


County of Jefferson
Office of the County Administrator

Historic Courthouse
195 Arsenal Street, 2nd Floor
Watertown, NY 13601-2567
Phone: (315) 785-3075 Fax: (315) 785-5070



June 22, 2017

TO: Members of Health & Human Services

FROM: Robert F. Hagemann, III, County Administrator 

SUBJECT: Health & Human Services Committee Agenda

Please let this correspondence serve as notification that the Health & Human Services Committee will meet on ***Tuesday, June 27, 2017 at 5:30 p.m.*** in the Board of Legislators' Chambers. Following is a list of agenda items for the meeting:

Resolutions:

1. Authorizing Agreements with NYS Department of Education Approved Agencies for the Provision of Special Education Services for Preschool Children with Disabilities
2. Authorizing Agreements and Establishing Rates for Provision of Related Services in Connection with the Program for Preschool Children with Disabilities
3. Amending the 2017 County Budget Relative to Children's Home of Jefferson County and Authorizing Agreements in Relation Thereto
4. Accepting Funding in Connection with NYSDOH Local Health Department Performance Incentive Initiative and Amending the 2017 County Budget in Relation Thereto

Informational Items:

1. Monthly Departmental Reports:
 - Office for Aging
 - Community Services
 - Public Health
 - Veterans Service Agency

If any Committee Member has inquiries regarding agenda items, or would like to add an item(s) please do not hesitate to contact me.

RFH:jdj

cc: Office for Aging
Community Services
Public Health
Social Services

Veterans Service Agency
County Attorney
County Treasurer

JEFFERSON COUNTY BOARD OF LEGISLATORS
Resolution No. _____

Authorizing Agreements with NYS Department of Education Approved Agencies
for the Provision of Special Education Services for Preschool Children with Disabilities

By Legislator: _____

Whereas, New York State Education Law requires that municipalities enter into agreements with agencies approved by the NYS Commissioner of Education to offer special education services to preschool children with disabilities who are determined by the Board of Education of local school districts to require placement in such special education programs, and

Whereas, The New York State Commissioner of Education has approved a number of providers of services and has set rates for all special education program services, and

Whereas, In conjunction with the operation of the Special Education Services for Preschool Children with Disabilities program, it is necessary to enter into contracts with approved services providers at said established rates.

Now, Therefore, Be It Resolved, Pursuant to Section 4410 of the New York State Education Law, Jefferson County is hereby authorized to enter into agreements for the term July 1, 2017 through June 30, 2018, for the provision of special education services to children ages three through five with disabilities with the following New York State Education Department approved service providers:

<u>Provider</u>	<u>Service</u>
Benchmark Family Services	Evaluations Integrated Special Education Classroom Special Education Itinerant Teaching
Building Blocks SLP, OT & PT Family Services, PLLC	Evaluations Special Education Itinerant Teaching
Jefferson Rehabilitation Center	Evaluations Integrated Special Education Classroom Special Education Itinerant Teaching
Milestones Children's Center	Evaluations Special Education Itinerant Teaching

and be it further

Resolved, That the need for such special education services is to be determined by local School Boards of Education, at rates established by the NYS Commissioner of Education as certified by the Director of the Budget of the State of New York, and shall be in a form and contain such terms and conditions as may be acceptable to the NYS Commissioner of Education, and be it further

Resolved, That the Chairman of the Board of Legislators and the Director of Community Services are hereby authorized and directed to execute such agreements on behalf of Jefferson County, subject to approval by the County Attorney as to form and substance, and be it further

Resolved, That the Director of Community Services is hereby directed to send a letter notifying local School Boards of Education of the rates of each of the special education service providers and the percentage of local share of such cost.

Seconded by Legislator: _____

State of New York)
) ss.:
County of Jefferson)

I, the undersigned, Clerk of the Board of Legislators of the County of Jefferson, New York, do hereby certify that I have compared the foregoing copy of Resolution No. _____ of the Board of Legislators of said County of Jefferson with the original thereof on file in my office and duly adopted by said Board at a meeting of said Board on the _____ day of _____, 20____ and that the same is a true and correct copy of such Resolution and the whole thereof.

