

Health Department - Fiscal Year 2022 Budget Review Summary

Proposed FY 2022 Operating Budget

Expenditures by Fund Type

Fund	FY 2020 Approved	FY 2020 Actual	FY 2021 Approved	FY 2021 Estimated (CB-24-2021)	FY 2022 Proposed	\$ Change	% Change
General Fund	\$ 26,366,900	\$ 26,366,900	\$ 28,798,300	\$ 41,189,700	\$ 30,142,500	\$ 1,344,200	4.7%
Grants	67,105,600	32,347,430	70,471,100	79,643,500	58,177,500	\$ (12,293,600)	-17.4%
Total	\$ 93,472,500	\$ 58,714,330	\$ 99,269,400	\$ 120,833,200	\$ 88,320,000	\$ (10,949,400)	-11.0%

General Fund	FY 2020 Approved	FY 2020 Actual	FY 2021 Approved	FY 2021 Estimated (CB-24-2021)	FY 2022 Proposed	Change Amount	% Change
Compensation	\$ 15,944,500	\$ 16,946,024	\$ 16,034,200	\$ 15,144,200	\$ 17,309,000	\$ 1,274,800	8.0%
Fringe Benefits	5,548,700	5,575,182	5,724,300	5,414,300	5,885,100	\$ 160,800	2.8%
Operating Expenses	7,260,200	5,645,445	9,519,900	23,111,300	9,628,900	\$ 109,000	1.1%
Capital Outlay	-	1,333	-	-	-	\$ -	
Recoveries	(2,386,500)	(1,801,084)	(2,480,100)	(2,480,100)	(2,680,500)	\$ (200,400)	8.1%
Total	\$ 26,366,900	\$ 26,366,900	\$ 28,798,300	\$ 41,189,700	\$ 30,142,500	\$ 1,344,200	4.7%

Grant Funds	FY 2020 Approved	FY 2020 Actual	FY 2021 Approved	FY 2021 Estimated	FY 2022 Proposed	Change Amount	% Change
Compensation	\$ 17,444,500	\$ 13,886,216	\$ 22,055,300	\$ 18,541,800	\$ 19,758,700	\$ (2,296,600)	-10.4%
Fringe Benefits	4,354,900	3,940,610	5,513,800	5,526,400	3,062,600	\$ (2,451,200)	-44.5%
Operating Expenses	45,411,200	14,635,360	43,324,300	55,997,800	35,778,700	\$ (7,545,600)	-17.4%
Total	\$ 67,210,600	\$ 32,462,186	\$ 70,893,400	\$ 80,066,000	\$ 58,600,000	\$ (12,293,400)	-17.3%

Staffing

Fund	FY 2020 Authorized	FY 2021 Authorized	FY 2021 Actual	FY 2022 Proposed	Change	% Change	Vacancy Rate
General Fund	218	218	190	228	10	4.6%	12.8%
Grants	306	314	254	328	14	4.5%	19.1%
Total	524	532	444	556	24	4.5%	16.5%

FY 2022 Proposed Budget – Key Highlights

- In FY 2021 the Department is requesting a supplemental budget in the amount of \$12,391,400 for the General Fund and \$41,968,900 for Grant Funds. The supplemental requests are driven by the ongoing demands associated with responding to the pandemic. Unanticipated grant awards, which require a supplemental budget request, will be partially offset by grant funds, which were budgeted but not received in FY 2021.
- The proposed budget is 66% grant funded and 34% funded via the General Fund.
- The proposed budget represents a net 11% reduction from FY 2022 Approved Budget, or 27% reduction from FY 2022 estimated level of expenditures.
 - Grant funded portion of the Proposed Budget includes a \$12.3 million, or 17.4%, reduction from FY 2021 approved budget level, or \$21.5 million, or 26.8% reduction from FY 2021 estimated level of grant expenditures. Key changes in Grant Funds include:
 - Approximately \$26.8 million in grant funded service reductions:
 - \$11.8 million in eliminated programs/services
 - \$10.5 million in reduction of program/services
 - \$4.5 million in removal of prior appropriations

- These budget cuts are being partially offset by:
 - \$12.2 million in new grants and \$2.5 million in enhanced funding for existing programs/services
- General Fund portion of the Proposed Budget includes \$1.3 million increase, or 4.7%, increase above the FY 2021 approved budget level, or an \$11.0 million, or 26.8%, reduction below the FY 2021 estimated level of expenditures.
 - Key changes in in General Fund portion of the budget include increased compensation due to funding for vacant positions and new critical positions (\$1.2 million) and reduced operating costs (\$336,600).
- General Fund authorized positions are proposed to increase by ten (10) in FY 2022 for a total of 228 positions. Grant Funded positions are proposed to increase by 14 for a total of 328 positions. The Department’s total authorized proposed staffing complement for FY 2022 is 556 positions (General Fund and Grant Funded positions).
- As of February 26, 2021, FY 2021 vacancy rate (General Fund and Grant Funds combined) was reported at 16.5% (including 13% General Fund full-time vacancy rate, 12% Grant Funded full-time vacancy rate, and 27% limited term Grant Funded vacancy rate).
- The Department is leading the COVID-19 response efforts. A range of operational modifications had to be implemented to ensure continuity of services when possible, comply with the new safety guidelines and lead the County’s pandemic response efforts including testing, contact tracing and mass vaccination. The Department had to address an array of internal capacity issues in order to effectively coordinate its response to the pandemic, most notable challenges have been staffing limitations and insufficient information technology infrastructure.

