



# County of Fairfax, Virginia

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

Human Services Council

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Carol Hawn  
Jerrold L. Foltz

**DATE:** February 20, 2015

**TO:** Human Services Boards, Authorities, and Commissions  
Community Advocacy and Provider Organizations  
Human Services Directors

**FROM:** Steven Bloom, Chair, Budget Committee  
Fairfax County Human Services Council

The County Executive released the Fairfax County FY 2016 Advertised Budget Plan on Tuesday, February 17, 2015. You can view the proposed budget at the following link(s): [FY 2016 Budget Plan](#) and [the presentation](#). The email you received includes an attachment that highlights the human services reductions.

As part of its mission, the Fairfax County Human Services Council is charged with providing feedback to the Board of Supervisors on resources provided in support of the human services system. In order to fulfill its charge, the Council seeks input from the community regarding specific concerns about the advertised budget and its impact to the service effectiveness of human services funded by the county.

The Council will make its presentation to the Board of Supervisors on Tuesday, March 31, 2015. In preparation for the Council's presentation, and as in prior years, we invite your group to share your perspective on the budget proposed by the County Executive.

This year, to gather input, the Council has scheduled two Community Dialogue meetings and will also accept your written input in lieu of an oral presentation.

## Ways to Provide Input

The Community Dialogue meetings will be held as follows (written comments to accompany your presentation are encouraged):

1. **Meeting #1: Thursday, March 5, 2015, at 7:30 p.m.**, at the Jewish Community Center of Northern Virginia, 8900 Little River Turnpike, Fairfax, VA 22031.
2. **Meeting #2: Tuesday, March 10, 2015, at 7:30 p.m.**, at the John Calvin Presbyterian Church, 6531 Columbia Pike, Annandale, VA 22003.
  - To arrange to speak at either meeting, please email Tracy Steffek at [Tracy.Steffek@fairfaxcounty.gov](mailto:Tracy.Steffek@fairfaxcounty.gov) or contact her by phone at (703) 324-7169 or TTY 711, **no later than March 4, 2015.**
3. **Written Comments:** Due no later than close of business **on March 4, 2015.**
  - To submit written comments in lieu of an oral presentation, please submit them no later than March 10, 2015, via email to [Tracy.Steffek@fairfaxcounty.gov](mailto:Tracy.Steffek@fairfaxcounty.gov) or by U.S. mail to: Human Services Council, c/o Department of Neighborhood and Community Services, 12011 Government Center Parkway, Suite 408, Fairfax, VA 22035.

**Guidelines**

Because of the significant amount of information the Council will review, the following information and **guidelines** are offered to assist you in preparing your input:

- The Council will receive a briefing on the overall **FY 2016 Advertised Budget Plan** by the County Executive, so where possible please be specific to human service components in the Advertised Budget Plan. We request that your organization arrange for no more than one individual per organization to present.
- Because of the anticipated number of organizations participating in the meetings, each presentation will be limited to 7 minutes, including questions and answers. This year we are asking organizations to submit their written testimony in advance of the meetings so that the Council can review the testimony and be prepared to ask questions. To ensure there is enough time for a meaningful dialogue with each organization, we ask that you limit your oral presentation to 5 minutes out of the total time allotted.
- The Council will be assessing the Advertised Budget Plan with regard to its effect on the following seven strategic focus areas that guide our work:
  - Healthy People
  - Positive Living for Older Adults and People With Disabilities
  - Connected Communities
  - Successful Children and Youth
  - Economic Self Sufficiency/Financial Security
  - Sustainable Housing
  - Infrastructure Support
- In order to most effectively assist the Council, we recommend that you focus your testimony and presentation on how your specific concerns relate to one or more of these results areas. In addition, if you are identifying a need for funding for services, please address (1) the value of that program/service, (2) the outcomes that will be achieved, and (3) the data that can demonstrate the service/program effectiveness.

Please note, the Council's schedule of activities and resource materials that may be of interest to you may be found at <http://www.fairfaxcounty.gov/hscouncil/>.

We look forward to hearing from you and thank you for your continued support and interest in the County's human services delivery system, including how the HSC can better serve the community during the budget input process.

cc: Fairfax County Board of Supervisors  
Fairfax County Human Services Council

**COMMUNITY INPUT**  
FOR CONSIDERATION BY THE FAIRFAX COUNTY HUMAN SERVICES COUNCIL  
ON THE FY 2016 ADVERTISED BUDGET PLAN

**1. SUMMARY OF NEED:**

**2. RECOMMENDATION:**

**3. ANTICIPATED OR EVIDENCE OF OUTCOMES/RESULT OF APPROACH  
RECOMMENDED:**

**Summary of statements March 10 2015 to Human Services Council**

<b>Organization</b>	<b>Individual</b>	<b>Department</b>	<b>Item</b>	<b>Remarks</b>	<b>Comments</b>	<b>Suggestions</b>
				1 Support for 2.5 positions at the Comprehensive Domestic Violence Action Center		
<b>Commission for Women</b>	Cynthia Bhatnagar	OFWDVS DFS DFS/Health DFS		2 Restoration of Parenting Education Program 3 Restore Healthy Families Fairfax 4 Restore Good Touch Bad Touch Program		
<b>Concerned Fairfax</b>	William Taylor	CSB  CSB  OPEH DFS/Health		1 Restoration of Diversion to Detoxification Outreach Program 2 Restore One Service Director Position and Restructure Staff Within Jail-Based Behavioral Health Services 3 Restore Opportunities, Alternatives, and Resources of Fairfax contract providing case management services and financial assistance for formerly incarcerated adults. 4 Restore Healthy Families Fairfax Program		
<b>Community Action Advisory Board</b>	M. Menapace	DFS DFS DFS DFS DFS DFS DFS DFS DFS NCS NCS		1 Support for Public Assistance Caseworker increase 2 Support for SACC Fee Restructuring 3 Support for School Readiness Funding 4 Support for increases for CSB Intellectual Disability Graduates 5 Restoration of Healthy Families Fairfax program 6 Restoration of Parenting Education Program 7 Restore Good Touch Bad Touch Program 8 Restore DFS Rent Relief Program 9 Legal Services for People with Disabilities 10 Restore One Social Services Specialist II in Coordinated Services Planning 11 Restore One DNCS Community Developer		Review contributory funds as alternative
<b>Health Care Advisory Board</b>	Marlene Blum	DFS/Health Health Health		1 Restoration of Healthy Families Fairfax program 2 Support for increased funding for school nursing positions 3 Supports closure of Annandale Adult Day Health Center		Review funding for Inova Translational Medicine Institute

**Summary of statements March 10 2015 to Human Services Council**

<b>Organization</b>	<b>Individual</b>	<b>Department</b>	<b>Item</b>	<b>Remarks</b>	<b>Comments</b>	<b>Suggestions</b>
		Health		4	Need for protection of core services - disease surveillance	
<b>Advisory Social Services Board</b>	Sarah Neuman	DFS		1	Support for Public Assistance Caseworker increase	
		DFS		2	Support for 2.5 positions at the Comprehensive Domestic Violence Action Center	
		DFS		3	Support for revenue increases in SACC program	
		DFS		4	Restore Healthy Families Fairfax	
		DFS		5	Restoration of Parenting Education Program	
		DFS		6	Restore DFS Rent Relief Program	
<b>Alliance For Human Services</b>	Shannon Steene				PENDING Thursday evening meeting	

Good Evening, my name is Penney Azcarate and I am a judge in Fairfax General District Court. I want to thank you for this opportunity to address our need for two requested probation officers. I want to begin by addressing a new docket we implemented this year.

The Veteran Treatment Docket came together as a collaborative effort. Prosecutors, defense council, and judges began to notice veterans becoming involved in the criminal justice system; individuals that were pillars of the community prior to their service to our Country but now found themselves in trouble due to the struggles they were facing from their service. Multiple deployments and modern urban warfare created issues for some veterans as they came back into our community.

I have attached a brochure to your packet to give you a better understanding of our program. Briefly, it is a jail diversion, intensive probation supervision, post plea docket. Veterans are taking responsibility for their actions and voluntarily entering the docket to address substance abuse and/or mental health issues to include Post Traumatic Stress (PTS), Traumatic Brain Injury (TBI) and military sexual trauma.

Over a year ago, we started a steering committee in General District Court and a team developed. All of the individuals involved volunteer their time to attend meetings, trainings, and docket development. Our core team includes a judge, prosecutor, defense counsel, an evaluator, a coordinator, police and sheriff's representative, behavioral health services, probation officers, veteran affairs, and a mentor coordinator.

A peer veteran mentor is key to this docket and provides support to the veteran throughout the process. The goal of this docket is to serve the community and increase public safety by integrating and incorporating a coordinated treatment response thus returning law-abiding citizens to the community reducing recidivism and criminal justice costs.

The docket was dedicated on February 12<sup>th</sup> with presentations by Supervisor Cook and Chairman Bulova. Four veterans are currently enrolled. It should be noted that Fairfax County has the largest veteran population in Virginia at 85,000 and it continues to grow. This docket is being recognized throughout the Commonwealth as a model for jail diversion dockets.

Unfortunately, we will have to turn away veterans in need of this docket in the future if we cannot acquire funding for two additional probation officers. We have capped the number of veterans at twenty-five but, realistically, at this point, we cannot support more than a few more veterans.

This brings me to the point of my speaking to you this evening. Our court services department has been pivotal in this docket and continues to support it along with its other demands. For the past ten years, our probation officers continue to see their caseloads increase and current numbers show that we are at the critical point yet no new probation officer positions have been awarded in the last 10 years to compensate for the increase. The caseload in the last five years has increased 22% from 85 cases per probation officer in FY 2009 to 104 cases. To give you a perspective, the state standard caseload per probation officer is 40 SRP cases (supervised release cases are intensive) or 60 probation cases, not both. Our probation officers are currently carrying caseloads averaging 104 cases total. Of the 104 cases, 32 are SRP intensive cases, in addition to 72 probation cases.

We had requested funding for two additional probation officers in FY 2016. This request was removed from the current budget recommendation.

As intensive community supervision and evidence based practices show, treating defendants in the community and in a treatment environment not only reduces recidivism but is extremely cost beneficial. One day incarceration in Fairfax costs \$170 per day whereas intensive probation costs taxpayers only \$4 per day. That equates to a cost of \$62,000 per year per incarcerated defendant versus \$721 per year for supervision outside of jail, a true cost savings to the County and taxpayer. The estimated days in jail saved per year by using court services is 30,500 days which equates to a savings of over 5 million dollars to the county. In addition, defendants who remain in the community are more likely to remain employed and are more likely to support their families, reducing the need for other county services.

My team and our court services need your assistance and support to obtain our two needed probation officers. Not only will the veterans benefit but other defendants in need of these services and the community as a whole will benefit as well. I want to thank you for your time and consideration.



**Fairfax County General District Court  
Court Services Division  
March 2015**

**Need:** 10 Probation Counselor II's to meet state caseload standard per Probation Counselor

**Requested:** 2 Probation Counselor II's in FY 2015 and FY 2016

**Status:** Requests denied; No new positions awarded since FY 2006

- ✚ **Cost-saving programs**  
\$170/day in jail vs. \$4/day supervised outside of jail
- ✚ **Caseload increased 22% in 5 years**  
85 cases per counselor FY 2009 vs. 104 cases per counselor FY 2014
- ✚ **Veterans Treatment Docket established for coordinated treatment response**
  - Additional intensive supervision caseload
  - Increases public safety
  - Substance abuse and mental health
  - Post-Traumatic Stress Disorder and Traumatic Brain Injury
- ✚ **Supervision reporting requirements increased dramatically**  
New evidence-based practices and offender screening tools, etc.

- 
- Est. jail days saved per year: 30,500
  - Est. savings to County per year (supervision in lieu of incarceration): \$5,200,000
  - Cost per day per defendant (supervision): \$4 or \$721/year
  - Cost per day per defendant (incarcerated): \$170 or \$62,050/year
  - Caseload per Probation Counselor (state standard): 40 intensive Supervised Release Program (SRP) or 60 Probation cases, not both
  - Caseload per Probation Counselor (General District Court): 104 cases total; 32 SRP plus 72 Probation

## Ten Key Components of the Veterans Treatment Docket

- Integrates alcohol, drug treatment and mental health services with justice system case processing.
- Uses a non-adversarial approach, prosecution and defense counsel promote public safety while protecting participants' due process rights.
- Identifies eligible participants early and promptly places them in the program.
- Provides access to a continuum of alcohol, drug, mental health and other related treatment and rehabilitation services.
- Monitors abstinence through frequent alcohol and other drug testing.
- Provides a coordinated strategy for responses to participants' compliance.
- Provides essential ongoing judicial interaction with each veteran.
- Uses monitoring and evaluation to measure the achievement of program goals and gauge effectiveness.
- Includes continuing interdisciplinary education for staff to promote effective planning, implementation and operations.
- Forges partnerships among the docket, the VA, public agencies and community-based organizations to generate local support and enhance effectiveness.



### Contact Information

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To request this publication in an alternate format, call the Fairfax County General District Court at 703-246-4374 (TTY 711).

A Fairfax County, Va., publication  
February 2015



## Fairfax County Veterans Treatment Docket

A voluntary,  
court-supervised,  
comprehensive treatment  
program  
for veterans.



## The Mission

In recognition of the toll on veterans that accompanies military service, the mission of the Fairfax County Veterans Treatment Docket is to serve the community and increase public safety by integrating and incorporating a coordinated treatment response for justice-involved veterans with substance abuse and/or mental health issues with the goal of returning productive, law-abiding citizens to the community, thereby reducing recidivism and criminal justice costs.

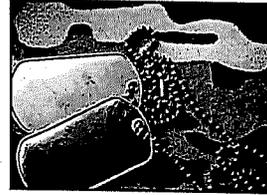
### What is Fairfax County's Veterans Treatment Docket?

The Veterans Treatment Docket is a court-supervised, comprehensive treatment program to help veterans address the issues that led to their contact with the criminal justice system. This voluntary program includes regular court appearances before a designated Veterans Treatment Docket judge. The "one-stop shop" program links veterans with the program benefits and services they have earned.

Treatment, including individual and group counseling, drug testing and regular attendance at self-help meetings, is provided through the combined effort of the Fairfax-Falls Church Community Services Board, the U.S. Department of Veterans Affairs and partnerships with other public agencies and community-based organizations.

## Program Overview

The Veterans Treatment Docket is a minimum 18-month commitment, which includes three phases. Participants sign a contract in court with the judge. It explains what is expected and the consequences of noncompliance, including relapses in recovery from substance abuse.



Program participants work with a treatment team to identify goals to work toward such as:

- Trauma-related treatment.
- Substance-use treatment.
- Medication compliance.
- Returning to school.
- Job-skills training.
- Employment.
- Reconnecting with family.
- Strengthening community supports.
- Accessing benefits.
- Securing safe and stable housing.

Volunteer mentors, who are also veterans, are a key element of the program and support program participants through their treatment process. Participants who successfully complete all three phases of the Veterans Treatment Docket are recognized at a graduation ceremony. After graduation, the veteran has the opportunity to continue with the program as a mentor.

## Program Eligibility

### Legal

Must have been discharged other than dishonorably from any branch of the U.S. military, the Reserves or the National Guard.

Misdemeanor or felony level offense with prosecutorial consent.

No history of serious or repetitive violence (reviewed by designated prosecutor and treatment team).

Exclusions: incompetence to stand trial, history of serious sex offenses, offenses involving weapons in the commission of the crime, specific violent offenses defined in §19.2-297.1, and persistent offenses unrelated to mental health or other behavioral health illnesses.

### Treatment

Diagnosed post-traumatic stress disorder (PTSD) or other trauma, mental health, substance use and/or related co-occurring disorders.

Must have identified treatment needs that can be met by the program and a willingness to engage in the services provided.



The Fairfax County Commission for Women would like to thank you for your continuing support of domestic and sexual violence services and prevention efforts in the county. While our county has made great efforts to coordinate an effective response to domestic and sexual violence, we continue to see significant needs, *reflecting the Human Service system Result Areas of Connected Individuals as well as Healthy People:*

Every month in Fairfax County, domestic violence hotlines receive over 240 calls; victims request 64 family abuse protective orders; 13 families escape to an emergency domestic violence shelter; and almost 160 domestic violence arrests are made. Domestic violence is the leading cause of homicide in our county. We therefore strongly support the County's plan to fund 2.5 positions at the comprehensive Domestic Violence Action Center in order to replace federal grant funding that is no longer available.

The need for prevention efforts to break the cycle of domestic violence and prevent future generations from harm is clear. In the first half of FY2015, of admissions to Artemis House, Fairfax County's emergency domestic violence shelter, 55% were children. At the Domestic Violence Action Center, in FY 2014, 979 children were impacted by domestic violence, 60% of them under the age of 8. Many other agencies' service statistics indicate the links between domestic violence and child abuse. In FY2014, 17% of CPS intakes involved domestic violence, and 43% of kids entering foster care reported witnessing domestic violence.

Programs like the Parenting Education Program and Healthy Families Fairfax, as well as the Good Touch Bad Touch Program, demonstrate the importance of prevention efforts focused on children *not only to the Human Service Result Areas of Successful Children and Youth, but Connected Individuals and Healthy People.* Healthy Families Fairfax can demonstrate a range of positive outcomes, including: 99.6% of families who were at high risk of child abuse or neglect experienced no abuse or neglect; and 94% of

# Health Department Staffing Ratios:



## Epidemiologist Staff Comparison

Jurisdiction	Population	Total Positions Dedicated to Epidemiology	Total Epidemiology Capacity (per 100,000 population)
City of Alexandria	148,892	3	2.01
Arlington County	224,906	4	1.78
Loudoun County	349,679	1	0.29
Prince William County	438,580	1	0.23
Montgomery County	1,016,677	2	0.20
Cobb & Douglas Counties, GA	853,569	3	0.35
Fairfax County	1,130,924	1	0.09

participants assessed demonstrated positive parenting skills.

All three of these programs are currently facing high demand, and we lack other programs in the county that can step in and cover the need. Since the average foster care placement costs over \$78,000, these programs, serving hundreds of young people for 1/20 of the cost of foster care placement or less, are actually saving the County large amounts of money. Fifty clients can participate in the Parenting Education Program for the same cost as one foster care placement.

