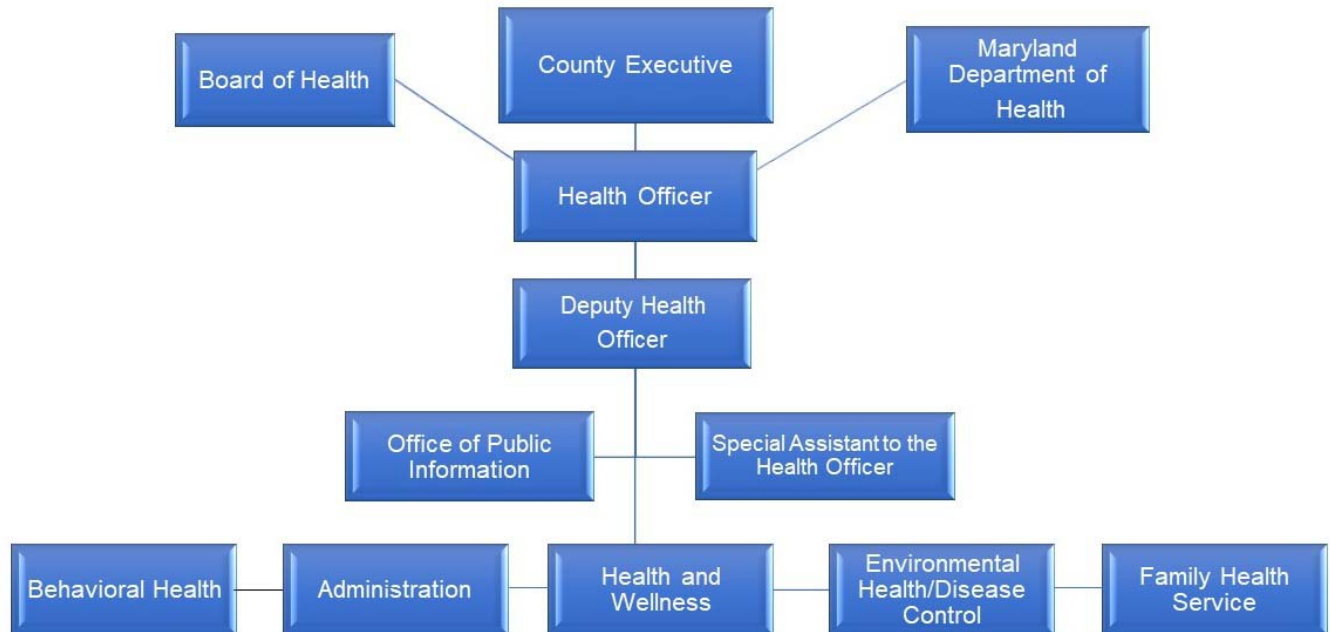


# Health Department



## MISSION AND SERVICES

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

### CORE SERVICES

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

### FY 2022 KEY ACCOMPLISHMENTS

- Played an integral role in the County’s overall response to the COVID-19 pandemic providing over 25,000 vaccinations and conducting an estimated 50,000 case investigations.
- Implemented a new electronic medical record (EMR) and practice management system for individuals who receive health care services from the department and for department providers. The new system allows the department to better prepare for future public health crises, improve workflow efficiency, consolidate multiple EMR applications and improve the ability to provide quality and timely care.
- Held a groundbreaking on the first phase of a mental health facility. The new two-story, 31,200 square foot facility, located on the campus of Luminis Health Doctors Community Medical Center (LHDCMC) will include inpatient psychiatric care for adults, outpatient therapy and medication management, walk-in urgent care, psychiatric day

treatment programs, family support services, prevention programs and care coordination with community-based support services.

- Launched the new permitting and licensing electronic system within the Health Department in late October 2021. This system is public facing and will enable residents and businesses to address permitting needs more efficiently.

## STRATEGIC FOCUS AND INITIATIVES FOR FY 2023

The department's top priorities in FY 2023 are:

- Support the workforce and administrative needs through revised departmental policies and procedures and working closely with County administrative agencies to refine business practices that impact grant funded operations.
- Conduct behavioral health system mapping, development and integration with a focus on expanding the crisis and acute care continuum in the County including the opening of the new LHDCMC facility and the implementation of a County Stabilization Center to divert behavioral health patients from local emergency departments.
- Expand the Population Health Initiative that will encompass programs to address the social determinants of health, asthma, maternal and child health, chronic disease, cancer and infectious disease programs focused on populations experiencing vulnerabilities.
- Transition COVID-19 activities to support an endemic including investigations, prevention, testing and vaccination.

## FY 2023 BUDGET SUMMARY

The FY 2023 approved budget for the Health Department is \$98,530,700, an increase of \$9,638,200 or 10.8% over the FY 2022 approved budget.

### Expenditures by Fund Type

Fund Types	FY 2021 Actual		FY 2022 Budget		FY 2022 Estimate		FY 2023 Approved	
	Amount	% Total	Amount	% Total	Amount	% Total	Amount	% Total
General Fund	\$36,450,250	45.4%	\$30,142,500	33.9%	\$36,503,000	34.8%	\$32,706,000	33.2%
Grant Funds	43,892,314	54.6%	58,750,000	66.1%	68,507,900	65.2%	65,824,700	66.8%
<b>Total</b>	<b>\$80,342,564</b>	<b>100.0%</b>	<b>\$88,892,500</b>	<b>100.0%</b>	<b>\$105,010,900</b>	<b>100.0%</b>	<b>\$98,530,700</b>	<b>100.0%</b>

## GENERAL FUND

The FY 2023 approved General Fund budget for the Health Department is \$32,706,000, an increase of \$2,563,500 or 8.5% over the FY 2022 approved budget.

### Reconciliation from Prior Year

	Expenditures
<b>FY 2022 Approved Budget</b>	<b>\$30,142,500</b>
<b>Increase Cost: Compensation - Mandated Salary Requirements</b> — Annualization of FY 2022 and planned FY 2023 salary adjustments	\$1,883,500
<b>Increase Cost: Fringe Benefits</b> — Increase due to compensation adjustments and two new positions; countywide pension costs; the fringe benefit rate increases from 34.0% to 37.9% to align with anticipated costs	1,415,100
<b>Increase Cost: Operating - Technology Cost Allocation</b> — Increase in OIT charges based on anticipated countywide costs for technology	171,000

**Reconciliation from Prior Year** *(continued)*

	<b>Expenditures</b>
<b>Add: Compensation - New Position</b> — Program Chief to support the Public Health Emergency program	144,000
<b>Add: Compensation - New Position</b> — Early Childhood Coordinator to support the Child Friendly County Initiative	80,000
<b>Increase Cost: Operating</b> — Increase to operating contracts for security in leased buildings, interagency charges, interpretation services and fleet maintenance costs	74,900
<b>Increase Cost: Operating</b> — Increase in general office supplies, equipment maintenance and building repair, postage and utility costs	44,400
<b>Decrease Cost: Operating</b> — Decrease in periodicals, advertising, mileage, equipment non-capital to align anticipated costs	(32,600)
<b>Decrease Cost: Recovery Increase</b> — Reflects operating recovery increase from various grants	(156,300)
<b>Decrease Cost: Compensation</b> — Decrease in State supplemental staff and County grant contributions offset by increases to reclassified positions and grade changes for certain incumbents	(171,000)
<b>Decrease Cost: Operating</b> — Decrease in general administrative contracts to align with anticipated laboratory and healthcare costs	(889,500)
<b>FY 2023 Approved Budget</b>	<b>\$32,706,000</b>

**GRANT FUNDS**

The FY 2023 approved grant budget for the Health Department is \$65,824,700, an increase of \$7,074,700 or 12.0% over the FY 2022 approved budget. Major sources of funds in the FY 2023 approved budget include:

- Administrative Local Behavioral Health Authorities (LBHA)
- General Fund Services
- Opioid Local Abatement Fund
- AIDS Case Management
- Women, Infants and Children
- General Medical Assistance Transportation
- Diabetes, Heart Disease and Stroke
- Community Health Integration Service System Program
- COVID-19 Public Health Workforce Supplemental Funding
- Health Literacy for COVID Coronavirus Aid, Relief and Economic Security (CARES)
- Pediatric Health

