County of Jefferson Office of the County Administrator

Historic Courthouse 195 Arsenal Street?nd Floor Watertown, NY 13601-2567 Phone: (315) 785-3075 Fax: (315) 785-5070



November 1, 2024

TO:

Members of Health & Human Services Committee

FROM:

Ryan Piche, 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, 2024 at 6:00 p.m.* in the Board of Legislators' Chambers.

Following is a list of agenda items for the meeting:

Presentation:

DSS Code Blue Program – Karen Marcum – Commissioner of Social Services
Jillian Redder – Director of Housing & Special Initiatives

Resolutions:

- 1. Establishing a Specialist, Services for the Aging Position and Amending the 2024 County Budget in Relation to Alzeimer's Disease and Related Disorders Association Inc. Grant
- 2. Reappointing Members to the Community Services Board
- 3. Authorizing An Agreement for the Provision of Services Relative to Opioid Settlement Funds Regional Abatement and Amending the 2024 County Budget in Relation Thereto
- Amending the 2024 County Budget to Allocate Additional State Aid for Community Services Mental Health Programs
- Reappointing Member to Jefferson County Public Health Health Services Advisory Board
- 6. Reappointing Members to Jefferson County Public Health Professional Advisory Committee

- 7. Reappointing Members to the Emergency Medical Services (EMS) Advisory Board
- 8. Authorizing An Agreement with NMS Labs for Toxicology Testing Services
- 9. Authorizing An Agreement with Community Action Planning Council of Jefferson County, Inc. for the Provision of Nutritional Services by the Public Health Service
- Amending the 2024 County Budget Relative to Public Health Department Accounts in Relation to Medical Examiner Fees
- 11. Authorizing Agreements in Connection with New York State Department of Health Lead Rental Registry
- 12. Authorizing Acceptance of JUUL Labs Settlement Funds Designated for Jefferson County
- 13. Authorizing An Agreement with Patagonia Health for Electronic Health Record Software
- 14. Accepting New York State Shelter Arrears Eviction Forestallment (SAEF) Program Allocation Funding from the NYS Office of Temporary and Disability Assistance and Amending the 2024 County Budget in Relation Thereto
- 15. Accepting New York State Family-Centered Case Management Services Program Allocation Funding from the NYS Office of Temporary and Disability Assistance and Amending the 2024 County Budget in Relation Thereto
- 16. Accepting Solitons to End Homelessness Program Funding from the NYS Office of Temporary and Disability Assistance and Amending the 2024 County Budget in Relation Thereto
- 17. Accepting United States Department of Agriculture (USDA) Food and Nutrition Service Funding and Amending the 2024 County Budget in Relation Thereto
- 18. Accepting New York State Code Blue Allocations from the Office of Temporary and Disability assistance and Amending the 2024 County Budget in Relation Thereto
- 19. Amending Rates of Reimbursement to Funeral Homes and Services for Indigent Burials
- 20. Appointing Member to Community Action Planning Council

Informational Items:

Monthly Department Reports:
 Office for the Aging Community Services

Public Health Social Services Veterans Service Agency

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

RP:jdj

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Office for the Aging Community Services

Public Health/EMS/Medical Examiner

Social Services

Veterans Service Agency County Attorney

County Treasurer

Establishing a Specialist, Services for the Aging Position and Amending the 2024 County Budget in Relation to Alzheimer's Disease and Related Disorders Association Inc. Grant

| Whereas, By Resolution 259 | of 2024 Jefferson County accepted a grant and authorized an | |
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| | and interest to the first | |

agreement with the Alzheimer's Disease and Related Disorders Association Inc in the amount of \$200,000 to establish or expand Respite Social Adult Day Programs in the community during the period of August 1, 2024 to July 30, 2025, and

Whereas, The Director of OFA has recommended the funding be used to create one new part time position to address the need to develop respite and community adult day services in Jefferson County.

Now, Therefore, Be It Resolved, That Jefferson County hereby accepts said funding, and the part time position of Specialist, Services for the Aging be created in the Office for the Aging (6772-019), and be it further

Resolved, That the position is proposed in the 2025 Tentative Budget, and that if and when the funding for the position is exhausted, the position will be abolished, and be it further

Resolved, That the 2024 County Budget is hereby amended as follows:

Increase:

By Legislator:

| Revenues | | |
|-----------------|----------------------------------|-----------|
| 01677200 091972 | Charges – Programs for the Aging | \$133,334 |
| Expenditures | | |
| 01677200 01100 | Personal Services | \$ 25,076 |
| 01677200 01110 | Temporary | 14,976 |
| 01677200 04111 | Trackable Items | 2,200 |
| 01677200 04113 | Computer Equipment | 17,100 |
| 01677200 04313 | Travel | 9,903 |
| 01677200 04512 | Food Supplies | 15,600 |
| 01677200 04585 | Operating Supplies | 15,471 |
| 01677200 04605 | Day Care/Respite | 22,900 |
| 01677200 08010 | State Retirement | 6,148 |
| 01677200 08030 | Social Security | 3,038 |
| 01677200 08040 | Workers Compensation | 922 |
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| Seconded by Legislator: | |
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Reappointing Members to the Community Services Board

| Seconded by Legislator: | | | |
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| | | | |
| Kelly Wright | Alcohol & Substance Abuse | 12/31/2027 | |
| Susan Lara-Gonzalez Brooke Roes | Mental Health Mental Health | 12/31/2027 12/31/2027 | |
| Tina Cummings | PW/DD PW/DD | 12/31/2026 | |
| Sub Committee Only | DW/DD | 12/21/2026 | |
| Community Services Bo Karen Marcum | ard Only | 12/31/2026 | |
| Pat Fontana, Jr. | Alcohol & Substance Abuse | 12/31/2027 | |
| Jennifer Draper | PW/DD | 12/31/2026 | 24.1 |
| Joey Marie Horton | | 12/31/2025 | |
| Maureen Cean | Alcohol & Substance Abuse | 12/31/2025 | |
| Aileen Martin | Mental Health | 12/31/2025 | |
| Christina O'Neil Jennifer Lachenauer | Mental Health Mental Health | 12/31/2024 12/31/2024 | |
| | | | |
| <u>Member</u> | Sub-Committee | Term to Expire | |
| | Community Services Both Christina O'Neil Jennifer Lachenauer Aileen Martin Maureen Cean Joey Marie Horton Jennifer Draper Pat Fontana, Jr. Community Services Both Karen Marcum Sub Committee Only Mike Lively Tina Cummings Susan Lara-Gonzalez Brooke Roes | Member Community Services Board and Sub Committee Christina O'Neil Mental Health Jennifer Lachenauer Mental Health Aileen Martin Mental Health Maureen Cean Alcohol & Substance Abuse Joey Marie Horton Alcohol & Substance Abuse Jennifer Draper PW/DD Pat Fontana, Jr. Alcohol & Substance Abuse Community Services Board Only Karen Marcum Sub Committee Only Mike Lively PW/DD Tina Cummings PW/DD Susan Lara-Gonzalez Mental Health Brooke Roes Mental Health | Community Services Board and Sub Committee Christina O'Neil Mental Health 12/31/2024 Jennifer Lachenauer Mental Health 12/31/2024 Aileen Martin Mental Health 12/31/2025 Maureen Cean Alcohol & Substance Abuse 12/31/2025 Joey Marie Horton Alcohol & Substance Abuse 12/31/2025 Jennifer Draper PW/DD 12/31/2026 Pat Fontana, Jr. Alcohol & Substance Abuse 12/31/2027 Community Services Board Only Karen Marcum 12/31/2026 Sub Committee Only Mike Lively PW/DD 12/31/2026 Tina Cummings PW/DD 12/31/2026 Susan Lara-Gonzalez Mental Health 12/31/2027 Brooke Roes Mental Health 12/31/2027 |

