

# Department of Human Services

STRENGTHEN PROTECT EMPOWER

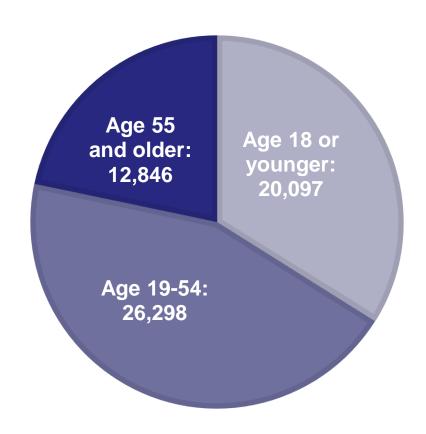
FY 2018 Budget Presentation

March 24, 2017



# DHS Client Demographics

DHS's total unduplicated client count for FY 2016 was 59,283



Male: 44%

Female: 54%



# Safety Net Needs

#### **Increasing Demand for DHS Services**

Client Visits Up 22% Since 2009 Unduplicated Client Count Up 43% Since 2009



The number of client visits began to decline in FY 2014 due to the expansion of online access to public assistance benefits (e.g. Common Help).

# ARLINGTON

# Dept. Budget at a Glance

- Proposed budget totals \$136.7M
  - A 1% increase from FY 2017 due to:
    - Standard personnel increases and 5.5 new FTEs
    - Non-personnel decreases due to:
      - Reduced funding for Children Services Act (CSA) \$1.4M
      - Reduced funding for Housing Grants \$524,000
      - Reduced funding for Parent & Infant Education (PIE) \$305,422
      - Conclusion of the Primary Care Substance Abuse & Mental Health Services Administration Grant (SAMHSA) - \$69,475
  - New CSB Service Fees \$66,000
- Total FTEs: 703.32
  - a net increase of 5.5 FTE from FY 2017
    - 2.0 Psychiatrists to address quality of care and standardization of services (funded through internal reallocation)
    - 1.0 School Health Nurse to restore the staffing ratio to one nurse to every two schools
    - 1.0 Grant-funded Human Services Clinician supporting the Child Advocacy Center
    - 1.0 Grant-funded Management Specialist providing case management for Permanent Supportive Housing
    - 0.5 Grant-funded Nurse Practitioner for Psychiatric Services



# Real Estate Tax Relief (RETR)

RETR Working group has met steadily since August 2016

Survey and focus groups conducted with close to 300 people

Draft recommendations report posted Feb. 15; 300+ comments received

Presentations to civic organizations and commissions

Community forum held on Mar. 6 – 80 participants attended

Final Working Group review of draft report – Mar. 20

Changes to draft recommendations

## ARLINGTON VIRGINIA

# Child Care Update

#### **Current Efforts**

- Ongoing meetings with child care center directors
- New emergency preparedness training for providers
- Robust series of child care trainings
- Provider survey underway to identify support needs
- Voluntary partnership for faith-based providers
- Increased collaboration with BizLaunch, Zoning, ISD, State policy makers

# Chapter 52

- State recently decided not to adopt new standards except for centers receiving child care subsidies
- DHS will present options for changes to Chapter 52 in the first quarter of FY 2018



# **New Client Fees**

#### New CSB Substance Abuse Treatment & Services Fees

Substance Abuse Case Management Office-Based Opioid Treatment

Peer Support Services Medication Administration

- > New fees authorized through the state's new reimbursement structure
- ➤ Allow for increased reimbursement from insurance companies
- Sliding fee scale used to limit the impact on low income and uninsured clients based on ability to pay
- DHS has a financial hardship policy to accommodate clients who need a service but cannot afford these fees.



# **CSB Budget Priorities**

Disability Services  2.2 Developmental Disability Specialist FTEs to support increased caseloads due to Medicaid Waiver redesign that expands medical and non-medical services to clients who would otherwise be institutionalized (\$230,302; ongoing)

Residential Placements

 Residential placements for 6 additional seriously mentally ill individuals in supervised apartments (\$17,000/client; \$102,000 annually; ongoing)

Young Adult Services  One-time funding for consultant to study needs of young adults on the autism spectrum with mental health issues and how best to provide services (\$75,000; one-time)



# Virginia Hospital Center Expansion

The proposed expansion of Virginia Hospital Center (VHC) provides an important opportunity to address the **critical shortage of psychiatric beds** in Arlington County

Arlington has only 10.2 psychiatric beds per 100,000 residents, 78% lower than the state-wide average of 18.2 beds.

In FY 2016, approx. 500 adults requested psychiatric services from VHC, but were denied a bed.

Of the 500, 208 had temporary detention orders who were judged to be a danger to themselves or others.

Shortage of beds increases cost to taxpayers and makes it difficult for families to support seriously mentally ill relatives.

Certificate of Public Need hearing scheduled for April 13.

# ARLINGTON VIRGINIA

# Impact of APS Enrollment on DHS

As APS enrollment grows, so does the demand for DHS services.

