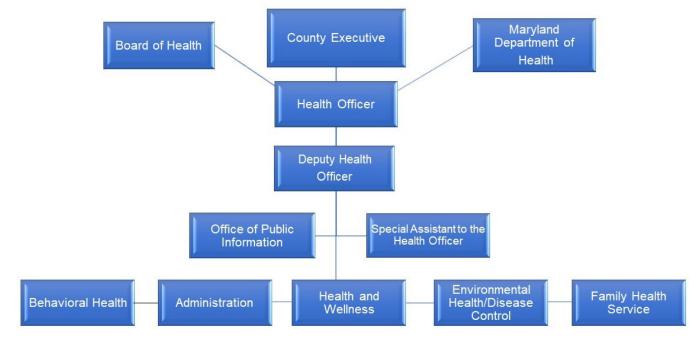
Health Department



MISSION AND SERVICES

The Health Department protects the public's health; assures availability of and access to quality health care services; and promotes individual and community responsibility for the prevention of disease, injury and disability.

CORE SERVICES

- Health service resources for families and individuals in need
- Chronic disease interventions and education
- Disease prevention
- Environmental safety

FY 2020 KEY ACCOMPLISHMENTS

- Increased reimbursement for services provided by the Health Department clinics through the implementation of a revised revenue cycle process which improved the charge capture, increased cash collections, reduced denials of service claims and achieved greater compliance of State billing and Accounts Receivable rules and regulations.
- Expansion of dental services to uninsured adults and initiation of travel immunizations.
- Assisted 5,173 customers in the first quarter of FY 2020 of which 2,919 customers were assisted with the renewal
 of their Medicaid application, 2,108 applications were process as Medicaid children, 408 applications were
 processed as Medicaid adults and 124 applications were processed for Pregnant and Postpartum women.
- Ensured that a variety of services are accessible for returning citizens in jails, clinics and community locations serving over 1,300 individuals in reentry to the community from incarceration.

Visited 104 families with children who had elevated blood lead levels and/or asthma, identified potential lead
poisoning and asthma triggers, and the families received durable goods to eliminate these triggers.

STRATEGIC FOCUS AND INITIATIVES FOR FY 2021

The agency's top priorities in FY 2021 are:

- Ensure access to healthcare resources, particularly to un- and underserved County populations.
- Prevent and reduce chronic disease, with an emphasis on addressing obesity in the County.
- Continue to improve maternal and infant outcomes to help decrease infant mortality.
- Prevent sexually transmitted diseases.
- Promote safe food services facilities.
- Ensure access to mental health and substance abuse treatment.

FY 2021 BUDGET SUMMARY

The FY 2021 approved budget for the Health Department is \$99,269,400, an increase of \$5,796,900 or 6.2% over the FY 2020 approved budget.

Expenditures by Fund Type

	FY 2019 Act	ual	FY 2020 Bud	lget	FY 2020 Estin	mate	FY 2021 Appr	oved
Fund Types	Amount	% Total	Amount	% Total	Amount	% Total	Amount	% Total
General Fund	\$24,294,187	39.5%	\$26,366,900	28.2%	\$25,446,700	28.9%	\$28,798,300	29.0%
Grant Funds	37,159,145	60.5%	67,105,600	71.8%	62,708,600	71.1%	70,471,100	71.0%
Total	\$61,453,332	100.0%	\$93,472,500	100.0%	\$88,155,300	100.0%	\$99,269,400	100.0%

GENERAL FUND

The FY 2021 approved General Fund budget for the Health Department is \$28,798,300, an increase of \$2,431,400 or 9.2% over the FY 2020 approved budget.

Reconciliation from Prior Year

	Expenditures
FY 2020 Approved Budget	\$26,366,900
Increase Cost: Operating - Technology Cost Allocation — Increase in charges based on the new methodology to support anticipated countywide costs	\$1,627,400
Add: Initiatives - New - Operating — Electronic Health Record system	703,500
Increase Cost: Fringe Benefits — Increase in fringe benefit rate from 34.8% to 35.7% and as a result of the adjustment to compensation	175,600
Add: Initiatives - New - Operating — Early Childhood Consultant for the Child-Friendly County Campaign	125,000
Increase Cost: Compensation - Mandated Salary Requirements	89,700

Reconciliation from Prior Year (continued)

	Expenditures
Decrease Cost: Recovery Increase — Reflects operating recovery increase from various grants	(93,600)
Decrease Cost: Operating — Decrease in operating contracts, utilities, printing, membership fees, equipment lease and vehicle maintenance expense	(196,200)
FY 2021 Approved Budget	\$28,798,300

GRANT FUNDS

The FY 2021 approved grant budget for the Health Department is \$70,741,100, an increase of \$363,500 or 5.4% over the FY 2020 approved budget. Major sources of funds in the FY 2021 approved budget include:

- CDC HIV Funds
- HIV Expansion Funds
- General Medical Assistance Transportation
- Innovative State and Local Pubic Health Strategies To Prevent and Manage Diabetes, Heart Disease and Stroke
- Project Safety Net (GOCCP)
- Mental Health Services Grant
- Administrative LBHA
- Federal Block Grant

Reconciliation from Prior Year

	Expenditures
FY 2020 Approved Budget	\$67,105,600
Add: New Grant — Adolescent Clubhouse Expansion, Ending the HIV Epidemic, Promoting Positive Outcomes for Infants and Toddlers, HIV Program, Population Health, Oral Health Expansion, ACL Senior, Cancer Program, Telemental Health, Performance Incentive Grant, Bay Restoration, Medical Resource Officers and Testing In Behavioral Health	\$11,158,800
Enhance: Existing Program/Service — CDC HIV Funds, School Based Wellness Center, Community Mental Health Block Grant, Diabetes Prevention, Administrative LBHA, WIC, Childhood Lead Poisoning Prevention and General Medical Assistance Transportation	6,872,100
Reduce: Existing Program/Service — SAMSHA, Ryan White Part B, Smart Reentry, AIDS Case Management, Offender Reentry, General Services Grant, MCHP Eligibility, Community Mental Health Services Grant, Federal Services Grant, Dental Sealant, Healthy Teens Young Adults, STD Caseworker and CareFirst BlueCross BlueShield	(8,096,500)
Eliminate: Program/Service — US Dept of the Treasury, Offender Reentry, Recovery Support Services, HRSA, Integration of Sexual Health in Recovery, UASI-MDERS and Zika Nurse Project	(6,298,900)
FY 2021 Approved Budget	\$70,741,100

STAFF AND BUDGET RESOURCES

Authorized Positions	FY 2019 Budget	FY 2020 Budget	FY 2021 Approved	Change FY20-FY21
General Fund				
Full Time - Civilian	214	217	217	0
Full Time - Sworn	0	0	0	0
Subtotal - FT	214	217	217	0
Part Time	1	1	1	0
Limited Term	0	0	0	0
Grant Program Funds				
Full Time - Civilian	185	183	183	0
Full Time - Sworn	0	0	0	0
Subtotal - FT	185	183	183	0
Part Time	3	8	8	0
Limited Term	109	115	123	8
TOTAL				
Full Time - Civilian	399	400	400	0
Full Time - Sworn	0	0	0	0
Subtotal - FT	399	400	400	0
Part Time	4	9	9	0
Limited Term	109	115	123	0

	FY 2021				
Positions By Classification	Full Time	Part Time	Limited Term		
Account Clerk	5	0	0		
Accountant	6	0	0		
Administrative Aide	30	0	4		
Administrative Assistant	10	4	2		
Administrative Specialist	6	0	0		
Associate Director	4	0	0		
Auditor	2	0	0		
Budget Aide	1	0	0		
Budget Management Analyst	8	0	0		
Budget Management Manager	1	0	0		
Building Engineer	1	0	0		
Building Security Officer	4	0	0		
Citizen Services Specialist	2	0	0		
Community Developer	41	0	24		
Community Development Aide	0	0	2		
Community Development Assistant	30	2	31		
Community Health Nurse	59	2	3		
Community Services Manager	2	0	0		
Counselor	35	0	25		

