

Office of Health and Human Resources

Agencies in the Health and Human Resources secretariat are responsible for service delivery and management of responses to the most critical human resource issues that Virginia faces. Priorities for agencies in the secretariat are to promote self sufficiency and independence, assure access to affordable quality health care, strengthen families, improve care and treatment for individuals who are mentally or physically impaired, increase awareness and accessibility of long term care, and improve the quality of life for older Virginians. In addition, the Health and Human Resources agencies ensure safety for citizens through inspection programs for food safety, environmental health, hospitals and nursing homes, as well as oversight of certain health care professionals such as doctors, nurses, and counselors.

Secretarial Area Budget Summary

	General Fund	Nongeneral Fund	TOTAL	Personnel Costs	Other Costs	Positions
OPERATING BUDGE	T HISTORY:					
FY 2003	\$2,822,470,939	\$3,929,144,228	\$6,751,615,167	\$775,205,702	\$5,976,409,465	16,946.50
FY 2004	\$2,918,487,483	\$4,212,035,445	\$7,130,522,928	\$766,721,212	\$6,363,801,716	16,849.25
FY 2005	\$3,084,390,350	\$4,899,728,125	\$7,984,118,475	\$820,654,385	\$7,163,464,090	17,090.50
FY 2006	\$3,313,511,579	\$5,161,158,312	\$8,474,669,891	\$819,571,370	\$7,655,098,521	16,906.50
NEW OPERATING BU	JDGET SUMMAI	RY:				
FY 2007 Base Budget	\$3,313,511,579	\$5,161,158,312	\$8,474,669,891	\$818,579,015	\$7,656,090,876	16,906.50
FY 2007 Addenda	\$396,118,286	\$116,960,667	\$513,078,953	\$72,676,365	\$440,402,588	271.00
FY 2007 TOTAL	\$3,709,629,865	\$5,278,118,979	\$8,987,748,844	\$891,255,380	\$8,096,493,464	17,177.50
FY 2008 Base Budget	\$3,313,511,579	\$5,161,158,312	\$8,474,669,891	\$818,579,015	\$7,656,090,876	16,906.50
FY 2008 Addenda	\$595,918,430	\$334,364,993	\$930,283,423	\$66,685,901	\$863,597,522	83.00
FY 2008 TOTAL	\$3,909,430,009	\$5,495,523,305	\$9,404,953,314	\$885,264,916	\$8,519,688,398	16,989.50
CAPITAL OUTLAY BI	UDGET SUMMA	RY:				
FY 2007 Capital	\$13,349,000	\$0	\$13,349,000	\$0	\$13,349,000	0.00
FY 2008 Capital	\$4,750,000	\$0	\$4,750,000	\$0	\$4,750,000	0.00

Secretary of Health and Human Resources

Mission Statement

The Health and Human Resources Secretariat manages the delivery of services and programs to ensure and provide for public health, provide services for persons with disabilities, establish health care coverage and social services for low-income Virginians, offer temporary assistance for Virginians working their way toward self-sufficiency, increase access to health and social services information, work with families to overcome natural and manmade disasters, and establish accountability in service delivery.

Agency Goals:

- Ensure access to a high quality, affordable, integrated system of appropriate services that meet the diverse needs of the residents of the Commonwealth.
- Promote healthy individuals, families and communities in Virginia.
- Enhance the efficiency of the health and human resources system of services through the integration of innovative technology.
- Prepare and empower communities and families to respond in a timely manner to any emergency impacting the public health and well-being.
- Ensure access to workforce training and education for hard-to-serve Virginians.
- Ensure a well-trained, highly qualified health care workforce to meet the current and future needs of a growing and aging population.
- To effectively oversee the implementation of the Governor's priorities in a manner consistent with applicable state and federal requirements.

Customers Served:

■ The customers of the Secretary are the (1) consumers, providers and payers of services under the oversight of the Secretary of Health and Human Resources and (2) the taxpayers of Virginia.

Agency Budget Summary

	General Fund	Nongeneral Fund	TOTAL	Personnel Costs	Other Costs	Positions
OPERATING BUDGET	HISTORY:					
FY 2003	\$734,945	\$162,469	\$897,414	\$785,500	\$111,914	9.00
FY 2004	\$528,087	\$0	\$528,087	\$706,856	(\$178,769)	6.00
FY 2005	\$588,454	\$4,790	\$593,244	\$490,442	\$102,802	6.00
FY 2006	\$1,689,724	\$4,790	\$1,694,514	\$649,573	\$1,044,941	6.00
NEW OPERATING BUI	OGET SUMMARY	<u>γ</u> :				
FY 2007 Base Budget	\$1,689,724	\$4,790	\$1,694,514	\$649,573	\$1,044,941	6.00
FY 2007 Addenda	\$42,420	(\$4,790)	\$37,630	\$36,855	\$775	0.00
FY 2007 TOTAL	\$1,732,144	\$0	\$1,732,144	\$686,428	\$1,045,716	6.00
FY 2008 Base Budget	\$1,689,724	\$4,790	\$1,694,514	\$649,573	\$1,044,941	6.00
FY 2008 Addenda	\$42,420	(\$4,790)	\$37,630	\$36,855	\$775	0.00
FY 2008 TOTAL	\$1,732,144	\$0	\$1,732,144	\$686,428	\$1,045,716	6.00

Agency Summary of Recommended Operating Budget Addenda

▶ Transfer centrally funded amounts to agency budgets

Adjusts the agency budget to reflect amounts moved from Central Appropriations to cover the cost of items such as the continuation of 2005 and 2006 salary and health insurance premium increases, and changes in retirement and disability contribution rates. For each year, \$42,420 (GF).

▶ Remove excess nongeneral fund appropriation

Removes nongeneral fund appropriation from the office budget for which there is no source of revenue. For each year, a reduction of \$4,790 (NGF).

Agency Service Areas:

Administrative and Support Services

This service area provides the resources to provide general management and direction to agencies. It also specifically defines broad policy goals, defines how state and federal funds are to be allocated, and details special reports the Secretary and reporting agencies are to provide to the General Assembly or other groups.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$1,694,514	\$1,694,514	6.00	6.00
Transfer centrally funded amounts to agency budgets	\$42,420	\$42,420	0.00	0.00
Remove excess nongeneral fund appropriation	(\$4,790)	(\$4,790)	0.00	0.00
Total for Comica Area	¢1 720 144	¢1 720 144	6.00	6.00

Total for Service Area

\$1,732,144 \$1,732,144 6.00 6.00

Comprehensive Services For At-Risk Youth And Families

Mission Statement

The mission of the Comprehensive Services Act for At-Risk Youth and Families (CSA) is to create a collaborative system of services and funding that is child-centered, family-focused and community-based when addressing the strengths and needs of troubled and at-risk youths and their families in the Commonwealth.

Agency Goals:

- Involve families more proactively throughout CSA.
- Improve the capacity of communities to effectively implement CSA, while reducing administrative burdens.
- Manage a strong financial infrastructure and continue to maximize all available resources.
- Enhance communication with all CSA stakeholders.
- Provide management information for decision making.

Customers Served:

- Youth and their families
- Local Governments
- Service providers

Agency Budget Summary

	General Fund	Nongeneral Fund	TOTAL	Personnel Costs	Other Costs	Positions
OPERATING BUDGET	HISTORY:					
FY 2003	\$162,288,068	\$34,032,097	\$196,320,165	\$0	\$196,320,165	0.00
FY 2004	\$167,893,870	\$36,905,528	\$204,799,398	\$0	\$204,799,398	0.00
FY 2005	\$186,694,989	\$55,956,816	\$242,651,805	\$0	\$242,651,805	0.00
FY 2006	\$194,639,663	\$61,411,678	\$256,051,341	\$0	\$256,051,341	0.00
NEW OPERATING BU	DGET SUMMARY	Y:				
FY 2007 Base Budget	\$194,639,663	\$61,411,678	\$256,051,341	\$0	\$256,051,341	0.00
FY 2007 Addenda	\$15,801,477	(\$6,991,680)	\$8,809,797	\$0	\$8,809,797	0.00
FY 2007 TOTAL	\$210,441,140	\$54,419,998	\$264,861,138	\$0	\$264,861,138	0.00
FY 2008 Base Budget	\$194,639,663	\$61,411,678	\$256,051,341	\$0	\$256,051,341	0.00
FY 2008 Addenda	\$32,560,243	(\$2,991,680)	\$29,568,563	\$0	\$29,568,563	0.00
FY 2008 TOTAL	\$227,199,906	\$58,419,998	\$285,619,904	\$0	\$285,619,904	0.00

Agency Summary of Recommended Operating Budget Addenda

▶ Adjust funding for agency expenditures related to cost of basic operations

Adjusts funding for changes in operating costs related to central agency services and various charges. These include procurement fees, property insurance premiums, and workers compensation insurance premiums. It also includes adjustments for changes in project management and security provided by the Virginia Information Technologies Agency and the transformation to service-based billing for technology services other than hardware and software. For each year, \$3,923 (GF).

► Provide funding for pool fund service expenditures

Provides additional funds to continue mandated special education and foster care services for at-risk youth. In line with projected program growth, these funds will cover an eight percent annual increase in the cost of services to the current caseload in addition to providing services to an increasing number of eligible youth. A decrease in nongeneral funds is due to lower than projected Medicaid collections. For 2007, an increase of \$15.8 million (GF) and a decrease of \$7.0 million (NGF). For 2008, an increase of \$32.6 million (GF) and a decrease of \$3.0 million (NGF).

► Change reporting date for utilization rates and length of stay

Changes reporting date for the annual report from November 1 to December 15. Data is not received until the middle of October and sufficient time is needed to produce an accurate and useful report. This action is contained in budget bill language.

► Delete language requiring reporting on Medicaid utilization

Removes one-time reporting language related to Medicaid utilization of services. The report was completed in 2004. This action is contained in budget bill language.

► Add language specifying the publishing date for the Comprehensive Services Act biennial report

Inserts language clarifying that the biennial report, required by Section 2.2-2648 of the Code of Virginia, be published no later than December 20th in odd-numbered years. This action is contained in budget bill language.

► Clarify authority to collect data on children receiving services through the Comprehensive Services Act Clarifies the Office of Comprehensive Services' authority to collect child-specific information currently provided by

localities. It requires that only non-identifying demographic, service, cost and outcome summary information shall be released publicly. This action is contained in budget bill language.

Agency Service Areas:

Financial Assistance for Child and Youth Services

This service area provides localities resources, technical assistance and tools so they can maintain a system of funding services for children who have emotional and behavioral problems and their families. It forecasts, budgets, reimburses and monitors funds that local governments use to purchase services for children and families under the Comprehensive Services Act for At-Risk Youth and Families (CSA). It directs and manages the collection of data on CSA funded children. It works collaboratively with its partners (state and local government agencies, service providers, and children and their families) to increase the capacity of communities across the Commonwealth to successfully implement CSA. It ensures the decisions of the State Executive Council are implemented, working closely with the State and Local Advisory Team.

Specific services falling under the umbrella of this service area as required by the Appropriations Act include:

- •Reimbursing local government the state share of eligible services for children and families.
- •Reimbursing the Department of Medical Assistance Services for eligible expenditures made by the department on behalf of CSA.
- •Maintaining local government performance measures.
- •Assisting Community Policy and Management Teams (CPMTs) to ensure that services and funding are consistent with the Commonwealth's policies of preserving families and providing appropriate services in the least restrictive environment.
- •Providing communities with technical assistance on ways to control costs, the use of alternative funding sources, utilization management, administrative and fiscal issues.
- •Providing support for uniform CSA assessment and reporting requirements.
- •Providing local government administrative funding opportunities.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$256,051,341	\$256,051,341	0.00	0.00
Adjust funding for agency expenditures related to cost of basic operations	\$3,923	\$3,923	0.00	0.00
Provide funding for pool fund service expenditures	\$8,805,874	\$29,564,640	0.00	0.00
Total for Service Area	\$264,861,138	\$285,619,904	0.00	0.00

Objective: Maximize the number of CSA funded youth served in community and family based settings

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
The percentage of Comprehensive Services Act funded youth served in community and family based settings compared to total CSA youth served.	62.8% for FY04	64.2% for FY05

Department for the Aging

Mission Statement

The Virginia Department for the Aging promotes the dignity, independence, and security of older Virginians by promoting partnerships with families and communities.

Agency Goals:

- Enhance the independence of older Virginians to allow them to remain at home as long as they can safely.
- Assure the quality and cost-effectiveness of services funded by the federal and state government.
- Secure, protect, and enhance the rights of older Virginians.
- Provide education, training, and research analysis.
- Promote resource partnership expansion.

Customers Served:

- Area Agencies on Aging
- Individuals age 60 and older
- Additional program contractors
- Caregivers for individuals age 60 and older
- General public

Agency Budget Summary

	General Fund	Nongeneral Fund	TOTAL	Personnel Costs	Other Costs	Positions
OPERATING BUDGET	HISTORY:					
FY 2003	\$14,708,326	\$30,283,171	\$44,991,497	\$1,720,180	\$43,271,317	27.00
FY 2004	\$13,918,907	\$29,833,171	\$43,752,078	\$1,554,917	\$42,197,161	27.00
FY 2005	\$15,102,765	\$29,859,086	\$44,961,851	\$1,705,476	\$43,256,375	27.00
FY 2006	\$15,432,765	\$29,859,086	\$45,291,851	\$1,705,476	\$43,586,375	27.00
NEW OPERATING BUI	DGET SUMMAR	Y:				
FY 2007 Base Budget	\$15,432,765	\$29,859,086	\$45,291,851	\$1,680,058	\$43,611,793	27.00
FY 2007 Addenda	\$1,611,542	\$1,830,612	\$3,442,154	\$138,023	\$3,304,131	0.00
FY 2007 TOTAL	\$17,044,307	\$31,689,698	\$48,734,005	\$1,818,081	\$46,915,924	27.00
FY 2008 Base Budget	\$15,432,765	\$29,859,086	\$45,291,851	\$1,680,058	\$43,611,793	27.00
FY 2008 Addenda	\$1,611,619	\$1,830,612	\$3,442,231	\$138,023	\$3,304,208	0.00
FY 2008 TOTAL	\$17,044,384	\$31,689,698	\$48,734,082	\$1,818,081	\$46,916,001	27.00

Agency Summary of Recommended Operating Budget Addenda

► Transfer centrally funded amounts to agency budgets

Adjusts the agency budget to reflect amounts moved from Central Appropriations to cover the cost of items such as the continuation of 2005 and 2006 salary and health insurance premium increases, and changes in retirement and disability contribution rates. For each year, \$41,514 (GF) and \$96,509 (NGF).

▶ Provide additional federal appropriation

Provides additional appropriation to match the amount of federal grant awards the agency receives. The primary grants are funding under the federal Older Americans Act, which is distributed to states based on a formula. For each year, \$1.7 million (NGF).

► Expand Public Guardianship and Conservator program

Adds funds for Public Guardianship and Conservator programs in areas throughout the Commonwealth that do not yet have them. This program serves adults age 18 and older who do not have the resources, family, or friends able to make decisions with regard to their own care. Approximately 60 additional indigent individuals who require guardian services will be served through this expansion. For each year, \$150,000 (GF).

▶ Adjust funding for agency expenditures related to cost of basic operations

Adjusts funding for changes in operating costs related to central agency services and various charges. These include procurement fees, property insurance premiums, and workers compensation insurance premiums. It also includes adjustments for changes in project management and security provided by the Virginia Information Technologies Agency and the transformation to service-based billing for technology services other than hardware and software. For 2007, \$1,294 (GF). For 2008, \$1,371 (GF).

▶ Maintain services at Area Agencies on Aging impacted due to census changes

Provides funds to maintain services at 12 Area Agencies on Aging (AAAs) that are negatively impacted by the 2000 decennial census. As a result of the 2000 census, the funding formula results in reduced funding to rural AAAs and adds it to urban AAAs. The amendment ensures rural AAAs lose no funding and that urban AAAs receive funding for increased elderly populations. For each year, \$1.3 million (GF).

▶ Maintain funding for Senior Navigator web portal

Provides funds to maintain the Commonwealth's contribution for Senior Navigator. The program is a website portal that connects seniors to over 19,000 health and aging resources, both public and private. The amendment places all of the state support for Senior Navigator in the Department for the Aging. The state contribution funds one-quarter of the operating costs. For each year, \$150,000 (GF).

Agency Service Areas:

Financial Assistance for Local Services to the Elderly

The Department for the Aging contracts with 25 Area Agencies on Aging and other service providers throughout the Commonwealth

to provide an array of services. These services include: Adult Day Care, Care Coordination, Checking (Reassurance), Chore, Disease Prevention & Health Promotion, Emergency, Employment, Health Education & Screening, Homemaker, I.D. Discount, Information & Referral/Assistance, Money Management, Personal Care, Public Information /Education, Residential Repair & Renovation, Respite Care, Socialization & Recreation, Summer Cooling, Transportation, the Virginia Insurance Counseling & Assistance Program (VICAP), and Volunteer Services.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$25,472,424	\$25,472,424	0.00	0.00
Provide additional federal appropriation	\$1,734,103	\$1,734,103	0.00	0.00
Maintain services at Area Agencies on Aging impacted due to census changes	\$1,268,734	\$1,268,734	0.00	0.00
Maintain funding for Senior Navigator web portal	\$150,000	\$150,000	0.00	0.00
Total for Service Area	\$28,625,261	\$28,625,261	0.00	0.00

Objective: Maintain the number of transportation one-way trips provided by the 25 Area Agencies on Aging.

Key	Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Trar	nsportation One-Way Trips	FY 2005 actual is 571,095 trips	FY 2006 projected is 571,095 trips. With the increase cost of gasoline and negligible increase in funding, the goal is to provide the same number.

Rights and Protection for the Elderly

The Department for the Aging contracts with 25 Area Agencies on Aging and other service providers throughout the Commonwealth to provide an array of services. These services include: the Virginia Public Guardian and Conservator Program, legal assistance and the state and local Long-Term Care Ombudsman Program.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$1,731,490	\$1,731,490	0.00	0.00
Expand Public Guardianship and Conservator program	\$150,000	\$150,000	0.00	0.00
Total for Service Area	\$1,881,490	\$1,881,490	0.00	0.00

Objective: Expand the Virginia Public Guardian and Conservatorship Program.

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)	
Virginia Public Guardian and Conservatorship Programs	In FY 2005, 10 programs exist	By FY 2007 establish 12 programs	

Meals Served in Group Settings

The Department for the Aging contracts with 25 Area Agencies on Aging to provide meal and nutrition services throughout the Commonwealth in congregate (group) settings. These settings provide hot and cold meals, as well as nutrition education, to older persons. The congregate meal centers provide socialization, education, and recreation programs that allow older persons the opportunity to get out of the house and participate in a variety of activities which help them stay mentally alert and physically active.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$6,727,761	\$6,727,761	0.00	0.00
Total for Service Area	\$6 727 761	\$6 727 761	0.00	0.00

Objective: Maintain the number of group (congregate) meals provided through the 25 Area Agencies on Aging.

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Number of meals served in group (congregate) settings.	For FY 2005 the Area Agencies on Aging provided 849,270 group (congregate) meals.	For FY 2006 the goal for the Area Agencies on Aging is to provide 849,270 group

Distribution of Food

The Department for the Aging works with several Area Agencies on Aging to provide coupons to seniors to redeem through the Senior Farmers' Market Nutrition Program.

The Seniors Farmers Market has several goals. Foremost, it provides access to low income-older individuals to fresh fruits and vegetables when in season. The senior receives nutrition education. Local farmers benefit because purchases are made at their fruit and vegetable stands.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$378,549	\$378,549	0.00	0.00
Total for Service Area	\$378,549	\$378,549	0.00	0.00

Objective: Maintain the number of seniors participating in the Senior Farmer's Market Program.

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Number of seniors served	FY 2005 7,971 seniors served	FY 2006 8,434 seniors served

Delivery of Meals to Home-Bound Individuals

The Department for the Aging contracts with 25 Area Agencies on Aging to provide meal and nutrition services throughout the Commonwealth to the elderly in their homes. These meals include hot and cold meals, as well as nutrition education, to older persons. The delivered meal also provides and opportunity for someone to check on the wellbeing of the individual.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$8,726,855	\$8,726,855	0.00	0.00
Total for Service Area	\$8 726 855	\$8 726 855	0.00	0.00

Objective: Maintain the number of meals delivered to home-bound individuals by the 25 Area Agencies on Aging.

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Number of meals delivered to home-bound individuals.	For FY 2005 the Area Agencies on Aging provided 2,665,739 home delivered meals.	For FY 2006 the goal for the Area Agencies on Aging is to provide 2,665,739 home delivered meals.

Administrative and Support Services

The Department provides oversight responsibilities for coordinating the array of services provided by the 25 Area Agencies on Aging and other service providers throughout the Commonwealth. For each provider, the Department develops a contract for services. The services are defined by service standards, regulations, and policies. Department staff provide training, technical assistance, and monitoring of contracted programs.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$2,254,772	\$2,254,772	27.00	27.00
Transfer centrally funded amounts to agency budgets	\$138,023	\$138,023	0.00	0.00
Adjust funding for agency expenditures related to cost of basic operations	\$1,294	\$1,371	0.00	0.00
Total for Service Area	\$2,394,089	\$2,394,166	27.00	27.00

Objective: To ensure that resources are used efficiently and programs are managed effectively, and in a manner consistent with applicable state and federal requirements.

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Percent of Governor's Management scorecard categories marked as meets expectations for the agency	The 2005 percentage for VDA is 100%.	The 2006 percentage target for VDA is 100%.

Department for the Deaf and Hard-of-Hearing

Mission Statement

The Virginia Department for the Deaf and Hard of Hearing (VDDHH) works to reduce the communication barriers between persons who are deaf or hard of hearing and those who are hearing, including family members, service providers, and the general public.

Agency Goals:

- Enhance the quality of communications access for persons who are deaf or hard of hearing in Virginia by increasing the availability
 and effectiveness of and consumer access to assistive technology and technology services.
- Ensure that persons who are deaf or hard of hearing are prepared for and have effective communications access during emergency situations.
- Increase the availability, quality and utilization of communication facilitators (interpreters and CART providers).
- Strive for recognition of communications access for persons who are deaf or hard of hearing as a core component of all services provided by agencies of the Commonwealth.
- Serve as a recognized and reliable source of current information from state/national resources provided to all customers through a variety of means.

Customers Served:

- Virginia Courts
- State Agencies
- Interpreters Seeking Credentials (VQAS)
- Library Patrons
- Technology Assistance Program (TAP) applicants
- Virginia Relay Users
- Consumers who are deaf or hard of hearing
- Families, professionals and interested parties seeking information (served Unknown, potential unlimited)

Agency Budget Summary

	General Fund	Nongeneral Fund	TOTAL	Personnel Costs	Other Costs	Positions
OPERATING BUDGET HISTORY:						
FY 2003	\$1,258,801	\$137,387	\$1,396,188	\$697,545	\$698,643	14.00
FY 2004	\$1,177,335	\$137,387	\$1,314,722	\$590,897	\$723,825	14.00
FY 2005	\$1,203,631	\$177,942	\$1,381,573	\$660,265	\$721,308	14.00
FY 2006	\$1,328,631	\$177,942	\$1,506,573	\$660,265	\$846,308	14.00
NEW OPERATING BUI	OGET SUMMARY	(:				
FY 2007 Base Budget	\$1,328,631	\$177,942	\$1,506,573	\$660,265	\$846,308	14.00
FY 2007 Addenda	\$49,709	\$4,391	\$54,100	\$11,065	\$43,035	0.00
FY 2007 TOTAL	\$1,378,340	\$182,333	\$1,560,673	\$671,330	\$889,343	14.00
FY 2008 Base Budget	\$1,328,631	\$177,942	\$1,506,573	\$660,265	\$846,308	14.00
FY 2008 Addenda	\$49,918	\$4,391	\$54,309	\$11,065	\$43,244	0.00
FY 2008 TOTAL	\$1,378,549	\$182,333	\$1,560,882	\$671,330	\$889,552	14.00

Agency Summary of Recommended Operating Budget Addenda

► Transfer centrally funded amounts to agency budgets

Adjusts the agency budget to reflect amounts moved from Central Appropriations to cover the cost of items such as the continuation of 2005 and 2006 salary and health insurance premium increases, and changes in retirement and disability contribution rates. For each year, \$49,212 (GF) and \$4,391 (NGF).

▶ Adjust funding for agency expenditures related to cost of basic operations

Adjusts funding for changes in operating costs related to central agency services and various charges. These include procurement fees, property insurance premiums, and workers compensation insurance premiums. It also includes adjustments for changes in project management and security provided by the Virginia Information Technologies Agency and the transformation to service-based billing for technology services other than hardware and software. For 2007, \$497 (GF). For 2008, \$706 (GF).

Agency Service Areas:

Technology Services for Deaf and Hard-of-Hearing

This service area provides access to telecommunication services and assistive technology for Virginia citizens who are deaf, hard of hearing, deafblind or speech impaired. The service area comprises two agency programs, VA Relay and the Technology Assistance Program (TAP). Direct services include:

- Oversight of federally-mandated Telecommunication Relay Services;
- Financial assistance for purchase of telecommunication-related assistive devices for qualified applicants; and
- Loan and Demonstration of assistive devices for persons who are deaf, hard of hearing, or speech impaired.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$522,228	\$522,228	3.40	3.40
Transfer centrally funded amounts to agency budgets	\$23,645	\$23,645	0.00	0.00
Total for Service Area	\$545,873	\$545,873	3.40	3.40

Objective: To increase consumer access to and utilization of TAPLOAN sites statewide.

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Percentage increase in devices loaned through TAPLOAN	Although current reports exist, they are duplicative in nature and do not accurately reflect the number of new devices loaned. A Baseline will be determined after TAPLOAN reports are revised and site contracts are reissued.	5% annual increase in (new) TAPLOAN loans

Objective: To provide consumers with opportunities to view and participate in hands-on demonstrations of new equipment/technology within six months of its introduction.

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Number of New Equipment/Technology Trial Offerings	1 device (Captioned Telephone) and 1 new relay technology (Video Relay Text Messaging) incorporated into agency programs in FY 2005.	2 new offerings (devices or service enhancements) per year in the service area.

Consumer, Interpreter, and Community Support Services

This service area provides communication access and community support services for Virginia citizens who are deaf, hard of hearing, their families and the professionals who serve them. The service area is composed of four agency programs: Interpreter Referral; Virginia Quality Assurance Screening (VQAS); Outreach; and, Information and Referral (I&R). Direct services include:

- Scheduling of qualified sign language interpreters for courts and state agencies,
- Provision of interpreters for situations not covered by the federal Americans with Disabilities Act,
- Maintenance and distribution of the Virginia Directory of Qualified Interpreters,
- An assessment and diagnostics program for the evaluation of the skill level of sign language interpreters,
- Regional technical assistance and local training on assistive devices, adapting to and prevention of hearing loss, use of interpreters, orientation to deafness, and communications access in emergency situations, and
- Information and referral materials including specialized library services on all aspects of communication access for persons who are deaf or hard of hearing.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$679,075	\$679,075	7.50	7.50
Transfer centrally funded amounts to agency budgets	\$25,683	\$25,683	0.00	0.00
Total for Service Area	\$704,758	\$704,758	7.50	7.50

Objective: Increase availability of and access to skill development training opportunities for interpreters in Virginia.

Measure Baseline(s)	Measure Targets(s)			
Opportunities This is a new measure. The agency will develop a data collection methodology and begin collecting data on July 1, 2006. To be established as a percentage increas over the baseline.				
Objective: Increase the pool of qualified interpreters available to fill assignments coordinated by VDDHH.				
Key Performance Measure(s) Measure Baseline(s) Measure Targets(s)				
	This is a new measure. The agency will develop a data collection methodology and begin collecting data on July 1, 2006. lified interpreters available to fill assignn			

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Reduction in number of interpreter requests for which no interpreter is available.	In FY05, 6% of all interpreter requests received by VDDHH were unfilled because of "No Interpreter Available" ("NIA").	By the end of FY 2007, less than 5% of all requests received will be unfilled because of NIA.
Number of Court Available Interpreters	In FY 2005, the agency had 53 "court available" interpreters.	An increase of 5% per year.

Objective: Increase consumer access to interpreters and CART providers in non-VDDHH coordinated assignments, including medical and legal settings.

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Number of People who use/access the Directory of Qualified Interpreters	This is a new measure. The agency will develop a data collection methodology and begin collecting data on July 1, 2006.	A percentage increase to be determined after baseline is set.
Number of Listings In Directory of Qualified Intepreters	262 Interpreters listed in FY 2005.	A 5% increase per year.
Objective: Develop and disseminate	information on viable resources for fund	ding for hearing aids.
Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Number of Hearing Aid Packages Disseminated	This is a new measure. The agency will develop a data collection methodology and begin collecting data on July 1, 2006.	10 packets per month.

No baseline data available.

50% of all customers completing the customer satisfaction survey report that the

packet assisted them in securing funding for the purchase of hearing aids.

Objective: Increase awareness of, access to and utilization of VDDHH Library services.

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Number of Library Awareness Activities	In FY 2005, 2 Library Awareness Activities were reported.	A minimum of one Library Awareness Activity per month.
Percentage increase in Library Usage Statistics	In FY 2005, 263 or 19%, of 1344 registered patrons accessed Library services.	A 10% increase in the percentage of registered patrons accessing the Library each year.

Objective: Increase private business awareness of customer service and general issues related to persons who are deaf or hard of hearing.

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Percentage of Relay Partner Program Participants who also become Expanded Relay Partners	0 in FY 2005.	10% of new Relay Partner participants will also participate in additional training provided by VDDHH on an annual basis.
Number of Chamber of Commerce Events Promoting Communications Access	1 reported in FY 2005.	Provide a minimum of 25 general communications access trainings annually.

Objective: Enhance awareness of and access to interpreter services, assistive technology, Virginia Relay, and other tools for communications access by persons who are deaf or hard of hearing in facilities or in community placements as part of the Olmstead Initiative

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Number of Olmstead-Related Training and Technical Assistance contacts per year	This is a new measure. The agency will develop a data collection methodology and begin collecting data on July 1, 2006.	1440 Training and Technical Assistance contacts each year.
# of Interpreter Services Hours paid by Olmstead Interpreter Fund of Last Resort	This is a new measure. The agency will develop a data collection methodology and begin collecting data on July 1, 2006.	To be determined after baseline is established.

Administrative Services

Customer Satisfaction with Hearing Aid

Packet

This service area provides oversight, policy guidance, and administrative and operational support to all of the agency's programs and services as well as support for the Advisory Board.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$305,270	\$305,270	3.10	3.10
Transfer centrally funded amounts to agency budgets	\$4,275	\$4,275	0.00	0.00
Adjust funding for agency expenditures related to cost of basic operations	\$497	\$706	0.00	0.00
Total for Service Area	\$310,042	\$310,251	3.10	3.10

Objective: Improve agency accountability to enhance responsiveness to consumer needs.

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Number of Effective Data Collection Tools in use in VDDHH programs	Currently, 3 programs and services have effective data collection tools which result in consistent and meaningful quarterly reports of activity.	Five (5) new or revised data collection tools introduced each year through FY08.

Department of Health

Mission Statement

The Virginia Department of Health is dedicated to promoting and protecting the health of Virginians

Agency Goals:

- Provide strong leadership and operational support for Virginia's public health system.
- Prevent and control the transmission of communicable diseases.
- Collaborate with partners in the health care and human services system to assure access to quality health care and human services.
- Promote systems, policies and practices that facilitate improved health for all Virginians.
- Collect, maintain and disseminate accurate, timely, and understandable public health information.
- Respond in a timely manner to any emergency impacting public health through preparation, collaboration, education and rapid intervention.
- Maintain an effective and efficient system for the investigation of unexplained or suspicious deaths of public interest.
- Assure provision of clean and safe drinking water supplies.
- Assure provision of safe food at restaurants and other places where food is served to the public.
- Prevent and control exposure to toxic substances and radiation.

Customers Served:

- Health profession scholarship and loan repayment program recipients
- Families of decedents
- Individuals requesting vital records information
- Emergency responders
- Federal, state, and local government agencies
- Compliers, i.e., individuals and organizations that are licensed and/or regulated by the Virginia Department or State Board of Health
- Direct recipients of corrective and preventative health care and safety services and information
- Providers of health care and safety services and information

Agency Budget Summary

	General Fund	Nongeneral Fund	TOTAL	Personnel Costs	Other Costs	Positions
OPERATING BUDGET	HISTORY:					
FY 2003	\$137,566,983	\$282,445,307	\$420,012,290	\$184,218,216	\$235,794,074	3,550.00
FY 2004	\$137,851,240	\$298,344,337	\$436,195,577	\$182,996,124	\$253,199,453	3,553.00
FY 2005	\$138,787,326	\$338,103,991	\$476,891,317	\$198,213,330	\$278,677,987	3,670.00
FY 2006	\$142,773,275	\$345,158,590	\$487,931,865	\$198,448,967	\$289,482,898	3,598.00
NEW OPERATING BU	DGET SUMMAR	Y:				
FY 2007 Base Budget	\$142,773,275	\$345,158,590	\$487,931,865	\$187,163,949	\$300,767,916	3,598.00
FY 2007 Addenda	\$19,727,125	\$17,953,179	\$37,680,304	\$24,569,294	\$13,111,010	167.00
FY 2007 TOTAL	\$162,500,400	\$363,111,769	\$525,612,169	\$211,733,243	\$313,878,926	3,765.00
FY 2008 Base Budget	\$142,773,275	\$345,158,590	\$487,931,865	\$187,163,949	\$300,767,916	3,598.00
FY 2008 Addenda	\$19,567,546	\$17,672,895	\$37,240,441	\$24,569,294	\$12,671,147	167.00
FY 2008 TOTAL	\$162,340,821	\$362,831,485	\$525,172,306	\$211,733,243	\$313,439,063	3,765.00

Agency Summary of Recommended Operating Budget Addenda

► Transfer centrally funded amounts to agency budgets

Adjusts the agency budget to reflect amounts moved from Central Appropriations to cover the cost of items such as the continuation of 2005 and 2006 salary and health insurance premium increases, and changes in retirement and disability contribution rates. For each year, \$7.6 million (GF) and \$10.6 million (NGF).

► Remove one-time spending amounts from agency budget

Removes pass through money identified as one time. For each year, a reduction of \$445,000 (GF).

► Reflect administrative nongeneral fund increases in agency budget

Increases the nongeneral fund appropriation to reflect administrative increases in the agency budget. Specifically, this increase provides for the continuation of the nongeneral fund appropriation for the Office of Environmental Health Services, the continuation of the Child Restraint Device fund, and the continuation of the current level of funding for the Division of Sewage and Wastewater Regulation into the new biennium. For each year, \$600,000 (NGF).

► Correct allocation of positions between general and nongeneral fund sources for the Vital Records program Corrects the allocation of positions between general and nongeneral fund sources for the Vital Records program. (Net zero adjustment)

► Increase special fund appropriation for Vital Records

Increases special fund appropriation from fee revenue for Vital Records operations to meet increased demand due to new mandates for identification standards. For each year, \$867,603 (NGF).

► Increase nongeneral fund appropriation for local health departments

Increases nongeneral fund appropriation for local health departments to receive additional grant and donation monies. For each year, \$2.0 million (NGF).

► Recognize Richmond city health department as a state operated health district

Adds Richmond city health department as a state operated health district per a pending agreement between Richmond city and the Commonwealth, to grant the Richmond city health department's request to return to the state system. For 2007, \$3.9 million (NGF) and 120 positions. For 2008, \$3.9 million (NGF).

► Increase position level to maintain local public health services in Suffolk

Adds positions to maintain local public health services in Suffolk. The Virginia Municipal League has determined that Suffolk local health department workers do not qualify as Suffolk city employees based on Internal Revenue Service criteria. The Virginia Department of Health is requesting an increase in its position level to place these positions on the agency's payroll. For 2007, 39 positions.

► Expand Resource Mothers program

Expands Resource Mothers program to support and mentor an additional 115 pregnant teens. The Resource Mothers program assigns community health workers to pregnant teens to help them transition into parenthood. For each year, \$590,000 (GF).

► Address critical local health department facility needs

Addresses critical needs for the Nelson, Dickenson, Warren, Waynesboro, and Fluvanna local health department facilities to meet space standards and comply with federal privacy and security statutes. For each year, \$170,031 (GF) and \$111,085 (NGF).

► Fund St. Mary's Health Wagon

Funds St. Mary's Health Wagon to provide health services to residents in Dickenson, Buchanan, and Wise counties. For each year, \$100,000 (GF).

