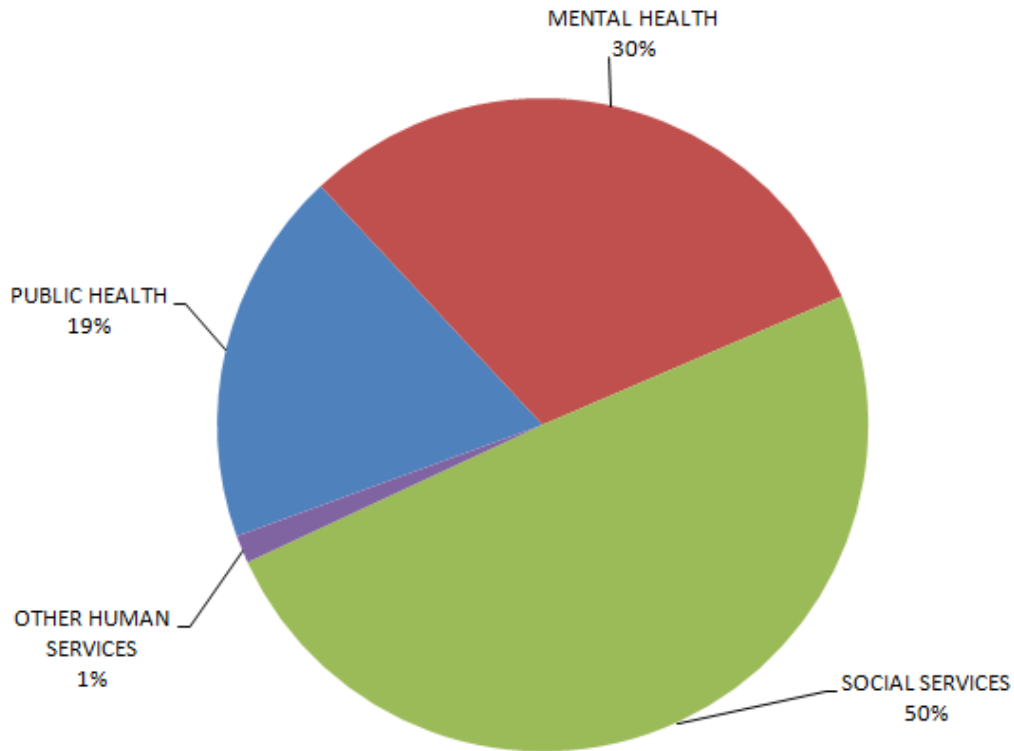


Human Services Approved Budget



Business area	2009-2010 Actual Expenditures	2010-2011 Original Budget	2010-2011 12 Month Estimate	2011-2012 Department Requested	2011-2012 Commissioner Approved
PUBLIC HEALTH	\$ 19,076,803	\$ 20,067,588	\$ 20,690,993	\$ 19,445,039	\$19,472,515
MENTAL HEALTH	\$ 27,329,069	\$ 30,818,125	\$ 32,317,272	\$ 31,829,666	\$31,829,666
SOCIAL SERVICES	\$ 410,630,720	\$ 50,517,208	\$ 55,825,814	\$ 55,066,550	\$51,746,341
OTHER HUMAN SERVICES	\$ 1,548,989	\$ 1,735,186	\$ 1,687,015	\$ 2,054,475	\$1,440,705
Overall Result	\$ 458,585,581	\$ 103,138,107	\$ 110,521,095	\$ 108,395,730	\$104,489,227

PUBLIC HEALTH

MISSION

The Durham County Health Department's mission is to preserve, protect and enhance the general health and environment of the community.

PROGRAM DESCRIPTION

The department is comprised of seven divisions: Administration, Nutrition, Health Education, General Health Services, Dental, Community Health and Environmental Health. These divisions work collaboratively to accomplish the following goals:

- Promote optimal health and wellness of children;
- Decrease premature death rates;
- Prevent and control communicable disease; and
- Maximize organization productivity.

2011-12 HIGHLIGHTS

The approved budget for Public Health includes the following items:

- Reductions made in various operating lines through found efficiencies. No reductions in service are related to the changes.
- 10.07 grant-funded FTEs are eliminated or reduced to match grant funding.
- One position, a Physician Extender I in the Family Planning area of Community Health, is increased from .7 to .9 FTE due to increased grant funding.
- Jail Health contract increased by \$298,527.
- Project Access of Durham County is funded at \$322,544.
- Two new fees are included for medication dispensation in the pharmacy and for nutritionist visits for the Diabetes Self Management program.

2010-11 ACCOMPLISHMENTS

- The Health Department was awarded the Run Smarter award for improving efficiency through the document management and imaging project.
- The Nutrition division's DINE for LIFE program was awarded the GlaxoSmithKline Local Health Department Recognition Award of \$5000, to be used by grantees for activities such as special projects, staff development or educational resources.
- DINE for LIFE's Junior Iron Chef Durham program was awarded a \$5000 Wolfe mini-grant to fund four workshops and four school-wide events targeting at risk youth.
- DINE for LIFE was awarded US Department of Agriculture Supplemental Nutrition Assistance Program education funds to conduct nutrition education with Durham residents eligible for food stamps.
- The Nutrition division was awarded a grant from Durham's Partnership for Children to conduct nutrition consultations in 25 Durham child care centers.
- The Health Education division's syphilis elimination program received a Best Practice in Public Health award for the Knowing is Sexy (KISS) campaign.
- The Dental division received \$51,500 from BCBS Foundation to create and fund a clinical coordinator position for one year. This position was recommended by Safety Net Solutions.
- The Dental division also began a partnership with Durham Early Head Start to provide dental education and dental treatment for on-site and home-based programs.
- The Dental division provided screenings for OBT Head Start as well as kindergarten and fifth grades in all Durham Public Schools elementary schools and all grades in schools selected for the dental van to identify children with urgent needs.
- The Environmental Health division partnered with the City of Durham Police Department to address unpermitted food sales in Durham.
- The Environmental Health division released the *Falls Lake Nutrient Management and the State of On-Site Sewage Treatment and Disposal in Durham County* report. The report discussed potential financial impacts of strategies for improving lake water quality and the need for more research related to residential systems.

Public Health

Business Area: 5100

Summary	2009-2010 Actual Exp/Rev	2010-2011 Original Budget	2010-2011 12 Month Estimate	2011-2012 Department Requested	2011-2012 Commissioner Approved
▽ Expenditures					
Personnel	\$12,737,971	\$13,478,207	\$13,055,447	\$13,012,268	\$12,861,212
Operating	\$6,322,562	\$6,542,832	\$7,494,746	\$6,423,624	\$6,602,156
Capital	\$16,270	\$0	\$140,800	\$0	\$0
Transfers	\$0	\$46,549	\$0	\$9,147	\$9,147
Total Expenditures	\$19,076,803	\$20,067,588	\$20,690,993	\$19,445,039	\$19,472,515
▽ Revenues					
Intergovernmental	\$6,317,087	\$4,924,054	\$4,811,589	\$4,876,529	\$4,595,524
Contrib. & Donations	\$806,557	\$886,531	\$876,236	\$547,653	\$547,653
Service Charges	\$400,619	\$412,318	\$405,827	\$431,910	\$433,290
Other Revenues	\$1,704	\$1,200	\$1,350	\$1,350	\$1,350
Total Revenues	\$7,525,967	\$6,224,103	\$6,095,002	\$5,857,442	\$5,577,817
Net Expenditures	\$11,550,836	\$13,843,485	\$14,595,991	\$13,587,597	\$13,894,698
FTEs	235.91	221.88	218.53	214.31	208.66

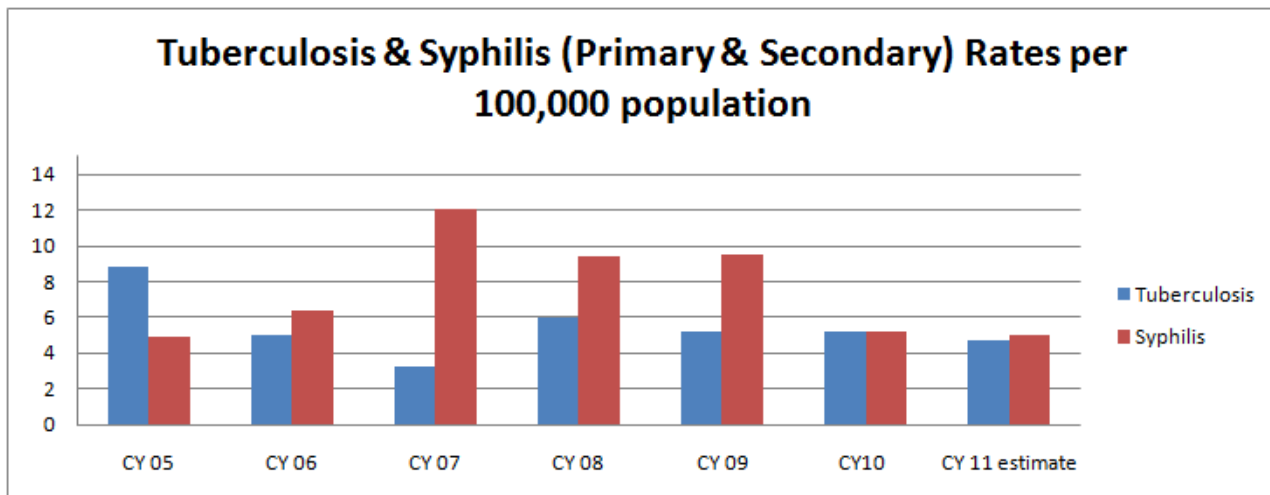
2010-11 ACCOMPLISHMENTS (continued)

- The Tuberculosis Control program conducted three large scale investigations at the Urban Ministries of Durham homeless shelter.
- The refugee clinic conducted communicable health diseases examinations on 136 refugees, including appropriate treatment of communicable diseases and referral to other clinics for medical problems.
- The AIDS Control program tested 5,542 individuals for HIV in the first seven months of the fiscal year and detected 28 positive individuals.
- The Maternal Health clinic received a March of Dimes grant to expand the CenteringPregnancy model to more patients, to decrease low birth weights and to facilitate health weight gain during pregnancy.
- Effective January 1, 2011, every mother who delivers a baby and resides in Durham County is offered a home visit following hospital discharge from Public Health Nurses in the Durham Connects program. The visits are for the purposes of assessing the mother and newborn and making referrals as necessary, as well as offering health, social and educational support directly to families.