		FY 2021	
	Full	Part	Limited
Positions By Classification	Time	Time	Term
Data Entry Operator	1	0	0
Dental Hygienist	1	0	0
Dentist	1	0	0
Deputy Health Officer	2	0	0
Disease Control Specialist	22	0	5
Environmental Health Specialist	28	0	0
Environmental Sanitarian	8	0	0
Equipment Operator	0	0	3
Facilities Superintendent	2	0	0
General Clerk	10	1	6
Health Aide	4	0	5
Health Officer	1	0	0
Health Record Technician	1	0	0
Laboratory Assistant	2	0	0
Licensed Practical Nurse	7	0	5
Mail Services Operator	2	0	0
Maintenance Services Attendant	1	0	0
Nurse Practitioner	4	0	4
Nutritionist	1	0	1
Permits Specialist	1	0	0
Personnel Aide	1	0	0
Personnel Analyst	5	0	0
Personnel Manager	1	0	0
Physician Program Manager	1	0	0
Physician Assistant	2	0	0
Physician Clinical Specialist	3	0	0
Physician Clinical Staff	1	0	0
Physician Supervisor	2	0	0
Planner	2	0	1
Police Officer Supervisor	1	0	0
Program Manager Senior	1	0	0
Procurement Officer	1	0	0
Programmer-Systems Analyst	3	0	0
Public Health Lab Scientist	2	0	0
Public Health Program Chief	12	0	0
Public Information Officer	1	0	0
Public Safety Aide	4	0	0
Quality Assurance Analyst	1	0	0
Radiology Technician	2	0	0
Service Aide	0	0	2
Social Worker	6	0	0
Supervisory Clerk	1	0	0
Supply Property Clerk	1	0	0
TOTAL	400	9	123
	-00	5	120

	FY 2019	FY 2020	20 FY 2020 FY 2021 Cha		Change FY2	20-FY21
Category	Actual	Budget	Estimate	Approved	Amount (\$)	Percent (%)
Compensation	\$14,838,395	\$15,944,500	\$15,388,000	\$16,034,200	\$89,700	0.6%
Fringe Benefits	5,093,575	5,548,700	5,355,100	5,724,300	175,600	3.2%
Operating	6,461,338	7,260,200	6,920,900	9,519,900	2,259,700	31.1%
Capital Outlay	25,985			—	—	
SubTotal	\$26,419,294	\$28,753,400	\$27,664,000	\$31,278,400	\$2,525,000	8.8%
Recoveries	(2,125,106)	(2,386,500)	(2,217,300)	(2,480,100)	(93,600)	3.9%
Total	\$24,294,187	\$26,366,900	\$25,446,700	\$28,798,300	\$2,431,400	9.2 %

Expenditures by Category - General Fund

In FY 2021, compensation expenditures increase 0.6% over the FY 2020 budget due to increased attrition and vacancy lapse. Compensation costs include funding for 217 full time positions and one part time position. Fringe benefit expenditures increase 3.2% over the FY 2020 budget due to anticipated fringe requirements.

Operating expenses increase 31.1% over the FY 2020 budget due to the implementation of the Electronic Health Record system, the Early Childhood consulting fee for the Child-Friendly County Campaign and an increase in the technology allocation charge.

Recoveries increase 3.9% over the FY 2020 budget due to an increase in recoverable operating expenditures from various grants.

Expenditures by Division - General Fund

	FY 2019	FY 2020	FY 2020	FY 2021 —	Change FY2	20-FY21
Category	Actual	Budget	Estimate	Approved	Amount (\$)	Percent (%)
Administration	\$5,445,374	\$5,399,000	\$5,011,300	\$8,379,200	\$2,980,200	55.2%
Family Health Services	5,529,536	7,375,100	7,117,600	6,635,500	(739,600)	-10.0%
Behavioral Health	2,474,111	2,677,700	2,659,800	3,026,700	349,000	13.0%
Environmental Health - Disease Control	4,590,470	4,955,300	4,740,700	5,052,700	97,400	2.0%
Health and Wellness	1,818,950	1,556,700	1,397,200	1,457,000	(99,700)	-6.4%
Office of the Health Officer	4,435,747	4,403,100	4,520,100	4,247,200	(155,900)	-3.5%
Total	\$24,294,187	\$26,366,900	\$25,446,700	\$28,798,300	\$2,431,400	9.2 %

General Fund - Division Summary

	FY 2019	FY 2020	FY 2020	FY 2021 —	Change FY2	20-FY21
Category	Actual	Budget	Estimate	Approved	Amount (\$)	Percent (%)
Administration						
Compensation	\$2,887,348	\$2,599,000	\$2,508,300	\$3,006,000	\$407,000	15.7%
Fringe Benefits	1,159,336	1,098,600	1,060,300	1,073,200	(25,400)	-2.3%
Operating	3,315,316	3,723,500	3,471,500	6,510,000	2,786,500	74.8%
Capital Outlay	25,985	_		—		
SubTotal	\$7,387,985	\$7,421,100	\$7,040,100	\$10,589,200	\$3,168,100	42.7%
Recoveries	(1,942,611)	(2,022,100)	(2,028,800)	(2,210,000)	(187,900)	9.3%
Total Administration	\$5,445,374	\$5,399,000	\$5,011,300	\$8,379,200	\$2,980,200	55.2%
Family Health Services						
Compensation	\$3,806,159	\$4,926,900	\$4,754,900	\$4,391,400	\$(535,500)	-10.9%
Fringe Benefits	1,360,042	1,858,800	1,793,900	1,567,700	(291,100)	-15.7%
Operating	363,334	589,400	568,800	676,400	87,000	14.8%
Capital Outlay	_	_		_		
SubTotal	\$5,529,536	\$7,375,100	\$7,117,600	\$6,635,500	\$(739,600)	-10.0%
Recoveries		_	_	_	_	
Total Family Health Services	\$5,529,536	\$7,375,100	\$7,117,600	\$6,635,500	\$(739,600)	-10.0%
Behavioral Health						
Compensation	\$1,575,982	\$1,753,900	\$1,692,700	\$1,816,100	\$62,200	3.5%
Fringe Benefits	547,259	427,200	412,300	648,400	221,200	51.8%
Operating	374,096	574,900	554,800	581,500	6,600	1.1%
Capital Outlay	—	—		—		
SubTotal	\$2,497,338	\$2,756,000	\$2,659,800	\$3,046,000	\$290,000	10.5%
Recoveries	(23,227)	(78,300)		(19,300)	59,000	-75.4%
Total Behavioral Health	\$2,474,111	\$2,677,700	\$2,659,800	\$3,026,700	\$349,000	13.0%
Environmental Health - Disease	Control					
Compensation	\$3,274,987	\$3,810,700	\$3,677,700	\$3,785,800	\$(24,900)	-0.7%
Fringe Benefits	995,309	1,226,300	1,183,500	1,351,500	125,200	10.2%
Operating	479,442	113,600	68,000	75,400	(38,200)	-33.6%
Capital Outlay	_	_	_		_	
SubTotal	\$4,749,738	\$5,150,600	\$4,929,200	\$5,212,700	\$62,100	1.2%
Recoveries	(159,268)	(195,300)	(188,500)	(160,000)	35,300	-18.1%
Total Environmental Health - Disease Control	\$4,590,470	\$4,955,300	\$4,740,700	\$5,052,700	\$97,400	2.0%

General Fund - Division Summary (continued)