▶ Increase Comprehensive Health Investment Program (CHIP) of Virginia funding

Provides additional funding to the Comprehensive Health Investment Program (CHIP) of Virginia to add eight community workers to serve an additional 475 children. CHIP provides home visits to families for medical case management, developmental screening, transportation to medical appointments, teaching of parental skills, and assisting with educational issues. For each year, \$396,000 (GF).

▶ Ensure food safety by addressing growing gap in demand for Environmental Health Services

Ensures food safety by addressing the growing demand for Environmental Health Services resulting from an increase in the number of restaurants in Loudoun, Rappahannock, Thomas Jefferson, and Prince William local health department districts. For 2007, \$326,000 (GF), \$130,400 (NGF), and eight positions. For 2008, \$326,000 (GF) and \$130,400 (NGF).

► Fund drinking water construction projects

Provides funds to offset a decrease in the Drinking Water State Revolving Fund grant awarded to the Virginia Department of Health from the U.S. Environmental Protection Agency (EPA) from \$11.5 million to \$8.9 million in federal fiscal year 2006. Additional funds will make up this loss of funds from the EPA as well as increase the State's investment in financing resources available for drinking water projects. The additional funds will be grants only. For each year, \$5.0 million (GF).

▶ Recruit and retain local medical examiners

Provides funds to recruit and retain local medical examiners by increasing the reimbursement for death investigations from \$50 to \$150 per case. An increase in reimbursement will address the continuing decrease in the number of local medical examiners over the past 10 years that has resulted in 30 counties without local medical examiner services. For 2007, \$615,520 (GF). For 2008, \$648,740 (GF).

► Maintain support for Physician Financial Incentive programs

Increases general fund support for Physician Financial Incentive programs and phases out funding from the Board of Medicine. For 2007, an increase of \$280,284 (GF) and a decrease of \$280,284 (NGF). For 2008, an increase of \$560,568 (GF) and a decrease of \$560,568 (NGF).

▶ Provide culturally and linguistically appropriate health care services

Provides grants to local health departments for translation and interpreting services. For each year, \$125,000 (GF).

▶ Adjust funding for agency expenditures related to cost of basic operations

Adjusts funding for changes in operating costs related to central agency services and various charges. These include rental charges at the seat of government, procurement fees, property insurance premiums, and workers compensation insurance premiums. It also includes adjustments for changes in project management and security provided by the Virginia Information Technologies Agency and the transformation to service-based billing for technology services other than hardware and software. For 2007, \$498,176 (GF). For 2008, \$525,093 (GF).

► Expand breast and cervical cancer screening services to low-income women

Expands breast and cervical cancer screening services in local health departments to provide screening and diagnostic services for an additional 2,144 low-income women. For each year, \$405,176 (GF).

▶ Encourage the adoption of Electronic Health Records (EHR) in the Commonwealth

Provides funding to enhance efforts to promote the use of electronic health records. New funding will fund a pilot project in developing a Master Patient Index and Regional Health Information Organizations, positions in the Department of Health to guide the development of electronic health records, grants to providers for software, to include a grant to the Virginia Health Information (VHI) Patient Level Database, and an expansion of the Carilion pilot project in developing electronic health records in local health departments. For 2007, \$3.8 million (GF). For 2008, \$3.3 million (GF).

► Increase funding for the Virginia Health Care Foundation

Increases funding for the Rx Partnership to hire medication assistance caseworkers in localities throughout the state. These workers will use the Pharmacy Connection software to obtain free prescription medications from the drug companies' Patient Assistance Programs for uninsured Virginians with chronic diseases. For each year, \$250,000 (GF).

Agency Service Areas:

Scholarships

This service area addresses access to health care services in underserved areas of the state through scholarship and loan repayment programs designed to provide incentives to health practitioners who agree to practice in areas of need in the Commonwealth. These programs include:

- The Dental Scholarship Program,
- The Dentist Loan Repayment Program,
- The Virginia Medical Scholarship Program,
- The Virginia Physician Loan Repayment Program,
- The Virginia State Loan Repayment Program (SLRP),
- The Mary Marshall Nursing Scholarship Program,
- The Virginia Nurse Practitioner/Nurse Midwife Scholarship Program, and
- The Nursing Loan Repayment Program.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$1,808,196	\$1,808,196	0.00	0.00
Total for Service Area	\$1,808,196	\$1,808,196	0.00	0.00

Objective: Increase access to primary health, oral health, and mental health care services in underserved areas of the Commonwealth.

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Number of physicians, physician assistants, and nurse practitioners in underserved areas that received assistance through VDH administered scholarship and loan repayment programs.	36 awards were made in FY 2005.	50 awards in FY 2006.

Financial Assistance for Non Profit Emergency Medical Services Organizations and Localities

This service area includes Rescue Squad Assistance Fund Grants, Financial Assistance to Localities to support Non Profit EMS agencies, and funding provided to support the Virginia Association of Volunteer Rescue Squads (VAVRS). These items support the effective integration of personnel, transportation, communications, facilities, and education and training into a unified system that provides quality emergency medical care, thereby decreasing morbidity, mortality, and hospitalization. A comprehensive statewide system of emergency medical care offers an incentive for business and industry considering locating in the State.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$19,496,708	\$19,496,708	8.00	8.00
Transfer centrally funded amounts to agency budgets	\$54,223	\$54,223	0.00	0.00
Total for Service Area	\$19,550,931	\$19,550,931	8.00	8.00

Objective: Provide Financial Assistance for Emergency Medical Services

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Financial Assistance Provided for Emergency Medical Services in Compliance with Statutory Requirements	Fiscal Year 2006: Return to Localities is 25%, VAVRS is 2.5% and RSAF is 31.75%	100% award and obligation of RSAF funds and 100% distribution and expenditure of funds designated for localities and VAVRS.

State Office of Emergency Medical Services

The Virginia Emergency Medical Services (EMS) system is very large and complex, involving a wide variety of EMS agencies and personnel, including volunteer and career providers functioning in volunteer rescue squads, municipal fire departments, commercial ambulance services, hospitals, and a number of other settings to enable the EMS community to provide the highest quality emergency medical care possible to those in need. Every person living in or traveling through the state is a potential recipient of emergency medical care. The VDH, Office of Emergency Medical Service (OEMS) is responsible for developing an efficient and effective statewide EMS system.

Statewide planning and coordination is essential to assure the availability of quality emergency medical care across the Commonwealth and to provide a more coordinated response in large scale or mass casualty events requiring resources from a large number of EMS agencies and personnel. All aspects of the EMS system are included in statewide planning and coordination. The Office of Emergency Medical Services has developed a 5-Year-Plan that addresses specific services including: technical assistance related to general EMS system design and operation, EMS communications system design and implementation, recruitment & retention of EMS personnel, EMS training and continuing education for all levels of EMS providers, specialty care center designation, Critical Incident Stress Debriefing, and public information and education. The State EMS Advisory Board, its many committees, and eleven Regional EMS Councils are essential partners in the statewide planning and coordination effort.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$2,403,585	\$2,403,585	19.00	19.00
Transfer centrally funded amounts to agency budgets	\$135,093	\$135,093	0.00	0.00
Total for Service Area	\$2,538,678	\$2,538,678	19.00	19.00

Objective: Provide Emergency Operations, Training and Response

Kev Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Nev rendinance Measure(s)	Measure Daselline(s)	ivicasure raigets(s)

Number of EMS personnel trained in Mass Casualty Incident Response As of July 1, 2004, 5,300 have been trained in Mass Casualty Incident Management (MCIM) while attending basic EMT certification course.

Train 1,000 new EMT personnel in MCIM each year.

Regional Emergency Medical Services Councils

This service area is responsible for the coordination and integration of regional emergency medical services (EMS) into a statewide EMS system. Each of the 11 Regional EMS Councils maintains staff and facilities to conduct on-going coordination, planning, technical assistance, implementation, and evaluation of the EMS system within its designated service area. This is accomplished by maintaining a forum to facilitate the development and coordination of an effective and efficient regional EMS system, promoting and acting as an advocate for issues beneficial to the EMS system, and maintaining an advisory structure comprised of a governing Board of Directors and committees.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$2,685,314	\$2,685,314	0.00	0.00
Total for Service Area	\$2,685,314	\$2,685,314	0.00	0.00

Objective: Provide Statewide Regional Planning for Virginia's Emergency Medical Services System

	Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
_	Percent completion of the total number of contracted services within the performance based contract for each Regional EMS Council.	In fiscal year 2004 there was an overall 88% completion rate for all Regional EMS Councils' contracted services.	Each of the Regional EMS Council contracts will have a 95% completion rate for Fiscal Year 2007.

Anatomical Services

This service area provides donated cadavers to medical schools and research centers in the Commonwealth of Virginia for anatomical study. The nonprofit State Anatomical Program, supervised by the Office of the Chief Medical Examiner (OCME) within the Virginia Department of Health, is the only program in Virginia authorized to receive donation of human bodies for scientific study for the teaching of anatomy, surgery, and performing research in Virginia's medical schools, colleges, universities, and research facilities.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$186,451	\$186,451	3.00	3.00
Transfer centrally funded amounts to agency budgets	\$10,256	\$10,256	0.00	0.00
Total for Service Area	\$196,707	\$196.707	3.00	3.00

Objective: Increase the number of donor cadavers available to medical schools and research centers in Virginia, in order to provide sufficient anatomical material to properly teach anatomy of the human body.

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Number of cadavers provided to Virginia medical schools and research centers.	Baseline for FY 2005 was 310 cadavers.	360 cadavers in FY 2006.

Medical Examiner Services

This service area provides medicolegal death investigation. In Virginia, the first line of death investigation is the local city/county Medical Examiners (ME) who conduct the initial medicolegal death investigation and serve as the principal case investigator in the locality for deaths falling within their jurisdiction and statutory authority. The VDH Office of the Chief Medical Examiner (OCME) currently supports more than 225 local medical examiners. They receive the initial notification of death, collect the history of events surrounding the death and determine if the death should come under the jurisdiction of the medical examiner. Local medical examiners may examine and sign the certificate of death on medical examiner cases or, in accordance with OCME professionally established guidelines, refer certain classes of cases for more intensive death investigation and medicolegal autopsy at a district office.

When an autopsy is required, it is conducted by a Board Certified forensic pathologist in one of four district offices: Fairfax, Norfolk, Richmond or Roanoke. Each district is staffed by pathologists, death investigators, clerical and morgue personnel. These high security facilities are uniquely constructed with refrigeration, special ventilation, lead lined rooms for x-ray, autopsy rooms with special equipment, histology labs, and secure storage areas for criminal evidence and lab specimens. Each district has vehicles for limited body transport and for staff to get to court, meetings, and to deliver specimens.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$5,897,357	\$5,897,357	46.00	46.00
Transfer centrally funded amounts to agency budgets	\$278,111	\$278,111	0.00	0.00
Recruit and retain local medical examiners	\$615,520	\$648,740	0.00	0.00
Total for Service Area	\$6,790,988	\$6,824,208	46.00	46.00

Objective: Enhance Virginia's medicolegal death investigation system through increased local medical examiner recruitment.

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Number of local medical examiners.	Baseline for FY 2005 was 225 local medical examiners.	Target for FY 2006 is 275 local medical examiners.

Objective: Increase the number of identified decedents by implementing the tracking, entry and retrieval of information on Virginia's unidentified decedents.

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Number of identified decedents in the Commonwealth of Virginia.	In FY 2005 1% of medical examiner cases remained unidentified through modern forensic means of identification.	Target for FY 2006 will be to reduce the percentage of unidentified decedents that are medical examiner cases to .7%.

Health Statistics

This service area is responsible for the dissemination of health statistics information. This information is processed and made available to VDH, legislators, other government agencies, the National Center for Health Statistics, and the general public. There are six principal categories of statistical data managed by this service area: births, deaths, natural fetal deaths, induced terminations of pregnancy, marriages and divorces. These statistics are presented in the form of annual reports, special reports, electronic data exchange and consultation. This service area is administered by the VDH's Center for Health Statistics.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$850,072	\$850,072	10.00	10.00
Transfer centrally funded amounts to agency budgets	\$38,970	\$38,970	0.00	0.00
Total for Service Area	\$889,042	\$889,042	10.00	10.00

Objective: Improve the production of accurate, timely, and relevant health statistics

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Data processing error rate	Perform all work assignments with less than 2% errors (FY 2005).	Maintain maximum 2% error rate in FY 2006.
Timeliness of response to data requests	On average, all customer requests are responded to within 48 business hours (FY 2005).	Maximum 48 business hours (FY 2006).

Vital Records

This service area is responsible for the registration, collection, preservation, amendment and certification of vital records. The vital records system consists of births, deaths, spontaneous fetal deaths, induced termination of pregnancy, marriages, divorces or annulments, adoptions and amendments (alteration to a vital record). This service area is administered by the VDH Division of Vital Records.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$4,600,914	\$4,600,914	56.00	56.00
Transfer centrally funded amounts to agency budgets	\$166,609	\$166,609	0.00	0.00
Increase special fund appropriation for Vital Records	\$867,603	\$867,603	0.00	0.00
Total for Service Area	\$5,635,126	\$5,635,126	56.00	56.00

Objective: Decrease time required to respond to a citizen's request for a vital record.

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Number of business days required to respond to mailed in requests for a vital record that requires no amendments to the vital record.	Five days	Four days by December 2005.
Objective: Compile, and post on the inter	net, marriage, divorce, and annul	ment data from the year 2000 forward.
Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Percent of aggregate marriage, divorce and annulment data for the years 2000 and	Zero percent (0%)	100% by May 2006.

forward that are automated and posted to the VDH Website.

Immunization Program

This service area has responsibility for the support and oversight of statewide immunization activities. Through a variety of activities, the service area strives to maintain and distribute an adequate and viable vaccine supply. The program also conducts quality assurance site visits, oversees the investigation of suspected cases of vaccine preventable disease and assesses immunization coverage statewide. These and other program activities are effective in protecting the health of all Virginians.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$5,616,721	\$5,616,721	37.00	37.00
Transfer centrally funded amounts to agency budgets	\$101,589	\$101,589	0.00	0.00
Total for Service Area	\$5,718,310	\$5.718.310	37.00	37.00

Objective: Achieve and maintain maximum immunization coverage rates in Virginia's children and adults.

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Immunization coverage rates of children at 2 years of age.	81% (2004)	88%(2007)
Immunization coverage rates of children at school entry.	94% (2004)	95% (2007)

Objective: Improve influenza and pneumococcal coverage rates in persons 65+ years of age.

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Influenza vaccination coverage rates in persons 65+ years of age.	69% (2003)	80% (2007)
Pneumococcal vaccination coverage rates in persons 65+ years of age.	65% (2003)	77% (2007)

Tuberculosis Prevention and Control

The purpose of this service area is to control, prevent, and eventually eliminate tuberculosis (TB) from the Commonwealth. Through a variety of activities, the service area strives to detect every case of TB, assure the adequacy and completeness of treatment, and prevent further disease transmission. This service area is administered by the Division of Tuberculosis Control (DTC). The service area also includes the Newcomer Health Program (NHP), which focuses on the health needs of refugees newly resettled in Virginia. Major activities include:

- Disease surveillance for all TB cases from time of initial suspicion through case disposition,
- Consultation to local health departments on treatment, diagnosis, case management, contact investigations, discharge planning, and media relations,
- Direct assistance in large-scale contact investigations, when clusters are identified, and when needed on individual cases,
- Development of policies ranging from preventing disease transmission to the proper use of personal protection equipment,
- Oversight of TB awareness activities for the public and training opportunities for local health department personnel,
- Assistance and guidance to local health departments when involuntary isolation of a recalcitrant patient is required to minimize risks to others in the community.
- Application and administration of federal grants to fund the TB program,
- Coordination and facilitation of the initial health assessments of all newly arriving immigrants with a refugee or asylum status,
- Collection of data on refugee arrivals, health conditions and outcome of their assessment data, and
- Notification to local health districts that a newly arrived immigrant or refugee requires screening for tuberculosis.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$1,817,032	\$1,817,032	19.00	19.00
Transfer centrally funded amounts to agency budgets	\$51,667	\$51,667	0.00	0.00
Total for Service Area	\$1,868,699	\$1,868,699	19.00	19.00

Objective: Reduce the occurrence of TB disease among Virginia residents

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
The proportion of patients who complete an adequate and appropriate course of treatment within 12 months of treatment initiation.	During the five-year period from 1998-2002, Virginia averaged a completion rate of 91.7%.	By 2007, increase the proportion of patients who complete adequate and appropriate treatment within 12 months to at least 94%
The percentage of infected contacts of infectious TB that are placed on treatment for latent TB infection (LTBI) and complete that treatment regimen.	During the five-year period from 1998-2002, an average of 72.4% of the patients completed a course of treatment for LTBI.	By 2007, increase the proportion of patients who complete treatment for LTBI to at least 78%

Sexually Transmitted Disease Prevention and Control

STD Prevention and Control Services provides for the prevention and control of morbidity and mortality associated with sexually transmitted diseases (STD) and their complications, including assistance to local health departments and community organizations. Activities include:

- Oversight of statewide program activities;
- Policy and guidelines development;
- Grants management for STD Prevention and Control;
- Diagnostic and laboratory support for gonorrhea and chlamydia testing;
- Partner services (patient counseling, interviewing and partner referral);
- Early detection, referral, and treatment;
- Technical assistance and consultation;
- Targeted outreach to high-risk individuals;
- · Clinical and field screening;
- Community-based organization funding to provide syphilis and other STD interventions;
- Deployment of the Virginia Epidemiology Response Team (VERT) for outbreak situations;
- Risk reduction counseling;
- Oversight and management of surveillance activities, including forms completion, data management, trend analyses and disease monitoring, reporting and STD research initiatives;
- Program evaluation and quality assurance assessments; and
- Health care provider training and education.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$1,852,166	\$1,852,166	11.00	11.00
Transfer centrally funded amounts to agency budgets	\$25,258	\$25,258	0.00	0.00
Total for Service Area	\$1 877 424	\$1 877 424	11 00	11 00

Objective: Reduce the incidence of Sexually Transmitted Diseases (STD) among Virginia's citizens.

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Primary/secondary Syphilis incidence rate	The five-year (CY2000-2004) moving average of the annual incidence rate is 1.37 cases per 100,000 persons.	By the end of CY2009, reduce the five-year moving average incidence to 1 per 100,000.
Gonorrhea incidence rate	The five-year (CY2000-CY2004) moving average of the annual incidence rate is 135.9 cases per 100,000 persons.	Reduce the five-year moving average incidence rate to 122.6 by the end of CY2009.
Chlamydia incidence rate	The incidence rate for CY2004 was 290.1 cases per 100,000 persons. A firm baseline will be established by the end of CY2006.	Reduce the incidence rate annually.

Disease Investigation and Control Services

Disease Investigation and Control Services works to detect, assess, and control the spread of various communicable diseases. This service area focuses on approximately 50 different diseases of public health importance, including diarrheal diseases, hepatitis, meningitis, rabies, and vector-borne diseases (such as Lyme disease and West Nile Virus). Disease surveillance contains a variety of components, such as the following:

- Receiving reports from physicians, hospitals, and laboratories about people possibly diagnosed with a communicable disease of public health importance;
- Monitoring for the occurrence of disease in mosquitoes, birds, other animals, or contamination in the environment that could potentially lead to illness in humans;
- Tracking trends in daily utilization of medical care by reviewing data from emergency departments, provider claims, and pharmaceutical sales to detect unusual occurrences of disease;
- Compiling statistics to identify trends and patterns in disease activity in order to detect outbreaks or other disease events and producing reports summarizing disease activity data;
- Disease consultation and policy development to provide recommendations regarding interventions that can be implemented to interrupt the spread of disease:
- · Outbreak investigations to identify the source of an outbreak and prevent other people from being exposed to the source; and
- Monitoring for and responding to emerging infections and terrorism-related illnesses.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$3,788,626	\$3,788,626	9.00	9.00
Transfer centrally funded amounts to agency budgets	\$93,312	\$93,312	0.00	0.00
Total for Service Area	\$3.881.938	\$3,881,938	9.00	9.00

Objective: Conduct comprehensive surveillance for communicable diseases of public health significance.

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)

Number of viable surveillance systems for environmental vehicles and non-human vectors of disease

In June 2005, five systems existed, for reporting non-human indicators of WNV infection, animal rabies, harmful algal blooms, beach monitoring, and recreational water quality. Data from these systems are accessible to local health department staff.

By June 2006, maintain the existing five systems and ensure that they continue to function in a way that is useful to the agency and its customers.

HIV/AIDS Prevention and Treatment Services

HIV/AIDS Prevention and Treatment Services seeks to reduce the burden of HIV/AIDS on the Commonwealth. This service area identifies populations at greatest risk for becoming infected, provides services to prevent new HIV infections among individuals at risk, tracks the disease, links infected individuals into care, and provides treatment/medication to individuals who would otherwise be unable to access care. Additional activities include, but are not limited to:

- Development of policies and guidelines;
- Grants management for HIV prevention, surveillance and care;
- Funding of community-based organizations to provide health education programs to individuals at risk for acquiring or transmitting the disease:
- Public information for both the general public and targeted groups through hotline services and public information campaigns;
- Quality assurance for both health department and community-based service provision; and
- Provision of pharmaceutical services and medications to low income, uninsured persons for the treatment of HIV infection through the AIDS Drug Assistance Program (ADAP).

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$31,719,424	\$31,719,424	28.00	28.00
Transfer centrally funded amounts to agency budgets	\$416,826	\$416,826	0.00	0.00
Total for Service Area	\$32 136 250	\$32 136 250	28.00	28.00

Objective: Decrease new HIV infections among Virginia's citizens.

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
HIV infection incidence rate	The three-year rolling average incidence as of 2004 was 14.7 cases per 100,000 persons.	By the end of 2009, reduce the HIV incidence rate to no more than 12 cases per 100,000.
Percentage of individuals with newly- diagnosed HIV infection who receive their HIV test results.	The 2004 baseline was 61%.	Increase the percentage of individuals with newly-diagnosed HIV infection who receive their test results by 3% annually to achieve a rate of 80% by 2010.

Objective: Ensure that HIV-infected individuals receive optimal health care services that prolong length and quality of life.

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Five-Year HIV Survival Rate	The five-year survival percentage was 93.7% for 1999 diagnoses.	Maintain the percentage of individuals diagnosed with HIV who survive at least five years at no lower than 93% annually.
Percent of HIV-Infected Persons Receiving Optimal Drug Therapy	For fiscal year 2004, 97.7% of active ADAP clients receiving antiretrovirals were on regimens containing three or more medications.	Maintain at least 96% of active ADAP clients receiving antiretrovirals on regimens containing three or more medications annually.

Health Research, Planning and Coordination

The purpose of this service area is to improve access to quality health care for all Virginia residents by: 1) contributing to the development of health policy in the Commonwealth through analyses and research of the issues affecting the cost, quality, and accessibility of health care; 2) assisting rural and medically underserved communities and populations to improve healthcare systems; and 3) developing as well as administering programs to increase and strengthen the healthcare workforce. This service area is administered by the VDH Office of Health Policy and Planning (OHPP).

Products and services include:

- State Office of Rural Health,
- Designations of medically underserved areas or health professional shortage areas,
- Healthcare practitioner Recruitment and retention programs,
- Critical Access Hospital Program,
- Cullturally and Linguistically Appropriate Health Care Services Program,
- Small Rural Hospital Improvement Program,
- Minority Health Program,
- · National Health Service Corp Program, and
- Telehealth Program.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$2,557,836	\$2,557,836	10.00	10.00
Transfer centrally funded amounts to agency budgets	\$56,495	\$56,495	0.00	0.00
Provide culturally and linguistically appropriate health care services	\$125,000	\$125,000	0.00	0.00
Total for Service Area	\$2 739 331	\$2 739 331	10.00	10.00

Objective: Increase access to primary health care services in medically underserved areas of the Commonwealth.

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Number of medically underserved counties, census tracts, and minor civil divisions that are newly designated or redesignated as medically underserved areas or health professional shortage areas.	Fifteen areas were newly designated and no areas were redesignated from April 2003 to May 2004	Increase the number of areas newly designated to twenty and the number of areas redesignated to twenty in FY07

Regulation of Health Care Facilities

This service area implements the Virginia medical facilities and services licensure laws and regulations in order to assure quality of care and protect the public. This is accomplished through:

- •Licensure of five categories of medical care facilities or services: hospitals, outpatient surgical hospitals, nursing facilities, home care organizations, and hospice programs;
- •Regulatory development to establish minimum requirements to assure quality health care, while assuring efficient and effective program operation;
- •Certification and registration programs for managed care health insurance plans and private review agents;
- •Investigation of consumer complaints regarding the quality of health care services received;
- •Providing training and technical assistance to medical facilities and practitioners; and
- •Inspection and enforcement of medical care facility and services licensing laws and regulation.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$7,737,852	\$7,737,852	84.00	84.00
Transfer centrally funded amounts to agency budgets	\$488,113	\$488,113	0.00	0.00
Total for Service Area	\$8,225,965	\$8,225,965	84.00	84.00

Objective: Improve the quality of life and the quality of health care provided to long-term care residents diagnosed with pressure ulcers, or at risk for acquiring pressure ulcers.

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Percentage of residents of long term care facilities who have pressure ulcers	The fiscal year 2004 Virginia pressure ulcer rate was 13%.	Reduce the Virginia pressure ulcer rate to below 13% by the end of fiscal year 2006.

Certificate of Public Need

This service area implements the Virginia Medical Care Facilities Certificate of Public Need COPN) laws and regulations. The COPN program requires that a provider of health care services must demonstrate that a public need exists for certain listed equipment and services before establishing the service or adding capacity. The program was established in Virginia in 1973. The statutory objectives of the program are: (i) promoting comprehensive health planning to meet the needs of the public; (ii) promoting the highest quality of care at the lowest possible cost; (iii) avoiding unnecessary duplication of medical care facilities; and (iv) providing an orderly procedure for resolving questions concerning the need to construct or modify medical care facilities. In essence, the program seeks to contain health care costs while ensuring financial and geographic access to quality health care for Virginia citizens.

Products and services include:

- Permitting of 11 categories of medical care facilities or services;
- Review, analysis and formulation of recommendations for COPN request based on 20 criteria for determining need;
- Assist the State Health Commissioner in the administration of the COPN program;
- Regulatory development to provide an orderly procedure for resolving questions concerning the need to construct or modify medical care facilities;
- The State Medical Facilities Plan;
- Assessing and tracking of charity care contributions from COPN applicants;
- Participating in informal fact finding conferences;
- The nursing facility Request for Applications (RFA) process;
- Release of monthly and annual reports on the status of COPN projects reviewed;
- Quadrennial nursing home utilization study.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$1,090,164	\$1,090,164	11.00	11.00
Transfer centrally funded amounts to agency budgets	\$65,283	\$65,283	0.00	0.00
Total for Service Area	\$1,155,447	\$1,155,447	11.00	11.00

Objective: Improve compliance with agreed upon conditions of approval for certificates of public need.

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Rate of COPN Condition Compliance Reporting	The average annual reporting of compliance with conditions through the end of FY 2004 was 35% of expected reports.	Increase compliance with the reporting requirement to 60% by June 30, 2006.
Rate of Compliance with Conditioned Obligations	The average compliance with conditions through the end of FY 2004 was 25% of agreed upon obligations.	Increase compliance with the obligations of agreed upon conditions to 60% by June 30, 2006.

Child and Adolescent Health Services

This service area administers much of the child health services component of the federal Maternal Child Health Block Grant, including the program for children with special health care needs. It provides surveillance through assessment, screening and other child-find activities; analyzes and develops policy related to child and adolescent health; works to assure that children and their families are linked to needed health services; and provides training and technical assistance to partners promoting safe and healthy environments for children.

This service area implements the following programs and initiatives statewide or agency wide:

- Programs for children with special health care needs, including: Care Connection for Children, Child Development Services, Bleeding Disorders Program, Newborn Screening Services, Early Hearing Detection and Intervention Services, Virginia Congenital Anomalies Reporting and Education (VaCARES);
- Childhood Lead Poisoning Prevention (Lead-Safe Virginia);
- Healthy Child Care Virginia;
- Adolescent Sexual Health including the Abstinence Education Initiative, Teenage Pregnancy Prevention Initiative, and Better Beginnings Coalitions;
- Bright Futures anticipatory guidance;
- Technical assistance on clinical issues related to the early childhood (Birth 5), school age, and adolescent populations in the preschool and school setting; and
- Policy analysis and quantitative assessment.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$16,271,147	\$16,271,147	65.00	65.00
Transfer centrally funded amounts to agency budgets	\$114,409	\$114,409	0.00	0.00
Total for Service Area	\$16,385,556	\$16,385,556	65.00	65.00

Objective: Identify clinical conditions that, if not detected and treated early, may result in significant morbidity and mortality to infants and children.

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Percent of infants born in Virginia who are screened for selected heritable disorders/ genetic diseases	2-year average (calendar years 2003-2004) to be determined by August 2005.	Maintain 100% in FY06.
Percent of newborns who are screened for hearing loss before hospital discharge.	95.7% of newborns were screened for hearing loss before discharge from a Virginia hospital during calendar year 2003.	96% in calendar year 2006
Percent of Medicaid eligible children under the age of 36 months tested for lead exposure.	9% (three-year average based on FY 02-04)	10% for FY06

Objective: Link children, adolescents, and families to personal health services and community resources.

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Number of CSHCN receiving care coordination services.	FY04 annual number for CCC was 4,894, for VBDP was 218, and CDC was 2,114; total across all networks of 7,226.	7,500 served in all CSHCN networks in FY06
Percent of infants diagnosed with a hearing loss who receive early intervention services before six months of age.	40.28% of infants who were born in Virginia during calendar year 2003 were reported with hearing loss, and received early intervention services before six months of age.	44% in calendar year 2004, to be reported in 2005

Objective: Inform, educate, and empower youth to make healthy lifestyle choices.

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Teenage pregnancy rates in Alexandria, Crater, Eastern Shore, Norfolk, Portsmouth, Richmond and Roanoke Health Districts.	During 2003: Alexandria - 63.3/1000, Crater - 46.0, Eastern Shore - 38.4, Norfolk - 52.5, Portsmouth - 51.9, Richmond - 80.6, Roanoke - 48.9, Virginia - 27.4	Each district rate to decrease two percent as of 2004, with the actual results to be reported in 2006
Number of total persons served by local Teenage Pregnancy Prevention Programs.	1,020 in FY04	1,200 in FY06
Percentage of Teenage Pregnancy Prevention Program attendees participating in at least 75 percent of program sessions.	80% in FY04	85% in F 06
Percentage of Teenage Pregnancy Prevention Program attendees that receive the "critical does" of program by attending more than ten sessions.	60% in FY04	70% in FY06
Percent of teens in grades 7 - 9 served by the Abstinence Education Initiative reporting never having had sexual intercourse.	84% in FY03	85% in FY07
Number of parents utilizing "Talk 2 Me" toolkit to discuss sexuality with their teens in localities with abstinence education programs.	New measure; baseline data not available. Will use FY06 to determine baseline for FY07	To be developed once baseline is established.

Women's and Infant's Health Services

This service area seeks to improve the health of women and infants in the Commonwealth by assessing their needs, developing policies, building capacity and strengthening the infrastructure to meet these needs, and assuring that quality services are provided to this population. This is accomplished through resource development and allocation; program monitoring and evaluation; public and customer education; technical assistance, consultation and training; and provision of direct services.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$4,849,848	\$4,849,848	19.00	19.00
Transfer centrally funded amounts to agency budgets	\$529,104	\$529,104	0.00	0.00
Expand Resource Mothers program	\$590,000	\$590,000	0.00	0.00
Expand breast and cervical cancer screening services to low-income women	\$405,176	\$405,176	0.00	0.00
Total for Service Area	\$6,374,128	\$6,374,128	19.00	19.00

Objective: Eliminate barriers to care and increase access to care for women, infants and their families by facilitating systemic changes, developing policies, improving practices, providing direct services and pursuing additional funding.

 Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Perinatal mortality rate.	7.0 deaths per thousand resident live births in 2003.	Maintain the rate at no more 7.0 deaths per 1,000 live births by June 2008.

Chronic Disease Prevention, Health Promotion, and Oral Heath

This service area implements programs that address chronic diseases that have serious long-term health and social consequences. Chronic diseases including cardiovascular disease (heart disease and stroke), cancer, diabetes and oral diseases are among the most prevalent, costly, and preventable of all health problems. In spite of improvements in prevention in oral health, dental caries (tooth decay) remains the most common chronic disease in Virginia's children.

Products and services include:

- Addressing environmental and policy strategies that affect chronic diseases as well as oral health policies and plans;
- Working with partners to affect change in systems which influence the prevention or control of chronic diseases including access for persons living with disabilities;
- Encouraging healthy lifestyles and addressing risk factors that affect multiple chronic disease states;
- Developing culturally appropriate chronic disease prevention self-management strategies;
- Planning, promoting, and implementing chronic disease prevention training events to develop and enhance partners' knowledge and skills:
- Coordinating resources and messages for media campaigns;
- Supporting communities through grants or agreements for chronic disease initiatives;
- Collaborating across individual disease prevention project areas to achieve a state comprehensive chronic disease prevention approach;
- Developing education, training and oral health promotion programs targeted to school age, maternal, early child and adult/older adult populations;
- Developing, administering and monitoring prevention programs utilizing topical and systemic fluorides to reduce the incidence of tooth decay; and
- Providing technical assistance to local health departments and communities regarding chronic disease intervention and regarding the practice of dentistry through site reviews, recruitment and orientation of staff.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$4,916,240	\$4,916,240	21.00	21.00
Transfer centrally funded amounts to agency budgets	\$194,774	\$194,774	0.00	0.00
Total for Service Area	\$5,111,014	\$5,111,014	21.00	21.00

Objective: Improve health outcomes and quality of life by addressing risk factors and/or disease management practices contributing to chronic disease morbidity and mortality in Virginia.

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Percentage of adult population 18 years and over whom smoke.	2002: 24.6%	By 2007: 22%
Percentage of adult population 18 years and over who are obese.	2002: 23.7%	By 2007: 22%
Rate of deaths per 100,000 with a primary cause of coronary heart disease.	2002: 144.3 deaths per 100,000	By 2007: 140.0 deaths per 100,000

Objective: Inform, educate, and empower Virginians (especially high-risk populations and the organizations that serve them), about oral health and chronic disease prevention and control issues and best practices.

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Number of school personnel, preschool staff and health professionals who receive training regarding oral health topics.	1,709 were trained in FY05.	Increase to 2,000 trained in FY07.
Number of citizens of all ages educated regarding oral health.	31,283 citizens served in FY05.	In FY07 serve 35,000 citizens.

Objective: Mobilize and sustain partnerships with coalitions, task groups and councils to develop policies and plans, and implement and evaluate chronic disease initiatives.

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Number of chronic disease state plans.	2005; seven	By 2007; eight
Number of coalitions and partnerships	FY05: 82 coalitions and partnerships	By 2007: maintain 82 coalitions and partnerships
Percent of funded partners that received an annual site visit by DCDPC project area staff.	2004: 100%	By 2007: Maintain 100%

Injury and Violence Prevention

This service area implements strategies to prevent the public health toll of injury and violence across the lifespan. Products and services address childhood and elderly unintentional injury (transportation, home and recreation), suicide and self-inflicted injury, and violence (sexual assault, domestic, youth) and include:

- · research and assessment,
- policy and program development,
- training of providers,
- school and community projects,
- promotion and dissemination of safety devices, and
- information dissemination.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$4,173,438	\$4,173,438	13.00	13.00
Transfer centrally funded amounts to agency budgets	\$251,779	\$251,779	0.00	0.00
Reflect administrative nongeneral fund increases in agency budget	\$280,000	\$280,000	0.00	0.00
Total for Service Area	\$4,705,217	\$4,705,217	13.00	13.00

Objective: Prevent injuries and injury deaths in Virginia

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Childhood (0-19 years) unintentional injury death rate.	11.82 injury deaths per 100,000 population (2003)	Maintain the childhood unintentional injury death rate of 11.82 injury deaths per 100,000 population through 2006.

Women, Infants, and Children (WIC) and Community Nutrition Services

This service area administers the U. S. Department of Agriculture's (USDA) Special Supplemental Nutrition Program for Women, Infants and Children (WIC) Program to eligible residents of the Commonwealth. This service area is administered by the VDH Division of WIC and Community Nutrition Services. In addition the service area supports public health community nutrition throughout the Commonwealth. Recently, the service area has assumed the role of facilitator, convener and leader of obesity prevention and control within the Commonwealth as well.

