



Health & Human Services Committee

Committee Meeting

60 Central Ave.
Cortland, NY 13045
<https://www.cortlandcountyny.gov>

~ Minutes ~

Thursday, April 11, 2024

11:00 AM

Room 302

Call to Order

The meeting was called to order at 11:20 AM by Committee Chair Ronald J. Van Dee

Attendee Name	Organization	Title	Status	Arrived
Christopher Newell	Cortland County, NY	Committee Member	Present	
Douglas Bentley	Cortland County, NY	Committee Member	Present	
Ronald J. Van Dee	Cortland County, NY	Committee Chair	Present	
Cathy Bischoff	Cortland County, NY	Committee Member	Present	
William McGovern	Cortland County, NY	Committee Member	Present	
Reed Cleland	Cortland County, NY	Committee Member	Present	
Keith VanGorder	Cortland County, NY	Committee Vice-Chair	Present	
Kevin Fitch	Cortland County, NY	Ex-Officio Member/Chair of the Legislature	Present	
Savannah Hempstead	Cortland County, NY	Clerk of the Legislature	Present	
Rob Corpora	Cortland County, NY	County Administrator	Present	
Kristen Monroe	Cortland County, NY	Commissioner of Social Services	Present	
Amy Buggs	Cortland County, NY	Grants Administrator	Present	
Rebecca Main	Cortland County, NY	Public Health Program Manager	Present	
Shannon Phillips	Cortland County, NY	Employment & Training Director	Present	
Sharon MacDougall	Cortland County, NY	Director of Community Services	Present	
Tom Tedesco	Cortland County, NY	Director of Veterans Services	Present	
Carl Bush	ClearPath		Present	
Pearl Reed-Klein	Cortland County, NY	Director of the Area Agency on Aging	Present	
Kristen Beard	Cortland County, NY	Child Advocacy Center Coordinator	Present	
Sandra Price	Cortland County, NY	Board Member	Present	
Lisa Hoeschele	Family and Children Counseling Services	Director	Present	
Andrea Herzog	Cortland County, NY	Director of Finance	Remote	
Margaret Mellott	Cortland Standard	Reporter	Remote	
Donald Chu	Corland County	Resident	Remote	
Eugene Waldbauer	Cortland County, NY	Board Member	Late	11:50 AM

Minutes Approval

1. Health & Human Services Committee - Committee Meeting - Mar 14, 2024 11:00 AM

RESULT:	APPROVED [UNANIMOUS]
MOVER:	William McGovern, Committee Member
SECONDER:	Reed Cleland, Committee Member
AYES:	Newell, Bentley, Van Dee, Bischoff, McGovern, Cleland, VanGorder

Resolutions

AGENDA ITEM NO. 1 – Authorize Agreement with Public Health Consulting Group for Employment Host Site

RESULT:	APPROVED [UNANIMOUS]
	Next: 4/25/2024 6:00 PM
MOVER:	Cathy Bischoff, Committee Member
SECONDER:	Douglas Bentley, Committee Member
AYES:	Newell, Bentley, Van Dee, Bischoff, McGovern, Cleland, VanGorder

ON MOTION OF VAN DEE

RESOLUTION NO.

Authorize Agreement with Public Health Consulting Group for Employment Host Site

WHEREAS, the Cortland County Legislature adopted Resolution No.10-23, which gave the Cortland County Health Department permission to accept funds from Health Research, Inc. for the NYS Public Health Corps (NYSPHC) Fellowship Program for the period of 8/1/2023-6/30/2024; AND

WHEREAS, Public Consulting Group, LLC (PCG) is contracted with Health Research, Inc. (HRI) to manage certain public health programs under the auspices of the New York Department of Health (NYSDOH), including but not limited to the Public Health Infrastructure Grant (PHIG) Program and the second iteration of the Public Health Corps Program; AND

WHEREAS, Staffing Solutions Organization, LLC (SSO), as a contractor to PCG, employs individuals who provide services under a Program, such as Staff (in the PHIG Program) or Fellows (in the Public Health Corps 2.0 Program); AND

WHEREAS, the Cortland County Health Department (CCHD) wishes to host one or more Program Participants assigned to provide services to CCHD in order to support CCHD's services or other organizations associated with CCHD; AND

WHEREAS, there is no cost to the County to host Program Participants for the period beginning 7/1/2024; NOW THEREFORE BE IT

RESOLVED, that the Cortland County Administrator and the Public Health Director, upon review and approval by the County Attorney or designee, are authorized to execute agreements to be a Host Organization with Staffing Solutions Organization, LLC 99 Washington Avenue, Suite 1720, Albany, NY 12210, and a contracted agency with Public Consulting Group, LLC, for the period beginning 7/1/2024; AND BE IT FURTHER

RESOLVED, amendments to the contract during the term will be considered on an as needed basis.

AGENDA ITEM NO. 2 – Authorize Contract - Springbrook Cortland - Mental Health Department

RESULT:	APPROVED [UNANIMOUS]
	Next: 4/25/2024 6:00 PM
MOVER:	Keith VanGorder, Committee Vice-Chair
SECONDER:	Christopher Newell, Committee Member
AYES:	Newell, Bentley, Van Dee, Bischoff, McGovern, Cleland, VanGorder

ON MOTION OF VAN DEE

RESOLUTION NO.

Authorize Contract - Springbrook Cortland - Mental Health Department

WHEREAS, the Cortland County Mental Health Department must execute contracts with several organizations and businesses to operate on a day to day basis; AND

WHEREAS, Cortland County Mental Health is allocated state aid funds to pass through to Office of Mental Health approved organizations for operations; NOW THEREFORE BE IT

RESOLVED, that the County Administrator, upon review and approval by the County Attorney or designee, and subject to appropriation of funding by the Legislature, is hereby authorized to execute an agreement for 2024 with Springbrook Cortland, with offices at 29 Central Ave, Cortland, New York for the provision of developmental disability services.

Discussion Items

1. Cortland County Health Department 2023 Annual Report

RESULT:	COMPLETED
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2. Department of Social Services 2023 Annual Report

RESULT:	COMPLETED
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Monthly Reports

1. Health Department Monthly Report

RESULT:	COMPLETED
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2. Mental Health Department Monthly Report

RESULT:	COMPLETED
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Adjournment

The meeting was closed at 11:57 AM



Health & Human Services Committee

Committee Meeting

60 Central Ave.
Cortland, NY 13045
<http://www.cortland-co.org>

2.1

~ Minutes ~

Thursday, March 14, 2024

11:00 AM

Room 302

Call to Order

The meeting was called to order at 11:11 AM by Committee Chair Ronald J. Van Dee

Attendee Name	Organization	Title	Status	Arrived
Christopher Newell	Cortland County, NY	Committee Member	Excused	
Douglas Bentley	Cortland County, NY	Committee Member	Present	
Ronald J. Van Dee	Cortland County, NY	Committee Chair	Present	
Cathy Bischoff	Cortland County, NY	Committee Member	Present	
William McGovern	Cortland County, NY	Committee Member	Present	
Reed Cleland	Cortland County, NY	Committee Member	Present	
Keith VanGorder	Cortland County, NY	Committee Vice-Chair	Present	
Savannah Hempstead	Cortland County, NY	Clerk of the Legislature	Present	
Rob Corpora	Cortland County, NY	County Administrator	Present	
Kristen Monroe	Cortland County, NY	Commissioner of Social Services	Present	
Kristen Beard	Cortland County, NY	Child Advocacy Center Coordinator	Present	
Tom Tedesco	Cortland County, NY	Director of Veterans Services	Present	
Pearl Reed-Klein	Cortland County, NY	Director of the Area Agency on Aging	Present	
Sharon MacDougall	Cortland County, NY	Director of Community Services	Present	
Melanie Vilardi	Cortland County, NY	Deputy County Administrator	Present	
Mecke Nagel	Cortland County, NY	Resident	Present	
Margaret Mellott	Cortland Standard	Reporter	Present	
Kevin Fitch	Cortland County, NY	Ex-Officio Member/Chair of the Legislature	Remote	
Andrea Herzog	Cortland County, NY	Director of Finance	Remote	
Donald Chu	Cortland County, NY	Resident	Remote	

Minutes Acceptance: Minutes of Mar 14, 2024 11:00 AM (Minutes Approval)

Minutes Approval

1. Health & Human Services Committee - Committee Meeting - Feb 8, 2024 11:00 AM

RESULT:	APPROVED [UNANIMOUS]
MOVER:	Reed Cleland, Committee Member
SECONDER:	Cathy Bischoff, Committee Member
AYES:	Bentley, Van Dee, Bischoff, McGovern, Cleland, VanGorder
EXCUSED:	Christopher Newell

Resolutions

AGENDA ITEM NO. 1 – Authorize Agreement for Expanded In-Home Services for the Elderly (EISEP) and Caregiver Respite Programs - Office for Aging

RESULT:	APPROVED [UNANIMOUS]
	Next: 3/28/2024 6:00 PM
MOVER:	Cathy Bischoff, Committee Member
SECONDER:	Douglas Bentley, Committee Member
AYES:	Bentley, Van Dee, Bischoff, McGovern, Cleland, VanGorder
EXCUSED:	Christopher Newell

ON MOTION OF VAN DEE

RESOLUTION NO.

Authorize Agreement for Expanded In-Home Services for the Elderly (EISEP) and Caregiver Respite Programs - Office for Aging

WHEREAS, the Expanded In-Home Services for the Elderly (EISEP) and Caregiver Respite programs provide critical services to frail older adults; AND

WHEREAS, the Office for Aging requires the services of outside service providers and private organizations to fulfill its charge; AND

WHEREAS, the Office for Aging wishes to enter into a contract with CNY Seniors d/b/a Home Instead Senior Care of Ithaca, for the provision of non-medical personal care, chore/housekeeping services, and caregiver respite; AND

WHEREAS, the total amount of all EISEP and Caregiver Respite contracts shall not exceed the available funds allocated to each program as follows:

EISEP Services	\$130,652
Caregiver Respite	\$2,500

; NOW THEREFORE BE IT

RESOLVED, that the County Administrator, upon review and approval by the County Attorney or designee, and subject to any appropriation of funding by the Legislature, be and hereby is authorized to execute said agreement.

AGENDA ITEM NO. 2 – Authorize Local Aging Adult for Satellite Services (LASS) Site Laptop Memorandums of Understanding - Office for Aging

Minutes Acceptance: Minutes of Mar 14, 2024 11:00 AM (Minutes Approval)

RESULT:	APPROVED [UNANIMOUS]
	Next: 3/28/2024 6:00 PM
MOVER:	Cathy Bischoff, Committee Member
SECONDER:	Douglas Bentley, Committee Member
AYES:	Bentley, Van Dee, Bischoff, McGovern, Cleland, VanGorder
EXCUSED:	Christopher Newell

ON MOTION OF VAN DEE

RESOLUTION NO.

Authorize Local Aging Adult for Satellite Services (LASS) Site Laptop Memorandums of Understanding - Office for Aging

WHEREAS, the Cortland County Office for Aging (CCOFA) has entered into agreements with the following entities to provide Local Aging Adult Satellite for Services (LASS) programs:

Town of Preble - Contract No. 325-23
 Cortland Chenango Rural Services - Contract No. 326-23
 Scott Club, Inc. - Contract No. 327-23
 Virgil United Methodist Church - Contract No. 328-23
 Town of Truxton - Contract No. 329-23

; AND

WHEREAS, the CCOFA purchased six laptops in October of 2022 utilizing HDC5 Consolidated Appropriations Act funds for the enhancement of older adult programming; AND

WHEREAS, the CCOFA has determined it would be beneficial for the LASS programs to have equipment capable of connecting their sites to the CCOFA Age Well Center to engage in shared programming opportunities; NOW THEREFORE BE IT

RESOLVED that the Cortland County Legislature be and hereby approves the County Administrator and the CCOFA Director, upon review and approval by the County Attorney or designee, to sign Memorandums of Understanding for the loan and use of the aforementioned laptops to the organizations outlined herein for the purposes previously stated for the period April 1, 2024 to March 31, 2029 with the option for renewal.

AGENDA ITEM NO. 3 – Appoint Member - Older Americans Act Advisory Council

RESULT:	APPROVED [UNANIMOUS]
	Next: 3/28/2024 6:00 PM
MOVER:	Reed Cleland, Committee Member
SECONDER:	Cathy Bischoff, Committee Member
AYES:	Bentley, Van Dee, Bischoff, McGovern, Cleland, VanGorder
EXCUSED:	Christopher Newell

ON MOTION OF VAN DEE

RESOLUTION NO.

Appoint Member - Older Americans Act Advisory Council

WHEREAS, the By-Laws of the Older Americans Act Advisory Council of the Cortland County Office for Aging state membership shall be 15-25 voting members with at least fifty percent of the membership to be at least sixty years of age that represent target group seniors according to the Older Americans Act of 1965, as amended, and shall also include representatives of health care provider

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organizations, including veterans and supportive services provider organizations, be broadly representative of all aspects of the county, and include local elected official and the general public; AND

WHEREAS, Article 4, Section 4, states the term shall be for three years, or appointed to complete a term of a person who has resigned, the new person's length of term is defined as the period of the original member's term, with a maximum of two consecutive terms; NOW THEREFORE BE IT

RESOLVED, that the following be and hereby is appointed to the Older Americans Act Advisory Council of the Cortland County Office for Aging:

Name	Capacity	Term Number	Term Expiration
Sharon Torres	Community Member	1 st Term	12/31/2026

AGENDA ITEM NO. 4 – Resolution Calling for the SFY 2024-25 Enacted Budget to Include Reforms for Determining the Capacity of a Defendant to Stand Trial

RESULT: APPROVED [UNANIMOUS]

Next: 3/28/2024 6:00 PM

MOVER: Cathy Bischoff, Committee Member

SECONDER: Douglas Bentley, Committee Member

AYES: Bentley, Van Dee, Bischoff, McGovern, Cleland, VanGorder

EXCUSED: Christopher Newell

ON MOTION OF VAN DEE

RESOLUTION NO.

Resolution Calling for the SFY 2024-25 Enacted Budget to Include Reforms for Determining the Capacity of a Defendant to Stand Trial

WHEREAS, section § 730 of the Criminal Procedure Law (CPL) provides that defendants charged with felonies who are mentally ill and/or developmentally disabled and who are determined by a court to be unable to understand the charges against them or participate in their own defense (often called “730’s”) are sent to New York State-operated forensic hospitals solely for the purpose of trying to restore them to competency so they can stand trial; AND

WHEREAS, the origin of CPL § 730 dates back over five (5) decades to the laws of 1970, and parts of it have been declared to be unconstitutional; AND

WHEREAS, competency restoration provides necessary medications but primarily provides services such as courtroom training to familiarize the defendant with courtroom procedures so they can participate in their trial; AND

WHEREAS, in the cases for which restoration is appropriate, most defendants can generally be restored within 90-150 days; AND

WHEREAS, unfortunately, there are also numerous situations where defendants have been kept in restoration for periods of three, six, or even 10 years; AND

WHEREAS, these lengthy confinements have been declared to be unconstitutional by the U.S. Supreme Court as shown in the case of *Jackson v. Indiana* (1972), which provides that states may not indefinitely confine criminal defendants solely on the basis of incompetence to stand trial; AND

WHEREAS, the Office of Mental Health (OMH) has diverged from agreements with the county mental health commissioners/directors of community services to provide specific and timely information on the clients/defendants ordered to restoration; AND

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WHEREAS, the SFY 2020-21 budget required counties to pay 100 percent of the OMH State Operations costs for individuals receiving court-ordered mental health competency restoration services at State-operated Forensic Psychiatric Centers; AND

WHEREAS, as the full payors of these services, the commissioners must have timely access to any pertinent client information as deemed necessary to effectively manage their responsibilities under the Mental Hygiene Law; AND

WHEREAS, the county cost of these services is over \$1,300 per day and current statute does not require a timeline be established for when a defendant is unable to be restored; AND

WHEREAS, the county cost of restoration for one defendant can be upwards of \$400,000 per year; AND

WHEREAS, in New York State, counties, through the county tax levy, already bear an overwhelming portion of the financial burden for supporting individuals suffering from serious mental illness, and the requirement to assume 100% of 730.20 competency restoration costs has taken away millions of dollars from critical behavioral health programming in the community; AND

WHEREAS, given the advances in the behavioral health and the modernization of the criminal justice system, it is time for the State to reform the statutory authority governing competency restoration to ensure that only individuals who are appropriate subjects of 730 court orders are sent for restoration in accordance with the current state of these two systems; AND

WHEREAS, the Legislature has introduced S.1874 (Brouk)/A.5063 (Gunther), which seeks to address the reforms necessary to update the archaic requirements of current statute, many which have been deemed unconstitutional and includes a critical requirement to reinvest any savings derived by the counties back into the local mental hygiene systems of care as follows:

- CPL § 730.10 shall be modified to make clear that restoration is not mental health treatment, so the judiciary is better informed that a 730 order does not treat underlying mental health conditions;
- CPL § 730.20 shall be reformed to establish specific criteria for 730 examiners, streamlining the process to establish equity across the system, and that the psychiatrist or psychologist conducting the psychiatric exam tell the court whether or not there is a reasonable chance of restoration, thereby granting the court an opportunity to allow diversion to mental health treatment;
- OMH will consistently follow their agreements with the county mental health commissioners/directors of community services to provide specific and timely information on the clients/defendants ordered to restoration;
- CPL § 730.20 shall adjust the fee for reimbursing psychiatric examiners;
- CPL § 730.50 shall limit the time defendants are ordered for restoration services; AND BE IT FURTHER
- MHL § 9.33 shall allow individuals to be transferred to Article 9 facilities if it is determined that a defendant is unable to be restored;
- MHL § 43.03 shall require Local Governmental Units (counties) to reinvest savings from these reforms into community mental health services

; NOW THEREFORE BE IT

RESOLVED, that the Cortland County Legislature calls on the State to support all provisions outlined in S.1874 (Brouk)/A.5063 (Gunther); AND BE IT FURTHER

RESOLVED, NYSAC shall forward copies of this resolution to Governor Kathy Hochul and the New York State Legislature encouraging them to include these reforms in the SFY 2025 Enacted Budget.

AGENDA ITEM NO. 5 – Authorize Agreements for Contractual Psychiatrists - Mental Health Department

RESULT: **APPROVED [UNANIMOUS]**

Next: 3/28/2024 6:00 PM

MOVER: Cathy Bischoff, Committee Member

SECONDER: Reed Cleland, Committee Member

AYES: Bentley, Van Dee, Bischoff, McGovern, Cleland, VanGorder

EXCUSED: Christopher Newell

ON MOTION OF VAN DEE

RESOLUTION NO.

Authorize Agreements for Contractual Psychiatrists - Mental Health Department

WHEREAS, the Mental Health Department is in need of psychiatrists to serve its population and provide required NYS CPL 730 and MHL 9.60 evaluations; AND

WHEREAS, it would be in the best interest of the County to provide these services through an outside vendor contractor who specializes in these unique evaluations; AND

WHEREAS, Dr. Annas and Dr. Kumar, both licensed psychiatrists, are contractors selected to provide this to the Mental Health Department; NOW THEREFORE BE IT

RESOLVED, that the 2024 Cortland County Budget be and hereby is amended as follows:

Decrease:

A43105-51010-4200 \$40,000

Increase:

A43115-54615 \$40,000

; AND BE IT FURTHER

RESOLVED, that the County Administrator, upon review by the County Attorney or designee, be and hereby is authorized to enter into an agreement with Dr. Annas and Dr. Kumar, M.D. for Mental Health Department required NYS CPL 730 and MHL 9/60 evaluation services.

AGENDA ITEM NO. 6 – Authorize Contracts/Delegate Authority -Community Impact Dollars for HEALing Community Study - Mental Health Department

Minutes Acceptance: Minutes of Mar 14, 2024 11:00 AM (Minutes Approval)

RESULT: APPROVED [UNANIMOUS]

Next: 3/28/2024 6:00 PM

MOVER: Reed Cleland, Committee Member

SECONDER: Douglas Bentley, Committee Member

AYES: Bentley, Van Dee, Bischoff, McGovern, Cleland, VanGorder

EXCUSED: Christopher Newell

ON MOTION OF VAN DEE

RESOLUTION NO.

Authorize Contracts/Delegate Authority -Community Impact Dollars for HEALing Community Study - Mental Health Department

WHEREAS, the Cortland County Mental Health Department has been awarded an increase in Community Impact Dollars (CID) from \$262,813 to \$483,949 as part of the Columbia HEALing Community Study (HCS); AND

WHEREAS, the HCS leadership committee has designated the funds to be used for funding evidence-based practices and communications interventions matching the approved Columbia budget and action plans; AND

WHEREAS, it is the recommendation of the Health and Human Services Committee to authorize the Cortland County Administrator, Chair of the Cortland County Legislature's Health and Human Services Committee and the Director of Community Services for Cortland County to approve the designation of funds to the following Cortland County contracted agencies; with these budget adjustments:

2023-2024 Columbia Approved	Original CID	Updated CID
Access to Independence	\$24,590	\$32,343
Cayuga Addiction & Recovery Services	\$30,782	\$251,918
CACTC	\$33,291	\$33,291
Cortland County Health Dept.	\$37,191	\$37,191
Family & Children's Counseling Services	\$136,959	\$129,206
TOTAL	\$262,813	\$483,949

; NOW THEREFORE BE IT

RESOLVED, that the Cortland County Administrator, Chair of the Cortland County Legislature's Health and Human Services Committee and the Director of Community Services for Cortland County will approve the designation of funds to various Cortland County contracted agencies; AND BE IT FURTHER

RESOLVED, that the County Administrator, upon review by the County Attorney or designee, be and hereby is authorized to execute agreements with approved county contracted agencies for these funds; AND BE IT FURTHER

RESOLVED, the Director of Finance is authorized to pay the approved county contracted agencies from the appropriate expense account.

Minutes Acceptance: Minutes of Mar 14, 2024 11:00 AM (Minutes Approval)

Monthly Reports

1. Health Department Monthly Report

RESULT:	COMPLETED
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2. Mental Health Department Monthly Report

RESULT:	COMPLETED
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Discussion Items

1. Committee Update of Opioid Settlement Funding

RESULT:	COMPLETED
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Executive Sessions

It was MOVED by Ms. Bischoff, seconded by Mr. McGovern, and unanimously approved by voice vote of members present, to enter into an executive session to discuss matters which will imperil the public safety is disclosed. Those permitted to stay in the executive session are: Savannah Hempstead, Rob Corpora, Victoria Monty, Melanie Vilardi and all legislators present. MOTION CARRIED.

An executive session was held from 11:40 a.m. to 11:48 a.m., at which time on motion of Mr. McGovern, seconded by Ms. Bischoff, it was unanimously approved by voice vote to exit executive session.

It was MOVED by Ms. Bischoff, seconded by Mr. Cleland, and unanimously approved by voice vote of members present, to enter into an executive session for discussions regarding proposed, pending or current litigation. Those permitted to stay in the executive session are: Savannah Hempstead, Rob Corpora, Victoria Monty, Melanie Vilardi and all legislators present. MOTION CARRIED.

An executive session was held from 11:49 a.m. to 12:06 p.m., at which time on motion of Mr. McGovern, seconded by Mr. Cleland, it was unanimously approved by voice vote to exit executive session.

Adjournment

The meeting was closed at 12:07 PM

Minutes Acceptance: Minutes of Mar 14, 2024 11:00 AM (Minutes Approval)



Public Health
Prevent. Promote. Protect.

Cortland County Health Department



4.1.a

Cortland County Health Department

ANNUAL REPORT 2023



Attachment: CCHD 2023 Annual Report (12178 : Cortland County Health Department 2023 Annual Report)

VISION

To promote health, prevent disease, injury, and disability while enhancing the quality of life within our community.

MISSION

Healthy People in a Healthy Community

VALUES

Leadership

We are recognized throughout the community for our integrity, advocacy, innovation and effective approach to public health.

Transparency

We maintain the highest levels of professionalism, accountability, honesty and fairness as responsible public health professionals.

Excellence

We have a strong commitment to quality and competency in order to provide optimal service to the community.

Collaboration

We develop, nurture, and leverage key partnerships throughout the community to improve health and support a strong public health system.

Inclusiveness

We promote a diverse culture that encourages inclusivity, collaboration, flexibility, and approachability.

NOTE FROM THE PUBLIC HEALTH DIRECTOR

I am pleased to share the 2023 Cortland County Health Department's Annual Report with our community. The work we do in Public Health is ever-changing, complex, and challenging, yet what remains constant is our responsibility to protect the public's health and lead efforts to improve the overall health and well-being of the community. This report demonstrates the commitment of staff to ensure the people of Cortland County benefit from comprehensive, science and evidence-based public health practice, policy, services and programs.



The department experienced a year of opportunities and challenges that have deepened and reinforced our drive and efforts to improve the health of Cortland County residents. In this report, we share some of the exciting work that we are doing to help support the health and wellness not only for Cortland County residents but also for those that visit our community. We also provide an update on our accreditation status and the steps we are taking to prepare for re-accreditation.

Continued collaboration with our community residents, stakeholders, and partners helps us to be successful and strengthen our ability to affect the changes that are needed. We could not do it without their help and support. I also want to express my heartfelt thanks to all of the Cortland County Health Department staff for their ongoing dedication to improving the health of residents in this county.

Sincerely,

Nicole Anjeski, MS, MPH
Public Health Director

PUBLIC HEALTH WEEK 2023

The American Public Health Association celebrates National Public Health Week the first week in April each year. National public health week recognizes the contributions public health makes globally, nationally, and locally to improve health.

The 2023 National Public Health week theme was *Centering and Celebrating Cultures in Health*. Each day, CCHD highlighted our divisions, as well as a program that aligned with the daily theme for National Public Health Week. We highlighted: partnerships with the LGBTQ Center through our tobacco program, the gun lock distribution project led by our Public Health Fellow, the education our nurses do surrounding STIs, the Community Health Improvement Plan's mental health partner organizations, the county's mobility program in rural towns, services provided by our Children with Special Needs therapy team, and the food and water safety program led by our Sanitarians.



STAFF



Nicole Anjeski, Marrisa Archer, Missi Babcock, Kelli Bell, Anna Bennett, Margaret Broderick, Jhenelle Clark, Nancy Colasurdo, Hannah Commins, Brooke D'Agostino, Maria DeRado, Rhonda Fitzpatrick, Derek Green, Beth Greene, Paul Gugerty, Jennifer Hamilton, Scarlett Head, Jennifer Hillman, Courtney Johnson, Kathleen Jorgensen, Nicole Koekebacker, Courtney Maxson, Maureen McDermott-Mulherin, Lisa McGee, Cheryl Mrozowski, Adrienne Nadge, Elizabeth Nichols, Suzanne Osterhoudt, Katee Padbury, Hinal Patel, Lisa Perfetti, Laura Pforter, Alanna Powell, Christopher Quinlan, Regina Reinschmidt, Jeannine Reyngoudt, Sandra Rivera, Michael Ryan, Lisa Schmitt-Bacani, Kathryn Smith, Pam Stanton, Rose Walsh, Donald Ware, Ianthe Warner

NEW STAFF

- **Scarlett Head** - Senior Account Clerk
- **Marissa Archer** - Public Health Sanitarian
- **Chris Quinlan** - Public Health Technician
- **Nancy Colasurdo** - Public Health Educator
- **Hinal Patel** - Public Health Fellow
- **Alanna Powell** - Public Health Fellow
- **Brooke D'Agostino** - Public Health Fellow
- **Jhenelle Clarke** - Public Health Fellow

RETIREMENTS

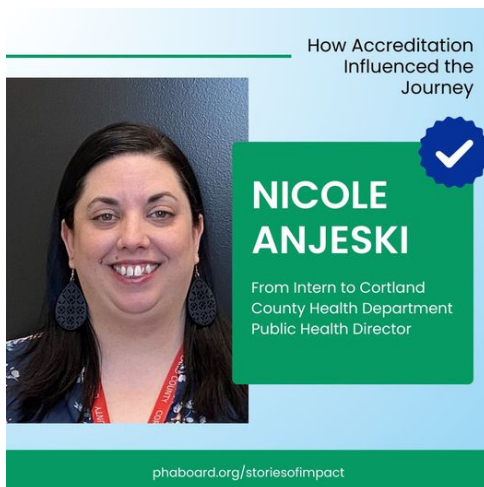
- **JoAnn Davis**, Medical Services Clerk
25 Years of Service
- **Phyllis Guest**, Public Health Sanitarian
20 Years of Service
- **Terrie Atwood**, EI Service Coordinator
10 Years of Service
- **Mike Ryan**, Director of Environmental Health
12 Years of Service

Medical Advisor - Ngozi Mezu-Patel, MD

Board of Health - Bonni C. Hodges PhD (President), Susan Williams (Vice President), Marisa Clifford MDD, Cindy Johnson MD, Nicole Villapiano MD, Mary Wright RN, Sandra Price (Legislature)

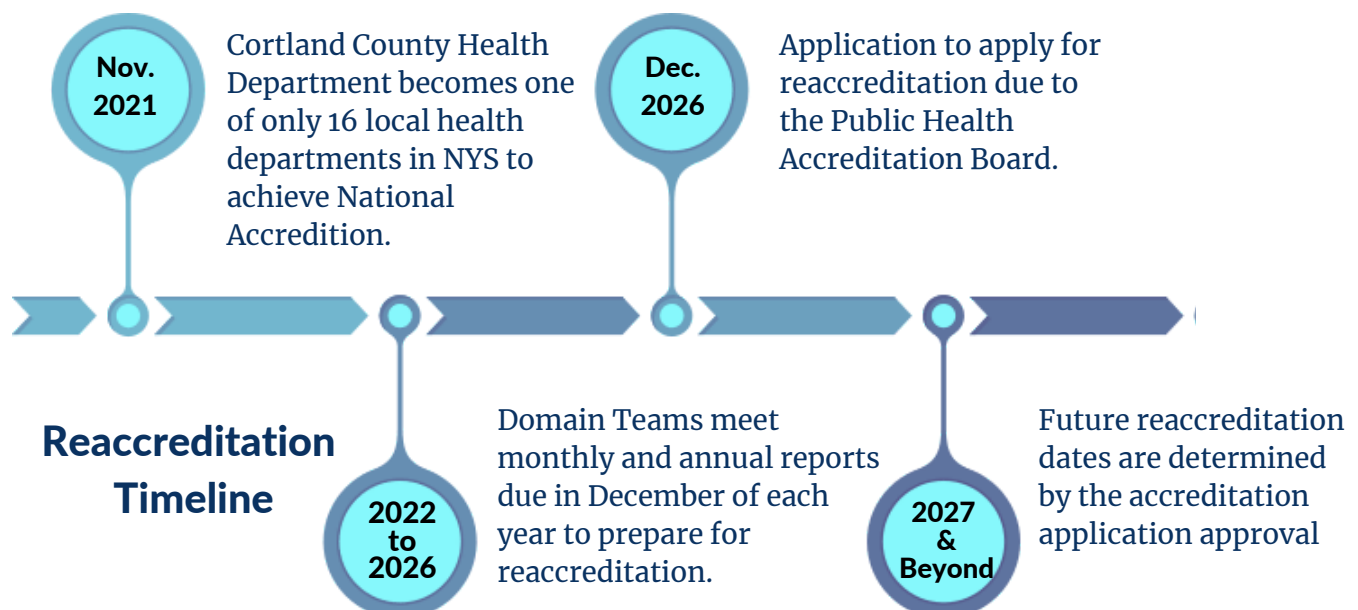
PUBLIC HEALTH ACCREDITATION 2023 UPDATE

In 2023, the Accreditation Team - comprised of staff from each division and all levels - continued to prepare for the reaccreditation process which will begin in 2027. While still several years away from applying for reaccreditation, the department strives for continued adherence to all Public Health Accreditation Board (PHAB) standards and measures.