2011-12 PERFORMANCE MEASURES

The General Health division provides administrative support for communicable disease control programs. The primary function is Sexually Transmitted Disease (STD) control. The STD program provides screening, treatment, reporting and follow-up for STDs. The program also provides client education for STD prevention, referral for immunizations, substance abuse, sexual abuse, mental health or other medical issues (hypertension, diabetes, asthma, etc.) identified in their clients, partner evaluation and treatment, and research opportunities through its collaboration with the University of North Carolina Division of Infectious Diseases.

Performance Measure 1: Communicable Disease Control - Durham County Tuberculosis & Syphilis Rates



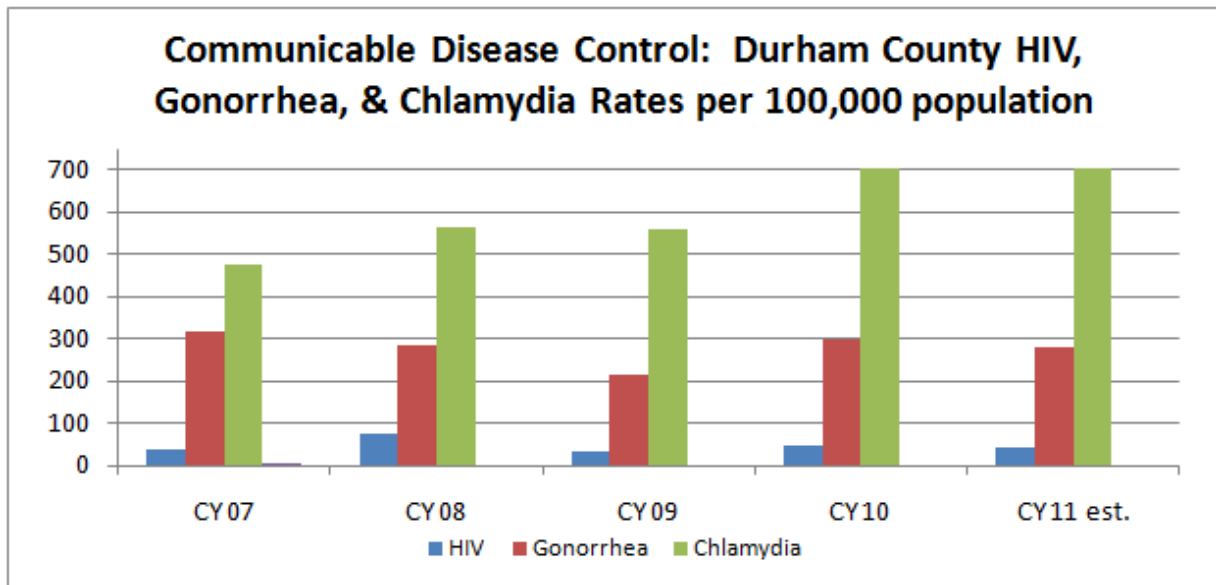
Story Behind the Last Two Years of Performance:

The syphilis rate has remained stable, due in part to continued efforts to provide preventive messages among at-risk individuals including incarcerated persons and men who have sex with men. Tuberculosis (Tb) rates have also remained steady, but with an increased incidence of co-infection with HIV. About 50% of cases are in foreign-born individuals. Without aggressive public awareness efforts the rates of both diseases can be expected to increase.

Strategies: What do you propose to do to improve program performance?

- Provide information and reminders to medical practitioners regarding best-practice treatment and the importance of reporting syphilis and tuberculosis cases
- Provide information to patients and partners about risk behaviors and the importance of treatment
- Enhance Tb education in the clinics and in the community regarding risk factors and symptoms for active and latent Tb.

Performance Measure 2: Communicable Disease Control: Durham County HIV, Gonorrhea, & Chlamydia Rates



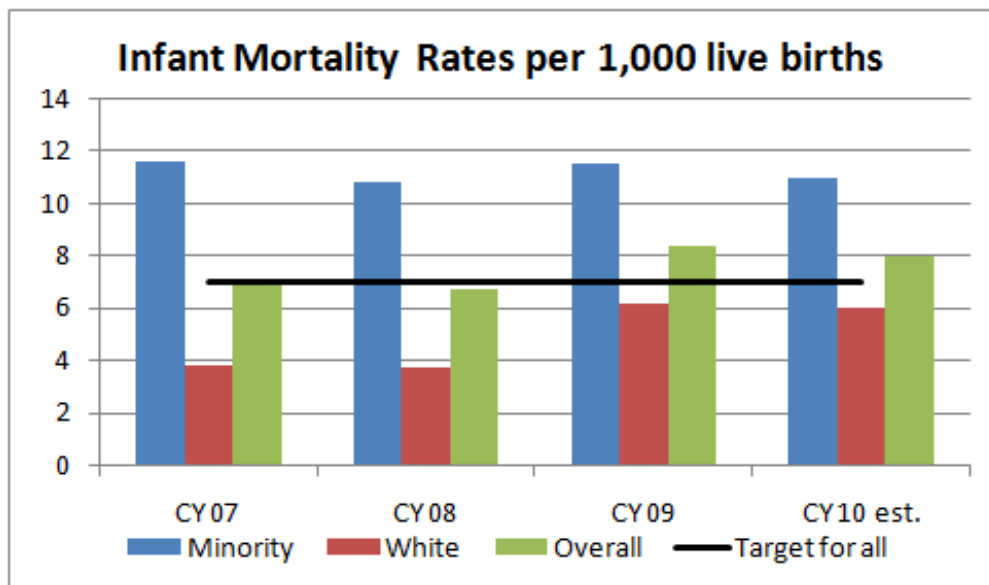
Story Behind the Last Two Years of Performance:

The past rates of gonorrhea and chlamydia in Durham County have been among the highest in the state. In 2010, rates in both diseases increased from 2009. Increases are due both to improved testing and to ongoing individual high risk behaviors among young people who have the highest rates of infection, and less than optimal sexual partner notification and treatment to prevent further disease transmission.

Strategies: What do you propose to do to improve program performance?

- Provide enhanced STI/HIV education to clients and partners to emphasize prevention, screening and management of STIs to prevent complications including Pelvic Inflammatory Disease, infertility, and adverse pregnancy outcomes
- Provide information and reminders to medical practitioners regarding best-practice treatment and the importance of reporting STI cases
- Increase budget to hire a county disease investigation specialist to provide sufficient disease intervention activities to curb the ongoing epidemic of gonorrhea, chlamydia, and other STIs in the county.

Performance Measure 3: Durham County Infant Mortality Rate



Story Behind the Last Two Years of Performance:

After several years of declining Infant Mortality (IM) rates, the rate in Durham increased in 2009 and remains at that increased level for 2010. Increases in IM rate are historically seen in times of high unemployment. Of ongoing concern is the disparity between the minority (in Durham, almost entirely African American) rate and the white rate.

Strategies: What do you propose to do to improve program performance?

- Participate in the new NC Pregnancy Medical Home, Pregnancy Care Management, and Care Management for Children efforts to reduce prematurity, and support families after babies are born
- Continue and enhance care to women before pregnancy and between pregnancies to reduce risk factors (e.g., obesity, chronic illness, and dental decay) that contribute to poor pregnancy outcomes.

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MENTAL HEALTH (THE DURHAM CENTER)

MISSION

The Durham Center is committed to helping individuals and families affected by mental illness, developmental disabilities, and substance abuse in achieving their full potential to live, work, and grow in their community.

We will provide leadership and will collaborate with others to assure a flexible, responsive and cost effective service system with priority assistance to Durham citizens who have limited service and/or financial options.

PROGRAM DESCRIPTION

The Durham Center is the Local Management Entity (LME) for mental health, developmental disabilities, and substance abuse for the single county catchment area of Durham County. The Durham Center is governed by an Area Board, with all Board members appointed by the Durham Board of County Commissioners.

The Durham Center is responsible for ensuring that Durham County citizens who seek help receive the services and supports for which they are eligible to achieve their goals and to live as independently as possible. The Durham Center is also responsible for making sure Durham County citizens receive quality services and that their individual rights are protected.

The Durham Center is responsible for managing finances, service authorizations, contracts with direct service providers, service quality, and regulatory standards, developing the service array and ensuring appropriate customer choice. It no longer directly provides mental health, developmental disabilities or substance abuse services.

