



Sullivan County

Health & Human Services

Meeting Agenda - Final

100 North Street
Monticello, NY 12701

Chair Catherine Scott
Vice Chair Amanda Ward
Committee Member Brian McPhillips
Committee Member Matt McPhillips
Committee Member Luis Alvarez

Tuesday, February 10, 2026

11:30 AM

Government Center

Call To Order and Pledge of Allegiance

Roll Call

Comments:

Reports:

1. Division of Health and Human Services
February 2026
Monthly Report

[ID-8131](#)

Attachments: [2026-02 HHS Monthly Report](#)

Discussion:

Public Comment

Resolutions:

1. To enter into agreement an annual increase for the Sullivan County Child Care Council, Inc. [ID-8086](#)
2. To appoint one and reappoint two members to the Community Services Board. [ID-8094](#)
3. To update terms of an expired inter-departmental agreement that enables DSS to utilize nursing services from the Certified Home Health Agency (CHHA) [ID-8098](#)
4. To authorize an agreement between DSS and Together for Youth to modify Resolution 484-25 [ID-8099](#)

5. To accept additional SAEF funding extending the program through [ID-8115](#)
September 30, 2026

Attachments: [2026-02 SAEF 26-LCM-01](#)
[2026-02 SAEF Allocations Attachment](#)

Adjourn



Sullivan County

Legislative Memorandum

100 North Street
Monticello, NY 12701

File #: ID-8131

Agenda Date: 2/10/2026

Agenda #: 1.

Division of Health and Human Services (DHHS) Monthly Update

February 2026

Agenda

- Drug Task Force Update
- Social Care Network
- Community Services
- Housing Programs
- Social Services
- **Childcare Update**
- Care Center
- Public Health
- Staffing Data

Pillar Meetings – Next Pillar Lead Meeting: January 9th, 2-4pm, @Government Center

Law Enforcement	Treatment	United Sullivan	Prevention	Policy	Veterans
11/6/2025	12/18/2025	Meeting Weekly	11/26/2025	11/19/2025	11/18/2025

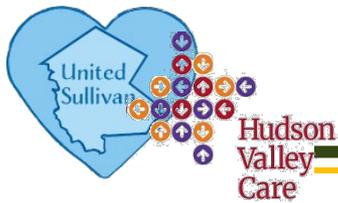
Drug Task Force Key Statistics

911 Responses to Overdose	Opioid Overdose Death Rate (2024)
December: 18 (-4 from previous month) – 7 Narcan administrations (+4)	28 deaths; 35.0/100,000 (Updated OASAS Data) 2023 totals: 38 deaths; 47.5/100,000

- December saw a decrease in overdose calls to 911.** There was, however, an increase in reported uses of Narcan.

 - We continue to see a diversification in the supply of drugs that are suspected in overdoses. This month’s suspected drugs of choice included, alcohol, cocaine, THC gummies, Celexa, Lexapro, Ambien, and Xanax.
 - A review of recent OASAS data showed a +2 increase of opioid deaths in 2024. The previous tabulation by OASAS and DOH reported 26 deaths in the County that year. 2024 still marks the first year Sullivan County did NOT have the highest overdose death rate in the state. Rates in the Bronx, Monroe, and Broome counties were all higher.
- Substance Use Care Access Update:**

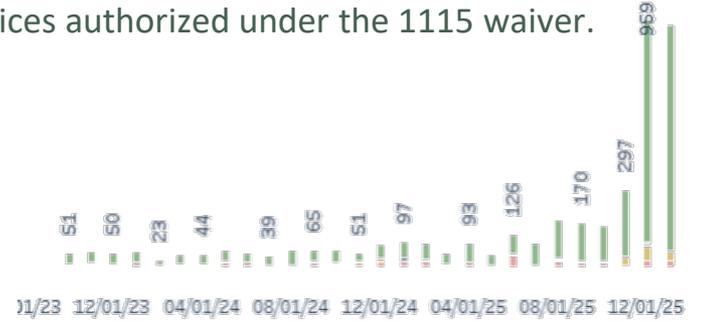
 - Garnet Health and Lexington Centers are bringing inpatient drug treatment back to Sullivan County at Garnet Health-Catskills. Lexington and Garnet are currently renovating the former skilled nursing unit in Harris as an inpatient substance use treatment facility with 47 residential and 6 detox beds. Lexington has reported steady progress with construction.
 - Lexington is also preparing to take possession of 396 Broadway in Monticello as an additional outpatient treatment resource.
 - Commissioner Liddle and Deputy Commissioner Stickle recently completed a *Catskills News Conversations* podcast discussing county-wide progress on access to treatment and the broader effort against substance use.
 - <https://www.boldgoldnewyork.com/podcast-1>



Social Care Network Update

- **Unite Us Case Activity Update:** January saw a sustained high level of cases added to the Social Care Network due to continued growth in screening and utilization of enhanced Medicaid services authorized under the 1115 waiver.

- Our next steps to continue to enhance access to health and human services will be to focus on bringing all DCS, DPH, and DSS staff onto the Unite Us platform. Thanks to the funding structure of the 1115 waiver, this will come at no cost to the county through at least March 2027.



- **Social Care Access:** UNITED SULLIVAN’s next step to ease access to primary care, mental health, addiction services and dental care will be to pair with local healthcare providers and community-based organizations in shared space.
 - The Department of Community Services (DCS) submitted a grant application in November which would cover personnel costs for Mental Health specialists who would be a part of this care team. We hope to hear a funding decision from OMH next month.

Local Unite Us Partners (42 Agencies/Locations)				
Liberty Police Department	The Center for Discovery	Rehabilitation Support Svcs	Cornell Cooperative	Dept of Community Services
Sullivan County Probation	Dispute Resolution Center	Sullivan 180	Office for the Aging	Dynamic Youth Community
HONOR, INC.	Independent Living – Peer Parent Services	Sullivan County Youth Bureau	Action Toward Independence	Catholic Charities - Behavioral Health
Every Person Influences Children (EPIC)	Lexington Center – Liberty and Monticello	Legal Services of the Hudson Valley	Garnet Health Medical Center - Catskills	Community Action – Liberty and Monticello Offices
Independent Living, – Peer Diversion	Independent Living, Inc – Independent Living Skills	Catholic Charities – Human Services	Center for Workforce Development	Sullivan Allies Leading Together
Mobile Mental Health	Restorative Management	Dept of Social Services	Bridge Back to Life	Choices Mental Health
Sun River Health	Community Home Health Care	Astor Services	American Nutrition Alliance	Dept of Public Health
Kayla’s Place, LLC	Teton Health Solutions			

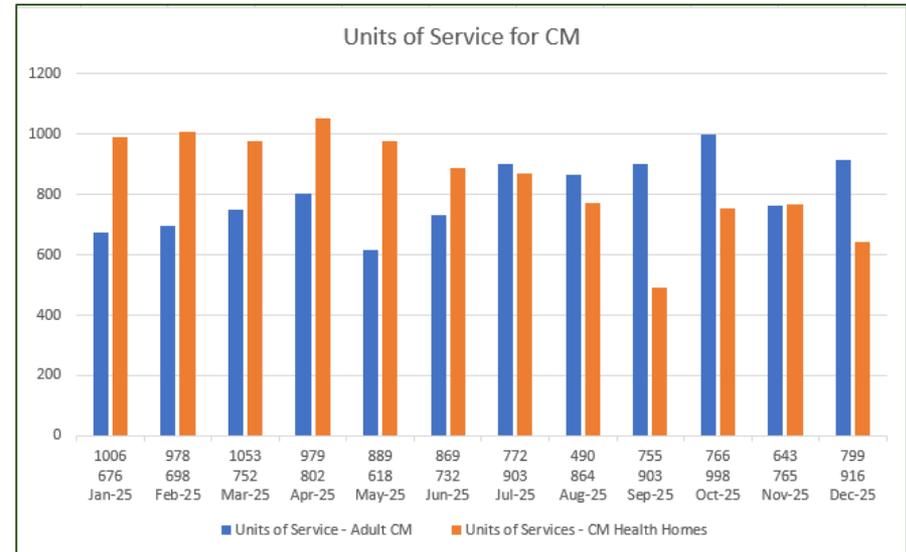
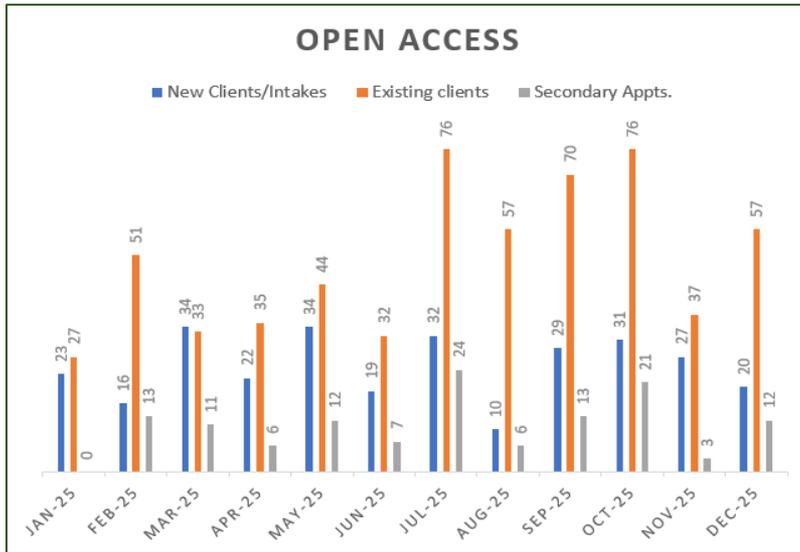


Community Services Update – Clinic and Care Management

Clinic & Treatment Services: We continue to collect data from local providers to help identify ways to ease access and improve retention in mental health care, substance use, housing, and benefit systems. Our current emphasis is on successful referrals & treatment via Unite Us and strengthening provider cooperation from inpatient to residential and outpatient care.

