HEALTH

DESCRIPTION

The Health Department is responsible for promoting the health of county residents. The department is charged with reducing the spread of communicable diseases, providing direct care services, reducing the infant mortality rate, providing childhood immunizations, and treating specifically targeted diseases. Preventive services such as health education, risk identification, and dental services are also provided, along with environmental health services including rabies control, restaurant and food establishment permitting and inspection, food borne illness investigations, and septic and well system inspection and permitting. The Health Department also has specific responsibility to investigate and evaluate diseases of potential bioterrorism, implement control measures, provide accurate information to the public, and advise the public safety agencies.

The department receives funding from two sources. The first of these two sources is a "cooperative" appropriation provided by the state and the county, of which 55% is state and 45% is county. The county's share of the cooperative budget is portrayed as a portion of the department's operating expenses.

The second source of funding is a "100% county budget," which is composed entirely of funds the county has elected to provide in order to support certain activities and functions. Services funded by the "100% county budget" go beyond what is mandated by the state and are planned to meet the specific health needs of Chesterfield residents.

FINANCIAL ACTIVITY

	FY2001 Actual	FY2002 Adopted	FY2003 Adopted	FY2004 Planned	Change FY2002 to FY2003	Change FY2003 to FY2004	FY2005 Projected	FY2006 Projected
Personnel	$1,038,498	$1,119,800	$1,108,300	$1,197,700	-1.0%	8.1%	$1,287,100	$1,376,500
Operating	1,747,411	1,792,000	2,135,700	2,135,700	19.2%	0.0%	2,135,700	2,135,700
Capital	51,043	2,000	1,000	1,000	-50.0%	0.0%	1,000	1,000
Total	$2,836,952	$2,913,800	$3,245,000	$3,334,400	11.4%	2.8%	$3,423,800	$3,513,200
Revenue	575,604	638,100	939,300	1,028,700	47.2%	9.5%	1,118,100	1,207,500
Net Cost	$2,261,347	$2,275,700	$2,305,700	$2,305,700	1.3%	0.0%	$2,305,700	$2,305,700
FT Pos.	22	23	23	25	0	2	27	29

BUDGET ANALYSIS AND EVALUATION

In FY2003, the department will focus on several primary concerns. These include:

- Preserving essential "core" public health services such as family planning, contraceptive services, prenatal care for needy residents, and control of communicable diseases through immunization, case finding, and treatment.
- Improving its ability to monitor the community for disease, to respond to bioterrorism, and to properly advise other agencies and the public.
- Improve its capacity to analyze citizen concerns over possible adverse health events, such as those voiced by Rayon Park residents.
- Monitor the community for West Nile Virus activity and promote reasonable prevention activity.
- Addressing primary care for uninsured children.

HEALTH

- Establishing a set of health status indicators for the county that can be benchmarked against other localities.
- Improving the efficiency and effectiveness of the onsite sewage program through training and use of new technology.

The department will provide all core public health services and will improve operation processes by using Total Quality Improvement techniques and active solicitation of grant and other funding sources.

The School Board budget for FY2003 includes $695,900 to be paid to the Health Department to fund 14 full-time positions associated with the School Health Nurse Program (nine of the positions are with the state). This represents a significant increase from prior years, as seven more state positions are now locally funded and no longer subject to direct state reductions.

A number of programs administered by the Health Department are at risk in current and future years because of potential budget cuts being considered by the State of Virginia. Some public health programs that are considered "optional" and vulnerable to reductions by the state could include dental health services and acute (primary) care for children. For example, the State Health Department no longer funds local West Nile Virus prevention efforts. If the county were to lose this revenue, a number of efficiency savings would need to be implemented which could impair the department's total quality initiative and the delivery of services.

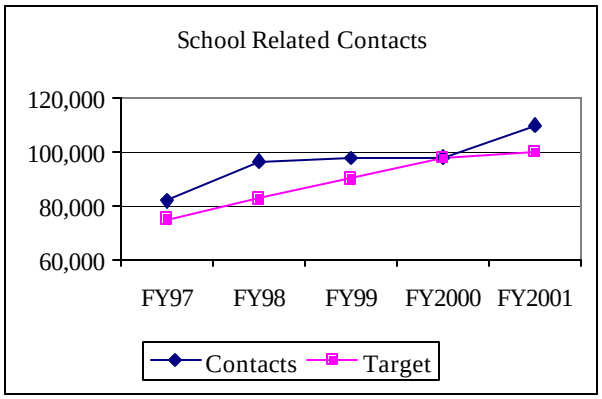
At the time of budget adoption, locality-specific information was not available regarding how the State Department of Health would pass on its funding cuts to Chesterfield as designated by the General Assembly. The Health Department's budget will likely need to be revised during FY2003 to allow for these reductions.

