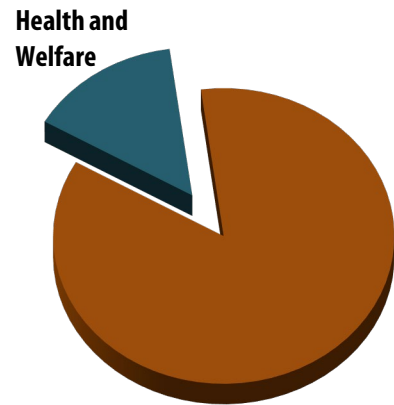


Health and Welfare Program Area Summary

Overview

The Health and Welfare program area consists of three agencies – Agency 67, Department of Family Services; Agency 71, Health Department; and Agency 79, Department of Neighborhood and Community Services. The collective mission of the agencies in the Health and Welfare program area is to protect the vulnerable, help people and communities realize and strengthen their capacity for self-sufficiency, and ensure good outcomes through prevention and early intervention. In addition to these three agencies, there are others that support the Fairfax County Health and Human Services (HHS) System. They are Agency 38, Department of Housing and Community Development; Agency 81, Juvenile and Domestic Relations District Court; Fund 40040, Fairfax-Falls Church Community Services Board (CSB); and Fund 40045, Early Childhood Birth to 5. Human Services functions are also addressed in other funds such as Fund 50000, Federal-State Grants and Fund 10020, Consolidated Community Funding Pool. The HHS System works to coordinate the relationships among public and community-based efforts to achieve shared goals for individuals, families, and communities. The HHS System continues to focus on cross-cutting strategic initiatives, the broad community outcomes they support, and the system's progress toward achieving them. A detailed narrative for each agency within the Health and Welfare program area can be found on subsequent Volume 1 pages of the FY 2025 Adopted Budget Plan. The community outcome areas are summarized below:



County General Fund Disbursements

- People are able to meet basic needs for themselves and their families
- Children thrive and youth successfully transition to adulthood
- Seniors and persons with disabilities live with maximum dignity and independence
- People and communities are healthy
- People have access to high-quality appropriate services at the right time
- The HHS System maximizes the community's investment in human services

Department of Family Services

The Department of Family Services (DFS) strengthens the well-being of the County's diverse community by protecting and improving the lives of all children, adults, and families through assistance, partnership, advocacy, outreach, and quality services. The services provided by DFS provide the framework for a strong, equitable, and resilient Fairfax County: safe communities, a thriving economy, excellent schools, and opportunities for everyone to feel connected and engaged. DFS focuses on safety and protective services for children, older adults, and victims of domestic and sexual violence; public assistance benefits and employment training to close income gaps and enable people to become economically secure; and supportive programs that build on the strengths and resilience of families, children, people with disabilities, and older adults so they can thrive. These services mitigate crime, abuse, and neglect; lessen the strain on public safety and judicial resources; increase the workforce and tax base; improve self-sufficiency and educational outcomes; and create an environment where all residents have opportunities to contribute to the success of the community. They are delivered collaboratively and with compassion, through people-focused practices that encourage innovation and demand accountability.

Health and Welfare Program Area Summary

More information on Department of Family Services programs and services can also be found on the DFS public website which can be found at: <https://www.fairfaxcounty.gov/familyservices/>

Health Department

The mission of the Health Department is to protect, promote, and improve health and quality of life for all in the community. This is accomplished through five core functions: preventing epidemics and the spread of disease; protecting the public against environmental hazards; promoting and encouraging healthy behaviors; assuring the quality and accessibility of health services; and responding to disasters and assisting communities in recovery. These functions are the community-facing elements of the 10 Essential Public Health Services (EPHS), which define public health and serve as the framework for nationally adopted quality and performance improvement initiatives nationwide, such as local public health accreditation. In May 2016, the Health Department was accredited by the Public Health Accreditation Board, having met national standards for high quality public services, leadership, and accountability. The Health Department attained reaccreditation in FY 2024 from the Public Health Accreditation Board. A new strategic plan was adopted in FY 2023, designed to incorporate lessons learned from the COVID-19 pandemic; address the challenge of securing and retaining resources for ongoing activities that are critical to the community; and seizing opportunities to leverage community assets and other resources to reorient the department towards population-based programs focusing on disease prevention and health promotion.

