

24
11-25-03

City Council Testimony on Budget Priorities Docket Item No. ²⁴ November 25, 2003

I am Katy Cannady. I live at 20 East Oak Street. I'm here speaking only for myself. However, I am currently one of the co-chairs of the Federation of Civic Associations. Since planning issues are always on the agenda at Federation meetings, I know that the people who make up the Federation membership value the outreach efforts that the incumbent Planning Director has undertaken.

Just recently Planning and Zoning has added some additional outreach and educational activities at the specific request of the Federation. People are looking forward to participating in future study efforts, especially the infill study. This is work that is going to require considerable staff time and expertise from specialists hired on a contractual basis. I would hope that nothing remains undone simply for lack of staff and money. The budget you adopt next spring should include all the funds necessary for completing the various segments of the plan for planning on schedule.

The budget writers need to have full funding for all of the plan for planning work as a starting point when they begin allocating funds. I don't think people would like to have to come back to testify for these things next spring. Civic leaders are sophisticated enough to know that all good things come with a price.

On a slightly different matter, if we do have a transportation commission, it must have at least one planning staff person as a professional advisor. So depending on how that proposal is handled, you may need to appropriate additional funds to planning for that work as well.

Thank you.

I

Alexandria Child Care Directors Association

"Making a difference in the lives of children and their families"

5001 Seminary Road, Suite 109

Alexandria, Virginia 22311

Tel: (703) 931-1051 • Fax: (703) 931-2472

Early Childhood Education Directors Association of Alexandria

Deborah L. Tillman

Board Member

Testimony Before the Alexandria City Council

November 25, 2003

To the Honorable Mayor William Euille, Vice-Mayor Redella Pepper and distinguished City Council Members. Good Evening

My name is Deborah Tillman. I have been asked to speak on behalf of the Early Childhood Education Directors Association of Alexandria of which I am a member and am currently serving as Chair. For the past ten years, I have served as Owner of the Happy Home Child Learning Centers. **Our mission over the past fifteen years has been to promote quality early childhood education while focusing on the needs of at-risk children and families.** The association is comprised of the city's childcare centers and represents all nationally accredited centers in Alexandria. We are represented this evening by very concerned Parents, Directors, Owners and most important the children of each of these centers.

What we are requesting is that city council raises the reimbursement rate for centers. The current reimbursement rate, set by the state, has not been adjusted in four years. Centers are currently reimbursed at the rate of \$145.00 per week, which is far below the cost of providing quality childcare. A center serving 40 at risk children charging \$160.00 per week loses \$15.00 per week per child \$2400.00 per month and over \$28,000 per year. Centers cannot afford to absorb the difference.

Secondly, the Directors Association asks that the eligibility scale for subsidized childcare be raised from 185% federal poverty level to 250%. In 2002, Fairfax County subsidized families from 186% up to almost 300% of poverty using local dollars. They have been providing a local subsidy for several years now. Why should Alexandria be any different?

The eligibility guidelines are currently so low that when our parents make an effort to improve their lives by obtaining better jobs, their access to affordable quality childcare is taken from under them because they exceed an eligibility level that is disproportionate with the cost of living in Alexandria.

Last year, our group spoke before City Council on two occasions about our needs. City Council approved the sum of \$80,000 to be used by the Director's Association to begin addressing our issues. This money was used to increase the eligibility scale to 250% of

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the FPL for families who would otherwise not be eligible for assistance. We need to expand this initiative and begin to address the reimbursement rate for centers. We are asking City Council to approve the sum of \$300,000 this year, which would only help defray the cost of ten nationally accredited centers. Childcare centers in Alexandria cannot continue to shoulder the responsibility. We cannot continue to absorb the cost that rightfully should be assumed by the City. We also cannot expect to continue providing first- rate services on third - rate reimbursements.

As you ponder over this budget, we are asking you to decide once and for all to put children first. We know that the city has a history of commitment to quality early childhood programs, which is evidenced by the Children's Fund and the Early Childhood Commission. But it is not enough. There remains the very present and serious issue of insufficient reimbursement rates, which in combination with a low eligibility scale threatens to undermine the work over the past twenty years. The scale has tipped in Alexandria. Because the city subsidy is insufficient, the childcare teacher, the ones leading, guiding and directing our children are forced to bear the weight in even lower wages. That is incorrect and the system is failing our children and respectfully, it needs to be corrected.

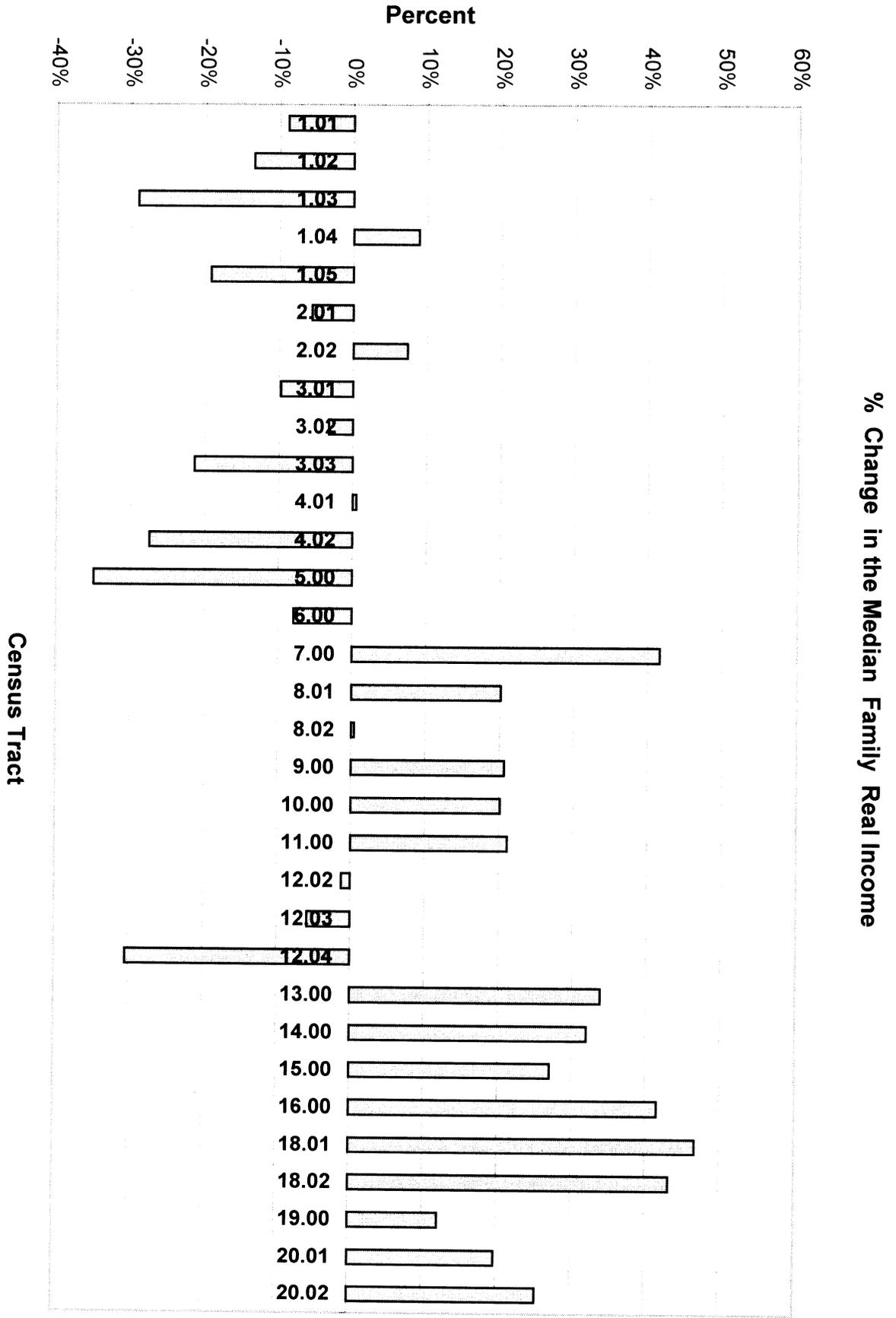
Thank you.

CENTER CHILD CARE MAXIMUM REIMBURSABLE RATES

NORTHERN REGION WEEKLY RATE 1999

Locality	FIPS	Infant Full Time	Toddler Full Time	Pre-School Full Time	School Age Full Time	Before School	After School	Before & After School
Albemarle/Charlottesville	003/540	142	142	112	113	14	41	49
Alexandria	510	187	180	145	143	44	70	92
Arlington	013	197	197	167	165	17	41	94
Augusta/Staunton	015/790	115	105	90	90	30	38	50
Clarke	043	109	94	74	76	29	34	48
Culpeper	047	90	90	75	75	15	32	45
Fairfax Co/City/Falls Church	059/600/ 610	190	185	161	148	54	66	95
Fauquier	061	131	128	99	96	25	35	51
Fluvanna	065	142	121	101	98	25	36	56
Frederick/Winchester	069/840	88	83	78	75	28	34	45
Greene	079	107	98	73	73	25	28	35
Highland	091	107	98	81	79	25	32	45
Loudoun	107	177	170	140	132	58	66	91
Louisa	109	107	98	103	90	25	35	45
Madison	113	95	95	80	80	12	27	34
Manassas	683	161	146	126	111	54	59	88
Manassas Park	685	187	178	134	96	46	51	70

Paol Hertel



Allen Lomax

CITY COUNCIL PUBLIC HEARING ON THE UPCOMING FISCAL YEAR 2005
BUDGET

NOVEMBER 25, 2003

STATEMENT BY ALLEN LOMAX, CHAIR, ALEXANDRIA'S ECONOMIC
OPPORTUNITIES COMMISSION

Mayor Euille, Members of the City Council and City Manager Sunderland:

I am Allen Lomax, Chair of the Economic Opportunities Commission. We applaud you on holding this hearing on issues regarding the upcoming Fiscal Year 2005 Budget. As you know, the Commission's mission is to serve as an advocate for Alexandria's low-income residents and advise you on programs for these residents. Over the past two years two issues have dominated the Commission's discussions: (1) affordable housing and (2) income security. These issues are essential to preventing homelessness and helping people move toward self-sufficiency. Tonight I would like to briefly discuss three issues: programs designed to help prevent homelessness, a Homeless Management Information System, and a Safe Haven facility.

