

AGENDA

HUMAN SERVICES COMMITTEE

Monday, January 6th 8:30 a.m.

Members:
Verno, Leonard, Robusto, Jacobs, Johnson

8:30 a.m. [Approve minutes from previous meeting](#)

8:30 a.m. [Veterans Services, Jason Eldridge](#)

Monthly Report [VET Nov 2019 Numbers.pdf](#)

8:40 a.m. [Aging and Youth Department, Penny Shockley](#)

TRANSMITTALS:

- Authorization to sign contract with Wayne County ARC [AY01 RES 05 HDM 2019 contract resolution.docx](#)
- Authorization to renew agreement with Land Master rental [AY 01 RES 01 Sodus Congregate Lease Renewal.docx](#)
- Authorization to sign contract renewal with Genesee Region Home Care [AY 01 RES 02 2019 LTC Contract Renewal.doc](#)
- Authorization to sign contract with seniors at Home LLC [AY 01 RES 03 2019 Home Instead Contract.docx](#)
- Authorization to sign renewal contract with Wayne County ARC—Key Industries [AY 01 RES 04 Contract Renewal 2019 Bulk Food.doc](#)

DISCUSSION:

- Flag Ship Program [Copy of flagship prog 2019.xlsx](#) [Copy of Services by Town.xlsx](#)

9:00 a.m. [Department of Social Services, Dr. Ellen Wayne](#)

TRANSMITTALS:

- Authorization to sign contract with Catholic Family Center [DSS01RES01 AUTHORIZE CONTRACT WITH CATHOLIC FAMILY CENTER FOR DRUG ALCOHOL ASSESSMENTS.doc](#)
- Authorization to sign contract with Child Care Council [DSS01RES02 AUTHORIZE CONTRACT WITH CHILD CARE COUNCIL.doc](#)
- Authorization to sign contract with FLACRA [DSS01RES03 AUTHORIZE CONTRACT WITH FLACRA FOR DRUG ALCOHOL ASSESSMENTS.doc](#)

Monthly Reports

[FIN RPT NOV 2019.docx](#)

[CASELOAD REPORT - NOVEMBER.doc](#)

[MA Caseload Comparison Graph Nov 18 - Nov 19.docx](#)

[SNAP Caseload Comparison Graph Nov 18 - Nov 19.docx](#)

[TA Caseload Comparison Graph Nov 18 - Nov 19.docx](#)



Wayne County Veterans Service Agency

7376 Route 31, Suite 1300, Lyons, NY 14489 • (315) 946-5993



MONTHLY REPORT

NOVEMBER 1, 2019 - NOVEMBER 30, 2019

VETERAN STATUS		TYPE		MODE	
WWI		VETERAN	188	PERSONAL	97
WWII	13	DEPENDENT/WIDOW	43	PHONE/MAIL	170
KOREA	32	OTHER	36		
VIETNAM	149				
PERSIAN GULF	49				
PEACETIME/OTHER	24				
TOTAL	<u>267</u>	TOTAL	<u>267</u>	TOTAL	<u>267</u>

COUNSELING SERVICES (Pension, Compensation, Educ/Voc Rehab, Burial, Insurance, Legal, Loans, Tax Exemption, Medical, Employment, etc.)
267

VETERANS TRANSPORTED TO:

WATS CANANDAIGUA VAMC 56
SYRACUSE VAMC 24
MILES TRAVELED TO SYRACUSE VAMC 1301

BURIALS 16

INDIGENT BURIALS
COUNTY COST
STATE REIMBURSEMENT
VA FEDERAL REIMBURSEMENT

Submitted By  Date: January 6, 2020
Jason Eldridge
Director

RESOLUTION TRANSMITTAL

Committee No. 7

Date: January 6, 2020

Committee Chair: Anthony Verno
Department Head: Penny Shockley

Authorization to Execute 2020 Contract with Wayne County Chapter, NYSARC

WHEREAS, the Federal Older Americans Act and NY State Office for the Aging allocates Title III C-2 and Wellness in Nutrition (WIN) funding to provide home delivered meals to homebound elderly individuals who are nutritionally at risk, and