| | | Clerk of the Board of Legislators | |
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| | In testimony whereof, I have hereunto set m | y hand and affixed the seal of said County this | day of |
| | that I have compared the foregoing copy of Res Jefferson with the original thereof on file in n Board on the day of such Resolution and the whole thereof. | islators of the County of Jefferson, New York, do holution No of the Board of Legislators of saily office and duly adopted by said Board at a me, 20 and that the same is a true and con | id County of eting of said rrect copy of |
| of New York)) ss.: y of Jefferson) | | | |
| Seconded by Legislator: | | | |
| Expenditure 01432000 04703 | PIVOT | \$50,000 | |
| Revenue 01431000 093486 | State Aid- OASAS Opioid Settlement Fun | nds \$50,000 | |
| Increase: | | | |
| Resolved, That the 2024 | County Budget is hereby amended as followed | lows: | |
| Chairman of the Board of | esolved, That Jefferson County hereby according Legislators to execute an agreement with approval of the County Attorney as to form | h the above provider for services as | |
| allocated to PIVOT to en | of Community Services has requested that a sure that the Alliance for Better Communicle for the period of January 1, 2025 through | ities can continue its important work | |
| | or Better Communities is experiencing a tree Communities Grant, and | emporary funding gap due to the | |
| | the funding will be allocated to an RFP pre- er settlement and statute, and | ocess to procure services based on the | |
| Jefferson County Comm County with Opioid Sett | State Office of Addiction Services and Sounity Services that it is providing the Localement Regional Abatement dollars in the based on the allowable use of funds per se | al Government Unit for Jefferson amount of \$565,936 to procure | |
| By Legislator: | | | |
| 0 0 | nent and Amending the 2024 County Bud | | |

Amending the 2024 County Budget to Allocate Additional State Aid for Community Services Mental Health Programs

| | | Clerk of the Board of Legislators | |
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| | In testimony whereof, I have hereunto set my h | and and affixed the seal of said County this d | ay of |
| | certify that I have compared the foregoing copy of County of Jefferson with the original thereof on fill of said Board on the day of copy of such Resolution and the whole thereof. | e in my office and duly adopted by said Board at a me , 20 and that the same is a true and co | said eting rrect |
| County of Jefferson) | | | |
|) ss.: | | | |
| State of New York) | | | |
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| Seconded by Legis. | | | |
| Seconded by Legisl | ator: | | |
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| 01432000 04732 | Children's Home of Jeff. Co. | 24 | |
| 01432000 04718 | Mental Health Assn. | 2,417 | |
| 01432000 04714 01432000 04718 | THRIVE-NCTLS Reinvestment JRC Employment | 41,415 168 | |
| 01432000 04708 | NRCIL FSS RIV | \$ 1,424 | |
| Expenditure: | | | |
| Revenue 01431000 93490 | State Aid - Mental Health | \$ 45,448 | |
| Increase: | | | |
| Now, Therefore, Bo | e It Resolved, That the 2024 County Budget | is amended as follows: | |
| Whereas, The 2024 | County Budget needs to be amended to ref. | lect the additional funds. | |
| selected OMH prog | | as a minimum wage mercase for | |
| | York State Office of Mental Health (OMH) bed stipend for Supported Housing, as well | | |
| By Legislator. | | | |
| By Legislator: | | | |

Reappointing Member to Jefferson County Public Health Service Health Services Advisory Board

| | | | whereof, I have | e hereunto set m | y hand and affix | ed the seal of sai | d County this | day of |
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| | | that I have com Jefferson with Board on the such Resolution | ipared the foreg the original the day of n and the whole | going copy of Reserved on file in m | 1. | of the Board of y adopted by saind that the same | f Legislators of a did Board at a n de is a true and c | said County of neeting of said correct copy of |
| County of Jefferso | n) | | | | | | | |
| State of New York |) ss.: | | * | | | | , | |
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| Seconded | d by Legislator: | | | | | | | |
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| | <u>e-Appointments</u> tephen J. Todd | | 12/3 | 31/2027 | |) ea | | |
| <u>N</u> | <u> 1embers</u> | | Ten | m to Expire | | | | |
| | County Health | | | | | | | |
| | l, That the follow County Health S | | | | | | | |

Reappointing Members to Jefferson County Public Health Service Professional Advisory Committee

By Legislator:

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| | | In testimony | whereof, I h | | set my hand and | affixed the seal | of said Coun | ty this | day o |
| | | I, the unders that I have con Jefferson with Board on the such Resolution | npared the fo the original day o | regoing copy o thereof on file of | f Legislators of the fresolution No. in my office and 20, 20 | e County of Jef of the Bo I duly adopted and that the | ard of Legisla by said Board | tors of said (| County of sai |
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| | ss.: | | | | | | | | |
| f New York) | | | | | | | | | |
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| Seconded by | Legislator: | | | | | | | | |
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| | Louise J. I Diana K. V | Haraczka Woodhouse | | | 12/31/20 12/31/20 | | | | |
| | Re-Appoir | | | | | | | 4.00 | |
| | | | | | Term to | LAPITE | | | |
| | Members | | | | Term to | Expire | | | |

| Maurice Mitche Bruce Wright | _11 | | 31/2026 | | |
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| Niel Rivenburg | | 12/3 | 31/2026 31/2026 31/2026 | | |
| Seconded by Legislator | r: | | - | | |
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| State of New York) ss.: | | | | | |

| Authorizing An Agreement with NMS Labs for Toxicology Testing Services |
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| By Legislator: |
| Whereas, The Jefferson County Public Health Service have established contracts for the provision of forensic toxicology laboratory testing services for toxicology blood, urine and organ analyses to the Jefferson County Medical Examiner Program, and |
| Whereas, By Resolution No. 329 of 2022, this Board of Legislators most recently authorized an agreement with NMS Labs. |
| Now, Therefore, Be It Resolved, That Jefferson County enter into an agreement with the NMS Labs (National Medical Services) to provide the following toxicology services for the period of January 1, 2025 through December 31, 2025: • Toxicology Blood - \$308 per test and |
| Toxicology Urine, Tissue, Vitreous, Bile Fluid or Gastric Contents per fee schedule in effect as of date of Agreement |
| and be it further |
| Resolved, That the Chairman of the Board is hereby authorized to execute such agreement on behalf of Jefferson County subject to approval of the County Attorney as to form and content. |
| Seconded by Legislator: |
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| that I have compa Jefferson with the Board on the such Resolution ar | red the foregoing copy o coriginal thereof on file day of dat the whole thereof. | | the Board of Legi dopted by said Bo that the same is a | islators of said County of ard at a meeting of said true and correct copy o |
| In testimony wh | , 20 | set my hand and affixed t | the seal of said Co | unty this day of |
| | | Clerk of the | e Board of Legisla | tors |