More information on Health Department programs and services can also be found on the Health Department public website which can be found at: <https://www.fairfaxcounty.gov/health/>

Department of Neighborhood and Community Services

The Department of Neighborhood and Community Services (NCS) partners with communities, families, and individuals to provide opportunities to access a continuum of resources that promote equity and create positive outcomes for people of all ages and abilities. NCS envisions connected communities where all individuals and families are supported and empowered to thrive. Programs and services within the department advance the racial and social equity principles of One Fairfax and promote equitable outcomes and access to resources for County residents. NCS serves Fairfax County residents across the lifespan continuum with a human centered approach and address emerging trends and unmet needs across the Health and Human Services System for residents of all ages and abilities. NCS has five core strategic principles that guide the department's programs and services towards achieving its mission. These principles are:

- Facilitate Economic Security and Resiliency
- Expand Access to and Awareness of Resources
- Support Health and Well-Being
- Promote Community and Belonging
- Equip the Agency to Meet Evolving Needs

More information on NCS programs and services can also be found on the NCS public website which can be found at: <https://www.fairfaxcounty.gov/neighborhood-community-services/>.

Health and Welfare Program Area Summary

Program Area Summary by Category

Category	FY 2023 Actual	FY 2024 Adopted	FY 2024 Revised	FY 2025 Advertised	FY 2025 Adopted
FUNDING					
Expenditures:					
Personnel Services	\$182,677,812	\$231,529,569	\$227,574,113	\$241,816,774	\$241,816,774
Operating Expenses	134,349,267	142,668,907	155,322,839	132,056,740	131,965,828
Capital Equipment	624,124	0	7,817,025	0	0
Subtotal	\$317,651,203	\$374,198,476	\$390,713,977	\$373,873,514	\$373,782,602
Less:					
Recovered Costs	(\$9,604,015)	(\$11,827,701)	(\$11,827,701)	(\$534,749)	(\$534,749)
Total Expenditures	\$308,047,188	\$362,370,775	\$378,886,276	\$373,338,765	\$373,247,853
Income	\$138,746,479	\$135,521,478	\$139,454,528	\$142,913,616	\$143,200,691
NET COST TO THE COUNTY	\$169,300,709	\$226,849,297	\$239,431,748	\$230,425,149	\$230,047,162
AUTHORIZED POSITIONS/FULL-TIME EQUIVALENT (FTE)					
Regular	2966 / 2870.7	2970 / 2873.95	2974 / 2880.29	2964 / 2867.25	2965 / 2870.59

Program Area Summary by Agency

Agency	FY 2023 Actual	FY 2024 Adopted	FY 2024 Revised	FY 2025 Advertised	FY 2025 Adopted
Department of Family Services	\$145,756,538	\$168,229,552	\$169,578,319	\$172,585,734	\$172,580,550
Health Department	73,586,069	87,890,450	92,240,365	90,802,146	90,797,029
Department of Neighborhood and Community Services	88,704,581	106,250,773	117,067,592	109,950,885	109,870,274
Total Expenditures	\$308,047,188	\$362,370,775	\$378,886,276	\$373,338,765	\$373,247,853

Budget Trends

The agencies in the Health and Welfare program area protect the vulnerable, help people and communities realize and strengthen their capacity for self-sufficiency, and ensure good outcomes through prevention and early intervention. For FY 2025, the total funding level of \$373,247,853 for the Health and Welfare program area represents 18.3 percent of the total General Fund direct expenditures of \$2,043,971,411. This total reflects a net increase of \$10,877,078, or 3.0 percent, over the FY 2024 Adopted Budget Plan total of \$362,370,775. The increase is mainly attributable to increases of \$12.5 million for employee compensation increases, including \$4.6 million for a 2.00 percent market rate adjustment (MRA) for all employees and \$3.8 million for performance-based and longevity increases for nonuniformed merit employees, both effective July 2024, as well as \$4.1 million in other personnel adjustments to support employee retention and recruitment efforts that will reduce pay compression and align the County's pay structure with the market based on benchmark data. Other increases included funding of \$0.8 million to support positions in the Health Department Laboratory due to the expiration of grant funding; \$0.4 million for the second year of the behavioral health services navigation program; \$0.5 million for two new rooms for the School Age Child Care program; \$0.5 million to continue Board of Supervisor initiatives: My Brother's Keeper and Transportation Options, Programs and Services program; \$0.2 million to support increased payments to foster care families, as well as a transfer of \$1.2 million from Agency 51, Fairfax County Park Authority to NCS associated with the Rec-PAC program. In addition, \$5.2 million is included to support contract rate increases for providers of mandated and non-mandated services; PLUS system licenses to help agencies complete zoning, building, permitting, or other land development processes online; and Department of Vehicle Services charges based on anticipated billings for maintenance

Health and Welfare Program Area Summary

and operating-related charges. These increases are offset by a decrease of \$2.2 million associated with the transfer of the FASTRAN program to Agency 40, the Department of Transportation, and reductions of \$8.2 million included as part of the County's effort to balance the FY 2025 budget.

