

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

**Roadmap to Better Health Implementation**

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

Strategy	Update on Activities Supporting the Strategy	Key Performance Indicators:	
Ease Access to Care	<ul style="list-style-type: none"> <li>• <b>“Big Beautiful Bill” Act Passed:</b> The federal budget was signed into law on July 4. A summary published by the American Public Human Services Association is included as an attachment to this month’s report to provide some high-level details on how the law will impact SNAP, Medicaid and other human service programs.</li> <li>• <b>Unknown Future for Catholic Charities’ Monticello Real Estate:</b> There was some progress on this issue last month. OASAS has given guidance to Catholic Charities to exit 396 Broadway this summer and is now considering possibilities for leasing space to another provider. The exact date is TBD.</li> </ul>	Participating Unite Us Agencies	<b>38 Local (+2) 242 Regional (+7)</b>
		Unite Us Cases	<b>1,421 (+138)</b>
		% of Cases Resolved	<b>45.3% (-1.1%)</b>
		Medicaid Enrollment	<b>29,070 (as of Oct. 2024)</b>
Enhance Our Community (Focused on Housing)	<ul style="list-style-type: none"> <li>• <b>Emergency Housing Update:</b> The DSS Housing Team and community partners saw another month of steady progress toward reducing our emergency census. Overall, the census decrease powered was the net placement of four families, while the singles census increased by a total of 14 persons.</li> <li>• <b>Rental Supplement Program Update:</b> The state RSP 2024-2025 program year ended with only \$322 not utilized. We received approval for 2025-2026 in the amount of \$240,957, all of which has now been allocated. \$164,248 of \$250k of County RSP funds have been obligated so far this year.</li> <li>• <b>Gateway Housing Center Update:</b> Discussions remain active in search of a site that addresses both public safety and accessibility concerns among legislators. On June 20<sup>th</sup>, a second group of legislators visited HONOR’s shelter in Middletown to better understand the value added by their operations.</li> </ul>	Emergency Shelter Census (as of 7/8)	<b>270 (-14)</b>
		Active Rental Supplement Program Clients	<b>State: 68 County: 27</b>
		Family Groups Sheltered (as of 7/8)	<b>40 (-4)</b>
Encourage Healthier Behavior	<ul style="list-style-type: none"> <li>• <b>SNAP-Ed funding eliminated:</b> The nationwide nutrition education program funded by USDA and the SNAP program will lose all of its funding, effective September 30, 2025. We will work with local partners to see how we might be able to fill this gap, which will adversely impact health outcomes.</li> <li>• <b>Bold Gold Media Campaigns Ongoing:</b> We had strong success with our most recent email campaign – earning more than 4,400 views and 792 clicks. We are also very pleased with the success of our (totally free!) Bold Gold Community Heroes Campaign, which is lifting up outstanding efforts by staff in United Sullivan partner agencies and raising community awareness of available services.</li> </ul>	Health Kits Distributed in June	vending machines: <b>132</b> traditional outreach: <b>214</b>

**Sullivan County Drug Task Force**

For more information: [www.unitedsullivan.org](http://www.unitedsullivan.org); [contact@unitedsullivan.org](mailto:contact@unitedsullivan.org)    Hope Not Handcuffs: 833-428-HOPE

Pillar Meetings						
Law Enforcement	Treatment	United Sullivan	Prevention	Policy	Veterans	Data
5/2/2025	7/17/2025	Meeting Weekly	7/7/2025	7/10/2025	7/15/2025	6/20 and 7/18/2025
Drug Task Force Key Statistics						
<b>911 Responses to Overdose</b>				<b>Opioid Overdose Death Rate (2024)</b>		
May: 17 (+2 from previous month), June: 18 (+1)				26 deaths; 32.5/100,000 2023 totals: 38 deaths; 47.5/100,000		

Opioid Settlement Fund Balance (as of 7/8/25)	OASAS Settlement Fund Allocated to Sullivan / Committed by DCS
Restricted: \$389,280.84; Unrestricted \$1,157,817.43	\$1,438,489/\$582,390 (no change from last month)

- **Overdoses in May and June:** 911 overdose responses ticked up slightly again in May and June. The increase in responses appears to be in line with changes in season, which has aligned with our post-pandemic trend of seeing a general decrease in opioid overdoses with upticks in the summer months. As we've observed over the last year, there is no discernable trend in the drug of choice – responses varied widely and included OD's on alcohol, ecstasy, fentanyl, heroin, prescription meds and THC (cannabis).
- **Coalition for a Vape Free Sullivan:** We have been hearing that settlement funding is nearly ready for distribution regarding the Juul settlement. The Coalition for a Vape Free Sullivan plans to work together with key stakeholders to recommend a cooperative spending plan for funds that we expect to be distributed to both Sullivan County Government and Sullivan BOCES. After the coalition partners develop a plan, the plan will be shared with the public via the Sullivan County Legislature and BOCES' board for final decisions on spending.
- **Oxford House:** Contract is signed to bring 24 sober living beds to Sullivan County over the course of the next 12 months. Oxford House's planning team is currently seeking available units, and is partnering directly with Step One – a new local provider, expanding into Sullivan County from Ulster.
- **Opioid Settlement Fund Obligations:** The following chart provides a brief summary of organizations under contract and receiving opioid settlement funding, and the actions each of those organizations is taking in support of the Drug Task Force. This chart does not include funds in active use by the county to acquire items and services needed for use by the Drug Task Force (i.e. software subscriptions to support counter narcotics investigations, palm cards, vending machines, etc.).

