

# HEALTH DEPARTMENT - 170

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## MISSION AND SERVICES

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**Mission** - 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

**Strategic Focus in FY 2019 -**

The agency's top priorities in FY 2019 are to:

- 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 disease and infections
- Promote safe food services facilities
- Ensure access to mental health and substance abuse treatment

## FY 2019 BUDGET SUMMARY

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The FY 2019 approved budget for the Health Department is \$74,277,200, an increase of \$1,119,200 or 1.5% over the FY 2018 approved budget.

**GENERAL FUNDS**

The FY 2019 approved General Fund budget for the Health Department is \$26,547,000, an increase of \$974,800 or 3.8% over the FY 2018 approved budget.

**Budgetary Changes -**

<b>FY 2018 APPROVED BUDGET</b>	<b>\$25,572,200</b>
<b>Increase Cost: Operating</b> - Increase in various operational line items and contractual services including the continuation of the Healthcare Alliance program	\$559,300
<b>Increase Cost: Compensation – Mandatory Salary Requirements</b> – Includes lapse and attrition and additional funding for State employees	\$529,600
<b>Increase Costs: Operating</b> - Increase in funding for the Health Assure Program (CB-23-2018)	\$250,000
<b>Increase Cost: Compensation</b> – Increase in funding for State Special Pay and Merit staffing requirements	\$215,500
<b>Decrease Cost: Recoveries</b> – Recovery increase from the Drug Enforcement and Education Fund	(\$15,000)
<b>Decrease Cost: Compensation</b> – Staff transfer of Community Developer position to the Office of Community Relations to support the TNI Program	(\$54,700)
<b>Decrease Cost: Fringe Benefits</b> – Decrease in the fringe benefits rate from 34.9% to 32.5%	(\$152,900)
<b>Decrease Cost: Operating – Office Automation</b> - Reflects a change in the office automation methodology based on the number of funded positions	(\$357,000)
<b>FY 2019 APPROVED BUDGET</b>	<b>\$26,547,000</b>

**GRANT FUNDS**

The FY 2019 approved grant budget for the Health Department is \$47,730,200, an increase of \$144,400 or 0.3% over the FY 2018 approved budget. Major sources of funds in the FY 2019 proposed budget include:

- General Medical Assistance Transportation
- Addictions Treatment Grant
- AIDS Case Management
- Women, Infants & Children (WIC)
- Ryan White Part B

**Budgetary Changes -**

<b>FY 2018 APPROVED BUDGET</b>	<b>\$47,585,800</b>
<b>Add: New Grants</b> - Smart Reentry OJP, Opioid Operation Command, HIV Testing in Behavioral Health, Maryland Crisis Hotline, Personal Responsibility Education, Maryland Opioid Rapid Response, Syringe Exchange, and Assistance in Community Integration Services (ACIS)	\$1,946,100
<b>Enhance: Existing Program/Service</b> - Office of the Health Director - Ryan White HIV AIDS Treatment Modernization Act - Part A & Minority AIDS Initiative, STD Caseworker, Federal Block Grant, MCHP Eligibility Determination PWC, Addictions Treatment Grant, Bridges to Success, Core Services Administrative Grant, Ryan White Part B, Dental Sealant D Driver Van, Mental Health Services Grant, other net program/service changes	\$2,203,510
<b>Reduce: Existing Program/Service</b> - HIV Prevention Services, Oral Disease & Injury Prevention, TB Refugee, Integration of Sexual Health in Recovery, TB Control Cooperative Agreement, Administrative Care Coordination Grant Expansion, General Medical Assistance Transportation, Project Launch, Division of Family Health - Ryan White Title I/Part A & MAI	(\$3,241,110)
<b>Eliminate: Program/Service</b> - KIDZ Healthy Revolution Grant and Project Launch	(\$764,100)
<b>FY 2019 APPROVED BUDGET</b>	<b>\$47,730,200</b>

## SERVICE DELIVERY PLAN AND PERFORMANCE

**GOAL 1** - To ensure access to healthcare resources for County residents.

**Objective 1.1** - Increase access to healthcare for the County's population, measured by the cumulative number of County residents reached either through direct contact or outreach efforts.

FY 2023 Target	FY 2016 Actual	FY 2017 Actual	FY 2018 Estimated	FY 2019 Projected	Trend
400,000	286,588	371,566	332,004	330,000	↔

### Trend and Analysis

The Health Department is committed to ensuring access to healthcare, which is the leading priority in the current health improvement plan. All Health Department programs are related to this goal, and it is also reflected in the statewide implementation of the Affordable Care Act. Locally, one of the key ways 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.

### Performance Measures

Measure Name	FY 2015 Actual	FY 2016 Actual	FY 2017 Actual	FY 2018 Estimated	FY 2019 Projected
<b>Resources (input)</b>					
Number of Health Department outreach workers	28	26	23	23	23
<b>Workload, Demand and Production (output)</b>					
Number of overall Health Department client contacts	265,165	226,117	221,494	249,852	250,000
Number of overall Health Department public outreach efforts (cumulative)	542	338	384	543	500
<b>Efficiency</b>					
Average number of client contacts per outreach worker	9,613	8,739	9,757	11,105	10,870
<b>Impact (outcome)</b>					
Number of County residents reached through either direct contact or outreach efforts (cumulative)	2,286,663	286,588	371,566	332,004	330,000

Note: Numbers might not add due to rounding.

GOAL 2- To prevent and reduce chronic disease, including obesity, among County residents.

<b>Objective 2.1</b> - Provide healthy eating and active living education and interventions to County residents.					
FY 2023 Target	FY 2016 Actual	FY 2017 Actual	FY 2018 Estimated	FY 2019 Projected	Trend
3,423	2,267	2,668	2,700	3,105	↑

**Trend and Analysis**

The agency is committed to targeting the common risk factors that contribute to the development of chronic diseases such as diabetes, cancer and cardiovascular disease. The agency’s strategies for the prevention and management of chronic diseases include programs to promote healthy behaviors, early detection and diagnosis of metabolic syndrome, community-specific outreach and education activities as well as chronic disease self-management.

**Performance Measures**

Measure Name	FY 2015 Actual	FY 2016 Actual	FY 2017 Actual	FY 2018 Estimated	FY 2019 Projected
<b>Resources (input)</b>					
Number of health promotion/community developer staff	6	2	2	2	2
<b>Workload, Demand and Production (output)</b>					
Number of public education campaigns addressing chronic disease across HD (average per month)	4	2	1.5	1.5	1.5
Number of cumulative residents reached by all health promotion activities	1,955,441	1,615,441	1,333,203	1,106,348	1,106,350
<b>Efficiency</b>					
<b>Impact (outcome)</b>					
Number of residents educated by healthy eating and active living interventions	1,027	2,267	2,668	2,700	3,105
Percentage change in knowledge over baseline for educational activities	11%	19%	20%	10%	15%

GOAL 3 - To improve reproductive health care in order to reduce infant mortality and enhance birth outcomes for women in Prince George’s County.

<b>Objective 3.1</b> - Increase the percentage of pregnant women in the County who received maternity care within the first trimester of pregnancy.					
FY 2023 Target	FY 2016 Actual	FY 2017 Actual	FY 2018 Estimated	FY 2019 Projected	Trend
60%	52%	54%	55%	56%	↑

**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, PGCPs and other 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 services.

## Performance Measures

Measure Name	FY 2015 Actual	FY 2016 Actual	FY 2017 Actual	FY 2018 Estimated	FY 2019 Projected
<b>Resources (input)</b>					
Number of scheduled family planning appointments		3,121	2,318	3,068	3,068
<b>Workload, Demand and Production (output)</b>					
Number of new pregnant females identified in the family planning clinic		402	375	344	344
Number of maternity referrals made to community partners		402	375	344	344
Number of family planning appointments kept		2,274	1,736	2,284	2,284
Number of women seen at family planning who are screened for domestic violence		1,003	1,643	1,912	1,912
<b>Efficiency</b>					
Proportion of kept family planning appointments compared to those scheduled.		72.9%	77.3%	74.2%	74.2%
<b>Quality</b>					
Average number of days to get appointment for Family Planning Clinic		14	1	1	1
<b>Impact (outcome)</b>					
Percent of new mothers in the County that received first trimester care (annual measure)	51.2%	52%	54%	55%	56%
Percent of low birth weight babies born to County residents (annual measure)	9.1%				
Percent of pre-term babies born to County residents (annual measure)	10.3%				

Data related to low birth weight babies and pre-term babies is currently unavailable.

