



Richmond City Council

The Voice of the People

Richmond, Virginia

Office of the Council Chief of Staff

Education & Human Services Standing Committee

April 9, 2026

Prep Document for Committee Members

Previous Meeting: March 12, 2026

Next Meeting: May 14, 2026

Legistar Link: [City of Richmond - Meeting of Education and Human Services Standing Committee on 4/9/2026 at 2:00 PM](#)

Presentation:

- Human Rights Commission Overview –Samantha Galina, HRC Chair
- Richmond and Henrico Health Districts (RHHD) Services Overview – Dr. Elaine Perry, Director

Discussion Items

- RPS Updates: Jason Kamras, Superintendent
- DCAO HS Report: Amy Popovich, DCAO for Human Services

Papers for Consideration

- [none]

Outstanding Follow-Up Items/Reminders

- CM Breton requested OCF review available state and regional data on enrollment of children aged 0-5 in non-public settings. Still awaiting information. (2/12) **
- CM Lynch requested OCF share data on the City's penetration rate for Head Start slots and other ECE subsidies. Still awaiting information. (2/12) **
- CAO Donald shared a written version of his update on Res. 2025-R023 including the general structure of the funding formula itself, a summary of progress, and a timeline for future analysis. (3/12)

Next Meeting Preview (Thu, 5/14)

Presentations:

- Future of Workforce Commission
- DNCS on Inclement Weather Shelter overview

Human Rights Commission Overview

Notes on Presentation:

Slide / Topic	Key Takeaways
Slide / Topic	Key Takeaways / Talking Points
Slide 1 – Overview	Intro to HRC leadership + purpose of briefing
Slide 2 – Mission	Protects residents from discrimination across protected classes → aligns with equity priorities
Slide 3 – History	Established in 2018 → still building operational capacity
Slide 4 – Community Engagement	Increased visibility via events + social media; goal is greater public awareness
Slide 5 – Research & Policy	Building infrastructure: partner survey, directory, benchmarking other cities
Slide 6 – Intake & Investigation	Developing enforcement ordinance + intake process; coordinating with City Attorney + peers
Slide 7 – HRC Inquiry Data	70% within City jurisdiction; top issues: disability (35%), sex (24%), race (24%) → clear demand
Slide 8 – Statewide Comparison	Richmond is advisory only; peer jurisdictions have enforcement authority
Slide 9 – Enforcement Ordinance	Core ask is to = shift to enforcement-capable body (investigation, conciliation, recommendations; resource-dependent)

Potential Questions:

- On slide 7, with 70% of complaints falling within City jurisdiction, what currently happens to these cases without enforcement authority?
- On slides 6 and, what is the timeline for bringing forward the enforcement ordinance?
- On slide 8, what staffing and budget levels are required for Richmond to operate comparably to enforcement-capable jurisdictions?
- We are aware that administration did not include the requested budget increase for the Human Rights Commission. What is the minimum level of funding needed to meaningfully advance enforcement capacity, and what specifically would that fund (staffing vs. interpretation)?
- On slide 4, how will increased awareness efforts translate into measurable outcomes (e.g., increased reporting, resolution of cases)?

RHHD Overview

Notes on Presentation:

Slide / Topic	Key Takeaways
Slides 1–2 – Mission/Vision	Equity + partnerships are central → aligns with Council priorities on disparities and community-based solutions
Slide 3 – Operations / Footprint	1 main site, 6 resource centers, 2 WIC sites; ~15 vacancies out of 115 positions → potential service gaps
Slide 5 – Public Health Framework	Broad scope: disease control, maternal health, environmental health, access to care; includes policy + emergency response (not just clinics)
Slide 6 – Metrics / Performance	WIC slightly down but stabilizing; food inspections + clinic visits trending up toward FY27 targets
Slides 8–9 – Community Needs (CHA)	Top concerns: violence (35%), chronic disease (32%), mental health (32%); also cost of living + food access
Slides 9–10 – CHIP Priorities	Focus areas: mental health, violence prevention, chronic disease → strong alignment with Council priorities
Slide 12 – Budget Overview	\$14.5M total; City ≈ \$4.6M (~32–34%); majority state/federal → local dollars leverage external funding
Slide 13 – Local Funds Use	City funds targeted programs: violence prevention, housing advocacy, resource centers, tobacco cessation
Slide 14 – Spending Breakdown	41% foundational (admin/infrastructure); remainder across disease prevention + maternal health → system-heavy model

Potential Questions:

- On slides 12/13, what level of state/federal funding is contingent on the City's local match, and could additional local investment unlock more external dollars?
- On slide 3, what positions make up the ~15 vacancies, and how are these gaps impacting service delivery?
- On slides 9/10, what specific, measurable outcomes are tied to the three priority areas (violence, mental health, chronic disease)?
- On slides 13/14, which locally funded programs (e.g., violence prevention, resource centers) are showing the strongest outcomes relative to investment?