The Health and Welfare program area includes 2,965/2,870.59 FTE positions, which reflects a net decrease of 9/9.7 FTE positions from the *FY 2024 Revised Budget Plan* level. FY 2025 includes a net decrease of 1/2.2 FTE positions in Agency 79, Department of Neighborhood Services and a decrease of 8/7.5 FTE positions taken as part of the reduction exercise mentioned above.

A detailed narrative for each agency within the Health and Welfare Program Area can be found on subsequent Volume 1 pages of the [FY 2025 Adopted Budget Plan](#).

One Fairfax Impact

The agencies in the Health and Welfare Program Area promote social and racial equity by applying an equity lens in all aspects of work, policies, and practices, in order to identify the root cause of health inequities and support the safety, health, and wellness of county residents.

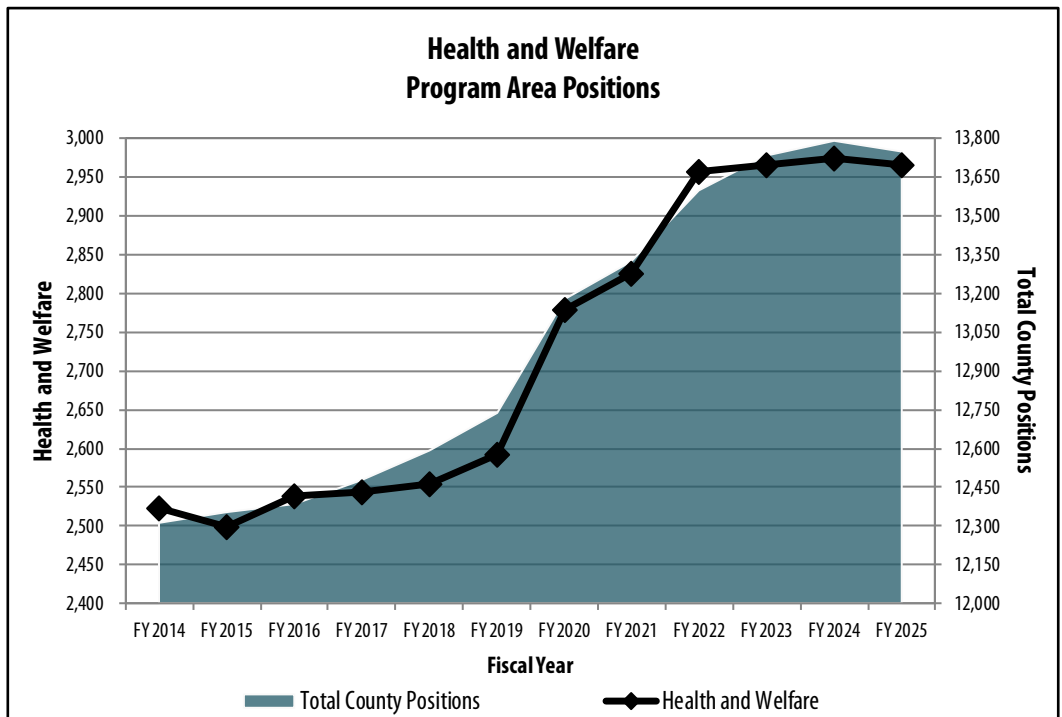
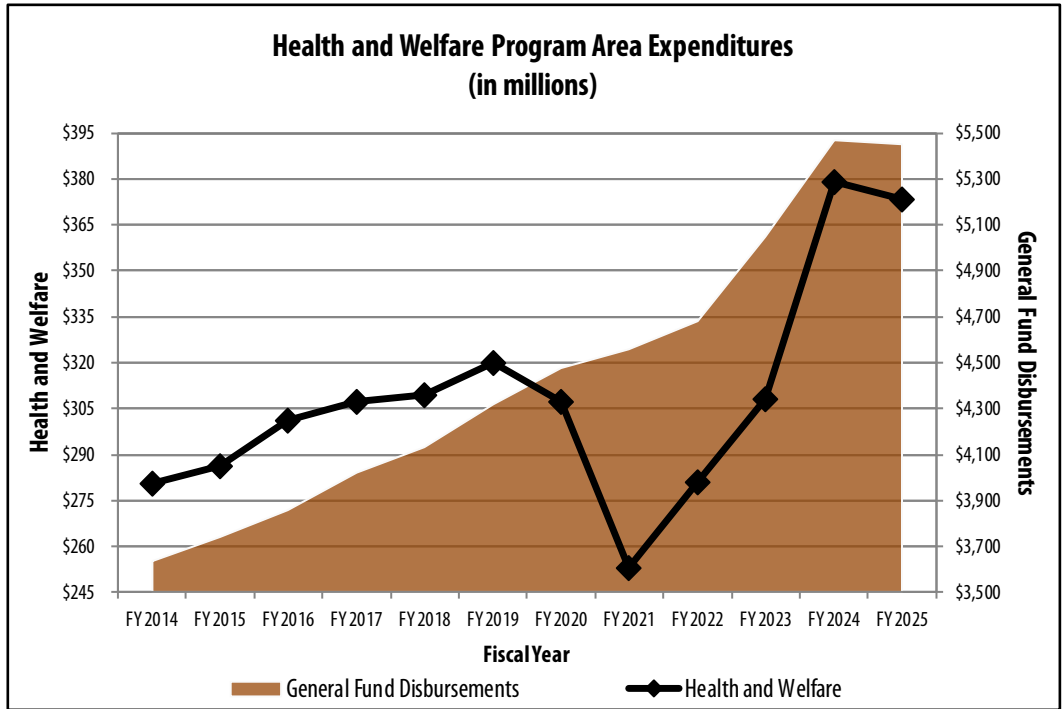
The [FY 2025 Adopted Budget Plan](#) continues funding in the Health Welfare program to develop and implement a community health preparedness and resiliency program; advance equity, access and functional needs in emergency planning and response; develop an environmental preparedness program, including work on climate change's impacts on human health; work with healthcare facilities to advance readiness for future public health emergencies; and address wide-ranging lessons learned from the COVID-19 pandemic that will require long-term solutions.