## Reconciliation from Prior Year

	Expenditures
<b>FY 2022 Approved Budget</b>	<b>\$58,750,000</b>
<b>Add: New Grant</b> — Ending the Epidemic Health Resources and Services Administration (HRSA), Fee for Service, HIV Pre-Exposure Prophylaxis, Buprenorphine Initiative, Innovation in Reentry Initiative, Opioid Local Abatement Fund, Regional Partnership Catalyst Grant Program, Improving Reproductive & Maternal Health, Community Health Integration Service System Program, COVID-19 Public Health Workforce Supplemental Funding, Health Literacy for COVID CARES, Maryland Medical Assistance Program, Medical Reserve and Pediatric Health	\$21,590,500
<b>Enhance: Existing Program/Service</b> — Access Harm Reduction, AIDS Case Management, Dental Sealant D Driver Van, Community Mental Health, Continuum of Care, General Fund Services, Mental Health Services Grant, Overdose Action, Project Safety Net, State Opioid Response Medication Assisted Treatment (MAT) Criminal Justice, Substance Abuse Treatment Outcomes Partnership, Temporary Cash Assistance, Tobacco Cessation, Tobacco Control Community, Tobacco Enforcement Initiative, Childhood Lead Poisoning Prevention, Adult Evaluation and Review Services, Diabetes, Heart Disease and Stroke and General Medical Assistance Transportation	2,532,300
<b>Shift: Transfer of program</b> — State Opioid Response MAT Criminal Justice and State Opioid Response MAT Detention Center	140,700
<b>Reduce: Existing Program/Service</b> — Babies Born Healthy, Ending the HIV Epidemic Supplemental, Hepatitis B and C Care, HIV Prevention Services, Immunization Action Grant, Implement Ending the Epidemic, Oral Disease and Injury Prevention, Personal Responsibility Education, Reproductive Health, School Based Wellness Center - PGCPs, School Based Wellness - Maryland State Department of Education (MSDE), Sexually Transmitted Disease (STD) Caseworker, Surveillance and Quality Improvement, Tuberculosis (TB) Control Cooperative Agreement, Women, Infants and Children (WIC), WIC Breastfeeding Peer Counseling, Administrative/LBHA Core Services Admin Grant, Drug Court Services, Federal Substance Use Disorder (SUD) Services Grant, Integration of Sexual Health in Recovery, Maryland Recovery Net, Maryland Violence and Injury Prevention, Opioid Operation Command, Prevention Services, State Opioid Response, Hepatitis B Prevention, Asthma Initiative, Administrative Care Coordination Grant-Expansion, Assistance in Community Integration Services, Maryland Children's Health Program (MCHP) Eligibility Determination- Pregnant Women and Children (PWC), Cities Readiness Initiative and Promoting Positive Outcomes for Infants & Toddlers	(3,166,600)
<b>Eliminate: Program/Service</b> — High Risk Infant (Infants at Risk), HIV Personal Responsibility Education (PREP), Ryan White Part B, Ryan White Fee For Service, Adolescents Clubhouse Expansion Supplement, State Opioid Response - Screening, Brief Intervention and Referral to Treatment (SBIRT), Lead Paint Poisoning Program, Building Local Operational Capacity for COVID-19 and CareFirst BlueCross BlueShield	(5,686,800)
<b>Remove: Prior Year Appropriation</b> — HIV Expansion Funds - Health Resources and Services Administration (HRSA), Maternal and Child Health Expansion, Oral Disease, Behavioral Health Promotion and Prevention, Crisis Response, Early Intervention Program, Community Health Resources Commission, National Association of County and City Health Officials, Public Health Emergency Preparedness COVID-19 and Urban Security - UASI - Maryland Emergency Response System (MDERS)	(8,335,400)
<b>FY 2023 Approved Budget</b>	<b>\$65,824,700</b>

### STAFF AND BUDGET RESOURCES

Authorized Positions	FY 2021 Budget	FY 2022 Budget	FY 2023 Approved	Change FY22-FY23
<b>General Fund</b>				
Full Time - Civilian	217	227	229	2
Full Time - Sworn	0	0	0	0
Subtotal - FT	217	227	229	2
Part Time	1	1	1	0
Limited Term	0	0	0	0

<b>Grant Program Funds</b>				
Full Time - Civilian	183	183	184	1
Full Time - Sworn	0	0	0	0
Subtotal - FT	183	183	184	1
Part Time	8	3	3	0
Limited Term	123	142	161	19

<b>TOTAL</b>				
Full Time - Civilian	400	410	413	3
Full Time - Sworn	0	0	0	0
Subtotal - FT	400	410	413	3
Part Time	9	4	4	0
Limited Term	123	142	161	19

Positions By Classification	FY 2023		
	Full Time	Part Time	Limited Term
Account Clerk	5	0	1
Accountant	6	0	2
Administrative Aide	33	0	6
Administrative Assistant	12	0	5
Administrative Specialist	12	0	0
Associate Director	6	0	0
Auditor	3	0	2
Budget Aide	1	0	0
Budget Management Analyst	8	0	2
Building Engineer	1	0	0
Building Security Officer	4	0	0
Citizen Services Specialist	1	0	0
Communications Specialist	0	0	1
Community Developer	40	1	32
Community Development Aide	0	0	2
Community Development Assistant	34	1	33
Community Health Nurse	57	1	4
Community Services Manager	1	0	0
Compliance Specialist	2	0	0
Counselor	33	0	25
Data Coordinator	0	0	1

Positions By Classification	FY 2023		
	Full Time	Part Time	Limited Term
Data Entry Operator	1	0	0
Dental Assistant	0	0	1
Dental Hygienist	0	0	1
Dentist	1	0	0
Deputy Health Officer	2	0	0
Disease Control Specialist	24	0	8
Early Childhood Specialist	0	0	1
Environmental Health Specialist	36	0	1
Equipment Operator	0	0	2
Facilities Manager	1	0	0
Facilities Superintendent	2	0	0
General Clerk	16	0	2
Grant Administrator	0	0	2
Graphic Artist	0	0	1
Health Aide	4	0	3
Health Officer	1	0	0
Health Record Technician	1	0	0
Human Resource Analyst	5	0	0
Human Resource Analyst Assistant	1	0	0
Human Resource Manager	1	0	0
Human Resource Analyst Specialist	0	0	1
Laboratory Assistant	1	0	0
Licensed Practical Nurse	4	1	3
Mail Services Operator	2	0	0
Maintenance Services Attendant	1	0	0
Nurse Practitioner	5	0	4
Nutritionist	1	0	1
Performance Improvement Analyst	0	0	1
Performance Improvement Manager	0	0	1
Permits Specialist	1	0	0
Personnel Analyst	0	0	0
Personnel Manager	0	0	0
Physician Program Manager	1	0	0
Physician Assistant	2	0	0
Physician Clinical Specialist	1	0	0
Planner	3	0	1
Police Officer Supervisor	1	0	0
Procurement Officer	1	0	1
Programmer-Systems Analyst	2	0	0
Program Manager	0	0	1
Program Monitor	0	0	4
Project Director	1	0	0
Provider Health Literacy Lead	1	0	0

Positions By Classification	FY 2023		
	Full Time	Part Time	Limited Term
Public Health Lab Scientist	2	0	0
Public Health Program Chief	10	0	0
Public Information Officer	1	0	0
Public Safety Aide	3	0	0
Radiology Technician	1	0	0
Safety Officer	1	0	0
Service Aide	0	0	1
Social Worker	5	0	4
Supervisor	1	0	0
Supervisory Clerk	1	0	0
Supply Property Clerk	1	0	0
System Analyst	4	0	0
<b>TOTAL</b>	<b>413</b>	<b>4</b>	<b>161</b>

**Expenditures by Category - General Fund**

Category	FY 2021 Actual	FY 2022 Budget	FY 2022 Estimate	FY 2023 Approved	Change FY22-FY23	
					Amount (\$)	Percent (%)
Compensation	\$16,568,317	\$17,309,000	\$13,860,000	\$19,245,500	\$1,936,500	11.2%
Fringe Benefits	5,778,419	5,885,100	5,243,600	7,300,200	1,415,100	24.0%
Operating	16,032,859	9,628,900	20,074,700	8,997,100	(631,800)	-6.6%
Capital Outlay	14,667	—	—	—	—	
<b>SubTotal</b>	<b>\$38,394,263</b>	<b>\$32,823,000</b>	<b>\$39,178,300</b>	<b>\$35,542,800</b>	<b>\$2,719,800</b>	<b>8.3%</b>
Recoveries	(1,944,012)	(2,680,500)	(2,675,300)	(2,836,800)	(156,300)	5.8%
<b>Total</b>	<b>\$36,450,250</b>	<b>\$30,142,500</b>	<b>\$36,503,000</b>	<b>\$32,706,000</b>	<b>\$2,563,500</b>	<b>8.5%</b>

In FY 2023, compensation expenditures increase 11.2% over the FY 2022 budget due to funding for a new Program Chief position, Administrative Aide position and countywide salary adjustments. Compensation costs include funding for 229 full time positions and one part time position. Fringe benefit expenditures increase 24.0% over the FY 2022 budget due to anticipated fringe benefit requirements, countywide pension adjustments and two new positions.

Operating expenses decrease -6.6% under the FY 2022 budget primarily due to reduced general administrative contracts in laboratory and healthcare costs. Funding decreases for periodicals, advertising, mileage and operating equipment non-capital anticipated costs.

Recoveries increase 5.8% over the FY 2022 budget due to an increase in recoverable operating expenditures from various grants.

