

### **Fairfax County Board of Supervisors**

### **Health, Housing & Human Services Committee**

June 26, 2018 11:00 a.m. – 12:30 p.m. Government Center Room 11

Meeting called by Supervisor Hudgins

Attendees: Fairfax County Board of Supervisors

### 11:00 - 11:05 HHHS Committee Chairman's Opening Remarks and Agenda Review

Supervisor Hudgins, Chairman of the Health, Housing and Human Services Committee and

Hunter Mill District Supervisor

### 11:05 – 11:15 Required Update on Head Start/Early Head Start

Nannette Bowler, Director, Department of Family Services

Anne-Marie Twohie, Director, Office for Children, Department of Family Services

Jennifer Branch, Office for Children, Department of Family Services

### 11:15 - 12:30 The Consolidated Community Funding Pool

Tisha Deeghan, Deputy County Executive, Health and Human Services

Chris Leonard, Director, Department of Neighborhood and Community Services

# Board of Supervisors Health, Housing and Human Services Committee June 26, 2018 Fairfax County Head Start Update



### **Annual Board Approval of Required Documents**

Staff will present a Board Item on July 10, 2018 requesting approval of the Head Start Policy Council Bylaws and the program's Self-Assessment Report as required by federal regulations.

### • Policy Council Bylaws

 The Office of the County Attorney has reviewed the Bylaws. No changes are recommended. The Policy Council reviewed and approved them on June 14, 2018.

#### Self-Assessment

- In January-March 2018, the Head Start and Early Head Start program conducted its annual selfassessment of its effectiveness and progress in meeting program goals, objectives, and federal regulations.
- Results were compiled into a Self-Assessment Report, which outlines strengths and areas to be addressed, as well as any actions taken to address them.

### Supplemental Funding Associated with the Head Start, Early Head Start, and Early Head Start Child Care Partnership and Expansion Grants

Staff will present a Board Item on July 10, 2018 requesting authorization to apply for and accept supplemental grant funding from the Office of Head Start to support a 2.6 percent Cost of Living Adjustment and offset operating costs for the Head Start, Early Head Start, and Early Head Start Child Care Partnership and Expansion grants.

### **Federal Review**

On February 12-16, 2018, the Office of Head Start a Focus Area II Monitoring Review of the County of Fairfax Head Start and Early Head Start Programs grants.

- All areas were found to be in compliance: Program Management, Program Governance, Financial Management, Enrollment, Recruitment, Selection, Eligibility and attendance, Health Program Services and Family and Community Engagement Program Services, and Education and Child Development Program Services.
- An area of concern was identified in the Education and Child Development Program Services in the Child Care Partnership Grant.
  - At the time of the Federal Review, two new Family Child Care Partners had not completed training in the Creative Curriculum and Teaching Strategies Gold. It was observed that these new Family Child Care Partners did not articulate the use of curriculum for planning and integrating child assessment data in individual and group lesson planning. This area of concern will be discussed with the Regional Office of Head Start for possible Technical Assistance.

### **Anticipated Funding Opportunity**

It is anticipated that there may be a funding opportunity from the federal Office of Head Start this summer.

### **Enrollment**

 All center-based and home-based programs are fully enrolled with a waiting list of 490 Head Start and Early Head Start children (365 Head Start, 125 Early Head Start). In the Head Start and Early Head Start grant the Family Child Care program is under-enrolled by ten children; the Early Head Start Child Care Partnership and Expansion Grant is under-enrolled by two children.



### **PROGRAM SELF-ASSESSMENT SUMMARY 2018**

Fairfax County Head Start/Early Head Start program conducted its required annual self-assessment during February and March 2018. Annual self-assessment of programs is a requirement of the Head Start Program Performance Standards 45 CFR 1302.102(b)(2)(i). All Fairfax County Head Start/Early Head Start programs, including those operated directly by Fairfax County Office for Children—Greater Mount Vernon Community Head Start (GMVCHS) center—and those operated contractually by family child care programs and by delegate agencies—Higher Horizons Day Care Center, Inc. and Fairfax County Public Schools (FCPS)—and all options (i.e., center-based, home-based, family child care and child care partnerships) were reviewed using a locally designed protocol based upon the Head Start Program Performance Standards (HSPPS). The self-assessment supports the continuous improvement of program plans and service delivery, providing an opportunity for engaging parents and community stakeholders.

**FISCAL** - Financial Management Systems, Reporting, Procurement, Compensation, Cost Principles, Facilities and Property

### Service area found in compliance.

### Highlights:

- There are sound fiscal systems in place that meet or exceed federal standards for financial reporting, accounting
  records, internal control, budget control, compliance with cost principles, cash management and administrative
  cost. Monthly desk reviews and quarterly fiscal monitoring systems provide a strong system of controls to
  ensure that delegate agencies are using HS/EHS grant funds in compliance with federal rules and regulations.
- In addition to federal funding, Fairfax County Government leverages several funding sources to support the
  Head Start/Early Head Start and Child Care Partnership & Expansion programs. Local Cash Match (LCM) dollars
  and in-kind contributions are provided by Fairfax County Board of Supervisors to support salaries, fringe
  benefits, transportation, supplies, food, facilities and/or contractual services.