**Objective 3.2** - Reduce infant deaths within 12 months of birth per 1,000 live births in the County.

FY 2023 Target	FY 2016 Actual	FY 2017 Actual	FY 2018 Estimated	FY 2019 Projected	Trend
7.0	8.5	8.3	8.0	7.8	↓

## 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 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. The federal Healthy People 2020 initiative 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.

There are three programs that address maternal and infant health and the impact social determinates have on their overall health and wellbeing. These programs include: 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 and 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 Prince George's Hospital and Medstar Southern Maryland Hospital who are the primary referring entities. Other hospitals, agencies and private practices also refer cases.

**Performance Measures**

Measure Name	FY 2015 Actual	FY 2016 Actual	FY 2017 Actual	FY 2018 Estimated	FY 2019 Projected
<b>Resources (input)</b>					
Number of IAR Staff (budgeted RNs, support staff, etc.)	2	2	2	2	2
<b>Workload, Demand and Production (output)</b>					
The number of referrals for IAR case management for children birth to age one	875	1,016	948	1,084	1,084
The number of home visits for new referrals for case management birth to age one	114	36	21	40	40
The number of home visit referrals for follow-up case management birth to age one.	82	124	62	60	60
The number of unduplicated mothers receiving case management services (hospital visits/phone intervention)	678	700	680	628	628
The number of teens <18 years receiving case management services	109	73	71	80	80
The number of referrals received from Prince George's Hospital	289	450	333	188	188
The number of referrals received from Laurel Regional Medical Center	13	3	0	0	0
The number of referrals received from Medstar Southern Maryland Hospital	91	93	128	60	60
<b>Quality</b>					
Number of babies/children referred to other County Resources	730	446	471	356	356
Number of mothers referred to Addictions/Mental Health	9	27	15	8	8
<b>Impact (outcome)</b>					
Number of infant deaths (IAR program clients can be referred to the program after an infant death)	57	30	7	10	10
Infant Mortality Rate (County-wide measure) per 1,000 live births (annual measure)	8.9	8.5	8.3	8.0	7.8

**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.

<b>Objective 4.1</b> - Increase the percent of newly diagnosed HIV positive clients with documented linkage to care.					
FY 2023 Target	FY 2016 Actual	FY 2017 Actual	FY 2018 Estimated	FY 2019 Projected	Trend
58%	31%	44%	50%	54%	↑

**Trend and Analysis**

Sexually transmitted infections (STIs) remain a serious public health concern within the County. The populations most at risk for STIs is the non-Hispanic male who has sex with other males. County data demonstrates an upward trend in HIV infection and co-infections with gonorrhea and syphilis. Maryland ranks 4<sup>th</sup> in the nation for reported HIV cases and the County ranks 2<sup>nd</sup> in Maryland. The agency maintains a full time clinic that offers comprehensive reproductive health, medical/non-medical case management, oral health, nutrition, emergency financial assistance and STI prevention/treatment services.

The agency is reporting a decrease in the number of in-house HIV tests performed from FY 2015 to FY 2019. In recent years the focus has shifted to routinize HIV testing so that residents are tested when they receive health care services because it reaches more people than the agency is able to test through its clinical and screening services. The agency has partnered with community organizations to expand access to testing, counseling and treatment. It has also provided funding to Ft. Washington Medical Center to provide testing through their emergency room, which is important since they are near some of the high-incidence areas in the County.

**Performance Measures**

Measure Name	FY 2015 Actual	FY 2016 Actual	FY 2017 Actual	FY 2018 Estimated	FY 2019 Projected
<b>Resources (input)</b>					
Number of Prevention/STI staff	11	12	16	15	15
<b>Workload, Demand and Production (output)</b>					
Number of HIV-related educational outreaches and awareness opportunities	32	27	18	20	20
<b>Efficiency</b>					
Number of HIV tests performed	9,024	6,823	5,643	5,140	5,140
<b>Impact (outcome)</b>					
Number of new HIV cases per 100,000 persons (annual calculation)	55.6	43.3			
Percent of newly diagnosed HIV positive with documented linkage to care.	44%	31%	44%	50%	54%

**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** - Increase the percentage of required State-mandated high and moderate facility inspections conducted each year.

FY 2023 Target	FY 2016 Actual	FY 2017 Actual	FY 2018 Estimated	FY 2019 Projected	Trend
95%	54%	60%	83%	90%	↑

### Trend and Analysis

The Food Protection Program (FPP)'s focus is to ensure the food produced and eaten in the County is safe through monitoring risk factors, documenting compliance, and targeting immediate and long term issues through active managerial control. The FPP 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.

High priority food facilities require three inspections and moderate facilities require two inspections annually per COMAR. The addition of five Environmental Health Specialists in FY 2018 helped increase the State mandated compliance rate. The performance displayed for FY 2018 accounts for time for the hiring process and onboarding of staff which impacts overall inspection data. Moving forward, the additional staff allows the FPP to increase enforcement and education of food retailers that may not currently meet safety standards.

### Performance Measures

Measure Name	FY 2015 Actual	FY 2016 Actual	FY 2017 Actual	FY 2018 Estimated	FY 2019 Projected
<b>Resources (input)</b>					
Number of full-time food service facility (FSF) inspectors	11	10	12	17	22
<b>Workload, Demand and Production (output)</b>					
Number of high and moderate priority FSFs that have permits	2,198	2,391	2,412	2,430	2,430
Number of high and moderate FSF inspections required by the State	5,900	6,458	6,467	6,467	6,467
Number of high and moderate priority FSFs inspected	3,535	3,514	3,894	5,376	5,800
Number of follow-up inspections of high and moderate priority FSFs	232	270	452	968	900
<b>Efficiency</b>					
Average number of high and moderate FSFs inspected per inspector	327.1	347.1	338.6	321.9	263.6
<b>Quality</b>					
Percent of "critical item" complaints responded to within 24 hours	100%	100%	95%	95%	95%
<b>Impact (outcome)</b>					
Percent of high and moderate FSFs cited for disease-related critical violations	11.6%	7.6%	14.3%	19.3%	19.3%
Percentage of State-mandated high and moderate inspections conducted	60%	54%	60%	83%	90%



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

<b>Objective 6.1</b> -Increase the percent of substance abuse treatment clients with a documented plan for achieving treatment goals.					
<b>FY 2023 Target</b>	<b>FY 2016 Actual</b>	<b>FY 2017 Actual</b>	<b>FY 2018 Estimated</b>	<b>FY 2019 Projected</b>	<b>Trend</b>
100%	93%	95%	94%	95%	↔

### Trend and Analysis

In FY 2018, the Behavioral Health division was realigned due to a State funding reduction in staffing for substance abuse treatment services. This shift involved a move from State grant funding to fee-for-service billing that resulted in a consolidation from three sites to one location at the Cheverly Health Center. The transition to a fee-for-service model required implementation of an entirely new billing infrastructure with revised administrative and clinical protocols. Despite these challenges, the General Fund supports the opportunity to maintain much needed services and also to identify strategies aimed at improving quality of care for clients, increasing efficiency of operations and reducing operational costs. The agency plans to further implement these strategies in FY 2019.

### Performance Measures

<b>Measure Name</b>	<b>FY 2015 Actual</b>	<b>FY 2016 Actual</b>	<b>FY 2017 Actual</b>	<b>FY 2018 Estimated</b>	<b>FY 2019 Projected</b>
<b>Resources (input)</b>					
Number of professional staff providing treatment for substance abuse (average per month)	54	58	27	7	7
<b>Workload, Demand and Production (output)</b>					
Number of clients enrolled in outpatient services for substance abuse (average per month)	1,654	1,678	1,081	672	822
Number of cumulative clients enrolled in purchased residential services for substance abuse	256	173	118	0	0
Number of programs monitored by the Health Department to provide mental health services to County residents (average per month)	79	92	101	108	110
Number of clients served in community mental health services (cumulative by month)	33,213	29,144	27,582	25,540	24,000
<b>Efficiency</b>					
Number of clients who transition from a higher level to a lower level of care based on progress in treatment for substance abuse	134	88	42	16	34
<b>Impact (outcome)</b>					
Percent of clients with appropriately documented progress in achieving care, treatment, or service goals.	96%	93%	95%	94%	95%
Percent of mental health clients receiving community-based treatment who were diverted from institutional placement	60%	92%	93%	98%	95%

**Objective 6.2** - Increase the percent of clients receiving Crisis Response System services who divert institutionalized placement.

