

Health Department

Mission Statement: The mission of the Alexandria Health Department is to provide public health programs and related healthcare services for the residents of Alexandria that prevent and control disease, protect the environment, eliminate unsanitary and unsafe conditions and promote the physical and emotional well-being all Alexandria residents, and promote preparedness for and response to public health emergencies.

Expenditure and Revenue Summary

City Expenditure By Classification	FY 2010 Actual	FY 2011 Approved	FY 2012 Approved	% Change 2011-2012
Personnel	\$1,691,825	\$1,919,329	\$1,952,237	1.7%
Non-Personnel	4,871,616	5,122,542	4,967,671	-3.0%
Capital Goods Outlay	0	34,117	20,637	-39.5%
Total Expenditures	\$6,563,441	\$7,075,988	\$6,940,545	-1.9%
Less Revenues				
Internal Services	\$0	\$34,117	\$20,637	-39.5%
Special Revenue Funds	3,843	0	0	n/a
Total Designated Funding Sources	\$3,843	\$34,117	\$20,637	-39.5%
Net General Fund Expenditures	\$6,559,598	\$7,041,871	\$6,919,908	-1.7%
Total Department City FTE's	17.6	18.6	18.6	0.0%

Highlights

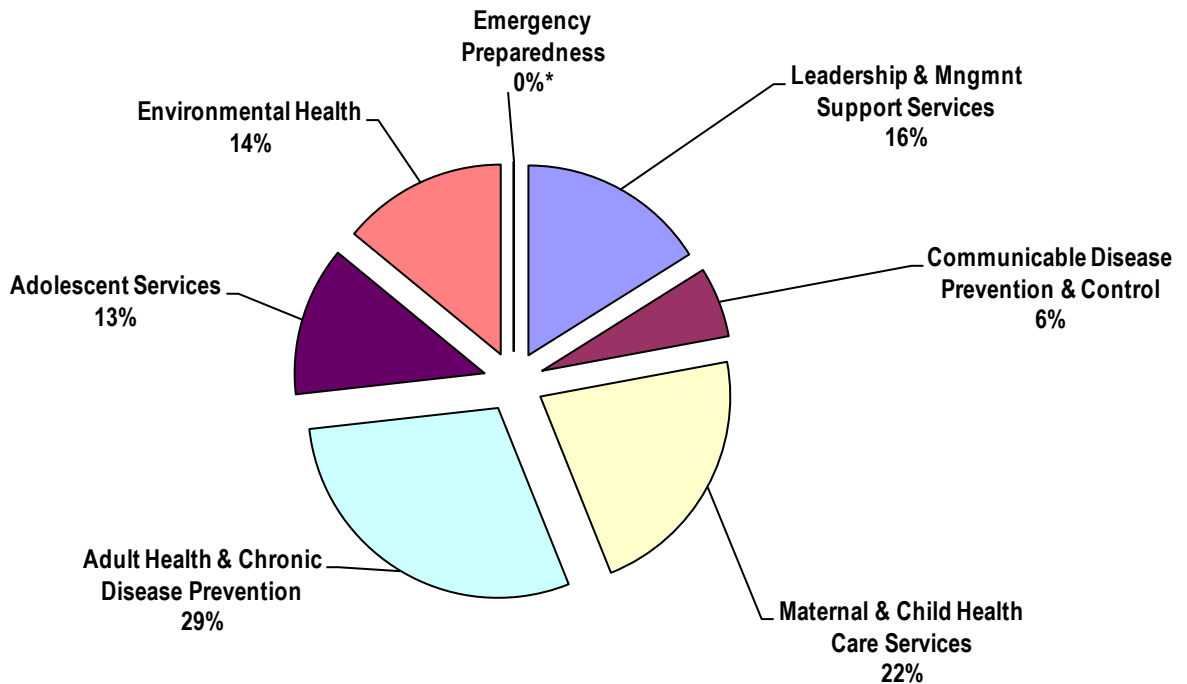
- In FY 2012, the General Fund budget for the Alexandria Health Department decreases by \$121,963, or 1.7%.
- FY 2012 personnel costs (for City add-on employees) increase by \$32,908, or 1.7%, due to an increase in merit step and benefit costs, offset by a decrease in the City retirement contribution for State employees.
- FY 2012 non-personnel costs decrease by \$154,871, or 3.0%, partially due to decreases in professional health services (\$55,617) and utilities (electric - \$35,892); partially offset by increases in other equipment/support (\$36,043) and facility maintenance (\$26,515) costs to reflect actual contract costs. In addition, telecommunication system costs (\$15,889) were reallocated from ITS to user departments during FY 2012.
- Also included in the personnel and non-personnel costs above is the decrease in the City supplement to the State by \$145,897, or 3.3%, due to the elimination of four State employees in the pharmacy division.
- Capital Outlay decreases by \$13,480, or 39.5%, to reflect FY 2012 vehicle replacement costs.
- In FY 2011, ANSHI began to take over providing primary medical care for patients of the Casey Clinic. City support for the increased number of patients is to be provided from FY 2011 Health Department year-end savings. The Health Department and ANSHI are currently working together to develop a proposal for the reallocation of funds within the Health Department budget. The FY 2012 approved budget is based on FY 2011 allocations. Once the FY 2011 proposal is developed, the FY 2012 budget will be reallocated to provide additional funding to ANSHI for the Casey Clinic patients from existing Health Department resources.

