



# Administration and Support

**RECOMMENDED FY24 BUDGET**

**\$70,502,576**

**FULL TIME EQUIVALENTS**

**181.19**

JAMES BRIDGERS PH.D., MBA, ACTING DIRECTOR

## FUNCTION

The function of Administration and Support Services is to provide overall leadership, administration, and direction to the Department of Health and Human Services (DHHS), while providing an efficient system of support services to ensure effective management and delivery of services.

## PROGRAM CONTACTS

Contact Jason Rundell of the HHS - Administration and Support at 240.777.1685 or Deborah Lambert of the Office of Management and Budget at 240.777.2794 for more information regarding this department's operating budget.

## PROGRAM DESCRIPTIONS

### Admin - Office of Community Affairs

This program oversees, supports, and implements the mission of the Office of Community Affairs, which is to lead the development of equitable and inclusive health and human services systems that are responsive to racial/ethnic and economically disinvested communities. This Office takes a global view of equity and inclusion that transcends the mandate of individual service units and offices to ultimately drive for systems change.

<b>FY24 Recommended Changes</b>	<b>Expenditures</b>	<b>FTEs</b>
<b>FY23 Approved</b>	<b>384,052</b>	<b>3.00</b>
Multi-program adjustments, including negotiated compensation changes, employee benefit changes, changes due to staff turnover, reorganizations, and other budget changes affecting multiple programs.	(100,859)	0.00
<b>FY24 Recommended</b>	<b>283,193</b>	<b>3.00</b>

### Admin - Office of the Chief Operating Officer

This Office oversees the administrative services that support direct service delivery and the day-to-day operations of the Department: including budget development and expenditure analysis; management of the Department's fiscal operations including payments, medical billing, Federal claiming, and State financial reporting; contract management; logistics and facilities support; information technology support and development; grant acquisition; and oversight of compliance activities such as internal audits and coordination of external audits. The Office also oversees the implementation of Department-wide policies and procedures for

administrative functions and coordinates and facilitates service delivery practices to promote consistency across programs and to further the goal of integrated practice across the Department.

FY24 Recommended Changes	Expenditures	FTEs
<b>FY23 Approved</b>	<b>30,443,541</b>	<b>92.00</b>
Increase Cost: Upgrade Existing Enterprise Integrated Case Management System That is Past End of Technical Support	600,000	0.00
Enhance: Office of the Chief Administrative Officer Administrative Staff Including Coding Unit (Revenue Offset)	375,507	7.00
Multi-program adjustments, including negotiated compensation changes, employee benefit changes, changes due to staff turnover, reorganizations, and other budget changes affecting multiple programs.	(313,903)	(0.19)
<b>FY24 Recommended</b>	<b>31,105,145</b>	<b>98.81</b>

## ☀ Admin - Office of the Director

The Office of the Director provides comprehensive leadership and direction for the Department: including budget and policy development and implementation; planning and accountability; service integration; customer service; the formation and maintenance of partnerships with non-governmental service providers; and human resource management. Further, the Office of the Director facilitates relationships and communications with external partners, provides overall guidance and leadership for health and social service initiatives, and ensures compliance with relevant laws and regulations including the Americans with Disabilities Act (ADA) and the Health Insurance Portability and Accountability Act (HIPAA).

FY24 Recommended Changes	Expenditures	FTEs
<b>FY23 Approved</b>	<b>11,194,497</b>	<b>27.00</b>
Replace: Service Consolidation Hubs Previously Funded by ARPA with General Funds	3,000,000	1.00
Increase Cost: Kronos Annual Maintenance and License Contractual Obligations	3,938	0.00
Technical Adj: Technical Adjustment for Various FTE Changes	0	12.81
Shift: Transfer One Position from DHHS to OHR	(105,892)	(1.00)
Replace: Funding for Service Consolidation Hubs from ARPA to General Fund	(3,000,000)	(1.00)
Multi-program adjustments, including negotiated compensation changes, employee benefit changes, changes due to staff turnover, reorganizations, and other budget changes affecting multiple programs.	(174,751)	(7.43)
<b>FY24 Recommended</b>	<b>10,917,792</b>	<b>31.38</b>

