Sullivan County Division of Health and Human Services (DHHS) -- Monthly Report – April 2025

Roadmap to Better Health Implementation

- Sullivan County Community Assistance Center Hotline: 845-807-0925   - National Suicide Hotline: 988   - Hope Not Handcuffs: 833-428-HOPE
- Hudson Valley Fearless! (Domestic Violence and Human Trafficking Support Hotline): 845-562-5340

Strategy	Update on Activities Supporting the Strategy	Key Performance Indicators:	
Ease Access to Care	• **Inpatient Drug Treatment Returning to Sullivan County:** Lexington is preparing to open an inpatient treatment facility within Garnet Health-Catskills. Preparations are currently delayed due to a dispute over the lease agreement OASAS has requested of both parties in order to distribute funding. Senator Oberacker and Assemblymember Kay have indicated they will request OASAS move quickly to resolve. • **Unknown Future for Catholic Charities' Monticello Real Estate:** The main building for Catholic Charities' Sullivan County operations is 396 Broadway, Monticello. The lien for this building is held by OASAS, dating back to the State's takeover of the Recovery Center at the same location. DHHS leadership has requested info from OASAS on their planned way ahead for this building. The other buildings in the neighborhood that were previously used for inpatient treatment and administration are owned outright by Catholic Charities, according to OASAS. • **Community Services Now Offering Mental Health Services to Children Ages 5 and up**: In an effort to meet the demand for mental health services for children across the county, we are now accepting referrals starting at age 5. • **2025 Community Resource Guides now available:** This valuable tool for accessing local services developed under the leadership of Sullivan 180 is now getting distributed across the county.	Participating Unite Us Agencies	**36 Local (steady) 220 Regional (+11)**
		Unite Us Cases	**1,080 (+45)**
		% of Cases Open/Resolved	**48.9% (-4.3%)**
		Medicaid Enrollment	**29,436 (as of July 2024)**
Enhance Our Community **(Focused on Housing)**	• **Emergency Housing Update**: Warming centers will close for the season on April 15. The DSS Housing Team and community partners are making steady progress at reducing our emergency census. • **Shelter Update**: As plans have further developed, costs associated with preparing the Pittaluga Road, Thompson site are now expected to be too high to support winning a state grant without substantial additional county-share funding commitments. A cost benefit analysis has been prepared to determine whether the best approach is to continue with the Monticello location or shift back to the original planned site on the Human Services Campus in Liberty.	Emergency Shelter Census (as of 3/24)	**337 (-11)**
		Family Groups Sheltered	**57 (-1)**
Encourage Healthier Behavior	• **Bold Gold Media Campaign:** First campaign under the new contract is in progress, with an excellent message regarding the risks of vaping from children at Eldred Central School District. • **Vending Machines Enhancing Outreach:** We have expanded the product line available in our harm reduction vending machines to include dental care kits for adults and kids, tick removal, wound care, and sexual health kits. Our latest addition to the health vending machines is gun locks provided by the Hudson Valley Veterans Administration (VA). All items are funded by various public health grant, VA, and opioid settlement fund programs and are available free to the public. So far, more than 80 kits have made it to members of the public from vending machines at DCS and Government Center (between Probation and Family Court) and we are planning to expand the program to SUNY Sullivan next.	Health Kits Distributed	82 via vending machines 126 via traditional outreach

Sullivan County Drug Task Force

For more information: www.unitedsullivan.org; contact@unitedsullivan.org

Hope Not Handcuffs: 833-428-HOPE

Active Pillars (Last Meeting)							
Law Enforcement	**Treatment**	**United Sullivan**	**Medical Provider**	**Prevention**	**Policy**	**Veterans**	**Data**
12/2024	3/11/2025	Meeting Weekly	4/4/2025	3/27/2025	3/13/2025	3/18/2025	3/22/2025

Drug Task Force Key Statistics							
911 Responses to Overdose Last Month				**Drug Overdose Death Rate (as of 2/7/25)**			
17 (+10) (4 were to Woodbourne Correctional)				51.3/100,000 – 58th of 62 counties			
Opioid Settlement Fund Balance				**OASAS Settlement Fund Allocated to Sullivan / Committed by DCS**			
				$1,438,489/$582,584			

- **Overdoses in February:** Monthly 911 overdose responses went back up in February. There were no reportable drugs of choice; there were no drug types with a known quantity of five or more overdoses. The most significant statistic from February was the four response to Woodburne Correctional Facility. The exact cause behind the overdose calls is under investigation by DOCCS.
- **Catholic Charities Outpatient Drug Treatment Closure:** DHHS has a list of local providers to whom we refer to for drug treatment. Catholic Charities remains a valued and integral partner in caring for our community, from their food pantry to supportive housing, and we continue to collaborate daily.
- **Opioid Settlement Fund Obligations:** The following chart provides a brief summary of organizations under contract and receiving opioid settlement funding, and the actions each of those organizations is taking in support of the Drug Task Force. This chart does not include funds in active use by the county to acquire items and services needed for use by the Drug Task Force (i.e. software subscriptions to support counter narcotics investigations, palm cards, vending machines, etc)

County Opioid Settlement Funds	OASAS Settlement Funds Allocated to Sullivan County
- Catholic Charities (School-Based Prevention Program) $25,000 - Bold Gold Media (Marketing and Education) $60,000 - This contract will sunset and be funded by OASAS going forward - Lamar of Scranton (Marketing-Signage) $33,000 - Village of Liberty Police (Officer EAP) $11,000 - Village of Liberty Police (Overdose Quick Response Team) $15,000 - Town of Fallsburg Police (Overdose Quick Response Team) $15,000 - Sullivan 180 (School-Based Prevention Programs) $89,000 - Action Toward Independence (Housing, transportation and case management for persons with substance use disorders) $85,000 - Corona Self-Help Center (Peer Services and Supports) $105,000	- Bold Gold Media (Marketing and Education) - Restorative Management (Peer Services) - Sullivan 180 (Youth MH Services and Supports) - Catalyst Research (Data Analytics) - Oxford House (Sober living homes) - This contract was recently approved and is not yet active.