FY 2023 Target	FY 2016 Actual	FY 2017 Actual	FY 2018 Estimated	FY 2019 Projected	Trend
92%	90%	86%	89%	90%	↔

### Trend and Analysis

The County's Mobile Crisis Services provider has continued to field over 1,200 calls each month. The services are successful in diverting youth from institutional placements close to 90% of the time, with youth reporting that the Crisis Intervention helped to "reduce their crisis level". In FY 2018, the agency established a partnership with the national Crisis Textline and now has a unique identifier (Text: MD to 741741), to facilitate the review of aggregate data on utilization, need and active rescues conducted. This service is available 24/7/365 days per year and is the preferred intervention method for individuals in the 13-25 age group.

### Performance Measures

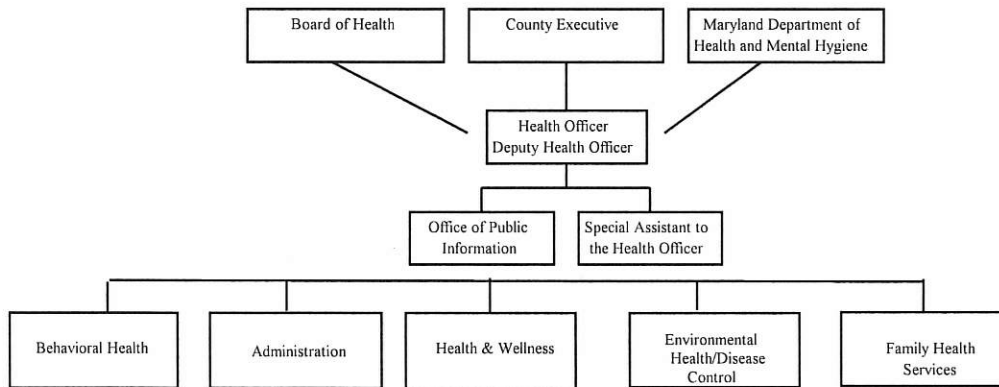
Measure Name	FY 2015 Actual	FY 2016 Actual	FY 2017 Actual	FY 2018 Estimated	FY 2019 Projected
<b>Resources (input)</b>					
Number of Maryland Crisis Hotline (MCH) Specialists	3	3	3	3	3
Number of Crisis Response System (CRS) staff	15	13	13	13	13
<b>Workload, Demand and Production (output)</b>					
Number of calls to the MCH	11,000	13,837	14,713	13,856	14,000
Number of calls answered by MCH	9,000	11,918	14,360	13,580	13,500
Number of calls to the CRS	5,000	4,373	5,112	3,584	3,500
Number of Mobile Crisis Team dispatches	780	1,046	1,047	768	900
<b>Efficiency</b>					
Average number of calls answered per MCH specialist	3,000	4,256	5,190	4,850	4,821
<b>Quality</b>					
Percent of MCH calls answered within 30 seconds	85%	94%	93%	95%	95%
Average response time for CRS Mobile Crisis Team dispatches (in minutes)	60	27	29	29	29
<b>Impact (outcome)</b>					
Percent of youth whose crisis level has been reduced as a result of receiving Maryland Crisis Hotline services	90%	95%	95%	94%	84%
Percent of clients receiving Crisis Response System services who divert institutionalized placement	60%	90%	86%	89%	90%

Prior year actuals restated.

**FY 2018 KEY ACCOMPLISHMENTS**

- Initiated a new program to identify and track food service facility chronic offenders; chronic offenders are those facilities that have been cited for repeated critical violations during the year.
- Awarded \$1.8 million in funding from the State to continue HIV Services within the Health Department when the Ryan White A grant was defunded.
- Instituted a write-off policy and initiated submitting aged receivables to Central Collections Unit (CCU) at State to enhance collections on bad debt accounts.
- Processed 21,531 Maryland Children’s Health Program (MCHP) applications for health insurance; the program has a 97% customer satisfaction rate.
- Launched a 501(c)(3) entity - Healthcare Alliance to enhance care coordination services to increase access to healthcare.

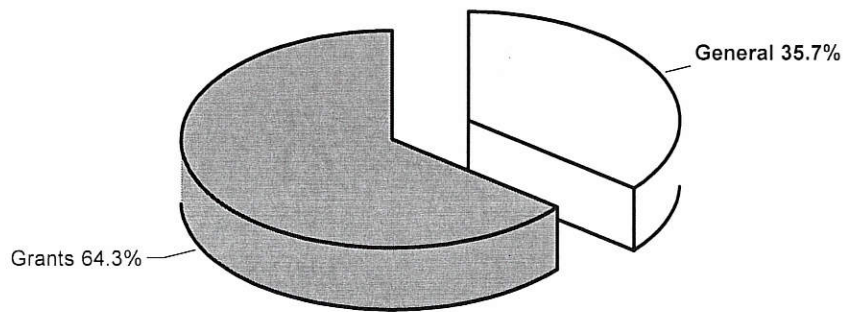
**ORGANIZATIONAL CHART**



	FY2017 ACTUAL	FY2018 BUDGET	FY2018 ESTIMATED	FY2019 APPROVED	CHANGE FY18-FY19
<b>TOTAL EXPENDITURES</b>	\$ 65,039,674	\$ 73,158,000	\$ 71,003,100	\$ 74,277,200	1.5%
<b>EXPENDITURE DETAIL</b>					
Administration	6,329,707	7,446,300	7,551,300	7,656,700	2.8%
Family Health Services	5,390,199	6,294,400	6,100,400	6,552,700	4.1%
Behavioral Health	2,109,142	2,870,700	2,520,200	3,104,000	8.1%
Environmental Health - Disease Control	4,917,074	4,778,700	4,974,100	5,401,600	13%
Health & Wellness	1,515,789	1,783,600	1,666,000	1,790,800	0.4%
Office Of The Health Officer	3,085,301	4,670,700	3,985,500	4,328,400	-7.3%
<b>Grants</b>	<b>43,605,731</b>	<b>47,585,800</b>	<b>46,477,800</b>	<b>47,730,200</b>	<b>0.3%</b>
Recoveries	(1,913,269)	(2,272,200)	(2,272,200)	(2,287,200)	0.7%
<b>TOTAL</b>	<b>\$ 65,039,674</b>	<b>\$ 73,158,000</b>	<b>\$ 71,003,100</b>	<b>\$ 74,277,200</b>	<b>1.5%</b>
<b>SOURCES OF FUNDS</b>					
General Fund	\$ 21,433,943	\$ 25,572,200	\$ 24,525,300	\$ 26,547,000	3.8%
Other County Operating Funds:					
Grants	43,605,731	47,585,800	46,477,800	47,730,200	0.3%
<b>TOTAL</b>	<b>\$ 65,039,674</b>	<b>\$ 73,158,000</b>	<b>\$ 71,003,100</b>	<b>\$ 74,277,200</b>	<b>1.5%</b>

