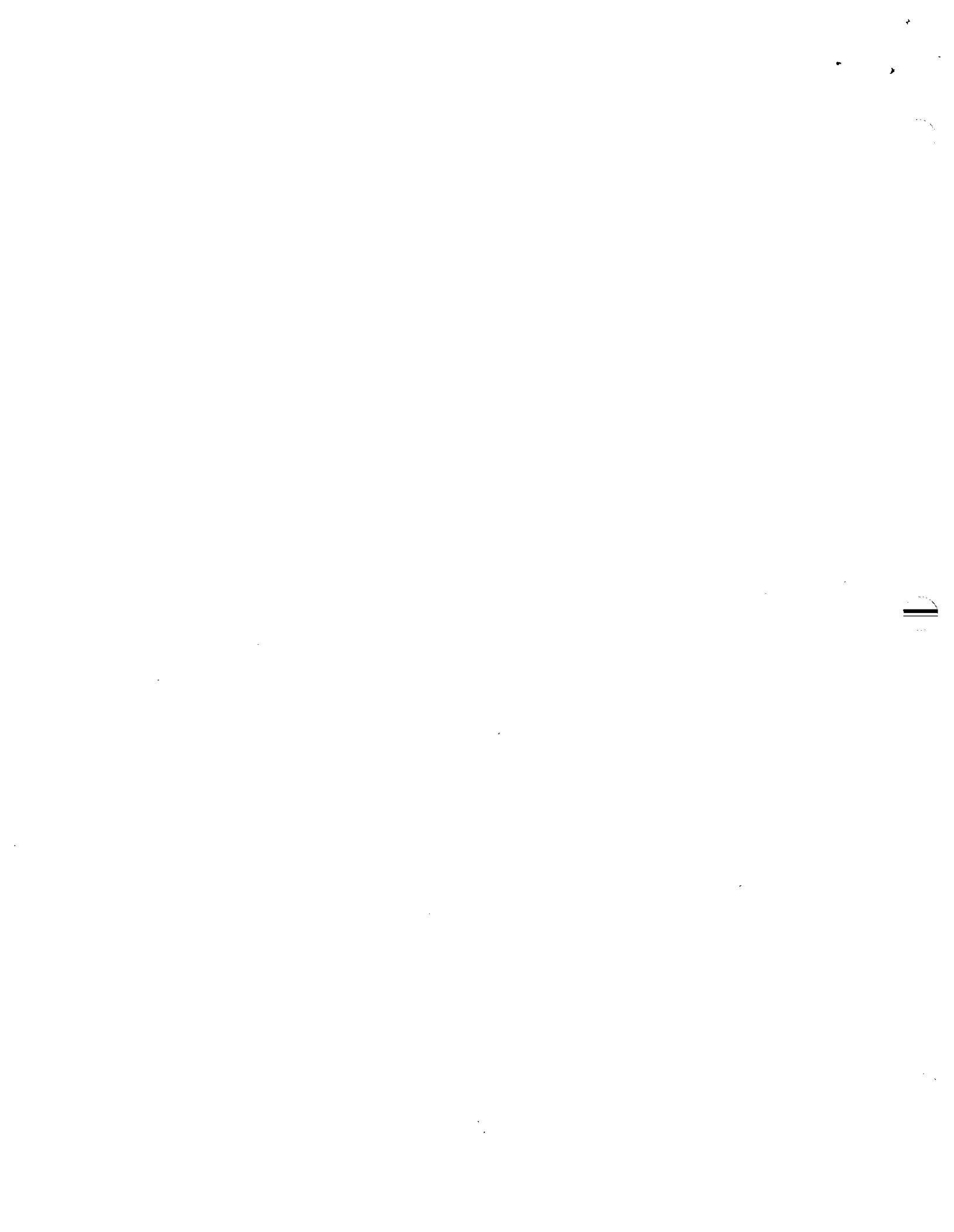




**PALM BEACH COUNTY
1989 COMPREHENSIVE PLAN**

**HEALTH & HUMAN
SERVICES**



HEALTH AND HUMAN SERVICES

I. INTRODUCTION

**ALL SALES ON
PRINTED MATTER
ARE FINAL**

A. Purpose

The contents of this Element of the Comprehensive Plan address the provision of sufficient and appropriate health and human services for residents of Palm Beach County. This optional plan element has been prepared pursuant to the standards of Chapter 163, FS, and Rule 9J-5.018, FAC.

