

Promoting Self-Sufficiency and Quality of Life

Planning for Human Services in Hanover County 2007-2012



Adopted May 9, 2007

Hanover: People, Tradition & Spirit

EXECUTIVE SUMMARY

In 2006, the Hanover County Board of Supervisors approved development of a human services strategic plan to assist in providing policy direction for setting priorities in delivering human services to the citizens of Hanover County. The strategic planning process involved the collection and review of various existing data sources. County officials, department management and staff, and over 150 private, faith-based, and non-profit service providers and organizations were included in interviews, a survey, and multiple facilitated meetings which provided additional information. The collective experience of those involved in the process, as well as the existing quantitative data, shaped the resulting goals, objectives, and recommended strategies.

Promoting Self-Sufficiency and Quality of Life: Planning for Human Services in Hanover County 2007-2012 provides developmental guidance for primary human service departments. Throughout the strategic planning process, it became increasingly clear that there is a great deal of interdepartmental correlation in human service areas. Because of this, other departments are encouraged to also utilize this plan for guidance. Furthermore, since the provision of human services within the County extends beyond the government, it is hoped that private, faith-based, and non-profit service providers and organizations will also utilize this plan.

As part of the strategic planning process, a definition of human services for use within Hanover County was developed. This definition includes two priority categories which generally describe the purpose of human services, Self-Sufficiency and Quality of Life:

Human Services address individual and community well-being by promoting self-sufficiency and enhancing quality of life.

Promoting Self-Sufficiency and Quality of Life: Planning for Human Services in Hanover County 2007-2012 includes seven goals to strengthen the provision of human services within the County:

Goal 1: Provide for a health community

Goal 2: Provide for recreational and cultural opportunities

Goal 3: Provide for special needs populations

Goal 4: Provide for life long learning and educational services

Goal 5: Provide for specialized transportation service availability for human service mobility

Goal 6: Provide for consistent and effective communication of human service information

Goal 7: Provide for the coordinated, efficient and effective delivery of human services

A number of objectives and recommended strategies are included for each goal. In order to implement *Promoting Self-Sufficiency and Quality of Life: Planning for Human Services in Hanover County 2007-2012*, action plans, time frames for delivery, and lead departments will need to be identified. This next step in the strategic planning process is expected to occur in the coming fiscal year. In addition to county departments, private, faith-based, and non-profit service providers and organizations will be included in the work groups for developing action plans. It is possible that additional goals, objectives, and strategies will be identified during implementation as additional data elements are evaluated.

ACKNOWLEDGEMENTS

The completion of *Promoting Self-Sufficiency and Quality of Life: Planning for Human Services in Hanover County 2007-2012* would not have been possible without the involvement of management and staff from the following county, state, and multi-jurisdictional departments serving the County:

Animal Control
Community Corrections and Pretrial Services
Community Resources
Community Services Board
Courts
Economic Development
Emergency Communications
Fire/EMS
Health Department
Juvenile Court Services Unit
Pamunkey Regional Jail
Pamunkey Regional Library
Parks and Recreation
Planning
Public Schools
Public Utilities
Public Works
Sheriff's Office
Social Services
Virginia Cooperative Extension

The following also contributed to the completion of this document:

County Board of Supervisors
County Administrator's Office
Over 150 private, faith-based, and non-profit service providers and organizations

Transformation Systems, Inc. served as consultants for this project.

INTRODUCTION

In 2006, the Hanover County Board of Supervisors approved development of a human services strategic plan to assist in providing policy direction for setting priorities in delivering human services to the citizens of Hanover County. *Promoting Self-Sufficiency and Quality of Life: Planning for Human Services in Hanover County 2007-2012* is one of several plans that the County will utilize in decision making. This plan is not intended to replace any other plans; rather it is intended to serve as a general plan for all human services and provide developmental guidance for primary human service departments. Departments will ideally utilize *Promoting Self-Sufficiency and Quality of Life: Planning for Human Services in Hanover County 2007-2012* during their individual planning processes, linking their objectives and strategies to those identified in this plan. Like most broadly scoped strategic plans, this plan identifies a direction that may impact a number of departments and have benefits extending beyond those designated as primary human service providers. Throughout the strategic planning process, it became increasingly clear that there is a great deal of interdepartmental correlation in human service areas. Because of this, other departments are encouraged to also utilize this plan for guidance.

Many departments are responsible for the delivery of human services within the County. The primary departments providing such services include: Community Services Board, Social Services, Community Resources, Health, Juvenile Court Services, Community Corrections and Pretrial Services, Pamunkey Regional Library, and Virginia Cooperative Extension.¹ Parks and Recreation and Public Schools are also significantly involved in the delivery of human services within Hanover.

Several other county departments have a role in the delivery of human services through their programs, referrals, and/or relationships with the citizens and primary human service departments. These include, but may not be limited to: Courts, Pamunkey Regional Jail, Sheriff's Office, Emergency Communications, and Animal Control. Other county departments can greatly impact the delivery of human services through their decisions and supportive functions.

The Hanover County government's mission is to:

Provide a quality of life that is defined, encouraged, and supported by the community itself, where government focuses efficiently and effectively on the general well-being, education, and safety of the people, where service delivery is based on sound financial practices, and where growth is managed in creative and innovative ways.

Given this mission, it is important to also recognize the critical role non-governmental entities, including private, faith-based, and non-profit service providers and organizations play in the delivery of human services. Therefore, *Promoting Self-Sufficiency and Quality of Life: Planning for Human Services in Hanover County 2007-2012* involves these players and recognizes their current and potential contributions to human services within the County.

PROJECT METHODOLOGY

Strategic planning is a process that can take various forms. Developing a strategic plan for a broad reaching area such as human services is a unique approach. As identified earlier, a number of departments provide direct human service programs and services in Hanover County. Additionally, there are other county departments and various private, faith-based, and non-profit service providers and organizations to consider. It should also be noted that many of the departments included in the County's service structure may actually be under the Commonwealth of Virginia's management, have

¹ Some departments are state offices serving the County and some serve multiple jurisdictions.

reporting or functional obligations designated by state or federal authorities, or serve multiple jurisdictions.

Developing a strategic plan for human services necessitated the utilization of various sources of information, both qualitative and quantitative. The following elements were included as part of the planning process:

- Interviews with the County Administrator, Assistant County Administrator, members of the Board of Supervisors, and management from primary human service departments
- Review of existing primary human service department strategic plans
- Review of existing county documents such as the Comprehensive Plan and Citizen Survey
- Review of existing departmental data
- Review of national and statewide reports and data, including Census data
- Collection of select information regarding various departmental programs and services
- Collection of available resource data
- Survey distributed to over 150 external stakeholders including private, faith-based, and non-profit service providers and organizations
- Four facilitated meetings with county personnel (including personnel from state departments serving the County)
- Town hall meeting with county departments as well as private, faith-based, and non-profit service providers and organizations

Quantitative data and the collective experience of those involved in the interviews, survey, and facilitated meetings helped identify the strengths associated with the delivery of human services as well as the various weaknesses, issues, and needs. These were synthesized into the various goals, objectives and potential implementation strategies included in this report.

HANOVER COUNTY & HUMAN SERVICES

The County government has mission, vision, and value statements which apply to all departments under its management. Each primary human service department then has its own mission statement and some also have vision and value statements. Additionally, the various state-related departments, as well as the many private, faith-based, and non-profit service providers and organizations should have mission statements specific to their own entities. Many of the departments, providers, and organizations also have individual strategic plans. As noted in the Introduction, *Promoting Self-Sufficiency and Quality of Life: Planning for Human Services in Hanover County 2007-2012* is not intended to replace any existing departmental strategic plans but rather serve as an overall plan and developmental guide.

Because this plan is not specific to any single department or organization, the development of a mission statement is not determined necessary for this process; however, a uniform understanding of human services, best expressed through a definition, is needed. Early in the strategic planning process, it became clear that some people hold a narrow understanding of “human services” while others believe the term has a broader reach.

“Human services” is a broad topic and covers many areas. Like many terms, “human services” can be applied in various ways and most organizations can point to something they do that could be labeled as a “human service”. Complicating this, there is no industry-standard definition of “human services”. The Virginia Statewide Human Services Information and Referral System defines human services in the following manner:

The activities of human services professionals which help people become more self-sufficient, sustain independence, strengthen family relationships, support personal and social development and ensure the well-being of individuals, families, groups and communities. Specific human services include ensuring that people have access to adequate food, shelter, clothing and transportation; financial resources to meet their needs; consumer education and decision support; criminal justice or legal services; education and employment; health and mental health care including substance abuse services; and environmental protection; both routinely and in times of disaster or other emergencies. Human services also facilitate the capabilities of people to care for children or other dependents; ensure that protective services are available to those who are vulnerable; provide for the support of older adults and people with disabilities; offer social, faith-based, and leisure time activities; provide for the cultural enrichment of the community; and ensure that people have the information they need to fully participate in community life.²

As part of the strategic planning process, a definition of human services for use within Hanover County was developed. The definition development process included representation from a number of county departments (including state agencies providing services in the County) who first identified the customers of human services. In sum, the entire citizenry of Hanover County was identified, making the customer base all-encompassing. Besides customers, the process included identifying characteristics of human service programs and agencies, which was quite far reaching. (A complete listing of these characteristics is included in Table 1, Appendix A.)

Beginning with the adoption of the Hanover County human services strategic plan, the County’s definition of human services is:

Human Services address individual and community well-being by promoting self-sufficiency and enhancing quality of life.

The County’s newly created definition includes two priority categories which generally describe the purpose of human services: Self-Sufficiency and Quality of Life. Within each of these categories are three focus issues that support Self-Sufficiency or Quality of Life and further define human services:

Self-Sufficiency

- Specialized Transportation Services
- Economic Independence
- Housing

Quality of Life

- Health Care Services (physical and behavioral health)
- Recreation Opportunities
- Life Long Learning

The definition inherently recognizes the great deal of overlap and connectivity existing among the two priority categories and various focus issues. It also recognizes that “human services” means more than a list of specific departments and can be applied to any county department, or other organization providing human services in Hanover.

² The Virginia Statewide Human Services Information & Referral System was originally established in 1978 under authority of the *Code of Virginia*. Changes in the *Code* and system have occurred over the years. Currently, the System is authorized under §§63.2-222 and 63.2-226 of the *Code of Virginia*. References: 1) The Virginia Statewide Human Services I&R System, Database Inclusion/Exclusion Criteria; 2) *Code of Virginia*; 2) *Review of the Statewide Human Service Information and Referral Program in Virginia*, Joint Legislative Audit and Review Commission, November 1999.

