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, October 16, 2025 **11:30 AM** **Government Center**

Call To Order and Pledge of Allegiance

Roll Call

Comments:

Reports:

1. Division of Health and Human Services **ID-7829**
   October 2025
   Monthly Report

   Attachments: 2025-10 HHS Monthly Report

Presentation: Dorothy Sanchez

Public Comment

Resolutions:

1. To modify the contract with Coordinated Care Services, Incorporated (CCSI) for Specialized Financial Services who will be taking on additional fiscal duties. **ID-7632**
2. Enter into contract with Grand Canyon University for the purpose of student interns in Social Work at the Department of Community Services. **ID-7812**
3. To execute agreements between DSS and DCS for substance use assessment and monitoring **ID-7817**
4. To execute agreements between DSS and OFA for assistance with HEAP **ID-7820**
5. To execute an agreement with CARES of NY, Inc. **ID-7828**

   Attachments: 2025-10 HMIS CARES ATT

6. To execute an agreement between DSS and DPH for Home Visiting Program Preventive Services **ID-7830**

Adjourn

100 North Street
Monticello, NY 12701

Sullivan County

Legislative Memorandum

File #: ID-7829 **Agenda Date:** 10/16/2025 **Agenda #:** 1.

Division of Health and Human Services (DHHS) Monthly Update

October 2025

Agenda

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

Sullivan County Strategic Plan News from DHHS

Strategic Focus Areas in 2025 County Budget				
Safe Communities	**Healthy Communities**	Transportation, Mobility and Infrastructure	Economic Opportunities	Accountable Government

Healthy Communities

Ease Access to Physical and Behavioral Healthcare:

- **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.

- **Inpatient Drug Treatment Returning to Sullivan County:** Garnet Health and Lexington Center for Recovery are bringing inpatient drug treatment back to Sullivan County at Garnet Health-Catskills in Harris. After working together with Community Services for more than a year to secure State funding assistance, 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. The partners are optimistic about having renovations complete before the end of the year.

- **Additional Outpatient Treatment Provider Preparing to Open:** Step One, with three offices operating in Ulster County is expanding their operation with an office in Monticello. Goal for opening is November 1st.

Federal Government Shutdown Impacts

- ***As of the submission date for this report, October 7, impacts on Social Programs for local residents are minimal. However, impacts may increase rapidly in significance if the shutdown is not resolved before the end of the month.***

Current Situation:

- ***NY State of Health Marketplace (Medicaid):*** *Congressional Democrats have made restoring subsidized health insurance a central focus of shutdown notifications. For New York, this could prevent the disenrollment of Essential Planholders (1.6million New Yorkers) and Qualified Health Planholders (140k New Yorkers) currently slated to lose coverage at the end of this year under HR1.*

- ***Medicare:*** *only pre-COVID permitted telehealth services are permitted as of October 1. If Congress restores the COVID-era telehealth waivers, retroactive claims may be able to be made.*

- ***SNAP (Food Stamps):*** *Funded through October. No indication on November benefits as of today.*
  - *DSS due to receive additional guidance from OTDA on HR1's changes to the SNAP program on October 8. (Will be briefed to the Legislature during the Oct. 16 HHS Committee Meeting)*

- ***HEAP (Home Energy Assistance):*** *No guidance. If no action is taken before the end of the month, the program will not be able to start as planned on November 1. Aside from shutdown issues – Home Energy Repair and Clean and Tune Programs will not be available this year due to lack of funding.*

Drug Task Force Update

Pillar Meetings – Next Pillar Lead Meeting: October 15, 2-4pm Next Public Meeting: November 7, 2-4pm						
Law Enforcement	**Treatment**	**United Sullivan**	**Prevention**	**Policy**	**Veterans**	**Data**
5/2/2025	9/18/2025	Meeting Weekly	7/30/2025	9/24/2025	9/16/2025	8/15/2025

Drug Task Force Key Statistics	
911 Responses to Overdose	**Opioid Overdose Death Rate (2024)**
August: 26 (+7 from previous month) – 6 Narcan administrations September: 22 (-4 from previous month) – 7 Narcan administrations	26 deaths; 32.5/100,000 2023 totals: 38 deaths; 47.5/100,000

- **Overdoses in August and September:** As has been typical over the past three years, overdose responses peaked for the year to date in August and declined last month. One of the reported overdoses in each month occurred at the State Prison in Woodbourne. 10 of the reported overdoses in August were attributed to alcohol. Seven were attributed to alcohol in September. While we continue to be encouraged by the relatively low number of opioid overdose responses needed, there was a clear and concerning increase in alcohol overdoses requiring EMS and law enforcement response.

- **Public Information Campaign:** We continue to work with Bold Gold Media to generate messaging that encourages the community to seek help and know that resources are available to them. Social media promotions produced by Bold Gold significantly outperform industry average – persons receiving United Sullivan/Drug Task Force messaging are three times more likely to click on the post than normal advertising posts. In August, we garnered 207,063 social media impressions and 31,406 persons viewed our youth-focused video message from beginning to end. Between now and the end of the year, Bold Gold will produce two additional podcasts, three targeted emails, a direct mail campaign, three youth radio ads with digital ads, and three adult radio ads with digital.

Opioid Settlement Fund Updates

Opioid Settlement Fund Balance (as of 7/8/25)	OASAS Settlement Fund Allocated to Sullivan / Balance Available
Restricted: $389,280.84; Unrestricted $1,157,817.43	$1,438,489/$927,972.67

County Opioid Settlement Fund Contracts ($316k/year)	OASAS Settlement Fund Contracts
• Catholic Charities (School-Based Prevention Program) $25,000 • 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) $99,500* • Action Toward Independence (Housing, transportation and case management for persons with substance use disorders) $85,000 • Corona Self-Help Center (Peer Services and Supports) $32,500	• Bold Gold Media (Marketing and Education) $108,000 • Restorative Management (Peer Services) $74,500 • Sullivan 180 (Youth MH Services and Support) $138,430 • Catalyst Research (Data Analytics) $59,500 • Oxford House (Sober living homes) $200,000 • Vendtek (Vending Machine Data) $1,960

- **New Funding Anticipated:** We are reviewing the information on how funding will be locally distributed from the Purdue Pharma/Sackler Family settlement and other recent settlements. New York State is expected to receive $241.2million from the Purdue settlement alone.

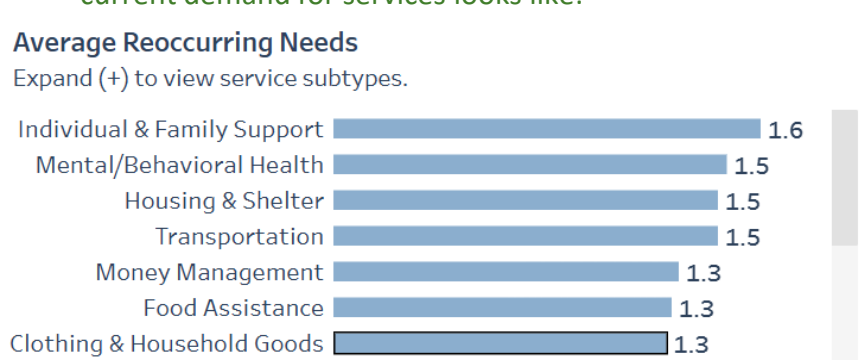
- **New Opioid Settlement Fund Requests:**
  - As briefed last month, The Drug Task Force pillar leads reviewed a request for funding for the RESTART and recommended the Legislature support. RESTART provides school-based substance use treatment at Sullivan BOCES. The program is currently funded for the 2025-26 school year via a private donor.
  - Fallsburg PD has made an initial request for funding matching the Officer EAP that settlement funds have helped to establish at Liberty PD. Their request will be reviewed and a recommendation provided after the next pillar lead meeting.
  - RESTART funding and a request for funding to continue Cellebrite and Graykey subscriptions in support of narcotics investigations at the DA's office will be on the agenda for next week's Executive Committee.