As one of the fastest growing counties in the nation, Palm Beach County is faced with enormous planning and operational responsibilities for ensuring that the current and future demand for services is met. This Element incorporates current and projected service needs and costs in order to ensure the availability and accessibility of health and human services for County residents.

This is an innovative component of comprehensive planning, and during the course of developing the Element, programs and issues were identified that require further study and that will be included in future Plan updates, including:

- o Programs and agencies providing health and human services through the criminal and juvenile justice processes;
- o The issue of County involvement in locating major health care facilities, such as hospitals. Although the majority of hospitals are located in municipalities, the County must develop standards and criteria in cooperation with the District IX Health Planning Council, which has major responsibility for siting and approving new facilities, and for considering land use and zoning requests as well as development approvals; and
- o ~~The future of the Health Care Taxing District. At such time that the Health Care Taxing District is officially approved (a one and one-half year implementation period) this Element will have to be revised to show the appropriate implementation of the District's plans~~ revision of this element to reflect the specific programs, strategies, and responsibilities to be implemented jointly by the Health Care Taxing District and the Palm Beach County Community Service Planning Unit.

The planning period for this Element was limited to 10 years instead of the 20-year period used in the other elements because of the uncertainty in health care innovations and technology. In addition, the fiscal and social impacts of the AIDS and substance-abuse epidemics make the validity of projections past 10 years questionable.

B. Problem Identification

The current service needs of the County were identified and analyzed, and service gaps were identified in order to focus the Health and Human Services Element. Detailed documentation of this analysis is provided in the following MGT of America, Inc. reports written in 1988:

- o Phase Two Progress Report, *Development of an Inventory of Current Health and Human Services Programs*;

- o Phase Three Progress Report, *Assignment of Current Needs*;
- o Phase Four Progress Report, *Projection of Future Service and Facility Needs and Costs, 1989-2000*; and
- o Phase Five Progress Report, *Draft Goals, Objectives and Policies*.

Methods used to identify problems and needs and to establish the continuum of health and human services for the County include the following:

- o The input and recommendations of the Technical Support Committee;
- o Review of available needs assessment data and eleven needs assessment surveys;
- o Analysis of needs based on responses from selected key informants;
- o Analysis of data collected during site visits and interviews with directors of 46 agencies partly or totally funded by the County; and
- o A comparative analysis of County health and human services expenditures with selected Florida counties.

II. GOAL, OBJECTIVES AND POLICIES

It is the **GOAL** of Palm Beach County to ensure the availability of health and human services sufficient to protect the health, safety and welfare of its residents.

OBJECTIVE 1 Implementation

By February, 1990, Palm Beach County shall develop and initiate an effective method to plan, coordinate and advertise the diverse agencies and programs providing health and human services.

Policy 1-a: The County Department of Community Services shall design a planning unit in cooperation and participation with other local and regional agencies to ensure ongoing planning, development, coordination and implementation, and shall be responsible for planning and evaluation of needed health and human services programs and facilities.

Policy 1-b: The Planning Unit shall design and initiate a comprehensive data bank for health and human services agencies and programs.

Policy 1-c: The Planning Unit shall have primary responsibility for reviewing and coordinating grant requests and for administering and monitoring County funding of health and human services.

Policy 1-d: The Planning Unit shall identify and monitor revenues and funding from federal and state sources, provide technical assistance in securing such grants after identifying the most appropriate qualifying agency/grantee and provide technical assistance to the County Department of Public Affairs in order to develop a strong legislative platform and presence with regard to relevant issues.

Policy 1-e: The Planning Unit shall coordinate with local public and private agencies to set priorities for service improvement and to develop consistent and appropriate levels of service.

Policy 1-f: The County shall immediately designate Crisis Line Information and Referral Service, Inc. as the central agency to handle all information and referral services for County agencies, and by January, 1994, shall assist Crisis Line in resolving the difficulties of obtaining a Countywide telephone number.

Policy 1-g: Crisis Line shall develop a comprehensive directory of available health, mental health and human services programs and develop a plan for Countywide distribution by January, 1992.

OBJECTIVE 2 Service Delivery Requirements

Palm Beach County shall maintain and coordinate a health and human services delivery system that promotes good health and quality human services for all citizens; promotes individual responsibility for good health; assures access to affordable, quality health care; and reduces the cost of health care, mental health and human services as a percentage of the available financial resources.

