


County of Jefferson
Office of the County Administrator



Historic Courthouse
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Watertown, NY 13601-2567
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October 31, 2019

TO: Members of Health & Human Services

FROM: Robert F. Hagemann, III, County Administrator 

SUBJECT: Health & Human Services Committee Agenda

Please let this correspondence serve as notification that the Health & Human Services Committee will meet on **Wednesday, November 6, 2019 at 6:00 p.m.** in the Board of Legislators' Chambers. Following is a list of agenda items for the meeting:

Resolutions:

1. Amending the 2019 County Budget Relative to DSRIP Funding for Community Services Department
2. Authorizing Agreement for Provision of Related Services in Connection with the Program for Preschool Children with Disabilities
3. Appointing and Re-Appointing Members to Jefferson County Public Health Service Health Services Advisory Board
4. Re-Appointing Members to Jefferson County Public Health Service Professional Advisory Committee
5. Authorizing Agreement with Wellsky Home Health and Hospice Corporation (PPS Plus and Benchmark Plus Software) Relative to an OASIS Auditing Software Program
6. Establishing Compensation for Temporary Professional Employees Employed in Connection with the County Rabies Program Vaccination Clinic
7. Amending 2019 Comprehensive Planning Resource Allocation Agreement with the New York State Office of Children & Family Services and Authorizing Amended Contractual Youth Program Agreements in Relation Thereto

Informational Items:

1. Monthly Departmental Reports:
 - Office for Aging
 - Community Services
 - Public Health
 - Veterans Service Agency

If any Committee Member has inquiries regarding agenda items, please do not hesitate to contact me.

RFH:jdj

cc: Office for Aging
Community Services
Public Health
Social Services
Veterans Service Agency
County Attorney
County Treasurer

JEFFERSON COUNTY BOARD OF LEGISLATORS
Resolution No. _____

Amending the 2019 County Budget Relative to DSRIP Funding
for Community Services Department

By Legislator: _____

Whereas, By Resolution No. 75 of 2016 Jefferson County entered into a contract with North Country Initiative for the Delivery System Reform Incentive Payment Program (DSRIP), and

Whereas, By Resolutions No. 84, 115 and 189 of 2017, No. 104, 200 and 237 of 2018, and No. 101 of 2019 DSRIP funding for Community Services was received and allocated for training, and

Whereas, A DSRIP Year 4 high performance incentive payment #2 has been received in the amount of \$476.04 and needs to be recognized and allocated for training.

Now, Therefore, Be It Resolved, That the 2018 County Budget is hereby amended as follows:

Increase:

Revenue		
01431000 93488	State Aid Other Health	\$476.04
Expenditure		
01431000 04613	Training	\$476.04

Seconded by Legislator: _____

State of New York)
) ss.:
County of Jefferson)

I, the undersigned, Clerk of the Board of Legislators of the County of Jefferson, New York, do hereby certify that I have compared the foregoing copy of Resolution No. _____ of the Board of Legislators of said County of Jefferson with the original thereof on file in my office and duly adopted by said Board at a meeting of said Board on the _____ day of _____, 20____ and that the same is a true and correct copy of such Resolution and the whole thereof.

In testimony whereof, I have hereunto set my hand and affixed the seal of said County this _____ day of _____, 20____.

Clerk of the Board of Legislators

JEFFERSON COUNTY BOARD OF LEGISLATORS
Resolution No. _____

Authorizing Agreement for Provision of Related Services
in Connection with the Program for Preschool Children with Disabilities

By Legislator: _____

Whereas, The Program for Preschool Children with Disabilities provides a variety of related services to children aged three to five years with certain disabilities, such services to be provided in the least restrictive environment, be it home or agency based, and

Whereas, Chapter 243 of the Laws of 1989 requires that counties maintain a list of appropriately certified or licensed professionals to deliver related services to preschool children with disabilities and set a reasonable reimbursement rate for such services, subject to the approval of the New York State Education Department, and

Whereas, By Resolution No. 81 of 2019 Jefferson County authorized agreements with providers for the provision of related services and set rates, and

Whereas, An agreement for an additional provider needs to be authorized.