Selected Performance Measures

Selected Performance Measures	FY 2010 Actual	FY 2011 Approved	FY 2012 Approved
Number of refugee health assessments	17	40	20
Number of immunization visits*	23,770	4,800	5,000
Number of pre-natal care visits	5,773	6,100	6,000
Number of pediatric visits	5,374	6,000	5,500
Number of medical exams provided by Adolescent Health Clinic	636	900	1,200
Number of food safety evaluations conducted	2,253	2,000	2,000

*FY 2010 increase due to H1N1 vaccinations.

FY 2012 Approved City General Fund Expenditures



*The Emergency Preparedness Program is supported by federal funds.

Health Department Funding and Program Expenditure Information

The Alexandria Health Department is one of 35 State health district offices of the Virginia Department of Health. While it is not a department of the Alexandria City government, the City and the Health Department work closely on health issues. The Health Department is funded through a combination of City funding, City and State cooperative funding, State and federal grants, and client fees. The “cooperative budget” consists of the State’s General Fund appropriation to the Health Department, which is “matched” by the City, resulting in an allocation that is 55% State funding and 45% City funding. In addition, the City supplements the salaries and retirement benefits of most State cooperative employees, so that they are comparable to City salary scales and retirement benefits. The City’s 45% match and the salary supplement are committed annually via a signed “local agreement” between the City and the State Department of Health. These funds are paid on a quarterly basis to the State Department of Health. The State’s General Fund appropriation to the Health Department and federal and State grants are not part of the City’s All Funds budget.

In addition, State funding is based on a different programmatic structure than the programs and activities identified in the City’s Managing for Results Initiative. Consequently, some programs or activities reported show \$0 City dollars or no FTEs. These activities are funded either through the cooperative budget or by federal or State grants. Performance measures for these programs and activities are provided, if available, since these are important functions of the Health Department, regardless of the source of funding. In an effort to make the Health Department’s budget more informative, the following information also includes State and grant funding, by program, to give a more complete picture of the Health Department’s total budget. However, breakouts of State and grant funding by activities are not available.

Health Department

Program Level Summary Information

City Expenditure Summary

City Expenditure By Program	FY 2010 Actual	FY 2011 Approved	FY 2012 Approved	% Change 2011-2012
Leadership & Management Support Services	\$374,953	\$398,249	\$439,261	10.3%
Communicable Disease Prevention & Control	146,837	163,625	166,362	1.7%
Maternal & Child Health Care Services	498,449	597,340	572,997	-4.1%
Adult Health & Chronic Disease Prevention	693,441	800,138	817,840	2.2%
Adolescent Services	329,600	347,639	357,912	3.0%
Environmental	228,173	383,639	346,712	-9.6%
Emergency Preparedness*	0	0	0	NA
City Supplement to State budget	4,291,987	4,385,358	4,239,461	-3.3%
Total City Expenditures	\$6,563,440	\$7,075,988	\$6,940,545	-1.9%

**The Emergency Preparedness Program is supported by federal funds.

Staffing Summary

Authorized Positions (FTE's) by Program*	FY 2010 Actual	FY 2011 Approved	FY 2012 Approved	% Change 2011-2012
Leadership & Management Support Services	2.0	2.0	2.0	0.0%
Communicable Disease Prevention & Control	1.5	1.5	1.5	0.0%
Maternal & Child Health Care Services	3.5	3.5	3.5	0.0%
Adult Health & Chronic Disease Prevention	6.0	6.0	6.0	0.0%
Adolescent Services	3.4	3.4	3.4	0.0%
Environmental	1.9	2.0	2.0	0.0%
Emergency Preparedness (no City-funded staff)	0.0	0.0	0.0	NA
City Supplement to State budget (no staff)	0.0	0.0	0.0	NA
Total FTE's	18.2	18.3	18.3	0.0%

*FTEs reported here are for City staff and do not include approximately 100 FTEs funded by the State cooperative budget (79 FTEs) or by other State and federal funds (21 FTEs).