**Expenditures by Division - General Fund**

Category	FY 2021 Actual	FY 2022 Budget	FY 2022 Estimate	FY 2023 Approved	Change FY22-FY23	
					Amount (\$)	Percent (%)
Administration	\$12,514,869	\$9,100,700	\$18,607,000	\$10,354,000	\$1,253,300	13.8%
Family Health Services	7,284,492	6,431,100	5,637,300	7,077,500	646,400	10.1%
Behavioral Health	2,684,431	2,428,100	2,387,800	2,608,000	179,900	7.4%
Environmental Health - Disease Control	6,194,369	5,164,100	4,359,300	5,593,200	429,100	8.3%
Health and Wellness	2,324,070	1,757,300	1,526,100	1,912,700	155,400	8.8%
Office of the Health Officer	5,448,019	5,261,200	3,985,500	5,160,600	(100,600)	-1.9%
<b>Total</b>	<b>\$36,450,250</b>	<b>\$30,142,500</b>	<b>\$36,503,000</b>	<b>\$32,706,000</b>	<b>\$2,563,500</b>	<b>8.5%</b>

## General Fund - Division Summary

Category	FY 2021 Actual	FY 2022 Budget	FY 2022 Estimate	FY 2023 Approved	Change FY22-FY23	
					Amount (\$)	Percent (%)
<b>Administration</b>						
Compensation	\$5,751,450	\$3,781,000	\$2,865,100	\$4,420,900	\$639,900	16.9%
Fringe Benefits	2,115,134	1,285,600	1,051,300	1,660,500	374,900	29.2%
Operating	6,577,629	6,714,600	17,275,100	7,109,400	394,800	5.9%
Capital Outlay	14,667	—	—	—	—	
<b>SubTotal</b>	<b>\$14,458,881</b>	<b>\$11,781,200</b>	<b>\$21,191,500</b>	<b>\$13,190,800</b>	<b>\$1,409,600</b>	<b>12.0%</b>
Recoveries	(1,944,012)	(2,680,500)	(2,584,500)	(2,836,800)	(156,300)	5.8%
<b>Total Administration</b>	<b>\$12,514,869</b>	<b>\$9,100,700</b>	<b>\$18,607,000</b>	<b>\$10,354,000</b>	<b>\$1,253,300</b>	<b>13.8%</b>
<b>Family Health Services</b>						
Compensation	\$4,024,689	\$4,293,400	\$3,563,500	\$4,655,400	\$362,000	8.4%
Fringe Benefits	1,443,131	1,459,800	1,395,900	1,752,200	292,400	20.0%
Operating	1,816,672	677,900	677,900	669,900	(8,000)	-1.2%
Capital Outlay	—	—	—	—	—	
<b>SubTotal</b>	<b>\$7,284,492</b>	<b>\$6,431,100</b>	<b>\$5,637,300</b>	<b>\$7,077,500</b>	<b>\$646,400</b>	<b>10.1%</b>
Recoveries	—	—	—	—	—	
<b>Total Family Health Services</b>	<b>\$7,284,492</b>	<b>\$6,431,100</b>	<b>\$5,637,300</b>	<b>\$7,077,500</b>	<b>\$646,400</b>	<b>10.1%</b>
<b>Behavioral Health</b>						
Compensation	\$1,784,328	\$1,558,800	\$1,444,900	\$1,684,000	\$125,200	8.0%
Fringe Benefits	528,865	530,000	524,100	672,900	142,900	27.0%
Operating	371,238	339,300	418,800	251,100	(88,200)	-26.0%
Capital Outlay	—	—	—	—	—	
<b>SubTotal</b>	<b>\$2,684,431</b>	<b>\$2,428,100</b>	<b>\$2,387,800</b>	<b>\$2,608,000</b>	<b>\$179,900</b>	<b>7.4%</b>
Recoveries	—	—	—	—	—	
<b>Total Behavioral Health</b>	<b>\$2,684,431</b>	<b>\$2,428,100</b>	<b>\$2,387,800</b>	<b>\$2,608,000</b>	<b>\$179,900</b>	<b>7.4%</b>
<b>Environmental Health - Disease Control</b>						
Compensation	\$2,133,404	\$3,690,600	\$3,073,200	\$4,016,200	\$325,600	8.8%
Fringe Benefits	780,195	1,254,800	1,227,400	1,518,300	263,500	21.0%
Operating	3,280,770	218,700	58,700	58,700	(160,000)	-73.2%
Capital Outlay	—	—	—	—	—	
<b>SubTotal</b>	<b>\$6,194,369</b>	<b>\$5,164,100</b>	<b>\$4,359,300</b>	<b>\$5,593,200</b>	<b>\$429,100</b>	<b>8.3%</b>
Recoveries	—	—	—	—	—	
<b>Total Environmental Health - Disease Control</b>	<b>\$6,194,369</b>	<b>\$5,164,100</b>	<b>\$4,359,300</b>	<b>\$5,593,200</b>	<b>\$429,100</b>	<b>8.3%</b>



**General Fund - Division Summary** *(continued)*

Category	FY 2021 Actual	FY 2022 Budget	FY 2022 Estimate	FY 2023 Approved	Change FY22-FY23	
					Amount (\$)	Percent (%)
<b>Health and Wellness</b>						
Compensation	\$1,386,347	\$1,185,400	\$999,500	\$1,349,700	\$164,300	13.9%
Fringe Benefits	467,715	403,000	357,700	514,900	111,900	27.8%
Operating	470,008	168,900	168,900	48,100	(120,800)	-71.5%
Capital Outlay	—	—	—	—	—	
<b>SubTotal</b>	<b>\$2,324,070</b>	<b>\$1,757,300</b>	<b>\$1,526,100</b>	<b>\$1,912,700</b>	<b>\$155,400</b>	<b>8.8%</b>
Recoveries	—	—	—	—	—	
<b>Total Health and Wellness</b>	<b>\$2,324,070</b>	<b>\$1,757,300</b>	<b>\$1,526,100</b>	<b>\$1,912,700</b>	<b>\$155,400</b>	<b>8.8%</b>
<b>Office of the Health Officer</b>						
Compensation	\$1,488,100	\$2,799,800	\$1,913,800	\$3,119,300	\$319,500	11.4%
Fringe Benefits	443,378	951,900	687,200	1,181,400	229,500	24.1%
Operating	3,516,541	1,509,500	1,475,300	859,900	(649,600)	-43.0%
Capital Outlay	—	—	—	—	—	
<b>SubTotal</b>	<b>\$5,448,019</b>	<b>\$5,261,200</b>	<b>\$4,076,300</b>	<b>\$5,160,600</b>	<b>\$(100,600)</b>	<b>-1.9%</b>
Recoveries	—	—	(90,800)	—	—	
<b>Total Office of the Health Officer</b>	<b>\$5,448,019</b>	<b>\$5,261,200</b>	<b>\$3,985,500</b>	<b>\$5,160,600</b>	<b>\$(100,600)</b>	<b>-1.9%</b>
<b>Total</b>	<b>\$36,450,250</b>	<b>\$30,142,500</b>	<b>\$36,503,000</b>	<b>\$32,706,000</b>	<b>\$2,563,500</b>	<b>8.5%</b>

## DIVISION OVERVIEW

### Administration

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

### Fiscal Summary

In FY 2023, the division expenditures increase \$1,253,300 or 13.8% over the FY 2022 budget. Staffing resources remain unchanged from the FY 2022 budget. The primary budget changes include:

- An increase in personnel costs due to countywide salary adjustments as well as projected healthcare and pension costs.
- An increase in utilities, general office supplies, postage and technology cost allocation charges.
- An increase in operating contracts for security in leased facilities.

	FY 2022 Budget	FY 2023 Approved	Change FY22-FY23	
			Amount (\$)	Percent (%)
<b>Total Budget</b>	<b>\$9,100,700</b>	<b>\$10,354,000</b>	<b>\$1,253,300</b>	<b>13.8%</b>
<b>STAFFING</b>				
Full Time - Civilian	55	55	0	0.0%
Full Time - Sworn	0	0	0	0.0%
<b>Subtotal - FT</b>	<b>55</b>	<b>55</b>	<b>0</b>	<b>0.0%</b>
Part Time	0	0	0	0.0%
Limited Term	0	0	0	0.0%

### Family Health Services

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

### Fiscal Summary

In FY 2023, the division expenditures increase \$646,400 or 10.1% over the FY 2022 budget. Staffing resources remain unchanged from the FY 2022 budget. The primary budget change includes:

- An increase in personnel cost due to countrywide salary adjustments and projected healthcare and pension costs.
- A decrease in general administrative contracts for temporary staffing and laboratory services.
- An increase in general office supplies and building repair and maintenance.

	FY 2022 Budget	FY 2023 Approved	Change FY22-FY23	
			Amount (\$)	Percent (%)
<b>Total Budget</b>	<b>\$6,431,100</b>	<b>\$7,077,500</b>	<b>\$646,400</b>	<b>10.1%</b>
<b>STAFFING</b>				
Full Time - Civilian	59	59	0	0.0%
Full Time - Sworn	0	0	0	0.0%
<b>Subtotal - FT</b>	<b>59</b>	<b>59</b>	<b>0</b>	<b>0.0%</b>
Part Time	0	0	0	0.0%
Limited Term	0	0	0	0.0%

## Behavioral Health

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

## Fiscal Summary

In FY 2023, the division expenditures increase \$179,900 or 7.4% over the FY 2022 budget. Staffing resources remain unchanged from the FY 2022 budget. The primary budget changes include:

- An increase in personnel costs due to countrywide salary adjustments and projected healthcare and pension costs.
- A decrease in general administrative contracts for temporary staff funded by the American Rescue Plan Act grant and the department's accreditation and background check services administered by the Office of Human Resources Management.
- An increase in medical and drug supplies.

