

Division of Health and Human Services (DHHS)

Monthly Update

May 2026

Agenda

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

Pillar Meetings – Last Pillar Lead Meeting: 4/10/2026					
Law Enforcement	Treatment	United Sullivan	Prevention	Policy	Veterans
11/6/2025	4/16/2026	Meeting Weekly	3/25/2026	4/28/2026	4/28/2026
Drug Task Force Key Statistics					
911 Responses to Overdose			Opioid Overdose Death Rate		
March: 21 (+15 from previous month) – 3 Narcan administrations (+2)			2024: 27 deaths; 33.6/100,000 Most recent 12 months (Oct '24-Sep '25) – 19 deaths; 23.6		

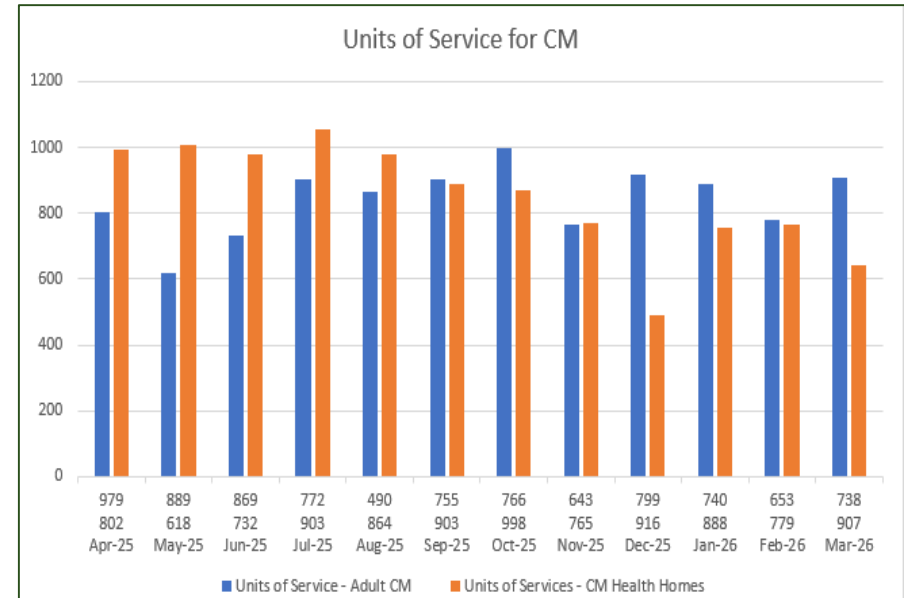
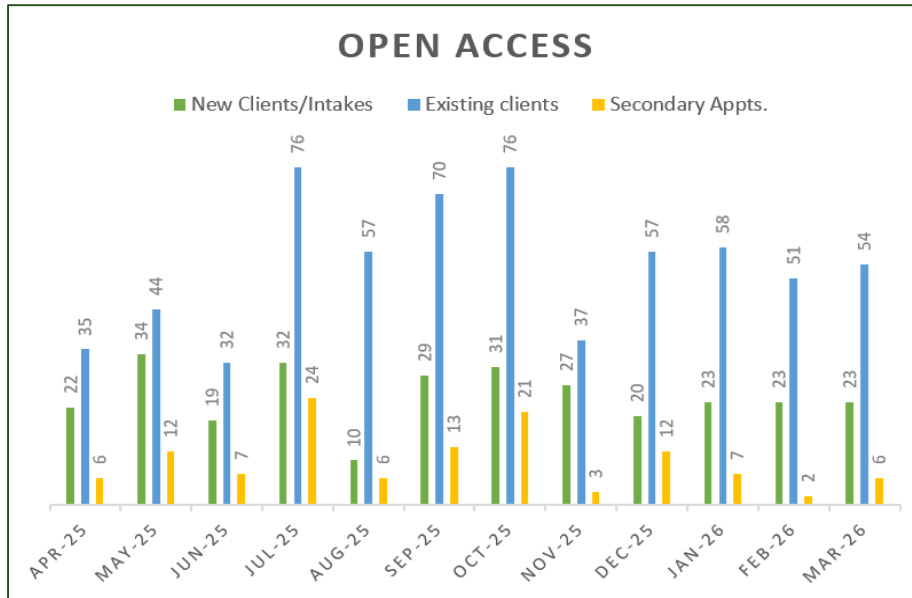
- **March saw a significant increase in overdose calls to 911.**
 - The large jump followed a historically quiet February. Seven of the reported overdoses involved alcohol. Narcan administrations by EMS remained low.
- **RFP released for next round of Direct Share Opioid Settlement Fund Use**
 - Focus areas for this round include: Supporting treatment, **supporting long term recovery**, increasing access to care, prevention, and supporting high risk populations
 - Initial proposal review is in progress.
- **Next open public meeting, May 15th @ 2pm. Government Center, Legislative Hearing Room.**
 - Anyone planning to attend is encouraged to submit advance questions to michael.osepowicz2@sullivanny.gov
- **Substance Use Care Access Update:**
 - Renovations on the third floor of Garnet-Catskills for re-utilization as an inpatient substance use treatment facility with 47 residential and 6 detox beds is nearing completion. There are unfortunately some long lead time items that are delaying completion. There may be an opportunity for an earlier “soft opening” but the full facility now looks to be ready to open in July.
 - Lexington has obtained the necessary permits to update 396 Broadway in Monticello for use as an additional outpatient treatment resource. Renovations are underway here as well.

