



Sullivan County
Health & Human Services
Meeting Agenda - Final

100 North Street
Monticello, NY 12701

Chairman Catherine Scott
Vice Chairman Matt McPhillips
Committee Member Brian McPhillips
Committee Member Amanda Ward
Committee Member Terry Blosser-Bernardo

Thursday, December 11, 2025

11:15 AM

Government Center

Call To Order and Pledge of Allegiance

Roll Call

Comments:

Reports:

1. Division of Health and Human Services
December 2025
Monthly Report

[ID-7960](#)

Attachments: [2025-12 HHS Monthly Report](#)

Discussion:

Public Comment

Resolutions:

1. Correct Resolution No. 441-24 funding language for BRIMS, LLC
Comprehensive billing services.
2. Authorize entering into provider agreement with Fidelis insurance.
3. To enter into an agreement for the provision of welfare to work, employment
and training related services
4. To enter into an agreement between the Department of Social Services and
Together for Youth for Non-Secure Detention Services

[ID-7932](#)

[ID-7933](#)

[ID-7955](#)

[ID-7956](#)

Adjourn



Sullivan County

Legislative Memorandum

100 North Street
Monticello, NY 12701

File #: ID-7960

Agenda Date:

Agenda #: 1.

Division of Health and Human Services (DHHS) Monthly Update

December 2025

Agenda

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

Drug Task Force Update

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

Law Enforcement	Treatment	United Sullivan	Prevention	Policy	Veterans
11/6/2025	10/16/2025	Meeting Weekly	11/26/2025	11/19/2025	11/18/2025

Drug Task Force Key Statistics

911 Responses to Overdose	Opioid Overdose Death Rate (2024)
October: 16 (-6 from previous month) – 5 Narcan administrations	26 deaths; 32.5/100,000 2023 totals: 38 deaths; 47.5/100,000

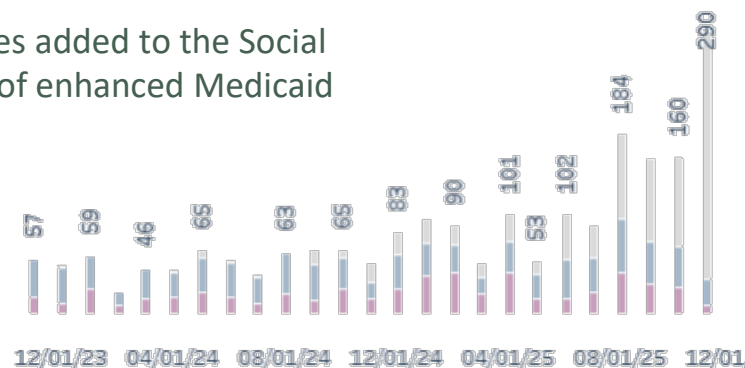
- **October saw another decrease in overdose calls to 911.** The decrease aligns with seasonal norms we have seen over the past few years. It is a higher number than we saw in October 2024 (11), but is still significantly lower than monthly averages from 2020-2023. There was no common drug of choice reported in the October data.
- **Substance Use Care Access Update:**
 - Garnet Health and Lexington Centers are bringing inpatient drug treatment back to Sullivan County at Garnet Health-Catskills. Lexington and Garnet are currently renovating the former skilled nursing unit in Harris as an inpatient substance use treatment facility with 47 residential and 6 detox beds. Goal is to open early in 2026.
 - Oxford House has opened their second sober-living home in Sullivan County, this one supporting women, including potentially mothers and children.
 - Lexington Center for Recovery completed a tour of 396 Broadway on 11/6 to review facility updates and collaboration opportunities with OASAS.
- **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. Ongoing research on kratom policy and Recovery-Ready Workplace legislative initiatives.



Social Care Network Update

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

- Our attempts to further increase network activity and connect more persons to services are dependent on resolving compliance concerns that have been raised during the process of updating our contract with Unite Us and the Hudson Valley Social Care Network.



- **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.
 - The Department of Community Services (DCS) will submit a grant this month to OMH which would cover personnel costs for Mental Health specialists who would be a part of this care team.

Local Unite Us Partners (41 Agencies/Locations) (+1 from last month)

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

Community Services Update – Clinic and Care Management

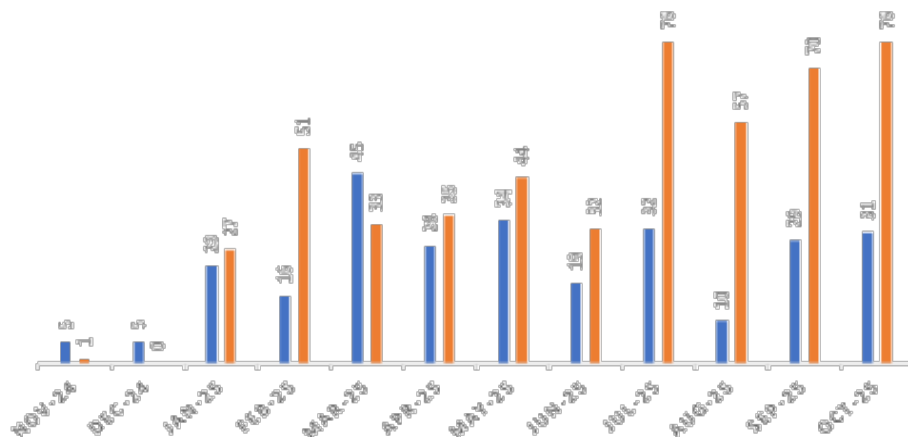
High Risk Clients: In October 2025, there were 164 clients on the roster for high risk census.

- **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. Our current emphasis is on successful referrals via Unite Us and strengthening provider cooperation from inpatient to residential and outpatient care.