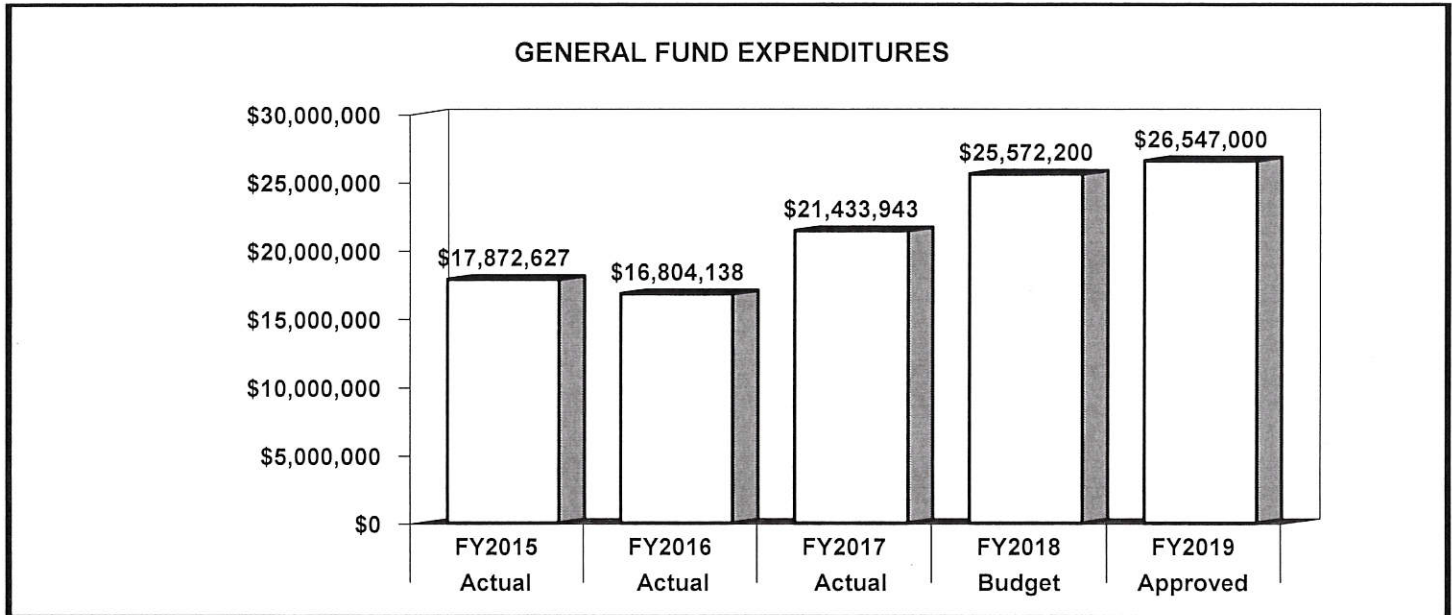
**FY2019 SOURCES OF FUNDS**

This agency is supported by two funding sources: General Fund and Grants. Major grant programs include the General Medical Assistance Transportation, Addictions Treatment Grant, AIDS Case Management, Women, Infants & Children (WIC), and Ryan White.

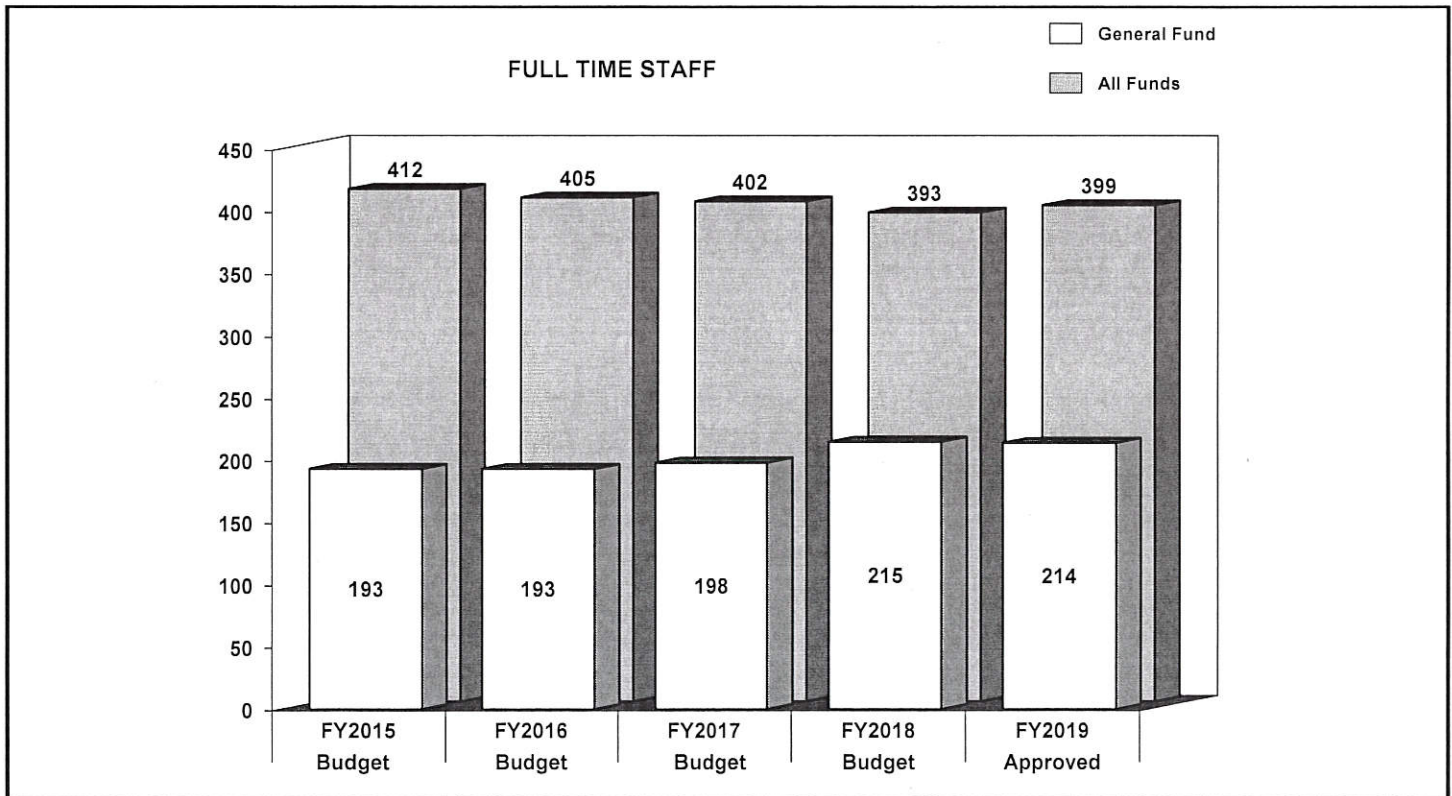


	FY2017 BUDGET	FY2018 BUDGET	FY2019 APPROVED	CHANGE FY18-FY19
<b>GENERAL FUND STAFF</b>				
Full Time - Civilian	198	215	214	(1)
Full Time - Sworn	0	0	0	0
Part Time	0	1	1	0
Limited Term	0	5	0	-5
<b>OTHER STAFF</b>				
Full Time - Civilian	204	178	185	7
Full Time - Sworn	0	0	0	0
Part Time	5	5	3	-2
Limited Term Grant Funded	141	108	109	1
<b>TOTAL</b>				
Full Time - Civilian	402	393	399	6
Full Time - Sworn	0	0	0	0
Part Time	5	6	4	-2
Limited Term	141	113	109	-4

POSITIONS BY CATEGORY	FULL TIME	PART TIME	LIMITED TERM
Program Chiefs	11	0	0
Licensed Practical Nurses	6	0	0
Disease Control Specialists	15	0	0
Environmental Sanitarians	36	0	0
Counselors	43	0	29
Social Workers	7	0	2
Nutritionists	2	0	0
Laboratory Scientists/Dental Asst./X-Ray Technicians	7	0	0
Data Processing, Information Systems	1	0	0
Accounting/Budget Staff	18	1	3
Community Developer	42	1	27
Community Development Asst/Aides	33	0	34
Permit Specialists	1	0	0
Citizen Services Specialists	4	0	0
Clinical Support (Health Aides, Psych Nurse, Driver)	5	0	4
Physician Assistants	3	0	0
Physicians/Dentist (State)	1	0	0
Security Personnel	4	0	2
Directors/Managers	11	0	0
Community Health Nurses	61	2	7
Psychologist	2	0	1
Auditor	1	0	0
Other Staff	85	0	0
<b>TOTAL</b>	<b>399</b>	<b>4</b>	<b>109</b>



The agency's expenditures increased 19.9% from FY 2015 to FY 2017. This increase was primarily driven by compensation changes and operating expenses. The FY 2019 approved budget is 3.8% over the FY 2018 budget due to mandatory salary requirements and increased contractual services.



The agency's General Fund staffing complement increased by 22 positions from FY 2015 to FY 2018. This increase is due to the positions transferred from the Ambulatory Funding grant. The FY 2019 staffing total decreases by one position from the FY 2018 budget due to transfer of one position to the Office of Community Relations.

