

DEPARTMENT BUDGET SUMMARY

MISSION STATEMENT: To maintain a healthy, stable, and safe community by focusing on prevention and promoting independence and self-sufficiency.

The Department of Human Services (DHS) monitors and assesses human needs in the County, facilitates services by the private sector, and provides services directly when appropriate. DHS serves as a problem identifier and catalyst for community action, working toward greater community collaboration.

FY 2006 PRIORITIES: The FY 2006 priorities of the Department of Human Services are:

- ❖ To implement the results of a supportive housing planning effort, including the first year of a five-year Supportive Housing Plan targeted to produce 375 to 425 supportive housing units over the five years, funded with a combination of Section 8, Housing Grants, Local Public Assistance Cost Allocation Plan (LPACAP), and other federal and state resources.
- ❖ To complete the renovation of the George Mason Center to serve as the home for the Arlington Community Action Program (ACAP) and its Head Start Program.
- ❖ To continue a Non-Profit Initiative that involves follow-up of the results of a survey of needs and stresses, one-time capacity building grants, an information technology enhancement effort, and improved budget planning processes for non-profit human services agencies serving Arlington County.
- ❖ To enhance revenues through maximizing reimbursements.

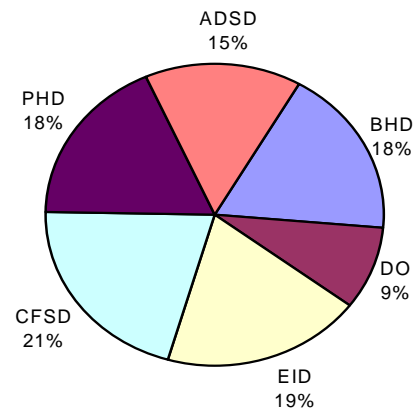
PRINCIPAL PROGRAMS: The programs of the Department of Human Services are organized into the following organizational units, all of which are linked with state agencies that provide oversight, funding, and various mandates:

- ❖ Economic Independence Division (EID)
- ❖ Child and Family Services Division (CFSD)
- ❖ Public Health Division (PHD)
- ❖ Aging and Disability Services Division (ADSD)
- ❖ Behavioral Healthcare Division (BHD)
- ❖ Director's Office (DO)

In addition to the General Fund programs, DHS also operates the federal Section 8 Housing Program found in the Enterprise, Special Revenue and Internal Service Funds section (**Section N**) of the budget. This is a \$14.1 million program with 17.4 FTEs.

SIGNIFICANT BUDGET CHANGES: The FY 2006 proposed expenditure budget for the Department of Human Services is \$91,731,117, an increase of less than 1% over the FY 2005 adopted budget. Net tax support is proposed to increase by \$534,499, a one percent increase over FY 2005.

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Distribution of Budget**



The FY 2006 proposed staffing level is 693.1 FTEs, a net decrease of 4.6 FTEs from the FY 2005 adopted budget. The following summarizes the FTE changes:

- (1.0) Title IV-E reduction
- (3.0) FTEs transferred to Dept. of Technology Services
- (1.3) Other grant reductions
- 0.5 Case Manager for new school graduates with mental retardation/developmental disabilities
- 0.2 New grant funded FTE for case management in the Agency on Aging
- (4.6) Net change

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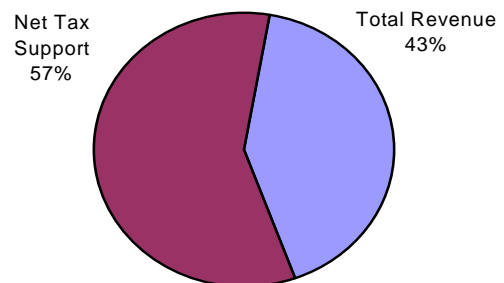
The proposed expenditure budget includes the following significant changes:

- ↓ Elimination of one-time FY 2005 LPACAP funding, partially offset by FY 2006 increases in ongoing funds (\$739,338).
- ↑ Increased funding for a variety of nonprofit organizations to support salary and essential operating expense increases, and maintain critical services (\$257,166).
- ↑ Additional costs for rent at 3033 Wilson Boulevard (\$75,418) and malpractice insurance for physicians and other health care staff (\$101,600).
- ↑ Increased funding for vocational and transportation services for a net of nine new school graduates with mental retardation/developmental disabilities and associated case management services (\$299,293 and 0.5 FTE).
- ↑ Increased contract costs for mental retardation/mental health vocational/transportation, other transportation, and meal service contracts (\$87,885).
- ↓ Decreases in Title IV-E funded shelter expenses (\$73,800), Healthy Families (\$92,692), administrative position (\$64,323) and other administrative charges (\$26,079).
- ↓ Decrease in Prescription Medication Program (PMP) as new federal Medicare prescription medication benefits phase in (\$147,000).
- ↓ Transfer of three desktop support positions to the Department of Technology Services to centralize and increase efficiency of technology support (\$135,950).
- ↓ Decreases in grant-funded TB nurse (\$49,974, 0.8 FTE) and Teens Against Tobacco (TATU) grant (\$66,303, 0.5 FTE).
- ↓ Decrease of \$79,226 in phone charges due to the new phone billing system.
- ↑ Increase to continue Parent Infant Education (PIE) Parent-to-Parent program with local funds (\$17,000), due to state reallocation of PIE funding previously used for program.
- ↑ Continuation of seven FY 2005 supplemental appropriations continuing in FY 2006 (\$405,592, 0.2 FTE).
- ↓ Reductions in the General Relief (\$94,016) and foster care/adoption programs (\$485,000) based on caseload and cost projections.

