,110 and the County match funding was \$2,235,363. The County also provided an additional \$2,328,672 in local expenditure budget support for staffing, local salary supplement, operations, and community partnerships above the amount included in the annual agreement. The cities of Manassas and Manassas Park provide reimbursement to the County for services rendered based on a shared services agreement with the County. Total FY22 state and County budgeted expenditures for the Public Health were \$7,296,145, with the County providing a total of \$4,564,035.

**B. Redistribution of Internal Service Fund (ISF) Technology Budget** – The County annually allocates all information technology (IT) costs to agencies through an ISF, using the approved cost basis for each technology activity. Technology activities include computer support (hardware replacement, software licenses, and helpdesk customer services), IT security, business systems support (public safety communications, financial systems, human services systems, etc.), geographic information system, web services, capital equipment replacement, messaging, cloud storage, network and infrastructure services, telecommunications, and radio. The cost basis is calculated through a formula derived from the Department of Information Technology's (DoIT) ISF fee schedule.

For FY23, ISF costs have been revised to align and more accurately reflect overall technology activities with current department specific technology services. Costs are adjusted to reflect agency technology usage more accurately, as tracked by DoIT billing systems using the updated methodology. In FY23, the Public Health technology bill increases by \$319. No technology service levels are changed, and there is no impact to the technology services individual agencies currently receive. For additional information on the countywide impact and methodology of redistributing technology charges, please see the Budget Highlights section of this document.

**C. Revenue Increase for Shared Services (City) Billings** – The billings represent reimbursement from the City of Manassas and Manassas Park for services rendered in the previous year. Services rendered include activities within public safety, community development, and human services functional areas. Amounts are calculated using an annual cost allocation report. As a result of the annual report, Public Health revenue increased \$29,087.

# Public Health

## Budget Initiatives

### A. Budget Initiatives

#### 1. Soft Rollout of County Public Health Department – Administration/Emergency Preparedness

Expenditure	\$273,795
Revenue	\$0
General Fund Impact	\$273,795
FTE Positions	5.0

- a. **Description** – On October 20, 2020, Board of County Supervisors (BOCS) issued [Directive 20-83](#) which directed the County staff to explore and prepare a proposal to create a County operated Public Health Department. During the March 8, 2022, [budget work session](#) the Acting County Executive presented a transition model to the BOCS. It was decided that an additional year was needed to successfully complete the transition project. This initiative includes a soft rollout of the Public Health Department transition project as well as five new positions. The positions will onboard mid-year (beginning January 2023) and consist of an Assistant Public Health Director, a Grants Manager, two Human Resources Analysts, and an Information Technology Data Analyst. General tax support funding is included for annual technology seat costs (software, telecommunications, security, cloud hosting, etc.). One-time technology equipment costs will be funded by American Rescue Plan Act funding.
- b. **Service Level Impacts** – This initiative funds the soft rollout of positions that will help with the larger transition project in FY24. This initiative supports several Health, Wellbeing, & Human Services Strategic Goals from the [2021-2024 Strategic Plan](#). This initiative will improve awareness and access to quality, affordable services that address physical developmental, mental health and substance abuse needs. It also supports community campaigns and partnerships on social determinants of health that work to increase prevention, provide education, and reduce stigma towards obtaining treatment and services.

## Program Summary

### Maternal & Child Health

The Maternal & Child Health program improves the health of women and children in the PWHC by assessing their needs and assuring that quality services are accessible. PWHC 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 PWHC 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	FY19 Actuals	FY20 Actuals	FY21 Actuals	FY22 Adopted	FY23 Adopted
Infant deaths per 1,000 live births	4.2	3.8	5.1	4.5	4.5
Infant deaths per 1,000 live births (Black, non-hispanic)	-	-	12.3	7.5	7.5



# Public Health

Program Activities & Workload Measures <i>(Dollar amounts expressed in thousands)</i>	FY19 Actuals	FY20 Actuals	FY21 Actuals	FY22 Adopted	FY23 Adopted
<b>Women's Wellness</b>	<b>\$310*</b>	<b>\$310</b>	<b>\$1,206**</b>	<b>\$310</b>	<b>\$310</b>
Women served in women's wellness clinics	947	384	84	600	200
<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	7,345	7,456	8,381	7,000	8,400
Overweight participant children (age 2 yrs - 5 yrs) % children ≥ 85th percentile	-	-	-	20%	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 activity.

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

## General Medicine

The General Medicine program improves the health of all residents in the community by monitoring, investigating, controlling, and reporting the spread of communicable diseases including tuberculosis (TB), vaccine preventable diseases, sexually transmitted infections (STI), and other communicable diseases, especially emerging diseases of public health significance. PWHD collaborates with community partners to assess and address environmental strategies, and system changes that will prevent chronic diseases, encourage healthy lifestyles, and improve access to care for persons with health disparities. The district works with community healthcare providers to ensure the proper treatment of communicable 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	FY19 Actuals	FY20 Actuals	FY21 Actuals	FY22 Adopted	FY23 Adopted
Pre-admission nursing home screenings completed within 30 days	80%	92%	95%	90%	90%
Patients completing tuberculosis preventive therapy treatment	65%	89%	81%	90%	90%
Vaccine-preventable disease cases per 100,000 population	10	14	2	10	10
Non-vaccine preventable reportable conditions/100,000 population	101	98	5,536	100	100
Diagnosed chlamydia cases/100,000 population	494	548	418	500	500
Diagnosed gonorrhea cases/100,000 population	75	89	96	75	90
Diagnosed syphilis cases/100,000 population	-	-	-	11	15

# Public Health

Program Activities & Workload Measures <i>(Dollar amounts expressed in thousands)</i>	FY19 Actuals	FY20 Actuals	FY21 Actuals	FY22 Adopted	FY23 Adopted
<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	865	511	275	800	500
<b>Other Communicable Disease Services</b>	<b>\$870</b>	<b>\$1,398</b>	<b>\$1,234</b>	<b>\$2,639</b>	<b>\$2,665</b>
Patients receiving tuberculosis preventive therapy	77	84	25	100	100
Suspected tuberculosis follow-ups	115	69	20	130	100
Reportable conditions investigated	1,543	1,690	34,306	2,000	2,000
Private provider reports of positive STI's for review and follow-up	-	866	2,926	1,000	3,000
<b>Chronic Disease Services</b>	<b>\$116</b>	<b>\$116</b>	<b>\$115</b>	<b>\$116</b>	<b>\$116</b>
Persons screened for nursing home pre-admission and personal care services	679	631	672	700	700
<b>Primary Health Care Services</b>	<b>\$167</b>	<b>\$173</b>	<b>\$105</b>	<b>\$115</b>	<b>\$125</b>
Clients served by community partners	2,484	2,732	801	578	828

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

## Environmental Health

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

Key Measures	FY19 Actuals	FY20 Actuals	FY21 Actuals	FY22 Adopted	FY23 Adopted
The number of foodborne illness complaints in PWC investigated	-	41	34	75	75
Septic tank owners in compliance with Chesapeake Bay Preservation Act	77%	78%	79%	80%	80%
On-site sewage applications completed within 15 days	82%	91%	94%	95%	95%
Founded health and safety menaces corrected	93%	95%	95%	95%	95%
Humans potentially exposed to rabies	1,046	1,072	954	1,100	1,100
Swimming pools in compliance with County code requirements	85%	90%	90%	90%	90%

# Public Health

Program Activities & Workload Measures <i>(Dollar amounts expressed in thousands)</i>	FY19 Actuals	FY20 Actuals	FY21 Actuals	FY22 Adopted	FY23 Adopted
<b>On-site Sewage System Permits and Maintenance</b>	<b>\$268</b>	<b>\$268</b>	<b>\$152</b>	<b>\$268</b>	<b>\$264</b>
New on-site sewage applications completed	178	208	232	200	255
Septic tank pump-outs assured	10,962	11,217	11,578	11,500	11,700
<b>Water Supply Protection</b>	<b>\$64</b>	<b>\$64</b>	<b>\$64</b>	<b>\$64</b>	<b>\$64</b>
Repairs to on-site systems (remedial and preventive)	265	104	10	200	-
<b>Inspection Services</b>	<b>\$431</b>	<b>\$429</b>	<b>\$240</b>	<b>\$423</b>	<b>\$423</b>
Food establishment inspections	1,514	1,123	520	2,100	2,100
Swimming pool inspections	295	258	170	300	300
<b>Environmental Complaint Investigations</b>	<b>\$95</b>	<b>\$95</b>	<b>\$74</b>	<b>\$94</b>	<b>\$94</b>
Total environmental complaints investigated	244	257	107	300	300
<b>Rabies Control</b>	<b>\$50</b>	<b>\$50</b>	<b>\$50</b>	<b>\$50</b>	<b>\$50</b>
Animal quarantines completed	939	967	835	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 to include pandemics. In addition, this program supports the ability of hospitals and health care systems to prepare for and respond to bioterrorism and other public health and health care emergencies, in particular by having a robust cache of Medical Reserve Corp volunteers. The client base for this program is comprised of all residents of PWC and the Cities of Manassas and Manassas Park.

