



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

Thursday, June 11, 2026

11:30 AM

Government Center

Call To Order and Pledge of Allegiance

Roll Call

Comments:

Reports:

1. Social Services, Community Services & Care Center
Monthly Report
June 2026 [ID-8402](#)
Attachments: [2026-06 HHS Monthly Report](#)
2. Public Health [ID-8433](#)
Attachments: [2026-4 HHS Monthly Report](#)

Discussion:

1. Highland Health Initiative-Sullivan Health Access, Inc.

Public Comment

Resolutions:

1. Accept an additional Grant Award amount for years 2 and 3 of the Children and Youth with Special Health Care Needs Program [ID-8430](#)

Adjourn



Sullivan County

Legislative Memorandum

100 North Street
Monticello, NY 12701

File #: ID-8402

Agenda Date: 6/11/2026

Agenda #: 1.

Division of Health and Human Services (DHHS) Monthly Update

June 2026

Agenda

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

Drug Task Force Update

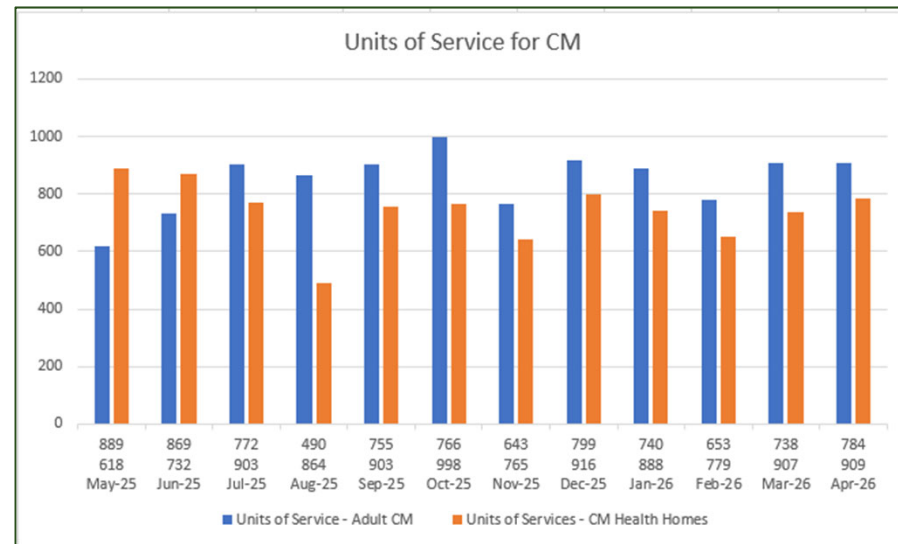
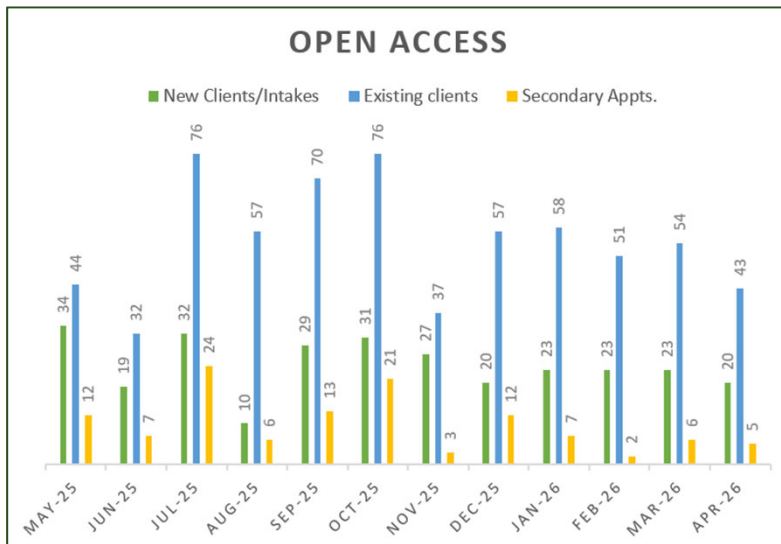
- **The Sullivan County Drug Task Force** reviewed its evolving mission and strategic priorities, emphasizing prevention, recovery support, cross-sector collaboration, and broader substance use response efforts beyond opioids. Members highlighted declining opioid fatalities alongside rising concerns related to cocaine, methamphetamine, alcohol, and synthetic drugs, while stressing the continued impact of nonfatal overdoses and social determinants such as housing and employment. The Task Force also prioritized improved data sharing, public communication tools, and stronger coordination with healthcare providers, community partners, and the District Attorney's Office.
- **Substance Use Care Access Update:**
 - Garnet Health and Lexington Center 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. Goal is to open late summer/early fall of 2026.
 - Oxford House has opened their third sober-living home in Sullivan County, this one supporting men.
 - Lexington Center for Recovery currently moving into 396 Broadway, OASAS has approved site location, currently awaiting on announcement of an opening date.
- **Policy Pillar Update:** Reviewed 12 legislative items centered on improving access to substance use treatment and preventing harm. Developed and refined 72-hour SUD Hold proposal to create a compassionate, clinically supervised window for decision-making addendum to NY Mental Hygiene Law, Article 9. Drafted a County Mandate Proposal on Kratom policy and Recovery-Ready Workplace legislative initiatives.
- **Social Care Access:** Over the past five years, UNITED SULLIVAN has expanded from its role as a pillar of the Drug Task Force and System of Care for Mental Health to being a pioneer in rural social care across the Hudson Valley and New York State by bringing the Unite Us social care referral system to our area. 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.