Programs designed to help prevent homelessness-- rental assistance and the homeless intervention program--continuously face budget problems. The economy has made it more difficult for individuals and families who live from paycheck to paycheck. These two programs are essential crisis intervention tools. However, the number of people who can benefit from these tools, in times of financial crisis, has been restrained due to limited funds.

The second issue concerns the U.S. Department of Housing and Urban Development's mandated priority for a Homeless Management Information System. Every jurisdiction that receives HUD funding--which includes Alexandria--must participate in this system by October 2004. Start up funds will be needed for this system.

The third issue concerns the Homeless Services Coordinating Committee's effort to establish a Safe Haven for the chronic homeless. A Safe Haven is the Coordinating Committee's top priority. The Commission supports this priority and hopes that the City Council will provide funding for this important facility. Such a facility would help contribute to achieving the Department of Housing and Urban Development's goal of ending chronic homelessness in 10 years.

Submit for Record

Alexandria City Council
Budget Public Hearing
November 25, 2003.

Submitted by:
Sheryl Gorsuch
Past President, MVCS PTA

408A E. Raymond Ave.
Alexandria, VA 22301
H# 703-836-3247

Licensed Program Funding

Continued support of the after school program:

- Maintained the quality and staff ratios for a high at-risk school population.
- Student accountability / required sign out procedures meet parent demands for safety.
- Insure the conditional 6 month license meets 2 year licensing standards.

Staffing

Increase staff to allow larger enrollment in after school program:

- Wait list the first week of school demonstrates the demand, despite the fact that some have found other alternatives.
- Older children (6th graders at GW) were pushed out; parents want another option to the Power-Up program which mixes 7th and 8th graders with younger 6th graders who may not be ready, have necessary maturity or need an option closer to home due to transportation issues.
- Ramsey program has set a precedent.

Power Up Program

Improve quality by assigning a full time director:

- Time to plan, interact with community programs (Winkler, Seaport etc.) and coordinate volunteers.
- Differentiation between high quality and mediocre programs largely linked to director.
- Professional position, professional attitude and tremendous potential.

Field Maintenance

Continue improvements seen in the past few years - Ideally improve overall maintenance, but at minimum create a schedule which address all fields:

- Quality of maintenance should not rest in neighborhoods with loud voices or coach preferences
- Cycle of overuse by certain fields needs to be spread out
- Minimal open space needs to be maximized

Other Comments

Field and Landscaping Maintenance needs to be coordinated between Schools, Rec Dept and City Services (e.g. Duncan Library, MVCS and MV Rec have 3 different contracts for landscaping maintenance and snow removal)

After school programs in the City should allow parents choices - MV Campagna program has shown decline before rec. license program implemented due to turnover in site director and unannounced cost hikes 2 yrs ago (cost is overwhelming for multi-child homes).

Mary Frances Varner

**Testimony of Mary Frances Varner, President
Virginia Trust for Historic Preservation**

**Pubic Hearing: City of Alexandria's 2005 Operating Budget
November 25, 2003**

My name is Mary Frances Varner and I am the President of the Virginia Trust for Historic Preservation. The Virginia Trust for Historic Preservation is a non-profit educational foundation, which owns and operates Alexandria's only privately held historic house museum – the Lee-Fendall House.

I appear before you today to inform you of a critical issue that threatens the long-term viability of our 219-year-old historic structure, and request funding in the amount of \$50,000 from the City of Alexandria in the form of a "Challenge Grant" to assist us in addressing this formidable and immediate restoration challenge – the failure of the primary structural beam that supports the main block of the house. For your reference I have provided a preservation fact sheet describing this essential restoration project.

The estimated cost to repair the primary structural beam and sill is \$100,000. The cost of this project is exclusive of the numerous other restoration and maintenance needs demanded by our historic structure. To raise the necessary funds to stabilize the main block of the house, our organization is actively pursuing every public and private funding opportunity. Therefore, we request the assistance of the City to ensure the preservation and long-term viability of the Lee-Fendall House by providing funding in the amount of \$50,000 in the form of a "Challenge Grant." With the support of the Mayor and the City Council, and a commitment for a portion of the funds needed to underwrite the restoration of the beam and sill, we are confident that we will be successful in achieving broad community support for this important restoration project.

The Lee-Fendall House is a showcase of Alexandria and American history. Since 1974, our museum has served the community as a dynamic historical, educational and cultural resource. It is our City's only historic house museum connecting 10,000 visitors annually with three centuries of our community's family history - it is our City's oldest Lee family home, as well as the home to the prominent Downham family and the nationally recognized labor leader John L. Lewis. Thus, it is a contributing feature to our City's attraction as a tourist destination, which directly impacts City revenue in the form of retail, restaurant and lodging taxes. Most importantly, it is an example of the significance of grass roots historic preservation in Alexandria, first exemplified when a group of community activists formed our foundation, specifically to raise the funds needed to save the house from demolition in the early 1970s, and provide stewardship for this historic resource...a stewardship that has continued for thirty years and, with the support of our community, will continue for many more to come.

Thank you for your time, consideration and commitment to the Lee-Fendall House.



Lee-Fendall House Museum

614 Oronoco Street • Alexandria, Virginia 22314

Telephone 703-548-1789 Fax 703-548-0931

www.LeeFendallHouse.org

Historic Preservation Fact Sheet

Project Title: Restoration of the Primary Support Beam and Sill – Main Block

Project Goal(s): (1) Address immediate threat to the structural integrity of the Lee-Fendall House by stabilizing the main block; and, (2) Implement permanent structural solution to ensure the long-term viability of the Lee-Fendall House by restoring the main block's primary support beam and sill.

Background: Philip Richard Fendall, the builder of the Lee-Fendall House, employed a style of construction typical of substantial 18th century houses, known as braced post and beam framing. This method took advantage of the ready access to large timbers that could be easily cut locally by unskilled labor (usually enslaved) and erected with wood pegs in mortise and tenon joints. The section of wall currently exposed and visible to our visitors shows the vertical posts or studs, which are rough 4x4 timbers, and a diagonal brace that is intended to stiffen the frame. The brick infill, called "nogging," was laid between the posts to make the structure rigid, and provide a base for the plaster wall finish. This type of wall construction forms the perimeter of the main block of the house, as well as the center support wall.

Below the exposed wall is a main structural timber, known as a "summer beam," that spans the basement from north to south and rests on a series of brick columns. This timber is approximately 12" by 12" and was one of the first elements of the house to be installed after the foundation was laid in 1785. The summer beam abuts the timber "sill" that rests on the foundation and forms the base of the rear wall of the house. Over time, wood eating insect infestation and dry rot have caused the timber of both the summer beam and the sill to deteriorate.

Project Status: The recent investigation of cracking plaster and buckled woodwork in this passage led to the discovery of the damage to the summer beam and sill. The work completed to date was intended to stabilize the wall to prevent further damage from the tons of brick and plaster that are pressing down on the beam's weak areas, and ensure a safe environment for those visiting and working in our site. The plans developed by historic preservation consultants will result in the replacement of the compromised sections of timber and a permanent structural solution to ensure the long-term viability of the Lee-Fendall House.

Estimated Cost of Restoration Project: \$100,000

Brent Minor

ACoHA

⌘ ALEXANDRIA COMMISSION ON HIV/AIDS ⌘

November 21, 2003

To the Members of the Alexandria City Council,

On behalf of the members of the Alexandria Commission on HIV/AIDS, I am writing to request that the Alexandria City Council consider funding a position within the Alexandria Health Department that would be devoted to HIV/AIDS prevention efforts targeting those at high risk and people of color in our community. This position should be added during the next budget cycle to maximize our efforts in this cause.

While the continued rise in the number of people living with HIV/AIDS is alarming, the disproportionate number of minority HIV/AIDS cases in our city is of enormous concern. Clearly, more resources must be directed to this effort to help reduce new HIV infections in our community.

This request was prompted by the recent decision by the Virginia Department of Health to consolidate all of the Minority AIDS Coordinator positions in Richmond. We feel this will have a deleterious effect on AIDS prevention programs, particularly those targeting African-Americans and Latinos in Alexandria. We appreciate the serious impact the budget shortfalls have had on our Commonwealth's economy, but we feel strongly that such a dramatic change to such a successful partnership is both unwise and ultimately not cost effective. (*See attached correspondence with VDH.*)

The importance of strong prevention programs helps in numerous ways:

- Fewer infections mean less suffering.
- Most of the people coming into care now are poor, uninsured, and have few other resources to maintain a stable life. Medical costs will only be part of the funds needed to care for these individuals.
- As people live longer with HIV/AIDS, the cost of care has ballooned upwards to over \$250,000 per lifetime. Preventing only 10 new infections would save over \$2.5 million in public health costs. The burden of such costs is often borne by local community-based organizations.
- Increased prevention efforts will bring more people into testing and care. An estimated 2/3 of Americans living with HIV/AIDS either don't know their status or know their status and are not in care. Early treatment is cost-effective by reducing hospitalizations and keeping clients well.
- Experience has shown that those who know their HIV status will sharply reduce "unsafe" behaviors, thereby reducing future infections.

Prevention is a key element of any successful program that hopes to address HIV/AIDS and stop the spread of this disease. Indeed, other local jurisdictions, including Arlington and Fairfax Counties, devote local dollars to similar efforts. It is time for the City of Alexandria to step up and join this effort more directly.

We have been pleased that Alexandria has been able to benefit from the presence of the Minority AIDS Coordinator. Never was that position more clearly valued than when Hopkins House opted out of providing HIV services. Thanks to the work of the Minority AIDS Coordinator, two new minority-based organizations were formed to help address this serious gap in services. Truly, without this kind of local community-based attention, many more individuals would have been at risk for HIV infection.

