

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

Dylan Soper
Deputy County Administrator



February 14, 2025

TO: Members of Health & Human Services Committee

FROM: Dylan Soper, Deputy County Administrator

DMS

SUBJECT: Health & Human Services Committee Agenda

Please let this correspondence serve as notification that the Health & Human Services Committee will meet on ***Tuesday, February 18, 2025 at 6:00 p.m.*** in the Board of Legislators' Chambers.

Following is a list of agenda items for the meeting:

Presentation:

Public Health Accreditation Presentation – Steve Jennings, Public Health Service Director

Resolutions:

1. Amending the 2025 County Budget to Reappropriate Alzheimer's Disease and Related Disorders Association Inc. Grant
2. Appointing Members to the Community Services Board
3. Amending the 2024 County Budget Relative to Community Services Preschool Program
4. Amending the 2025 County Budget to Allocate Additional State Aid for Community Services Mental Health Programs
5. Amending the 2025 County Budget to Reappropriate Bi-County Mobile Crisis Program Funding
6. Authorizing an Agreement Related to Climate and Health Funding and Amending the 2025 County Budget in Relation Thereto
7. Authorizing an Agreement with Homecare Homebase, LLC Relative to Home Health Care Clinical Financial Software

8. Accepting Donation on Behalf of the Jefferson County Public Health Service and Amending the 2025 County Budget
9. Authorizing an Agreement for Provision of Speech Therapy Services to the Public Health Service
10. Authorizing an Agreement Relative to Public Health Service Participation in the New York State Department of Health Statewide Health Information Network for New York Statewide Common Participation Agreement
11. Amending the 2025 County Budget to Reappropriate Funding From the Office of Temporary and Disability Assistance for New York State Code Blue

Informational Items:

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

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

DMS:jdj

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

JEFFERSON COUNTY BOARD OF LEGISLATORS
Resolution No. _____

Amending the 2025 County Budget to Reappropriate Alzheimer’s Disease and
 Related Disorders Association Inc. Grant

By Legislator: _____

Whereas, By Resolution No. 259 of 2024 Jefferson County accepted a grant and authorized an agreement with the Alzheimer’s Disease and Related Disorders Association Inc in the amount of \$200,000 to establish or expand Respite Social Adult Day Programs in the community during the period of August 1, 2024 to July 30, 2025, and

Whereas, By Resolution No. 326 of 2024 Jefferson County established a Specialist, Services for the Aging Position for the program and amended the 2024 County Budget in relation to Alzheimer’s Disease and Related Disorders Association Inc. Grant, and

Whereas, Unspent grant funds require reappropriation to continue the program into 2025 as planned.

Now Therefore, Be It Resolved, That the 2025 County Budget is hereby amended as follows:

Increase:

Fund Balance		
30000000 30599	Appropriated Fund Balance	\$113,994.16
Expenditure		
01677200 01100	Personal Services	\$ 5,736.16
01677200 01110	Temporary	14,976.00
01677200 04111	Trackable Items	19,300.00
01677200 04313	Travel	9,903.00
01677200 04512	Food Supplies	15,600.00
01677200 04585	Operating Supplies	15,471.00
01677200 04605	Day Care/ Respite Care	22,900.00
01677200 08010	State Retirement	6,148.00
01677200 08030	Social Security	3,038.00
01677200 08040	Workers Compensation	922.00

Seconded by Legislator: _____

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

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

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

 Clerk of the Board of Legislators

JEFFERSON COUNTY BOARD OF LEGISLATORS
Resolution No. _____

Appointing Members to the Community Services Board

By Legislator: _____

Resolved, That pursuant to Section 41.11 of the Mental Hygiene Law the following individuals are hereby appointed as members of the Jefferson County Community Services Board and/or to the designated sub-committee thereof for terms to expire as indicated below:

<u>Member</u>	<u>Sub-Committee</u>	<u>Term to Expire</u>
Community Services Board and Sub Committee		
Michelle Graham	Mental Health	12/31/2028
Amy Quonce	Mental Health	12/31/2028
Melissa Rookman	PW/DD	12/31/2028
Sub Committee Only		
Michelle Monnat	Substance Use Disorder	12/31/2028
Christina O'Neil	Substance Use Disorder	12/31/2028