Key Measures	FY19 Actuals	FY20 Actuals	FY21 Actuals	FY22 Adopted	FY23 Adopted
Community events during which all hazards preparedness education is provided*	15	25	0	20	15
Customers reporting that they received the information or services they needed*	NR	98%	NR	99%	98%

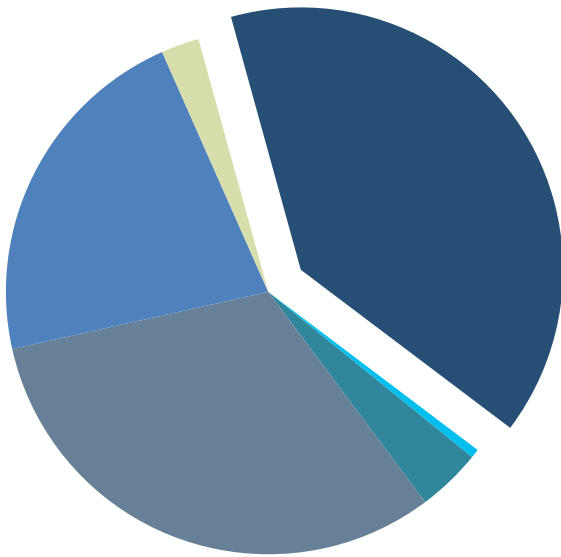
\*Public Health did not hold community events or administer surveys for the customers to give feedback on information received during FY21 due to the COVID-19 pandemic.

Program Activities & Workload Measures <i>(Dollar amounts expressed in thousands)</i>	FY19 Actuals	FY20 Actuals	FY21 Actuals	FY22 Adopted	FY23 Adopted
<b>Leadership and Management Oversight/Emergency Preparedness</b>	<b>\$170</b>	<b>\$167</b>	<b>\$164</b>	<b>\$237</b>	<b>\$504</b>
Deployable Medical Reserve Corps volunteers	393	819	1,100	850	1,100
Emergency response exercises conducted in collaboration with outside partners	9	2	0	4	4

# Social Services

## Mission Statement

The Department of Social Services transforms lives through safety, support, and self-sufficiency.



**Human Services Expenditure Budget:**  
**\$207,633,469**

**Expenditure Budget:**  
**\$82,179,152**



*39.6% of Human Services*

### Programs:

- Protective Services: \$8,126,207
- Family Support Services: \$7,989,430
- Homeless Services: \$7,229,796
- Juvenile Services: \$8,445,333
- Children's Services Act (CSA): \$27,580,529
- Director's Office: \$3,173,979
- Public Assistance: \$14,402,173
- Customer Support & Service: \$5,231,705

## 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, family support services, adult services, adult protective services, or any other service mandates adopted by the State Board of Social Services. The Department of Social Services provides these mandated services.

**State Code:** [63.2-1503](#) (Child-Protective Services, Local Duties), [40-705](#) (Virginia Administrative Code, Child Protective Services), [40-730](#) (Investigation of Child Abuse and Neglect), [32.1-330](#) (Long-Term Care Preadmission Screening), [63.2-1602](#) (Other Local Adult Services), [63.2-1804](#) (Assessment of Adult Care), [63.2-319](#) (Child Welfare Services), [63.2-900](#) (Local Board Placement of Children), [63.2-903](#) (Entrustment Agreements), [63.2-905](#) (Foster Care), [63.2-1105](#) (Children Placed out of Commonwealth), [2.2-5211](#) (Prevention & Assessments and Family Treatment), [63.2-217](#) (Board Regulations), [63.2-611](#) (Case Management, Support Services, Transitional Support Services), [63.2-616](#) (Public Assistance and Social Services), [63.2-1301](#) (Adoption Subsidy), [51.5-160](#) (Auxiliary Grants), [51.5-146](#) (Adult Services), [51.5-148](#) (Adult Protective Services) [2.2-5200](#) (Children Services Act)

**Federal Law:** Homeless Services - Continuum of Care and Homeless Management Information System (HMIS) [Homeless Assistance Act](#)

# Social Services

## Expenditure and Revenue Summary



Expenditure by Program	FY19 Actuals	FY20 Actuals	FY21 Actuals	FY22 Adopted	FY23 Adopted	% Change Budget FY22/ Budget FY23
Protective Services	\$4,654,711	\$6,484,525	\$7,114,978	\$7,571,722	\$8,126,207	7.32%
Family Support Services	\$7,973,943	\$7,480,204	\$7,247,249	\$7,585,265	\$7,989,430	5.33%
Homeless Services	\$3,246,237	\$3,785,949	\$6,048,103	\$6,733,680	\$7,229,796	7.37%
Juvenile Services	\$7,798,966	\$7,339,322	\$7,062,505	\$7,890,611	\$8,445,333	7.03%
Children's Services Act (CSA)	\$17,630,415	\$19,048,032	\$19,000,406	\$27,509,648	\$27,580,529	0.26%
Director's Office	\$2,727,551	\$3,017,391	\$4,210,124	\$2,957,125	\$3,173,979	7.33%
Benefits, Employment, & Child Care	\$13,740,843	\$14,653,976	\$16,279,298	\$16,545,856	-	(100.00%)
Public Assistance	-	-	-	-	\$14,402,173	-
Customer Support & Service	-	-	-	-	\$5,231,705	-
<b>Total Expenditures</b>	<b>\$57,772,667</b>	<b>\$61,809,400</b>	<b>\$66,962,664</b>	<b>\$76,793,908</b>	<b>\$82,179,152</b>	<b>7.01%</b>

### Expenditure by Classification

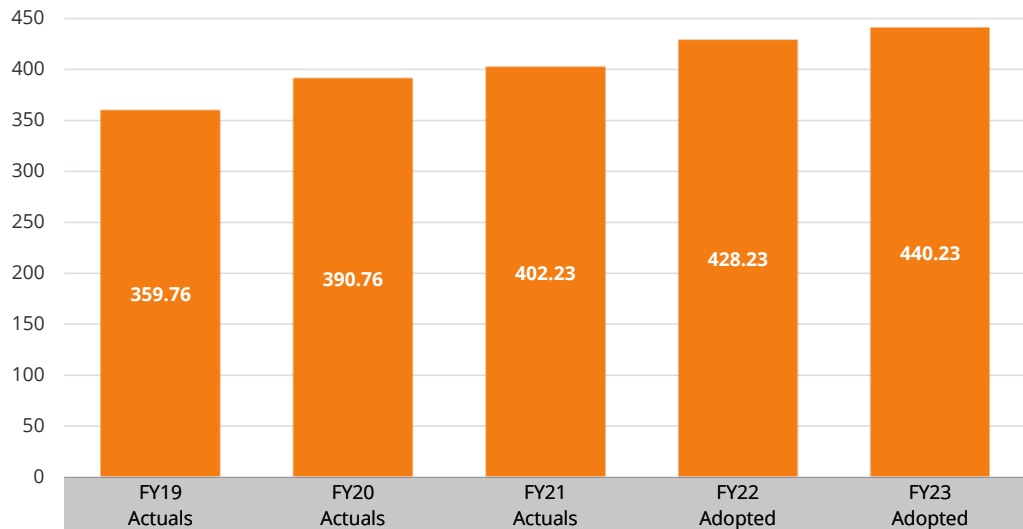
Salaries and Benefits	\$30,637,444	\$32,751,868	\$36,767,275	\$37,769,997	\$41,673,563	10.34%
Contractual Services	\$1,680,978	\$1,861,348	\$2,521,438	\$2,830,990	\$2,627,931	(7.17%)
Internal Services	\$1,725,765	\$1,763,214	\$1,762,818	\$1,526,173	\$2,591,463	69.80%
Purchase of Goods & Services	\$23,457,387	\$25,264,874	\$25,744,324	\$34,081,176	\$34,700,624	1.82%
Capital Outlay	\$109,561	\$0	\$0	\$174,702	\$174,702	0.00%
Leases & Rentals	\$65,222	\$65,710	\$64,423	\$98,261	\$98,261	0.00%
Amortization	\$424	\$0	\$0	\$210,222	\$210,222	0.00%
Transfers Out	\$95,887	\$102,387	\$102,387	\$102,387	\$102,387	0.00%
<b>Total Expenditures</b>	<b>\$57,772,667</b>	<b>\$61,809,400</b>	<b>\$66,962,664</b>	<b>\$76,793,908</b>	<b>\$82,179,152</b>	<b>7.01%</b>

