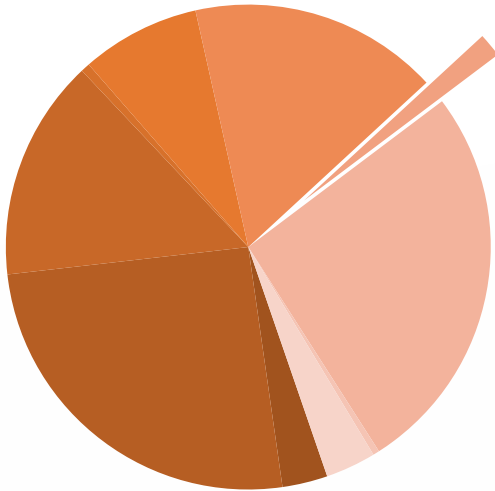


# Public Health

## Mission Statement

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



Health, Wellbeing & Environmental Sustainability  
**Expenditure Budget: \$315,677,137**

## Expenditure Budget: \$5,021,026

1.6% of Health, Wellbeing & Environmental Sustainability

### Programs:

- Maternal & Child Health: \$306,588
- General Medicine: \$3,542,657
- Environmental Health: \$904,297
- Administration/Emergency Preparedness: \$267,484

## Mandates

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

The Board of County Supervisors has enacted additional local mandates for which Public Health has responsibility.

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

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

# Public Health

## Expenditure and Revenue Summary



Expenditure by Program	FY21 Actuals	FY22 Actuals	FY23 Actuals	FY24 Adopted	FY25 Adopted	% Change Budget FY24/ Budget FY25
Maternal & Child Health	\$1,205,691	\$309,685	\$309,685	\$306,588	\$306,588	0.00%
General Medicine	\$1,701,364	\$3,157,529	\$3,008,905	\$3,396,044	\$3,542,657	4.32%
Environmental Health	\$580,769	\$906,704	\$905,420	\$915,209	\$904,297	(1.19%)
Administration/Emergency Preparedness	\$163,685	\$242,932	\$264,648	\$737,675	\$267,484	(63.74%)
<b>Total Expenditures</b>	<b>\$3,651,509</b>	<b>\$4,616,849</b>	<b>\$4,488,658</b>	<b>\$5,355,516</b>	<b>\$5,021,026</b>	<b>(6.25%)</b>

### Expenditure by Classification

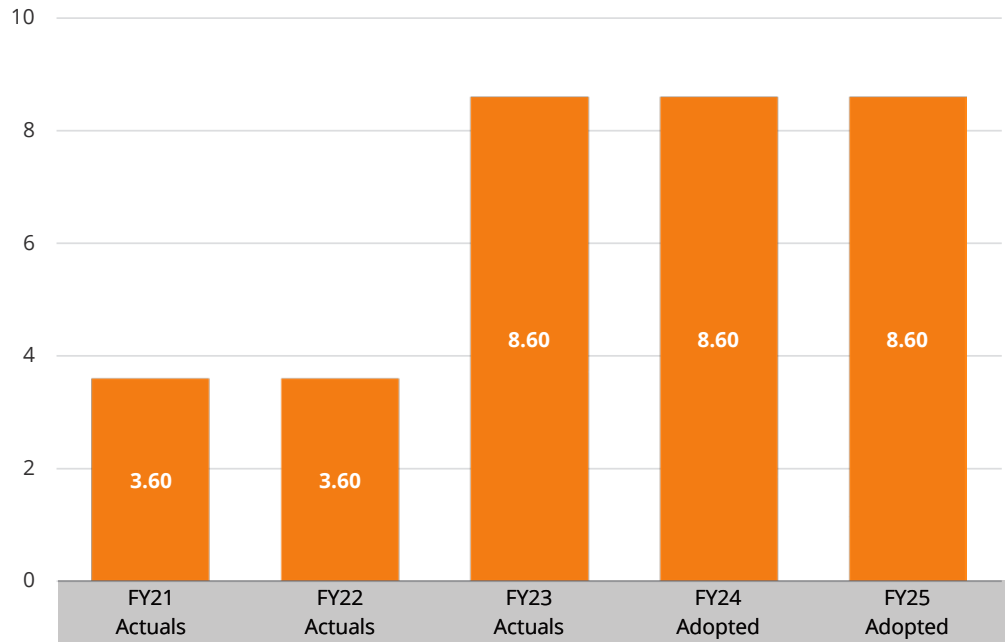
Salaries & Benefits	\$272,716	\$1,494,217	\$1,338,530	\$2,223,642	\$1,885,612	(15.20%)
Contractual Services	\$95	\$97	\$95	\$1,415	\$1,415	0.00%
Internal Services	\$42,363	\$49,037	\$78,633	\$60,560	\$60,560	0.00%
Purchase of Goods & Services	\$3,336,335	\$3,073,497	\$3,071,401	\$3,100,865	\$3,104,405	0.11%
Reserves & Contingencies	\$0	\$0	\$0	(\$30,966)	(\$30,966)	0.00%
<b>Total Expenditures</b>	<b>\$3,651,509</b>	<b>\$4,616,849</b>	<b>\$4,488,658</b>	<b>\$5,355,516</b>	<b>\$5,021,026</b>	<b>(6.25%)</b>

