

# Health and Welfare Program Area Summary

## Overview

The Health and Welfare program area consists of four agencies – the Department of Family Services, the Department of Administration for Human Services, the Department of Systems Management for Human Services, and the Health Department. Their collective mission is to protect the vulnerable, help people and communities realize and strengthen their capacity for self-sufficiency, and ensure good outcomes through prevention and early intervention. In addition to these four agencies, there are four others that comprise the Fairfax County Human Services System. They are the Juvenile and Domestic Relations District Court (Public Safety program area), the Department of Community and Recreation Services (Parks, Recreation and Libraries program area), the Department of Housing and Community Development (Community Development program area as well as a number of Other Funds found in Volume 2 of the FY 2005 Advertised Budget Plan), and the Fairfax-Falls Church Community Services Board (Fund 106 in Volume 2). Human Services functions are also addressed in Other Funds such as Fund 102, Federal State Grant Fund; Fund 103, Aging Grants and Programs; Fund 118, Consolidated Community Funding Pool; Fund 314, Neighborhood Improvement Program; and Fund 315, Commercial Revitalization Program. The Office for Women was formerly a separate agency in this program area; however, effective FY 2004, its staff was reduced from eight to two who are now deployed in the Department of Family Services to provide support to the Board-appointed Commission for Women. Since 1996, the Fairfax County Human Services System has used a framework known as the Community Challenges in order to communicate the relationships among public and community-based organizations to achieve shared goals for individuals, families and communities. The seven Community Challenges identified for action by these agencies revolve around the following outcomes and include:

- **Independent and Engaged People** – Providing assistance to promote independence (Challenge 1)
- **Safe and Affordable Housing** – Ensuring safe and affordable housing (Challenge 2)
- **Strong and Safe Families** – Supporting families and individuals in crisis, as well as preventing abuse and neglect (Challenge 3)
- **Healthy People and Communities** – Protecting the public health (Challenge 4) and addressing alcohol, physical and mental health issues (Challenge 5)
- **Safe Communities** – Responding to crime in the community (Challenge 6)
- **Thriving and Supportive Communities** – Providing community-wide and targeted support to prevent social isolation and neighborhood deterioration (Challenge 7)

## Strategic Direction

As part of the countywide focus on developing strategic plans during 2002-2003, the four agencies in this program area each developed mission, vision and value statements; performed environmental scans; and defined strategies for achieving their missions. These strategic plans are linked to the overall County Core Purpose and Vision Elements. Common themes among the agencies in this program area include:

- Self-sufficiency of residents to address basic needs
- Prevention
- Early intervention
- Access to service
- Capacity building with non-County organizations to achieve mutual human service goals
- Community building
- Cultural and language diversity
- Emerging threats such as communicable diseases and bioterrorism
- High-performing diverse workforce
- Maximization of local, state and federal resources

### COUNTY CORE PURPOSE

*To protect and enrich the quality of life for the people, neighborhoods, and diverse communities of Fairfax County by:*

- Maintaining Safe and Caring Communities
- Building Livable Spaces
- Practicing Environmental Stewardship
- Connecting People and Places
- Creating a Culture of Engagement
- Maintaining Healthy Economies
- Exercising Corporate Stewardship

## Health and Welfare Program Area Summary

A number of demographic, economic, social and governance trends affect this program area. With regard to demographics, the tremendous growth in population has a profound impact on the services provided by these agencies. Fairfax County has experienced double-digit population growth in each decade since the 1970s. From 2000 to 2010, it is projected to grow by another 15 percent. From 1980 to 2000, the number of persons age 65 and older more than doubled, from 29,385 to 80,833. While this age group is growing across the country, Fairfax County's rate of growth is much faster than the national rate. During the past decade, the County also grew increasingly more diverse in ethnicity, language and cultural background.

With the national and local economy recovering slowing from the downturn of the past few years, many still face significant financial stress. The human cost of the weak economy shows in many ways – higher demand for emergency assistance for basic needs; fewer volunteer hours and dollars to provide this assistance; more families struggling with unemployment or under-employment; and increased stress levels in families.

In recent years, Human Services agencies have played a crucial role in responding to a number of public health and safety concerns such as the threat of chemical, biological or radiological attacks, as well as emergent diseases such as the West Nile virus. Domestic violence likewise presents a growing problem, given the population increase and stressful conditions associated with a weak economy.