SUMMARY DATA & INFORMATION

Hanover County, Virginia is located in the central region of the state, approximately 15 miles north of the state's capital, Richmond, and 70 miles south of the nation's capital, Washington, D.C. The County is a mix of rural and suburban centers, covering 471 square miles. The Town of Ashland, Virginia is located within the County, as is Randolph-Macon College, a private four-year institution of higher education. The County has a rich history. The landscape is marked by numerous historic sites and homes, including Scotchtown, the Hanover County Courthouse, and the Hanover Tavern. There are two national battlefields maintained and open year-round. The County is also home to Paramount's Kings Dominion, a 630 acre amusement park attracting over two million visitors annually.

Representatives from each of the departments primarily responsible for the delivery of human services in Hanover County, as well as other departments serving the County, participated in the strategic planning process. Additionally, other county officials and external stakeholders including private, faith-based, and non-profit service providers and organizations participated. The interviews, survey, and facilitated meetings conducted as part of the strategic planning process provided a great deal of qualitative information regarding the weaknesses, issues, and needs related to human services within Hanover County. Much of the qualitative information gathered is validated by the multiple sources citing similar weaknesses, issues, and needs.

An extensive amount of quantitative data were also collected, reviewed, and analyzed during the strategic planning process. The quantitative data were found to validate the qualitative findings in several areas. Various data sources were utilized, including the US Bureau of the Census, Voices for Virginia's Children, American Association of Retired Persons, departmental reports, economic profiles, and available community needs assessments.

The strategic planning process revealed that a great deal of program or department-specific data is collected by most primary human service departments. These data are collected primarily to determine if individual departments are meeting their established service targets. Although these data are quite valuable for assessing operations at the departmental level, they are unfortunately not very conducive to creating a systems perspective of human service needs in the County. Due to the breadth of services provided by these agencies, departments also gather data which are quite dissimilar and electronically isolated. Relevant needs assessment information is also sometimes available from external sources; however, such data are often regional and can not provide specific information at the County level. Compiling such information to create a "big picture" vantage point of potential service needs, duplications, and gaps is challenging under these circumstances. In addition, while agencies do prioritize the collection of service delivery data for very understandable reasons, a strategic perspective on assessing needs at the community level is likewise important to accomplishing meaningful needs analyses.

Several sources of community statistics and needs assessment data provide a sound understanding of the community's structure. Published reports support the perspectives of the internal and external stakeholders that were voiced throughout the strategic planning process. To provide context for the plan and its direction, a brief summary of the data utilized is provided. For ease of understanding, the data is divided into three primary areas: Community Data, Stakeholder Feedback, and Citizen Feedback. Supplementary data findings, including departmental data, are provided in more detail in Appendix B.

Community Data

A variety of national, statewide, and local data sources were consulted to develop a profile of the community. Based on 2006 U.S. Census figures, the County's total population was estimated at 96,309, suggesting population growth of approximately 11.6% since 2000. Of the total population, 89% are Caucasian and 10% are African-American. Census figures for other minority classifications,

such as Asians and Hispanics, suggest relative growth of more than 40% in the past 6 years. According to 2000 data, over 3% of the county's population speaks a language other than English. The median age of County residents is just over 37 years, with 27% falling below the age of 18 and another 15% aged 60 or older. The per capita income for 2004 was \$36,455. At the end of 2006, 54,993 residents comprised the Hanover civilian labor force and the County's unemployment rate was approximately 2.0%.

Needs assessment reports from the Richmond Area Metropolitan Planning Organization (2006) also provide perspective on needs for several specialized populations, such as low-income households, the elderly, and those with disabilities. These data indicate that almost 15% of Hanover's population possesses a disability. In addition, over 2,800 Hanover residents have incomes below the poverty level. The report further indicates that 3.5% of Hanover households have no vehicles available for transportation, while the County has limited alternative transportation options available.³

Stakeholder Feedback

Two primary groups of stakeholders were involved in the human services strategic planning process: Internal Stakeholders (members of the Board of Supervisors, and management and staff from governmental departments serving the County) and External Stakeholders (private, faith-based, and non-profit service providers and organizations). The information gathered from both groups provided a great deal of qualitative data used throughout the strategic planning process. Issues noted through this process are validated by the number of sources citing the issue. Supporting quantitative data exists for most issues.

The plan development process included the collection of feedback via a survey administered to over 150 private, faith-based and non-profit service providers and organizations. The findings indicate that most respondents offer services relating to basic needs, physical health, housing assistance, abuse/neglect, and education. Stakeholder survey findings also shed light on perceptions of community awareness of available services. Two questions were asked on a scale of 1 to 4 to address this issue, as shown below:

The average stakeholder rating for awareness of available services by **all** County residents was 2.4.



The average stakeholder rating for awareness of available services by **disadvantaged** County residents was 2.2.



³ All Community Data sources are cited in Appendix B.

Other key survey findings are as follows:

- Over one-quarter of respondents believe that less than half of the population is able to access services.
- The most common service gaps noted were housing, transportation, senior needs, and health/nutrition.
- The most common identified barriers to service utilization were transportation/distance and awareness of services.

In addition, internal stakeholder feedback was gathered through interviews and facilitated meetings. The combined results of the survey, interviews, and facilitated meetings resulted in the identification of the six focus issues supporting self-sufficiency or quality of life presented earlier in this report. In addition to the six specific focus issues, “communication” emerged as an issue crossing all areas.

Citizen Feedback

Existing citizen feedback was also considered, gathered from a sample of 540 Hanover residents who completed a citizen survey in 2005. Many positive findings emerged. Twenty-eight percent of respondents rated the overall quality of life in Hanover County as excellent while another 62% rated it as good. When compared to other localities in the southern region, Hanover County compared favorably on many dimensions such as its public schools, health services, services to low-income persons, crime prevention services, and employment opportunities. Many responding citizens also noted frequent engagement in county activities, such as public libraries or services (71%), recreational programs or activities (49%), usage of County parks (78%), and volunteering time (45%).

However, citizens did identify several notable areas for improvement related to human services, for example:

- 8% of respondents felt that access to quality health care was poor;
- 14% of respondents felt that the ease of car travel was poor, with 33% indicating that the ease of walking was poor;
- 13% felt that the availability of recreational programs or classes was poor;
- 38% agreed that they would encourage the construction of more affordable housing;
- 20% felt that the services to low-income persons were poor; and
- 12% felt that services to adolescents and teens were poor.

Issues cited as major problems by the citizen respondents, which also have implications for the delivery of or access to human services, included traffic congestion (31%), drugs (17%), unsupervised youth (10%), and translation of communications (3%).

GOALS, OBJECTIVES & RECOMMENDED STRATEGIES

Promoting Self-Sufficiency and Quality of Life: Planning for Human Services in Hanover County 2007-2012 includes seven goals to strengthen the provision of human services within the County. The goals were generated from input received from internal and external stakeholders and are *not* prioritized. Each goal is supported by various data sources. The chart on the next page shows each goal and the supporting data sources.

Strategic Plan Goal by Supporting Data Sources					
Goal	Interviews	Stakeholder Survey	Facilitated Meetings	Citizen Survey	Other Supporting Data
1: Provide for a healthy community	X	X	X	X	X
2: Provide for recreational and cultural opportunities	X	X	X	X	
3: Provide for special needs populations	X	X	X	X	X
4: Provide for life long learning and educational services	X	X	X	X	X
5: Provide for specialized transportation service availability for human service mobility	X	X	X	X	X
6: Provide for consistent and effective communication of human service information	X	X	X	X	
7: Provide for the coordinated, efficient and effective delivery of human services	X	X	X		

Each goal includes a number of objectives and recommended strategies, based largely on the collective experience of the internal stakeholders who participated in the facilitated meetings, as well as input from the external stakeholder survey and individual interviews contributing to the process. As with the goals, the objectives and strategies are not prioritized. Performance measurements will be identified during the next year as detailed action plans are developed.

GOAL 1: Provide for a healthy community

Objectives:

- 1.1 Expand the understanding of Hanover's health care issues among key policy makers by working with state and federal authorities on emerging health care concerns.

Recommended Strategies:

- 1.1:1 Assess need of health care services and medication by residents.
- 1.1:2 Determine level of uninsured or underinsured residents, and health care needs that may be due to substandard housing, electricity, and water (for example, someone may be able to obtain their medication, but cannot store it safely because they do not have appropriate refrigeration).
- 1.1:3 Utilize the Health Advisory Board to bring health care issues and concerns to the attention of the County Board of Supervisors and the community.

1.2 Expand health care services available within the County to provide for low income residents.

Recommended Strategies:

- 1.2:1 Offer a discount prescription program such as that available through the National Association of Counties to residents.
- 1.2:2 Work with the Medical Reserve Corp to identify ways to utilize their services on an on-going basis within the County.

1.3 Build and deliver prevention programming around assessments of need and at-risk indicators.

Recommended Strategies:

- 1.3:1 Utilize the Youth Risk Behavioral Survey or similar assessment to identify need areas for youth.
- 1.3:2 Assess elder population needs (such as nursing homes, retirement communities, etc.) to develop future care plans.
- 1.3:3 Request schools to reevaluate and review the family life planning curriculum currently delivered in schools to appropriately revise.

1.4 Ensure prevention programming is delivered in a coordinated manner to present a consistent message and reduce duplication.

Recommended Strategies:

- 1.4:1 Develop and deliver a coordinated county-wide prevention plan regarding drugs, alcohol and tobacco involving all primary human service departments, and others as needed.
- 1.4:2 Develop a coordinated plan to deliver prevention programming on other topics.

1.5 Ensure the effective and efficient delivery of treatment and counseling services for special needs populations, including the elderly, people with disabilities, those incarcerated, the homeless, and low-income populations.

Recommended Strategies:

- 1.5:1 Coordinate public and private services to increase efficiency and reduce duplication.
- 1.5:2 Develop joint plan among primary human service departments, and others as determined necessary (such as the jail) for delivering treatment and counseling services to specialized populations.
- 1.5:3 Explore alternative/creative funding and provision options such as grants and recruiting private and non-profit providers to meet needs.
- 1.5:4 Collaborate with community organizations to improve and encourage appropriate referrals for special needs.

- 1.6 Ensure that adult and juvenile offender populations receive necessary treatment and transitional support to increase their chances of living healthy and crime-free lives.

Recommended Strategies:

- 1.6:1 Develop collaborative approach to provide comprehensive re-entry programming and planning, including treatment, counseling, housing, employment, and skills; consider blending funds from various human services programs.
- 1.6:2 Pursue funds to deliver consistent treatment and counseling programming within the jail.
- 1.6:3 Evaluate costs and benefits of implementing an adult drug court program.
- 1.6:4 Evaluate costs and benefits of continuing the juvenile drug court program.
- 1.6:5 Evaluate costs and benefits of implementing residential programming for youth currently sent to detention who could be more appropriately sent to an alternative facility.