2023 Accreditation Highlights:

- Public Health Director, Nicole Anjeski, was featured as a 'Story of Impact' on the PHAB website in November.
- Team leaders & domain teams (which include all staff members) were established for all 10 Domains.
- The Accreditation Team had 8 meetings to discuss implementation/evaluation of major departmental plans.
- Measure 7.1.1 (the only domain not demonstrated during initial accreditation) was submitted for review in the 2023 Annual Report and PHAB provided feedback and areas for improvement.



PERFORMANCE MANAGEMENT 2023

4.1.a

In 2023, CCHD began building out our Performance Management System (PMS) which tracks if our community (Community Health Improvement Plan), organizational (CCHD Strategic Plan), and program level initiatives are being implemented as planned in 2023 and 2024. Additionally, the PMS will be used in 2025 to evaluate if what we did actually contributed to meeting departmental and community health objectives and goals (aka - did what we do actually work?)

CCHD Strategic Plan

An organizational level plan for CCHD that outlines ways, as an organization, we will address the highest organizational priorities over the next three years. Priorities are selected based on an “environmental scan” of internal programmatic data, employee surveys, and input from partnering agencies. The Strategic Plan is closely related to the CHIP, as the priorities selected for the Strategic Plan, will ideally place the department in the best possible position to address the health problems outlined in the CHIP.

Community Health Improvement Plan

A collaborative community level plan between CCHD, GCMC, and many other partnering agencies that outlines the ways, as a community, the highest priority health problems will be addressed over the next three years. Priorities are selected based on the Community Health Assessment which included community feedback and partner prioritization. Many interventions for the CHIP are tracked via the Community Health Improvement Plan data processes, but not all. Additionally, many CCHD program are incorporated into the CHIP.

CCHD Programs

CCHD programmatic performance management data is tracked internally by each CCHD program. This data is reported monthly to the Board of Health and reports are available publicly on the CCHD website. If there is interest in specific data for a health department related program please contact Margaret Broderick, Epidemiology Manager (mbroderick@cortland-co.org)

Cortland County Health Department Strategic Plan

4.1.a

Priority #1: Public Health Workforce

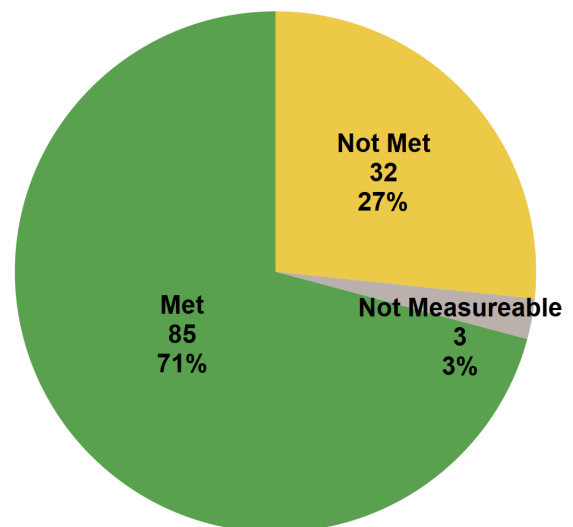
Priority #2: Communication

Priority #3: Collaboration



- 2023 marked the first year that the Cortland County Health Department collected Strategic Plan data quarterly.
- 71% of year-end targets established by the Accreditation Team were met.
- Not meeting a target can indicate lack of resources availability/staff time, staff/leadership buy-in, or other barriers.
- Efforts in 2024 will involve addressing gaps (measures not met in 2023) as described in the pages following.

All (# and % of measures met/not met/and not measured)



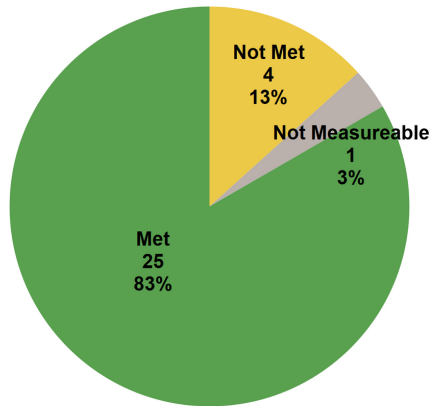
View Detailed 2023 Quarterly Updates & Data Methods [Here](#) or Scan the QR Code Below to be Directed to the Dashboard



Goal: Develop and Maintain a Qualified & Diverse Workforce

4.1.a

Develop and maintain a qualified workforce (# and % of measures met/not met/and not measured)



Looking Back: CCHD had an extremely successful year in expanding professional & workforce development within the department. Professional Development Days were implemented each quarter and included guest speakers on Diversity, Equity, and Inclusion. The department grew the internship program collaboration with SUNY Cortland in 2023. Finally, a comprehensive workforce needs assessment was completed as part of the updated Workforce Development Plan.

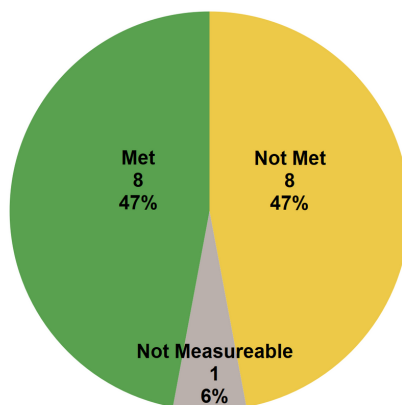
Looking Forward: In 2024, the CDC Public Health Infrastructure Grant and NYSDOH Public Health Fellow allocation will be instrumental in continuing the progress achieved in 2023. Additionally, 2024 will involve a focus on implementing the Workforce Development Plan which was approved in late 2023. This includes implementing trainings as identified in the workforce training needs assessment.

- 3 SUNY Cortland interns hosted
- 5 Schools CCHD has formal internship agreements with
- 5 Staff with, or working towards, a Master of Public Health degree
- 4 Professional Development Days offered
- 6 Speakers on Diversity, Equity, and Inclusion
- 7 Grants received that support staffing
- 100 % of fulltime staff received training in Diversity, Equity, and Inclusion
- 100 % of fulltime staff completed a training needs assessment in June

2023 HIGHLIGHTS

Goal: Build a Supportive Work Environment

Build a supportive work environment (# and % of measures met/not met/and not measured)



Looking Back: With the official launch of the 3Cheers! employee appreciation and engagement committee in July 2023, building a supportive work environment came to the forefront of the department's culture. The committee implemented employee appreciation programs, events/lunches, break time exercise activities, and more. The department also worked on incorporating inclusive practices into the interviewing process.

Looking Forward: In 2024, the CDC Public Health Infrastructure Grant will be instrumental in expanding the progress achieved in 2023, and addressing gaps. The grant will allocate funds for supervisory trainings. This strategy will be a main priority for 2024. Additionally, further research will assess the feasibility and need for a mentorship program. The measures that were not met will be assessed to see if the targets are realistic and updated for 2024.

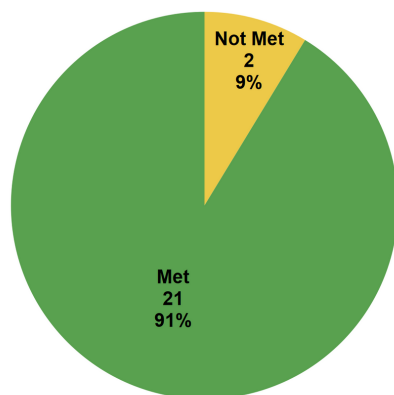
- 3 Methods provided for staff to give feedback
- 4 Staff activities/communications about inclusive holidays (Juneteenth, ADA Anniversary, LGBTQ History Month)
- 8 Employee appreciation events/lunches held
- 9 Months of employee recognition programs implemented
- 26 Jener-cise classes held during break periods
- 100 % of fulltime staff participated in an employee recognition day
- 100 % of staff feedback concerns were addressed in the employee newsletter
- 100 % of interviews incorporated questions about experience with diversity and inclusion by the end of the year

2023 HIGHLIGHTS

Goal: Enhance effective, engaging, and inclusive health education/behavior change communications between CCHD & community members

4.1.a

Enhance effective, engaging, and inclusive/equitable health education and behavior change communications between CCHD and community members (# and % of measures met/not met/and not measured)



- 3 Social media channels utilized
- 8 Media channels used in department marketing campaigns
- 13 Press releases sent to media entities
- 98 Social media posts related to Community Health Improvement
- 418 Social media posts provided health education
- 52 % of social media posts included image descriptions
- 68 % of Facebook posts linked to a local resources page
- 83 % of social media posts aligned with branding

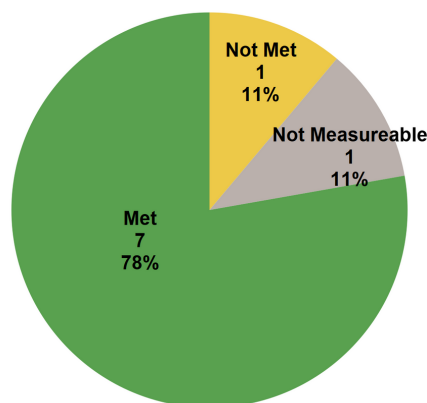
2023 HIGHLIGHTS

Looking Back: This year, the department launched a comprehensive top-level marketing and branding strategy for all CCHD social media pages. Social media branding was designed based on an analysis of over 800 CCHD social media posts utilizing over 10 different design variables. Division and program staff worked collaboratively with the Communications Public Health Fellow and data was reviewed on a quarterly basis to adjust strategy.

Looking Forward: The Department will maintain a top level, organization wide branding and marketing strategy for 2024 utilizing staff support from the NYS Public Health Fellow grant. CCHD will also conduct focused efforts on increasing diverse representation on social media pages.

Goal: Increase visibility of health department services

Increase visibility of health department services (# and % of measures met/not met/and not measured)



- 7 Strategic Plan promotion posts on social media
- 18 Department/division promotion posts on social media
- 20 Task force/coalition projects with CCHD participation
- 35 Task force/coalitions with CCHD representation on
- 43 Community Health Improvement promotion posts
- 100 % of taskforce/coalition minutes (if available) in shared location
- 203 Community events/outreach attended by CCHD staff

2023 HIGHLIGHTS

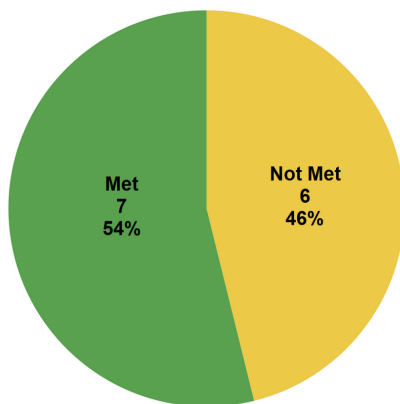
Looking Back: With a marked end to COVID-19 restrictions and staff time re-focused on programmatic activities, CCHD was able to get back out in the community in 2023. Staff represented the department on a variety of coalitions/tasks forces, many of which specifically address health equity of underserved populations. Outreach and engagement events were heavily attended and planned by department staff.

Looking Forward: Many department grant funders are requesting in-person outreach metrics on an ever increasing basis. Targets that were not met involved sending out press releases for events that CCHD staff members will be attending or events hosted by CCHD. While press releases were not sent out for most events, social media posts were often posted to promote attendance at events. For 2024, this measure will be shifted from press releases to social media promotion. It was also determined that there is not a consistent way to measure the number of community members provided resources at events.

Goal: Ensure, maintain, and enhance effective internal communications between leadership, supervisors, and staff

4.1.a

Ensure, maintain, and enhance effective internal communications between leadership, supervisors, and staff (# and % of measures met/not met/and not measured)



- 1 Annual all staff meeting that included Accreditation and Emergency Preparedness overviews, Poverty simulator, and DE&I panel
- 10 Divisional and supervisory staff meetings occurred for most divisions within the department
- 5 Employee newsletters distributed
- 94 % staff report reading the employee newsletters

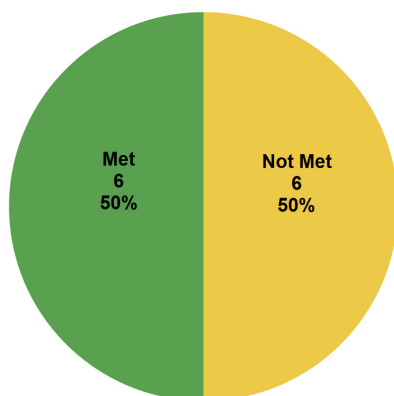
2023 HIGHLIGHTS

Looking Back: In 2023, CCHD implemented the first annual all-staff meeting in many years. The meeting was evaluated to improve upon and continue to reflect the needs of the department in 2024. CCHD also re-launched the Employee Newsletter in 2023, which the vast majority of staff reported reading regularly.

Looking Forward: Targets that were not met involved implementing instant messaging and development of a supervisory/supervisee dialogue process that involves all levels of staff. The instant messaging system is reliant on approval from the county IT department. Dialogue and one-on-one meetings between supervisors and supervisees did occur in a limited way in 2023, however, 2024 will focus on the most meaningful ways to implement this strategy moving forward using employee feedback.

Goal: Enhance collaboration with the Board of Health and Legislature

Enhance collaboration with the Cortland County Board of Health (BOH) and Cortland County Legislature (# and % of measures met/not met/and not measured)



- 1 Strategic Plan/CHIP interventions changed based on BOH expertise
- 1 Joint press release (COVID-19 vaccination)
- 3 Presentations on CHIP or Strategic Plan data to the BOH
- 3 BOH meetings with presentation that related to health equity work
- 100 % of BOH members completed Corporate Compliance training
- 100 % of Health & Human Services meetings were attended by CCHD staff

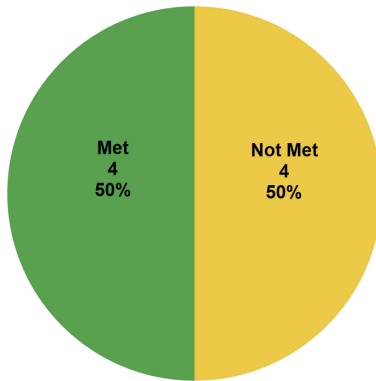
2023 HIGHLIGHTS

Looking Back: In 2023, many changes were made to Board of Health relationships and processes. The department began presenting on specific program and/or health topics, the BOH offered comment for one press release, and the Community Health Improvement Plan and Strategic Plan data points were presented on a more regular basis.

Looking Forward: Targets that were not met involved training and providing presentations to the BOH on policies/plans/programs that they report they are not aware of and aligning the BOH reports with the Performance Management System. The Performance Management System will be updated in 2024. A survey of BOH staff will occur in quarter 1 of 2024 to determine what educational gaps need to be filled and a presentation schedule will be created.

Goal: Improve alignment/spread, and capacity for CCHD Quality Improvement efforts by encouraging a collaborative approach that engages staff at all levels

Improve alignment, spread, and capacity for CCHD Quality Improvement (QI) efforts by encouraging a collaborative approach to QI that engages staff at all levels (# and % of measures met/not met/and not measured)

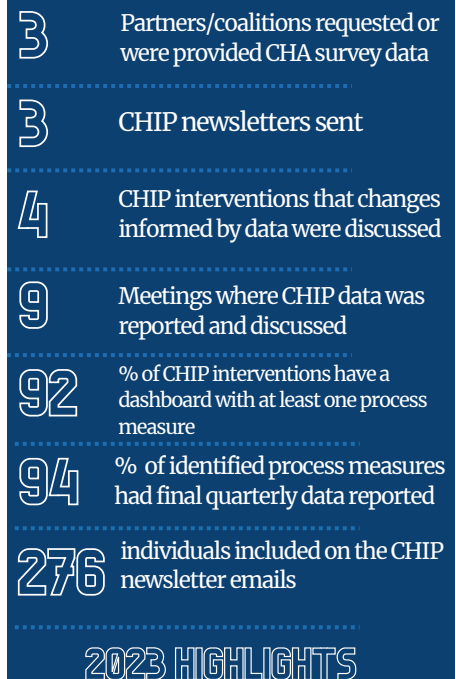
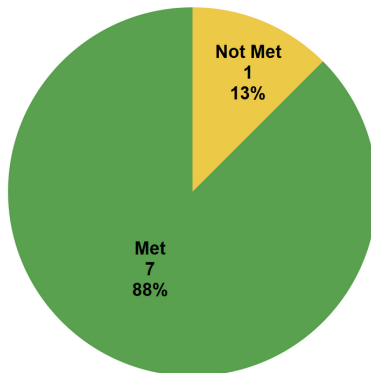


Looking Back: Collaborations on Quality Improvement were at the forefront of departmental priorities in quarters 2-3. In June, all full-time department staff attended and in person, interactive training on Quality Improvement. This training provided a refresher to QI veterans and an intro to QI newbies. Following the training, three QI projects were initiated, all of which are now in the “do” phase of the Plan-Do-Check-Act cycle.

Looking Forward: Targets that were not met involved reporting out Quality Improvement project outcomes and training newly onboarded staff in QI. All three 2023 QI projects were initiated in Fall 2023, therefore, outcomes were not reported in 2023. This measure will be adjusted to “QI project updates” instead of outcomes and quarterly reporting will happen via the employee newsletter, email, and supervisory meetings.

Goal: Lead collaborative efforts with partnering organizations to implement, support, and evaluate Community Health Improvement Plan interventions

Lead collaborative efforts with partnering organizations to implement, support, and evaluate Community Health Improvement Plan interventions. (# and % of measures met/not met/and not measured)



Looking Back: In 2023, significant efforts were made to establish accurate and timely quarterly data collection for the Community Health Improvement Plan. Many meetings with partnering organizations were conducted to establish measures. By the end of the 2023, 92% of measures identified by partners had year-end data to report. CHA survey data was also utilized by community partners in 2023.

Looking Forward: Targets that were not met involved providing Electronic Syndromic Surveillance data reports quarterly to partner organizations. Only one ESSS report was shared with partners in 2023. An organized system to ensure these reports are shared more systematically will be implemented in quarter 1 of 2024.

Cortland County Community Health Improvement Plan

4.1.a

Focus Area #1:
Tobacco/Vaping

Focus Area #2:
COVID-19/Flu Vaccination

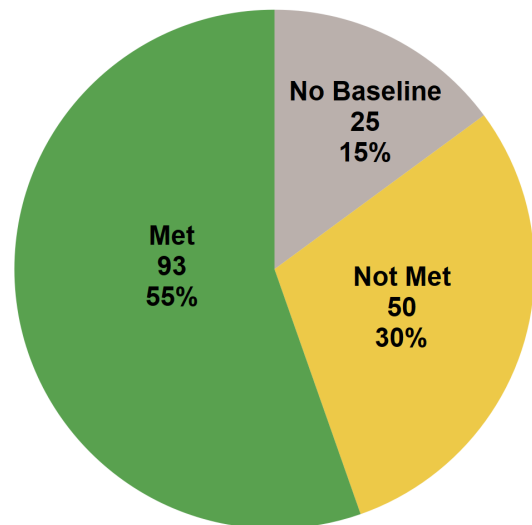
Focus Area #3:
Suicide Prevention

Focus Area #4:
Opioid Overdose



- 2023 marked the first year that the Cortland County community collected CHIP data quarterly.
- 55% of year-end targets established by partner organizations were met.
- Not meeting a target can indicate lack of resources availability, community buy-in, or other barriers related to an initiative.
- Efforts in 2024 will involve addressing gaps (measures not met in 2023) as described in the pages following.

All # and % of measures met/not met/no baseline



View Detailed 2023 Quarterly Updates & Data Methods [Here](#) or Scan the QR Code Below to be Directed to the Dashboard



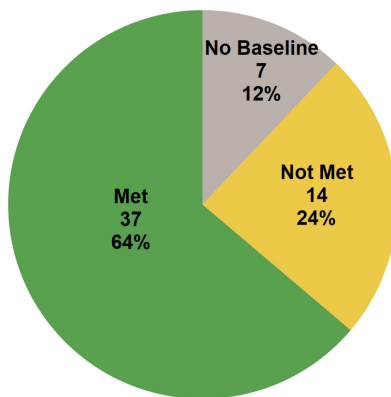
Focus Area: Tobacco/Vaping Prevention



Community Lead: Tobacco Free Zone & The Community Services Board

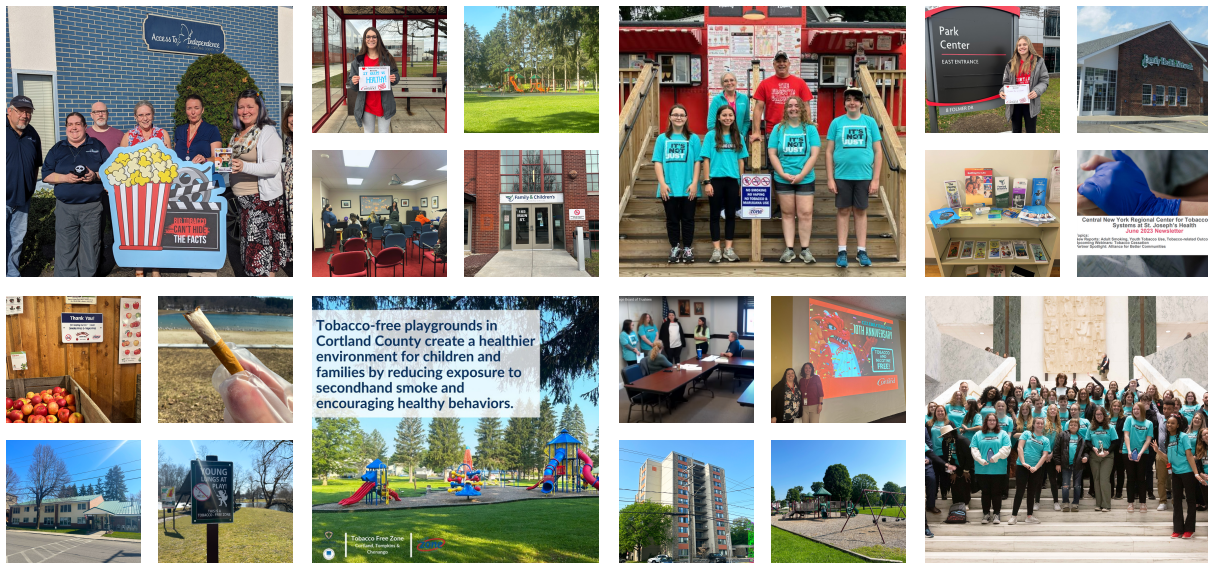
The Tobacco Free Zone program, housed at the Cortland County Health Department, led tobacco/vaping prevention initiatives in Cortland County for 2023. The Community Services Board was utilized to collaborate and report out CHIP data for this focus area in 2023. Through the Community Health Improvement Plan, which aligns directly with, and expands on, the Tobacco Free Zone Workplan, there are 58 measures tracked quarterly for all 11 of the identified tobacco/vaping prevention strategies.

All # and % of measures met/not met/no baseline

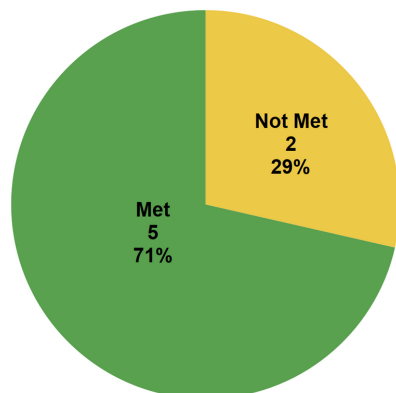


- **37 (64%) of the 58 identified measures were met.**
- **30+ partnering organizations** participated in implementation of tobacco/vaping prevention strategies in 2023 including; healthcare, behavioral health, public health, education, human services, nonprofits, law enforcement, libraries, media, community members and more.

Community Services Board meetings are open to the public. Interested community members can contact Gail Spitzer, at gspitzer@cortland-co.org. Community members interested in becoming involved with Tobacco Free Zone contact Jennifer Hamilton, jhamilton@cortland-co.org.



#1 Youth Engagement # and % of measures met/not met/no baseline



- 1 Youth speaking engagements at town/village board meetings
 - 3 Youth focused organizations publicly supported protecting youth from tobacco store marketing
 - 47 Reality Check meetings in Cortland County
 - 200 Youth participated in Tobacco Free Zone activities
- 2023 HIGHLIGHTS

Looking Back: In 2023, the Reality Check youth program engaged with many sectors and participated in events to educate peers/the community about how the tobacco industry manipulates young people and recruits them into a lifetime of addiction. Among other activities, youth presented to the Homer Village Board on experiences with vaping in schools, tobacco industry marketing, and how municipal leaders can create policy to limit marketing. Elected officials voiced support to consider legislation to regulate the number of tobacco retailers in the village

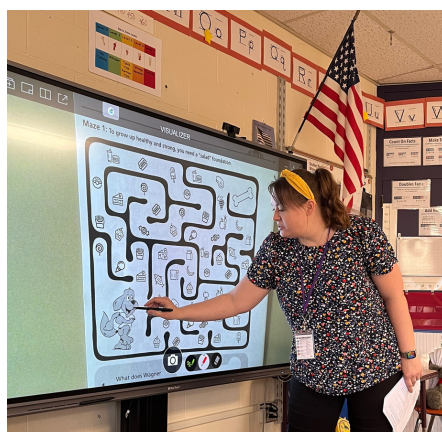
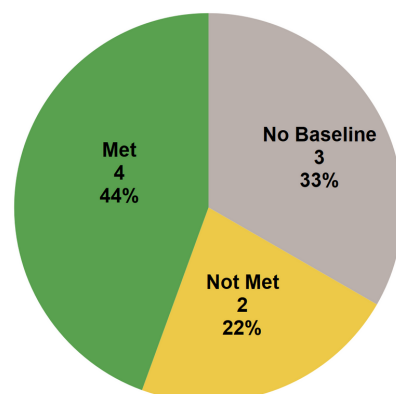
Looking Forward: In 2024, the Reality Check program will continue existing program activities under the Tobacco Free Zone grant in order to to expose the tobacco industry and reduce the number of teens using tobacco/vaping products in Cortland County.

Data Source: Cortland County Health Department (Tobacco Free Zone Program)

Implementation Partners: Cortland County Health Department, Homer Central School District, Homer Village Board, Youth Focused Organizations

Strategy: Youth Prevention Programs

#2 Youth Prevention Programs # and % of measures met/not met/no baseline



- 3 Cortland Prevention Resources staff members were trained in Teen Intervene
 - 6 Schools participated in the Too Good for Drugs Program
 - 54 Classrooms received all 10 Too Good for Drugs lessons
 - 642 Students received the Too Good for Drugs Program
- 2023 HIGHLIGHTS

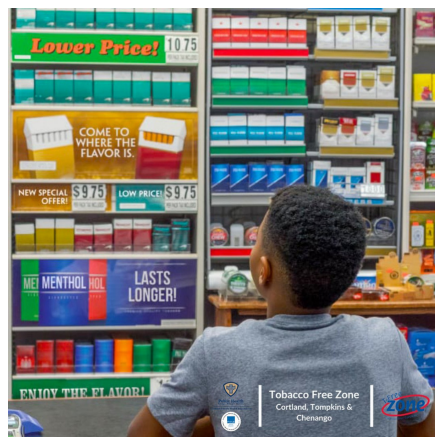
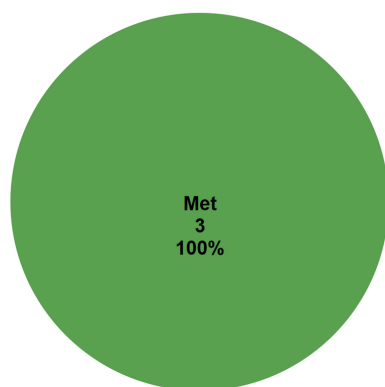
Looking Back: Cortland Prevention Resources provided the ten session, evidenced based program Too Good for Drugs in many schools across the county in 2024 including; Barry, Smith, Randall, McGraw, Marathon, and Cincinnatus. Efforts were also placed on getting CPR staff trained in the evidenced based program Teen Intervene.