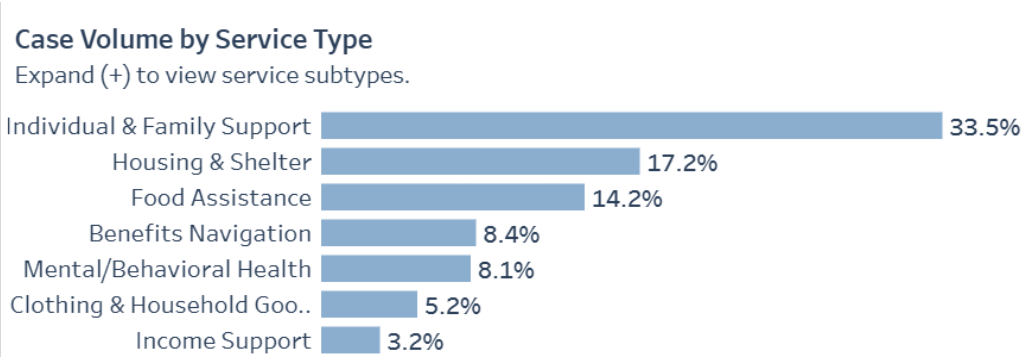
Social Care Network Update

- **Unite Us Case Activity Update**: September saw another month of significant growth in utilization. After two years of slow, steady growth, the number of new cases in August and September were nearly double that of the previous two months. This is attributable to the continuing growth of the Hudson Valley's Social Care Network. Sullivan DSS is the #3 referral source on Unite Us across the Hudson Valley. Catholic Charities is the #1 receiving agency, Action Toward Independence is #3.

Clients Served	Clients Connected	Cases per Client	Cases	Managed Cases	Referred Cases
933	916	2.27	2,121	1,629	1,592

- **Case Summary**: The following chart provides an update of the services we are connecting persons to via the Unite Us network and what current demand for services looks like:





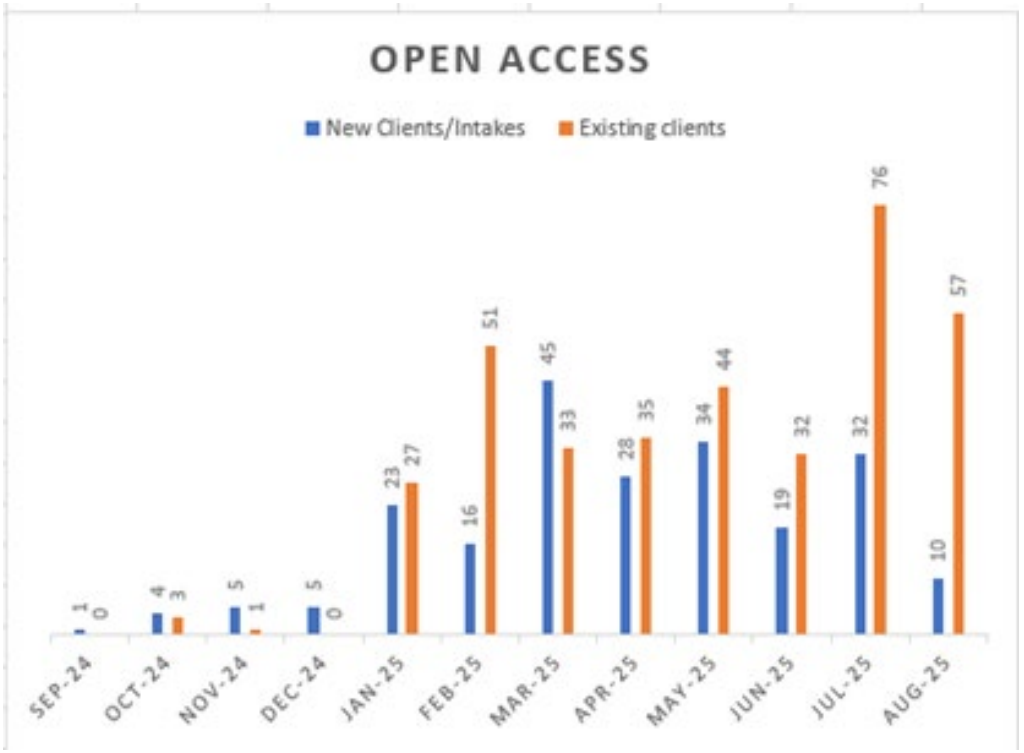
Local Unite Us Partners (40 Agencies/Locations)				
Liberty Police Department	The Center for Discovery	Rehabilitation Support Services (RSS)	Cornell Cooperative Extension	Dept of Community Services
Sullivan County Probation	Dispute Resolution Center	Sullivan 180	Office for the Aging	Dynamic Youth Community
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

Community Services Update - Clinic

High Risk Clients: In August 2025, there were 164 clients on the roster for high risk census, down 19 from the previous month.

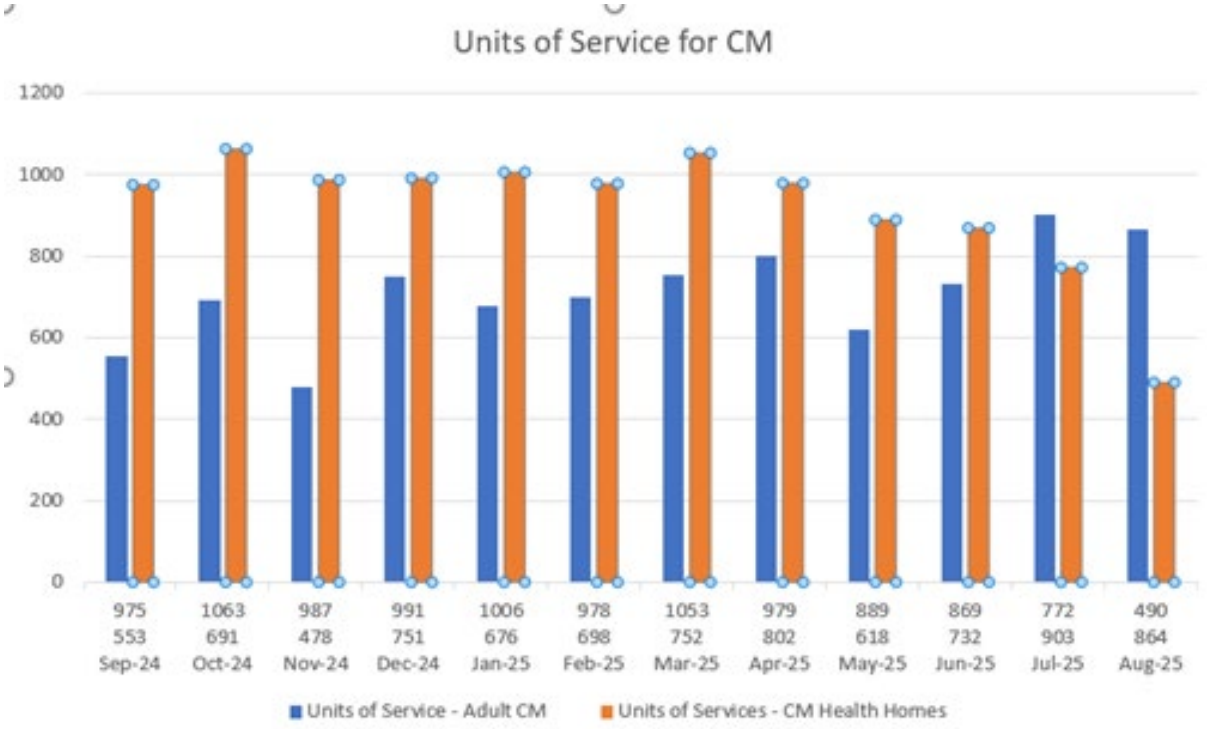
Open Access: Open access was extended this past January to two mornings on Tuesday & Thursdays.