As we move toward World AIDS Day 2004 on December 1, it is important that we take a strong public stand on HIV/AIDS prevention, particularly as it affects the most vulnerable in our city. The addition of a position in the Alexandria Health Department would increase prevention efforts in communities of color and is vitally needed. Thank you for your consideration of our request.

Sincerely,

A handwritten signature in cursive script, appearing to read "Brent Minor".

Brent Minor
Chair

Cumulative Calendar Year 2003

VIRGINIA YEAR TO DATE MORBIDITY SURVEILLANCE REPORT Through September 2003

HEALTH DISTRICTS BY REGION		HIV	AIDS	Chlamydia	Gonorrhea	Early Syphilis
NW	Central Shenandoah	5	4	304	34	1
	Lord Fairfax	0	8	309	21	1
	Rappahannock	6	11	411	118	1
	Rappahannock/Rapidan	3	7	241	46	1
	Thomas Jefferson	7	7	371	94	1
N	Alexandria	37	58	272	73	10
	Arlington	44	50	209	67	13
	Fairfax	66	84	585	146	18
	Loudoun	6	9	158	22	1
	Prince William	23	28	628	126	6
SW	Alleghany	5	4	165	45	0
	Central Virginia	5	13	426	178	1
	Cumberland Plateau	0	1	38	2	0
	Lenowisco	0	2	84	6	0
	Mount Rogers	3	7	156	30	1
	New River	1	2	190	38	0
	Pittsylvania/Danville	4	8	464	182	3
	Roanoke City	12	12	399	293	1
	West Piedmont	1	3	176	63	1
C	Chesterfield	18	19	439	175	3
	Crater	34	30	552	232	3
	Hanover	3	7	141	55	1
	Henrico	29	17	558	282	8
	Piedmont	6	6	206	73	2
	Richmond City	81	53	1518	962	18
	Southside	6	14	181	80	0
E	Chesapeake	15	18	496	303	4
	Eastern Shore	4	8	146	67	0
	Hampton	17	10	789	391	1
	Norfolk	60	44	937	772	15
	Peninsula	34	22	964	697	2
	Portsmouth	26	16	371	236	6
	Three Rivers	8	8	280	108	0
	Virginia Beach	28	16	911	445	5
	Western Tidewater	9	3	510	313	0
YTD NORTHWEST REGION (NW)		21	37	1,636	313	5
YTD NORTHERN REGION (N)		176	229	1,852	434	48
YTD SOUTHWEST REGION (SW)		31	52	2,098	837	7
YTD CENTRAL REGION (C)		177	146	3,595	1,859	35
YTD EASTERN REGION (E)		201	145	5,404	3,332	33
YTD STATE TOTAL - 2003		694	581	13,153	7,811	128
Percent Change - 2002 vs. 2003		-12.7%	4.8%	10.9%	-13.3%	0.0%

Cumulative Data through June 30,2003

Alexandria

	HIV		AIDS	
	Cases	%	Cases	%
Gender				
Male	635	72.1%	844	84.5%
Female	246	27.9%	155	15.5%
Total	881		999	

Race

White	252	28.6%	465	46.5%
Black	560	63.6%	459	45.9%
Hispanic	53	6.0%	68	6.8%
Other / Unknown	16	1.8%	7	0.7%
Total	881		999	

Age

0 - 12	3	0.3%	*	
13 - 19	23	2.6%	.	
20 - 29	263	29.9%	167	16.7%
30 - 39	380	43.1%	467	46.7%
40 - 49	169	19.2%	269	26.9%
50+	43	4.9%	92	9.2%
Total	881		999	

Selected Transmission Mode

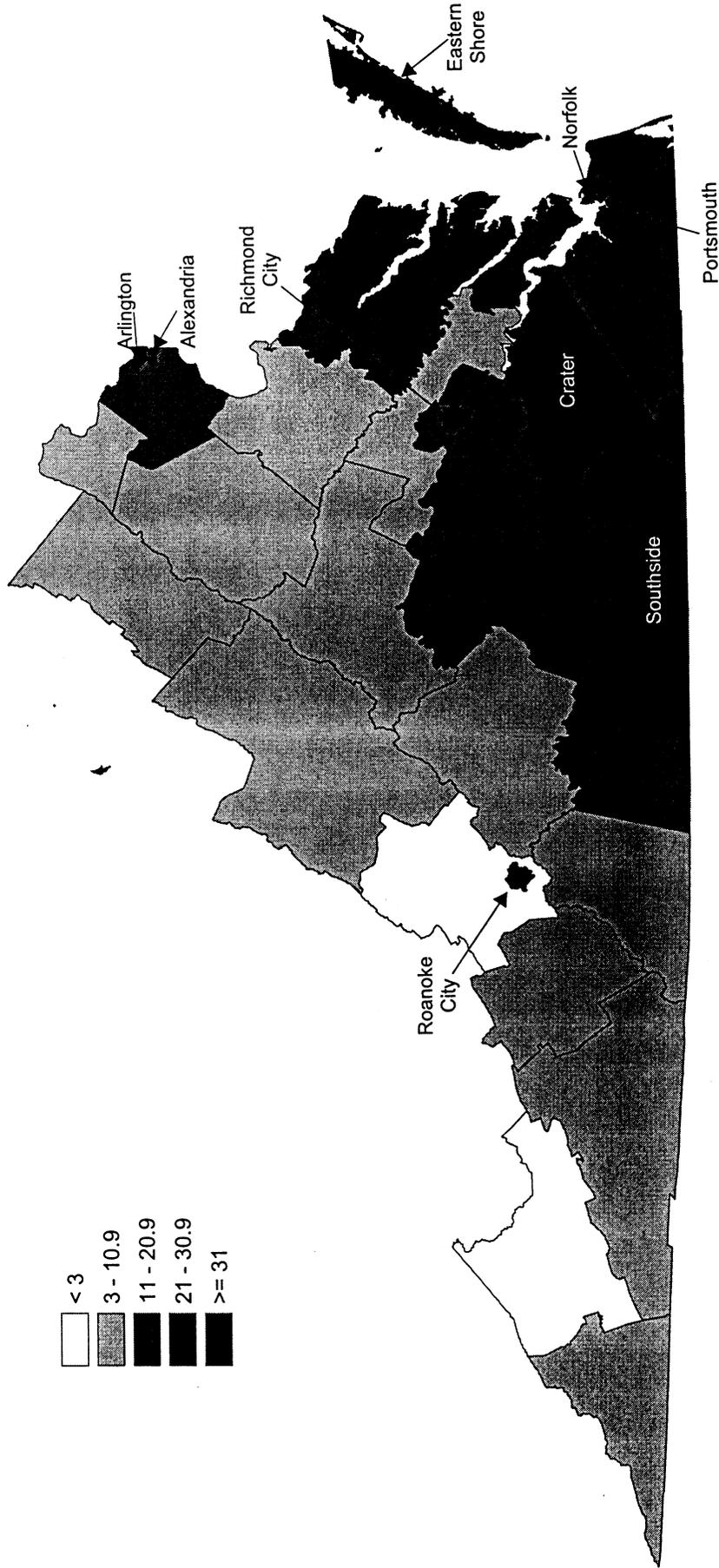
MSM**	342	38.8%	601	60.2%
IDU***	145	16.5%	127	12.7%
MSM/IDU	43	4.9%	44	4.4%
Heterosexual Contact	179	20.3%	114	11.4%
No Identified Risk (NIR)	163	18.5%	97	9.7%
Other	9	1.0%	16	1.6%
Total	881		999	

*Rule of three. Cell size too small to report.

**Men having Sex with Men

***Injecting Drug User

**Figure E. HIV Infection
 (HIV and AIDS Unduplicated*) by Health District
 Rate Per 100,000 Population¹¹
 Reported July 2002 - June 2003**



Population Estimate, July 1, 2002
 Source: Population Division, U.S. Census Bureau

*Equal to new HIV case reports plus new AIDS case reports that were not reported as HIV.

ACoHA

⌘ ALEXANDRIA COMMISSION ON HIV/AIDS ⌘

Casey W. Riley, Director
Virginia Department of Health
Division of HIV/STD
P.O. Box 2448, Room 112
Richmond, Virginia 23218-2448

Dear Mr. Riley,

On behalf of the members of the Alexandria Commission on HIV/AIDS, I am writing in regards to the recent decision to alter one of the key mechanisms used in AIDS prevention efforts in the Commonwealth of Virginia. Specifically, we are writing concerning the changes your office has proposed to the Minority AIDS Coordinator positions, particularly as it affects Alexandria and Northern Virginia.

We share your belief that the role of the Minority AIDS Coordinator is a critical one. We well know the value of having outreach efforts targeted to minority communities. We have been pleased that Northern Virginia has been able to benefit from this program. Truly, without this kind of local community-based attention, many more individuals would have been at risk for HIV infection.

Like many jurisdictions in the Commonwealth, there has been an ongoing challenge to develop competent and successful minority based providers. Having a Minority AIDS Coordinator located in this area has been terribly important as we work to fill that void in our service delivery model.

Thus, we are concerned about the proposal to consolidate all of the Minority AIDS Coordinator positions in Richmond. We feel this will have a deleterious effect on AIDS prevention programs, particularly those targeting African-Americans and Latinos in Northern Virginia. Transferring this position to Richmond will unnecessarily disrupt the network of organizations that coordinate efforts to maximize the effectiveness of prevention programs.

While we appreciate the serious impact the budget shortfalls have had on our Commonwealth's economy, we feel strongly that such a dramatic change to such a successful partnership is both unwise and ultimately not cost effective. We also are concerned that there might be a tendency to reduce the overall number of positions or burden the positions with work beyond the original intent of their scope of work. Both scenarios ultimately reduce our prevention efforts and cannot be condoned.

We strongly urge you to reconsider this decision and allow areas with a high incidence of HIV infection, such as Northern Virginia, to maintain the presence of a local Minority AIDS Coordinator. Thank you for your consideration of our request.