The Virginia WIC Program serves women who are breastfeeding, pregnant or have just given birth; infants less than one (1) year-old and children less than five (5) years-old. WIC participants must be Virginia residents and meet the financial and nutritional requirements set forth by regulations. Financial eligibility is defined as income below 185% of the federal poverty level while nutritional eligibility is defined by risk factors such as a medical problem or an unhealthy diet. Mothers, fathers and legal guardians may apply for WIC benefits for the children in their care.

The purpose of the program is to assure healthy diets during pregnancy and breast-feeding, infancy and early childhood to age five for eligible families who might otherwise not be able to afford to eat properly. The provision of education for mothers and/or primary care-givers about healthy eating is coupled with vouchers to purchase a defined package of high nutrient foods at community groceries. Increasing attention is being paid to educating families about ways to avoid the risks of childhood obesity while assuring proper nutrition. Breastfeeding is promoted while regular and specially prescribed formulas are provided for infants who are not breastfed.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$65,574,998	\$65,574,998	37.00	37.00
Transfer centrally funded amounts to agency budgets	\$527,668	\$527,668	0.00	0.00
Total for Service Area	\$66,102,666	\$66,102,666	37.00	37.00

Objective: Ensure cost effective administration and management of the WIC program.

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Number of newly certified pregnant women enrolled in WIC	Since FY04, the average number of pregnant women becoming certified per month is 1,915.	Increase the monthly average to 2,016 (10% increase) by July 2007.

Local Dental Services

This service area provides a range of oral health services for the community including education, prevention, screening, diagnosis and treatment. The focus is primarily on the provision of quality services to the indigent population and other special population groups, especially children who, for various reasons, lack access to basic oral health care. In addition, the service area recruits volunteers or staff to administer the fluoride mouth rinse programs in schools where lack of fluoridated water places children at higher risk of dental caries. The service area also monitors the oral health status of the community using standard measures of need, including evaluation of demographic data, availability of fluoridated water supplies and supplemental fluoride programs, prevalence of dental disease both past and present, appropriate utilization of dental sealants, and availability and accessibility of dental education, prevention, screening, diagnostic and treatment services.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$7,498,103	\$7,498,103	94.00	94.00
Transfer centrally funded amounts to agency budgets	\$424,944	\$424,944	0.00	0.00
Increase nongeneral fund appropriation for local health departments	\$700,000	\$700,000	0.00	0.00
Total for Service Area	\$8,623,047	\$8,623,047	94.00	94.00

Objective: Improve and maintain population based factors affecting oral health status

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
The number of Local Health Districts that monitor the fluoridation of all public water supplies in the health district and determine the percent of district population served by community water supplies with optimum fluoridation, annually	Five districts (14%) in 2004	15 districts (43%) in 2007
The number of local health districts that have an oral and craniofacial health surveillance system in at least one jurisdiction in the district	3 districts (9%) in 2004	6 districts (17%) by 2007

Objective: Provide oral healthcare services targeting at risk populations, particularly low income children

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
The number of low income children and adolescents receiving dental services provided by local health department public health dental staff	20,793 in FY04	21,831 (5% increase) by FY07
Number of dental sealants placed on teeth of low income children and adolescents by public health dental workforce	19,429 in FY04	21,371 (10% increase) by FY07

Restaurant and Food Safety, Well and Septic Permitting and Other Environmental Health Services

This service area enforces Virginia's sanitary regulations that are designed to protect the public health of Virginians and visitors to Virginia. This is accomplished by enforcing regulations pertaining to food, hotels, summer camps, campgrounds, migrant labor camps, swimming pools, private wells, onsite sewage disposal, and other environmental health laws. Products and services include:

- Customer service, such as technical assistance, training, Freedom of Information Act (FOIA) requests, and maintenance of records;
- Inspection and enforcement of food safety, swimming pools, milk plants, hotels, summer camps, campgrounds, migrant labor camps, private well and onsite septic system laws and regulations;
- Permitting of food establishments, hotels, milk plants, summer camps, campgrounds, migrant labor camps, and swimming pools;
- Collecting specimens of animals suspected of having rabies and transporting them to DCLS for testing; and
- Responding to citizen complaints concerning environmental health hazards with the potential of endangering the public health e.g. standing water, lead exposure, unsanitary disposal of trash, rodent infestations, etc.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$32,529,636	\$32,529,636	530.00	530.00
Transfer centrally funded amounts to agency budgets	\$2,216,216	\$2,216,216	0.00	0.00
Recognize Richmond city health department as a state operated health district	\$1,497,492	\$1,497,492	21.00	21.00
Ensure food safety by addressing growing gap in demand for Environmental Health Services	\$456,400	\$456,400	8.00	8.00
Total for Service Area	\$36,699,744	\$36,699,744	559.00	559.00

Objective: Reduce environmental and communicable disease hazards due to contaminated wells and failing onsite sewage disposal systems.

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Percent of repair applications granted for failing onsite septic sewage disposal systems.	VDH issued repair permits for 80% of all known failing onsite sewage disposal systems in FY05.	Issue repair permits for 85% of all known failing systems in FY06.

Objective: Reduce environmental and communicable disease hazards at food establishments, hotels, swimming pools, migrant labor camps, campgrounds and milk plants.

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Frequency of restaurant inspections.	In FY04, 65% of all scheduled restaurant inspections, in accordance with VDH policy which establishes an inspection frequency based on the restaurant's risk classification, were conducted within 30 days of the scheduled date.	Conduct 70% of scheduled restaurant inspections within 30 days of scheduled date during FY06.

Local Family Planning Services

Local family planning services provide primary and secondary prevention, as well as health promotion, diagnosis and treatment. Family planning counseling is an example of primary prevention. The counseling involves specific intervention to protect against an unintended condition (pregnancy), or to plan for a future pregnancy. This is a voluntary program that offers all men and women in the Commonwealth, regardless of financial status, a means to exercise personal choice in determining the number and spacing of their children. Secondary prevention such as Papanicolaou smear or Chlamydia screening promotes early case finding for cervical cancer and infertility. Health promotion activities such as nutrition counseling, smoking cessation, and behavioral risk reduction counseling all focus on activities that increase a person's overall level of health and health awareness. Family planning services assist individuals in preventing sexually transmitted infections and play a major role in the early detection of breast and cervical cancer. Local family planning services also include:

- Promotion of abstinence education and family involvement messages to minors seeking services,
- Provision of acceptable and effective methods of contraception, and
- Pre-conceptional counseling.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$15,853,534	\$15,853,534	215.00	215.00
Transfer centrally funded amounts to agency budgets	\$808,595	\$808,595	0.00	0.00
Recognize Richmond city health department as a state operated health district	\$578,715	\$578,715	13.00	13.00
Total for Service Area	\$17,240,844	\$17,240,844	228.00	228.00

Objective: Increase the number of individuals served who are in need of publicly funded family planning services.

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)		
Number of individuals served	Local Health Departments provided family planning services to 80,105 customers in CY04	80,905 (1 percent increase) in CY06		
Objective: Reduce the teenage pregnancy rate.				
Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)		

Virginia Teen Pregnancy rate for 10-19 year olds was 27.4 in 2003

Reduce the 2003 rate by 1% in calendar

vear 2006

Support for Local Management, Business, and Facilities

Teen pregnancy rate

This service area provides leadership, programmatic direction, and management of human and financial resources for local health departments (LHDs). LHDs are organized into districts to achieve management efficiencies and comprise between one and ten political subdivisions. This service area includes business functions such as budgeting, accounting, and procurement and makes resource allocation decisions among political subdivisions based on need, available local matching funds, and estimates of earned revenue. Resources include local health department staff, funding, equipment, supplies, office space, buildings, and vehicles. Support encompasses ongoing assessment and evaluation to assure that services and programs of the local health department continue to match local community needs. Sound management and close oversight ensure that expenditures for essential local public health services remain as low as possible; and that programs are effective in attaining goals and comply with all applicable federal, state, and local laws, regulations, and policies.

Local health departments operate under two models. The vast majority of cities and counties contract with VDH. Three local governments (Arlington and Fairfax counties, and the City of Richmond) sought and obtained General Assembly approval to administer LHDs as a unit of local government. Richmond City has recently requested to 'reaffiliate' with VDH and efforts are underway to accomplish this. Locally administered health departments must comply with the same programmatic requirements, policies, regulations, and laws as other LHDS.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$44,799,306	\$44,799,306	342.00	342.00
Transfer centrally funded amounts to agency budgets	\$3,287,215	\$3,287,215	0.00	0.00
Recognize Richmond city health department as a state operated health district	(\$2,216,082)	(\$2,216,082)	20.00	20.00
Address critical local health department facility needs	\$281,116	\$281,116	0.00	0.00
Total for Service Area	\$46,151,555	\$46,151,555	362.00	362.00

Objective: Strengthen essential public health programs through monitoring and evaluating current performance.

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Performance of local health departments compared to national standards	New measure; baseline data not available. Baseline to be developed by the end of FY06	100 percent of local health departments meet at least 80 percent of established standards by FY09.

Objective: Follow good business practices to ensure ethical stewardship of public funds.

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Compliance with Internal and External Audit requirements.	Most recent audit of each local health department	100% of local health departments will have no material weaknesses, including internal control failures, and will take corrective action to assure no repeat audit findings, by FY07.

Local Maternal and Child Health Services

Maternal and Child Health at the local level provides essential public health service functions which are necessary to protect and improve the health of pregnant women, infants, children and adolescents in a healthy environment, whether that is the family, an external setting such as daycare, or the broader community. Maternal and child health services include assuring provision of direct or facilitative care services, assuring provider and parent capabilities, and mobilizing community partnerships in identifying and achieving solutions. Services include:

- Assure pregnancy identification, and prenatal care, follow up and referral services through postpartum care;
- Provide case coordination and/or case management services in order to increase the ability of the client to meet prenatal care guidelines, understand and practice healthy behaviors prior to and during pregnancy, and achieve healthy pregnancy outcomes;
- Mobilize groups, coalitions and systems within the community that promote and assure services (families, providers, voluntary, corporate or other organizations);
- Facilitate health insurance enrollment for children and families;
- Provide safety net ambulatory care for sick and well children in coordination with community health care resources;
- Screen and identify early intervention for physical and developmental conditions that affect health and learning readiness, and health problems related to environmental factors, such as lead and asthma;
- Provide infant and child case management services, developmental assessment, anticipatory guidance and injury prevention;
- Promote provider education on public health principles, practices, and professional care standards as they affect health outcomes;
- Assure care of children with health needs in group settings such as day care, preschool and school, including identification of individual and group health and safety needs.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$37,375,203	\$37,375,203	668.00	668.00
Transfer centrally funded amounts to agency budgets	\$2,356,513	\$2,356,513	0.00	0.00
Recognize Richmond city health department as a state operated health district	\$2,143,665	\$2,143,665	24.00	24.00
Total for Service Area	\$41,875,381	\$41,875,381	692.00	692.00

Objective: Improve pregnancy outcomes by assuring early entry into prenatal care.

Number of pregnancies receiving direct or facilitative services through local health departments	Local health departments provided care or care coordination to 8,255 prenatal patients in federal FY03.	Increase the number of prenatal patients provided care or care coordination by local health departments by 2% over baseline in FY07.
	for appropriate services children with chronic medical, emotional, behaviora Measure Baseline(s)	
Number of children with special health care needs (CSHCN) served through local health districts, including children served through the Child Development Clinic system	VDH Child Development Clinics served 3,144 CSHCN in FY04.	Increase by 2% the number of CSHCN served through VDH Child Development Clinics and through local health departments, over baseline in FY06.

Measure Baseline(s)

Key Performance Measure(s)

Measure Targets(s)

Local Immunization Services

Local health departments have statuatory responsibility to maintain and operate effective immunization programs which provide vaccines to the public with an emphasis on the vaccine-preventable diseases of childhood such as chicken pox, diphtheria, haemophilus influenza, hepatitis B, measles, mumps, pertussis, polio, rubella, and tetanus, Additional targeted groups for the provision of influenza vaccine are the very young, those with certain environmental or medically high risk conditions, and the elderly who are also targeted for bacterial pneumonia vaccination. Local health departments maintain an inventory or assure access to rabies vaccine and biologicals for administration to those citizens exposed to wild or domestic animals when rabies disease is suspected or proven in the animal. Local health departments participate in and implement on an as-needed basis emergency preparedness measures such as the recent smallpox vaccination program. All local health departments develop and maintain mass vaccination plans in accordance with state and federal emergency preparedness guidelines. Many local departments offer meningitis vaccinations for beginning students at higher education institutions. Many local health departments provide immunizations required or recommended for foreign travel.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$8,055,428	\$8,055,428	112.00	112.00
Transfer centrally funded amounts to agency budgets	\$268,034	\$268,034	0.00	0.00
Recognize Richmond city health department as a state operated health district	\$275,445	\$275,445	5.00	5.00
Total for Service Area	\$8,598,907	\$8,598,907	117.00	117.00

Objective: Achieve and maintain maximum immunization coverage rates in Virginia's infants and children.

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Immunization coverage rates of children at 2 years of age	81% (2004)	88% (2007)
Immunization coverage rates of children at school entry	94% (2004)	95% (2007)

Objective: Improve influenza and pneumococcal coverage rates in persons 65+ years of age.

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Influenza vaccination coverage rates in persons 65+ years of age	65% (2003)	80% (2007)
Pneumococcal vaccination coverage rates in persons 65+ years of age	65% (2003)	77% (2007)

Local Communicable Disease Investigation, Treatment, and Control

The local health department's Communicable Disease Prevention, Investigation, Treatment and Control services work with partners to prevent, detect, assess, respond, treat and control communicable diseases, emerging infections and terrorism related illnesses. These activities are performed in accordance with guidance, policies and procedures of VDH's Surveillance and Investigation, Immunization, Sexually Transmitted Disease, HIV/AIDS, Tuberculosis, and Newcomer Health programs.

Local Health Department Communicable Disease Services include:

- Disease prevention services,
- Disease surveillance to detect the occurrence of disease as quickly as possible,
- Consultation and technical assistance to health care providers, schools and institutions,
- Media relations, press releases and education material,
- Development of disease-specific emergency response plans,
- Health screenings for refugees,
- Disease record management,
- Outbreaks and individual disease investigations,
- Disease exposure notification and counseling services,
- Monitoring for and responding to emerging infections and terrorism-related illnesses,
- · Clinical diagnoses and treatment of communicable diseases (including STD, HIV/AIDS and Tuberculosis),
- · Medical treatment case management, and
- Assist providers in reporting vaccine adverse events.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$14,654,536	\$14,654,536	211.00	211.00
Transfer centrally funded amounts to agency budgets	\$1,264,410	\$1,264,410	0.00	0.00
Increase nongeneral fund appropriation for local health departments	\$1,300,000	\$1,300,000	0.00	0.00
Recognize Richmond city health department as a state operated health district	\$600,298	\$600,298	11.00	11.00
Increase position level to maintain local public health services in Suffolk	\$0	\$0	18.00	18.00
Total for Service Area	\$17,819,244	\$17,819,244	240.00	240.00

Objective: Prevent syphilis transmission in Virginia.

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
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Percent of early syphilis cases appropriately treated within seven days of diagnosis.

The annual proportion of reported early syphilis cases that were treated in seven days or less is 74% (135/182). This outcome is based on a three year average (CY 2002 – 2004).

Ensure that at least 76% of the reported early syphilis cases are appropriately treated each calendar year.

Objective: Increase the proportion of Tuberculosis (TB) patients who complete an adequate and appropriate course of treatment within 12 months of treatment initiation.

 Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Completion of TB Treatment within 12 months	During the five-year period from 1998-2002, Virginia averaged a completion rate of 91.7%.	Increase the proportion of patients who complete adequate and appropriate treatment within 12 months to at least 94% by FY07.

Local Home Health and Personal Care Services

This service area provides home health, personal care, and pre-admission screening for nursing home placement.

In 1965, Federal legislation established Medicare as the health insurance program for Social Security beneficiaries. The Medicare program includes a home health benefit that provides part-time or intermittent care for homebound Medicare recipients. Services require a written physician plan of care and include skilled nursing, physical, occupational and speech therapies, home health aide services and medical social work services. At the time Medicare was enacted, local health departments in Virginia established Medicare-certified Home Health Agencies under the direction of the VDH Office of Home Health Services. Most local health departments provided home health services until the late-1980's, when private home health agencies replaced most of the public agencies during the ensuing decade.

The Omnibus Budget Reconciliation Act (OBRA) of 1997 authorized the reimbursement system for Medicare Home Health benefits to change from fee-for-service to a Prospective Pay System (PPS). This change was implemented in October, 1997 and, along with the increasing prevalence of private agencies across the state, prompted the few remaining local health department home health agencies to close. The Western Tidewater Health District elected not to close its home health agency for two reasons. The district assessed the PPS reimbursement method and determined that public agencies would not experience the reduction in revenue the PPS was predicted to create in private sector agencies. In addition, the experience of the District indicated that there were no private agencies that would accept uninsured or low income self-pay patients or that would serve the total, very rural, geographic area of Western Tidewater. By electing to remain a home health provider, the District assured that services would be available to all eligible residents regardless of their ability to pay or where they lived in Western Tidewater.

The legislation that established Medicare also established the Medicaid insurance program under Title XIX of the Social Security Act as a jointly funded federal and state program to provide medical assistance to low-income individuals. Federal Medicaid law allows states to craft Medicaid waiver programs to meet specific state needs. In 1984, Virginia established the Personal Care program to offer in-home care in lieu of nursing home placement to Medicaid-eligible individuals if the in-home care was less expensive than the cost of a nursing home. A number of local health departments in Virginia elected to contract with the Department of Medical Assistance Services (DMAS) as personal care providers. Over the next 20 years, however, nearly all local health departments closed their Personal Care programs when private sector personal care agencies became robust enough to meet the needs of the community. The Pittsylvania-Danville and Western Tidewater Health Districts have maintained Personal Care programs. Both districts cover large rural areas where the private sector has been unable to meet the demand for services for numerous reasons and the public agencies continue to assure that all eligible residents are able to access the service.

Virginia has initiated other Medicaid waiver programs to improve health care access for specific low-income populations. Among others, they include an AIDS waiver, Respite services for Personal Care recipients, and Mental Retardation waiver services. The Western Tidewater Health District contracts with DMAS to provide Respite services as an adjunct to Personal Care. There are no other providers of MR waiver services in the geographic area served by Western Tidewater, so the district also contracts with DMAS to provide those services to a population who would otherwise remain unserved.

The Medicaid program requires Nursing Home Pre-admission Screening (NHPAS) to assure that extended care facility admission is appropriate. The Code of Virginia requires that local health department staff serve as members of the community-based screening teams. All local health departments in Virginia provide the physician and nurse members of the local screening team.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$5,313,632	\$5,313,632	24.00	24.00
Transfer centrally funded amounts to agency budgets	\$38,733	\$38,733	0.00	0.00
Recognize Richmond city health department as a state operated health district	\$227,570	\$227,570	3.00	3.00
Increase position level to maintain local public health services in Suffolk	\$0	\$0	16.00	16.00
Total for Service Area	\$5,579,935	\$5,579,935	43.00	43.00

Objective: Provide community-based Nursing Home Pre-Admission Screening (NHPAS) for Virginians who are at risk for nursing home placement.

Measure Baseline(s)

Measure Targets(s)

Community-based NHPAS conducted by local screening teams.

In CY04, 96% of community nursing home screenings conducted by local health departments were reported and recorded in the VDH Web-vision database.

100% of nursing home screening data reported and recorded in the VDH Web Vision data base by December 31, 2006.

Local Chronic Disease and Prevention Control

Chronic Disease Prevention and Control includes two broad areas of local health department services; 1) prevention of chronic diseases before they occur through health promotion and disease prevention activities and 2) provision of clinical services for indigent patients with chronic diseases (provided by some local health departments).

Health promotion and disease prevention services are activities directed to reducing mortality and morbidity or premature mortality and morbidity associated with chronic diseases such as heart disease, cancer, diabetes, arthritis, asthma and stroke. The main focus of these programs is to reduce controllable risk factors such as high blood pressure, cholesterol, smoking, physical activity and obesity. This includes a wide range of services to assist citizens such as blood pressure and cholesterol screening and counseling, social marketing programs focusing on improving physical activity, nutrition and smoking prevention/reduction, working with community partners to assess the community's health status and prioritize issues, implementing environmental and policy changes, and providing traditional health education classes. This includes services to groups and individuals that are clinic, community or home-based, and the local health departments' Breast and Cervical Cancer Screening Program that provides clinical breast exams and screening mammography to detect breast cancer in the presymptomatic stage. Pap smear testing is performed to detect precancerous changes in the cervix.

A few local health departments provide acute and chronic medical care for indigent adults needing medical care for chronic disease conditions such as diabetes and hypertension. This may include laboratory and pharmacologic support, follow-up, and referrals to private specialists for complex medical conditions.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$10,847,698	\$10,847,698	147.00	147.00
Transfer centrally funded amounts to agency budgets	\$602,623	\$602,623	0.00	0.00
Recognize Richmond city health department as a state operated health district	\$356,956	\$356,956	5.00	5.00
Total for Service Area	\$11,807,277	\$11,807,277	152.00	152.00

Objective: Educate the public effectively about chronic disease prevention.

 Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Number of local health departments that conduct a chronic disease education campaign.	25 local health departments had promulgated a chronic disease prevention education/social marketing campaign, as of FY05.	30 local health departments by FY07

Objective: Improve health outcomes and quality of life by addressing risk factors and/or disease management practices contributing to chronic disease morbidity and mortality in Virginia.

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Percentage of adult population diagnosed with diabetes who have had a pneumonia vaccine.	2000-2002: 50%	By 2007: 52%
Percentage of adult population 18 years and over reporting current smoking.	2002: 24.6%	By 2007: 22%
Percentage of adult population 18 years and over who are obese.	2002: 23.7%	By 2007: 22%
Rate of deaths per 100,000 with a primary cause of coronary heart disease.	2002: 144.3 deaths per 100,000	By 2007: 140.0 deaths per 100,000
Percent of population participating in cancer early detection through sigmoidoscopy or colonoscopy.	2001: 42.8%	By 2007: 56%

Local Laboratory and Pharmacy Services

Laboratory and pharmacy services are essential to enable local health departments to diagnose and effectively treat communicable diseases, monitor other reportable conditions, as well as to diagnose and treat chronic diseases, and to respond to public health emergencies. The capacity and complexity of both of these support services varies based on the volume and complexity of laboratory tests and prescriptions and also resources available to local health departments. All local health departments maintain core competencies in inventory and proper storage of drugs and biologicals; ordering, and dispensing pharmaceuticals; provision of immunizations; specimen collection of human fluids or tissue: milk and food sampling; animal head collection for rabies testing; water sample collection; and processing and transporting of specimens for testing by private sector laboratories. These competencies are available in every locality to support prevention, diagnosis, and treatment of reportable diseases; assurance of prenatal and post partum care; wellness in infants and children; performance of environmental health assessments, assuring safe food and drinking water, and disposal of human waste.

All laboratory activities are performed in accordance with the Local Health Department's Clinical Laboratory Improvement Amendments (CLIA) certificate and all pharmacy activities comply with the Virginia Board of Pharmacy regulations and VDH policies and procedures. The local health director is responsible for assuring their lab and pharmacy services comply.

Local Laboratory Services

The vast majority of local health departments (97 of 119 LHDs) do only simple tests such as urinalysis and blood hemoglobin in support of services such as well-child examinations and basic communicable disease testing. These types of routine tests are best provided on-site in the interest of timely care for the clients. Additional lab testing not performed by these LHDs are purchased from private sector labs under state contract.

Those local health departments with moderate and high complexity labs (22 of 119) perform more extensive testing in support of clinical programs such as Sexually Transmitted Disease (STD) diagnosis and prenatal care. Such labs tend to be located in local health departments who have historically had large clinical programs such as primary care for adults.

More specialized testing, such as identification of uncommon pathogens in outbreaks, testing of animals for rabies, the newborn screening program and testing of specimens for tuberculosis are conducted at the Division of Consolidated Laboratories in Richmond. As a highly specialized laboratory, DCLS does not conduct the simple, routine tests that can be done by LHDs or contract laboratories. The testing done in LHDs and by DCLS complement one another and are not duplicative. In addition, the LHDs are reimbursed by Medicaid based on VDH's status as a provider of clinical services. DCLS is not eligible to bill Medicaid.

All public and private sector laboratories are regulated through the Clinical Laboratory Improvement Amendments (CLIA) of 1988 administered by the federal Centers for Medicare and Medicaid Services (CMS). Laboratories subject to CLIA regulation are those designated as moderate or high complexity based on the types of tests that are performed. The inspection of these labs is carried out by the Office of Quality Health Care and Consumer Services under contract to CMS. As of 2003 (most recent data) the 97 LHDs that perform few lab tests of low complexity are not subject to CLIA and are considered 'waived' labs.

Local Pharmacy Services

All 119 local health departments can provide some minimal level of prescription drug dispensing, such as contraceptives and STD treatment, under protocols established by local health directors and the VDH Central Pharmacy located in Richmond. Each local health department is also capable of dispensing and administering vaccines and medications in the event of an emergency as declared by the Governor.

Seven local health departments operate full service pharmacies that comply with all Board of Pharmacy Regulations. These LHDs employ pharmacists who fill prescriptions for clients who seek health care services in the health department clinics. These pharmacies do not provide services to the community at large, but only to patients who receive services from local health departments.

As a government agency, VDH purchases prescription drugs through federal contracts and multi-state purchasing compacts at prices that are substantially lower than average wholesale prices. As a condition of this preferential pricing, public health facilities are prohibited from competing against public retail entities for non-public health treatments under the federal Robinson-Patman Act. Subject to available staff, LHDs assist indigent patients to gain access to free medications available through patient assistance programs operated by pharmaceutical companies.

LHDs that have full-service pharmacies are those that have historically have operated large primary care clinics for indigent adults or who provide specialized services to such populations as children with special health care needs and newcomers to this country who are at risk for communicable diseases such as tuberculosis. As with laboratory services, such LHDs must have the resources available to support such an operation. Inspections of these pharmacies are conducted by the Board of Pharmacy.

For the majority of LHDs that do not operate pharmacies in the LHD, the prescription needs of their patients are met through the VDH Central Pharmacy. These services include: treatment or support for sexually transmitted and communicable diseases, prenatal services, family planning, provision of vaccines to all local health departments under the Virginia Vaccines for Children Program, provision of pharmaceuticals to HIV infected patients under the AIDS Drug Assistance Program; provision of pharmaceuticals in support of the Children Specialty Services Program; provision of pharmaceuticals in support of the Hemophilia Program; provision of vaccines to local health departments that do not have a pharmacy to support immunization for foreign travel; provision of pharmaceuticals in response to natural emergencies, national emergencies, and bioterrorism related events; and provision of guidance and information to local health departments on State and Federal laws that pertain to the storage, distribution, and dispensing of medications.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$9,372,251	\$9,372,251	123.00	123.00
Transfer centrally funded amounts to agency budgets	\$487,098	\$487,098	0.00	0.00
Recognize Richmond city health department as a state operated health district	\$413,199	\$413,199	6.00	6.00
Total for Service Area	\$10,272,548	\$10,272,548	129.00	129.00

Objective: Assure access to quality and cost effective pharmaceutical services in support of public health

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Average administrative cost per prescription	New measure; baseline data not available. Baseline to be established by December	At least ten percent below private sector administrative cost by FY07.

2005

Local Nutrition Services

The purpose of the service area is to assure healthy diets for mothers during pregnancy and breast-feeding and for their children ages 0 to five who might otherwise not be able to afford to eat properly. The service is offered for families with income under 185% of the federal poverty level.

Virginia's Special Supplemental Nutrition Program for Women, Infants and Children (WIC) operates pursuant to US Department of Agriculture regulations in response to increasing scientific evidence that children's ability to learn and excel in school is directly related to the quality of nutrition received during the critical period of prenatal and early childhood brain development. WIC differs from the Food Stamp program by covering only these high risk population groups, providing only specified high nutrition food items and requiring nutritional assessment and education for the participants.

The provision of vouchers to purchase a package of specifically prescribed high nutrient foods at local groceries is coupled with education for the mothers and/or primary care-givers about healthy eating. Increasing attention is being paid to educating families about ways to avoid the risks of childhood obesity while assuring proper nutrition. Breastfeeding is promoted while regular and specially prescribed formulas are provided for infants who are not breastfed. Offering the services of this program though local health departments allows linkage and referrals to be made assuring that the low-income recipients obtain primary health care services and specific preventive services such as childhood immunizations and lead-screening.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$15,763,186	\$15,763,186	206.00	206.00
Transfer centrally funded amounts to agency budgets	\$527,667	\$527,667	0.00	0.00
Recognize Richmond city health department as a state operated health district	\$0	\$0	12.00	12.00
Increase position level to maintain local public health services in Suffolk	\$0	\$0	5.00	5.00
Total for Service Area	\$16,290,853	\$16,290,853	223.00	223.00

Objective: Provide low-income families with knowledge and resources to support healthy diets during pregnancy, breastfeeding and early childhood.

Percentage of potentially-eligible pregnant women enrolled in the WIC program

September 2004: Pregnant Women - 69%

FY07: Pregnant Women - 85%

Payments to Human Services Organizations

This service area provides payments of funds appropriated to VDH by the General Assembly for specifically identified grants to independent health care and non-state organizations. The service area's role is similar to that of a fiscal agent as its primary function is to serve as the conduit for distribution of such payments to the specified grant funded organizations and entities.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$9,657,796	\$9,657,796	0.00	0.00
Remove one-time spending amounts from agency budget	(\$445,000)	(\$445,000)	0.00	0.00
Fund St. Mary's Health Wagon	\$100,000	\$100,000	0.00	0.00
Increase Comprehensive Health Investment Program (CHIP) of Virginia funding	\$396,000	\$396,000	0.00	0.00
Encourage the adoption of Electronic Health Records (EHR) in the Commonwealth	\$3,776,620	\$3,276,620	0.00	0.00
Increase funding for the Virginia Health Care Foundation	\$250,000	\$250,000	0.00	0.00
Total for Service Area	\$13,735,416	\$13,235,416	0.00	0.00

Objective: Identify each organization and entity that is to receive appropriations, ensure the timely processing of payments to each and maintain payment history to meet auditing and reporting requirements.

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Percent of payments processed and documented to each entity as appropriated each fiscal year.	100% of Payments to Non-State Entities in FY05.	Maintain 100% compliance with required payments and documentation.

Drinking Water Regulation

This service area implements the federal Safe Drinking Water Act, Virginia's Public Water Supply Law and Virginia's Waterworks Regulations to protect public health by regulating Virginia's public waterworks. VDH is designated as the "primacy" agency with primary enforcement responsibility for implementing and enforcing the federal drinking water standards in Virginia.

Products and services include:

- · Inspections and investigations of waterworks,
- Evaluations of engineering reports, plans and specifications,
- Training for waterworks owners and operators,
- Technical assistance to waterworks owners and operators,
- Establishment and implementation of a drinking water quality monitoring program,
- Emergency assistance provided to waterworks owners and operators (droughts, floods, etc.),
- Database development and maintenance to include an inventory of all of Virginia's public waterworks and compliance information on those waterworks,
- Enforcement/compliance actions to ensure compliance with regulations, and
- Serve as a resource to other state and federal agencies.

This service area is administered by the VDH Office of Drinking Water (ODW).

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$7,868,187	\$7,868,187	104.00	104.00
Transfer centrally funded amounts to agency budgets	\$549,051	\$549,051	0.00	0.00
Total for Service Area	\$8,417,238	\$8,417,238	104.00	104.00

Objective: Conduct routine inspections of waterworks

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Number of routine waterworks inspections conducted in accordance with ODW schedule	During FY04, ODW conducted 1,772 routine waterworks inspections.	Conduct 1,801 routine waterworks inspections during FY06.

Drinking Water Construction Financing

This service area implements the federal Drinking Water State Revolving Fund Program (DWSRF) and the Virginia Water Supply Assistance Grant Program (WSAG). The purpose of this service area is to help public waterworks make infrastructure improvements necessary to ensure continued provision of safe drinking water and to help protect public health.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$24,881,311	\$24,881,311	7.00	7.00
Transfer centrally funded amounts to agency budgets	\$51,803	\$51,803	0.00	0.00
Fund drinking water construction projects	\$5,000,000	\$5,000,000	0.00	0.00
Total for Service Area	\$29,933,114	\$29,933,114	7.00	7.00

Objective: Increase Virginia's citizens access to safe and affordable drinking water

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Number of citizens provided an adequate quality and quantity of drinking water as a result of loans and/or grants from the DWSRF and WSAG programs	76,494 people (July 1, 2004)	96,394 people, cumulative to baseline, by June 30, 2006

Public Health Toxicology

This service area implements the Virginia Toxic Substances Information Act by assessing, advising, and communicating health hazards of chemical and certain biological agents which pose a threat to human health and the environment. Products and services include:

- Advise the Governor, General Assembly, other state agencies, and local governing bodies on matters pertaining to chemical exposures posing a threat to public health or the environment;
- Evaluate information regarding toxicity of chemicals and certain biological agents and determine the risk to human health and the environment;
- Disseminate information concerning toxic substances to other state agencies, political subdivisions of the Commonwealth, health professionals, the media, and the public by communicating the risk of chemical exposure through documents, technical reports, information sheets, advisories, health alerts, and press releases;
- Investigate potential human health effects associated with exposure to chemical and biological agents in the environment.
- Conduct surveillance of diseases related to chemical exposure;
- Develop health risk assessments for specific chemical exposures via air, water, and food; and
- Make recommendations to prevent exposure of citizens to chemical substances including fish consumption advisories.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$450,230	\$450,230	6.00	6.00
Transfer centrally funded amounts to agency budgets	\$22,108	\$22,108	0.00	0.00
Total for Service Area	\$472,338	\$472,338	6.00	6.00

Objective: Assess health hazards of chemical and certain biological agents which pose a threat to human health and the environment; provide information and recommendations as appropriate to abate of reduce potential health effects.

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Timeliness of response to requests for public health assessments of exposure to chemicals and biological agents.	During FY05 the number of public health assessments and responses to citizens, government agencies, and healthcare professionals averaged about 100 per month. The turnaround time for each request was approximately 48 hours.	Respond to a minimum of 95% of public health assessment requests within 48 hours during FY06.

State Office of Environmental Health Services

This area provides leadership by directing the operation of the environmental health programs (for example, food and shellfish safety, tourism safety, lead poisoning investigation, safe drinking water from private wells, and safe wastewater treatment and disposal), developing policy, analyzing local, state and federal legislation, evaluating public health programs, providing liaison assistance, and providing scientific and technical expertise.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$3,142,460	\$3,142,460	24.00	24.00
Transfer centrally funded amounts to agency budgets	\$128,451	\$128,451	0.00	0.00
Reflect administrative nongeneral fund increases in agency budget	\$320,000	\$320,000	0.00	0.00
Total for Service Area	\$3,590,911	\$3,590,911	24.00	24.00

Objective: Prevent or mitigate food safety hazards through continued surveillance of restaurants and providing guidance and enforcement of regulations

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Frequency of restaurant inspections	In FY04, 65% of all scheduled restaurant inspections, in accordance with VDH policy which establishes an inspection frequency based on the restaurant's risk classification, were conducted within 30 days of the scheduled date	Conduct 70% of all scheduled restaurant inspections within 30 days of scheduled date during FY06.

Shellfish Sanitation

This service area implements the National Shellfish Sanitation Program. Services include:

- Classification of shellfish growing areas throughout Tidewater Virginia,
- Inspection and certification of shellfish and crab meat facilities, and
- Customer service to concerned citizenry about shellfish growing areas and to production facility owners about processing techniques.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$1,877,858	\$1,877,858	31.00	31.00
Transfer centrally funded amounts to agency budgets	\$137,203	\$137,203	0.00	0.00
Total for Service Area	\$2,015,061	\$2,015,061	31.00	31.00

Objective: Advance the elimination of shellfish-borne disease

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Annual number of confirmed outbreaks of shellfish-borne disease due to contamination of shellfish in Virginia.	Zero outbreaks due to shellfish contaminated in Virginia during FY05 and during the preceding 40 years.	Maintain zero outbreaks in FY06.

Bedding and Upholstery Inspection

This service area implements the Regulations for Bedding and Upholstered Furniture Inspection Program. The purpose of this service area is to protect Virginia consumers from diseases and insect pests spread through contaminated bedding and upholstered furniture.