GOAL 2: Provide for recreational and cultural opportunities

Objectives:

- 2.1 Ensure that recreational and cultural opportunities are available for residents of all ages, including those with special needs.

Recommended Strategies:

- 2.1:1 Provide adequate and affordable before school, after school, and summer programming and cultural opportunities to meet needs of disabled and low-income populations.
 - 2.1:2 Expand the availability of affordable recreational and cultural opportunities for the elderly.
- 2.2 Expand facilities available for recreational, cultural, and community opportunities to meet demand and population distribution.

Recommended Strategies:

- 2.2:1 Evaluate development of “community centers” and an appropriate model for multi-use and community meeting space to enhance space options for the provision of human services such as recreational and cultural opportunities.
- 2.2:2 Evaluate the recreational and community facilities included in the County Comprehensive Plan.

GOAL 3: Provide for special needs populations

Objectives:

- 3.1 Ensure that specialized populations are provided with information on human service programs and services to meet their needs.

Recommended Strategies:

- 3.1:1 Provide specialized populations and their families with information on human service programs and services as identified in other goals within the Human Services Strategic Plan, including additional information as may be needed due to their particular circumstances.
 - 3.1:2 Utilize churches and schools for information distribution.
 - 3.1:3 Evaluate costs and benefits of placing Human Service Resource Specialists in schools.
- 3.2 Develop assessment of homelessness, including recognition of marginal and at-risk populations in order to adequately address the population's needs.

Recommended Strategies:

- 3.2:1 Develop definition and terminology of homelessness and those considered marginal and at-risk.
 - 3.2:2 Collect county-specific data on the homeless and those considered marginal and at-risk.
- 3.3 Ensure affordable, accessible, and livable housing for disabled, elderly, and low-income populations.

Recommended Strategies:

- 3.3:1 Assess housing needs for special needs populations, including assisted living facilities and group homes.
- 3.3:2 Determine extent of substandard housing and marginal living conditions within the County.
- 3.3:3 Develop coordinated planning process among primary human service departments and the County Planning Department to ensure that affordable, accessible, and livable housing for the disabled, elderly, and low-income is developed within the County to meet demand.
- 3.3:4 Coordinate existing departmental and external organizational efforts addressing substandard housing and marginal living conditions to maximize resources and reduce duplication.

GOAL 4: Provide for life long learning and educational services

Objectives:

- 4.1 Ensure the effective delivery and development of adult and senior educational and life-long learning options to deliver appropriate, needed, and desired programming in an efficient and customer-based manner.

Recommended Strategies:

- 4.1:1 Develop a coordinated plan involving human service departments, including schools, faith-based organizations, civic organizations, and others.
 - 4.1:2 Evaluate merits of establishing a Learning Academy for adults and seniors.
 - 4.1:3 Explore implementing distance learning options for adults and seniors.
 - 4.1:4 Evaluate potential use of school facilities for adult and senior educational services during non-school hours.
- 4.2 Provide continuing education, skill development and job readiness opportunities for disabled, mentally challenged, and low-income populations who age out of the school system to enhance their chances of achieving independent living skills and provide appropriate life-long learning opportunities.

Recommended Strategies:

- 4.2:1 Develop coordinated plan to provide educational, skill development and job readiness services for adult disabled, mentally challenged, and low-income populations.
 - 4.2:2 Evaluate potential use of school facilities for adult disabled and mentally challenged population educational services during non-school hours.
- 4.3 Ensure the effective delivery and development of preschool learning options to enhance success in school.

Recommended Strategies:

- 4.3:1 Develop a coordinated plan involving human service departments, schools, faith-based organizations, civic organizations, and others to raise awareness of available preschool options and the importance of preschool programming.
 - 4.3:2 Develop partnerships with faith-based organizations, volunteers, and civic organizations to expand preschool options for children who do not qualify for Head Start programming, but whose parents cannot afford quality preschool programming.
- 4.4 Identify educational, social, and recreational support needs of home school populations.

GOAL 5: Provide for specialized transportation service availability for human service mobility

Objectives:

- 5.1 Enhance available and affordable transportation services to meet the transportation needs of specialized populations, including the elderly, disabled, and low-income residents.
- 5.2 Identify specialized transportation service needs for youth.

Recommended Strategies (to address both Objectives under Goal 5):

- 5.1-2:1 Establish a multi-departmental committee, with representation from private, faith-based, and non-profit service providers and organizations to assist in developing alternate transportation service options for the elderly, disabled, low-income, youth, and other adults in need of transport to/from human service related programs and services.
- 5.1-2:2 Participate in the development of a regional Coordinated Human Service Mobility Plan to meet the requirements of SAFETEA-LU⁴ and enhance human service transportation access, minimize the duplication of services, and facilitate the most appropriate, cost-effective transportation possible.
- 5.1-2:3 Quantify level-of-need to determine how, where, and what types of transportation services to add or expand to support the delivery of human services in the County.
- 5.1-2:4 Catalog the level-of-service available from county departments and the private providers serving the County to determine gaps in transportation service including, but not limited to: potential recipients, costs, times of operation, and capacity.
- 5.1-2:5 Utilize the multi-departmental committee recommended in 5.1-2:1 to:
 - 5.1-2:5a Develop fleet sharing protocol and transportation service plan in combination with multiple departments, churches, and private organizations to expand transportation options.
 - 5.1-2:5b Work with youth and their parents to determine level-of-interest for transportation service options.
 - 5.1-2:5c Work with private providers to expand existing transportation services to bridge gaps between need and capacity.
 - 5.1-2:5d Recruit new transportation providers to cover areas (including times and populations) that existing providers can not or will not expand to.
 - 5.1-2:5e Assess the potential costs and benefits of using school buses during non-school hours to assist with specialized transportation needs.
 - 5.1-2:5f Evaluate feasibility of utilizing volunteers to assist with specialized transportation services (Red Cross model).

⁴ SAFETEA-LU stands for Safe, Accountable, Flexible, Efficient Transportation Equity Act – Legacy for Users federal program. The Virginia Department of Rail and Public Transportation is assisting in the implementation of this project.

- 5.3 Develop a process that includes consideration of safe bicycle paths in planning efforts along new and existing roadways to increase transportation options.

GOAL 6: Provide for consistent and effective communication of human service information

Objectives:

- 6.1 Provide consistent and accessible information on human service programs and services available within the County to employees, providers, and citizens in order to enhance information sharing and understanding.

Recommended Strategies:

- 6.1:1 Develop a human service resource directory of programs, services, fees, and contacts for use by county employees, citizens, businesses, and private, faith-based, and non-profit service providers and organizations.
 - 6.1:2 Post human services resource directory and updates on county website.
 - 6.1:3 Provide citizens, businesses, human service providers, faith-based organizations, and others without Internet access hard copies of a human services resource directory.
- 6.2 Provide the community with human services information in a clear and timely manner to increase the general population's awareness of the various human services and to provide information on new programs or changes.

Recommended Strategies:

- 6.2:1 Increase frequency and topic coverage of print publications (such as the Hanover Review or a separate newsletter) and distribute (by mail) allowing for more information regarding human services in general, as well as programs and services.
 - 6.2:2 Explore other media development options to increase awareness and provide information.
- 6.3 Provide the community with human services information to reduce stigma often associated with certain human services and specialized populations.

Recommended Strategies:

- 6.3:1 Increase frequency and topic coverage of print publications (such as the Hanover Review or a separate newsletter) and distribute (by mail) allowing for more information regarding human services that serve the public in general, as well as specialized populations.
- 6.3:2 Promote a broad definition and understanding of human services to educate citizens.
- 6.3:3 Develop public education and awareness campaign for all ages to reduce stigma, increase knowledge, and reduce fear of using human services.

- 6.4 Provide county departments, including state and multi-jurisdictional agencies serving the County, with human services information, including, but not limited to, general information, programming changes, and staffing to educate internal departments on human service programs and services and to enhance on-going internal communication.

Recommended Strategies:

- 6.4:1 Develop a “human services” specific employee orientation for employees working within or with human services departments.
- 6.4:2 Present all county employees with general information on human services available within the County to provide an understanding of available programs and services, thus improving their ability to respond to citizen requests or issues that may arise during the normal course of their duties.
- 6.4:3 Develop a process to keep employees informed and up-to-date on human services programs and services, changes or new additions, and appropriate staff contact information; consider ideas such as an intra-net bulletin board that employees can access, a regular e-newsletter, and similar methods.
- 6.4:4 Explore expanding Intranet/LAN access to state human service related employees serving the County.

GOAL 7: Provide for the coordinated, efficient and effective delivery of human services

Objectives:

- 7.1 Ensure the coordinated and efficient delivery of human services programming to maximize resources and minimize duplication.

Recommended Strategies:

- 7.1:1 Hold an annual interdepartmental human services retreat to review the human services strategic plan, provide presentations, and allow for directed information sharing discussions in order to update the plan and allow human service departments and other select county departments an event-based opportunity to meet and work collaboratively.
- 7.1:2 Expand human service department interdepartmental meetings, including more departmental representatives to increase information sharing and problem solving across departmental and functional lines.
- 7.1:3 Ensure that human service departments' heads and management share information with staff to increase staff understanding, involvement, and commitment.
- 7.1:4 Tailor individual strategic plans of human service departments to include and address key issues included in *Promoting Self-Sufficiency and Quality of Life: Planning for Human Services in Hanover County* where appropriate.
- 7.1:5 Develop uniform assessment and implementation criteria for new human service programs in order to maximize resources and minimize duplication.
- 7.1:6 Collaborate on human services grant and study efforts to maximize resources and reduce duplication.

7.2 Respond to requests for human service information that addresses the request or provides an accurate referral.

Recommended Strategies:

7.2:1 Explore the feasibility of implementing a system to respond to citizen inquiries regarding all human service programs and services in a timely manner to meet citizen expectations, provide a single-point-of contact for information, recognize access limitations citizens have to the Internet and county offices, and allow citizens to have personal contact with a county representative outside of county business hours.

7.2:2 Develop a human services customer service improvement plan; consider including a general county definition of "customer service", strategies to hold human service department staff accountable to the customer service component in their performance evaluations, and training approaches..

7.2:3 Post human services staff contact information on county website.

7.2:4 Evaluate the costs and benefits of developing a centralized ombudsman position to receive, investigate, and track citizen complains.

7.3 Ensure the provision of necessary human services, and the ongoing operation of primary human service departments, during a natural or manmade disaster or emergency situation.

Recommended Strategies:

7.3:1 Expand consideration of implementing a Reverse 911 system to include human service departments.

7.3:2 Develop internal human service departmental preparation plans to designate emergency procedures and essential staff.

7.3:3 Develop emergency services plans, including transportation, for residents to ensure necessary continued care in the event of an emergency that may disrupt human services.