HOW ARE WE DOING?

Goal: Improve the health and safety of students in county schools. Supports Countywide Strategic Goal Number 3.

Objective: Serve those students and faculty needing health care services through education and direct care

Measure: School related contacts

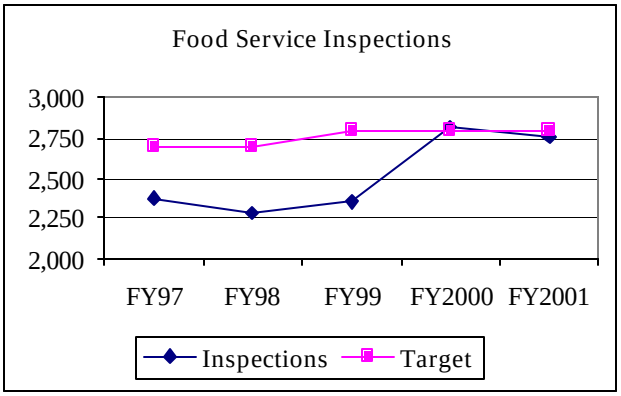


Initiatives

- School Health Nurse program
- Influenza and hepatitis vaccinations

HEALTH

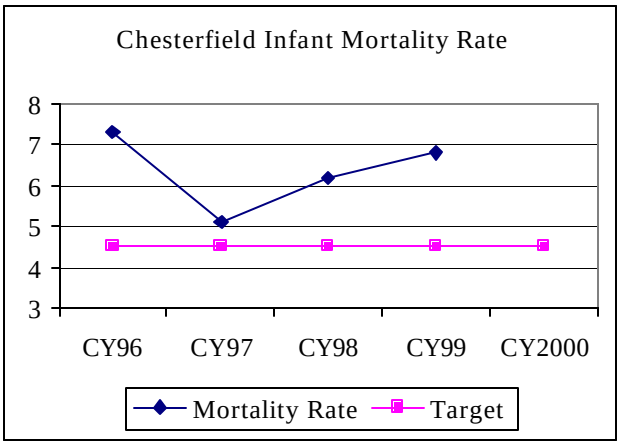
Goal: Improve the health and safety of eating establishments in the county. Supports Countywide Strategic Goal Number 3.
Objective: Prevent food poisoning outbreaks through education and enforcement of food service guidelines
Measure: Food service inspections



Initiatives

- Health and sanitation inspections
- Food training programs

Goal: Improve the health and welfare of our communities. Supports Countywide Strategic Goal Number 3.
Objective: Reduce the number of preventable infant deaths
Measure: Chesterfield infant mortality rate (deaths per 1,000 births)



Initiatives

- Child immunizations
- Prenatal care

WHERE ARE WE GOING?

The department intends to make more use of the Geographic Information System (GIS), which will improve its quality of service in environmental health and disease assessment. The GIS holds great promise for identifying and tracking problems with private onsite sewage (septic) systems and wells.

The department also intends to address what are increasing numbers of requests for quality personal health information, health outcome data, and preventive services. An epidemiologist position has been established, and a public health educator position will be sought in the future.

Future growth in the School District population and the increased number of school facilities and school children with overt medical needs will necessitate additional public health school nurses in future

years. Two additional positions offset by additional reimbursement revenue from schools are reflected in each of the future years for this purpose.

Additionally, there is a need to enhance and build upon current levels of community education, especially prenatal concerns dealing with the African American community, since there is a wide divergence in the difference between the White and African American rates of infant mortality in the county. This will require additional staffing. Current staffing levels do not address the growth in the county or the need for the delivery of services in immunization, family planning, and sexually transmitted diseases.

In order to accommodate the growth of staff and the number of services, expansion of the Wagner Building will become a priority concern in the future. The facility programming funds associated with the Wagner Building expansion have been identified in the Capital Improvement Program (CIP) for FY2005, with construction planned for FY2006-FY2007.

The county's Technology Improvement Program includes two other future year Health Department projects. In FY2004 and FY2005, funding is provided for the Environmental Health Septic Tank Pumping Program, which will improve access to residential septic system information. The Record Room Tracking Program is planned for implementation in FY2004, and will allow the department to track individual medical records. These projects are funded in the county's FY2003-FY2008 CIP.

Increases in future year projections, if any, reflect the operating impact of the opening of new facilities.