- **Oxford House:** Contracting is in progress with a goal of bringing up to 24 sober living beds to Sullivan County over the course of the next 12 months.

- **Palm Cards:** This project, undertaken by the Treatment Pillar, has moved into the distribution phase. Treatment providers in the county identified that social media and traditional forms of outreach have not been sufficient to support persons who have largely become disconnected from society. 5,000 cards have been printed for distribution via street outreach, Hope Not Handcuffs,
- **Drug Task Force Coordinator Activities:**
  - **Substance Use Disorder (SUD) Services & Outreach**: To overcome difficulty reaching individuals in need, 5000 palm cards have been printed and updated PSA's are in progress both in support of United Sullivan and SALT efforts. Working with data analytics firm to assess the impact of our outreach efforts
  - **Addressing Service Access**: We are addressing new challenges with the Unite Us referral system that have emerged with the startup of the Hudson Valley Social Care Network. Causing some adverse impacts on information sharing across agencies. We are also hearing from various stakeholders about fears in the local Latino community of the potential to become targets for immigration enforcement by accessing healthcare.
  - **Prevention & Policy Initiatives**: We are currently reviewing a proposal to merge the prevention and policy pillars of the Task Force because there are so many contributors in common across both pillars. Both pillars are placing emphasis on compassion and seeing people as neighbors, advocating for new programs for seniors and families and both pillars are active in discussions on cannabis regulation and community outreach.
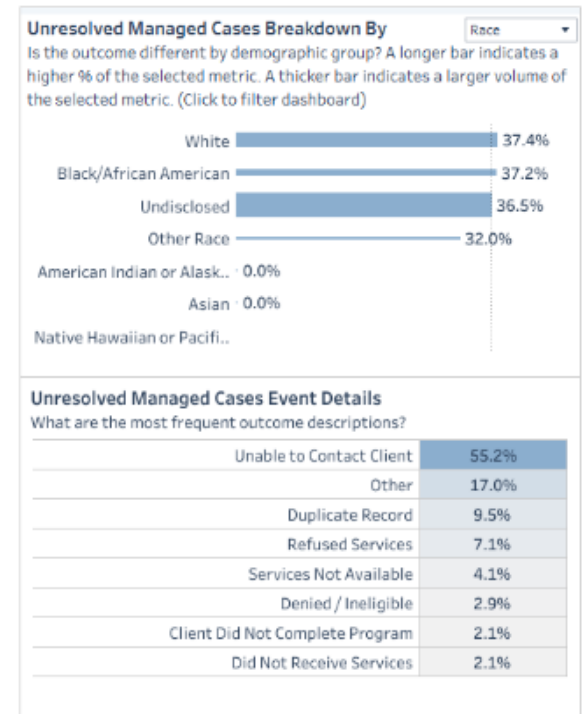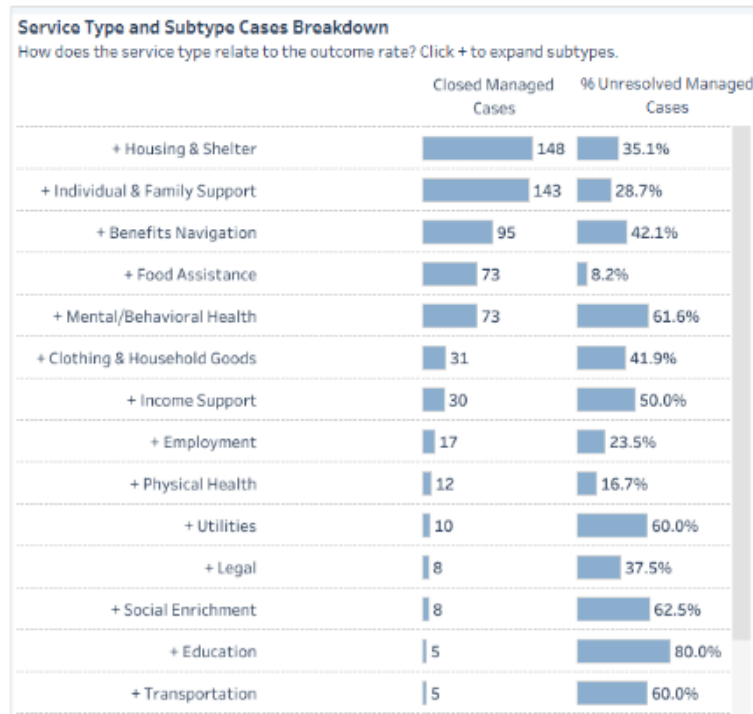
United Sullivan – Social Care Network

For more information: www.unitedsullivan.org; contact@unitedsullivan.org

Social Care Network Continues to Progress: The regional Social Care Networks that will handle billing and payment for certain housing, nutrition, transportation, and case management services under Medicaid are now active. In spite of recent policy changes at the Center for Medicare/Medicaid Services related to Health-Related Social Needs, the regional networks are not affected because of the Medicaid Section 1115 demonstration waiver currently governing our Social Care Networks.

Unite Us Network challenges and opportunities: The chart at right provides us with information on how much success we're having (or not having) in solving the problems that come to the Unite Us/United Sullivan network. In the top five requested services where we have reliable data, we see strong success in supporting food assistance needs. Housing assistance and family supports also compare well to national averages. Our greatest challenge in "closing the loop" is on mental health supports/contact with clients.