State of New York
County of Jefferson

| | greement with Community se Provision of Nutritional | | | | unty, Inc. | |
|--|---|---|------------------------------|---|-------------------------------------|-------------------------|
| By Legislator: | | · | | | | |
| required to have a l | munity Action Planning O Registered Dietitian assess ning, and review menus a s every May, and | s the nutritional st | atus and spe | ecial needs of | f children, | |
| | ution 326 of 2022, this Bo PC for the period of January | | | | d an | |
| Jefferson County, I Service's Registere | e it Resolved, That Jeffers nc. for nutritional services d Dietitian in the amount rough December 31, 2026 | s to be provided b of \$60.00 per dire | y Jefferson ect service h | County Publi | ic Health | |
| | Chairman of the Board is County, subject to approv | | | _ | | |
| Seconded by Legis | lator: | | | | | |
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| tate of New York) ss.: | | 4 | | | | |
| | that I have compared the Jefferson with the origin | al thereof on file in my | office and duly a | f the Board of Leg | islators of said oard at a meeti | County of ng of said |
| | In testimony whereof, 20 | I have hereunto set my h | and and affixed | the seal of said Co | ounty this | day of |
| | | | Clerk of th | e Board of Legisla | itors | |
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JEFFERSON COUNTY BOARD OF LEGISLATORS

| Resolution No. | |
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| 01118500 04413 | Now, Therefore, B | e it Resolved, that the 2024 | County Budget is hereby | amended as follows: |
|---|-------------------|--|--|---|
| 01118500 01100 Personal Services \$100,000 | | Medical Fees | \$100,000 | |
| Seconded by Legislator: | | Personal Services | \$100,000 | |
| | Seconded by Legis | lator: | | |
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| | | that I have compared the f Jefferson with the origina Board on the day | oregoing copy of Resolution No. thereof on file in my office and duly of , 20 ai | of the Board of Legislators of said County y adopted by said Board at a meeting of s |
| I, the undersigned, Clerk of the Board of Legislators of the County of Jefferson, New York, do hereby c that I have compared the foregoing copy of Resolution No of the Board of Legislators of said Coun Jefferson with the original thereof on file in my office and duly adopted by said Board at a meeting of Board on the day of, 20 and that the same is a true and correct co such Resolution and the whole thereof. | | In testimony whereof, I | have hereunto set my hand and affix | ed the seal of said County this day |

Clerk of the Board of Legislators

Authorizing Agreements in Connection with New York State Department of Health Lead Rental Registry

| Seconded tate of New York ounty of Jefferson | }ss.: | that I have con Jefferson with Board on the such Resolution | mpared the foregoin the original thereo day of on and the whole the | ng copy of Resolution of on file in my officereof. | n No of the Boa ee and duly adopted b 20 and that the | erson, New York, do he ird of Legislators of said by said Board at a mee same is a true and corn of said County this | d County of ting of said rect copy of |
|--|---------------|--|---|--|---|--|---|
| tate of New York | }ss.: | that I have con Jefferson with Board on the | mpared the foregoin the original thereo day of | ng copy of Resolution of on file in my office | No of the Boate and duly adopted b | ord of Legislators of said by said Board at a mee | d County of ting of said |
| tate of New York | }ss.: | | | | | | |
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| Seconded | | | | , | | | |
| Seconded | | | • | | | | (2 (4.0 |
| Seconded | | | | | | | |
| Seconded | | | | | | | |
| | by Legislato | r: | | | | | |
| County At | torney as to | form and conte | | fferson County | , subject to the | approval of the | |
| | | | _ | | s hereby author | | |
| | | • | | • | April 1, 2024, and be it further, | through March | |
| an agreem | ent with the | NYSDOH to a | access said fun | ding, and be i | further, | at and authorizes | |
| children a | re harmed by | lead poisonin | g. | | | | |
| Whereas | The goal of t | he LRR is to i | dentify and re | mediate lead h | azards in rental | housing before | |
| program th | | efferson Count | | The state of the s | the Lead Renta he period of Ap | l Registry (LRR) pril 1, 2024 | |
| | | | | | s comprising tw ive for elevated | lead levels, and | |
| | community | | | | | the zip code of | |
| 13601 as a | | | tment of Heal | th (NIVSDOH) | h:1:C-1 | | |

Authorizing Acceptance of JUUL Labs Settlement Funds Designated for Jefferson County

| By Legislator: | - | | | | |
|--|--|---|--|--|-----------------------------------|
| New York State At | County has been des storney General from eted young people, a | the JUUL Labs Set | | | g |
| Attorney General's among young peop services in commun regulations; and pu | ding must be spent or s Office, including puble; community, school nities, schools, and coublic health research iti-vaping programs, a | ols, and college anti- olseges to help quit; into e-cigarette use | paigns to prevent e i-vaping programs; ; enforcement of va | e-cigarette use; vaping cessation aping laws and | |
| Whereas, The Publ that achieves the ap | ic Health Departmen | nt will work with co | mmunity partners | to implement a pl | an |
| Now, Therefore, Be funding, and be it f | e It Resolved, That thurther, | he Board of Legisla | tors authorizes acc | eptance of the | |
| directed to execute | Chairman of the Boa any required agreem unty Attorney as to for | nent on behalf of Jef | | | |
| Seconded by Legis | lator: | | <u>.</u> | | |
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| tate of New York) ss.: | | | | | |
| | that I have compa Jefferson with the Board on the | ned, Clerk of the Board of L ared the foregoing copy of R e original thereof on file in day of and the whole thereof. | Resolution No of the my office and duly adopt | Board of Legislators of | said County of neeting of said |
| | In testimony w | hereof, I have hereunto set | my hand and affixed the | seal of said County this_ | day of |
| | | _ | Clerk of the Bo | oard of Legislators | |
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| Authorizing An Agr | reement with Patagonia Health for Electronic Health Record Software | |
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| By Legislator: | | |
| | County Public Health Service has utilized the Patagonia Electronic via subscription to support patient documentation for its clinic programs 0, and | |
| Whereas, The Department initial period of three (3) | ent wishes to renew its subscription to the Patagonia Health EHR for an 3) years, and | |
| | osts for the subscription are approximately \$26,000, which are 4 and proposed 2025 County Budget, and | |
| | greed between Jefferson County and Patagonia Health, the subscription the same terms and conditions for an additional two (2) years, not to term of five (5) years. | |
| | Resolved, That Jefferson County renew its clinic EHR subscription with e purposes stated above for a term to begin on award date, and be it | |
| | irman of the Board of Legislators be and is hereby authorized execute lf of the County, subject to review of the County Attorney as to form and | |
| Seconded by Legislator: | • | |
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| f New York)) ss.: of Jefferson) | | |
| | I, the undersigned, Clerk of the Board of Legislators of the County of Jefferson, New York, do he that I have compared the foregoing copy of Resolution No of the Board of Legislators of said Jefferson with the original thereof on file in my office and duly adopted by said Board at a mee Board on the day of, 20 and that the same is a true and corn such Resolution and the whole thereof. | d County of ting of said |
| | In testimony whereof, I have hereunto set my hand and affixed the seal of said County this | day of |
| | Clerk of the Board of Legislators | |
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| Accepting New York State Shelter Arrears Eviction Forestallment (SAEF) Program Allocation |
|---|
| Funding from the NYS Office of Temporary and Disability Assistance and Amending the 2024 |
| County Budget in Relation Thereto |

| | | In testimony whereof, I have hereunto set | my hand and affixed the seal of said | County this day of |
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| | y of Jefferson) | I, the undersigned, Clerk of the Board of I that I have compared the foregoing copy of I Jefferson with the original thereof on file in Board on the day of such Resolution and the whole thereof. | Resolution No of the Board of I n my office and duly adopted by said | egislators of said County of |
| State o | of New York) | | | |
| | | | | |
| | Seconded by Legisl | ator: | | |
| | Fund Balance 01000000 30599 | Appropriated Fund Balance | \$ 9,417 | |
| | Decrease: | | 1 | |
| | Expenditures 01631000 04606 | SAEF Grant | \$84,753 | |
| | Revenue 01607000 93676 | State Aide-SAEF Grant | \$94,170 | |
| | Increase: | | | |
| | Now, Therefore Be | It Resolved, That the 2024 County Bud | dget is hereby amended as | follows: |
| | Whereas, the New September 30, 2025 | York State SAEF program period for ex | expenditures is October 1, 2 | 024 through |
| | | New York State Shelter Arrears Evictio ars assistance to eligible household for | | |
| | from the NYS Office | son County Department of Social Service of Temporary and Disability Assista | nce that JCDSS has been a | llocated |
| | | | | |