Now, Therefore, Be It Resolved, That, pursuant to Section 4410 of the Education Law, Jefferson County enter into an agreement with the following party for the provision of the indicated service(s). The term of said agreement shall be for the period November 12, 2019 through June 30, 2020 in accordance with the requirements of the State Education Law and regulations:

<u>Provider</u>	<u>Service</u>
Carthage Area Hospital	Occupational Therapy Physical Therapy Speech Therapy

and be it further

Resolved, That the Chairman of the Board of Legislators is hereby authorized to execute such agreement on behalf of Jefferson County with the approval of the County Attorney as to form and content.

Seconded by Legislator: _____

JEFFERSON COUNTY BOARD OF LEGISLATORS

Resolution No. _____

Appointing and Re-Appointing Members to Jefferson County Public Health Service
Health Services Advisory Board

By Legislator: _____

Resolved, That the following individuals be and are hereby appointed and re-appointed as members of the Jefferson County Health Services Advisory Board for terms to expire as indicated below:

<u>Members</u>	<u>Term to Expire</u>
<u>Appointments:</u>	
Richard A. Duvall	12/31/2022
<u>Re-Appointments:</u>	
Donna R. Grant	12/31/2022
Denise K. Young	12/31/2022

Seconded by Legislator: _____

State of New York)
) ss.:
County of Jefferson)

I, the undersigned, Clerk of the Board of Legislators of the County of Jefferson, New York, do hereby certify that I have compared the foregoing copy of Resolution No. _____ of the Board of Legislators of said County of Jefferson with the original thereof on file in my office and duly adopted by said Board at a meeting of said Board on the _____ day of _____, 20____ and that the same is a true and correct copy of such Resolution and the whole thereof.

In testimony whereof, I have hereunto set my hand and affixed the seal of said County this _____ day of _____, 20____.

Clerk of the Board of Legislators

JEFFERSON COUNTY BOARD OF LEGISLATORS
Resolution No. _____

Re-Appointing Members to Jefferson County Public Health Service
Professional Advisory Committee

By Legislator: _____

Resolved, That the following individuals be and are hereby re-appointed as members of the Professional Advisory Committee for terms to expire as indicated below:

<u>Members</u>	<u>Term to Expire</u>
<u>Re-Appointments:</u>	
Denise K. Boyer	12/31/2023
Julie C. Burgenstock	12/31/2023
Stephen R. Joels	12/31/2023
Kim T. Monroe	12/31/2023

Seconded by Legislator: _____

State of New York)
) ss.:
County of Jefferson)

I, the undersigned, Clerk of the Board of Legislators of the County of Jefferson, New York, do hereby certify that I have compared the foregoing copy of Resolution No. _____ of the Board of Legislators of said County of Jefferson with the original thereof on file in my office and duly adopted by said Board at a meeting of said Board on the _____ day of _____, 20____ and that the same is a true and correct copy of such Resolution and the whole thereof.

In testimony whereof, I have hereunto set my hand and affixed the seal of said County this _____ day of _____, 20____.

Clerk of the Board of Legislators

JEFFERSON COUNTY BOARD OF LEGISLATORS
Resolution No. _____

Authorizing Agreement with Wellsky Home Health and Hospice Corporation
(PPS Plus and Benchmark Plus Software) Relative to an
OASIS Auditing Software Program

By Legislator: _____

Whereas, Outcome and Assessment Information Set (OASIS) questions are a required component of evaluations and are linked to patient acuity and reimbursement, and

Whereas, Per Resolution No. 66 of 2017, this Board authorized an agreement with CKS Productions, Inc d/b/a PPS Software, and

Whereas, PPS software identifies clinical and financial inconsistencies, reduces non-identified problems, prevents outcome measure declines, produces savings and enhances revenue, and

Whereas, Said application is a special professional product and is 100% allowable within home health cost reports and reimbursement rates, and

Whereas, The cost of the software and services is \$497/month, or \$5,964 annually for a 3 year period and shall require a separate contract with the County.