Community Services Update – Clinic and Care Management

High Risk Clients: In April 2026, there were 163 *(-3 from last month)* clients 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 April 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: April 1, 2026 - April 30, 2026						
Prepared by : Sara A. Cole				CLIENTS		
PROGRAM	ON ROLLS: 4/1/2026	ADMISSIONS	DISCHARGES	ON ROLL: 4/30/2026	CLIENTS SERVED	UNITS OF SERVICE
SC BEHAVIORAL HEALTH CLINIC ADULT	506	23	33	496	529	632
SC BEHAVIORAL HEALTH CLINIC CHILD	32	3	8	27	35	31
SC BEHAVIORAL HEALTH CLINIC FORENSIC	67	1	8	60	68	164
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	605	27	49	583	632	827
SC CARE MANAGEMENT	38	0	1	37	38	904
SC HEALTH HOME- ADULT	36	1	1	36	37	307
SC HEALTH HOME - KENDRA, AOT and HH+	11	0	0	11	11	127
SC HEALTH HOME - CHILD	17	0	1	16	17	188
SC HEALTH HOME - OUTREACH	10			10	10	162
SC CM CCSI					2	5
TOTAL HEALTH HOME CASE MANAGEMENT PROGRAMS	112	1	3	110	115	1,693
SC SPOA - Adult	45			45	45	281
SC SPOA - Child	18			18	18	175
TOTAL SPOA	63	0	0	63	63	456
	# of calls	#of ph interv	Outreaches	Hosp Divers %	Hosp Admit %	
MOBILE MENTAL HEALTH	255	87	30	73	50	



Crisis Services/Mobile Mental Health Update

Crisis Intervention & Law Enforcement Support

- **Crisis Intervention Team Initiative:** Crisis Intervention Team (CIT) working on co-response planning. Continued post-training follow-up and alignment with law enforcement partners. Maintained full-time Quick Response Team (QRT) operations.
- **Mobile Crisis Services:** Continued enhancement of MCS under the approved No Cost Time Extension (NCTE) through 2026. Ongoing system alignment & responder coordination.
- 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
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%
Apr-26	255	87	30	73%	8	4	50%



Community Services Update – Local Government Unit

Single Point of Access (SPOA) Program:

- On April 9, 2026, the Adult SPOA Committee met via Zoom with 9 new cases & 6 previous cases reviewed. There are a total of 138 RSS beds with 121 people on the waiting list (+3 from last month) and 13 openings (no change from last month) with some of the apartments are in need of repairs.
- Children’s SPOA Committee met via Zoom on April 23, 2026, and went over 9 previous cases, plus 1 new case.

Peer & Community Support Services:

- Supported clients through Probation, Drug Court, SUNY Sullivan, DSS, and community outreach by providing screenings, safety planning, benefits navigation, housing support, and treatment coordination.
- Participated in CTRT outreach, kit making initiatives, and collaboration with peer, treatment, recovery, and justice-system partners.

Narcan Outreach:

- Maintained and restocked NaloxBoxes, vending machines, and harm reduction supplies county-wide, including Narcan kits, fentanyl test strips, and wound care kits.
- Coordinated inventory tracking, expired kit replacements, and distribution efforts with providers, RSS sites, ATI, and community partners.

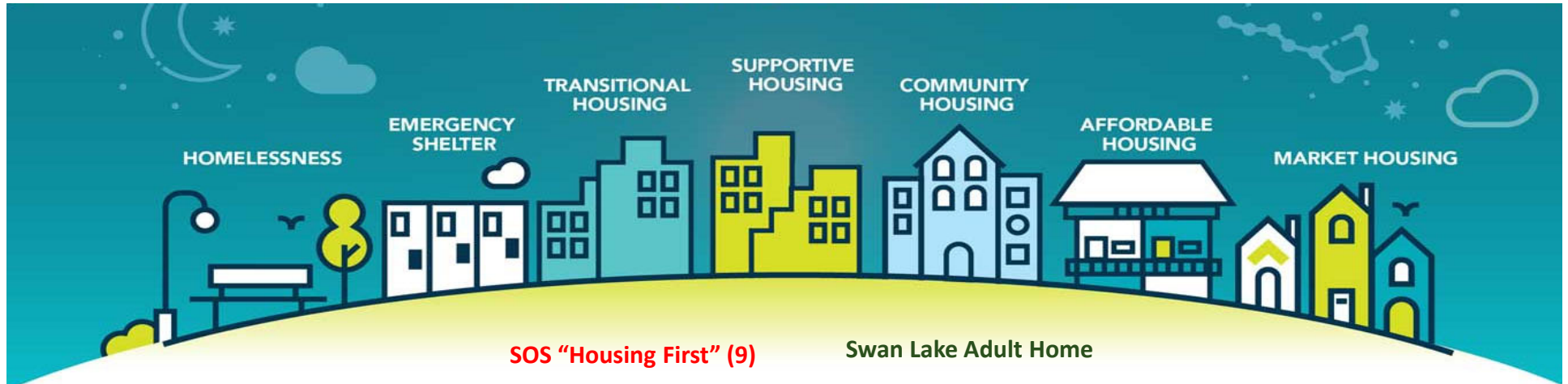
Community & Recovery Engagement:

- Participated in SALT, DTF, Mental Hygiene, CSB CTRT, and recovery-focused meetings to strengthen coordination across treatment, recovery, housing, and prevention systems.
- Advanced Voices of Recovery Planning, Garnet Health in-services coordination, and Family Peer Advocate initiatives with community stakeholders.

Community Awareness & Public Engagement:

- Supported Bold Gold podcast planning, United Sullivan outreach, surveys, media engagement, and public awareness initiatives.
- Distributed prevention, food pantry, warming center, and community resources information to treatment, justice, and community partners.