Addressing the many issues facing Human Services has resulted in the development of a new shared governance model for how citizens are given a voice, how decisions are made on matters of public concern and how partnerships are formed to develop solutions to community challenges. Building both capacity and community are essential if Fairfax County is to address the many needs in this area.

### Linkage to County Vision Elements

While this program area supports all seven of the County vision elements, the following are the main focus:

- Maintaining Safe and Caring Communities
- Creating a Culture of Engagement
- Maintaining Healthy Economies
- Exercising Corporate Stewardship

The majority of strategies in this program area are dedicated toward **Maintaining Safe and Caring Communities**. Priorities include enhancing children's services, improving the system of long-term care, and providing greater access to health care. Children who are in need of services for developmental, emotional or behavioral problems or who are at risk for out-of-home placements are served by various human service agencies, the courts, the schools, community providers and caring family members. Building on the collaborative processes of the Comprehensive Services Act, Fairfax County agencies that serve children have been working to improve the system of care for all children in need of services. The goal is to create and sustain a community-based system where services to children and families are well-timed, collaboratively-planned, effectively delivered and fiscally responsible.

The growth in the 65 and older population, as well as the need to support all adults with disabilities, is already having far-reaching effects on every facet of the community, presenting challenges to policy-makers, service providers, businesses, and families. In 1999, the Board of Supervisors chartered a Citizens' Task Force for Long-Term Care, which has developed and is implementing a strategic plan for addressing these issues. The goals are to enable Fairfax residents who are elderly or who have disabilities to live as independently as possible, and to ensure that services are available, accessible, acceptable and affordable for those who need them.

Although Fairfax County has a wealth of health care resources, there are still many who do not have access to care. There are also disparities in health care provision and outcomes among socio-economic and racial/ethnic groups. Several successful initiatives have been underway to address components of this challenge. Over the next two years, Human Services agencies are placing a system-wide focus on access to health care, building on the momentum of existing efforts to ensure that all children and adults in the community have access to culturally-appropriate medical and behavioral health care, and that federal, state, local and private health care resources are used strategically. The County will continue its successful Healthy

## Health and Welfare Program Area Summary

Families Fairfax program which provides intensive home visiting services to first-time parents who are at risk for abuse due to family history or other stress factors. This program is a unique partnership of two County agencies – the Department of Health and the Department of Family Services, as well as three nonprofit agencies – United Community Ministries, Northern Virginia Family Service, and Reston Interfaith.

In the past decade, the roles and expectation of government have changed dramatically. To be effective, Human Services providers must also succeed at **Creating a Culture of Engagement**. Given limited resources, it has become imperative that Fairfax County leverage strengths and resources through partnerships that focus on the public sector’s role in facilitating the success of non-profit and faith-based organizations. One example of this capacity building is providing County funding to community organizations through the Consolidated Community Funding Pool, which is then leveraged with other resources to address the Community Challenges. The Department of Systems Management for Human Services coordinates Neighborhood Colleges to provide interested citizens the opportunity to learn more about their community and how they can actively participate. Fairfax County has also taken a community-building approach to draw on community strengths and assets. The ongoing Strengthening Neighborhoods and Building Communities Initiative involves County staff and the public working collaboratively to address problems faced by aging neighborhoods.

Efforts to develop and maintain self-sufficiency support the **Maintaining Healthy Economies** vision element. A major effort in this area will be to implement changes resulting from reauthorization of federal welfare reform, which are anticipated to impose stricter work requirements on participants and significantly increase workload for the Department of Family Services (DFS). Child care is a critical component in a county where both parents must work in many families to afford to live here. DFS will continue to increase the number of child care options by partnering with community-based organizations to recruit new family child care providers and reducing the time it takes to process a Home Child Care Permit from 20 to 15 days.

A number of initiatives have been underway in recent years to ensure that agencies in this program area are **Exercising Corporate Stewardship**. Given resource constraints, it is critical that every potential dollar be maximized. The Department of Administration for Human Services, which provides administrative support for Human Services agencies, has generated additional revenue and reimbursements by pursuing overdue customer accounts and ensuring payment by both clients and third party payers. In FY 2003, they also negotiated a new prescription drug program that resulted in weekly savings of \$20,000 for the Health Department.