Proposed FY 2022 -FY 2027 Capital Improvement Program

	Expended thru FY20	FY 2021 Estimate	FY 2022	FY 2023	FY 2024	FY 2025	FY 2026	FY 2027	Beyond	Total Proposed CIP Funding
4 Projects	\$23,195,000	\$35,570,000	\$25,500,000	\$1,475,000	\$760,000	\$720,000	\$680,000	\$500,000	\$500,000	\$ 88,900,000

Highlights

- Funded by General Obligation Bonds (21.6%) and Other (78.4%)
- Key Projects: Clinical Health Facility (to be completed in FY 2023), Health Facilities Renovations (ongoing), Regional Health and Human Services Center (to be completed in FY 2022), Residential Treatment Facility (no completion or start date identified)



THE PRINCE GEORGE'S COUNTY GOVERNMENT

Office of Audits and Investigations

April 19, 2021

MEMORANDUM

TO: Calvin S. Hawkins II, Chair

THRU: David H. Van Dyke, County Auditor *DHV*

FROM: Anya Makarova, Senior Budget and Policy Analyst *AM*

RE: Health Department
Fiscal Year 2022 Budget Review

Budget Overview

- In FY 2021 the Department is requesting a supplemental budget in the amount of \$12,391,400 for the General Fund and \$41,968,900 for Grant Funds. The supplemental requests are driven by the ongoing demands associated with responding to the pandemic, including funds for continued testing, contact tracing and to fund mass vaccination initiative during second half of FY 2021. Unanticipated grant awards, which require a supplemental budget request, will be partially offset by grant funds which were budgeted but not received in FY 2021.
- The FY 2022 Proposed Budget for the Health Department is \$88,320,000, representing a \$10,949,400 decrease, or 11.0%, below the FY 2021 Approved Budget.
- Decreases in the FY 2022 Proposed Budget are driven by a \$12.3 million (17.4%) reduction in grant funds, which is partially offset by \$ 1.3 million increase in General Fund's compensation, fringe and operating expenditures, resulting in a net \$11.0 million (11.0%) decline in the total proposed budget when comparing to the FY 2021 authorized budget level.
- Representing \$58.2 million out of the total proposed budget of \$88.3 million, 66% of the Health Department's budget is anticipated to be grant funded.
- Actual Fiscal Year 2020 to Proposed Fiscal Year 2022:

Fund	FY 2020 Actual	FY 2021 Approved	FY 2021 Estimated (CB-24- 2021)	% Change - Est vs App	FY 2022 Proposed	\$ Change, Prop vs App	% Change
General Fund	\$ 26,366,900	\$ 28,798,300	\$ 41,189,700	43.0%	\$ 30,142,500	\$ 1,344,200	4.7%
Grants	32,347,430	70,471,100	79,643,500	13.0%	58,177,500	(12,293,600)	-17.4%
Total	\$ 58,714,330	\$ 99,269,400	\$ 120,833,200	21.7%	\$ 88,320,000	\$ (10,949,400)	-11.0%

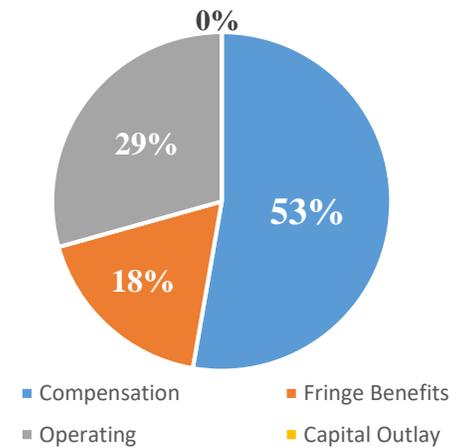
- \$14.6 million dollars in General Fund revenues are being allocated to support the Health Department’s operations, these revenues include: \$4.7 million in health fees, \$3.0 million in health permits charges, and \$6.9 million in State Health Grant.

Budget Comparison – General Fund

Category	FY 20 Actual	FY 21 Approved	FY 21 Estimated (CB-24-2021)	FY 22 Proposed	Change Amount	Percentage Change (Approved Budget)	Percentage Change (Estimated Budget)
Compensation	\$ 16,946,024	\$ 16,034,200	\$ 15,144,200	\$ 17,309,000	\$ 1,274,800	8.0%	14.3%
Fringe Benefits	5,575,182	5,724,300	5,414,300	5,885,100	160,800	2.8%	8.7%
Operating Expenses	5,645,445	9,519,900	23,111,300	9,628,900	109,000	1.1%	-58.3%
Capital Outlay	1,333	-	-	-	-	n/a	n/a
Subtotal	\$ 28,167,984	\$ 31,278,400	\$ 43,669,800	\$ 32,823,000	\$ 1,544,600	4.9%	-24.8%
Recoveries	(1,801,084)	(2,480,100)	(2,480,100)	(2,680,500)	(200,400)	8.1%	8.1%
Total	\$ 26,366,900	\$ 28,798,300	\$ 41,189,700	\$ 30,142,500	\$ 1,344,200	4.7%	-26.8%

- Not accounting for the recoveries, the Department’s General Fund proposed budget is comprised of 53% of funds allocated for compensation, 18% allocated for fringe expenditures and the remaining 29% allocated for operational expenses.