7.3:4 Develop a plan to enhance resources for mobilizing volunteers in the event of an emergency.

7.3:5 Develop a collaborative emergency shelter plan that involves all human service departments and schools to address provisional care and transportation needs.

7.4 Maintain an appropriate infrastructure in order to provide county-based human services to the County's residents.

Recommended Strategies:

7.4:1 Evaluate costs and benefits of developing additional satellite offices (including "county store" concept) for human service departments to align with population needs, including location and transportation.

7.4:2 Conduct a feasibility study to determine if high speed Internet can be implemented as a county-provided, county-wide service.

7.5 Ensure a prepared and skilled workforce to meet the County's human service needs.

Recommended Strategies:

- 7.5:1 Evaluate the status of human service department staff to determine the impact retirements and turn-over will have by 2015.
- 7.5:2 Develop strategies to attract and retain human services employees.
- 7.5:3 Evaluate reward and compensation packages for primary human service positions to determine if competitive and in-line with the County's cost-of-living.

CONCLUSION

The term "human services" means different things to different people. It is a term that, in its broadest sense, can be applied to a number of departments, programs, or services, regardless of their placement within an organizational chart. As noted previously, *Promoting Self-Sufficiency and Quality of Life: Planning for Human Services in Hanover County 2007-2012* is designed to provide developmental guidance for primary human service departments. However, since other departments and organizations provide various human service programs, or impact the delivery of human services, they are encouraged to also utilize this plan for guidance.

Promoting Self-Sufficiency and Quality of Life: Planning for Human Services in Hanover County 2007-2012 represents a solid first-step in unified human services strategic planning for Hanover County. The County's newly created definition of human services will provide a starting point from which all can begin to better understand the terminology.

It is important to understand that a strategic plan is a flexible guide. As additional data elements are evaluated and as the County's environment changes in the coming five years, the goals, objectives and strategies presented in this plan may change. Furthermore, additional goals, objectives, and strategies may be identified during implementation.

Like any strategic plan, *Promoting Self-Sufficiency and Quality of Life: Planning for Human Services in Hanover County 2007-2012* will only yield results if utilized and updated regularly. In order to implement the plan, action steps, time frames for delivery, measurements, and lead departments will need to be identified for each objective and recommended strategy. This next step in the strategic planning process is expected to occur in the coming fiscal year.

APPENDIX A

Characteristics of Human Service Programs and Services

<ul style="list-style-type: none"> ▪ Providing opportunities to meet basic needs and enhance quality of life ▪ Customer service orientation ▪ Compassionate and caring ▪ Generous – giving of self and service ▪ Empathetic ▪ Understanding ▪ Supportive ▪ Tolerant ▪ Flexible ▪ Maximizes and leverages resources ▪ Inclusive ▪ Looking at “big picture” ▪ Fiscally responsible to citizens ▪ Provide access to resources/information on how to access ▪ Services range from free to fee-based ▪ Provide recreation, leisure, entertainment ▪ Geared towards prevention ▪ Preservation of land, family, community ▪ Provide security and/or safety net ▪ Empower individuals and communities ▪ Provide quality of life ▪ Promote community involvement ▪ Provide services and opportunities for low income 	<ul style="list-style-type: none"> ▪ Community, child, family focused ▪ Staff: professional, knowledgeable, competent, dedicated, innovative, collaborative ▪ Identify and respond to needs of constituents ▪ Commitment to health, welfare and quality of life for community ▪ Respect for clients and their privacy/confidentiality ▪ Work with both processes and delivery of services ▪ Creative and resourceful ▪ Equitable treatment of all customers and clients ▪ Sense of mission and responsibility ▪ Educate and advocate ▪ Regulatory requirements ▪ Services populations ranging from everyone to target populations with eligibility ▪ Educate and protect ▪ Communicate information to public ▪ Outreach (not just services in facilities) ▪ Identify community resources and connect people to those resources ▪ Experts in field ▪ Work as team ▪ Partner ▪ Counsel/guide ▪ Address human needs and challenges
--	--

APPENDIX B

COMMUNITY DATA

POPULATION STATISTICS

POPULATION DATA			
Population Category	1990	2000	2006 Estimate
Total Population	63306	86,320	96309
GENDER			
Total Males	30963	42,479	47429
Total Females	32343	43,841	48880
AGE			
Under 5 years old	4416	5,611	5702
5 to 9 years old	4438	6,740	7180
10 to 14 years old	4319	6,878	7996
15 to 19 years old	4580	6,291	7081
20 to 24 years old	4168	3,764	5529
25 to 34 years old	10337	10,211	9874
35 to 44 years old	10688	16,275	16547
45 to 54 years old	7983	13,356	15482
55 to 59 years old	3075	4,663	6042
60 to 64 years old	2632	3,372	4497
65 to 74 years old	4226	5,223	5913
75 to 84 years old	1919	3,077	3564
85 years and over	525	859	901
Median age	34.5	37.4	Not available
Total 18 years and over	47499	62,957	Not available
Total 65 years and over	6709	9,159	10378
RACE			
White	56504	76,242	85816
African American	6237	8,065	9498
American Indian & Alaska Native	135	289	315
Asian	346	686	1078
Other	84	7	1
Hispanic	330	847	1196
Nonhispanic	62976	85,473	96230

Source: U.S. Census Bureau

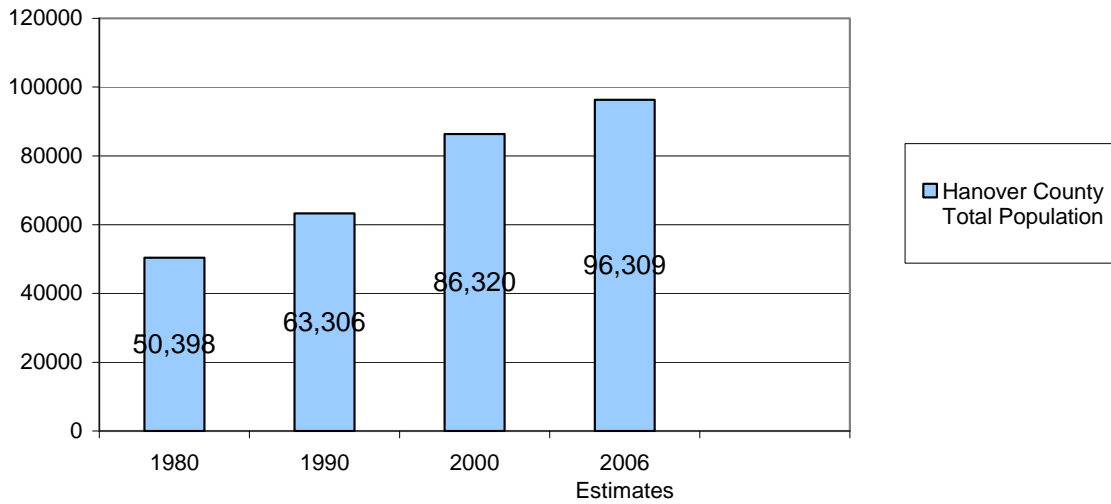
Based on 2006 U.S. Census figures:

- The County's total population has grown approximately 11.6% since 2000.
- Of the total population, 89% are Caucasian and 10% are African-American.
- Census figures for other minority classifications, such as Asians and Hispanics, suggest relative growth of more than 40% in the past 6 years.

According to 2000 U.S. Census data:

- Over 3% of the County's population speaks a language other than English.
- The median age of county residents is just over 37 years, with 27% falling below the age of 18 and another 15% aged 60 or older.

Hanover County Total Population



Source: U.S. Census Bureau

INCOME/EMPLOYMENT STATISTICS

In December 2006:

- A total of 54,993 residents comprised the Hanover civilian labor force.
- The unemployment rate stood at 2.0%.

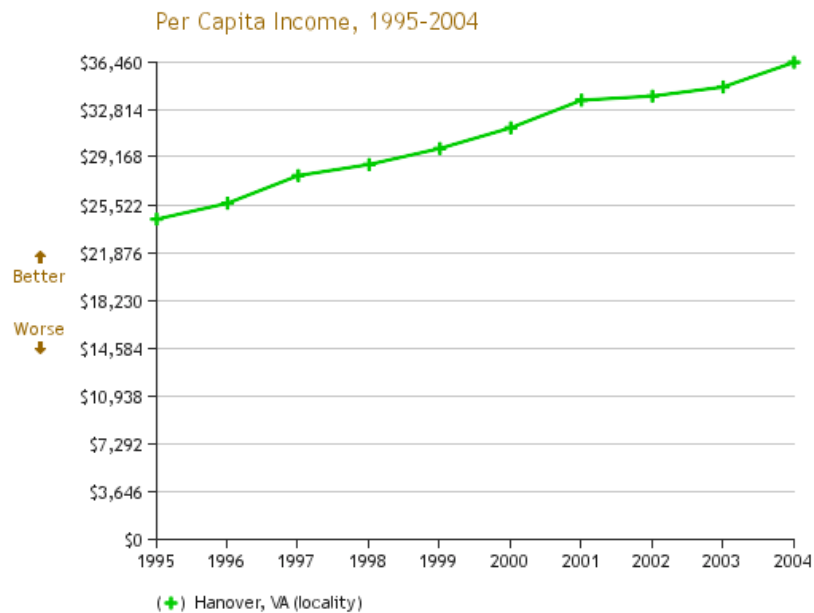
Source: Bureau of Labor Statistics



Source: Virginia Employment Commission, Bureau of Economic Analysis

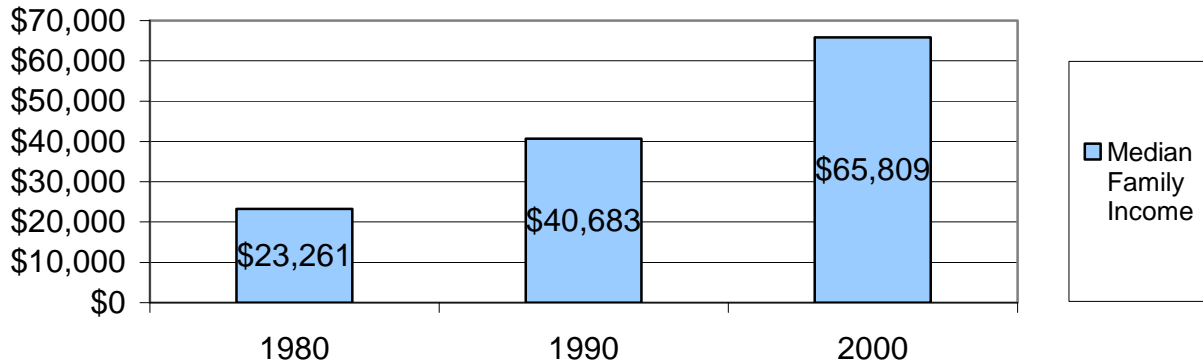
INCOME DATA		
Income Indicator	1990	2000
Family Income		
Less than \$10000	1601	374
\$10000-\$14999	1298	366
\$15000-\$19999	1141	494
\$20000-\$24999	1654	1003
\$25000-\$29999	1146	982
\$30000-\$34999	1628	1020
\$35000-\$39999	2038	1171
\$40000-\$44999	1748	1293
\$45000-\$49999	1583	1146
\$50000-\$59999	2858	2730
\$60000-\$74999	2679	4052
\$75000-\$99999	1719	4874
\$100000-\$124999	523	2533
\$125000-\$149999	188	969
\$150000 or more	266	1580
Median Household Income	\$40,683	\$65,809
Poverty Level		
Income below poverty level	2663	3065

Source: U.S. Census Bureau. Poverty thresholds are computed based on family size and number of children. For example, in 2000, the poverty threshold for a family of four including two children was \$18,052. See www.census.gov for more details.