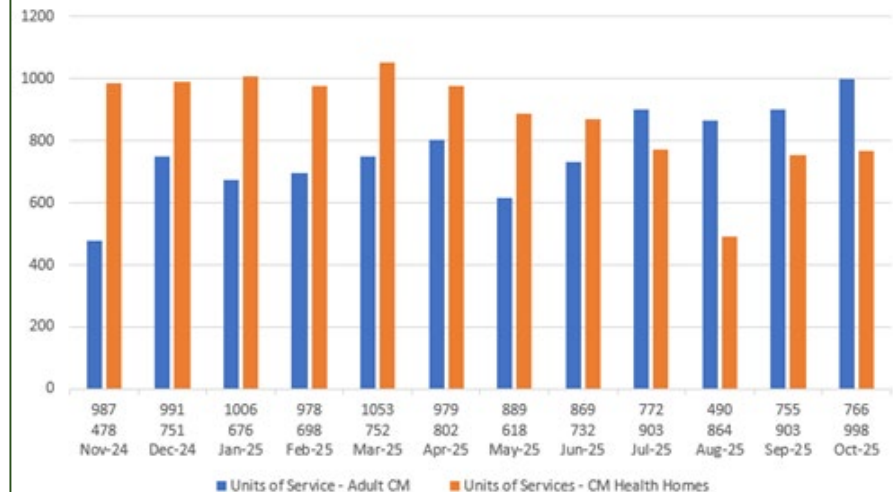
The Care Management unit continues to actively engage & work with clients for both of the Health Home agencies and the HARP Services (Health and Recovery Plan) which are Medicaid and Medicaid Managed Care Health Plans. As of the end of October 2025, there are 4 active Assisted Outpatient Treatment (AOT) orders and there is 2 people on enhanced AOT services.

OPEN ACCESS

■ New Clients/Intakes ■ Existing clients



Units of Service for CM



Clinic and Care Management Statistics

SULLIVAN COUNTY DEPARTMENT OF COMMUNITY SERVICES						
STATISTICAL SUMMARY FOR: October 1, 2025 - October 31, 2025						
Prepared by : Sara A. Cole				CLIENTS		
	ON ROLLS:			ON ROLL:	CLIENTS	UNITS OF
PROGRAM	10/1/2025	ADMISSIONS	DISCHARGES	10/31/2025	SERVED	SERVICE
SC BEHAVIORAL HEALTH CLINIC ADULT	463	18	30	451	481	842
SC BEHAVIORAL HEALTH CLINIC CHILD	25	4	2	27	29	38
SC BEHAVIORAL HEALTH CLINIC FORENSIC	78	4	13	69	82	171
SC BEHAVIORAL HEALTH CLINIC MICA	22	1	2	21	23	Included In Clinic Adult
SC BEHAVIORAL HEALTH CLINIC MAT	15	0	2	13	15	Included In Clinic Adult
TOTAL MENTAL HEALTH	603	27	49	581	630	1,051
SC CARE MANAGEMENT	33	0	0	33	33	994
SC HEALTH HOME- ADULT	38	0	1	37	38	224
SC HEALTH HOME - KENDRA, AOT and HH+	13	0	1	12	13	92
SC HEALTH HOME - CHILD	15	1	0	16	16	206
SC HEALTH HOME - OUTREACH	11			11	11	244
SC CM CCSI					1	4
TOTAL HEALTH HOME CASE MANAGEMENT PROGRAMS	110	1	2	109	112	1,764
SC SPOA - Adult	53			53	53	315
SC SPOA - Child	15			15	15	129
TOTAL SPOA	68	0	0	68	68	444

Single Point of Access (SPOA) Program:

- On October 9, 2025, the Adult SPOA Committee met via Zoom with 15 new cases 8 previous cases reviewed.
- There are a total of 137 RSS beds with 102 people on the waiting list and 15 openings. Children's SPOA Committee met via Zoom on October 23, 2025, and went over 5 previous cases. There were no new cases.

Peer & Community Support Services

- **Peer Court Navigator Program:** Onboarded new clients; conducted screenings, release forms, and benefit navigation. Assisted with SUNY Reconnect registration, FAFSA, and multiple housing/shelter applications. Maintained regular client check-ins and communication with FEARLESS, Probation, and other partners.
- **Narcan Outreach:** Continued distribution through Naloxboxes, community events, and vending machines. From July 1 – Oct 31, 2025, 969 items were dispensed from our vending machines, including 184 Narcan kits. Fentanyl/Xylazine test strip and wound care kits are also regularly restocked.
- **Community & Recovery Engagement:** We had a very positive engagement at the Knights Inn with Community Trauma Response Team partners from SALT and Independent Living. Assisted with legal services referrals, food resources, and transportation coordination.

Community Awareness & Public Engagement

- **Bold Gold Marketing Plan:** Contract remains active and with monthly deliverables provided and metrics reviewed.
- **Coalition for Vape-Free Sullivan:** Participated in coalition meeting on 11/5 at CVI – nothing significant to report.
- **Community Events, Outreach, & Media Engagement:** Continued school engagement regarding eligibility awareness and family support needs. We also shared food pantry and warming center information with FEARLESS, Drug Court, and Probation to expand community access.
- **School & Community Resource Distribution:** Distributed updated OPWDD resources and "One-Pager" (English & Spanish) to Lexington (11/6).