## ☀ Community Action Agency

The mission of the Community Action Agency (CAA) is to use an equity lens to advance social and economic mobility among communities and neighbors through services, partnerships, and advocacy. Responsibilities include administration of Federal and State Head Start and Community Services Block Grant (CSBG) funding. In addition to Head Start, programs include the Takoma-East Silver Spring (TESS) Community Action Center, Volunteer Income Tax Assistance (VITA), the Community Action Board, and its Community Advocacy Institute. CAA staff and volunteers join with 30+ partners to deliver critical services that strengthen the social and economic assets of low-income communities.

Program Performance Measures	Actual FY21	Actual FY22	Estimated FY23	Target FY24	Target FY25
The number of residents who receive free tax preparation services through the CAA VITA program <sup>1</sup>	1,025	1,463	1,800	2,000	2,200

<sup>1</sup> The number of residents served annually by VITA is highly dependent upon the number and expertise of volunteers recruited and trained, funding of VITA staff, as well as the capacity of partnership sites. Due to COVID, a virtual model (Zoom-based) was initiated in FY21, which

greatly reduced efficiency in Maryland by an average of 40%. In FY22, Omicron required the continuation of virtual services, with in-person services initiated in the final weeks of the season. Increased projections assume level staffing, restoring in-person services, and increasing volunteer levels in FY23, FY24, and FY25.

FY24 Recommended Changes	Expenditures	FTEs
<b>FY23 Approved</b>	<b>5,511,985</b>	<b>14.20</b>
Multi-program adjustments, including negotiated compensation changes, employee benefit changes, changes due to staff turnover, reorganizations, and other budget changes affecting multiple programs.	466,610	1.00
<b>FY24 Recommended</b>	<b>5,978,595</b>	<b>15.20</b>

## ☀ Equity and Language Access

Limited English Proficiency (LEP) is a barrier between customers, colleagues, and the community and equitable access to services designed to promote their health, safety, and self-sufficiency. The focus of the Equity and Language Access Program is to use principles of equitable access to guide how staff plans, implements, and evaluates activities that provide access to language. This program is charged with delivering an LEP Policy and Implementation Plan, Department-wide, to fulfill an essential systemic strategy to create equitable access to services by mitigating language barriers and to comply with a Federal mandate for language access.

Program Performance Measures	Actual FY21	Actual FY22	Estimated FY23	Target FY24	Target FY25
Number of referrals made for Multilingual Health Navigation Line/Interpretation Services <sup>1</sup>	24,462	35,895	25,000	26,000	26,000
Total number of interpretations provided over the phone by our phone interpretation vendor to DHHS staff in order to serve LEP clients <sup>2</sup>	28,814	23,400	23,000	23,000	23,000
Percent of clients satisfied with services for Multilingual Health Navigation Line/interpretation services <sup>3</sup>	98%	98%	90%	90%	90%
Percent of clients able to access services upon referral <sup>4</sup>	90%	94%	90%	90%	90%
Percent of participants of Equity Workshop who will be able to apply behaviors learned <sup>5</sup>	94%	97%	95%	95%	95%

<sup>1</sup> The uptick in FY22 in the number of referrals for multilingual/interpretation services is attributable to the following: 1) HHS moving much of its operation virtual instead of using in-person interpretation services, which is not part of this count; and 2) COVID relief programs, such as Emergency Assistance Relief (EARP) and Rental Assistance (ERAP), which increased demand from the community. Projected numbers for upcoming fiscal years reflect the trend of returning to normalcy. The large number of referrals for services in FY22 reflect the height of the COVID health crisis outreach efforts when the navigation line had considerably more staff than it expects to have in FY23-FY25.