### Program Area Summary by Character

Category	FY 2003 Actual	FY 2004 Adopted Budget Plan	FY 2004 Revised Budget Plan	FY 2005 Advertised Budget Plan	FY 2005 Adopted Budget Plan
Authorized Positions/Staff Years					
Regular	2066/ 1941.01	2047/ 1920.9	2047/ 1924	2051/ 1926.86	2053/ 1928.86
Expenditures:					
Personnel Services	\$92,930,708	\$97,544,525	\$97,379,686	\$101,500,951	\$101,500,951
Operating Expenses	119,413,334	124,473,579	137,042,093	128,579,533	128,561,681
Capital Equipment	78,757	0	454,854	0	0
<b>Subtotal</b>	<b>\$212,422,799</b>	<b>\$222,018,104</b>	<b>\$234,876,633</b>	<b>\$230,080,484</b>	<b>\$230,062,632</b>
Less:					
Recovered Costs	(\$209,942)	(\$266,009)	(\$273,239)	(\$309,219)	(\$309,219)
<b>Total Expenditures</b>	<b>\$212,212,857</b>	<b>\$221,752,095</b>	<b>\$234,603,394</b>	<b>\$229,771,265</b>	<b>\$229,753,413</b>
<b>Income</b>	<b>\$107,494,100</b>	<b>\$100,774,940</b>	<b>\$113,075,112</b>	<b>\$105,010,764</b>	<b>\$106,740,778</b>
<b>Net Cost to the County</b>	<b>\$104,718,757</b>	<b>\$120,977,155</b>	<b>\$121,528,282</b>	<b>\$124,760,501</b>	<b>\$123,012,635</b>

# Health and Welfare Program Area Summary

## Program Area Summary by Agency

Agency <sup>1</sup>	FY 2003 Actual	FY 2004 Adopted Budget Plan	FY 2004 Revised Budget Plan	FY 2005 Advertised Budget Plan	FY 2005 Adopted Budget Plan
Office for Women	\$415,303	\$0	\$0	\$0	\$0
Department of Family Services	157,706,221	166,631,749	177,652,076	173,711,830	173,693,978
Department of Administration for Human Services	11,773,066	9,614,968	9,713,802	9,959,497	9,959,497
Department of Systems Management for Human Services	4,559,508	5,333,961	5,446,237	5,441,679	5,441,679
Health Department	37,758,759	40,171,417	41,791,279	40,658,259	40,658,259
<b>Total Expenditures</b>	<b>\$212,212,857</b>	<b>\$221,752,095</b>	<b>\$234,603,394</b>	<b>\$229,771,265</b>	<b>\$229,753,413</b>

<sup>1</sup> As part of the Board of Supervisors' deliberations on the FY 2004 Adopted Budget Plan, Agency 05, Office for Women, was restructured. The agency was abolished and support for the Commission for Women, including funding and 2/2.0 SYE positions, were transferred to Agency 67, Department of Family Services.

