

County of Jefferson
Office of the County Administrator



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

November 24, 2021

TO: Members of Health & Human Services
FROM: Robert F. Hagemann, III, County Administrator *R.F.H.*
SUBJECT: Health & Human Services Committee Agenda

Please let this correspondence serve as notification that the Health & Human Services Committee will meet on ***Tuesday, November 30, 2021 at 6:00 p.m.*** in the Board of Legislators' Chambers. Following is a list of agenda items for the meeting:

Resolutions:

1. Authorization Agreement for Provision of Senior Nutrition Program for Jefferson County Office for the Aging
2. Authorization Agreements for Provision of Services to Elderly of Jefferson County
3. Authorizing Agreement for Provision of Related Services in Connection with the Program for Preschool Children with Disabilities
4. Amending the 2021 County Budget Relative to Mental Health Programs and Authorizing Amended Agreements in Relation Thereto
5. Authorizing Agreement with Thousand Islands Emergency Rescue Service in Relation to COVID-19 and Other Communicable Disease Outbreaks
6. Accepting Additional Funding for Public Health Emergency Preparedness Program
7. Amending the 2021 County Budget in Relation to Epidemiology and Laboratory Capacity Reopening Schools Grant Award
8. Amending the 2021 County Budget in Relation to COVID-19 Vaccine Response Grant Funding

9. Amending the 2021 County Budget in Relation to Epidemiology and Laboratory Capacity COVID-19 Local Health Department Funding

Informational Items:

1. Monthly Departmental Reports:
 - Community Services
 - Public Health

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

RFH:jdj

cc: Office for Aging
Community Services
Public Health
Social Services

Veterans Service Agency
County Attorney
County Treasurer

JEFFERSON COUNTY BOARD OF LEGISLATORS
Resolution No. _____

Authorization Agreement for Provision of Senior Nutrition Program for
Jefferson County Office of the Aging

By Legislator: _____

Whereas, The Jefferson County Office for the Aging (OFA) works for the establishment and expansion of programs and services which assist older persons in the areas of their most urgent need including provision of congregate and home delivered meals to older residents throughout the County, and

Whereas, The Nutrition Program is supported by the use of contractor(s) for the provision of good and services, and

Whereas, Bid specifications associated with the OFA Nutrition Program were duly advertised and resulted in the receipt of qualified bids for the goods and services so specified.

Now, Therefore, Be It Resolved, That Jefferson County enter into and an agreement for the provision of OFA Nutritional Services with Trinity Services Group Inc. for the period January 1, 2022 through December 31, 2024 with the possibility of two one-year extensions for such consideration as reflected below:

| <u>Contractor</u> | <u>Approx. No. of Meals to be Served Annually</u> | <u>Consideration to be paid by the County in 2022</u> |
|--|---|---|
| Trinity Services Group Inc. 477 Commerce Group Blvd Oldsmar, FL, 34677 | 150,000 | \$9.83* |

*(Price changes through duration of the contract are contingent upon Consumer Price Index as outlined in the bid specifications)

and be it further

Resolved, That the agreement authorized herein shall contain such other terms and conditions as are required in order to achieve compliance with Sections 6654.10 and 6654.11 of Title 9 of NYCRR and other applicable Federal and State statute, rule and regulation, and be it further

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

Seconded by Legislator: _____

JEFFERSON COUNTY BOARD OF LEGISLATORS
Resolution No. _____

Authorization Agreements for Provision of Services to Elderly of Jefferson County

By Legislator: _____

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

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

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

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

Transportation Services

The Volunteer Transportation Center of Jefferson County, Watertown, NY for the provision of transportation services for persons 60 years of age or older; for the period January 1 through December 31, 2022, consideration of services of approximately \$20,000 annually,

Wilna-Champion Transportation Center, Inc Carthage, New York for the provision of transportation services for persons 60 years of age or older; for the period January 1 through December 31, 2022, consideration of services of approximately \$10,000 annually,

Paynter Senior Center, Inc., Clayton, New York for the provision of transportation services for persons 60 years of age or older; for the period January 1 through December 31, 2022, consideration of services of approximately \$2,500 annually.

