Monroe County Legislature

OFFICE OF THE MAJORITY CAUCUS

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No. 260350
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Committee Assignment
Memorializing Referral -L

November 9, 2026

To The Honorable
Monroe County Legislature
39 West Main Street
Rochester, NY 14614

RE: Memorializing the United States Congress to Pass and President Trump to Sign H.R.10044, the AI Tax and Work Protection Act.

The spread of accessible artificial intelligence (AI) models promises to introduce great changes in society. Some see it as beneficial, citing an increase in productivity, greater innovation, and growing economic activity. Others point out the potential side-effects: security threats, inaccurate information, and increased unemployment. It is important to remember we play a role in deciding how AI impacts our communities. Whatever the consequences of AI may be, we need a plan to ensure everyday people can maintain their livelihoods while supporting themselves, their families, and their communities.

Companies face incentives which prioritize investments in machines and automation, not people. By cutting human labor out of their processes, large businesses can obtain tax benefits from investing in machinery. This systematically deprioritizes human workers. Monroe County and its surrounding communities are already feeling the effects: over the past year, the region lost thousands of professional jobs, with Rochester's finance sector taking the biggest hit. Currently, there are no specific safety nets to protect people facing or experiencing AI-induced job loss.

As the threat of layoffs looms, a plan must be developed to support workers displaced by AI. H.R.10044, the AI Tax and Work Protection Act, is a proactive piece of legislation which would protect workers before job losses occur. The bill is twofold: it undoes the tax benefits corporations receive by automating jobs, and expands safety nets to make sure the advantages of AI are distributed to everyone, not just those at the top.

H.R.10044 would introduce a tax on AI companies, the rate of which would be determined by either the company's output or by the company's total revenue, depending on their business model. This tax would rebalance the scales, giving workers a fair chance instead of encouraging organizations to automate as many jobs as possible.

While balancing the scales is important, safety nets must be established, too. The revenue generated from the AI tax would create and fund the Work Protection Administration, an

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agency which would offset job losses by investing in reliable, essential sectors like housing, childcare and healthcare. The program would also provide funding to state and local governments, nonprofits, and educational institutions to reduce the impact of unemployment and assist in new job training. These initiatives would mitigate the effects for workers if their jobs were to be automated, preventing economic standstill and halting a deepening economic divide.

AI could lead to consequential changes, and workers need assurance they will be able to support themselves in the future. The AI tax would reduce the incentives large businesses receive towards automation, while the Work Protection Administration would support workers as they recover from the impact of AI on their livelihoods. For these reasons, we strong urge the United States Congress to pass and President Trump to sign H.R.10044, the AI Tax and Work Protection Act.

Respectfully submitted,

Marvin Stepherson
Legislator - District 3

Dr. Nazish Jeffery
Legislator - District 12

Sue Hughes-Smith
Legislator - District 14

Rachel Barnhart
Legislator - District 17

Mercedes Vazquez Simmons
Legislator - District 22

Ricky Frazier
Legislator - District 28

Monroe County Legislature

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Committee Assignment
Memorializing Referral -L

November 9, 2026

To The Honorable
Monroe County Legislature
39 West Main Street
Rochester, NY 14614

RE: Memorializing the United States Congress to Pass and President Trump to Sign H.R.10231, the No Homeless Detention Centers Act

Homelessness is a persistent challenge in Monroe County. Providing homeless individuals with the support and shelter they need requires the consideration of community feedback to ensure policies match local demands. Nevertheless, the Federal Administration recently signed Executive Order 14321, which limits the ability of municipalities like Monroe County to address homelessness in a way that makes sense for our community. Homelessness relief policies should be decided by the localities serving the population.

Shelters in Monroe County are an essential component of the area's homelessness relief system. Shelter staff work tirelessly to provide services for homeless individuals, but they often experience more demand than they have capacity for. In an effort to assist as many people as possible, shelters house more people than they have beds for. This results in less comfortable conditions for people living in shelters.

Capacity issues can be even more challenging when individuals experience unique circumstances, like severe mental illness or substance abuse issues, which shelters may not have the resources for. As a result, there are times when unhoused people are turned away from shelter facilities, and outdoor tents or encampments become their only option.

Unhoused individuals may not seek shelter facilities for a variety of reasons. Some people do not meet the necessary criteria to qualify for a bed in a shelter. Some people choice to reside outdoors to alleviate the challenges shelters face; such as, tight living spaces resulting from sheltering more people than there are beds. Seeking indoor shelter may result in family members or couples being split up, eliminating some of the only support unhoused people have. Each unhoused person has a distinct background influencing their shelter decisions, and forcing them into a shelter facility may not always be the best solution.

Executive Order 14321 preempts responsive, localized homelessness initiatives, including those in Monroe County. E.O.14321 requires municipalities receiving Federal funding to enforce punishments on urban camping and loitering, even if homeless individuals have

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nowhere else to go. This limits the ability of the County, the Department of Human Services, and local organizations to respond to cases of homelessness in ways our community decides best serve our unhoused population.

E.O.14321 also calls for implementing and enforcing regulations which force homeless individuals into indoor shelter facilities against their will. Such enforcements are mandated even if the unhoused person is ineligible for temporary housing assistance, which could disrupt other individuals within a shelter. These policies will have three main impacts: they will place additional strain on shelters in Monroe County, deny unhoused people the ability to make their own decisions, and reduce the number of strategies available to address cases of homelessness.

H.R.10231, The No Homeless Detention Centers Act, would reverse the requirements put in place by E.O.14321. Individuals participating in necessary, life-sustaining activities on public property like eating, sleeping, and sheltering themselves from the weather would be protected from threats of punishment aimed at coercing such individuals into facilities against their will. The No Homeless Detention Centers Act also prohibits homeless shelters from forcing individuals into labor in exchange for their stay at a shelter or facility.

The No Homeless Detention Centers Act would reinstate Monroe County's ability to implement smart, responsive homelessness initiatives. H.R.10231 also defends the dignity of homeless individuals, protecting necessary life-sustaining activities and allowing unhoused people to make sheltering decisions with regard to their individual situation. For these reasons, we call on President Trump to reverse E.O.14321, and we strongly urge the United States Congress to pass and President Trump to sign H.R.10231, the No Homeless Detention Centers Act.

Respectfully submitted,

Marvin Stepherson
Legislator - District 3

Dr. Nazish Jeffery
Legislator - District 12

Sue Hughes-Smith
Legislator - District 14

Rachel Barnhart
Legislator - District 17

Mercedes Vazquez Simmons
Legislator - District 22

Ricky Frazier
Legislator - District 28

Monroe County Legislature
Office of the Republican Conference

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Committee Assignment
Memorializing Referral -L

November 9, 2026

To The Honorable
Monroe County Legislature
407 Monroe County Office Building
39 West Main Street
Rochester, NY 14614

Re: Memorializing the New York State Legislature to Pass, and Governor Kathy Hochul to Sign, S.2720-A/A.9673, Establishing a Tax Credit for Employers of National Guard Members, Reservists, and Volunteer First Responders

Honorable Legislators:

New York's National Guard members, military reservists, volunteer firefighters, and emergency medical services (EMS) personnel answer the call to serve, often with little notice and at considerable personal sacrifice. Their commitment strengthens our communities and our nation, but it can also require time away from civilian employment for training, deployments, and emergency response. Employers who accommodate these obligations play an essential role in making that public service possible.

Senate Bill S.2720-A and Assembly Bill A.9673 would recognize this partnership by establishing a $1,500 wage tax credit for each qualifying employee who has worked for an eligible employer for at least six months. The legislation covers New York National Guard members, reservists, volunteer firefighters, and EMS personnel. Employers claiming the credit for National Guard members and reservists would also be required to comply with the Uniformed Services Employment and Reemployment Rights Act (USERRA), reinforcing the importance of protecting the civilian employment rights of those who serve.

These dedicated New Yorkers bring leadership, discipline, professionalism, and valuable skills to their workplaces. They also respond to fires, medical emergencies, natural disasters, and military obligations that cannot always be scheduled around normal business hours. While many employers already accommodate these commitments, unexpected absences can create operational and financial challenges, especially for small businesses with limited staffing. The proposed tax credit would recognize employers' support and provide an additional incentive to hire and retain employees who serve beyond the workplace.

Communities across New York continue to face challenges in recruiting and retaining volunteer firefighters and EMS personnel. At the same time, the readiness of the National Guard and military reserves depends, in part, on civilian employers who support their employees' service

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commitments. By encouraging that partnership, this legislation would help sustain local emergency response capabilities, support military readiness, and demonstrate that New York values the contributions of both those who serve and the businesses that employ them.

For these reasons, we respectfully ask our colleagues in the Monroe County Legislature to join us in calling on the New York State Legislature to pass, and Governor Kathy Hochul to sign, S.2720-A/A.9673. This practical measure would strengthen support for those who protect our communities while recognizing the employers who help make their continued service possible.

Respectfully Submitted,

Sean McCabe
Monroe County Legislature
Republican Leader

Paul Dondorfer
Public Safety Committee
Ranking Member

Jackie Smith
Monroe County Legislator
District 2

Richard B. Milne
Monroe County Legislator
District 5

Robert Colby
Monroe County Legislator
District 20

Monroe County Legislature
Office of the Republican Conference

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Committee Assignment
Memorializing Referral -L

November 9, 2026

To The Honorable
Monroe County Legislature
407 Monroe County Office Building
39 West Main Street
Rochester, NY 14614

Re: Memorializing the New York State Legislature to Pass, and Governor Kathy Hochul to Sign, S.2372/A.5069 (Chelsey's Law)

Honorable Legislators:

New York State continues to confront a devastating overdose crisis, one that demands both compassion for affected families and accountability for those who unlawfully distribute dangerous drugs. According to the New York State Department of Health, illegally manufactured fentanyl was involved in 71 percent of overdose deaths statewide in 2024. Although New York law imposes criminal penalties for the unlawful sale of controlled substances, pursuing homicide charges when those substances cause a death can present significant legal challenges. The result is a gap between the severity of the harm and the charges prosecutors may be able to bring.

Senate Bill S.2372 and Assembly Bill A.5069, known as "Chelsey's Law," seek to address that gap. The legislation is named in memory of Chelsey Murray, a 31-year-old Suffolk County resident who died from fentanyl poisoning in 2022. It would amend the Penal Law to establish manslaughter in the second degree when a person sells, administers, delivers, or causes the delivery of a controlled substance, knowing or having reasonable grounds to know that it is likely to cause death, and the substance causes, contributes to, or aids in another person's death. It would also establish aggravated manslaughter provisions in specified circumstances.

Of particular importance, Chelsey's Law would establish evidentiary presumptions intended to address the difficulty of proving what a distributor knew about the dangers of a controlled substance. Under the proposal, distribution without a prescription would be presumptive evidence that the substance was likely to cause death. Distribution by someone other than a duly licensed medical professional would be presumptive evidence that the person knew or had reasonable grounds to know of that risk. These provisions would give prosecutors additional tools to establish the elements of an offense while preserving applicable legal protections for defendants.

This distinction matters. The dangers of fentanyl and other lethal drugs are well documented, yet proving a particular distributor's knowledge can be difficult. When the unlawful distribution of a controlled substance contributes to a person's death, New York law should provide a meaningful path

to accountability that reflects the seriousness of the conduct. Chelsey's Law would strengthen that framework without removing the prosecution's obligation to prove the elements of a criminal charge.

Behind every overdose death is a family facing an unimaginable loss and a community affected by the consequences of illicit drug trafficking. Those who knowingly distribute dangerous controlled substances should not escape meaningful accountability when their actions result in another person's death. New Yorkers deserve criminal laws that recognize the severity of this harm and provide prosecutors with appropriate tools to pursue justice.

For these reasons, we respectfully urge the New York State Legislature to pass S.2372/A.5069 and Governor Kathy Hochul to sign Chelsey's Law into law. This legislation would help ensure that those responsible for fatal drug distribution face consequences proportionate to the harm caused and would reinforce our commitment to protecting communities throughout New York State.

Respectfully Submitted,

Sean McCabe
Monroe County Legislature
Republican Leader

Paul Dondorfer
Public Safety Committee
Ranking Member

Jackie Smith
Monroe County Legislator
District 2

Richard B. Milne
Monroe County Legislator
District 5

Robert Colby
Monroe County Legislator
District 20

Office of **the County Executive**

Monroe County, New York

Adam J. Bello
County Executive

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Committee Assignment
ENV. & PUB. WORKS -L
WAYS & MEANS

November 6, 2026

To The Honorable
Monroe County Legislature
407 County Office Building
Rochester, New York 14614

Subject: Authorize the Alteration of Sewer Assets, Fiber Facilities, and Appurtenances of the Gates-Chili-Ogden Sewer District, Irondequoit Bay South Central Pure Waters District, Northwest Quadrant Pure Waters District, Rochester Pure Waters District, and Monroe County by the New York State Department of Transportation for State-let Contracts for Calendar Year 2027

Honorable Legislatures:

I recommend that Your Honorable Body authorize the alterations of sewer assets, fiber facilities, and appurtenances of the Gates-Chili-Ogden Sewer District, Irondequoit Bay South Central Pure Waters District, Northwest Quadrant Pure Waters District, Rochester Pure Waters District, and Monroe County by the New York State Department of Transportation ("NYSDOT") for State-let Contracts for calendar year 2027.

The NYSDOT undertakes several projects each year that may result in the need to alter sewer assets, fiber facilities, and appurtenances of the various Pure Waters Districts and/or Monroe County. During 2024 and 2025 the NYS DOT required project-specific resolution to facilitate this work. For example, Your Honorable Body approved adjustments to Pure Waters assets on NYSDOT's Route 204 From Route 33A to Rochester City Line Project by Resolution 316 of 2024, and on NYSDOT's NY-33A Chili Ave-Erie Canal Bridge Project by Resolution 188 of 2025 for the Rochester Pure Waters District and Resolution 189 of 2025 for the Gates-Chili-Ogden Sewer District.

This authorization will expedite the process of facilitating NYSDOT's projects while ensuring proper protection to the assets of the various Pure Waters Districts and Monroe County. The Director of Environmental Services will review and concur with any and all documentation that may become necessary as a result of any project as it relates to Pure Waters' assets.

The specific legislative actions are required:

1. Authorize the County Executive, or his designee, to execute a utility work agreement, and any amendments thereto, for the alteration of sewer assets, fiber facilities, and appurtenances of the Gates-Chili-Ogden Sewer District, Irondequoit Bay South Central Pure Waters District, Northwest Quadrant Pure Waters District, Rochester Pure Waters District, and Monroe County by the New York State Department of Transportation for State-let Contracts for calendar year 2027.

2. Incorporate by reference and adopt the attached resolution required by New York State for the alteration of sewer assets, fiber facilities, and appurtenances of the Gates-Chili-Ogden Sewer District, Irondequoit Bay South Central Pure Waters District, Northwest Quadrant Pure Waters District, Rochester Pure Waters District, and Monroe County for State-let Contracts for calendar year 2027.

This action is a Type II Action pursuant to 6 NYCRR § 617.5(c)(2) ("replacement, rehabilitation or reconstruction of a structure or facility, in kind, on the same site;") and 6 NYCRR § 617.5(c)(26) ("routine or continuing agency administration and management, not including new programs or major reordering of priorities that may affect the environment;") and is not subject to further review under the State Environmental Quality Review Act.

This alteration of assets will have no impact on the revenues or expenditures of the current Monroe County budget.

I recommend that this matter be referred to the appropriate committee(s) for the favorable action by Your Honorable Body.

Sincerely,

Adam J. Bello
Monroe County Executive

Office of **the County Executive**

Monroe County, New York

Adam J. Bello
County Executive

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Committee Assignment
PWAB -L

November 6, 2026

To The Administrative Board of the
Gates-Chili-Ogden Sewer District
Irondequoit Bay South Central Pure Waters District
Northwest Quadrant Pure Waters District
Rochester Pure Waters District
407 County Office Building
Rochester, New York 14614

Subject: Authorize the Alteration of Sewer Assets, Fiber Facilities, and Appurtenances of the Gates-Chili-Ogden Sewer District, Irondequoit Bay South Central Pure Waters District, Northwest Quadrant Pure Waters District, and Rochester Pure Waters District by the New York State Department of Transportation for State-let Contracts for Calendar Year 2027

Honorable Legislatures:

I recommend that Your Honorable Body authorize the alterations of sewer assets, fiber facilities, and appurtenances of the Gates-Chili-Ogden Sewer District, Irondequoit Bay South Central Pure Waters District, Northwest Quadrant Pure Waters District, and Rochester Pure Waters District by the New York State Department of Transportation ("NYSDOT") for State-let Contracts for calendar year 2027.

The NYSDOT undertakes several projects each year that may result in the need to alter sewer assets, fiber facilities, and appurtenances of the various Pure Waters Districts. During 2024 and 2025 the NYS DOT required project-specific resolution to facilitate this work. For example, Your Honorable Body approved adjustments to Pure Waters assets on NYSDOT's Route 204 From Route 33A to Rochester City Line Project by Resolution 316 of 2024, and on NYSDOT's NY-33A Chili Ave-Erie Canal Bridge Project by Resolution 188 of 2025 for the Rochester Pure Waters District and Resolution 189 of 2025 for the Gates-Chili-Ogden Sewer District.

This authorization will expedite the process of facilitating NYSDOT's projects while ensuring proper protection to the assets of the various Pure Waters Districts. The Director of Environmental Services will review and concur with any and all documentation that may become necessary as a result of any project as it relates to Pure Waters' assets.

The specific Administrative Boards actions are required:

1. Authorize the County Executive, or his designee, to execute a utility work agreement, and any amendments thereto, for the alteration of sewer assets, fiber facilities, and appurtenance of the Gates-Chili-Ogden Sewer District, Irondequoit Bay South Central Pure Waters District, Northwest Quadrant Pure Waters District, and Rochester Pure Waters District by the New York State Department of Transportation for State-let Contracts for calendar year 2027.

2. Incorporate by reference and adopt the attached resolution required by New York State for the alteration of sewer assets, fiber facilities, and appurtenances of the Gates-Chili-Ogden Sewer District, Irondequoit Bay South Central Pure Waters District, Northwest Quadrant Pure Waters District, and Rochester Pure Waters District for State-let Contracts for calendar year 2027.

This action is a Type II Action pursuant to 6 NYCRR § 617.5(c)(2) ("replacement, rehabilitation or reconstruction of a structure or facility, in kind, on the same site;") and 6 NYCRR § 617.5(c)(26) ("routine or continuing agency administration and management, not including new programs or major reordering of priorities that may affect the environment;") and is not subject to further review under the State Environmental Quality Review Act.

This alteration of assets will have no impact on the revenues or expenditures of the current Monroe County budget.

I recommend that this matter favorable action by the Administrative Boards of the Gates-Chili-Ogden Sewer District, Irondequoit Bay South Central Pure Waters District, Northwest Quadrant Pure Waters District, and Rochester Pure Waters District.

Sincerely,

Adam J. Bello
Monroe County Executive

Office of **the County Executive**

Monroe County, New York

Adam J. Bello
County Executive

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Committee Assignment
ENV. & PUB. WORKS-L
WAYS & MEANS

November 6, 2026

To The Honorable
Monroe County Legislature
407 County Office Building
Rochester, New York 14614

Subject: Authorize Make-Ready Agreements for the Alteration of Assets Owned by Private and Public Utilities for the Purpose of the Installation of Fiber Optic Facilities and Appurtenances Owned by the County of Monroe, the Gates-Chili-Ogden Sewer District, the Irondequoit Bay South Central Pure Waters District, the Northwest Quadrant Pure Waters District, and/or the Rochester Pure Waters District for Projects Undertaken in Calendar Year 2027

Honorable Legislators:

I recommend that Your Honorable Body authorize make-ready agreements for the alteration of assets owned by private and public utilities for the purpose of the installation of fiber optic facilities and appurtenances owned by the County of Monroe, the Gates-Chili-Ogden Sewer District, the Irondequoit Bay South Central Pure Waters District, the Northwest Quadrant Pure Waters District, and/or the Rochester Pure Waters District for projects undertaken in calendar year 2027, for an aggregate amount not to exceed $500,000.

The County and the Pure Waters Districts own and operate an extensive network of fiber optic facilities and appurtenances required for the effective delivery of operational and business services for various County Departments, including but not limited to, the Departments of Environmental Services; Public Safety; Transportation; Information Services; Finance; Human Resources; the Sheriff's Office; and Your Honorable Body. There are occasions where new or replacement fiber optic cable needs to be installed on utility poles owned by private and public utilities, such as Frontier Communications, Rochester Gas and Electric, and National Grid. In order to install County-owned fiber optic cable on these private or public utility poles, a process known as "make-ready" is necessary to assess and relocate wiring of other utilities. The process facilitates the placement of the County's cabling and maintains proper separation of wiring and prevents disputation to any of the utilities' service.

The make-ready process is performed by a limited number of contractors that are qualified and approved by the utility pole's owner. The County or its consultants obtain numerous quotes from these qualified contractors to perform the cabling work. The County then pays for a portion of the make-ready work. In some cases, the utility owner pays for a portion of the work and may pass payment through the County.

This authorization will expedite the process performing make-ready improvements to private or public utility assets so that County-initiated fiber optic projects can proceed in a timely and cost-effective manner. The Director of Environmental Services and/or the Purchasing Manager will enact procedures governing the execution of make-ready agreements, and thereby review and concur with any and all documentation that may become necessary as a result of any project as it relates to County and Pure Waters' assets.

The specific legislative action required is authorize the County Executive, or his designee, to execute make-ready utility work agreements, including reimbursements from and payments to private and public utilities, and qualified contractors, and any amendments thereto, for the alteration and preparation of private and public utility assets for the installation of fiber optic facilities and appurtenances owned by the County of Monroe, the Gates-Chili-Ogden Sewer District, the Irondequoit Bay South Central Pure Waters District, the Northwest Quadrant Pure Waters District, and/or the Rochester Pure Waters District for projects undertaken in calendar year 2027, for an aggregate amount not to exceed $500,000.

This action is a Type II Action pursuant to 6 NYCRR § 617.5(c)(2) ("replacement, rehabilitation or reconstruction of a structure or facility, in kind, on the same site;"); 6 NYCRR § 617.5(c)(7) ("installation of telecommunication cables in existing highway or utility rights of way utilizing trenchless burial or aerial placement on existing poles;"); and 6 NYCRR § 617.5(c)(26) ("routine or continuing agency administration and management, not including new programs or major reordering of priorities that may affect the environment;") and is not subject to further review under the State Environmental Quality Review Act.

Funding for these agreements is included in capital fund 515, and any capital fund(s) created for the same intended purpose. No additional net County support is required in the current Monroe County budget.

I recommend that this matter be referred to the appropriate committee(s) for the favorable action by Your Honorable Body.

Sincerely,

Adam J. Bello
Monroe County Executive

Office of **the County Executive**

Monroe County, New York

Adam J. Bello
County Executive

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Committee Assignment
PWAB -L

November 6, 2026

To The Administrative Board of the
Gates-Chili-Ogden Sewer District
Irondequoit Bay South Central Pure Waters District
Northwest Quadrant Pure Waters District
Rochester Pure Waters District
407 County Office Building
Rochester, New York 14614

Subject: Authorize Make-Ready Agreements for the Alteration of Assets Owned by Private and Public Utilities for the Purpose of the Installation of Fiber Optic Facilities and Appurtenances Owned by the Gates-Chili-Ogden Sewer District, the Irondequoit Bay South Central Pure Waters District, the Northwest Quadrant Pure Waters District, and/or the Rochester Pure Waters District for Projects Undertaken in Calendar Year 2027

Honorable Legislators:

I recommend that Your Honorable Body authorize make-ready agreements for the alteration of assets owned by private and public utilities for the purpose of the installation of fiber optic facilities and appurtenances owned by the Gates-Chili-Ogden Sewer District, the Irondequoit Bay South Central Pure Waters District, the Northwest Quadrant Pure Waters District, and/or the Rochester Pure Waters District for projects undertaken in calendar year 2027, for an aggregate amount not to exceed $500,000.

The County and the Pure Waters Districts own and operate an extensive network of fiber optic facilities and appurtenances required for the effective delivery of operational and business services for various County Departments, including but not limited to, the Departments of Environmental Services; Public Safety; Transportation; Information Services; Sheriff's Office; Finance; Human Resources; and Your Honorable Body. There are occasions where new or replacement fiber optic cable needs to be installed on utility poles owned by private and public utilities, such as Frontier Communications, Rochester Gas and Electric, and National Grid. In order to install County-owned fiber optic cable on these private or public utility poles, a process known as "make-ready" is necessary to assess and relocate wiring of other utilities. The process facilitates the placement of the County's cabling and maintains proper separation of wiring and prevents disputation to any of the utilities' service.

The make-ready process is performed by a limited number of contractors that are qualified and approved by the utility pole's owner. The County or its consultants obtain numerous quotes from these qualified contractors to perform the cabling work. The County then pays for a portion of the make-ready work. In some cases, the utility owner pays for a portion of the work and may pass payment through the County.

This authorization will expedite the process of performing make-ready improvements to private or public utility assets so that County-initiated fiber optic projects can proceed in a timely and cost-effective manner. The Director of Environmental Services and/or the Purchasing Manager will enact procedures governing the execution of make-ready agreements, and thereby review and concur with any and all documentation that may become necessary as a result of any project as it relates to County and Pure Waters' assets.

The specific Administrative Boards action required is to authorize the County Executive, or his designee, to execute make-ready utility work agreements, including reimbursements from and payments to private and public utilities, and qualified contractors, and any amendments thereto, for the alteration and preparation of private and public utility assets for the installation of fiber optic facilities and appurtenances owned by the Gates-Chili-Ogden Sewer District, the Irondequoit Bay South Central Pure Waters District, the Northwest Quadrant Pure Waters District, and/or the Rochester Pure Waters District for projects undertaken in calendar year 2027, for an aggregate amount not to exceed $500,000.

This action is a Type II Action pursuant to 6 NYCRR § 617.5(c)(2) ("replacement, rehabilitation or reconstruction of a structure or facility, in kind, on the same site;"); 6 NYCRR § 617.5(c)(7) ("installation of telecommunication cables in existing highway or utility rights of way utilizing trenchless burial or aerial placement on existing poles;"); and 6 NYCRR § 617.5(c)(26) ("routine or continuing agency administration and management, not including new programs or major reordering of priorities that may affect the environment;") and is not subject to further review under the State Environmental Quality Review Act.

Funding for these agreements is included in capital fund 515, and any capital fund(s) created for the same intended purpose. No additional net County support is required in the current Monroe County budget.

I recommend that this matter favorable action by the Administrative Boards of the Gates-Chili-Ogden Sewer District, Irondequoit Bay South Central Pure Waters District, Northwest Quadrant Pure Waters District, and Rochester Pure Waters District.

Sincerely,

Adam J. Bello
Monroe County Executive

Office of **the County Executive**

Monroe County, New York

Adam J. Bello
County Executive

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Commitee Assigement
ENV. & PUB. WORKS -L
WAYS & MEANS

November 6, 2026

To The Honorable
Monroe County Legislature
407 County Office Building
Rochester, New York 14614

Subject: Authorize a Contract with Clean Harbors Environmental Services, Inc., to Collect, Transport, and Dispose of Household Hazardous Waste to Support the Monroe County Pure Waters Industrial Waste Program

Honorable Legislators:

I recommend that Your Honorable Body authorize a contract with Clean Harbors Environmental Services, Inc., in an annual amount not to exceed $500,000, to collect, transport and dispose of household hazardous waste ("HHW") to support the Monroe County Pure Waters Industrial Waste Program for the period of January 1, 2027 through December 31, 2027, with the option to renew for two (2) additional one-year extensions, with escalations on the two (2) additional one-year extensions to be limited to an amount equal to the increase in the previous year's Consumer Price Index (U.S. City Average CPI-U from the Bureau of Labor Statistics).

The Department of Environmental Services has operated a HHW collection program since 1991. The collection program provides residents of Monroe County with an economical, convenient and environmentally sound disposal option for their unwanted, out-dated or banned pesticides, solvents, cleaners, paint, and other materials that contain potentially harmful constituents. Since 1991, nearly 6,880 tons of HHW and vape devices have been collected and approximately 166,100 county residents served. The HHW collection program is operated at the ecopark on 10 Avion Drive.

This contract will provide the services needed to continue the HHW collection program including the following components: applicable local, state and federal permitting and reporting requirements; furnishing of all equipment and supplies to package wastes for transport and disposal; technical staff to operate the facility on collection days to determine chemical hazards; and provide for final disposal of wastes by environmentally sound methods in full compliance with all local, state and federal laws.

A Request for Proposals was issued with Clean Harbors Environmental Services, Inc., selected as the most qualified to provide these services.

The specific legislative action required is to authorize the County Executive, or his designee, to execute a contract, and any amendments thereto, with Clean Harbors Environmental Services, Inc., 6741 VIP Parkway, Syracuse, New York 13211, to collect, transport, and dispose of household hazardous waste to support the Monroe County Pure Waters Industrial Waste Program in an annual amount not to exceed $500,000 for the period of January 1, 2027 through December 31, 2027, with the option to renew for two (2) additional one-year extensions, with escalations for the two (2) additional one-year extensions to be limited to an amount equal to the increase in the previous year's Consumer Price Index (U.S. City Average CPI-U from the Bureau of Labor Statistics).

This action is a Type II Action pursuant to 6 NYCRR § 617.5(c)(26) ("routine or continuing agency administration and management, not including new programs or major reordering of priorities that may affect the environment") and is not subject to review under the State Environmental Quality Review Act.

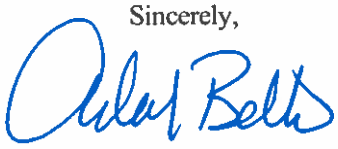
Funding for this contract is included in the proposed 2027 operating budget of the Department of Environmental Services, fund 3007, cost center 857201, Pure Waters Administration, and will be requested in future years' budgets. No additional net County support is required in the current Monroe County budget.

The records in the Office of the Monroe County Treasury have indicated that neither Clean Harbors Environmental Services, Inc., nor its principal officers owe any delinquent Monroe County property taxes. The principal officers of the firms are:

Michael Battles, Co-CEO
Eric Gerstenberg, Co-CEO

I recommend that this matter be referred to the appropriate committee(s) for favorable action by Your Honorable Body.

Sincerely,



Adam J. Bello
Monroe County Executive

Office of **the County Executive**

Monroe County, New York

Adam J. Bello
County Executive

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No. 260359
Not to be removed from the Office of the Legislature Of Monroe County
Committee Assignment
PWAB -L

November 6, 2026

To The Administrative Boards of the
Gates-Chili-Ogden Sewer District
Irondequoit Bay South Central Pure Waters District
Northwest Quadrant Pure Waters District
Rochester Pure Waters District
407 County Office Building
Rochester, New York 14614

Subject: Authorize a Contract with Clean Harbors Environmental Services, Inc., to Collect, Transport, and Dispose of Household Hazardous Waste to Support the Monroe County Pure Waters Industrial Waste Program

Honorable Legislators:

I recommend that the Administrative Boards of the Gates-Chili-Ogden Sewer District, Irondequoit Bay South Central Pure Waters District, Northwest Quadrant Pure Water District and the Rochester Pure Waters District authorize a contract with Clean Harbors Environmental Services, Inc. in an annual amount not to exceed $500,000 to collect, transport and dispose of household hazardous waste ("HHW") to support the Monroe County Pure Waters Industrial Waste Program for the period of January 1, 2027 through December 31, 2027, with the option to renew for two (2) additional one-year extensions, with escalations on the two (2) additional one-year extensions will be limited to an amount equal to the increase in the previous year's Consumer Price Index (U.S. City Average CPI-U from the Bureau of Labor Statistics).

The Department of Environmental Services has operated a HHW collection program since 1991. The collection program provides residents of Monroe County with an economical, convenient and environmentally sound disposal option for their unwanted, out-dated or banned pesticides, solvents, cleaners, paint, and other materials that contain potentially harmful constituents. Since 1991, nearly 6,880 tons of HHW and vape devices have been collected and approximately 166,100 county residents served. The HHW collection program is operated at the ecopark on 10 Avion Drive.

This contract will provide the services needed to continue the HHW collection program including the following components: applicable local, state and federal permitting and reporting requirements; furnishing of all equipment and supplies to package wastes for transport and disposal; technical staff to operate the facility on collection days to determine chemical hazards; and provide for final disposal of wastes by environmentally sound methods in full compliance with all local, state and federal laws.

A Request for Proposals was issued with Clean Harbors Environmental Services, Inc., selected as the most qualified to provide these services.

The specific Administrative Boards action required is to authorize the County Executive, or his designee, to execute a contract, and any amendments thereto, with Clean Harbors Environmental Services, Inc., 6741 VIP Parkway, Syracuse, New York 13211 to collect, transport, and dispose of household hazardous waste to support the Monroe County Pure Waters Industrial Waste Program in an annual amount not to exceed $500,000 for the period of January 1, 2027 through December 31, 2027, with the option to renew for two (2) additional one-year extensions, with escalations on the two (2) additional one-year extensions to be limited to an amount equal to the increase in the previous year's Consumer Price Index (U.S. City Average CPI-U from the Bureau of Labor Statistics).

This action is a Type II Action pursuant to 6 NYCRR § 617.5(c)(26) ("routine or continuing agency administration and management, not including new programs or major reordering of priorities that may affect the environment") and is not subject to review under the State Environmental Quality Review Act.

Funding for this contract is included in the proposed 2027 operating budget of the Department of Environmental Services, fund 3007, cost center 857201, Pure Waters Administration, and will be requested in future years' budgets. No additional net County support is required in the current Monroe County budget.

The records in the Office of the Monroe County Treasury have indicated that neither Clean Harbors Environmental Services, Inc., nor its principal officers owe any delinquent Monroe County property taxes. The principal officers of the firms are:

Michael Battles, Co-CEO
Eric Gerstenberg, Co-CEO

I recommend that this matter receive favorable action by the Administrative Boards of the Gates-Chili-Ogden Sewer District, Irondequoit Bay South Central Pure Waters District, Northwest Quadrant Pure Waters District and the Rochester Pure Waters District.

Sincerely,

Adam J. Bello
Monroe County Executive

Office of **the County Executive**

Monroe County, New York

Adam J. Bello
County Executive

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No. 260360
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Committee Assignment
ENV. & PUB. WORKS
WAYS & MEANS

November 6, 2026

To The Honorable
Monroe County Legislature
407 County Office Building
Rochester, New York 14614

Subject: Authorize Contracts with MRB Group Engineering, Architecture & Surveying, D.P.C. and Ramboll Americas Engineering Solutions, Inc. for Pump Station General Architectural and Engineering Term Services

Honorable Legislators:

I recommend that Your Honorable Body authorize contracts with MRB Group Engineering, Architecture & Surveying, D.P.C. and Ramboll Americas Engineering Solutions, Inc. for a total annual aggregate amount not to exceed $500,000 for pump station architectural and engineering services for the Gates-Chili-Ogden Sewer District, Northwest Quadrant Pure Waters District, Irondequoit Bay South Central Pure Waters District, and the Rochester Pure Waters District (the "Districts") for the period of January 1, 2027 through December 31, 2027, with the option to renew for two (2) additional one-year extensions, with escalations for the extensions to be limited to an amount equal to the increase in the previous year's Consumer Price Index (U.S. City Average CPI-U from the Bureau of Labor Statistics).

The Districts own, operate and maintain 63 sewage pumping stations. These contracts will provide pump station engineering term services including facility evaluations, preparation of engineering reports and technical memorandums, construction cost estimating, preparation of design drawings and technical specifications, and administration and inspection for pump station improvements and associated gravity sewers serving these Districts.

A Request for Proposals was issued with MRB Group Engineering, Architecture & Surveying, D.P.C. and Ramboll Americas Engineering Solutions, Inc. selected as the most qualified to provide these services.

The specific legislative action required is to authorize the County Executive, or his designee, to execute contracts, and any amendments thereto, with MRB Group Engineering, Architecture & Surveying, D.P.C., 145 Culver Road, Suite 160, Rochester, New York 14620 and Ramboll Americas Engineering Solutions, Inc., 400 Andrews Street, Suite 710, Rochester, New York 14604 for pump station general architectural and engineering term services for a total annual aggregate amount not to exceed $500,000 for the period of January 1, 2027 through December 31, 2027, with the option to renew for two (2) additional one-year extensions, with escalations for the extensions to be limited to an amount equal to the increase in the previous year's Consumer Price Index (U.S. City Average CPI-U from the Bureau of Labor Statistics).

This action is a Type II Action pursuant to 6 NYCRR § 617.5(c) (24) ("information collection including basic data collection and research, water quality and pollution studies, traffic counts, engineering studies, surveys, subsurface investigations and soils studies that do not commit the agency to undertake, fund or approve any Type I or Unlisted action") (26) ("routine or continuing agency administration and management, not including new programs or major reordering of priorities that may affect the environment"); and (27) ("conducting concurrent environmental, engineering, economic, feasibility and other studies and preliminary planning and budgetary processes necessary to the formulation of a proposal for action, provided those activities do not commit the agency to commence, engage in or approve such action") and is not subject to further review under the State Quality Review Act.

Funding for these contracts, consistent with authorized uses, is included in various capital funds and in the proposed 2027 operating budget of the Department of Environmental Services, pure waters fund 3007, cost center 857501, Rochester Pure Waters District Special Expenses; pure waters fund 3007, cost center 857401, Irondequoit Bay Squth Central Pure Waters District Special Expenses; pure waters fund 3007, cost center 857301 Northwest Quadrant Pure Waters Special Expenses; and pure waters fund 3007, cost center 857101 Gates-Chili-Ogden Sewer District Special Expenses. No additional net County support is required in the current Monroe County budget.

The records in the Office of the Monroe County Treasury have indicated that neither MRB Group Engineering, Architecture & Surveying, D.P.C., nor Ramboll Americas Engineering Solutions, Inc., nor any of their principal officers, owe any delinquent Monroe County property taxes. The principal officers of the firms are:

MRB Group Engineering, Architecture & Surveying, D.P.C
Ryan Colvin – President / CEO
Gregory J. Hotaling – Principal
William Davis – Eastern US Water Resources Engineering Director

Ramboll Americas Engineering Solutions, Inc.
Cheryl Ginyard-Jones - Managing Director, Ramboll Americas
Esther Bosman - Managing Director, Ramboll Water
Michael E Manning - Director

I recommend that this matter be referred to the appropriate committee(s) for favorable action by Your Honorable Body.

Sincerely,

Adam J. Bello
Monroe County Executive

Office of **the County Executive**

Monroe County, New York

Adam J. Bello
County Executive

OFFICIAL FILE COPY
No. 260361
Not to be removed from the Office of the Legislature Of Monroe County
Committee Assignment
PWAB -L

November 6, 2026

To The Administrative Board of the
Gates-Chili-Ogden Sewer District
Irondequoit Bay South Central Pure Waters District
Northwest Quadrant Pure Waters District
Rochester Pure Waters District
407 County Office Building
Rochester, New York 14614

Subject: Authorize Contracts with MRB Group Engineering, Architecture & Surveying, D.P.C. and Ramboll Americas Engineering Solutions, Inc. for Pump Station General Architectural and Engineering Term Services

Honorable Legislators:

I recommend that the Administrative Boards of the Gates-Chili-Ogden Sewer District, Irondequoit Bay South Central Pure Waters District, Northwest Quadrant Pure Waters District, and Rochester Pure Waters District authorize contracts with MRB Group Engineering, Architecture & Surveying, D.P.C. and Ramboll Americas Engineering Solutions, Inc. for a total annual aggregate amount not to exceed $500,000 for pump station architectural and engineering services for the Gates-Chili-Ogden Sewer District, Northwest Quadrant Pure Waters District, Irondequoit Bay South Central Pure Waters District, and the Rochester Pure Waters District (the "Districts") for the period of January 1, 2027 through December 31, 2027, with the option to renew for two (2) additional one-year extensions, with escalations for the extensions to be limited to an amount equal to the increase in the previous year's Consumer Price Index (U.S. City Average CPI-U from the Bureau of Labor Statistics).

The Districts own, operate and maintain 63 sewage pumping stations. These contracts will provide pump station engineering term services including facility evaluations, preparation of engineering reports and technical memorandums, construction cost estimating, preparation of design drawings and technical specifications, and administration and inspection for pump station improvements and associated gravity sewers serving these Districts.

Several consultants were considered, with MRB Group Engineering, Architecture & Surveying, D.P.C. and Ramboll Americas Engineering Solutions, Inc. selected as the most qualified to provide these services.

The specific Administrative Boards action required is to authorize the County Executive, or his designee, to execute contracts, and any amendments thereto, with MRB Group Engineering, Architecture & Surveying, D.P.C., 145 Culver Road, Suite 160, Rochester, New York 14620 and Ramboll Americas Engineering Solutions, Inc., 400 Andrews Street, Suite 710, Rochester, New York 14604 for pump station general architectural and engineering term services for a total annual aggregate amount not to exceed $500,000 for the period of January 1, 2027 through December 31, 2027, with the option to renew for two (2) additional one-year extensions, with escalations for the extensions to be limited to an amount equal to the increase in the previous year's Consumer Price Index (U.S. City Average CPI-U from the Bureau of Labor Statistics).

This action is a Type II Action pursuant to 6 NYCRR § 617.5(c) (24) ("information collection including basic data collection and research, water quality and pollution studies, traffic counts, engineering studies, surveys, subsurface investigations and soils studies that do not commit the agency to undertake, fund or approve any Type I or Unlisted action") (26) ("routine or continuing agency administration and management, not including new programs or major reordering of priorities that may affect the environment"); and (27) ("conducting concurrent environmental, engineering, economic, feasibility and other studies and preliminary planning and budgetary processes necessary to the formulation of a proposal for action, provided those activities do not commit the agency to commence, engage in or approve such action") and is not subject to further review under the State Quality Review Act.

Funding for these contracts, consistent with authorized uses, is included in various capital funds and in the proposed 2027 operating budget of the Department of Environmental Services, pure waters fund 3007, cost center 857501, Rochester Pure Waters District Special Expenses; pure waters fund 3007, cost center 857401, Irondequoit Bay South Central Pure Waters District Special Expenses; pure waters fund 3007, cost center 857301 Northwest Quadrant Pure Waters Special Expenses; and pure waters fund 3007, cost center 857101 Gates-Chili-Ogden Sewer District Special Expenses. No additional net County support is required in the current Monroe County budget.

The records in the Office of the Monroe County Treasury have indicated that neither MRB Group Engineering, Architecture & Surveying, D.P.C., nor Ramboll Americas Engineering Solutions, Inc., nor any of their principal officers, owe any delinquent Monroe County property taxes. The principal officers of the firms are:

MRB Group Engineering, Architecture & Surveying, D.P.C
Ryan Colvin – President / CEO
Gregory J. Hotaling – Principal
William Davis – Eastern US Water Resources Engineering Director

Ramboll Americas Engineering Solutions, Inc.
Cheryl Ginyard-Jones - Managing Director, Ramboll Americas
Esther Bosman - Managing Director, Ramboll Water
Michael E Manning - Director

I recommend that this matter receive favorable action by the Administrative Boards of the Gates-Chili-Ogden Sewer District, Irondequoit Bay South Central Pure Waters District, Northwest Quadrant Pure Waters District, and Rochester Pure Waters District.

Sincerely,

Adam J. Bello
Monroe County Executive

Office of **the County Executive**

Monroe County, New York

Adam J. Bello
County Executive

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Legislature Of
Monroe County
Committee Assignment
ENV. & PUB. WORKS -L
WAYS & MEANS

November 6, 2026

To The Honorable
Monroe County Legislature
407 County Office Building
Rochester, New York 14614

Subject: Authorize Contracts with Joseph C. Lu Engineering P.C. and Paradigm Environmental Services, Inc. for Professional Environmental Testing Term Services

Honorable Legislators:

I recommend that Your Honorable Body authorize contracts with Joseph C. Lu Engineering P.C. and Paradigm Environmental Services, Inc. in a total annual amount not to exceed $400,000 for professional environmental testing term services for the period of January 1, 2027 through December 31, 2027, with the option to renew for two (2) additional one-year extensions, with escalations for the extensions to be limited to an amount equal to the increase in the previous year's Consumer Price Index (U.S. City Average CPI-U from the Bureau of Labor Statistics).

These contracts will provide Monroe County and the Pure Waters Districts with professional environmental sampling and laboratory testing services when asbestos or other potentially hazardous materials are encountered and must be dealt with in accordance with applicable codes and regulations. These contracts establish an agreed upon rate for a variety of professional environmental sampling and laboratory testing services so that when services are required, the County is assured of a timely response to projects.

A Request for Proposals was issued with Joseph C. Lu Engineering P.C. and Paradigm Environmental Services, Inc. selected as the most qualified to provide these services.

The specific legislative action required is to authorize the County Executive, or his designee, to execute contracts, and any amendments thereto, with Joseph C. Lu Engineering P.C., 280 Broad Street, Suite 170, Rochester, New York 14604 and Paradigm Environmental Services, Inc., 179 Lake Avenue, Rochester New York 14608 for professional environmental testing term services in a total annual aggregate amount not to exceed $400,000 for the period of January 1, 2027 through December 31, 2027, with the option to renew for two (2) additional one-year extensions, with escalations for the extensions to be limited to an amount equal to the increase in the previous year's Consumer Price Index (U.S. City Average CPI-U from the Bureau of Labor Statistics).

This action is a Type II Action pursuant to 6 NYCRR § 617.5(c) (1) ("maintenance or repair involving no substantial changes in an existing structure or facility"); (2) ("replacement, rehabilitation or reconstruction of a structure or facility, in kind, on the same site, including upgrading buildings to meet building, energy, or fire codes unless such action meets or exceeds any of the thresholds in section 617.4 of this Part"); (24) "information collection, including basic data collection and research; water quality and pollution studies, traffic counts, engineering studies; surveys; subsurface investigations; and soils studies that do not commit the agency to undertake, fund or approve any Type I or Unlisted action"); and (27) ("conducting concurrent environmental, engineering, economic, feasibility and other studies and preliminary planning and budgetary processes necessary to the formulation of a proposal for action, provided those activities do not commit the agency to commence, engage in or approve such action") and is not subject to further review under the State Environmental Quality Review Act.

Funding for these contracts, consistent with authorized uses, is included in various capital funds and any capital fund(s) created for the same intended purpose. No additional net County support is required in the current Monroe County budget.

The records in the Office of the Monroe County Treasury have indicated that neither Joseph C. Lu Engineering P.C., nor Paradigm Environmental Services, Inc., nor any of their principal officers, owe any delinquent Monroe County property taxes. The principal officers of the firms are:

Joseph C. Lu Engineering P.C.
Cletus Ezenwa - President and CEO

Paradigm Environmental Services, Inc.
Kathryn Hansen - Chief Operating Officer

I recommend that this matter be referred to the appropriate committee(s) for favorable action by Your Honorable Body.

Sincerely,

Adam J. Bello
Monroe County Executive

Office of **the County Executive**

Monroe County, New York

Adam J. Bello
County Executive

OFFICIAL FILE COPY
No. 260363
Not to be removed from the Office of the Legislature Of Monroe County
Committee Assignment
PWAB -L

November 6, 2026

To The Administrative Boards of the
Gates-Chili-Ogden Sewer District
Irondequoit Bay South Central Pure Waters District
Northwest Quadrant Pure Waters District
Rochester Pure Waters District
407 County Office Building
Rochester, New York 14614

Subject: Authorize Contracts with Joseph C. Lu Engineering P.C. and Paradigm Environmental Services, Inc. for Professional Environmental Testing Term Services

Honorable Legislators:

I recommend that the Administrative Boards of the Gates-Chili-Ogden Sewer District, Irondequoit Bay South Central Pure Waters District, Northwest Quadrant Pure Waters District and the Rochester Pure Waters District authorize contracts with Joseph C. Lu Engineering P.C. and Paradigm Environmental Services, Inc. in a total annual amount not to exceed $400,000 for professional environmental testing term services for the period of January 1, 2027 through December 31, 2027, with the option to renew for two (2) additional one-year extensions, with escalations for the extensions to be limited to an amount equal to the increase in the previous year's Consumer Price Index (U.S. City Average CPI-U from the Bureau of Labor Statistics).

These contracts will provide the Pure Waters Districts with professional environmental sampling and laboratory testing services when asbestos or other potentially hazardous materials are encountered and must be dealt with in accordance with applicable codes and regulations. These contracts establish an agreed upon rate for a variety of professional environmental sampling and laboratory testing services so that when services are required, the County is assured of a timely response to projects.

A Request for Proposals was issued with Joseph C. Lu Engineering P.C. and Paradigm Environmental Services, Inc. selected as the most qualified to provide these services.

The specific Administrative Boards action required is to authorize the County Executive, or his designee, to execute contracts, and amendments thereto, with Joseph C. Lu Engineering P.C., 280 Broad Street, Suite 170, Rochester, New York 14604 and Paradigm Environmental Services, Inc., 179 Lake Avenue, Rochester New York 14608 for professional environmental testing term services in a total annual aggregate amount not to exceed $400,000 for the period of January 1, 2027 through December 31, 2027, with the option to renew for two (2) additional one-year extensions, with escalations for the extensions to be limited to an amount equal to the increase in the previous year's Consumer Price Index (U.S. City Average CPI-U from the Bureau of Labor Statistics).

This action is a Type II Action pursuant to 6 NYCRR § 617.5(c) (1) ("maintenance or repair involving no substantial changes in an existing structure or facility"); (2) ("replacement, rehabilitation or reconstruction of a structure or facility, in kind, on the same site, including upgrading buildings to meet building, energy, or fire codes unless such action meets or exceeds any of the thresholds in section 617.4 of this Part"); (24) "information collection, including basic data collection and research; water quality and pollution studies, traffic counts, engineering studies; surveys; subsurface investigations; and soils studies that do not commit the agency to undertake, fund or approve any Type I or Unlisted action"); and (27) ("conducting concurrent environmental, engineering, economic, feasibility and other studies and preliminary planning and budgetary processes necessary to the formulation of a proposal for action, provided those activities do not commit the agency to commence, engage in or approve such action") and is not subject to further review under the State Environmental Quality Review Act.

Funding for these contracts, consistent with authorized uses, is included in various capital fund(s) and any capital fund(s) created for the same intended purpose. No additional net County support is required in the current Monroe County budget.

The records in the Office of the Monroe County Treasury have indicated that neither Joseph C. Lu Engineering P.C. and Paradigm Environmental Services, Inc. nor any of their principal officers, owe any delinquent Monroe County property taxes. The principal officers of the firm are:

Joseph C. Lu Engineering P.C.
Cletus Ezenwa - President and CEO

Paradigm Environmental Services, Inc.
Kathryn Hansen - Chief Operating Officer

I recommend that this matter receive favorable action by the Administrative Boards of the Gates-Chili-Ogden Sewer District, Irondequoit Bay South Central Pure Waters District, Northwest Quadrant Pure Waters District and the Rochester Pure Waters District.

Sincerely,

Adam J. Bello
Monroe County Executive

Office of **the County Executive**

Monroe County, New York

Adam J. Bello
County Executive

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No. 260364
Not to be removed from the Office of the
Legislature Of
Monroe County
Committee Assignment
ENV. & PUB. WORKS -L
WAYS & MEANS

November 6, 2026

To The Honorable
Monroe County Legislature
407 County Office Building
Rochester, New York 14614

Subject: Authorize a Contract with Whitestone Associates Engineering & Geology NY, PLLC for Construction Material Testing Term Services

Honorable Legislators:

I recommend that the Your Honorable Body authorize a contract with Whitestone Associates Engineering & Geology NY, PLLC for construction material testing term services for a total annual amount not to exceed $300,000 for the period of January 1, 2027 through December 31, 2027, with the option to renew for two (2) additional one-year extensions, with escalations for the extensions to be limited to an amount equal to the increase in the previous year's Consumer Price Index (U.S. City Average CPI-U from the Bureau of Labor Statistics).

This contract will provide Monroe County with construction material testing and inspection services when it is necessary to determine either the quality of the work being performed or subsurface soil conditions. This contract establishes an agreed upon rate for a variety of material testing and inspection services so that when services are required, the County is assured of a timely response to projects. These services will be made available to all County departments.

A Request for Proposals was issued with Whitestone Associates Engineering & Geology NY, PLLC selected the most qualified to provide these services.

The specific legislative action required is to authorize the County Executive, or his designee, to execute a contract, and amendments thereto, with Whitestone Associates Engineering & Geology NY, PLLC, 500 Canal View Boulevard, Suite 700, Rochester, New York 14623 for construction material testing term services for a total annual amount not to exceed $300,000, for the period of January 1, 2027 through December 31, 2027, with the option to renew for two (2) additional one-year extensions, with escalations for the extensions to be limited to an amount equal to the increase in the previous year's Consumer Price Index (U.S. City Average CPI-U from the Bureau of Labor Statistics).

This action is a Type II Action pursuant to 6 NYCRR § 617.5(c) (1) ("maintenance or repair involving no substantial changes in an existing structure or facility"); (2) ("replacement, rehabilitation or reconstruction of a structure or facility, in kind, on the same site, including upgrading buildings to meet building, energy, or fire codes unless such action meets or exceeds any of the thresholds in section 617.4 of this Part"); (24) "information collection, including basic data collection and research; water quality and pollution studies, traffic counts, engineering studies; surveys; subsurface investigations; and soils studies that do not commit the agency to undertake, fund or approve any Type I or Unlisted action"); and (27) ("conducting concurrent environmental, engineering, economic, feasibility and other studies and preliminary planning and budgetary processes necessary to the formulation of a proposal for action, provided those activities do not commit the agency to commence, engage in or approve such action") and is not subject to further review under the State Environmental Quality Review Act.

Funding for these services, consistent with authorized uses, is included in various capital fund(s) and any capital fund(s) created for the same intended purpose. No additional net County support is required in the current Monroe County budget.

The records in the Office of the Monroe County Treasury have indicated that neither Whitestone Associates Engineering & Geology NY, PLLC, nor any of its principal officers, owe any delinquent Monroe County property taxes. The principal officers of the firm are:

Thomas K. Uzzo, President and CEO
Ryan R. Roy, Vice President
Charles B. Guzzetta, Regional Manager

I recommend that this matter be referred to the appropriate committee(s) for favorable action by Your Honorable Body.

Sincerely,

Adam J. Bello
Monroe County Executive

Office of **the County Executive**

Monroe County, New York

Adam J. Bello
County Executive

OFFICIAL FILE COPY
No. 260365
Not to be removed from the Office of the Legislature Of Monroe County
Committee Assignment
PWAB -L

November 6, 2026

To The Administrative Boards of the
Gates-Chili-Ogden Sewer District
Irondequoit Bay South Central Pure Waters District
Northwest Quadrant Pure Waters District
Rochester Pure Waters District
407 County Office Building
Rochester, New York 14614

Subject: Authorize a Contract with Whitestone Associates Engineering & Geology NY, PLLC for Construction Material Testing Term Services

Honorable Legislators:

I recommend that the Administrative Boards of the Gates-Chili-Ogden Sewer District, Irondequoit Bay South Central Pure Waters District, Northwest Quadrant Pure Waters District, and the Rochester Pure Waters District authorize a contract with Whitestone Associates Engineering & Geology NY, PLLC for construction material testing term services for a total annual amount not to exceed $300,000 for the period of January 1, 2027 through December 31, 2027, with the option to renew for two (2) additional one-year extensions, with escalations for the extensions to be limited to an amount equal to the increase in the previous year's Consumer Price Index (U.S. City Average CPI-U from the Bureau of Labor Statistics).

This contract will provide Monroe County with material testing and inspection services when it is necessary to determine either the quality of the work being performed, such as for the placement of concrete, or subsurface soil conditions. The contract establishes an agreed upon rate for a variety of material testing and inspection services so that when services are required, the Districts are assured of a timely response to projects. These services will be made available to all County departments.

A Request for Proposals was issued with Whitestone Associates Engineering & Geology NY, PLLC selected the most qualified to provide these services.

The specific Administrative Boards action required is to authorize the County Executive, or his designee, to execute a contract, and amendments thereto, with Whitestone Associates Engineering & Geology NY, PLLC, 500 Canal View Boulevard, Suite 700, Rochester, New York 14623 for construction material testing term services for a total annual amount not to exceed $300,000 for the period of January 1, 2027 through December 31, 2027, with the option to renew for two (2) additional one-year extensions, with escalations for the extensions to be limited to an amount equal to the increase in the previous year's Consumer Price Index (U.S. City Average CPI-U from the Bureau of Labor Statistics).

This action is a Type II Action pursuant to 6 NYCRR § 617.5(c) (1) ("maintenance or repair involving no substantial changes in an existing structure or facility"); (2) ("replacement, rehabilitation or reconstruction of a structure or facility, in kind, on the same site, including upgrading buildings to meet building, energy, or fire codes unless such action meets or exceeds any of the thresholds in section 617.4 of this Part"); (24) "information collection, including basic data collection and research; water quality and pollution studies, traffic counts, engineering studies; surveys; subsurface investigations; and soils studies that do not commit the agency to undertake, fund or approve any Type I or Unlisted action"); and (27) ("conducting concurrent environmental, engineering, economic, feasibility and other studies and preliminary planning and budgetary processes necessary to the formulation of a proposal for action, provided those activities do not commit the agency to commence, engage in or approve such action") and is not subject to further review under the State Environmental Quality Review Act.

Funding for these services, consistent with authorized uses, is included in various capital fund(s) and any capital fund(s) created for the same intended purpose. No additional net County support is required in the current Monroe County budget.

The records in the Office of the Monroe County Treasury have indicated that neither Whitestone Associates Engineering & Geology NY, PLLC, nor any of its principal officers, owe any delinquent Monroe County property taxes. The principal officers of the firm are:

Thomas K. Uzzo, President and CEO
Ryan R. Roy, Vice President
Charles B. Guzzetta, Regional Manager

I recommend that this matter receive favorable action by the Administrative Boards of the Gates-Chili-Ogden Sewer District, Irondequoit Bay South Central Pure Waters District, Northwest Quadrant Pure Waters District and the Rochester Pure Waters District.

Sincerely,

Adam J. Bello
Monroe County Executive

Office of **the County Executive**

Monroe County, New York

Adam J. Bello
County Executive

OFFICIAL FILE COPY
No. 260366
Not to be removed from the Office of the Legislature Of Monroe County
Committee Assignment
ENV. & PUB. WORKS -L
WAYS & MEANS

November 6, 2026

To The Honorable
Monroe County Legislature
407 County Office Building
Rochester, New York 14614

Subject: Acceptance of Grants from the New York State Department of Environmental Conservation Municipal Zero-Emission Vehicle Infrastructure Grant Program and the Municipal Zero-Emission Vehicle Rebate Program

Honorable Legislators:

I recommend that Your Honorable Body accept five (5) grants from the New York State Department of Environmental Conservation ("DEC") in the total amount of $500,000 for the Zero Emission Vehicle ("ZEV") Infrastructure Project; and one (1) rebate totaling $7,500 under the DEC Municipal ZEV Rebate Program.

Monroe County was awarded these grants as part of an initiative by the DEC to increase the number of ZEVs on the road by installing electric vehicle charging stations throughout the State.

The program, led by the Monroe County Department of Environmental Services, will involve installing ZEV Charging Stations at various County facilities for use by both the County and the public. The grants require that the stations be Level 2 Charging Stations, which provides a full-vehicle charge in eight (8) hours. Dual charging stations will be installed at the following five (5) sites: Ontario Beach Park, Genesee Valley Park, Churchville Park, Greece Canal Park, and Northampton Park. This is the third time the County has received these grants.

The Municipal ZEV Rebate Program awards funding to municipalities for the purchase or lease of ZEVs for municipal fleets. The $7,500 rebate has been awarded to Monroe County for the purchase of one ZEV, a Chevrolet EV Equinox, added to the fleet in July 2025.

The specific legislative actions required are:

1. Authorize the County Executive, or his designee, to accept five (5) grants in the total amount of $500,000 from the New York State Department of Environmental Conservation Municipal Zero-Emission Vehicle Infrastructure Project.

2. Authorize the County Executive, or his designee, to accept a rebate in the amount of $7,500, from the New York State Department of Environmental Conservation Municipal Zero-Emission Vehicle Rebate Program.

3. Amend the 2026 operating budget of the Department of Environmental Services by appropriating the sum of $500,000 into grant fund 1301, cost center 830102 Climate Initiatives.

4. Authorize the County Executive to appropriate any subsequent years of the grant awards in accordance with the grant terms, to reappropriate any unencumbered balances during the grant period according to the grantor requirements, to make any necessary funding modifications within the grant guidelines to meet contractual commitments, and to enter into any amendments to extend the time period of the grant.

5. Should funding of this program be modified or terminated for any reason, the County Executive is hereby authorized to terminate or modify the program and, where applicable, to terminate or abolish some or all positions funded under such program. Any termination or abolishment of positions shall be in accordance with New York State Civil Service Law and, when applicable, the terms of any labor agreement affecting such positions.

This action is a Type II Action pursuant to 6 NYCRR § 617.5(c)(24) ("information collection including basic data collection and research, water quality and pollution studies, traffic counts, engineering studies, surveys, subsurface investigations and soils studies that do not commit the agency to undertake, fund or approve any Type I or Unlisted action") and (26) ("routine or continuing agency administration and management, not including new programs or major reordering of priorities that may affect the environment") and is not subject to further review under the State Environmental Quality Review Act.

Three (3) of these grants, for installation in Ontario Beach Park, Genesee Valley Park, and Greece Canal Park, are located in New York State Designated Disadvantaged Communities and require no matching funds. Two (2) of these grants, for installations at Churchville Park and Northampton Park, require a 10% local match.

Funding for EV charging station installation is included in the 2026 operating budget of the Department of Environmental Services, grant fund 1301, cost center 830102, Climate Initiatives. No additional net County support is required in the current Monroe County budget.

I recommend that this matter be referred to the appropriate committee(s) for favorable action by Your Honorable Body.

Sincerely,

Adam J. Bello
Monroe County Executive

Office of **the County Executive**

Monroe County, New York

Adam J. Bello
County Executive

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Committee Assignment
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November 6, 2026

To The Honorable
Monroe County Legislature
407 County Office Building
Rochester, New York 14614

Subject: Authorize Contracts with C&S Engineers, Inc., CHA Consulting, Inc., McFarland Johnson, Inc., and Passero Associates, Engineering, Architecture & Surveying, P.C. for Airport Consulting Services for the Frederick Douglass Greater Rochester International Airport

Honorable Legislators:

I recommend that Your Honorable Body authorize contracts with C&S Engineers, Inc., CHA Consulting, Inc., McFarland Johnson, Inc., and Passero Associates, Engineering, Architecture & Surveying, P.C. for airport consulting services for projects related to the Frederick Douglass Greater Rochester International Airport ("FDGRIA") for the period of January 1, 2027 through December 31, 2027, with the option to renew for two (2) additional one-year periods.

The airport consultants will assist the County in obtaining Federal Aviation Administration and State funds for projects related to the FDGRIA. The consultants will perform services on a per project basis for the design and construction of projects for which funding is secured, subject to the negotiation of acceptable design fees. The FDGRIA additionally has a frequent need for professional design services as operations change inside the terminal, on the airfield, and at related adjacent and nearby properties.

A Request for Proposals was issued with C&S Engineers, Inc., CHA Consulting, Inc., McFarland Johnson, Inc., and Passero Associates, Engineering, Architecture & Surveying, P.C. selected as the most qualified for this project.

The specific legislative action required is to authorize the County Executive, or his designee, to execute contracts with C&S Engineers, Inc., 100 S. Clinton Avenue, Suite 2700, Rochester, New York 14604; CHA Consulting, Inc., 100 Chestnut Street, Suite 1300, Rochester, New York 14604; McFarland Johnson, Inc., 15 Fishers Road, Suite 200, Pittsford, New York 14534; and Passero Associates Engineering, Architecture and Surveying, DPC, 242 W. Main Street, Suite 100, Rochester, New York 14614 for airport consulting services for the period of January 1, 2027 through December 31, 2027, with the option to renew for two (2) additional one-year periods.

This action is a Type II Action pursuant to 6 NYCRR § 617.5(c) (1) ("maintenance or repair involving no substantial changes in an existing structure or facility"); (2) ("replacement, rehabilitation or reconstruction of a structure or facility, in kind, on the same site, including upgrading buildings to meet building, energy, or fire codes unless such action meets or exceeds any of the thresholds in section 617.4 of this Part"); (24) ("information collection, including basic data collection and research; water quality and pollution studies, traffic counts, engineering studies; surveys; subsurface investigations; and soils studies that do not commit the agency to undertake, fund or approve any Type I or Unlisted action"); and (27) ("conducting concurrent environmental, engineering, economic, feasibility and other studies and preliminary planning and budgetary processes necessary to the formulation of a proposal for action, provided those activities do not commit the agency to commence, engage in or approve such action") and is not subject to further review under the State Environmental Quality Review Act.

Funding for these contracts, consistent with authorized uses, is included in the capital funds established for specific projects or from Monroe County Airport Authority accounts as authorized by the Monroe County Airport Authority. No additional net county support is required in the current Monroe County budget.

The records in the Office of the Monroe County Treasury have indicated that neither C&S Engineers, Inc., CHA Consulting, Inc., McFarland Johnson, Inc., and Passero Associates, Engineering, Architecture & Surveying, P.C., nor any of their principal officers, owe any delinquent Monroe County property taxes. The principal officers of the firms are:

C&S Engineers, Inc.
Aileen Maguire Meyer, President
R. Nicholas McLaughlin, Principal in Charge
Seth Kaeuper, Transportation Practice Lead

CHA Consulting, Inc.
Phil Stevens, Sector President, Infrastructure
Michael DeVoy, Senior Vice President / Principal-in-Charge
Todd Ewell, Associate Vice President

McFarland Johnson, Inc.
Chad Nixon, President & Chairman of the Board
Tom Kendrick, Chief Executive Officer of Engineering
Jeffrey Wood, Vice President / Principal-in-Charge

Passero Associates Engineering, Architecture and Surveying, DPC
Brad Wente, President
Andrew Holesko, Vice President
Lisa Cheung, Associate

I recommend that this matter be referred to the appropriate committee(s) for favorable action by Your Honorable Body.

Sincerely,

Adam J. Bello
Monroe County Executive

Office of **the County Executive**

Monroe County, New York

Adam J. Bello
County Executive

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Committee Assignment
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November 6, 2026

To The Honorable
Monroe County Legislature
407 County Office Building
Rochester, New York 14614

Subject: Authorize Contracts with Environmental Design & Research, Landscape Architecture, Engineering & Environmental Services, D.P.C.; MRB Group Engineering, Architecture & Surveying, D.P.C.; Passero Associates, Engineering, Architecture & Surveying, P.C.; and T.Y. Lin International Engineering & Architecture, P.C. for Parks Architectural and Engineering Term Services

Honorable Legislators:

I recommend that Your Honorable Body authorize contracts with Environmental Design & Research, Landscape Architecture, Engineering & Environmental Services, D.P.C.; MRB Group Engineering, Architecture & Surveying, D.P.C.; Passero Associates, Engineering, Architecture & Surveying, P.C.; and T.Y. Lin International Engineering & Architecture, P.C. for a total aggregate amount not to exceed $650,000 for architectural and engineering term services for the Monroe County Parks Department for the period of January 1, 2027 through December 31, 2027, with the option to renew for two (2) additional one-year extensions, with escalations for the extensions to be limited to an amount equal to the increase in the previous year's Consumer Price Index (U.S. City Average CPI-U from the Bureau of Labor Statistics).

The Monroe County Parks Department is responsible for operation of, maintenance of, and improvements to 21 parks compromising nearly 12,000 acres of land, three public golf courses, and the Seneca Park Zoo. These contracts will provide architectural and engineering term services for small-scale projects as well as those Parks Departments projects requiring prompt turn-around. Specific services include interior and exterior architectural design and layout, mechanical, electrical, and plumbing design, civil site and structural engineering, and construction observation.

The specific legislative action required is to authorize the County Executive, or his designee, to execute contracts, and any amendments thereto, with Environmental Design & Research, Landscape Architecture, Engineering & Environmental Services, D.P.C., 274 North Goodman Street, Rochester, New York 14607; MRB Group Engineering, Architecture & Surveying, D.P.C., 145 Culver Road, Suite 160. Rochester, New York 14620; Passero Associates, Engineering, Architecture & Surveying, P.C., 242 West Main Street, Suite 100, Rochester, New York 14614; and T.Y. Lin International Engineering & Architecture, P.C., 255 East Avenue, Rochester, New York 14604 for architectural and engineering term services for the Monroe County Parks Department for a total aggregate amount not to exceed $650,000 for the period of January 1, 2027 through December 31, 2027, with the option to renew for two (2) additional one-year extensions, with escalations for the extensions to be limited to an amount equal to the increase in the previous year's Consumer Price Index (U.S. City Average CPI-U from the Bureau of Labor Statistics).

This action is a Type II Action pursuant to 6 NYCRR § 617.5(c)(2) ("replacement, rehabilitation or reconstruction of a structure or facility, in kind, on the same site, including upgrading buildings to meet building, energy, or fire codes unless such action meets or exceeds any of the thresholds in section 617.4 of this Part"); (26) ("routine or continuing agency administration and management, not including new programs or major reordering of priorities that may affect the environment"); and (27) ("conducting concurrent environmental, engineering, economic, feasibility and other studies and preliminary planning and budgetary processes necessary to the formulation of a proposal for action, provided those activities do not commit the agency to commence, engage in or approve such action") and is not subject to further review under the State Environmental Quality Review Act.

Funding for these contracts, consistent with authorized uses, is included in various capital funds and any capital fund(s) created for the same intended purpose. No additional net County support is required in the current Monroe County budget.

The records in the Office of the Monroe County Treasury have indicated that neither Environmental Design & Research, Landscape Architecture, Engineering & Environmental Services, D.P.C.; MRB Group Engineering, Architecture & Surveying, D.P.C.; Passero Associates, Engineering, Architecture & Surveying, P.C.; and T.Y. Lin International Engineering & Architecture, P.C., nor any of their principal officers, owe any delinquent Monroe County property taxes. The principal officers of the firms are:

Environmental Design & Research, Landscape Architecture, Engineering & Environmental Services, D.P.C.
Jo Anne C. Falco, President / Principal-in-Charge
Sam Gordon, Planning Practice Leader

MRB Group Engineering, Architecture & Surveying, D.P.C
Ryan Colvin, President / CEO
Gregory J. Hotaling, Principal
Alan Guidera, Architecture National Director

Passero Associates Engineering, Architecture and Surveying, DPC
Brad Wente, President
Andrew Holesko, Vice President
Patrick Williams, Vice President / Northeast Director

T.Y. Lin International Engineering & Architecture, P.C.
Michael Hope, Senior Vice President
Brent Sevcik, Principal Architect
Rohit Aggarwal, Architecture Group Leader
Michael Shamma, Senior Vice President

I recommend that this matter be referred to the appropriate committee(s) favorable action by Your Honorable Body.

Sincerely,

Adam J. Bello
Monroe County Executive

Office of **the County Executive**

Monroe County, New York

Adam J. Bello
County Executive

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November 6, 2026

To The Honorable
Monroe County Legislature
407 County Office Building
Rochester, New York 14614

Subject: Authorize Monroe County to Submit Funding Applications to Federal, State, and/or Not-for-Profit Funding Assistance Programs

Honorable Legislators:

I recommend that Your Honorable Body authorize Monroe County to submit funding applications to federal, state, and/or not-for-profit corporations, including but not limited to the annual Consolidated Funding Application, the New York State Environmental Facilities Corporation, the United States Environmental Protection Agency, and other state and federal agencies and not-for-profit corporations for various projects in calendar year 2027.

Any projects that qualify and are selected for funding will be referred to Your Honorable Body for approval.

The specific legislative action required is to authorize the County Executive, or his designee, to submit funding applications to federal, state, and/or not-for-profit corporations for various projects in calendar year 2027.

This action is a Type II Action pursuant to 6 NYCRR § 617.5(c)(27) ("conducting concurrent environmental, engineering, economic, feasibility and other studies and preliminary planning and budgetary processes necessary to the formulation of a proposal for action, provided those activities do not commit the agency to commence, engage in or approve such action") and is not subject to further review under the State Environmental Quality Review Act.

No net County support is required in the current Monroe County budget.

I recommend that this matter be referred to the appropriate committee(s) for favorable action by Your Honorable Body.

Sincerely,

Adam J. Bello
Monroe County Executive

110 County Office Building • 39 West Main Street • Rochester, New York 14614
(585) 753-1000 • *fax:* (585) 753-1014 • *www.monroecounty.gov* • *e-mail:* countyexecutive@monroecounty.gov

Office of **the County Executive**

Monroe County, New York

Adam J. Bello
County Executive

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November 6, 2026

To The Honorable
Monroe County Legislature
407 County Office Building
Rochester, New York 14614

Subject: Amend the 2026 Capital Budget and Resolution 365 of 2025 to Increase Funding for the Project Entitled "Northeast Quadrant (Gloria Drive) Landfill Improvements" Project

Honorable Legislators:

I recommend that Your Honorable Body amend the 2026 Capital Budget and Resolution 365 of 2025 to increase funding for the project entitled "Northeast Quadrant (Gloria Drive) Landfill Improvements" in the amount of $8,000,000.

Monroe County is responsible for managing the inactive former Northeast Quadrant (Gloria Drive) Landfill in the Town of Penfield. The County has taken proactive steps for the design and installation of a cap to mitigate the impacts of precipitation on the landfill and minimize fugitive landfill gas emissions.

Your Honorable Body approved funding for the Project by Resolution 365 of 2025 as a result of superseding Resolution 382 of 2024 for improvements for the project in the amount of $10,000,000. The engineering team has advanced the design to the point where an updated opinion of probable cost has been developed, while accounting for the current volatile bidding environment and construction escalation. This results in the need to increase the total bonding authorization for the project in the amount of $8,000,000, from $10,000,000 to $18,000,000. Construction is expected to commence in the first quarter 2027 and be complete in the fourth quarter 2028.

The specific legislative actions required are:

1. Amend the 2026 Capital Budget to increase funding for the project entitled "Northeast Quadrant (Gloria Drive) Landfill Improvements" project in the amount of $8,000,000.

2. Amend Bond Resolution 365 of 2025 to increase financing for the "Northeast Quadrant (Gloria Drive) Landfill Improvements" project, capital fund 2122, in the amount of $8,000,000, from $10,000,000 to $18,000,000, for a total project authorization of $18,000,000.

This action is a Type I Action under the New York State Environmental Quality Review Act ("SEQRA"). Pursuant to Resolution 342 of 2025 the Monroe County Legislature issued a Negative Declaration for this action. No further action under SEQRA is required.

Funding for this project, consistent with authorized uses, will be available in capital project 519 once the additional financing authorization requested herein is approved, and in any capital fund(s) created for the same intended purpose. No additional net County support is required in the current Monroe County budget.

I recommend that this matter be referred to the appropriate committee(s) for favorable action by Your Honorable Body.

Sincerely,

Adam J. Bello
Monroe County Executive

Office of **the County Executive**

Monroe County, New York

Adam J. Bello
County Executive

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November 6, 2026

To The Honorable
Monroe County Legislature
407 County Office Building
Rochester, New York 14614

Subject: Classification of Action and Determination of Significance Pursuant to the State Environmental Quality Review Act to Adopt the Monroe County Comprehensive Plan Entitled "Plan Forward, a Comprehensive Plan for Monroe County"

Honorable Legislators:

I recommend that Your Honorable Body determine whether the adoption of "Plan Forward, a Comprehensive Plan for Monroe County" ("Plan Forward") may have a significant adverse impact on the environment pursuant to the State Environmental Quality Review Act ("SEQRA").

The proposed action consists of the adoption of Plan Forward, which establishes a long-term vision, goals, and strategies to guide Monroe County's growth, investment, and decision-making over the next decade. The purpose of the plan is to promote coordinated and sustainable development countywide by addressing economic and workforce development, infrastructure, public health, and public safety through a framework of policies and implementation strategies. The plan seeks to improve housing availability and affordability, strengthen transportation and utility infrastructure, support economic competitiveness and workforce development, protect natural resources and water quality, expand broadband and multimodal transportation access, enhance public health and community well-being, and improve emergency preparedness and public safety.

Plan Forward does not commit Monroe County, any municipality in Monroe County, or any other stakeholder to undertake, fund, or approve any specific actions, policies, or projects identified in the Plan. Monroe County does not have regulatory authority to implement any land use control measures. The adoption of Plan Forward also does not constitute approval of any construction project or environmental disturbance activity within Monroe County.

Adopting "Plan Forward, a Comprehensive Plan for Monroe County" has been preliminarily classified as a Type I Action. The SEQRA regulations found at 6 NYCRR Part 617 requires that no agency shall carry out or approve an Action until it has complied with the requirements of SEQRA.

The specific legislative actions required are:

1. Determine that adopting "Plan Forward, a Comprehensive Plan for Monroe County" is a Type I action.

2. Make a determination of significance regarding adopting "Plan Forward, a Comprehensive Plan for Monroe County" pursuant to 6 NYCRR 617.7.

3. Authorize the County Executive, or his designee, to take such actions to comply with the requirements of the State Environmental Quality Review Act, including without limitation, the execution of documents and the filing, distribution and publication of the documents required under the State Environmental Quality Review Act, and any other actions to implement the intent of this resolution.

This determination will have no impact on the revenues or expenditures of the current Monroe County budget.

I recommend that this matter be referred to the appropriate committee(s) for favorable action by Your Honorable Body.

Sincerely,

Adam J. Bello
Monroe County Executive

Full Environmental Assessment Form
Part 1 - Project and Setting

Instructions for Completing Part 1

Part 1 is to be completed by the applicant or project sponsor. Responses become part of the application for approval or funding, are subject to public review, and may be subject to further verification.

Complete Part 1 based on information currently available. If additional research or investigation would be needed to fully respond to any item, please answer as thoroughly as possible based on current information; indicate whether missing information does not exist, or is not reasonably available to the sponsor; and, when possible, generally describe work or studies that would be necessary to update or fully develop that information.