County Opioid Settlement Funds	OASAS Settlement Funds Allocated to Sullivan County
<ul style="list-style-type: none"> <li>• Catholic Charities (School-Based Prevention Program) \$25,000</li> <li>• Lamar of Scranton (Marketing-Signage) \$33,000</li> <li>• Village of Liberty Police (Officer EAP) \$11,000</li> <li>• Village of Liberty Police (Overdose Quick Response Team) \$15,000</li> <li>• Town of Fallsburg Police (Overdose Quick Response Team) \$15,000</li> <li>• Sullivan 180 (School-Based Prevention Programs) \$99,500*</li> <li>• Action Toward Independence (Housing, transportation and case management for persons with substance use disorders) \$85,000</li> <li>• Corona Self-Help Center (Peer Services and Supports) \$32,500*</li> </ul> <p>* - Updated authorizations per Resolution 270-25</p>	<ul style="list-style-type: none"> <li>• Bold Gold Media (Marketing and Education) \$108,000</li> <li>• Restorative Management (Peer Services) \$74,500</li> <li>• Sullivan 180 (Youth MH Services and Supports) \$138,430</li> <li>• Catalyst Research (Data Analytics) \$59,500</li> <li>• Oxford House (Sober living homes) \$200,000</li> <li>• Ventex (Vending Machine Data) \$1,960</li> </ul>

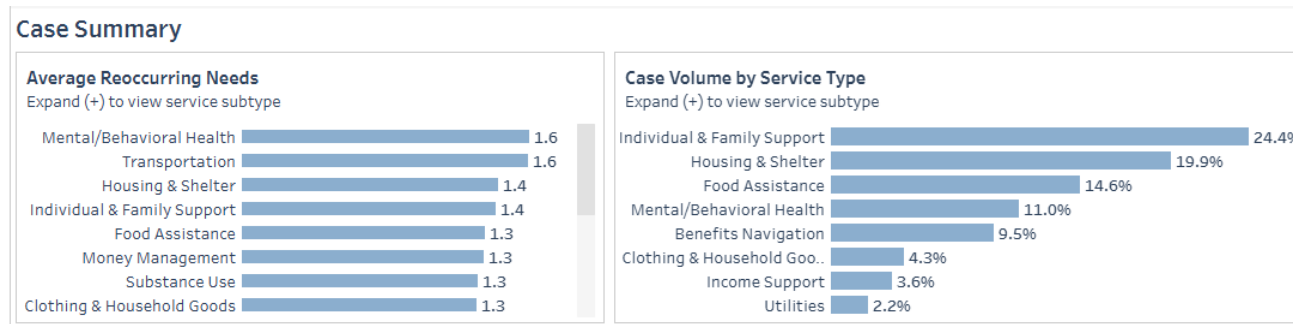


### United Sullivan – Social Care Network

For more information: [www.unitedsullivan.org](http://www.unitedsullivan.org); [contact@unitedsullivan.org](mailto:contact@unitedsullivan.org)

**Expanding Unite Us Capacity across County Government:** DHHS is working with our regional Social Care Network (Hudson Valley Care Coalition - HVCC) and Unite Us to expand our ability to connect clients and service providers. A resolution is on today's agenda (was planned for last month, but did not make it to agenda until today's meeting) which will reduce the overall cost of the county's contract with Unite Us by \$90k annually, while giving more staff access to the platform. We will also be able to retain most of our existing data analytics capability, which we originally did not expect to be available in the new contract.. The county's contract will fund network access for members of the Division of Community Resources.

**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:



**Network Member Update:** The following chart provides the complete list of Sullivan County agencies currently active on Unite Us (new agency in bold).

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



For more information: (845) 292-8640, <https://sullivanyny.us/Departments/Adultcarecenter>

Care Center at Sunset Lake Key Statistics			
Monthly Total Expenses to Date	Monthly Cash Receipts	End of Month Census	Meals Prepared for Residents
\$1,329,296.99	\$1,250,819.59	128	11,742
Admissions / Discharges (to home or Assisted Living)	Total ST treatments	Total OT treatments	Total PT treatments
11/8	55	656	795

**Introducing the New Care Center Administrator:** Kayshawn Macharie, LNHA, LMSW, BSN, is a dedicated healthcare professional with expertise in social work, nursing, and long-term care administration. Kayshawn attended the University of Buffalo, Class of 2016, where he earned his BA in Psychology. He continued to study and work in Buffalo for several years, earning his Master of Social Work from Daemen University and beginning his professional practice in clinical social work before shifting to long term care in March 2020. He reached the level of interim administrator at Elm Manor Nursing and Rehab in Canandaigua in late 2024. Kayshawn returned home to the eastern part of the state this past winter when he became the Director of Social Services for the Plaza Rehab and Nursing Center in the Bronx before seizing the opportunity to take the reins of the Care Center at Sunset Lake.

**Overall Facility Rating – 1/5 stars:**

- Health Inspection (1 Star) and Quality Measures (2 Stars).

### **Staffing (3 Stars - average):**

- Recruiting and hiring continue. We continue to work with staffing agencies.
- New Hires for April: RN – 0 LPN – 0, CNA – 0

**Facility Update:** As of the submission date of this report (July 8), the dishwasher and both elevators are repaired and fully operational. We continue to pursue longer term upgrades and updates for kitchen equipment.

### **Nursing and Physical Therapy Update:**

- Residents continue to plan their garden, plant seeds and care for seedlings.
- Outside planters were cleaned and prepared for gardening.
- Gardening Group is going strong with residents working on cognition and fine motor skills.
- In May DOR/SLP will be educating staff about residents' level of cognition and how to best communicate with and engage each resident.
- Residents planned and created a patriotic Memorial Day Tree in Rehab Gym.
- Balance and fall reduction continue to be a significant focus which is helping with ambulation and decreased falls.

### **Activities Department Update:**

- Weekly Happy Hour
- Monthly Birthday Party
- Cinco de Mayo Party
- Baking individual apple pies
- Mother's Day Brunch



### **Department of Community Services (DCS)**

**For more information: (845) 292-8770,**

**<https://sullivanny.us/Departments/CommunityServices>**

**National Suicide Hotline: 988      Mobile Mental Health – 24-hour hotline:  
(800) 710-7083, Face-to-Face Outreach Monday-Friday 8am-8:30pm,**

**Saturday-Sunday 8am-12am**

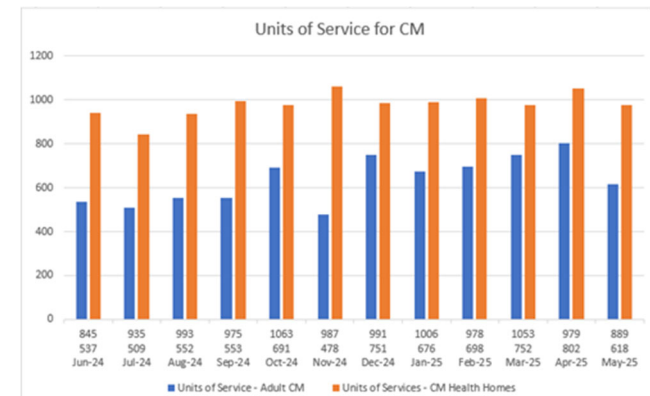
**Children's Mobile MH: (845) 701-3777**

### **Care Management:**

- The Care Management unit continues to actively engage & work with clients for both of the Health Home agencies and the HARP Services (Health and Recovery Plan) which are Medicaid and Medicaid Managed Care Health Plans. As of the end of May 2025, there are 4 active Assisted Outpatient Treatment (AOT) orders and there is 1 person on enhanced AOT services.