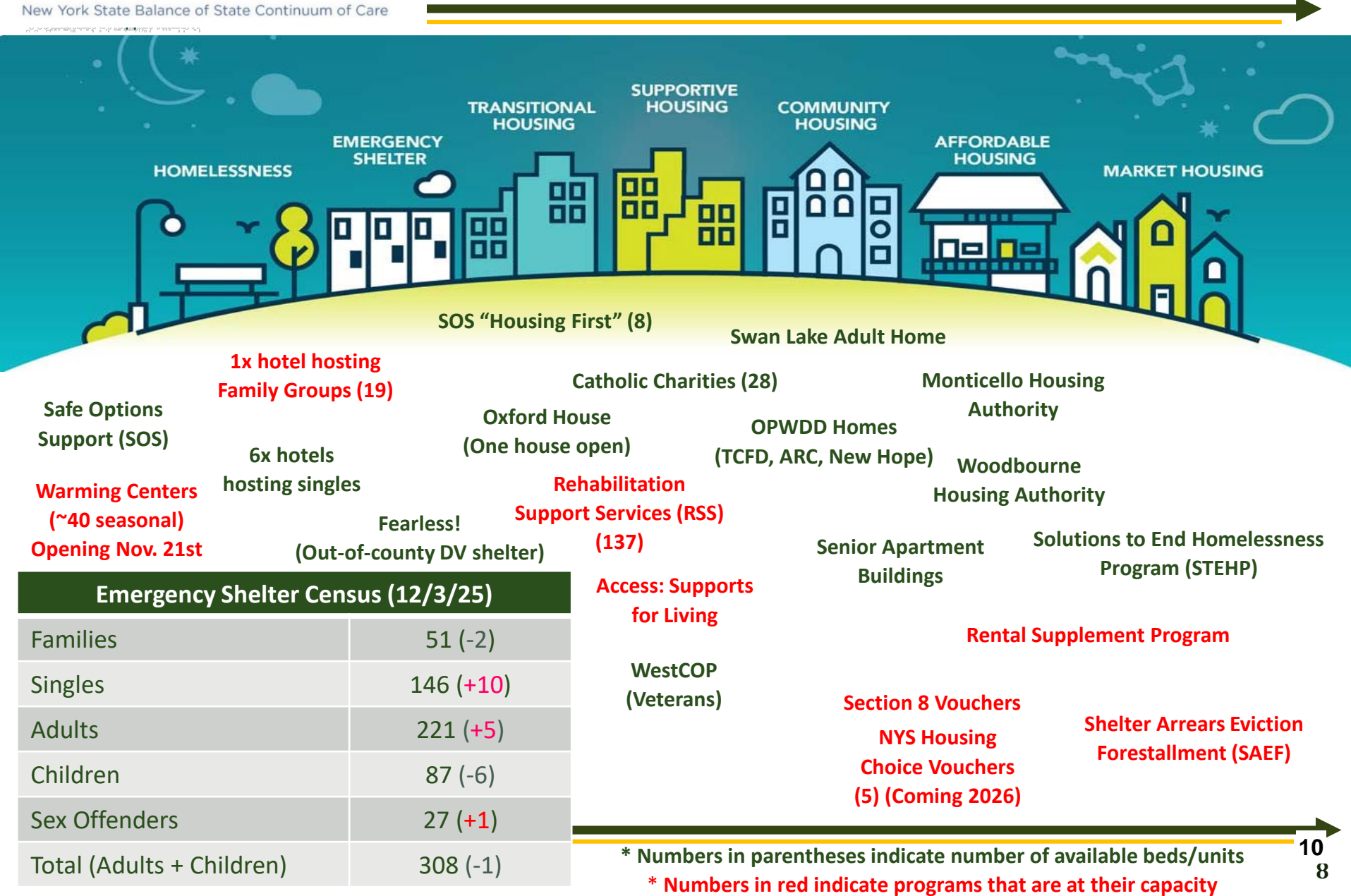
Crisis Services/Mobile Mental Health Update

Crisis Intervention & Law Enforcement Support

- **Crisis Intervention Team Initiative:** Week-long CIT training completed in October; continued November follow-up and integration. Reinforced alignment with law enforcement partners to improve crisis response. NCTE approval ensures CIT development and training can continue through 2026.
- **Training:** Psychological First Aid: Completed on October 2, 2025 and Disaster Mental Health: November 18, 2025.
- 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	Intial Phone Contacts	Outreaches	Diversion Rate	Hospital Referrals	Admissions	Admission Rate
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%
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%

Sullivan County's Housing Continuum



Child and Adult Services Statistics

ADULT SERVICES UNIT	2024 TOTAL	2025 YTD	2025 OCT
PERSONAL CARE AIDES			
CASES OPENED	31	16	2
CASES CLOSED	18	8	-2
# CASES (AVG.)	34	37.65	38
PERS			
# CASES (AVG.)	0	0	0
APS REFERRALS			
16A Neglect/Abuse	30	23	1
16B Neglects Own Basic Needs	67	61	3
16B Untreated Medical Conditions	36	30	0
16B Self-endangering Behaviors	21	8	0
16B Unable to Manage Finances	47	36	3
16B Environmental Hazards	38	49	15
Undetermined	7	20	0
APS			
CASES OPENED	245	225	20
CASES CLOSED	238	230	22
# CASES (AVG.)	153	160.39	159
GUARDIANSHIPS			
OPEN	38	47	2
REP PAYEE			
OPEN	108	119	4

