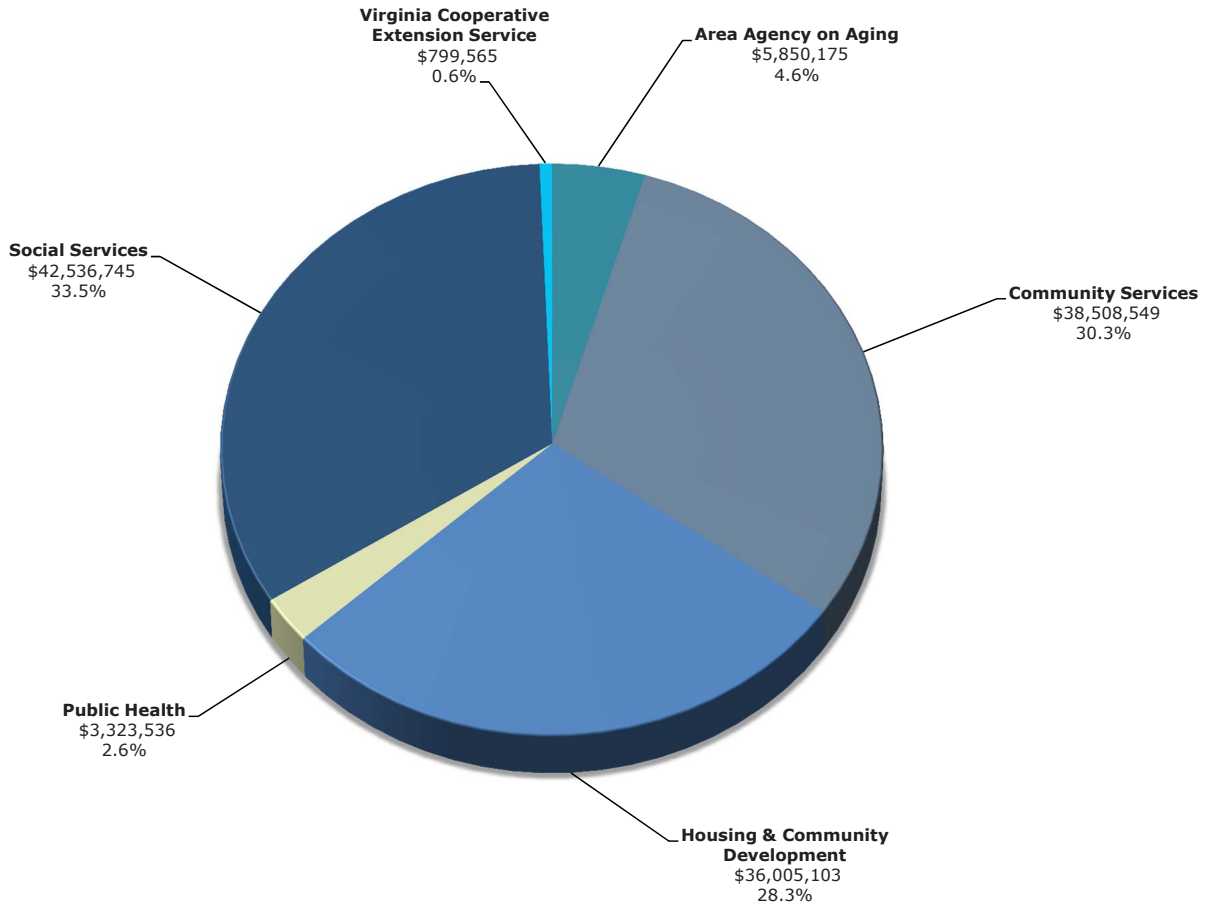


# Human Services



**Human Services Expenditure Budget: \$127,023,673**



*Average Tax Bill:* Human Services accounted for \$177 and 4.76% of the average residential tax bill in FY16.

## Department & Agencies

- Area Agency on Aging
- Community Services

- Housing & Community Development
- Public Health

- Social Services
- Virginia Cooperative Extension





## Human Services

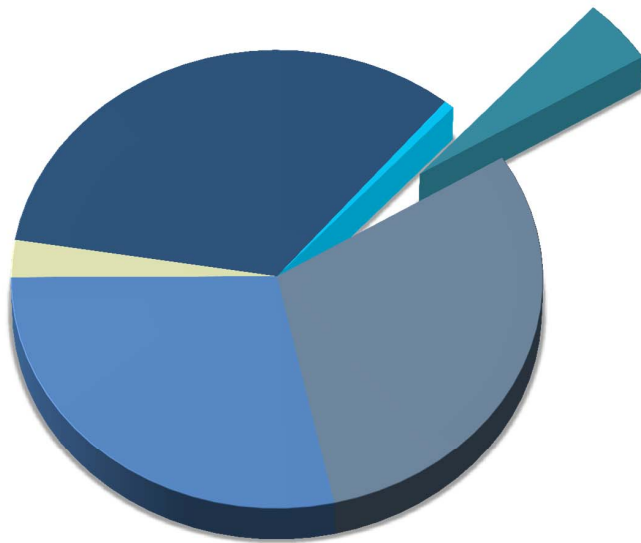
**Goal Statement:** The County will provide human services to individuals and families most at risk, through innovative and effective leveraging of state and federal funds and community partnerships.

	FY2016 Strategic Plan Targets
State hospitalization of seriously mentally ill individuals per 100,000 population	≤175
Permanent placement of foster children	38%
TANF participants engaged in work activities	51%
Reoccurring cases of child abuse	1%
Reoccurring cases of adult abuse	5%
Point-in-time homeless count	327
Satisfaction with Aging's ability to help people stay in their homes	98%
Employment placements for special education students after graduation	>45.5%
90 day turnaround rate for mentally ill and/or substance abusing youth in residential placements	66%
Day support and training placements for individuals with autism	175
Clients served by community partners and contractual agreements	55,328
Volunteer hours provided to support human service agencies	28,279

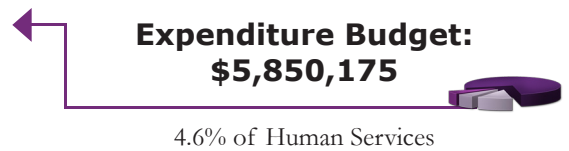


## Mission Statement

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



**Human Services Expenditure Budget**  
\$127,023,673



### Programs:

- Home and Community Based Services: \$1,327,714
- Supportive Services: \$1,412,674
- Senior Centers: \$1,181,138
- Fiscal & Administration: \$1,928,649

## 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



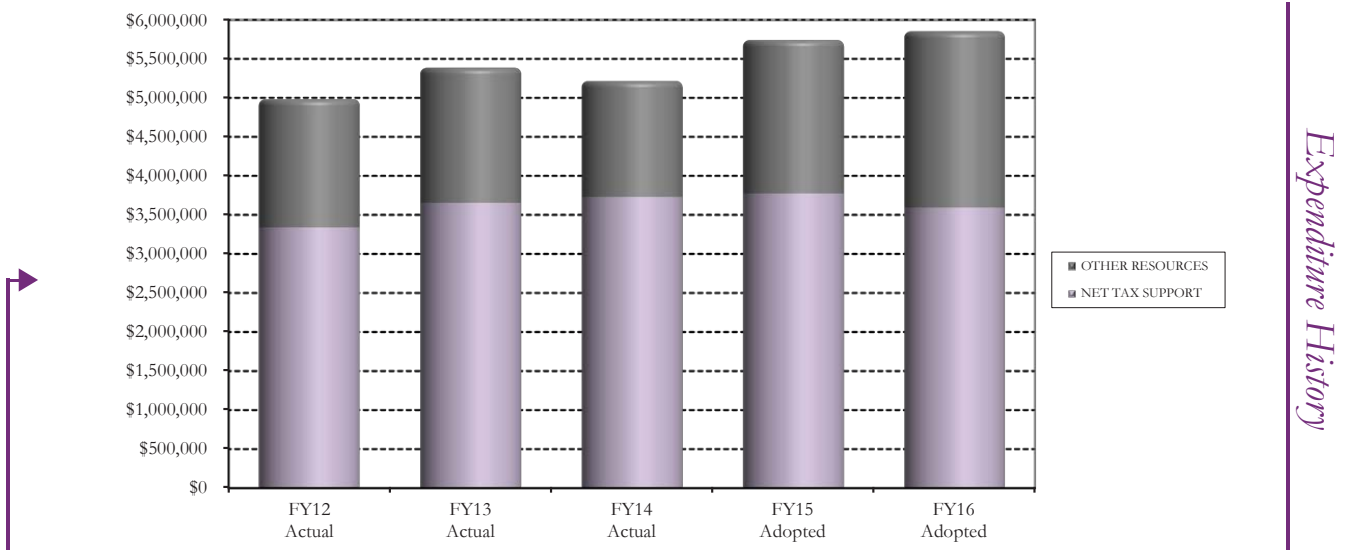
	FY12 Actual	FY13 Actual	FY14 Actual	FY15 Adopted	FY16 Adopted	% Change Adopt15/ Adopted16
<b>Expenditure by Program</b>						
1 Home and Community Based Services	\$926,952	\$1,146,197	\$1,176,272	\$1,186,165	\$1,327,714	11.93%
2 Supportive Services	\$831,047	\$880,555	\$992,921	\$1,390,507	\$1,412,674	1.59%
3 Senior Centers	\$768,735	\$796,036	\$1,040,813	\$1,084,895	\$1,181,138	8.87%
4 Fiscal & Administration	\$2,042,391	\$2,464,815	\$2,004,450	\$2,077,820	\$1,928,649	(7.18%)
<b>Total Expenditures</b>	<b>\$4,569,125</b>	<b>\$5,287,603</b>	<b>\$5,214,456</b>	<b>\$5,739,387</b>	<b>\$5,850,175</b>	<b>1.93%</b>

### Expenditure by Classification

	FY12 Actual	FY13 Actual	FY14 Actual	FY15 Adopted	FY16 Adopted	% Change Adopt15/ Adopted16
1 Personal Services	\$1,481,158	\$1,557,100	\$1,686,730	\$1,761,882	\$1,796,650	1.97%
2 Fringe Benefits	\$392,592	\$455,933	\$470,990	\$477,715	\$499,128	4.48%
3 Contractual Services	\$1,804,882	\$2,053,310	\$2,005,329	\$2,128,403	\$2,281,594	7.20%
4 Internal Services	\$126,986	\$176,945	\$175,200	\$140,439	\$135,352	(3.62%)
5 Purchase Goods & Supplies	\$688,023	\$924,342	\$834,177	\$1,219,948	\$1,268,180	3.95%
6 Capital Outlay	\$0	\$98,139	\$16,683	\$0	\$0	—
7 Leases & Rentals	\$8,225	\$10,048	\$9,345	\$11,000	\$11,000	0.00%
8 Recovered Costs/Budgeted Savings	\$0	\$0	\$0	\$0	(\$141,729)	—
9 Transfers	\$67,259	\$11,786	\$16,002	\$0	\$0	—
<b>Total Expenditures</b>	<b>\$4,569,125</b>	<b>\$5,287,603</b>	<b>\$5,214,456</b>	<b>\$5,739,387</b>	<b>\$5,850,175</b>	<b>1.93%</b>

### Funding Sources

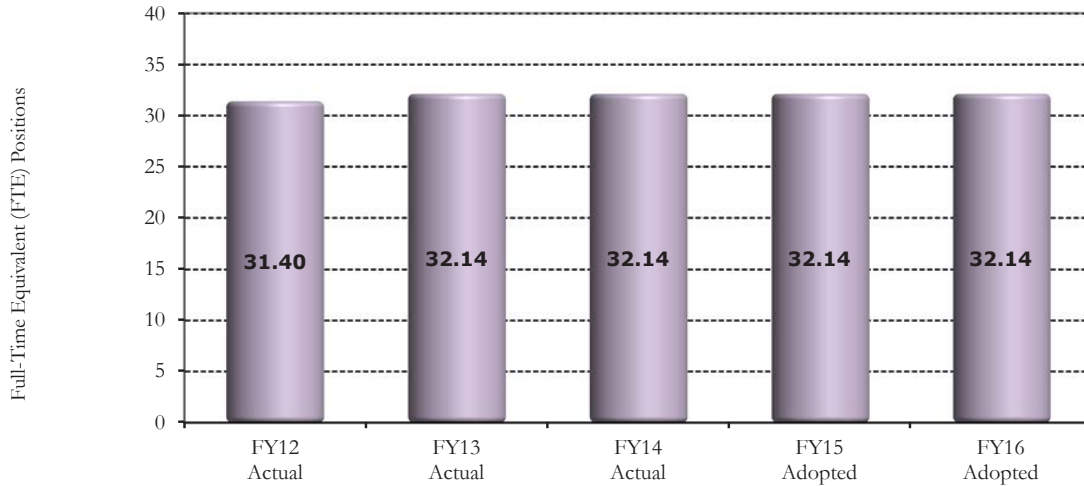
	FY12 Actual	FY13 Actual	FY14 Actual	FY15 Adopted	FY16 Adopted	% Change Adopt15/ Adopted16
1 Revenue from Use of Money and Property	\$2,779	\$2,000	\$3,283	\$2,250	\$2,250	0.00%
2 Charges for Services	\$232,336	\$206,186	\$166,242	\$199,500	\$184,500	(7.52%)
3 Miscellaneous Revenue	\$53,456	\$39,409	\$43,765	\$44,586	\$48,942	9.77%
4 Revenue From Other Localities	\$401,304	\$319,572	\$170,852	\$300,577	\$426,231	41.80%
5 Revenue From Commonwealth	\$221,524	\$316,334	\$349,758	\$326,668	\$413,283	26.51%
6 Revenue From Federal Government	\$700,124	\$820,400	\$725,317	\$1,065,444	\$1,155,690	8.47%
7 Non-Revenue Receipts	\$1,496	\$242	\$0	\$0	\$0	—
8 Transfers In	\$29,000	\$24,000	\$24,000	\$24,000	\$24,000	0.00%
<b>Total Designated Funding Sources</b>	<b>\$1,642,019</b>	<b>\$1,728,143</b>	<b>\$1,483,217</b>	<b>\$1,963,025</b>	<b>\$2,254,896</b>	<b>14.87%</b>
<b>Net General Tax Support</b>	<b>\$3,339,501</b>	<b>\$3,656,755</b>	<b>\$3,731,239</b>	<b>\$3,776,362</b>	<b>\$3,595,279</b>	<b>(4.80%)</b>
<b>Net General Tax Support</b>	<b>73.09%</b>	<b>69.16%</b>	<b>71.56%</b>	<b>65.80%</b>	<b>61.46%</b>	



Expenditure History



Staff History



Staff By Program

	FY12 Actual	FY13 Actual	FY14 Actual	FY15 Adopted	FY16 Adopted
1 Home and Community Based Services	8.95	8.95	8.95	8.95	9.20
2 Supportive Services	6.58	6.58	6.58	6.78	6.93
3 Senior Centers	10.42	10.96	10.96	10.96	10.21
4 Fiscal & Administration	5.45	5.65	5.65	5.45	5.80
<b>Full-Time Equivalent (FTE) Total</b>	<b>31.40</b>	<b>32.14</b>	<b>32.14</b>	<b>32.14</b>	<b>32.14</b>

## Future Outlook

**People are Living Longer** - The average life expectancy from birth today is 78.7 years; however, if one lives to be 65, life expectancy is 84 and if one lives to be 75, life expectancy is 87. This means that people who retire at 65 may live another 20.5 years, on average. There will be a greater divide between the healthy and wealthy and the health-compromised with low income (source: Centers for Disease Control). In order for this more complex group to stay in the community, they will need more coordinated services between medical professionals and long term services and supports provided by Aging.

**More Significant Needs of the Very Old** - Persons over the age of 85 are the oldest and fastest growing cohort of older adults in America. The ability to live in the community with chronic disease(s) will be the biggest challenge as the service model for long term services and supports shifts from an institutional model to more personal choice. We will see longer waiting lists for services provided by Aging. 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.



**No Wrong Door** - The coordination between health care providers and Aging's long term services and supports will be critical, as will improving the local human services information and referral system so that people can receive current, appropriate information immediately and in a seamless manner. This No Wrong Door Initiative should serve persons of all ages who need long term services and supports. When a person needs long term services and supports, their age is less important than their functional ability. Long term services, support systems and referral protocols should not be redundant and fractured.

**Elder Abuse & Financial Exploitation** - The increase in the older adult population and the desire of persons with disabilities to live in the community may bring an increase in abuse and possibly more social isolation. All County departments will be affected by the demographic shift and service silos will have to be removed as multiple departments serve the same customer. The ability to coordinate service among multiple County departments, share data and keep it as simple as possible for the customer will require increased communication and referral through No Wrong Door.

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

## General Overview

- A. Internal Service Fund (ISF) Technology Budget** - The County annually allocates all technology costs to agencies through an ISF, using the approved cost basis for each technology activity. Technology activities include phone, radio and computer support, business systems support, GIS, web services, capital equipment replacement, and administration. In FY16 Aging's technology bill decreased by \$5,087 to \$105,273.
- B. Birmingham Green** - The FY16 budget includes a reduction of \$87,645 for Birmingham Green reflecting one-time capital expenditures funded in FY15 and an FY16 operating increase of \$86,620, for a net reduction of \$1,025.
- C. Caregiver Conference** - The FY16 budget includes a \$15,000 reduction in both revenue and expenditure resulting from the elimination of the Caregiver Conference.
- D. Public Health Shift** - In FY12 Aging shifted \$14,958 into Public Health's budget for elderly dental care services. However, in FY14 the State eliminated funding for local dental health programs. Public Health is using local funds to provide clinical care and preventive services to uninsured low income children. Since the primary focus is on children, the \$14,958 is returned to Aging for services at the senior centers.
- E. Budgeted Savings** - For over two decades, the County has had a long-standing practice of using year-end savings as a funding source in the next year's budget. Utilizing these savings has provided significant tax bill savings for County residents. The three major credit rating agencies have recently revised their rating criteria used to evaluate the creditworthiness of jurisdictions using bond proceeds to finance capital infrastructure projects. Under the new criteria year-end savings are considered to be one-time funds, which should not be used to support ongoing expenditures. In order to address this issue, the FY2016 Budget includes a 2.5% reduction to the general fund portion of agency expenditure budgets (with the exception of state courts and magistrates), totaling \$13.0 million. This reduction has been implemented by adding a negative budget line item to agencies, similar to the budgeted salary lapse. The savings amount for Aging is \$141,729.
- F. Annual Reconciliation** - In accordance with [BOCS Resolution 14-731](#), adopted December 16, 2014, Aging reconciled their FY15 budget with \$176,861 of additional state and federal revenues. This increase is carried forward for the FY16 budget.