Health Department

Health Department Programs and Activities

Leadership and General Management

Leadership and General Management
Partnership for Healthier Alexandria

Communicable Disease

TB Elimination
STD Control
Immunization
Disease Surveillance
HIV Outreach & Prevention

Maternal & Child Health Care Services

Prenatal Care & Case Mgt.
Pediatric Care
Family Planning
WIC Supplemental Food Program

Adult Health & Chronic Disease Prev.

Chronic Disease Care
HIV/AIDS Care
Dental Care
Pharmacy Services and Laboratory
Testing

Adolescent Services

Teen Pregnancy Prevention
Adolescent Health Clinic

Environmental Health

Food Safety
Vector Control
Aquatic (Pool) Health and Safety
Respiratory Health and Other EH
Activities

Emergency Preparedness

Planning
Training
Community Outreach/Preparation

City Supplement to State Budget

Dept Info

Department Contact Info

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Health Department

Leadership & Management Support Services

The goal of Leadership and Management Support Services is to provide overall agency leadership and strategic goal setting and to provide effective and efficient management support to the agency.

Program Totals	FY 2010 Actual	FY 2011 Approved	FY 2012 Approved
% of All Funds budget	5.7%	5.6%	6.3%
City Add-On Funding	\$374,953	\$398,249	\$439,261
City Cooperative/Supplemental Funding	\$1,279,753	\$1,350,659	\$1,391,236
State Funding	\$995,889	\$968,529	\$1,077,363
Grants	\$2,434	\$12,289	\$12,009
Fee Revenue	\$137,852	\$197,879	\$197,879
TOTAL	\$2,790,880	\$2,927,605	\$3,117,748
Program Outcomes			
% of departmental effectiveness targets met	100%	100%	100%

Activity Data

LEADERSHIP & GENERAL MANAGEMENT – The goal of Leadership and General Management is to provide financial, personnel and support services in order to facilitate the operations of the Alexandria Health Department (AHD).	FY 2010 Actual	FY 2011 Approved	FY 2012 Approved
Expenditures (City add-on funding only)	\$281,995	\$307,384	\$342,674
FTE's	1.0	1.0	1.0
\$ amount of departmental expenditures (City All Funds budget only)	\$6,563,441	\$7,075,988	\$6,940,545
Leadership & General Management expenditures as % of department total	4.3%	4.3%	4.9%
# of Department FTEs managed	117.7	122.35	118.60
% of departmental effectiveness targets met	100%	100%	100%

PARTNERSHIP FOR A HEALTHIER ALEXANDRIA – The goal of Partnership for a Healthier Alexandria is to promote coalition building, collaborative planning and community action for Alexandria in order to provide a safe and healthy community.			
Expenditures (City add-on funding only)	\$92,958	\$90,865	\$96,587
FTE's	1.0	1.0	1.0
# of community partnerships/linkages created	300	295	295

Health Department

Communicable Disease Prevention and Control

The goal of Communicable Disease Prevention and Control is to provide prevention and treatment services to the community in order to minimize exposure to, reduce incidence of, and minimize the impact of living with a communicable disease.

Program Totals	FY 2010 Actual	FY 2011 Approved	FY 2012 Approved
% of All Funds budget	2.2%	2.3%	2.4%
City Add-On Funding	\$146,837	\$163,625	\$166,362
City Cooperative/Supplemental Funding	\$314,490	\$519,993	\$523,331
State Funding	\$244,733	\$298,933	\$412,050
Grants	\$617,032	\$873,991	\$959,709
Fee revenue	\$28,407	\$55,500	\$55,500
TOTAL	\$1,351,499	\$1,912,042	\$2,116,952
Program Outcomes			
% of communicable disease outbreaks effectively contained to the population of origin	100%	95%	95%

Activity Data

TUBERCULOSIS ELIMINATION – The goal of TB Elimination is to provide clinical and intervention services to the community in order to reduce the incidence of disease.	FY 2010 Actual	FY 2011 Approved	FY 2012 Approved
Expenditures (City add-on Funding only)	\$102,679	\$106,580	\$107,621
FTE's	1.0	1.0	1.0
# of Latent TB Infection (LTBI) cases initiating treatment	240	300	300
# of active TB cases receiving direct observed therapy	16	30	18
# of Refugee Health Assessments*	17	40	20

*Significant decline in the refugee population immigrating to Alexandria due to housing costs.

SEXUALLY TRANSMITTED DISEASE CONTROL – The goal of Sexually Transmitted Disease Control is to provide clinical and preventive services to the community in order to reduce the incidence of disease.			
Expenditures (City add-on funding only)	\$6,478	\$19,404	\$20,561
FTE's	0.0	0.0	0.0
# of STD Clinic visits*	1,478	1,200	1,500
% of persons attending STD Clinic diagnosed and treated for an STD	15%	15%	15%

*Staffing and vacancies affect clinic availability and it is difficult to project walk-in clinics.