**PROGRAM DESIGN AND MANAGEMENT -** Program Governance, Planning, Communication, Record-keeping and Reporting, Ongoing Monitoring, Human Resources, Organizational Structure, Facilities, Materials, Equipment and Transportation

### Service area found in compliance.

### Highlights:

- Parents are knowledgeable, and skilled in advocacy. Parents on the Policy Council are actively engaged in
  oversight of the program. Policy Council board members also serve as representatives on county-wide advisory
  groups (Successful Children and Youth Policy Team, the Community Action Advisory Board and the Equitable
  School Readiness Strategic Plan Team) and have been commended for their contributions by the Board of
  Supervisors. Additionally, parents participated in a national leadership advocacy training event in the fall of
  2017 and met with State legislators.
- Fairfax County Office for Children, Fairfax County Public Schools and the county's School Readiness Community
  Collaborative Council coordinated the development of a five-year strategic plan to ensure that the county's
  school readiness resources best support those who need them most. The Fairfax County Equitable School
  Readiness Strategic Plan lays out a vision and roadmap for ensuring that all young children in Fairfax County
  have the supports they need to be successful in school and beyond.

### Recommendation for improvement:

Continue County procurement process for issuing a Request for Proposal for Transportation Services.

### ERSEA – Eligibility, Recruitment, Selection, Enrollment and Attendance (ERSEA)

Area of non-compliance: Family Child Care option was under-enrolled since October 2017.

### Highlights:

 All programs have strong attendance procedures that align with the new HSPPS standards. Teachers and family service workers implemented new strategies regarding attendance which resulted in lower rates of chronic absence.

### **Recommendation for improvement:**

 Program has developed an action plan to meet and maintain full enrollment in the family child care option by increasing community awareness, outreach and enrollment strategies. Professional marketing input has enhanced marketing materials and strategies.

### CHILD DEVELOPMENT - Individualization, Disabilities Services, Curriculum and Assessment

### Service area found in compliance.

### Highlights:

- There are strong supports for children with disabilities; programs and agencies working cooperatively to help ensure that children receive the services they need, that families are fully engaged, and that transitions are managed effectively.
- Social-emotional curricula are being implemented to support children's healthy pro-social skill development and reinforce classroom practices that strengthen children's ability to self-regulate and problem-solve.
- The grantee supported and coordinated with programs to ensure that Classroom Assessment Scoring System (CLASS) observations were completed for Head Start classrooms, helping ensure timely, valid data for program and individual professional development.
- Programs participated in the Fairfax PreK to Third Grade Project (FP3) longitudinal study of children and their
  education experiences from preschool through third grade as part of a partnership with the University of
  Virginia, FCPS, and Fairfax County Office for Children. This program year, programs involved in the study
  received first year data (SY16-17) from a variety of validated measures to assess children's skill in language,
  literacy, mathematics, executive function, and social-emotional competencies, as well as the quality of teacherchild interactions.

### **Recommendations for improvement:**

- Strengthen coaching models that support professional development for staff and family child care partners.
- Conduct infant and/or toddler observations in EHS classrooms and partner homes to ensure full alignment of CLASS data for professional development to support positive teacher/partner-child interactions across the programs and options.
- Ensure programs have an organized approach to curricula to ensure implementation fidelity.

### HEALTH & SAFETY - Child health status and care, follow-ups, child nutrition, mental health, safety practices

### Service area found in compliance.

### Highlights:

- Overall improvement in compliance with dental exams and 90-day health requirements (which include physicals, hemoglobin, lead, TB, and blood pressure).
- Higher Horizons implemented text messaging as a form of communication to remind parents of health requirement due dates. As they have reported successful outcomes, this method will be implemented program-wide.

- FCPS Health and Mental Health staff attended enrollment appointments to complete assessments and screenings, which assisted in meeting health needs of each child prior to children starting in the classroom.
- GMVCHS participated in the 2018 Fairfax County Health Department immunization summary. Results found that at 24 months, 88 percent of the children enrolled at the Glen were up to date on their immunization sequence. This is significantly higher than the Virginia state average of 72 percent.
- Increased compliance with 45-day health, safety, and facility site visits 97 percent of HS classrooms were compliant, as were 98 percent of EHS classrooms.

**FAMILY AND COMMUNITY ENGAGEMENT -** Family Partnership Building, Parent Involvement, Community and Child Care Partnerships

### Service area found in compliance.

### Highlights:

- One hundred percent of families were assessed using the Family Outcomes Assessment and have been
  engaged in the Family Partnership Agreement process and identified goals for the Parent, Family, and
  Community Engagement (PFCE) outcomes.
- Programs are providing intentional and individualized family engagement services, with multiple family engagement opportunities including attending parent meetings and volunteering in classrooms.
- Parents have articulated high satisfaction with program services and are fully engaged in all service areas.

### Recommendations for improvement:

- Family service workers improve ongoing documentation regarding family progress toward goals.
- Programs are in the process of identifying research- and evidence-based parenting curricula.