**G. Compensation Increase** - Compensation adjustments totaling \$59,664 are made to support the following rate changes:

- 5.0% Retiree Health;
- -1.0% VRS employer rate for Plan 1 employees;
- 7.7% Health insurance;
- 3.2% Dental insurance;
- 2.0% Pay Plan adjustment; and
- 1.0% Salary adjustment to offset the required VRS contribution by Plan 1 and some Plan 2 employees.

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

## Program Summary

### Home & Community Based Services

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

Key Measures	FY12 Actual	FY13 Actual	FY14 Actual	FY15 Adopted	FY16 Adopted
Home and Community-Based Services clients who report that service helped them remain in their homes	95%	98%	100%	99%	99%
Family care-givers who report they are better able to meet work or other family obligations	94%	93%	94%	94%	95%

Program Activities & Workload Measures (Dollar amounts expressed in thousands)	FY12 Actual	FY13 Actual	FY14 Actual	FY15 Adopted	FY16 Adopted
<b>Home Services</b>	\$444	\$637	\$653	\$645	\$718
Clients served	111	117	122	120	120
Average days on waitlist for services	—	—	—	—	60
<b>Community Based Services</b>	\$483	\$509	\$511	\$541	\$610
Clients served	70	43	46	50	50
Average days on waitlist for services	—	—	—	—	90



## Supportive Services

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

Key Measures	FY12 Actual	FY13 Actual	FY14 Actual	FY15 Adopted	FY16 Adopted
Participants who report that Supportive Services have helped them remain in the community	—	—	100%	85%	90%
Clients/families who indicate that information provided assisted them in navigating the network of aging and disability services	—	—	95%	95%	95%

Program Activities & Workload Measures (Dollar amounts expressed in thousands)	FY12 Actual	FY13 Actual	FY14 Actual	FY15 Adopted	FY16 Adopted
<b>Assessment and Care Coordination</b>	\$186	\$248	\$715	\$1,077	\$1,131
People receiving services	495	489	566	500	550
<b>Communication, Referral, Information and Assistance (CRIA)</b>	\$566	\$549	\$221	\$237	\$213
Information requests addressed	6,092	6,463	5,133	6,500	5,200
<b>Medicare Counseling</b>	\$80	\$83	\$58	\$76	\$69
People counseled for Medicare health insurance	1,562	1,506	2,069	1,550	2,000

## Senior Centers

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

Key Measures	FY12 Actual	FY13 Actual	FY14 Actual	FY15 Adopted	FY16 Adopted
Participants who report that the Senior Centers have helped them remain in the community	—	—	100%	85%	90%
Meals on Wheels participants who report that meals have helped them remain in the community	99%	95%	100%	97%	98%





<b>Program Activities &amp; Workload Measures</b> (Dollar amounts expressed in thousands)	<b>FY12 Actual</b>	<b>FY13 Actual</b>	<b>FY14 Actual</b>	<b>FY15 Adopted</b>	<b>FY16 Adopted</b>
<b>Senior Centers</b>	\$769	\$796	\$1,041	\$1,085	\$1,181
Senior Center participants	1,264	1,138	1,179	1,250	1,250
Meals served (congregate and Meals on Wheels)	45,610	48,623	54,571	50,000	52,000

## 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.

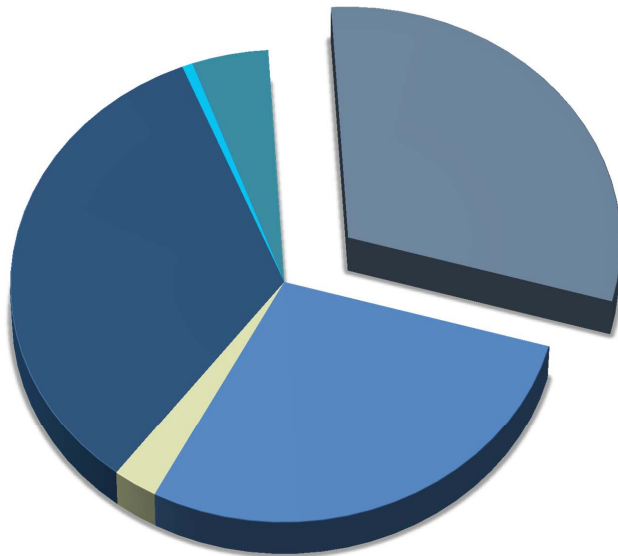
<b>Key Measures</b>	<b>FY12 Actual</b>	<b>FY13 Actual</b>	<b>FY14 Actual</b>	<b>FY15 Adopted</b>	<b>FY16 Adopted</b>
People served by community partners and contractual agreements	1,336	2,489	1,086	2,500	1,500
Citizens agreeing that the County provides appropriate facilities and services for seniors and caregivers (community survey)	89%	89%	88%	89%	89%

<b>Program Activities &amp; Workload Measures</b> (Dollar amounts expressed in thousands)	<b>FY12 Actual</b>	<b>FY13 Actual</b>	<b>FY14 Actual</b>	<b>FY15 Adopted</b>	<b>FY16 Adopted</b>
<b>Area Plan on Aging</b>	\$839	\$1,080	\$634	\$610	\$462
FTE value of volunteer hours contributed	10	8	9	9	9
<b>Birmingham Green</b>	\$1,150	\$1,333	\$1,332	\$1,414	\$1,413
County residents served in Birmingham Green facilities	114	115	119	115	115
<b>Bluebird Tour Program</b>	\$53	\$52	\$51	\$54	\$54
Tour participants	759	831	730	850	800



## Mission Statement

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



**Human Services Expenditure Budget**  
\$127,023,673

**Expenditure Budget:**  
**\$38,508,549**

30.3% of Human Services

### Programs:

- Emergency Services: \$3,730,930
- Youth Mental Health & Substance Abuse Services: \$2,913,195
- Mental Health Outpatient Services: \$3,020,216
- Mental Health Day Support & Employment Services: \$1,695,912
- Mental Health Residential Services: \$5,930,623
- Early Intervention Services: \$4,071,955
- Intellectual Disability Case Management Services: \$3,218,073
- Intellectual Disability Day Support Services: \$3,404,530
- Intellectual Disability Residential Services: \$793,215
- Substance Abuse Adult Outpatient Services: \$1,957,386
- Drug Offender Recovery Services: \$1,655,557
- Medical Services: \$2,859,900
- Administrative Services: \$3,257,057

## Mandates

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

**State Code:** [37.2-500](#), [37.2-504](#)

# Community Services



## Expenditure and Revenue Summary



	FY12 Actual	FY13 Actual	FY14 Actual	FY15 Adopted	FY16 Adopted	% Change Adopt15/ Adopted16
<b>Expenditure by Program</b>						
1 Emergency Services	\$2,934,679	\$3,026,153	\$3,207,744	\$3,124,445	\$3,730,930	19.41%
2 Youth Mental Health & Substance Abuse Services	\$2,861,104	\$3,003,138	\$3,074,614	\$3,033,059	\$2,913,195	(3.95%)
3 Mental Health Outpatient Services	\$3,051,614	\$3,004,303	\$3,101,583	\$3,237,800	\$3,020,216	(6.72%)
4 Mental Health Day Support & Employment Services	\$1,617,083	\$1,524,466	\$1,678,298	\$1,758,137	\$1,695,912	(3.54%)
5 Mental Health Residential Services	\$3,661,620	\$4,338,344	\$5,173,710	\$5,185,400	\$5,930,623	14.37%
6 Early Intervention Services	\$3,305,427	\$3,317,673	\$3,650,474	\$3,923,825	\$4,071,955	3.78%
7 Intellectual Disability Case Management Services	\$2,059,923	\$2,483,319	\$3,532,586	\$3,203,401	\$3,218,073	0.46%
8 Intellectual Disability Day Support Services	\$3,227,608	\$2,961,608	\$2,993,064	\$3,403,878	\$3,404,530	0.02%
9 Intellectual Disability Residential Services	\$699,572	\$724,737	\$747,106	\$788,085	\$793,215	0.65%
10 Substance Abuse Adult Outpatient Services	\$2,129,706	\$2,234,641	\$2,151,332	\$2,269,431	\$1,957,386	(13.75%)
11 Drug Offender Recovery Services	\$1,453,786	\$1,496,629	\$1,558,801	\$1,650,722	\$1,655,557	0.29%
12 Medical Services	\$2,056,658	\$2,206,315	\$2,369,864	\$2,649,669	\$2,859,900	7.93%
13 Administrative Services	\$2,154,054	\$2,037,829	\$2,235,283	\$3,364,478	\$3,257,057	(3.19%)
14 Office of Executive Director	\$1,087,987	\$1,128,123	\$1,189,951	\$0	\$0	—
<b>Total Expenditures</b>	<b>\$32,300,821</b>	<b>\$33,487,278</b>	<b>\$36,664,410</b>	<b>\$37,592,330</b>	<b>\$38,508,549</b>	<b>2.44%</b>

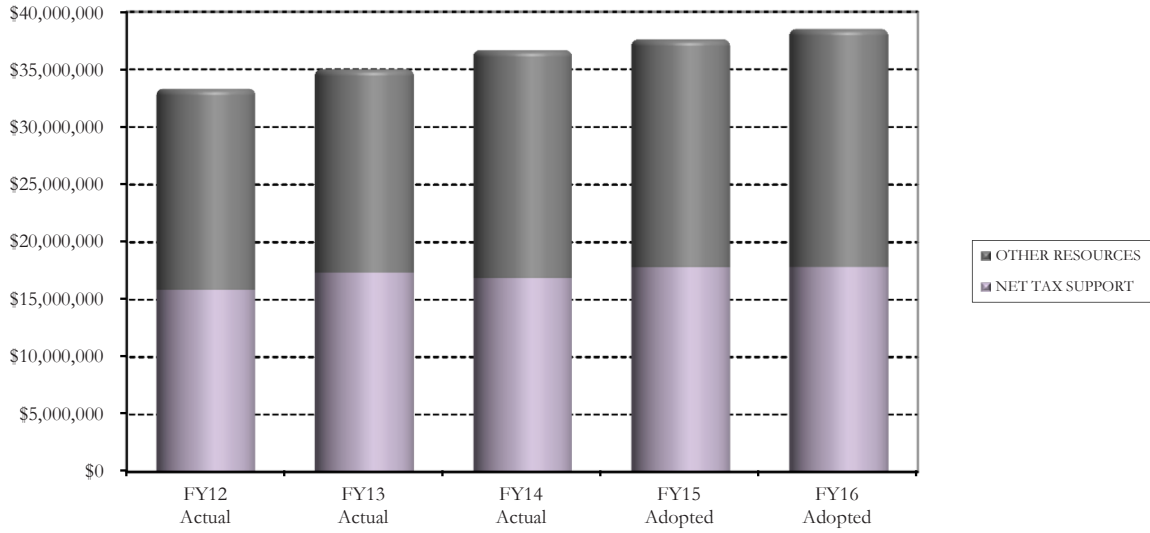
### Expenditure by Classification

1 Personal Services	\$17,638,376	\$17,798,843	\$19,281,671	\$20,155,074	\$20,905,689	3.72%
2 Fringe Benefits	\$4,996,783	\$5,558,993	\$5,916,644	\$6,184,364	\$6,379,300	3.15%
3 Contractual Services	\$6,761,778	\$6,886,808	\$7,178,811	\$7,663,640	\$8,529,810	11.30%
4 Internal Services	\$1,273,597	\$1,342,248	\$1,584,886	\$1,470,607	\$1,506,313	2.43%
5 Purchase Goods & Supplies	\$1,272,658	\$1,484,167	\$1,594,517	\$1,940,105	\$1,953,291	0.68%
6 Debt Maintenance	\$24,258	\$24,258	\$24,258	\$24,258	\$24,258	0.00%
7 Capital Outlay	\$0	\$36,594	\$0	\$0	\$0	—
8 Leases & Rentals	\$146,031	\$151,197	\$149,335	\$154,282	\$154,282	0.00%
9 Recovered Costs/Budgeted Savings	\$0	\$0	\$0	\$0	(\$944,394)	—
10 Transfers Out	\$187,340	\$204,170	\$934,288	\$0	\$0	—
<b>Total Expenditures</b>	<b>\$32,300,821</b>	<b>\$33,487,278</b>	<b>\$36,664,410</b>	<b>\$37,592,330</b>	<b>\$38,508,549</b>	<b>2.44%</b>

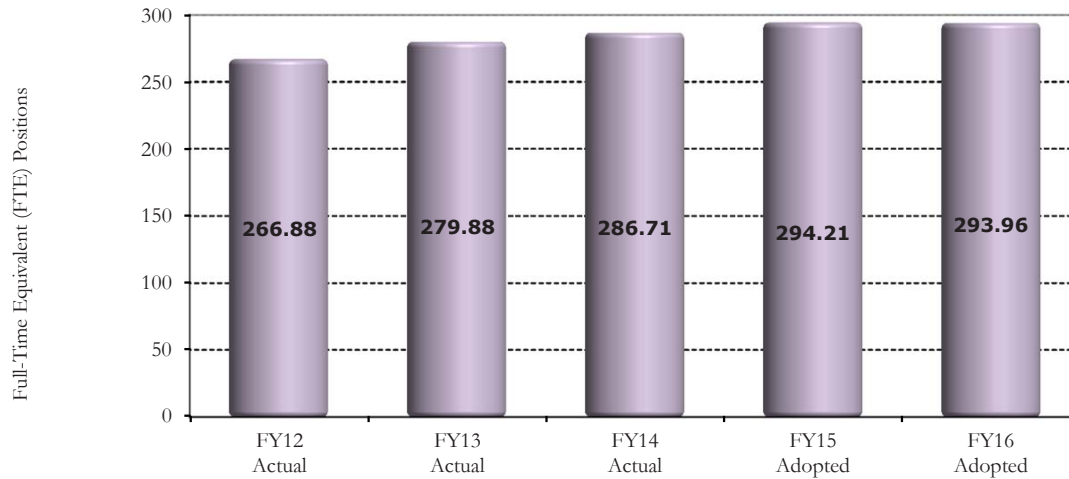
### Funding Sources

1 General Property Taxes	\$5,500	\$0	\$0	\$0	\$0	—
2 Charges for Services	\$822,043	\$832,973	\$721,416	\$740,071	\$740,071	0.00%
3 Miscellaneous Revenue	\$29,668	\$58,737	\$98,573	\$160,883	\$160,883	0.00%
4 Revenue From Other Localities	\$2,388,410	\$2,270,256	\$2,463,021	\$2,819,329	\$2,765,019	(1.93%)
5 Revenue From Commonwealth	\$11,596,701	\$11,821,621	\$13,866,500	\$13,488,794	\$14,243,040	5.59%
6 Revenue From Federal Government	\$2,635,245	\$2,671,747	\$2,627,983	\$2,553,516	\$2,734,439	7.09%
7 Transfers In	\$0	\$0	\$0	\$0	\$0	—
<b>Total Designated Funding Sources</b>	<b>\$17,477,567</b>	<b>\$17,655,334</b>	<b>\$19,777,493</b>	<b>\$19,762,593</b>	<b>\$20,643,452</b>	<b>4.46%</b>
<b>Net General Tax Support</b>	<b>\$15,847,319</b>	<b>\$17,354,343</b>	<b>\$16,886,917</b>	<b>\$17,829,737</b>	<b>\$17,865,097</b>	<b>0.20%</b>
<b>General Tax Support</b>	<b>49.06%</b>	<b>51.82%</b>	<b>46.06%</b>	<b>47.43%</b>	<b>46.39%</b>	

# Community Services



Expenditure History



Staff History

	FY12 Actual	FY13 Actual	FY14 Actual	FY15 Adopted	FY16 Adopted
1 Emergency Services	28.09	28.09	29.92	29.92	38.42
2 Youth Mental Health & Substance Abuse Services	29.62	29.65	29.60	29.60	27.85
3 Mental Health Outpatient Services	39.45	40.45	40.45	39.45	37.20
4 Mental Health Day Support & Employment Services	18.20	18.20	18.20	18.20	18.20
5 Mental Health Residential Services	29.90	32.90	32.90	33.90	33.50
6 Early Intervention Services	24.70	28.70	28.70	32.20	32.20
7 Intellectual Disability Case Management Services	23.40	27.40	32.50	36.50	35.40
8 Intellectual Disability Day Support Services	0.20	0.20	0.20	0.20	0.20
9 Intellectual Disability Residential Services	2.10	2.10	2.00	2.00	2.00
10 Substance Abuse Adult Outpatient Services	21.85	21.85	21.85	21.84	18.85
11 Drug Offender Recovery Services	14.40	14.40	14.40	14.40	14.65
12 Medical Services	12.97	13.94	13.99	14.00	13.99
13 Administrative Services	15.75	15.15	15.15	22.00	21.50
14 Office of Executive Director	6.25	6.85	6.85	0.00	0.00
<b>Full-Time Equivalent (FTE) Total</b>	<b>266.88</b>	<b>279.88</b>	<b>286.71</b>	<b>294.21</b>	<b>293.96</b>

Staff By Program



## Future Outlook

**Impact of 2014 Legislative Changes to Virginia's Civil Commitment Laws** - The 2014 Virginia General Assembly passed new legislation impacting local responsibilities in the execution of Emergency Custody Orders (ECOs) and Temporary Detention Orders (TDOs), the creation of a new on-line and in "real time" Acute Psychiatric Bed Registry, and new requirements for monitoring Mandatory Outpatient Treatment (MOT) for individuals with serious mental illness. The Department of Behavioral Health and Developmental Services (DBHDS) implemented new requirements, placing increased accountability on Community Services (CS) staff in the pre-admission screening, management, follow-up and documentation of individuals experiencing mental health emergencies. Additional CS management and clinical staff resources must be dedicated to ensure full compliance and accountability.