Products and services include:

- Issuing permits to bedding and upholstered manufacturers, re-upholsterers, bedding renovators, sanitizers, importers, distributors and supply dealers.
- Customer service to citizens making complaints regarding any of the regulated entities.
- Inspection of bedding and upholstered furniture manufacturers, bedding renovators and re-upholsterers and sanitizers.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$232,534	\$232,534	2.00	2.00
Transfer centrally funded amounts to agency budgets	\$11,809	\$11,809	0.00	0.00
Total for Service Area	\$244.343	\$244.343	2.00	2.00

Objective: Achieve licensure of all bedding and upholstered furniture manufacturers, mattress renovators, furniture reupholsterers, supply dealers, importers, and sanitizers in the Commonwealth

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
 Number of Licenses and Permits Issued	4,237 licenses and permits issued during FY04	4,448 permits issued during FY06 (5 percent annual growth)

Radiological Health and Safety Regulation

This service area implements and enforces radiation protection regulations and provides public education. Regulation of ionizing radiation sources assures that the public is protected from unnecessary and excessive radiation exposure. Products and services include:

- Radioactive material licensure for naturally occurring or accelerator produced isotopes, inspection of licensees and enforcement of regulations;
- X-ray machine registration, inspection and certification and enforcement of regulations;
- Educational and technical assistance relating to indoor radon, and enforcement of regulations;
- Training and response for radiological emergencies;
- Environmental monitoring in the vicinity of nuclear facilities; and
- Issuance of U.S. Department of Transportation exemptions for radioactive contaminated shipments of scrap metal and refuse.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$1,140,405	\$1,140,405	13.00	13.00
Transfer centrally funded amounts to agency budgets	\$96,187	\$96,187	0.00	0.00
Total for Service Area	\$1,236,592	\$1,236,592	13.00	13.00

Objective: Protect the public and occupational radiation workers by maintaining effective control over licensed radioactive materials to ensure their safe handling and disposal.

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)	
Facility violation incident rate.	There were six violations for 56 licensee inspections performed during FY04 for an incident rate of 11%.	Violation rate of no more than 11% annually in FY06.	
Objective: Protect the public and o producing machines.	ccupational workers against unnecessary	radiation exposure from X-ray	
Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)	
Machine violation incident rate.	There were 179 violations reported in the 8,371 inspections that were performed in FY04 for a violation machine incident rate of 21.4 per 1,000	Annual violation-machine incident rate of no more than 21.4 per 1,000 during FY06.	

Objective: Protect public health and safety by responding to radiological emergencies, developing emergency preparedness plans, providing training, and participating in nuclear power plant exercises.

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Areas requiring corrective action as identified by Federal Emergency Management Agency (FEMA) exercise evaluation.	The FEMA exercise evaluation assigned three Areas Requiring Corrective Action (ARCAs) for 2004; all three were resolved.	Correct all ARCAs by demonstrating proper procedures and corrections during the next FEMA evaluated exercise. The exact date of the exercise is not known at this time.

Emergency Preparedness and Response

The purpose of the Emergency Preparedness and Response (EPR) programs is to upgrade and integrate state, regional territorial and local public health jurisdictions' preparedness to respond to terrorism and other public health emergencies with Federal, State, local and tribal governments, and government agencies, the private sector, and Non-Governmental Organizations (NGOs). In addition, EPR programs support the ability of hospitals and health care systems to prepare for and respond to bioterrorism and other public health and healthcare emergencies. Emergency preparedness and response efforts are intended to support the National Response Plan and the National Incident Management System. In addition, the activities performed by the service area are designed to develop emergency-ready public health departments, hospitals and health care systems in accord with the Interim National Preparedness Goals, the Interim Public Health and Healthcare Supplement to the NPG, and the Centers for Disease Control and Prevention Preparedness Goals.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$33,074,934	\$33,074,934	123.00	123.00
Transfer centrally funded amounts to agency budgets	\$807,119	\$807,119	0.00	0.00
Total for Service Area	\$33,882,053	\$33.882.053	123.00	123.00

Objective: Produce timely, accurate, and actionable health intelligence or information in support of prevention, awareness, deterrence, response and continuity planning operations.

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Percent of key stakeholders who are notified/alerted of public health emergencies or significant events through the public health emergency communications system	65% confirmed response rate during last test of October 2004.	90% of key stakeholders confirm receipt emergency messages within 120 minutes of dissemination by August 2006

Administrative and Support Services

This service area provides overall agency leadership and direction from the Commissioner's and Deputy Commissioners' Offices. The service area also directs and manages the agency's audit, in-house information technology, administration, financial, human resource and procurement systems to meet the business needs of the department; provides leadership in policy development, business process improvements, and standards of business practice; assures compliance with agency and external mandates; provides direction in quality improvement and practice audit.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$13,649,548	\$13,649,548	110.00	110.00
Transfer centrally funded amounts to agency budgets	\$601,117	\$601,117	0.00	0.00
Adjust funding for agency expenditures related to cost of basic operations	\$498,176	\$525,093	0.00	0.00
Total for Service Area	\$14,748,841	\$14,775,758	110.00	110.00

Objective: Attract and retain well qualified workers to provide the highest level of service delivery to the Commonwealth.

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Length of time to fill positions.	70% of salaried positions were filled within 90 days of being placed into RECRUIT during FY05.	75% of salaried positions are filled within 90 days of being placed into RECRUIT during FY06.

Objective: Develop a sound financial plan in accordance with Appropriation Act requirements, guidance from the Governor's Office, the Department of Planning and Budget (DPB), and current analysis of agency nongeneral fund revenue sources.

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Accuracy and effectiveness of the financial plan	During FY05, met requirements of the Appropriation Act; Governor's Office and DPB guidance incorporated in budget; appropriate action taken based on actual revenue and expenditure data; expenditures did not exceed agency appropriation authority.	During FY06, meet all legal and policy requirements; routinely take appropriate action based on actual revenue and expenditure data; no expenditures in excess of agency appropriation authority.

Objective: Comply with all state laws/regulations; ensure agency internal control framework and procedures safeguard against the loss or inefficient use of VDH assets; record financial transactions properly in the Commonwealth's Accounting and Control System.

 Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Number of Compliance Monitoring Exceptions per expended dollar.	Compliance error rate for FY04 was .011 per \$1 million spent.	Cumulative compliance error rate (Compliance Monitoring Exceptions) for FY05 equal to or less than .023 per \$1 million dollars spent.

Department of Health Professions

Mission Statement

To enhance the delivery of safe and competent health care by licensing qualified health care professionals, enforcing standards of practice, and providing information to both practitioners and consumers of health care services.

Agency Goals:

- Authorize individuals and entities who meet standards of competence to deliver health care services to the citizens of the Commonwealth.
- Take action where there is evidence of practitioner conduct which constitutes a violation of law and regulation.
- Provide information to consumers of healthcare services, applicants and licensees regarding requirements, standards, and availability of qualified practitioners resulting in access to safe delivery of health care services.
- Promote the quality of nursing programs in Virginia by providing funding for nursing scholarships.

Customers Served:

- Applicants for licensure, certification, registration, or permitting
- Licensees required to abide by laws or rules governing their practice

Customers Served:

- Consumers of health care services
- Recipients of scholarships
- Parties seeking practitioner information

Agency Budget Summary

	General Fund	Nongeneral Fund	TOTAL	Personnel Costs	Other Costs	Positions
OPERATING BUDGET I						
FY 2003	\$0	\$16,112,469	\$16,112,469	\$8,963,081	\$7,149,388	133.00
FY 2004	\$0	\$16,609,415	\$16,609,415	\$9,664,252	\$6,945,163	144.00
FY 2005	\$0	\$19,323,170	\$19,323,170	\$12,143,426	\$7,179,744	173.00
FY 2006	\$0	\$19,881,977	\$19,881,977	\$12,650,883	\$7,231,094	173.00
NEW OPERATING BUD	GET SUMMARY	<u>:</u>				
FY 2007 Base Budget	\$0	\$19,881,977	\$19,881,977	\$12,259,985	\$7,621,992	173.00
FY 2007 Addenda	\$0	\$2,998,960	\$2,998,960	\$2,079,888	\$919,072	26.00
FY 2007 TOTAL	\$0	\$22,880,937	\$22,880,937	\$14,339,873	\$8,541,064	199.00
FY 2008 Base Budget	\$0	\$19,881,977	\$19,881,977	\$12,259,985	\$7,621,992	173.00
FY 2008 Addenda	\$0	\$2,984,941	\$2,984,941	\$2,227,303	\$757,638	27.00
FY 2008 TOTAL	\$0	\$22,866,918	\$22,866,918	\$14,487,288	\$8,379,630	200.00

Agency Summary of Recommended Operating Budget Addenda

▶ Transfer centrally funded amounts to agency budgets

Adjusts the agency budget to reflect amounts moved from Central Appropriations to cover the cost of items such as the continuation of 2005 and 2006 salary and health insurance premium increases, and changes in retirement and disability contribution rates. For each year, \$846,049 (NGF).

▶ Investigate and adjudicate allegations of misconduct by health care practitioners

Provides appropriation for investigative and adjudication costs associated with a rising number of allegations of misconduct by health care practitioners. The increase is largely due to recent legislation that expanded the number of mandatory misconduct reporters. In addition, funding will allow the agency to address a backlog of cases. For 2007, \$1.6 million (NGF) and 14 positions. For 2008, \$1.5 million (NGF).

► Ensure efficient licensing of health care practitioners

Provides appropriation for licensing and support positions, an anticipated rent increase and costs associated with accepting electronic payments. For 2007, \$340,292 (NGF) and nine positions. For 2008, \$361,676 (NGF).

► Staff the Board of Long-Term Care Administrators

Provides appropriation for the initial staffing and costs associated with regulating long-term care administrators as required by legislation passed by the 2005 General Assembly. For 2007, \$201,823 (NGF) and three positions. For 2008, \$191,823 (NGF).

► Regulate medication aides

Provides appropriation to support the regulation of medication aides. Legislation passed by the 2005 General Assembly requires the Board of Nursing to license all persons who wish to be employed as medication aides. For 2008, \$115,946 (NGF) and one additional position.

► Account for increased general fund support of physician scholarships

Phases out a transfer from the Board of Medicine to the Virginia Department of Health (VDH) that funds physician scholarships. The transfer is reduced by half for 2007 and is completely eliminated in 2008. A companion action in VDH replaces the revenue lost to the scholarship program with general fund. This action is contained in budget bill language.

Agency Service Areas:

Scholarships

In 1991, the General Assembly created the Nursing Scholarship and Loan Repayment Fund. Funding for the scholarship fund is provided through a \$1.00 surcharge assessed on the renewal of licenses for registered and licensed practical nurses. The purpose of the fund is to finance scholarships for part-time and full-time students enrolled in or accepted for enrollment by licensed practical or registered nursing programs and those registered nurses, licensed practical nurses, and certified nurse aides who agree to perform a period of nursing service in a Virginia long-term care facility. The program is administered jointly by the Department of Health Professions (DHP) and the Virginia Department of Health (VDH).

DHP collects the money and deposits it into the Scholarship Fund. The Department of Health determines the recipients and sends the names to DHP. DHP, in turn, distributes the awards according to the list provided by VDH. Any balances left in the fund at year-end automatically carry forward to the next fiscal year. For FY 2003-04, revenue amounted to \$56,387 and expenditures totaled \$59,975.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$65,000	\$65,000	0.00	0.00
Total for Service Area	\$65,000	\$65,000	0.00	0.00

Objective: Collect money from license renewals as required by state law and make requisite payments to schools on behalf of recipients as identified by the Department of Health.

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)	
Scholarship payments	Yearly total for FY 2004-05 is 110.	Process payments for 100% of individuals identified by the Department of Health and verified by the Board of Nursing.	

Technical Assistance to Regulatory Boards

Virginia's 13 health regulatory boards are responsible for licensing and disciplining health practitioners, and promulgating the regulations that govern health professionals. Some boards have additional responsibilities. For example, the Board of Nursing accredits nursing programs. The Department of Health Professions' (DHP) employees support the boards in their activities, but it is the members of these boards who have the ultimate authority to make decisions involving case decisions and to promulgate regulations.

The Governor appoints all board members, most of whom are health professionals licensed by the boards to which they are appointed. All boards have some number of citizen members – at least one and as many as four, depending on the size of the board. Board members serve four-year terms and cannot serve more than two successive full terms.

Licensure or certification in each profession typically requires the completion of a board-approved professional education program and the passage of an approved examination in the applicant's chosen professional field. During the 2002-04 biennium, the 13 health regulatory boards regulated more than 265,000 health professionals, facilities, and other designated entities. This represents a 2% increase over the prior biennia and a 39% increase over the last ten years.

A vital part of the boards' licensing responsibilities is the investigation and adjudication of complaints and allegations of misconduct against licensees. During the 2002-04 biennium, the boards handled approximately 8,600 disciplinary cases.

The investigation and preparation of disciplinary cases presented to the boards is handled by DHP staff. Prosecution of cases in formal hearings is the responsibility of the Attorney General's Office. All disciplinary cases are decided in accordance with the state's Administrative Process Act.

The health regulatory boards are also responsible for promulgating the regulations governing the professionals under their respective purview. These regulations establish initial licensure requirements, set fee rates and renewal requirements, and establish standards for practice.

The Board of Health Professions (BHP) was created in 1977 to assist the health regulatory boards coordinate the development of guidelines governing health care professionals in Virginia. BHP is also responsible for reviewing the agency's budget and advising the DHP director, General Assembly, and the governor on matters related to the regulation of health care professions. The Board of Health Professions is comprised of 18 members, one from each of the 13 health regulatory boards, and five citizens (consumers), all appointed by the Governor.

The primary activities included in this service area are:

- •Licensing applicants who meet defined standards as determined by law and regulation.
- •Issuing licenses or permits to specified health related businesses that are in compliance with applicable laws and regulations, and inspecting to verify continued compliance.
- •Ensuring occupational competency by monitoring and enforcing continuing education or experience requirements, as required by law and/or regulation.
- •Enforcing compliance with legal policies and assuring professional accountability through diligent investigation of complaints, application of established standards, and objective disciplinary decisions while ensuring the fair and equitable treatment of health professionals.
- •Conducting facility inspections to assure the safety and integrity of drugs and medical devices, and to prevent pharmaceutical drug diversion.
- •Studying, evaluating and recommending the appropriate type and degree of regulation, based on verifiable research outcomes, for health professions and occupations.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$19,816,977	\$19,816,977	173.00	173.00
Transfer centrally funded amounts to agency budgets	\$846,049	\$846,049	0.00	0.00
Investigate and adjudicate allegations of misconduct by health care practitioners	\$1,610,796	\$1,469,447	14.00	14.00
Ensure efficient licensing of health care practitioners	\$340,292	\$361,676	9.00	9.00
Staff the Board of Long-Term Care Administrators	\$201,823	\$191,823	3.00	3.00
Regulate medication aides	\$0	\$115,946	0.00	1.00
Total for Service Area	\$22,815,937	\$22,801,918	199.00	200.00

Objective: To promptly process applications for initial licensure and, where necessary, conduct examinations and deny eligibility for all individuals and entities who seek to provide services.

	Measure Baseline(s)	Measure Targets(s)
Applications processed for health regulatory boards.	Having removed the anomaly resulting from the newly regulated occupation of Pharmacy Technicians applications, the two-year quarterly rolling average is, as of the end of FY 2004-05, 4,941.	Maintain, on a quarterly basis, the two-year rolling average.
Rate of positive responses from individuals surveyed about their experience in application process.	The two-year rolling average for the period ending March 31, 2005, is 94.5%.	Maintain a two-year quarterly rolling average of not less than 93%
Objective: To periodically renew the li the Commonwealth.	censes for individual and entities who	wish to remain eligible to practice in
Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Rate of licenses renewed.	The yearly renewal rate as of the end of FY 2004-05 is 83.35%	Maintain a renewal rate average of not less than 80%.
Rate of licenses renewed online.	Last reported quarter, ending March 31, 2005, is 70%	Increase
Objective: To detect, receive, evaluate	and investigate allegations of miscon	duct.
Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Allegations detected, investigated and reported to health regulatory boards.	The three-year rolling average, measured quarterly, is 1,154.	Increase
Rate of compliance with agency standards for case resolution.	The quarterly average for FY 2004-05 is 56.70%	Increase
	appropriate findings and conclusions a	
governing their practice.	0.0	
	Measure Baseline(s)	Measure Targets(s)
governing their practice.		Measure Targets(s) Increase
governing their practice. Key Performance Measure(s) Number of cases in which a written agreement or order is entered imposing a	Measure Baseline(s) For FY 2004-05, the number of cases was 1,326, and for the 4th quarter of FY '05 it	
governing their practice. Key Performance Measure(s) Number of cases in which a written agreement or order is entered imposing a finding. Rate of compliance with agency standards for case resolution in which a proceeding is required to resolve a case.	Measure Baseline(s) For FY 2004-05, the number of cases was 1,326, and for the 4th quarter of FY '05 it was 322. Quarterly average for the most recent four	Increase
governing their practice. Key Performance Measure(s) Number of cases in which a written agreement or order is entered imposing a finding. Rate of compliance with agency standards for case resolution in which a proceeding is required to resolve a case. Objective: To provide information to proceeding to the standard of the standar	Measure Baseline(s) For FY 2004-05, the number of cases was 1,326, and for the 4th quarter of FY '05 it was 322. Quarterly average for the most recent four quarters ending June 30, 2005, is 43.34%	Increase
governing their practice. Key Performance Measure(s) Number of cases in which a written agreement or order is entered imposing a finding. Rate of compliance with agency standards for case resolution in which a proceeding is required to resolve a case. Objective: To provide information to providers.	Measure Baseline(s) For FY 2004-05, the number of cases was 1,326, and for the 4th quarter of FY '05 it was 322. Quarterly average for the most recent four quarters ending June 30, 2005, is 43.34% practitioners, clients and patients to pr	Increase Increase omote access to and compliance by
Governing their practice. Key Performance Measure(s) Number of cases in which a written agreement or order is entered imposing a finding. Rate of compliance with agency standards for case resolution in which a proceeding is required to resolve a case. Objective: To provide information to providers. Key Performance Measure(s) Visits to DHP web sites Objective: To ensure that resources a	Measure Baseline(s) For FY 2004-05, the number of cases was 1,326, and for the 4th quarter of FY '05 it was 322. Quarterly average for the most recent four quarters ending June 30, 2005, is 43.34% practitioners, clients and patients to proceed the most recent four quarters and patients to proceed the most recent four quarters and patients.	Increase Increase omote access to and compliance by Measure Targets(s) Increase the four-quarter rolling average
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Department Of Medical Assistance Services

Mission Statement

To provide access to a comprehensive system of high quality and cost effective health care services to qualifying Virginians.

Agency Goals:

- Facilitate the development of public health care policies that promote access to care and the efficient, effective, innovative delivery
 of covered services.
- Promote better health outcomes through prevention-based strategies and improved quality of care.
- Enhance the delivery of health care services by improving communication and relationships with customers and partners.
- Create a positive work environment that promotes staff development and training, facilitates effective communications and rewards high levels of performance.
- Maintain a system of internal controls that adequately protects resources from fraud, waste and abuse.
- Improve operational efficiency and enhance data management through innovation and utilization of industry best practices.

Customers Served:

- Low-income, Aged, or Disabled Virginians
- Medicaid (adults) and FAMIS Plus (children)
- FAMIS
- Medicaid Expansion Program
- State/Local Hospitalization Program
- Involuntary Mental Commitment Fund
- Regular Assisted Living Program
- HIV Premium Assistance Program
- Uninsured Medical Catastrophe Fund

Agency Budget Summary

	General Fund	Nongeneral Fund	TOTAL	Personnel Costs	Other Costs	Positions
OPERATING BUDGE	T HISTORY:					
FY 2003	\$1,787,976,288	\$1,931,921,181	\$3,719,897,469	\$20,398,932	\$3,699,498,537	323.00
FY 2004	\$1,877,700,241	\$2,152,580,457	\$4,030,280,698	\$19,876,895	\$4,010,403,803	323.00
FY 2005	\$1,947,986,146	\$2,615,488,502	\$4,563,474,648	\$22,265,507	\$4,541,209,141	325.00
FY 2006	\$2,152,985,491	\$2,853,046,659	\$5,006,032,150	\$22,313,263	\$4,983,718,887	331.00
NEW OPERATING BU	JDGET SUMMAI	RY:				
FY 2007 Base Budget	\$2,152,985,491	\$2,853,046,659	\$5,006,032,150	\$23,523,527	\$4,982,508,623	331.00
FY 2007 Addenda	\$217,290,325	\$52,262,146	\$269,552,471	\$1,873,004	\$267,679,467	11.00
FY 2007 TOTAL	\$2,370,275,816	\$2,905,308,805	\$5,275,584,621	\$25,396,531	\$5,250,188,090	342.00
FY 2008 Base Budget	\$2,152,985,491	\$2,853,046,659	\$5,006,032,150	\$23,523,527	\$4,982,508,623	331.00
FY 2008 Addenda	\$385,696,163	\$235,189,423	\$620,885,586	\$1,891,614	\$618,993,972	11.00
FY 2008 TOTAL	\$2,538,681,654	\$3,088,236,082	\$5,626,917,736	\$25,415,141	\$5,601,502,595	342.00

Agency Summary of Recommended Operating Budget Addenda

▶ Transfer centrally funded amounts to agency budgets

Adjusts the agency budget to reflect amounts moved from Central Appropriations to cover the cost of items such as the continuation of 2005 and 2006 salary and health insurance premium increases, and changes in retirement and disability contribution rates. For each year, \$797,307 (GF) and \$871,007 (NGF).

▶ Remove one-time spending amounts from agency budget

Removes funding from the agency's base budget for one-time spending. For each year, a reduction of \$3.6 million (GF).

▶ Adjust federal appropriation to reflect federal match rate

Reduces the federal appropriation for Medicaid payments to the Department of Mental Health, Mental Retardation and Substance Abuse Services. The appropriation should equal the state funding amount and this amendment corrects the federal amount to match. For each year, a reduction of \$6.6 million (NGF).

▶ Fund the impact of the new Medicare prescription drug program

Provides funding for the new Medicare prescription drug program that begins January 1, 2006. The federal government requires the state share of prescription drug costs formerly paid through Medicaid be paid to the federal government. The payment exceeds Virginia's previous cost because the formula used is based on 2003 information and does not reflect cost containment measures implemented in Virginia since that time. Additional funding is also needed for the increased Medicaid costs due to the expected increase in eligible people due to outreach efforts of the new Medicare drug program. For 2007, an increase of \$37.9 million (GF) and a decrease of \$177.6 million (NGF). For 2008, an increase of \$42.3 million (GF) and a decrease of \$183.7 million (NGF).

▶ Adjust funding for agency expenditures related to cost of basic operations

Adjusts funding for changes in operating costs related to central agency services and various charges. These include procurement fees, property insurance premiums, and workers compensation insurance premiums. It also includes adjustments for changes in project management and security provided by the Virginia Information Technologies Agency and the transformation to service-based billing for technology services other than hardware and software. For 2007, \$30,127 (GF). For 2008, \$31,741 (GF).

► Fund Medicaid utilization and inflation

Adds funds for increased use of Medicaid services and anticipated increases in the costs of those services. Medicaid costs continue to be affected by moderate growth in the number of indigent children and families enrolled in the program. In addition, increases in the rates paid to health maintenance organizations, increased indigent care costs, and increasing Medicare premiums for people that are dual eligible for Medicaid have increased program costs. This funding also reflects the offset from increased revenues of the Virginia Health Care Fund, which is used to fund the state match for federal Medicaid funds. For 2007, \$164.6 million (GF) and \$212.6 million (NGF). For 2008, \$319.0 million (GF) and \$389.1 million (NGF).

► Fund Family Access to Medical Insurance Security plan utilization and inflation

Adds funds based on increased program enrollment due to continued outreach efforts. The funds ensure that qualified children of low-income working families will receive quality health care. For 2007, \$246,869 (GF) and \$360,280 (NGF). For 2008, \$3.3 million (GF) and \$6.1 million (NGF).

▶ Fund medical assistance services for low-income children utilization and inflation

Adds funds for the Commonwealth's Medicaid Children's Health Insurance Program. Program enrollment is expected to continue increasing at a moderate rate. This program applies to children over the age of six who fall within the income limit of 100 percent to 133 percent of the Federal Poverty Level and allows children in one family to receive the same health care coverage. For 2007, \$2.8 million (GF) and \$3.8 million (NGF). For 2008, \$5.3 million (GF) and \$8.3 million (NGF).

► Outsource compliance audits for various services

Captures savings from contracting out for compliance audits of home infusion services, home health, durable medical equipment and pharmacy services. Currently, the Department of Medical Assistance Services has a limited audit program for these services, which have a high vulnerability to fraud and abuse. For 2007, a decrease of \$350,000 (GF) and \$350,000 (NGF). For 2008, a decrease of \$728,000 (GF) and \$728,000 (NGF).

► Fund the development of a specialty drug program

Captures savings from creating a specialty drug program. Specialty drugs are injectables that people use at home. A specialty pharmacy assures patient compliance and provides clinical support. Savings, which offset the costs, are generated from discounted drug prices. For 2007, a decrease of \$593,040 (GF), \$593,040 (NGF), and an increase of one position. For 2008, a decrease of \$770,111 (GF) and \$770,111 (NGF).

▶ Fund the administrative costs for the National Provider Identifier Initiative

Provides funds for the costs required to update information technology systems for the National Provider Identifier. The funding will primarily be used for contractor costs to update systems and for one position to coordinate the agency's efforts. Starting in May of 2007, all required health plans and medical providers must use a federal standard identifier for all electronic transactions. This funding is necessary to meet the federal mandate. For 2007, \$497,293 (GF), \$3.6 million (NGF), and one position. For 2008, \$207,368 (GF) and \$1.0 million (NGF).

► Outsource payroll processing for Consumer Directed Personal Attendant Services

Provides funds to contract with a fiscal agent to provide payroll processing services for personal attendants that provide long-term care services at the direction of the consumer. Consumer direction is a trend toward allowing those in need of long-term care services to choose the person that provides the service to them. With growth in the program, the agency can no longer handle the payroll processing internally. This funding will allow the agency to pay for the contract that is planned to be awarded in December 2005. For 2007, \$1.8 million (GF) and \$1.8 million (NGF). For 2008, \$2.0 million (GF) and \$2.0 million (NGF).

► Fund rate increase for physician services

Provides funding for a three percent rate increase for physician services on July 1, 2007, except obstetrical/gynecological services, which received a rate increase of 34 percent in September 2004. Physician services will receive a five percent increase on May 1, 2006; otherwise they have not received an increase since 1991. For 2008, \$6.9 million (GF) and \$7.3 million (NGF).

▶ Eliminate the urgent care waiting list for the Mental Retardation waiver for children under age six

Adds funds for an additional 110 slots for the Mental Retardation waiver to eliminate the urgent care waiting list for children under six years of age. Children under the age of six will receive waiver services even without a diagnosis of mental retardation. These children will automatically be transferred to the Developmental Disabilities waiver at the age of seven. For 2007, \$2.5 million (GF), \$2.5 million (NGF), and one position. For 2008, \$2.9 million (GF) and \$2.9 million (NGF).

► Implement a Medicaid Buy-In program

Requires the agency to resubmit a waiver application to establish a Medicaid Buy-In program, which is designed to enable individuals with disabilities to return to or stay in the work force while receiving Medicaid benefits. The first submission to the federal government in 2003 was never approved. The Department of Medical Assistance Services will resubmit a waiver that is more likely to be approved. This action is contained in budget bill language.

▶ Increase the personal maintenance allowance for all waiver services

Adds funds to increase the personal maintenance allowance for long-term care waiver services, excluding the AIDS waiver, from 100 to 150 percent of Supplemental Security Income (SSI). The personal maintenance allowance is what income that an individual can keep for living expenses, while any income over 100 percent of SSI (\$579 a month) is what the person pays as part of the cost of their health care. Increasing the allowance to 150 percent will allow individuals to keep more of their income for living expenses (up to \$868), thus reducing the risk of the person being placed in a nursing home. For 2007, \$1.0 million (GF) and \$1.0 million (NGF).

► Change reimbursement methodology for school-based services

Provides authority to implement a cost-based reimbursement for school divisions. The federal government requires the change. Local school divisions must now submit cost reports to receive any federal reimbursements for school-based health care services. This action is contained in budget bill language.

▶ Implement an obesity pilot project for children

Provides funding to create a pilot project as part of the disease state management program to deal with the issue of children's obesity. The pilot would serve a portion of Southwest Virginia. Its purpose is to coordinate efforts to improve nutritional education and to teach the benefits of exercise to children considered obese with the intent of improving their health outcomes and reducing the incidence of chronic diseases that are caused by obesity. The agency is authorized to accept private funding for this project. For each year, \$202,100 (GF) and \$179,900 (NGF).

▶ Provide funding to increase reimbursement rates for adult day care services

Provides funds for a five percent increase for adult day care services on January 1, 2007. Adult day care centers are an alternative to nursing home care. The rate increase is necessary to assist adult day care centers better compete for certified nurse aides. For 2007, \$48,476 (GF) and \$48,476 (NGF). For 2008, \$91,197 (GF) and \$91,197 (NGF).

▶ Increase adjustment factor for hospital inpatient reimbursement

Provides additional funds to increase the hospital adjustment factor from 76 percent to 78 percent for private hospitals. The additional funding will allow hospitals to be reimbursed for a higher portion of the costs of treating a Medicaid patient. For 2007, \$7.5 million (GF) and \$7.5 million (NGF).

► Increase payments to nursing facilities

Adds funds to increase the direct and indirect cost ceilings for nursing homes. Increasing the ceilings allows nursing facilities to claim more of their costs for reimbursement under Medicaid. This action will allow nursing homes to provide better services to the clients they serve. For 2007, \$3.9 million (GF) and \$3.9 million (NGF). For 2008, \$4.0 million (NGF).

▶ Fund the associated Medicaid costs of expanded breast and cervical cancer screening

Provides funds for the treatment costs related to expanding access to screening for breast and cervical cancer to low-income women at local departments of health. The Virginia Department of Health plans to expand cancer screening under the Virginia Breast and Cervical Cancer Early Detection Program. Federal requirements mandate that any women diagnosed with cancer as a result of the screening are eligible and enrolled in Medicaid. For each year, \$695,417 (GF) and \$2.0 million (NGF).

► Adjust Medicaid reimbursement to mental retardation training centers

Reduces Medicaid reimbursement for services provided at Southeastern and Central Virginia training centers, operated by the Department of Mental Health, Mental Retardation and Substance Abuse Services. As a result of efficiencies created by proposed facility replacements and a reduction in the projected census, Medicaid expenditures at the training centers will decrease in both years. For 2007, a decrease of \$2.8 million (GF) and \$2.8 million (NGF). For 2008, a decrease of \$6.4 million (GF) and \$6.4 million (NGF).

► Increase position level

Increases the position level of the agency by eight. The additional positions will ensure the agency is compliant with federal mandates, help to manage new programs or recent program expansions, and handle the increasing workload of the agency. The additional positions will have no budget impact since the agency will be able to eliminate some part-time and contract positions. For 2007, eight positions.

► Revise rate setting methodology for skilled nursing facilities

Provides authority to remove the limits on nursing home administrator salaries, medical director fees and management fees. The limits are no longer necessary considering that nursing home indirect costs are capped. The authority will also increase the indirect cost ceiling from 103.9 to 106.13 percent. These changes are budget neutral since they will be implemented as part of the allocation of a \$3.00 per day rate increase that nursing facilities received on July 1, 2005. This action is contained in budget bill language.

► Improve the cost reporting process for nursing facilities

Provides for the agency to work with nursing home provider associations to develop a revised cost-reporting methodology to improve the timeliness of the current process. This action is contained in budget bill language.

▶ Designate funding for the Uninsured Medical Catastrophe Fund

Designates \$250,000 in funding from the Medicaid budget for the Uninsured Medical Catastrophe Fund. The fund was created as a mechanism for treating the uninsured who are faced with a life-threatening illness, but have no way to pay for treatment. This action is contained in budget bill language.

Agency Service Areas:

Reimbursements for Medical Services Related to Involuntary Mental Commitments

An Involuntary Mental Commitment, also known as a Temporary Detention Order (TDO), is the detainment of an individual who i) has been determined to be mentally ill and in need of hospitalization, ii) presents an imminent danger to self or others as result of the mental illness or is so seriously mentally ill as to be substantially unable to care for self, and iii) is incapable of volunteering or unwilling to volunteer for treatment. A magistrate issues the TDO. The duration of the order shall not exceed 48 hours prior to a commitment hearing. If the 48-hour period terminates on a Saturday, Sunday or legal holiday, such person may be detained until the next business day.

DMAS determines the allowable eligibility period for the client who is under an involuntary mental commitment and enrolls the client in the involuntary mental commitment program. DMAS ensures that all other available payment resources have been exhausted prior to payment by this program, which is funded only through state funds. Once this is completed, DMAS processes and adjudicates claims for the allowable services provided to clients under an involuntary mental commitment.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$11,180,391	\$11,180,391	0.00	0.00
Total for Service Area	\$11.180.391	\$11.180.391	0.00	0.00

Objective: Ensure that providers that are treating TDO clients continue to be compensated for the allowable services they provide and ensure that these services are within the timeframe of the commitment order

Key Performance Measure(s)

Measure Baseline(s)

Measure Targets(s)

Percentage of reimbursement payments processed within DMAS time standard (see Target) 1.2 Percentage of reimbursement payments that were accurate 1.3 Percentage of services that were provided within the timeframe of the commitment order

To be determined from reports gathered October 1 through December 31, 2005 For FY 2007, 90% of all clean claims will be adjudicated within 30 calendar days of receipt at DMAS.

<u>Reimbursements for Medical Services Provided Under the Family Access to Medical Insurance Security Plan</u>

The Family Access to Medical Insurance Security (FAMIS) program is part of Virginia's Title XXI program for uninsured children and pregnant women living below 200% and 150% of the federal poverty level (FPL) respectively. The FAMIS program provides access to comprehensive health care services for qualifying children through a benefit plan modeled on the state-employee health plan in areas where a contracted managed care organization is available; and through a Medicaid look-alike benefit plan in fee-for-service areas. FAMIS requires family cost sharing through co-payments for services and provides a premium assistance option for private/employer-sponsored insurance.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$85,649,076	\$85,649,076	0.00	0.00
Transfer funding for dental program to administrative budget	(\$408,220)	(\$417,114)	0.00	0.00
Fund Family Access to Medical Insurance Security plan utilization and inflation	\$607,149	\$9,439,972	0.00	0.00
Fund rate increase for physician services	\$0	\$1,222,199	0.00	0.00
Total for Service Area	\$85,848,005	\$95,894,133	0.00	0.00

Objective: Enroll all eligible children in the FAMIS program

nce Measure(s)

Measure Baseline(s)

Measure Targets(s)

The percentage of eligible children enrolled in FAMIS or FAMIS Plus

As of July 1, 2005, approximately 416,548 or 96% of estimated eligible children are enrolled in either FAMIS or FAMIS Plus. Updated calculation input will likely revise this baseline estimate downwards.

The enrollment target for the FAMIS program will remain at 95% or better for FY 2006. This target has been set in anticipation of revisions to the eligible population's estimated size.

Objective: Increase utilization of appropriate preventive care by FAMIS enrolled children

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Childhood immunization rate	Childhood immunizations (full immunization series at 24 months) for FY 2004 = 84% compliance	Childhood immunizations (full immunization series at 24 months) for FY 2006 = 86%
Well-child visit rate	Well-child visits for FY 2004 = 57% of 15- month-old children received the recommended number of visits and 54% of 3 to 6 year old children received the recommended number of visits	Well-child visits – Compliance with recommended number of visits for 15-month-old children in CY 2008 = 70%; compliance with recommended number of visits for 3 to 6 year old children in CY 2008 = 70%
Routine dental care utilization percentage	Routine dental care – FFY 2003, approximately 466,705 Medicaid enrollees over the age of three and under the age of 21 were eligible for services and the % of Medicaid/FAMIS children receiving care was approximately 25%.	Routine dental care – Utilization percentage at or beyond 40% for FY 2007

Reimbursements to State-Owned Mental Health and Mental Retardation Facilities

The service area reimburses facilities owned and operated by the Department of Mental Health and Mental Retardation and Substance Abuse Services (DMHMRSAS) for medically necessary services provided to Medicaid eligible recipients residing in these facilities.

The DMHMRSAS operates 15 state mental health or mental retardation facilities, that provide highly structured intensive inpatient treatment and habilitation services. The state mental health facilities provide a range of psychiatric, psychological, psychosocial rehabilitation, nursing, support, and ancillary services. The mental retardation training centers provide residential care and training in areas such as language, self-care, independent living, socialization, academic skills, and motor development. The Hiram Davis Medical Center provides medical care to state facility patients and residents.