Applicants/sponsors must complete all items in Sections A & B. In Sections C, D & E, most items contain an initial question that must be answered either "Yes" or "No." If the answer to the initial question is "Yes," complete the following sub-questions. If the answer to the initial question is "No," proceed to the next question. Section F allows the project sponsor to identify and attach additional information. Section G requires the name and signature of the applicant or project sponsor to verify the information in Part 1 is accurate and complete.

A. Project and Applicant/Sponsor Information.

Name of Action or Project: Monroe County Comprehensive Plan		
Project Location (describe and attach a general location map): Monroe County, NY		
Brief Description of Proposed Action (include purpose or need): The proposed action consists of the adoption and implementation of Plan Forward, a comprehensive plan for Monroe County, New York, which establishes a long-term vision, goals, and strategies to guide Monroe County's growth, investment, and decision-making over the next decade. The purpose of the plan is to promote coordinated and sustainable development countywide by addressing economic and workforce development, infrastructure, public health, and public safety through a framework of policies and implementation strategies. The plan seeks to improve housing availability and affordability, strengthen transportation and utility infrastructure, support economic competitiveness and workforce development, protect natural resources and water quality, expand broadband and multimodal transportation access, enhance public health and community well-being, and improve emergency preparedness and public safety. The comprehensive plan is intended to serve as a countywide policy guide that coordinates future public and private actions, supports intermunicipal collaboration, and advances Monroe County's resilience, sustainability, and quality of life.		
Name of Applicant/Sponsor: Monroe County	Telephone: 585-753-2000 E-Mail:	
Address: 39 West Main Street		
City/PO: Rochester	State: NY	Zip Code: 14614
Project Contact (if not same as sponsor; give name and title/role): Steven Olufsen, Senior Planner	Telephone: 585-753-2027 E-Mail: solufsen@monroecounty.gov	
Address: 50 West Main Street		
City/PO: Rochester	State: NY	Zip Code: 14614
Property Owner (if not same as sponsor):	Telephone: E-Mail:	
Address:		
City/PO:	State:	Zip Code:

d. Is the proposed action in a municipality with an adopted comprehensive or individual plan that addresses climate change? ☑ Yes ☐ No

If Yes , identify the elements of the plan that are relevant to the action:

Please see attached supplemental information sheet.

C.3. Zoning

a. Is the site of the proposed action located in a municipality with an adopted zoning law or ordinance? ☑ Yes ☐ No
If Yes, what is the zoning classification(s) including any applicable overlay district?

All communities in Monroe County have zoning in place, which is adopted locally. Monroe County and the plan does not establish, amend, or otherwise impact local zoning.

b. Is the use permitted or allowed by a special or conditional use permit? ☐ Yes ☑ No

c. Is a zoning change requested as part of the proposed action? ☐ Yes ☑ No
If Yes, what is the proposed new zoning for the site?

C.4. Existing community services.

a. In what school district is the project site located? There are 21 public school districts serving Monroe County.

b. What police or other public protection forces serve the project site?

Monroe County Sheriff's Office, Rochester Police Department, Brighton Police Department, Gates Police Department, Greece Police Department, Irondequoit Police Department, Ogden Police Department, Webster Police Department, and Wheatland Police Department

c. Which fire protection and emergency medical services serve the project site?

Monroe County is served by a coordinated network of over 70 local volunteer and career fire departments, regional emergency medical services (EMS), and a centralized 911 dispatch system

d. What parks serve the project site?

The Monroe County Parks Department manages a regional system of 22 parks covering over 12,000 acres of natural landscapes, historic grounds, and recreational facilities. There are 3,700 acres of NYS Parkland and over 5,000 acres of municipally-owned parks.

D. Project Details

D.1. Proposed and Potential Development

a. What is the general nature of the proposed action (e.g., residential, industrial, commercial, recreational; if mixed, include all components)?

_____

b. a. Total acreage of the site of the proposed action? _____ acres
b. Total acreage to be physically disturbed? _____ acres
c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor? _____ acres

c. Is the proposed action an expansion of an existing project or use? ☐ Yes ☐ No
If Yes, what is the approximate percentage of the proposed expansion and identify the units (e.g., acres, miles, housing units, square feet)? %_____ Units: _____

d. Is the proposed action a subdivision, or does it include a subdivision? ☐ Yes ☐ No
If Yes,
i. Purpose or type of subdivision? (e.g., residential, industrial, commercial; if mixed, specify types)

_____

ii. Is a cluster/conservation layout proposed? ☐ Yes ☐ No
iii. Number of lots proposed? _____
iv. Minimum and maximum proposed lot sizes? Minimum_____Maximum _____

e. Will the proposed action be constructed in multiple phases? ☐ Yes ☐ No

i. If No, anticipated period of construction: _____ months

ii. If Yes:

- Total number of phases anticipated _____
- Anticipated commencement date of phase 1 (including demolition) _____ month_____year
- Anticipated completion date of final phase _____ month_____year
- Generally describe connections or relationships among phases, including any contingencies where progress of one phase may determine timing or duration of future phases: _____

f. Does the project include new residential uses? ☐ Yes ☐ No

If Yes, show numbers of units proposed.

	One Family	Two Family	Three Family	Multiple Family (four or more)
Initial Phase	_____	_____	_____	_____
At completion of all phases	_____	_____	_____	_____

g. Does the proposed action include new non-residential construction (including expansions)? ☐ Yes ☐ No

If Yes,

i. Total number of structures _____

ii. Dimensions (in feet) of largest proposed structure:_____height;_____width; and_____length

iii. Approximate extent of building space to be heated or cooled:_____square feet

h. Does the proposed action include construction or other activities that will result in the impoundment of any liquids, such as creation of a water supply, reservoir, pond, lake, waste lagoon or other storage? ☐ Yes ☐ No

If Yes,

i. Purpose of the impoundment: _____

ii. If a water impoundment, the principal source of the water: ☐ Ground water ☐ Surface water streams ☐ Other specify:

_____

iii. If other than water, identify the type of impounded/contained liquids and their source.

_____

iv. Approximate size of the proposed impoundment. Volume:_____million gallons; surface area:_____acres

v. Dimensions of the proposed dam or impounding structure: _____ height;_____length

vi. Construction method/materials for the proposed dam or impounding structure (e.g., earth fill, rock, wood, concrete):

D.2. Project Operations

a. Does the proposed action include any excavation, mining, or dredging, during construction, operations, or both? (Not including general site preparation, grading or installation of utilities or foundations where all excavated materials will remain onsite) ☐ Yes ☐ No

If Yes:

i. What is the purpose of the excavation or dredging? _____

ii. How much material (including rock, earth, sediments, etc.) is proposed to be removed from the site?

- Volume (specify tons or cubic yards): _____
- Over what duration of time? _____

iii. Describe nature and characteristics of materials to be excavated or dredged, and plans to use, manage or dispose of them.

iv. Will there be onsite dewatering or processing of excavated materials? ☐ Yes ☐ No

If yes, describe.

_____

v. What is the total area to be dredged or excavated?_____acres

vi. What is the maximum area to be worked at any one time?_____acres

vii. What would be the maximum depth of excavation or dredging?_____feet

viii. Will the excavation require blasting? ☐ Yes ☐ No

ix. Summarize site reclamation goals and plan: _____

b. Would the proposed action cause or result in alteration of, increase or decrease in size of, or encroachment into any existing wetland, waterbody, shoreline, beach or adjacent area? ☐ Yes ☐ No

If Yes:

i. Identify the wetland or waterbody which would be affected (by name, water index number, wetland map number or geographic description):

ii. Describe how the proposed action would affect that waterbody or wetland, e.g., excavation, fill, placement of structures, or alteration of channels, banks, and shorelines. Indicate extent of activities, alterations and additions in square feet or acres:

iii. Will the proposed action cause or result in disturbance to bottom sediments? ☐ Yes ☐ No

If Yes, describe: _____

iv. Will the proposed action cause or result in the destruction or removal of aquatic vegetation? ☐ Yes ☐ No

If Yes:

- acres of aquatic vegetation proposed to be removed: _____
- expected acreage of aquatic vegetation remaining after project completion: _____
- purpose of proposed removal (e.g. beach clearing, invasive species control, boat access): _____
- proposed method of plant removal: _____
- if chemical/herbicide treatment will be used, specify product(s): _____

v. Describe any proposed reclamation/mitigation following disturbance: _____

c. Will the proposed action use, or create a new demand for water? ☐ Yes ☐ No

If Yes:

i. Total anticipated water usage/demand per day: _____ gallons/day

ii. Will the proposed action obtain water from an existing public water supply? ☐ Yes ☐ No

If Yes:

- Name of district or service area: _____
- Does the existing public water supply have capacity to serve the proposal? ☐ Yes ☐ No
- Is the project site in the existing district? ☐ Yes ☐ No
- Is expansion of the district needed? ☐ Yes ☐ No
- Do existing lines serve the project site? ☐ Yes ☐ No

iii. Will line extension within an existing district be necessary to supply the project? ☐ Yes ☐ No

If Yes:

- Describe extensions or capacity expansions proposed to serve this project: _____
- Source(s) of supply for the district: _____

iv. Is a new water supply district or service area proposed to be formed to serve the project site? ☐ Yes ☐ No

If, Yes:

- Applicant/sponsor for new district: _____
- Date application submitted or anticipated: _____
- Proposed source(s) of supply for new district: _____

v. If a public water supply will not be used, describe plans to provide water supply for the project: _____

vi. If water supply will be from wells (public or private), what is the maximum pumping capacity: _____ gallons/minute.

d. Will the proposed action generate liquid wastes? ☐ Yes ☐ No

If Yes:

i. Total anticipated liquid waste generation per day:_____gallons/day

ii. Nature of liquid wastes to be generated (e.g., sanitary wastewater, industrial; if combination, describe all components and approximate volumes or proportions of each): _____

iii. Will the proposed action use any existing public wastewater treatment facilities? ☐ Yes ☐ No

If Yes:

- Name of wastewater treatment plant to be used: _____
- Name of district: _____
- Does the existing wastewater treatment plant have capacity to serve the project? ☐ Yes ☐ No
- Is the project site in the existing district? ☐ Yes ☐ No
- Is expansion of the district needed? ☐ Yes ☐ No

- Do existing sewer lines serve the project site? ☐ Yes ☐ No
- Will a line extension within an existing district be necessary to serve the project? ☐ Yes ☐ No

If Yes:

- Describe extensions or capacity expansions proposed to serve this project: _____

iv. Will a new wastewater (sewage) treatment district be formed to serve the project site? ☐ Yes ☐ No

If Yes:

- Applicant/sponsor for new district: _____
- Date application submitted or anticipated: _____
- What is the receiving water for the wastewater discharge? _____

v. If public facilities will not be used, describe plans to provide wastewater treatment for the project, including specifying proposed receiving water (name and classification if surface discharge or describe subsurface disposal plans):

_____

vi. Describe any plans or designs to capture, recycle or reuse liquid waste: _____

e. Will the proposed action disturb more than one acre and create stormwater runoff, either from new point sources (i.e. ditches, pipes, swales, curbs, gutters or other concentrated flows of stormwater) or non-point source (i.e., sheet flow) during construction or post construction? ☐ Yes ☐ No

If Yes:

i. How much impervious surface will the project create in relation to total size of project parcel?

_____ Square feet or_____acres (impervious surface)

_____ Square feet or_____acres (parcel size)

ii. Describe types of new point sources.

_____

iii. Where will the stormwater runoff be directed (i.e. on-site stormwater management facility/structures, adjacent properties, groundwater, on-site surface water, or off-site surface waters)?

_____

- If to surface waters, identify receiving water bodies or wetlands: _____

_____

- Will stormwater runoff flow to adjacent properties? ☐ Yes ☐ No

iv. Does the proposed plan minimize impervious surfaces, use pervious materials or collect and re-use stormwater? ☐ Yes ☐ No

f. Does the proposed action include, or will it use on-site, one or more sources of air emissions, including fuel combustion, waste incineration, or other processes or operations? ☐ Yes ☐ No

If Yes, identify:

i. Mobile sources during project operations (e.g., heavy equipment, fleet or delivery vehicles)

ii. Stationary sources during construction (e.g., power generation, structural heating, batch plant, crushers)

iii. Stationary sources during operations (e.g., process emissions, boilers, electric generation, surface coating)

g. Will any air emission sources named in D.2.f (above), require an Air Facility Registration, Air State Facility Permit, Title IV Permit or Title V Permit? ☐ Yes ☐ No

If Yes:

i. Is the proposed action subject to the Nonattainment New Source Review or Prevention of Significant Deterioration requirements discussed in 6 NYCRR Part 231? ☐ Yes ☐ No

ii. As calculated in the air permit application, the proposed action has the potential to emit:

- _____Tons/year (short tons) of carbon monoxide (CO)
- _____Tons/year (short tons) of oxides of nitrogen (NOx)
- _____Tons/year (short tons) of particulate matter (PM-10, PM-2.5)
- _____Tons/year (short tons) of volatile organic compounds (VOC)
- _____Tons/year (short tons) of sulfur dioxide (SO_2)

iii. Will emissions of air contaminants from the proposed action described above exceed the corresponding major source thresholds? ☐ Yes ☐ No

iv. Does the proposed action have the potential to emit 10 tons/year or more of any one designated hazardous air pollutant or 25 tons/year or more of any combination of such hazardous air pollutants (6NYCRR 200.1(ag))? ☐ Yes ☐ No

If Yes, provide the total potential to emit hazardous air pollutants in short tons/year: _____

h. Will the proposed action generate or emit annual direct and indirect greenhouse gas emissions, such as carbon dioxide, methane, nitrous oxide, sulfur hexafluoride, hydrofluorocarbons, or perfluorocarbons in excess of 10,000 metric tons of total carbon dioxide equivalents per year at any point in the lifetime of the proposed action (estimated using the carbon dioxide equivalent definition and global warming potentials provided in 6 NYCRR Part 496)? ☐ Yes ☐ No

If Yes:

i. Estimate the proposed action's metric tons of carbon dioxide equivalents in tons/year (metric): _____

ii. Describe any greenhouse gas capture, control, or elimination measures included in project design: _____

i. Will the proposed action result in the release of air pollutants from open-air operations or processes, such as quarry or landfill operations? ☐ Yes ☐ No

If Yes: Describe operations and nature of emissions (e.g., diesel exhaust, rock particulates/dust):

j. Will the proposed action result in a substantial increase in traffic above present levels or generate substantial new demand for transportation facilities or services? ☐ Yes ☐ No

If Yes:

i. When is the peak traffic expected (Check all that apply): ☐ Morning ☐ Evening ☐ Weekend

Randomly between hours of_____to_____.

ii. For commercial activities only, projected number of truck trips/day and type (e.g., semi trailers and dump trucks):

iii. Parking spaces: Existing_____Proposed_____Net increase/decrease _____

iv. Does the proposed action include any shared use parking? ☐ Yes ☐ No

v. If the proposed action includes any modification of existing roads, creation of new roads or change in existing access, describe:

vi. Are public/private transportation service(s) or facilities available within ½ mile of the proposed site? ☐ Yes ☐ No

vii Will the proposed action include access to public transportation or accommodations for use of hybrid, electric or other alternative fueled vehicles? ☐ Yes ☐ No

viii. Will the proposed action include plans for pedestrian or bicycle accommodations for connections to existing pedestrian or bicycle routes? ☐ Yes ☐ No

k. Will the proposed action (for commercial or industrial projects only) generate new or additional energy demand? ☐Yes ☐No
If Yes:
i. Estimate annual electricity demand during operation of the proposed action: _____

ii. Anticipated sources/suppliers of electricity for the project (e.g., on-site combustion, on-site renewable, via grid/local utility, or other):_____

iii. Will the proposed action require a new, or an upgrade, to an existing substation? ☐Yes ☐No

l. Hours of operation. Answer all items which apply.

i. During Construction:
- Monday - Friday:_____
- Saturday:_____
- Sunday:_____
- Holidays:_____

ii. During Operations:
- Monday - Friday: _____
- Saturday: _____
- Sunday: _____
- Holidays: _____

m. Will the proposed action produce noise that will exceed existing ambient noise levels during construction, operation, or both? ☐Yes ☐No
If yes:
i. Provide details including sources, time of day and duration:

ii. Will the proposed action remove existing natural barriers that could act as a noise barrier or screen? ☐Yes ☐No
Describe:

n. Will the proposed action have outdoor lighting? ☐Yes ☐No
If yes:
i. Describe source(s), location(s), height of fixture(s), direction/aim, and proximity to nearest occupied structures:

ii. Will proposed action remove existing natural barriers that could act as a light barrier or screen? ☐Yes ☐No
Describe:

o. Does the proposed action have the potential to produce odors for more than one hour per day? ☐Yes ☐No
If Yes, describe possible sources, potential frequency and duration of odor emissions, and proximity to nearest occupied structures: _____

p. Will the proposed action include any bulk storage of petroleum (combined capacity of over 1,100 gallons) or chemical products 185 gallons in above ground storage or any amount in underground storage? ☐Yes ☐No
If Yes:
i. Product(s) to be stored _____
ii. Volume(s)_____ per unit time_____(e.g., month, year)
iii. Generally, describe the proposed storage facilities:_____

q. Will the proposed action (commercial, industrial and recreational projects only) use pesticides (i.e., herbicides, insecticide) during construction or operation? ☐Yes ☐No
If Yes:
i. Describe proposed treatment(s):

ii. Will the proposed action use Integrated Pest Management Practices? ☐Yes ☐No

r. Will the proposed action (commercial or industrial projects only) involve or require the management or disposal of solid waste (excluding hazardous materials)? ☐Yes ☐No

If Yes:

i. Describe any solid waste(s) to be generated during construction or operation of the facility:

- Construction:_____tons per_____(unit of time)
- Operation : _____ tons per_____(unit of time)

ii. Describe any proposals for on-site minimization, recycling or reuse of materials to avoid disposal as solid waste:

- Construction:

_____

- Operation:

_____

iii. Proposed disposal methods/facilities for solid waste generated on-site:

- Construction:

_____

- Operation:

s. Does the proposed action include construction or modification of a solid waste management facility? ☐Yes ☐ No

If Yes:

i. Type of management or handling of waste proposed for the site (e.g., recycling or transfer station, composting, landfill, or other disposal activities): _____

ii. Anticipated rate of disposal/processing:

- _____ Tons/month, if transfer or other non-combustion/thermal treatment, or
- _____ Tons/hour, if combustion or thermal treatment

iii. If landfill, anticipated site life: _____ years

t. Will the proposed action at the site involve the commercial generation, treatment, storage, or disposal of hazardous waste? ☐Yes☐No

If Yes:

i. Name(s) of all hazardous wastes or constituents to be generated, handled, or managed at facility: _____

_____

ii. Generally describe processes or activities involving hazardous wastes or constituents:

iii. Specify amount to be handled or generated_____tons/month

iv. Describe any proposals for on-site minimization, recycling, or reuse of hazardous constituents: _____

v. Will any hazardous wastes be disposed at an existing offsite hazardous waste facility? ☐Yes☐No

If Yes: provide name and location of facility:_____

If No: describe proposed management of any hazardous wastes which will not be sent to a hazardous waste facility:

E. Site and Setting of Proposed Action

E.1. Land uses on and surrounding the project site

a. Existing land uses.

i. Check all uses that occur on, adjoining and near the project site.

☐Urban ☐Industrial ☐Commercial ☐Residential (suburban) ☐Rural (non-farm)
☐Forest ☐Agriculture ☐Aquatic ☐Other (specify):

ii. If mix of uses, generally describe:

b. Land uses and cover types on the project site.

Land use or Cover type	Current Acreage	Acreage After Project Completion	Change (Acres +/-)
• Roads, buildings, and other paved or impervious surfaces (total)			
• Industrial or manufacturing			
• Commercial			
• Residential			
• Forested			
• Meadows, grasslands or brushlands (non-agricultural, including abandoned agricultural)			
• Agricultural (includes active orchards, field, greenhouse, etc.)			
• Surface water features (lakes, ponds, streams, rivers, etc.)			
• Wetlands (freshwater or tidal)			
• Non-vegetated (bare rock, earth, or fill)			
• Other, Describe: _____			

c. Is the project site presently used by members of the community for public recreation? ☐ Yes ☐ No
i. If Yes: explain: _____

d. Are there any facilities serving children, the elderly, people with disabilities (e.g., schools, hospitals, licensed day care centers, or group homes) within 1500 feet of the project site? ☐ Yes ☐ No
If Yes,
i. Identify facilities:

e. Does the project site contain an existing dam? ☐ Yes ☐ No
If Yes:
i. Dimensions of the dam and impoundment:
- Dam height: _____ feet
- Dam length: _____ feet
- Surface area: _____ acres
- Volume impounded: _____ gallons OR acre-feet

ii. Dam's existing hazard classification: _____
iii. Provide date and summarize results of last inspection:

f. Has the project site ever been used as a municipal, commercial or industrial solid waste management facility, or does the project site adjoin property that is now, or was at one time, used as a solid waste management facility? ☐ Yes ☐ No
If Yes:
i. Has the facility been formally closed? ☐ Yes ☐ No
- If Yes, cite sources/documentation: _____

ii. Describe the location of the project site relative to the boundaries of the solid waste management facility:

iii. Describe any development constraints due to the prior solid waste activities: _____

g. Have hazardous wastes been generated, treated and/or disposed of at the site, or does the project site adjoin property which is now or was at one time used to commercially treat, store and/or dispose of hazardous waste? ☐ Yes ☐ No
If Yes:
i. Describe waste(s) handled and waste management activities, including approximate time when activities occurred:

h. Potential contamination history. Has there been a reported spill at the proposed project site, or have any remedial actions been conducted at or adjacent to the proposed site? ☐ Yes ☐ No
If Yes:
i. Is any portion of the site listed on the NYSDEC Spills Incidents database or Environmental Site Remediation database? Check all that apply: ☐ Yes ☐ No
☐ Yes – Spills Incidents database — Provide DEC ID number(s): _____
☐ Yes – Environmental Site Remediation database — Provide DEC ID number(s): _____
☐ Neither database

ii. If site has been subject of RCRA corrective activities, describe control measures: _____

iii. Is the project within 2000 feet of any site in the NYSDEC Environmental Site Remediation database? ☐ Yes ☐ No
If Yes, provide DEC ID number(s): _____
iv. If Yes to (i), (ii) or (iii) above, describe current status of site(s):

v. Is the project site subject to an institutional control limiting property uses? ☐Yes ☐No

- If Yes, DEC site ID number: _____
- Describe the type of institutional control (e.g., deed restriction or easement): _____
- Describe any use limitations: _____
- Describe any engineering controls: _____
- Will the project affect the institutional or engineering controls in place? ☐Yes ☐No
- Explain: _____

E.2. Natural Resources On or Near Project Site

a. What is the average depth to bedrock on the project site? _____ feet

b. Are there bedrock outcroppings on the project site? ☐Yes ☐No
If Yes, what proportion of the site is comprised of bedrock outcroppings? _____%

c. Predominant soil type(s) present on project site: _____ _____%
_____ _____%
_____ _____%

d. What is the average depth to the water table on the project site? Average: _____ feet

e. Drainage status of project site soils: ☐Well Drained: _____% of site
☐Moderately Well Drained: _____% of site
☐Poorly Drained _____% of site

f. Approximate proportion of proposed action site with slopes: ☐0-10%: _____% of site
☐10-15%: _____% of site
☐15% or greater: _____% of site

g. Are there any unique geologic features on the project site? ☐Yes ☐No
If Yes, describe:

h. Surface water features.
i. Does any portion of the project site contain wetlands or other waterbodies (including streams, rivers, ponds, or lakes)? ☐Yes ☐No
ii. Do any wetlands or other waterbodies adjoin the project site? ☐Yes ☐No
If Yes to either *i* or *ii*, continue. If No, skip to E.2.i.
iii. Are any of the wetlands or waterbodies within or adjoining the project site regulated by any federal, state or local agency? ☐Yes ☐No
iv. For each identified regulated wetland and waterbody on the project site, provide the following information:

- Streams: Name _____ Classification _____
- Lakes or Ponds: Name _____ Classification _____
- Wetlands: Name _____ Approximate Size _____
- Wetland No. (if regulated by DEC) _____

v. Are any of the above water bodies listed in the most recent compilation of NYS water quality-impaired waterbodies? ☐Yes ☐No
If Yes, name of impaired water body/bodies and basis for listing as impaired: _____

i. Is the project site in a designated Floodway? ☐Yes ☐No

j. Is the project site in the 100-year Floodplain? ☐Yes ☐No

k. Is the project site in the 500-year Floodplain? ☐Yes ☐No

l. Is the project site located over, or immediately adjoining, a primary, principal or sole source aquifer? ☐Yes ☐No
If Yes:
i. Name of aquifer: _____

m. Identify the predominant wildlife species that occupy or use the project site: _____

_____ _____ _____

_____ _____ _____

n. Does the project site contain a designated significant natural community? ☐ Yes ☐ No

If Yes:

i. Describe the habitat/community (composition, function, and basis for designation): _____

ii. Source(s) of description or evaluation:

iii. Extent of community/habitat:

- Currently: _____ acres
- Following completion of project as proposed: _____ acres
- Gain or loss (indicate + or -): _____ acres

o. Does project site contain any species of plant or animal that is listed by the federal government or NYS as endangered or threatened, or does it contain any areas identified as habitat for an endangered or threatened species? ☐ Yes ☐ No

If Yes:

i. Species and listing (endangered or threatened): _____

p. Does the project site contain any species of plant or animal that is listed by NYS as rare, or as a species of special concern? ☐ Yes ☐ No

If Yes:

i. Species and listing: _____

q. Is the project site or adjoining area currently used for hunting, trapping, fishing or shell fishing? ☐ Yes ☐ No

If Yes, give a brief description of how the proposed action may affect that use: _____

E.3. Designated Public Resources On or Near Project Site

a. Is the project site, or any portion of it, located in a designated agricultural district certified pursuant to Agriculture and Markets Law, Article 25-AA, Section 303 and 304? ☐ Yes ☐ No

If Yes, provide county plus district name/number: _____

b. Are agricultural lands consisting of highly productive soils present? ☐ Yes ☐ No

i. If Yes: acreage(s) on project site? _____

ii. Source(s) of soil rating(s): _____

c. Does the project site contain all or part of, or is it substantially contiguous to, a registered National Natural Landmark? ☐ Yes ☐ No

If Yes:

i. Nature of the natural landmark: ☐ Biological Community ☐ Geological Feature

ii. Provide brief description of landmark, including values behind designation and approximate size/extent: _____

d. Is the project site located in or does it adjoin a state listed Critical Environmental Area? ☐ Yes ☐ No

If Yes:

i. CEA name: _____

ii. Basis for designation: _____

iii. Designating agency and date: _____

e. Does the project site contain, or is it substantially contiguous to, a building, archaeological site, or district listed on the National or State Register of Historic Places, or that has been determined by the Commissioner of the NYSOffice of Parks, Recreation and Historic Preservation to be eligible for listing on the State Register of Historic Places? ☐Yes ☐No

If Yes:

i. Nature of historic/archaeological resource: ☐Archaeological Site ☐Historic Building or District

ii. Name: _____

iii. Brief description of attributes on which listing is based:

_____

f. Is the project site, or any portion of it, located in or adjacent to an area designated as sensitive for archaeological sites on the New York State Historic Preservation Office (SHPO) archaeological site inventory? ☐Yes ☐No

g. Have additional archaeological or historic site(s) or resources been identified on the project site? ☐Yes ☐No

If Yes:

i. Describe possible resource(s): _____

ii. Basis for identification: _____

h. Is the project site within five miles of any officially designated and publicly accessible federal, state, or local scenic, or aesthetic resource? ☐Yes ☐No

If Yes:

i. Identify resource: _____

ii. Nature of, or basis for, designation (e.g., established highway overlook, state or local park, state historic trail, or scenic byway, etc.): _____

iii. Distance between project and resource:_____miles.

i. Is the project site located within a designated river corridor under the Wild, Scenic and Recreational Rivers Program 6 NYCRR 666? ☐Yes ☐No

If Yes:

i. Identify the name of the river and its designation: _____

ii. Is the activity consistent with development restrictions contained in 6NYCRR Part 666? ☐Yes ☐No

E.4. Disadvantaged Communities Designated Pursuant to ECL Article 75

a. Is the project located within, or within ½ mile of, a disadvantaged community? ☐Yes ☐No

If No, could impacts(see examples below in E.4.b) from the project affect a disadvantaged community? ☐Yes ☐No

If Yes to either question in E.4.a, answer the remaining questions in this section.

b. Will there be direct or indirect impacts that may affect a disadvantaged community, such as those listed below? ☐Yes ☐No

i. new noise sources or expansions/modification of existing noise sources;
   - noise from operational sources
   - noise from construction activities

ii. emissions of air pollutants including, mobile emissions;

iii. wastewater discharges;

iv. generation of odors;

v. light pollution;

vi. new or modified radiation sources;

vii. new or modified sources of solid waste generation, management, or disposal.

If Yes, describe the impacts:

c. Do any of the State agency approvals identified in question B.g include any of the following DEC permits?

State Pollutant Discharge Elimination System (SPDES)	☐Yes	☐No
Solid Waste Management Facility	☐Yes	☐No
Hazardous Waste Management Facility	☐Yes	☐No
Air Pollution Control (Title V or Air State Facility)	☐Yes	☐No
Water Withdrawal over 20 MGD for Cooling Water	☐Yes	☐No
Waste Transporter	☐Yes	☐No

E.5 Future Physical Climate Risks

Will the proposed action be vulnerable to the following future physical climate risks under current or projected future conditions:

a. Is the proposed action vulnerable to damage from a projected 100-year flood? ☐Yes ☐No

b. Is the proposed action vulnerable to damage from a projected 500-year flood? ☐Yes ☐No

c. Is the proposed action in an area potentially affected by sea level rise? ☐Yes ☐No

d. Will the proposed action increase the vulnerability of human or ecological communities to the following:

i. drought? ☐Yes ☐No

ii. temperature extremes (hot or cold)? ☐Yes ☐No

iii. extreme storms, including high winds? ☐Yes ☐No

iv. landslides? ☐Yes ☐No

v. coastal erosion? ☐Yes ☐No

vi. stormwater flooding? ☐Yes ☐No

vii. other climate or weather hazards? ☐Yes ☐No If Yes, describe: _____

F. Additional Information

Attach any additional information which may be needed to clarify your project.

If you have identified any adverse impacts which could be associated with your proposal, please describe those impacts plus any measures which you propose to avoid or minimize them.

G. Verification

I certify that the information provided is true to the best of my knowledge.

Applicant/Sponsor Name Steven Olufsen Date 10-7-26

Signature Steven M. Olufsen Title Senior Planner

Part 1 Supplemental Information: C.2 ADOPTED LAND USE PLANS

Supplemental Information:

EAF Part 1. C.2 ADOPTED LAND USE PLANS

D. Is the proposed action in a municipality with an adopted comprehensive or individual plan that addresses climate change? If yes, identify the elements of the plan that are relevant to the actions:

Monroe County Climate Action Plan 2022: The Monroe County Climate Action Plan addresses several topics that are also reflected in the Comprehensive Plan, including improving transportation connectivity, considering the climate impacts of existing and new development, increasing energy efficiency and resilient infrastructure, protecting open space and natural resources, and reducing waste. The CAP also emphasizes partnerships and community education, supporting the Comprehensive Plan's broader focus on coordinated planning and community involvement. Additionally, nine municipalities have been awarded matching grant funding through the County's Community Climate Action Fund. Awardees are the towns of Brighton, Chili, Gates, Greece, Irondequoit, Penfield, Perinton, Pittsford, the City of Rochester, and the Village of Hilton. Proposals included initiatives to implement electric vehicle technology, energy-efficient materials, and climate-resilient infrastructure which align with goals outlines in the Comprehensive Plan.

City of Rochester Climate Action Plan 2017: The City's Climate Action Plan identifies actions such as strengthening public transit and multimodal transportation, encouraging energy-efficient buildings and renewable energy, promoting green infrastructure and open space, and expanding waste reduction and composting programs. Many of these actions support the Comprehensive Plans objectives for transportation, sustainable development, waste reduction, infrastructure resiliency, and protection of natural resources.

Town of Brighton Climate Action Plan 2023: Brighton's Climate Action Plan includes implementation actions related to several Comprehensive Plan topics, including transportation, waste reduction, and development. Key actions include revising zoning to promote walkability and mobility, incorporating Complete Streets principles, support for alternative transportation, and strategies to improve waste management and recycling practices.

Town of Pittsford Climate Action Plan 2024: Pittsford's Climate Action Plan includes recommendations that support Comprehensive Plan goals related to preparedness and resilience, infrastructure, and waste management. These include promoting use of emergency communication systems, improving infrastructure resilience, and pursuing waste reduction, reuse, and recycling programs.

In Progress:

Town of Penfield Municipal Climate Action Plan: Penfield's Phase I of its Climate Action Plan is currently under development and will be aligned with Monroe County's Phase I and Phase II Climate Action Plans. Many of the key topics addressed in these plans are consistent with and support the broader goals of the County's Comprehensive Plan.

EAF Part 3 – Evaluation of the Magnitude and Importance of Project Impacts and Determination of Significance (Draft):

The Monroe County Comprehensive Plan, Plan Forward, establishes a long-term vision, goals, and strategies to guide Monroe County's growth, investment, and decision-making over the next decade. The purpose of the plan is to promote coordinated and sustainable development countywide by addressing economic and workforce development, infrastructure, public health, and public safety through a framework of policies and implementation strategies. The plan seeks to improve housing availability and affordability, strengthen transportation and utility infrastructure, support economic competitiveness and workforce development, protect natural resources and water quality, expand broadband and multimodal transportation access, enhance public health and community well-being, and improve emergency preparedness and public safety. The comprehensive plan is intended to serve as a countywide policy guide that coordinates future public and private actions, supports intermunicipal collaboration, and advances Monroe County's resilience, sustainability, and quality of life.

Plan Forward does not propose specific actions, projects or physical activities, it does not commit Monroe County or residents to a definitive course of action, it is not a land use plan or have the effect of law on County or Community actions. Instead, it identifies numerous goals and strategies that will need to be approved and funded to implement this plan and realize the County-wide vision. Accordingly, no significant adverse impacts on the environment are anticipated from the adoption of the Monroe County Comprehensive Plan.

To the extent consideration of the adoption of the Monroe County Comprehensive Plan without also reviewing all possible strategies constitutes segmentation, segmentation is warranted under these circumstances pursuant to 6 NYCRR § 617.3(g)(1). First, the adoption of the plan is functionally independent from the actions that may be proposed and implemented by Monroe County and community residents. Plan Forward, like all community plans, are the responsibility of more than the adopting entity, including private citizens not subject to the State Environmental Quality Review Act. Second, information on the implementation of the strategies contained within the plan is speculative and may not occur. Last, as strategies are identified and proposed they will be reviewed in greater depth than can occur while the County considers adopting the Monroe County Comprehensive Plan as a whole. Reviewing the potential impacts of the specific strategies implemented at the time the actions are funded and considered by Monroe County, will be no less protective of the environment.

Agency Use Only [If applicable]

Project: Comprehensive Plan 2026

Date: 10-7-26

Full Environmental Assessment Form
Part 2 - Identification of Potential Project Impacts

Part 2 is to be completed by the lead agency. Part 2 is designed to help the lead agency inventory all potential resources that could be affected by a proposed project or action. We recognize that the lead agency's reviewer(s) will not necessarily be environmental professionals. So, the questions are designed to walk a reviewer through the assessment process by providing a series of questions that can be answered using the information found in Part 1. To further assist the lead agency in completing Part 2, the form identifies the most relevant questions in Part 1 that will provide the information needed to answer the Part 2 question. When Part 2 is completed, the lead agency will have identified the relevant environmental areas that may be impacted by the proposed activity.

If the lead agency is a state agency **and** the action is in any Coastal Area, complete the Coastal Assessment Form before proceeding with this assessment.

Tips for completing Part 2:

- Review all of the information provided in Part 1.
- Review any application, maps, supporting materials and the Full EAF Workbook.
- Answer each of the 18 questions in Part 2.
- If you answer "**Yes**" to a numbered question, please complete all the questions that follow in that section.
- If you answer "**No**" to a numbered question, move on to the next numbered question.
- Check appropriate column to indicate the anticipated size of the impact.
- Proposed projects that would exceed a numeric threshold contained in a question should result in the reviewing agency checking the box "Moderate to large impact may occur."
- The reviewer is not expected to be an expert in environmental analysis.
- If you are not sure or undecided about the size of an impact, it may help to review the sub-questions for the general question and consult the workbook.
- When answering a question consider all components of the proposed activity, that is, the whole action.
- Consider the possibility for long-term and cumulative impacts as well as direct impacts.
- Answer the question in a reasonable manner considering the scale and context of the project.

1. Impact on Land

Proposed action may involve construction on, or physical alteration of, the land surface of the proposed site. (See Part 1. D.1)

☑ NO ☐ YES

If "Yes", answer questions a - j. If "No", move on to Section 2.

	Relevant Part I Question(s)	No, or small impact may occur	Moderate to large impact may occur
a. The proposed action may involve construction on land where depth to water table is less than 3 feet.	E2d	☐	☐
b. The proposed action may involve construction on slopes of 15% or greater.	E2f	☐	☐
c. The proposed action may involve construction on land where bedrock is exposed, or generally within 5 feet of existing ground surface.	E2a	☐	☐
d. The proposed action may involve the excavation and removal of more than 1,000 tons of natural material.	D2a	☐	☐
e. The proposed action may involve construction that continues for more than one year or in multiple phases.	D1e	☐	☐
f. The proposed action may result in increased erosion, whether from physical disturbance or vegetation removal (including from treatment by herbicides).	D2e, D2q	☐	☐
g. The proposed action is, or may be, located within a Coastal Erosion hazard area.	B1i	☐	☐
h. Other impacts:		☐	☐

2. Impact on Geological Features

The proposed action may result in the modification or destruction of, or inhibit access to, any unique or unusual land forms on the site (e.g., cliffs, dunes, minerals, fossils, caves). (See Part 1. E.2.g)

☑ NO ☐ YES

If "Yes", answer questions a - c. If "No", move on to Section 3.

	Relevant Part I Question(s)	No, or small impact may occur	Moderate to large impact may occur
a. Identify the specific land form(s) attached:	E2g	☐	☐
b. The proposed action may affect or is adjacent to a geological feature listed as a registered National Natural Landmark. Specific feature:	E3c	☐	☐
c. Other impacts:		☐	☐

3. Impacts on Surface Water

The proposed action may affect one or more wetlands or other surface water bodies (e.g., streams, rivers, ponds or lakes). (See Part 1. D.2, E.2.h)

☑ NO ☐ YES

If "Yes", answer questions a - l. If "No", move on to Section 4.

	Relevant Part I Question(s)	No, or small impact may occur	Moderate to large impact may occur
a. The proposed action may create a new water body.	D2b, D1h	☐	☐
b. The proposed action may result in an increase or decrease of over 10% or more than a 10 acre increase or decrease in the surface area of any body of water.	D2b	☐	☐
c. The proposed action may involve dredging more than 100 cubic yards of material from a wetland or water body.	D2a	☐	☐
d. The proposed action may involve construction within or adjoining a freshwater or tidal wetland, or in the bed or banks of any other water body.	E2h	☐	☐
e. The proposed action may create turbidity in a waterbody, either from upland erosion, runoff or by disturbing bottom sediments.	D2a, D2h	☐	☐
f. The proposed action may include construction of one or more intake(s) for withdrawal of water from surface water.	D2c	☐	☐
g. The proposed action may include construction of one or more outfall(s) for discharge of wastewater to surface water(s).	D2d	☐	☐
h. The proposed action may cause soil erosion, or otherwise create a source of stormwater discharge that may lead to siltation or other degradation of receiving water bodies.	D2e	☐	☐
i. The proposed action may affect the water quality of any water bodies within or downstream of the site of the proposed action.	E2h	☐	☐
j. The proposed action may involve the application of pesticides or herbicides in or around any water body.	D2q, E2h	☐	☐
k. The proposed action may require the construction of new, or expansion of existing, wastewater treatment facilities.	D1a, D2d	☐	☐

l. Other impacts:		☐	☐

4. Impact on groundwater
The proposed action may result in new or additional use of ground water, or may have the potential to introduce contaminants to ground water or an aquifer. (See Part 1. D.2.a, D.2.c, D.2.d, D.2.p, D.2.q, D.2.t) ☑ NO ☐ YES
If "Yes", answer questions a - h. If "No", move on to Section 5.

	Relevant Part I Question(s)	No, or small impact may occur	Moderate to large impact may occur
a. The proposed action may require new water supply wells, or create additional demand on supplies from existing water supply wells.	D2c	☐	☐
b. Water supply demand from the proposed action may exceed safe and sustainable withdrawal capacity rate of the local supply or aquifer. Cite Source:	D2c	☐	☐
c. The proposed action may allow or result in residential uses in areas without water and sewer services.	D1a, D2c	☐	☐
d. The proposed action may include or require wastewater discharged to groundwater.	D2d, E2l	☐	☐
e. The proposed action may result in the construction of water supply wells in locations where groundwater is, or is suspected to be, contaminated.	D2c, E1f, E1g, E1h	☐	☐
f. The proposed action may require the bulk storage of petroleum or chemical products over ground water or an aquifer.	D2p, E2l	☐	☐
g. The proposed action may involve the commercial application of pesticides within 100 feet of potable drinking water or irrigation sources.	E2h, D2q, E2l, D2c	☐	☐
h. Other impacts:		☐	☐

5. Impact on Flooding
The proposed action may result in development on lands subject to flooding. (See Part 1. E.2) ☑ NO ☐ YES
If "Yes", answer questions a - g. If "No", move on to Section 6.

	Relevant Part I Question(s)	No, or small impact may occur	Moderate to large impact may occur
a. The proposed action may result in development in a designated floodway.	E2i	☐	☐
b. The proposed action may result in development within a 100-year or a 500-year floodplain.	E2j, E5a, E5b	☐	☐
c. The proposed action may result in development in an area potentially affected by sea level rise.	E2k, E5c	☐	☐
d. The proposed action may result in, or require, modification of existing drainage patterns.	D2b, D2e	☐	☐
e. The proposed action may change flood water flows that contribute to flooding.	D2b, E2i, E2j, E2k	☐	☐
f. If there is a dam located on the site of the proposed action, is the dam in need of repair, or upgrade?	E1e	☐	☐

g. Other impacts:		☐	☐

6. Impacts on Air and Climate

The proposed action may include a state regulated air emission source. (See Part 1. D.2.f., D.2.h, D.2.g) or generate greenhouse gas emissions over 10,000 metric tons of carbon dioxide equivalents (See Part 1. D.2.h)

☑ NO ☐ YES

If "Yes", answer questions a - i. If "No", move on to Section 7.

	Relevant Part I Question(s)	No, or small impact may occur	Moderate to large impact may occur
a. If the proposed action requires federal or state air emission permits, the action mayalso have the potential to emit one or more regulated air contaminants at or above the following levels:			
i. More than 100 short tons/year of carbon monoxide (CO)	D2g	☐	☐
ii. More than 100 short tons/year of oxides of nitrogen (NO_x) outside the NYC Metropolitan Area or Long Island OR 25 short tons/year within the NYC Metropolitan Area or Long Island	D2g	☐	☐
iii. More than 100 short tons/year of particulate matter (PM-10, PM-2.5)	D2g	☐	☐
iv. More than 50 short tons/year of volatile organic compounds (VOC) outside the NYC Metropolitan Area or Long Island OR 25 short tons/year within the NYC Metropolitan Area or Long Island	D2g	☐	☐
v. More than 100 short tons/year of sulfur dioxide (SO_2)	D2g	☐	☐
b. The proposed action has the potential to emit 10 short tons/year or more of any one designated hazardous air pollutant, or 25 short tons/year or more of any combination of such hazardous air pollutants.	D2g	☐	☐
c. The proposed action may include a heat source capable of producing more than 20 million BTUs per hour.	D2f, D2g	☐	☐
d. The proposed action may exceed 50% of any of the thresholds in "a" or "b", above.	D2g	☐	☐
e. The proposed action may result in the combustion or thermal treatment of solid, hazardous, or hospital/medical/infectious waste.	D2f, D2s	☐	☐
f. The proposed action is subject to the Nonattainment New Source Review or Prevention of Significant Deterioration requirements discussed in 6 NYCRR Part 231.	D2g	☐	☐
g. The proposed action will emit more than 10,000 metric tons of CO2 equivalents per year.	D2h	☐	☐
h. A municipality adopted comprehensive or individual plan addressing climate change applies to the proposed action and the proposed action would materially conflict with the achievement of one or more goals of the plan related to climate change.	C2d	☐	☐
i. Other impacts:		☐	☐

7. Impact on Plants and Animals

The proposed action may result in a loss of flora or fauna. (See Part 1. E.2. m.-q.) ☑ NO ☐ YES

If "Yes", answer questions a - j. If "No", move on to Section 8.

	Relevant Part I Question(s)	No, or small impact may occur	Moderate to large impact may occur
a. The proposed action may cause reduction in population or loss of individuals of any threatened or endangered species, as listed by New York State or the Federal government, that use the site, or are found on, over, or near the site.	E2o	☐	☐
b. The proposed action may result in a reduction or degradation of any habitat used by any rare, threatened or endangered species, as listed by New York State or the federal government.	E2o	☐	☐
c. The proposed action may cause reduction in population, or loss of individuals, of any species of special concern or conservation need, as listed by New York State or the Federal government, that use the site, or are found on, over, or near the site.	E2p	☐	☐
d. The proposed action may result in a reduction or degradation of any habitat used by any species of special concern and conservation need, as listed by New York State or the Federal government.	E2p	☐	☐

e. The proposed action may diminish the capacity of a registered National Natural Landmark to support the biological community it was established to protect.	E3c	☐	☐
f. The proposed action may result in the removal of, or ground disturbance in, any portion of a designated significant natural community. Source:	E2n	☐	☐
g. The proposed action may substantially interfere with nesting/breeding, foraging, or over-wintering habitat for the predominant species that occupy or use the project site.	E2m	☐	☐
h. The proposed action requires the conversion of more than 10 acres of forest, grassland or any other regionally or locally important habitat. Habitat type & information source: _____	E1b	☐	☐
i. Proposed action (commercial, industrial or recreational projects, only) involves use of herbicides or pesticides.	D2q	☐	☐
j. Other impacts:		☐	☐

8. Impact on Agricultural Resources

The proposed action may impact agricultural resources. (See Part 1. E.3.a. and b.) ☑ NO ☐ YES

If "Yes", answer questions a - h. If "No", move on to Section 9.

	Relevant Part I Question(s)	No, or small impact may occur	Moderate to large impact may occur
a. The proposed action may impact soil classified within soil group 1 through 4 of the NYS Land Classification System.	E2c, E3b	☐	☐
b. The proposed action may sever, cross or otherwise limit access to agricultural land (includes cropland, hayfields, pasture, vineyard, orchard, etc).	E1a, E1b	☐	☐
c. The proposed action may result in the excavation or compaction of the soil profile of active agricultural land.	E3b	☐	☐
d. The proposed action may irreversibly convert agricultural land to non-agricultural uses, either more than 2.5 acres if located in an Agricultural District, or more than 10 acres if not within an Agricultural District.	E1b, E3a	☐	☐
e. The proposed action may disrupt or prevent installation of an agricultural land management system.	E1 a, E1b	☐	☐
f. The proposed action may result, directly or indirectly, in increased development potential or pressure on farmland.	C2c, C3, D2c, D2d	☐	☐
g. The proposed project is not consistent with the adopted municipal Farmland Protection Plan.	C2c	☐	☐
h. Other impacts: _____		☐	☐

9. Impact on Aesthetic Resources

The land use of the proposed action is obviously different from, or are in sharp contrast to, current land use patterns between the proposed project and a scenic or aesthetic resource. (Part 1. E.1.a, E.1.b, E.3.h.)

☑ NO ☐ YES

If "Yes", answer questions a - g. If "No", go to Section 10.

	Relevant Part I Question(s)	No, or small impact may occur	Moderate to large impact may occur
a. Proposed action may be visible from any officially designated federal, state, or local scenic or aesthetic resource.	E3h	☐	☐
b. The proposed action may result in the obstruction, elimination or significant screening of one or more officially designated scenic views.	E3h, C2b	☐	☐
c. The proposed action may be visible from publicly accessible vantage points: i. Seasonally (e.g., screened by summer foliage, but visible during other seasons) ii. Year round	E3h	☐ ☐	☐ ☐
d. The situation or activity in which viewers are engaged while viewing the proposed action is: i. Routine travel by residents, including travel to and from work ii. Recreational or tourism-based activities	E3h E2q, E1c	☐ ☐	☐ ☐
e. The proposed action may cause a diminishment of the public enjoyment and appreciation of the designated aesthetic resource.	E3h	☐	☐
f. There are similar projects visible within the following distance of the proposed project: 0-1/2 mile ½ -3 mile 3-5 mile 5+ mile	D1a, E1a, D1f, D1g	☐	☐
g. Other impacts:		☐	☐

10. Impact on Historic and Archeological Resources

The proposed action may occur in or adjacent to a historic or archaeological resource. (Part 1. E.3.e, f. and g.)

☑ NO ☐ YES

If "Yes", answer questions a - e. If "No", go to Section 11.

	Relevant Part I Question(s)	No, or small impact may occur	Moderate to large impact may occur
a. The proposed action may occur wholly or partially within, or substantially contiguous to, any buildings, archaeological site or district which is listed on the National or State Register of Historical Places, or that has been determined by the Commissioner of the NYS Office of Parks, Recreation and Historic Preservation to be eligible for listing on the State Register of Historic Places.	E3e	☐	☐
b. The proposed action may occur wholly or partially within, or substantially contiguous to, an area designated as sensitive for archaeological sites on the NY State Historic Preservation Office (SHPO) archaeological site inventory.	E3f	☐	☐
c. The proposed action may occur wholly or partially within, or substantially contiguous to, an archaeological site not included on the NY SHPO inventory. Source:	E3g	☐	☐

d. Other impacts:		☐	☐
e. If any of the above (a-d) are answered "Moderate to large impact may occur", continue with the following questions to help support conclusions in Part 3:			
i. The proposed action may result in the destruction or alteration of all or part of the site or property.	E3e, E3g, E3f	☐	☐
ii. The proposed action may result in the alteration of the property's setting or integrity.	E3e, E3f, E3g, E1a, E1b	☐	☐
iii. The proposed action may result in the introduction of visual elements which are out of character with the site or property, or that may alter its setting.	E3e, E3f, E3g, E3h, C2, C3	☐	☐

11. Impact on Open Space and Recreation

The proposed action may result in a loss of recreational opportunities or a reduction of an open space resource as designated in any adopted municipal open space plan. (See Part 1. C.2.c, E.1.c., E.2.q.)

☑ NO ☐ YES

If "Yes", answer questions a - e. If "No", go to Section 12.

	Relevant Part I Question(s)	No, or small impact may occur	Moderate to large impact may occur
a. The proposed action may result in an impairment of natural functions, or "ecosystem services", provided by an undeveloped area, including but not limited to stormwater storage, nutrient cycling, wildlife habitat.	D2e, E1b E2h, E2m, E2o, E2n, E2p	☐	☐
b. The proposed action may result in the loss of a current or future recreational resource.	C2a, E1c, C2c, E2q	☐	☐
c. The proposed action may eliminate open space or recreational resource in an area with few such resources.	C2a, C2c E1c, E2q	☐	☐
d. The proposed action may result in loss of an area now used informally by the community as an open space resource.	C2c, E1c	☐	☐
e. Other impacts: _____		☐	☐

12. Impact on Critical Environmental Areas

The proposed action may be located within or adjacent to a critical environmental area (CEA). (See Part 1. E.3.d)

■ NO ☐ YES

If "Yes", answer questions a - c. If "No", go to Section 13.

	Relevant Part I Question(s)	No, or small impact may occur	Moderate to large impact may occur
a. The proposed action may result in a reduction in the quantity of the resource or characteristic which was the basis for designation of the CEA.	E3d	☐	☐
b. The proposed action may result in a reduction in the quality of the resource or characteristic which was the basis for designation of the CEA.	E3d	☐	☐
c. Other impacts: _____		☐	☐

13. Impact on Transportation
The proposed action may result in a change to existing transportation systems. ■ NO ☐ YES
(See Part 1. D.2.j)
If "Yes", answer questions a - f. If "No", go to Section 14.

	Relevant Part I Question(s)	No, or small impact may occur	Moderate to large impact may occur
a. Projected traffic increase may exceed capacity of existing road network.	D2j	☐	☐
b. The proposed action may result in the construction of paved parking area for 500 or more vehicles.	D2j	☐	☐
c. The proposed action will degrade existing transit access.	D2j	☐	☐
d. The proposed action will degrade existing pedestrian or bicycle accommodations.	D2j	☐	☐
e. The proposed action may alter the present pattern of movement of people or goods.	D2j	☐	☐
f. Other impacts:		☐	☐

14. Impact on Energy
The proposed action may cause an increase in the use of any form of energy. ■ NO ☐ YES
(See Part 1. D.2.k)
If "Yes", answer questions a - e. If "No", go to Section 15.

	Relevant Part I Question(s)	No, or small impact may occur	Moderate to large impact may occur
a. The proposed action will require a new, or an upgrade to an existing, substation.	D2k	☐	☐
b. The proposed action will require the creation or extension of an energy transmission or supply system to serve more than 50 single or two-family residences or to serve a commercial or industrial use.	D1f, D1q, D2k	☐	☐
c. The proposed action may utilize more than 2,500 MWhrs per year of electricity.	D2k	☐	☐
d. The proposed action may involve heating and/or cooling of more than 100,000 square feet of building area when completed.	D1g	☐	☐
e. Other Impacts:		☐	☐

15. Impact on Noise, Odor, and Light
The proposed action may result in an increase in noise, odors, or outdoor lighting. ■ NO ☐ YES
(See Part 1. D.2.m., n., and o.)
If "Yes", answer questions a - f. If "No", go to Section 16.

	Relevant Part I Question(s)	No, or small impact may occur	Moderate to large impact may occur
a. The proposed action may produce sound above noise levels established by local regulation.	D2m	☐	☐
b. The proposed action may result in blasting within 1,500 feet of any residence, hospital, school, licensed day care center, or nursing home.	D2m, E1d	☐	☐
c. The proposed action may result in routine odors for more than one hour per day.	D2o	☐	☐

d. The proposed action may result in light shining onto adjoining properties.	D2n	☐	☐
e. The proposed action may result in lighting creating sky-glow brighter than existing area conditions.	D2n, E1a	☐	☐
f. Other impacts:		☐	☐

16. Impact on Human Health
The proposed action may have an impact on human health from exposure to new or existing sources of contaminants. (See Part 1.D.2.q., E.1. d. f. g. and h.) ■ NO ☐ YES
If "Yes", answer questions a - m. If "No", go to Section 17.

	Relevant Part I Question(s)	No, or small impact may occur	Moderate to large impact may occur
a. The proposed action is located within 1500 feet of a school, hospital, licensed day care center, group home, nursing home or retirement community.	E1d	☐	☐
b. The site of the proposed action is currently undergoing remediation.	E1g, E1h	☐	☐
c. There is a completed emergency spill remediation, or a completed environmental site remediation on, or adjacent to, the site of the proposed action.	E1g, E1h	☐	☐
d. The site of the action is subject to an institutional control limiting the use of the property (e.g., easement or deed restriction).	E1g, E1h	☐	☐
e. The proposed action may affect institutional control measures that were put in place to ensure that the site remains protective of the environment and human health.	E1g, E1h	☐	☐
f. The proposed action has adequate control measures in place to ensure that future generation, treatment and/or disposal of hazardous wastes will be protective of the environment and human health.	D2t	☐	☐
g. The proposed action involves construction or modification of a solid waste management facility.	D2q, E1f	☐	☐
h. The proposed action may result in the unearthing of solid or hazardous waste.	D2q, E1f	☐	☐
i. The proposed action may result in an increase in the rate of disposal, or processing, of solid waste.	D2r, D2s	☐	☐
j. The proposed action may result in excavation or other disturbance within 2000 feet of a site used for the disposal of solid or hazardous waste.	E1f, E1g E1h	☐	☐
k. The proposed action may result in the migration of explosive gases from a landfill site to adjacent off-site structures.	E1f, E1g	☐	☐
l. The proposed action may result in the release of contaminated leachate from the project site.	D2s, E1f, D2r	☐	☐
m. Other impacts:		☐	☐

17. Consistency with Community Plans

The proposed action is not consistent with adopted land use plans. (See Part 1. C.1, C.2. and C.3.) ☑ NO ☐ YES

If "Yes", answer questions a - h. If "No", go to Section 18.

	Relevant Part I Question(s)	No, or small impact may occur	Moderate to large impact may occur
a. The proposed action's land use components may be different from, or in sharp contrast to, current surrounding land use pattern(s).	C2, C3, D1a E1a, E1b	☐	☐
b. The proposed action will cause the permanent population of the city, town or village in which the project is located to grow by more than 5%.	C2	☐	☐
c. The proposed action is inconsistent with local land use plans or zoning regulations.	C2, C2, C3	☐	☐
d. The proposed action is inconsistent with any County plans, or other regional land use plans.	C2, C2	☐	☐
e. The proposed action may cause a change in the density of development that is not supported by existing infrastructure or is distant from existing infrastructure.	C3, D1c, D1d, D1f, D1d, E1b	☐	☐
f. The proposed action is in an area characterized by low density developmentthat will require new or expanded public infrastructure.	C4, D2c, D2d D2j	☐	☐
g. The proposed action may induce secondary development impacts (e.g., residential or commercial development not included in the proposed action)	C2a	☐	☐
h. Other:		☐	☐

18. Consistency with Community Character

The proposed project is inconsistent with the existing community character. (See Part 1. C.2, C.3, D.2, E.3) ☑ NO ☐ YES

If "Yes", answer questions a - g. If "No", proceed to Part 3.

	Relevant Part I Question(s)	No, or small impact may occur	Moderate to large impact may occur
a. The proposed action may replace or eliminate existing facilities, structures, or areas of historic importance to the community.	E3e, E3f, E3g	☐	☐
b. The proposed action may create a demand for additional community services (e.g. schools, police and fire)	C4	☐	☐
c. The proposed action may displace affordable or low-income housing in an area where there is a shortage of such housing.	C2, C3, D1f D1g, E1a	☐	☐
d. The proposed action may interfere with the use or enjoyment of officially recognized or designated public resources.	C2, E3	☐	☐
e. The proposed action is inconsistent with the predominant architectural scale and character.	C2, C3	☐	☐
f. Proposed action is inconsistent with the character of the existing natural landscape.	C2, C3 E1a, E1b E2g, E2h	☐	☐
g. Other impacts:		☐	☐

Agency Use Only [If Applicable]
Project : Comprehensive Plan 2026
Date : 10-7-26

Full Environmental Assessment Form
Part 3 - Evaluation of the Magnitude and Importance of Project Impacts
and
Determination of Significance

Part 3 provides the reasons in support of the determination of significance. The lead agency must complete Part 3 for every question in Part 2 where the impact has been identified as potentially moderate to large or where there is a need to explain why a particular element of the proposed action will not, or may, result in a significant adverse environmental impact.

Based on the analysis in Part 3, the lead agency must decide whether to require an environmental impact statement to further assess the proposed action or whether available information is sufficient for the lead agency to conclude the proposed action will not have a significant adverse environmental impact. By completing the certification on the next page, the lead agency can complete its determination of significance.

Reasons Supporting This Determination:
To complete this section:

- Identify the impact based on the Part 2 responses and describe its magnitude. Magnitude considers factors such as severity, size, or extent of an impact.
- Assess the importance of the impact. Importance relates to the geographic scope, duration, probability of the impact occurring, number of people affected by the impact, and any additional environmental consequences if the impact were to occur.
- The assessment should take into consideration any design element or project changes.
- Repeat this process for each Part 2 question where the impact has been identified as potentially moderate to large or where there is a need to explain why a particular element of the proposed action will not, or may, result in a significant adverse environmental impact.
- Provide the reason(s) why the impact may, or will not, result in a significant adverse environmental impact.
- For Conditional Negative Declarations identify the specific condition(s) imposed that will modify the proposed action so that no significant adverse environmental impacts will result.
- Attach additional sheets, as needed.

The Monroe County Comprehensive Plan, Plan Forward, establishes a long-term vision, goals, and strategies to guide Monroe County's growth, investment, and decision-making over the next decade. The purpose of the plan is to promote coordinated and sustainable development countywide by addressing economic and workforce development, infrastructure, public health, and public safety through a framework of policies and implementation strategies. The plan seeks to improve housing availability and affordability, strengthen transportation and utility infrastructure, support economic competitiveness and workforce development, protect natural resources and water quality, expand broadband and multimodal transportation access, enhance public health and community well-being, and improve emergency preparedness and public safety. The comprehensive plan is intended to serve as a countywide policy guide that coordinates future public and private actions, supports intermunicipal collaboration, and advances Monroe County's resilience, sustainability, and quality of life.
Planning efforts are generally determined not to have a significant impact on the environment. Any future actions resulting from the plan would require their own environmental review. Where appropriate environmental review will occur as concrete actions related to the long-term visions, goals, and strategies supported herein are implemented by Monroe County and Agencies. Accordingly, no significant adverse impacts on the environment are anticipated from the adoption of this plan.

Determination of Significance - Type 1 and Unlisted Actions

SEQR Status: ☑ Type 1 ☐ Unlisted

Identify portions of EAF completed for this Project: ☑ Part 1 ☑ Part 2 ☑ Part 3

Upon review of the information recorded on this EAF, as noted, plus this additional support information
on municipal climate action plan efforts

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and considering both the magnitude and importance of each identified potential impact, it is the conclusion of the as lead agency that:

☑ A. This project will result in no significant adverse impacts on the environment, and, therefore, an environmental impact statement need not be prepared. Accordingly, this negative declaration is issued.

☐ B. Although this project could have a significant adverse impact on the environment, that impact will be avoided or substantially mitigated because of the following conditions that will be required by the lead agency:

There will, therefore, be no significant adverse impacts from the project as conditioned, and, therefore, this conditioned negative declaration is issued. A conditioned negative declaration may be used only for UNLISTED actions (see 6 NYCRR 617.7(d)).

☐ C. This Project may result in one or more significant adverse impacts on the environment and an environmental impact statement must be prepared to further assess the impact(s) and possible mitigation and to explore alternatives to avoid or reduce those impacts. Accordingly, this positive declaration is issued.

Name of Action: Monroe County Comprehensive Plan	
Name of Lead Agency: Monroe County	
Name of Responsible Officer in Lead Agency: Adam J. Bello	
Title of Responsible Officer: County Executive	
Signature of Responsible Officer in Lead Agency:	Date:
Signature of Preparer (if different from Responsible Officer) Steven M. Olufsen	Date: 10-7-26

For Further Information:

Contact Person: Steven Olufsen
Address: 50 West Main Street, Rochester, NY 14614
Telephone Number: 5857532000
E-mail: mcplanning@monroecounty.gov

For Type 1 Actions and Conditioned Negative Declarations, a copy of this Notice is sent to:

Chief Executive Officer of the political subdivision in which the action will be principally located (e.g., Town / City / Village of)
Other involved agencies (if any)
Applicant (if any)
Environmental Notice Bulletin: http://www.dec.ny.gov/enb/enb.html

Print

Office of **the County Executive**

Monroe County, New York

Adam J. Bello
County Executive

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Not to be removed from the Office of the
Legislature Of
Monroe County
Committee Assignment
PLAN & EC DEV -L

November 6, 2026

To The Honorable
Monroe County Legislature
407 County Office Building
Rochester, New York 14614

Subject: Adoption of the Monroe County Comprehensive Plan Entitled "Plan Forward, a Comprehensive Plan for Monroe County"

Honorable Legislators:

We recommend that Your Honorable Body adopt "Plan Forward, a Comprehensive Plan for Monroe County" ("Plan Forward") as Monroe County's Comprehensive Plan.

On May 11, 2021, Your Honorable Body authorized a contract with the County of Monroe Industrial Development Agency ("COMIDA") and Environmental Design & Research, Landscape Architecture, Engineering & Environmental Services, DPC ("EDR") for professional services for the Monroe County Comprehensive Plan (Resolution 155 of 2021). On October 8, 2024, Resolution 155 of 2021 was amended to increase and extend the contract with COMIDA and EDR (Resolution 255 of 2024). Plan Forward has now been completed, and has been reviewed and recommended for adoption by the Monroe County Planning Board.

Monroe County's last comprehensive plan was developed in the 1970s. Since that time, our community's economy, infrastructure, and population have changed significantly. Plan Forward provides an updated framework to guide County planning and investment and reflects the priorities and needs identified through extensive engagement with municipalities, community organizations, residents, departments, and other county-wide stakeholders.

Plan Forward is intended to provide a clear, actionable framework for addressing key County priorities, including economic and workforce development, infrastructure, public health, and public safety. It also establishes goals and strategies to help coordinate County efforts, strengthen partnerships, and guide implementation over the coming years.

The specific legislative actions required are:

1. To Refer "Plan Forward, a Comprehensive Plan for Monroe County" to the legislative bodies and planning boards of each municipality within the County for review and recommendation.

2. To hold a public hearing on the proposed adoption of "Plan Forward, a Comprehensive Plan for Monroe County" as Monroe County's Comprehensive Plan.

3. To adopt "Plan Forward, a Comprehensive Plan for Monroe County" as Monroe County's Comprehensive Plan.

4. To establish a maximum interval for review and update of "Plan Forward, a Comprehensive Plan for Monroe County," with the Plan reviewed at least once every 10 years.

This action is preliminarily classified as Type I Action per 6 NYCRR 617.4(b)(1). The State Environmental Quality Review Act regulations found at 6 NYCRR Part 617 requires that no agency shall carry out or approve an Action until it has complied with the requirements of SEQRA. The provisions of the New York State Environmental Quality Review Act shall be complied with prior to Your Honorable Body undertaking, funding, or approving this action.

Adoption of "Plan Forward, a Comprehensive Plan for Monroe County" as Monroe County's Comprehensive Plan will have no impact on the revenues or expenditures of the current Monroe County Budget.

I recommend that this matter be referred to the appropriate committee(s) for favorable action by Your Honorable Body.

Sincerely,

Adam J. Bello
Monroe County Executive

Planning Board

Monroe County, New York

Adam J. Bello
County Executive

William Santos
Chairman

October 29, 2026

To The Honorable
Monroe County Legislature
407 County Office Building
Rochester, New York 14614

Subject: Recommend Monroe County Comprehensive Plan Entitled "Plan Forward, a Comprehensive Plan for Monroe County"

Honorable Legislators:

The Monroe County Planning Board has reviewed Plan Forward, a Comprehensive Plan for Monroe County ("Plan Forward") at its July 30, September 24, and October 29, 2026 meetings. Pursuant to Monroe County Charter §C5-7 C(2) and Administrative Code §A10-2, the Planning Board recommends that the Monroe County Legislature adopt Plan Forward as the comprehensive plan for Monroe County.

Plan Forward represents the first comprehensive plan for Monroe County in more than 40 years and provides a countywide framework to guide future planning, investment, coordination, and decision-making. It was developed through an extensive planning and public engagement process and reflects input from County departments, municipalities, community organizations, residents, and other stakeholders.

The Planning Board recognizes that Plan Forward is intended to serve as a practical and flexible framework rather than a prescriptive document. It provides a shared vision and direction for Monroe County while recognizing the important roles and responsibilities of municipalities, County departments, regional partners, and other public and private entities.

The Planning Board finds that Plan Forward provides an appropriate framework for coordinated, long-range planning in Monroe County and supports its adoption. The Board therefore respectfully recommends that the Monroe County Legislature adopt Plan Forward, a Comprehensive Plan for Monroe County.

Sincerely,

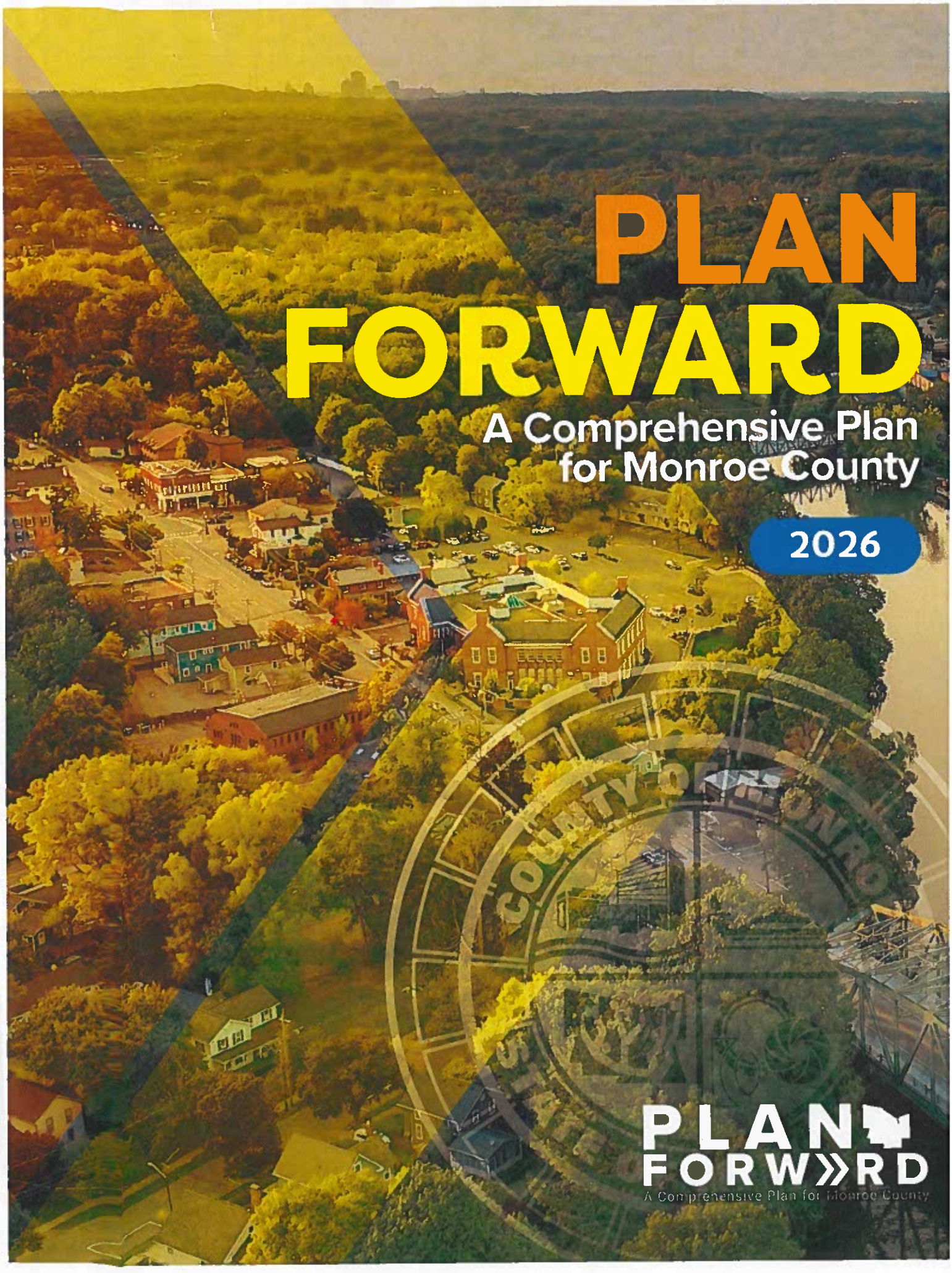
William R. Santos, Chairman
Monroe County Planning Board

WRS/yl

Attachments:
Plan Forward – A Comprehensive Plan for Monroe County
Plan Forward – Executive Summary

xc: Adam Bello, County Executive
Ana Liss, Director, Monroe Co. Dept. of Planning and Development

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PLAN
FORWARD
A Comprehensive Plan
for Monroe County
2026
PLAN FORW»RD
A Comprehensive Plan for Monroe County

Acknowledging the Land



A land acknowledgment creates a more accurate picture of the history of the lands and waterways we call home. In this way, we pay respect to the Indigenous People who have stewarded these precious resources from time immemorial and honor their cultural and ecological knowledge. The County recognizes our indebtedness to these Indigenous cultures as we remain guests on ancestral lands.

Monroe County sits squarely upon the ancestral and unceded land of the Haudenosaunee people. Often described as the oldest, participatory democracy on Earth, the Haudenosaunee Confederacy's constitution is believed to be a model for the American Constitution. What makes it stand out as unique to other systems around the world is its blending of law and values. For the Haudenosaunee, law, society and nature are equal partners and each plays an important role. Through the confederacy, each of the nations of the Haudenosaunee are united by a common goal to live in harmony. We pay respects to their elders past, present and future.

Respecting this indigenous relationship with the land, planning efforts must be coupled with informed actions as guardians of Monroe County's rich natural resources, abundant fresh water, and prime soils—in order to maintain social equity and a healthy habitat for all life. Decisions should consider the implications for the seventh generation, as often we fail to recognize the potential for long-term unintended consequences.

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Monroe County Planning and Development Staff

Participating County Staff

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Special thanks to the stakeholders and members of the public who took time out of their work and life to share their expertise and viewpoint on this planning effort.

EDR

FAIRWEATHER CONSULTING

PROSPECT HILL CONSULTING LLC

Introduction

A comprehensive plan is a tool that will help guide Monroe County toward its desired future. The process of developing a comprehensive plan is an opportunity for the County to ask questions like "Who are we?," "Who do we want to be?" and "How can we accomplish our goals?" This process allows the County to identify aspirations, understand how current trends may affect communities, and formulate a vision for the collective future.

Plan Forward encourages a forward-thinking approach that positions Monroe County to be well-equipped for the future. The development of this Plan began in the aftermath of the COVID-19 pandemic. This, along with subsequent local and national events, highlighted the need for a Comprehensive Plan to guide Monroe County's future while remaining flexible. The County worked to create a document that is both visionary and adaptable, with clear, actionable strategies to achieve goals through collaboration among a wide range of stakeholders. The planning process for this Plan was iterative and included consultation with County Leadership, multiple County offices, municipal constituents across the County, stakeholders with specialized knowledge in the topic areas, and community members at large. Through this inclusive approach, Plan Forward integrates diverse perspectives into a document that reflects Monroe County, identifies priorities, and aims to create a positive future for everyone.

This Plan sets a long-term vision and framework; however, planning is an ongoing process that requires regular evaluation and adjustment to remain relevant and effective. To support this ongoing process, this Plan is designed to be a living document that should be reviewed regularly and updated every 5 to 10 years to be responsive to changing conditions, policy focuses, and community needs.

Other Planning Efforts: Completed and Underway

Plan Forward builds on work already underway to improve Monroe County on many different fronts. Much of this work is articulated in the planning efforts listed below. Plan Forward compliments and aligns with the values, goals, and strategies laid out in these plans, however it does not comprehensively reiterate them. Where appropriate, these complimentary documents are referenced throughout Plan Forward. Click on the links below to learn more about these planning initiatives and specific topics of interest.

- Racial and Structural Equity (RASE) Report
- Monroe County Climate Action Plan – Phase I and Phase II
- Climate Adaptation & Resiliency Plan
- County-wide Active Transportation Plan
- County-wide Active Transportation Implementation Plan*
- Bring Monroe Back – Monroe County, NY Recovery Plan
- An Action Plan for an Age-friendly/ Livable Rochester and Monroe County
- Multimodal Freight Initiative*
- Monroe County Housing Study & Needs Analysis – COMIDA
- Agriculture and Farmland Protection Plan Update
- Local Solid Waste Management Plan *
- Organic Management Plan*
- Community Access Plan and Funding Strategy for Broadband
- Monroe County Hazard Mitigation Plan
- Monroe County Hazardous Materials Response Plan
- Monroe County Arts and Culture Plan*

**Denotes that the document was in development at the time of publication*

0.1.1 The Four Pillars

Monroe County is committed to advancing initiatives and making progress with respect to the Four Pillars: Economic and Workforce Development, Infrastructure, Public Health, and Public Safety. These Pillars include systems that cross municipal boundaries and promote collaboration among the County, municipalities, community organizations, businesses, residents, and other stakeholders to enhance the quality of life in Monroe County.

The four pillars are interconnected, each supporting the others to create communities where everyone can thrive. Focusing on the pillars both individually and collectively will help build a Monroe County that is forward-thinking and well-equipped for the future.

Economic and Workforce Development



Economic and Workforce Development prioritizes the workers who power Monroe County's diverse economy. It is their well-being, skills, and dedication that allow longstanding manufacturers, emerging industries, and local entrepreneurs to thrive in Monroe County. At the same time, strong economic development is essential to creating the conditions in which both workers and the businesses that employ them can succeed. By attracting investment, supporting business growth, strengthening infrastructure, and fostering an environment that encourages innovation, economic development complements and amplifies workforce efforts. Together, aligned workforce and economic development strategies help build a resilient economy that expands opportunity, supports local employers, and enhances quality of life for all residents.

Infrastructure



Infrastructure is fundamental for a healthy, safe, sustainable society and plays a critical role in supporting economic development. Monroe County residents rely on infrastructure daily for transportation, power, drinking water, waste management, and other essential services. In addition, public infrastructure and the related services it provides are key to job retention and creation, making it a cornerstone of Monroe County's economic prosperity. The future of Monroe County infrastructure is modernized, inclusive, and elevates the quality of life for the entire community through sustainable investments, resilient systems, and equitable access.

Public Health



Public Health encompasses everything people need to live full, healthy lives. Monroe County recognizes that good health is shaped not only by medical care, but also by social, economic, environmental factors. This pillar emphasizes the importance of physical and mental health, access to nutritious foods, and equity across all residents and visitors in Monroe County.

Public Safety



Public Safety provides safety, security, legal, prevention, education, and emergency services to all residents and visitors in Monroe County. When people feel safe, they are more likely to engage in their community, enjoy shared public spaces, and contribute to the economy. This pillar outlines the County's comprehensive public safety strategy, centered on coordinated prevention, response, and recovery efforts that extend beyond traditional law enforcement.

Monroe County is dedicated to strengthening all four pillars, and this plan is designed to advance in each of them, offering a clear path forward to reach its goals.