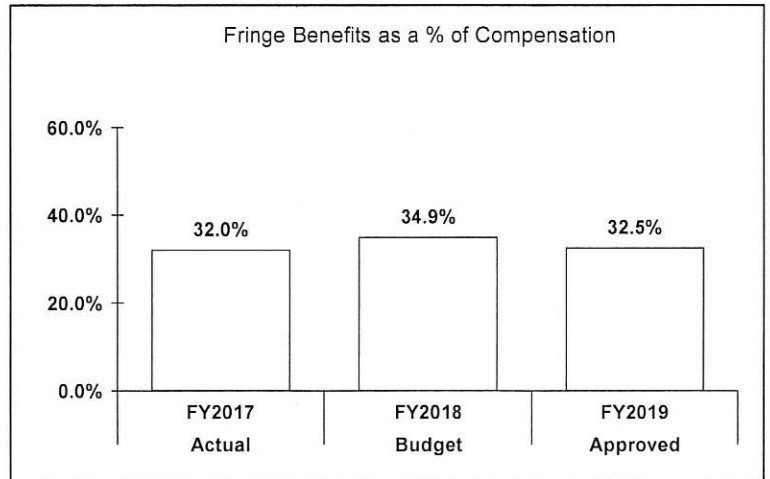
	FY2017 ACTUAL	FY2018 BUDGET	FY2018 ESTIMATED	FY2019 APPROVED	CHANGE FY18-FY19
<b>EXPENDITURE SUMMARY</b>					
Compensation	\$ 13,256,133	\$ 15,730,800	\$ 14,781,200	\$ 16,421,200	4.4%
Fringe Benefits	4,248,205	5,490,000	5,170,000	5,337,100	-2.8%
Operating Expenses	5,842,874	6,623,600	6,846,300	7,075,900	6.8%
Capital Outlay	0	0	0	0	0%
	<b>\$ 23,347,212</b>	<b>\$ 27,844,400</b>	<b>\$ 26,797,500</b>	<b>\$ 28,834,200</b>	<b>3.6%</b>
Recoveries	(1,913,269)	(2,272,200)	(2,272,200)	(2,287,200)	0.7%
<b>TOTAL</b>	<b>\$ 21,433,943</b>	<b>\$ 25,572,200</b>	<b>\$ 24,525,300</b>	<b>\$ 26,547,000</b>	<b>3.8%</b>
<b>STAFF</b>					
Full Time - Civilian	-	215	-	214	-0.5%
Full Time - Sworn	-	0	-	0	0%
Part Time	-	1	-	1	0%
Limited Term	-	5	-	0	-100%

In FY 2019, compensation expenditures increase 4.4% over the FY 2018 budget due to mandated salary requirements for on-board positions. Compensation costs include funding for 214 full-time positions and 1 part-time position. Five limited-term positions have been eliminated for FY 2019. Fringe benefit expenditures decrease 2.8% under the FY 2018 budget to align with anticipated costs.

Operating expenditures increase 6.8% over the FY 2018 budget primarily due to the increase in contractual services including the continuation of the Healthcare Alliance program.

Recoveries increase 0.7% over the FY 2018 budget due to the additional recoveries from the Drug Enforcement and Education Fund.

MAJOR OPERATING EXPENDITURES FY2019	
General and Administrative	\$ 2,357,800
Contracts	
Office Automation	\$ 1,416,600
Operational Contracts	\$ 1,086,000
Utilities	\$ 458,900
Operating and Office Supplies	\$ 421,800



**ADMINISTRATION - 01**

The Division of Administration provides the administrative support structure for the department's public health programs. This unit provides support to 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.

## Division Summary:

In FY 2019, compensation expenditures increase 6.6% over the FY 2018 budget to reflect the additional Administrative Aide position and cost of living and merit adjustments. Fringe benefit expenditures increase 11.4% over the FY 2018 budget due to compensation adjustments.

Operating expenses decrease 2.4% under the FY 2018 budget due to the decrease in office automation charges, office supplies, telephone, memberships and medical contract services.

Recoveries remain the same.

	FY2017 ACTUAL	FY2018 BUDGET	FY2018 ESTIMATED	FY2019 APPROVED	CHANGE FY18-FY19
<b>EXPENDITURE SUMMARY</b>					
Compensation	\$ 2,471,691	\$ 2,664,300	\$ 2,557,200	\$ 2,840,900	6.6%
Fringe Benefits	1,028,518	1,083,600	1,168,500	1,206,600	11.4%
Operating Expenses	2,829,498	3,698,400	3,825,600	3,609,200	-2.4%
Capital Outlay	0	0	0	0	0%
<b>Sub-Total</b>	<b>\$ 6,329,707</b>	<b>\$ 7,446,300</b>	<b>\$ 7,551,300</b>	<b>\$ 7,656,700</b>	<b>2.8%</b>
Recoveries	(1,865,740)	(1,938,000)	(1,938,000)	(1,938,000)	0%
<b>TOTAL</b>	<b>\$ 4,463,967</b>	<b>\$ 5,508,300</b>	<b>\$ 5,613,300</b>	<b>\$ 5,718,700</b>	<b>3.8%</b>
<b>STAFF</b>					
Full Time - Civilian	-	44	-	45	2.3%
Full Time - Sworn	-	0	-	0	0%
Part Time	-	0	-	0	0%
Limited Term	-	0	-	0	0%



**FAMILY HEALTH SERVICES - 02**

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.

## Division Summary:

In FY 2019, compensation expenditures increase 4.0% over the FY 2018 budget due to the addition of an Administrative Assistant position and the cost of living and merit adjustments. Fringe benefit expenditures increase 7.4% over the FY 2018 budget due to compensation adjustments.

Operating expenses decrease 3.2% under the FY 2018 budget due to the reduction in costs for temporary services, medical contract services and staff training.

	FY2017 ACTUAL	FY2018 BUDGET	FY2018 ESTIMATED	FY2019 APPROVED	CHANGE FY18-FY19
<b>EXPENDITURE SUMMARY</b>					
Compensation	\$ 3,700,586	\$ 4,277,900	\$ 4,005,700	\$ 4,450,100	4%
Fringe Benefits	1,243,584	1,420,500	1,478,200	1,525,800	7.4%
Operating Expenses	446,029	596,000	616,500	576,800	-3.2%
Capital Outlay	0	0	0	0	0%
<b>Sub-Total</b>	<b>\$ 5,390,199</b>	<b>\$ 6,294,400</b>	<b>\$ 6,100,400</b>	<b>\$ 6,552,700</b>	<b>4.1%</b>
Recoveries	0	0	0	0	0%
<b>TOTAL</b>	<b>\$ 5,390,199</b>	<b>\$ 6,294,400</b>	<b>\$ 6,100,400</b>	<b>\$ 6,552,700</b>	<b>4.1%</b>
<b>STAFF</b>					
Full Time - Civilian	-	52	-	53	1.9%
Full Time - Sworn	-	0	-	0	0%
Part Time	-	0	-	0	0%
Limited Term	-	0	-	0	0%

**BEHAVIORAL HEALTH - 05**

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, long-term residential rehabilitation and outpatient services for Spanish speaking residents.

Division Summary:

In FY 2019, compensation expenditures increase 2.3% over the FY 2018 budget due to cost of living and merit adjustments. The five limited-term positions were eliminated due to sufficient divisional staffing coverage. Fringe benefit expenditures decrease 32.4% under the FY 2018 budget due to anticipated cost based on actuals.

Operating expenses increase 98.0% over the FY 2018 budget due to additional funding for various general and administrative contracts.

Recoveries increase 25% over the FY 2018 budget due to staff recoveries from Drug Enforcement Education.

	FY2017 ACTUAL	FY2018 BUDGET	FY2018 ESTIMATED	FY2019 APPROVED	CHANGE FY18-FY19
<b>EXPENDITURE SUMMARY</b>					
Compensation	\$ 1,239,088	\$ 1,830,900	\$ 1,685,100	\$ 1,872,100	2.3%
Fringe Benefits	278,199	634,200	415,500	428,900	-32.4%
Operating Expenses	591,855	405,600	419,600	803,000	98%
Capital Outlay	0	0	0	0	0%
<b>Sub-Total</b>	<b>\$ 2,109,142</b>	<b>\$ 2,870,700</b>	<b>\$ 2,520,200</b>	<b>\$ 3,104,000</b>	<b>8.1%</b>
Recoveries	(5,921)	(60,000)	(60,000)	(75,000)	25%
<b>TOTAL</b>	<b>\$ 2,103,221</b>	<b>\$ 2,810,700</b>	<b>\$ 2,460,200</b>	<b>\$ 3,029,000</b>	<b>7.8%</b>
<b>STAFF</b>					
Full Time - Civilian	-	22	-	22	0%
Full Time - Sworn	-	0	-	0	0%
Part Time	-	0	-	0	0%
Limited Term	-	5	-	0	-100%

**ENVIRONMENTAL HEALTH - DISEASE CONTROL - 06**

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.