DMAS works in partnership with the DMHMRSAS to ensure that services are medically necessary, provided in the most appropriate setting and that the reimbursement rates are sufficient to help maintain the financial viability of these state owned facilities.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$222,620,347	\$222,620,347	0.00	0.00
Adjust federal appropriation to reflect federal match rate	(\$6,636,955)	(\$6,636,955)	0.00	0.00
Adjust Medicaid reimbursement to mental retardation training centers	(\$5,570,662)	(\$12,854,412)	0.00	0.00
Total for Service Area	\$210,412,730	\$203,128,980	0.00	0.00

Objective: To ensure an appropriate level of care is provided to Medicaid eligible individuals in the DMHMRSAS facilities

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Percentage of payments to DMHMRSAS facilities that were made for individuals who have been screened and pre-approved for services	To be determined	100% of claims are paid for individuals who have been appropriately authorized for services

Reimbursements for Mental Health and Mental Retardation Services

This service area reimburses providers, both public and private, for the treatment of mental illness, including long-term serious mental illness and short-term acute problems and for mental retardation case management services. Other mental retardation based services are provided in the long term care service area. Medicaid covers outpatient services, inpatient services under certain circumstances, and community-based mental health rehabilitative services to individuals who meet specified criteria for each service.

DMAS, in partnership with the DMHMRSAS, the Community Services Boards and community providers and advocates, continues to work to ensure access to needed MHMR services in the most appropriate setting.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$493,282,622	\$493,282,622	0.00	0.00
Adjust funding to match new service area structure	(\$272,714,943)	(\$272,714,943)	0.00	0.00
Fund Medicaid utilization and inflation	\$88,399,548	\$109,478,790	0.00	0.00
Total for Service Area	\$308,967,227	\$330,046,469	0.00	0.00

Objective: Increase access to outpatient and community-based mental health services

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Outpatient/inpatient utilization ratio	In FY 2003, the ratio of individuals utilizing outpatient and community-based mental health services compared to inpatient utilization was 77.22 to 1.	For FY 2007, increase the ratio from "77.22 to 1" to "90 to 1."

Reimbursements for Professional and Institutional Medical Services

This service area represents the largest single component of the Department's programs and activities, the Title XIX Medicaid program. The primary functions that the department performs in this area are: i) working with local departments of social services to enroll persons into the appropriate categories of eligibility; ii) providing support services to enrollees; iii) developing and maintaining provider networks and ensuring access to needed health services; iv) reimbursing providers for necessary and appropriate health care services; iv) ensuring the program operates efficiently; and v) developing new program features to improve the quality of care and control costs.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$3,926,175,793	\$3,926,175,793	0.00	0.00
Remove one-time spending amounts from agency budget	(\$3,347,287)	(\$3,347,287)	0.00	0.00
Adjust funding to match new service area structure	(\$888,446,181)	(\$888,446,181)	0.00	0.00
Transfer funding for dental program to administrative budget	(\$4,020,064)	(\$4,140,009)	0.00	0.00
Fund the impact of the new Medicare prescription drug program	(\$139,812,825)	(\$141,471,040)	0.00	0.00
Fund Medicaid utilization and inflation	\$244,871,740	\$499,849,819	0.00	0.00
Outsource compliance audits for various services	(\$1,400,000)	(\$2,184,000)	0.00	0.00
Fund the development of a specialty drug program	(\$1,701,346)	(\$2,079,422)	0.00	0.00
Fund rate increase for physician services	\$0	\$12,778,223	0.00	0.00
Implement an obesity pilot project for children	\$382,000	\$382,000	0.00	0.00
Increase adjustment factor for hospital inpatient reimbursement	\$15,079,016	\$16,772,252	0.00	0.00
Fund the associated Medicaid costs of expanded breast and cervical cancer screening	\$2,682,323	\$2,682,323	0.00	0.00
Total for Service Area	\$3,150,463,169	\$3,416,972,471	0.00	0.00

Objective: Facilitate access to member healthcare services

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Number (percent) of eligible persons who are enrolled	To be determined	To be determined

Objective: Improve the quality, coordination of care and associated health outcomes to Medicaid/FAMIS participants diagnosed with asthma, diabetes, congestive heart failure and coronary artery disease

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
HEDIS measures	To be determined	To be determined

Objective: Increase access to and utilization of high quality dental care services

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Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)	
Percentage of Medicaid children receiving dental services	For FFY 2003 approximately 466,705 Medicaid enrollees over the age of three and under the age of 21 years were eligible for dental services and the percentage of Medicaid children receiving dental care was approximately 25%.	40% for FY 2007	

Objective: Ensure access to prenatal care for pregnant Medicaid recipients

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Number of pregnant women receiving prenatal visits by the second trimester	77% for CY 2004	81% by FY 2008

Objective: Increase the percentage of Medicaid children who are fully immunized by age two

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Number of two year olds fully immunized	89% as of FY 2004	90% by FY 2008

Reimbursements for Long-Term Care Services

This service area provides access to a system of high-quality long-term care services to the elderly and persons with disabilities to ensure health, safety, and well being.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$99,216,160	\$99,216,160	0.00	0.00
Adjust funding to match new service area structure	\$1,161,161,124	\$1,161,161,124	0.00	0.00
Fund Medicaid utilization and inflation	\$43,919,736	\$98,763,734	0.00	0.00
Eliminate the urgent care waiting list for the Mental Retardation waiver for children under age six	\$4,876,190	\$5,690,928	0.00	0.00
Increase the personal maintenance allowance for all waiver services	\$2,085,846	\$2,190,134	0.00	0.00
Provide funding to increase reimbursement rates for adult day care services	\$96,952	\$182,394	0.00	0.00
Increase payments to nursing facilities	\$7,808,300	\$8,073,782	0.00	0.00
Total for Service Area	\$1,319,164,308	\$1,375,278,256	0.00	0.00

Objective: Decrease the number of persons entering institutional care through the use of home and community-based waiver services

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)	
Number of persons entering long-term care as a percentage of persons screened for that care	FY 2005 – Approximately 62%	FY 2007 - 52%	

<u>Reimbursements to Acute Care Hospitals Providing Charity Care in Excess of the Median Level of Charity Care Costs</u>

The purpose of the Indigent Health Care Trust Fund is to equalize the burden of charity care among non-state-owned hospitals, and to reimburse those among these hospitals with high charity care for part of this cost. Note: VCU and UVA hospitals are not included in the trust fund as they are state-affiliated facilities.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$9,285,831	\$9,285,831	0.00	0.00
Total for Service Area	\$9,285,831	\$9,285,831	0.00	0.00

Objective: Fund a portion of the charity care provided by Virginia hospitals

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Dollars paid to hospitals	\$9,285,831	\$9,285,831

Regular Assisted Living Reimbursements for Residents of Adult Homes

This service pays for 30 minutes of personal care (at \$3/day per eligible recipient), for eligible people who receive an Auxiliary Grant. This is a State-only program. The Auxiliary Grant is the state supplement to Supplemental Security Income (SSI), which is paid to eligible individuals who reside in assisted living facilities.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$1,612,952	\$1,612,952	0.00	0.00
Total for Service Area	\$1.612.952	\$1.612.952	0.00	0.00

Objective: Improve the efficiency of the operation of the regular assisted living (RAL) program

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
The number of claims that are paid within established time frames through VaMMIS claims processing	99% (2005)	100% paid timely by July 1, 2006

<u>Reimbursements to Localities for Residents Covered by the State and Local Hospitalization</u> <u>Program</u>

This service area provides coverage for inpatient and outpatient hospitalization, ambulatory surgical centers and local health department clinic visits to eligible, indigent Virginians who are not eligible for Medicaid. A person may be eligible for the State and Local Hospitalization (SLH) Program whether employed or unemployed, insured or uninsured, if the person meets the income and resource criteria established for the program. SLH is not an entitlement program. Once a locality's funds are exhausted, no further benefits are offered until the next year's allocation is received.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$13,665,779	\$13,665,779	0.00	0.00
Total for Service Area	\$13,665,779	\$13,665,779	0.00	0.00

Objective: Ensure transactions are processed in an accurate and timely manner

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Percent of claims paid within 30 calendar days of the budget being loaded to the Medicaid Management Information System (VaMMIS) and within 30 days or receipt after budget is loaded to MMIS	To be determined	100% of claims are paid on time within 30 days of receipt.

Insurance Premium Payments for HIV-Positive Individuals

This service area ensures that HIV clients are able to maintain their medication protocol. The program provides reimbursement for health insurance premium payments to ensure that those approved individuals are able to maintain and utilize their private health insurance.

In order to qualify an individual must be 1) a resident of Virginia, 2) able to provide documentation from a physician verifying disability within three months due to HIV+ diagnosis, and 3) eligible for and have availability of continuing health insurance. DMAS determines eligibility for the program and assumes the responsibility of providing health insurance premium payment in a timely manner

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$556,702	\$556,702	0.00	0.00
Total for Service Area	\$556,702	\$556,702	0.00	0.00

Objective: Maximize the potential of the program to cover as many eligible individuals as possible within available funding

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Percent of available funds expended	For Fiscal year 2005 approximately 99.1% of the annual appropriation was expended	For FY 2007, spend 99% or greater of the annual appropriation

Reimbursements for Medical Services Provided to Low-Income Children

The expansion of Medicaid eligibility for uninsured children from age 6 to 19 is part of Virginia's Title XXI program for uninsured children living below 200% of the federal poverty level (FPL). Prior to this expansion, children under age 6 could qualify for Medicaid benefits with family income up to 133% FPL but children from 6 to 19 would only qualify for Medicaid with income less than or equal to 100% FPL. Children from 6 to 19 with income between 100% FPL and 133% FPL might qualify for the FAMIS program instead; but this meant children in the same family would be enrolled in different programs and families would have to navigate two different systems of care. In September 2002, Virginia's Title XXI program was split into FAMIS for children 0 – 19 with income greater than Medicaid but less than or equal to 200% FPL; and the SCHIP Medicaid Expansion for children age 6 – 19 with income greater than 100% FPL but less than or equal to 133% FPL. Children covered by the SCHIP Medicaid Expansion receive full Medicaid benefits but are funded through Title XXI at a lower state-matching rate Than Title XIX (Medicaid).

In 2004, The Virginia General Assembly renamed Medicaid for children, including the SCHIP Medicaid Expansion program, to FAMIS Plus.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$60,387,939	\$60,387,939	0.00	0.00
Transfer funding for dental program to administrative budget	(\$319,258)	(\$338,846)	0.00	0.00
Fund medical assistance services for low-income children utilization and inflation	\$6,605,718	\$13,569,647	0.00	0.00
Fund rate increase for physician services	\$0	\$247,724	0.00	0.00
Total for Service Area	\$66,674,399	\$73.866.464	0.00	0.00

Objective: Enroll all eligible children in the SCHIP Medicaid Expansion program

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)		
The percentage of eligible children enrolled in SCHIP Medicaid Expansion or FAMIS	As of July 1, 2005, 96% of estimated eligible children are enrolled in either FAMIS or FAMIS Plus.	The enrollment target for the SCHIP Medicaid Expansion program will remain at 95% or better for FY 2006.		
Objective: Increase utilization of appropriate preventive care by children enrolled in the SCHIP Medicaid Expansion				
Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)		
Routine pediatric dental care	In FFY 2003 approximately 466,705 Medicaid enrollees over the age of three and under the age of 21 years were eligible for dental services and the percentage of Medicaid children receiving dental care was approximately 25%.	Utilization percentage at or beyond 40% for FY 2007		
EPSDT well-child screenings	EPSDT well-child screenings Well-child screenings in FFY 2004 = Overall compliance rate for all eligible children on Medicaid was 56%. (47% for 6 – 9; 43% for 10 – 14; and 45% for 15 – 18).	EPSDT well-child screenings – Well-child screenings for FFY 2008 = 80% overall compliance		

Administrative and Support Services

This service area includes the manpower, overall administrative support, policy and research and contractual services necessary to successfully operate the Agency's programs and activities.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$82,398,558	\$82,398,558	331.00	331.00
Transfer centrally funded amounts to agency budgets	\$1,668,314	\$1,668,314	0.00	0.00
Remove one-time spending amounts from agency budget	(\$225,000)	(\$225,000)	0.00	0.00
Transfer funding for dental program to administrative budget	\$4,747,542	\$4,895,969	0.00	0.00
Fund the impact of the new Medicare prescription drug program	\$60,000	\$60,000	0.00	0.00
Adjust funding for agency expenditures related to cost of basic operations	\$30,127	\$31,741	0.00	0.00
Outsource compliance audits for various services	\$700,000	\$728,000	0.00	0.00
Fund the development of a specialty drug program	\$515,266	\$539,200	1.00	1.00
Fund the administrative costs for the National Provider Identifier Initiative	\$4,128,213	\$1,218,026	1.00	1.00
Outsource payroll processing for Consumer Directed Personal Attendant Services	\$3,668,800	\$4,049,800	0.00	0.00
Eliminate the urgent care waiting list for the Mental Retardation waiver for children under age six	\$61,308	\$64,700	1.00	1.00
Increase position level	\$0	\$0	8.00	8.00
Total for Service Area	\$97,753,128	\$95,429,308	342.00	342.00

Objective: Improve communication among employees throughout the agency

Key i	Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
The degree to which employees feel communications are effective (as measured by a survey)		To be determined by employee survey in December 2005	To be determined
Objective:	Recruit, develop and retain	a skilled, diverse and adequately sized, p	rofessional workforce
Key I	Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
	Turnella va a di vina av can mada	44 F0/ f FV 0F	0.00/ f EV 0.7
	Employee turnover rate	11.5% for FY 05	8.0% for FY 07
Objective:		assets of the agency, ensuring that incider	
Objective:	Safeguard and protect the		

Objective: To ensure that resources are used efficiently and programs are managed effectively, and in a manner consistent with applicable state and federal requirements

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)	
Percent of Governor's Management scorecard categories marked as meets expectations for the agency	80%	100%	

<u>Department Of Mental Health, Mental Retardation and Substance</u> Abuse Services

Mission Statement

The Department of Mental Health, Mental Retardation, and Substance Abuse Services (the Department) provides leadership and service to improve Virginia's system of quality treatment, habilitation, and prevention services for individuals and their families whose lives are affected by mental illness, mental retardation, or substance use disorders (alcohol or other drug dependence or abuse). The Department seeks to promote dignity, choice, recovery, and the highest possible level of participation in work, relationships, and all aspects of community life for these individuals.

Agency Goals:

- Fully implement self-determination, empowerment, recovery, resilience, and person-centered core values at all levels of the system through policy and practices that reflect the unique circumstances of individuals receiving MH, MR, or SA services.
- Expand and sustain services capacity necessary to provide services when and where they are needed, in appropriate amounts, and for appropriate durations.
- Align administrative and funding incentives and organizational processes to support and sustain quality consumer-focused care, promote innovation, and assure efficiency and cost-effectiveness.
- Assure that services system infrastructure and technology efficiently and appropriately meet the needs of individuals receiving
 publicly funded MH, MR, and SA services and supports.
- Obtain sufficient numbers of professional, direct care, administrative, and support staff with appropriate skills and expertise to deliver quality care.
- Enhance service quality, appropriateness, effectiveness, and accountability through performance and outcomes measurement and service delivery and utilization review.

Customers Served:

- Individuals with or at risk of serious mental illnesses or serious emotional disturbances served by or seeking services from CSBs
- Individuals with mental retardation served by or seeking services from CSBs
- Individuals with substance use disorders served by or seeking services from CSBs
- Consumers and family members receiving services from consumer-run programs, consumer and family education programs, or family-run support and education programs
- Individuals served by the CSBs with mental retardation who are not eligible for MR Waiver or Part C early intervention services
- Individuals with mental retardation who need dental and other therapeutic services not currently available
- Infants and toddlers and their families served in Part C early intervention services
- Individuals served by nursing homes with mental retardation who are recipients of OBRA services
- Individuals with mental retardation in community programs who need guardians
- Children with mental retardation who need family support services
- Participants in community prevention programs and coalitions
- Department of Corrections inmates meeting criteria as sexually violent predators (SVP) and eligible at release for SVP civil commitment
- Individuals meeting SVP criteria and civilly committed to the Virginia Center for Behavioral Rehabilitation (VCBR)
- Individuals meeting SVP criteria and conditionally released for SVP treatment
- Juveniles requiring restoration to competency treatment services
- Individuals with active criminal justice system involvement who require secure forensic services
- Individuals served in state training centers
- Training center residents receiving vocational/educational services
- Adults served in state hospitals
- Children and adolescents served in state hospitals
- Senior adults (65 and older) receiving services in state hospitals
- Patients on the Central Virginia Training Center medical/surgical unit

Customers Served:

- Patients on state hospital medical/surgical units
- Patients at Hiram Davis Medical Center
- State facility patients and residents receiving inpatient medical services in local hospitals through special hospitalization
- Individuals discharged from state hospitals and those diverted from state hospitalization to local acute care served by the Aftercare Pharmacy
- Individuals served by the Aftercare Pharmacy who are on community intake status
- Individuals served by the Aftercare Pharmacy who have Medicaid drug coverage
- Community services boards and behavioral health authority (CSBs)
- State hospitals and training centers
- State facility employees
- Licensed providers of MH, MR, and SA services and developmental disability waiver services (including CSBs, other public, and private providers)
- Citizens who make complaints about licensed providers that result in investigations
- Nursing homes
- Virginia criminal courts, including Juvenile and Domestic Relations Courts
- Local and regional jails
- Governor (Office of the Inspector General Reports)
- Members of the General Assembly (Office of the Inspector General Reports)
- Members, State Mental Health, Mental Retardation and Substance Abuse Services Board
- Members of committees and councils established or required by state or federal statutes or regulations staffed and supported by Department central office staff

Agency Budget Summary

	General Fund	Nongeneral Fund	TOTAL	Personnel Costs	Other Costs	Positions
OPERATING BUDGET	HISTORY:					
FY 2003	\$412,419,069	\$332,561,197	\$744,980,266	\$407,419,033	\$337,561,233	9,954.00
FY 2004	\$407,529,047	\$320,604,141	\$728,133,188	\$398,385,669	\$329,747,519	9,867.75
FY 2005	\$450,326,350	\$336,394,278	\$786,720,628	\$420,638,715	\$366,081,913	9,943.00
FY 2006	\$439,250,639	\$336,394,278	\$775,644,917	\$416,501,662	\$359,143,255	9,884.00
NEW OPERATING BU	DGET SUMMAR	Y:				
FY 2007 Base Budget	\$439,250,639	\$336,394,278	\$775,644,917	\$426,993,774	\$348,651,143	9,884.00
FY 2007 Addenda	\$101,252,492	\$16,535,799	\$117,788,291	\$26,696,993	\$91,091,298	5.00
FY 2007 TOTAL	\$540,503,131	\$352,930,077	\$893,433,208	\$453,690,767	\$439,742,441	9,889.00
FY 2008 Base Budget	\$439,250,639	\$336,394,278	\$775,644,917	\$426,993,774	\$348,651,143	9,884.00
FY 2008 Addenda	\$110,378,662	\$14,559,154	\$124,937,816	\$17,629,114	\$107,308,702	-184.00
FY 2008 TOTAL	\$549,629,301	\$350,953,432	\$900,582,733	\$444,622,888	\$455,959,845	9,700.00
CAPITAL OUTLAY BU	CAPITAL OUTLAY BUDGET SUMMARY:					
FY 2007 Capital	\$4,750,000	\$0	\$4,750,000	\$0	\$4,750,000	0.00
FY 2008 Capital	\$4,750,000	\$0	\$4,750,000	\$0	\$4,750,000	0.00

Agency Summary of Recommended Operating Budget Addenda

► Transfer centrally funded amounts to agency budgets

Adjusts the agency budget to reflect amounts moved from Central Appropriations to cover the cost of items such as the continuation of 2005 and 2006 salary and health insurance premium increases, and changes in retirement and disability contribution rates. For each year, \$38.9 million (GF) and \$11.1 million (NGF).

► Remove one-time funding for Inspector General

Adjusts the agency budget to remove one-time administrative funding added in 2005 for the Office of the Inspector General. For each year, a reduction of \$130,624 (GF).

► Remove one-time funding

Removes funding added in the 2005 session. For each year, a reduction of \$75,000 (GF).

▶ Transfer funds for community mental health services for non-mandated children and adolescents

Transfers funds used to provide services to at-risk children and adolescents from the agency's administrative office to the community services program. As services are provided through local Community Services Boards, this transfer will shift funding to the appropriate agency code. (Net zero adjustment)

► Adjust nongeneral fund appropriation to reflect federal grant awards

Reduces the nongeneral fund appropriation to reflect anticipated federal grant awards. The Department does not expect to receive the same level of federal grants as in previous years. For each year, a reduction of \$3.5 million (NGF).

► Adjust funding for agency expenditures related to cost of basic operations

Adjusts funding for changes in operating costs related to central agency services and various charges. These include rental charges at the seat of government, procurement fees, property insurance premiums, and workers compensation insurance premiums. It also includes adjustments for changes in project management and security provided by the Virginia Information Technologies Agency and the transformation to service-based billing for technology services other than hardware and software. For 2007, \$868,742 (GF). For 2008, \$1.3 million (GF).

► Add licensing staff

Adds three inspector positions to the Office of Licensing to meet statutory licensing requirements for providers of mental health, mental retardation, substance abuse, developmental disability, and brain injury services. In the last five years, the number of licensed providers has increased by 65 percent, while the number of inspectors has increased by only 25 percent. This funding will ensure providers are inspected and licensed as required by the Code of Virginia. For 2007, \$213,904 (GF), \$34,224 (NGF), and three positions. For 2008, \$213,904 (GF) and \$34,224 (NGF).

▶ Increase positions in architectural and engineering services

Adds three positions to the Office of Architecture and Engineering Services to assure critical projects are completed. The positions will have oversight responsibility for facility physical plant services, food service and dietary operations, and on-going capital and building permit projects. For 2007, \$285,541 (GF) and three positions. For 2008, \$285,541 (GF).

▶ Provide funding for the Community Integration Oversight Advisory Committee

Adds funding at the agency to ensure that adequate resources are available for Community Integration Oversight Advisory Committee salaries and related expenses. For each year, \$233,398 (GF).

► Implement a developmental career path for Direct Service Associates

Provides funds for the implementation of a career path for direct services associates at mental health treatment centers and mental retardation training centers to improve recruitment and retention efforts. Current rates of staff turnover are significantly higher than the state average and result in excessive overtime costs for the facilities. The program will provide training and salary increases to qualifying participants based on fulfillment of skill and competency requirements. For 2007, \$148,658 (GF). For 2008, \$811,861 (GF).

► Add funding for Celebrating Special Children

Provides funds to improve access to information on resources available for families of children with special needs in the Commonwealth. For 2007, \$100,000 (GF).

► Add funding for Greater Richmond Association for Retarded Citizens (ARC)

Provides funding for the Greater Richmond Association for Retarded Citizens to help fund their capital campaign. For 2007, \$750,000 (GF).

► Capital Outlay Lease for food service units at mental health and mental retardation facilities

Provides the lease payments for food service equipment for nine mental health and mental retardation facilities statewide. Current equipment has reached the end of its useful life and poses a health risk to facility residents. The funding level assumes the department uses the Master Equipment Leasing Program and pays the lease over a period of 10 years, beginning in July of 2006. For 2007, \$859,698 (GF). For 2008, \$1.7 million (GF).

▶ Transfer funds from Colonial Community Services Board pharmacy to Aftercare Pharmacy

Transfers funds for the Colonial pharmacy from Grants to Localities to the Aftercare Pharmacy. In 2005, the Colonial Community Services Board participated in a regional pharmacy pilot program and did not purchase drugs through the Aftercare Pharmacy. In 2006, Colonial began participating in the Aftercare Pharmacy. For each year, a reduction of \$90,265 (GF).

► Transfer funds between community mental health services to reflect actual expenditures

Transfers funding between three subprogram areas within the Community Service Boards to align appropriations with projected expenditures. The transfers are budget neutral with funding for mental health services decreasing and funding for mental retardation and substance abuse services increasing. (Net zero adjustment)

► Transfer funds for evaluation of "systems of care" pilot projects for children and adolescents

Transfers funds appropriated in 2005 for the evaluation of a pilot program to serve children to the agency's central administrative office. 2005 budget language permits this transfer. (Net zero adjustment)

► Adjust nongeneral fund appropriation to reflect federal grant awards

Reduces the nongeneral fund appropriation to reflect anticipated federal grants. A number of mental health grants previously received by the agency will be expiring during the biennium. For each year, a reduction of \$9.0 million (NGF).

► Increase funds for Early Intervention services for infants and toddlers

Provides increased funds for Early Intervention services for infants and toddlers identified through an annual child count. Participation in Part C, a federally subsidized program, requires that the state provide services to all eligible children. This funding would address the current waitlist and provide services to children projected to be eligible during the biennium. For each year, \$4.1 million (GF).

► Establish mental health community transformation initiative

Expands community-based services by providing targeted funding increases to Community Services Boards. A portion of the funds is directly related to the projected reduction in census at Eastern State Hospital in Williamsburg. Another portion of the funds will be used to reduce pressure for community placement in Health Planning Regions one and two. The remainder will be used for statewide discharge assistance plans, mental health services for children and adolescents, and community-based recovery support services. For 2007, \$18.4 million (GF). For 2008, \$20.5 million (GF).

► Establish mental retardation community transformation initiative

Provides additional funds for the Home and Community Based Mental Retardation Waiver Program by increasing the number of slots available for facility discharges and community diversion. A dedicated amount is set aside to transition current facility residents at Southeastern and Central Virginia Training Centers into community placements as the facilities are being replaced. An equal number of slots are dedicated for statewide diversion efforts. The funds will also be used to provide a ten percent rate increase to providers of congregate homes for waiver clients and a five percent increase for providers of other waiver services. Additional funding is included for start-up costs incurred by new waiver clients as well as an increase to guardianship services. For 2007, \$24.9 million (GF) and \$23.5 million (NGF). For 2008, \$30.7 million (GF) and \$28.8 million (NGF).

► Establish substance abuse services community transformation initiative

Builds on efforts in the 2005 budget to increase availability of crisis stabilization services. This funding will allow existing sites to expand their array of services and also provides for the creation of two additional crisis stabilization sites. Expansion of these services will aid in the diversion of individuals who would otherwise be placed in state facilities. For each year, \$6.3 million (GF).

► Transfer position to Virginia Information Technologies Agency

Transfers a position from Northern Virginia Mental Health Institute to the Virginia Information Technologies Agency. This position was inadvertently not transferred in the previous biennium. For 2007, a reduction of one position.

▶ Shift from nongeneral funds to general fund in mental health facilities to reflect actual collections

Adjusts the nongeneral and general fund appropriation at mental health facilities to reflect actual expenditures. The increase in general fund is offset by a decrease in general fund at the mental retardation training centers. The nongeneral fund appropriation is representative of Medicaid-reimbursed expenditures, which are lower than projected at the mental health facilities. For each year, an increase of \$3.4 million (GF) and a decrease of \$3.4 million (NGF).

► Address increasing costs in Aftercare Pharmacy

Adds funding to the Aftercare Pharmacy program for individuals receiving mental health services through local Community Services Boards. Necessary to offset rising drug costs, the additional funding will allow the program to continue to provide pharmacy services to all eligible individuals. For 2007, \$2.0 million (GF). For 2008, \$3.8 million (GF).

► Address increasing inpatient pharmacy costs

Adds funding to the inpatient pharmacy program at state mental health and mental retardation facilities. As drug costs increase, this adjustment is necessary to maintain pharmacy services for individuals served by these facilities. For 2007, \$4.2 million (GF). For 2008, \$5.0 million (GF).

► Reduce funds for operating costs at Eastern State and Western State Hospitals

Reduces funding at Eastern State Hospital and Western State Hospital. This reduction is due to the projected decrease in census at the two hospitals and the replacement of the facilities with buildings that are more efficient in design. The new facilities will allow for a more efficient staffing pattern. For 2007, a decrease of \$1.6 million (GF). For 2008, a decrease of \$4.0 million (GF) and a reduction of 55 positions.

- ➤ Provide increased funding to ensure proper billing for prescriptions purchased through Medicare Part D

 Adds funds for the Department to contract with nine pharmacy technicians and purchase related software and hardware expenses. The technicians will ensure proper billing for prescriptions purchased by state mental health and mental
- ▶ Shift from general fund to nongeneral funds in mental retardation training centers to reflect actual collections
 Adjusts the nongeneral and general fund appropriation at mental retardation training centers to reflect actual
 expenditures. The nongeneral fund appropriation is representative of Medicaid-reimbursed expenditures, which
 continue to increase at the training centers. The decrease in general fund is offset by an increase in general fund at the
 mental health facilities. For each year, a decrease of \$3.4 million (GF) and an increase of \$3.4 million (NGF).

retardation facilities through a Medicare Part D approved prescription drug plan. For each year, \$759,000 (GF).

▶ Adjust nongeneral fund appropriation and positions at Southeastern and Central Virginia Training Centers
Reduces the nongeneral fund appropriation and position levels at Southeastern and Central Virginia training centers in
accordance with operating efficiencies resulting from proposed facility replacements. A reduction in census and a more
efficient layout will allow the new facilities to operate with fewer staff. For 2007, a decrease of \$5.6 million (NGF). For
2008, a decrease of \$12.9 million (NGF) and a reduction of 134 positions.

Agency Summary of Recommended Capital Outlay Addenda

- ► Replace and repair roofs at mental health and mental retardation facilities
 - Provides funds to repair and replace roofs at facilities where there is a critical need. This funding will target buildings where active leaks have jeopardized the safety and quality of life for facility residents. For the biennium, \$4.7 million (GF).
- ▶ Replace and repair boilers and steamlines at Central State Hospital and Northern Virginia Training Center
 Provides capital funds for the replacement and repair of boilers and steamlines at Central State Hospital and Northern
 Virginia Training Center. The current systems are old and inefficient, with dilapidated pipelines and failing boilers.
 This funding will allow the agency to make the most critical repairs and will allow for more efficient boiler systems. For
 the biennium, \$4.8 million (GF).

Agency Service Areas:

Regulation of Health Care Service Providers

Regulation of Public Facilities and Services involves licensing of mental health, mental retardation, substance abuse services, developmental disability waiver services, and residential brain injury services through 15 licensing specialists, two regional managers, a director, and a management program technician. The Department licenses all new services, renews licenses, conducts annual unannounced inspections in all services, investigates all complaints, reviews reports of serious injuries and deaths, and initiates negative action, including sanctions and revocations, against providers. It ensures applicants who become licensed meet and maintain adherence to standards of health, safety, service provision, and consumer rights while they continue operating. This is accomplished by issuing licenses, conducting annual unannounced monitoring of providers and investigating complaints about providers. It also provides information to the public about licensed providers and enforces regulations which promote health and safety for both individuals using the services and the surrounding community and preparation by providers for emergencies and disasters.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$1,650,475	\$1,650,475	19.00	19.00
Transfer centrally funded amounts to agency budgets	\$51,000	\$51,000	0.00	0.00
Add licensing staff	\$248,128	\$248,128	3.00	3.00
Total for Service Area	\$1,949,603	\$1,949,603	22.00	22.00

Objective: Increase the number of licensing inspections in residential settings.

_	Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
_	Number of residential program inspections	FY 2004: 826 unannounced residential inspections	10 percent increase in the number of residential inspections by the end of FY 2008

Facility and Community Programs Inspection and Monitoring

The Office of the Inspector General for Mental Health, Mental Retardation & Substance Abuse Services (OIG) inspects, monitors, reviews, and makes recommendations to the Governor and General Assembly regarding the quality of services provided in facilities operated by the Department of Mental Health, Mental Retardation and Substance Abuse Services (the Department) and by providers as defined in 37.2-4-4 through 37.2-422 that are licensed by the Department. These include hospitals as defined in 32.1-123, community services boards and behavioral health authorities as defined in 37.2-100, and licensed private providers.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$629,648	\$629,648	4.00	4.00
Remove one-time funding for Inspector General	(\$130,624)	(\$130,624)	0.00	0.00
Total for Service Area	\$499,024	\$499,024	4.00	4.00

Objective: Assess the quality of services provided by state facilities and licensed providers and make recommendations for improvement.

	Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
	Percentage of state facilities at which inspections or reviews are conducted	FY 2005: 100 percent of state facilities inspected or reviewed	100 percent review rate annually through the end of FY 2008
•	Number of inspections/reviews conducted in the system of `licensed programs.	FY 2005: 0 inspections (with the exception of a pilot project)	2 inspections or reviews annually through FY 2008

Objective: Facilitate resolution of inquires and complaints received by the OIG regarding services provided by state facilities and licensed providers.

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Percentage of non-emergency inquires and complaints that are responded to within two business days	FY 2005: 100 percent of non-emergency inquiries and complaints were responded to within two business days of receipt	100 percent response rate through the end of FY 2008

Administrative and Support Services

The Department of Mental Health, Mental Retardation and Substance Abuse Services (the Department), through its Central Office functions, provides leadership, strategic and policy direction, and comprehensive and strategic planning to implement the vision of services and supports that promote consumer self-determination, empowerment, recovery, resilience, health, inclusion, and participation in all aspects of community life throughout the Commonwealth's publicly funded mental health, mental retardation, and substance abuse services system. It oversees the operation of the nine state hospitals, five training centers, one medical center, and one residential treatment program for sexually violent predators. It provides general guidance and technical assistance to, negotiates contracts with, and funds the 40 community services boards. It protects the human rights of consumers in services licensed, operated, or funded by the Department. It provides financial management and controls for all state and federal funds appropriated to and allocated through the Department, defines performance measures for the public services system, conducts program and financial audits, and performs other quality and compliance assurance activities. It performs workforce development planning and provides and funds training and skill development required for a competent professional, direct care, and administrative and support workforce. It also coordinates terrorism and disaster behavioral health preparedness, response, and recovery activities.

The Central Office administers three programs:

- A Juvenile Competency Restoration Program that directly provides in the greater Richmond area and contracts with public and private providers elsewhere for competency evaluations and treatment services to restore competency to stand trial of juveniles under criminal charge in Juvenile and Domestic Relations courts;
- A community-based Conditional Release program for individuals who have been found by the courts to be sexually violent predators but who do not need secure residential care; and
- The Pre-Admission Screening and Resident Review process pursuant to the Nursing Home Reform provisions of OBRA 87.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$35,882,058	\$35,882,058	237.00	237.00
Transfer centrally funded amounts to agency budgets	\$1,605,781	\$1,605,781	0.00	0.00
Remove one-time funding	(\$75,000)	(\$75,000)	0.00	0.00
Transfer funds for community mental health services for non-mandated children and adolescents	(\$4,125,000)	(\$4,125,000)	0.00	0.00
Transfer funds for evaluation of "systems of care" pilot projects for children and adolescents	\$50,000	\$50,000	0.00	0.00
Adjust nongeneral fund appropriation to reflect federal grant awards	(\$3,500,000)	(\$3,500,000)	0.00	0.00
Adjust funding for agency expenditures related to cost of basic operations	\$868,742	\$1,330,085	0.00	0.00
Increase positions in architectural and engineering services	\$285,541	\$285,541	3.00	3.00
Provide funding for the Community Integration Oversight Advisory Committee	\$233,398	\$233,398	0.00	0.00
Implement a developmental career path for Direct Service Associates	\$148,658	\$811,861	0.00	0.00
Add funding for Celebrating Special Children	\$100,000	\$0	0.00	0.00
Add funding for Greater Richmond Association for Retarded Citizens (ARC)	\$750,000	\$0	0.00	0.00
Capital Outlay Lease for food service units at mental health and mental retardation facilities	\$859,698	\$1,719,395	0.00	0.00
Total for Service Area	\$33,083,876	\$34,218,119	240.00	240.00

Objective: Promote the implementation of self-determination, empowerment, recovery and resilience principles and practices across the Commonwealth's system of mental health, mental retardation, and substance abuse services.