Policy 2-a: The County shall ~~encourage~~ assist in the establishment and initiation of a ~~Countywide-comprehensive~~ Health eCare (Taxing d)District, to improve programming, funding and service management of health care service delivery.

Policy 2-b: The County shall define *medical indigence* across all County programs to standardize eligibility and detect gaps in service. The County shall develop sliding fee scales for indigent care programs, broaden eligibility, define individual responsibility for health care and help fund programs.

Policy 2-c: The County shall expand and emphasize preventive, primary and outpatient care services wherever possible and shall support the expansion and broaden the eligibility of cost-effective services outside of institutions.

Policy 2-d: The County shall centralize and support those services that are more economical to provide through centralized-unit locations based on specific geographic need, demand and programmatic feasibility.

Policy 2-e: The County shall investigate methods to require new development to share in paying for the impact of growth, the cost of new or expanded County facilities and/or new or expanded programs. Community-based health, rehabilitative, mental health, alcohol and drug abuse and human services facilities and programs shall be developed concurrently with County growth and development.

Policy 2-f: The Child Care Advisory Board shall evaluate the standards and regulations governing daycare centers to ensure delivery of acceptable levels of service.

Policy 2-g: The County shall facilitate actions between private providers and state regulatory agencies to ensure that residents have sufficient and appropriate medical facilities.

Policy 2-h: The County shall promote cost-containment methods of providing services by developing community-based services at a level of service appropriate to the need.

OBJECTIVE 3 Health Services

Palm Beach County shall annually provide the delivery of all the statutorily prescribed health services and other services required by the Board of County Commissioners and the Department of Health and Rehabilitative Services.

Policy 3-a: The County shall develop a trauma system, consistent with the County Trauma Plan with two centers by January, 1990, to help prevent deaths from critical injuries.

Policy 3-b: The Public Health Unit shall maintain and continually improve a data base of service utilization, costs and un-met need and shall cooperate with other organizations in the establishment of a comprehensive health care data system for the County interfaced with that developed by the Community Services Planning Unit.

Policy 3-c: The Public Health Unit shall monitor and explore funding sources for expansion of existing programs and the establishment of new services.

Policy 3-d: The Public Health Unit shall support the active participation of the private sector in providing primary health care.

Policy 3-e: The County shall increase the availability of early detection, prevention and educational services for individuals with developmental disabilities or physical handicaps by encouraging service agencies to coordinate their efforts and broaden their outreach programs.

Policy 3-f: The Public Health Unit shall expand family planning services and provide a full continuum of pre- and post-natal care to all pregnant women whose incomes are 150% and below of the federal poverty level, who are teenagers or who are in other high-risk categories through the Medicaid in the Improved Pregnancy Outcome Program.

Policy 3-g: The ~~County~~ Public Health Unit shall increase enrollment in the Medicaid Prepaid Health Plan Program and primary health care programs to ensure the availability of appropriate quality primary health care services to low-income and medically indigent children and adults through coordination of preventive and treatment services, using private providers where necessary.

Policy 3-h: Consistent with eligibility guidelines, the County shall assist in the delivery of daily balanced meals through senior centers, congregate meal sites, home delivery services and the National School Lunch Program.

Policy 3-i: The County shall coordinate health care services to address the medical needs of children held in juvenile detention centers.

OBJECTIVE 4 Health Education Services

Palm Beach County shall promote prevention, early detection and treatment services by educating the community as to the major causes of communicable and chronic diseases, disabilities and death.

Policy 4-a: The Public Health Unit shall promote health education through the media, adult education and other health department programs to discourage practices leading to lifestyle illnesses such as high-cholesterol levels and heart disease, smoking-related diseases, substance abuse, chronic obesity, malnutrition and nervous diseases related to stress.

Policy 4-b: The Public Health Unit shall continually ensure that all health care-related policies and programs emphasize wellness, the prevention of illness and injury and rehabilitative care.

Policy 4-c: The Public Health Unit shall maintain its comprehensive programs for chronic ~~degenerative~~ diseases.

Policy 4-d: The Public Health Unit, through clinical programs, will screen for, detect and treat ~~degenerative~~ chronic diseases as early as possible.

Policy 4-e: The County shall assist other public and private sector agencies in prevention and detection programs through coordination and participation in health education programs.

Policy 4-f: The Public Health Unit shall promote early immunizations at all clinic sites in its the following programs: Women, Infant and Children, Women's, Infants', and Children's Supplemental Food; Improved Pregnancy Outcome; and Early Periodic Screening Detection Diagnosis and Treatment programs, and-at-clinic-sites.