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 2024 County Budget Relative to Community Services Preschool Program

By Legislator: _____

Whereas, Milestones Children’s Center was approved by the New York State Education Department to provide Preschool Special Education Classroom services in time for classes to begin in September 2024, which resulted in additional expenses for transportation services, and

Whereas, The Department has initiated a new revenue source through Medicaid billing for services related to the Preschool Program to help offset the expediential increase in cost for this mandated service, and

Whereas, Additional funding is needed to cover McGuiness Medicaid remittance invoice fees related to billing through the end of 2024, and

Whereas, The Department has begun to realize Medicaid revenue and funds are available to offset expenses.

Now, Therefore, Be It Resolved, That the 2024 Budget is hereby amended as follows:

Increase:

Expenditure		
01296000 04402	Preschool Services – Transport – Handicap Child	\$36,772
01431200 04416	Professional Fees – External (Preschool)	10,564

Decrease:

Revenue		
01431000 94825	Fed Aid Preschool Medicaid	\$47,336

Seconded by Legislator: _____

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

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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 2025 County Budget to Allocate Additional State Aid
for Community Services Mental Health Programs

By Legislator: _____

Whereas, The New York State Office of Mental Health (NYS OMH) has approved an additional State Aid allocation for correctional facilities to help with the cost of a Comprehensive Substance Use Disorder Treatment to include Medication Assisted Treatment Program, and

Whereas, Funds will be passed through Community Services to the Sheriff's Department, and

Whereas, The 2025 County Budget needs to reflect these additional funds and current funding levels for other Mental Health Programs.

Now, Therefore, Be It Resolved, That the 2025 County Budget is amended as follows:

Increase:

Revenue

01311000 91292	Sheriff Interdept. Services Reimbursement	\$ 165,443
01431000 93484	State Aid - Alcohol & Substance Abuse	165,443
01431000 93489	State Aid - OMH - Children's Home	20,436
01431000 93490	State Aid - Mental Health	113,359

Expenditure:

01315000 04413	Jeff Co Corrections – Medical Fees	\$ 165,443
01431000 04732	Children's Home - Jeff. Co.	20,436
01432000 04414	Supporting Services – Internal	165,443
01432000 04707	CMHC Outpatient	1,213
01432000 04708	NRCIL FSS RIV	10,107
01432000 04711	Carthage Area Hospital	1,648
01432000 04718	JRC Employment	7,577
01432000 04721	Mental Health Assn	6,132
01432000 04728	Samaritan Medical Center	2,532
01432000 04732	Children's Home - Jeff Co	93,077
01432000 04735	Veterans Peer Support	53,564

Decrease:

01432000 04712	Contracted Mental Health Prog	\$ 62,491
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Seconded by Legislator: _____

JEFFERSON COUNTY BOARD OF LEGISLATORS

Resolution No. _____

Amending the 2025 County Budget to Reappropriate Bi-County Mobile Crisis Program Funding

By Legislator: _____

Whereas, By Resolution No. 173 of 2024 Jefferson County accepted funding from the New York State Office of Mental Health for the development and start up costs of a Bi-County Mobile Crisis Program for Jefferson and Lewis Counties, and designated Jefferson County as the lead agency, and

Whereas, In addition, Resolution No. 173 authorized an MOU between Jefferson County and Lewis County, as well as an Agreement with the Fort Drum Regional Health Planning Organization for the development and start up costs of the program for the term of two years, and

Whereas, Funding needs to be reappropriated to cover the period of January 1, 2025 through December 31, 2025.

Now, Therefore, Be It Resolved, That the 2025 County Budget in hereby amended as follows:

Increase:

Fund Balance		
01000000 30599	Appropriated Fund Balance	\$300,000
Expense		
01431000 04416	Professional Fees	\$300,000

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. _____

Authorizing an Agreement Related to Climate and Health Funding and Amending the 2025 County Budget in Relation Thereto

By Legislator: _____

Whereas, The New York Association of County Health Officials (NYSACHO) is providing funding to Jefferson County Public Health Service (JCPHS) to support climate and health adaptation initiatives within Jefferson County, and

Whereas, Public Health will develop and provide presentations in collaboration with New York State Department of Health and NYSACHO, about Emergency Preparedness in relation to climate, and

Whereas, Each attendee will be provided with a preparedness kit and promote the Emergency Management Office (EMO)/JCPHS Emergency Preparedness app, and

Whereas, NYSACHO will provide funding in the amount of \$4,340.19 via a one-time payment in 2025.