Looking Forward: In 2024, CPR and local school districts will continue to offer the Too Good for Drugs Program, as well as exploring other prevention program options. CPR plans to expand and more heavily promote the Teen Intervene Program in the community in 2024.

Data Source: Cortland Prevention Resources

Implementation Partners: Cortland Prevention Resources, Barry School, Randall School, Smith School, McGraw School, Marathon School, Cincinnatus School

#3 Compliance Checks # and % of measures met/not met/no baseline



42 Adult tobacco compliance checks

86 Youth tobacco compliance checks

100 % of retailers received a notice of violation following an enforceable finding

2023 HIGHLIGHTS

Looking Back: In 2024, CCHD's Environmental Health ATUPA (Adolescent Tobacco Underage Protection Act) Program efforts were marked by stringent compliance measures and enforcement actions aimed at upholding regulations that restrict the sale of tobacco products to individuals under the age of 21. Compliance checks at licensed tobacco retailers serve as a critical tool in ensuring that retailers adhere to the mandated age restriction, thus preventing underage access to tobacco products. The office conducted 86 youth compliance checks - which led to six enforcement actions including; two cases of selling tobacco products to an individual under the age of 21 and four instances of offering prohibited flavored vapor products for sale to the public.

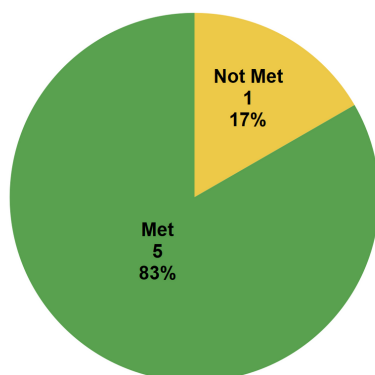
Looking Forward: In 2024, the ATUPA program will continue to navigate the complex landscape of tobacco regulation and enforcement and conduct mandated compliance checks on tobacco retail locations.

Data Source: Cortland County Health Department (Environmental Health Division/ATUPA)

Implementation Partners: Cortland County Health Department Environmental Health Division

Strategy: Environmental Changes (Retail)

#5 Environmental Changes: Retail # and % of measures met/not met/no baseline



5 Community meetings with LGBTQ+ organizations where tobacco marketing was discussed

7 Influential community members or organizations announced supported to protect youth from tobacco marketing

21 Posts on CCHD Facebook related to deceptive tobacco marketing that targets LGBTQ+, Youth, or People of Color

50 Communications targeting the community about deceptive marketing that targets LGBTQ+, Youth, and People of Color

2023 HIGHLIGHTS

Looking Back: The Tobacco Free Zone program continued to work towards creating an environment that reduces access to, and marketing, related to tobacco/vaping products. In particular, the program focused on collaborations with LGBTQ organizations in the community - including the Cortland LGBTQ Center, National LGBTQ Cancer Network, and the Cross Community LGBTQIA+ Advocacy Alliance to raise awareness about the manipulative marketing tactics tobacco companies use to recruit LGBTQ+ individuals. The youth retail environment was also a focus with several influential community members voicing support to protect youth from tobacco marketing - including Homer High School's Principal and Superintendent.

Looking Forward: In 2024, the Tobacco Free Zone program will continue to work with local municipalities to implement effective policy solutions to reduce access - for example, limiting the number of places and locations where tobacco/vaping products are sold.

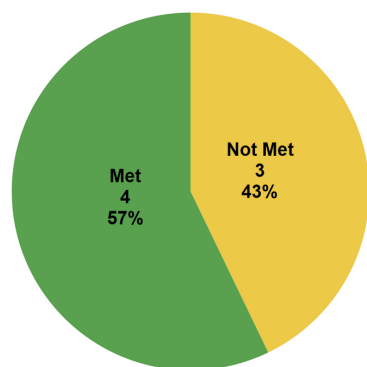
Data Source: Cortland County Health Department (Tobacco Free Zone)

Implementation Partners: Tobacco Free Zone (Cortland County Health Department), Homer School District, LGBTQ Organizations, Community Members, Other Policymakers and Influential community organizations/individuals

Strategy: Environmental Changes (Housing)

4.1.a

#7 Environmental Changes: Housing # and % of measures met/not met/no baseline



- 3 Meetings with section 8 housing managers to educate them on smoke free policies
- 4 Media channels used to target community members with smoke free housing messages
- 6 Partnering agencies provided support for smoke free housing policies
- 9 Earned media articles related to smoke free housing

2023 HIGHLIGHTS

Looking Back: In 2023, the Tobacco Free Zone program continued to partner with local agencies to create an environment that supports smoke free housing options. Partners that provided support for smoke free housing included; Housing Visions, Catholic Charities, YWCA & Christopher Community Inc. with Grace Brown House.

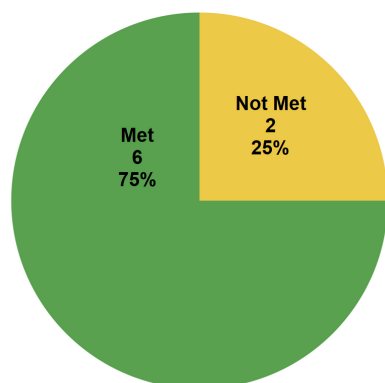
Looking Forward: In 2024, the Tobacco Free Zone program will continue to work with housing stakeholders and the community to increase public support for smoke-free housing through media campaigns, landlords testimonials and other environmental methods.

Data Source: Cortland County Health Department (Tobacco Free Zone Program)

Implementation Partners: Cortland County Health Department, Catholic Charities, YWCA, Housing Visions, Other Housing Stakeholders/Landlords

Strategy: Environmental Changes (Outdoor)

#6 Environmental Changes: Outdoor # and % of measures met/not met/no baseline



- 2 Presentations held at trade groups or service clubs
- 4 Community meetings where the importance of implementing outdoor air policies was presented on
- 5 Employers adopted tobacco free outdoor air policies
- 14 Employers (with 20 or more employees) received literature/toolkit on outdoor air policies

2023 HIGHLIGHTS

Looking Back: In 2023, the Tobacco Free Zone program continued to work on policy and environmental changes related to outdoor environments. Several employers/municipalities adopted policies in 2023 including the Frosty Caboose located in Cortland.

Looking Forward: In 2024, the Tobacco Free Zone program will continue to implement identified strategies related to outdoor environments. CCHD will expand communications targeting community members related to this topic.

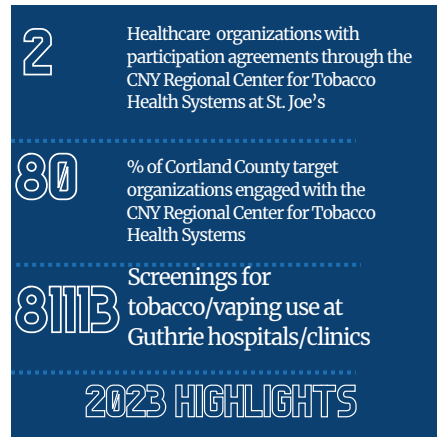
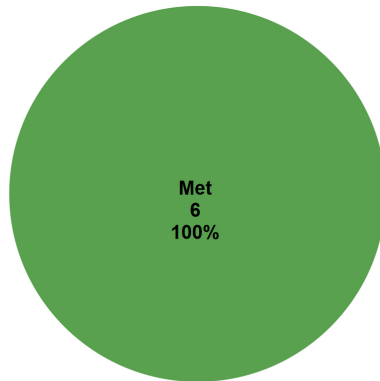
Data Source: Cortland County Health Department (Tobacco Free Zone)

Implementation Partners: Cortland County Health Department, Municipalities, Businesses/Employers

Strategy: Integration of Tobacco Treatment in Healthcare

4.1.a

#9 Integration of Tobacco Dependence Treatment in Healthcare # and % of measures met/not met/no baseline



Looking Back: The CNY Regional Center for Tobacco Health Systems at St. Joe's led efforts related to integration of tobacco dependence treatment in healthcare settings. The agency works with Family Health Network, Guthrie, Mental Health, Family and Children's Counseling Services and other healthcare/behavioral health providers to implement evidence based tobacco cessation treatment. Guthrie screened thousands of patients for tobacco/vaping use in 2023.

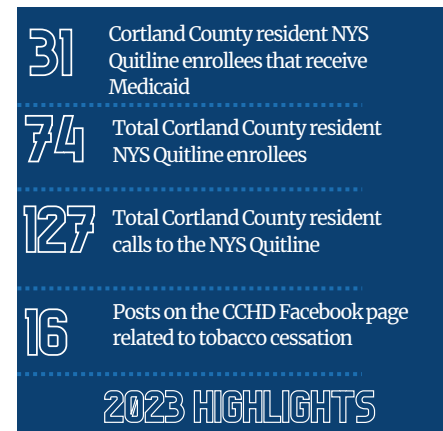
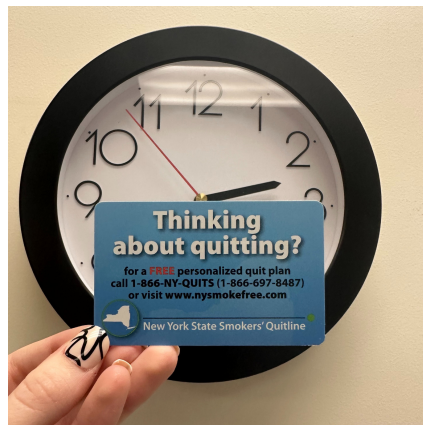
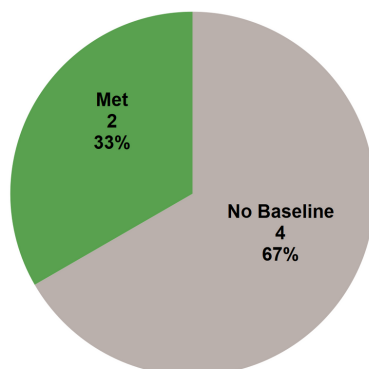
Looking Forward: The Cortland County Health Department will work to further expand data collection related to this strategy in 2024, including collecting data directly from healthcare partners.

Data Source: CNY Regional Center for Tobacco Health Systems, Guthrie

Implementation Partners: Cortland County Health Department (promotion), St. Joe's, Guthrie, Family Health Network, Cortland County Mental Health Department, FCCS

Strategy: Promote Evidence Based Quitting Approaches

#10 Promote Evidence-Based Quitting Approaches and the NYS Quitline # and % of measures met/not met/no baseline



Looking Back: The New York State Department of Health Tobacco Control program managed and implemented the NYS Quitline in Cortland County, as well as across the state. Locally, Quitline resources are shared with providers by the CNY Regional Center for Tobacco Health Systems. The Cortland County Health Department promoted the Quitline and evidenced based treatments on social media pages.

Looking Forward: The New York State Department of Health Tobacco Control program will continue to offer the Quitline in Cortland County. Additionally, CCHD will work with Quitline staff to establish measureable targets related to Cortland County resident Quitline participation.

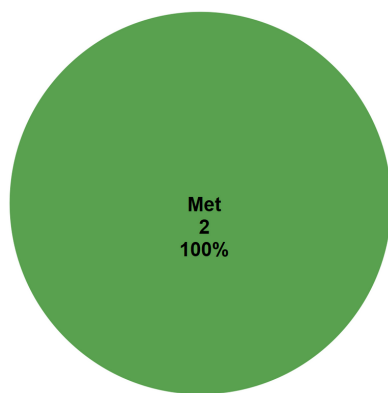
Data Source: Cortland County Health Department Tobacco Free Zone (via the NYS Quitline)

Implementation Partners: NYS Quitline, Cortland County Health Department (promotion), St. Joe's, Healthcare providers

Strategy: Employee Tobacco Cessation Resources

4.1.a

#8 Employee Tobacco Cessation Resources # and % of measures met/not met/no baseline



Looking Back: The Cortland County Employee Wellness Committee spearheaded efforts on educating county employees on tobacco cessation resources in 2023. Additionally, Guthrie Cortland Medical Center regularly communicates with staff about EAP programs which can work to address tobacco use in staff.

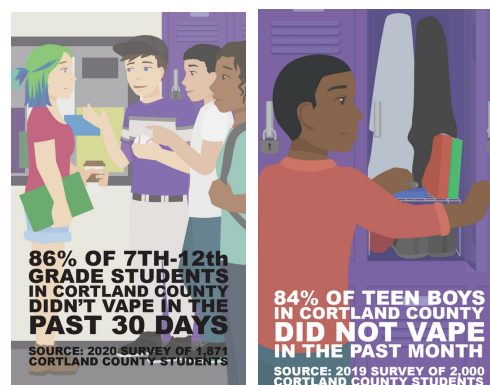
Looking Forward: In 2024, the Cortland County Health Department will work to identify other agencies/employers in the community that implement EAP programs and provide tobacco cessation resources and integrate their data into the CHIP.

Data Source: Cortland County Employee Wellness Committee, Guthrie Cortland Medical Center
Implementation Partners: Cortland County, Guthrie Cortland

Strategy: Social Norming Campaign

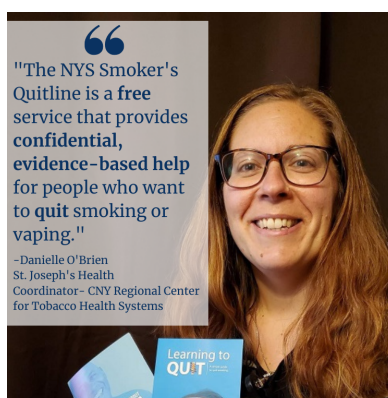
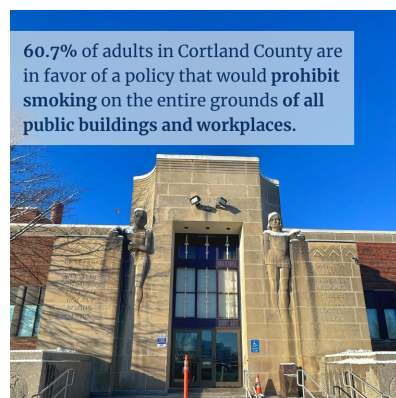
Looking Back: In 2023, the Rural Health Institute designed a social norming campaign to educate youth on misperceptions related to vaping. The youth survey was also updated to include more effective evaluation questions for the campaign. Funding was not secured to implement the campaign in 2023.

Looking Forward: In 2024, funding will be identified to implement the social norming campaign on commonly used social media platforms and other marketing channels.

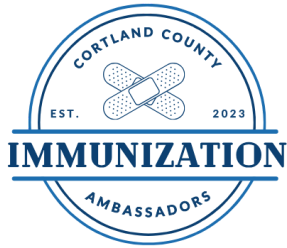


Data Source: Rural Health Institute

Implementation Partners: Rural Health Institute, Local Schools



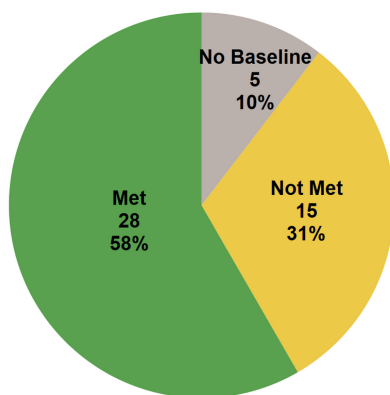
Focus Area: COVID-19/Flu Vaccination



Community Lead: Immunization Coalition/Community Ambassadors

The Immunization Coalition & Ambassadors of Cortland County, housed under the Cortland County Health Department's Immunization Action Program (IAP), led COVID-19/Flu vaccination initiatives in Cortland County for 2023. Through the Community Health Improvement Plan, which aligns directly with and expands on the Immunization Action Program's workplan, there are 48 measures tracked quarterly for all 6 of the identified COVID-19/Flu vaccination strategies.

All # and % of measures met/not met/no baseline

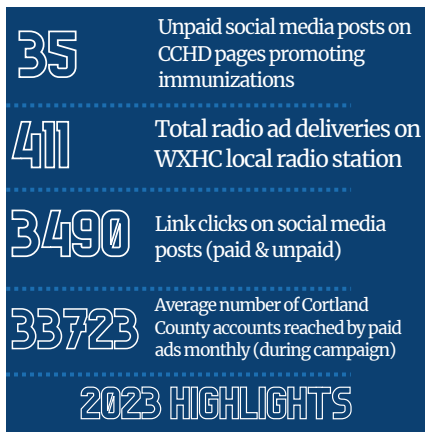
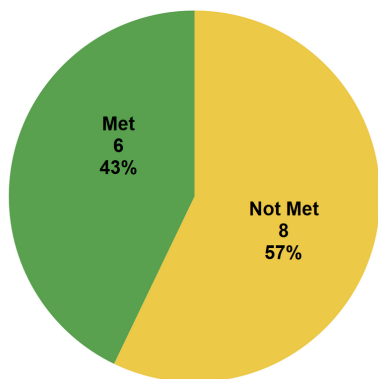


- 28 (58%) of the 48 identified measures were met.
- 16+ partnering organizations participated in implementation of vaccination strategies in 2023 including; healthcare, public health, education, human services, nonprofits, community members and more.

Immunization Coalition meetings are open to the public and CCHD is actively recruiting Immunization Ambassadors. Interested community members can contact Suzanne Osterhoudt, at sosterhoudt@cortland-co.org.



#1 Social Marketing Immunizations # and % of measures met/not met/no baseline



Looking Back: In 2023, the COVID-19 vaccination climate was ever changing. Initially, the Immunization Action Program at Cortland County Health Department planned to continue paid advertising for COVID-19 vaccines throughout 2023. However, in April 2023 the program paused advertising to redesign the campaign messaging to better align with current COVID-19 vaccine recommendations and changing COVID-19 vaccination landscape.

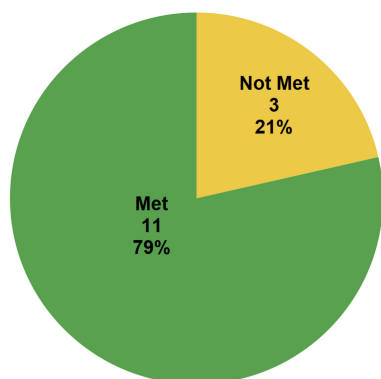
Looking Forward: In 2024, the paid COVID-19 and Flu Social Marketing campaign will resume implementation until July 2024. At that time, the social marketing campaign will be reliant on organic reach through Cortland County Health Department and other partnering organizations.

Data Source: Cortland County Health Department (Immunization Action Program)

Implementation Partners: Cortland County Health Department, WXHC, Cortland Standard, The Rural Health Institute

Strategy: Immunization Ambassadors

#2 Immunization Ambassadors # and % of measures met/not met/no baseline



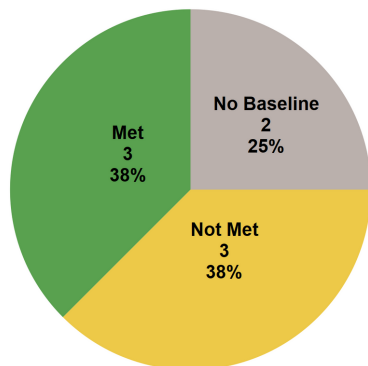
Looking Back: In 2023, the Cortland County Immunization Ambassador program was successfully launched in September. Ambassadors attended a multitude of events throughout the Fall/Winter, reaching historically low vaccine uptake populations across the community, and providing education on how to talk about vaccines, misinformation, and more.

Looking Forward: The Immunization Ambassador program will continue through July 2024. The Cortland County Health Department is seeking additional funding sources to sustain the program into the 2024-2025 respiratory season.

Data Source: Cortland County Health Department (Immunization Action program)

Implementation Partners: Cortland County Health Department (Immunization Action Program), Community members, Access to Independence, Area Agency on Aging, Cortland LGBTQ Center, Catholic Charities, Homer School District, Marathon School District, YMCA, SUNY Cortland, Hollenbecks, Price Chopper

#3 Home Delivered Vaccination # and % of measures met/not met/no baseline



- 25 Family Health Network Mobile Medical Unit events
- 33 Immunization Ambassador outreach events where SVHC Supports for Health program was promoted
- 99 Seven Valleys Health Coalition social media posts promoting supports for health

2023 HIGHLIGHTS

Looking Back: In 2023, the Family Health Network mobile medical unit provided increased access to underserved areas of the community, including offering COVID-19 and Flu immunizations. The Seven Valley's Health Coalition Supports for Health program offered ride to vaccine appointments, although the service was not utilized. The program was incorporated into the information sharing activity offered at Immunization Ambassador events (allowing community members to share information about Supports for Health through text message).

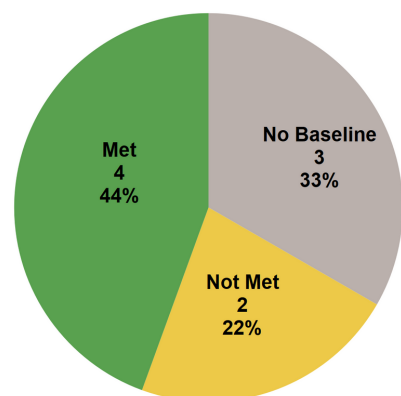
Looking Forward: In 2024, the Family Health Network mobile medical unit will continue to provide healthcare resources to underserved areas of Cortland County.

Data Source: Family Health Network, Seven Valleys Health Coalition

Implementation Partners: Family Health Network, Seven Valleys Health Coalition, Cortland County Health Department (promotion)

Strategy: Medical Provider Vaccine Standardization/Medical Reminders

#2 Youth Prevention Programs # and % of measures met/not met/no baseline



- 25 % of Guthrie patients are opted into text message reminders
- 100 % of Family Health Network clinics use the presumptive approach to vaccination

2023 HIGHLIGHTS

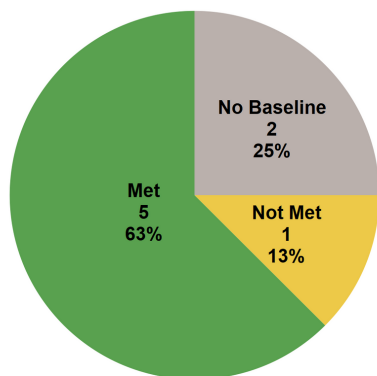
Looking Back: In 2023, Guthrie Cortland Medical Center implemented appointment text message reminders for all appointments (including vaccine appointments) with about a quarter of the patient population opting in. Family Health Network implements the presumptive approach to vaccines in all clinic locations.

Looking Forward: In 2024, the Cortland County Health Department will work with healthcare organizations to better understand and report on vaccine standardization and medical reminders strategies being implemented.

Data Source: Family Health Network, Guthrie Cortland Medical Center

Implementation Partners: Family Health Network, Guthrie Cortland Medical Center, Other Local Healthcare Providers

#5 Workplace Vaccine Clinics # and % of measures met/not met/no baseline



12 Workplace Flu immunization clinics held by Guthrie

5 Workplace COVID-19 vaccine clinics held by Guthrie

94 % of Family Health Network healthcare staff vaccinated for Flu (2022-2023 formula)

95 % of Guthrie hospital and nursing home healthcare staff vaccinated for flu (2022-2023 formula)

2023 HIGHLIGHTS

Looking Back: In 2023, the CHIP tracked workplace vaccination and clinics exclusively in healthcare settings with the designation of Diagnostic & Treatment Centers.

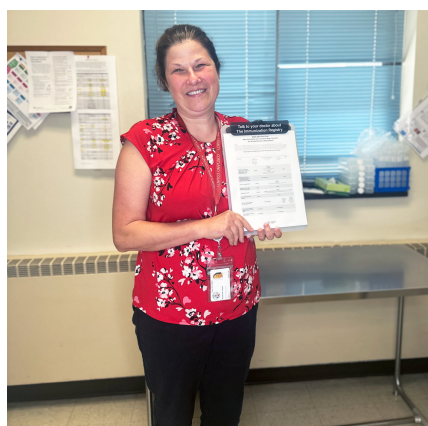
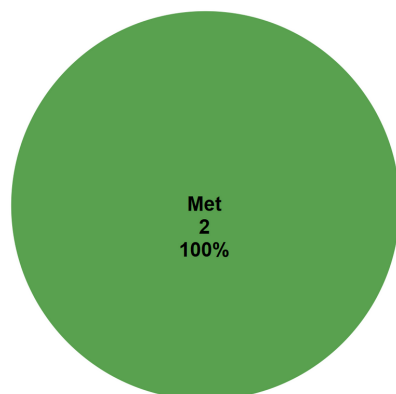
Looking Forward: In 2024, the Cortland County Health Department will work to identify other employers providing workplace vaccination clinics for COVID-19 and Flu. Additionally, outreach and education will be provided to Diagnostic & Treatment Centers in the community with reportedly low flu vaccination rates.

Data Source: New York State Department of Health, Guthrie Cortland Medical Center

Implementation Partners: Guthrie Cortland Medical Center, Family Health Network, Other Diagnostic & Treatment Center Locations

Strategy: Public Health Detailing

#6 Public Health Detailing # and % of measures met/not met/no baseline



4 Public health detailing visits conducted related to adult immunizations

100 % of public health detailing visits recieved a follow up in the next quarter

2023 HIGHLIGHTS

Looking Back: In 2023, the Cortland County Health Department Immunization Action Program conducted four public health detailing visits at local healthcare organizations related to adult immunizations. Detailing visits are conducted at a variety of offices and, in 2023, included Family Health Network in Marathon & Cincinnatus and Guthrie Family Medicine in Homer.

Looking Forward: In 2024, the Cortland Cortland County Immunization Action Program will continue to partner with local healthcare providers and provide public health detailing visits related to adult immunizations (including COVID-19 and Flu).

Data Source: Cortland County Health Department (Immunization Action Program)

Implementation Partners: Cortland County Health Department, Local Healthcare Providers (Family Health Network & Guthrie)

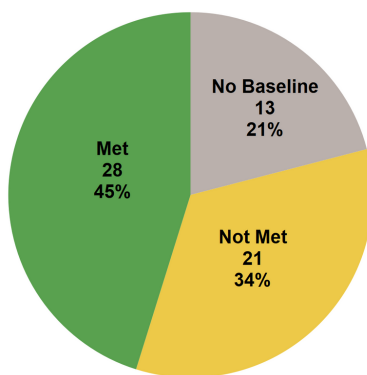
Focus Area: Prevent Suicide



Community Lead: SPEAK UP Cortland Suicide Prevention Coalition

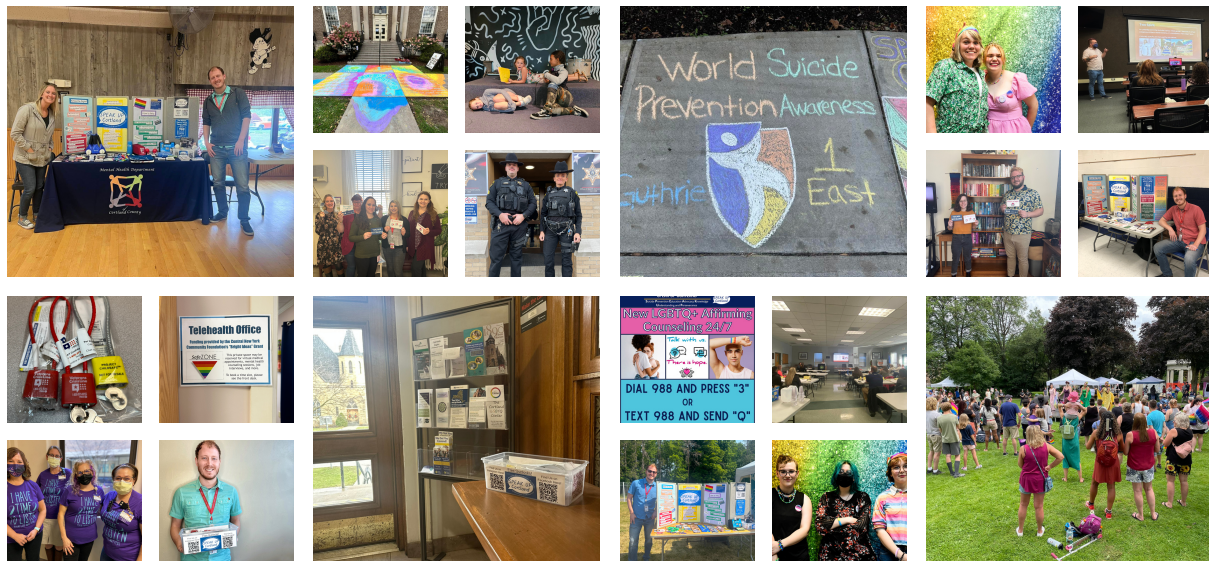
The Cortland County Health Department collaborated with the SPEAK UP Cortland Suicide Prevention coalition (led by Cortland County Mental Health and Family & Children's Counseling Services) throughout 2023 to identify and begin data collection for suicide prevention strategies in the community. Through the Community Health Improvement Plan, which aligns directly with SPEAK UP Cortland's Strategic Plan, there are 62 measures tracked quarterly for 10 out of the 13 identified suicide prevention strategies.