Community Services Update – Clinic and Care Management

High Risk Clients: In March 2026, there were 166 clients (+2 from last month) on the roster for high risk census.

- **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.

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 March 2026, there are 3 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: Mar 01, 2026 - March 31 ,2026						
Prepared by :Sara A. Cole				CLIENTS		
PROGRAM	ON ROLLS: 3/1/2026	ADMISSIONS	DISCHARGES	ON ROLL: 3/31/2026	CLIENTS SERVED	UNITS OF SERVICE
SC BEHAVIORAL HEALTH CLINIC ADULT	487	30	11	506	517	585
SC BEHAVIORAL HEALTH CLINIC CHILD	28	5	1	32	33	37
SC BEHAVIORAL HEALTH CLINIC FORENSIC	69	5	7	67	74	93
SC BEHAVIORAL HEALTH CLINIC MICA	0	0	0	0	0	Included In Clinic Adult
SC BEHAVIORAL HEALTH CLINIC MAT	0	0	0	0	0	Included In Clinic Adult
TOTAL MENTAL HEALTH	584	40	19	605	624	715
SC CARE MANAGEMENT	38	0	0	38	38	905
SC HEALTH HOME- ADULT	35	1	0	36	36	277
SC HEALTH HOME - KENDRA, AOT and HH+	11	0	0	11	11	123
SC HEALTH HOME - CHILD	15	2	0	17	17	195
SC HEALTH HOME - OUTREACH	10			10	10	143
SC CM CCSI					1	2
TOTAL HEALTH HOME CASE MANAGEMENT PROGRAMS	109	3	0	112	113	1,645
SC SPOA - Adult	48			48	48	306
SC SPOA - Child	12			12	12	136
TOTAL SPOA	60	0	0	60	60	442
	# of calls	#of ph interv	Outreaches	Hosp Divers %	Hosp Admit %	
MOBILE MENTAL HEALTH	255	90	29	93	50	

Crisis Services/Mobile Mental Health Update

- **School & Community Resource Distribution/OPWDD Coordination:** Ongoing work related to OPWDD information, Front Door process eligibility, and coordination with Community Care Organizations (CCO's); continued distribution of updated resources and guidance to community partners.

Crisis Intervention & Law Enforcement Support

- **Crisis Intervention Team Initiative:** Sustained Crisis Intervention Team (CIT) working on co-response planning. Continued post-training follow-up and alignment with law enforcement partners.
- Approved No Cost Time Extension (NCTE) enables continuation of crisis service development through 2026. Extension supports sustained CIT expansion, crisis system alignment, and emergency responder coordination. Awaiting additional direction from OMH to finalize service enhancement plan.