Clinic & Treatment Services:



Community Services Update – 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 August 2025, there are 5 active Assisted Outpatient Treatment (AOT) orders and there is 1 person on enhanced AOT services.



Community Services Update – Local Government Unit

Single Point of Access (SPOA) Program:

- On August 14, 2025, the Adult SPOA Committee met via Zoom with 11 new cases reviewed and 17 previous cases reviewed.
- There are 137 RSS supportive housing beds filled with 89 people on the waiting list and 17 openings.
- Children's SPOA Committee met via Zoom on August 28, 2025, and went over 5 new cases and 7 previous referrals 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.

Systems Coordination & Strategic Planning

- **Fatality Review Board:** Case presentation scheduled for 9/22. Ongoing contact with case managers, coroners, and volunteers to support overdose review efforts.

Peer & Community Support Services

- **Peer court navigator** is building her caseload, engaging providers for housing and resources. Exploring certification for mental health peers to better integrate with Crisis Intervention Team (CIT).
- **Narcan Outreach:** Refilling vending machines, distributing through events and Naloxboxes. Coordinated kit-making events and refilling machines across the county.

Crisis Services/Mobile Mental Health Update

- **Training:** Psychological First Aid: Completed on October 2, 2025 and Disaster Mental Health: November 18, 2025.

- Mobile Mental Health most recent 12-month statistics are displayed below.

- Although admission rates vary widely from month to month, most recent six month admission rate was 76%. The previous six months' admission rate was 75% - in other words, we are consistently seeing 3 of every 4 referrals from the Mobile Mental Health team getting accepted for inpatient hospital admission.

Month/Year	Incoming Calls	Intial Phone Contacts	Outreaches	Diversion Rate	Hospital Referrals	Admissions	Admission Rate
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%
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%

NYS BoS CoC

New York State Balance of State Continuum of Care

Sullivan County's Housing Continuum

SOS "Housing First" (8)

Swan Lake Adult Home

1x hotel hosting Family Groups (19)

Catholic Charities (28)

Monticello Housing Authority

Safe Options Support (SOS)

Oxford House (One house open)

OPWDD Homes (TCFD, ARC, New Hope)

6x hotels hosting singles

Woodbourne Housing Authority

Warming Centers (~40 seasonal) Opening Nov. 21st

Rehabilitation Support Services (RSS) (137)

Fearless! (Out-of-county DV shelter)

Senior Apartment Buildings

Solutions to End Homelessness Program (STEHP)

Access: Supports for Living

Rental Supplement Program (68 State, 27 County) *Fluctuates based on market rates

WestCOP (Veterans)

Section 8 Vouchers

NYS Housing Choice Vouchers (5) (Coming 2026)

Shelter Arrears Eviction Forestallment (SAEF)

Emergency Shelter Census (9/30/25)	
Families	55 (+4)
Singles	144 (-3)
Adults	222 (+6)
Children	94 (+13)
Sex Offenders	25 (+3)
Total (Adults + Children)	316 (+19)

* Numbers in parentheses indicate number of available beds/units

* Numbers in red indicate programs that are at their capacity

Child and Adult Services Statistics

ADULT SERVICES UNIT	2024 TOTAL	2025 YTD	2025 AUG
PERSONAL CARE AIDES			
CASES OPENED	31	12	0
CASES CLOSED	18	10	2
# CASES (AVG.)	34	36.60	36
PERS			
# CASES (AVG.)	0	0	0
APS REFERRALS			
16A Neglect/Abuse	30	22	1
16B Neglects Own Basic Needs	67	55	16
16B Untreated Medical Conditions	36	29	3
16B Self-endangering Behaviors	21	8	1
16B Unable to Manage Finances	47	25	4
16B Environmental Hazards	38	23	3
Undetermined	7	20	3
APS			
CASES OPENED	245	182	31
CASES CLOSED	238	176	21
# CASES (AVG.)	153	162.54	170
GUARDIANSHIPS			
OPEN	38	45	0
REP PAYEE			
OPEN	108	114	1

FOSTER CARE STATISTICS	AUG 2025	Trend	Goal
Kinship%	18.18%		20%
Congregate Care%	21.82%		16%
Total in Care	110		<100
RTF/RTC	9		
Diagnostic	17		
Group Home	4		
Therapeutic Foster Home	20		
Regular Foster Home	40		
Kinship	20		
Other	17		
Freed for Adoption	15		
Certified Homes	67		5x# in care
Newly Certified Homes	1		
Number of Closed Homes	0		
New Kinship Homes	1		
Pending Certification	2		
Completed Adoptions	0		
YTD Completed Adoptions	2		

CHILD PROTECTIVE STATISTICS	2024	YTD 25	AUG
# New Reports	1425	831	72
# Closed Cases (UNF, FAR, IND)	904	741	62
# Unfounded Reports	466	375	32
# Closed FAR	232	195	20
# Indicated Reports	206	171	10
Physical abuse	17	12	0
Emotional abuse	0	1	0
Sexual abuse	7	7	2
Neglect	96	72	7
Domestic violence	15	12	1
Educational neglect	37	42	0
Substance abuse	29	23	0
1034	5	2	0

PREVENTIVE SERVICES STATISTICS	
NEW REFERRALS	9
TOTAL CASES	79

- **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 are down significantly. The 72 reports in August was the fewest number of reports made in Sullivan County since at least 2006. Although September statistics are not yet fully tabulated, we did see an expected increase in reports with the start of the school year.