High Risk Clients: In December 2025, there were 169 clients on the roster for high-risk census.

The Care Management unit continues to actively engage & work with clients for both of the Health Home agencies and the HARP Services (Health and Recovery Plan) which are Medicaid and Medicaid Managed Care Health Plans. As of the end of December 2025, there are 4 active Assisted Outpatient Treatment (AOT) orders and there is 1 person on enhanced AOT services.





Clinic and Care Management Statistics

SULLIVAN COUNTY DEPARTMENT OF COMMUNITY SERVICES						
STATISTICAL SUMMARY FOR: December 1, 2025 - December 31, 2025						
Prepared by : Sara A. Cole				CLIENTS		
PROGRAM	ON ROLLS:	ADMISSIONS	DISCHARGES	ON ROLL:	CLIENTS	UNITS OF
	12/1/2025			12/31/2025	SERVED	SERVICE
SC BEHAVIORAL HEALTH CLINIC ADULT	458	20	24	454	478	621
SC BEHAVIORAL HEALTH CLINIC CHILD	28	6	4	30	34	31
SC BEHAVIORAL HEALTH CLINIC FORENSIC	70	8	8	70	78	110
SC BEHAVIORAL HEALTH CLINIC MICA	20	1	2	19	21	Included In Clinic Adult
SC BEHAVIORAL HEALTH CLINIC MAT	15	0	0	15	15	Included In Clinic Adult
TOTAL MENTAL HEALTH	591	35	38	588	626	762
SC CARE MANAGEMENT	34	2	0	36	36	888
SC HEALTH HOME - ADULT	36	1	1	36	37	228
SC HEALTH HOME - KENDRA, AOT and HH+	11	1	0	12	12	122
SC HEALTH HOME - CHILD	16	0	1	15	16	223
SC HEALTH HOME - OUTREACH	9			9	9	226
SC CM CCSI					6	28
TOTAL HEALTH HOME CASE MANAGEMENT PROGRAMS	106	4	2	108	116	1,715
SC SPOA - Adult	41			41	41	267
SC SPOA - Child	19			19	19	151
TOTAL SPOA	60	0	0	60	60	418
	# of calls	#of ph interv	Outreaches	Hosp Divers %	Hosp Admit %	
MOBILE MENTAL HEALTH						

SULLIVAN COUNTY DEPARTMENT OF COMMUNITY SERVICES						
STATISTICAL SUMMARY FOR: December 1, 2024 - December 31, 2024						
Prepared by : Sara A. Cole				CLIENTS		
PROGRAM	ON ROLLS:	ADMISSIONS	DISCHARGES	ON ROLL:	CLIENTS	UNITS OF
	12/1/2024			12/31/2024	SERVED	SERVICE
SC BEHAVIORAL HEALTH CLINIC ADULT	438	23	22	439	461	574
SC BEHAVIORAL HEALTH CLINIC CHILD	9	0	1	8	9	5
SC BEHAVIORAL HEALTH CLINIC FORENSIC	64	3	3	64	67	67
SC BEHAVIORAL HEALTH CLINIC MICA	14	1	1	14	15	Included In Clinic Adult
SC BEHAVIORAL HEALTH CLINIC MAT	10	1	3	8	11	Included In Clinic Adult
TOTAL MENTAL HEALTH	535	28	30	533	563	646
SC CARE MANAGEMENT	25	3	1	27	28	741
SC HEALTH HOME - ADULT	48	0	3	45	48	400
SC HEALTH HOME - KENDRA, AOT and HH+	18	0	0	18	18	204
SC HEALTH HOME - CHILD	12	0	1	11	12	131
SC HEALTH HOME - OUTREACH	15			15	15	256
SC CM CCSI					3	10
TOTAL HEALTH HOME CASE MANAGEMENT PROGRAMS	103	3	5	101	109	1,486
SC SPOA - Adult	55			55	55	380
SC SPOA - Child	11			11	11	99
TOTAL SPOA	66	0	0	66	66	479
	# of calls	#of ph interv	Outreaches	Hosp Divers %	Hosp Admit %	
MOBILE MENTAL HEALTH	202	77	18	72	80	

Year-over-Year Comparison:

- In December 2025, the clinic delivered 762 units of mental health services, a 15.2% increase over the same period in 2024.
- Health Home Case Management delivered 1,715 units of service, a 13.4% increase over 2024.



Clinic and Care Management Statistics

SULLIVAN COUNTY						
DEPARTMENT OF COMMUNITY SERVICES						
STATISTICAL SUMMARY FOR: January 1, 2025 - December 31, 2025						
Prepared by : Sara A. Cole				CLIENTS		
	ON ROLLS:			ON ROLL:	CLIENTS	UNITS OF
PROGRAM	1/1/2025	ADMISSIONS	DISCHARGES	12/31/2025	SERVED	SERVICE
SC BEHAVIORAL HEALTH CLINIC ADULT	448	309	303	454	5721	8710
SC BEHAVIORAL HEALTH CLINIC CHILD	7	49	26	30	262	297
SC BEHAVIORAL HEALTH CLINIC FORENSIC	66	88	84	70	945	1345
SC BEHAVIORAL HEALTH CLINIC MICA	27	20	28	19	270	Included In Clinic Adult
SC BEHAVIORAL HEALTH CLINIC MAT	13	15	13	15	209	Included In Clinic Adult
TOTAL MENTAL HEALTH	561	481	454	588	7,407	10,352
SC CARE MANAGEMENT	29	12	4	36	41	9545
SC HEALTH HOME- ADULT	46	6	17	36	52	4003
SC HEALTH HOME - KENDRA, AOT and HH+	18	3	9	12	21	1873
SC HEALTH HOME - CHILD	11	10	6	15	21	2067
SC HEALTH HOME - OUTREACH					127	2159
SC CM CCSI					18	82
TOTAL HEALTH HOME CASE MANAGEMENT PROGRAMS	104	31	36	99	280	19,729
SC SPOA - Adult					675	4164
SC SPOA - Child					223	1688
TOTAL SPOA	0	0	0	0	898	5852
	# of calls	#of ph interv	Outreaches	Hosp Divers %	Hosp Admit %	
MOBILE MENTAL HEALTH	2671	936	282	70.91666667	68.33333333	

Crisis Intervention & Law Enforcement Support

- **Crisis Intervention Team Initiative:** Sustained Crisis Intervention Team (CIT) following October training. Continued post-training follow-up and alignment with law enforcement partners.
- **Mobile Crisis Services:** Working with Independent Living to develop a peer + law enforcement mental health co-response.
- **Training:** Disaster Mental Health: November 18, 2025 with new trainings set for February 2026.

Month/Year	Incoming Calls	Intial Phone Contacts	Outreaches	Diversion Rate	Hospital Referrals	Admissions	Admission Rate
Dec-24	202	77	18	72%	5	4	80%
Jan-25	214	70	21	71%	6	5	83%
Feb-25	214	78	28	75%	7	6	86%
Mar-25	267	88	26	81%	5	3	60%
Apr-25	250	70	24	92%	2	2	100%
May-25	236	90	26	73%	7	5	71%
Jun-25	278	98	27	70%	8	7	88%
Jul-25	297	140	25	72%	7	4	57%
Aug-25	227	78	26	69%	8	2	25%
Sep-25	197	68	26	85%	4	4	100%
Oct-25	267	76	22	73%	6	5	83%
Nov-25	224	80	31	90%	3	2	67%
Dec-25	249	86	36	72%	10	6	60%
2025 Totals	2920	1022	318	77%	73	51	70%



Community Services Update – Local Government Unit

Single Point of Access (SPOA) Program:

- On December 11, 2025, the Adult SPOA Committee met via Zoom with 4 new cases & 12 previous cases reviewed.
- There are a total of 138 RSS beds with 110 people on the waiting list and 13 openings. Children’s SPOA Committee met via Zoom on December 18, 2025, and went over 7 previous cases and 6 new cases.

Peer & Community Support Services

- **Peer Court Navigator Program:** Onboarded new clients, and working with 13 patients; conducted screenings, release forms, benefit navigation, harm reduction outreach, hotel & community-based engagement, and CTRT engagement support.
- **Narcan Outreach:** Continued distribution through Naloxboxes, community events, and vending machines. Additional Naloxboxes were put up in the western part of the County. Fentanyl/Xylazine test strips and wound care kits are also regularly restocked.
- **Community & Recovery Engagement:** Ongoing collaboration with Oxford House & recovery housing partners. Continued recovery housing coordination to support discharge stability. Sustained client engagement across mental health, substance use, housing, and benefit systems.

Community Awareness & Public Engagement

- **Bold Gold Marketing:** Commissioner Liddle negotiated annual contract extension, maintaining current authorized cost while working with Bold Gold for more targeted messaging.
- **Community Events, Outreach, & Media Engagement:** Food pantry and warming center resources to justice, treatment, & community partners.
- **School & Community Resource Distribution:** Distributed updated OPWDD resources. Working on networking and linking Coordinated Care Organizations to schools.
- **Care Coordinator:** Working with Garnet Health to conduct In-Service Training at the hospital, will bring multiple community providers to Harris this month to improve discharge coordination.

Sullivan County's Housing Continuum



Safe Options Support (SOS)

- 1x hotel hosting Family Groups (19)
- 6x hotels hosting singles
- Warming Centers (~40 seasonal)
- Fearless! (Out-of-county DV shelter)

Access: Supports for Living

- WestCOP (Veterans)
- NYS Rental Supplement Program (RSP) Sullivan County RSP
- Section 8 Vouchers
- NYS Housing Choice Vouchers (5) (Coming March 2026)
- Shelter Arrears Eviction Foreclosure (SAEF)

Emergency Shelter Census (1/29/26)

Families	46 (+4)
Singles	172 (+7)
Adults	239 (+10)
Children	78 (+8)
Sex Offenders	26 (no change)
Total (Adults + Children)	317 (+18)

Other Programs:

- SOS "Housing First" (8)
- Catholic Charities (28)
- Oxford House (~18)
- Rehabilitation Support Services (RSS) (138, 110 waiting)
- Swan Lake Adult Home
- OPWDD Homes (TCFD, ARC, New Hope)
- Monticello Housing Authority
- Woodbourne Housing Authority
- Senior Apartment Buildings
- ATI - Solutions to End Homelessness Program (STEHP)

* Numbers in parentheses indicate number of available beds/units

* Numbers in red indicate programs that are at their capacity

Child and Adult Services Statistics

ADULT SERVICES UNIT	2024 TOTAL	2025 YTD	2025 DEC
PERSONAL CARE AIDES			
CASES OPENED	31	18	1
CASES CLOSED	18	9	0
# CASES (AVG.)	34	38.41	39
PERS			
# CASES (AVG.)	0	0	0
APS REFERRALS			
16A Neglect/Abuse	30	27	0
16B Neglects Own Basic Needs	67	73	4
16B Untreated Medical Conditions	36	31	1
16B Self-endangering Behaviors	21	10	2
16B Unable to Manage Finances	47	39	1
16B Environmental Hazards	38	60	10
Undetermined	7	25	5
APS			
CASES OPENED	245	263	23
CASES CLOSED	238	264	19
# CASES (AVG.)	153	161.35	163
GUARDIANSHIPS			
OPEN	38	46	0
REP PAYEE			
OPEN	108	121	1

FOSTER CARE STATISTICS				CHILD PROTECTIVE STATISTICS			
	DEC 2025	Trend	Goal		2024	YTD 25	DEC
Kinship%	24.77%		20%	# New Reports	1425	1330	133
Congregate Care%	17.43%		16%	# Closed Cases (UNF, FAR, IND)	904	997	95
Total in Care	109		<100	# Unfounded Reports	466	486	38
RTF/RTC	6			# Closed FAR	232	257	27
Diagnostic	1			# Indicated Reports	206	254	30
Group Home	1			Physical abuse	17	14	2
Therapeutic Foster Home	21			Emotional abuse	0	1	0
Regular Foster Home	39			Sexual abuse	7	13	0
Kinship	27			Neglect	96	123	18
Other	14			Domestic violence	15	15	1
Freed for Adoption	24			Educational neglect	37	52	6
Certified Homes	75		5x# in care	Substance abuse	29	33	3
Newly Certified Homes	1			1034	5	3	0
Number of Closed Homes	1			PREVENTIVE SERVICES STATISTICS			
New Kinship Homes	2			NEW REFERRALS		16	
Pending Certification	1			TOTAL CASES		88	
Completed Adoptions	2						
YTD Completed Adoptions	4						

- Foster Care Statistics:** We achieved a significant decline in the number of children in foster care in December, with a net of eight children leaving the foster care system to permanency last month. We are also achieving historic highs for placement in kinship care and historic lows in congregate care placements, which is great news for the cost of foster care and generating statistically better outcomes for the kids in our care.
- Child Protective Statistics:** We ended the year with 1,330 reports received from the State Central Registry of Child Abuse and Neglect (SCR) for 2025. Other than the pandemic year of 2020, this is the lowest number of reports recorded since we started keeping our internal annual records in 2007. Although we don't have the ability to fully analyze the reasons for this, we believe our improving communications with local school districts and improved call screening at the SCR are contributing to the reduction.

Child Welfare Case Lifecycle Management

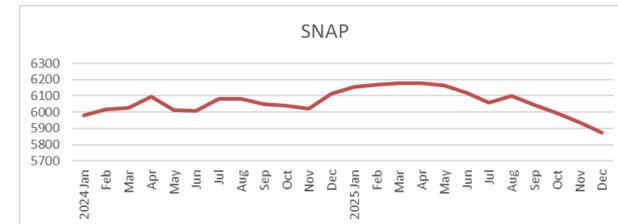
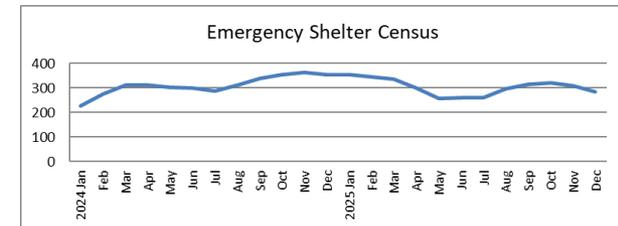
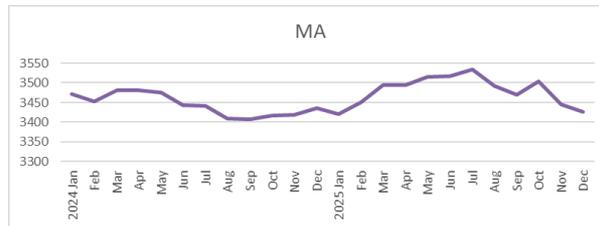
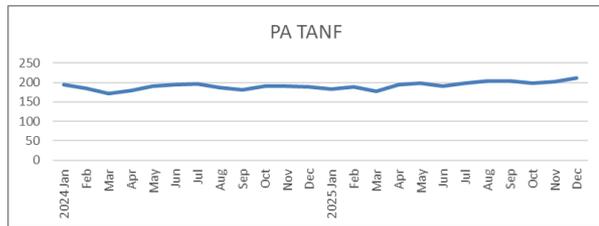
CHILD WELFARE CASE LIFECYCLE MANAGEMENT DASHBOARD													
	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	
EOM STATISTICS (Based on last day of month totals)												AVERAGE	
Overdue 7-day Safety Assessments (INV)	2	1	<1	0	0	0	0	0	<1	<1	0	<1	0.375
Overdue 7-day Safety Assessments (FAR)	1	1	<1	0	<1	0	0	0	0	0	0	0	0.2
Overdue Case Closures (INV)	103	56	52	28	30	<1	11	6	4	4	5	8	27.90909091
Overdue Case Closures (FAR)	45	22	21	9	14	<2	3	1	1	1	3	3	11.18181818
PREV Referral Timeliness days	8	3	9	6	6	2	2	3	1.5	5	5	6	4.708333333
QUARTERLY INTERNAL COMPLIANCE AUDITS (GREEN INDICATORS = ≥85% Effective, YELLOW = 75%-84%, RED = ≤74%)												AVERAGE	
INV Progress Notes	74%			81%			88%			80%			0.8075
FAR Progress Notes		86%			80%			80%			86%		0.83
PREV Progress Notes		56%			65%			56%			65%		0.605
Foster Progress Notes			65%			50%			44%			85%	0.61
PREV Case Contact Rate ≥ 2 per month	35%			75%			81%			50%			0.6025
Foster Case Contact Rate ≥ 1 per month		75%			85%			78%			65%		0.7575
Supervisor Case Conferences		12%			55%			87%			77%		0.5775
LSRs Submitted Timely			100%			100%			100%			100%	1
Annual LODs Reviewed Timely/up to date			0%			26%			43%			38%	0.2675
HOTLINE SOURCES												ANNUAL TOTAL	
School	55	36	50	33	66	36	6	5	30	51	42	48	458
Immediate Family	10	12	8	10	11	7	7	8	9	11	8	9	110
Extended Family	6	6	7	7	6	2	9	7	10	8	5	11	84
Hospital	6	12	12	10	12	16	13	6	13	14	10	15	139
Other Medical Provider	10	6	2	9	9	9	11	6	8	8	4	5	87
Law Enforcement	9	16	21	12	16	14	14	15	25	24	12	19	197
DSS Internal	4	7	10	12	6	7	13	9	5	10	9	9	101
Other	4	17	24	13	15	10	22	16	22	26	15	17	201

- Internal Audits:** We continue to perform very strongly in CPS investigations, and have seen significant improvement in documentation impacting our funding and progress of foster care cases through the family court system. Keeping up with case notes and contacts continues to be a challenge for the child welfare team. To improve these statistics, we continue to focus on holding contractors accountable for their obligations and staff development. Retention has been better over the past two years, so we are optimistic these numbers will improve with more experience.

Social Services Program Statistics

Fraud Investigations (as of 12/31/2025)						
Collections	Cases Active	Cases Referred	Completed	Arrests	Pending arrests	Burials
\$12,078.88 (+6,257.93)	273 (+/-0)	32 (+3)	32 (+5)	1 (+/-0)	7 (+/-0)	6 approved (+3) \$11,832.20 costs (+5,917.20)
Child Support Enforcement Cases (as of 12/31/2025)						
Collections	Petitions Filed	Paternity Establishments	Total Cases			
\$559,868 (+\$18,023)	26 (+8)	12 (-2)	2,693 (-2)			

Public Assistance (PA) Cases (as of 12/31/2025)				
Temp. Assistance to Needy Families (TANF)	Safety Net	Food Stamps	Medical Assistance (MA)	MA/Supplemental Security Income (SSI)
211 (+8)	294 (+9)	5872 (-67)	3426 (-20)	2401 (-17)
Homelessness Snapshot (as of 12/31/2025)				
Code Blue	Quarantined	Adults / Children	Sex Offenders	Emergency Shelter Census
5 (+4)	0	213/72 (-8/-15)	27 (+/-0)	285 (-23)





Childcare Assistance Program (CCAP) Update

- *DSS leadership attended the New York Public Welfare Association's Winter Conference in Albany January 28-30. The future of CCAP was a major topic of discussion.*
 - *Statewide, the Governor has committed to funding the program with \$600million more base funding than last year, with additional investments in capital programs for childcare.*
 - *We expect there will be \$155million dedicated to supplementing the current federal fiscal year allocation for upstate counties. While we were not provided with detailed breakdowns for the anticipated additional funding, it will contribute to paying off last year's massive increase in cases and will potentially help us open the program for new applicants earlier than expected this year.*
 - *Although the massively expanded eligibility has caused many counties to exhaust funding allocations, the Governor's Office is not open to containing the upper income limits for the program.*
 - *We did, however, receive indications from OCFS that there is openness to prioritizing lower income families.*
 - *The Governor's long-term vision for this program includes a transition to universal Pre-K for four-year-olds statewide by the 2028-29 school year.*
- **Bottom line:** *Although the information gained last week did not give us enough to determine exactly when we will be able to reopen the program for new and recertifying applicants, the news was encouraging and will help Sullivan DSS accelerate our plans to reopen our local program.*

Monthly Total Expenses to Date	Monthly Cash Receipts	End of Month Census	Meals Prepared for Residents
\$1,581,171.78	\$1,245,518.62	112	10,773
Admissions / Discharges (to home or Assisted Living)	Total ST treatments	Total OT treatments	Total PT treatments
12/6 December	68	564	714

Rehabilitation and Restorative Nursing

- Throughout December, rehabilitation patients and long-term residents participating in the restorative nursing program engaged in activities designed to reinforce cognition, memory, and recall while reminiscing about Christmas, Hanukkah, Kwanzaa, and New Year's celebrations over the course of their lives. Activities incorporated discussion and hands-on projects related to these holidays and cultural traditions.
- Residents planned and decorated the facility holiday tree and assisted in decorating the rehabilitation gym to celebrate the season. Multiple craft projects were completed to improve or maintain balance, activity tolerance, reaching, sequencing, and language skills. Residents also planned themed trees for January and February, during which money management and categorization skills were addressed. Many residents returned to or exceeded their baseline level of function and six were successfully discharged to the community.

Therapy and Staffing Updates

- We are preparing to welcome a graduate intern to our team on January 5th, with the anticipation of hiring her upon graduation in May to fill a critical Occupational Therapy/Rehabilitation need. Additionally, a full-time Physical Therapy Assistant has been hired and will begin employment the week of January 5th. Both individuals are Sullivan County residents.
- Speech Therapy continued staging all new admissions to determine current cognitive status. Facility-wide education remains ongoing to reinforce communication strategies tailored to residents' cognitive levels.

Activities & Resident Engagement:

- During the month of December, the Activities Department coordinated a variety of seasonal and cultural celebrations. Residents participated in Hanukkah observances, including dreidel games, latkes, and a religious service. Christmas-related events included a staff and resident Spirit Day, a holiday party for staff, a holiday party for residents, and an Ugly Sweater Day. A Christmas Giving Tree initiative ensured that every resident received a gift. Residents also enjoyed a New Year's Eve celebration.

Facility Infrastructure and Safety

- The facility continues efforts to eliminate enabler bars and side rails. Unit 4 and Unit 3 are scheduled for completion in January.



Goal / Area of Focus	Update / Progress
Increase and maintain the daily census of the program to ensure consistent enrollment, maximize resource utilization, and support the growing demand for home healthcare professionals.	<ul style="list-style-type: none"> Average Daily Census: 132
Increase the number of new patient admissions through enhanced referral partnerships, physician outreach, and digital marketing strategies.	<ul style="list-style-type: none"> # of referrals: 73 Referral Conversion Rate: 93% new patients: 68 discharges: 79
Productivity and Staffing: Achieve an average of 5 points per day, per clinician while maintaining high-quality care, measured through patient satisfaction scores and clinical outcome improvements.	<ul style="list-style-type: none"> Staff Productivity: 4.43 Staffing levels: See table below

Field	full-time	perdiem	contract	total
RN	6	3		9
LPN	1			1
PT	3	1		4
PTA	2			2
OT	3			3
ST	1			1
MSW	1			1
total	17	4		21



CHHA Monthly Data														
	2024 Total	January	February	March	April	May	June	July	August	September	October	November	December	2025 YTD
Staff Productivity		5.06	4.89	4.92	4.87	4.96	4.86	4.63	4.83	5.03	4.61	4.43	4.95	4.84
New Patients*	1120	122	102	96	94	69	82	100	79	85	68	69	61	1027
Discharges*	1104	108	99	98	98	84	90	89	102	90	93	79	75	1105
RN/LPN Visits*	6267	577	462	565	604	516	431	528	508	598	591	471	479	6330
PT/PTA Visits	8424	763	612	651	624	654	616	604	518	444	467	349	396	6698
OT Visits*	2353	160	157	241	228	257	242	229	189	213	266	173	212	2567
ST Visits*	854	77	72	54	57	76	70	76	46	64	78	54	62	786
MSW Visits*	680	54	54	54	54	47	46	55	48	47	60	28	26	573
HHA Visits*	497	84	77	77	56	78	63	70	62	75	62	39	52	795
Total Visits	21,299	1715	1434	1642	1623	1628	1467	1562	1371	1353	1524	1114	1227	17660

Table 1 * based on billable visits entered in our system by all clinicians

Table 1 – Legend:

- # of visits by type:
- RN- Registered Nurse
- PT- Physical Therapy
- OT- Occupational Therapy
- ST- Speech Therapy
- MSW- Master Social Work Visit
- HHA- Home Health Aid Visit

- Met goal of 100% compliance with Discharge and Transfer Summaries
- Medicare Cost Report (MCR) final rule includes -1.3% payment adjustment



Goal / Area of Focus	Key Performance Indicators	Update / Progress
Family Support Staff (FSS) will conduct at least 90% of scheduled home visits per month to ensure consistent family engagement.	<ul style="list-style-type: none"> # of enrolled families (capacity = 60) Total of 150 home visits expected per month. <ul style="list-style-type: none"> Target for completed home visits: 85% 	<ul style="list-style-type: none"> # of enrolled families: 61 89% completed home visits (154 out of 173)
Increase the number of new patient admissions through enhanced referral partnerships, physician outreach, and digital marketing strategies.	<ul style="list-style-type: none"> # of referrals # of assessments completed (Frogs) # of referrals agreed to services and registered Referral Conversion Rate (RCR) (how many referrals turned into admissions) <ul style="list-style-type: none"> Target RCR: 17% 	<ul style="list-style-type: none"> # of referrals: 8 # agreed to services and registered: 3 RCR: 38%
Maintain Full Staffing	# of staff for all HF positions	

Staffing	
Family Support Worker	2
Bilingual FSW	2
Program Supervisor	1
Program Manager	1
total	6





Children and Youth with Special Healthcare Needs (CYSHCN)/ Early Intervention (EI)



Goal / Area of Focus	Update / Progress
Ensure that initial CPSE evaluations are completed within 60 calendar days of referral.	<ul style="list-style-type: none">• # of active cases: 237
Complete initial EI evaluation and develop Individualized Family Service Plans (IFSPs) within 45 days of referral.	<ul style="list-style-type: none">• # of active cases: 219• # of new referrals: 24
Early Intervention Ongoing Service Coordinators (EI OSC) will maintain an active caseload of 35-50 families, depending on case complexity and program capacity.	<ul style="list-style-type: none">• EI OSC caseload: average of 41
Increase outreach and engagement for Children and Youth with Special Healthcare Needs (CYSHN)	<ul style="list-style-type: none">• # of active cases: 13 (+/-0) (18 children)<ul style="list-style-type: none">○ # of new referrals 0





Goal / Area of Focus	Update / Progress
Workplace Wellness	<ul style="list-style-type: none"> • # of events: 1 • # of participants: 18 • Topics covered: how to dress for winter and walking; fitness inspirational post; adding wellness walks to your Holiday
Outreach/ Education/Rural Health Network	<ul style="list-style-type: none"> • # of educational workshops: 10 <ul style="list-style-type: none"> ○ Total # of participants: 106 • # of outreach events: 16 <ul style="list-style-type: none"> ○ # directly related to RHN: 12 • # of social media posts: 42 <ul style="list-style-type: none"> ○ Top 3 post topics: December Beard, HF Toys for Tots, Seasonal Affective Disorder (SADS) • # of PH kits distributed: 63 total <ul style="list-style-type: none"> ○ See table 2 for detail
Narcan Training	<ul style="list-style-type: none"> • # of Narcan trainings: <ul style="list-style-type: none"> ○ # of participants: • # of 1-on-1 Narcan trainings: 3 • Total # trained: 3
Community Health Workers (CHW)	<ul style="list-style-type: none"> • # of CHW visits: 8 • # of referrals provided: 68 • Top identified needs: Food, HEAP, Electric Bills.

- A total of 300 outreach activities were conducted over the course of the year.
- The Winter Fall Prevention Series concluded with 98 participants.
- Since April, when formal tracking began, the Education team has distributed approximately 1,956 health kits to the public.

Table 2: Public Health Kit Distribution: December

Description	Education/Outreach
Dental Hygiene ADULT	0
Dental Hygiene KIDS	0
Emergency Preparedness	5
Men's Health	0
Women's Health	0
Mental Health	42
Hygiene Kit	0
Sexual Health Kit	1
Tick Removal Kit	1
Overdose Rescue Kit	14
Wound Care Kit	0
Total	63



- CHHA survey follow up to be expected in the new year
- Internal onboarding processes going well
- Healthy Families and Early Intervention presented program overviews at DSS

Goal / Area of Focus	Key Performance Indicators	Update / Progress
Staff education	<ul style="list-style-type: none">• # staff trainings offered• Topics covered• # of participants	<ul style="list-style-type: none">• # staff trainings offered: 4• Topics covered: Children’s Home presentation at All Staff Meeting, Centered: Staying Grounded in Uncertain Times (Webinar), PIE Training presented by Senior Budget Analyst, and Stress First Aid Training presented by Deputy Director• # of participants: 90
Quality	<ul style="list-style-type: none">• Ongoing analysis of existing policies, updates, and creation of new.	<ul style="list-style-type: none">• Began Education Lesson Plan Reviews• Attended Healthy Families Advisory Board meeting• All existing policies converted to pdfs and in shared folder• Webpage edits/new pages in progress



Disease Surveillance Investigations (DSI)

Goal / Area of Focus	Update / Progress
Immunization Program	<ul style="list-style-type: none">• # of IQIP visits performed: 0• # of VFC: 3<ul style="list-style-type: none">○ Total # vaccinated: 12
Rabies	<ul style="list-style-type: none">• # of rabies PEP in county: 3• # of exposures investigated: 39<ul style="list-style-type: none">○ Domestic: 33○ Wildlife: 6• # animals tested: 3<ul style="list-style-type: none">○ Domestic: 0○ Wildlife: 3• # of animals + for rabies: 0
Emergency Preparedness	<ul style="list-style-type: none">• # of training meetings: 6
Lead	<ul style="list-style-type: none">• Total labs drawn: 121• Lead Education: 2• # of Positive cases: 1
Tuberculosis (TB)	<ul style="list-style-type: none">• # of active TB cases: 1 (table 6)• # of LTBI follow-up cases: 32• # of suspected TB cases: 85• # of non-clinical home visits: 4• # of clinical/DOT home visits: 65
Reportable Diseases	<ul style="list-style-type: none">• # of lab reported cases: 1629 (154 COVID)<ul style="list-style-type: none">○ ↑ 1214 from previous month• See table 5 for disease type



Table 3

Sexually Transmitted Diseases (STDs)
Query Limits Selected Returned: 17 Records
Tabular Analysis of Disease
Created By the Communicable Disease Electronic Surveillance System

Disease	Total
CHLAMYDIA	14
GONORRHEA, UNCOMPLICATED	2
SYPHILIS, CONGENITAL	1
Total	17

Table 4

Hepatitis
Query Limits Selected Returned: 21 Records
Tabular Analysis of Disease
Created By the Communicable Disease Electronic Surveillance System

Disease	Total
HEPATITIS A	1
HEPATITIS B, CHRONIC	2
HEPATITIS B, NEGATIVE	2
HEPATITIS C CHRONIC	6
HEPATITIS C, NEGATIVE	10
Total	21

Table 6

Tuberculosis
Query Limits Selected Returned: 1 Records
Tabular Analysis of Disease
Created By the Communicable Disease Electronic Surveillance System

Disease	Total
TUBERCULOSIS >= 2009	1
Total	1

Table 5

General Communicable
Query Limits Selected Returned: 1629 Records
Tabular Analysis of Disease
Created By the Communicable Disease Electronic Surveillance System

Disease	Total
ANAPLASMOSIS, ANAPLASMA PHAGOCYTOPHILUM	2
CANDIDA AURIS	1
COVID-19	154
HAEMOPHILUS INFLUENZAE, INVASIVE NOT B	1
INFLUENZA, A	1219
INFLUENZA, B	9
LYME DISEASE	103
RSV UNSPECIFIED	133
SALMONELLOSIS	2
STREP GROUP B, INVASIVE	1
STREP PNEUMO INVASIVE INTERMED	1
STREP PNEUMO INVASIVE, UNKNOWN	2
STREP PNEUMO INVASIVE, SENSITIV	1
Total	1629

Community Services (4 Positions Vacant, 40 Authorized, 10.00% Vacant)

Assistant Social Worker I, #3307	Not approved to fill – on hold
Assistant Social Worker II, #3759	New Position in 2026 budget – on hold
Staff Social Worker I, #3288, #3677	Approved to fill

Public Health (19 Positions Vacant, 72 Authorized, 26.38% Vacant)

Community Health Nurse, #2185, #2927	
Early Intervention Service Coordinator, #1707	Posted
Public Health Educator, #1636	
Public Health Nurse, CHHA, #2729, DT #2784, #3419	
Public Health Occupational Therapist, #3340(PD)	Posted
Public Health Physical Therapist, #3555, #3667(PD)	
Registered Nurse, #607(PT), #747, #849, #2373, #2502(PD), #2875, #3264 (PD), #3634	
Supervising Comm Health Nurse, #148	

Social Services (15 Positions Vacant, 181 Authorized, 8.29% Vacancy Rate)

Account Clerk, #1269	Not approved to fill – on hold
Account Clerk/Database, #3050	Canvassed, interviews in progress
Administrative Secretary, #2551	Posted, interviews in progress
Caseworker #2985, #3758	Interviews continue; #3758 new position not approved to fill
FS Investigator, #260	Not approved to fill – on hold
FS Investigator Trainee, #3676	Not approved to fill – on hold
Fiscal Administrative Officer, #3103	Employee starting 2/9
Senior Case Services Aide, #3754, #3755	New Position in 2026 budget – on hold
Senior Social Welfare Examiner, #3480	Vacant due to recent promotion
Social Welfare Examiner, #295, #742, #744, #2367, #2899	Interviewing candidates



Sullivan County
Legislative Memorandum

100 North Street
Monticello, NY 12701

File #: ID-8086

Agenda Date: 2/10/2026

Agenda #: 1.

Narrative of Resolution:

To enter into agreement an annual increase for the Sullivan County Child Care Council, Inc.

Amount to be authorized by Resolution: \$3,531.16

Are funds already budgeted? No

If 'Yes,' specify appropriation code(s): Click or tap here to enter text.

If 'No,' specify proposed source of funds: A-6055-46-4615

Specify Compliance with Procurement Procedures:

RESOLUTION INTRODUCED BY HEALTH AND HUMAN SERVICES COMMITTEE TO AUTHORIZE COUNTY MANAGER TO ENTER INTO AGREEMENT AN ANNUAL INCREASE FOR THE SULLIVAN COUNTY CHILD CARE COUNCIL, INC. FOR THE PROVISION OF INFORMAL CHILD DAY CARE RELATED SERVICES FOR THE TERM OF JANUARY 1, 2025 THROUGH OCTOBER 15, 2025

WHEREAS, the County of Sullivan, through the Department of Social Services is required to arrange for the provision of Informal Child Day Care related services including the provision of Child Care Time and Attendance (CCTA) services; and

WHEREAS, the County of Sullivan, through the Department of Social Services contracts with the Sullivan County Child Care Council, Inc for those services; and

WHEREAS, major changes to the New York State Childcare Assistance Program forced a change in business practices at the Department of Social Services which drove a decision to end the contract; and

WHEREAS, the termination of the contract drove a slight increase in final expenses over the anticipated annual contract requirement; and

WHEREAS, this resolution is to modify the previous resolution to increase the annual not to exceed amount for the Sullivan County Child Care Council, Inc of \$120,800 to \$124,331.16 during the period from January 1, 2025 through October 15, 2025.

NOW, THEREFORE, BE IT RESOLVED, that the Sullivan County Legislature does hereby authorize the County Manager to execute an agreement with the Sullivan County Child Care Council, Inc for Informal Child Day Care related and CCTA services during the period January 1, 2025 through October 15, 2025; and

BE IT FURTHER RESOLVED, the contracts are at the County's discretion, subject to annual appropriation; and

BE IT FURTHER RESOLVED, the maximum of the contracts not to exceed the Department of Social

Services budgeted amount for informal child day care related services; and

BE IT FURTHER RESOLVED, that the form of said agreement will be approved by the Sullivan County Attorney's Office.



Sullivan County

Legislative Memorandum

100 North Street
Monticello, NY 12701

File #: ID-8094

Agenda Date: 2/10/2026

Agenda #: 2.

Narrative of Resolution: To appoint one (1) and reappoint two (2) members to the Community Services Board.

If Resolution requires expenditure of County Funds, provide the following information:

Amount to be authorized by Resolution: None

Are funds already budgeted? No

If 'Yes,' specify appropriation code(s):

If 'No,' specify proposed source of funds: No funds are needed.

Specify Compliance with Procurement Procedures:

RESOLUTION INTRODUCED BY THE HEALTH & HUMAN SERVICES COMMITTEE TO APPOINT/REAPPOINT MEMBERS TO THE COMMUNITY SERVICES BOARD.

WHEREAS, there are several vacancies on the Community Services Board; and

WHEREAS, there is a need to appoint one (1) person to fill a vacancy on the Community Services Board, which shall commence on January 1, 2026; and

APPOINTMENT TO THE CSB

Lisa Stivers

(to fill vacancy which was vacated by Edith "Edie" Mustavs since 09/30/2023.)

TERM

01/01/2026 to 12/31/2029

WHEREAS, there is a need to reappoint two (2) members to the Community Services Board; and

REAPPOINTING TO THE CSB

Deborah Worden

Janine Lewis

TERM

01/01/2026 to 12/31/2029

01/01/2026 to 12/31/2029

NOW, THEREFORE, BE IT RESOLVED, to appoint Lisa Stivers to fill a vacancy on the Sullivan County Community Services Board to reflect the dates set opposite of her name;

NOW, THEREFORE, BE IT RESOLVED, to reappoint two (2) members to the Sullivan County Community Services Board to reflect the dates set opposite of their names.



Sullivan County
Legislative Memorandum

100 North Street
Monticello, NY 12701

File #: ID-8098

Agenda Date: 2/10/2026

Agenda #: 3.

Narrative of Resolution:

To update terms of an expired inter-departmental agreement that enables DSS to utilize nursing services from the Certified Home Health Agency (CHHA)

If Resolution requires expenditure of County Funds, provide the following information:

Amount to be authorized by Resolution: N/A

Are funds already budgeted? No

If 'Yes,' specify appropriation code(s): Click or tap here to enter text.

If 'No,' specify proposed source of funds: N/A

Specify Compliance with Procurement Procedures: N/A

RESOLUTION INTRODUCED BY HEALTH AND HUMAN SERVICES COMMITTEE TO AUTHORIZE COUNTY MANAGER TO EXECUTE AGREEMENT BETWEEN DEPARTMENT OF SOCIAL SERVICES (DSS) AND DEPARTMENT OF PUBLIC HEALTH (DPH) FOR PERSONAL CARE SERVICES (PCS) - PROGRAM RELATED SERVICES

WHEREAS, the County of Sullivan, through the Department of Social Services, contracts for the provision of certain medical services; and

WHEREAS, the County of Sullivan, through the Department of Social Services, seeks to enter into a Memorandum of Understanding (MOU) with the Department of Public Health for the provision of Personal Care Services (PCS) - program related services; and

WHEREAS, the Sullivan County Department of Public Health is capable and willing to provide such services, with funding available through Medicaid.

NOW, THEREFORE, BE IT RESOLVED, that the Sullivan County Legislature hereby authorizes the County Manager to execute a Memorandum of Understanding between the Sullivan County Department of Social Services and the Sullivan County Department of Public Health for the period of January 1, 2026 through December 31, 2026; and

BE IT FURTHER RESOLVED, that the form of said agreements will be approved by the Sullivan County Attorney Office.



Sullivan County
Legislative Memorandum

100 North Street
Monticello, NY 12701

File #: ID-8099

Agenda Date: 2/10/2026

Agenda #: 4.

Narrative of Resolution:

To authorize an agreement between DSS and Together for Youth to modify Resolution 484-25

If Resolution requires expenditure of County Funds, provide the following information:

Amount to be authorized by Resolution: \$850.00 per diem rate

Are funds already budgeted? Yes

If 'Yes,' specify appropriation code(s): A-6070-46-4615

If 'No,' specify proposed source of funds: Click or tap here to enter text.

Specify Compliance with Procurement Procedures: N/A

RESOLUTION INTRODUCED BY THE HEALTH AND HUMAN SERVICES COMMITTEE TO AUTHORIZE THE COUNTY MANAGER TO ENTER INTO AN AGREEMENT BETWEEN THE DSS (DEPARTMENT OF SOCIAL SERVICES) AND TOGETHER FOR YOUTH TO MODIFY RESOLUTION 484-25 TO INCREASE THE RATE FOR NON-SECURE DETENTION SERVICES FROM JANUARY 1, 2026 THROUGH DECEMBER 31, 2026

WHEREAS, the County of Sullivan, through its Department of Social Services, is required to arrange for the provision of non-secure detention services for youth and families within the County; and

WHEREAS, the Department currently contracts with Together for Youth to provide such services at annually adjusted per diem rates; and

WHEREAS, Resolution 484-25, enacted by the County Legislature on December 18, 2025, established a per diem rate of \$740.00, which now requires modification to increase the rate to \$850.00 for the period of January 1, 2026 through December 31, 2026.

NOW, THEREFORE, BE IT RESOLVED, that the Sullivan County Legislature hereby authorizes the County Manager to execute an agreement, as outlined above, with Together for Youth for the provision of non-secure detention services from January 1, 2026 through December 31, 2026; and

BE IT FURTHER RESOLVED, that the maximum amount of this agreement shall not exceed the budgeted per diem rate of \$850.00 for said services; and

BE IT FURTHER RESOLVED, that the form of said contract shall be subject to the approval of the County Attorney's Office.



Sullivan County

Legislative Memorandum

100 North Street
Monticello, NY 12701

File #: ID-8115

Agenda Date: 2/10/2026

Agenda #: 5.

Narrative of Resolution:

To accept additional SAEF funding extending the program through September 30, 2026

If Resolution requires expenditure of County Funds, provide the following information:

Amount to be authorized by Resolution: \$192,000

Are funds already budgeted? Yes

If 'Yes,' specify appropriation code(s): A-6010-38-47-4752

If 'No,' specify proposed source of funds: Click or tap here to enter text.

Specify Compliance with Procurement Procedures: N/A

INTRODUCED BY HEALTH AND HUMAN SERVICES COMMITTEE TO ACCEPT ADDITIONAL SHELTER ARREARS EVICTION FORESTALLMENT (SAEF) PROGRAM FUNDING AND EXTEND THE PROGRAM

WHEREAS, the New York State Office of Temporary and Disability Assistance (OTDA) recently allocated the Department of Social Services (DSS) funding to extend the Shelter Arrears Eviction Forestallment (SAEF) program, until September 30, 2026; and

WHEREAS, eligibility for assistance through this \$192,000, which includes the additional funding allocation of \$96,933 is for the period from October 1, 2024, through September 30, 2026; and

WHEREAS, funding assistance is limited to households who have shelter arrears and require assistance to retain permanent housing; and

WHEREAS, the funds will be prioritized to fund certain households such as those with children under the age of six, single individuals with a history of housing instability, veterans, individuals and families experiencing domestic violence (DV), and other victims of violence; and

WHEREAS, funds will be used to pay no more than six months of arrears per household, if eligible; and

WHEREAS, the DSS will draw down funds from the SAEF Program in lieu of using County funds for the purpose of supporting this program.

NOW, THEREFORE, BE IT RESOLVED, that the County of Sullivan accepts this funding pursuant to the OTDA Local Commissioner's Memo 26-LCM-01 to utilize said funds to pay shelter arrears to forestall evictions and retain permanent housing; and

BE IT FURTHER RESOLVED, that the above-mentioned allocation will be contingent upon the County's receiving continued State aid at anticipated funding levels.



Local Commissioners Memorandum

Section 1

Table with 2 columns: Field (Transmittal, To, Issuing Division/Office, Date, Subject, Contact Person(s), Attachments) and Value (26-LCM-01, Social Services District Commissioners, Employment and Income Support Programs, January 5, 2026, 2024-2026 New York State Shelter Arrears Eviction Forestallment (SAEF) Program Guidance and Allocations, Public Assistance Bureau: 518-474-9344 or tabureau@otda.ny.gov, Attachment 1 - 2024-2026 SAEF Program Allocations, Attachment 2 - 2024-2026 NYS SAEF Program District Participation Form, Attachment 3 - SAEF Program Application Template, Attachment 4 - SAEF Program Notice of Determination Letter Template, Attachment 5 - SAEF Program Summation Report Template)

Section 2

I. Purpose

The purpose of this Local Commissioners Memorandum (LCM) is to inform social services districts (districts) outside of New York City of an extension to the New York State Shelter Arrears Eviction Forestallment (SAEF) program through September 30, 2026, and to notify districts of their two-year 2024-2026 SAEF program allocations (Attachment 1). Additional funds were made available in the New York State (NYS) Fiscal Year (FY) 2026 Budget to support the SAEF program. As a result, some districts will receive increases to their initial allocations to support continued operations through September 30, 2026, while other districts will have the option to continue their SAEF programs at their current allocation. Attachment 1 indicates the SAEF program allocations available to support each district from October 1, 2024, through September 30, 2026.

Districts must complete and return the 2024-2026 NYS SAEF Program District Participation Form (Attachment 2) to the Office of Temporary and Disability Assistance (OTDA) no later than January 20, 2026, to indicate whether they choose to operate a SAEF program at the funding level indicated in Attachment 1, operate at a lesser funding level, or decline all funds and elect not to participate in the SAEF program. Certain information and allocations included in this directive supersedes 24-LCM-12 and 24-LCM-19. Districts are reminded that while there is no requirement to submit a SAEF program plan to OTDA for approval, all SAEF program requirements must be met.

II. Background

In September 2024, OTDA released [24-LCM-12](#) announcing that the FY 2025 Budget appropriated \$10 million to provide for services and expenses related to the payment of shelter arrears (including rent and mortgage arrears) necessary to retain housing for certain households that are in receipt of or who would be eligible for ongoing or emergency Public Assistance (PA) pursuant to Social Services Law (SSL) §131-a. To distribute these funds, OTDA created the SAEF program to provide vital shelter arrears assistance to help eligible households retain permanent housing. In December 2024, OTDA released [24-LCM-19](#) to provide districts with supplemental SAEF program guidance.

The FY 2026 Budget appropriated an additional \$10 million to support the SAEF program. Districts may choose to retain their allocation and use district mechanisms (e.g., direct administration or transfer of funds to county agencies) to operate this program, or may delegate the administration of this program, in full or in part, to another public agency, contractor or non-profit organization.

III. Program Implications

A. Program Activities and Services

Effective October 1, 2024, districts were authorized to begin making eligibility determinations for the SAEF program. Due to the availability of additional funds and extension to the program included in the FY 2026 NYS Budget, districts may continue to make eligibility determinations for shelter arrears payments provided between October 1, 2024, and September 30, 2026. Arrears payments for eligible households may be retroactive, covering an arrears period between October 1, 2023, through September 30, 2026. Districts are reminded that SAEF program eligibility is based on circumstances at the time when eligibility is being evaluated, not during the time when arrears were accrued.

Shelter arrears payments provided through the 2024-2026 SAEF program must not exceed a total of six months of arrears per household. Arrears payments do not have to be consecutive or paid all at once; payments may be issued partially (less than six months of arrears assistance needed) or in full (all six months paid at once). There is no cap on the dollar amount that can be paid in shelter arrears under the SAEF program, as long as the arrears paid does not exceed a total of six months per household. Districts may establish local criteria that limits the amount that can be paid.

In accordance with 24-LCM-19 ([Attachment 4](#), Q&A 12), SAEF program payments may also be issued to cover mortgage arrears, homeowners' association fees, legal and/or late fees in circumstances where households can establish that those expenses are necessary to retain their housing and they meet all SAEF program eligibility requirements.

Prior receipt of shelter arrears payments through ongoing PA, the Emergency Assistance to Families (EAF) or Emergency Safety Net Assistance (ESNA) programs does not impact SAEF program eligibility. Households who previously received six months or more of shelter arrears assistance through ongoing PA, EAF or ESNA may receive additional payments via the SAEF program, not to exceed six months, if otherwise eligible for the

SAEF program.

SAEF program payments may be issued to an eligible household in tandem with a different funding source, to cover a separate period of shelter arrears that the SAEF program payment does not cover. The eligibility parameters for each funding source must be evaluated separately and met prior to issuing payments under the respective programs. Arrears payments from different funding sources must never be for the same time period. For further information, please see 24-LCM-19 ([Attachment 4](#), Q&A 17).

SAEF program payments will not be limited by the shelter allowance amount set forth in SSL §131-a and will not be part of the standard of need pursuant to SSL §131-a, and therefore, would not be considered by the Automated Budgeting and Eligibility Logic (ABEL) when computing financial eligibility for PA. SAEF program payments are not countable as income or as a resource for PA, Home Energy Assistance Program (HEAP) or Supplemental Nutrition Assistance Program (SNAP) eligibility or budgeting purposes. Additionally, SAEF program payments will not be subject to recoupment or repayment unless the application submitted was fraudulent or otherwise identified as ineligible.

B. Participant Eligibility

Districts must establish and maintain local policy governing eligibility for SAEF program payments. While districts have flexibility regarding SAEF program eligibility requirements, the governing statute outlines some minimum requirements for eligibility as follows:

- Eligible households are individuals and/or families, with or without children, who have shelter arrears (rent or mortgage arrears) and require assistance to retain permanent housing;
- Ongoing PA recipient households must first apply for shelter arrears assistance under PA and if found ineligible they must receive a denial notice, which must be documented in the case record. The household should then be assessed for SAEF program eligibility;
- Non-PA recipient households must first apply for shelter arrears assistance under EAF or ESNA and if they are found ineligible through both programs they must receive a denial notice, which must be documented in the case record. The household should then be assessed for SAEF program eligibility. Districts are reminded that a Supplemental Security Income (SSI) household may be found ineligible for Emergency Assistance for Adults (EAA), then evaluated under EAF and/or ESNA and still found ineligible. Such households may be considered for the SAEF program;
- One or more household members must meet the PA (Family Assistance (FA), Safety Net Assistance (SNA), EAF, ESNA) citizenship/non-citizen status eligibility requirements;
- Non-PA recipient households must meet the EAF or ESNA income eligibility requirements. Districts are reminded that the income of all the individuals that reside in the household, including those that may not have a non-citizen category/status that is satisfactory for PA benefit eligibility, must be counted in accordance with the EAF or ESNA income eligibility standards. OTDA issues guidance annually regarding updates to the EAF and ESNA federal poverty guidelines and the current charts are included below.

2025-2026 Income Guidelines for EAF and ESNA

Financial eligibility for EAF is determined by the gross (total) income immediately available to the household on the date of application. The household is financially eligible for EAF if the available income is at or below 200% of the Federal Poverty Level Guidelines for the household size. The below guidelines for EAF are effective April 1, 2025, through March 31, 2026.

**200% of Federal Poverty Level Guidelines
EAF Gross Available Test
By Family Size (Adjusted Annually)**

Household Size	Annual	Monthly
1	\$31,300	\$2,608
2	\$42,300	\$3,525
3	\$53,300	\$4,442
4	\$64,300	\$5,358
5	\$75,300	\$6,275
6	\$86,300	\$7,192
7	\$97,300	\$8,108
8	\$108,300	\$9,025
Each Additional Member	\$11,000	\$917

Financial eligibility for ESNA is determined by the gross income of the applying household. The household’s gross income at the time of application must not exceed 125% of the Federal Poverty Level Guidelines for the household size. The below income guidelines for ESNA are effective April 1, 2025, through March 31, 2026.

**ESNA 125% of Federal Income Poverty Level
Guidelines (Adjusted Annually)**

Household Size	Annual	Monthly
1	\$19,562	\$1,630
2	\$26,437	\$2,203
3	\$33,312	\$2,776
4	\$40,187	\$3,349
5	\$47,062	\$3,922
6	\$53,937	\$4,495
7	\$60,812	\$5,068
8	\$67,687	\$5,641
Each Additional Member	\$6,875	\$573

Households that are determined income eligible for the SAEF program as described above are not required to meet certain other PA eligibility requirements for shelter arrears payments. Unlike traditional PA shelter arrears requirements, households eligible for the SAEF program:

- May have foreseen the occurrence or situation giving rise to the need for shelter arrears assistance;

- May be unable to reasonably demonstrate an ability to pay future shelter expenses, including any amounts in excess of the appropriate agency maximum monthly shelter allowance;
- May have already received a shelter arrears payment within the prior five years; and/or
- May not be current on a shelter repayment agreement from a prior shelter arrears payment.

Households that qualify for the SAEF program under the ESNA income eligibility requirement are not subject to a repayment agreement. In addition, while PA recipient households may be eligible for assistance under the SAEF program, receipt of PA is not a requirement for determining eligibility for the SAEF program.

Districts must make sure they have policies and procedures in place to:

- Establish that the SAEF program recipient is the primary tenant/homeowner (e.g., require a lease or other documentation);
- Establish the shelter arrears amount due for the SAEF program household;
- Ensure that the SAEF program payment will be accepted to prevent eviction for a specified timeframe (in accordance with 24-LCM-19 [Attachment 4](#), Q&A 11; this is an area of local discretion and districts should work with landlords to determine a reasonable timeframe);
- Take reasonable steps to prevent the duplication of benefits;
- Issue a determination letter stating the amount approved or the reason for denial;
- Establish a process for handling fraudulent applications, including a procedure for recovering funds, if necessary; and
- Establish a process for reviewing and considering appeals of applications that are denied.

As a reminder, a formal eviction threat is not a requirement of the SAEF program but may be a requirement if the district's plan defines it as such. If households present documentation of a formal eviction, districts must evaluate and document it when making a SAEF program eligibility determination. Please see 24-LCM-19 ([Attachment 4](#) Q&A 10) for further information.

Per [24-LCM-19](#), districts are reminded that a separate SAEF program application is not a requirement for SAEF program eligibility determinations. Although not considered SAEF program applications, districts may utilize information included on completed [LDSS-2921](#) or [LDSS-3815](#) forms when evaluating eligible households for SAEF program eligibility. Districts may evaluate eligibility under the SAEF program on a first-come, first-serve basis according to the eligibility parameters above and set forth at the local level, or they may choose to prioritize households in specific circumstances within the parameters of their SAEF program plans.

While districts have flexibility in determining the overall design of their local SAEF program, they are encouraged to make extra efforts to ensure prioritization of certain households, such as those with children, households with a history of housing instability, veterans, individuals and families experiencing domestic violence (DV) and/or other forms of violence, and individuals and families in receipt of SSI and/or Social Security Disability Income (SSDI). It is each district's responsibility to ensure households are aware of the SAEF program and evaluated for assistance, as appropriate. Districts are also encouraged to refer

SAEF program applicants to apply for applicable benefit programs, such as PA, HEAP, SNAP, SSI and/or SSDI.

SAEF program payments must not be issued through the Welfare Management System (WMS), as the funding source for the SAEF program is not PA funds. SAEF program payments must be made directly to the landlord, property owner, and/or property manager on behalf of the tenant. Tenants, landlords, property owners, and/or property managers must be notified of SAEF program assistance provided on behalf of any SAEF program recipient.

Households must be notified of their SAEF program eligibility determination via a manual notice. The notice must include language advising households of their right to appeal the decision. As noted above, districts must establish their own appeals process for SAEF program funds. SAEF program households do not have fair hearing rights on SAEF program eligibility. However, a potential SAEF program household may seek a fair hearing for their shelter arrears assistance denial that they received as an ongoing PA recipient household, or under EAF or ESNA.

Districts must document all information pertaining to SAEF program eligibility determinations in the case record. All information, including notifications regarding eligibility determinations (e.g., approvals and denials) must be maintained in the case record for a minimum of six years following submission of the program summation report. Further information on the report can be found under section D, below.

SAEF program files may be stored with the PA case record in the Imaging and Enterprise Document Repository (I/EDR), or another local imaging system utilized by the district. This applies only to those districts who handle their own SAEF programs. For districts who contract out their program, SAEF program files must be kept separate from the PA case record.

[24-LCM-19](#) included a SAEF Program Application Template and a SAEF Program Notice of Determination Template. Minor updates have been made to those templates, and they are attached to this directive as Attachments 3 and 4. Districts are reminded that these templates may be used to guide implementation of the program and alleviate administrative concerns. These templates are optional, and districts may alter them to fit their program design. Districts that have been using these two templates that were initially provided under 24-LCM-19 should review the revised Attachments 3 and 4 to determine whether any changes are needed to the forms they are currently using.

C. Allocations

A total of \$20 million is available to support the SAEF program for a two-year period from October 1, 2024, through September 30, 2026. Updated 2024-2026 SAEF program allocations are listed in Attachment 1 and have been determined based on rest of state (ROS) 2023 eviction rates as reported by the New York State Unified Court System, and claims submitted for the 2024-2025 program. Some districts are receiving increases to continue operations through September 30, 2026, while other districts have the option to continue their SAEF programs at their current allocation levels, operate at a lesser funding level or opt out of SAEF program participation.

Districts are responsible for ensuring that allocations are not exceeded. Districts that overclaimed for the period of October 1, 2024, through September 30, 2025, will receive reimbursement for the claims in excess of their initial allocations (included in [24-LCM-12](#)), up to the 2024-2026 SAEF program allocation amount. However, reimbursement of any overclaims will reduce the total remaining allocation available. For example, if the district had an initial allocation of \$100,000 and they overclaimed by \$1,000, the \$1,000 will be reimbursed against the district's total 2024-2026 allocation.

For any districts that exhaust their allocation, OTDA requests that those districts track and report the number of households that may have qualified for assistance under the SAEF program to OTDA using Attachment 5. Further guidance regarding Attachment 5 is included under section D below.

D. Reporting Requirements

As part of their participation in the SAEF program, districts must keep data about each household that participates in the program. Household-payment records, to be made available on audit, must include at a minimum:

- Landlord Employer Identification Number (EIN) or other identifying information
- Landlord name or business name
- Landlord address
- Primary tenant name
- Primary tenant date of birth (DOB)
- Primary tenant race/ethnicity
- Tenant address
- Date of SAEF program payment
- Months with arrears covered by SAEF program payment
- Total SAEF program payment
- Primary tenant has open PA case at time of payment yes/no
- Number of children in household at time of payment (0-N)
- Number of adults in household at time of payment (1-N)

Households whose landlords receive multiple payments on their behalf covering more than one period will have multiple records, one for each household/payment.

Initial SAEF program reports covering the period from October 1, 2024, through September 30, 2025, were due by October 31, 2025, using the template provided in [24-LCM-19](#). A final SAEF program summation report (Attachment 5) for the period from October 1, 2025 through September 30, 2026, must be transmitted to the OTDA Public Assistance (PA) Bureau by November 30, 2026, via email at: tabureau@otda.ny.gov.

Districts are encouraged to track and report the optional characteristics of landlords and tenants using Attachment 5.

The goal of reporting is to ensure that the terms of the SAEF program are met in accordance with state legislation and to assess districts' emergency shelter arrears needs moving forward. It is the responsibility of the district to monitor any subcontracts. Districts must ensure the confidentiality of records concerning all SAEF program participants.

E. Claiming Instructions

Expenditures for the SAEF program should be claimed through the RF-17 claim package for special project claiming for the month(s) that the expenditures were made. These costs are first identified on the RF-2A claim package as F17 functional costs and reported in the F17 column on the [LDSS-923](#) “Cost Allocation Schedule of Payments Administrative Expenses Other Than Salaries” and the [LDSS-2347](#) “Schedule D DSS Administrative Expenses Allocation and Distribution by Function and Program.” After final accepting the RF-2A, the individual project costs are then reported under the project label “SAEF Program SFY2025” on the RF-17.

Salaries, fringe benefits, staff counts, and central services costs are directly entered on the [LDSS-4975A](#) “RF-17 Worksheet, Distribution of Allocated Costs to Other Reimbursable Programs” while overhead costs are automatically brought over from the RF-2A, [Schedule D](#) and distributed based upon the proportion of the number of staff assigned to this project. Employees not working all their time for the SAEF program must maintain time studies to support the salary and fringe benefit costs allocated to the program.

Non-salary administrative costs are reported with the appropriate object of expense code(s) on page 1 of the [LDSS-923B](#) “Summary - Administrative Schedule of Payments for Expenses Other Than Salaries for Other Reimbursable Programs.”

Program costs should be reported as object of expense code 37 – Special Project Program Expense on page 2 of the [LDSS-923B](#) “Summary - Program Schedule of Payments for Expenses Other Than Salaries for Other Reimbursable Programs.”

Total project costs should be reported on the [LDSS-4975](#) “Monthly Statement of Special Project Claims Federal and State Aid (RF-17)” as 100% state share excluding central services costs which are local share. Actual reimbursement will be based upon each district’s allocation.

SAEF program service period is from October 1, 2024, through September 30, 2026. Shelter arrears payments must be made by November 30, 2026, and cannot be made for services provided beyond September 30, 2026.

To receive reimbursement, claims for the period of October 1, 2024, through November 30, 2026, must be final accepted in the Automated Claiming System (ACS) by December 31, 2026. Districts must submit claims to OTDA in a timely manner.

Further instructions for completing time studies; the [LDSS-923](#), [LDSS-923B](#) and [Schedule D](#); and the RF-17 claim package are found in Chapters 4, 7, and 18, respectively, of the Fiscal Reference Manual (FRM) Volume 3. The FRMs are available online at: [Fiscal Reference Manuals | OTDA](#).

Any claiming questions should be directed to: Justin Gross at 518-474-7549 or otda.sm.field_ops.i-iv@otda.ny.gov.

IV. Reimbursement Structure and Allowable Costs

District allocations will be paid as claims are submitted to substantiate payment.

SAEF program funding is made available for districts to provide vital shelter arrears assistance to eligible households and as such, it is expected that a minimum of 85% of the funds will be used toward shelter arrears assistance in accordance with the guidelines outlined herein.

OTDA has set a 15% spending limitation on administrative costs, which includes any additional staffing needs related to determining SAEF program eligibility and issuing arrears payments. Districts should limit the amount of administrative costs necessary to operate the SAEF program to maximize both the amount of funds available to pay shelter arrears and the number of households enrolled. The use of SAEF program funds for administrative purposes must be directly related to the provision of shelter arrears to eligible households. For districts opting to assign all or a portion of their SAEF program allocation to another public agency, contractor or local nonprofit organization, districts will be held liable for assigned funds not used in a manner consistent with the purpose of the SAEF program allocation.

Districts are required to submit all claims for reimbursement through the ACS regardless of whether they elect to operate the program in-house or transfer the administration to another entity. SAEF program claims must be for shelter arrears and associated administrative costs for the period beginning October 1, 2024, through September 30, 2026, and must be claimed by December 31, 2026, per the instructions above.

V. Necessary Action

Each ROS district must complete the 2024-2026 NYS SAEF Program District Participation Form (Attachment 2) to either accept their 2024-2026 allocation, accept a lower allocation amount than the one provided, or decline their allocation. The SAEF Program Participation Form must be submitted by January 20, 2026, via email to the PA Bureau at: tabureau@otda.ny.gov.

Issued By:

Name: Valerie T. Figueroa

Title: Deputy Commissioner

Division/Office: Employment and Income Support Programs/Office of Temporary and Disability Assistance

District	2024-2026 Shelter Arrears Eviction Foreclosure Program Allocations
Albany	\$1,109,823
Allegany	\$30,000
Broome	\$495,008
Cattaraugus	\$95,224
Cayuga	\$140,249
Chautauqua	\$175,180
Chemung	\$195,365
Chenango	\$20,628
Clinton	\$105,316
Columbia	\$60,809
Cortland	\$88,496
Delaware	\$35,192
Dutchess	\$535,374
Erie	\$3,112,079
Essex	\$30,000
Franklin	\$30,000
Fulton	\$115,666
Genesee	\$66,761
Greene	\$50,717
Hamilton	\$30,000
Herkimer	\$61,585
Jefferson	\$190,188
Lewis	\$30,000
Livingston	\$55,374
Madison	\$47,613
Monroe	\$2,151,848
Montgomery	\$88,238
Nassau	\$1,182,275
Niagara	\$455,677
Oneida	\$517,262
Onondaga	\$1,196,765
Ontario	\$161,209
Orange	\$603,429
Orleans	\$29,596
Oswego	\$183,719
Otsego	\$38,297
Putnam	\$30,000
Rensselaer	\$244,331
Rockland	\$267,299
Saratoga	\$345,703
Schenectady	\$505,875
Schoharie	\$30,000
Schuyler	\$30,000
Seneca	\$37,521
St. Lawrence	\$92,119
Steuben	\$94,707
Suffolk	\$1,786,479
Sullivan	\$192,000
Tioga	\$33,898
Tompkins	\$104,799
Ulster	\$235,214
Warren	\$93,931
Washington	\$67,537
Wayne	\$109,456
Westchester	\$2,139,169
Wyoming	\$15,000
Yates	\$30,000