**Waiting Lists and Access to Treatment** - The number of persons with serious mental illness and/or substance use disorders in need of outpatient case management and other treatment services continues to exceed staff capacity. During CS centralized intake and assessment process, clients are triaged, or prioritized for services according to urgency of need. Some clients may receive a minimal service while waiting for a more intensive level of service or additional services. For example, some clients are receiving medication services by CS physicians, but may have to wait for outpatient case management and therapy due to clinical staff caseloads exceeding maximum capacity. In addition, some with addictions who do not have insurance or Medicaid require medication assisted treatment but are unable to access this highly effective treatment. Strengthening and increasing resources is needed to increase clinical capacity and access to treatment.

**Infrastructure Support to Fulfill Utilization, Performance, and Quality Management Functions** - CS is required to collect, monitor, analyze and report to the state on numerous quantitative and qualitative utilization management and performance outcome measures. The state performance contract has expanded significantly and requires very detailed measures via electronic health records, management information systems, and the state's centralized data collection system. While clinical staffs perform many data collection and reporting functions in addition to their primary job functions, there is an increasing need for dedicated staff with expertise in data reporting, analysis and electronic database management.

**Managed Care and Health Care Expansion Initiatives** - Since 2013, CS has been required to participate in three major managed care initiatives designed to provide access to behavioral and primary health care while achieving cost savings to the Commonwealth. Currently CS affiliates and coordinates services with three managed care organizations for Medicaid and Medicare service delivery to persons with behavioral health needs. Each managed care organization affiliation requires the development and implementation of additional business processes and accountability systems, increasing demands on limited staff resources and infrastructure.

**Changes in Intellectual Disability/Developmental Disability (ID/DD) Waiver** - The State is finalizing a plan to re-design and combine the Medicaid ID and DD Waiver programs. The plan will be presented to the Virginia General Assembly and the U.S. Centers of Medicaid and Medicare Services for implementation in FY16. The new waiver will address eligibility, case management, services array, and rates of reimbursement. A significant area of change will be the expectation that Community Service Board's (CSB) in Virginia will assume responsibility over the case management for persons with autism spectrum disorders. There are currently hundreds of children and adults in the Prince William area with autism spectrum disorders that will be eligible for services with the implementation of the new Medicaid waiver program.



## General Overview

- A. Budgeted Savings** - For over two decades, the County has had a long-standing practice of using year-end savings as a funding source in the next year's budget. Utilizing these savings has provided significant tax bill savings for County residents. The three major credit rating agencies have recently revised their rating criteria used to evaluate the creditworthiness of jurisdictions using bond proceeds to finance capital infrastructure projects. Under the new criteria year-end savings are considered to be one-time funds, which should not be used to support ongoing expenditures. In order to address this issue, the FY2016 Budget includes a 2.5% reduction to the general fund portion of agency expenditure budgets (with the exception of state courts and magistrates), totaling \$13.0 million. This reduction has been implemented by adding a negative budget line item to agencies, similar to the budgeted salary lapse. The savings amount for CS is (\$944,394).
- B. Shift Community Partner Funding** - The County's partnership with Rainbow Riding Center has been shifted into CS from the Cooperative Extension's 4-H Youth Education activity in the Family Stability Program. This shift results in an increase of \$34,357 to the CS budget.
- C. Decrease Software Maintenance Budget** - This item shifts funding for Harmony system maintenance to the Department of Social Services. Harmony is the automated management information system that supports three multi-disciplinary teams, hearing schedules, confidential client data bases, treatment services and financial data for at risk youth in the county. This shift will decrease the CS budget by \$40,225.
- D. Permanent Shift to Support Position Upgrades** - \$28,472 has been shifted to support two positions reclassified into different, upgraded position classifications with higher salaries. Agencies are expected to support position upgrades with permanent shifts in the event that the upgraded position cost is higher than the previous position budgeted amount.
- E. Internal Service Fund (ISF) Technology Budget** - The County annually allocates all technology costs to agencies through an ISF, using the approved cost basis for each technology activity. Technology activities include phone, radio and computer support, business systems support, GIS, web services, capital equipment replacement, and administration. In FY16, the CS technology bill decreased by \$11,175 to \$1,343,838.
- F. Compensation Increase** - Compensation adjustments totaling \$712,748 are made to support the following rate changes:
- 5.0% Retiree Health;
  - -1.0% VRS employer rate for Plan 1 employees;
  - 7.7% Health insurance;
  - 3.2% Dental insurance;
  - 2.0% Pay Plan adjustment; and
  - 1.0% Salary adjustment to offset the required VRS contribution by Plan 1 and some Plan 2 employees.

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



## Program Summary

### Emergency Services

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

Key Measures	FY12 Actual	FY13 Actual	FY14 Actual	FY15 Adopted	FY16 Adopted
Cases diverted from inpatient treatment	62%	62%	61%	60%	60%
Clients satisfied with services received	89%	93%	96%	90%	92%
County provides appropriate facilities and services to people with mental illness and/or intellectual disability (community survey)	84%	84%	83%	≥84%	≥84%

Program Activities & Workload Measures (Dollar amounts expressed in thousands)	FY12 Actual	FY13 Actual	FY14 Actual	FY15 Adopted	FY16 Adopted
CS Intake and Emergency Telephone Services	\$675	\$667	\$453	\$433	\$1,211
Telephone contacts received and processed	9,071	8,470	NR	8,900	NR
Access assessments completed	—	—	—	—	2,780
<b>Emergency Services</b>	<b>\$2,260</b>	<b>\$2,359</b>	<b>\$2,755</b>	<b>\$2,692</b>	<b>\$2,520</b>
Clients served	2,822	2,748	2,759	2,785	2,759



## Youth Mental Health & Substance Abuse Services

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

Key Measures	FY12 Actual	FY13 Actual	FY14 Actual	FY15 Adopted	FY16 Adopted
Clients completing treatment who improve in functioning	80%	77%	74%	75%	75%
Clients satisfied with services	93%	97%	97%	95%	95%
Teen clients who stop using drugs/alcohol	—	72%	74%	72%	72%
Grade point average improvements for HIDTA prevention clients	+0.82	+ 0.57	+0.57	+0.7	+0.7
Reduced school absences for HIDTA prevention clients	37%	36%	36%	35%	35%

Program Activities & Workload Measures (Dollar amounts expressed in thousands)	FY12 Actual	FY13 Actual	FY14 Actual	FY15 Adopted	FY16 Adopted
<b>In-School Substance Abuse Treatment Services</b>	\$780	\$842	\$877	\$881	\$832
Clients served	1,088	1,201	1,022	1,200	1,200
<b>Clinic-Based Mental Health Treatment and Substance Abuse Treatment Services</b>	\$596	\$615	\$644	\$658	\$656
Clients served	427	402	453	425	425
<b>In-Home Mental Health and Substance Abuse Treatment Services</b>	\$1,019	\$1,054	\$1,043	\$980	\$921
Clients served	118	154	149	125	125
<b>Prevention Services</b>	\$466	\$492	\$510	\$514	\$504
Prevention activity participants (students and parents)	206	203	322	210	210





## Mental Health Outpatient Services

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

Key Measures	FY12 Actual	FY13 Actual	FY14 Actual	FY15 Adopted	FY16 Adopted
Seriously mentally ill clients completing treatment who improve in functioning	90%	77%	54%	80%	75%
Clients satisfied with services received	98%	95%	90%	95%	90%
County provides appropriate facilities and services to people with mental illness and/or intellectual disability (community survey)	84%	84%	83%	≥84%	≥84%

Program Activities & Workload Measures (Dollar amounts expressed in thousands)	FY12 Actual	FY13 Actual	FY14 Actual	FY15 Adopted	FY16 Adopted
Seriously Mentally Ill Adult and Family Services	\$3,052	\$3,004	\$3,102	\$3,238	\$3,020
Clients served	1,238	1,270	1,423	1,275	1,275

### A. Budget Initiatives

#### 1. Add State Funding for Mental Health Outpatient Program

Expenditure	\$55,000
Revenue	\$55,000
General Fund Impact	\$0
FTE Positions	0.75

- a. **Description** - On October 7, 2014, [BOCS Resolution 14-607](#) accepted state revenues from the Virginia Department of Juvenile Justice to create a restrictive part-time Therapist III position for the provision of behavioral health services to juvenile offenders. There is no general fund impact and the position will only exist as long as state funding continues.
- b. **Service Level Impacts** - Existing service levels will be maintained.



### Mental Health Day Support & Employment Services

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

Key Measures	FY12 Actual	FY13 Actual	FY14 Actual	FY15 Adopted	FY16 Adopted
Clients who maintain employment for more than 90 days	84%	78%	92%	76%	84%
Psycho-social rehabilitation clients who maintain or improve functioning level	88%	96%	94%	83%	90%
Vocational Services clients reporting satisfaction with services	98%	96%	93%	91%	94%
County provides appropriate facilities and services to people with mental illness and/or intellectual disability (community survey)	84%	84%	83%	≥84%	≥84%

Program Activities & Workload Measures (Dollar amounts expressed in thousands)	FY12 Actual	FY13 Actual	FY14 Actual	FY15 Adopted	FY16 Adopted
<b>Day Support Services</b>	\$1,039	\$1,001	\$1,078	\$1,106	\$1,083
Clients served	137	135	122	134	131
<b>Employment Services</b>	\$578	\$524	\$601	\$652	\$613
Clients served	135	134	135	150	135

### Mental Health Residential Services

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

Key Measures	FY12 Actual	FY13 Actual	FY14 Actual	FY15 Adopted	FY16 Adopted
Clients successfully engaged in services and maintained in the community	99%	94%	96%	95%	95%
Clients expressing satisfaction with service provided	98%	95%	95%	95%	95%
County provides appropriate facilities and services to people with mental illness and/or intellectual disability (community survey)	84%	84%	83%	≥84%	≥84%



Program Activities & Workload Measures (Dollar amounts expressed in thousands)	FY12 Actual	FY13 Actual	FY14 Actual	FY15 Adopted	FY16 Adopted
<b>Supportive Residential In-Home Services</b>	\$2,032	\$2,080	\$2,381	\$2,384	\$2,338
Clients served	142	131	123	155	125
<b>Intensive Residential Services</b>	\$463	\$496	\$512	\$465	\$606
Clients served in group homes	24	24	25	24	28
<b>Crisis Stabilization Services</b>	\$586	\$1,145	\$1,604	\$1,615	\$1,615
Clients served	131	158	199	200	200
<b>Intensive Community Treatment (ICT) Services</b>	\$581	\$618	\$677	\$723	\$1,372
Clients served	51	50	78	50	50

## A. Budget Initiatives

### 1. Add State Funding for Mental Health Young Adult Services

Expenditure	\$611,998
Revenue	\$611,998
General Fund Impact	\$0
FTE Positions	0.0

- a. **Description** - On March 17, 2015, [BOCS Resolution 15-203](#) accepted state revenues from the Virginia Department of Behavioral Health and Developmental Services to provide services for young adults experiencing serious behavioral health conditions, including substance use/abuse and initial onset of psychosis. There is no general fund impact and the position will only exist as long as state funding continues.
- b. **Service Level Impacts** - Existing service levels will be maintained.



### Early Intervention Services

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

Key Measures	FY12 Actual	FY13 Actual	FY14 Actual	FY15 Adopted	FY16 Adopted
Children completing early intervention services who do not require special education	57%	51%	58%	53%	53%
Children receiving services demonstrate improved acquisition and use of knowledge and skills	—	—	68%	69%	69%
Families report services have helped their family to help their child develop and learn	—	—	77%	77%	77%

Program Activities & Workload Measures (Dollar amounts expressed in thousands)	FY12 Actual	FY13 Actual	FY14 Actual	FY15 Adopted	FY16 Adopted
<b>Assessment and Service Coordination</b>	\$1,371	\$1,320	\$1,588	\$1,606	\$1,786
Infants, toddlers and families served	1,140	1,150	1,129	1,100	1,120
<b>Therapeutic and Educational Services</b>	\$1,935	\$1,998	\$2,062	\$2,318	\$2,286
Infants, toddlers and families served	972	951	926	926	930

### Intellectual Disability Case Management Services

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

Key Measures	FY12 Actual	FY13 Actual	FY14 Actual	FY15 Adopted	FY16 Adopted
Program clients successfully maintained in the community	99%	99%	99%	99%	99%
Clients and family members satisfied with services	98%	91%	88%	90%	90%
County provides appropriate facilities and services to people with mental illness and/or intellectual disability (community survey)	84%	84%	83%	≥84%	≥84%



<b>Program Activities &amp; Workload Measures</b> (Dollar amounts expressed in thousands)	<b>FY12 Actual</b>	<b>FY13 Actual</b>	<b>FY14 Actual</b>	<b>FY15 Adopted</b>	<b>FY16 Adopted</b>
Case Management Services	\$2,060	\$2,483	\$3,533	\$3,203	\$3,218
Clients served	622	652	734	810	810

### Intellectual Disability Day Support Services

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

<b>Key Measures</b>	<b>FY12 Actual</b>	<b>FY13 Actual</b>	<b>FY14 Actual</b>	<b>FY15 Adopted</b>	<b>FY16 Adopted</b>
Program clients successfully maintained in the community	97%	95%	94%	95%	95%
Clients who are satisfied with program services	98%	98%	99%	98%	98%
County provides appropriate facilities and services to people with mental illness and/or intellectual disability (community survey)	84%	84%	83%	≥84%	≥84%

<b>Program Activities &amp; Workload Measures</b> (Dollar amounts expressed in thousands)	<b>FY12 Actual</b>	<b>FY13 Actual</b>	<b>FY14 Actual</b>	<b>FY15 Adopted</b>	<b>FY16 Adopted</b>
Day Care Services	\$578	\$594	\$594	\$581	\$582
Clients served	70	77	115	72	100
Day Support Services	\$977	\$909	\$985	\$1,045	\$1,045
Clients served	37	34	50	58	58
Sheltered Employment Services	\$662	\$558	\$511	\$751	\$752
Clients served	29	27	24	29	20
Supported Employment Services	\$1,011	\$901	\$903	\$1,026	\$1,027
Clients served	103	101	109	109	109



### Intellectual Disability Residential Services

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

Key Measures	FY12 Actual	FY13 Actual	FY14 Actual	FY15 Adopted	FY16 Adopted
Client family satisfaction	98%	90%	90%	90%	90%
County provides appropriate facilities and services to people with mental illness and/or intellectual disability (community survey)	84%	84%	83%	≥84%	≥84%

Program Activities & Workload Measures (Dollar amounts expressed in thousands)	FY12 Actual	FY13 Actual	FY14 Actual	FY15 Adopted	FY16 Adopted
<b>Group Home Services</b>	\$88	\$88	\$122	\$120	\$120
Clients served	159	181	197	164	200
<b>Supported Living Services</b>	\$612	\$636	\$625	\$668	\$673
Clients served	20	25	20	25	25

### Substance Abuse Adult Outpatient Services

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

Key Measures	FY12 Actual	FY13 Actual	FY14 Actual	FY15 Adopted	FY16 Adopted
Clients who are substance free upon completion of treatment	—	65%	86%	65%	70%
Customers satisfied with services received	99%	97%	95%	90%	90%

Program Activities & Workload Measures (Dollar amounts expressed in thousands)	FY12 Actual	FY13 Actual	FY14 Actual	FY15 Adopted	FY16 Adopted
<b>Adult Substance Abuse Services</b>	\$2,130	\$2,235	\$2,151	\$2,269	\$1,957
Clients served	1,334	1,377	1,364	1,335	1,335



## Drug Offender Recovery Services

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

Key Measures	FY12 Actual	FY13 Actual	FY14 Actual	FY15 Adopted	FY16 Adopted
Criminal Justice clients who stop using drugs	50%	40%	45%	45%	45%
Drug Offender Rehabilitation Module (DORM) clients who do not return to the ADC within three years	71%	69%	74%	67%	70%

Program Activities & Workload Measures (Dollar amounts expressed in thousands)	FY12 Actual	FY13 Actual	FY14 Actual	FY15 Adopted	FY16 Adopted
<b>Adult Detention Center Services</b>	\$965	\$942	\$975	\$1,006	\$1,005
Inmates treated in male and female dormitories	175	188	131	190	180
<b>Community Criminal Justice Services</b>	\$489	\$555	\$584	\$645	\$656
HIDTA clients served	70	63	73	65	65
Intensive case management clients served	171	97	43	125	125

## Medical Services

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

Key Measures	FY12 Actual	FY13 Actual	FY14 Actual	FY15 Adopted	FY16 Adopted
Customers satisfied with services received	90%	84%	90%	90%	90%
County provides appropriate facilities and services to people with mental illness and/or intellectual disability (community survey)	84%	84%	83%	≥84%	≥84%



<b>Program Activities &amp; Workload Measures</b> (Dollar amounts expressed in thousands)	<b>FY12 Actual</b>	<b>FY13 Actual</b>	<b>FY14 Actual</b>	<b>FY15 Adopted</b>	<b>FY16 Adopted</b>
Medical Services	\$2,057	\$2,206	\$2,370	\$2,650	\$2,860
Total clients served	2,009	2,043	2,088	2,600	2,200

## Administrative Services

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

<b>Key Measures</b>	<b>FY12 Actual</b>	<b>FY13 Actual</b>	<b>FY14 Actual</b>	<b>FY15 Adopted</b>	<b>FY16 Adopted</b>
Change in fee revenue received from prior fiscal year	+32.4%	-2.6%	+1.9%	+2.4%	-3.7%
Customers rating services as helpful	—	95%	96%	95%	95%

<b>Program Activities &amp; Workload Measures</b> (Dollar amounts expressed in thousands)	<b>FY12 Actual</b>	<b>FY13 Actual</b>	<b>FY14 Actual</b>	<b>FY15 Adopted</b>	<b>FY16 Adopted</b>
<b>Accounting and Procurement</b>	\$1,116	\$1,230	\$1,183	\$1,037	\$1,007
Fees collected	\$5.43M	\$5.29M	\$5.39M	\$5.00M	\$5.20M
<b>Management Information Systems</b>	\$850	\$633	\$863	\$970	\$957
Customers rating services as helpful	95%	94%	97%	90%	94%
<b>Human Resources Management</b>	\$188	\$175	\$189	\$195	\$20
<b>Leadership and Management Oversight *</b>	\$1,088	\$1,128	\$1,190	\$1,162	\$1,272
Total agency clients served	7,661	8,295	8,818	8,100	8,200

\* FY12-FY14 Includes Office of Executive Director Program Totals (see General Overview, Item D)





## A. Budget Initiatives

### 1. Increase General Government Application Support

Expenditure	\$40,000
Revenue	\$0
General Fund Impact	\$40,000
FTE Positions	0.00

- a. **Description** - This initiative funds 100% of the increase in maintenance support of the Human Services technology systems. The total increase for CS in FY16 is \$40,000. The maintenance is funded by the general fund and the budget is located in the 4000 series, providing revenue to the Information Technology internal service fund.
- b. **Service Level Impacts** - Existing service levels will be maintained.