The Durham Center contracts with more than 200 service providers in the area to provide mental health, developmental disabilities and substance abuse services to children and adults in Durham County. For those clients who do not speak English, we can provide a list of providers who speak other languages.

2011-12 HIGHLIGHTS

- The Durham Center will begin acting as the agent for Medicaid Utilization and Review on September 15, 2010. Efforts will continue to make this a successful endeavor. This is an important responsibility that will have a positive impact on the lives of our citizens. The budget reflects an increase in LME costs but should be covered by revenue generated by the contract with the State for compensation for performing this function.
- The State is proposing a reduction in funds of 3%, 5%, or 7%. The Durham Center budget projects a 3% reduction, or \$294,000
- There was no reduction in the county funded Mental Health budget, but funding for employee insurance costs were budgeted in a different fund, thus the shown decrease in funding as compared to FY 2009-10

2010-11 ACCOMPLISHMENTS

Substance Abuse

- Coalesced community resources and coordinated a wide range of Recovery Month activities, including a highly-successful recovery celebration block party attended by over 300 community members.
- Continue to provide screenings and assessments to the DSS arena, with particular interest in the Work First, Child Protective Services and Food and Nutrition areas. Individuals with SA challenges are expected to enroll in treatment in order to receive services. 120 persons were assessed in the 1st half of this fiscal year, we expect greater numbers in the second half of the year.
- Increased visibility of services through 4-page full-color informational tabloid that ran in Durham Herald during Alcohol Awareness month in April and Recovery Month in September. Placards promoting a variety of recovery messages placed in all 42 DATA buses, on billboard, newspaper inserts.
- Offered 150 hours of substance abuse-specific training for substance abuse counselors, mental health professionals, professionals from other public agencies, and the faith community.
- Continue to offer Workforce Incentive Package for substance abuse counselors committed to staying in Durham. Five counselors are participating in program for FY09-10. Package includes priority for all Durham Center-sponsored training, monthly clinical supervision (paid by The Durham Center), and up to \$500 in reimbursement for expenses related to substance abuse certification or licensure.

Mental Health (The Durham Center)

Business Area: 5200

Summary	2009-2010 Actual Exp/Rev	2010-2011 Original Budget	2010-2011 12 Month Estimate	2011-2012 Department Requested	2011-2012 Commissioner Approved
▽ Expenditures					
Personnel	\$4,323,240	\$5,065,522	\$4,758,218	\$6,612,327	\$6,612,327
Operating	\$23,005,829	\$25,752,603	\$27,513,139	\$25,217,339	\$25,217,339
Capital	\$0	\$0	\$45,916	\$0	\$0
Total Expenditures	\$27,329,069	\$30,818,125	\$32,317,272	\$31,829,666	\$31,829,666
▽ Revenues					
Intergovernmental	\$23,846,487	\$23,940,756	\$25,239,653	\$25,087,224	\$25,087,224
Service Charges	\$76,921	\$50,000	\$50,000	\$50,000	\$50,000
Other Revenues	\$92,193	\$81,000	\$68,773	\$31,000	\$31,000
Total Revenues	\$24,015,600	\$24,071,756	\$25,358,425	\$25,168,224	\$25,168,224
Net Expenditures	\$3,313,468	\$6,746,369	\$6,958,847	\$6,661,442	\$6,661,442
FTEs	80.00	80.00	106.50	106.50	106.50

2010-11 ACCOMPLISHMENTS (continued)

- In January 2010, opened a specialized, residential treatment program for adolescent youth with severe substance use disorders, a service gap in the community for several years. It provides evidenced-based Substance Abuse treatment using the Seven challenges treatment model.
- Began development of substance abuse treatment services for Spanish-speaking population through a pilot with El Futuro, starting with planning in the last quarter of fiscal year 2010 and services in the second quarter of fiscal year 2011.

Adult Mental Health

- Continued working with Durham Police Department and other local law enforcement agencies to establish a Crisis Intervention Team Program (Durham County Sheriff's Dept., Duke University PD, Chapel Hill PD and NC Central PD). During this year approximately 60 additional officers were trained and have been successful in de-escalating crisis situations, thereby diverting people with mental illness from arrest and incarceration, an increase of 167% from the number trained in the previous fiscal year (36).
- The Durham Center worked with Criminal Justice Resource Center and Durham County Detention Center to establish a Substance Abuse Mental Health Jail Liaison to better address the behavioral health issues of the jail population.
- The Mental Health Jail Diversion Team was redesigned to include more of an in-jail presence and increased coordination of release and treatment efforts, which have improved outcomes for individuals released into treatment, increased the number of individuals qualifying for Medicaid services, and decreased the number of jail days and incarcerations for those that have been successfully connected to the Team. The Durham Center has worked extensively with the Durham County Jail, community-based mental health providers and Gurley's Pharmacy to ensure that individuals being discharged back into the community have ready access to treatment and medications.
- Medication Management Groups were established as part of the Adult Services array drastically cutting the wait time for individuals needing medication management services. This change has vastly improved the show-rate for medication management groups from 47% to approximately 80% over the past several months.
- Continued to partner with Gurley's Pharmacy to ensure individuals have access to necessary medications. Since July 2009, over 4,800 individuals have been served.
- Beginning in July 2010 and carrying through until June 30, 2011 The Durham Center, in combination with its many partnering behavioral health providers, undertook a High Risk Initiative in which services, funding and supports could be individualized around those identified as the most frequent utilizers of EMS, Police, Crisis Services, Durham County Jail, and/or county and state hospitals. Outcomes will be generated at the end of FY11; however, preliminary data and anecdotal report from those involved suggest that this increased level of care and awareness have improved care for those targeted by the initiative.
- A Patient Assistance Program was implemented through Gurley's Pharmacy in mid-December 2010. Since its inception, over 220 individuals have been registered for the program and over \$500,000 worth of medications have been requested to aid in the treatment of those served by agencies TDC contracts with to provide services.

Child Mental Health

- The Durham Center continues to collaborate with Durham Public Schools, Public Health, and Social Services to maintain the Child and Family Support Team (CFST) grant in seven schools in Durham. This initiative provides interagency teams to support at-risk students and their families to prevent school failure and out-of-home placements. Current planning is underway to implement System of Care within Durham Public Schools.
- Durham Center staff conducted 150 Care Reviews from July 2009—June 2010.
- The Durham Center/SOC child team provided technical assistance to 471 Child and Family Teams between July 2009-June 2010.
- The Child Community Collaborative has offered monthly supportive educational topics through guest speakers on various life domain topics including education, health, community programs and substance abuse. This format continues to improve networking and collaboration across public agencies, private providers and community programs to improve services to our youth and families.
- The Transition Care Review (developed March 2009) continues to focus on assisting in the transition for youth 17-19 years old. The review is offered 2x monthly and is attended by a specific group of review members who are involved in transition services including independent living, vocational rehabilitation and guardian ad litem. 10 transition reviews were conducted during July 2009—June 2010. We are currently working with DPS to improve the transition review process and increase utilization through DPS transition teams.
- Durham Center sponsored a Care Review retreat including the child, transition and adult review members to review and improve the forms and process of referral and follow-up for care reviews. This was in response to feedback as well as the merging of child and adult system of care.
- A specialty care review team was developed to assist with youth transition from the Youth Development Centers (YDC). This team partners with DJJDP to review and make recommendations for appropriate level of care and transition planning back into the community, often involving mental health placements. Six of these reviews occurred during January-June of 2010.
- A partnership between Durham Center and the Youth Home/Detention has been working to improve the mental health services for youth in detention who have mental health issues. The focus has been on improving training for staff, updated clinical materials to support group processes, and exploring the supervision of an intern to assist in care coordination.
- Care review orientation continues monthly to assist with preparation for individuals presenting or interested in being on the review team. This format has increased participation on the review teams including more community program members.
- Durham Center continues to be a consistent participant in the Adolescent Health Initiative—a planning grant was given for 2009 to develop a plan to improve the health, coordination of services and access for adolescents and their families to health services in Durham.
- A group was created in Durham of community members, providers, etc. to improve the support for LGBT (lesbian, gay, bisexual and transgendered) youth in Durham. Currently working with Durham Public Schools to implement a Safe Space training which would identify “safe” adults willing to support LGBT youth in the schools who are facing bullying or other negative consequences based on their sexuality.
- Continued partnership with the Council for Children with Special Needs, Health Dept, Durham Public Schools, Duke and other providers to improve services and address the gap for early childhood mental health, especially ages 3-6 years old.
- The Durham Center sponsored training using the best practice curriculum Stewards of Children to teach adults ways to prevent child sex abuse, one of the largest risk factors for emotional disturbance in children. The program began in spring 2010 with three classes. The Durham Center funded the initial facilitator training (with a match from Darkness 2 Light for 1,500 training kits to offer class at no cost, with a goal to reach “tipping point” of 5% of the Durham community, approximately 10,000 adults. Over 500 adults have received the training since the start of the program. 100% of respondents agreed that training was excellent/good and learned new ways to prevent child sex abuse.