All # and % of measures met/not met/no baseline

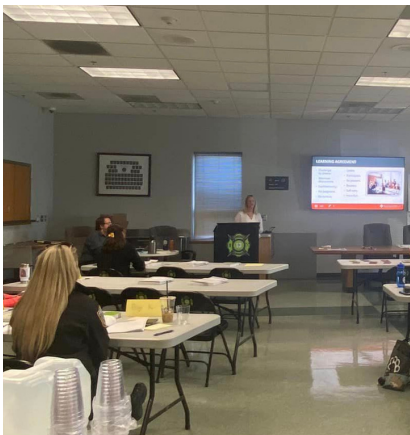
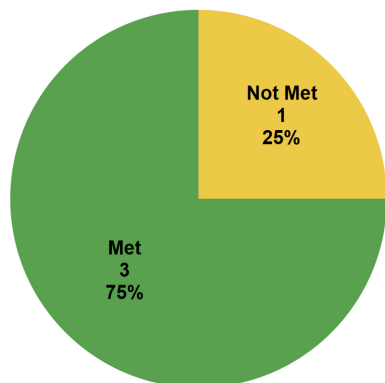


- **28 (45%) of the 62 identified measures were met.**
- There are several new grants/initiatives already in the works for 2024 to further expand suicide prevention strategies in the community.
- **35+ partnering organizations** participated in implementation of suicide prevention strategies in 2023 including; healthcare, behavioral health, public health, education, human services, nonprofits, law enforcement, libraries, media, community members and more.

SPEAK UP Cortland meetings are open to the public and take place the 3rd Wednesday of every other month. Interested community members can contact Cristin Marshall, Co-Chair, at cmarshall@cortland-co.org



#1 Gatekeeper Trainings # and % of measures met/not met/establishing baseline (2023)



2 Mental Health Health First Aid Trainings in Cortland County

3 Youth Mental Health First Aid Trainings in Cortland County

7 American Foundation for Suicide Prevention trainings initiated by SPEAK UP

100 % of SUNY Cortland PD Officers trained in Mental Health First Aid

2023 HIGHLIGHTS

Looking Back: The Cortland County Mental Health Department offered both Mental Health First Aid and Youth Mental Health First Aid trainings. SPEAK UP Cortland regularly promoted American Foundation for Suicide Prevention trainings on their listserv of over over 70 partners.

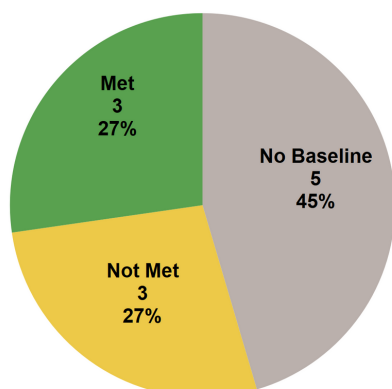
Looking Forward: In 2024 the Rural Health Institute received a grant that will significantly expand access to Youth Mental Health First Aid trainings and bring the Safe Talk gatekeeper trainings to Cortland County residents.

Data Source: Cortland County Mental Health, SUNY Cortland PD

Implementation Partners: Cortland County Mental Health, SUNY Cortland PD, American Foundation for Suicide Prevention, SPEAK UP Cortland

Strategy: Crisis Response

#2 Crisis Response # and % of measures met/not met/establishing baseline (2023)



6 Law enforcement officers trained in Crisis Intervention

82 % of 988 calls from Cortland County (confirmed during call) were confirmed de-escalated

92 988 calls from Cortland County (confirmed during call, not all calls have confirmed locations)

174 Social media posts by CCHD, FCCS, Mental Health, and SPEAK UpP

2023 HIGHLIGHTS

Looking Back: The 988 Suicide & Crisis Lifeline was launched in July 2023 and data shows it is being actively used by residents. Cortland County Mental Health partnered with law enforcement to provide Crisis Intervention Training in September 2024. Crisis Response resources were successfully promoted by partners on social media pages (including 988 promotion). Liberty Resources served as the Mobile Crisis response partner for Cortland County in 2023.

Looking Forward: In 2024, the coalition will be working on collecting regular data with Liberty Resources on Mobile Crisis calls and using 2023 baselines to set targets for 2024 related to 988 usage. The Rural Health Institute received a grant that will expand Crisis Intervention Training in 2024.

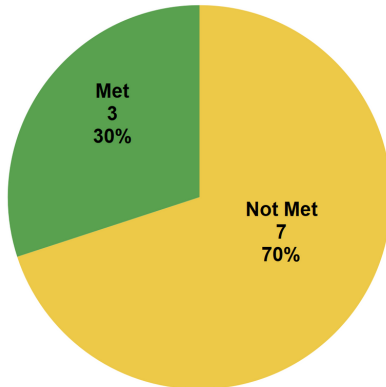
Data Source: Cortland County Mental Health, Contact Community Services

Implementation Partners: Cortland County Mental Health, Liberty Resources, Contact Community Services/988, Cortland County Sheriff, City of Cortland Police, Homer Village Police, New York State Troopers, Family & Children's Counseling Services (promotion), Cortland County Health Department (promotion), SPEAK UP Cortland (promotion).

Strategy: Reduce Access to Lethal Means

4.1.a

#3 Reduce Access to Lethal Means # and % of measures met/not met/establishing baseline



17	Social media posts on Mental Health, CCHD, and SPEAK UP pages
17	Locations in Cortland County handing out gun locks
96	Medication lock boxes distributed to community partners
2555	Gun locks distributed to community partners
2023 HIGHLIGHTS	

Looking Back: SPEAK UP Cortland established a gun lock distribution program using gun locks purchased by the City of Cortland PD. Medication lock boxes donated by Prevention Network CNY were also distributed by SPEAK UP in 2023. Discussions regarding bridge safety signs began with the DOT.

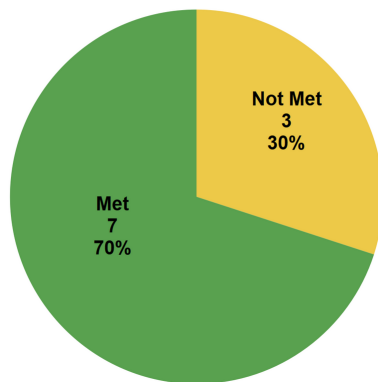
Looking Forward: In 2024, SPEAK UP Cortland will continue to expand the number of gun locks available in community locations to meet the target of 25 locations, as well as ensuring that the American Foundation for Suicide Prevention pamphlets are available. Outreach to rod/gun clubs on safe storage techniques will also be a focus of 2024. Continued research on bridge signs will occur.

Data Source: SPEAK UP Cortland

Implementation Partners: SPEAK UP Cortland, Cortland County Health Department (NYS Fellowship Program), City of Cortland PD, Cortland County Mental Health, Cortland County Clerk, Cortland LGBTQ Center, Cortland Free Library, Lamont Library, Peck Memorial Library, Phillips Free Library, Access to Independence, Syracuse Recovery Services, Cortland DSS, Djafari Pediatrics, Family Health Network, Healing Hearts Collaborative, Department of Motor Vehicles

Strategy: Promote Connectedness for the LGBTQ+ Population

#4 Promote Connectedness and Strengthen Social Capital of LGBTQ Population # and % of measures met/not met/establishing baseline



31	Community engagement events held by the LGBTQ Center
49	Adults attended Wavelengths at the LGBTQ Center
105	Individuals attended drop in hours at the LGBTQ Center
613	Individuals attended cultural competency trainings provided by the LGBTQ Center
2023 HIGHLIGHTS	

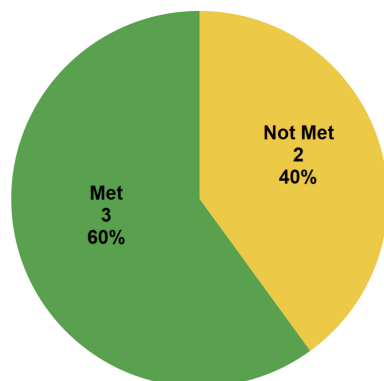
Looking Back: The Cortland LGBTQ Center spearheaded many projects in 2023 to strengthen social capital of the LGBTQ population in Cortland including; hosting the first ever Cortland Pride. Cultural competency trainings were also provided in the community to support inclusiveness.

Looking Forward: In 2024, this strategy will focus on efforts to reach LGBTQ youth including collaborating with schools to have the LGBTQ Center staff attend school club meetings and promoting the LGBTQ parenting series offered by the center.

Data Source: The Cortland LGBTQ Center

Implementation Partners: The Cortland LGBTQ Center, SUNY Cortland, TC3, Local School Districts, Community Members

#5 Promote Connectedness and Strengthen Social Capital of Disabled Population # and % of measures met/not met/establishing baseline



7 Community engagement events hosted by ATI Cortland

22 Grassroots advocates enrolled through ATI Cortland

67 Individuals engaged in peer counseling

472 individuals attended ATI Cortland social gatherings

2023 HIGHLIGHTS

Looking Back: Access to Independence of Cortland County, Inc. provided a variety of services to the community that promoted connectedness and strengthened social capital for people with disabilities.

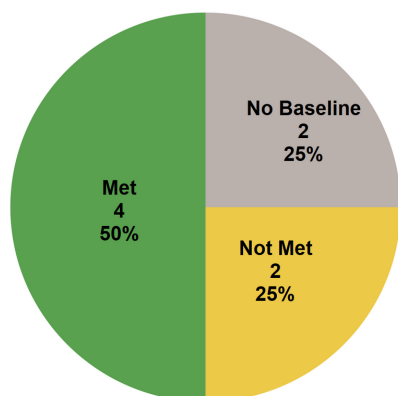
Looking Forward: In 2024, ATI, Inc. will continue to implement the interventions outlined in the CHIP to strengthen social capital and community connectedness for people with disabilities and the community as a whole.

Data Source: Access to Independence of Cortland, Inc.

Implementation Partners: Access to Independence of Cortland, Inc., community members

Strategy: Social Emotional Learning/Parenting Skills Programs

#10 Social Emotional Learning Programs/Parenting Skills Programs # and % of measures met/not met/no baseline



6 Youth registered for the Girl's Circle program

15 Individuals complete the Parenting Wisely Program

38 Family goals were met by CAPCO Head Start/Early Head Start families

128 Youth received Gizmo's Pawesome Guide to Mental Health

2023 HIGHLIGHTS

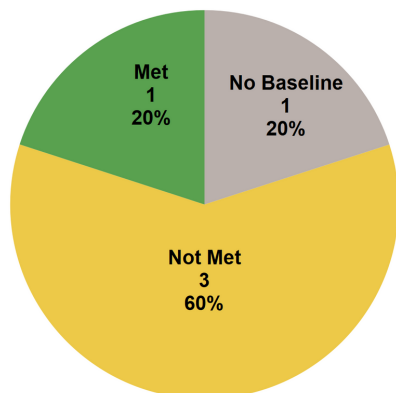
Looking Back: Cortland Prevention Resources (CPR) provided a variety of evidence based/informed social emotional and parenting skills programs in 2023 including; Gizmo's Pawesome Guide to Mental Health at Homer School District, Girl's Circle over the summer, and Parenting Wisely/Positive Parenting throughout the year. CAPCO's Head Start/Early Head Start program sets family goals and provided parenting skills programs in 2023.

Looking Forward: In 2024, in partnership with local school districts, CPR will be expanding both the Girl's Circle and Gizmo's programs to additional youth/schools. The agency will also be implementing the Boy's Council evidence based program.

Data Source: Cortland Prevention Resources

Implementation Partners: Cortland Prevention Resources, Cortland County Community Action Program, Cortland County Mental Health Association, Local School Districts

#11 Safe Suicide Reporting # and % of measures met/not met/no baseline



LOCAL NEWS
Family & Children's Counseling Services Given Proclamation for P.S. I Love You Day by County Legislature
on February 1, 2023

18 Articles in the Cortland Standard, WXHC, or Cortland Voice promoted stories of hope or local events, treatment, initiatives, prevention related to suicide or mental health

2023 HIGHLIGHTS

Looking Back: In 2023, SPEAK UP Cortland collected data on local media articles with mentions of suicide to determine inclusion of 988 information and reporting on stories of hope/resources.

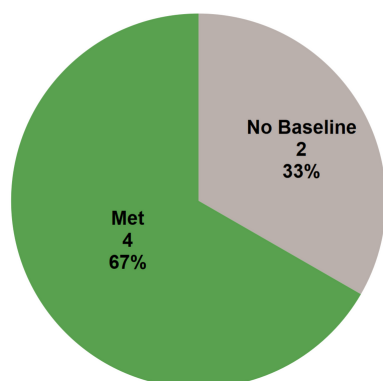
Looking Forward: In 2024, SPEAK UP Cortland will work with local media entities to discuss safe suicide reporting practices and follow up on news articles related to suicide death that do include 988 or other treatment resources.

Data Source: SPEAK UP Cortland

Implementation Partners: SPEAK UP Cortland, Cortland Standard, WXHC, Cortland Voice, Other Media Entities

Strategy: Strengthen Economic Supports & Promote Housing Stabilization

#12 Strengthen Economic Supports and Promote Housing Stabilization # and % of measures met/not met/no baseline



33 Guthrie clinic patients reported housing instability

33 Homes utilized CAPCO's EMPOWER+NY program

81 Homes used Home Energy Assistance through CAPCO

9996 Guthrie clinic patients screened for social determinants

2023 HIGHLIGHTS

Looking Back: Guthrie Cortland Medical Center primary care practices screened and referred patients for needs related to social determinants of health – including financial and housing stress. CAPCO's energy services programs serviced many households, making homes more affordable by using weatherization to conserve energy.

Looking Forward: There are many initiatives related to strengthening economic supports and promoting housing stabilization that were being implemented in 2023, and will be implemented in 2024, that are not captured in the CHIP including by Catholic Charities, the YWCA, the Department of Social Services, CAPCO, Cortland Works Career Center and more. In 2024, collaborative work will occur to better identify how these initiatives relate to this CHIP strategy, and how they can be reported.

Data Source: Guthrie Cortland Medical Center, CAPCO

Implementation Partners: Guthrie Cortland Medical Center, CAPCO, Catholic Charities, YWCA, Department of Social Services, Cortland Works Career Center

The following suicide prevention strategies were implemented in 2024, but data collection was either not established with the partnering organizations or there was no baseline set. In 2024, Cortland County Health Department will work with healthcare and behavioral health providers to more effectively track measures related to these strategies.

Implementation partners: Guthrie Cortland Medical Center, Family Health Network, Cortland County Mental Health Department, Family & Children's Counseling Services

Strategy: Reduce Provider Shortages

- 2 Systems changes at Family Health Network to support telehealth
 - 16 Clinicians offering mental health related telehealth services at Family Health Network
- 2023 HIGHLIGHTS

Family Health Network worked on systems changes (technology, policies) to support telehealth and many staff provide mental health related telehealth services



Strategy: Integrated Primary & Behavioral Healthcare

- 2 Healthcare organizations offering integrated primary/behavioral health
 - 3 Behavioral healthcare providers on staff at Family Health Network
- 2023 HIGHLIGHTS

Family Health Network and Family & Children's Counseling Services offered integrated primary & behavioral healthcare in 2023.



Strategy: Safer Suicide Care

Data tracking not established

Strategy: Screening & Safety Planning

Data tracking not established

Strategy: Postvention

Data tracking not established



Focus Area: Opioid Overdose

Healing Cortland

Community Lead: Healing Cortland

The Opioid Overdose Focus area for the Community Health Improvement Plan is unique in that the **Healing Cortland Project** oversees all data collection efforts. The Cortland County Health Department participates in Opioid Task initiatives, and supports the work of the Task Force.

Data related to Opioid Overdose strategies can be requested from Epidemiologist, Nicole Carter at ncarter@cortlandareactc.org

Interventions:

- Opioid Overdose education and naloxone distribution
- Medication for Opioid Use Disorder (MOUD) treatment
- Safer prescribing and dispensing
- Social marketing – Overdose Prevention
- Syringe services
- Screening, Brief Intervention, Referral to Treatment
- Support Systems/Peer Supports

Community members interested in the Opioid Task Force can contact Sara Watrous at swatrous@cortlandareactc.org



Cortland County Health Department Programs

4.1.a

Attachment: CCHD 2023 Annual Report (12178 : Cortland County Health Department 2023 Annual Report)

- Emergency Preparedness
- Early Intervention
- Children and Youth with Special Healthcare Needs
- Pre-K Special Education
- Child Find
- Cancer Services Program
- Healthy Neighborhoods Program
- Injury Prevention & Traffic Safety
- Tobacco Free Zone
- Radon
- Opioid Overdose Prevention (Narcan)
- Cortland County Youth Bureau
- STI Prevention
- Communicable Disease
- TB program
- Immunization
- Lead Poisoning Prevention
- Rabies Control & Response
- Public Health Nuisances
- Temporary Residence
- Vector Surveillance & Control
- Food Service Establishments
- Public Water Supplies
- Individual Water Supplies
- Well Head Protection & Aquifer Monitoring
- Mobile Home Parks
- Pools & Beaches
- Septic Systems
- Children's Camps
- Clean Indoor Act
- ATUPA
- Environmental Assessment Program
- Cooling Towers
- Migrant Farmworker Housing
- Agricultural Fairgrounds

View Detailed 2023 Monthly Board of Health Program Updates Here or Scan the QR Code Below to be Directed to Minutes



2023 QUICK PROGRAMS SNAPSHOT

Early Intervention Referrals

2021 158

2022 162

2023 153

Children & Youth with Special Healthcare Needs Participants

2021 No Data

2022 15

2023 33

Childhood Lead Poisoning Cases

2021 14

2022 18

2023 23

Animal Bite Incidents

2021 172

2022 189

2023 208

Individual Sewage Permits Issued

2021 61

2022 67

2023 105

Radon Kits Distributed

2021 81

2022 173

2023 228

Child Safety Seats Distributed

2021 37

2022 52

2023 94

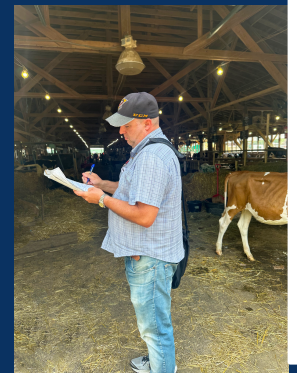
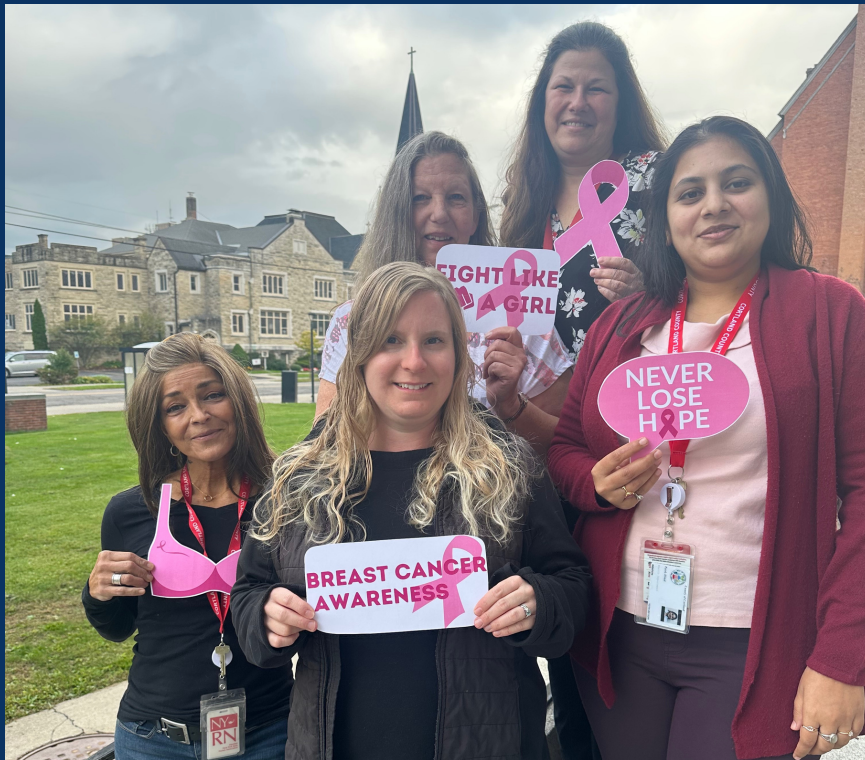
Breast & Cervical Cancer Screenings Through Cancer Services

2021 51

2022 61

2023 48

2023 QUICK PROGRAMS SNAPSHOT



2023 PROGRAM HIGHLIGHTS



Preparing for Emergencies

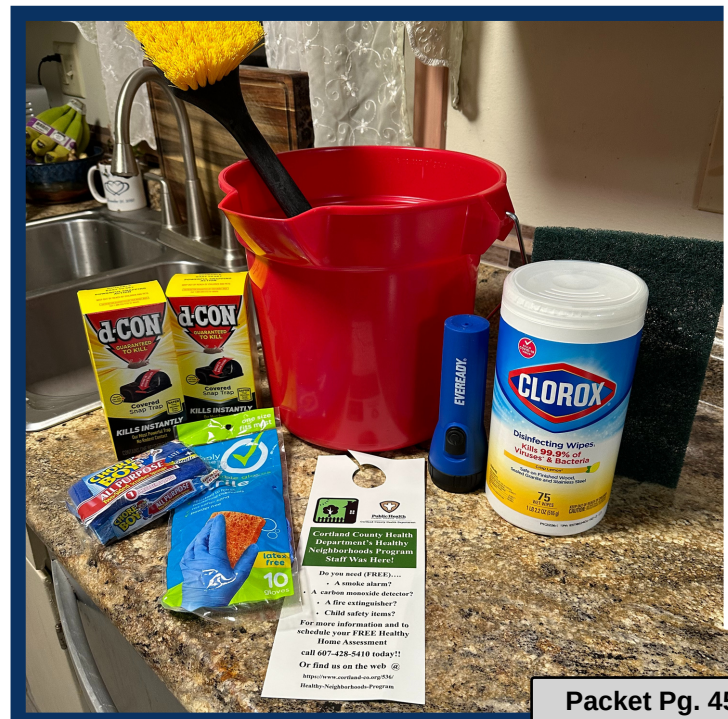
2023 Public Health Emergency Preparedness (PHEP) activities were marked by a comprehensive approach to enhance readiness, coordination, and response capabilities. Notable activities included:

- Recruitment and Training of Closed POD Partners: 12 new MOU's signed in 2023.
- Plan updates: Continuation of Operations Plan (COOP) and Pandemic Viral Respiratory Disease Response Plan.
- Drills/Exercises: We maintain quarterly call-down drill completed our annual clinic set-up drill in October along with several community partners and participated in regional outbreak and communication drills.
- Remain active participants of our Local Emergency Planning Committee (LEPC) and Regional Health Emergency Preparedness Committee (HEPC).
- Partnered with Environmental Health for more efficient Rabies vaccine clinics.

Home Safety Items Distributed Through HNP

The overarching goal of the Cortland County Healthy Neighborhoods Program (CCHNP) is to improve the design and maintenance of home environments to promote health, reduce related illnesses, and reduce fall risks among the most vulnerable populations. Many home safety items are distributed to community members each year. Products distributed cover a wide variety of home safety needs and include: first aid kits, cleaning products, pest traps, mattress covers, night and flash lights, toothbrush/toothpaste, gunlocks and child safety items. In 2023, the program completed 263 initial home visits distributing:

- 228 radon kits distributed
- 197 fire extinguishers distributed
- 187 carbon monoxide detectors distributed
- 160 smoke detectors distributed
- 73 baby gates distributed



2023 PROGRAM HIGHLIGHTS

Promoted Safe Driving Behaviors

In 2023, the focus on Injury Prevention and Traffic Safety activities was paramount in Cortland County, marked by various initiatives to promote safe driving behaviors, protect vulnerable road users, and enhance community awareness. Highlights included:

- Engaging with seniors at various senior centers throughout the county allowed for targeted outreach about safe driving considerations and accommodations, addressing the unique needs and challenges older drivers face.
- Collaborating with the Boy Scouts in Homer, a bike helmet event was organized to promote helmet use among cyclists, emphasizing injury prevention and safe riding practices.
- Collaborative car seat events with CAPCO, as well as at Safer Day in Cincinnatus and Dr. Djafari Pediatrics, provided opportunities for education, inspection, and distribution of car seats to ensure proper installation and usage.
- Bike Rodeo: Hosting a bike rodeo in McGraw allowed for hands-on bike safety education and skills development for children.



Provided Cancer Screenings

The Cancer Services (CSP) provided breast, cervical, and colorectal cancer screenings and diagnostic services at NO COST to people who:

- Live in New York State
- Do not have health insurance
- Have health insurance with a cost share that may prevent a person from obtaining screening and/or diagnostic services
- Meet income eligibility requirements
- Meet age requirements

In 2023, the CSP program served 48 clients with cancer screenings of which 10 received abnormal results.



2023 PROGRAM HIGHLIGHTS

Safeguarded the Community Against Rabies

One of our key achievements was the successful execution of a rabies vaccination campaign held at the Cortland County Office Building Gymnasium, where we administered vaccinations to 333 animals across three clinics.

Furthermore, we are proud to announce a strategic partnership with Cornell University Animal Health Diagnostic Center. Through this collaboration, we have streamlined the processing and submission of potentially rabid animals to the NYS Wadsworth Laboratory for rabies testing.

We have observed a notable increase in rabies-related incidents compared to the previous year. In total, we received 208 incident reports, marking a 9% increase from 2022. We also confirmed 4 positive rabies specimens collected in Cortland County, marking a 50% increase from 2022. The increase in reported incidents and positive rabies specimens highlights the ongoing importance of our rabies prevention initiatives.



Staffing Changes in Environmental Health

We bid farewell to two valued members of our team who have embarked on the next chapter of their lives in retirement. Phyllis Guest, a dedicated public health sanitarian, and Mike Ryan, our esteemed director of environmental health, have both retired from their positions. However, we are pleased to announce that Mike Ryan will continue to contribute to our team in 2024 as a per diem Public Health Engineer, providing invaluable expertise and guidance.

In welcoming new talent to our ranks, we are excited to introduce Marissa Pavlovich Archer, who joins us as a public health sanitarian, and Chris Quinlan, as a public health technician. Their arrival brings a fresh perspective, diverse skills, and unwavering enthusiasm, enriching our team and enhancing our capacity to serve the community.



2023 PROGRAM HIGHLIGHTS



Assessed Childhood Lead Poisoning Prevention Needs

In Fall 2023, the Cortland County Health Department released a comprehensive needs assessment on childhood lead poisoning in Cortland County. The assessment looked at program outcomes, risk factors, and gaps in resources. Additionally, it centered community member voices that have been personally impacted by lead poisoning through a community PhotoVoice Project led by a SUNY Cortland intern in 2022. The assessment led to at least one grant application submitted by a community partner and re-allocation of Public Health Fellow funds to support program outreach and education through June 2024.

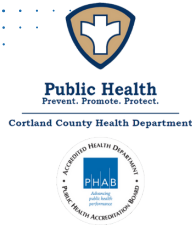
The assessment was presented to the Cortland County Legislature Health & Human Services committee and will be utilized to guide lead poisoning prevention work into 2024.

Streamlined Children with Special Needs Processes

The Children with Special Needs (CSN) division began a single point of entry (SPE) model for referrals to the Early Intervention (EI), Child Find, and Children and Youth with Special Healthcare Needs (CYSHCN) programs. Having a single point of entry has streamlined the intake processes, allowed for greater office efficiency, and created an easier referral process for the families and agencies. Upon referral, families are screened for their public health needs and are referred to appropriate programs.

Additionally, the parent survey sent to families when their children exit the Early Intervention program was updated. In addition to simplifying the survey and providing it via a hyperlink, we have added follow up reminder phone calls. This data has historically been very challenging to obtain. These changes have made a big impact on the number of surveys and the data collected. This information will be used to make our program stronger.





Cortland County Health Department



THANK YOU TO ALL WHO SUPPORTED CCHD IN 2023

For updates throughout the year, follow us on
Facebook, Instagram, and TikTok



@cortgovhealth

Contact: 607-753-5036



CORTLAND COUNTY DEPARTMENT OF SOCIAL SERVICES

2023

ANNUAL REPORT

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This report serves as the 2023 Cortland County Department of Social Services Annual Report as required by Section 81 of Title 5 of the Social Services Law.

VISION, MISSION, AND GUIDING VALUES

Vision

To eliminate poverty and family violence in Cortland County

Mission

Our mission is to accurately and efficiently provide benefits and services to the people of Cortland County in a respectful and responsive manner that protects the vulnerable, encourages self-sufficiency, and promotes dignity.