Costs will actually be shifted to other systems that do not have in place such effective programs as these. 21% of Parenting Education Program referrals and 59% of Good Touch Bad Touch referrals come from FCPS, which will not have these resources to turn to. Others including the Office for Women and Domestic and Sexual Violence Services and ultimately public safety will face greater, and potentially much more costly, needs in the future if these programs are reduced.

For children who require more serious and expensive intervention later because they did not receive these early intervention services, the cost may be catastrophic. We urge that every effort be made to preserve these important and cost-effective prevention programs.

Thank you,

Cynthia Bhatnagar

Chair, Fairfax County Commission for Women

Sent on behalf of Cynthia Bhatnagar, Chair of the Fairfax County Commission for Women:

Thank you for the opportunity to present testimony to the Human Services Council on Tuesday evening. I would like to provide responses to questions from the Council:

### **1. The cost of DFS prevention programs versus the cost of foster care placement**

According to the Department of Family Services' program information sheets,

*In 2014, Fairfax County spent an average of \$78,658 per child for foster care placements. In contrast, it costs \$3,473 per family to provide prevention services through the Healthy Families Fairfax program which aims to keep children out of foster care.*

*In contrast, it costs \$1,480 per child in the Parenting Education Program.*

Therefore for the cost of one foster care placement, 22 families could be served through Healthy Families Fairfax ( $\$78,658/\$3,473$ ) or 53 children could be served in the Parenting Education Program ( $\$78,658/\$1,480$ ). These programs can save the County money by preventing the need for more expensive foster care.

### **2. The number of families DFS prevention programs facing reduction or elimination are currently unable to serve**

According to an information sheet provided by the Department of Family Services,

*Because of limited capacity, in FY 2014 only 20% of the mothers who were screened as high-risk were able to be served through Healthy Families Fairfax.*

According to Cheryl Keiper, Supervisor of the Parenting Education Program, they do not have a good count of the number they cannot serve. Because the program locations move around the county, they do not maintain a single waiting list. But Ms. Keiper reports that they often have more demand for each session than they can accommodate, especially for the Spanish and Infant & Toddler groups.

We were not able to obtain information about the Good Touch/Bad Touch Program.



# County of Fairfax, Virginia

Health Care Advisory Board

**MEMORANDUM**

**DATE:** March 4, 2015

**TO:** Human Services Council

**FROM:** Marlene W. Blum, Chairman  
Health Care Advisory Board (HCAB)

**SUBJECT:** Health Care Advisory Board Written Comments on FY 2016 Advertised Budget

A summary of the HCAB's adopted budget recommendations follows below and is organized by the seven Human Services Strategic Focus Areas.

## **Healthy People/Successful Children and Youth** *School Health Program*

The HCAB supports the County Executive's proposed increase of \$230,086 in funding and 2/2.0 FTE Public Health Nurse (PHN) II and 2/1.28 FTE School Health Aide (SHAs) positions to support two new Fairfax County elementary schools, Bailey's II and Ft. Belvoir. Each school is assigned a SHA that provides care for sick and injured students and administers authorized medication. A PHN is also assigned to each school to promote health and wellness in the school community; identify potential communicable diseases; assess students with health conditions; develop health care plans for students with special needs; provide support for medically fragile students who require continuous assistance and consult with school administration on implementation of mandated health requirements. At a time when student enrollment continues to increase, the HCAB supports the request for additional School Health Program personnel. While the County is nowhere near meeting the recommended nurse-to-student ratios (VA Code § 22.1—274 - one nurse per 1,000 students), these positions will keep us from falling even further behind.

## **Healthy People/Positive Living for Older Adults and People with Disabilities** *Closure of the Annandale Adult Day Health Care (ADHC) Program Site*

The HCAB supports the County Executive's proposed \$522,346 reduction to close the Annandale Adult Day Health Care Program Site, which is one of five program sites that provide services for older adults and adults with disabilities. The ADHC program allows individuals who are unable to stay at home without supervision to avoid being placed in more costly and more restrictive care environments and remain in their homes as they age. The program also benefits caregivers by providing relief from the stress of caring for an elderly family member and allowing them to maintain jobs. The closure of this site will eliminate 9/9.0 FTE positions. There are approximately 39 participants who receive services at the Annandale site with an average daily attendance of 24 individuals. It is anticipated that

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closing this program site will have minimal impact as displaced participants can be served by the remaining four ADHC centers. While travel times will be greater, transportation will be made available to these sites.

Despite extensive marketing and targeted outreach efforts, enrollment in the Adult Day Health Care Program has continued to decline. In FY 2010, average daily attendance for the entire program was 138 participants; in FY 2014, that number declined to 96.

Moreover, the landscape for adult and aging services has changed. The preponderance of assisted living facilities offering memory care and respite services, along with the Program for All Inclusive Care for the Elderly (PACE) and the increase in home care agencies has resulted in greater competition and more options for families considering adult day health care.

The Annandale ADHC is also the oldest of all the ADHC centers, and its infrastructure is aging. The Lincolnia ADHC, which is undergoing substantial renovations, will be able to accommodate displaced ADHC participants in an upgraded, modernized facility. Health Department staff will make every effort to match clients' preferences with existing capacity.

Annandale ADHC staff members, where possible and appropriate, will be given an opportunity to transfer into vacant positions at other ADHC locations, thereby enhancing participants' continuity of care and helping in their transition. While the HCAB does not yet know the full impact of this reduction, the Health Department staff will continue to assess service delivery, quality, and satisfaction among former Annandale ADHC clients. The HCAB recommends that staff carefully monitor the placement and relocation, currently being planned, of Annandale ADHC participants and staff. The HCAB will work with Health Department staff to track or monitor any needs or problems that arise during this transition period and will keep the Board of Supervisors advised.

### **Healthy People/Successful Children and Youth** *Eliminate the Healthy Families Fairfax (HFF) Program*

The HCAB opposes the County Executive's proposed \$2,199,661 reduction (\$232,693 in funding and three positions in the Health Department and \$1,966,968 in funding and 32 positions associated with the Department of Family Services and three nonprofits) to eliminate the Healthy Families Fairfax Program. This reduction also includes a decrease of \$327,946 in state revenue, for a net reduction to the General Fund of \$1,639,022.

FY 2014 program outcomes include:

#### *Prevent the occurrence or reoccurrence of child abuse or neglect*

- 99.6% of the families who were at high risk of child abuse or neglect when entering the program were later found to have not abused or neglected their children

#### *Parents demonstrate effective, positive parenting skills*

- 94% of participants assessed showed positive parenting skills

#### *Ensure healthy mothers and healthy babies*

- 97% of prenatal enrollees delivered babies with a healthy weight

- 82% of children received their immunizations as medically recommended
- 99% of mothers had an interval of at least 24 months between the target child's birth and subsequent birth

*Ensure children are developmentally on target*

- 91% of families have optimal home environments to support child development
- 100% of the children with suspected developmental delays were referred to therapeutic interventions for additional assessment and treatment if necessary

*Prepare children for school readiness*

- 96% of children who graduated from HFF transitioned into an early education program (i.e. early Head Start, Home Instruction for Parents of Preschooler Youngsters)

Since the program's inception in 1991, HFF has proven to be an effective intervention for at-risk families. Approximately 70% of all Fairfax County early childhood home visiting services aimed at strengthening parenting skills were provided by Healthy Families Fairfax in FY13, and approximately 84% of all Fairfax County early childhood home visiting aimed at strengthening parenting skills and that serve all areas in Fairfax County were provided by Healthy Families in FY2013.

Key components of the HFF program and the subsequent impact if they are eliminated include:

*Strengthening parenting capacity to prevent the occurrence or reoccurrence of child abuse and neglect.* Parents who were abused as children are more likely to abuse their children. Moreover, until their own basic needs for safety and trust are met, parents who themselves have experienced early childhood trauma often struggle in being responsive and available to their children, distort emotional content in their relationships with others, and have a restricted ability to utilize cognitive reasoning (Healthy Families America Best Practice Standards, April 2014).

*Monitoring prenatal care visits.* According to the organization Child Trends, "Mothers who receive late or no prenatal care are more likely to have babies with health problems. Mothers who do not receive prenatal care are three times more likely to give birth to a low-weight baby and their baby is five times more likely to die" (Child Trends, Late or No Prenatal Care report, updated February 2015).

*Connecting parents with a primary care provider.* A medical home is crucial to the health and optimal development of the child. In addition to being a vital resource for ongoing preventative health and wellness guidance, and medical interventions as needed, a medical home plays a crucial role in child abuse prevention as it allows another professional consistent access to the family to provide support and monitoring for the well being of the child (Healthy Families America, Best Practice Standards, April 2014).

*Educating parents about the importance of childhood immunizations and monitoring the completion of them.* Immunizations are very important in keeping children healthy. By immunizing, children are safeguarded against the potentially devastating effects of 11 vaccine-preventable diseases plus Hepatitis and the flu. The catastrophic effects of childhood diseases can lead to life-long illness or death (Healthy Families America Best Practice Standards from Prevent Child Abuse Virginia, April 2014).

*Providing information about the importance of family planning.* Pregnancy within 18 months of giving birth is associated with an increased risk of: low birth weight, small size for gestational age or preterm birth. In addition, some experts believe that closely spaced pregnancies do not give a mother enough time to recover from the physical stress of one pregnancy before moving on to the next (Family Planning: Get the Facts about Family Planning, Mayo Clinic.org, April 2014).

*Developing and monitoring family goal plans based on each family's strengths and needs.* Supporting parents in achieving success changes the way parents view the world, increases self-efficacy, enhances internal motivation and builds protective factors. As a result, families feel less like victims and more in control of their lives (Healthy Families America Best Practice Standards, April 2014).

*Conducting regular screening for developmental delays and referring children with suspected delays to early intervention services.* If a child is found to have developmental delays, it is important that intervention occurs early. Early intervention helps a child advance in all areas of development and is critical for the child to develop good self esteem (How Kids Develop, CASRC, 2008).

*Conducting depression screening with all families using a standardized instrument.* When parents are depressed, there are significant impacts for the parent-child relationship including the inability for the parent to be emotionally available to their infant, the inability for parents to assist with physical and emotional regulation of their infant (read cues and respond in a timely and sensitive manner), and the inability of parents to provide intellectual stimulation for their infant. Screening for depression, both during the prenatal and postnatal period, allows staff to assist parents become aware of their depression and implement a plan for how to address it (Healthy Families America Best Practice Standards, April 2014).

*Conducting assessments of the quality of the home environment.* "All areas of development are closely intertwined in the early years, so physical harm can damage emotional, social, cognitive and language development." HFF assesses safety in the home as well as parental involvement, opportunities for daily stimulation, parental responsivity, and parental organization ([www.zerotothree.org](http://www.zerotothree.org))

*Connect family with informal and community resources.* HFF connects families with informal and community resources to order to increase families' social connections and concrete supports for the goal of greater self-sufficiency (thus less dependency on formal supports).

*Preparing children for school readiness by educating parenting about the importance of exposing children to verbal and written communication and, upon graduation from HFF, enrolling children in an early education experience.* "Learning to read and write doesn't start in kindergarten or first grade. Developing language and literacy skills begins at birth through everyday loving interactions—sharing books, telling stories, singing songs, and talking to one another" ([www.zerotothree.org](http://www.zerotothree.org)). "Kindergarten teachers report that a child's social and emotional literacy-the development of self-control, respect for others, a sense of confidence and competence- is vital for success in kindergarten. Without these

skills, children are at a greater disadvantage in school” (Center on Families, Communities, Schools, and Children’s Learning, 1994).

Additionally, there is more demand for this service than is able to be met. In FY2014, 2,303 mothers who received maternity services from the Health Department were screened for risk factors related to child abuse and neglect. Of those, 1,900 (or 83%) turned out to have high enough risk for potential enrollment in HFF. However, due to limited program capacity, only 384 (or 20%) were assessed by nurses assigned to the Healthy Families program.

Other early childhood home visiting programs in the community have recently lost funding and are unable to serve this population. Therefore, it is not anticipated that any community organizations will have the capacity to absorb the number of families that would be displaced from eliminating HFF.

## **Infrastructure Support**

### *Health Department*

County agencies have spent years managing efficiencies but as the County Executive observed, there is little left to cut. Even among core, mandated services, the County is rapidly losing ground. The surveillance and investigation of illness and disease is just one such example.

The Fairfax County Health Department’s epidemiology capacity is strained and relative to other jurisdictions in the metropolitan region (e.g., City of Alexandria, Arlington County, Loudoun County, Prince William County, and Montgomery County, MD), continues to be the least robust (Attachment 1: Health Department Staffing Ratios). Epidemiologists are disease detectives who get to the root of health problems and outbreaks in a community. The paucity of epidemiology capacity in the Health Department for both infectious and chronic diseases is a serious gap that needs to be addressed to enable the department to better monitor the health status of the community and evaluate the effectiveness, accessibility, and quality of personal and population-based health services, while researching new insights and innovative solutions to health problems within the community.

### **Inova Translational Medicine Institute (ITMI)**

Consistent with last year’s recommendation, the HCAB continues to oppose the County Executive’s proposed \$500,000 in Contributory Funding for the Inova Translational Medicine Institute (ITMI). At a time when cuts are being made in critical human services programs, the HCAB believes that spending County taxpayer dollars in support of ITMI is not the best use of public funds.

The County Executive noted in his presentation to the Board of Supervisors on February 17 that the County is unable to fund all of its priorities. Therefore, the HCAB feels that contributing funding to ITMI when much-needed County programs are being cut or eliminated altogether, is ill-advised, considering, to the HCAB’s knowledge, that there are no measurable goals, performance outcomes, or key milestones for ITMI.

If the Council has questions about our recommendations, please contact the HCAB.

Memorandum to the Human Services Council  
March 4, 2015  
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**Attachments:**

Attachment 1: Health Department Staffing Ratios

Human Services Council – speaking on behalf of the Parenting Education Program

March 10, 2015

I am Barbara Dickman, representing Grace Presbyterian Church in Springfield, Virginia.

Thank you for the opportunity to provide information to the Council as you address the many excellent Human Services programs in our county. We appreciate your support before the Board of Supervisors as they make their hard budget decisions.

The reason I am here tonight is that since 2003, I have been a volunteer facilitator and strong supporter of the Parenting Education Program, formerly called Nurturing Parenting Program, and have taught the Body Safety/Good Touch-Bad Touch lessons within the curriculum since 2008. I see the value of this program through the lenses of a volunteer in the Fairfax County Public School system for more than 20 years. I have work experience as a full time classroom Instructional Assistant in grades K-3 with an Alternative Learning Center (once known as the Summit Program), and now as either a substitute Teacher or substitute Instructional Assistant in the Family and Early Childhood Education Program/Head Start.

Parenting Education Programs engage our Fairfax County at-risk families where parenting skills are weak, where the possibility of long-term emotional and perhaps physical abuse is real. They are doing great work and deserve your support.

The Parenting Education Program is aimed at stopping the intergenerational cycle of dysfunction in families through 12-, 13-, and 24-week programs that include parents and their children from infants to 18 year olds. Nearly a quarter of the 384 families and 511 children in 2014 were referred by Fairfax County Schools or mental health providers. Two out of every five are referred to the program each year by Child Protective Services, Foster Care & Adoption, other Department of Family Services or the Courts.

The demand for parenting classes has always exceeded the supply. The Parenting Education program under the Department of Family Services offers the greatest scope, quantity and frequency of parenting classes in the county. In addition to the availability, a significant cost-benefit advantage is available for the Parenting Education program through their partnerships with local organizations. Where I facilitate, at Grace Presbyterian Church in Springfield, we have partnered with the County for nearly 12 years. The availability of trained, volunteer facilitators and child care providers, a good facility and a hot, nutritious meal prepared and served by volunteers every week makes the challenges facing the limited paid staff a little easier to handle.

At the weekly evening parenting classes the children are separated into several age-appropriate learning levels. Topics for parents and children are the similar but tailored to enhance learning and ensure that each participant can engage directly with a trained facilitator.

It costs the County almost \$80,000 per child in foster care placements, an estimated \$15,000 per-child, per year for Head Start (with over 1,000 on waiting lists). Yet the cost for Parenting Education is less than \$1,480 per child.

I have seen first-hand that our county's Parenting Education Programs make a difference. I have had children that I taught in Nurturing Parenting later end up in a classroom where I was assisting. I have had the kids thank me, and, maybe more important, the mother or father thank me. Of course, because

of the confidentiality of the program we can't acknowledge that they have been in class I facilitated, but they can. And when they do, when they say that this Fairfax County program has made a difference in their lives, maybe saved a family, it is a wonderful feeling.

Once again, thank you for the opportunity to speak with you and thank you for your support to the Parenting Education Program.

Human Services Council – speaking on behalf of the Body Safety Program/Good Touch-Bad Touch

March 10, 2015

I am Barbara Dickman, representing Grace Presbyterian Church in Springfield, Virginia.

Thank you for the opportunity to provide information to the Council as you address the many excellent Human Services programs in our county. We appreciate your support before the Board of Supervisors as they make their hard budget decisions.

The reason I am here tonight is that since 2008, I have been a volunteer facilitator and strong supporter of the Body Safety Program/Good Touch-Bad Touch and have taught it primarily through the Parenting Education Program (formerly called Nurturing Parenting Program) although Good Touch-Bad Touch is available much more widely in schools, community programs, faith-based programs and other venues.

I see the value of this program through the lenses of a volunteer in the Fairfax County Public School system for more than 20 years. I have work experience as a full time classroom Instructional Assistant in grades K-3 with an Alternative Learning Center (once known as the Summit Program), and now as either a substitute Teacher or substitute Instructional Assistant in the Family and Early Childhood Education Program/Head Start.

The news last fall was full of stories of celebrities engaged in domestic abuse. In one highlighted case a prominent athlete, accused of striking his son with a switch, explained that punishment like that was normal when he was growing up. The phrase “you’re gonna get a wuppin’” was in books, on TV and in many of our homes and neighborhoods. Teachers rapped unruly students on the knuckles with rulers. Having bullies around was just a part of growing up, something you learned to avoid, or live with.

Today, that kind of discipline and behavior is not acceptable, not in our schools, not in our neighborhoods, not in our homes. But in all too many cases, young parents today who may have been raised in a different environment simply don’t understand what is right and wrong, or the reasons why certain behaviors aren’t appropriate. Their children often don’t know, either – how could they?

Corporal punishment is often the preferred means of discipline used by abusive parents. All too often those parents were raised in an abusive house and know no other way. The abused child also knows no other way, and it passes from generation to generation.