	FY 2022 Budget	FY 2023 Approved	Change FY22-FY23	
			Amount (\$)	Percent (%)
<b>Total Budget</b>	<b>\$2,428,100</b>	<b>\$2,608,000</b>	<b>\$179,900</b>	<b>7.4%</b>
<b>STAFFING</b>				
Full Time - Civilian	21	21	0	0.0%
Full Time - Sworn	0	0	0	0.0%
<b>Subtotal - FT</b>	<b>21</b>	<b>21</b>	<b>0</b>	<b>0.0%</b>
Part Time	0	0	0	0.0%
Limited Term	0	0	0	0.0%

### Environmental Health - Disease Control

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

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

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

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

information and statistics for public health and medical providers.

### Fiscal Summary

In FY 2023, the division expenditures increase \$429,100 or 8.3% over the FY 2022 budget. Staffing resources remain unchanged from the FY 2022 budget. The primary budget changes include:

- An increase in personnel costs due to countrywide salary adjustments and projected healthcare and pension costs.
- A decrease in interagency charges to reflect project charges removed from the prior year to align with FY 2023 requirements.
- Funding to support training, mileage, general office supplies, operating equipment non-capital and equipment leases.

	FY 2022 Budget	FY 2023 Approved	Change FY22-FY23	
			Amount (\$)	Percent (%)
<b>Total Budget</b>	<b>\$5,164,100</b>	<b>\$5,593,200</b>	<b>\$429,100</b>	<b>8.3%</b>
<b>STAFFING</b>				
Full Time - Civilian	56	56	0	0.0%
Full Time - Sworn	0	0	0	0.0%
<b>Subtotal - FT</b>	<b>56</b>	<b>56</b>	<b>0</b>	<b>0.0%</b>
Part Time	0	0	0	0.0%
Limited Term	0	0	0	0.0%

## Health and Wellness

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

### Fiscal Summary

In FY 2023, the division expenditures increase \$155,400 or 8.8% over the FY 2022 budget. Staffing resources increase by one from the FY 2022 budget. The primary budget change includes:

- An increase in personnel costs for countywide salary adjustments, projected healthcare and pension

costs. One part time position is transferred from the Office of the Health Officer.

- A decrease for the one time Child-Friendly County Campaign early childhood consultant general administrative contract.
- An increase in training costs.

	FY 2022 Budget	FY 2023 Approved	Change FY22-FY23	
			Amount (\$)	Percent (%)
<b>Total Budget</b>	<b>\$1,757,300</b>	<b>\$1,912,700</b>	<b>\$155,400</b>	<b>8.8%</b>
<b>STAFFING</b>				
Full Time - Civilian	14	14	0	0.0%
Full Time - Sworn	0	0	0	0.0%
<b>Subtotal - FT</b>	<b>14</b>	<b>14</b>	<b>0</b>	<b>0.0%</b>
Part Time	0	1	1	0.0%
Limited Term	0	0	0	0.0%

### Office of the Health Officer

The Office of the Health Officer directs the 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 underinsured residents.

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

The visual communications staff design, produce and distribute health information materials for public education and review existing materials for the quality of content and cultural appropriateness. The Public Information Officer coordinates the department’s responses to all inquiries from the media, requests for information under the Maryland Public Information Act and legislative activities. The Ryan White CARE Act Title I staff function as the administrative agent for the entire suburban Maryland area (five counties) and are responsible for awarding grant monies, processing contracts and monitoring services provided.

### Fiscal Summary

In FY 2023, the division expenditures decrease -\$100,600 or -1.9% under the FY 2022 budget. Staffing resources increase by two full time positions and decrease by one part time position from the FY 2022 budget. The primary budget changes include:

- An increase in personnel costs due to countrywide salary adjustments and projected healthcare and pension costs. Funding for one Chief to support the Public Emergency Health Preparedness program and one Administrative Aide to support the Child Friendly County Initiative. One part time position is reallocated to the Health and Wellness Division.
- A decrease in advertising, mileage and general office supplies to align with anticipated costs.
- A decrease in general administrative contracts for temporary staffing due to recruitment efforts to fill merit positions.

	FY 2022 Budget	FY 2023 Approved	Change FY22-FY23	
			Amount (\$)	Percent (%)
<b>Total Budget</b>	<b>\$5,261,200</b>	<b>\$5,160,600</b>	<b>\$(100,600)</b>	<b>-1.9%</b>
<b>STAFFING</b>				
Full Time - Civilian	22	24	2	9.1%
Full Time - Sworn	0	0	0	0.0%
<b>Subtotal - FT</b>	<b>22</b>	<b>24</b>	<b>2</b>	<b>9.1%</b>
Part Time	1	0	(1)	0.0%
Limited Term	0	0	0	0.0%

## GRANT FUNDS SUMMARY

### Expenditures by Category - Grant Funds

Category	FY 2021 Actual	FY 2022 Budget	FY 2022 Estimate	FY 2023 Approved	Change FY22-FY23	
					Amount (\$)	Percent (%)
Compensation	\$14,601,889	\$19,758,700	\$19,523,100	\$22,052,600	\$2,293,900	11.6%
Fringe Benefits	4,043,488	3,062,600	5,117,200	5,862,200	2,799,600	91.4%
Operating	25,262,174	36,351,200	44,242,300	38,332,200	1,981,000	5.4%
Capital Outlay	20,690	—	—	—	—	—
<b>SubTotal</b>	<b>\$43,928,241</b>	<b>\$59,172,500</b>	<b>\$68,882,600</b>	<b>\$66,247,000</b>	<b>\$7,074,500</b>	<b>12.0%</b>
Recoveries	—	—	—	—	—	—
<b>Total</b>	<b>\$43,928,241</b>	<b>\$59,172,500</b>	<b>\$68,882,600</b>	<b>\$66,247,000</b>	<b>\$7,074,500</b>	<b>12.0%</b>

The FY 2023 approved grant budget is \$66,247,000, an increase of 12.0% over the FY 2022 approved budget. This increase is primarily driven by new funding anticipated for the Opioid Local Abatement Fund and Pediatric Health programs. Funding reductions are anticipated for the School Based Wellness Center - PGCPs, Assistance in Community Integration Services and Promoting Positive Outcomes for Infants and Toddlers programs.

### Staff Summary by Division - Grant Funds

Staff Summary by Division & Grant Program	FY 2022			FY 2023		
	FT	PT	LTGF	FT	PT	LTGF
<b>Administration</b>						
General Services	2	—	—	2	—	—
American Rescue Plan Act	—	—	—	—	—	19
<b>Total Administration</b>	<b>2</b>	<b>—</b>	<b>—</b>	<b>2</b>	<b>—</b>	<b>19</b>
<b>Family Health Services</b>						
AIDS Case Management	17	—	10	17	—	10
Babies Born Healthy	1	—	—	1	—	—
Ending the HIV Epidemic	—	—	3	—	—	3
High Risk Infant	1	—	—	1	—	—
HIV PREP	—	—	2	—	—	2
HIV Prevention	5	1	3	5	1	3
HIV Expansion HRSA	—	—	5	—	—	5
Immunization Action Grant	1	—	—	1	—	—
Maternal and Child Health	—	—	21	—	—	21
Personal Responsibility Education	—	—	1	—	—	1
Reproductive Health	7	—	—	7	—	—
Ryan White Fee For Service	4	—	4	4	—	4
School Based Wellness Center	3	—	—	3	—	—
MSDE	—	—	—	—	—	—



**Staff Summary by Division - Grant Funds** *(continued)*

Staff Summary by Division & Grant Program	FY 2022			FY 2023		
	FT	PT	LTGF	FT	PT	LTGF
School Based Wellness Center PGCPS	6	—	—	6	—	—
STD Caseworker	12	—	4	12	—	4
Surveillance and Quality Improvement	1	—	—	1	—	—
WIC Breastfeeding Peer Counseling Women, Infants, and Children (WIC)	1	—	2	1	—	2
	18	—	6	18	—	6
<b>Total Family Health Services</b>	<b>77</b>	<b>1</b>	<b>61</b>	<b>77</b>	<b>1</b>	<b>61</b>
<b>Behavioral Health</b>						
Addictions Treatment General Grant	19	—	13	19	—	13
Administrative/LAA	2	—	3	2	—	3
Adolescent Clubhouse	—	—	5	—	—	5
Behavioral Health Promotion and Prevention	—	—	7	—	—	7
Bridges to Success	1	—	4	1	—	4
Community Mental Health	—	1	1	—	1	1
Core Services Administrative Grant	6	—	—	6	—	—
Crownsville Project	—	—	1	—	—	1
Drug and Alcohol Prevention	2	—	—	2	—	—
Drug Court Services	1	—	—	1	—	—
Federal Treatment Grant	2	—	6	2	—	6
General Fund Services	—	—	1	—	—	1
Integration of Sexual Health in Recovery	1	—	—	1	—	—
Mental Health Services Grant	—	—	1	—	—	1
Offender Reentry Prog. (PGCORP)	—	—	7	—	—	7
Project Safety Net	6	—	—	6	—	—
Recovery Support Services	2	—	4	2	—	4
Substance Abuse Treatment Outcomes Partnership (STOP)	3	—	—	3	—	—
Temporary Cash Assistance	3	—	—	3	—	—
Tobacco Enforcement Initiative	—	—	2	—	—	2
Tobacco Cessation	1	—	—	1	—	—
<b>Total Behavioral Health</b>	<b>49</b>	<b>1</b>	<b>55</b>	<b>49</b>	<b>1</b>	<b>55</b>
<b>Environmental Health - Disease Control</b>						
Bay Restoration (Septic) Fund	1	—	—	1	—	—
Hepatitis B Prevention	1	—	—	1	—	—