Sincerely,



Brent Minor
Chair

Cc: Alexandria City Council
Dr. Charles Konisgberg



COMMONWEALTH of VIRGINIA

Department of Health

P O BOX 2448
RICHMOND, VA 23218

TTY 7-1-1 OR
1-800-828-1120

May 13, 2003

Brent Minor, Chair
Alexandria Commission on HIV/AIDS
2910 Sycamore Street
Alexandria, Virginia 22305

Brent
Dear Mr. Minor:

Thank you for your recent letter concerning the reorganization of the Minority AIDS Projects (MAPs). This decision was the result of several years of review of the statewide structure and process of the program. Although the currently structured program had some good aspects, improvement was needed to ensure that effective HIV prevention education reaches minority populations at risk in the most cost-effective manner.

After fifteen years under the current program structure, I believe it is time to implement a new model of delivery for prevention services to the hardest hit populations. As requirements from the Centers for Disease Control and Prevention (CDC) have become more specific, we must be able to demonstrate that these dollars are being allocated in accordance with trends in the HIV epidemic and utilized for interventions with demonstrated effectiveness. The current program structure has severely limited our ability to ensure that these requirements are met.

In modifying the program structure, we will also be mirroring CDC's trend of funneling more of our dollars directly to community-based organizations (CBOs). Under the current structure, nearly 50% of funds are allocated for salaries and administrative expenses. Under the new program, which will be implemented in January 2004, current MAP localities, including Alexandria, will receive increased funding for direct HIV prevention interventions for high-risk individuals in racial/ethnic minority communities. Two additional areas will also be funded to address the disproportionately high rates of HIV in these communities. Under the reorganized MAP, CBO contractors with multiple contracts in areas such as Northern Virginia will benefit from streamlined and coordinated programs. There will be one request for proposals for services in multiple jurisdictions, and CBOs will have only one set of reporting requirements, although they may be funded to provide services in more than one health district. The program structure will follow the same structure as our other grant programs, be less burdensome to contractors, and provide a more direct link between the Division of HIV/STD and the activities we are funding.

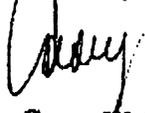
Mr. Minor
May 13, 2003
Page Two

We recognize that there is the potential to lose some valuable local coordination and we are developing strategies to address these issues. Local health districts will be asked to provide us with their priorities for the MAPs and to give feedback on the strengths and weaknesses of their current contractors. Agencies awarded funds will be required to submit their work plans to the local health districts in which they are providing services. We hope this will assist both the central office and the local health districts in addressing gaps and avoiding duplication of services. Finally, we plan to have additional technical assistance and capacity building activities for funded organizations.

I would also like to encourage individuals from Northern Virginia to apply for membership on the Virginia HIV Community Planning Committee (HCPC). Other areas of the state have strong representation but we have had few applicants from the Northern Region in the past two years. The HCPC has been useful in facilitating information exchange and delineating the needs of localities to VDH.

I believe we share a common goal of ensuring that HIV prevention programs reach the populations at risk in the most cost-effective manner. We appreciate you taking the time to write to us and will continue to work with local communities as we restructure the format for delivering these services.

Sincerely,



Casey W. Riley, Director
Division of HIV/STD

/rah

World AIDS Day 2003 Events in Northern Virginia

AIDS Response Efforts, Inc. of the Winchester area will be sponsoring a Builders Club Toiletry Drive at David Morgan Middle School for the entire month of November, 2003. For more information, please contact Mia Franklin, Educator/Events Coordinator.

Arlington County Department of Human Services will be holding a proclamation signing on December 2, 2003 with the Chair of the Arlington County Board. Information tables will be set up on December 2-3, 2003 at Courthouse Plaza all day from 8AM-5PM.

The **Fairfax County Board of Supervisors** will hold a **World AIDS Day Proclamation** on Monday, November 17, 2003 at its regular meeting time. The Board will recognize both the Northern Virginia AIDS Ministry and Whitman Walker Clinic of Northern Virginia for their HIV prevention efforts over the past 10 years.

Fredericksburg Area HIV/AIDS Support Services (FAHASS) will be providing anonymous HIV testing at (Location to be determined) on December 1, 2003. *FAHASS offers anonymous HIV testing M-Th from 8:30AM-4:30PM and Fridays 8:30AM-11:30AM.* For more information call 1-800-215-8121.

K. I. Services, Inc. will be hosting an event at the Alexandria Department of Health and Human Services (Social Services office on Mt. Vernon Avenue) on December 1, 2003 from 10AM-2PM. Information tables and OraSure testing will be available in English and Spanish. Call 703-838-0204 for more information.

Loudoun County HIV/AIDS Issues Group will be holding a World AIDS Day event on December 1, 2003 from 4PM-7PM at the Dulles Town Center. Features of this event will include: a Circle of Remembrance Ceremony, music by Crossroads United Methodist Church, two speakers from the Face-to-Face program of NOVAM, and a speaker from Loudoun County Board of Supervisors. For more information call Geraldine at 703-771-5820.

Prince William Interfaith Volunteer Caregivers will be acknowledging World AIDS Day with a prayer service from NOON-1pm on Sunday, November 30, 2003 at New Life Anointed Church, 14508 Telegraph Road, Woodbridge, VA, 22192. The featured speaker will be Minister Another Hines. For more information please call 703-490-7155.

Please Join the **Vaccine Research Center Clinic** for their Open House Commemoration World AIDS Day on December 1, 2003, 2PM-6PM, Clinical Center, Building 10, 12th Floor, West Wing, National Institutes of Health, Bethesda, MD 20892 (Medical Center Metro stop on the Red Line) RSVP to Nancy Barrett at 301-435-3676 or nbarrett@nih.gov.

Wholistic Family Agape Ministries Institute will be having a "Healing and Awareness Memorial Service" (PDF format) on December 1, 2003 at 6:30PM at the First Agape Baptist Community of Faith, 2423 Mount Vernon Avenue, Alexandria. For more information contact Toni Howard at 703-519-9100.

FACTS & STATS

A Publication of the Alexandria Commission on HIV/AIDS

LOCAL STATISTICS

Cumulative AIDS Cases

ALEXANDRIA	908
<i>Through June 2002</i>	
Male	778
Female	130
VIRGINIA	14,294
<i>Through June 2002</i>	
Male	11,758
Female	2,536
Pediatric (0 - 12 years)	174
Adolescent (13 - 19 years)	73
UNITED STATES	816,149
<i>Through December 2001</i>	
Male	666,026
Female	141,048
Children	9,074

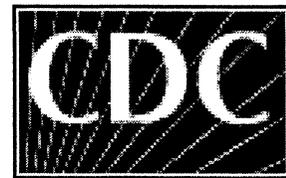
HIV Cases

ALEXANDRIA	821
<i>July 1989 - June 2002</i>	
Male	591
Female	230
VIRGINIA	14,170
<i>July 1989 - June 2002</i>	
Male	10,338
Female	3,832
Pediatric (0 - 12 years)	138
Adolescent (13 - 19 years)	469
UNITED STATES	
Estimates of 850,000 to 950,000	
Cumulative To December 2001	

These numbers are almost certainly understated, as there are individuals who are HIV-Positive but not diagnosed.

MORE STATS →

CDC Announces New Prevention Strategies



In April 2003, the Director of the Centers for Disease Control, Dr. Julie Gerberding, announced some important changes to the nation's HIV prevention activities. The new initiative is called "Advancing HIV Prevention: New Strategies for a Changing Epidemic" and has four major components:

- Make HIV testing a routine part of medical care. Previously, the CDC primarily recommended testing only for persons at a perceived high risk for HIV. This new effort hopes to reduce the estimated one-third of people who are HIV+, but don't know it.
- Implement new models for diagnosing HIV. With the advent of the OraQuick rapid test, patients can now get results in about 20 minutes. The CDC plans to increase access by expanding testing sites beyond clinics and public health departments.
- Prevent new infections by working with persons diagnosed with HIV and their partners. Partner notification is a routine part of other STD prevention efforts such as syphilis. The CDC hopes to help encourage those infected with HIV to reduce their risk behaviors and to encourage their partners to get tested.
- Further decrease perinatal HIV Transmission. Numerous studies show that mother to child transmission can be dramatically reduced with proper testing and care. The CDC will recommend routine HIV testing of all pregnant women and to monitor the integration of routine prenatal testing into medical practice.

The CDC hopes that these steps will help reduce the number of approximately 40,000 new HIV cases in the United States each year.

Information from Morbidity and Mortality Weekly Report April 18, 2003/Vol.52/No. 15

Alexandria Commission on HIV/AIDS ANNUAL REPORT

ACoHA's annual report will be available in September. The report covers ACoHA's activities, the changes in the Commission's members, and on-going and future projects. Copies are available from:

Nechelle D. Terrell
 HIV/AIDS Administrative Technician
 Alexandria Health Department
 703-838-4400 /x305
nterrell@vdh.state.va

HIV/AIDS-related News

■ **A Call to Action:** The Southern States Summit on HIV/AIDS & STDs was held November 13-15, 2002 in Charlotte, North Carolina. The southern region of the United States, including Virginia, is thought to have the greatest number of people living with AIDS in the United States. Transcripts and videocasts are available from the Kaiser Family Foundation, one of the sponsors of the event: http://www.kaisernet.org/health_cast/hcast_index.cfm?display=detail&hc=716.

Continued on Page 3

NATIONAL STATISTICS

TOP 10 STATES - AIDS BY NUMBER OF CASES

Adults & Adolescents
Cumulative, 1981-2000

1. New York	139,634
2. California	119,021
3. Florida	78,830
4. Texas	53,537
5. New Jersey	41,317
6. Illinois	24,732
7. Puerto Rico	24,491
8. Pennsylvania	24,243
9. Georgia	22,608
10. Maryland	21,380

Washington, DC is #12 with 12,930 cases
Virginia is #13 with 12,899 cases

BY RATE

PER 100,000 POPULATION
Adults & Adolescents in 2000

1. Washington, DC	179.7
2. Puerto Rico	44.5
3. Virgin Islands	42.4
4. New York	39.8
5. Florida	36.6
6. Delaware	34.4
7. Maryland	33.7
8. New Jersey	27.2
9. South Carolina	24.0
10. Massachusetts	22.6

Virginia is #21 with a rate of 14.9/100,000

MORE STATS →

AGENCY SPOTLIGHT

They wanted you to know...