We have also heard stories of sexual misconduct, far too often between an adult in an authority position and a child. Sometimes even between children.

These inappropriate behaviors are equal opportunity offenses – they know no boundaries with regard to sex, race, religion, national origin or anything else. They are based on ignorance, ignorance of basic human values and respect for others as individuals.

There are any number of underlying causes:

Parents expect more than any child can achieve, and don’t understand the various stages of growth development

Parents aren’t able to place a child’s needs ahead of their own

Corporal punishment is immediate, often reflecting what they were punished for, and the way they were punished

Parents see their children growing, becoming independent, stretching the limits, and strike out to stop it. We immediately think of teenagers, but it happens at every age – “terrible-tuos” for example.

Good Touch-Bad Touch is focused on specific behaviors, letting adults know what is and isn't appropriate, letting children learn the same things, and perhaps most important, letting children know that they can and should object to bad touches. The difference between a four year old cuddling up in grandma's lap reading a book and a less familiar adult that invites them to “Come sit on my lap.”

Using the example of the Kindergarten and First Grade curriculum: children are taught to know the difference between good touch, bad touch and (child) sexual abuse touch; ...to understand body safety and the five body safety rules: “It's My Body” (and I have a right to be safe); ... the “I have the uh-oh feeling.” (and I need to ask a question); “Say NO!” (in a great big voice and get away); “Tell Someone” (who listens and believes me).and that sexual abuse is “NEVER MY FAULT!”

Our goal is to stop bad touches before they happen, teach skills to reject them when they do happen, and still encourage the Good Touch that is such a big part of nurturing.

Once again, thank you for the opportunity to speak with you and thank you for your support to the Body Safety/Good Touch-Bad Touch programs.

## Human Services Council Budget Input for FY 2016

<b>Agency Name: Fairfax-Falls Church Community Services Board (CSB)</b>	
<p><b>Current key demands:</b> Current initiatives and strategies that demand significant allocation of budgeted financial resources going forward</p>	<p><b>Current Impact Demands</b></p> <ul style="list-style-type: none"> <li>• State mandated acute (emergency) services - @ \$9.25 million expenditures; urgent need to fill many staff vacancies in this area and mandated changes in treatment standards and qualifications are the primary challenges in this critical service area. As a mandated service, no cuts were proposed or recommended for this area.</li> <li>• Intellectual Disability Employment and Day Services, including directly operated residential @ \$31.5 million expenditures serving people with various levels of disability, from those who need 24/7 support and care to those who are able to live more independently. Largely contracted, this service area, though not mandated, receives high levels of community support. A major nationwide movement towards employment as a first choice for persons with disabilities, known as Employment First, is taking hold in Fairfax County. As a result current providers are shifting services away from sheltered employment models to other, usually more intense and costly forms of service. In addition, the new model is a part of a state Department of Justice (DOJ) implementation for Medicaid waiver services in Virginia. The future funding implications are currently being evaluated, but the expected fiscal impact to the CSB may be as high as \$1.6 million a year in future years to maintain the same or similar intensity, scope and duration of services for this population. In addition, the CSB continues to experience ongoing unfunded mandates placed upon ID Support Coordination services as a result of the state’s DOJ settlement. Adhering to these mandates has caused the CSB to decrease caseload sizes by 15-20% to keep up with additional requirements.</li> <li>• Services for people with serious mental illness, substance abuse and co-occurring disorders comprise the bulk of the CSB operations, split among various treatment options from outpatient services to residential services with delivery tailored to the unique needs of youth, families, and adults. Taken together these services comprise approximately \$75.3 million in expenditures. The CSB is currently preparing for the FY 2017 Lines of Business review and has already begun a process to study and recommend programmatic adjustments to improve effectiveness by focusing on proven treatment methods and redirecting resources away from less effective interventions, as reflected in the proposed adjustments that were recommend to the County Executive for inclusion in the FY 2016 budget.</li> <li>• Other initiatives are undertaken in the areas of suicide prevention, prescription drug abuse, heroin and opiate use, the implementation of the Governor’s Access Program, the opening of the new</li> </ul>

Merrifield Center, integration of primary care and behavioral health care, community concerns about opiate addiction, revenue maximization and corporate compliance. These efforts reflect the agency's need to respond quickly to behavioral health issues when they emerge within the community. Efforts also emphasize the need to maintain a sound infrastructure that will minimize corporate risk to the CSB and the county given the complex regulations and funding streams the CSB must consistently navigate as a health care entity funded in part with Medicaid and Medicare.

- In addition, it should be noted that the CSB is currently experiencing extraordinarily high level of staff vacancies, particularly among positions requiring highly skilled and qualified personnel. The CSB's overall current staff vacancy rate is approximately 13.5%. The CSB has identified a number of factors contributing to these vacancies and is working closely with the County Department of Human Resources to improve hiring rates and retention potential.

**Future Impact Demands**

- In response to the DOJ Settlement Agreement's emphasis on providing community-based services in integrated settings, the Department of Behavioral Health and Developmental Services (DBHDS) began the process of closing all but one training center and downsizing the census at the remaining center. Most of the 65 Fairfax County residents currently living in training centers want to remain in Northern Virginia, and some individuals and families would like the training centers to remain open. While the CSB has partnered with DBHDS to expand community capacity, adequate capacity has not yet been achieved and progress is hampered by the lack of a clear and sustainable funding plan to meet the needs for services currently provided in the training centers by the state, but not covered under Medicaid Waiver when those individuals move to community-based settings. The state initiated "Bridge funding" and now has "Exceptional Supports Rates" as a temporary tool on a case-by-case basis. This approach has not been largely embraced by providers. While Waiver rates and structure reform are currently underway, final decisions and implementation will not be done before 2017. We remain concerned that this reform will not provide a sustainable solution and the CSB will be faced with inadequate funding to address the needs of these individuals who will need to transition out of the training centers.
- Medicaid Waiver Reimbursement Proposed Rates: The DBHDS has been studying redesign options for Intellectual Disability (ID) Waiver and Developmental Disability (DD) Waiver programs for over two years. Currently, there are numerous changes being considered which redefine not just the waiver rates, but also services, types of waivers, and eligibility. Any change in the ID/DD waiver structure will have a significant impact on how the CSB provides services, and will even have a greater effect on the partner agencies the CSB contracts with for community services. Nothing is finalized and the impact of these changes on revenues cannot be accurately projected at this time. As of this date, the only related proposal before the State Legislature is changing the Day Supports Waiver to the "Building Independence Waiver" and increasing slots from 300 to 565 for the

	<p>biennium. It is anticipated DBHDS will be proposing more significant and comprehensive changes during the 2016 legislative session.</p>
<p><b>Top 3 reductions exacerbating current demands through impacts on efficiency, effectiveness or quality:</b> (will include infrastructure and personnel reductions)</p>	<p><b>Before considering this question, it is vitally important to note and understand that none of the reductions proposed in the County Executive’s budget are expected to exacerbate demand or negatively impact efficiency, effectiveness or quality of services in the near term.</b></p> <p>Indeed, the CSB Board went through a painstaking process to ensure that these proposed cuts were treated as a strategic opportunity to examine less effective programs and operations to help the agency better address some of the future challenges noted above. Each proposed reduction was examined for its impact in terms of the number of clients affected, the amount of funding that could be saved or redirected, the effectiveness of the treatment for the individuals served, the extent of community reliance upon the program and whether effective treatment alternatives were available in the community without requiring direct county support. In many cases programs were not merely cut, but instead restructured with less costly positions, or more cost-effective means of service delivery. The attached chart reflects the CSB Board’s priorities during their deliberations on the proposed reductions prior to submission to the County Executive. <b>It should be noted that the proposed elimination of 29 positions from the CSB will reduce the CSB’s flexibility to retool positions within the next few years to reposition services strategically to provide more effective services to a larger client population in keeping with evidence based practices.</b></p> <p>The following three items in the Advertised Budget were listed last (meaning to be taken last) by the CSB Board during their deliberations and prioritization of the recommended reductions.</p> <ol style="list-style-type: none"> <li>1. <b>Jail-Based Behavioral Health Services</b> – eliminate one Service Director position and reclassify a Senior Clinician to a Mental Health Therapist position. The intent of this reduction was to take advantage of the retirement of a senior manager and restructure a senior administrative position to provide more direct clinical services to the jail population. The duties of the service director will be assumed by another service director in order to establish more cost effective span of control within the agency without affecting on-site operations. The reclassification will actually improve direct services by adding another direct service position. If this reduction were reversed, the CSB would propose to reclassify the service director position to another clinical staff for the program.</li> <li>2. <b>Assisted Community Residential services</b> – eliminate 2 positions in directly operated group homes for individuals with intellectual disabilities and recognize savings in operating expenses from prior consolidation of directly operated group homes. This reduction is part of an ongoing process of examination of service delivery options which resulted in the closing of one directly</li> </ol>

	<p>operated group home in FY 2013 and the potential for closing others in the future as the agency looks to transition to a more community based model. Residents formerly served by directly operated group homes are placed with privately operated facilities in keeping with their individual needs. Restoration of this item would permit the CSB to repurpose these positions to more critically needed areas.</p> <p>3. <b>Residential Treatment and Supportive Community Residential Services</b> – eliminate a total of 8 full-time mental health and substance abuse positions through attrition and contract services. Although this proposed cut allows the CSB to maintain its current service capacity in this area, hiring contracted staff has caused an increase in administrative time in supervision and training. In addition, the CSB is experiencing difficulties finding appropriate candidates with some positions in the contract due to the present job market and the necessary skill set needed. Restoration of this item would permit the CSB more time to determine the most effective mix of direct service and contract staff in light of market availability for these skill sets.</p>
<p><b>Top 3 agency priorities impacted by the budget reductions:</b> Use the total list of agency reductions provided by DAHS. Budget reductions you identify for this section may also come from other human services agencies.</p>	<p>The three primary goals of the CSB as published in the Strategic Plan are:</p> <ul style="list-style-type: none"> <li>• Our services support individuals and families to live self-determined and healthy lives.</li> <li>• The workforce is capable and dedicated to carry out the CSB mission.</li> <li>• The CSB is financially and operationally sound.</li> </ul> <p>All of the reductions to some degree affect the service goal; however, the CSB has worked to minimize the impacts to our various client populations while at the same time attempting to strengthen our fiscal position with these reductions. Within the services goal, the CSB has identified 3 areas that could be negatively affected by these reductions:</p> <ol style="list-style-type: none"> <li>1. Increase accessibility to services so individuals and their families receive services when and where needed.</li> <li>2. Provide supports and services to promote an individual’s access to primary care, housing and employment.</li> <li>3. Provide or coordinate an array of services leading to the attainment of personal goals/objectives as defined by each individual.</li> </ol> <p>Given the size and diversity of the CSB client population, identifying a single, specific reduction that affects a significant portion is difficult. However, the following groups of reductions are expected to have a negative impact as indicated:</p> <ol style="list-style-type: none"> <li>1. <b>Services to the homeless</b> – some of CSB’s most vulnerable populations are chronically homeless or have difficulty attaining and sustaining affordable housing. The reductions represented by</li> </ol>

OPEH and HCD will make it more difficult to place CSB clients in long term, stable environments that are conducive to recovery from mental illness. In addition, it takes away a valuable resource to help the homeless population remain in affordable permanent housing.

2. **Access to primary health care** – the behavioral health professional community has long recognized the great potential to achieve long-term, lasting health care results by recognizing that individuals with serious mental illness have equally serious co-occurring primary health conditions such as diabetes, or heart conditions that are exacerbated by their mental illness. The CSB is currently exploring numerous opportunities through the county and the elsewhere to improve access to primary health care for our clients. The proposed closing of the Annandale Adult Day Care program site will reduce those opportunities.
3. **Access to behavioral health services** – the elimination of 8 positions noted above in the area of residential treatment and supportive community services are expected to potentially affect the 980 individuals now being served. While capacity will remain at current levels, long-term quality of care and effectiveness may decline if retention of contract personnel becomes an issue.

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- The CAAB has for many years identified program areas it feels are the most critical to ensuring that all county residents have the opportunity to achieve economic security. They are:
  - Affordable Child Care
  - Affordable Health Care
  - Affordable Housing
  - Job Training/Education
  
- These priorities correspond to four of the six Human Services Result Areas:
  - Successful Children and Youth
  - Healthy People
  - Sustainable Housing
  - Economic Self Sufficiency
  
- By addressing issues such as poverty, education, housing & inequality, the county helps prevent many physical, behavioral & social problems that affect the quality of life of all residents. Fairfax County does this by providing services that help:
  - Students remain healthy both mentally and physically, prepared to learn in our outstanding school system
  - Workers obtain the skills and supports necessary to be part of the workforce that attracts and retains businesses
  - Young people have opportunities and activities available so they and our community remain safe
  - In other words, the Human Services system benefits **everyone** in the county by improving quality of life for all residents of Fairfax County, not just those most at need.
  
- These prevention programs are the most cost effective types of programs compared to intensive interventions provided after the fact. It costs much less to try and keep a family from falling apart than it does to try and put it back together. Keep this in mind as we discuss the FY 16 budget as many of the more egregious reductions are in prevention services.

**FY 16 Budget**

Before discussing specific issues with the FY 16 Budget, the CAAB would like to highlight the fact that the Department of Family Services continues to take a disproportionate share of budget cuts because of the large percentage of their budget which is not supported by the General Fund.

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- o Only 43% of DFS's budget comes from the General Fund, and only 29% consists of non-mandated (or discretionary) services, yet the Department is required to submit budget cuts based on the size of its total DFS budget.
  - o As a result, what was intended as a 3% budget reduction, in reality is greater than 10% reduction in discretionary funds for DFS.
  - o In the future, DFS should only be required to submit reductions based on the portion of its budget that is supported by the General Fund.
- There are a number examples of new funding in the FY 16 budget that increase services in these vital areas. The CAAB appreciates the County Executive putting these items in the budget and asks the Board of Supervisors to retain them:
    - o Public Assistance Caseworkers The CAAB supports addressing increasing public assistance caseloads in the Self-Sufficiency Division by adding \$2.46M and 20 new positions (offset by \$1.89 million in revenue) to address the dramatic 80% increase in public assistance cases since 2008.
    - o SACC Fee Restructuring - The CAAB supports restructuring of SACC fees provided the sliding fee scale remains untouched. These changes are necessary in order to ensure the ongoing availability of affordable child care options for low income working families by bringing in an additional \$800,000 in revenue.
    - o School Readiness Funding - The increased school readiness funding (\$960,000) expands early childhood education to more low income residents.
    - o CSB Intellectual Disability Graduates - This funding supports day support and employment services for all 79 June 2015 special education graduates.
  - The CAAB has concerns about a number of the FY 16 proposed Human Services Budget adjustments, especially those which impact programs that address the CAAB priorities:

Affordable Health Care/Healthy People -

- o **Healthy Families Fairfax** is an example of a prevention program that pays off down the road. For example:
  - 97% of prenatal enrollees delivering babies with a healthy birth weight
  - 82% of participating children receiving immunizations as recommended and
  - 96% of children who complete the program transitioning to an early childhood education programs.

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This program saves the county thousands of dollars in avoided health care and social services costs and prepares children to succeed in school. To be frank, Healthy Families never should have been put up for reduction, and it would not have been if DFS was only required to submit cuts on the General Fund portion of its budget. This program (\$1.8M and 12 positions) should be restored with the unallocated funds the County Executive left to the Board of Supervisors.

***Good Touch Bad Touch Program*** - This is another important prevention program that teaches nearly 1,000 children per year important protective skills and information to help prevent sexual abuse. It is not clear that there is an alternative provider for this free program. (\$85,000 and 1 position)

Affordable Child Care/Successful Children and Youth -

- o ***Parenting Education*** is being cut by 50% (\$26,816) and 2 positions. According to experts, of all the primary prevention strategies tested, parenting education for adults and adolescents before they become parents is the strategy most likely to prevent initial injuries to children. One advantage this program has over similar programs offered in the county, such as those offered by FCPS, is that it is free and available at multiple locations throughout the County compared to an average of around \$100 for two parents to attend classes that are usually held at one location.

With the elimination of Healthy Families and Good Touch Bad Touch, the County's prevention services for young people are taking a severe hit and disproportionately impact low-income residents. It is not too much a stretch to imagine if these programs were eliminated, the incidence of children with special needs would increase and the schools would begin requesting additional resources to help address their issues. There also would be impacts on court and associated social services managing caseloads. If you do cut these programs, pay close attention to the results of future youth behavior surveys to learn the real impact of this decision.

Affordable Housing/Sustainable Housing

- o The \$275,000 cut of the ***DFS Rent Relief Program*** will eliminate the provision of up to \$575 once per year for rent relief to primarily elderly and disabled clients who see their rent increase due to the increase in property tax rates being passed on by their landlords. (\$10,000).
- o ***Legal Services for People with Disabilities*** provides free legal services for low income persons with disabilities in a number of areas including housing discrimination, employment discrimination and social security disability denials. (\$51,017)

Job Training & Education/Economic Self Sufficiency -

- o ***One Social Services Specialist II*** - Eliminates one of the 34 positions in the Coordinated Services Planning Unit (the 222 line) which assists County residents

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facing serious issues such as pending eviction, utility cut-off, homelessness and basic food assistance needs. While this reduction will only increase wait time to talk to a specialist by a small amount, the CAAB believes it is unwise to reduce capacity in this area while need for services is increasing. (\$70,000 and 1 position)

- o ***Eliminate One DNCS Community Developer*** – Eliminating this position would leave just 3 positions coordinating community engagement activities with the County’s residents and partners (nonprofits, faith-based organizations and neighborhood associations). At a time when resources are shrinking, demands for public-private partnerships has never been more critical. (\$85,000 and 1 Position)
- Although the CAAB believes that most of the rest of proposed FY 16 Budget reductions are regrettably necessary, it recognizes that the County human services system now has very little margin for error. **From here on out, budget reductions will result in program eliminations.** The Board of Supervisors must consider other sources of revenue and look other places in the budget that have previously been held harmless for reductions
- The CAAB suggests one possible source of examination is the Contributory Fund. Its total funding declined due to the elimination of support to the World Police and Fire Games, but it was otherwise untouched. The CAAB would argue that many of the organizations supported in this fund are not as high priority as some of the services proposed for reduction or elimination which will have dramatic impacts on our low-income populations.

