

Office of the County Administrator
Historic Courthouse
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Watertown, New York 13601-2567
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Ryan Piche
County Administrator

Dylan Soper
Deputy County Administrator



January 23, 2026

TO: Members of Health & Human Services Committee

FROM: Ryan Piche, 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, January 27, 2026 at 6:00 p.m.*** in the Board of Legislators' Chambers.

Following is a list of agenda items for the meeting:

Presentation:

Committee Goals – Ryan Piche, County Administrator

Resolutions:

1. Adopting the 2026 Strategic Priorities for the Health and Human Services Committee
2. Authorizing an Agreement for the Provision of Caregiver Services Program to Provide for Music Therapy for Older Adults Who Receive Respite Services
3. Authorizing an Agreement with G.R.O. Energy Solutions LLC of Jefferson County for Provision of Home Modification Program Services
4. Authorizing an Agreement for Provision of Legal Services for the Elderly of Jefferson County
5. Authorizing an Agreement for Provision of Personal Emergency Response Systems Funding with the Henry Keep Home
6. Authorizing Agreements for Provision of Personal Care Services to Elderly of Jefferson County
7. Authorizing Agreements for Provision of Transportation Services to Elderly of Jefferson County

8. Authorizing an Amended Agreement with the Home Care Association of New York State and Iroquois Healthcare Association Related to Additional Funding for the Community Medicine and Paramedicine Programs
9. Authorizing an Agreement in Connection with New York State Department of Health County Emergency Medical Services Support Grant and Amending the 2026 County Budget in Relation Thereto
10. Authorizing Funding in Connection with New York State Department of Health Local Health Department Performance Incentive Initiative and Amending the 2026 County Budget in Relation Thereto
11. Expressing Support for New York Hiring for Emergency Limited Placement Statewide Program
12. Appointing Member to the Jefferson County Public Health Service Professional Advisory Committee

Informational Items:

1. Monthly Department Reports:
 - Office for the Aging
 - Public Health
 - Veterans Service Agency

If any Committee Member has inquiries regarding agenda items, please do not hesitate to contact me.

RP:jdj

c:	Office for the Aging	Veterans Service Agency
	Community Services	County Attorney
	Public Health/EMS/Medical Examiner	County Treasurer
	Social Services	

JEFFERSON COUNTY BOARD OF LEGISLATORS
Resolution No. _____

Adopting the 2026 Strategic Priorities for the Health and Human Services Committee

By Legislator: _____

Whereas, The Jefferson County Board of Legislators recognizes the importance of setting clear, ambitious priorities to guide the work of its standing committees and ensure effective service delivery and resource management.

Whereas, The Health and Human Services Committee has reviewed and recommended its priorities for 2026 to provide a strategic focus for its efforts while allowing flexibility to address emerging issues, and

Now, Therefore, Be It Resolved, That the Jefferson County Board of Legislators hereby adopts the following 2026 strategic priorities for the Health and Human Services Committee:

1. Improve security conditions at Human Services Building in concert with capital improvements.
2. Continue to track and support homeless initiatives.
3. Conduct and begin executing results of a comprehensive housing study.
4. Execute customer service training across forward-facing county offices.
5. Solve medical examiner vacancy and reduce coroner transportation costs.
6. Launch Lead Rental Registry program for the City of Watertown.
7. Support Public Health Department in its pursuit of public health accreditation.
8. Support the Department of Social Services efforts to improve performance metrics.

Resolved, That this resolution shall take effect immediately upon its adoption.

Seconded by Legislator: _____

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

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 an Agreement for the Provision of Caregiver Services Program to Provide for Music
Therapy for Older Adults Receiving Respite Services

By Legislator: _____

Whereas, By Resolution No. 207 of 2024 and Resolution No. 53 of 2025 the Board of Legislators approved a contract for the provision of music therapy with Memcara for the CareSuite Program under Homemaker Services for caregivers of older adults and Respite Haven Program for the period of January 1, 2024, through December 31, 2024, and January 1, 2025, through December 31, 2025, and

Whereas, Music therapy is structured to promote memory recall, stimulate imagination and encourage physical movement and interaction for seniors experiencing memory loss, cognitive decline, dementia and Alzheimer's, and

Whereas, The Office for the Aging Director recommends that this contract be renewed for the period of January 1, 2026, through December 31, 2026.