WHEREAS, The Department of Aging and Youth, through an RFP process, will contract with The ARC Wayne to provide these services and requests authorization to execute the initial contract effective January 1 through December 31, 2020, utilizing allocated state and federal funding at a rate of \$5.09 per meal for a total amount not to exceed \$243,830; now therefore be it

RESOLVED, that the Chairman of the Board of Supervisors is hereby authorized and directed to execute a contract on behalf of the County of Wayne, subject to the County Attorney's approval as to form and content, with Wayne County Chapter, NYSARC in the amount of \$243,830 for the period of January 1, 2019 through December 31, 2020.

Budgeted: yes no Proposed Cost: \$243,830 Reimbursed Amount \$235,965 County cost \$7,865

Departmental transfer \$ _____ from Account No. _____ to Account No. _____

County Administrator's Review: _____ Date: _____

Human Resources Office Review: yes ___ no ___ N/A ___ Signature: _____

County Attorney Review: yes ___ no ___ N/A ___ Signature: _____

Standing Committee: Ayes _____ Nays _____ Date: _____ Signature: _____

Signature/Date Rec'd: _____ Clerk, Board of Supervisors

Referred to:

Committee: _____ Ayes _____ Nays _____ Date: _____ Signature: _____

Committee: _____ Ayes _____ Nays _____ Date: _____ Signature: _____

RESOLUTION TRANSMITTAL

Committee No. 7

Date: January 6, 2020

Committee Chair:

Anthony Verno

Department Head:

Penny Shockley

Authorization to Renew the Land Master Rental Agreement for the Sodus Congregate Meal Site

WHEREAS, The Department of Aging and Youth rents property from Land Master Inc. in the amount of \$600.00 per month plus utilities to house the Sodus congregate meal site; therefore, be it

RESOLVED, that the Chairman of the Board of Supervisors is hereby authorized and directed to renew a rental agreement with Land Master Inc., in the amount of \$600 per month, on behalf of Wayne County for the period of January 1, 2020 through December 31, 2020, for a total cost of \$7,200, subject to the County Attorney's approval as to form and content.

Budgeted: yes no Proposed Cost: \$7,200 Reimbursed Amount \$6480 County cost \$720

Departmental transfer \$ _____ from Account No. _____ to Account No. _____

County Administrator's Review: _____ Date: _____

Human Resources Office Review: yes no N/A Signature: _____

County Attorney Review: yes no N/A Signature: _____

Standing Committee: Ayes _____ Nays _____ Date: _____ Signature: _____

Signature/Date Rec'd: _____ Clerk, Board of Supervisors

Referred to:

Committee: _____ Ayes _____ Nays _____ Date: _____ Signature: _____

Committee: _____ Ayes _____ Nays _____ Date: _____ Signature: _____

RESOLUTION TRANSMITTAL

Committee No. 7

Date: January 6, 2020 Committee Chair: Anthony Verno
Department Head: Penny Shockley

Authorization for 2020 Contract Renewal with Genesee Region Home Care of Ontario County, Inc.

WHEREAS, The Department of Aging and Youth contracts with Genesee Region Home Care of Ontario County, Inc. for the provision of non-medical, in-home services and non-institutional respite services for clients assessed eligible by the department, therefore be it

RESOLVED, that the Chairman of the Board of Supervisors is hereby authorized and directed to execute a contract on behalf of the County of Wayne, subject to the County Attorney's approval as to form and content, with Genesee Region Home Care of Ontario County, Inc., for the period of January 1, 2020 through December 31, 2020, for non-medical, in-home services and non-institutional respite services, and further be it

RESOLVED, that the terms and conditions of this contract remain the same as in 2019.