FOSTER CARE STATISTICS				CHILD PROTECTIVE STATISTICS			
	OCT 2025	Trend	Goal		2024	YTD 25	OCT
Kinship%	19.49%		20%	# New Reports	1425	1092	139
Congregate Care%	18.64%		16%	# Closed Cases (UNF, FAR, IND)	904	838	59
Total in Care	118		<100	# Unfounded Reports	466	419	27
RTF/RTC	6			# Closed FAR	232	214	14
Diagnostic	1			# Indicated Reports	206	205	18
Group Home	5			Physical abuse	17	12	0
Therapeutic Foster Home	22			Emotional abuse	0	1	0
Regular Foster Home	44			Sexual abuse	7	10	0
Kinship	23			Neglect	96	94	11
Other	17			Domestic violence	15	14	2
Freed for Adoption	23			Educational neglect	37	44	2
Certified Homes	74		5x# in care	Substance abuse	29	27	3
Newly Certified Homes	0				5	3	0
Number of Closed Homes	0			PREVENTIVE SERVICES STATISTICS			
New Kinship Homes	0			NEW REFERRALS		13	
Pending Certification	4			TOTAL CASES		84	
Completed Adoptions	0						
YTD Completed Adoptions	2						

- **Foster Care Statistics:** We are pleased to be meeting our goals for utilization of kinship options for foster care and continuing to reduce our reliance on costly congregate care settings. Our near-term process improvement focus for foster care is on getting children to their permanency goals faster, which requires collaboration with all stakeholders in Family Court.
- **Child Protective Statistics:** New State Central Registry reports came back up to historic norms in September and October after a very quiet summer, but Child Protective and Family Advocacy teams have maintained low case loads via their consistently improving case practices.

Child Welfare Case Lifecycle Management

CHILD WELFARE CASE LIFECYCLE MANAGEMENT DASHBOARD													
	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	
EOM STATISTICS (Based on last day of month totals)													AVERAGE
Overdue 7-day Safety Assessments (INV)	2	1	<1	0	0	0	0	0	<1	<1			0.428571429
Overdue 7-day Safety Assessments (FAR)	1	1	<1	0	<1	0	0	0	0	0			0.25
Overdue Case Closures (INV)	103	56	52	28	30	<1	11	6	4	4			32.66666667
Overdue Case Closures (FAR)	45	22	21	9	14	<2	3	1	1	1			13
PREV Referral Timeliness days	8	3	9	6	6	2	2	3	1.5	5			4.55
QUARTERLY INTERNAL COMPLIANCE AUDITS (GREEN INDICATORS = ≥85% Effective, YELLOW = 75%-84%, RED = ≤74%)													AVERAGE
INV Progress Notes	74%			81%			88%			80%			0.8075
FAR Progress Notes		86%			80%			80%					0.82
PREV Progress Notes		56%			65%			56%					0.59
Foster Progress Notes			65%			50%			44%				0.53
PREV Case Contact Rate ≥ 2 per month	35%			75%			81%			50%			0.6025
Foster Case Contact Rate ≥ 1 per month		75%			85%			78%					0.793333333
Supervisor Case Conferences		12%			55%			87%					0.513333333
LSRs Submitted Timely			100%			100%			100%				1
Annual LODs Reviewed Timely/up to date			0%			26%			43%				0.23
HOTLINE SOURCES													ANNUAL TOTAL
School	55	36	50	33	66	36	6	5	30	51			368
Immediate Family	10	12	8	10	11	7	7	8	9	11			93
Extended Family	6	6	7	7	6	2	9	7	10	8			68
Hospital	6	12	12	10	12	16	13	6	13	14			114
Other Medical Provider	10	6	2	9	9	9	11	6	8	8			78
Law Enforcement	9	16	21	12	16	14	14	15	25	24			166
DSS Internal	4	7	10	12	6	7	13	9	5	10			83
Other	4	17	24	13	15	10	22	16	22	26			169

- Internal Audits:** We are seeing strong progress across most of the metrics we started tracking after the 2024 Bonadio review. We have recently made changes to the structure of the foster care unit, which is already starting to yield positive change. Preventive progress notes and case contacts have been below standard due to performance issues with contracted providers that have been addressed. Expect significant improvement next quarter.

Social Services Program Statistics

Fraud Investigations (as of 10/31/2025)

Collections	Cases Active	Cases Referred	Completed	Arrests	Pending arrests	Burials
\$23,741.21 (-37,393.97)	271 (+9)	50 (+13)	41 (-5)	2 (-1)	3 (+/-0)	5 approved (-1) \$9,070.00 costs (-760.00)

Child Support Enforcement Cases (as of 10/31/2025)

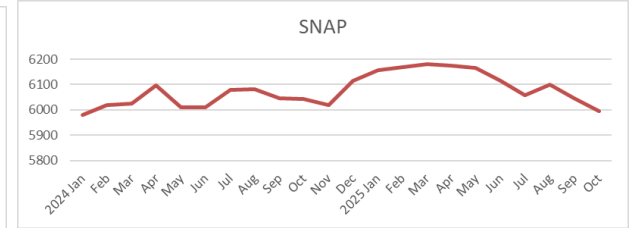
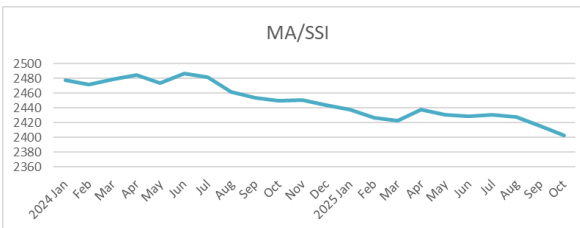
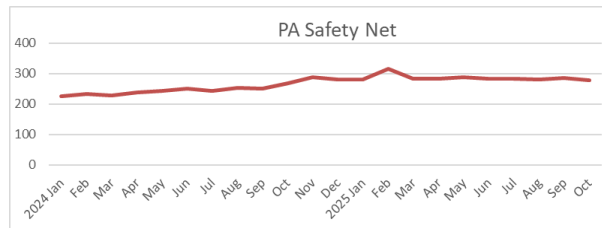
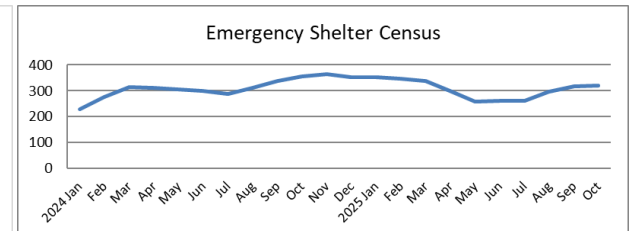
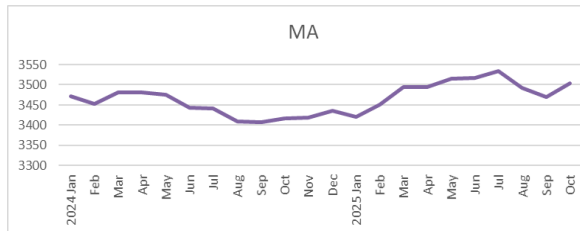
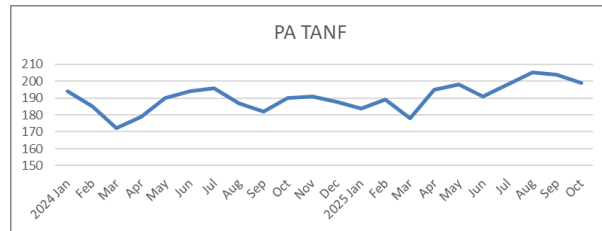
Collections	Petitions Filed	Paternity Establishments	Total Cases
\$661,535 (+140,710)	49 (+18)	18 (+8)	2,690 (+19)