### **Adult & Children's SPOA:**

- On May 8, 2025, the Adult SPOA Committee met via Zoom with 6 new cases reviewed as well as 7 previous cases reviewed.
- The total of 137 RSS beds with 133 people on the waiting list and 12 openings.
  - There are 7 people on the list for Family Care with no openings.
  - RSS Community Residence: 12 beds, 23 on the waiting list with no openings.
  - RSS Sullivan Treatment Apartment Program: 26 beds, 12 on the waiting list with 2 openings with both apartments in need of repairs.
  - RSS Supportive Apartment Program: 39 Regular and 16 L/S, 30 on the waiting list with 10 openings.
  - RSS Invisible Children's Apartment Program: 6 beds, 8 on the waiting list, no openings.
  - RSS Chestnut Street Apartments: 37 beds, 15 on the waiting list with no openings.



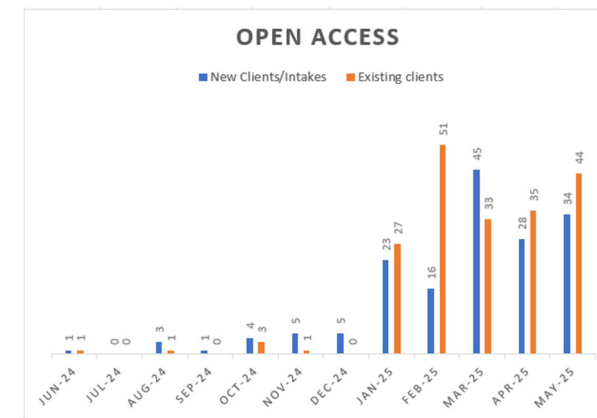
- Coordination of referrals and ongoing collaboration with service providers continue. Clients were recommended for/linked to various services, including: behavioral health treatment providers, RSS housing (apartment program and community residences), Access: Supported Housing, Sullivan PROS Program, OFA, APS, Action Toward Independence, Independent Living, Inc., and Care Management services.
- Children's SPOA Committee met on May 22, and went over 4 new referrals and 9 previous referrals.
- The Coordinator organized and facilitated the monthly Adult & Children SPOA Committee meetings (review of incoming referral packets, typing the case presentations, agenda, meeting minutes, waiting lists). Coordinator also conducted follow up throughout the month and completed monthly SPOA related data reports.

#### **Behavioral Health Clinic (Mental Health and Substance Abuse):**

- High Risk Clients: In May 2025, there were 172 clients on the roster for high risk census.
- Open access extended to 2 mornings on Tuesday & Thursday's in January – very encouraged by the consistent utilization.

#### **Local Government Unit:**

- **Bold Gold Marketing Plan:** Partnership for radio and media campaigns; Digital Access: Granted access to UnitedSullivan.org; site updates are in progress.
- **System of Care Taskforce:** Specialty leads met in April for onboarding; Aligning inter-agency policy work;
- **Community Trauma Response Team:** Recruiting and training in progress; participated in DSS Foster Care and SALT Coalition meetings.
- **Crisis Intervention Team (CIT) Initiative:** State technical assistance applied for; Camille O'Brien transitioning into Coordinator role for this team.
- **Staff & Community Training:** Needs assessment conducted (topics: burnout, boundaries, de-escalation); Collaboration with Marist HR; Activities included Drug Court "All Rise" training, No Tobacco Day, and smoking kit distribution.
- **Mobile Crisis Services Enhancement:** Budget approved; recruitment underway; RFP issued in April for weekend coverage – no responses yet.
- **First Responder Wellness Initiative:** Assessment completed; training RFP's received May 15<sup>th</sup>
- **Court Peer Navigator Program:** Position filled; start date of June 16<sup>th</sup>; office space secured at the County Courthouse.
- **Threat Assessment Training:** Curriculum being development; attendance ongoing; post-training evaluation planned.
- **Provider Audits:** Audit framework applied; findings published for system improvement.
- **SCJ Monthly Meetings:** Engagement enhanced with new social worker Gianna onboard.



#### **DCS Stats:**

SULLIVAN COUNTY DEPARTMENT OF COMMUNITY SERVICES						
STATISTICAL SUMMARY FOR: May 1, 2025 - May 31, 2025						
Prepared by: Sara A. Cole						
	ON ROLLS:		CLIENTS		UNITS OF SERVICE	
PROGRAM	5/1/2025	ADMISSIONS	DISCHARGES	5/31/2025	SERVED	
SC BEHAVIORAL HEALTH CLINIC ADULT	442	23	20	445	465	827
SC BEHAVIORAL HEALTH CLINIC CHILD	18	4	3	17	22	21
SC BEHAVIORAL HEALTH CLINIC FORENSIC	71	9	9	71	80	51
SC BEHAVIORAL HEALTH CLINIC MICA	20	3	1	22	23	Included in Clinic Adult
SC BEHAVIORAL HEALTH CLINIC MAT	17	3	1	19	20	Included in Clinic Adult
<b>TOTAL MENTAL HEALTH</b>	<b>568</b>	<b>42</b>	<b>36</b>	<b>574</b>	<b>610</b>	<b>899</b>
SC CARE MANAGEMENT	31	0	0	31	31	617
SC HEALTH HOME - ADULT	43	1	2	42	44	383
SC HEALTH HOME - KENDRA, AOT and HH+	16	0	1	15	16	157
SC HEALTH HOME - CHILD	14	1	0	15	15	183
SC HEALTH HOME - OUTREACH	12			12	12	166
SC CM CCSI					1	1
<b>TOTAL HEALTH HOME CASE MANAGEMENT PROGRAMS</b>	<b>104</b>	<b>2</b>	<b>3</b>	<b>103</b>	<b>107</b>	<b>1,341</b>
SC SPOA - Adult	43			43	43	338
SC SPOA - Child	17			17	17	130
<b>TOTAL SPOA</b>	<b>60</b>	<b>0</b>	<b>0</b>	<b>60</b>	<b>60</b>	<b>468</b>
	# of calls	# of ph interv	Outreaches	Hosp Divers %	Hosp Admit %	
MOBILE MENTAL HEALTH						