Budgeted: yes no Proposed Cost: \$130,454 Reimbursed Amount \$99,015. County cost \$31,439

Departmental transfer \$ _____ from Account No. _____ to Account No. _____

County Administrator's Review: _____ Date: _____

Human Resources Office Review: yes ___ no ___ N/A ___ Signature: _____

County Attorney Review: yes ___ no ___ N/A ___ Signature: _____

Standing Committee: Ayes _____ Nays _____ Date: _____ Signature: _____

Signature/Date Rec'd: _____ Clerk, Board of Supervisors

Referred to:

Committee: _____ Ayes _____ Nays _____ Date: _____ Signature: _____

Committee: _____ Ayes _____ Nays _____ Date: _____ Signature: _____

RESOLUTION TRANSMITTAL

Committee No. 7

Date: January 6, 2020

Committee Chair: Anthony Verno

Department Head: Penny Shockley

Authorization to Execute 2020 Contract with seniors at Home LLC for Provision of Homemaker/Chore Services

WHEREAS, the Wayne County Department of Aging and Youth receives funding from the NY State Office of Aging for the provision of homemaker/chore services for frail and elderly residents in Wayne County to assist them to remain in their homes, and

WHEREAS, The Department of Aging and Youth, through an RFP process, will contract with Seniors at Home LLC to provide these services and requests authorization to execute a contract effective January 1 through December 31, 2020, utilizing allocated state and federal funding at a rate of \$25.00 per hour for a total amount not to exceed \$55,000; now therefore be it

RESOLVED, that the Chairman of the Wayne County Board of Supervisors is hereby authorized and directed to execute a contract on behalf of the County of Wayne, subject to the County Attorney's approval as to form and content, with Seniors at Home LLC in accordance with the bid acceptance for the provision of homemaker/chore services for the Wayne County Department of Aging and Youth in the amount of \$25.00 per hour for a total not to exceed \$55,000 for the period of January 1, 2020 through December 31, 2020.

Budgeted: yes X no__ Proposed Cost: \$55,000 Reimbursed Amount \$42,394 County cost \$12,606

Departmental transfer \$_____ from Account No. _____ to Account No. _____

County Administrator's Review: _____ Date: _____

Human Resources Office Review: yes ___ no ___ N/A ___ Signature: _____

County Attorney Review: yes ___ no ___ N/A ___ Signature: _____

Standing Committee: Ayes _____ Nays _____ Date: _____ Signature: _____

Signature/Date Rec'd: _____ Clerk, Board of Supervisors

Referred to:

Committee: _____ Ayes _____ Nays _____ Date: _____ Signature: _____

Committee: _____ Ayes _____ Nays _____ Date: _____ Signature: _____

RESOLUTION TRANSMITTAL

Committee No. 7

Date: January 6, 2020

Committee Chair:

Anthony Verno

Department Head:

Penny Shockley

Authorization to Renew 2020 Contract with Wayne County Chapter, NYSARC

WHEREAS, The Department of Aging and Youth contracts with NYSARC (Key Industries) to provide bulk meal preparation for our five congregate Senior Centers, and

WHEREAS, this contract was awarded through competitive bidding for 2019, and

WHEREAS, the contract amount is reduced in 2020 due to decreased attendance, but the remaining terms and conditions of this contract remain the same as in 2019, now therefore be it

RESOLVED, the Chairman of the Board of Supervisors is hereby authorized and directed to execute a contract on behalf of the County of Wayne, subject to the County Attorney's approval as to form and content, with The ARC Wayne (Key Industries), for the period of January 1, 2020 through December 31, 2020 for bulk meal catering, and further be it

RESOLVED, the meal rate will be \$4.26 per meal and the maximum contract amount will not exceed \$65,000.