Month/Year	Incoming Calls	Initial Phone Contacts	Outreaches	Diversion Rate	Hospital Referrals	Admissions	Admission Rate
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%
Jan-26	235	76	13	77%	3	1	33%
Feb-26	183	60	21	76%	5	4	80%
Mar-26	255	90	29	93%	2	1	50%

Single Point of Access (SPOA) Program:

- On March 12 2026, the Adult SPOA Committee met via Zoom with 4 new cases & 7 previous cases reviewed.
- There are a total of 138 RSS beds with 118 people on the waiting list **(+1 from last month)** and 13 openings **(-4 from last month)** with some of the apartments in need of repairs.
- Children’s SPOA Committee met via Zoom on March 26, 2026, and went over 11 previous cases, plus 5 new cases.

Peer & Community Support Services

- **Peer Court Navigator Program:** Onboarded new clients, as well as working with 22 patients; conducted screenings, completed release forms, provided benefit navigation, supported harm reduction outreach, and engaged in hotel & community-based interactions, including CTRT engagement support.
- **Narcan Outreach:** Continued distribution through Naloxboxes, community events, and vending machines. From Nov. 2025 to March 2026, 112 Narcan Kits items were dispensed from our vending machines. Fentanyl/Xylazine test strip and wound care kits are also regularly restocked.
- **Community & Recovery Engagement:** Ongoing collaboration with Oxford House & recovery housing partners..

Community Awareness & Public Engagement

- **United Sullivan.org:** Major website upgrades added this month.
- **Community Events, Outreach, & Media Engagement:** Distributed food pantry and warming center resources to justice, treatment, & community partners.



Sullivan County's Housing Continuum



Safe Options Support (SOS)

1x hotel hosting Family Groups (25)

SOS "Housing First" (9)

Catholic Charities (28)

Swan Lake Adult Home

Monticello Housing Authority

Warming Centers (~40 seasonal)

8x hotels hosting singles

Oxford House (~16)

OPWDD Homes (TCFD, ARC, New Hope)

Woodbourne Housing Authority

Rehabilitation Support Services (RSS) (138, 118 waiting)

Out-of-county DV shelters

Senior Apartment Buildings

ATI - Solutions to End Homelessness Program (STEHP)

Emergency Shelter Census (5/4/26)

Families	32 (-12)
Singles	159 (-6)
Adults	208 (-20)
Children	57 (-25)
Sex Offenders	26 (+2)
Total (Adults + Children)	265 (-45)

Access: Supports for Living

WestCOP (Veterans)

NYS Rental Supplement Program (RSP) Sullivan County RSP

Section 8 Vouchers

NYS Housing Choice Vouchers (5)

Shelter Arrears Eviction Foreclosure (SAEF)

* 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	2025 TOTAL	2026 YTD	2026 MAR
PERSONAL CARE AIDES			
CASES OPENED	18	0	0
CASES CLOSED	9	6	0
# CASES (AVG.)	38.41	33.93	33
PERS			
# CASES (AVG.)	0	0	0
APS REFERRALS			
16A Neglect/Abuse	27	23	11
16B Neglects Own Basic Needs	73	16	1
16B Untreated Medical Conditions	31	9	2
16B Self-endangering Behaviors	10	3	1
16B Unable to Manage Finances	39	6	2
16B Environmental Hazards	60	6	0
Undetermined	25	0	0
APS			
CASES OPENED	263	63	17
CASES CLOSED	264	77	25
# CASES (AVG.)	161.35	154.17	149
GUARDIANSHIPS			
OPEN	46	45	1
REP PAYEE			
OPEN	121	124	2

FOSTER CARE STATISTICS				CHILD PROTECTIVE STATISTICS			
	MAR 2026	Trend	Goal		2025	YTD 26	MAR
Kinship%	28.83%			# New Reports	1330	380	141
Congregate Care%	15.32%			# Closed Cases (UNF, FAR, IND)	997	268	97
Total in Care	111			# Unfounded Reports	486	124	45
RTF/RTC	4			# Closed FAR	257	67	25
Diagnostic	0			# Indicated Reports	254	77	27
Group Home	2			Physical abuse	14	8	6
Therapeutic Foster Home	22			Emotional abuse	1	0	0
Regular Foster Home	38			Sexual abuse	13	2	0
Kinship	32			Neglect	123	41	15
Other	13			Domestic violence	15	1	0
Freed for Adoption	24			Educational neglect	52	12	1
Certified Homes	68			Substance abuse	33	13	5
Newly Certified Homes	1			1034	3	0	0
Number of Closed Homes	1			PREVENTIVE SERVICES STATISTICS			
New Kinship Homes	3			NEW REFERRALS	16		
Pending Certification	2			TOTAL CASES	92		
Completed Adoptions	0						
YTD Completed Adoptions	4						