**Division Summary:**

In FY 2019, compensation expenditures increase 18.1% over the FY 2018 budget due to the addition of two Environmental Specialist positions to support inspection and enforcement activities. Fringe benefit expenditures increase 1.2% over the FY 2018 budget to align with compensation adjustments.

Operating expenses decrease 5.5% under the FY 2018 budget due to the decrease in office supplies, postage, training, and mileage reimbursements.

Recoveries remain unchanged from the FY 2018 level.

	FY2017 ACTUAL	FY2018 BUDGET	FY2018 ESTIMATED	FY2019 APPROVED	CHANGE FY18-FY19
<b>EXPENDITURE SUMMARY</b>					
Compensation	\$ 3,072,192	\$ 3,410,800	\$ 3,625,300	\$ 4,027,500	18.1%
Fringe Benefits	914,845	1,219,900	1,195,700	1,234,300	1.2%
Operating Expenses	930,037	148,000	153,100	139,800	-5.5%
Capital Outlay	0	0	0	0	0%
<b>Sub-Total</b>	<b>\$ 4,917,074</b>	<b>\$ 4,778,700</b>	<b>\$ 4,974,100</b>	<b>\$ 5,401,600</b>	<b>13%</b>
Recoveries	0	(187,200)	(187,200)	(187,200)	0%
<b>TOTAL</b>	<b>\$ 4,917,074</b>	<b>\$ 4,591,500</b>	<b>\$ 4,786,900</b>	<b>\$ 5,214,400</b>	<b>13.6%</b>
<b>STAFF</b>					
Full Time - Civilian	-	54	-	56	3.7%
Full Time - Sworn	-	0	-	0	0%
Part Time	-	0	-	0	0%
Limited Term	-	0	-	0	0%

**HEALTH & WELLNESS - 08**

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.

Division Summary:

In FY 2019, compensation expenditures decrease 2.4% under the FY 2018 budget due to the decrease of a Community Development Assistant position. Fringe benefit expenditures increase 10.5% over the FY 2018 budget due to anticipated costs based on FY 2017 actuals.

Operating expenses decrease 2.6% under the FY 2018 budget due to the decrease in the general and administrative contracts.

	FY2017 ACTUAL	FY2018 BUDGET	FY2018 ESTIMATED	FY2019 APPROVED	CHANGE FY18-FY19
<b>EXPENDITURE SUMMARY</b>					
Compensation	\$ 949,518	\$ 1,240,300	\$ 1,089,800	\$ 1,210,700	-2.4%
Fringe Benefits	329,635	387,900	415,500	428,800	10.5%
Operating Expenses	236,636	155,400	160,700	151,300	-2.6%
Capital Outlay	0	0	0	0	0%
<b>Sub-Total</b>	<b>\$ 1,515,789</b>	<b>\$ 1,783,600</b>	<b>\$ 1,666,000</b>	<b>\$ 1,790,800</b>	<b>0.4%</b>
Recoveries	0	0	0	0	0%
<b>TOTAL</b>	<b>\$ 1,515,789</b>	<b>\$ 1,783,600</b>	<b>\$ 1,666,000</b>	<b>\$ 1,790,800</b>	<b>0.4%</b>
<b>STAFF</b>					
Full Time - Civilian	-	16	-	15	-6.3%
Full Time - Sworn	-	0	-	0	0%
Part Time	-	0	-	0	0%
Limited Term	-	0	-	0	0%

**OFFICE OF THE HEALTH OFFICER - 11**

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. Planning staff also collect, analyze and interpret health-related statistical data to identify populations at risk, establish health priorities and facilitate grant applications to improve 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 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.

**Division Summary:**

In FY 2019, compensation expenditures decrease 12.4% under the FY 2018 budget due to the decrease of four positions. Fringe benefit expenditures decrease 31.1% under the FY 2018 budget as a result of the compensation adjustments.

Operating expenses increase 10.8% under the FY 2018 budget due to the increase in funding for the Health Assurance Program by Council (CB-23-2018).

Recoveries remain unchanged from the FY 2018 level.

	FY2017 ACTUAL	FY2018 BUDGET	FY2018 ESTIMATED	FY2019 APPROVED	CHANGE FY18-FY19
<b>EXPENDITURE SUMMARY</b>					
Compensation	\$ 1,823,058	\$ 2,306,600	\$ 1,818,100	\$ 2,019,900	-12.4%
Fringe Benefits	453,424	743,900	496,600	512,700	-31.1%
Operating Expenses	808,819	1,620,200	1,670,800	1,795,800	10.8%
Capital Outlay	0	0	0	0	0%
<b>Sub-Total</b>	<b>\$ 3,085,301</b>	<b>\$ 4,670,700</b>	<b>\$ 3,985,500</b>	<b>\$ 4,328,400</b>	<b>-7.3%</b>
Recoveries	(41,608)	(87,000)	(87,000)	(87,000)	0%
<b>TOTAL</b>	<b>\$ 3,043,693</b>	<b>\$ 4,583,700</b>	<b>\$ 3,898,500</b>	<b>\$ 4,241,400</b>	<b>-7.5%</b>
<b>STAFF</b>					
Full Time - Civilian	-	27	-	23	-14.8%
Full Time - Sworn	-	0	-	0	0%
Part Time	-	1	-	1	0%
Limited Term	-	0	-	0	0%

	FY 2017 ACTUAL	FY 2018 BUDGET	FY 2018 ESTIMATED	FY 2019 APPROVED	CHANGE FY18-FY19
<b>EXPENDITURE SUMMARY</b>					
Compensation	\$ 15,098,856	\$ 16,314,500	\$ 17,569,400	\$ 17,951,200	10.0%
Fringe Benefits	4,318,097	4,888,400	5,019,700	5,328,500	9.0%
Operating Expenses	24,292,845	26,487,900	23,993,700	24,872,800	-6.1%
Capital Outlay		-	-	-	0.0%
<b>TOTAL</b>	<b>\$ 43,709,798</b>	<b>\$ 47,690,800</b>	<b>\$ 46,582,800</b>	<b>\$ 48,152,500</b>	<b>1.0%</b>

The FY 2019 approved budget is \$48,152,500, an increase of \$461,700 or 1.0% from the FY 2018 budget. This increase is largely driven by the addition of several programs including Smart Reentry OJP, Opioid Operation Command, HIV Testing in Behavioral Health, Maryland Crisis Hotline, Personal Responsibility Education, and Women, Infants, & Children (WIC) and the enhancement of existing programs/services including Ryan White Part A, STD Caseworker, Federal Block Grant, MCHP Eligibility Determination PWC, Addictions Treatment, Bridges to Success, Core Services Administrative Grant, and Ryan White Part B. Reduced funding is anticipated for HIV Prevention Services, Oral Disease and Injury Prevention, TB Refugee, Integration of Sexual Health, TB Control Cooperative Agreement, Administrative Care Coordination Grant Expansion, General Medical Assistance Transportation, Project Launch, & Ryan White Title 1/Part A and lastly, the expiration of KIDZ Healthy Revolution Grant.