Service Type and Subtype Cases Breakdown
How does the service type relate to the outcome rate? Click + to expand subtypes.

	Closed Managed Cases	% Unresolved Managed Cases
+ Housing & Shelter	148	35.1%
+ Individual & Family Support	143	28.7%
+ Benefits Navigation	95	42.1%
+ Food Assistance	73	8.2%
+ Mental/Behavioral Health	73	61.6%
+ Clothing & Household Goods	31	41.9%
+ Income Support	30	50.0%
+ Employment	17	23.5%
+ Physical Health	12	16.7%
+ Utilities	10	60.0%
+ Legal	8	37.5%
+ Social Enrichment	8	62.5%
+ Education	5	80.0%
+ Transportation	5	60.0%

Unresolved Managed Cases Breakdown By Race
Is the outcome different by demographic group? A longer bar indicates a higher % of the selected metric. A thicker bar indicates a larger volume of the selected metric. (Click to filter dashboard)

White	37.4%
Black/African American	37.2%
Undisclosed	36.5%
Other Race	32.0%
American Indian or Alask..	0.0%
Asian	0.0%
Native Hawaiian or Pacifi..	

Unresolved Managed Cases Event Details
What are the most frequent outcome descriptions?

Unable to Contact Client	55.2%
Other	17.0%
Duplicate Record	9.5%
Refused Services	7.1%
Services Not Available	4.1%
Denied / Ineligible	2.9%
Client Did Not Complete Program	2.1%
Did Not Receive Services	2.1%

Network Member Update: The following chart provides the complete list of Sullivan County agencies currently active on Unite Us.

Liberty Police Department	The Center for Discovery	Rehabilitation Support Services	Cornell Cooperative Extension	Dept of Community Services
Sullivan County Probation	Dispute Resolution Center	Sullivan 180	Office for the Aging	Dynamic Youth Community
HONOR, INC.	Dept of Public Health	Sullivan County Youth Bureau	Action Toward Independence	Catholic Charities - Behavioral Health
Every Person Influences Children	Lexington Center – Liberty and Monticello	Legal Services of the Hudson Valley	Garnet Health Medical Center - Catskills	Community Action – Liberty and Monticello Offices
Independent Living, Inc – Peer Diversion & Peer Parent	Independent Living, Inc – Independent Living Skills	Catholic Charities – Human Services	Center for Workforce Development	Sullivan Allies Leading Together INC.
Mobile Mental Health Team	Restorative Management	Dept of Social Services	Bridge Back to Life Mobile Unit	Choices Mental Health Counseling
Sun River Health	Community Home Health Care	Astor Services		

 Care Center at Sunset Lake Rehab
For more information: (845) 292-8640, https://sullivanny.us/Departments/Adultcarecenter

Care Center at Sunset Lake Key Statistics			
Monthly Total Expenses to Date	**Monthly Cash Receipts**	**End of Month Census**	**Meals Prepared for Residents**
$1,346,848.94	$1,129,467.87	132	11,025
Admissions / Discharges (to home or Assisted Living)	**Total Day Care Visits**	**Total OT treatments**	**Total PT treatments**
12/1	0	668	821

Overall Facility Rating – 2/5 stars (below average): Health Inspection (1 Star) and Quality Measures (2 Stars).

Staffing (3 Stars - average): Recruiting and hiring continue. We continue to work with staffing agencies.
- New Hires for February: RN – 1 (Part-Time, Frontline), LPN – 0, CNA – 0, 1 Activity Aide, 1 Activity Director (Temporary Position)

Nursing and Physical Therapy Update:
- Continue to target balance and walking program to maintain ambulation in the short- and long-term residents
- Short term residents participated in falls recovery and medication management activities
- Residents enjoyed cognition and OT programming that focused on money management
- Planning and ordering spring planting materials
- Valentine's activities and our annual March Madness 6 weeks of themed games that target ambulation, gross/fine motor planning, attention/memory and organization
- Falls within the facility have decreased 5% from January to February.

Activities Department Update:
- Highlights from February Included: Weekly Happy Hour, Valentine's Day Party and Crafts, Celebration of Black History Month

 Department of Community Services (DCS)
For more information: (845) 292-8770, https://sullivanny.us/Departments/CommunityServices
National Suicide Hotline: 988   Mobile Mental Health – 24-hour hotline: (800) 710-7083, Face-to-Face Outreach Monday-Friday 8am-8:30pm, Saturday-Sunday 8am-12am
Children's Mobile MH: (845)701-3777

Care Management:

- 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 February 2025, there are five active Assisted Outpatient Treatment (AOT) orders and there is one person on enhanced AOT services.


Adult & Children's SPOA:

- On February 14, 2025, the Adult SPOA Committee met via Zoom with 12 new cases reviewed and seven previous cases reviewed.
- The total of 140 RSS beds with 155 people on the waiting list and 14 openings.
  - There are 7 people on the list for Family Care with no openings.
  - RSS Community Residence: 12 beds, 30 on the waiting list with no openings.
  - RSS Sullivan Treatment Apartment Program: 29 beds, 31 on the waiting list with two openings, but apartments need repairs.
  - RSS Sullivan County Respite: 1 bed, 1 on the list & it is unavailable.
  - RSS Supportive Apartment Program: 39 Regular and 16 L/S, 64 on the waiting list with no openings.
  - RSS Invisible Children's Apartment Program: 6 beds, 9 on the waiting list, no openings.
  - RSS Chestnut Street Apartments: 37 beds, 20 on the waiting list with two openings.
- Coordination of referrals and ongoing collaboration with service providers continue. Clients were recommended for/linked to various services, including: behavioral health treatment providers, RSS housing (apartment program and community residences), Access: Supported Housing, Sullivan PROS Program, OFA, APS, Action Toward Independence, Independent Living, Inc., and Care Management services.
- Children's SPOA Committee met via Zoom on February 27, 2025, and went over seven new referrals and eight previous referrals were reviewed.
- The Coordinator organized and facilitated the monthly Adult & Children SPOA Committee meetings (review of incoming referral packets, typing the case presentations, agenda, meeting minutes, waiting lists). Coordinator also conducted follow up throughout the month and completed monthly SPOA related data reports.