#### **Mobile Mental Health Team Stats:** None available

Month/Year	Incoming Calls	Initial Phone Contacts	Outreaches	Diversion Rate	Hospital Referrals	Admissions	Admission Rate
May-24	305	99	29	79%	6	4	67%
Jun-24	249	83	30	67%	6	4	67%
Jul-24	335	101	30	77%	7	5	71%
Aug-24	323	111	38	79%	8	5	63%
Sep-24	286	89	27	74%	7	6	86%
Oct-24	298	94	42	88%	5	4	80%
Nov-24	286	81	32	78%	7	5	71%
Dec-24	202	77	18	72%	5	4	80%
Jan-25	214	70	21	71%	6	5	83%
Feb-25	214	78	28	75%	7	6	86%
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%



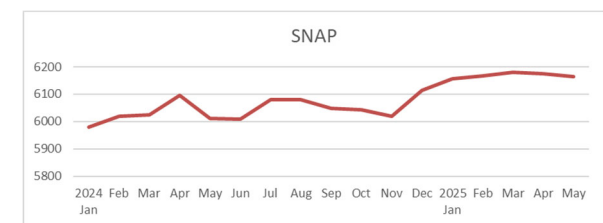
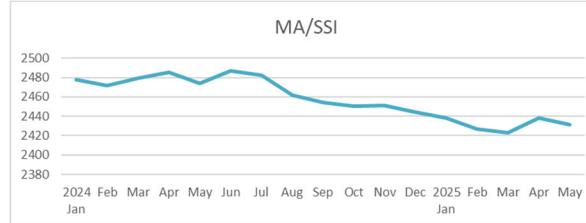
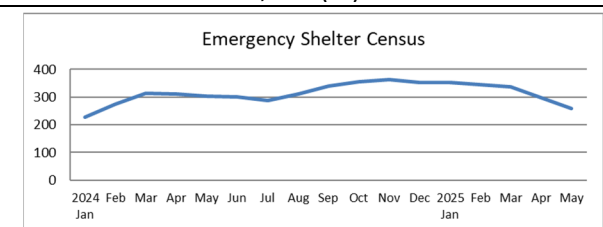
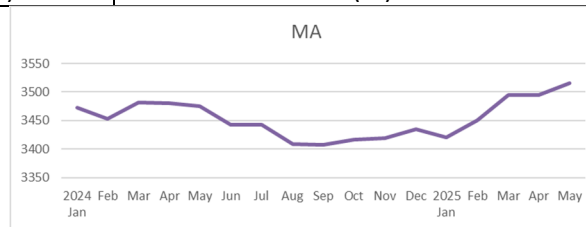
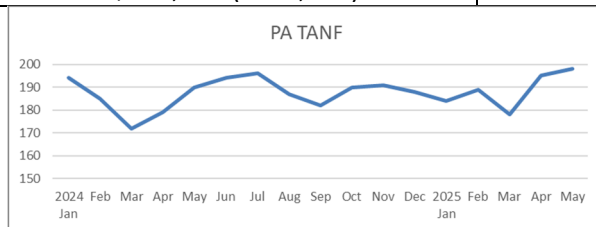
**Department of Social Services (DSS): For more information on our report or to request assistance with benefits: (845) 292-0100**

**Public Assistance Program Highlights:**

- The Heating Equipment Repair and Replacement Benefit (HERR) and The Clean and Tune Benefit both closed May 9, 2025.
- Rental Supplement Program Update: As of May 30, 2025, the state 2025-2026 RSP of \$240,957.00 has been utilized in its entirety requiring a wait list to be created. Out of the \$250,00.00 County RSP as of May 30, 2025 there was \$83,452.11 left. Our temporary housing population is the focus of the remaining funds for them to gain permanent housing.

Public Assistance Cases (as of 5/31/2025)				
Temp. Assistance to Needy Families	Safety Net	Food Stamps	Medical Assistance	MA/Supplemental Security Income
198(+3)	287 (+5)	6165 (-11)	3515(+20)	2431 (-7)
Homelessness Snapshot (as of 5/31/2025)				
Code Blue	Quarantined	Adults / Children	Sex Offenders	Emergency Shelter Census
0(no change)	0	192/66 (-19/-22)	25 (+2)	258 (-41)

Fraud Investigations (as of 5/31/2025)						
Collections	Cases Active	Cases Referred	Completed	Arrests	Pending arrests	Burials
\$8545.28 (-5499.79)	244 (-6)	43 (-30)	49 (-1)	3 (+3)	3 (-1)	7 approved (+5) for \$11,435.00 costs (-\$1,150.00)
Child Support Enforcement Cases (as of 5/31/2025)						
Collections	Petitions Filed	Paternity Establishments	Total Cases			
\$838,071 (+153,524)	23 (-5)	14 (-6)	2,706 (-1)			



ADULT SERVICES UNIT	2024 TOTAL	2025 YTD	2025 MAY
<b>PERSONAL CARE AIDES</b>			
CASES OPENED	31	10	1
CASES CLOSED	18	8	1
# CASES (AVG.)	34	35.88	36
<b>PERS</b>			
# CASES (AVG.)	0	0	0
<b>APS REFERRALS</b>			
16A Neglect/Abuse	30	7	2
16B Neglects Own Basic Needs	67	26	5
16B Untreated Medical Conditions	36	19	2
16B Self-endangering Behaviors	21	5	1
16B Unable to Manage Finances	47	16	5
16B Environmental Hazards	38	10	1
Undetermined	7	14	0
<b>APS</b>			
CASES OPENED	245	97	16
CASES CLOSED	238	115	19
# CASES (AVG.)	153	146.56	146
<b>GUARDIANSHIPS</b>			
OPEN	38	42	3
<b>REP PAYEE</b>			
OPEN	108	108	2