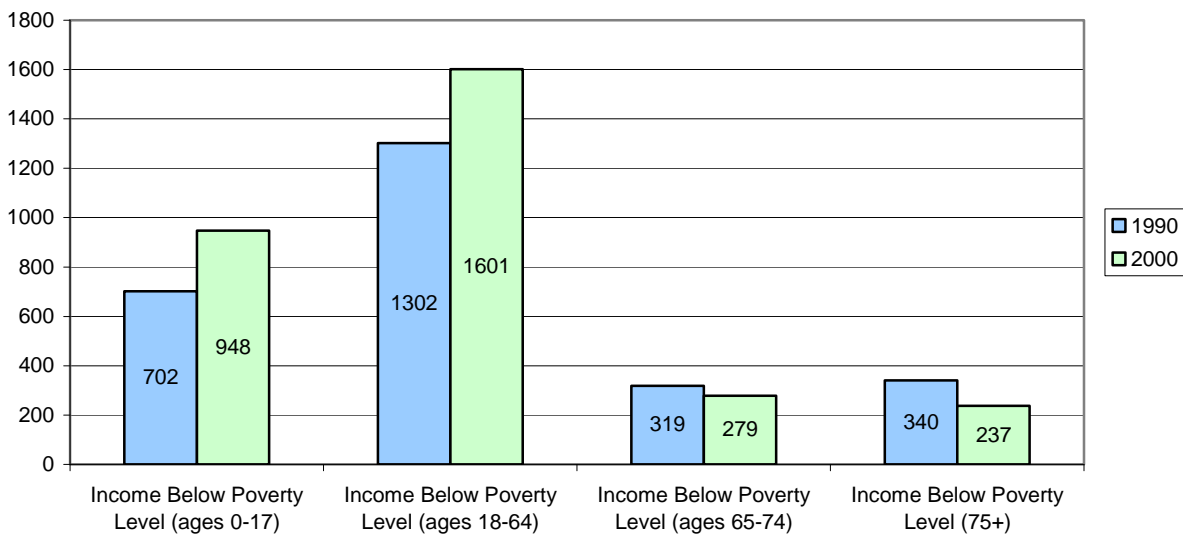
Source: US Department of Commerce, Bureau of Economic Analysis

Median Family Income



Source: U.S. Census Bureau

Poverty Status



Source: U.S. Census Bureau. Poverty thresholds are computed based on family size and number of children. For example, in 2000, the poverty threshold for a family of four including two children was \$18,052. See www.census.gov for more details.

8% of Hanover County’s households were below or near the poverty level in 2000.

Source: Richmond Area Metropolitan Planning Organization

As of January 2006, 12.7% of Hanover County’s school children were eligible for Free & Reduced Price Lunch.

Source: Hanover County Public Schools

LANGUAGE DATA

PRIMARY LANGUAGE	1990	2000
Speak only English	57463	77707
Speak language other than English	1427	2933
German	188	394
Greek	33	19
Indic	58	42
Italian	7	79
French or French Creole	137	391
Portuguese or Portuguese Creole	26	28
Spanish or Spanish Creole	662	1385
Other Slavic Language, including Russian	61	70
Arabic	6	55
Tagalog	27	66
Chinese	20	60
Hungarian	9	9
Japanese	11	23
Korean	17	19
Vietnamese	106	112
Other and Unspecified Languages	59	181

Source: U.S. Census Bureau

TRANSPORTATION DATA

According to a national survey of the American Association of Retired Persons, older non-drivers make an average of 15% fewer trips to the doctor and 65% fewer trips to social and religious activities than older drivers make, resulting in higher isolation from the community.

Source: Richmond Area Metropolitan Planning Organization

In 2002, almost 15% of Hanover County's population (5 years and older) were persons with disabilities. In a 2000 survey by the Nationwide Organization on Disabilities, 30% of respondents with disabilities reported difficulty in accessing transportation, compared to 10% without a disability.

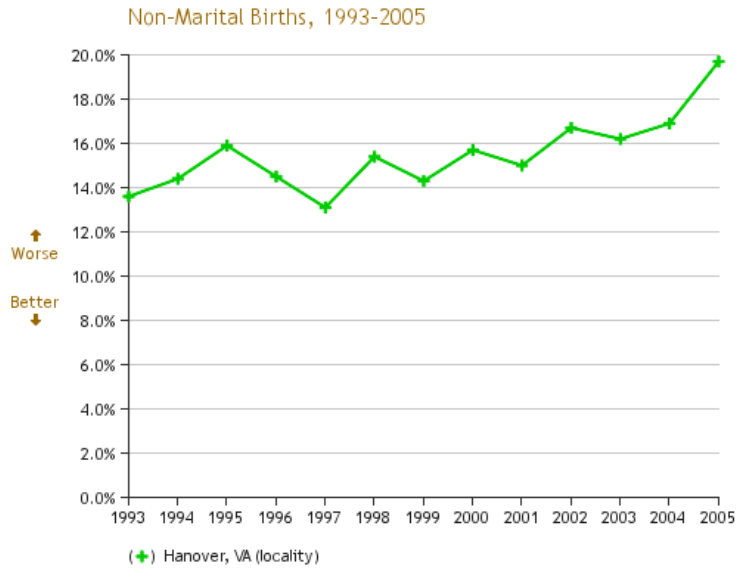
Source: Richmond Area Metropolitan Planning Organization

According to 2000 Census data:

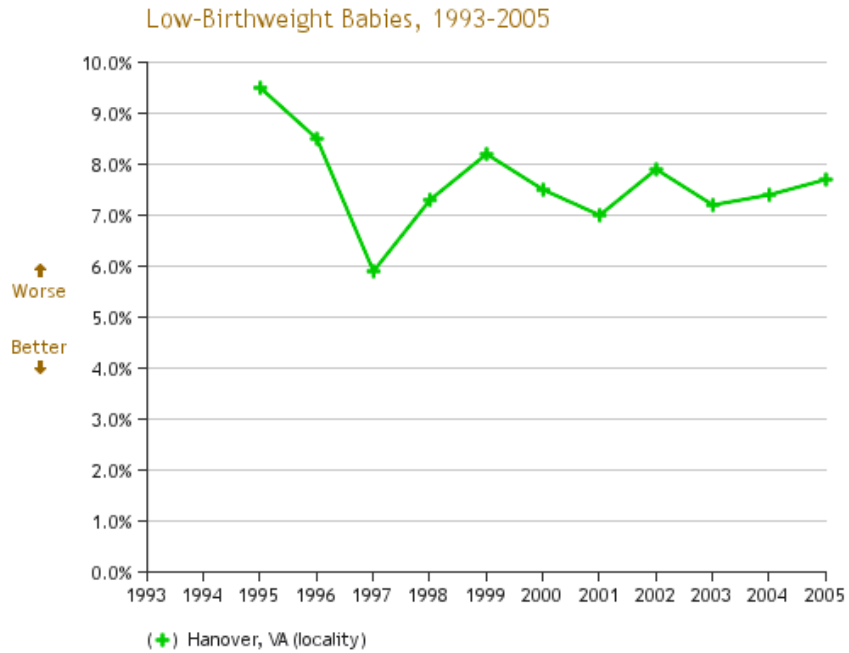
- 3.5% of Hanover households reported 0 vehicles available.
- 41.1% of these households were below/near the poverty level.

Source: Richmond Area Metropolitan Planning Organization

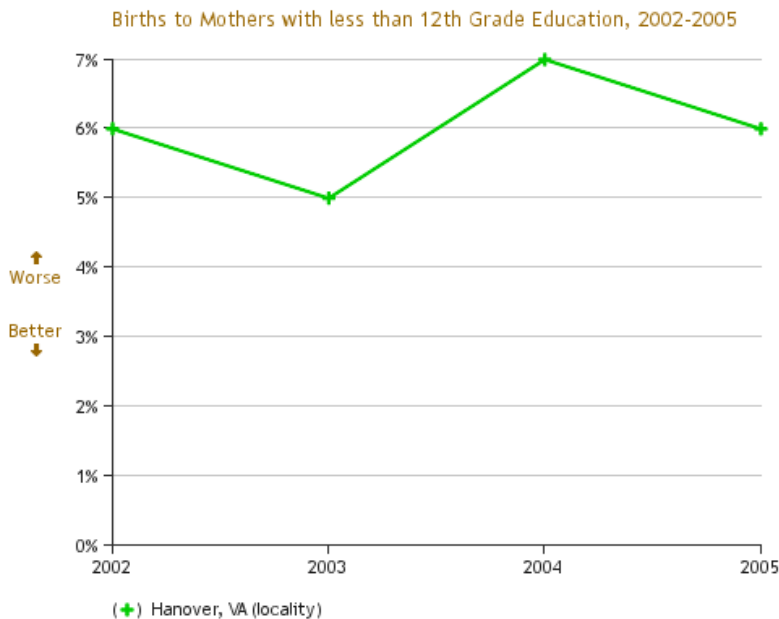
HEALTH DATA



Source: Virginia Department of Health



Source: Virginia Department of Health



Source: Virginia Department of Health

To a large extent, the health needs of Hanover County citizens addressed in the 2006 Health Planning Agency Needs Assessment were generally articulated as average as compared to other counties in the region. A few exceptions are notable:

- Hanover County has a lower mammogram rate than the surrounding counties (64% vs. 74% regionally).
- Hanover has a higher than average need for mental health services (15% vs. 11% regionally).
- The County has a lower percentage of Medicare patients when compared to the region.
- The County has a higher percentage of dental insurance than regional counties.
- 35% of citizens preferred the availability of health care information on the Internet.