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					0.428571429
Overdue 7-day Safety Assessments (FAR)	1	1	<1	0	<1	0	0	0					0.333333333
Overdue Case Closures (INV)	103	56	52	28	30	<1	11	6					40.85714286
Overdue Case Closures (FAR)	45	22	21	9	14	<2	3	1					16.42857143
PREV Referral Timeliness days	8	3	9	6	6	2	2	3					4.875
QUARTERLY INTERNAL COMPLIANCE AUDITS (GREEN INDICATORS = ≥85% Effective, YELLOW = 75%-84%, RED = ≤74%													AVERAGE
INVESTIGATIVE (INV) Progress Notes	74%			81%			88%						0.81
FAMILY ADVOCACY (FAR) Progress Notes		86%			80%			80%					0.82
PREVENTIVE (PREV) Progress Notes		56%			65%			56%					0.59
Foster Progress Notes			65%			50%							0.575
PREV Case Contact Rate ≥ 2 per month	35%			75%			81%						0.636666667
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%							1
Annual LODs Reviewed Timely/up to date			0%			26%							0.13
HOTLINE SOURCES													ANNUAL TOTAL
School	55	36	50	33	66	36	6	5					287
Immediate Family	10	12	8	10	11	7	7	8					73
Extended Family	6	6	7	7	6	2	9	7					50
Hospital	6	12	12	10	12	16	13	6					87
Other Medical Provider	10	6	2	9	9	9	11	6					62
Law Enforcement	9	16	21	12	16	14	14	15					117
DSS Internal	4	7	10	12	6	7	13	9					68
Other	4	17	24	13	15	10	22	16					121

- **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 have been below standard due to performance issues with a contracted provider that has been addressed. Expect significant improvement next quarter.

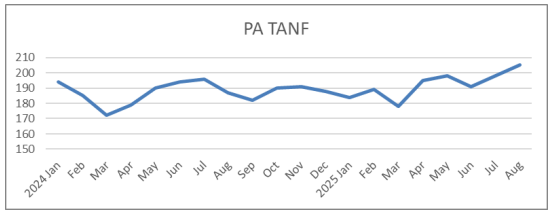
Social Services Program Statistics

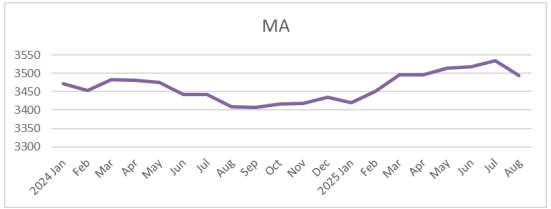
Fraud Investigations (as of 8/31/2025)						
Collections	**Cases Active**	**Cases Referred**	**Completed**	**Arrests**	**Pending arrests**	**Burials**
$10,637.57 (+5,775.15)	271 (-14)	35 (+1)	48 (+11)	2 (+/-0)	4(+/-0)	1 approved (-3) $1,800.00 costs (-5,157.60)

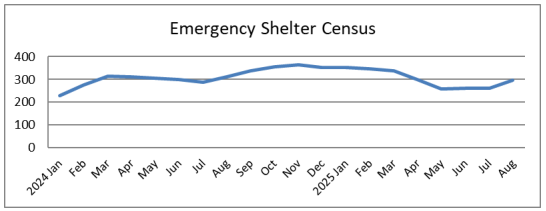
Child Support Enforcement Cases (as of 8/31/2025)			
Collections	**Petitions Filed**	**Paternity Establishments**	**Total Cases**
$678,882 (+158,739)	32 (+9)	10 (-2)	2,676 (+6)

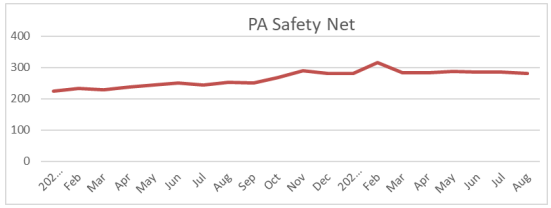
Public Assistance (PA) Cases (as of 8/31/2025)				
Temp. Assistance to Needy Families (TANF)	**Safety Net**	**Food Stamps**	**Medical Assistance (MA)**	**MA/Supplemental Security Income (SSI)**
205(+7)	281 (-3)	6101 (+44)	3493 (-41)	2428 (-3)

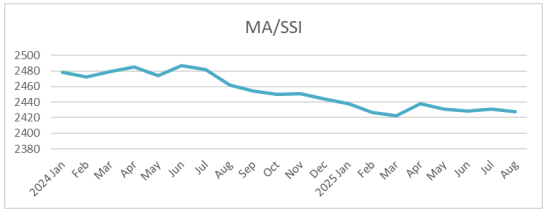
Homelessness Snapshot (as of 7/31/2025)				
Code Blue	**Quarantined**	**Adults / Children**	**Sex Offenders**	**Emergency Shelter Census**
0(no change)	0	216/81(+31/+5)	22 (-2)	297 (+36)

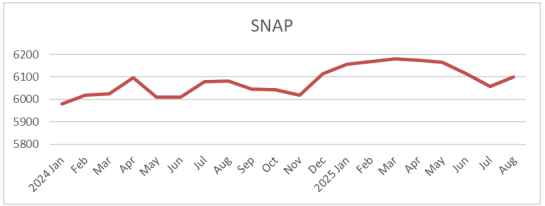












Care Center
at Sunset Lake Rehab

Care Center Update

Monthly Total Expenses to Date	Monthly Cash Receipts	End of Month Census	Meals Prepared for Residents
$1,503,110.21	$1,294,470.79	122	11,292
Admissions / Discharges (to home or Assisted Living)	**Total ST treatments**	**Total OT treatments**	**Total PT treatments**
9/8	55	567	773

Facility Updates:

- Long term kitchen planning is ongoing. However, all major equipment is currently functional.
- Emergency preparedness supplies have been ordered after recent drills were conducted with lessons learned.
- Security enhanced for all medication storage
- Significant refresh completed for the first floor conference room.

Staffing:

- One additional significant change last month – a new Unit Lead RN was hired by the County.

Nursing and Physical Therapy Update:

- Residents continue to work on gardening projects inside and outside
- Money management and sequencing activities have been incorporated
- Balance and fall reduction continue to be a significant focus which is helping with ambulation and decreased falls.

Activities Department Update:

- Celebrated National Chocolate Chip Cookie Day, International Beer Day
- Annual Care Center Carnival
- New group games added: Comment Threads, Dog Days and First to 25

Home Health Agency

Goal / Area of Focus	Update / Progress
Increase and maintain the daily census of the CHHA Program to ensure consistent enrollment, maximize resource utilization, and support the growing demand for home healthcare professionals.	• Average Daily Census: 159
Increase the number of new patient admissions through enhanced referral partnerships, physician outreach, and digital marketing strategies.	• # of referrals: 103 • Referral Conversion Rate: 77% • new patients: 79 • discharges: 102
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.	• Staff Productivity: 4.83 • See table 1 below

- Physical Therapy (PT) contract ended – Looking to hire Full Time PT position

Field Staffing	full-time	perdiem	contract	total
RN	8	4		12
LPN	1			1
PT	3	1	0	4
PTA	2			2
OT	3			3
ST	1			1
MSW	1			1
total				24

Public Health
Prevent. Promote. Protect.