Now, Therefore, Be It Resolved, That Jefferson County renew an agreement with Wellsky Home Health and Hospice Corporation (PPS Plus and Benchmark Plus Software) for the purposes stated above during the period of January 15, 2020 through January 14, 2023, and be it further

Resolved, That the Chairman of the Board of Legislators be and is hereby authorized and directed to execute said agreement on behalf of Jefferson County with the approval of the County Attorney as to form and content.

Seconded by Legislator: _____

State of New York)
) ss.:
County of Jefferson)

I, the undersigned, Clerk of the Board of Legislators of the County of Jefferson, New York, do hereby certify that I have compared the foregoing copy of Resolution No. _____ of the Board of Legislators of said County of Jefferson with the original thereof on file in my office and duly adopted by said Board at a meeting of said Board on the _____ day of _____, 20____ and that the same is a true and correct copy of such Resolution and the whole thereof.

In testimony whereof, I have hereunto set my hand and affixed the seal of said County this _____ day of _____, 20____.

Clerk of the Board of Legislators

JEFFERSON COUNTY BOARD OF LEGISLATORS
Resolution No. _____

Establishing Compensation for Temporary Professional Employees
Employed in Connection with the County Rabies Program Vaccination Clinic

By Legislator: _____

Whereas, A total of twelve rabies vaccination clinics are held in the months of March through June and September through October – six at the County Dog Shelter and six community-based, and

Whereas, Each clinic is two hours, and includes a veterinarian, and staff from the Public Health Department and Dog Control.

Now, Therefore, Be it Resolved, That the compensation rate to be paid during 2020 and 2021 to temporary Veterinarians employed in connection with the County Rabies Vaccination Clinic shall be \$75.00 per hour.

Seconded by Legislator: _____

State of New York)
) ss.:
County of Jefferson)

I, the undersigned, Clerk of the Board of Legislators of the County of Jefferson, New York, do hereby certify that I have compared the foregoing copy of Resolution No. _____ of the Board of Legislators of said County of Jefferson with the original thereof on file in my office and duly adopted by said Board at a meeting of said Board on the _____ day of _____, 20____ and that the same is a true and correct copy of such Resolution and the whole thereof.

In testimony whereof, I have hereunto set my hand and affixed the seal of said County this _____ day of _____, 20____.

Clerk of the Board of Legislators

JEFFERSON COUNTY BOARD OF LEGISLATORS
Resolution No. _____

Amending 2019 Comprehensive Planning Resource Allocation Agreement with
the New York State Office of Children & Family Services and Authorizing Amended
Contractual Youth Program Agreements in Relation Thereto

By Legislator: _____

Whereas, Pursuant to Resolution No. 44 of 2019 this Board authorized a 2019 Comprehensive Planning Resource Allocation Agreement with the NYS Office of Children & Family Services (OCFS), and

Whereas, there are unallocated 2019 OCFS funds in the amount of \$13,000 due to the inability of a program to initiate services within the allotted time frame (Watertown YMCA/Girls on the Run), and therefore a total of \$13,000 can be distributed to other Youth Development Programs, and

Whereas, The 2019 Resource Allocation Plan and agreements with contractual agencies need to be amended to reflect those changes.

Now, Therefore, Be It Resolved, That the 2019 Comprehensive Planning Resource Allocation Agreement with the NYS Office of Children & Family Services is hereby amended to reflect the following modified grant funding:

Youth Development Program (YDP)

<u>Agency/Program</u>	<u>Original State Aid Allocation</u>	<u>Increase/ Decrease</u>	<u>Revised State Aid Allocation</u>
Children's Home of Jefferson County/ Teen Center	\$11,000	6,500	\$17,500
Hearts for Youth, Inc./Hearts for Youth	10,500	6,500	17,000
Watertown YMCA/Girls on the Run	13,000	13,000	(0)

Resolved, That Pursuant to Section 450 of County Law, the Chairman of the Board of Legislators be and is hereby authorized to execute necessary amended contractual Youth Program Agreements with the various agencies on behalf of Jefferson County, subject to the review and approval of the County Attorney as to form and content.