Budgeted: **yes x** no__ Proposed Cost: **\$65,000** Reimbursed Amount **\$59,500** County cost **\$6,500**

Departmental transfer \$_____ from Account No. _____ to Account No. _____

County Administrator's Review: _____ Date: _____

Human Resources Office Review: yes ___ no ___ N/A ___ Signature: _____

County Attorney Review: yes ___ no ___ N/A ___ Signature: _____

Standing Committee: Ayes _____ Nays _____ Date: _____ Signature: _____

Signature/Date Rec'd: _____ Clerk, Board of Supervisors

Referred to:

Committee: _____ Ayes _____ Nays _____ Date: _____ Signature: _____

Committee: _____ Ayes _____ Nays _____ Date: _____ Signature: _____

Row Labels	Count of Client ID	Sum of # of Units	Sum of Cost
Wayne - Wayne County DAY - Case Management	132	1663.75	\$149,737.50
Wayne - Wayne County DAY - Consumer Directed IHS	1	38	\$638.40
Wayne - Wayne County DAY - Home Delivered Meals	134	15413.5	\$160,975.00
Wayne - Wayne County DAY - PERS	111	767	\$23,010.00
Wayne - Wayne County DAY - Personal Care	99	7408.84	\$185,221.00
Grand Total	477	25291.09	\$519,581.90

Total Clients Served in 2 or More of the "Flagship Programs" 1st 3 quarters of 2019	166.0
Annualized spending on client services	\$692,775.87
Average spent per client PER YEAR	\$4,173.35

Annual Cost of Nursing Home care	\$145,000.00
Annual savings per client	\$140,826.65
Annual savings for 155 clients served	\$21,828,130.97

Average time clients are on services 2-3 years depending on program	2.5
Total cost savings for 166 client based on average time served in community	\$54,570,327.42

Over the past 3 years the % of clients (with a listed closing reason) who were transitioned to a higher level of care or deceased	64.0%
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RESOLUTION TRANSMITTAL

Committee No. 7 Date: 1/6/20 Committee Chair: Anthony Verno

Department Head: Ellen T. Wayne, Ed.D.

AUTHORIZE CONTRACT WITH CATHOLIC FAMILY CENTER FOR DRUG/ALCOHOL ASSESSMENTS

WHEREAS, the Wayne County Department of Social Services (DSS) is required to contract for drug/alcohol assessment services for those applying for cash assistance, and

WHEREAS, Wayne DSS is required to provide a choice of assessment options, and

WHEREAS, Wayne DSS is reimbursed at a rate of \$40.00 per assessment by the New York State Office of Temporary and Disability Assistance, therefore be it

RESOLVED, that the Chairman of the Board of Supervisors is hereby authorized to execute an agreement with Catholic Charities of the Diocese of Rochester, d/b/a Catholic Family Center, subject to the County Attorney's approval as to form and content, for the provision of drug/alcohol assessment services during the period 1/1/20-12/31/22 at a fee of \$40.00 per assessment.

Budgeted: yes no Proposed Cost: 1,200 Reimbursed Amount: 180.00 County Cost: 1,020

Departmental transfer \$ _____ from Account No. _____ to Account No. _____

County Administrator's Review: _____ Date: _____

Human Resources Office Review: yes no N/A Signature: _____

County Attorney Review: yes no N/A Signature: _____

Standing Committee: Ayes _____ Nays _____ Date: _____ Signature: _____

Signature/Date Rec'd: _____ Clerk, Board of Supervisors

Referred to:
Committee: _____ Ayes _____ Nays _____ Date: _____ Signature: _____

Committee: _____ Ayes _____ Nays _____ Date: _____ Signature: _____

DSS01RES01 AUTHORIZE CONTRACT WITH CATHOLIC FAMILY CENTER FOR DRUG/ALCOHOL ASSESSMENTS

RESOLUTION TRANSMITTAL

Committee No. 7 Date: 1/6/20 Committee Chair: Anthony Verno
Department Head: Ellen T. Wayne, Ed.D.