Now, Therefore, Be It Resolved, That Jefferson County hereby accepts said funding and authorizes the Chairman of the Board of Legislators to execute any and all documents with NYSACHO for provision of this funding, subject to approval by the County Attorney as to form and content, and be it further

Resolved, That the 2025 County Budget is hereby amended as follows:

Increase:

Revenue

0145100 93452 State aid PH – Other Grants \$4,340.19

Expenditures

01405100 04415 Advertising \$ 325.00

01405100 04585 Operating Supplies 3,903.19

01405100 04117 Printing 112.00

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 an Agreement with Homecare Homebase, LLC
Relative to Home Health Care Clinical Financial Software

By Legislator: _____

Whereas, With the adoption of the 2025 County Budget, the Board of Legislators approved funds for a Public Health Software System to replace and update the department’s Certified Home Health Agency clinical and financial software program and equipment, and

Whereas, Said purchase of new software will provide real time cloud-based hosting, referral/medication data integration, analytics for data driven decisions, provider link for timely electronic order processing at the point of care through claim processing, Electronic Visit Verification (EVV) for Medicaid patients, and interfaces with community partners, and

Whereas, After extensive review of various software packages, the Director of Public Health recommends the purchase of Homecare Homebase software, and

Whereas, Said software is a special professional product and is 100% allowable within home health cost reports and reimbursement fees promulgated, and

Whereas, Homecare Homebase will provide project implementation services, including software installation and training of County Public Health staff in the use of said software, and

Whereas, The cost of the software services totals approximately \$84,000 per year for the initial five-year term, then reduced to \$73,000 per year thereafter, and

Whereas, The clinician tablet upgrade is expected to total \$18,000, and

Whereas, These costs are already appropriated in the 2025 County budget.

Now, Therefore, Be It Resolved, That Jefferson County enter into an agreement with Homecare Homebase, LLC, for the terms and purposes stated above, and be it further

Resolved, That the Chairman of the Board of Legislators is hereby authorized to execute said agreement on behalf of the County, subject to the review 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 Donation on Behalf of the Jefferson County Public Health Service
and Amending the 2025 County Budget

By Legislator: _____

Whereas, The Smith family of Jefferson County has donated funds to the Jefferson County
Public Health Service, and

Whereas, The 2025 County Budget must be amended to recognize this donation.

Now, Therefore, Be It Resolved, That Pursuant to County Law Section 215 (3), this Board of
Legislators gratefully accepts said donation and be it further

Resolved, That the 2025 County Budget is amended as follows:

Increase:

Revenue:		
01405000 92705	Gifts/Donations	\$500

Expenditure:		
01405000 04585	Operating Supplies	\$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. _____

Authorizing an Agreement for Provision of Speech Therapy Services
to the Public Health Service

By Legislator: _____

Whereas, Speech Therapy represents an important and required service within the Certified Home Health Agency, and

Whereas, After evaluating the level of care and needs, the demand for the provision of speech therapy is projected to continue, and

Whereas, Wellspeak Therapy has expressed interest in providing service to residents of Jefferson County for the period of January 15, 2025, through December 31, 2027, at the rate of \$100/hour.