- Foster Care Statistics:** Placements in foster care increased (+5) in March. We are continuing our current trend toward historic highs for placement rates in kinship care and historic low rates 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:** March saw a 20% increase in new reports assigned after an unusually quiet February. March CPS performance statistics provided to us from OCFS showed Sullivan County as one of the top 9 programs in the state for on-time completion of CPS investigations (100% at end of month) and an improvement to 18th in the state for on-time completion of safety assessments (97%). **This was the first time since we started tracking this dataset that Sullivan County was at the top of state rankings for on-time completion of CPS investigations!**

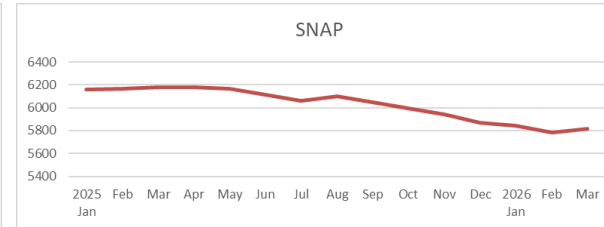
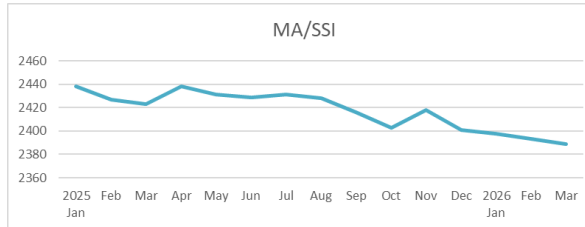
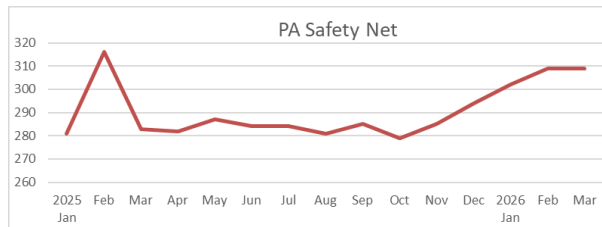
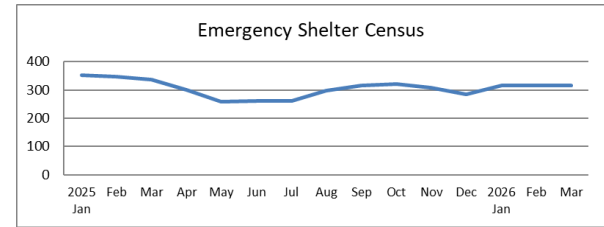
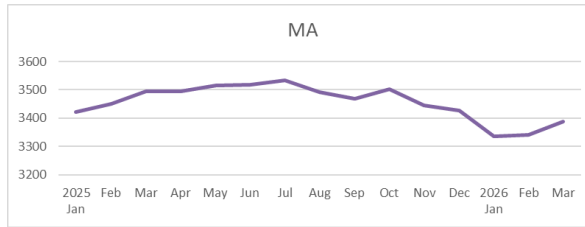
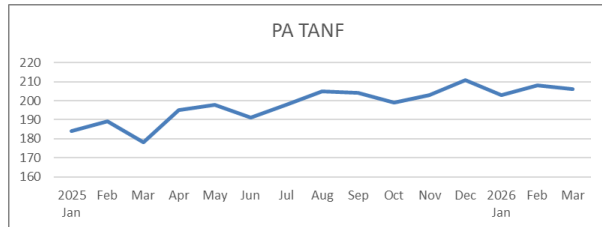
Child Welfare Case Lifecycle Management