Accepting New York State Family-Centered Case Management Services Program Allocation Funding from the NYS Office of Temporary and Disability Assistance and Amending the 2024 County Budget in Relation Thereto

| By Legislator: | * | |
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| | | |

Whereas, The Jefferson County Department of Social Services (JCDSS) has received notification from the NYS Office of Temporary and Disability Assistance that JCDSS has been allocated \$165,385 under the New York State Family-Centered Case Management Services Program to engage at-risk families in collaborative case planning connecting them to appropriate services based on individual needs and barriers, and

Whereas, The New York State Family-Centered Case Management Services Program requires the hiring of additional staff to support the needs of families whose circumstances require a more intensive level of case management and specialized services to achieve financial stability and well-being, and

Whereas, JCDSS plans to hire a Caseworker (Grade 18) in a position repurposed to meet the need, and

Whereas, The New York State Family-Centered Case Management Services program period for expenditures is July 1, 2024 through June 30, 2025.

Now, Therefore Be It Resolved, That the 2024 County Budget is hereby amended as follows:

Increase:

| Revenue | | |
|----------------|-------------------------------|-----------|
| 01601000 94610 | Fed Aide-Social Service Admin | \$165,385 |
| Expenditures | | |
| 01601000 04102 | Office Furnishings | 6,000 |
| 01601000 04110 | Office Expense | 1,500 |
| 01601000 04111 | Trackable Durable | 500 |
| 01601000 04115 | Telephone | 3,000 |
| 01601000 04116 | Postage | 2,500 |
| 01601000 04117 | Printing | 2,500 |
| 01601000 04118 | Computer Hardware | 2,700 |
| 01601000 04119 | Computer Software | 5,000 |
| 01601000 04313 | Travel | 7,000 |
| 01601000 04613 | Training | 5,680 |
| 01601000 04414 | Supportive Services | 15,000 |
| | | |

| | | | | _ | | Clerk of the l | Board of Legislate | ors |
|--|----------------|---|---|--|-----------|--|---|---|
| | | In testimony of | whereof, I have, 20 | e hereunto set | my hand | and affixed the | seal of said Cour | nty this day |
| | | certify that I hav County of Jeffers of said Board on copy of such Res | ve compared the son with the orig the da olution and the | e foregoing coginal thereof of your ofwhole thereof. | py of Res | olution No ny office and dul , 20 an | _ of the Board of adopted by said that the same | ew York, do hereby of Legislators of said I Board at a meeting is a true and correct |
| State of New York County of Jefferson |) } ss.: | | | | | | | |
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| | | | | | | | | |
| Seconded 1 | by Legislator: | | | | | | ÷ | |
| 01000000 | 30599 A | ppropriated Fu | nd Balance | | | \$114,005 | | |
| Fund Balar | | | | | | | | |
| Decease: | | | | | | | | |

| | to End Homelessness Program Funding fro Assistance and Amending the 2024 County | • |
|--|--|--|
| By Legislator: | | |
| from the NYS Office \$300,000 per year un | on County Department of Social Services (a of Temporary and Disability Assistance that der the Solutions to End Homelessness Proce, as well as street outreach, to individuals | at JCDSS has been allocated gram (STEHP) to provide rental |
| | ons to End Homelessness Program (STEHP) years, with the current program period for eather 30, 2025. | |
| Now, Therefore, Be I | t Resolved, That the 2024 County Budget i | s hereby amended as follows: |
| Increase: | | |
| Revenue | | |
| 01607000 94677 | Fed Aid HUD Prevent Homelessness | \$300,000 |
| Expenditures | | |
| 01601000 04112 | Membership | \$ 5,000 |
| 01601000 04313 | Travel | 1,000 |
| 01601000 04416 | Professional Fees | 60,959 |
| 01601000 08020 | Health Benefits | 15,150 |
| 01631000 04627 | HUD Prevent Homelessness | 157,291 |

Appropriated Fund Balance

\$60,600

Decrease:

Fund Balance

01000000 30599

Seconded by Legislator:

Accepting United States Department of Agriculture (USDA) Food and Nutrition Service Funding and Amending the 2024 County Budget in Relation Thereto

| oun | y of Jefferson) ss.: | that I have compared the foregoing copy of Ro Jefferson with the original thereof on file in | gislators of the County of Jefferson, New Yor esolution No of the Board of Legislato my office and duly adopted by said Board a , 20 and that the same is a true | ors of said County of at a meeting of said |
|------|-----------------------------|---|---|---|
| tate | of New York) | | | |
| | | | | |
| | | | | |
| | Seconded by Legisl | ator: | • | |
| | 01601000 04119 | Computer Software | 50,000 | |
| | 01601000 04118 | Computer Hardware | 30,954 | |
| | 01601000 04114 | Maintenance/Repair | 23,000 | |
| | 01601000 04110 | Trackable Durable | 36,394 | |
| | Expenditures 01601000 04110 | Office Expense | \$ 143 | |
| | Revenue 01601000 94610 | Fed Aid Social Service Admin | \$140,491 | |
| | Increase: | | | |
| | Now Therefore, Be | It Resolved, That the 2024 County Bud | get is hereby amended as follow | vs: |
| | | A Food and Nutrition Service funding horogram period for expenditures running. | | f three |
| | Grants to streamline | e SNAP benefit application inquiries usi | ng Artificial Intelligence (A.I.), | and |
| | Supplemental Nutri | od and Nutrition Service that JCDSS has tion Assistance Program (SNAP) Process | ss and Technology Improvement | nt |

| | Board on the day of such Resolution and the whole there | , 20 and that the sam | e is a true and correct copy of |
|---------------------------|--|---|--|
| | that I have compared the foregoing | copy of Resolution No of the Board of | f Legislators of said County of |
|) ss.: | | | |
| | | | |
| | | | |
| | | | |
| | | | . 6 |
| | | | |
| | | | |
| Seconded by Legisl | ator: | | |
| 01614000 04600 | Safety Net Assistance | \$414,311 | |
| Expenditure | | | |
| Revenue 01607000 93640 | Safety Net | \$414,311 | |
| Increase: | | | |
| | ved, That the 2024 County Budge | et is hereby afficilited as follows | · . |
| | and That the 2024 County Budge | at is haraby amonded as follows | |
| | Blue program period for expend | itures is October 1, 2024 throu | gh June 30, |
| allocated \$414,311 | for district costs related to imple | menting emergency measures f | |
| | | | |
| By Legislator | | | |
| | Assist By Legislator Whereas, The Jeffe from the New York allocated \$414,311 homeless during inc Whereas, The Code 2025. Be It Further Resolution Increase: Revenue 01607000 93640 Expenditure 01614000 04600 Seconded by Legislator American Increase in the control of | Assistance and Amending the 2024 Could By Legislator Whereas, The Jefferson County Department of Social from the New York State Office of Temporary and It allocated \$414,311 for district costs related to implet homeless during inclement winter weather (Code Blue Whereas, The Code Blue program period for expend 2025. Be It Further Resolved, That the 2024 County Budget Increase: Revenue 01607000 93640 Safety Net Expenditure 01614000 04600 Safety Net Assistance Seconded by Legislator: [New York] ss.: of Jefferson] ss.: | Whereas, The Jefferson County Department of Social Services (JCDSS) has receive from the New York State Office of Temporary and Disability Assistance that JCDS allocated \$414,311 for district costs related to implementing emergency measures in homeless during inclement winter weather (Code Blue), and Whereas, The Code Blue program period for expenditures is October 1, 2024 through 2025. Be It Further Resolved, That the 2024 County Budget is hereby amended as follows: Increase: Revenue 01607000 93640 Safety Net \$414,311 Expenditure 01614000 04600 Safety Net Assistance \$414,311 Seconded by Legislator: [New York] ss.: |