### Funding Sources

Revenue from Federal Government	\$15,511,123	\$16,443,085	\$17,355,127	\$16,051,854	\$16,405,443	2.20%
Revenue from Other Localities	\$16,140	\$0	\$0	\$0	\$0	-
Miscellaneous Revenue	\$98,273	\$203,875	\$68,169	\$111,900	\$61,900	(44.68%)
Charges for Services	\$921,206	\$670,933	\$283,303	\$951,258	\$951,258	0.00%
Revenue from Commonwealth	\$19,134,268	\$20,663,636	\$20,421,154	\$27,999,408	\$28,458,871	1.64%
Transfers In	\$299,392	\$669,235	\$536,459	\$412,857	\$412,857	0.00%
<b>Total Designated Funding Source</b>	<b>\$35,980,402</b>	<b>\$38,650,765</b>	<b>\$38,664,211</b>	<b>\$45,527,277</b>	<b>\$46,290,329</b>	<b>1.68%</b>
<b>Net General Tax Support</b>	<b>\$21,792,266</b>	<b>\$23,158,636</b>	<b>\$28,298,453</b>	<b>\$31,266,631</b>	<b>\$35,888,823</b>	<b>14.78%</b>
<b>Net General Tax Support</b>	<b>37.72%</b>	<b>37.47%</b>	<b>42.26%</b>	<b>40.71%</b>	<b>43.67%</b>	

# Social Services

## Staff History by Program



	FY19 Actuals	FY20 Actuals	FY21 Actuals	FY22 Adopted	FY23 Adopted
Protective Services	46.00	55.00	60.00	66.00	66.00
Family Support Services	48.53	40.53	42.50	42.50	44.00
Benefits, Employment & Child Care	142.00	161.00	165.50	173.50	0.00
Homeless Services	9.80	20.80	21.80	36.80	34.83
Juvenile Services	86.33	86.33	85.33	81.93	81.90
Children's Services Act (CSA)	6.00	6.00	6.00	6.00	6.00
Director's Office	21.10	21.10	21.10	21.50	21.50
Customer Support & Service	0.00	0.00	0.00	0.00	44.50
Public Assistance	0.00	0.00	0.00	0.00	141.50
<b>Full-Time Equivalent (FTE) Total</b>	<b>359.76</b>	<b>390.76</b>	<b>402.23</b>	<b>428.23</b>	<b>440.23</b>

## Future Outlook

**Increase in Public Benefits Workload** – Since COVID-19 began, public benefits applications have increased 200%. The Virginia Department of Social Services (VDSS) suspended annual renewal requirements for existing persons receiving public benefits. Once renewal requirements are reinstated, an additional 10,000 applications will be eligible for annual review. This workload will overwhelm existing resources in Department of Social Services (DSS) Public Assistance/Customer Support Services divisions and will require additional funding for staff or overtime to maintain compliance with federally mandated timelines for processing public benefit applications and renewals.

**Youth Aging Out of Foster Care** – Older youth aging out of the foster care system don't always have a place to live or the required support systems in place to effectively transition from foster care to self-sufficiency as an adult. Youth aging out of foster care without proper support face a greater risk of homelessness and becoming involved in the criminal justice system. The Commonwealth's Fostering Futures Program is a good start but does not provide enough housing and mentoring support. Housing with mentors for older youth, including those with children, would reduce the risk of homelessness and involvement with the criminal justice system.

**Obsolete Case Management Software** – DSS uses robust software systems for mandatory case management and reporting requirements in the Juvenile Services, Public Assistance, Family Support Services, and Children's Services Act divisions. There are several locally managed software systems in need of replacement. Existing software systems are obsolete, inefficient, lack robust reporting capabilities, and are not adequately supported by current software vendors. As a result of not having adequate software systems, DSS has received audit findings for timely and accurate reporting and case management.

# Social Services

**Juvenile Services Campus and Detention Alternatives** – consistent with nationwide trends in juvenile justice transformation, DSS is working with juvenile justice stakeholders to develop a service continuum that includes less restrictive community-based prevention, intervention, and diversion programs to court-ordered detention. Transformation efforts also include building a new Juvenile Services Campus (JSC) using trauma-informed designed strategies. A new JSC and permanent funding for detention alternatives will provide programs and facilities for community-based prevention, intervention, and diversion programs.

**Homeless Navigation Centers** – DSS is currently in the design phase of a capital improvement project aimed at building a Homeless Navigation Center (HNC) on the east end of the County. DSS is actively pursuing multiple locations for a HNC on the west end of the County as well. Permanent HNCs will ensure homelessness is rare, brief, and non-reoccurring by providing a facility for case management, employment training/services, medical, showers, meal, laundry, public benefits, sheltering, behavioral health, and other professional visits.

## General Overview

**A. Redistribution of Internal Service Fund (ISF) Technology Budget** – The County annually allocates all information technology (IT) costs to agencies through an ISF, using the approved cost basis for each technology activity. Technology activities include computer support (hardware replacement, software licenses, and helpdesk customer services), IT security, business systems support (public safety communications, financial systems, human services systems, etc.), geographic information system, web services, capital equipment replacement, messaging, cloud storage, network and infrastructure services, telecommunications, and radio. The cost basis is calculated through a formula derived from the Department of Information Technology's (DoIT) ISF fee schedule.

For FY23, ISF costs have been revised to align and more accurately reflect overall technology activities with current department specific technology services. Costs are adjusted to reflect agency technology usage more accurately, as tracked by billing systems using the updated methodology. In FY23, DSS' technology bill increases by \$993,456. No technology service levels are changed, and there is no impact to the technology services individual agencies currently receive. For additional information on the countywide impact and methodology of redistributing technology charges, please see the Budget Highlights section of this document.

**B. Roll FY22 DSS Budget Reconciliation into FY23** – Prince William County (PWC) adopted its FY2022 Budget prior to the County receiving its final FY22 budget allocation from the Virginia DSS. 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 FY22 reconciliation results in \$199,545 revenue increase and \$221,834 expenditure budget increase in FY23.

Furthermore, [BOCS Resolution 21-403](#) authorized the creation of 2.0 FTEs. As a result of the Family First Prevention Services Act permanent funding is available from the Virginia Department of Social Services (VDSS) for two Senior Human Services Caseworker positions. The positions will provide in-home foster care prevention services to children and families identified as "at risk" of entering the foster care system. There is no general fund impact.

**C. Shift from DSS (Homeless Services) to Community Services (Projects for Assistance in Transitioning the Homeless (PATH) and Clinical Homeless Services (CHS))** – In the FY22 Budget, an initiative was approved to provide ongoing funding for positions providing homeless services in PWC's Ferlazzo Building. One position was shifted from DSS with a salary and benefits budget of \$94,650 to Community Services' PATH and CHS programs. The Clinical Services Caseworker position will support the Homeless Navigation Center - East, a "one-stop shop" for improved service delivery and management of the clients' needs. CS will provide services to reduce homelessness and improve mental and behavioral health services.

**D. Public Assistance (PA) and Customer Support & Service (CSS) Programs Created** – Effective July 1, 2021, DSS reorganized the BECC program to create two new programs. Public Assistance (PA) and Customer Support & Service (CSS) programs were established to manage and deliver services. BECC's 173.5 FTEs were spread between the two new programs, as well as the budget dollars associated with the program. The PA program staff determine initial and ongoing eligibility for public benefits. The CSS program staff direct customers to resources within the community and coordinates initial inquiries to PA benefits. CSS is also responsible for compliance and fraud investigations related to public benefit programs. The two programs will work closely together to provide seamless customer support.

**E. Community Partner Increase** – In February 2022, the BOCS approved [BOCS Resolution 22-091](#) which increased donations to existing community partners, Northern Virginia Family Services (NVFS) and Action in

# Social Services

the Community through Services (ACTS) in the amount of \$22,500 for the purpose of expanding homeless prevention services. NVFS and ACTS will provide landlord incentives to prevent persons and families from becoming homeless. The FY2023 Budget includes donation increases to each entity of \$50K for a total \$100K funded by a budget shift. This is a shift of existing resources with no net change to DSS' overall budget.