Revenues in FY 2006 represent approximately 43% of the Department's budget. Projections do not include supplemental state allocations that are routinely received, but at unpredictable levels. Other changes represent a wide variety of fluctuations in multiple sources of state and federal funding. Specific changes include the following:

- ↓ Decrease of \$515,314 of federal Title IV-E funding, due to the federal change in eligibility definitions.
- ↓ Decrease of \$110,249 for miscellaneous grant losses, along with commensurate decreases in expenditures.
- ↓ Decrease of \$540,609 in Public Assistance/Purchase of Service programs as a result of caseload and cost projections.
- ↓ Elimination of \$1,100,000 in FY 2005 one-time LPACAP funding, partially offset by an increase of \$739,338 in ongoing funding.
- ↑ Continuation of seven FY 2005 supplemental appropriations continuing in FY 2006 (\$405,592).
- ❖ Proposed Increase from \$69 to \$71 per day for the

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program fee for the Madison Adult Day Health Program.

- ❖ Proposed increase in the Food Establishment License Application Processing Fee from \$60 to \$65.
- ❖ Proposed modifications in a variety of fees relating to regulation of water recreation facilities to recover full costs of the related regulatory activities.

DEPARTMENT FINANCIAL SUMMARY				
	FY 2004	FY 2005	FY 2006	% Change
	<u>Actual</u>	<u>Adopted</u>	<u>Proposed</u>	<u>'05 to '06</u>
Personnel	\$45,166,373	\$45,581,338	\$46,385,900	2%
Public Assistance/Purchase of Services	15,127,873	15,121,178	14,525,882	-4%
Other Non-Personnel	29,177,997	31,022,079	31,312,419	1%
Subtotal	89,472,243	91,724,595	92,224,201	1%
Inter-Dept Credits	(251,910)	(475,677)	(493,084)	4%
Total Expenditures	89,220,333	91,248,918	91,731,117	1%
Fees	1,140,833	1,141,876	1,164,505	2%
State Share	22,121,662	23,710,711	23,901,507	1%
Federal Grants	3,412,470	3,467,124	3,451,159	-
Public Assistance/Purchase of Services	8,561,601	8,644,784	8,164,978	-6%
Medicaid/Medicare	232,697	468,703	302,035	-36%
Medicaid State Plan Option/Waiver	1,220,093	696,498	1,011,953	45%
Other Grants	2,875,983	1,365,890	1,491,649	9%
Miscellaneous	75,427	77,500	33,000	-57%
Total Revenues	39,640,766	39,573,086	39,520,786	-
Net Tax Support	\$49,579,567	\$51,675,832	\$52,210,331	1%
Authorized FTEs	713.7	697.7	693.1	
Funded FTEs	713.7	697.7	693.1	

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PERFORMANCE MEASURES:

	FY 2002 <u>Actual</u>	FY 2003 <u>Actual</u>	FY 2004 <u>Actual</u>	FY 2005 <u>Estimate</u>	FY 2006 <u>Estimate</u>	FY 2006 <u>Goal</u>
<i>Mission Outcome Measures</i>						
Percentage of children in Arlington adequately immunized by 24 months of age	75%	67%	73%	74%	75%	75%
Percentage of clients completing treatment for tuberculosis	91%	98%	97%	98%	98%	98%
Percentage of founded adult protective services cases accepting services	63%	65%	40%	60%	60%	60%
Percentage of families where there was no recurrence of child abuse/neglect within one year of treatment	N/A	79%	84%	86%	94%	94%
Section 8 lease-up rate	84%	100%	95%	96%	98%	98%

- ❖ Immunization rate from Kindergarten Retrospective Study.
- ❖ Some clients do not complete treatment for TB because they leave Arlington with no forwarding address or refuse treatment. Completion of treatment is recommended but not required if they do not present an imminent health threat to the community.
- ❖ In accordance with Virginia Department of Social Services policy, adults deemed competent may choose to reject the service plan developed for them.
- ❖ There are no state or federal standards to measure the level of success in the prevention of child abuse and neglect incidents or recidivism. A 100 percent achievement would be ideal; however, considering the complexity of these cases, the goal shown is realistic.