IMMUNIZATION – The goal of Immunization is to provide vaccinations and related service to the community in order to prevent and reduce the incidence of vaccine preventable diseases.			
Expenditures (City add-on funding only)	\$0	\$0	\$0
FTE's	0.0	0.0	0.0
# of immunization visits*	23,770	4,800	5,000
% of kindergarteners entering school with up-to-date immunization status	99%	100%	100%

*FY 2010 increase due to H1N1 vaccinations.

Health Department

Communicable Disease - Continued

Activity Data

DISEASE SURVEILLANCE – The goal of Disease Surveillance is to detect, investigate and monitor infectious diseases for the community in order to prevent their spread in the community.	FY 2010 Actual	FY 2011 Approved	FY 2012 Approved
Expenditures (City add-on funding only)	\$0	\$0	\$0
FTE's	0.0	0.0	0.0
# of communicable disease reports investigated	282	350	300
% of reported cases with investigation begun within five (5) days	95%	95%	95%

EARLY DETECTION AND PREVENTION OF HIV – The goal is early diagnosis of HIV to notify partners of exposure to infection and reduce infectivity of persons living with HIV connection to medical care.			
Expenditures (City add-on funding only)	\$37,679	\$37,641	\$38,180
FTE's	0.5	0.5	0.5
# of HIV tests conducted in Alexandria by Health and Community partners	1,289	2,000	1,500
% of newly diagnosed HIV cases interviewed for partner notification and connection to medical care.	76%	75%	75%

Maternal and Child Health Care Services

The goal of Maternal and Child Health Care Services is to promote and protect the health of Alexandrians through the provision of reproductive, prenatal and pediatric care and nutrition services to low income residents.

Program Totals	FY 2010 Actual	FY 2011 Approved	FY 2012 Approved
% of All Funds budget	7.6%	8.4%	8.3%
City Add-On Funding	\$498,449	\$597,340	\$572,997
City cooperative/supplemental Funding	\$1,204,105	\$1,307,363	\$1,336,141
State Funding	\$937,021	\$757,575	\$930,026
Grants	\$621,489	\$803,336	\$866,837
Fee Revenue	\$47,182	\$22,660	\$37,360
TOTAL	\$3,308,246	\$3,488,274	\$3,743,361
Program Outcomes			
Low birth-weight rate for patients (Target: maintain below the State rate of 7.0 per 1,000 live births)	7 per 1,000	7 per 1,000	7 per 1,000

Activity Data

PRENATAL CARE & CASE MANAGEMENT – The goal of Prenatal Care and Case Management is to assist high risk pregnant women and their infants to prevent low birth weight and other poor birth outcomes, and to ensure linkage to appropriate services.	FY 2010 Actual	FY 2011 Approved	FY 2012 Approved
Expenditures (City add-on funding only)	\$448,741	\$537,832	\$514,913
FTE's	2.6	2.6	2.6
# of visits	5,773	6,100	6,000
% of pregnant women enrolled in prenatal care in their first trimester	38%	40%	40%
% of patients who receive adequate prenatal care (7 visits if enter in first trimester, 5 in second, 3 in third)	86%	80%	85%

Health Department

Maternal and Child Health Care Services - Continued

Activity Data

PEDIATRIC CARE – The goal of Pediatric Care is to provide screening and healthcare to high-risk infants and children, educate families about infant and child care, and link families to services in order to improve children's health.	FY 2010 Actual	FY 2011 Approved	FY 2012 Approved
Expenditures (City add-on funding only)	\$49,708	\$59,508	\$58,084
FTE's	0.9	0.9	0.9
# of pediatric (Child Health Clinic) visits	5,374	6,000	5,500
# of Community Access To Child Health program (CATCH) visits.*	125	100	100
% of children (0-5) designated as founded CPS cases receiving coordinated services (CATCH)	100%	100%	100%

*Reduction in Child Protective Services (CPS) cases.

FAMILY PLANNING – The goal of Family Planning is to provide reproductive healthcare, education and counseling to ensure that low-income women can plan pregnancies that occur by choice and under low-risk circumstances.			
Expenditures (City add-on funding only)	\$0	\$0	\$0
FTE's	0.0	0.0	0.0
# of family planning patients enrolled for one year*	3,060	3,500	3,500

*Health Department initiative to increase family planning services.