## Budget Initiatives

### A. Budget Initiatives

#### 1. PA & CSS staffing plan (formerly BECC) – Public Assistance, Customer Support & Service

Expenditure	\$1,255,367
Revenue	\$627,684
General Fund Impact	\$627,684
FTE Positions	11.00

- a. **Description** – This initiative funds the second year of a five-year staffing plan for DSS. In the FY2023 Budget there is funding for eleven positions to include six Senior Human Services Specialists, one Human Services Program Manager, two Human Services Caseworkers and two Human Services Managers. These positions will help address the increase in applications and eligibility determination of public benefit programs. Without additional staffing, there will be continued risk of annual audit findings of error rates due to high caseloads and processing deadlines. A five-year staffing plan was established beginning in FY22 to address audit findings and address the anticipated ongoing increase in application reviews. The staff plan will be re-evaluated each year relative to meeting mandated application processing deadlines and error rates of processed applications.

Description	FTE	FY23	FY24	FY25	FY26
FY23 Staffing Plan - PA 9.0 FTE and CSS 2.0 FTE	11.00	\$1,255,367	\$1,255,367	\$1,255,367	\$1,255,367
FY24 Staffing Plan - PA 8.0 FTE and CSS 3.0 FTE	11.00	\$0	\$1,160,824	\$1,160,824	\$1,160,824
FY25 Staffing Plan - PA 8.0 FTE and CSS 3.0 FTE	11.00	\$0	\$0	\$1,160,824	\$1,160,824
FY26 Staffing Plan - PA 9.0 FTE and CSS 2.0 FTE	11.00	\$0	\$0	\$0	\$1,160,824
<b>Expenditure</b>		<b>\$1,255,367</b>	<b>\$2,416,191</b>	<b>\$3,577,015</b>	<b>\$4,737,839</b>
<b>Revenue</b>		<b>\$627,684</b>	<b>\$1,208,096</b>	<b>\$1,788,508</b>	<b>\$2,368,920</b>
<b>Net General Fund Impact</b>	<b>44.00</b>	<b>\$627,684</b>	<b>\$1,208,096</b>	<b>\$1,788,508</b>	<b>\$2,368,920</b>

- b. **Service Level Impacts** – This initiative improves workload and addresses process accuracy. It supports the [Health, Wellbeing & Human Services](#) strategic goal to improve awareness and access to quality and affordable services. This is accomplished by increasing timely processing of benefit applications (Action Strategy HW1: G.).

#### 2. Hypothermia Services – Homeless Services

Expenditure	\$100,000
Revenue	\$0
General Fund Impact	\$100,000
FTE Positions	0.00

- a. **Description** – Extreme cold is dangerous to unsheltered adults. In response, PWC provided hypothermia services (overnight shelter) for many years in the winter shelter. The need for year-round overnight sheltering became apparent and the winter shelter became the overnight shelter open all year. During the COVID-19 pandemic, social distancing became a necessity and operations were moved to the Ferlazzo gymnasium while awaiting the construction of a new shelter. The former overnight shelter is being used as a supportive shelter for unsheltered adults with chronic health conditions. There continues to be unsheltered adults who need socially distanced shelter at night when temperature or wind chill is at or below 32 degrees. In FY21, the annual hotel costs were \$187K which limited program budget capacity from providing other homeless services.
- b. **Service Level Impacts** – This budget addition directly supports the [Health, Wellbeing & Human Services](#) strategic goal to prevent and reduce homelessness.



# Social Services

## Program Summary

### Protective Services

Protective Services has two mandated programs: Child Protective Services (CPS) and Adult Protective Services (APS). CPS investigates allegations of abuse/neglect of children under the age of 18 and provides prevention services to raise community awareness of abuse and neglect. APS investigates allegations of abuse/neglect/exploitation of disabled or older adults. Adult Services' (a part of APS) activities include monitoring public guardianships for incapacitated adults and home visits to determine eligibility for Medicaid-funded long-term care in conjunction with the local health district. The Child Advocacy Center provides a safe, child-centric environment to help children move from victim to survivor by reducing trauma and educating the community through a multidisciplinary approach to prevent, recognize, investigate, and prosecute child abuse. Intake provides residents access to a hotline to report abuse (703-792-4200) during the daytime. The Prevention Team works with families who need support in strengthening their family's situations to prevent abuse and neglect. This program Transforms Lives through Safety.

Key Measures	FY19 Actuals	FY20 Actuals	FY21 Actuals	FY22 Adopted	FY23 Adopted
Repeat adult abuse and neglect cases	0.10%	0.30%	0.30%	0.20%	0.30%
Repeat child abuse and neglect cases (same child)	1.70%	0.13%	1.90%	0.10%	1.00%

Program Activities & Workload Measures <i>(Dollar amounts expressed in thousands)</i>	FY19 Actuals	FY20 Actuals	FY21 Actuals	FY22 Adopted	FY23 Adopted
<b>CPS Investigations</b>	<b>\$3,585</b>	<b>\$3,771</b>	<b>\$4,247</b>	<b>\$5,061</b>	<b>\$5,517</b>
Reports of alleged child abuse/neglect received by CPS	5,022	4,119	3,787	5,000	5,000
CPS complaints investigated & assessments completed	2,248	2,832	2,100	2,500	2,600
Founded CPS cases	356	273	225	300	250
Average number of days to complete CPS investigations and assessments	50	52	52	45	50
<b>APS Investigations</b>	<b>\$905</b>	<b>\$1,055</b>	<b>\$1,385</b>	<b>\$1,048</b>	<b>\$1,064</b>
Reports of alleged adult abuse/neglect received by APS	807	863	950	900	975
APS complaints investigated	621	773	777	650	800
Founded APS cases	81	287	290	200	300
Average number of days to complete APS investigations and assessments	60	55	31	45	40
<b>Adult Care</b>	<b>\$164</b>	<b>\$440</b>	<b>\$311</b>	<b>\$224</b>	<b>\$276</b>
Incapacitated adults in the guardianship program	364	472	555	500	575
Medicaid long-term care assessments - Adults	695	454	797	425	825
<b>Prevention &amp; Assessments</b>	<b>\$1,045</b>	<b>\$1,218</b>	<b>\$1,173</b>	<b>\$1,239</b>	<b>\$1,269</b>
Families served in prevention and assessments	477	782	619	800	725

# Social Services

## Family Support Services

Family Support Services provides mandated services that include foster care and permanency/adoption. Also provided is treatment or on-going CPS to support families at risk of having their children removed from the home or in need of special attention to maintain permanency. The well-being and safety of children are the priority of the program and efforts are made to keep families unified. For youth aging out of Foster Care, Independent Living and Fostering Futures programs may be provided. This program Transforms Lives through Support.

Key Measures	FY19 Actuals	FY20 Actuals	FY21 Actuals	FY22 Adopted	FY23 Adopted
Children in foster care finding permanent homes*	50%	50%	79%	86%	80%
Title IV-E (foster care) case and financial error percentage	21%	5.71%	15.15%	<5.0%	<5.0%

\*Definition of permanency has changed to include children that return home, relative placement, and adoptions.

Program Activities & Workload Measures (Dollar amounts expressed in thousands)	FY19 Actuals	FY20 Actuals	FY21 Actuals	FY22 Adopted	FY23 Adopted
<b>Foster Care</b>	<b>\$5,953</b>	<b>\$6,446</b>	<b>\$6,131</b>	<b>\$6,430</b>	<b>\$6,581</b>
Children served in custodial foster care	115	108	109	120	115
Authorized foster care families	88	78	88	90	95
<b>CPS Ongoing</b>	<b>\$976</b>	<b>\$1,035</b>	<b>\$1,116</b>	<b>\$1,156</b>	<b>\$1,408</b>
Families served in family treatment services	235	241	272	250	270

## Homeless Services

Homelessness should be rare, brief, and nonrecurring with a goal toward permanent housing. The Homeless Services Division is a multi-faceted program that has the key responsibilities of operating US Department of Housing and Urban Development mandates: the Continuum of Care (CoC), the Homeless Management Information System (HMIS) and Coordinated Entry System (CES). Additionally, the Division directly operates the Bill Mehr Drop-In Center, the Ferlazzo Adult Shelter (FAS), and the Hilda Barg Homeless Prevention Center (HPC), while serving as contract administrator for the Supportive Shelter for Adults. The HPC (families) and FAS (adults only) are emergency shelters open 24/7/365 offering case management toward a goal of exiting to permanent housing.