FY 2022 Proposed General Fund Expenditures by Category



Compensation

- In FY 2022, General Fund compensation expenditures are budgeted to increase by \$1,274,800, or 8.0%, above the FY 2021 Approved Budget (or 14.3% above the FY 2021 estimated level of expenditures). The increases are driven by funding for ten new positions, reduction in budgeted incumbent attrition as well as salary lapse for vacant positions.
- In FY 2022 the authorized General Fund staff complement is proposed to increase by ten full-time positions. In FY 2022 part-time positions will remain at FY 2021 authorized level of one (1) position.

General Fund Authorized Staffing Count

	FY 2021 Approved	FY 2022 Proposed	Change Amount	Percentage Change
Full-Time Civilian	217	227	10	4.6%
Total	217	227	10	4.6%

Fringe Benefits

Fringe Benefits Historical Trend				
	FY 2020 Actual	FY 2021 Budget	FY 2021 Estimated	FY 2022 Proposed
Compensation	\$ 16,946,024	\$ 16,034,200	\$ 15,092,200	\$ 17,309,000
Fringe Benefits Expenditures	\$ 5,575,182	\$ 5,724,300	\$ 5,387,900	\$ 5,885,100
As a % of Compensation	24.8%	26.3%	26.3%	25.4%

- In FY 2022 fringe benefits expenditures are proposed to increase by \$160,800, or 2.8%, above the FY 2021 Approved Budget level (or 8.7% above the FY 2021 estimated level of expenditures).

Operating Expenses

- In FY 2021 the Department is expected to spend \$23.1 million dollars in operating expenses, exceeding the FY 2021 approved budget level of \$9.5 million by approximately \$13.6 million. The increased level of operating expenditures is attributed to the COVID-19 response efforts.
- FY 2022 General Fund operating expenditures are proposed to increase by \$109,000, or 1.1%, above the FY 2021 Approved Budget level, or 58.3% decrease from the FY 2021 estimated level of expenditures. Increases are driven by technology cost allocation charges, operating equipment, fleet vehicle maintenance, memberships fee and mileage.
- A comprehensive list of proposed operating expenses is provided in response to the *FY 2022 First Round Budget Review Question No. 23*. The largest increase (\$327,700, or 7.4%) is proposed for the Office Automation category to reflect the cost of Office of Information Technology charges. Categories with the greatest proposed spending reductions include:
 - *Interagency charges* category is proposed to decrease by 91.9% or \$113,200.
 - *General and administrative contracts* category is proposed to decrease by 3.8% or \$78,500.
 - *Training* category is proposed to decrease by 60.7% or \$69,700.

Recoveries

- The FY 2022 recoveries are proposed at \$2,680,500, which represents an increase of \$200,400, or 8.1%, above the FY 2021 Approved Budget level of \$2,480,100. Recoveries are proposed to increase to recover various operating expenditures from grant funds.

Grants

Category	FY 2020 Actual	FY 2021 Approved	FY 2021 Estimated	FY 2022 Proposed	Change Amount	Percentage Change
Compensation	\$13,886,216	\$22,055,300	\$18,541,800	\$19,758,700	-\$2,296,600	-10.4%
Fringe Benefits	\$3,940,610	\$5,513,800	\$5,526,400	\$3,062,600	-\$2,451,200	-44.5%
Operating Expenses	\$14,635,360	\$43,324,300	\$55,997,800	\$35,778,700	-\$7,545,600	-17.4%
Capital Outlay	\$0	\$0	\$0	\$0	\$0	N/A
Total	\$32,462,186	\$70,893,400	\$80,066,000	\$58,600,000	-\$12,293,400	-17.3%