	FY 2019	FY 2020	FY 2020	FY 2021 —	Change FY2	20-FY21
Category	Actual	Budget	Estimate	Approved	Amount (\$)	Percent (%)
Health and Wellness						
Compensation	\$1,125,043	\$1,020,400	\$984,800	\$998,800	\$(21,600)	-2.1%
Fringe Benefits	431,444	427,300	412,400	373,700	(53,600)	-12.5%
Operating	262,462	109,000	_	84,500	(24,500)	-22.5%
Capital Outlay		_	_	_	_	
SubTotal	\$1,818,950	\$1,556,700	\$1,397,200	\$1,457,000	\$(99,700)	- 6.4 %
Recoveries	_	_	_	_	_	
Total Health and Wellness	\$1,818,950	\$1,556,700	\$1,397,200	\$1,457,000	\$(99,700)	-6.4%
Office of the Health Officer						
Compensation	\$2,168,875	\$1,833,600	\$1,769,600	\$2,036,100	\$202,500	11.0%
Fringe Benefits	600,184	510,500	492,700	709,800	199,300	39.0%
Operating	1,666,687	2,149,800	2,257,800	1,592,100	(557,700)	-25.9%
Capital Outlay	_	_	_	_	_	
SubTotal	\$4,435,747	\$4,493,900	\$4,520,100	\$4,338,000	\$(155,900)	-3.5%
Recoveries	—	(90,800)		(90,800)	_	0.0%
Total Office of the Health Officer	\$4,435,747	\$4,403,100	\$4,520,100	\$4,247,200	\$(155 <i>,</i> 900)	-3.5%
Total	\$24,294,187	\$26,366,900	\$25,446,700	\$28,798,300	\$2,431,400	9.2 %

DIVISION OVERVIEW

Administration

The Division of Administration provides the administrative support structure for the department's public health programs. This unit provides support to the General Fund and grant programs through centralized fiscal (budget, accounts payable, collections and purchase card), personnel, procurement, contractual, facility maintenance, security, vital records and general services. A Health Insurance Portability and Accountability Act (HIPAA) compliance component was established in July 2010 to serve as the departmental liaison for the coordination of privacy compliance for medical records.

Fiscal Summary

In FY 2021, the division expenditures increase \$2,980,200 or 55.2% over the FY 2020 budget. Staffing resources increase by two from the FY 2020 budget. The primary budget changes include:

- A increase in personnel costs due to the transfer of two staff from the Family Services Division.
- An increase in operating costs due to technology cost allocation charges, the implementation of the Electronic Health Record system and the consolidation of divisional operating contracts to the Administration division.

	FY 2020	FY 2021	Change F	Y20-FY21
	Budget	Approved	Amount (\$)	Percent (%)
Total Budget	\$5,399,000	\$8,379,200	\$2,980,200	55.2%
STAFFING				
Full Time - Civilian	45	47	2	4.4%
Full Time - Sworn	0	0	0	0.0%
Subtotal - FT	45	47	2	4.4%
Part Time	0	0	0	0.0%
Limited Term	0	0	0	0.0%

Family Health Services

The Family Health Services Division offers clinical and preventive health services to women, children and their families both in public health clinics and in their homes. Women's services include prenatal and postnatal care, dental care for pregnant women, family planning, pregnancy testing and health and nutritional education. Children receive immunizations, developmental assessments and referrals to medical specialty care for handicapping conditions. The division assists pregnant women and children in receiving comprehensive health care services through the Maryland Children's Health Program by providing on-site eligibility determination, managed care education and provider selection.

Fiscal Summary

In FY 2021, the division expenditures decrease \$739,600 or 10.0% under the FY 2020 budget. Staffing resources decrease by two positions from the FY 2020 budget. The primary budget change includes:

- A decrease in personnel costs due to the transfer of two staff to Administration and increased anticipated attrition.
- An increase in operating expenses due to support the Child-Friendly Campaign.

	FY 2020 FY 2021		Change F	Y20-FY21
	Budget	Approved	Amount (\$)	Percent (%)
Total Budget	\$7,375,100	\$6,635,500	\$(739,600)	-10.0%
STAFFING				
Full Time - Civilian	56	54	(2)	-3.6%
Full Time - Sworn	0	0	0	0.0%
Subtotal - FT	56	54	(2)	- 3.6 %
Part Time	0	0	0	0.0%
Limited Term	0	0	0	0.0%

Behavioral Health

The Behavioral Health Division provides outpatient substance abuse treatment and prevention services for adults, adolescents and their families. Tobacco education and cessation services are also provided. The Addictions Treatment Grant provides outpatient treatment services and funds contracts with private vendors for residential treatment services which provide a continuum of services. These services include intensive inpatient services, transitional community living, longterm residential rehabilitation and outpatient services for Spanish speaking residents.

Fiscal Summary

In FY 2021, the division expenditures increase \$349,000 or 13.0% over the FY 2020 budget. Staffing resources

remain unchanged from the FY 2020 budget. The primary budget changes include:

• An increase in recoveries related to salary and fringe benefits adjustments.

	FY 2020	FY 2021	Change FY20-FY21			
	Budget	Approved	Amount (\$)	Percent (%)		
Total Budget	\$2,677,700	\$3,026,700	\$349,000	13.0 %		
STAFFING						
Full Time - Civilian	22	22	0	0.0%		
Full Time - Sworn	0	0	0	0.0%		
Subtotal - FT	22	22	0	0.0%		
Part Time	0	0	0	0.0%		
Limited Term	0	0	0	0.0%		

Environmental Health - Disease Control

The Environmental Health/Disease Control Division is responsible for the licensing and/or inspection of all food service facilities, public swimming pools and spas, private water supplies and sewage disposal systems, solid waste facilities and the review of plans for all new and proposed facilities.

The Food Protection Program performs inspections of all food service facilities and provides the environmental response to all food borne outbreak investigations. The Permits and Plan Review Program evaluates and approves plans for new or remodeled food service, recreational facilities and reviews and approves all permit applications for all food service and recreational facilities.

The Environmental Engineering Program permits on-site sewage disposal systems (including Innovative and Alternative systems and shared sewage disposal facilities) and individual water supplies as well as approves new subdivisions utilizing private or shared systems.

The division also provides clinical services and disease investigations to reduce the risk of communicable diseases. Immunizations, clinical services, prevention education, animal exposure management, outbreak investigations and communicable and vector-borne disease control. The Communicable Disease Surveillance Program maintains a database of reportable diseases, produces monthly statistics and analyzes disease trends. Surveillance activities produce disease information and statistics for public health and medical providers.

Fiscal Summary

In FY 2021, the division expenditures increase \$97,400 or 2.0% over the FY 2020 budget. Staffing resources remain unchanged from the FY 2020 budget. The primary budget changes include:

- An increase in fringe benefits to align with anticipated fringe requirements.
- A decrease in water treatment, industrial chemical contract, and extermination services.

	FY 2020	FY 2021	Change FY20-FY21			
	Budget	Approved	Amount (\$)	Percent (%)		
Total Budget	\$4,955,300	\$5,052,700	\$97,400	2.0 %		
STAFFING						
Full Time - Civilian	56	56	0	0.0%		
Full Time - Sworn	0	0	0	0.0%		
Subtotal - FT	56	56	0	0.0%		
Part Time	0	0	0	0.0%		
Limited Term	0	0	0	0.0%		

Health and Wellness

The Health and Wellness Division is responsible for chronic disease and access to care programs. Programs identify services available to assist the elderly and chronically ill, which allow them to remain in the community in the least restrictive environment while functioning at the highest possible level of independence. For eligible clients, medical assistance grants provide in-home services and transportation.

Fiscal Summary

In FY 2021, the division expenditures decrease \$99,700 or 6.4% under the FY 2020 budget. Staffing resources remain unchanged from the FY 2020 budget. The primary budget change includes:

• A decrease in personnel costs due to position reallocations and increased attrition.

- A decrease in fringe benefits to align with anticipated fringe requirements.
- A decrease in operating expenses in printing.