<sup>2</sup> The high number in FY21 reflects the height of the COVID health emergency, before vaccines were available, and when all in-person interpretations halted and moved to telephonic interpretations. The decreased number in FY22 reflects the return to normalcy.

<sup>3</sup> This data currently reflects the performance of one contract. Other contracts will be updated to include this data. FY23-FY25 projections are based on percentages of satisfied clients from FY18-FY22.

<sup>4</sup> FY23-FY25 projections are based on percentages of clients who were able to access services upon referral from FY18-FY22.

<sup>5</sup> Represents participants who marked "agreed" or "strongly agreed" on this question.

FY24 Recommended Changes	Expenditures	FTEs
<b>FY23 Approved</b>	<b>1,219,101</b>	<b>2.00</b>
Multi-program adjustments, including negotiated compensation changes, employee benefit changes, changes due to staff turnover, reorganizations, and other budget changes affecting multiple programs.	41,201	0.00
<b>FY24 Recommended</b>	<b>1,260,302</b>	<b>2.00</b>

## ☀ Head Start

This program oversees the Federal Head Start funding that the County receives to provide a comprehensive child development program for income-eligible families with young children ages three through five. Montgomery County Public Schools serves as

the Head Start delegate agency and the Department of Health and Human Services provides health services to eligible Head Start children through the School Health Service program.

Program Performance Measures	Actual FY21	Actual FY22	Estimated FY23	Target FY24	Target FY25
Number of children in full-day program	540	540	540	540	540
Percent of children in full-day program	83%	83%	83%	83%	83%
Percent of Head Start eligible children served by the Montgomery County Head Start Program	41%	41%	41%	41%	41%
Percent of 3-year olds with demonstrated school readiness <sup>1</sup>	71%	75%	75%	75%	75%
Percent of 4-year olds with demonstrated school readiness <sup>2</sup>	81%	84%	85%	85%	85%

<sup>1</sup> The FY21 program year began as a virtual learning platform. The child assessment--reduced from 16 early learning Skills, Knowledge, and Behaviors (SKBs) indicators--was modified to focus on four indicators of learning under the math and language and literacy domains. The increase in percentage points from FY21 to FY22 was due to returning to in-person instruction where all domains of learning were assessed. In FY23, FY24, and FY25, projections for children demonstrating school readiness skills remain consistent as the delegate agency, MCPS, transitions to a new curriculum with increased rigor for children's learning.

<sup>2</sup> The FY21 program year began as a virtual learning platform. The child assessment--reduced from 16 early learning Skills, Knowledge, and Behaviors (SKBs) indicators--was modified to focus on four indicators of learning under the math and language and literacy domains. The increase in percentage points from FY21 to FY22 was due to returning to in-person instruction where all domains of learning were assessed. In FY23, FY24, and FY25, projections for children demonstrating school readiness skills remain consistent as the delegate agency, MCPS, transitions to a new curriculum with increased rigor for children's learning.

FY24 Recommended Changes	Expenditures	FTEs
<b>FY23 Approved</b>	<b>4,766,440</b>	<b>2.80</b>
Multi-program adjustments, including negotiated compensation changes, employee benefit changes, changes due to staff turnover, reorganizations, and other budget changes affecting multiple programs.	129,621	0.00
<b>FY24 Recommended</b>	<b>4,896,061</b>	<b>2.80</b>

## Minority Programs

The three minority programs - the African American Health Program (AAHP), the Latino Health Initiative (LHI), and the Asian American Health Initiative (AAHI) - support Department-wide efforts to eliminate disparities in delivery of health services and others and continue to achieve equitable delivery of population-targeted programs and services. The knowledge, expertise, and experiences of incumbent personnel in racially, ethnically, and linguistically diverse communities informs Department-wide program, policy, and budget decisions.