## Staff Summary by Division - Grant Funds (continued)

Staff Summary by Division & Grant Program	FY 2022			FY 2023		
	FT	PT	LTGF	FT	PT	LTGF
Lead Poisoning Prevention	1	—	—	1	—	—
<b>Total Environmental Health - Disease Control</b>	<b>3</b>	<b>—</b>	<b>—</b>	<b>3</b>	<b>—</b>	<b>—</b>
<b>Health and Wellness</b>						
Administrative Care Coordination	12	—	—	12	—	—
ACIS	1	—	1	1	—	1
CareFirst BlueCross BlueShield	—	—	1	—	—	1
Diabetes, Heart Disease and Stroke	1	—	4	1	—	4
Geriatric Evaluation Review Services	7	—	—	7	—	—
MCHP Eligibility Determination	18	1	8	18	1	8
General Medical Assistance Transportation	10	—	9	10	—	9
<b>Total Health and Wellness</b>	<b>49</b>	<b>1</b>	<b>23</b>	<b>49</b>	<b>1</b>	<b>23</b>
<b>Office of the Health Officer</b>						
ACIS	—	—	—	—	—	—
Infants and Toddlers	—	—	1	—	—	1
Public Health Emergency Preparedness (PHEP)	2	—	—	3	—	—
PHEP COVID-19	—	—	2	—	—	2
Ryan White HIV/AIDS Treatment Modernization Act-Part A & Minority AIDS Initiative	1	—	—	1	—	—
<b>Total Office of the Health Officer</b>	<b>3</b>	<b>—</b>	<b>3</b>	<b>4</b>	<b>—</b>	<b>3</b>
<b>Total</b>	<b>183</b>	<b>3</b>	<b>142</b>	<b>184</b>	<b>3</b>	<b>161</b>

## Grant Funds by Division

Grant Name	FY 2021 Actual	FY 2022 Budget	FY 2022 Estimate	FY 2023 Approved	Change FY22-FY23	
					Amount (\$)	Percent (%)
<b>Family Health Services</b>						
Access Harm Reduction	\$263,214	\$340,000	\$496,600	\$453,300	\$113,300	33.3%
AIDS Case Management	2,651,340	4,124,300	4,934,900	4,915,100	790,800	19.2%
Asthma Initiative	—	100,000	—	79,600	(20,400)	-20.4%
Babies Born Healthy	195,636	228,000	180,400	219,600	(8,400)	-3.7%
COVID Immunization CARES 1	390,942	—	—	—	—	
COVID Mass Vaccination CARES	1,759,684	—	—	—	—	
Dental Sealant D Driver Van	6,201	11,000	19,000	32,000	21,000	190.9%
Ending the HIV Epidemic HRSA	—	—	1,284,600	686,400	686,400	
Ending the HIV Epidemic Supplemental	117,210	868,200	—	232,500	(635,700)	-73.2%
Enhancing Detection Grant	1,306,332	—	—	—	—	
Fee for Service	49,203	—	41,000	40,000	40,000	
Healthy Teens/Young Adults	8,766	—	—	—	—	
Hepatitis B and C Care	(9,849)	15,000	12,400	12,400	(2,600)	-17.3%
High Risk Infant (Infants at Risk)	77,712	117,700	—	—	(117,700)	-100.0%
HIV Expansion Funds HRSA	114,617	3,000,000	—	—	(3,000,000)	-100.0%
HIV Pre-Exposure Prophylaxis	—	—	400,000	400,000	400,000	
HIV Prevention Services	482,223	951,500	797,800	929,000	(22,500)	-2.4%
HIV PREP (Personal Responsibility Education)	302,725	562,100	—	—	(562,100)	-100.0%
Immunization Action Grant	145,221	412,500	378,100	295,300	(117,200)	-28.4%
Implement Ending the Epidemic	875,715	1,656,900	1,499,000	1,638,100	(18,800)	-1.1%
Maternal and Child Health Expansion	—	3,000,000	—	—	(3,000,000)	-100.0%
Oral Disease and Injury Prevention	—	60,000	185,900	43,000	(17,000)	-28.3%
Oral Disease	13,367	20,000	—	—	(20,000)	-100.0%
Personal Responsibility Education (PREP)	60,476	70,000	66,500	67,400	(2,600)	-3.7%
Reproductive Health	693,308	800,000	788,200	720,000	(80,000)	-10.0%
Ryan White Part B	1,240,903	3,000,500	—	—	(3,000,500)	-100.0%
Ryan White Fee For Service	115,954	1,055,400	—	—	(1,055,400)	-100.0%
School Based Wellness Center - PGPCS	—	1,429,200	849,000	850,000	(579,200)	-40.5%
School Based Wellness - MSDE	217,256	404,200	405,900	343,100	(61,100)	-15.1%
STD Caseworker	1,052,299	1,196,200	909,400	1,123,300	(72,900)	-6.1%
Surveillance and Quality Improvement	92,827	142,700	127,600	113,100	(29,600)	-20.7%
Syringe Services	84,375	—	—	—	—	

## Grant Funds by Division (continued)

Grant Name	FY 2021 Actual	FY 2022 Budget	FY 2022 Estimate	FY 2023 Approved	Change FY22-FY23	
					Amount (\$)	Percent (%)
TB Control Cooperative Agreement	188,507	328,700	704,900	242,200	(86,500)	-26.3%
WIC Breastfeeding Peer Counseling	176,631	201,200	201,200	194,600	(6,600)	-3.3%
Women, Infants and Children (WIC)	2,031,944	2,531,300	1,947,400	2,381,700	(149,600)	-5.9%
<b>Total Family Health Services</b>	<b>\$14,704,739</b>	<b>\$26,626,600</b>	<b>\$16,229,800</b>	<b>\$16,011,700</b>	<b>\$(10,614,900)</b>	<b>-39.9%</b>
<b>Behavioral Health</b>						
Addictions General Treatment Block Grant	\$24,047	\$—	\$—	\$—	\$—	
Administrative/LBHA Core Services Admin Grant	1,532,882	2,011,200	2,011,100	2,076,500	65,300	3.2%
Adolescents Clubhouse Expansion Supplement	—	90,000	—	—	(90,000)	-100.0%
Ambulatory Services	81,545	—	—	—	—	
American Rescue Plan One-Time Supplemental Funding	—	—	60,000	—	—	
Behavioral Health Promotion and Prevention	—	624,900	—	—	(624,900)	-100.0%
Bridges 2 Success	421,747	462,400	462,400	462,400	—	0.0%
Buprenorphine Initiative	—	—	30,000	30,000	30,000	
Community Mental Health	1,414,331	1,676,800	1,755,700	1,755,700	78,900	4.7%
Continuum of Care	696,474	700,000	733,000	732,400	32,400	4.6%
Crisis Response	—	818,500	—	—	(818,500)	-100.0%
Crisis Services	—	—	806,700	—	—	
Crownsville Project	(1,633)	—	—	—	—	
Drug Court Services	51,009	147,200	147,100	147,000	(200)	-0.1%
Early Intervention Program	—	71,000	—	—	(71,000)	-100.0%
Federal SUD Services Grant	644,760	1,037,600	948,500	948,500	(89,100)	-8.6%
General Fund Services	2,485,705	2,801,700	3,249,400	3,403,000	601,300	21.5%
High Intensity Drug Trafficking Area (HIDTA)	(7,062)	—	—	—	—	
Innovation in Reentry Initiative (IRI)	—	—	—	75,000	75,000	
Integration of Sexual Health in Recovery	137,708	218,600	196,500	196,500	(22,100)	-10.1%
Maryland Recovery Net	1,830	52,700	14,300	14,300	(38,400)	-72.9%
Maryland Violence and Injury Prevention	46,760	50,000	28,000	28,000	(22,000)	-44.0%
Mental Health Services Grant	1,382,157	1,362,900	1,421,100	1,468,600	105,700	7.8%
Minority Health & Disparities	228,138	—	—	—	—	
Opioid Local Abatement Fund	—	—	—	6,500,000	6,500,000	
Opioid Operation Command	191,412	217,400	188,300	188,300	(29,100)	-13.4%