Now, Therefore, Be It Resolved, That Jefferson County authorizes and directs the Chairman of the Board of Legislators to execute any and all documents with Wellspeak Therapy for provision of these services, 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. _____

Authorizing an Agreement Relative to Public Health Service Participation in the
New York State Department of Health, Statewide Health Information Network for New York
Statewide Common Participation Agreement

By Legislator: _____

Whereas, Since 2012, the Jefferson County Public Health Service has participated with HealthConnections of Syracuse, Central New York's Regional Health Information Organization (RHIO), also known as a Qualified Entity (QE), one of 6 QEs throughout New York State, and

Whereas, The New York State Department of Health (NYSDOH) has established a Statewide Common Participation Agreement (SCPA) to unify the 6 QEs and enhance the functions and capabilities of the Statewide Health Information Network for New York (SHIN-NY), and

Whereas, The SHIN-NY is the technical infrastructure, supportive policies, and set of agreements between the NYSDOH, the QEs, and SHIN-NY participants that make possible the secure electronic exchange of health information in New York State for authorized purposes, including between and among, directly and indirectly, health care providers, health plans, and other organizations, each of whom are a SHIN-NY participant, and

Whereas, enhanced functions and capabilities of SHIN-NY shall include new statewide data infrastructure to improve interoperability; establishing a single, statewide common participation agreement governing data exchange statewide; enabling health care facilities required to connect to the SHIN-NY to do so directly, rather than through their QE as is currently the case; establishing a single data matching process for patient demographic information submitted by SHIN-NY participants; establishing a statewide provider directory to serve as a standardized resource for resolving provider and facility identities; establishing a single, statewide patient consent management system, with network-wide policies that must be honored and implemented by all QEs; and establishing a secure, statewide repository to store all data from SHIN-NY participants, and

Whereas, The NYSDOH and QEs have worked collaboratively to develop these health information technology enhancements, which will support the provision of better, more cost-effective health care through the use of SHIN-NY in accordance with the regulations set forth in Part 300 of Title 10 of New York Codes, Rules and Regulations.

Now, Therefore, Be It Resolved, That the Jefferson County Board of Legislators authorizes and directs the Chairman of the Board of Legislators to execute a Statewide Common Participation Agreement for said involvement with the NYSDOH SHIN-NY on behalf of the County, 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 2025 County Budget to Reappropriate Funding From the Office of Temporary and Disability Assistance for New York State Code Blue

By Legislator: _____

Whereas, By Resolution 342 of 2024, this Board of Legislators accepted funding from the New York State Office of Temporary and Disability Assistance in the amount of \$414,311 for district costs related to implementing emergency measures for the homeless during inclement winter weather (Code Blue), and

Whereas, There remain unspent funds for which the deadline for expenditures is June 30, 2025.

Now, Therefore, Be It Resolved, That the 2025 County Budget is hereby amended as follows:

Increase:

Revenue		
01000000 30599	Appropriated fund balance	\$308,039

Expenditure

01614000 04600	Safety Net Assistance	\$308,039
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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

2025 COMMUNITY SERVICES OFFICE EXPENSE/REVENUE REPORT

2/6/2025

<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												\$0	\$466,221	\$466,221	0.00%
REVENUES	\$57												\$57	\$240,215	\$240,158	0.02%
PRESCHOOL																
EXPENSES	\$0												\$0	\$7,228,158	\$7,228,158	0.00%
REVENUES	\$177,328												\$177,328	\$4,475,754	\$4,298,426	3.96%
OPWDD																
EXPENSES(ADMIN)	\$0												\$0	\$15,628	\$15,628	0.00%
REVENUES	\$1,758												\$1,758	\$7,814	\$6,056	22.50%
OASAS																
EXPENSES	\$944,700												\$944,700	\$3,872,791	\$2,928,091	24.39%
REVENUES	\$970,550												\$970,550	\$3,685,095	\$2,714,545	26.34%
OMH																
EXPENSES	\$0												\$0	\$4,477,594	\$4,477,594	0.00%
REVENUES	\$1,058,491												\$1,058,491	\$4,240,464	\$3,181,973	24.96%
TOTAL EXPENSES	\$944,700	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$944,700	\$16,060,392	\$15,115,692	5.88%
TOTAL REVENUES	\$2,208,183	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$2,208,183	\$12,649,342	\$10,441,159	17.46%

OPWDD= OFFICE FOR PEOPLE WITH DEVELOPMENTAL DISABILITIES
OASAS= OFFICE OF ADDICTION SERVICES AND SUPPORTS
OMH= OFFICE OF MENTAL HEALTH