Plan Organization

Monroe County's Four Pillars also serve as the organizational framework for Plan Forward. Each section of the Plan focuses on a specific pillar, incorporating insights from the community engagement process to establish goals and strategies that will help advance the County. Each section is divided into subsections, starting with an introduction and a review of current trends that offer context and introduce key data points. The inventory and analysis is contained within two sections that examine the pillar through two lens intended to help assess the state of Monroe County.

The section titled **"What do we build on?"** is a review of what is working well in the County and how to build on strengths and ongoing successes.

The section titled **"What do we need to address?"** is an analysis of emerging or foreseeable issues that the County will work to solve over the time horizon of this Plan.

The Goals and Strategies section lists action items that the County and its partners can undertake over the next decade to make this plan a reality. The Implementation Matrix serves as a tool that can be used by a variety of stakeholders for tracking progress toward achieving these goals.



0.2 Public Engagement

The perspective of the community was critical to this planning effort. The Plan Forward project team engaged with Monroe County residents to understand county-wide issues, concerns, values, and assets.

Steering Committee

The Plan Forward Steering Committee was comprised of a group of individuals representing diverse backgrounds and important organizations within the County. The primary purposes of the Committee were to advise the planning department and consulting team; communicate to constituents, neighbors, and community about the plan; inform the planning process by providing first-hand knowledge of current issues, challenges, and opportunities; and help ensure the Plan aligns with community priorities and values.

Web and Social Media Presence

An online presence through the Monroe County website and social media channels allowed the public to access news, updates, documents, event details, and general information related to Plan Forward and the planning process.

Pop-Up Meetings

Pop-up meetings were held throughout the Plan Forward project, during which members of the project team informed the community about the planning effort while soliciting feedback about plan topics and community concerns. Over 30 pop ups were held around the County, including at the Rochester Public Market, The Genesee Country Village & Museum Holiday Market, and the Lilac Festival.

















Public Workshops

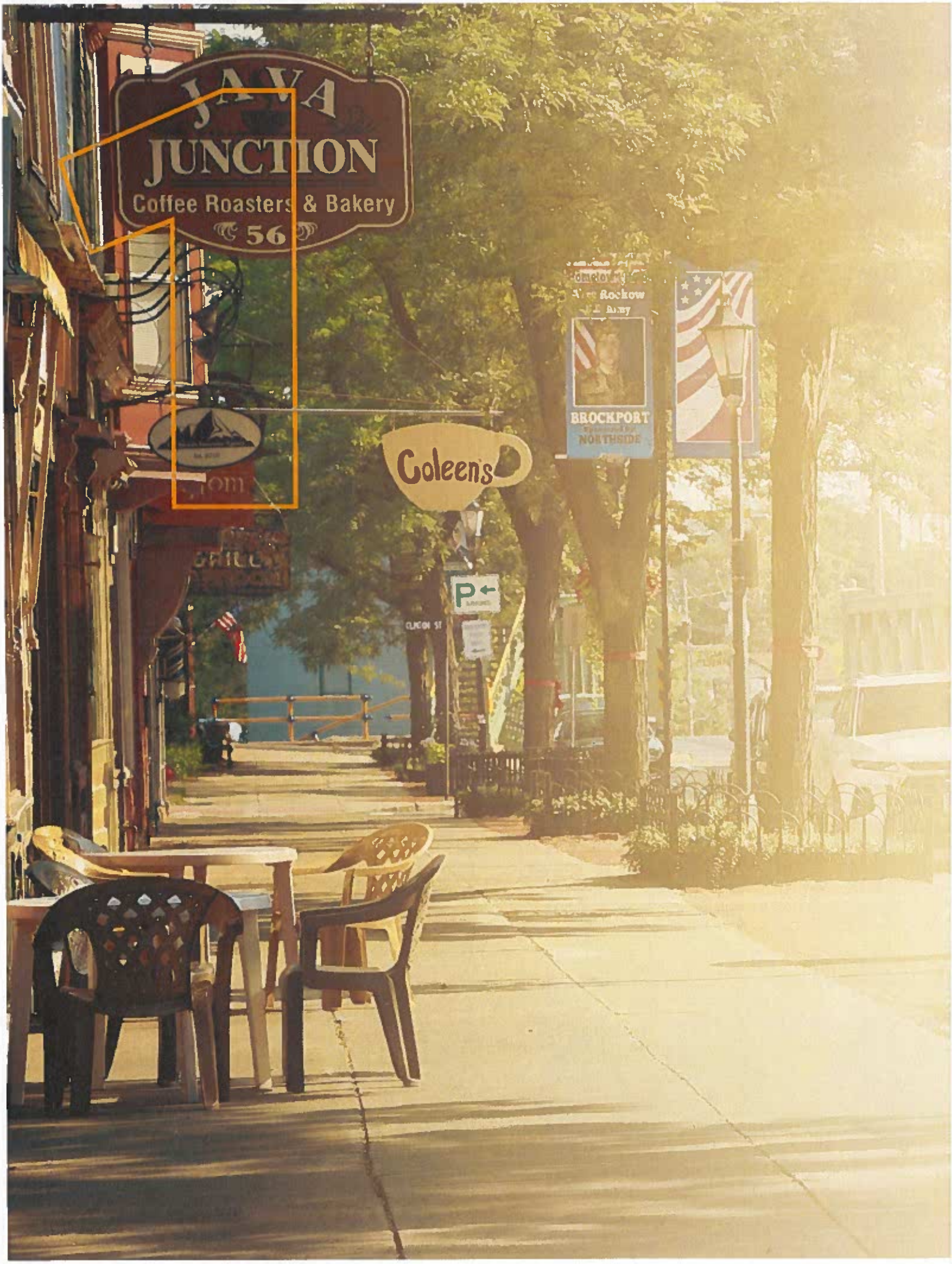
Two public workshops were held in 2022 to provide opportunities for the public to engage with the project team and participate in activities with the goal of soliciting information to inform the recommendations made in this plan.

Focus Groups

Two rounds of focus groups targeted municipalities as well as topic-specific stakeholder groups within the County. The purpose of the municipal focus groups was to understand the concerns, needs, and opportunities of Monroe County's diverse municipalities to identify areas of potential collaboration, support, resource sharing, or facilitation. The topic-specific stakeholder groups were convened to gather input on key issue areas, explore emerging trends and challenges, and incorporate subject-matter expertise into the planning process.

The stakeholder focus groups occurred during the earlier stages of plan development to inform the existing conditions analysis. The stakeholder focus groups help the project team develop a deeper understanding of issues, opportunities, and potential strategies associated with each of the plan topics.




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NORTHSIDE

1 Economic and Workforce Development

1.1 Introduction

A thriving economy and a resilient workforce are essential to Monroe County's long-term prosperity and quality of life. The County benefits from a diverse industrial base, world-class educational institutions, and a growing reputation as a hub for innovation in advanced manufacturing, life sciences, optics, photonics, imaging, and information technology. Monroe County also benefits from the size and diversity of its population base. Monroe County is the 88th largest county in the nation (of 3,144) based on the 2020 Census and sits at the center of the 54th largest metropolitan statistical area (of 387).

Recent investments, such as the establishment and expansion of a Workforce Development Fund, creation of the Equip Monroe rebate assistance program, strategic partnerships with employers, and targeted support for small businesses, demonstrate the County's commitment to nurturing both emerging and established sectors. Companies like **Amazon, Constellation Brands, and fairlife** are choosing Monroe County for major investments, signaling confidence in the region's workforce and economic potential.

However, challenges remain. Persistent barriers to employment, such as transportation access and digital connectivity, continue to limit opportunities for many residents. The County is actively addressing these gaps through initiatives like the new pilot partnership with the Rochester-Genesee Regional Transportation Authority and the Monroe County Department of Human Services to improve mobility for job seekers, and broadband initiatives aimed at bridging the digital divide. Additionally, workforce development efforts need to continuously evolve to meet the changing demands of employers and ensure that training programs are aligned with current and emerging industries.



PILLAR 1

ECONOMIC AND WORKFORCE DEVELOPMENT

GOALS

- ✓ Develop the Workforce and Support Entrepreneurship
- ✓ Create Places that Enhance Quality of Life
- ✓ Enhance Housing Access and Quality
- ✓ Strengthen Existing and Growing Economic Sectors While Investing in Emerging Industries
- ✓ Identify and Prepare Suitable Sites for Development

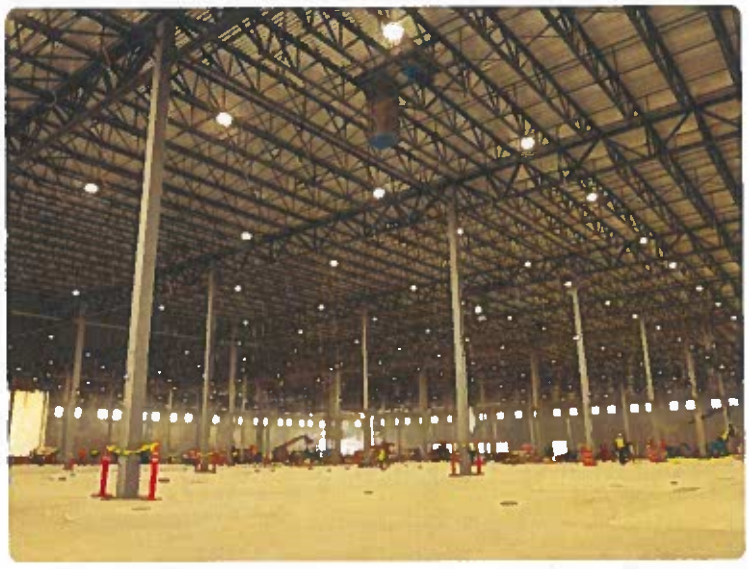
Monroe County seeks to build a strategic framework that builds on its strengths, confronts its challenges, and creates an inclusive, dynamic economy where all residents can thrive. By investing in people, infrastructure, and innovation, Monroe County is laying the foundation for sustainable growth and equitable opportunity for generations to come.

1.2 Trends

Trend 1

Economic competitiveness is linked to strong performance across multiple growth indicators.

Monroe County and the Rochester Metropolitan Statistical Area (MSA) have endured several challenges, including population stagnation, limited venture capital activity, and a slower transition from traditional manufacturing to knowledge-based industries. However, recent years have seen targeted investments in photonics, advanced manufacturing, and higher education partnerships that have begun to shift the region's economic profile. These efforts have helped the County and the MSA to improve their standing relative to other Upstate metros, such as Buffalo and Syracuse, which continue to face similar structural hurdles. Rochester exhibits strong innovation-driven growth across multiple high-tech sectors, reinforcing its competitive position within Upstate New York.



The Rochester Metropolitan Statistical Area (MSA) has shown modest and meaningful progress in recent years, climbing in the rankings due to improvements in labor market conditions, access to broadband, and a growing presence in high-tech sectors. Compared to other upstate metros, the County and MSA stand out for their diversified economy and legacy of innovation, though they still trail behind national leaders in metrics like wage growth and high-tech Gross Domestic Product (GDP) concentration.

Despite these gains, the work ahead for Monroe County remains substantial. The region needs to continue to strengthen its innovation ecosystem, attract and retain talent, and address persistent disparities in economic access. Enhancing housing affordability, expanding broadband infrastructure, and fostering inclusive workforce development are critical next steps. Moreover, the County's ability to leverage its academic institutions and research assets into scalable commercial ventures will be key to sustaining upward momentum.

In the national context, the Rochester MSA is not yet among the top-tier performers, which are typically characterized by robust tech sector growth, dynamic labor markets, and strong wage gains. Nonetheless, upward movement in national rankings, such as the **Milken Institute,** signals a positive trajectory; one that, with strategic focus and regional collaboration, could position the County as a model for mid-sized metro revitalization in the Northeast.[1]

Figure 1 provides a comprehensive look at how the Rochester MSA broadly competes with other MSAs by comparing metrics tracking a variety of growth indicators.

1. As Monroe County seeks to become a national leader in today's economy, identifying key indicators of market performance can inform policymakers as they develop strategies to foster economic growth. A competitive economy and workforce require a combination of metrics. Trends in metrics such as job growth and wages, high-tech GDP, household resilience, and more are often used as indicators of overall economic growth. The Milken Best-Performing Cities (BPC) report compares metropolitan statistical areas (MSAs) to provide a comprehensive look at the growth of an MSA by combining 13 metrics related to high-tech growth, access to economic opportunities, and labor market performance. In that vein, the Rochester MSA ranks 156th among 200 large cities in the 2025 Milken Institute BPC index, an improvement from 188th in 2024. The Rochester MSA made significant progress in short-term job growth, rising to 55th from 159th during the 2022–2023 period and 194th for the five-year period from 2018 to 2023. A similar trend is seen in Rochester's wage growth, jumping from 168th over the five-year period to 86th in 2022 and 2023.

For example, Huntsville, AL, Ogden-Clearfield, UT, and Raleigh, NC are among the highest-ranking metropolitan areas in the nation. They tend to excel in traditional economic measures like job growth, wage growth, and affordable housing.

Still, variation exists between them, demonstrating that an MSA can succeed through different economic paths. To better compete on a national level, the Rochester MSA and Monroe County will need to continue to focus on their strengths, including recent job growth and the number and concentration of high-tech industries in the area.

FIGURE 1

2025 Best-Performing Large Cities Rankings by Metric

Rankings Out of 200

GROWTH INDICATOR METRIC	ROCHESTER, NEW YORK MSA	HUNTSVILLE, ALABAMA MSA	OGDEN-CLEARFIELD, UTAH MSA	RALEIGH, NORTH CAROLINA MSA
Labor Market Performance				
2025 Rank	156	4	2	1
Wage Growth (2022-2023)	86 (6.8%)	9	36	41
Wage Growth (2018-2023)	168 (24.6%)	34	38	18
Short-Term Job Growth (July 2023-July 2024)	55 (2.1%)	58	20	22
Job Growth (2022-2023)	159 (1.3%)	5	22	19
Job Growth (2018-2023)	194 (-2.5%)	7	29	9
High Tech Impact				
High-Tech GDP Growth (2022-2023)	199 (-0.5%)	36	18	54
High-Tech GDP Growth (2018-2023)	175 (13.3%)	63	18	65
Number of high-tech industries with LQ>1	15 (10 industries)	26	105	5
High Tech Concentration Rank (LQ)	63 (0.9)	10	117	11
Access To Economic Opportunities				
GINI Index (income inequality)	106 (46.5%)	107	1	38
Resilient Households	126 (79.3%)	100	2	13
Households with affordable housing	79 (71.2%)	4	15	30
Households with broadband	158 (91.1%)	76	32	37

Source: Milken Institute, Best Performing Cities, 2025

Short-term wage growth is another metric that has recently improved and could keep rising, especially with the opportunities Monroe County offers in higher education.

From a national perspective, the Rochester MSA's location quotient (LQ) for high-tech industries is a compelling indicator of its potential for future economic performance.[2] The MSA's elevated LQ in high-tech sectors, particularly in photonics, precision manufacturing, and software development, signals that the region has a strong foundation in industries that are key drivers of innovation and economic growth. This concentration reflects not only the legacy of companies like Xerox and Kodak but also the region's ongoing transformation through investments in research institutions like the University of Rochester and RIT, as well as initiatives such as the AIM Photonics consortium and the New York Semiconductor Manufacturing and Research Technology Innovation Corridor (SMART I-Corridor) Tech Hub. Although Monroe County is not immune from the impacts a decades-long trend of manufacturing decline in the US, its entrepreneurial legacy and strong educational institutions are indicators that reinvention and a thriving future are possible. **(See Figure 2)**

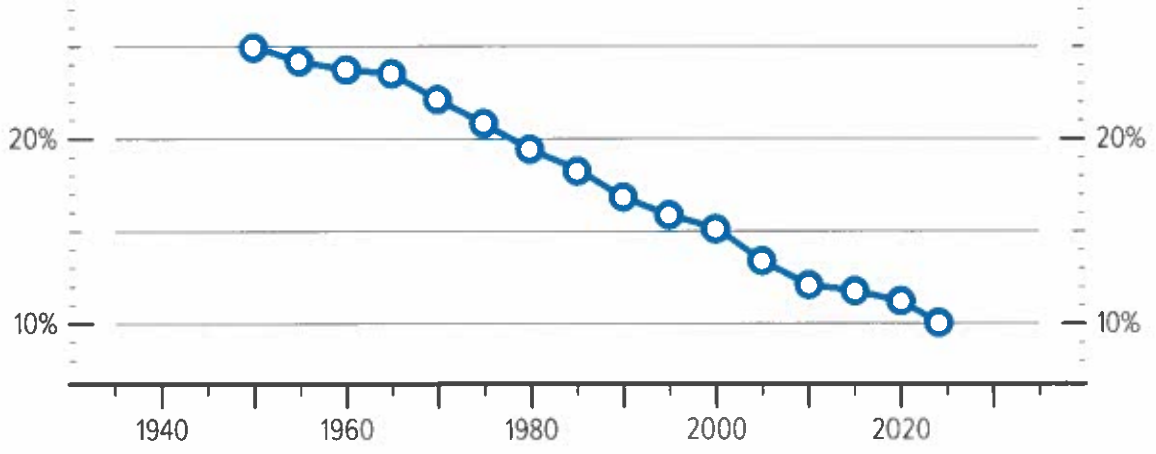
Nationally, regions with high LQs in high-tech industries tend to exhibit stronger job growth, higher wages, and greater resilience during economic downturns. These regions also attract talent, venture capital, and federal research funding at higher rates. For Monroe County, this means that the existing high-tech ecosystem can serve as a launchpad for broader economic revitalization, especially if it continues to foster entrepreneurship, scale startups, and integrate tech into traditional industries.

To fully capitalize on this advantage, Monroe County and community partners can continue to address gaps in commercialization, workforce development, and infrastructure. Strengthening the pipeline from research to market, ensuring inclusive access to tech jobs, and improving regional connectivity will be essential to translating its high LQ into sustained economic performance.

FIGURE 2

U.S. Manufacturing as a Percentage of GDP

1950–2024



US Manufacturing as Percentage of GDP | 1950–2024

Source: Bureau of Labor Statistics, Bureau of Economic Analysis, and Federal Reserve Economic Data.
Manufacturing value added as a percentage of total Gross Domestic Product.

2. The location quotient measures the concentration of a particular industry in a region compared to the national average. An LQ greater than 1.0 indicates that the industry is more concentrated locally than it is nationally, suggesting a regional specialization or competitive advantage.

Trend 2

Boosting educational attainment is critical to competitiveness in an increasingly complex, global economy.

For the last several decades, the developed world has been shifting into a complex global economy. To be a competitive player in that economy, it is increasingly crucial for Monroe County to attract and maintain highly educated and skilled labor. In the US, and particularly in New York's Erie Canal communities, manufacturing was traditionally the sector that brought wealth into the region through traded goods. However, this model has evolved significantly since the 1950s, as manufacturing as a percentage of U.S. GDP has steadily declined due to automation, globalization, and service sector growth.





While manufacturing remains an important driver of wealth for U.S. counties with large urban centers, it looks different today than it did 70 years ago. Technological advancements, combined with the position of the U.S. in global markets and trade policies, are leading manufacturing to focus on high-tech products and traded services that require fewer, more highly educated laborers with specialized technical skills.

Here again, it is useful to compare Monroe County to selected MSAs from the Milken Best Performing Cities (BPC) report to understand how educational attainment may need to shift in order to improve the County's competitiveness.

Madison County, AL, Wake County, NC, and Weber County, UT metro areas rank in the top four for competitiveness according to the Milken BPC Index. Compared to these **(Figure 3)**, Monroe County has a relatively high share of the workforce with only a high school education or less. It outranks only Weber County, UT, in terms of workforce members with a bachelor's degree or higher. However, the economic makeup that Monroe County is pursuing closely aligns with Wake County, NC, home to the Research Triangle and the most well-established tech sector among the Best Performing Cities.

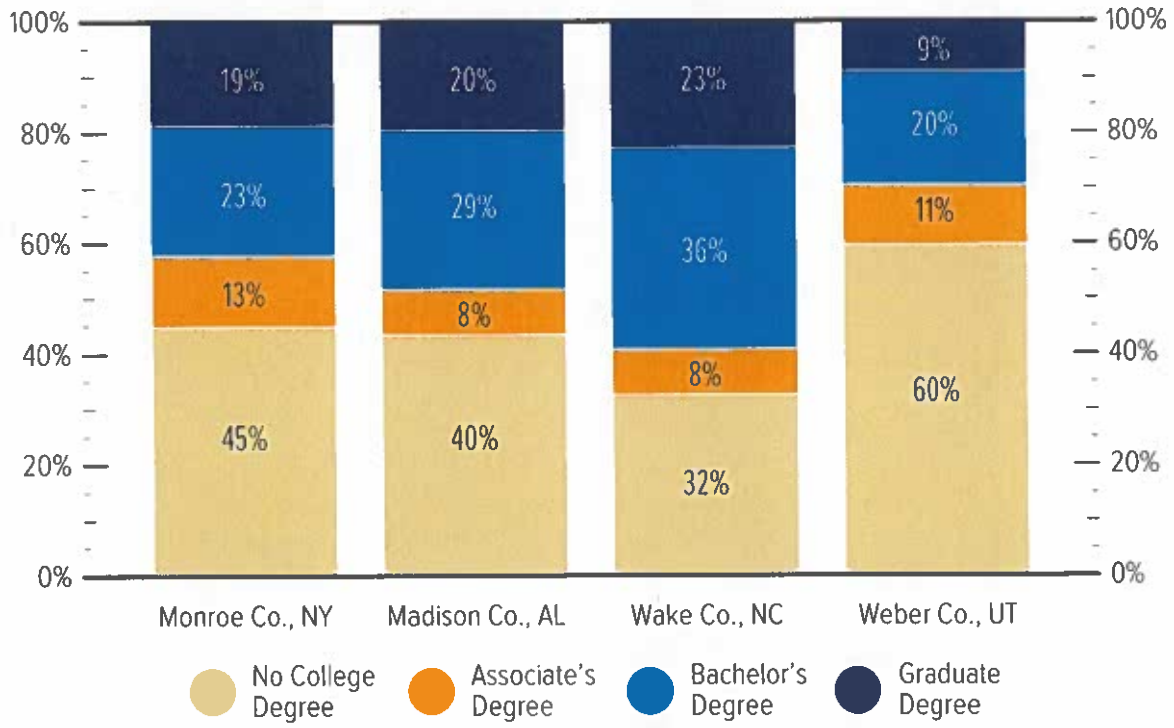


Growing Monroe County's tech industries will require increasing educational attainment rates, especially amongst those in the workforce who have a high school diploma or less. Even attaining an associate's degree would enable these workers to participate in skilled technician roles within high-tech manufacturing sectors or to engage in the economy as tradespeople. Supporting this talent development pipeline, Monroe Community College can serve as a critical asset, particularly through its optics program and strong partnerships with the University of Rochester and Rochester Institute of Technology.

Monroe County is well-positioned on a regional scale for further emergence into high-tech sectors. Monroe County's variety of educational institutions is one of its greatest assets. A high concentration of colleges and universities in the County continues to produce diverse graduates to enter the workforce. Compared to New York State as a whole, Monroe County has a higher rate of the population with a college degree and a much lower rate of individuals who did not finish high school **(Figure 4).** Overall, boosting educational attainment will help to align Monroe County's workforce with other peer counties across the nation.

FIGURE 3

Educational Attainment in Monroe County as Compared to High-Ranking BPC Counties



Education Attainment | 2024

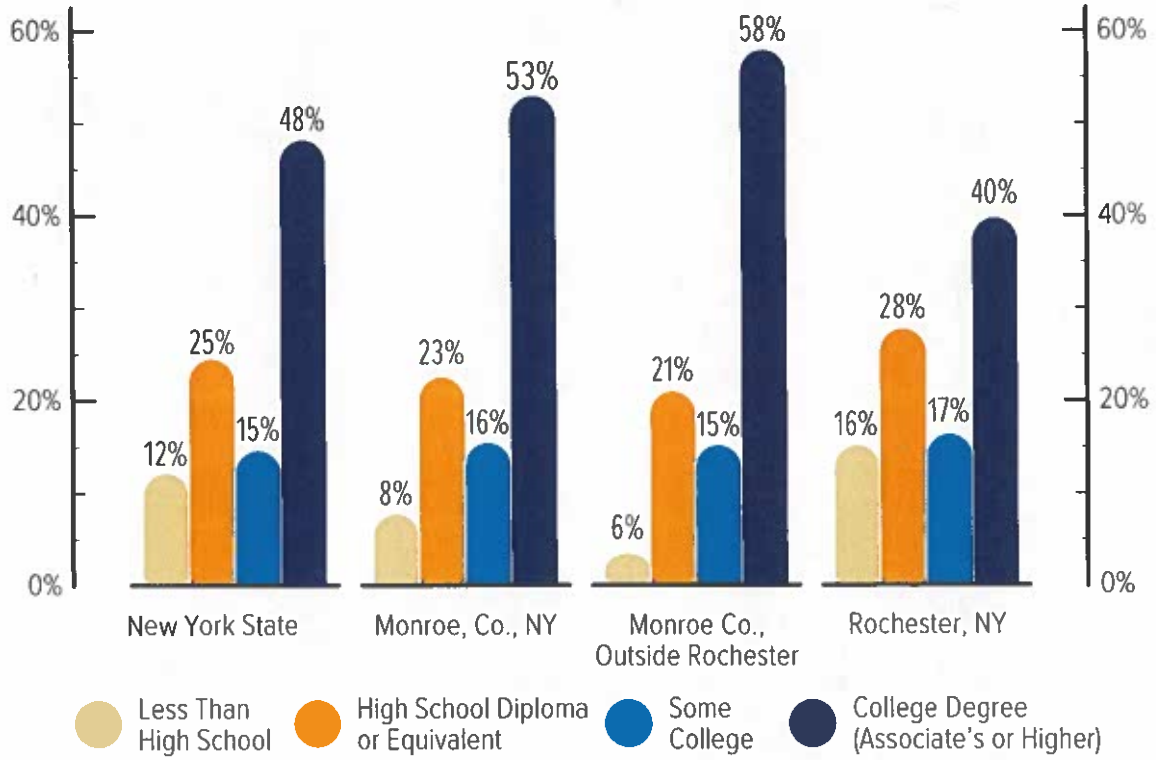
Source: ArcGIS Business Analyst, 2024

Trend 3

Widening gap between high-wage and low-wage earners highlights the changing nature of work, necessitating different skillsets for the future workforce.

Recent wage trends underscore a widening inequality between high- and low-wage earners in Monroe County, with earnings strongly tied to the type of training and education individuals receive (U.S. Census Bureau, 2025). From 2019 to 2023, the median household income in the County was approximately $74,400, trailing both the New York State median (approx. $84,600) and the U.S. median (approx. $78,500) (USA Facts, 2025). At the household level, 34.4% earned less than $50,000 annually, while just 9.9% reached or exceeded $200,000, illuminating a broad income spectrum with pronounced polarization. This trend highlights the shifting nature of today's labor market, where traditional skills-based jobs and hospitality continue to supply low-wage jobs, and low-skill jobs in science and tech industries are increasingly replaced or reshaped by automation, technology, and new business models. Meanwhile, high salaries are often concentrated in positions that require advanced education, specialized training, and adaptability to evolving technologies.

FIGURE 4
Regional Educational Attainment



Education Attainment, Regional | 2023

Source 2023 ACS 5-year Estimates

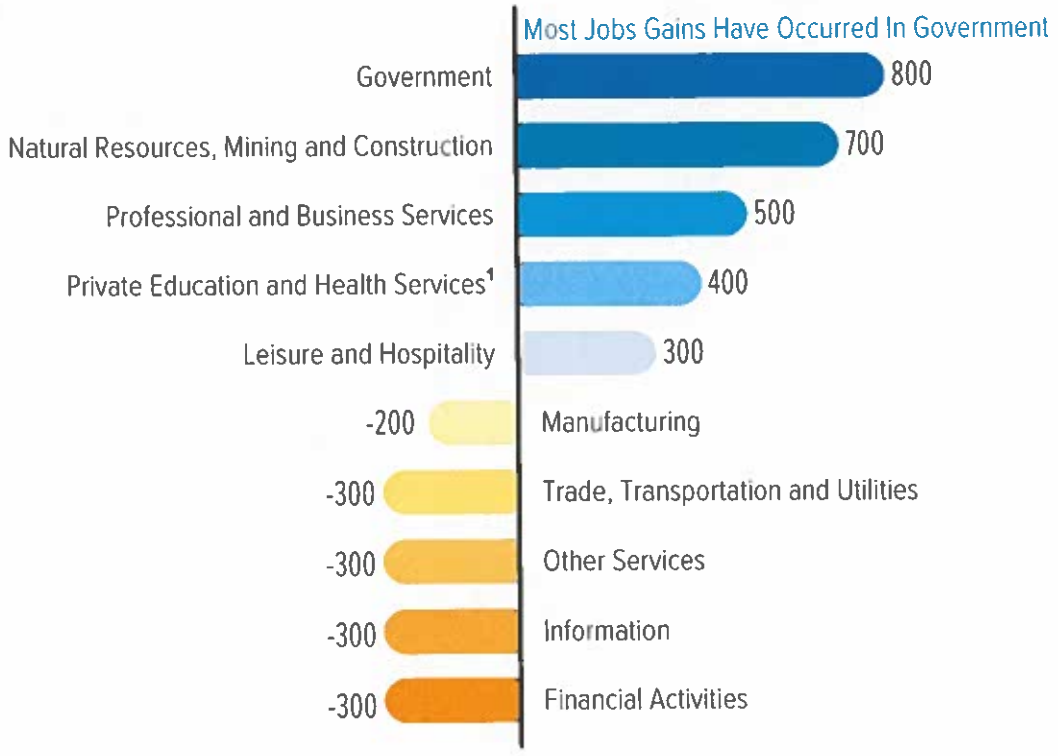
The Finger Lakes region economy is increasingly dependent on leisure and hospitality jobs; however, these jobs provide low wages, are vulnerable to instability, and do not significantly raise average annual earnings. Nationally, average hourly earnings for this sector remain modest; as of July 2025, workers in leisure and hospitality earned approximately $22.83 per hour (U.S. Bureau of Labor Statistics, 2025a), compared to $35.52 per hour (U.S. Bureau of Labor Statistics, 2025b) for those working in the education and health services, which are on the rise in Monroe County (New York State Department of Labor, 2025) **(Figure 5)**.

As illustrated in **Figure 5,** manufacturing is one of the sectors that has been declining and has seen job losses over the years (New York State Department of Labor, 2025). On the other hand, data indicate that the total number of jobs in the private sector continues to rise, including Private Education & Health Services and Leisure & Hospitality.

FIGURE 5

Finger Lakes Region Over-the-Year Change in Jobs by Sector

June 2025



Over the Year Change in Jobs | 2025

1. Private education and health services is in the private sector. Government includes public education and public health services.

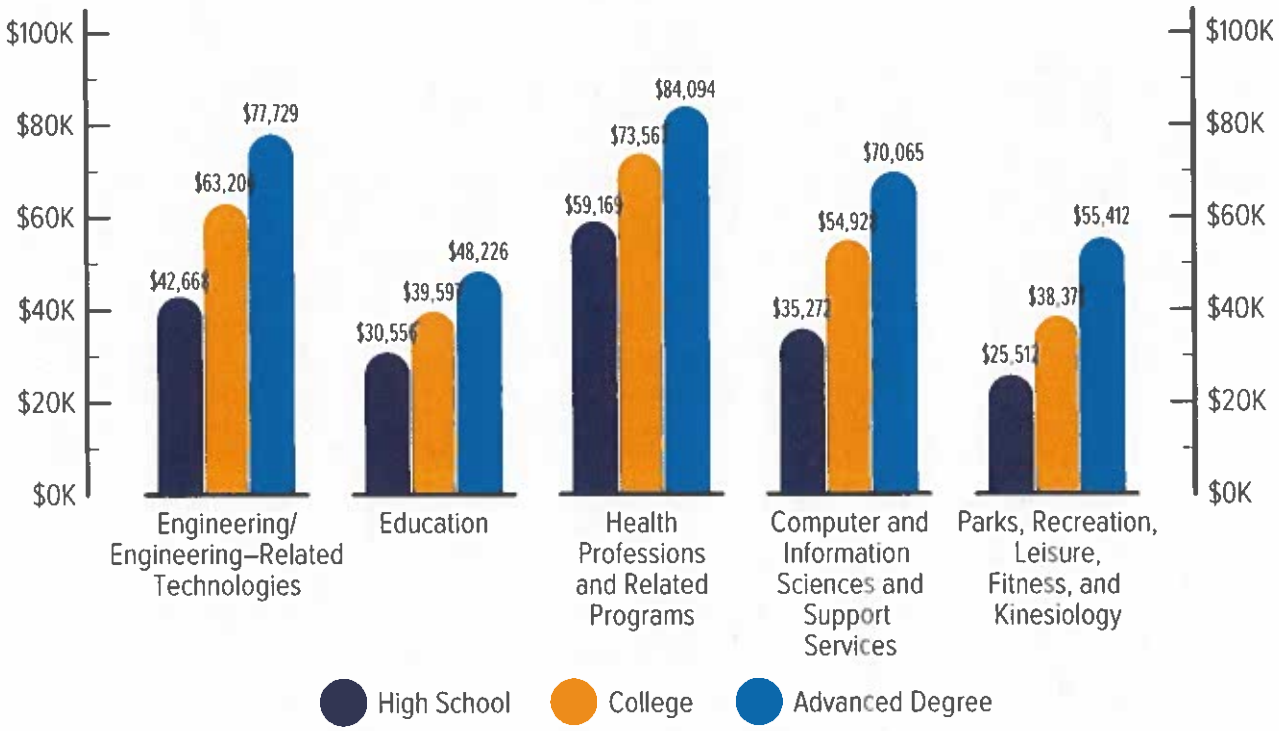
Sources: NYS DOL, 2025

To pursue strategies to strengthen its competitiveness in higher-wage industries, the County can pivot strategically toward diversifying its economic base and support development in engineering, information technology, health and medical services, and related programs **(Figure 6)**. These sectors also offer substantially higher wages and have more sustainable earning potential over the long term.

There is a need for adequate workforce development strategies that equip future workers with a more diverse skillset, including digital literacy and technical expertise, to ensure they can access competitive opportunities and thrive in an economy that increasingly rewards knowledge and innovation. By diversifying employment opportunities and attracting investment in sectors that generate higher average annual wages, Monroe County can build a more balanced economy that supports upward mobility and long-term prosperity for its residents.

FIGURE 6

Annual Earnings of Degree Holders by Industry



Annual Earnings of Degree Holders by Industry, 2022

Source: U.S. Census Bureau, Longitudinal Employer–Household Dynamics (LEHD) Data, 2025.

Trend 4

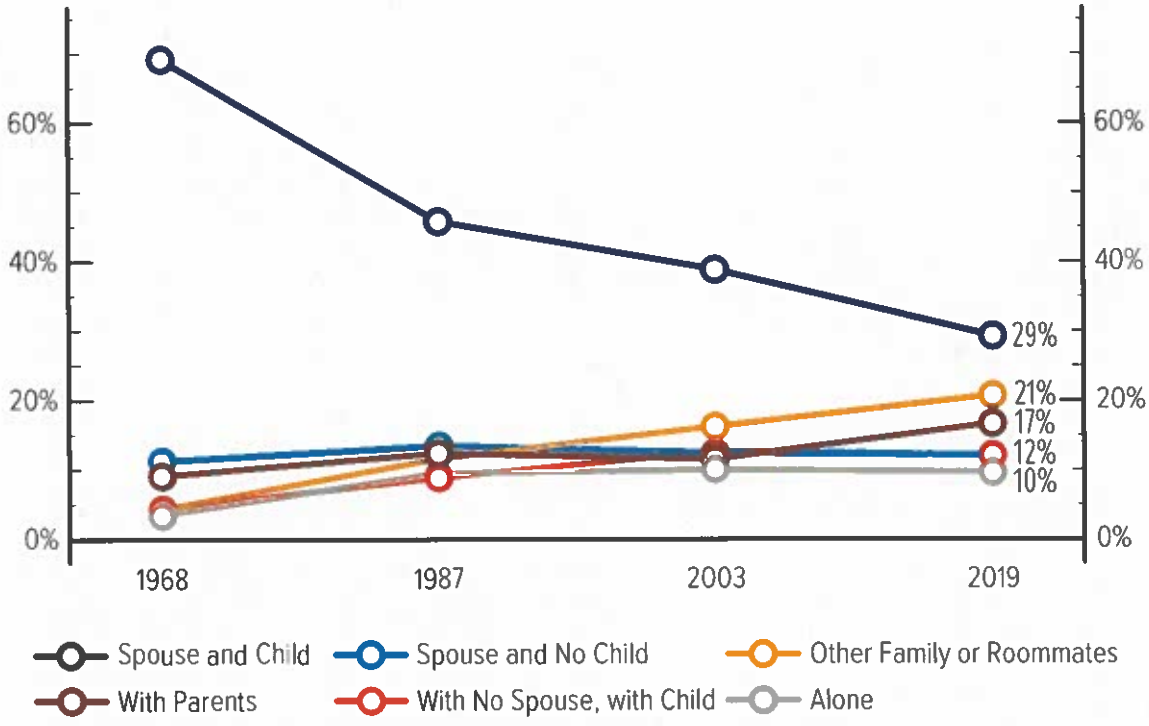
Household configurations and lifestyle preferences are changing, and housing development can change to meet new consumer needs.

The nature of American households is undergoing significant transformation, with traditional nuclear families now representing a minority of living arrangements. Increasingly, households consist of single adults, multigenerational families, and nontraditional groupings, driven by economic pressures, cultural shifts, and demographic changes. Younger generations are delaying marriage and childbearing, while older adults are aging in place, creating demand for more flexible and diverse housing options.

Household arrangements for people between the ages of 23 and 38 are an essential driver for trends in housing needs, as they are typical first-time home buyers. In 1968, these households were driven by decisions related to raising a family. **Figure 7** demonstrates that in 1968, nearly 70% of American households aged 23 to 38 consisted of parents with children. By 2019, less than 30% of these households were parents with children (Loh and Farrar, 2020).

Contemporary lifestyle preferences emphasize walkable communities, access to transit, smaller and adaptable living spaces, and sustainability. However, the housing market has been slow to respond, continuing to prioritize large-lot single-family homes that do not align with current needs.

FIGURE 7
Changing Household Configurations in the U.S.



Changing Household Configurations in the U.S.

Sources: Brookings analysis of ACS and Census data via IPUMS USA, University of Minnesota, www.ipums.org.

This mismatch between housing supply and demand has significant implications for metropolitan competitiveness. Metropolitan regions that fail to provide affordable, inclusive, and well-located housing risk losing their appeal to skilled workers and businesses. High housing costs, restrictive zoning, and inadequate infrastructure can deter talent and exacerbate inequality. Conversely, metropolitan regions that embrace zoning reform, invest in transit-oriented development, and support innovative housing models, such as co-living and adaptive reuse, are better positioned to attract and retain a dynamic workforce. In summary, housing policy is now central to economic development, social equity, and regional resilience.



1.3 What Do We Build On?

1.3.1 Economic Transformation

Over the past several decades, Monroe County has experienced a noticeable shift in its economic development, seeing a higher need for service and trade-oriented jobs as well as low-skilled health care positions taking over formerly dominant technology manufacturing jobs. Driven mainly by small businesses and supported by larger industries that form a substantial part of the local economy, the region has historically been known for its strong optics, photonics, and imaging industry, for which it still ranks first in the nation (Finger Lakes Regional Economic Development Council, 2023). Today, some of the most significant industries shaping the region include health care, manufacturing, and educational services **(Figure 8),** collectively known as the "Eds, Meds, & Manufacturing" economy. As a result, there has been a continued increase in demand for science, technology, engineering, and math (STEM) professionals, which has influenced the County's efforts to retain and attract highly skilled workers and recent graduates in those fields (Finger Lakes Regional Economic Development Council, 2023).



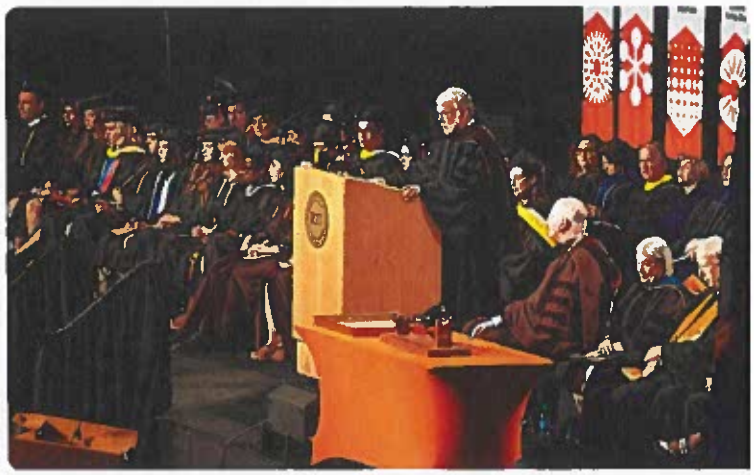


FIGURE 8

Largest Industry Clusters by Employment



Source: ArcGIS Business Analyst, 2025

The Finger Lakes Regional Economic Development Council identified emerging regional industries in IT automation, artificial intelligence, augmented and virtual reality, distributed computing, machine learning, hardware description languages, optics, internet security, wind energy, and virtual private networks (Finger Lakes Regional Economic Development Council, 2023). These sectors are expected to continue growing and will require a highly skilled workforce. **Figure 9** shows gaps for specialized skills sectors that will require training programs. The higher the number, the more training programs will be necessary to ensure desired skills are being adequately supported, with agriculture and food production having the largest training gap.

FIGURE 9

Specialized Skills Score

Higher Number Equals Larger Skills Gap

SECTOR	
Next Generation Manufacture and Optics, Photonics, and Imaging	28.47
Agriculture and Food Production	42.38
Clean and Renewable Energy	33.0
Software and Information Technology	25.69
Healthcare and Life Sciences	37.22

Source: FLREDC Strategic Plan Update, 2023

The County's top-tier colleges and universities play a vital role in advancing the entrepreneurial ecosystem through their expertise in securing grants and other funding sources, developing project proposals, research and development (R&D) testing, platforms for nurturing startups, workforce training, advisory and technical assistance, and sophisticated research labs. The added capacity provided by the numerous academic institutions in Monroe County can continue to be leveraged to develop and expand partnerships with emerging industries, thereby enhancing economic development efforts focused on region-wide collaboration and creating workforce pathways and pipelines (Finger Lakes Regional Economic Development Council, 2023).



The average number of employees for a business in Monroe County is 13.1 (ESRI Business Analyst 2025). Small and medium-sized businesses (SMBs), including niche and experience-based retail stores, play a pivotal role in the economy of the Finger Lakes Region and Monroe County **(Figure 9).** According to the Milken Institute, SMBs form the backbone of the American economy, contributing significantly to job creation and local economic resilience (Milken Institute, 2015). Other research shows that SMBs actually have a greater impact on the local economy because they tend to buy their materials from local suppliers (Wagner et al., 2005). Moreover, small businesses and retail stores generate a positive ripple effect by creating places and neighborhoods people want to visit. This helps foster a greater sense of community in downtown and commercial areas, attracting more new businesses **(Figure 10).**

FIGURE 10

Labor Market Briefing

Finger Lakes • August 2025

More than Half of Businesses in the Finger Lakes Have Fewer than 5 Employees.

Number of Firms and Average Monthly Employment, Private Employment.

NUMBER OF EMPLOYEES	FIRMS				EMPLOYMENT			
	Number		Percentage		Number		Percentage	
	2020	2025	2020	2025	2020	2025	2020	2025
A. 1-4	11,100	11,310	52.5%	53.2%	21,420	21,970	4.6%	4.8%
B. 5-9	4,020	3,960	19.0%	18.6%	26,400	26,200	5.7%	5.7%
C. 10-19	2,610	2,670	12.3%	12.6%	35,290	36,200	7.6%	7.9%
D. 20-49	2,020	1,980	9.6%	9.3%	61,660	60,030	13.3%	13.1%
E. 50-99	710	680	3.4%	3.2%	49,260	47,430	10.7%	10.4%
F. 100-249	460	450	2.2%	2.1%	71,850	66,180	15.5%	14.5%
G. 250-499	130	130	0.6%	0.6%	44,470	46,080	9.6%	10.1%
H. 500-999	70	60	0.3%	0.3%	45,120	37,330	9.8%	8.2%
I. 1,000+	30	30	0.1%	0.1%	106,590	115,190	23.1%	25.2%

Note: Size class 1-4 indicates firms that have average employment that is >0 but <1.

Source: Quarterly Census of Employment and Wages, 2020 Q1 and 2025 Q1

However, since the COVID-19 pandemic in early 2020, the nature of business has changed, and the retail industry has shifted from providing goods and services toward experiential and niche markets, such as salons, health and fitness centers, outdoor and sporting goods stores, art galleries, gift shops, and restaurants, amongst others (Alexander and Varley, 2025). While online shopping became more prevalent during the pandemic emergency period, brick-and-mortar stores remain popular, and in-person services continue to serve as a strong foundation for fostering and sustaining entrepreneurship. In addition, the rise of experience-based retail has been part of a larger, ongoing national trend (Pine and Gilmore, 1998), highlighting the shift from service-based industries to experience-based economic offerings that utilize emerging technologies such as artificial intelligence and virtual reality (Solanki, 2025). The expanded use of technology in retail, increasingly applied in creative ways to attract customers and boost sales, will require a new set of skills, even for positions that have traditionally been considered lower-skilled (Williams, 2025).

Nevertheless, access to capital remains a critical factor for SMBs to thrive, especially in regions like Rochester, where legacy industries are transitioning. Tailored financial strategies and supportive public policies can empower these businesses to expand and innovate, thereby fueling regional economic growth (Milken Institute, 2015).

Following is the list of Business Support Resources in Monroe County that assist businesses at every stage, from startup to expansion.



- **Financial Assistance:** Composed of the County of Monroe Industrial Development Agency (COMIDA) and the Monroe County Industrial Development Corporation (MCIDC), Monroe County Economic Development (2025) offers loans, rebates, tax incentives, and workforce training to support businesses from startups to enterprise-scale expansion.

- **Advisory & Development Services:** Small Business Development Centers (SBDCs) provide free, confidential counseling; SCORE Greater Rochester offers mentorship and practical tools for startups and growing enterprises. Greater Rochester Enterprise (GRE) provides free, 'concierge'-style services to businesses of all sizes seeking to grow within or relocate to the 9-county Finger Lakes region, as well as access to support services for existing businesses navigating challenges around facility needs, costs, and access to talent or infrastructure.

- **Certification & Contracting Opportunities:** Programs such as the Minority & Women-Owned Business Enterprise (M/WBE) Certification Program designed to streamline processes and expand market access, particularly for minority-, women, and veteran-owned businesses. The Monroe County-Upstate NY (MCUNY) APEX Accelerator helps businesses enter and participate in government supply-chain opportunities by providing education and training necessary for firms to access DoD and other federal, state, and local contracts.

- **Educational & Research Institution Support:** The Rochester Technology and Manufacturing Association (RTMA), Workforce Development Institute (WDI), and area colleges/universities such as Monroe Community College's FWD Center and Applied Technology Center provide technical expertise, workforce training, and innovation-driven assistance. The Business Insight Center at the Rochester Public Library offers no-cost access to market research, business plan assistance, patent viability and filing guidance, and referrals to funding sources. NextCorps is a non-profit helping innovative technology companies launch and grow in Rochester, affiliated with the University of Rochester and funded in part by Empire State Development's Division of Science, Technology and Innovation, the MEP National Network, and NYSERDA. NextCorps, home to Luminate NY, is New York State's first and only incubator and accelerator dedicated to optics, photonics, imaging, and laser technology startups.

- **Recruitment and Hiring:** RochesterWorks offers businesses free access to its job board for posting and filling vacancies, hosts industry- and company-specific job fairs, and offers a variety of programs funded at the federal, state, and local levels that cover training and recruitment costs for new hires. The Greater Rochester Chamber administers Beyond TalentEdge, a full-service hiring agency that can handle the process from recruitment to onboarding for Chamber members. The Chamber's Talent Strategy Division also manages several initiatives focused on retaining college and university talent, hiring veterans, and relocation assistance.

In Monroe County and similar regions, SMBs are seen as catalysts for revitalization, especially when integrated into land use planning and civic infrastructure. Monroe County and the Rochester MSA are well-positioned to harness the power of SMBs, particularly those rooted in local culture and consumer experience, as engines of sustainable and inclusive economic transformation and renewal.

Case Study

The Commissary Downtown Food Incubator and Mercantile on Main

The Mercantile on Main, located inside the former Sibley's Department Store, is the first successful food court-style space in Rochester in recent decades and an example of successful adaptive redevelopment of a historic space and long-vacant facility into a vibrant community asset and hub for commercial activity. The redevelopment project is helping to revitalize downtown Rochester, support entrepreneurship, and provide permanent jobs to residents. When the Mercantile on Main opened, five of the seven vendors were minority or women-owned businesses. Mercantile provides entrepreneurs with the space to effectively grow their businesses and clientele, while minimizing equipment costs and not requiring long-term leases.

The Mercantile is a centerpiece of the Sibley Square's mixed-use reimagining undertaken by WinnCompanies that also includes market-rate, affordable, and senior housing; commercial and industrial suites, and NextCorps, Greater Rochester's primary startup accelerator, coworking space, and launchpad for technology innovation. Connected to the Mercantile, the Commissary is a New York State certified Commercial Kitchen, which means vendors can prepare food that meets NYS guidelines to be sold and consumed by the public.

The Commissary, established in 2020, provides current and aspirational entrepreneurs access to a fully-permitted commercial kitchen and equipment and viable facility within which to make, refine, and launch products and dishes for local consumers.

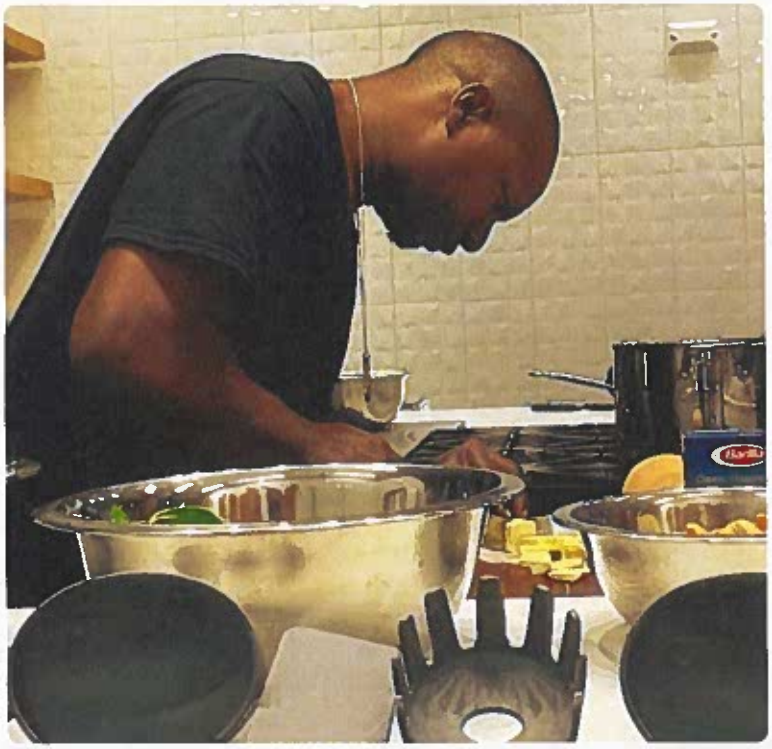


Shared space within the Commissary can be used by members for hosting private meals or events, preparing food to be sold in food trucks, and storing equipment and ingredients. The Mercantile's proximity offers Commissary members further access to established business owners and space to market and sell product. Rentable space minimizes entry costs into the food industry by eliminating the need for members to own a professional kitchen or storefront.

Of the total 43 members of The Commissary, 57% are BIPOC-owned and 52% are women-owned, inspired by successful models in New York City and other larger metros and pioneered by the Rochester Downtown Development Corporation, also provides workshop opportunities and an "entrepreneur-in-residence" program that connects members with local food industry owners who help them expand their business. This serves as an example of how to successfully support and remove barriers for entrepreneurs in the County.








DEAR CUSTOMERS &
DRIVERS
WE ARE ONE FACILITY WITH
MANY DIFFERENT MEMBER
BUSINESSES
PLEASE ONLY PRESS THE
DOORBELL FOR THE BUSINESS
YOU ARE ORDERING PICKING
UP FROM
SOMEONE WILL BE OUT TO
ASSIST YOU SHORTLY
WE TRULY APPRECIATE YOUR
BUSINESS & PATIENCE!



1.3.2 A High Quality of Life

Monroe County is situated along the southern edge of Lake Ontario in Western New York. People are drawn to its distinctive parks and trail systems, community amenities, cultural resources, high-rated public schools, employment opportunities, strong sense of place, and high quality of life. Nationally, planning efforts are increasingly focused on elevating quality of life as a key driver for economic growth. The link between quality of life and economic development is multifaceted; a high quality of life positively influences things like community health and well-being, education, and public engagement. Meeting people's basic needs allows them to be more productive and contribute more meaningfully to the economy. Likewise, as an economy grows and develops, it generally leads to higher incomes, improved public services, technological advancements, and better job opportunities (Appio et al., 2019).

While competitive rent is one factor businesses consider when choosing a workplace location, workplace design, location, worker talent, and growth potential all play a role in this decision. The greater Rochester area continues to offer a strong job market for young professionals and has been recognized among the top metro areas in the U.S. for affordability, competitive wages, technology innovation, and future growth. Maintaining and building on Monroe County's quality of life will strengthen its appeal to new businesses and residents.

As companies consider where to locate, they also evaluate the type of environment their workforce will want to live in. Monroe County's median sales price for a single-family home in September 2025 was $270,000, compared to $435,295 for the nation (Redfin, 2025). Along with its lower cost of living, Monroe County offers quality of life features that appeal to young people, empty nesters, and seniors alike. For example, walkable, higher-density, mixed-use neighborhoods enable residents to live, work, and play within their communities. These neighborhoods already exist in Monroe County's villages as well as neighborhoods in Rochester, and there is growing demand and some progress in suburban and rural areas. Monroe County is shifting its focus toward community-oriented development projects, such as providing sufficient housing options, multimodal transit access, and maintaining neighborhood green spaces.



Through an extensive multimodal network, Monroe County residents are well-connected both regionally and globally. Major interstates from all directions improve access to goods and services in rural and suburban areas, while train and bus services link the County to surrounding regions. The Frederick Douglass Greater Rochester International Airport (ROC) has received national recognition for its quality and quick service, offering daily flights to major U.S. and Canadian hubs. ROC provides flights to cities such as Boston, New York, Detroit, Toronto, and Washington, D.C., all less than 1.5 hours by air. Recently, new direct service routes and more budget-friendly airlines have emerged due to increased demand and advocacy, with leadership focusing on business development in collaboration with airlines. The County recently completed a major modernization of the airport and continues to invest in key capital improvements supported by state and federal funds. Recent upgrades focused on enhancing the customer experience, including the installation of a parking guidance system, extended canopy walkways for all-weather protection, larger entryways for better accessibility, and faster baggage handling systems. These improvements, along with renovated passenger areas and expanded dining and amenity options, aim to make travel easier, more convenient, and to attract more users.



Monroe County's historical development is intrinsically linked to its waterways. The Genesee River, a tributary of Lake Ontario, was central to the growth of the County. The completion of the Erie Canal in 1825 allowed mills to ship products and materials to New York City, opening the region to new opportunities for commerce, leading to transformational economic growth. While the Genesee River and the Erie Canal are no longer the industrial engines of commerce they once were, they are recreational corridors that attract tourists and support waterfront municipalities today. Waterway corridors guided the urban development pattern of the County, with villages like Fairport, Pittsford, Spencerport, and Brockport, as well as the City of Rochester, located along historical routes of the Erie Canal, parts of which are now the NYS Barge Canal and Empire State Trail.

Monroe County's artistic, cultural, recreational, and educational resources contribute to a high quality of life. Monroe County has an excellent parks system, including the newly proposed High Falls State Park, one of only two NYS parks located within a city, and the Seneca Park Zoo, which has been open since 1893 and features hundreds of animal species to encounter year-round. Sports fans can watch the Triple-A Affiliate Rochester Red Wings baseball team in Rochester, while music fans can enjoy world-class performances by the Rochester Philharmonic Orchestra (RPO) across classical and contemporary genres. Monroe County is known for vibrant annual festivals, including the International Jazz Festival, Rochester Lilac Festival, Fairport Canal Days, Rochester Fringe Festival, and Harbor Fest at Ontario Beach Park. These and other events that feature local food, music, vendors, historical tours, and more can continue to be leveraged to solidify Monroe County as a regional hub for creative expression and cultural engagement. The County is developing an Arts and Culture Plan to advance the impact of the arts.

FIGURE 11
Higher Education Institutions by County

COUNTY	HIGHER EDUCATION INSTITUTIONS
Monroe County	16
Erie County	13
Onondaga County	11
Albany County	13

Source: NYS GIS Clearinghouse, 2025

Businesses are also attracted to places where they know they will find desired skills. Compared to peer counties in Upstate NY, Monroe has the highest number of higher education institutions **(Figure 11).** Monroe County has the advantage of skilled graduates from 16 higher education institutions, including schools in the SUNY system, private universities, and specialized schools. In addition, the Monroe County Library System consists of 20 independent public libraries working together to provide enriching library services to community members of all ages. Continuing to invest in equitable educational opportunities for its residents is one of the most critical things Monroe County can do to increase competitiveness on a broad scale.

Bright Minds

The **Greater Rochester area** attracts and produces some of the brightest minds in the country. According to the Greater Rochester Enterprise website:

8 PUBLIC HIGH SCHOOLS RATED AMONG THE TOP

10%

IN THE NATION

91%

OF RESIDENTS HAVE A HIGH SCHOOL DEGREE OR EQUIVALENT

66%

OF RESIDENTS HAVE SOME COLLEGE EDUCATION



1.3.3 Position in the SMART I-Corridor (High-Tech Manufacturing)

Semiconductor and other high-tech manufacturing operations present one of Monroe County's most promising emerging economic opportunities. The New York Semiconductor Manufacturing and Research Technology Innovation Corridor (NY SMART I-Corridor Tech Hub), an initiative to advance semiconductor manufacturing capabilities, has been awarded $40 million in federal funding for projects dedicated to workforce, supply chain, research and development, and strategic support (U.S. Economic Development Administration. 2025). Five major semiconductor fabrication plans (fabs) and nearly 100 supply chain firms are underway across the NY SMART I-Corridor. Within the next decade, the U.S. Economic Development Administration projects that one in four American-made chips will be produced within 350 miles of the NY SMART I-Corridor **(Figure 12)**.

The NY Smart I-Corridor is a coalition of over 100 organizations—spanning businesses, higher education, economic development groups and community-based organizations—convened by the Buffalo Niagara Partnership, CenterState CEO and OneRoc. Together, they are positioning Upstate New York as a global leader in semiconductor manufacturing, innovation and workforce development.

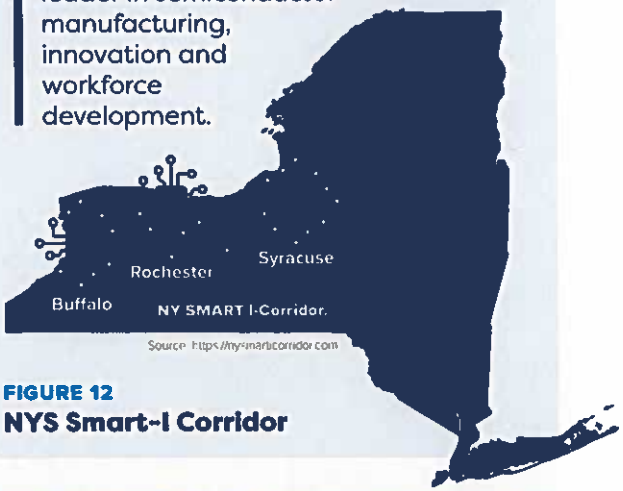


FIGURE 12
NYS Smart-I Corridor



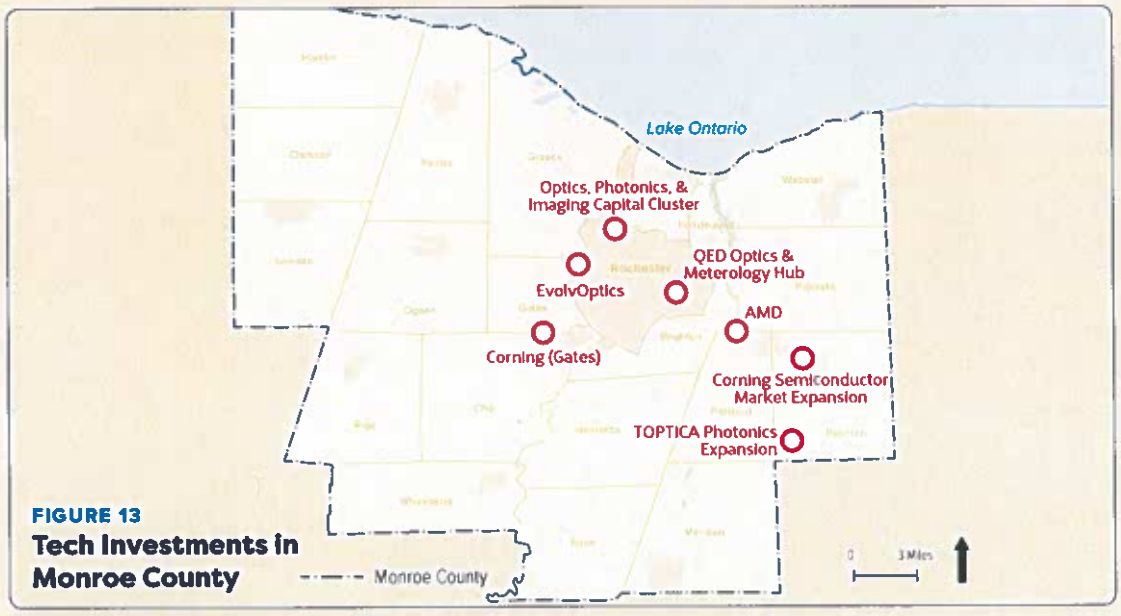


FIGURE 13
Tech Investments in Monroe County

Case Study

Tech Investments in Monroe County

Monroe County has already witnessed **multiple major investments in the photonics and semiconductor sectors** within this corridor including:

- **AMD's New Research and Design Hub (Pittsford).** A state-of-the-art research and design facility in 2023, establishing operations at Linden Oaks Office Park- create up to 165 new semiconductor R&D jobs.
- **Corning Semiconductor Market Expansion (Fairport & Gates).** In 2022, Corning Inc. announced a $139 million expansion at two Monroe County sites (Fairport and Gates) to meet surging semiconductor industry demand—add nearly 270 jobs in Fairport with new manufacturing space and a Development & Engineering Center of Excellence and a new laser optics production facility in Gates.
- **American Institute for Manufacturing Integrated Photonics (AIM Photonics) Test, Assembly & Packaging facility at Eastman Business Park**—a key national photonic integrated circuit development hub.
- **TOPTICA Photonics Expansion (Perinton).** TOPTICA Photonics, a laser systems manufacturer, opened a 30,000 sq. ft. facility in Perinton—$2.7 million expansion added ISO Class 7 cleanrooms, labs, and offices,QED Optics & Metrology Hub (City of Rochester): QED Technologies International, a Rochester-based maker of precision optics manufacturing equipment, launched an $18.7 million expansion in 2025 to create a world-class optics fabrication and R&D center.
- **EvolvOptic Formation and Growth (City of Rochester).** Advanced Glass Industries (AGI) acquired Glass Fab Inc., merging two legacy Rochester optics firms into a new entity EvolvOptic. The combined company is investing $5.1 million to expand operations in Monroe County, with plans to create up to 40 new jobs over five years.

For Monroe County, the challenge is to secure a competitive share of this growth. In 2023, New York State created the Governor's Office of Semiconductor Expansion, Management, and Integration (GO-SEMI) with $45 million to coordinate chip industry development. Along with the Green CHIPS incentive law (2022), these initiatives signal the state's commitment to attract chip fabs and suppliers. Industry projections suggest that by 2030, the semiconductor industry could support about 500,000 NY jobs (115,000 new) statewide. While not a Monroe-specific metric, it underscores the scale of opportunity the County is aligning with. Recent project announcements, such as AMD's New Research and Design Hub and Corning Semiconductor Market Expansion, highlight progress toward these larger targets.

While there may not be a single formal scoreboard solely for photonics/semiconductors, several concrete measures are used to monitor progress in this area:

1. Jobs Created/Retained in OPI and semiconductor projects (with recent examples contributing several hundred new jobs and thousands retained);
2. Capital Investment Attracted (e.g., over $1.77 billion in private and public co-investment has been leveraged in the Finger Lakes via 100+ projects under "Finger Lakes Forward," much of that in high-tech industries);
3. Number of Firms/Startups in the Sector (growth from around 100 to 150+ optics/photonics firms in the past decade, and new semiconductor firms establishing a local footprint, like AMD);
4. Workforce Development Milestones (for example, Monroe Community College launching the nation's first optical systems technology A.A.S. degree, or new apprenticeship programs—indicating a pipeline of skilled workers).

Despite recent momentum, Monroe County has yet to secure a major anchor semiconductor fabrication facility. In addition, emerging startups in the region continue to face significant barriers, including limited access to cleanroom space and early-stage capital, both of which are critical to scaling operations in the semiconductor industry. Integrating into regional networks like the Supply Chain Activation Network (SCAN), fostering partnerships, and advocating for state and federal support will be critical to closing these gaps.

To compete with other regions, Monroe County could also leverage its skilled workforce, R&D institutions, comprehensive incentive packages, and regional collaboration to ensure the County captures long-term growth in photonics and semiconductors. To fulfill this need, Monroe County continues to invest and proactively participate in Greater Rochester Enterprise and OneROC efforts to promote and advance investment in Monroe County through competitive site selection projects and participation in major industry events, such as SEMICON.

Greater Rochester Enterprise (GRE) is a not-for-profit economic development organization committed to attracting new capital investments, creating regional wealth, and new jobs throughout the Greater Rochester, NY region.

OneROC is a regional economic development alliance accelerating investment, collaboration, and growth across Greater Rochester, NY. As the regional lead for the Regional Revitalization Partnership (RRP) and NY SMART I-Corridor Tech Hub, OneROC aligns public and private sector efforts to create even greater positive impact.

1.3.4 Untapped Potential of the Transportation Network

Monroe County has undertaken a study, the Multimodal Freight Initiative (MMFI), to explore investment in manufacturing, transportation, and other key economic sectors, creating good-paying jobs for county residents across all socioeconomic backgrounds and educational attainment levels. The MMFI can serve as a strategic, commonsense approach to economic development that expands access to markets and reduces costs for local businesses.

The initial phase of the MMFI is an economic assessment and market feasibility analysis. This evaluation builds upon previous economic development and transportation planning through new quantitative and qualitative research regarding projected benefits and impacts to Monroe County and the larger Finger Lakes Region. Freight investment strategies that incorporate this original research are being formulated and screened relative to their market feasibility.

Following the selection of the freight investment strategy with the greatest economic benefit, candidate sites will be identified and refined. Master planning of the preferred site(s) will be conducted in a manner that is scalable, coordinated, and can be phased to ensure development adheres to changes in market conditions and the availability of resources. Based on this advanced site planning, preliminary and schematic design—sufficient to conduct environmental reviews—will be advanced for infrastructure and facilities, respectively.



Beyond physical development, a qualified workforce to build, maintain, and operate the facilities and infrastructure that will drive increased competitiveness for goods-producing firms will be key to the success of the MMFI. By partnering with labor and industry, apprenticeships and other applied learning opportunities can be created for and promoted to individuals seeking well-paying careers who do not want to pursue additional skills development via traditional higher education.



1.3.5 Agriculture-Driven Economics

Monroe County has highly productive agricultural soils and a rich legacy of farming operations and expertise. Agriculture constitutes approximately 33% of the County's land cover **(Figure 14).** However, more recently agricultural land has been lost to low-density single-family housing and other development projects, which have fragmented traditional agricultural working lands and operations. Moreover, farms in Monroe County follow the national trends of consolidation of large producers, pushing out small, family-owned farmers. This makes it challenging for newer farmers, particularly those with smaller operations, to compete in agricultural markets or stay afloat. Farm loss has been gradually happening over the past 30 years, with a 15% decrease in the total acreage of farmland (Monroe County, 2025g). County-level planning is crucial in ensuring that farmers and farm workers can secure living wages, receive adequate benefits, and work in safe conditions. The County can work with local municipalities to facilitate protective measures, to help preserve agricultural lands as viable working spaces and reduce conflicts with neighbors.

Although agriculture in Monroe County is not as strong as other industries in the County (i.e. it generates the lowest Gross Regional Product (GRP), is the smallest industry cluster and employing occupation and makes up only a relatively small portion of the economy 1.3% of the Statewide value of sales, 4% of County earnings and 0.25% of all Monroe County jobs), the agriculture-driven economy significantly contributes to the economy and quality-of-life for local residents (ESMI Estimate, 2021). Agriculture provides the County with essential food supply, increases community engagement, supplies food and cover for wildlife, contributes to economic growth, and enhances rural development.

The top-selling agricultural products in Monroe County are grains and legumes, vegetables, and nursery/ greenhouse products **(Figure 15).** The 511 farms in the County provide $101,082,000 dollars of market value of agricultural products sold (USDA NASS, 2022) and provide jobs for 1,289 seasonal or year-round workers (USDA NASS, 2022b).







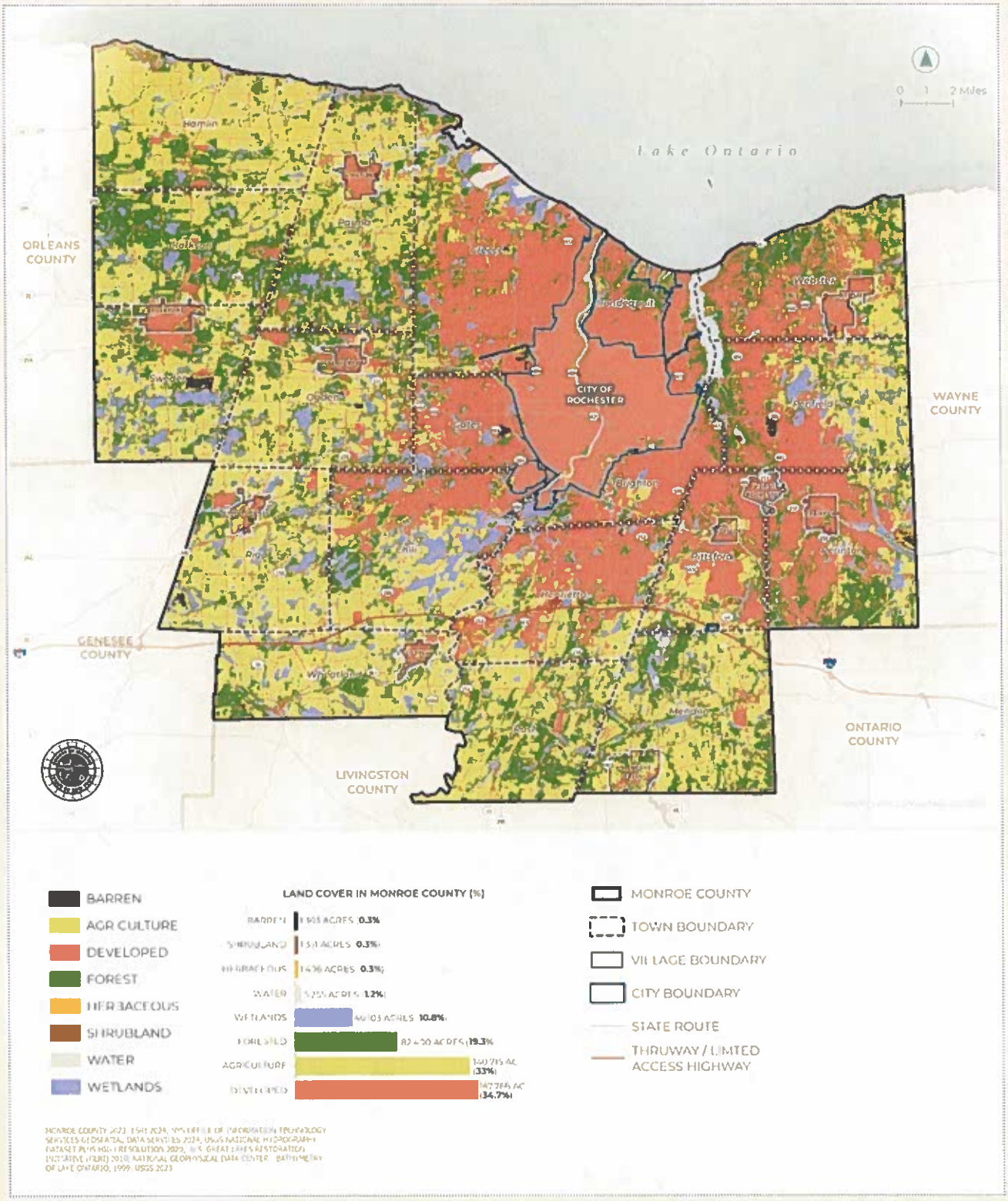


FIGURE 14

Land Cover in Monroe County

Agricultural and Farmland Protection Plan

Source: Monroe County Agricultural & Farmland Protection Plan, 2025

The agricultural producers in the Greater Rochester Area have contributed to a strong regional food and beverage manufacturing sector represented by employers such as Wegmans, LiDestri Foods, Constellation Brands, FIFCO USA, Baldwin Richardson Foods, and others. Over 250 food and beverage companies take advantage of Monroe County's supply chain assets including precision manufacturing, engineering, packaging support, transportation systems, and collaborative research institutions. Regionally, this industry employees over 10,000 workers with a range of skills.

Technological innovations and advancements have enabled more efficient food production, which in turn reduces the need for human labor. Providing adequate educational opportunities to retrain and reskill workers will be pivotal to the shift towards more technology and automation in agriculture. The agricultural sector currently faces challenges due to shifting regulations, high overhead costs, climate change, and volatile product prices. Nevertheless, even as farm sales continue to increase, so do the farm expenses such as the cost of production, equipment, labor, petroleum, seed, feed, fertilizer and livestock, essentially evening out the gains and losses **(Figure 16)**.

FIGURE 15

Market Value of Products Sold, by Commodity or Commodity Group

2012–2022

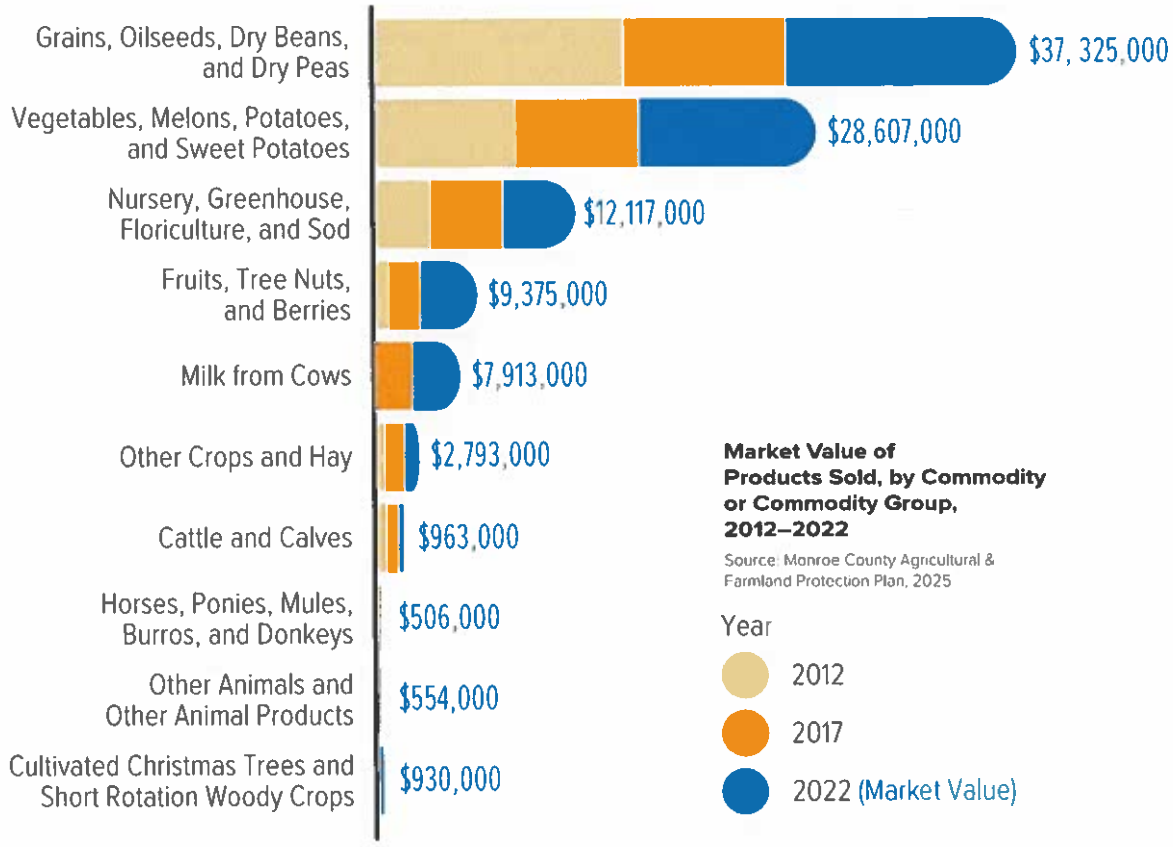
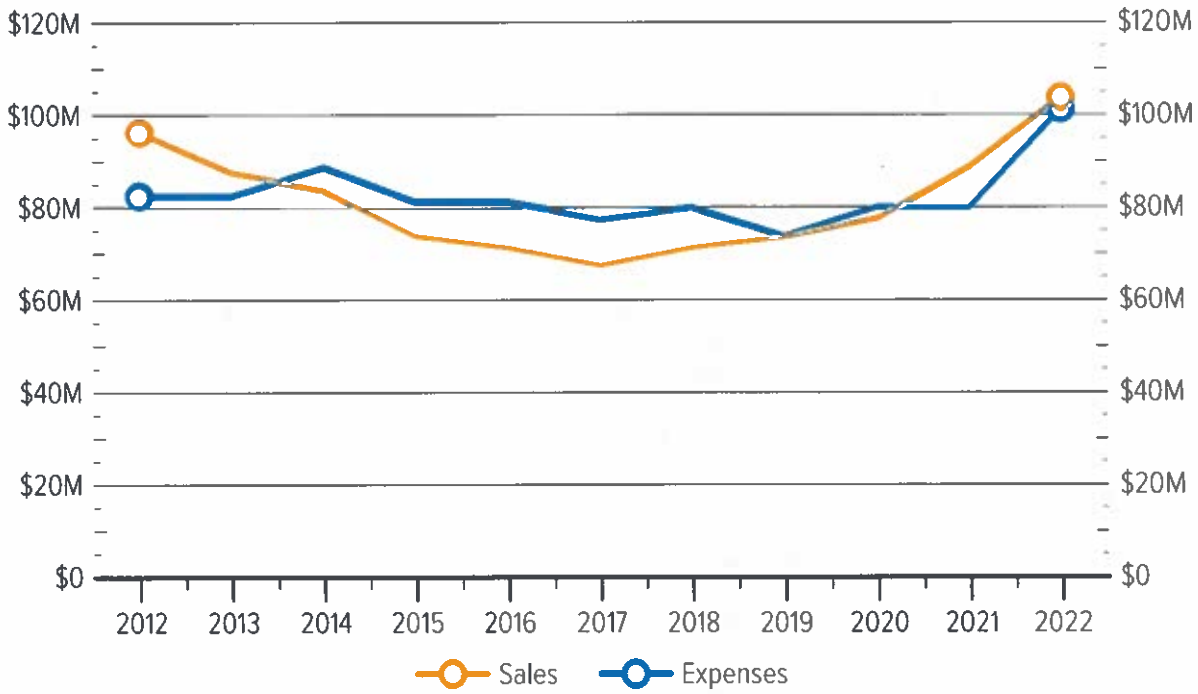


FIGURE 16
Farm Sales vs. Expenses
2012–2022



Farm Sales vs. Expenses (2012–2022)

Source: Bureau of Labor Statistics, Bureau of Economic Analysis, and Federal Reserve Economic Data
Manufacturing value added as a percentage of total Gross Domestic Product.