Home Health Agency

	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					4.88
New Patients*	1120	122	102	96	94	69	82	100	79					665
Discharges*	1104	108	99	98	98	84	90	89	102					666
RN/LPN Visits*	6267	577	462	565	604	516	431	528	508					3683
PT/PTA Visits	8424	763	612	651	624	654	616	604	518					5042
OT Visits*	2353	160	157	241	228	257	242	229	189					1703
ST Visits*	854	77	72	54	57	76	69	76	46					527
MSW Visits*	680	54	54	54	54	47	46	55	48					412
HHA Visits*	497	84	77	77	56	78	63	70	62					567
Total Visits	21,299	1715	1434	1642	1623	1628	1467	1562	1371					**11934**

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

Table 1 – Legend:

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

Maternal Child Health

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.	• 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.	• Staff Productivity: 4.2
Increase the number of new patient admissions through enhanced referral partnerships, physician outreach, and digital marketing strategies.	• # referrals: 24 • RCR: 58%
Monitor the number of newborn screenings completed. • Ensuring that those completed newborn screenings are done within 24-48 of birth.	• **1** newborn screening

- Transitioned all adult cases to OASIS regardless of status in Maternal-Child Health Program
- Utilizing LPN for chart audits when census is low

Field Staffing	
RN	1
LPN	1
total	2

Healthy Families (HF)

- We ended our 4th quarter (8/31/25) and 81% of families enrolled met the required home visits for the quarter
- Reduction in visits because 2 Support Workers were out on scheduled time off, and 1 was out unplanned.

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: 57** • **83%** completed home visits (135 out of 166)
Increase the number of new patient admissions through enhanced referral partnerships, physician outreach, and digital marketing strategies.	• # of referrals • # of assessments completed (Frogs) • # of referrals agreed to services and registered • Referral Conversion Rate (RCR) (how many referrals turned into admissions) ○ Target RCR: **17%**	• **# of referrals: 13** • **# agreed to services and registered: 6** • **RCR: 54%**
Maintain Full Staffing	# of staff for all HF positions	

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

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

Goal / Area of Focus	Update / Progress
Ensure that initial CPSE evaluations are completed within 60 calendar days of referral.	• # of active cases: **182**
Complete initial EI evaluation and develop Individualized Family Service Plans (IFSPs) within 45 days of referral.	• # of active cases: **195** ○ # 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.	• EI OSC caseload: **37**
Increase outreach and engagement for Children and Youth with Special Healthcare Needs (CYSHN)	• # of active cases: **19** (↑ of 5) ○ # of new referrals

- Child Find (Under federal and state law, educational agencies are required to identify, locate and evaluate all students who may have a disability that affects their ability to learn. The law requires Local Educational Authorities (LEAs) to provide special education services to students with learning-related disabilities even if they are advancing from grade to grade.) numbers are back up to 14. These are children that we will monitor from birth to the age of three.
- Collaborating with Community Education to produce two video spots to be shot. These will be aired on our Facebook page or website.

Public Health Education

Goal / Area of Focus	Update / Progress
Workplace Wellness	• # of events: 0 • # of participants: 0 • Topics covered:

Outreach/Education/Rural Health Network	• # of educational workshops: 1
	  ○ Total # of participants: 120
	• # of outreach events: 24
	  ○ # directly related to RHN: 13
	• # of social media posts: 59
	  ○ Top 3 post topics (most engagement): Stone Arch #FFF, Happening Today: Community Wellness Day, International overdose awareness day
	  Highlights
	• # of PH kits distributed
	  ○ Education: 571
	  ○ Vending machines: 128
	  ○ See table 2 for detail

Narcan Training	• # of Narcan trainings: 0 ○ # of participants: 0 • # of 1-on-1 Narcan trainings: 0 • Total # trained: 0
Community Health Workers (CHW)	• # of CHW visits: 20 • # of referrals provided: 13

Table 2: Public Health Kit Distribution: August

Description	Vending Machines	Education/Outreach
Dental Hygiene ADULT	21	48
Dental Hygiene KIDS	30	58
Emergency Preparedness	4	72
Deterra (Mini)	0	0
Deterra (Large)	0	0
Men's Health	7	28
Women's Health	10	38
Mental Health	0	19
Hygiene Kit	24	54
Sexual Health Kit	16	45
Tick Removal Kit	0	72
Overdose Rescue Kit	N/A	83
Smoking Cessation	0	6
Wound Care Kit	16	48
Total	128	571

Community Health Coordinator Comments:

- Successful Community Wellness event in collaboration with ATI held at DeHoyos Park in Monticello

Quality Improvement

- ATI presented at September staff meeting- overview of services
- Public Health scheduled to present at Community Service's staff meeting in October- overview of PH services offered.
- Professional Advisory Committee (PAC) and Human Services Advisory Board (HSAB) meetings held 08/20.

Goal / Area of Focus	Key Performance Indicators	Update / Progress
Staff education	• # staff trainings offered • Topics covered • # of participants	• # staff trainings offered: 3 • Topics covered: Catholic Charities Presentation; Time Management, Communication, Personal Wellness; CDC Online Training for Alpha-Gal Syndrome • # of participants: 64
Quality	• Ongoing analysis of existing policies, updates, and creation of new.	• Departmental policies approved by HSAB: Cancer Screenings, Smoking Policy, Time and Attendance Policy, Standard of Care for Electronic Equipment • Early Intervention/Preschool policies approved by HSAB: Adaptive Tech (EI and Preschool), HIV Confidentiality (Early Intervention) • Public Health Handbook and onboarding improvement process in progress

Disease Surveillance Investigations (DSI)

Public Health
Prevent. Promote. Protect.

Goal / Area of Focus	Update / Progress
Immunization Program	• # of IQIP visits performed: 0

Rabies	• # of rabies PEP in county: **7**
	• # of exposures investigated: 56
	  ○ Domestic: **40**
	  ○ Wildlife: 16
	• # animals tested: 5
	  ○ Domestic: **1**
	  ○ Wildlife: 4
	• # of animals + for rabies: 0

Emergency Preparedness	• # of training meetings: **6**
Medical Reserve Corp. (MRC)	In Progress: Working on Operational Readiness Award (ORA)
Lead	• Total labs drawn: 126 • Lead Education: 60 • # of Positive cases: 2
Tuberculosis (TB)	• # of active TB cases: **0** • # of LTBI follow-up cases: **44** • # of suspected TB cases: **8** • # of non-clinical home visits: 11 • # of clinical/DOT home visits: **2**
Reportable Diseases	• # of lab reported cases: **397** ○ ↓ 12 from previous month • See table 5 for disease type
Total COVID & Other	• # of lab reported cases: **98** ○ ↑ 51 from previous month

- 107 camps were audited this summer. Compliance was excellent with education provided when needed.
- Looking into new database options for rabies specific data collection and reporting

Communicable Disease Update

Public Health
Prevent. Promote. Protect.