Personal Emergency Response System (PERS) Services

STAT Communications for the provision of personal emergency response system (PERS) services for persons 60 years of age or older; for the period of January 1 through September 30, 2021 at the rate of \$17.00 per month per unit with no installation charge,

Doyle Security Systems for the provision of personal emergency response system (PERS) services for persons 60 years of age or older; for the period of October 1, 2021 through December 31, 2025 with an optional one year extension, at the rate of \$17.00 per month per unit with no installation charge.

and be it further

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

Seconded by Legislator: _____

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

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

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

Clerk of the Board of Legislators

JEFFERSON COUNTY BOARD OF LEGISLATORS
Resolution No. _____

Authorizing Agreement for Provision of Related Services
in Connection with the Program for Preschool Children with Disabilities

By Legislator: _____

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

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

Whereas, By Resolution No. 111 of 2021 Jefferson County authorized agreements with providers for the provision of related services and set rates, and an agreement for an additional provider and service needs to be authorized.

Now, Therefore, Be It Resolved, That, pursuant to Section 4410 of the Education Law, Jefferson County enter into an agreement with the following party for the provision of the indicated service(s). The term of said agreement shall be for the period December 8, 2021 through June 30, 2022 in accordance with the requirements of the State Education Law and regulations:

| <u>Provider</u> | <u>Service</u> |
|------------------------------|----------------|
| Lyme Central School District | Speech Therapy |

and be it further

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

Seconded by Legislator: _____

JEFFERSON COUNTY BOARD OF LEGISLATORS
Resolution No. _____

Amending the 2021 County Budget Relative to Mental Health Programs
and Authorizing Amended Agreements in Relation Thereto

By Legislator: _____

Whereas, It is necessary to reallocate excess State Aid and County funds to better align with County mental hygiene priorities within mental health agency programs to ensure the quality of existing mental health services, and

Whereas, The 2021 County Budget needs to be amended to reflect these changes and local contracts need to be amended accordingly.

Now, Therefore, Be It Resolved, That the 2021 County Budget is hereby amended as follows:

Increase:

| | | |
|----------------|-----------------------|----------|
| 01432000 04721 | Mental Health Assn | \$10,000 |
| 01432000 04735 | Veterans Peer Support | 10,000 |

Decrease:

| | | |
|----------------|----------------------------------|----------|
| 01432000 04712 | Contracted Mental Health Program | \$20,000 |
|----------------|----------------------------------|----------|

and be it further

Resolved, That the Chairman of the Board of Legislators and the Community Services Board are hereby authorized and directed to execute any necessary amended agreements relative to these changes, with the approval of the County Attorney as to form and content.

Seconded by Legislator: _____

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

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

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

Clerk of the Board of Legislators

JEFFERSON COUNTY BOARD OF LEGISLATORS
Resolution No. _____

Authorizing Agreement with Thousand Islands Emergency Rescue Service
in Relation to COVID-19 and Other Communicable Disease Outbreaks

By Legislator: _____

Whereas, The U.S. Centers for Disease Control and Prevention and/or the New York State Department of Health occasionally require travel screenings related to COVID-19 and other communicable disease at the American/Canadian Border, including temperature recording and interpretation by the Jefferson County Public Health Service, and

Whereas, By Resolution 88 of 2020, this Board of Legislators authorized an agreement with the Thousand Islands Emergency Rescue Services (TIERS) to complete the temperature recording and interpretation for the Jefferson County Public Health Service for the period February 1, 2020 through January 31, 2022, and

Whereas, The cost of this service is \$150 per patient assessed or up to ten individual assessments in the event of a group assessed at the same time and place.