Values

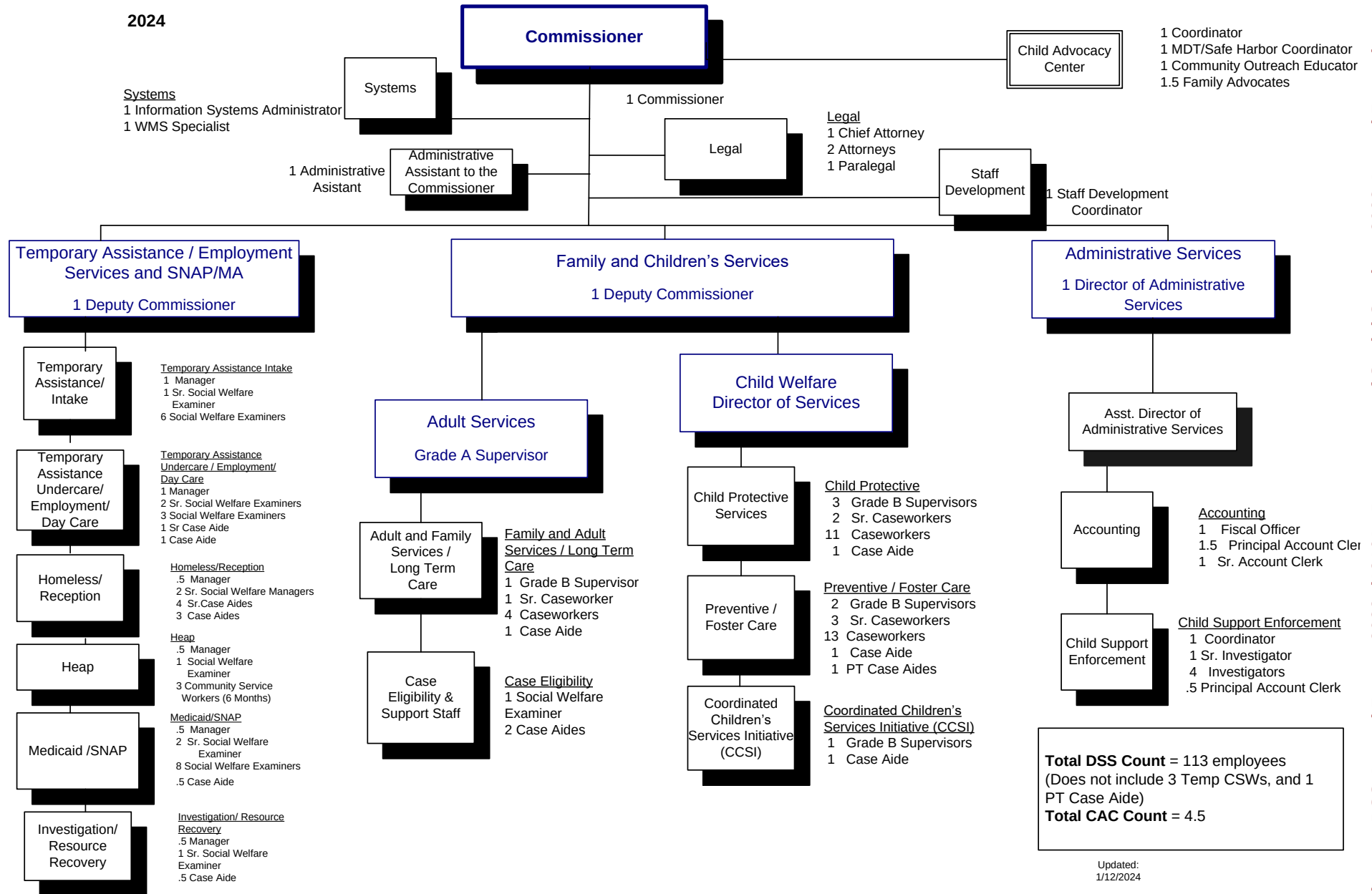
- Strength-based partnerships
- Teamwork
- Self-sufficiency and individual responsibility
- Safe and healthy environments
- Family preservation and permanency
- Respect for all people
- Outcome focused approach
- An energizing positive work environment

ORGANIZATIONAL CHART

- See next page for a January 2024 chart

Cortland County Department of Social Services

2024



Administrative and Supportive Services

ADMINISTRATION

Administration encompasses the work to administer programs and services, manage personnel, develop, and manage contracts, develop operational policies and procedures, implement state policy directives, comply with various audits and reviews, comply with various mandated state plans, coordinate with community partner agencies, develop efficient workflow processes, assess data and outcomes, resolve complaints and problems, and to manage a 35+ million-dollar budget. The work described in this section is performed by the Commissioner, two Deputy Commissioners, Director of Services, Director of Administrative Services, Assistant Director of Administrative Services, Administrative Assistant and Staff Development Coordinator.

Personnel management includes assessment and assignment of job duties, evaluating positions needed, requesting permissions to fill, civil service compliance and paperwork, interviewing, screening, offering positions, orientation, training coordination, monitoring, and approving leaves of absences, employee evaluations, employee skill development, and payroll processing. Additionally, employee injuries and threats require urgent responses, assessment, paperwork, and follow-up.

In 2023, we had 47 positions turnover or abolished. Of the 47 total positions, 27 required the hiring of a new person to the department, 17 involved the promotion of an internal candidate and three involved a voluntary demotion. There were 27 exits from the department: 4 were due to failing probation or a provisional employee being unreachable on a civil service list, 22 were resignations, 1 was a retirement.

The department developed or renewed 72 contracts in 2023. Of them, 15 were for foster care placements, 15 were with day care centers, 8 were for work site placements for the Work Experience Program. The rest were for various administrative and program services. In 2023, the department held 11 contracts with other county departments for a total of \$783,212.

In 2023, we received 106 state policy directives from the Office of Children and Family Services (OCFS), the Office of Temporary and Disability Assistance (OTDA) and the State Department of Health. Many of these required changes and updates to our policies and procedures.

There were many state plan documents required in 2023. Plans required included:

- OTDA Homeless Services Plan and quarterly reporting requirements
- OTDA Temporary Housing Budget Report
- OTDA Code Blue housing and funding plan
- OTDA Temporary Assistance and SNAP Employment Plan
- OTDA Investigative Unit Operations Plan
- OCFS Raise the Age Funding Plan
- OTDA Flexible Fund for Family Services (FFFS) funding plan and monthly reporting requirements
- Federal Tax Information Protection Plan
- OCFS Supervision and Treatment Services for Juveniles Plan (STSJP) funding plan and quarterly reporting requirements.
- OCFS Child and Family Services Plan

- OTDA Rent Supplement Program Plan

Additionally, in 2023 we managed formal case and program reviews/audits. These included:

- OCFS Child Welfare Practice Case Review Program Improvement Plan
- OCFS Program Quality Improvement Plan
- SDOH Long Term Care agency Medicaid audits
- OCFS Preventive Services IV-E candidacy case reviews
- OCFS Foster Care and Adoption IV-E case review
- OTDA 2022 Federal Single Audit Review submission
- OCFS Title XX Sub-Recipient Monitoring Review
- Social Security Representative Payee Case Review

Our Staff Development Coordinator led 3 process improvement groups with staff across the department in 2023. One was on homeless case processing and service delivery and the other two were on Child Welfare and Temporary Assistance unit training plans and flow.

SUPPORTIVE SERVICES

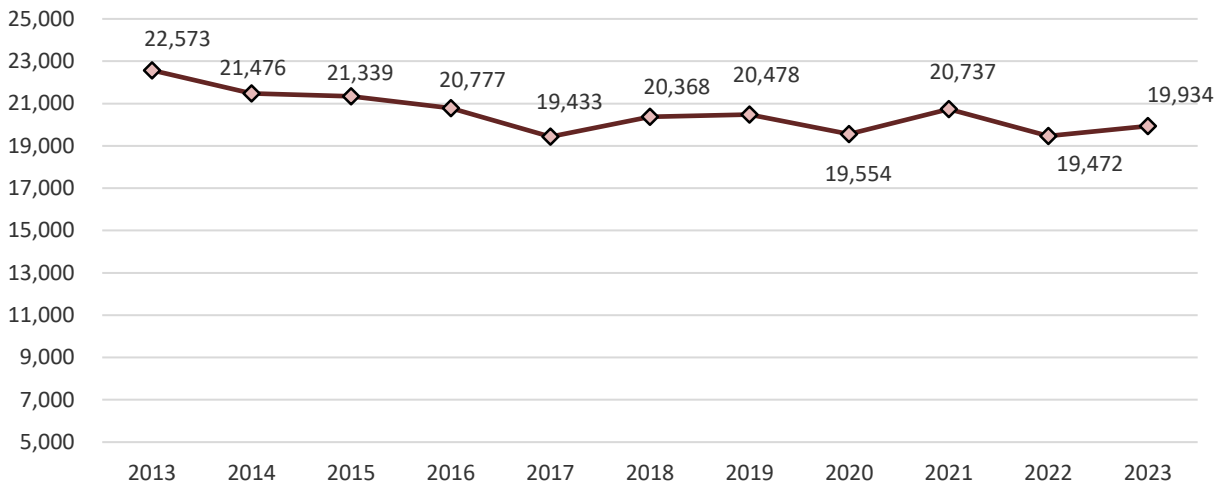
Accounting Unit

This unit is responsible to audit and code various original source documents to ensure correct payment and claiming. Payments are produced using three different computer systems; a state system for client benefits, a county system for administrative payments, and a locally created system for representative payee accounts. In 2023, there were 534 administrative payments, 3,149 program payments, and 16,251 trust account payments generated.

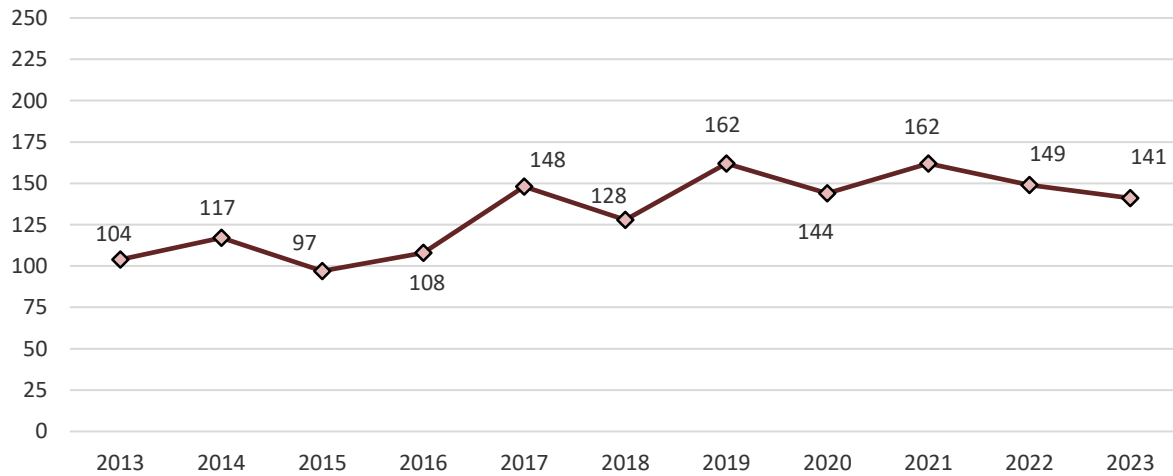
There are different program and administrative expenditures and claims processes. Both require staff to calculate, code and record expenditures for monthly claiming of state and federal reimbursement utilizing the Automated Claiming System (ACS).

The department budget involves the management of 66 appropriation accounts, 47 revenue accounts, and 5 trust accounts.

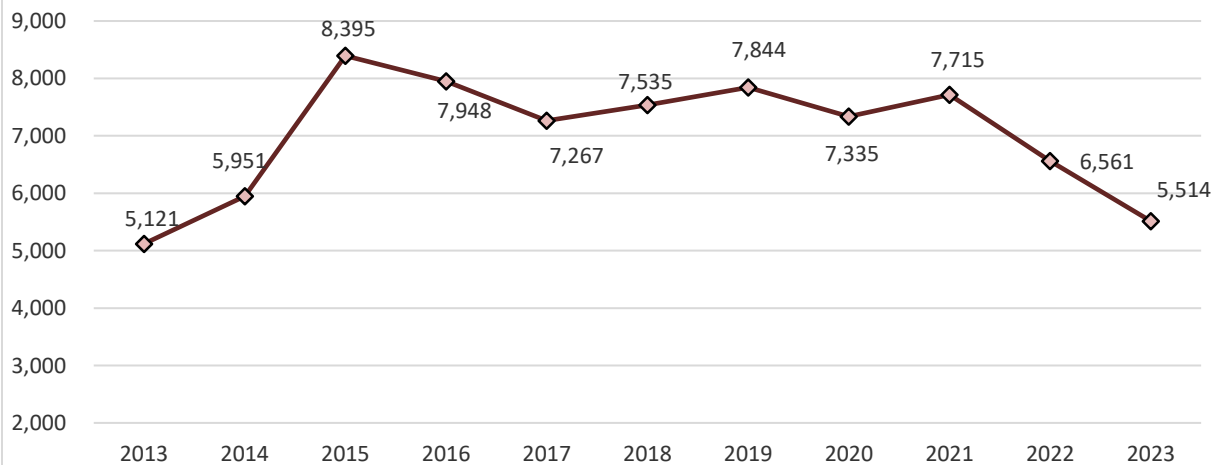
Accounting - Checks Issued



Accounting - Claims Filed



Accounting - Receipts Issued



Legal Unit

This unit handles an array of legal matters involving the department, including the following things:

- Family and Children's Services - Litigation and preparation of petitions, answers, motions, discovery, orders, memoranda of law, appellate briefs, and other legal documents for Family Court, and offering legal advice in child welfare law. There were 121 petitions, 369 orders and 200 permanency reports filed in 2023. These numbers were only slightly lower due to the pandemic.
- Support Collection Unit - Litigation and preparation of petitions, orders, motions, objections and other legal documents for Support Magistrate and Family Court Judge. Also appear as counsel on behalf of the Support Collection Unit for Child Support Services (CSS) recipients who request such service.
- Adult Services – Assist with legal matters involving the elderly and incapacitated. Preparation of petitions, orders and other legal documents/reports for proceedings in Surrogate's and Supreme Court.
- Investigation Unit and Chronic Care – Provide legal advice and representation for recovery of agency funds through the Resource Recovery Unit, and advise Chronic Care on such issues as Medicaid eligibility, trusts, and spousal resources.
- Bankruptcy – Provide clearinghouse for all bankruptcy notices received by the agency and render legal advice with respect to proper procedures upon notification of filing.
- Fair Hearings – Provides representation for the department on income maintenance fair hearings with opposing legal representation. For Family and Children's Fair Hearings, the legal office is responsible for preparing the record that will be used during the hearings. In 2023 there were 12 fair hearings requiring attorney representation.

Reception

We currently operate two separate Reception areas, each with a very different focus. The COVID pandemic forced us to dramatically change our processes regarding how we receive and provide service to our visitors. As a result, we made changes which have proved productive and will remain in place.

Our traditional Reception area on the second floor remains a focus point for mail processing, managing phone calls for the agency, application registration, and records management. This unit also coordinates fair hearing requests with appropriate units including obtaining summaries from workers and coordinating the fair hearing schedule on hearing days.

A new Reception area was created in 2021 which serves as our building entrance on the ground floor and where all client interviews are done. This has served to help reduce traffic throughout the building as well as allow for improved security. Since this change, our focus has been in how to best manage increased traffic in the area from dramatic increases in the number of homeless individuals in our community, and in ensuring that staff there are kept safe.

Systems

In 2023, the Systems Administrator and Welfare Management Specialist deployed and/or maintained all hardware including 130 network computers, 12 Virtual Desktop Infrastructure (VDI) terminals, 46 iPad, 23 printers, 7 copiers, 15 label makers, and 156 phone lines. They also manage numerous programs requiring set-up and user rights configurations. There are approximately 40 software and data programs required by our employees to do their jobs. Every month, they generate approximately 1,432 data report needed for staff from the state Benefits Issuance Control System (BICS).

Income Maintenance Division

TEMPORARY ASSISTANCE

Description of programs:

- Family Assistance (FA) provides temporary cash assistance to eligible needy families that include a minor child. FA is a federal Temporary Assistance for Needy Families (TANF) funded assistance program. Eligible adults are limited to receiving benefits for a total of 60 months.
- Safety Net Assistance (SN) provides temporary cash assistance to eligible single adults, childless couples, and families who have exhausted their 60-months of eligibility for FA. SN is a state assistance program.
- Emergency Assistance: People with urgent needs, such as shelter and utilities, may be eligible for Emergency Assistance for Families (EAF), Emergency Assistance for Adults (EAA), or Emergency Safety Net (ESN) assistance, depending on their household income and resources.
- Employment Services- Within a week of an application, the employment unit becomes involved with TA applicants who are determined employable. They are required to attend a weeklong Job Search Workshop. Individuals who do not obtain employment are required to work with the employment unit to undergo an assessment and participate in assigned programs. Supportive services, including daycare and transportation assistance, are provided to clients to enable them to move forward to self-sufficiency. Work activities can include, but are not limited to, job search, Work Experience assignments, volunteer activities, vocational training, community service, therapy, counseling, etc. Individuals who do not comply with employment assignments are subject to sanctions that decrease or discontinue their benefits for certain time frames. Many individuals are exempt from work activities due to mental health, substance abuse or physical medical exemptions.
- Work Experience Program - The work experience program introduces the value of work by having participants develop work habits and job skills from participation in work assignments. Individuals are assigned to work sites at government or non-profit agencies with whom agreements are established.
- Disability Analyst – This position is provided via a contractual agreement with the J.M. Murray Center, Inc. and is located at the Department. The Disability Analyst establishes disability determinations for TANF and SN individuals presenting medical issues. This involves meeting with individuals and working with their doctors to obtain medical documentation that results in an exemption from employment activities and/or the pursuit of social security benefits.

Annual Update:

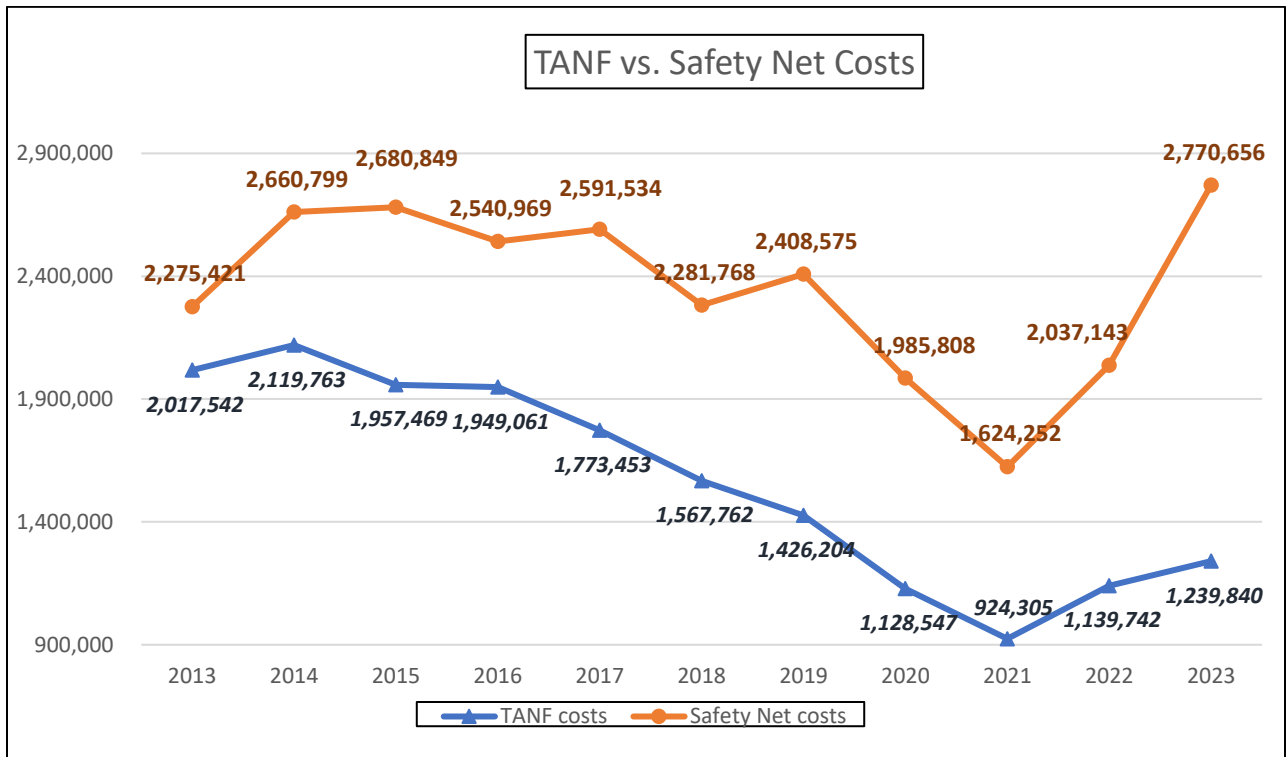
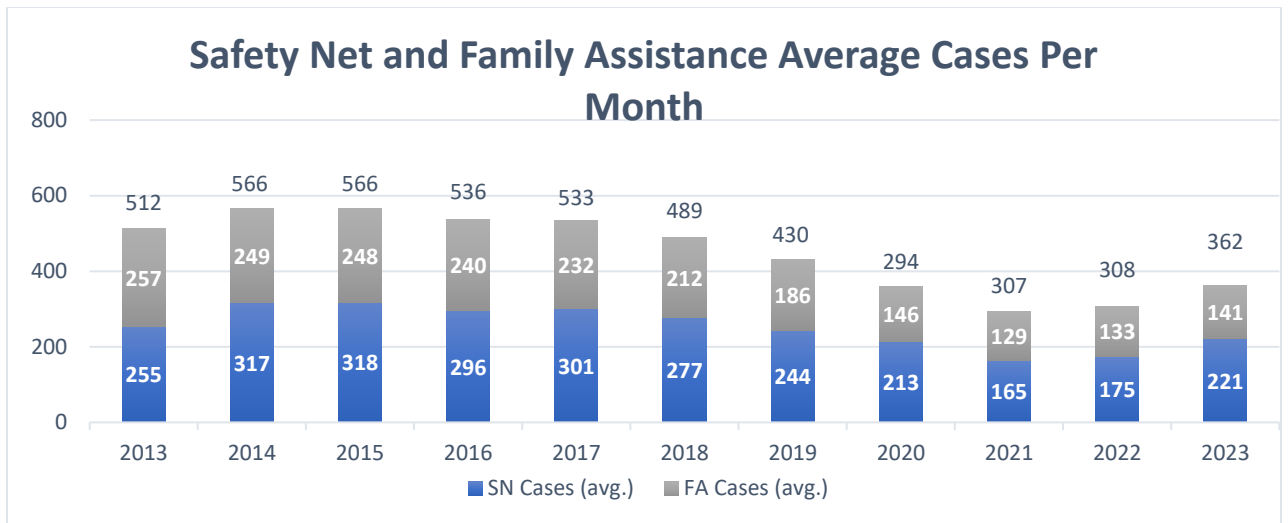
The COVID pandemic led to a decrease in Temporary Assistance (TA) application numbers, particularly emergency assistance, which was attributed to the enhanced unemployment benefits, stimulus payments, and eviction and utility shut-off moratoriums. Applications have increased since 2021 as these interventions began to end. There is a change in the chart below in the average days from application to determination for FA and SN cases due to the fact that New York State eliminated the 45-day wait for SN applications. Those cases must now be opened within 30 days, which is the same as FA cases. This is reflected below as just TA average number of days from application to determination.

	2019	2020	2021	2022	2023
New TA apps registered per year (Total of FA, SN, EAA, EAF, ESN)	1,677	1,225	1,211	1,455	1,519
FA apps registered	351	361	478	427	381
SN apps registered	1,105	822	718	1,004	1,079
Average number of days from FA application to determination	25	19	20	22	-
Average number of days from SN application to determination	28	38	30	33	-
Average number of days from TA application to determination	-	-	-	-	22

While everyone has the right to complete a Temporary Assistance application, not all applications are opened. Case situations change, applicants may not comply with eligibility requirements, they may become employed, or they may be determined programmatically ineligible. We open a relatively low percentage of applications received.

	2019	2020	2021	2022	2023
Percentage of TA applications opened for ongoing assistance	24%	24%	21%	23%	27%

Our Temporary Assistance caseload is impacted by several factors, including changes in the labor market, the number of individuals unable to work due to a disability or substance use disorder, and employment opportunities available in the community. Since 2011, the county cost share of SN cases has been 71%, while it is 0% for FA. The charts below outline historical costs and caseloads. While TA caseloads decreased dramatically during the pandemic due to factors such as increased SNAP and HEAP benefits, as well as eviction and utility shut-off moratoriums, there have been gradual increases since 2021 as these pandemic benefits ended. The number of cases and costs of providing Temporary Housing Assistance (THA) have increased significantly in the past 2 years.



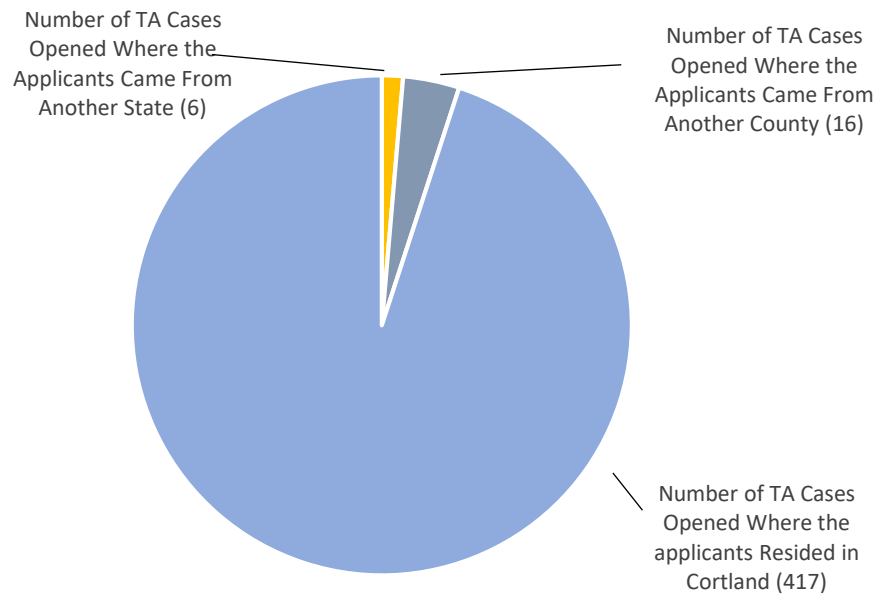
Our indigent burial numbers fluctuate but were especially low in 2023.

	2019	2020	2021	2022	2023
Number of indigent burials	82	67	85	88	52
Burial expenditures	\$207,033	\$175,948	\$204,724	\$212,960	\$139,018

Because New York State requires counties to accept applications from anyone who applies in a county without any residency restrictions, we track the number of TA applicants received from other counties and states. Of those who do apply, a very low percentage of them open for TA although this has increased a bit.

	Number from another state applying for TA	Number from another state who opened TA	Number from another county applying for TA	Number from another county who opened TA
2019	8	1 (12%)	88	7 (8%)
2020	No data due to pandemic	-	-	-
2021	36	5 (13%)	20	2 (10%)
2022	24	4 (16%)	88	15 (17%)
2023	35	6 (17%)	75	16 (21%)

Origin of TA Openings in 2023



One factor we analyze is the history of those who are applying for TA. Specifically, whether they have received TA in the past in our county. This is done to help analyze service needs and how to best assist applicants escape the cycle of poverty. More than half of our TA recipients have received TA in the past.