	FY 2020	FY 2021	Change FY20-FY21			
	Budget	Approved	Amount (\$)	Percent (%)		
Total Budget	\$1,556,700	\$1,457,000	(\$99,700)	- 6.4 %		
STAFFING						
Full Time - Civilian	15	15	0	0.0%		
Full Time - Sworn	0	0	0	0.0%		
Subtotal - FT	15	15	0	0.0%		
Part Time	0	0	0	0.0%		
Limited Term	0	0	0	0.0%		

Office of the Health Officer

The Office of the Health Officer directs the departments's public health programs and activities in conformance with applicable laws, regulations, policies, procedures and standards of the State of Maryland and the County. The Office of the Health Officer assures high standards of clinical care in the department and provides public health expertise and direction. The office also coordinates and facilitates federal, State and local resources and partnerships to improve health access to care for County uninsured and under-insured residents.

Planning staff conduct community needs assessments, write health status reports and develop local health plans in accordance with federal, State and regional initiatives. The staff also collect, analyze and interpret healthrelated statistical data to identify populations at risk, establish health priorities and facilitate grant applications to expand access to health care in order to improve the status of the health of all residents and to eliminate health disparities.

The visual communications staff design, produce and distribute health information materials for public education and review existing materials for the quality of content and cultural appropriateness. The Public Information Officer coordinates the agency's responses to all inquiries from the media, requests for information under the Maryland Public Information Act and

legislative activities. The Ryan White CARE Act Title I staff function as the administrative agent for the entire suburban Maryland area (five counties) and are responsible for awarding grant monies, processing contracts and monitoring services provided.

Fiscal Summary

In FY 2021, the division expenditures decrease \$155,900 or 3.5% under the FY 2020 budget. Staffing resources remain unchanged from the FY 2020 budget. The primary budget changes include:

 A decrease in operational costs due to the consolidation of operating contracts to Administration.

	FY 2020	FY 2021	Change F	Y20-FY21
	Budget Approved		Amount (\$)	Percent (%)
Total Budget	\$4,403,100	\$4,247,200	\$(155,900)	-3.5%
STAFFING				
Full Time - Civilian	23	23	0	0.0%
Full Time - Sworn	0	0	0	0.0%
Subtotal - FT	23	23	0	0.0%
Part Time	1	1	0	0.0%
Limited Term	0	0	0	0.0%

GRANT FUNDS SUMMARY

FY 2019	FY 2020	FY 2020	FY 2021	Change FY2	20-FY21
Actual	Budget	Estimate	Approved	Amount (\$)	Percent (%)
\$14,480,515	\$17,444,500	\$14,957,800	\$22,055,300	\$4,610,800	26.4%
3,712,171	4,354,900	3,739,500	5,513,800	1,158,900	26.6%
19,258,451	45,411,200	44,011,300	43,324,300	(2,086,900)	-4.6%
43,372		—	—	—	
\$37,494,509	\$67,210,600	\$62,708,600	\$70,893,400	\$3,682,800	5.5%
(335,364)					
\$37,159,145	\$67,210,600	\$62,708,600	\$70,893,400	\$3,682,800	5.5%
	\$14,480,515 3,712,171 19,258,451 43,372 \$37,494,509 (335,364)	Actual Budget \$14,480,515 \$17,444,500 3,712,171 4,354,900 19,258,451 45,411,200 43,372 \$37,494,509 \$67,210,600 (335,364)	ActualBudgetEstimate\$14,480,515\$17,444,500\$14,957,8003,712,1714,354,9003,739,50019,258,45145,411,20044,011,30043,372\$37,494,509\$67,210,600\$62,708,600(335,364)	ActualBudgetEstimateApproved\$14,480,515\$17,444,500\$14,957,800\$22,055,3003,712,1714,354,9003,739,5005,513,80019,258,45145,411,20044,011,30043,324,30043,372\$37,494,509\$67,210,600\$62,708,600\$70,893,400(335,364)	ActualBudgetEstimateApprovedAmount (\$)\$14,480,515\$17,444,500\$14,957,800\$22,055,300\$4,610,8003,712,1714,354,9003,739,5005,513,8001,158,90019,258,45145,411,20044,011,30043,324,300(2,086,900)43,372————\$37,494,509\$67,210,600\$62,708,600\$70,893,400\$3,682,800(335,364)————

Expenditures by Category - Grant Funds

The FY 2021 approved grant budget is \$70,893,400, an increase of 5.5% over the FY 2020 approved budget. This increase is primarily due to the addition of new grants: Adolescents Clubhouse Expansion, Ending the HIV Epidemic, HIV Program, Population Health, Promoting Positive Outcomes for Infants and Toddlers, Oral Health Expansion, ACL Senior, Cancer Program, Telemental Health and Performance Incentive Grant and the enhancement of existing grants: CDC HIV Funds and School Based Wellness Center.

Staff Summary by Division - Grant Funds

Staff Summary by	F	Y 2020		F	Y 2021	
Division & Grant Program	FT	PT	LTGF	FT	PT	LTGF
Administration						
General Services	2	_	_	2	—	_
Total Administration	2	_	_	2	_	_
Family Health Services						
AIDS Case Management	17	_	4	17	_	4
Babies Born Healthy	1	1	1	1	1	1
Dental Sealant D Driver Van		_	1	_	_	1
Expanding Access to Dental Care	_	_	_	_	_	_
Healthy Teens/Young Adults	4	_	_	4	_	
High Risk Infant	1	_	_	1	_	_
HIV Prevention	5	1	3	5	1	3
Immunization Action Grant	2	_	_	2	_	_
Reproductive Health	4	_	_	4		
Ryan White Title I/Part A and MAI	3	_	1	3		1
Ryan White Part B	6	_	1	6	_	1
Ryan White Fee For Service	_	_	3	_	_	3
School Based Wellness Center	—	_	_	_	_	8
STD Caseworker	12	_	7	12	_	7

Staff Summary by Division - Grant Funds (continued)

Chaff Common ha	FY 2020			FY 2021		
Staff Summary by Division & Grant Program	FT	PT	LTGF	FT	PT	LTGF
Surveillance and Quality Improvement	1	_	_	1		
TB Control Cooperative Agreement	2	_	_	2	_	
TB Refugee	_	_	—	_		
WIC Breastfeeding Peer Counseling	—	—	4	—	—	4
Women, Infants, and Children (WIC)	19	—	10	19	—	10
Total Family Health Services	77	2	35	77	2	43
Behavioral Health						
Addictions Treatment General Grant	19	_	10	19	_	10
Administrative/LAA	2	_	1	2	_	1
Bridges to Success	1	_	4	1		4
Core Services Administrative Grant	6	_	2	6		2
Crownsville Project	_	_	1	_		1
Drug and Alcohol Prevention	2	_	_	2		
Drug Court Services	1	_	_	1	_	
Federal Treatment Grant	2	1	_	2	1	
HIV Testing in Behavioral Health Services	_	_	_		_	
Integration of Sexual Health in Recovery	1	—	—	1	—	
Mental Health Services Grant	—	—	2	—		2
Offender Reentry Prog. (PGCORP)	—	—	6	—		6
PREP	—	4	1	—	4	1
Project Safety Net	6	—	6	6	—	6
Recovery Support Services	2	—	11	2	—	11
Smart ReEntry	—	—	5	—	_	5
Substance Abuse Treatment Outcomes Partnership (STOP)	3	—	7	3	—	7
Temporary Cash Assistance	3	—	2	3	—	2
Tobacco Enforcement Initiative	_	—	2	_		2
Tobacco Cessation	1	—	—	1	—	
Total Behavioral Health	49	5	60	49	5	60
Environmental Health - Disease Contro						
Bay Restoration (Septic) Fund	_	_		_	_	
Childhood Lead Poisoning Prevention	1	_	_	1	_	
Cities Readiness Initiative (CRI)	1	—	_	1	—	

Staff Summary by Division - Grant Funds (continued)