Source: Central Virginia Health Planning Agency 2005 Community Needs Assessment Study

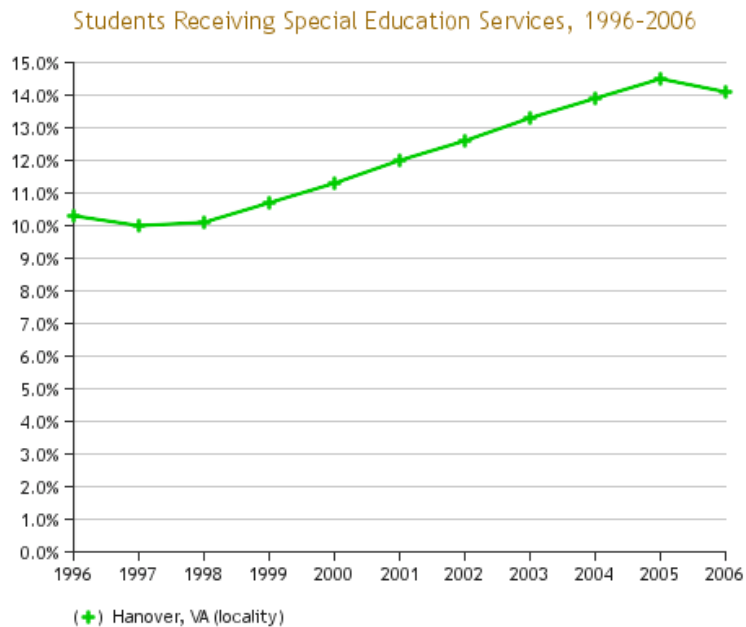
EDUCATION DATA:

Important statistics regarding the languages spoken by Hanover County's school population includes:

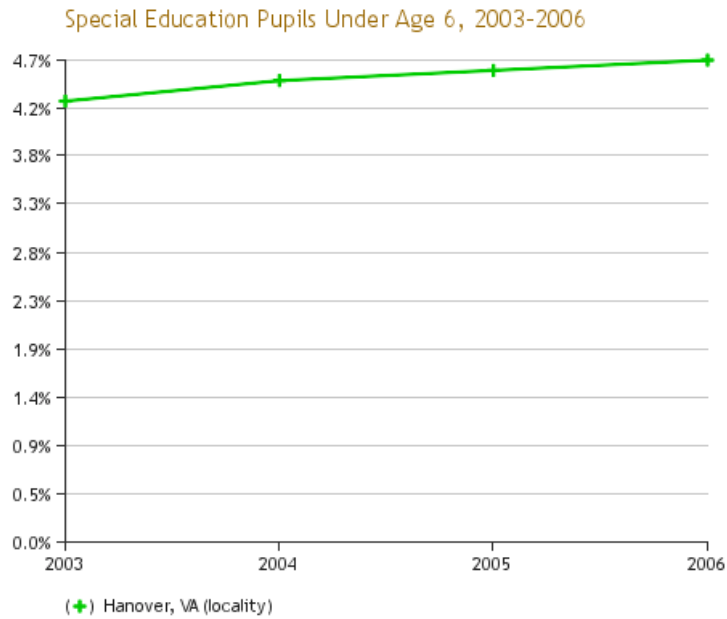
- In Fall 2005, 145 students comprised the Limited English Proficient population.
- This population grew 160% from Fall 2000 to Fall 2004.
- The total number of languages represented in the school population from September 2004 through September 2005 is 31.

Source: Hanover County Public Schools

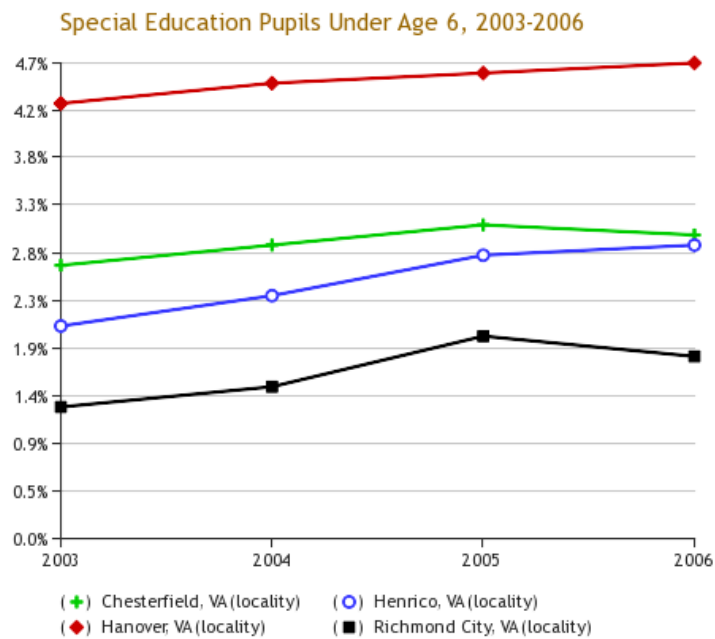
OTHER RELEVANT EDUCATION DATA		
Indicator	Finding	Source
<i>Hanover County's special education population</i>	18% higher than the national average	Hanover Public Schools administrators
<i>Drop out rate</i>	0.44% - among the lowest in Virginia	Hanover County Economic Development Community Profile
<i>College attendance</i>	78% of Hanover County graduates attend two or four year colleges	Hanover County Economic Development Community Profile
<i>Parents reporting that children are receiving a quality education</i>	98%	Hanover County Public Schools
<i>Prevalence of home schooling</i>	From 1995 to 2006, has grown from 1.09% to 2.83% of all school-aged youth.	Hanover County Public Schools



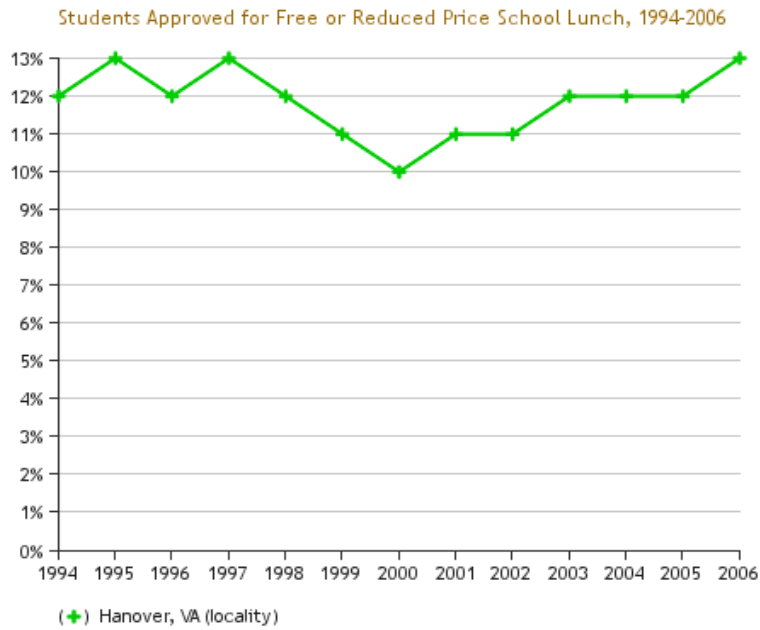
Source: Virginia Department of Education



Source: Data are from the Virginia Department of Education and population numbers are from the Office of Juvenile Justice and Delinquency Prevention for ages 0-5, <http://www.ojdp.ncjrs.org/ojstatbb/ezapop/>

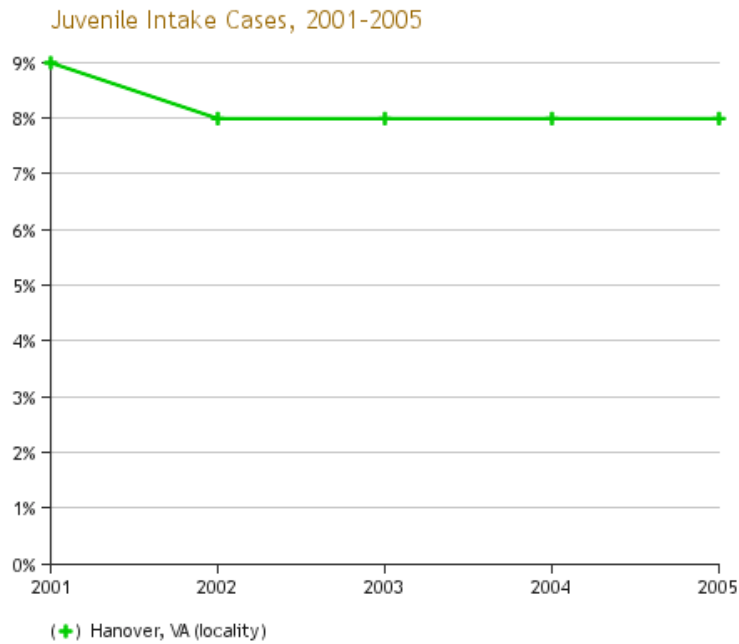


Source: Virginia Department of Health



Source: Virginia Department of Education

CRIMINAL JUSTICE DATA



Source: Virginia Department of Juvenile Justice. Juvenile intake cases refers to the number of cases per 100 adolescents ages 13-17 referred to juvenile intake for a complaint.

Additional relevant juvenile justice data includes:

- 61% of complaints resulted in a court petition filed.
- 30% of intake cases were for females.
- About 14% of cases involved children age 13 and younger.
- 57% of children evaluated rated moderate on a standardized risk assessment.
- 61% of domestic relations/child welfare case entailed custody determinations.
- The most common types of juvenile offenses included larceny (14.8%), assault (13.7%), and status offenses (11.2%).