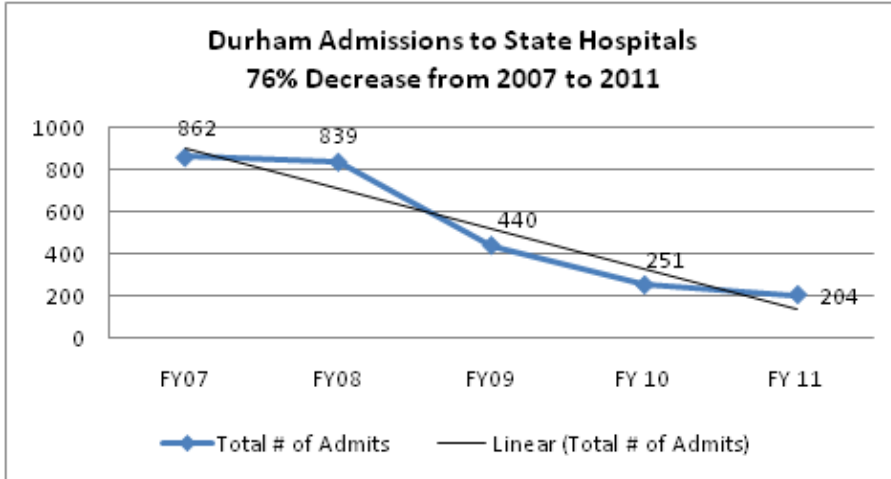
Developmental Disabilities

- Central NC-START (Systemic Therapeutic Assessment, Respite & Treatment) completed its second year of support in January 2011. This crisis model is for individuals with developmental disabilities who have severe behavioral challenges. 54 adults received support services from Durham, which has kept these individuals in their current residential setting 73% of the time. Also, a respite home continues to be utilized to its capacity, with 178 bed days provided in this home.
- Hosted county-wide trainings for case managers regarding effective person centered plans, and to residential providers regarding effective behavior management and crisis planning.
- Through funding provided to Durham Inclusion Support Services (DISS), 67 providers received training in increasing out-of-school options to 191 individual program staff. Also, 35 youth and parents received consultation in increasing out of school options. DISS provides inclusive evidenced-based and best practices for youth ages 3-17.

- Money Follows the Person enabled two individuals to transition to the community from institutional settings, with both receiving the CAP Medicaid Waiver. Money Follows the Person is a federally-funded initiative promoting successful transitions through additional funded support and collaboration with community stakeholders.
- Project SEARCH has continued to develop, with ongoing collaboration with Durham Public Schools, Vocational Rehabilitation, a Community Rehabilitation Provider and local business. Funding assistance from the Durham Center provided in 2010 has now planted the seeds for this exciting initiative for our young adults with developmental disabilities in Durham County. Project SEARCH establishes local business internships during a young adult's last year of school. It is a nationally recognized program, currently in use in 34 other states.
- Time Banks has continued to grow in the Durham Community. A total of 19 members with developmental disabilities have joined (through funding from The Durham Center) as well as numerous Durham citizens, with 63% giving and receiving services through the Time Bank. 37 services have been offered, with 29 different types within those services. Time Banks provides a means by which participants are organized within an exchange network in which everyone's contributions of time are valued equally and are tracked. The purpose of Time Banks is to mobilize groups of people to make better use of their time and skills to help one another, which includes all individuals with developmental disabilities.
- Respite vouchers provided to the Arc of Durham enable families of individuals with developmental disabilities to be more creative and flexible with respite. This gives caregivers and family members' time as necessary away from their ongoing support of the individual with disabilities. 65 respite vouchers were disbursed to 48 families.
- Voices Together, funded by The Durham Center, is now supporting 81 youth through inclusive programs affiliated with Durham Public Schools. Voices Together is a model of choral groups that promote increased social and communication skills for individuals with developmental disabilities.
- A Self-Direction initiative promoted by DMH/DD/SAS has resulted in an individual from Durham being the first statewide to pursue this exciting change in their own support model. In Self-Direction the person with developmental disabilities has direct control over their services and supports and makes their own decisions on how to spend the money approved in their person centered plan. This results in them having more choices and freedom in their lives.

2011-12 PERFORMANCE MEASURES

Performance Measure 1: Stabilize hospital admissions



Story Behind the Last Two Years of Performance:

- Keeping individuals in the community rather than sending them to the State psychiatric hospital is a priority for The Durham Center.
- The Durham Center's State hospital admissions have decreased by 76% from FY07 to FY 11 (with annualized data through December 2010). This equates to approximately 17 admissions per month, down from a high of over 85 per month in FY07.
- The decrease in State hospital admissions are due in large part to the development of a detailed workplan

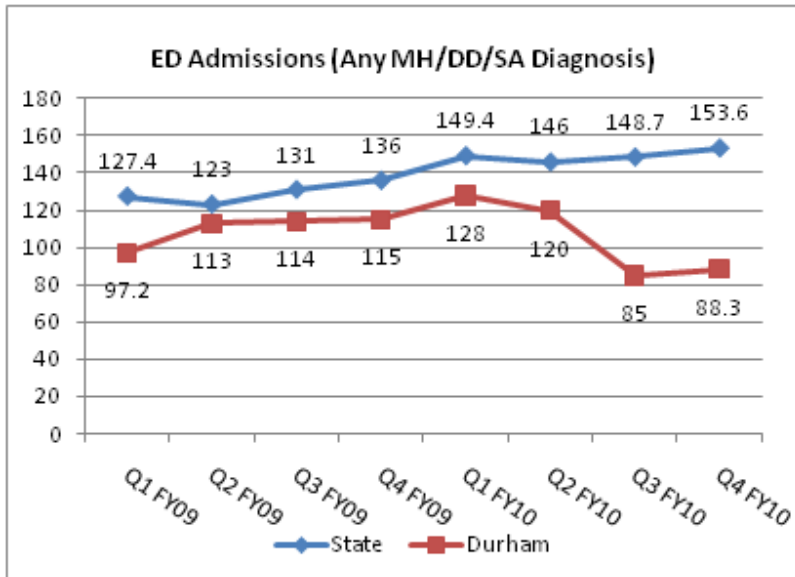
which includes several strategies; relocating Durham Center Access (DCA) Crisis Facility to a new larger, better equipped location, partnering with Duke University to establish Inpatient beds, an increase in transitional beds, continued work by The Durham Center DC Hospital Liaison, establishment of a Care Coordination Unit focusing on high risk/high cost populations, the Mobile Crisis Team, and the Psychiatric Walk-In Clinic located at DCA.

Strategies: What do you propose to do to improve program performance?

- Through our System of Care efforts find ways to better connect indigents who are homeless and in crisis and/or who step down from the hospital to needed services.
- Increase utilization of mobile crisis services responding to individuals experiencing a crisis in the home or community settings. This Team will also begin follow up with consumers that being discharged from the hospital to ensure they get to their initial treatment appointment.
- Utilize the Walk-in Clinic to ensure that individuals that are stepping down from the hospital have access to appropriate psychiatric medications in a timely manner.

- The Durham Center’s Care Coordination Unit (including the Hospital Liaison) will continue to work to connect individuals with appropriate community treatment, particularly those with frequent readmissions to hospitals or emergency rooms.
- Continue to pursue establishment of a contract for inpatient beds for youth.

Performance Measure 2: Reduce state hospital usage through community diversion



Story Behind the Last Two Years of Performance

- The target for FY11 and FY12 is less than 75 per 10,000 individuals. From Quarter One FY10 to Quarter Four of the same year, Durham’s emergency room admission rate decreased by 31%.
- Consumers in crisis who present to Durham Center Access (DCA) first rather than to a local emergency department have a better opportunity of being stabilized without being sent to a State hospital.
- DCA’s ability to accept involuntarily commitments has increased the number of individuals that can be diverted from the State hospital.
- The Durham Center has added a jail liaison and a social work position at DCA to ensure that individuals being discharged from those facilities

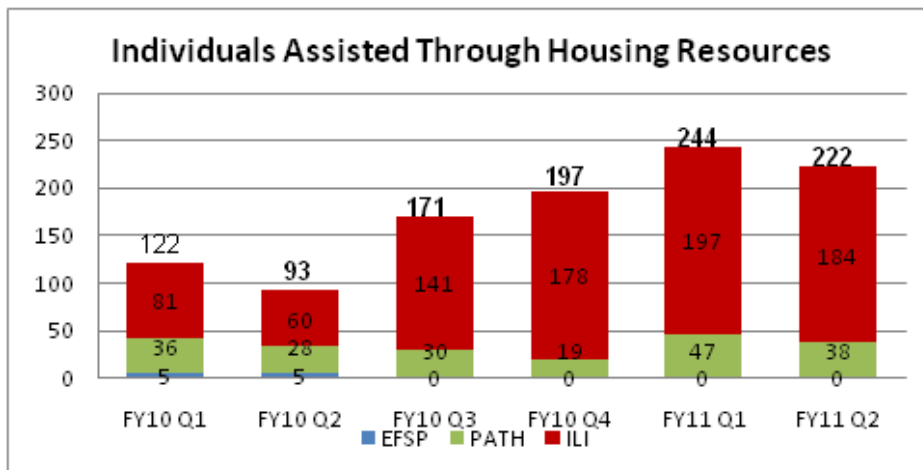
obtain an appointment and are connected to a provider. This facilitates a decrease in recidivism rates to emergency departments.

- The Durham Center has implemented additional rapid response beds for adolescents.
- Established effective working relationships with Duke University staff to ensure coordination of care efforts are focused and timely.

Strategies: What do you propose to do to improve program performance?

- Durham Center Access will continue to educate the community about how to access services.
- Continue to work with law enforcement to promote pre-booking diversion through Durham Center Access (instead of emergency department) for individuals that are more appropriate for treatment than incarceration.
- Continue to work closely with other inpatient facilities to identify diversion opportunities.
- Increase utilization of mobile crisis services responding to individuals experiencing a crisis in the home or community settings. For individuals that need involuntary commitment, they will divert them.
- The Durham Center will continue to work with provider agencies to develop appropriate crisis plans for individuals that they serve.
- Seek funding for child inpatient beds.