### Funding Sources

Permits & Fees	\$176,033	\$189,666	\$208,208	\$176,746	\$176,746	0.00%
Revenue from Other Localities	\$75,907	\$75,566	\$104,650	\$111,582	\$115,052	3.11%
Miscellaneous Revenue	\$127	\$71	\$5	\$0	\$0	-
Revenue from Commonwealth	\$515,472	\$815,269	\$822,979	\$303,397	\$403,397	32.96%
<b>Total Designated Funding Sources</b>	<b>\$767,538</b>	<b>\$1,080,572</b>	<b>\$1,135,842</b>	<b>\$591,725</b>	<b>\$695,195</b>	<b>17.49%</b>
<b>Net General Tax Support</b>	<b>\$2,883,971</b>	<b>\$3,536,278</b>	<b>\$3,352,816</b>	<b>\$4,763,791</b>	<b>\$4,325,831</b>	<b>(9.19%)</b>
<b>Net General Tax Support</b>	<b>78.98%</b>	<b>76.60%</b>	<b>74.70%</b>	<b>88.95%</b>	<b>86.15%</b>	

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

## Staff History by Program



	FY21 Actuals	FY22 Actuals	FY23 Actuals	FY24 Adopted	FY25 Adopted
Maternal & Child Health	0.00	0.00	0.00	0.00	0.00
General Medicine	3.00	3.00	3.00	3.00	3.00
Environmental Health	0.60	0.60	0.60	0.60	0.60
Administration/Emergency Preparedness	0.00	0.00	5.00	5.00	5.00
<b>Full-Time Equivalent (FTE) Total</b>	<b>3.60</b>	<b>3.60</b>	<b>8.60</b>	<b>8.60</b>	<b>8.60</b>

## Future Outlook

**Public Health Infrastructure** – Public William Health District (PWH), in collaboration with the Virginia Department of Health, is embarking on a three-year process to modernize the Electronic Health Records program and digitize existing paper medical records to improve customer service and create effective and efficient delivery systems for area residents.

**Community Partnerships** – PWH will continue to work with our many community partners to develop strategies to improve the overall health of the community through disease prevention and create health, equity, and resilience in the community over the long-term. These partnerships give PWH the ability to set a shared vision and goals, blend and braid funding, and create a shared vision for the district.