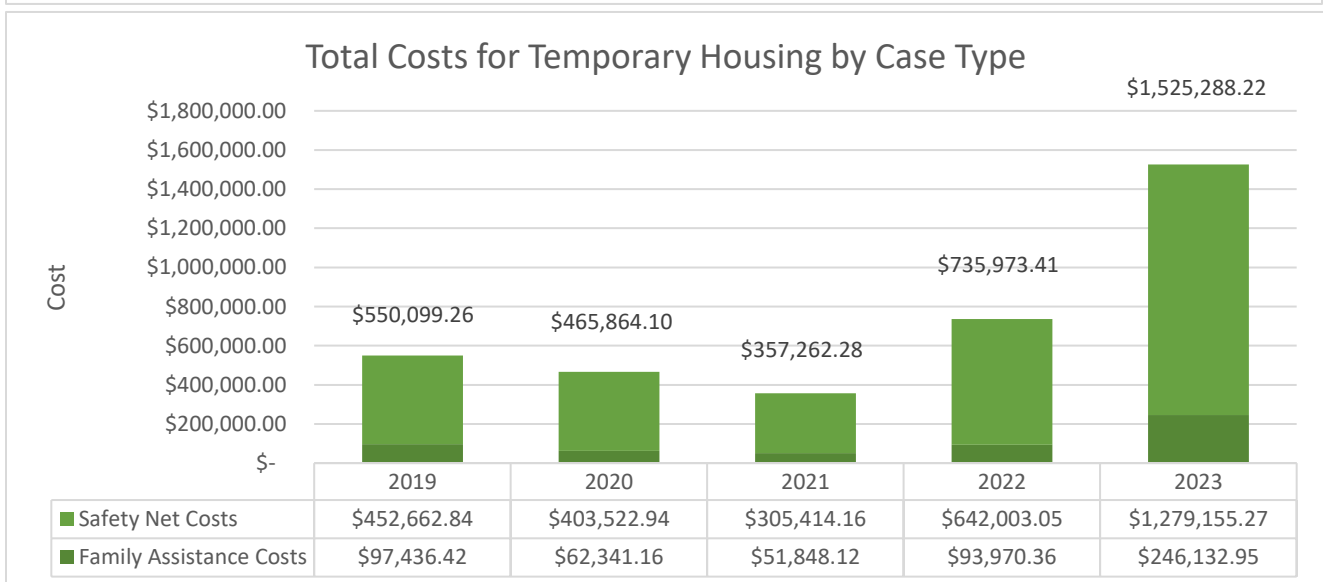
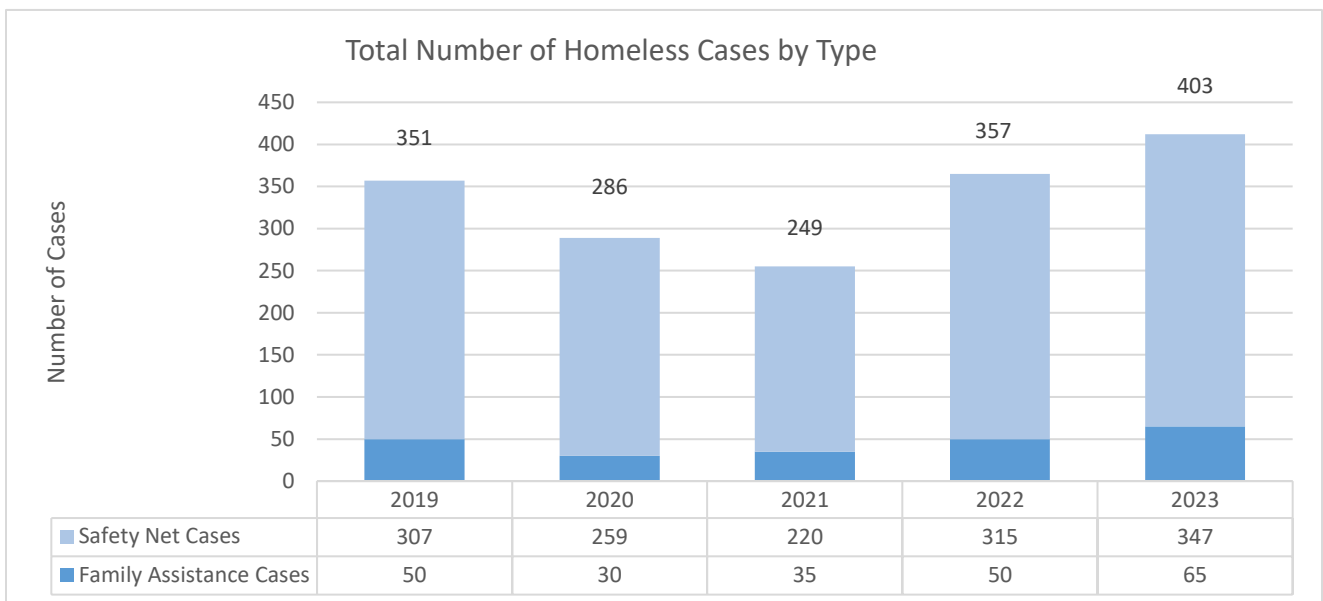
	2019	2020	2021	2022	2023
TA recipients who are first time open	187 (47%)	121 (41%)	101 (40%)	140 (41%)	182 (44%)
TA recipients who have received TA in the past	213 (53%)	173 (59%)	150 (60%)	198 (59%)	234 (56%)

An ongoing challenge is the number of Temporary Assistance adult recipients who are exempt from work requirements due to a physical, mental health, or substance use disorder. In accordance with New York State regulations, individuals who are exempt cannot be required to work on their job skills or search for employment but can be required to follow treatment recommendations. Those who are expected to be permanently disabled are assisted in applying for disability benefits. There are regular meetings and communications with local treatment and medical providers to ensure that exemption determinations are accurate and necessary. Despite these attempts, a high number of individuals are work exempt and are not required to participate in work activities.

	2019	2020	2021	2022	2023
Number of adult TA recipients who are exempt and unemployable (monthly avg)	289 (79%)	247 (79%)	166 (81%)	217 (84%)	251 (80%)
Number of adult TA recipients who are nonexempt and employable (monthly avg)	77	51	38	40	61
Of the nonexempt TA recipients above, those who are currently working either full or part-time (monthly avg)	26	8	4	8	15

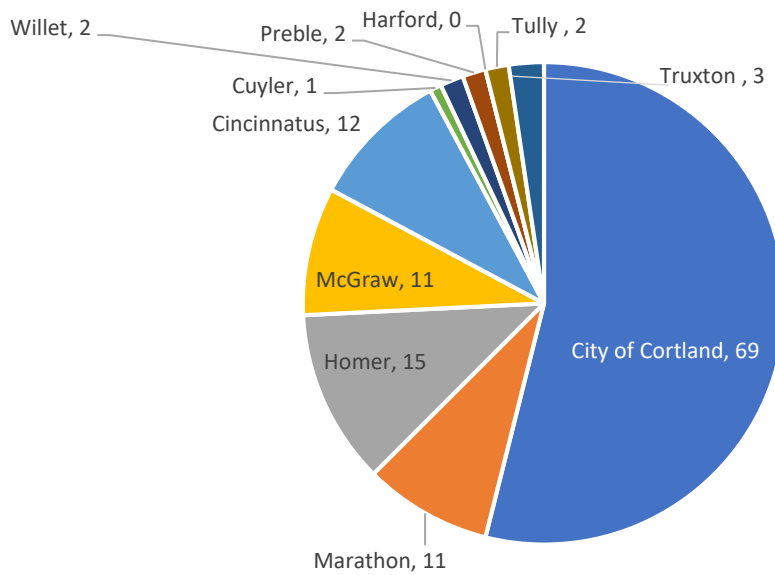
Homeless housing has been our biggest challenge and focus in 2023 because we have seen historic increases in this area. This seems to be impacted by a number of factors: a large number of these individuals face chronic mental illness and substance use disorders making it difficult to maintain housing, bail reform has led to a number of formerly incarcerated individuals becoming homeless, a lack of immediately available and effective mental health and substance abuse treatment services for those who do not easily engage in treatment, a dramatic decrease in the number of landlords and motels willing to provide low-income housing due to an increase in problematic behaviors, as well as increased financial risk due to eviction reform laws, a woefully inadequate shelter allowance which does not allow recipients to afford permanent housing, and regulatory changes which have led to an inability to hold individuals accountable for when they demonstrate behavior and noncompliance. As a result, we are struggling to provide emergency or permanent housing for our homeless individuals.

	2019	2020	2021	2022	2023
Number of instances cases (individuals or families) were housed as homeless	356 (316 separate households, 50 housed more than once)	311 (226 separate households, 45 housed more than once)	315 (249 separate households, 34 housed more than once)	496 (357 separate households, 107 housed more than once)	557 (403 separate households, 66 housed more than once)
Of instances, number that were SN single males	218	187	183	282	315
Number of homeless parolees housed	63 (18% of the total cases housed)	58 (19% of the total cases housed)	21 (6% of the total cases housed)	39 (8% of the total cases housed)	20 (3.5% of the total cases housed)
Average days each case was housed	28days	33 days	28days	31days	43 days

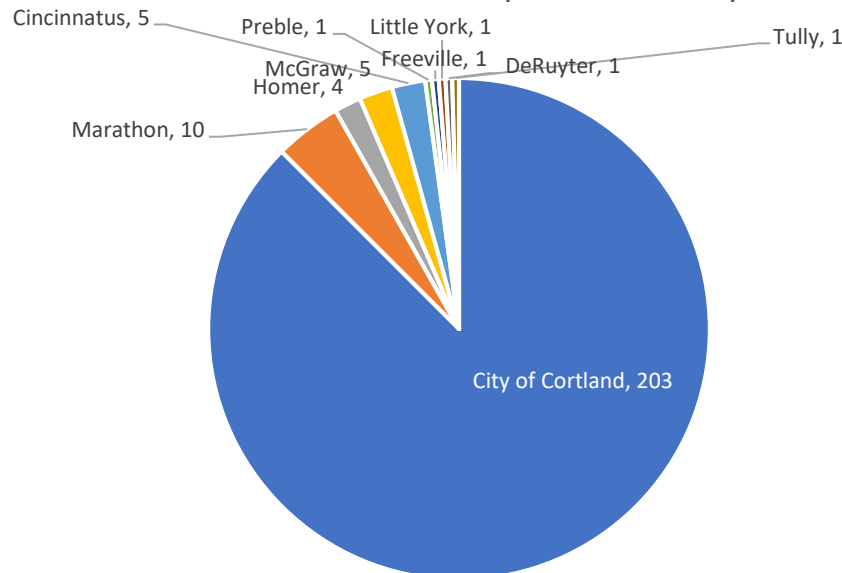


As of February 2024, most of our Temporary Assistance cases are located within the city of Cortland. The charts below indicate that a higher percentage of Safety Net (SN) cases are concentrated within the City of Cortland than are Family Assistance (FA) cases. Not all current TA cases are represented here, as certain types of cases do not contain a local address, such as those in congregate care, rehab, shelter, or non-custodial caretaker cases outside of our county. We also carry cases for a specific amount of time when the recipient has moved out of county.

FA Cases in Cortland County as of February 2024



SN Cases in Cortland County as of February 2024



INVESTIGATION

Description:

This is the work done to avert fraudulent applications, investigate fraud allegations and to complete various resource recovery actions.

Annual Updates:

We place a great deal of emphasis on our fraud investigation work. Applications with factors which may indicate possible fraud are referred to the Investigation Unit as FEDS (Front End Detection System) referrals. A high percentage of our TA applications are reviewed as FEDS, helping us ensure that new applications do not contain fraud. Due to the COVID pandemic, FEDS requirements were waived from March 2020 through May of 2021, resulting in lower numbers during that time. Case Investigations also decreased during this time, primarily due to the mandatory waiver of in-person interviews. These numbers increased since 2022 as interviews resumed and FEDS requirements were back in place. This has led to significant savings and loss prevention directly attributable to our Investigation Unit. Open assistance cases may be referred to the Investigation Unit if staff suspect possible fraud. Outside referrals are also accepted from anyone.

	2019	2020	2021	2022	2023
Number of TA FEDS investigations	572	95	145	310	301
% of TA applications referred for FEDS investigation	34%	7%	12%	21%	20%
Number of TA FEDS referrals found with case discrepancies	131	17	52	85	93
Number of TA applications denied or withdrawn due to FEDS investigation	63	8	44	77	69
FEDS Cost Avoidance/for one month	\$93,955	\$12,492	\$67,823	\$117,119	\$113,411
Number of open case investigations (may be from any program area)	105	138	51	66	43
Number of individuals arrested for fraud	16	9	8	11	10
Fraud Investigation Recoveries	\$54,155	\$86,807	\$30,356	\$36,556	\$76,625

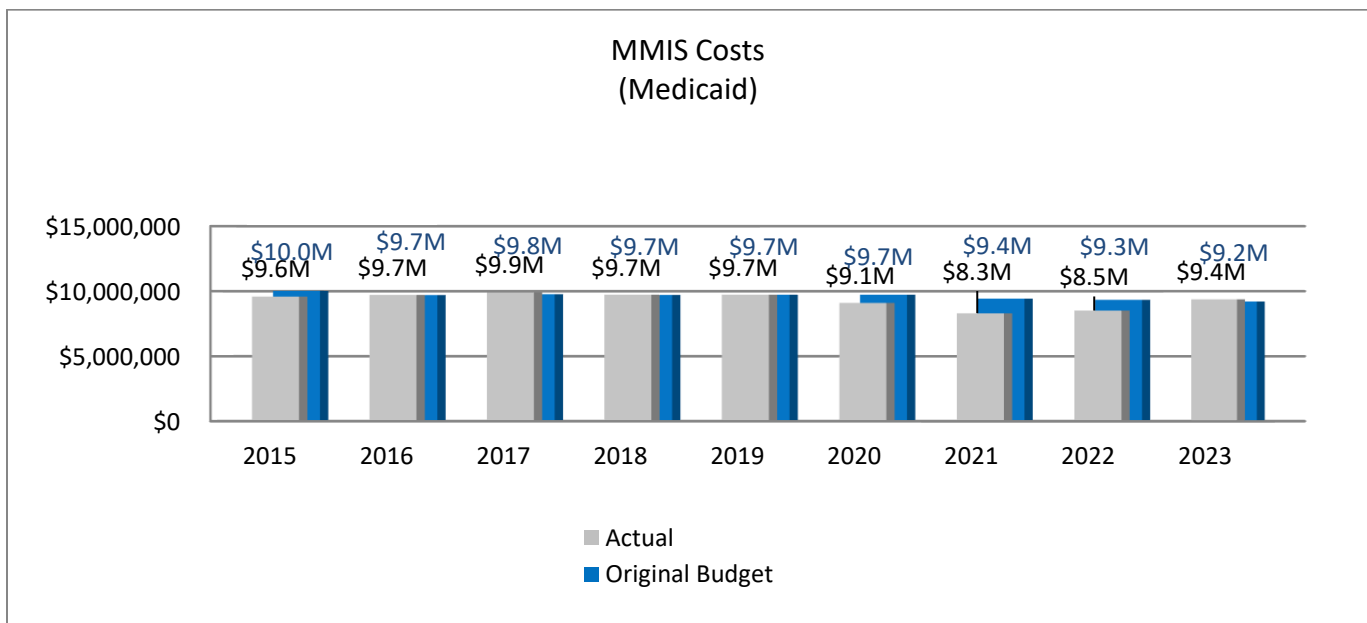
SNAP/MEDICAID/HEAP/DAYCARE

Descriptions:

- Supplemental Nutrition Assistance Program (SNAP) – This is a federally funded program that provides those who qualify with benefits to purchase food.
- Medicaid – This is a federal, state and locally funded health services program.
 - Community Medicaid – These types of cases are being taken over by the NYS Exchange and are referred to as Maximum Adjusted Gross Income (MAGI) cases.
 - Chronic Care Medicaid – Cases that qualify for Medicaid under the Medicare Savings Program, the Medicaid Buy-In Program, and for those who are in receipt of Supplemental Security Income (SSI) or are a nursing home resident.
- Home Energy Assistance Program (HEAP) - This is a federally funded energy assistance program that helps with heating bills, furnace repairs, summer cooling benefits and furnace maintenance.
- Daycare – The Low-Income Daycare Program (LIDC) is for working parents who earn less than 85% of the State Median Income (SMI) and/or for parents transitioning from Temporary Assistance. Daycare is also provided to Temporary Assistance recipients when necessary.

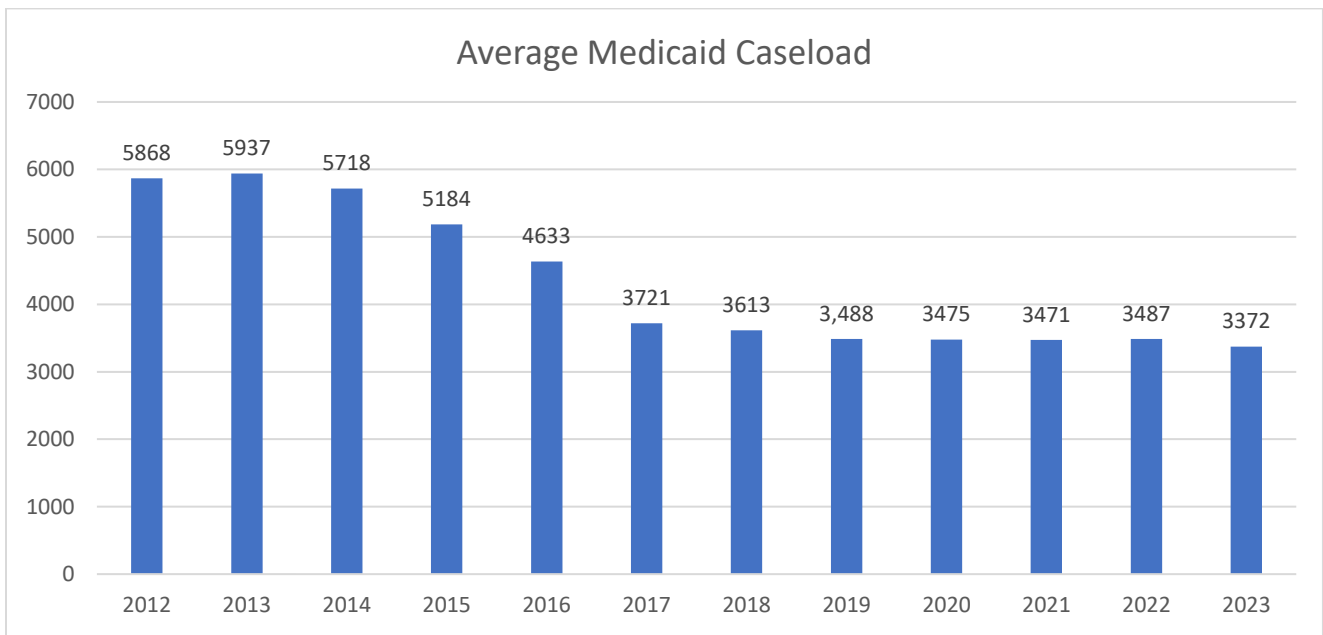
Annual Updates:

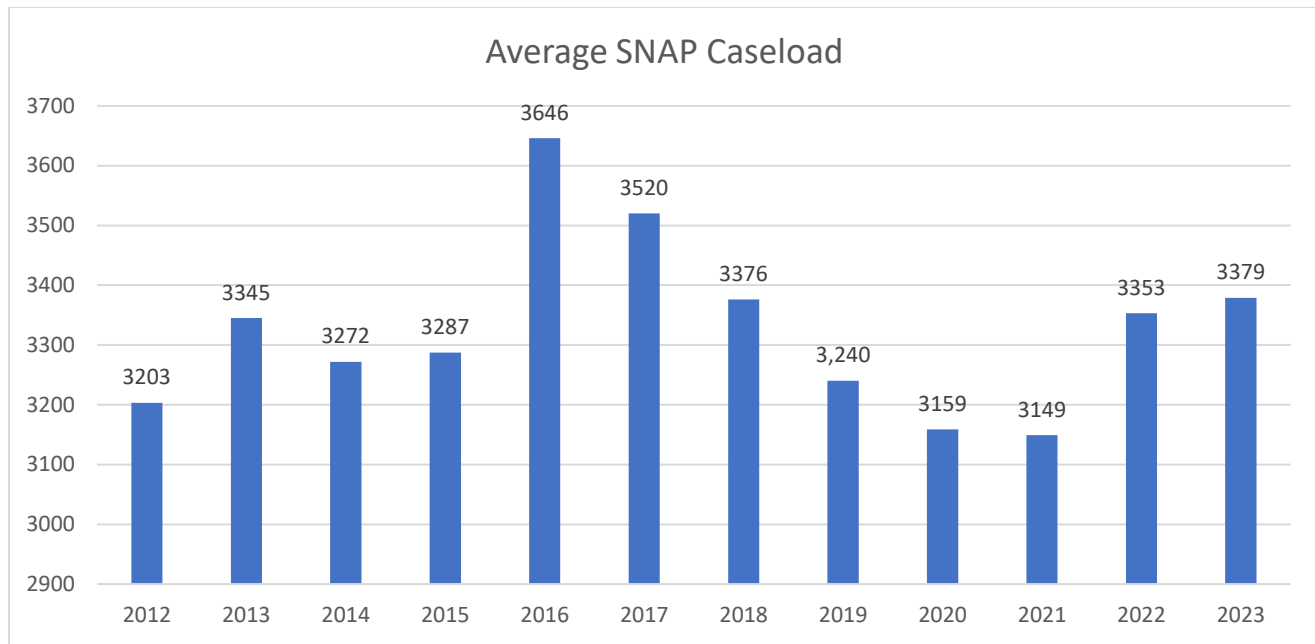
Medicaid costs are the largest driver of our DSS budget. They accounted for 55% of the county funds in our 2023 DSS budget. This account is all local share and COMPLETELY OUT OF OUR CONTROL. Annual weekly share increases were to go to 0% after 2014 but decreased due to the Affordable Care Act (ACA). In 2023, NYS decided not to pay counties for money owed from reconciliations of the estimated weekly shares from 2016 to 2022. Instead, the weekly share was increased due to the elimination of federal pandemic funding and a phase out of the ACA sharing.



Medicaid cases handled locally began to decrease after 2016, as New York State continued to transition some cases away from local districts, but this process has been stagnant and was impacted by pandemic rule changes. The number of SNAP cases has remained relatively consistent over the past few years. HEAP cases tend to fluctuate depending upon the severity of the winter season and the amount of funding provided. There have been dramatic increases to the Daycare caseload in 2023 due to significant expansion to the eligibility guidelines and program rules including a mandated 12-month case opening rule.

	2019	2020	2021	2022	2023
Number of open SNAP cases (monthly avg.)	3,240	3,159	3,149	3,353	3,379
Average number of days from SNAP application to determination	13	12	15	18	18
Number of open local MA cases (monthly avg.)	3,488	3,475	3,471	3,487	3,372
Average number of days from MA application to determination	20	17	24	20	18
Total number of HEAP benefits (regular/emergency/furnace)	4,901 (2019-2020)	4,813 (2020-2021)	4,800 (2021-2022)	4,683 (2022-2023)	3,307 (as of 1/31/24)
Average number of days from HEAP application to determination	15	27	30	21	25
Number of Low-Income Daycare cases (monthly avg.)	101	71	60	78	136





SNAP, HEAP, and most Medicaid payments on behalf of recipients are paid outside of our county budget but represent significant federal and state spending. During the pandemic, the State authorized increased SNAP benefits to households.

Expenditures	2021	2022	2023
SNAP benefits authorized	\$15,751,602	\$18,877,344	\$14,130,616
HEAP benefits paid by OSC (FFY)	\$1,990,955	\$3,470,467	\$2,725,845
HEAP benefits paid locally	\$47,721	\$6,227	\$27,386
Medicaid paid by County (MMIS Account)	\$8,303,056	\$8,505,700	\$9,375,085
Total Medicaid for Cortland Residents	\$108,136,708	\$115,025,542	\$130,291,449

CHILD SUPPORT SERVICES

Description:

Child Support Services include the establishment of paternity, obtainment and enforcement of support orders, and the disbursement of funds. There are two types of cases. The largest type is Child Support Services (CSS) cases. These are private cases that are sought by one parent from another. Anyone in the County can receive assistance from the department in filing for paternity, support, or enforcement of an existing order. The other type of case is called Department of Social Services

(DSS) cases. These are initiated by the department when money is owed for reimbursement of cash assistance or foster care placement. They can be considered either open or closed cases. Closed cases are those that have arrears owed to the department and a percentage of money might go to the department towards arrears while the rest goes to a custodial parent.

Annual Updates:

The amount of money collected and distributed is as follows:

Collections	2021	2022	2023
Reimbursement to DSS	\$369,414	\$232,266	\$212,031
Distributed to a Custodian	\$4,302,078	\$3,685,729	\$3,906,627

There are performance measures monitored by the NYS Office of Temporary and Disability Assistance (OTDA). These measures are a percentage of the amount possible based on our active caseload each year.

Measures	2021	2022	2023
Paternity Established	98.44%	97.79%	98.09%
Support Established	96.66%	95.05%	93.69%
Support Collected	79.02%	72.50%	73.02%
Active Caseload (monthly average)	2,833	2,728	2,250

Our Child Support Investigators file petitions for CSS and DSS cases and our Child Support Attorney represents us on the DSS petition cases in court.

Petitions	2020	2021	2023
Total Petitions	733	618	453
DSS Petitions	321	265	293
CSS Petitions	412	353	160
Paternity Petitions	21	17	17
Support Petitions	224	208	183
Violation Petitions	133	124	96
Modification Petitions	272	216	88
Genetic Petitions	5	1	6
Uniform Interstate Family Support Act Petitions	78	52	30

Services Division

PREVENTIVE and FOSTER CARE

Description and Annual Updates:

Preventive services are provided on a voluntary or court ordered basis to work with families to identify needs and implement service plans. This is done by providing case management with contacts at least twice a month. The services provided meet mandated preventive services regulations in that families must have a child at risk of out of home placement for a specific documented reason. Most of these services are provided by department caseworkers. We have a contract with Probation whereby two Sr. Probation Officers provide preventive services case management to families eligible through the Planning, Assessment, Skills, and Support (PASS) Program (formerly known as Persons in Need of Supervision (PINS) program). PASS works with targeted youth ages 10-18 years that are identified in accordance with the current PINS statute, and other youths who have challenging behaviors.

Ave. per Month	2021	2022	2023
Number of open Preventive cases/month	85	89	81
Number of PINS Preventive cases/month (Probation)	27	28	35
Number of cases court ordered	26	35	27

We continued our contract with Cortland County Mental Health (CCMH) to provide masters level social work and in-home support to youths and families involved with juvenile justice. However, this contract concluded at the end of 2023 because CCMH was able to successfully transition to a fully Medicaid reimbursable program. We also continued our contract with Elmcrest Children's Services for parent education (parent aide) services and family support with visitation services. It is designed to protect children, reduce trauma, engage families, and provide a discharge/permanency plan that can be achieved in the shortest amount of time possible. The program is rooted in safety and security for the children, while recognizing that foster care should be as temporary as possible on the path to permanency, and families should always be supported in staying together whenever possible.

In 2023 we contracted with Cayuga Centers to provide a preventive program called Safe Care. The decision to create this contract came out of work with our Families First consultant work. This program targets service to parents of children ages birth to 5 yrs at risk of child maltreatment, including young parents; parents with multiple children; parents with a history of depression or other mental health problems, substance abuse, or intellectual disabilities; parents being reunified with their children; parents recently released from incarceration; parents with a history of domestic violence or intimate partner violence; and parents of children with developmental physical disabilities. The program is evidence based and is a Families First Clearinghouse "supported" program. The Safe Care Coach works on three models with the families including a health module, home safety module and parent-child/parent-infant interactions module. The program is typically around 18-20 weeks per family.

Monthly Ave Cases Serviced	2021	2022	2023
CCMH (monthly average)	13	14	15
Elmcrest Parent Education Program (monthly average)	30	32	30
Elmcrest Family Support Placement cases (monthly average)	8	11	11
Total Visitation hours provided by Elmcrest in year	2,422	2,801	2,333 attended 3,960 offered

Children who need to be placed out of their homes due to unsafe parent or child behaviors can be placed in DSS custody (foster care) unless there is another parent or relative with whom they can be placed. Reunification efforts need to be made with parents in most instances regardless of who a child is placed with. In the past several years, we have seen more children placed with relatives on an emergency basis. We have also seen more relative placements convert to foster care placements. The federal and state governments continue to mandate relative foster care through the Families First law requirements. To help with the recruitment and certification of new local and relative foster homes, we continued our home finding contract with Hillside Children's Services.

Monthly or Annual stats	2021	2022	2023
Children in foster care (monthly)	71	80	95
Children entering foster care (DSS custody) in year	39	72	36
- Child Protective Entries	21	38	24
- PINS/Voluntary /JD Entries	11	5	3
- Relative Placements moved to foster care	7	29	9
Emergency foster care and relative placement removals total (annual)	43	66	35
Children with a relative/other parent (monthly average) non-FC	41	48	27
Children entering relative placement in first instance (annual) non-FC	22	28	11
Children in relative foster care	17	21	24

Children placed in foster care must be placed in the least restrictive level of care. When the needs of children are too challenging to be met in family homes, children are placed in therapeutic foster homes, group homes or residential centers that are operated by private agencies. Youths can be placed in non-secure or secure detention by the Juvenile Justice System either in DSS or their parent's custody. In 2021, there was a significant law change in that Persons In Need of Supervision (PINS) youths can no longer be placed in non-secure detention, and if they are placed in foster care there is no

reimbursement for any of the costs. We continue to struggle to find emergency respite care for youths exhibiting ungovernable or incorrigible behaviors or parent/child disputes that cannot be resolved in the home. There are very limited residential placements beds and if we can place a youth into our local foster homes, they often require constant support due to unmanageable behaviors and placement disruptions.

Monthly or Annual stats	2021	2022	2023
Number of children in foster homes (monthly average)	60	73	85
Number of children in higher levels of care (monthly average)	9	7	10
Number of children and bed days in non-secure detention (annual)	0	0	1/1 night
Number of children and bed days in secure detention (annual)	1 child/61 days	0	0
Raise the Age Placements	0	0	0
OCFS Custody Placements	0	1	0

The amount paid in foster care costs can vary drastically from year to year based on the number of children in care and the numbers in costly higher levels of care.

Foster care and adoption rates were increased by a 4% Cost of Living Allowance (COLA) in April 2023 and increased again in July 2023 by a state mandated increase to the Maximum State Aid Rate (MSAR). This resulted in an increase anywhere between 32% and 51% of the daily rate depending on the level of care determined for each child placed in a foster home or receiving an adoption subsidy. The state also introduced a new “Extraordinary” rate in 2023. The following information outlines average cost rates based on types of placements.