WOMEN, INFANTS & CHILDREN SUPPLEMENTAL FOOD PROGRAM (WIC) – The goal of Women Infants and Children Supplemental Food Program is to promote the nutritional health of high risk pregnant women, infants and children and prevent poor birth outcomes through nutrition education, supplemental food vouchers and linkages to medical and social services to improve the health of children.			
Expenditures (City add-on funding only)	\$0	\$0	\$0
FTE's	0.0	0.0	0.0
\$ redeemed value of WIC vouchers	\$2,176,728	\$2,000,000	\$2,100,000
# of active participants	3,479	3,500	3,500
% of pregnant women given appointment in first trimester	26%	40%	30%

Adult Health and Chronic Disease Prevention

The goal of Adult Health & Chronic Disease Prevention is to promote and protect the health of Alexandrians through providing primary health care, nurse case management, and nutrition services to vulnerable populations and to develop partnerships that empower people within the community to improve their health status.

Program Totals	FY 2010 Actual	FY 2011 Approved	FY 2012 Approved
% of All Funds budget	10.6%	11.3%	11.8%
City Add-On Funding	\$693,441	\$800,138	\$817,840
City Cooperative/Supplemental Funding	\$888,084	\$891,037	\$526,076
State Funding*	\$691,098	\$900,126	\$502,369
Grants	\$0	\$0	\$0
Fee Revenue	\$322,750	\$244,329	\$250,500
TOTAL	\$2,595,373	\$2,835,630	\$2,096,785
Program Outcomes			
% of HIV/AIDS patients who remain connected to care annually	97%	98%	98%

Activity Data

CHRONIC DISEASE CARE – The goal of Chronic Disease Care is to provide health care, screening, case management, nutrition services, and education to uninsured and underinsured residents with chronic diseases to optimize health and avoid unnecessary hospitalization.	FY 2010 Actual	FY 2011 Approved	FY 2012 Approved
Expenditures (City add-on funding only)*	\$324,680	\$321,822	\$324,406
FTE's	2.8	1.8	1.8
# of patients evaluated and treated**	3,546	4,200	2,500
% of chronic disease adult patients immunized for influenza	*27%	50%	50%

*Expenditures include laboratory services beginning in FY 2011.

**FY 2010 patients received H1N1 and reduced General Medical services in April 2010 in conjunction with the State pharmacy closure. In FY 2012, further reductions in General Medical Services were transferred to ANHSI.

HIV/AIDS CARE - The goal of HIV/AIDS Care is to provide comprehensive health care services and referrals to qualifying residents with HIV or AIDS to optimize their health, avoid unnecessary hospitalization, and prevent the spread of infection.			
Expenditures (City add-on funding only)	\$62,013	\$62,052	\$63,212
FTE's	0.7	0.7	0.7
# of adults served*	226	200	235
% of patients remaining connected to care	97%	98%	98%
# of HIV/AIDS dental visits	161	130	150

*increase in HIV patients.

DENTAL CARE – The goal of Dental Care is to provide selected dental services to uninsured and low income adults.			
Expenditures (City add-on funding only)	\$175,532	\$184,692	\$193,331
FTE's	1.5	1.5	1.5
# of adult dental visits	1,159	1,400	1,200
Cost per adult dental visit	\$151	\$133	\$161
% of dental emergencies resolved (target = 98%)	98%	95%	98%

Adult Health and Chronic Disease Prevention - Continued

Activity Data

PHARMACY SERVICES AND LABORATORY TESTING – The goal of Pharmacy Services and Laboratory Testing is to purchase and dispense medications; collect, process and transport laboratory specimens; and provide patient and clinical education to staff and consumers of the Department to improve the outcomes of all activities of the Alexandria Health Department.	FY 2010 Actual**	FY 2011 Approved	FY 2012 Approved
Expenditures (City add-on funding only)*	\$131,216	\$231,572	\$236,891
FTE's	1.0	2.0	2.0
# of prescriptions filled (total)**	17,473	6,500	6,500
Cost per prescription filled	\$1.68	\$19.97	\$20.27
# of specimens processed to DCLS (State lab contract)	9,365	9,500	9,500
Cost per specimens processed	\$10.89	\$10.71	\$11.06

*State funding for pharmacy staff was eliminated in mid-FY 2010 and the City added one full-time position in FY 2011. The State continues to fund the purchase of pharmaceuticals and NOVA Scripts Central provides for eligible patients with medicine and a \$5 co-pay.

**FY 2010 actual # of prescriptions filled include 982 free drugs dispensed through the indigent program. FY 2011 # of prescriptions filled includes 1,000 free drugs dispensed through the indigent program.

Health Department

Adolescent Services

The goal of the Adolescent Services Program is to provide clinical services, community educational and life skills programs that will assist in the reduction of the incidence of teen pregnancy in school age children in the City of Alexandria.