STAFF SUMMARY BY DIVISION & GRANT PROGRAM	FY 2018			FY 2019		
	FT	PT	LTGF	FT	PT	LTGF
<b><u>Behavioral Health Services</u></b>						
Addictions Treatment Grant	16	1	7	16	1	5
Administrative / LAA	2	0	1	2	0	1
Ambulatory Funding	2	0	0	0	0	0
Bridges 2 Success	1	0	4	1	0	4
Children in the Need of Assistance- Senate Bill 512	0	0	1	0	0	0
Core Services Administrative Grant	6	0	2	6	0	2
Crownsville Project	0	0	1	0	0	1
Drug and Alcohol Prevention	2	0	0	2	0	0
Drug Court Services	1	0	0	1	0	0
Federal Fund Treatment Grant	2	0	1	2	0	1
HIV Testing in Behavioral Health Services - NEW in FY 18				1	0	0
Integration of Child Welfare Funds-House Bill 7	1	0	0	1	0	0
Integration of Sexual Health in Recovery	1	0	0	0	0	0
Mental Health Services Grant	1	0	1	1	0	1
Offender ReEntry Grant (BGCORP)	0	0	6	0	0	7
Project Launch	0	0	2	0	0	0
Project Safety Net	6	0	9	6	0	9
Recovery Support Services	2	0	10	2	0	10
Temporary Cash Assistance	3	0	2	3	0	3
Smart ReEntry - OJP	0	0	5	0	0	5
Substance Abuse Treatment Outcome Partnership (STOP)	6	0	2	6	0	2
Tobacco Enforcement Initiative	0	0	1	0	0	2
Tobacco Implementation Grant	0	0	1	1	0	0
<b>Sub-Total</b>	<b>52</b>	<b>1</b>	<b>56</b>	<b>51</b>	<b>1</b>	<b>53</b>
<b><u>Environmental Health and Disease Control</u></b>						
Cities Readiness Initiatives (CRI)	1	0	0	1	0	0
Hepatitis B Prevention	1	0	0	1	0	0
Public Health Emergency Preparedness (PHEP)	3	0	0	3	0	0
<b>Sub-Total</b>	<b>5</b>	<b>0</b>	<b>0</b>	<b>5</b>	<b>0</b>	<b>0</b>
<b><u>Family Health Services</u></b>						
AIDS Case Management	0	0	0	13	0	4
Babies Born Healthy	1	0	1	0	0	2
Dental Sealant D Driver Van	0	0	2	2	0	1
Healthy Teens and Young Adult	5	0	0	5	0	0
High Risk Infant (Infants At Risk)	1	0	0	1	0	0
HIV Prevention Services	5	1	3	3	1	4
Immunization Action Grant	1	0	0	1	0	0
Reproductive Health	5	1	0	4	0	1
Ryan White Title I / Part A	15	0	5	0	0	1
Ryan White Part B	14	0	3	15	0	2
STD Caseworker	6	0	6	10	0	6
Surveillance and Quality Improvement	1	0	1	1	0	0
TB Control	2	0	0	1	0	0
TB Refugee	4	0	1	5	0	0
WIC Breastfeeding Peer Counseling	0	0	4	0	0	4
Women, Infants & Children (WIC)	18	0	9	19	0	9
<b>Sub-Total</b>	<b>78</b>	<b>2</b>	<b>35</b>	<b>80</b>	<b>1</b>	<b>34</b>

STAFF SUMMARY BY DIVISION & GRANT PROGRAM	FY 2018			FY 2019		
	FT	PT	LTGF	FT	PT	LTGF
<b><u>Health and Wellness</u></b>						
Administrative Care Coordination	12	0	1	12	0	1
Geriatric Evaluation and Review Services (STEPS/AERS)	5	0	0	6	0	1
MCHP Eligibility Determination - PWC	14	2	6	18	1	8
General Medical Assistance Transportation	9	0	7	10	0	9
<b>Sub-Total</b>	<b>40</b>	<b>2</b>	<b>14</b>	<b>46</b>	<b>1</b>	<b>19</b>
<b><u>Office of the Health Officer</u></b>						
Ryan White Part A and MAI	0	0	0	3	0	3
<b>Sub-Total</b>	<b>3</b>	<b>0</b>	<b>3</b>	<b>3</b>	<b>0</b>	<b>3</b>
<b>TOTAL</b>	<b>178</b>	<b>5</b>	<b>108</b>	<b>185</b>	<b>3</b>	<b>109</b>

In FY 2019, funding is provided for 185 full-time, 3 part-time and 109 limited term grant funded (LTGF) positions.

#### Behavioral Health Division

Full-time and LTGF staffing levels are decreasing overall by four positions primarily related to the reduction in the Addictions Treatment Grant program and Ambulatory Services Grant which expired 12/31/2017.

#### Environmental Health and Disease Control Division

Staffing total remains unchanged from the FY 2018 level.

#### Family Health Division

Staffing total remains unchanged from the FY 2018 level.

#### Health and Wellness Division

Full-time and LTGF staffing levels are increasing overall by 10 positions primarily related to the General Medical Assistance Transportation, Geriatric Evaluation and Review Services, and MCHP Eligibility Determination - PWC program.

#### Office of the Health Officer

Staffing total remains unchanged from the FY 2018 level.



# HEALTH DEPARTMENT - 170

# GRANTS

GRANTS BY DIVISION	FY 2017 ACTUAL	FY 2018 APPROVED	FY 2018 ESTIMATED	FY 2019 APPROVED	\$ CHANGE FY18 - FY19	% CHANGE FY18- FY19
<b><u>Division of Behavioral Health Services</u></b>						
Addictions Treatment Grant	\$ 2,871,088	\$ 3,023,200	\$ 3,023,200	\$ 3,055,500	\$ 32,300	1.1%
Administrative/LAA	247,555	327,000	327,000	327,100	100	0.0%
Ambulatory Funding	2,121,109	-	-	-	-	0.0%
Bridges 2 Success	329,974	350,000	462,400	462,400	112,400	32.1%
CLIG -State Funds	437,046	-	-	-	-	0.0%
Continuum of Care	618,443	627,600	627,600	627,700	100	0.0%
Core Services Administrative Grant	761,598	790,100	790,100	790,100	-	0.0%
Crownsville Project	66,222	74,300	74,300	74,400	100	0.1%
Drug and Alcohol Prevention	28,234	-	-	-	-	0.0%
Drug Court Services	112,389	131,600	131,600	131,700	100	0.1%
Federal Block Grant	1,241,990	1,138,300	1,338,300	1,338,400	200,100	17.6%
Federal Fund Treatment Grant	762,019	1,158,600	1,158,600	1,158,600	-	0.0%
High Intensity Drug Area (HIDTA)	126,470	136,000	103,000	103,000	(33,000)	-24.3%
HIV Testing in Behavioral Health	-	-	102,600	102,600	102,600	100.0%
House Bill 7 - Integration of Child Welfare Funds	70,808	71,000	71,000	71,000	-	0.0%
Integration of Sexual Health in Recovery	205,798	216,500	113,900	216,500	-	0.0%
Maryland Crisis Hotline	-	-	89,800	164,900	164,900	100.0%
Maryland Opioid Rapid Response	-	-	50,100	50,200	50,200	100.0%
Mental Health Services Grant	1,562,114	1,758,400	1,760,700	1,595,900	(162,500)	-9.2%
Offender Reentry Prog. (PGCORP)	258,943	399,800	399,800	134,400	(265,400)	-66.4%
Opioid Operation Command			189,700	189,700	189,700	0.0%
Overdose Education and Naloxone Distribution Program	13,170	15,600	-	-	(15,600)	-100.0%
Path Program	106,652	106,700	106,700	106,700	-	0.0%
Prevention Services	493,719	502,700	502,700	502,800	100	0.0%
Project Launch	605,019	664,100	157,800	-	(664,100)	-100.0%
Prince George's County Drug Grant (Project Safety Net)	898,338	1,214,700	1,214,600	1,214,700	-	0.0%
Recovery Support Services	732,825	914,400	914,400	914,400	-	0.0%
Safe Neighborhoods	302,343	-	-	-	-	0.0%
Senate Bill 512 Children In Need of Assistance	36,138	60,000	60,000	60,000	-	0.0%
Smart Reentry - OJP	-	-	997,300	997,400	997,400	100.0%
Substance Abuse Treatment Outcomes Partnership (STOP)	695,740	644,600	644,600	762,500	117,900	18.3%
Temporary Cash Assistance	381,844	455,900	455,900	455,900	-	0.0%
Tobacco Administration	20,542	20,500	19,800	19,800	(700)	-3.4%
Tobacco Cessation	165,813	152,400	166,100	198,800	46,400	30.4%
Tobacco Control Community	82,424	102,800	102,900	102,900	100	0.1%
Tobacco Enforcement	7,929	13,000	-	-	(13,000)	-100.0%
Tobacco School Based	13,271	13,300	13,300	13,300	-	0.0%
Tobacco Enforcement Initiative	120,859	125,000	125,000	125,000	-	0.0%
Wrap Around Prince George's (System of Care) Implementation	713,599	998,800	997,100	997,200	(1,600)	-0.2%
<b>Sub-Total</b>	<b>\$ 17,212,025</b>	<b>\$ 16,206,900</b>	<b>\$ 17,291,900</b>	<b>\$ 17,065,500</b>	<b>\$ 858,600</b>	<b>5.3%</b>
<b><u>Division of Environmental Health and Disease Control</u></b>						
Bay Restoration (Septic) Fund	\$ 93,462	\$ 265,000	\$ 109,000	265,000	\$ -	0.0%
Cities Readiness Initiative (CRI)	119,533	144,900	144,900	144,900	-	0.0%
Hepatitis B Prevention	66,315	68,500	68,500	70,900	2,400	3.5%
Lead Paint Poisoning Program	52,995	53,200	53,200	61,000	7,800	14.7%
Public Health Emergency Preparedness (PHEP)	447,402	593,100	593,100	609,400	16,300	2.7%
PHEP Ebola	6,814	-	-	-	-	0.0%
PHEP Ebola Supplement (Zika #1)	-	-	-	-	-	0.0%
PHEP Zika Supplement	12,909	15,000	-	-	(15,000)	100.0%
<b>Sub-Total</b>	<b>\$ 799,430</b>	<b>\$ 1,139,700</b>	<b>\$ 968,700</b>	<b>\$ 1,151,200</b>	<b>\$ 11,500</b>	<b>1.0%</b>