Staff Summary by	F	Y 2020		F	Y 2021	
Division & Grant Program	FT	PT	LTGF	FT	PT	LTGF
Hepatitis B Prevention	1	—	—	1	_	
Lead Poisoning Prevention		—		—	—	—
Public Health Emergency Preparedness (PHEP)	3	—	—	3	—	—
Total Environmental Health - Disease Control	6	—	—	6	—	—
Health and Wellness						
Administrative Care Coordination	12	_	1	12	_	1
Geriatric Evaluation Review Services	6	_	1	б	_	1
MCHP Eligibility Determination	18	1	8	18	1	8
General Medical Assistance Transportation	10	—	9	10	—	9
Total Health and Wellness	46	1	19	46	1	19
Office of the Health Officer						
ACIS	1	—	_	1	_	
Innovative State and Local Public Health Strategies to Prevent & Manage Diabetes and Heart Disease	1	_	_	1	_	_
Ryan White HIV/AIDS Treatment Modernization Act-Part A & Minority AIDS Initiative	1	_	—	1	—	_
UASI-MDERS	_		1	_	_	1
Total Office of the Health Officer	3	—	1	3	—	1
Total	183	8	115	183	8	123

In FY 2021, funding is provided for 183 full time positions, eight part time positions and 123 limited term grant funded (LTGF) positions. This is an increase of 8 LTGF positions due to the addition of 4 Nurse Practitioners and 4 Licensed Practical Nurses for the School Based Wellness Center.

Grant Funds by Division

	FY 2019	FY 2020	FY 2020	FY 2021 —	Change FY2	20-FY21
Grant Name	Actual	Budget	Estimate	Approved	Amount (\$)	Percent (%)
Family Health Services						
AIDS Case Management	\$1,737,457	\$6,157,100	\$6,157,100	\$5,550,000	\$(607,100)	-9.9%
Babies Born Healthy	130,328	200,000	200,000	200,000	_	0.0%
CDC HIV Funds	—	2,000,000	2,000,000	5,000,000	3,000,000	150.0%
Dental Sealant D Driver Van	23,600	330,400	330,400	200,000	(130,400)	-39.5%
Ending the HIV Epidemic Supplemental	_	_	_	140,000	140,000	
Healthy Teens/Young Adults	401,969	504,800	504,800	410,000	(94,800)	-18.8%
Hepatitis B and C Care	11,473	15,000	15,000	15,000	_	0.0%
High Risk Infant (Infants at Risk)	8,237	117,700	117,700	117,700	_	0.0%
HIV Expansion Funds	_	6,300,000	6,300,000	6,300,000	_	0.0%
HIV Prevention Services	665,803	854,700	854,700	940,000	85,300	10.0%
HIV Program	_	_	_	2,200,000	2,200,000	
HIV Program	_	_	_	3,000,000	3,000,000	
Immunization Action Grant	194,630	253,400	253,400	370,000	116,600	46.0%
Oral Disease and Injury Prevention	29,738	47,700	47,700	60,000	12,300	25.8%
Oral Heath Expansion	_	_	_	581,000	581,000	
Personal Responsibility Education (PREP)	48,677	70,000	70,000	65,000	(5,000)	-7.1%
PREP Pre Exposure Prophylaxis	_	650,000	650,000	615,000	(35,000)	-5.4%
Reproductive Health	303,910	384,000	384,000	497,000	113,000	29.4%
Ryan White Title I/Part A & MAI	_	446,100	446,100	_	(446,100)	-100.0%
Ryan White Part B	748,155	4,482,800	4,482,800	3,600,000	(882,800)	-19.7%
Ryan White Fee For Service	190,749	950,000	950,000	950,000	_	0.0%
School Based Wellness Center	_	_	_	1,088,900	1,088,900	
School Based Wellness Center - PGCPS	101,240	—	—	850,000	850,000	
School Based Wellness - MSDE	553,763	405,900	405,900	506,000	100,100	24.7%
STD Caseworker	924,021	1,530,300	1,530,300	1,425,000	(105,300)	-6.9%
Surveillance and Quality Improvement	97,961	200,900	200,900	143,000	(57,900)	-28.8%
Syringe Services	214,907	270,000	270,000	300,000	30,000	11.1%
TB Control Cooperative Agreement	216,501	231,600	231,600	250,000	18,400	7.9%
WIC Breastfeeding Peer Counseling	115,063	225,200	225,200	200,000	(25,200)	-11.2%
Women, Infants and Children (WIC)	1,890,539	2,330,400	2,330,400	2,500,000	169,600	7.3%
Total Family Health Services	\$8,608,721	\$28,958,000	\$28,958,000	\$38,073,600	\$9,115,600	31.5%

Grant Funds by Division (continued)

	FY 2019	FY 2020	FY 2020	FY 2021	Change FY2	20-FY21
Grant Name	Actual	Budget	Estimate	Approved	Amount (\$)	Percent (%)
Behavioral Health						
Administrative/LBHA Core Services Admin Grant	\$292,567	\$1,150,600	\$1,150,600	\$5,644,900	\$4,494,300	390.6%
Adolescents Clubhouse Expansion Supplement				90,000	90,000	
Bridges 2 Success	406,048	472,300	472,300	486,900	14,600	3.1%
Continuum of Care	291,715	672,700	672,700	694,600	21,900	3.3%
Core Services Administrative Grant	721,163	_	_	_	_	
Crownsville Project	41,095	74,400	74,400	80,300	5,900	7.9%
Drug Court Services	21,780	147,000	147,000	147,000	_	0.0%
Federal Block Grant (now Community Mental Health Block Grant)	1,191,641	1,338,400	1,338,400	1,316,800	(21,600)	-1.6%
Federal Fund Treatment Grant (now Federal SUD Services Grant)	484,935	1,158,600	1,158,600	963,000	(195,600)	-16.9%
General Fund Services (now combined with Admin LBHA)	2,176,984	4,018,100	4,018,100	_	(4,018,100)	-100.0%
High Intensity Drug Trafficking Area (HIDTA)	_	101,000	101,000	64,700	(36,300)	-35.9%
HIV Testing in Behavioral Health	_	_	_	230,200	230,200	
Integration of Sexual Health in Recovery	233,868	274,900	274,900	_	(274,900)	-100.0%
Maryland Opioid Rapid Response	44,447	50,100	50,100	176,000	125,900	251.3%
Mental Health Services Grant	1,203,771	1,604,300	1,604,300	1,370,400	(233,900)	-14.6%
Offender Reentry Prog. (PGCORP)	609,751	554,200	554,200		(554,200)	-100.0%
Opioid Operation Command	28,950	198,400	198,400	191,200	(7,200)	-3.6%
PATH Program	56,082	106,700	106,700	106,700	_	0.0%
Performance Incentive Grant Fund (PIGF)	_	_	_	250,000	250,000	
Prevention Services	418,952	525,400	525,400	502,700	(22,700)	-4.3%
Project Safety Net - (GOCCP)	978,183	1,214,700	1,214,700	1,214,600	(100)	0.0%
Recovery Support Services	757,004	932,200	932,200		(932,200)	-100.0%
SAMSHA Grants for Expansion and Sustainability of the Comprehensive Community Mental Health Services for Children with Emotional Disturbances	_	3,000,000	3,000,000	_	(3,000,000)	-100.0%
Smart Reentry - OJP	652,743	1,010,300	1,010,300	75,000	(935,300)	-92.6%
Substance Abuse Treatment Outcomes Partnership (STOP)	210,345	772,800	877,800	847,500	74,700	9.7%
Temporary Cash Assistance	370,056	455,900	455,900	493,400	37,500	8.2%
Tobacco Administration		19,800	19,800	27,000	7,200	36.4%

Grant Funds by Division (continued)