Table 3

Sexually Transmitted Diseases (STDs)
Query Limits Selected Returned: 19 Records
Tabular Analysis of Disease
Created By the Communicable Disease Electronic Surveillance System

Disease	Total
CHLAMYDIA	15
GONORRHEA, UNCOMPLICATED	3
SYPHILIS, UNKNOWN DURATION OR LATE	1
Total	**19**

Table 4

Hepatitis
Query Limits Selected Returned: 23 Records
Tabular Analysis of Disease
Created By the Communicable Disease Electronic Surveillance System

Disease	Total
HEPATITIS B, CHRONIC	5
HEPATITIS C CHRONIC	11
HEPATITIS C, NEGATIVE	7
Total	**23**

Table 5

General Communicable
Query Limits Selected Returned: 397 Records
Tabular Analysis of Disease
Created By the Communicable Disease Electronic Surveillance System

Disease	Total
ANAPLASMOSIS, ANAPLASMA PHAGOCYTOPHILUM	7
BABESIOSIS	21
COVID-19	98
CRE	2
CRYPTOSPORIDIOSIS	1
HAEMOPHILUS INFLUENZAE, INVASIVE NOT B	2
INFLUENZA, B	1
LEGIONELLOSIS	1
LYME DISEASE	232
PERTUSSIS	1
RSV UNSPECIFIED	25
SALMONELLOSIS	4
STREP GROUP A, INVASIVE	1
VARICELLA	1
Total	**397**

Staffing Data

Community Services (6 Positions Vacant, 48 Authorized, 12.5% Vacant)	
Account Clerk/Database, #3039	
Assistant Social Worker II, #2254	
Clinical Program Manager, #2169	
Staff Social Worker I, #0130, #2267, #3288	Interviewing

Public Health (12 Positions Vacant, 72 Authorized, 16.67% Vacant)	
Principal Account Clerk, #3592	OMB Positions
Public Health Educator, #1636	Posted
Public Health Nurse, CHHA #3419	
Public Health Occupational Therapist, #3340(PD)	Posted
Public Health Physical Therapist, #3667(PD), #3555	
Registered Nurse, CHHA #747, #849, #2875, #2502(PD), #2782(PD)	
Supervising Comm Health Nurse, #148	

Social Services (11 Positions Vacant, 181 Authorized, 6.07% Vacancy Rate)	
Account Clerk/Database, #3050	Posted
Clerk, #3214	Canvassing
Caseworker #3101, #2420	Interviewing
Coordinator, Child Support Enforcement, #2358	Interviewing
FS Investigator, #260	
FS Investigator Trainee, #3676	
Principal Account Clerk, #182	Awaiting RTF approval
Principal Social Welfare Examiner, #2493	Interviewing
Senior Caseworker, #763	Posted
Social Welfare Examiner, #295	One vacancy due to recent promotion

100 North Street
Monticello, NY 12701

Sullivan County

Legislative Memorandum

File #: ID-7632 **Agenda Date:** 10/16/2025 **Agenda #:** 1.

Narrative of Resolution:
To modify the contract with Coordinated Care Services, Incorporated (CCSI) for Specialized Financial Services who will be taking on additional fiscal duties.

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

Amount to be authorized by Resolution: $3,560

Are funds already budgeted? Yes

If 'Yes,' specify appropriation code(s): A 4310

If 'No,' specify proposed source of funds:

Specify Compliance with Procurement Procedures:

RESOLUTION INTRODUCED BY THE HEALTH & HUMAN SERVICES COMMITTEE TO MODIFY THE CONTRACT BETWEEN COORDINATED CARE SERVICES AND THE DEPARTMENT OF COMMUNITY SERVICES.

WHEREAS, Coordinated Care Service, Incorporated, (CCSI) has increased their hourly rate which necessitates increasing the yearly not-to-exceed amount by $3,560 to $44,500 for the 2026 calendar year; and

WHEREAS, a contract modification is needed to accommodate the increased 2026 rate; and

WHEREAS, all other terms and conditions of the contract will remain the same; and

NOW, THEREFORE, BE IT RESOLVED, that the County Manager is hereby authorized to modify the contract with Coordinated Care Services, Incorporated (CCSI) to increase their annual cost not-to-exceed $44,500 for the 2026 calendar year; and

BE IT FURTHER RESOLVED, that all other terms and conditions of the original contract will remain the same; and

BE IT FURTHER RESOLVED, that the form of said contract shall be approved by the Sullivan County Department of Law.

File #: ID-7812 **Agenda Date:** 10/16/2025 **Agenda #:** 2.

Narrative of Resolution:
Enter into contract with Grand Canyon University for the purpose of student interns in Social Work at the Department of Community Services.

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

Amount to be authorized by Resolution: $0

Are funds already budgeted? No

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

If 'No,' specify proposed source of funds:

Specify Compliance with Procurement Procedures:

Resolution introduced by the Sullivan County Health & Human Services Committee to enter into contract with Grand Canyon University for the purpose of student interns in Social Work at the Department of Community Services.

RESOLUTION TO ENTER INTO AN AGREEMENT WITH GRAND CANYON UNIVERSITY

WHEREAS, Grand Canyon University ("University") has a Graduate School of Social Service, which offers a Masters in Social Work educational program and wishes to assign students to the Department of Community Services ("DCS") for practical experience; and

WHEREAS, DCS wishes to enter into an agreement with the University to permit qualified students to participate in said educational program.

NOW, THEREFORE, BE IT RESOLVED, that the County Manager is hereby authorized to enter into an agreement with Grand Canyon University, at no cost to the county, effective January 1, 2026; and

BE IT FURTHER RESOLVED, that said agreement shall continue in full force and effect until termination, provided that either party may terminate said agreement by giving sixty (60) days prior written notice to the other party; and

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

File #: ID-7817 **Agenda Date:** 10/16/2025 **Agenda #:** 3.

Narrative of Resolution:
To execute agreements between DSS and DCS for substance use assessment and monitoring

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

Amount to be authorized by Resolution: $47,000

Are funds already budgeted? Yes

If 'Yes,' specify appropriation code(s): A-6010-38-40-4001

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 EXECUTE AGREEMENTS BETWEEN DEPARTMENT OF SOCIAL SERVICES (DSS) AND DEPARTMENT OF COMMUNITY SERVICES (DCS) FOR SUBSTANCE USE ASSESSMENT AND MONITORING

WHEREAS, the County of Sullivan, through the Department of Social Services, requires substance use assessment and monitoring services; and

WHEREAS, the County of Sullivan; through the Department of Social Services, wishes to contract through a Memorandum of Understanding (MOU) for the provision of Office of Addiction Services and Supports approved substance use monitoring with the Department of Community Services; and

WHEREAS, Sullivan County Department of Community Services is capable and willing to provide such services at a cost not-to-exceed $47,000 per year.

NOW, THEREFORE, BE IT RESOLVED, that the Sullivan County Legislature does hereby authorize the County Manager to execute an MOU between the Sullivan County Department of Social Services and Sullivan County Department of Community Services at a cost not to exceed $47,000 for the period of October 1, 2025 through September 30, 2026; and

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

100 North Street
Monticello, NY 12701

Sullivan County

Legislative Memorandum

File #: ID-7820 **Agenda Date:** 10/16/2025 **Agenda #:** 4.