Amending Schedule for Rates of Reimbursement to Funeral Homes and Services for Indigent Burials

| York |) | certify Coun- of said copy of | y that I have com ty of Jefferson wit d Board on the of such Resolution | pared the foregoing h the original there day of and the whole there of, I have hereunto | g copy of Resolution of on file in my of | on No office and duly ac , 20 and the | I Jefferson, New York, do If the Board of Legislators Idopted by said Board at a hat the same is a true and I of said County this | s of said meeting correct |
|----------------------|-----------|--|--|---|--|--|---|---|
| |) | I, | the undersigned, | Clerk of the Board | d of Legislators o | f the County of | | |
| |) | | | | | | | |
| X7 1 |) ss.: | | | | | | , | |
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| onded b | y Legisla | ator: | | | - | 40.8 | | |
| solved, | Γhat this | resolution s | shall be effec | tive January 1 | , 2025. | | | |
| | | | | ant to Social S | | | and conditions be it further | |
| | oforo Do | it Dagalya | d That the at | tashad sahadi | la aanstituta | a tha tama | and aanditions | |
| ereas, T | he Scheo | dule needs t | to be amende | d to include a | natomical do | nations at | the same cost as | |
| ereas, B edule, a | • | ution 76 of 2 | 2024, the Bo | ard of Legisla | tors supplem | ented and | clarified the | |
| edule of | compen | sation for r | eimbursemen | nt to Jefferson | County fund | eral homes | | * |
| | | | | | | | | |
| e | reas, E | reas, By Resolutule of compen | reas, By Resolution 342 of dule of compensation for r | reas, By Resolution 342 of 2023, the B dule of compensation for reimbursemen | reas, By Resolution 342 of 2023, the Board of Legislule of compensation for reimbursement to Jefferson | reas, By Resolution 342 of 2023, the Board of Legislators authoridule of compensation for reimbursement to Jefferson County fund | reas, By Resolution 342 of 2023, the Board of Legislators authorized and af | reas, By Resolution 342 of 2023, the Board of Legislators authorized and affirmed a revised dule of compensation for reimbursement to Jefferson County funeral homes and services for brming indigent burial services pursuant to Social Services Law '141, and |

JEFFERSON COUNTY DEPARTMENT OF SOCIAL SERVICES INDIGENT BURIAL RATES (Effective 1/1/2024)

1. Professional Services:

General: \$2,400.00

Stillborn Burial: \$550.00

Anatomical Donation: \$2,400.00

Services including the removal of remains, arrangements, embalming, personnel costs, preparation and filing of death certificate, and the provision of a cremation container (if applicable).

Definitions:

<u>Arrangements</u>: Basic arrangements including the funeral director, other staff, equipment and facilities to respond to the initial request for services, the arrangement conference, securing of necessary authorizations and coordination of service plans with parties involved in the final disposition of the deceased.

<u>Embalming</u>: Includes the use of the preparation room with services to include topical disinfection custodial care, dressing/casketing, cosmetology, and restoration.

2. Deliverables:

- a) The cost of a basic minimum casket shall be paid by the County at the invoice cost to the funeral home or service.
- b) A basic minimum grave vault or liner shall be provided and paid by the County at the invoice cost to the funeral home or service.
- c) Cemetery equipment and delivery and placement of a vault or liner shall be paid by the County at the actual cost to funeral home or service.

3. Miscellaneous Items:

- a) Mileage for transportation of remains shall be billed at \$1.85 per loaded mile.
- b) Oversized casket, if required, shall be paid at the invoice cost to the funeral home or service. Prior authorization of the Commissioner of Social Services is required.

- c) Cemetery fees, including the cost of the grave plot and any opening or closing fees of the Cemetery shall be a direct cost billed and paid by the Commissioner of Social Services. Said fees shall not exceed \$633.00 for interment of adult direct burial, adult cremation burial, and stillborn burial.
- d) Cost of a winter vault, not to exceed \$100, shall be a direct cost billed to the Commissioner of Social Services.
- e) Crematory Fees shall be a direct charge billed to and paid by the Commissioner of Social Services.

f) Anatomical Donation same as cremation.

- 4. The total cost of services and items identified above shall constitute the maximum obligation of the County to reimburse the costs of an indigent burial.
- 5. The fees for professional services shall be subject to a 2% annual increase to be effective on the first day of January for each calendar year.

6. <u>Supplementation:</u>

A funeral home or service may go above and beyond at the request of next of kin at their own discretion. Any services other than a direct burial or cremation would fall under the category of supplementation (e.g. calling hours, funeral or memorial service, grave side services, flowers, obituary cost, etc.). Such supplementation is the financial liability of the parties making the arrangements and the funeral home or service. Payment for those services should come directly from your general price list (GPL) or a lesser amount for the individual items selected or negotiated.

Patient Incidental Accounts (PIA) are not to be used as supplementation.

7. Next of Kin Liability:

Social Services Law §101, <u>Liability of Relatives to Support</u>: Except as otherwise provided by law, the spouse or parent of a recipient of public assistance or care of a person liable to become in need thereof shall, if of sufficient ability, be responsible for the support of such person, provided that a parent shall be responsible only for the support of a child under the age of twenty-one years. Stepparents shall in like manner be responsible for the support of stepchildren under the age of twenty-one years. Nothing herein shall impose any liability upon a person to support the adopted child of his or her spouse if such child was adopted after and the adopting spouse is living separate and apart from the non-adopting spouse pursuant to a legally recognizable separation agreement or decree under domestic relations law. Such liability shall not be imposed for so long as the spouses remain separate and apart after the adoption.

8. Funeral Trust:

Deceased individuals who have pre-arranged under a funeral or final needs trust for the expense of arrangements and interment: Trust funds must be utilized in the first instance for final arrangements and burial.