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 (CPS)	<1	<1	0										0
Overdue 7-day Safety Assessments (FAR)		0<1	0										0
Overdue Case Closures (CPS)	14	8	4										8.66666667
Overdue Case Closures (FAR)	4.5	4	3.5										4
PREV Referral Timeliness	7	16	6.5										9.83333333
QUARTERLY INTERNAL COMPLIANCE AUDITS (GREEN INDICATORS = ≥85% Effective, YELLOW = 75%-84%, RED = ≤74%)													AVERAGE
CPS Progress Notes	95%												0.95
FAR Progress Notes		81%											0.81
PREV Progress Notes		83%											0.83
Foster Progress Notes			90%										0.9
PREV Case Contact Rate ≥ 2 per month	86%												0.86
Foster Case Contact Rate ≥ 1 per month		81%											0.81
Supervisor Case Conferences		70%											0.7
LSRs Submitted Timely			100%										100
Annual LODs Reviewed Timely			100%										#DIV/0!
HOTLINE SOURCES													ANNUAL TOTAL
School	51	37	62										150
Immediate Family	12	10	7										29
Extended Family	5	5	9										19
Hospital	8	11	9										28
Other Medical Provider	11	5	10										26
Law Enforcement	18	13	16										47
DSS Internal	7	11	15										33
Other	17	18	16										51

Social Services Program Statistics

Fraud Investigations (as of 3/30/2026)						
Collections	Cases Active	Cases Referred	Completed	Arrests	Pending arrests	Burials
\$12,449.00 (+10,318.81)	293 (-3)	43 (+/-0)	46 (+13)	3 (-1)	6 (-2)	8 approved (+2) \$15,416.00 costs (+4,579.00)
Child Support Enforcement Cases (as of 3/30/2026)						
Collections	Petitions Filed	Paternity Establishments	Total Cases			
\$586,551 (+\$65,735)	34 (+/-0)	11 (-8)	2,695 (-2)			

Public Assistance (PA) Cases (as of 3/30/2026)				
Temp. Assistance to Needy Families (TANF)	Safety Net	Food Stamps	Medical Assistance (MA)	MA/Supplemental Security Income (SSI)
206 (-2)	309 (+/-0)	5815 (+31)	3388 (+46)	2389 (-4)
Homelessness Snapshot (as of 3/30/2026)				
Code Blue	Quarantined	Adults / Children	Sex Offenders	Emergency Shelter Census
8 (+/-0)	0	234/81 (-1/-1)	24 (-2)	315 (-2)





Monthly Total Expenses to Date	Monthly Cash Receipts	End of Month Census	Meals Prepared for Residents
\$1,314,676.08	\$1,039,023.37	112	10,479
Admissions / Discharges (to home or Assisted Living)	Total ST treatments	Total OT treatments	Total PT treatments
13/13	59	639	777

Nursing Services

- Nursing services continue to demonstrate flexibility and responsiveness to evolving resident needs, supported by ongoing policy review and routine staff in-services.
- Collaboration with SUNY Sullivan facilitated successful clinical rotations for nursing students this semester.
- Infection prevention efforts remain strong:
 - Resident influenza vaccination rate: 85%
 - Employee influenza vaccination rate: 80%
- Continued emphasis on education to reinforce adherence to nursing processes and standards of care.

Facility Infrastructure & Safety

The facility continued to experience recurring elevator outages throughout March. This remains an ongoing operational and safety concern requiring continued monitoring and resolution efforts.



Rehabilitation & Restorative Therapy

- Ongoing review of Medicare residents to ensure appropriate service utilization and outcomes.
- Department productivity continues to be monitored and evaluated.
- Side Rail Project: Audits remain in progress. Initial assessments are completed by therapy, with quarterly reassessments assigned accordingly.
- Continued collaboration between Dietary and Speech Therapy to optimize resident meal plans and swallowing safety.
- Case Mix Index (CMI) review completed; final numbers established prior to freeze with no subsequent changes.
- Staffing challenges persist, with open positions including Occupational (OT), Physical (PT), and Speech Therapists (ST), Physical Therapy Asst. (PTA), and Certified Occupational Therapy Asst. (COTA); full-time Speech-Language Pathologist (SLP) recruitment remains a priority.
- Key Message: Rehabilitation services play a vital role in maintaining functional status, preventing decline in long-term residents, and supporting safe, timely discharge for short-term patients.