Behavioral Health Clinic (Mental Health and Substance Abuse):

- High Risk Clients: In February 2025, there were 171 clients on the roster for high risk census.
- Effective January 2025, open access is now Tuesday and Thursday's from 9:00am to 12:00pm.

Local Government Unit Activities:

- Crisis **Services & Trauma Response**: $600,000 secured from OMH for mobile crisis services, expansion of weekend crisis support, efforts to establish a Community Trauma Response Team (CTRT), & decrease in opioid overdose deaths and EMS calls.
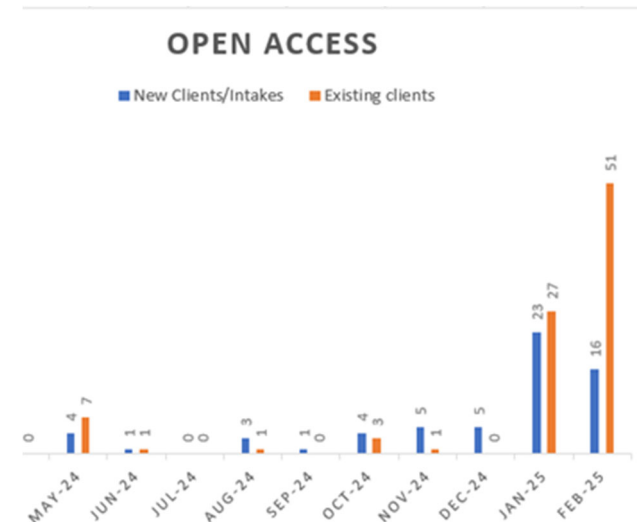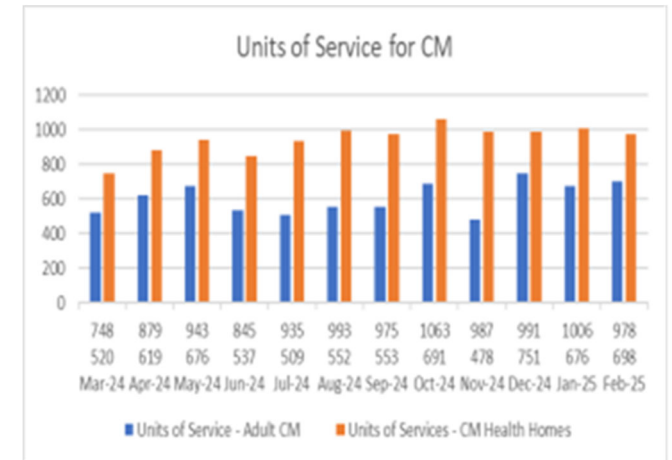
- **Crisis Intervention Team (CIT) Initiative**: State application for tech assistance approved by OMH; kickoff meeting held on 3/11-3/12 in Albany.
- **Fatality Review Board**: Scheduling case review meeting once kinship release is approved; progress meeting to held on 3/18.
- **Community Trauma Response Team**: Recruit team, training, launch. Met with core group on 2/21; drafting plan and coordinating training.
- **First Responder Wellness Initiative**: Needs assessment, program design, and funding sourcing in progress.
- **Threat Assessment Training**: Developing curriculum for local agency training.
- **SAMHSA SOC Application**: OMH applying for 4-year SAMHSA grant; Sullivan selected county for initiative.

Other Ongoing Initiatives
- **Sullivan County Jail Forensic Peer Program** – Partnering with jail for staff training and deployment.
- **CPL 730 Training** – Presentation delivered on 3/11 to the county magistrate's association.
    - **Update:** Need to re-engage social worker.
- **State Pass-through Contracts** – Drafting and legal review.
    - **Update:** Contracts reviewed and sent out for signatures.

Month/Year	Incoming Calls	Intial Phone Contacts	Outreaches	Diversion Rate	Hospital Referrals	Admissions	Admission Rate
Feb-24	311	88	16	88%	2	1	50%
Mar-24	252	93	16	81%	3	0	0%
Apr-24	259	86	24	83%	4	4	100%
May-24	305	99	29	79%	6	4	67%
Jun-24	249	83	30	67%	6	4	67%
Jul-24	335	101	30	77%	7	5	71%
Aug-24	323	111	38	79%	8	5	63%
Sep-24	286	89	27	74%	7	6	86%
Oct-24	298	94	42	88%	5	4	80%
Nov-24	286	81	32	78%	7	5	71%
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%