CHILD WELFARE CASE LIFECYCLE MANAGEMENT DASHBOARD													
	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	
<b>EOM STATISTICS (Based on last day of month totals)</b>													<b>AVERAGE</b>
Overdue 7-day Safety Assessments (INV)	2	1	<1	0	0								0.75
Overdue 7-day Safety Assessments (FAR)	1	1	<1	0	<1								0.666666667
Overdue Case Closures (INV)	103	56	52	28	30								53.8
Overdue Case Closures (FAR)	45	22	21	9	14								22.2
PREV Referral Timeliness days	8	3	9	6	6								6.4
<b>QUARTERLY INTERNAL COMPLIANCE AUDITS (GREEN INDICATORS = ≥85% Effective, YELLOW = 75%-84%, RED = ≤74%)</b>													<b>AVERAGE</b>
INV Progress Notes	74%			81%									0.775
FAR Progress Notes		86%			80%								0.83
PREV Progress Notes		56%			65%								0.605
Foster Progress Notes			65%										0.65
PREV Case Contact Rate ≥ 2 per month	35%			75%									0.55
Foster Case Contact Rate ≥ 1 per month		75%			85%								0.8
Supervisor Case Conferences		12%			55%								0.335
LSRs Submitted Timely			100%										1
Annual LODs Reviewed Timely			0%										0
<b>HOTLINE SOURCES</b>													<b>ANNUAL TOTAL</b>
School	55	36	50	33	66								240
Immediate Family	10	12	8	10	11								51
Extended Family	6	6	7	7	6								32
Hospital	6	12	12	10	12								52
Other Medical Provider	10	6	2	9	9								36
Law Enforcement	9	16	21	12	16								74
DSS Internal	4	7	10	12	6								39
Other	4	17	24	13	15								73
last day of March there were only 37 over due closures in inv													
last day of May - 15 overdue INVClosures and 10 FAR overdue closures													



**Public Health**  
Prevent. Promote. Protect.

For more information on our report: (845) 292-5910, [sullivan.ny.us/Departments/PublicHealth](https://sullivan.ny.us/Departments/PublicHealth)

**CHHA: Certified Home Health Agency**

- Ongoing need for physical therapists
- All Survey plan of correction deliverables have been completed ahead of schedule
- 3 PCA recerts and 1 PRI were completed

Goal / Area of Focus	Key Performance Indicators	Update / Progress																																													
Increase daily census of the CHHA Program to ensure consistent enrollment, maximize resource utilization, and support the growing demand for home health professionals.	<ul style="list-style-type: none"><li>Average daily census (ADC)</li></ul>	<ul style="list-style-type: none"><li><b>ADC: 159</b></li></ul>																																													
Increase the number of new patient admissions through enhanced referral partnerships, physician outreach, and digital marketing strategies.	<ul style="list-style-type: none"><li># of referrals<ul style="list-style-type: none"><li>Referral Conversion Rate (RCR) (referrals → admissions); Target RCR: <b>40-60%</b></li></ul></li><li># of new patients</li><li># of discharges</li></ul>	<ul style="list-style-type: none"><li><b># of referrals: 99</b></li><li><b>RCR: 70%</b></li><li>new patients: 69</li><li>discharges: 84</li></ul>																																													
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"><li># of staff for all CHHA positions</li><li>Staff Productivity<ul style="list-style-type: none"><li># of visits by type:<ul style="list-style-type: none"><li>RN- Registered Nurse</li><li>PT- Physical Therapy</li><li>OT- Occupational Therapy</li><li>ST- Speech Therapy</li><li>MSW- Master Social Work Visit</li><li>HHA- Home Health Aid Visit</li></ul></li></ul></li></ul>	<table><tr><th>Field Staffing</th><th>full-time</th><th>perdiem</th><th>contract</th><th>total</th></tr><tr><td>RN</td><td>9</td><td>3</td><td></td><td>12</td></tr><tr><td>LPN</td><td>1</td><td></td><td></td><td>1</td></tr><tr><td>PT</td><td>3</td><td>1</td><td>1</td><td>5</td></tr><tr><td>PTA</td><td>2</td><td></td><td></td><td>2</td></tr><tr><td>OT</td><td>3</td><td></td><td></td><td>3</td></tr><tr><td>ST</td><td>1</td><td></td><td></td><td>1</td></tr><tr><td>MSW</td><td>1</td><td></td><td></td><td>1</td></tr><tr><td>total</td><td></td><td></td><td></td><td>25</td></tr></table> <ul style="list-style-type: none"><li><b>Staff Productivity: 4.96</b></li><li>See table 1 below</li></ul>	Field Staffing	full-time	perdiem	contract	total	RN	9	3		12	LPN	1			1	PT	3	1	1	5	PTA	2			2	OT	3			3	ST	1			1	MSW	1			1	total				25
Field Staffing	full-time	perdiem	contract	total																																											
RN	9	3		12																																											
LPN	1			1																																											
PT	3	1	1	5																																											
PTA	2			2																																											
OT	3			3																																											
ST	1			1																																											
MSW	1			1																																											
total				25																																											

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

**Maternal Child Health (MCH)**

- Of 5 NTUC 3 unable to locate, 2 refused
- Diagnosis include: 4 Pos tox (THC and cocaine); 1 STI; 1 pediatric anemia; 2 at risk pregnancies; 2 post-partum; 1 sickle cell; 2 children with feeding tubes; 1 trisomy 21; 2 newborn assessment.
- MCH nurses are reaching completion of CLC training; Team build new relationship with New Hope Manor; Plans to provide 2x weekly outreach to Sun River; Working on outreach to Crystal Run Health

CHHA Monthly Data*							
	2024 Total	January	February	March	April	May	2025 YTD
Staff Productivity		5.06	4.89	4.92	4.87	4.96	4.94
New Patients*	1120	122	102	96	94	69	414
Discharges*	1104	108	99	98	98	84	403
RN/LPN Visits*	6267	577	462	565	604	516	2208
PT/PTA Visits	8424	763	612	651	624	654	2650
OT Visits*	2353	160	157	241	228	257	786
ST Visits*	854	77	72	54	57	76	260
MSW Visits*	680	54	54	54	54	47	216
HHA Visits*	497	84	77	77	56	78	294
Total Visits	21,299	1715	1434	1642	1623	1628	6414