Now, Therefore, Be It Resolved, That the Chairman of the Board of Legislators be and is hereby authorized to execute such agreement with Memcara for music therapy, at a cost not to exceed \$10,800 on behalf of Jefferson County for the period of January 1, 2026, through December 31, 2026, with the approval of the County Attorney as to form and content

Seconded by Legislator: _____

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

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 an Agreement with G.R.O. Energy Solutions, LLC of Jefferson County for
Provision of Home Modification Program Services

By Legislator: _____

Whereas, The Jefferson County Office for the Aging works for the establishment and expansion of programs and services which assist older adults in the areas of their most urgent need, and

Whereas, There exists a demand for handyman services to support the Home Modification Program, which can aid older adults in maintaining independence in the home, and

Whereas, G.R.O. Energy Solutions, LLC has proposed to provide handyman services for a rate of \$97 per hour, plus materials.

Now, Therefore, Be It Resolved, That pursuant to Section 95-a of the General Municipal Law, the Chairman of the Board of Legislators is hereby authorized to execute an agreement with G.R.O. Energy Solutions, LLC for handyman services for the Home Modification Program at a cost of \$97 per hour plus cost of materials, for the period of January 1, 2026, through December 31, 2026, subject to approval of the County Attorney as to form and content.

Seconded by Legislator: _____

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

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 an Agreement for Provision of Legal Services for the Elderly of Jefferson County

By Legislator: _____

Whereas, By Resolution No. 66 of 2024, The Board of Legislators authorized an agreement for the provision of legal services for persons 60 years of age or older for the period January 1, 2024, through December 31, 2025, and

Whereas, The Director of the Office for the Aging recommends renewal of the agreement for provision of said legal services for the period of January 1, 2026, through December 31, 2027, at a cost not to exceed \$25,000 annually.

Now, Therefore, Be It Resolved, That pursuant to Section 95-a of the General Municipal Law, Jefferson County enter into an agreement with Legal Aid Society of Mid-New York for legal services for the elderly, at a cost not to exceed \$25,000 for the period of January 1, 2026, through December 31, 2027, and be it further

Resolved, That the Chairman of the Board of Legislators is hereby authorized to execute said agreement on behalf of Jefferson County, subject to the approval by the County as to form and content.

Seconded by Legislator: _____

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

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 an Agreement for Provision of Personal Emergency Response Systems Funding
with the Henry Keep Home

By Legislator: _____

Whereas, By Resolution No. 65 of 2024, The Board of Legislators authorized an agreement to provide Personal Emergency Response Systems (PERS) with funding through Henry Keep Home for the period of January 1, 2024, through December 31, 2025, and

Whereas, The Henry Keep Home is willing to continue funding at the rate of \$1700 per month, so as to provide PERS to up to 100 eligible individuals monthly, representing an increase of 50 additionally served older adults per month.

Now, Therefore, Be It Resolved, That Jefferson County enter into an agreement with the Henry Keep Home for Personal Emergency Response Systems for the period of January 1, 2026, through December 31, 2027, at the funding rate of \$1700 per month, and be it further

Resolved, That the Chairman of the Board of Legislators is hereby authorized to execute said agreement on behalf of Jefferson County, subject to approval by the County Attorney as to form and content.