Public Assistance (PA) Cases (as of 10/31/2025)

Temp. Assistance to Needy Families (TANF)	Safety Net	Food Stamps	Medical Assistance (MA)	MA/Supplemental Security Income (SSI)
199(-5)	279 (-6)	5995 (-50)	3503 (+34)	2403 (-13)

Homelessness Snapshot (as of 9/30/2025)

Code Blue	Quarantined	Adults / Children	Sex Offenders	Emergency Shelter Census
0(no change)	0	222/98(no change/+4)	26 (+1)	320 (+4)



Monthly Total Expenses to Date	Monthly Cash Receipts	End of Month Census	Meals Prepared for Residents
\$1,671,724.10	\$1,183,228.17	124	11,905
Admissions / Discharges (to home or Assisted Living)	Total ST treatments	Total OT treatments	Total PT treatments
16/20	57	667	784

Nursing Services:

- Nursing remains flexible and responsive to resident needs, with ongoing policy review and regular staff in-services.
- Partnerships with SUNY Sullivan supported successful clinical rotations for both nursing and CNA students.
- Infection prevention efforts remain strong:
 - 85% resident flu vaccination rate
 - 80% employee flu vaccination rate
 - Masking reinstated on 11/17/25 due to rising community flu activity
- Census remains stable at ~83%, with only 12% of residents requiring external hospitalization.

Rehabilitation & Restorative Therapy:

- Programming in November focused on cognition, recall, balance, sequencing, and holiday-themed engagement.
- Multiple residents achieved or exceeded baseline function, with several successful community discharges.
- A graduate intern will join the team in January, with expected hiring in May to fill a critical OT/Rehab role.

Therapy Utilization and Payer Mix:

- 1,383 therapy visits were completed in November across PT, OT, and ST.
- Largest share: Medicare Part B (657 visits).
- Additional payer visit totals included Medicare Part A (301), Medicaid (174), Managed A (190), Commercial (42), Managed B (19).
- Therapy services supported:
 - 41 Medicare Part B long-term residents,
 - 1 Managed B resident,
 - 5 of 9 Medicaid long-term residents, and
 - 31 short-term rehab/community admissions.
- Key Message: Therapy plays a critical role in maintaining function and preventing decline among long-term residents while supporting timely community discharge for short-term patients.

Activities & Resident Engagement:

- Thanksgiving celebrations were a major success, with 103 family members attending.
- Residents prepared their own Thanksgiving desserts, promoting independence and creativity.
- Holiday programming is underway several days per week in December, supporting emotional well-being and seasonal engagement



Goal / Area of Focus	Update / Progress
Increase and maintain the daily census of the program to ensure consistent enrollment, maximize resource utilization, and support the growing demand for home healthcare professionals.	<ul style="list-style-type: none">Average Daily Census: 142
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: 89Referral Conversion Rate: 76%new patients: 68discharges: 93
Maintain Full 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: 4.61See table 1 below

- Monthly census # remaining similar, but Average Daily Census down- More efficiently seeing patients to manage schedules.
- Flu vaccines were purchased and offered to all staff who were interested in receiving. Any additional vaccines are being offered to homebound patients.
- Recent CHHA and MCH nursing transitions led to changes in staffing and caseload distribution. Leadership is emphasizing that CHHA is a pay-for-service program with specific eligibility requirements, not a free or entitlement service. Pregnancy and pediatric nursing visits formerly captured under MCH are now recorded through CHHA to ensure accurate documentation, billing, and program separation.