**Grant Funds by Division** *(continued)*

Grant Name	FY 2021 Actual	FY 2022 Budget	FY 2022 Estimate	FY 2023 Approved	Change FY22-FY23	
					Amount (\$)	Percent (%)
Overdose Action	138,869	156,300	281,400	281,400	125,100	80.0%
Projects for Assistance in Transition from Homelessness (PATH) Program	106,652	106,700	106,700	106,700	—	0.0%
Prevention and Management	1,573,578	—	—	—	—	—
Prevention Services	471,964	515,500	502,700	502,700	(12,800)	-2.5%
Project Launch	1,434	—	—	—	—	—
Project Safety Net - Governor's Office of Crime Prevention, Youth and Victim Services (GOCPYVS)	767,284	1,213,400	1,214,600	1,214,600	1,200	0.1%
Recovery Support Services	(95,840)	—	—	—	—	—
Regional Partnership Catalyst Grant Program	—	—	200,000	342,000	342,000	—
Substance Abuse Prevention and Treatment Block Grant (SABG) One-Time COVID-19 Supplemental	—	—	131,000	—	—	—
Smart Reentry - Office of Justice Program (OJP)	25,542	—	—	—	—	—
State Opioid Response	54,997	55,000	63,500	54,500	(500)	-0.9%
State Opioid Response MAT Criminal Justice	—	155,200	477,400	477,400	322,200	207.6%
State Opioid Response MAT Detention Center	—	181,500	—	—	(181,500)	-100.0%
State Opioid Response SBIRT	516,450	516,500	281,400	—	(516,500)	-100.0%
Substance Abuse Treatment Outcomes Partnership (STOP)	598,980	935,200	804,500	959,100	23,900	2.6%
Temporary Cash Assistance	328,431	490,400	427,900	491,900	1,500	0.3%
Tobacco Administration	18,111	18,600	18,600	18,600	—	0.0%
Tobacco Cessation	—	171,500	171,800	171,800	300	0.2%
Tobacco Control Community	263,973	80,400	80,600	80,600	200	0.2%
Tobacco School Based	—	13,300	13,300	13,300	—	0.0%
Tobacco Enforcement Initiative	50,844	129,600	130,000	130,000	400	0.3%
Wrap Around Prince George's (System of Care) Implementation	489,269	1,000,000	1,000,000	1,000,000	—	0.0%
<b>Total Behavioral Health</b>	<b>\$14,642,348</b>	<b>\$18,082,000</b>	<b>\$17,957,500</b>	<b>\$23,870,800</b>	<b>\$5,788,800</b>	<b>32.0%</b>
<b>Environmental Health - Disease Control</b>						
Bay Restoration (Septic) Fund	\$67,107	\$132,000	\$132,000	\$132,000	\$—	0.0%
Childhood Lead Poisoning Prevention	169,653	424,100	428,600	428,600	4,500	1.1%
Cities Readiness Initiative (CRI)	102,711	—	—	—	—	—
Hepatitis B Prevention	69,571	63,100	68,000	62,200	(900)	-1.4%
Lead Paint Poisoning Program	60,677	54,300	—	—	(54,300)	-100.0%

## Grant Funds by Division (continued)

Grant Name	FY 2021 Actual	FY 2022 Budget	FY 2022 Estimate	FY 2023 Approved	Change FY22-FY23	
					Amount (\$)	Percent (%)
Public Health Emergency Preparedness (PHEP)	446,616	—	—	—	—	
<b>Total Environmental Health - Disease Control</b>	<b>\$916,335</b>	<b>\$673,500</b>	<b>\$628,600</b>	<b>\$622,800</b>	<b>\$(50,700)</b>	<b>-7.5%</b>
<b>Health and Wellness</b>						
Administrative Care Coordination Grant-Expansion	\$1,330,872	\$1,265,300	\$1,136,300	\$1,254,600	\$(10,700)	-0.8%
Administration Care Coordination Grant-Ombudsman	3,192	—	—	—	—	
Adult Evaluation and Review Services	712,680	945,900	945,900	981,900	36,000	3.8%
Assistance in Community Integration Services (ACIS)	264,141	656,400	316,300	358,900	(297,500)	-45.3%
Building Local Operational Capacity for COVID-19	21,992	100,000	—	—	(100,000)	-100.0%
CareFirst BlueCross BlueShield	—	190,300	—	—	(190,300)	-100.0%
Community Health Resources Commission	—	153,500	—	—	(153,500)	-100.0%
Diabetes, Heart Disease, & Stroke	875,905	2,403,900	2,400,000	2,733,200	329,300	13.7%
Early Learning Center	—	—	270,000	—	—	
General Medical Assistance Transportation	2,431,072	3,759,800	3,492,500	3,825,700	65,900	1.8%
Improving Reproductive and Maternal Health	72,159	—	—	187,400	187,400	
MCHP Eligibility Determination-PWC	1,785,446	2,121,300	1,945,500	1,933,600	(187,700)	-8.8%
<b>Total Health and Wellness</b>	<b>\$7,497,459</b>	<b>\$11,596,400</b>	<b>\$10,506,500</b>	<b>\$11,275,300</b>	<b>\$(321,100)</b>	<b>-2.8%</b>
<b>Office of the Health Officer</b>						
Cities Readiness Initiative (CRI)	\$—	\$132,200	\$131,200	\$131,200	\$(1,000)	-0.8%
Community Health Integration Service System Program	—	—	2,999,900	2,999,900	2,999,900	
COVID-19 Mass Vaccination	—	—	1,825,400	—	—	
COVID-19 Public Health Workforce Supplemental Funding	—	—	2,373,300	2,373,200	2,373,200	
Epidemiology and Laboratory Capacity (ELC) Enhancing Detection	—	—	793,400	—	—	
Epidemiology and Laboratory Capacity (ELC) Enhancing Detection Expansion	—	—	3,697,300	—	—	
FEMA Emergency Protective Matters	5,601,533	—	6,768,000	—	—	
Health Literacy for COVID CARES	—	—	3,999,800	3,871,600	3,871,600	
National Association of County and City Health Officials (NACCHO)	—	7,500	—	—	(7,500)	-100.0%

**Grant Funds by Division** *(continued)*

Grant Name	FY 2021 Actual	FY 2022 Budget	FY 2022 Estimate	FY 2023 Approved	Change FY22-FY23	
					Amount (\$)	Percent (%)
Maryland Medical Assistance Program	—	—	75,000	75,000	75,000	
Medical Reserve	—	—	—	10,000	10,000	
Pediatric Health	—	—	—	4,000,000	4,000,000	
Promoting Positive Outcomes for Infants & Toddlers	75,000	483,600	—	75,000	(408,600)	-84.5%
Public Health Emergency Preparedness (PHEP)	—	508,200	522,200	508,200	—	0.0%
Public Health Emergency Preparedness (PHEP) COVID-19	—	540,000	—	—	(540,000)	-100.0%
Public Health Response - COVID-19	334,665	—	—	—	—	
UASI - MDERS	120,235	100,000	—	—	(100,000)	-100.0%
<b>Total Office of the Health Officer</b>	<b>\$6,131,433</b>	<b>\$1,771,500</b>	<b>\$23,185,500</b>	<b>\$14,044,100</b>	<b>\$12,272,600</b>	<b>692.8%</b>
<b>Subtotal</b>	<b>\$43,892,314</b>	<b>\$58,750,000</b>	<b>\$68,507,900</b>	<b>\$65,824,700</b>	<b>\$7,074,700</b>	<b>12.0%</b>
Total Transfer from General Fund - (County Contribution/Cash Match)	35,927	422,500	374,700	422,300	(200)	0.0%
<b>Total</b>	<b>\$43,928,241</b>	<b>\$59,172,500</b>	<b>\$68,882,600</b>	<b>\$66,247,000</b>	<b>\$7,074,500</b>	<b>12.0%</b>

## Grant Descriptions

### **DIVISION OF FAMILY HEALTH SERVICES -- \$16,011,700**

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. Personal Responsibility Education Programs provide pregnancy prevention education before marriage. The Childhood Asthma program provides healthcare education opportunities on asthma management and home visiting programs. 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 HIV Pre-Exposure Prophylaxis program provides comprehensive education and clinical services regarding Pre-exposure prophylaxis (PrEP), a biomedical intervention for HIV prevention to eligible clients who are HIV negative and are at risk of getting HIV from sex or injection drug use.

### **DIVISION OF BEHAVIORAL HEALTH SERVICES -- \$23,870,800**

Grants within this division support services for adults, adolescents and families with behavioral health needs, including addictions and mental health, as well as prevention services for high-risk youth and families. The Behavioral Health Division supports outpatient and intensive outpatient treatment services delivered by Health Department staff, as well as outpatient and residential treatment services delivered through contracts with private providers. The division also receives funding for interventions to target special populations in the community, including but not limited to tobacco prevention and special services for pregnant and post-partum women. 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. The Regional Partnership Catalyst program will provide a lead evaluator, behavioral health project manager and central referral system coordinator. Funding will provide buprenorphine prescription assistance to individuals who are uninsured or underinsured to eliminate gaps in dosing for individuals who are prescribed medication to treat opioid use disorder. The Opioid funding will address the opioid crisis by increasing access to evidence based treatment, reducing unmet treatment needs for individuals with opioid disorders and reducing opioid related deaths through the provision of prevention, treatment and recovery support services. The Opioid Local Abatement Fund is established to receive funds from the state pursuant to settlements or judgements relating to opioids.

### **DIVISION OF ENVIRONMENTAL HEALTH AND DISEASE CONTROL -- \$622,800**

The Bay Restoration Fund provides funds for on-site sewage disposal system upgrades using the best available technology for nitrogen removal. The division also receives funding for childhood lead poisoning and hepatitis B.

### **DIVISION OF HEALTH AND WELLNESS -- \$11,275,300**

Grant funding supports prevention and/or the mitigation of diabetes, heart disease and stroke 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 transportation to medical appointments for Medical Assistance recipients. The Assistance In Community Integration Services provide assistance to adults reentering the community after incarceration, military service and/or youth who are trying to find their place in the community. 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. The division also receives funding to promote children's health programs to increase eligibility determinations and work



toward the expansion of State Medicaid accessibility by assisting customers with applying for the health insurance, decreasing the timeline for approval, and specially focusing on Medicaid for families, adults, children, and pregnant women.