Seconded by Legislator: _____

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

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 for Provision of Personal Care Services to Elderly of Jefferson County

By Legislator: _____

Whereas, By Resolution No. 63 of 2024, The Board of Legislators authorized agreements for personal care services to the elderly of Jefferson County, and

Whereas, The Jefferson County Office for the Aging (OFA) is eligible to receive State and Federal funds for the purpose of providing needed programs and services to elderly residents of Jefferson County, and

Whereas, The OFA and The Board of Legislators desire to contract for the provision of personal care services to the elderly for 2026 and 2027.

Now, Therefore, Be It Resolved, That pursuant to Section 95-a of the General Municipal Law, Jefferson County enter into agreements for 2026 and 2027 with the below listed parties for the provision of personal care services to elderly residents of Jefferson County for such consideration as follows:

Personal Care Services

Homemakers of Western, NY, Inc. aka Caregivers, Buffalo, NY at the blended rate of \$33.00 per hour for the period of January 1, 2026, through December 31, 2027, for the provision of housekeeper/chore, personal care and respite for persons 60 years of age or older,

US Care Systems, Utica, NY at a rate of \$36.00 per hour for PC1 and \$37.00 per hour for PC2 for the period of January 1, 2026, through December 31, 2027, for the provision of housekeeper/chore, personal care and respite services for persons 60 years of age or older,

Seniors Helping Seniors, Watertown, NY at a blended hourly rate of \$37.75 per hour for the period of January 1, 2026, through December 31, 2027, for the provision of housekeeping/chore, personal care and caregiver respite services for persons 60 years of age or older, and be it further

Resolved, That the Chairman of the Board of Legislators is hereby authorized to execute said agreements on behalf of Jefferson County, subject to the approval of the County Attorney as to form and content.

Seconded by Legislator: _____

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

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 for Provision of Transportation Services to Elderly of Jefferson County

By Legislator: _____

Whereas, The Jefferson County Office for the Aging works for the establishment and expansion of programs and services which assist older persons in the areas of their most urgent needs, and

Whereas, The Office for the Aging is eligible to receive State and Federal funds for the purpose of providing needed programs and services to elderly residents of Jefferson County, and

Whereas, The Office for the Aging and the Board of Legislators desire to contract for the provision of certain programs and services to the elderly.

Now, Therefore, Be It Resolved, That pursuant to Section 95-a of the General Municipal Law, Jefferson County enter into agreements for various periods with the below listed parties for the provision of such programs and services to elderly residents of Jefferson County and for such consideration as follows:

Transportation Services:

The Volunteer Transportation Center of Jefferson County, for the provision of transportation services for persons 60 years of age or older; for the period January 1, 2026, through December 31, 2026, for consideration for services not to exceed \$55,000 annually,

Wilna-Champion Transportation Center, Inc., Carthage, New York for the provision of transportation services for persons 60 years of age or older; for the period January 1, 2026, through December 31, 2026, for consideration for services not to exceed \$20,000 annually,

Paynter Senior Center, Inc., Clayton, New York for the provision of transportation services for persons 60 years of age or older; for the period January 1, 2026, through December 31, 2026, for consideration for services not to exceed \$10,800 annually, and be it further

Resolved, That the Chairman of the Board is hereby authorized to execute said agreements on behalf of Jefferson County, subject to the approval of the County Attorney as to form and content.

Seconded by Legislator: _____

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

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 an Amended Agreement with the Home Care Association of New York State and Iroquois Healthcare Association Related to Additional Funding for the Community Medicine and Paramedicine Programs

By Legislator: _____

Whereas, By Resolution No. 254 of 2022, Resolution No. 108 of 2023, Resolution Nos. 71, 72, and 283 of 2024, and Resolution No. 139 of 2025, The Board of Legislators authorized and amended agreements with the Home Care Association of New York State and Iroquois Healthcare Association for Jefferson County to pilot a community medicine and paramedicine program with grant funds received from the Mother Cabrini Health Foundation, and

Whereas, The Jefferson County Public Health Service has been notified of additional funding in the amount of \$145,000 to cover expenses January 1, 2026, through December 31, 2026, and

Whereas, The 2026 funding was budgeted as part of the 2026 County Budget.