Now, Therefore, Be It Resolved, That Jefferson County enter into an agreement with TIERS for the above-referenced services for the period of February 1, 2022 through December 31, 2024 and be it further

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

Seconded by Legislator: _____

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

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

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

Clerk of the Board of Legislators

JEFFERSON COUNTY BOARD OF LEGISLATORS
Resolution No. _____

Accepting Additional Funding for Public Health Emergency Preparedness Program

By Legislator: _____

Whereas, By Resolution 183, this Board of Legislators accepted funding for a one year renewal from the Centers for Disease Control (CDC) and Health Research, Inc. of the NYS Department of Health (DOH) to improve the County's preparedness to address Public Health emergencies, and

Whereas, The NYSDOH has advised Jefferson County Public Health Service of the awarding of supplemental funding from the CDC relative to the Preparedness Grant, and

Whereas, Additional funding in the amount of \$2,000 will be received for expanding and enhancing preparedness response activities which are already authorized in the 2021 County Budget.

Now, Therefore, Be It Resolved, That Jefferson County hereby accepts said additional funding covering the period July 1, 2021 through June 30, 2022, and be it further

Resolved, That the Chairman of the Board of Legislators is hereby authorized to sign any and all documents necessary to accept such funding, subject to approval by the County Attorney as to form and content.

Seconded by Legislator: _____

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

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

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

Clerk of the Board of Legislators

JEFFERSON COUNTY BOARD OF LEGISLATORS
Resolution No. _____

Amending the 2021 County Budget in Relation to Epidemiology and Laboratory
Capacity Reopening Schools Grant Award

By Legislator: _____

Whereas, By Resolution 165, this Board of Legislators accepted an Epidemiology and Laboratory Capacity grant award to maintain open schools by implementing and supporting school-based COVID-19 screening and testing for the period of June 1, 2021 through July 31, 2022, and

Whereas, Items of expenditure have been determined in the work plan with most included in the 2022 County Budget and some needing appropriation in the 2021 County Budget.

Now, Therefore, Be It Resolved, That the 2021 County Budget is hereby amended as follows:

Increase:

| | | |
|----------------|----------------------|-----------|
| Revenue | | |
| 01405000 94489 | Fed Aid Other Health | \$250,000 |
| Expenditure | | |
| 01405100 04416 | Professional Fees | \$250,000 |

Seconded by Legislator: _____

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

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

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

Clerk of the Board of Legislators

JEFFERSON COUNTY BOARD OF LEGISLATORS
Resolution No. _____

Amending the 2021 County Budget in Relation to COVID-19 Vaccine Response Grant Funding

By Legislator: _____

Whereas, By Resolution 207, this Board of Legislators accepted a New York State Department of Health COVID-19 Vaccine Response Grant for the period January 1, 2021 through June 30, 2024, and

Whereas, The funding will cover already established staff as well as operation of vaccine clinics, technical assistance to other vaccine providers, and vaccinations promotion through education and advertising, and

Whereas, Some of the items of expenditure are already reflected in the Adopted 2021 and 2022 County Budgets and some need to be appropriated into the 2021 Budget.

Now, Therefore, Be It Resolved, That the 2021 County Budget is hereby amended as follows:

Increase:

| | | |
|----------------|----------------------|----------|
| Revenue | | |
| 01405000 94489 | Fed Aid Other Health | \$58,500 |
| Expenditure | | |
| 01405100 04416 | Professional Fees | \$58,500 |

Seconded by Legislator: _____

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

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

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

Clerk of the Board of Legislators

JEFFERSON COUNTY BOARD OF LEGISLATORS
Resolution No. _____

Amending the 2021 County Budget in Relation to Epidemiology and Laboratory
Capacity COVID-19 Local Health Department Funding

By Legislator: _____

Whereas, By Resolution 164, this Board of Legislators accepted the allocation of Epidemiology and Laboratory Capacity COVID-19 funding to be used for enhanced detection, surveillance and prevention of COVID-19, and

Whereas, The funding in that resolution for purchase of laptops and printers for use at COVID-19 vaccination clinics offsite was appropriated in the Computer Hardware account line that does not include trackable items, and

Whereas, Funds need to be moved to the Trackable Durable account line to authorize such purchase.