Performance Measure 3: Decrease the number of individuals who are homeless or at risk of homelessness



ILI = Independent Living Initiative (emergency funding to stabilize housing for individuals in The **PATH** = Assertive outreach to individuals who are homeless and have a mental illness **EFSP**=Emergency Food & Shelter Program

Story Behind the Last Two Years of Performance:

- The Durham Center has put a significant amount of energy and resources into assisting the

individuals we serve have stable and safe housing. Stable housing is an essential part of treatment for individuals with mental illness, developmental disabilities and substance abuse issues. Individuals with these disabilities often have trouble finding affordable housing due to low incomes and limited disability benefits.

- The Durham Center has a number of housing programs that we support to ensure there are affordable housing options for individuals in our system.
- Due to some funding restored by DMH/DD/SAS in FY09-10, some funding was placed back into housing, resulting in an increase in the second half of the year. Funding increased in FY11 (PATH numbers for Q2 not yet available)

Strategies: What do you propose to do to improve program performance?

- Identify possible grant funding to address the significant housing needs of individuals in services.
- Continue to evaluate our housing strategies to determine effectiveness and make adjustments for improvement where needed.
- Continue to provide support for programs that utilize best practices approaches to housing.
- Identify funding sources to increase the number of supportive housing developments for individuals with special needs.
- Collaborate with agencies that have housing resources that are appropriate for individuals with disabilities (i.e. Veterans Administration)
- Continue to train providers on the importance of housing during treatment and the available resources in the community.
- Increase the number of permanent supportive housing options (i.e. Shelter Plus Care).
- Increase the number of homeless individuals that have access to disability benefits through a number of new approaches, such as the SOAR Program (a national best practice program that increases the likelihood of successfully accessing disability benefits in expedited manner for individuals that are homeless). This allows individuals access to income that can stabilize housing.

SOCIAL SERVICES

MISSION

Created by the North Carolina General Assembly and sustained with public funds, the Durham County Department of Social Services' vision is a community where families achieve well-being. The department's mission is "Partnering with families and communities in achieving well-being through prosperity, permanence, safety and support." The department operates with a Core Values Statement:

The staff of the Durham County Department of Social Services makes this commitment to individuals, families, our community and ourselves:

- We will show **RESPECT** by recognizing the importance of each individual, treating everyone with kindness, dignity and compassion.
- We will demonstrate **INTEGRITY** by being honest, dependable, trustworthy, responsible and accountable for performance and results.
- We will cultivate **PARTNERSHIP** as the best way to help individuals and families develop their strengths and meet their needs, while working together to achieve more.

PROGRAM DESCRIPTION

Administration

This cost center includes the activities of the Program Support and Accountability Division and the Communication, Development and Customer Information Division. These divisions support the department's direct services staff, which carry out the department's mission.

Key components of the Program Support and Accountability Division include:

- Accounting
- Budget preparation
- Information technology management and planning
- Information technology support
- Facility support
- Risk management
- Planning
- Evaluation

Key components of the Communication, Development and Customer Information Division include:

- Management of internal and external communications
- Staff training
- Organizational development
- Customer service
- Customer information center
- Results based accountability (RBA)

Services

These programs provide for the protection of abused and neglected children and adults, the provision of services to prevent unnecessary institutionalization of disabled and elderly residents, Work First support services, school and community social work services, and child day care subsidy. Services and programs include:

Adult Social Work Services - provides services that allow disabled and elderly adults to remain in their own homes; protection of adults from abuse, neglect, exploitation; in-home supportive services to avoid unnecessary institutionalization; supervision of adult care homes and facilities; and financial assistance to cope with crisis situations related to health, loss of employment, housing, and energy problems.

Child Protective Services - Receives screens and investigates reports of suspected abuse, neglect and dependency of children from birth to 18 years old; provides intensive in-home services to families at risk of or with a history of child abuse, neglect or dependency.

Social Services

Business Area: 5300

Summary	2009-2010 Actual Exp/Rev	2010-2011 Original Budget	2010-2011 12 Month Estimate	2011-2012 Department Requested	2011-2012 Commissioner Approved
▽ <i>Expenditures</i>					
Personnel	\$22,263,939	\$22,902,647	\$22,622,841	\$23,055,771	\$22,982,751
Operating	\$388,366,782	\$27,045,314	\$33,202,973	\$31,441,532	\$28,126,343
Capital	\$0	\$569,247	\$0	\$569,247	\$569,247
Transfers	\$0	\$0	\$0	\$0	\$68,000
Total Expenditures	\$410,630,720	\$50,517,208	\$55,825,814	\$55,066,550	\$51,746,341
▽ <i>Revenues</i>					
Intergovernmental	\$393,548,984	\$33,632,757	\$38,027,037	\$37,285,071	\$33,289,396
Contrib. & Donations	\$69,442	\$187,561	\$46,718	\$43,285	\$43,285
Service Charges	\$157,700	\$164,476	\$145,176	\$207,096	\$207,096
Other Revenues	\$91,625	\$0	\$63,943	\$35,000	\$35,000
Total Revenues	\$393,867,751	\$33,984,794	\$38,282,874	\$37,570,452	\$33,574,777
Net Expenditures	\$16,762,969	\$16,532,414	\$17,542,940	\$17,496,098	\$18,171,564
FTEs	487.00	475.45	475.45	486.45	475.45

Child Foster Care and Adoptions - Provides for the safety and well-being of youth placed in the legal custody of the Durham County Department of Social Services by the juvenile court, and finds permanent, adoptive homes for youth who cannot be reunited with their families or relatives. Recruits, trains and supports foster and adoptive families.

Durham's Alliance for Child Care Access (DACCA) - A unified child care subsidy system responsible for the administration of child care scholarships, transportation services through Smart Start Transportation and access to resource and referral information. The collaboration is governed by a Leadership Team consisting of Directors from the partner agencies: Durham County DSS, Child Care Services Association, Operation Breakthrough and Durham's Partnership for Children. In addition to providing financial subsidy, the program also provides training and technical assistance to contracted child care providers.

Work First Employment Support Services - Provides services to current and former Work First recipients, which enable families to gain economic self-sufficiency by helping them find and retain employment.

Family Crisis and Adult ACCESS Services - Focuses on assisting families and elderly and disabled adults with counseling, information and referral as well as temporary financial assistance to cope with crisis situations related to health, loss of employment, housing and energy problems.

Community Initiatives - Partners with agencies including, Duke University Health System and Durham Public Schools, to provide social work services in the community.

Public Assistance

These programs provide entitlement benefits for health access and nutrition services, foster care and adoption payments as well as cash assistance through Work First. The programs are **Food Assistance; Medicaid and North Carolina Health Choice for Children; and Work First Family Assistance**. The Food Assistance program provides nutrition assistance to eligible families and individuals through an electronic benefit card. The Medicaid and North Carolina Health Choice for Children programs provide health insurance to eligible families and individuals. The Work First Family Assistance program provides Work First cash assistance to families to meet their basic needs of cash, shelter and medical assistance.

Child Support Enforcement

This program ensures that non-custodial parents provide financial and medical support for their children. Child Support Enforcement services include location of non-custodial parents and their assets; establishment of support orders; establishment of paternity, if necessary; collection and distribution of payments; and enforcement of legal child support obligations.

2011-12 HIGHLIGHTS

- Various operating expenditures were reduced in order to reach the targeted budget reduction.
- Funding for a joint homelessness prevention initiative between the City of Durham and Durham County to ensure that City and County activities compliment and adhere to the Federal Strategic Plan to End and Prevent Homelessness, *Opening Doors*. One position and financial assistance has been funded in the DSS budget.

2010-2011 ACCOMPLISHMENTS

Program Support and Accountability Division

- Continued partnership with other departments in planning for the new Human Services Complex.
- Provided effective contract management for more than seventy (70) contracts, ensuring fiscal and performance accountability.
- Continued to analyze time entry in order to draw down all revenue.
- Continued to scan records (over 9 million images).
- Cleared independent audit with no material weaknesses.
- Maximized resources effectively, leaving very little money unspent from non-county sources.
- Assisted all divisions with planning and data collection.
- Provided timely and effective responses to all staff with regards to continuously improving work environments.

Customer Accountability Division

- Implemented a contract monitoring process to increase communication with contract partners and accountability for services provided to DSS clients through contract partners
- For the first time, issued Requests for Proposals for contracted services to create transparency, accountability and potential cost savings in our contracted services. Responses were received from 50 organizations for 21 RFP's.
- A Quality Assurance and Training unit was established to strengthen quality improvement agency wide by strengthening the quality control records review process to provide greater information to program leaders to improve service delivery and to inform our improvement processes through program training.
- Program Integrity exceeded all state goals by completing 807 investigations, establishing 475 claims, and collecting \$405,992 in FY2010. They also established \$622,265 in claims with individual claim amounts ranging from \$22-\$15,900. Food and Nutrition Services pending referrals were maintained at less than 3% overdue for the fiscal year, exceeding the State expectation of 10%.
- Customer Information Staff began scanning all mail that comes to the agency through US Mail and the lobby for Food and Nutrition Services and Adult Medicaid. As other program areas begin scanning their case files, incoming mail is being scanned as well to help the agency meet its goal of maintaining paperless case records when we move in to the Human Services Complex in 2012.
- DSS published quarterly electronic Results Based Accountability (RBA) reports via email and on the agency's website. The reports highlighted the "public square test indicators" of progress in reaching key agency-wide RBA goals. Program-specific RBA reports were also shared with the DSS Board and DSS Management Team on a rotating basis.
- DSS published a quarterly newsletter providing information on agency events, programs, and special initiatives.
- DSS published an Annual Report of agency accomplishments, challenges and measurable indicators of success.