- FY 2021 grants:
 - The Department is anticipated to receive \$37,674,600 out of the budgeted \$70,893,400. However, the Department has also received \$41,698,900 in unanticipated grant awards (will require a supplemental budget request).
 - Based on the budgeted grants awarded and unanticipated grants the Department secured, a total of \$79,643,500 in grant funds will be realized in FY 2021, or \$80,066,000 including \$422,500 in County match funds.
- The \$58.6 million in grant funds proposed in FY 2022 represents a 17.3% decrease from the approved FY 2021 level. The decrease is primarily due to the removal of the Oral Health Expansion, PREP Pre-Exposure Prophylaxis, Cancer Program and Population Health programs from the prior year appropriation. The Department will not pursue funding for the High Intensity Drug Trafficking Area, Smart Reentry, Maryland Opioid Rapid Response, CDC HIV Funds, HIV Program, School Based Wellness Center and Syringe Services.
- The FY 2022 proposed \$58.2 million Grant Funds budget represents 65.9% of the Department's overall budget. The proposed budget includes \$422,500 in County contribution/cash match funds, for a total Grant Funds budget of \$58.6 million.
- The \$58.2 million in grant funds proposed in FY 2022 represents a 17.3% decrease from the approved FY 2021 level, or a 27.0% decrease from the FY 2021 estimated level of grant expenditures.
- Out of 78 grant funded programs included in the FY 2022 proposed budget, the following five (5) have the largest budgets:
 - \$4,124,300 is included in the FY 2022 Proposed Budget for the *AIDS Case Management* grant (Family Health Services Division).
 - \$3,000,000 is included in the FY 2022 Proposed Budget for the *HIV Expansion Funds HRSA* program (Family Health Services).
 - \$3,000,000 is included in the FY 2022 Proposed Budget for the *Maternal and Child Health Expansion* (Family Health Services).
 - \$3,000,500 is included in the FY 2022 Proposed Budget for the *Ryan White Part B* (Family Health Services).
 - \$3,759,800 is included in the FY 2022 Proposed Budget for the *General Medical Assistance Transportation* (Health and Wellness Division).
 - *Information about grant funded programs are available on pages 493-498 of the FY 2022 Proposed Budget Book.*

- The FY 2022 budget proposes a Limited Term Grant Funded (LTGF) staff complement of 183 full-time, three (3) part-time and 142 limited term positions. This represents a net increase of 14 positions above the FY 2021 grant funded staffing level. The new positions will support the Behavioral Health Promotion and Prevention and Maternal and Child Health Expansion programs.

Grant Program Funds Authorized Staffing Count

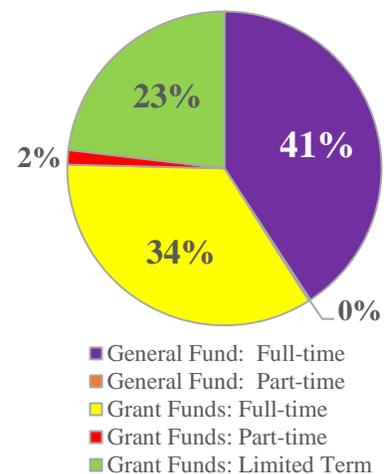
	FY 2021 Approved	FY 2022 Proposed	Change Amount	Percentage Change
Full-Time Civilian	183	183	0	0.0%
Part-Time	8	3	-5	-62.5%
Limited Term	123	142	19	15.4%
Total	314	328	14	4.5%

- The following grant programs provide funding for most of the grant funded positions:
 - *AIDS Case Management* program is authorized 17 full-time grant funded and 10 LTGF positions in FY 2022.
 - *Maternal and Child Health* is authorized 21 LTGF positions in FY 2022.
 - *Women, Infants, and Children (WIC)* is authorized 18 full-time grant funded and 6 LTGF positions in FY 2022.
 - *Addictions Treatment General Grant* program is authorized 19 full-time grant funded and 13 LTGF positions in FY 2022.
 - *MCHP Eligibility Determination* is authorized 18 full-time grant funded, one part-time, and 6 LTGF positions in FY 2022.
 - *Additional details on grant funded staffing allocation are available on pages 489-492 of the FY 2022 Proposed Budget Book.*