Program Totals	FY 2010 Actual	FY 2011 Approved	FY 2012 Approved
% of All Funds budget	5.0%	4.9%	5.2%
City Add-On Funding	\$329,600	\$347,639	\$357,912
City Cooperativ e/Supplemental Funding	\$0	\$0	\$0
State	\$0	\$0	\$0
Grants	\$124,726	\$130,000	\$65,000
Fee Revenue	\$0	\$0	\$0
TOTAL	\$124,726	\$350,052	\$422,912
Program Outcomes			
Pregnancy rate (per 1,000 female residents) among youths 12-19 years old*	NA	4.50	4.50

*The teen pregnancy rate is reported by calendar year. CY2008 teen pregnancy rate of 48 / 1,000 female residents was reported for 12-19 year olds. CY2010 data is not available at this time.

Activity Data

TEEN PREGNANCY PREVENTION – The goal of Teen Pregnancy Prevention is to provide outreach and education to youth families in the schools and community and provide support to collaborative programs of ACPS, DCHS and ACAP to reduce the incidence of teen pregnancy in school age youth.	FY 2010 Actual	FY 2011 Approved	FY 2012 Approved
Expenditures (City add-on funding only)	\$0	\$0	\$0
FTE's	0	0	0
# of youth attending Teen Pregnancy Prevention Program	180	200	200

TEEN WELLNESS CENTER – (ADOLESCENT) The goal of the Teen Wellness Center is to provide comprehensive medical and psychosocial services to the Alexandria adolescent population 12-19 years of age, to ensue that each and every Alexandria teen succeeds-physically, emotionally, socially and academically collaboratively providing and easily accessible wellness center at T.C. Williams High School.			
Expenditures (City add-on funding only)	\$329,600	\$347,639	\$357,912
FTE's	3.4	3.4	3.4
# of sports/routine physical exams	636	900	1,200
# of unduplicated family planning patients	507	450	1,000
# of psych/soc visits	291	1,000	400
% of adolescent residents receiving health services at the Adolescent Health Clinic/TWC	25%	20%	40%

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Environmental Health

The goal of Environmental Health is to prevent disease, promote healthy environments for the community and provide environmental health services.

Program Totals	FY 2010 Approved	FY 2011 Approved	FY 2012 Approved
% of All Funds budget	3.5%	5.4%	5.0%
City Add-On Funding	\$228,173	\$383,639	\$346,712
City Cooperative/Supplemental Funding	\$468,751	\$615,443	\$523,743
State Funding	\$364,776	\$385,592	\$404,549
Grants	\$0	\$0	\$0
Fee Revenue*	\$115,175	\$62,074	\$192,749
TOTAL	\$1,176,875	\$1,446,748	\$1,467,753
Program Outcomes			
% of complaint investigations initiated within 2 business days.	99.3%	95%	95%
% of EH complaints by residents that are resolved within 30 days	99.7%	97%	97%

* Projected increase in State and local fees is due to total 100% City fees collected (\$28,102) and the remaining balance is shared revenue.

Activity Data

FOOD SAFETY – The goal of the Food Safety is to permit and regularly evaluate food establishments for compliance with state food codes, to train and educate food establishment operators about good safety practices, and, as needed, to take enforcement action to protect public health.	FY 2010 Actual	FY 2011 Approved	FY 2012 Approved
Expenditures (City add-on funding only)	\$72,305	\$44,711	\$14,000
FTE's*	0.4	0.4	0.0
# of food safety evaluations conducted.	2,253	2,000	2,000
# of the 9 FDA National Retail Regulatory Program Standards met	5	8	8
# of complaints about food establishments investigated	147	210	150
% of Food Safety related resident complaints resolved within 30 days	100.0%	98%	98%

VECTOR CONTROL – The goal of the Vector Control is to monitor and control mosquito populations and mosquito-borne diseases. The program also monitors and responds to rabies incidents and numerous other vector related issues.			
Expenditures (City add-on funding only)	\$67,888	\$225,327	\$237,511
FTE's*	1.3	1.3	1.7
# of animals tested for rabies	49	50	50
# of mosquitoes trapped	28,000	30,000	28,000
% of Vector Control related resident complaints resolved within 30 days	100.0%	97%	97%

*The change from FY 2011 to FY 2012 is the result of transferring staff time (0.4FTE) from Food Safety to be properly reflected in Vector Control.