In testimony whereof, I have hereunto set my hand and affixed the seal of said County this _____ day of _____, 20 ____.

Clerk of the Board of Legislators

JEFFERSON COUNTY BOARD OF LEGISLATORS

Resolution No. _____

Authorizing Agreements and Establishing Rates for Provision of Related Services
in Connection with the Program for Preschool Children with Disabilities

By Legislator: _____

Whereas, The Program for Preschool Children with Disabilities provides a variety of related services to children aged three to five years with certain disabilities, such services to be provided in the least restrictive environment, be it home or agency based, and

Whereas, Chapter 243 of the Laws of 1989 require that counties maintain a list of appropriately certified or licensed professionals to deliver related services to preschool children with disabilities and set a reasonable reimbursement rate for such services, subject to the approval of the New York State Education Department.

Now, Therefore, Be It Resolved, That, pursuant to Section 4410 of the Education Law, Jefferson County enter into an agreement with each of the following parties for the provision of the indicated service(s). The term of said agreement shall be for the period July 1, 2017 through June 30, 2018 in accordance with the requirements of the State Education Law and regulations:

<u>Provider</u>	<u>Service</u>
Benchmark Family Services	Speech Therapy Physical Therapy Occupational Therapy
Building Blocks SLP, OT & PT Family Services, PLLC	Speech Therapy Physical Therapy Occupational Therapy
Jefferson Rehabilitation Center	Speech Therapy Physical Therapy Occupational Therapy
Special Programs, Inc. D.B.A. Little Lukes Childcare Center	Speech Therapy Physical Therapy Occupational Therapy
The Rowland Center, Inc.	Speech Therapy Physical Therapy Occupational Therapy

and be it further

Resolved, That the rates of payment for Preschool Related Services by a Speech Pathologist, Occupational Therapist and Physical Therapist are hereby established as follows:

	On-site	Off-site
Individual Up to 59 Minutes	\$ 34.00	\$ 59.00
Individual Over 60 Minutes	\$ 49.00	\$ 73.00
Group Up to 59 Minutes	\$ 25.00	\$ 39.00
Group Over 60 Minutes	\$ 39.00	\$ 54.00

and be it further

Resolved, That the rates of payment for Preschool Related Services by Certified Occupational Therapy and Licensed Physical Therapy Assistants are hereby established as follows:

	On-site	Off-site
Up to 59 min.	\$ 25.00	\$ 39.00
Over 60 min.	\$ 34.00	\$ 47.00
Group Up to 59 Minutes	\$ 22.00	\$ 34.00
Group Over 60 Minutes	\$ 31.00	\$ 44.00

and be it further

Resolved, That the Chairman of the Board of Legislators is hereby authorized to execute such agreements on behalf of Jefferson County, and be it further

Resolved, That the Director of Community Services is hereby authorized and directed to take such steps and execute such documents as may be necessary to secure approval of the rates established herein by the New York State Education Department.

Seconded by Legislator: _____

State of New York)
) ss.:
County of Jefferson)

I, the undersigned, Clerk of the Board of Legislators of the County of Jefferson, New York, do hereby certify that I have compared the foregoing copy of Resolution No. _____ of the Board of Legislators of said County of Jefferson with the original thereof on file in my office and duly adopted by said Board at a meeting of said Board on the _____ day of _____, 20____ and that the same is a true and correct copy of such Resolution and the whole thereof.

In testimony whereof, I have hereunto set my hand and affixed the seal of said County this _____ day of _____, 20 ____.

Clerk of the Board of Legislators

JEFFERSON COUNTY BOARD OF LEGISLATORS
Resolution No. _____

Amending the 2017 County Budget Relative to Children's Home of Jefferson County
and Authorizing Agreements in Relation Thereto

By Legislator: _____

Whereas, The NYS Office of Mental Health provided additional 2017 State Aid for the Children's Home of Jefferson County to support 2.5 full time equivalent (FTE) children's school-community liaison positions, and 1 FTE Non-Medicaid case manager, and

Whereas, This allocation is intended to reduce in-patient hospitalizations and ensure continuity of care, and

Whereas, The 2017 County Budget needs to be amended to recognize the additional revenue, and

Whereas, Authorization for local contracts for services to be obtained as needed to establish the various functions of this new funding is necessary.