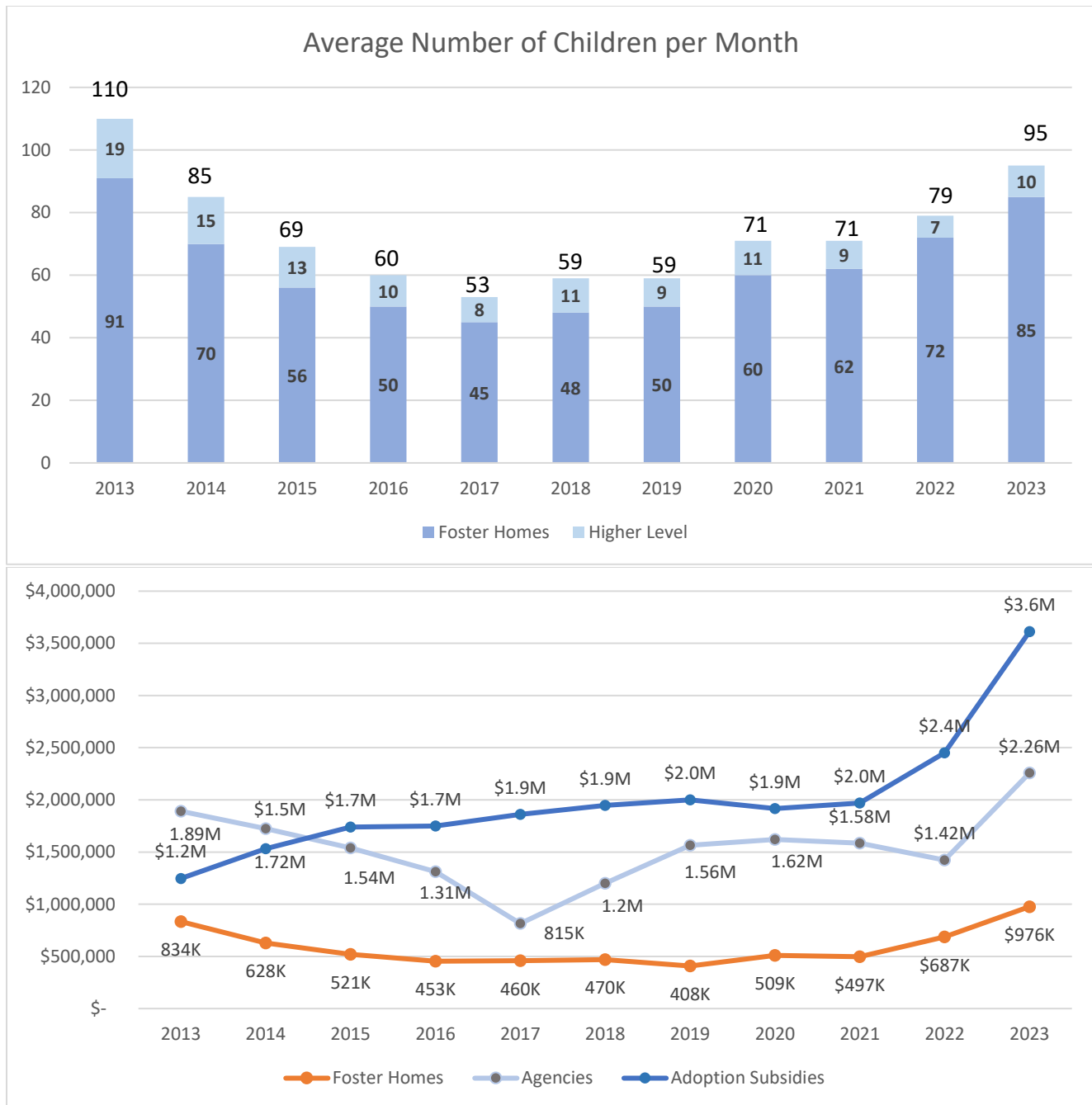
Higher levels of care average rates:

- Therapeutic Foster Homes - \$46,600/year
- Group Homes - \$142,361/year
- Residential Treatment Centers - \$309,428/year

County foster home rates:

- 0-5 yrs. old - \$11,162-\$44,413/year
- 6-11 yrs. old - \$13,297-\$44,413/year
- 12-21 yrs. old - \$13,439-\$44,413/year

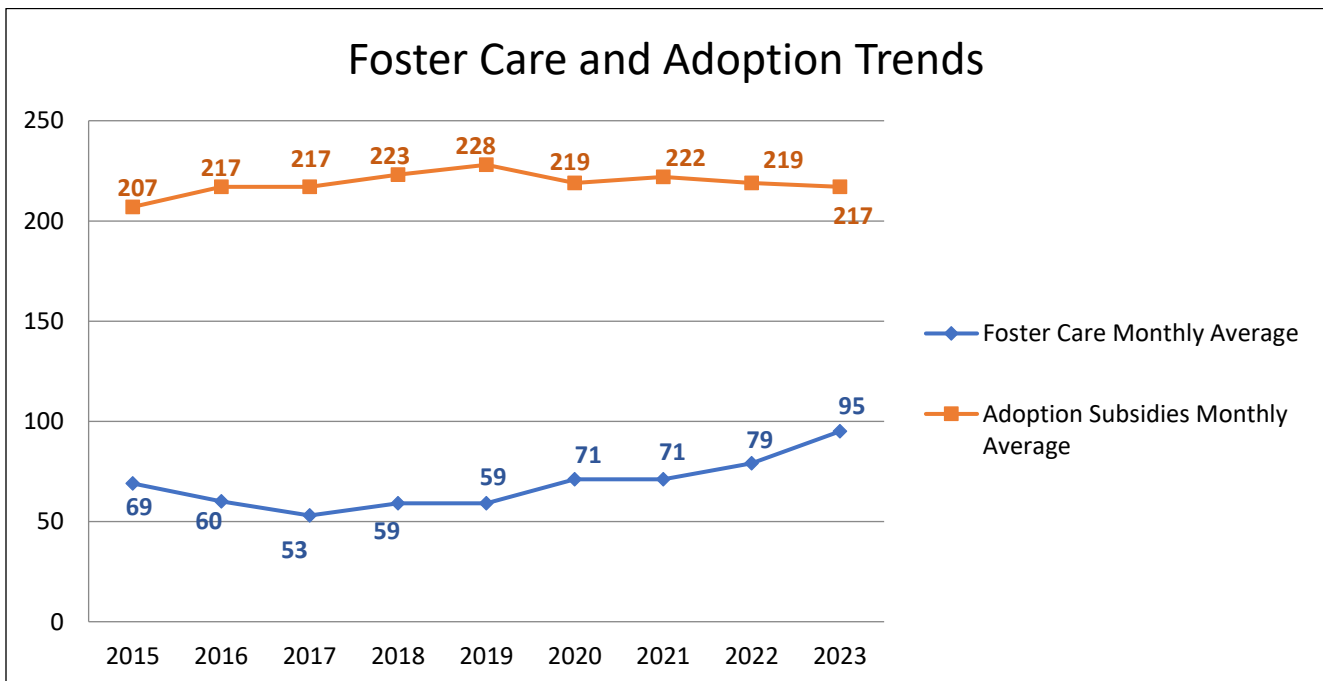
The charts below demonstrate the financial impact of higher levels of placement for children who cannot be safely cared for in our local county family foster homes. In 2023, 9% of our foster care placements that are in higher levels of care accounted for 67% of our total foster care costs as indicated in the charts below.



The costs above will be difficult to lower because the children in the highest cost programs are those who cannot be maintained in lower-level community foster homes. Many of these children would have been served in state operated programs for those with severe mental health needs or developmental disabilities in past years, but the State has closed and downsized those programs thereby forcing children into the foster care system when residential care is needed. In addition to the foster care system being overloaded with children who need specialized placements, the Families First Law reduced the reimbursement we receive for these placements.

Whenever children are placed in DSS custody, efforts must be made to reunify them with their parents or other family members. If they cannot be reunified, efforts must be made to achieve another permanency option as soon as possible and after no longer than 15 out of 22 months in foster care. This can be achieved through the termination or surrender of parental rights and adoption, or through a permanent custody or guardianship arrangement with another related adult. When children are freed for adoption, the assigned caseworker facilitates the completion of adoption paperwork with the adoptive parents, their attorneys, and the Surrogate Court.

Annual stats	2021	2022	2023
Children Leaving Foster Care	64	41	60
Permanency Reports filed for children in out of home placement	186	224	206
Extension of Placement petitions (JD and PINS youths)	0	0	0
Termination of Parental Rights petitions	13	6	27
Surrenders accepted from parents	10	25	16
Children reunited with parent	9	17	12
Children placed permanently/released with another parent or relative	7	4	11
Children adopted	16	5	20
Children Aged Out to Independence	1	1	1
Adoption subsidies (annual cost)	\$1,968,938	\$2,450,000	\$3,310,530



CHILD PROTECTIVE SERVICES (CPS)

Description

CPS reports are received locally from the State Central Registry (SCR) through the Connections computer system. The Department is required to assess the safety of all children in the household within 24 hours, which typically requires a face-to-face contact and assessment of the home. This service needs to be provided 24 hours a day, 365 days a year, which necessitates on-call staffing. The Department has 60 days to complete an investigation. If there is a preponderance of the evidence found to support the allegations of the report, then it is indicated. An indicated report will stay on file in the system until the youngest child in the household is 28 years of age. If there is no credible evidence to support the allegations in a report, then the report is designated unfounded, sealed, and retained for 10 years. The Department must assess risk and safety of all children named in a report and provide the least intrusive intervention, when necessary. This could include referrals to community services, opening a preventive services case voluntarily, or court intervention that could order services and/or removal of children from their homes. The Child Advocacy Center is used by any caseworker assigned to investigate a case requiring the Multi-Disciplinary Team (MDT) joint investigation of potential abuse.

Annual Update

Cortland County has a history of being one of the highest counties for CPS reports per 1,000 children. In 2020, we were the 7th highest in the state at 78.1/1,000 children. In 2021, we were ranked 6th at 85.8/1,000 and 2022, we were ranked 3rd at 88.5/1,000. Due to the high number of reports and an on-going challenge with caseworker vacancies and leaves of absence, our workers received many more reports than recommended. The State recommended number of new reports assigned to a worker each month is 6, with no more than 15 cases open at any given time. With the continuous turnover of staff and training that takes 3-4 months, many caseworkers exceeded this recommended caseload for most of the year.

	2021	2022	2023
Total CPS Reports (annual)	1,099	1,130	1,065
Consolidated Subsequent Reports of total (annual)	166	179	169
Reports involving substance abuse	295	260	237
Overdue Reports (monthly average)	31%	32%	43%
Percentage of workers with more than 15 open reports each month	56%	37%	41%
New reports per worker (monthly average)	10	10	9

We have utilized a part-time on-site contractual Behavioral Health Specialist to work with our caseworkers for all of 2023. This support has been instrumental in helping us offer substance abuse and mental health screening and service linkages to adults in their homes when we are trying to work with parents to reduce risk to children. Court intervention is always a last resort after referrals to community services and voluntary preventive services are ruled out when children are at high risk of harm. There are three main outcomes from neglect and abuse petitions. They are court ordered

preventive services with or without orders of protection against an adult on behalf of children, placement of children in foster care, and placement of children with another parent or relative.

Annual Petition Totals	2021	2022	2023
New Petitions for Services	14	19	13
New Petitions for Out of Home Placement (foster care or relative)	47	48	31

COORDINATED CHILDREN’S SERVICES INITIATIVE (CCSI)

Description

The Coordinated Children’s Services Initiative (CCSI) is intended to be a six to eight-month process of assessment, wraparound meetings, and evaluation that is used to assist families and youths in overcoming multiple system needs to prevent out of home placements. A parent partner is assigned and available to work alongside a family 24/7 to help them address immediate needs, offer support, provide a family voice, identify family strengths and concerns, and to help them navigate the various services available. CCSI has found much of their work to be targeted towards an ever-expanding population of children who are not attending school, dealing with complex trauma, and who have significant mental health concerns and substance use disorders. Wraparound meetings are held with the family, service providers and natural supports to develop action plans to keep youth safe and in the community.

Annual Updates

CCSI services were implemented in 2011 and have existed in partnership with Catholic Charities for contract parent partners since that time. The program served 32 families and held 95 wraparound meetings in 2023. This was quite the jump from 2022 and is attributed to increased complexity of the caseload. Tremendous success has been found with this program as evidenced by the following data.

Outcomes	2021	2022	2023
Out of home placements diverted	16	11	8
Number of youths placed out of home	4	3	3
Successfully discharged youths	16	11	12

An important component of the CCSI program is the monthly community partner meetings, called Systems of Care that focus on collaboration and addressing service gaps. In 2023, this group worked on the following priority goals:

1. The group continues to work on streamlining the complex care meetings that have become a more frequent occurrence in our community. The increase in complex care meetings also comes from a shift in the delivery of juvenile justice responses to a more community-centered and less punitive

response for our youth. Complex care meetings are intended to be a community collaborative approach to address potential unmet needs of youths with cross systems needs. In streamlining the meetings, the group is working to ensure every agency working with a youth is present, and every potential agency or system that could assist the family and youth also be present to contribute their assistance.

2. The group is working with Cortland area agencies to better streamline the Office of Mental Health Respite process which can be cumbersome for families trying to access these services.

ADULT PROTECTIVE SERVICES AND LONG-TERM CARE

Description

Reports for Adult Protective Service (APS) are received and accepted locally based on three criteria: reduced capacity for self-care, risk of harm/unmet essential needs, and no one else willing and able to assist. Cases are investigated for up to 60 days at which time they are closed or open for on-going monthly contacts. There are limited court interventions that can be taken in serious high-risk situations where an adult is in imminent danger, is unwilling or unable to accept essential services and competency is in question. These actions include court orders that grant DSS access to a home with law enforcement, orders to have an individual involuntarily taken for a medical evaluation, and orders that appoint a guardian for an adult's personal or property decisions. Additionally, APS works with individuals on a day-to-day basis to manage money and resolve situations such as homelessness and utility shut offs. They also assess and authorize various in-home Medicaid service supports for those with medical needs.

Annual Updates

There was a slight decline in the number of Adult Protective referrals received annually. In 2023, there were 124 referrals and 68, or 55%, were deemed to meet criteria for a full investigation. This is a decrease of 26% over 2022 in cases opened. Of the cases involving neglect by others, financial exploitation continues to be the most common form of neglect. To help us better investigate and assist with financial exploitation situations, we continued to participate in an enhanced multi-disciplinary team (E-MDT) under the leadership of the non-profit Vera House funded by the NYS Office for Aging. Two financial exploitation cases were referred to the E-MDT in 2023.

Community collaboration continues to be the most effective strategy for serving adults with complex needs. Regular monthly meetings with the local hospital, County Mental Health Clinic, Office for Aging, Access to Independence and others provide a platform to strategize how to best meet the needs of the most difficult to serve individuals.

Statistics	2021	2022	2023
Adult Protective Referrals in year	149	144	124
Adult Protective Investigations opened in year	116	92	68
On-going Protective Cases (monthly average)	4	9	3
Number of Court Interventions involving DSS in year	2	0	4
Guardianship cases in year	1	1	1

Adult Services work includes financial management services for clients who cannot manage their own finances. The Social Security Administration appoints our department as representative payee when an individual has no one else willing and able to do so. Caseworkers assist clients in becoming more financially independent when appropriate. This unit also provides homeless, utility shut-off, domestic violence, and general intake assessments. This year the unit developed closer work with the Temporary Assistance unit utilizing a caseworker in the Adult Services unit to make weekly contacts with individuals being housed in emergency housing at local motels. The goal is to support individuals with compliance and assist them with finding permanent housing.

Statistics	2021	2022	2023
Number of Financial Management Cases (mos. ave.)	199	192	174
Number homeless assessments (annual)	323	461	524
Number domestic violence waiver assessments	31	28	36
Utility shut offs addressed	2	1	0
Under 21 Referrals TA applicants	36	39	35

Long term care services involve various types of Medicaid funded in-home aide and supportive services that are authorized after a doctor verifies a need, and a caseworker and nurse assess the person's level of need for services. There are many complicated ways individuals qualify for these services involving both fee-for-service and managed care systems. The State Department of Health (DOH) created the New York Independent Assessor (NYIA) program last year. This program was established to conduct the Community Health Assessment (CHA) to determine eligibility for Community Based Long Term Support Services (CBLTSS) and Medicaid Long Term Care (MLTC) Plan enrollment options for Medicaid consumers.

Average Cases per Month	2021	2022	2023
Number of Long-Term Care Cases	39	37	42
Number of Consumer Directed Cases	35	34	42
Number of PERS (personal response devices)	14	13	12

FISCAL REPORT for 2023

EXPENDITURE ACCOUNT DESCRIPTIONS

Administration: Salaries, Fringe Benefits, Equipment, Contractual

Daycare: This category reflects subsidies for families eligible for low-income daycare, families in receipt of public assistance and families transitioning off public assistance.

Services for Recipients: This category reflects services purchased for recipients of child protective services, foster care, mandated preventive services, domestic violence services, and adult protective services.

Medical Assistance: This category reflects any Medicaid related costs paid directly by our department such as health insurance premiums paid on behalf of eligible Medicaid recipients.

MMIS: This stands for the Medicaid Management and Information System. Expenditures from this category are billed to us by the State and cover the various community services billable to Medicaid as defined by the State. Only the local share of Medicaid is reflected in this account. Beginning in 2006, expenditures from this category were capped at set weekly rates to cover the total local Medicaid costs for this MMIS account and the Medical Assistance account. The cap amount increased by approximately 3% each year until 2013 when the methodology changed, and the increase was only 2%. In 2014, the increase was 1% and thereafter the increase was set at 0%. The weekly share amounts were then reduced over years due to enhanced federal funding for certain single adult populations related to the Affordable Care Act (ACA) provisions, and more recently due to enhanced federal pandemic money. In 2023 the state ended reductions due to enhanced pandemic money and began a phase-out of the ACA federal reductions.

Family Assistance: This category reflects any expenditure made for families who are eligible for Family Assistance cash benefits including emergency benefits and employment services. It also reflects any expenditure made for families in receipt of mandated preventive services and/or foster care services that meet eligibility criteria for EAF (Emergency Aid to Families).

Child Care: This category reflects any expenditure made for children in foster care who qualify for federal Title IVE funding, and for those children who are placed due to neglect or a voluntary instrument who do not qualify for any federal Title IVE or EAF funding. The costs for all children receiving an adoption subsidy are included in this account. Also, in this category, are the room and board costs for any children placed in a residential facility by school districts through the CSE (Committee on Special Education) and the tuition costs of children placed in the Office of Mental Health Residential Treatment facilities.

Juvenile

Delinquent: This category reflects any expenditure made for children in foster care who are adjudicated a PINS or JD and who are not eligible for federal Title IVE or EAF funding. This category also contains the expenditures made for any child placed in a non-secure detention facility.

State Training: This category reflects the local share of costs for children placed in the custody of the New York State Office of Children and Family Services and placed at state operated facilities. These are children who have been adjudicated with serious JD offenses. It also reflects costs of youths placed in secure detention.

Safety Net: This category of cash assistance reflects any expenditure made for childless adults or families who have exhausted their 60-month time limit for Family Assistance who qualify for the state operated Safety Net cash assistance program. It includes emergency services for those who qualify.

HEAP: This is the Home Energy Assistance Program. It reflects any expenditure made for eligible applicants who qualify for a renter's benefit when heat is included in rent.

Emergency

Aid to Adults: This category of assistance reflects expenditures made for those SSI recipients who qualify for an emergency benefit such as a utility shut-off or eviction.

2023 REVENUE DISTRIBUTION

Federal Share	\$7,845,860	24.2%
State Share	\$6,986,504	21.5%
County Share	\$16,641,053	51.2%
Local Revenue/Repayments	<u>\$1,009,584</u>	<u>3.1%</u>
Total	\$32,483,001	100.0%

2023 COSTS BY ACCOUNT

ADMINISTRATION

Administrative Costs	\$9,192,187
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Special Allocations

Non-Residential Domestic Violence	25,000
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Behavioral Health	35,867
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Rental Supplement Program	44,479
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Code Blue	<u>249,864</u>
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Total special allocation 3xpenditures	\$355,210
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Total Administration	\$9,547,397
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PROGRAM ACCOUNTS

Family Assistance	\$3,271,339
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Cash Assistance	\$1,239,840
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Foster Care	\$1,689,636
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Preventive Services	<u>\$341,863</u>
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Safety Net	\$2,770,656
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Emergency Aid to Adults	\$4,010
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Juvenile Delinquent Care	\$21,388
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State Training Schools (OCFS)	\$37,656
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Child Care	\$5,174,827
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Foster Care	\$1,560,480
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Adoption Subsidies	\$3,310,530
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Raise the Age	\$0
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CSE & RTF	<u>\$303,817</u>
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Medical Assistance	\$0
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MMIS	\$9,375,085
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Services for Recipients	\$1,028,577
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Services for Recipients	\$1,028,577
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Raise the Age	<u>\$0</u>
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Home Energy Assistance Program	\$27,386
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Daycare	\$1,224,680
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Total Program	\$22,935,604
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TOTAL 2023 EXPENDITURES	\$32,483,001
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2023 Annual Report
Financial Account Highlights

Summary of 2023 Budget

	<u>2023 Budget</u>	<u>2023 Actual</u>	<u>Difference</u>
Expenditures	\$33,037,072	\$32,483,001	(\$554,071)
Revenue	\$16,396,019	\$15,841,947	(\$554,071)
County Share	\$16,641,053	\$16,641,053	\$0

Summary of Expenditures

Administrative Accounts

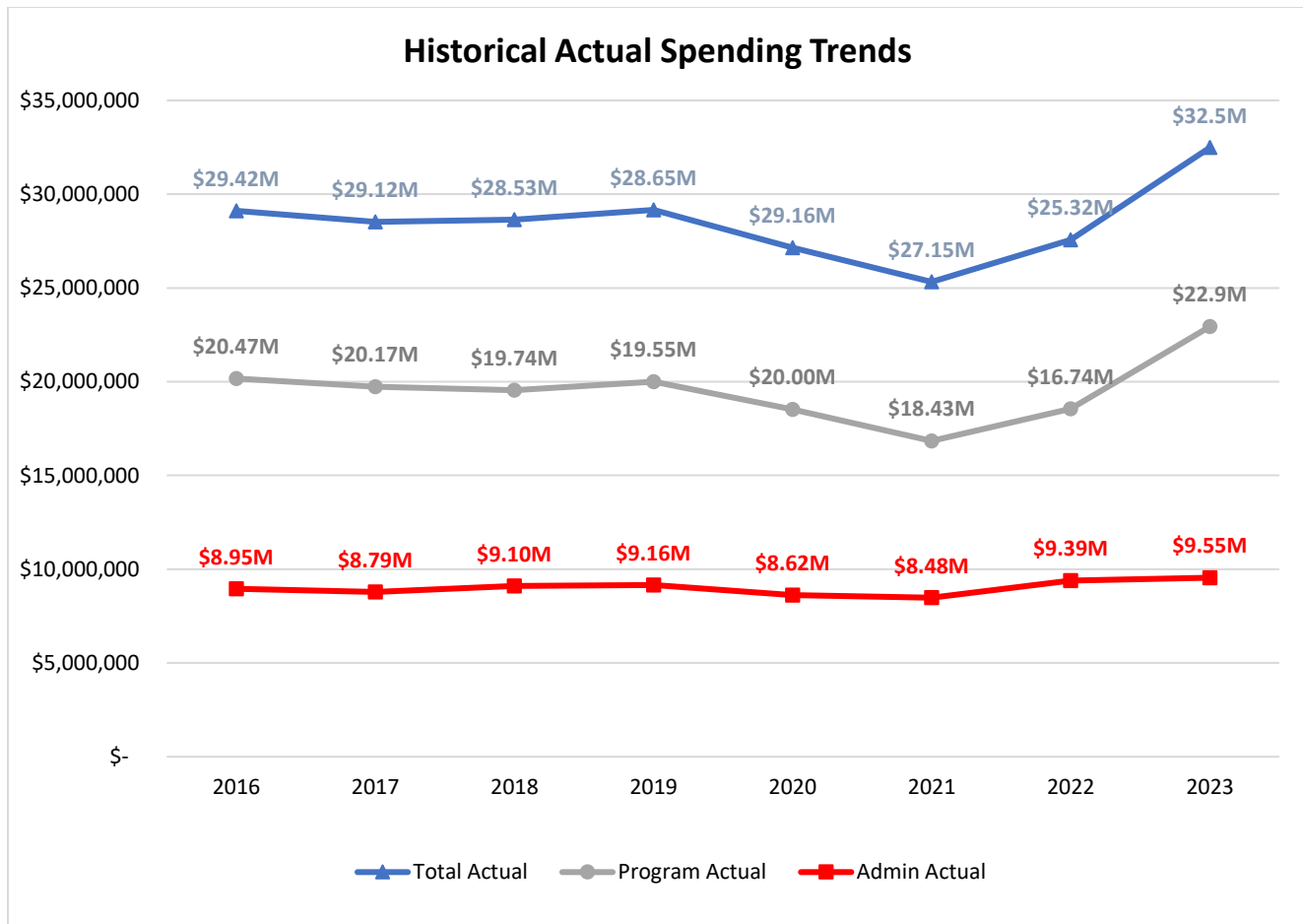
	<u>Original Budget</u>	<u>Actual</u>	<u>Difference</u>	<u>Estimated Local Share</u>	<u>Significant Highlights</u>
Salaries	\$5,978,570	\$5,670,777	(\$307,793)	\$1,452,460 26%	- Many vacancies - Regrading of some CSEA titles
Fringe	\$2,679,654	\$2,300,913	(\$378,741)	\$598,237 26%	All fringe costs were lower than budgeted
Equipment	\$6,600	\$10,172	\$3,572	\$2,645 26%	2 new printers purchased 12 new computers purchased 2 iPads purchased
Contractual	\$1,524,720	\$1,315,671	(\$209,049)	\$342,074 26%	Some expenses were much less than expected: Malpractice Insurance, Car repairs, RSP, ACL grant
Code Blue	\$195,000	\$249,864	\$54,864	\$0	We continue to receive 100% reimbursement

Raise the Age (Not included in Program Accounts)

	<u>Original Budget</u>	<u>Actual</u>	<u>Difference</u>	<u>Estimated Local Share</u>	<u>Significant Highlights</u>
Raise the Age	\$792,000	\$0	(\$792,000)	\$0	We did not have any RtA youth in 2023

Program Accounts

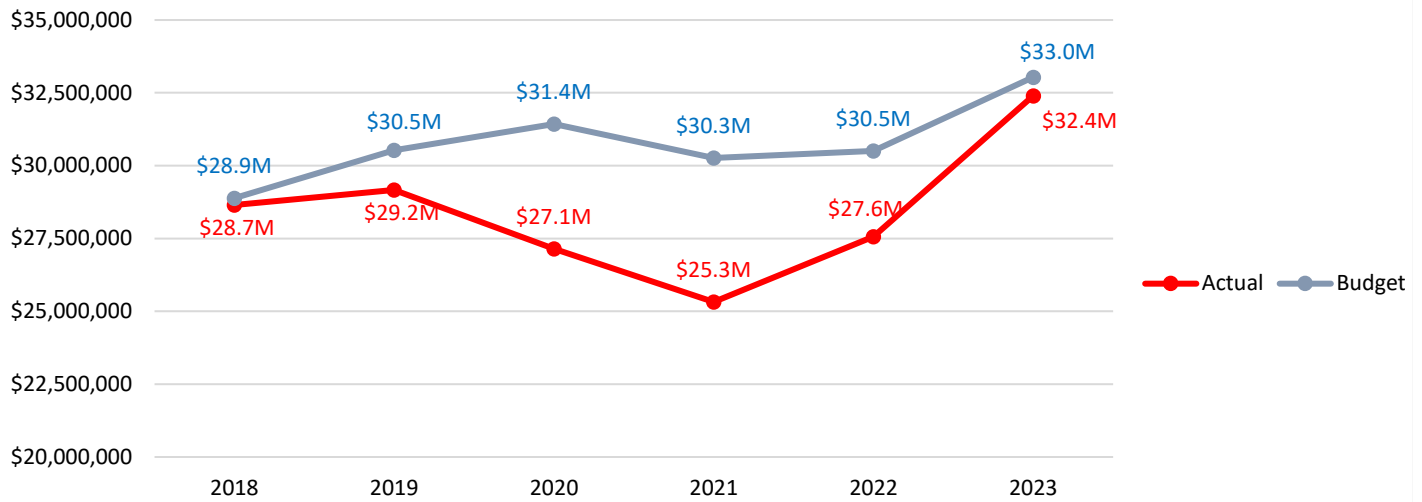
	<u>Original Budget</u>	<u>Actual</u>	<u>Difference</u>	<u>Estimated Local Share</u>	<u>Significant Highlights</u>
Daycare	\$652,000	\$1,224,680	\$572,680	\$53,422 4%	- Income levels increased 12 mo guarantee
Services for Recipients	\$1,102,212 w/o RtA	\$1,028,577	(\$73,635)	\$321,981 31%	Slight shift in case eligibility to EAF
MMIS Medicaid	\$9,209,785	\$9,375,085	\$165,300	\$9,375,085 100%	- This is all local share. 53 weeks paid in 2023. - Federal enhanced money taken away
Medical Assistance	\$0	\$0	(\$0)	(\$45,547) 0%	Local share shows as negative due to recoveries that we receive and return to State/Federal
Family Assistance	\$3,156,585	\$3,271,339	\$114,754	\$1,336,130 40%	- Foster Care costs increased with higher level placement costs. - Preventive costs shifted back to this account from Services for Recipients - TA caseload increased
Child Care	\$5,375,746 w/o RTA	\$5,174,827	(\$200,919)	\$1,321,405 26%	- Foster care costs for higher level care facilities remained constant. 1 RTF placement, 2 kids in CSE - Increase in MSAR rates
Juvenile Delinquent Care	\$66,000	\$21,388	(\$44,612)	\$21,126 10%	Transportation and secure detention placement
State Training	\$60,000	\$37,656	(\$22,344)	\$37,656 100%	We had 1 youth placed in secure detention for 2 months in 2021
Safety Net	\$2,183,200	\$2,770,656	\$587,456	\$1,810,982 65%	- Local share was reduced due to SSI Repayments - Caseload continues to rise - Temporary housing costs doubled and continue to rise
HEAP	\$35,000	\$27,386	(\$7,614)	\$0	No local share (Prior yr. rev makes up difference)
Emergency Aid to Adults	\$20,000	\$4,010	(\$15,990)	\$2,003 50%	SSI emergencies fluctuate every year



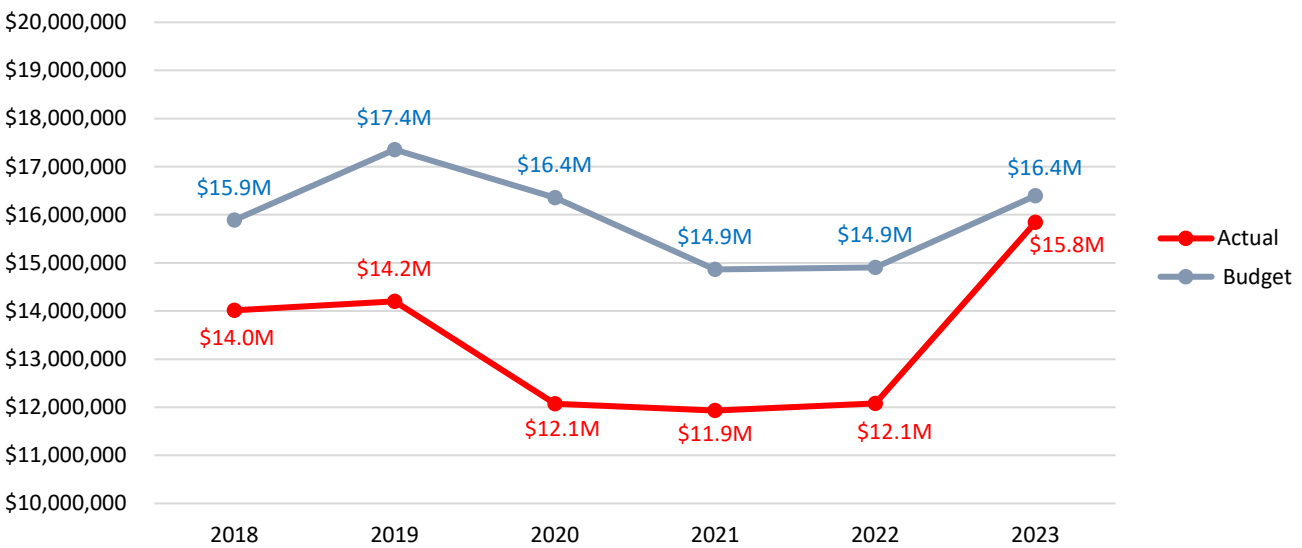
2023 Budget Summary Notes

- Expenditures were up, but still under budget in 2023. This is primarily due to lower than anticipated administrative costs, no Raise the Age costs, and despite increased Medicaid, Safety Net, foster care, daycare, and adoption costs.
- Expenses are growing in areas with capped, reduced or no revenue.
- We changed how we recognize child welfare revenue that is advanced to us and then reconciled a year or more later. This money is being placed in a deferred revenue account rather than being recognized as cash when it is received. This allows us to recognize it after the State confirms final amounts owed to us. Due to underspending and county share savings, we have been able to accumulate savings in this account that will help when expenditures increase in future years due to state policy shifts.