Policy 4-g: The Public Health Unit shall sponsor health education programs and seminars with private physicians, school officials, parents and other groups to promote early immunizations.

Policy 4-h: The Public Health Unit shall continue to fluoridate public water supplies in the Palm Beach County Water Utility Department service area and encourage other service providers to do the same.

Policy 4-i: The Public Health Unit shall expand its nutrition education efforts to reach high-risk populations such as those at congregate meal sites, individuals at risk for chronic diseases and those served in the WIC Supplemental Food Program.

OBJECTIVE 5 School Health

Palm Beach County shall increase health services by five percent per year in public and private schools to more fully appraise, protect and promote the health of students.

Policy 5-a: The Public Health Unit shall annually increase per capita nursing services in schools for education, screening and referral services, referral follow-up, emergency health care, tracking communicable diseases and supporting health care for children with special needs.

Policy 5-b: The Public Health Unit shall coordinate with the School Board administration in planning and implementing health services and health education programs.

Policy 5-c: The Public Health Unit shall continually encourage prevention programs in schools that promote knowledge regarding AIDS, substance abuse, teenage pregnancy, nutrition and dental health.

Policy 5-d: The Public Health Unit shall expand the sodium fluoride mouth rinse program in public schools, grades K-5, and shall offer technical assistance and education in the private schools.

Policy 5-e: The Public Health Unit shall expand the Medicaid Early Periodic Screening, Detection and Treatment Program to identify and treat conditions in children and young people before the conditions become serious.

Policy 5-f: The Public Health Unit shall expand programs for preventive and basic dental care to children.

OBJECTIVE 6 Environmental Health

Palm Beach County shall strengthen licensing, tracking surveillance and enforcement procedures in order to reduce public exposure to health hazards by 10 percent by January, 1990; to assure community sanitation by maintaining a 90 percent compliance rate in public and institutional settings, with follow-up to assure 100 percent compliance where problems are identified.

Policy 6-a: The Public Health Unit shall review, monitor and recommend new laws or revisions to state laws and County ordinances for ~~protection of the environment and the public's health~~ the specific purpose of strengthening licensing, surveillance, and enforcement procedures related to the protection of the environment and the public health.

Policy 6-b: The Public Health Unit shall conduct necessary epidemiological investigations and studies to determine causes and effects of environmental contamination and other disease outbreaks to provide for increased ability by the Public Health Unit to develop new surveillance (monitoring) activities with respect to type and severity of environmental contamination and disease outbreaks.

Policy 6-c: The County shall ~~investigate and implement appropriate incentive actions designed to control pollution~~ conduct research, and develop and implement strategic plans which provide incentives (e.g.: tax incentives) for the control of pollution as an alternative strategy to the normal regulatory approach.

OBJECTIVE 7 Mental Health

Palm Beach County shall support mental health and substance abuse service delivery systems designed to reduce the incidence and severity of these problems among all age groups by 10 percent by January, 1994, and by an additional 10 percent by January, 1999.

Policy 7-a: The County through a joint planning project shall cooperate fully with the HRS District Mental Health Program office to establish a single, comprehensive documentation and tracking system to provide information about the need for private and public resources to address alcohol, drug abuse and mental health problems in the County.

Policy 7-b: The County Department of Public Affairs, in conjunction with the District Health Council, shall address the excessively low level of state participation in the funding of Baker Act detoxification facilities and attempt to obtain additional funding for this purpose.

Policy 7-c: The County shall conduct research and develop a strategic plan which addresses the need for ~~investigate the establishment of~~ centrally located Screening and Emergency Service Centers to meet unmet demand for screening, detoxification and stabilization services.

Policy 7-d: The County shall investigate ~~conduct research and develop a strategic plan which address~~ the feasibility and/or alternatives of subsidizing more reasonably priced treatment facilities for people who have no insurance and cannot afford the high costs of for-profit treatment facilities.

Policy 7-e: The County shall provide education and prevention programs, especially in schools, that show the health and legal consequences of drug and alcohol abuse.

Policy 7-f: The County through funding and strategic planning efforts shall support screening and other programs designed to identify potential or actual mental health problems or drug and alcohol abuse in children for the purpose of early detection, direction or intervention.

Policy 7-g: Mental health programs and drug and alcohol prevention and/or rehabilitation programs for children shall be required to offer parental counseling in order to obtain County funding.