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Number participating in wellness recovery planning and consumer empowerment and leadership training	FY 2005: 141 training participants	175 participants trained annually through the end of FY 2008

Community Substance Abuse Services

Community Substance Abuse Services funds public community substance abuse services provided by community services boards and behavioral health authorities, hereafter referred to as CSBs, throughout the Commonwealth. CSBs function as the single points of entry into publicly funded mental health, mental retardation, and substance abuse services in their service areas in order to provide comprehensive mental health, mental retardation, and substance abuse services within a continuum of care. Prevention services include programs, practices, and policies that involve individuals, families, community coalitions, and systems working together to promote their strengths and potentials. Prevention is aimed at substantially reducing the incidence of alcohol, tobacco, and other drug dependency and abuse. CSB responsibilities for services to consumers and for other administrative and operational requirements are identified in, reported on, and monitored through community services performance contracts negotiated annually by the Department with each CSB and associated contract reports. Community substance abuse services are integrated with other direct services and supports at the local level for individuals with special needs or those receiving services from multiple agencies, including adults and children or adolescents with co-occurring disorders such as mental illness and substance use disorders, and individuals who are hospitalized or involved in the criminal justice system.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$84,178,073	\$84,178,073	0.00	0.00
Transfer centrally funded amounts to agency budgets	\$2,760,799	\$2,760,799	0.00	0.00
Transfer funds between community mental health services to reflect actual expenditures	\$1,600,000	\$1,600,000	0.00	0.00
Adjust nongeneral fund appropriation to reflect federal grant awards	(\$4,000,000)	(\$4,000,000)	0.00	0.00
Establish substance abuse services community transformation initiative	\$6,278,568	\$6,278,568	0.00	0.00
Total for Service Area	\$90.817.440	\$90.817.440	0.00	0.00

Objective: Implement substance abuse service initiatives that achieve the vision of a consumer-driven system of services and develop community services capacity consistent with the goals of SA services system transformation.

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Increase in units of service delivered 40 CSBs for services that divert admis from state hospitals	,	5 percent increase in the number of consumers receiving state facility diversion services by the end of FY 2008

Community Mental Health Services

Community Mental Health Services funds public community mental health services provided by community services boards and behavioral health authorities, hereafter referred to as CSBs, throughout the Commonwealth. CSBs function as the single points of entry into publicly funded mental health, mental retardation, and substance abuse services in their service areas in order to provide comprehensive mental health, mental retardation, and substance abuse services within a continuum of care. CSBs also provide preadmission screening of all requests for involuntary inpatient treatment in state hospitals or other facilities. Finally, each CSB provides discharge planning for all individuals who resided or will reside in cities or counties served by the CSB before they are discharged from state hospitals. CSB responsibilities for services to consumers and for other administrative and operational requirements are identified in, reported on, and monitored through community services performance contracts negotiated annually by the Department with each CSB and associated contract reports. Several consumer-run, non-profit organizations provide a few direct services under separate contracts with the Department. Community mental health services are integrated with other direct services and supports at the local level for individuals with special needs or those receiving services from multiple agencies, including children or adolescents and their families, persons with co-occurring disorders such as mental illness and substance use (alcohol or other drug dependence or abuse) disorders, and adults or children who are hospitalized or involved in the criminal justice system. This service area also funds CSBs to support the implementation of conditional release orders, pursuant to § 19.2-182.7 of the Code of Virginia, for individuals who have been acquitted by reason of insanity.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$138,623,317	\$138,623,317	0.00	0.00
Transfer centrally funded amounts to agency budgets	\$7,580,030	\$7,580,030	0.00	0.00
Transfer funds for community mental health services for non-mandated children and adolescents	\$4,125,000	\$4,125,000	0.00	0.00
Transfer funds from Colonial Community Services Board pharmacy to Aftercare Pharmacy	(\$90,265)	(\$90,265)	0.00	0.00
Transfer funds between community mental health services to reflect actual expenditures	(\$17,450,000)	(\$17,450,000)	0.00	0.00
Transfer funds for evaluation of "systems of care" pilot projects for children and adolescents	(\$50,000)	(\$50,000)	0.00	0.00
Adjust nongeneral fund appropriation to reflect federal grant awards	(\$5,100,000)	(\$5,100,000)	0.00	0.00
Establish mental health community transformation initiative	\$18,401,640	\$20,533,480	0.00	0.00
Total for Service Area	\$146,039,722	\$148,171,562	0.00	0.00

Objective: Implement mental health service initiatives that achieve the vision of a consumer-driven system of services and develop community services capacity consistent with the goals of MH services system transformation.

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Increase the number of CSBs monitoring recovery orientation with the ROSI	FY 2005: 10 CSBs using the ROSI	40 CSBs using the ROSI by the end of FY 2008

Community Mental Retardation Services

Community Mental Retardation Services funds public community mental retardation services provided by community services boards and behavioral health authorities, hereafter referred to as CSBs, throughout the Commonwealth. CSBs function as the single points of entry into publicly funded mental health, mental retardation, and substance abuse services in their service areas in order to provide comprehensive mental health, mental retardation, and substance abuse services within a continuum of care. CSBs also provide preadmission screening of all requests for admission to training centers. Finally, each CSB provides discharge planning for all individuals who resided or will reside in cities or counties served by the CSB before they are discharged from training centers. CSB responsibilities for services to consumers and for other administrative and operational requirements are identified in, reported on, and monitored through community services performance contracts negotiated annually by the Department with each CSB and associated contract reports. Community mental retardation services are integrated with other direct services and supports at the local level for individuals with special needs, those receiving services from multiple agencies, and individuals with co-occurring disorders such as mental retardation and mental illness or mental retardation and substance use (alcohol or other drug dependence or abuse) disorders.

This service area also funds Part C early intervention services for infants and toddlers provided through contracts with local interagency coordinating councils (LICCs) across Virginia. These councils include representatives from a variety of agencies, including CSBs, serving infants and toddlers eligible for services under the Part C program. LICCs provide federally required information about Part C services to the Department through the Infants and Toddlers Online Tracking System (iTOTS).

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$14,328,488	\$14,328,488	0.00	0.00
Transfer centrally funded amounts to agency budgets	\$1,420,344	\$1,420,344	0.00	0.00
Transfer funds between community mental health services to reflect actual expenditures	\$15,850,000	\$15,850,000	0.00	0.00
Adjust nongeneral fund appropriation to reflect federal grant awards	\$100,000	\$100,000	0.00	0.00
Increase funds for Early Intervention services for infants and toddlers	\$4,078,366	\$4,078,366	0.00	0.00
Establish mental retardation community transformation initiative	\$48,376,344	\$59,523,554	0.00	0.00
Total for Service Area	\$84.153.542	\$95.300.752	0.00	0.00

Objective: Implement mental retardation service initiatives that achieve the vision of consumer-driven system of services and develop community services capacity consistent with the goals of MR services system transformation.

_	Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
	Level of consumer and family member participation	FY 2005: 16 percent consumer and family participation on the MR Special Populations	20 percent increase in family participation on the MR Special Populations Workgroup
		Workgroup	by the end of FY 2008

Facility-Based Education and Skills Training

Instruction services consist of any educational or vocational training, including educational instruction to the people served in training centers who are still covered by federal Individuals with Disabilities Education Act (IDEA) legislation, and vocational instruction and training for the people served in training centers.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$7,656,098	\$7,656,098	191.00	191.00
Transfer centrally funded amounts to agency budgets	\$173,792	\$173,792	0.00	0.00
Total for Service Area	\$7,829,890	\$7,829,890	191.00	191.00

Objective: Continue to provide appropriate training, education, and transition services to all eligible consumers.

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Number of eligible consumers in state- operated facilities enrolled in training or educational programs	FY 2005: 100 percent of eligible consumers were enrolled in appropriate instructional or training programs	100 percent of eligible consumers enrolled in appropriate instructional or training programs through FY 2008

Forensic and Behavioral Rehabilitation Security

The Department has, by statute, responsibility for the provision of forensic mental health evaluation and treatment services to the criminal courts of the Commonwealth. Forensic treatment services are provided in secure or civil units. The most secure location is the Maximum Security Forensic Unit at Central State Hospital (CSH) in Petersburg. This facility has levels of perimeter and internal security and security personnel that are equivalent to a medium security correctional center. An Intermediate Security Unit at CSH has medium correctional security levels of perimeter security, a less restricted internal milieu, and security staffing. Two minimum-security units, at Eastern State Hospital (ESH) and Western State Hospital (WSH), have a physical structure that includes, at a minimum, two levels of locked security to prevent escape, and a specialized staff complement.

The Department also operates the Virginia Center for Behavioral Rehabilitation (VCBR), which provides evaluation and rehabilitation services in a secure setting to individuals found by the court to meet the statutory criterion of sexually violent predator (SVP) under § 37.2-900 et.seq. of the Code of Virginia. The VCBR prepares residents, when appropriate, for eventual return to their home communities, working with community providers to develop realistic and appropriate conditional release and monitoring safety plans.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$22,129,276	\$22,129,276	478.00	478.00
Transfer centrally funded amounts to agency budgets	(\$7,378,286)	(\$7,378,286)	0.00	0.00
Total for Service Area	\$14,750,990	\$14,750,990	478.00	478.00

Objective: Provide sufficient secure forensic evaluation, forensic treatment, and services that restore competency to stand trial to meet the demands of jails and courts.

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Average wait times for admission to secure forensic settings	FY 2005: 3 months average wait time for admission to secure forensic settings	10 percent reduction in average wait time for admission to secure forensic settings by the end of FY 2008

Objective: Provide secure and sex-offender specific treatment services to civilly committed sexually violent predators (SVPs) residing at the VCBR.

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Reduction in the VCBR security staff turnover rate	FY 2005: 50 percent VCBR security staff turnover rate	10 percent reduction in the VCBR security staff turnover rate by the end of FY 2008

Aftercare Pharmacy Services

The Aftercare Pharmacy provides medications for individuals who have been discharged or diverted from a state hospital or training center and who are unable to pay for medications that have been prescribed to treat or prevent a recurrence of the condition for which they received state facility services. The Aftercare Pharmacy is located at the Hiram Davis Medical Center in Petersburg.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$22,524,843	\$22,524,843	0.00	0.00
Transfer funds from Colonial Community Services Board pharmacy to Aftercare Pharmacy	\$90,265	\$90,265	0.00	0.00
Address increasing costs in Aftercare Pharmacy	\$2,031,325	\$3,782,139	0.00	0.00
Total for Service Area	\$24,646,433	\$26.397.247	0.00	0.00

Objective: Provide appropriate pharmacy services to individuals receiving CSB services who meet Aftercare Pharmacy eligibility criteria.

 Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Annualized "Medsavers" savings	FY 04: \$1,885,475 in savings realized through the "Medsaver" program	2 percent increase in savings realized through the "Medsaver" program by the end of FY 2008

Inpatient Pharmacy Services

Inpatient pharmacy and medication management services include medication selection and procurement, medication storage, medication ordering and prescribing, medication preparation and dispensing, medication administration, and medication monitoring.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$16,921,927	\$16,921,927	65.80	65.80
Transfer centrally funded amounts to agency budgets	\$68,278	\$68,278	0.00	0.00
Address increasing inpatient pharmacy costs	\$4,240,088	\$4,950,771	0.00	0.00
Provide increased funding to ensure proper billing for prescriptions purchased through Medicare Part D	\$759,000	\$759,000	0.00	0.00
Total for Service Area	\$21,989,293	\$22,699,976	65.80	65.80

Objective: Provide appropriate pharmacy services to state facility patients and residents.

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Volume of inventory, including purchases and expenditures (measured in dollars)	FY 2004: \$12.6 million	\$12.6 million annually through the end of FY 2008

Geriatric Care Services

Geriatric care services include inpatient psychiatric and medical assessment; psychology, medical, nursing, dental, social work, and ancillary services; recreational, physical, and occupational therapies; individualized treatment planning; medical and psychiatric medication management; rehabilitation; and cooperation with CSBs in discharge planning and coordination with the patient, family, and a host of local service providers serving the individuals ages 65 and older with mental illness to effect appropriate discharge and community placement.

The Department operates geriatric treatment centers or units at Eastern State Hospital (ESH) in Williamsburg, Southwestern Virginia Mental Health Institute (SWVMHI) in Marion, Catawba Hospital (CH) near Salem, and Piedmont Geriatric Hospital (PGH) in Burkeville.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$33,213,172	\$33,213,172	717.58	717.58
Transfer centrally funded amounts to agency budgets	\$2,783,609	\$2,783,609	0.00	0.00
Reduce funds for operating costs at Eastern State and Western State Hospitals	(\$1,552,034)	(\$3,993,549)	0.00	-55.00
Total for Service Area	\$34,444,747	\$32,003,232	717.58	662.58

Objective: Offer a comprehensive array of inpatient geriatric treatment and rehabilitation services and enrichment activities that meet patient needs and interests and promote self-determination and recovery.

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Increase the state geriatric centers' patient and family satisfaction survey response rates	FY 2005: 60 percent response rate by patients and family members	10 percent increase in the response rate by the end of FY 2008

Inpatient Medical Services

Inpatient medical services include medical and dental care and nursing services provided to individuals receiving services in state hospitals and training centers. Inpatient medical services encompass a broad range of interventions, therapies, and laboratory services, but, most predominantly, include the skilled nursing, infirmary services, and acute medical or surgical care provided in state facility medical/surgical units or by referral from state facilities to local acute care hospitals through the Department's special hospitalization program.

Medical/surgical units are available at Eastern State Hospital (ESH) in Williamsburg, Southwestern Virginia Mental Health Institute (SWVMHI) in Marion, Western State Hospital (WSH) in Staunton, Central Virginia Training Center (CVTC) in Lynchburg, and the Hiram Davis Medical Center (HDMC) in Dinwiddie.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$31,529,070	\$31,529,070	599.57	599.57
Transfer centrally funded amounts to agency budgets	\$2,503,522	\$2,503,522	0.00	0.00
Total for Service Area	\$34,032,592	\$34,032,592	599.57	599.57

Objective: Offer or arrange for medical care appropriate to the individualized needs of facility patients and residents.

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Compliance with CMS certification and JCAHO accreditation requirements	FY 2005: 100 percent compliance	100 percent compliance through the end of FY 2008

State Mental Retardation Training Center Services

State mental retardation training center services include medical and psychiatric assessment, healthcare, medical stabilization, habilitation, and development of skills needed for successful community living. Although long-term care has been their main function, training centers also provide short-term respite care and emergency care. All training centers meet federal requirements for designation as Intermediate Care Facilities (ICF/MR) and one, CVTC, also operates skilled nursing and acute care beds.

The Department operates five training centers: Northern Virginia Training Center (NVTC) in Fairfax, Southeastern Virginia Training Center (SEVTC) in Chesapeake, Southside Virginia Training Center (SVTC) in Petersburg, Central Virginia Training Center (CVTC) in Lynchburg, and Southwestern Virginia Training Center (SWVTC) in Hillsville.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$106,185,848	\$106,185,848	2,661.00	2,661.00
Transfer centrally funded amounts to agency budgets	\$8,615,636	\$8,615,636	0.00	0.00
Adjust nongeneral fund appropriation and positions at Southeastern and Central Virginia Training Centers	(\$5,570,661)	(\$12,854,411)	0.00	-134.00
Total for Service Area	\$109,230,823	\$101,947,073	2,661.00	2,527.00

Objective: Offer a comprehensive array of training and habilitation services and enrichment activities that meet training center resident needs and interests, promote self-determination, and provide for resident safety.

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Rate of turnover for direct care staff	FY 2005: 21.5 percent total direct care turnover	10 percent reduction in direct care turnover by the end of FY 2008

State Mental Health Facility Services

State mental health facilities provide a variety of clinical services that are individualized to best meet each consumer's needs and include: psychiatric assessment and stabilization; medication management; psycho-social rehabilitation programming; psychiatric and rehabilitative therapies; and, in collaboration with the CSBs, discharge planning. Services are further specialized by the age groups served at a facility and incorporate cultural competency.

State mental health facilities include Catawba Hospital (CH) near Salem, Central State Hospital (CSH) in Dinwiddie, Commonwealth Center for Children and Adolescents (CCCA) in Staunton, Eastern State Hospital (ESH) in Williamsburg, Northern Virginia Mental Health Institute (NVMHI) in Falls Church, Southern Virginia Mental Health Institute (SVMHI) in Danville, Southwestern Virginia Mental Health Institute (SWVMHI) in Marion, and Western State Hospital (WSH) in Staunton.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$120,306,369	\$120,306,369	2,417.99	2,417.99
Transfer centrally funded amounts to agency budgets	\$13,532,994	\$13,532,994	0.00	0.00
Total for Service Area	\$133,839,363	\$133,839,363	2,417.99	2,417.99

Objective: Offer a comprehensive array of inpatient treatment and rehabilitation services and enrichment activities that meet patient needs and interests and promote self-determination, resilience and recovery.

Key Perf	ormance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Direct ca	are staff turnover rate	FY 2005: 24.5 percent total direct care turnover	10 percent reduction in direct care turnover rate by the end of FY 2008

Facility Administrative and Support Services

Facility Administrative and Support Services consist of general management and direction, computer services, food and dietary services, housekeeping services, linen and laundry services, physical plant services, power plant operations, and training and education services. These functions support the overall mission of each state hospital and training center. Facility administration and support services provide the foundation for the provision of quality mental health and mental retardation services in an inpatient environment.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$139,886,255	\$139,886,255	2,493.06	2,493.06
Transfer centrally funded amounts to agency budgets	\$16,239,615	\$16,239,615	0.00	0.00
Transfer position to Virginia Information Technologies Agency	\$0	\$0	-1.00	-1.00
Total for Service Area	\$156 125 870	\$156 125 870	2 492 06	2 492 06

Objective: Provide efficient and effective administration and support to inpatient services provided within each state hospital and training center.

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Adhere to Prompt Payment Act requirements	FY 2005: 95 percent compliance across all state facilities	95 percent compliance across all state facilities through the end of FY 2008

Department of Rehabilitative Services

Mission Statement

The Virginia Department of Rehabilitative Services (DRS), in partnership with people with disabilities and their families, collaborates with the public and private sectors to provide and advocate for the highest quality services that empower individuals with disabilities to maximize their employment, independence and full inclusion into society.

Agency Goals:

- Provide consumer focused and cost effective services that prepare and enable Virginians with disabilities to be gainfully employed.
- Maximize the independence and self-sufficiency of Virginians with disabilities.
- Provide a qualified, knowledgeable and skilled workforce.
- To provide effective and efficient management services for the Disability Services Agencies.

Customers Served:

- Vocational Rehabilitation Program Consumers
- Social Security Determination Consumers
- Community Rehabilitation Program Consumers
- General and Support Services Consumers

Agency Budget Summary

	General Fund	Nongeneral Fund	TOTAL	Personnel Costs	Other Costs	Positions
OPERATING BUDGET	HISTORY:					
FY 2003	\$24,132,929	\$99,417,857	\$123,550,786	\$38,484,475	\$85,066,311	707.00
FY 2004	\$23,792,675	\$99,574,596	\$123,367,271	\$38,595,319	\$84,771,952	707.00
FY 2005	\$26,357,549	\$102,347,822	\$128,705,371	\$43,751,460	\$84,953,911	709.00
FY 2006	\$27,162,016	\$102,354,072	\$129,516,088	\$43,751,460	\$85,764,628	694.00
NEW OPERATING BUI	DGET SUMMAR	Y:				
FY 2007 Base Budget	\$27,162,016	\$102,354,072	\$129,516,088	\$43,751,460	\$85,764,628	694.00
FY 2007 Addenda	\$999,337	\$3,288,203	\$4,287,540	\$3,887,561	\$399,979	5.00
FY 2007 TOTAL	\$28,161,353	\$105,642,275	\$133,803,628	\$47,639,021	\$86,164,607	699.00
FY 2008 Base Budget	\$27,162,016	\$102,354,072	\$129,516,088	\$43,751,460	\$85,764,628	694.00
FY 2008 Addenda	\$1,000,667	\$3,288,203	\$4,288,870	\$3,887,561	\$401,309	5.00
FY 2008 TOTAL	\$28,162,683	\$105,642,275	\$133,804,958	\$47,639,021	\$86,165,937	699.00

Agency Summary of Recommended Operating Budget Addenda

► Transfer centrally funded amounts to agency budgets

Adjusts the agency budget to reflect amounts moved from Central Appropriations to cover the cost of items such as the continuation of 2005 and 2006 salary and health insurance premium increases, and changes in retirement and disability contribution rates. For each year, \$778,617 (GF) and \$3.3 million (NGF).

► Transfer appropriation from the Continuing Income Assistance Services program to the Rehabilitative Assistance Services program

Transfers dollars designated for services for persons with brain injuries to the correct program.

► Transfer fund allocation within the Vocational Rehabilitation program

Transfers misallocated funds from federal funds to nongeneral funds within the Vocational Rehabilitation program. (Net zero adjustment)

► Transfer general fund dollars for the Postsecondary Education Rehabilitation Transition (PERT) program between agencies

Transfers general fund from Department of Rehabilitative Services to Woodrow Wilson Rehabilitation Center to avoid annual administrative transfers. For each year, a reduction of \$864,911 (GF).

► Receive five positions from the Virginia Employment Commission

Increases position level by five for positions received from the Virginia Employment Commission to implement the Disability Navigator Program. This program provides assistance to people with disabilities in navigating through the variety of programs and services that impact their employment. For 2007, five positions.

▶ Adjust funding for agency expenditures related to cost of basic operations

Adjusts funding for changes in operating costs related to central agency services and various charges. These include procurement fees, property insurance premiums, and workers compensation insurance premiums. It also includes adjustments for changes in project management and security provided by the Virginia Information Technologies Agency and the transformation to service-based billing for technology services other than hardware and software. For 2007, \$37,081 (GF). For 2008, \$38,411 (GF).

► Increase the number of individuals with significant disabilities receiving long term support for maintaining employment

Provides long term support for maintaining employment to an additional 1,000 individuals with significant disabilities through the Long Term Employment Support Services program. For each year, \$763,550 (GF).

► Expand Brain Injury services in Southwest Virginia

Establishes positions in Southwest Virginia to serve people with a brain injury who are in an underserved part of the state. For each year, \$285,000 (GF).

Agency Service Areas:

Vocational Rehabilitation Services

This service area provides comprehensive services to eligible individuals with disabilities necessary for them to prepare for or retain employment.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$72,215,603	\$72,215,603	348.50	348.50
Transfer centrally funded amounts to agency budgets	\$3,502,790	\$3,502,790	0.00	0.00
Transfer general fund dollars for the Postsecondary Education Rehabilitation Transition (PERT) program between agencies	(\$864,911)	(\$864,911)	0.00	0.00
Receive five positions from the Virginia Employment Commission	\$0	\$0	5.00	5.00
Increase the number of individuals with significant disabilities receiving long term support for maintaining employment	\$763,550	\$763,550	0.00	0.00
Total for Service Area	\$75,617,032	\$75,617,032	353.50	353.50

Objective: To assist eligible individuals with disabilities to become employed and maintain employment that is consistent with individual interests, abilities and informed choice.

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Number of vocational rehabilitation consumers who achieve their employment goal and work satisfactorily for at least 90 days resulting in successful case closure.	3,612 consumers had successful case closures in Federal Fiscal Year 2005	3,900 consumers will have successful case closures
Average hourly wage of vocational rehabilitation consumers employed at the time of their case closure.	\$7.28 is the current median and has remained relatively stable for the past six years	\$7.75 as the median

Objective: Provide ongoing supports to persons with significant disabilities who need these supports to maintain employment following their VR case closure.

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Serve consumers in follow along support services.	2831 consumers were served through long term supports in State Fiscal Year 2005	2831 consumers will be served through long term supports

Community Rehabilitation Programs

This service area encompasses an array of community-based programs and services that complement the agency's vocational rehabilitation program. These programs address the longer-term needs of individuals with significant physical and sensory disabilities.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$13,583,868	\$13,583,868	15.75	15.75
Transfer appropriation from the Continuing Income Assistance Services program to the Rehabilitative Assistance Services program	\$75,000	\$75,000	0.00	0.00
Expand Brain Injury services in Southwest Virginia	\$285,000	\$285,000	0.00	0.00
Total for Service Area	\$13,943,868	\$13,943,868	15.75	15.75

Objective: To provide an array of specialized, community based programs and services that support independent living, employment, and rehabilitation needs of Virginians with significant disabilities who may need long-term services.

Key F	Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Num	ber of consumers served	In Fiscal Year 2005, 33,292 consumers were served in the BrainInjury/Spinal Cord Injury Services, Community Rehabilitation Case Management, Independent Living, Personal Assistance, Consumer Services Fund and Rehabilitation Services Incentive Fund	29,609 due to conclusion of the Traumatic Brain Injury Act Grant

Social Security Disability Determination

This service area, in partnership with the Social Security Administration, processes claims filed by citizens of the Commonwealth of Virginia who have applied for disability benefits under Title II (Disability Insurance), Title XVI (Supplemental Security Income), and Title XIX (Medicaid disability) of the Social Security Act. These evaluations result in the adjudication or "determination" of claims at the initial claims stage, at the continuing disability review stage, and at other appellate points in the disability adjudicative process.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$35,511,635	\$35,511,635	276.75	276.75
Transfer appropriation from the Continuing Income Assistance Services program to the Rehabilitative Assistance Services program	(\$75,000)	(\$75,000)	0.00	0.00

\$35,436,635

\$35,436,635

276.75

276.75

Objective: Provide accurate disability decisions that meet or exceed federal requirements for Title II, Title XVI and Title XIX disability claims.

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Maintain acceptable accuracy rate as measured by the Social Security Administration's Disability Quality Branch.	Total accuracy rate in Fiscal Year 2004 was 93.6%	As established by the Social Security Administration, obtain accuracy rate of 90.6% or better.

Administrative and Support Services

Total for Service Area

This service area provides management, administrative support and technical assistance to the other service areas of the Department of Rehabilitative Services (DRS). In addition, via memoranda of agreement, much of this service area provides administrative support and technical assistance to the Disability Services Agencies (DSA), which include the Woodrow Wilson Rehabilitation Center (WWRC), Department for the Blind and Vision Impaired, the Virginia Rehabilitation Center for the Blind and Vision Impaired, the Department for the Deaf and Hard of Hearing, and the Virginia Board for People with Disabilities.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$8,204,982	\$8,204,982	53.00	53.00
Transfer centrally funded amounts to agency budgets	\$564,030	\$564,030	0.00	0.00
Adjust funding for agency expenditures related to cost of basic operations	\$37,081	\$38,411	0.00	0.00
Total for Service Area	\$8,806,093	\$8,807,423	53.00	53.00

Objective: To provide effective and efficient financial management services.

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)	
Number of Auditor of Public Accounts non- compliance audit points	DRS received zero non-compliance audit points in Fiscal Years 2004 and 2005.	Zero non-compliance audit points.	

Objective: To provide effective and efficient human resource services.

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Percent of performance evaluation ratings at "Contributor" or higher	On average, 99% of DRS employees receive a "Contributor" or higher rating on their annual performance evaluations.	99% of DRS employees will receive a "Contributor" or higher rating on their annual performance evaluations.
Number of training activities in which staff participate	This is a new measure. Baseline to be determined by July 1, 2006	6000 training activities each Fiscal Year

Objective: To provide effective and efficient information technology management services.

_	Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)	
-	Comply with VITA's Commonwealth Agency Technology Strategic Planning Application (CATSPA)	DRS has complied 100% with VITA required deadlines.	100% compliance with required VITA deadlines	

Woodrow Wilson Rehabilitation Center

Mission Statement

Woodrow Wilson Rehabilitation Center provides people with disabilities comprehensive, individualized services to realize optimal personal independence and employment.

Agency Goals:

- Deliver comprehensive and effective vocational services to citizens of the Commonwealth with disabilities that will realize their optimal independence and employability.
- Deliver comprehensive and effective medical services to citizens of the Commonwealth with disabilities that will realize their optimal independence and employability.
- Enhance customer service delivery through effective and efficient management of state property, fiscal processes, use of technology and current administrative policies.

Customers Served:

- Medical Rehabilitation Service Area Clients
- Clients Housed on the Short Term Rehabilitation Unit
- Vocational Rehabilitation Service Area Clients
- Total Clients served at WWRC
- Classified and wage staff of WWRC

Agency Budget Summary

	General Fund	Nongeneral Fund	TOTAL	Personnel Costs	Other Costs	Positions
OPERATING BUDGET	HISTORY:					
FY 2003	\$5,434,300	\$19,389,583	\$24,823,883	\$18,223,007	\$6,600,876	364.00
FY 2004	\$5,094,113	\$19,389,583	\$24,483,696	\$17,846,576	\$6,637,120	363.00
FY 2005	\$5,278,146	\$19,865,787	\$25,143,933	\$18,579,352	\$6,564,581	363.00
FY 2006	\$5,279,056	\$19,865,787	\$25,144,843	\$18,579,352	\$6,565,491	363.00
NEW OPERATING BUI	OGET SUMMAR	Y:				
FY 2007 Base Budget	\$5,279,056	\$19,865,787	\$25,144,843	\$18,753,147	\$6,391,696	363.00
FY 2007 Addenda	\$1,410,523	\$951,314	\$2,361,837	\$1,467,637	\$894,200	0.00
FY 2007 TOTAL	\$6,689,579	\$20,817,101	\$27,506,680	\$20,220,784	\$7,285,896	363.00
FY 2008 Base Budget	\$5,279,056	\$19,865,787	\$25,144,843	\$18,753,147	\$6,391,696	363.00
FY 2008 Addenda	\$1,420,510	\$951,314	\$2,371,824	\$1,467,637	\$904,187	0.00
FY 2008 TOTAL	\$6,699,566	\$20,817,101	\$27,516,667	\$20,220,784	\$7,295,883	363.00
CAPITAL OUTLAY BUDGET SUMMARY:						
FY 2007 Capital	\$2,550,000	\$0	\$2,550,000	\$0	\$2,550,000	0.00
FY 2008 Capital	\$0	\$0	\$0	\$0	\$0	0.00

Agency Summary of Recommended Operating Budget Addenda

► Transfer centrally funded amounts to agency budgets

Adjusts the agency budget to reflect amounts moved from Central Appropriations to cover the cost of items such as the continuation of 2005 and 2006 salary and health insurance premium increases, and changes in retirement and disability contribution rates. For each year, \$516,323 (GF) and \$951,314 (NGF).

► Transfer general fund dollars for the Postsecondary Education Rehabilitation Transition (PERT) program between agencies

Transfers general fund dollars from Department of Rehabilitative Services to Woodrow Wilson Rehabilitation Center to avoid annual administrative transfers. For each year, \$864,911 (GF).

▶ Adjust funding for agency expenditures related to cost of basic operations

Adjusts funding for changes in operating costs related to central agency services and various charges. These include procurement fees, property insurance premiums, and workers compensation insurance premiums. It also includes adjustments for changes in project management and security provided by the Virginia Information Technologies Agency and the transformation to service-based billing for technology services other than hardware and software. For 2007, \$29,289 (GF). For 2008, \$39,276 (GF).

Agency Summary of Recommended Capital Outlay Addenda

► Address life safety repairs for R.N. Anderson Vocational Training Building

Addresses life safety repairs for the R.N. Anderson Vocational Training Building. The retaining walls for this building are deteriorated and collapsing; the roofing system has started to experience a high rate of deterioration, which has resulted in numerous roof leaks. For the biennium, \$2.6 million (GF).

Agency Service Areas:

Vocational Rehabilitation Services

The Vocational Rehabilitation Service Area provides vocational rehabilitation and residential services for individuals with multiple and complex disabilities at the Woodrow Wilson Rehabilitation Center (WWRC), a division of the Commonwealth of Virginia Department of Rehabilitative Services (DRS).

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$9,341,196	\$9,341,196	148.00	148.00
Transfer centrally funded amounts to agency budgets	\$564,827	\$564,827	0.00	0.00
Transfer general fund dollars for the Postsecondary Education Rehabilitation Transition (PERT) program between agencies	\$864,911	\$864,911	0.00	0.00
Total for Service Area	\$10,770,934	\$10,770,934	148.00	148.00

Objective: To prepare WWRC training graduates to attain competitive employment outcomes.

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Employed graduates from WWRC training programs	70%	70%

Medical Rehabilitative Services

This service area provides residential, on site outpatient and community based medical rehabilitation services for individuals with functional limitations and physical disabilities. Services are available to consumers with an emphasis on work and independent living. Often, services are a component of a comprehensive package of vocational and medical rehabilitation services. Medical Rehabilitation Services is one service area of the Woodrow Wilson Rehabilitation Center (WWRC) a division of the Department of Rehabilitative Services (DRS). This area is certified as a CORF (Comprehensive Outpatient Rehabilitation Facility) and licensed to provide services by Medicare, Medicaid, Blue Cross/ Blue Shield, along with DRS and other payers.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$8,561,603	\$8,561,603	148.00	148.00
Transfer centrally funded amounts to agency budgets	\$571,195	\$571,195	0.00	0.00
Total for Service Area	\$9 132 798	\$9 132 798	148 00	148 00

Objective: To provide quality and effective medical rehabilitative services while meeting the needs of the client's within WWRC's residential programs and those in the community.

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Number of Medical Rehabilitation Clients Served	1054 Clients Served	1054

Administrative and Support Services

This service area provides management, administrative support, physical plant services and technical assistance to functional programs of the Woodrow Wilson Rehabilitation Center (WWRC) a division of the Department of Rehabilitative Services (DRS).

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$7,242,044	\$7,242,044	67.00	67.00
Transfer centrally funded amounts to agency budgets	\$331,615	\$331,615	0.00	0.00
Adjust funding for agency expenditures related to cost of basic operations	\$29,289	\$39,276	0.00	0.00
Total for Service Area	\$7 602 948	\$7 612 935	67.00	67.00

Objective: To provide effective and efficient financial management services.

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Percent of Payments Made Within 30 Days	95% of payments are made within 30 days of invoice receipt.	95% of payments made within 30 days of invoice receipt.
Number of Auditor of Public Accounts non- compliance audit Points	WWRC received zero non-compliance audit points in Fiscal Years 2004 and 2005	Zero non-compliance audit points
Disbursement Policy Compliance	WWRC has achieved a rating of "Good" or higher in the disbursement of state funds, including but not limited to state travel policies.	A rating of "Good" or higher

Objective: To provide effective and efficient physical plant and capital improvement services.

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Staff satisfaction rating of Physical Plant Services	95% staff satisfaction	95% staff satisfaction

Objective: To provide effective and efficient Human Resource Services.

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Percent of Performance Evaluation Ratings at "Contributor" or Higher	On average, 99% of WWRC employees receive a "Contributor" or higher rating on their annual performance evaluations.	99% of WWRC employees will receive a "Contributor" or higher rating on their annual performance evaluations.
Number of Training Activities in which Staff Participate	This is a new measure. Baseline to be established by July 1, 2006.	332 employee participation in training programs

Objective: To provide effective and efficient technology management services.

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Comply with VITA's Commonwealth Agency Technology Strategic Planning Application (CATSPA)	WWRC has complied 100% with VITA required deadlines	100% compliance with required VITA deadlines

Department of Social Services

Mission Statement

People helping people triumph over poverty, abuse and neglect to shape strong futures for themselves, their families, and communities.

Agency Goals:

- Enhance the independence, well-being and personal responsibility of customers.
- Establish a performance management system.
- Improve business productivity through effective automation.
- Deliver high-quality customer-focused services.
- Cultivate a diverse workforce capable of accomplishing the system's mission.
- · Optimize and maximize resources.
- Become a learning organization capable of accomplishing the system's mission.

Customers Served:

- Businesses (served unknown; potential unlimited)
- Individuals, Children and Families (served unknown; potential unlimited)
- General Public (served unknown; potential unlimited)
- Governmental Entities (served unknown; potential unlimited)
- Community and Volunteer Organizations (potential unlimited)

Agency Budget Summary

	General Fund	Nongeneral Fund	TOTAL	Personnel Costs	Other Costs	Positions
OPERATING BUDGET HISTORY:						
FY 2003	\$269,435,537	\$1,158,616,404	\$1,428,051,941	\$80,518,670	\$1,347,533,271	1,668.50
FY 2004	\$276,934,240	\$1,212,991,724	\$1,489,925,964	\$83,618,596	\$1,406,307,368	1,647.50
FY 2005	\$305,770,744	\$1,349,424,005	\$1,655,194,749	\$87,517,987	\$1,567,676,762	1,662.50
FY 2006	\$326,625,242	\$1,359,607,888	\$1,686,233,130	\$89,550,979	\$1,596,682,151	1,617.50
NEW OPERATING BU	DGET SUMMAI	RY:				
FY 2007 Base Budget	\$326,625,242	\$1,359,607,888	\$1,686,233,130	\$88,392,363	\$1,597,840,767	1,617.50
FY 2007 Addenda	\$37,606,073	\$27,282,803	\$64,888,876	\$10,805,870	\$54,083,006	57.00
FY 2007 TOTAL	\$364,231,315	\$1,386,890,691	\$1,751,122,006	\$99,198,233	\$1,651,923,773	1,674.50
FY 2008 Base Budget	\$326,625,242	\$1,359,607,888	\$1,686,233,130	\$88,392,363	\$1,597,840,767	1,617.50
FY 2008 Addenda	\$43,260,997	\$60,030,800	\$103,291,797	\$13,717,260	\$89,574,537	57.00
FY 2008 TOTAL	\$369,886,239	\$1,419,638,688	\$1,789,524,927	\$102,109,623	\$1,687,415,304	1,674.50

Agency Summary of Recommended Operating Budget Addenda

► Transfer centrally funded amounts to agency budgets

Adjusts the agency budget to reflect amounts moved from Central Appropriations to cover the cost of items such as the continuation of 2005 and 2006 salary and health insurance premium increases, and changes in retirement and disability contribution rates. For each year, \$8.4 million (GF) and \$6.2 million (NGF).