Adult Social Work Services

- Played a role in merging Adult System of Care with the Children's System of Care Network.
- Managed an award-winning web site on adult care homes in Durham County
- Continued to increase the number of elderly and disabled adults that remain in their own homes as a result of in-home and community services.
- Partnered with the Durham Partnership for Seniors in a Results Based Accountability grant designated to develop a hard copy Senior Resource Guide, which is also found on the Durham System of Care website.

Child Placement and Supportive Services

- Exceeded State goal (21) for number of youths leaving foster care through adoptions (30 youths)
- Increased the number of children diverted from entering foster Care (39 children placed in kinship arrangements).
- Decreased the number of children in foster care.
- 96.2% of youths remain in same school or day care upon entry into foster care.

Child Protective Services

- The repeat maltreatment rate in Durham County (1.4%) continues to be far below the standard set by the Federal government and the statewide rate.
- Timely initiation of family assessments (98%) exceeding State goal of (94%).
- Enhanced CPS In Home Services/Kinship Care linked with Emergency Assistance and Durham Public School to better serve families
- Added supervisory staff to more efficiently manage the DSS School Social Workers
- Continued partnerships with community agencies to prevent child abuse and neglect.
- No child abuse deaths during this year.
- No abuse with Prevention cases (98%) exceeding the State goal of (94%)
- Children remained in kinship homes (99%) exceeding the State goal of (95%)
- Developed an automated CPS Intake system (Dashboard) that will track and monitor State timeframes and merge demographic information gather at time of report which will populated into monthly statistics, face sheet and Laser fiche.

Durham's Alliance for Child Care Access (DACCA)

- 97% of children ages 0-5 are placed in child care facilities with 3, 4, or 5 star ratings; the average star placement for a child in FY 08 is 3.73.
- 100% of preschool children receiving scholarships are in regulated care

Child Support Enforcement

- Durham County child support collected 97.4% of their goal for fiscal year 2009-2010.
- Established paternity in 102.7% of cases. Goal 100%. Exceeded the goal by 2.7%.
- 86.51% of cases have an order for child support. Goal 86.83%.
- Collected 68.20% of current support owed. Goal 68.20%.
- Electronic House Arrest Order revised to review cases every two weeks. This ensures compliance with job search and the monitoring process.
- Assigned a Child Support Agent to assist the court in implementing a New Life Court to ensure that non-custodial parents ordered into the program located employment, received drug screenings, drug counseling and other services to maintain a state of sobriety and employability.
- Initiated a group interview process for custodial and non-custodial parties.
- Durham County CSE has met Self-Assessment goals each of the past 24 months in the following areas:

Durham exceeds the State Average in all areas.

- Enforcement goal – 75% Durham – 78.52%
- Establishment goal – 75% Durham – 80.26%
- Expedited (12 months) goal – 90% Durham – 96.85%
- Expedited (6 mos) goal 75% - Durham – 96.1%
- Interstate goal 75% - Durham 86.71%
- Medical Support goal 75% - Durham – 82.56%
- Rev/Adj goal 75% - Durham – 99.12%
- Rev/Adj needed 75% (goal 75%) - Durham – 95.96%

Note: These scores measure timeliness and quality of the actions taken in a case.

- New Life Court was revamped by adding a more experienced coordinator and the additional components of employment, probation, drug and education partners. This will enhance CSE ability to refer NCP's to programs that will assist them to overcome barriers to supporting their children. There is also an accountability component enforced by the court that sends a message that child support is serious business.

Work First Employment Support Services

- The Work First Team (WFFA and WFES) achieved an All Parent Participation Average Rate of 59.70% and the goal is 50% and a Two Parent Household rate of 42.19% and the goal is 90%.
- 128 recipients entered employment .
- 152 families received Benefit Diversion payments (assistance given to families diverting them from signing on as Work First Participants).
- Social Workers provided services to an average of 388 individuals per month.

Family Crisis and Adult ACCESS Services

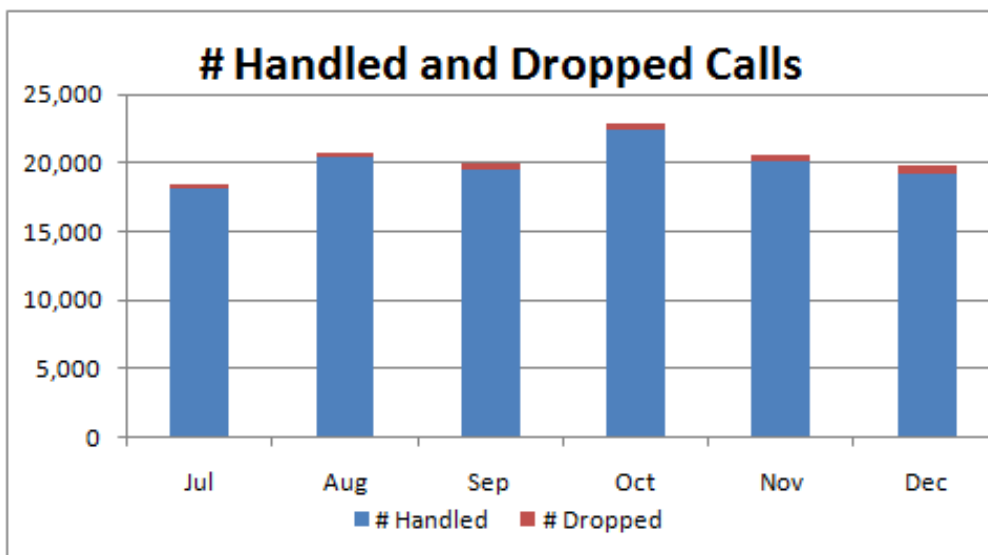
- Provided heating/cooling and eviction relief assistance to a record high number of families
- Developed financial management classes for individuals who experience frequent financial crises.
- The Family Crisis Unit has seen 6,660 families
- Prevented 3,697 families from being homeless
- Spent \$982, 402 in Emergency Assistance
- Continue to maintain sufficient staff to serve the Blind populations
- Continue to maintain sufficient staff to serve the Latino populations

Community Initiatives

- Continued an innovative partnership with Durham Public Schools and Durham County Public Health to assist students at risk of academic failure or out-of-home placement
- The county received an award from the North Carolina Association of County Commissioners for the Computer 4 Kids Program coordinated from the Community Initiatives Section.
- 240 computers were distributed to kids in the Durham Community.
- The homeless program provided services to over 600 children in Durham Public Schools.
- The Share your Christmas Program provided gifts to over 4,600 individuals.
- The Adolescent Parenting Program received a small grant from JCPC. We also received an additional \$1,500 to support the summer enrichment program for program participants.
- Community Initiative partnered with the Volunteer Program to have a the Book bags for Kids Extravaganza for back to school

2011-2012 PERFORMANCE MEASURES

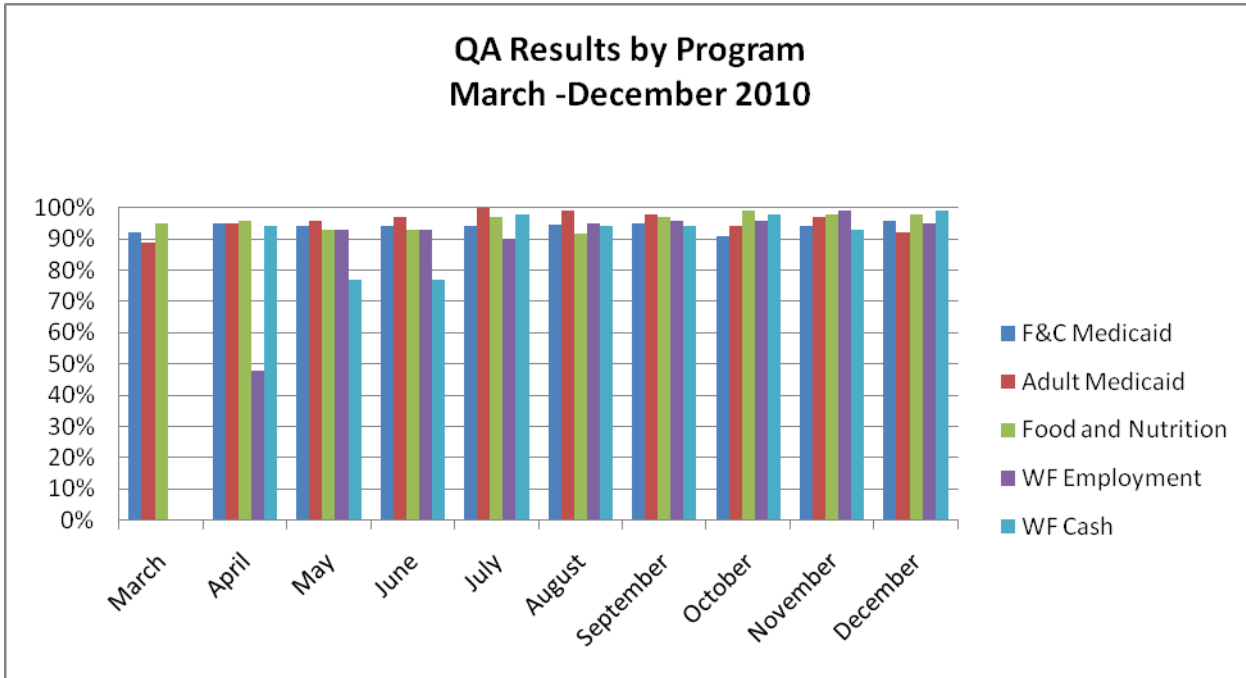
Performance Measure 1: Increase the percentage of handled calls in the Call Center indicated by less than 5% of calls being dropped