A new feature! Each issue we will highlight the activities of various local and regional agencies working on HIV/AIDS policy, treatment, prevention, and education. This issue: VORA, Virginia Organizations Responding to AIDS.

- VORA is a coalition of local, regional, and statewide organizations and individuals responding to the AIDS epidemic, including people living with HIV/AIDS. VORA's mission is to educate the public and policy makers about HIV and AIDS, and the challenges confronting Virginians living with HIV/AIDS. It is supported in part by the Washington AIDS Foundation

- VORA recognizes that people living with HIV/AIDS, and their family, friends, and communities are each unique, and takes this into account in carrying out its mission.

- VORA has a dynamic web site with two especially important features for the community concerned about HIV/AIDS. The first is a frequently updated budget and legislation watch <<http://www.voraonline.org/working/working.php>>; the second is an online forum <<http://www.voraonline.org/forum/index.php>> for exchanging messages on many relevant topics. The forums do not function as distribution lists, so those concerned about receiving additional e-mail need not worry. Those who prefer to receive information via VORA's distribution list may contact VORA: vora@novam.org, or by phone at 703-626-7392.

CURRENT MEMBERSHIP OF THE ALEXANDRIA COMMISSION ON HIV/AIDS

Contact: Nechelle D. Terrell
HIV/AIDS Administrative Technician
Alexandria Health Department
703-838-4400 x305

Unless noted, The Alexandria Commission on HIV/AIDS meets every other month, on the third Thursday of the month at 7:17pm in Room 2000 of the Alexandria City Hall. Updates to meeting times or places may be obtained from Nechelle Terrell or at the City's Boards and Commissions Calendar site: http://www.ci.alexandria.va.us/city/boards_comm/calendar.html. The meeting dates for the remainder of 2003 are September 15 and November 17.

RYAN ALLAIN
Community Services Board

PENELOPE BRIDGES
Alexandria Interfaith Association

MERRY BRINKLEY
Sheriff's Department

DENNIS BURSTEIN
Alexandria City Public Schools

ZARAH BURSTEIN
T.C. Williams High School - Student Member

HUGH DELGADO
Whitman-Walker Clinic of Virginia

GEORGE DUMAS
Alexandria Interfaith Association

PAUL FLORENTINO
Practicing Physician

JACQUELINE FORBES
NOVAM

MICHELE GARFINKEL
Citizen-At-Large

FRANCES KRIZAN
INOVA VNA Home Health Care

BRENT MINOR
Citizen-At-Large; Chair of ACoHA

SUSAN PETERSEN
Citizen-At-Large

CHRISTY ROTHENBERGER
American Red Cross - Alexandria Chapter

DAVID TARANTINO
Citizen-At-Large

JOHN WERTMANN
Citizen-At-Large; Vice-Chair of ACoHA

GLOBAL STATISTICS

Adults and Children Living with HIV/AIDS, Top 15 (Estimates)

South Africa	4,700,000
India	3,700,000
Ethiopia	3,000,000
Nigeria	2,700,000
Kenya	2,100,000
Zimbabwe	1,500,000
United Republic of Tanzania	1,300,000
Mozambique	1,200,000
Democratic Republic of Congo	1,100,000
United States of America	870,000
Uganda	820,000
Malawi	800,000
Cote d'Ivoire	760,000
Thailand	695,000

Source: UNAIDS 2002

TOTAL NUMBER OF PEOPLE
LIVING WITH HIV/AIDS
(End of 2001)
30 - 50 MILLION

(Best estimate: 40 million, approximately 28.5 million in sub-Saharan Africa)

CHILDREN ORPHANED BY AIDS
(End of 2001)
14 MILLION

(11 million in sub-Saharan Africa)

More HIV/AIDS-related News (continued from page 1)

■ **HIV/AIDS and the Smallpox Vaccination Program:** For a number of years, smallpox was off the public's radar screen, but current fears of terrorism have precipitated the beginning of a vaccination program that could have dangerous side effects for people living with HIV/AIDS.

- People With HIV/AIDS (or any other immune deficiency disease) should not receive the vaccine.
- Recently vaccinated individuals should avoid contact with anyone with an immune deficiency.

More about this issue can be found at the following websites: <http://www.bt.cdc.gov/agent/smallpox/index.asp>, <http://www.bt.cdc.gov/agent/smallpox/vaccination/contraindications-public.asp>, and <http://www.napwa.org/smallpoxletter.htm>

■ **The State Budget and HIV/AIDS Programs:** Given the current budget crisis in Virginia, HIV and AIDS programs did perhaps a little less badly than expected in 2003. There were no changes in ADAP funding, a Medicaid buy-in program is being developed, and HIV/AIDS medications will most likely be "carved out" from pre-authorization requirements from the Medicaid "Preferred Drug List."

(Source: Virginia Organizations Responding to AIDS)

■ **AIDS Drug Assistance Programs:** AIDS Drug Assistance Programs (ADAPs) exist to aid the under/uninsured in the United States by providing frequently expensive prescription drugs used in the treatment of HIV and AIDS-related conditions. ADAP is a safety net for people without Veterans' Administration, Medicaid, or private insurance coverage, but it is not an entitlement.

As of June 2001, Virginia was 10th in the number of enrolled ADAP clients with a budget of a little more than \$17 million; about \$2.6 million of this was supplied by the state. For more information on ADAP in other states, see the useful report from the National ADAP monitoring project, a collaboration of the National Alliance of State and Territorial AIDS Directors, the Henry J. Kaiser Family Foundation; and the AIDS Treatment Data Network, available at <http://www.atdn.org/access/adap/>.

UPCOMING EVENTS

The National HIV Prevention Conference July 27-30, 2003 • Atlanta, GA

The National HIV Prevention Conference will be held July 27 - 30, 2003, in Atlanta. Co-sponsored by a variety of federal government agencies and non-governmental organizations, the conference focuses on disseminating proven prevention methods to all partners in prevention, and on strengthening collaborations between practitioners and researchers to develop more comprehensive approaches to prevention. More information is available at <http://www.2003HIVPrevConf.org/>.

The 7th Annual United States Conference on AIDS September 18 - 21, 2003 • New Orleans, LA

The 7th Annual United States Conference on AIDS (USCA) will be held September 18-21, 2003, in New Orleans. USCA is the premier meeting for HIV/AIDS workers and service providers, and people living with AIDS, policymakers, and public officials concerned with service and care issues. For more information, see <http://www.nmac.org/conferences/USCA2003/default.htm>.

Syphilis update

Syphilis cases continue to be rising in our city at an alarming rate. Many public health experts are concerned that higher syphilis rates could be a harbinger of new increases in the number of cases of HIV/AIDS. Below is a story reprinted from last year in the Washington Blade about this serious issue. Brent Minor, chair of the *Alexandria Commission on HIV/AIDS* and Debby Dimon of the *Alexandria Health Department* are quoted.

Washington Blade - June 14, 2002

By Rhonda Smith

ARLINGTON, VA — Public health officials in Alexandria and Arlington said they are concerned about the increase in the number of gay and bisexual men who have tested positive for syphilis in the past three years.

While the two Northern Virginia cities are not experiencing a syphilis outbreak, like those reported in recent years in some metropolitan cities nationwide, health officials in Virginia said the trend is troubling.

"What we're seeing is an increase over a period of three years among men who have sex with men," said Jan Tenerowicz, communicable disease bureau chief for the Arlington County Public Health Division. "I'm really concerned for people because they don't recognize that syphilis can be a major health problem. If they're co-infected with HIV, they can get really sick."

Syphilis appears first as a sore, usually on the genitals, then develops as a rash. It can be cured with penicillin, but left untreated it can damage the heart, eyes, brain and other body parts.

Six syphilis cases were diagnosed in Arlington in 1998, statistics from the Arlington County Public Health Division show. This number climbed to eight cases in 1999 and to 12 cases in 2000. Public health officials diagnosed 15 syphilis cases in Arlington in 2001.

Debby Dimon, public health nurse supervisor in the Alexandria Health Department, said between mid-March and the first week of May this year that city reported eight cases of syphilis.

"Prior to last year, the average annual number of cases used to be five to seven in an entire calendar year," she said. "In 2001, we had 10 cases in 12 months."

All eight cases involved gay or bisexual men, four of whom also are infected with HIV and knew their HIV status before becoming infected with syphilis.

"So we're aware that there are people with HIV participating in behaviors that can expose others to HIV," Dimon said.

Even the other four gay or bisexual men in Alexandria, who were diagnosed with syphilis but are not HIV-positive, participated in sexual behaviors that would put them at risk for contracting HIV, Dimon said, based on their recent exposure to syphilis.

She also noted that in Arlington last year, public health officials identified new syphilis cases among gay and bisexual white and Latino men.

"In Alexandria," Dimon said, "we're seeing exposure among white and black men, gay and bisexual." Public health officials in Alexandria have begun redirecting their HIV prevention resources to reach men who are having sex with men, Dimon said.

Valerie McDonald, the city's minority HIV coordinator, has been working with the Black Men's Health Project of Alexandria on this matter.

"We're also taking our concern to the Northern Virginia HIV Consortium," Dimon said. "There are meetings scheduled later this month with the prevention and the executive committees to determine how we can collaborate on our prevention efforts."

Public health authorities in Alexandria also have been meeting with officials in other local jurisdictions to determine whether there are any other similarities among the syphilis cases so strategies could be implemented to curb the problem.

Brent Minor, chair of the Alexandria Commission on AIDS, said an increasing number of people appear to have forgotten how devastating HIV/AIDS can be. "People are having unprotected sex, and that's causing the spread of more sexually transmitted diseases, which in this case is syphilis," he said. "If the past is prologue, what we know is when we see a spike in STDs, a rise in HIV cases is inevitable because [the infections] are spread in the same manner. That's our concern."

Minor is HIV positive, a member of the Presidential Advisory Council on HIV/AIDS and chair of its Care & Treatment Committee.