## Budget Trends

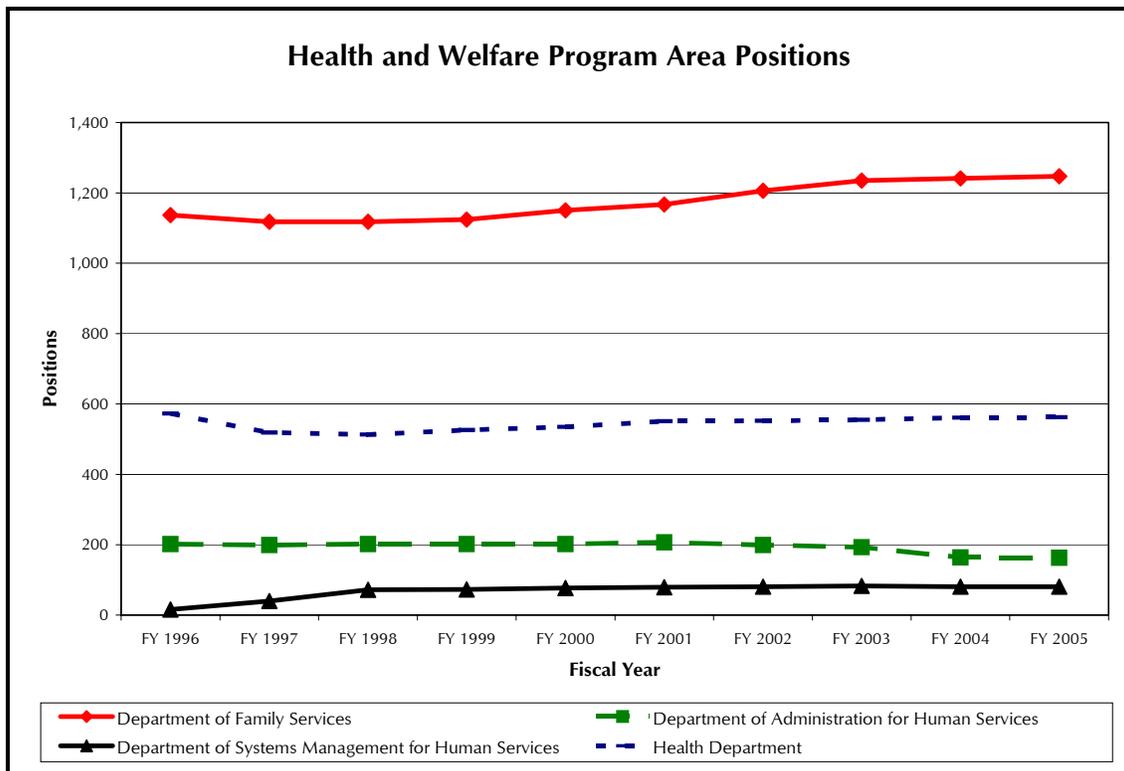
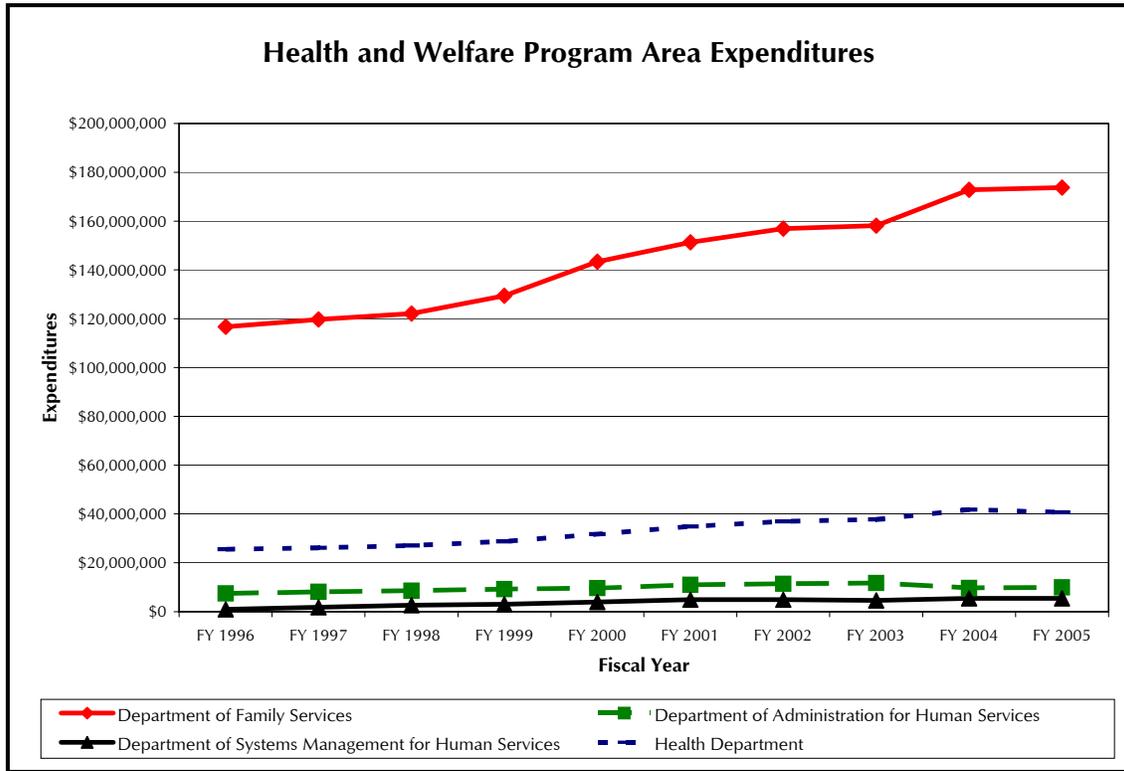
For FY 2005, the recommended funding level of \$229,753,413 for the Health and Welfare program area comprises 22.9 percent of the total recommended General Fund direct expenditures of \$1,003,824,621. It also includes 2,053 or 17.9 percent of total authorized positions for FY 2005.