Policy 7-h: The County through funding and strategic planning efforts shall support short-term crisis stabilization units for those children who need emergency treatment but cannot get into long-term treatment facilities.

Policy 7-i: The County through funding and strategic planning efforts shall support and coordinate with the HRS and other community agencies in the provision of adequate mental health evaluation and treatment services for children and adolescents held in juvenile detention.

Policy 7-j: The County through its planning unit (see Objective 1) shall determine the need for and fund additional school-based substance abuse and prevention programs.

OBJECTIVE 8 Acquired Immune Deficiency Syndrome

Palm Beach County shall facilitate access to comprehensive medical and social services including preventive, primary, secondary, tertiary and long-term care for AIDS patients, their families and identified high-risk populations by January, 1990.

Policy 8-a: The Public Health Unit shall require efforts to utilize health education and risk reduction strategies that maximize the prevention and spread of AIDS in routine counseling at family planning, maternity, primary care and other public clinics.

Policy 8-b: The Public Health Unit shall maintain effective screening and counseling techniques to prevent disease spread and facilitate investigations, including:

- o maintaining local computerized records;
- o coordinating with private physicians and dentists;
- o maintaining quality laboratory and diagnostic services; and
- o coordinating with the Medical Examiner's Office to confirm AIDS cases through autopsies.

Policy 8-c: The County shall maintain a coordinated case management system for AIDS patients and their families that includes health and human service resources.

Policy 8-d: The County shall expand the staff and services at the AIDS Unit at the County Home and General Care Facility to serve existing and newly-diagnosed adults and children.

Policy 8-e: The County shall support formation of AIDS Units at skilled nursing facilities and investigate alternative community-based treatment services for AIDS patients.

Policy 8-f: The County shall support, uphold and enforce non-discrimination statutes against AIDS patients and their families in health, human services, housing, employment and education.

Policy 8-g: The County shall identify and aggressively compete for state and federal financial support for the prevention and treatment of AIDS.

OBJECTIVE 9 Human Services

Palm Beach County shall increase human services that are directed toward self-sufficiency and independence by 20 percent by January, 1999.

Policy 9-a: The County through funding and strategic planning efforts shall ensure that the housing, health care, transportation, day care, job training, employment counseling, retirement planning and service accessibility needs of all its residents, including the elderly, are met in a manner that promotes family stability, independence and self-sufficiency.

Policy 9-b: The County through strategic planning efforts shall review the location of day care centers and determine develop appropriate siting criteria (such as distance from public health hazards and accessibility) for adoption as plan review criteria.

Policy 9-c: The County shall designate the Children's Services Council as the lead agency to identify needs, gaps in service and other issues affecting children and families. Specific lead agencies for other target populations such as the elderly, the handicapped and the developmentally disabled shall also be designated.

Policy 9-d: The County shall encourage the federal government to strengthen the family unit by allowing two-parent families to receive Aid to Families with Dependent Children (AFDC), through documenting the problem and seeking related changes in Federal Law (s) and Rules and Regulations.

OBJECTIVE 10 Abuse and Neglect

Palm Beach County shall develop public awareness programs and increase human services available to reduce the incidence of abuse, neglect and exploitation of the elderly and children by 20 percent by January, 1994, and by an additional 20 percent by January, 1999.

Policy 10-a: The County shall provide 60 or more seminars per year to area recreational centers, schools, senior centers and public health clinics explaining the problem of abuse and neglect and identifying community resources able to meet this need.

Policy 10-b: The County shall increase funding to organizations that provide outpatient counseling to abuse victims and perpetrators, coordinated with those offered by state programs.

Policy 10-c: The County shall ~~investigate ways~~ conduct research and develop strategic plans to increase funding to organizations that provide shelter and other supportive services, such as foster homes and temporary and transitional shelters to abuse victims.

Policy 10-d: The County through its planning unit (see Objective 1) shall coordinate with the School Board to incorporate into the educational curriculum components that focus on the skills, responsibilities and expectations involved in parenting.

Policy 10-e: The County through strategic planning efforts shall support programs to educate service providers, public officials, families, professionals and the public to recognize and report abuse, neglect and exploitation.

Policy 10-f: The County through strategic planning efforts shall promote the development of residential and outpatient services for elderly abuse and neglect victims.

Policy 10-g: The County shall coordinate efforts with the State Abuse Registry and the State Attorney to maintain data on abuse and neglect.

OBJECTIVE 11 Homeless

Palm Beach County shall ensure service or arrange for services to five percent more homeless persons per year for the next 10 years.