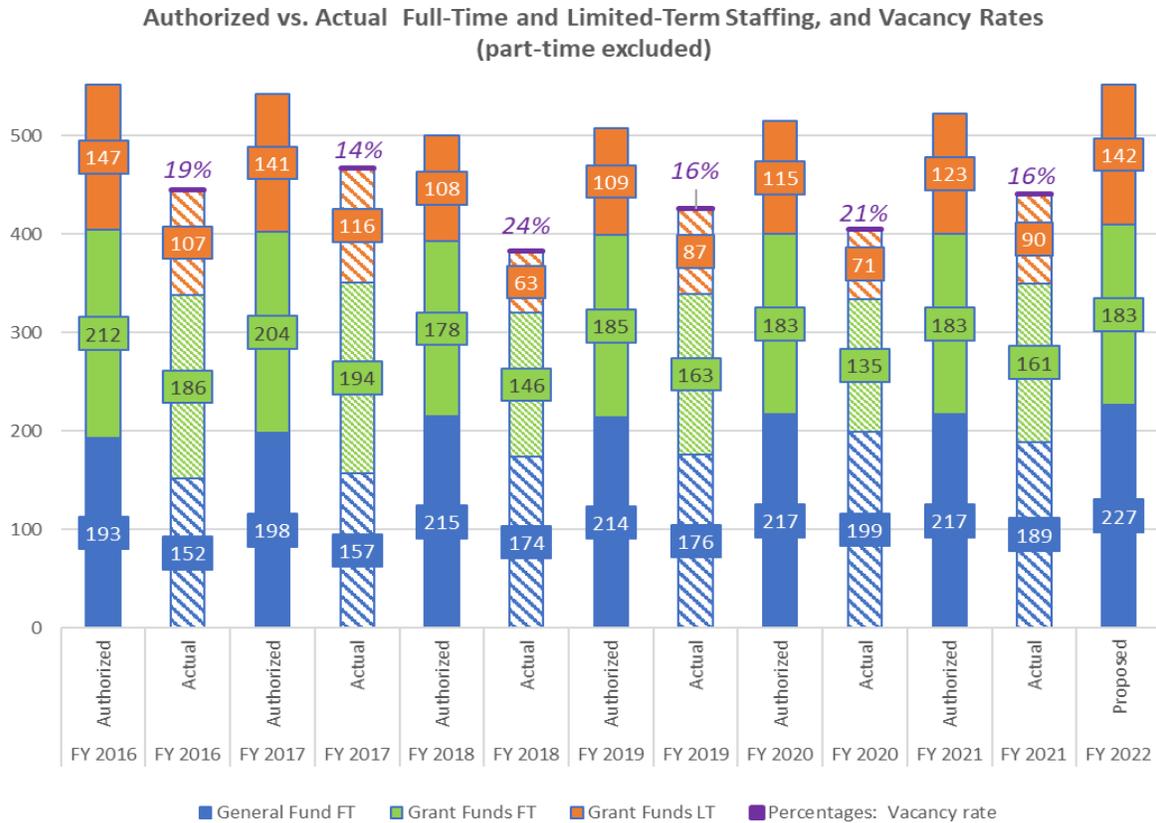
Staffing

- In FY 2021, the Department’s General Fund full-time authorized staffing level is 217 positions and one (1) part-time position. Grant funds provide funding for 183 full-time grant funded, eight (8) part-time grant funded and 123 limited-term positions.
 - In FY 2021, as of February 26, the Department reported having 28 General Fund full-time vacancies, which represents an effective General Funded full-time vacancy rate of 13%.
 - In FY 2021, as of February 26, the Department had 22 Grant Funded vacancies. This represents a full-time Grant Funded vacancy rate of 12%.
 - In FY 2021, as of February 26, the Department had 33 limited term Grant Funded vacancies. This represents a limited term Grant Funded vacancy rate of 27%.

FY 2021 Authorized Staffing by Funding Source



- Over the past years the Department *did not* attain its authorized level for either General Fund or Granted Funded positions and has operated with double digit vacancy rates as can be seen from the accompanying graph:



- The Department uses overtime to augment short staffing levels in critical areas. The use of overtime and compensatory time is used to fulfill the additional tasks and demands of the Department, including specific projects with fixed deadlines and pandemic related activities. In FY 2021 the Department is estimated to spend \$400,000, exceeding its authorized overtime budget of \$57,000 by \$343,000.
- In FY 2022 the Department’s authorized General Fund staffing level is proposed to increase by ten (10) positions, increasing the General Fund full-time complement from 217 to 227 positions. The new positions include three (3) registered nurses to support the Immunization Program; two (2) disease control specialists to support the Communicable Disease Program; one (1) administrative assistant as a safety officer; two (2) system analysts to support the Electronic Health Record System; one (1) system analyst to support the Health Information Technology System and one (1) auditor.
- The Office of Management and Budget (OMB) reports that for the Health Department, both General Fund and Grant funded vacant positions, are not subject to the hiring freeze in FY 2022.
- To meet its workload demands while operating with high vacancy levels and high employee turnover for certain positions, the Department resorts to contracting temporary employees. While use of temporary personnel is a short-term feasible solution to the staffing challenges, temporary employees

are not an ideal solution due to the lack of expertise required for some duties and their inability to obtain access to County systems, which also limits their capabilities.

- Employee retention and attrition:
 - In FY 2021, as of March 19, the Department has lost a total of 13 employees to attrition (8 grant funded and 5 General Funded civilians). In FY 2020 the Department lost a total of 38 employees to attrition, thereby current attrition rate represents a noticeable decrease in employee separations compared to FY 2020, or 54 employee separations in FY 2019.
 - Positions most affected by employee attrition are: Community Health Nurse I/II, Counselor I/II, Community Development Assistant, Environmental Health Specialist I/II, and General Clerk IV.
 - Key contributors to the employee attrition are new job opportunities, performance/conduct related terminations, and lack of comprehensive benefits offered in grant funded contractual positions.

- Recruitment overview:
 - Persistent high vacancy rates (vacancy rates fluctuating between 14% and 24% since FY 2016) are indicative of long-standing recruitment challenges and inability to fill vacancies. However, the Department reports that in FY 2021 “recruitment efforts have not changed much from last year as COVID-19 has not discouraged applicants from applying for positions”.
 - The Department continues to have challenges with filling contractual positions and positions that lack competitive salaries. Most challenging to fill positions are Counselor, Community Health Nurse and Environmental Specialist positions.
 - The Department reports that it relies on the Office of Human Resources Management (OHRM) to fill its County vacancies and it supplements the OHRM efforts with some Department level activities funded through its advertising budget. The Department reports that OHRM’s recruiter talent acquisition model, which includes biweekly strategic planning sessions, has been helpful. However, the Department notes that “the County implemented automated systems to fast track and to be more efficient with hiring. The time to fill is at times longer now than it was prior to the implementation”. It appears that the Department can benefit from shortening the length of the hiring process.
 - No recruitment changes are anticipated for FY 2022.