**Summary**

- The CAAB is very concerned over the loss of critical prevention services, especially the Healthy Families Fairfax Program, Parenting Prevention Program and Good Touch Bad Touch and would like to see them restored.
- The CAAB believes that some of these critical prevention programs and their associated \$300,000 in federal revenue would not have been offered up as reductions if DFS were only required to make cuts on the General Fund portion of its budget.
- The BOS should consider cuts in areas of the budget that have previously remained untouched by proposed reductions, such as the Contributory Fund.

## Q&A from CAAB Presentation to Human Services Council on March 10, 2015

NOTE: Following this Q&A are details of the Contributory Fund disbursements from FY08, FY11, and FY16 for your information.

### Q. What programs in the Contributory Fund (Fund #10030) are less/more of a priority as potential source(s) to offset Human Services program restorations?

A: A number of programs that receive county funding are providing comparable services to additional such ventures other programs in the county, which do not receive county funding. How were these few chosen? How often are they reviewed for return on investment? What criteria is used to determine continuing funding? Agencies throughout county government have been directed to reduce expenditures or find efficiencies nearly every year since the recession began in 2008.

A review of the fund since FY08 shows an overall reduction of about \$1 million along with a drop in the number of recipient programs. However, to be fair, the Contributory Fund recipient programs and associated funding have changed over time. Some have been eliminated altogether--notably the Lorton Arts Foundation's \$1 million annual support over the years--others have had funding decreased, but some have seen county funding rise.

~~To be fair, the Contributory Fund recipient programs and associated funding have changed over time. Some have been eliminated altogether--notably the Lorton Arts Foundation's \$1 million annual support over the year--others have had funding decreased and some have seen county funding rise.~~

In my personal opinion Generally, CAAB believes funding for activities that generate tax revenues through tourism, restaurant dining, and the like makes practical sense to maintain if there's evidence that loss of the county funds would negatively impact attendance and its associated tax-revenue generation. The CAAB The County has to question the greater philosophical questions at play as well as accountability of the recipient programs--return on investment, spending priorities in a time of economic distress, annual reviews and justification comparable to other county agencies, etc.

Consider:

- the \$100,000 given to [Air & Space Museum's Udvar-Hazy Center](#) is targeted toward promoting school/student attendance at the same time that FCPS is significantly reducing field trips.
- to date Fairfax County has contributed more than \$2 million to the capital campaign for the Army Museum at Ft. Belvoir, since donations began in 2005. This qualifies the county as a member of the 5-Star Circle of Distinction, the second-highest giving level available and more than contributions from the Commonwealth of VA, DynCorp, Exelis, the VFW, Purple Heart and Shell Oil, to name just a few. Fifteen years after the \$200 million capital campaign was begun, it is not complete. Were Fairfax County to reduce, eliminate or temporarily suspend its contributions to the capital campaign, how would it impact the museum's construction? The museum is expected to attract about 750,000 visitors annually; are these expected to be new/unduplicated or will they be individuals adding the museum as an additional point of interest?
- Vienna Teen Center provides free programs to any teen in the Town of Vienna, with support provided by the FC Contributory Fund. How/why is Vienna's effort the only one supported by the county in this manner? How many (unique) teens participate? Is this teen-oriented effort serving youth who are particularly at-risk or in need?

- Two programs--Earth Sangha and Releaf Fairfax--support planting of trees. There's no question that air quality is affected by tree cover which, in turn, can impact health. Why, then, does CAAB question these annual expenditures? Simply put, county budget planners are hoping the cuts proposed for Human Services areas will be 'picked up' by community-based providers such as faith-based organizations, private contributions, or volunteers. Why, then, should groups like the Arbor Day Foundation and like-minded volunteers be relied on to plant trees? Comparably, are land-use decisions prompting a need for tree restoration rather than accounting for it?
- Finally, CAAB agrees with the [Health Care Advisory Board Human Services Alliance](#) that a half a million dollars for INOVA's translational medicine facility could be eliminated for all the reasons [Chair](#) Marlene Blum mentioned during the HSC meeting.

**Q. How would CAAB prioritize its list of cuts to be restored?**

A. [After additional consideration](#) Frankly, this is an exercise the CAAB [respectfully declines chooses not](#) to undertake. Every program proposed for elimination will have a disproportionate impact on the community we serve, namely low-income county residents. Each program elimination would affect a different segment of that population. In our estimation each program reduction would also have a disproportionate and higher cost associated with remedying effects in the future, making no economic sense in healthy or depressed economic times.

Testimony for Human Services Council  
Advisory Social Services Board, Sarah Newman, Vice-Chair, 3/10/15

Good Evening. My name is Sarah Newman, Vice-Chair of the Advisory Social Services Board. Thank you for the opportunity to speak to the Human Services Council tonight.

Each year it gets harder and harder to cut budgets and not significantly impact the programs and services of the Dept. of Family Services. Unfortunately, we have finally hit that tipping point where budget reductions will now result in program reductions, eliminations or waiting lists.

It is important to understand that DFS takes a disproportionate cut when asked to make the across the board 3% reduction. Nearly 2/3 of the DFS budget, or over \$66 Million comes from State and Federal funding. Only 43% of DFS's budget comes from the General Fund, and only 29% consists of non-mandated (or discretionary) services, yet the Department is required to submit budget cuts based on the size of its total DFS budget. This, in effect, is a 10% reduction in discretionary funds, rather than a 3% reduction.

Since FY2008, the net cost for DFS to the county has remained essentially flat, going from \$81M in 2008 and in FY 2015 it is \$80.8M. During this time:

- Public Assistance Caseload increased by more than 80%
- Domestic Violence Survivor Services Increased by nearly 30%
- Adult Protective Services Investigations grew by nearly 20%

Despite the wealth in Fairfax County, 65,000 people live below the poverty level, and over 170,000 live below 200% of the poverty level. 1 in 6 residents may need assistance to make ends meet. The suburbanization of poverty is very real in Fairfax County

ASSB supports the DFS funding enhancements which provide for additional caseload positions, increased revenue strategies, additional staffing for new facilities and responses to Board of Supervisors initiatives.

Some budget reductions are reasonable and represent some of the last efficiencies that can be wrung out of our system. However, of greatest concern to ASSB is the reduction in Human Services program, and most particularly, the prevention programs. In these budget discussions we have to be willing to look at the way we spend our money, and prevention programs are a good investment. They have the greatest likelihood of reaching impact goals. These

Healthy Families Fairfax County, Parenting Education Program, and Good Touch/Bad Touch are programs that prevent child abuse, sexual abuse and child neglect.

These prevention programs engage parents, help prevent low birth weight, lower juvenile delinquency rates, help prevent teenage pregnancy and support school readiness by addressing child well-being. Eliminating these services would ultimately cost the county money -- \$78,000 per child for foster care placements in contrast to \$3,473 per family to provide prevention services through the Healthy Families Fairfax program which works to keep children out of foster care. DFS could come close to preserving all three of these programs if the 3% reduction was just on General Fund budget impact.

In addition, ASSB is concerned about the impact of the \$275,000 cut of the DFS Rent Relief Program. This will eliminate the provision of up to \$575 once per year to primarily elderly and disabled clients who see their rent increase due to rising property taxes being passed on by their landlords. Given the 80% increase in public assistance clients, this is a relatively small amount of funding which help prevent some of our most vulnerable neighbors from falling on hard times.

### **ASSB's Recommendations**

- The ASSB believes the Board of Supervisors should preserve critical prevention services which save the county money in the long run while maintaining capacity to address increasing and changing caseloads, such as:
  - Healthy Families Fairfax
  - Parenting Education
  - DSF Rent Relief Program
  
- Furthermore, we recommend that the Board of Supervisors should not consider any additional reductions in funding for Human Services in this environment.



## **FAIRFAX COUNTY ALLIANCE FOR HUMAN SERVICES**

March 10, 2015

Dear Fairfax County Human Services Council,

The Fairfax County Alliance for Human Services (the Alliance) is a network of consumers, providers and advocates. Our efforts are aimed at improving the quality of life for all of our residents.

We have not yet had our March meeting where we will adopt our formal position on the budget. Therefore what I offer tonight is our initial perspective and some of our questions currently being deliberated. We will share with you our official position paper once it is approved.

Although we are not commenting yet on specific cuts, we are very concerned by the significant reductions in human services in the draft budget. Our hope is that the HSC will do its usual thorough and well-planned commentary detailing to the Board of Supervisors why these will do great harm to our county's most vulnerable populations.

We have reviewed budget materials and have heard about the desire to invest in priorities that include early childhood development, addressing domestic violence and the needs of FCPS graduates with intellectual and development disabilities, for example. These are definitely important priorities for a healthy community. What is not evident to us, however, is how this matches with some of the proposed cuts. For example, the Healthy Families Fairfax program is proposed for elimination while it is built on developing healthy children (early childhood development) and preventing abuse (domestic violence). Or consider the elimination of the Rent Relief Program, whose current population served is overwhelmingly the disabled living independently in the community. Those that aren't disabled are senior citizens living independently in the community. This is in the context of needing to find safe, suitable housing in the community for more people with intellectual and developmental disabilities.

The point of these examples is that it is not clear how the decisions for proposed cuts were made. And from our current viewpoint, the stated priorities do not easily line up with service reductions and eliminations. We will do a more substantive review of budget specifics in the very near future. We look forward to sharing that perspective with the general public and advocating directly with members of the Board of Supervisors. Our request to you is that you view the proposed cuts from the lens of matching them up with stated priorities. At present, this is our stumbling block.

Sincerely,

Shannon Steene, Chair

## Fund 119 Contributory Fund

Fairfax County	FY 2011 Actual	FY 2012 Adopted Budget Plan	FY 2012 Revised Budget Plan	FY 2013 Advertised Budget Plan
<b>Legislative-Executive Functions/Central Service Agencies:</b>				
Alliance for Innovation	\$6,000	\$6,000	\$6,000	\$6,000
Dulles Area Transportation Association	9,000	9,000	9,000	9,000
Metropolitan Washington Council of Governments	854,641	889,890	889,890	899,965
National Association of Counties	19,049	19,049	19,049	19,049
Northern Virginia Regional Commission	556,297	568,534	568,534	623,862
Northern Virginia Transportation Commission	186,288	174,499	174,499	169,504
Virginia Association of Counties	228,024	227,208	227,208	242,740
Virginia Institute of Government	20,000	20,000	20,000	20,000
Washington Airports Task Force	32,704	50,000	50,000	50,000
<b>Subtotal Legislative-Executive</b>	<b>\$1,912,003</b>	<b>\$1,964,180</b>	<b>\$1,964,180</b>	<b>\$2,040,120</b>
<b>Public Safety:</b>				
NOVARIS	\$9,577	\$14,677	\$14,677	\$9,577
Fairfax Partnership For Youth	40,375	40,375	40,375	40,350
<b>Subtotal Public Safety</b>	<b>\$49,952</b>	<b>\$55,052</b>	<b>\$55,052</b>	<b>\$49,927</b>
<b>Health and Welfare:</b>				
GMU Law and Mental Illness Clinic	\$51,678	\$0	\$0	\$0
Health Systems Agency of Northern Virginia	86,750	86,750	86,750	108,200
Medical Care for Children	237,000	237,000	237,000	237,000
Northern Virginia Healthcare Center/Birmingham Green Adult				
Care Residence	1,847,761	2,165,918	2,215,918	2,447,789
Volunteer Fairfax	305,247	305,247	305,247	305,247
<b>Subtotal Health and Welfare</b>	<b>\$2,528,436</b>	<b>\$2,794,915</b>	<b>\$2,844,915</b>	<b>\$3,098,236</b>
<b>Parks, Recreation and Cultural:</b>				
Arts Council of Fairfax County	\$181,694	\$231,694	\$231,694	\$231,694
Arts Council of Fairfax County - Arts Groups Grants	96,900	96,900	96,900	96,900
Challenge Grant Funding Pool for the Arts	444,125	444,125	444,125	444,125
Dulles Air and Space Museum	100,000	100,000	100,000	100,000
Fairfax Symphony Orchestra	236,032	236,032	236,032	236,032
Fort Belvoir Army Museum	100,000	100,000	100,000	100,000
Lorton Arts Foundation	1,000,000	750,000	750,000	3,350,000
Northern Virginia Regional Park Authority	1,979,537	1,979,537	1,979,537	1,979,537
Reston Historic Trust	16,150	16,150	16,150	16,150
Town of Herndon	0	40,000	40,000	40,000
Town of Vienna Teen Center	32,300	32,300	32,300	32,300
Wolf Trap Foundation for the Performing Arts	100,938	100,938	100,938	100,938
<b>Subtotal Parks, Recreation &amp; Cultural</b>	<b>\$4,287,676</b>	<b>\$4,127,676</b>	<b>\$4,127,676</b>	<b>\$6,727,676</b>

## Fund 119 Contributory Fund

Fairfax County	FY 2007 Actual	FY 2008 Adopted Budget Plan	FY 2008 Revised Budget Plan	FY 2009 Advertised Budget Plan	FY 2009 Adopted Budget Plan
<b>Legislative-Executive</b>					
<b>Functions/Central Service Agencies:</b>					
Dulles Area Transportation Association	\$9,000	\$9,000	\$9,000	\$9,000	\$9,000
Metropolitan Washington Council of Governments	838,706	868,217	868,217	894,309	894,309
National Association of Counties	19,054	20,259	20,259	21,272	21,272
Northern Virginia Regional Commission	552,769	562,739	562,739	561,079	561,079
Northern Virginia Transportation Commission	174,674	175,638	175,638	177,574	177,574
Public Technology Incorporated	20,000	20,000	20,000	20,000	20,000
Virginia Association of Counties	204,420	208,500	208,500	228,099	228,099
Alliance for Innovation	6,000	6,000	6,000	6,000	6,000
Virginia Institute of Government	20,000	20,000	20,000	20,000	20,000
Washington Airports Task Force	40,500	40,500	40,500	40,500	40,500
<b>Subtotal Legislative-Executive</b>	<b>\$1,885,123</b>	<b>\$1,930,853</b>	<b>\$1,930,853</b>	<b>\$1,977,833</b>	<b>\$1,977,833</b>
<b>Public Safety:</b>					
NOVARIS	\$403,568	\$159,321	\$159,321	\$22,551	\$22,551
Partnership For Youth	50,000	50,000	50,000	50,000	50,000
<b>Subtotal Public Safety</b>	<b>\$453,568</b>	<b>\$209,321</b>	<b>\$209,321</b>	<b>\$72,551</b>	<b>\$72,551</b>
<b>Health and Welfare:</b>					
GMU Law and Mental Illness Clinic	\$51,678	\$51,678	\$51,678	\$51,678	\$51,678
Health Systems Agency of Northern Virginia	86,750	86,750	86,750	86,750	86,750
Northern Virginia Healthcare Center/Birmingham Green Adult Care Residence	1,076,083	1,396,691	1,396,691	1,573,880	1,573,880
Volunteer Fairfax	302,247	305,247	305,247	305,247	305,247
<b>Subtotal Health and Welfare</b>	<b>\$1,516,758</b>	<b>\$1,840,366</b>	<b>\$1,840,366</b>	<b>\$2,017,555</b>	<b>\$2,017,555</b>
<b>Parks, Recreation and Cultural:</b>					
Arts Council of Fairfax County	\$216,606	\$220,602	\$220,602	\$225,008	\$225,008
Arts Council of Fairfax County - Arts Groups Grants	120,000	120,000	120,000	120,000	120,000
Challenge Grant Funding Pool for the Arts	550,000	550,000	550,000	550,000	550,000
Dulles Air and Space Museum	240,000	240,000	240,000	240,000	240,000
Fairfax Symphony Orchestra	265,723	278,613	278,613	292,300	292,300
Fort Belvoir Army Museum	240,000	240,000	240,000	240,000	240,000
Lorton Arts Foundation	1,000,000	1,000,000	1,000,000	1,000,000	1,000,000
Northern Virginia Regional Park Authority	2,035,315	2,076,143	2,076,143	2,084,140	2,084,140
Pentagon Memorial Fund	0	0	100,000	0	0
Reston Historic Trust	20,000	20,000	20,000	20,000	20,000
Claude Moore Colonial Farm	31,500	31,500	31,500	31,500	31,500
Town of Vienna Teen Center	40,000	40,000	40,000	40,000	40,000
Virginia Opera Company	25,000	25,000	25,000	25,000	25,000
Wolf Trap Foundation for the Performing Arts	125,000	125,000	125,000	125,000	125,000
<b>Subtotal Parks, Recreation &amp; Cultural</b>	<b>\$4,909,144</b>	<b>\$4,966,858</b>	<b>\$5,066,858</b>	<b>\$4,992,948</b>	<b>\$4,992,948</b>

## Fund 119 Contributory Fund

Fairfax County	FY 2007 Actual	FY 2008 Adopted Budget Plan	FY 2008 Revised Budget Plan	FY 2009 Advertised Budget Plan	FY 2009 Adopted Budget Plan
<b>Community Development:</b>					
Architectural Review Board	\$3,500	\$3,500	\$3,500	\$3,500	\$3,500
Celebrate Fairfax, Incorporated	27,854	28,289	28,289	29,258	29,258
Center for Chesapeake Communities	0	0	36,000	36,000	36,000
Commission for Women	6,916	6,916	6,916	6,916	6,916
Convention and Visitors Corporation	3,016,323	2,717,701	2,965,957	2,853,586	2,853,586
Earth Sangha	0	0	20,000	20,000	20,000
Fairfax County History Commission	26,022	26,022	26,022	26,022	26,022
Fairfax ReLeaf	0	0	52,000	52,000	52,000
Greater Reston Incubator	30,000	30,000	30,000	30,000	30,000
Northern Virginia Community College	94,196	93,733	93,733	92,200	92,200
Northern Virginia Conservation Trust	266,380	275,437	275,437	282,047	282,047
Northern Virginia Soil and Water Conservation District	514,917	470,263	470,263	496,459	496,459
Northern Virginia 4-H Educational Center	25,000	25,000	25,000	25,000	25,000
Occoquan Watershed Monitoring Program	106,635	113,787	113,787	120,565	120,565
OpenDoor Housing Fund	32,016	32,874	32,874	32,890	32,890
Police and Fire World Games	25,000	0	0	0	0
Southeast Fairfax Development Corporation	190,550	198,363	198,363	203,124	203,124
VPI/UVA Education Center	50,000	50,000	50,000	50,000	50,000
Women's Center of Northern Virginia	29,942	29,942	29,942	29,942	29,942
Washington Area Housing Partnership	4,000	0	0	0	0
Wildlife Rescue League	10,000	10,000	10,000	10,000	10,000
<b>Subtotal Community Development</b>	<b>\$4,459,251</b>	<b>\$4,111,827</b>	<b>\$4,468,083</b>	<b>\$4,399,509</b>	<b>\$4,399,509</b>
<b>Nondepartmental:</b>					
Fairfax Public Law Library	\$57,657	\$92,657	\$92,657	\$92,657	\$92,657
<b>Subtotal Nondepartmental</b>	<b>\$57,657</b>	<b>\$92,657</b>	<b>\$92,657</b>	<b>\$92,657</b>	<b>\$92,657</b>
<b>Total County Contributions</b>	<b>\$13,281,501</b>	<b>\$13,151,882</b>	<b>\$13,608,138</b>	<b>\$13,553,053</b>	<b>\$13,553,053</b>