Sullivan County's Housing Continuum



Safe Options Support (SOS)

Oxford House (~16)

Warming Centers (~40 seasonal)

Out-of-county DV shelters

SOS "Housing First" (9)

Catholic Charities (28)

Rehabilitation Support Services (RSS) (138, 121 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)

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)

Emergency Shelter Census (5/4/26)	
Families	27 (-5)
Singles	153 (-6)
Adults	195 (-13)
Children	46 (-11)
Sex Offenders	28 (+2)
Total (Adults + Children)	241 (-25)

* 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 APR
PERSONAL CARE AIDES			
CASES OPENED	18	0	
CASES CLOSED	9	6	
# CASES (AVG.)	38.41	33.46	33
PERS			
# CASES (AVG.)	0	0	0
APS REFERRALS			
16A Neglect/Abuse	27	36	13
16B Neglects Own Basic Needs	73	23	7
16B Untreated Medical Conditions	31	10	1
16B Self-endangering Behaviors	10	3	0
16B Unable to Manage Finances	39	8	2
16B Environmental Hazards	60	7	1
Undetermined	25	3	3
APS			
CASES OPENED	263	90	27
CASES CLOSED	264	98	21
# CASES (AVG.)	161.35	154.58	155
GUARDIANSHIPS			
OPEN	46	46	1
REP PAYEE			
OPEN	121	126	2

FOSTER CARE STATISTICS				CHILD PROTECTIVE STATISTICS			
	APR 2026	Trend	Goal		2025	YTD 26	APR
Kinship%	31.77%		20%	# New Reports	1330	521	141
Congregate Care%	14.95%		16%	# Closed Cases (UNF, FAR, IND)	997	358	90
Total in Care	107		<100	# Unfounded Reports	486	166	42
RTF/RTC	6			# Closed FAR	257	90	23
Diagnostic	0			# Indicated Reports	254	102	25
Group Home	2			Physical abuse	14	12	4
Therapeutic Foster Home	22			Emotional abuse	1	0	0
Regular Foster Home	33			Sexual abuse	13	2	0
Kinship	34			Neglect	123	47	6
Other	10			Domestic violence	15	1	0
Freed for Adoption	21			Educational neglect	52	19	7
Certified Homes	68		5x# in care	Substance abuse	33	21	8
Newly Certified Homes	2			1034	3	0	0
Number of Closed Homes	4			PREVENTIVE SERVICES STATISTICS			
New Kinship Homes	2			NEW REFERRALS		19	
Pending Certification	2			TOTAL CASES		91	
Completed Adoptions	5						
YTD Completed Adoptions	9						

- Foster Care Statistics:** Continuing the same trend as last month, we should have under 100 children in Foster Care by the end of June due to children continuing to return home or achieve permanency through adoption. We have 4 adoptions scheduled for the month of June.
- Child Protective Statistics:** April was the first month we were at zero overdue CPS cases. According to OCFS CPS stats Sullivan County DSS is tied for #1 with several other counties in New York State for having no workers with more than 15 cases. Overdue investigations are at zero.



Child Welfare Case Lifecycle Management

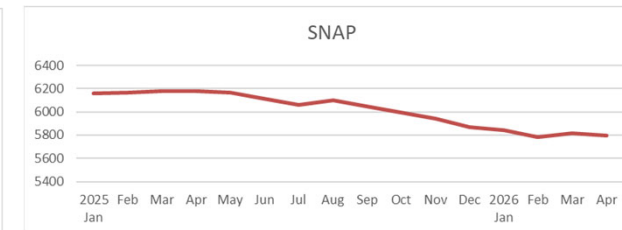
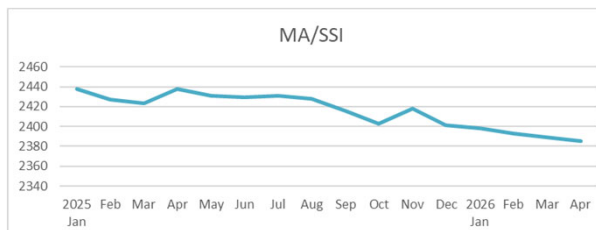
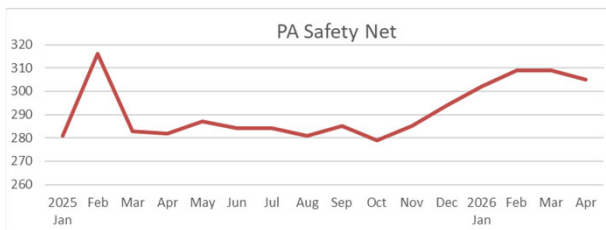
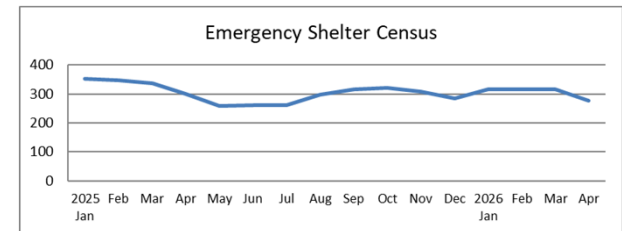
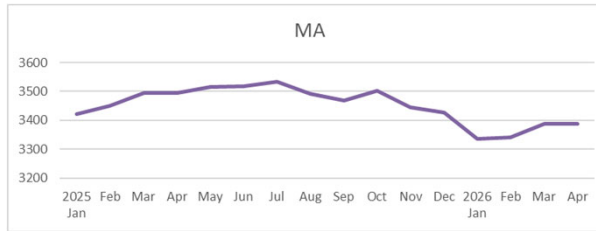
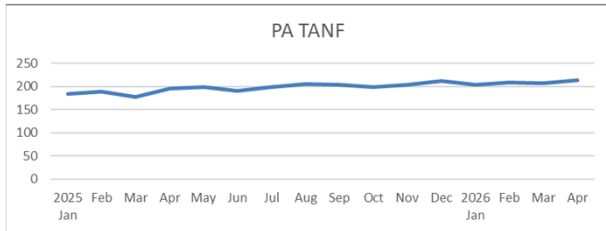
CHILD WELFARE CASE LIFECYCLE MANAGEMENT DASHBOARD													
	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	
EOM STATISTICS													AVERAGE
Overdue 7-day Safety Assessments (CPS)	<1	<1	0	0									0
Overdue 7-day Safety Assessments (FAR)	0	<1	0	<1									0
Overdue Case Closures (CPS)	14	8	4	3									7.25
Overdue Case Closures (FAR)	4.5	4	3.5	3									3.75
PREV Referral Timeliness	7	16	6.5	6									8.875
QUARTERLY INTERNAL COMPLIANCE AUDITS (GREEN INDICATORS = ≥85% Effective, YELLOW = 75%-84%, RED = ≤74%)													AVERAGE
CPS Progress Notes	95%			80%									0.875
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%			87%									0.865
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/uptodate			100/68%										#DIV/0!
HOTLINE SOURCES													ANNUAL TOTAL
School	51	37	62	50									200
Immediate Family	12	10	7	14									43
Extended Family	5	5	9	4									23
Hospital	8	11	9	12									40
Other Medical Provider	11	5	10	4									30
Law Enforcement	18	13	16	25									72
DSS Internal	7	11	15	12									45
Other	17	18	16	20									71