AQUATIC (POOL) HEALTH AND SAFETY – The goal of the Aquatic Health and Safety is to permit and regularly evaluate pools and spas for compliance with the Aquatic Health Ordinance for these facilities in order to protect public health and improve sanitary conditions at these facilities.			
Expenditures (City add-on funding only)	\$42,057	\$63,139	\$63,159
FTE's	0.1	0.1	0.1
# of pool and spa evaluations conducted	1149	1140	1140
# of pools cited resulting in pool closures	34	50	30
Cost per seasonal pool evaluation (City funded)	\$36	\$55	\$63

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Environmental Health – Continued

Activity Data

RESPIRATORY HEALTH AND OTHER ENVIRONMENTAL HEALTH ACTIVITIES – The goal of the Respiratory Health is to reduce respiratory illness in Alexandria through community educational outreach activities, enforcement of state and city smoking regulations, and investigation of respiratory health complaints associated with mold, toxic chemicals and allergens.	FY 2010 Actual	FY 2011 Approved	FY 2012 Approved
Expenditures (City add-on funding only)	\$45,923	\$50,462	\$32,042
FTE's	0.3	0.3	0.3
# of respiratory health complaints investigated	81	100	100
# of other environmental health complaints investigated	16	10	15
% of Respiratory Health related resident complaints resolved within 30 days	100.0%	95%	95%

Emergency Preparedness

The goal of Emergency Preparedness is to better assure the health and safety of Alexandria residents and visitors; the goal of the Alexandria Health Department Emergency Preparedness Program is to conduct planning, training, and community outreach that helps all people in Alexandria be personally ready for health emergencies.

Program Totals	FY 2010 Actual	FY 2011 Approved	FY 2012 Approved
% of All Funds budget	0.0%	0.0%	0.0%
City Add-On Funding	\$0	\$0	\$0
City Cooperative/Supplemental Funding	\$0	\$0	\$0
State	\$0	\$0	\$0
Grants	\$262,037	\$292,072	\$207,586
Fee Revenue	\$0	\$0	\$0
TOTAL	\$262,037	\$292,072	\$207,586
Program Outcomes			
% of State-identified Critical Tasks met	100%	100%	100%
% of CDC and UASI Critical Tasks completed	100%	100%	100%
# of community volunteers trained and ready	400	600	600

Activity Data

PLANNING – The goal of Planning is to assure the City of Alexandria is ready for all potential public health emergencies.	FY 2010 Actual	FY 2011 Approved	FY 2012 Approved
Expenditures (City add-on funding only)	\$0	\$0	\$0
FTE's	0.0	0.0	0.0
# of State identified Critical Tasks met (out of 28 tasks)	28	28	28
# of CDC, Urban Area Security Initiative, and Cities Readiness objectives met (out of 9 total)	9	9	9
% of Public Health Emerg Operations Plan (EOP) elements updated annually	100%	100%	100%

Health Department

Emergency Preparedness, continued

Activity Data

TRAINING – The goal of Training is to assure that all needed Public Health paid staff and volunteers are prepared to respond effectively in all types of potential Public Health Emergencies.	FY 2010 Actual	FY 2011 Approved	FY 2012 Approved
Expenditures (City add-on funding only)	\$0	\$0	\$0
FTE's	0.0	0.0	0.0
% of Department staff trained in roles for health emergencies	80%	100%	100%
# of volunteers trained	200	600	600
% of all listed volunteers who are current in their training	40%	80%	80%

COMMUNITY OUTREACH & PREPARATION – The goal of Community Outreach and Preparation is to provide accurate information and viable planning guidance to help the general public, and all relevant local government and non-government agencies, be ready for public health emergencies.			
Expenditures (City add-on funding only)	\$0	\$0	\$0
FTE's	0.0	0.0	0.0
# of public information contacts	2,000	2,500	2,500

City Supplement to State Budget (spread into program totals above)

Program Totals	FY 2010 Actual	FY 2011 Approved	FY 2012 Approved
% of All Funds budget	65.4%	62.0%	61.1%
City Cooperative/Supplemental Funding	\$4,291,987	\$4,385,358	\$4,239,461
Less Revenues	0	0	0
Net General Fund Expenditures	\$4,291,987	\$4,385,358	\$4,239,461
Program Outcomes	N/A	N/A	N/A

Activity Data

CITY SUPPLEMENT TO STATE BUDGET - The City Supplement to the State includes the City's 45% match to the State General Fund allocation; the City's salary supplement to State Co-op employees; City supplemental retirement benefits for the Health Department's full-time State employees; and the Contingent Account (if any). The City's 45% match and the salary supplement are paid quarterly to the State Department of Health, as part of the Local Agreement with the State.	FY 2010 Actual	FY 2011 Approved	FY 2012 Approved
Expenditures (City Cooperative/Supplemental Funding) Plus supplemental retirement to state employees*	\$4,291,987	\$4,385,358	\$4,239,461
FTE's (no staff)	0.0	0.0	0.0

* The change from FY 2011 to FY 2012 (\$145,897, or 3.3% decrease) is due to the elimination of four State employees in the pharmacy division. This results in a reduction to the City match to the State budget.