Now, Therefore, Be it Resolved, That the 2021 County Budget is hereby amended as follows:

Increase:

| | | |
|----------------|--------------------------------|----------|
| 01405100 04111 | Trackable Durable Expenditures | \$25,000 |
|----------------|--------------------------------|----------|

Decrease:

| | | |
|----------------|-------------------|----------|
| 01405100 04118 | Computer Hardware | \$25,000 |
|----------------|-------------------|----------|

Seconded by Legislator: _____

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

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

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

Clerk of the Board of Legislators

2021 COMMUNITY SERVICES OFFICE EXPENSE/REVENUE REPORT

11/5/2021

| <u>PROGRAM</u> | <u>JAN</u> | <u>FEB</u> | <u>MAR</u> | <u>APR</u> | <u>MAY</u> | <u>JUNE</u> | <u>JULY</u> | <u>AUG</u> | <u>SEPT</u> | <u>OCT</u> | <u>NOV</u> | <u>DEC</u> | <u>TOTALS Y-T-D</u> | <u>TOTAL BUDGET</u> | <u>BALANCE AVAILABLE</u> | <u>% USED</u> |
|-----------------------|--------------------|------------------|--------------------|--------------------|------------------|--------------------|------------------|------------------|--------------------|--------------------|------------|------------|-------------------------|-------------------------|------------------------------|---------------|
| EARLY INTERV. | | | | | | | | | | | | | | | | |
| EXPENSES | \$0 | \$9,485 | \$13,279 | \$15,750 | \$20,106 | \$24,653 | \$22,336 | \$8,168 | \$7,904 | \$35,066 | \$0 | \$0 | \$156,747 | \$420,000 | \$263,253 | 37.32% |
| REVENUES | \$0 | \$84 | \$938 | \$1,274 | \$1,050 | \$1,316 | \$1,666 | \$1,470 | \$798 | \$1,162 | \$0 | \$0 | \$9,758 | \$216,102 | \$206,344 | 4.52% |
| PRESCHOOL | | | | | | | | | | | | | | | | |
| EXPENSES | \$0 | \$7,378 | \$372,560 | \$736,224 | \$67,893 | \$451,041 | \$334,797 | \$323,549 | \$526,004 | \$92,020 | \$0 | \$0 | \$2,911,466 | \$4,520,000 | \$1,608,534 | 64.41% |
| REVENUES | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$381,571 | \$381,571 | \$0 | \$0 | \$0 | \$763,142 | \$2,569,400 | \$1,806,258 | 29.70% |
| OPWDD | | | | | | | | | | | | | | | | |
| EXPENSES (ADMIN) | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$13,866 | \$13,866 | 0.00% |
| REVENUES | \$0 | \$0 | \$459 | \$1,380 | \$0 | \$0 | \$1,380 | \$0 | \$0 | \$1,380 | \$0 | \$0 | \$4,599 | \$6,933 | \$2,334 | 66.33% |
| OASAS | | | | | | | | | | | | | | | | |
| EXPENSES | \$119,907 | \$89,286 | \$70,786 | \$335,834 | \$81,308 | \$469,204 | \$319,112 | \$285,846 | \$289,429 | \$1,831,657 | \$0 | \$0 | \$3,892,369 | \$3,331,703 | (\$560,666) | 116.83% |
| REVENUES | \$677,438 | \$0 | \$897,158 | \$0 | \$0 | \$805,013 | \$0 | \$0 | \$0 | \$793,203 | \$0 | \$0 | \$3,172,812 | \$3,144,007 | (\$28,805) | 100.92% |
| OMH | | | | | | | | | | | | | | | | |
| EXPENSES | \$49,792 | \$78,033 | \$347,115 | \$227,889 | \$304,769 | \$264,119 | \$252,214 | \$227,268 | \$441,915 | \$109,966 | \$0 | \$0 | \$2,303,080 | \$3,621,787 | \$1,318,707 | 63.59% |
| REVENUES | \$690,160 | \$0 | \$1,158,542 | \$12,361 | \$0 | \$854,617 | \$0 | \$186 | \$834,476 | \$0 | \$0 | \$0 | \$3,550,342 | \$3,342,157 | (\$208,185) | 106.23% |
| TOTAL EXPENSES | \$169,699 | \$184,182 | \$803,740 | \$1,315,697 | \$474,076 | \$1,209,017 | \$928,459 | \$844,831 | \$1,265,252 | \$2,068,709 | \$0 | \$0 | \$9,263,662 | \$11,907,356 | \$2,643,694 | 77.80% |
| TOTAL REVENUES | \$1,367,598 | \$84 | \$2,057,097 | \$15,015 | \$1,050 | \$1,660,946 | \$3,046 | \$383,227 | \$1,216,845 | \$795,745 | \$0 | \$0 | \$7,500,653 | \$9,278,599 | \$1,777,946 | 80.84% |