Trends in Expenditures and Positions

The following charts illustrate funding and position trends for the agencies in this program area compared to countywide expenditure and position trends. There was a significant decrease in expenditures in FY 2021 due to the COVID-19 pandemic. This was from a combination of utilizing the Coronavirus Aid, Relief, and Economic Security (CARES) Act Coronavirus Relief Fund (CRF) for positions in the Health Department that were redeployed to assist with response activities as well as a decrease in expenses across the Health and Human Services system due to a decrease in demand for services (e.g., FASTRAN, School Age Child Care, Children's Services Act) as a result of the COVID-19 pandemic. In addition, the transfer of school readiness activities from the Department of Neighborhood and Community Services to Fund 40045, Early Childhood Birth to 5, as well as the transfer of the Office to Prevent and End Homelessness to the Department of Housing and Community Development in the Community Development program area contributed to the decrease in expenditures.

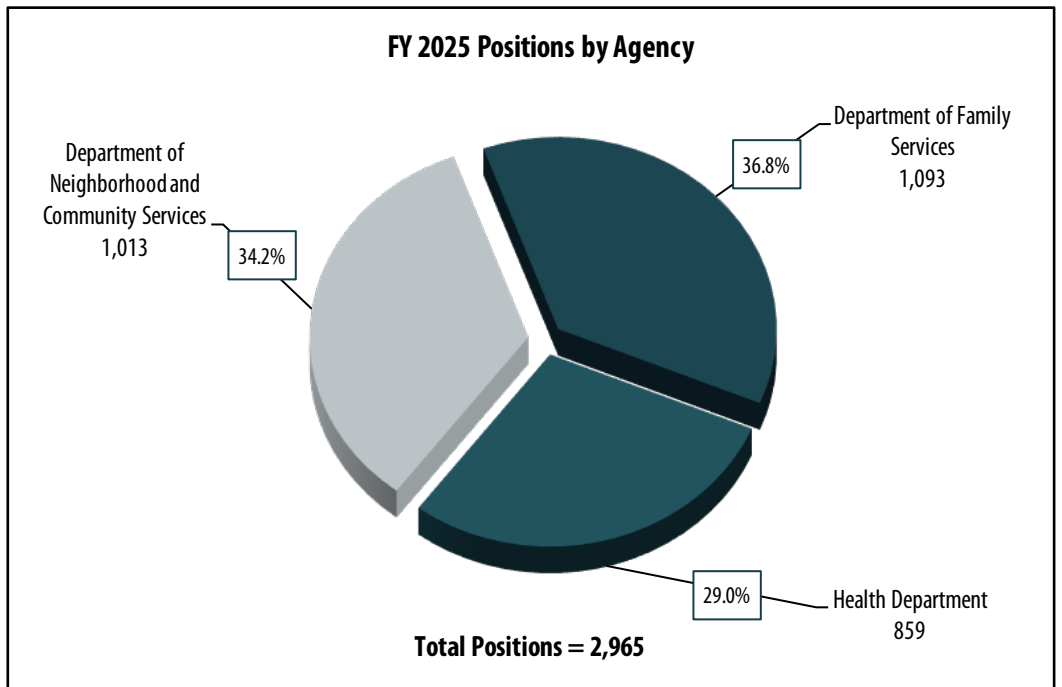
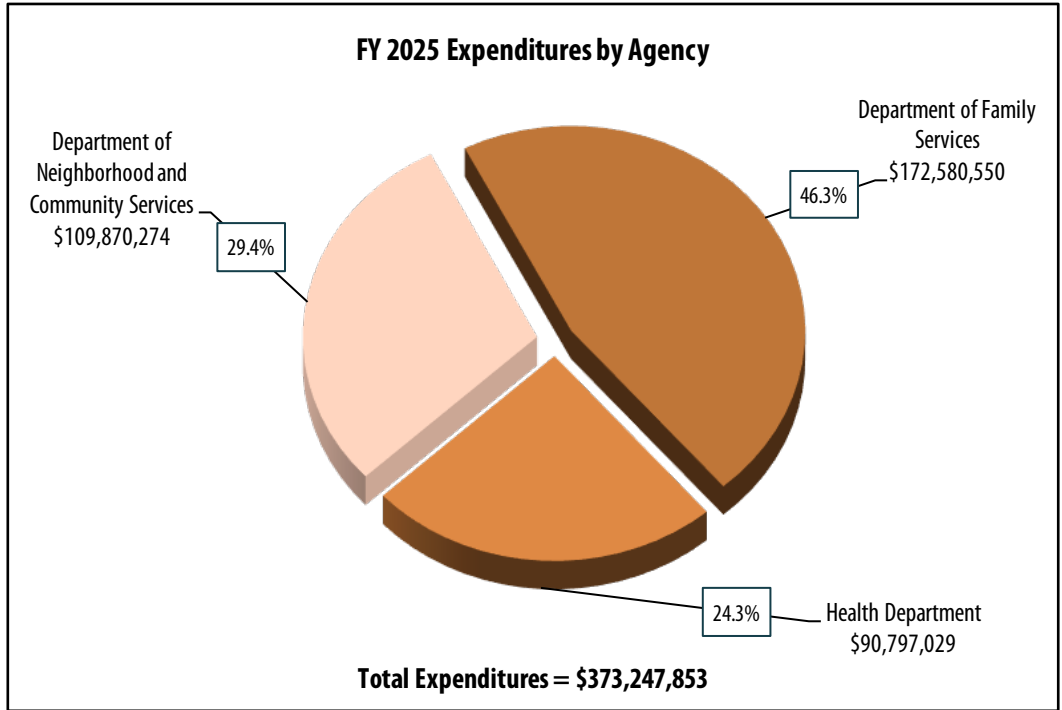
Expenditures in FY 2022 were still below pre-pandemic levels due to the continued use of CARES Coronavirus Relief Funding and the America Rescue Plan Act (ARPA), Coronavirus State and Local Fiscal Recovery Funds (CSLFRF) as well as the continued decrease in demand for services. Demands for services returned to pre-pandemic levels in FY 2023, contributing to an expenditure increase. The increase in FY 2024 expenditures is primarily from employee compensation and contract rate increases supporting providers of mandated and non-mandated services. There is a slight decrease in expenditures due to targeted reductions in all County agencies for FY 2025, which included both position and programming reductions. This expenditure decrease due to reductions will be partially offset by both the expiration of some COVID-19 era grant funding and the expansion of programming targeting vulnerable populations.

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Expenditures and Positions by Agency