1 - Mobile Mental Health Utilization

| SULLIVAN COUNTY DEPARTMENT OF COMMUNITY SERVICES STATISTICAL SUMMARY FOR: Feb 01, 2025 - Feb 28 ,2025 Prepared by : Sara A. Cole						
	ON ROLLS:			CLIENTS ON ROLL:	CLIENTS	UNITS OF
PROGRAM	2/1/2025	ADMISSIONS	DISCHARGES	2/28/2025	SERVED	SERVICE
SC BEHAVIORAL HEALTH CLINIC ADULT	434	16	16	434	450	565
SC BEHAVIORAL HEALTH CLINIC CHILD	7	0	0	7	7	6
SC BEHAVIORAL HEALTH CLINIC FORENSIC	65	8	5	68	73	54
SC BEHAVIORAL HEALTH CLINIC MICA	23	1	2	22	24	Included In Clinic Adult
SC BEHAVIORAL HEALTH CLINIC MAT	14	0	1	13	14	Included In Clinic Adult
TOTAL MENTAL HEALTH	543	25	24	544	568	625
SC CARE MANAGEMENT	29	2	2	29	31	698
SC HEALTH HOME- ADULT	46	1	0	47	47	432
SC HEALTH HOME - KENDRA, AOT and HH+	18	0	1	17	18	220
SC HEALTH HOME - CHILD	11	2	0	13	13	121
SC HEALTH HOME - OUTREACH	12			12	12	205
SC CM CCSI					0	0
TOTAL HEALTH HOME CASE MANAGEMENT PROGRAMS	104	5	3	106	109	1,471
SC SPOA - Adult	61			61	61	485
SC SPOA - Child	18			18	18	135
TOTAL SPOA	79	0	0	79	79	620

**Department of Social Services (DSS):**

For more information on our report or to request assistance with benefits: (845) 292-0100

Public Assistance Program Highlights:

- Rental Supplement Program Update: RSP received $240,957.00, Rental Payments $126,634.77, Arrears paid $62,318.05, Security Deposits $42,832.00, Arrears to be paid $5,549.65, Security to be paid $3,300.00, Total Remaining $322.53.
- In February we started reviewing the County Funded RSP applications, as a result of RSP we were able to move multiple clients from temporary housing to permanent housing.

Public Assistance Cases (as of 2/28/2025)				
Temp. Assistance to Needy Families	Safety Net	Food Stamps	Medical Assistance	MA/Supplemental Security Income
189 (+5)	316 (+35)	6168 (+21)	3451(+30)	2427 (-11)
Homelessness Snapshot (as of 2/28/2025)				
Code Blue	Quarantined	Adults / Children	Sex Offenders	Emergency Shelter Census
12 (+4)	0	234/112 (+4/-39)	19 (no change)	346 (-7)

Fraud Investigations (as of February 28, 2025)						
Collections	Cases Active	Cases Referred	Completed	Arrests	Pending arrests	Burials
$20,002.28 (-2,228.44)	215 (0)	31 (-20)	31 (0)	1 (-2)	6 (+1)	5 approved (-4) $10,170.00 costs (-$5,390 .00)
Child Support Enforcement Cases (as of February 28, 2025)						
Collections		Petitions Filed		Paternity Establishments		Total Cases
$567,835 (-58,117)		16 (-9)		12 (-1)		2,718 (-5)

PA Safety Net

SNAP

Emergency Shelter Census

MA/SSI

PA TANF

MA
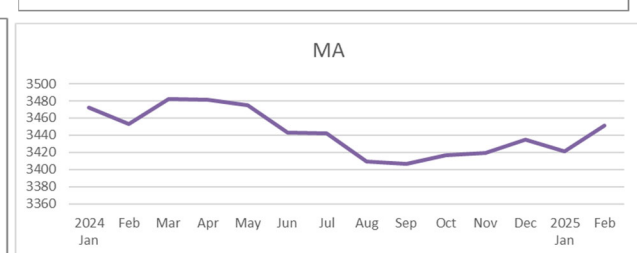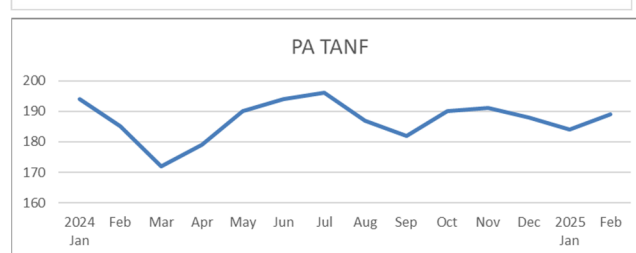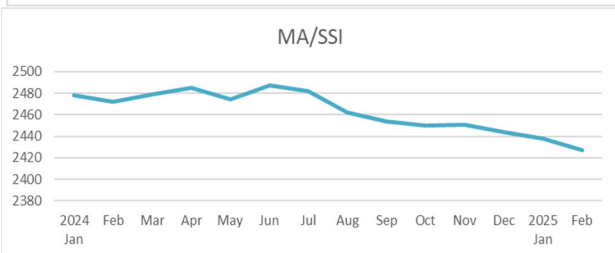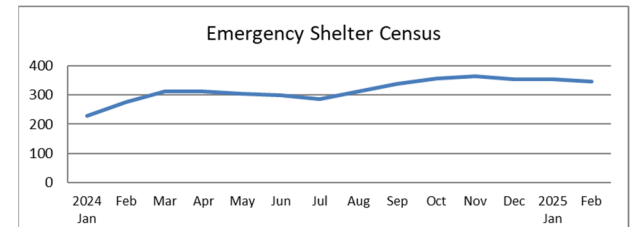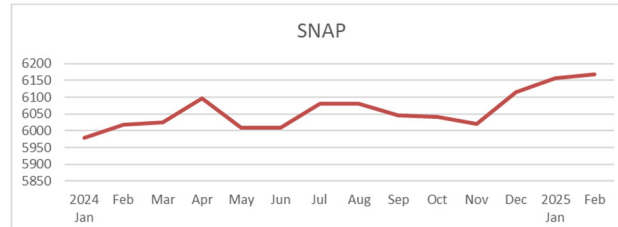
ADULT SERVICES UNIT	2024 TOTAL	2025 YTD	2025 FEB
PERSONAL CARE AIDES			
CASES OPENED	31	4	1
CASES CLOSED	18	3	1
# CASES (AVG.)	34	36	36
PERS			
# CASES (AVG.)	0	0	0
APS REFERRALS			
16A Neglect/Abuse	30	1	0
16B Neglects Own Basic Needs	67	7	5
16B Untreated Medical Conditions	36	14	10
16B Self-endangering Behaviors	21	1	1
16B Unable to Manage Finances	47	3	1
16B Environmental Hazards	38	5	3
Undetermined	7	11	2
APS			
CASES OPENED	245	42	22
CASES CLOSED	238	58	33
# CASES (AVG.)	153	154.5	149
GUARDIANSHIPS			
OPEN	38	39	0
REP PAYEE			
OPEN	108	103	-5