	FY 2019	FY 2020	FY 2020	FY 2021 —	Change FY2	20-FY21
Grant Name	Actual	Budget	Estimate	Approved	Amount (\$)	Percent (%)
Tobacco Cessation	174,981	183,900	183,900	173,800	(10,100)	-5.5%
Tobacco Control Community	55,544	85,100	85,100	83,100	(2,000)	-2.4%
Tobacco School Based	11,838	13,300	13,300	13,300		0.0%
Tobacco Enforcement Initiative	94,287	120,000	120,000	125,000	5,000	4.29
Wrap Around Prince George's (System of Care) Implementation	2,968,165	996,200	996,200	1,000,000	3,800	0.4%
Total Behavioral Health	\$14,496,895	\$21,251,300	\$21,356,300	\$16,368,100	\$(4,883,200)	-23.0%
Environmental Health - Disease C	ontrol					
Bay Restoration (Septic) Fund	\$25,889	\$99,100	\$99,100	\$174,800	\$75,700	76.49
Childhood Lead Poisoning Prevention	195,156	189,900	189,900	182,900	(7,000)	-3.7%
Cities Readiness Initiative (CRI)	119,433	137,200	137,200	131,100	(6,100)	-4.49
Hepatitis B Prevention	60,084	73,700	73,700	77,900	4,200	5.7%
Lead Paint Poisoning Program	44,471	53,200	53,200	60,300	7,100	13.39
Public Health Emergency Preparedness (PHEP)	337,723	469,700	469,700	476,000	6,300	1.39
TB Refugee	309,772		_	_	_	
Zika Nurse Project	23,556	35,600	35,600	_	(35,600)	-100.09
Total Environmental Health - Disease Control	\$1,116,084	\$1,058,400	\$1,058,400	\$1,103,000	\$44,600	4.2%
Health and Wellness Administrative Care Coordination	\$1,067,790	\$1,183,300	\$1,183,300	\$1,311,000	\$127,700	10.89
Grant-Expansion	<i>¥1,001,170</i>	<i>¥1,103,500</i>	<i>¥1,103,500</i>			10.07
Cancer Program			_	500,000	500,000	
CareFirst BlueCross BlueShield			_	55,900	55,900	
General Medical Assistance Transportation	3,340,406	3,856,600	3,856,600	3,965,000	108,400	2.89
Geriatric Evaluation and Review Services (Revenue)	772,758	1,036,800	1,036,800	946,000	(90,800)	-8.89
Geriatric Evaluation and Review Services (Grant)	6,287	10,400	10,400	10,400	—	0.00
MCHP Eligibility Determination- PWC	1,720,173	2,214,300	2,214,300	2,302,600	88,300	4.09
Total Health and Wellness	\$6,907,414	\$8,301,400	\$8,301,400	\$9,090,900	\$789,500	9.5%
Office of the Health Officer						
ACL Senior	\$—	\$—	\$—	\$500,000	\$500,000	
Assistance in Community Integration Services (ACIS)	17,923	634,500	634,500	634,500	_	0.09
Diabetes, Heart Disease, & Stroke	1,331,791	2,400,000	2,400,000	2,400,000	_	0.09
HRSA	_	372,000	_	_	(372,000)	-100.09
Medical Resource Officers	_			110,000	110,000	

FISCAL YEAR 2021 APPROVED

Grant Funds by Division (continued)

	FY 2019	FY 2020	FY 2020	FY 2021 —	Change FY20-FY21	
Grant Name	Actual	Budget	Estimate	Approved	Amount (\$)	Percent (%)
Population Health				1,000,000	1,000,000	
Promoting Positive Outcomes for Infants & Toddlers	_		_	941,000	941,000	
Ryan White HIV/AIDS Treatment Modernization Act-Part A & Minority AIDS Initiative	4,680,317	_	_	_	_	
Social Impact Partnerships to Pay for Results Act Demonstration Project (US Department of the Treasury)	_	4,000,000	_	_	(4,000,000)	-100.0%
Telemental health	_	_	_	250,000	250,000	
UASI - MDERS	_	130,000	_	_	(130,000)	-100.0%
Total Office of the Health Officer	\$6,030,031	\$7,536,500	\$3,034,500	\$5,835,500	\$(1,701,000)	-22.6%
Subtotal	\$37,159,145	\$67,105,600	\$62,708,600	\$70,471,100	\$3,365,500	5.0 %
Total Transfer from General Fund - (County Contribution/Cash Match)		105,000	105,100	422,300	317,300	302.2%
Total	\$37,159,145	\$67,210,600	\$62,813,700	\$70,893,400	\$3,682,800	5.5%

Grant Descriptions

DIVISION OF FAMILY HEALTH SERVICES -- \$38,073,600

Grant funded programs serve at-risk, predominantly uninsured/underinsured populations including infants and children, adolescents, pregnant women and women of childbearing age through early diagnosis, screening, treatment, counseling, education, follow-up, case management, referral, linkage to Medicaid and nutrition services (including WIC). Funding also supports necessary services to individuals with specific types of communicable diseases such as Sexually Transmitted Diseases and HIV/AIDS and extensive community education activities. Two new CDC HIV Programs totaling \$5.2 million are expected for FY 2021. Personal Responsibility Education Programs provide pregnancy prevention education before marriage. The Dental Sealant Grant provides dental care to the County public schools via mobile van. The Immunization Program focuses on providing immunization services to ensure that children attain full compliance with recommended immunization schedules and can enter school on time. The School Based Wellness Center Program provides collaboration with the Prince George's County Board of Education to provide extended operating hours and services to the community.

DIVISION OF BEHAVIORAL HEALTH SERVICES --\$16,368,100

Grants within this division support services for adults, adolescents and families with behavioral health needs, including addictions and mental health, as well as prevention services for high-risk youth and families. The Behavioral Health Division supports outpatient and intensive outpatient treatment services delivered by Health Department staff, as well as outpatient and residential treatment services delivered through contracts with private providers. The division also receives funding for interventions to target special populations in our community, including but not limited to tobacco prevention, offender re-entry and special services for pregnant and postpartum women. The High Intensity Drug Trafficking Areas (HIDTA) program enhances and coordinates drug control efforts among local, State and federal law enforcement agencies. The Division is also responsible for long-range planning for behavioral health services in the County, needs assessments and the development of alternative resource providers.

DIVISION OF ENVIRONMENTAL HEALTH AND DISEASE CONTROL -- \$1,103,000

The Public Health Emergency Preparedness Grant supports planning activities and the integrated efforts between County health civic organizations and health care facilities to train medical practitioners and citizen volunteers in emergency preparedness; establishing dispensing sites and shelters; and implementing emergency response strategies in the event of a manmade or natural disaster. The Bay Restoration Fund provides funds for on-site sewage disposal system upgrades using the best available technology for nitrogen removal. The Cities Readiness Initiative is specific to incident management.

DIVISION OF HEALTH AND WELLNESS -- \$9,090,900

Medical Assistance grants provide personal care and case management to frail elderly individuals with chronic diseases or developmentally disabled persons transportation to medical appointments for Medical Assistance recipients. Grant funding is also used to evaluate the needs of individuals at risk of institutionalization and to purchase services to prevent their placement in a nursing home or other health care facility.

OFFICE OF THE HEALTH OFFICER -- \$5,835,500

Grant funding supports prevention and/or mitigation of diabetes, heart disease and stroke through the use of community screens, referral services and interventions to assist individuals with lifestyle decisions/changes. The Population Health program, Telemental Health, ACL Senior and Medical Resource Officers are new State and Federal Passthrough State grants. Assistance In Community Integration Services provides assistance to adults reentering the community after incarceration, military service and/or youth who are trying to find their place in the community.

SERVICE DELIVERY PLAN AND PERFORMANCE

Goal 1 — To ensure access to healthcare resources for County residents.

FY 2025 Target	FY 2018 Actual	FY 2019 Actual	FY 2020 Estimated	FY 2021 Projected	Trend				
200,000	321,582	168,265	151,104	165,000	↔				

Objective 1.1 — Increase access to healthcare for the County's population.