Social Services Program Statistics

Fraud Investigations (as of 4/30/2026)						
Collections	Cases Active	Cases Referred	Completed	Arrests	Pending arrests	Burials
\$4,380.87 (-8,068.13)	301 (+8)	48 (+5)	40 (-6)	3 (-/+0)	9 (+3)	4 approved (-4) \$7,285.00 costs (8,131.00)
Child Support Enforcement Cases (as of 4/30/2026)						
Collections	Petitions Filed	Paternity Establishments	Total Cases			
\$622,079 (-\$35,528)	39 (+5)	16 (+5)	2,708 (+13)			

Public Assistance (PA) Cases (as of 4/30/2026)				
Temp. Assistance to Needy Families (TANF)	Safety Net	Food Stamps	Medical Assistance (MA)	MA/Supplemental Security Income (SSI)
214 (+8)	305 (-4)	5798 (-17)	3388 (+/-0)	2385 (-4)
Homelessness Snapshot (as of 4/30/2026)				
Code Blue	Quarantined	Adults / Children	Sex Offenders	Emergency Shelter Census
1 (-7)	0	214/63 (-20/-18)	26 (+2)	277 (-38)



Public Assistance:

- As of May 27, 2026, we used \$165,560.40 County RSP funds leaving \$84,439.60 left to secure permanent housing for both singles and families that were in temporary housing or close to losing their housing.
- Also, as of May 27, 2026 we used \$43,362.30 of or SAEF funding leaving \$53,570.70 to still assist individuals from being evicted for nonpayment of rent.
- In April weekly meetings started with Preventive, CPS, Housing and Case Management to pull our resources together in an effort to help our families in temporary housing obtain permanent housing.

Monthly Total Expenses to Date	Monthly Cash Receipts	End of Month Census	Meals Prepared for Residents
\$1,192,270.72	\$789,379.44	108	10,008
Admissions / Discharges (to home or Assisted Living)	Total ST treatments	Total OT treatments	Total PT treatments
4/12	66	532	750

Nursing Services

- Nursing Services continues to demonstrate flexibility and responsiveness to the evolving needs of residents through ongoing policy review and regular staff education and in-service training.
- Collaboration with SUNY Sullivan resulted in another successful semester of clinical rotations for nursing students.
- Flu season concluded in April with no significant issues.
- Preparations are underway for the spring and summer months, including a review of staffing patterns and staff utilization to align with budgetary expectations.

Activities & Resident Engagement


- Residents enjoyed a meaningful Passover service and Easter brunch, including an egg-coloring activity.
- The Activities Department hosted a cooking group where residents prepared fresh fruit salads.
- Several new group games were introduced and well received throughout April.
- Group activity participation for April 2026 totaled 2,266, representing a 7.13% decrease from March.
- Individual activity participation for April 2026 totaled 1,380, representing a 6.07% increase from March.

Rehabilitation & Restorative Therapy

- Medicare residents continue to be reviewed to ensure appropriate utilization of therapy services and achievement of desired outcomes.
- Department productivity is monitored regularly, and all therapy staff are meeting established performance benchmarks.
- The Side Rail Project remains in progress. Initial assessments have been completed by therapy staff, with quarterly reassessments scheduled as indicated.
- Dietary and Speech Therapy continue to work collaboratively to optimize resident meal plans and ensure swallowing safety.
- Nursing, Physical Therapy, and Speech Therapy maintain ongoing collaboration to monitor residents following falls and to implement strategies aimed at fall prevention.
- The annual Case Mix Index (CMI) review was completed, and final numbers were confirmed prior to the state freeze with no additional changes.
- Staffing challenges remain. Current vacancies include PRN Occupational Therapist (OT), Physical Therapist (PT), Speech Therapist (ST), Physical Therapist Assistant (PTA), and Certified Occupational Therapy Assistant (COTA).
- A full-time Speech-Language Pathologist (SLP) has been hired and is expected to begin in June or July, pending state licensure.
- Rehabilitation services continue to play a critical role in maintaining functional abilities, preventing decline among long-term care residents, and supporting safe and timely discharges for short-term rehabilitation patients.

Summary

Departments continue to focus on resident-centered care, interdisciplinary collaboration, and responsible resource management. Recruitment efforts remain ongoing to address staffing needs, while resident engagement and rehabilitation outcomes continue to support quality of life and clinical excellence throughout the facility.