CoC responsibilities include coordination of CoC meetings, grant writing, financial oversight of funding recipients, HMIS data integrity, and performing grant and contract monitoring duties. This program Transforms Lives through Self-Sufficiency.

Key Measures	FY19 Actuals	FY20 Actuals	FY21 Actuals	FY22 Adopted	FY23 Adopted
Utilization of HPC (families)*	82%	66%	73%	84%	-
Utilization of HPC (singles)	-	91%	38%	84%	-
Point in time homeless count	277	326	282	340	295
Two-year sustainment of permanent housing	97%	84%	85%	87%	85%
Utilization of Overnight Shelter	92%	93%	60%	95%	-

# Social Services

<b>Program Activities &amp; Workload Measures</b> <i>(Dollar amounts expressed in thousands)</i>	<b>FY19</b> <b>Actuals</b>	<b>FY20</b> <b>Actuals</b>	<b>FY21</b> <b>Actuals</b>	<b>FY22</b> <b>Adopted</b>	<b>FY23</b> <b>Adopted</b>
<b>Coordinated Entry Services</b>	<b>\$289</b>	<b>\$378</b>	<b>\$501</b>	<b>\$534</b>	<b>\$560</b>
Number of calls received by coordinated entry	9,088	8,550	11,083	8,830	8,830
<b>Drop-In Center</b>	<b>\$89</b>	<b>\$148</b>	<b>\$124</b>	<b>\$1,679**</b>	<b>\$74</b>
Number of clients served at Drop-In Center	396	362	370	380	380
<b>Hilda Barg Homeless Prevention Center</b>	<b>\$0</b>	<b>\$0</b>	<b>\$999</b>	<b>\$1,255</b>	<b>\$1,444</b>
Households (singles) moving into PH at discharge	42%	68%	78%	60%	60%
Household (families) moving into PH at discharge	64%	46%	65%	70%	70%
Households (singles) increasing or maintaining income at discharge	65%	74%	89%	60%	60%
Households (families) increasing or maintaining income at discharge	55%	63%	76%	55%	55%
<b>Homeless Services Navigation Center - East/Ferlazzo Emergency Shelter**</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$1,577</b>
Households (singles) moving into PH at discharge	-	-	-	-	60%
Households (singles) increasing or maintaining income at discharge	-	-	-	-	60%
<b>Homeless Services Administration &amp; Grants Management</b>	<b>\$0</b>	<b>\$0</b>	<b>\$3,961</b>	<b>\$3,267</b>	<b>\$2,903</b>
HUD grant funds expended	97%	99%	96%	95%	95%
VHSP grant funds expended	100%	97%	91%	95%	95%
<b>Homeless Services Prevention Services***</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$500</b>
Households Served	-	-	-	-	30
<b>Sudley Corridor Drop In Center**</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$171</b>
Number of clients served	-	-	-	-	120

\*Prior to FY20, a blended rate was reported for families and singles

\*\*The Adopted FY22 Budget for the Drop-in Center approved budget for both HS Navigation East and Sudley Corridor Drop In Center.

\*\*\*Prior to FY23, the HS Prevention Services budget was included in the HS Administration & Grants Management activity.

# Social Services

## Juvenile Services

Juvenile Services provides court-ordered juvenile offenders with pro-social engagement to enhance their safety and accountability. Services range from secure detention at the Juvenile Detention Center, non-secure residence at the Molinari Juvenile Shelter, and home-based supervision through the Pre-trial Supervision program which also includes electronic monitoring. This program Transforms Lives through Safety.

Key Measures	FY19 Actuals	FY20 Actuals	FY21 Actuals	FY22 Adopted	FY23 Adopted
Juvenile Pre-trial Supervision clients re-offending while in the program	4.0%	1.3%	17.0%	2.2%	10.0%
Molinari Juvenile Shelter Services clients re-offending while in the program	4.4%	1.8%	0.0%	2.7%	1.0%

Program Activities & Workload Measures <i>(Dollar amounts expressed in thousands)</i>	FY19 Actuals	FY20 Actuals	FY21 Actuals	FY22 Adopted	FY23 Adopted
<b>Secure Detention</b>	<b>\$5,800</b>	<b>\$5,353</b>	<b>\$5,005</b>	<b>\$5,641</b>	<b>\$6,009</b>
Juveniles admitted into Secure Detention	377	241	147	340	147
<b>Juvenile Pre-trial Supervision</b>	<b>\$331</b>	<b>\$389</b>	<b>\$509</b>	<b>\$553</b>	<b>\$595</b>
Juveniles admitted into pre-trial supervision	247	151	106	207	100
<b>Molinari Juvenile Shelter Services</b>	<b>\$1,668</b>	<b>\$1,597</b>	<b>\$1,549</b>	<b>\$1,697</b>	<b>\$1,841</b>
Juveniles admitted	185	161	97	181	125

## Children's Services Act (CSA)

The CSA is a 1993 Virginia law that establishes a single state pool of funds to support services for eligible youth and their families. State funds, combined with local community funds, are managed by local interagency teams who plan and oversee services to youth. The CSA Division is the administrative entity that provides oversight and management of the local CSA program in PWC.

The intent of the CSA is to have a collaborative approach to service planning and access to funding for services. The following public agencies may refer clients to CSA for planning and funding when additional supports are needed to meet a child or family's needs: (1) DSS (2) PWC Public Schools (3) Juvenile Court Services and (4) Community Services.

All clients served through the CSA program meet eligibility criteria set by the Code of Virginia. All service plan decisions that result in recommendations for funding through the CSA go through a collaborative review and approval by two multi-disciplinary teams: The Family Assessment and Planning Team and the Community Policy and Management Team (CPMT). These teams include representatives from the previously listed public agencies, as well as a private provider representative, and a parent representative. The CPMT also includes representatives from the Health Department and County Executive's Office. This program Transforms Lives through Support.

Key Measures	FY19 Actuals	FY20 Actuals	FY21 Actuals	FY22 Adopted	FY23 Adopted
Youth who receive only community-based services. State target is 50%	77%	82%	84%	75%	75%
Youth who receive Intensive Care Coordination. State target is 75%.	-	5%	0%	10%	5%

# Social Services

<b>Program Activities &amp; Workload Measures</b> <i>(Dollar amounts expressed in thousands)</i>	<b>FY19 Actuals</b>	<b>FY20 Actuals</b>	<b>FY21 Actuals</b>	<b>FY22 Adopted</b>	<b>FY23 Adopted</b>
<b>Community-Based Services</b>	<b>\$10,608</b>	<b>\$12,945</b>	<b>\$13,624</b>	<b>\$18,361</b>	<b>\$18,372</b>
Youth served in Special Education Private Day School (SPED)	144	188	184	230	230
Non-SPED youth served	385	368	302	404	350
<b>Residential Services</b>	<b>\$5,308</b>	<b>\$4,327</b>	<b>\$3,718</b>	<b>\$6,858</b>	<b>\$6,864</b>
Youth served in residential services	127	102	83	121	100
<b>CSA Foster Care</b>	<b>\$1,373</b>	<b>\$1,466</b>	<b>\$1,347</b>	<b>\$1,891</b>	<b>\$1,892</b>
Youth served in foster care	87	79	74	100	100
<b>CSA Administration</b>	<b>\$341</b>	<b>\$310</b>	<b>\$311</b>	<b>\$400</b>	<b>\$453</b>
Total youth served (unduplicated)	558	570	511	590	550

## Director's Office

Provides overall leadership, financial management including state and federal grant monitoring, personnel functions, and information technology services for DSS. The Office engages the advice of the appointed DSS Advisory Board. The Director is the appointed Board member for the organizational entities known as Birmingham Green. Oversight is provided by seven state departments within three Secretariats. Emergency Management duties for Mass Sheltering are also a part of this office.