In response to this economic uncertainty, some Monroe County farms have adopted diversification strategies to remain competitive in a rapidly evolving market. Some of these strategies include agritourism and value-added agriculture, such as farm breweries, u-pick experiences, and direct marketing of locally produced foods, crafts, and other goods. Farm breweries and craft beverage producers have introduced attractions like farm tours and seasonal tasting events, enhancing the region's appeal as a destination for both residents and tourists. These experiences celebrate Monroe County's agricultural heritage while creating immersive visitor experiences that highlight the County's agricultural heritage.

To help further agritourism and local buying, the Grow Monroe program connects the community with the farm-related events and festivals in Monroe County each year. Monroe County Cornell Cooperative Extension (CCE) also features a guide for farmers to use when developing agritourism operations. As a partnership between Monroe County Economic Development and Monroe Community College, the Grow Monroe program promotes the benefits of supporting local agriculture and highlights the wide variety of fresh produce and other agricultural products. These activities not only offer farmers new sources of income but also strengthen the relationship between rural producers and the broader community. By supporting and expanding these programs and partnerships, the County can strengthen its commitment to investing in agricultural production, processing, and marketing while ensuring that local agriculture continues to thrive as a vital contributor to both the economy and the regional food system.



Case Study

Fairlife LLC Investment in Webster, NY

A Historic Economic Development Win.

Fairlife, LLC, a dairy-based subsidiary of The Coca-Cola Company, selected Webster, NY for its new $650 million production facility, presenting the County with enormous economic potential. The facility will be the largest milk processing facility in the Northeast (745,000 square feet) adding regional storage and processing capacity, creating 500 construction jobs, 250 permanent jobs, and directly impacting more than 850 regional dairy farming jobs (Monroe County, 2023).

Despite the dairy industry not being as prominent in Monroe County as it is in other counties (1,800 cows compared to 47,500 in neighboring Wyoming County as of 2024), dairy remains New York's largest agricultural sector, producing 16.1 billion pounds of milk annually (NYSAGM, 2023).

The site selection was competitive, with Webster selected over a comparable site near Harrisburg, Pennsylvania, for its proximity to dairy producers and available land, despite Pennsylvania's readily available infrastructure and strong incentives. To offset logistical challenges and infrastructure barriers, the developers were granted a comprehensive package of incentives. New York State provided up to $21 million in Excelsior Jobs Program tax credits, low-cost power from the New York Power Authority, and an additional $20 million for the Town of Webster to upgrade its wastewater treatment plant. The County of Monroe Industrial Development Agency (COMIDA) offered local tax incentives, including a special Payment In Lieu of Taxes (PILOT) agreement. This multi-tiered partnership, uniting state, county, and local stakeholders, was instrumental not only in securing the project but also in accelerating critical infrastructure improvements. It serves as a model for how coordinated public-sector collaboration can drive economic development and regional competitiveness.

The project's long-term impact will extend beyond the creation of direct jobs, generating sustained demand for utilities, maintenance services, and other local support industries. At the same time, the project underscores both the opportunities and challenges that large-scale developments pose for the local community, particularly the constraints posed by limitations in power infrastructure at potential sites across the County. To better position itself for future investments, Monroe County can proactively inventory shovel-ready sites and address critical infrastructure gaps, especially related to energy capacity and site readiness.

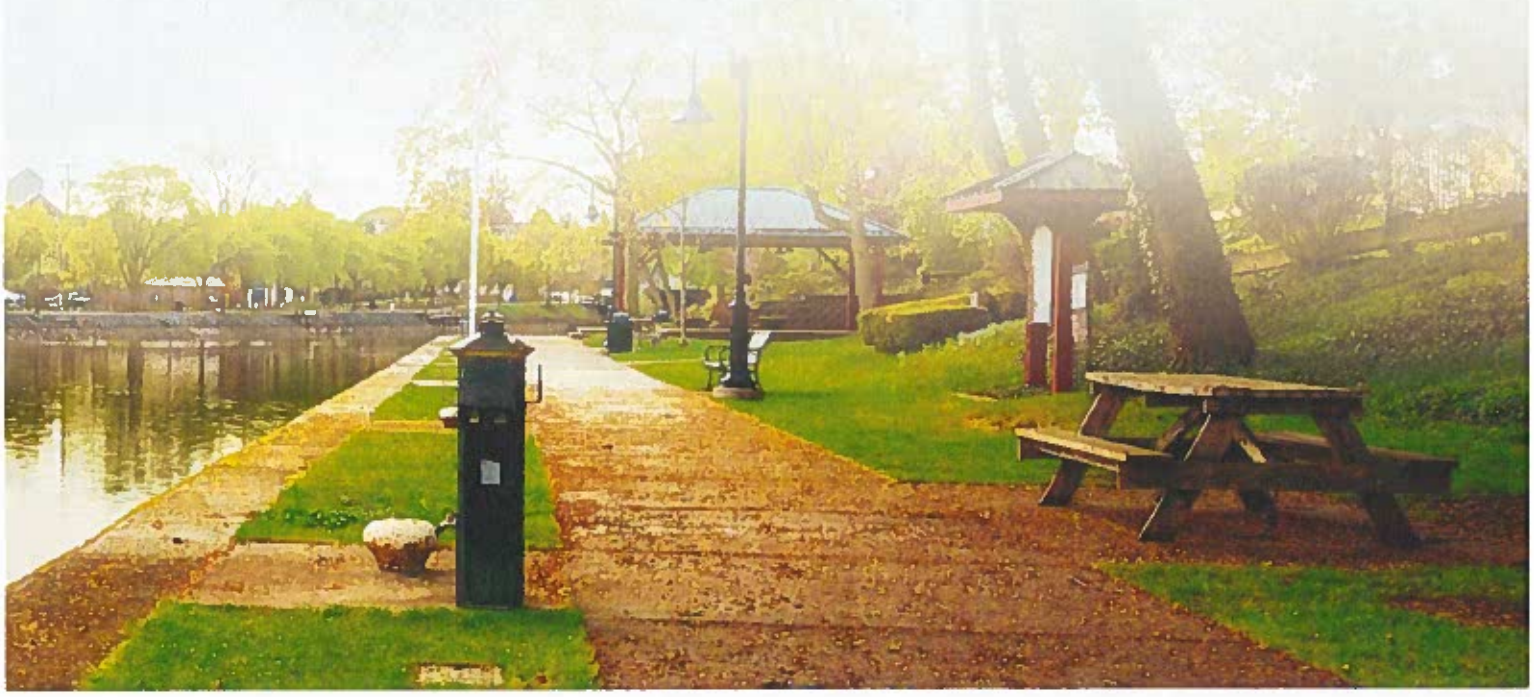
1.4 What Do We Need to Address?

1.4.1 Underemployment

Underemployment is the condition in which people in a labor force are employed at less than full-time or at jobs inadequate with respect to their training or economic needs.

The Monroe County economy is in transition. While manufacturing remains important to the County's economy, its role as a driver of employment is evolving. Manufacturing companies are shifting toward high-tech methods to boost productivity, which reduces the need for low-skilled jobs. At the same time, healthcare has become a high-tech industry that still depends on low-skilled positions, from personal care aides to account clerks. Since Monroe County is looking to grow in the high-tech manufacturing sector, the County can offer educational support to help residents gain the necessary skills and degrees for modern careers in high-skilled fields. With that, the County can continue to encourage inclusive hiring and fair compensation in these fields. In addition, the County can continue to work with local higher education institutions, grade schools, and trade schools to align curricula with industry needs and foster a pipeline of skilled workers to meet them. Offering free or subsidized training, including tuition assistance, transportation, and child care, would open doors for individuals to enter high-demand fields—opportunities they could not afford on their own. Access to and affordability of childcare and transportation are the two primary barriers to employment opportunities in Monroe County. In addition, enhanced job placement and career counseling services could help students without access to the proper pipelines get started. A shared understanding of Monroe County's education and workforce needs will strengthen the economic well-being and future of the County as a whole.

Educational attainment is an important measure because it impacts not only personal opportunities and lifetime earnings, but also how well Monroe County's workforce supports and drives the local economy. Steps can be taken to advance educational attainment among all students, positively impacting their futures and Monroe County's emerging industries' workforce in the long term. Investment in early childhood education can help to minimize achievement gaps throughout a student's lifetime. Often, poverty-related barriers to success can be helped by providing affordable childcare, quality pre-K programs, health and nutrition support, and parental engagement.



Career and technical classes can allow high school students in Monroe County to explore skills that do not require a college education. Monroe 1 and Monroe 2, local branches of BOCES, offer Career and Technical Education (CTE) programs. However, school districts are required to pay to become a member and to enroll students in BOCES coursework. Due to school budget constraints, schools often have to limit the number of students enrolled in BOCES courses. While the County does not have direct budget oversight of school districts, it can support partnerships with the State, BOCES, and school districts to improve financial aid options and provide more opportunities for expanding students' skill sets and fostering career development (Moore, 2022).

Economic disparity remains a significant challenge for workforce development in Monroe County. In the City of Rochester, 25.5% of residents live below the poverty line, which can create barriers to accessing education, financial resources, and stable employment (U.S. Census, 2025c). Factors such as low wages and systemic inequities contribute to limited job opportunities, reduced entrepreneurial potential, and impacts on overall quality of life. Monroe County has seen an upward trend in low-wage jobs (e.g., hospitality and leisure industry), with the most significant employment growth for low-skilled workers. The Post-Secondary Employment Outcomes Explorer (PSEO) data demonstrates that individuals with higher levels of education (an associate's degree or higher) or specialized types of training in areas such as health professions, IT, and engineering earn significantly better wages, compared to those in hospitality and leisure industries (U.S. Census, 2025). Though lifetime earnings tend to rise with higher levels of education **(Figure 17),** variations in worker occupation, location, and systemic inequities like race or ethnicity often create overlap in lifetime earnings **(Figure 18).** Advancing a more diversified workforce and promoting equitable compensation for workers at the lower end of high-skilled jobs is essential to reducing income disparities and building a more inclusive and resilient economy.

Job Training

49% OF JOBS IN NEW YORK REQUIRE SKILLS TRAINING

37% OF NEW YORK WORKERS ARE TRAINED AT THIS LEVEL

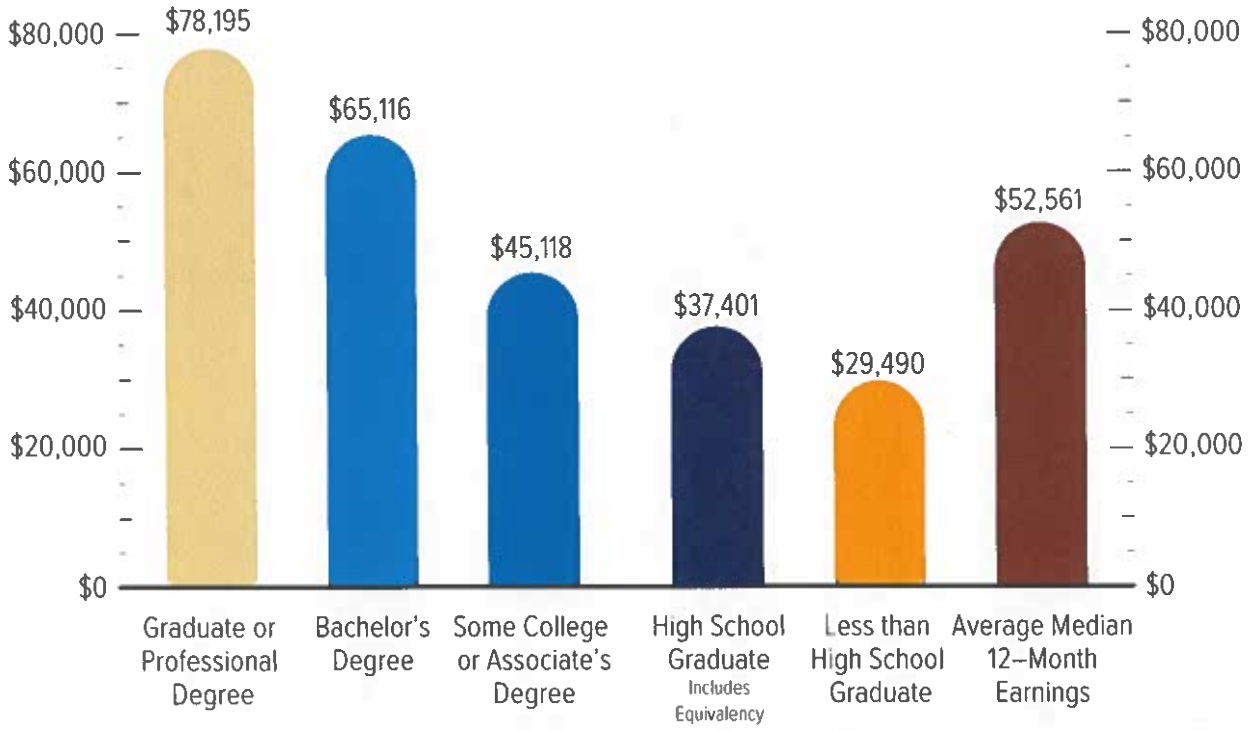
Workforce Growth Through Apprenticeship

A cornerstone of this effort is the **Finger Lakes Youth Apprenticeship Program (FLYAP),** which connects students, particularly historically underserved learners, to high-wage, in-demand careers through job shadowing, paid co-ops, and hands-on industry experience. The Finger Lakes Youth Apprenticeship Program (FLYAP) ensures all learners, including historically underserved learners, have access to high-quality programs in high-wage and in-demand career fields. FLYAP is a program that offers high school students opportunities for job shadowing, paid co-ops, and hands-on experience. FLYAP has connected more than 800 students with over 150 advanced manufacturing businesses in the region since its launch in 2019 (Rochester Technology and Manufacturing Association, 2025). FLYAP also partners with Monroe Community College and its Dual Enrollment Program, allowing some students to earn college credits at no cost.

The **Multi-Craft Apprenticeship Preparation Program (M.A.P.P.)** provides Rochester-area residents with direct entry pathways into construction trades apprenticeships. It focuses on preparing and connecting historically disadvantaged populations to high-quality union career opportunities in the building trades, serving as a key bridge between the community and the construction workforce.

FIGURE 17

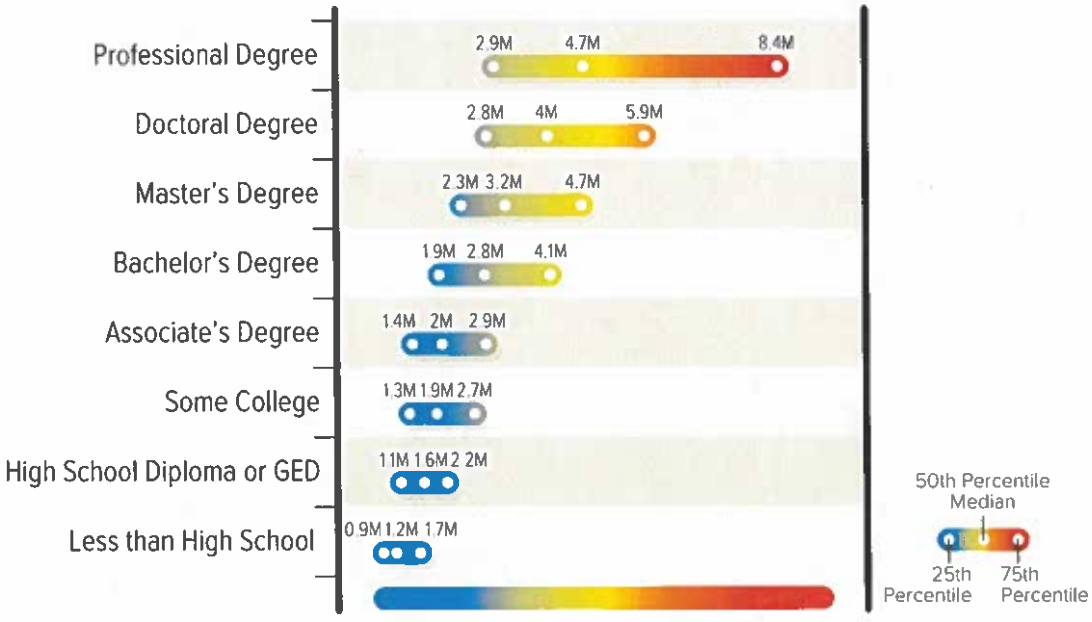
Monroe County Median 12-Month Earnings by Degree



Monroe County Median 12–Month Earnings by Degree

FIGURE 18

Lifetime Earnings by Degree



Lifetime Earnings

Note: The figure is based on data for 25 to 64-years olds working full-time, full year.

Source: Georgetown University Center on Education and the Workforce analysis of the U.S. Census Bureau, American Community Survey (ACS), 2009–2019.

1.4.2 Need for Strategic Sites & Power Capacity

Monroe County's Economic Development Division and its partners, including the County of Monroe Industrial Development Agency (COMIDA) and the Monroe County Industrial Development Corporation (MCIDC), actively recruit businesses by leveraging assets such as established industry clusters, research institutions, workforce development programs, and technical expertise. However, a shortage of shovel-ready sites with sufficient power capacity has recently hindered these efforts.

Many businesses in the region are eager to expand, build housing, and create jobs, but their ability to do so increasingly depends on the strength and reliability of New York State's energy infrastructure. A lack of power access has prevented the Finger Lakes Region and Monroe County from capitalizing on business development opportunities across various industries, including advanced manufacturing, research and development, and supply chain management, among others. Some shovel-ready sites in the County sit idle due to energy concerns. Semiconductor fabs and photonics manufacturers require enormous and reliable power capacity, robust water supply, and state-of-the-art facilities.

New York's energy system is experiencing reliability and capacity challenges, according to analysis by the New York Independent System Operator (NYSIO). Aging and decommissioned generation facilities, rapidly growing load demand, and difficulty developing new energy resources are compounding problems that may result in a power capacity shortfall of up to 10,000 megawatts over the next decade. (NYISO, 2025). System-wide generation and distribution challenges can hamper development opportunities in Monroe County if power is not delivered to shovel-ready sites within a timeframe aligned with developer interest and project readiness.



Case Study

Henrietta Electric Substation Upgrade



Strategic and collaborative investments in the energy grid are necessary for Monroe County's economic growth. This concept is exemplified by electrical infrastructure upgrades which were made in the Town of Henrietta in 2025. State and local officials collaborated to procure a $4.7 million grant from Empire State Development. The grant supported a $17 million project to upgrade Substation 255, adding 50MW of additional capacity. This added capacity supports retention and attraction of businesses including a solar panel manufacturer, beverage production R&D, and a semi-conductor supply chain company. In addition, there are several housing proposals slated for the Town of Henrietta that require additional power supply. Up to 1,000 units could be added as a result of this investment.

In addition, some prime sites in Monroe County and the Finger Lakes Region lack the electric power, water, or sewer capacity to meet the "exacting requirements" of high-tech projects. Upgrading infrastructure or building new substations and water treatment facilities can be time-consuming and costly. Monroe County faces hurdles in ensuring that its industrial parks and development sites can deliver the needed power and utilities for large photonics or semiconductor operations. This infrastructure gap can delay projects or divert them to other regions if not addressed. New wetlands regulations via the NYS Department of Environmental Conservation (DEC) present further challenges related to the timely permitting and development of future shovel-ready sites for projects.

In-demand industry sectors like optics and imaging, advanced manufacturing, medical device production, and clean technology require large, flat, well-drained sites near existing infrastructure and with reliable power supplies. In Monroe County, the availability of suitable sites is further limited by competition with other land uses such as housing, commercial development, agriculture, and industrial-scale clean energy. Some available sites, such as the former Eastman Kodak Site are promising sites that continue to attract businesses, but require significant retrofitting of infrastructure to support modern industry. Most existing opportunities will also need demolition of outdated industrial buildings and/or environmental remediation, both of which can be costly. When prospective firms express interest in locating in Monroe, the lack of shovel-ready sites often places local, county, and state agencies in a challenging position to quickly prepare suitable locations.



Monroe County has limited vacant industrial buildings or build-ready land that meet the specifications for cleanrooms, fabs, or optics labs. The Finger Lakes Regional Economic Development Council (FLREDC) has identified the need to "prioritize shovel-ready sites with infrastructure and capacity aligned" to what advanced technology businesses require. Preparing sites (through environmental clearances, zoning, and infrastructure build-out) often lags behind market demand. This means when an opportunity arises, for instance, a chip supplier or laser manufacturer looking to expand, the County can promptly secure suitable real estate, a process that is often complex. Expanding the site inventory (industrial parks, tech parks, certified sites) is crucial to capturing future photonics, semiconductor, and other high-tech manufacturing investments.



The fairlife development exemplifies both the problem and a solution with respect to shovel-ready sites in Monroe County. Given the difficulty of identifying appropriate sites in the County, fairlife would have moved on in its site search had the Greater Rochester Enterprise (GRE) not been creative in identifying and aggressively promoting the company's ultimate location in Webster. Learning from this and other experiences, the county has identified that further study is needed to inventory what undeveloped acreage exists that meets the minimum essential requirements for industries and markets the County wishes to attract. Further analysis into available infrastructure and data about site control and use (who owns the land, how it's zoned, etc.) would bolster the inventory and support targeted economic development effort. Such efforts are a priority, especially in light of newer state grant opportunities (POWER UP NY, FAST NY) and COMIDA's capabilities under state law. It is possible for COMIDA to develop strategic sites over years, alleviating businesses of the burdensome process of getting NYS approvals and organizing infrastructure improvements. This approach has seen success in neighboring counties. STAMP in Genesee County (where Edwards Vacuum is locating) and White Pines Commerce Park in Onondaga County (where Micron is building) are examples of IDA-led site development that took decades but ultimately manifested real economic development opportunities.

Monroe County can expedite the site preparation process by pursuing funding opportunities offered by New York State. The FAST NY Shovel-Ready Grant Program provides funding to counties and municipalities working to prepare sites that are 40 acres or more. The program funds pre-development site planning as well as capital infrastructure improvement projects, including water, sewer, transportation, electricity, and gas upgrades (Empire State Development, 2025b).

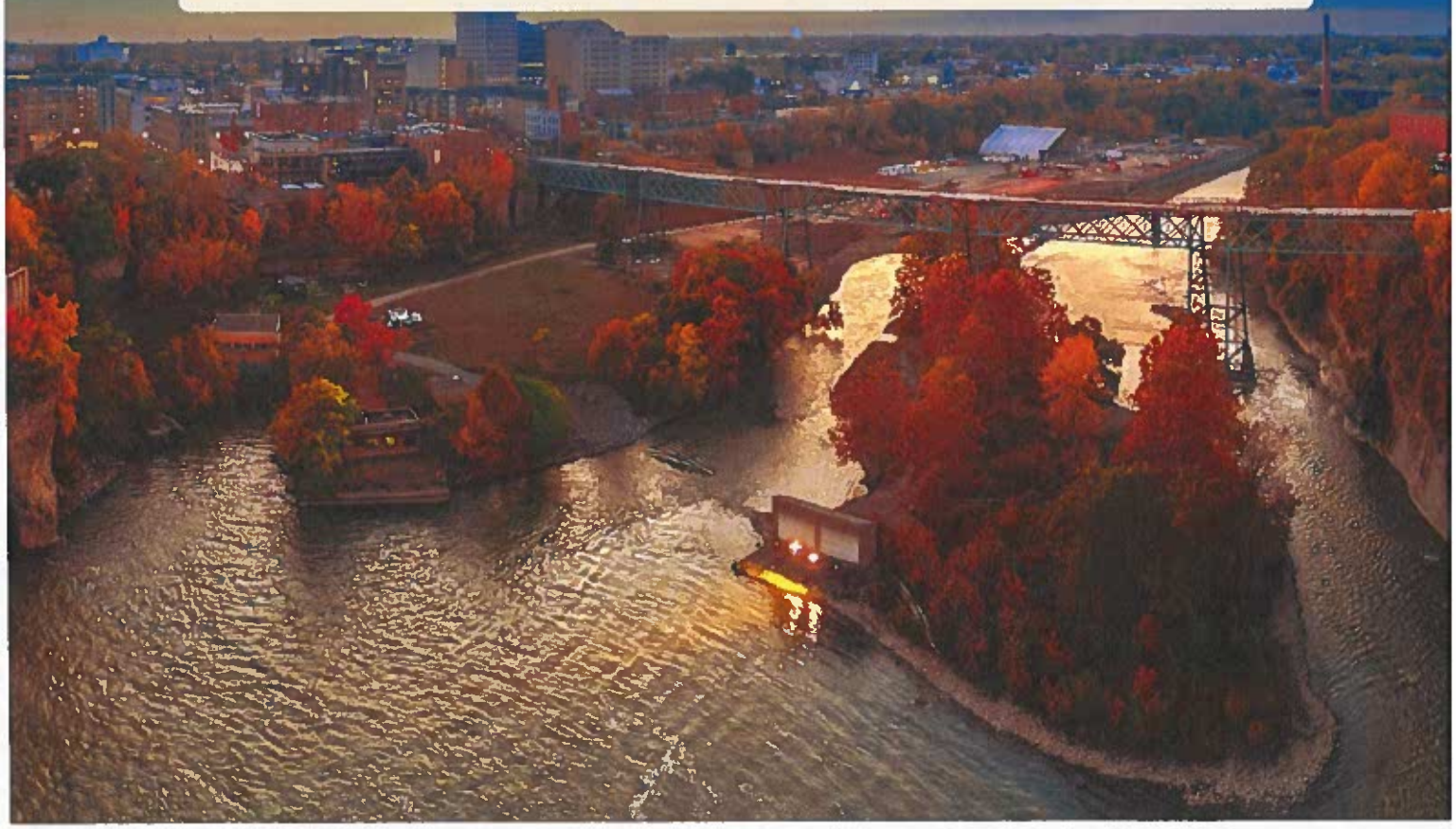


In fact, COMIDA was proudly the first recipient of a FAST grant which funded the rapid implementation of utility infrastructure improvements at the fairlife site in Webster. Similarly, New York's Promote Opportunity with Electric Readiness for Underdeveloped Properties (POWER) Fund offers funding for extending electrical infrastructure to sites associated with projects that provide public and economic benefits (New York State, 2025). The legacy of manufacturing in the County has resulted in the need to clean former industrial sites to prepare them for new investment. The State's Brownfield Opportunity Area (BOA) Program has the potential to increase the availability of sites with infrastructure by preparing contaminated sites for redevelopment through remediation and planning. Assessing the County's inventory, expanding a portfolio of shovel-ready sites, and aligning these sites to appropriate economic development opportunities is a complex process that will require collaboration within the development community. The County can play a vital role in convening specialists who can steadily and strategically advance the identification and preparation of sites where new businesses can be established.

Promote Opportunity with Electric Readiness for Underdeveloped Properties (POWER UP)

New York State and Monroe County are attracting investment in new manufacturing and high-tech development, outpacing the existing energy system planning and funding mechanisms' ability to keep up. Power-ready sites are a key factor in where companies decide to locate. Choosing a power-ready site can significantly reduce the time between site selection and a plant's opening day.

To help secure more business and jobs in New York, Governor Hochul is launching a new initiative called Promote Opportunity with Electric Readiness for Underdeveloped Properties (POWER UP). This program will fund proactive development of electric capacity to create power-ready sites and attract new businesses to the state. Governor Hochul is investing an initial $300 million into the fund, enabling the development of dozens of sites.



1.4.3 Retaining and Attracting Future Residents

Employees consider various factors when choosing where to live and work, including lifestyle amenities, recreational opportunities, and cultural vitality. Improving the appeal of Monroe County from a lifestyle standpoint will assist the County in attracting and retaining skilled residents. Companies consider quality-of-life features when looking for new office or branch locations that appeal to skilled workers. Monroe County's low cost of living, access to recreational features, and moderate climate make it an attractive residential destination. The County's efforts to recruit and retain workers through marketing are starting to take shape and could be strengthened by enhanced data tracking and creative outreach approaches.

Retaining residents in Monroe County involves focusing on the needs of the workers who already reside here, including ensuring that services, communication, and community systems are accessible and responsive to diverse populations.

Placemaking to Attract Residents

Placemaking is the process of creating quality public spaces that foster community, social interaction, and a sense of belonging. The intentional design and management of public spaces can improve community well-being and help Monroe County adapt to the wants and needs of new and existing residents. The region's numerous cultural festivals and musical events are important to life in Monroe County and can be leveraged and marketed to attract and retain residents.



Monroe County is home to one of the largest and most established Deaf, DeafBlind, and hard of hearing communities in the United States, anchored by the National Technical Institute for the Deaf (NTID), Rochester School for the Deaf, the University of Rochester, Deaf professionals across sectors, Deaf-owned businesses, one of only two interpreter education programs in New York State, and a broad network of Deaf-led and Deaf-serving organizations. This established ecosystem represents a unique economic and workforce asset that Monroe County can leverage to attract and retain talent, businesses, educational opportunities, and investment.

Monroe County's Deaf Community

Monroe County's Deaf, DeafBlind, and Hard of Hearing community is one of the largest per capita in the United States – over 40,000 residents, roughly 5% of the County's population.

Accessibility is a key component of economic competitiveness, strengthening the County's ability to fully engage a diverse workforce and create a more inclusive environment for workers, employers, entrepreneurs, and institutions. By reducing communication, transportation, and service barriers, Monroe County can expand opportunities for residents of all abilities to participate fully in education, training, employment, entrepreneurship, and civic life.

Investments in accessible communication, inclusive workplace practices, and strong community partnerships benefit the broader economy by helping employers connect with skilled talent, supporting innovation, and enhancing long-term economic resilience. By leveraging its established Deaf, DeafBlind, and hard of hearing community network, Monroe County can further position itself as a national leader in accessibility, innovation, and inclusive economic development.

Through the Deaf Equity Council , Monroe County Department of Diversity, Equity and Inclusion, and other community partnerships, Monroe County can integrate accessibility as a core component of economic competitiveness, helping distinguish the County as a welcoming place to live, work, learn, and invest.

Attracting residents and workers to Monroe County requires job opportunities, potential for upward mobility, and a high quality of life. However, there is a skills gap, or employment gap, in Monroe County, meaning there is a mismatch between educational achievement and available jobs in the County. This partly stems from the educational system, which often emphasizes participation in post-secondary education. Monroe County has approximately 53,830 students in college or university, yet the region has one of the lowest student retention rates in the United States (NYS Dept. of Education; Underwood et al. 2020). In 2023, universities in Monroe County awarded 14,951 degrees (Data USA). Retaining graduates of the County's educational and vocational programs will help existing and incoming employers fill jobs requiring advanced technical skills and create the conditions for innovation.

Deaf Equity Council

The Deaf Equity Council was established in 2025 by joint action of Monroe County and City of Rochester. The Council will serve as a resource for, and advise municipal and County officials on policies and issues that are relevant and important to Deaf residents.

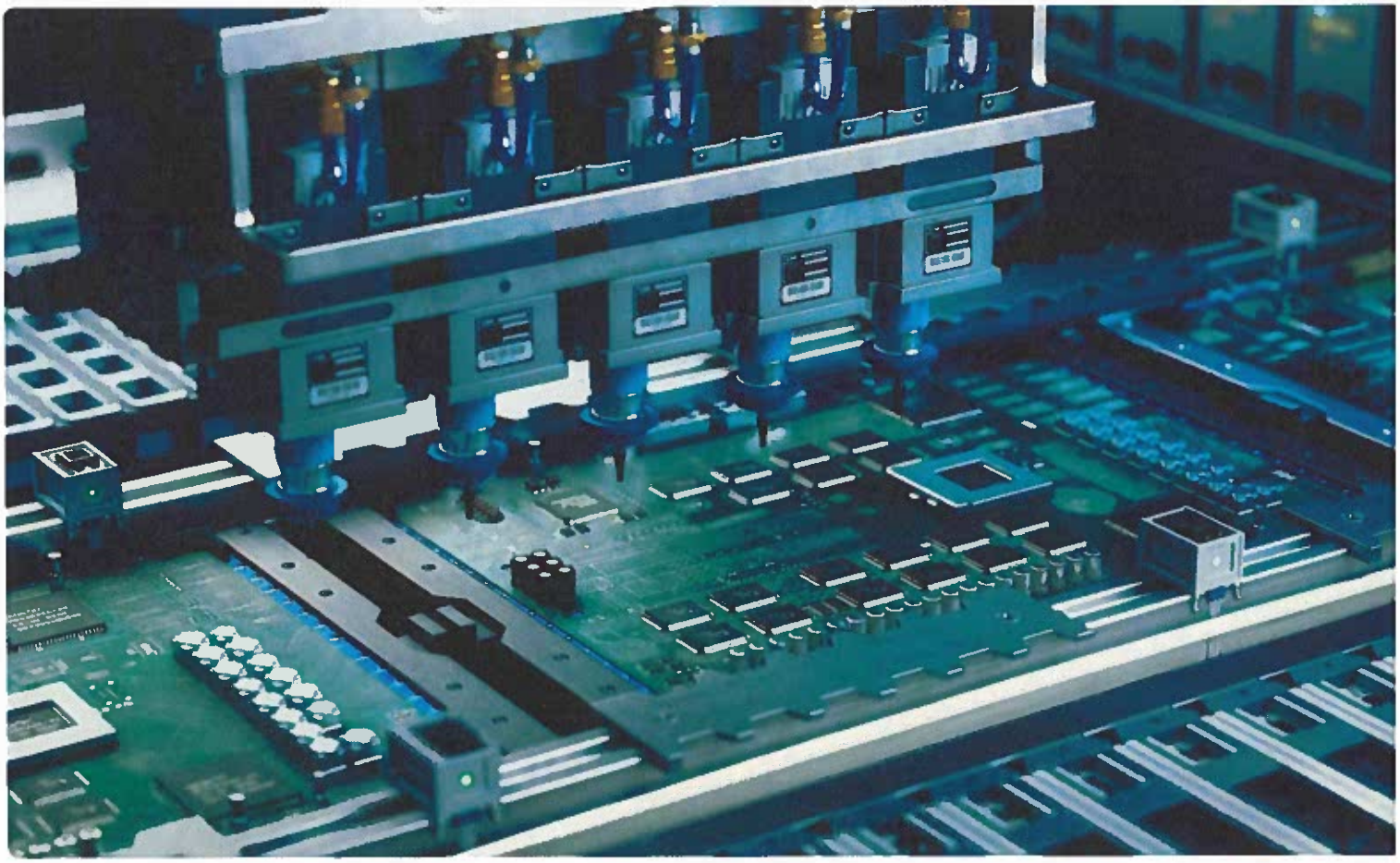
The Council aims to ensure that Deaf people thrive in each and all unique intersections of the "Deaf experience," including but not limited to: Deaf people as a cultural and linguistic minority, day-to-day communication and access to information, accommodations that meet or exceed the requirements of the Americans with Disabilities Act, and intersectional Deaf identities such as race, ethnicity, sexual orientation, disability, hearing status, nationality, gender identity, and more.



The optics/photonics and semiconductor industries require a spectrum of talent (e.g., PhD-level scientists, engineers, and technicians) for which there is a global shortage. MCC's optical technician program and RIT and UR engineering programs help, but demand still outpaces supply. Key challenges facing the region's optics industry include an aging workforce, with many experienced professionals approaching retirement, increased competition for talent from larger technology hubs, and insufficient STEM education pathways beginning in K–12 to prepare future workers. As mentioned in Section 1.4.1., there is a need for targeted efforts to expand training, upskill the existing workforce, and recruit new talent to prevent a labor bottleneck that could limit growth in these industries.

Beyond core infrastructure and training, several ancillary factors pose challenges to industry growth. Transportation limitations can make it hard for workers to reach jobs—Monroe County's public transit is limited, and not all workforce can afford personal vehicles. Childcare and elder care shortages also constrain labor force participation; some skilled individuals cannot join or stay in the workforce without these supports. Additionally, ensuring robust telecommunications/broadband infrastructure is available region-wide is important for high-tech companies and remote workers.

While Monroe County offers an affordable cost of living compared to larger cities, state and local taxes and regulatory processes in New York State are sometimes cited by firms as challenges. The County can continue working on these quality-of-life and business climate factors, from streamlining permitting to investing in transit and childcare, to remove friction points for companies and employees in the photonics and semiconductor sectors.



Case Study

County Retention Initiatives

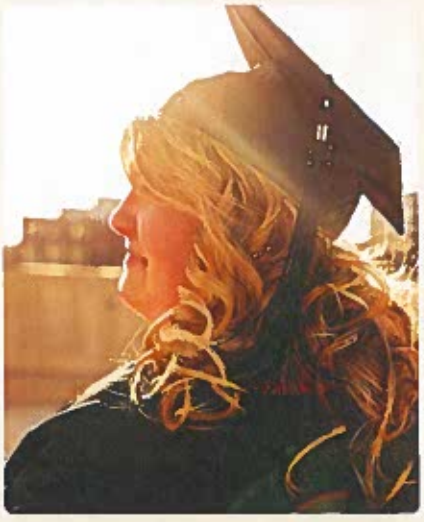
Monroe County can further promote workforce development by connecting individuals with programs that enhance skills in the existing workforce population and support those re-entering the workforce.

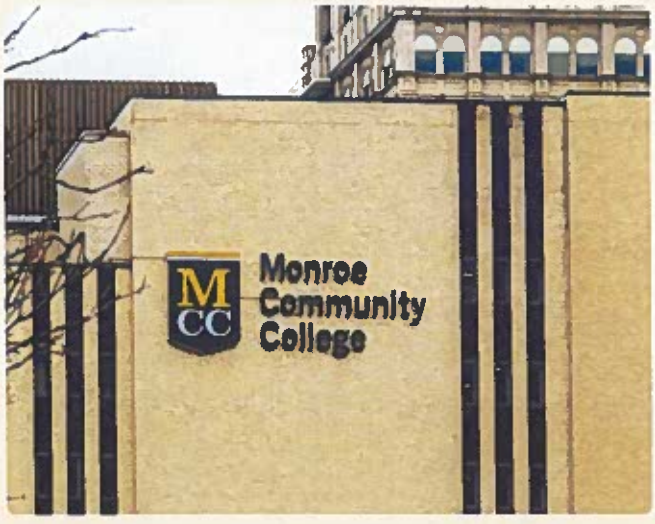
RETAIN Program

A recent initiative to increase graduate retention is the **RETAIN (Rochester Emerging Talent and Innovations Network)** program through Monroe County, which encourages recent graduates to remain in the County for work by offering them a $4,000 lump sum payment after having lived, worked, and networked in Monroe County for one year. The program is administered by the Greater Rochester Chamber of Commerce and funded by COMIDA's Workforce Development Fund and the Monroe County Industrial Development Corporation. RETAIN currently supports 35 recipients per year, with opportunities to expand the program in the future.

RochesterWorks

RochesterWorks is an organization that offers employment and workforce development services for adults at any career stage. It also provides programs and resources for youth to find jobs and helps businesses grow their workforce. The organization offers career advisory services such as job search tools, resume editing, career transition counseling, e-learning, and workshops. The Enhanced Recovery Services (ERS) Program creates a pathway to economic independence for individuals recovering from substance abuse disorder or facing mental health challenges. RochesterWorks is designated by Monroe County and the City of Rochester to administer federal workforce development funds as Monroe County's fiscal agent and contracts with a One-Stop Operator to coordinate efforts among various partners, including NYS Department of Labor and American Job Center.





1.4.4 Need for Housing

A tight housing market in the Rochester/Monroe County area is creating ripple effects in workforce availability. The region is facing a housing shortage and affordability challenge, which the local business community notes is "impacting all of us" and acting as a drag on growth. In practical terms, insufficient housing—especially affordable homes and quality rentals—makes it harder to attract and retain the skilled workers needed for high-tech industries and economic growth. Population growth is muted when workers struggle to find housing. Moreover, without enough housing, companies have trouble recruiting young professionals or technicians from outside the region. Addressing this by encouraging new housing development, particularly near job centers in the urban core, is seen as a key solution to mitigate the skilled worker shortage. Monroe County's economic professionals recognize that adequate, quality housing is directly linked to workforce growth, making it a top priority to support industry expansion.

Much of Monroe County's housing stock was built shortly after World War II, when demand for large neighborhoods of detached homes was driven by family formation and the resulting population boom (baby boomers). Today 69% of all housing units in the County are in single-family homes (outside of the City of Rochester 80% of all housing units are in single-family homes). Approximately 72% of today's housing stock was built prior to 1980.

This existing housing stock is not well aligned with today's homebuyers, who are increasingly seeking out apartments, condominiums, and moderately priced detached and attached homes on smaller lots in more walkable neighborhoods, also known as 'missing middle' housing. Additionally, the growing senior population is expressing a desire to age-in-place and age-in-community, which requires additional diversity in housing stock and building diversity in communities. In order to meet the needs of seniors, specific housing and support services need to be incorporated into housing developments.





In Monroe County there were fewer sales closed in 2024 than in 2023. Most communities in New York State have experienced declines in the number of closed sales since 2020, ranging from -11.6% in Erie County to -19.3% in Monroe County. In 2024, Monroe County saw 7,868 new listings and had 0.6 months supply of inventory, which means if no new homes were listed, everything would be sold in less than 3 weeks. That's a clear sign of a very tight seller's market—high demand and very limited supply. Additionally, Monroe County saw homes sell for an average of 16% over asking price in 2024. This indicates that the available housing stock is limited and is driving prices higher than in other regions.

It is critical to understand the housing market to identify and develop needed housing types in strategic locations. Monroe County has taken an essential first step in responding to this demographic and demand shift by developing a housing market assessment to inform COMIDA tax incentives for new multi-family housing.

This completed Monroe County Housing Study and Needs Analysis (2025), developed for COMIDA, provides a foundation for understanding and addressing the housing needs of current and future residents and identifies barriers to developing missing housing types.

Monroe County has a role to play in convening the various stakeholders that will need to work together to bring new housing products to the market, including elected municipal officials, housing developers, builders, financing entities, utility service providers, new homebuyers, and residents of existing neighborhoods. The County can continue to facilitate assistance for homeowners who wish to improve existing housing stock by providing incentives or grants for repairs and upgrades. For example, the Monroe County Home Improvement Program (HIP) provides direct assistance to income-eligible homeowners in the suburban towns and villages, excluding the City of Rochester and the Towns of Greece and Irondequoit, through grants or grant/low-interest loans for necessary home repairs and upgrades.

'Months of Supply' tells you how many months it would take for all the current homes for sale on the market to sell, given a monthly sales volume. Four to five months of supply is average.

A lower number means that buyers are dominating the market and there are relatively few sellers; a higher number means there are more sellers than buyers.



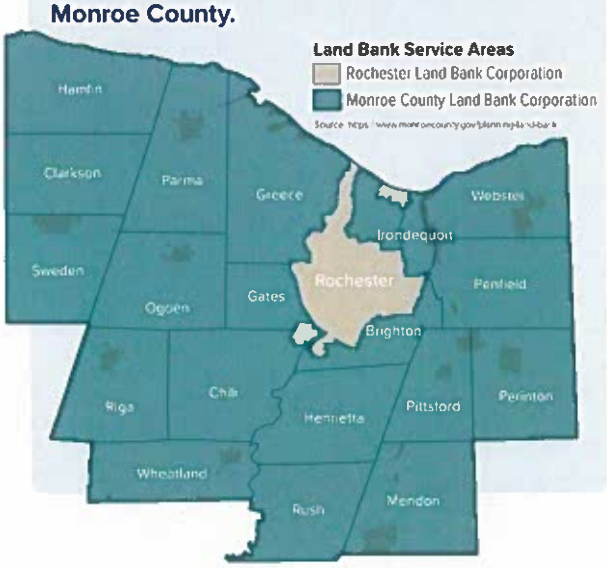
FIGURE 19
Home Sales
2024

	TOTAL CLOSED SALES	CHANGE FROM 2023	CHANGE FROM 2020	NEW LISTINGS	INVENTORY OF HOMES FOR SALE	MONTHS SUPPLY OF INVENTOY	PERCENT OF LIST PRICE RECEIVED
Monroe County	6,817	(0.8%)	(19.3%)	7,868	322	0.60	116.0%
Onondaga County	4,059	0.5%	(18.4%)	4,718	465	1.40	105.5%
Erie County	7,260	0.7%	(11.6%)	8,808	733	1.20	105.7%
NYS	104,698	(1.6%)	(17.7%)	139,293	23,198	2.60	101.9%

Source: NYSAR Annual Report, 2024

Additionally, the Monroe County Land Bank Corporation can play an important role in revitalizing communities by acquiring and restoring vacant, abandoned, and tax-delinquent properties within Monroe County to productive use.

The Monroe County Land Bank Corporation (MCLBC) works to reduce vacant and "zombie" properties across the county by returning them to productive uses that support community revitalization, quality housing, and economic and environmental resilience. The organization focuses on acquiring and redeveloping tax-delinquent and foreclosed properties to stabilize neighborhoods. Through these efforts, MCLBC also expands opportunities for affordable homeownership throughout Monroe County.



MONROE COUNTY HOUSING STUDY & NEEDS ANALYSIS

Completed in December 2025 and commissioned by COMIDA, this study evaluates Monroe County's population and housing trends and offers recommendations for how COMIDA can support housing development. The findings highlight significant market pressures driven by rising demand and limited supply, particularly a shortage of units affordable to households earning 60–80% of Area Median Income (AMI), contributing to a growing "missing middle." The study also noted the importance of a boarder mix of housing types and price points so residents at different life stages and income levels have greater housing choice and can remain within the community as their needs change.

1.5 Goals and Strategies





Develop the Workforce and Support Entrepreneurship

1. Support small business development and entrepreneurship with funding, technical assistance, and marketing.
2. Assist startups, small-to-midsize, and minority-owned businesses in accessing resources for innovation and entrepreneurship.
3. Provide resources and education for young people to explore a full range of career pathways and education requirements, from skilled trades to higher education.
4. Provide career transition support to individuals interested in upskilling or reskilling due to industrial shifts or personal goals.
5. Provide competitive incentives or other resources to employers and skilled workers to support career advancement and retention of top talent.
6. Reduce key barriers to employment such as childcare, housing, and transportation to create more opportunities for stable and sustainable employment.
7. Enhance collaboration between universities and the workforce development ecosystem to improve alignment with employer needs, close workforce gaps, and measure success.
8. Develop targeted initiatives to address current and future workforce needs in the skilled trades by increasing apprenticeship opportunities, strengthening partnerships with trade schools and unions, and promoting career awareness programs in K-12 education.
9. Support employer-led training programs and workforce re-entry initiatives to grow and sustain a robust pipeline of skilled workers for the region's development needs.
10. Support the development of specialized training programs, internships, and apprenticeships that equip individuals with the skills needed for high-demand roles in automation, robotics, photonics, and other cutting-edge industries. Promote awareness and access to these career opportunities to ensure a steady flow of talent into the region's growing technology sectors.
11. Integrate accessibility into workforce initiatives to expand talent participation, support inclusive employment practices, and strengthen Monroe County's ability to attract, retain, and engage a diverse workforce.
12. Partner with educational institutions, employers, and community organizations to expand language-learning opportunities, including American Sign Language (ASL), to strengthen workforce development and economic competitiveness.



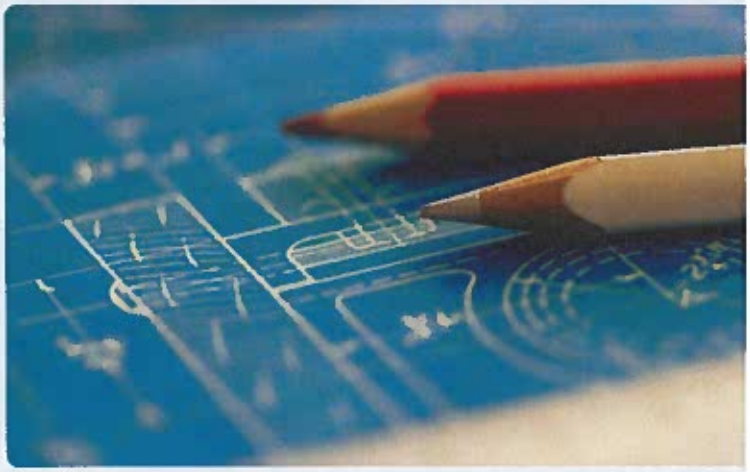




Create Places that Enhance Quality of Life

1. Expand recreation options and connections to parks and amenities.
2. Foster the development of vibrant community centers that incorporate mixed-use development and greater residential density where infrastructure supports.
3. Promote walkability and development of pedestrian-friendly areas.
4. Encourage the growth of local businesses, farmers' markets, and artisan shops that reflect the community's identity, boost the local economy, and foster unique cultural experiences.
5. Create and maintain public spaces that are accessible, safe, and inclusive for all members of the community.
6. Leverage the County's vibrant arts, cultural, and public enrichment programs, including festivals, performances, and local museums, to enhance quality of life and attract both residents and visitors.
7. Prioritize investment in arts infrastructure and community partnerships to further solidify Monroe County as a regional hub for creative expression and cultural engagement.
8. Invest in tourism assets, projects, and organizations that promote Monroe County's unique attractions, from natural landmarks to cultural and historical sites.
9. Enhance multimodal access, including train, bus, roadway, and air, by partnering with state and regional stakeholders to attract additional services that expand mobility for residents across the region.
10. Promote accessibility into all public services offered by county and municipal providers, including communications, transportation services, public spaces, events, etc. to ensure residents of all abilities can fully participate in and contribute to community life.
11. Make public spaces and parks more inclusive and welcoming to members of the community who have physical or cognitive disabilities.





Enhance Housing Access and Quality

1. Promote diverse housing options to address gaps in the housing market, including single-family homes, rental units, workforce housing, and adaptable housing types that accommodate various household needs.
2. Convene stakeholders and industry professionals to work on developing creative solutions to the housing shortage in Monroe County.
3. Improve the quality of existing homes and reduce disinvestment by providing additional incentives or grants for repairs and upgrades.
4. Develop strategies to increase the availability of various housing options to accommodate the diverse needs of the workforce.
5. Regularly assess housing needs and market dynamics to ensure that housing policies adapt to changing conditions and continue to meet community demands.
6. Leverage on-going major capital projects to expand homeownership opportunities and support active transportation-oriented communities

Strengthen Existing and Growing Economic Sectors While Investing in Emerging Industries

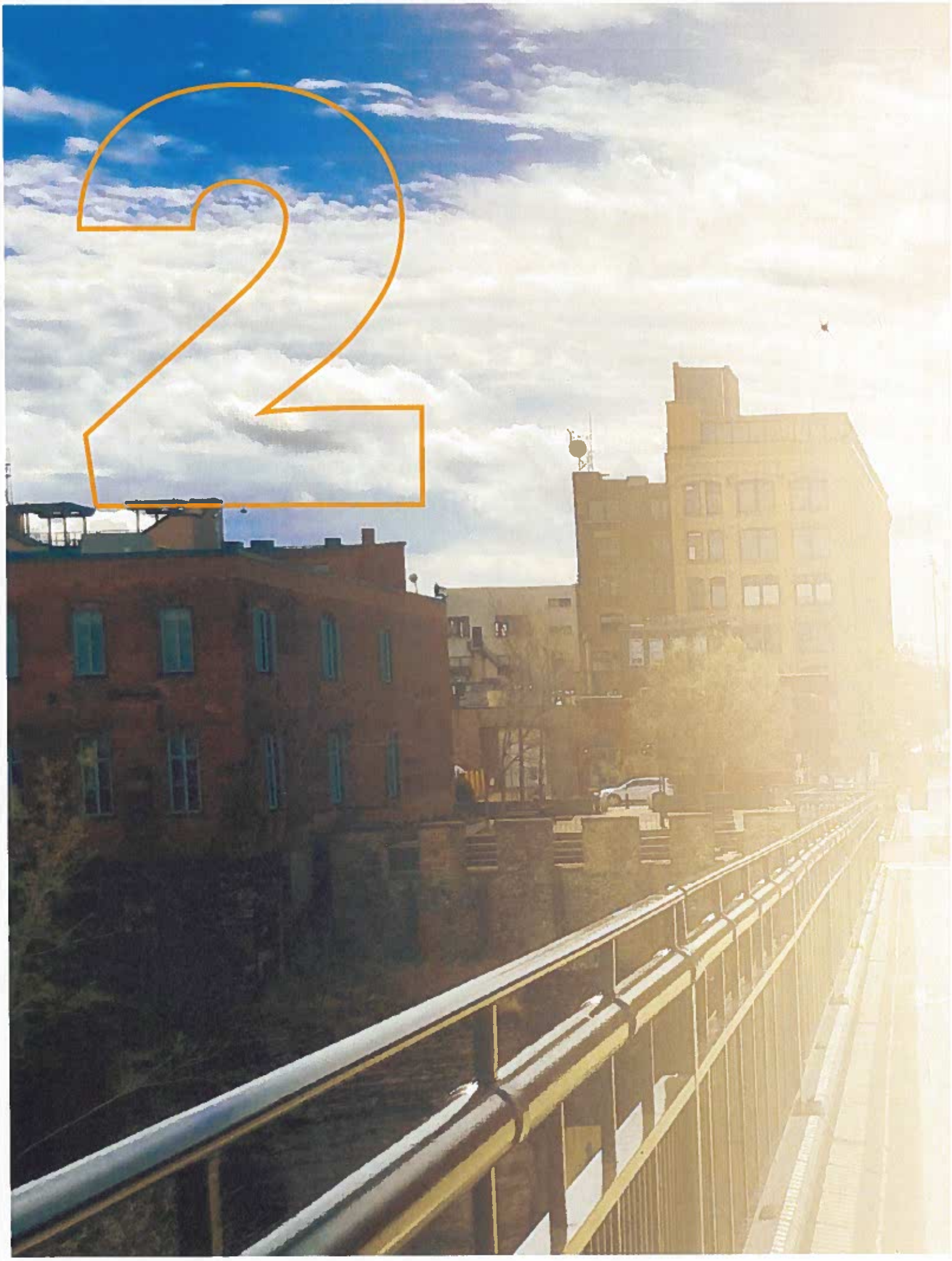
1. Expand retention and recruitment efforts to strengthen local businesses involved in the supply chains of key industries, such as manufacturing, logistics, energy, and healthcare.
2. Support business retention and recruitment efforts related to growth industries where Monroe County maintains competitive advantages, such as Optics, Photonics, Imaging, and Lasers (OPIL), such as photonics, semiconductors, and supply chain and logistics.
3. Encourage partnerships between businesses and local colleges, universities, and trade schools to align curricula with industry needs and foster a pipeline of skilled workers.
4. Invest in agricultural production, processing, and marketing of industries such as agritourism, farmers' markets, farm-to-table programs, breweries, and cideries to enhance the impact of local agriculture on the economy and food system.
5. Promote Monroe County's Foreign Trade Zone (FTZ) as a resource for companies engaged in import/export activities. Collaborate with key stakeholders to increase awareness and utilization of the FTZ, driving economic growth through enhanced global trade opportunities.





Identify and Prepare Suitable Sites for Development

1. Organize and facilitate a task force to study available sites, including brownfields or underutilized sites that strategically support both the County's economic development and climate action plan goals agenda. Prioritize the redevelopment of brownfields and prepare them for future development.
2. Identify and prioritize resources to facilitate the development of sites suitable for emerging and growing sectors.
3. Work with State partners and local stakeholders to address the lack of power capacity at potential development sites in the County. Prioritize the development of renewable energy generation, battery storage facilities, and community geothermal networks.
4. Clearly identify site development opportunities and pursue grant funding—including the FAST NY Shovel-Ready Grant Program and the Promote Opportunity with Electric Readiness for Underdeveloped Properties (POWER UP) Fund—with New York State and other entities as available.


2

2 Infrastructure

2.1 Introduction

Infrastructure is a cornerstone of the County's vision for a resilient, equitable, and future-ready community. Infrastructure is not merely about roads, bridges, and water pipes; it is the physical and increasingly digital backbone that supports every aspect of life in Monroe County. Modernized and inclusive infrastructure is fundamental to public health, safety, economic prosperity, and sustainability. To accomplish its goals, the County will need to maintain and invest in critical systems such as transportation, water recovery, solid waste management and recycling, broadband access, multimodal freight networks, and active mobility pathways, all of which are essential to connecting residents with opportunities and services. By investing in infrastructure, Monroe County will lay the groundwork for long-term economic growth, climate adaptation, and social equity, ensuring that every resident, regardless of background or socioeconomic status, can thrive in a safe, healthy, connected, and vibrant community.

Infrastructure systems connect us to vital services that serve as the foundation for a fully functioning community. These systems improve the quality of life; shape and enhance the public realm; contribute to health, wellness, safety, and security; and promote economic growth. A variety of county departments, affiliated entities, municipal partners, and private sector actors work in coordination to manage and maintain the complex infrastructure systems and equipment that people living and working in Monroe County rely on. In collaboration with stakeholders and various agencies, Monroe County continually seeks to improve public infrastructure and services through ongoing initiatives and efforts to modernize and enhance coordination between its stormwater, sanitary sewer, solid waste management, energy, information and communications technology, and transportation sectors.

PILLAR 2

INFRASTRUCTURE

GOALS

- ✓ Invest in 21st-Century Infrastructure
- ✓ Protect Water Resources
- ✓ Improve Waste Management and Recycling Practices
- ✓ Invest in and Diversify the Transportation System

By applying a systems-based approach to infrastructure management, the County seeks to improve its resilience in response to changing preferences and needs associated with demographic changes, technological advances, and a changing climate. The County will continue to invest in the development of a twenty-first-century infrastructure system that helps to increase equity by investing in underserved areas with improved access to transportation and broadband internet, resiliency through investments in wastewater infrastructure, sustainability through waste management and energy investments like conservation, renewable energy, and electric vehicle infrastructure, and by strengthening connectivity and mobility options throughout the County.

A systems-based approach recognizes the interconnected nature of infrastructure, focusing on its various components and relationships with people and the greater environment.

2.2 Trends

Trend 1

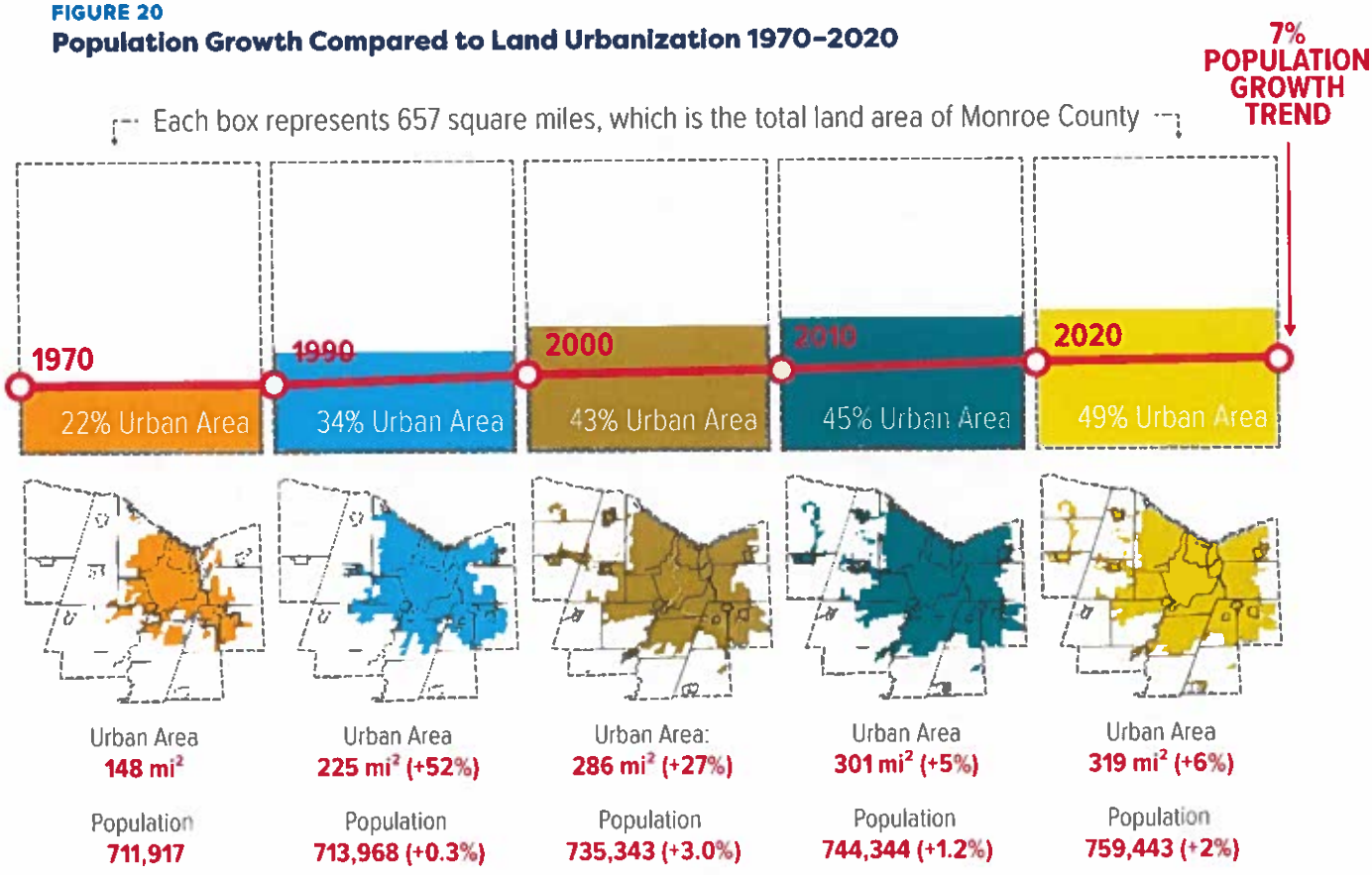
Monroe County's land has urbanized at a faster rate than its population growth

In the past 50 years, land has been urbanized at a faster rate than the population has grown in Monroe County, aligning with broader trends of urban sprawl seen across New York State and the nation. Between 1970 and 2020, the County's urbanized land area doubled while the population grew by only 7%. **Figure 20** shows the progression and pattern of the urbanizing portions of the County.

In 1970, the average household size in the County was approximately 3.0 people per household; by 2020, the number reduced to 2.37. Although shrinking household sizes generally mean more housing units are needed to accommodate the same number of people, the number of households in Monroe County increased only by 9%, rising from 220,554 in 1970 to 239,675 in 2020. During the same period, 80,721 housing units were constructed, representing a 54% increase over the total units available in 1970. As housing unit growth outpaced household growth, disinvestment in some parts of the County with older housing stock also occurred.

FIGURE 20

Population Growth Compared to Land Urbanization 1970–2020



Source: U.S. Census Bureau.



As the County's urbanized land area increases, the roads, water lines, and emergency services need the capacity to serve a broader area. Without corresponding population growth, the cost of public services and utilities goes up, as fewer users are responsible for the costs of the extended infrastructure. In rural areas, sprawl can also negatively impact wildlife habitat and threaten agricultural productivity as forest and farm fields are converted into predominantly single-family residential uses.

At the same time, this pattern exerts a noticeable impact on core urban areas, which have lost population as residents move into new suburban developments. Population and density loss in the urban core weakens the tax base, which places additional burdens on the maintenance of existing infrastructure. Population loss can also diminish the quality of the social fabric and present challenges for sustaining commerce and business development.

There are signs that the urban sprawl trend is slowing significantly. For example, according to the 2020 Census, the population of the City of Rochester grew for the first time since the 1950 census. This fact demonstrates that the trend is not irreversible. The County can work to encourage new development to occur where existing infrastructure is in place by partnering with local municipalities to develop and implement model land use regulations that local municipalities can use to guide local development. This practice is already evident in the new housing being added to the downtown area of Rochester, such as the former Inner Loop East, East End, and recent developments just west of the Genesee River. Additionally, incentives offered through COMIDA can also encourage new development at densities that support both cost-effective infrastructure maintenance, the creation of a healthy environment for business growth, neighborhood vitality, and additional housing options that are new to Monroe County.

Trend 2

Climate change is contributing to rising temperatures and more extreme weather events.



Climate change includes both the increase in the Earth's surface temperature and its related effects (NOAA). Trends linked to climate change are already impacting Monroe County residents and they are projected to continue and worsen. In Monroe County, residents have been primarily affected by increased flooding, extreme weather events, damage from ice and wind, periods of intense heat, and more frequent instances of reduced air quality, which most heavily impact already vulnerable populations. The current climate conditions and future projections highlight the urgent need for climate action planning.

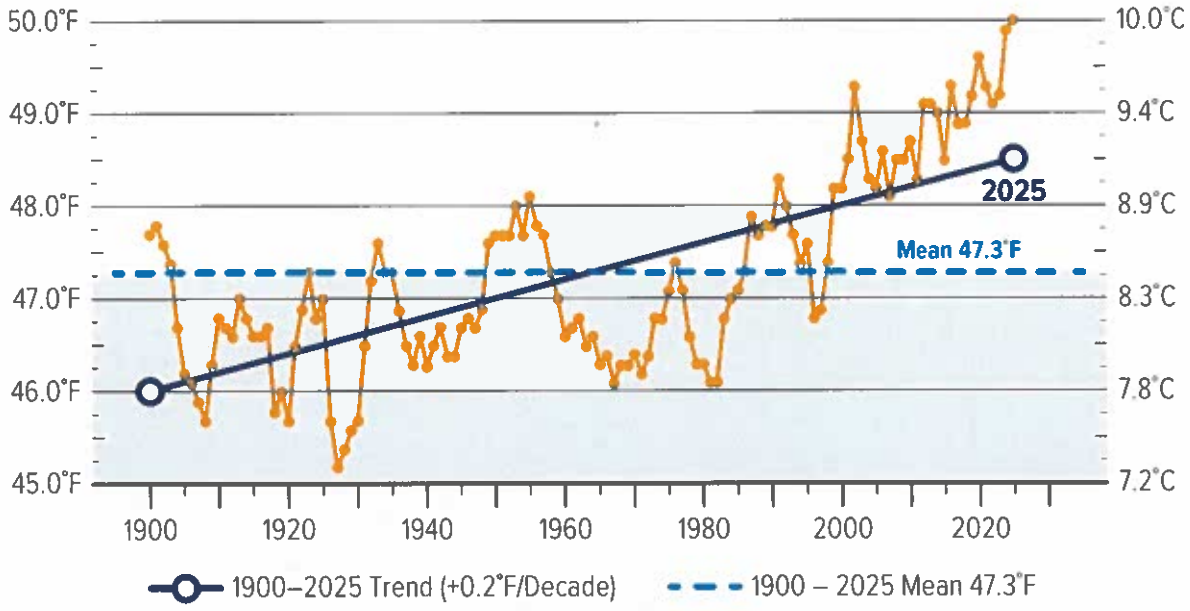
The average temperature in New York State has increased by almost 2.6°F since 1901. Since the year 2000, temperatures have been rising faster than in any other period in recorded history. The average temperature in Monroe County from 2020 to 2025 was 2.3°F higher than from 1895 to 1900 **(Figure 21)**. Average temperatures in New York State are projected to rise between 5°F and 11°F by 2100, and Monroe County is expected to experience a more than 2°F increase (NYSERDA, 2025). The rate of warming since 2000 has also accelerated, as shown in National Oceanic and Atmospheric Administration (NOAA) data. Depending on the rate of acceleration over the next several decades, temperatures in Western New York could rise as much as 14°F, as outlined in the Monroe County Climate Action Plan (CAP) **(Figure 22)**.

While this warming trend may introduce some welcome effects like extended growing seasons and increased yields for certain crops, it will also exacerbate many negative effects, such as heat stress on crops and livestock, increased pest, drought, loss of cold-dependent species. In the Rochester region, projection ranges for the year 2050 include precipitation increases of 2% to 12%, 8 to 34 additional days over 90°F, an increase from 1.3 to 4.3 heat waves per year, and 55 to 31 fewer days below 32°F per year (NYSERDA, 2025). These trends have the potential to increase flood events, introduce wide fluctuations in lake water levels, stress the ecosystems that support native plants and animals, and introduce a wide range of health hazards for residents. In addition, climate change impacts on other regions can have secondary effects in Monroe County, as experienced in 2023, 2024, and 2025 when smoke from wildfires in Canada caused smoky skies and degraded air quality and across the East Coast (Tine, 2023).

FIGURE 21

1901-2025 Average Temperature Trend

5-year period

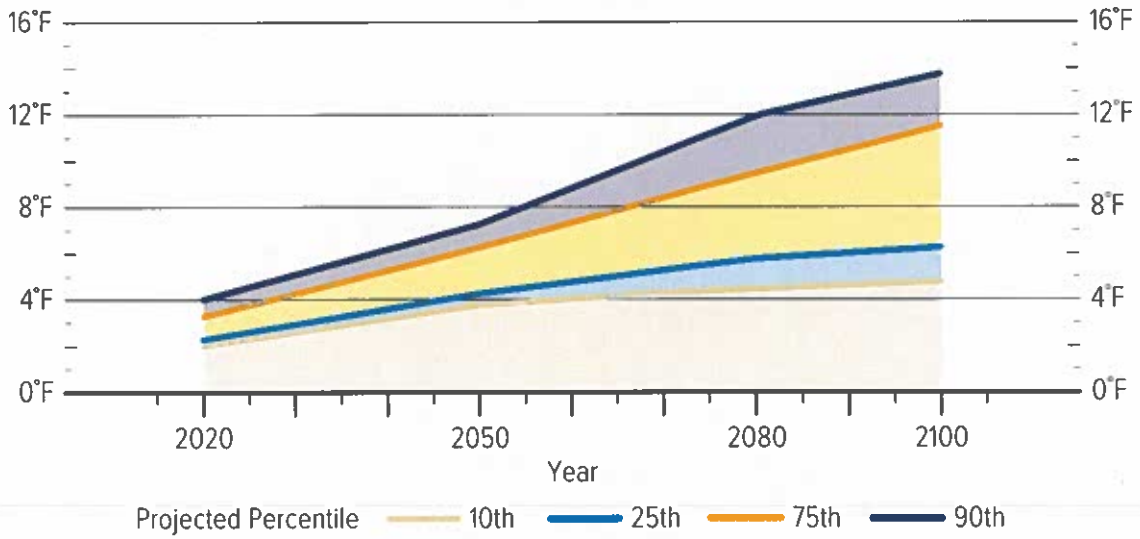


Monroe County, New York Average Temperature

60–Month Period Ending in August

Source: NOAA National Centers for Environmental Information, 2025.

FIGURE 22
Projected Temperature Changes in Western New York Region 1

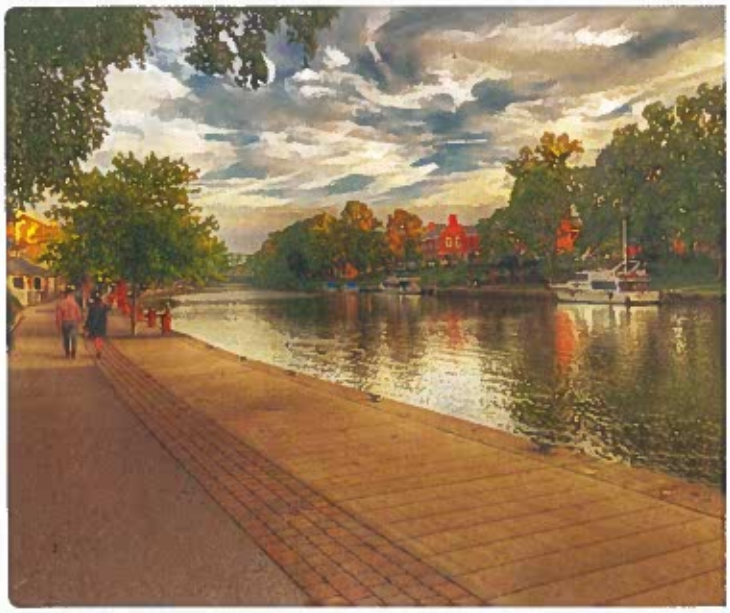


Projected Temperature Changes in Western New York Region 1

Source: Monroe County Climate Action Plan, 2024 (ClimAID)

https://www.monroecountyclimateaction.com/

The County is taking steps towards a more resilient future. The County Climate Action Plan (CAP) was developed in two phases with the first completed in 2022 covering County government operations and the second completed in 2024 for communitywide activities. The CAP establishes a framework to reduce greenhouse gas emissions, turning climate goals into measurable actions both for its own operations and to work with local municipalities and community partners to advance coordinated shared sustainability goals.



Trend 3

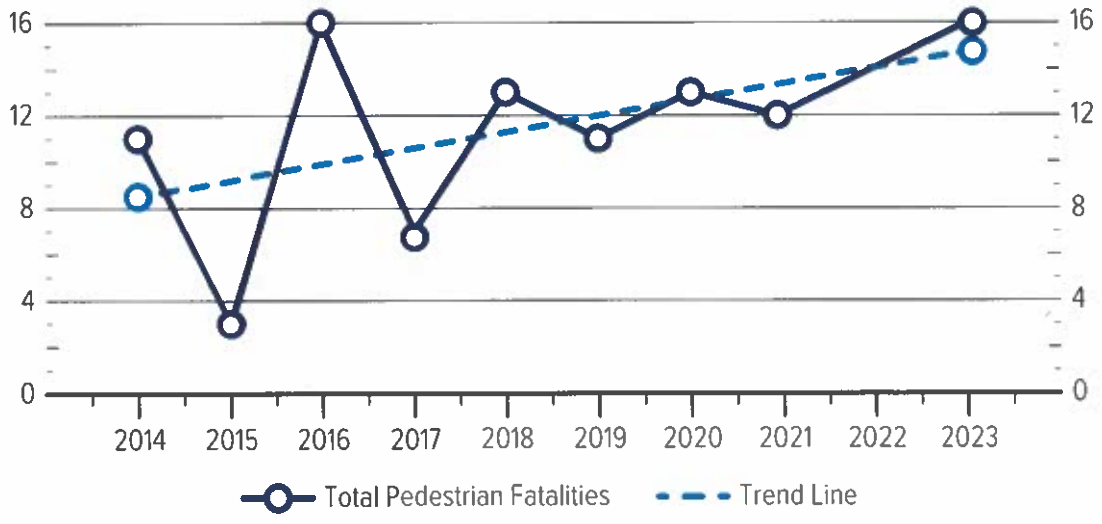
Transportation systems are facing new safety challenges

Many people want the option of walking, biking, and public transit as part of healthier, climate-conscious lifestyles; however, infrastructure improvements have not kept up. Meanwhile, vehicles that are faster and larger pose increasing dangers for vulnerable road users. Technological advances have created more demands on the transportation system, with e-bikes and e-scooters leading to an increased frequency of users somewhere in between the speeds of a car and pedestrian travel. Together, these have led to an increase in users and competition for the same limited transportation space available.

From 2013 to 2022, U.S. traffic-related death rates increased by a relative 50% for pedestrians, and in Monroe County, pedestrian and cyclist fatalities also showed an overall upward trend, based on data from 2014 to 2023 (Naumann et al., 2025; TSSR). **Figures 23 and 24** present Pedestrian and Bicyclist fatality statistics for the County as a whole, including the City of Rochester. The figures do not break out City-specific data, so they may not fully capture patterns across the County. Further analysis of where pedestrian and bicyclist fatal crashes are occurring—such as at intersections, mid-block locations, along roadway segments, or in urban and rural contexts—would help the County and local municipalities better target safety improvements. In response to the rising trend in pedestrian and bicyclist crashes, the County developed its first Countywide Active Transportation Plan (CATP) in 2023, which includes recommendations aimed at improving safety for vulnerable road users through policy updates and infrastructure investments. Additionally, the County is developing an implementation plan in 2025 to guide the County on the implementation of active transportation recommendations from the CATP. This effort focuses on enhancing active transportation and facilities within Monroe County jurisdiction, aiming to turn CATP's objectives into actionable projects. For roads outside of Monroe County's control, the County can collaborate with the state and local municipalities to advocate for safety measures on state and local roads, as well as provide technical and engineering support. For example, the County Department of Transportation works closely with the City of Rochester as their traffic engineer for City roadways, supporting the City's Vision Zero and Active Transportation initiatives.