Story Behind Our Results:

- Customer Service work processes have been changed dramatically in the past five years.
- Implemented an automated client check in/assignment system that began in January 2010 for most programs.
- The Call Center's hours of operation were adjusted to 7:15am – 5:45 pm in May, 2008. Being open for extended hours resulted in a significant decrease in dropped calls. Since August 2009, Call Center staff has dropped under 5% of calls consistently.
- Work plan expectations are clear about dropped calls and customer service ratings
- More bilingual staff has been added and continues to recruit bilingual preferred.
- Cross-trained staff among CIC functions

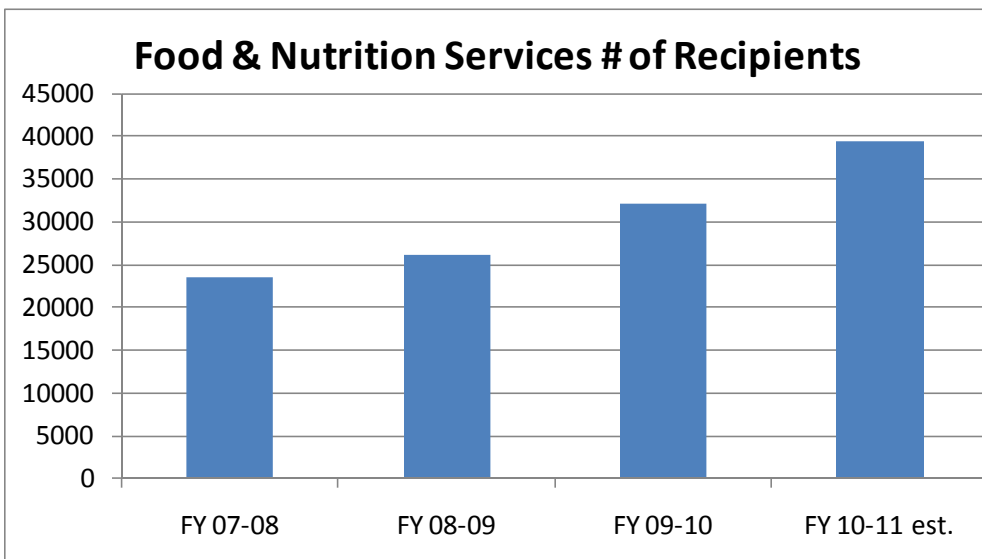
Performance Measure 2: Employees will maintain a 90% or above Quality Assurance Accuracy rate



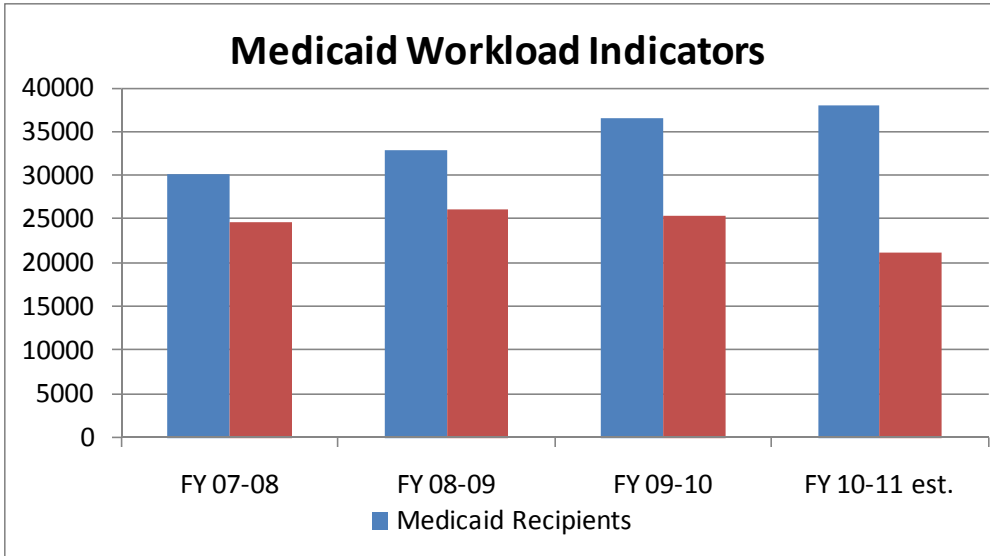
Story Behind Our Results:

- Created a Quality Assurance and Training Unit to conduct independent record reviews from outside of program areas
- Connection to program training to inform where improvements are needed
- Coordination with State Program representative and State level records reviews

Performance Measure 3: Food & Nutrition Cases and Recipients



Demand for assistance in putting food on the table has been dramatic since the start of the recession (and even prior). The number of people receiving FNS in March 2011 is 39,487. This is an indicator of economic crisis in our community. The increased demand is driving the need for more staff to support this critical function, which has required time standards for processing applications. FY10-11 figures are actual through March 2011.



The Medicaid program provides access to health care coverage for nearly 40,000 Durham residents who would otherwise be uninsured. The number of people on the program and the number of people applying for assistance is continuing to grow. We anticipate this figure will grow with the expansion of Medicaid through national Health Care Reform in 2014 as well. The number of applications combined with ongoing case management is the major drivers of workload for the staff that support this program. FY10-11 estimate figures are actual through March 2011.

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JUVENILE CRIME PREVENTION COUNCIL (JCPC)

PROGRAM DESCRIPTION

The **Juvenile Crime Prevention Council (JCPC)** works in partnership with the United States Department of Justice’s Office of Juvenile Justice and Delinquency Prevention (OJJDP) to improve the lives of youth by reducing and preventing juvenile crime. Durham’s JCPC prioritizes the needs of youth in Durham County and distributes funds to local programs. JCPC focuses on gang prevention and intervention.

These funds are allocated to Durham County by the North Carolina Department of Juvenile Justice and Delinquency Prevention (DJJDP) from their Intervention/Prevention Funding. This money is available only for programs serving delinquent, undisciplined, and youth at-risk of court involvement, and is restricted to services providing intermediate and community sanctions to juvenile court for delinquent and at-risk youth. Programs are required to offer treatment, rehabilitation, and/or educational enrichment as prioritized in the publicly advertised “Request for Proposals” (RFP) attached.

The Durham JCPC conducted the funding allocation process in accordance with the relevant N.C. General Statutes, and the N.C. Department of Juvenile Justice and Delinquency Prevention (DJJDP) procedures and guidelines. Once the applications were received, the Durham County Juvenile Crime Prevention Council (JCPC) voted to adopt the Durham Annual Funding Plan.

The administrative oversight of this program is managed by the Criminal Justice Resource Center (CJRC).

The following programs are recommended for funding contingent to inclusion in the State of North Carolina budget:

- Durham Teen Court and Restitution \$170,000
- Evidence Based Trauma Assessment and Treatment (Child and Parent Support Services) \$12,000
- Parenting of Adolescents (Exchange Clubs’ Family Center) \$108,000
- The P.R.O.U.D (Personal Responsibility to Overcome with Understanding and Determination) Program \$50,000
- Rites of Passage Durham Business and Professional Chain) \$8,400
- Young Warriors Athlete Scholarship (Budo Karate House) \$22,000
- Durham Mediation Center (DMC) Juvenile Justice Project (Women In Action) \$15,000

Also, these programs and administrative functions are recommended for funding contingent to inclusion in the State of North Carolina budget but are located within other County agencies:

- Adolescent Parenting Program (Department of Social Services) \$12,000
- Project BUILD - Building Uplifting and Impacting Lives Daily (Cooperative Extension) \$67,963
- Durham County Psychological Assessment (The Durham Center) \$55,803
- Juvenile Crime Prevention Council Administrative Costs (Criminal Justice Resource Center) \$15,500

Funds Center: 5800273000

Summary	2009-2010 Actual Exp/Rev	2010-2011 Original Budget	2010-2011 12 Month Estimate	2011-2012 Department Requested	2011-2012 Commissioner Approved
▽ <i>Expenditures</i>					
Operating	\$387,151	\$424,830	\$424,830	\$385,400	\$385,400
Total Expenditures	\$387,151	\$424,830	\$424,830	\$385,400	\$385,400
▽ <i>Revenues</i>					
Intergovernmental	\$389,151	\$424,830	\$424,830	\$385,400	\$385,400
Total Revenues	\$389,151	\$424,830	\$424,830	\$385,400	\$385,400
Net Expenditures	(\$2,000)	\$0	\$0	\$0	\$0

HOMELESSNESS SERVICES

PROGRAM DESCRIPTION

The Homelessness Services fund center was created to monitor funding for the 10-Year Results Plan to End Homelessness and Urban Ministries of Durham. In FY 2011-2012, funds for Homelessness Services will be allocated in the Department of Social Services and County Manager's Office funds centers.