## All Programs

### A. Budget Initiatives

#### 1. Budget Reconciliation

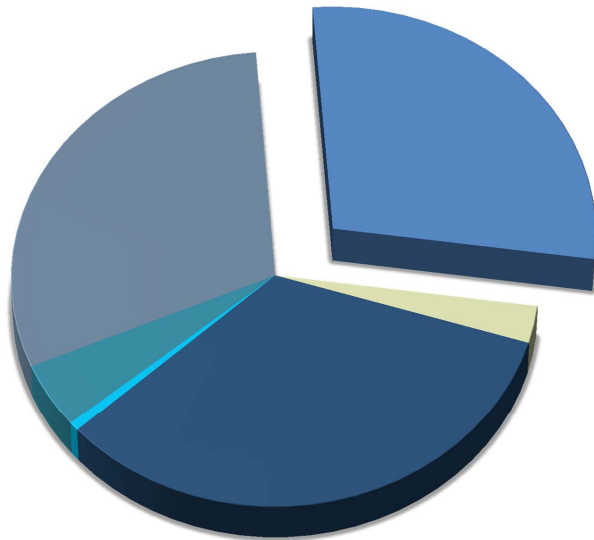
Expenditure	\$261,290
Revenue	\$261,290
General Fund Impact	\$0
FTE Positions	0.0

- a. **Description** - Each year, CS completes a budget reconciliation of state and federal revenues to the state performance contract. \$261,290 in on-going revenue and expenditure support was identified through the FY15 reconciliation and was approved by [BOCS Resolution 14-608](#) on October 7, 2014. The \$261,290 in revenues and expenditures is included in each year of the Five-Year Plan, starting in FY16.
- b. **Service Level Impacts** - Existing service levels will be maintained.



## Mission Statement

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



**Human Services Expenditure Budget**  
\$127,023,673

**Expenditure Budget:**  
**\$36,005,103**

28.3% of Human Services

### Programs:

- Community Preservation & Development: \$2,614,598
- Housing Finance & Development: \$1,012,218
- Rental Assistance: \$32,368,177
- Housing Trust Fund: \$10,110

## 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



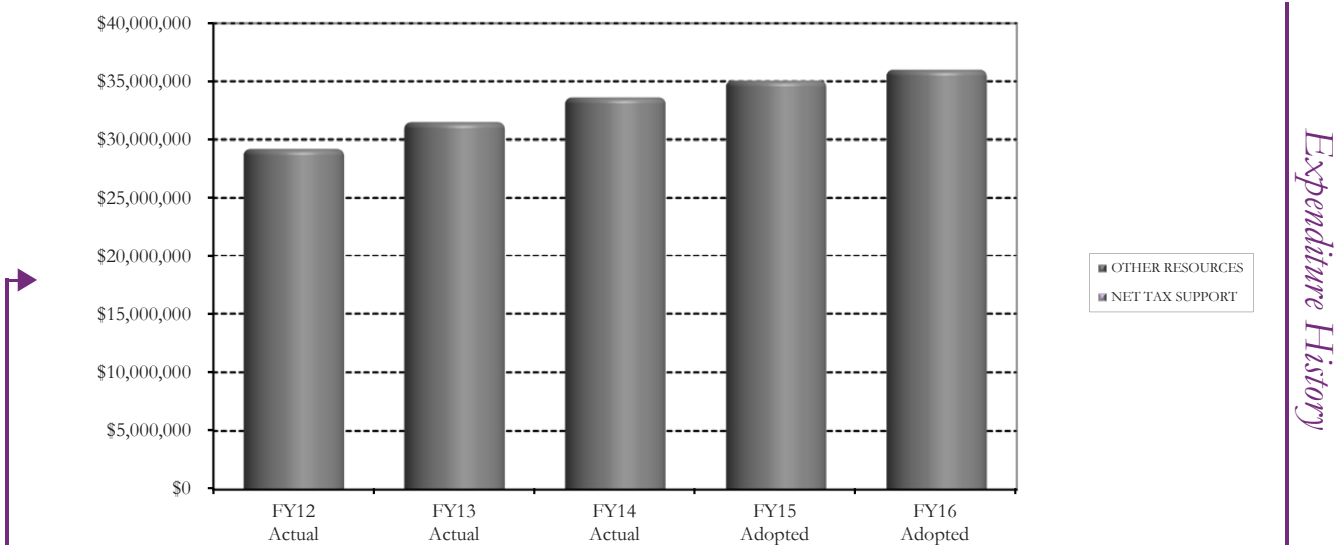
Expenditure by Program	FY12 Actual	FY13 Actual	FY14 Actual	FY15 Adopted	FY16 Adopted	% Change Adopt15/ Adopted16
1 Community Preservation & Development	\$2,288,111	\$1,631,369	\$2,025,785	\$4,879,746	\$2,614,598	(46.42%)
2 Housing Finance & Development	\$222,709	\$845,397	\$1,107,793	\$1,026,053	\$1,012,218	(1.35%)
3 Rental Assistance	\$29,029,790	\$29,535,724	\$29,528,434	\$29,169,603	\$32,368,177	10.97%
4 Transitional Housing Prop Management	\$131,688	\$187,376	\$105,207	\$0	\$0	—
5 Housing Trust Fund	\$9,640	\$10,350	\$16,445	\$10,000	\$10,110	1.10%
<b>Total Expenditures</b>	<b>\$31,681,938</b>	<b>\$32,210,216</b>	<b>\$32,783,664</b>	<b>\$35,085,402</b>	<b>\$36,005,103</b>	<b>2.62%</b>

### Expenditure by Classification

1 Personal Services	\$1,664,532	\$1,638,468	\$1,609,471	\$1,727,768	\$1,769,086	2.39%
2 Fringe Benefits	\$521,167	\$575,858	\$561,011	\$555,955	\$568,132	2.19%
3 Contractual Services	\$1,807,312	\$1,263,958	\$1,719,001	\$4,343,375	\$1,970,800	(54.63%)
4 Internal Services	\$130,283	\$144,903	\$128,732	\$111,533	\$100,034	(10.31%)
5 Purchase Goods & Supplies	\$27,305,097	\$28,497,419	\$28,585,863	\$28,239,623	\$31,467,386	11.43%
6 Capital Outlay	\$48,740	\$0	\$75,000	\$0	\$0	—
7 Leases and Rentals	\$20,469	\$21,499	\$26,795	\$30,880	\$43,654	41.37%
8 Transfers Out	\$184,338	\$68,111	\$77,791	\$76,268	\$86,011	12.77%
<b>Total Expenditures</b>	<b>\$31,681,938</b>	<b>\$32,210,216</b>	<b>\$32,783,664</b>	<b>\$35,085,402</b>	<b>\$36,005,103</b>	<b>2.62%</b>

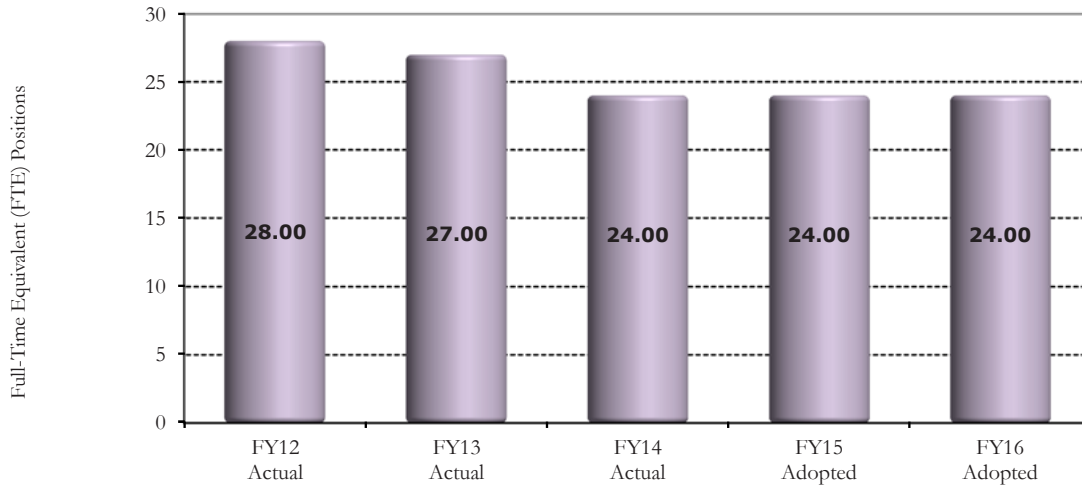
### Funding Sources

1 Revenue from Use of Money & Prop	\$69,870	\$28,538	(\$42,717)	\$15,000	\$0	(100.00%)
2 Charges for Services	\$3,287,989	\$4,402,407	\$5,436,086	\$5,124,233	\$7,251,147	41.51%
3 Miscellaneous Revenue	\$0	\$61,597	\$25,811	\$30,000	\$50,000	66.67%
4 Revenue From Commonwealth	\$27,654	\$0	\$0	\$0	\$0	—
5 Revenue From Federal Government	\$25,778,172	\$26,921,748	\$27,369,833	\$29,874,358	\$28,682,542	(3.99%)
6 Non-Revenue Receipts	\$4,889	\$2,561	\$4,439	\$0	\$0	—
8 Transfers In (Proffer Funds)	\$0	\$0	\$750,000	\$10,000	\$10,000	—
<b>Total Designated Funding Sources</b>	<b>\$29,168,574</b>	<b>\$31,416,851</b>	<b>\$33,543,452</b>	<b>\$35,053,591</b>	<b>\$35,993,689</b>	<b>2.68%</b>
Contribution to Fund Balance	\$0	\$0	\$831,914	\$0	\$0	—
Use of Fund Balance	\$2,461,828	\$726,122	\$0	\$0	\$0	—
<b>Net General Tax Support</b>	<b>\$51,536</b>	<b>\$67,243</b>	<b>\$72,126</b>	<b>\$31,811</b>	<b>\$11,414</b>	<b>(64.12%)</b>
<b>Net General Tax Support</b>	<b>0.16%</b>	<b>0.21%</b>	<b>0.22%</b>	<b>0.09%</b>	<b>0.03%</b>	





Staff History



Staff By Program

	FY12 Actual	FY13 Actual	FY14 Actual	FY15 Adopted	FY16 Adopted
1 Community Preservation & Development	4.68	3.30	4.33	4.33	4.32
2 Housing Finance & Development	1.26	0.98	0.92	0.92	1.23
3 Rental Assistance	21.65	21.74	18.69	18.69	18.38
4 Transitional Housing Prop Management	0.39	0.91	0.00	0.00	0.00
5 Housing Trust Fund	0.02	0.07	0.06	0.06	0.07
<b>Full-Time Equivalent (FTE) Total</b>	<b>28.00</b>	<b>27.00</b>	<b>24.00</b>	<b>24.00</b>	<b>24.00</b>

## Future Outlook

**Federal Budget Decisions Impact Local Economy** - Office of Housing & Community Development (OHCD) is a County agency that receives the majority of its funding from the federal government. OHCD operates the Community Development Block Grant (CDBG), Home Investment Partnerships program (HOME), Emergency Solutions Grant (ESG) and Housing Choice Voucher program (HCV). The largest of these programs is the HCV, which brings over \$29 million annually into the Prince William economy. OHCD continues to explore additional funding opportunities for both programmatic and administrative activities. Additional funding at the federal, state and local level will be necessary to expand our Family Self-Sufficiency activities that assist families in becoming self-reliant.

**More than 8,400 Families Waiting for Affordable Housing** - As federal lawmakers continue to find solutions to balance the federal budget, all indications are that funding for affordable housing will decline or remain level. The largest impact from decreased funding levels is still anticipated with the HVC program that provides rental assistance for low income families, many of whom are elderly and/or disabled. OHCD has only recently been able to invite elderly and disabled families from its waiting list since December 2010; we anticipate being able to provide assistance to 100 families.



**Community Development Funding** - Like the HVC program funding, the Community Development program funding is anticipated to decline or remain at current levels. OHCD hopes to continue to benefit from the County's continued population growth, as funding for these programs is formula driven by population, but the HOME and ESG programs are going to be reduced based on proposed congressional budgets. The HOME program provides assistance to first-time homebuyers and the ESG program provides funding to local non-profit organizations that provide homeless services. Any future reductions will affect our ability to assist community partners.

**Focus Shifts to Strengthening Family Sufficiency** - OHCD continues its efforts to expand family self-sufficiency activities to all program participants. Self-sufficiency efforts this past year include expanding outreach to community partners and expanding the program curriculum to focus on five key areas - education, employment readiness and entrepreneurship, financial fitness, health and wellness, and strengthening families. OHCD continues to look for opportunities to partner with County agencies and community partners; during FY15 we hosted our first job fair and additional financial workshops in collaboration with local non-profits and financial institutions.

## General Overview

- A. Internal Service Fund (ISF) Technology Budget** - The County annually allocates all technology costs to agencies through an ISF, using the approved cost basis for each technology activity. Technology activities include phone, radio and computer support, business systems support, GIS, web services, capital equipment replacement, and administration. In FY16 OHCD's technology bill decreased by \$8,987 to \$72,583.
- B. Annual Reconciliation of Federal Funding** - The County budget is adopted in April of each year, prior to final notification of the federal funding allocated to Prince William County. Available federal funds have been increased by \$1,336,313 and associated expenditures have been increased by \$1,315,916, resulting in a \$20,397 reduction in planned general fund support. The changes to federal funding are as follows: a \$2,540,635 reduction to reconcile to the Consolidated Annual Action Plan; a \$3,936,490 increase to reconcile with the Housing Choice Voucher Annual Contributions (HCVAC) contract; and a \$59,542 reduction to reconcile to the Housing Opportunities for Persons with AIDS (HOPWA) Grant.
- C. Compensation Increase** - Compensation adjustments totaling \$56,385 are made to support the following rate changes:
  - 5.0% Retiree Health;
  - -1.0% VRS employer rate for Plan 1 employees;
  - 7.7% Health insurance;
  - 3.2% Dental insurance;
  - 2.0% Pay Plan adjustment; and
  - 1.0% Salary adjustment to offset the required VRS contribution by Plan 1 and some Plan 2 employees.

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



## Program Summary

### Community Preservation & Development

The Community Preservation & Development Division administers two federal programs through HUD, the CDBG program and the ESG program. The County has a cooperative agreement with the Cities of Manassas and Manassas Park to conduct their housing and community development activities. A portion of the CDBG funds are set aside on a competitive basis for eligible outside agencies for specific eligible activities that meet CDBG National Objectives and further the Prince William Area's goals and objectives, as stated in the five year consolidated plan. The largest portion of CDBG funds are devoted to the rehabilitation of low and moderate income owner-occupied housing units. The ESG funding is provided to local shelters for 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 Dawson Beach property solely for serving the homeless. OHCD operates seven transitional housing units at Dawson Beach for families referred by local shelters.

Key Measures	FY12 Actual	FY13 Actual	FY14 Actual	FY15 Adopted	FY16 Adopted
Persons provided with housing and other related services - CDBG	795	361	529	361	529
Persons provided with homelessness prevention and emergency shelter services - ESG	1,344	1,169	1,172	1,169	1,172
Families assisted by OHCD with low-income housing	2,573	2,950	2,668	2,950	2,600
Families successfully completing the transitional housing program and moving to permanent housing	—	100%	84%	75%	75%

Program Activities & Workload Measures (Dollar amounts expressed in thousands)	FY12 Actual	FY13 Actual	FY14 Actual	FY15 Adopted	FY16 Adopted
<b>Housing Rehabilitation</b>	<b>\$1,684</b>	<b>\$1,111</b>	<b>\$1,623</b>	<b>\$3,230</b>	<b>\$1,516</b>
Substandard single-family housing units rehabilitated	12	13	17	20	17
<b>Community Improvement &amp; Housing Supportive Services</b>	<b>\$604</b>	<b>\$521</b>	<b>\$403</b>	<b>\$799</b>	<b>\$846</b>
Persons provided with homelessness prevention and emergency shelter services	1,344	1,169	1,172	1,169	1,172
Improvement projects managed	17	13	11	13	11
<b>Manage Transitional Housing at Dawson Beach</b>	<b>\$132</b>	<b>\$136</b>	<b>\$105</b>	<b>\$851</b>	<b>\$252</b>
Homeless families served	7	7	7	7	7



## Housing Finance & Development

Prince William County, and 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 providing down payment and closing cost assistance for residents of Prince William County and the cities of Manassas and Manassas Park. Also, at least 15% of the allocation is set aside for specific activities to be undertaken by a special type of non-profit called a Community Housing Development Organization (CHDO) that develops affordable housing for the community it serves.