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



	2024 Total	January	February	March	April	May	June	July	August	September	October	November	December	2025 YTD
Staff Productivity		5.06	4.89	4.92	4.87	4.96	4.86	4.63	4.83	5.03	4.61			4.87
New Patients*	1120	122	102	96	94	69	82	100	79	85	68			897
Discharges*	1104	108	99	98	98	84	90	89	102	90	93			951
RN/LPN Visits*	6267	577	462	565	604	516	431	528	508	598	591			5380
PT/PTA Visits	8424	763	612	651	624	654	616	604	518	444	467			5953
OT Visits*	2353	160	157	241	228	257	242	229	189	213	266			2182
ST Visits*	854	77	72	54	57	76	69	76	46	64	78			669
MSW Visits*	680	54	54	54	54	47	46	55	48	47	60			519
HHA Visits*	497	84	77	77	56	78	63	70	62	75	62			704
Total Visits	21,299	1715	1434	1642	1623	1628	1467	1562	1371	1353	1524			15319

Table 1 – Legend:

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

- # 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

Goal / Area of Focus	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.	<ul style="list-style-type: none"> Average Daily Census: 31
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: 4.2
Increase the number of new patient admissions through enhanced referral partnerships, physician outreach, and digital marketing strategies.	<ul style="list-style-type: none"> # referrals: 24 RCR: 58%
Monitor the number of newborn screenings completed. <ul style="list-style-type: none"> Ensuring that those completed newborn screenings are done within 24-48 of birth. 	<ul style="list-style-type: none"> 0 newborn screening



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: 636• 83% completed home visits (167 out of 201)
Increase the number of new patient admissions through enhanced referral partnerships, physician outreach, and digital marketing strategies.	<ul style="list-style-type: none">• # of referrals• # of assessments completed (Frogs)• # of referrals agreed to services and registered• Referral Conversion Rate (RCR) (how many referrals turned into admissions)<ul style="list-style-type: none">○ Target RCR: 17%	<ul style="list-style-type: none">• # of referrals: 8• # agreed to services and registered: 3• RCR: 37%
Maintain Full Staffing	# of staff for all HF positions	



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

<i>Goal / Area of Focus</i>	<i>Update / Progress</i>
Ensure that initial CPSE evaluations are completed within 60 calendar days of referral.	<ul style="list-style-type: none">• # of active cases: 213
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: 192<ul style="list-style-type: none">○ # of new referrals: 27
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 73
Increase outreach and engagement for Children and Youth with Special Healthcare Needs (CYSHN)	<ul style="list-style-type: none">• # of active cases: 13 (↓7) (18 children)<ul style="list-style-type: none">○ # of new referrals 0

- The CYSHCN program hosted a “Mock Thanksgiving” to give children and families a supportive, sensory-friendly space to practice holiday routines and prepare for a successful Thanksgiving experience. There were 7 families (10 children) in attendance.
- 1st Committee on Preschool Special Education (CPSE) chair meeting was held, and will continue to be scheduled to meet monthly. A CPSE Chair Meeting is a meeting facilitated by the CPSE Chairperson to review evaluations, determine eligibility, and develop or update an Individualized Education Program (IEP) for a preschool-aged child with suspected or confirmed developmental delays or disabilities.
- This department went from 4 Ongoing Service Coordinators to 3, resulting in higher than normal caseloads. To address these gaps, we are redistributing work, increasing supervisory support, and evaluating options to restore staffing capacity.



Goal / Area of Focus	Update / Progress
Workplace Wellness	<ul style="list-style-type: none">• # of events: 1• # of participants: N/A• Topics covered: Walking Challenge
Outreach/ Education/Rural Health Network	<ul style="list-style-type: none">• # of educational workshops: 5<ul style="list-style-type: none">○ Total # of participants: 80• # of outreach events: 27<ul style="list-style-type: none">○ # directly related to RHN: 21• # of social media posts: 40<ul style="list-style-type: none">○ Top 3 post topics: #FFF Trails, Fall Prevention Series promotion, staff pictures (PTS and pink day)• # of PH kits distributed<ul style="list-style-type: none">○ Education: 295○ See table 2 for detail
Narcan Training	<ul style="list-style-type: none">• # of Narcan trainings: 3<ul style="list-style-type: none">○ # of participants: 29• # of 1-on-1 Narcan trainings: 0• Total # trained: 29
Community Health Workers (CHW)	<ul style="list-style-type: none">• # of CHW visits: 25• # of referrals provided: 0• Top identified needs: Immigration/Effect on Mental Health, Lawyer Inquires, Understanding legal rights.

- The “Employee Wellness Challenge” was initiated this month. This is a countywide initiative that encourages employees to increase their daily physical activity—primarily through walking—to improve overall health and wellness. Participants track their steps or minutes of activity over a set period, engage in friendly competition with coworkers or departments, and receive resources, motivation, and incentives to support healthier lifestyle habits. There are 54 employees registered.
- Drug Take Back Day is a community event where residents can safely dispose of unused or expired medications. The goal is to prevent drug misuse, reduce accidental poisoning, and protect the environment by ensuring medications are collected and destroyed properly. We collected 140 pounds of unused/expired medication during our October event.
- Halloween-themed outreach events allowed the Rural Health Network (RHN) to combine fun activities with dental health education, resulting in strong engagement with community families.
- SCDPH out and about at the Ellenville Health Fair: <https://www.youtube.com/watch?v=gaKI31JIBuU>



Description		Pieces Vended	Units Dispensed
988 Car Freshner x1		8	8
988 Koozi x1		8	8
Dental Hygiene ADULT x1		10	10
Dental Hygiene KIDS x1		10	10
Deterra LARGE x1		3	3
Emergency Preparedness Kit x1		16	16
Gun Lock x1		24	24
Health Passport - Men x1		9	9
Health Passport - Women x1		10	10
Hygiene Kit x1		15	15
Overdose Rescue Kit x1		52	52
Sexual Health Kit x1		10	10
Stress Ball 988 x1		8	8
Wound Care Kit x1		18	18
			201
			201
Tick Removal Kit		0	
Overdose Rescue Kit		60	
Smoking Cessation		0	
Wound Care Kit		1	
Total		295	



- SCDPH Presentation at Community Services staff meeting
- HIPAA refresher training for fiscal staff scheduled for November.