[End of Document]

Appointing Member to Community Action Planning Council

| or: | | | | | |
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| certify that I County of Je of said Board | have compared the for fferson with the origin d on the day | oregoing copy of l al thereof on file i of | lators of the County Resolution No. n my office and duly , 20 and | of Jefferson, New of the Board of La adopted by said Bo that the same is a | York, do he egislators of pard at a me true and co |
| | certify that l County of Je of said Boar | certify that I have compared the f County of Jefferson with the origin of said Board on the day | I, the undersigned, Clerk of the Board of Legis certify that I have compared the foregoing copy of County of Jefferson with the original thereof on file i of said Board on the day of copy of such Resolution and the whole thereof. | certify that I have compared the foregoing copy of Resolution No. County of Jefferson with the original thereof on file in my office and duly of said Board on the day of | I, the undersigned, Clerk of the Board of Legislators of the County of Jefferson, New certify that I have compared the foregoing copy of Resolution No of the Board of L. County of Jefferson with the original thereof on file in my office and duly adopted by said Bo of said Board on the day of , 20 and that the same is a copy of such Resolution and the whole thereof. |

Office for the Aging 2024

| Units of Service and Client Statistics | Jan | Feb | Mar | Apr | May | June | July | Aug | Sept | Oct | Nov | Dec | Totals |
|--|--------|------------|--------|--------|--------|--------|--------|--------|--------|------|-----|-----|--------|
| Meals Home Delivered & Congregate (4716) | | | | | | | | | | | | | |
| Clients (at 25th of the month) | 354 | 349 | 356 | 365 | 390 | 385 | 389 | 382 | 411 | | | | 3,381 |
| Home Delivered Meals (MLTC & congregate) | 8,510 | 7,885 | 8,255 | 8,811 | 9,497 | 9,139 | 9,954 | 9,669 | 8,788 | | | | 80,508 |
| Congregate Meals (approx 75 clients at 7 sites) | 393 | 388 | 491 | 481 | 485 | 427 | 422 | 438 | 429 | | | | 3,954 |
| Picnic Meals (C1 Congregate) | 0 | 0 | 0 | 0 | 0 | 0 | 485 | 0 | 0 | | | | 485 |
| Shelf Stable Distributed | 56 | 56 | 18 | 0 | 0 | 0 | 0 | 0 | 1,600 | | | | 1,730 |
| Emergency Frozen / Adjustment | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | | | | 0 |
| Total Delivered Meals | 8,959 | 8,329 | 8,764 | 9,292 | 9,982 | 9,566 | 10,861 | 10,107 | 10,817 | | | | 86,677 |
| Transportation (4710) | | | | | | | | | | | | | |
| Total Transportation Rides | 1,096 | 1,099 | 1,150 | 1,245 | 1,194 | 1,157 | 1,206 | 1,232 | 1,107 | | | | 10,486 |
| Caregiving- Housekeeping & Personal Care (4422) | | | | | | | | | | | | | |
| Total Caregiving Clients | 42 | 47 | 41 | 48 | 45 | 44 | 44 | 37 | 44 | | | | |
| Total Caregiving Hours | 752.75 | 759.75 | 661.25 | 608.50 | 709.25 | 560.00 | 689.00 | 527.00 | 552.00 | | | | 5,820 |
| Respite for Caregivers (4605) | | | | | | | | | | | | | |
| Total Respite Clients | 16 | 16 | 18 | 16 | 14 | 19 | 20 | 22 | 24 | | | | |
| Total Respite Hours | 230,25 | 207.13 | 197.00 | 219.75 | 365.00 | 538.25 | 476.25 | 545.00 | 525.00 | | | | 3,304 |
| Respite Haven (Not Alzheimer's) (4605) | | | | | | | | | | | | | |
| Total Respite Clients | 4 | 2 | 2 | 3 | 3 | . 2 | 3 | 2 | 2 | | | | 23 |
| Total Respite Hours | 60.00 | 48.00 | 56.00 | 42.00 | 36.00 | 30.00 | 52.00 | 48.00 | 44.00 | | | | 416 |
| PERS Lifenet Units (4715) | | | - | | | | | | | | | | |
| # of Clients with PERS Units | 62 | 62 | 64 | 65 | 67 | 72 | 73 | 73 | 74 | | | | 612 |
| | UL. | 02 | - 01 | 0.5 | 07 | 72 | 13 | 13 | 74 | | | | |
| Legal Services (4411) | | | | | | | | | | | | | |
| # of Clients Served | 4 | 5 | 12 | 13 | 9 | 9 | 7 | 11 | 9 | | | | |
| Hours of Service | 15.1 | 16.70 | 33.10 | 42.80 | 30.00 | 35.00 | 12.30 | 16.70 | 25.20 | | | | 227 |
| Disease Prevention & Health Promotion (4416/4414) | | | | | | | | | | | | | |
| Bingocize Evidence Based Health Promotion | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1-1- | | | 0 |
| Tai-Chi for Arthritis Clients | 16 | 19 | 13 | 26 | 24 | 0 | 0. | 0 | 18 | | | | 116 |
| Nascentia MLTC (Reimbursement for MLTC meals) (91972) | | <i>y</i> . | | | | | | | | | | | |
| # of clients | 17 | 16 | 16- | 15 | 20 | 15 | 15 | 17 | 17 | | | | |
| # of meals | 401 | 379 | 387 | 378 | 438 | . 374 | 328 | 368 | 313 | | | | 3,366 |
| NY Connects Information & Referrals | | | | | | | | | | | | | |
| Information &Assistance for the month | 130 | 169 | 144 | 122 | 113 | 150 | 112 | 100 | 134 | | | | 1,174 |
| Service Tickets for the month (quick call or referral) | 948 | 817 | 871 | 887 | 928 | 1,122 | 938 | 782 | 908 | | 1 | | 8,201 |
| Health Insurance Information & Counseling | | | | | | | | | | | | | |
| # of Clients Served | 84 | 88 | 77 | 91 | 64 | 72 | 71 | 60 | 86 | | | | 693 |
| Counseling Sessions | 80 | 83 | 72 | 93 | . 60 | 67 | 71 | 59 | 66 | | | | 651 |
| Case Management Clients | | | | | | | | | | | | | |
| Pers Units only - no cm required | 40 | - 41 | 45 | 47 | 48 | 52 | 51 | 51 | 52 | | | | 427 |
| Alz Respite Sessions - no cm required | 55 | 56 | 71 | 67 | 61 | 84 | 100 | 88 | 77 | | | | 659 |
| CM clients requiring bimonthly call/annual assmt | 88 | 61 | 67 | 71 | 63 | 66 | 71 | 71 | 89 | | | | 647 |
| CM clients requiring semiannual assmt | 88 | 61 | 67 | 71 | 63 | 66 | 71 | 71 | 89 | | | | 647 |
| CM Home Delivered meals requiring semiannual assmt | 320 | 333 | 339 | 365 | 423 | 385 | 374 | 382 | 411 | | | | 3,332 |
| Total Case Managed Clients | 591 | 552 | 589 | 621 | 658 | 653 | 667 | 663 | 718 | | | | 5,712 |
| | | | | | | | | | | | | | 0 |