# Planning for Future Cycles of the Consolidated Community Funding Pool (CCFP)

TISHA DEEGHAN, DEPUTY COUNTY EXECUTIVE HEALTH, HOUSING AND HUMAN SERVICES COMMITTEE- DISCUSSION JUNE 26, 2018

# CCFP Work Group

- Convened in January 2018 in response to BOS questions at June 20, 2017 meeting surrounding priority setting
- Comprising members of CCFAC\* and Subject Matter Expert (SME) staff
- Key accomplishments from work group:
  - Plan for BOS involvement on priority setting
  - Produced a white paper (provided)
  - Renewed commitment to CCFP and to community engagement
  - Renewed determination to fill vacancies

<sup>\*</sup>Consolidated Community Funding Pool Advisory Committee

# BOS Individual Briefings – April 2018

### **Discussion Items:**

- CCFP foundational history
- Need for CCFP
- Priority setting process
- Importance of community involvement
- Citizen Selection Advisory Committee (SAC) role
- CCFAC roles, responsibilities, and current vacancies
- Outcomes and leveraging contributions of nonprofit partners
- Yearly funding dollars 1998 to present

## Insights & Suggestions from BOS Briefings

- Continued support of CCFP vs pre-1998 approach
- Fill CCFAC vacancies reflective of Fairfax County diversity
- Reinforced importance of community input; add BOS involvement before each cycle
- Explore OP3 grant writing resources to assist nonprofits
- CCFP and CCFAC work informed by "One Fairfax"
- Ensure that services which undergird the county's response to critical needs do not risk being competitively defunded

### Insights & Suggestions from BOS Briefings

### The county could, for example,

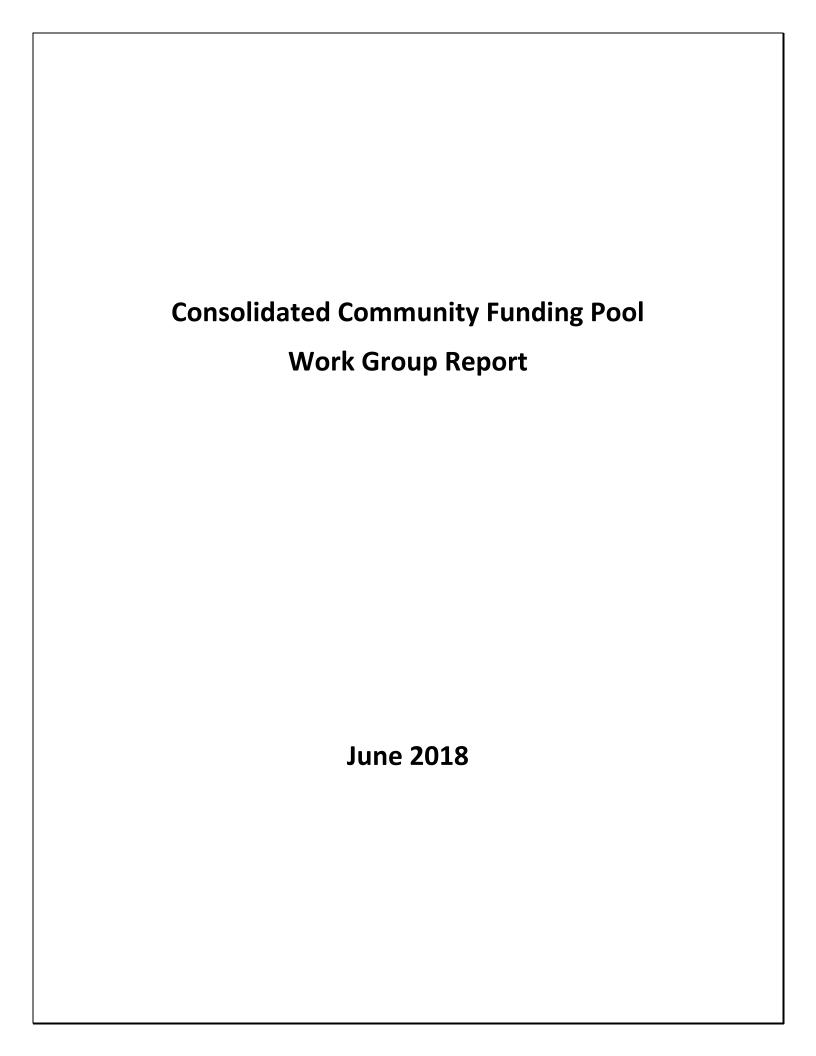
- Provide additional funds to county agencies to meet potential gaps; and/or
- Remove some amount of county funding from the Pool to directly contract through county departments for basic needs/safety net services; and/or
- Create categorical buckets or lanes that would ensure the specific targeting of funds following the next round's priority setting by the community and BOS; or
- Continue same processes as in recent cycles.

### Insights & Suggestions from BOS Briefings

- Include SME staff as members of the SAC(s); and/or
- County staff could determine the dollar amount of awards, once the citizen SAC has selected the awardees on merit; and/or
- Alter the funding cycle in some categories (or all) to longer (or shorter) time frames, budget permitting, and/or
  - Issue one RFP with multiple SACs; or
  - Issue multiple (categorical) RFPs; or
  - Issue one RFP with one SAC as in prior cycles.