During the period FY 2003-FY 2005, the real estate tax rate was reduced from \$1.23 to \$1.13 per \$100 assessed value. As a result, reductions from anticipated spending levels were made in many County agencies to offset the loss in projected revenue. In most County agencies, expenditures have still increased during this period to account for ongoing operational requirements; however, overall General Fund direct expenditures have been reduced by \$63,721,248 and overall County disbursements have been reduced by \$113,513,736 as a result of the real estate tax rate reductions.

This program area has experienced budget reductions totaling \$17,294,696 or 27.1 percent of General Fund direct expenditure reductions to date. In addition, a total of 21 positions have been abolished as part of those reductions. This represents 12.2 percent of General Fund positions eliminated to date.

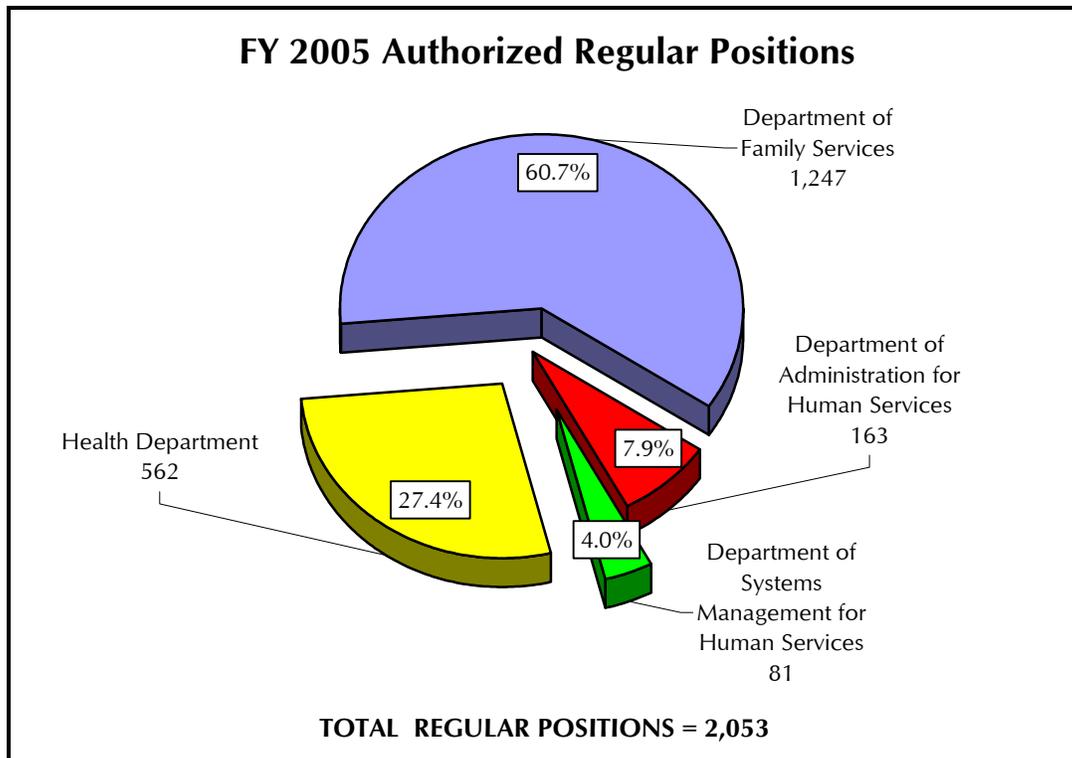
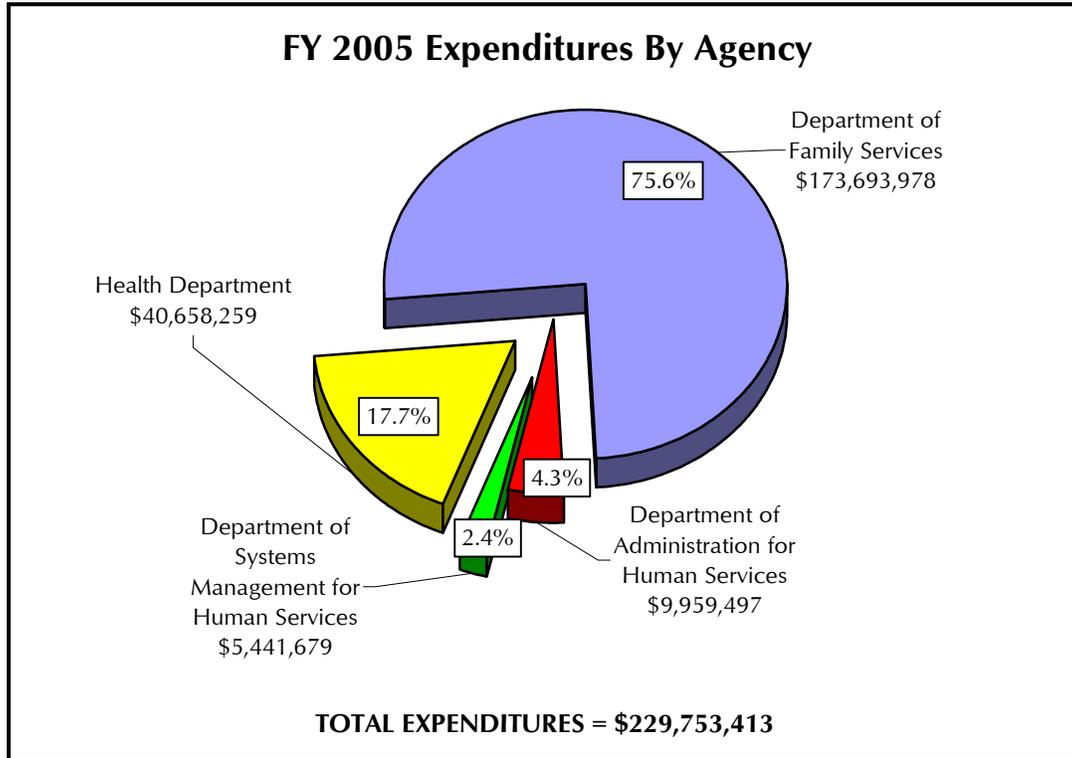
# Health and Welfare Program Area Summary