### FY 2009 Funding Adjustments

The following funding adjustments from the FY 2008 Revised Budget Plan are necessary to support the FY 2009 program:

- ◆ The Legislative-Executive Functions/Central Service Agencies program area increases \$46,980 or 2.4 percent for several organizations based on per capita requirements and adjusted County population figures for which population is cited and used in the calculation. This increase is primarily attributable to the Metropolitan Washington Council of Governments (MWCOC) contribution, which increases \$26,092 or 3.0 percent due to an increase in the FY 2009 per capita rate; an increase of \$19,599 or 9.4 percent associated with a dues increase for the Virginia Association of Counties (VACo) based on a higher per capita rate; an increase of \$1,936 or 1.1 percent for the Northern Virginia Transportation Commission (NVTC) based on the share of revenue to be received by NVTC on behalf of the County; and an increase of \$1,013 or 5.0 percent for a projected dues increase for the National Association of Counties (NACo). These increases are partially offset by a decrease of \$1,660 or 0.3 percent for the Northern Virginia Regional Commission (NVRC), based on a County population estimate which is slightly reduced from the previous year's estimate. It should be noted that population, as determined by the County's own Urban Development Information System (UDIS), maintained by the Fairfax County Department of Systems Management for Human Services, may differ from other particular projection services, e.g., Weldon

## Fund 10030 Contributory Fund

Fairfax County	FY 2014 Actual	FY 2015 Adopted Budget Plan	FY 2015 Revised Budget Plan	FY 2016 Advertised Budget Plan
<b>Legislative-Executive Functions/Central Service Agencies:</b>				
Dulles Area Transportation Association	\$15,000	\$15,000	\$15,000	\$15,000
Metropolitan Washington Council of Governments	939,972	966,044	966,044	969,114
National Association of Counties	21,635	21,635	21,635	21,635
Northern Virginia Regional Commission	631,073	641,629	641,629	643,861
Northern Virginia Transportation Commission	173,465	167,903	167,903	168,142
Virginia Association of Counties	244,712	249,606	249,606	239,240
Washington Airports Task Force	50,000	50,000	50,000	50,000
<b>Subtotal Legislative-Executive</b>	<b>\$2,075,857</b>	<b>\$2,111,817</b>	<b>\$2,111,817</b>	<b>\$2,106,992</b>
<b>Public Safety:</b>				
Fairfax Partnership For Youth	\$40,350	\$0	\$0	\$0
NOVARIS	9,577	9,577	9,577	9,577
<b>Subtotal Public Safety</b>	<b>\$49,927</b>	<b>\$9,577</b>	<b>\$9,577</b>	<b>\$9,577</b>
<b>Health and Welfare:</b>				
Health Systems Agency of Northern Virginia	\$108,200	\$108,200	\$108,200	\$108,200
Medical Care for Children	213,300	237,000	237,000	237,000
Northern Virginia Healthcare Center/Birmingham Green Adult Care Residence	2,467,959	2,575,761	2,625,761	2,576,887
Volunteer Fairfax	305,247	335,772	335,772	405,772
<b>Subtotal Health and Welfare</b>	<b>\$3,094,706</b>	<b>\$3,256,733</b>	<b>\$3,306,733</b>	<b>\$3,327,859</b>
<b>Parks, Recreation and Cultural:</b>				
Arts Council of Fairfax County	\$281,694	\$331,694	\$331,694	\$331,694
Arts Council of Fairfax County - Arts Groups Grants	96,900	96,900	96,900	96,900
Challenge Grant Funding Pool for the Arts	444,125	444,125	444,125	444,125
Dulles Air and Space Museum	100,000	100,000	100,000	100,000
Fairfax Symphony Orchestra	261,032	261,032	261,032	261,032
Fort Belvoir Army Museum	100,000	100,000	100,000	100,000
Lorton Arts Foundation	750,000	0	0	0
Northern Virginia Regional Park Authority	2,080,308	2,114,158	2,114,158	2,137,446
Reston Historic Trust	16,150	16,150	16,150	16,150
Town of Herndon	40,000	40,000	40,000	40,000
Town of Vienna Teen Center	32,300	32,300	32,300	32,300
Wolf Trap Foundation for the Performing Arts	125,938	125,938	125,938	125,938
<b>Subtotal Parks, Recreation &amp; Cultural</b>	<b>\$4,328,447</b>	<b>\$3,662,297</b>	<b>\$3,662,297</b>	<b>\$3,685,585</b>

## Fund 119 Contributory Fund

Fairfax County	FY 2007 Actual	FY 2008 Adopted Budget Plan	FY 2008 Revised Budget Plan	FY 2009 Advertised Budget Plan	FY 2009 Adopted Budget Plan
<b>Community Development:</b>					
Architectural Review Board	\$3,500	\$3,500	\$3,500	\$3,500	\$3,500
Celebrate Fairfax, Incorporated	27,854	28,289	28,289	29,258	29,258
Center for Chesapeake Communities	0	0	36,000	36,000	36,000
Commission for Women	6,916	6,916	6,916	6,916	6,916
Convention and Visitors Corporation	3,016,323	2,717,701	2,965,957	2,853,586	2,853,586
Earth Sangha	0	0	20,000	20,000	20,000
Fairfax County History Commission	26,022	26,022	26,022	26,022	26,022
Fairfax ReLeaf	0	0	52,000	52,000	52,000
Greater Reston Incubator	30,000	30,000	30,000	30,000	30,000
Northern Virginia Community College	94,196	93,733	93,733	92,200	92,200
Northern Virginia Conservation Trust	266,380	275,437	275,437	282,047	282,047
Northern Virginia Soil and Water Conservation District	514,917	470,263	470,263	496,459	496,459
Northern Virginia 4-H Educational Center	25,000	25,000	25,000	25,000	25,000
Occoquan Watershed Monitoring Program	106,635	113,787	113,787	120,565	120,565
OpenDoor Housing Fund	32,016	32,874	32,874	32,890	32,890
Police and Fire World Games	25,000	0	0	0	0
Southeast Fairfax Development Corporation	190,550	198,363	198,363	203,124	203,124
VPI/UVA Education Center	50,000	50,000	50,000	50,000	50,000
Women's Center of Northern Virginia	29,942	29,942	29,942	29,942	29,942
Washington Area Housing Partnership	4,000	0	0	0	0
Wildlife Rescue League	10,000	10,000	10,000	10,000	10,000
<b>Subtotal Community Development</b>	<b>\$4,459,251</b>	<b>\$4,111,827</b>	<b>\$4,468,083</b>	<b>\$4,399,509</b>	<b>\$4,399,509</b>
<b>Nondepartmental:</b>					
Fairfax Public Law Library	\$57,657	\$92,657	\$92,657	\$92,657	\$92,657
<b>Subtotal Nondepartmental</b>	<b>\$57,657</b>	<b>\$92,657</b>	<b>\$92,657</b>	<b>\$92,657</b>	<b>\$92,657</b>
<b>Total County Contributions</b>	<b>\$13,281,501</b>	<b>\$13,151,882</b>	<b>\$13,608,138</b>	<b>\$13,553,053</b>	<b>\$13,553,053</b>

### FY 2009 Funding Adjustments

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## Fairfax County Alliance for Human Services

### **FY 2016 BUDGET**

**AHS PERSPECTIVE ON THE BUDGET:** The County Executive has once again spoken to the wisdom of multi-year budgeting and planning. And we agree with him. But the serious reductions in human services funding and programs in the proposed FY 2016 Budget have little or no connection to either short or long-range planning. These cuts will, in fact, undermine any future strategic planning to meet existing and emerging needs.

Mr. Long acknowledges that his proposed cuts will have some “unpleasant impacts.” We agree--—increased child abuse and neglect and developmental delays are unpleasant indeed.

Mr. Long cites the need for reductions in order to continue to invest in priorities like early childhood development and addressing domestic violence. While this appears to be a rational approach, the recommendations based on it seem to be arbitrary and even self-contradictory. For example, there is additional funding for the next phase of expanding school readiness activities in support of community programs serving young children. At the same time, the proposed budget eliminates the Healthy Families Fairfax program, which prevents child abuse and neglect, screens for developmental delays, refers children to early intervention services, and prepares children for school readiness.

A budget that funds a new school readiness program at the expense of programs like Healthy Families and the Parenting Education Program that do proven, effective work that helps prepare substantial numbers of children for school readiness is one that views human services programs in isolation from one another and is focused on short term results, rather than on a continuum of integrated, preventive services.

The Alliance has been working with the Fairfax County Advocacy Coalition for Housing and Human Services, a group of non-profit and advocacy organizations. We especially agree with the Coalition that Fairfax must build a human services system that is more integrated and comprehensive, and with resources focused on prevention and early intervention.

As we have noted for several years, economic recovery is still out of reach for many in our community. While Fairfax County's poverty rate is (5.8 percent) is better than most, it still translates to over 64,000 persons, more than any single jurisdiction in Virginia.

Recently published County materials (*Trends and Emerging Needs Impacting the Fairfax County Human Services System*, December 15, 2014) provide ample evidence that the demand for services continues to grow and that many needs are not being met. For example:

- ◆ Poverty among children (under 18 years of age) increased by 27% from 2008 to 2013. In 2013, 19,704 children lived in poverty. During the 2013-14 school year, 28% of FCPS students were eligible for free or reduced-price meals. Over one third of kindergarten students have been eligible in the past 2 years.
- ◆ In FY 2014, public assistance (e.g., SNAP, TANF, Medicaid) caseloads have risen to more than 91,000 cases per month, from an average of 82,000 the previous year.
- ◆ At present, 21-23% of Northern Virginia's local state hospital beds are occupied by individuals who are deemed clinically ready for discharge, but who are unable to transition to community care due to a lack of services and supports.
- ◆ In FY 2014, 74 families were turned away from Artemis House, the County's 24-hour emergency domestic violence shelter. An additional 82 families were placed in hotels until space became available for them in the shelter.
- ◆ Among very low income Fairfax County residents with disabilities and very low income older adults, an estimated 17,600 households have unmet housing needs.

Because Mr. Long has proposed some significant reductions that will weaken the human services safety net, the Board's positive response to the needs of our most vulnerable populations is essential.

***We therefore urge the Board to approve the County Executive's basic recommendations for human services programs—the level funding and the modest increases. Furthermore, we urge the Board to use the Budget's available balance to restore the proposed human services cuts.***

**PROPOSED CUTS IN HUMAN SERVICES FUNDING:** The human services funding reductions listed below will have severe impacts on programs and the vulnerable families and individuals who need them. AHS strongly urges the Board to restore funding for the critical services listed below (Total: About \$3 million):

**Restore funding for the Healthy Families Fairfax Program (HFF): Total reduction is \$2.2 million (\$232,693 and 3 public health nurse positions in the Health Dept., and \$2 million in funding and 32 positions associated with DFS and 3 non-profits--mostly for case management).** This reduction also includes a decrease of \$327,946 in state funding. **The proposed cut would eliminate HFF.**

HFF was begun in 1991 and is an accredited, evidence-based home-visiting program offering families at high risk for abuse and neglect an opportunity to learn parenting skills and to receive emotional support and case management services. Services are voluntary and begin during pregnancy or right after the birth of a baby and last until the child reaches age three and is

enrolled in an early group education experience. The program provides home-based parenting education, health information, developmental screenings and community support.

In 2014, HFF served 535 children and 613 families living in Fairfax County. If the cut is implemented, these families and children and those in need in the future would no longer receive services, which may result in an increase in poor health and developmental outcomes and child abuse/neglect among a vulnerable population. There is more demand for this service than is able to be met. Only one-third of the mothers who are screened as high-risk are able to be served through HFF. Other early childhood home visiting programs in the community have recently lost funding and are operating at capacity and are therefore unable to serve this population.

In 2014, Fairfax County spent an average of \$78,658 per child for foster care placements. In contrast, it costs \$3,473 per family to provide prevention services through HFF, which aims to keep children out of foster care.

**Restore Funding for the Parenting Education Program (PEP)(\$216,816 and 2 positions):**

This cut reduces the Parenting Education Program (PEP) by about 50%. PEP offers group-based comprehensive classes to families at risk of child abuse and neglect and teaches essential parenting and nurturing skills. The annual cost per child for PEP is \$1,480.

In 2014, PEP served 511 children (infants to age 18) and 384 families. If the cut is implemented, services will be eliminated for approximately 192 families (255 children), which could result in a higher incidence of child abuse and neglect, increased out of home placements, increased referrals to Child Protective Services, and potentially increased numbers of children entering foster care.

It is not anticipated that any community organizations will have the capacity to absorb the families that would be displaced by this reduction.

**Restore Funding for the Good Touch Bad Touch Program (GTBT)(\$85,056 and 1 position):**

This cut would eliminate the GTBT program, which provides children in pre-school through 6<sup>th</sup> grade with a comfortable and non-threatening way to talk about sexual abuse and body safety. The child abuse prevention curriculum teaches protective skills and information so that children can participate in their own personal body safety. Children learn what abuse is and are empowered to act if they are threatened or victimized. The program has been taught by the County for more than 10 years. The program is free and is presented in partnership with other County agencies, FCPS, community centers, and community and faith-based organizations. In 2014, the GTBT program served 998 children living in Fairfax County.

**Restore Funding for the Rent Relief Program (\$275,000):** This cut would eliminate the Rent Relief Program, which is actually a tax relief program (begun in the 1970's) for those who are renting. The program's purpose is to provide an annual stipend/rebate (amounts vary) to qualified renters--low income seniors and persons who are permanently disabled--as relief for a share of the real estate tax that is effectively passed on to them by their landlords. Eligibility is determined by the Dept. of Tax Administration. The funding helps these individuals and families stay economically self-sufficient. In Tax Year 2014, 507 people were helped through this

program. The average grant was \$548. 85% of the approved renters were permanently and totally disabled. The rest were 65 years old and over, with an average income of \$14,744 and assets of \$8,670.

This program keeps disabled and elderly renters in stable housing, helping them to continue to live independently. In February 2013, a County Executive memo to the Board of Supervisors on this program noted that fewer than 4% of the grant recipients received any other type of financial assistance. The memo states: “It can be reasonably assumed that the Rent Relief grant is providing a level of subsidy that is allowing those in the program to maintain some level of stability since they are not calling CPS (Coordinated Services Planning) in crisis.” Furthermore, the average cost per person is modest, especially compared to the costs of emergency shelter and services that are incurred when families and individuals lose their housing and become homeless.

**Restore Funding for One Service Director Position Within Jail-Based Behavioral Health Services (\$184,979 and one position):** This reduction eliminates one CSB Service Director position and reclassifies one Senior Clinician to a Mental Health Therapist at the Adult Detention Center. The CSB Service director position is responsible for developing, supervising, and administering a program of behavioral health services for incarcerated individuals and their families, as well as serving as CSB's liaison to the Sheriff's Dept., courts, attorneys, etc. The on-site management and supervision responsibilities would likely be absorbed by remaining staff.

#### **A RECOMMENDED REDUCTION**

The FY 2016 proposed Budget includes a contribution of \$500,000 for the second year of a 10-year funding commitment to the Inova Translational Medicine Institute (ITMI). At a time when Fairfax County continues to have difficulty meeting community needs for many basic services and is unable to adequately fund priorities, the Alliance questions the need to contribute a substantial amount of money to Inova.

Inova clearly does not need County funding to ensure the success of its project. As we all know, Inova's leaders have recently stated that they have the cash on hand to purchase the Exxon Mobil campus in Merrifield, assessed in 2014 at nearly \$193 million.

## **BACKGROUND INFORMATION ON THE FAIRFAX COUNTY FY 2016 ADVERTISED BUDGET**

On February 17, 2015, Fairfax County Executive Ed Long released his FY 2016 Budget proposal (also called the “Advertised Budget”). Mr. Long presented a budget with a small increase from the FY 2015 Revised Budget in General Fund disbursements and direct expenditures, no increase in the real estate tax rate (currently, \$1.09 per \$100 of assessed value), an available balance of \$3 million, a market-rate increase in employee pay, and significant funding cuts, including reductions in human services funding and even elimination of some human services programs. The budget also proposes some increases in agency funding, including human services.

Because of an increase in state funding approved during the 2015 General Assembly session, additional funding (about 13.2 million) for Fairfax County and FCPS will increase the Board's available balance from \$3 million to about \$5.4 million and also reduce the FCPS funding gap.

On March 3, 2015, the Board of Supervisors authorized the advertisement of a FY 2016 real estate tax rate of \$1.09 per \$100 of assessed value. This is the current rate and also the rate used by Mr. Long to balance his proposed FY 2106 Budget. Supervisor Herrity voted against the motion.

After hearing the concerns of County residents, the Board of Supervisors will make changes to the proposed FY 2016 Budget and approve it at the “Markup” meeting on April 21. Formal adoption will be on April 28.

Mr. Long pointed out that, while the County's economy continues to grow, Fairfax is clearly underperforming the national economy. In this economic environment, he has recommended deferring critical investments and has proposed reductions. He also projects a \$93 million shortfall in FY 2017, thus cautioning the Board and the community that difficult budget decisions will continue.