Seconded by Legislator: _____

**Office for the Aging Monthly Report to
The Health and Human Services Committee
2019**

September 2019 Data:

	Jan.	Feb.	Mar.	Apr	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.
Total No. of Home Delivered Meals Provided:	8807	8320	8209	8703	9085	8500	9928	9716	9665			
Total No. of Congregate Meals Served:	1718	1646	1801	1783	1801	1572	2107	1764	1605			
Total No. of Clients Receiving Meals:	551	542	546	525	553	496	580	537	641			
Number of Clients Receiving Home Care/Case Mgt.:	115	120	126	133	130	127	120	132	128			
Number of Individuals Receiving Health Insurance Counseling:	102	95	102	72	102	95	94	80	101			
Number of Clients Coming Directly Into the Office:	104	99	106	85	111	120	360	168	319			
Number of NY Connects Contacts:	130	155	188	149	184	158	172	236	237			

Outreach Events:

1. 9/9/19—Curtis Apartments: OFA & NY Connects Services
2. 9/23/19—Service Fair, in cooperation with AmeriCU, VTC, CAPC

Senior Nutrition Meal Program: Total number of Home Delivered and Congregate meals served in September: 11270

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2019 COMMUNITY SERVICES OFFICE EXPENSE/REVENUE REPORT

10/10/2019

<u>PROGRAM</u>	<u>JAN</u>	<u>FEB</u>	<u>MAR</u>	<u>APR</u>	<u>MAY</u>	<u>JUNE</u>	<u>JULY</u>	<u>AUG</u>	<u>SEPT</u>	<u>OCT</u>	<u>NOV</u>	<u>DEC</u>	<u>TOTALS Y-T-D</u>	<u>TOTAL BUDGET</u>	<u>BALANCE AVAILABLE</u>	<u>% USED</u>
EARLY INTERV.																
EXPENSES	\$0	\$229	\$46,295	\$10,770	\$23,015	\$18,578	\$37,241	\$28,073	\$27,263				\$191,464	\$430,000	\$238,536	44.53%
REVENUES	\$0	\$2,926	\$1,176	\$350	\$1,120	\$49,190	\$12,032	\$686	\$700				\$68,180	\$238,787	\$170,607	28.55%
PRESCHOOL																
EXPENSES	\$0	\$101,180	\$430,199	\$328,436	\$406,526	\$190,196	\$445,146	\$440,621	\$249,571				\$2,591,875	\$5,025,000	\$2,433,125	51.58%
REVENUES	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0				\$0	\$3,048,375	\$3,048,375	0.00%
OPWDD																
EXPENSES(ADMIN)	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0				\$0	\$13,866	\$13,866	0.00%
REVENUES	\$1,560	\$3,000	\$0	\$0	\$1,560	\$1,560	\$0	\$0	\$0				\$7,680	\$6,933	(\$747)	110.77%
OASAS																
EXPENSES	\$117,810	\$80,744	\$68,573	\$353,728	\$692,116	\$72,571	\$87,390	\$350,363	\$91,065				\$1,914,360	\$3,128,887	\$1,214,527	61.18%
REVENUES	\$659,943	\$101,714	\$588,018	\$0	\$173,643	\$674,835	\$0	\$0	\$271,363				\$2,469,516	\$2,938,041	\$468,525	84.05%
OMH																
EXPENSES	\$49,642	\$501,768	\$129,664	\$283,498	\$219,747	\$408,610	\$288,919	\$178,773	\$110,187				\$2,170,808	\$3,559,857	\$1,389,049	60.98%
REVENUES	\$827,928	\$0	\$0	\$828,017	\$0	\$46,250	\$834,029	\$0	\$826,992				\$3,363,216	\$3,280,227	(\$82,989)	102.53%
TOTAL EXPENSES	\$167,452	\$683,921	\$674,731	\$976,432	\$1,341,404	\$689,955	\$858,696	\$997,830	\$478,086	\$0	\$0	\$0	\$6,868,507	\$12,157,610	\$5,289,103	56.50%
TOTAL REVENUES	\$1,489,431	\$107,640	\$589,194	\$828,367	\$176,323	\$771,835	\$846,061	\$686	\$1,099,055	\$0	\$0	\$0	\$5,908,592	\$9,512,363	\$3,603,771	62.11%