FOSTER CARE STATISTICS				CHILD PROTECTIVE STATISTICS			
	FEB 2025	Trend	Goal		2024	YTD 25	FEB
Kinship%	17.09%		20%	# New Reports	1425	208	101
Congregate Care%	17.95%		16%	# Closed Cases (UNF, FAR, IND)	904	211	111
Total in Care	117		<100	# Unfounded Reports	466	111	63
RTF/RTC	10			# Closed FAR	232	50	20
Diagnostic	1			# Indicated Reports	206	50	28
Group Home	2			Physical abuse	17	4	2
Therapeutic Foster Home	26			Emotional abuse	0	0	0
Regular Foster Home	46			Sexual abuse	7	2	1
Kinship	20			Neglect	96	21	13
Other	12			Domestic violence	15	6	4
Freed for Adoption	16			Educational neglect	37	8	4
Certified Homes	69		5x# in care	Substance abuse	29	9	4
Newly Certified Homes	0			1034	5	0	**0**
Number of Closed Homes	2			**PREVENTIVE SERVICES STATISTICS**			
New Kinship Homes	0			NEW REFERRALS		12	
Pending Certification	7						
Completed Adoptions	0			TOTAL CASES		77	
YTD Completed Adoptions	0						

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)	2	1											1.5
Overdue 7-day Safety Assessments (FAR)	1	1											1
Overdue Case Closures (CPS)	103	56											79.5
Overdue Case Closures (FAR)	45	22											33.5
PREV Referral Timeliness	8	3											5.5
QUARTERLY INTERNAL COMPLIANCE AUDITS (GREEN INDICATORS = ≥85% Effective, YELLOW = 75%-84%, RED = ≤74%													**AVERAGE**
CPS Progress Notes	74%												0.74
FAR Progress Notes		86%											0.86
PREV Progress Notes		56%											0.56
Foster Progress Notes													#DIV/0!
PREV Case Contact Rate ≥ 2 per month	35%												0.35
Foster Case Contact Rate ≥ 1 per month		75%											0.75
Supervisor Case Conferences		12%											0.12
LSRs Submitted Timely													#DIV/0!
Annual LODs Reviewed Timely													#DIV/0!
HOTLINE SOURCES													**ANNUAL TOTAL**
School	55	36											91
Immediate Family	10	12											22
Extended Family	6	6											12
Hospital	6	12											18
Other Medical Provider	10	6											16
Law Enforcement	9	16											25
DSS Internal	4	7											11
Other	4	17											21

CHHA: Certified Home Health Agency

- CHHA data does NOT include Maternal Child Health (MCH). MCH data can be found in its own category.
- Maintained start of care within 48 hours of receiving a completed referral
- Challenges include staffing and communication with large provider offices
- The most home visiting cases are for PT (612), followed by RN (462). PT is our program with the most demand, however, we are still not fully staffed needing the Rehab Supervisor to spend 50% of their time in the field.
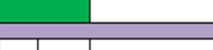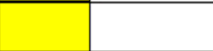
Goal / Area of Focus	Key Performance Indicators	Update / Progress
Increase and maintain the daily census of the CHHA Program to ensure consistent enrollment, maximize resource utilization, and support the growing demand for home health professionals.	Average daily census (ADC)	**ADC: 205.3**
Increase the number of new patient admissions through enhanced referral partnerships, physician outreach, and digital marketing strategies.	# of referrals - Referral Conversion Rate (RCR) (referrals → admissions): Target RCR: **40-60%** # of new patients, # of discharges	**# of referrals: 97** **RCR: 80.41%** - new patients: 78 - discharges:
Achieve an average of 5 points per day, per clinician while maintaining high-quality care, measured through patient satisfaction scores and clinical outcome improvements.	- Staff Productivity # of visits by type: - RN- Registered Nurse - PT/OT/ST- Physical, Occupational, Speech Therapy - MSW- Master Social Work Visit - HHA- Home Health Aid Visit	**Staff Productivity: 4.86** - See table 1 below

Table 1

CHHA Monthly Data*				
	2024 Total	**January**	**February**	**2025 YTD**
Staff Productivity		5.06	4.89	
New Patients*	1120	122	102	224
Discharges*	1104	108	99	207
RN Visits*	6267	577	462	1039
PT Visits	8424	763	612	1375
OT Visits*	2353	160	157	317
ST Visits*	854	77	72	149
MSW Visits*	680	54	54	108
HHA Visits*	497	84	77	161
Total Visits	21,299	1715	1434	**3149**

Table 2

SCDPH CHHA Department Specific Performance Indicators:

Measure/Indicator	2025 YE Score	Jan 2025	Feb 2025	Mar 2025	Apr 2025	May 2025	Jun 2025	Jul 2025	Aug 2025	Sep 2025	Oct 2025	Nov 2025	Dec 2025	Target 2025	Current vs. Goal	Trend
Admissions (2025)	170	92	78											n/a		
Admissions (2024)	1063	110	86	95	89	92	78	86	87	77	102	89	72			
Average Daily Census		160	175											n/a		
Prior Year (2024)	157.8333	143	159	163	163	155	151	150	155	147	164	173	171			
Long Term Pts (2025)		0	0													
Long Term Pts (2024)	2.466667	3.2	4	4	4	3	2	2	2	2	2	1.2	0.2			
Productivity		5.09	4.86											5.50		
Prior year	4.85	4.38	4.50	4.43	4.81	4.96	5.05	4.92	5.08	4.99	4.80	5.17	5.06			
NTUC		16%	20%											20.0%		
Sample size		109	97													
Prior year	18.6%	12.5%	16.6%	14.9%	18.5%	12.7%	18.7%	15.9%	20.0%	22.0%	26.0%	23.0%	22.0%	20.0%		

Maternal Child Health (MCH)

- MCH RN and LPN continue training to become Certified Lactation Counselors.
- MCH Nursing staff each chair a sub-committee of the Systems of Care.
- 25 referrals received; 12 taken under care, 13 still pending.

Goal / Area of Focus	Key Performance Indicators	Update / Progress
Increase and maintain the daily census of the MCH Program to ensure consistent enrollment, maximize resource utilization, and support the growing demand for home healthcare professionals.	• Average daily census (ADC)	• **ADC: 29.9**
Achieve an average of 5 points per day, per clinician while maintaining high-quality care, measured through patient satisfaction scores and clinical outcome improvements.	• Staff Productivity	• **Staff Productivity: 4.11**
Increase the number of new patient admissions through enhanced referral partnerships, physician outreach, and digital marketing strategies.	• # of referrals o Referral Conversion Rate (RCR): Target: **40-60%** • Referral Source (see table 3)	• **# referrals: 25** • **RCR: 48%**
Monitor the number of newborn screenings completed. • Ensuring that those completed newborn screenings are done within 24-48 of birth.	• # newborn screenings • % completed within 24-48 of birth	• **0** newborn screening

Table 3: 2025 MCH Referrals		
	February	2025 YTD
Garnet Health - Catskill	12	14
Garnet Health - Middletown	2	3
Garnet Health Doctors	1	
St. Luke's		
Blythedale Children's Hospital		1
Crystal Run Health Care	1	
Sun River	3	8
Middletown Medical		
AHAVA		
Cornerstone		
Healthy Families	2	3
CPD/DFS	4	7
SC DPH Outreach/CHW		4

Healthy Families

- Currently fully staffed; 6 FTE.
- Important: New staff can only carry 10-12 families which is important when looking at case weights; capacity = 150.

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.	# of enrolled families (capacity = 60) - Total of 150 home visits expected per month. - Target completed home visits: **85%**	**# of enrolled families: 51** **78%** completed home visits (117 out of 150) - low due to staff being out due to injury and program families being unresponsive.
Increase the number of new patient admissions through enhanced referral partnerships, physician outreach, and digital marketing strategies.	# of referrals - Referral Conversion Rate (RCR) (how many referrals turned into admissions) - Target RCR: **17%**	**# of referrals: 11** **RCR: 27%** 1 was previously in the program, 4 refused the program, 1 is out of the targeted area (referral was sent to the program in the area in which they live), 3 were assessed and enrolled and 2 are still being outreached to.

Children and Youth with Special Healthcare Needs / Early Intervention

- Program Coordinator managed 15 CPSE meetings, each requiring a significant amount of time and attention to ensure thorough preparation, participation, and follow-up.

Goal / Area of Focus	Key Performance Indicators	Update / Progress
Ensure that initial CPSE evaluations are completed within 60 calendar days of referral.	# of active cases	**# of active cases: 276** ↑ 9 from previous month

Complete initial EI evaluation and develop Individualized Family Service Plans (IFSPs) within 45 days of referral.	• # of active cases • # of referrals received	• # of active cases: **170** • # of referrals received: **20** o ↓ 2 from previous month
Early Intervention Ongoing Service Coordinators (EI OSC) will maintain an active caseload of 35-50 families, depending on case complexity and program capacity.	• EI OSC caseload	• EL OSC caseload: **37**

Health Education / Rural Health Network

- First Latino Community Meeting held on 2/28/25.

Goal / Area of Focus	Key Performance Indicators	Update / Progress
Workplace Wellness	• # of workplace wellness events • # of employee participants	• # of events: 1 • # of participants: 6

Outreach/Education/Rural Health Network	• # of educational workshops
	   o # of participants
	• # of outreach events
	   o # directly related to RHN
	• # of social media posts
	• # of PH kits distributed (See Table 4)
		• # of educational workshops: 4
		   o Total # of participants: 82
		• # of outreach events: 23
		   o # directly related to RHN: 8
		• # of social media posts: 39
		   o Top 3 post topics (most engagement): Enewsletter, Prenatal Infection, Bird Flu
		• # of PH kits distributed
		   o Education: 126
		   o Vending machines: 82
		   o See table 7 for detail

Narcan Training	• # of Narcan trainings • # of participants	• # of Narcan trainings: 3 • # of participants: 56

Table 4: Public Health Kit Distribution		
Description	**Vending Machines**	**Education/Outreach**
Dental Hygiene ADULT	12	15
Dental Hygiene KIDS	12	15
Emergency Preparedness Kit	9	15
Hygiene Kit	12	36
Sexual Health Kit	16	15
Tick Removal Kit	9	15
Wound Care Kit	12	15
Total	82	126

Disease Surveillance and Investigation and Emergency Preparedness

- The TB Coordinator has increased the amount of home visits to follow up on suspected rule-out cases, providing one-on-one education to families, assisting with follow-up when LTBI treatment is indicated, and coordinating necessary appointments.
- Follow-Up for suspected Latent Tuberculosis Infection (LTBI) among individuals who have recently immigrated to the United States, and individuals with suspected LTBI with Positive QuantiFERON (QFT+) require additional intervention and are often very time consuming.