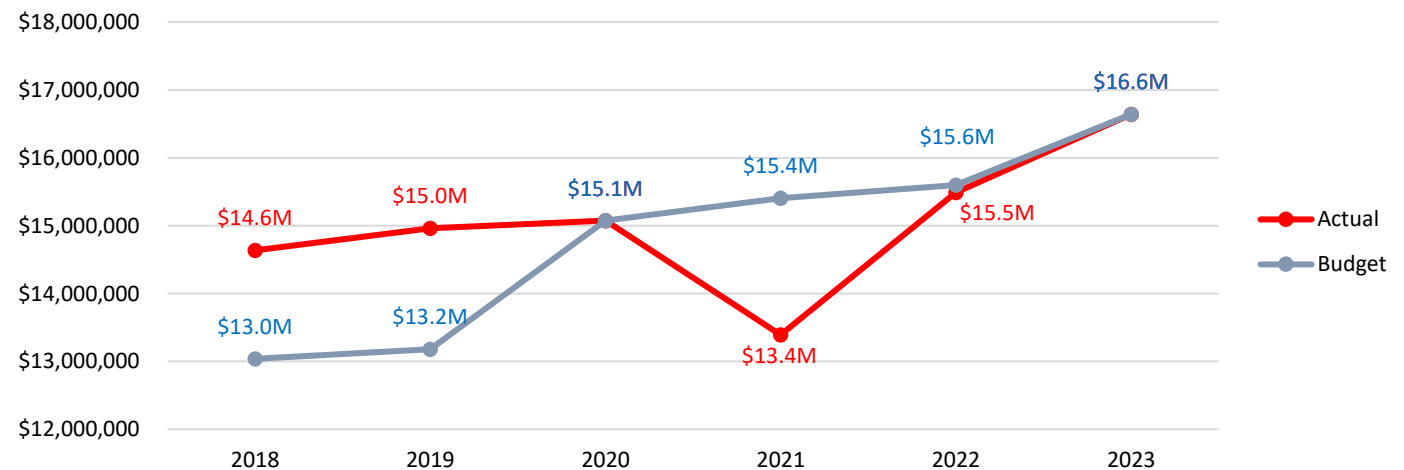
Expenditures



Revenues



County Share





Public Health
Prevent. Promote. Protect.

Cortland County Health Department

CORTLAND COUNTY HEALTH DEPARTMENT

COUNTY OFFICE BUILDING
60 CENTRAL AVENUE
CORTLAND, NEW YORK 13045-2746
(607) 753-5036
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Nicole Anjeski, MS, MPH
Public Health Director
Lisa Perfetti, BSN, RN
Deputy Public Health Director
Douglas MacQueen, MD, MS, FIDSA
Medical Consultant



Health and Human Services Committee Report

April 2024

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Vaccine Ambassador Program

The NYS Department of Health is nominating the Cortland County Health Department's Vaccine Ambassador Program for the 2024 National Adult and Influenza Immunization Summit (NAIIS) Immunization Excellence Awards. These awards recognize the extraordinary contributions of individuals and organizations towards improved vaccination rates within their communities during the past year. This is a great accomplishment for our staff and volunteers! Nominations are due May 1, and recipients of the awards will be announce around August.

For more information about the program see attached *Community Immunization Ambassadors of Cortland County Report (July 2023-Feb 2024)*.

Workforce Development

As part of the department's Workforce Development Plan training opportunities are offered to all staff throughout the year. One of these trainings was the Kingian Nonviolence Conflict Reconciliation Training held in February. Kingian Nonviolence Conflict Reconciliation is an approach to conflict and community leadership that offers values and methods useful to anyone who wants to use conflict constructively in their personal life, in group settings, or in community issues and build a reconciled world.

Through interactive discussions, engaging exercises, and thoughtful exploration, participants receive a robust training experience that equips them with the knowledge and skills necessary to embrace nonviolence as a way of life. The teachings can be applied to a broad spectrum of individual, group, institutional, and system conflicts.

The trainings teach the Six Principles of Kingian Nonviolence, as well as basic concepts, strategies and tools of conflict reconciliation. Participants read Dr. King's writing, view and discuss documentary film footage from the Civil Rights Movement, and take part in interactive exercises and role-playing.

Eight health department staff from across all divisions attended this meaningful training. This training occurred each Wednesday in February held by YWCA in partnership with SUNY Cortland. Each training session was approximately four hours. On April 1, staff attended a graduation ceremony at SUNY Cortland that highlighted this training.

For more information about the training, please email robyn@cortlandywca.org



Public Health Fellows-2.0

The original Public Health Fellows grant is set to end on June 30, 2024; with this, five temporary Public Health Fellows Positions will also end. There was leftover money in the Public Health Fellows award throughout the state and the NYSDOH has decided that instead of contracting directly with the Local Health Department's they will instead contact with the Public Consulting Group (PCG) to hire all Fellows on behalf of the LHDs. Instead of the original five fellows we were awarded over the past two years, we have been allocated three fellows for the next two years. For this version of the program we will be acting as a host site (similar to internships), this will require a contract agreement with PCG and the county. Although we will be disappointed that our staff allocation was not the same as before, we look forward to working within the fellowship program.

2023 Annual Report

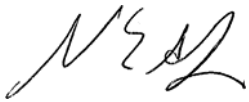
I am pleased to share the 2023 Cortland County Health Department's Annual Report with our community. The work we do in Public Health is ever-changing, complex, and challenging, yet what remains constant is our responsibility to protect the public's health and lead efforts to improve the overall health and well-being of the community. This report demonstrates the commitment of staff to ensure the people of Cortland County benefit from comprehensive, science and evidence-based public health practice, policy, services and programs.

The department experienced a year of opportunities and challenges that have deepened and reinforced our drive and efforts to improve the health of Cortland County residents. In this report, we share some of the exciting work that we are doing to help support the health and wellness not only for Cortland County residents but also for those that visit our community. We also provide an update on our accreditation status and the steps we are taking to prepare for re-accreditation.

Continued collaboration with our community residents, stakeholders, and partners helps us to be successful and strengthen our ability to affect the changes that are needed. We could not do it without their help and support. I also want to express my heartfelt thanks to all of the Cortland County Health Department staff for their ongoing dedication to improving the health of residents in this county.

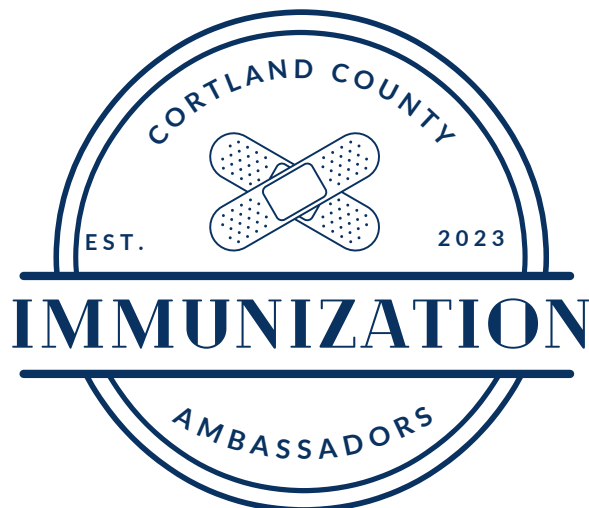
Please see attached *CCHD 2023 Annual Report*

Sincerely,



Nicole Anjeski, MS, MPH
Public Health Director

COMMUNITY Immunization AMBASSADORS of Cortland County



Public Health
Prevent. Promote. Protect.

Cortland County Health Department



Immunization Ambassador Programs

Immunization ambassadors train other community members to disseminate important health information in the community. These programs are most effective when they are trusted community members who share similar beliefs and characteristics with their peers.

Research Shows....



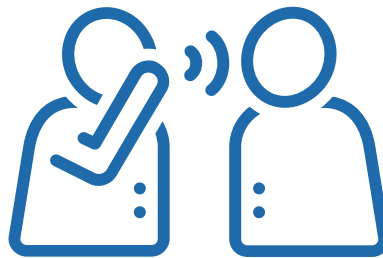
When people think that most people around them want to be vaccinated, they are more likely to be vaccinated as well.



Endorsement of vaccines from one's own social network can help spread credible information about vaccines.



Scan for
article

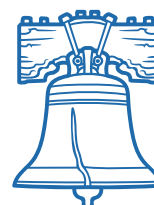


Where Has it Worked...

San Francisco engaged trusted messengers in one under-resourced Latine neighborhood to overcome misinformation and distrust. 90% of clients (~11,000) that participated in the program personally reached out to at least one person in their social network to recommend the COVID-19 vaccine.



A youth led coalition in Philadelphia trained 45 teens to be vaccine ambassadors. The teens organized vaccinations events, engaged in peer to peer conversations, and corrected misinformation on social media .



Immunization Ambassadors - Cortland County Model

Immunization Coalition of Cortland County

Cortland County Health Department
Provides staff support for planning, recruitment & training, and technical assistance to organizations.

Individual Immunization Ambassadors:
provide insight into planning, conduct peer outreach and education, participate in marketing efforts.



Organization Immunization Ambassadors:
host individual ambassadors or train employees to be ambassadors and incorporate activities into workflow.



Community Members:
empowered by ambassador facilitated activities, are given the necessary tools to make the best decision for their own health when it comes to immunization and will spread the information to members of their social network.

Funding through the
NYSDOH for the
ambassador program
provided until July 2024

Local immunization data
helps target efforts to areas
that need it most, tracks
success and progress

Peer reviewed research and
real world community
examples ensure the program
is designed with the best
available evidence

Timeline



August 2023

Info sessions held & ambassadors begin trainings



February 2024

Paid social marketing campaign launched using personal stories of ambassadors

July 2023

Ambassador recruitment begins

Immunization
607-753-5036

VOLUNTEERS NEEDED

For Cortland County Immunization Efforts

Volunteer Activities May Include:

- Attend Immunization Coalition meetings
- Conduct community outreach
- Engage in media campaigns
- 5-10 hours a month

Apply Now!
Interviews will be in August!

Volunteers will receive monetary incentives for their time - more details will be provided at the interview!

Volunteers must be: 18 years or older, a Cortland County resident, and up to date on their COVID-19 vaccine

September 2023

Community outreach at tabling begins



Immunization Ambassador Activities



Cortland County Immunization Ambassadors **choose** which activities **best fit their skills and interests**. We also encourage ambassadors to suggest activities at any point!



Outreach/Education

- Outreach throughout the community to educate and engage community members
- Provide <2 minute trainings on vaccines and how to talk with peers about vaccination
- Help community members start conversations with their peers about vaccination
- Collect written and photo testimonials from community members.
- Distribute gift card incentives to community members who engage in activities.



Marketing

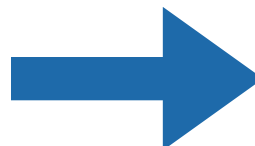
- Provide community member feedback on marketing messages, images, and other aspects of program design for the immunization programs.
- Participate in marketing campaigns through testimonials, recording radio ads, providing comments to media, being an image model for social media etc.



Insight

- Use personal community connections to suggest businesses and other organizations that may want to become an ambassador agency or host volunteer ambassadors activities.
- Attend immunization coalition meetings to provide community member perspective to local healthcare organizations and agencies.
- Complete feedback surveys on immunization program initiatives.

All ambassadors take an ~1.5 hour training and have access to a website for training, resources, and a link to the signup.com page where they can sign up for activities.



Results

Program Measures

September 2023 - February 2024

7

Immunization ambassador info sessions held with 15 total attendees

13

Immunization ambassadors recruited and completed training

32

Community outreach events attended by ambassadors

70%

Community outreach events specifically targeted high risk or low vaccine populations

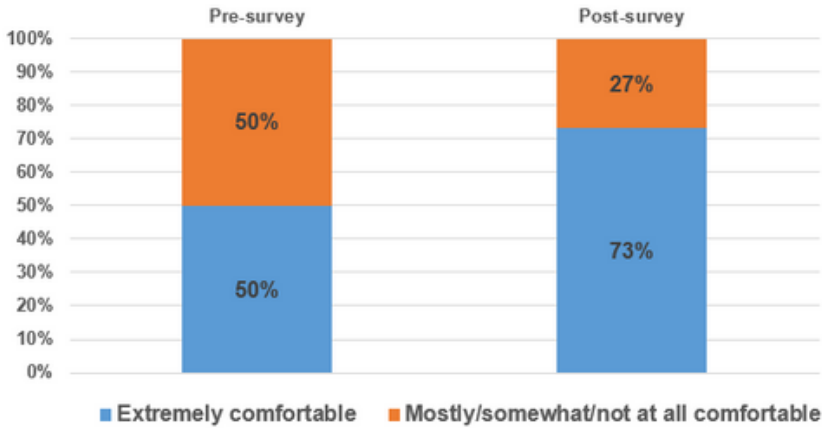
356

Activities were completed by community members at outreach events to normalize conversations about immunizations (i.e. texting contacts with vaccine info, sharing a testimonial on why they got vaccinated, taking a <2 minute training on how to talk about vaccines).

Results

Ambassador Pre/Post Survey Responses on Immunization (NOT including the COVID-19 Vaccine)

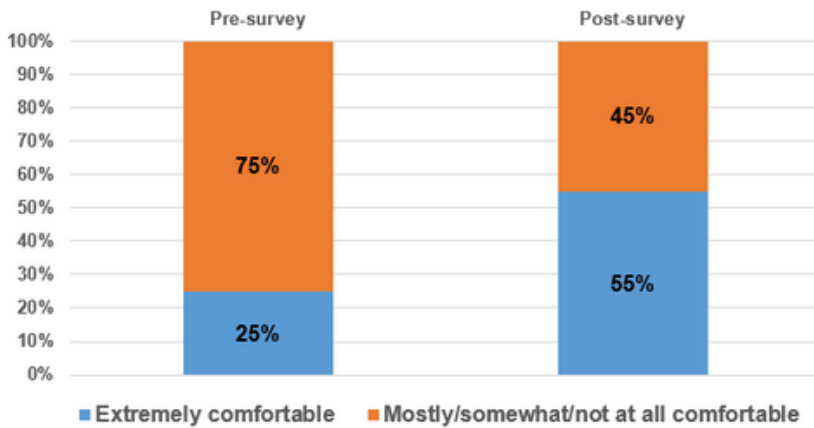
Figure 1. How comfortable do you feel talking to family/friends about immunizations (not including COVID-19)



The % of ambassadors that reported feeling extremely comfortable talking to their family or friends about immunizations

**increased from
50% to 73%**

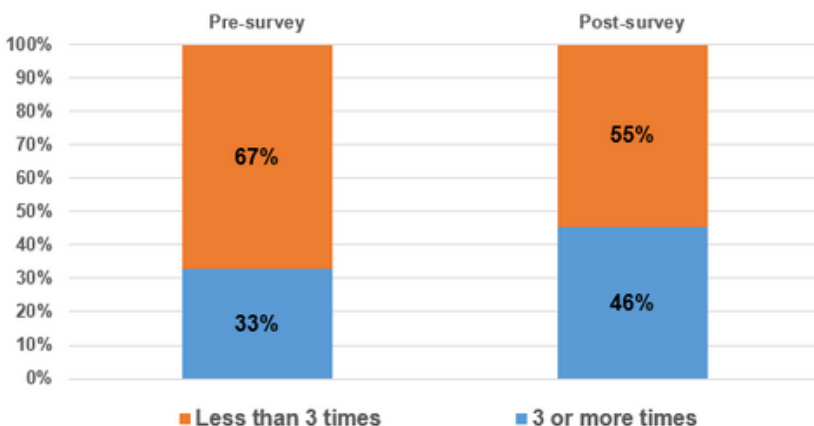
Figure 2. How comfortable do you feel talking to community members about immunizations (not including COVID-19)



The % of ambassadors that reported feeling extremely comfortable talking to community members about immunizations

**increased from
25% to 55%**

Figure 3. How many times in the past two weeks have you had a discussion about immunizations (not including COVID-19)



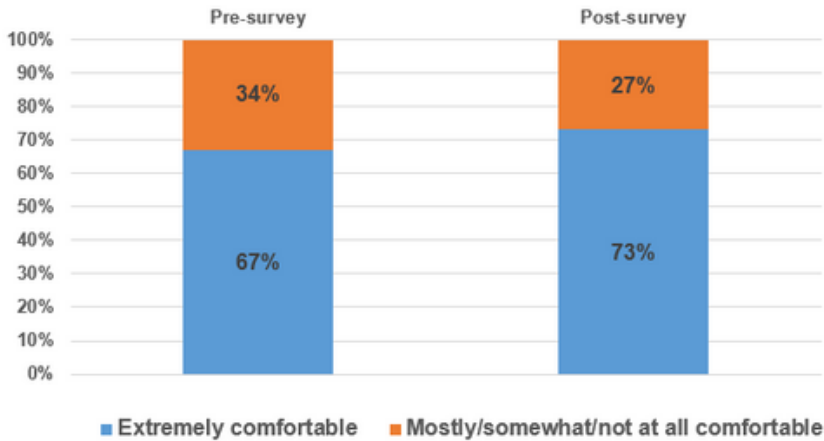
The % of ambassadors that reported having discussions about immunizations 3 or more times in the past two weeks

**increased from
33% to 46%**

Results

Ambassador Pre/Post Survey Responses on Immunization (Specific to COVID-19 Vaccine)

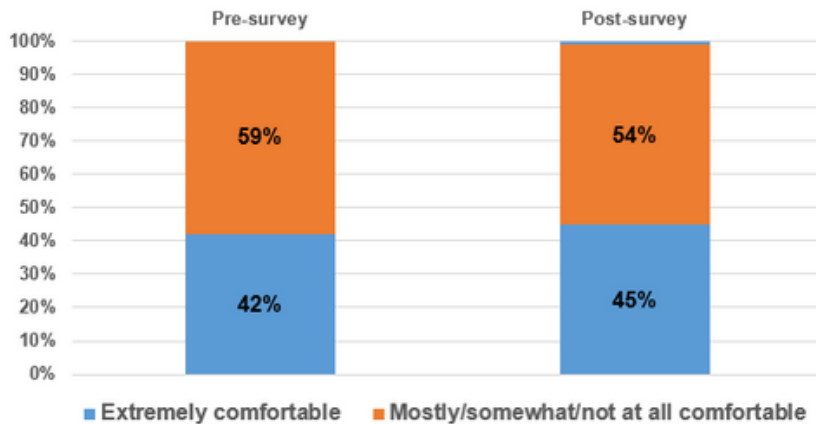
Figure 1. How comfortable are you talking to family/friends about the COVID-19 Vaccine



The % of ambassadors that reported feeling extremely comfortable talking to their family or friends about the COVID-19 vaccine

increased from 67% to 73%

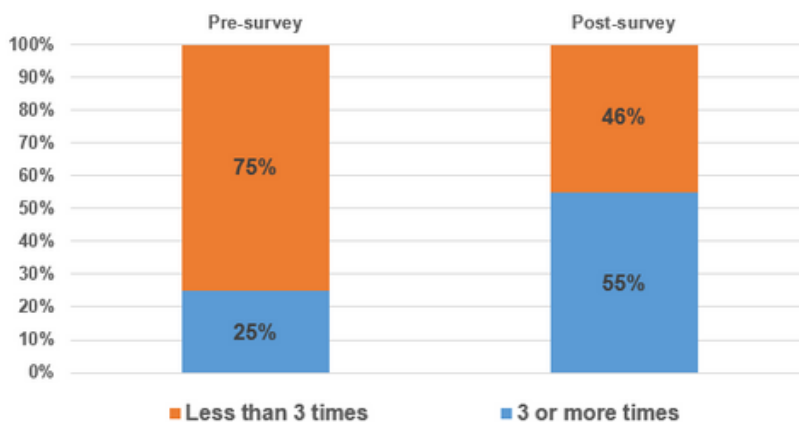
Figure 2. How comfortable are you talking to community members about the COVID-19 Vaccine



The % of ambassadors that reported feeling extremely comfortable talking to community members about the COVID-19 vaccine

remained unchanged

Figure 3. How many times in the past two weeks have you had a discussion about the COVID-19 vaccine



The % of ambassadors that reported having discussions about the COVID19 vaccine 3 or more times in the past two weeks

increased from 25% to 55%

Ambassadors In Action - Outreach



Ambassadors In Action - Marketing



CORTLAND COUNTY MENTAL HEALTH DEPARTMENT

Health & Human Services (HHS) Leg. Committee April 2024 Report

Submitted by Sharon MacDougall, *MSW (LCSW-R), MBA, MS* Mental Health (MH) Department Director of Community Services (DCS)

OVERVIEW

Cortland MH Dept. is the NYS Statutory Art. 41 "Local Government Unit" (LGU). All county MH Directors work closely with NYS OMH, OASAS & OPWDD. The Conference of Local Mental Hygiene Directors (CLMHD) is part of NYSAC and works on behalf of all County MH Directors (aka: Directors of Community Services (DCS)); representing all County DCSs & County LGUs with OMH, OASAS & OPWDD.

Summary of local, regional & state collaborations all County MH Depts. support:



April National Awareness recognitions:

- Child Abuse Awareness Month <https://ocfs.ny.gov/main/news/article.php?idx=2601>
- Sexual Assault Awareness Month <https://opdv.ny.gov/>
- Alcohol Awareness Month <https://www.samhsa.gov/newsroom/observances/alcohol-awareness-month>
- Minority Health Month <https://www.nimhd.nih.gov/programs/edu-training/nmhm/>
- National Stress Awareness Month <https://hr.nih.gov/working-nih/civil/national-stress-awareness-month>

Mental Health Department Programs:

INTERNAL DEPARTMENT PROGRAMS	DATA DATE	PROGRESS UPDATES	ACHIEVEMENTS & RISKS	OUTCOMES & TRENDS
All MH Dept. Programs Fiscal/Revenue	3/2024	March 2023 Fiscal and Revenue close out and reporting to County Finance and NYS OMH. Providers and MH Dept. CCSI Fiscal Officer & MH -DCS working to complete NYS 2023 Consolidated Fiscal Report (CFR). Due dates in April - May 2024 for fiscal and data reporting to OMH, OASAS, OPWDD from all Behavioral Health providers.	Q2 2024 expecting additional billing revenue from 2023 adjustment from NYS Managed Care for treatment provided. 2/21/24 National Cyberattack is temporarily limiting billing via Medent (EHR) billing system. Reviewed with County Administration. Planning to restart all billing in phases from April – May 2024.	2/21/24 National Cyberattack temporarily limiting billing. NYS OMH, OASAS, OPWDD state aid awards to MH Dept. have increased each year for the last 3yrs.
Mental Health: Outpatient Treatment Rehabilitation & Supports (MHOTRS) AKA = Clinic NYS OMH Licensed / Certified Program. Largest program at MH Dept.	2/2024	Continued trend of high demand for therapy; based on new referrals. Continued trend of increase in number of services; increased complexity of needs for treatment. Need to add to therapy workforce in 2024 to meet this community demand for our treatment programs. Feb. 2024: • Total sessions provided: 1,500 • 75 daily sessions (ave.) • 35% of all session provided by telehealth • Total enrolled Clients/Patients: 1,115 • 72 new referrals • 43 new admissions Learn more about our Clinic (aka: MHOTRS): https://omh.ny.gov/omhweb/clinic_restructuring/, https://www.cortland-co.org/452/Mental-Health-Clinic	Thank you - increasing NPP total hours/pay made the title reimbursement competitive to the region/NYS averages. New MH Dept. PT Medical Director/Psychiatrist Dr. Gulhati and new NPP starting in May. New staff orientation takes an average of one month; mainly due to EHR learning curve. Medical Director/Psychiatrist positions are in very high demand – with low available for Nationally.	High demand for therapy based on new referrals. Increase in complexity of clients' needs for therapy/support. Clinic program originated around 1969 in Cortland. Over 50yrs of dedication to the community.
“Horizon House” (HH) Adult Continuing Day Treatment (CDT) Daily program for MH clients with serious mental illness (SMI)	2/2024	Status Quo caseloads and accepting new referrals. M-F program ave. 5hrs/day. Learn more about Adult CDT Treatment & HH Program: https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5396210/, https://www.cortland-co.org/453/Horizon-House	Adult CDT billing rate increased anticipated in 2024. Successful transition to new documentation in Medent to streamline this requirement for billing.	HH Adult CDT Program originated in the 1980s. Estimated 40yrs of dedication to the community.

Attachment: MH Monthly Report to Leg. HHS 4.2024 (12203 : Mental Health Department Monthly Report)

Family Support Services (FSS) Respite & Children Family Support Services (CFTSS) <i>Youth/Family outpatient services and treatment for those with Medicaid managed care eligibility.</i>	2/2024	Youth & Family services & Treatment provided M-F in community settings as accepted by families. Multiple NYS OMH regulations adjustments - significantly affected CFTSS the last 4yrs. CFTSS eligibility requires Medicaid managed care for the youth to be admitted. Feb. 2024: • 105 Total sessions Learn more about CFTSS Services and FSS: https://www.cortland-co.org/454/Family-Support-Services, https://omh.ny.gov/omhweb/bho/childrensmc.html	Multiple layers of OMH, DOH, OCFS regulatory changes for all youth Behavioral Health treatment & services in the last 4yrs.	2024 planning to increase enrolment in CFTSS services. Always working to adapt this program to meet community needs.
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Macro-System News & Developments MH, SUD, I/DD (County, Regional & NYS)

Core Focus Areas (MH, SUD, I/DD)	Topic	Summary	Links for Further Review
Mental Health (MH) MH Dept. NYS Art. 41 statutory coordination with Office of Mental Health (OMH)	Multiple OMH RFPs open for housing funding.	Once in a decade RFPs for OMH housing opportunities.	Latest announcement of awards: https://www.governor.ny.gov/news/governor-hochul-announces-30-million-awarded-supportive-housing & https://www.governor.ny.gov/sites/default/files/2024-02/esshi-8-awardees.pdf
Substance Use Disorders (SUD) MH Dept. NYS Art. 41 statutory coordination with Office of Addiction Services and Supports (OASAS)	OASAS Opioid Settlement Funds (OSF) to MH Dept. 2024 NYS 15% (est) Budget Reductions expected	June 2024 Resolution for OASAS OSF – based community input and data and Community input from the last 4yrs of Healing Community Study (HCS). NYS 2024-2025 budget expecting reduction in OASAS funding.	OASAS OSF initiatives: https://oasas.ny.gov/opioid-settlement-funding-initiatives, Attorney General (AG) https://ag.ny.gov/nys-opioid-settlement NYS OSF Advisory Board: https://oasas.ny.gov/opioid-settlement-fund-advisory-board
Intellectual/Developmental Disability (I/DD) MH Dept. NYS Art. 41 statutory coordination with Office of People with Developmental Disabilities (OPWDD)	OPWDD & DOH collaborating to address I/DD needs	March was Developmental Disabilities Month. Kerri Neifeld, OPWDD Commissioner resigned and shared her positive farewell with NYS.	National Association of Councils on Developmental Disabilities (NACDD) “A World of Opportunities” as the theme of Developmental Disabilities Awareness Month in 2024. OPWDD newsletter: https://opwdd.ny.gov/news/news-publications