10/11/2024

2024 COMMUNITY SERVICES OFFICE EXPENSE/REVENUE REPORT

| PROGRAM | JAN | FEB | MAR | APR | MAY | JUNE | JULY | AUG | SEPT | <u>ост</u> | NOV | DEC | TOTALS Y-T-D | TOTAL BUDGET | BALANCE AVAILABLE | % USED |
|-----------------|-------------|-----------|-------------|-------------|------------|-------------|-------------|-----------|-------------|------------|-----|-----|-----------------|-----------------|----------------------|--------|
| EARLY INTERV. | | | | | | | | | | | | | | | | |
| EXPENSES | \$0 | \$0 | \$48,379 | \$28,280 | \$22,253 | \$41,702 | \$29,166 | \$23,629 | \$22,452 | | | | \$215,861 | \$438,065 | \$222,204 | 49.28% |
| REVENUES | \$0 | \$0 | \$0 | \$113 | \$1,400 | \$1,796 | \$1,513 | \$2,347 | \$22,748 | | | | \$29,917 | \$404,570 | \$374,653 | 7.39% |
| PRESCHOOL | | | | | | | | | | | | | | | | |
| EXPENSES | \$0 | \$38,463 | \$504,252 | \$531,881 | \$368,220 | \$611,428 | \$287,235 | \$553,699 | \$799,566 | | | | \$3,694,744 | \$6,088,568 | \$2,393,824 | 60.68% |
| REVENUES | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | | | | \$0 | \$3,572,698 | \$3,572,698 | 0.00% |
| OPWDD | | | | | | | | | | | | | | | | |
| EXPENSES(ADMIN) | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | | | | \$0 | \$14,614 | \$14,614 | 0.00% |
| REVENUES | \$0 | \$0 | \$3,420 | \$0 | \$0 | \$1,710 | \$0 | \$0 | \$0 | | | | \$5,130 | \$7,307 | \$2,177 | 70.21% |
| OASAS | | | | | | | | | | | | | | | | |
| EXPENSES | \$342,251 | \$588,930 | \$0 | \$588,930 | \$299,855 | \$0 | \$1,028,174 | \$0 | \$0 | | | | \$2,848,140 | \$3,818,721 | \$970,581 | 74.58% |
| REVENUES | \$955,671 | \$0 | \$955,670 | \$17,663 | \$0 | \$964,500 | \$0 | \$0 | \$0 | | | | \$2,893,504 | \$3,631,025 | \$737,521 | 79.69% |
| омн | | | | | | | | | | | | | | | | |
| EXPENSES | \$49,642 | \$198,176 | \$178,116 | \$285,508 | \$181,761 | \$306,760 | \$617,211 | \$124,328 | \$456,020 | | | | \$2,397,522 | \$4,258,487 | \$1,860,965 | 56.30% |
| REVENUES | \$1,042,123 | \$0 | \$967,121 | \$4,110 | (\$26,900) | \$925,263 | \$48,100 | \$57,336 | \$0 | | | | \$3,017,153 | \$4,071,357 | \$1,054,204 | 74.11% |
| TOTAL EXPENSES | \$391,893 | \$825,569 | \$730,747 | \$1,434,599 | \$872,089 | \$959,890 | \$1,961,787 | \$701,656 | \$1,278,039 | \$0 | \$0 | \$0 | \$9,156,267 | \$14,618,455 | \$5,462,188 | 62.63% |
| TOTAL REVENUES | \$1,997,794 | \$0 | \$1,926,211 | \$21,886 | (\$25,500) | \$1,893,269 | \$49,613 | \$59,683 | \$22,748 | \$0 | \$0 | \$0 | \$5,945,704 | \$11,686,957 | \$5,741,253 | 50.87% |

OPWDD= OFFICE FOR PEOPLE WITH DEVELOPMENTAL DISABILITIES OASAS= OFFICE OF ADDICTION SERVICES AND SUPPORTS OMH= OFFICE OF MENTAL HEALTH

Jefferson County Public Health Service Monthly Statistical Performance For the Nine Months Ended September 30, 2024

CERTIFIED HOME HEALTH AGENCY

| REFERRALS | | To go | 3,194,8 | MTD | YTD | 2024 | Amount of | Percent |
|------------------------|---------------|---------------|---------------|---------------|-----------------|---------------------|---------------|------------------|
| СННА | 2021 1,360 | 2022 1,126 | 2023 1,092 | Actual 141 | Actual 1,107 | Annualized 1,476 | Change 384 | Change 35.16% |
| AVERAGE DAILY CENSUS | | -, | | MTD | YTD | 2024 | Amount of | Percent |
| | 2021 | 2022 | 2023 | Actual | Actual | Annualized | Change | Change |
| СННА | 129 | 98 | 93 | 106 | 95 | | 2 | 2.04% |
| VISITS | | | | MTD | YTD | 2024 | Amount of | Percent |
| СННА | 2021 | 2022 | 2023 | Actual | Actual | Annualized | Change | Change |
| Skilled Nursing | 7,958 | 6,128 | 5,393 | 562 | 4,137 | 5,516 | 123 | 2.28% |
| Physical Therapy | 4,480 | 3,943 | 3,718 | 294 | 2,555 | 3,407 | -311 | -8.37% |
| Speech Therapy | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0.00% |
| Medical Social Worker | 553 | 466 | 528 | 41 | 357 | 476 | -52 | -9.85% |
| Occupational Therapy | 921 | 830 | 846 | 81 | 530 | 707 | -139 | -16.47% |
| Nutrition | 109 | 117 | 107 | 9 | 68 | 91 | -16 | -15.26% |
| Home Health Aide | 1,387 | 745 | 963 | 91 | 683 | 911 | -52 | -5.43% |
| Sub-TOTAL | 15,408 | 12,229 | 11,555 | 1,078 | 8,330 | 11,107 | -448 | -3.88% |
| PREVENT | | | | | | | | |
| Skilled Nursing | 21 | 3 | 2 | 0 | 9 | 12 | 10 | 500.00% |
| TOTAL VISITS | | | | | | | | |
| Skilled Nursing | 7,979 | 6,131 | 5,395 | 562 | 4,146 | 5,528 | 133 | 2.47% |
| Physical Therapy | 4,480 | 3,943 | 3,718 | 294 | 2,555 | 3,407 | -311 | -8.37% |
| Speech Therapy | 0 | 0 | 0 | 0 | 0 | . 0 | 0 | 0.00% |
| Medical Social Worker | 553 | 466 | 528 | 41 | 357 | 476 | -52 | -9.85% |
| Occupational Therapy | 921 | 830 | 846 | 81 | 530 | 707 | -139 | -16.47% |
| Nutrition | 109 | 117 | 107 | 9 | 68 | 91 | -16 | -15.26% |
| Home Health Aide | 1,387 | 745 | 963 | 91 | 683 | 911 | -52 | -5.43% |
| GRAND TOTAL | 15,429 | 12,232 | 11,557 | 1,078 | 8,339 | 11,119 | -438 | -52.93% |
| PARAPROFESSIONAL HOURS | 100 | | | MTD | YTD | 2024 | Amount of | Percent |
| СННА | 2021 | 2022 | 2023 | Actual | Actual | Annualized | Change | Change |
| Home Health Aide | 1,412 | 753 | 996 | 93 | 687 | 916 | -80 | -8.03% |

MOBILE INTEGRATED HEALTH - COMMUNITY PARAMEDICINE

| WODILL WILL | | | 00 | | | LDICHTL | | |
|--|------|------|-------|--------|--------|------------|-----------|---------|
| INDICATORS | | | | MTD | YTD | 2024 | Amount of | Percent |
| | 2021 | 2022 | 2023 | Actual | Actual | Annualized | Change | Change |
| Cases | 0 | 8 | 74 | | 67 | 89 | 15 | 20.72% |
| Average Daily Census (MIH Cases not on CHHA) | 0 | 0.1 | 15 | 27 | 23 | 23 | 8 | 53.33% |
| Visits | 0 | 48 | 1,013 | 74 | 912 | 1,216 | 203 | 20.04% |

PREVENTIVE SERVICES

| CASES | | | | MTD | YTD | 2024 | Amount of | Percent |
|---|---------|--------|---------|--------|--------|------------|-----------|----------|
| PREVENT | 2021 | 2022 | 2023 | Actual | Actual | Annualized | Change | Change |
| Communicable Disease | 14,318 | 20,919 | 7,058 | 679 | 5,703 | 7,604 | 546 | 7.74% |
| Immunizations | 34,523 | 3,119 | 1,115 | 172 | 838 | 1,117 | 2 | 0.21% |
| PPDs | 120 | 159 | 140 | 16 | 128 | 171 | 31 | 21.90% |
| Childhood Lead Poison Prevention Program+ * | 3333333 | | 1993333 | | | | | |
| Screens | 2,332 | 2,624 | 2,999 | | 2,173 | 2,897 | -102 | -3.39% |
| Tests with blood lead levels 5+ | 133 | 125 | 248 | | 113 | 151 | -97 | -39.25% |
| Newborn Screening | 15 | 27 | 2 | 3 | 21 | 28 | 26 | 1300.00% |
| PREVENT TOTAL | 51,441 | 26,973 | 11,562 | 870 | 8,976 | 11,968 | 406 | 3.51% |

^{*}CLPPP data will be reported in quarters (M, J, S, D).