Trend and Analysis

The Health Department is committed to ensuring access to healthcare, which is a key component of the agency mission. All agency programs are related to this goal, and it is also reflected in the statewide implementation of the Affordable Care Act. Locally, one of the methods to help increase access is to ensure a trained and knowledgeable community outreach staff is embedded across programs who connect individually with clients as well as through targeted public outreach events to increase awareness and help residents link to community resources. The overall impact of these activities is challenging to measure, since increased access to healthcare may not yield immediate results but will instead help to gradually lessen the burden of disease and disability over time.

Measure Name	FY 2017 Actual	FY 2018 Actual	FY 2019 Actual	FY 2020 Estimated	FY 2021 Projected
Resources (Input)					
Outreach workers	28	21	21	23	23
Workload, Demand and Production (Output)					
Overall client contacts	265,165	227,456	154,719	165,897	170,000
Cumulative public outreach efforts	542	369	287	216	230
Impact (Outcome)					
Cumulative residents reached through direct contact or outreach efforts (cumulative)	371,566	321,582	168,265	151,104	165,000

Goal 2 — To prevent and reduce chronic disease, including obesity, among County residents.

Objective 2.1 — Provide healthy eating and active living education and interventions to County residents.

FY 2025 Target	FY 2018 Actual	FY 2019 Actual	FY 2020 Estimated	FY 2021 Projected	Trend
2,100	3,428	1,607	1,746	1,800	⇔

Trend and Analysis

The Health Department is committed to targeting the common risk factors that contribute to the development of chronic diseases such as diabetes, cancer, and cardiovascular disease. The department's strategies for the prevention and management of chronic diseases support programming to promote healthy behaviors, early detection and diagnosis of metabolic syndrome, community-specific outreach and education activities and chronic disease self-management. New activities include a Healthy Corner Store initiative that provides education, technical assistance and infrastructure support to an increase in the healthy food inventory in small local stores that sell food products. Additional activities include the provision of training for staff on CDC's evidence-based Diabetes Prevention and the Stanford Chronic Disease Self-Management programs.

Measure Name	FY 2017 Actual	FY 2018 Actual	FY 2019 Actual	FY 2020 Estimated	FY 2021 Projected
Resources (Input)					
Health promotion/community developer staff	б	2	2	3	3
Workload, Demand and Production (Output)					
Monthly public education campaigns addressing chronic disease	4	0	2	1	1
Residents reached by all health promotion activities	1,955,441	1,249,747	2,270,188	373,146	400,000
Impact (Outcome)					
Residents educated by healthy eating and active living interventions	1,027	3,428	1,607	1,746	1,800
Change in knowledge over baseline for educational activities	19%	15%	11%	30%	30%

Goal 3 — To improve reproductive health care in order to reduce infant mortality and enhance birth outcomes for women in Prince George's County.

Objective 3.1 $-$	Increase th	e number	of women	that use	long-acting
reversible contrac	eption (LARC	c) as their p	rimary birth	control m	nethod.

FY 2025	FY 2018	FY 2019	FY 2020	FY 2021	Trend
Target	Actual	Actual	Estimated	Projected	
700	250	250	80	100	↔

Trend and Analysis

The agency is committed to improving birth outcomes for County residents, which requires a partnership with health care providers, community members, community stakeholders, Prince George's County Public Schools, local, State and federal partners. Improving birth outcomes begins with promoting health, wellness and prevention. The agency does this through its Family Planning and Adolescent Health Clinic by offering health assessments, nutrition education, mental health assessments, reproductive health and linkages to medical homes and community services. Services are available to both male and female residents regardless of their ability to pay for such services. The increase in reproductive health services in FY 2019 is due to both an increase in providers as well as the incorporation of family planning across clinical services. In FY 2020, the lack of qualified providers to offer long-acting reversible contraception (LARC) may be impacting family planning.

Measure Name	FY 2017 Actual	FY 2018 Actual	FY 2019 Actual	FY 2020 Estimated	FY 2021 Projected
Resources (Input)					
Scheduled family planning appointments	2,318	2,957	5,899	5,448	5,500
Workload, Demand and Production (Output)					
New pregnant females identified through family planning appointments and referred to community partners	375	280	156	116	120
Family planning appointments kept	1,736	2,213	4,146	3,636	3,500
Clients seen at family planning appointments who are screened for domestic violence	1,643	1,931	1,761	972	1,000
Efficiency					
"No Show" rate for family planning appointments	0%	0%	30%	33%	30%
Impact (Outcome)					
Women utilizing LARCs (Long Active Reversible Contraceptives)	0	250	250	80	100

Objective 3.2 — Reduce infant mortality.

FY 2025 Target	FY 2018 Actual	FY 2019 Actual	FY 2020 Estimated	FY 2021 Projected	Trend
7	8	8	8	8	⇔

Trend and Analysis

Assuring the health of the public extends beyond the health status of individuals; it requires a population health approach. Infant mortality is a critical indicator of the overall health of a population because it is directly linked to maternal overall health and the social determinants of health. Social determinants of health are conditions in the environments in which people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks. Healthy People 2020 highlights the importance of addressing the social determinants of health by including "Create social and physical environments that promote good health for all" as one of the four overarching goals for the decade. The agency offers the Healthy Beginnings program that address maternal and infant health and the impact social determinates on their overall health and wellbeing. These programs include funding from Babies Born Healthy which uses perinatal navigators who are outreach workers that work closely with at-risk pregnant women to link to care and support services and to offer health education with a focus on safe sleep, smoking cessation; Healthy Beginnings (formerly Infants at Risk and Healthy Start), which supports mothers and their infants up to age one who are at highest risk of poor health outcomes due to medical and psychosocial issues; and Fetal Infant Mortality Review, which is a program funded by the State to review infant death records for cause and effect and to make recommendations to providers and the State. The agency works closely with University of Maryland Capital Region Health, Medstar Southern Maryland Hospital who are the primary referring entities. Other hospitals, agencies and private practices also refer cases.

Measure Name	FY 2017 Actual	FY 2018 Actual	FY 2019 Actual	FY 2020 Estimated	FY 2021 Projected
Resources (Input)					
Healthy Beginnings Staff (budgeted RNs, support staff, etc.)	2	2	2	1	2
Workload, Demand and Production (Output)					
Referrals for Healthy Begin case management for children birth to age one	875	924	718	582	600
Home visits for new referrals for case management birth to age one	114	54	88	87	70
Home visit referrals for follow-up case management birth to age one	82	83	98	39	40
Unduplicated mothers receiving case management services	678	584	547	522	522
Teens <18 years receiving case management services	109	72	49	84	60
Referrals received from the University of Maryland Capital Region Health	289	186	117	117	100
Referrals received from Medstar Southern Maryland Hospital	91	117	124	156	120

Performance Measures (continued)

Measure Name	FY 2017 Actual	FY 2018 Actual	FY 2019 Actual	FY 2020 Estimated	FY 2021 Projected
Quality					
Babies/children referred to other County Resources	730	264	199	500	500
Mothers referred to Addictions/Mental Health	9	6	28	25	25
Impact (Outcome)					
New mothers that received first trimester care	51%	51%	53%	55%	57%
Low birth weight babies born to County residents	9%	9%	10%	10%	10%
Pre-term babies born to County residents	10%	10%	10%	10%	10%
Annual Infant Mortality Rate (countywide measure) per 1,000 live births	9	8	8	8	8

Goal 4 — To prevent and control sexually transmitted disease and infections in order to enhance the health of all the County's residents, workers and visitors.

Objective 4.1 — Increase HIV tests for those at high-risk.