Key Measures	FY12 Actual	FY13 Actual	FY14 Actual	FY15 Adopted	FY16 Adopted
Federal and state funds used to assist eligible households to become first-time homebuyers	\$56	\$446	\$729	\$446	\$729
Private mortgage financing generated on behalf of first-time homebuyers	\$200	\$1,600	\$1,000	\$1,600	\$1,000
Families assisted by OHCD with low-income housing	2,573	2,950	2,668	2,950	2,600

Program Activities & Workload Measures (Dollar amounts expressed in thousands)	FY12 Actual	FY13 Actual	FY14 Actual	FY15 Adopted	FY16 Adopted
<b>Homeownership Assistance</b>	\$223	\$845	\$1,108	\$1,026	\$1,012
Families assisted to become first-time homebuyers	1	9	13	7	13
Affordable housing units added, with counseling to the families that rent or purchase the units	—	—	NA	25	11

### A. Budget Reductions

#### 1. Eliminate One Community Partnership - OpenDoor Housing Fund (OpenDoor)

Expenditure	(\$11,414)
Revenue	\$0
General Fund Impact	\$0
FTE Positions	0

- a. **Description** - OpenDoor is no longer part of the community partner program after joining forces with Catholics for Housing to address affordable housing issues. Households that would have been assisted by OpenDoor can now work with Catholics for Housing. The funding previously directed to OpenDoor has been shifted to support salaries in the Rental Assistance program.



## Rental Assistance

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

Key Measures	FY12 Actual	FY13 Actual	FY14 Actual	FY15 Adopted	FY16 Adopted
Eligible elderly and disabled persons in HCVP provided with rental assistance	40%	40%	41%	40%	40%
Family Self Sufficiency Grant families who successfully meet program goals	95%	88%	91%	90%	90%
Rental income paid to local property owners on behalf of families	\$24M	\$24M	\$23M	\$23M	\$25M
Annual HCVP performance evaluation score from HUD	100%	100%	100%	98%	98%
Families assisted by OHCD with low-income housing	2,573	2,950	2,668	2,950	2,600

Program Activities & Workload Measures (Dollar amounts expressed in thousands)	FY12 Actual	FY13 Actual	FY14 Actual	FY15 Adopted	FY16 Adopted
Housing Assistance Program Payments	\$27,181	\$27,709	\$27,752	\$27,425	\$30,111
Families provided with rental assistance	2,248	2,243	2,139	1,900	2,000
Housing Assistance Program Administration	\$1,848	\$1,827	\$1,777	\$1,744	\$2,257
Participant eligibility determinations	2,098	2,071	1,965	1,971	1,965

### A. Budget Initiatives

#### 1. Filing System

Expenditure	\$150,000
Revenue	\$150,000
General Fund Impact	\$0
FTE Positions	0.00

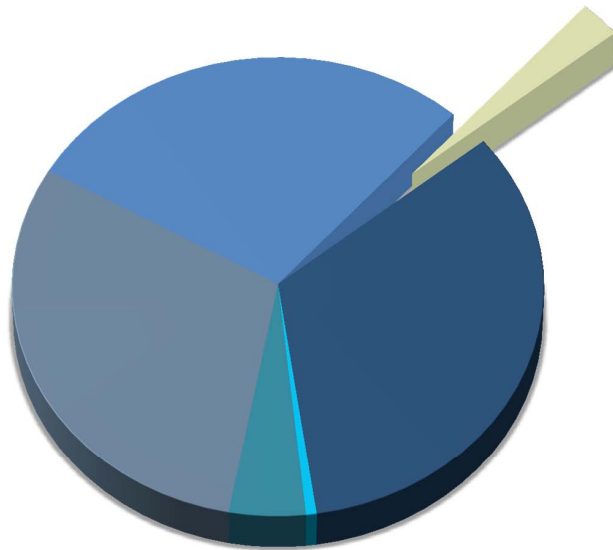
- a. **Description** - This initiative funds the purchase of a new filing system for the Rental Assistance program.
- b. **Service Level Impacts** - Existing service levels are maintained.





## Mission Statement

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



**Human Services Expenditure Budget**  
\$127,023,673

**Expenditure Budget:**  
**\$3,323,536**

2.6% of Human Services

**Programs:**

- Maternal & Child Health: \$744,634
- General Medicine: \$1,519,707
- Dental Health: \$130,630
- Environmental Health: \$763,870
- Administration/Emergency Preparedness: \$164,695

## Mandates

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

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

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

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



## Expenditure and Revenue Summary



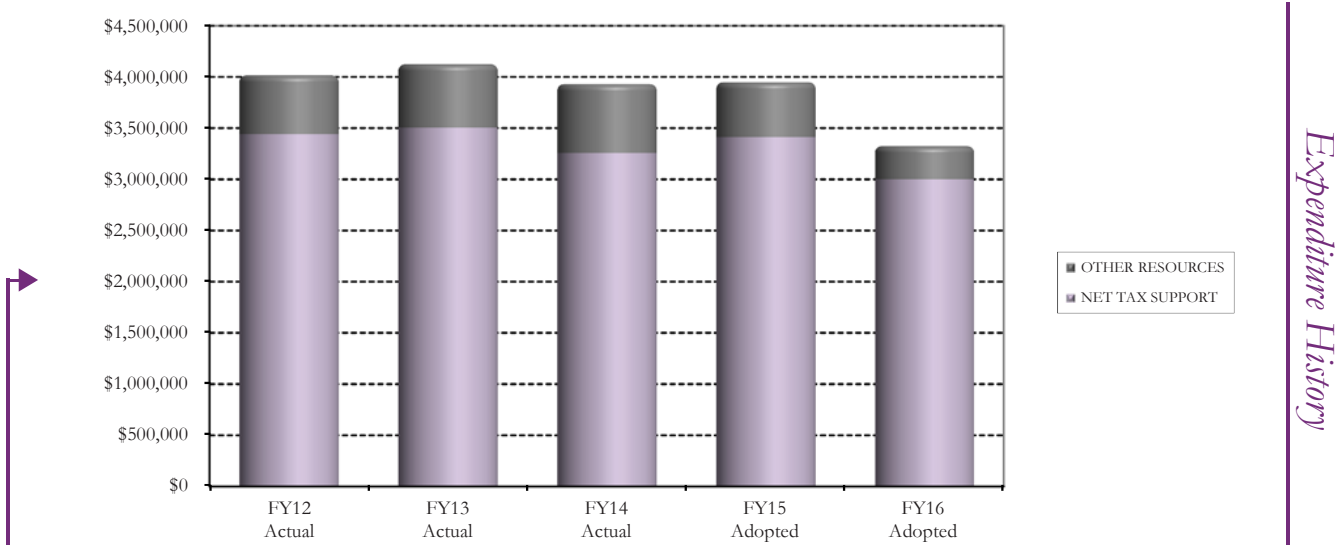
<b>Expenditure by Program</b>	<b>FY12 Actual</b>	<b>FY13 Actual</b>	<b>FY14 Actual</b>	<b>FY15 Adopted</b>	<b>FY16 Adopted</b>	<b>% Change Adopt15/ Adopted16</b>
1 Maternal & Child Health	\$1,161,345	\$1,207,706	\$1,159,877	\$1,139,424	\$744,634	(34.65%)
2 General Medicine	\$1,658,110	\$1,664,790	\$1,595,434	\$1,632,991	\$1,519,707	(6.94%)
3 Dental Health	\$149,475	\$155,468	\$149,205	\$149,205	\$130,630	(12.45%)
4 Environmental Health	\$867,137	\$895,781	\$857,588	\$858,323	\$763,870	(11.00%)
5 Administration/Emergency Preparedness	\$178,172	\$199,616	\$167,605	\$168,031	\$164,695	(1.99%)
<b>Total Expenditures</b>	<b>\$4,014,239</b>	<b>\$4,123,361</b>	<b>\$3,929,709</b>	<b>\$3,947,974</b>	<b>\$3,323,536</b>	<b>(15.82%)</b>

### Expenditure by Classification

1 Personal Services	\$249,210	\$214,808	\$185,859	\$223,625	\$224,581	0.43%
2 Fringe Benefits	\$71,071	\$68,134	\$68,753	\$76,928	\$83,896	9.06%
3 Contractual Services	\$520	\$461	\$88	\$1,815	\$1,415	(22.04%)
4 Internal Services	\$33,785	\$39,645	\$42,876	\$22,583	\$28,863	27.81%
5 Purchase Goods & Supplies	\$3,659,653	\$3,800,314	\$3,632,134	\$3,623,023	\$3,083,218	(14.90%)
6 Recovered Costs/Budgeted Savings	\$0	\$0	\$0	\$0	(\$98,437)	—
<b>Total Expenditures</b>	<b>\$4,014,239</b>	<b>\$4,123,361</b>	<b>\$3,929,709</b>	<b>\$3,947,974</b>	<b>\$3,323,536</b>	<b>(15.82%)</b>

### Funding Sources

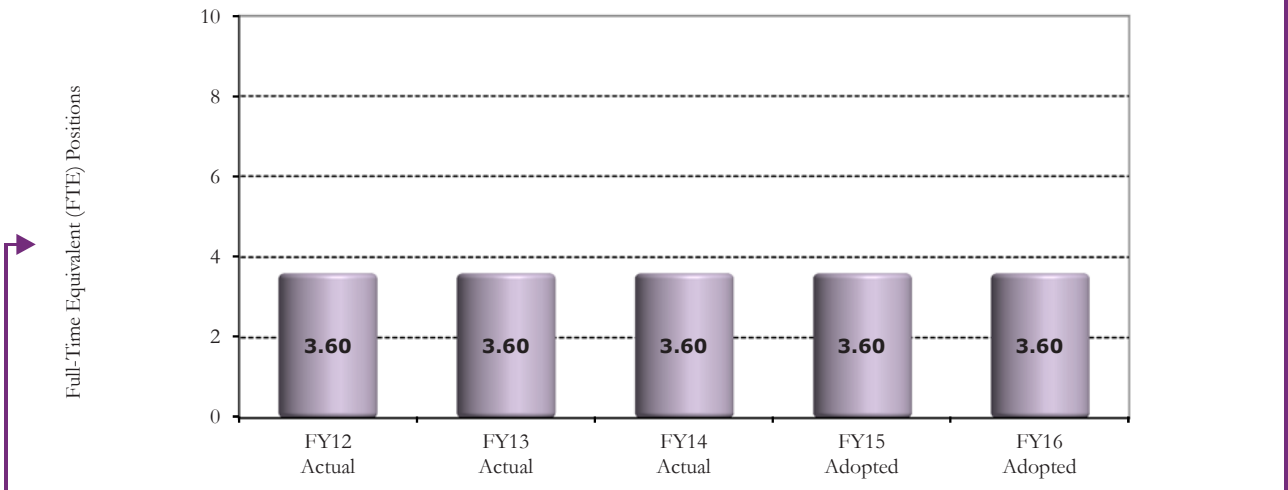
1 Permits, Privilege Fees & Regular Licenses	\$158,319	\$167,028	\$176,746	\$151,013	\$176,746	17.04%
2 Non-Revenue Receipts	\$96	\$0	\$0	\$0	\$0	—
3 Revenue From Other Localities	(\$43,848)	(\$41,389)	\$198,347	\$156,158	(\$81,762)	(152.36%)
4 Revenue From Commonwealth	\$458,800	\$492,932	\$296,838	\$228,351	\$228,397	0.02%
<b>Total Designated Funding Sources</b>	<b>\$573,367</b>	<b>\$618,571</b>	<b>\$671,931</b>	<b>\$535,522</b>	<b>\$323,381</b>	<b>(39.61%)</b>
<b>Net General Tax Support</b>	<b>\$3,440,872</b>	<b>\$3,504,789</b>	<b>\$3,257,777</b>	<b>\$3,412,452</b>	<b>\$3,000,155</b>	<b>(12.08%)</b>
<b>Net General Tax Support</b>	<b>85.72%</b>	<b>85.00%</b>	<b>82.90%</b>	<b>86.44%</b>	<b>90.27%</b>	



Expenditure History



Staff History



Staff By Program

	FY12 Actual	FY13 Actual	FY14 Actual	FY15 Adopted	FY16 Adopted
1 Maternal & Child Health	0.00	0.00	0.00	0.00	0.00
2 General Medicine	3.00	3.00	3.00	3.00	3.00
3 Dental Health	0.00	0.00	0.00	0.00	0.00
4 Environmental Health	0.60	0.60	0.60	0.60	0.60
5 Administration/Emergency Preparedness	0.00	0.00	0.00	0.00	0.00
<b>Full-Time Equivalent (FTE) Total</b>	<b>3.60</b>	<b>3.60</b>	<b>3.60</b>	<b>3.60</b>	<b>3.60</b>

Note: Figures are for County positions only and do not include State authorized positions totaling 92.00 FTE.

## Future Outlook

**Population-based Public Health** - Due to decreasing State and Federal funding, the PWHD will continue to address public health issues through a population-based focus by bringing collaborators together to share their expertise and resources. These collaborations may include community stakeholders or regional stakeholders; many of our residents do not work, live and play only in this community.

**Health Equity and Health Literacy** - The increasing diversity of the community presents the need to ensure that health equity and health literacy are considered in all local health programs and policies in order to obtain the best health outcomes.

**Emerging Communicable Diseases** - Due to the global society we live in, the possibility of new emerging communicable diseases emphasizes the importance of more intense public health disease surveillance so the PWHD can rapidly identify changes in disease trends and educate our community partners to mitigate transmission in order to protect the health of the community. The Ebola outbreak is an example of an emerging global communicable disease event.



**Collaboration and Better Health** - Health is impacted by many factors besides access to adequate health care, such as education, socioeconomic status, housing, land use, and the environment. Therefore, the PWHD will work towards a more collaborative approach to health by encouraging the consideration of health consequences of potential locally adopted policies.

**Rabies Prevention and Control** - Rabies is a fatal disease. Cats are the most common domestic animal diagnosed with rabies. The issue with cats is that they are harder to locate or identify which can result in many people receiving the Post Exposure Rabies Prophylaxis. Dogs can be identified more easily and subsequently observed for the quarantine period. To prevent and control rabies, dogs, cats, ferrets, and selected livestock need to be vaccinated against rabies. Issuing licenses to cats, similar to dogs, can ensure they receive rabies vaccines to help control the spread of rabies and protect humans from exposure to rabies and the requirement of Post Exposure Rabies Prophylaxis shots.

## General Overview

- A. 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 County matching funds. The County enters into an annual agreement with the Virginia Department of Health to provide the 45% funding necessary to operate PWHD. The County also provides local support above the match amount for certain optional services. In FY15, State funding for the PWHD was \$2,390,716, County match funding was \$1,956,040 and local support was \$1,379,117. The County provided an additional \$612,817 in local support for staffing, operations and community partnerships above the amount included in the annual agreement. The City of Manassas and Manassas Park provide reimbursement to the County for services rendered based on a shared services agreement with the County. The FY15 reimbursement totaled \$156,158. Total FY15 State and County expenditures for the PWHD were \$6,338,690, with the County providing a total of \$3,947,974.
- B. Internal Service Fund (ISF) Technology Budget** - The County annually allocates all technology costs to agencies through an ISF, using the approved cost basis for each technology activity. Technology activities include phone, radio and computer support, business systems support, GIS, web services, capital equipment replacement, and administration. In FY16 Public Health's technology bill increased by \$6,280 to \$17,600.
- C. Shift Funds to Area Agency on Aging** - In FY12, Area Agency on Aging shifted \$14,958 into Public Health's budget for elderly dental care services. However, in FY14 the State eliminated funding for local dental health programs. The \$14,958 is returned to Area Agency on Aging for services to the elderly.
- D. Budgeted Savings** - For over two decades, the County has had a long-standing practice of using year-end savings as a funding source in the next year's budget. Utilizing these savings has provided significant tax bill savings for County residents. The three major credit rating agencies have recently revised their rating criteria used to evaluate the creditworthiness of jurisdictions using bond proceeds to finance capital infrastructure projects. Under the new criteria year-end savings are considered to be one-time funds, which should not be used to support ongoing expenditures. In order to address this issue, the FY2016 Budget includes a 2.5% reduction to the general fund portion of agency expenditure budgets (with the exception of state courts and magistrates), totaling \$13.0 million. This reduction has been implemented by adding a negative budget line item to agencies, similar to the budgeted salary lapse. The savings amount for Public Health is \$98,437.
- E. Zero Base Budget Analysis** - During FY15, a review of the Public Health base budget was completed. The analysis showed that the combined effect of departmental attrition levels, increased state and local revenues, the reduction of seasonal and contractual employees and office efficiency savings would allow the County to eliminate the salary supplement payment that had been included in previous years. The FY16 budgeted expenditures for Public Health are reduced by \$525,247 and agency revenues are increased by \$25,779. Existing service levels are maintained.



F. **Compensation Increase** - Compensation adjustments totaling \$9,777 are made to support the following rate changes:

- 5.0% Retiree Health;
- -1.0% VRS employer rate for Plan 1 employees;
- 7.7% Health insurance;
- 3.2% Dental insurance;
- 2.0% Pay Plan adjustment; and
- 1.0% Salary adjustment to offset the required VRS contribution by Plan 1 and some Plan 2 employees.

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

## Program Summary

### Maternal & Child Health

This program improves the health of women and children in the Prince William Health District by assessing their needs and assuring that quality services are accessible. This is accomplished through direct services, program monitoring and evaluation, public and customer education, consultation and training, and building and maintaining public/private partnerships. These services assure the implementation of evidence-based practices, as well as capacity building and strengthening of the local infrastructure to meet the health needs of women and children. The client base for direct services in this program is low-income women and children who are uninsured or underinsured. Monitoring and education efforts serve the population at large.