FIGURE 23

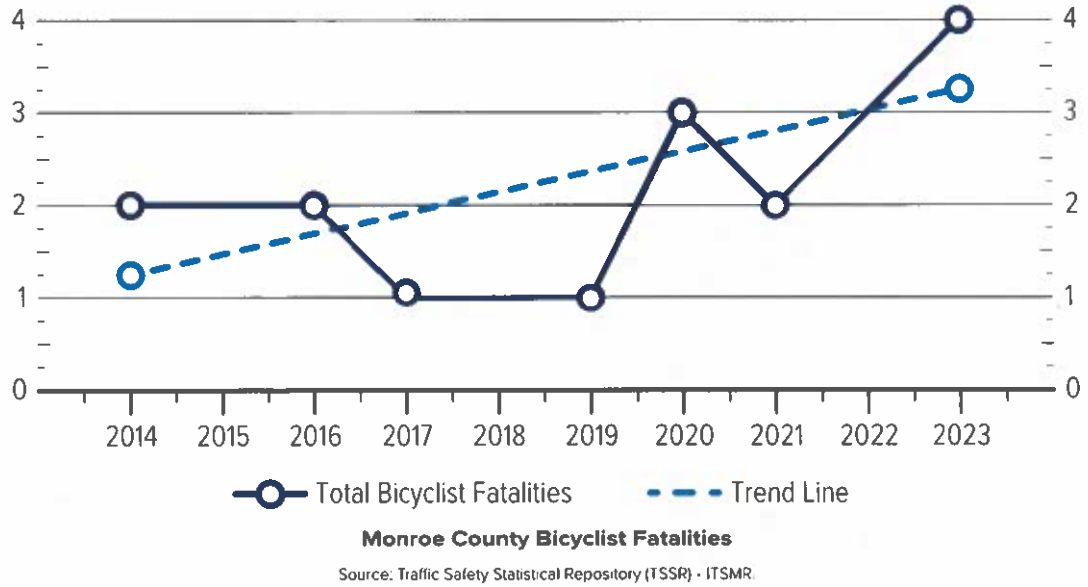
Pedestrian Fatalities in Monroe County 2014–2023



Monroe County Pedestrian Fatalities

Source: Traffic Safety Statistical Repository (TSSR) • ITSMR

FIGURE 24
Bicyclist Fatalities in Monroe County 2014–2023



Monroe County Bicyclist Fatalities

Source: Traffic Safety Statistical Repository (TSSR) - ITSMR

Trend 4

Ongoing changes in regional freight operations

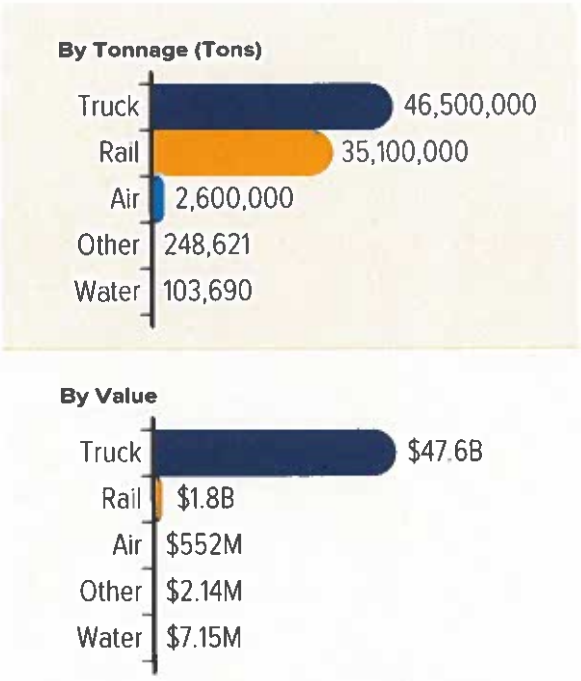
A thorough understanding of multimodal freight flows, key corridors, and infrastructure needs is vital for guiding transportation investments, encouraging sustainable and reliable goods movement, reducing negative community impacts, and aligning regional priorities with state and national freight goals. Freight plays a crucial role in the region's economic success, as efficient freight transportation directly influences growth. Some of the Genesee-Finger-Lakes Region's most competitive industries rely on its transportation infrastructure. According to the GTC's Genesee-Finger Lakes Regional Freight Plan Update, freight-dependent industries—such as agriculture, manufacturing, utilities, retail trade, wholesale trade, construction, transportation and warehousing, and mining/quarrying—make up 24% of the regional GDP. The condition of transportation infrastructure in Monroe County is critical to maintaining the region's top industries' effectiveness and supporting the future expansion of these sectors, thereby ensuring the region's ability to stay competitive amid rapid change and growth.

Trucks move the majority of freight and goods throughout the region, followed by rail, both of which are expected to see significant increases in volume and value by 2050 due to freight-dependent industry investments, population growth, and e-commerce expansion (GTC, 2025) **(Figure 25).** Trucking activities in the Genesee-Finger Lakes region are served by interstates I-590, I-490, I-390, and I-90.

These highways offer access to nearby Buffalo and Syracuse, as well as to Ontario, Canada, New York City, and surrounding states, and the nation. In 2021, the region's multimodal freight transportation system moved more than 400 million tons of goods valued at over $440 billion, with passthrough freight making up the majority of the flows **(Figure 26).**

FIGURE 25

Commodity Flow Tonnage and Value by Mode, 2021 Data and 2050 Projection



Commodity Flow by Mode, 2021

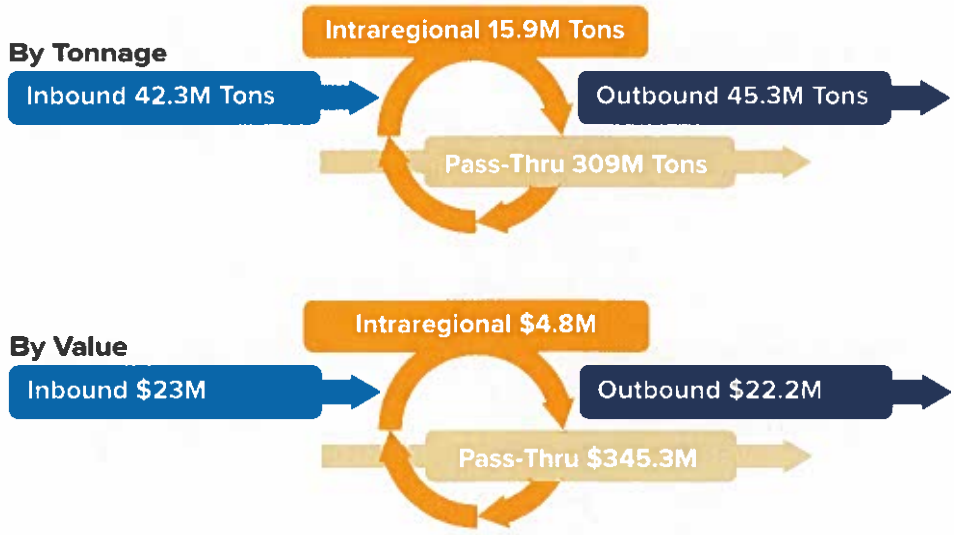
Source: GTC, Genesee-Finger Lakes Regional Freight Plan Update, 2025 (ACPCS Analysis of S&P Global Transearch, 2023)



Forecasted Commodity Flow by Mode, 2021

Source: GTC, Genesee-Finger Lakes Regional Freight Plan Update, 2025 (ACPCS Analysis of S&P Global Transearch, 2023)

FIGURE 26
Commodity Flow by Direction, 2021



Commodity Flow by Direction 2021
Source: GTC, Genesee-Finger Lakes Regional Freight Plan Update, 2025 (ACPCS Analysis of S&P Global Transearch, 2023)

2.3 What Do We Build On?

2.3.1 A Comprehensive Transportation Network

Monroe County has a well-established transportation network that includes roadways, intercity travel, public transit, and active transportation system, serving the varied mobility needs of residents and visitors **(Figure 27).** This multimodal network provides a strong foundation for continued investment to strengthen multimodal connectivity, improve safety and accessibility, and ensure all modes can effectively support current and future travel demand.

Interstate highways form the backbone of the road network, linking the region to destinations across the country. The New York State Thruway (I-90) connects the area with communities throughout Upstate New York and beyond to the east and west, while I-390 provides a southern connection. I-490 and I-590 handle high traffic volumes within the region, including the City of Rochester and densely populated suburban areas. The New York State Thruway Authority and the New York State Department of Transportation (NYSDOT) are responsible for operating and maintaining these interstate highways. State highways, managed by NYSDOT, and county highways, overseen by the Monroe County Department of Transportation (MCDOT), serve as vital links between the interstates and local roads; these are the main routes many of residents use daily, whether for commuting to work, shopping, or visiting family in nearby towns. Local roads account for two-thirds of all road miles in Monroe County. Municipalities (i.e., cities, towns, and villages) are responsible for maintaining local roads.



FIGURE 27
Monroe County Transportation Network

MCDOT handles numerous transportation-related responsibilities, including overseeing the safe and efficient operation of county-owned infrastructure and manages approximately 664 miles of highways, 192 bridges, 344 major culverts, 140 retaining walls, and 830 traffic signals and flasher devices, including those operated and maintained by MCDOT on City streets (Monroe County, 2025f).

Building on safety as MCDOT's top priority, system efficiency also plays a critical role in reducing risk-taking behavior. This is achieved through a coordinated, systems-based approach at signalized intersections that integrates technology and operations. Tools such as pedestrian push buttons, Accessible Pedestrian Signals (APS), non-intrusive detection systems, optimized signal timing, targeted safety treatments, and data analytics are deployed in combination. Together, these elements create a layered, performance-driven transportation system that improves safety, enhances reliability, and supports more predictable and efficient travel for all users.

Sidewalk Incentive Program

In June 2023, the County Legislature approved a $10 million allocation from the general fund to establish the sidewalk incentive program. Previously, the cost of adding sidewalks along county roads was fully covered by towns. Through this program, an intermunicipal agreement will be offered to the town that includes a partial county subsidy, up to 50%, to offset the sidewalk's cost. This cost-sharing initiative aims to make crucial infrastructure improvements more affordable and attainable for the towns, while encouraging investment in safer, more connected pedestrian networks and to promote active transportation across the county.

Veo E-Scooter and E-Bike Sharing Program

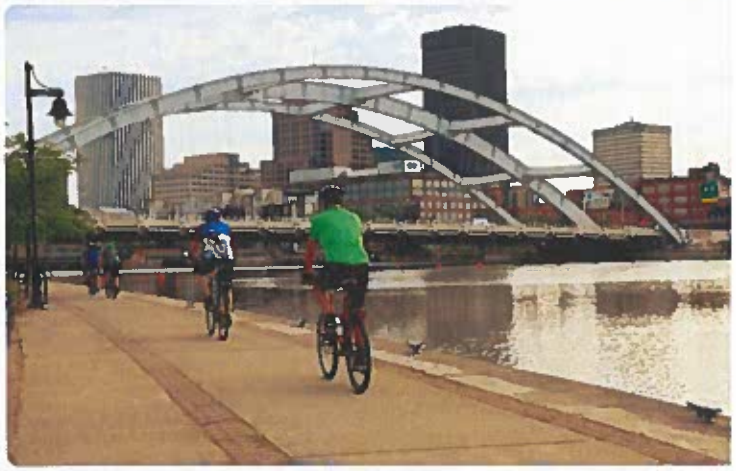
Launched in June 2023, the Veo E-Scooter and E-Bike Sharing Program marked a significant expansion of shared micro-mobility options in the City of Rochester. Veo, an independent shared mobility company, operates a mixed fleet of e-scooters and e-bikes. Devices are distributed throughout neighborhoods in each quadrant of the city, helping residents and visitors with the first mile/last mile transportation need of connecting to bus stops, commuting to work, or exploring city attractions. Veo employs a team of local staff responsible for distributing and maintaining the fleet and responding to issues or complaints as they arise.

The 2024 season, running from March through early December, was the program's first full year of operation and saw impressive uptake: over 425,000 total rides were taken by 26,000+ unique riders, with a peak deployment of 1,200+ devices. The busiest hub was the RTS Transit Center, highlighting the program's strong integration with the public transit network. To support accessibility, the program offers several rider options. Low-income users may qualify for Veo Access, a reduced-price monthly membership designed to remove cost barriers. Additionally, users can sign up for VeoPlus, a monthly membership that waives unlock fees, making frequent use more affordable.





The County has made significant progress in promoting sustainable and inclusive mobility through its 2023 Countywide Active Transportation Plan, which focuses on non-motorized transportation modes such as biking and walking not only for recreation but also as a practical way of everyday commuting while accommodating people of all ages, incomes, race, and abilities. The plan is strategically designed to enhance safety, expand the current networks of sidewalks, trails, and bike lanes, and address critical infrastructure gaps to ensure equitable access to transportation for all community members. There are also programs, campaigns, and initiatives such as the County's Sidewalk Incentive Program, Road-diet and Complete Street Policies, and numerous bike lane projects that all work to promote a comprehensive, integrated, and connected multi-modal transportation network.







The Frederick Douglass Greater Rochester International Airport (ROC) has been awarded among the USA TODAY 10 Best Readers' Choice Award for Best Small Airport in 2023, 2024, and once again for 2025, continuing its strong track record of excellence, passenger satisfaction, and national recognition (USA TODAY).

Increasing transportation options offer opportunities for Monroe County residents to find a mode of transportation that fits their needs, preferences, budget, and activity level. This, in turn, helps promote active lifestyles, boosts community health, and supports local economic development in two main ways: reducing absenteeism by providing workers with more transportation choices and making Monroe County a more attractive and livable place. Looking ahead, the County plans to improve inter-municipal corridors, enhancing connectivity between towns and villages and ensuring safer, more efficient travel within and across communities (Monroe County, 2023).

The Frederick Douglass Greater Rochester International Airport (ROC) is a vital part of Monroe County's transportation system. A major regional hub offering over two dozen nonstop domestic flights along with international travel, the airport connects the County to the rest of the country and the world (ROC, 2025). The airport has recently undergone several upgrades focused on improved customer experience, including the installation of a parking guidance system, extended canopy walkways for all-weather protection, larger entryways for improved accessibility, and faster baggage handling systems. These enhancements, along with renovated passenger zones and expanded dining and amenity options, are designed to make the travel experience easier, more convenient, and attract more users. The airport also plays a critical role in freight and logistics for consumers and businesses in Monroe County. Continued investment in air-related logistics will allow Monroe County businesses to stay competitive. Major carriers like FedEx and UPS operate at ROC, providing overnight and next-day service, linking Rochester to national and global networks. The airport links the region to global markets, facilitating advanced manufacturing and high-tech industries' demand on quick delivery of parts and products.

Together, these ongoing improvements to transportation infrastructure and assets highlight Monroe County's commitment to creating a safer, healthier, and more interconnected community that supports growth, mobility, economic progress, and quality of life for all its residents.



2.3.2 Water Resource Protection

Monroe County's location affords it the benefit of abundant water resources and a moderate climate. Monroe County's waterways, shaped by glaciers that once covered the entire landscape, offer scenic beauty and recreational opportunities while playing a vital role in the County's economy. The Genesee River and the Erie Canal, once drivers of our manufacturing economy, now host regional trails like the Genesee Valley Riverway Trail and the Empire State Trail. Major water resources, such as Lake Ontario, the Genesee River, Irondequoit Bay, Black Creek, Honeoye Creek, Oatka Creek, their tributaries, and groundwater are part of the system that provides the County with fresh, clean drinking water **(Figure 28)**.

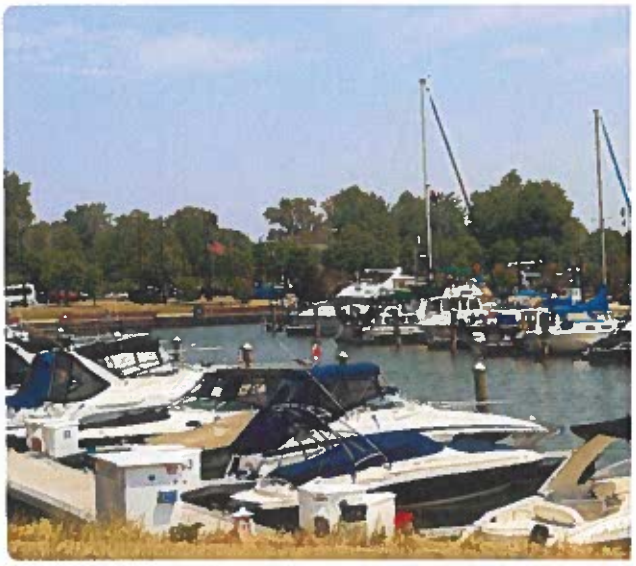
Monroe County also contains about 461,000 acres of identified wetlands, making up more than 10% of its landscape. Wetlands and floodplains are critical components of ecosystems and provide various benefits to the County's resiliency, including filtering excess pollutants from stormwater runoff and providing habitats for a diverse range of plants and animals. They also temporarily store floodwater, reducing the effects of flooding events on infrastructure and drinking water quality.

Changing climate and precipitation patterns in western NY will impact many aspects of the water system, and Monroe County Water Authority (MCWA) has been proactive in addressing its long-term sustainability. The Monroe County



Department of Environmental Services (DES) coordinates and supports the Stormwater Coalition of Monroe County, a partnership of 29 municipal members, to advance watershed management via a wide range of projects and programs that include public education, training, technical assistance, and knowledge transfer. Additionally, the Monroe County Climate Action Plan (CAP) highlights environmental projects aimed at protecting communities, infrastructure, and preserving ecosystem health against current and future climate risks. Some of the projects include enhancements to the Lake Ontario Shoreline to mitigate flooding and erosion damage from severe lake level fluctuations through the establishment of living shorelines and further supporting stream and shoreline stabilization.





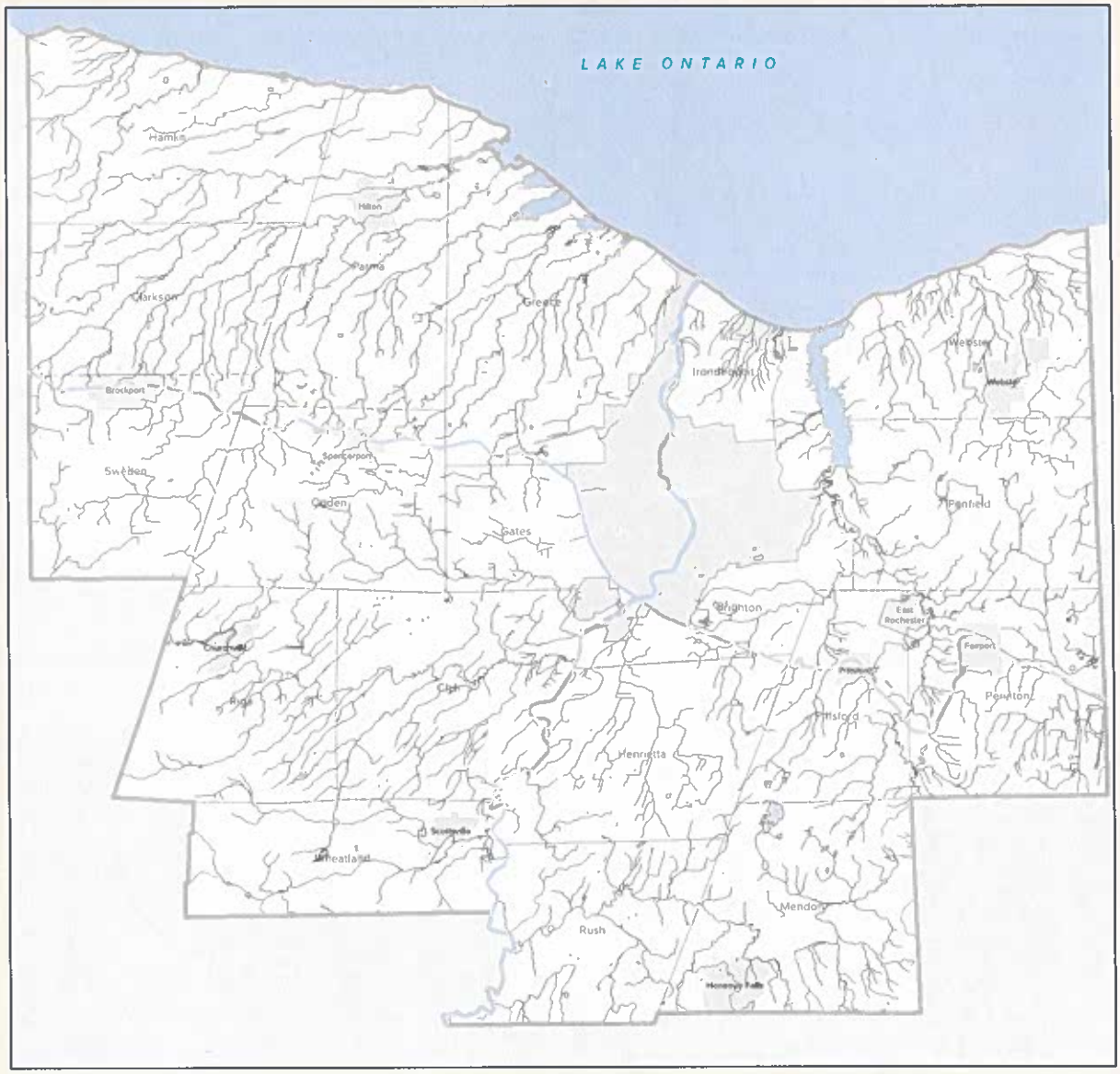


FIGURE 28

Monroe County Water Resources

Source: Monroe County GIS

In Monroe County, the management of water and sewer infrastructure is distributed among the Monroe County Water Authority (MCWA), City of Rochester Water Bureau, Monroe County Division of Pure Waters (MCPW), and local municipal governments **(Figure 29)**. MCPW was established in 1967 with the goal of reducing the levels of pollution in Monroe County waters to safe and healthy levels. From the late 1970s through the early 1990s, Monroe County Pure Waters (MCPW) took advantage of nearly $500 million in federal construction grants to construct a sophisticated deep-rock tunnel system in the Rochester Pure Waters District known as the Combined Sewer Overflow Abatement Program (CSOAP) that has dramatically reduced combined sewer overflow events in the Genesee River and Irondequoit Bay; thereby, improving the water quality of the Genesee River, Irondequoit Bay and the Rochester Embayment.

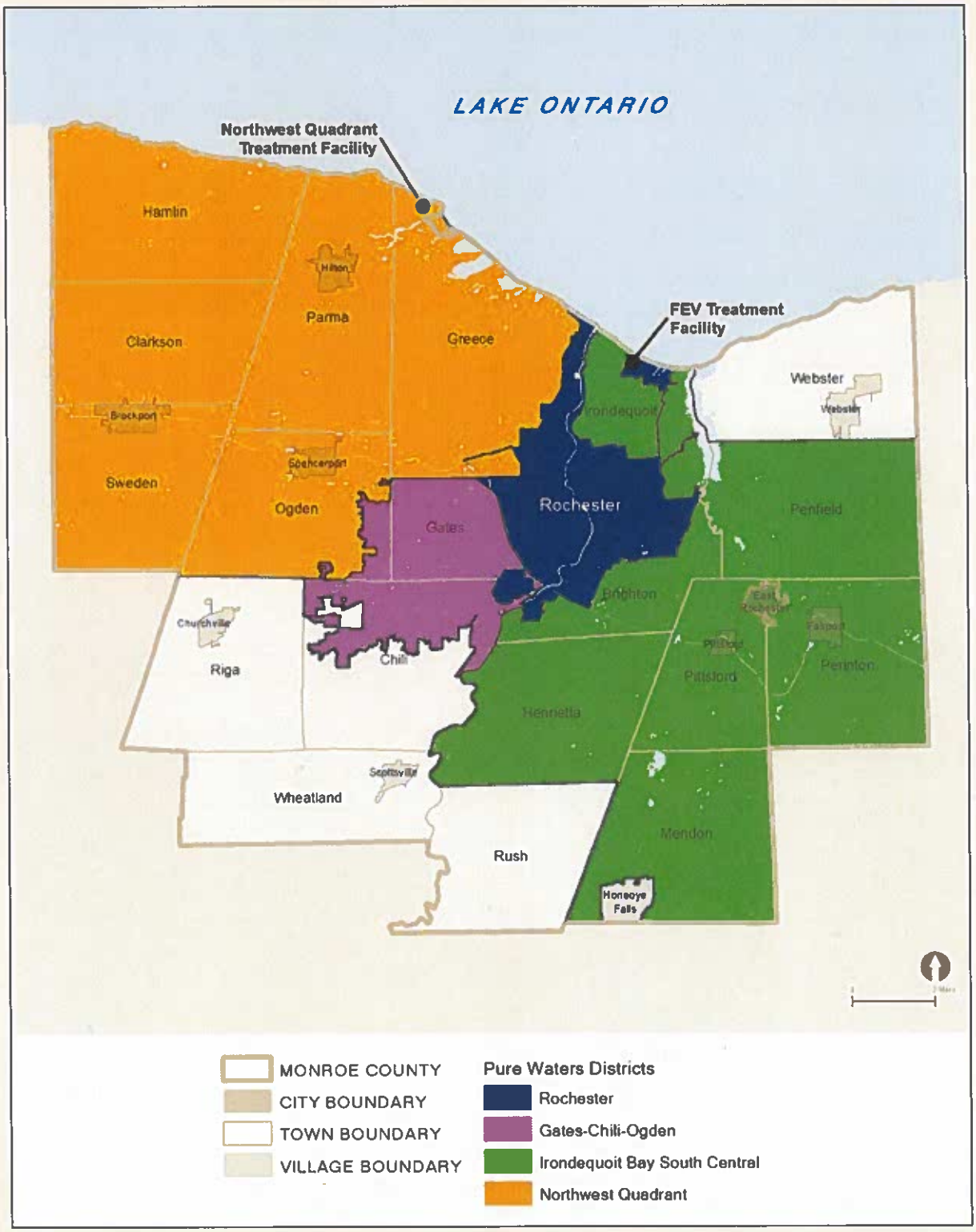


FIGURE 29
Pure Waters Districts

The MCPW CSOAP deep-rock tunnel system in the Rochester Pure Waters District has significantly reduced combined sewer overflow events, however, intense wet weather events can cause tunnel system capacity exceedances. Incorporating green infrastructure such as permeable surfaces or green roofs, and reinforcements of bridges and culverts along the main water bodies, such as the Genesee River corridor, could help reduce stormwater runoff that contributes to tunnel system capacity exceedances and storm damage, as well as provide additional ecosystem benefits.

Today, MCPW manages four sewer districts, Northwest Quadrant, Gates-Chili-Ogden, Rochester, and Irondequoit Bay South Central, containing two water resource recovery facilities (WRRFs), pump stations, and sewer collection systems. This complex system of ownership and responsibility of providing potable water and treating wastewater and stormwater requires continual coordination between local municipalities and planners throughout Monroe County to review land use decisions that will impact water demands. Since inception, MCPW has successfully consolidated over 35 town and village sewage treatment plants into two regional WRRFs; thereby, improving overall efficiency, treatment compliance and rate stabilization. The potential for consolidation of the four (4) MCPW Districts into one (1) District with separate zones of assessment will be explored to achieve ongoing operational efficiencies and fiscal stabilization. The County's upcoming review and plan to allow for the forthcoming issuance of a new permit for the Frank E. VanLare Water Resource Recovery Facility (WRRF) will guide future MCPW improvements and protect water resources in a changing climate with changing community needs.



In addition to the importance of supplying existing residents with clean drinking water and wastewater services, a resilient potable water infrastructure system is a key component of the growth and development of metropolitan areas **(Figure 30)**. Adequate and modern infrastructure reduces business costs and enhances connectivity, making a location more attractive to investors. The MCPW CSOAP tunnel system has significantly

Schools Food Waste Diversion Pilot Program

Launched in 2025 as a pilot program, this county program provides funding via grants to assist public school districts within Monroe County and BOCES #1 and #2 in starting or expanding food waste diversion programs. This pilot program provides up to 50 % matching funds for local schools wishing to implement new initiatives—or build on current efforts—to divert food waste from landfills. This pilot program aims to improve environmental outcomes in Monroe County while engaging our youngest residents as the next generation of stewards responsible for protecting the County's future.

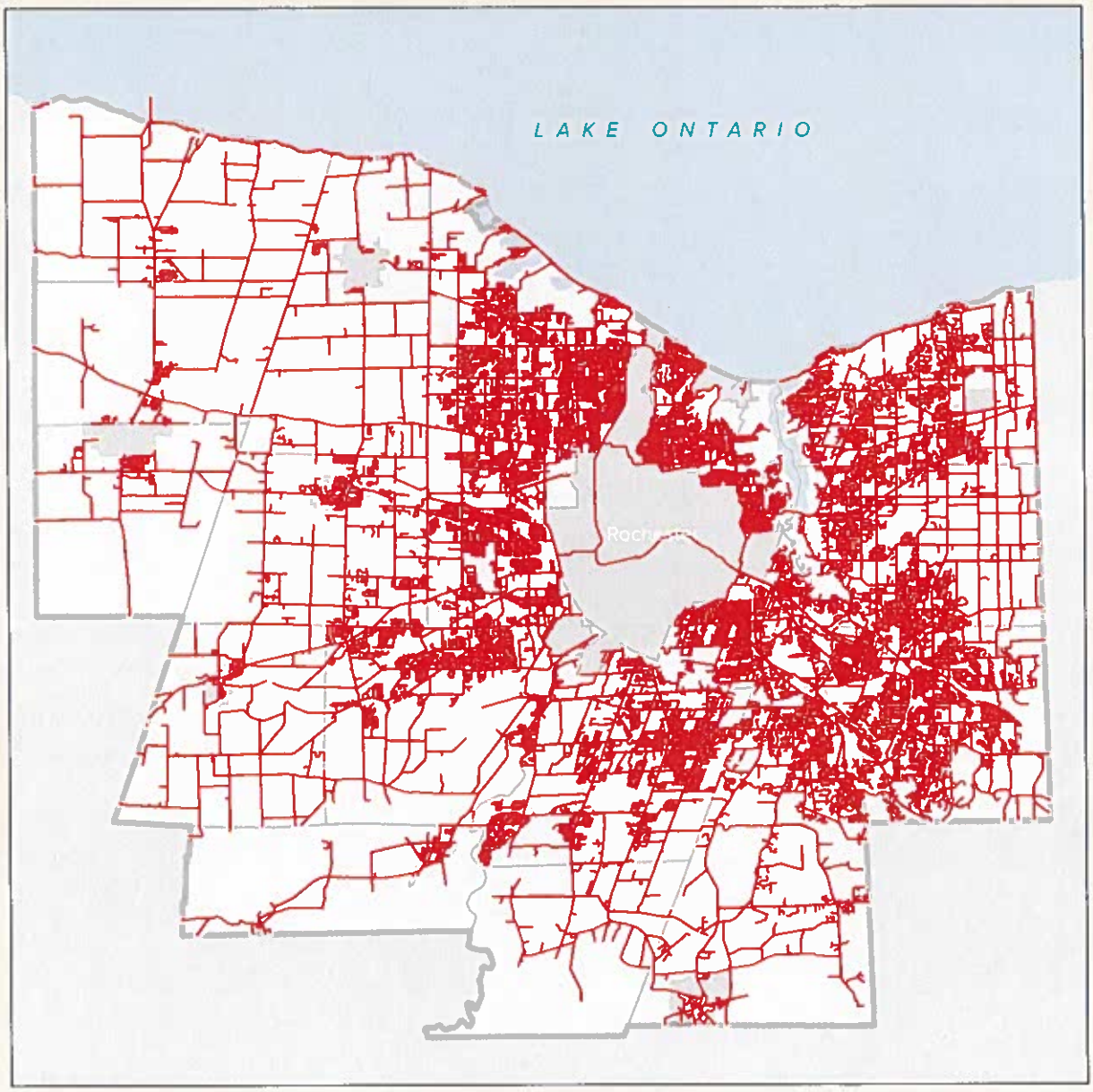


FIGURE 30

Monroe County Water Authority (MCWA) Public Water System

Source: Monroe County GIS

reduced combined sewer overflow events, however, intense wet weather events can cause tunnel system capacity exceedances. Incorporating green infrastructure such as permeable surfaces or green roofs, and reinforcements of bridges and culverts along the main water bodies, such as the Genesee River corridor, could help minimize these tunnel system capacity exceedance and storm damage, as well as provide additional ecosystem benefits (Monroe County, 2024).

Establishing a future vision for managing water and sewer infrastructure in Monroe County can guide local planning boards, elected officials, property owners, developers, and business owners in understanding how physical water resources may influence the location and costs of development.



Monroe County has adopted waste management and climate action plans that reinforce a forward-thinking approach to water resource protection and county resilience.

The County's Local Solid Waste Management Plan (LSWMP) offers a 10-year path for waste generation reduction and diversion, with specific strategies on how to increase recovery of resources while decreasing disposal of waste (Monroe County DES, 2015). Moreover, it advocates for waste diversification strategies not only on an individual level but especially in the manufacturing sector which produces a lot of materials that could be further reused. By putting greater emphasis on expanding waste diversion options, the County could become more attractive to businesses that are considering locating in or around the County. Scaling up and modernizing recycling centers as well as expanding privately owned and operated solid waste management and recycling facilities could aid with more streamlined and efficient operations. The current LSWMP was developed in 2015 and will be updated beginning in 2026 for the next 10-year plan to include programs that support waste reduction.







Monroe County Department of Environmental Services (DES) is advancing an Organics Management Plan (OMP) to provide a comprehensive assessment of organic waste generation across residential, commercial, institutional, agricultural, and industrial sectors. It inventories existing programs and infrastructure, evaluates regulatory frameworks, and proposes ten actionable strategies to reduce, recover, and repurpose organic materials. These strategies span food waste prevention, residential and institutional collection programs, centralized processing infrastructure, biosolids management, and expanded outreach and education. The OMP will be wholly incorporated and a new area of emphasis in the forthcoming LSWMP update, reducing greenhouse gas emissions as solid waste processes and markets change.

ecopark

The Monroe County/WM ecopark (ecopark), a partnership between Monroe County and WM, is a model for waste reduction and climate resilience. The ecopark is a comprehensive recycling and recovery center where nearly everything is diverted from the waste stream and redirected back into the supply chain. Through partnerships with various organizations, the ecopark collects and recycles a wide array of materials including electronics, appliances, rechargeable and button batteries, light bulbs, scrap metal, foam, textiles, propane tanks, and cooking oil, ensuring they are disassembled, properly treated, and reused or recycled.



ecopark is also home to the County's Household Hazardous Waste Facility, which prevents pollutants such as gasoline, oil-based paints, and pesticides from entering landfills and waterways. With over 7,000 appointments made each year, the ecopark keeps more than 300 tons of toxins out of the environment and recycles roughly 900 tons of materials.

Monroe County, NY • ecopark • Drop Off Specialty Recycling/Hazardous Household Waste

2.3.3 High-Quality Parks & Trails System

Parks and trails provide many benefits, some of which include strengthening quality of life, positively impacting individual and community health, and providing important spaces for gathering, exercise, connections, and exposure to nature. Monroe County's open space system includes state, county, and local parks; land trust properties; conservation easements; waterways; and trails. In aggregate, these systems provide opportunities for Monroe County residents and visitors to enjoy the natural environment, gather for events and activities, and travel throughout the County and region. Monroe County currently owns and operates 22 parks, covering approximately 12,000 acres and located throughout the County **(Figure 31),** and is in the process of acquiring its 23rd park. The County's parks feature athletic fields, nature and multi-use trails, campgrounds, dog parks, sledding hills, golf courses, ice skating rinks, and more. Special uses of the parks include fundraisers, festivals, concerts, summer camps, sports leagues, and exercise classes. Many parks are enhanced by, and protect, the County's water resources (e.g., lakes, bays, creeks, streams, ponds, and wetlands), providing opportunities for park users to experience and interact with the County's abundant water resources through activities like fishing, swimming, birding, and recreating along stream-side trails.

County owned or operated parks are located in fifteen of the twenty towns in the County, with five of those parks encompassed in part or fully by the City of Rochester. Two such parks include Highland Park and Ontario Beach Park, which exemplify city-county collaboration that benefits all users of Monroe County parks.



In 2025, Monroe County acquired 70 acres of parkland in Henrietta, establishing its 23rd park. This new addition to the County Park system, characterized by rolling contours and abundant natural beauty, offers enhanced passive recreational opportunities. Located adjacent to the popular Lehigh Valley Trail, this new county park provides residents with an ideal setting to connect with nature.

In urban places, proximity to parkland is an important measure for community health and well-being. Compared to peer cities, Rochester's Census-designated urban area has an above-average share of its land dedicated to public recreation, and 48% of residents in the City of Rochester and its surrounding urban area live within a 10-minute walk of a park **(Figure 32).** Similarly, in the surrounding suburbs and rural communities, it is important that people have access to safe, off-road, multimodal connections between parks and other destinations. Monroe County will continue to prioritize recreation access in urban, suburban, and rural communities.

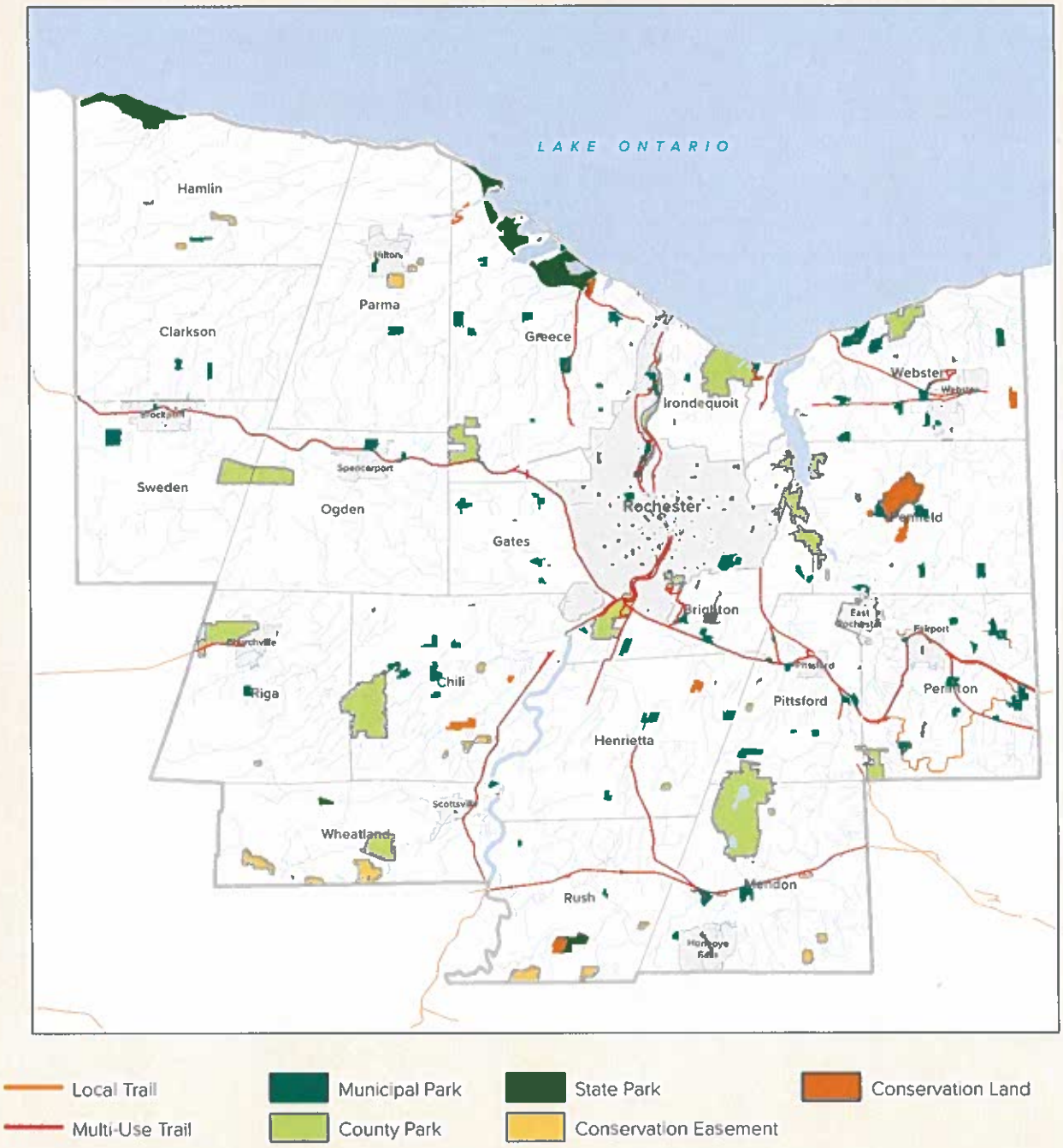


FIGURE 31

Monroe County Parks, Trails, and Recreation

Source: Monroe County GIS

FIGURE 32
Park Walksheds for Upstate Metro Areas

CENSUS-DESIGNATED URBAN AREA	RESIDENTS WHO LIVE WITHIN A 10-MINUTE WALK OF A PARK
Rochester	48%
Buffalo	58%
Syracuse	42%
Albany	43%

Source: Trust for Public Land (2025)

In addition to the trails within Monroe County-owned parks, regional hiking, biking, and snowmobile trails, like the Empire State and Genesee Greenway Trails, create connections between the County parks. Extending the trails of Monroe County Parks to further integrate with regional trail systems, local efforts (e.g., ROC the Riverway in Rochester), and residential neighborhoods would foster a more cohesive network of trails and parks, providing easy multi-modal access and highlighting the value of Monroe County's natural landscapes for everyday living.

Multiple parks within the county system have park specific master plans that guide the management and investment in facilities, vegetation, trails, access, and amenities. Building on this foundation, Monroe County can continue evaluating current and future recreational demands, prioritizing improvements through strategic planning, and coordinating resources across the entire County Park system.



2.4 What Do We Need to Address?

2.4.1 Monroe County's Resilient Future

Although many climate actions rely heavily on state, national, and international factors and trends, Monroe County is taking steps to expand and enhance its climate leadership capacity. Monroe County will experience limited impacts compared to other regions of the country, but it will not be immune to all effects of climate change. The stronger the County's focus on climate resiliency and adaptation, the better equipped its municipalities will be as the urgency of the climate crisis increases. The most pressing issue is reducing greenhouse gas emissions while implementing resilient adaptations to respond to projected future conditions associated with climate change.

Overall, Monroe County has a strong foundation to build on in advancing climate resilience by improving how energy is generated and used. Still, Monroe County's goal is to reduce its reliance on fossil fuels by promoting renewable energy sources and reducing energy consumption wherever possible. Statewide commitments, such as a climate target to generate 70% of its energy from renewable sources by 2030 and achieve 100% carbon-free electricity by 2040, provide an important framework for local progress **(Figure 33).**

To this end, Monroe County DES is advancing a Climate Adaptation and Resilience Plan (CARP) in 2025 consistent with the County's Climate Action Plan (CAP). The CARP will assess the physical, social, and economic vulnerabilities of the County to climate change and recommend policies, strategies, and programs to improve the County's ability to respond and adapt to climate change. County departments and the public will help to shape the priorities of the CARP and provide feedback on proposed climate adaptation and resiliency policies and strategies.

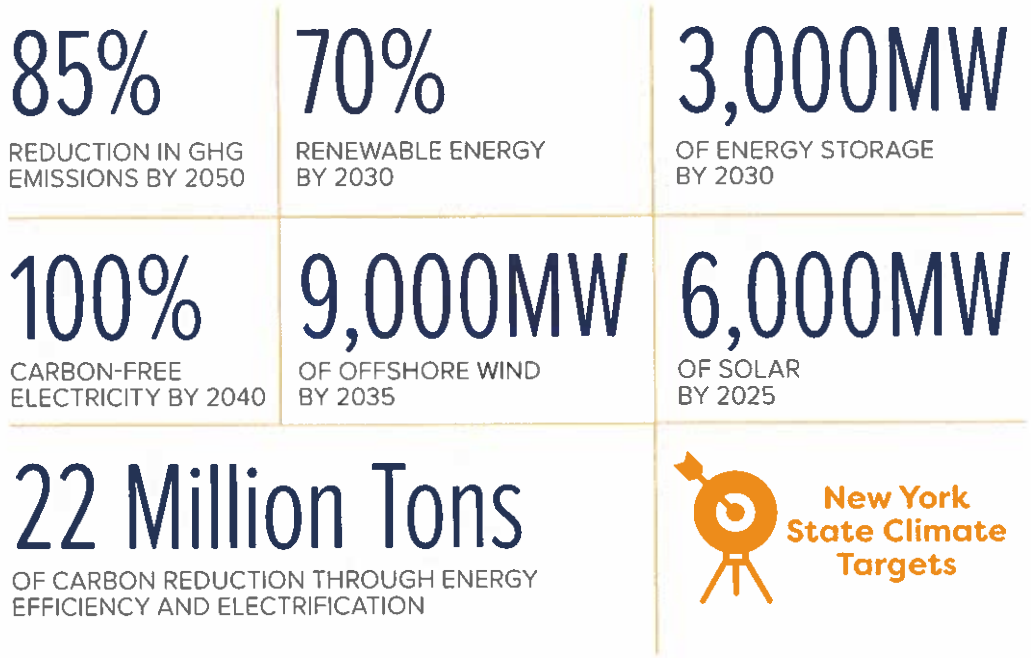


FIGURE 33
NYS Climate Targets
Source: https://climate.ny.gov/our-impact/our-progress

Climate Action Plan



The County finalized its two-phased Climate Action Plan (CAP) in 2024, outlining the steps necessary to achieve the GHG reduction target of 80% below 2019 levels by 2050. Phase I included a greenhouse gas emissions inventory and identified County operational goals, reduction targets, and supporting implementation plans by sector for activities directly undertaken by Monroe County. It provides a dynamic framework of goals, strategies, and actions for community-wide implementation **(Figure 34)**. Given County government operations account for only 0.6% of the county's total greenhouse gas emissions, Phase II expands the scope focus on residential, commercial, industrial, municipal, and other energy-dependent activities in Monroe County that are outside of the County's direct control. This two-phased approach provides a more comprehensive understanding of the County's emission-producing infrastructure and activities, ultimately creating a dynamic framework of goals, strategies, and actions for community-wide implementation in the future **(Figure 35)**.

FIGURE 34
Greenhouse Gas Reduction Targets

Sector	CO_2e(MT) 2019 Baseline	2050 Reduction	Percent
Building and Facilities	26,073 CO_2e(MT)	-20,858 CO_2e(MT)	80%
Expressway Lighting and Signals	1004 CO_2e(MT)	-1004 CO_2e(MT)	100%
Pure Waters Infrastructure	9,225 CO_2e(MT)	-7,380 CO_2e(MT)	80%
Solid Waste and Materials Management	6,035 CO_2e(MT)	-5,173 CO_2e(MT)	90%
Transportation Fleets	3,295 CO_2e(MT)	-2,965 CO_2e(MT)	90%
Overall Reduction Target			**80%**

Source: Monroe County Climate Action Plan Phase I

FIGURE 35
CAP Phase II Goals & Strategies Framework Diagram



Source: Monroe County Climate Action Plan Phase II

There are several programs in action to help Monroe County achieve these ambitious goals. One example is Monroe Community Power, a renewable energy initiative that allows municipalities to provide residents and small businesses with electricity bill savings by pooling local electricity demand to secure better terms on supply or by offering access to solar benefits. In 2001, Monroe County created a municipal energy aggregation group (EAG) to offer lower-cost natural gas and electricity for municipalities, public benefit corporations and districts. To date, there are approximately 25 EAG customers. The County can continue to grow the EAG membership to achieve even greater savings. Additionally, Monroe County and other municipalities across New York State participate in the Climate Smart Communities and Clean Energy Communities Programs, which encourage communities to adopt adaptation and mitigation strategies. Monroe County is also investing in the efficiency of County facilities and operations through initiatives such as the Green Building Policy and promoting Commercial Property Assessed Clean Energy (C-PACE) financing.

Expanding electric vehicle charging infrastructure at County facilities can further advance resilience and lower Monroe County's carbon footprint by supporting plug-in electric vehicles. As of July 2025, there were 14,098 EVs on the road in Monroe County, with a steady 8.3% growth over the 3-month period (Atlas Public Policy, 2025). The EV charging stations are spread throughout the County, with over 1,200 ports across more than 340 charging locations (Figure 36). Of these, 146 ports are Direct Current Fast Charging (DCFC), while the rest are Level 2 ports. Monroe County is currently developing an EV Master Plan as part of the CAP to identify additional locations for charging stations and to create a practical strategy for transitioning the County's fleet (excluding the Monroe County Sheriff's Office) to clean-powered vehicles and equipment whenever feasible.

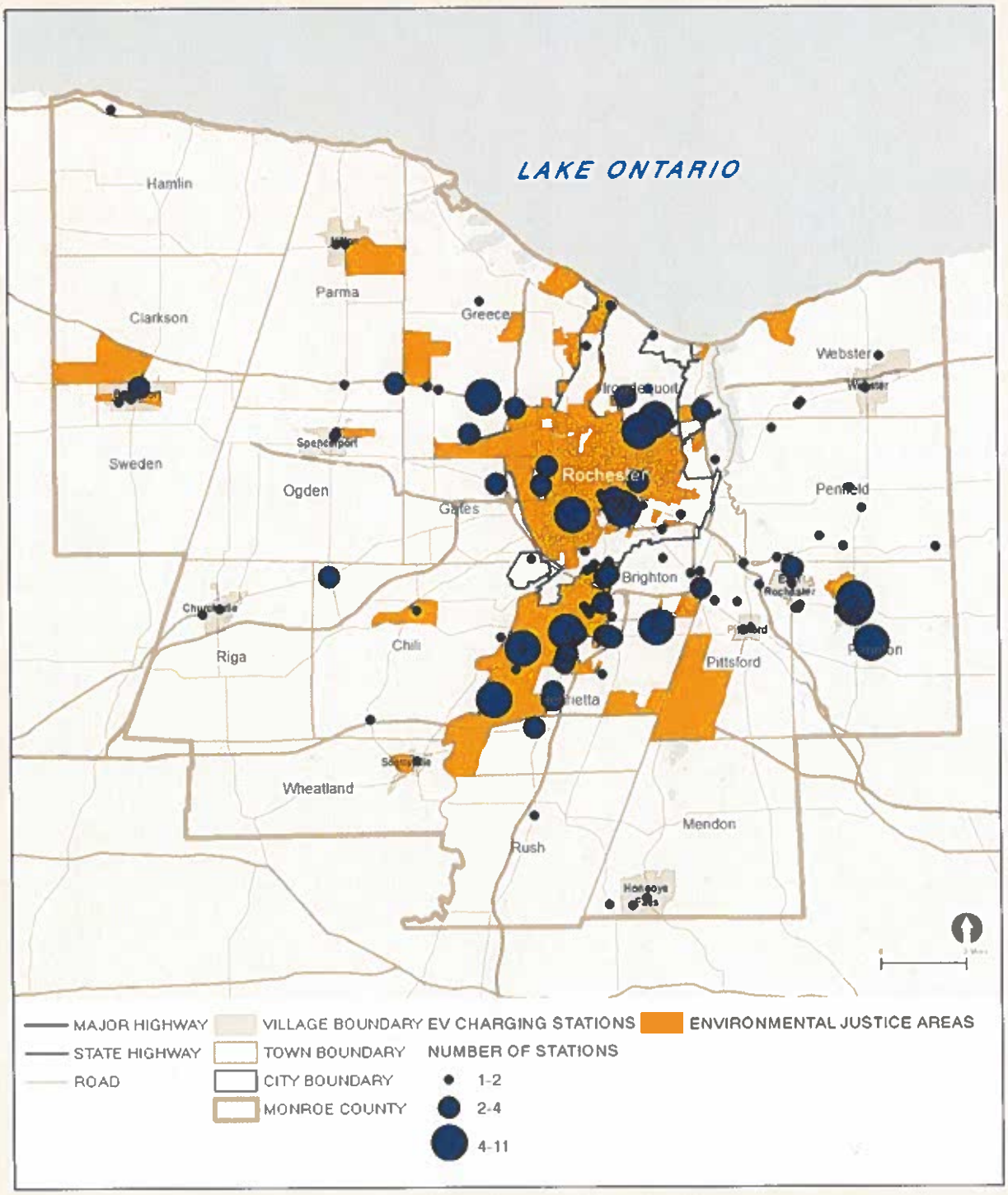
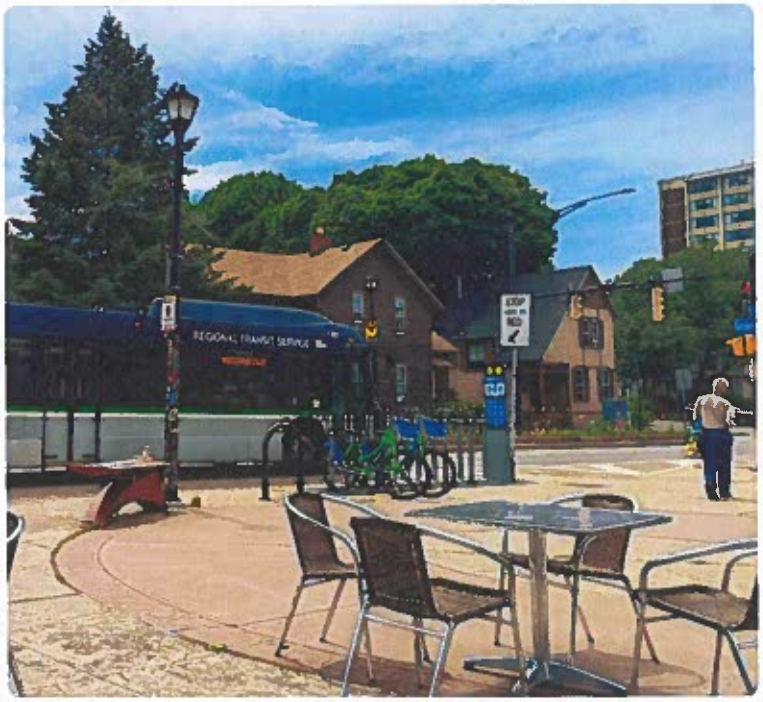


FIGURE 36

EV Charging Stations in Monroe County

As of 2022

Source: Atlas Public Policy, 2025





Together, these programs and initiatives help the County do its part to mitigate climate change's negative impacts and build local resilience through adaptation to an uncertain future. This is especially vital in marginalized communities, where climate impacts can exacerbate existing inequalities. Low-income communities and communities of color have been disproportionately exposed to environmental hazards, leading to higher rates of chronic illness and persistent poverty. This often results from the placement of toxic industries in these areas, causing residents to disproportionately experience the negative effects of pollution and environmental changes. Monroe County can serve as a leader and collaborate with municipalities on climate action planning, infrastructure improvements, nature-based solutions, waste reduction strategies, and the implementation of climate-smart building policies to prepare for and respond to both acute and chronic climate events.

The County can play a role in helping municipalities transition to more efficient infrastructure investments and provide resources and frameworks that support infrastructure sustainability. For example, the County can work with municipalities to participate in the New York State programs, such as Climate Smart Communities and NYSERDA Clean Energy Communities, which fund planning and implementation actions to reduce greenhouse gas emissions and adapt to a changing climate. The County can also pursue other state funding opportunities, such as the County Infrastructure Grant Program, which supports county-led infrastructure programs (Empire State Development, 2025c). Monroe County also plays a role in supporting local municipalities that may be interested in developing the land use regulatory framework to support mixed-use walkable development patterns through tools such as model ordinances and technical assistance for local comprehensive planning and zoning updates. In addition, the County has launched an initiative to develop climate action toolkits for communities, businesses, and organizations as a resource for implementing CAP Phase II.

Monroe County's natural systems play an important role in supporting community resilience by providing habitat, protecting water resources, and delivering essential ecosystem services. These systems face interconnected challenges, including climate change, habitat fragmentation, and the spread of invasive species. Habitat loss can reduce the ability of native plants and wildlife to adapt to changing environmental conditions, while invasive species can degrade habitats, disrupt ecosystem functions, and contribute to declines in native biodiversity.

Building ecological resilience includes maintaining and enhancing natural corridors, protecting and restoring habitats, and preventing the spread of invasive species. The Monroe County Soil and Water Conservation District (SWCD) supports these efforts through education and outreach programs and, in partnership with the Monroe County Department of Environmental Services and Finger Lakes PRISM, operates a watercraft steward program to help prevent the spread of aquatic invasive species.

Protecting biodiversity requires continued collaboration among local, regional, state, and federal partners. Through the PRISM network, the New York State Department of Environmental Conservation (NYSDEC) coordinates invasive species prevention and response efforts while providing technical guidance and management resources that support municipalities, landowners, and other stakeholders.

Non-Native Species & Invasive Species

Non-native species are plants and animals (e.g., livestock or ornamental plants) living in areas where they do not naturally exist. They are can either be intentionally introduced or accidently brought into new areas.

Invasive species are non-native species that cause harm to the environment, economy, or human, animal, or plant health (NPS, 2022).



Spotted Lanternfly
Source: Finger Lakes PRISM



Phragmites autralis
Source: Finger Lakes PRISM



Spiny Waterflea
Source: Monroe County SWCD

2.4.2 The Infrastructure-Land Use Connection



Land use policies shape where people live, work, and play, influencing infrastructure needs and priorities. In turn, infrastructure affects where people can go, how easily they can travel, and what transportation options are available. In other words, real estate development and infrastructure investment do not happen in isolation. Instead, development must consider social, economic, and physical elements to guide growth in a comprehensive and integrated way that adds lasting value to communities (Urban Land Institute, 2021). Policy frameworks can guide where development occurs and can be strategically used to support the County's goals for sustainability, adaptability, equity, livability, and housing options.

Monroe County plays a key role in maintaining existing water, sewer, transportation, and communications infrastructure, as well as developing new infrastructure in select areas to support future growth. As development styles have evolved in fast-growing areas, people are drawn to compact, convenient, walkable neighborhoods with services and amenities accessible within walking distance of home (Luscher, 2025). Encouraging infrastructure capacity upgrades in existing community centers supports growth where services and amenities are already concentrated. Monroe County's many villages and downtown urban areas already provide walkable neighborhoods with a mix of housing types, but they are often among the most expensive and exclusive areas in the County. Building on existing infrastructure, the County can enhance what already exists or develop new areas that provide a broader range of lifestyle and housing options for a larger share of the Monroe County community. Thoughtfully placed infrastructure can also attract businesses to commercial centers where people like to shop, visit, or recreate.

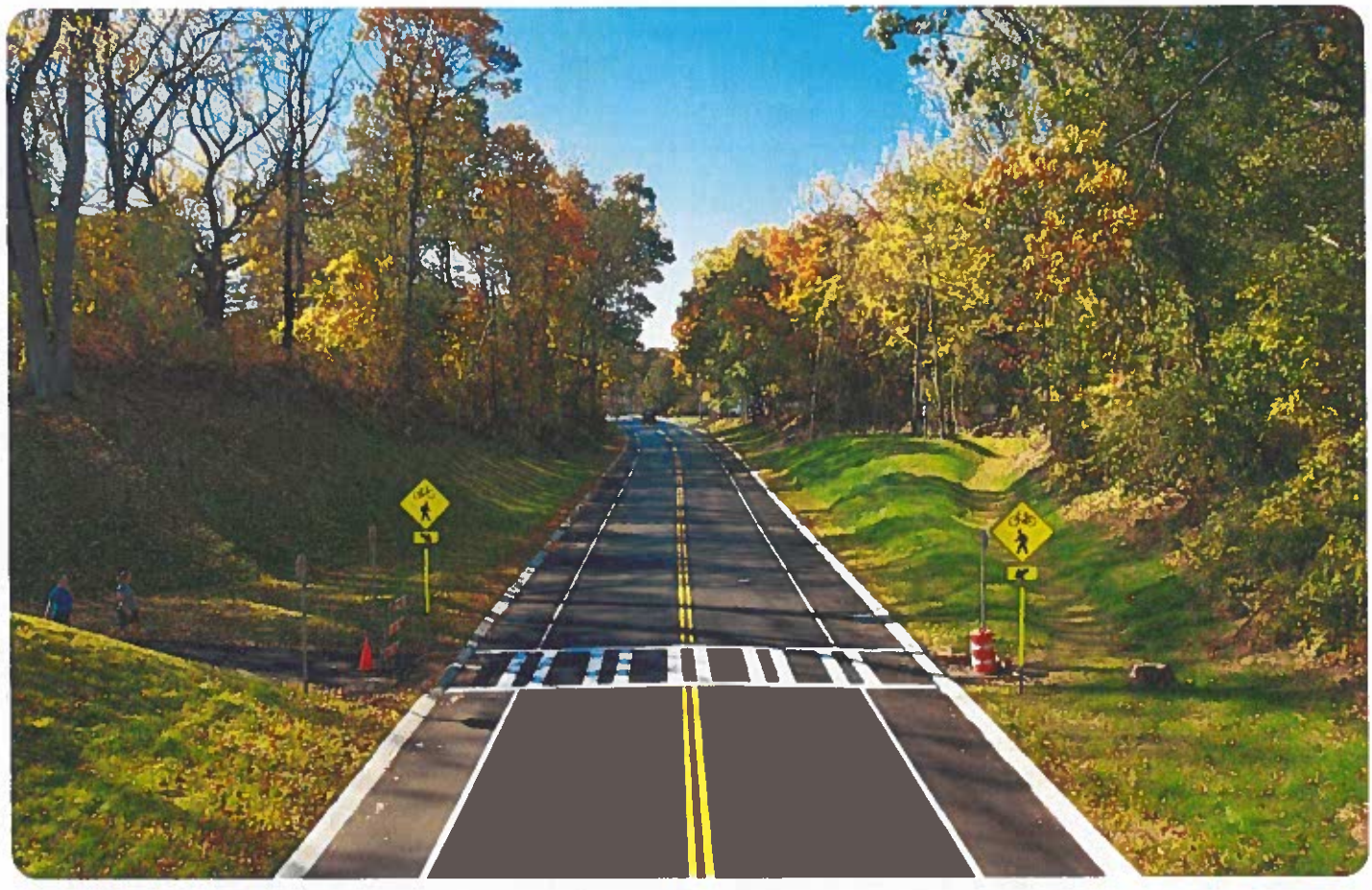
These types of places are not only more valuable per acre but also require fewer resources and less energy than sprawling developments. They encourage walking, biking, and public transit, which can significantly reduce greenhouse gases while improving quality of life and public health. Dense developments also minimize land consumption, leaving space for farming or ecologically important open space.



2.4.3 Multimodal Infrastructure

Productive development patterns are vital to the success of an effective transportation system. The County understands that transportation and land use are deeply interconnected, and both are essential components in building thriving and sustainable communities. Higher-density neighborhoods with multimodal transportation infrastructure enable residents to use alternative transportation options like walking, biking, or public transit, giving them more freedom and increased access to transportation options that meet their needs.

Like much of the United States, Monroe County was largely developed during the mid-twentieth century, during the automobile and highway era of transportation system development. At this time, transportation systems were viewed through a traditional "car-focused" lens, prioritizing speed and efficiency in ways often incompatible with other modes of transportation (i.e., pedestrians, bicycles, and public transit). In recent years, the Monroe County Department of Transportation (MCDOT) has been implementing improvements on County-owned roadways, in parallel with updating guidance and supportive policies, to enhance the safety of all road users.



Creating transit-oriented development and land use policies that focus on enabling shorter trips, increasing public transit frequency, and bringing housing closer to jobs are effective ways to improve public transit use and efficiency. It would be beneficial to encourage increased density along existing RTS bus routes and consider extending routes to areas where growth is planned or expected. Additionally, providing reliable and affordable transportation options is especially important for promoting equity in our communities and ensuring everyone has equal economic opportunities. Moreover, local zoning updates can support the development of emerging transit-supportive neighborhoods.

Local governments can work together to maintain their local infrastructure and implement transportation planning approaches, strategies, and grant programs that make transportation safe and accessible.

First launched in 2004, Complete Streets is a universal approach to designing, operating, and maintaining streets that enables safe access for all who need to use them, including people without access to vehicles, older adults, and people living with disabilities (Smart Growth America, 2025).

The Regional Transit Service (RTS), the regional transit authority established by New York State, offers public transit in Monroe County through fixed-route bus lines and on-demand service zones **(Figure 37)**. The fixed-route buses operate on a set schedule, mainly serving the City of Rochester and major corridors. This focus allows for more frequent service within Rochester's city limits, where higher density makes fixed-route service more efficient. Additionally, residents can request pick-up or drop-off services in designated on-demand areas. However, some bus trips can take much longer than traveling the same distance by car. Time efficiency and accessibility could be improved by ensuring bus stops are within a 5- to 10-minute walk from residents' homes and that buses run often enough for people to reach their destinations in a reasonable time.

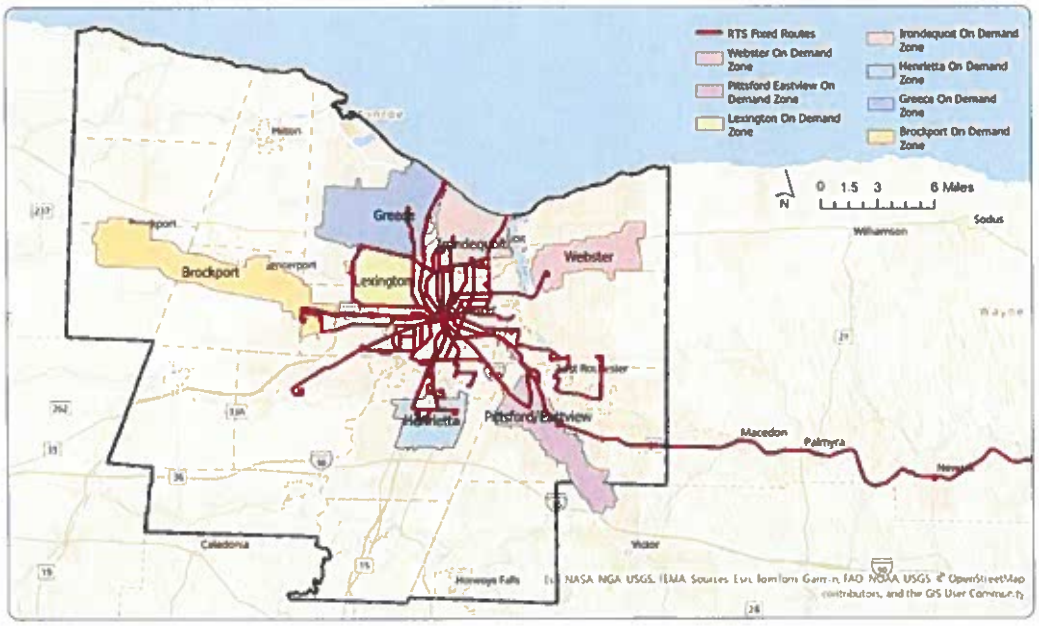


FIGURE 37
Location of RTS Services
Source: Regional Transit Service, September 2025

MCDOT plays a key role in advancing regional priorities, including those outlined by the Genesee Transportation Council's Long Range Transportation Plan (LRTP), which provides a framework for transportation planning over a 25-year period. The recommendations of Long Range Transportation Plan (LRTP) 2045 guide the Genesee Transportation Council's (GTC) Transportation Improvement Plan (TIP), which identifies individual projects and funding allocations that will be advanced in the region over a five-year period (Genesee Transportation Council, 2021). The TIP includes highway, transit, staffing & operations, bridge, and bicycle/pedestrian.

A portion of the GTC TIP funding is allocated to Highway Safety, which addresses safety based on a framework defined by the NYS Strategic Highway Safety Plan (SHSP) (Genesee Transportation Council, 2022). Pedestrian safety initiatives in the TIP focus on highway striping and enhanced crosswalk facilities. Recent investments in Monroe County include making bridge improvements to boost safety and resilience and supporting multimodal projects like trail enhancements. MCDOT has also implemented technological upgrades like smart traffic management systems at intersections. Other technologies such as signal detection cameras can be used to recognize other road users such as transit, cyclists, and pedestrians. MCDOT also leverages the non-intrusive video detection system to analyze safety needs, improve traffic timing, and pinpoint high-risk areas. This data informs capital project scoping, needs assessment, and operational readiness while providing key performance metrics for internal and external stakeholders. In total, over $19 million is being invested in a variety of safety projects in Monroe County (Genesee Transportation Council, 2022b). Preventing transportation fatalities and serious injuries starts with understanding what issues exist in Monroe County and where they occur, followed by prioritizing resources to implement systematic improvements.



Through the Priority Investigation Location (PIL) program, Monroe County uses historical data to identify and analyze high-crash locations with elevated risk for motorists, pedestrians, and cyclists. By prioritizing these areas, the County implements targeted countermeasures, such as road diets, leading pedestrian intervals, and curb extensions, to enhance multimodal safety. This data-driven approach ensures that improvements are strategically directed to where they are most needed, helping to proactively reduce crashes and improve safety outcomes for all road users.

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Additionally, by incorporating a Safe System approach such as Vision Zero, Monroe County can strengthen collaboration with municipalities to support the maintenance of local infrastructure and advance transportation planning strategies and grant programs that improve safety and accessibility for all users.

Vision Zero is a data-driven strategy that recognizes traffic fatalities and serious injuries are preventable and should not be accepted as the inevitable cost of mobility. Consistent with this approach, the County can prioritize transportation investments and policies that reduce fatal and severe injury risk, particularly for pedestrians, bicyclists, transit users, and other vulnerable road users. This may include emphasizing speed management, context-sensitive roadway design, complete streets implementation, and targeted safety improvements at high-risk locations.

2.4.4 Broadband Access

Monroe County recognizes that high-speed internet access is critical for economic development, educational opportunity, and civic participation in the twenty-first century. High-speed internet is essential infrastructure and is critical to the County's future success. However a recent study commissioned by the County, *Community Access Plan and Funding Strategy for Broadband (2023),* found that significant disparities in broadband access persist across the County, with nearly one-fifth of city households and one-third of rural households lacking access to high-speed service. This digital divide creates barriers to economic mobility, limits educational opportunities for students and families, and prevents full participation in increasingly digital civic and social activities. The County has established a comprehensive approach to addressing these connectivity gaps by creating a Broadband Advisory Task Force and developing the Community Access Plan and Funding Strategy for Broadband report to guide strategic investments and policy decisions.

Monroe County has implemented innovative partnerships and funding strategies that leverage both public and private sector resources to bridge the digital divide. Through these efforts, the County has has partnered with providers to deploy fixed wireless access technology that uses radio frequencies instead of cables to provide low-cost, high-quality broadband service to rural and underserved areas. It has also expanded digital access and is offering free computer education through the library system to ensure that residents have the tools they need to succeed in today's digital age. The County recognizes that digital inclusion requires sustained partnership between government, private sector, and community organizations to ensure that all residents have access to reliable, affordable high-speed internet service.

To explore new opportunities to further address the digital divide for Monroe County residents, Monroe County's broadband strategy can prioritize comprehensive data collection, targeted infrastructure investments, and ongoing community engagement to remove digital barriers to connectivity. The County has surveyed residents in low-income and rural areas to better understand gaps in broadband access, providing essential data that will guide infrastructure planning and resource allocation decisions. The County recognizes that many residents and businesses face barriers to reliable broadband, particularly in underserved urban and rural areas. Addressing these needs is central to Monroe County's identity as a center of innovation and its commitment to ensuring a high quality of life for all families. Broadband access is not merely a technological issue but a critical foundation for equitable community development, enabling workforce participation, educational achievement, access to healthcare, and economic competitiveness across the County.



Monroe County has recently launched two initiatives funded through **American Rescue Plan Act (ARPA)** funding.

First, a $3.1 million grant to further the digital equity initiative provides courses on a wide range of topics, available in the **Monroe County Library System** or through remote access. The project expands the County's digital equity and access to these resources by installing solar tables with 24/7 internet access and device charging stations in Monroe County parks.

Second, the County announced a $4.2 million partnership with **Community Broadband Networks (CBN)** to expand affordable high-speed internet access for over 26,000 residents in underserved Rochester neighborhoods. Eligible low-income households can receive free installation, a Wi-Fi router, two months of free service, and ongoing access to a new Fixed Wireless/Fiber Optic network for $30 per month for five years (Monroe County, 2025h).

2.5 Goals and Strategies





Invest in 21st-Century Infrastructure

1. Reduce the environmental impact of county operations and facilities by improving building efficiency, electrifying vehicle fleets, and providing EV and active transportation infrastructure at county-owned properties.
2. Support municipalities' participation in state programs that promote clean energy and climate-smart practices and provide resources that help municipalities follow best practices for renewable energy.
3. Support the expansion and modernization of the EV charging network to meet growing electric vehicle demand, leveraging state and federal funding programs and public-private partnerships.
4. Support efforts to expand high-speed internet access and affordability, especially in rural areas, and aid residents in accessing digital literacy courses.
5. Continue to maintain and build connections to and between parks in the Monroe County Park system.
6. Invest in innovative and integrated technologies to support a safe, efficient, and connected multimodal transportation system that meets the diverse mobility needs of all users.
7. Develop and sustain a diverse, skilled workforce across County departments to support the adoption and scaling of innovative technologies that improve safety, efficiency, and cost-effectiveness.

Protect Water and Natural Resources

1. Take a proactive approach to establishing a resilient water infrastructure system capable of adapting to changing climate and community needs.
2. Improve water quality and mitigate the impacts of flooding and other increasing climate-related challenges, such as extreme precipitation events and urban runoff.
3. Work with Monroe County Water Authority (MCWA) and City Water Bureau to protect drinking water sources and infrastructure through comprehensive source water protection, pollution control, and infrastructure maintenance strategies.
4. Study the benefits of consolidating the four Monroe County Pure Water (MCPW) districts, and explore renewable energy opportunities in the MCPW collection and treatment infrastructure and activities.





5 Protect and strengthen ecological resilience by collaborating with municipalities, state agencies, conservation organizations, and private landowners to conserve natural habitats, enhance habitat connectivity, and prevent, monitor, and manage invasive species.

5 Identify priority lands for protection, ecological restoration, and green infrastructure development; apply sustainable property maintenance practices; and expand tree canopy to reduce heat impacts.

Improve Waste Management and Recycling Practices

1 Increase public awareness and participation in waste reduction programs, such as recycling and reuse, while exploring opportunities to expand services and improve accessibility.

2 Evolve recycling and reuse programs as processes and markets advance while partnering with private sector companies to identify opportunities and revenue streams from diverted and recyclable waste.

3 Update and expand the County's Local Solid Waste Management Plan to support waste reduction and recycling, incorporate organics diversion opportunities, and reduce greenhouse gas emissions.

Invest In and Diversify the Transportation System

1 Adopt a state of good repair approach and invest in critical transportation connections that support economic growth and the needs of users and communities.

2 Promote transit-oriented design by collaborating with RTS, transportation providers, and municipalities to enhance public transit efficiency and accessibility while encouraging mixed-use development and zoning policies that support higher-density, walkable communities near transit hubs.

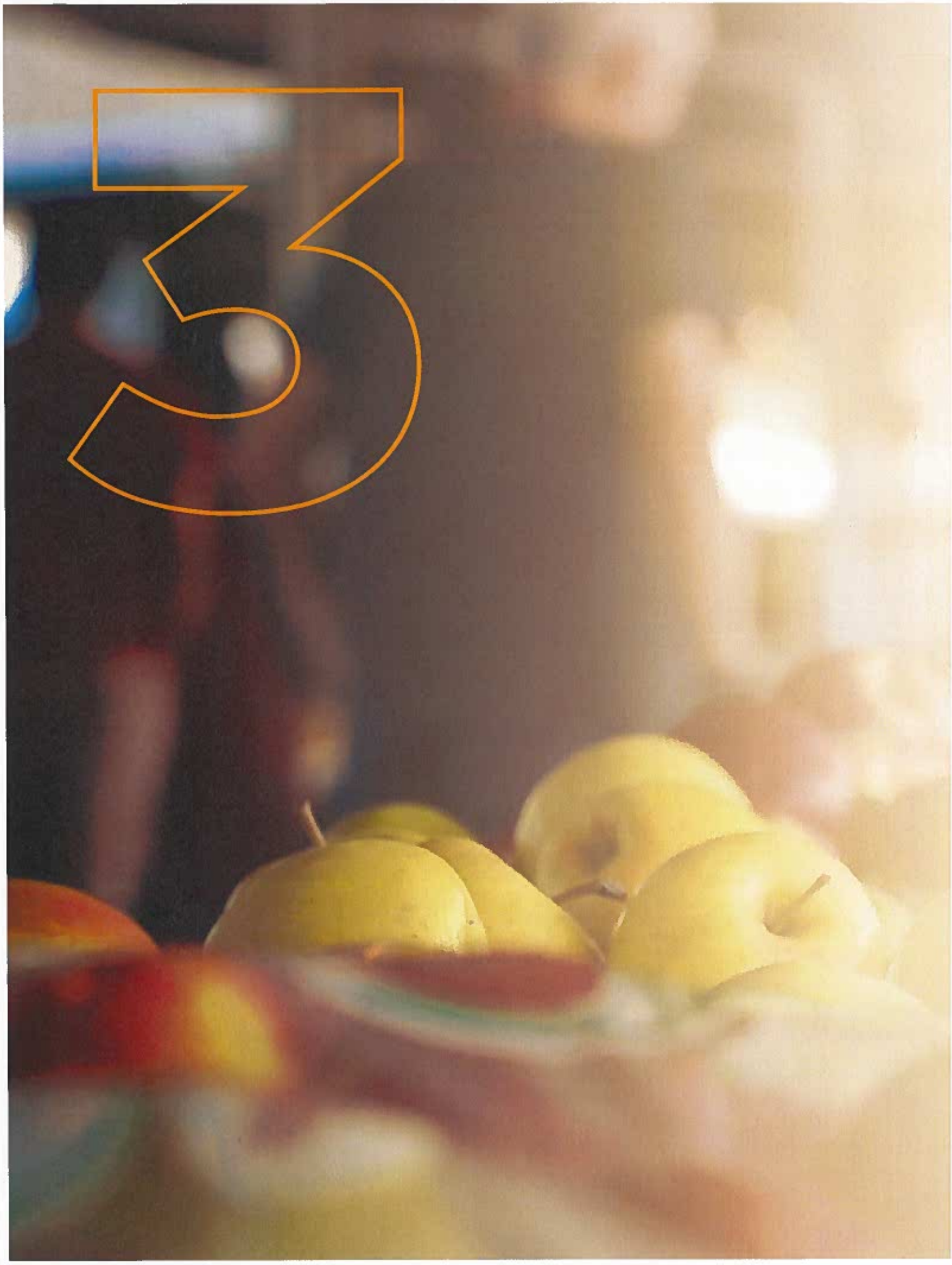
3 Invest in programs and projects that enhance safety for all road users, including pedestrians, cyclists, and drivers.