<b>Key Measures</b>	<b>FY19 Actuals</b>	<b>FY20 Actuals</b>	<b>FY21 Actuals</b>	<b>FY22 Adopted</b>	<b>FY23 Adopted</b>
County services for people who are economically disadvantaged (Comm. Survey)	80%	80%	86%	-	81%

<b>Program Activities &amp; Workload Measures</b> <i>(Dollar amounts expressed in thousands)</i>	<b>FY19 Actuals</b>	<b>FY20 Actuals</b>	<b>FY21 Actuals</b>	<b>FY22 Adopted</b>	<b>FY23 Adopted</b>
<b>Social Services Director's Office</b>	<b>\$752</b>	<b>\$922</b>	<b>\$2,411</b>	<b>\$1,061</b>	<b>\$1,204</b>
<b>Technology Support</b>	<b>\$357</b>	<b>\$373</b>	<b>\$340</b>	<b>\$359</b>	<b>\$389</b>
<b>Personnel Support</b>	<b>\$406</b>	<b>\$395</b>	<b>\$436</b>	<b>\$462</b>	<b>\$481</b>
<b>Fiscal Support</b>	<b>\$1,213</b>	<b>\$1,327</b>	<b>\$1,023</b>	<b>\$1,074</b>	<b>\$1,099</b>

# Social Services

## Public Assistance (PA)

Public Assistance staff determine initial and ongoing eligibility for public benefits. Programs include Medicaid, Supplemental Nutrition Assistance Program (SNAP), Temporary Assistance for Needy Families (TANF) and Refugee Cash Assistance. The division serves the most vulnerable population by providing access to health care, addressing food insecurity, and helping meet basic needs. This program Transforms Lives through self-sufficiency.

Key Measures	FY19 Actuals	FY20 Actuals	FY21 Actuals	FY22 Adopted	FY23 Adopted
New medicaid applications processed within state mandated time frame (45 days)	87%	86%	87%	97%	97%
SNAP benefits issued w/financial errors (positive error rate). State target 3%	40%	32%	25%	3%	3%
SNAP cases processed correctly per policy (negative error rate).State target 2%	33%	60%	50%	2%	-

Program Activities & Workload Measures <i>(Dollar amounts expressed in thousands)</i>	FY19 Actuals	FY20 Actuals	FY21 Actuals	FY22 Adopted	FY23 Adopted
<b>Public Assistance</b>	<b>\$11,245</b>	<b>\$12,295</b>	<b>\$13,792</b>	<b>\$14,146</b>	<b>\$14,402</b>
Medicaid annual renewals 30 days overdue	19	35	6,506*	<25	N/A**
New Medicaid applications pending more than 45 days	26	35	90	<25	<25
Clients served - SNAP (unduplicated count)	33,649	32,595	36,978	37,000	38,000
Clients served - TANF (unduplicated count)	3,009	2,668	2,520	3,200	3,300
Clients served - Medicaid (unduplicated count)	78,374	88,226	95,978	80,000	88,000

\* VDSS has suspended the processing of Medicaid Renewals due to the Public Health Emergency.

\*\* Resuming date of Medicaid Renewals is yet to be known at this time which makes it difficult to project for FY23.

# Social Services

## Customer Support & Service (CSS)

The Customer Support and Services Division directs customers to needed resources within the community. Support staff coordinates initial inquiries regarding PA benefits and collects verification documentation for the Public Assistance Division via onsite, online and telephone. This division houses the Compliance Unit that oversees external and internal public benefit audits and appeals. The Energy Assistance, Title IV-E, Child Care and Employment Services staff assess customer needs for heating/cooling assistance, Foster Care Federal funding maintenance and connects individuals to training, education, employment, and childcare services. The Fraud Unit investigates allocations of fraud in the SNAP, TANF and Child Care public benefit programs. Staff for the two front desks in the East and West of the County along with staff for answering phone inquiries is also in this Division. This program Transforms Lives through support and self-sufficiency.

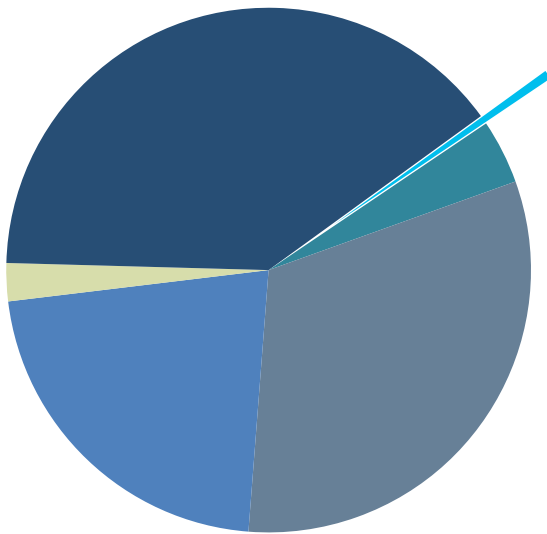
Key Measures	FY19 Actuals	FY20 Actuals	FY21 Actuals	FY22 Adopted	FY23 Adopted
TANF participants engaged in work activities (state target is 50%)	51%	48%	19%	50%	25%
SNAP benefits issued w/financial errors (positive error rate). State target 3%	40%	32%	25%	3%	3%
SNAP cases processed correctly per policy (negative error rate).State target 2%	33%	60%	50%	2%	-
Title IV-E (foster care) case and financial error percentage	21%	5.71%	15.15%	<5.0%	<5.0%

Program Activities & Workload Measures <i>(Dollar amounts expressed in thousands)</i>	FY19 Actuals	FY20 Actuals	FY21 Actuals	FY22 Adopted	FY23 Adopted
<b>Employment Services</b>	<b>\$1,577</b>	<b>\$1,448</b>	<b>\$1,490</b>	<b>\$1,455</b>	<b>\$1,477</b>
Persons served in VIEW	282	206	211	250	250
<b>Child Care</b>	<b>\$487</b>	<b>\$500</b>	<b>\$550</b>	<b>\$455</b>	<b>\$1,212</b>
Persons served in the Childcare program	438	521	-	630	700
<b>Fraud Investigations</b>	<b>\$431</b>	<b>\$411</b>	<b>\$449</b>	<b>\$490</b>	<b>\$621</b>
Fraud cases	341	477	614	-	500
<b>Customer Support &amp; Services (Includes CRT)</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$1,921</b>
Calls received	-	43,551	45,962	-	43,000

# Virginia Cooperative Extension

## Mission Statement

Virginia Cooperative Extension helps lead the engagement mission of Virginia Polytechnic Institute and State University and Virginia State University, the Commonwealth's land grant university. Building local relationships and collaborative partnerships, Virginia Cooperative Extension helps people put scientific knowledge to work through learning experiences that improve economic, environmental, and social well-being.



**Human Services Expenditure Budget:**  
**\$207,633,469**

**Expenditure Budget:**  
**\$1,127,185**



*0.5% of Human Services*

### Programs:

- Nutrition Education: \$10,312
- Environment & Natural Resources: \$376,090
- 4-H Education: \$144,894
- Parent Education: \$206,232
- Financial Education & Housing Counseling: \$389,658

## Mandates

Virginia Cooperative Extension 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:** [23.1-2610](#) (Duties of the Service, the Program, and the Station)



# Virginia Cooperative Extension

## Expenditure and Revenue Summary



Expenditure by Program	FY19 Actuals	FY20 Actuals	FY21 Actuals	FY22 Adopted	FY23 Adopted	% Change Budget FY22/ Budget FY23
Nutrition Education	\$8,700	\$8,510	\$8,510	\$8,510	\$10,312	21.17%
Environment & Natural Resources	\$216,564	\$288,448	\$323,752	\$345,664	\$376,090	8.80%
4-H Education	\$82,698	\$81,864	\$117,646	\$132,342	\$144,894	9.48%
Parent Education	\$171,297	\$168,294	\$177,142	\$184,284	\$206,232	11.91%
Financial Education & Housing Counseling	\$446,701	\$518,146	\$504,460	\$374,297	\$389,658	4.10%
<b>Total Expenditures</b>	<b>\$925,960</b>	<b>\$1,065,262</b>	<b>\$1,131,510</b>	<b>\$1,045,097</b>	<b>\$1,127,185</b>	<b>7.85%</b>