Community Services (8 Positions Vacant, 40 Authorized, 20.00% Vacant)	
Assistant Social Worker II, #369, #721, #3759	2 approved to fill, 1 submitted for review
Staff Social Worker I, #0130, #2267, #3288, #3677	1 approved to fill, 2 submitted for review
CIT/Crisis Mental Hygiene Coordinator, #3722	ON HOLD

Social Services (13 Positions Vacant, 184 Authorized, 7.06% Vacancy Rate)	
Account Clerk, #1269, #2869	2 Approved to Fill, 1 ON HOLD , 1 Request to fill (RTF) submitted , Canvassed and Posted
Account Clerk/Database, #2222	ON HOLD
Case Services Aide, #3581	Recent promotion, RTF submitted
Caseworker #78, #3052	RTF submitted, interviewing
FS Investigator Trainee, #3676	ON HOLD
Senior Case Services Aide, #616, #3754, #3755	2 Positions revised in 2026 budget, 1 recent promotion, RTF submitted – ON HOLD
Senior Account Clerk/Database, #257, #3688	RTF submitted
Social Welfare Examiner, #809	Approved to fill, interviewing



Sullivan County

Legislative Memorandum

100 North Street
Monticello, NY 12701

File #: ID-8433

Agenda Date: 6/11/2026

Agenda #: 2.



CHHA: Certified Home Health Agency

- CHHA Quality rating 3 stars for the first time ever.
- CHHA Patient Satisfaction Survey 5 stars.
- New PT started and is training

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	4.91									4.82
New Patients*	1027	69	43	76	62									250
Discharges*	1105	70	43	70	68									251
RN/LPN Visits*	6330	413	389	473	490									1765
PT/PTA Visits	6698	389	309	360	386									1444
OT Visits*	2567	132	117	239	220									708
ST Visits*	786	66	54	66	61									247
PCA		5	2	3	5									15
PRI/Screen		5	1	3	5									14
HHA Visits*	795	32	49	55	37									173
Total Visits	17749	1042	921	1199	1204									4366

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

Goal / Area of Focus	Key Performance Indicators	Update / Progress																																
<p>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.</p>	<ul style="list-style-type: none"> Average daily census (ADC) 	<ul style="list-style-type: none"> ADC: 118 																																
<p>Increase the number of new patient admissions through enhanced referral partnerships, physician outreach, and digital marketing strategies.</p>	<ul style="list-style-type: none"> # of referrals <ul style="list-style-type: none"> Referral Conversion Rate (RCR) (referrals → admissions) <ul style="list-style-type: none"> Target RCR: 40-60% # of new patients # of discharges 	<ul style="list-style-type: none"> # of referrals: 88 RCR: 70% new patients: 62 discharges: 68 																																
<p>Maintain Full Staffing</p> <p>Achieve an average of 5 points per day, per clinician while maintaining high-quality care, measured through patient satisfaction scores and clinical outcome improvements.</p>	<ul style="list-style-type: none"> # of staff for all CHHA positions Staff Productivity <ul style="list-style-type: none"> # of visits by type: <ul style="list-style-type: none"> RN- Registered Nurse PT- Physical Therapy OT- Occupational Therapy ST- Speech Therapy MSW- Master Social Work Visit HHA- Home Health Aid Visit 	<ul style="list-style-type: none"> Staff Productivity: 4.91 See table below <table border="1" data-bbox="1482 688 1902 938"> <thead> <tr> <th>Field</th> <th>full-time</th> <th>perdiem</th> <th>total</th> </tr> </thead> <tbody> <tr> <td>RN</td> <td>6</td> <td>3</td> <td>9</td> </tr> <tr> <td>LPN</td> <td>2</td> <td></td> <td>2</td> </tr> <tr> <td>PT</td> <td>4</td> <td>1</td> <td>5</td> </tr> <tr> <td>PTA</td> <td>1</td> <td></td> <td>1</td> </tr> <tr> <td>OT</td> <td>3</td> <td></td> <td>3</td> </tr> <tr> <td>ST</td> <td>1</td> <td></td> <td>1</td> </tr> <tr> <td>total</td> <td>17</td> <td>4</td> <td>20</td> </tr> </tbody> </table>	Field	full-time	perdiem	total	RN	6	3	9	LPN	2		2	PT	4	1	5	PTA	1		1	OT	3		3	ST	1		1	total	17	4	20
Field	full-time	perdiem	total																															
RN	6	3	9																															
LPN	2		2																															
PT	4	1	5																															
PTA	1		1																															
OT	3		3																															
ST	1		1																															
total	17	4	20																															
<p>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.</p> <p>(PRI established by the NYSDOH, is used to assess the physical, medical, and mental characteristics of individuals who may require nursing home care, and to document the level of services needed to support their ongoing health and safety.)</p>	<ul style="list-style-type: none"> # PRI assessments 	<ul style="list-style-type: none"> # PRI assessments: 5 																																
<p>Ensure Personal Care Assessments (PCA) are completed thoroughly and in alignment with program standards to support effective care planning.</p> <p>(PCA is an evaluation used to determine an individual's need for assistance with daily living tasks such as bathing, dressing, mobility, meal preparation, and medication support.)</p>	<ul style="list-style-type: none"> # PCA assessments 	<ul style="list-style-type: none"> # PCA assessments: 5 																																

Maternal and Child Health Programming

Child Passenger Safety Program (Car Seat Program)

- 2026–2027 Child Passenger Safety Grant application has been submitted. SCDPH is seeking to expand and strengthen this program through additional car seat check events, educational workshops, hands-on activities for young children, and more highly publicized distribution events to better reach underserved and high-need families throughout the community. In recent years, this grant provided approximately \$14,000; however, the most recent application request totals \$29,099.