- Impact of the COVID-19 pandemic on the Department’s staffing:
 - In the response to the pandemic and social distancing guidelines, the Department worked hard to expand teleworking opportunities for its employees. Currently approximately 55% of the Department’s employees are teleworking.
 - The Department reports that reduced employee availability due to COVID-19 has been a challenge. At the beginning of the pandemic, employees who had medical conditions opted to use leave and those who were not able to telework were placed on administrative leave which significantly impacted employee availability. The Department notes that it “was already short staffed in critical areas, but we had no choice but to redistribute/reassign functions in order to meet the demands”.
 - To comply with the Centers for Disease Control and Prevention (CDC) guidelines, the

- Department had to procure equipment, signage, personal protective equipment (PPE), etc. to execute the necessary safety changes.
- The Department reports that “the need for additional staffing has been a long-standing concern at the Department. COVID-19 only brought them to the forefront.”

Workload and Program Management

- The Department leads the emergency response to the COVID-19 pandemic for the County. The Department reports that the key challenges it faces in addressing the pandemic are:
 - Non-compliance to preventive measures by residents, employers and employees
 - Non-compliance to enforcement of COVID-19 restrictions
- The Department reports that it “has partnered with all sectors of community partners, to include private, non-profit, community based and government entities for the purpose of preventive education, enforcement of COVID-19 restrictions, and development and implementation of COVID-19 related policies. More specifically, this collaboration has been for the purposes of contact tracing, testing and vaccinations, as well as public health education (preventive measures) and policy for intervention and protection of public health”.
- The Department engaged in a vigorous community outreach and education efforts including:
 - COVID-19 Hotline (preventive measures, testing information, general COVID-19 information)
 - Nurse's Hotline (provided test results and instructions regarding quarantine, isolation and preventive measures- these calls were fielded from the COVID-19 Hotline)
 - Contact Tracing
 - Educational Materials (infographics, flyers, fact sheets)
 - Media Ads (radio, TV, billboards and posters)
 - Social Media
 - Press Conferences
 - Virtual Community Town Halls with community groups and organizations
 - Press Releases
 - Radio Interviews
 - Website (<https://www.princegeorgescountymd.gov/3397/Coronavirus>)
 - Emails, text messages and recorded phone messages
- In July 2020, the Department launched COVID Care Program to serve high-risk patients with social needs during the COVID-19 pandemic. The program offers a focused community health worker (CHW) intervention, to assess needs of patients isolating or quarantining for COVID-19 and connect them to necessary services during their time of need.

- Operationally, the Department made necessary modifications to its service delivery to ensure continuity of services and compliance with the CDC guidelines when rendering clinical and behavioral services. The Department reports that it sustained revenue losses in the immunization, reproductive health, dental and HIV programs.
- Operational challenges in responding to the COVID-19 pandemic include:
 - The Department did not have sufficient internal infrastructure to handle the increased demand for contact tracing and disease investigation. To ensure timely service delivery, this service was outsourced.
 - The Department did not have adequate IT infrastructure to provide all the data analytics in a lean and seamless manner. The Department hired and contracted additional IT personnel, which yielded significant improvements in the Health Department’s ability to access data. In the future, the implementation of the new electronic health record system, which will incorporate data from local exchange and electronic health records, will be a significant improvement for the agency.
- The Department’s key goals for FY 2022 are:
 - Goal 1 - To ensure access to and resources supportive of the health and well-being of the County residents.
 - Goal 2 - To prevent and reduce chronic disease, including obesity, among County residents.
 - Goal 3 - To improve reproductive health care in order to reduce infant mortality and enhance birth outcomes for women in Prince George's County.
 - Goal 4 - To prevent and control disease and infections in order to enhance the health of all the County's residents, workers and visitors.
 - Goal 5 - To ensure that Prince George's County's physical environment is safe in order to enhance the health of all residents, workers and visitors.
- Behavioral Health Division:
 - Behavioral Health Division's key challenges and concerns are:
 - Challenges in increasing behavioral health pool of providers in the County and encouraging vendors to conduct business in Prince George's County, rooted in the inability to pay vendors in a timely manner as well as expedite contracts, agreements and other memorandums of agreements.
 - Shut down of certain services due to the COVID-19 pandemic. For example, substance abuse counseling services at the county jail was halted and all of the face to face services had to modify how to deliver quality care during this period.
 - The Adolescent Clubhouse initiative experienced a severe drop in enrollment as a result of schools not being open and lack of face to face access along with physically relocating the facility to a new location.
 - The Department struggles to assist new businesses in navigating the zoning regulations in order to expand services for the ongoing opioid overdose epidemic. The Department reports that “regulation is a barrier for new programs providing opioid treatment programs find appropriate locations. Several prospective vendors have dropped their search for locations suitable for methadone clinic startups”.