Now, Therefore, Be It Resolved, That the 2017 County Budget is hereby amended as follows:

Increase:

Revenue		
01431000 93490	State Aid - Mental Health	\$116,667
Expenditure		
01432000 04732	Children's Home - Jeff. Co.	\$116,667

and be it further

Resolved, That the Board of Legislators does hereby grant its approval for the Community Services Board to enter into any necessary agreements/amended agreements with the agencies for provision of these services.

Seconded by Legislator: _____

JEFFERSON COUNTY BOARD OF LEGISLATORS

Resolution No. _____

Accepting Funding in Connection with NYSDOH Local Health Department Performance
Incentive Initiative and Amending the 2017 County Budget in Relation Thereto

By Legislator: _____

Whereas, The Jefferson County Public Health Service – Preventive Services unit has been recognized by the New York State Department of Health for High Standards of Communicable Disease Reporting Measures, and

Whereas, The Jefferson County Public Health Service is eligible to receive an incentive award for this achievement, and

Whereas, The clinic is in need of e-mail encryption, additional training, tick removal kits, and N-95 masks and fitting equipment, which are accepted uses of the award to support costs associated with Article 6 eligible services.

Now, Therefore, Be It Resolved That Jefferson County hereby accepts the incentive award funding, and the 2017 County Budget is hereby amended as follows:

Increase:

Revenue

01405000 93401	State Aid Public Health	\$19,000
----------------	-------------------------	----------

Expenditure:

01405100 041143	Software Maintenance	\$2,100
01405100 04415	Advertising	3,400
01405100 04613	Training	2,000
01405100 04510	Medical Supplies	8,000
01405100 04313	Travel	1,500
01405100 04430	Vaccines	2,000

Seconded by Legislator: _____

State of New York)
) ss.:
County of Jefferson)

I, the undersigned, Clerk of the Board of Legislators of the County of Jefferson, New York, do hereby certify that I have compared the foregoing copy of Resolution No. _____ of the Board of Legislators of said County of Jefferson with the original thereof on file in my office and duly adopted by said Board at a meeting of said Board on the _____ day of _____, 20____ and that the same is a true and correct copy of such Resolution and the whole thereof.

In testimony whereof, I have hereunto set my hand and affixed the seal of said County this _____ day of _____, 20 ____.

Clerk of the Board of Legislators



JEFFERSON COUNTY OFFICE FOR THE AGING

175 ARSENAL STREET
WATERTOWN, NEW YORK 13601-2529
(315)785-3191
Fax (315)785-5095

Timothy Ruetten, MS, LMHC, CASAC
Director

LOUISE J. HARACZKA
Deputy Director

Office for the Aging Monthly Report to The Health and Human Services Committee June, 2017

May, 2017 Data:

Total No. of Home Delivered Meals Provided:	10012
Total No. of Congregate Meals Served:	1734
Total No. of Clients Receiving Meals:	652
Number of Clients Receiving Home Care/Case Mgt.:	100
Number of Individuals Receiving Health Insurance Counseling:	78
Number of Clients Coming Directly Into the Office:	68
Number of NY Connects Contacts:	200

Remarks:

May 3rd – last CDSMP class with 6 participants

May 8th – Estate Planning Seminar – Clayton Harbor Hotel – 55 people in attendance, spoke about NY Connects and OFA services.

May 10th – Annual Senior Expo – Salmon Run Mall, NY Connects and OFA display - apx. 200 in attendance

May 23rd – Impossible Dream Thrift Shop – Watertown, NY Connects and OFA display – 10 people stopped by.

May 31st – Impossible Dream Thrift Shop – Watertown, NY Connects and OFA display – 15 people stopped by.