Narrative of Resolution:
To execute agreements between DSS and OFA for assistance with HEAP

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

Amount to be authorized by Resolution: $12,000

Are funds already budgeted? Yes

If 'Yes,' specify appropriation code(s): A-7610-87-R1972-R211 and A-6010-38-40-4001

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

Specify Compliance with Procurement Procedures: 140-3.4

RESOLUTION INTRODUCED BY HEALTH & HUMAN SERVICES COMMITTEE TO AUTHORIZE THE COUNTY MANAGER TO EXECUTE AN AGREEMENT BETWEEN THE DEPARTMENT OF SOCIAL SERVICES (DSS) AND THE SULLIVAN COUNTY OFFICE FOR THE AGING (OFA) FOR ASSISTANCE WITH THE HOME ENERGY ASSISTANCE (HEAP)

WHEREAS, the County of Sullivan, through the Department of Social Services requires a service agreement with a qualified provider to comply with Social Services Law and Title 18 NYCRR, Part 393, specifically that the County of Sullivan shall provide for a comprehensive program of assistance and care to supply the basic needs of eligible individuals living within the county who qualify for public assistance; and

WHEREAS, a high volume of applications must be screened and processed for the County's Home Energy Assistance Program (HEAP) in order to provide services in a timely manner; and

WHEREAS, the Sullivan County Office for the Aging has qualified, available, and willing staff to provide the services for this purpose; and

WHEREAS, the Sullivan County Office for the Aging in consultation with the Sullivan County Department of Social Services has agreed to provide HEAP services for the period of October 1, 2025 through September 30, 2026; and

WHEREAS, the Sullivan County Office for the Aging has agreed to provide these services for complete applications and for a fee of $40.00 with a not-to-exceed amount of $12,000.00.

NOW, THEREFORE, BE IT RESOLVED, that the Sullivan County Legislature does hereby authorize the County Manager to execute an agreement between the Department of Social Services and the Sullivan County Office for the Aging to provide necessary HEAP services to those eligible individuals living within the county who qualify for assistance and care related to HEAP; and

BE IT FURTHER RESOLVED, the agreement will be from October 1, 2025 through September 30, 2026 for a fee of $40.00 per application with a not-to-exceed amount of $12,000; and

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

File #: ID-7828 **Agenda Date:** 10/16/2025 **Agenda #:** 5.

Narrative of Resolution:
To execute an agreement with CARES of NY, Inc.

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: CARES Homeless Management Information System (HMIS) is identified by the NYS Balance of State Continuum of Care (BoS CoC) as the HMIS provider for all counties within the BoS CoC.

RESOLUTION INTRODUCED BY THE HEALTH AND HUMAN SERVICES COMMITTEE TO AUTHORIZE THE COUNTY MANAGER TO EXECUTE AN AGREEMENT WITH CARES OF NY, INC.

WHEREAS, The Department of Social Services is required to submit a comprehensive Homeless Service Plan and report on outcomes achieved as result of these plans; and

WHEREAS, reporting for the Homeless Service Plan requires coordination with the local Continuum of Care (CoC) which incorporates federal, state and local governments as well as not-for-profits and/or faith-based organizations; and

WHEREAS, Sullivan County is a part of the New York State BoS CoC where CARES of NY, Inc. has been identified as the HMIS provider using their CARES Collaborative Homeless Management Information System (CCHMIS) to BoS CoC counties; and

WHEREAS, the Department of Social Services wishes to enter into an agreement with CARES of NY, Inc. for the use of CCHMIS at no cost to fulfill Homeless Service plan outcome reporting, the BoS CoC covers all costs for using CCHMIS.

NOW, THEREFORE, BE IT RESOLVED, that the Sullivan County Legislature does hereby authorize the County Manager to enter into agreement with CARES of NY, Inc. for the period of October 1st, 2025 through September 30th, 2026; and

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

CARES OF NY, INC
ENDING HOMELESSNESS

CARES Collaborative Homeless Management Information System (CCHMIS) End User Licenses and Technical Assistance

October 1st, 2025 - September 30th, 2026

CARES' Collaborative Homeless Management Information System provides users, including community agencies and local and state government entities, with access to vital data about the homeless population in their respective areas, as well as a network of support and resources for how to best utilize the information available to agencies in the HMIS. In addition to being a requirement by many funders, such as HUD, regular and efficient use of the HMIS allows agencies to effectively evaluate homelessness and vulnerable persons in their area and use data to address key issues within the community. CARES of NY, Inc. is proud to offer agencies access and support to utilize this critical resource to better serve their communities. CARES contracts with agencies for the following CCHMIS services and agency usage.

Large User Fee Agreements (LUF): Large User Fees are assessed when an agency requires 15 or more user licenses in the HMIS. Fees collected from agencies with a Large User Fee Agreement will be remitted directly to Foothold Technology, Inc., CARES' technology vendor, to cover the cost of additional users. The cost of 15-30 users is $500 per month. The cost of 31-45 users is $1,000 per month. Agencies interested in more than 45 user licenses can reach out to CARES for more information.

Runaway and Homeless Youth Projects (RHY): CARES, Inc. will provide HMIS Program services for your agency's Runaway Homeless Youth (RHY) program including staff support, software access, data oversight and quality maintenance, and necessary technical assistance.

Solutions to End Homelessness Program Projects (STEHP): STEHP Awardees have the option to contract with CARES of NY, Inc. to assist in meeting the NYS OTDA documented data collection and reporting requirements through the CARES Regional Homeless Management Information System (HMIS).

Supportive Services for Veteran Families Projects (SSVF): CARES, Inc. will provide HMIS Program services for your agency's Veteran's Administration Program- Supportive Services for Veteran Families (SSVF) program including staff support, software access, data oversight and quality maintenance, and necessary technical assistance.

CoC Supplemental HMIS Fees: Supplemental HMIS fees are assessed at the agency level when the HUD HMIS grant does not adequately cover the cost incurred by the Continuum's projects as it relates to Foothold Technology, Inc. Supplemental HMIS fees are subject to increase as the costs of the CCHMIS technology vendor, Foothold Technology, Inc. increase.

Homeless Services Plan (HSP) Outcome Report: HMIS fees are assessed at the agency level when HMIS services are used to store, review, and aggregate data for the HSP Outcome Reports. HMIS fees cover the cost of the database, user training, and support from CARES. HMIS fees are subject to increase as the costs of the CCHMIS technology vendor, Foothold Technology, Inc., increase.

Other Supplemental HMIS Fees: Other non-CoC funded agencies that utilize the HMIS may be subject to supplemental HMIS fees to cover the cost of user licenses, training, and support from CARES.

CCHMIS CONTRIBUTING HMIS ORGANIZATION AGREEMENT

Any Contributing Homeless Organization (CHO) participating in the CoC's HMIS is expected to adhere to the data quality standards as laid out in Article 12 (CCHMIS Data Quality Plan) of the CCHMIS Administration Manual. This includes baseline requirements for the following pieces of data quality:

- Data Completeness (how many of the required data elements in the CCHMIS are completed for any given client)
- Data Timeliness (how long does it take for the data to be entered into the CCHMIS once it is collected from the client)
- Data Quality (how much does the data entered into the CCHMIS reflect the client's or project's reality)

All projects within the CCHMIS are required to abide by the following baseline requirements, as laid out in Article 12 (CCHMIS Data Quality Plan) of the CCHMIS Administration Manual:

MEASURE OF DATA QUALITY	PROGRAM APPLICABILITY	CALCULATION	REQUIRED DATA QUALITY (SEPARATED INTO HMIS PROJECT TYPES)				
			PERMANENT HOUSING	TRANSITIONAL HOUSING	HOMELESS PREVENTION	EMERGENCY SHELTER	OUTREACH (Engaged clients only)
Timeliness of Entry	Evaluated for all projects	Length of time between HMIS data collection and HMIS data entry	< 5 Calendar days	< 5 Calendar days	< 5 Calendar days	< 5 Calendar days	< 5 Calendar days
Universal Data Element Missing or Null	Evaluated for all projects	% of records missing UDE (each UDE is evaluated individually)	< 2%	< 2%	< 2%	< 5%	< 5%
Program-Specific Data Element Missing or Null	Program-specific; data elements as required by funding source	% of records missing required PSDE; (each PSDE is evaluated individually)	< 2%	< 2%	< 5%	< 5%	< 5%
Annual Assessments (Updates to income, benefits, health insurance)	Evaluated for CoC-funded programs only (programs that create an APR)	% of records with overdue annual assessments (within 30 days of the Head of Household's anniversary date)	< 0%	< 2%	< 2%	< 2%	< 2%

Should this organization fail to uphold the data quality standards, this organization shall implement a correction plan with the CCHMIS team, as laid out in article 11 (Noncompliance) of the CCHMIS Administration Manual. Failure to comply with a created Correction Plan could result in the following:

- Loss of user licenses
- Loss of access to the CCHMIS as an organization
- Report sent to Collaborative Applicant and any applicable CoC Subcommittees.