AUTHORIZATION TO EXECUTE CONTRACT WITH CHILD CARE COUNCIL, INC. IN RELATION TO CHILD CARE DEVELOPMENT BLOCK GRANT PROJECT

WHEREAS, the NYS Office of Children and Family Services (OCFS) is authorized to register and inspect child day care programs or to contract for this service, and

WHEREAS, local departments of Social Services (LDSS) are qualified to fulfill the required responsibilities, and

WHEREAS, NYS OCFS provides Child Care and Development Block Grant (CCDBG) funds to Wayne County Department of Social Services to subcontract for these services; therefore be it

RESOLVED, that the Chairman of the Wayne County Board of Supervisors is hereby authorized to execute a subcontract on behalf of the County of Wayne, subject to the County Attorney's approval as to form and content, with the Child Care Council, Inc. for the provision of services required by the Contract between the Wayne County Department of Social Services and the New York State Office of Children and Family Services for the period 1/1/19 to 12/31/19 for a cost not to exceed \$120,149.

Budgeted: yes no Proposed Cost: \$120,149 Reimbursed Amount: \$123,662 County Cost: (\$3,513)

Departmental transfer \$ _____ from Account No. _____ to Account No. _____

County Administrator's Review: _____ Date: _____

Human Resources Office Review: yes no N/A Signature: _____

County Attorney Review: yes no N/A Signature: _____

Standing Committee: Ayes _____ Nays _____ Date: _____ Signature: _____

Signature/Date Rec'd: _____ Clerk, Board of Supervisors

Referred to:
Committee: _____ Ayes _____ Nays _____ Date: _____ Signature: _____

Committee: _____ Ayes _____ Nays _____ Date: _____ Signature: _____

DSS01RES02 AUTHORIZE CONTRACT WITH CHILD CARE COUNCIL

RESOLUTION TRANSMITTAL

Committee No. 7 Date: 1/6/20 Committee Chair: Anthony Verno
Department Head: Ellen T. Wayne, Ed.D.

AUTHORIZE CONTRACT WITH FINGER LAKES AREA COUNSELING & RECOVERY AGENCY, INC. (FLACRA) FOR DRUG/ALCOHOL ASSESSMENTS

WHEREAS, the Wayne County Department of Social Services (DSS) is required to contract for drug/alcohol assessment services for those applying for cash assistance, and

WHEREAS, Wayne DSS is required to provide a choice of assessment options, and

WHEREAS, Wayne DSS is reimbursed at a rate of \$40.00 per assessment by the New York State Office of Temporary and Disability Assistance, therefore be it

RESOLVED, that the Chairman of the Board of Supervisors is hereby authorized to execute an agreement with Finger Lakes Area Counseling & Recovery Agency, Inc. (FLACRA), subject to the County Attorney's approval as to form and content, for the provision of drug/alcohol assessment services during the period 1/1/20 - 12/31/22 at a fee of \$40.00 per assessment.

Budgeted: yes no Proposed Cost: 1,200 Reimbursed Amount: 180.00 County Cost: 1,020

Departmental transfer \$ _____ from Account No. _____ to Account No. _____

County Administrator's Review: _____ Date: _____

Human Resources Office Review: yes no N/A Signature: _____

County Attorney Review: yes no N/A Signature: _____

Standing Committee: Ayes _____ Nays _____ Date: _____ Signature: _____

Signature/Date Rec'd: _____ Clerk, Board of Supervisors

Referred to:

Committee: _____ Ayes _____ Nays _____ Date: _____ Signature: _____

Committee: _____ Ayes _____ Nays _____ Date: _____ Signature: _____

DSS01RES03 Authorize Contract with FLACRA for Drug/Alcohol Assessments

FINANCIAL REPORT – November 2019

Account	2018				2019				YTY Change	
	Revenue	%	Expended	%	Revenue	%	Expended	%	Rev +/- Change	Exp +/- Change
6010.1	6,457,441	63.6%	6,125,856	84.5%	6,350,700	60.4%	6,247,825	84.7%	-3.2%	0.2%
0.2			153,587	86.3%			147,080	64.6%		-21.7%
0.4			1,341,576	53.3%			1,263,467	46.7%		-6.6%
0.8	*Does not include annual retirement expenses.		2,432,586	59.0%	*Does not include annual retirement expenses.		2,460,606	63.2%		4.2%
6055.4										
Day Care	931,498	90.2%	894,057	91.9%	924,943	96.9%	861,425	81.7%	6.7%	-10.2%
6070.4										
POS	823,716	88.3%	790,179	56.5%	949,812	80.4%	1,124,383	57.9%	-7.9%	1.4%
6100										
Medicaid	0	0.0%	12,673,956	87.4%	0	0.0%	12,653,472	89.7%	0.0%	2.3%
6101 MA	31,607	63.2%	2,501	5.0%	29,012	58.0%	1,993	4.0%	-5.2%	-1.0%
6106 Fam T.H.	290	29.0%	290	29.0%	0	0.0%	290	29.0%	-29.0%	0.0%
6109 FA	2,414,372	72.7%	2,414,659	72.7%	1,608,016	51.9%	1,719,535	55.5%	-20.8%	-17.2%
6119 FC	1,366,500	96.2%	1,694,251	95.5%	1,439,103	81.4%	2,035,314	87.5%	-14.8%	-8.0%
6123 JD	57,555	27.3%	25,536	3.3%	21,281	10.1%	37,470	4.0%	-17.2%	0.7%
6129 STS	0	0.0%	351,970	31.9%	0	0.0%	277,773	32.5%	0.0%	0.6%
6140 SN	756,847	83.0%	1,670,316	79.5%	740,132	75.5%	1,688,159	80.4%	-7.5%	0.9%
6141										
HEAP	41,994	419.9%	33,949	339.5%	9,570	95.7%	29,411	294.1%	-324.2%	-45.4%
6142 EAA	7,937	88.2%	5,943	33.0%	2,208	24.5%	4,690	26.1%	-63.7%	-6.9%
TOTAL Expenses			30,611,212	78.5%			30,552,892	75.0%		-3.5%
Revenue	12,889,757	70.9%			12,074,777	65.9%			-5.0%	
County Cost			17,721,455	79.0%			18,478,115	83.1%		4.1%

2019 - Total Original Appropriations = \$39,106,827

2019 - Original Budgeted County Cost = \$20,775,613

2019 - Original Budget Revenue \$18,331,214

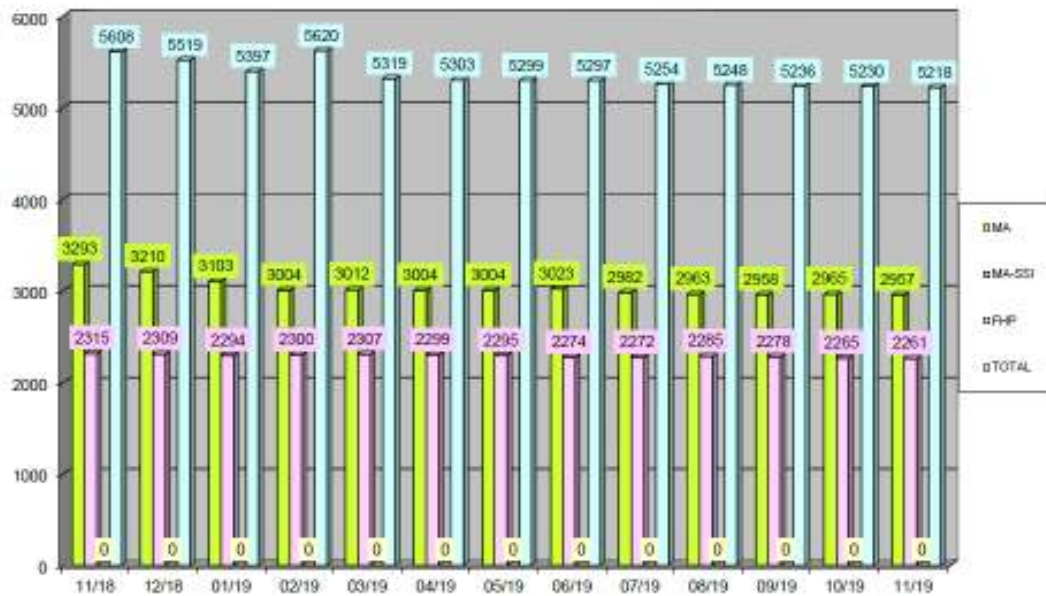
Report does not include County 50% funding of Nursing Home IGT.