2017 COMMUNITY SERVICES OFFICE EXPENSE/REVENUE REPORT

6/8/2017

<u>PROGRAM</u>	<u>JAN</u>	<u>FEB</u>	<u>MAR</u>	<u>APR</u>	<u>MAY</u>	<u>JUNE</u>	<u>JULY</u>	<u>AUG</u>	<u>SEPT</u>	<u>OCT</u>	<u>NOV</u>	<u>DEC</u>	<u>TOTALS Y-T-D</u>	<u>TOTAL BUDGET</u>	<u>BALANCE AVAILABLE</u>	<u>% USED</u>
EARLY INTERV.																
EXPENSES	\$0	\$7,515	\$29,834	\$37,803	\$9,166								\$84,318	\$440,000	\$355,682	19.16%
REVENUES	\$0	\$1,106	\$952	\$1,750	\$34,484								\$38,292	\$244,000	\$205,708	15.69%
PRESCHOOL																
EXPENSES	\$0	\$85,724	\$410,422	\$296,521	\$579,294								\$1,371,961	\$5,400,000	\$4,028,039	25.41%
REVENUES	\$0	\$0	\$0	\$0	\$0								\$0	\$3,093,000	\$3,093,000	0.00%
OPWDD																
EXPENSES	\$0	\$0	\$0	\$0	\$0								\$0	\$18,440	\$18,440	0.00%
REVENUES	\$1,560	\$0	\$0	\$0	\$1,560								\$3,120	\$6,919	\$3,799	45.09%
OASAS																
EXPENSES	\$315,702	\$98,518	\$281,509	\$336,705	\$115,357								\$1,147,791	\$2,682,766	\$1,534,975	42.76%
REVENUES	\$464,773	\$165,893	\$387,650	\$0	\$235,893								\$1,254,209	\$2,494,070	\$1,239,861	50.29%
OMH																
EXPENSES	\$253,690	\$66,699	\$62,032	\$95,475	\$192,314								\$670,210	\$2,597,743	\$1,927,533	25.80%
REVENUES	\$654,450	\$0	\$46,250	\$457,075	\$151,127								\$1,308,902	\$2,344,433	\$1,035,531	55.83%
TOTAL EXPENSES	\$569,392	\$258,456	\$783,797	\$766,504	\$896,131	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$3,274,280	\$11,138,949	\$7,864,669	29.39%
TOTAL REVENUES	\$1,120,783	\$166,999	\$434,852	\$458,825	\$423,064	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$2,604,523	\$8,182,422	\$5,577,899	31.83%

OPWDD= OFFICE OF PEOPLE WITH DEVELOPMENTAL DISABILITIES
OASAS= OFFICE OF ALCOHOL AND SUBSTANCE ABUSE SERVICES

OMH= OFFICE OF MENTAL HEALTH

**Jefferson County Public Health Service Home Health Care Statistical Performance
For the Five Months Ended May 31, 2017**