Goal / Area of Focus	Key Performance Indicators	Update / Progress
Staff education	<ul style="list-style-type: none">• # staff trainings offered• Topics covered• # of participants	<ul style="list-style-type: none">• # staff trainings offered: 4• Topics covered: Community Services Presentation at Staff Meeting, Webinar: Enhancing the Healthcare Response to Domestic Violence, Pelvic Floor Strengthening w/ Rachel B, Webinar: AI and Aging Together• # of participants: 75
Quality	<ul style="list-style-type: none">• Ongoing analysis of existing policies, updates, and creation of new.	<ul style="list-style-type: none">• Accident/Incident reporting procedure updated• MSW Home Visits• Monthly DSI Case Reviews have begun• Education Lesson Plan reviews upcoming



Disease Surveillance Investigations (DSI)

Goal / Area of Focus	Update / Progress
Immunization Program	<ul style="list-style-type: none">• # of IQIP visits performed: 3
Rabies	<ul style="list-style-type: none">• # of rabies PEP in county: 5• # of exposures investigated: 36<ul style="list-style-type: none">○ Domestic: 36○ Wildlife: 0• # animals tested: 1<ul style="list-style-type: none">○ Domestic: 0○ Wildlife: 1• # of animals + for rabies: 1
Emergency Preparedness	<ul style="list-style-type: none">• # of training meetings: 5
Lead	<ul style="list-style-type: none">• Total labs drawn: 55• Lead Education: 20• # of Positive cases: 1
Tuberculosis (TB)	<ul style="list-style-type: none">• # of active TB cases: 1 (table 6)• # of LTBI follow-up cases: 44• # of suspected TB cases: 13• # of non-clinical home visits: 10• # of clinical/DOT home visits: 8
Reportable Diseases	<ul style="list-style-type: none">• # of lab reported cases: 283 (65 COVID)<ul style="list-style-type: none">○ ↓ 38 from previous month• See table 5 for disease type

- DSI and the Quality launched monthly case reviews to enhance oversight, identify trends, and support staff in maintaining strong, consistent practices across cases.
- An additional rabies clinic was scheduled in response to a confirmed rabies-positive animal, bringing the total number of clinics for 2025 to nine.



Communicable Disease Update

Table 3

Sexually Transmitted Diseases (STDs)
Query Limits Selected Returned: 18 Records
Tabular Analysis of Disease
Created By the Communicable Disease Electronic Surveillance System

Disease	Total
CHLAMYDIA	15
GONORRHEA, UNCOMPLICATED	2
SYPHILIS, UNKNOWN DURATION OR LATE	1
Total	18

Table 4

Hepatitis
Query Limits Selected Returned: 26 Records
Tabular Analysis of Disease
Created By the Communicable Disease Electronic Surveillance System

Disease	Total
HEPATITIS B, CHRONIC	6
HEPATITIS C CHRONIC	7
HEPATITIS C, NEGATIVE	13
Total	26

Table 6

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

Disease	Total
TUBERCULOSIS >= 2009	1
Total	1

Table 5

General Communicable
Query Limits Selected Returned: 283 Records
Tabular Analysis of Disease
Created By the Communicable Disease Electronic Surveillance System

Disease	Total
ANAPLASMOSIS, ANAPLASMA PHAGOCYTOPHILUM	8
CAMPYLOBACTERIOSIS	5
COVID-19	65
CRE	2
INFLUENZA, A	14
LYME DISEASE	173
RSV UNSPECIFIED	10
STREP GROUP A, INVASIVE	2
STREP PNEUMO INVASIVE, UNKNOWN	2
VARICELLA	1
YERSINIOSIS	1
Total	283

Community Services (6 Positions Vacant, 43 Authorized, 13.95% Vacant)

Assistant Social Worker II, #2254, #3739	
Clinical Program Manager, #2169	
Staff Social Worker I, #0130, #2267, #3288	Interviewing

Public Health (15 Positions Vacant, 72 Authorized, 20.83% Vacant)

Public Health Educator, #1636	Posted
Public Health Nurse, CHHA #3419, #2185, DT #2784	
Public Health Occupational Therapist, #3340(PD)	Posted
Public Health Physical Therapist, #3667(PD), #3555	
Registered Nurse, #607(PT), #747, #849, #2373, #2502(PD), #2875, #3634(PD)	
Supervising Comm Health Nurse, #148	

Social Services (13 Positions Vacant, 181 Authorized, 7.18% Vacancy Rate)

Account Clerk, #1269	
Account Clerk/Database, #3050	
Caseworker #2995, #3453	Posted
Clerk, #3214	Interviewing
FS Investigator, #260	
FS Investigator Trainee, #3676	
Fiscal Administrative Officer, #3103	
Principal Account Clerk, #182	Interviewing
Senior Social Welfare Examiner, #3480	
Social Welfare Examiner, #2367, #2899, #295	One vacancy due to recent promotion

Sullivan County

Legislative Memorandum

File #: ID-7932

Agenda Date: 12/11/2025

Agenda #: 1.

Narrative of Resolution:

Correct Resolution No. 441-24 funding language for BRIMS, LLC Comprehensive billing services.