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

## General Overview

- A. FY2024 Public Health Funding** – The Commonwealth of Virginia partners with localities to provide public health services through a cooperative arrangement. Currently, the cooperative budget is funded 55% by state funds and 45% by Prince William County (PWC) matching funds. The County enters into an annual agreement with the Virginia Department of Health to provide the 45% funding necessary to operate Public Health. The County also provides local support above the match amount for certain local optional services. In FY24, state funding for Public Health was \$3,018,229 and the County match funding was \$2,469,460. The County also provided an additional \$2,886,056 in local expenditure budget support for staffing, local salary supplement, operations, and community partnerships above the amount included in the annual agreement. The cities of Manassas and Manassas Park provide reimbursement to the County for services rendered based on a shared services agreement with the County. Total FY24 state and County budgeted expenditures for the Public Health were \$8,373,745, with the County providing a total of \$5,355,516.
- B. County Public Health Department Transition** – In FY23, there was a soft rollout of a County Public Health Department. This initiative was driven from Board of County Supervisors (BOCS) issued [BOCS Directive 20-83](#) to explore and prepare a proposal to create a new County department. For the soft rollout, both Public Health and the County Attorney’s Office were given a total of seven positions. During FY24, these positions and funding were frozen in both departments, to be used when a decision is made on the transition project. The transition to a County Public Health Department will not occur in FY25 due to ongoing discussions with the Virginia Department of Public Health and the Cities of Manassas and Manassas Park. Therefore, the FY2025 Budget includes a one-time \$536,856 increase to the Public Health Department’s budgeted salary lapse savings based on the value of the vacant positions (an Assistant Director, one Senior Business Services Analyst, and three Business Services Analyst positions) associated with the future transition to a County Public Health Department. The vacant positions are not eliminated, but the increased salary lapse captures these continued position vacancy savings in FY25.
- C. Local Salary Supplement for PWHD State Employees** – Beginning in FY22, PWHD state employees received a 20% local salary supplement, and the supplement continues in the FY2025 Budget for 102 state employees. The local salary supplement is \$1,487,310 which is a \$110,374 increase from FY24 based on anticipated state salary increase. The County’s 20% local salary supplement remains unchanged. The intent of the local salary supplement is to assist PWHD with retention and recruitment in the Northern Virginia labor market.
- D. Revenue Increase for Shared Services (City) Billings** – The billings represent reimbursement from the City of Manassas and Manassas Park for services rendered in the previous year. Services rendered include activities within all functional areas except for Government Operations, Performance & Innovation. Amounts are calculated using an annual cost allocation report. As a result of the annual report, the PWHD allocation increased \$3,470.

# Public Health

## Program Summary

### Maternal & Child Health

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

Key Measures	FY21 Actuals	FY22 Actuals	FY23 Actuals	FY24 Adopted	FY25 Adopted
Infant deaths per 1,000 live births	5.1	4.6	5.1	4.5	4.5
Infant deaths per 1,000 live births (Black, non-hispanic)	12.3	9.3	7.6	7.5	7.5

Program Activities & Workload Measures <i>(Dollar amounts expressed in thousands)</i>	FY21 Actuals	FY22 Actuals	FY23 Actuals	FY24 Adopted	FY25 Adopted
<b>Women's Wellness &amp; WIC</b>	<b>1,206*</b>	<b>\$310</b>	<b>\$310</b>	<b>\$307</b>	<b>\$307</b>
Women seen in EWL cancer screening program	-	-	-	90	150
Participants in the WIC program at the end of the fiscal year	8,381	8,938	7,983	8,900	8,900
Overweight participant children (age 2 yrs - 5 yrs) % children ≥ 85th percentile	-	-	NA	20%	20%

\*In FY21, \$896K was incorrectly coded to Maternal & Child Health program rather than General Medicine Program. During COVID-19 pandemic certain programs were moved to virtual meetings, the data for the Overweight participant children (age 2 yrs - 5 yrs) % children ≥ 85th percentile measure was not collected in the virtual meeting, in person meetings are expected to resume in the spring of 2023.

# Public Health

## General Medicine

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

Key Measures	FY21 Actuals	FY22 Actuals	FY23 Actuals	FY24 Adopted	FY25 Adopted
Pre-admission nursing home screenings completed within 30 days	95%	60%	34%	90%	50%
Patients completing tuberculosis preventive therapy treatment	81%	68%	85%	90%	90%
Vaccine-preventable disease cases per 100,000 population	2	6	11	10	10
Non-vaccine preventable reportable conditions/100,000 population	5,536	8,876	83	1,000	100
Diagnosed chlamydia cases/100,000 population	418	419	404	500	450
Diagnosed gonorrhea cases/100,000 population	96	102	102	100	100
Diagnosed syphilis cases/100,000 population	-	11	12	15	15