A										B									
REFERRALS										AVERAGE DAILY CENSUS									
2014	2015	2016	MTD Actual	YTD Actual	2017 Annualized	Amount of Change	Percent Change			2014	2015	2016	MTD Actual	YTD Actual	2017 Annualized	Amount of Change	Percent Change		
CHHA	2,264	1,655	1,669	169	803	1,927	258	15.47%		CHHA	222	186	216	211	219	219	3	1.40%	
LTHHCP	106	72	4	0	0	0	-4	-100.00%		LTHHCP	84	67	6	0	0	0	-6	-8.96%	
PREVENT	371	219	142	0	0	0	-142	-100.00%		PREVENT	31	21	15	2	9	9	-6	-30.48%	
Rabies	0	0	0	0	0	0	0	0.00%		Rabies	0	0	0	0	0	0	0	0.00%	
Communicable Disease	1,866	2,180	2,899	280	1,694	4,066	1,167	40.24%		PREVENT Sub-TOTAL	31	21	15	2	9	9	-6	-30.48%	
Newborn Screening	28	12	9	0	2	5	-4	-46.67%											
PREVENT Sub-TOTAL	2,265	2,411	3,050	280	1,696	4,070	1,020	33.46%											
GRAND TOTAL	4,635	4,138	4,723	449	2,499	5,998	1,275	26.99%		GRAND TOTAL	338	274	237	213	227	227	-10	-4.14%	
VISITS										PARAPROFESSIONAL HOURS*									
2014	2015	2016	MTD Actual	YTD Actual	2017 Annualized	Amount of Change	Percent Change			2014	2015	2016	MTD Actual	YTD Actual	2017 Annualized	Amount of Change	Percent Change		
CHHA	16,004	12,499	12,850	1,100	5,612	13,469	619	4.82%		AGENCY CHHA									
Skilled Nursing	2,562	2,103	3,267	308	1,470	3,528	261	7.99%		Home Health Aide	3,451	2,782	3,828	247	1,179	2,830	-998	-26.08%	
Speech Therapy	0	51	83	13	60	144	61	73.49%		Personal Care Aide	0	0	602	42	115	276	-326	-54.15%	
Medical Social Worker	361	304	547	57	230	552	5	0.91%		CHHA Sub-TOTAL	3,451	2,782	4,430	289	1,294	3,106	-1,324	-29.90%	
Occupational Therapy	743	675	713	53	217	521	-192	-26.96%		AGENCY LTHHCP									
Nutrition	207	139	157	17	62	149	-8	-5.22%		Home Health Aide	1,006	1,186	89	0	0	0	-89	-100.00%	
Home Health Aide	6,711	5,155	7,691	482	2,533	6,079	-1,612	-20.96%		Personal Care Aide	1,060	1,143	295	0	0	0	-295	-100.00%	
Personal Care Aide	0	0	2,465	133	699	1,678	-787	-31.94%		LTHHCP Sub-TOTAL	2,066	2,329	384	0	0	0	-384	-100.00%	
Sub-TOTAL	26,588	20,926	27,773	2,163	10,883	26,119	-1,654	-5.95%		TOTAL AGENCY	5,517	5,111	4,814	289	1,294	3,106	-1,708	-35.49%	
LTHHCP										CONTRACT CHHA									
Skilled Nursing	2,736	2,402	180	0	0	0	-180	-100.00%		Home Health Aide									
Physical Therapy	84	72	1	0	0	0	-1	-100.00%		Caregivers	2,816	2,565	7,493	282	2,310	5,544	-1,949	-26.01%	
Speech Therapy	0	2	0	0	0	0	0	0.00%		US CARE SYSTEMS	0	0	322	47	159	382	60	18.51%	
Medical Social Worker	137	155	9	0	0	0	-9	-100.00%		Family Home Care	720	181	0	0	0	0	0	0.00%	
Occupational Therapy	13	30	0	0	0	0	0	0.00%		Home Care Plus (Sibley)	1,847	834	0	0	0	0	0	0.00%	
Nutrition	8	13	2	0	0	0	-2	-100.00%		Sub-TOTAL	5,383	3,580	7,815	329	2,469	5,926	-1,889	-24.18%	
Home Health Aide	3,331	2,131	372	0	0	0	-372	-100.00%		Personal Care Aide									
Housekeeper	38	60	0	0	0	0	0	0.00%		Caregivers	0	0	2,774	79	738	1,771	-1,003	-36.15%	
Personal Care Aide	11,466	9,411	1,599	0	0	0	-1,599	-100.00%		US CARE SYSTEMS	0	0	475	69	382	917	442	93.01%	
Sub-TOTAL	17,813	14,276	2,163	0	0	0	-2,163	-100.00%		Sub-TOTAL	0	0	3,249	148	1,120	2,688	-561	-17.27%	
CHHA & LTHHCP Sub-TOTAL	44,401	35,202	29,936	2,163	10,883	26,119	-3,817	-12.75%		CONTRACT LTHHCP									
PREVENT										Home Health Aide									