4 Implement Smart Traffic Management Systems to optimize traffic flow, reduce congestion, and enhance road safety.

5 Work with municipalities to adopt and implement complete street principles and policies on local roadways.

6 Continue to modernize Frederick Douglass Greater Rochester International Airport and improve operational efficiency to support growing freight logistic demand and regional economic competitiveness.

7 Ensure the ongoing maintenance and enhancement of the County's existing infrastructure and identify new infrastructure projects to meet future needs.


3

3 Public Health

3.1 Introduction

With an emphasis on prevention, community health initiatives can reduce the strains on healthcare, criminal justice, and transportation systems by lowering emergency response demands and reducing crisis-related service needs. Monroe County is leading the way by considering community health impacts and developing strategies that link health to the built and natural environment.

Decisions regarding land use, construction of the built environment, and transportation impact air and water quality, physical activity, and exposure to pollutants. In turn, these elements can link to some of the most complex public health problems, including obesity, inactivity, poor mental health, cancer, respiratory problems, and other issues. This section examines how community health is experienced by Monroe County residents, paying particular attention to the disparities in health outcomes, and shining a spotlight on organizations and initiatives working to promote health equity. Finally, this section presents goals and strategies to achieve more equitable community health outcomes in Monroe County.

Defining Public Health

Public health refers to environmental, social, and economic resources used to sustain the emotional and physical well-being of people in ways that advance their aspirations and satisfy their needs in their unique environment (World Health Organization, 2022).

Public health benefits residents in far-reaching and sometimes surprising ways. For instance, sustained preventative care investments like the development of recreational areas or increasing local nutritious food options can reduce cardiovascular-related mortality and lower overall healthcare expenditures. Investing in community health enhances an individual's ability to learn, work, play, and grow. This in turn strengthens the overall economic and social vitality of the community.

PILLAR 3

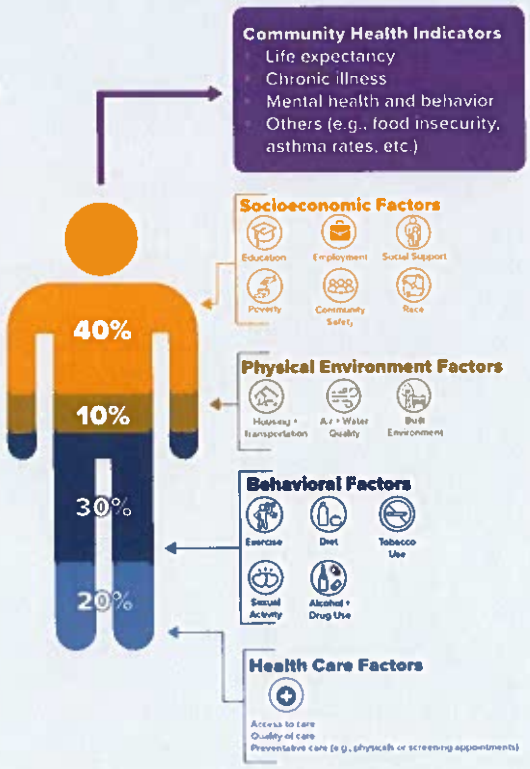
PUBLIC HEALTH

GOALS

- ✓ Provide Integrated Mental and Physical Care to Residents in Need
- ✓ Prevent Substance Use and Subsequent Substance Use Disorders
- ✓ Mitigate Environmental Health Hazards
- ✓ Support Policies and Programs that Improve Access to Nutritious Foods

Public health is more than access to high-quality affordable health care. It also includes the physical and mental well-being of all people in Monroe County. Many factors outside the healthcare system strongly influence community health, including addressing social determinants of health that are often barriers to health and well-being. Social determinants of health are broadly defined as the conditions in which people are born, grow, live, work and age, and people's access to power, money and resources (WHO). Examples include unsafe/unstable housing, food insecurity, poverty, and social stigma. Public and Community health is shaped in part by non-medical factors that influence health outcomes, known as social determinants of health. **Figure 38** illustrates how these social determinants of health impact overall community health.

FIGURE 38
Social Determinants of Health
Source: UCLA Health
(Graphic Developed by EDR)



Significant gaps and inequities currently exist in healthcare services across the U.S. Rural residents and people who don't drive often face challenges accessing healthcare due to limited transportation options. In addition to transportation, language and cultural barriers also hinder access to healthcare services.

Why Community Health Matters

Community health shapes the overall well-being and quality of life for everyone living in a community. Neglecting community health can lead to a range of complex and interconnected problems that become increasingly difficult to address over time. For example, in neighborhoods where crime is frequent, residents may experience negative health outcomes linked to stress and anxiety. This in turn can quickly become self-perpetuating and spur other negative outcomes including chronic illnesses like diabetes and heart disease. The CDC reports that 90% of the nation's $4.1 trillion annual healthcare expenses are for chronic health conditions (CDC, 2025b). When individuals of a community are faced with poor health, all community members are impacted through health care costs and lost financial opportunities.

> In the United States, each dollar invested in lead paint hazard control for families with exposed children under the age of six results in a return of up to $221 or a net savings of up to $269 billion in health benefits, increased IQ, higher lifetime earnings and tax revenues, reduced spending on special education, and reduced criminal activity (Gould, 2009).

The strains of neglected community health can be re-routed or prevented through proactive investment, education, and access to essential resources. By prioritizing preventative care, supporting local health initiatives, and addressing social determinants of health, communities can build stronger, healthier futures for everyone. Allocating money and resources not only improves the health of vulnerable population groups, but it also saves money for the entire community.

3.2 Trends

Trend 1

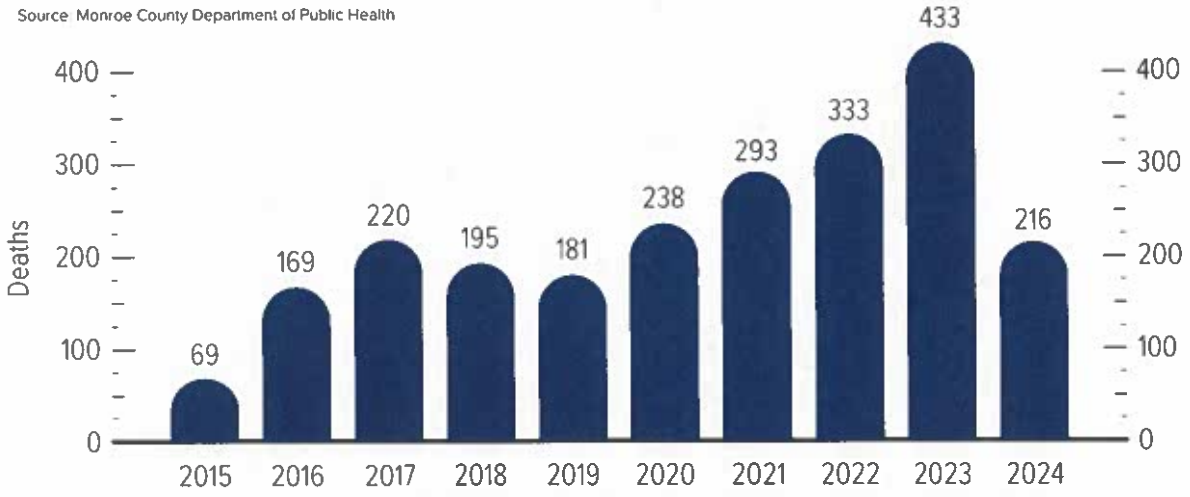
Monroe County continues to struggle with the impacts of substance use disorders.

Substance use trends in the County highlight a complex and evolving public health crisis. In 2024, there were 292 reported overdose deaths in Monroe County, representing a 43% decrease from the 512 deaths reported in 2023 (Monroe County, 2025). In prior years, overdose deaths were predominantly attributable to opioids, however overdoses now comprise a broader spectrum of drugs than heroin/morphine, fentanyl, and/or fentanyl analogs and reflect a shift to more cocaine-involved deaths. Nonetheless, in 2024, there were 216 deaths in Monroe County attributed in whole or in part to the use of opioids—a decline of 50% since the previous maximum of 433 in 2023 **(Figure 39)**.

FIGURE 39

Deaths Due to Opioids in Monroe County

Source: Monroe County Department of Public Health



Deaths Due to Opioids in Monroe County

Source: Monroe County Department of Public Health

The crisis continues to disproportionately affect Black and Hispanic populations, as well as residents in the 50-70+ age bracket. Addressing the overdose epidemic requires comprehensive intervention strategies that go beyond traditional treatment approaches. This includes tackling the root causes of trauma that lead to substance use disorders, reducing the stigma associated with mental health treatment, and integrating treatment and support networks throughout the County **(Figure 40)**.

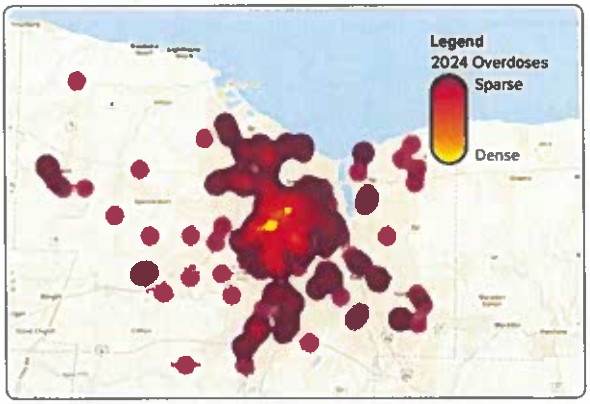


FIGURE 40

Distribution of Opioid Overdoses in Monroe County (2024)

Source: Monroe County Department of Public Health

Trend 2

Environmental health hazards are concentrated in Monroe County's older neighborhoods.

The Department of Public Health and its partners are working to address the environmental health hazards associated with aging housing stock as they present public health challenges that disproportionately affect vulnerable populations, particularly children, elderly residents, and low-income families. Older housing, while perhaps less expensive to purchase, requires consistent upkeep and can introduce toxins like lead into the living environment if not properly maintained, leading to significant health issues. Homes built before 1978[3] commonly contain lead-based paint that deteriorates over time, creating lead dust and chips that can cause developmental delays, learning disabilities, and behavioral problems in children, while also contributing to cardiovascular and kidney problems in adults. Poor ventilation systems and moisture problems in aging structures create ideal conditions for mold growth, which can trigger asthma attacks, allergic reactions, and other respiratory issues. Additionally, outdated electrical systems, deteriorating plumbing that may contain lead pipes or fixtures, and inadequate heating systems that produce carbon monoxide all contribute to a complex web of environmental health risks that require comprehensive assessment and remediation strategies to protect community health and ensure safe, habitable living conditions.



Housing

ABOUT **72%** OF HOUSING UNITS IN MONROE CO. WERE **BUILT BEFORE 1980**

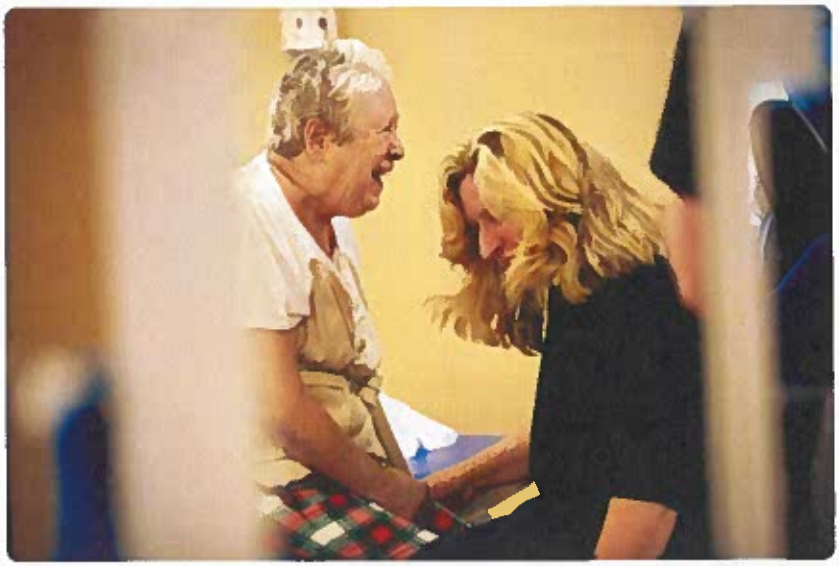
Trend 3

Recognition of the value of integrating mental health services into other social service provision programs.

In the last few decades, there has been a shift in the understanding of the relationship between mental and physical health. The traditional compartmentalized approach has moved toward a more integrated, holistic view of human health. Research has established compelling evidence for the bidirectional relationship between psychological and physical well-being, demonstrating that mental health conditions such as depression, anxiety, and chronic stress can directly impact physical health through multiple pathways, including immune system dysfunction, cardiovascular disease, metabolic disorders, and chronic pain conditions (Hernandez et al., 2018; CDC, 2025).

In Monroe County, the Department of Public Health, the Office of Mental Health Services, and a network of healthcare providers have been integrating mental health services with other medical care, education, and outreach to provide residents with the help they need in an accessible way. They are working to bring mental health services to people where they live or go to school, rather than requiring special visits to clinics or offices. The County is working to reduce the stigma associated with mental health care by making it more widely accessible and normalized. Monroe County's Department of Human Services is the access point for income-qualified local residents to services such as SNAP, WIC, mental health programs, and other NYS benefits and services. Demand for those programs is expected to grow as economic dynamics continue to persist, exacerbating the disparities and poverty statistics outlined here. At the same time, funding for such programs is also expected to decline based on state and federal priorities.

3. In 1978, the U.S. Consumer Product Safety Commission (CPSC) officially banned the use of lead-based paint in residential properties, public buildings, and toys due to growing evidence of its severe health risks, especially to children.







Since the 1980s, the percentage of Americans aged 65 and older has continued to rise. Between 2010 and 2025, the population aged 65 and older in Monroe County increased by over 50%. During the same period, the population 18 to 24 declined over 33% **(Figure 41).** These numbers are consistent with New York State's population trends. Within the next 20 years, it is expected that 34% of households will be headed by someone over 65. Additionally, younger generations are waiting until later in life to have children and typically have fewer children than previous generations.

FIGURE 41

Percent Change in Age Cohort 2010–2025 in Monroe County

AGE (YEARS)	2010	2025	PERCENT CHANGE
Monroe County			
Under 18	22.7%	22.2%	-2.2%
18 to 24	11.1%	10.4%	-6.3%
25 to 44	24.7%	25.8%	+4.5%
45 to 64	27.6%	23.7%	-14.1%
Over 65	13.9%	20.9%	+50.3%
New York State			
Under 18	22.3%	19.6%	-12.1%
18 to 24	10.3%	9.3%	-9.7%
25 to 44	27.2%	27.9%	+2.6%
45 to 64	26.7%	24.4%	-8.6%
Over 65	13.5%	18.8%	+39.3%

Source: ArcGis Business Analyst, 2025

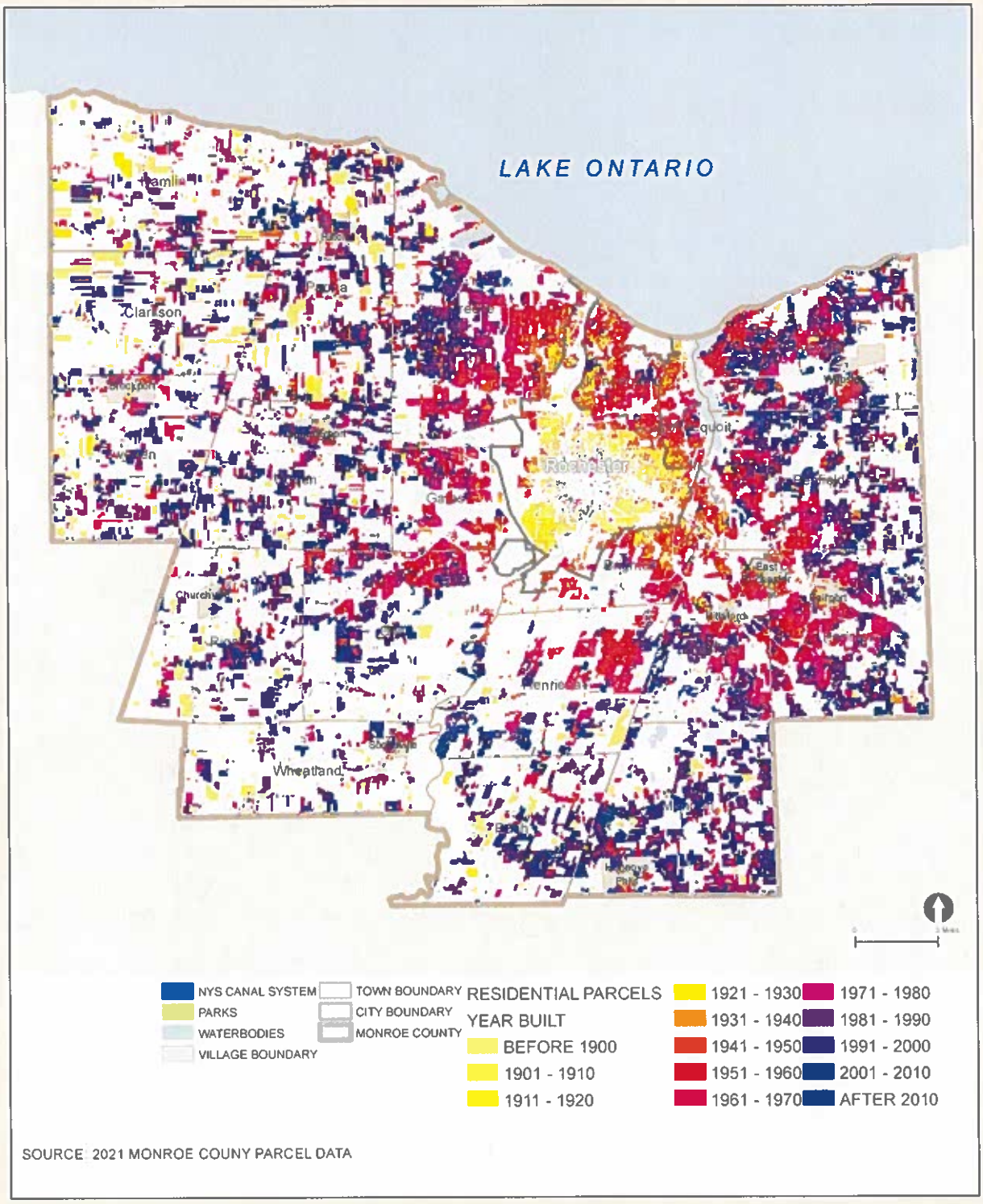


FIGURE 42

Residential Structures by Decade Built

Source: Monroe County GIS

Trend 4

Monroe County is aging; Residents age 60 years or older make up 25% of Monroe County's Population.

Not all communities across Monroe County have a similar age profile. Most towns and villages are, on average, older than Monroe County as a whole **(Figure 43).** However, other areas like Brockport and Henrietta have universities with large student populations, making their populations younger, on average. The City of Rochester is also younger than the County overall with a median age of 33.5 years compared to 39.5 years in Monroe County.

Monroe County's aging population is not unique, as across much of New York, the population is growing older. As the population ages, the needs of the population change. An aging population can increase demand for senior services. Seniors have different housing needs as they age. Some seniors desire to age in place and may require modifications to their living areas, while others may opt to downsize or move to a home with one level. Nationally, 75% of Americans over 50 have expressed a desire to age in place (Robinson-Lane et al., 2022).



FIGURE 43
Median Age by Municipality in Monroe County, 2023

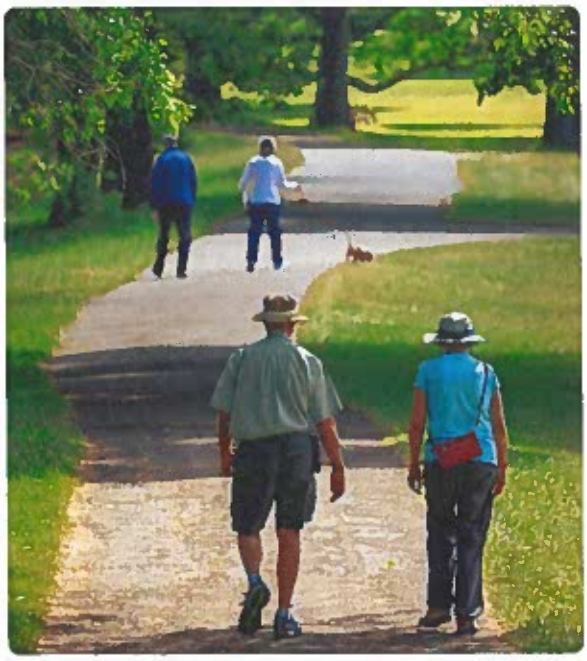
MUNICIPALITY		MEDIAN AGE
Rush (T)		52.2
Churchville (V)		52.1
Mendon (T)		47.4
Riga (T)		47.2
Honeoye Falls (V)		46.7
Perinton (T)		46.2
Fairport (V)		45.9
Penfield (T)		45.8
Webster (T)		45.2
Gates (T)		44.6
Irondequoit (T)		43.6
Clarkson (T)		42.8
Pittsford (T)		42.8
Chili (T)		42.8
Scottsville (V)		42.2
Spencerport (V)		42.2
Greece (T)		41.9
Hamlin (T)		41.6
Parma (T)		41.2
Webster (V)		41.2
Wheatland (T)		41.0
East Rochester (T,V)		40.7
Pittsford (V)		40.2
Ogden (T)		39.7
	New York State	39.6
	Monroe County	39.5
Communities with Large Student Populations	Brighton (T)	39.1
	Hilton (V)	36.8
	Henrietta (T)	34.0
	Rochester (C)	33.5
	Sweden (T)	31.9
	Brockport (V)	23.6

Key: Village (V) • Town (T) • City (C)
Source: 2023 ACS 5-Year Estimates

3.3 What Do We Build On?

3.3.1 Healthy Environments

Monroe County is home to many vibrant communities, enriched by thoughtful neighborhood design, quality public schools, access to well-maintained parks and public spaces, and affordable housing options. These assets lay a strong foundation for community health and well-being. Healthy environments and safe neighborhoods not only strengthen community cohesion but also have a positive effect on the personal health of individuals (U.S. Department of Health and Human Services, 2021). The physical environment and higher-level policies can shape neighborhood opportunities, strengthen health, improve residents' affluence, and the overall well-being of communities. Expanding health promoting features, such as creating walkable neighborhoods, building and maintaining diverse, safe and affordable housing stock, protecting the natural environment, providing access to healthy foods, creating parks, trails, and welcoming community spaces amongst many others, can significantly improve the overall community health and further address health disparities in the County. In addition, the parks and trail system can do more to support County residents of all abilities, including those with ambulatory challenges.



Communities with deteriorating housing conditions, including older homes with lead paint and structurally unsound design, pose significant risks, especially to children. Poor housing conditions often coincide with neighborhoods marked by high vacancy rates, blight, and lack of investment, which can contribute to increased crime, chronic stress, and social isolation, all of which negatively affect the physical and mental health of those residing in these communities. Programs aimed at lead hazard remediation, affordable housing development, and revitalization of vacant properties are essential. Focusing on code enforcement, financial support for home repairs, and incentives for reinvestment in distressed areas will help create safe stable and healthy environments.

Prominent Monroe County programs include the Childhood Lead Poisoning Prevention Program, which provides medical case management and educational outreach to families for all children with blood lead levels ≥5 µg/dl (micrograms per deciliter) **(Figure 44);** The Leading in Lead Prevention Pilot Program, which offers reimbursement grants for lead remediation in pre-1980 multi-family homes cited for lead hazards; and the Lead Rental Registry, which requires property owners and landlords to remediate sources of lead in pre-1980 residential rental units with two or more units. These, and prior programs, have had a significant impact on improving public health, particularly for young children who are most vulnerable to lead exposure, helping to reduce the long-term developmental and cognitive impacts associated with lead poisoning. Since the 1990s, lead poisoning in children has gone down significantly (below 5%).[4]

4. PowerPoint presentation from Dr. Mari

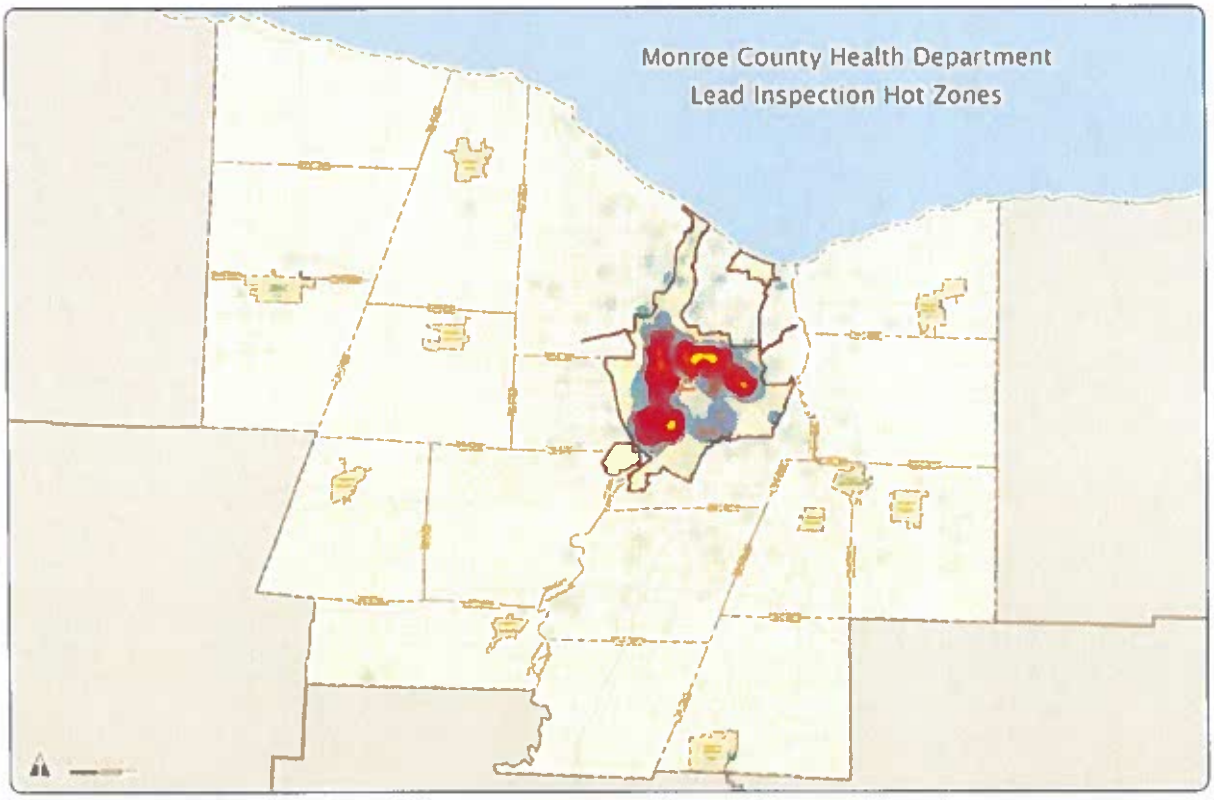
Another critical program is offered by the Rochester Housing Development Fund Corporation (RHDFC) which acquires vacant homes and works with regional partners such as the City of Rochester and Rochester Land Bank Corporation and other partners to rehabilitate homes for low and moderate-income first-time homebuyers in the City of Rochester. In parallel, the Monroe County Land Bank Corporation (MCLBC), established in 2025, seeks to acquire vacant and abandoned houses in order to address unsafe conditions caused by these properties while creating new affordable homeownership opportunities throughout the County's 29 suburban and rural communities. By providing financial support for home improvements, the RHDFC and MCLBC help combat blight while ensuring that residents have access to safe, quality homes.

Other simple improvements in the built environment can be accomplished in the form of improved street lighting, shorter blocks and mixed-use development. These changes can help improve community surveillance and safety (Golden, 2024). Proper sidewalks and accessible public transit further impact opportunities for physical activity and determine the level of accessibility residents have to employment, education, and healthcare. Neighborhoods that are thoughtfully designed to encourage walking, biking, and social interaction foster healthier and more connected communities.

FIGURE 44

Lead Inspections as part of the Childhood Lead Poisoning Prevention Program, 2011–2022

Source: Monroe County Department of Health



In addition, expanding access to parks, trails, and other community-centered public spaces can serve as a powerful tool to promote health equity across Monroe County. Parks and green spaces not only provide opportunities for exercising but also serve as leisure spaces for social gatherings and community events, improving mental health and strengthening community connections. Trails and walkable paths, such as the Genesee Riverway Trail, encourage active transportation and provide transportation options that can reduce pollution and increase daily physical activity. Air pollution, noise, motor vehicle crashes, social exclusion, greenhouse gases, and contamination are just some of the examples of negative impacts car-focused design has on the health of communities and their people. These impacts are especially pronounced in underserved neighborhoods, that have experienced decades of disinvestment, leading to limited resources and opportunities.

Access to healthy foods is another factor impacting the well-being of people and communities, and several initiatives seek to address food insecurity and poor nutrition in low-income areas. The State released a Food Access Expansion Grant Program in 2025 to increase New Yorkers' food access and provide affordable, fresh food to underserved communities. There is a need for more healthy food initiatives to support local farmers' markets, community gardens, and urban farming projects to increase access to fresh, healthy foods in underserved neighborhoods. The County of Monroe Industrial Development Agency (COMIDA) and the Rochester Land Bank are in the early stages of developing policies and programs to address food access, potentially through providing specific incentives for grocery operators in areas of the County that meet the U.S. Department of Agriculture's definition of a "food desert" or facilitating the transfer of vacant parcels within food deserts to urban farming or community gardening stewardship.

Through the **Food Access Expansion Grant Program**, Foodlink food bank in Rochester was awarded $291,420 (New York State, 2025b) , which will fund the purchase of a new Curbside Market vehicle., which will fund the purchase of a new Curbside Market vehicle.

To maintain healthy environments in Monroe County, ongoing support for initiatives that address the legacy of contaminated industrial sites polluted during the 20th-century along the Great Lakes is essential. In 1987, the United States and Canada identified the Rochester Embayment on the south shore of Lake Ontario, along with 42 other areas, as "areas of concern" on the Great Lakes. In 2024, after decades of collaborative efforts by public and private sectors, the Rochester Embayment was the seventh U.S. site to be delisted. The restoration mainly concentrated on wildlife habitats, including 340 acres of wetlands. Continual water monitoring and testing done by Monroe County Departments of Environmental Services (DES) and Public Health is necessary to ensure safe water quality for overall ecological health. The New York State Department of Environmental Conservation (NYS DEC) is responsible for the mitigation of any hazards to ensure communities along the 35-square-mile bay continue to have fresh clean water for recreation.



Efforts to improve air quality, such as reducing industrial emissions and promoting clean energy solutions in transportation, are also crucial for creating healthy, livable communities, especially for vulnerable populations. Increasing the efficiency of public transit could help decrease the number of single-passenger vehicles on the road, which in turn could reduce emissions and enhance air quality. In recent years, Monroe County has experienced several health advisories due to poor air quality, urging children, the elderly, and people with pre-existing conditions like asthma and other respiratory or cardiovascular diseases to stay indoors and limit outdoor activities (NYSDEC, 2025). Air quality tends to worsen during the summer months because of elevated ozone levels, a known respiratory irritant, which forms on hot, sunny days when pollution from cars, power plants, consumer products, and other sources react with sunlight (NYSDEC, 2025b). Rochester has multiple air pollution monitoring stations, but further efforts to record toxic air pollutants, including ozone, can be prioritized to improve the accuracy of the air quality alert system.

By aligning urban planning, public health efforts, housing and land use policies, Monroe County can create healthier, more resilient communities. These integrated approaches not only improve immediate health outcomes but also foster long-term wellness and economic stability for generations to come. With respect to building resiliency for the long-term viability of Monroe County, the previously discussed Climate Adaptation and Resilience Plan (CARP) seeks to address climate change-related impacts on the built environment that are essential to promoting physical and mental well-being. Programs and policies that prioritize equitable investment can help to mitigate historical disparities and ensure all residents, regardless of zip code, have the opportunity to live healthy lives.

3.3.2 Mental Health Service Expansion and Integration

Monroe County recognizes that mental health is a cornerstone of public health and must be addressed with the same urgency and coordination as physical health. Mental health challenges can significantly impact local productivity, unemployment rates, and educational outcomes, and can contribute to family and community instability.

My Health Story (MHS) is a public health surveillance survey administered to residents in the Finger Lakes region of New York State. The main goal of the My Health Story survey is to collect detailed information on social determinants of health and health outcomes that go beyond what is typically available in public secondary data sources. The survey was first conducted in summer 2018, with a second wave in 2022. The 2022 version included new questions on perceived discrimination in healthcare settings, housing mobility and quality, children's health and well-being, and language access needs, along with additional language and text options. In 2022, 23% of respondents across the nine-county Finger Lakes Region identified mental and emotional health as their primary health concern. More than 55% reported experiencing mental or emotional health issues, such as anxiety, grief, depression, or substance use disorders, at some point in their lives (Common Ground Health, 2025).

Monroe County's 2025 Joint Community Health Needs Assessment further underscores the urgency of this issue, showing that residents experience poor mental health on average 5.5 days per month, higher than both the New York State (4.9 days) and national (5.1 days) averages. Substance use disorders, particularly those involving opioids and fentanyl, remain a critical concern (Monroe County, 2025l).



The **2025 Monroe County Joint Community Health Needs Assessment** is a collaborative report from the Community Health Improvement Workgroup (CHIW), managed by the Center for Community Health & Prevention, with data support from Common Ground Health. The CHIW includes several community partners who worked together to create a document that serves six hospitals/hospital systems and the Monroe County Department of Public Health.

In response, the County has launched a series of innovative and collaborative initiatives to expand access and integrate mental health services across multiple settings. The County is aligning with national best practices by embedding mental health support into primary care, schools, community programs, and digital platforms. Federally Qualified Health Centers (FQHCs) such as Anthony L. Jordan Health Center, Trillium Health, and Oak Orchard Health are leading efforts to provide comprehensive care to underserved populations, including Medicaid and Medicare recipients. Regional health systems like Rochester Regional Health and the University of Rochester Medical Center also play a pivotal role in expanding access to behavioral health services.

Recognizing the long-term impact of childhood trauma, Monroe County is prioritizing pediatric mental health, despite ongoing challenges such as a shortage of providers and extended wait time for services. The expansion of telehealth has helped bridge some gaps; however, inadequate broadband connectivity remains a barrier for many residents. To address this challenge, the Monroe County Office of Mental Health has strengthened school-based services, partnering with Liberty Resources to provide on-site counseling in districts such as Rochester City School District and East Irondequoit. These programs aim to deliver early intervention and prevent crises before they escalate.

To address workforce shortages and a lack of diversity in the mental health field, Monroe County is investing in career pathways for individuals in recovery and underrepresented communities. Programs like RochesterWorks' Enhanced Recovery Services (ERS) provide training and certification for peer advocates, enabling those with lived experience to become professionals in prevention and recovery services. These efforts not only strengthen the workforce but also enhance cultural competence and community trust. Through expanding health career pathways, Monroe County is improving individual well-being, boosting economic participation, and addressing broader social determinants such as unemployment and public safety. These initiatives reflect Monroe County's holistic and inclusive approach to mental health, one that is responsive to community needs and committed to long-term resilience.

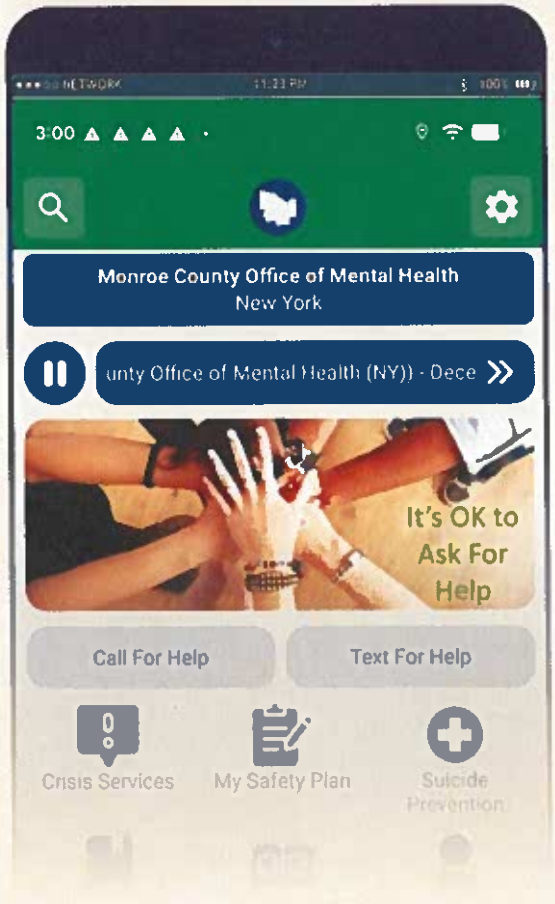
These efforts are complemented by initiatives that strengthen the quality and accessibility of behavioral and mental health services by promoting equitable access to care, enhancing provider capacity through training and support, and fostering partnerships that improve culturally and linguistically responsive services. Together, these efforts help ensure that Monroe County's behavioral and mental health system is inclusive, accessible, and responsive to the diverse needs of all residents, including people with disabilities and Deaf, DeafBlind, and Hard of Hearing individuals.

The **County's Office of Mental Health** offers a comprehensive continuum of care, including emergency and crisis services, inpatient and outpatient treatment, housing support, and community-based programs such as vocational training, respite care, peer support, and recreational opportunities.

The Monroe Mental Health Mobile App enhances accessibility to these resources and provides essential wellness information, direct access to emergency and crisis resources, and connections to nearby support services at the touch of a button.

Monroe Mental Health Mobile App

The Monroe Mental Health App provides essential mental and behavioral health information to Monroe County, New York residents. It features acute and outpatient resources, suicide prevention services, and Narcan information and training. You can also create your own safety plan with actionable steps for harm reduction.



3.3.3 Preventive Care and Chronic Disease Prevention and Management

Preventive health care is a foundational approach to improving community health by emphasizing disease prevention, health promotion, and early intervention, rather than relying solely on treatment after illness occurs. In Monroe County, the Department of Public Health and its partners have embraced this proactive model through a robust network of programs, policies, and partnerships that address health risks before they escalate into serious conditions. These efforts not only reduce healthcare costs but also improve quality of life and enhance overall community well-being.

Monroe County's approach includes a wide range of direct services such as tuberculosis and sexual health clinics, early childhood intervention programs, maternal health services, as well as lifestyle clinics targeting addiction and obesity. The County-owned Monroe Community Hospital plays a critical role in chronic disease management by offering long-term care, skilled nursing, short-term rehabilitation, and specialty services for residents with complex health conditions.

The County's Healthy Neighborhood Program reaches approximately 500 families annually, primarily in areas with poor social determinants of health. It provides education and resources on home safety issues including asthma triggers, fire and carbon monoxide prevention, and rodent control.

Environmental health initiatives also include lead poisoning prevention, air and water quality monitoring, facility permitting, and engineering plan reviews.



The Community Health Improvement Workgroup (CHIW) is a collaborative group of leaders from hospitals, the health department, and community organizations that meets monthly to advance the Community Health Improvement Plan's priorities for Monroe County, NY.

The Community Health Improvement Workgroup (CHIW) has been tasked with developing and implementing a Community Health Improvement Plan (CHIP). The 2022–2024 CHIP identified chronic disease prevention and management as a top priority, with targeted interventions in healthy eating, food security, physical activity, and tobacco cessation. Programs like Healthi Kids, a partnership with Common Ground Health, promote whole-child health through interventions in relationships, environments, skill-building, and habit formation. Additionally, the County supports school-based health initiatives and collaborates with Federally Qualified Health Centers (FQHCs) and regional health systems such as the University of Rochester Medical Center and Rochester Regional Health to expand access to preventive services for underserved populations.

The County's Public Health Department tracks youth health risk factors like vaping and emotional challenges in an annual survey which informs evidence-based strategies developed for school districts, community partners, and families.

The Department of Human Services also plays a vital role in preventive care through its Preventive Services Division, which works to prevent foster care placements, reduce child maltreatment, and support family stability. In 2024 alone, the County contracted with 12 nonprofit organizations to deliver 22 programs serving over 1,200 families and nearly 2,000 children and youth. These services address challenges such as parental mental health, trauma exposure, and behavioral issues, with a growing focus on domestic violence prevention.

Monroe County's Epidemiology and Disease Control division provides expertise in epidemiology and data analysis related to public health data. It provides public health data for community organizations to utilize for grant writing, education, and policy development. Additionally, the division conducts surveillance and epidemiological investigations to prevent and control communicable disease outbreaks. The County Board of Health advises the Commissioner of Public Health on public health policy, ensuring that nearly $100 million of the County's $1.5 billion budget is strategically invested in health services that benefit all residents. Effective preventive health programs reduce the County's overall healthcare costs and result in healthier, happier individuals who are more fully able to contribute positively to the community and the economy.

3.4 What Do We Need to Address?

3.4.1 Substance Use Disorders

In line with national trends, Monroe County experienced a rise in substance use disorders between 2015 and 2023, particularly opioid-related overdoses, requiring a nuanced public health response involving identifying root causes and developing targeted interventions (CDC, 2025a). In 2024, however, the County recorded a 50% decrease in opioid overdose deaths, falling to 216, and overall overdose deaths decreased to 292. This reduction is a significant shift following years of escalation and suggests that Monroe County's ongoing efforts to expand access to naloxone, treatment, and recovery supports are having a measurable impact.

Although trends are improving, ongoing efforts and time are still necessary to help meet people's needs and continue to provide adequate support. Furthermore, the burden of opioid overdoses is not evenly distributed among demographic groups; some populations are more affected than others. Members of the Black and Hispanic communities are disproportionately impacted by opioid deaths, along with younger and middle-aged adults who also face mental health illnesses **(Figure 45; Figure 46)**. Additionally, most cases are concentrated in the City of Rochester, which has the highest poverty, unemployment, and lowest educational attainment in the county. Studies have shown that these social determinants of health increase the risk factors for opioid overdose cases (Pear et al., 2021).



FIGURE 45

Monroe County Overdose Death Rates by Race/Ethnicity

Race/Ethnicity Distribution Among Opioid and/or Cocaine Deaths in 2024, and Estimates of the General Population Demographic Distribution of Monroe County.

RACE	PERCENT OF OVERDOSE DEATHS	MONROE COUNTY GENERAL POPULATION ESTIMATE [A]
White or Caucasian	67.5%	76.0%
Black or African American	31.2%	16.5%
Asian	1.4%	3.9%
Other [B]	0.0%	3.7%
Hispanic [C]	14.0%	10.1%

Notes:

A. Source: https://www.census.gov/quickfacts/monroecountynewyork Assessed 27 August 2024.

B. Other includes but is not limited to Native American, Native Hawaiian/Pacific Islander, and two or more races.

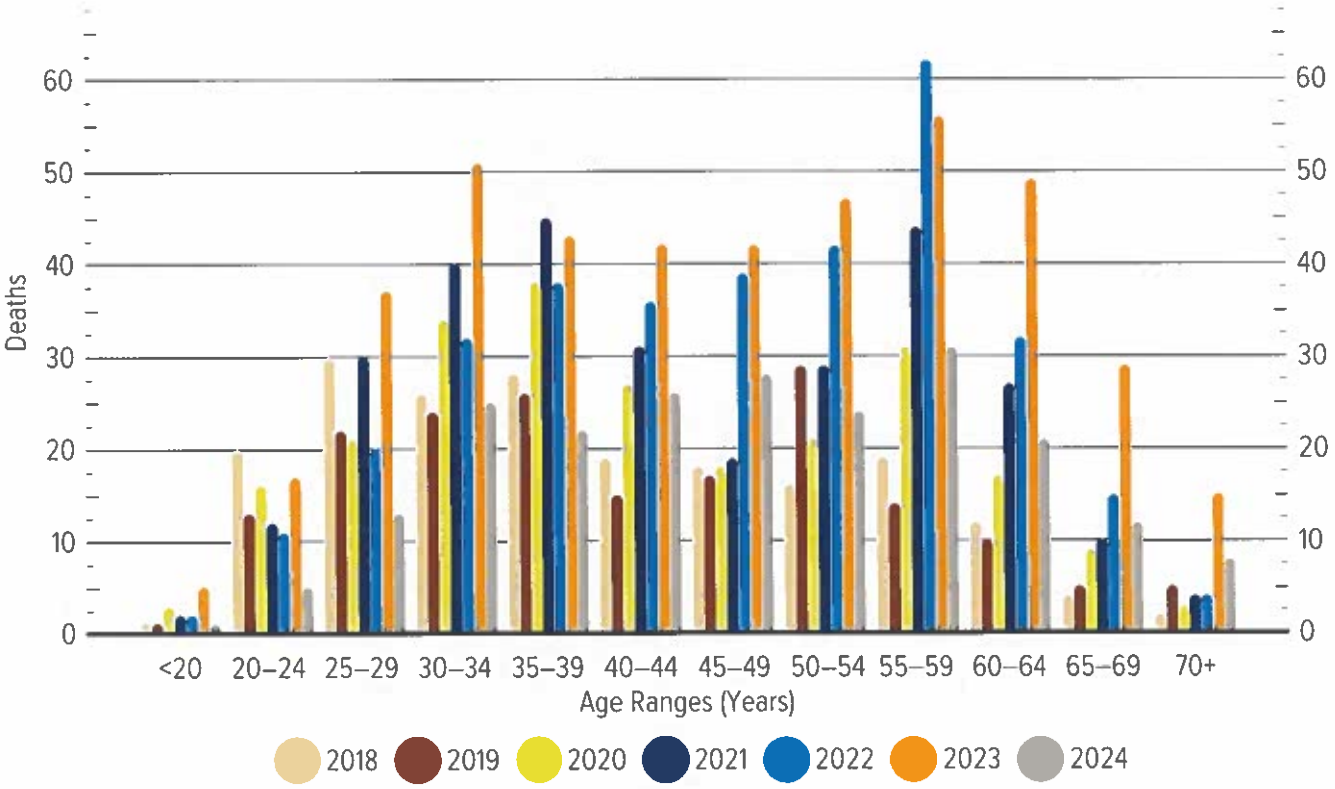
C. Hispanic Ethnicity Identification is Independent of race identification.

Source: Monroe County Office of the Medical Examiner, 2024

FIGURE 46

Monroe County Overdose Rates per Hundred Thousand Persons by Age and Race/Ethnicity

Source: Monroe County Department of Public Health



Number of Fentanyl/Analogs or Heroin/Morphine Deaths

Source: Monroe County Department of Public Health

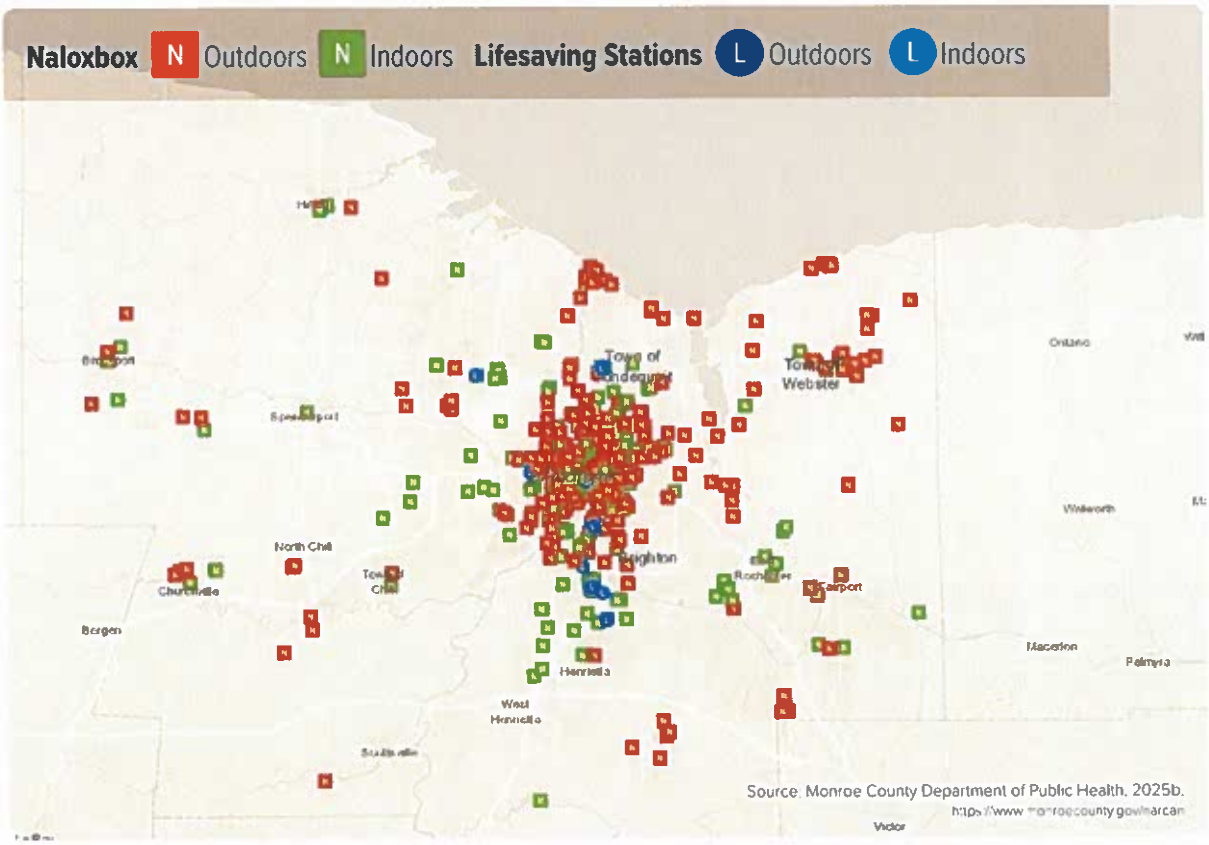
In response, the Monroe County Department of Public Health (MCDPH) and Monroe Crime Analysis Center (MCAC) have employed a robust and multilayered approach to mitigate the crisis through individual, institutional, and community responses. The County has pulled together a diverse group of partners, from non-profits, community organizations, housing authorities, parks and recreation departments, local businesses, religious institutions, schools, local governments, and civic institutions to tackle the epidemic head-on. A cornerstone of the County's strategy has been large-scale distribution of naloxone, a life-saving overdose reversal medication. Since its launch in 2022, the County has distributed over 35,000 Narcan kits. This distribution has been complemented by the installation of more than 600 free Naloxboxes, strategically placed near overdose hotspots, with almost all of these locations concentrated in the City of Rochester, further highlighting disparities in the County **(Figure 47).**

At the institutional level, the County has supported training for Certified Peer Advocates, enabling individuals with lived experience to support others in recovery and work within emergency departments (EDs) and community organizations to help prevent further overdoses. With opioid settlement funds, the County has been able to

create an "Addiction Services team" to provide more comprehensive responses to opioid overdose (OD) survivors on the individual level. Since its creation in 2021, the team has grown rapidly and provided support to OD survivors by following up on their treatment, discharge plan, and offering harm reduction tools such as fentanyl and xylazine test strips, masks, gloves, condoms, and Narcan trainings. Standardized discharge protocols in EDs now include comprehensive resources such as contact information for needle exchange programs, medication-assisted treatment (MAT) providers, peer support networks, and QR codes linking patients to real-time service directories. This streamlined information aims to bridge the gap between emergency care and long-term recovery.

A key element of Monroe County's broader substance use strategy includes housing support, recognizing the intersection of addiction, housing insecurity, and family instability. The Moving Forward Family Shelter in Rochester, opened in 2024, represents a critical investment in wraparound services, offering temporary housing while connecting families to healthcare, counseling, daycare, interim transportation to school and medical services, employment services, and ultimately, permanent housing solutions. This holistic model not only addresses immediate needs but also targets other social determinants of health needs, such as mental health and socio-economic status, that commonly occur with substance use disorders.

FIGURE 47
Naloxbox Locations at Businesses Near Overdose Hotspots



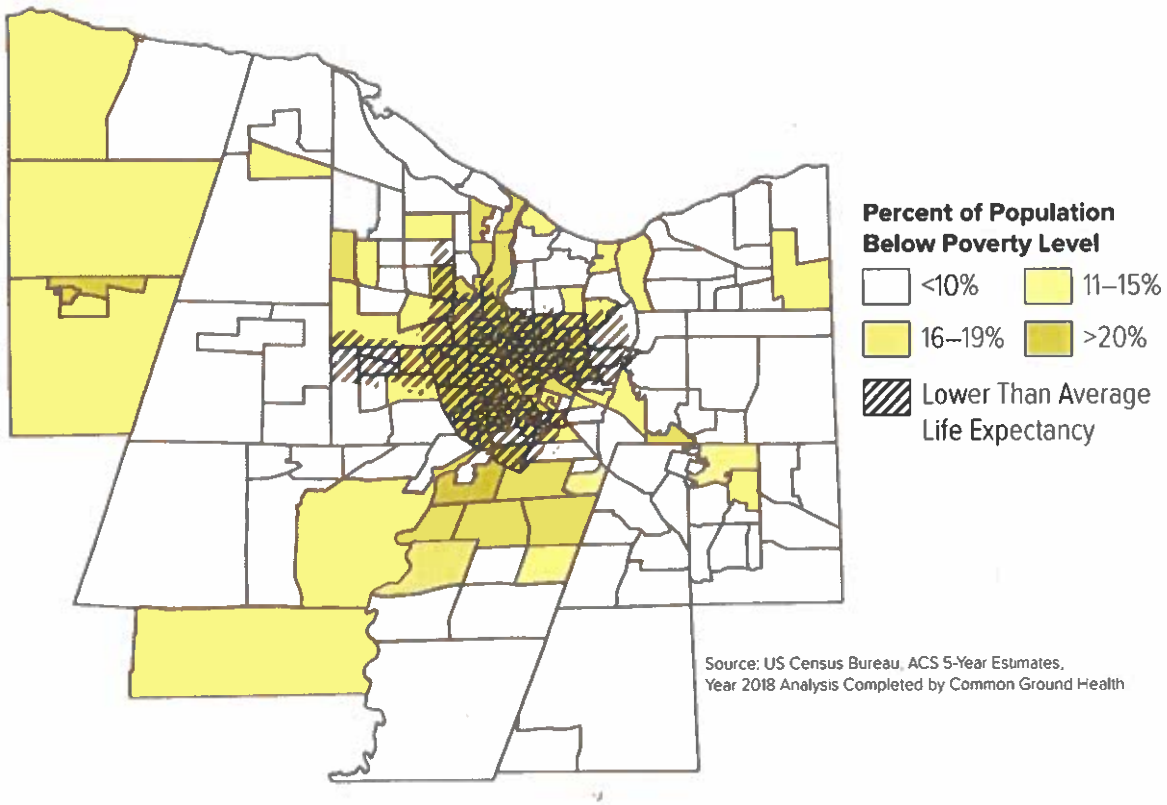
Finally, expanding partnerships with schools to prevent addiction early and understanding how early childhood traumas impact later development of substance use disorders can help address problems at their initial stages. Monroe County has made significant progress in understanding the root causes of substance use disorders, and examining the issue from various perspectives continues to reveal opportunities for further improvement.



3.4.2 Health Equity

Poverty is a social determinant of health that affects communities worldwide. In many places, including Monroe County, populations living in poverty face significant barriers to accessing proper healthcare and nutritious food. This population also experiences high levels of persistent stress due to pressures associated with financial insecurity, which can eventually manifest in physical and mental ailments. In Monroe County, 13% of households (approximately 40,481 households) live in poverty (ArcGIS Business Analyst, 2025). The densest area of poverty in the County is within the City of Rochester, however there are also high poverty areas in the Town of Henrietta, the Village of Brockport, East Rochester, and in the Town of Greece. **Figure 48** shows that areas in Monroe County with the highest percentage of residents living below poverty level also experience lower

FIGURE 48
Poverty and Life Expectancy



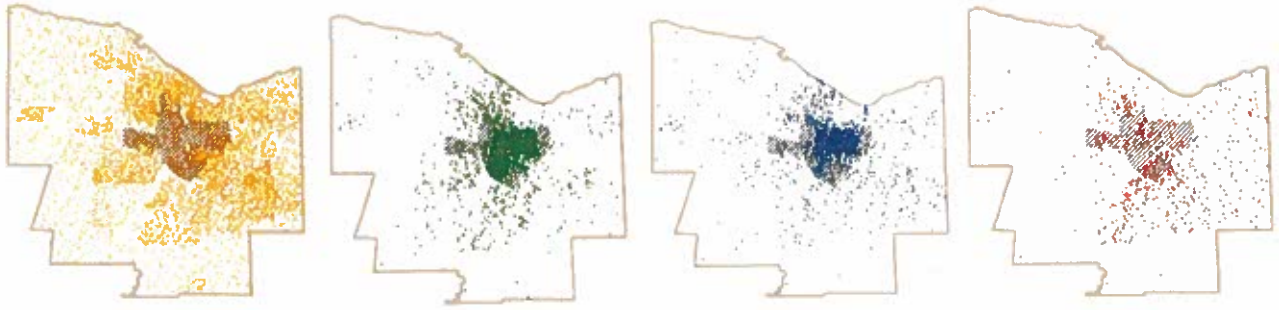
Source: US Census Bureau, ACS 5-Year Estimates, Year 2018 Analysis Completed by Common Ground Health

FIGURE 49

Geographic Distribution of Race and Life Expectancy

Source: U.S. Census, 2019 ACS 5-Year Estimate

Race and Life Expectancy



White Non-Latino
● 1 Dot = 50 People

Black Non-Latino
● 1 Dot = 50 People

Latino
● 1 Dot = 50 People

Asian Non-Latino
● 1 Dot = 50 People

▨ Lower Than Average Life Expectancy

Source: U.S. Census, 2019 ACS 5-Year Estimates

than average life expectancy. People living in poverty are more likely to experience premature mortality caused by heart disease, cancer, and homicide. Additionally, residents from areas with low socioeconomic status have dramatically higher rates of potentially preventable emergency department visits and hospitalizations from chronic illness (Common Ground Health, 2018).

In many U.S. cities, geographic segregation and concentrated poverty are caused by historic land use policies that have contributed to lasting social and economic disparities. Similarly, the redistribution of population and jobs over time from Rochester to the suburbs of Monroe County has led to significant areas of concentrated poverty that tend to be racially segregated. **Figure 49** shows today's density of different racial populations within Monroe County. Additionally, the maps show the areas of Monroe County where the population experiences lower than average life expectancy (i.e., less than 75 years).

There is a growing recognition of the systemic inequities that have long impacted maternal health outcomes for Black women and families. **Figure 50** shows that severe maternal morbidity rates are increasing most significantly for Black mothers. **Figure 51** displays the association between female poverty and risks to early childhood health, such as low birth weight, premature births, and teen pregnancy.



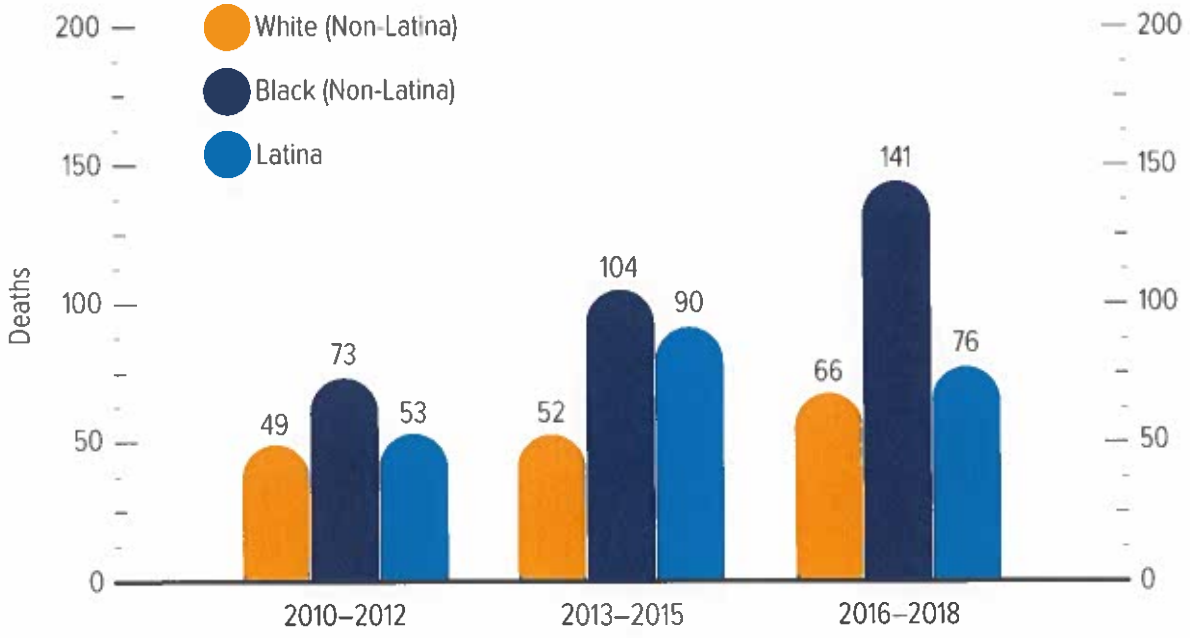
One of the most recent and impactful initiatives is a $703,000 ARPA-funded outreach program launched in May 2025 in partnership with HCR Home Care. This initiative focuses on expanding access to home healthcare education and services for Black families. Through collaborations with the Max and Marian Farash Charitable Foundation, the Greater Rochester Health Foundation, and seven predominantly Black churches in Rochester, the program aims to educate older adults and their families about the availability, affordability, and benefits of home healthcare. The initiative includes culturally tailored materials, pastor-led briefings, video testimonials, and workforce training to build a pipeline of culturally competent caregivers.

A trio of initiatives kicking off in October 2025 seek to help prevent maternal and infant morbidity and mortality through evidence-based intervention targeting vulnerable pregnant families. These include the PAMPER Mom program run by Equally Balanced Therapy & Wellness, which provides client-centered prenatal medical massage and health care interventions to low-income County moms in their third trimester of pregnancy; The URMC Mt. Hope Family Center Building Healthy Communities Program, which will provide coordinated medical and behavioral treatment specifically designed for the postpartum period; and an expansion of the ROC Family Teleconnects Program, a United Way of Greater Rochester and the Finger Lakes initiative that focuses on improving outcomes for families in highly distressed ZIP codes and provides tele-health and home visiting services, referrals and connections to organizations that provide essential supports such as food, clothing and shelter.

FIGURE 50

Maternal Morbidity Rates by Race/Ethnicity (Per 10k Deliveries)

Source: NYSDOH SPARCS Inpatient Dataset; Analysis by Common Ground Health



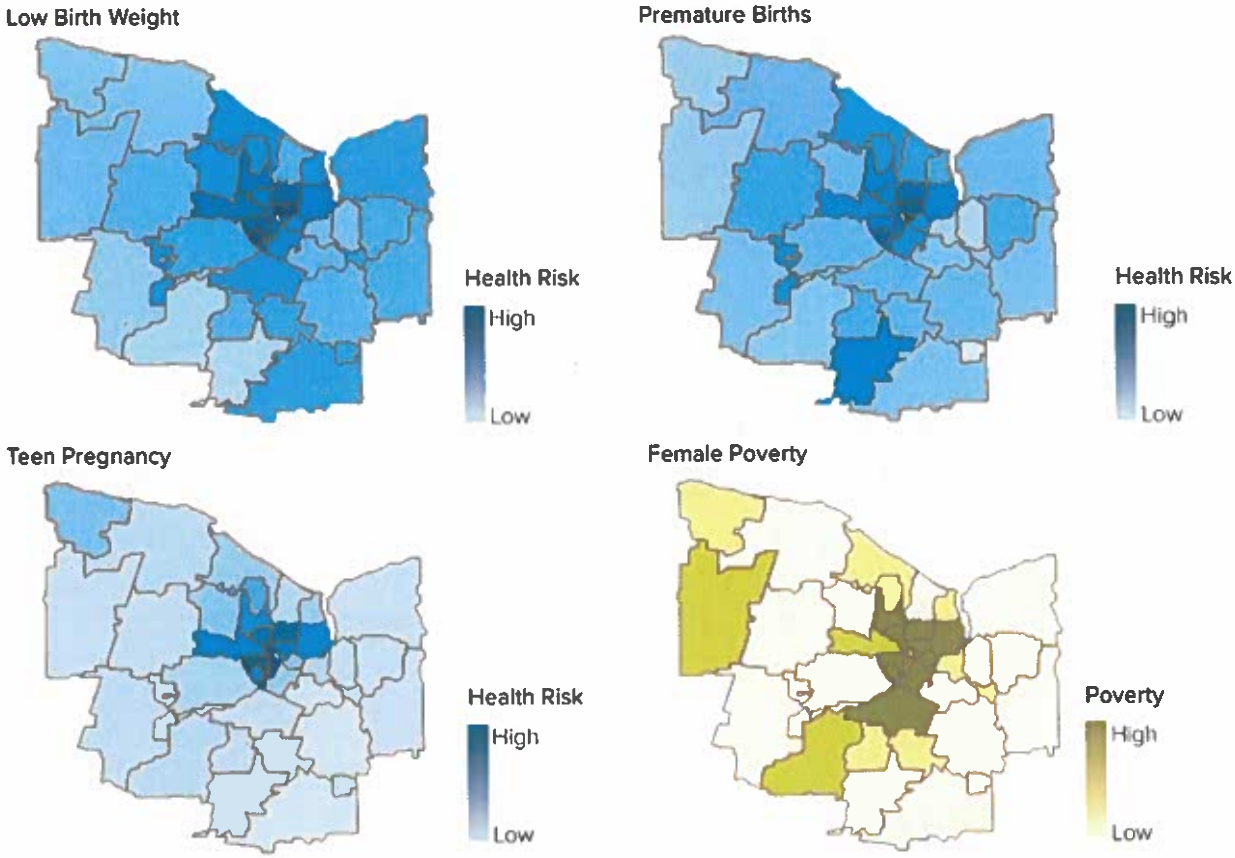
Maternal Morbidity Rates (Per 10K Deliveries)

Source: NYSDOH SPARCS Inpatient Dataset; Analysis by Common Ground Health

FIGURE 51

Geographic Links Between Female Poverty and Early Childhood Health

Sources: NYSDOH, Prenatal Data Profile 2017-2019, and U.S. Census Bureau, ACS 2019; Analysis by Common Ground Health



The 2022–2024 Community Health Improvement Plan (CHIP) explicitly identified the reduction of racial, ethnic, economic, and geographic disparities in maternal and child health as a top priority. The plan calls for enhanced collaboration among healthcare providers, community organizations, and public agencies to address social determinants of health such as poverty, housing, and employment. The CHIP also supports the continuation and expansion of the Maternal Child Health Advisory Group, which includes voices from Black and Latino health coalitions to ensure community-driven solutions.

Together, these initiatives demonstrate Monroe County's commitment to health equity, culturally competent care, and community engagement. By centering Black maternal health in its public health strategy, the County is taking meaningful steps to close longstanding gaps and improve outcomes for future generations.

The County can continue proactively working to address racial health disparities among Black mothers through a combination of targeted investments, community partnerships, and strategic planning.

3.4.3 Food Insecurity

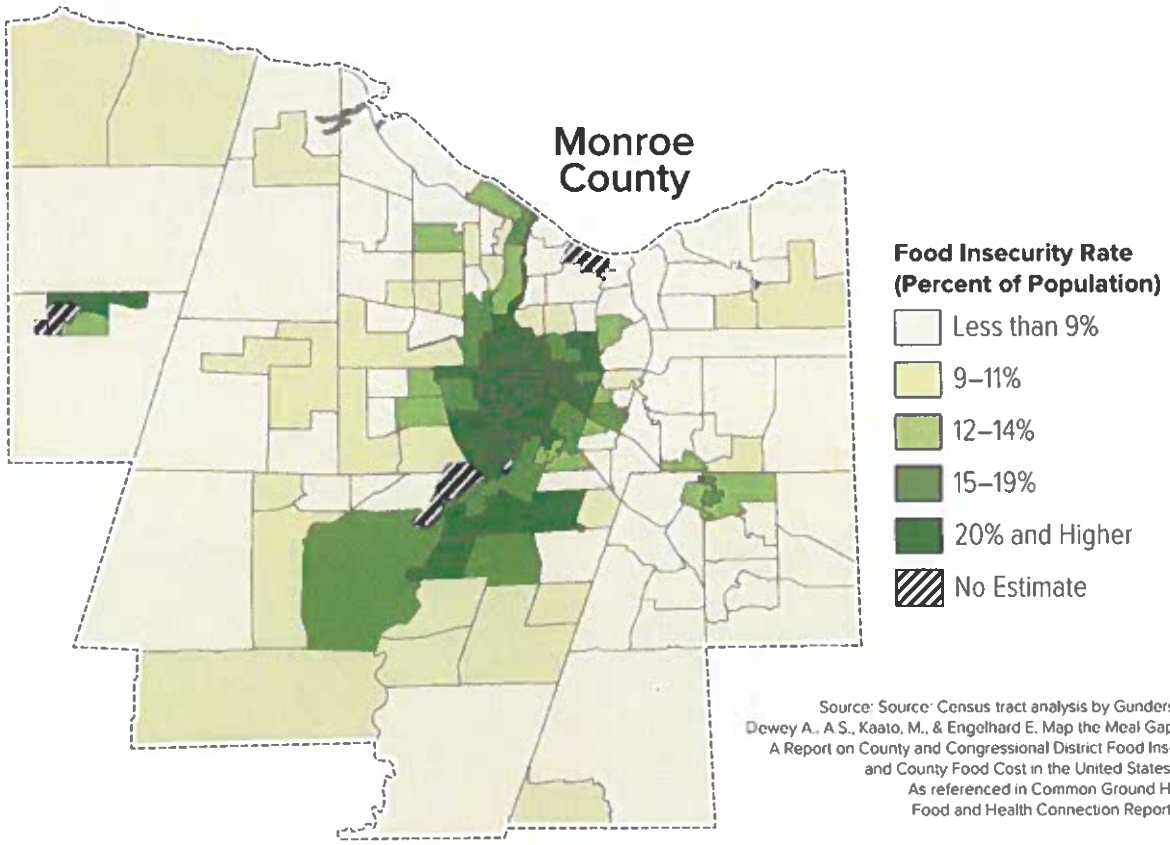
In Monroe County, food insecurity is deeply intertwined with broader social determinants of health, including poverty, transportation access, housing instability, and racial inequities. Residents who live in areas without nearby grocery stores, individuals with disabilities, seniors, and those without reliable transportation or income face significant barriers to accessing nutritious food. Rising food costs and limited eligibility for assistance programs compound these challenges.

Food insecurity has profound consequences for physical and mental health. For children, it can hinder cognitive development, learning capacity, and emotional regulation. Adults experiencing food insecurity often report higher levels of stress, anxiety, and chronic health conditions such as diabetes and hypertension. Monroe County has the second-highest rate of food insecurity in the Finger Lakes Region and ranks 27th out of 62 counties in New York State, which is higher than the state average (Feeding America, 2019) **(Figure 52).**

Food insecurity is an official term from the USDA. It's when people don't have enough to eat and don't know where their next meal will come from (Feeding America, 2025a).

According to **Feeding America,** 38% of food-insecure individuals in Monroe County are above the SNAP income threshold, leaving many older adults ineligible for food assistance despite significant need.

FIGURE 52
Rates of Food Insecurity



Source: Source: Census tract analysis by Gunderson C., Dewey A., A S., Kaato, M., & Engelhard E. Map the Meal Gap 2018: A Report on County and Congressional District Food Insecurity and County Food Cost in the United States, 2016. As referenced in Common Ground Health's Food and Health Connection Report (2019).

From 2021 to 2023, food insecurity rates more than tripled among Black and Hispanic residents, reaching 28% and 30%, respectively; compared to 9% among White residents. This stark disparity highlights the racial and ethnic inequities embedded in the local food system. Child food insecurity averaged 17.6% in 2023, underscoring the urgent need for targeted interventions.

Foodlink, the regional food bank serving 10 counties, including Monroe County, reported a sharp increase in food insecurity from 9.3% in 2021 to 12.8% in 2023, the highest rate in a decade. Geographic proximity to grocery stores with fresh produce is a major determinant of food security. Urban census tracts in Monroe County, particularly in the City of Rochester, have the highest rates of food insecurity, with Rochester's overall rate at 21.5% (Dwyer, 2025).

While urban residents often face challenges related to income and proximity to stores, rural residents struggle with transportation access. Seniors, especially those living in outlying areas, are particularly vulnerable due to mobility limitations and isolation. Addressing food insecurity requires tailored strategies for both urban and rural communities, as well as granular data analysis beyond the census tract level. A significant portion of Monroe County's food-insecure population (38%) falls above the SNAP income threshold of 200% of the federal poverty level, making them ineligible for food assistance (Feeding America, 2025b). This gap leaves many residents with few options for acquiring nutritious food. Rising food costs affect residents across both urban and rural areas, making affordability a countywide concern.



The City of Rochester's Community Food System Draft Plan was released in 2026. The Plan aims to gain a deeper understanding of the local food system across City neighborhoods, using block-level mapping, and develop targeted recommendations to inform policies, partnerships, and initiatives that improve food access, health, and resilience (City of Rochester, 2025b).

Collaboration among food providers, nonprofits, and government agencies is essential to developing affordable, coordinated solutions. The ROC Food Policy Council, supported by the Rochester City Council, is a key player in advancing equitable food policies. Formed through partnerships with Common Ground Health, Foodlink, and local residents, the Council promotes youth nutrition programs, farm-to-school initiatives, urban agriculture, and community gardens. It works with organizations such as Rochester Public Market, Headwater Food Hub, Taproot Collective, Grow Green, and Green Visions to strengthen local food distribution networks.

CCE Monroe County Food Insecurity Project

The Food Insecurity Project, funded by Monroe County and implemented by Cornell Cooperative Extension (CCE) Monroe, is a strategic investment in strengthening the county's food access network. Through targeted support for food pantries, community gardens, and nonprofit partners, the project addresses immediate food needs while building long-term capacity for sustainable food security. Since 2024, CCE Monroe has partnered with nearly 40 organizations, delivering more than $300,000 in support for equipment, infrastructure, and educational initiatives. This approach not only improves operational efficiency and expands service reach, but also equips organizations to become self-sustaining food security hubs, reducing long-term strain on emergency food systems and increasing community resilience.

Foodlink Curbside Market

Foodlink's Curbside Market is a Rochester-based nonprofit that meets residents in their communities to provide fresh fruits and vegetables and encourage healthy diets. This program increases access to healthy foods and lowers the cost of fruits and vegetables by accepting the two main types of national food assistance, Supplemental Nutrition Assistance Program (SNAP) and Special Supplemental Nutrition Program for Women, Infants, and Children (WIC). Foodlink has impacted the community by building trusted relationships with the public, farmers, and distributors who supply fresh, reliable produce year-round. The organization continues to explore ways to bring the most convenient, nutritious foods to its community. In addition to the Curbside Market, Foodlink seeks to reduce food insecurity through offering discounted community meals at the Community Café, nutrition education, nutritious meals for students and daycares, food for students when they are away from school, and emergency food relief.



Monroe County's farms and farmers' markets are vital components of the local food system, however, they have limited resource and funding to invest in infrastructure or sustain long-term collaborations. Supporting sustainable farming practices outlined in the Monroe County Agricultural and Farmland Protection Plan (2025) will provide long term benefits to Monroe County farmers and regional agriculture efforts. These include Best Management Practices (BMPs) such as reduced pesticide use, cover cropping, stream buffers, and stormwater management to protect soil and water resources. Additionally, Monroe County could support cost-sharing programs and educational initiatives through Cornell Cooperative Extension (CCE), the Soil & Water Conservation District (SWCD), and the USDA Natural Resources Conservation Service (NRCS). County involvement in these efforts would help farmers implement BMPs and improve the resilience of the local food system. Enhanced communication between the County, municipalities, and farmers is essential for coordinating priorities and ensuring that food production and distribution align with community needs.

Food insecurity in Monroe County is a multifaceted challenge that requires a coordinated, equity-driven response. To make lasting progress towards a heathier and more resilient community, the County can invest in data-driven planning, support local agriculture, and expand access to nutritious food.