Key Measures	FY12 Actual	FY13 Actual	FY14 Actual	FY15 Adopted	FY16 Adopted
Female clients of reproductive age seen in Health District clinics who have documented evidence of multivitamin with folic acid counseling	—	6%	26%	24%	30%
Children born in PWC with low birth weight	8%	7%	6.6%	7%	6.5%
Infant deaths per 1,000 live births	6.0	4.2	6.0	5.6	5.6



<b>Program Activities &amp; Workload Measures</b> (Dollar amounts expressed in thousands)	<b>FY12 Actual</b>	<b>FY13 Actual</b>	<b>FY14 Actual</b>	<b>FY15 Adopted</b>	<b>FY16 Adopted</b>
<b>Prenatal Care</b>	\$690	\$718	\$689	\$689	\$446
Women served with prenatal care	696	366	278	350	280
<b>Well Child Care</b>	\$20	\$20	\$20	—	—
Children screened by Pediatric Primary Care Project	4,396	565	601	—	—
<b>Women’s Wellness</b>	\$402	\$418	\$402	\$402	\$299
Women served in women’s wellness clinics	1,665	1,671	1,493	1,710	1,570
<b>Women, Infants and Children (WIC)</b>	\$49	\$51	\$49	\$49	\$0
Participants in the WIC program at the end of the fiscal year	7,323	8,412	8,198	8,833	8,600

### General Medicine

This program improves the health of the community by:

- 1) monitoring, investigating, controlling, and reporting the spread of communicable diseases including tuberculosis, vaccine preventable diseases, sexually transmitted diseases, and other communicable diseases, especially emerging diseases of public health significance;
- 2) collaborating with community partners to assess and address environmental strategies and system changes that will prevent chronic diseases, encourage healthy lifestyles, and improve access to care for persons with health disparities;
- 3) working with County agencies and community partners to ensure that persons requiring nursing home placement or in-home personal care services are screened and referred to the appropriate service.

The client base for this program is the entire population of the Prince William Health District.

<b>Key Measures</b>	<b>FY12 Actual</b>	<b>FY13 Actual</b>	<b>FY14 Actual</b>	<b>FY15 Adopted</b>	<b>FY16 Adopted</b>
Pre-admission nursing home screenings completed within 45 days	NA	43%	59%	70%	75%
Patients completing tuberculosis preventive therapy treatment	79%	85%	90%	90%	90%
Vaccine-preventable disease cases per 100,000 population	11.7	14.9	10.9	14.9	10.9



<b>Program Activities &amp; Workload Measures</b> (Dollar amounts expressed in thousands)	<b>FY12 Actual</b>	<b>FY13 Actual</b>	<b>FY14 Actual</b>	<b>FY15 Adopted</b>	<b>FY16 Adopted</b>
<b>Sexually Transmitted Disease and AIDS Services</b>	\$286	\$297	\$285	\$285	\$240
Persons seen for sexually transmitted disease services	1,405	1,312	1,435	1,400	1,500
Persons served by AIDS drug assistance services	142	173	172	140	170
<b>Other Communicable Disease Services</b>	<b>\$989</b>	<b>\$971</b>	<b>\$919</b>	<b>\$948</b>	<b>\$897</b>
Patients receiving tuberculosis preventive therapy	122	146	169	130	170
Suspected tuberculosis follow-ups	151	248	166	250	170
<b>Chronic Disease Services</b>	<b>\$116</b>	<b>\$121</b>	<b>\$116</b>	<b>\$116</b>	<b>\$113</b>
Persons screened for nursing home pre-admission and personal care services	413	448	590	450	600
<b>Primary Health Care Services</b>	<b>\$267</b>	<b>\$275</b>	<b>\$275</b>	<b>\$284</b>	<b>\$270</b>
Clients served by community partners *	5,650	5,264	5,527	16,071	5,161

\* Note - The clients served count has been refined and a consistent methodology has been applied to all of the community partners.

## Dental Health

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

<b>Key Measures</b>	<b>FY12 Actual</b>	<b>FY13 Actual</b>	<b>FY14 Actual</b>	<b>FY15 Adopted</b>	<b>FY16 Adopted</b>
Medicaid eligible children with at least one sealant applied to a permanent molar tooth	10%	10%	11%	12%	12%
Value of services delivered	635,775	616,529	153,224	280,000	280,000

<b>Program Activities &amp; Workload Measures</b> (Dollar amounts expressed in thousands)	<b>FY12 Actual</b>	<b>FY13 Actual</b>	<b>FY14 Actual</b>	<b>FY15 Adopted</b>	<b>FY16 Adopted</b>
<b>Dental Care</b>	<b>\$149</b>	<b>\$155</b>	<b>\$149</b>	<b>\$149</b>	<b>\$131</b>
Total pediatric patient visits	1,952	1,829	628	840	840



## Environmental Health

This program enforces state and local codes and regulations designed to protect the public health and safety of all residents of and visitors to the Prince William area. This is accomplished by enforcing regulations pertaining to food, food establishments, day care facilities, hotels, summer camps, campgrounds, swimming pools, private wells, onsite sewage disposal systems, and other environmental health laws. Regulatory activities include permitting, inspections, testing, monitoring, and legal action when voluntary compliance is not achieved.

Key Measures	FY12 Actual	FY13 Actual	FY14 Actual	FY15 Adopted	FY16 Adopted
Food establishments in PWC without founded complaints of food borne illness	100%	100%	99%	98%	98%
Septic tank owners in compliance with Chesapeake Bay Preservation Act	74%	76%	73%	75%	75%
Discharge sewage systems in compliance with state regulations	57%	47%	54%	70%	70%

Program Activities & Workload Measures (Dollar amounts expressed in thousands)	FY12 Actual	FY13 Actual	FY14 Actual	FY15 Adopted	FY16 Adopted
<b>On-site Sewage System Permits and Maintenance</b>	\$234	\$236	\$224	\$231	\$220
New on-site sewage applications completed	85	98	147	100	120
<b>Water Supply Protection</b>	\$64	\$67	\$64	\$64	\$63
Well samples collected for bacterial contamination	143	93	129	120	120
Repairs to on-site systems (remedial and preventive)	290	265	253	290	290
<b>Inspection Services</b>	\$399	\$413	\$400	\$395	\$340
Food establishment inspections	1,854	1,755	1,580	2,100	2,100
<b>Environmental Complaint Investigations</b>	\$97	\$103	\$97	\$95	\$93
Total environmental complaints investigated	201	287	250	250	250
<b>Rabies Control</b>	\$73	\$76	\$73	\$73	\$48
Animal quarantines completed	337	473	540	425	475





### Administration/Emergency Preparedness

The Administration/Emergency Preparedness program integrates state, regional, and local jurisdictions' public health emergency preparedness plans to respond to terrorism and other public health threats. In addition, this program supports the ability of hospitals and health care systems to prepare for and respond to bioterrorism and other public health and health care emergencies.

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

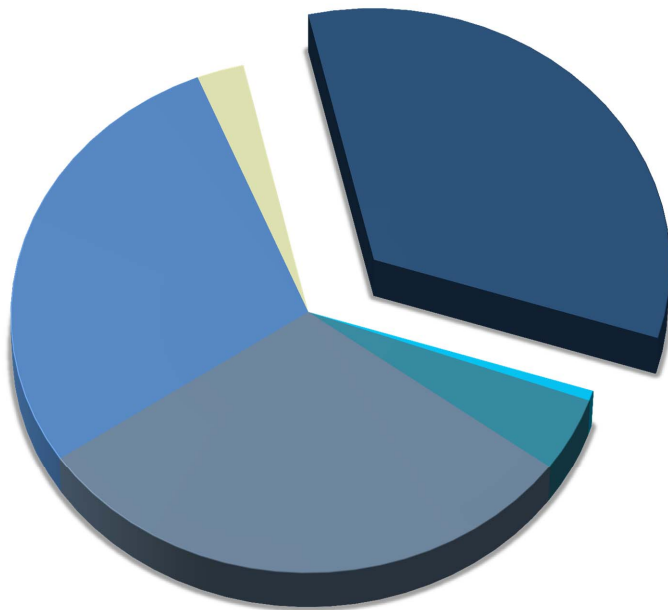
Key Measures	FY12 Actual	FY13 Actual	FY14 Actual	FY15 Adopted	FY16 Adopted
Increase in Medical Reserve Corps volunteers	42%	10%	10%	15%	10%
Community events during which emergency preparedness education is provided	NA	10	25	16	20
Customers reporting that they received the information or services they needed	NA	NA	97%	80%	97%

Program Activities & Workload Measures (Dollar amounts expressed in thousands)	FY12 Actual	FY13 Actual	FY14 Actual	FY15 Adopted	FY16 Adopted
Leadership and Management Oversight/ Emergency Preparedness	\$178	\$200	\$168	\$168	\$165
Public Health events that require emergency response plan activation	5	3	4	4	4
Medical Reserve Corps volunteers	496	545	598	600	660



## Mission Statement

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



**Human Services Expenditure Budget**  
\$127,023,673

**Expenditure Budget:**  
**\$42,536,745**

33.5% of Human Services

### Programs:

- Protective Services: \$3,749,825
- Child & Family Services: \$7,627,621
- Benefits, Employment & Child Care: \$10,789,414
- Homeless Emergency Shelter & Overnight Care: \$2,333,469
- Agency Administration: \$2,848,322
- Youth Residential Services: \$6,308,691
- At Risk Youth & Family Services: \$8,879,403

## Mandates

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

**State Code:** [63.2-1503](#); 22 Virginia Administrative Code (VAC) [40-700](#); 22 VAC [40-705](#); 22 VAC [40-720](#); 22 VAC [40-730](#) (Child Protective Services), [32.1-330](#), [63.2-1602](#) and [63.2-1804](#) (Adult Care), [63.2-319](#), [63.2-900](#), [63.2-903](#), [63.2-905](#), [63.2-1105](#), [2.2-5211](#) (Prevention & Assessments and Family Treatment), [2.2-5211](#) and [63.2-905](#) (Foster Care), [63.2-217](#), [63.2-319](#), [63.2-611](#), [63.2-616](#), [63.2-801](#) (Benefits and Child Care), [63.2-608](#) et seq, (Employment Services) [63.2-324](#) (Agency Director)

# Social Services



## Expenditure and Revenue Summary

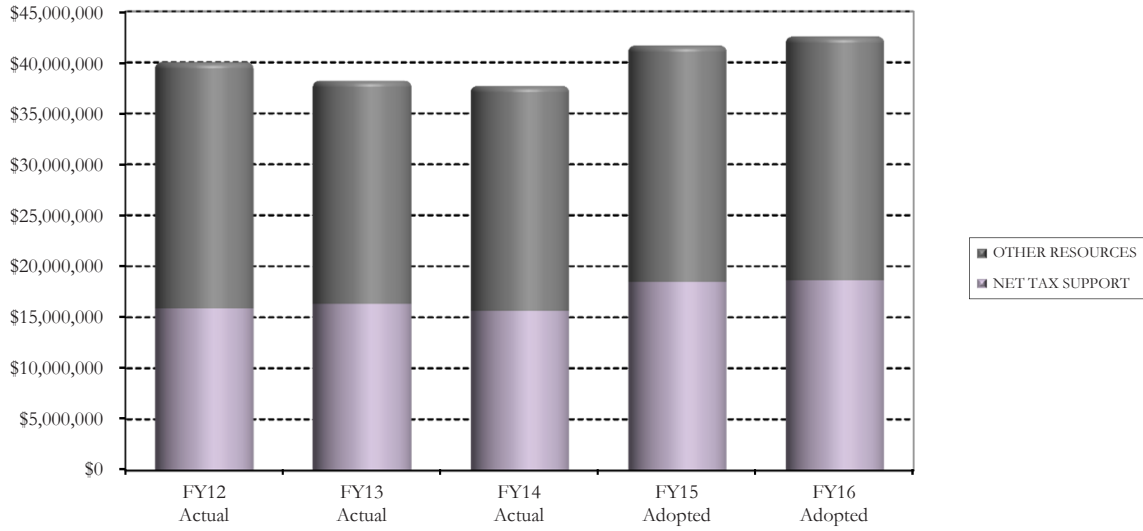


	FY12	FY13	FY14	FY15	FY16	% Change
<b>Expenditure by Program</b>	<b>Actual</b>	<b>Actual</b>	<b>Actual</b>	<b>Adopted</b>	<b>Adopted</b>	<b>Adopt15/ Adopted16</b>
1 Protective Services	\$0	\$0	\$0	\$3,615,981	\$3,749,825	3.70%
2 Child & Family Services	\$0	\$0	\$0	\$7,450,683	\$7,627,621	2.37%
3 Child Welfare	\$9,004,920	\$9,310,739	\$9,757,097	\$0	\$0	—
4 Adult Services	\$1,037,550	\$960,387	\$987,583	\$0	\$0	—
5 Benefits, Employment & Child Care	\$10,707,284	\$9,386,473	\$9,704,016	\$10,993,712	\$10,789,414	(1.86%)
6 Homeless Emergency Shelter & Overnight Care	\$1,961,992	\$1,650,126	\$1,791,100	\$1,902,513	\$2,333,469	22.65%
7 Agency Administration	\$3,409,605	\$3,332,043	\$3,609,817	\$3,032,312	\$2,848,322	(6.07%)
8 Youth Residential Services	\$5,029,111	\$5,275,463	\$5,254,071	\$5,465,585	\$6,308,691	15.43%
9 At Risk Youth & Family Services (ARYFS)	\$8,866,955	\$8,293,479	\$6,584,270	\$9,187,630	\$8,879,403	(3.35%)
<b>Total Expenditures</b>	<b>\$40,017,416</b>	<b>\$38,208,710</b>	<b>\$37,687,955</b>	<b>\$41,648,416</b>	<b>\$42,536,745</b>	<b>2.13%</b>
<b>Expenditure by Classification</b>						
1 Personal Services	\$16,726,086	\$16,812,789	\$17,531,776	\$18,086,235	\$19,706,018	8.96%
2 Fringe Benefits	\$5,271,648	\$5,833,015	\$5,876,700	\$6,136,929	\$6,355,911	3.57%
3 Contractual Services	\$1,460,349	\$1,409,378	\$1,575,308	\$1,887,518	\$1,978,757	4.83%
4 Internal Services	\$1,143,385	\$1,271,435	\$1,230,795	\$1,012,343	\$1,077,255	6.41%
5 Purchase Goods & Supplies	\$14,702,667	\$12,208,999	\$10,567,290	\$13,994,283	\$13,743,478	(1.79%)
6 Capital Outlay	\$46,324	\$22,926	\$57,899	\$55,855	\$95,316	70.65%
7 Leases & Rentals	\$58,967	\$61,846	\$60,099	\$60,074	\$60,074	0.00%
8 Recovered Costs/Budgeted Savings	\$0	\$0	\$0	\$0	(\$1,039,205)	—
9 Transfers Out	\$607,990	\$588,321	\$788,088	\$415,179	\$559,140	34.67%
<b>Total Expenditures</b>	<b>\$40,017,416</b>	<b>\$38,208,710</b>	<b>\$37,687,955</b>	<b>\$41,648,416</b>	<b>\$42,536,745</b>	<b>2.13%</b>
<b>Funding Sources</b>						
1 Fines & Forfeitures	\$70	\$0	\$0	\$0	\$0	—
2 Charges for Services	\$874,012	\$944,348	\$1,227,593	\$774,772	\$928,573	19.85%
3 Miscellaneous Revenue	\$50,344	\$102,220	\$125,102	\$44,400	\$44,400	0.00%
4 Revenue From Other Localities	\$14,868	\$18,156	\$25,340	\$15,687	\$936	(94.03%)
5 Revenue From Commonwealth	\$11,184,626	\$9,881,802	\$8,933,749	\$11,363,241	\$11,855,199	4.33%
6 Revenue From Federal Government	\$11,211,492	\$10,405,932	\$11,039,714	\$10,444,073	\$10,373,019	(0.68%)
7 Non-Revenue Receipts	\$0	\$599	\$0	\$0	\$0	—
8 Transfers In	\$803,371	\$529,514	\$726,397	\$536,435	\$681,589	27.06%
<b>Total Designated Funding Sources</b>	<b>\$24,138,782</b>	<b>\$21,882,570</b>	<b>\$22,077,895</b>	<b>\$23,178,608</b>	<b>\$23,883,716</b>	<b>3.04%</b>
<b>Net General Tax Support</b>	<b>\$15,878,633</b>	<b>\$16,326,140</b>	<b>\$15,610,059</b>	<b>\$18,469,808</b>	<b>\$18,653,029</b>	<b>0.99%</b>
<b>Net General Tax Support</b>	<b>39.68%</b>	<b>42.73%</b>	<b>41.42%</b>	<b>44.35%</b>	<b>43.85%</b>	

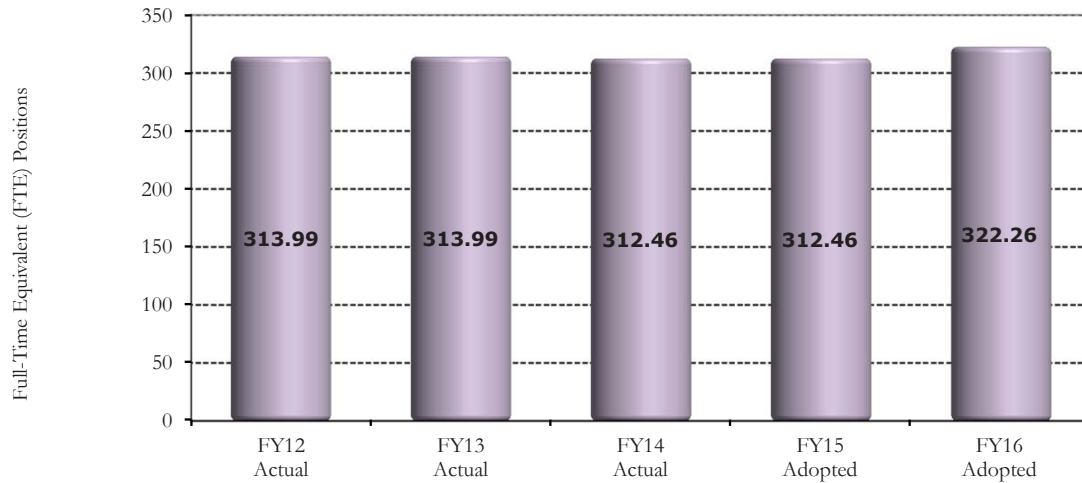
# Social Services



Expenditure History



Staff History



Staff By Program

	FY12 Actual	FY13 Actual	FY14 Actual	FY15 Adopted	FY16 Adopted
1 Protective Services	0.00	0.00	0.00	41.60	41.60
2 Child & Family Services	0.00	0.00	0.00	45.93	44.93
3 Child Welfare	78.33	79.53	79.53	0.00	0.00
4 Adult Services	5.80	6.00	6.00	0.00	0.00
5 Benefits, Employment & Child Care	120.53	121.53	120.00	131.00	130.00
6 Homeless Emergency Shelter & Overnight Care	4.30	4.30	3.30	4.30	3.80
7 Agency Administration	36.40	34.00	34.60	20.60	23.10
8 Youth Residential Services	64.03	64.03	64.03	63.03	72.83
9 At Risk Youth & Family Services (ARYFS)	4.60	4.60	5.00	6.00	6.00
<b>Full-Time Equivalent (FTE) Total</b>	<b>313.99</b>	<b>313.99</b>	<b>312.46</b>	<b>312.46</b>	<b>322.26</b>



## Future Outlook

**Homeless Services** - While the number of homeless in the community has remained stable, their needs have become more complex and the differences within the homeless population have become more defined. There are those who are temporarily in a homeless situation who desire support to get back in a home and to become self-supporting. There are also those known as the chronically homeless who may have mental health, substance abuse or criminal background issues that make them inappropriate or uninterested in using shelters. This makes the response to homelessness more complex and requires a community response with increased attention toward collaboration.