Goal / Area of Focus	Key Performance Indicators	Update / Progress								
Increase and maintain the daily census of the MCH Program to ensure consistent enrollment, maximize resource utilization, and support the growing demand for home healthcare professionals.	<ul style="list-style-type: none"><li>Average daily census (ADC)</li></ul>	<ul style="list-style-type: none"><li><b>ADC: 29</b></li></ul>								
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"><li>Staff Productivity</li></ul>	<ul style="list-style-type: none"><li><b>Staff Productivity: 4.5</b></li></ul>								
Increase the number of new patient admissions through enhanced referral partnerships, physician outreach, and digital marketing strategies.	<ul style="list-style-type: none"><li># of referrals<ul style="list-style-type: none"><li>Referral Conversion Rate (RCR); Target RCR: <b>40-60%</b></li></ul></li><li>Referral Source (see table 3)<ul style="list-style-type: none"><li>Garnet (Middletown, Catskill, Doctors), Healthy Families, DSS, Sun River Health, Optum/Crystal Run</li></ul></li></ul>	<ul style="list-style-type: none"><li><b># referrals: 16</b></li><li><b>RCR: 69%</b></li></ul>								
Monitor the number of newborn screenings and ensure screenings are completed within 24-48hrs of birth.	<ul style="list-style-type: none"><li># newborn screenings</li><li>% completed within 24-48hrs of birth</li></ul>	<ul style="list-style-type: none"><li><b>1 newborn screening</b></li></ul>								
Maintain Full Staffing	<ul style="list-style-type: none"><li># of staff for all MCH positions</li></ul>	<table><tr><th colspan="2">Field Staffing</th></tr><tr><td>RN</td><td>1</td></tr><tr><td>LPN</td><td>1</td></tr><tr><td>total</td><td>2</td></tr></table>	Field Staffing		RN	1	LPN	1	total	2
Field Staffing										
RN	1									
LPN	1									
total	2									

Table 3: 2025 MCH Referrals												
	January	February	March	April	May	2025 YTD						
Garnet Health - Catskill	2	12	3	2	3	22	Crystal Run Health Care		1		1	2
Garnet Health - Middletown	1	2	1	2		6	Sun River	5	3	3		11
Elizabeth Seton Children's Center					1	1	WCMC OB			1		1
DSI					1	1	Middletown Medical					0
Maria Fareri Children's Hospital					2	2	AHAVA					0
WIC			1			1	Cornerstone					0
Garnet Health Doctors		1				1	El/CYSHCN			2	1	3
St. Luke's						0	Healthy Families	1	2	1	1	5
Blythedale Children's Hospital	1					1	CPS/DFS	3	4	2	5	19
							Bilingual Outreach	3				3
							MCH/CHHA Nurse			2	1	3
							Roscoe School			1		1
							Total				16	83

### Healthy Families

- 1 of 3 field staff were on FMLA leave for the month
- Arly joined our team on 5/19/25

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"><li># of enrolled families (capacity = 60)</li><li>Total of 150 home visits expected per month.<ul style="list-style-type: none"><li>Target completed home visits: <b>85%</b></li></ul></li></ul>	<ul style="list-style-type: none"><li><b># of enrolled families: 37</b></li><li><b>74%</b> completed home visits (97 out of 131)</li></ul>								
Increase the number of new patient admissions through enhanced referral partnerships, physician outreach, and digital marketing strategies.	<ul style="list-style-type: none"><li># of referrals</li><li># of assessments completed (Frogs)</li><li># of referrals agreed to services and registered</li><li>Referral Conversion Rate (RCR); Target RCR: <b>17%</b></li></ul>	<ul style="list-style-type: none"><li><b># of referrals: 2</b></li><li><b># of Frogs: 0</b></li><li><b># agreed to services and registered: 2</b></li><li><b>RCR: 50%</b></li></ul>								
Maintain Full Staffing	<ul style="list-style-type: none"><li># of staff for all HF positions</li></ul>	<table><tr><td><b>Staffing</b></td><td></td></tr><tr><td>FSW</td><td>2</td></tr><tr><td>Bilingual FSW</td><td>1</td></tr><tr><td>total</td><td><b>3</b></td></tr></table>	<b>Staffing</b>		FSW	2	Bilingual FSW	1	total	<b>3</b>
<b>Staffing</b>										
FSW	2									
Bilingual FSW	1									
total	<b>3</b>									

<b>Table 4: 2025 HF Referrals</b>						
	January	February	March	April	May	2025 YTD
Garnet Health - Catskill				1	2	10
Garnet Health - Middletown						
Garnet Health Doctors						1
St. Luke's						
Blythedale Children's Hospital						
Crystal Run Health Care						
Sun River				2		8
Middletown Medical						
AHAVA						
Cornerstone						
Healthy Families						3
CPD/DFS				2	2	5
SC DPH Outreach/CHW						2
WIC				1		4
Doula						1
Self Referral						1
MCH Nurses				2		3
					4	38

#### **Children and Youth with Special Healthcare Needs / Early Intervention**

- We are working on an accessibility grant that would give the community more access. This includes beach and trail friendly wheelchairs.
- We have increased numbers for the CYSHCN numbers and have scheduled events such as a sensory friendly movie night and back to school advocacy.
- Assisting G&D to ensure they have a facility to house their program for the 2025-2026 school year.

<b>Goal / Area of Focus</b>	<b>Key Performance Indicators</b>	<b>Update / Progress</b>
Ensure that initial CPSE evaluations are completed within 60 calendar days of referral.	<ul style="list-style-type: none"> <li># of active cases</li> </ul>	<ul style="list-style-type: none"> <li><b># of active cases: 309</b></li> <li>↑ 12 from previous month</li> </ul>

Complete initial EI evaluation and develop Individualized Family Service Plans (IFSPs) within 45 days of referral.	<ul style="list-style-type: none"> <li># of active cases</li> <li># of referrals received</li> </ul>	<ul style="list-style-type: none"> <li># of active cases: <b>159</b></li> <li># of referrals received: <b>18</b> <ul style="list-style-type: none"> <li>↓12 from previous month</li> </ul> </li> </ul>
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"> <li>EI OSC caseload</li> </ul>	<ul style="list-style-type: none"> <li>EL OSC caseload: <b>37</b></li> </ul>