Based on FY 2013 – FY 2016 data, for every 4% (~1,000 students) increase in APS enrollment, DHS projects a 4% annual increase in demand for its child-serving programs.

For Every 1,000 APS Students:

School clinics receive 5,475 visits

360 vision & hearing screenings occur

129 calls to CPS for information and referral are placed

102 children are served by the Immunization Clinic

87 children receive monthly WIC services



# Service Delivery Initiatives



Enhance Customer Experience



Same Day Access for Behavioral Healthcare Clients



New Behavioral Electronic Health Record



Use Data Analytics to Understand Impact



Community-wide Opioid Response

# ARLINGTON

# Proposed Reductions

#### **Housing Grants (FY 2018 one-time funding reduction)**

- ➤ Due to the declining number of affordable housing units, the FY 2018 projection for households served is expected to fall by 30, from 1,241 to 1,211; a 2.4% reduction.
- > The revised budget of \$8,617,476 is expected to meet current demand.
- If demand is higher than currently anticipated, the program may require additional funding.
- Savings: \$536,279

#### Mental Health Supervisor (Existing vacant FTE; ongoing reduction)

- Supervisor manages a substance abuse outpatient team of 4 clinicians.
- ➤ Eliminating this position will require two substance abuse teams to be merged into one. Management and oversight for the existing supervisor will increase from four clinicians to nine. Quality control of documentation and client services will decline.
- > Savings: \$145,175; 1.0 FTE

#### School Health Nurse (Added in FY 2018 Proposed Budget; ongoing reduction)

- Additional nurse restores ratio of 1 nurse to every 2 schools.
- ➤ Eliminating the nurse will put pressure on existing nurses to maintain services as enrollment increases and to address the needs of students with chronic health issues.
- Savings: \$100,413; 1.0 FTE



# Potential Federal Budget Impact

The federal budget released on March 16 contains reductions for four departments with oversight of human services programs benefiting DHS clients

#### **Department of Agriculture**

- Proposed Reduction ~\$2 Billion
- · Women & Infant Children (WIC) Program proposed for reduced or eliminated funding

#### **Health & Human Services**

- Proposed Reduction ~\$15.1 Billion
- · Opioid treatment & response and disease outbreak funding will be increased
- Temporary Assistance for Needy Families (TANF) & Head Start funding will be maintained
- Medicaid proposed for reduced funding
- Energy Assistance Program and Community Services Block Grants (Meals on Wheels) are proposed for elimination

#### **Housing & Urban Development**

- Eliminate Community Development Block Grants
- Maintain funding for subsidized housing programs (Section 8); budget may not be sufficient to house current voucher holders due to inflation and rising rents

#### **Department of Labor**

- Proposed Reduction ~\$2.6 Billion
- Decreased funding for grants supporting job training, employment services, and disabled workers



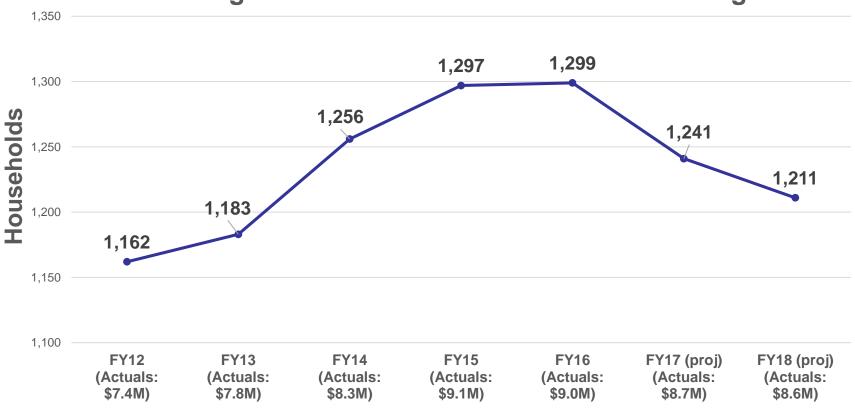
# Housing Development and Rental Assistance

A DHS/CPHD Collaboration



# **Housing Grants**

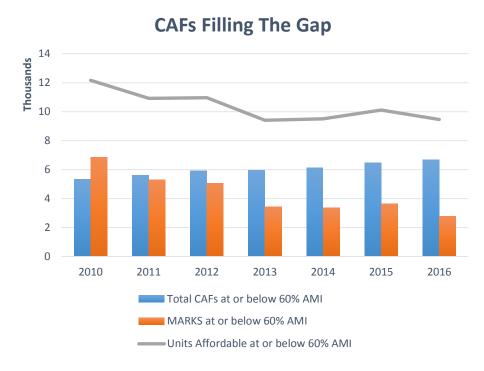




FY 2018 projected average cost per household is \$593; total projected expenditures are \$8.6M