CASELOAD STATISTICS – NOVEMBER

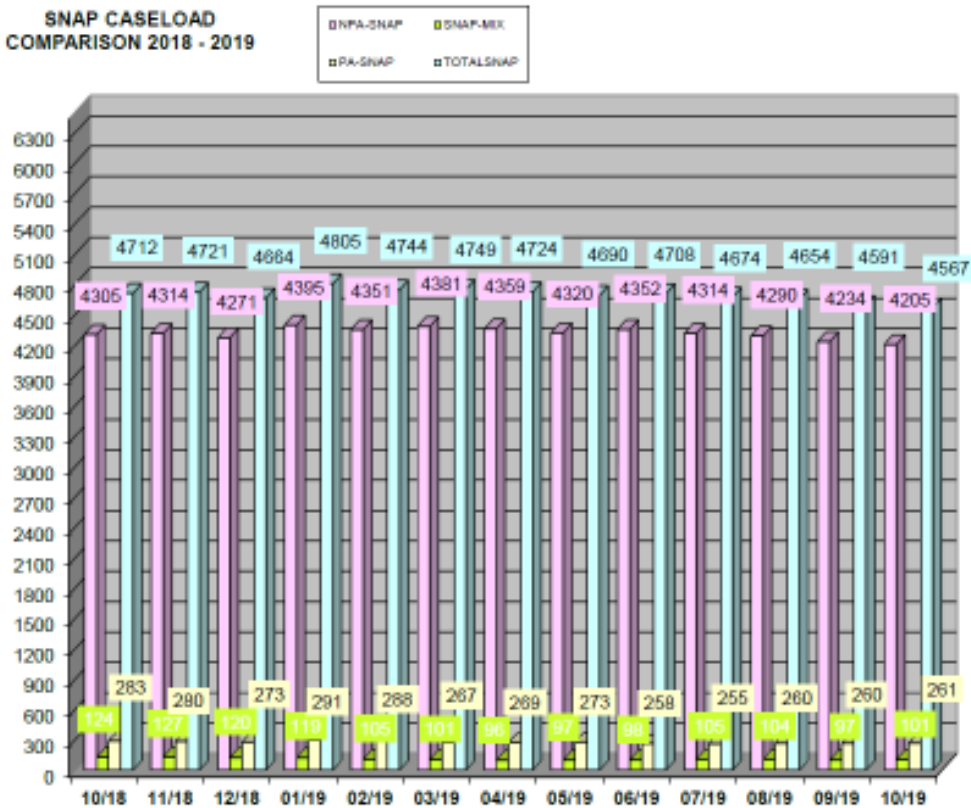
	Wayne	▲ Last Month		Ontario	▲ Last Month
Temporary Assistance	226	2	Family Assistance	274	(8)
	255	(11)	Safety Net	359	(10)
	481	(9)	Total Cases	633	(18)
	769	(8)	Total Individuals	1000	(2)
Medical Assistance	2957	(8)	MA	3697	(47)
	2261	(2)	MA-SSI	2008	9
	-	-	FHP	-	-
	5218	(12)	Total Cases	5705	(56)
	5460	(13)	Total Individuals	6031	(99)
Food Stamps/SNAP	4201	(4)	NPA-FS/SNAP	4243	39
	104	3	FS/SNAP-MIX	128	7
	253	(8)	PA-FS/SNAP	372	(15)
	4558	(9)	Total Cases	4743	17
	7803	(8)	Total Individuals	7899	51
Totals for all three Programs	10,257	(30)	Total Cases	11081	(57)
	14,032	(29)	Total Individuals	14930	(50)

*NOTE: One individual may be a participant in more than one program

MEDICAID ASSISTANCE CASELOAD COMPARISON 2018-2019



SNAP CASELOAD COMPARISON 2018 - 2019



Temporary Assistance Caseload Comparison 2018-2019