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

CERTIFIED HOME HEALTH AGENCY

REFERRALS				MTD	YTD	2025	Amount of	Percent
2022	2023	2024	Actual	Actual	Annualized	Change	Change	
CHHA	1,126	1,092	1,454	121	121	1,452	360	32.97%
AVERAGE DAILY CENSUS				MTD	YTD	2025	Amount of	Percent
CHHA	98	93	97	110	110	1,320	1,227	1252.04%
VISITS				MTD	YTD	2025	Amount of	Percent
CHHA	2022	2023	2024	Actual	Actual	Annualized	Change	Change
Skilled Nursing	6,128	5,393	5,643	520	520	6,240	847	15.71%
Physical Therapy	3,943	3,718	3,322	279	279	3,348	-370	-9.95%
Speech Therapy	0	0	0	0	0	0	0	0.00%
Medical Social Worker	466	528	454	48	48	576	48	9.09%
Occupational Therapy	830	846	722	71	71	852	6	0.71%
Nutrition	117	107	80	5	5	60	-47	-43.93%
Home Health Aide	745	963	873	36	36	432	-531	-55.14%
Sub-TOTAL	12,229	11,555	11,094	959	959	11,508	-47	-0.41%
PREVENT								
Skilled Nursing	3	2	9	0	0	0	-2	-100.00%
TOTAL VISITS								
Skilled Nursing	6,131	5,395	5,652	520	520	6,240	845	15.66%
Physical Therapy	3,943	3,718	3,322	279	279	3,348	-370	-9.95%
Speech Therapy	0	0	0	0	0	0	0	0.00%
Medical Social Worker	466	528	454	48	48	576	48	9.09%
Occupational Therapy	830	846	722	71	71	852	6	0.71%
Nutrition	117	107	80	5	5	60	-47	-43.93%
Home Health Aide	745	963	873	36	36	432	-531	-55.14%
GRAND TOTAL	12,232	11,557	11,103	959	959	11,508	-49	-83.55%
PARAPROFESSIONAL HOURS				MTD	YTD	2025	Amount of	Percent
CHHA	2022	2023	2024	Actual	Actual	Annualized	Change	Change
Home Health Aide	753	996	877	36	36	432	-564	-56.63%

MOBILE INTEGRATED HEALTH - COMMUNITY PARAMEDICINE

INDICATORS				MTD	YTD	2025	Amount of	Percent
2022	2023	2024	Actual	Actual	Annualized	Change	Change	
Cases	8	74	72		39	468	394	532.43%
Average Daily Census (MIH Cases not on CHHA)	0.1	15	29	33	27	27	12	80.00%
Visits	48	1,013	1,266	84	127	1,524	511	50.44%

PREVENTIVE SERVICES

CASES				MTD	YTD	2025	Amount of	Percent
2022	2023	2024	Actual	Actual	Annualized	Change	Change	
PREVENT	2022	2023	2024	Actual	Actual	Annualized	Change	Change
Communicable Disease	20,919	7,058	7,228	1,590	1,590	19,080	12,022	170.33%
Immunizations	3,119	1,115	1,519	94	94	1,128	13	1.17%
PPDs	159	140	142	10	10	120	-20	-14.29%
Childhood Lead Poison Prevention Program+ *								
Screens	2,624	2,999	2,805			0	-2,999	-100.00%
Tests with blood lead levels 5+	125	248	242			0	-248	-100.00%
Newborn Screening	27	2	27	1	1	12	10	500.00%
PREVENT TOTAL	26,973	11,562	11,963	1,695	1,695	20,340	8,778	75.92%

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

MEDICAL EXAMINER

INDICATORS				MTD	YTD	2025	Amount of	Percent
2022	2023	2024	Actual	Actual	Annualized	Change	Change	
Cases	200	198	178	14	14	168	-30	-15.15%
Scene Investigations	29	15	16	3	3	36	21	140.00%
Autopsies	102	115	94	9	9	108	-7	-6.09%
Overdose Poisonings	25	29	20		0	0	-29	-100.00%
Pending Toxicology Confirmation	0	0	1	5				

SAJ:JCPHS MONTHLY STATISTICS GRID JAN25exc.2:06:25. MS E/