# MARKs are Decreasing



- As the overall number of affordable units declines, Housing Grants participants have fewer housing options
- CAFs help fill the gap but cannot keep pace with declining MARKs



# Housing Grants Decline Explained

# Number of households served is decreasing

Overall decrease in inventory of affordable units Fewer 2-3 bedroom affordable units Housing barriers for clients Working families declining faster than seniors or disabled Waitlist for 2-3 bedroom units is 3 times greater than for 1 bedroom units

# Housing Grants Need CAFs



CAFs provide a supply of units for Housing Grants families

About 90% (1,170) of Housing Grants households live in CAFs 9,500 units affordable at or below 60% of AMI in 2016



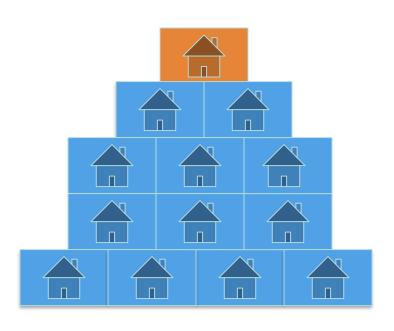
Market units at 60% – approximately 2,800



CAFs at 60% – approximately 6,700

# A World Without CAFs





= 100 CAFs Households



= 100 MARKs Households

Without CAFs,
These Households
Would Struggle to Find
Affordable Units

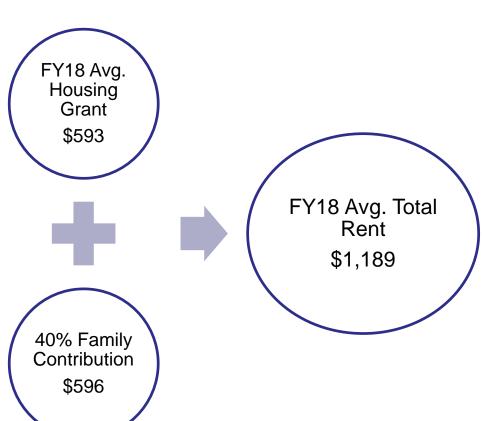
1,170

Or

90% of all Housing Grants
Families

# Housing Grants Benefit CAFs





- Average CAF unit affordability level is 60% of AMI (\*2015 income limit = \$65,520 for a family of 4)
- Average income for Housing Grants clients
  - Working families = \$27,075(approx. 25% of AMI)
  - Elderly & disabled = \$14,350 (approx. 20% of AMI)
- Housing Grants helps to fill this affordability gap for families living in CAF units

<sup>\*</sup>CAF units that came online prior to 2016 are permitted to use the 2015 rent and income limits since these limits decreased in 2016.

# PSH and AHIF Work Together



- Rental options for PSH clients in the rental market are limited and costly
- County staff negotiate PSH units as a condition of County loans
  - CAFs provide a permanent supply of units for the PSH program
  - CAFs at 40% and 50% AMI reduce the cost of the PSH rental subsidy

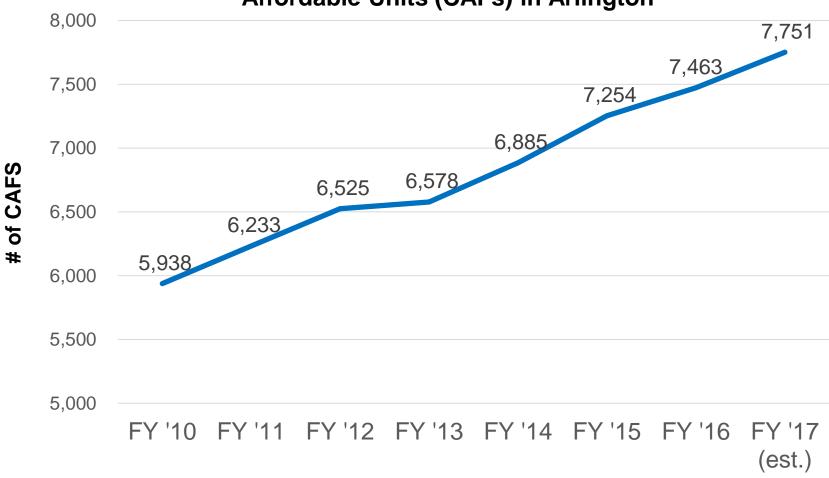


The Springs – 98 affordable units, of which 11 units are PSH to help meet the needs of low income households who have DHS caseworkers

# Affordable Housing Investment Fund







FY 2018 Proposed Budget - \$13.7M; \$9.2M in one-time funds



### AHIF/County Loan Program Overview

- Mission-driven lender
  - Goal is to create and preserve CAFs affordable to families earning 40%-60% of AMI for 60 years
- Residual receipt / cash flow loans
  - \$113M in loan repayments received to-date (44% of loans have paid in full)
- County Board has approved nearly 100 loans
  - 54 are currently active
- Total allocated to-date = \$337M supporting approximately 6,000 CAFs

## FY2017 AHIF Projects