Goal / Area of Focus	Key Performance Indicators	Update / Progress
Car Seat Distribution and Education	<ul style="list-style-type: none"> # of car seats distributed # of car seats checks 	<ul style="list-style-type: none"> # of car seats distributed: 9 # of education provided: 6

Healthy Families

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 completed home visits: 85% 	<ul style="list-style-type: none"> # of enrolled families: 71 89% completed home visits (153 out of 171) 												
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: 10 # agreed to services and registered: 5 RCR: 63% 												
Maintain Full Staffing	<ul style="list-style-type: none"> # 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 style="text-align: right;">2</td> </tr> <tr> <td>Bilingual FSW</td> <td style="text-align: right;">2</td> </tr> <tr> <td>Program Supervisor</td> <td style="text-align: right;">1</td> </tr> <tr> <td>Program Manager</td> <td></td> </tr> <tr> <td>total</td> <td style="text-align: right;">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													
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total	5													

Children and Youth with Special Healthcare Needs / Early Intervention

- Movie Night was held on 4/17 (Zootopia 2) as a family-centered community engagement event designed to promote social connection, wellness, and positive family interaction. The event provided a safe and accessible recreational opportunity for local families while also increasing awareness of SCDPH programming, resources, and supportive services available throughout the community. **5 children in attendance.**
- Stay & Play Sensory Night 4/23 provided families with a supportive, inclusive environment focused on sensory-friendly play, social interaction, and child development activities. The event encouraged caregiver engagement, promoted awareness of developmental resources available within the community, and offered opportunities for children of varying abilities and sensory needs to participate in hands-on activities in a welcoming setting. **15 children attended.**

Goal / Area of Focus	Key Performance Indicators	Update / Progress
Ensure that initial CPSE evaluations are completed within 60 calendar days of referral.	<ul style="list-style-type: none"> • # of active cases 	<ul style="list-style-type: none"> • # of active cases: 290
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 <ul style="list-style-type: none"> ○ # of new referrals 	<ul style="list-style-type: none"> • # of active cases: 210 <ul style="list-style-type: none"> ○ # of new referrals: 23
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 <ul style="list-style-type: none"> ○ Recommended 26-60, best practice = 35. 	<ul style="list-style-type: none"> • EI OSC caseload: average of 71
Increase outreach and engagement for Children and Youth with Special Healthcare Needs (CYSHN)	<ul style="list-style-type: none"> • # of active CYSHCN <ul style="list-style-type: none"> ○ # of new referrals • # of Education or Resource Events 	<ul style="list-style-type: none"> • # of active cases: 23 <ul style="list-style-type: none"> ○ # of new referrals: 11 • # of Events: 2
	<ul style="list-style-type: none"> • % of parents receiving reimbursement • # of children on waitlist for bussing 	<ul style="list-style-type: none"> • % of parents receiving reimbursement: <ul style="list-style-type: none"> ○ EI: 48.6% ○ CPSE: 28.1% • # of children on waitlist for bussing: 0

Authorized Services and Waitlisted

- EI Service Type, # children authorized to receive the service
- EI Waitlist: # of children waitlisted for services

EI Service Type	# Authorized Services	Waiting List (#)
Service Coordination	165	29
Speech Therapy	122	21
Occupational Therapy	63	9
Physical Therapy	103	7
Special Instruction	96	5
Group Dev. Model	34	2
Parent Group	1	0
Social Work	2	0

Community Education & Outreach

Health Education / Rural Health Network



Goal / Area of Focus	Key Performance Indicators	Update / Progress																										
<p>Workplace Wellness</p>	<ul style="list-style-type: none"> • # of workplace wellness events • # of employee participants • Topics covered 	<ul style="list-style-type: none"> • # of events: 5 • # of participants: 36 <ul style="list-style-type: none"> ○ Yoga lunch 																										
<p>Outreach/Education/Rural Health Network</p>	<ul style="list-style-type: none"> • # of educational workshops <ul style="list-style-type: none"> ○ # of participants • # of outreach events • # of social media posts • # of PH kits distributed <ul style="list-style-type: none"> ○ Dental Hygiene ADULT ○ Dental Hygiene KIDS ○ Emergency Preparedness Kit ○ Hygiene Kit ○ Overdose Rescue Kit ○ Sexual Health Kit ○ Tick Removal Kit ○ Wound Care Kit 	<ul style="list-style-type: none"> • # of educational workshops: 20 <ul style="list-style-type: none"> ○ Total # of participants: 534 • # of outreach events: 37 • # of social media posts: 40 <ul style="list-style-type: none"> ○ Home Visitors-Healthy Families Program, Kit Making Party, Patient Experience • # of PH kits distributed through outreach: 321 total <ul style="list-style-type: none"> ○ See table <div style="border: 1px solid black; margin-top: 10px;"> <p style="text-align: center; margin: 0;">Table: Public Health Kit Distribution</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 70%;">Description</th> <th style="width: 30%;">Education/Outreach</th> </tr> </thead> <tbody> <tr><td>Dental Hygiene ADULT</td><td style="text-align: center;">0</td></tr> <tr><td>Dental Hygiene KIDS</td><td style="text-align: center;">32</td></tr> <tr><td>Emergency Preparedness Kit</td><td style="text-align: center;">24</td></tr> <tr><td>Hygiene Kit</td><td style="text-align: center;">12</td></tr> <tr><td>Mens Health Kit</td><td style="text-align: center;">0</td></tr> <tr><td>Womens Health Kit</td><td style="text-align: center;">6</td></tr> <tr><td>Sexual Health Kit</td><td style="text-align: center;">4</td></tr> <tr><td>Mental Health Kit</td><td style="text-align: center;">0</td></tr> <tr><td>Tick Removal Kit</td><td style="text-align: center;">101</td></tr> <tr><td>Overdose Rescue Kit</td><td style="text-align: center;">141</td></tr> <tr><td>Wound Care Kit</td><td style="text-align: center;">1</td></tr> <tr> <td style="text-align: right;">Total</td> <td style="text-align: center;">321</td> </tr> </tbody> </table> </div>	Description	Education/Outreach	Dental Hygiene ADULT	0	Dental Hygiene KIDS	32	Emergency Preparedness Kit	24	Hygiene Kit	12	Mens Health Kit	0	Womens Health Kit	6	Sexual Health Kit	4	Mental Health Kit	0	Tick Removal Kit	101	Overdose Rescue Kit	141	Wound Care Kit	1	Total	321
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<p>Narcan Training</p>	<ul style="list-style-type: none"> • # of Narcan trainings <ul style="list-style-type: none"> ○ # of participants • # of 1-on-1 Narcan trainings 	<ul style="list-style-type: none"> • # of Narcan trainings: 2 <ul style="list-style-type: none"> ○ # of participants: 70 • # of 1-on-1 Narcan trainings: 0
<p>Community Health Workers (CHW)</p>	<ul style="list-style-type: none"> • # of CHW visits • # of referrals provided • Top 3 identified needs 	<ul style="list-style-type: none"> • # of CHW visits: 11 • # of referrals provided: 7 • Top 3 identified needs: <ul style="list-style-type: none"> ○ Workforce (unemployment, SNAP, Temporary Assistance, immigration)