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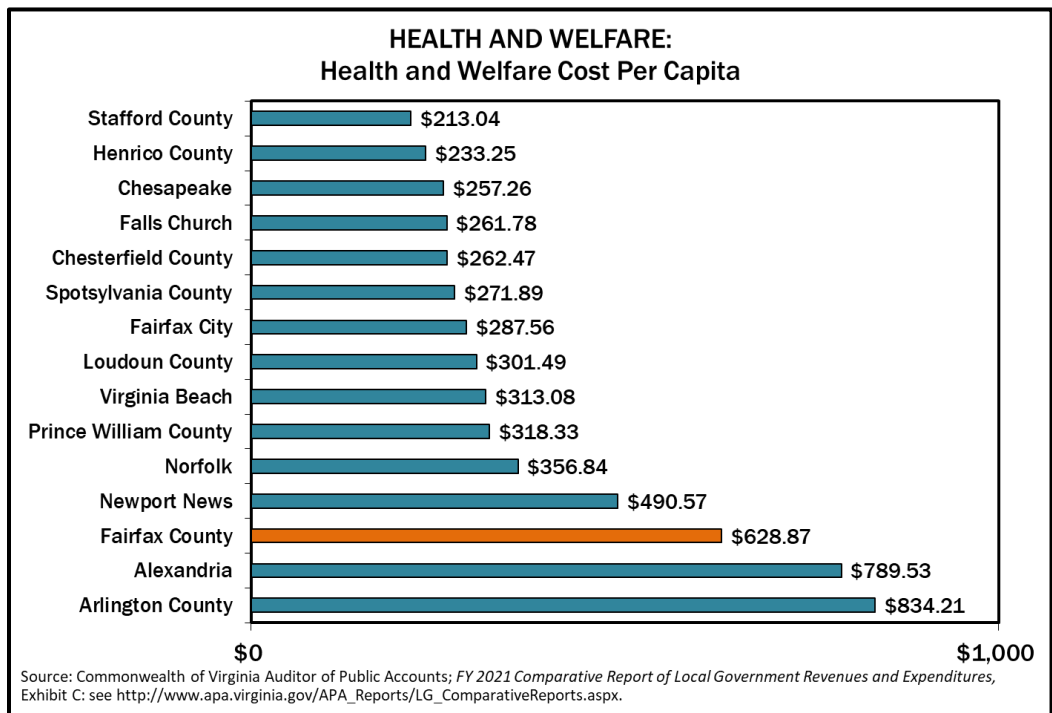
Benchmarking

Comparative performance information for the Health and Welfare program area comes from a variety of sources. This is one of the richer program areas for benchmarking due to the wide variety of programs and statistics that are collected. Data included for this program area was obtained from several sources, including the Commonwealth of Virginia’s Auditor of Public Accounts (APA), the U.S. Census Bureau, and the Virginia Department of Health.