Now, Therefore, Be It Resolved, That Jefferson County hereby accepts the funding award and the Chairman of the Board of Legislators is hereby authorized to execute an amended agreement with the New York State Home Care Association and the Iroquois Healthcare Association for the Community Medicine and Paramedicine Program for the period of January 1, 2026, through December 31, 2026, subject to approval by the County Attorney as to form and content.

Seconded by Legislator: _____

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

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 an Agreement in Connection with New York State Department of Health County
Emergency Medical Services Support Grant and Amending the 2026 County Budget in Relation
Thereto

By Legislator: _____

Whereas, The New York State Department of Health (NYSDOH) has identified that Emergency Medical Service (EMS) systems of care are in crisis statewide due to rising costs and high demand for increasingly complex services, yet are without the resources, flexibility, or statutory authority to address these issues independently nor easily develop county-wide or publicly funded EMS programs, and

Whereas, The goal of the County Emergency Medical Services Support Grant is to strengthen current EMS systems of care throughout New York State, and

Whereas, The Jefferson County Public Health Service (JCPHS) has applied for and received a one-time funding award in the amount of \$499,997 from the NYSDOH to strengthen EMS systems of care in Jefferson County for the period of July 1, 2025, through March 31, 2026, and

Whereas, The JCPHS will utilize funding to work with ambulance agencies throughout Jefferson County to strengthen the current system by establishing an Advanced Life Support intercept and specialty response program based at Samaritan Medical Center to serve the entire county, and bariatric emergency response capacities, geographically based at Guilfoyle Emergency Medical Services, Thousand Island Emergency Rescue Squad, Carthage Area Rescue Squad, and South Jefferson Rescue Squad, which together will serve the entire county, and

Whereas, The JCPHS will additionally facilitate application of a county-wide Certificate of Need (CON) so that agencies can receive payment for the ALS intercept and bariatric emergency response calls, as well as all other mutual aid responses, which are all unbillable without the CON, and

Whereas, \$300,000 of the funding was planned for and budgeted as part of the 2026 County Budget.

Now, Therefore, Be It Resolved, That Jefferson County hereby accepts said funding and authorizes the Chairman of the Board of Legislators to execute such agreement on behalf of Jefferson County, subject to the approval of the County Attorney as to form and content, and be it further

Resolved, That the 2026 County Budget is hereby amended as follows:

Increase:

Revenue

01405000 93452	State Aid PH – Other Grants	\$199,997
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Expenditures

01405700 04416	Professional Fees	\$ 63,797
01405700 02100	Equipment	136,200

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 Funding in Connection with New York State Department of Health Local Health
Department Performance Incentive Initiative and Amending the 2026 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 public health emergency preparedness related to extreme weather and climate, and

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

Whereas, The Department plans to use the funds to support costs associated with New York State Public Health Law Article 6 eligible services for disease prevention and population health activities.

Now, Therefore, Be It Resolved, That Jefferson County hereby accepts the incentive award funding, and the 2026 County Budget is hereby amended as follows:

Increase:

Revenue		
01405000 93401	State Aid Public Health	\$23,084

Expenditure:		
01405100 04416	Professional Fees	\$ 8,084
01405100 04510	Medical Supplies	5,000
01405100 04585	Operating Supplies	10,000

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 BOARD OF LEGISLATORS
Resolution No. _____

Expressing Support for the New York Hiring for Emergency Limited Placement Statewide Program and Urging Further Reforms to New York State Civil Service Law

By Legislator: _____

Whereas, In May 2024, New York State Civil Service launched an expanded program, New York Hiring for Emergency Limited Placement Statewide Program (NY HELPS) to streamline the appointment process and allow State agencies to hire diverse, qualified permanent employees quickly and without examinations, and

Whereas, As a result of the persistent hiring challenges of public employers, the Program temporarily waives the requirement for civil service exams for specific titles allowing agencies to quickly fill critical positions to address staffing shortages and facilitate the appointment of qualified permanent employees based on qualifications and interviews, and