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

OMH= OFFICE OF MENTAL HEALTH

Jefferson County Public Health Service Home Health Care Statistical Performance*
For the Ten Months Ended October 31, 2021

| REFERRALS | | | | MTD | YTD | 2021 | Amount of | Percent |
|--------------------------|--------|--------|--------|--------|---------|------------|-----------|----------|
| | 2018 | 2019 | 2020 | Actual | Actual | Annualized | Change | Change |
| CHHA | 1,972 | 1,778 | 1,439 | 107 | 1,129 | 1,355 | -84 | -5.85% |
| PREVENT | 1 | 3 | 2 | 0 | 0 | 0 | -2 | -100.00% |
| Rabies | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0.00% |
| Communicable Disease | 4,785 | 5,581 | 89,148 | 23,939 | 174,022 | 208,826 | 119,678 | 134.25% |
| Newborn Screening | 5 | 9 | 11 | 0 | 9 | 11 | 0 | -1.82% |
| PREVENT Sub-Total | 4,791 | 5,593 | 89,161 | 23,939 | 174,031 | 208,837 | 119,676 | 134.22% |
| GRAND TOTAL | 6,763 | 7,371 | 90,600 | 24,046 | 175,160 | 210,192 | 119,592 | 132.00% |
| AVERAGE DAILY CENSUS | | | | MTD | YTD | 2021 | Amount of | Percent |
| | 2018 | 2019 | 2020 | Actual | Actual | Annualized | Change | Change |
| CHHA | 206 | 164 | 138 | 129 | 129 | 129 | -9 | -5.49% |
| PREVENT | 1 | 2 | 1 | 1 | 1 | 1 | 0 | 0.00% |
| Rabies | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0.00% |
| PREVENT Sub-TOTAL | 1 | 2 | 1 | 1 | 1 | 1 | 0 | 0.00% |
| GRAND TOTAL | 207 | 166 | 139 | 130 | 130 | 130 | -9 | -6.47% |
| VISITS | | | | MTD | YTD | 2021 | Amount of | Percent |
| | 2018 | 2019 | 2020 | Actual | Actual | Annualized | Change | Change |
| CHHA | | | | | | | | |
| Skilled Nursing | 12,850 | 9,747 | 8,165 | 674 | 6,615 | 7,938 | -227 | -2.78% |
| Physical Therapy | 3,579 | 4,450 | 4,338 | 351 | 3,798 | 4,558 | 220 | 5.06% |
| Speech Therapy | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0.00% |
| Medical Social Worker | 696 | 713 | 591 | 52 | 447 | 536 | -55 | -9.24% |
| Occupational Therapy | 805 | 686 | 858 | 95 | 771 | 925 | 67 | 7.83% |
| Nutrition | 131 | 152 | 214 | 10 | 95 | 114 | -100 | -46.73% |
| Home Health Aide | 5,035 | 4,400 | 2,095 | 66 | 1,252 | 1,502 | -593 | -28.29% |
| Personal Care Aide | 42 | 0 | 0 | 0 | 0 | 0 | 0 | 0.00% |
| Sub-TOTAL | 23,138 | 20,148 | 16,261 | 1,248 | 12,978 | 15,574 | -687 | -4.23% |
| PREVENT | | | | | | | | |
| Skilled Nursing | 26 | 47 | 3 | 2 | 17 | 20 | 17 | 580.00% |
| Physical Therapy | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0.00% |
| Speech Therapy | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0.00% |
| Medical Social Worker | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0.00% |
| Occupational Therapy | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0.00% |