Source: Virginia Department of Juvenile Justice

ADDITIONAL COMMUNITY-RELEVANT DATA

In June 2005, the Council on State Governments produced a document entitled *Trends in America: Charting the Course Ahead*, which highlights ten primary issues anticipated to impact state government in the upcoming decades. Several of these key trends are consistent with findings that emerged from the human services strategic planning process, specifically:

- Aging
- Immigration
- Growth Dynamics
- Information and Technology Revolution

DEPARTMENTAL DATA

SERVICE WORKLOADS

SELECTED WORKLOAD DATA BY PRIMARY DEPARTMENTS	
Department	Representative Workload Statistics
Community Services Board	Total residents served in 2006: 7,280 MR Case Management served annually: 334 Residential MR Program served annually: 13 Day Health and Rehabilitation served annually: 31 Supported Employment served annually: 86 MH Adult Counseling & Case Management served annually: 2,130 MH Child Counseling & Case Management served annually: 625 Community Education served annually: 2,919 Crisis and Acute Care served annually: 2,130
Department of Social Services	Front desk telephone calls in 2006: 30,521 Lobby traffic in 2006: 9,425 Abuse cases in 2006: 226 Food Stamps – Recipients in 2006: 2,715 Medicaid – Recipients in 2006: 4,325 TANF – Recipients in 2006: 367 Energy Assistance in 2006: 2,536 Child Day Care in 2006: 350 Children in Foster Care in 2006: 54 Child Protective Services – total complaints received in 2006: 512 Adult Services in 2006: 85
Department of Community Resources	Hanover Youth Service Council, members in FY06: 30 Hanover Youth Service Council, hours of service in FY06: 481.5 Hanover Youth Service Council, service projects in FY06: 28 Comprehensive Services Act, youth served in FY06: 126 Court Appointed Special Advocates, youth served in FY06: 30 Court Appointed Special Advocates, volunteers in FY06: 22 Total number of County volunteers in FY06: 9,028 Total number of County volunteer hours reported in FY06: 441,135
Health Department	Food inspections in 2006: 590 Educational sessions in 2006: 62 participants in 3 sessions Septic Applications in 2006: 476 Well Applications in 2006: 497 Subdivision Reviews in 2006: 224 Clinical Programs, patients served in 2006: 2,800 Clinical programs, patient encounters in 2006: 7,500 Resource Mothers Program, teens served in 2006: 60 WIC – clients served in 2006: 700 Unduplicated clinical clients in 2006: 2,486 Clinical visit count in 2006: 5,588

SELECTED WORKLOAD DATA BY PRIMARY DEPARTMENTS	
Department	Representative Workload Statistics
Juvenile Court Services	Predispositional Services for FY06: 80 Post-Dispositional Services and Monitoring for FY06: 10 Judicially Ordered Probation Supervision for FY06: 132 Judicially Ordered Unsupervised Probation for FY06: 3 Committed to Dept. of Juvenile Justice for FY06: 8 Community Parole Supervision for FY06: 13 Reports and Assessments for FY06: 202 Probation and Parole Contacts for FY06: 3,826 Outreach Detention/Electronic Monitoring for FY06: 7 Truancy/Attendance Supervision for FY06: 78 Community Service Supervision for FY06: 198 Stop Thief Education for FY06: 42 Parent Orientation to Probation for FY06: 27 Anger Management Group for FY06: 27 Intensive In-home Counseling for FY06: 9
Community Corrections and Pretrial Services	Average daily caseload: 170 Average length of supervision, in days: 147
Public Library	Total Registered Borrowers for FY06: 93,040 Total Active Borrowers for FY06: 45,011 Total Circulation in FY06: 849,144
Virginia Cooperative Extension	Agriculture and Natural Resources served annually: 12,500 4-H Youth Development: 2,000 Smart Choices Nutrition Education Program served annually: 600
Parks and Recreation	Park visitation total: 529,610 Numbers of classes offered: 175 Number of participants: 24,388
Public Schools	Enrollment in Elem/Middle/High for 2006/2007: 18,844 Enrollment in PreK for 2006/2007: 275 Enrollment in outside placements for 2006/2007: 649 Special education population in 2006/2007: 3000+ Total in home schooling as of 9/30/06: 466

PROVIDED SERVICES AND POPULATIONS

The following six pages portray relevant programs for human services populations as delivered or administered by the Hanover County Departments included in this plan development process. These grids also display the relevant service populations for each program. Note that direct services are followed by services that are contracted out. Contracted services are indicated in bold, italic type. This information may be useful to the implementation team formed in the next phase of this plan as they create action plans by highlighting duplication of services or service gaps.

AVAILABLE HUMAN SERVICES BY AGENCY – PRIMARY AGENCIES

AGENCY	SERVICE POPULATION TYPE			
	Court-Involved/Offenders	Those with Mental Disability	Those with Physical Disability	Low-Income Individuals & Families
Community Services Board	<ul style="list-style-type: none"> • Crisis and Acute Care Services • Intensive Outpatient Treatment • Juvenile Drug Court 	<ul style="list-style-type: none"> • MH Adult Counseling & Case Management • Residential • Day Health & Rehabilitation • Supportive Employment • Hanover Industries • Hanover Recycling • MR Case Management • Intensive Community Treatment • Psychosocial Rehabilitation 	<ul style="list-style-type: none"> • Day Health & Rehabilitation • Psychosocial Rehabilitation 	<ul style="list-style-type: none"> • MH Adult Counseling & Case Management • Residential • Day Health & Rehabilitation • Supportive Employment • Hanover Industries • Hanover Recycling • Logomotion • MR Case Management • Intensive Community Treatment • Psychosocial Rehabilitation
Department of Social Services	<ul style="list-style-type: none"> • Court Ordered Services • Interstate Requests 	<ul style="list-style-type: none"> • Medicaid • Adult Services • Adult Protective Services • State and Local Hospitalization • Foster Care • Child Protective Services • Auxiliary Grant Services 	<ul style="list-style-type: none"> • Auxiliary Grants Program • Medicaid • Adult Services • Adult Protective Services • Crisis • State and Local Hospitalization • Companion/Home Based Provider 	<ul style="list-style-type: none"> • Energy Assistance Program • Food Stamps Program • Medicaid • State and Local Hospitalization • Child Day Care Services • Earned Income Tax Credit • Employment Services • Temporary Assistance to Needy Families (TANF) • Crisis Services • Holiday Program
Department of Community Resources	<ul style="list-style-type: none"> • Community Service Referrals 	<ul style="list-style-type: none"> • Winterization Program • Volunteer Home Program Repair Referral Program • Comprehensive Services Act 	<ul style="list-style-type: none"> • Winterization Program • Volunteer Home Repair Referral Program 	<ul style="list-style-type: none"> • Winterization Program • Volunteer Home Repair Referral Program
Health Department				<ul style="list-style-type: none"> • WIC • Other Clinical Programs (well-child) • Car Seat Program • Maternity

AVAILABLE HUMAN SERVICES BY AGENCY – PRIMARY AGENCIES

AGENCY	SERVICE POPULATION TYPE			
	Adults	Children & Youth	Seniors	All County Residents
Community Services Board	<ul style="list-style-type: none"> • Community Education • Crisis and Acute Care • Supportive Employment • Hanover Recycling • Residential • Day Health & Rehabilitation • Hanover Industries • MR Case Management • Counseling and Case Management • Psychosocial Rehabilitation • Intensive Community Treatment 	<ul style="list-style-type: none"> • MH Child Counseling & Case Management • Community Education • Juvenile Drug Court • Youth Day Treatment • Crisis and Acute Care • MR Case Management 		<ul style="list-style-type: none"> • Community Education • Crisis and Acute Care
Department of Social Services	<ul style="list-style-type: none"> • Food Stamps • Auxiliary Grants • Medicaid • State and Local Hospitalization • Crisis • Information and Referral • Energy/Fuel Assistance • Adult Services • Adult Protective Services • Employment Services • Adult Foster Care 	<ul style="list-style-type: none"> • Medicaid • Adoption Services • Child Day Care Provider Training • FAMIS • Child Protective Services • Child Protective Services • Hanover Care for Kids • Foster Care Services • Family Preservation Services • Child Day Care Services • Temporary Assistance to Needy Families (TANF) • Court Ordered Services • Foster Care Prevention Services • Crisis Services • Food Stamps 	<ul style="list-style-type: none"> • Auxiliary Grants Program • Medicaid • Food Stamps • Adult Services • Adult Protective Services • State and Local Hospitalization • Energy Assistance • Information and Referral • Long Term Care • Companion Provider/Home Based • Adult Foster Care 	<ul style="list-style-type: none"> • Refugee Resettlement Program • Emergency or Crisis Services • Information and Referral • Disaster Food Stamps • Medicaid/FAMIS • Earned Income Tax Credit • Energy Assistance • Foster Parent Training
Department of Community Resources		<ul style="list-style-type: none"> • Comprehensive Services Act • Court Appointed Special Advocate Program (CASA) • Hanover Youth Services Council • Hanover's Promise 	<ul style="list-style-type: none"> • Winterization • Volunteer Home Repair Referral Program 	<ul style="list-style-type: none"> • Volunteer Services
Health Department	<ul style="list-style-type: none"> • Family Planning 	<ul style="list-style-type: none"> • Resource Mothers • Car Seat Program • Family Planning 		<ul style="list-style-type: none"> • Septic & Well Permits • Food Safety • Emergency Preparedness & Response • Immunizations • Communicable Disease • Death Certificates • Health Education • Family Planning

AVAILABLE HUMAN SERVICES BY AGENCY – PRIMARY AGENCIES

AGENCY	SERVICE POPULATION TYPE			
	Court-Involved/Offenders	Those with Mental Disability	Those with Physical Disability	Low-Income Individuals & Families
Juvenile Court Services	<ul style="list-style-type: none"> • Stop Thief Education • Community Service/Community Improvement • Electronic Monitoring/Detention Outreach • Truancy/Attendance Supervision • Probation and Parole Supervision • Anger Management • Intensive In Home Counseling 			
Community Corrections and Pretrial Services	<ul style="list-style-type: none"> • Community Corrections • Court-Ordered Probation Services • Pretrial Services • Anger Management • Domestic Violence Counseling • Shoplifting Prevention • Community Service Sites • Laboratory Drug Testing • Electronic Monitoring • Substance Abuse Assessment/Treatment • Sex Offender Treatment • Mental Health Treatment 			
Public Library				
Virginia Cooperative Extension				<ul style="list-style-type: none"> • Smart Choices Nutrition Education Program
Parks and Recreation		<ul style="list-style-type: none"> • Aktion Club • Community Connection Club • Winter Beach Party • Bell Choir • Therapeutic Horseback Riding • Youth Summer Program • Social and Dances (9 annual) • All classes offered with assistance 	<ul style="list-style-type: none"> • Aktion Club • Community Connection Club • Winter Beach Party • Bell Choir • Therapeutic Horseback Riding • Youth Summer Program • Social and Dances (9 annual) • All classes offered with assistance 	<ul style="list-style-type: none"> • Youth Summer Program – no application fee • Sibling discount for classes
Public Schools		<ul style="list-style-type: none"> • Early Childhood Special Education 	<ul style="list-style-type: none"> • Early Childhood Special Education 	<ul style="list-style-type: none"> • Head Start