Whereas, Jefferson County received approval to utilize the Program in late Fall of 2025 for the titles of Caseworker, Social Welfare Examiner, and Community Service Worker to address critical personnel needs within the Department of Social Services (DSS), and

Whereas, Since such approval DSS has received a total of 200 applications for the three titles and has been able to hire seven Caseworkers, sixteen Social Welfare Examiners, and seven Community Service Workers, with more hires expected in January, and

Whereas, The Program has allowed the County the flexibility to evaluate all applications and individuals based on the best qualifications and skill set for the positions, instead of being restricted to a few applicants on a civil service list, and

Whereas, These critical positions that Jefferson County has struggled to fill for years are now planned to be filled within the first quarter of 2026.

Now, Therefore, Be It Resolved, That the Jefferson County Board of Legislators expresses its support for the NY HELPS Program and urges New York State to further examine Civil Service Law and enact permanent and additional reforms to enable agencies to use best practices in hiring well qualified and talented employees who may otherwise have been stalled or discouraged through current process and practices, and be it further

Resolved, That a certified copy of this resolution be sent to New York State Governor Kathy Hochul, Senator Mark Walczyk, Assemblyman Ken Blankenbush, Assemblyman Scott Gray, and Assemblyman Will Barclay.

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. _____

Appointing Member to the Jefferson County Public Health Service
Professional Advisory Committee

By Legislator: _____

Resolved, That the following individual be and is hereby appointed as a member of the Professional Advisory Committee for term to expire as indicated below:

Member

Term to Expire

New Appointment
Jennifer Bleam

12/31/2029

Seconded by Legislator: _____

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

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

Office for the Aging 2025

* *

Units of Service and Client Statistics	Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec	Totals
Meals Home Delivered & Congregate (4716)													
Clients (at 25th of the month)	421	412	415	414	414	402	405	408	420	430	423	446	5,010
Home Delivered Meals (MLTC & congregate)	9,267	9,252	9,634	10,064	10,022	9,574	10,592	10,315	10,505	11,460	10,092	12,140	122,917
Congregate Meals (approx 75 clients at 7 sites)	581	524	579	542	509	501	508	436	407	423	354	393	5,757
Picnic Meals (C1 Congregate)	0	0	0	0	0	0	475	0	0	0	0	0	475
Shelf Stable Distributed	0	0	0	2,400	0	0	0	0	0	2,280	0	1,720	6,400
Emergency Frozen / Adjustment	0	0	0	0	0	0	0	0	0	0	0	0	0
Total Delivered Meals	9,848	9,776	10,213	13,006	10,531	10,075	11,575	10,751	10,912	14,163	10,446	14,253	135,549
Transportation (4710)													
Total Transportation Rides	1,151	1,020	1,099	1,156	1,138	1,146	1,171	1,134	1,159	1,266	1,009	1,206	13,655
Caregiving- Housekeeping & Personal Care (4422)													
Total Caregiving Clients	32	40	48	39	41	41	50	49	49	48	47	46	530
Total Caregiving Hours	401.00	569.50	501.75	476.25	504.75	528.50	688.75	724.50	823.50	792.50	680.75	762.25	7,454
Respite for Caregivers (4605)													
Total Respite Clients	14	14	20	33	31	36	26	26	30	26	22	35	313
Total Respite Hours	375.75	534.50	520.50	858.00	698.55	705.50	382.75	592.25	577.25	567.75	508.75	431.50	6,753
Respite Haven (Not Alzheimer's) (4605)													
Total Respite Clients	1	1	1	2	4	9	7	5	4	5	9	3	51
Total Respite Hours	40.00	32.00	32.00	43.00	74.00	192.25	294.50	46.75	73.25	115.75	67.00	63.75	1,074
PERS Lifenet Units (4715)													
# of Clients with PERS Units	85	93	95	96	101	102	102	103	106	109	106	103	1,201
Legal Services (4411)0													
# of Clients Served	4	5	5	4	1	7	9	12	16	17	19	23	122
Hours of Service	12.2	41.40	34.20	36.50	7.00	13.90	18.70	38.70	39.20	33.00	7.90	18.00	301
Disease Prevention & Health Promotion (4416/4414)													
Tai-Chi for Arthritis Clients	9	10	0	14	10	0	0	0	0	0	0	0	43
Nascentia MLTC (Reimbursement for MLTC meals) (91972)													
# of clients	18	18	19	19	22	21	22	23	21	20	20	17	240
# of meals	393	331	364	420	493	464	526	457	399	431	348	438	5,064
NY Connects Information & Referrals													
Information & Assistance for the month	116	91	119	108	106	149	139	142	154	127	112	95	1,458
Service Tickets for the month (quick call or referral)	975	868	922	955	928	1,062	1,208	950	1,272	1,370	1,132	1,263	12,905
Health Insurance Information & Counseling													
# of Clients Served	88	59	45	47	45	36	42	36	94	157	194	123	966
Counseling Sessions	88	67	67	65	60	14	70	44	103	198	239	151	1,166
Case Management Clients													
Pers Units only - no cm required	70	77	77	79	86	87	90	92	95	98	95	93	1,039
Alz Respite Sessions - no cm required	53	58	59	71	91	106	95	98	96	101	81	67	976
CM clients requiring bimonthly call/annual asmt	83	98	101	108	110	167	129	135	137	150	189	158	1,565
CM clients requiring semiannual asmt	83	98	101	108	110	167	129	135	137	150	189	158	1,565
CM Home Delivered meals requiring semiannual asmt	421	412	415	414	414	402	405	408	420	430	423	446	5,010
Total Case Managed Clients	710	743	753	780	811	929	848	868	885	929	977	922	10,155
													0
Home Care & PERS Waiting List Clients	46	63	28	33	28	33	44	51	75	66	62	61	590