In past years, Durham County funded a contract with the Durham Affordable Housing Coalition to implement the 10 Year Results Plan to End Homelessness. In FY 2011-2012, funds are budgeted in the Department of Social Services based on recommendations from the City of Durham's Department of Community Development to support other coordinated efforts to end chronic homelessness, including the provision of permanent, supportive housing.

The mission of Urban Ministries of Durham is to provide food, clothing, shelter and supportive services to neighbors in need. Durham County supports the Community Shelter at Urban Ministries of Durham, housing 81 beds for men, 30 beds for women and 9 rooms, each with a private bath, for families. In emergency situations, the shelter can house up to 175 individuals. The organization also offers a Community Kitchen, Food Pantry and Clothes Closet as well as programs in addiction recovery and job training. In FY 2011-2012, \$164,440 is budgeted in the County Manager's Office for a service contract with Urban Ministries of Durham.

Funds Center: 5800273100

Summary	2009-2010 Actual Exp/Rev	2010-2011 Original Budget	2010-2011 12 Month Estimate	2011-2012 Department Requested	2011-2012 Commissioner Approved
▽ <i>Expenditures</i>					
Operating	\$222,435	\$217,042	\$202,469	\$164,440	\$0
Total Expenditures	\$222,435	\$217,042	\$202,469	\$164,440	\$0
▽ <i>Revenues</i>					
Total Revenues	\$0	\$0	\$0	\$0	\$0
Net Expenditures	\$222,435	\$217,042	\$202,469	\$164,440	\$0

COORDINATED TRANSPORTATION SYSTEM

MISSION

The Durham County Center of North Carolina Cooperative Extension helps individuals, families and communities use research-based information and county resources to improve the quality of their lives.

PROGRAM DESCRIPTION

North Carolina Cooperative Extension is an educational partnership between county government and the state's land grant universities – North Carolina State University and North Carolina Agricultural and Technical State University – and the federal government. Local issues are addressed through educational programs delivered at the county center as well as in the community.

Coordinated Transportation is funded by the North Carolina Department of Transportation to assist in assuring accessibility to transportation for citizens with special needs and those living outside the urban sections of the community. Human services and nonprofit agencies use this funding to reduce transportation costs for citizens served. Staff, in conjunction with the Transportation Advisory Board, identifies needs, leverages resources and evaluates options for helping agencies and citizens meet their transportation needs.

2010-11 ACCOMPLISHMENTS

- Durham County ACCESS provided approximately 53,357 trips to residents of the county. These included services for employment, general public and human services passengers.
- Promoted options for mobility service, responsive to the needs of all citizens in the community.
- Submitted and received approval for a Targeted Transit Assistance Program (5310) grant to provide additional trips for FY11 and FY12 to residents of Durham County. Service will begin after North Carolina Department of Transportation awards contract. Also submitted Job Access/Reverse Commute (5316) grant application to increase employment-related trips for residents. Both grants will be new funding sources for Coordinated Transportation.
- The system increased overall ridership throughout the County.

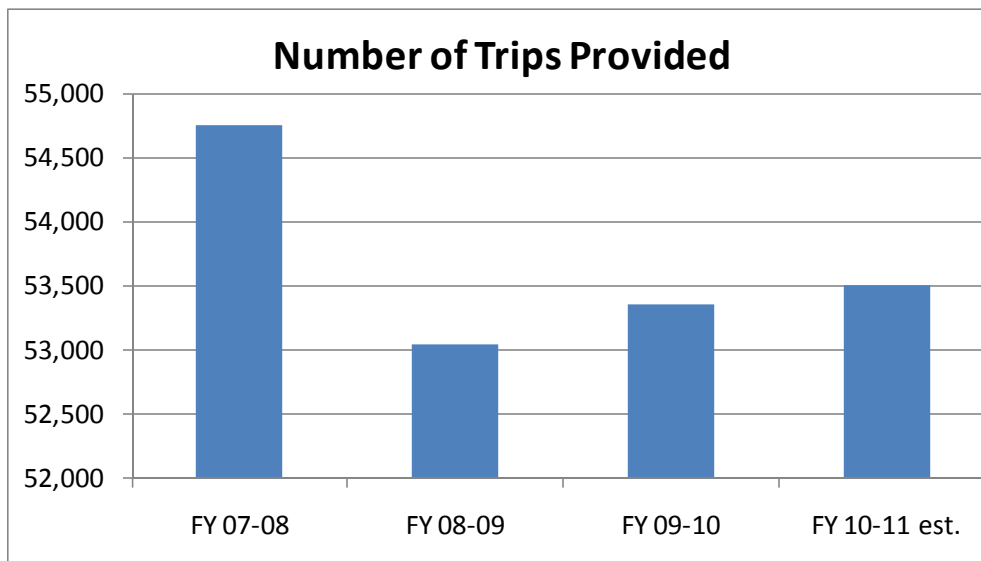
Coordinated Transportation System

Funds Center: 5800650000

Summary	2009-2010 Actual Exp/Rev	2010-2011 Original Budget	2010-2011 12 Month Estimate	2011-2012 Department Requested	2011-2012 Commissioner Approved
Expenditures					
Personnel	\$71,887	\$155,500	\$102,945	\$74,711	\$77,964
Operating	\$208,700	\$221,374	\$214,275	\$327,040	\$327,040
Capital	\$14,905	\$84,800	\$110,857	\$48,500	\$48,500
Total Expenditures	\$295,492	\$461,674	\$428,076	\$450,251	\$453,504
Revenues					
Intergovernmental	\$288,072	\$443,737	\$465,501	\$458,806	\$458,806
Total Revenues	\$288,072	\$443,737	\$465,501	\$458,806	\$458,806
Net Expenditures	\$7,420	\$17,937	(\$37,424)	(\$8,555)	(\$5,302)
FTEs	2.00	2.00	2.00	2.00	2.00

2011-12 PERFORMANCE MEASURES

Performance Measure: Number of elderly and disabled citizens transported via Coordinated Transportation



Story Behind the Last Two Years of Performance

The number of trips provided each year to Durham County residents through Coordinated Transportation has remained relatively flat due to fairly flat funding for the program. There was a decrease in service between FY 07-08 and FY08-09 in part due to transfer of passengers to more appropriate services. Since that time there has been a slight increase each year due to increased efficiencies in provision of service and marketing of services. Staff continues to submit grant applications and seek other funding sources to increase level of service. There has been strong coordination and collaboration with other transportation service providers to increase service capacity for residents in the County.

Strategies: What do you propose to do to improve performance?

- Continue collaborative efforts with human services agencies and non-profits to increase service efficiency.
- Continue to pursue grant funding opportunities to increase funding for additional service.

HUMAN SERVICES NONPROFIT AGENCIES

MISSION

The mission of Durham County government is to enhance the quality of life for its citizens by providing education, safety and security, health and human services, economic development, and cultural and recreational resources.

PROGRAM DESCRIPTION

Durham County is committed to providing financial assistance to those nonprofit agencies which assist it in carrying out its mission. Nonprofit agencies also are asked to focus on one or more of Durham County's Results Based Accountability outcome areas. These outcomes were adopted to engage the community in making broad-based change:

- Everyone is safe.
- Everyone is healthy.
- Children are ready for and succeeding in school.
- Everyone enjoys a prosperous economy.
- Everyone has access to adequate, safe and affordable housing.
- Everyone enjoys a community that is vibrant, rich in aesthetic beauty and embraces and promotes its cultural heritage.
- Everyone enjoys a healthy environment.
- Senior adults have optimum choices for the highest quality of life.
- Everyone enjoys sustainable, thriving neighborhoods with an efficient and well-maintained infrastructure.

Included in this funds center are nonprofit agencies and other nongovernmental agencies whose work complements the efforts of the county's human service agencies and whose mission is the public welfare of the residents of Durham County. The following agencies are budgeted within this cost center:

- Big Brothers Big Sisters of the Triangle
- Child and Parent Support Services
- Child Care Services Association
- Dress for Success Triangle
- Durham Center for Senior Life
- Durham Companions
- Durham Congregations in Action
- Durham Council for Children with Special Needs
- Durham Economic Resource Center (DERC)
- Durham Interfaith Hospitality Network
- Durham Literacy Center
- El Centro Hispano
- Elna B. Spaulding Conflict Resolution Center (formerly WoMen in Action for the Prevention of Violence and Its Causes)
- Food Bank of Central and Eastern North Carolina
- Genesis Home
- Inter-Faith Food Shuttle
- Operation Breakthrough
- Planned Parenthood of Central North Carolina
- Reality Ministries, Inc.
- Salvation Army
- Senior PHARMAssist
- Threshold Clubhouse, Inc.
- Triangle Radio Reading Service
- Triangle Residential Options for Substance Abusers (TROSA)

Detailed funding information for each nonprofit agency is listed in the Appendix.

Human Services Nonprofit Agencies

Business Area: 5800

Summary	2009-2010 Actual Exp/Rev	2010-2011 Original Budget	2010-2011 12 Month Estimate	2011-2012 Department Requested	2011-2012 Commissioner Approved
▽ <i>Expenditures</i>					
▷ Operating	\$646,286	\$631,640	\$631,640	\$1,054,384	\$601,801
▷ Total Expenditures	\$646,286	\$631,640	\$631,640	\$1,054,384	\$601,801
▽ <i>Revenues</i>					
▷ Total Revenues	\$0	\$0	\$0	\$0	\$0
▷ Net Expenditures	\$646,286	\$631,640	\$631,640	\$1,054,384	\$601,801

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