Last November, the Centers for Disease Control & Prevention reported that while the number of reported syphilis cases in the U.S. hit an all-time low in 2000, outbreaks of the disease have been seen among gay men in a handful of large cities such as Miami, Los Angeles, and Chicago.

Cesar Peña, an epidemiologist for the STD Division of the Maryland Department of Health & Mental Hygiene, in Baltimore, said the number of syphilis cases in that state is decreasing, thanks to initiatives aimed at reducing the rate of infection in Baltimore.

He also said, however, that syphilis cases are increasing in Prince George's County, MD., a Washington suburb. In addition, there has been a slight increase in the number of syphilis cases reported in Harford County, near Baltimore.

There were 18 syphilis cases reported in Prince George's County in 1999, Peña said. In 2000, there were 20 cases reported, and in 2001, he said 29 cases were reported.

Dr. Karyn Berry, chief of the Bureau of Communicable Disease Control in the D.C. Department of Health, said the overall incidence for syphilis cases in the District of Columbia has decreased.

"But when you look at men, there have been fluctuations" in the number of syphilis cases diagnosed. "We'd like to see it lower, and that's what we're aiming for, by investigating cases and contacts and working with community-based organizations."

In 2001, the most recent year for which information was available, she said the total number of syphilis cases diagnosed among men in Washington was 179.

Michelle Stoll, a spokesperson for the Division of HIV & STD in the Virginia Department of Health, said the cities of Danville, Richmond and Norfolk have had the greatest amount of syphilis cases in the past few years. Norfolk has had the most cases in Virginia in 2001, with 63 cases.

Acknowledgments: The members of the Alexandria Commission on HIV/AIDS are grateful to Gordon Thomas Frank for the new design and the layout of the newsletter. We also thank Debby Dimon and Nechelle Terrell of the Alexandria Health Department for their assistance.

Fran Becker

**Comment from the Homeless Services Coordinating Committee
At November 25 City Council Meeting
Public Comment on the City Budget**

Mr. Mayor, Council Members. I'm Fran Becker, Executive Director of *Carpenter's Shelter* and I'm speaking tonight on behalf of the *Homeless Services Coordinating Committee (HSCC)*. This Committee, established in 1989, is a collaborative partnership of 39 businesses, non-profits, city agencies and advocates addressing the needs of Alexandria's homeless.

First and foremost, we are hopeful that Alexandria will join the scores of cities across the nation that have created Mayoral Task Forces to address the chronic street population. HUD requires all jurisdictions receiving HUD funding to come up with a 10-Year Plan to End Chronic Homelessness. The HSCC cannot do this by itself. Collaboration and coordination of resources at the highest levels of government and the private sector are needed. The HSCC's top priority – a Safe Haven facility for unsheltered homeless individuals – will be a first step in addressing the problems faced by this population and we will need City resources to create this facility. Mary Riley (will be speaking) (has spoken) about the details of this program.

Another top priority for the HSCC is the development of Single Room Occupancy, or SRO, units for homeless individuals. An SRO program provides rental units for extremely low income individuals, and needs to be a critical component of the City's affordable housing strategy. For those many individuals who are residing in emergency shelters or transitional programs, most of whom are employed and are ready to move on to their own housing, there is no place within the City where they can afford to live. These individuals have been compliant – doing everything asked of them, from completing school and finding work to overcoming chemical dependencies. All they need now is an affordable place to call home. An SRO - a single room efficiency apartment - will give them that.

A HUD-mandated priority for 2004 is a Homeless Management Information System. The HMIS will provide a computerized data collection system for the entire homeless population in the region. Every jurisdiction receiving HUD funding – which in Alexandria includes every non-profit emergency shelter and transitional provider, as well as three City agencies serving the homeless – must be participating in the HMIS by October of 2004. Start-up monies are required for implementing the HMIS and while every agency will be paying its own user fees for this system, we do need funding for the start-up costs.

Finally, we urge the Council to approve continuation funding for the Alexandria transitional housing program created with Housing Trust Fund monies. This program created additional transitional units so that individuals and families residing in emergency shelters could take the next step toward independent living. A representative of *Northern Virginia Family Service* will be addressing this program in more detail.

(Wrap up)

hscce 11-25-03 council

Gordon Johnston

Alexandria City Council Public Hearing on the Fiscal Year 2005 Budget
Statement by Gordon I. Johnston
Mt. Vernon Community School Parent Teacher Association (PTA)
November 25, 2003

Honorable Mayor, Vice Mayor, and Alexandria City Council Members. On behalf of the Mt. Vernon Community School PTA, thank you for holding this public hearing and providing this opportunity for the community to offer comments regarding the upcoming Fiscal Year 2005 budget. We appreciate this opportunity to comment while the budget is still being prepared so that staff may consider our input before submitting the budget in mid-March.

We thank you for your generous support of the Alexandria City Public Schools. We are justly proud of our students and the progress they demonstrated in advancing eleven schools to full accreditation. We have seen test scores there rise dramatically, especially when compared to test scores nationwide. We encourage the Council to continue support for the staff at Mt. Vernon and their innovative efforts, such as the Dual Language program, so that we continue this improvement. We understand that this will be a difficult budget year, with continued fiscal challenges at the state level, slower City tax revenue growth, and significant capital improvement project budget needs. We would like to mention a few areas for your consideration.

Regarding the City Schools budget, our schools are feeling the pinch of the Federal requirements from the "No Child Left Behind" legislation. While we hope that our elected representatives at the Federal level will move to amend some of the difficulties with this legislation, we support the emphasis on universal proficiency and the attention this has brought to ways to narrow the minority achievement gap. We encourage you to embrace the spirit of this legislation and support efforts to ensure that all of our children learn.

Thank you for your support and leadership on the Duncan Library expansion by directing the project to consider the overall effect including the design for open space, the school entrance, and the recreation center. Mt. Vernon will face some continuing needs associated with the renovations at the Duncan Library in the school system's capital budget, such as the canopy replacement. We also support the funding for the TC Williams construction, including green LEED certification.

In addition, we see a strong partnership between the schools and the Recreation Department, reinforcing and supporting learning beyond the school day. With regard to the Recreation Department budget, we encourage you to consider staffing increases and support for the licensed after-school program.

I have lived in Del Ray for sixteen years. Recently our little community has become a "hot" place to live. This is due to your hard work and the hard work of many others, including the Del Ray Citizens Association and their Education Committee, of which I am a member. Five years ago, when my daughter was about to begin to begin at Mt. Vernon, these groups were concerned at the number of parents who were moving away when their children became school-aged, both because of the impact on the schools, and because of the impact on the community. My work through the PTA and the Education Committee has convinced me that the schools are vital in building strong communities and in keeping Alexandria a vibrant place to live. When "hot" communities are rare, they become unaffordable. We want to make all of our schools strong schools, and to make all of our communities affordable, "hot" places to live.

Robert Sidenberg

Are you ready for your kids to start school on July 28, 2004?

In the next week or two, you will be asked if you are "interested" in having Mt. Vernon Community School (MVCS) adopt a modified school calendar (become a Year Round School). If you say, "Yes, I am interested," your "interest" may be interpreted as meaning that you support starting the next school year as early as July 28, 2004 instead of the traditional day after Labor Day (September 7).

The proposal to shift to a year-round calendar was presented to MVCS parents at the PTA meeting on **November 4** with the announcement that a decision had to be made before Thanksgiving! As a result, some parents are concerned the time allotted is far too short for the community to consider this very serious issue. Abolishing the traditional school calendar is a radical change. It will put our children out of sync with their community and the nation (less than 3% of schools are YRS); it creates difficulties for families that have children in more than one school; it sharply curtails the different, non-academic, learning experiences that children enjoy in summer, and it overturns a traditional calendar that has proven successful. MVCS is now a fully accredited school.

So why are we being asked to make this decision on such short notice? That's a valid question. YRS does not seem to stand up to scrutiny. Claims that YRS significantly improves test scores are questionable. Year-round school is not something new, it has been around for a century. There is a vast body of research on the subject, and the broad consensus is that there are "no significant differences in educational achievement between students in year-round schools, and students in schools with traditional calendars." Yet YRS is far more costly and creates social problems like those listed above.

In 1956, the National Education Association reported "every school system that has attempted a 12-month calendar has later abandoned it, and every community which has thoroughly investigated the plan has rejected it." Since that time thousands more schools have tried and abandoned the year-round school calendar. For example:

- In 1993, 543 year-round schools in Los Angeles alone switched back to the traditional calendar.

In some ways, the ineffectiveness of the year-round school calendar is obvious. For example, if the educational benefits of year round school were so great, then one would expect that most private schools would adopt it. But only 38 of the nation's 23,690 private schools have year-round calendars. That's .00015% which, statistically, is usually rounded to zero.

It has been reported that the year-round calendar will cost the City of Alexandria another half million dollars just to implement. Could this money be spent on our children in much better ways? All parents should have the time to thoroughly inform themselves of the pro's and cons of year-round school.

OUR PROPOSED SURVEY

- Yes. I am interested in year-round school and am prepared to have my child start as early as July 28, 2004.
 - I would like to learn more about Year-Round school, but I do not have enough information to make an informed decision. I agree that we should have a year to study the issue in order to make sure every one has time to learn the pro's and con's, and in order to have adequate debate. If we adopt YRS, it should not be until July 2005.
 - No. I am not interested in year-round school.
-

For your own research:

The primary organization opposed to the traditional calendar is the National Association of Year Round Education (NAYRE) www.nayre.org.

The best website favoring the traditional calendar is www.SummerMatters.com.

Be informed before you vote!

**Alexandria Community Services Board
Public Comment on the City Budget
City Council Meeting – November 25, 2003**

Mr. Mayor, Council members – I am Mary Riley, Vice Chair of the Community Services Board and I am here tonight on behalf of the Department of Mental Health, Mental Retardation and Substance Abuse. (Mr. Bradbury, CSB Chair, is out of town.) The mission of the Department is to serve this community's neediest citizens, many of whom are on long waiting lists for services, and its budget is stretched to the limit. We are asking that you look very closely at the supplemental requests submitted by this Department.