► Remove one-time funding

Removes funding that was added and identified as one-time by the 2005 General Assembly. For each year, a reduction of \$250,000 (GF).

▶ Reflect increased child support enforcement revenue and the federal share of local salaries

Increases appropriation to account for additional federal dollars associated with grants and the federal share of certain state and local expenditures. Additional appropriation is also provided for projected increases in child support collections and payments. For 2007, \$17.9 million (NGF). For 2008, \$47.7 million (NGF).

▶ Fund increasing caseload and expenditures in the adoption subsidy program

Increases support for mandated and special needs adoption subsidies due to increasing caseloads and expenditures. The additional support will fully fund anticipated expenditures for maintenance and special service subsidies. The funding will also ensure that the Commonwealth continues to meet its contractual obligations with adoptive parents. For 2007, an increase of \$12.5 million (GF) and a decrease of \$1.8 million (NGF). For 2008, an increase of \$16.4 million (GF) and a decrease of \$1.5 million (NGF).

▶ Address shortfalls in Temporary Assistance for Needy Families and mandated child care

Adds funds for federally mandated child care services to Temporary Assistance for Needy Families (TANF) recipients enrolled in Virginia Initiative for Employment not Welfare (VIEW) activities, as well as those persons transitioning from TANF. Child care services allow individuals to reduce their dependence on public assistance and transition to self-sufficiency. In addition, the TANF appropriation is modified to reflect current spending. For 2007, \$6.8 million (GF) and \$3.0 million (NGF).

► Fund increased cost of eligibility determination

Funds the information technology costs associated with determining eligibility in local departments of social services. As new individuals apply for benefit programs in local departments, the cost of information technology utilization for eligibility has increased proportionally. For 2007, \$2.6 million (GF) and \$2.2 million (NGF). For 2008, \$4.3 million (GF) and \$3.5 million (NGF).

► Adjust funding for agency expenditures related to cost of basic operations

Adjusts funding for changes in operating costs related to central agency services and various charges. These include procurement fees, property insurance premiums, and workers compensation insurance premiums. It also includes adjustments for changes in project management and security provided by the Virginia Information Technologies Agency and the transformation to service-based billing for technology services other than hardware and software. For 2007, \$1.7 million (GF).

► Convert contractors to classified positions

Captures operational savings through the conversion of contract employees to classified positions. The targeted positions will allow the department to retain key employees with important skill sets while experiencing a modest general fund savings. For 2007, a decrease of \$102,884 (GF), \$175,934 (NGF), and an increase of 56 positions. For 2008, a decrease of \$233,826 (GF) and \$429,850 (NGF).

► Increase funding for Healthy Families of Virginia

Provides funds to Healthy Families of Virginia to stabilize and enhance statewide services. This action accounts for \$259,980 general fund that was appropriated in Central Appropriations for 2006. The additional dollars provided reflects a net general fund increase of \$247,979 over current support. Healthy Families provides in-home parenting education and support services to at-risk parents of children from birth to five years of age who need individualized and comprehensive support. For each year, \$507,959 (GF).

► Provide administrative funding for the Comprehensive Services Act

Adds on-going support for the executive director position in the Office of Comprehensive Services. For 2007, \$120,525 (GF) and one position. For 2008, \$120,525 (GF).

▶ Provide funding for community action agencies

Increases support for community action agencies. These organizations provide a wide range of services to low-income families, including Head Start, childcare, job training, emergency services, and housing. For each year, \$514,786 (GF).

► Establish Early Childhood Foundation

Provides funding to establish a foundation to address issues facing young children in the Commonwealth. This foundation will partner with private and non-profit entities with a goal of leveraging a dollar for each state dollar provided. This funding will then be used to seed and foster community programs that improve health, safety and well-being of Virginia's youth. For 2007, \$4.8 million (GF). For 2008, \$3.8 million (GF).

▶ Raise assisted living facility rate and personal care allowance

Adjusts the assisted living facility rate to reflect a \$38 increase, raised from \$944 to \$982. The new rate includes a \$24 federal Supplemental Security Income increase and a \$14 auxiliary grant (AG) increase supported with general fund dollars. The rate increase will help adult living facilities improve care. In addition, the personal care allowance is raised by \$8, from \$62 to \$70. This monthly stipend is used by AG recipients to purchase incidental items, such as non-covered medications and toiletries. The general fund support for these actions will come from an existing surplus in the auxiliary grant program. This action is contained in budget bill language.

Agency Service Areas:

Local Training and Assistance

To establish an effective and efficient infrastructure to support an internal and external training delivery system whose goal is to have a fully trained and skilled workforce to meet the needs of our customers.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$13,307,668	\$13,307,668	5.00	5.00
Transfer centrally funded amounts to agency budgets	\$20,305	\$20,305	0.00	0.00
Total for Service Area	\$13,327,973	\$13,327,973	5.00	5.00

Objective: A comprehensive internal and external learning system that supports employee development and achievement of VSSS goals

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Number of employees with development plans	New measure, baseline data not available. Baseline will be established using FY06 data.	Specific target will be determined once baseline is established. (Projected to be: 95% by the end of FY 2007)

Financial Assistance Programs Administration

This service area supports the supervision of Virginia's safety net programs including the Commonwealth's largest nutrition assistance program, the Food Stamp Program; financial assistance programs including the Energy Assistance Program, the General Relief Program, and the Temporary Assistance for Needy Families Program (TANF); and the eligibility services for medical assistance programs (FAMIS, Medicaid, and State and Local Hospitalization). This service area also supports the supervision of two of the Commonwealth's largest workforce programs: the Virginia Initiative for Employment, not Welfare (VIEW) and the Food Stamp Employment and Training Program (FSET).

The functions supported by this service area include strategic planning, policy development, program development, legislative and regulatory analysis, business process reengineering, policy and information systems training, research, dissemination of best practices, information system requirements definition and user acceptance testing, contracting, performance-based budgeting and budget monitoring, program monitoring, information services and products for the general public and media, and technical assistance to the local departments of social services which implement these programs. This service area is also responsible for the provision of some direct service through the funding and management of medical services eligibility staff stationed in hospitals and health facilities throughout the Commonwealth. Finally, this service area includes a number of contracts for services which directly impact the operations at local departments of social services including contracts for translating forms to meet federal Limited English Proficiency (LEP) requirements and contracts for services that perform critical functions as part of the eligibility determination processes.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$5,892,994	\$5,892,994	60.00	60.00
Transfer centrally funded amounts to agency budgets	\$310,310	\$310,310	0.00	0.00
Total for Service Area	\$6,203,304	\$6,203,304	60.00	60.00

Objective: Deliver timely and accurate eligibility determination services for safety net programs

 Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Timeliness of application processing	97% compliance with federal standards.	97% of all cases will be processed timely in SFY 07 and SFY 08.
Accuracy of benefit calculations	93% of Food Stamp and Medicaid cases will be processed accurately.	94% of all cases will be processed accurately in SFY 07 and SFY 08.

Protective Services Programs Administration

The Division of Family Services is composed of units dedicated to children and families: Adoptions, Adult Services, Child Protective Services, Office of Family Violence, Newcomer Services and Foster Care/Family Preservation. The division's programs are designed to address those who are most in need. We balance the role of providing effective intervention, when necessary, and emphasizing personal responsibility with ensuring the safety, stability and well being for the most vulnerable of our populations. The programs of the Department of Social Services are state supervised and locally administered. The division programs operated at the local level may include Adoptions, Adult Services, Adult Protective Services, Auxiliary Grants, Child Abuse and Neglect Toll-Free Hotline, Child Protective Services, Domestic Violence, Foster Care, Independent Living for Foster Care Youth, Safe and Stable Families. The state administered services include the Central Registry, Interstate Adoptions and the Virginia Caregivers' Grant Program.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$5,758,755	\$5,758,755	64.00	64.00
Transfer centrally funded amounts to agency budgets	\$295,718	\$295,718	0.00	0.00
Total for Sarvice Area	\$6.054.473	\$6.054.473	64.00	64.00

Objective: Realign program staff to support program needs of local DSS

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Number of complaints received and processed accurately.	New measure, baseline data not available. Baseline will be established using FY06 data.	Specific target will be determined once baseline is established.

Community Programs Administration

This service area is comprised of a number of federal and state programs that support community operated organizations and initiatives. The majority of funding is used to provide oversight including administering contracts, monitoring and providing technical assistance to community based organizations and initiatives. Funds are also used to provide direct benefits in the form of tax certificates to businesses and individuals making donations through the Neighborhood Assistance Program (NAP).

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$2,575,991	\$2,575,991	25.00	25.00
Transfer centrally funded amounts to agency budgets	\$112,597	\$112,597	0.00	0.00
Total for Service Area	\$2,688,588	\$2,688,588	25.00	25.00

Objective: Support and enhance Virginia's network of community action agencies and statewide community action organizations which provide services to low-income individuals, families and communities

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Findings/deficiencies where agencies are not in compliance with rules and regulations.	New measure, baseline data not available. Baseline will be established using FY06 data.	Specific target will be determined once baseline is established. (Projected to be: A reduction of 5% per fiscal year in average number of finding/deficiencies per agency)

Objective: To encourage business and individuals to make donations to approved non-profit organizations which are providing assistance to the low income population of Virginia

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)	
Timely issuance of tax certificates to donors.	New measure, baseline data not available. Baseline will be established using FY06 data.	Specific target will be determined once baseline is established. (projected to be: 90% of tax certificates issued within 20 working days)	

Comprehensive Services Act Administration

The agency provides localities resources, technical assistance, training, and management tools so they can develop systems of services and funding that effectively serve children who have emotional and behavioral problems and their families. The agency also forecasts, budgets, reimburses and monitors Comprehensive Services Act (CSA) funds that local governments purchase services for children and families. It directs and manages the collection of data on CSA funded children. OCS works collaboratively with its partners (state and local government agencies, service providers, and families) to increase the capacity of communities across the Commonwealth to successfully implement the CSA for At Risk Youth and Families. It ensures the decisions of the State Executive Council are implemented, working closely with the State and Local Advisory Team.

Also contained in this service area are TANF funds used to support CSA trust fund payments. The trust fund programs are focused either on community services to youth with emotional and/or behavioral problems or on early intervention services to at-risk children and their families. These trust funds are managed, administered and monitored by the Department of Social Services in consultation with the OCS.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$885,903	\$885,903	11.00	11.00
Transfer centrally funded amounts to agency budgets	\$69,149	\$69,149	0.00	0.00
Provide administrative funding for the Comprehensive Services Act	\$120,525	\$120,525	1.00	1.00
Total for Service Area	\$1,075,577	\$1,075,577	12 00	12 00

Objective: To improve the capacity of communities (i.e., Community Policy and Management Teams, Family Assessment and Planning Teams, and CSA Coordinators) to effectively implement the Comprehensive Services Act

The number by type of technical assistance activities provided to community stakeholder.

New measure, baseline data not available.

Specific target will be determined once baseline will be established using FY06 data.

Income Benefits

This service area funds the cash assistance payments made to no income and extremely low income families as part of one of the Commonwealth's key safety net programs, the Temporary Assistance for Needy Families (TANF) Program. To be eligible for the program, a family must include a dependent child and have income of approximately 25 percent or less of the poverty threshold, about \$7,000 per year for a family of three. Additionally, participants are required to work or participate in a work activity as a condition of their continued eligibility. No participant may receive more than 60 months of TANF cash assistance during her or his lifetime. The average payment is \$271 per month, and most families stay on cash assistance less than one year with more than half leaving assistance within 6 months.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$119,287,578	\$119,287,578	0.00	0.00
Address shortfalls in Temporary Assistance for Needy Families and mandated child care	(\$589,155)	(\$589,155)	0.00	0.00
Total for Service Area	\$118,698,423	\$118,698,423	0.00	0.00

Objective: To efficiently provide financial assistance to needy families with children

Measure Baseline(s)	Measure Targets(s)
	Measure Baseline(s)

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Total number of payments made by direct deposit.	New measure, baseline data not available. Baseline will be established using FY06 data.	Specific target will be determined once baseline is established.

Child Support Supplement

This service area funds the Child Support Supplement payments made to eligible individuals participating in one of the Commonwealth's safety net programs, the Temporary Assistance for Needy Families (TANF) program which provides cash assistance to extremely low and no income families. The 2003 session of the Virginia General Assembly directed the Department of Social Services to pay to TANF households a payment equal to the child support collected each month, less the first \$50. These payments, known as Child Support Supplements, are paid from TANF funds. Participants whose case meets the following conditions receive a child support supplement: 1) the non-custodial parent pays their current support obligation to the Division of Child Support Enforcement, as required by law and 2) the current support amount exceeds \$50. The child support supplement is distributed directly to participants via check or direct deposit.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$7,800,000	\$7,800,000	0.00	0.00
Total for Service Area	\$7,800,000	\$7,800,000	0.00	0.00

Objective: To provide to TANF recipients a supplemental payment up to the current support for a month paid to the Division of Child Support Enforcement (DCSE)

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
The percent of qualified participants that receive a child support supplement payment.	98%	99% for each fiscal year

TANF Employment Services

This service area is responsible for workforce services provided to current and former TANF program participants. This service plan includes the Virginia Initiative for Employment, not Welfare (VIEW) program which is a workforce program operated by local departments of social services which provides services to individuals receiving TANF cash assistance payments or who have recently exited the TANF program for employment. The goal of VIEW is to provide proven service approaches and strategies that help current and former TANF clients (including those with multiple barriers to becoming employed) prepare to enter, succeed and advance in the workplace. The VIEW program offers a wide range of workforce services including job readiness classes, job search assistance, education, training, community work experience placements (internships), and subsidized employment. VIEW also offers support services including child care, transportation, and the purchase of work related items such as uniforms. In any given month, more than one-third (14,500) of those receiving TANF cash assistance payments (32,000) are required to participate in VIEW as a condition of their continued receipt of assistance. The balance of the caseload is exempt for reasons of disability or pregnancy or are kinship care providers, typically grandparents raising grandchildren. The vast majority (97%) of individuals meet their work requirement by attaining unsubsidized employment, and Virginia ranks fourth in the nation in moving TANF participants into unsubsidized employment and has earned the maximum performance bonus (\$7.9 million) each year for the past three years.

In addition to VIEW, the Department contracts with public and private entities to provide job retention and wage advancement services to hard-to-serve TANF participants and those who have exited the TANF program. Services are procured through a competitive process and funding is contingent upon performance.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$57,216,681	\$57,216,681	0.00	0.00
Address shortfalls in Temporary Assistance for Needy Families and mandated child care	(\$1,631,799)	(\$1,631,799)	0.00	0.00
Total for Service Area	\$55,584,882	\$55,584,882	0.00	0.00

Objective: To assist low-income Virginians in obtaining employment by providing high quality workforce services to TANF participants

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Percentage of former TANF participants employed 6 months after program exit	New measure, baseline data not available. Baseline will be established using FY06 data.	Specific target will be determined once baseline is established.

Objective: Employment and career advancement of current and former Virginia Initiative for Employment, not Welfare (VIEW) participants

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)	
 The change in wages over time	New measure, baseline data not available.	Specific target will be determined once	
	Baseline will be established using FY06 data.	baseline is established.	

Non-TANF Employment Services

This service are is responsible for the implementation of the Food Stamp Employment and Training Program (FSET) which provides workforce services to individuals participating in the Commonwealth's largest nutrition assistance program, the Food Stamp Program. Workforce services provided by the FSET program include job readiness classes, job search assistance, education, training, and community work experience (internships). These services are offered to participants to assist them in attaining unsubsidized employment and attain or move toward self-sufficiency.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$2,064,925	\$2,064,925	0.00	0.00
Total for Service Area	\$2,064,925	\$2,064,925	0.00	0.00

Objective: To assist low-income Virginians in obtaining employment by provide high quality workforce services to Food Stamp participants

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Food Stamp participants receiving workforce services.	7,123	Increase the total number of participants 2 percent each year for fiscal years 2007-2008
Percent of individuals referred to the FSET program engaged in a workforce service	50%	Increase the percentage served by 3% each year for fiscal years 2007-2008
Attainment of employment	New measure, baseline data not available. Baseline will be established using FY06 data	Specific target will be determined once baseline is established.

TANF Day Care

To provide child care assistance to TANF families who are working or engaged in work activities. Transitional Child Care assistance is also provided to eligible post-TANF families who are working. Child care subsidies are provided through the local departments of social services.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$42,240,000	\$42,240,000	0.00	0.00
Address shortfalls in Temporary Assistance for Needy Families and mandated child care	\$12,021,492	\$14,734,566	0.00	0.00
Total for Service Area	\$54,261,492	\$56,974,566	0.00	0.00

Objective: Increase the number of eligible TANF children who receive child care assistance

_	Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
	TANF children who receive child care	28,217	1% increase per year
	subsidies		

Non-TANF Day Care

To provide child care assistance to non-TANF families who are working and at risk of becoming dependent on TANF. Child care subsidies are provided through the local departments of social services. Also to increase the quality of child care through funding for training and technical assistance to child care providers.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$100,284,467	\$100,284,467	22.00	22.00
Transfer centrally funded amounts to agency budgets	\$111,217	\$111,217	0.00	0.00
Total for Service Area	\$100,395,684	\$100,395,684	22.00	22.00

Objective: Increase the number of low-income families not associated with TANF who are served through child care assistance

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Non-TANF children who receive child care subsidies	35,158	1% increase for each fiscal year

Eligibility Determination for Benefit Programs

This service area funds the eligibility determination of Virginia's safety net programs, a service conducted by local departments of social services. The safety net programs include: the Commonwealth's largest nutrition assistance program, the Food Stamp Program; financial assistance programs including Auxiliary Grants, the Energy Assistance Program, the General Relief Program, and the Temporary Assistance for Needy Families Program (TANF); and the medical assistance programs (FAMIS, Medicaid, State and Local Hospitalization, and the low-income subsidy for the Medicare prescription drug plans). There are 120 local departments of social services at 150 physical locations throughout the Commonwealth. During a given year, local departments of social services process more than 660,000 new applications each year, re-certify another 420,000 cases, and perform ongoing case management activities for more than 800,000 cases during a given year. All told, approximately 1.6 million Virginians receive safety net benefits and services as a result of the eligibility and case management efforts of local departments of social services.

Safety net programs are counter-cyclical, and the recent rise in poverty (28% increase from 2000 to 2003) combined with effective outreach efforts for FAMIS and Food Stamps have led to a significant increase in the total number of applications and total number of enrollees. Funding for eligibility services does not track the demand for service, however. Despite dramatic caseload increases and new program responsibilities, funds for this service area which go directly to local departments of social services have not increased since 1989. According to the caseload standards set forth in an independent study by Horby Zellar and Associates, local departments of social services would need an additional 618 workers simply to meet minimal processing standards. This staffing shortage has implications for timeliness and accuracy of application processing.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$149,349,812	\$149,349,812	0.00	0.00
Transfer centrally funded amounts to agency budgets	\$3,405,942	\$3,405,942	0.00	0.00
Reflect increased child support enforcement revenue and the federal share of local salaries	\$4,113,537	\$4,113,537	0.00	0.00
Total for Service Area	\$156,869,291	\$156,869,291	0.00	0.00

Objective: Deliver timely and accurate eligibility determination services for safety net programs

 Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Accuracy of benefit calculations	93% of Food Stamp and Medicaid cases will be processed accurately.	94% of all benefits will be issued accurately in SFY 2007 and SFY 2008.
Timeliness of application Processing	97% compliance with federal standards	97% of all applications will be processed timely during SFY 07 and SFY 08

Social Worker Services

This service area funds units dedicated to adults, children and families: Adoptions, Adult Services, Child Protective Services, Domestic Violence, Newcomer Services and Foster Care/Family Preservation and Independent Living programs administered by the local departments of social services. The programs are designed to address those who are most in need. The 120 local departments of social service balance the role of providing effective intervention, when necessary, and emphasizing personal responsibility with ensuring the safety, stability and well being for the most vulnerable of our populations. The programs of the Department of Social Services are state supervised and locally administered. The division programs operated at the local level may include Adoptions, Adult Services, Adult Protective Services, Auxiliary Grants ,Child Abuse and Neglect Toll-Free Hotline, Child Protective Services, Domestic Violence, Foster Care, Independent Living for Foster Care Youth ,Safe and Stable Families

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$152,999,402	\$152,999,402	0.00	0.00
Transfer centrally funded amounts to agency budgets	\$3,974,613	\$3,974,613	0.00	0.00
Reflect increased child support enforcement revenue and the federal share of local salaries	\$2,890,628	\$2,890,628	0.00	0.00
Total for Service Area	\$159.864.643	\$159.864.643	0.00	0.00

Objective: Deliver timely and accurate policy guidance for services programs

Key Performance Measure(s) Measure Baseline(s) Measure Targets(s)

Monitoring local agency improvement related to the Program Improvement Plan (PIP)

New measure, baseline data not available. Baseline will be established using FY06 data.

Specific target will be determined once baseline is established.

Support Enforcement and Collection Services

Provides the administrative funds necessary to administer the child support enforcement program, in keeping with federal and state laws and regulations and in order to meet the five federally set program performance factors: 1. Support Obligations established; 2. Current Support collected; 3. Arrears Collected on arrears; 4. Paternities established; 5. Cost effectiveness.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$78,118,855	\$78,118,855	951.00	951.00
Transfer centrally funded amounts to agency budgets	\$3,931,840	\$3,931,840	0.00	0.00
Convert contractors to classified positions	(\$50,187)	(\$144,062)	8.00	8.00
Total for Sorvice Area	\$82,000,508	\$81 906 633	959.00	959.00

Objective: Promote self sufficiency by increasing Child Support collections

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Child support collections	SFY 2006 collections (projected): \$583.4 M	Increase child support collections 4%
		annually over each previous state fiscal year.

Public Assistance Child Support Payments

Provides the funds for extra payments to child support recipients also receiving TANF support. "Disregard Payments" are not child support as such. They were originally authorized in the federal program as an extra incentive to custodial parents for cooperation in locating non custodial parents and their assets. The federal government no longer authorizes such payments or provides financial help for them but Virginia and some other states have chosen to continue this.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$5,000,000	\$5,000,000	0.00	0.00
Total for Service Area	\$5,000,000	\$5,000,000	0.00	0.00

Objective: Promote self sufficiency by increasing Child Support collections

Key P	erformance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Ch	ild support collections	SFY 2006 collections (projected): \$583.4M	Increase child support collections 4% over previous state fiscal year.

Non-Public Assistance Child Support Payments

Provides the pass through accounting of funds collected for child support for non public assistance recipients. These funds are provided to the custodial parent within 48 hours of receipt at our central state disbursing unit.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$584,867,367	\$584,867,367	0.00	0.00
Reflect increased child support enforcement revenue and the federal share of local salaries	\$10,900,000	\$40,700,000	0.00	0.00
Total for Service Area	\$595,767,367	\$625,567,367	0.00	0.00

Objective: Promote self sufficiency by increasing Child Support collections

	Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
_	Child support collections	SFY 2006 collections (projected): \$583.4M	Increase child support collections 4% annually over each previous state fiscal year.

Auxiliary Grants for the Aged, Blind, and Disabled

An Auxiliary Grant (AG) is a supplement to income (i.e., cash assistance) for recipients of Supplemental Security Income (SSI) and certain other aged, blind, or disabled individuals residing in an assisted living facility (ALF) licensed by the Virginia Department of Social Services (VDSS) or in an adult foster care (AFC) home approved by a local department of social services. This assistance is available through local departments of social services to ensure that AG recipients are able to maintain a standard of living that meets a basic level of need. VDSS administers Virginia's AG program. An individual must be assessed by the local department of social services to determine 1) financial eligibility for an AG and 2) level of care needed. Local departments of social services make payments to eligible ALF residents in an amount equal to the approved rate for the ALF plus a personal care allowance per month, minus any income available to the individual from such sources as SSI. Not all ALFs accept AG payments. AG payments are comprised of two parts: a payment to the adult for reimbursing the facility for care and a personal needs allowance. The adult uses his or her SSI check and/or other income in addition to the AG payment to pay the facility. The SSI payment plus the AG payment together make up the approved ALF monthly rate.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$24,833,475	\$24,833,475	0.00	0.00
Total for Service Area	\$24.833.475	\$24.833.475	0.00	0.00

Objective: Increase awareness about Auxiliary Grant Program and availability of public pay beds in assisted living facilities and adult foster care homes

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)	
Number of utilized public pay beds in assisted living facilities and adult foster care homes.	New measure, baseline data not available. Baseline will be established using FY06 data.	Specific target will be determined once baseline is established.	
Objective: Improve access to person	al needs items for auxiliary grant recipie	nts	
Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)	

Adult Protective and Supportive Services

To protect the elderly and persons with disabilities in at-risk situations from abuse, neglect, and exploitation. Prevent abuse, neglect, and exploitation of these adults.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$11,584,495	\$11,584,495	0.00	0.00
Total for Service Area	\$11,584,495	\$11,584,495	0.00	0.00

Objective: Protect the elderly and persons with disabilities in at-risk situations from abuse, neglect, and exploitation

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Investigations reports are initiated in a timely manner.	New measure, baseline data not available. Baseline will be established using FY06 data.	Specific target will be determined once baseline is established.

Objective: Prevent abuse, neglect, and exploitation of the elderly and persons with disabilities

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Reduce the number of founded cases.	New measure, baseline data not available. Baseline will be established using FY06 data.	Specific target will be determined once baseline is established.

Domestic Violence Services

The Office of Family Violence works to provide crisis and support services to victims of domestic violence and their children across the state. Federal and state funds support direct services to families, the operation of the Virginia Family Violence and Sexual Assault Hotline, data collection, training and technical assistance.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$8,186,998	\$8,186,998	0.00	0.00
Total for Service Area	\$8.186.998	\$8.186.998	0.00	0.00

Objective: To fund and support local domestic violence programs for the provision of crisis and support services to victims and children statewide

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Percentage of domestic violence survivors who receive services are able to identify their safety plan.	70%	Increase 1% per year.
Percentage of funded programs that meet the certification standards of a domestic violence program	64%	Increase 12% per year

Objective: To collaborate with statewide organizations regarding domestic violence related services, training, the statewide domestic violence hotline and data collection

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
New cooperative agreements developed to address services provided to domestic violence victims.	0 (No recent agreements have been signed)	5 cooperative agreements initiated or updated each year.
Local, regional, state trainings conducted in collaboration with VDSS related to domestic violence.	New measure, baseline data not available. Baseline will be established using FY06 data.	Specific target will be determined once baseline is established. (Projected to be: Increase 1% each year)

Foster Care

The Foster Care Program includes three service components united under one program umbrella: Foster Care Prevention and Family Preservation and Support Services; Foster Care Services and Independent Living Services. The focus of Foster Care Prevention, Preservation and Support Services is to provide services and interventions to maintain and strengthen the family unit while ensuring the safety of the child. Foster Care Prevention cases are those in which intervention is needed to prevent out-of-home and/or out-ofcommunity placement of a child. Family Preservation and Support Services are flexible locality coordinated community-based programs that provide services to help children and families that are in crisis who need short-term support. Services may include "hard services" such as counseling and in-home services or "soft services" such as child care and material assistance. Services can be to reunify a child in foster care with the natural parent and adoption promotion and family preservation services can also be provided.

Foster Care services provide a temporary living solution for children who must be removed from their birth or adoptive parents or other legal caretakers due to abuse and neglect. Foster care is also a vehicle through which services to children who have not been abused or neglected but require placement outside their birth/adoptive home due to chronic mental health problems, delinquency or the caretakers inability to provide for the child's' needs are provided. Foster care's mandate is to find a permanent home for a child in as timely a manner as possible. Permanent placements include: return to parent or previous legal custodian; placement with relatives with subsequent transfer of custody; adoption, permanent foster care; independent living or another planned permanent living arrangement. Foster care placement and services are available throughout the 120 local departments of social services.

The purpose of the Chafee Foster Care Independence Program (CFCIP), also referred to as the Independent Living Program, is to design and implement programs that will identify children who are likely to remain in foster care until 18 years of age and provide services to help these children make the transition to self-sufficiency. Services include, but are not limited to, high school assistance, post -secondary/vocational assistance, life skills training, health education, career exploration and planning, job readiness training, housing assistance, and mentoring. In addition, young people who left foster care after they turned 18 years old but have not attained age 21, can receive aftercare services, including counseling, employment, education and room and board. As required by CFCIP, youth must participate directly in developing their program activities and accept personal responsibility for achieving independence.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$92,495,105	\$92,495,105	3.00	3.00
Total for Service Area	\$92,495,105	\$92,495,105	3.00	3.00

Objective: To improve the accuracy of Title IV-E eligibility determinations/re-determinations and Title IV-E payments for children in foster care

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Cases that pass the federal requirement for Title IV-E	New measure, baseline data not available. Baseline will be established using FY06 data.	Specific target will be determined once baseline is established.

Objective: To reduce the number of foster care placements				
Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)		
The number of children that remain in two or less foster care placements.	New measure, baseline data not available. Baseline will be established using FY06 data.	Specific target will be determined once baseline is established. (Projected to be: Increase the number of foster children that experience two or less placements during their first twelve months in foster care by 1% per year)		

Child Protection Services

To provide a specialized continuum of casework services to children who have been or are at risk of being abused, neglected or exploited, and to their families. Services focus on identification, investigation, assessment, and service provision in an effort to protect children from maltreatment, while preserving families, whenever possible. Protective services are available to all children, under the age of 18, and to their families on a 24-hour a day, on an immediate response basis. All children and families are eligible for these services regardless of income. Child Protective Services also includes preventive services that enable families to provide adequate care for children, thereby enhancing the safety and well being of children and precluding the need for removal of the child from the home. In an effort to prevent abuse and neglect in out of family settings, such as day care centers, residential facilities, and schools, the Child Protective Services Central Registry Unit conducts background checks of prospective employees and voluteers,

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$9,929,381	\$9,929,381	10.00	10.00
Increase funding for Healthy Families of Virginia	\$507,959	\$507,959	0.00	0.00
Total for Service Area	\$10,437,340	\$10,437,340	10.00	10.00

Objective: Achieve safety and well being for children and families at risk of child abuse and neglect

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)	
Response time reports of child abuse and neglect.	New measure, baseline data not available. Baseline will be established using FY06 data.	Specific target will be determined once baseline is established.	
Objective: Prevent child abuse and n			

3.8 per 1,000 children

Decrease by .8% the number of children

with founded abuse or neglect by 2008.

Adoption

Decrease the rate of child abuse and neglect in the population.

To help children in foster care who have been permanently and legally separated from their birth parents become permanent members of a new family. To provide services to strengthen adoptive families after legal adoption to prevent adoption dissolutions. To help families complete non-agency placements adoptions including parental placement adoptions, step parent adoptions, inter country adoptions, adult adoptions, and children adopted through private, child placing agencies. To maintain closed adoption records and release information from closed adoption records, as allowed by state laws. To assist the courts in making informed decisions in custody disputes involving minor children.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$52,053,483	\$52,053,483	0.00	0.00
Fund increasing caseload and expenditures in the adoption subsidy program	\$10,694,731	\$14,934,423	0.00	0.00
Total for Service Area	\$62 748 214	\$66 987 906	0.00	0.00

Objective: Achieve a safe, permanent family for children in foster care who have the goal of adoption

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
The number of children who are adopted from the foster care system.	New measure, baseline data not available. Baseline will be established using FY06 data.	Specific target will be determined once baseline is established. (Projected to be Increase each fiscal year the number of children exiting foster care to adoption by 3%)

Objective: To increase the percentage of children who are adopted within 24 months of entering foster care

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
The percentage of children exiting foster care to adoption within 24 months of their entry into foster care.	21.08 percent in FY 2005	Increase the percentage of children exiting foster care to adoption within 24 months of their entry into foster care by 3 percent each fiscal year.

Objective: Strengthen adoptive families to prevent adoption dissolutions

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
The number of families that received post legal adoption services	New measure, baseline data not available. Baseline will be established using FY06 data.	Specific target will be determined once baseline is established. (Projected to be: Decrease by 5 percent the number of adopted children that re-enter foster care as a result of an adoption dissolution)

Other Child Welfare Services

Other Child Welfare Services are those services which for various reasons, such as funding, administrative oversight, and/or target population do not align directly with one of the three major child welfare services activities Foster Care, Child Protective Services, and Adoptions. The major characteristic distinguishing this activity from the CWS activities is that the CSA Trust Fund was created to be state-wide. Its funds a limited number of innovative pilot projects with the preventive goal of maintaining children in their homes in the 11 recipient communities.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$965,579	\$965,579	0.00	0.00
Total for Service Area	\$965,579	\$965,579	0.00	0.00

Objective: In the pilot localities, to promote safe and stable living situations for children and families to prevent out-of-home placements

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Number of children who received prevention services and then enter foster care will not exceed 5% in the pilot communities.	New measure, baseline data not available. Baseline will be established using FY06 data.	Specific target will be determined once baseline is established.

General Relief

This service area is responsible for the cash assistance and services offered to no income and extremely low-income individuals served through the Commonwealth's General Relief Program (GR). GR is an important component of the Commonwealth's social safety net as it serves single individuals and families excluded from participation in the Temporary Assistance for Needy Families (TANF) program and often not qualified for Medicaid. GR is funded by state and local funds and participation is optional for localities. Participating localities choose among various program components including assistance for medical or dental services, burial assistance and financial assistance to unattached children. GR is financed through State (62.5%) and local (37.5%) funding, and each locality determines how local funds will be used for components they elect to provide to individuals. Agencies may use 100% local funds to meet additional needs. Of the 120 local departments of social services, 103 operate one or more components of the GR program.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$4,611,421	\$4,611,421	0.00	0.00
Total for Service Area	\$4.611.421	\$4.611.421	0.00	0.00

Objective: Improve and increase access to General Relief (GR) services

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Individuals receiving General Relief who become enrolled in Supplemental Security Income	New measure, baseline data not available. Baseline will be established using FY06 data.	Specific target will be determined once baseline is established.

Resettlement Assistance

To promote refugee resettlement that leads to the earliest possible durable, economic self-sufficiency and social integration of refugees into Virginia's communities. This service area is funded by 100% federal dollars. The funding is directed toward job placement and job related services. Refugee resettlement service provider agencies are contracted by the Virginia Office of Newcomer Services (ONS) to provide these services directly to refugees.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$7,922,000	\$7,922,000	0.00	0.00
Total for Service Area	\$7,922,000	\$7,922,000	0.00	0.00

Objective: Place employable refugees in jobs at the earliest possible date

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Newly arrived refugees are employed after 90 days.	The Virginia refugee employment rate enrolled after 90 days is currently 80%.	Increase the refugee employment retention rate by 2% annually.

Emergency and Energy Assistance

The Emergency and Energy Assistance program service area is a core component of the Commonwealth's safety net for low-income and at-risk Virginians. This service area is responsible for the operation of the Energy Assistance Program (EAP) and the Other Needs Assistance Program (ONA). The Energy Assistance program helps low-income individuals and families meet their immediate and often emergent home energy needs. The program is 100 percent funded from the federal Low Income Home Energy Assistance Program (LIHEAP) block grant and serves less than half the total number of eligible households in Virginia. Among those households served, the benefit amount typically covers 25 percent of the household's energy costs for that season. With fixed resources, the greater the number of households served, the lower the percentage of overall energy costs the program can cover. The EAP consists of four components: Fuel Assistance, Crisis Assistance, Cooling Assistance and Weatherization Assistance. Fuel Assistance provides benefits to aid households in paying the cost of heating their homes. Crisis Assistance helps households address energy-related emergencies. Cooling Assistance supports households in purchasing or repairing cooling equipment and the payment of electric bills during the summer months. Local departments of social services perform the eligibility determination for the EAP and payments are made directly to vendors in most cases.

The Weatherization Assistance Program provides weatherization services to low-income families and is administered by the Department of Housing and Community Development (DHCD) through contracts with local community-based organizations. By state statute, DHCD receives 15 percent of the LIHEAP block grant to implement this program.