## Trends in Expenditures and Positions



# Health and Welfare Program Area Summary

## FY 2005 Expenditures and Positions by Agency

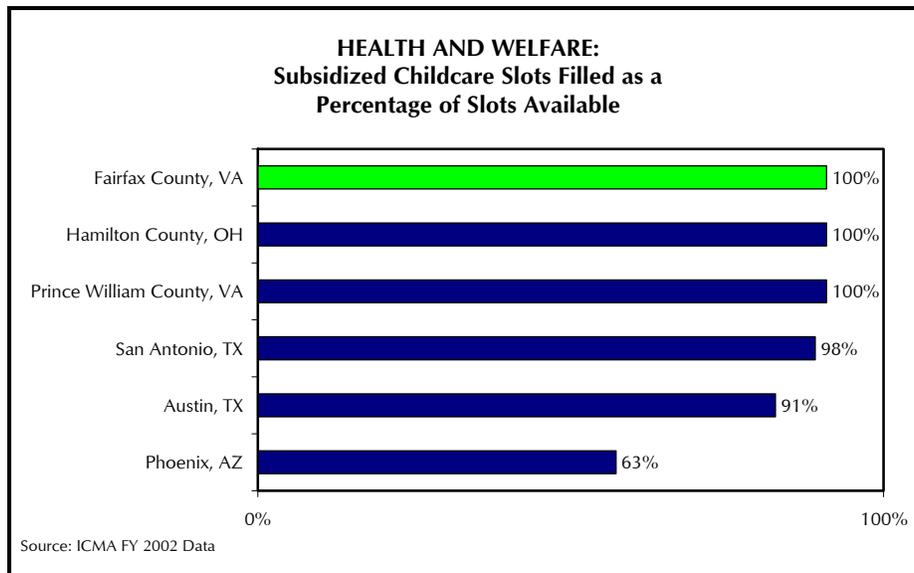


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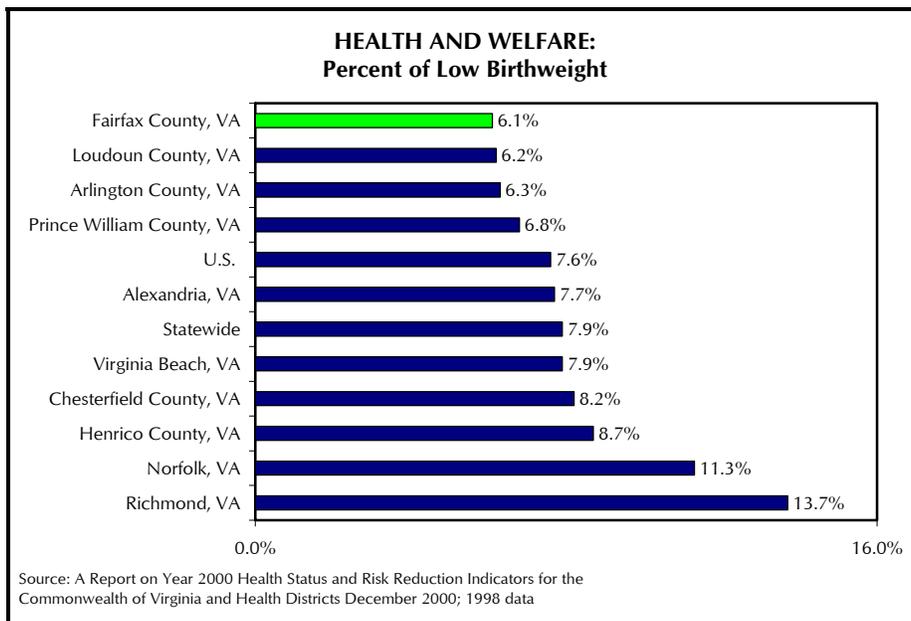
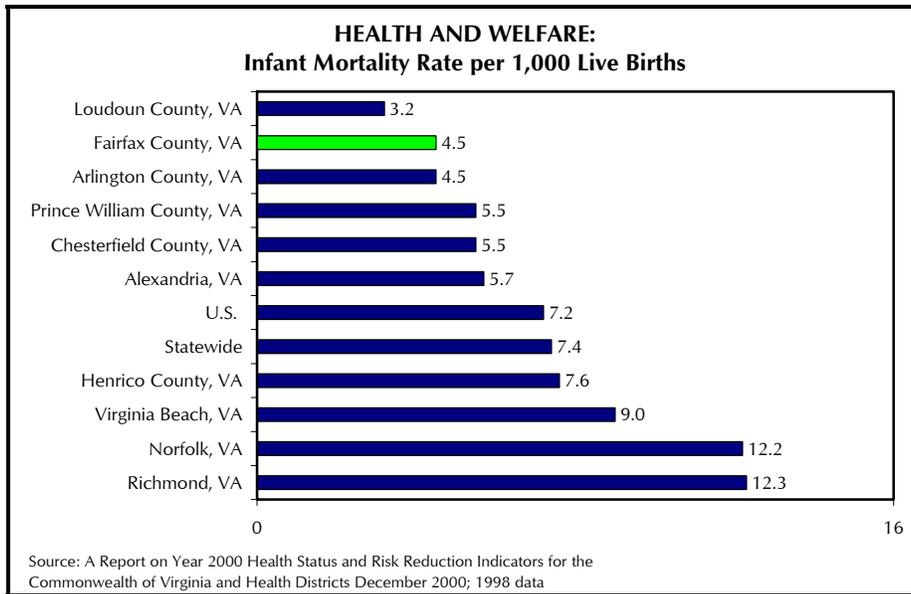
## Benchmarking

Fairfax County participates in the International City/County Management Association's (ICMA) benchmarking effort. Over 130 cities and counties provide comparable data annually in a number of service areas. Not all jurisdictions provide data for every service area. However, only a very small component of this program area's functions is addressed by the ICMA effort. This is through the Youth Services template. Even that provides only a very limited opportunity for benchmarking as very few jurisdictions provide data for this template. The first graph below shows how Fairfax County compares to other large jurisdictions (population over 500,000), as well as Prince William County, Virginia on the issue of subsidized childcare slots filled. As a result of the time for the submission and data cleaning processes, information is always available with a one-year delay. FY 2002 data represent the latest available information.