MEDICAL EXAMINER

| | 1411 | DICAL | -70 111111 | *** | | | | |
|---------------------------------|------|-------|------------|--------|--------|------------|-----------|---------|
| INDICATORS | | | | MTD | YTD | 2024 | Amount of | Percent |
| | 2021 | 2022 | 2023 | Actual | Actual | Annualized | Change | Change |
| Cases | 173 | 200 | 198 | 12 | 132 | 176 | -22 | -11.11% |
| Scene Investigations | 3. | 29 | 15 | 1 | 10 | 13 | -2 | -11.11% |
| Autopsies | 87 | 102 | 115 | 5 | 75 | 100 | -15 | -13.04% |
| Overdose Poisonings | 32 | 25 | 29 | | 13 | 17 | -12 | -40.23% |
| Pending Toxicology Confirmation | 0 | 0 | 0 | 3 | | | | |

SAJ:JCPHS MONTHLY STATISTICS GRID SEP24exc.10:21:24. MS E:/

Jefferson County Department of Social Services

2024

| BALANCE | 1,282,453 | 527,370 | (6,257) | 5,254,200 | 2,182,219 | 3,014,751 | 400,000 | 1,125,394 | 56,996 | 48,492 |
|-------------------|-----------|-------------|------------|------------|------------|------------|-------------------|------------|---------|---------------------|
| | | | | | | | 0 : 1 | | | _ |
| | | * Recipient | Medical | | Family | Child | State Training | Safety Net | | Emergency Aid to |
| | Daycare | Services | Assistance | MMIS | Assistance | Care | Schools | Assistance | Heap | Adults |
| | 6055.46 | 6070.4604 | 6101.4 | 6100.4 | 6109.4 | 6119.4 | 6129.4 | 6140.4 | 6141.4 | 6142.4 |
| | | | | | | | | | | |
| BUDGET | 4,278,572 | 1,600,000 | 1,000 | 20,206,293 | 4,000,000 | 11,500,000 | 400,000 | 4,500,000 | 95,000 | 85,000 |
| LOCAL | 0.000/ | 25.00% | 25.00% | 400.000/ | 0.000/ | 20.00% | 400.00% | 74.000/ | 0.000/ | F0 000/ |
| SHARE % | 0.00% | 35.00% | 25.00% | 100.00% | 0.00% | 30.00% | 100.00% | 71.00% | 0.00% | 50.00% |
| AVG BUD | 356,548 | 133,333 | 83 | 1,683,858 | 333,333 | 958,333 | 33,333 | 375,000 | 7,917 | 7,083 |
| | | | | | 100 100 | 100 | | | 10= | |
| JAN | 2,367 | 293 | 0 | 1,997,805 | 133,182 | 463 | 0 | 322,666 | 485 | 1,579 |
| FEB | 342,652 | 70,834 | 0 | 1,598,244 | 188,705 | 947,406 | 0 | 358,567 | 35,544 | 3,327 |
| MAR | 364,005 | 68,210 | 514 | 1,598,244 | 232,459 | 888,941 | 0 | 394,597 | 8,421 | 8,464 |
| APR | 348,382 | 208,944 | 4,385 | 1,876,500 | 211,095 | 1,269,997 | 0 | 399,820 | 426 | 6,661 |
| MAY | 359,771 | 144,996 | 2,358 | 1,501,200 | 224,367 | 992,105 | 0 | 376,719 | (6,603) | 5,008 |
| JUN | 384,416 | 107,474 | 0 | 1,501,200 | 177,910 | 1,150,911 | 0 | 412,050 | 209 | 3,081 |
| JUL | 349,772 | 133,892 | 0 | 1,876,500 | 159,053 | 1,020,009 | 0 | 367,481 | 243 | 3,303 |
| AUG | 441,618 | 200,170 | 0 | 1,501,200 | 277,533 | 1,239,011 | 0 | 399,932 | (1,032) | 4,862 |
| SEP | 403,136 | 137,817 | 0 | 1,501,200 | 213,477 | 976,406 | 0 | 342,774 | 311 | 223 |
| ОСТ | | | | | | | | | | |
| NOV | | | | | | | | | | |
| DEC | | | | | | | | | | |
| TOTAL | 2,996,119 | 1,072,630 | 7,257 | 14,952,093 | 1,817,781 | 8,485,249 | 0 | 3,374,606 | 38,004 | 36,508 |
| | | | | | | | | | | |
| PROJ EXP: | | | | | | | | | | |
| Forecast for | | | | | | | | | | |
| Remainder | 4 005 700 | 4 470 000 | 7.500 | 20 002 007 | 0.047.700 | 44 200 240 | 00.000 | 4 400 606 | C4 755 | F7 7F7 |
| of YEAR PROJECTED | 4,065,763 | 1,472,629 | 7,506 | 20,003,667 | 2,817,780 | 11,360,248 | 99,999 | 4,499,606 | 61,755 | 57,757 |
| BALANCE | 212,809 | 127,371 | (6,506) | 202,626 | 1,182,220 | 139,752 | 300,001 | 394 | 33,245 | 27,243 |

VETERANS SERVICE AGENCY

SEPTEMBER 2024

(09/18/2024 - 10/30/2024)

MONTHLY REPORT

| Month | Personal Contacts | Tel/Mail Contacts | Total Contacts | Total Services | New Claims | Maintained Claims |
|-------------|-------------------|----------------------|-------------------|-------------------|---------------|----------------------|
| January | 36 | 241 | 277 | 587 | 32 | 03 |
| February | 53 | 227 | 280 | 485 | 28 | 11 |
| March | 93 | 366 | 459 | 1002 | 64 | 08 |
| Sub Total | 182 | 834 | 1764 | 2074 | 124 | 22 |
| April | 79 | 403 | 482 | 980 | 56 | 9 |
| May | 65 | 274 | 339 | 754 | 34 | 18 |
| June | 80 | 205 | 285 | 626 | 25 | 8 |
| Sub Total | 224 | 882 | 1106 | 2360 | 115 | 35 |
| July | 95 | 259 | 354 | 790 | 34 | 12 |
| August | 63 | 266 | 329 | 730 | 28 | 4 |
| September | 63 | 314 | 377 | 870 | 23 | 10 |
| Sub Total | 221 | 839 | 1060 | 2390 | 85 | 26 |
| October | 103 | 372 | 475 | 1119 | 42 | 19 |
| November | | | | | | |
| December | | | | | | |
| Sub Total | | | | | | |
| GRAND TOTAL | | | | | | |

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

Comments: The VSA submitted 45 new claims for Compensation and Pension in October which saw 5 decisions returning \$7.5K in new payments and over 59K in back pay going to local Veterans. This last month the VSO's completed their Annual Training with both New York State DVS and the American Legion.

^{*}Service: Amount of assistance provided for each contact