Program Performance Measures	Actual FY21	Actual FY22	Estimated FY23	Target FY24	Target FY25
Number of individuals served by the Minority Health Initiatives & Program <sup>1</sup>	28,920	65,983	81,400	81,400	81,400
Percent of clients satisfied with services provided by the Minority Health Initiatives & Program <sup>2</sup>	97%	96%	95%	95%	95%
Average percent of respondents who expressed increased confidence due to community capacity building activities <sup>3</sup>	N/A	90%	90%	90%	90%
Average percent increase in wages from time participants entered program until hired as health professionals	169%	134%	150%	150%	150%
Percent of clients who improved A1C blood sugar level test at 3-month follow up (diabetes management/prevention) <sup>4</sup>	96%	97%	85%	85%	85%

<sup>1</sup> The FY22 actual figure is higher than FY21 because FY21 reflects activities conducted under full COVID restrictions. During the pandemic, in-person outreach events were limited and only some of them transitioned to virtual events. In addition, some regular activities of the minority programs were put on hold since most of their staff were deployed to support the County COVID-19 response. During FY22, regular activities/events began to be reactivated. The FY23 projection is higher because the minority programs are currently conducting outreach events at the level and manner as they were pre-COVID.

<sup>2</sup> With the transition of some in-person outreach events to virtual, some changes occurred in the process to collect data related to client satisfaction. Surveys are now collected electronically, and the decrease can be related to this new process. The target level of satisfaction is 95%, and the programs always surpass this target.

<sup>3</sup> This is a measure tracked by the Asian American Health Initiative (AAHI). Historically, AAHI had set the projection at 85% for the past fiscal years. For FY23, department staff worked with the AAHI to align prior data with projections. Respondents are Asian American community members from community- and faith-based organizations who attended an AAHI community capacity building activity and responded to the evaluation question about increased confidence.

<sup>4</sup> The above measures and standards are set in accordance with those determined by the Association of Diabetes Care and Education Specialists (ADCES), Diabetes Self-Management Education (DSME), and the Centers for Disease Control Prediabetes Prevention Program (CDC DPP) to maintain the African American Health Program's (AAHP) accreditations and to achieve the outcomes set within the guidelines/requirements by the governing organizations for a qualified diabetes prevention education and management program. AAHP will continue to aim to achieve higher percentages internally than the projected and raise its internal projected targets.

FY24 Recommended Changes	Expenditures	FTEs
<b>FY23 Approved</b>	<b>13,052,234</b>	<b>26.00</b>
Enhance: Latino Health Initiative Steering Committee Request for Non-clinical Emotional Support Groups and Additional Community Health Promotion Services	952,545	0.00
Enhance: African American Health Program to Increase Community Outreach, Support Maternal and Child Health, and Seniors	800,000	0.00
Enhance: Asian American Health Initiative Request for Increased Healthy Community Grants and Center of Excellence Micro-grants	775,000	0.00
Multi-program adjustments, including negotiated compensation changes, employee benefit changes, changes due to staff turnover, reorganizations, and other budget changes affecting multiple programs.	481,709	2.00
<b>FY24 Recommended</b>	<b>16,061,488</b>	<b>28.00</b>

## PROGRAM SUMMARY

Program Name	FY23 APPR Expenditures	FY23 APPR FTEs	FY24 REC Expenditures	FY24 REC FTEs
Admin - Office of Community Affairs	384,052	3.00	283,193	3.00
Admin - Office of the Chief Operating Officer	30,443,541	92.00	31,105,145	98.81
Admin - Office of the Director	11,194,497	27.00	10,917,792	31.38
Community Action Agency	5,511,985	14.20	5,978,595	15.20
Equity and Language Access	1,219,101	2.00	1,260,302	2.00
Head Start	4,766,440	2.80	4,896,061	2.80
Minority Programs	13,052,234	26.00	16,061,488	28.00
<b>Total</b>	<b>66,571,850</b>	<b>167.00</b>	<b>70,502,576</b>	<b>181.19</b>

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