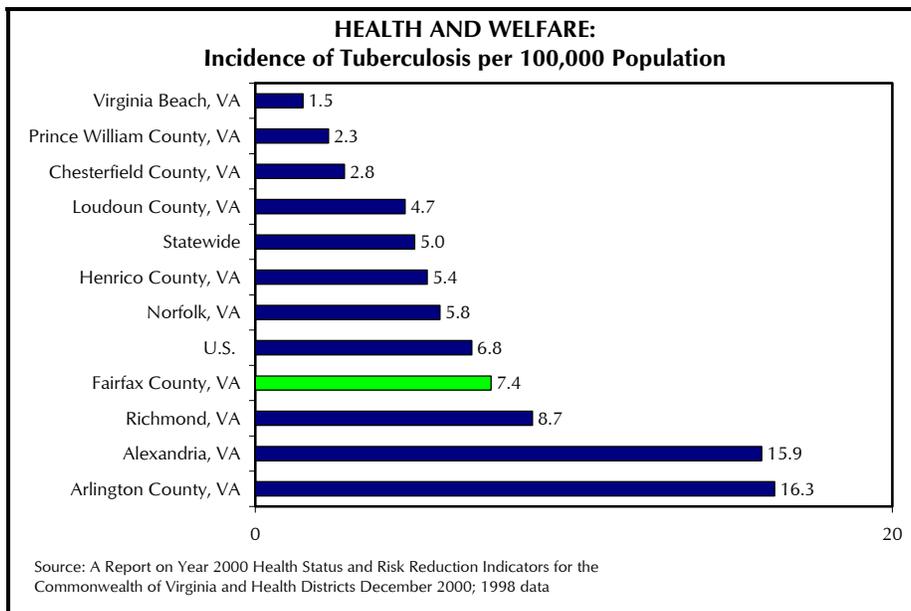
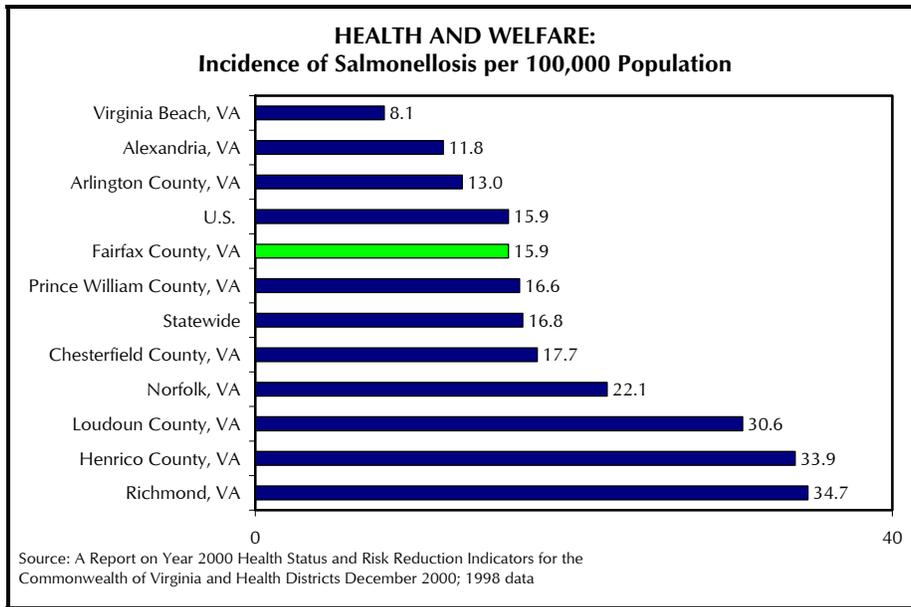
Since sufficient data were not available through the ICMA benchmarking program, it was necessary to locate other sources of comparative data. The most comprehensive source found was "A Report on Year 2000 Health Status and Risk Reduction Indicators for the Commonwealth of Virginia and Health Districts." Due to the delay in collecting and analyzing this data at the state level, the most recent report is from 2000 and uses 1998 data. Nevertheless, in a wide range of key indicators of health and welfare, Fairfax County compares well both within the Commonwealth of Virginia and to the rest of the United States. In addition, future efforts will focus on identifying additional benchmarking data in other service areas within this program area in order to provide a more comprehensive picture of comparative performance.



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