Policy 11-a: The County shall designate a working group to determine the best methods to identify and serve the homeless.

Policy 11-b: The County shall monitor the need for temporary shelters and emergency services for the homeless and shall increase its funding and service levels when required by unmet needs.

Policy 11-c: The County shall cooperate and coordinate with public and private providers by supporting the use of food and shelter vouchers and by providing episodic nutrition services to the homeless and to indigent children.

Policy 11-d: The County shall finance temporary shelters that provide residential services to runaway children.

III. EXISTING CONDITIONS

A. Service Delivery System

Palm Beach County provides services to over 1.1 million persons each year through a variety of health and human services programs; some receive services from more than one agency and therefore may be counted more than once in the program totals. Recipients of those services range across a wide spectrum of the County's population - the elderly and retired persons, the poor, the mentally ill, the mentally retarded, the handicapped, the chronically or acutely ill, neglected or abused children, substance abusers and many others, as shown in Table 1. Map 1 presents the general location of health and human services facilities.

These services take many forms and are delivered through a network of over 480 agencies and organizations. The County provides over \$32 million to fund the delivery of health and human services.

In addition to the programs managed and operated by the County, the County currently provides almost three million dollars to 39 "affiliated" agencies. These affiliated agencies, the target populations served, the number of clients served in 1987-88, and their budgets with matching revenue sources are listed in Table 1. The many private, social-service providers in Palm Beach County are not listed in this Element but constitute a vital component of the system.

Several major factors are important to facilitate understanding of existing conditions with regard to the health and human service delivery system. These factors include:

- o **Growth:** The County's population is growing at over four percent per year which increases demand for a variety of services;
- o **Density:** The County is the tenth most densely populated county in the state;
- o **Diversity:** The County's population includes a full spectrum of urban and

rural; wealthy and poor; and tourists, migrant workers, and permanent residents;

- o Indigence: Approximately 20 percent of the County population is classified as indigent under federal poverty guidelines;
- o Elderly: The County has over twice the national average of elderly population, which strongly influences service needs and delivery;
- o Costs: Rising costs for service delivery reduce the number of persons who can be served for the same amount of money;
- o AIDS: The social and health consequences of the AIDS epidemic are very significant and create new demand for a variety of services; and
- o Substance Abuse: The increasing and widespread use of crack cocaine has had a dramatic impact on the health and human services delivery system.

B. Service Delivery Components

On November 8, 1988, the electorate of Palm Beach County overwhelmingly approved the formation of an independent taxing body to oversee and manage the system of health care. In spite of the overwhelming voter support, a court challenge kept the fate of the Health Care Taxing District (HCTD) in the hand of the courts for many months.

While waiting for the courts to rule on the several areas under discussion, the Board of County Commissioners decided to proceed with the initiation and development of the District. District board members were appointed and their first formal meeting was held on February 13, 1989.

The Health Care Taxing District is divided into four subdistricts, each with its own subdistrict board, and a district-wide board and administrative staff. Beginning with the 89/90 fiscal year, the HCTD will provide funding for the following services within the County:

- o Indigent health care, including hospital care, physicians fees, outpatient care, visiting nurse care, transportation, medicine and drugs, and trauma care.
- o Initiation and operation of the County's Trauma System, except for a portion of the operating cost of the trauma helicopter, which will be 50% funded by the County in FY 89/90 only.
- o Local funding of the Health and Rehabilitative Services/ County Public Health Unit (HRS/CPHU), except for environmental health and engineering services and hazardous substance awareness services, which will be funded by the County, and ambulatory health care services for migrant agricultural workers and other indigent patients in the Glades, which are funded through a federal grant.

County-funded health and human services are provided on a Countywide basis. Services funded by the County may be categorized in the following manner:

- o Emergency Services: Services that are provided on an emergency, temporary and time-limited basis to meet immediate needs of service recipients. Services in this category include temporary or emergency food, shelter, medical care, transportation and crisis counseling; and

- o **Support Services:** Services that are ongoing in nature and delivered to service recipients over time. These services are generally aimed at providing the support necessary to foster independence and self-sufficiency.

The County funds several types of service agencies, as categorized below:

- o Agencies that provide direct medical or social services for clients;
- o Agencies that provide information, referral and education to clients, agencies and the general public;
- o Agencies that serve in a planning, coordinating and funding capacity for both County-funded and non-County-funded agencies and organizations.