Quality

Training & Quality

Goal / Area of Focus	Key Performance Indicators	Update / Progress
<p>Staff education</p>	<ul style="list-style-type: none"> • # staff trainings offered • Topics covered • # of participants 	<ul style="list-style-type: none"> • 5 • Virtual: Perinatal Postpartum Support Group, by Access Supports for Living (7), Interprofessional Collaborations’ Role in Diabetes Prevention (1), and Upstate Poison Center Training and Toolkit (1) • In Person: Community Health Presentation (55-All Staff Meeting), and NYSACHO Public Health Partnership Conference (Darby Nagpaul)
	<ul style="list-style-type: none"> • Ongoing analysis of existing policies, updates, and creation of new. 	<ul style="list-style-type: none"> • External Affairs Committee implementation: Process for reviewing outgoing materials such as flyers, presentations, newsletters. • Community Health Improvement Plan in progress: Due in June • Human Services Advisory Board: Quarterly meeting
	<ul style="list-style-type: none"> • Other/Events 	<ul style="list-style-type: none"> • Open house event showcasing Public Health Programs and new clinic spaces. 72 participants.

Disease Surveillance and Investigation

- We are seeing an increase in illnesses spread through contaminated food or water, as well as illnesses spread by ticks.
- There is growing concern about people becoming infected with syphilis again after previous treatment.

Goal / Area of Focus	Key Performance Indicators	Update / Progress
<p>Immunization Program</p>	<ul style="list-style-type: none"> • OFFICE CLINICS -VFC, VFA, FLU, COVID <ul style="list-style-type: none"> ○ # PEOPLE IMMUNIZED ○ # OF DOSES (VFC, VFA) • WALK-IN - VFC, VFA, FLU, COVID <ul style="list-style-type: none"> ○ # PEOPLE IMMUNIZED ○ # OF DOSES (VFC, VFA) • PUBLIC CLINICS <ul style="list-style-type: none"> ○ # PEOPLE IMMUNIZED ○ # OF DOSES in the PUBLIC • POD (Point of Distribution) CLINICS <ul style="list-style-type: none"> ○ # of DOSES@ PH ○ # of DOSES In public <p>TOTALS</p> <ul style="list-style-type: none"> • TOTAL # CLINICS • TOTAL #PEOPLE IMMUNIZED VFC, VFA, COVID office & walkin • TOTAL # DOSES @ PHS • TOTAL # DOSES (Public) • COMBINED TOTALS OF ALL DOSES <p>Ages of vaccinated: Categorized by group</p>	<ul style="list-style-type: none"> • OFFICE CLINICS: 2 <ul style="list-style-type: none"> ○ # PEOPLE IMMUNIZED: 3 ○ # OF DOSES: 3 • WALK-IN: 2 <ul style="list-style-type: none"> ○ # PEOPLE IMMUNIZED: 2 ○ # OF DOSES: 2 • 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 <p>TOTALS</p> <ul style="list-style-type: none"> • TOTAL # CLINICS: 2 • TOTAL #PEOPLE IMMUNIZED: 5 • TOTAL # DOSES @ PHS: 5 • TOTAL # DOSES (Public): 0 <ul style="list-style-type: none"> ○ COMBINED TOTALS OF ALL DOSES: 5 <p>Ages of vaccinated:</p> <ul style="list-style-type: none"> • 1-6 yrs: 0 • 7-18 yrs: 5 • 19-35 yrs: 0
<p>Rabies</p>	<ul style="list-style-type: none"> • # of reported animal bites/incidents <ul style="list-style-type: none"> ○ Domestic ○ Wildlife • # animals tested 	<ul style="list-style-type: none"> • # of reported animal bites/incidents: 28 <ul style="list-style-type: none"> ○ Domestic - Cat Incidents: 5 ○ Domestic - Dog Bites: 20 ○ Wildlife – Bat: 1