- Executing the Substance Abuse and Mental Health Services Administration *System Of Care* grant, which focuses on services for sixteen to twenty-four year old residents, and working to increase the number of behavioral health providers who work with this age group to address their unique needs.
- Details about the Behavioral Health Division's operations, goals and objectives, and additional measures that are being planned or considered to improve behavioral health services in the County in the remainder of FY 2021 and FY 2022 are provided in response to the *FY 2022 First Round Budget Review Question No. 37*.
- The Division is closely involved in the development and implementation of reentry services, especially substance abuse, mental health disorders and addressing recidivism. Additional information on these efforts is included in response to the *FY 2022 First Round Budget Review Question No. 45*.
- Health and Wellness Division
 - Health and Wellness Division's key programs/services/initiatives include:
 - Build strategic partnerships to include businesses, schools, and faith communities to expand community engagement and increase public awareness of chronic disease prevention and management activities
 - Promote chronic disease and diabetes self-management and care coordination activities
 - Improve clinical health outcomes of a defined group of individuals through improved care coordination and patient engagement
 - Foster and support community and clinical linkages
 - The Health and Wellness Division reports that it successfully transitioned programs and services from being delivered in a physical environment to one where services were delivered virtually.
 - The Division is seeking funds to establish a cancer program to address the high rates of breast and prostate cancers in the county, and to develop and expand the Population Health Program.
 - Further details about the Health and Wellness Division's operations are provided in response to the *FY 2022 First Round Budget Review Question No. 38*.
- Environmental Health/ Disease Control Division:
 - The key challenges and concerns of the Environmental Health/ Disease Control Division are:
 - *Lack of personnel to meet workload demands:* the COVID-19 pandemic overwhelmed the Communicable Disease Program with the number of cases.
 - *Sustaining services with limited staffing resources:* The Food Protection Program staff were assigned to the Ambassador Program for COVID-19 order compliance so routine inspections of food facilities were temporarily suspended. Complaint investigations of food facilities and indoor pools were completed.
 - Additional measures that are being planned or considered to improve environmental health/ disease control in the County in the remainder of FY 2021 and FY 2022 include:

- Continuing to be part of the Ambassador Program until facilities open to full operations and capacity.
- The Communicable Disease program will continue to lead COVID-19 contact tracing and monitoring of positive cases in addition to responding to other potential outbreaks.
- The Food Protection Program and Environmental Engineering Program (EEP) will continue to strive for routine inspections based on the state mandates.
- The EEP requested additional funding from the Maryland Department of the Environment for the Bay Restoration Fund to increase the number of failing septic systems to be connected to the public sewer system or installations of BAT onsite systems.
- The Lead and Asthma program will strive to increase the number of families enrolled in the program and conduct case management of children and families.
- Continue to be part of the County's Climate Action Commission.
- Further details about the Environmental Health/ Disease Control Division's operations are provided in response to the *FY 2022 First Round Budget Review Question No. 39*.
- Family Health Services Division:
 - The key challenges and concerns of the Family Health Services Division are:
 - *Responding to the pandemic*: standing up and staffing COVID-19 testing and vaccinations since March 2020.
 - *Ensuring continuity of services*: The Division has had to remain open for all services while focusing on. During this time Dental, School Based Wellness Center and the Vaccine for Children programs had the greatest impact in reduced services.
 - The Division's goals and priorities are provided in response to the *FY 2022 First Round Budget Review Question No. 40*.
- Although the Department made significant progress in preparing to apply for the Public Health Accreditation, the Department reports that due to the COVID-19 pandemic, there has been a shift in priorities for the Department and it is not moving forward with Public Health Accreditation at this point but will reassess at a later date.
- CR-127-2020 Resolution implementation:
 - The CR-127-2020 Resolution calls for the County Executive to Develop a Health in All Policies implementation strategy for the County by May 2021.
 - Focusing on COVID-19 response and vaccination, the Department has not yet begun working with Executive leadership to formulate such a strategic plan. However, the Department has led or contributed to reports that may inform the Health in All Policies strategic plan.
 - In addition, the Department provides support to the Prince George's Healthcare Action Coalition (PGHAC), a network of more than 400 partners and individuals working to improve and elevate the health of all in the County. Members of PGHAC has been strategizing how they may collaborate with Executive leadership to provide a community perspective and lend their knowledge and expertise to a Health in All Policies strategic

- plan but has not yet engaged Executive leadership.
- With 80 percent of health being determined outside of the clinical setting, namely through behavioral and environmental factors, according to the Department, a robust Health in All Policies approach calls for all County agencies to play an active role in implementing a County-wide Health in All Policies approach. The Department notes that “to support and sustain this implementation would require additional resources at the executive level and across all agencies”.