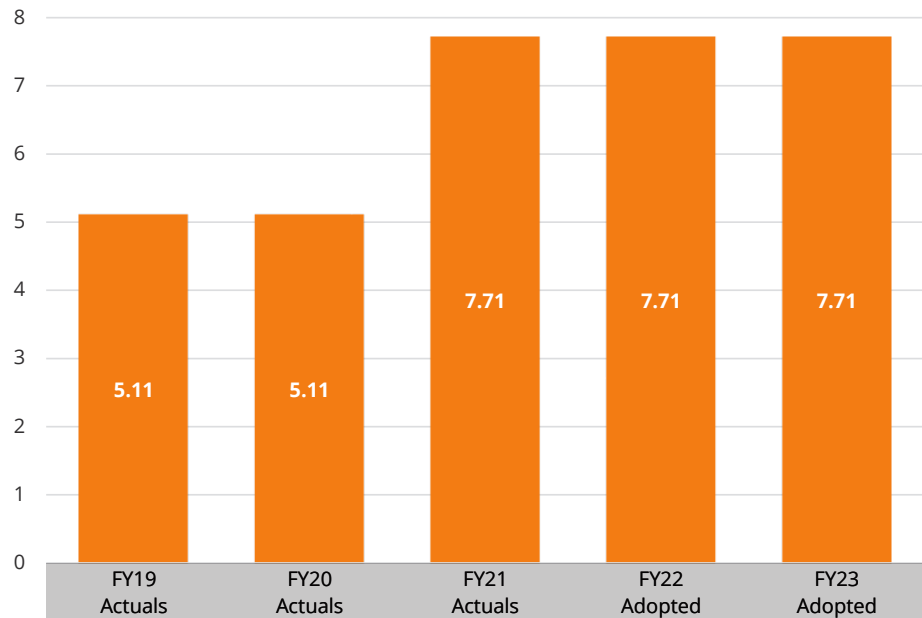
### Expenditure by Classification

Salaries & Benefits	\$762,355	\$905,554	\$1,033,976	\$905,672	\$940,281	3.82%
Contractual Services	\$15,757	\$11,571	\$3,280	\$9,650	\$1,150	(88.08%)
Internal Services	\$84,813	\$86,183	\$85,858	\$80,833	\$143,612	77.67%
Purchase of Goods & Services	\$63,036	\$61,954	\$8,395	\$48,942	\$42,142	(13.89%)
<b>Total Expenditures</b>	<b>\$925,960</b>	<b>\$1,065,262</b>	<b>\$1,131,510</b>	<b>\$1,045,097</b>	<b>\$1,127,185</b>	<b>7.85%</b>

### Funding Sources

Revenue from Federal Government	\$74,481	\$70,426	\$73,000	\$42,000	\$42,000	0.00%
Revenue from Other Localities	\$99,816	\$142,308	\$104,548	\$138,852	\$122,956	(11.45%)
Miscellaneous Revenue	\$60,316	\$142,956	\$44,956	\$0	\$65,000	-
Charges for Services	\$12,450	\$15,016	\$13,570	\$10,000	\$10,000	0.00%
Revenue from Commonwealth	\$78,582	\$103,068	\$126,073	\$91,626	\$0	(100.00%)
Transfers In	\$267,022	\$273,522	\$278,488	\$293,522	\$293,522	0.00%
<b>Total Designated Funding Sources</b>	<b>\$592,667</b>	<b>\$747,296</b>	<b>\$640,635</b>	<b>\$576,000</b>	<b>\$533,478</b>	<b>(7.38%)</b>
<b>Net General Tax Support</b>	<b>\$333,294</b>	<b>\$317,966</b>	<b>\$490,875</b>	<b>\$469,097</b>	<b>\$593,707</b>	<b>26.56%</b>
<b>Net General Tax Support</b>	<b>35.99%</b>	<b>29.85%</b>	<b>43.38%</b>	<b>44.89%</b>	<b>52.67%</b>	

## Staff History by Program



	FY19 Actuals	FY20 Actuals	FY21 Actuals	FY22 Adopted	FY23 Adopted
Nutrition Education	0.00	0.00	0.00	0.00	0.00
Environment & Natural Resources	1.66	2.32	3.32	3.42	3.32
4-H Education	0.00	0.00	1.60	1.49	1.60
Parent Education	1.45	0.79	0.79	0.80	0.79
Financial Education & Housing Counseling	2.00	2.00	2.00	2.00	2.00
<b>Full-Time Equivalent (FTE) Total</b>	<b>5.11</b>	<b>5.11</b>	<b>7.71</b>	<b>7.71</b>	<b>7.71</b>

## Future Outlook

**4-H** – Through the 4-H Program, youth-adult partnerships will be strengthened through experiential learning activities that offer mutual leadership training. Adults provide a place where youth feel safe, both physically and emotionally; youth provide adults with opportunities to teach, mentor, and learn. Trainings and workshops will be offered in diverse areas of positive life skills development through virtual and in-person formats. Youth will be provided with opportunities to be contributing members of the local community and beyond through competitive and non-competitive events, civic and community engagement opportunities, and workshops purposefully designed for youth development.

**Parent Education** – The Parent Education Program continues to provide flexible class schedules to include virtual classes and piloting a daytime class to accommodate varying schedules of members of the community. Resources to equip parents with education addressing the ever-changing risks youth face such as marijuana exposure, vaping, internet safety, and bullying will be provided during classes. The program will also continue to partner with area organizations to market the program and offer classes.

**Nutrition Education** – Based on the April 2021 Virginia Department of Social Services eligibility report, there are 10,869 households (25,089 people) eligible for Supplemental Nutrition Assistance Program (SNAP) benefits in Prince William County (PWC). SNAP educators will seek additional community collaborators and venues so they may continue to assist SNAP recipients to stretch their food dollars, choose healthy foods, shop smarter, and keep their food safe. SNAP educators will also continue to include physical activity components in addition to teaching good nutrition and cooking skills to program clientele.

# Virginia Cooperative Extension

**Environment & Natural Resources** – The Environment & Natural Resources (ENR) Program provides horticultural and agricultural technical assistance and educational programs that address plant/landscape health and water quality issues of horticultural and agricultural businesses, homeowners' associations, garden clubs, and PWC in general. The ENR program will continue to assist PWC in meeting their Municipal Separate Storm Sewer System (MS-4) permit goals through educational programming and certified nutrient management plans. Staff will continue to work on a regional level to provide educational programs for pesticide applicators and the green industry. Staff will also facilitate and provide technical assistance to school and community gardens to help increase health, wealth-being, and food security.

**Financial Education & Housing Counseling** – There is an overwhelming need for financial education and financial counseling services as over 41% of American households are not prepared to handle a \$400 emergency without borrowing money or selling something (May 22, 2018, Federal Reserve Survey). The Financial Education & Housing Counseling Program will continue to expand financial education and counseling services with online delivery and other flexible program services including apps, webinars, and virtual counseling. Staff will meet the increasing demand for pre-purchase housing counseling while maintaining service levels for post-purchase and foreclosure prevention counseling, sharing financial tools and best practices to improve financial health.

## General Overview

**A. Redistribution of Internal Service Fund (ISF) Technology Budget** – The County annually allocates all information technology (IT) costs to agencies through an ISF, using the approved cost basis for each technology activity. Technology activities include computer support (hardware replacement, software licenses, and helpdesk customer services), IT security, business systems support (public safety communications, financial systems, human services systems, etc.), geographic information system, web services, capital equipment replacement, messaging, cloud storage, network and infrastructure services, telecommunications, and radio. The cost basis is calculated through a formula derived from the Department of Information Technology's (DoIT) ISF fee schedule.

For FY23, ISF costs have been revised to align and more accurately reflect overall technology activities with current department specific technology services. Costs are adjusted to reflect agency technology usage more accurately, as tracked by DoIT billing systems using the updated methodology. In FY23, Virginia Cooperative Extension's (VCE) technology bill increases by \$62,779. No technology service levels are changed, and there is no impact to the technology services individual agencies currently receive. For additional information on the countywide impact and methodology of redistributing technology charges, please see the Budget Highlights section of this document.

**B. Reduction in Revenue from Virginia Housing Development Authority** – VCE received notification in FY22 that the annual Housing Counseling and Education (HCE) grant award from the Virginia Housing Development Authority is reduced from \$91,626 to \$65,000. The intent of the HCE grant is to improve the credit score and financial stability of clients receiving counseling and education services. This change results in a \$26,626 reduction in VCE's revenue in FY23.

**C. Revenue Decrease for Shared Services (City) Billings** – The billings represent reimbursement from the Cities of Manassas and Manassas Park for services rendered in the previous year. Services rendered include activities within the public safety, community development, and human services functional areas. Amounts are calculated using an annual cost allocation report. As a result of the annual report, VCE's allocation decreased \$15,896 from \$138,852 in FY22 to \$122,956 in FY23.

# Virginia Cooperative Extension

## Program Summary

### Nutrition Education

The Nutrition Education program is federally funded via the SNAP Education grant. The goal of the grant is to provide nutrition education and obesity prevention programs for SNAP participants and other eligible limited-resource families. Educational collaborative programming involves groups of adults and groups of youth who enroll in a series of classes involving two to eight sessions per series. Comprehensive and short-term nutrition education are offered at human services offices, homeless shelters, retail stores, free clinics, pregnancy centers, farmers markets, health centers, food pantries, schools, churches, after-school programs, low-income housing communities, Head Start, and parent meetings.