	<ul style="list-style-type: none"> ○ Domestic ○ Wildlife ● # tested positive for rabies ● # rabies vaccination clinics 	<ul style="list-style-type: none"> ○ Wildlife – Fox: 1 ○ Unknown- 1 ● # animals tested: 1 <ul style="list-style-type: none"> ○ Domestic - Cat Incidents: 0 ○ Domestic - Dog Bites: 0 ○ Wildlife – Bat: 1 ● # tested positive for rabies: 0 ● # rabies vaccination clinics: 1 <ul style="list-style-type: none"> ○ 4/2/26, Livingston Manor, 71 vaccinated 								
Emergency Preparedness	<ul style="list-style-type: none"> ● # of training meetings 	<ul style="list-style-type: none"> ● # of training meetings: 0 								
Medical Reserve Corp. (MRC)		N/A								
Lead	<ul style="list-style-type: none"> ● # of Lead Tests ● # of Positive Cases ● # of Visits with DOH 	<ul style="list-style-type: none"> ● Total labs drawn: 118 ● Lead Education: ● # of Positive cases: 1 								
Sexually Transmitted Infections (STI)	<ul style="list-style-type: none"> ● # of lab reported cases ● # of health care provider follow-up for + labs ● # of confirmed disease type: <ul style="list-style-type: none"> ○ Chlamydia ○ Gonorrhea ○ Syphilis ● # of rapid HIV tests completed ● # of referrals made for HIV related services 	<ul style="list-style-type: none"> ● # of lab reported cases: 35 ● # of confirmed disease type: <ul style="list-style-type: none"> ○ Chlamydia: 27 ○ Gonorrhea: 4 ○ Syphilis (primary): 4 ● # of rapid HIV tests: 1 ● # of referrals made for HIV related services: 0 <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>Total # lab reported, STD</td> <td style="text-align: right;">35</td> </tr> <tr> <td>STI: chlamydia</td> <td style="text-align: right;">27</td> </tr> <tr> <td>STI: gonorrhea</td> <td style="text-align: right;">4</td> </tr> <tr> <td>STIs: syphilis</td> <td style="text-align: right;">4</td> </tr> </table>	Total # lab reported, STD	35	STI: chlamydia	27	STI: gonorrhea	4	STIs: syphilis	4
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Hepatitis	<ul style="list-style-type: none"> ● # of lab reported cases ● # of health care provider follow-up for + labs ● # of confirmed disease type: 	<ul style="list-style-type: none"> ● # of lab reported cases: 13 <ul style="list-style-type: none"> ○ ↓ 5 previous month ● # of confirmed disease type: <ul style="list-style-type: none"> ○ Hep B: 3 								

		<ul style="list-style-type: none"> ○ Hep C: 10 																		
<p>Tuberculosis (TB)</p>	<ul style="list-style-type: none"> ● # newly reported, Active TB cases ● # of latent TB cases ● # of reported by pending TB cases 	<ul style="list-style-type: none"> ● # newly reported, Active TB cases: 0 ● # of latent TB cases: ● # of reported by pending TB cases: 0 																		
<p>General Communicable Reportable Diseases</p>	<ul style="list-style-type: none"> ● # of lab reported cases ● # of confirmed disease type (varies monthly) 	<ul style="list-style-type: none"> ● # of lab reported cases: 356 (87 Influenza) <ul style="list-style-type: none"> ○ ↓ 178 from previous month ○ Top 5 most reported table below <table border="1" data-bbox="1297 570 1940 964"> <thead> <tr> <th></th> <th>Monthly Total</th> </tr> </thead> <tbody> <tr> <td>Case Surveillance & Volume</td> <td></td> </tr> <tr> <td>Total # lab reported, General Communicable</td> <td>356</td> </tr> <tr> <td>Disease-Specific Reporting (Top 5 General Communicable)</td> <td></td> </tr> <tr> <td>Anaplasmosis</td> <td>5</td> </tr> <tr> <td>Strep Pneumonia</td> <td>3</td> </tr> <tr> <td>Campy</td> <td>1</td> </tr> <tr> <td>Giardia</td> <td>1</td> </tr> <tr> <td>Babesiosis</td> <td>1</td> </tr> </tbody> </table>		Monthly Total	Case Surveillance & Volume		Total # lab reported, General Communicable	356	Disease-Specific Reporting (Top 5 General Communicable)		Anaplasmosis	5	Strep Pneumonia	3	Campy	1	Giardia	1	Babesiosis	1
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Sullivan County
Legislative Memorandum

100 North Street
Monticello, NY 12701

File #: ID-8430

Agenda Date: 6/11/2026

Agenda #: 1.

Narrative of Resolution:

Accept an additional Grant Award amount for years 2 and 3 of the Children and Youth with Special Health Care Needs Program

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

Amount to be authorized by Resolution: \$40,000.00 in grant funds

Are funds already budgeted? Choose an item.

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

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

Specify Compliance with Procurement Procedures:

RESOLUTION INTRODUCED BY THE HEALTH AND HUMAN SERVICES COMMITTEE TO ACCEPT AN ADDITIONAL AWARD AMOUNT FOR YEARS 2 AND 3 OF THE CHILDREN AND YOUTH WITH SPECIAL HEALTH CARE NEEDS PROGRAM

WHEREAS, the Sullivan County Department of Public Health has been awarded a 5-year contract for the NYS Department of Health Children with Youth and Special Health Care Needs Program in the amount of \$61,003 annually; and

WHEREAS, the funding source has offered to provide additional funds via the Community Accessibility and Inclusion program in the amount of \$33,382 for years 2 and 3 of the grant for the period 10/01/2026 - 10/01/2027 and 10/01/2027 - 9/30/2028 respectively; and

WHEREAS, resolution 372-25 authorized the County to only accept funds up to the limit of \$60,657 each year; and

WHEREAS, there is no match required to accept the funds resulting in a simple increased award; and

WHEREAS, based on the funding structure if any County does not accept the additional funds they will be dispersed amongst consenting counties resulting in a potentially larger additional award than \$33,382; and

WHEREAS, all grant awards must be approved by the County Legislature in the appropriate amount prior to executing and submitting an intent to participate and an acceptance of CAI funds would increase the award amount for years 2 and 3 from \$61,003 to \$94,385.

NOW, THEREFORE, BE IT RESOLVED, that the Sullivan County Legislature hereby authorizes the Director of Public Health (*as required by the funding source*) to execute any and all necessary documents to submit the Intent to Participate form for the additional CYSCHN funds; and

BE IT FURTHER RESOLVED, that the Sullivan County Legislature hereby authorizes an additional award amount up to \$40,000 for years 2 and 3 of the CYSCHN program to account for the potential provision of a greater award per the funding structure; and

BE IT FURTHER RESOLVED, that should the Community and Accessibility and Inclusion program funding be terminated, the County shall not be obligated to continue any action undertaken by the use of this funding.