**Medicaid Benefits** - The number of persons applying and receiving benefits in Medicaid continues to rise. New applications for Medicaid increased 50% from FY13 to FY14. The Affordable Care Act increased the public's knowledge of and created additional application methods for Medicaid through a state Call Center as well as through the Federally Facilitated Marketplace. All applications must be treated equally and there have been challenges with the new Virginia Case Management System. More online and telephone interactions with applicants, instead of the traditional in-person interview, has required staff to adapt their skills and become more tech savvy.

**No Wrong Door** - A Human Services information and referral system that provides appropriate information immediately and in a seamless manner requires a realization that one entity does not have all of the answers or services needed by PWC residents. Developing a No Wrong Door system requires customers giving uniform consent reaching across providers, workers being knowledgeable about multiple services and systems and technology tools sharing data in real-time. There are national models for this and shifting toward these models will require training and agreement among public and private entities who keep the customer at the center of their decisions.

**Protective Services** - 80% of older adults with functional/cognitive limitations receive care while living in the community. 20% obtain assistance in facilities. Department of Social Services (DSS) and the Health District conduct In-home assessments, avg. four hours to complete, for persons who need to live in residential facilities or to waive living in an institution and remain in community at Medicaid's expense. Assessments have increased from 620 in FY13 to 801 in FY14. The increase is attributable to staff having to assess, using the adult assessment tool, children with Intellectual or Developmental Disabilities who are waiting for state-funded services but may apply for the Medicaid waiver, to receive community services.

**Youth Services** - The need for out-of-home placements has increased in the Juvenile Detention Center (JDC), the Molinari Shelter for Youth and the At-Risk Youth and Family Services (ARYFS) program. When the JDC and Shelter are full, court-involved youth must be transported to and reside in facilities a distance from PWC making family reunification difficult and taxpayer expenses higher. For troubled youth and families struggling with behaviors that require treatment services, ARYFS requires collaboration among human service, juvenile justice, PWC School and private providers to pool funding and service expertise. The goal is to keep the youth in the community and increase community-based services.

## General Overview

- A. Internal Service Fund (ISF) Technology Budget** - The County annually allocates all technology costs to agencies through an ISF, using the approved cost basis for each technology activity. Technology activities include phone, radio and computer support, business systems support, GIS, web services, capital equipment replacement, and administration. In FY16 the DSS technology bill increased by \$41,769 to \$965,084.
- B. Shift 1.0 FTE to Office of Executive Management** - On September 23, 2014, the Board of County Supervisors adopted [BOCS Resolution 14-585](#) which changed the structure of the Board of Social Services from an administrative board to an advisory board. This resolution also shifted a vacant position in the Youth Residential Services program within DSS to the Office of Executive Management (OEM) to create a Deputy County Executive for Human Services. This shift lowered the DSS authorized FTE count by 1.0.



- C. Merge At Risk Youth & Family Services into DSS** - In FY15, At Risk Youth & Family Services (ARYFS) became a program within DSS. Previously, ARYFS has been reported as a separate Human Services department. The Youth Residential Services program in DSS and ARYFS have always worked together to serve the youth in the county. This merger strengthened this partnership and resulted in more fiscal and other administrative support being available to the ARYFS program. DSS authorized FTE increased by 6.0 as a result of this merger.
- D. Eliminate Community Partner Donation** - At the end of FY14, ENS Youth Mentoring Partnership, a community partner in the ARYFS program, ceased operations. The families formerly served by this partner are receiving assistance from other entities in the community. The FY15 donation will not occur. The FY16 budget will no longer identify ENS Youth Mentoring Partnership as a community partner and the ARYFS program budget will be reduced \$34,357.
- E. Increase Software Maintenance Budget** - The FY15 Technology Improvement Plan (TIP) includes an upgrade for Harmony Software. Harmony is the automated management information system that supports three multi-disciplinary teams, hearing schedules, confidential client data bases, treatment services and financial data for at risk youth in the county. The Harmony maintenance expenditure will increase \$42,000 as a result of this system upgrade.
- F. Roll FY15 Social Services Budget Reconciliation ([BOCS Resolution 14-570](#)) into FY16** - Prince William County adopted its FY15 budget on April 29, 2014, via [BOCS Resolution 14-260](#). However, the County did not receive its final FY15 budget allocations from the Virginia Department of Social Services (VDSS) until May 2014. As a result each year the County must adjust its DSS budget to reflect the actual allocations awarded from all sources. If the funding adjustments are recurring, they are rolled forward into the subsequent fiscal year as part of the annual budget process. The FY15 reconciliation results in a \$712,004 revenue and expenditure budget increase in FY16. There is no additional general fund tax support.
- G. Budgeted Savings** - For over two decades, the County has had a long-standing practice of using year-end savings as a funding source in the next year's budget. Utilizing these savings has provided significant tax bill savings for County residents. The three major credit rating agencies have recently revised their rating criteria used to evaluate the creditworthiness of jurisdictions using bond proceeds to finance capital infrastructure projects. Under the new criteria year-end savings are considered to be one-time funds, which should not be used to support ongoing expenditures. In order to address this issue, the FY2016 Budget includes a 2.5% reduction to the general fund portion of agency expenditure budgets (with the exception of state courts and magistrates), totaling \$13.0 million. This reduction has been implemented by adding a negative budget line item to agencies, similar to the budgeted salary lapse. The savings amount for Social Services is \$1,039,205.
- H. Contract Increase for Hilda Barg Homeless Prevention Center (HPC)** - DSS operates the 32 bed HPC, a year-round facility which provides short-term housing for homeless families and individuals in need of shelter. DSS contracts with an outside vendor to provide oversight and day-to-day management of the facility. The contract was awarded last fiscal year; however, it has become clear the contract amount was insufficient to meet minimum requirements. A new Request for Proposal was issued in FY15 and it is anticipated the amount necessary to maintain appropriate staffing levels and to provide required services will be approximately \$200,000 higher than the current contract.
- I. State Aid Reduction** - On November 10, 2014, the General Assembly passed [HB 5010](#) which requires a \$30 million reduction in state aid to local governments in FY15. The Prince William County reductions for FY15 were \$754,683. These reductions were approved by the BOCS via [BOCS Resolution 14-736](#) and the expenditure reductions are being carried into FY16. Social Services' expenditure budget is reduced \$262,502. The reductions were in the Youth Residential and ARYFS programs. The revenue is restored in FY16.



J. **Compensation Increase** - Compensation adjustments totaling \$664,530 are made to support the following rate changes:

- 5.0% Retiree Health;
- -1.0% VRS employer rate for Plan 1 employees;
- 7.7% Health insurance;
- 3.2% Dental insurance;
- 2.0% Pay Plan adjustment; and
- 1.0% Salary adjustment to offset the required VRS contribution by Plan 1 and some Plan 2 employees.

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

## Program Summary

### Protective Services

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

Key Measures	FY12 Actual	FY13 Actual	FY14 Actual	FY15 Adopted	FY16 Adopted
Repeat adult abuse and neglect cases	7.3%	0%	0.74%	5%	5%
Repeat child abuse and neglect cases	1.15%	0.72%	0.70%	1%	1%

Program Activities & Workload Measures (Dollar amounts expressed in thousands)	FY12 Actual	FY13 Actual	FY14 Actual	FY15 Adopted	FY16 Adopted
<b>Child Protective Services (CPS) Investigations</b>	\$2,941	\$2,643	\$2,898	\$3,096	\$3,268
Reports of alleged child abuse/neglect received by CPS	4,373	4,389	4,515	4,600	4,645
CPS complaints investigated & assessments completed	2,216	2,348	2,296	2,560	2,350
Founded CPS cases	435	416	430	450	460
Average number of days to complete CPS investigations and assessments	68	90	55	52	50



<b>Program Activities &amp; Workload Measures (cont.)</b> (Dollar amounts expressed in thousands)	<b>FY12 Actual</b>	<b>FY13 Actual</b>	<b>FY14 Actual</b>	<b>FY15 Adopted</b>	<b>FY16 Adopted</b>
<b>Adult Protective Services (APS) Investigations</b>	\$537	\$446	\$451	\$520	\$482
Reports of alleged adult abuse/neglect received by APS	736	652	672	700	725
APS complaints investigated	470	439	478	475	500
Founded APS cases	226	153	135	180	150
Average number of days to complete APS investigations and assessments	55	55	55	50	48

### Child & Family Services

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

<b>Key Measures</b>	<b>FY12 Actual</b>	<b>FY13 Actual</b>	<b>FY14 Actual</b>	<b>FY15 Adopted</b>	<b>FY16 Adopted</b>
Repeat child abuse and neglect cases	1.15%	0.72%	0.70%	1%	1%
Increase permanency for foster care children	34%	32%	41%	38%	38%

<b>Program Activities &amp; Workload Measures</b> (Dollar amounts expressed in thousands)	<b>FY12 Actual</b>	<b>FY13 Actual</b>	<b>FY14 Actual</b>	<b>FY15 Adopted</b>	<b>FY16 Adopted</b>
<b>Foster Care</b>	\$4,617	\$4,877	\$5,122	\$5,144	\$5,238
Children served in custodial foster care	206	203	169	205	190
Authorized foster care families	84	90	85	100	105
<b>Family Treatment</b>	\$748	\$998	\$1,030	\$1,037	\$1,080
Families served	212	387	232	400	300
<b>Prevention and Assessments</b>	\$699	\$792	\$707	\$800	\$718
Families served	308	295	227	310	250
<b>Adult Care</b>	\$500	\$514	\$537	\$469	\$587
Medicaid long-term care assessments	379	620	800	700	850





## Benefits, Employment & Child Care

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

Key Measures	FY12 Actual	FY13 Actual	FY14 Actual	FY15 Adopted	FY16 Adopted
TANF participants engaged in work activities	49%	51%	52%	51%	51%
Medicaid cases reviewed within State mandated time frames (State mandate is 97%)	83%	90%	98%	97%	97%

Program Activities & Workload Measures (Dollar amounts expressed in thousands)	FY12 Actual	FY13 Actual	FY14 Actual	FY15 Adopted	FY16 Adopted
<b>Employment Services</b>	\$1,525	\$1,617	\$1,507	\$1,546	\$1,546
Persons served in VIEW	1,044	1,174	1,029	1,200	1,100
<b>Benefits and Child Care</b>	\$9,182	\$7,532	\$7,958	\$9,204	\$8,992
New applications processed annually (TANF, SNAP and Medicaid)	23,861	26,822	31,999	26,000	30,000
Average number of cases managed per month (TANF, SNAP and Medicaid)	40,710	42,291	48,091	42,600	45,000
<b>Fraud Investigations</b>	\$222	\$241	\$239	\$245	\$252
Fraud investigations completed	604	455	400	500	450
Funds recovered as a result of fraud investigations	\$208	\$184	\$523	\$200	\$300



## Homeless Emergency Shelter & Overnight Care

The Hilda Barg Homeless Prevention Center (HPC) is a 30 bed shelter for families and single adults that offers comprehensive services including case management, job readiness, mental health counseling and medical referrals. Homeless Services also provides a 48 bed overnight shelter Winter Shelter for single adult men and women each year November 1 through March 31, from 6:30 p.m. to 7:00 a.m. The purpose of the shelter is to protect homeless residents from hypothermia during the winter season. The Homeless Services program provides financial and technical support to several community partners and HUD recipients.

Key Measures	FY12 Actual	FY13 Actual	FY14 Actual	FY15 Adopted	FY16 Adopted
% of days the Winter Shelter is at capacity	5%	1%	3%	—	3%
% of days the HPC is at capacity	18%	13%	30%	—	58%
Point in time homeless count	467	447	445	410	410

Program Activities & Workload Measures (Dollar amounts expressed in thousands)	FY12 Actual	FY13 Actual	FY14 Actual	FY15 Adopted	FY16 Adopted
<b>Overnight Care</b>	<b>\$1,618</b>	<b>\$1,626</b>	<b>\$1,791</b>	<b>\$1,903</b>	<b>\$2,333</b>
Number of shelter bed nights (per facility):					
HPC	10,800	10,800	10,800	—	10,800
Winter Shelter	7,248	7,248	7,248	—	7,248
ACTS (community partner)	7,079	4,111	3,816	—	6,200
NVFS (community partner)	13,728	22,937	26,810	—	33,672
Total shelter bed nights	38,855	45,096	48,674	—	57,920
<b>Homeless Intervention</b>	<b>\$344</b>	<b>\$24</b>	<b>—</b>	<b>—</b>	<b>—</b>



## Agency Administration

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

Key Measures	FY12 Actual	FY13 Actual	FY14 Actual	FY15 Adopted	FY16 Adopted
Department wide customer satisfaction	90%	87%	87%	95%	90%
I can easily access facilities and services provided by DSS (community survey)	89%	89%	89%	89%	89%

Program Activities & Workload Measures (Dollar amounts expressed in thousands)	FY12 Actual	FY13 Actual	FY14 Actual	FY15 Adopted	FY16 Adopted
Social Services Director's Office	\$3,187	\$3,309	\$3,610	\$1,488	\$1,337
Technology Support	—	—	—	\$251	\$280
Personnel Support	—	—	—	\$292	\$314
Fiscal Support	—	—	—	\$1,001	\$918

## Youth Residential Services

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

Key Measures	FY12 Actual	FY13 Actual	FY14 Actual	FY15 Adopted	FY16 Adopted
Juvenile Pretrial Supervision clients re-offending while in the program	19%	14%	2%	12%	12%
Molinari Juvenile Shelter Services clients re-offending while in the program	9%	6%	0%	6%	5%
Rate of juvenile reconviction	23%	18%	NA	23%	21%



<b>Program Activities &amp; Workload Measures</b> (Dollar amounts expressed in thousands)	<b>FY12 Actual</b>	<b>FY13 Actual</b>	<b>FY14 Actual</b>	<b>FY15 Adopted</b>	<b>FY16 Adopted</b>
<b>Secure Detention</b>	\$3,412	\$3,617	\$3,621	\$3,744	\$4,661
Juveniles admitted	723	684	791	637	732
<b>Juvenile Pretrial Supervision</b>	\$447	\$473	\$410	\$452	\$315
Juveniles admitted	247	220	167	177	234
<b>Molinari Juvenile Shelter Services</b>	\$1,171	\$1,186	\$1,223	\$1,270	\$1,333
Juveniles admitted	226	229	202	230	219

**A. Budget Initiatives**

**1. Increase Staffing Levels to Comply with Federal Prison Rape Elimination Act**

Expenditure	\$667,773
Revenue	\$0
General Fund Impact	\$667,773
FTE Positions	10.80

**a. Description** - The Prison Rape Elimination Act (PREA) of 2003 is a federal civil statute focused on addressing sexual violence in juvenile facilities, jails, prisons, lockups, and other facilities. PREA established the National Prison Rape Elimination Commission, which set standards for the prevention, detection, and response to sexual misconduct in criminal and juvenile justice settings. PREA also required the Department of Justice to issue standards outlining the steps that facilities must take to address sexual misconduct prevention, detection, and response. Meeting these standards will require a significant and ongoing effort on the part of both management and staff. The most significant changes are listed below:

- Staffing standards have changed. The staffing ratio must be one security staff member to every eight residents. Previously the ratio had been one to ten with administrative staff being included in the ratio. This new standard will affect classroom supervision, intakes, discharges, video conferences, incident responses, room restrictions, professional visitations and phone calls.
- Separate holding and sleeping areas must be provided for residents identifying as transgender. These areas must be staffed by at least one person who is not counted in the staffing ratio. The transgender population has historically represented a small minority of JDC residents. However, when this situation occurs, we must provide the appropriate staffing level.
- DSS must appoint a PREA coordinator for the facility.
- Independent audits of facilities must be conducted every three years by a certified outside auditor. DSS estimates the cost of each audit will be \$10,000.
- Facilities without a certification of full compliance would be ineligible to receive federal block grants from the State. The FY15 block grant for JDC was approximately \$1.5 million.

**b. Service Level Impacts** - Existing service levels are maintained.



## At Risk Youth & Family Services (ARYFS)

ARYFS is a locally managed interagency program created by the state's Comprehensive Services Act for At-Risk Youth and Families in 1993. ARYFS enhances our local human service systems of care as an additional resource for the following public agencies in need of services for the clients: (1) DSS for Child Protection Services and Foster Care; (2) School Division for Special Education services outside of the public school system's resources; (3) Juvenile Court Services Unit for Probation and Parole; (4) Community Services for mental health treatment needs and (5) Health District for medical matters. All service plan decisions require a collaborative review and approval by a Family Assessment and Planning Team (FAPT) staffed by the previously listed public agencies, a private provider representative and a parent representative. ARYFS also provides collaborative oversight on the distribution and use of Promoting Safe & Stable Families (PSSF) grant funds for services that address family support, family preservation, time-limited family reunification and adoption promotion and support.