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

Amount to be authorized by Resolution: N/A

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 BRIAN MCPHILLIPS, CHAIRMAN OF THE MANAGEMENT & BUDGET COMMITTEE TO AUTHORIZE THE COUNTY MANAGER TO MODIFY THE RESOLUTION NO. 441-24 FOR R-24-26 FOR COMPREHENSIVE BILLING SERVICES

WHEREAS, Resolution No. 441-24 authorized the County Manager to execute an agreement with BRIMS, LLC, dba Beacon Solutions Group, 171 Sully's Trail, Pittsford, New York 14534, in accordance with #R-24-26; Comprehensive billing services for Sullivan County Community Services for the period October 1, 2024 through September 30, 2025, with the option to extend on a yearly basis for four (4) additional years; and

WHEREAS, the funding language in the Original Resolution is incorrect, and needs to be amended, and

WHEREAS, the correct funding language in the NOW, THEREFORE, BE IT RESOLVED should read \$12,133.33 per month for months 1-8 and \$5,633.33 per month for months 9-12 for a total amount not to exceed \$97,066.64 for the first year and all mutually agreed upon extensions to adjust in cost to accommodate for an increase in the cost of living amount and any changes are authorized by this resolution, and

WHEREAS, at the request of Sullivan County Community Services, BRIMS, LLC, dba Beacon Solutions Group will provide additional on-site services to assist with payer or regulatory audit support, or other non-billing services. A rate of \$75 to \$175 per hour will be charged based on the scope of duties and staff assigned; and

NOW, THEREFORE, BE IT RESOLVED, that the County Manager be and hereby is authorized to execute an agreement with BRIMS, LLC, dba Beacon Solutions Group to include the correct funding of \$12,133.33 per month for months 1-8 and \$5,633.33 per month for months 9-12 for a total amount not to exceed \$97,066.64 for the first year and all mutually agreed upon extensions to adjust in cost to accommodate for an increase in the cost of living amount and any changes are authorized by this resolution. Resolution No. 441-24 is hereby modified as per the above and all other provisions of Resolution No. 441-24 shall remain unchanged, said contract to be in such form as the County Attorney shall approve.

Sullivan County

Legislative Memorandum

File #: ID-7933

Agenda Date: 12/11/2025

Agenda #: 2.

Narrative of Resolution:

Authorize entering into provider agreement with Fidelis insurance.

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

Amount to be authorized by Resolution: N/A

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 CATHERINE SCOTT, CHAIRWOMAN OF THE HEALTH AND HUMAN SERVICES COMMITTEE TO AUTHORIZE THE COUNTY MANAGER TO ENTER INTO PROVIDER AGREEMENT WITH FIDELIS

WHEREAS, Sullivan County Department of Community Services is a provider of services to clients which are reimbursable by third party payors, and

WHEREAS, Sullivan County Department of Community Services desires to continue to enhance third party revenue generation collection, and

WHEREAS, third party payors require written agreements with service providers to allow all payments to be forwarded directly to the provider.

NOW, THEREFORE, BE IT RESOLVED, that the County Manager be authorized to enter into provider agreements with Fidelis insurance companies/service providers, and

BE IT FURTHER RESOLVED that said agreements be in such form as approved by the Sullivan County Department of Law.



Sullivan County

Legislative Memorandum

100 North Street
Monticello, NY 12701

File #: ID-7955

Agenda Date: 12/11/2025

Agenda #: 3.

Narrative of Resolution:

To enter into an agreement for the provision of welfare to work, employment and training related services

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

Amount to be authorized by Resolution: \$8,000.00

Are funds already budgeted? Yes

If 'Yes,' specify appropriation code(s): A-6010-38-40-4017

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

Specify Compliance with Procurement Procedures: 1403.3

**RESOLUTION INTRODUCED BY HEALTH AND HUMAN SERVICES COMMITTEE TO
AUTHORIZE COUNTY MANAGER TO ENTER INTO AGREEMENT FOR THE PROVISION OF
WELFARE TO WORK, EMPLOYMENT AND TRAINING RELATED SERVICES FROM JANUARY
1, 2026 THROUGH DECEMBER 31, 2026**

WHEREAS, the County of Sullivan, through the Department of Social Services, is required to provide for various welfare-to-work, employment related services, and

WHEREAS, the Department contracts with Industrial Medicine Associates, PC (IMA) for medical examinations and reporting services; and

WHEREAS, the budget for the Department of Social Services includes \$8,000 for this contractual service.

NOW, THEREFORE, BE IT RESOLVED, that the Sullivan County Legislature does hereby authorize the County Manager to execute the above listed agreement at a total cost the not-to-exceed \$8,000 for the period from January 1, 2026 through December 31, 2026; and

BE IT FURTHER RESOLVED, this contract is at the County's discretion, subject to annual appropriation; and

BE IT FURTHER RESOLVED, the maximum of this contract not to exceed the Department of Social Services budgeted amount for welfare-to-work, employment related services; and

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

Sullivan County

Legislative Memorandum

File #: ID-7956

Agenda Date: 12/11/2025

Agenda #: 4.

Narrative of Resolution:

To enter into an agreement between the Department of Social Services and Together for Youth for Non-Secure Detention Services

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

Amount to be authorized by Resolution: \$740.00 per diem rate

Are funds already budgeted? Yes

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

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

Specify Compliance with Procurement Procedures: N/A

**RESOLUTION INTRODUCED BY HEALTH AND HUMAN SERVICES COMMITTEE TO
AUTHORIZE COUNTY MANAGER TO ENTER INTO AGREEMENT BETWEEN THE
DEPARTMENT OF SOCIAL SERVICES AND TOGETHER FOR YOUTH FOR NON-SECURE
DETENTION SERVICES FROM JANUARY 1, 2026 THROUGH DECEMBER 31, 2026**

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

WHEREAS, the Department contracts with Together for Youth for non-secure detention services at annually adjusted per diem rates; and

WHEREAS, Together for Youth, unreserved usage, non-secure detention per diem rate will be \$740.00 for the period of January 1, 2026 through December 31, 2026.

NOW, THEREFORE, BE IT RESOLVED, the Sullivan County Legislature does hereby authorize the County Manager to execute an agreement as detailed above for the provision of the above-named services from January 1, 2026 through December 31, 2026; and

BE IT FURTHER RESOLVED, the maximum of this agreement is not to exceed the non-secure detention per diem rate of \$740.00 budgeted amount for the services; and

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