# Next Steps & Thank You!

- Consider BOS initial feedback (today)
- Commence CCFAC recruitment
- Build workgroups per usual around planning for next cycle with CCFAC, DPMM, DMB, HHS agencies, BACs, nonprofits, BOS staff, and members of the community
- Note that any significant change may require a longer window to prepare
- Provide status report to the BOS in the late fall (when the normal cycle would begin regardless)



### **Table of Contents**

Executive Summary	1
Background Information	
SECTION I:	
Establishment and History of the Consolidated Community Funding Pool (CCFP)	3
SECTION II:	
Community Funding Implementation Team (CFIT) and Consolidated Community Funding Advisory Committee (CCFAC)	_
SECTION III:	
The Consolidated Community Funding Pool (CCFP) Process	6
Evaluation, Outcomes and Leveraging	7
SECTION IV:	
Selection Advisory Committee (SAC) Role	7
SECTION V:	
The Community Voice in the CCFP Process	8
Addenda	
CCFP Process Roadmap	.1
CCFP Community Engagement Sessions1	.2
Consolidated Community Funding Pool Funding History (FY1998-2019)1	.3
Source Documents and Work Group Members	1

### **Executive Summary**

The Consolidated Community Funding Pool (CCFP) was established in 1997 as a competitive funding process for human services programs developed and administered by nonprofits and community-based organizations. Currently, county general funds, as well as Community Development Block Grant (CDBG) and Community Services Block Grant (CSBG) funding support the CCFP. Over the last twenty years, the CCFP has been reviewed, updated and reaffirmed.

In January 2018, with anticipated changes in federal funding, Consolidated Community Funding Advisory Committee (CCFAC) membership challenges, and in response to questions raised by the Fairfax County Board of Supervisors (BOS), the Department of Neighborhood and Community Services (NCS) convened a work group to:

- Review and reaffirm the purpose of the CCFP.
- Review the structure and process of the CCFAC.
- Propose options for incorporating BOS input into the priority setting process.
- Make recommendations for new processes and/or procedures related to CCFAC organizational structure and member recruitment.
- Provide information to BOS to enable decision making.

The work group reviewed and compiled background information on the history of the CCFP and CCFAC. The work group reaffirmed the purpose of the CCFP and agrees it is relevant today, and the initial purpose is still valid.

The CCFAC was established to comply with the citizen participation requirements of CDBG and is a committee made up of representatives from Boards, Authorities and Commissions (BACs), and others. Per the CCFAC bylaws, membership is not set at a certain number of positions or from specific BACs, but historically the CCFAC has numbered about fifteen members. Currently there are eight CCFAC members. The deputy county executive for health and human services and the county executive are committed to filling the vacancies and ensuring the membership is reflective of the diversity in Fairfax County. In March 2018, the CCFAC voted to reduce the number of yearly meetings and updated the guidelines surrounding remote participation to encourage new members to the CCFAC.

While the voice of the community is vital in this process, the BOS is also a critical stakeholder and needs to be involved during the priority setting process. The recommendation from the work group is the BOS review and discuss the proposed priorities before each cycle, at a spring Health, Housing and Human Services committee meeting. It is in the best interest of all to have strong priorities, that address human service needs, current issues in front of the BOS and solutions at the grass-roots level.

The work group noted over the years there has been confusion about the grant award decision process. To clarify, the county executive appointed CCFAC has numerous responsibilities

outlined on page five, but are not involved in award decisions. The all-citizen Selection Advisory Committee (SAC) makes the CCFP funding award decisions.

While beyond the initial scope of this work group, other updates to the CCFP were recommended for future examination:

- Review how essential or critical services, those services that would cause great difficulty in the community if they were defunded, are treated in the CCFP process.
- Explore additional resources to assist nonprofits in grant writing, tracking outcomes and building capacity.
- Ensure the CCFP process and the work of the CCFAC is guided by the "One Fairfax" policy goals.

### **SECTION I**

Establishment and History of the Consolidated Community Funding Pool (CCFP)

In 1997, Fairfax County developed and implemented a new competitive grant process for funding human services offered by non-profit agencies. Before that time, non-profits received county funding through a variety of methods including annual contributions, formal contracts and a variety of grants. These funding mechanisms each had unique eligibility and reporting criteria, and there was no reliable way to track duplication, gaps in service or to evaluate if community needs were being met.

Facing a multimillion dollar shortfall for fiscal year 1997, the county re-evaluated its discretionary spending. In addition to deep cuts in county human services programs, non-profit agencies faced losing their contributions, as well as many long-standing service contracts. With community support, the Board of Supervisors (BOS) decided to maintain a reduced level of funding for non-profit service delivery and consolidating the contributory agency funds and several other funding streams into a Community Funding Pool (CFP). This decision signaled a change in the traditional relationship between the county and its partners in the human service community and offered an opportunity to collaborate on new ways of working together.

The Human Services Council was asked to consider how this process would work. The Council prepared a preliminary report suggesting a framework for the funding policy and proposed the establishment of a committee made up of community members to develop recommendations to the BOS. The Funding Policy Committee (FPC) was established to carry out this task.