Recently published County materials (*Trends and Emerging Needs Impacting the Fairfax County Human Services System*, December 15, 2014) provide ample evidence that the demand for services continues to grow and that many needs are not being met. For example:

- ◆ Fairfax County's poverty rate is 5.8%. While this is better than most, it still translates to over 64,000 persons (in 2013) living below the federal poverty level (\$23,550 for a family of four), more than any other single jurisdiction in Virginia.
- ◆ Poverty among children (under 18 years of age) increased by 27% from 2008 to 2013. In 2013, 19,704 children lived in poverty. During the 2013-14 school year, 28% of FCPS students were eligible for free or reduced-price meals. Over one third of kindergarten students have been eligible in the past 2 years.
- ◆ In FY 2014, public assistance (e.g., SNAP, TANF, Medicaid) caseloads have risen to more than 91,000 cases per month, from an average of 82,000 the previous year.
- ◆ At present, 21-23% of Northern Virginia's local state hospital beds are occupied by individuals who are deemed clinically ready for discharge, but who are unable to transition to community care due to a lack of services and supports.
- ◆ In FY 2014, 74 families were turned away from Artemis House, the County's 24-hour emergency domestic violence shelter. An additional 82 families were placed in hotels until space became available for them in the shelter.

- ◆ among very low income Fairfax County residents with disabilities and very low income older adults, an estimated 17,600 households have unmet housing needs.

### **Proposed Funding Increases in Human Services**

The FY 2016 Budget proposes a total increase in human services funding of \$11.36 million (27 positions). Among the increases are:

**Contract Rate Increases:** An increase of \$3.49 million is required to support a contract rate increase for the providers of human services in the county, especially non-profits. To keep pace with inflation, pay and benefits, the County periodically funds contract rate increases so service delivery levels are not reduced to accommodate the increased cost of doing business.

#### **Department of Family Services**

- ◆ **Public Assistance Caseloads:** \$2.46 million for 20 new positions needed to address increasing public assistance caseloads that have increased more than 79% since FY 2008. The expenditure increase is partially offset by \$1.89 million in revenue, for a net impact to the County of \$0.57 million.
- ◆ **Conversion of Grant Funding for Domestic and Sexual Violence Services:** \$230,000 and 3 positions required to replace grant funding for domestic violence services that will no longer be available to ensure that the programs may be maintained.
- ◆ **School Readiness:** \$960,000 for the next phase of expanding school readiness activities in support of community programs serving young children begun in FY 2015 at the Board's direction.

**Intellectual Disability Graduates:** An increase of \$1.28 million (CSB) to support a variety of day support and employment services for new graduates with intellectual disabilities.

**School Health Program:** \$690,000 and 4 positions to support 2 new Fairfax County elementary schools. In addition, the funding increase provides the ongoing costs associated with FCPS implementation of full-day Mondays in County elementary schools that began for school year 2014-15 and which requires additional hours for County staff supporting the school health program.

### **Proposed Funding Reductions in Human Services**

The proposed FY 2016 Budget includes reductions totaling \$24.8 million. Human services cuts total \$9.8 million, along with 58 positions. Commenting on the reductions in his Executive Summary, Ed Long writes that “there are some unpleasant impacts but they are limited and they are in programs which are non-mandated or for which there are other options for our residents.” He goes on to say that reductions were necessary because of the need to increase funding for Schools and to increase employee compensation, and “to continue investing in our other priorities like economic development, early childhood development, addressing domestic violence, and meeting the needs of the FCPS graduates with intellectual disabilities.”

Reductions in human services include the following:

**Department of Family Services (DFS) (Total Cut: \$4.3 million and 11 positions)**

**Eliminate the Healthy Families Fairfax Program (HFF): Total reduction is \$2.2 million (\$232,693 and 3 public health nurse positions in the Health Dept., and \$2 million in funding and 32 positions associated with DFS and 3 non-profits--mostly for case management).** This reduction also includes a decrease of \$327,946 in state funding.

HFF was begun in 1991 and is an accredited and evidence-based home-visiting program offering families at high risk for abuse and neglect an opportunity to learn parenting skills and to receive emotional support and case management services. Services are voluntary and begin during pregnancy or right after the birth of a baby and last until the child reaches age three and is enrolled in an early group education experience. The program provides home-based parenting education, health information, developmental screenings and community support.

In 2014, HFF served 535 children and 613 families living in Fairfax County. If the cut is implemented, these families and children and those in need in the future would no longer receive services, which may result in an increase in poor health and developmental outcomes and child abuse/neglect among a vulnerable population. There is more demand for this service than is able to be met. Only one-third of the mothers who are screened as high-risk are able to be served through HFF. Other early childhood home visiting programs in the community have recently lost funding and are operating at capacity and are therefore unable to serve this population.

In 2014, Fairfax County spent an average of \$78,658 per child for foster care placements. In contrast, it costs \$3,473 per family to provide prevention services through HFF, which aims to keep children out of foster care.

**Reduce Funding for the Parenting Education Program (PEP)(\$216,816 and 2 positions):** This cut reduces the Parenting Education Program (PEP) by about 50%. PEP offers group-based comprehensive classes to families at risk of child abuse and neglect and teaches essential parenting and nurturing skills. The annual cost per child for PEP is \$1,480.

In 2014, PEP served 511 children (infants to age 18) and 384 families. If the cut is implemented, services will be eliminated for approximately 192 families (255 children), which could result in a higher incidence of child abuse and neglect, increased out of home placements, increased referrals to Child Protective Services, and potentially increased numbers of children entering foster care.

It is not anticipated that any community organizations will have the capacity to absorb the families that would be displaced by this reduction.

**Eliminate the Good Touch Bad Touch Program (GTBT)(\$85,056 and 1 position):** The GTBT program provides children in pre-school through 6<sup>th</sup> grade with a comfortable and non-threatening way to talk about sexual abuse and body safety. The child abuse prevention curriculum teaches protective skills and information so that children can participate in their own personal body safety. Children learn what abuse is and are empowered to act if they are threatened or victimized. The program has been taught by the County for more than 10 years. The program is free and is presented in partnership with

other County agencies, FCPS, community centers, and community and faith-based organizations.

In 2014, the GTBT program served 998 children living in Fairfax County.

**Eliminate the Rent Relief Program (\$275,000):** This is actually a tax relief program (begun in the 1970's) for those who are renting. The program's purpose is to provide an annual stipend/rebate (amounts vary) to qualified renters--low income seniors and persons who are permanently disabled--as relief for a share of the real estate tax that is effectively passed on to them by their landlords. Eligibility is determined by the Dept. of Tax Administration. The funding helps these individuals and families stay economically self-sufficient. In Tax Year 2014, 507 people were helped through this program. The average grant was \$548. 85% of the approved renters were permanently and totally disabled. The rest were 65 years old and over, with an average income of \$14,744 and assets of \$8,670.

#### **Office to Prevent and End Homelessness (Total Cut: \$360,317)**

**Reduce Funding for Short Term Financial Assistance and Stabilization Services (\$269,100):** This funding provides financial assistance to enable individuals and families who are at risk of becoming homeless to stay in their homes, thus preventing them from having to enter the shelter system. It is anticipated that the County will use HUD Emergency Solutions Grant (ESG) funding to offset the proposed reduction to maintain the program at \$1.2 million total funding. ESG funding, matched dollar for dollar with County funding, enables the community partnership to provide homelessness prevention and rapid rehousing services. It can, however, also be used for short-term assistance to prevent homelessness.

**Eliminate the Linda's Gateway Pilot Housing Program (\$80,900):** This program leases 4 apartments that provide housing for homeless individuals. It was established as an alternative temporary housing model to divert families away from shelters and motel placements. Current residents will be relocated among the County's other housing options, including motels.

#### **Department of Neighborhood and Community Services (Total Cut: \$784,700 and 4 positions)**

**Eliminate the Three Computer Learning Centers (CLC) Located at School Sites (\$185,000):** With the elimination of the 3 CLC programs at elementary schools, 9 community-based programs will remain. The 3 school-based CLCs serve 289 children. CLCs offer elementary school students activities such as computer access, internet access, homework assistance, and literacy activities. If this cut is implemented, County staff plan to transport the 3 CLCs into the existing SACC programs at the schools, where both space and staff will be able to accommodate the children. Although the CLCs are free, SACC does operate on a sliding fee scale.

#### **Community Services Board (Total Cut: \$2.3 million and 29 positions)**

**Reduce One Service Director Position and Restructure Staff Within Jail-Based Behavioral Health Services (\$184,979 and one position):** This reduction eliminates one CSB Service Director position and reclassifies one Senior Clinician to a Mental Health Therapist at the Adult Detention Center. The CSB Service director position is responsible for developing, supervising, and administering a program of behavioral health services for incarcerated individuals and their families, as well as serving as CSB's liaison to the Sheriff's Dept., courts, attorneys, etc. The on-site management and supervision

responsibilities would likely be absorbed by remaining staff.

### **Other Issues of Concern**

**Housing Blueprint:** The FY 2016 Advertised Budget includes \$6.6 million (from income from County-owned Wedgewood apartments property) for the Housing Blueprint Project, which will provide housing for homeless individuals and families and low income working families, and \$282,500 for Affordable/Workforce Housing.

**Inova Translational Medicine Institute (ITMI):** The proposed FY 2016 Budget includes \$500,000 in contributory funding for the second year of a 10-year funding commitment to the ITMI. The ITMI is Inova Health System's initiative to bring personalized medicine to Northern Virginia and the world.

### **Budget Pressures**

**FCPS Funding:** County Executive Ed Long's proposed FY 2016 Budget includes a County transfer to the School Operating Fund of \$1.83 billion, a 3.20 percent increase of \$56.65 million over the FY 2015 Adopted Budget (based on the Board's Budget Guidelines). The Fairfax County School Board, however, has requested an operating transfer of \$1.84 billion for FY 2016. This would necessitate a \$70.6 million, or 3.99 percent, increase in the transfer and would require an additional \$14 million.

Schools advocates are putting a great deal of pressure on the Board of Supervisor to increase the transfer in order to prevent reductions in the FCPS budget.

**County Employee Compensation:** The proposed FY 2016 Budget includes \$9.46 million for a 0.84 percent Market Rate Adjustment (MRA) for all employees. However, this funds only half of the approved MRA calculation of 1.68 percent. Mr. Long explained that it was his intent to fully fund this MRA, but cutting it in half was one of the difficult decisions he had to make in order to balance the budget. Several members of the Board have expressed their concern about this situation.

**Increases in Residential Real Estate Taxes:** At the current tax rate (\$1.09 per \$100 of assessed value), Real Estate Taxes per "typical" household are projected to increase \$184.81 between FY 2015 and FY 2016, not adjusting for inflation. This increase is the result of the 3.39 percent increase in the mean assessed value of residential properties.

Some members of the Board of Supervisors are concerned that many households will be paying higher taxes without any increase in the rate.

### **Revenue**

On March 3, the Board of Supervisors authorized the advertisement of a Real Estate Tax Rate of \$1.09 per \$100 of assessed value, the same as the current rate. This advertised rate is, however, a ceiling. It would not prevent the Board from approving a lower tax rate when it adopts the FY 2016 Budget, but the Board could not adopt one higher than \$1.09.

FY 2016 General Fund revenues are projected to be \$3.8 billion, an increase of \$98.8 million, or 2.66 percent, over the Adopted FY 2015 Budget.

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For FY 2016, each penny of the real estate tax rate is worth \$22.6 million in revenue. Therefore, if the Board were to approve a tax rate lower than \$1.09 (both the advertised rate and the rate used to balance the proposed budget), each penny reduction would reduce revenue by \$22.6 million. Reduced revenue means cuts in funding for County programs and services.

## FAIRFAX COUNTY ALLIANCE FOR HUMAN SERVICES

### WHAT YOU CAN DO TO SHOW YOUR SUPPORT

**SPEAK** at one of the public hearings on the FY 2016 Advertised Budget. They will be held in the Board Auditorium at the Government Center on Tuesday, April 7, at 4 pm; on Wednesday, April 8, at 1 pm; and on Thursday, April 9, at 1 pm. Check the County website, [www.fairfaxcounty.gov](http://www.fairfaxcounty.gov), for up-to-date information.

To sign up to speak, call the Clerk to the Board at 703-324-3151; TTY: 703-324-3903. To sign up to speak online, go to [www.fairfaxcounty.gov/bosclerk/speaker\\_bos.htm](http://www.fairfaxcounty.gov/bosclerk/speaker_bos.htm).

**ATTEND** one or more of the community meetings on the budget sponsored by supervisors in their districts. These Budget Town Hall meetings are not hearings, but you may have an opportunity to comment about your concerns and issues. For a list of these meetings, go to the County website and click on “Budget.”

**RECRUIT OTHERS TO SPEAK** at or even just attend the public hearings. It is especially effective to have users of services talk about them and how the services have helped them. Even if people don't speak, they can show their support by being present and standing when asked to do so by a speaker.

**WRITE, PHONE, AND/OR EMAIL** your supervisor and Chairman Sharon Bulova. Usually letters are the most effective, but phone calls and emails can also help. A list of Board members and their contact information follows on the next 2 pages. If you are not sure who your district supervisor is, go to the County website, click on “Board of Supervisors” and see “Find Your District Supervisor.”

You can also communicate via the County website. Click on “Budget,” and then click on “Share your feedback on the FY 2016 Advertised Budget.”

**SEND** this package of information on to others who might be interested and concerned, and urge them to take action. Your friends, colleagues, neighbors, relatives, members of your congregation, members of the social action committee at your place of worship, members of organizations you belong to—all are potential advocates for human services.

\* \* \*

The Board of Supervisors will act on the FY 2016 Budget at the special “Markup” meeting on April 21. That is when the Board will vote to amend the budget and then approve the final package—cuts, increases, tax rates, fee increases, etc. Formal approval will be on April 28, but, for advocates, the important date is April 21. Your advocacy for human services can have an impact even after the budget hearings. Keep those letters, emails, postcards, and phone calls going!

## FAIRFAX COUNTY BOARD OF SUPERVISORS

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# FAIRFAX COUNTY ALLIANCE FOR HUMAN SERVICES

## TALKING POINTS

Here are some suggested points to make when you speak at a budget hearing or communicate with the Board of Supervisors:

1. Discuss your understanding of the overall budget situation. Be sure to emphasize that economic recovery is still out of reach for many in our community, and that many of our most vulnerable residents still need assistance in order to survive. (See “Background” attachment, pp. 1-2)

THE ALLIANCE FOR HUMAN SERVICES URGES YOU TO KEEP IN MIND THAT MANY PEOPLE WHO NEED HUMAN SERVICES REQUIRE MULTIPLE SERVICES PROVIDED BY A VARIETY OF AGENCIES, BOTH PUBLIC AND PRIVATE. **ALL** HUMAN SERVICES DESERVE YOUR SUPPORT

2. Express your opposition to the proposed cuts in human services funding and urge the Board to restore funding to those programs. (See “Background” attachment, pp. 2-5 and Advertised Budget for more reductions.)
  - Focus on the human services that are most important to you and the impact of the proposed County Budget on those services and the people who need them.
  - Describe the consequences of the proposed cuts. Be specific about the numbers of people who need the services and what the reductions will do to the quality and scope of service.
  - If you are concerned about funding cuts in the past, say so, and describe the effects of past cuts. Talk about real people and how they are suffering because of the elimination of services, longer waiting lists, or changes in the quality of services.
3. Express support for the increases in human services funding and for level funding, as appropriate. We urge you to recognize that Mr. Long's proposals are not necessarily “safe” from Board cuts. Your advocacy for these programs and services is essential!
4. If level funding has been proposed for the programs you are concerned about, and the funding is inadequate, say so, and provide details. If possible, recommend specific increases that would improve access to services or the scope of services.

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5. If you are willing to support the Advertised Real Estate Tax Rate to prevent cuts to human services, be sure to include this point in your communication with the Board of Supervisors.

On March 3, the Board voted to advertise a Real Estate Tax Rate of \$1.09 per \$100 of assessed value, the same as the current rate. This advertised rate is, however, a ceiling. It would not prevent the Board from approving a lower tax rate when it adopts the FY 2016 Budget, but the Board could not adopt a rate higher than \$1.09.

For FY 2016, each penny of the Real Estate Tax Rate is worth \$22.6 million in revenue. Therefore, if the Board were to approve a tax rate lower than \$1.09, each penny reduction would reduce revenue by \$22.6 million. Reduced revenue means cuts in funding for County programs and services.

**If you are willing to support the Advertised Tax Rate of \$1.09 to prevent more cuts in human services, now is the time to say so.**

## **FAIRFAX COUNTY ALLIANCE FOR HUMAN SERVICES**

### **HOW TO GET INFORMATION ON THE FY 2016 BUDGET**

The entire FY 2016 Advertised Budget is available on the County Website:

[www.fairfaxcounty.gov](http://www.fairfaxcounty.gov)

When you get to the Home Page, click on “Budget.” You can also go directly to the budget:  
[www.fairfaxcounty.gov/dmb](http://www.fairfaxcounty.gov/dmb).

Under the FY 2016 Budget, the most useful documents for the big picture and for information on changes, additions, reductions, revenue, and recommendations are:

- County Executive's Budget Presentation to the Board (Feb. 17, 2015)
- Citizen's Guide to the Budget
- Overview Volume
- County Executive's Letter from the Overview with All Agency Reductions

Tuesday Board of Supervisors meetings are shown on Fairfax County Cable Channel 16 and are also videostreamed live via the internet. The meetings are also replayed on Channel 16. Check the County website for information.

The County website also provides useful information on County government and on members of the Board of Supervisors, including their email addresses and phone numbers.

If you're not sure who your district supervisor is, go to the County website, click on “Board of Supervisors” and see “Find Your District Supervisor.”

Members of the Board of Supervisors are sponsoring community meetings on the FY 2016 Budget in their districts. These scheduled Budget Town Hall Meetings are listed under “Budget.”

Statement by CONCERNED FAIRFAX in response to proposed FY2016 budget reductions

CONCERNED FAIRFAX is a group of citizens who seek to improve mental health services for residents of Fairfax County. We have reviewed the proposed budget reductions for human services, and offer this statement in response to those reductions.

Our overarching concern is that because mental health services are not now funded at a level that comes close to matching the needs of county residents, it simply makes no sense to consider reducing funding even further. The Community Services Board (CSB) accounts for 29 of the net 45 FTE cuts. If anything, funding needs to be increased. The cost of not doing in so, in both human and financial terms, becomes more evident every day. The death in the county jail of Mrs. McKenna, a person with longstanding serious mental illness, is a poignant example.

Turning to the specifics of the proposed reductions, there are a number of items that are of particular concern. By highlighting these cuts we do not mean to imply agreement with the others.

Members of CONCERNED FAIRFAX recognize the inherent challenges associated with providing law enforcement and criminal justice. Our members often talk about the special challenges that they or their family members who have Serious Mental Illness (SMI) or Substance Use Disorder (SUD) have experienced when they become involved with law enforcement and the criminal justice system. The following reductions may compound those challenges.

1. Elimination of the Diversion to Detoxification Outreach Program (p.58). This program diverts publically intoxicated individuals to a therapeutic environment instead of the Adult Detention Center (ADC). According to the summary, the program diverted 234 individuals a total of 451 times, and thereby saved 1353 safety personnel hours which could then be spent on those matters that required safety personnel. We think this trade-off is a productive one both for the intoxicated person and for the public safety officers. Cities such as San Antonio and Seattle have found that diversion programs actually save millions of taxpayer dollars each year and improve outcomes for people who have SMI or SUD.
2. Reduce One Service Director Position and Restructure Staff Within Jail-Based Behavioral Health Services (p.59) The experience of being incarcerated is difficult for any person; for the person with SMI or SUD it is often much worse. Therefore it is critically important that the jail provide robust behavioral health services to those inmates. This proposed reduction removes a management position that is dedicated to supervising the development and administration of this program. Instead, these functions would “likely be absorbed by remaining staff.” With all due respect, we think that’s unlikely to provide the services that are needed. We believe that the McKenna case argues in favor of increased CSB engagement in the ADC versus a reduction.

3. Eliminate the OAR contract (p.48). The Opportunities, Alternatives, and Resources of Fairfax contract provides case management services and financial assistance for formerly incarcerated adults, with the goal of preventing re-incarceration. Many of those who were incarcerated have SMI or SUD, and may need this extra assistance to navigate the system to access the benefits available to them.

Although CONCERNED FAIRFAX concentrated on those reductions that clearly impacted mental health services, we also noticed others within the human resources area that seemed ill-advised.

One example appears on pages 42 and 47, “Eliminate Healthy Families Fairfax Program”. This program targets expectant mothers and families in the Bailey’s Crossroads/Lincolnia area that are at risk of maltreating their children. The program provides parenting skills, emotional support, and case management services. The justification for the reduction states that although 613 families (with 535 children) were served, this was only one-third of the mothers who could have been served. There is more demand for this service than is able to be met. This seems like a reason to increase funding, not to terminate the program.

As stated above, CONCERNED FAIRFAX believes that mental health services are underfunded across the board. We have attempted above to highlight some of the most significant proposals to reduce those services, and strongly urge reconsideration of these proposed cuts.

Respectfully submitted,

William Taylor, on behalf of CONCERNED FAIRFAX



An inmate sleeps in a mental health unit at the Cook County Jail, Sept. 5, 2013, in Chicago. (Photo: Alex Garcia/*Chicago Tribune*)

# San Antonio Reduced Its Jail Population by Treating the Mentally Ill

By Whet Moser

Yesterday City Council held a five-hour meeting on a story that's been going on for a couple years now—the closure of city mental health clinics. The city says that “care for the mentally ill actually has been expanded”; an official from the county jail, which has put itself at the forefront of civic mental health treatment, says they're dealing with more inmates suffering from mental illness than ever:

The city now says that there were 2,798 patients in the clinics at the time half were closed. Choucair told the Tribune that many of the patients on the original list were no longer “active,” and that all of active patients either remained with the six surviving clinics or were referred to another provider.

Dr. Nneka Jones, who heads up mental health services at the Cook County Jail, has described the jail as the largest mental health facility in the state if not the country. She

said the numbers of mentally ill detainees has grown about threefold to 2,800 in the past four years.

Tom Dart has been pushing this issue for awhile, in part to take pressure off the perpetually overcrowded jail he oversees, arguing that dealing with petty and/or victimless crimes like shoplifting and prostitution through a mental-health framework is ultimately cheaper in the medium and long term.

San Antonio was dealing with a similar problem as the 21st century began. True to Texas's law-and-order stereotype, the jail was filling up as a result of zero-tolerance policies. Against that stereotype, the city decided to divert certain criminals, dealing with mental illness and alcoholism, into specialized mental-health facilities while training police in mental-health intervention. Kaiser Health News has a fascinating report on it:

Everyone contributed funding to create the Restoration Center. It offers a 48-hour inpatient psychiatric unit; outpatient services for psychiatric and primary care; centers for drug or alcohol detox; a 90-day recovery program for substance abuse; plus housing for people with mental illnesses, and even job training.

More than 18,000 people pass through the Restoration Center each year, and officials say the coordinated approach has saved the city more than \$10 million annually.

It's not the first report on the Restoration Center. Journalist Pete Earley, whose interest in mental health and the criminal justice system (and his book *Crazy*) was inspired by his own son's experience with those institutions, admires their work:

I've visited the CCC [a 24/7 Crisis Care Center, part of the chain of services], as it is called, and have seen how easy the center has made it for law enforcement to drop off individuals with mental illnesses for care rather than booking them into jails or emergency departments.

But Bexar County didn't stop there, it began providing housing with close accessibility to the support services that individuals need to recover. This includes a restoration center that provides medical detox and a broad array of substance abuse services as well as sobering services and medical clearance screening. Most importantly, Bexar County integrated psychiatric care, transitional housing systems and general health services or to be blunt — it began providing wrap around services to people who needed help.

The Restoration Center's offerings are fairly fine-grained. There's a very short term "sobering unit," in which treatment lasts four to six hours; a three-to-five-day detox, a 16-week intensive outpatient service; methadone treatment; methadone and outpatient treatment specifically for pregnant women; a community court; housing for the homeless; and more.

It's been open five years, opening eight years after Bexar County started building its diversion treatment. First they started training the cops; then they opened a "speciality jail diversion facility;" then the Crisis Care Center. In other words, it's been assembled piece by piece, and it continues to

expand. Recently the Restoration Center started diverting veterans from the sobering unit into a vet-specific program, and the initial returns from the pilot study have been positive:

Outcomes determined from repeated measures analysis of baseline, 6-month, and 12-month interviews include clinically and statistically significant change in trauma symptoms (mean PCL-C scores reduced from 67.70 to 49.60,  $p \leq .001$ ), significant reduction ( $p \leq .05$ ) in homelessness (70.5% to 13.7%) and a significant increase ( $p \leq .001$ ) in veterans working full or part-time (14.7% to 26.8%). There were also significant improvements ( $p \leq .05$ ) on all of the BASIS-24 subscales (Depression/Functioning, Relationship, Self-Harm, Psychosis, and Substance Abuse).

As the Kaiser piece noted, Bexar County is reporting significant savings from its jail diversion. Here's an example of how that breaks down:

**Combined CCC and Restoration Documented and Immediate Cost Avoidance**  
 Year One April 16, 2008 – March 31, 2009  
 Year Two April 16, 2009 – March 31, 2010  
 Year Three April 16, 2010 – March 31, 2011

Cost Category	City of San Antonio	Bexar County	Direct Cost Avoidance
Public Inebriates Diverted from Detention Facility	\$435,435	\$1,983,574	\$2,419,009
	\$925,015	\$2,818,755*	\$3,743,770
	\$1,322,685	\$4,372,128	\$5,694,813
	A	B	
Injured Prisoner Diverted from UHS ER	\$528,000	\$1,267,200	\$1,795,200
	\$435,600	\$1,044,000	\$1,479,600
	\$421,000	\$1,010,400	\$1,431,400
	C	D	
Mentally Ill Diverted from UHS ER Cost	\$322,500	\$774,000	\$1,096,500
	\$283,500	\$676,000	\$959,500
	\$276,500	\$663,600	\$940,100
	E	F	
Mentally Ill Diverted from Magistration Facility	\$208,199	\$371,350	\$579,549
	\$179,833	\$322,360	\$502,193
	\$126,593	\$191,125	\$317,718
	G	H	

22  
Summary next slide

Perhaps surprisingly, the biggest line-item savings came from not locking up “public inebriates.”

It's drawing interest. Fresno is attempting to copy it; so is Portland. Houston copied the sobering unit. The upfront costs are nontrivial, as Fresno is learning, and San Antonio's model may look daunting in the number and sophistication of its pieces, but it's been almost 15 years in the making, piece by piece.



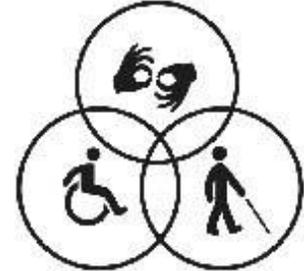
# FAIRFAX COUNTY

Fairfax Area Disability Services Board  
12011 Government Center Parkway, Suite 708  
Fairfax, Virginia 22035-1104  
Telephone: (703) 324-5868  
Fax: (703) 449-8689  
TTY: (703) 449-1186

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## V I R G I N I A

**Date:** March 12, 2015  
**To:** Fairfax County Human Services Council  
**From:** Fairfax Area Disability Services Board  
**Subject:** *Oppose the \$51,017 Proposed Elimination of the Legal Services for Persons with Disabilities Program*



The Fairfax Area Disability Services Board (FA-DSB) strongly opposes the \$51,017 elimination of the Department of Family Services' Legal Services for Persons with Disabilities Program in Fairfax County's Proposed Budget for Fiscal Year 2016. We urge the Human Services Council (HSC) to join us in contesting the unwarranted elimination of such an important program that is vital for the health, success, self-sufficiency and positive living of children, families, older adults and individuals with disabilities throughout the Fairfax area.

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### **Fairfax County's Proposed FY 2016 Budget Eradicates a \$51,017 Annual Contract with Legal Services of Northern Virginia to Provide the Following Essential Services**

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- Free legal assistance to appeal denials for Social Security benefits for low income people of all ages who cannot work because of a total and permanent disability.
- No cost legal counsel for individuals and families who are discriminated against because of a disability in the areas of housing, employment, transportation, public accommodation, healthcare, family law or education.
- Trainings and technical assistance for Fairfax County staff and customers, as well as an ongoing comprehensive public education campaign about the laws protecting the civil rights of individuals with disabilities and their families.

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### **Eliminating the Demonstrated Successful Outcomes Achieved by this Program will have a Dramatically Negative Impact on Families in Fairfax County**

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- More than 70 individuals who are unable to work because of a disability will not receive legal assistance with their appeals for Social Security benefits each year.

- Over 90 vulnerable customers with disabilities each year will be denied legal help finding a home or staying in their own homes, getting or maintaining a meaningful job, succeeding in school, or preserving their financial independence.
- Nearly 400 Department of Family Services customers will go without critical legal advice and consultation on housing, employment, healthcare, family and education law a year.
- Enormously beneficial public outreach and educational workshops on legal issues vital to families with disabilities will not be conducted.

*These examples represent one year of service. Should the program will be eliminated, the cumulative impact will be exponential.*

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### **The Value of the Legal Services for Persons with Disabilities Program is Well Established**

- The program helps people with disabilities of any age - from families with young children to isolated older adults - navigate the obligatory appeal process for Social Security assistance, whereby costs are shifted from provisional county funded services to more stable and longer term federally funded benefits.
- Customers are expedited through the requisite and challenging Social Security appeals process with compassion and specialized expertise, without being penalized or burdened by private attorney fees that far exceed their budgetary limitations.
- People who are eligible for Social Security benefits as a result of this program are often also eligible for Medicare and Medicaid, thereby granting much needed health insurance to some of Fairfax County's most vulnerable individuals and families.
- Legal assistance for individual enforcement of the Americans with Disabilities Act, Individuals with Disabilities Education Act and the Fair Housing Act promotes independence and enhances countywide compliance with these civil rights protections.

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### **Data that Demonstrates the Effectiveness of the Legal Services for Persons with Disabilities Program to Fairfax County and its Families**

- According to a [2015 Government Accountability Office study](#), families that successfully utilize programs like Legal Services for Persons with Disabilities receive higher, more stable incomes on a longer-term basis than those that are dependent on temporary locally funded benefits. That's more disposable money in their pockets which will be spent locally and is subject to *additional* tax revenue opportunities for Fairfax County.
- Recent successful Social Security appeals have resulted in individual reimbursements for Fairfax County ranging from \$8,626 to \$16,720.

- The Legal Services for Persons with Disabilities Program has recovered a yearly average of \$22,656 in federal reimbursements for Fairfax County:
  - FY 2012--\$29,909; FY 2013--\$16,720; FY 2014--\$21,340.
- Fairfax County has yet to realize the full potential of this program. It has the capacity to not only pay for itself, but to serve as a significant source of revenue for supplementing other programs enabling the county to provide higher quality service to a larger number of children, families and older adults with disabilities.

**The Elimination of the Legal Services for Persons with Disabilities Program have Negative Consequences on ALL of the Human Services Council's Strategic Focus Areas**

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- **Healthy People**
  - Since Medicare and Medicaid eligibility oftentimes coincides with access to Social Security, fewer people will benefit from these federally funded healthcare programs. As a result, more people will be at greater risk of experiencing life shortening health problems, and will either go without the care they need, or else end up being more of a financial strain on limited county funded programs.
- **Positive Living for Older Adults and People With Disabilities**
  - This program specifically supports people and families of all ages who are unable to work or who have been discriminated against because of a disability. Eliminating it will profoundly detract from several positive living opportunities that Fairfax County has to offer in nearly all aspects of community life.
- **Connected Communities**
  - Without this program's highly specialized legal protections, people will be less capable of being integrated in community activities, having meaningful competitive employment opportunities, and accessing the disposable income necessary to be fully engaged and participating members of Fairfax County.
- **Successful Children and Youth**
  - A cornerstone of the success of this program is helping children and families with legal assistance navigating the Individualized Education Program (IEP) process. If not for this legal help to cultivate favorable IEPs, children and youth with disabilities will be less equipped with the academic, vocational and social skills necessary to make the already challenging transition from high school to work or post-secondary education.

- **Economic Self Sufficiency/Financial Security**
  - By financing this program Fairfax County is investing in the economic self-sufficiency of our citizens. Without it, people will be far less independent and increasingly reliant on limited locally-funded assistance, rather than bringing more federally-funded resources to the county.
  
- **Sustainable Housing**
  - The highest percentage of housing discrimination complaints filed in Fairfax County has been based on disability for several consecutive years. The Legal Services for Persons with Disabilities program provides highly specialized disability related housing legal assistance that enables individuals and families to preserve sustainability in their own homes, rather than increasing dependency on county funded homeless or housing crisis intervention programs.
  
- **Infrastructure Support**
  - As a program that offers so much for Fairfax County Government and its people with disabilities—from economic self-sufficiency, public education, and customer empowerment—in areas as varied as housing, employment and transportation, the Legal Services for Persons with Disabilities Program is a low-cost initiative, with exceptionally high yield outcomes for Fairfax County and the families we serve. It is a value added service that is critical to our human services safety net, enabling Fairfax County residents of all ages and abilities to thrive.

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**Eliminating the Legal Services for Persons with Disabilities Program Is Wrong for Everyone**

If this program is eliminated it will have a devastating impact on our lowest income children, people and families with disabilities. More people will be dependent on limited county-funded stipends, and less federally-funded benefits will be coming into to the county. It will put an end to federal reimbursements for Fairfax County which could be used to enhance other services.

Initiatives like the Legal Services for Persons with Disabilities Program have demonstrated such overwhelmingly positive outcomes both for local jurisdictions and the vulnerable people that they serve, the vast majority of states provide such services without hesitation statewide. Virginia is one of only two states in the nation that does not. If it is eliminated in Fairfax County, people won't have any viable alternatives for comparable supports.

The \$51,017 Legal Services for Persons with Disabilities is a low-cost program and a wise investment in our community. Considering Fairfax County's \$3.8 billion budget, it is the wrong service to be abolishing as a cost saving measure. Doing so doesn't make any financial sense for Fairfax County Government, and the negative effect on people with disabilities will be dire.

Once again, the Fairfax Area Disability Services Board urges you *to join us in opposing the elimination of the Legal Services for Persons with Disabilities Program* when you make your FY 2016 Human Services budget recommendations to Fairfax County's Board of Supervisors.



## Legal Services for Persons with Disabilities Program

### What Does the Legal Services for Persons with Disabilities Program Provide?

- Free legal assistance to appeal denials for Social Security Disability benefits for low income individuals of all ages that are unable to work because of a total and permanent disability.
- No cost legal counsel for individuals and families who are discriminated against because of a disability in the areas of housing, employment, transportation, public accommodation, healthcare, or education.
- Trainings and technical assistance for Fairfax County staff and customers, as well as an ongoing public education campaign about civil rights laws impacting people with disabilities.

### What Does the Proposed FY 2016 Budget Mean for the Legal Services for Persons with Disabilities Program?

- The \$51,017 annual contract with Legal Services of Northern Virginia will be completely eliminated.

### How Will Eliminating Legal Services for Persons with Disabilities Impact Fairfax County Families?

- More than 70 individuals who are unable to work because of a disability will not receive legal assistance with their appeals for Social Security Disability benefits each year.
- More than 90 vulnerable customers with disabilities will be denied legal assistance when they need help finding or staying at home, getting or maintaining a job, succeeding in school or maintaining financial independence.
- Nearly 400 DFS customers a year will be without legal counsel provided during open office hours.
- Essential public outreach and educational workshops on legal issues vital to families with disabilities will not be conducted.

*These reductions represent one year of service. Since the program will be eliminated, the impact is cumulative.*

### How Does the Legal Services for Persons with Disabilities Program Benefit Fairfax County?

- Helps people with disabilities of any age - from families with young children to isolated older adults - navigate the obligatory appeal process for Social Security benefits, whereby costs are shifted from provisional county funded services to more stable and longer term federally funded programs.
- Customers are expedited through the frequent and challenging Social Security process with compassion and specialized expertise, without being penalized by high fees charged by attorneys.
- The families that successfully utilize this program receive higher, more stable incomes on a longer-term basis than those that are dependent on temporary locally funded benefits. That's more disposable money in their pockets which will be spent locally and subject to additional tax revenue opportunities.

Fairfax County is committed to nondiscrimination on the basis of disability in all programs, services and activities. For more information about the Legal Services for Persons with Disabilities Program, or to request this document in an alternate format, contact phone: 703-324-5868, TTY: 703-449-1186 or e-mail: [matthew.barkley@fairfaxcounty.gov](mailto:matthew.barkley@fairfaxcounty.gov).

## LTCCC Testimony to the Human Services Council March 12, 2015

Good evening Chairman Bell and members of the Human Services Council. My name is Steve Morrison, and I am the Chair of the Fairfax Area Long Term Care Coordinating Council's Government Affairs Committee. I am here this evening representing the LTCCC and the budget positions it adopted last evening. The LTCCC asks you to:

- OPPOSE the proposed \$275,000 elimination of the Rent Relief Program. The vast majority of recipients of rent relief in 2014 were very low income individuals with disabilities (431), with the remainder (76) being low income older adults, for a total of 507 recipients. Eligibility for the program is restricted to those categories. Recipients receive an average of around \$500 per year in assistance. There is not another source of such financial assistance from other organizations. The LTCCC believes this program needs to be retained to offer a modicum of parity with low income home owners who qualify for the county's Tax Relief program.
- OPPOSE the proposed \$51,017 elimination of the Legal Services Contract for Individuals with Disabilities. The contract provides critically needed legal services to individuals with disabilities who will not otherwise have access to those services. A similar program for older adults – funded by federal funds – is not proposed for cuts. The LTCCC believes that individuals with disabilities deserve the same treatment.
- OPPOSE the elimination of one Intellectual Disability Specialist I position in the Community Services Board. The cost of this position is \$65,655. The position provides direct services to CSB-operated group home residents. Eliminating the position would provide fewer staff hours available for person-centered individual and group activities such as individualized planning, personal shopping in the community, home and community-based recreation activities, and home and community-based entertainment. The LTCCC believes that this would negatively affect the quality of life of the group home residents.
- SUPPORT the closure of the Annandale Adult Day Health Care Center (ADHC). The average daily attendance at all ADHC centers was 138 in FY 2010; by the end of FY 2014, it had dropped to 96. Annandale is the oldest and smallest facility, and it is less than five miles from the Lincolnia ADHC, which will undergo a substantial renovation in the next year. All of the current Annandale participants can be accommodated at the remaining ADHCs, including Fastran transportation for those who use it. The LTCCC believes that continuing to keep five centers open is not a fiscally responsible choice, and supports the Annandale closure.
- SUPPORT the County Executive's addition of \$1.28 million to the Community Services Board's budget to ensure that all 79 of the June 2015 special education graduates of the County Public Schools turning 22 years of age who are eligible for day support and employment services and who currently do not have a funding source for such services will receive those services. The LTCCC thanks the County Executive for this addition and strongly supports it.

From: [dwbalzano@verizon.net](mailto:dwbalzano@verizon.net) [dwbalzano@verizon.net]  
Sent: Friday, March 06, 2015 3:58 PM  
To: Steffek, Tracy  
Subject: In support of funding Good Touch/Bad Touch

Dear Ms. Steffek,

I am writing to you to express my strong support for funding the Good Touch/Bad Touch body safety program for children that has, for a number of years, been taught by Fairfax County to school-age children. This is an essential tool in our community's efforts to fight against child abuse, especially sexual abuse of children.

I joined the fight against child abuse in 1993 when I became a volunteer for a national nonprofit organization that chose to establish programs within Virginia. Its program have been designed to prevent, to treat, to intervene and to educate about child abuse. During the past 22 years I have been active in both raising money and raising awareness about the importance of the multi-disciplinary approach to preventing the spread of child abuse within our community. I have served on the local board of the national nonprofit. I have also served on the statewide Board of Children's Advocacy Centers of Virginia (CACVA), the group that supports CACs throughout the Commonwealth. Finally, 2-1/2 years ago I joined with other community volunteers to start a local nonprofit, The Safe Children Foundation, that would raise funds to create a children's advocacy center for Fairfax County, a place where child victims of abuse could be interviewed ONCE by a trained forensic interviewer and receive follow-on care and services such as trauma-focused therapy. We are proud of the fact that we partner with County professionals who investigate child abuse cases. The children's advocacy center here in Fairfax County is called SafeSpot. We are pleased to know that SafeSpot is making a difference in the lives of our County's children and their families.

One of the key elements in the fight against abuse is giving children the tools they need to stay safe. The Good Touch/Bad Touch curriculum is suitable for children from preschool age through high school. While it is designed to prevent child sexual abuse, it is not a sex ed program. It empowers children by encouraging them not only to stand up for themselves but also to get help from safe adults. It helps them articulate their feelings. It engages the child in a lively, interesting way in the process of staying safe.

I strongly urge the Human Services Council to advocate for continued funding for the Good Touch/Bad Touch program. Over the years that I have watched it being taught in Arlington County schools as well as in Fairfax County - both public and private schools - I have been aware of the significant contribution this program makes in both raising awareness about keeping our children safe from child sexual abuse and in giving them skills to prevent or interrupt physical, emotional or sexual abuse. Please let's continue to give children the important tools they gain from having the Good Touch/Bad Touch program.

I would be happy to answer any questions that might arise from this letter or about child abuse prevention programs.

Thank you for your consideration,  
Denise Balzano, volunteer Board of Directors, The Safe Children Foundation  
1191 Meadow Green Lane, McLean, VA 22102  
703-362-1130 cell

**From:** nelfred50 [<mailto:nelfred50@yahoo.com>]  
**Sent:** Wednesday, March 04, 2015 2:44 PM  
**To:** Steffek, Tracy  
**Subject:** Budget cuts - good touch bad touch program

Hello Tracy,

My name is Tilly Blanding and I am a recently retired social worker of 30 years from Fairfax County. I won't bore you with statistics, but would rather share my feelings about the Good Touch Bad Touch program and the importance of prevention. The Good Touch Bad Touch program not only saves lives, but children's lives and protects them from the ugly fact that sexual abuse happens and it is happening everyday to our children.

The Good Touch Bad Touch program allows children to learn about sexual abuse and how to protect themselves. The only weapon our children have who fall victim to sexual abuse is knowledge. They get this knowledge through a program called Good Touch Bad Touch that is taught wherever children are visible... in public schools, in recreation and community centers, in addition to other community activities where children dwell. When children have the knowledge and skills to tell someone what is happening to them ... the cycle of abuse stops.

If this cycle of sexual abuse is not stopped and the child has not received treatment, a child can grow to feel a sense of self worthlessness, low self esteem and can possibly become suicidal. Prevention programs like the Good atouch Bad Touch help reduce the risk of childhood sexual assault and abuse in the younger years of a childs life by teaching them safe boundaries and healthy relationships. This preventive program teaches children the difference between what is a good touch is and a bad touch is.

Remember, only 10% of child sexual abuse is stranger danger....the other 90% is someone who knows the child, is related to the child, or has access to the child! Please vote to save this invaluable program, because an ounce of PREVENTION is worth a pound of CURE!

Thank you for your attention to this important issue.

Grateful,

N. Tilly Blanding  
"Concerned About Protecting Our Children "

From: eduff2 [eduff2@cox.net]  
Sent: Monday, March 02, 2015 6:39 PM  
To: Steffek, Tracy  
Subject: Human Services Council Comments Health Families

Dear Council Members,

My name is Evy Duff. I have worked closely with Health Families Fairfax since its inception. After retirement, I continued to be involved with the program because I believe in the goals of the program and the impact it has on families.

I was disappointed to learn that the County is recommending eliminating Healthy Families Fairfax (HFF). HFF has been a cornerstone child abuse and neglect prevention program since 1991. The data demonstrates the incredible need for HFF services - last year we served over 600 families. Still over 1,000 families were assessed as needing home visiting and support, but could not be enrolled due to limited program capacity.

Prevention is a long term effort, not a quick fix. The activities and interventions of HFF lay the foundation for school readiness. Ensuring a healthy birth weight, a medical home, sound parenting skills, and meeting appropriate developmental targets all contribute to giving HFF children a more successful transition into school. HFF has been working collaboratively with the School Readiness Community Collaborative Council (SRCCC) to align our strategic goals and avoid duplication of services thus saving the county money.

I have attached a flyer that describes HFF, lists outcomes and cost savings. HFF is an evidence-based program targeting children at risk for poor outcomes. This program gets positive results for the children and Fairfax County, please recommend restoring funding for HFF.

Thank you

Evelyn Duff, Chair

Health Families Fairfax Partnership Advisory Council

From: Bob Duvall [duvallre@hotmail.com]  
Sent: Friday, March 06, 2015 1:19 PM  
To: Steffek, Tracy  
Cc: John Cook  
Subject: FW: Body Safety Program

Tracy Steffek:

I have sent the following e-mail to the Fairfax County Board of Supervisors as they discuss/vote the Fairfax County Budget with a personal copy to John Cook, Braddock Supervisor.

I understand the Human Services Council briefs the Board of Supervisors on subjects such as the Good Touch - Bad Touch Program designed for elementary school students. This program needs to be presented to all 134+ elementary schools in Fairfax County. I further understand the program is implemented with a minimum impact on the budget and facilitated by DFS County trained volunteers.

With 186,000 students in the Fairfax County Public Schools, there is no time like the present when this type of program is definitely needed. Please request, through the Human Services Council, the Board of Supervisors to retain this program in the current County budget under review at this time.

Susie Duvall  
5322 Gainsborough Drive  
Fairfax, VA 22032  
(703) 323-8111

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To the Board of Supervisors:

How sad that a program that does so much to keep children safe is "under fire" for being voted out of the Fairfax County Budget.

The Good Touch - Bad Touch Program is where children learn--especially those 7 to 13 year olds in elementary school--what is good and what is not good when someone, other than an immediate family member, wants to/tries to touch them.

As a 18 year, long term Substitute Teacher with FCPS, I was always aware when my students were upset, not their "regular" self, or "teacher intuition" told me something was wrong. When I saw any signs of this type of behavior, I would notify the School Counselor and have that individual, who was property trained in child abuse, follow up with the student to see what was troubling them.

Programs such as the Good Touch - Bad Touch Program, geared for elementary students, can make the students aware of what is OK and what is not OK when it comes to their body. With what you hear, read and see (newspapers, TV, radio, and the Internet) the Body Safety Program could do nothing but good. If the program saves one child from being physically abused it would be worth its weight in gold.

Please reconsider dropping this program from the Fairfax County Budget.

Susie Duvall  
5322 Gainsborough Drive  
Fairfax, VA 22032  
(703) 323-8111

-----Original Message-----

From: Bootsie Humenansky [<mailto:bootsieh@aol.com>]

Sent: Saturday, March 07, 2015 8:06 AM

To: Steffek, Tracy

Subject: Human services council

Ms Steffek

I would like the opportunity to speak before the Human Services council in support of the Good Touch Bad touch program.

I have been very Active in the fight against child abuse for the past fifteen years- as a member of Childhelp, the county Blue Ribbon committee, Allies in Prevention and a co-founder of SAfeSpot, a Children's Advocacy Center which provides intervention and treatment of child abuse victims.

The Good touch Bad touch program has been utilized and proven effective for about 15 years or more. Children learn what they live and have limited experience so are unsure of what is appropriate behavior. If we can teach them acceptable behavior and empower them with the courage to speak up for themselves, we may be able to prevent the trauma. If they know that there are people that they can trust with their "secret", they will be more apt to speak up and then they can get the help they need- to protect them and provide treatment.

Even though we have mandated reporters, they cannot protect the child in the home.

With prevention, we can avoid many of the negative long term effects that are associated with child abuse - depression low self esteem, substance abuse , and other risky behaviors.

In addition, the trauma to the child requires therapy.

I apologize for this message. I am out of the country with limited access.

Thank you .

Bootsie Humenansky  
(703)-444-3839



Dear Human Services Council,

As the Executive Director of FACETS, I wish to submit input for consideration by the Fairfax County Human Services Council on the FY 2016 Advertised Budget Plan. Within the proposed budget for the Office to Prevent and End Homelessness, is the elimination of the Linda's Gateway Pilot Housing Program, in the amount of \$80,900. Based on the Housing First methodology, Linda's Gateway started in March 2010, was funded by OPEH and case managed by FACETS. It provides time-limited rental housing to homeless families. Families are placed in fully furnished apartments and are provided supportive services. It was established as alternative temporary housing model to divert families away from shelters and motel placements. This model was based on four strategic actions: collaboration among social services agencies, provide a single point of service for homeless families, create partnerships among businesses, local government, non-profits, and faith-based organizations.

Linda's Gateway Program currently operates as 4 apartment units in Region 1, of which the county leases the units. FACETS case workers transition families from the motel program to a Linda's Gateway apartment. Based on need, families are provided supportive services including: mental health services, counseling, vocational and housing services. FACETS conduct follow-ups with families on a weekly basis depending on the need. Families are expected to utilize services offered to gain the self-sufficiency necessary to prevent the reoccurrence of their homelessness and to move into affordable housing units.

Since the inception of this program in 2010, 61.29% of the families served have exited Linda's Gateway into permanent housing. There have been a total of 37 households served, 53 adults and 82 children, for a total of 135 participants. There were 12 participants with a disability. The average age for adults is 34 and for children, it is 6. There were 21 single parent households and 26 two parent households. There were 3 veterans and 25 participants that have experienced domestic violence. There were 48 males and 87 females served. As you can see this program cuts across a broad spectrum of families and has successfully assisted in the transition of families finding permanent housing.

In FY2014, Linda's Gateway program served 11 families, 45 unduplicated individuals, with 27 of those being children. Fairfax County Self-Sufficiency Matrix Outcomes showed a 26% gain in self-sufficiency of Adults in Linda's Gateway Program. Out of the 8 households that exited Linda's Gateway between July, 2013 and June 2014, 6 families, 75% moved into permanent housing within 110 days.

We have concerns about the future of the families that we are currently housing as well as the potential, like last year, of 45 individuals who will no longer be able to access this vital option in their transitioning to permanent housing. This project works closely with our community

partners that have helped to make it a strong vital part of the housing continuum. Linda's Gateway program collaborates with private landlords that coordinate with us to provide housing to literally homeless families without prequalifying them. Faith based community organizations work closely with this program to adopt units and mentor participants. It has truly been a community effort that has aligned with the County Blueprint on Ending and Preventing Homelessness and Affordable Housing, by placing families into permanent affordable housing and providing needed services to move them toward self-sufficiency.

The concern for the longer term systemic affect that this type of cut will cause in the continuum of services to the homeless, will be our biggest challenge as we do not want to see a reverse effect on shelter overflow if these units are closed.

Thank you for your consideration and your dedicated work at making the best possible recommendations for Fairfax County's Human Services.

Sincerely,

Margi Preston  
FACETS  
Executive Director



# FAIRFAX COUNTY

FAIRFAX COUNTY  
REDEVELOPMENT AND HOUSING  
AUTHORITY

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V I R G I N I A

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March 9, 2015

Sent electronically to [Tracy.Steffeck@fairfaxcounty.gov](mailto:Tracy.Steffeck@fairfaxcounty.gov)

Steven Bloom, Chair, Budget Committee  
Fairfax County Human Services Council

### Comments To Fairfax County FY 2016 Advertised Budget Plan

Despite the County's struggle with assuring that its finances are in order while concurrently providing necessary services to its citizens, we must be mindful of the fact that for many departments of County government the size and scope of employees' duties are expanding. Over the past five years the County has increased the size of its affordable housing stock and the number of persons served. This is a laudable record, however, the concurrent reduction in staffing of the Department of Housing and Community Development is disturbing. As the Advertised Budget seeks to increase the vacancies that will not be filled to reduce required funding to the HCD, it appears the environment of budget trimming via unfilled positions at HCD is being continued.

Although the work of the HCD and the FCRHA has brought distinction via its recent designation as a Moving To Work agency, I cannot but predict that maintaining the level of professionalism and attention to our residents will become increasingly difficult. At some juncture the amount of housing stock will continue to rise beyond the capacity of the existing staff to perform the myriad duties that are required. Already HCD staff is called upon to perform various ancillary tasks for related groups such as CCFAC and AHAC. The HCD resources are stretched and it is my concern that ultimate signs of reduced capacity due to lack of human resources are not only possible, but at the present rate, inevitable.

I, therefore, suggest that a reversal of such County policies as are eroding the human resources of the HCD, if even gradually, in recognition of the reality that the County and the FCRHA cannot continually increase the scope and duties of the HCD while concurrently draining the staff.

I, therefore, respectfully add to the record my personal observations regarding the Advertised Budget. My comments are my own and I have not requested a vote or concurrence from my fellow Commissioners since our meeting dates did not coincide with the dates for written comments.

Thank you for your consideration of the foregoing.

Sincerely,

Robert Schwanninger, Chairman, Fairfax County Rehabilitation and Housing Authority

## **Council discussions on areas of consensus for message to the BOS on the FY 16 Advertised Budget Plan**

***Note to Council members: this represents a brief summary of key points made by presenters from March 10 and 12<sup>th</sup> meetings***

### **Themes**

1. Return on Investments
2. Contributions to the health of the Fairfax County economy and support of strategic and core objectives of the Board of Supervisors
3. Prevention and earlier interventions save lives, money, resources in the community

### **Specific concerns from the community raised in testimony**

- Fairfax County is a community that cares for the most in need and vulnerable residents. Investing in families and children for their success is paramount to the vitality and healthy economy we wish to enjoy, promote and preserve.
- Many of the proposed program eliminations in human services seem to stand in direct contradiction to the BOS's economic plan to build for prosperity of our community. Prevention efforts, investment in housing and jobs all support the overall health of our county.
- Common concern about the interdependencies of human services programs and the unintended consequences of reductions in local programs designed to be stop gap services.
- There is continued erosion of locally supported human services programs that leverage community investments, resources and volunteers.
- The losses of discretionary, non-mandated human services in key areas are those very programs that prevent the need for the mandated, higher intensity services from growing. Where else should local investment be made? These provide a return on investment to the community and to the taxpayers over time.
- There is a direct and disproportionate impact to low income persons in the community in the proposed reductions.
- Concern for Fairfax job losses – and particularly for those in the nonprofit community
- Proposed reductions or eliminations where there are viable alternatives is good stewardship of limited resources. Some of the recommendations allow for redirection of resources, at reduced levels, but with goal of improved coordination through re-alignment of services.
- Other programs with proven cost saving strategies and positive outcomes for recipients should be brought to scale and investments in those programs should in fact grow, not decline or be eliminated. Consensus exists to restore and bring to scale some of the proposed program eliminations in preventive and early intervention areas - instead of reducing them - as part of the county's overall resourcing planning efforts to provide effective services.
- Several County core services require review and actual additional support that they did not receive. (Of particular concern raised by the Health Care Advisory Board is the inadequate staffing level for public health epidemiologist positions.