

Resolution of the Mount Vernon Council of Citizens' Associations, approved by the General Council on March 26, 2008:

HHS-2-2008

FY 2009 HEALTH AND HUMAN SERVICES PLANNING

WHEREAS the Fairfax County Board of Supervisors (BOS) has long recognized that local government must respond to ongoing and emerging needs of a complex and changing demographic by assuring the availability of essential health and human services;

WHEREAS the BOS has recognized that these essential services protect and enrich the quality of life for all Fairfax County residents, and that prevention and early intervention are the most effective and least costly strategies for providing such services, helping individuals and families deal with emergent health, behavioral, and economic conditions before they become wider crises that are more damaging, difficult, and costly to resolve;

WHEREAS in Fairfax County, governmental agencies partner in delivering these essential services with an array of not-for-profit community-based organizations (CBOs), leveraging major community contributions of volunteer time, talent, in-kind goods, and financial contributions;

WHEREAS this coordinated public/private network has proven highly effective over time, increasing the reach of services and improving delivery to communities and people in need, as is exemplified in Mount Vernon and along the Richmond Highway corridor that runs through County Human Services Region I;

WHEREAS the Mount Vernon Council of Citizens' Associations recognizes, in Human Services Region I, that particular strengths have come about through co-location and interagency planning of County health, social, and court-related services for families at the South County Center and also that long-standing CBOs in the Richmond Highway corridor have developed effective, proven prevention programs that are now models for others elsewhere;

WHEREAS recent economic and demographic changes have contributed to a dramatic rise in demand for services and, at the same time, the County's total revenue is declining and forecast to decline further in FY 2009 and FY 2010;

WHEREAS, moreover, the risk is growing that extensive shifts in federal and state funding formulas and mandates will take place that will reduce County flexibility to manage its own resources, forcing shifts into unfunded mandates at the cost of preventive and other essential (but non-mandated) services over the next two years;

WHEREAS even the "Best Managed County," when it fails to act in lean times to maintain the portion of its revenues that it is empowered to raise, will reduce its management choices and may dismantle the very preventive Initiatives that could control spiraling public costs for untreated

mental illness, chronic dependency, repeated indigent emergency care, court involvement and incarceration;

WHEREAS the Advertised FY Budget 2009 Plan along with the County Executive's Memorandum of Feb. 25 provides examples of how costs cut solely to balance the budget impair the County's ability to provide essential services:

(1) ***\$0.53 million, a 6% increase over FY2008, is needed to maintain the Consolidated***

Community Funding Pool. CCFP is acknowledged as the County's best means to leverage its ability to provide services through awards to nonprofit CBOs. A 6% increase from FY 2008 will help maintain service levels over a 2-year cycle.

(2) ***\$4 million more is needed in County funding to Community Services, to provide increased mandatory services without transferring funds from other essential services.***

A court-ordered increase in levels of services, for more children, in foster care and in mental health will cost \$4.1 million more than provided under the Comprehensive Services Act, so a CSA "managed reserve" funded by the County was included in the FY 2009 Plan, yet this reserve has already been reduced by \$1 million (to "balance" the most recent decline in estimated revenue). Meanwhile, the Community Services Board (CSB) must also budget to absorb a 2% reduction, \$3 million, from FY 2008 County levels, as required of other agencies providing essential services. The \$4 million total shortfall in County funds budgeted for the CSB for FY 2009 will necessitate transfer of resources from prevention and other non-mandatory services, diminishing effectiveness and service capacity generally. Reducing the CSB contract for available beds and for evening and weekend emergency psychiatric admissions at Inova Mount Vernon Hospital is another example of FY 2009 choices under discussion, in order to reduce budgeted costs to currently planned funding levels, while continuing to provide mandatory services. While the full impact of further mandatory changes in CSB services that may result from future Federal and State actions cannot be estimated now, the proposed County Plan makes it certain that \$4 million less in County funds will be available next fall, when the Beeman Commission reports long-awaited recommendations for optimal redesign of mental health services.

(3) ***\$2.88 million, at least, is needed to sustain County Prevention Initiatives.*** The lean FY 2009 Plan preserves worthy initiatives that are producing results, for example: supervised after-school programs that prevent gang recruitment and afford safer choices among at-risk youth, coordinated Domestic Violence Services, affordable primary health care clinics, senior wellness programs, efforts to preserve and create affordable housing opportunities and to prevent homelessness. However, two cost-effective programs that deserve sustained investment could provide more low-income working parents with safe affordable child care (plus early learning, at sliding scale fees). School Age Child Care (SACC) classroom space is already available but stands empty that would serve 175 more children, for \$.275 million. Child Care Assistance and Referral (CCAR) is needs \$2.6 million more than now planned, just to serve at the present level. The long-term benefits to children, working families, schools, local economy and community are well documented. Today, CCAR serves 2,025 fewer children than at the start of FY2007, when federal/state pass-through funds provided \$13 million more than today. Yet, recently, when \$1 million in State funding to this vital program was restored, County funding was reduced by the same amount, to balance falling County revenue estimates (with further reductions now anticipated).

WHEREAS additional essential services are likely to be identified, and recommended for restored funding, at a cost to be determined, by the County's Human Services Council, when the Council reports to the BOS and the public at the end of March; and

WHEREAS the increasing need for services, and mandates for services, when coupled with continued risk of falling revenues will require greater fiscal and planning flexibility, so that the County may continue to provide basic and essential health and human services:

THEREFORE, BE IT RESOLVED that the Mount Vernon Council of Citizens' Associations recommends that the Board of Supervisors maintain sufficient revenues, by means that include raising the property tax rate as necessary, both to restore specific resources to the Advertised Budget Plan [as shown above, total estimated cost is at least \$7.4 million] and to preserve the available network of essential health and human services in the coming Fiscal Year [cost of a Managed Reserve to be determined], so that the network will be able to respond to emergent community needs.

BE IT FURTHER RESOLVED that MVCCA urges the BOS to instruct the County Executive to address the identifiable emerging risks to continued good management of County resources, in order to estimate the size of a prudent Managed Reserve that may be funded without cutting essential services, and to recommend this reserve for BOS action, to be added to the proposed Budget Plan for FY 2009. Such a managed fund may be used flexibly—in many cases through cost-efficient, targeted and scaleable health and human services—to respond, mid-budget cycle, to:

- (1) pandemic disease or other public health crises,
- (2) natural and civic (all hazards) community disaster preparedness as well as events that result in displaced or injured persons,
- (3) other such emergent community hazards and crises as increased threat of substance abuse or gang recruitment among at-risk youth in particular schools and neighborhoods, and
- (4) federal/state defunding or mandatory changes that impact County delivery of essential services.

-----END: MVCCA RESOLUTION HHS-2-2008-----