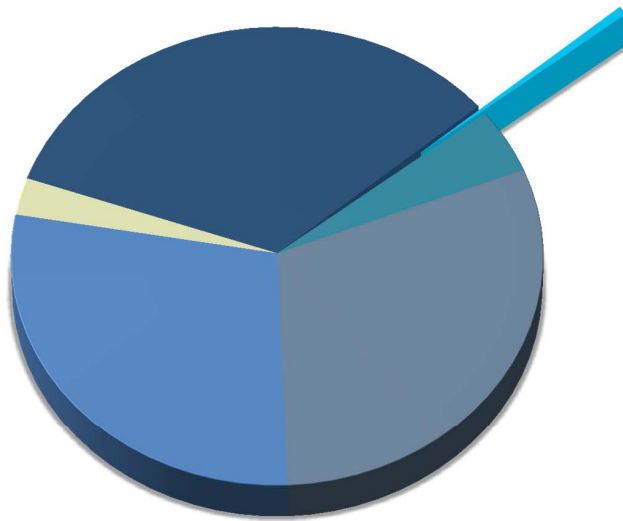
Key Measures	FY12 Actual	FY13 Actual	FY14 Actual	FY15 Adopted	FY16 Adopted
Clients with improved functional assessment score upon case closure	63%	60%	53%	50%	50%
Parent/guardians participating in inter-agency meetings who are satisfied with service delivery	94%	98%	99%	85%	90%
Residential treatment services completed within nine months	57%	60%	64%	62%	65%
Foster care youth served without use of residential services	83%	76%	78%	70%	75%
Social Services family reunification clients remaining reunified with their families after six months	100%	100%	100%	95%	95%

Program Activities & Workload Measures (Dollar amounts expressed in thousands)	FY12 Actual	FY13 Actual	FY14 Actual	FY15 Adopted	FY16 Adopted
<b>Community-Based Services</b>	\$2,330	\$2,528	\$3,000	\$2,234	\$1,990
Youth served	676	728	721	710	720
<b>Residential Services</b>	\$4,440	\$3,844	\$1,768	\$4,403	\$4,327
Youth served	132	110	108	105	105
<b>Foster Care</b>	\$1,633	\$1,450	\$1,283	\$1,988	\$1,963
Youth served	206	203	169	225	150
<b>Administration</b>	\$267	\$238	\$349	\$380	\$378
Total youth served (unduplicated)	739	741	729	750	700
<b>Prevention Services (PSSF)</b>	\$146	\$147	\$133	\$127	\$167
Clients served	1,449	1,258	236	130	251
<b>Early Intervention Services (PSSF)</b>	\$52	\$52	\$52	\$55	\$55
Clients served	52	44	55	49	80



## Mission Statement

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



**Expenditure Budget:**  
**\$799,565**

0.6% of Human Services

### Programs:

- Family Stability: \$630,002
- Environment & Natural Resources: \$169,563

**Human Services Expenditure Budget**  
\$127,023,673

## Mandates

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

**State Code:** Section [3.2-503](#)



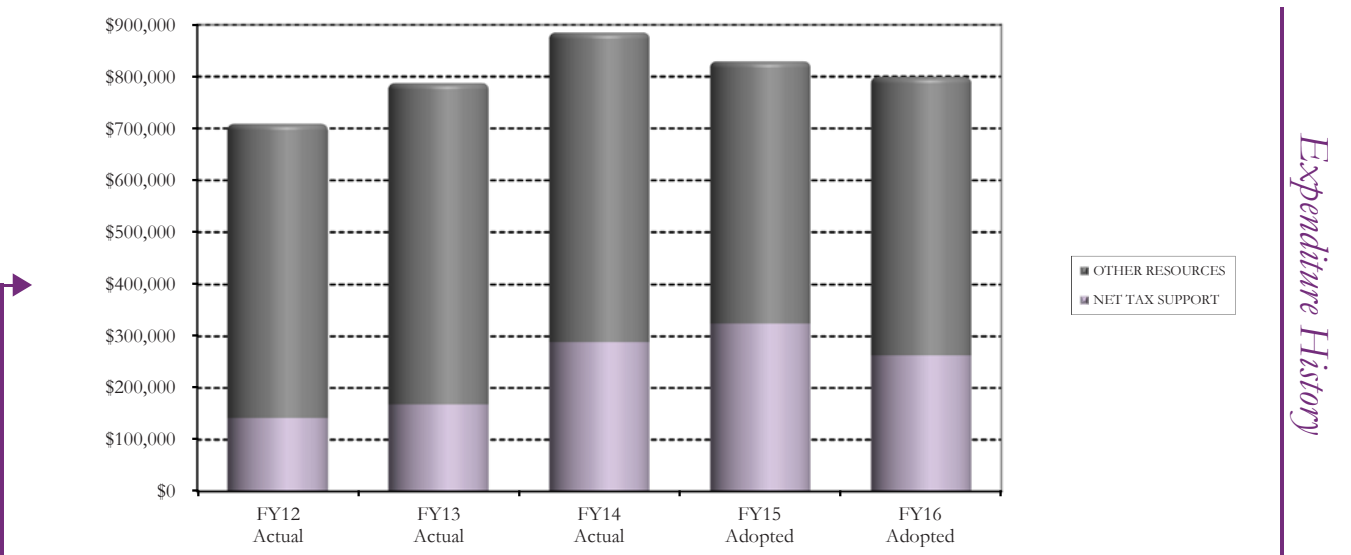
## Expenditure and Revenue Summary



<b>Expenditure by Program</b>	<b>FY12 Actual</b>	<b>FY13 Actual</b>	<b>FY14 Actual</b>	<b>FY15 Adopted</b>	<b>FY16 Adopted</b>	<b>% Change Adopt15/ Adopted16</b>
1 Family Stability	\$517,146	\$592,217	\$703,733	\$644,634	\$630,002	(2.27%)
2 Environment & Natural Resources	\$156,157	\$158,496	\$176,380	\$185,005	\$169,563	(8.35%)
3 Executive Management & Administration	\$3,413	\$3,598	\$5,152	\$0	\$0	—
4 Contributions	\$32,385	\$33,357	\$0	\$0	\$0	—
<b>Total Expenditures</b>	<b>\$709,101</b>	<b>\$787,668</b>	<b>\$885,265</b>	<b>\$829,639</b>	<b>\$799,565</b>	<b>(6.28%)</b>

<b>Expenditure by Classification</b>	<b>FY12 Actual</b>	<b>FY13 Actual</b>	<b>FY14 Actual</b>	<b>FY15 Adopted</b>	<b>FY16 Adopted</b>	<b>% Change Adopt15/ Adopted16</b>
1 Personal Services	\$499,019	\$548,029	\$598,168	\$575,779	\$588,225	2.16%
2 Fringe Benefits	\$99,471	\$116,676	\$131,986	\$119,260	\$123,086	3.21%
3 Contractual Services	\$1,693	\$774	\$0	\$1,650	\$1,650	0.00%
4 Internal Services	\$47,726	\$58,257	\$88,063	\$76,301	\$79,178	3.77%
5 Purchase Goods & Supplies	\$61,192	\$63,932	\$67,048	\$56,649	\$27,591	(51.29%)
6 Recovered Costs/Budgeted Savings	\$0	\$0	\$0	\$0	(\$20,165)	—
<b>Total Expenditures</b>	<b>\$709,101</b>	<b>\$787,668</b>	<b>\$885,265</b>	<b>\$829,639</b>	<b>\$799,565</b>	<b>(3.62%)</b>

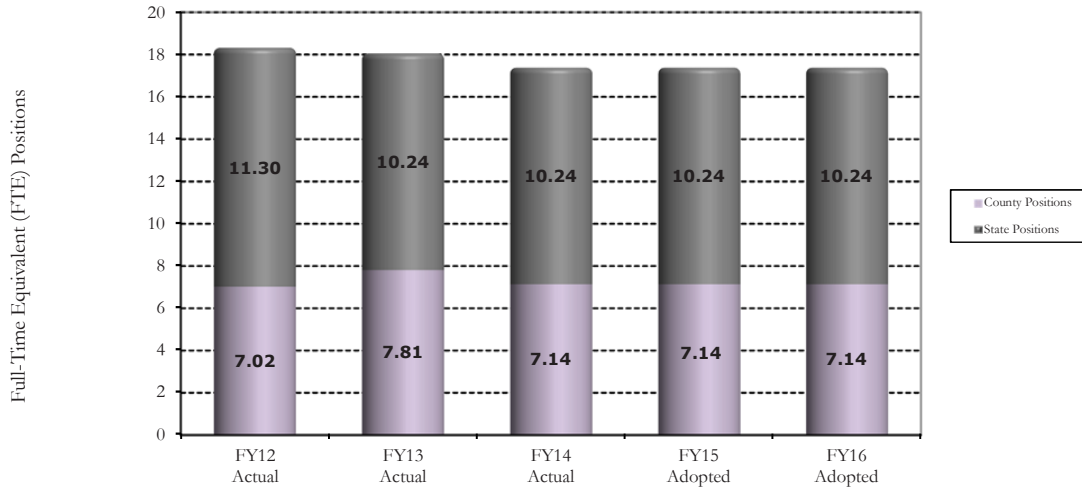
<b>Funding Sources</b>	<b>FY12 Actual</b>	<b>FY13 Actual</b>	<b>FY14 Actual</b>	<b>FY15 Adopted</b>	<b>FY16 Adopted</b>	<b>% Change Adopt15/ Adopted16</b>
1 Charges for Services	\$14,762	\$12,575	\$16,445	\$10,000	\$10,000	0.00%
2 Miscellaneous Revenue	\$0	\$0	\$26,153	\$0	\$0	—
3 Revenue From Other Localities	\$83,072	\$114,696	\$97,564	\$102,751	\$125,830	22.46%
4 Revenue from State Government	\$0	\$164,000	\$134,045	\$0	\$0	—
5 Revenue From Federal Government	\$147,053	\$6,079	\$0	\$70,000	\$70,000	0.00%
6 Transfers In	\$322,085	\$322,082	\$322,084	\$322,085	\$330,635	2.65%
<b>Total Designated Funding Sources</b>	<b>\$566,972</b>	<b>\$619,432</b>	<b>\$596,291</b>	<b>\$504,836</b>	<b>\$536,465</b>	<b>6.27%</b>
<b>Net General Tax Support</b>	<b>\$142,129</b>	<b>\$168,236</b>	<b>\$288,974</b>	<b>\$324,803</b>	<b>\$263,100</b>	<b>(19.00%)</b>
<b>Net General Tax Support</b>	<b>20.04%</b>	<b>21.36%</b>	<b>32.64%</b>	<b>39.15%</b>	<b>32.91%</b>	



Expenditure History



Staff History



	FY12 Actual	FY13 Actual	FY14 Actual	FY15 Adopted	FY16 Adopted
<b>1 Family Stability</b>	<b>13.56</b>	<b>13.56</b>	<b>12.89</b>	<b>12.89</b>	<b>12.89</b>
County	6.04	6.04	5.37	5.37	5.37
State	7.52	7.52	7.52	7.52	7.52
<b>2 Environment &amp; Natural Resources</b>	<b>4.49</b>	<b>4.49</b>	<b>4.49</b>	<b>4.49</b>	<b>4.49</b>
County	1.77	1.77	1.77	1.77	1.77
State	2.72	2.72	2.72	2.72	2.72
Total County	7.02	7.81	7.14	7.14	7.14
Total State	11.30	10.24	10.24	10.24	10.24
<b>County Full-Time Equivalent (FTE) Total</b>	<b>7.02</b>	<b>7.81</b>	<b>7.14</b>	<b>7.14</b>	<b>7.14</b>

Staff By Program

## Future Outlook

**Virginia Cooperative Extension** - Prince William continues to provide research-based programs in nutrition education, 4-H youth development, parent education, financial education and housing counseling, agriculture, and environment and natural resources utilizing resources from the land grant universities—Virginia Tech and Virginia State. We are seeing an increased demand for programs that strengthen families and conserve the environment. We will continue to identify the needs of our growing and diverse community by utilizing the skills of our volunteers, seeking more opportunities to collaborate with local and state partners.





## General Overview

- A. Internal Service Fund (ISF) Technology Budget** - The County annually allocates all technology costs to agencies through an ISF, using the approved cost basis for each technology activity. Technology activities include phone, radio and computer support, business systems support, GIS, web services, capital equipment replacement, and administration. In FY16 Cooperative Extension's technology bill increased by \$2,877 to \$79,178.
- B. Rainbow Riding Center** - The County's partnership with Rainbow Riding Center has been shifted from Cooperative Extension's 4-H Youth Education activity in the Family Stability Program to Community Services.
- C. State Salary Match** - In order to meet the County's agreed upon match for State employees, the FY16 budget for VCE increased by \$2,646.
- D. Budgeted Savings** - For over two decades, the County has had a long-standing practice of using year-end savings as a funding source in the next year's budget. Utilizing these savings has provided significant tax bill savings for County residents. The three major credit rating agencies have recently revised their rating criteria use to evaluate the creditworthiness of jurisdictions using bond proceeds to finance capital infrastructure projects. Under the new criteria year-end savings are considered to be one-time funds, which should not be used to support ongoing expenditures. In order to address this issue, the FY2016 Budget includes a 2.5% reduction to the general fund portion of agency expenditure budgets (with the exception of state courts and magistrates), totaling \$13.0 million. This reduction has been implemented by adding a negative budget line item to agencies, similar to the budgeted salary lapse. The savings amount for Cooperative Extension is \$20,165.
- E. Compensation Increase** - Compensation adjustments totaling \$13,317 are made to support the following rate changes:
- 5.0% Retiree Health;
  - -1.0% VRS employer rate for Plan 1 employees;
  - 7.7% Health insurance;
  - 3.2% Dental insurance;
  - 2.0% Pay Plan adjustment; and
  - 1.0% Salary adjustment to offset the required VRS contribution by Plan 1 and some Plan 2 employees.

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



## Family Stability

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

Key Measures	FY12 Actual	FY13 Actual	FY14 Actual	FY15 Adopted	FY16 Adopted
Parent Education participants able to use the information presented in the class to improve their family situation	—	98%	98%	95%	96%
Nutrition Education survey respondents reporting the adoption of healthy nutrition and physical activity practices	61%	96%	99%	60%	70%
Parents reporting that 4-H youth acquire life skills that lead to becoming productive and contributing citizens	97%	98%	98%	95%	95%
Financial Education & Housing Counseling participants reporting adoption of a spending and savings plan to become financially stable and achieve future goals	—	—	50%	90%	75%
FTE value of volunteer hours for the Family Stability Program	14	21	38	6	6

Program Activities & Workload Measures (Dollar amounts expressed in thousands)	FY12 Actual	FY13 Actual	FY14 Actual	FY15 Adopted	FY16 Adopted
<b>Nutrition Education</b>	\$24	\$26	\$31	\$33	\$34
Smart Choices Nutrition Education Program participants	1,598	972	251	1,200	250
Volunteers	102	124	62	50	35
<b>4-H Youth Education</b>	\$85	\$88	\$128	\$131	\$98
Youth enrolled in 4-H	827	743	803	700	700
Youth enrolled in 4-H special interest programs	52,636	71,663	71,103	50,000	50,000



<b>Program Activities &amp; Workload Measures (cont.)</b> (Dollar amounts expressed in thousands)	<b>FY12 Actual</b>	<b>FY13 Actual</b>	<b>FY14 Actual</b>	<b>FY15 Adopted</b>	<b>FY16 Adopted</b>
Volunteers	1,008	1,059	999	700	700
Students enrolled in the Rainbow Therapeutic Riding Program (shifted to Community Services)	162	160	209	180	—
<b>Financial Education and Housing Counseling</b>	<b>\$205</b>	<b>\$272</b>	<b>\$335</b>	<b>\$249</b>	<b>\$259</b>
Families completing Home Ownership Seminar Series	206	178	161	150	150
Housing counseling participants	455	289	255	175	175
Volunteers	57	36	44	40	40
<b>Parent Education</b>	<b>\$204</b>	<b>\$206</b>	<b>\$210</b>	<b>\$230</b>	<b>\$239</b>
Participants completing Systematic Training for Effective Parenting (STEP)	223	250	259	230	230
Participants completing When Families Get Angry (WFGA)	98	79	75	85	80
Participants completing Juvenile Justice Parenting Program (JJPP)	68	110	87	90	90
Volunteers	16	20	18	15	15
<b>Contribution to Rainbow Riding (partnership shifted to Community Services in FY16)</b>	<b>\$32</b>	<b>\$33</b>	<b>—</b>	<b>—</b>	<b>—</b>

**A. Budget Shifts**

**1. Parent Education Revenue**

Budget Shift	\$0
Agency Impact	\$0
FTE Positions	0.00

- a. **Description** - Prince William County Schools is no longer providing funding for this program in FY16. The revenue will come from the At Risk Youth and Family Services program in the Department of Social Services.
- b. **Service Level Impacts** - Existing service levels will be maintained.



## Environment & Natural Resources (ENR)

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

Key Measures	FY12 Actual	FY13 Actual	FY14 Actual	FY15 Adopted	FY16 Adopted
Surveyed program participants reporting that they adopted recommended water quality practices	84%	100%	87%	85%	85%
Number of urban nutrient management acres	69	60	65	100	65
FTE value of volunteer hours contributed to ENR	6	8	9	7	7

Program Activities & Workload Measures (Dollar amounts expressed in thousands)	FY12 Actual	FY13 Actual	FY14 Actual	FY15 Adopted	FY16 Adopted
Environment and Natural Resources	\$156	\$158	\$182	\$185	\$170
Environmental Education participants	1,045	1,242	1,067	1,200	1,000
Volunteers	152	181	176	150	150
Executive Management & Administration (merged with ENR)	\$3	\$4	—	—	—