Although the County helps to supply a wide variety of services, the demand for such services greatly exceeds the supply. The current level of service offered to residents of Palm Beach County is directly proportional to the level of funding for the services and actually determines the service level offered. Therefore, financial commitment is critical if the County is going to continue to meet the increasing demand for services.

C. Summary of Needs

Target populations in need of services and health and human services needs are presented in priority order in Figure 1. In addition, the analysis indicated several administrative areas that impact on the service delivery system, including planning and coordination, case management services and information and referral services.

The target population groups, priority service needs and administrative requirements were combined into eight major service areas for inclusion in the continuum of health and human services. Each of the service areas represents critical areas of need for defining future resource requirements and for the development of Goals, Objectives and Policies. The service areas include:

- o Substance Abuse;
- o Mental Health;
- o Transportation-Disadvantaged (discussed in the Mass Transit Element);
- o Public Health;
- o Human/Social Services;
- o Medical Care; and
- o Planning and Coordination.

In addition, minimum standards and criteria have been established for services included in the continuum to guide future development of the health and human services delivery system. In establishing criteria, it was determined that criteria should be designed to meet the following objectives:

- o To eliminate gaps in service delivery;
- o To eliminate duplication of services;
- o To increase coordination and integration of services between and among various agencies;
- o To assure delivery of basic services on a Countywide basis;
- o To make services more easily obtained and understood by the public;
- o To serve the needs of multi-problem clients; and
- o To increase responsiveness to community need.

**FIGURE 1
SUMMARY OF NEEDS ASSESSMENTS
PRIORITY RANKING**

Target Populations

Substance Abusers
AIDS Victims
Victims of Abuse
Infants
Children with Special Needs
Teenage Runaways
Handicapped
Mentally Ill
Migrants
Indigents
Non-English Speaking Minorities
Single and Low-Income Pregnant Women
Medically Uninsured/Underinsured

Services Needed

Substance Abuse Services
Affordable Housing
Emergency Shelter
Transportation
Child Day Care
Education/Prevention/Public Health
Trauma Network
Elderly
Food Service for Elderly
Crisis Counseling
Job Placement and Training
Teenage Recreation Programs
Home Health Care
Elderly Crime Prevention
Mental Health Residential Treatment
Charity Hospital Care
Elderly Day Care

IV. FUTURE CONDITIONS

The Palm Beach County Health and Human Services Element addresses future conditions in two primary areas. The first area deals with health and human services delivery system needs; the second deals with the resources required to address delivery system needs. Future conditions integrally related to service delivery needs and costs are listed below:

- o The health and human services needs of Palm Beach County will increase dramatically over the next five to ten years as a result of population increase, the diversity of needs and severity of health and human services problems;
- o Comprehensive planning to meet the diversity of health and human services needs must be integrated with public safety, public facilities, transportation, housing, land use and other areas that impact daily on the lives of all County residents;
- o The competing and increasing demands for County resources make it essential to coordinate planning and delivery of health and human services in the County, the region, the state and the federal government;
- o An increasing number of women will be working and will require a variety of support services such as affordable day care;
- o Health and human services must reach the most vulnerable and needy in the most cost-effective manner in order to impact real needs;
- o During the next five years, Palm Beach County will experience significant impacts on the delivery system for health and human services because of the AIDS and substance-abuse epidemics;
- o There will continue to be segments of the population not as well equipped to provide for themselves, such as the indigent working poor and the elderly. A variety of services and facilities to aid these populations will be needed and will remain a community responsibility;
- o Several funding sources will continue to be available over the next two decades. These sources include federal, state, local (city, County, and voluntary) entities and fees for service; and
- o Services provided by the state and private provider agencies not funded by the County will continue to play a major role in service delivery in the County and will benefit from planning and coordination services.

A. Levels of Service

One major assumption regarding future conditions is that future service needs for Palm Beach County can be extrapolated from population trends. In the health and human services area, there are a variety of methods for projecting service needs. For example, units of service and clients served may be used in projecting future service needs.

At present, the single common denominator is population. By using population data, it is possible to project the number of clients needing services by multiplying a ratio of the current service population to the County's current total population by the County's population projected over the next 10 years. Health

and human service needs are projected over a 10-year period using County population projections.

The service utilization rate is based on historical agency data. Where available, data on the number of clients served over a three-year period (1985-86, 1986-87, 1987-88) were used to establish the base for future projections.