AVAILABLE HUMAN SERVICES BY AGENCY – PRIMARY AGENCIES				
AGENCY	SERVICE POPULATION TYPE			
	Adults	Children & Youth	Seniors	All County Residents
Juvenile Court Services	<ul style="list-style-type: none"> • Parent Orientation 			
Community Corrections and Pretrial Services				
Public Library	<ul style="list-style-type: none"> • Adult Programs 	<ul style="list-style-type: none"> • Storytime • Teen Programs 		<ul style="list-style-type: none"> • Summer Reading Program • Storytime • Various other programs
Virginia Cooperative Extension	<ul style="list-style-type: none"> • 4-H volunteer program 	<ul style="list-style-type: none"> • 4-H Program 		<ul style="list-style-type: none"> • Agriculture and Natural Resources • Master Gardeners
Parks and Recreation	<ul style="list-style-type: none"> • Adult programs, special events and athletic leagues 	<ul style="list-style-type: none"> • Youth programs, special events and athletic leagues 	<ul style="list-style-type: none"> • Senior programs, special events, athletic leagues and bus tours 	<ul style="list-style-type: none"> • Various programs
Public Schools	<ul style="list-style-type: none"> • Adult Education 	<ul style="list-style-type: none"> • Early Childhood Special Education • English as a Second Language • Head Start • Junior ROTC • International Baccalaureate • Alternative Education • Gifted and Talented • Special Education • Dual Enrollment 		

AVAILABLE HUMAN SERVICES BY AGENCY – OTHER RELEVANT AGENCIES

AGENCY	HUMAN SERVICES RELATED PROGRAMS	SERVICES POPULATIONS
Courts (Includes Circuit Court Clerks Office & General District Court)	<ul style="list-style-type: none"> • Probate and Trust Administration • Miscellaneous Court Services • ASAP • Interpreters 	<ul style="list-style-type: none"> • All County Residents • Court-Involved/Offenders
Jail	<ul style="list-style-type: none"> • Life Without a Crutch • AA • GED • English as a Second Language • Anger Management • Parenting Class • Computer Class • Library Services • Mental Health Services 	<ul style="list-style-type: none"> • Court-Involved Offenders
Planning	<ul style="list-style-type: none"> • Hanover Youth Perspective • Brown Grove Emergency Repair • Hanover Older Perspective 	<ul style="list-style-type: none"> • Children & Youth • Low Income Individuals & Families • Seniors
Emergency Communications	<ul style="list-style-type: none"> • Emergency and Non-Emergency Call Taking • Dispatching and Tracking of Unit Activities • Emergency Medical Dispatch Services • County Emergency and Disaster Point of Contact • Paging and Notification Services • Data Collection and Statistical Reporting Services • Training and Public Education Services • Language Line 	<ul style="list-style-type: none"> • All County Residents
Animal Control	<ul style="list-style-type: none"> • Responding to calls for services for all animal situations • Provide hours of service as open to the public at the Pound facility • Animal Care for Impounded Animals • Kennel inspections • Animal Welfare Care and Welfare Information • Public Education on Animal Welfare • Hanover County Dog Park • Door to Door Pet Safety Checks • Pet Sterilization Programs 	<ul style="list-style-type: none"> • All County Residents
Public Works	<ul style="list-style-type: none"> • Recycling • Cannery • Capital Projects 	<ul style="list-style-type: none"> • All County Residents
Sheriff's Office	<ul style="list-style-type: none"> • Adopt-A-Senior • Project Lifesaver • Citizens Police Academy • Youth Police Academy • Lunch Buddies • Drug Abuse Reduction Education (DARE) • School Resource Officers • Crime Prevention Education • Domestic Violence Assistance 	<ul style="list-style-type: none"> • Seniors • Those with Mental Disability • Children & Youth • Adults • All County Residents

AVAILABLE HUMAN SERVICES BY AGENCY – OTHER RELEVANT AGENCIES		
AGENCY	HUMAN SERVICES RELATED PROGRAMS	SERVICES POPULATIONS
Economic Development	<ul style="list-style-type: none"> • Workforce Development 	<ul style="list-style-type: none"> • All County Residents
Fire/EMS	<ul style="list-style-type: none"> • Various programs 	<ul style="list-style-type: none"> • All County residents
Public Utilities	<ul style="list-style-type: none"> • Reduced Water and Wastewater Charges 	<ul style="list-style-type: none"> • Seniors • Those with Mental Disability • Those with Physical Disability

STAKEHOLDER FEEDBACK DATA

STAKEHOLDER SURVEY

The plan development process also included the collection of feedback via a survey administered to over 150 community stakeholders. A total of 72 individuals responded to the survey, consisting of nonprofit organizations (47.2%), Hanover County government agencies (18.1%), for-profit organizations (12.1%), faith-based organizations (9.7%), independent providers (2.8%) and other types of organizations (9.7%). Stakeholder survey results are provided below.

What populations does your organization most commonly serve?

Populations Served	% of respondents
All Hanover County residents	47.2
Children	33.3
Parents	30.6
Families	34.7
Seniors	31.9
Businesses	12.5
Other county agencies	18.1
Organizations outside county government	19.4
Non-residents	18.1
Specialized populations	30.6
Other	6.9

The most common service populations were all Hanover county residents, families, children, seniors, parents and specialized populations.

What are the primary direct services that your organization provides?

Services Provided	% of respondents
Physical health and/or wellness services	16.7
Mental health services	8.3
Mental retardation services and/or programs	6.9
Substance abuse education and/or treatment	6.9
Housing assistance	13.9
Criminal justice supervision and/or other offender services	6.9
Basic needs (e.g., shelter, food, water)	26.4
Employment services	12.5
Rehabilitative services	9.7
Abuse/neglect prevention and/or protection	13.9
School-aged education	13.9
Adult education and/or training	16.7
Recreation, leisure and/or social activities/programs	16.7
Business and/or economic development	12.5
Transportation services	5.6
No direct services, we provide service referrals and/or coordination only	5.6
Other	47.2

Most responding providers offer services relating to basic needs, physical health, housing assistance, abuse/neglect, and education.

Other stakeholder survey findings shed light on perceptions of community awareness of available services, as shown below. Two questions were asked on a scale of 1 to 4, with 1 being “poor” and 4 being “excellent”:

Thinking about all Hanover County residents in general, how would you rate their awareness of the availability of various human services, programs and activities?

The average stakeholder rating for awareness of available services by all County residents was 2.4.



Thinking about Hanover County residents that are in some way disadvantaged, how would you rate their awareness of the availability of various human services, programs and activities?

The average stakeholder rating for awareness of available services by disadvantaged County residents was 2.2.



In addition, respondents were asked about perceptions of access to services.

In your opinion, what percentage of Hanover’s population is currently able to access available human services, programs and activities?

Over 30% of respondents believe that less than half of the population is able to access services.

Finally, respondents were asked to provide their opinions on human services gaps or needs in Hanover County, as well as barriers to services. The most common responses are shown in the table that follows.

SERVICE GAPS		SERVICE BARRIERS	
Type of Service Gap	Number Noting This Gap	Type of Service Barrier	Number Noting this Barrier
Housing	24	Transportation/Distance	43
Transportation	24	Awareness	40
Senior Services	21	Other/Miscellaneous	12
Health/Nutrition	15	Program Limitations (Funding, etc.)	11
Staff Development/Competency	14	Customer Service	11
Mental Health	12	General Financial	9
Low-Income Services	11	Not Affordable for Clients	8
Home Repair/Assistance	11	Mental/Physical/Other Disabilities	4
Employment	9	Management/Coordination	4
Service Awareness	8		
Mental Retardation Services/Special Needs	8		
Services for Those with Disabilities	8		
Access to Services	7		
Child/After School Care	6		
Substance Abuse	5		
Collaboration	5		
Youth Services	5		
Other/Miscellaneous	4		

As shown above, the most common service gaps noted were:

- Housing
- Transportation
- Senior Needs
- Health/nutrition

By a large margin, the most common barriers noted were:

- Transportation/distance
- Awareness of services

QUALITATIVE SUMMARY OF INTERNAL AND EXTERNAL STAKEHOLDER INTERVIEWS AND FACILITATED MEETINGS

During the strategic planning process, two priority categories which generally describe the purpose of human services were identified: Self-Sufficiency and Quality of Life. Within each of these categories are three focus issues that support the priority categories:

Self-Sufficiency

- Specialized transportation services
- Economic independence
- Housing

Quality of Life

- Health care services (physical and behavioral health)
- Recreation opportunities
- Life long learning

The following topics and issues of concern are summarized from the internal and external stakeholder feedback gathered during the strategic planning process:

Specialized Transportation Services

Work opportunities
Health opportunities
Recreational opportunities
Daily independent activities for special populations
Affordable
Coordinated
Accessible (physically and convenience)
Bicycle paths added to new and existing roads

Economic Independence

Job opportunities (full spectrum)
Job readiness
Economic crisis
Transportation
Housing
Financial education and counseling
Affordable child care
Affordable health care
Supported employment
Employer Incentives

Housing

Affordable (full spectrum)
Incentives for developers
Homeless
Elderly (including assisted living)
Disabled (including group home)
Emergency (such as crisis and domestic violence)
Transitional Housing
Accessible – location
Tax relief
Rehab
Indoor plumbing

Health Care Services Including Physical and Behavioral Health

Transportation
Affordable
Affordable prescriptions
Residential
Prevention and treatment
Community Center
Responsive to emergencies
In-home care / long-term care
Elderly and all ages
Dental
Jail
Uninsured and under-insured

Recreation Opportunities

Community Center
Facilities
After school / before school/ summer
Transportation
Library
All ages
Cultural / historical / arts
Passive facilities
People with disabilities
Coordinated support to volunteers
Community building
Leisure opportunities
Non-traditional education
Enrichment learning
Bicycle paths

Life-long Learning

Non-traditional education
Prevention (including health, economic, and behavior)
All ages
Library
Community Center
Transportation
Internet
Enrichment
Community builders
Literacy
English as second language
Adult education
Vocational
Job readiness
Volunteers
Pool of knowledge
Mentoring

CITIZEN FEEDBACK DATA

Existing citizen feedback was also considered, gathered from a sample of 540 Hanover residents who completed a citizen survey in 2005.

Notable Achievements

Twenty-eight percent of respondents rated the overall quality of life in Hanover County as excellent while another 62% rated it as good. When compared to other localities in the southern region, Hanover County compared favorably on many dimensions such as its public schools, health services, services to low-income persons, crime prevention services, and employment opportunities.

Many responding citizens also noted frequent engagement in county activities, such as:

- public libraries or services (71%),
- recreational programs or activities (49%),
- usage of County parks (78%), and
- volunteering time (45%).

Areas for Improvement

Citizens did identify several notable areas for improvement related to human services, for example:

- 8% of respondents felt that access to quality health care was poor;
- 14% of respondents felt that the ease of car travel was poor, with 33% indicating that the ease of walking was poor;
- 13% felt that the availability of recreational programs or classes was poor;
- 38% agreed that they would encourage the construction of more affordable housing;
- 20% felt that the services to low-income persons were poor; and
- 12% felt that services to adolescents and teens were poor.

Issues cited as major problems by the citizen respondents, which also have implications for the delivery of or access to human services, included traffic congestion (31%), drugs (17%), unsupervised youth (10%), and translation of communications (3%).

Source: Hanover County Citizen Survey, 2005