The recommendations of the FPC were presented to the BOS on July 29, 1996 after benchmarking with 16 state and local jurisdictions, discussing with county staff and community representatives, and hosting community planning workshops and forums. The recommendations formed the basis for what was to be known as the Community Funding Pool (CFP), establishing that the pool would have:

- Stable and continuing funding support from the county
- Effective and efficient program management
- Citizen involvement at all levels
- Funding allocations based on community needs
- Public/private partnerships and collaboration
- Fair and equitable application procedures
- Effective program monitoring and evaluation

The initial version of the funding pool began in FY 1998 and totaled \$4 million, of which \$2 million was taken from the Contributory Agencies and the balance from other Human Services contracts. The pool also included \$500,000 of Federal Community Services Block Grant (CSBG) funds which were targeted, by federal mandate, toward poverty eradication efforts for county

residents at very low incomes (under 125% of poverty, as established by the federal government).

The FPC recommended the BOS establish a new citizen advisory body, the Community Funding Implementation Team (CFIT), to develop implementation guidelines, eligibility, evaluation criteria and annual priorities for the Funding Pool. The CFIT included members of human service citizen advisory boards and community and civic organizations, supported by a county staff team drawn from four human services departments. To avoid real or perceived conflicts of interest, the CFIT did not include non-profit service providers.

The priority areas were developed by the CFIT and reflected data informed needs and citizen input, and the three strategic principles of the county's human services system (i.e., Prevention, Self-Sufficiency, and Protection and Treatment). To ensure a broad spectrum of services were supported by the funding pool, the CFIT specified priorities among types of programs and populations to be served, with more funds targeted for proposals with higher priority programs or service populations.

The county released the first Request for Proposal (RFP) in the fall of 1997-98. Approximately 100 proposals were received and reviewed by a Selection Advisory Committee (SAC) made up of community members (see more on the role of the SAC in section IV).

In FY 2000, a portion of the county's Community Development Block Grant (CDBG) funding allocation was combined to create the Consolidated Community Funding Pool (CCFP). CDBG funds are streams of federal monies that support activities such as affordable housing and public services for low-and moderate-income households. With these additional funds the total amount available for bid was \$7 million. These solicitations were combined with the general fund monies to create the CCFP. During each funding cycle, the general fund monies allocated to the CCFP are reviewed, and historically, that amount has stayed level or increased.

### **SECTION II**

Community Funding Implementation Team (CFIT) and Consolidated Community Funding Advisory Committee (CCFAC)

### **Establishment of CCFAC**

To comply with the citizen participation requirements of CDBG, the CFIT was combined with another citizen group, the Consolidated Plan Review Committee to form the Consolidated Community Funding Advisory Committee (CCFAC).

The establishment of CCFAC was consistent with recommendations made by the Community Funding Implementation Team (CFIT) in its October 1997 report to the BOS to combine CSBG and CDBG funds with other local funding into a consolidated selection and administration process. This consolidated planning and funding process was also supported by the

Comprehensive Plan Review Committee and the Community Action Advisory Board, the two advisory groups charged with oversight of the federal CDBG and CSBG funding processes, respectively.

### Roles and Responsibilities of the CCFAC

As part of federal requirements for receipt of CDBG funds, a five-year Consolidated Plan and Annual Action Plans are required by the U.S. Department of Housing and Urban Development (HUD). The Annual Action Plan is submitted each spring to HUD and identifies criteria for use of CDBG, HOME and ESG funding. The CCFAC advises the BOS on the development and implementation of the Consolidated Plan and Annual Action Plan.

As outlined in the Citizen Participation Plan for the Consolidated Plan, the roles and responsibilities of the CCFAC are to:

- Seek community input;
- Advise the BOS on the development and implementation of the federally required Consolidated Plan;
- Advise the BOS on issues relating to the coordinated funding process:
  - Policy considerations
  - Funding priorities
  - Selection criteria
  - Performance measures
- Coordinate with the Community Action Advisory Board in implementation of the CSBG process;
- Implement the combined solicitation process and, if deemed appropriate, make comments on SAC recommendations forwarded by the county executive to the BOS;
- Monitor the Consolidated Plan process and report to the BOS on its effectiveness relative to defined goals; and
- Consider and evaluate the potential for including other county and community processes in the Consolidated Plan process.

### Membership and Organizational Structure

As stated in the Citizen Participation Plan for the Consolidated Plan, the CCFAC is composed of one representative from the Fairfax County Redevelopment Housing Authority (FCRHA), Advisory Social Services Board, Commission on Aging, Community Action Advisory Board (CAAB), Fairfax Area Disabilities Services Board, Fairfax County Alliance for Human Services, Fairfax-Falls Church Community Services Board, Fairfax-Falls Church United Way, Health Care Advisory Board, Homeless Oversight Committee, Human Services Council (HSC), and representatives from the business community, schools community, faith community, children younger than school age and youth needs and services community. Membership may include representation from human service provider groups, consumer and community organizations and Boards, Authorities and Commissions, which relate to the Human Services Community, as appropriate.

Members are appointed by the county executive and serve for a term of three years. Any individual may be reappointed for successive terms. There are two officers, a Chairman and Vice Chairman, with each serving a two-year term. Only two consecutive terms may be served in the same office. No member of CCFAC may have a formal relationship (i.e. board member, staff or contract or provide services for fee) with any non-profit entity applying for funding through any source of funds included in the Consolidated Plan.