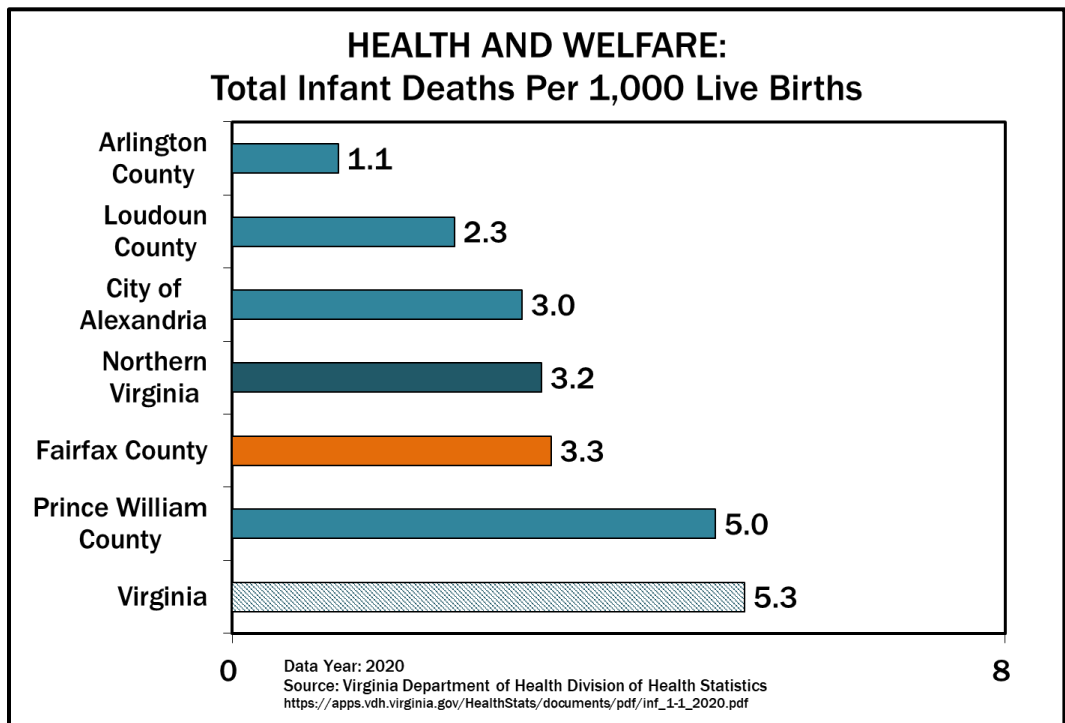
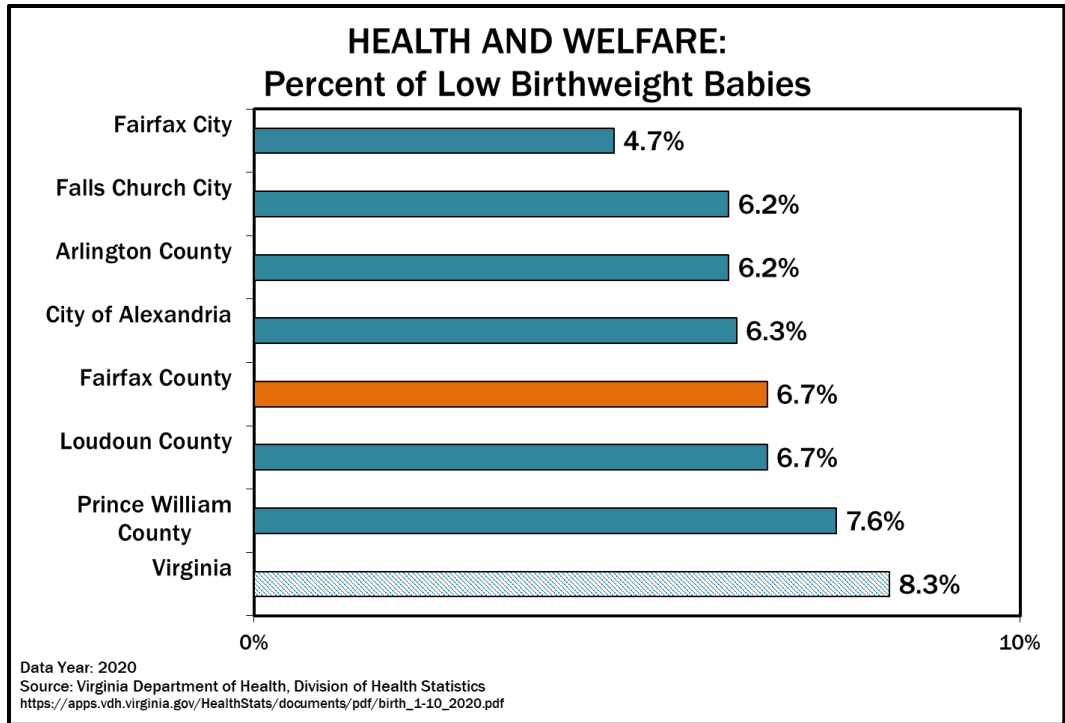
The APA collects financial data annually from all Virginia jurisdictions. FY 2021 data represents the latest data available. As seen below, Fairfax County’s cost per capita for Health and Welfare indicates the high level of local support for these programs and reflects the County’s increasing urbanization that brings its own challenges in terms of human service needs.

The U.S. Census Bureau American Community Survey (ACS) is an ongoing survey that provides vital information about the United States and its people on an annual basis. ACS data helps inform decision-making for federal, state, and local government and helps determine the distribution of a range of funds provided by the federal and state government. The ACS is a good source for benchmark data since all the survey responses come from the same data set, which eliminates the need to reconcile different methodologies used by different jurisdictions. The data presented here is drawn from the 2017-2021 Five-Year Estimate, which draws on multiple surveys to develop a more accurate result than a single data year.