Given time constraints, I'd like to address the top three requests. First, we are asking that the Department's budgeted vacancy factor of 7.1% be reduced to 5%. The vacancy factor represents the percentage of positions which must be held vacant to remain within budget. In the past year, the Department came within budget, but there are currently 75% fewer vacancies than a year ago and, as with the fire and police departments, a vacancy factor cannot be applied to the Department's residential programs which are staffed 24/7. This department cannot tolerate a 7.1% vacancy factor. We know of no other City agency with a vacancy factor approaching the Department's.

Another supplemental request is for City funding for the creation of a Safe Haven facility for unsheltered homeless individuals who cannot access the existing shelters due to their severe mental illness and sometimes co-occurring substance abuse issues. I have spoken with many of you about this urgent need. All of you were copied on the scores of letters sent by the community to support the creation of this facility. I have distributed to you tonight some of the excerpts from those letters. While HUD and Medicaid funding would pay for most of the on-going costs of the Safe Haven program, city match funds will be needed. The staff has recently completed its work on a proposal to be submitted to the City Manager for this project.

An average of 37 people per month are on the Department's waiting list for residential placement. The City's Five-Year Consolidated Plan identified the creation of housing for the safe haven population as a top priority and also called for the creation of five new CSB group homes. That plan is entering its final year and not one facility has been created.

Another supplemental request is for services for five students with mental retardation who are graduating from T.C. Williams next June and who will need supported or sheltered employment after graduation. Without these services, these students are at risk of regression that could later require more intensive – and more expensive – therapeutic intervention.

While recognizing that other important goals compete for City dollars, I ask that you remember the people this Department serves and keep in mind the words of the CSB's Ethics Consultant. In addressing how jurisdictions can apply an ethical approach to the allocation of scarce resources, he noted: "Resources must be allocated first to those who are the least advantaged. Budget decisions must be made that support services that continually improve the situation of those who are worst off."

Thank you.

**Excerpts from Letters Sent to City Council in May/June 2003
By Community Members Requesting the Establishment
Of a Safe Haven Facility for Chronically Homeless Individuals**

“Right now there is precious little being done to provide a helping hand to the chronic homeless of our City . . . they could easily be our fathers, brothers or sons . . . they need our compassion and help. . . They live in danger every day from violence, hunger and exposure. Establishing a Safe Haven could allow for an intensive treatment opportunity that could put the homeless back on track.”

– **Gregory Vogt, Hypothermia Coordinator, Blessed Sacrament**

As both a long-time resident of Alexandria and as Executive Director of a non-profit affordable housing organization that works in Alexandria, I know that the chronic street population in Alexandria is increasing and the City does not currently have a place where these individuals can be housed and receive the services they so desperately need.

– **Herb Cooper Levy, RPJ Housing**

For the past two winter seasons, I have served as the overnight volunteer coordinator for the Church of St. Clement’s Winter Shelter. I have been a resident of Alexandria since 1969. . . My experience with the St. Clement’s Overflow Winter Shelter indicates that many, if not most, of these individuals are Alexandria residents appearing year after year.

– **Harrison B. Williams, Hypothermia Coordinator, St. Clement’s**

Supporting a Safe Haven facility would demonstrate not only that you appreciate the responsibilities of civic governance, but – more importantly – would help to save the lives of some of our most vulnerable neighbors. Congress and the Administration have set a goal of ending chronic homelessness in 10 years. The development of a Safe Haven would truly help to ensure that this goal is met.

– **Steve Luteran, Executive Director, Catholic Charities of the Diocese of Arlington.**

Supportive housing for the chronically homeless population is desperately needed in Alexandria. . . the need for supportive housing will continue to increase as funding sources shrink and with the “rising tide of released inmates” as reported in a recent Washington Post article. The chronically homeless can turn their lives around once a secure, safe home is provided . . .”

– **Christopher A. Johnston, Executive Director, Catholics for Housing, Inc.**

A decision for permanent supportive housing would be consistent with the federal Healthy People 2010 goal to reduce the proportion of homeless adults who have serious mental illness (SMI). The midcourse report on this goal notes that “new approaches developed over the past 10 years provide ways to lower the number of persons who are homeless and who also have SMI. Using persistent patient outreach and engagement strategies, service providers are helping homeless persons with SMI connect with mainstream treatment systems. Treatment alone, however, is not enough. Once permanent housing is located, appropriate mental health and social supports can help persons with mental illness remain off the street.”

– **Lori Cooper, Chair, Alexandria Public Health Advisory Commission**

Our city has a sizeable and growing population of disenfranchised citizens who desperately need the involvement and support of their city to live safe and viable lives. Successfully accommodating this population makes our entire city a better place to live and work and is a moral imperative that must be met.

– **Meredith S. Wade, Alexandria Citizen**

Shortly after I arrived here, our Associate for Community Ministries told me about a gentleman who comes by from time to time looking for assistance, a gentleman who for various reasons is not permitted to come to Carpenter's Shelter. He immediately came to mind when I heard of the CSB proposal to create a Safe Haven. I'm sure that this gentleman spends many nights on the street, and it saddens me that our city does not have a place for him to call home. I know that the type of people that would be housed in a Safe Haven make many of us nervous. Many people with severe mental illness or substance abuse issues are difficult to be around. But they are nevertheless citizens of our city . . . I strongly believe we have a responsibility to try to meet their needs.

– **Ann Herlin, Associate Pastor, Old Presbyterian Meeting House**

In June 1993, David's Place opened its doors as a day program for chronically homeless individuals. . . This day program is named in honor of the biblical David, who conquered the giant, Goliath, because the people served have so many Goliaths in their own lives to conquer. As one of the founders of David's Place, I well remember how difficult it was to receive approval for this program. The chances for success seemed remote at times, but now it is a model program for Alexandria's unsheltered homeless individuals. . . As our Mayor and Council Members, you have a rare opportunity to change the lives of these struggling people who have no voice, but whose needs are extraordinary.

– **Catherine C. Thompson, David's Place co-founder**

This help is critical for a group of people who lead desperate lives now, but with City assistance, may be restored to a normal existence. If they are left to their own means, most are on a downward path. Please take this humane action.

– **Don and Doris Mela, Alexandria citizens and community volunteers**

As a direct service volunteer and member of the Virginia Coalition for the Homeless for some twenty years, I have seen the trauma of life on the streets for the mentally ill. I have seen the results of abuse and injury, and mourned those who died from violence or neglect. I have also witnessed the healing process when safe housing and supportive services are in place. – **Sue Capers, Virginia Coalition for the Homeless**

CSB has a proven 30-year track record of managing and operating residential properties for consumers with mental health, mental retardation, and substance abuse issues. Their current inventory includes 10 group homes and 172 beds in 53 condominiums and apartments. This wealth of experience and competence will be invaluable in accessing HUD funding for the facility . . . I strongly urge Council and the City to be proactive in their efforts to address the needs of Alexandria's most vulnerable citizens.

– **Barbara A. Gilley, Member, Virginia Board for People with Disabilities & Chair, Alexandria Commission on Persons with Disabilities**

BFAAC TESTIMONY ON FY 2005 BUDGET OUTLOOK

The Budget and Fiscal Affairs Advisory Committee (or BFAAC) appreciates the opportunity to present its preliminary views on the preparation of the FY 2005 budgets. We also want to take this opportunity to applaud the City's effort to hold this public hearing and urge you to continue the practice of public involvement in the budget process through hearings such as this.

BFAAC commends you for the strategic planning initiative undertaken by the Council earlier this month. In particular, the vision of an Alexandria City Government that is "financially sustainable" through sound fiscal management and long-term planning is consistent with BFAAC's observations and recommendations now and in past years.

BFAAC believes that the coming year's budget situation will be similar to what the City faced last year. Even absent new initiatives, the operating budget will face challenges of increased personnel costs coupled with continued capital costs (both debt service and cash capital); the CIP faces the prospect of continued project requests and uncertainty in the total costs of projects underway or in the pipeline.

BFAAC has consistently emphasized two themes in its advice to Council. The first is the importance of establishing and adhering to sound financial policies and procedures. The second is the importance of keeping a long-term perspective. BFAAC believes these concepts will continue to be important touchstones as next year's budgets are developed and deliberated. Specifically, BFAAC offers the following four general recommendations:

1. The City should keep one eye on the future as it works to meet next year's budget challenges. Decisions made in the context of FY2005 should be sustainable in future years.

As BFAAC said in its last Annual Report to Council, we are concerned that recurring revenues may not keep pace with recurring operating expenditures. In addition, there is not much room ~~in~~ under the City's debt policy guidelines to add new capital projects and increase CIP spending in future years.

Over the longer term, BFAAC is concerned that the City is especially vulnerable to economic downturns that affect the real property tax base, given that nearly 52 percent of the City's revenue comes from real property taxes.

2. The City should explore ways to diversify its revenue sources in an equitable fashion.

The Governor's proposed tax reform plan presents some new revenue opportunities for the City. The City needs to continue to look at available areas for diversification. Along those lines, we continue to urge the City to review the reasonableness of all City fees, including adoption of a formal policy for their periodic re-evaluation.

3. The Council should pay close attention to employee compensation issues, which are key drivers of the City's budget.

Employee benefits and salaries continue to account for about 71% of the City's general fund operating budget (64% of all funds). The effects of cost-of-living and performance increases combined with anticipated increases in the cost of health insurance benefits for employees and retirees deserves particular attention. Recent changes in the Virginia Retirement System (VRS) will increase the City's mandatory contribution to the system.

4. The City should continue to adhere to its current debt policy guidelines.

These guidelines include limits on borrowing that ensure the City has sufficient future resources to pay off its debts and protect its favorable bond rating. Council has charged BFAAC with studying the city's debt policy guidelines and making recommendations to ensure the City maintains its comparability with other double-triple A rated jurisdictions. While the BFAAC research and analysis in this area is ongoing, preliminary subcommittee work indicates that the current city debt policy guidelines are generally adequate and should remain in place with only modest changes, if any.