Other Health Activities

Mission Statement: This section summarizes City contributions to regional and non-profit organizations that provide health care or health-related services to Alexandria residents. (The City also provides funds to the Alexandria Health Department, a State agency.)

FY 2012 Budget Summary Table

Expenditure By Organization	FY 2010 Actual	FY 2011 Approved	FY 2012 Approved	\$ Change 2012-2011
INOVA Alexandria Hospital	\$700,000	\$700,000	\$800,000	\$100,000
Arlandria Health Center	\$325,000	\$325,000	\$325,000	\$0
Health Systems Agency of Northern Virginia	<u>\$13,600</u>	<u>\$13,600</u>	<u>\$13,600</u>	\$0
Net General Fund Expenditures	<u>\$1,038,600</u>	<u>\$1,038,600</u>	<u>\$1,138,600</u>	\$100,000

Selected Performance Measures	2009 Actual	2010 Actual
INOVA Total \$ Amount of Indigent Care Provided to Alexandria Residents (CY)	\$10,900,000	\$12,100,000
Arlandria Clinic # of Alexandria Patient Visits (FY)	17,460	20,427
Arlandria Clinic City Contribution Per Visit (FY)	\$18.6	\$15.9

Other Health Background

INOVA Alexandria Hospital

INOVA Alexandria Hospital and the City of Alexandria have a long history of cooperation in attempting to meet the health care needs of our low-income residents. Since the mid 1940s the Hospital has been exempt from the payment of real property and business tangible taxes to the City. In 1982 the City contributed \$315,000 to the Hospital for "indigent care." The amount gradually increased, and since 1991, the City has contributed \$700,000 annually to the Hospital to help offset costs for indigent inpatient care for City residents. For FY 2012, City Council added \$100,000 to the contribution to the Hospital to address indigent care in the City.

Arlandria Health Center*

The total FY 2011 approved budget from all sources for the Arlandria Health Center is \$6.2 million; the proposed budget for FY 2012, including all sources of funds, is \$5.9 million, a decrease of \$0.3 million. In FY 2010 ANHSI received 32% (\$1.8 million) of its funding from federal sources, such as the federal Community Health Center Program, under the Health Resources and Service Administration's Bureau of Primary Health Care.

* The Arlandria Health Center (formerly the Arlandria Health Center for Women and Children) began in 1993 as a unique public-private partnership between the City of Alexandria, the Alexandria Health Department, the Commonwealth of Virginia, and the private sector. Alexandria Neighborhood Health Services, Inc. (ANHSI), a not-for-profit organization, was created in 1996 to sustain and manage the clinic as the initial federal funding obtained by the Alexandria Health Department ended. In late 2003, ANHSI was awarded a three-year federal grant to establish and operate a Community Health Center (CHC) in Alexandria, known as the Arlandria Health Center. As Northern Virginia's first Federally Qualified Community Health Center, the Arlandria Health Center expanded its array of primary care services and began serving men.

Other Health Activities

ANHSI reports serving 11,353 individuals during FY 2010 and providing 36,476 health care visits. Recent data provided by ANHSI indicates that 56% or 6,358, are from the City of Alexandria with 20,427 patient visits; 12%, or 1,362, from Arlington County; 30%, or 3,405, from Fairfax County, Fairfax City and Falls Church; and 2%, or 227, from Prince William and Loudoun Counties. ANHSI also reports that 82% of patients are uninsured, 94% of adults and 35% of children are uninsured. In addition, ANHSI reports that Arlington County contributes approximately \$45,846 of in-kind support for dental and primary care services.

In FY 2011, ANSHI began to take over providing primary medical care for patients of the Casey Clinic. City support for the increased number of patients is to be provided from FY 2011 Health Department year-end savings. The Health Department and ANSHI are currently working together to develop a proposal for the reallocation of funds within the Health Department budget. The FY 2012 proposed budget is based on FY 2011 allocations. Once the FY 2011 proposal is developed, the FY 2012 budget will be reallocated to provide additional funding to ANSHI for the Casey Clinic patients from existing Health Department resources.

Health Systems Agency of Northern Virginia

The Health Systems Agency (HSA) of Northern Virginia was incorporated in 1975 as a Virginia non-profit organization to ensure accessible health facilities in the Northern Virginia area and to prevent unnecessary duplication of health resources by providing health planning and coordination of services with other health organizations and agencies. In June 1990, the HSA was designated the regional health planning agency for Northern Virginia by the Virginia Health Planning Board under the authority of the Virginia Health Planning and Resources Development Act. Participating local jurisdictions are asked to contribute roughly ten cents per capita to the HSA for FY 2012. Alexandria's share is \$13,600.