The responsibilities of this organization related to this Agreement include the following:

- Maintain a high level of HMIS data quality, using the baseline requirements as laid out in Article 12 (CCHMIS Data Quality Plan) of the CCHMIS Administration Manual, the Data Quality Plan is the baseline for meeting the expectation;
- Seek assistance from the HMIS Lead and/or CoC when there are questions about the CCHMIS and CCHMIS Data Quality;
- Be responsive to questions and requests from both the HMIS Lead and CoC related to CCHMIS data quality; and
- Inform the HMIS Lead and CoC when changes occur within this organization that specifically relate to the CCHMIS and/or CCHMIS data quality as laid out in Article 18 (CCHMIS Security Plan: Access Control), including but not limited to:
    - Designation of a CHO CCHMIS Agency Administrator as laid out in Article 4 (Roles and Responsibilities) of the CCHMIS Administration Manual
    - Inform the HMIS Lead when an existing CCHMIS user no longer needs access to the system, within 24 hours of no longer needing access;
    - Inform the HMIS Lead when a new CCHMIS user needs to receive training to gain access to the system;
    - Inform the HMIS Lead and CoC when an existing CCHMIS project ends, at least 21 days prior to the project's termination

The responsibilities of the HMIS Lead related to this Agreement include the following:

- Provide sufficient training, resources, materials, and follow-up to this organization and its CCHMIS users to ensure a high level of understanding related to entering data into the CCHMIS;
- Respond to the organization's questions and concerns related to the CCHMIS and CCHMIS data quality;
- Provide tools for this organization to monitor its own data quality; and
- Ensure this organization and its CCHMIS users understand the data entry requirements related to the specific projects this organization enters into the CCHMIS

The responsibilities of the CoC related to this Agreement include the following:

- In conjunction with the HMIS Lead, ensure this organization understands the Data Quality Plan and its importance;
- Ensure the HMIS Lead and this organization have sufficient resources to be as proactive in CCHMIS data quality monitoring as possible; and
- In conjunction with the HMIS Lead, determine the consequences for this organization should they fail to abide by this Agreement or a Correction Plan.

This Agreement is effective from the date of signature and will be in effect until this Agreement is updated or the organization is no longer participating in the CCHMIS.

_____ _____
Authorized Sullivan County DSS Representative Date

_____ _____
Denise Galloway, Director of Partner Services Date

CHO CCHMIS Agency Administrator Designation:

*The role of the CHO CCHMIS Agency Administrator are as follows:

1. Distribute any HMIS related information to all staff that enter data or pull reports from the CCHMIS.
2. Review the HMIS Data Quality and Completeness Report that is posted to the CARES of NY, Inc. website on the 15th of each month and work with staff to correct any issues if necessary.
3. Remind staff that may not access HMIS regularly to log in each month to maintain their HMIS access.
4. Monitor to ensure that your agency does not exceed the permitted number of active user accounts.
5. Work with the CCHMIS staff annually to confirm any information requested when we are preparing to submit HUD required reporting.
6. Report when staff no longer need access to the CCHMIS or need access to a new/additional project.
7. Submit requests for any new staff to complete the CCHMIS New User Training Series.

Upon designation the CHO CCHMIS Agency Administrator will be required to complete the CHO CCHMIS Agency Administrator Training and submit the associated documentation.

This organization designates the following person to act as the CHO CCHMIS Agency Administrator:

CHO CCHMIS Agency Administrator Name	
CHO CCHMIS Agency Administrator Email	

CARES OF NY, INC
ENDING HOMELESSNESS

Billing

Sullivan County DSS is being billed for the following programs:

Program Type	Annual Cost
Large User Fee Agreements (LUF)	$0
Runaway and Homeless Youth Projects (RHY)	$0
Solutions to End Homelessness Program Projects (STEHP)	$0
Supportive Services for Veteran Families Projects (SSVF)	$0
CoC Supplemental HMIS Fees	$0
Homeless Service Plan (HSP) Outcome Report	$0
Non-CCHMIS Fees	$0
Annual Total	$0

Due to the Office of Temporary and Disability Assistance covering the costs for NY-525, the charge for this contract year will be **$0**.

For agencies that incur a fee for this contract year, invoices for fees will be sent via email. If a payment plan is preferred rather than a lump sum, please reach out. Otherwise, please remit payment within 60 days to continue HMIS services with no interruptions.

Sullivan County DSS:

_____
Authorized Sullivan County DSS Representative

_____
Title

_____
Signature Date

CARES of NY, Inc.:

_____
Authorized CARES Representative

Director of Grants and Contracts
Title

_____
Signature Date

File #: ID-7830 **Agenda Date:** 10/16/2025 **Agenda #:** 6.

Narrative of Resolution:
To execute an agreement between DSS and DPH for Home Visiting Program Preventive Services

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

Amount to be authorized by Resolution: $139,598

Are funds already budgeted? Yes

If 'Yes,' specify appropriation code(s): A-4010-36-R2280-R247 and A-6010-38-40-4001

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

Specify Compliance with Procurement Procedures: 104-3.5. Contracting for professional services with grant approved organizations

INTRODUCED BY HEALTH AND HUMAN SERVICES COMMITTEE TO AUTHORIZE THE COUNTY MANAGER TO EXECUTE AN AGREEMENT BETWEEN DEPARTMENT OF SOCIAL SERVICES (DSS) AND DEPARTMENT OF PUBLIC HEALTH (DPH) FOR HOME VISITING PROGRAM PREVENTIVE SERVICES

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

WHEREAS, funding is available to purchase certain New York State Office of Children and Family Services (OCFS) approved preventive services; and

WHEREAS, the County of Sullivan; through the Department of Social Services, wishes to contract through a Memorandum of Understanding (MOU) for the provision of OCFS approved Home Visiting Program Preventive Services with Department of Public Health; and

WHEREAS, Sullivan County Department of Public Health is capable and willing to provide such services at a cost not-to-exceed $139,598 for the Healthy Families NY Program Services.

NOW, THEREFORE, BE IT RESOLVED, that the Sullivan County Legislature does hereby authorize the County Manager to execute an MOU between the Sullivan County Department of Social Services and Sullivan County Department of Public Health at a cost not to exceed $139,598 for the period of October 1, 2025 through September 30, 2026; and

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

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