Goal / Area of Focus	**Key Performance Indicators**	**Update / Progress**
Immunization Program		Unable to provide vaccinations due to lack of medical consultant. RFP response received from Garnet Health; finalizing contract details.
Rabies	# of rabies post exposure prophylactic (PEP) in county # of animal bites - Domestic - Wildlife # animals tested - Domestic - Wildlife # of animals + for rabies	# of rabies PEP in county: **0** # of animal bites - Domestic: **19** - Wildlife: 0 # animals tested - Domestic: **3** - Wildlife: 0 # of animals + for rabies: 0
Emergency Preparedness	# of training meetings	# of training meetings: **5**
Medical Reserve Corps (MRC)		In Progress: Working on Operational Readiness Award (ORA)
Sexually Transmitted Infections/Diseases (STI/STD)	# of lab reported cases # of health care provider follow-up for + labs # of confirmed disease type: - Chlamydia - Gonorrhea - Syphilis # of rapid HIV tests completed # of referrals made for HIV related services	# of lab reported cases: **27** # of health care provider follow-up: **27** # of rapid HIV tests: **0** # of referrals made for HIV related services: **4** - See table 5 for disease type info
Hepatitis	# of lab reported cases # of health care provider follow-up for + labs # of confirmed disease type: - Hep B, chronic - Hep B, negative - Hep C, chronic - Hep C, acute - Hep C, negative	# of lab reported cases: **29** ↑ 11 previous months - See table 6 for disease type info

Tuberculosis (TB)	• # of active TB cases • # of latent tuberculosis infection (LTBI) case follow-ups • # of suspected TB cases • # of non-clinical home visits • # of clinical/DOT home visits	• # of active TB cases: **1** (being treated out of county) • # of LTBI follow-up cases: **3** • # of suspected TB cases: **5** • # of non-clinical home visits: **6** • # of clinical/DOT home visits: **1** (weekly visits)
Reportable Diseases	• # of lab reported cases • # of health care provider follow-up for + labs • # of confirmed disease type (varies monthly)	• # of lab reported cases: **949** o ↓ 1,004 from previous month • See table 6 for disease type
Total COVID & Other	• # of lab reported cases	• # of lab reported cases: **137** o ↓ 191 from previous month

Table 4.

Sexually Transmitted Diseases (STDs)
Query Limits Selected Returned: 27 Records
Tabular Analysis of Disease
Created By the Communicable Disease Electronic Surveillance System

Disease	Total
CHLAMYDIA	10
GONORRHEA, UNCOMPLICATED	14
SYPHILIS, EARLY, NON-PRIMARY/SECONDARY	1
SYPHILIS, UNKNOWN DURATION OR LATE	2
Total	27

Hepatitis
Query Limits Selected Returned: 29 Records
Tabular Analysis of Disease
Created By the Communicable Disease Electronic Surveillance System

Disease	Total
HEPATITIS B, CHRONIC	7
HEPATITIS B, NEGATIVE	1
HEPATITIS C CHRONIC	13
HEPATITIS C, ACUTE	1
HEPATITIS C, NEGATIVE	7
Total	29

Table 5.

General Communicable
Query Limits Selected Returned: 949 Records
Tabular Analysis of Disease
Created By the Communicable Disease Electronic Surveillance System

Disease	Total
COVID-19	137
INFLUENZA, A	548
INFLUENZA, B	134
LEGIONELLOSIS	2
LYME DISEASE	76
RSV SUBTYPE B	1
RSV UNSPECIFIED	44
SALMONELLOSIS	1
STREP GROUP A, INVASIVE	1
STREP GROUP B, INVASIVE	1
STREP PNEUMO INVASIVE, UNKNOWN	2
SWINE-ORIGIN INFLUENZA A (H1N1) VIRUS (S-OIV)	1
WEST NILE FEVER (NON-NEURO INVASIVE)	1
Total	949

Table 6

Division Staffing Update

Staffing Update: Position Title & No.	Notes
Community Services (5 Positions Vacant, 43 Authorized, 11.6% Vacant)	
Addiction Services Counselor II, #3413	Approved to fill
Assistant Social Worker II, #3210	Starting 2/24
Database Clerk, #3300	Approved to fill
Staff Social Worker I, #3288, #3677	Interviewing/one person starting2/3
Public Health (18 Positions Vacant, 72 Authorized, 25% Vacant)	
Community Health Worker, #3653	
Financial Account Clerk, #3593	OMB for PH
Licensed Practical Nurse, #1636	Posted
Public Health Educator, #2986	
PH Nurse, CHHA #2729, #3419, #2784PD	Posted
Public Health Occupational Therapist, #3340(PD)	
Public Health Physical Therapist, #3667 (PD), #3555	
Registered Nurse, CHHA #747, #2875, #2502, #2782(PD), Core #2373, D&T #607 (PT), #3634 (PD)	Posted
Supervising Comm Health Nurse, #148	

Social Services (12 Positions Vacant, 181 Authorized, 6.6% Vacancy Rate)	
Account Clerk/Database, #1868	Interviewing
Case Supervisor, #140	Recruiting ongoing, one vacancy recently filled
Caseworker, #78, #904, #2949, #2950, #3691, #3692	Continuous Recruitment
FS Investigator, #459, #3092	One vacancy due to recent promotion
SWE, #744	Posted (HELP program) – Interviewing
Senior SWE, #3558	Interviewing