FY 2025 Target	FY 2018 Actual	FY 2019 Actual	FY 2020 Estimated	FY 2021 Projected	Trend
88%	69%	80%	80%	85%	1

Trend and Analysis

Sexually transmitted infections (STIs) remain a serious public health concern within Prince Georges County. The population most at risk for STIs are non-Hispanic males who has sex with other males at noted in County data that demonstrates an upward trend in STIs such as gonorrhea and syphilis. For 2018, Prince George's County has the second highest HIV rate in Maryland of 40.9 new cases per 100,000 residents. In order to address this problem, the Health Department has partnered with community organizations to expand access to testing, counseling and treatment. In February 2019, it was announced during the State of the Union address that 47 counties and 7 rural jurisdictions were responsible for 50% of the HIV cases in the US. Unfortunately, Prince George's County among them, along with Montgomery County, Washington, DC and Baltimore City. It was also noted that Prince George's County ranked number one in the State for new HIV cases with more that 50% of the cases affecting young African American males and more than 40% affecting the heterosexual community. As a result, HHS started an initiative to "End the HIV Epidemic" which seeks to reduce the number of new HIV infections in the United States by 75% within five years, and then by at least 90% within 10 years, for an estimated 250,000 total HIV infections averted.

Included in the agency's first wave of funding in FY 2020, is a planning grant that will be used to develop a HIV Prevention, Care and Treatment Program specifically designed by our residents for our residents. This historic opportunity has placed Prince George's County on the national stage with unprecedented support from our Federal and State grantors. In addition to maintaining a full time clinic that offers comprehensive reproductive health, medical/non-medical casement, oral health, nutrition, emergency financial assistance, and STI prevention/treatment services, the agency has expanded its network of partnerships to include organizations that specifically target neighborhoods and hard to reach clientele including the LGBTQ community. With the revamping of the HIV program, we have five focus areas: diagnose all people with HIV as early as possible; treat people with HIV rapidly and effectively to reach sustained viral suppression; prevent new HIV transmissions by using proven interventions, including pre-exposure, prophylaxis (PrEP) and syringe services programs (SSPs); respond quickly to potential HIV outbreaks to get needed prevention and treatment services to people who need them; and, workforce development by hiring and

retaining the best staff that are highly skilled and reflective of the target communities. Understanding that treatment is prevention, the standard for linking those newly HIV diagnosed is 3 months; the agency is striving to complete HIV linkage to care within 7 days, including starting treatment at time of diagnosis. Linkage to care is critical to prevent HIV transmission and to ensure those newly diagnosed live a healthy life.

Performance Measures

Measure Name	FY 2017 Actual	FY 2018 Actual	FY 2019 Actual	FY 2020 Estimated	FY 2021 Projected
Resources (Input)					
Prevention/STI staff	11	13	7	8	12
Workload, Demand and Production (Output)					
HIV related educational outreach and awareness opportunities	32	23	20	21	100
Efficiency					
HIV tests performed through Reproductive Health Resource Center, HIV Clinic, and TB Clinic	9,024	4,054	2,428	2,500	4,000
Impact (Outcome)					
New HIV cases per 100,000 persons	43	41	41	40	39
Newly diagnosed HIV positive with documented linkage to care	44%	69%	80%	80%	85%

Goal 5 — To ensure that Prince George's County's physical environment is safe in order to enhance the health of all of its residents, workers and visitors.

Objective 5.1 — Conduct inspections at high and moderate priority food service facilities.

FY 2025	FY 2018	FY 2019	FY 2020	FY 2021	Trend
Target	Actual	Actual	Estimated	Projected	
90%	69%	40%	45%	58%	1

Trend and Analysis

The Food Protection Program's focus is to ensure the food produced and eaten in the county is safe, through monitoring risk factors, documentation of compliance, and targeting immediate and long term issues through active managerial control. High priority food facilities require 3 inspections and moderate facilities require 2 inspections annually per COMAR. While the Food Protection Program staff has consistently performed well above industry standards, meeting the state mandate for inspections continues to be a challenge. An increase of Environmental Health Specialists in FY 2018 helped increase the compliance rate with state mandates. In FY 2019, a training program for chronic offenders or potential chronic offenders was initiated to help reduce the number of follow up inspections and the number of critical violations cited on the inspections. Fourteen facilities have been designated as chronic offenders with six receiving training to date. Next steps are to monitor the effectiveness of the training in reducing the number of violations as well as fines and hearings associated with repeat offenses. The Food Protection Program has been enrolled in the FDA's Voluntary National Retail Food Regulatory Program Standards since 2011 in order to achieve national uniformity among the nation's retail food regulatory programs.

Performance Measures

Measure Name	FY 2017 Actual	FY 2018 Actual	FY 2019 Actual	FY 2020 Estimated	FY 2021 Projected
Resources (Input)					
Full time food service facility (FSF) inspectors	12	15	12	13	15
Workload, Demand and Production (Output)					
High and moderate priority FSFs that have permits	2,412	2,430	2,506	2,543	2,600
High and moderate FSF inspections required by the State	6,467	6,467	6,976	6,873	7,100
High and moderate priority FSFs inspected	3,894	4,469	2,800	3,318	4,100
Follow-up inspections of high and moderate priority FSFs	452	806	780	1,137	1,200
Efficiency					
High and moderate FSFs inspected per inspector	339	305	237	271	273
Impact (Outcome)					
High and moderate FSFs cited for disease-related violations	14%	17%	15%	12%	13%
Percentage of State-mandated high and moderate inspections conducted	60%	69%	40%	45%	58%

Goal 6- To ensure that County residents have access to mental health and substance abuse treatment

Objective 6.1 — Increase mental health and substance abuse treatment services to County residents.

FY 2025	FY 2018	FY 2019	FY 2020	FY 2021	Trend
Target	Actual	Actual	Estimated	Projected	
100%	95%	96%	96%	97%	1

Trend and Analysis

The delivery of medication-assisted treatments for substance abuse disorders will increase in utilization, as will our investment in trainings on evidence based practices as required to maintain our accreditation by the Joint Commission on Accreditation on Healthcare Organizations. The substance use treatment staff includes clinical supervisors necessary to maintain accreditation who do not see clients full-time. Many clients need intensive outpatient services which limits the caseload for substance use treatment staff.

Measure Name	FY 2017 Actual	FY 2018 Actual	FY 2019 Actual	FY 2020 Estimated	FY 2021 Projected
Resources (Input)					
Monthly staff providing treatment for substance use	27	11	15	15	15

Performance Measures (continued)

Measure Name	FY 2017 Actual	FY 2018 Actual	FY 2019 Actual	FY 2020 Estimated	FY 2021 Projected
Workload, Demand and Production (Output)					
Clients enrolled in outpatient services for substance use	1,081	913	780	694	700
Monthly programs monitored that provide mental health services to County residents	101	111	177	201	200
Impact (Outcome)					
Clients with appropriately documented progress in achieving care, treatment or service goals	95%	95%	96%	96%	97%

Objective 6.2 — Ensure emergency mental health services are available to County residents.

FY 2025	FY 2018	FY 2019	FY 2020	FY 2021	Trend
Target	Actual	Actual	Estimated	Projected	
85%	85%	85%	83%	84%	⇔

Trend and Analysis

The county's Mobile Crisis Response Services provider has continued to field over 1,000 calls each month, and has been successful in diverting individuals from institutional placements over 80% of the time. The agency will continue to promote use of our partner's national crisis Textline (Text MD to 741741).

Measure Name	FY 2017 Actual	FY 2018 Actual	FY 2019 Actual	FY 2020 Estimated	FY 2021 Projected
Resources (Input)					
Crisis Response System (CRS) staff	13	13	12	13	13
Workload, Demand and Production (Output)					
Calls to the CRS	5,112	3,070	8,587	7,724	7,700
Mobile Crisis Team dispatches	1,047	1,002	828	720	720
Quality					
Response time for CRS Mobile Crisis Team dispatches (average)	0	0	0	0	0
Impact (Outcome)					
Clients receiving CRS services who divert institutionalization	86%	85%	85%	83%	84%