| Nutrition | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0.00% |
| Home Health Aide | 1 | 0 | 1 | 0 | 0 | 0 | -1 | -100.00% |
| Personal Care Aide | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0.00% |
| Sub-TOTAL | 27 | 47 | 4 | 2 | 17 | 20 | 16 | 410.00% |
| TOTAL VISITS | | | | | | | | |
| Skilled Nursing | 12,876 | 9,794 | 8,168 | 676 | 6,632 | 7,958 | -210 | -2.57% |
| Physical Therapy | 3,579 | 4,450 | 4,338 | 351 | 3,798 | 4,558 | 220 | 5.06% |
| Speech Therapy | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0.00% |
| Medical Social Worker | 696 | 713 | 591 | 52 | 447 | 536 | -55 | -9.24% |
| Occupational Therapy | 805 | 686 | 858 | 95 | 771 | 925 | 67 | 7.83% |
| Nutrition | 131 | 152 | 214 | 10 | 95 | 114 | -100 | -46.73% |
| Home Health Aide | 5,036 | 4,400 | 2,096 | 66 | 1,252 | 1,502 | -594 | -28.32% |
| Personal Care Aide | 42 | 0 | 0 | 0 | 0 | 0 | 0 | 0.00% |
| GRAND TOTAL | 23,165 | 20,195 | 16,265 | 1,250 | 12,995 | 15,594 | -671 | -4.13% |
| PARAPROFESSIONAL HOURS** | | | | MTD | YTD | 2021 | Amount of | Percent |
| | 2018 | 2019 | 2020 | Actual | Actual | Annualized | Change | Change |
| AGENCY CHHA | | | | | | | | |
| Home Health Aide | 3,190 | 2,857 | 2,136 | 66 | 1,277 | 1,532 | -604 | -28.26% |
| Personal Care Aide | 12 | 0 | 0 | 0 | 0 | 0 | 0 | 0.00% |
| CHHA Sub-TOTAL | 3,202 | 2,857 | 2,136 | 66 | 1,277 | 1,532 | -604 | -28.26% |
| CONTRACT CHHA | | | | | | | | |
| Home Health Aide | | | | | | | | |
| Caregivers | 3,319 | 2,446 | 80 | 0 | 0 | 0 | -80 | -100.00% |
| US CARE SYSTEMS | 640 | 520 | 44 | 0 | 0 | 0 | -44 | -100.00% |
| Family Home Care | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0.00% |
| Home Care Plus (Sibley) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0.00% |
| Sub-TOTAL | 3,959 | 2,966 | 124 | 0 | 0 | 0 | -124 | -100.00% |
| Personal Care Aide | | | | | | | | |
| Caregivers | 33 | 0 | 0 | 0 | 0 | 0 | 0 | 0.00% |
| US CARE SYSTEMS | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0.00% |
| Sub-TOTAL | 33 | 0 | 0 | 0 | 0 | 0 | 0 | 0.00% |
| TOTAL CONTRACT | 3,992 | 2,966 | 124 | 0 | 0 | 0 | -124 | -100.00% |
| TOTAL HOURS | | | | | | | | |
| Home Health Aide | 7,149 | 5,823 | 2,260 | 66 | 1,277 | 1,532 | -728 | -32.19% |
| Personal Care Aide | 45 | 0 | 0 | 0 | 0 | 0 | 0 | 0.00% |
| GRAND TOTAL | 7,194 | 5,823 | 2,260 | 66 | 1,277 | 1,532 | -728 | -32.19% |

**Numbers may not total precisely due to rounding.

*Beginning with the 2018 Final Report, the Long Term Home Health Care Program which stopped in 2016, is removed. Patients with long-term needs are currently served through Managed Long Term Care (MLTC) programs that contract with the CHHA for care delivery.