**OFFICE OF THE HEALTH OFFICER -- \$14,044,100**

Grants within this division support 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; pediatric health services; and implementing emergency response strategies in the event of a man-made or natural disaster. The Cities Readiness Initiative is specific to incident management. The Community Health Integration Service System (CHISS) program provides community health workers to build individual and community capacity to improve health outcomes by increasing health knowledge and self-sufficiency. Funding will also help prevent and respond to COVID-19.

## SERVICE DELIVERY PLAN AND PERFORMANCE

**Goal 1** — To ensure access to and resources supportive of the health and well-being of County residents.

**Objective 1.1** — Increase access to health and well-being resources for County residents.

FY 2027 Target	FY 2020 Actual	FY 2021 Actual	FY 2022 Estimated	FY 2023 Projected	Trend
200,000	128,531	1,828,060	750,000	500,000	↑

### Trend and Analysis

The Health Department is committed to ensuring access to healthcare, which is a key component of the Department's mission and vision. 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. However, it will help to gradually lessen the burden of disease and disability over time. With the continued COVID-19 response, the Health Department has provided numerous testing and vaccination events as well as conducted over 100,000 disease investigations. The Health Department staff participated in numerous community events to promote vaccination and has continued to serve those needing assistance with or at risk for COVID-19 through the COVID CARES program. The work to address COVID-19 is expected to continue into FY 2023 as we transition to an endemic.

### Performance Measures

Measure Name	FY 2019 Actual	FY 2020 Actual	FY 2021 Actual	FY 2022 Estimated	FY 2023 Projected
<b>Workload, Demand and Production (Output)</b>					
Overall client contacts	154,719	114,182	300,000	176,000	150,000
Cumulative public outreach efforts	287	206	1,500	450	250
<b>Impact (Outcome)</b>					
Cumulative residents reached through direct contact or outreach efforts (cumulative)	168,265	128,531	1,828,060	750,000	500,000

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

**Objective 2.1** — Increase the number of residents enrolled in healthy eating and active living interventions.

FY 2027 Target	FY 2020 Actual	FY 2021 Actual	FY 2022 Estimated	FY 2023 Projected	Trend
1,900	1,476	960	1,072	1,400	↓

**Trend and Analysis**

The Health Department is committed to targeting the common risk factors that contribute to the development of chronic diseases such as diabetes, cancer and cardiovascular disease. The department's strategies for the prevention and management of chronic diseases support programming to promote healthy behaviors, early detection and diagnosis of metabolic syndrome, community-specific outreach and education activities and chronic disease prevention and self-management. New activities include the launch of a Population Health section that will encompass many programs to address the social determinants of health and an infection prevention program that targets nursing homes and dialysis centers. The Healthy Corner Store initiative provides education, technical assistance and infrastructure support to increase healthy food inventory in small local stores that sell food products. Additional activities include the provision of training for the community on CDC's evidence-based Diabetes Prevention Program and the Stanford Chronic Disease Self-Management programs. With ongoing COVID-related funding, the Department anticipates an increase in the number of educational campaigns to address the interplay of COVID-19 and chronic diseases. Due to staffing challenges (recruitment/retention), and the prevalence of virtual classes, the Department expects to see a decrease in the FY 2022 estimated numbers leading into the FY 2023 projected trends. The number of programs that support community/clinical linkages is reduced due to one program ending in FY 2023.

**Performance Measures**

Measure Name	FY 2019 Actual	FY 2020 Actual	FY 2021 Actual	FY 2022 Estimated	FY 2023 Projected
<b>Resources (Input)</b>					
Health promotion/community developer staff	2	3	3	4	6
<b>Workload, Demand and Production (Output)</b>					
Monthly public education campaigns addressing chronic disease	2	1	2	2	2
Programs actively supporting community/clinical linkages	n/a	0	3	3	2
<b>Impact (Outcome)</b>					
Residents enrolled in healthy eating and active living interventions	1,607	1,476	960	1,072	1,400

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

**Objective 3.1** — Increase the number of women that use long-acting reversible contraception (LARC) as their primary birth control method.

FY 2027 Target	FY 2020 Actual	FY 2021 Actual	FY 2022 Estimated	FY 2023 Projected	Trend
700	114	66	88	72	↓

### Trend and Analysis

PGCHD is committed to improving birth outcomes for County residents which requires a partnership with health care providers, community members, community stakeholders, Prince George's County Public Schools, local, state and federal partners. Improving birth outcomes begins with promoting health, wellness and prevention. PGCHD does this through its Family Planning and Adolescent Health Clinic by offering health assessments, nutrition education, mental health assessments, reproductive health and linkages to medical homes and community services. Services are available to both male and female residents regardless of their ability to pay for such services. The increase in Reproductive Health Services in FY 2019 is due to both an increase in providers as well as incorporation of Family Planning across clinical services. In FY 2020, the lack of qualified providers to offer LARC has impacted family planning. Staffing turnover from leadership to the frontline has negatively impacted screening for domestic violence (DV) and LARC promotion. FY 2021 estimates and FY 2022 projections are reduced from FY 2019 due to the effect COVID-19 has had on clinic operations.

### Performance Measures

Measure Name	FY 2019 Actual	FY 2020 Actual	FY 2021 Actual	FY 2022 Estimated	FY 2023 Projected
<b>Resources (Input)</b>					
Scheduled family planning appointments	5,899	3,944	1,858	2,692	2,961
<b>Workload, Demand and Production (Output)</b>					
New pregnant females identified through Family Planning appointments and referred to community partners	156	88	31	76	50
Family planning appointments kept	4,146	2,725	1,377	337	1,514
Clients seen at family planning appointments who are screened for domestic violence	1,761	790	1,062	1,348	1,168
<b>Efficiency</b>					
"No Show" rate for family planning appointments	30%	31%	26%	28%	26%
<b>Impact (Outcome)</b>					
Women utilizing LARC	250	114	66	88	72

**Objective 3.2** — Reduce infant mortality.

FY 2027 Target	FY 2020 Actual	FY 2021 Actual	FY 2022 Estimated	FY 2023 Projected	Trend
6	8	7	7	6	↔

**Trend and Analysis**

Assuring the health of the public extends beyond the health status of individuals; it requires a population health approach. Infant mortality is a critical indicator of the overall health of a population because it is directly linked to maternal overall health and the social determinants of health. Social determinants of health are conditions in the environments in which people are born, live, learn, work, play, worship and age that affect a wide range of health, functioning and quality-of-life outcomes and risks. Healthy People 2020 highlights the importance of addressing the social determinants of health by including "Create social and physical environments that promote good health for all" as one of the four overarching goals for the decade. The PGCHD offers the Healthy Beginnings program which addresses maternal and infant health and the impact of social determinants on their overall health and well-being. These programs include funding from Babies Born Healthy (BBH) which uses Registered Nurses and Community Health Workers to work closely with at-risk pregnant women to link them 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) supports mothers and their infants up to age one who are at highest risk of poor health outcomes due to medical and psychosocial issues. Fetal Infant Mortality Review 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 department works closely with UM Capital Region Medical Center 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 2019 Actual	FY 2020 Actual	FY 2021 Actual	FY 2022 Estimated	FY 2023 Projected
<b>Resources (Input)</b>					
Healthy Beginnings staff (budgeted RNs, support staff, etc.)	2	1	2	2	2
<b>Workload, Demand and Production (Output)</b>					
Referrals for Healthy Beginnings case management for children birth to age one	718	1,129	428	416	470
Home visits for new referrals for case management birth to age one	88	86	70	220	77
Home visit referrals for follow-up case management birth to age one	98	70	121	504	133
Unduplicated mothers receiving case management services	547	502	1,671	1,544	1,838
Teens <18 years receiving case management services	49	113	192	156	211
<b>Quality</b>					
Babies/children referred to other County resources	199	497	848	453	546
Mothers referred to Addictions/Mental Health	28	34	35	68	37
<b>Impact (Outcome)</b>					
New mothers that received first trimester care	53%	54%	52%	54%	59%

**Performance Measures** *(continued)*

Measure Name	FY 2019 Actual	FY 2020 Actual	FY 2021 Actual	FY 2022 Estimated	FY 2023 Projected
Low birth weight babies born to County residents	10%	10%	10%	10%	10%
Pre-term babies born to County residents	10%	10%	11%	11%	10%
Annual infant mortality rate (countywide measure) per 1,000 live births	8	8	7	7	6

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

**Objective 4.1** — Increase identification of new HIV cases and linkage to care.

FY 2027 Target	FY 2020 Actual	FY 2021 Actual	FY 2022 Estimated	FY 2023 Projected	Trend
30	38	29	35	32	↓

**Trend and Analysis**

By the end of 2020, there were 31,676 people living with HIV in Maryland, of which, 724 were new diagnoses of HIV in people ages 13 years and older. In comparison, Prince George's County had 8,014 or 26% of the total for Maryland people living with HIV, of which 221 or 31% of the total for Maryland were new infections. Although the County continues to consistently trend down with new HIV infections, it has been the jurisdiction with the highest number of new infections for the past four years. The Health Department's Family Health Services Division continues to offer direct clinical and support services, as well as increasing community partnerships to expand capacity to reach residents. The goals set by federal grantors under the U.S Department of Health and Human Services (HHS) "Ending the HIV Epidemic in the US" are to reduce new infections by 75% by 2025 and by 90% by 2030. How to get there is to: (1) Diagnose all people with HIV as early as possible, (2) Treat people with HIV rapidly and effectively to reach sustained viral suppression, (3) Prevent new HIV transmissions by using proven interventions, including pre-exposure prophylaxis (PrEP) and syringe services programs (SSPs) and (4) Respond quickly to potential HIV outbreaks to get needed prevention and treatment services to people who need them.