**Jefferson County Public Health Service Monthly Statistical Performance
For the Twelve Months Ended December 31, 2025 - Pending**

CERTIFIED HOME HEALTH AGENCY

REFERRALS				MTD	YTD	2025	Amount of	Percent
	2022	2023	2024	Actual	Actual	Annualized	Change	Change
CHHA	1,126	1,188	1,454	148	1,592	1,592	138	9.49%
AVERAGE DAILY CENSUS				MTD	YTD	2025	Amount of	Percent
	2022	2023	2024	Actual	Actual	Annualized	Change	Change
CHHA	98	93	95	117	120	120	25	26.32%
VISITS				MTD	YTD	2025	Amount of	Percent
	2022	2023	2024	Actual	Actual	Annualized	Change	Change
CHHA	6,128	5,393	5,686	633	7,215	7,215	1,529	26.89%
Skilled Nursing	3,943	3,718	3,322	214	3,108	3,108	-214	-6.44%
Physical Therapy	0	0	0	11	13	13	13	0.00%
Speech Therapy	466	528	454	41	502	502	48	10.57%
Medical Social Worker	830	846	723	108	915	915	192	26.56%
Occupational Therapy	117	107	80	13	83	83	3	3.75%
Nutrition	745	963	873	55	896	896	23	2.63%
Home Health Aide	12,229	11,555	11,138	1,075	12,732	12,732	1,594	14.31%
Sub-TOTAL								
PREVENT	3	2	9	2	11	11	2	22.22%
Skilled Nursing								
TOTAL VISITS	6,131	5,395	5,695	635	7,226	7,226	1,531	26.88%
Skilled Nursing	3,943	3,718	3,322	214	3,108	3,108	-214	-6.44%
Physical Therapy	0	0	0	11	13	13	13	0.00%
Speech Therapy	466	528	454	41	502	502	48	10.57%
Medical Social Worker	830	846	723	108	915	915	192	26.56%
Occupational Therapy	117	107	80	13	83	83	3	3.75%
Nutrition	745	963	873	55	896	896	23	2.63%
Home Health Aide	12,232	11,557	11,147	1,077	12,743	12,743	1,596	14.32%
GRAND TOTAL								
PARAPROFESSIONAL HOURS				MTD	YTD	2025	Amount of	Percent
	2022	2023	2024	Actual	Actual	Annualized	Change	Change
CHHA	753	996	877	55	896	896	19	2.17%
Home Health Aide								