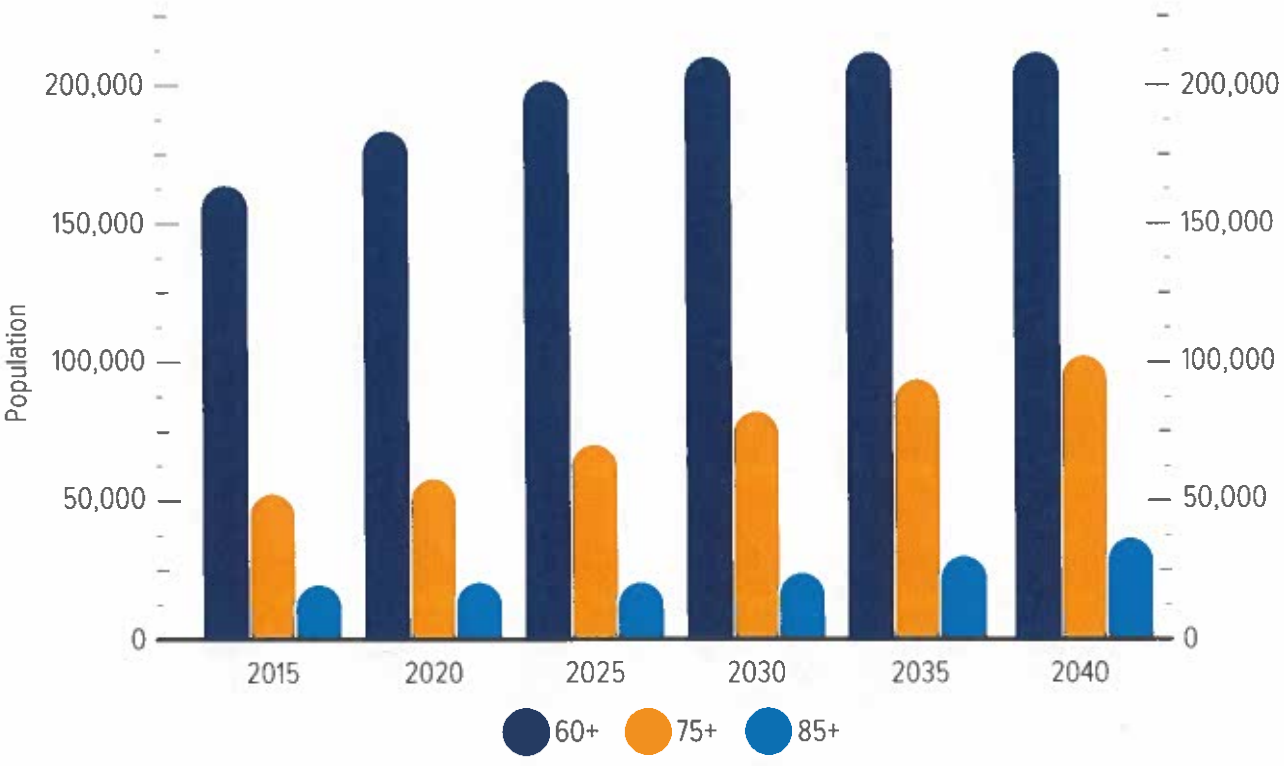
The Vineyard Farms

The Vineyard Farms is a Black-owned urban farm in Rochester that provides fresh produce to residents without a nearby supermarket within walking distance. It is situated in a food desert that lacks enough sources of nutritious food for the community living there. Since 2010, the Vineyard Farm has distributed fresh produce to at least 12,600 households, including 38,500 food boxes from October 2020 to January 2022, and 13,200 meals from January to March 2022 (The Vineyard Farms, 2025). The Farm has hosted over 275 grassroots fundraising events and Father Legacy Programming to help fathers create a better future for their children. It has also worked with URMC and Anthony Jordan Health Center physicians to provide Telehealth Training to hundreds of community residents.

3.4.4 Age-friendly Communities

As Monroe County's population continues to age, adopting an age-friendly approach to food access, housing policies, and workforce development will be essential for maintaining equity and well-being for all residents. According to recent demographic projections, a growing proportion of residents will be over the age of 65 in the coming decades, a trend that mirrors broader national shifts **(Figure 53)**. Some of the current trends affecting retirement decision-making among older adults include a lack of family support (more childless older people), insufficient retirement savings, higher educational attainment leading to extended work lives, and newly emerged health concerns such as increased obesity rates compared to previous generations. Moreover, climate change will exacerbate heat-related illnesses, especially for vulnerable populations, including older adults from lower socio-economic backgrounds.

FIGURE 53
Monroe County Older Adult Population Projections 2015-2040



Monroe County Older Adult Population Projections 2015–2040

Source: Monroe County Office for the Aging

Older individuals contribute significantly to society through volunteerism, mentorship, and institutional knowledge. However, an aging population brings unique health-related challenges, including increased rates of chronic illness, mobility limitations, and social isolation. Furthermore, food insecurity is a growing concern among older adults. Seniors are particularly vulnerable due to fixed incomes, limited mobility, and isolation. Many live in areas classified as "food deserts," where access to fresh, nutritious food is limited by distance, transportation barriers, or affordability. According to Common Ground Health, food insecurity in Monroe County disproportionately affects older adults, especially those living alone or in rural areas.

The general aging of the population will impact workforce development, with experienced workers gradually exiting the labor market while demand for caregiving and healthcare jobs increases. This shift presents an opportunity to reimagine the role of older adults in the workforce through flexible work arrangements, lifelong learning, retraining programs, and phased retirement options. Intergenerational mentorship programs not only support knowledge transfer but also improve the health and well-being of older adults. These programs can also be leveraged to address food insecurity by engaging older adults in community gardening, food distribution, and nutrition education initiatives.

FIGURE 54
Eight Domains of Livability

Source: Creating a Community for a Lifetimes, Monroe County, 2021





Housing policy must also evolve to support aging in place and reduce food insecurity. Many homes in Monroe County are not designed for residents with limited mobility, and there is a growing need for communal, transit-accessible housing near grocery stores and food pantries. Encouraging diverse housing types can improve financial security and access to food. Integrating age-friendly principles into zoning and land use planning can foster compact, walkable communities that support healthy aging and food access which are desired by a majority of older adults (AARP, 2022).

Age-friendly communities benefit all residents. Designing a built environment that supports older adults also serves families with young children, individuals with disabilities, and anyone facing mobility or access challenges. An age-friendly community ensures access to nutritious food, safe outdoor spaces, and opportunities for social participation. Features such as safe sidewalks, accessible public transit, traffic calming measures, and proximity to essential services, including grocery stores and food pantries, create a more inclusive and resilient community. These improvements enhance quality of life, promote equity, and strengthen the social fabric of the entire community.

Monroe County has developed an action plan for an age-friendly community: Creating a Community for a Life Time, in 2022; and is member of the Global Network for Age-friendly Cities and Communities, a World Health Organization initiative. The action plan and network membership provides a framework for addressing challenges associated with aging by connecting and advising regions, cities, communities and organizations on local actionable goals and strategies for achieving places people can age in healthily and actively (WHO, 2025). AARP has provided technical assistance with age-friendly planning since 2012 and accepted Monroe County and the City of Rochester into the AARP Network of Age-friendly States and Communities in 2019.

3.4.5 Housing Instability and Homelessness

Housing stability is closely linked to health and well-being. Individuals experiencing homelessness or housing instability are more likely to face chronic health conditions, mental health challenges, substance use disorders, and increased reliance on emergency healthcare services. Stable, safe, and affordable housing provides the foundation for residents to maintain their health, access services, and participate fully in community life.

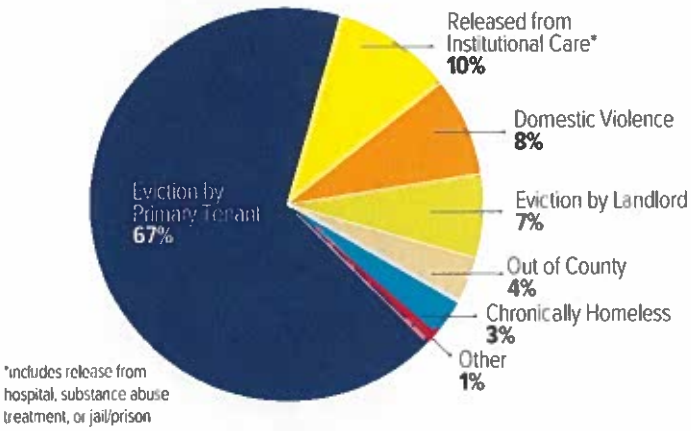
Although homelessness declined slightly nationwide in 2025 following a record high in 2024, rates remain historically elevated across the United States. New York State experienced the largest year-over-year decline in homelessness between 2024 and 2025, yet it continues to have one of the highest homelessness rates in the nation (HUD, 2026). Monroe County reflects these broader trends. The County's 2025 Point-in-Time Count, conducted January 2025, identified 1,194 people experiencing homelessness. This represents a significant increase from 803 individuals in 2019 and 748 individuals in 2022, highlighting the growing need for expanded housing options, prevention strategies, and coordinated support services. (HUD, 2026b.) The 2026 Point-in-Time Count identified 859 people experiencing homelessness, a notable decrease that may reflect the success of homelessness prevention efforts, expanded New York State Supportive Housing Initiative units, and declining eviction rates. (HUD, 2026b.) Continued investment in these initiatives will be important to sustain this progress while addressing the County's ongoing need for housing and supportive services.

The **Point-in-Time (PIT) Count** is an annual count of sheltered and unsheltered individuals experiencing homelessness on a single night. In Monroe County, the PIT count is conducted during the last week of January each year.

The primary causes of homelessness in Monroe County reflect housing instability rather than chronic unsheltered homelessness alone. In 2025, nearly 67% of Temporary Housing Assistance (THA) placements resulted from individuals being asked to leave shared housing arrangements ("eviction by primary tenant"), followed by 10% resulting from discharged from hospitals, treatment facilities, and correctional institutions. Although traditional landlord evictions remain a contributing factor, they have declined since the COVID-19 pandemic. (Monroe County, 2025k) **(Figure 55)**

FIGURE 55
Reasons for Placement in Emergency Housing - 2025

Source: Department of Human Services, Monroe County, 2026

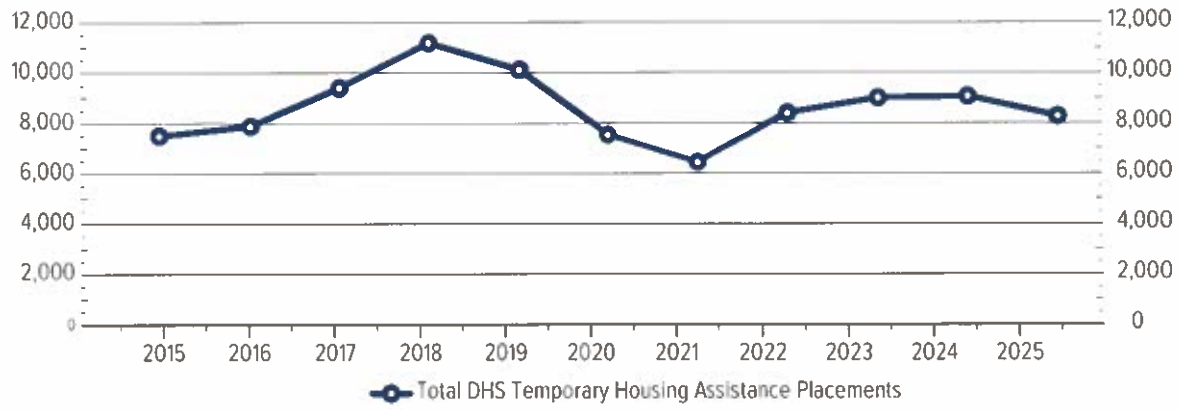


Emergency shelters remain the primary entry point into Monroe County's homelessness response system, accounting for 93% of THA placements in 2025. (Source: Department of Human Services 2025 Housing Annual Report). This continued reliance on temporary shelter underscores the need for a broader continuum of housing options and stronger coordination with behavioral health, employment, and healthcare services to support long-term housing stability. Meeting the needs of residents experiencing homelessness requires a range of housing options in response to varying levels of need. While emergency shelter provides an essential immediate response, long-term stability depends on expanding access to permanent supportive housing, rapid rehousing, transitional housing, and other housing models.

FIGURE 56

Total DHS Temporary Housing Assistance Placements

Source: Department of Human Services, Monroe County, 2026



Addressing homelessness requires a coordinated, systems-based approach that expands access to a range of housing options while integrating housing with healthcare, behavioral health, employment, and other supportive services. Existing local initiatives demonstrate the value of this integrated approach. Programs such as Volunteers of America Upstate New York's housing and supportive service programs, Affinity Place by East House, and Project Anchor's rent subsidy program provide models for connecting individuals with stable housing, case management, and wraparound support. Monroe County should continue building on these efforts and supporting targeted housing assistance for specific populations, including veterans, through programs such as the Veterans Service Agency's Homeless Veteran Resource program, which connects eligible veterans with housing assistance, benefits, and supportive services. Strengthening collaboration among healthcare providers, housing organizations, community-based nonprofits, and public agencies can further improve coordinated outreach, expand housing stability, and make it easier for residents to access the services they need.

Advancing housing as a public health priority requires stability, prevention, and connection to care, ensuring that residents not only have access to housing, but also the health and supportive services necessary to remain stably housed and thrive in the community.

Coordinated Housing and Supportive Services in Action

Project Anchor

Project Anchor is a local rent subsidy program administered by Catholic Charities Family and Community Services (CCFCS), designed to help households in Monroe County at risk of homelessness remain stably housed. Project Anchor helps around 200 households in Monroe County annually by providing rental assistance of up to 100% of the metro-Rochester Fair Market Rent (FMR) for eligible households earning below 50% of the Area Median Income (AMI).

Volunteers of America Upstate New York

Volunteers of America Upstate New York provides a continuum of homelessness prevention and housing services in Monroe County that extends beyond emergency shelter. Programs include emergency family shelters, permanent supportive housing, rapid re-housing, housing for veterans and older adults, rental assistance, and intensive case management. These housing services are integrated with behavioral health referrals, employment assistance, life skills training, and other supportive services to help individuals and families achieve long-term housing stability.

3.5 Goals and Strategies





Provide Integrated Mental and Physical Care to Residents in Need

1. Improve the accessibility and delivery of health and mental health services in underserved areas by evaluating the needs of residents, identifying barriers to access, and developing strategies to address the challenges.
2. Work with community partners on addressing preventable healthcare issues, including identifying root causes and developing targeted interventions.
3. Support preventative services to reduce maternal and infant mortality and improve maternal health outcomes.
4. Work to prevent and address issues related to social isolation.
5. Support a healthy lifestyle by investing in open space, trails, water access, and other recreation amenities near population centers that promote physical activity and mental well-being.
6. Support the development and expansion of culturally and linguistically responsive behavioral and mental health services that address the needs of diverse populations, including but not limted to deaf, deafblind, and hard of hearing individuals, through accessible communication, workforce development, provider training, and partnerships with community organizations and educational institutions.

Prevent Substance Use and Subsequent Substance Use Disorders

1. Support and expand programs that provide drug abuse prevention, education, treatment, and recovery services.
2. Ensure that county services for chemical dependency treatment are accessible to all residents, including those who face cultural, linguistic, and other barriers.

Promote Housing Stability and Reduce Homelessness

1. Expand collaboration between Monroe County, Municipalities, and Not-for-Profits, and other community partners working to expand homelessness prevention efforts and to increase supportive and transitional housing options across the county.
2. Support a range of innovative housing options that meet a variety of user needs and better integrate housing with behavioral health, employment, and healthcare services.





Mitigate Environmental Health Hazards

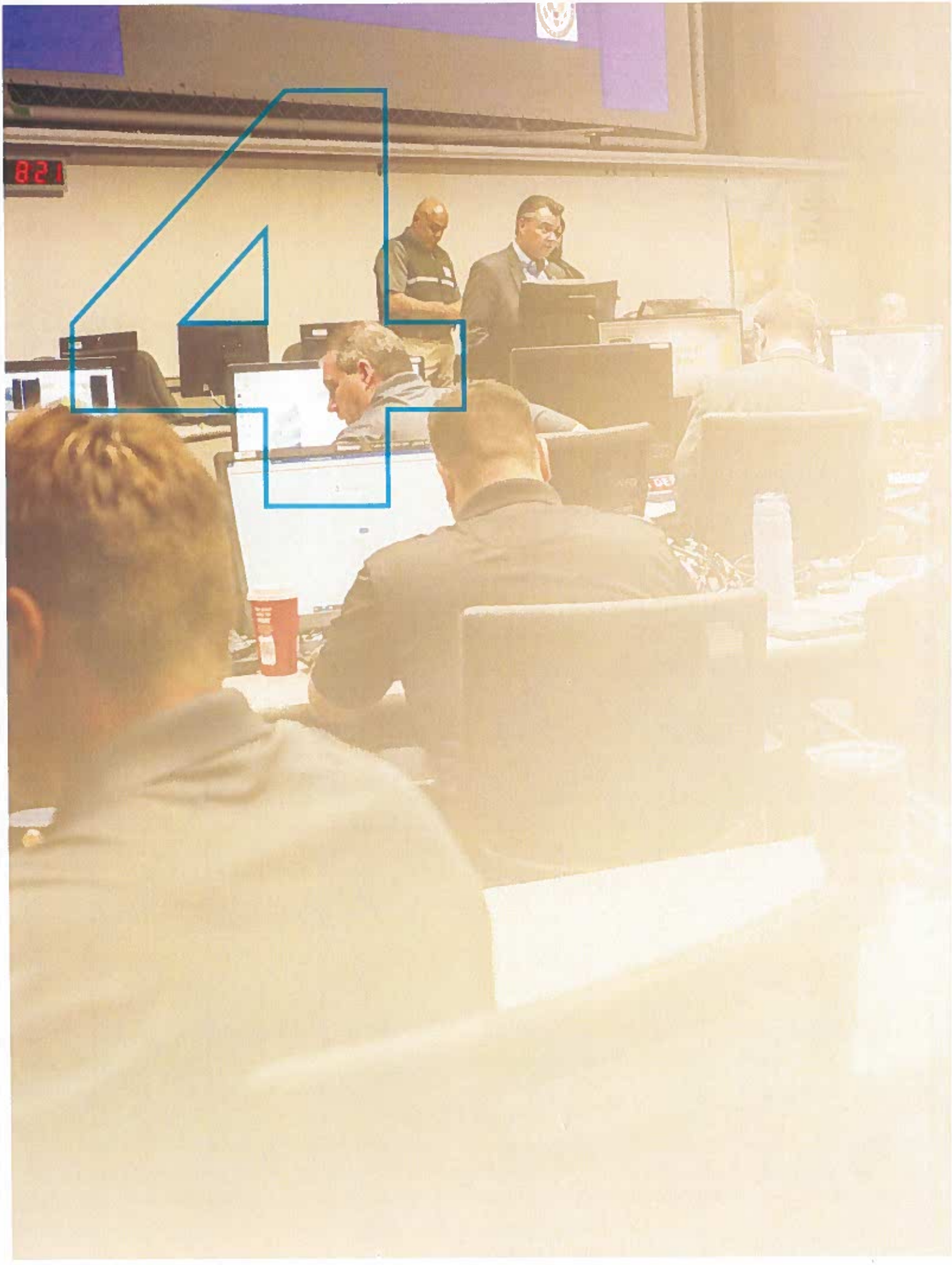
1. Address water-related hazards such as harmful algal blooms, legacy industrial contamination in the Genesee River and Lake Ontario Shoreline, and combined sewer overflow systems.
2. Improve air quality by promoting the reduction of industrial emissions, supporting clean energy in transportation systems, and monitoring elevated ozone levels during summer months.
3. Provide resources to mitigate building health hazards, particularly in older housing and school buildings, including mold, soil contamination, lead in drinking water, lead paint, and deteriorating structures and infrastructure.
4. Help farm operations adopt environmentally sustainable practices, such as reducing pesticide and fertilizer runoff and modernizing operations.

Support Policies and Programs that Improve Access to Nutritious Foods

1. Enhance and expand meal programs, collaborating with local organizations to support access to healthy, affordable foods for community members who are vulnerable, food insecure, or who face economic challenges.
2. Engage in dialogue with the ROC Food Policy Council and partner organizations about expanding regional food system coordination.
3. Identify and support all food distribution networks in the County to reach people across municipalities.
4. Support a regional food system plan to improve access to healthy, affordable food and reduce disparities in food access.

Foster an Age-Friendly Monroe County and Support Environments for Older Adults

1. Provide information and guidance to navigate challenging aging issues and concerns.
2. Continue the Office of Aging and Aging Alliance's prioritization of programming that addresses improved economic security for older adults.



4 Public Safety

4.1 Introduction

Monroe County is committed to the idea that everybody deserves to feel safe in their home and community. The County's public safety efforts focus on the comprehensive protection and well-being of all residents within the County's jurisdiction through coordinated prevention, response, and recovery services. This includes traditional law enforcement activities such as crime prevention, investigation, and emergency response, as well as broader protective services like fire suppression and prevention, emergency medical services, disaster preparedness and response, hazard mitigation, and public health emergency management. Monroe County public safety extends beyond reactive measures to include proactive community engagement, crime prevention programs, public education initiatives, inter-agency coordination with municipal and state partners, and the maintenance of critical infrastructure and communication systems that support overall community resilience. Monroe County uses a holistic approach to creating and maintaining conditions where residents in the city, suburbs, and rural areas can live, work, and participate in community life without undue risk of harm from crime, natural disasters, public health emergencies, or other threats to individual and collective well-being.



Image: monroecounty.gov

PILLAR 4

PUBLIC SAFETY

GOALS

- ✓ Reduce Violent and Property Crime County-Wide
- ✓ Enhance Emergency Response Capabilities and Reduce Response Times
- ✓ Build Stronger Police-Community Relationships
- ✓ Strengthen Disaster Preparedness and Community Resilience
- ✓ Build A Diverse and Talented Public Safety Workforce
- ✓ Significantly Reduce Traffic Fatalities and Serious Injuries Across the County

The County's approach to public safety extends beyond traditional law enforcement, embracing a comprehensive framework that recognizes the interconnected nature of community safety, economic opportunity, and social well-being.

Through innovative programs like the Juvenile Enhanced Diversion Stabilization (JEDS) initiative, youth who have become involved in the juvenile justice system have received assessments and interventions faster than in years past. Also, because of the more targeted and intense supervision that JEDS provides, a youth's negative and criminogenic behavior is interrupted. It was determined that in 2025, 84% of the youth who successfully completed JEDS also successfully completed Diversion and had their cases adjusted and sealed. The State average of successful Diversion completion is around 36%.

The County's commitment to multi-agency collaboration is exemplified through shared facilities like the Public Safety Training Facility, integrated communication systems including the County-wide 911 network, and strategic partnerships with community and faith-based organizations that strengthen neighborhood ties and build a comprehensive understanding of local safety needs.

Despite these achievements, Monroe County faces challenges that require sustained attention and strategic investment.

The County confronts growing concerns, including climate-related emergencies, persistent economic inequalities, and critical workforce shortages in public safety sectors, particularly in emergency medical services, where certified personnel have decreased by 44% over the past five years (News10, 2023b). Additionally, traffic safety remains a pressing issue, with Monroe County historically ranking among New York State's highest for impaired driving incidents per capita, though recent technological innovations have begun to show promising results.[6] These challenges, coupled with aging infrastructure and the need for continuous technology upgrades, underscore the importance of the County's forward-looking goals and strategies that emphasize community partnership, evidence-based prevention strategies, and comprehensive workforce development to build a more resilient and safer community for all residents.

4.2 Trends

Monroe County has experienced significant positive developments in public safety over the past two decades. Total crime counts have declined substantially from their early 2000s peak of approximately 32,000 incidents to around 21,000 by 2024, representing a notable improvement in overall community safety **(Figure 56)**. This reflects the County's strategic shift toward evidence-based approaches that address underlying socioeconomic factors while implementing proven intervention methods. Property crimes have shown encouraging downward trajectories, falling from nearly 30,000 incidents in 2000 to approximately 19,000 in 2024, while violent crime patterns have remained relatively stable with some fluctuation around 2,000-2,500 total incidents annually. However, the continued need for vigilance and proactive intervention strategies persists.

Property crimes, the largest category of criminal activity, have shown a particularly encouraging downward trajectory, falling from nearly 30,000 incidents in 2000 to approximately 19,000 in 2024 **(Figure 57)**. This trend includes steady decreases in burglary, larceny, and motor vehicle theft rates through most of the period, with only a modest uptick observed in recent years.

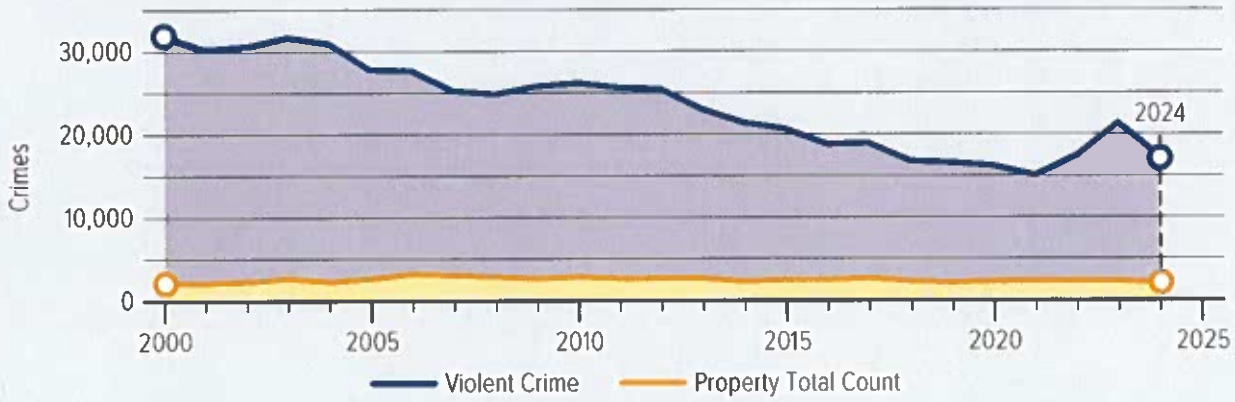
Trend 1

Property crime has declined, and violent crime has remained steady over the last 25 years.



6. Interview with Lindsay Tomidy; STOP-DWI Program Coordinator.

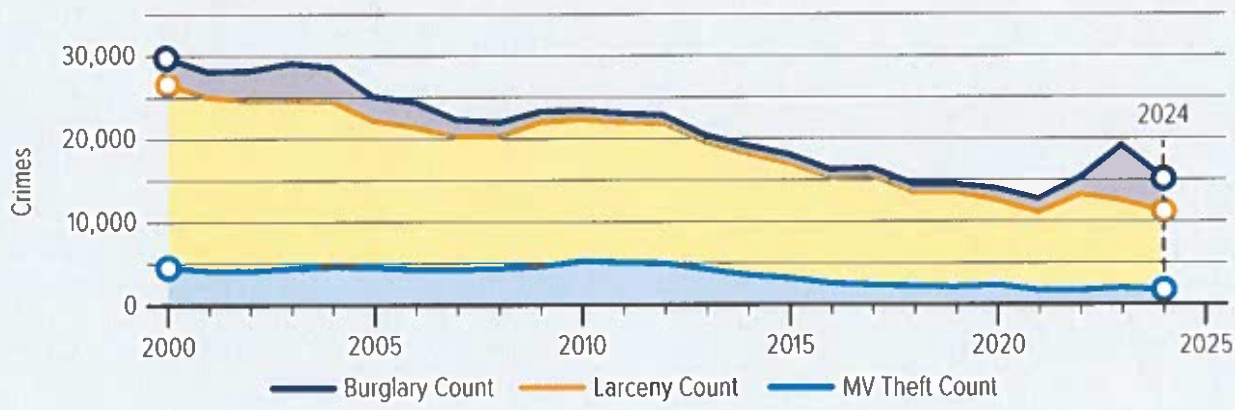
FIGURE 56
Total Crime by Category in Monroe County



Total Crimes by Category

Source: NYS Division of Criminal Justice Services, 2025

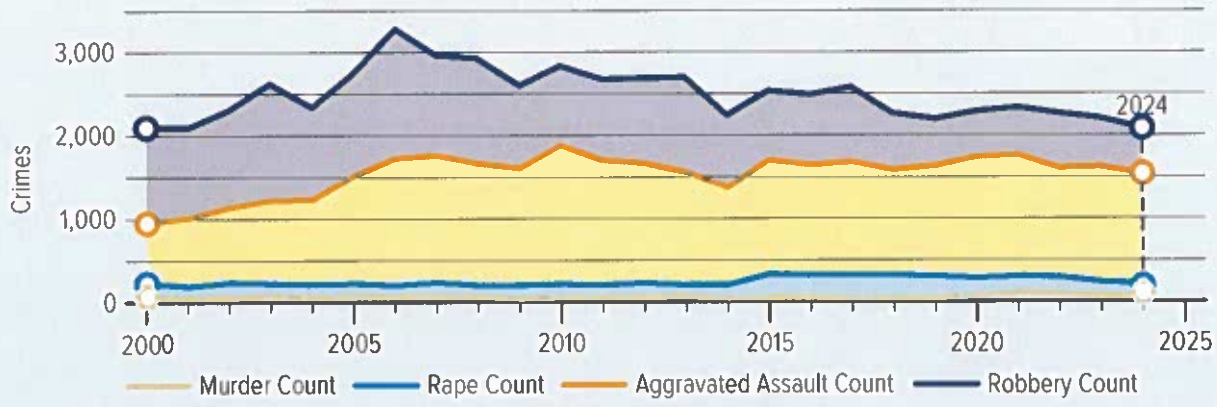
FIGURE 57
Total Property Crime in Monroe County



Property Crimes

Source: NYS Division of Criminal Justice Services, 2025

FIGURE 58
Total Violent Crime in Monroe County



Violent Crimes

Source: NYS Division of Criminal Justice Services, 2025

The data reveal that robbery constitutes the most significant component of violent crimes, followed by aggravated assault, while murder and rape rates have remained consistently low. The recent uptick in both property and violent crimes from 2021 to 2024 warrants continued monitoring and proactive intervention, particularly given established research linking unemployment rates to property crime increases and economic instability to non-violent crime rates (Raphael and Winter-Ebmer, 1998; Jawadi et al., 2021). **(Figure 58).**

Research consistently demonstrates that unemployed individuals may become more susceptible to involvement in criminal activities due to financial desperation, limited social support networks, and a loss of purpose or identity associated with work (Vargas, 2023). The County's crime reduction strategies have been shifting toward evidence-based approaches that address underlying socioeconomic factors while implementing proven intervention methods. Improving public safety requires a comprehensive set of accountability and prevention strategies that seek to change behavior while addressing the conditions giving rise to crime (McLendon et al., 2024). Best practices include expanding community-based violence intervention programs, which have demonstrated effectiveness in reducing violent crime, and implementing community-led efforts, working with law enforcement and other local partners to support prevention and intervention efforts in neighborhoods where crime is concentrated or crime "hotspots" (Bureau of Justice, 2025). Additionally, investing in economic development, job training programs, youth engagement initiatives, and community policing strategies can help sustain the positive crime reduction trends observed over the past two decades.



Trend 2

Climate change-induced emergencies are intensifying.

Climate change is significantly intensifying environmentally based emergencies throughout Monroe County, creating new challenges for emergency response systems and community resilience planning. The County's comprehensive Hazard Mitigation Plan systematically ranks hazards of concern based on their probability, impact, and vulnerability factors, revealing that flood events, severe storms, and severe winter storms represent the highest-ranked threats to the community **(Figure 60).** These weather-related emergencies have become increasingly frequent and intense due to shifting precipitation patterns, rising temperatures, and more volatile atmospheric conditions associated with climate change. Following closely in the hazard rankings are drought conditions and extreme temperature events, which pose growing risks to public health, agriculture, infrastructure, and energy systems across the County. This escalating pattern of climate-driven emergencies is straining Monroe County's emergency response capabilities, requiring enhanced preparedness strategies, upgraded infrastructure, and expanded community education programs to protect residents from an increasingly unpredictable and severe environmental threat landscape that extends well beyond the County's historical experience with natural disasters.

FIGURE 59

Total Hazard Ranking Values for the Hazards of Concern for Monroe County

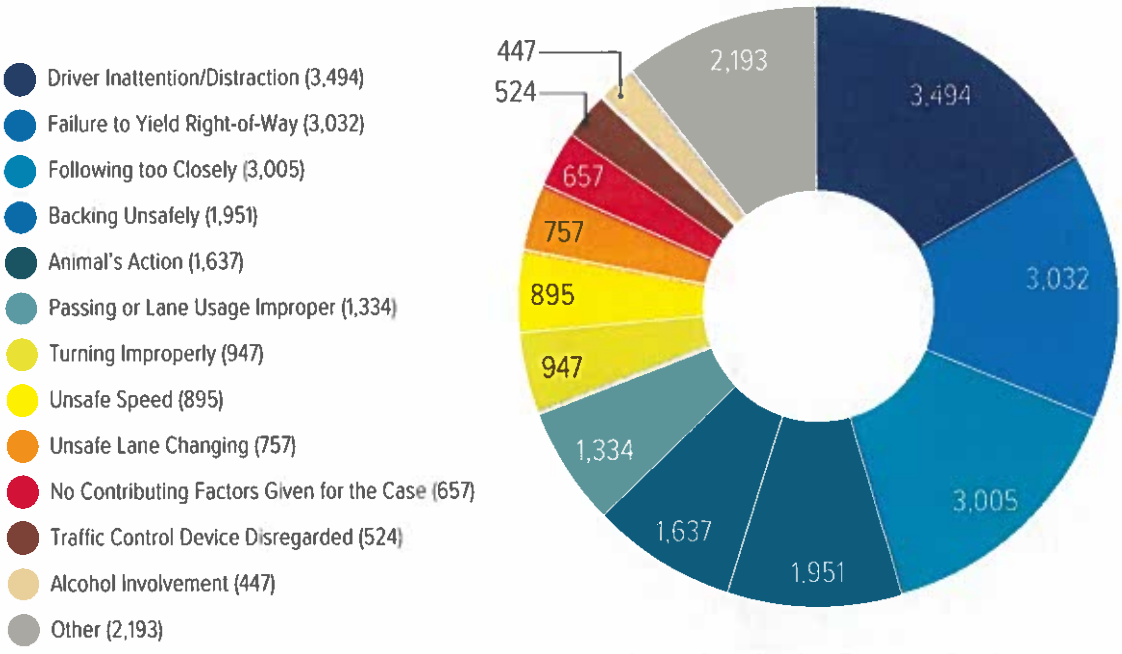
HAZARDS OF CONCERN	PROBABILITY X 30%	TOTAL IMPACT X 30%	ADAPTIVE CAPACITY X 30%	CHANGING FUTURE CONDITIONS X 10%	TOTAL RISK RANKING VALUE
Disease Outbreak	0.6	2.7	0	0.2	3.5
Drought	0.6	3	0	0.3	3.9
Earthquake	0	3.6	0	0.1	3.7
Extreme Temperature	0.6	3	0	0.3	3.9
Flood	0.9	3.9	0	0.3	5.1
Hazardous Materials	0.3	3	0	0.1	3.4
Invasive Species	0.6	2.1	0.3	0.3	2.7
Landslide	0	3.6	0	0.2	3.8
Severe Storm	0.9	4.2	-0.3	0.3	5.1
Severe Winter Storm	0.9	4.5	-0.3	0.2	5.3
Wildfire	0.6	1.8	0	0.2	2.6

Notes: LOW Values less than 3.9; MEDIUM Values between 3.9 and 4.9; HIGH Values greater than 4.9

Source: Monroe County Hazard Mitigation Plan

FIGURE 60

Primary Contributing Factor to Crashes Resulting in Injury or Death



Primary Contributing Factor to Crashes Resulting in Injury or Death

Source: Monroe County Crash Data Hub

Trend 3

Human behavior increasingly drives traffic safety issues.





From October 2023 to September 2024, a total of 20,873 traffic crashes resulted in 4,618 injuries and 39 deaths. Data showing the primary contributing factor for these crashes indicates that human behavior is at the root of many of the vehicle incidents that occur in Monroe County **(Figure 59).** The County's Public Safety Department is focused on addressing the human behavior causes of traffic crashes on the County's roadways.



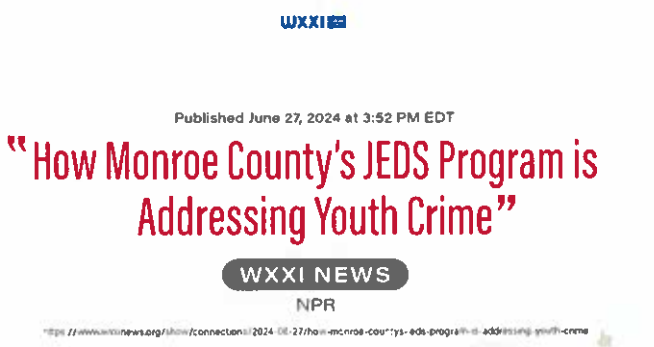


4.3 What Do We Build On?

4.3.1 Supportive Programs

Building safe communities is a shared responsibility that requires county-wide collaboration, with roots at the community level. Approximately 2,443 violent crimes occur annually in Monroe County.[7] The Monroe County Department of Public Safety is committed to law enforcement methods that address the root causes of crime. The department's wrap-around services and programs focus on stabilizing and preventing crime throughout the County. The department is actively working to re-imagine the probation system, re-evaluating its structure and policies to better serve residents. These efforts include probation services that support over 4,000 adults and 500 youth, focusing on supervision and rehabilitation through referrals and linkages for assistance in areas of employment, mental health care, drug abuse treatment, and behavioral therapy to name a few.

In response to a recent rise in juvenile crime and a spike in car thefts, the Monroe County Office of Probation-Community Corrections (MCOPCC)[8] implemented enhanced diversion programs, such as the Juvenile Enhanced Diversion Stabilization (JEDS) program, which reduces repeat offenses by minimizing the time between arrest and intervention, keeping youth safe and providing family support services where appropriate.



MonroeAlert

Monroe County continues to enhance emergency preparedness and public communication through MonroeAlert, the County's official emergency notification and 9-1-1 public alerting platform. MonroeAlert provides a direct, real-time link to critical safety information from Monroe County 9-1-1 and Emergency Management.

The system delivers timely alerts on severe weather, public safety incidents, travel advisories, and other emergencies through text messages, emails, phone calls, and mobile app notifications. Designed with accessibility and inclusion in mind, MonroeAlert supports multiple languages and includes American Sign Language (ASL) video alerts to ensure information is accessible to all community members.

Recognizing that public safety extends beyond policing, Monroe County continues to promote a more integrated approach to address issues like opioid addiction, domestic violence, and systemic social problems. Monroe County Public Safety emphasizes the importance of engaging with community organizations and employing trained intervention specialists. The County still faces challenges, particularly in finding youth trauma therapists in underserved areas such as the west side of the County, and collaboration among public safety agencies across the region might be necessary to address the root causes of crime and better serve the community.

7. University of Wisconsin Population Health Institute, 2022.
8. The MCOPCC is divided into four (4) Divisions: Administration, Special Operations, Criminal Services, Administrative Services, and Family Services Divisions. The MCOPCC FSD collaborates with the Department of Human Services to offer interventions share resources and together develop initiatives to assist families who have touched the criminal and juvenile justice systems

4.3.2 Community Partnerships

Monroe County recognizes that building and maintaining strong community partnerships is essential to fostering public safety, trust, and resiliency. The County works diligently to support collaboration with community- and faith-based organizations that strengthen ties within neighborhoods and help shape a more comprehensive understanding of public safety needs. Through ongoing outreach and engagement with organizations that have strong physical presence, the County can provide direct assistance to communities to address youth violence, emergency response, and community recovery from crises.

Many of the collaborative programs aimed at reducing violence are with the City of Rochester and other local nonprofits. An example of a program that supports these efforts is Pathways to Peace, a Rochester based street-level outreach initiative focused on reducing youth violence through mentorship, conflict mediation, and intervention (City of Rochester, 2025a). This program engages with young people who are at risk of becoming involved in violence, connecting them to resources, employment opportunities, and support networks. Similarly, the Rochester Youth Violence Partnership (RYVP) at the University of Rochester Medical Center's Trauma Center utilizes cross-sector collaboration, bringing together law enforcement, health professionals, social workers, and community organizations to provide wraparound services for youth impacted by violence (University of Rochester Medical Center, 2011). The University of Rochester Medical Center also offers outreach and injury prevention programs focused on reducing distracted driving among teenagers or educating people on how to 'stop the bleed' from an injury in high-risk situations, to ensure residents are prepared to act responsibly and respond appropriately (University of Rochester Medical Center, 2018). The ROC Against Gun Violence Coalition, another significant initiative, brings together law enforcement, public health officials, nonprofits, and neighborhood leaders to coordinate efforts in violence prevention, data-sharing, and community engagement. By listening, learning, and integrating perspectives from across the community, the Coalition helps ensure that strategies are inclusive and grounded in local realities.

Recognizing the importance of reducing gun violence as a public health strategy, the Department of Public Health is partnering with CURE Violence Global to provide violence prevention training for the department and local nonprofits. CURE Violence uses a data-driven approach that aims to reduce violence using disease control and behavior change methods. Additionally, the Health Department has engaged with the Center for Youth and Rise Up Rochester to expand positive youth development and intervention programs with the aim of providing growth opportunities, skill and academic development and access to resources as a means to overcoming barriers and challenges that may lead to negative choices, behaviors and violence.



The County also partners with the American Red Cross on public preparedness campaigns and sponsors volunteer networks such as the Monroe Medical Reserve Corps that trains health professionals and community volunteers to help in large-scale health emergencies (Monroe County, 2025c). Other local coalitions of nonprofits, churches, and aid agencies are also prepared to mobilize to provide shelter, food, and clean-up after official responders leave and help with recovery efforts. They are key to addressing the needs of disaster victims, especially seniors, people with disabilities, the homeless population, people in remote areas without connectivity, non-English speakers, and others to provide quick and efficient relief.

Though impactful, such programs often struggle to gain visibility and broaden their reach. As a result, efforts can focus on improving public communication in order to build trust and ensure that community members are aware of county services that are available to them. Such public communication may include community initiatives to provide regular updates on current trends, open data sources, and community feedback loops and ensure that law enforcement's community engagement efforts involve diverse communication channels, such as social media, accessible public education initiatives, and other inclusive outreach programs.

Building strong partnerships is crucial to prepare for an uncertain future and to create a safer community for everyone. Monroe County can serve as a facilitator for decision makers to ensure collaboration on shared challenges and opportunities related to public safety. Expanding community-based efforts focused on public-facing initiatives and direct engagement can foster trust and transparency. Additionally, by working closely with other municipalities, agencies, businesses, nonprofits, and community partners, Monroe County can actively help develop healthy and safe communities.



4.3.3 Multi-Agency Collaboration

Monroe County's public safety 'system of care' relies on multi-agency collaboration to achieve goals related to workforce productivity, quality service, fiscal responsibility, and high-quality service to the community. The collaboration and coordination in this response system allow responses to be appropriately matched to need, resulting in affordable, effective service. By working together, the Office of Public Safety and Local police and emergency response offices are able to provide high-quality service to the residents of Monroe County efficiently.

Rochester Threat Advisory Committee (ROCTAC), established in 2018, is an active network of organizations representing Monroe County corporations, schools and colleges, social service agencies, mental health professionals, and local and federal law enforcement—partners working together to prevent acts of targeted violence in Monroe County. The Monroe County Sheriff's Office is a leading partner in ROCTAC, providing critical leadership, coordination, and expertise that strengthens prevention and response efforts across the county. In 2024, this mission was further strengthened by the establishment of the Regional Investigative Operations Center (RIOC),

a multi-jurisdictional center that consolidates technology, information, and operational control into a single location to assist those working on cases. RIOC combines law enforcement's technology with the intelligence analysis of the Monroe Crime Analysis Center (MCAC), tips from the public, and the work of investigators and patrol deputies to address identified crimes and threats.

Investment in the Monroe County Sheriff's Office

In 2023, Monroe County announced a historic $7.3 million investment in the Sheriff's Office to significantly enhance public safety and law-enforcement capacity. The funding supports the addition of 41 sworn members to the Sheriff's road patrol in towns and villages. The investment also establishes the **Regional Investigative Operations Center (RIOC)**—a cutting-edge, multijurisdictional hub for real-time monitoring, intelligence sharing, and rapid response to emerging threats—bolstering countywide collaboration and ensuring a more coordinated, data-driven approach to public safety.

The Public Safety Training Facility (PSTF) exemplifies decades-long multi-agency collaboration between Monroe County, the City of Rochester, Monroe Community College, and regional partners. Located in Rochester, the facility runs fire training programs for municipal and industrial firefighters, as well as hosting regional training for public safety personnel and first responders. The operations performed at this facility are outgrowing the available space. A space utilization study is currently underway and will inform a strategic plan for the future of the PSTF.

The Monroe County 911 Center is a centralized Public Safety Answering Point (PSAP) responsive to all calls for emergency services within Monroe County, including law enforcement, fire, and EMS. The Center manages all dialed 911 calls, dispatches emergency responders, and forwards or transfers service calls to the appropriate agencies in Monroe County. This system is a crucial multi-agency collaboration that results in over one million dispatches of police, fire, and emergency services each year. Countywide coordination enhances service quality, advances technology, and improves collaboration for all parties involved in the system.

Similarly, the police and firefighter response communications systems are interoperable, making it fast and efficient to coordinate response efforts to catastrophic events, planned large events, or other times of emergency response needs. An integrated technology system, which includes radio, radio towers, surveillance systems, and mobile data terminals, makes this possible. However, these systems are complex, expensive to maintain, and need to be responsive to constantly changing technology and community needs through consistent investments and upgrades to technology.



The **Monroe County Crime Lab** was recognized by the Bureau of Alcohol, Tobacco, Firearms, and Explosives (ATF) for its vital role in solving gun crimes, specifically for reaching 4,000 investigative leads in the National Integrated Ballistics Information Network (NIBIN). The lab's recently expanded capabilities, including the addition of firearm identification technology, have dramatically increased the speed and number of leads generated. The Crime Lab's work has directly connected numerous firearms to multiple shooting incidents, demonstrating how scientific collaboration between local, state, and federal agencies enhances public safety and helps bring justice to Monroe County.

4.3.4 Traffic Safety Initiatives

Traffic crashes are a leading cause of injury-related deaths in Monroe County.[9] Addressing traffic safety is a critical public safety priority, essential to preventing serious injuries and fatalities, and advancing equity, and strengthening community resilience.

Monroe County supports a range of campaigns and programs aimed at mitigating risk and educating the public about safe driving, walking, and bicycling behaviors.In October 2024, Monroe County established Community Traffic Safety Team (CTST), first in New York State. Comprised of the Monroe County Departments of Public Safety, Transportation, and Department of Planning and Development, the CTST works collaboratively with federal, state, city and local governments, law enforcement, non-profit and faith-based organizations, neighborhood associations and the public to tackle traffic safety issues across Monroe County.

Despite these efforts, challenges persist. High-risk corridors in Monroe County continue to experience elevated crash rates, particularly in areas with poor lighting, inadequate pedestrian infrastructure, or high-speed traffic. To address these issues, greater collaboration between Monroe County, NYSDOT, municipalities and law enforcement is needed to implement automated traffic monitoring systems, improve signage and signal timing, and redesign intersections to enhance safety.



This effort could be further supported through layered, integrated technology systems that help identify safety needs early and deliver timely, data-driven solutions. For example, multimodal detection systems can collect real-time data on roadway users, which can then be analyzed through advanced analytics tools to identify patterns of conflict, such as pedestrian-vehicle interactions, and prioritize locations with the greatest safety needs.

The Monroe County Community Traffic Safety Team (CTST) is a multidisciplinary coalition of traffic safety advocates and professionals committed to preventing traffic-related injuries and fatalities. Through its Public Input Forum, residents can submit traffic safety concerns for evaluation. CTST members include representatives from local, state, and federal agencies, as well as community stakeholders. The team applies the "Four E's" framework—Education, Engineering, Enforcement, and Emergency Response—to improve road safety. Core partners include the Monroe County Departments of Public Safety, Planning and Development, and Transportation, along with the City of Rochester Traffic Engineers and the New York State Department of Transportation (NYSDOT).

Stop-DWI

Alcohol and drug-related traffic safety violations are preventable. **STOP-DWI** is a program that has been in Monroe County since 1982, educating the community on the dangers of impaired driving. STOP-DWI hosts educational events, offers resources to the public, and supports community organizations and groups dedicated to education on and prevention of driving under the influence.

9. NYS Department of Health, 2022

In 2023, Monroe County launched School Bus Safety Program. The Program equips buses with stop-arm cameras, GPS, and LTE connectivity to capture violations and support enforcement. This technology-based initiative, offered at no cost to school districts, demonstrates the County's commitment to protecting students and promoting responsible driving behavior. By combining technology-based enforcement with education and public safety campaigns, drivers learn how to adjust their behavior around school buses and children (Monroe County, 2025b). During the 2024-2025 school year, the Monroe County School Bus Safety Program issued over 8,500 citations to motorists who illegally drove by stopped school buses (Monroe County, 2025e). As of January 2026, the program is operational in the Brighton, Greece, Hilton, East and West Irondequoit, Pittsford, Spencerport, and Webster school districts. Additionally, the City of Rochester also launched a School Bus Safety Program in the Fall of 2025.

In addition to the School Bus Safety Program, the Child Passenger Safety program plays a key role in protecting children and families by promoting proper car seat use and installation. Expanding on these efforts, Monroe County Traffic Safety program is extending focus on youth education and active transportation. The upcoming K–5 Child Walk and Bike Safety Education Program (2026), funded through the GTC Unified Planning Work Program (UPWP), will equip students with foundational traffic safety skills. Complementing this program, the Safe Routes to School initiative (2024), funded by the NYSDOT Transportation Alternatives Program (TAP), will further enhance youth traffic safety through a range of activities, including a mobile safety village, school partnership, crossing guard training, and community engagement, with full implementation expected in 2027.

To build upon these traffic safety initiatives in Monroe County, opportunities should be explored to address systemic challenges, such as inconsistent infrastructure across urban and rural areas, limited funding for pedestrian and bicycle



improvements, and ensuring fair and data-informed enforcement. For example, vulnerable populations, such as low-income residents, people with disabilities, and communities of color, often live in areas with higher crash rates and fewer safety features. Addressing these inequities requires integrating traffic safety into broader infrastructure planning and public health strategies.

Vision Zero is a strategy aimed at eliminating traffic fatalities and severe injuries while promoting safe, healthy, and equitable mobility.[10] The County can use Vision Zero as a unifying framework to align and strengthen its existing traffic safety programs and initiatives under a shared goal of zero deaths and serious injuries.

Building on current initiatives, the County can further advance a Safe System approach aligned with Vision Zero, emphasizing safer roadway design, speed management, and coordinated education, enforcement, and planning strategies. By embedding safety goals into infrastructure investments and prioritizing community engagement, the County can create safer streets for all users.

10. Visionzeronetwork.org

4.4 What Do We Need to Address?

4.4.1 Diversify Crime Reduction and Prevention Approaches

Economic- and design-based approaches as a method of crime prevention present a holistic strategy for creating safer, healthier, and more resilient communities across Monroe County's urban, suburban, and rural landscapes. A key element of this approach is the relationship between economic development and public safety.

A growing body of research shows that communities with sufficient economic opportunities complimented by strong educational pathways, workforce development programs, and thriving local businesses tend to have significantly lower crime rates.[11] Linking public safety initiatives with efforts to bolster employment, education, and neighborhood quality not only reduces and prevents violent crime but also leads to considerable public cost savings. On the contrary, economic disinvestment in Monroe County, by, for example, large manufacturing companies leaving towns and leaving a lack of appropriate opportunities behind, has deepened the poverty-crime relationship, particularly in areas marked by poverty, weak professional networks, and high levels of economic inequality. These conditions further exacerbate social isolation and limited life choices, which can contribute to more criminal behavior.

However, this pattern is not exclusive to cities. It can transpire across the urban-rural divide as well, as small towns and rural areas grapple with similar economic shifts. For instance, the loss of large employers in smaller communities can have a ripple effect on the stability of housing, level of educational attainment, and public health, all of which influence public safety outcomes. To address these root causes, Monroe County would benefit from coordinated, strategic investments that support both economic revitalization and violence prevention, especially in the City of Rochester where poverty is concentrated. Approaches that integrate job training, local entrepreneurship, and place-based development with public safety planning can lay the foundation for long-term community well-being.

Alongside economic strategies, design-based approaches, such as Crime Prevention Through Environmental Design (CPTED), offer tools to reduce crime and enhance safety through the design of the built environment. CPTED strategies use the physical environment to shape how humans interact with their surroundings and each other to reduce opportunities for crime and foster a sense of ownership and responsibility among community members. Strategies such as improving street lighting, activating vacant lots, and increasing natural surveillance can help to deter criminal activity and empower residents. These design interventions not only address physical safety but also reduce the fear of crime, encourage greater use of public spaces, and stronger social ties. CPTED also supports the creation of safer parks, walkable, well-connected commercial corridors, and welcoming public transit stops.

11. Youth Employment Programs Can Grow the Economy, Expand Opportunity, and Improve Public Safety–Youth Employment Programs Can Grow the Economy, Expand Opportunity, and Improve Public Safety—United States Joint Economic Committee.

To address root causes of many offenses and to reduce crime in Monroe County's communities, mental health services can be incorporated into the crime prevention approach. Research shows that individuals with untreated mental health conditions are disproportionately represented in arrests and incarceration, yet traditional enforcement alone does little to reduce recidivism (Hirschtritt and Binder, 2017). Therefore, integrating mental health services and pairing mental health professionals with law enforcement during crisis calls can not only help de-escalate the situation and prevent crime but also offer appropriate help to those who need it. By prioritizing mental health services, policymakers can reduce repeated offenses, lower criminal justice costs, and strengthen long-term public safety outcomes. The County can support cross-sector collaboration, funding for community-based care, and expand data-sharing between health and justice systems to make these approaches effective.

In tandem with these approaches, Monroe County's collaborative public safety infrastructure plays a pivotal role in supporting crime prevention efforts. The Monroe County Law Enforcement Council meets monthly, bringing together law enforcement leadership from local, county, state, and federal jurisdictions, to share intelligence, assess emerging threats, and align strategies. This ongoing coordination strengthens the County's ability to respond effectively to public safety challenges and prioritize prevention, rather than reaction. Additionally, the Monroe Crime Analysis Center, operated by the New York State Division of Criminal Justice Services, provides data-driven insights that inform crime trends, hotspot identification, and aid in targeted interventions, if need be. Together, these efforts reflect a broader shift toward proactive, holistic crime prevention, one that recognizes the intertwined roles of economic opportunity, human-friendly design, and collaborative governance in building safer communities for all residents.

4.4.2 Emergency Response

The County Department of Public Safety is continually working to improve technology and services for the benefit of the public and community. Communication is paramount for the accurate, timely, and secure transmission of information during an emergency situation. In today's world, emergency response technology must be current and compatible to enable effective communication across disciplines and reach vulnerable populations.

Monroe County's Office of Emergency Management (OEM) is the main contact for all government and non-government agencies involved in emergency response and management. It coordinates disaster relief efforts before, during, and after natural or man-made crises. Their prevention and mitigation strategies include developing contingency plans for emergency response, providing public information, and offering education through workshops and training. Guided by the Federal Emergency Management Agency (FEMA), OEM develops and continually reviews the Monroe County Radiological Emergency Preparedness Plan (MCREPP). OEM also assists towns and villages in preparing their emergency response plans, as needed. It is vital to ensure that outreach and communication about emergency mitigation protocols and recovery efforts reach all municipalities, especially in hard-to-access communities, so they have the proper knowledge to stay prepared.

Emergency preparedness and public safety initiatives should continue to prioritize equitable access to information by integrating accessibility-by-design practices throughout planning, communication, and response efforts. Providing emergency notifications and preparedness resources in accessible formats, including visual alerts, captioning, interpretation services, and other communication accommodations, helps ensure that residents of all abilities can receive critical information, participate in preparedness activities, and effectively respond during emergencies.

The Monroe County Radio Center, located at Cobb's Hill Park, is responsible for planning, operating, and maintaining radio and microwave communication systems used by all Monroe County Departments, the City of Rochester, various municipal law enforcement agencies, and some fire and EMS departments across the County. The Public Safety Radio serves more than 700 police mobile radios, over 1,800 police portable radios, and includes a county-wide paging system. The dedicated radio team is also responsible for maintaining 63 remote communication sites, including locations such as the Greater Rochester International Airport Communications Center, the Monroe County Emergency Operations Center (EOC), and all city and county parks.

Monroe County has received a Public Safety Interoperable Communications (PSIC) grant to provide equipment that will connect the five surrounding counties, NYS Emergency Management Office, and New York State Police with Monroe County and each other. When systems are interoperable , police and firefighters responding to an incident can communicate to coordinate their efforts. Interoperability also allows Monroe County emergency response agencies to work together effectively during disasters and can enable emergency personnel to maximize resources when planning for major events and disaster recovery efforts. The County can continue to invest in emergency response teams and technologies, prioritizing the most effective ways to meet the current population's needs.

4.4.3 Public Safety Workforce Development and Recruitment

The Monroe County Public Safety Training Facility (PSTF) in Rochester, NY, exemplifies a national model of government cooperation that benefits the public in Monroe County. Its primary mission is to train the future public safety workforce using the latest available technology. The facility is a partnership between Monroe County, the City of Rochester, and Monroe Community College. It features state-of-the-art classrooms and simulators for medical, law enforcement, and firefighting responders, ensuring emergency personnel are adequately trained. The training provided helps standardize law enforcement, emergency medical, and firefighting procedures. Specialized facilities and full-scale, computer-controlled simulators allow students and professionals to learn how to operate cutting-edge technology and manage resources during emergencies. Since opening in 2001, the facility has outgrown its space and has grown into a regional training hub used by various county departments. Over 34 fire departments, 18 EMS agencies, 9 law enforcement agencies, and different levels of government utilize the County's training facility, which often operates at or near full capacity. To meet the growing workforce development needs of emergency response services, there is an increasing need to expand the current facility or secure additional training sites.

Countywide EMS Training Program Led by Pittsford Volunteer Ambulance

This ARPA-funded program aims to address an ongoing shortage of emergency medical personnel by training emergency medical technicians (EMTs) and paramedics. Pittsford Volunteer Ambulance (PVA), in partnership with Monroe Community College, American Medical Response, and Monroe Ambulance, will provide training for up to 256 qualified EMT candidates and up to 50 qualified paramedic candidates. Individuals who successfully complete the program will be qualified to work for any EMS provider.



Meanwhile, staffing shortages continue in public-facing roles, as trauma exposure, low pay, tough working conditions, and dealing with negative perceptions are just some of the challenges public safety workers face. For instance, the number of certified emergency medical technicians and paramedics has dropped in the past five years, a decline sparked by the COVID-19 pandemic. In 2023, the Monroe County Sheriff's Office received funding that enabled it to swear in an additional 41 members to enhance its patrol capabilities (Monroe County, 2023c). In 2024, Monroe County approved a new collective bargaining agreement with the Monroe County Sheriff Police Benevolent Association (PBA), including annual pay increases, an advantageous health care plan, and other benefits. In September 2025, Monroe County secured a three-year collective bargaining agreement with the County's Deputy Sheriff Association (DSA), ensuring annual wage increases for jail employees. Investments and agreements like these further support public safety workforce retention in the County.

Monroe County Sheriff Police Benevolent Association (PBA) is the union representing the professionals of the Police Bureau of the Monroe County Sheriff's Office.

Further investments in workforce development and recruitment are crucial for strengthening public safety infrastructure and supporting broader community safety goals. To address current and future needs, especially as natural disasters linked to climate change are expected to rise and the population continues to age, commitment to developing and building a sustainable public safety workforce is critical. A more diverse, skilled pipeline of public safety professionals can be developed through initiatives like the Public Safety Internship Program, funded under the Justice, Equity,

The County's Deputy Sheriff Association (DSA) is the largest of the Sheriff Unions, representing 465 members who provide critical services in the Monroe County Jail and are a cornerstone of the County's public safety system.

Diversion, and Inclusion (JEDI) framework. This program is a vital strategy for engaging younger generations and broadening the future workforce in law enforcement, fire services, EMS, and related roles. All these efforts aim not only to stabilize and improve public safety staffing but also to enhance community well-being and resilience through stronger, more responsive systems.

Additionally, Strategic Investments in comprehensive career development programs designed to diversify the public safety workforce, offer continuous learning, promote cross-sector collaboration, and strengthen key skills in areas such as crisis management, mental health response, and community engagement will be beneficial. Building these programs requires bringing together partners from all levels of government—local, state, and federal—as well as higher education institutions and community- and faith-based organizations. By encouraging collaboration among stakeholders, the County can help create a staff onboarding curriculum that not only equips new recruits with modern, multidisciplinary training but also offers ongoing professional development opportunities for current staff members. This could include joint training exercises, specialized certifications, and cross-agency exchanges that prepare professionals to address complex public safety challenges more equitably and effectively. The effort to build a more diverse, adaptable, and community-focused public safety workforce will better position the community to meet changing public safety needs.

4.5 Goals and Strategies





Reduce Violent and Property Crime County-Wide

1. Continue to implement evidence-based violence interruption programs in high-risk neighborhoods, partnering with community organizations and trained intervention specialists.
2. Expand mental health co-responder teams that pair law enforcement with mental health professionals for crisis calls.
3. Support crime reduction by investing in job creation, workforce development, and economic revitalization in high-need communities.
4. Apply Crime Prevention Through Environmental Design (CPTED) principles, such as increasing visibility, promoting ownership of space through signage or landscaping, encouraging positive use of space, and keeping areas clean and in good repair.

Enhance Emergency Response Capabilities and Reduce Response Times

1. Enhance EMS system capacity by supporting local agencies in addressing workforce gaps through recruitment, training, and retention strategies.
2. Continue to invest in Public Safety facilities and infrastructure to meet changing needs and technology.
3. Make necessary technology investments and consolidations within the County-wide integrated emergency management system connecting police, fire, EMS, and emergency management agencies.





Build Stronger Police-Community Relationships

1. Continue to develop relationships between public safety officials and community- and faith-based organizations to implement safety goals and programs.
2. Develop a comprehensive community policing strategy that fosters trust, accountability, and collaboration between law enforcement and the communities.
3. Establish transparency initiatives that provide regular updates, open data platforms, and community feedback loops.
4. Ensure that law enforcement's community engagement efforts involve diverse communication channels, including the use of social media, accessible public education initiatives, and inclusive outreach programs.

Strengthen Disaster Preparedness and Community Resilience

1. Enhance outreach to individuals and families, particularly those in vulnerable and hard-to-reach communities, with the knowledge and resources needed to effectively respond to and recover from crises.
2. Explore creating a Community Education Team to work with and train community- and faith-based organizations to deliver disaster preparedness education, including developing skills and resources needed to respond to likely natural and human-made disasters.
3. Employ new state-of-the-art alerting options to allow better communication of pending or occurring emergencies that are timely and in multiple languages.
4. Continue to develop regular updates to the County's Hazard Mitigation Plan based on evolving environmental conditions and innovations in technology to improve community resilience in times of crisis.
5. Incorporate accessibility-by-design principles into county and local emergency communications, including visual alerts, captioning, interpretation, and other communication access features to better serve residents with diverse abilities and communication needs.



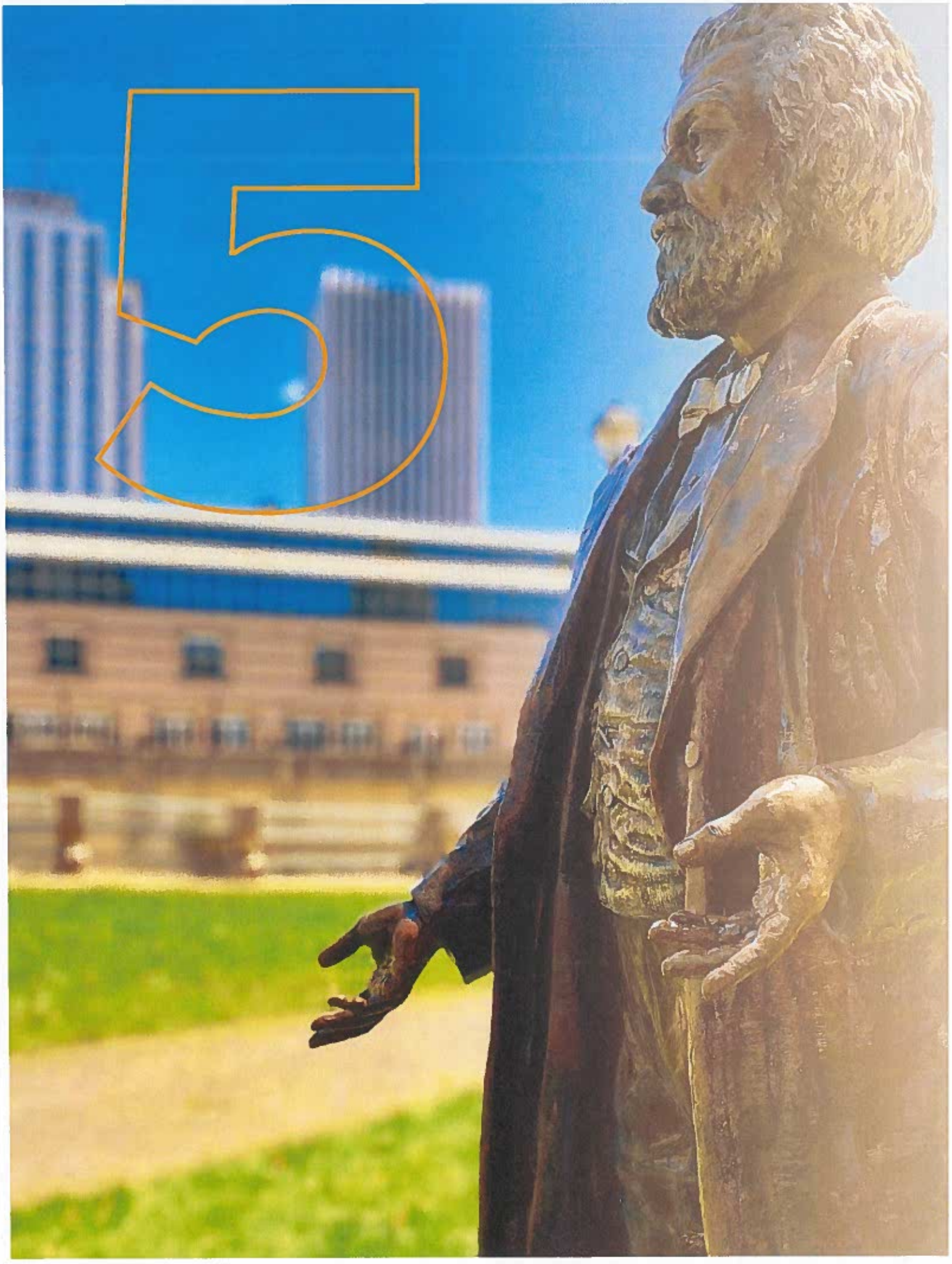


Build a Diverse and Talented Public Safety Workforce

1. Implement a career development program that diversifies the public safety workforce and enhances skill sets across areas such as crisis management, community engagement, and traditional enforcement.
2. Prioritize healthy staffing levels and relationships so that work can be performed in compliance with specific standards and regulations, including thoughtful onboarding and embracing cultural differences.

Significantly Reduce Traffic Fatalities and Serious Injuries Across the County

1. Continue to invest in and strengthen public education campaigns for all road users, with emphasis on the consequences of speeding, impaired, and distracted driving.
2. Expand law enforcement coordination on high-risk corridors to address dangerous driving behaviors and improve roadway safety outcomes.
3. Support and invest in the multi-agency Community Traffic Safety Team (CTST) to coordinate cross-sector efforts between public safety, transportation, and planning departments.
4. Explore and implement evidence-based technologies to support traffic enforcement and improve roadway safety, such as automated monitoring or other technology-based systems, with an emphasis on transparency, community engagement, and data driven decision-making.
5. Integrate advance traffic technology and data analytics to identify systemic risks and implement proactive safety treatments to protect vulnerable road users.
6. Adopt Vision Zero as a strategic framework to align policy, planning, infrastructure, programs, and operations for safer streets.


5

5 Plan Implementation

5.1 Implementation Matrix

This Implementation Matrix provides a framework for the County to guide, monitor, and track progress in advancing the Plan's recommendations over time. It is intended to serve as a living tool that supports coordination among County departments and partners, helps identify accomplishments and opportunities for continued action, and provides a basis for measuring progress toward the Plan's goals. Implementation progress will be reviewed annually, with a comprehensive assessment conducted every five years to reflect accomplishments, changing conditions, emerging priorities, and new opportunities.



GOALS

Specific action items that should be executed in order to accomplish the broad strategic visions that achieve long-term objectives.



STRATEGIES

More specific steps on how to achieve the goals given the available funding sources and urgency of the goal.



COUNTY ROLES

The County actively works to implement plan strategies and achieve plan goals through the life of the plan and updates County and Community Leaders the status of implementation.



COMMUNITY STAKEHOLDERS

Partners who may work collaboratively with Monroe County to implement goals and strategies or pursue independent efforts where interests and objectives align.

County and Stakeholder Roles

Implementation of the County comprehensive plan will require collaboration and shared commitment from the entire community. Depending on the strategy, the County and community stakeholders—the County, municipalities, community organizations, businesses, and individuals may assume different roles. The roles defined below outline the various ways each party can actively support and advance the Plan's goals.

Convene

The County and community stakeholders exercise their ability to bring together diverse groups of people and stakeholders to work on solving mutual problems and achieving goals identified in this plan. Because issues and goals are often interconnected and complex, collaboration among multiple partners and the sharing of resources and knowledge are necessary.

Advocate

The County and community stakeholders can advocate for interests and priorities to regional, state, and federal entities. This may include promoting policies, programs, and initiatives that support the goals of the Comprehensive Plan, raising awareness of local needs, and helping to secure resources or regulatory support for implementation.

Establish Policy and Guidance

The County and community stakeholders can establish policies that guide decision-making and the allocation of resources. This includes developing plans, such as this Comprehensive Plan, as well as policies at municipalities and businesses that support Plan Forward goals.

Build Capacity

The County and community stakeholders can build capacity that strengthens the skills, knowledge, and resources of municipalities, organizations, and individuals to achieve plan goals.

Invest

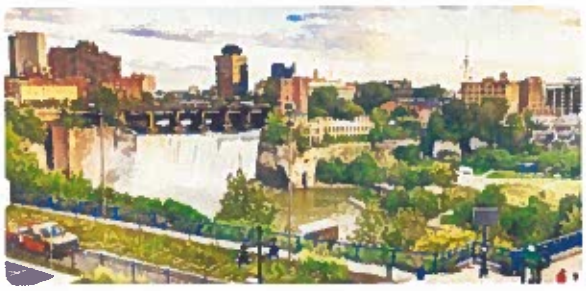
The County and community stakeholders may allocate funding to support projects and initiatives that align with the goals of this Comprehensive Plan. Funding may come from a variety of sources, including federal, state, local, private, or philanthropic programs.

Market

The County and community stakeholders can engage in efforts and initiatives to attract and retain residents and business in Monroe County. The role of marketer includes understanding, communicating, and enhancing the factors that contribute to local quality of life and help make the County a more appealing place to live, work, invest in business, and raise a family.

The following matrix lists the goals, strategies, and the community stakeholders that can play a role in advancing this Plan's recommendations across Monroe County. Community Stakeholders may work collaboratively with Monroe County to implement goals and strategies outlined in this document, or pursue independent efforts where interests and objectives align.

This implementation matrix should be reviewed and updated on a regular basis to ensure its continued relevance and effectiveness. Ongoing monitoring, performance evaluation, and reporting will support progress tracking and inform necessary adjustments. As community needs,



economic conditions, regulatory environments, and opportunities evolve over time, flexibility in implementation will be essential while maintaining consistency with the Plan's long-term vision and guiding principles.