Meetings are held at least six times per year, although special meetings may be held as necessary.

The CCFAC is jointly staffed by four county departments, Department of Housing and Community Development (HCD), Department of Family Services (DFS), Department of Neighborhood and Community Services (NCS) and Department of Administration for Human Services (DAHS). The Department of Procurement and Material Management (DPMM) is involved with the RFP and contracts process. HCD has administrative oversight responsibility of the Consolidated Plan and Annual Action Plan; DPMM and NCS have administrative oversight responsibility for the CCFP.

### **Current Members**

There are currently eight CCFAC members representing the following organizations: CAAB, FCRHA, the business community, Fairfax Area Disability Services Board, Health Care Advisory Board, FCPS/PTA Community, HSC, and the Fairfax County Alliance for Human Services. CCFAC has shared with the deputy county executive that additional areas to seek representation from include: homeless prevention, aging/elderly, early childhood development/young children, behavioral health and cross-cutting issues (e.g., civil rights, accessibility, inequality).

### SECTION III

The Consolidated Community Funding Pool (CCFP) Process

Throughout CCFP history, the CCFAC has strategically adjusted the priorities to meet the county's varying needs and to recognize the changing nature of community-based priorities.

The CCFAC sets broad funding priorities using several different strategies including:

- Review of the current human service needs;
- Program utilization data;
- Input from community engagement sessions and surveys; and
- Evaluation of applications and assessments from past CCFP proposal solicitation.

Draft funding priorities are presented at a public hearing and the BOS approves the final priorities. The priorities are outlined in the Request for Proposal (RFP) and included in the RFP evaluation criteria. DAHS lead the development of the RFP, which is approved and released by

DPMM. DPMM is primarily responsible for the managing the pre-proposal conference, proposal receipt and adherence to procurement procedures. A roadmap of the CCFP process can be found on page 11.

### **Evaluation, Outcomes and Leveraging**

Since its inception and continuing today, the CCFP process is outcome based and includes strong evaluation measures, with a focus on leveraging resources and tracking collective impact. The county's financial investment in these programs is strengthened by the additional resources contributed by organizations funded through the CCFP. This approach leads to a more efficient use of county resources and fosters partnerships between service providers.

An outcome-focused approach makes it easier for organizations to convey what they wish to achieve through their proposals. In their proposal narrative, applicants explain how their program plans to achieve the selected standardized outcome, how it addresses the identified needs, and how each outcome will have an impact on the population and/or community served.

Applicants are briefed on outcome and data collection, and all programs are required to develop and track expenditures, program services and demographics on a regular basis. Proposals must describe plans for fiscal accountability, program sustainment and the ability to increase program leveraging. Required information is entered in a vendor portal and county staff monitors and analyzes the data for compliance. These statistics help measure the collective impact of CCFP-funded programs and demonstrates the success of the program.

During FY2017, for every \$1.00 provided through the CCFP, \$5.16 in cash, donated goods, services and volunteer time was leveraged by community and faith-based organizations to support these projects. Over 30,900 people provided more than 383,000 hours of volunteer services. These programs deliver a wide variety of services with outcomes that are tailored to the needs of residents.

### **SECTION IV**

### Selection Advisory Committee (SAC) Role

Each award cycle, the deputy county executive for health and human services appoints a Selection Advisory Committee (SAC) comprised of approximately 24 Fairfax County residents to review, rate and recommend proposals for awards based on the evaluation criteria approved by the county's purchasing agent. Individuals on the SAC serve on a volunteer basis and must reside in Fairfax County. SAC members may not be a current officer, employee or board member of an applicant's agency, a current county employee or a member of the CCFAC. SAC members are recruited through community outreach efforts.

The composition of the SAC varies from cycle to cycle based on the availability of community members willing to commit to a total of more than 1,600 volunteer hours during the three-month process. In recruiting SAC members, staff seeks to ensure that representatives from all four human service regions are represented on the committee. Additionally, SAC members have diverse ages, ethnicities and backgrounds. Members range from college students to retirees and include representatives from the business community, federal government, educators and those who have worked or volunteered in the health and human service system.

A Technical Advisory Committee (TAC), comprised of county staff, assists in preparing informational materials for the SAC, including an analysis of health and human services gaps and demographic information. TAC members are available throughout the review process to provide technical expertise related to a specific proposal, which may include information about how proposed services overlap with existing county contracts or analysis of offerors' financial statements.

During proposal review, the SAC is separated into subcommittees. Within each subcommittee, there are two teams responsible for reviewing assigned proposals. SAC members are responsible for reviewing the proposals independently and then jointly with their subcommittee. The full SAC then convenes and votes on the final recommendations for award. Based on the final technical and cost proposal scores, the top-rated proposals will be allocated funding amounts based on the project cost, the final proposal score and the available funding. With the approval of the budget by the BOS, the purchasing agent executes the final contracts. Once the awards are issued, staff will deliver orientations for the new awardees to ensure awareness with the contractual requirements, including the submission of monthly and quarterly reports on project performance and expenditures to the county. DAHS staff have facilitated the SAC process and negotiated the final contracts with the awardees. HCD and DAHS/DPMM are responsible for monitoring contract compliance.