Equipment & Information Technology (IT)

- The Department reports that it was able to use CARES funding and other supplemental Maryland Department of Health funding to procure critical equipment needed to meet the operational needs of the Department. Remaining equipment needs include replacement dental equipment.
- The Department worked closely with the Office of the County Executive to enhance the Department’s information technology tools. Investments in Health Information Technology will continue to be a priority focus in FY 2021 and FY 2022.
- In FY 2021 the Department has been working on implementing the following information technology initiatives:
 - Local exchange/public health information network (PHIN) - went live 01/01/2021
 - Electronic health record Oregon Community Health Information Network (OCHIN) and (EPIC) - target go live on 07/27/2021
 - Bidirectional referral system for (prevention link) project – scheduled to go live on 06/30/21
 - Scheduling software for the medical resource coordinator (MRC) – planning phase
 - Data visualization /analysis services to automate manual data cleaning and display processes – planning phase
- Additional details on the Department’s critical equipment and IT initiatives are included in responses to the *FY 2022 First Round Budget Review Questions No. 49-53*.

Facilities and the Capital Improvement Program (CIP)

- The total ‘footprint’ of the Department’s operations, which is comprised of 12 locations, is provided in Attachment H to the *FY 2022 First Round Budget Review Questions*.
- In FY 2021, the Department signed a new five-year lease at 14207 Park Center Drive Suite 101-103, Laurel MD 20707 which is currently used as a vaccination site but in the future it will be used to render Family Health Services.
- Four (4) projects are included in the Proposed Capital Improvement Program Budget for FY 2022 – 2027: Clinical Health Facility, Health Facilities Renovations, Regional Health and Human Services Center, and Resident Treatment Facility. The total cost of these projects is \$88,900,000. These projects are funded through General Obligation Bonds (21.6%) and other sources (78.4%).

- Clinical Health Facility:
 - The Clinical Health Facility will improve behavioral health services in the County by meeting residents' clinical and mental health needs.
 - The total project cost is budgeted at \$20 million. Two million dollars for planning and \$18 million for construction are proposed to be expended in FY 2022 with the anticipated project completion in FY 2023.

- Health Facilities Renovations:
 - Health Facilities Renovations project includes critical repairs and renovations at the Department's Dyer Health, Cheverly Health and the Health Administration building facilities. This is an on-going project and \$1.5 million is budgeted for FY 2022.
 - The following repairs are planned for FY 2022:
 - Cheverly Health Center: fire suppression (\$60,000), bioretention pond repair (\$30,000), boiler replacement (\$600,000), control systems repair (\$60,000), RTU/air handler replacements (\$135,000), and foundation repairs (\$40,000) and generator repair (\$75,000).
 - Dyer Health Center: casement windows and update security access controls, electrical and plumbing and HVAC repair (30,000)
 - Health Administration Building: electrical and plumbing (\$15,000), generator repair \$15,000).

- Regional Health and Human Services Center:
 - The Regional Health and Human Services Center will serve as a centralized location for the administrative functions of the Health Department, the Department of Social Services, and the Department of Family Services. Services for older adults, persons with disabilities and family caregivers, and a full-service senior activity center will be provided at this centralized location.
 - The total project cost is budgeted at \$57.3 million. Four million dollars are budgeted for FY 2022 with the anticipated project completion in FY 2022.

- Residential Treatment Facility:
 - This project will encompass a 40 bed residential treatment facility that will include detoxification, intermediate care and continuing care services for persons with substance abuse and mental health problems. The County currently lacks a residential treatment facility.
 - This project is being planned for beyond FY 2027, no site or project total cost have been identified.

- The Department reports that in the future it will be necessary to evaluate the functionality of the Cheverly Health Center. With the closing of the hospital, the Cheverly Health Center will lose much needed parking for its employees and patients. Once the hospital closes, the clients will have no means of public transportation as the bus route will be terminated. The cost of maintaining the facility may require significant investments in the future years while accessibility of services may be compromised undermining the functionality of this facility.

Other Considerations

- *Prince George's Forward COVID-19 Actions Today Summary Report* (available at <https://princegeorgesforward.com/wp-content/uploads/2021/02/PGCVisionsTomorrowReport-02-21.pdf>) has several recommendations issued by the Health Recovery Subcommittee that may affect the Health Department. These include:
 - Health Department Funding Plan (new initiative)
 - Countywide testing (existing initiative)
 - Assess Health Department Data Infrastructure (new initiative)
 - COVID-19 Vaccine Program Deployment (new initiative)
 - Behavioral Health and Addiction Opportunities (new initiative)
 - Creative recruitment and hiring methods (new initiative)
 - Public Health Emergency Preparedness (PHEP) Program (new initiative)

- On February 5th, 2021 the County Executive announced adoption of the Police Reform Taskforce's recommendations.
 - One recommendation from the Financial Management Subcommittee asked for the revenues generated by the Prince George's County Police Department to be re-directed to health and human services needs. Currently all such revenues go to the General Fund. Based on the Staff Review Discussion, no changes are anticipated in funds allocation as a result of this recommendation for FY 2022.
 - One recommendation from the Community Engagement Subcommittee called for an overhaul the County's Crisis Response System to include mapping resources, training law enforcement, securing a new (best) provider, structuring mobile crisis teams, and establishing a new innovative crisis center. Specific health-related objectives of this recommendation include:
 - Secure a new (best) mental health provider
 - Structuring mobile crisis teams
 - Create a "warm line" for mental health services
 - Establish and fund a mental health crisis facility