#### Health Education / Rural Health Network

- spring fitness series has picked up attendance
- tick removal & Lyme disease education @ farmers markets are a BIG hit
- World No Tobacco day gave us opportunity for expanding kits - smoking cessation kits coming soon

Goal / Area of Focus	Key Performance Indicators	Update / Progress
<b>Workplace Wellness</b>	<ul style="list-style-type: none"> <li># of workplace wellness events</li> <li># of employee participants</li> <li>Topics covered</li> </ul>	<ul style="list-style-type: none"> <li># of events: 1</li> <li># of participants: 6</li> <li>Topics covered: walking club</li> </ul>
<b>Outreach/Education/Rural Health Network</b>	<ul style="list-style-type: none"> <li># of educational workshops <ul style="list-style-type: none"> <li># of participants</li> </ul> </li> <li># of outreach events <ul style="list-style-type: none"> <li># directly related to RHN</li> </ul> </li> <li># of social media posts</li> <li># of PH kits distributed</li> </ul>	<ul style="list-style-type: none"> <li># of educational workshops: 17, Total # of participants: 141</li> <li># of outreach events: 34, # directly related to RHN: 17</li> <li># of social media posts: 50 <ul style="list-style-type: none"> <li>Top 3 post topics (most engagement): Turtle/Road Safety, Help Lines Awareness, National Nurse Month</li> </ul> </li> <li># of PH kits distributed, Education: 214, Vending machines: 132 <ul style="list-style-type: none"> <li>See table 7 for detail</li> </ul> </li> </ul>
<b>Narcan Training</b>	<ul style="list-style-type: none"> <li># of Narcan trainings <ul style="list-style-type: none"> <li># of participants</li> </ul> </li> <li># of 1-on-1 Narcan trainings</li> </ul>	<ul style="list-style-type: none"> <li># of Narcan trainings: 1 <ul style="list-style-type: none"> <li># of participants: 17</li> </ul> </li> <li># of 1-on-1 Narcan trainings: 12</li> <li>Total # trained: 30</li> </ul>
<b>Community Health Workers (CHW)</b>	<ul style="list-style-type: none"> <li># of CHW visits</li> <li># of referrals provided</li> <li>Top 3 identified needs</li> </ul>	<ul style="list-style-type: none"> <li># of CHW visits: 21</li> <li># of referrals provided: 0</li> <li>Top 3 identified needs: 1. information Literacy 2. Food Pantry locations 3. Calling providers to schedule appointments, service lines still default to English option only</li> </ul>

Table 7: Public Health Kit Distribution		
Description	Vending Machines	Education/Outreach
Dental Hygiene ADULT	18	9
Dental Hygiene KIDS	16	24
Emergency Preparedness Kit	15	5
Deterra ( Mini)	1	N/A
Deterra ( Large)	2	N/A
Hygiene Kit	16	17
Sexual Health Kit	14	3
Tick Removal Kit	11	84
Overdose Rescue Kit	N/A	36
Men's Health Kit	10	0
Women's Health Kits	5	2
Mental Health Kits	2	24
Wound Care Kit	22	10
Total	132	214

Table 8: 2025 CHW Referrals	May	2025 YTD
Healthy Families	2	18
MCH	16	33
DSS	0	0
CHHA	3	7
Catholic Charities	1	0
Crystal Run Health Care	0	0
Sun River	0	0
Middletown Medical	0	0
AHAVA	0	0
Cornerstone	0	0
Pack n Play	1	0
CPD/DFS	0	0
SC DPH Outreach/CHW	2	10
Lead	0	0
TB	0	0
Car seat	6	8
Community Svcs	0	2
Other :		
Total	21	78

### Training & Quality

- 1. Welcome email from TQ to new employees with required orientation training info
- 2. Copay collection policy and procedure in progress w/ CHHA and Fiscal
- 3. Lunch and learn for staff planned for July

Goal / Area of Focus	Key Performance Indicators	Update / Progress
Staff education	<ul style="list-style-type: none"> <li># staff trainings offered</li> <li>Topics covered</li> <li># of participants</li> </ul>	<ul style="list-style-type: none"> <li># staff trainings offered: 2</li> <li>Topics covered: <ul style="list-style-type: none"> <li>Health Literacy Training Challenge: 6</li> <li>Trauma and Mental Health in Older Adults webinar: 0</li> </ul> </li> </ul>
Quality	<ul style="list-style-type: none"> <li>Ongoing analysis of existing policies, updates, and creation of new.</li> </ul>	<ul style="list-style-type: none"> <li>Email Signature policy reminder to all staff</li> <li>County Vehicle Policy, Public Health- passed HSAB, now active</li> <li>Respite Policy, EI- Completed, awaiting official approval</li> <li>CHHA Plan of Corrections policies/procedures completed: Patient complaint, Emergency Prep, TB testing for CHHA staff</li> <li>Monthly DSI On Call Log audits in effect</li> </ul>

### Disease Surveillance and Investigation and Emergency Preparedness

- DSI presented at the Sullivan 180 staff meeting, and we're hoping to establish a collaborative community outreach partnership.
- Lead Education: 5/1, 5/2, 5/9: Presented Lead education materials, in person, to 10 medical provider offices. I also brought all of them the rabies tri-fold and the SCDPH animal bite reporting form.
- Lead Education: 5/18 Callicoon Farmers Market, 5/31 Kauneonga Lake – this education focused on homeowners and understanding the risks of lead exposure when living in and/or working on renovating older homes.