Activities & Resident Engagement

- Successfully hosted celebrations for Purim, St. Patrick's Day, National Chip & Dip Day, and Palm Sunday.
- Group activity participation for March 2026: 2,440, reflecting a 9.96% increase from February.
- Individual activity participation for March 2026: 1,301, reflecting a 36.37% increase from February.



Certified Home Health Agency Statistics



CHHA Monthly Data														
	2025 Total	January	February	March	April	May	June	July	August	September	October	November	December	2026 YTD
Staff Productivity	4.84	4.93	4.62	4.82										4.79
New Patients*	1027	69	43	76										188
Discharges*	1105	70	43	70										183
RN/LPN Visits*	6330	413	389	473										1275
PT/PTA Visits	6698	389	309	360										1058
OT Visits*	2567	132	117	239										488
ST Visits*	786	66	54	66										186
PCA		5	2	3										10
PRI/Screen		5	1	3										9
HHA Visits*	795	32	49	55										136
Total Visits	17749	1042	921	1199										3162

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





Certified Home Health Agency



Goal / Area of Focus	Update / Progress
Increase and maintain the daily census of the CHHA 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: 108
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: 85 Referral Conversion Rate: 88% new patients: 76 discharges: 70
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: 4.62 Staffing levels: See table below
Ensure timely and accurate completion of Patient Review Instrument (PRI) and Health Screens for Next Stage of Life Healthcare participants to support appropriate placement and continuity of care for individuals requiring nursing home or long-term care services.	<ul style="list-style-type: none"> # PRI assessments: 3
Ensure Personal Care Assessments (PCA) are completed thoroughly and in alignment with program standards to support effective care planning.	<ul style="list-style-type: none"> # PCA assessments: 3

Field	full-time	perdiem	contract	total
RN	6	3		9
LPN	2			2
PT	3	1		4
PTA	1			1
OT	3			3
ST	1			1
total	16	4		20





Maternal and Child Health Programming



Goal / Area of Focus	Update / Progress
Car Seat Distribution & Education	<ul style="list-style-type: none">• # staff trainings offered: 6• # of Education Provided: 6





- Healthy Families partnered with DSI and Education to provide families with dental hygiene items for National Children’s Dental Health Month and safe sex kits for National Condoms Week.

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: 66 • 85% completed home visits (148 out of 174) 												
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 • # 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: 9 • # agreed to services and registered: 3 • RCR: 33% 												
Maintain Full Staffing	# of staff for all HF positions	<table border="1"> <thead> <tr> <th colspan="2">Staffing</th> </tr> </thead> <tbody> <tr> <td>Family Support Worker</td> <td>2</td> </tr> <tr> <td>Bilingual FSW</td> <td>2</td> </tr> <tr> <td>Program Supervisor</td> <td>1</td> </tr> <tr> <td>Program Manager</td> <td></td> </tr> <tr> <td>total</td> <td>5</td> </tr> </tbody> </table>	Staffing		Family Support Worker	2	Bilingual FSW	2	Program Supervisor	1	Program Manager		total	5
Staffing														
Family Support Worker	2													
Bilingual FSW	2													
Program Supervisor	1													
Program Manager														
total	5													



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: 276 																														
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: 202 # of new referrals: 21 																														
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 67 																														
Increase outreach and engagement for Children and Youth with Special Healthcare Needs (CYSHN)	<ul style="list-style-type: none"> # of active cases: 20 (+3) <ul style="list-style-type: none"> # of new referrals 3 # of Education or Resource Events 0 																														
Under New York State law, both the Early Intervention (EI) program (ages birth–3) and the Committee on Preschool Special Education (CPSE) program (ages 3–5) require that transportation be provided when it is necessary for a child to access approved services.	<ul style="list-style-type: none"> % of parents receiving reimbursement: <ul style="list-style-type: none"> EI: 41.95% CPSE: 26.08% # of children on waitlist for bussing: 0 																														
Authorized Services and Waitlisted	<table border="1"> <thead> <tr> <th>EI Service Type</th> <th># Authorized Services</th> <th>Waiting List (#)</th> </tr> </thead> <tbody> <tr> <td>Service Coordination</td> <td>174</td> <td>N/A</td> </tr> <tr> <td>Speech Therapy</td> <td>130</td> <td>21</td> </tr> <tr> <td>Occupational Therapy</td> <td>68</td> <td>8</td> </tr> <tr> <td>Physical Therapy</td> <td>128</td> <td>9</td> </tr> <tr> <td>Special Instruction</td> <td>91</td> <td>6</td> </tr> <tr> <td>Special Instruction in Lieu of Speech</td> <td>4</td> <td>N/A</td> </tr> <tr> <td>Group Dev. Model</td> <td>88</td> <td>6</td> </tr> <tr> <td>Vision</td> <td>1</td> <td></td> </tr> <tr> <td>ISC</td> <td>27</td> <td></td> </tr> </tbody> </table>	EI Service Type	# Authorized Services	Waiting List (#)	Service Coordination	174	N/A	Speech Therapy	130	21	Occupational Therapy	68	8	Physical Therapy	128	9	Special Instruction	91	6	Special Instruction in Lieu of Speech	4	N/A	Group Dev. Model	88	6	Vision	1		ISC	27	
EI Service Type	# Authorized Services	Waiting List (#)																													
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Goal / Area of Focus	Update / Progress
Workplace Wellness	<ul style="list-style-type: none"> • # of events: 4 • # of participants: 32, Yoga lunch
Outreach/ Education/Rural Health Network	<ul style="list-style-type: none"> • # of educational workshops: 4 <ul style="list-style-type: none"> ○ Total # of participants: 48 • # of outreach events: 18 • # of social media posts: 34 <ul style="list-style-type: none"> ○ Top 3 post topics: Tick/Lyme, SUD Kratom V & -OH, Staff Pic (wear purple for Epilepsy) • # of PH kits distributed: 235 total <ul style="list-style-type: none"> ○ See table 2 for detail
Narcan Training	<ul style="list-style-type: none"> • # of Narcan trainings: 1 <ul style="list-style-type: none"> ○ # of participants: 3 • # of 1-on-1 Narcan trainings: 0
Community Health Workers (CHW)	<ul style="list-style-type: none"> • # of CHW visits: 16 • # of referrals provided: 12 • Top identified needs: Workforce (unemployment), pantry, appointment support.

- Senior Fitness following is increasing momentum in community started with 5 now it's reaching 20
- Wellness initiated pickleball in county & yoga fitness is a success (32 participants)
- Created 3 new lesson plans (Caffeine, emergency prep, mental health with music influence)
- Prepare for Public Health week material for presentation & CHW program has been initiated
- Career Day in Liberty and Monticello proved there's an interest in PH (internships seemed in theme), but discouraged with overall long term salaries.
- Established connection with HEAL mobile unit-ongoing.

Table 7: Public Health Kit Distribution

Description	Education/Outreach
Dental Hygiene ADULT	16
Dental Hygiene KIDS	11
Emergency Preparedness Kit	5
Hygiene Kit	18
Mens Health Kit	4
Womens Health Kit	6
Sexual Health Kit	0
Mental Health Kit	0
Tick Removal Kit	14
Overdose Rescue Kit	132
Wound Care Kit	29
Total	235



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">• 3 Webinars offered: Social Connection as Medicine, Creating a Care Plan for Pregnant Patients, and Emerging Youth Risk Behaviors in the Digital Era• Oxford House presented on their services at All Staff meeting: 44 people.
Quality	<ul style="list-style-type: none">• Ongoing analysis of existing policies, updates, and creation of new.	<ul style="list-style-type: none">• PAC (Provider Advisory Committee) meeting 3/10• Local Early Intervention Coordinating Council (LEICC) meeting 3/25• EI Parent Survey Tracker initiated• CHIP (community health improvement plan) in progress• PH External Affairs Committee established• TB (Tuberculosis) procedure update in progress• School Nurse Presentation-Public Health presented on programs and services to school Nurses during conference day.



Disease Surveillance Investigations (DSI)

Public Health

Goal / Area of Focus	Update / Progress
Immunization Program	<ul style="list-style-type: none"> OFFICE CLINICS: 0 <ul style="list-style-type: none"> # PEOPLE IMMUNIZED: 0 # OF DOSES: 0 WALK-IN: 3 <ul style="list-style-type: none"> # PEOPLE IMMUNIZED: 3 # OF DOSES: 3 PUBLIC CLINICS: 0 <ul style="list-style-type: none"> # PEOPLE IMMUNIZED: 0 # OF DOSES in the PUBLIC: 0 POD (Point of Distribution) CLINICS: 0 <ul style="list-style-type: none"> # of DOSES @ PH: 0 # of DOSES In public: 0 TOTAL # CLINICS: 3 TOTAL # PEOPLE IMMUNIZED: 3 TOTAL # DOSES @ PHS: 3 TOTAL # DOSES (Public): 0 <ul style="list-style-type: none"> COMBINED TOTALS OF ALL DOSES: 3 Ages of vaccinated: 1-6 yrs: 0; 7-18 yrs: 3; 19-35 yrs: 0
Rabies	<ul style="list-style-type: none"> # of reported animal bites/incidents: 27 <ul style="list-style-type: none"> Domestic - Cat Incidents: 6; Dog Bites: 21 Wildlife – 0 # animals tested: 3 <ul style="list-style-type: none"> Domestic - Cat Incidents: 2; Dog Bites: 0 Wildlife – 0 # tested positive for rabies: 0 # rabies vaccination clinics: 1 <ul style="list-style-type: none"> 4/2/26, Livingston Manor, 71 vaccinated
Lead	<ul style="list-style-type: none"> Total labs drawn: 101 Lead Education: 2 # of Positive cases: 2
Tuberculosis (TB)	<ul style="list-style-type: none"> # of newly reported, Active TB cases: 1 # of latent TB cases: 41 # of reported by pending TB cases: 0
Reportable Diseases	<ul style="list-style-type: none"> # of lab reported cases: 534 (143 influenza) <ul style="list-style-type: none"> ↓ 255 from previous month

- Legionella continues to increase trend wise, following last year's pattern
- Continuing to watch Measles-Rockland County is problematic.

Case Surveillance & Volume	Monthly Total	
Total # lab reported, General Communicable	534	
Disease-Specific Reporting (Top 5 General Communicable)		If "Other", fill in HERE
Other:	2	Legionellosis
Other:	2	Strep B Invasive
Campylobacter	2	
Other:	2	Strep A Invasive
Anaplasmosis	2	
Influenza	11	A
Influenza	132	B
Other:	222	RSV
Lyme	32	
COVID-19	122	

Community Services (6 Positions Vacant, 40 Authorized, 10.00% Vacant)

Assistant Social Worker II, #369, #721, #3759	2 approved to fill, 1 submitted for review
Staff Social Worker I, #0130, #2267, #3288	1 approved to fill, 2 submitted for review

Public Health (20 Positions Vacant, 78 Authorized, 25.64% Vacant)

Community Health Nurse, #2185, #2927	
Community Health Worker, #3653	
Epidemiological Supervisor, #3579	
Healthy Families Program Manager, #3511	
Public Health Educator, #1636	
Public Health Nurse, DT #952, CHHA #2729 DT #2784	
Public Health Occupational Therapist, #3340(PD)	
Public Health Physical Therapist, #3667	
Public Health Physical Therapist Assistant, #3553	
PHS Program Coordinator, #806	
Registered Nurse, #607(PT), #747, #849, #2373, #2502(PD), #3264(PD), #3634	

Social Services (16 Positions Vacant, 184 Authorized, 13.05% Vacancy Rate)

Account Clerk #119, #1269, #2222, #2869	2 Approved to Fill, 1 ON HOLD, 1 Request to fill (RTF) submitted , Canvassed and Posted
Case Services Aide, #3581	Recent promotion, RTF submitted
Caseworker #78, #3052	RTF submitted, interviewing
FS Investigator Trainee, #3676	ON HOLD
Principal Account Clerk #3605	Vacant - recent promotion, approved to fill, interviewing
Senior Case Services Aide, #3754, #3755, #616	2 Positions revised in 2026 budget, 1 recent promotion, RTF submitted – ON HOLD
Senior Account Clerk/Database, #3688	RTF submitted
Senior Social Welfare Examiner, #75	Approved to fill, interviewing
Social Welfare Examiner, #658, #2422	Approved to fill, interviewing