Skilled Nursing	954	437	540	1	10	24	-516	-95.56%		Caregivers	3,187	1,367	284	0	0	0	-284	-100.00%	
Physical Therapy	0	0	0	0	0	0	0	0.00%		US CARE SYSTEMS	0	0	0	0	0	0	0	0.00%	
Speech Therapy	0	0	0	0	0	0	0	0.00%		Family Home Care	68	113	0	0	0	0	0	0.00%	
Medical Social Worker	6	0	27	0	0	0	-27	-100.00%		Home Care Plus (Sibley)	139	32	0	0	0	0	0	0.00%	
Occupational Therapy	0	0	0	0	0	0	0	0.00%		Sub-TOTAL	3,394	1,512	284	0	0	0	-284	-100.00%	
Nutrition	1	7	0	0	0	0	0	0.00%		Personal Care Aide									
Home Health Aide	0	0	0	0	0	0	0	0.00%		Caregivers	14,741	13,869	2,630	0	0	0	-2,630	-100.00%	
Personal Care Aide	0	0	0	0	0	0	0	0.00%		US CARE SYSTEMS	0	0	19	0	0	0	-19	-100.00%	
Sub-TOTAL	961	444	567	1	10	24	-543	-95.77%		Family Home Care	2,287	1,281	0	0	0	0	0	0.00%	
TOTAL VISITS										Home Care Plus (Sibley)	4,787	3,804	0	0	0	0	0	0.00%	
Skilled Nursing	19,694	15,338	13,570	1,101	5,622	13,493	-77	-0.57%		Sub-TOTAL	21,815	18,954	2,649	0	0	0	-2,649	-100.00%	
Physical Therapy	2,646	2,175	3,268	308	1,470	3,528	260	7.96%		Housekeeper									
Speech Therapy	0	53	83	13	60	144	61	73.49%		Caregivers	0	59	0	0	0	0	0	0.00%	
Medical Social Worker	504	459	583	57	230	552	-31	-5.32%		US CARE SYSTEMS	0	0	0	0	0	0	0	0.00%	
Occupational Therapy	756	705	713	53	217	521	-192	-26.96%		Family Home Care	2	0	0	0	0	0	0	0.00%	
Nutrition	216	159	159	17	62	149	-10	-6.42%		Home Care Plus (Sibley)	61	56	0	0	0	0	0	0.00%	
Home Health Aide	10,042	7,286	8,063	482	2,533	6,079	-1,984	-24.60%		Sub-TOTAL	63	115	0	0	0	0	0	0.00%	
Housekeeper	38	60	0	0	0	0	0	0.00%		LTHHCP Sub-TOTAL	25,272	20,581	2,933	0	0	0	-2,933	-100.00%	
Personal Care Aide	11,466	9,411	4,064	133	699	1,678	-2,386	-58.72%		TOTAL CONTRACT	30,655	24,161	13,997	477	3,589	8,614	-5,383	-38.46%	
GRAND TOTAL	45,362	35,646	30,503	2,164	10,893	26,143	-4,360	-14.29%		TOTAL HOURS									
										Home Health Aide	13,234	9,060	12,016	576	3,648	8,755	-3,261	-27.14%	
										Personal Care Aide	22,875	20,097	6,795	148	1,235	2,964	-3,831	-56.38%	
										Housekeeper	63	115	0	0	0	0	0	0.00%	
										GRAND TOTAL	36,172	29,272	18,811	724	4,883	11,719	-7,092	-37.70%	

*Numbers may not total precisely due to rounding.

VETERANS SERVICE AGENCY

MAY 2017 MONTHLY REPORT

Month	Personal Contacts	Tel/Mail Contacts	Total Contacts	Total Services	New Claims	Maintained Claims
January	57	698	755	1829	24	24
February	115	655	770	1944	28	19
March	79	680	759	1780	30	16
Sub Total	251	2033	2284	5553	82	59
April	90	571	661	1702	21	10
May	125	628	753	1913	28	18
June						
Sub Total						
July						
August						
September						
Sub Total						
October						
November						
December						
Sub Total						
GRAND TOTAL						

*Contact: Personal visit, phone call, or mail received or sent to/from VSA

*Service: Amount of assistance provided for each contact

Comments: The VSA manned a table at the Senior Expo, sponsored by OFA, at the Salmon Run Mall on 5/10 and the Director served as 1 of the 3 judges for the Armed Forces Day parade in Watertown on 5/20. The May 2017 Total Contact and Total Services figures are higher than May 2016 and the New/Maintained Claim total is exactly the same as last year. These figures demonstrate the VSA provides a wide array of services other than just compensation.