# HEALTH DEPARTMENT - 170

# GRANTS

GRANTS BY DIVISION	FY 2017 ACTUAL	FY 2018 APPROVED	FY 2018 ESTIMATED	FY 2019 APPROVED	\$ CHANGE FY18 - FY19	% CHANGE FY18 - FY19
<b><u>Division of Family Health Services</u></b>						
AIDS Case Management	\$ 237,353	\$ 3,000,000	\$ 2,995,200	\$ 3,000,000	\$ -	0.0%
Babies Born Healthy	128,551	129,500	129,500	129,500	-	0.0%
Dental Sealant D Driver Van	152,869	215,000	180,000	270,000	55,000	25.6%
Healthy Teens/Young Adults	504,075	559,500	549,500	527,000	(32,500)	-5.8%
High Risk Infant (Infants at Risk)	116,235	117,700	117,600	117,700	-	0.0%
HIV Prevention Services	834,370	1,000,000	945,000	945,000	(55,000)	-5.5%
Immunization Action Grant	263,496	290,000	227,900	280,000	(10,000)	-3.4%
Infant and Toddlers	86,836	-	-	-	-	0.0%
Oral Disease and Injury Prevention	37,295	150,000	40,000	50,000	(100,000)	-66.7%
Oral Health Clinical Care	40,275	43,000	-	50,000	7,000	16.3%
Partnership for Care	335	-	-	-	-	0.0%
Personal Responsibility Education	(7)	-	75,000	75,000	75,000	100.0%
Recovery Housing for Women	703	-	-	-	-	0.0%
Reproductive Health	509,459	518,000	454,300	530,000	12,000	2.3%
Ryan White Title I/Part A & MAI	884,740	2,000,000	826,800	248,300	(1,751,700)	-87.6%
Ryan White Part B	1,925,005	2,200,000	2,148,300	2,267,100	67,100	3.1%
School Based Wellness Center	850,000	850,000	850,000	850,000	-	0.0%
School Based Wellness - MSDE	402,900	406,000	405,900	406,000	-	0.0%
STD Caseworker	896,348	980,000	1,352,100	1,350,000	370,000	37.8%
Surveillance and Quality Improvement	132,134	142,600	152,600	153,000	10,400	7.3%
Syringe Exchange				49,000		
TB Control Cooperative Agreement	208,559	350,000	208,600	225,000	(125,000)	-35.7%
TB Refugee	523,332	700,000	606,900	600,000	(100,000)	-14.3%
WIC Breastfeeding Peer Counseling	191,332	246,000	245,000	250,000	4,000	1.6%
Women, Infants and Children (WIC)	2,177,203	2,430,000	2,489,400	2,465,000	35,000	1.4%
<b>Sub-Total</b>	<b>\$ 11,103,398</b>	<b>\$ 16,327,300</b>	<b>\$ 14,999,600</b>	<b>\$ 14,837,600</b>	<b>\$ (1,538,700)</b>	<b>-9.4%</b>
<b><u>Division of Health and Wellness</u></b>						
Administrative Care Coordination Grant-Expansion	\$ 1,172,226	\$ 1,456,300	\$ 1,182,300	\$ 1,285,400	\$ (170,900)	-11.7%
CDC Breast and Cervical Cancer Program	250	-	-	-	-	0.0%
Cancer Prevention, Education, and Screening	1,237	-	-	-	-	0.0%
Cancer Diagnosis and Treatment	574	-	-	-	-	0.0%
Cities Readiness Initiatives	-	-	-	-	-	0.0%
General Medical Assistance Transportation	3,290,600	4,184,800	3,780,800	3,825,600	(359,200)	-8.6%
Geriatric Evaluation and Review Services (Revenue)	796,434	879,300	879,300	907,600	28,300	3.2%
Geriatric Evaluation and Review Services (Grant)	-	10,400	10,400	10,400	-	100.0%
KIDZ Healthy Revolution Grant	31,448	100,000	100,000	-	(100,000)	-100.0%
Komen National Vulnerable Population Grant	-	-	-	-	-	0.0%
Laurel Beltsville Oasis	(137)	-	-	-	-	0.0%
MCHP Eligibility Determination-PWC	1,864,584	1,962,800	1,946,500	2,118,500	155,700	7.9%
<b>Sub-Total</b>	<b>\$ 7,157,216</b>	<b>\$ 8,593,600</b>	<b>\$ 7,899,300</b>	<b>\$ 8,147,500</b>	<b>\$ (446,100)</b>	<b>-5.2%</b>

GRANTS BY DIVISION	FY 2017 ACTUAL	FY 2018 APPROVED	FY 2018 ESTIMATED	FY 2019 APPROVED	\$ CHANGE FY18 - FY19	% CHANGE FY18 - FY19
<b>Office of the Health Officer</b>						
Health Enterprise Zone (HEZ)	\$ 566,217	\$ -	\$ -	\$ -	\$ -	0.0%
Ryan White HIV/AIDS Treatment Modernization Act- Part A & Minority AIDS Initiative	6,767,445	5,318,300	5,318,300	6,211,100	892,800	16.8%
Assistance in Community Integration Services (ACIS)				317,300		
<b>Sub-Total</b>	<b>\$ 7,333,662</b>	<b>\$ 5,318,300</b>	<b>\$ 5,318,300</b>	<b>\$ 6,528,400</b>	<b>\$ 892,800</b>	<b>16.8%</b>
<b>HD Total Grants - Outside Sources</b>	<b>\$ 43,605,731</b>	<b>\$ 47,585,800</b>	<b>\$ 46,477,800</b>	<b>\$ 47,730,200</b>	<b>\$ 144,400</b>	<b>0.3%</b>
<b>Total Transfer from General Fund - (County Contribution/Cash Match)</b>	<b>\$ 104,067</b>	<b>\$ 105,000</b>	<b>\$ 105,000</b>	<b>\$ 422,300</b>	<b>\$ 317,300</b>	<b>302.2%</b>
<b>Total Grant Expenditures</b>	<b>\$ 43,709,798</b>	<b>\$ 47,690,800</b>	<b>\$ 46,582,800</b>	<b>\$ 48,152,500</b>	<b>\$ 461,700</b>	<b>1.0%</b>

### DIVISION OF BEHAVIORAL HEALTH SERVICES -- \$17,065,500

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 program 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 post-partum 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 -- \$1,151,200

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 man-made 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 FAMILY HEALTH -- \$14,837,600

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. The 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. The Tuberculosis (TB) Refugee grant provides for TB screening and various evaluations for refugees.

### DIVISION OF HEALTH AND WELLNESS -- \$8,147,500

Grant funding supports prevention and/or mitigation of heart disease and diabetes through the use of community screens, referral services and interventions to assist individuals with lifestyle decisions/changes. Medical Assistance grants provide personal care and case management to frail

elderly individuals with chronic diseases or developmentally disabled persons and 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 -- \$6,528,400**

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 the awarding of grant monies, processing contracts, and monitoring services provided. Grant funding is used for comprehensive care services to HIV patients eligible for services under the Ryan White grant.