OPWDD= OFFICE OF PEOPLE WITH DEVELOPMENTAL DISABILITIES
OASAS= OFFICE OF ALCOHOL AND SUBSTANCE ABUSE SERVICES

OMH= OFFICE OF MENTAL HEALTH

Jefferson County Public Health Service Home Health Care Statistical Performance*
For the Nine Months Ended September 30, 2019

REFERRALS				MTD	YTD	2019	Amount of	Percent
	2016	2017	2018	Actual	Actual	Annualized	Change	Change
CHHA	1,669	1,908	1,972	123	1,413	1,884	-88	-4.46%
PREVENT	142	55	1	0	3	4	3	300.00%
Rabies	0	0	0	0	0	0	0	0.00%
Communicable Disease	2,899	3,757	4,785	351	4,475	5,967	1,182	24.70%
Newborn Screening	9	6	5	1	5	7	2	33.33%
PREVENT Sub-Total	3,050	3,818	4,791	352	4,483	5,977	1,186	24.76%
GRAND TOTAL	4,719	5,726	6,763	475	5,896	7,861	1,098	16.24%
AVERAGE DAILY CENSUS				MTD	YTD	2019	Amount of	Percent
	2016	2017	2018	Actual	Actual	Annualized	Change	Change
CHHA	216	214	206	154	173	173	-33	-15.42%
PREVENT	15	4	1	0	2	2	1	13.89%
Rabies	0	0	0	0	0	0	0	0.00%
PREVENT Sub-TOTAL	15	4	1	0	2	2	1	13.89%
GRAND TOTAL	231	218	207	154	175	175	-32	-15.67%
VISITS				MTD	YTD	2019	Amount of	Percent
	2016	2017	2018	Actual	Actual	Annualized	Change	Change
CHHA								
Skilled Nursing	12,850	13,879	12,850	709	7,602	10,136	-2,714	-21.12%
Physical Therapy	3,267	3,321	3,579	353	3,381	4,508	929	25.96%
Speech Therapy	83	61	0	0	0	0	0	0.00%
Medical Social Worker	547	665	696	61	548	731	35	4.98%
Occupational Therapy	713	636	805	53	482	643	-162	-20.17%
Nutrition	157	173	131	8	107	143	12	8.91%
Home Health Aide	7,691	6,412	5,035	314	3,484	4,645	-390	-7.74%
Personal Care Aide	2,465	958	42	0	0	0	-42	-100.00%
Sub-TOTAL	27,773	26,105	23,138	1,498	15,604	20,805	-2,333	-10.08%
PREVENT								
Skilled Nursing	540	34	26	0	37	49	23	89.74%
Physical Therapy	0	0	0	0	0	0	0	0.00%
Speech Therapy	0	0	0	0	0	0	0	0.00%
Medical Social Worker	27	0	0	0	0	0	0	0.00%
Occupational Therapy	0	0	0	0	0	0	0	0.00%
Nutrition	0	0	0	0	0	0	0	0.00%
Home Health Aide	0	0	1	0	0	0	-1	-100.00%
Personal Care Aide	0	0	0	0	0	0	0	0.00%
Sub-TOTAL	567	34	27	0	37	49	22	82.72%
TOTAL VISITS								
Skilled Nursing	13,390	13,913	12,876	709	7,639	10,185	-2,691	-20.90%
Physical Therapy	3,267	3,321	3,579	353	3,381	4,508	929	25.96%
Speech Therapy	83	61	0	0	0	0	0	0.00%
Medical Social Worker	574	665	696	61	548	731	35	4.98%
Occupational Therapy	713	636	805	53	482	643	-162	-20.17%
Nutrition	157	173	131	8	107	143	12	8.91%
Home Health Aide	7,691	6,412	5,036	314	3,484	4,645	-391	-7.76%
Personal Care Aide	2,465	958	42	0	0	0	-42	-100.00%
GRAND TOTAL	28,340	26,139	23,165	1,498	15,641	20,855	-2,310	-9.97%
PARAPROFESSIONAL HOURS*				MTD	YTD	2019	Amount of	Percent
	2016	2017	2018	Actual	Actual	Annualized	Change	Change
AGENCY CHHA								
Home Health Aide	3,828	3,146	3,190	212	2,193	2,924	-266	-8.34%
Personal Care Aide	602	232	12	0	0	0	-12	-100.00%
CHHA Sub-TOTAL	4,430	3,378	3,202	212	2,193	2,924	-278	-8.68%
CONTRACT CHHA								
Home Health Aide								
Caregivers	7,493	5,032	3,319	176	2,206	2,941	-378	-11.38%
US CARE SYSTEMS	322	428	640	26	449	599	-41	-6.46%
Family Home Care	0	0	0	0	0	0	0	0.00%
Home Care Plus (Sibley)	0	0	0	0	0	0	0	0.00%
Sub-TOTAL	7,815	5,460	3,959	202	2,655	3,540	-419	-10.58%
Personal Care Aide								
Caregivers	2,774	853	33	0	0	0	-33	-100.00%
US CARE SYSTEMS	475	457	0	0	0	0	0	0.00%
Sub-TOTAL	3,249	1,310	33	0	0	0	-33	-100.00%
TOTAL CONTRACT	11,064	6,770	3,992	202	2,655	3,540	-452	-11.32%
TOTAL HOURS								
Home Health Aide	11,643	8,606	7,149	414	4,848	6,464	-685	-9.58%
Personal Care Aide	3,851	1,542	45	0	0	0	-45	-100.00%
GRAND TOTAL	15,494	10,148	7,194	414	4,848	6,464	-730	-10.15%