Program Activities & Workload Measures <i>(Dollar amounts expressed in thousands)</i>	FY21 Actuals	FY22 Actuals	FY23 Actuals	FY24 Adopted	FY25 Adopted
<b>Sexually Transmitted Disease</b>	<b>\$247</b>	<b>\$247</b>	<b>\$247</b>	<b>\$245</b>	<b>\$245</b>
Persons seen for sexually transmitted disease services	275	374	577	500	600
<b>Other Communicable Disease Services</b>	<b>\$1,234*</b>	<b>\$2,679</b>	<b>\$2,533</b>	<b>\$2,907</b>	<b>\$3,050</b>
Patients receiving tuberculosis preventive therapy	25	58	45	100	100
Suspected tuberculosis follow-ups	20	143	88	100	100
Reportable conditions investigated	34,306	62,398	29,748	2,000	2,000
Private provider reports of positive STI's for review and follow-up	2,926	2,843	2,509	3,000	3,000
<b>Chronic Disease Services</b>	<b>\$115</b>	<b>\$116</b>	<b>\$116</b>	<b>\$115</b>	<b>\$115</b>
Persons screened for nursing home pre-admission and personal care services	672	785	961	700	1,000
<b>Primary Health Care Services</b>	<b>\$105</b>	<b>\$115</b>	<b>\$112</b>	<b>\$129</b>	<b>\$133</b>
Clients served by community partners	801	906	523	825	500

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

# Public Health

## Environmental Health

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

Key Measures	FY21 Actuals	FY22 Actuals	FY23 Actuals	FY24 Adopted	FY25 Adopted
The number of foodborne illness complaints in PWC investigated	34	57	69	75	100
Septic tank owners in compliance with Chesapeake Bay Preservation Act	79%	81%	83%	83%	85%
On-site sewage applications completed within 15 days	94%	93%	85%	95%	95%
Founded health and safety menaces corrected	95%	90%	95%	95%	95%
Humans potentially exposed to rabies	954	989	1,108	1,100	1,150
Swimming pools in compliance with County code requirements	90%	95%	95%	95%	95%

Program Activities & Workload Measures <i>(Dollar amounts expressed in thousands)</i>	FY21 Actuals	FY22 Actuals	FY23 Actuals	FY24 Adopted	FY25 Adopted
<b>On-site Sewage System Permits and Maintenance</b>	<b>\$152</b>	<b>\$268</b>	<b>\$264</b>	<b>\$282</b>	<b>\$271</b>
New on-site sewage applications completed	232	363	462	275	300
Septic tank pump-outs assured	11,578	11,950	12,496	12,500	12,900
<b>Water Supply Protection</b>	<b>\$64</b>	<b>\$64</b>	<b>\$64</b>	<b>\$64</b>	<b>\$64</b>
Number of new well applications	-	-	-	50	100
<b>Inspection Services</b>	<b>\$240</b>	<b>\$429</b>	<b>\$429</b>	<b>\$426</b>	<b>\$426</b>
Food establishment inspections	520	783	1,261	2,100	2,100
Swimming pool inspections	170	198	240	300	350
<b>Environmental Complaint Investigations</b>	<b>\$74</b>	<b>\$95</b>	<b>\$98</b>	<b>\$94</b>	<b>\$94</b>
Total environmental complaints investigated	107	101	121	300	200
<b>Rabies Control</b>	<b>\$50</b>	<b>\$50</b>	<b>\$50</b>	<b>\$50</b>	<b>\$50</b>
Animal quarantines completed	835	1,117	831	1,100	1,100

# Public Health

## Administration/Emergency Preparedness

The Administration/Emergency Preparedness program integrates state, regional, and local jurisdictions' public health emergency preparedness plans to respond to terrorism and other public health threats to include pandemics. In addition, this program supports the ability of hospitals and health care systems to prepare for and respond to bioterrorism and other public health and health care emergencies, in particular by having a robust cache of Medical Reserve Corp volunteers. The client base for this program is comprised of all residents of PWC and the Cities of Manassas and Manassas Park.

Key Measures	FY21 Actuals	FY22 Actuals	FY23 Actuals	FY24 Adopted	FY25 Adopted
Community events during which all hazards preparedness education is provided*	NR	2	10	15	17
Customers reporting that they received the information or services they needed*	NR	99%	99%	98%	99%

Program Activities & Workload Measures <i>(Dollar amounts expressed in thousands)</i>	FY21 Actuals	FY22 Actuals	FY23 Actuals	FY24 Adopted	FY25 Adopted
<b>Leadership and Management Oversight/Emergency Preparedness</b>	<b>\$164</b>	<b>\$243</b>	<b>\$265</b>	<b>\$738</b>	<b>\$267</b>
Deployable Medical Reserve Corps volunteers	1,100	1,023	1,019	1,100	1,100
Emergency response exercises conducted in collaboration with outside partners	0	0	20	2	20

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