Kleber Masterson
Historic Alexandria Resources Commission

Box 178, City Hall
Alexandria, Virginia 22313
(703) 838-4554



Alexandria, Virginia



November 25, 2003

The Honorable William D. Euille, Mayor
Members of City Council
City Hall
301 King Street
Alexandria, Virginia 22314

Dear Mayor Euille and City Council Members:

The Historic Alexandria Resources Commission, consisting of 23 residents of Alexandria, requests that the Mayor and City Council increase the operating budget of the Office of Historic Alexandria by \$50,000 to pay for necessary maintenance and repair at 10 historic sites and museums within the department. A recent decision to require that OHA pay for maintenance repairs which are under \$5000, at each site, has necessitated that the use of previously allocated funds for exhibition work, supplies for school programs, and other direct program-related costs be curtailed or decreased. This motion was passed unanimously in a vote at our November 18 meeting. A letter which addresses the details of this request is attached.

Additionally, the Historic Alexandria Resources Commission unanimously supports the request by the Lee Fendall House for funding in the FY 05 budget for urgent repairs to the primary support beam in this historic house museum.

Sincerely yours,

Kleber S. Masterson
Kleber S. Masterson, Jr.
Chair

cc: Phil Sunderland, City Manager

Historic Alexandria Resources Commission

*Box 178, City Hall
Alexandria, Virginia 22313
(703) 838-4554*



Alexandria, Virginia



November 25, 2003

The Honorable William D. Euille, Mayor
Members of City Council
City Hall
301 King Street
Alexandria, Virginia 22314

Dear Mayor Euille and City Council Members:

The Office of Historic Alexandria is responsible for the stewardship and promotion of the historic City through the preservation of the City's historic and archaeological sites, artifacts and records, and for the use of these resources in accordance with professional standards of scholarship and museum procedures.

There are ten separate individual buildings and sites which form the Office of Historic Alexandria. They are:

- Alexandria Archaeology Museum, located at the Torpedo Factory Art Center;
- the Archives and Records Center;
- the Alexandria Black History Resource Center and the Watson Reading Room (2 buildings);
- Gadsby's Tavern Museum;
- Fort Ward Museum and the adjacent Fort Ward Historic Site (2 sites);
- The Lyceum;
- Friendship Firehouse; and
- Lloyd House.

Please realize that each of these sites and its related collections have unique requirements for stewardship, and often expensive maintenance needs. In the last several years, OHA has been asked to take on, as an unfunded mandate, payment for maintenance-related needs at each one of these properties for items which cost under \$5000. This has been quite difficult, and each such maintenance requirement diverts funds from budgeted programs and activities. This funding requirement would be difficult to accommodate for modern buildings; the higher maintenance demands of old buildings makes it even more difficult. Accordingly, HARC recommends that City Council appropriate an added \$50,000 for the maintenance of these properties (an average of \$5,000 each) so that we can be assured that the standard of care is not relaxed, and that our properties and collections continue to receive the best possible stewardship.

While we believe that the City should maintain these properties for their intrinsic historic value alone, we also believe that it is in the City's interest that visitors see that we have a very high standard of stewardship. Further, our historic sites and artifacts are a major part of the City's attraction as a tourist destination, and as such they directly impact City revenue in the form of retail, restaurant and lodging taxes.

We are remarkably blessed to be the custodians of these marvelous sites, and are proud of the manner in which the City has developed and maintained them. That three of these sites are accredited by the American Association of Museums is one manifestation of that fine stewardship. HARC looks forward to working with the City Council in continued support of historic sites and programs.

Sincerely yours,

A handwritten signature in black ink that reads "Kleber S. Masterson, Jr." with a stylized flourish at the end.

Kleber S. Masterson, Jr.
Chair

cc: Phil Sunderland, City Manager

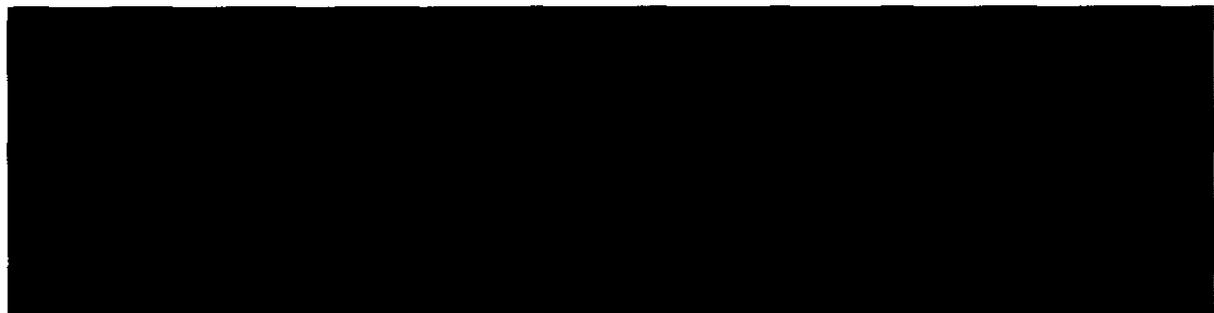
24
11-25-03



<greuter@asisonline.org>
11/24/2003 09:47 AM
Please respond to greuter

To: <alexvamayor@aol.com>, <delpepper@aol.com>, <council@joycewoodson.net>, <councilmangaines@aol.com>, <rob@krupicka.com>, <macdonaldcouncil@msn.com>, <paulcsmedberg@aol.com>, <rose.boyd@ci.alexandria.va.usi>, <jackie.henderson@ci.alexandria.va.us>

cc:
Subject: City of Alexandria Website Contact Us - EMail for Mayor, Vice-Mayor and Council Members (alexvamayor@aol.com, delpepper@aol.com, council@joycewoodson.net, councilmangaines@aol.com, rob@krupicka.com, macdonaldcouncil@msn.com, paulcsmedberg@aol.com, rose.boyd@ci.alexandria.va.usi, jackie.henderson@ci.alexandria.va.us)



Time: [Mon Nov 24, 2003 09:47:17] IP Address: [65.117.186.210]

Response requested: []

First Name: Gayle

Last Name: Reuter

Street Address: 110 E. Del Ray Avenue

City: Alexandria

State: VA

Zip: 22301

Phone: 703-684-3535

Email Address: greuter@asisonline.org

Comments: Re: Upcoming Fiscal Year 2005 Budget

Dear Mayor Euille & Members of City Council,

Thank you for the opportunity to speak on the Fiscal Year 2005 Budget. While I know you have some very difficult choices ahead of you, I did want to express my support for several items important to me.

1) Full Funding for the School Budget including the funding for the new Green TC Williams High School. Our kids are our future and need to be given top priority.

2) Continued and full funding for the Arlandria Plan and any new funding requests that comes from the recommendations of the Mt. Vernon Study Group.

3) Funding for maintaining and improving Bus Shelters - I believe the upkeep of these are critical if we are serious about supporting the use of mass transit.

Thanks for taking these items under consideration and thanks for your willingness to serve this wonderful City that we all love so dearly.

With sincere regards and wishes to everyone for a very safe and Happy Thanksgiving.

Gayle Reuter
110 E. Del Ray Avenue
Alexandria, VA 22301

24
11-25-03



Ginny Hines Parry
<ghparry@fortebrio.com
>

11/25/2003 10:46 AM

To: Del Pepper <delpepper@aol.com>, Joyce Woodson
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<bdetter@pointoneinc.com>, Brian Detter <brdetter@aol.com>, Lynn
Smith <mlynsmith@comcast.net>
Subject: Item #24, 11/25/03 City Council Docket

November 25, 2003

The Honorable Mayor and Members of City Council
City Hall
301 King Street
Alexandria, VA 22314

RE: Item #24, 11/25/03 City Council Docket

Dear Mayor and Members of City Council:

Alexandrians for Sensible Growth (ASG) very much appreciates this opportunity to provide input into the development of the FY2004-2005 city operating and capital improvements budget. ASG is very much interested in quality of life issues that directly impact citizens and their neighborhoods. With that in mind, we urge City Council to give high priority to funding two items.

1. Infill Development Study

The Department of Planning and Zoning should be given adequate funding to complete a study of infill development and other high priority land use studies. The intensity of discussion around the Quaker Ridge project shows how critical it is to be proactive in assessing how redevelopment of our unique residential neighborhoods into more dense communities will impact traffic and livability in Alexandria. Full and immediate funding for these studies is essential to the city's ability to properly plan infill developments.

2. Citizens and Neighborhood Liaison Staff Position

ASG, since its inception, has advocated for a city staff position to help civic associations and citizens be alerted to and address development projects that will directly affect their neighborhoods. The City Manager has recently reorganized his office to include a staff person whose sole responsibility is to help developers and small businesses navigate through the rules and regulations of various city departments. Citizens and civic associations likewise should have a dedicated staff person -- a Citizens and Neighborhood Liaison -- in the Department of Planning and Zoning. The Liaison will act as the point of contact and coordination between citizens and civic associations and the Departments of Planning and Zoning and Transportation and Environmental Services.

The Quaker Ridge project most recently illustrated how well informed citizens need to be about development projects in their neighborhoods. Just as the development community now has an advocate on staff, citizens and

civic associations also need a city staff person to assist and guide them through the rules and regulations of city government. Moreover, developers are able to pay for private representation yet now have a designated city staff person assisting them; individual citizens and civic associations simply don't have the financial resources that most developers can bring to bear on the problem at hand.

Eisenhower Valley developers have had city support of their interests through annual city contributions of \$25,000 to the Eisenhower Partnership. The Partnership is now a well-established entity working on behalf of the landowners, developers and residents in the Valley. The membership includes multimillion dollar enterprises that could easily handle, to say the least, a trivial increase in fees to compensate for the absence of this contribution from the city. The \$25,000 earmarked for the Eisenhower Partnership should be reallocated to fund the Citizens and Neighborhood Liaison position.

City Council is urged to fund both of these quality of life budget items next year. ASG very much appreciates City Council's efforts to fund these requests.

Sincerely,

Ginny Hines Parry, President
Alexandrians for Sensible Growth