### **SECTION V**

### The Community Voice in the CCFP Process

From the beginning, community participation has been integral to the development, implementation and on-going operation of the Community Funding Pool. The Community-Based Agency Funding Policy Committee (FPC) was established by the board to develop and recommend a policy for providing competitive grant funding support to community-based human services agencies, and to gather information on funding goals and policies from a wide variety of sources. Some of the most valuable information was provided by more than a dozen jurisdictions around the country that had already developed funding policies and frameworks for community agencies that deliver human services. On the question of citizen involvement,

 All jurisdictions reported that they used citizen committees to obtain input on community needs and to set funding priorities.  The most common process used to make funding allocation decisions involved citizen committees (with staff support) evaluating proposals and making funding recommendations to the elected body, and staff conducting ongoing contract monitoring.

The FPC held a community planning workshop to obtain ideas, feedback, and recommendations from stakeholders in the funding process. More than 100 community participants agreed that there should be community involvement at all levels in Fairfax County's program. The policies recommended by the FPC and approved by the BOS to guide the development of the Funding Pool therefore includes the following:

Fairfax County should ensure that citizens, especially recipients of services, are involved at all levels of the funding process—planning, setting priorities, making recommendations for funding, and monitoring/evaluation. (Policy III)

Furthermore, the CFP includes federal funding (CSBG and CDBG) that requires community participation. From the start of the Funding Pool, and with the cooperation of the CAAB, the CSBG funding process was integrated with the CFP process. The FPC had recommended the future merger of the CFP process with the County's Consolidated Plan Process, which includes federal funding programs (CDBG, HOME, Emergency Shelter grants and HOPWA). The Consolidated Plan process also entailed a planning and priority-setting process guided by a citizen committee and based on community input.

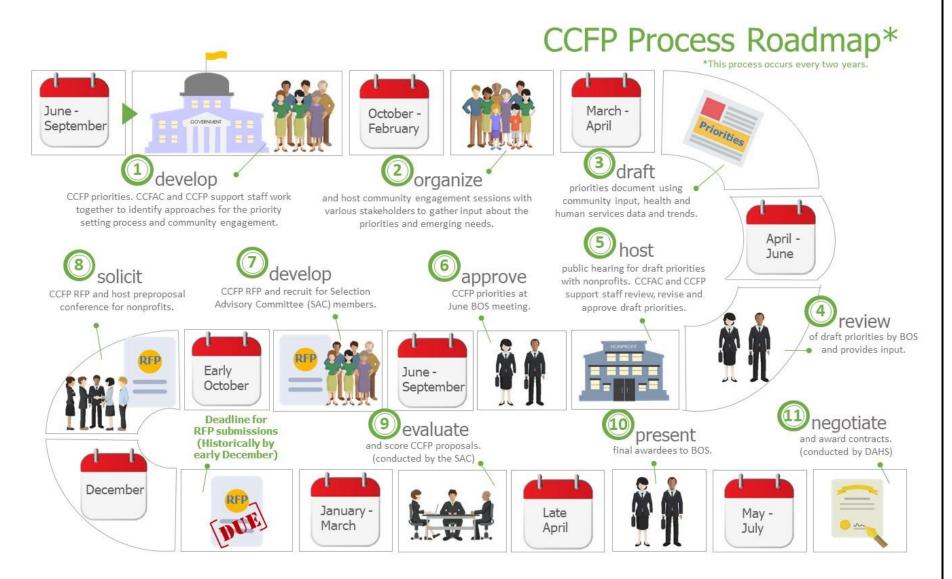
At the direction of the BOS, the two processes were merged for the FY 2000 funding year, and the Funding Pool became the Consolidated Community Funding Pool (CCFP). The two citizen committees, the Community Funding Implementation Team (oversight of the Funding Pool) and the Consolidated Plan Review Committee (oversight of the CDBG process) were replaced by CCFAC, a new citizen committee responsible for advising the board on the development and implementation of the Consolidated Plan and implementing a combined solicitation process for Funding Pool and CDBG funds.

In addition to the ongoing community participation in the CCFP, additional community and stakeholder input and involvement has been obtained whenever adjustments and major changes in policies and process have been considered (e.g., changing from a one-year cycle to a two-year funding cycle; the creation of a two-tiered application process; enhanced demographic information for the SAC, etc.). See page 12 for further details on the community input process. The CCFAC also hosts a public meeting related to the CCFAC priorities.

The importance of community participation in the CCFP process was reaffirmed by the Steering Committee that reviewed the CCFP in 2012-2014. The Steering Committee's report made recommendations for strengthening community involvement in identifying needs, trends and gaps in services, all directed at a more robust priority setting process. Additional community involvement helped return the process to some of the earlier successful community input

strategies that had been discontinued because of funding reductions related to staff support. These recommendations have been implemented.	

### **CCFP Process Roadmap**



### **CCFP Community Engagement**

### **CCFP Community Engagement Sessions** REPORT-OUT



As part of the FY2019-2020 CCFP Priority Setting process, we hosted a series of community engagement sessions across the county to identify emerging needs and strengths and gaps within human services programs.

This report-out provides a summary of the process and the feedback that emerged.

### WHO DID WE ENGAGE?

NCS staff strategically identified various groups to engage with in efforts to capture input and insights.