**Performance Measures**

Measure Name	FY 2019 Actual	FY 2020 Actual	FY 2021 Actual	FY 2022 Estimated	FY 2023 Projected
<b>Resources (Input)</b>					
Prevention/STI staff	7	5	4	4	4
<b>Workload, Demand and Production (Output)</b>					
HIV related educational outreach and awareness opportunities	20	11	0	4	10
Residents started on PrEP	n/a	0	11	25	50
Residents that receive individual PrEP education	n/a	0	839	330	200
<b>Efficiency</b>					
HIV tests performed through Reproductive Health Resource Center, HIV Clinic, and TB Clinic	2,428	850	262	280	400

**Performance Measures** *(continued)*

Measure Name	FY 2019 Actual	FY 2020 Actual	FY 2021 Actual	FY 2022 Estimated	FY 2023 Projected
Residents retained on PrEP at 180 days	n/a	0	15	15	25
<b>Impact (Outcome)</b>					
New HIV cases per 100,000 persons	41	38	29	35	32
Newly diagnosed HIV positive with documented linkage to care	80%	0%	0%	0%	0%

**Objective 4.2** — Maintain timely reportable condition investigations to protect residents' health.

FY 2027 Target	FY 2020 Actual	FY 2021 Actual	FY 2022 Estimated	FY 2023 Projected	Trend
2,500	21,225	66,315	51,764	31,764	

**Trend and Analysis**

The Health Department is responsible for investigating reportable conditions, including COVID-19, vaccine-preventable diseases, salmonella outbreaks and animal bites. In FY 2020, the emergence of COVID-19 highlighted how critical these investigations are to provide timely investigation and guidance to residents, as well as determine potential contacts. The Communicable Disease Program (CDP) is at the forefront of these activities and works in close partnership with the Maryland Department of Health to ensure investigations are conducted in a thorough and timely manner. As the response to COVID-19 evolves, the CDP will focus on scaling up or down as needed to investigate and help protect County residents.

**Performance Measures**

Measure Name	FY 2019 Actual	FY 2020 Actual	FY 2021 Actual	FY 2022 Estimated	FY 2023 Projected
<b>Resources (Input)</b>					
Core Communicable Disease Investigations staff	n/a	6	5	7	10
<b>Workload, Demand and Production (Output)</b>					
Animal bite investigations	n/a	1,000	1,045	1,350	1,350
Other disease investigations	n/a	19,907	64,987	50,000	30,000
<b>Impact (Outcome)</b>					
Vaccine preventable disease investigations	n/a	21	7	24	24
Total disease investigations	n/a	21,225	66,315	51,764	31,764

**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.

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

FY 2027 Target	FY 2020 Actual	FY 2021 Actual	FY 2022 Estimated	FY 2023 Projected	Trend
75%	41%	20%	36%	48%	↓

### Trend and Analysis

The Food Protection Program's focus is to ensure the food produced and eaten in the County is safe, through monitoring risk factors, documentation of compliance and targeting immediate and long-term issues through active managerial control. High priority food facilities require three inspections, and moderate facilities require two inspections annually per COMAR. While the Food Protection Program staff has consistently performed well above industry standards, meeting the State mandate for inspections continues to be a challenge. An increase of Environmental Health Specialists in FY 2018 helped increase the compliance rate with State mandates; however, since then staff attrition due to compensation lower than surrounding jurisdictions has remained a substantial challenge in maintaining trained staff. The Program has been enrolled in the Food and Drug Administration's (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. In FY 2020, the Food Protection Program inspected approximately 1,200 facilities for complaints related to violation of COVID-19 orders. This additional inspection activity increased to over 3,900 inspections in FY 2021 until the third quarter. The program focused on COVID-related inspections as required by the Governor or Executive Orders to ensure a safe environment to prevent the spread of COVID-19. The Food Protection Program has combined the COVID-19 compliance complaint inspections with routine food service facilities since the first quarter of FY 2022. This will continue until the executive orders are finished. The Momentum permitting and licensing electronic system was launched within the Health Department as of late October 2021. This should assist the public with permitting needs more efficiently.

### Performance Measures

Measure Name	FY 2019 Actual	FY 2020 Actual	FY 2021 Actual	FY 2022 Estimated	FY 2023 Projected
<b>Resources (Input)</b>					
Full time food service facility (FSF) inspectors	12	15	16	17	18
<b>Workload, Demand and Production (Output)</b>					
High and moderate priority FSFs that have permits	2,506	2,543	2,424	2,349	2,300
High and moderate FSF inspections required by the State	6,976	6,873	6,576	6,371	6,240
High and moderate priority FSFs inspected	2,800	2,846	1,321	2,276	3,000
Follow-up inspections of high and moderate priority FSFs	780	797	375	664	700
Specialty inspections completed	0	1,200	3,967	1,200	1,200



**Performance Measures** *(continued)*

Measure Name	FY 2019 Actual	FY 2020 Actual	FY 2021 Actual	FY 2022 Estimated	FY 2023 Projected
<b>Efficiency</b>					
High and moderate FSFs inspected per inspector	237	196	169	268	333
<b>Impact (Outcome)</b>					
Percentage of State-mandated high and moderate inspections conducted	40%	41%	20%	36%	48%

**Goal 6** — To ensure that County residents have access to behavioral health services.

**Objective 6.1** — Maintain behavioral health services for underserved County residents.

FY 2027 Target	FY 2020 Actual	FY 2021 Actual	FY 2022 Estimated	FY 2023 Projected	Trend
100%	95%	95%	97%	98%	↔

**Trend and Analysis**

A number of public behavioral health system services are available to residents of the County including crisis support, inpatient services, intensive substance use disorder outpatient services, medication assisted treatment, outpatient, residential and partial hospitalization treatment services, respite care, residential rehabilitation, supported employment and targeted case management. In addition to these publicly funded programs, the County has been the recipient of grant funds that assist special populations as well as support recovery oriented person-centered services. Many clients need intensive outpatient services which can limit the caseload for behavioral health staff. It is critical that County residents have access to person-centered services and supports necessary to help individuals thrive to facilitate resiliency and recovery, with a focus on early identification and prevention of behavioral health disorders. At the end of FY 2020, the COVID-19 pandemic reduced the number of clients who were served in both jail-based, community and grant-funded behavioral health programs.

In FY 2021, grant funding for behavioral health programs was diverted to public funding for Substance Use Disorder (SUD) treatment to allow residents greater flexibility to choose a provider anywhere in the State of Maryland. Subsequently, clients enrolled in Health Department SUD outpatient services were transitioned to providers to access services within their neighborhood.

**Performance Measures**

Measure Name	FY 2019 Actual	FY 2020 Actual	FY 2021 Actual	FY 2022 Estimated	FY 2023 Projected
<b>Resources (Input)</b>					
Monthly staff providing treatment for substance use	15	15	12	11	11
<b>Workload, Demand and Production (Output)</b>					
Clients enrolled in outpatient services at Health Department programs	780	507	142	125	200

**Performance Measures** *(continued)*

Measure Name	FY 2019 Actual	FY 2020 Actual	FY 2021 Actual	FY 2022 Estimated	FY 2023 Projected
Monthly programs monitored that provide behavioral health services to County residents	177	194	347	430	445
<b>Impact (Outcome)</b>					
Clients with appropriately documented plan for achieving care, treatment or service goals	96%	95%	95%	97%	98%

**Objective 6.2** — Ensure emergency behavioral health services are available for County residents.

FY 2027 Target	FY 2020 Actual	FY 2021 Actual	FY 2022 Estimated	FY 2023 Projected	Trend
92%	85%	87%	88%	90%	↔

**Trend and Analysis**

The County's Crisis Response System (CRS) service provider has been successful in diverting individuals from hospitals and the detention center 87% of the time allowing individuals who experience a mental health crisis to be referred to community-based services when it is safe to do so. This percentage has slightly increased from FY 2020. The Department continues to collaborate with community-based programs and the current CRS provider to address gaps in the service array and support the expansion in services for those individuals, and their families who experience behavioral health crises.

**Performance Measures**

Measure Name	FY 2019 Actual	FY 2020 Actual	FY 2021 Actual	FY 2022 Estimated	FY 2023 Projected
<b>Resources (Input)</b>					
Crisis Response System (CRS) staff	12	13	13	13	13
<b>Workload, Demand and Production (Output)</b>					
Calls to the CRS	8,587	6,498	3,629	3,152	6,500
Mobile Crisis Team dispatches	828	636	506	580	650
<b>Quality</b>					
Response time for CRS Mobile Crisis Team dispatches (average)	27:00	29:00	31:00	30:00	30:00
<b>Impact (Outcome)</b>					
Clients receiving CRS services who divert institutionalization	85%	85%	87%	88%	90%