MOBILE INTEGRATED HEALTH - COMMUNITY PARAMEDICINE

INDICATORS				MTD	YTD	2025	Amount of	Percent
	2022	2023	2024	Actual	Actual	Annualized	Change	Change
Cases	8	74	72		62	62	-10	-13.89%
Average Daily Census (MIH Cases not on CHHA)	0.1	15	29	36	37	37	8	27.59%
Visits	48	1,013	1,274	143	1,720	1,720	446	35.01%

PREVENTIVE SERVICES

CASES				MTD	YTD	2025	Amount of	Percent
	2022	2023	2024	Actual	Actual	Annualized	Change	Change
PREVENT	20,919	7,058	7,354	1,412	7,935	7,935	581	7.90%
Communicable Disease	3,119	1,115	1,519	62	1,515	1,515	-4	-0.26%
Immunizations	159	140	142	12	130	130	-12	-8.45%
PPDs								
Childhood Lead Poison Prevention Program+ *								
Screens	2,624	2,999	2,805		2,596	2,596	-209	-7.45%
Tests with blood lead levels 5+	125	248	242		147	147	-95	-39.26%
Newborn Screening	27	24	27	5	26	26	-1	-3.70%
PREVENT TOTAL	26,973	11,584	12,089	1,491	12,349	12,349	260	2.15%

*CLPPP data will be reported in quarters (M, J, S, D).

MEDICAL EXAMINER

INDICATORS				MTD	YTD	2025	Amount of	Percent
	2022	2023	2024	Actual	Actual	Annualized	Change	Change
Cases	200	198	178	11	168	168	-10	-5.62%
Scene Investigations	29	15	16	0	8	8	-8	-50.00%
Autopsies	102	115	97	7	89	89	-8	-8.25%
Overdose Poisonings	25	29	22		12	12	-10	-45.45%
Pending Toxicology Confirmation	0	0	0	3				

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VETERANS SERVICE AGENCY

OCTOBER 2025 (09/23/2025- 10/29/2025) MONTHLY REPORT

Month	Personal Contacts	Tel/Mail Contacts	Total Contacts	Total Services	New Claims	Maintained Claims
Dec 2024 & Jan 2025	153	512	665	1425	65	17
February	78	398	476	1079	52	17
March	70	317	387	906	43	10
Sub Total	301	1227	1528	3410	160	44
April	82	397	479	1100	52	7
May	70	296	366	860	43	12
June	105	403	508	1165	56	19
Sub Total	257	1096	1353	3125	151	38
July	114	265	379	841	54	13
August	95	407	502	1124	56	13
September	-	-	-	-	-	-
Sub Total	209	607	881	1965	110	26
October	84	78	173	411	22	12
November	53	60	113	202	10	5
December	68	72	140	208	15	4
Sub Total	205	210	426	821	47	21
GRAND TOTAL	972	3140	4188	9321	468	47

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

*Service: Amount of assistance provided for each contact

COMMENTS: We recently attended the NYS American Legion Mid-Winter Conference in Albany where the topic of discussion was both the NYS Veterans Property Tax Exemption and the Department of NY American Legions decision to close the last remaining Regional Officer Representative.

For 2025 YTD we have helped Veterans and their families with claims that brought over \$1.45MIL of new money into Jefferson and Lewis Counties. There are still about 70 percent of the 2025 claims outstanding.