Nonprofits Community-Based Organizations County Service Providers



Clients



Residents **Families** 



Worship Faith-Based Organizations



Boards. Authorities, & Commissions

### **HOW DID WE ENGAGE?**

We utilized a hybrid strategy for community engagement that included traditional and technological methods.

### TRADITIONAL



sessions ween December 2016 and March 2017)

Hosted a series of "town hall meetings" that afforded an opportunity for various audiences to provide insight and input.

#### TECHNOLOGICAL



responses

(ONLINE)

Developed a webpage to capture online feedback.





"Tweeted" out the webpage link community groups.

#### WHAT FEEDBACK EMERGED?





Service Navigation



Supplemental Food Programs



Affordable and Accessible Childcare



HOLA

Language Literacy



Youth Development

Housing Housing Supportive Services Acquisition

After analyzing and compiling all the feedback, we identified the following themes:

Community-Based Transportation Networks







Development



Fresh Food Accessibility



Aging in Place



Literacy

AND we acknowledge that racial and social inequities still impede access to opportunities. How can we then use the funding pool to improve equitable outcomes?

### Consolidated Community Funding Pool Funding History

FISCAL YEAR	GENERAL FUND AWARD (WITH CSBG)	CDBG AWARD AMOUNT (ADOPTED BUDGET)	COMBINED TOTAL	NUMBER OF PROPOSALS FUNDED	PERCENT OF CDBG TO TOTAL**	PERCENT INCREASE FROM PREVIOUS FY
1998	\$4,271,553	\$1,897,320	\$6,168,873	52	31%	
1999	\$4,887,260	\$2,227,093	\$7,114,353	58	31%	15.33%
2000	\$5,146,285	\$1,905,219	\$7,051,504	75*	27%	-0.88%
2001	\$5,820,176	\$1,872,780	\$7,692,956	85	24%	9.10%
2002	\$5,923,150	\$1,883,371	\$7,806,521	86	24%	1.48%
2003	\$6,278,539	\$1,863,121	\$8,141,660	94	23%	4.29%
2004	\$6,458,709	\$2,231,995	\$8,690,704	94	26%	6.74%
2005	\$6,781,644	\$2,209,945	\$8,991,589	111	25%	3.46%
2006	\$7,470,111	\$2,149,243	\$9,619,354	111	22%	6.98%
2007	\$8,324,073	\$2,042,292	\$10,366,365	121	20%	7.77%
2008	\$8,720,769	\$2,037,815	\$10,758,584	121	19%	3.78%
2009	\$8,970,687	\$2,002,792	\$10,973,479	117	18%	2.00%
2010	\$8,970,687	\$2,002,792	\$10,973,479	117	18%	0.00%
2011	\$8,970,687	\$2,010,790	\$10,981,477	113	18%	0.07%
2012	\$8,970,687	\$2,082,914	\$11,053,601	113	19%	0.66%
2013	\$9,867,755	\$1,775,579	\$11,643,334	107	15%	5.34%
2014	\$9,867,755	\$1,575,159	\$11,442,914	107	14%	-1.72%
2015	\$10,611,143	\$1,825,950	\$12,437,093	112	15%	8.69%
2016	\$10,611,143	\$1,859,139	\$12,470,282	112	15%	0.27%
2017	\$11,141,700	\$1,435,590	\$12,577,290	116	11%	0.86%
2018	\$11,141,700	\$1,442,985	\$12,584,685	116	11%	0.06%
2019	\$11,698,785	\$1,450,703	\$13,149,488	116	11%	4.3%
TOTAL	\$180,904,998	\$41,784,587	\$222,689,585	2254	19%	78.58%

<sup>\*</sup>estimated \*\* CDBG is comprised of TPS and capital acquisition funding, and TPS funding is capped at 15% of the CDBG grant award

### **Source Documents**

Consolidated Community Funding Pool FY2019-2020 RFP

Review of the Consolidated Community Funding Pool Steering Committee Report (7-22-2014)

Blending Community Service Funds to Achieve Measurable Results (7-2003)

The Public Manager "Local Government Helps Build Capacity of Community-Based Organizations" (Summer 2003)

Consolidated Community Funding Advisory Committee's Review of the Consolidated Community Funding Pool Processes and Committee Operations (11-2001)

Virginia Municipal League Achievement Award Nomination "Consolidated Community Funding Pool" (5-1999)

The Fairfax County Consolidated Plan for fiscal years 1996-1998: A Historical Overview (10-1998)

Consolidated Community Funding Advisory Committee By-Laws (original document 7-14-1998)

Recommendations for a Community-Based Agency Funding Support Policy (7-29-1996)

### **Work Group**

Marlene Blum	CCFAC/Health Care Advisory Board
Michele Menapace	CCFAC/Human Services Council
Sara Brinkmoeller	Dept. of Administration for Human Services
Dawn Hyman	Neighborhood and Community Services
Andrew Janos	Dept. of Administration for Human Services
Laura Lazo	Housing and Community Development
John Ruthinoski	Family Services
Katie Strotman	Neighborhood and Community Services
Alternate: Ann Zuvekas	CCFAC/Fairfax County Alliance for Human Services