*Numbers may not total precisely due to rounding.

*Beginning with the 2018 Final Report, the Long Term Home Health Care Program which stopped in 2016, is removed. Patients with long-term needs are currently served through Managed Long Term Care (MLTC) programs that contract with the CHHA for care delivery.

VETERANS SERVICE AGENCY

SEPTEMBER 2019 MONTHLY REPORT

Month	Personal Contacts	Tel/Mail Contacts	Total Contacts	Total Services	New Claims	Maintained Claims
January	54	783	837	1926	31	19
February	55	692	747	1731	33	14
March	63	952	1015	2284	42	17
Sub Total	172	2427	2599	5941	106	50
April	104	727	831	1913	46	14
May	98	768	866	2093	45	12
June	78	740	818	1875	49	21
Sub Total	280	2235	2515	5881	140	47
July	66	728	794	1792	49	21
August	88	669	757	1782	43	16
September	99	666	765	1735	52	13
Sub Total	253	2063	2316	5309	144	50
October						
November						
December						
Sub Total						
GRAND TOTAL						

*Contact: Personal visit, phone call, or mail received or sent to/from VSA

*Service: Amount of assistance provided for each contact

Comments: The Sept/19 Contact, Services and claim figures are all very close to the Sept/18 totals. The 3d Quarter/19 Total Contact, Total Services and claim figures are all higher than the same period in 2018. September 30th was my last full time day as the Director of the VSA. I've appreciated all your help and support over the years assisting Jefferson County veterans.