<b>Goal / Area of Focus</b>	<b>Key Performance Indicators</b>	<b>Update / Progress</b>
<b>Immunization Program</b>	<ul style="list-style-type: none"> <li># of Immunization Quality Improvement Program (IQIP) visits performed</li> </ul>	<ul style="list-style-type: none"> <li># of IQIP visits performed: 0</li> </ul>
<b>Rabies</b>	<ul style="list-style-type: none"> <li># of rabies post exposure prophylactic (PEP) in county</li> <li># of animal bites</li> <li># animals tested</li> <li># of animals + for rabies</li> </ul>	<ul style="list-style-type: none"> <li># of rabies PEP in county: <b>3</b></li> <li># of animal bites: 31 (Domestic: <b>28</b>, Wildlife: <b>3</b>)</li> <li># animals tested: 2 (Domestic: <b>2</b>, Wildlife: <b>0</b>)</li> <li># of animals + for rabies: 0</li> </ul>
<b>Emergency Preparedness</b>	<ul style="list-style-type: none"> <li># of training meetings</li> </ul>	<ul style="list-style-type: none"> <li># of training meetings: <b>7</b></li> </ul>
<b>Lead</b>	<ul style="list-style-type: none"> <li>Total labs drawn</li> <li>Lead Education</li> <li># of Positive cases</li> </ul>	<ul style="list-style-type: none"> <li>Total labs drawn: <b>121</b></li> <li>Lead Education: <b>16</b></li> <li># of Positive cases: <b>0</b></li> </ul>
<b>Sexually Transmitted Infections (STI)</b>	<ul style="list-style-type: none"> <li># of lab reported cases</li> <li># of health care provider follow-up for + labs</li> <li># of confirmed disease type:</li> <li># of rapid HIV tests completed</li> <li># of referrals made for HIV related services</li> </ul>	<ul style="list-style-type: none"> <li># of lab reported cases: <b>20</b></li> <li># of health care provider follow-up: <b>46</b></li> <li># of rapid HIV tests: <b>1</b></li> <li># of referrals made for HIV related services: <b>0</b></li> <li>See table 4 for disease type</li> </ul>
<b>Hepatitis</b>	<ul style="list-style-type: none"> <li># of lab reported cases</li> <li># of health care provider follow-up for + labs</li> <li># of confirmed disease type:</li> </ul>	<ul style="list-style-type: none"> <li># of lab reported cases: <b>20</b> <ul style="list-style-type: none"> <li>↓ 1 previous month</li> </ul> </li> <li>See table 5 for disease type</li> </ul>
<b>Tuberculosis (TB)</b>	<ul style="list-style-type: none"> <li># of active TB cases</li> <li># of latent tuberculosis infection (LTBI) case follow-ups</li> <li># of suspected TB cases</li> <li># of non-clinical home visits</li> <li># of clinical/DOT home visits</li> </ul>	<ul style="list-style-type: none"> <li># of active TB cases: <b>0</b></li> <li># of LTBI follow-up cases: <b>26</b></li> <li># of suspected TB cases: <b>7</b></li> <li># of non-clinical home visits: 17</li> <li># of clinical/DOT home visits: <b>30</b></li> </ul>
<b>Reportable Diseases</b>	<ul style="list-style-type: none"> <li># of lab reported cases</li> <li># of health care provider follow-up for + labs</li> <li># of confirmed disease type (varies monthly)</li> </ul>	<ul style="list-style-type: none"> <li># of lab reported cases: <b>221</b> <ul style="list-style-type: none"> <li>↓ 224 from previous month</li> </ul> </li> <li>See table 6 for disease type</li> </ul>
<b>Total COVID &amp; Other</b>	<ul style="list-style-type: none"> <li># of lab reported cases</li> </ul>	<ul style="list-style-type: none"> <li># of lab reported cases: <b>44</b> <ul style="list-style-type: none"> <li>↓ 103 from previous month</li> </ul> </li> </ul>

Sexually Transmitted Diseases (STDs)  
Query Limits Selected Returned: 20 Records  
Tabular Analysis of Disease  
Created By the Communicable Disease Electronic Surveillance System

Disease	Total
CHLAMYDIA	11
GONORRHEA, UNCOMPLICATED	6
SYPHILIS, EARLY, NON-PRIMARY/SECONDARY	1
SYPHILIS, SECONDARY	1
SYPHILIS, UNKNOWN DURATION OR LATE	1
Total	20

Table 4

Table 6

General Communicable  
Query Limits Selected Returned: 221 Records  
Tabular Analysis of Disease  
Created By the Communicable Disease Electronic Surveillance System

Disease	Total
ANAPLASMOSIS, ANAPLASMA PHAGOCYTOPHILUM	5
BABESIOSIS	1
CAMPYLOBACTERIOSIS	1
COVID-19	44
CRE	1
GIARDIASIS	1
HERPES INF, INFANT =< 60 DAYS	1
INFLUENZA, A	4
INFLUENZA, B	10
LYME DISEASE	147
RSV UNSPECIFIED	2
SALMONELLOSIS	1
STREP GROUP B, INVASIVE	2
VARICELLA	1
Total	221

Social Services (7 Positions Vacant, 181 Authorized, 3.87% Vacancy Rate)	
Account Clerk/Database, #3050	Posted
Case Supervisor, #140	One vacancy recently filled, this position will be filled by promotion
Caseworker #3017	Posted (HELP/Continuous)
Sr. Account Clerk/Database, #2688	Posted
Sr. Caseworker #3154	Vacancy due to recent promotion
SWE, #295, #448	One vacancy due to recent promotion. Posted (HELP program) – Interviewing

Hepatitis  
Query Limits Selected Returned: 18 Records  
Tabular Analysis of Disease  
Created By the Communicable Disease Electronic Surveillance System

Disease	Total
HEPATITIS B, CHRONIC	2
HEPATITIS B, NEGATIVE	1
HEPATITIS C CHRONIC	9
HEPATITIS C, ACUTE	1
HEPATITIS C, NEGATIVE	5
Total	18

Table 5

Staffing Update: Position Title & No.	Notes
<b>Community Services (7 Positions Vacant, 48 Authorized, 14.58% Vacant)</b>	
Addiction Services Counselor II, #3413	Approved to fill
Assistant Social Worker II, #369	
CIT/Crisis Mental Hygiene Coordinator, #3722	
Community Services Peer Court Navigator, #3709	
Database Clerk, #3300	Approved to fill
Staff Social Worker I, #0130, #2267	Interviewing
<b>Public Health (20 Positions Vacant, 72 Authorized, 27.78% Vacant)</b>	
Community Health Nurse, #2185	
Financial Account Clerk, #3593	OMB for PH
Principal Account Clerk, #3592, #22	
Public Health Educator, #1636, #2986	Posted
PH Nurse, CHHA #2729, #3419, #2784PD	
Public Health Occupational Therapist, #3340(PD)	Posted
Public Health Physical Therapist, #3667 (PD), #3555	
Registered Nurse, CHHA #747, #2875, #2502, #2782(PD), Core #2373, D&T #607 (PT), #3634 (PD)	
Supervising Comm Health Nurse, #148	