PILLAR 1

Economic and Workforce Development

STRATEGIES	County	Municipalities	Community Organizations	Businesses	Individuals
GOAL Develop the Workforce and Support Entrepreneurship					
1 Support small business development and entrepreneurship with funding, technical assistance, and marketing.	✓	✓	✓	✓	
2 Assist startups, small-to-midsize, and minority-owned businesses in accessing resources for innovation and entrepreneurship.	✓		✓	✓	
3 Provide resources and education for young people to explore a full range of career pathways and education requirements, from skilled trades to higher education.	✓		✓		
4 Provide career transition support to individuals interested in upskilling or reskilling due to industrial shifts or personal goals.			✓	✓	✓
5 Provide competitive incentives or other resources to employers and skilled workers to support career advancement and retention of top talent.	✓	✓	✓		
6 Reduce key barriers to employment such as childcare, housing, and transportation to create more opportunities for stable and sustainable employment.	✓	✓	✓	✓	
7 Enhance collaboration between universities and the workforce development ecosystem to improve alignment with employer needs, close workforce gaps, and measure success.	✓	✓	✓	✓	
8 Develop targeted initiatives to address current and future workforce needs in the skilled trades by increasing apprenticeship opportunities, strengthening partnerships with trade schools and unions, and promoting career awareness programs in K-12 education.		✓	✓	✓	
9 Support employer-led training programs and workforce re-entry initiatives to grow and sustain a robust pipeline of skilled workers for the region's development needs.	✓	✓	✓	✓	

PILLAR 1

Economic and Workforce Development

STRATEGIES	County	Municipalities	Community Organizations	Businesses	Individuals
10 Support the development of specialized training programs, internships, and apprenticeships that equip individuals with the skills needed for high-demand roles in automation, robotics, photonics, and other cutting-edge industries. Promote awareness and access to these career opportunities to ensure a steady flow of talent into the region's growing technology sectors.	✓		✓	✓	✓
11 Integrate accessibility into workforce initiatives to expand talent participation, support inclusive employment practices, and strengthen Monroe County's ability to attract, retain, and engage a diverse workforce.	✓	✓	✓	✓	
12 Partner with educational institutions, employers, and community organizations to expand language-learning opportunities, including American Sign Language (ASL), to strengthen workforce development and economic competitiveness.	✓	✓	✓	✓	
GOAL Create Places that Enhance Quality of Life					
1 Expand recreation options and connections to parks and amenities.	✓	✓	✓	✓	
2 Foster the development of vibrant community centers that incorporate mixed-use development and greater residential density where infrastructure supports.	✓	✓			
3 Promote walkability and development of pedestrian-friendly areas.	✓	✓			
4 Encourage the growth of local businesses, farmers' markets, and artisan shops that reflect the community's identity, boost the local economy, and foster unique cultural experiences.	✓	✓	✓	✓	✓
5 Create and maintain public spaces that are accessible, safe, and inclusive for all members of the community.	✓	✓			
6 Leverage the County's vibrant arts, cultural, and public enrichment programs, including festivals, performances, and local museums, to enhance quality of life and attract both residents and visitors.	✓	✓	✓	✓	

PILLAR 1

Economic and Workforce Development

STRATEGIES	County	Municipalities	Community Organizations	Businesses	Individuals
7 Prioritize investment in arts infrastructure and community partnerships to further solidify Monroe County as a regional hub for creative expression and cultural engagement.	✓	✓	✓		
8 Invest in tourism assets, projects, and organizations that promote Monroe County's unique attractions, from natural landmarks to cultural and historical sites.	✓	✓	✓		
9 Enhance multimodal access, including train, bus, roadway, and air, by partnering with state and regional stakeholders to attract additional services that expand mobility for residents across the region.	✓	✓	✓		
10 Promote accessibility into all public services offered by county and municipal providers, including communications, transportation services, public spaces, events, etc. to ensure residents of all abilities can fully participate in and contribute to community life.	✓	✓			
11 Make public spaces and parks more inclusive and welcoming to members of the community who have physical or cognitive disabilities.	✓	✓			
GOAL Enhance Housing Access and Quality					
1 Promote diverse housing options to address gaps in the housing market, including single-family homes, rental units, workforce housing, and adaptable housing types that accommodate various household needs.	✓	✓	✓		
2 Convene stakeholders and industry professionals to work on developing creative solutions to the housing shortage in Monroe County.	✓	✓	✓	✓	
3 Improve the quality of existing homes and reduce disinvestment by providing additional incentives or grants for repairs and upgrades.	✓	✓	✓		
4 Develop strategies to increase the availability of various housing options to accommodate the diverse needs of the workforce.	✓	✓	✓		

PILLAR 1

Economic and Workforce Development

STRATEGIES	County	Municipalities	Community Organizations	Businesses	Individuals
5 Regularly assess housing needs and market dynamics to ensure that housing policies adapt to changing conditions and continue to meet community demands.	✓	✓	✓		
6 Leverage on-going major capital projects to expand homeownership opportunities and support active transportation-oriented communities.	✓	✓	✓		
GOAL Strengthen Existing and Growing Economic Sectors While Investing in Emerging Industries					
1 Expand retention and recruitment efforts to strengthen local businesses involved in the supply chains of key industries, such as manufacturing, logistics, energy, and healthcare.	✓	✓	✓	✓	
2 Support business retention and recruitment efforts related to growth industries where Monroe County maintains competitive advantages, such as Optics, Photonics, Imaging, and Lasers (OPIL), such as photonics, semiconductors, and supply chain and logistics.	✓	✓	✓	✓	
3 Encourage partnerships between businesses and local colleges, universities, and trade schools to align curricula with industry needs and foster a pipeline of skilled workers.	✓		✓	✓	
4 Invest in agricultural production, processing, and marketing of industries such as agritourism, farmers' markets, farm-to-table programs, breweries, and cideries to enhance the impact of local agriculture on the economy and food system.	✓	✓	✓	✓	
5 Promote Monroe County's Foreign Trade Zone (FTZ) as a resource for companies engaged in import/ export activities. Collaborate with key stakeholders to increase awareness and utilization of the FTZ, driving economic growth through enhanced global trade opportunities.	✓	✓		✓	

PILLAR 1

Economic and Workforce Development

STRATEGIES	County	Municipalities	Community Organizations	Businesses	Individuals
GOAL Identify and Prepare Suitable Sites for Development					
1 Organize and facilitate a task force to study available sites, including brownfields or underutilized sites that strategically support both the County's economic development and climate action plan goals agenda. Prioritize the redevelopment of brownfields and prepare them for future development.	✓	✓	✓		
2 Identify and prioritize resources to facilitate the development of sites suitable for emerging and growing sectors.	✓	✓			
3 Work with State partners and local stakeholders to address the lack of power capacity at potential development sites in the County. Prioritize the development of renewable energy generation, battery storage facilities, and community geothermal networks.	✓	✓	✓	✓	
4 Clearly identify site development opportunities and pursue grant funding—including the FAST NY Shovel-Ready Grant Program and the Promote Opportunity with Electric Readiness for Underdeveloped Properties (POWER UP) Fund—with New York State and other entities as available.	✓	✓	✓		

PILLAR 2
Infrastructure

STRATEGIES	County	Municipalities	Community Organizations	Businesses	Individuals
GOAL Invest In 21st-Century Infrastructure					
1 Reduce the environmental impact of county operations and facilities by improving building efficiency, electrifying vehicle fleets, and providing EV and active transportation infrastructure at county-owned properties.	✓				
2 Support municipalities' participation in state programs that promote clean energy and climate-smart practices and provide resources that help municipalities follow best practices for renewable energy.	✓	✓	✓		
3 Support the expansion and modernization of the EV charging network to meet growing electric vehicle demand, leveraging state and federal funding programs and public-private partnerships.	✓	✓	✓	✓	
4 Support efforts to expand high-speed internet access and affordability, especially in rural areas, and aid residents in accessing digital literacy courses.	✓	✓	✓	✓	
5 Continue to maintain and build connections to and between parks in the Monroe County Park system.	✓	✓			
6 Invest in innovative and integrated technologies to support a safe, efficient, and connected multimodal transportation system that meets the diverse mobility needs of all users.	✓	✓	✓	✓	✓
7 Develop and sustain a diverse, skilled workforce across County departments to support the adoption and scaling of innovative technologies that improve safety, efficiency, and cost-effectiveness.	✓	✓	✓		

PILLAR 2
Infrastructure

STRATEGIES	County	Municipalities	Community Organizations	Businesses	Individuals
GOAL Protect Water and Natural Resources					
1 Take a proactive approach to establishing a resilient water infrastructure system capable of adapting to changing climate and community needs.	✓	✓			
2 Improve water quality and mitigate the impacts of flooding and other increasing climate-related challenges, such as extreme precipitation events and urban runoff.	✓	✓	✓	✓	
3 Work with Monroe County Water Authority (MCWA) and City Water Bureau to protect drinking water sources and infrastructure through comprehensive source water protection, pollution control, and infrastructure maintenance strategies.	✓	✓	✓	✓	
4 Study the benefits of consolidating the four Monroe County Pure Water (MCPW) districts, and explore renewable energy opportunities in the MCPW collection and treatment infrastructure and activities.	✓				
5 Protect and strengthen ecological resilience by collaborating with municipalities, state agencies, conservation organizations, and private landowners to conserve natural habitats, enhance habitat connectivity, and prevent, monitor, and manage invasive species.	✓	✓	✓	✓	✓
6 Identify priority lands for protection, ecological restoration, and green infrastructure development; apply sustainable property maintenance practices; and expand tree canopy to reduce heat impacts.	✓	✓	✓		
GOAL Improve Waste Management and Recycling Practices					
1 Increase public awareness and participation in waste reduction programs, such as recycling and reuse, while exploring opportunities to expand services and improve accessibility.	✓	✓	✓	✓	✓
2 Evolve recycling and reuse programs as processes and markets advance while partnering with private sector companies to identify opportunities and revenue streams from diverted and recyclable waste.	✓		✓	✓	

PILLAR 2
Infrastructure

STRATEGIES	County	Municipalities	Community Organizations	Businesses	Individuals
3 Update and expand the County's Local Solid Waste Management Plan to support waste reduction and recycling, incorporate organics diversion opportunities, and reduce greenhouse gas emissions.	✓				
GOAL Invest in and Diversify the Transportation System					
1 Adopt a state of good repair approach and invest in critical transportation connections that support economic growth and the needs of users and communities.	✓	✓			
2 Promote transit-oriented design by collaborating with RTS, transportation providers, and municipalities to enhance public transit efficiency and accessibility while encouraging mixed-use development and zoning policies that support higher-density, walkable communities near transit hubs.	✓	✓	✓		
3 Invest in programs and projects that enhance safety for all road users, including pedestrians, cyclists, and drivers.	✓	✓	✓		
4 Implement Smart Traffic Management Systems to optimize traffic flow, reduce congestion, and enhance road safety.	✓	✓			
5 Work with municipalities to adopt and implement complete street principles and policies on local roadways.	✓	✓	✓		
6 Continue to modernize Frederick Douglass Greater Rochester International Airport and improve operational efficiency to support growing freight logistic demand and regional economic competitiveness.	✓				
7 Ensure the ongoing maintenance and enhancement of the County's existing infrastructure and identify new infrastructure projects to meet future needs.	✓	✓			

PILLAR 3
Public Health

STRATEGIES	County	Municipalities	Community Organizations	Businesses	Individuals
GOAL Provide Integrated Mental and Physical Care to Residents in Need					
1 Improve the accessibility and delivery of health and mental health services in underserved areas by evaluating the needs of residents, identifying barriers to access, and developing strategies to address the challenges.	✓	✓	✓	✓	
2 Work with community partners on addressing preventable healthcare issues, including identifying root causes and developing targeted interventions.	✓	✓	✓		
3 Support preventative services to reduce maternal and infant mortality and improve maternal health outcomes.	✓	✓	✓		
4 Work to prevent and address issues related to social isolation.	✓	✓	✓		✓
5 Support a healthy lifestyle by investing in open space, trails, water access, and other recreation amenities near population centers that promote physical activity and mental well-being.	✓	✓	✓	✓	✓
6 Support the development and expansion of culturally and linguistically responsive behavioral and mental health services that address the needs of diverse populations, including but not limited to deaf, deafblind, and hard of hearing individuals, through accessible communication, workforce development, provider training, and partnerships with community organizations and educational institutions.	✓	✓	✓	✓	
GOAL Prevent Substance Use and Subsequent Substance Use Disorders					
1 Support and expand programs that provide drug abuse prevention, education, treatment, and recovery services.	✓	✓	✓		
2 Ensure that county services for chemical dependency treatment are accessible to all residents, including those who face cultural, linguistic, and other barriers.	✓	✓	✓		

PILLAR 3
Public Health

STRATEGIES	County	Municipalities	Community Organizations	Businesses	Individuals
GOAL Promote Housing Stability and Reduce Homelessness					
1 Expand collaboration between Monroe County, Municipalities, and Not-for-Profits, and other community partners working to expand homelessness prevention efforts and to increase supportive and transitional housing options across the county.	✓	✓	✓		
2 Support a range of innovative housing options that meet a variety of user needs and better integrate housing with behavioral health, employment, and healthcare services.	✓	✓	✓	✓	
GOAL Mitigate Environmental Health Hazards					
1 Address water-related hazards such as harmful algal blooms, legacy industrial contamination in the Genesee River and Lake Ontario Shoreline, and combined sewer overflow systems.	✓	✓	✓	✓	
2 Improve air quality by promoting the reduction of industrial emissions, supporting clean energy in transportation systems, and monitoring elevated ozone levels during summer months.	✓	✓	✓	✓	
3 Provide resources to mitigate building health hazards, particularly in older housing and school buildings, including mold, soil contamination, lead in drinking water, lead paint, and deteriorating structures and infrastructure.	✓	✓	✓		
4 Help farm operations adopt environmentally sustainable practices, such as reducing pesticide and fertilizer runoff and modernizing operations.	✓	✓	✓	✓	✓

PILLAR 3
Public Health

STRATEGIES	County	Municipalities	Community Organizations	Businesses	Individuals
GOAL Support Policies and Programs that Improve Access to Nutritious Foods					
1 Enhance and expand meal programs, collaborating with local organizations to support access to healthy, affordable foods for community members who are vulnerable, food insecure, or who face economic challenges.	✓	✓	✓		
2 Engage in dialogue with the ROC Food Policy Council and partner organizations about expanding regional food system coordination.	✓	✓	✓		
3 Identify and support all food distribution networks in the County to reach people across municipalities.	✓	✓	✓		
4 Support a regional food system plan to improve access to healthy, affordable food and reduce disparities in food access.	✓	✓	✓	✓	
GOAL Foster an Age-Friendly Monroe County and Support Environments for Older Adults					
1 Provide information and guidance to navigate challenging aging issues and concerns.	✓	✓	✓		
2 Continue the Office of Aging and Aging Alliance's prioritization of programming that addresses improved economic security for older adults.	✓	✓	✓		

PILLAR 4
Public Safety

STRATEGIES	County	Municipalities	Community Organizations	Businesses	Individuals
GOAL Reduce Violent and Property Crime County-Wide					
1 Continue to implement evidence-based violence interruption programs in high-risk neighborhoods, partnering with community organizations and trained intervention specialists.	✓	✓	✓		
2 Expand mental health co-responder teams that pair law enforcement with mental health professionals for crisis calls.	✓	✓	✓		
3 Support crime reduction by investing in job creation, workforce development, and economic revitalization in high-need communities.	✓	✓	✓	✓	
4 Apply Crime Prevention Through Environmental Design (CPTED) principles, such as increasing visibility, promoting ownership of space through signage or landscaping, encouraging positive use of space, and keeping areas clean and in good repair.	✓	✓	✓	✓	✓
GOAL Enhance Emergency Response Capabilities and Reduce Response Times					
1 Enhance EMS system capacity by supporting local agencies in addressing workforce gaps through recruitment, training, and retention strategies.	✓	✓			
2 Continue to invest in Public Safety facilities and infrastructure to meet changing needs and technology.	✓	✓			
3 Make necessary technology investments and consolidations within the County-wide integrated emergency management system connecting police, fire, EMS, and emergency management agencies.	✓	✓			

PILLAR 4
Public Safety

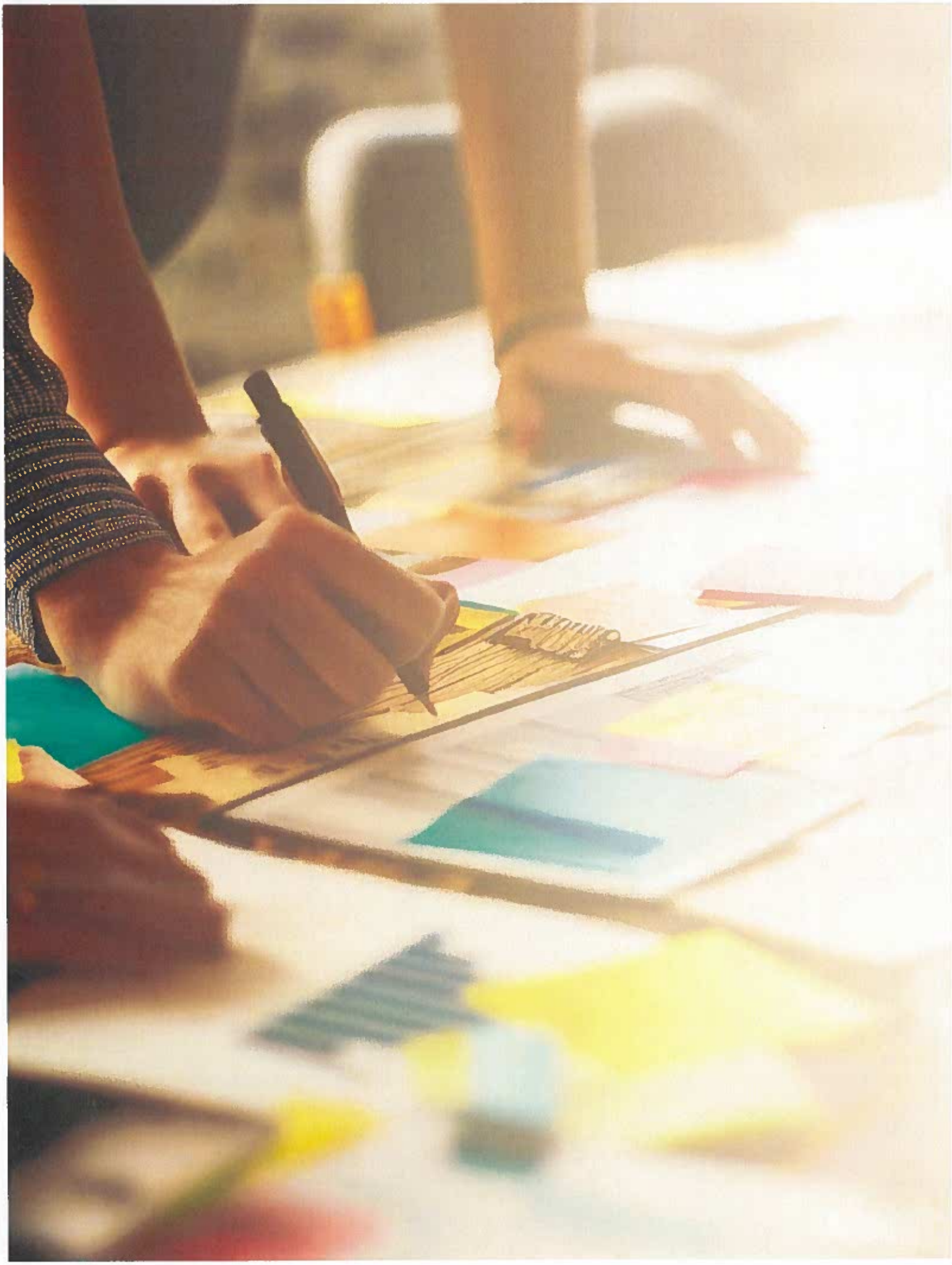
STRATEGIES	County	Municipalities	Community Organizations	Businesses	Individuals
GOAL Build Stronger Police-Community Relationships					
1 Continue to develop relationships between public safety officials and community- and faith-based organizations to implement safety goals and programs.	✓	✓	✓		✓
2 Develop a comprehensive community policing strategy that fosters trust, accountability, and collaboration between law enforcement and the communities.	✓	✓	✓		✓
3 Establish transparency initiatives that provide regular updates, open data platforms, and community feedback loops.	✓	✓			
4 Ensure that law enforcement's community engagement efforts involve diverse communication channels, including the use of social media, accessible public education initiatives, and inclusive outreach programs.	✓	✓	✓		

PILLAR 4
Public Safety

STRATEGIES	County	Municipalities	Community Organizations	Businesses	Individuals
GOAL Strengthen Disaster Preparedness and Community Resilience					
1 Enhance outreach to individuals and families, particularly those in vulnerable and hard-to-reach communities, with the knowledge and resources needed to effectively respond to and recover from crises.	✓	✓	✓		✓
2 Explore creating a Community Education Team to work with and train community- and faith-based organizations to deliver disaster preparedness education, including developing skills and resources needed to respond to likely natural and human-made disasters.	✓	✓	✓		✓
3 Employ new state-of-the-art alerting options to allow better communication of pending or occurring emergencies that are timely and in multiple languages.	✓	✓			
4 Continue to develop regular updates to the County's Hazard Mitigation Plan based on evolving environmental conditions and innovations in technology to improve community resilience in times of crisis.	✓				
5 Incorporate accessibility-by-design principles into county and local emergency communications, including visual alerts, captioning, interpretation, and other communication access features to better serve residents with diverse abilities and communication needs.	✓	✓	✓	✓	
GOAL Build a Diverse and Talented Public Safety Workforce					
1 Implement a career development program that diversifies the public safety workforce and enhances skill sets across areas such as crisis management, community engagement, and traditional enforcement.	✓	✓	✓		
2 Prioritize healthy staffing levels and relationships so that work can be performed in compliance with specific standards and regulations, including thoughtful onboarding and embracing cultural differences.	✓	✓	✓	✓	✓

PILLAR 4
Public Safety

STRATEGIES	County	Municipalities	Community Organizations	Businesses	Individuals
GOAL Significantly Reduce Traffic Fatalities and Serious Injuries Across the County					
1 Continue to invest in and strengthen public education campaigns for all road users, with emphasis on the consequences of speeding, impaired, and distracted driving.	✓	✓	✓		✓
2 Expand law enforcement coordination on high-risk corridors to address dangerous driving behaviors and improve roadway safety outcomes.	✓	✓			
3 Support and invest in the multi-agency Community Traffic Safety Team (CTST) to coordinate cross-sector efforts between public safety, transportation, and planning departments.	✓	✓	✓		
4 Explore and implement evidence-based technologies to support traffic law enforcement and improve roadway safety, such as automated monitoring or other technology-based systems, with an emphasis on transparency, community engagement, and data driven decision-making.	✓	✓			
5 Integrate advance traffic technology and data analytics to identify systemic risks and implement proactive safety treatments to protect vulnerable road users.	✓	✓	✓		
6 Adopt Vision Zero as a strategic framework to align policy, planning, infrastructure, programs, and operations for safer streets.	✓	✓			✓



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COUNTY OF MONROE
STATE OF NEW YORK

Office of **the County Executive**

Monroe County, New York

Adam J. Bello
County Executive

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Committee Assignment
HUMAN SERVICES -L
WAYS & MEANS

November 6, 2026

To The Honorable
Monroe County Legislature
407 County Office Building
Rochester, New York 14614

Subject: Acceptance of Additional Funding from the New York State Office of Mental Health; Amend Resolution 165 of 2026 Amending the Contract with Compeer, Inc. in 2026 for the Monroe County Office of Mental Health

Honorable Legislators:

I recommend that Your Honorable Body accept additional funding from the New York State Office of Mental Health in the amount of $2,025, and amend Resolution 165 of 2026 to increase the contract with Compeer, Inc. for the provision of comprehensive peer-to-peer mentoring services for the PFC Dwyer Peer-to-Peer Support Program from an amount not to exceed $100,000 to an amount not to exceed $102,025 for the period of January 1, 2026 through December 31, 2026.

This additional funding will be used as designated by the New York State Office of Mental for Targeted Inflationary Increases (TII).

Please refer to the attached Purchase of Services Information Form for disclosure of information required pursuant to Resolution 223 of 2007, as amended by Resolution 11 of 2008.

The specific legislative actions required are:

1. Amend Resolution 165 of 2026, to accept an additional $2,025 grant from, and to authorize the County Executive, or his designee, to execute a contract and any amendments thereto, with the New York State Office of Mental Health for the PFC Dwyer Peer-to-Peer Support Program bringing the total program award to $205,033 for the period of January 1, 2026, through December 31, 2026.

2. Amend the 2026 operating budget of the Department of Human Services by appropriating the sum of $2,025 into general fund 1001, cost center 570201, Mental Health Services, program PG57001, Mental Health Services.

3. Amend Resolution 165 of 2026 to authorize the County Executive, or his designee, to amend and increase the contract with Compeer, Inc. for the provision of comprehensive peer-to-peer mentoring services for the PFC Dwyer Peer-to-Peer Support Program from an amount not to exceed $100,000 to an amount not to exceed $102,025 for the period of January 1, 2026 through December 31, 2026.

4. Authorize the County Executive to appropriate any subsequent years of the grant award in accordance with the grant terms, to reappropriate any unencumbered balances during the grant period according to the grantor requirements, to make any necessary funding modifications within the grant guidelines to meet contractual commitments, and to enter into any amendments to extend the time period of the grant.

5. Should funding of this program be modified or terminated for any reason, the County Executive is hereby authorized to terminate or modify the program and where applicable, to terminate or abolish some or all positions funded under such program. Any termination or abolishment of positions shall be in accordance with the New York State Civil Service Law, and when applicable, the terms of any labor agreement affecting such positions.

This action is a Type II Action pursuant to 6 NYCRR § 617.5(c)(26) ("routine or continuing agency administration and management, not including new programs or major reordering of priorities that may affect the environment") and is not subject to further review under the State Environmental Quality Review Act.

This grant is 100% funded by the New York State Office of Mental Health. No net County support is required in the current Monroe County budget.

This contractor has been reviewed for not-for-profit corporate status and the records in the Office of the Monroe County Treasury have indicated that they do not owe any delinquent Monroe Cunty property taxes.

I recommend that this matter be referred to the appropriate committee(s) for favorable action by Your Honorable Body.

Sincerely,

Adam J. Bello
Monroe County Executive

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Veteran Peer to Peer Support

CONTRACTOR: COMPEER ROCHESTER, INC.

CONTRACT AMOUNT: $102,025.00

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): Vendor offers a program for veterans struggling with post-traumatic stress disorder, traumatic brain injury, and readjustment to civilian life following military service. Peers in this program provide vet to vet connections through transportation, sports, and recreation. Opportunities for Veterans to engage, network, and form friendships with other Veterans to help re-establish the feeling of camaraderie and build positive mental health as they transition from military service to civilian life.

Vendor's services will include, but not be limited to:
- Peer Mentorship/Buddy-checks
- Outreach to promote above services and activities.
- Group activities: art, bowling, men and women's affinity groups gold, painting & art classes, bowling, men's group, trivia night, bingo, etc.
- Adaptive and traditional sports: horsemanship, disc golf, sailing, kayaking, ski & snow sports, rock climbing, etc.
- Vets Driving Vets medical and non-medical transportation
- Referral and linkages to other Vet-serving agencies and organizations

Vendor's program is operated under the oversight of the MCOMH and the NYS OMH and must comply with all applicable regulations and guidelines.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR:

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Capacity:	n/a	n/a	n/a	
Individuals Served:	n/a	n/a	n/a	
Units of Service:	n/a	n/a	n/a	

2. SELECTED OUTCOME INDICATOR:

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Indicator Value:	n/a	n/a	n/a	

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL:

Office of **the County Executive**

Monroe County, New York

Adam J. Bello
County Executive

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Committee Assignment
HUMAN SERVICES -L
WAYS & MEANS

November 6, 2026

To The Honorable
Monroe County Legislature
407 County Office Building
Rochester, New York 14614

Subject: Acceptance of a Grant from the New York State Office of Mental Health for the PFC Dwyer Veteran Peer-to-Peer Support Program and Authorize a Contract with Compeer, Inc.

Honorable Legislators:

I recommend that Your Honorable Body accept a grant from the New York State Office of Mental Health in the amount of $203,008 for the PFC Dwyer Veteran Peer-to-Peer Support Program for the period of January 1, 2027 through December 31, 2027 and authorize a contract with Compeer, Inc. in the amount of $201,108 to provide comprehensive peer-to-peer services for the period of January 1, 2027 through December 31, 2027, with the option to renew for three (3) additional one-year extensions.

The purpose of this grant is to support the design, implementation, and evaluation of peer-to-peer programs for veterans who are experiencing post-traumatic stress symptoms. The goals of the program are to provide outreach and education regarding available peer-to-peer counseling. It should also encourage family, friends, and community connectedness as well as provide access to suicide prevention/intervention measures. This is the thirteenth year the County has received this grant.

This grant funds our efforts in support of veterans including the contract for the Compeer, Inc for the Compeer Corps Peer Mentoring program. Compeer Inc. will provide an array of services, including one-on-one peer mentoring and group sessions facilitated by peer mentors as consultants; and enhancement of social networking capabilities, virtual meeting spaces and other technological tools designed to help veterans connect with one another remotely.

Please refer to the attached Purchase of Services Information Form for disclosure of information required pursuant to Resolution 223 of 2007 as amended by Resolution 11 of 2008.

The specific legislative actions required are:

1. Authorize the County Executive, or his designee, to accept a $203,008 grant from, and to execute a contract and any amendments thereto, with the New York State Office of Mental Health for the PFC Dwyer Veteran Peer-to-Peer Support Program for the period of January 1, 2027 through December 31, 2027.

2. Authorize the County Executive, or his designee, to execute a contract, and any amendments thereto, with Compeer, Inc., 259 Monroe Avenue, Rochester, New York 14607, to provide comprehensive peer-to-peer mentoring services for the PFC Dwyer Veteran Peer-to-Peer Support Program in an amount not to exceed $201,108 for the period of January 1, 2027 through December 31, 2027.

3. Authorize the County Executive to appropriate any subsequent years of the grant award in accordance with the grant terms, to reappropriate any unencumbered balances during the grant period according to the grantor requirements, to make any necessary funding modifications within the grant guidelines to meet contractual commitments, and to enter into any amendments to extend the time period of the grant.

4. Should funding of these programs be modified or terminated for any reason, the County Executive is hereby authorized to terminate or modify the program(s) and where applicable, to terminate or abolish some or all positions funded under such program(s). Any termination or abolishment of positions shall be in accordance with the New York State Civil Service Law, and when applicable, the terms of any labor agreement affecting such positions.

This action is a Type II Action pursuant to 6 NYCRR § 617.5(c)(26) ("routine or continuing agency administration and management, not including new programs or major reordering of priorities that may affect the environment") and is not subject to further review under the State Environmental Quality Review Act.

Funding for this contract is included in the proposed 2027 operating budget of the Department of Human Services, general fund 1001, cost centers 570101, Mental Health Administration; and 570201, Mental Health Services, program PG570001, Mental Health Services. No net County support is required in the current Monroe County budget.

Compeer, Inc. is a not-for-profit agency and the records in the Office of the Monroe County Treasury have indicated that it does not owe any delinquent Monroe County property taxes.

I recommend that this matter be referred to the appropriate committee(s) for favorable action by Your Honorable Body.

Sincerely,

Adam J. Bello
Monroe County Executive

PURCHASE OF SERVICES INFORMATION FORM
Per Resolution No. 11 of 2008

Authorize Professional Service Contracts for the Monroe County Office of Mental Health

PROGRAM: Veterans Peer to Peer

CONTRACTOR: Compeer

CONTRACT AMOUNT $201,108

PRIMARY OBJECTIVE(S) / DELIVERABLE(S): Compeer Rochester located at 259 Monroe Avenue, Rochester NY 14607, offers a Peer to Peer Support Program for veterans struggling with post-traumatic stress disorder, traumatic brain injury, and readjustment to civilian life following military service. Vendor facilitates vet to vet connections through transportation, sports, and recreation. Opportunities for Veterans to engage, network, and form friendships with other Veterans to help re-establish the feeling of camaraderie and build positive mental health as they transition from military service to civilian life.

1. PRIMARY PERFORMANCE MEASUREMENT/INDICATOR: Number Unique Participants.

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
	n/a	n/a	*	*

OUTCOME ASSESSMENT METHODOLOGY: Data will be collected through tracking systems and procedures to determine number of activities and events

2. PRIMARY PERFORMANCE MEASUREMENT/INDICATOR: Number of events per year

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
	n/a	n/a	*	*

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health.

SOURCE MATERIAL: Provider Performance Reporting

*Program transferred to MCOMH starting 7/1/2026

Office of **the County Executive**

Monroe County, New York

Adam J. Bello
County Executive

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HUMAN SERVICES -L
WAYS & MEANS

November 6, 2026

To The Honorable
Monroe County Legislature
407 County Office Building
Rochester, New York 14614

Subject: Acceptance of Additional Funding from the New York State Office of Mental Health; Amend Resolution 424 of 2025 as Amended by Resolutions 111 of 2026, 197 of 2026, 254 of 2026, and 311 of 2026 Authorizing Contracts for the Provision of Mental Health, Developmental Disabilities, and Alcoholism and Substance Abuse Services in 2026 for the Monroe County Office of Mental Health

Honorable Legislators:

I recommend that Your Honorable Body accept additional funding from the New York State Office of Mental Health in the amount of $889,102; and amend Resolution 424 of 2025 as amended by Resolutions 111 of 2026, 197 of 2026, 254 of 2026, and 311 of 2026 to increase the contracts with the agencies listed in Attachment A from an amount not to exceed $55,413,645 to an amount not to exceed $56,302,747 for the provision of mental health, developmental disability, and alcoholism and substance abuse services for Monroe County residents for the period of January 1, 2026 through December 31, 2026. An updated Attachment A is attached reflecting the additional Mental Health, Developmental Disability, and Alcoholism and Substance Abuse Services to be provided through contracts between the County and the vendors selected for the provision of those services.

This additional funding will be used as designated by the New York State Office of Mental Health for program expansions, enhancements, and Targeted Inflationary Increases (TII). These service amendments are set forth in Attachment A.

Please refer to the attached Purchase of Services Information Forms for disclosure of information required pursuant to Resolution 223 of 2007, as amended by Resolution 11 of 2008.

The specific legislative actions required are:

1. Amend Resolution 424 of 2025 as Amended by Resolutions 111 of 2026, 197 of 2026, 254 of 2026, and 311 of 2026, to accept an additional $889,102 grant from, and to authorize the County Executive, or his designee, to execute a contract and any amendments thereto with, the New York State Office of Mental Health, to provide mental health, developmental disability, and alcoholism and substance abuse services for Monroe County residents, bringing the total program award to $56,302,747 for the period of January 1, 2026 through December 31, 2026.

2. Amend the 2026 operating budget of the Department of Human Services by appropriating the sum of $889,102 into general fund 1001, cost center 570201, Mental Health Services, program PG570001, Mental Health Services.

3. Amend Resolution 424 of 2025 as amended by Resolutions 111 of 2026, 197 of 2026, 254 of 2026, and 311 of 2026 to authorize the County Executive, or his designee, to execute contracts, and any amendments thereto, with the agencies listed in the updated Attachment A and any other agencies as necessary to provide mental health, developmental disability, and alcoholism and substance abuse services for Monroe County residents from an amount not to exceed $55,413,645 to an amount not to exceed $56,302,747 for the period of January 1, 2026 through December 31, 2026.

4. Authorize the County Executive to appropriate any subsequent years of the grant award in accordance with the grant terms, to reappropriate any unencumbered balances during the grant period according to the grantor requirements, to make any necessary funding modifications within the grant guidelines to meet contractual commitments, and to enter into any amendments to extend the time period of the grant.

5. Should funding of this program be modified or terminated for any reason, the County Executive is hereby authorized to terminate or modify the program and where applicable, to terminate or abolish some or all positions funded under such program. Any termination or abolishment of positions shall be in accordance with the New York State Civil Service Law, and when applicable, the terms of any labor agreement affecting such positions.

This action is a Type II Action pursuant to 6 NYCRR § 617.5(c)(26) ("routine or continuing agency administration and management, not including new programs or major reordering of priorities that may affect the environment") and is not subject to further review under the State Environmental Quality Review Act.

This grant is 100% funded by the New York State Office of Mental Health and the New York State Office of Addiction Services and Supports. No net County support is required in the current Monroe County budget.

I recommend that this matter be referred to the appropriate committee(s) for favorable action by Your Honorable Body.

Sincerely,

Adam J. Bello
Monroe County Executive

Attachment A

Prog Type	Vendor Agency	Program Name	Vendor Total	Service Total	Program Description
LGU - Local Government Unit Services - TOTAL				7,830,330	
LGU Functions	COORDINATED CARE SERVICES, INC.	COORDINATED CARE Local Government Unit Functions(G&C)	1,741,641		Staff and resources necessary to support essential Local Governmental Unit (LGU) functions including monitoring and managing subcontractor programs and financial performance, measuring effectiveness of behavioral health service system and supporting planning for system change and system development. Includes - OASAS, OPWDD, and unallocated funding
LGU Priority Services	COORDINATED CARE SERVICES, INC.	COORDINATED CARE LGU Priority Services(G&C)	6,088,689	7,830,330	Staff to support Single Point of Access (SPOA) programs, Assisted Outpatient Treatment (AOT), Transition Management (TM), Rapid Engagement Delivery (RED) and Forensic Intervention Team (FIT) programs. Includes - OASAS, OPWDD, OPIOID- Grief Counseling Program, LGU, and unallocated funding
MH - Mental Health Services - TOTAL				32,851,776	
Assertive Community Treatment	UNITY HOSPITAL- ROCHESTER REGIONAL HEALTH	UNITY Assertive Community Treatment, ACT Wrap & IPS	177,496		ACT Teams provide mobile intensive treatment and support to people with psychiatric disabilities. The focus is on the improvement of an individual's quality of life in the community and reducing the need for inpatient care, by providing intense community
Assertive Community Treatment	STRONG/ UNIVERSITY OF ROCHESTER	STRONG Assertive Community Treatment, ACT Wrap & IPS Supported Employment - Strong Ties ACT and Project ACT	351,582	529,078	
C&Y Skill Building	PATHWAYS, INC.	PATHWAYS Skill Building	170,413		Skill building services are designed to work with children and their families to implement
C&Y Skill Building	RECOVERY OPTIONS MADE EASY	ROME Skill Building	163,293	333,706	interventions outlined in the plan to compensate for or eliminate functional deficits and
Forensic Fellowship Program	STRONG/ UNIVERSITY OF ROCHESTER	STRONG Forensic Fellowship Program	111,343	111,343	The Forensic Fellowship Program, as part of the Office of Mental Health's Socio-Legal Center, provides court ordered competency examinations, mental health evaluations, and consultations for criminal justice involved individuals age 16 and older.
MH Adult Community Support	COMPEER ROCHESTER, INC.	COMPEER Care Coordination Adult One-to-One(C)	333,852		Community based services to support adults with mental health issues and their families. Services include advocacy, peer support, assistance navigating the service system and mentoring.
MH Adult Community Support	EAST HOUSE CORPORATION	EAST HOUSE Case Management	91,805		
MH Adult Community Support	NAMI- FAMILIES AND FRIENDS OF THE MENTALLY ILL, INC. D/B/A/ NAMI ROCHESTER	NAMI Advocacy Services	112,575		
MH Adult Community Support	Goodwill of the Finger Lakes	GOODWILL 2-1-1/Life Line(C)	301,361		
MH Adult Community Support	RECOVERY OPTIONS MADE EASY	ROME Peer Bridger	328,763		
MH Adult Community Support	ROCHESTER REGIONAL HEALTH (ROCHESTER MENTAL HEALTH CENTER)	RMHC Peer Advocacy Team for Habilitation	196,326		
MH Adult Community Support	THE MENTAL HEALTH ASSOCIATION OF ROCHESTER/MONROE COUNTY, INC.	MENTAL HEALTH ASSOCIATION Community and Peer Support Services (Consumer Self-Help & Coaching)(C)	382,018		
MH Adult Community Support	THE MENTAL HEALTH ASSOCIATION OF ROCHESTER/MONROE COUNTY, INC.	MENTAL HEALTH ASSOCIATION Creative Wellness Opportunities	318,542		
MH Adult Community Support	THE MENTAL HEALTH ASSOCIATION OF ROCHESTER/MONROE COUNTY, INC.	MENTAL HEALTH ASSOCIATION Life Skills	236,974		
MH Adult Community Support	THE MENTAL HEALTH ASSOCIATION OF ROCHESTER/MONROE COUNTY, INC.	MENTAL HEALTH ASSOCIATION Self-Help Drop In Center	352,885		
MH Adult Community Support	THE MENTAL HEALTH ASSOCIATION OF ROCHESTER/MONROE COUNTY, INC.	MENTAL HEALTH ASSOCIATION Partners in Suicide Prevention	20,000		
MH Adult Community Support	UNITY HOSPITAL- ROCHESTER REGIONAL HEALTH	UNITY Jail Diversion Drop-Off Center	1,366,842		
MH Adult Community Support	SPECTRUM HUMAN SERVICES, INC.	SPECTRUM Advocacy Support Services - Forensic Population	164,596		
MH Adult Community Support	VILLA OF HOPE	VILLA Psychiatric Emergency Department Diversion Program	570,118	4,776,657	
MH C&Y Community Support	COORDINATED CARE SERVICES, INC.	Coordinated Care- Multicultural Teen Prevention and Support Program (3990)	220,681		Community based services to support youth with mental health issues and their families. Services include early intervention/prevention and mentoring.
MH C&Y Community Support	CHILDREN'S INSTITUTE, INC.	CHILDREN'S INSTITUTE Primary Project	273,832		
MH C&Y Community Support	COMPEER ROCHESTER, INC.	COMPEER Family Support Services & Advocacy Support Services (Youth 1:1)	173,194		
MH C&Y Community Support	COMPEER ROCHESTER, INC.	COMPEER Youth Mentor	114,770		
MH C&Y Community Support	THE HEALING CONNECTION, Inc.	HEALING CONNECTION Mental Health Support Services	20,000		
MH C&Y Community Support	THE MENTAL HEALTH ASSOCIATION OF ROCHESTER/MONROE COUNTY, INC.	MENTAL HEALTH ASSOCIATION Family Support Services(C)	712,380		
MH C&Y Community Support	VILLA OF HOPE	VILLA Youth Mentor	163,029	1,677,886	
MH Care Management	DEPAUL COMMUNITY SERVICES, INC.	DEPAUL Care Management - Flex funds (Client Dollars)	18,773		Care coordination and support for individuals with mental health issues provided by advocating for needed services, helping to find their way through complex health care and social services systems, providing support for improved community service linkages, performing on-site crisis intervention and skills teaching when other services are not available, and if the recipient is eligible, working to secure Medicaid benefits with the goal of subsequent Health Home enrollment.
MH Care Management	ROCHESTER REGIONAL HEALTH (ROCHESTER MENTAL HEALTH CENTER)	RMHC Adult Care Management & Service Dollars	675,299		
MH Care Management	UNITY HOSPITAL- ROCHESTER REGIONAL HEALTH	UNITY Adult Care Management & Service Dollars	490,437		
MH Care Management	STRONG/ UNIVERSITY OF ROCHESTER	STRONG Adult Care Management & Service Dollars	639,702		
MH Care Management	VILLA OF HOPE	VILLA Care Coordination / Care Management - Children and Youth & Service Dollars	823,090	2,647,301	
MH Crisis Services	HILLSIDE CHILDREN'S CENTER	HILLSIDE Family Crisis Support Services	670,066		Crisis intervention services, applicable to adults, children and adolescents, are intended to reduce acute symptoms, restore individuals to pre-crisis levels of functioning and to build and strengthen natural supports to maximize community tenure. Examples of where these services may be provided include emergency rooms and residential settings. Provision of services may also be provided by a mobile treatment team, generally at a
MH Crisis Services	ROCHESTER REGIONAL HEALTH (THE ROCHESTER GENERAL	RGH & RMHC Crisis Intervention & ED	908,708		
MH Crisis Services	UNITY HOSPITAL- ROCHESTER REGIONAL HEALTH	UNITY Home Based Crisis Intervention	1,064,982		
MH Crisis Services	STRONG/ UNIVERSITY OF ROCHESTER	STRONG Transitional Living - Crisis Housing	193,893	2,837,649	
MH Outreach	LIFESPAN OF GREATER ROCHESTER, INC.	LIFESPAN Senior Screening - Mental Health Outreach	70,882		
MH Outreach	HOUSE OF MERCY	HOUSE OF MERCY Homeless Support Services(C)	179,324		
MH Outreach	PERSON CENTERED HOUSING OPTIONS INC.	PCHO Homeless Support Services	234,800	485,006	

MH Peer Respite Services	EAST HOUSE CORPORATION	EAST HOUSE Peer Run Respite Diversion (Affinity Place)	697,663	697,663	A peer-based, recovery-oriented housing alternative to existing crisis/acute services for individuals experiencing a psychiatric crisis, thereby diverting the need for more intensive (and potentially costly) services.
MH Supportive Housing	DEPAUL COMMUNITY SERVICES, INC.	DEPAUL Mental Health Supportive Housing(Trad, Long, MRT, RCE)	3,421,554		Supportive Housing utilizes an approach which creates housing opportunities for people through development of a range of housing options, community support services, rental stipends, and recipient specific advocacy and brokering.
MH Supportive Housing	EAST HOUSE CORPORATION	EAST HOUSE Mental Health Supportive Housing (ILP, HOPE, Choices)	3,968,709		
MH Supportive Housing	IBERO-AMERICAN ACTION LEAGUE, INC.	IBERO Mental Health Supportive Housing(+RPC/RIV)	481,731		
MH Supportive Housing	RECOVERY OPTIONS MADE EASY	ROME Mental Health Supportive Housing(MRT,RCE,Long Reg,Trans)	1,525,132		
MH Supportive Housing	SPECTRUM HUMAN SERVICES, INC.	SPECTRUM Mental Health Supportive Housing	578,499	9,975,625	
Ongoing Integrated Supported Employment Service	DEPAUL COMMUNITY SERVICES, INC.	DEPAUL Ongoing Integrated Supported Employment Services (OISE)	322,950	322,950	
Personalized Recovery Oriented Services (PROS)	ROCHESTER REGIONAL HEALTH (THE ROCHESTER GENERAL HOSPITAL)	RGH Personalized Recovery Oriented Services (PROS), Employment Initiative & Service Dollars	363,210		Personalized Recovery Oriented Services (PROS) is a comprehensive recovery oriented program for individuals with severe and persistent mental illness. The goal of the program is to integrate treatment, support and rehabilitation in a manner that facilitates the individual's recovery.
Personalized Recovery Oriented Services (PROS)	UNITY HOSPITAL - ROCHESTER REGIONAL HEALTH	UNITY Personalized Recovery Oriented Services (PROS), Emplovment Initiative & Service Dollars	363,210		
Personalized Recovery Oriented Services (PROS)	ROCHESTER REHABILITATION CENTER, INC	ROCHESTER REHABILITATION Personalized Recovery Oriented Services (PROS) & Employment Initiative	297,913	1,024,333	
SRO Community Residence	DEPAUL COMMUNITY SERVICES, INC.	DEPAUL Single Room Occupancy Community Residence - Carriage Factory	600,711		A single-room occupancy residence which provides long term or permanent housing in a setting where residents can access the support services they require to live successfully in the community.
SRO Community Residence	DEPAUL COMMUNITY SERVICES, INC.	DEPAUL Single Room Occupancy Community Residence -	1,661,001		
SRO Community Residence	DEPAUL COMMUNITY SERVICES, INC.	DEPAUL Single Room Occupancy Community Residence -	1,674,939		
SRO Community Residence	DEPAUL COMMUNITY SERVICES, INC.	DEPAUL Single Room Occupancy Community Residence -	1,786,397		
SRO Community Residence	DEPAUL COMMUNITY SERVICES, INC.	DEPAUL Supported Single Room Occupancy Community Residence - Upper Falls Square Apartments	1,709,531	7,432,579	
Unallocated				144,725	
Community Support	STRONG/ UNIVERSITY OF ROCHESTER	STRONG Creative Arts Engagement Program (pilot)	102,025		Enhancing a program that exists to assist people in recovery through theatre.
Community Support	PARTNERS IN COMMUNITY DEVELOPMENT- BIPOC PEEEEEK	PARTNERS Youth Peer Advocacy Learning Collaborative	20,000		Provide coaching and mentorship to BIPOC youth participating in credentialing.
Community Support	IBERO-AMERICAN ACTION LEAGUE, INC.	IBERO Prevention Education and Intervention	15,000		
Community Support	NAMI- FAMILIES AND FRIENDS OF THE MENTALLY ILL, INC. D/B/A/ NAMI ROCHESTER	NAMI Peer Support Stipend	7,200		
				144,725	
OPIOID SETTTLEMENT TOTAL				945,000	
Opioid	HUTHER-DOYLE MEMORIAL INSTITUTE,INC.	HUTHER DOYLE - Education Series (ECHO)	20,000		
Opioid	LIFESPAN OF GREATER ROCHESTER, INC.	LIFESPAN OASAS Education and resources	20,000		
Opioid	ROCHESTER INSTITUTE OF TECHNOLOGY	ROCHESTER INSTITUTE OF TECHNOLOGY Tai Chi	20,000		
Opioid	DELPHI DRUG & ALCOHOL COUNCIL, INC.	DELPHI Open Access Program	0		
Opioid	DELPHI DRUG & ALCOHOL COUNCIL, INC.	DELPHI Re-entry Program	250,000		
Opioid	HOUSE OF MERCY	HOUSE OF MERCY BIPOC Peer	265,000		
Opioid	THE MENTAL HEALTH ASSOCIATION OF ROCHESTER/MONROE COUNTY, INC.	MENTAL HEALTH ASSOCIATION Crisis Transportation Services	250,000		
Opioid	NEW YORK ADULT & TEEN CHALLENGE	NYATC Faith Based Residential Recovery	20,000		
Opioid	RFP - Inpatient Bed Dashboard		100,000		
OASAS - Alcohol and Substance Abuse Services - TOTAL				14,473,605	
CD Case Management	PROVIDENCE HOUSING DEVELOPMENT CORPORATION	PROVIDENCE Case Management	93,913	93,913	Activities aimed at linking the client to the service system and at coordinating the various services in order to achieve a successful outcome.
CD Community Residence	CATHOLIC CHARITIES OF THE DIOCESE OF ROCHESTER D/B/A/ CATHOLIC FAMILY CENTER	CATHOLIC CHARITIES Chemical Dependence Community Residence (Alexander)	438,889		Structured residential environment for individuals who are concurrently enrolled in an outpatient chemical dependence service which provides addiction counseling.
CD Community Residence	CATHOLIC CHARITIES OF THE DIOCESE OF ROCHESTER D/B/A/ CATHOLIC FAMILY CENTER	CATHOLIC CHARITIES Chemical Dependence Community Residence (Barrington)	328,186		
CD Community Residence	CATHOLIC CHARITIES OF THE DIOCESE OF ROCHESTER D/B/A/ CATHOLIC FAMILY CENTER	CATHOLIC CHARITIES Chemical Dependence Community Residence (Jones)	163,807		
CD Community Residence	EAST HOUSE CORPORATION	EAST HOUSE Chemical Dependence Community Residence (Codv)	357,772		
CD Community Residence	EAST HOUSE CORPORATION	EAST HOUSE Chemical Dependence Community Residence (Hanson)	247,654		
CD Community Residence	EAST HOUSE CORPORATION	EAST HOUSE Chemical Dependence Community Residence (Hirst)	425,929		
CD Community Residence	EAST HOUSE CORPORATION	EAST HOUSE Chemical Dependence Community Residence (Pinny Cooke)	236,425	2,198,662	
CD Community Support	CENTER FOR COMMUNITY ALTERNATIVES, INC.	CENTER FOR COMMUNITY ALTERNATIVES Recovery Center	618,978		
CD Community Support	LIBERTY RESOURCES, INC.	LIBERTY RESOURCES Family Support Navigator	145,575		
CD Community Support	LIBERTY RESOURCES, INC.	LIBERTY RESOURCES Peer Advocate	163,734	928,287	
CD Outpatient	CATHOLIC CHARITIES OF THE DIOCESE OF ROCHESTER D/B/A/ CATHOLIC FAMILY CENTER	CATHOLIC CHARITIES Chemical Dependence Outpatient	774,612		These licensed programs assist individuals who suffer from chemical abuse or dependence and their family members and/or significant others through group and individual counseling; education about, orientation to, and opportunity for participation in, relevant and available self-help groups; alcohol and substance abuse disease awareness and relapse prevention; HIV and other communicable diseases, education, risk assessment, supportive counseling and referral; and family treatment.
CD Outpatient	DELPHI DRUG & ALCOHOL COUNCIL, INC.	DELPHI Chemical Dependence Outpatient	498,854		
CD Outpatient	HUTHER-DOYLE MEMORIAL INSTITUTE,INC.	HUTHER-DOYLE Chemical Dependence Outpatient & Comprehensive Outpatient	523,498	1,796,964	

CD Prevention	CENTER FOR YOUTH SERVICES, INC.	CENTER FOR YOUTH Chemical Dependence Prevention	962,692		Prevention service approaches include education, environmental strategies, community capacity building, positive alternatives and information dissemination. Other Prevention service approaches funded by OASAS include Prevention Counseling and Early Intervention.
CD Prevention	COMMUNITY PLACE OF GREATER ROCHESTER, INC.	COMMUNITY PLACE Chemical Dependence Prevention	341,929		
CD Prevention	DELPHI DRUG & ALCOHOL COUNCIL, INC.	DELPHI Chemical Dependence Prevention	263,414		
CD Prevention	DEPAUL COMMUNITY SERVICES, INC.	DEPAUL NCADD-Prevention Resource Center	336,993		
CD Prevention	DEPAUL COMMUNITY SERVICES, INC.	DEPAUL NCADD-RA's Finger Lakes Addiction Resource Center (Community)	104,537		
CD Prevention	DEPAUL COMMUNITY SERVICES, INC.	DEPAUL NCADD-Rochester Area	436,620		
CD Prevention	IBERO-AMERICAN ACTION LEAGUE, INC.	IBERO Familias Unidas	138,899		
CD Prevention	ROCHESTER INSTITUTE OF TECHNOLOGY	ROCHESTER INSTITUTE OF TECHNOLOGY Chemical Dependence Prevention	240,918		
CD Prevention	VILLA OF HOPE	VILLA Chemical Dependence Prevention	127,206	2,953,208	
CD Rehabilitation and Stabilization	CATHOLIC CHARITIES OF THE DIOCESE OF ROCHESTER D/B/A/ CATHOLIC FAMILY CENTER	CATHOLIC CHARITIES Rehabilitation and Stabilization - Freedom House	727,700		Residential services are 24/7 structured treatment/recovery services to persons recovering from substance use disorder. Services correspond to elements in the treatment/recovery process and are distinguished by the configuration of services, degree of dysfunction of the individual served in each setting, and patient readiness to transition to a less restrictive program or element of treatment/recovery.
CD Rehabilitation and Stabilization	CATHOLIC CHARITIES OF THE DIOCESE OF ROCHESTER D/B/A/ CATHOLIC FAMILY CENTER	CATHOLIC CHARITIES Rehabilitation and Stabilization - Liberty Manor	701,595		
CD Rehabilitation and Stabilization	VILLA OF HOPE	VILLA Residential Rehabilitation Services	845,087	2,274,382	
CD Supportive Living	CATHOLIC CHARITIES OF THE DIOCESE OF ROCHESTER D/B/A/ CATHOLIC FAMILY CENTER	CATHOLIC CHARITIES Chemical Dependence Supportive Living	132,737		A chemical dependence residential program designed to promote independent living in a supervised setting for individuals who have completed another course of treatment, and are making the transition to independent living, and whose need for service does
CD Supportive Living	EAST HOUSE CORPORATION	EAST HOUSE Chemical Dependence Supportive Living (Crossroads)	469,612		
CD Supportive Living	YWCA GREATER ROCHESTER SPECIAL PROJECTS LLC	YWCA Chemical Dependence Supportive Living	295,258	897,607	
CD Vocational Rehabilitation	EAST HOUSE CORPORATION	EAST HOUSE Chemical Dependence Vocational Services	131,918	131,918	Vocational rehabilitation is a process that prepares people for employment by helping them choose a vocational role and function that is consistent with their abilities, achievements, interests, and functioning capacity.
CD Withdrawal Services	VILLA OF HOPE	VILLA Medically Monitored and Medically Supervised Detoxification Services (Living Hope)	1,055,233		Medically supervised withdrawal services provided in an inpatient or residential setting under the supervision and direction of a licensed physician for persons undergoing moderate withdrawal or who are at risk of moderate withdrawal, as well as persons experiencing non-acute physical or psychiatric complications associated with their chemical dependence.
CD Withdrawal Services	HELIO HEALTH, INC.	HELIO Inpatient Rehabilitation and Medically Supervised Detoxification Services(C)	2,143,431	3,198,664	
DD - Developmental Disability Services - TOTAL				57,811	
Information & Referral	STARBRIDGE SERVICES, INC.	STARBRIDGE Information & Referral (County Only)	57,811	57,811	Informs individuals with disabilities and their families about resources and supports available in the community and assists them in accessing those services. Also includes public education to increase awareness and change attitudes by engaging audiences in interactive workshops about disabilities.
			2026 Total Ceiling per 8.07.26 LEG	55,413,645	Without MC
			2026 Total Contracts	56,302,747	New Leg Budget Amount
			Delphi Open Access	900,000	*Separate Resolution
			Difference	1,789,102	Increase with Delphi $900k
			Difference w/o Delphi	889,102	Increase w/o Delphi $900k

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY:	Multi-disability
PROGRAM:	LGU Priority Services
CONTRACTOR:	COORDINATED CARE SERVICES, INC.
CONTRACT AMOUNT:	$6,088,689.00
PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S):	Staff are provided to perform the following services under the direction of the Monroe County Office of Mental Health (MCOMH) to ensure access to behavioral health services (mental health, substance use disorder, and intellectual and developmental disabilities) for individuals in the community with the greatest need. Adult Priority Services: - Single Point of Access (SPOA) programs to support centralized, timely access to care management and residential services for adults with intensive behavioral health needs. In addition, the Supplemental Security Income (SSI) program will provide a Benefits Facilitator to support eligible public assistance recipients with behavioral health challenges in securing SSI and/or Social Security Disability entitlement. - The Rapid Engagement Delivery (RED) program which promotes engagement and retention for individuals with behavioral health and social services who have had frequent unsuccessful Department of Human Services application attempts and/or use of Emergency Housing services. - Addiction and Prevention Services to meet the needs to support services in the community for substance use disorder and improve the coordination and use of services for high needs individuals. -Disaster Mental Health Response Team. Socio-Legal: - Assisted Outpatient Treatment (AOT) and Transition Management Program, which includes the establishment of Court Navigator services based at the Monroe County Socio-Legal Center to support ongoing linkage to behavioral health services for high need individuals, some of which have court involvement or histories of incarceration. - The Forensic Intervention Team (FIT), which collaborates with law enforcement agencies across the county to assist individuals with mental health needs who have frequent contact with law enforcement. This program expanded to 24/7 operation in 2021. - Forensic Sevices to meet the needs of high need forensic populations to engage in appropriate, cost effective services. -The Homicide Response Team to ensure grief counseling is provided as needed to community members impacted by a homicide or fatal overdose. Children and Youth Priority Services to meet the social determinant needs of children and families receiving behaivoral health services, including programs such as: -Single Point of Access (SPOA) programs to support centralized, timely access to care management and residential services for youth with intensive mental health and/or substnace use needs. -Spreading Wellness Around Town. -Youth and Family Partnership. - Maintaining and monitoring the use of Children & Youth Wrap funds to meet the individualized needs of children and families receiving mental health services. -Trauma, Illness, and Grief (TIG) consortium.
1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR:	Units of service (Total number of referrals to Adult and Child SPOA, AOT, RED, and FIT)

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	n/a	n/a	n/a	n/a
Units of Service:	6740	6945	7225	7360

2. SELECTED OUTCOME INDICATOR: Percent of Adult and Child SPOA eligible community referrals admitted to services

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Indicator Value:	53%	60%	62%	65%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Program databases

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: Multi-disability

PROGRAM: Local Governmental Unit Functions

CONTRACTOR: COORDINATED CARE SERVICES, INC.

CONTRACT AMOUNT: $1,741,641.00

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): Coordinated Care Services, Inc. provides the staff and resources necessary to support a range of essential Local Governmental Unit (LGU) functions on behalf of the Monroe County Office of Mental Health (MCOMH), including:

1. Monitoring and managing State and County behavioral health funding and to administer contracts on behalf of, and under the direction of the MCOMH, with not-for profit community agencies, health systems/hospitals, and other providers as deemed necessary to support the range of behavioral health needs/services in the community.
2. Monitoring and managing contractor programs and financial performance on behalf of, and under the direction of, the MCOMH. This function includes negotiating and monitoring performance of contracts among roughly 34 community providers and encompassing approximately 100 behavioral health programs; monitoring expenses and revenues against approved budgets; and initiating corrective action plans as necessary.
3. Managing a process for measuring the effectiveness and performance of behavioral health services and maintaining and/or obtaining access to information systems to support planning, policy, and oversight activities in Monroe County.
4. Supporting the policy, planning, systems change, and service development functions of the MCOMH via analysis of relevant State and national policies, conducting community needs assessment activities, securing the data and information required for planning and policy decisions and supporting the implementation of new initiatives.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Contracts are monitored in an accurate and timely manner, and contractors perform per contract specifications. Expressed as number of contracts and percent successful.

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	n/a	n/a	n/a	n/a
Units of Service:	49 (100%)	51 (100%)	57 (100%)	58 (100%)

2. SELECTED OUTCOME INDICATOR: Claiming/reconciliation of state aid and federal grants is timely and accurate (Number of funding source codes/percent timely and accurate)

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Indicator Value:	3 (100%)	3 (100%)	3 (100%)	3 (100%)

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: ContrackHQ and Provider Performance Reports

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Adult Care Management (Non-Medicaid)

CONTRACTOR: BEHAVIORAL HEALTH NETWORK, INC. D/B/A ROCHESTER MENTAL HEALTH CENTER

CONTRACT AMOUNT: $675,299.00

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): Rochester Mental Health Center operates under Rochester Regional Health along with other affiliated entities. This program provides care management services to adults with serious mental illness who are not eligible for Medicaid and, consequently, Health Home Care Management services. Non-Medicaid Care Management services mirror Health Home Care Management services and include: Comprehensive Care Management Planning, Care Coordination, Health Promotion, Transitional Care (including appropriate follow-up from inpatient to other settings), Individual and Family Support Services, and referrals to community and social supports tailored to the individual needs. Care management also includes conducting outreach to referred clients, conducting intakes and assessments of clients needs and strengths, service planning and coordination. Care management services are also provided for those with Assisted Outpatient Treatment (AOT) orders who do not have Medicaid. Service dollars to support service plan goals are available for individuals who have a diagnosed mental illness who do or do not have Medicaid. The program is expected to be culturally responsive and provides aggressive outreach, linkage, and advocacy to community resources.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Individuals served

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	106	162	200	225
Units of Service:	n/a	n/a	n/a	n/a

2. SELECTED OUTCOME INDICATOR: Percent of clients with positive outcome at discharge

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Indicator Value:	77%	77%	80%	82%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Provider Performance Reports

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Peer Advocacy Team for Habilitation

CONTRACTOR: BEHAVIORAL HEALTH NETWORK, INC. D/B/A ROCHESTER MENTAL HEALTH CENTER

CONTRACT AMOUNT: $196,326.00

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): Rochester Mental Health Center operates under Rochester Regional Health along with other affiliated entities. Peer services are those services and supports that are provided by individuals who are or have been consumers of behavioral health services. The primary objective is to increase the number of community linkages to other mental health services and supports. This service provides peer outreach to adults with mental illness who are homeless or are at risk of becoming homeless. Peer Advocacy Team for Habilitation (PATH) provides referral and linkage to community services, peer support and coaching, enhancement of self-advocacy, the development and maintenance of peer networks and resources, and systems advocacy. Peer staff are available to assist individuals in a variety of community settings including homeless shelters.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Individuals served

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	296	268	280	300
Units of Service:	600	554	600	620

2. SELECTED OUTCOME INDICATOR: Number of community linkages to other mental health services and supports

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Indicator Value:	954	665	850	900

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Behavioral Health Community Database/Provider Performance Reports

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Primary Project

CONTRACTOR: CHILDREN'S INSTITUTE, INC.

CONTRACT AMOUNT: $273,832.00

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): Children's Institute Primary Mental Health Project (PMHP) at 205 St. Paul St, Rochester NY 14604 operates in 17 Rochester City School District elementary schools and six Greece Central School District elementary schools. This school-based program identifies young children who are just beginning to show school adjustment difficulties and pairs them with trained paraprofessional child associates for screening and intervention.

The Children's Institute provides ongoing training and consultation for the school-based Primary Project team composed of principals, teachers, mental health professionals, senior associates, and child associates as well as evaluation services. Various members of the school team meet with or have phone contacts with parents of children participating in the program.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Individuals served

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	383	373	392	412
Units of Service:	n/a	n/a	n/a	n/a

2. SELECTED OUTCOME INDICATOR: Percentage of children served who no longer score at-risk for school adjustment difficulties post-intervention

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Indicator Value:	42%	71%	74%	78%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Provider Performance Reports/Annual Report

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Adult One-to-One

CONTRACTOR: COMPEER ROCHESTER, INC.

CONTRACT AMOUNT: $333,852.00

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): Compeer at 259 Monroe Ave, Rochester, NY 14607 Adult One-to-One program utilizes volunteer mentors to provide adults with mental illness companionship, socialization, community integration, and supportive friendship-based mentoring to aid in their wellness and recovery, increase their independence, and improve their quality of life. Most volunteers meet their mentees in-person, but some speak with adults with mental illness over the phone or online (especially for those awaiting or unsure about engaging with in-person mentoring as well as for disabled or home-bound individuals). Volunteers are expected to meet with their mentees at least four hours per month for at least one year. Expected outcomes include increased self-worth, decreased isolation, increased wellness, and reductions in unnecessary or avoidable hospitalizations and use of emergency services.

Compeer's services include recruiting, screening and training volunteer mentors; accepting and screening referrals for mentees, monitoring the activities of mentor/mentee matches; and using paid staff to provide ongoing support and collaboration with matched adults' care team members. Volunteer mentors are trained in mental health, communication, healthy boundaries, cultural competence and crisis management.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Individuals served/units of service (contact hours)

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	124	91	95	120
Units of Service:	1,987	939	983	1,035

2. SELECTED OUTCOME INDICATOR: Percent of clients with psychiatric emergency visits while enrolled

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Indicator Value:	6%	7%	6%	5%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Behavioral Health Community Database

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Family Support Services

CONTRACTOR: COMPEER ROCHESTER, INC.

CONTRACT AMOUNT: $173,194.00

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): Compeer Family Support at 259 Monroe Ave, Rochester, NY 14607, serves families with youth between 5 and 21 years old who have serious emotional needs or significant mental health or behavioral challenges by matching them with volunteer mentors. Mentors are expected to meet with their mentees in person in the community for at least four hours per month for at least one year. Mentors provide friendship-based mentoring by developing rapport and a trusting relationship with family and youth so that they have a positive and supportive relationship with someone outside their family. Mentors assist families and their youth in developing healthy coping strategies and positive life skills by modeling, providing feedback, and discussing strategies and skills. Core goals include improved school functioning, community and recreational engagement, social skills, decision-making/choices, self-esteem, and future-orientation.

Compeer recruits, screens, and trains volunteer mentors; accepts and screens family referrals; monitors mentors' activities; organizes social events; and utilizes paid staff to support youth and families with referrals and assistance with service navigation and crises. Compeer trains mentors in positive youth development, communication skills, cultural competency, healthy boundaries, mental health, and crisis management.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Individuals served/units of service (contact hours)

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	49	36	60	65
Units of Service:	1,286	603	844	925

2. SELECTED OUTCOME INDICATOR: Percent of clients accessing mental health crisis services (psychiatric emergency department and mobile crisis) while enrolled

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Indicator Value:	8%	8%	5%	4%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Behavioral Health Community Database

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Youth Peer Mentoring

CONTRACTOR: COMPEER ROCHESTER, INC.

CONTRACT AMOUNT: $114,770.00

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): Compeer at 259 Monroe Ave, Rochester, NY 14607 provides youth peer mentoring services to youth under the age of 21 who are experiencing social, medical, emotional, developmental, substance use, and/or behavioral challenges in their home, school, placement, and/or community-centered services. Program services are provided by a young adult who experienced similar challenges in their youth. Services are intended to develop and achieve the identified goals and/or objectives as set forth in the youth's individualized treatment plan. The structured, scheduled activities provided by this service emphasize the opportunity for the youth to expand the skills and strategies necessary to move forward in meeting their personal, individualized life goals, develop self-advocacy skills, and to support their transition into adulthood.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Individuals served/units of service (quarter hours direct service)

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	n/a	n/a	6	390
Units of Service:	n/a	n/a	20	410

2. SELECTED OUTCOME INDICATOR: Percent of youth discharged with one or more Youth Mentoring goals achieved

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Indicator Value:	n/a	n/a	70%	75%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Behavioral Health Community Database

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Multicultural Teen Prevention and Support Program

CONTRACTOR: COORDINATED CARE SERVICES, INC.

CONTRACT AMOUNT: $220,681.00

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): The Multicultural Teen Prevention and Support program is an innovative, community-based, statewide prevention program for teens ages 13-17 experiencing behavioral and emotional challenges in their daily lives and their families. It uses a strengths-based approach to help individuals, families, and communities to develop the resources needed to maintain healthy lifestyles. It focuses on the development of a culturally competent, inclusive system of support that fosters self-help, empowerment, advocacy, support, and education.
Junior and adult mentors help the adolescents and their families apply the strategies taught in the program to their unique life situations. Ongoing parent support groups and contacts with schools and other community programs complete the circle of support. The curriculum and all other activities are facilitated/supervised by CCSI staff.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Capacity (slots) /individuals served (individuals participating)

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Capacity:	25	25	25	25
Individuals Served:	22	18	21	22
Units of Service:	n/a	n/a	n/a	n/a

2. SELECTED OUTCOME INDICATOR: Percent (number) of youth that gradudated

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Indicator Value:	64% (14)	78% (14)	67% (14)	82% (18)

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Provider Performance Reports and PASS annual report.

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Care Management - Flex Funds

CONTRACTOR: DEPAUL COMMUNITY SERVICES, INC.

CONTRACT AMOUNT: $18,773.00

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): This funding provides additional monetary support for the needs of individuals enrolled in DePaul's Adult Health Home Care Management services. These service dollars are for emergency and non-emergency purposes and are to be used as payment of last resort (i.e., if another program can provide for the identified needs with other resources, that program's funds should be used first). The purpose of the service dollars is to provide funds to support recovery goals outlined in the individual's care management service plan or to address immediate and/or emergency needs. The use of service dollars in any of these programs should include participation of the recipient of services, who should play a significant role in the planning for, and the utilization of service dollars. Approved uses of service dollars are documented in each individual's case records.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Individuals served

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	102	99	104	106
Units of Service:	n/a	n/a	n/a	n/a

2. SELECTED OUTCOME INDICATOR: Percent of funds utilized for recovery goals

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Indicator Value:	87%	92%	95%	98%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Provider Performance Reports and CFR

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Mental Health Supportive Housing

CONTRACTOR: DEPAUL COMMUNITY SERVICES, INC.

CONTRACT AMOUNT: $3,421,554.00

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): DePaul operates a mental health supportive housing program designed to provide assistance to individuals with serious mental illness (SMI) in locating and maintaining safe, affordable housing of their choice. This program includes a total of 193 supportive housing units. The New York State Office of Mental Health defines specific criteria for use of the various bed types provided by this program.

The intent of Supportive Housing is to ensure that individuals with serious mental illness may exercise their right to choose where they are going to live, taking into consideration the recipient's functional skills, the range of affordable housing options available in the area under consideration, and the type and extent of services and resources that recipients require to maintain their residence within the community. Supportive Housing utilizes an approach which creates housing opportunities for people through development of a range of housing options, community support services, rental stipends, and recipient-specific advocacy and brokering. As such, this initiative encompasses community support and psychiatric rehabilitation approaches.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Capacity (beds)/individuals served/units of service (bed days)

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Capacity:	193	193	193	193
Individuals Served:	178	172	185	190
Units of Service:	61,394	60,061	61,00	62,500

2. SELECTED OUTCOME INDICATOR: Percent of clients remaining in apartment 1 year or more

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Indicator Value:	88%	83.%	92%	95%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Behavioral Health Community Database/Provider Performance Reports

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Ongoing Integrated Supported Employment (OISE) services

CONTRACTOR: DEPAUL COMMUNITY SERVICES, INC.

CONTRACT AMOUNT: $322,950.00

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): DePaul will provide Ongoing Integrated Supported Employment (OISE) services, that are extended mental health-focused employment supports related to helping sustain employment for individuals who are 18 years and older with a Serious Mental Illness (SMI), which also includes young adults who have been served through NY State Education and been diagnosed with Serious Emotional Disturbance, are experiencing psychiatric barriers to an employment goal, and who have achieved job stability. These services often follow Adult Career & Continuing Education Services – Vocational Rehabilitation (ACCES-VR) Intensive Services. These services are not intended to provide indefinite and on-going support of job tasks but are intended to mitigate psychiatric barriers related to employment. Intensity of service, including the number of contacts per month, should be driven by individual need with the aim of progressively decreasing contact, while allowing for increased frequency and intensity as needed. Individuals will be provided onsite/offsite job coaching support to stabilize them in new positions in order to achieve successful employment long term.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Individuals served

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	20	43	50	55
Units of Service:	n/a	503	575	625

2. SELECTED OUTCOME INDICATOR: % of individuals employed at point of discharge

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Indicator Value:	0%	46%	56%	65%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Behavioral Health Community Database/Provider Perormance Reports

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Single Room Occupancy Community Residence - Carriage Factory

CONTRACTOR: DEPAUL COMMUNITY SERVICES, INC.

CONTRACT AMOUNT: $600,711.00

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): DePaul operates the 25-bed Carriage Factory Community Residence (CR) Single Room Occupancy (SRO) located at 33 Litchfield Street, Rochester New York 14608. This program is licensed by the New York State Office of Mental Health and adheres to all appropriate regulations and guidelines. The goal of the program is to provide stable housing with 24-hour staff and on-site support services. The intended residents of the CR-SRO are seriously mentally ill individuals, including formerly homeless individuals who may have co-occurring substance use disorders, who are capable of living in private apartments as long as on-site support services are available. Clients who live in this specific CR-SRO live in furnished apartments with kitchens and only those who are able to prepare their own meals can be accepted into this CR-SRO.

The Carriage Factory CR-SRO provides medication supervision, activities programming, transportation, and coordination, case management and 24 hour community living assistance, help with housekeeping, staff support, and supervision in a safe environment. The SRO assists individuals to obtain skills in areas such as independent living, socialization, and medication management. Care management is provided for eligible individuals to assist them with linking to services in the community.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Capacity (beds)/individuals served/units of service (bed days)

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Capacity:	25	25	25	25
Individuals Served:	25	23	25	26
Units of Service:	8,348	7,571	8,000	8,350

2. SELECTED OUTCOME INDICATOR: Percent of clients with psychiatric inpatient admissions while enrolled

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Indicator Value:	12%	9%	8%	6%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Behavioral Health Community Database

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Single Room Occupancy Community Residence - Edgerton

CONTRACTOR: DEPAUL COMMUNITY SERVICES, INC.

CONTRACT AMOUNT: $1,661,001.00

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): DePaul operates the 85-bed Edgerton Square Community Residence (CR) Single Room Occupancy (SRO) located at 435 Dewey Avenue, Rochester New York 14613. This program is licensed by the New York State Office of Mental Health and adheres to all appropriate regulations and guidelines. The goal of the program is to provide stable housing with 24-hour staff and on-site support services. The residents of this CR-SRO are adults 18 years or older with serious mental illness (including former residents of Rochester Psychiatric Center), some of whom have long histories of homelessness and substance abuse problems, and are capable of living in this type of residence as long as on-site support services are available. The primary mission of staff is to develop specialized approaches that will successfully engage the resident in his/her/their own rehabilitation.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Capacity (beds)/individuals served/units of service (bed days)

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Capacity:	85	85	85	85
Individuals Served:	89	99	100	105
Units of Service:	27,692	28,384	28,500	29,00

2. SELECTED OUTCOME INDICATOR: Percent of clients with psychiatric inpatient admissions while enrolled

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Indicator Value:	12%	9%	8%	6%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Behavioral Health Community Database

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Single Room Occupancy Community Residence - Halstead Square

CONTRACTOR: DEPAUL COMMUNITY SERVICES, INC.

CONTRACT AMOUNT: $1,674,939.00

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): DePaul operates the 75-bed Halstead Community Residence (CR) Single Room Occupancy (SRO) located at 770 West Main Street, Rochester New York 14611. This program is licensed by the New York State Office of Mental Health and adheres to all appropriate regulations and guidelines. The goal of the program is to provide stable housing with 24-hour staff and on-site support services. The residents of the CR-SRO are adults 18 years or older who are diagnosed with a serious mental illness (including current residents of Rochester Psychiatric Center), some of whom have long histories of homelessness and substance abuse problems, and are capable of living in this type of residence as long as on-site support services are available. The primary mission of staff is to develop specialized approaches that will successfully engage the resident in his/her/their own rehabilitation.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Capacity (beds)/individuals served/units of service (bed days)

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Capacity:	75	75	75	75
Individuals Served:	79	83	87	88
Units of Service:	25,162	25,233	25,350	25,400

2. SELECTED OUTCOME INDICATOR: Percent of clients with psychiatric inpatient admissions while enrolled

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Indicator Value:	11%	12%	11%	10%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Behavioral Health Community Database

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Single Room Occupancy Community Residence - Parkside

CONTRACTOR: DEPAUL COMMUNITY SERVICES, INC.

CONTRACT AMOUNT: $1,786,397.00

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): DePaul operates the 85-bed Parkside Community Residence (CR) Single Room Occupancy (SRO) located at 420 East Main Street, Rochester New York 14604 This program is licensed by the New York State Office of Mental Health and adheres to all appropriate regulations and guidelines. The goal of the program is to provide stable housing with 24-hour staff and on-site support services. The residents of the CR-SRO are age 50 and above who are diagnosed with a serious mental illness (including current residents of Rochester Psychiatric Center), some of whom have long histories of homelessness and substance abuse problems, and are capable of living in this type of residence as long as on-site support services are available. The primary mission of staff is to develop specialized approaches that will successfully engage the resident in his/her/their own rehabilitation.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Capacity (beds)/individuals served/units of service (bed days)

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Capacity:	85	85	85	85
Individuals Served:	90	91	93	95
Units of Service:	29,732	27,487	28,000	28,500

2. SELECTED OUTCOME INDICATOR: Percent of clients with psychiatric inpatient admissions while enrolled

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Indicator Value:	8%	11%	10%	9%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Behavioral Health Community Database

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Supported Single Room Occupancy Community Residence - Upper Falls Square Apartments

CONTRACTOR: DEPAUL COMMUNITY SERVICES, INC.

CONTRACT AMOUNT: $1,709,531.00

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): DePaul operates the 75-bed Upper Falls Square Supportive Housing Single Room Occupancy (SP-SRO) located at 396 Hudson Avenue,Rochester New York 14605 which is in a building in which other affordable housing apartments are located. DePaul accepts clients into the Upper Falls Square SP-SRO who have demonstrated the skills needed to reside independently in the community. Clients live in apartments that are equipped with kitchens, and clients prepare their own meals. Clients must either self-medicate or have an outside provider (not DePaul) who assists them with managing their medications. Housing Specialists teach skills and assist tenants in linking to community services. In addition to the housing and support services listed above, DePaul provides rental stipends that make up the total rent and utility costs after deducting client contributions of thirty percent of their income or their public assistance housing funds.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Capacity (beds)/individuals served/units of service (bed days)

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Capacity:	75	75	75	75
Individuals Served:	81	81	84	86
Units of Service:	25,048	26,372	26,500	26,600

2. SELECTED OUTCOME INDICATOR: Percent of clients with psychiatric inpatient admissions while enrolled

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Indicator Value:	6%	10%	8%	6%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Behavioral Health Community Database

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Case Management

CONTRACTOR: EAST HOUSE CORPORATION

CONTRACT AMOUNT: $91,805.00

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): East House operates the Financial Case Management/Community Support Services Case Management program which provides financial counseling and assistance to help clients maintain stable housing while they learn to manage their finances and increase their independence through the achievement of educational and vocational goals. Services are available to adults with a diagnosis of a serious and persistent mental illness who are residents of East House mental health residential programs or were recently discharged from these programs. Services include assessing client need for financial and medical benefits, and assisting clients in establishing and maintaining eligibility for benefits such as SSI, SSD, Medicaid and Medicare; teaching clients banking and budgeting skills and how to advocate for benefits; interpreting financial contracts for clients and family members and coordinating services with the Admissions Coordinator, business office, and program staff; and providing transportation to clients as needed to apply for and maintain benefits.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Individuals served/units of service (hours of care manager)

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	177	201	260	300
Units of Service:	376	104	110	120

2. SELECTED OUTCOME INDICATOR: Percentage of participants demonstrating increased financial independence at discharge

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Indicator Value:	55%	34%	50%	60%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Provider Performance Reports/Consolidated Fiscal Report

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Mental Health Supportive Housing

CONTRACTOR: EAST HOUSE CORPORATION

CONTRACT AMOUNT: $3,968,709.00

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): East House operates a mental health supportive housing program designed to provide assistance to individuals with serious mental illness (SMI) in locating and maintaining safe, affordable housing of their choice. This program includes a total of 225 supportive housing units. The New York State Office of Mental Health defines specific criteria for use of the various bed types provided by this program.

The intent of Supportive Housing is to ensure that individuals with SMI may exercise their right to choose where they are going to live, taking into consideration the recipient's functional skills, the range of affordable housing options available in the area under consideration, and the type and extent of services and resources that recipients require to maintain their residence within the community. Supportive Housing utilizes an approach which creates housing opportunities for people through development of a range of housing options, community support services, rental stipends, and recipient-specific advocacy and brokering. As such, this initiative encompasses community support and psychiatric rehabilitation approaches.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Capacity (beds)/individuals served/units of service (days)

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Capacity:	225	225	225	225
Individuals Served:	240	237	245	250
Units of Service:	78,391	78,338	79,500	80,000

2. SELECTED OUTCOME INDICATOR: Percent of clients remaining in apartment 1 year or more

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Indicator Value:	94%	89%	94%	96%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Behavioral Health Community Database/Provider Performance Reports

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Peer Run Respite Diversion

CONTRACTOR: EAST HOUSE CORPORATION

CONTRACT AMOUNT: $697,663.00

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): East House is the lead agency and contracts with the Mental Health Association of Rochester (MHA) to provide the Peer Respite Diversion (PRD) program. The PRD program is operated and staffed by peers and provides recovery-based alternatives to traditional emergency/acute services. The primary location of PRD program services is Affinity Place at 269 Alexander Steet,Rochester New York 14607. Peer services are services and supports that are provided by a person with lived experience in the program, life area, or with the type of services (i.e., mental health) that are being provided to participants in the program. PRD program services include short-term respite housing (up to 28 days per episode per client); identifying and addressing issues and underlying problems related to the presenting crisis, symptoms, and/or behaviors; warm line services (a phone number that clients can call to receive emotional support from a peer and/or referrals to other services); support groups for clients; referrals and on-site access to community recovery resources; and coordinating and collaborating with other community providers to ensure the effective coordination of services, that clients' needs are met, and effective discharge plans are in place. Follow-up is provided by peers from MHA to ensure additional support is provided as needed after the person leaves.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Capacity (beds)/Number of individuals served/units of service (days)

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Capacity:	8	8	8	8
Individuals Served:	133	108	130	140
Units of Service:	2,320	2,335	2,550	2,600

2. SELECTED OUTCOME INDICATOR: Percent of clients with psychiatric inpatient services within 30 days of discharge

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Indicator Value:	2%	0%	0%	0%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Behavioral Health Community Database

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: 2-1-1/LIFE LINE

CONTRACTOR: GOODWILL OF THE FINGER LAKES, INC.

CONTRACT AMOUNT: $301,361.00

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): Goodwill at 422 S. Clinton Ave, Rochester NY, 14620, 2-1-1/LIFE LINE provides multi-lingual community information and referral services, crisis intervention, and suicide hotline services to Monroe County residents and service providers via telephone (call and text), a website-based service directory, and online chat services. Although 2-1-1/LIFE LINE responds to requests from any caller or requester, only mental health-related service requests from Monroe County residents or service providers are supported by this specific funding. Lifeline provides continuous availability for call-in services (24 hours per day, 365 days per year). For individuals contacting 2-1-1/LIFE LINE, