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[00:00:03] All right, well, good afternoon, and welcome to our Health and Human Services Committee meeting. We are very delighted for our agenda today, especially excited for this first portion. I know a few of us got a chance to preview or view the presentation of the gaps, gains, and goals for women in the county.

[00:00:26] I think for some of our supervisors, it may be new. Also want to give heads up we have a few this week or in and out of committee meetings as they're attending high school graduations So they have as short as they will be watching it from home So to that before we kick off with this I do want to turn it over to deputy county executive Chris Leonard I know I've gotten a few questions on the CCFP process following our Our follow-on motion or the chairman's all on motion and he wanted to give us a little update on where that is Sure, sure real quick. Thank you Chairman Palchik

[00:01:05] Chris Leonard deputy County executive With regards to the CC fact for the last three weeks since we've made a notification We've been working individually with each of the agencies each of the organizations that both got funded That had some concerns maybe about what the the funding levels they got and those that did not get funded especially those that did not get funded that are currently funded in the current cycle.

[00:01:29] So we're working through all of that. I encourage you, as you have questions, concerns, let me know. Let, well, Sarah Allen for about the next three weeks know in NCS, but certainly reach out to me if you have specific questions. I know Sarah and her team has talked to your chiefs of staff via the Friday meetings that we have once a month with your staff. So we're still working through all of that with regards to the specific budget guidance that we received obviously the last three weeks have been focused on the current cycle we do have a meeting tomorrow with the chair and the

[00:02:03] vice chair of the ccfac to go over in preparation for next week's ccfac full ccfac meeting we'll be talking a little bit about what what the budget guidance kind of we're putting some definitions around what the review is going to look like and then that will kick start discussions as far as is making sure we have community organizations involved in that work group and CCFAC members and certainly county staff as well.

[00:02:29] So we're just going to basically be kicking off the discussions next Tuesday at the regular CCFAC meeting, and then we anticipate that to continue on throughout the fall, and we'll certainly keep the board updated as that progresses. Excellent.

[00:02:44] Thank you so much for your work on that and your staff as well. And if we could not allow Sarah to retire, we would, But I know we'll be in good hands on that. So now moving on to our agenda, item one, the status of women and girls in Fairfax County.

[00:03:01] And we have with us here today, Carla Bruce, our chief equity officer, Michelle Gregory, the division director for DMV, Tony Zollicoffer, our division director for the Department of Family Services. I will try not to use the acronyms. And is it Alyssa Batchelor?

[00:03:20] Lisa, she is vice chair and at-large commissioner for Commission for Women, and I also see Michael Beckett's here, the director of the Department for Family Services. So I will turn it over to you. Good morning.

[00:03:35] Thank you, Chairman Palczyk and Chairman McKay, members of the Board of Supervisors, Carla Bruce, the county's chief equity officer. And I'm really excited to be able to be here today with my colleagues to discuss with you the study recently conducted on the status of women and girls in Fairfax County, you might recall back in February of 2022, the county, several of you were engaged by community advocates to support the CEDAW recommendations. In CEDAW, I actually looked

[00:04:14] it up because I keep forgetting, the Committee on the Elimination of Discrimination Against Women through the United Nations is to sign off on those and I think asked a very important question in response to those recommendations, which is those are all very important, but how are women and girls in Fairfax County doing? And because what we want to express is our understanding of that about how women and girls are doing and then our strategy to support the success of women and girls. Doing this study is very much in alignment with our focus of One Fairfax and the One Fairfax

[00:04:50] racial and social equity policy and also alignment with the countywide strategic plan. And so in working with staff to look at our current data and then in working with UVA to analyze data across a number of factors to get a better sense of how women and girls in Fairfax County are doing,

[00:05:11] I think it just informs our ability to focus on women and girls from an intersectional perspective, recognizing that women and girls are not just a subpopulation, but represent the multiple

identities that are represented in our One Fairfax policy to help to inform our strategy and our ability to target appropriate levels of interventions to ensure the success of women and girls in Fairfax County.

[00:05:38] So I will hand it now over to Tony Zollicoffer, who expertly led our group and our work across agencies to assemble this important report. So hand it over to Tony. Thank you.

[00:05:54] Thank you, Carla. Tony Zollicoffer, Division Director for Domestic and Sexual Violence Services in the Department of Family Services. And it is really a pleasure and honor to just walk through this report and walk through the steps that it actually took us to get to this place.

[00:06:11] And so I wanted to sort of start with a little bit of history about how we got to where we are, and then we'll talk a little bit about the study and some key findings, and then some next steps. As you can see from this slide, it's really small, but in terms of who was a part of this process, in addition to the co-leads that are here, there was really an interdepartmental and interdisciplinary group that actually worked with the researchers to help us to identify

[00:06:47] the key findings, the key indicators, and to really hold accountable the researchers in looking at the results. And so, as you can see, there was representation from CSB, from the public schools, health, libraries, the police department was there, housing, Department of Human Resources, NCS, Park Authority, Fire and Rescue, and then CFW was our community partner as well.

[00:07:15] So, you know, there were really many, many voices at the table that led us through this. Just a little bit of context before we dive into the study. Carla alluded to how this started. And so, yes, back in February of 2022, CEDAW actually came before many different supervisors, and some of you, I'm sure, was contacted by CEDAW, to ask to sign a resolution.

[00:07:44] And it was more of an international resolution with recommendations, some with some local relevancy and some not so much. And so as a response to that, BOS, you guys tasked the work group to do a walk, a crosswalk between the CEDAW recommendations and the county's current and future efforts.

[00:08:10] And so we completed that crosswalk in about October of 2022. And the work group actually recommended that we engage with the university to do a more complete research and to partner with the university to do more complete research.

[00:08:29] And so as a result of that, Supervisor Smith actually put a board matter forward and tasked staff to work with a researcher. And so in February of 2023, we partnered with, and I'm going to say the name of this UVA's division because it's very long.

[00:08:50] It's like a government name. It's Social and Decision Analytics Division, University Biocomplexity Institute. So we worked with a partner to complete this report. The report was completed in February of this year, just in time for us to celebrate Women's History Month in March.

[00:09:10] And so in March of this year, some of you participated and joined us in the community event where the researchers actually presented their key findings, a panel discussion. And then a couple of weeks ago at the end of May, the Commission for Women held another community event with a panel discussion around how the implications of health and other indicators such as economics and well-being.

[00:09:40] And so that's a little bit how we got to where we are today. And so about this study, I think that there are some interesting things about this researcher's key findings.

[00:10:00] For example, for local relevance, the researchers actually took publicly available data and they mapped it to supervisor districts. And so that's, you know, those key findings. And so you will see in some of the research that the key findings cross two or more of the districts.

[00:10:19] And that, you know, of course, is very important for local relevance. Like many jurisdictions, you know, Fairfax County is no different. We struggle with identifying intersecting identities, and that research and data is not necessarily available all the time.

[00:10:35] And so where possible, the research has explored women with multiple and intersecting identities. As you all know, Fairfax County now has a policy in place to guide and inform data collection related to race, ethnicity, gender, and language.

[00:10:52] So this approach can be replicated in future studies. And then finally, although the community conversations were limited, and clearly there's a need for more robust community conversations, those community conversations did provide richness and, you know, just demonstrated sort of the resilience of women, the care that women take for their communities. And it highlighted the importance of not having a single story as it relates to women. So I'm just going to jump into some of the key findings that the

[00:11:27] researchers found and highlight a few. So in terms of economics, we all know that the gender wage gap, although it's narrowing, it still persists. And the wage gap can be attributed to both occupational segregation, but even within occupations, women still make less than men.

[00:11:49] In Fairfax County specifically, although women make about 50% of the population, women only hold about 33% of management positions. From the data, it appears that there are many women-owned businesses in Drainsville, but as a percentage of all small businesses, the researchers found that women own more businesses in Mount Vernon area. When you compare male heads of households to female heads of households, female heads of households are more economically

[00:12:24] vulnerable than male heads of households, and of those, about 10% of those vulnerable female-headed households have children under the age of 18. The researchers also pulled from the youth study some interesting information about when girls and work, and found that girls work more hours than boys, and that girls of color work more, three or more hours, and that's more than white girls, and they found on a school, on a given school day. And then also through the

[00:13:00] community conversations, we learned that women who live in tight-knit communities really do help each other a lot. They identify resources, they advocate with the school system, provide informal child care and transportation, among other things. And so this tight-knit communities are really important to women that we learn through the community conversations. As it relates to health, There are more OBGYN and pediatricians in the eastern part of the county.

[00:13:33] And some of the other things that the researchers found was that although women live longer than men, women experience some chronic health conditions like arthritis more than men and that women struggle with mental health challenges more.

[00:13:50] In Fairfax County, Hispanic women suffered the highest percentage of COVID-related deaths And the public data that was analyzed by UVA showed that the Mason District has the highest percentage of uninsured persons.

[00:14:07] And again, through our community conversations, there were many, many themes that emerged about women taking care of their family, taking care of family health needs. And sometimes, you know, that was at the expense of their own preventive health care. And so in terms of work-life balance, in the community conversations, women really talked about how they thought businesses play a key role in helping to support working women, working mothers, and really all workers by providing flexibility, flexible schedules, and remote working.

[00:14:47] The researchers found that up to 30% of Hispanic women don't have access to a car, and that made it so difficult to get to appointments, to run errands, and to engage in leisure activities.

[00:15:03] And then there were some suggestions about creating community plans that include more intergenerational housing and community designs, and those emerged from the research but also from the community conversations. So, you know, no report would be complete without talking about the limitations, right?

[00:15:25] And so I just want to highlight a few of the limitations. And the complete report can be found on our website. It's about 300 pages or something. So, Chris, you would not get through that one. But as well as our executive summary that talks about, you know, some of the highlights.

[00:15:48] But some of the study limitations were, and I mentioned this earlier, although the community conversations were powerful, there were only a limited number, and they were almost a monolithic group, and so there is definitely a need to do community conversations to hear the voices of a broader range of women and different women, and so that was definitely a study limitation.

[00:16:18] There were some important discussions that we now know when we started this about a year ago. Since then, there have been some important discussions that have emerged that were not a part of the study that I think are really important. Some of those are ongoing, like related to interpersonal violence.

[00:16:36] We have all heard about the recent trends about girls starting their menstrual cycles earlier, particularly girls of color. And that's something that I think is worth exploring that was not a part of this study. And then, of course, there's, you know, been legislation that's limiting gender-affirming care and reproductive health that was not included that should be considered in any future studies.

[00:17:00] There were cost, you know, time constraints, and some organizational changes that the researchers experienced, and those were some of the barriers that we experienced during the study. And then, of course, as mentioned earlier, data was not available to disaggregate particular experiences of women, such as transgender women.

[00:17:24] And then the data related to women-owned businesses was not complete. So moving forward, what are, you know, I think Supervisor Palachuk asked, okay, what are you guys going to do next, right? And so we have been thinking about sort of what are some of those steps that we would like to take moving forward with this research.

[00:17:47] And one of the things that DFS has committed to doing is to supporting CFW to identify some key stakeholders and form some work groups and establish a work plan that, of course, a body of volunteers can practically accomplish in two or three years.

[00:18:06] We would also ideally like to expand strategies to hear the experiences of a broader group of women to inform those practical solutions. Again, having more community conversations, interviews,

surveys to hear what women in Fairfax County are experiencing and what they would like for us to work on.

[00:18:28] And then I'm going to turn it over to our chair, Alyssa Backler-Cauzy, Bachelor-Cauzy, and she'll elaborate on what the Commission for Women plans to do from the study. Thank you. Good afternoon, everyone.

[00:18:44] My name is Alyssa Bachelor-Cauzy. I'm the chair of the Fairfax County Commission for Women. Before we get into CFW's role and kind of where we're going in our takeaways, I want to zoom out to a global kind of brief State of the Union on women to help provide some context for this study and highlight kind of where we are both as a country and as a national community. So I feel pretty strongly, and I'm sure that all of you can understand this as well, that globally women are in a state of crisis. During the pandemic, intimate partner violence sharply increased, earning the name The Shadow Pandemic. According

[00:19:22] to the UN, global femicide has increased over the past 20 years, as even as total homicide has gone down. During times of war and conflict, women are the most vulnerable and likely to suffer disproportionately from sexual violence and be impacted by the use of biological and chemical weapons. 70% of all human trafficking victims globally are female. 60% of girls report experiencing sexual harassment before the age of 18, which includes girls as young as 10 years old.

[00:19:53] 38 states still allow child marriage, which disproportionately impacts girls, thankfully Virginia. In the age of the internet, violent and misogynistic groups have taken refuge among and indoctrinate vulnerable young boys into their ideology.

[00:20:11] Even worse, these once because of the implicit bias against women as they seek health care treatment.

[00:20:28] This bias extends to those having the ability to make their own reproductive health care choices. Globally, girls are still generally mutilated to control and assert dominance over their reproductive autonomy.

[00:20:46] For all of the gains that women have made globally over the last 50 years, working towards freedom and gender parity, there are those who seek to destroy that freedom and progress because it doesn't align with their worldview. All of these facts illustrate deeply the findings from the Gains Gap and Goals study and illustrate why this study is so incredibly important here at the Fairfax County level.

[00:21:08] While many of these global atrocities do not affect women in Fairfax County in their day-to-day lives, they impact our culture, and they in turn impact our subconscious attitudes and biases towards ourselves and others. So our takeaways from this study, as CFW, is that progress is a collaborative endeavor between government, individuals, business, and community.

[00:21:34] Ongoing research is needed, but not at the expense of delaying action. Women and girls need actionable steps in order to be taken sooner rather than later. CFW's role moving forward includes working with DFS to develop a strategic plan, leveraging community partnerships across the county with stakeholders as we move forward and serving as a connector between groups as we heard in our recent community conversations that groups get siloed into working with their constituency and are unable to share information

[00:22:13] across organizations thank you so much all right well thank you so much first of all let me um thank tony michelle carla and the county team working on this thank you and congratulations on your chairmanship, I apologize.

[00:22:32] No, it's okay. Alyssa, it's good to have you here representing the Commission for Women and the work being done on this. Clearly, I do highly recommend the full report or the executive summary if you haven't had a chance.

[00:22:49] And what's very much clear here is right there, there's a lot of work. There's a lot that's been done, right? We have come a long way. I would say it's more than just one path. There are many and diverging paths forward.

[00:23:07] And just as with our equity policy, the work, and Carla's team has done such, I think, excellent job in helping infuse and have it be owned by all of our agencies, all of our groups, our entire community, still working on that entire community, and not just live in the home of the chief equity officer and her team.

[00:23:29] But to me, also this work, whether it's the economic development piece, the health piece, the workforce, domestic violence, every piece of it, absolutely. And disaggregating that data, I feel like this report really has chipped away a little bit, right, that surface.

[00:23:49] And there's so much below that that we will continue to tackle, understand the challenge, benefits, but then challenges of a large county is the time it takes to move forward on some of those. That being said, though, because we have so many representatives here from different agencies or community, I actually want to start with, because I've seen this report, a very quick and whoever feels comfortable to go first.

[00:24:19] what are what is your if you were going to look at the top priority maybe even two for that for the for the work moving forward understanding the the implementation plan will be the strategic plan what are what are the are there top one or two things that you saw I definitely want to see more information on this we definitely have you know a gap in knowledge or gap in helping us decide the work if we knew a little bit more here I see Tony nodding her head

[00:24:53] so I thought it was pretty interesting that girls of color work three or more hours on a given school day and I would be very curious to find out first of all why that is and are there any negative consequences in terms of being able to um be in you know after school activities or um higher you know education pursuits those kinds of things and so that was that was an interesting um development

[00:25:32] that i would i would like to hear more about i just wanted to touch base on what tony said as well just because that data comes from the youth survey and so we have been in coordination and communication with the Fairfax County public school system to look at some of those trends, to begin to continue to try to figure out why those trends are happening, to monitor them over time. We're hoping that some of the rises are due to COVID, but we still don't have enough context to understand if that's students saying they were babysitting or whether they were working in their

[00:26:12] family store. We don't have enough context. So I think that goes hand in hand with having more information, as well as specifically trying to understand why we're seeing more youth who are identifying as working outside the home. Just one other thing, just kind of tagging on to that, that the county is working on is that we do have a policy in place that has, that it's really focused on the collection

of demographic data. And so with that being in place, it does give all county agencies some guidance to be able to think about how they can collect more detailed

[00:26:50] data so that we have that information to really understand what's happening with our population and as they are interacting with our services as well. And there's an addendum to that policy that helps too, that we worked on in coordination with one, Fairfax, to identify a set of questions that even if it's not a federal or state mandate for you to collect that information, that there's some tools and processes in place to guide staff and being able to do that better.

[00:27:20] That's very helpful. I wanted to ask the one you mentioned, work. Tony, you didn't mention whether that's paid or unpaid, and is it still unclear? Is that both paid and unpaid hours? That's part of where we don't have enough clarity in what that means. I will say that periodically, while we try to keep the questions pretty static for at least five years, periodically we do review and update the questions on the use survey.

[00:27:46] And so we'll be looking at that process to better understand and capture, you know, as things change, we try to capture more updated questions as well. Thank you. Carla, you had something? Yeah, I would just add that, you know, when we began the research, it was tough to sort of hone in on what three main indicators we would look at.

[00:28:11] But I think in looking at economic health and work-life violence, I think it was a pretty well-rounded understanding of how women and girls are doing. Out of that, though, I think the most striking part is the economic piece.

[00:28:29] And again, I often say, while equity is my job, it's our work. And I think it's really appropriate that, you know, the cross-section of agencies that were a part of it because I think this data really then is about implementation through a strategic plan and other mechanisms that we can start to think in a more targeted and specific way about what we can do to influence these, you know, whether they're gaps in pay or access to opportunities.

[00:29:04] Because ultimately, I think being successful economically really does influence all the other indicators. And so I think out of all of them, I think just continue to reinforce the importance of having an inclusive economy, you know, one that really creates opportunities for all people to participate and benefit from it.

[00:29:29] Oh, thank you. Well, I really appreciate that. I know there have been so many conversations. And as we said Saturday, our historical markers, the good, the bad, and the ugly, right? We really, unless we understand the data, can dig into it, we don't know what we don't know, right?

[00:29:45] And how to make those strategic moves ahead. So absolutely appreciate that work. I will turn it over to the chairman, and then we'll start at that end and move this way. Thank you, and excellent report.

[00:30:02] Just a couple questions, because I was focused in on the economics page, too, and I want to make sure I understand the bullet about women hold only 33 percent of management jobs. Was that women self-identifying what they thought their job was, or how did we determine, or were they the ones who were filling out the survey, determining whether or not they believed their job was classified as management or not?

[00:30:27] This research was done by UVA and the Biocomplexity Institute, but they were primarily using census data to help support some of those figures, and so that's kind of where that 33% comes in.

[00:30:53] That public data does also provide information on certain industries in which people work, and so that's how they captured that. it wasn't survey based well census is essentially a survey but it was from that yeah and I mean one of the reasons I asked that is we we just had this conversation earlier uh today about you know census data and its validity and I think the the point here is that women hold a disproportionate share of management jobs regardless but who fills out the census report and and you know who doesn't even participate in it um can can skew those results uh quite significantly and so I just

[00:31:30] to make sure if anyone picked this up they weren't construing that bullet point as fairfax county jobs also because if you didn't know the differentiating fact you might not know that um two other quick questions the work plan um the one thing that i don't see here is any relative timeline and i know that commission is going to be working on this and as a volunteer organization but obviously with staff support i'm just wondering if anyone has any high level um either timeline for the work plan or um as was mentioned earlier i think when when supervisor dahlia asked you you know kind of what

[00:32:09] were there any is there any low-hanging fruit that can be determined from this that be could become a sooner operational um recommendation as opposed to waiting for the longer um you know the complete work plan to be delivered yeah absolutely we are very primed and and ready to to engage on this as soon as possible we are already working to uh find a identify a consultant and begin working on that in in september have them selected and then begin working on that plan in september in the meantime there are there is low hanging fruit a lot of the recommendations

[00:32:46] will be forthcoming quickly throughout the summer as to things that would not take a lot of time, money, and resources that Fairfax County can address pretty quickly that we've heard through our panels and our community conversations.

[00:33:03] And then Tony can add some more additional detail there. And we plan to go back to that group, the work group that started. Many were interested in continuing to work on this, And so we do have a ready group.

[00:33:19] Some of the players have changed since then, but the plan is to go back and ask them if they're interested in continuing with the work and identifying some key action steps that we could take. So that is going to happen in the next month or so.

[00:33:37] Okay, good. And the last question, and it might be something for the consultants to just be mindful of, is having seen some nationwide work on this issue of, you know, gender equity and especially when it comes to economics, I have been taken aback that this region, region meaning the DMV area, does quite a bit better than other parts of the country, some for some obvious reasons, some maybe not so obvious reasons. And so I would not discount having the consultant look at our peer jurisdictions in the DMV for their own policies and things that they may have put in

[00:34:14] place to help address some of the issues that are here. Many of them have leaned on us, and when I say us, I mean Carla, for recommendations on our One Fairfax policy and equity work, and I know it's driving a lot of work at COG and some other places, and we really pioneered that here in terms of the DMV. I'm not so sure that there aren't other jurisdictions around us in this particular space that may be

ahead of us. And so I think we should look at that and see if there's any best practices, particularly since I believe our region does better than most nationwide, and take from

[00:34:48] our neighbors as we can to try to move forward with some things that are established already that are in place and that metrically may be working to move the needle. Thank you. Thank you. Before I do, I apologize. I move Cameron's prerogative to Mr. Bierman. There is one slide I've been looking at again that, not one slide, one page in the report that was not in one of the slides that having done work in poverty before this work really stood out to me. And that is on page 39, the percent of women in poverty by race and ethnicity. And the outlined census tracts that

[00:35:27] are in the top 5% are mostly in the central and northern part of the county. I think it feels a little counterintuitive. And so to me, that is one area. Is it around cost of housing? Is there missing data? What are the things that really make that happen? Because to me, really, when we talk about economics, focusing on jobs and also on poverty, I would love to dive more deeply into that. Okay. With that, thank you. Supervisor Bierman. Thank you. And good use of the prerogative

[00:36:05] because I was basically going to say some of the same stuff that Chairman McKay said. I was actually going to repeat what I said several weeks ago when you had a panel discussion on this report. I think one of the amazing things about the report is that it is so detailed and it is so complex, and in some ways some of the takeaways are so simple.

[00:36:28] You know, pay equity. Pay women the same as you pay men. Women disproportionately bear the brunt of child care. And if you made child care more accessible, then fewer women would have have problems. And all of these problems are exacerbated by race and by color and ethnicity, things we all sort of know.

[00:36:50] And the report was was amazing with, you know, the criticisms that were made at the one at the panel I was at last time was you could have also focused on reproductive rights and sexual violence, which are not a part of this report, but are also obviously a key component. But what is also difficult sitting here as a member of this board is that pay equity is not necessarily something that we have complete control over at the county level. And childcare is not something that at the moment we have quite as much money for,

[00:37:27] though we try. We did fund those 72 extra early childhood slots, but I'll sort of offer the same charge I did two Fridays ago or three Fridays ago. Supervisor Lusk was there, which was bring us the low-hanging fruit. Bring us the not low-hanging fruit, but things that we can do. We will take any action steps that we can to improve these issues and continue lobbying at the federal level or the state level for more child care help or continue lobbying for pay equity or continue making sure that people can exercise their reproductive rights in our county.

[00:38:03] I think there's a lot of interest in all of those topics on this board. And so thank you very much for all the work that you've done. And I look forward very much so to your future recommendations. Thanks. Thank you, Mr. Bierman.

[00:38:19] Mr. Jimenez. Thank you so much. Thank you for your presentation, and I look forward to reading the full report. I just want to look at page five real quick, where it mentions Mason District, where I'm the supervisor of.

[00:38:37] A couple things here, quickly. One is, you know, obviously not great news, but there is good news in what's happening on the ground, and that's Inova and the Colmore Clinic really playing a huge part in the community, you know, accepting so many, you know, working to change the lives and help better the health of so many women and families that really then transform a community. You know, one of the things is that, two things, one is that I hope the commission comes to our office and looks to

[00:39:13] partner as we move forward because we do have lots of kind of ins within that community. We work very closely with Inova and the Colmore Clinic and so making those connections I think would be really helpful in having our office also play a part. You know, the next thing is, you know, the impacts of those that are uninsured go way beyond just physical ramifications. You know, you start thinking about what does it mean when it comes to mental issues, to the stress that it has on people when it comes to their jobs, their school, their home life. And honestly, at the end of the day, their self-worth, right? And so we must take all of these issues as a whole and think

[00:39:52] about the fact that it extends not just as the physical part, but it can extend into the home life and the community and a mental issue as well. So I thank you for this study. I look forward to working with all of you, and thank you for taking the time. And one quick last thing is Mr. Bierman mentioned about pay equity. As someone who devised and ran the first pay equity pledge in the country around environmental issues, I got to tell you, I would look at a county pay equity pledge.

[00:40:25] Those are really strong. They're powerful. You can do a lot around them. It can bring a lot of attention both locally and nationally, and you can bring in a lot of partners by saying, are you part of this? Are you part of fixing the problem? Are you part of working on this in the long run for both those who are currently in the system, in the workforce system, and those women who are looking to jump into it?

[00:40:47] because it's critically important that we make sure that they feel like there is a path, that there is equality, and that there are people looking after them. So I just want to throw that out there. Thank you. Thank you. Supervisor Lusk?

[00:41:03] Yeah, I'll go quickly. I'll just say as a father of two daughters, this is a little sobering and somber in some respects, but I appreciate the work that's being done and acknowledge that there's more that we can do here in Fairfax County. So I'm delighted to see at least the acknowledgement and recognition of what the issues are, but then you've got to do something.

[00:41:26] The point that Supervisor Bierman made is kind of a call to action, like how do we address the issues that we are now kind of seeing before us. I have one question, which is on page six, under the work-life balance, and I'm thinking about this.

[00:41:44] The last bullet says mixed use and intergenerational housing ease burdens. Is there something you can share with regard to what that means exactly? I think I kind of understand it, but I just want to make sure I got the right context. Yes.

[00:41:59] So in the community conversations, we heard women talk about how having older adults in community helped them with child care specifically.

[00:42:16] And that they thought it would be really cool to have communities that appealed to both older adults as well as, you know, younger single adults and families raising their children.

[00:42:34] And that, you know, someone even said something about it would be really cool to have a child care center that was maybe run by retired adults, but they also had some in that community center things that appealed to that population, that demographic as well.

[00:42:52] So they were really just sort of talking about how in households where there were families that had, you know, their parents living with the families that it really helped them in terms of child care and being able to meet the other demands that they had.

[00:43:10] So that was really what came out of the community conversations. So I wonder, too, because the point you're making is that you could be related or you could be unrelated. Like there's a way to maybe pair people who are seniors with those who are younger to provide some of this support network that you're talking about.

[00:43:28] Absolutely, yeah. They were talking about, you know, to your point, in, you know, relationships, but also with relationships that could be built in community. Yeah, well, I'll say as a person who grew up with his grandparents, I understand the value and the importance of this, and it works on both sides.

[00:43:45] So thank you for that. And I would just add, as a structure of the research, in addition to looking at publicly available data, one of the things that the researchers did was research best practices in things that are happening across the country.

[00:44:00] And I think the design of communities was one of the things that they highlighted as being supportive of women, right, how people, how communities can be designed in ways that make it easier for women to be supported either within their families or sort of amongst their neighbors.

[00:44:21] And so I just wanted to lift up that, yes, it came in through the community conversations, but the researchers themselves identified different themes from just looking at national research. Thank you.

[00:44:37] Any other supervisors? Yes, Supervisor Stout. Just a quick thank you. This is awesome. I think we look at some of this and go, okay, this is pretty obvious. We get it, and we've all understood it, and now what can we do about it? I'm absolutely looking forward to the work plan and seeing how we can get moving.

[00:44:56] And, again, thank you all very, very much for bringing this to us. And now how do we get it going? And I'm here to support that process. So thank you. Alcorn. Thank you. So just very quickly, in the report, some of the data on various doctor availability, pediatrician, OBGYN, very interesting, very interesting data.

[00:45:21] I've not seen that before. And hopefully that will be used. I know the Department of Planning and Development is looking at policy plan updates, including community health. So I think that kind of data analysis could be really helpful, interesting, anyway, for us to look at.

[00:45:38] So thank you. Yeah, and I just want to add on that before, and a point that came up earlier with Mason District and planning, I know of in other clinics, VHC, as you know, has a proposal right there across the street, Graham Road and 50 to take over that old space and bring some more health care, as I've seen in this map, right, a huge area. They've clearly looked at where there is a big need and expecting that they will be bringing some community services as well. So as we look at planning and development

[00:46:12] and cases that come before us, being able to understand this data and hone down and look at what the needs are both in long-term planning but as short-term projects come before us or as we're able to pursue those opportunities. I think it'd be very helpful. Yes, Supervisor Smith, who was the author of the original board matter. Yeah, I think it's good that we have a focus, right, that we're really looking at what we need to do here. I mean, the things in the world we don't like either, but you know, as much as we can do here in our community to help. And I know some things we

[00:46:51] can do and some things we can't. Supervisor Alcor talking about where the doctors are, I was sliding, going through the slides. That was very surprising to me. And I will also be intrigued if you get to do more community conversations with people, because I think that's how you do get a lot of data is really talking to people where they are. So I appreciate all the work and I look forward to you doing more. And I think we've heard that we all support being able to support this work because volunteers are great but we definitely need to make sure there are resources for it yeah just finally i just want to emphasize um how important i think

[00:47:28] it is that carla is here and a part of this conversation because when we brought forward our one fairfax policy was social equity policy but listening to the conversation that was just had with supervisor lusk about the intergenerational and hearing earlier in your report the support network that was identified. I don't think any of us were thinking about things like when we adopted ZMOD, how much that's a gender equity issue. That for, unless you were related, you couldn't have people living together in an environment that supported the things that were

[00:48:04] in here. And that was not, you know, a part of the equity work related to that. But when we think about low-hanging fruit, the zoning decisions that we make can have a very profound effect on gender equity. And many of the things that were presented here can be facilitated through that. So I only bring that up because I think our One Fairfax policy that's driving a lot of the decisions that we make that puts equity first ends up making a lot of the right decisions and or slash recommendations to our board because we're thinking about these things differently. But it even runs much

[00:48:40] deeper than that and so i'm going to be interested too in seeing how we can intermingle some of the recommendations and here directly into the one fairfax equity work that we're doing so i think it's really important that carla is here and her team is such an integral part working with the commission on how we tackle these issues absolutely and i think one in addition to carla uh we also have the county executives countywide coordination efforts and I think we have a new countywide coordinator who's sitting in the room today so getting more support and I think the focus

[00:49:17] on this work as we have many silos that still exist I think this angle is a really good one for us to look at countywide as well okay seeing no further comments I appreciate these four incredible women and the work they and their teams have done to bring this forward and I think we're all very excited about the work ahead. So thank you very much. I think I am turning it back to our quiet silent partner over here Mr. Leonard. It's rare I know. I highly recommend the executive

[00:49:54] report. So as we're transitioning here, I just wanted to reacclimate the board. This next agenda item is coming back responsive to kind of an informal request that came from the board. It came out of some of the discussion that we had at a legislative committee as we were preparing for the legislative session last fall around long-term care. And there was a lot of concern. I wanted to see a snapshot of what

it looked like here in Fairfax County. So I just encourage you as you listen to this next presentation, continue to understand that this is much greater than Fairfax

[00:50:29] County. A lot of the issues are broader, but there's a lot of things that we're kind of partners and facilitative rather than being able to be directive on a lot of this work. Also, I do think this dovetails really nicely with the presentation you just got. When you see what the workforce in this in long-term care looks like, I think you'll see a lot of a lot of connection to the presentation you just received so I just wanted to highlight that and re-acclimate the board. Very much appreciate that since you didn't introduce them I'll go ahead

[00:51:02] and introduce I will say Patricia Ariadza awesome community resources development manager for the neighborhood and community services and Jonathan Bell our social services supervisor and I think we have a couple additional guests I don't know if they'll be speaking as well but you can reintroduce yourselves. Hi, Trina Mahan-Webb, Division Director for Adult and Aging Services.

[00:51:27] Remember your title, Trina. Thank you. And good afternoon, everybody. Michael Beckett's Director for the Department of Family Services. All right. Thank you. A lot of cross-agency work here. I've got a little bit of a cough cold, so I'm going to let me know if I'm not making myself hurt. So again, yes, thank you very much for your time. Good afternoon, Chair Palchuk and Chairman I am with Neighborhood and Community Services and I am joined by my colleague from the Department of Family Services.

[00:51:59] Good afternoon. My name is Jonathan Bell, Social Services Supervisor with the Adult and Aging Division Long-Term Care Unit. And we are also joined and we are well supported by our colleagues that make up the workforce workgroup.

[00:52:16] So they are back there and we will be able to provide any answers to questions if there So again, let's see. So in October 2023, the Health Care Advisory Board and the Long-Term Care Coordinating Council put forth a proposal to the Board of Supervisors Legislative Committee that would add language to the long-term care workforce needs position in this legislative program.

[00:52:43] So that language would support legislation that helps assisted living facilities in community-based care settings recruit and retain highly qualified, well-trained staff. So from that conversation, the legislative committee did accept that proposed language, but they also expressed an interest in understanding the landscape of the long-term care workforce in the county.

[00:53:05] So as a result, the Long-Term Care Workforce Workgroup was created, and we were tasked with three things. So one was to identify the top challenges in the long-term care workforce in the county, also to identify actions that the Board of Supervisors could undertake to address those challenges, And finally, to provide a presentation to the Health and Human Services Committee, which brings us here today.

[00:53:30] So the workgroup is comprised of subject matter experts from the Community Services Board and the Departments of Family Services, Health, Housing and Community Development, and Neighborhood and Community Services. To meet the stated goals, the workgroup conducted literature reviews.

[00:53:45] We also conducted interviews with stakeholders, with residents who have received long-term care services in the county. with caregivers, with, I keep wanting to say financial, but educational institutions, and also staff from long-term care providers.

[00:54:02] We also conducted a review of state and federal legislation, as well as we looked into the existing recruitment and training efforts that are ongoing in the county. So the senior population in the county, as I think we all know, is continuously rising, according to data from the Department of Management and Budget.

[00:54:25] In 2020, 14.5% of the residents in the county were 65 or older. By 2025, that number is projected to go up to 16.5%. So the long-term care workforce, which is comprised of certified nursing assistants, personal care aides, and home health aides, provide assistance with activities of daily living, such as bathing, toileting, feeding to older adults and people with disabilities across diverse settings.

[00:54:56] So these settings include private homes, nursing homes, and community-based, I'm sorry, congregate care settings in the community. So the supports that long-term care workers provide are essential to helping individuals fulfill daily tasks and maintain their health and well-being.

[00:55:13] So while the need of the long-term care services are increasing, the number of long-term care workers is not growing at a fast enough pace to meet that need. An October 2023 survey of nursing home and assisted living facilities conducted by the Virginia Healthcare Association indicates that 91% of facilities have vacancies for certified nursing assistants and direct care providers.

[00:55:40] The long-term care needs of Fairfax County residents, as you can see on the slides, are supported through a network of county and community-based services and supports. So there are more than 5,400 beds at 84 assisted living facilities. Three of those facilities are managed by the county.

[00:55:58] There are 15 nursing facilities that offer more than 1,800 beds. We have four neighborhood and community services adult day health care sites that can accommodate up to 120 participants. And those are staffed by county merit employees. We have hundreds of private home health agencies that operate throughout the county.

[00:56:17] And then we also have a county-funded home-based care program that contracts for home health aides that serve more than 600 county residents. So as Chris mentioned, in Virginia, the long-term care workforce is comprised predominantly by women of color, with 18% being immigrants.

[00:56:35] We did have, through our conversations and our interviews, we were told anecdotally that that number for immigrants is higher in Fairfax County. This is also an older workforce that can struggle financially due to low wages and a high rate of part-time work.

[00:56:53] So that leads to a need to hold multiple jobs and or rely on financial assistance to make ends meet. Long-term care work is physically demanding and requires considerable relational skills and emotional labor.

[00:57:09] So as we see that the needs of the long-term care consumer have increased in complexity, so has the work of the long-term care worker. So through all of that literature review and conversations and research that the group did, we have identified four challenge areas for the long-term care workforce in the county.

[00:57:29] So the career pipeline is impacted by this, again, being an older workforce, and a workforce that is typically not provided additional benefits and is offered limited career development opportunities. So with a high number of workers exiting through retirement or burnout and the limited applicant pool

due to those low wages and minimal benefits, meeting the needs of county residents that require long-term care services is an increasing challenge.

[00:57:56] We also saw that in the workplace concerns, they were highlighted through the COVID-19 pandemic. So throughout the pandemic, we saw that the value and the precarity of the workforce, of the long-term care workforce, the marginalized status of workers was revealed through reports of inadequate access to personal protective equipment, to necessary training, and to other supports.

[00:58:20] So we also saw that the shallowness of the workforce pool, you know, that again was really highlighted through the long-term care providers being struggling to maintain staff and to maintain services without enough workers. So again, the physical and emotional aspects of the job are quite demanding. We are told that low wages make it really hard for the workers to live in the county. Workers also share that because of that, they find that it's sometimes not worth the time expense to travel to the county for those jobs. And these are positions, these are long-term

[00:58:57] care workers take on a high level of responsibility. These are positions that require a high level of trust, but yet the public perception of the work is very low. So that undervaluing of the work really does have a toll on and impacts negatively on the morale of the workforce. And then in terms of staffing, staffing considerations include retention and training concerns. So we already have a low interest in the work, which presents recruitment

[00:59:32] challenges. And then once hired, workers may leave before the onboarding process even ends. And then we also know, again, as we've mentioned, the workforce is comprised of immigrants. So providers really need to ensure that they are accounting in their training, that they are accounting for those differing language access and also any cultural differences and training that would prepare the workers to be able to fully engage with the clients that they will be serving.

[01:00:05] And so then being short-staffed can mean longer hours and more responsibility. So that would lead to workers feeling overworked and, again, leading to burnout. So with other avenues within the health care industry, such as hospitals and even entry-level service positions or sales positions, paying higher wages, as well as there being more opportunities for remote telework happening, long-term care providers really are struggling to recruit and retain adequate staffing.

[01:00:38] And then, as you can imagine, shortages in staffing does impact the quality of care, leading to consumers indicating that they see, they experience delays in receiving care, you know, medication or their assistance with their daily living tasks.

[01:00:55] And finally, in terms of the financing, the financing structure for long-term care services presents the challenges both to the consumers and also to the workforce as long-term care is predominantly funded through Medicaid and other public dollars. long-term care providers, especially those that rely on Medicaid reimbursements, could really find it challenging to increase the higher salaries to be competitive, as that would potentially cut into their already tight margins. And then additionally, paying those higher salaries would lead to higher

[01:01:30] costs for consumers. So we also have the auxiliary grants, which I think everybody's familiar with. So they are available for individuals who do receive financial benefits assistance, but those grant dollars do not always cover the full costs of assisted living services, which then can be a deterrent to providers to serving those individuals.

[01:01:53] So we also have while home health supports and assisted living services do allow people to age in place, these services are not typically reimbursed by health insurance, Medicaid, or Medicare, which then adds already more financial burden to seniors who have already indicated that they have concerns about being able to afford retiring in the county.

[01:02:17] With that, I will turn it over to Jonathan, who will cover current efforts and then recommendations. Career development is an essential element in addressing long-term care, career pipeline, workplace, and staffing concerns.

[01:02:34] Multiple and intersecting opportunities exist for the workforce within Fairfax County for training, upskilling, and scaffolding credentials. The integration of these programs to a talent pathway model is essential for workforce expansion. The Board of Supervisors initiative through the Talent Up program provides an earn while you learn model for reskilling and early career advancement in fields including health care. The program is one which supports employees seeking careers in caregiving, and nursing to become and remain more economically mobile.

[01:03:07] Through the Department of Family Services' Virginia Career Works Initiative, long-term care workers can take advantage of supports through the Workforce Innovation and Opportunity Act, including career coaching, credentialing, and job services. The Bridges to Success programs offer employment and well-being assistance to those struggling to overcome obstacles hindering them from finding or keeping a job, addressing career goals, job readiness, and maintaining stable employment. And the SNAP Employment and Training Program further supports participants through employment and training assistance, including

[01:03:41] receipt of occupational skills training to support economic self-sufficiency. Additionally, as you see on the slide, career development opportunities exist within Fairfax County Public Schools' high school and adult education programs. Career and Technical Education has three academies that provide an introduction to nursing course, which is equivalent to certified nursing assistant training and includes 40 hours of practicum at a local assisted living facility.

[01:04:08] There was a wait list of the Chantilly Center for the class this year. The adult and community education program offers classes and programming to county residents. Their certified nursing assistant training program is provided five times a year with a $1,700 tuition.

[01:04:23] And finally, credentialing opportunities exist at Northern Virginia Community College. Certified nursing assistant programs are currently being expanded and adapted to make them successful for students, including flexible scheduling, accelerated programs, and hybrid options. Additional supports, including weekend classes, child care, and direct job placement opportunities would enhance the enrollment and success rate of interested candidates.

[01:04:49] Furthermore, additional credentialing in allied health fields through the college offer expanded career development opportunities for those in entry-level nursing positions. Some recent policy interventions are aiding in addressing the workforce challenges.

[01:05:07] Effective July 2025, House Bill 349 provides for medication aids to be able to administer medication in nursing homes. This and other legislative proposals make credentialing more attractive to prospective employees, raises the profile of the profession, and makes it easier for employers to retain top talent.

[01:05:29] The state legislature approved the continuation of funding for the Earn to Learn nursing program within the Virginia Department of Health. This program provides competitive grants to colleges and universities that partner with health systems to offer nursing students the opportunity to earn a competitive wage while also earning credit for clinical hours towards degree requirements.

[01:05:50] The goal of the program is to address the health care workforce shortage by expanding the number of trained nurses in Virginia. In April of this year, the Centers for Medicare and Medicaid Services updated its final rule regarding staffing mandates for nursing homes. Within the next two to three years, this mandate will require that all nursing home residents receive a minimum 3.48 hours per day of total nurse time and that a registered nurse be on site 24 hours a day.

[01:06:17] This new standard will increase staffing in nursing facilities, ensuring that aids aren't stretched too thin by having inadequate staff on site. Additionally, the rule requires states to report the percent of certain Medicaid payments that are spent on compensation for direct care workers.

[01:06:33] In 2023, the Claude Moore Foundation released its Strategic Recommendations Report on Virginia Health Science and Human Services Workforce. This report, in tandem with George Mason University's Center for Health Workforce, lays out proposed strategies for transforming the future of health and human services workforce across the Commonwealth.

[01:06:53] These recommendations include the creation of career pathways and formalizing a statewide health workforce development model. With a recent federal grant provided to GMU, expanded regional support for workforce development initiatives will be studied and presented.

[01:07:08] A further recommendation to, quote, convene and empower a multi-agency workgroup to positively impact the workforce aligns closely with a board-approved initiative within the Shape the Future of Aging plan. For your consideration, the Long-Term Care Workforce Workgroup offers three key recommendations in response to the current landscape in Fairfax, as presented this afternoon.

[01:07:34] Firstly, continued monitoring of legislative activity related to long-term care workforce compensation, expansion of professional capabilities, and funding of workforce training. Proposals supporting wage pass-through and minimum wage policies, reducing barriers to employment for internationally educated health care workers and increases to publicly funded programs such as the auxiliary grant. These areas of legislative intervention will have the most significant impact on an undervalued and underappreciated workforce that is nonetheless

[01:08:09] critical to ensuring the safety, care, and well-being of some of our community's most vulnerable residents. Secondly, exploring inclusive engagement strategies to engage long-term care workforce employees to build capacity to access educational opportunities and reduce barriers to enhance personal economic mobility. In line with our One Fairfax policy, providing opportunities for this workforce to live and thrive in Fairfax County will in turn have a positive impact on residents served in the long-term care sphere so that they too may attain their highest level of health and well-being. Awareness of career development opportunities

[01:08:49] and other wraparound services such as workforce programs, housing supports, and child care subsidies will enable workers and their families to grow, prosper, and thrive. And finally, promoting a progressive career ladder for entry to mid-level county employees working in long-term care settings.

[01:09:06] Providing a career development framework as proposed in the Claude Moore Foundation report will assist in professionalizing these frontline long-term care roles by providing a clear highway to continuing education in pursuit of further career development. Delineating credential scaffolding will enable the use of existing community programs, academic resources, and funding to meet the demand of employers and care needs in Fairfax County.

[01:09:32] Challenges facing the long-term care workforce are complex, systemic, and still recovering from the COVID pandemic. It is imperative that those seeking careers in home health, personal care, and nursing assistant roles have career development support and equitable opportunities for economic mobility within the county, which will lead to better outcomes for long-term care recipients in Fairfax.

[01:09:54] We thank you very much for your time and welcome your discussion. Well, thank you both very much, especially Patricia. I know it came across very well, even though you're struggling there. I very much appreciate this conversation.

[01:10:11] Before I turn to my colleagues, I have one comment and then one question, because I've had the opportunity, and I appreciate that you've got the different levels here as well. In some areas, we're less connected to the federal policy, but this very much, I know the federal policy, and I think you mentioned one, but there were three rule changes that were made by HHS in April.

[01:10:34] I think one was the Medicare staffing, but I was curious, and it may be a follow-up, if we expect other impacts from the other two, which were ensuring access to Medicaid services, as well as the, and this was for Medicaid and more CHIP financing and including more access there.

[01:10:58] So the second one, I believe, is more for children. But if you think the ensuring access components, which really is about, I believe, what is being paid for and the rate transparency. So that was what I was actually wondering about, if we are able to get an analysis on that rule change.

[01:11:18] Sure, we can follow up more detail on that. Thank you. And then for the work you've done, and I've had the opportunity in the past month to visit a couple of different models that are out there, and it's very exciting, especially when we talk about how, whether it's zoning or sometimes other policies or the types of housing, right?

[01:11:38] Most of us here have parents or in-laws who are trying to age in place, age closer to the community. And our homes aren't always built for that. Our communities aren't always built inclusively for that. And seniors are often having to choose not just economically, but by types and location and geography and maybe not having the choices they have.

[01:12:03] I was pretty excited to see, and it reminded me of my post-college group housing days, was a new group that has eight beds in a home for adults to receive services by an organization, a company actually, a family-owned company out in Ashburn that is trying to bring not just their services, but they really are doing the whole gamut, the training, helping seniors to make adjustments in their own home, targeted services. And those are paid for, so clearly you have to have insurance or the ability

[01:12:39] to pay. But as we see more of these options and training opportunities, I would say one for career development programs, if we could also look at what's being done in the private sector for programs and see if there are partnerships or innovations there that we could borrow from to help enhance in addition to the public side um and then my other one is that i think there are 80 you listed 84

assisted living and only three are currently managed by fairfax county um and so if we have plans or options seeing this new one that just popped up you know eight homes eight bed home

[01:13:18] are we looking at um the ability to provide more for those who aren't going to be able to um retire currently uh in the county if that's where they would hope to be able to retire is that an area where we're really looking at targeted um supports and if there are opportunities to expand upon that yeah so i'll take that guys the uh the um we're always looking to expand but i i definitely think with within this arena what you're seeing is the the private sector is is who we're needing to partner with.

[01:13:56] That Claude Moore report, we were engaged in that Claude Moore report. First thing, I attended the first meeting. I shouldn't have been shocked, but the number of private entities that were included in that work. So we're going to have to work very closely together, and it's going to have to be something where, and I know we talk about this in various settings, and you mentioned Ashburn, our seniors want to retire in Fairfax, but they also understand they just want to be close to their families.

[01:14:26] So when somebody's building something right across the border or what have you, it's supportive of what we're doing. So I think we've got to do a really good job of monitoring a lot of those changes that are coming because while it sounds good, and certainly I went through it for about the last two and a half years with my father in an assisted living facility, so I saw a lot of this up close and personal.

[01:14:52] So when it sounds good with regards to requiring more and more in the building, and I'm fully supportive of that, but then that's passing on costs, and now you're impacting affordability and accessibility. So there's always trade-offs. I think that's one of the reasons why they said, you heard Jonathan say, it's effective July of 25, because they're trying to give the facilities a lot of time to figure it out.

[01:15:15] We're blessed to be in a region where we're not having the issues that some of the folks in other parts of this country have where in the rural areas in terms of being able to adhere to those requirements. But I think this is an incredibly quick dynamic situation that we need to continue to keep our pulse on. And I know Jonathan, Patricia, and the folks that are in the work group are doing a great job. And we're going to have to continue this work for the foreseeable future because our senior adult population, we've been knowing for the last 10 years, 15 years. I

[01:15:55] remember doing presentations when I was in NCS about, well, we're here now, and it's doing nothing but continuing to grow, so we're going to have to continue to look at that. So that's a long-winded answer. We are looking at that, but I think the answer is not necessarily the government being able to do it. I think it's going to have to be a partnership primarily with our private sector partners. No, and I love the way you say that because it reminds you a lot of what we are looking at with our, and it's not Office for Children anymore, the early childhood programs and services, and this is with our older adults, right, and programs and services.

[01:16:31] What I do hope that we're doing is rather than just monitoring, I think we want to be more proactive, right, and look at targeted supports, where there are the gaps, where there are the biggest needs, so that we can be a true player and push in the right directions and help enhance in the right directions rather than the community feeling like we just have to be responsive to the private sector.

[01:16:58] Right, no, I absolutely agree. That's why we are active. I will say that Chairman McKay mentioned at the last presentation with regards to ZMOD and a lot of what we're doing is, are we as attractive to facilitate those folks to be able to come in and partner and be in the county?

[01:17:16] So there's a lot that maybe we haven't traditionally done that we're going to have to... 100% agree. Thank you. Let me turn it over to the chairman. Yeah, thank you very much. And I, you know, one of the things that isn't in here, but I think we all understand it well, too, is the strain that this puts on people. And I'm looking at Dahlia because she's in the same situation I'm in, folks who are in the middle, who are taking care of kids and trying to play a role of inexperienced, unqualified role of providing long-term care

[01:17:51] support as seniors want to stay in their houses even longer. Compounded with that is the national stories about seniors wanting to stay in their houses longer, some related to financial reasons and some related to other reasons. And so I do think the point that was just made about what the private sector is doing is very important, because when I look at page three, it of course says hundreds of private home health agencies operating throughout Fairfax County that are deploying support into in-home care situations that are, in a lot of cases, the only thing

[01:18:29] preventing those individuals from needing to move into a formal assisted living environment. And we know that 5,400 beds at 84 assisted living facilities is not even close to the number we would need to actually accommodate what the demand is if affordability wasn't an issue. And so these private sector home health agencies become really important. And related to that, I just want to make sure I understand something that you said, Jonathan, because you ran, obviously your presentation had to get quickly through it, but you mentioned something about an

[01:19:03] international pipeline opportunity. And I just wanted to hear a little bit more about that, because this, you know, this is a role that we play on top of many of the things we just said before about being a welcoming, opening, open community for people all over the world to come here and to be able to live comfortably and to take advantage of our economy. And I think you said something about an international pipeline. I just want to make sure I understood what that meant and if there was something at all at the local level that we could be doing to support that.

[01:19:37] Sure. So I'm not remembering the name of the program. I have to take it back to it. It's a federal program, but we talked to one community partner who is exploring the, you know, opportunity to bring folks through this program directly into these, you know, frontline care providing roles, because as Patricia laid out, you know, a large proportion are Our immigrants do have that, do come with that.

[01:20:05] So there's an opportunity to be involved in that, and providers are beginning to become aware of that and take advantage of that for themselves and, you know, potential employees. So I can get you the name of that. Yeah, I think, I mean, for me, it would be important for us to understand a little bit more about that for our, you know, federal legislative package, for other things.

[01:20:27] I mean, of all the talk that is out there about immigration and a lot of the negative components of it, you know, without policies that encourage people to be able to come to the United States and get jobs and improve their lives substantially while providing a service that we are not able to staff within the current population that we have in Fairfax County is a side of that that we should be talking about more. And if there are things that are happening at the federal level that we can be advocating for, I think that's a really important thing and I don't think many folks think of it that way and you know and it

[01:21:05] is a circumstance where you could improve the lives of a lot of people including people who are fleeing countries and wanting to come to the United States and at the same time helping people who live in Fairfax County be able to provide services that that are needed because one of the challenges that

we're stuck with for a long time and this in a lot of ways reminds me of things like teachers and mental health workers and other things is that, unfortunately, society doesn't value these occupations like they should.

[01:21:35] And these are critical occupations to the functioning of our economy. And in order to get wages to catch up is obviously a nationwide challenge that we're going to face. But if there's things we can be doing locally to advocate, to help with that, we need to be doing more of that.

[01:21:51] And so I appreciate the lens that you've used to look at this. It's very complete. And I think what we need are, you know, any recommendations as we move forward on things we can be doing to continue, you know, to work on the system-level policy drivers and the, you know, the work group recommendations on page 8, which I think are good.

[01:22:13] Thank you, Mr. Chairman. I'll go ahead and start with Mr. Alcorn and move that way. Thank you. Just very quickly, slide three, which, sorry, was just up there. I know there's been a lot of discussion about this, and I know the focus was on workers for this study, but if we could get at least a qualitative sense, how short are we in terms of long-term care facilities, both in terms of the market-based ones and also the ones like what Chair Palchuk brought up, ones that are for people with lower asset or incomes.

[01:22:51] I think it would be good to have at least some general understanding of how short we might be on a facility basis, too. So thank you. Yeah, and to clarify, I was looking at ones that were different sizes and maybe higher income and want to see what we have for lower income in those different size and locations.

[01:23:10] Yeah, excellent. Supervisor Stork. I keep coming back to the presentation before this one and this one, and when you see 89% of the caregivers are women, And being in the health care profession my whole life professionally, I see that as well.

[01:23:28] I also see where health care has something that's at least pretty powerful for people who want to progress and want to become more. There's truly, whether it's nursing assistants or medical assistants or you name it, there's so many different models, dental assistants and hygienists.

[01:23:49] I mean, there's so many different pathways or I should say career ladders that that go hand in hand with empowering women and giving them opportunities as well as the opportunities are competitive and the wage scales and health care generally are higher than average.

[01:24:07] So there's there's lots of ways to do this. I keep looking for with what was just presented something more concrete, because I think there is more concrete we can do. And I'm talking about encouraging, catalyzing, if you will, the private community, which is really, I think, our role, facilitating, which I think is our role, especially when it comes to education.

[01:24:33] And I would say, to go to the chairman's point, identifying legislative issues that we can be more, I guess, assertively acting on. I know from my own conversations with my staff and others that particularly for women who are challenged, maybe immigrants, maybe are newer to our communities and are really looking to be striving and get ahead, they need help.

[01:25:02] They need support. And one of the key parts of that in my mind is providing educational hands up. And I think we clearly are looking at a shortage. I know there's a nursing assistant, medical assistant, shortages.

[01:25:18] I think the power for us as a county is looking to leverage and support and putting programs together that can help that process. I mean, when folks get Medicaid or other kinds of support to their family or food stamps, et cetera, those are opportunities to show and help identify other pathways forward.

[01:25:46] Clearly, the school board can be part of that with their career certification. I mean, I know one of my passions for my time on the school board was to increase the number of students who were just certified in a particular field. And medical assisting is one of those areas they could be certified in.

[01:26:02] Now there's some limitations and restrictions, and we probably need to address those at the state level because unless you're 18, you can't do certain things. But those are the kind of things that you get that certification. Now you've got that next step up the ladder. I think those are things where we collectively with our school colleagues as well as internally with our financial support systems and our work with Northern Indian Community College, I think we can do more.

[01:26:29] And that's really my urgency and my comments is that I think we need to provide opportunities for people to apply for the, you know, to go through the FAFSA, which is a key part of how you fund that education. Helping, you know, those kind of issues to make that.

[01:26:47] We recognize green card folks maybe don't know as much about how to navigate the system, providing more navigational opportunities. Again, there's an only, you know, whether or not some of our undocumented residents, how they can work at least in an interim basis.

[01:27:04] And we need to, I think we need to be doing all of the above strategy. But I think we need more specifics about how do we do that. And I don't know what was intended for the next steps, but I'm here to encourage all of you to come back with some specific one, two, three, fours of what we can do, you know, by putting the resources we currently have or, you know, adding in or asking the board for, if you will, that low-hanging fruit for what's one or two other things we could do that would leverage those opportunities for folks to go up those career ladders.

[01:27:38] This is powerful. This is an opportunity. this clearly ties in with our commission for women and our work with women immigrants i mean it really hits all the buttons that we all recognize are important part of for the developing our community and having it be a welcoming you know um equal opportunity place for everyone thank you thank you supervisor stroke i think the kind of executive wanted to say something oh okay yes uh is that is that it all the questions on this topic all right um well thank

[01:28:13] you so much. I know we've given you a lot of homework. I appreciate the work. Clearly we are all very passionate. I know we recently heard from the older adults as well on this. And thank you to Trina as well and Michael and the whole team. Clearly public-private nonprofit partnerships are going to be pretty critical moving forward. So thank you on that. We do have one final topic, but we knew there would be a short amount of time on this so we are prepared uh chris leonard if you want to kick it off sure i just really quick this is i don't want to spike the ball in the end

[01:28:50] zone a little sports reference for you uh this is wonderful news um i would pay particular attention and michael knew this was possible but uh i would pay a particular attention maybe michael go right to slide four um and i would highlight the 97 within fairfax county uh compared to the 92 and a half percent in the Virginia and I'm fairly certain you take the 97 percent out the the 92 and a half percent from

Virginia drops down into the 80s so I'm not a big spike the football but Dr. Beckett's and his team did a wonderful job I had no idea a year ago how he's going to get this

[01:29:23] done so Michael you got 90 seconds well I didn't know how it was going to get done either and so just to drive this point home what's really important about this slide is that we're well above what happened nationally to make sure that people who had Medicaid kept their Medicaid or was deemed eligible as necessary. So that's like remarkable. To drive a point home, we have seen a 45 percent increase in the Medicaid enrollment numbers since right before the pandemic. So February 2020, 120,000 people. A couple months ago, 173,000 people. We are going to have to figure out

[01:30:02] how we are going to be able to sustain this level of timeliness and sort of commitment to the community in order to make sure that healthcare does not become a problem. One of the things that's really important is, you know, I get the credit at this table. There are people in this room from the department. We introduced our Medicaid Unwinding Strategic Implementation Committee, which is music to my ears and to Lisa Tatum, who could not be here. They are represented here. I asked them to come because it's really important that their work is celebrated because

[01:30:39] this is absolutely amazing. Could you all stand up for a second, please, if you're here from our Medicaid and processing team? Just two more bullet points and I'll be out of here. I think what's important about this growth in the Medicaid population or the enrollment numbers is that these are people who are largely the working sort of poor. These are folks who the United Way would

[01:31:14] call our asset-limited income-constrained employed individuals. And so when we think about public assistance, there's often a sort of like a stigma attached to sort of the folks who get these benefits. But these are working Fairfax County residents, and this growth in the population on the Medicaid rolls is directly related to the expansion of Medicaid eligibility that started in 2019. And so what we're going to have to do as a department, my second bullet, is to really go back and evaluate the workload and the caseload against our existing staffing pattern and strategy

[01:31:50] to figure out how we're going to reorganize our resources to sort of keep up this level of work. So thank you for your time. Thank you, team, for all the great work. Let me just add real quick because this will be an update coming in the fall, but when Michael talked about that was the Alice population, asset limited income constrained employed, that's the Alice population.

[01:32:12] You may recall that is the targeted population for our basic income pilot that is running that we are due for the board to get an update this fall. Excellent. Well, thank you all so much. Thank you again to the team. I know we don't have enough time for questions here. If you do have follow-up questions, let us know.

[01:32:29] I will just note, VDSS, I know as we talk about the state, the improvements they needed to make on technology hopefully are there or in the process, because I've heard how what a nightmare that could be at a time. So thank you again. Very excited to see that we're at that 97% mark.

[01:32:46] And with that, we are adjourned.



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