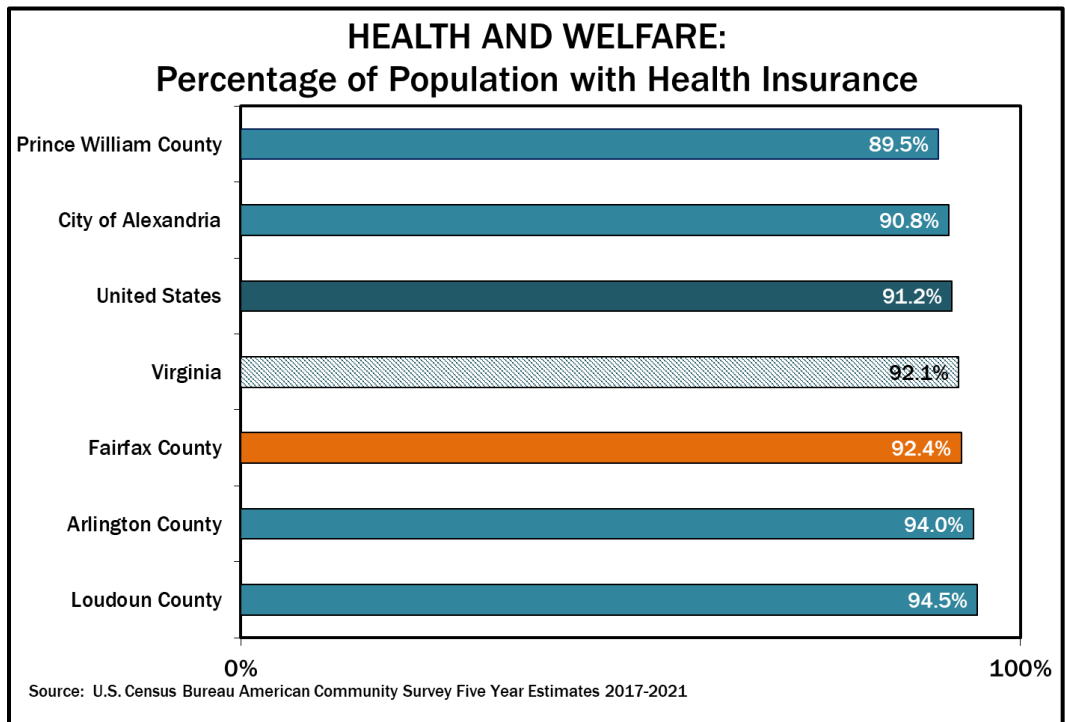
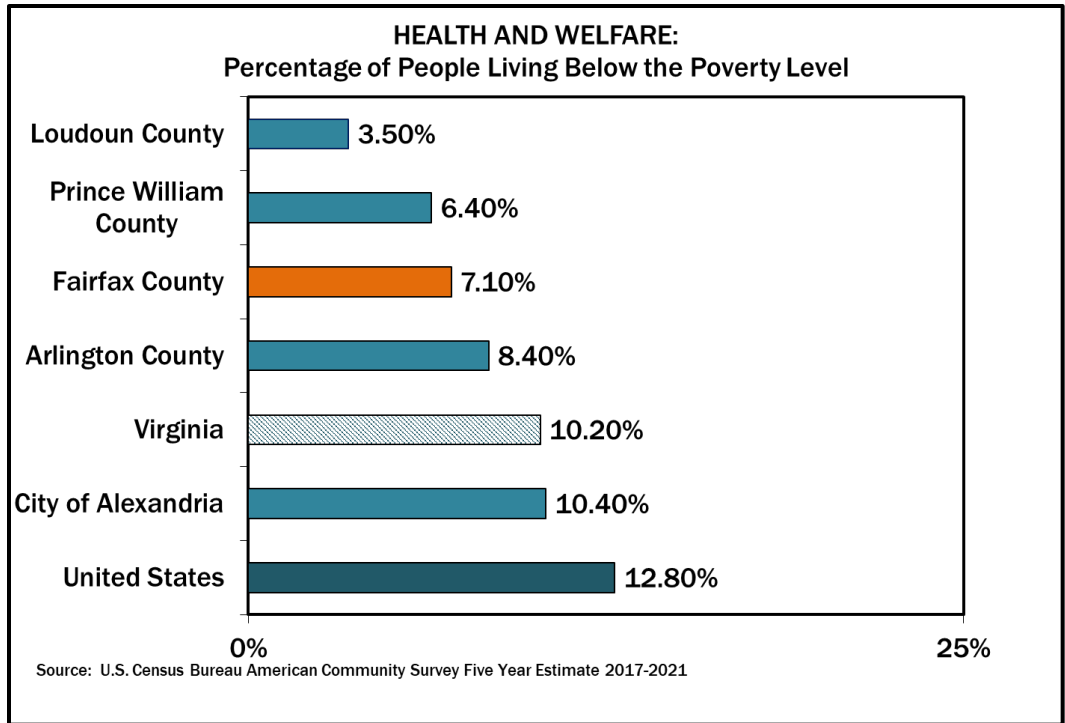
Data provided by the Virginia Department of Health (VDH) and Virginia Department of Social Services (VDSS) is included to show how Fairfax County compares to other jurisdictions in the region and, where available, the regional average, the statewide average, and the national average. Current data is no longer available from several sources, including the U.S. Centers for Disease Control and Prevention, which was used for previous presentations of Health and Welfare benchmark measures. In most cases, similar data from comparable sources like the VDH Division of Health Statistics are included. Additionally, in an effort to identify additional benchmark data, indicators related to poverty rates, access to health insurance, and food insecurity are included. The most recent available data is presented.



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