Key Measures	FY19 Actuals	FY20 Actuals	FY21 Actuals	FY22 Adopted	FY23 Adopted
SNAP ED youth participants improving nutritional intake per a pre and post test	90%	63%	NR	90%	90%

Program Activities & Workload Measures <i>(Dollar amounts expressed in thousands)</i>	FY19 Actuals	FY20 Actuals	FY21 Actuals	FY22 Adopted	FY23 Adopted
<b>Nutrition Education</b>	<b>\$8</b>	<b>\$9</b>	<b>\$9</b>	<b>\$9</b>	<b>\$10</b>
SNAP ED families (formerly participants) enrolled in program	350	215	156	180	180

### Environment & Natural Resources

Environment & Natural Resources provides educational programs that raise awareness and change behaviors, emphasizing best management practices for sustainable landscape management and water quality protection. Activities conducted by staff and trained Master Gardener Volunteers include educational classes and hands-on demonstrations, "Ask a Master Gardener" clinics at local garden centers and Farmer's Markets, the Extension Horticulture Help Desk, an outdoor classroom called the Teaching Garden, Plant a Row produce collections at local Farmer's Markets, school and community garden site visits and technical assistance, and stormwater education. Building Environmentally Sustainable Turf (BEST) Lawns, part of the Virginia Healthy Lawn program, utilizes Master Gardener volunteers who measure and soil test turf and landscape areas, and staff provides certified nutrient management plans as a result. Audiences include citizens, agricultural producers, local school systems, the green industry, pesticide applicators, homeowners' associations, non-profit organizations, and County agencies.

Key Measures	FY19 Actuals	FY20 Actuals	FY21 Actuals	FY22 Adopted	FY23 Adopted
Participants reporting that they adopted recommended water quality practices	95%	84%	79%	90%	90%
BEST Lawn clients implementing practices that improve water quality	83%	70%	71%	70%	70%
Percentage of participants reporting satisfaction with environmental education	-	91%	96%	85%	85%

# Virginia Cooperative Extension

Program Activities & Workload Measures <i>(Dollar amounts expressed in thousands)</i>	FY19 Actuals	FY20 Actuals	FY21 Actuals	FY22 Adopted	FY23 Adopted
<b>Environment and Natural Resources</b>	<b>\$217</b>	<b>\$288</b>	<b>\$324</b>	<b>\$346</b>	<b>\$376</b>
Environmental education participants	3,670	3,192	3,555	4,000	4,000
Site visits for stormwater management education & community & school gardens	38	29	38	40	40
Calls received through the Horticulture Help Desk	1,722	3,545	2,847	1,500	1,500
BEST Lawns urban nutrient management plans written	236	153	179	250	250
FTE value of volunteer hours (ENR)	7.00	4.97	4.25	7.00	7.00

## 4-H Education

4-H is a positive youth development program designed to engage young people in intentional, productive, and constructive ways, while recognizing and enhancing their strengths. Youth-adult partnerships are shown to be one of the most effective ways to engage both youth and adults in meaningful activities which contribute to positive youth development. Youth involved in positive, meaningful, respectful relationships with adults have been shown to improve skills and competencies while decreasing participation in risky behaviors. When partnering with youth, adults also build skills and simultaneously strengthen the organizations to which they belong. 4-H is a research-based experience that includes a mentor, a hands-on project, and a meaningful leadership opportunity that empowers young people with the skills to lead for a lifetime. Delivery modes are varied but are mainly focused on in-school and after-school programs, school and community clubs, and 4-H camps.

Key Measures	FY19 Actuals	FY20 Actuals	FY21 Actuals	FY22 Adopted	FY23 Adopted
Safe at Home Alone: showing increased awareness about staying home alone safely	89%	92%	NR	95%	95%
4-H life skills development measured by post camp evaluation of teen counselors	-	81%	NR	90%	90%

Program Activities & Workload Measures <i>(Dollar amounts expressed in thousands)</i>	FY19 Actuals	FY20 Actuals	FY21 Actuals	FY22 Adopted	FY23 Adopted
<b>4-H Youth Education</b>	<b>\$83</b>	<b>\$82</b>	<b>\$118</b>	<b>\$132</b>	<b>\$145</b>
Youth enrolled in 4-H camps and clubs	961	640	720	750	750
Youth enrolled in 4-H special interest programs	13,652	14,348	9,256	20,000	20,000
Community service hours contributed by 4-H youth and adults	7,531	19,521	240	20,000	20,000
FTE value of volunteer hours (4-H)	7.84	10.01	6.04	25.00	7.50
Youth enrolled in competitive events and programs	-	438	302	550	550

# Virginia Cooperative Extension

## Parent Education

VCE Parent Education provides comprehensive in-person and virtual classes to greater Prince William’s vulnerable residents – parents and their children. Parent Education Instructors and Volunteer Parent Education Facilitators use research and skills-based training to help promote resilience and communication – key skills for improving the stability of children and their families. Parents learn to recognize that they are not alone in their challenges raising children, and that increased use of I-Messages and Reflective listening skills supports stronger relationships and parental effectiveness. Integrating prevention, early intervention, and educational classes equips human services, courts, intake and probation officers, and others with a viable, cost-effective tool to help parents improve their parenting skills, and demonstrate their desire for restorative relationships with their children, in a supportive, positive parenting group. Parenting classes support the goal of decreasing recidivism for both teens and their parents which helps protect and ensure the well-being of the entire community.

Key Measures	FY19 Actuals	FY20 Actuals	FY21 Actuals	FY22 Adopted	FY23 Adopted
DSS clients with no founded abuse/neglect case 1 year after program completion	100%	100%	100%	95%	95%
At-risk families who don't enter foster care within 1 year of program completion	100%	100%	100%	95%	95%
Youth without criminal charges 1 year after parents complete JJPP class	83%	86%	94%	75%	75%

Program Activities & Workload Measures <i>(Dollar amounts expressed in thousands)</i>	FY19 Actuals	FY20 Actuals	FY21 Actuals	FY22 Adopted	FY23 Adopted
<b>Parent Education</b>	<b>\$171</b>	<b>\$168</b>	<b>\$177</b>	<b>\$184</b>	<b>\$206</b>
Participants completing Systematic Training for Effective Parenting	167	181	146	200	200
Participants completing When Families Get Angry	65	69	98	70	70
Participants completing JJPP	45	27	25	65	65
FTE value of volunteer hours (parent education)	0.31	0.20	0.40	0.25	0.25

# Virginia Cooperative Extension

## Financial Education & Housing Counseling

The Financial Education & Housing Counseling program promotes improved personal financial behaviors through research-based curriculum and financial counseling to develop sound financial practices for improved economic stability. VCE's Master Financial Educator volunteers lead programs on Money Saving Strategies, Improving Credit, Getting Ready for Taxes, Financial Recovery, and more. VCE is a U.S. Department of Housing & Urban Development (HUD) certified counseling agency, offering one-to-one counseling and proven best practices for better financial decision-making. The First-Time Homebuyer program outlines steps to reach homeownership, including pre-purchase planning, steps to avoid foreclosure, and credit improvement. For the past several years, Housing Counselors were able to mitigate the foreclosure process saving homes for over 90% of clients who were at risk of foreclosure. The counseling team includes HUD-approved credit counselors, foreclosure mitigation counselors, and the area expert on reverse mortgage options. The Financial Education & Housing Counseling program is a part of the Financial Empowerment Center for PWC supporting community efforts to reach low-income and underserved populations, helping the community reach financial and affordable home-ownership goals.

Key Measures	FY19 Actuals	FY20 Actuals	FY21 Actuals	FY22 Adopted	FY23 Adopted
Counseling participants with success in adopting their financial action plan	83%	97%	100%	75%	75%
Mortgage default clients not losing their homes to foreclosure	97%	98%	100%	90%	90%
Clients with increased knowledge measured by pre/post-tests	77%	72%	79%	85%	85%

Program Activities & Workload Measures <i>(Dollar amounts expressed in thousands)</i>	FY19 Actuals	FY20 Actuals	FY21 Actuals	FY22 Adopted	FY23 Adopted
<b>Financial Education and Housing Counseling</b>	<b>\$447</b>	<b>\$518</b>	<b>\$504</b>	<b>\$374</b>	<b>\$390</b>
Households receiving housing counseling	253	122	87	200	200
Clients completing First Time Homebuyer Track	44	30	38	35	35
Clients attending financial literacy class	571	723	593	450	450
FTE value of volunteer hours (financial education)	0.80	0.51	0.52	0.80	0.80