The resources required by Palm Beach County were examined at three levels of service; i.e., the number of clients expected to receive services. The Current Service Level refers to the ratio of clients that currently receives services to the total population. Therefore, as the total population increases, so will the number of clients expected to be served. The five percent Annual Increase Service Level refers to the ratio of clients served to the total population plus a five percent increase in number over those served in the previous years. The 100 percent Service Level refers to an estimate of the total number of clients that will require service. This estimate was developed from all data available in each health and human service area, including waiting lists, estimates of the poverty level and estimates by key informants of the number of people needing services. This total number of clients needing services is extrapolated into the future in proportion to the projected increase in the total population. The results of the projections are presented in Table 2.

V. PLAN SUMMARY

A. Plan Description

In order to achieve the Goal and Objectives of this Element, the County Department of Community Services must play a major role in the Plan. Through the Planning Unit, referenced in Objective 1, the Department will be responsible for ongoing planning and coordination between the Public Health Unit, mental health agencies and other County-funded programs. In conjunction with these programs, the County will implement the programs necessary to assure an adequate data base for planning purposes and to monitor program development to ensure adequate levels of service to those in need of service.

Specifically, the Department of Community Services will ensure that a comprehensive data base is developed and utilized in program development and that interagency cooperation and coordination occurs with regard to program planning and service delivery. To improve programming, funding and service delivery, establishment of a health care taxing district is recommended and has been approved by County voters. Final resolution of the legal challenge to district formation is expected to take several months. In addition, the following steps will be taken to achieve the necessary planning and coordination levels:

- o Centralization of services and programs where feasible;
- o Emphasizing preventive care and early intervention by the appropriate agencies;
- o Utilization of impact fees to improve upon and expand funding for community-based service delivery;
- o Centralization of information and referral services through Crisis Line Information and Referral, Inc.;
- o Development and distribution of a comprehensive listing of available services; and
- o Ongoing coordination and linkage with public and private agencies.

TABLE 2
PALM BEACH COUNTY HEALTH AND HUMAN SERVICES
NUMBER OF CLIENTS EXPECTED TO BE SERVED
IN THE YEARS 1989, 1994, AND 1999
AT THREE LEVELS OF SERVICE

Base Year 1989			
Health & Human Service Area	Number of Clients		
	Current Service Level*	5% Annual Increase	100% Need
Mental Health	19,621	20,602	137,128
Substance Abuse	5,354	5,662	91,613
Emergency Services	46,458	48,781	97,445
Social Services	5,522	5,798	246,603
Medical Services	218,534	229,460	275,397
Public Health	309,386	324,855	377,739

Year 5 - 1994			
Health & Human Service Area	Number of Clients		
	Current Service Level*	5% Annual Increase	100% Need
Mental Health	23,016	30,843	157,721
Substance Abuse	6,281	8,416	105,014
Emergency Services	54,495	73,029	114,302
Social Services	6,477	8,680	305,686
Medical Services**	256,219	343,518	323,039
Public Health**	362,908	486,331	443,085

Year 10 - 1999			
Health & Human Service Area	Number of Clients		
	Current Service Level*	5% Annual Increase	100% Need
Mental Health	25,676	43,914	175,305
Substance Abuse	7,007	11,983	117,367
Emergency Services	60,795	103,980	127,515
Social Services	7,226	12,358	341,019
Medical Services**	285,774	489,107	360,381
Public Health**	404,859	692,446	494,304

* The number of clients serviced under the Current Services Level is adjusted annually in proportion to the natural population increase.

** The projections in the five percent Annual Increase Service Level exceed those in the 100 percent Service Level. The County will have met 100 percent of the projected need in these two areas in 1993.

SOURCE: MGT of America, Inc.; 1988

B. Programs and Services

In order to meet the Goal and Objective of this Element, the County will ensure the provision of services and programs in the following categories:

- o Health program services, health education services, school, environmental and mental health;
- o Services for victims of AIDS;
- o Human services for adults, families, children and the elderly; and
- o Services to the homeless and transportation disadvantaged.

C. Program Monitoring and Evaluation

In order to evaluate program efficiency and effectiveness, the County will monitor programs on an annual basis. The results of monitoring activities shall be used by the County to update the Health and Human Services Element on a regular basis, to modify the Goal and Objectives and to ensure that the Goal and Objectives are being met.

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BACKUP: Tandon Clone C:\elements\hhs2.doc

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Janice K. 8/13/89
Claudia 8/25/89
Donna 9/05/89