The Other Needs Assistance Program (ONA), executed by federal disaster declaration, provides financial assistance to eligible disaster victims to meet necessary and serious needs such as medical/dental, funeral, transportation, and personal property expenses; miscellaneous post-disaster purchases; and group flood insurance premiums. The ONA program is 75 percent federally funded and jointly administered by the Virginia Department of Social Services and the Department of Homeland Security's Federal Emergency Management Agency (FEMA). Payments to eligibility ONA applicants are written by the Commonwealth. The program is administered on a disaster by disaster basis, and no appropriation is included in the state budget.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$35,500,000	\$35,500,000	0.00	0.00
Total for Service Area	\$35,500,000	\$35,500,000	0.00	0.00

Objective: Improve access to the Energy Assistance Program

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
The total households pre-approved for the Fuel Assistance Program	14,207	2 percent in each fiscal year 2007 through 2008
The total households served for Energy Assistance Programs	143,979	2 percent in each fiscal year 2007 through 2008

Community Action Grants

This service area provides core funding for Virginia's network of community action agencies and statewide community action organizations. This network provides a wide variety of services designed to ameliorate the effects of poverty and build self sufficient families and communities. The Department contractually distributes all of these funds to the local community action agencies and statewide organizations. This service area also includes \$637,500 in federal TANF funds for five Center for Employment Training (CET) programs.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$18,554,282	\$18,554,282	0.00	0.00
Provide funding for community action agencies	\$514,786	\$514,786	0.00	0.00
Total for Service Area	\$19,069,068	\$19,069,068	0.00	0.00

Objective: Provide services to low-income individuals, families and communities designed to ameliorate the effects of poverty and support self-sufficiency and independence

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Individuals served by Community Action Agencies	New measure, baseline data not available. Baseline will be established using FY06 data.	Specific target will be determined once baseline is established. (Projected to be: 120,000)
Total non-Community Services Block Grant (CSBG) resources generated by community action agencies	New measure, baseline data not available. Baseline will be established using FY06 data.	Specific target will be determined once baseline is established. (Projected to be: \$120,000,000 in total non-CSBG resources.)

Volunteer Services

The Virginia Commission for National and Community Service (Virginia Commission) advances and supports national and community service, volunteerism and civic engagement in the Commonwealth of Virginia. The Virginia Commission exists to promote and sustain a holistic, cohesive, collaborative statewide system of volunteer service that will be available to all Virginians. The Virginia Commission carries out additional responsibilities outlined in Executive Order 68 (2004): Continuing the Governor's Commission on National and Community Service and is a major partner with the Governor's Virginia Corps Initiative.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$1,866,340	\$1,866,340	0.00	0.00
Total for Service Area	\$1,866,340	\$1,866,340	0.00	0.00

Objective: Create networks to better coordinate and support service efforts in the State

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Regional outcome plans that support coordination among volunteer and national service programs.	New measure, baseline data not available. Baseline will be established using FY06 data.	Specific target will be determined once baseline is established. (Projected to be: 100% of the regions identified will produce regional outcome plans)

Other Payments to Human Services Organizations

This service area funds four contracts with different entities to support the mission of the Department and provide important services to low-income Virginians across the Commonwealth. The services provided through these contracts include emergency food services, nutrition education, homeless prevention and shelter support services, post-secondary educational services for TANF participants, and an asset creation initiative for low-income individuals.

The specific contracts and their annual appropriation are as follows: Virginia Tech (\$9.6 million) to fund nutrition education services delivered by the Cooperative Extension to Food Stamp participants; United Community Ministries (\$38,250) to fund emergency food services and information and referral services; St. Paul's College (\$85,000) for post-secondary education services for TANF participants; the Department of Housing and Community Development (\$360,000) to fund community organizations to operate the Virginia Individual Development Account program which matches savings of low-income families to promote asset creation; the Department of Housing and Community Development (\$4,910,128) to fund homeless shelters for the provision of homeless prevention and shelter services. By law, the programs funded by these contracts must serve low-income Virginians. The TANF block grant can only fund services to low-income families and the nutrition education program can only serve Food Stamp participants who must have a net income of 130% of poverty or below.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$10,160,878	\$10,160,878	0.00	0.00
Establish Early Childhood Foundation	\$4,800,000	\$3,800,000	0.00	0.00
Total for Service Area	\$14,960,878	\$13,960,878	0.00	0.00

Objective: Improve the nutrition choices among Virginia's low-income families

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Total number of individuals completing nutrition education courses.	New measure, baseline data not available. Baseline will be established using FY06 data.	Specific target will be determined once baseline is established.

Regulation of Adult and Child Welfare Facilities

The Division of Licensing Programs (DOLP) regulates thirteen types of non-medical day and residential care settings for vulnerable children and adults, including adoption and foster care agencies. As of June 1, 2005, there were 7,492 regulated settings with a total capacity of 386,423. This number, all vulnerable consumers in terms of age and/or health status, exceeds the population of every city in Virginia except Virginia Beach. The Division's workload comprises child day care facilities (89%), adult care (9%) and child residential care (2%). Provided services include mandated inspections, investigations of complaints and allegations and provider/community education related to licensing processes.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$12,599,110	\$12,599,110	160.00	160.00
Transfer centrally funded amounts to agency budgets	\$666,906	\$666,906	0.00	0.00
Remove one-time funding	(\$250,000)	(\$250,000)	0.00	0.00
Total for Service Area	\$13,016,016	\$13,016,016	160.00	160.00

Objective: Safety of children and adults

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Number of mandated inspections conducted	New measure, baseline data not available. Baseline will be established using FY06 data. (Projected mandated visits in FY 06 = 96%)	100% of mandated inspections will be conducted in FY 07

Interdepartmental Licensure and Certification

To effectively implement their joint responsibility for regulating children's residential facilities, the Departments of Education; Juvenile Justice; Mental Health, Mental Retardation and Substance Abuse Services; and Social Services have agreed to cooperatively regulate most children's residential facilities located in Virginia. This joint effort is intended to promote quality residential care through an effective and efficient interdepartmental regulatory program. The Office of Interdepartmental Regulation coordinates the 4 departments' regulatory efforts to assure that children placed in residential facilities receive adequate care, treatment and education.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$440,274	\$440,274	2.00	2.00
Transfer centrally funded amounts to agency budgets	\$8,326	\$8,326	0.00	0.00
Total for Service Area	\$448,600	\$448,600	2.00	2.00

Objective: Ensure that the Departments of Education; Juvenile Justice; Mental Health, Mental Retardation and Substance Abuse Services; and Social Services provide a coordinated regulatory approach to children's residential facilities

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Number of training sessions for regulators and providers.	Five training sessions biannually.	Five training sessions biannually.

Administrative and Support Services

Administrative and Support Services units provide the organizational infrastructure which allow the operational units to function. Most services are generic to agencies including management oversight, budgeting, accounting, human resources management, planning, legislative liaison, procurement and general services, public affairs, and internal audit. In addition to these services, four functions peculiar to social services, Appeals and Fair Hearings, Electronic Benefits Transfers to Food Stamp recipients, Fraud Reduction Management and Quality Monitoring are also provided.

As part of the Department's Strategic Plan, Goal #3, a Business Process Re-engineering (BPR) project was undertaken as the precursor to implementing any new or increased automated solutions. BPR was necessary to determine the need for changes to the business processes employed by the state and local departments as part of the Virginia Social Services System (VSSS). The BPR project has produced a "to be" model of how the VSSS should look and operate in the future. The "to be" model impacts all of the primary programmatic and support functions of the Department.

The "to be" model includes the flexibility for clients to access services through several methods that are not currently available, such as through the internet or through the auspices of a community partner outside of local departments. This flexibility will require development of a data-gathering tool that shares information with program experts and partners, the establishment of cross-disciplinary teams to serve household needs, and more formal agreements and development of partnerships at the state and local levels. Before any changes are put into place, a business modeling laboratory to test and prove the value of these changes will be established. Changes in organizational structure, policy, process and procedures are necessary to implement the new "to be" model.

The first step in implementing changes is the development of a Change Management Plan that choreographs the implementation of incremental changes to support the new model. The structure through which changes are implemented is a Change Management Office (CMO). The CMO provides the organizational structure to manage the step-by-step process of overall change.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$26,687,823	\$26,687,823	222.00	222.00
Transfer centrally funded amounts to agency budgets	\$1,132,447	\$1,132,447	0.00	0.00
Adjust funding for agency expenditures related to cost of basic operations	\$1,706,916	\$1,708,816	0.00	0.00
Total for Service Area	\$29,527,186	\$29,529,086	222.00	222.00

Objective: To ensure that resources are used efficiently and programs are managed effectively, and in a manner consistent with applicable state and federal requirements

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Percent of Governor's Management scorecard categories marked as meets	60%	100%
expectations for the agency.		

Information Technology Services

The Division of Information Systems develops program specific information systems in support of the Department's business and support units. The Division maintains system specific computer operations, local agency and home office customer support, application related network services, application specific database management, business intelligence, software quality assurance, and system and application security.

The Division works with Department's business units to manage IT resources using the Information Technology Investment Management (ITIM) methodology. This set of best practices operates through business led steering committees and a Department Investment Board. This structure assures that IT dollars are spent in alignment with business defined strategic goals and objectives.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$40,192,088	\$40,192,088	82.50	82.50
Transfer centrally funded amounts to agency budgets	\$531,864	\$531,864	0.00	0.00
Fund increased cost of eligibility determination	\$4,796,840	\$7,829,953	0.00	0.00
Convert contractors to classified positions	(\$228,631)	(\$519,614)	48.00	48.00
Total for Service Area	\$45 292 161	\$48 034 291	130 50	130 50

Objective: Enhance web infrastructure to improve service to VSSS IT customers

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Standardize the 14 existing Web Applications	Current Web Infrastructure	Web Infrastructure Enhancement completed by September 2006

Virginia Board for People with Disabilities

Mission Statement

The Virginia Board for People with Disabilities' mission is to enrich the lives of Virginians with disabilities by providing a voice for their concerns--Vision of communities that welcome people with disabilities--Outreach to individuals, families, and advocates--Innovation through grant projects and sponsored programs--Collaboration with providers of disability services--Education of policymakers on disability issues.

Agency Goals:

- Strengthen the role of the Board as a policy leader and advisor to the Governor, Secretary of HHR, General Assembly and executive branch agencies on issues affecting persons with developmental and other disabilities in the Commonwealth.
- Promote independence, choice, productivity, self determination, employment, and community integration of persons with developmental and other disabilities through advocacy, capacity building and systems change activities.
- Provide an ongoing, reliable mechanism to evaluate, report on, and make recommendations regarding the effectiveness of the service delivery system in meeting the current and future needs of persons with developmental and other disabilities.
- Provide education/ leadership training opportunities to ensure that people with DD and their families are included in the policy decisions related to the services and supports that affect quality of life and full community participation.

Customers Served:

- All Virginians (Served based on 2004 VBPD Program performance report; Potential based on 2000 U.S. Census figures and derivatives as reported in 2005 VBPD interim Biennial Report.
- Virginians with Disabilities (Served based on 2004 VBPD Program performance report; Potential based on 2000 U.S. Census figures and derivatives as reported in 2005 VBPD interim Biennial Report.
- Virginians with Developmental Disabilities (Served based on minimum 75% requirement that persons served through Board grant activities have a developmental disability--range from 75-100%; Potential based on 2000 U.S. Census figures and derivatives.
- Governor and Executive Branch Agencies
- Federal Administration on Developmental Disabilities and Other DD Councils
- General Assembly Members
- Consumer and Advocacy Organizations (based on VBPD Contact list)
- State, Regional, and local service providers/agencies (based on VBPD contact list)

Agency Budget Summary

	General Fund	Nongeneral Fund	TOTAL	Personnel Costs	Other Costs	Positions
OPERATING BUDGET 1	HISTORY:					
FY 2003	\$128,154	\$1,537,827	\$1,665,981	\$475,809	\$1,190,172	8.00
FY 2004	\$118,575	\$1,537,827	\$1,656,402	\$470,576	\$1,185,826	8.00
FY 2005	\$127,039	\$1,553,995	\$1,681,034	\$532,857	\$1,148,177	9.00
FY 2006	\$127,952	\$1,644,735	\$1,772,687	\$581,033	\$1,191,654	10.00
NEW OPERATING BUD	GET SUMMARY	Y:				
FY 2007 Base Budget	\$127,952	\$1,644,735	\$1,772,687	\$581,033	\$1,191,654	10.00
FY 2007 Addenda	\$9,436	\$41,553	\$50,989	\$150,302	(\$99,313)	0.00
FY 2007 TOTAL	\$137,388	\$1,686,288	\$1,823,676	\$731,335	\$1,092,341	10.00
FY 2008 Base Budget	\$127,952	\$1,644,735	\$1,772,687	\$581,033	\$1,191,654	10.00
FY 2008 Addenda	\$9,029	\$41,553	\$50,582	\$150,302	(\$99,720)	0.00
FY 2008 TOTAL	\$136,981	\$1,686,288	\$1,823,269	\$731,335	\$1,091,934	10.00

Agency Summary of Recommended Operating Budget Addenda

► Transfer centrally funded amounts to agency budgets

Adjusts the agency budget to reflect amounts moved from Central Appropriations to cover the cost of items such as the continuation of 2005 and 2006 salary and health insurance premium increases, and changes in retirement and disability contribution rates. For each year, \$5,465 (GF) and \$41,553 (NGF).

▶ Adjust funding for agency expenditures related to cost of basic operations

Adjusts funding for changes in operating costs related to central agency services and various charges. These include rental charges at the seat of government, procurement fees, property insurance premiums, and workers compensation insurance premiums. It also includes adjustments for changes in project management and security provided by the Virginia Information Technologies Agency and the transformation to service-based billing for technology services other than hardware and software. For 2007, \$3,971 (GF). For 2008, \$3,564 (GF).

Agency Service Areas:

Research, Planning, Outreach, Advocacy, and Systems Improvement

This service area implements the principles of the federal Developmental Disabilities and Bill of Rights Act of 2000 and Section 51.5-33 of the Virginians with Disabilities Act which establishes the Virginia Board for People with Disabilities as the Commonwealth's Developmental Disabilities Planning Council. Activities include outreach, training, technical assistance, supporting and educating communities, barrier elimination, system redesign, coalition development, citizen participation, and informing and guiding policymakers.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$780,862	\$780,862	6.00	6.00
Transfer centrally funded amounts to agency budgets	(\$130,865)	(\$130,865)	0.00	0.00
Total for Service Area	\$649 997	\$649 997	6.00	6.00

Objective: Increase active engagement in advocacy and system improvement activities by graduates of the Board's Partners in Policymaking Program.

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Rate of participation in advocacy activities 12 months post graduation.	This is a new measure for which there is no baseline. Previous measures reflected participant satisfaction rates with the training. Baseline data will be collected for the FY 05 graduating class in May 06 (one year past graduation).	By FY 2008, the percent of Partners graduates who participate in post-graduation advocacy activities will increase by 10% from initial 2006 baseline.

Objective: Ensure that constituents receive timely and relevant information regarding disability services, issues and events and Board activities and priorities.

Key Performance N	leasure(s)	Measure Baseline(s)	Measure Targets(s)
Rate of Constituen	t Feedback	This is a new measure for which no baseline exists. Baseline data will be established using FY 06 data.	Increase by 5% each year, beginning in FY 07, the number of respondents who provide feedback on the timeliness and relevance of Board distributed communication materials.

Administrative Services

The administrative and operational support required to implement programmatic and policy related activities under the federal Developmental Disabilities and Bill of Rights Act of 2000 and Section 51.5-33 of the Virginians with Disabilities Act which establishes the Virginia Board for People with Disabilities as the Commonwealth's Developmental Disabilities Planning Council. This service area provides support to the agency's research, planning, outreach, advocacy, systems improvement and grant activities. Support includes the general administration and management of information technology services in compliance with federal and state laws and regulations.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$533,005	\$533,005	4.00	4.00
Transfer centrally funded amounts to agency budgets	\$177,883	\$177,883	0.00	0.00
Adjust funding for agency expenditures related to cost of basic operations	\$3,971	\$3,564	0.00	0.00
Total for Service Area	\$714,859	\$714,452	4.00	4.00

Objective: Advance the achievement of Board programmatic and policy outcomes by integrating state of the art technology in hardware, software, and telecommunications.

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
VITA Commonwealth Agency Technology Strategic Planning Application (CATSPA)	VBPD with DSA partners have complied 100% with VITA required deadlines.	100% compliance with required VITA deadlines.
Maintenance	·	

Financial Assistance to Localities for Individual and Family Services

This service area implements the principles of the federal Developmental Disabilities and Bill of Rights Act of 2000 and Section 51.5-33 of the Virginians with Disabilities Act which establishes the Virginia Board for People with Disabilities as the Commonwealth's Developmental Disabilities Planning Council. Activities include funding of grant projects which include demonstration of new approaches, services and supports, training, coalition development, and outreach and education designed to result in development of a coordinated consumer and family centered, consumer and family directed, comprehensive system of services, individualized supports, and other forms of assistance that enable individuals with developmental disabilities to exercise self-determination, be independent, be productive, and be integrated and included in all facets of community life.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$458,820	\$458,820	0.00	0.00
Total for Service Area	\$458,820	\$458.820	0.00	0.00

Objective: Advance systems change by providing grant funding for new and creative statewide and community

programs, services and supports for persons with developmental and other disabilities.

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Percent of Project Objectives achieved	90%. Although the measure was slightly different, an achievement rate of 90% was reported throughout the FY 03 fiscal year in Executive Agreement reports.	95% of planned objectives achieved at the conclusion of the grant period.

Department For The Blind And Vision Impaired

Mission Statement

The mission of the Department for the Blind and Vision Impaired (DBVI) is to empower individuals who are blind, vision impaired or deafblind to achieve their maximum levels of employment, education, and personal independence.

Agency Goals:

- Enhance the economic advancement and independence of blind job seekers through competitive employment.
- Enhance the independence, well-being, and personal responsibility of blind and vision impaired citizens.
- Promote educational success of blind and vision impaired citizens.
- Provide for effective performance of DBVI personnel to ensure sound business practices and agency operations .

Customers Served:

- Retail customers who purchase VIB and vending stand products
- Blind Vendors licensed through the Randolph Sheppard Program
- Blind or deafblind people who want to work and live independently
- Infants, children and youth who are blind, vision impaired or deafblind, their families and teachers
- Blind vision impaired or deafblind adults who want to live independently and their families
- Workforce/Employees of the Agency

Agency Budget Summary

	General Fund	Nongeneral Fund	TOTAL	Personnel Costs	Other Costs	Positions		
OPERATING BUDGET HISTORY:								
FY 2003	\$6,186,854	\$20,800,580	\$26,987,434	\$11,849,087	\$15,138,347	163.00		
FY 2004	\$5,757,718	\$21,800,580	\$27,558,298	\$10,962,368	\$16,595,930	163.00		
FY 2005	\$5,975,570	\$29,434,238	\$35,409,808	\$12,657,492	\$22,752,316	163.00		
FY 2006	\$6,025,484	\$29,957,127	\$35,982,611	\$12,680,381	\$23,302,230	163.00		
NEW OPERATING BUD	OGET SUMMARY	γ :						
FY 2007 Base Budget	\$6,025,484	\$29,957,127	\$35,982,611	\$12,696,123	\$23,286,488	163.00		
FY 2007 Addenda	\$317,827	\$693,101	\$1,010,928	\$844,797	\$166,131	0.00		
FY 2007 TOTAL	\$6,343,311	\$30,650,228	\$36,993,539	\$13,540,920	\$23,452,619	163.00		
FY 2008 Base Budget	\$6,025,484	\$29,957,127	\$35,982,611	\$12,696,123	\$23,286,488	163.00		
FY 2008 Addenda	\$320,656	\$693,101	\$1,013,757	\$844,797	\$168,960	0.00		
FY 2008 TOTAL	\$6,346,140	\$30,650,228	\$36,996,368	\$13,540,920	\$23,455,448	163.00		
CAPITAL OUTLAY BUDGET SUMMARY:								
FY 2007 Capital	\$3,972,000	\$0	\$3,972,000	\$0	\$3,972,000	0.00		
FY 2008 Capital	\$0	\$0	\$0	\$0	\$0	0.00		

Agency Summary of Recommended Operating Budget Addenda

► Transfer centrally funded amounts to agency budgets

Adjusts the agency budget to reflect amounts moved from Central Appropriations to cover the cost of items such as the continuation of 2005 and 2006 salary and health insurance premium increases, and changes in retirement and disability contribution rates. For each year, \$308,199 (GF) and \$693,101 (NGF).

► Transfer appropriation for Newsline from the Financial Assistance for Special Education Instruction program to the Statewide Library Services program

Transfers appropriation from the Financial Assistance for Special Education Instruction program to the Statewide Library Services program to allow expenses for Newsline to be administered from the appropriate program. (Net zero adjustment)

► Transfer federal funds from Vocational Rehabilitation Services to Information Technology Services

Transfers federal funds from Vocational Rehabilitation Services to Information Technology Services to address a position that has no personal service funds allotted. (Net zero adjustment)

► Transfer positions from General Management and Direction services to Vending Stands, Cafeterias, and Snack Bars services

Transfers positions from General Management and Direction services to Vending Stands, Cafeterias, and Snack Bars services to address operational needs. (Net zero adjustment)

▶ Adjust funding for agency expenditures related to cost of basic operations

Adjusts funding for changes in operating costs related to central agency services and various charges. These include procurement fees, property insurance premiums, and workers compensation insurance premiums. It also includes adjustments for changes in project management and security provided by the Virginia Information Technologies Agency and the transformation to service-based billing for technology services other than hardware and software. For 2007, \$9,628 (GF). For 2008, \$12,457 (GF).

Agency Summary of Recommended Capital Outlay Addenda

► Renovate Virginia Industries for the Blind, Richmond Plant, Phase II

Provides funds to renovate Virginia Industries for the Blind's Richmond Plant to address operating system failures. This project was partially funded by the last General Assembly for correction of environmental hazards and life safety code issues with the building, however, if these funded issues are corrected, the building will not be able to operate because part of the other old operating systems will be shut down to satisfy the corrections. For the biennium, \$4.0 million (GF).

Agency Service Areas:

General Library Services

Through our statewide library services, blind and physically disabled Virginians have access to books, materials and information in accessible formats. Access to information develops independent and informed citizens, who can participate in and make decisions about their communities and government.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$776,864	\$776,864	12.00	12.00
Transfer centrally funded amounts to agency budgets	\$430	\$430	0.00	0.00
Transfer appropriation for Newsline from the Financial Assistance for Special Education Instruction program to the Statewide Library Services program	\$50,000	\$50,000	0.00	0.00
Total for Service Area	\$827,294	\$827,294	12.00	12.00

Objective: To increase the number of people who utilize library services.

 Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Number of customers served	4,094 registered users on 7/01/05.	Increase customers by 2.5% each year to 4,196 by 6/30/06 and 4,300 by 6/30/07.

Braille and Large-Print Textbook Services

Education Services operates a resource center which houses an inventory of textbooks that are loaned to local school divisions throughout Virginia for use by blind and visually impaired infants, children and youth. The Resource Center provides braille and large print textbooks and novels for use by blind and vision impaired students in their local school districts. Textbooks are produced in the appropriate medium, braille or large print, or are purchased from another state and are loaned for the school year. Local school divisions are charged replacement costs for textbooks they do not return for use by other students. Supplemental educational materials, resource and reference materials may also be transcribed into braille or reproduced in large print; these materials are loaned to Virginia's blind and visually impaired students and educators for as long as they are needed. Textbooks are returned to the central inventory when no longer needed and are loaned to another student or teacher.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$429,470	\$429,470	6.00	6.00
Transfer centrally funded amounts to agency budgets	\$21,832	\$21,832	0.00	0.00
Total for Service Area	\$451,302	\$451,302	6.00	6.00

Objective: To deliver textbooks on time.

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Percentage of textbook orders received by 6/1 that are delivered by 9/1.	New measure. Baseline data collection began in FY 06.	Target will be established upon completion of FY 06 baseline data collection.

Educational Services

Education Services assists children who are blind, visually impaired or deafblind in becoming independent, contributing members of society.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$1,131,819	\$1,131,819	6.00	6.00
Transfer centrally funded amounts to agency budgets	\$18,313	\$18,313	0.00	0.00
Transfer appropriation for Newsline from the Financial Assistance for Special Education Instruction program to the Statewide Library Services program	(\$50,000)	(\$50,000)	0.00	0.00
Total for Service Area	\$1,100,132	\$1,100,132	6.00	6.00

Objective: To partner with families, infant service providers, school division staff, and other DBVI staff

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Number of infants, children and youth served annually	2,016 June 2005	Remain level or moderately increase.

Low Vision Services

Low Vision Services provides technical assistance, low vision examinations, optical aids, consultation, and training to Virginians with impaired vision, agency staff, contracted examiners and teachers of the visually handicapped located in local school divisions.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$306,010	\$306,010	2.00	2.00
Transfer centrally funded amounts to agency budgets	\$16,830	\$16,830	0.00	0.00
Total for Service Area	\$322.840	\$322 840	2.00	2.00

Objective: Provide customers with optical aids to allow them to best utilize their remaining vision

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Percentage of Customers who benefit from	New measure. Baseline data collection	Target will be established upon completion
Low Vision Services.	began in FY 06.	of FY 06 baseline data collection.

Vocational Rehabilitation Services

Vocational Rehabilitation Services assist eligible blind, visually impaired, and deafblind adult and transition aged customers in obtaining or maintaining competitive employment. An Individualized Employment Plan (IPE) identifying a specific vocational goal is developed by the customer and vocational rehabilitation counselor and outlines various activities leading to employment. Based on the unique needs of

each customer, services may include but are not limited to vocational guidance and counseling, vocational training, job development, job placement, and job training. Other services may include adjustment to the loss of vision, rehabilitation engineering services to include assessment and evaluation of job sites, assistive technology, and supported employment.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$5,932,237	\$5,932,237	24.00	24.00
Transfer centrally funded amounts to agency budgets	\$312,379	\$312,379	0.00	0.00
Transfer federal funds from Vocational Rehabilitation Services to Information Technology Services	(\$50,236)	(\$50,236)	0.00	0.00
Total for Service Area	\$6 194 380	\$6 194 380	24.00	24 00

Objective: Facilitate competitive job placements

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Average hourly wage for all individuals who have completed their Vocational Rehabilitation program and closed successfully employed	\$10.89 per hour in FFY 2004.	5% annual increase in average hourly wage at successful closure

Objective: Expand services to young adults

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Number of students participating in Summer Work Programs	39 in FY 04	5% increase above number of participants in the previous year

Independent Living Services

Rehabilitation teaching and independent living services provide people who are blind, visually impaired or deafblind with specialized training, goods and services that enable them to achieve their maximum level of personal independence. Technical assistance and support services are also offered to families, friends, advocates and others who want to assist individuals who are blind to achieve independence. Most consumers that successfully complete this training continue to live in their own homes, and have less need for assistance from family members and other community or health related organizations.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$2,783,753	\$2,783,753	42.00	42.00
Transfer centrally funded amounts to agency budgets	\$228,500	\$228,500	0.00	0.00
Total for Service Area	\$3,012,253	\$3,012,253	42.00	42.00

Objective: Increase the independence of Virginia's seniors who are blind or vision impaired.

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Percent of consumers who report an increase in independence as a result of Older Blind Grant services	81% for FFY 2004	85%

Vending Stands, Cafeterias, and Snack Bars

This service area implements the Vending Facility Program for the Blind on Federal and Other Property. This program is also known by its legislative title, The Randolph-Sheppard (Act) Program. This service area evaluates and trains qualified blind people wishing to become licensed vendors; issues licenses to blind vendors who successfully complete training; researches and evaluates potential business opportunities for blind vendors in federal and state facilities and private entities; designs, furnishes and installs appropriate vending facilities and other business enterprises for operation by blind vendors; maintains and upgrades existing facilities to enable licensed blind vendors to meet competition and demand; provides essential management support services for licensed vendors; and protects the Commonwealth from liability in operation of the program.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$483,374	\$483,374	1.00	1.00
Transfer centrally funded amounts to agency budgets	\$8,872	\$8,872	0.00	0.00
Transfer positions from General Management and Direction services to Vending Stands, Cafeterias, and Snack Bars services	\$0	\$0	1.00	1.00
Total for Service Area	\$492,246	\$492,246	2.00	2.00

Objective: Economic opportunities for licensed blind vendors

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
To increase the income of licensed blind vendors and the revenue derived from set aside.	The five year rolling average for vendor income through the end of FY- 2004 is \$ 38, 597.00; the average for set aside for the same period is \$793.796.00	To increase by 3% the five year rolling average each year for both vendor income and set aside.

Regional and Areawide Assistance Administration

This service area provides support to the Agency's rehabilitation, education, and residential rehabilitation services activities. Support services include regional office administration and management including direction and supervision of direct customer services and leasing of office space. Direct supervision is provided to the Regional Managers in each of our six regional offices located throughout the state as well as the Director of the Rehab Center for the Blind and Vision Impaired and Program Directors for the agency's Rehabilitation Teaching, Education, Low Vision and Deafblind program areas. The managers, in turn, provide supervision and direction to both the field staff that deliver services to our blind, visually impaired and deafblind customers and the administrative support staff in each facility. The agency has a Memorandum of Understanding with the Department of Rehabilitative Services (DRS) to provide accounting, budgeting, payroll, information services, purchasing, internal auditing, and human resources services that are utilized by the agency's six regional offices and Rehab Center for the Blind and Vision Impaired.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$1,868,387	\$1,868,387	26.00	26.00
Transfer centrally funded amounts to agency budgets	\$133,598	\$133,598	0.00	0.00
Total for Service Area	\$2,001,985	\$2,001,985	26.00	26.00

Objective: Employees meet or exceed their objectives established for work profiles.

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Percentage of employees at contributor or above in annual performance review	100% of regional office and rehab center employees received a rating of contributor or higher in 2004.	95% of regional office and rehab center employees receive a rating of contributor or higher.

Manufacturing Services

The Virginia Industries for the Blind (VIB) operates two manufacturing plants in Charlottesville and Richmond, administrative services in Northern Virginia, central Virginia, South Western Virginia and Tidewater and Federal office supply stores in administration buildings and military bases across the Commonwealth.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$20,584,141	\$20,584,141	13.00	13.00
Transfer centrally funded amounts to agency budgets	\$165,653	\$165,653	0.00	0.00
Total for Service Area	\$20,749,794	\$20,749,794	13.00	13.00

Objective: Increase employment opportunities for legally blind candidates.

 Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
 Increase the total number of blind individuals employed by VIB	116 on May 05	125

Administrative and Support Services

This service area provides support services to all DBVI service areas and includes administration and management, physical plant maintenance services, capital outlay, and citizen participation in Agency services through the Board for the Blind and the Vision Impaired.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$1,686,556	\$1,686,556	31.00	31.00
Transfer centrally funded amounts to agency budgets	\$94,893	\$94,893	0.00	0.00
Transfer federal funds from Vocational Rehabilitation Services to Information Technology Services	\$50,236	\$50,236	0.00	0.00
Transfer positions from General Management and Direction services to Vending Stands, Cafeterias, and Snack Bars services	\$0	\$0	-1.00	-1.00
Adjust funding for agency expenditures related to cost of basic operations	\$9,628	\$12,457	0.00	0.00
Total for Service Area	\$1,841,313	\$1,844,142	30.00	30.00

Objective: To ensure that resources are used efficiently and programs are managed effectively, and in a manner consistent with applicable state and federal requirements

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Percent of Governor's Management scorecard categories marked as meets expectations for the agency.	80% - the 2005 percentage calculated based on the agency scorecard.	100% scorecard attainment

Objective: Promote and support efficient and effective agency operations and customer service delivery

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Findings by the Auditor of Public Accounts	No material findings Fiscal Year 04 Audit	No material audit points

Virginia Rehabilitation Center For The Blind And Vision Impaired

Mission Statement

The mission of the Virginia Rehabilitation Center for the Blind and Vision Impaired (VRCBVI) is to empower blind, vision impaired and deaf blind citizens of Virginia to achieve optimum vocational, educational, and social independence and economic equality.

Agency Goals:

- Enhance the independence, well-being, and personal responsibility of blind and vision impaired citizens.
- Provide for effective performance of VRCBVI personnel to ensure sound business practices and center operations.

Customers Served:

- Workforce/Employees of the Agency
- Blind vision impaired or deafblind people who want to work and live independently

Agency Budget Summary

	General Fund	Nongeneral Fund	TOTAL	Personnel Costs	Other Costs	Positions
OPERATING BUDGET	HISTORY:					
FY 2003	\$200,685	\$1,726,699	\$1,927,384	\$1,452,167	\$475,217	26.00
FY 2004	\$191,435	\$1,726,699	\$1,918,134	\$1,452,167	\$465,967	26.00
FY 2005	\$191,641	\$1,793,703	\$1,985,344	\$1,498,076	\$487,268	26.00
FY 2006	\$191,641	\$1,793,703	\$1,985,344	\$1,498,076	\$487,268	26.00
NEW OPERATING BUD	OGET SUMMARY	<u>γ</u> :				
FY 2007 Base Budget	\$191,641	\$1,793,703	\$1,985,344	\$1,473,758	\$511,586	26.00
FY 2007 Addenda	\$0	\$115,076	\$115,076	\$115,076	\$0	0.00
FY 2007 TOTAL	\$191,641	\$1,908,779	\$2,100,420	\$1,588,834	\$511,586	26.00
FY 2008 Base Budget	\$191,641	\$1,793,703	\$1,985,344	\$1,473,758	\$511,586	26.00
FY 2008 Addenda	\$0	\$115,076	\$115,076	\$115,076	\$0	0.00
FY 2008 TOTAL	\$191,641	\$1,908,779	\$2,100,420	\$1,588,834	\$511,586	26.00
CAPITAL OUTLAY BUDGET SUMMARY:						
FY 2007 Capital	\$2,077,000	\$0	\$2,077,000	\$0	\$2,077,000	0.00
FY 2008 Capital	\$0	\$0	\$0	\$0	\$0	0.00

Agency Summary of Recommended Operating Budget Addenda

► Transfer centrally funded amounts to agency budgets

Adjusts the agency budget to reflect amounts moved from Central Appropriations to cover the cost of items such as the continuation of 2005 and 2006 salary and health insurance premium increases, and changes in retirement and disability contribution rates. For each year, \$115,076 (NGF).

Agency Summary of Recommended Capital Outlay Addenda

▶ Replace Roofs on Administration/Activities Building, Recreation Building, and Dining Hall

Provides funds to replace the roofs of the Administration/Activities Building, the Recreation Building, and the Dining Hall located at the Rehabilitation Center for the Blind and Vision Impaired. All three of these buildings have active roof leaks and have been on the Maintenance Reserve project list for over 10 years. For the biennium, \$2.1 million (GF).

Agency Service Areas:

Social and Personal Adjustment to Blindness Training

The Virginia Rehabilitation Center for the Blind and Vision Impaired provides evaluation and training services to adolescents and adults with vision impairments to enhance their personal, educational, and vocational independence.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$1,174,732	\$1,174,732	20.00	20.00
Transfer centrally funded amounts to agency budgets	\$43,318	\$43,318	0.00	0.00
Total for Service Area	\$1,218,050	\$1,218,050	20.00	20.00

Objective: Increase Independent Living Skills of the Blind

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)	
Participant performance comparison at entry	New measure. Baseline data collection	Target will be established upon completion	
and completion of VRCBVI training program.	began in FY 06.	of FY 06 baseline data collection.	

Administrative and Support Services

The Virginia Rehabilitation Center for the Blind and Vision Impaired provides evaluation and training services to blind, vision impaired and deafblind adolescents and adults to enhance their personal, educational, and vocational independence. Administrative and Support Services are essential to the provision of these services. General administration and management, as well as the management and operation of the training, housing, and dining facilities, make training possible. General administrative direction and management control are provided in the areas of planning, budgeting, financing, instructional planning, staffing, accounting and record keeping. Liaison with other agencies and the public is also provided. Support services provided include clerical services and office management, coordination of operation of the physical facilities required for instruction, recreation, housing, feeding, and health of the students with other programs of the Department for the Blind and Vision Impaired, as well as other state, local, and federal agencies is included in this service area.

Service Area Budget	2007 Dollars	2008 Dollars	2007 Positions	2008 Positions
Base Budget	\$810,612	\$810,612	6.00	6.00
Transfer centrally funded amounts to agency budgets	\$71,758	\$71,758	0.00	0.00
Total for Service Area	\$882,370	\$882,370	6.00	6.00

Objective: Promote and support efficient and effective Center operations and customer service delivery

Key Performance Measure(s)	Measure Baseline(s)	Measure Targets(s)
Findings by the Auditor of Public Accounts	Based on Fiscal Year 04 Audit	No material audit point findings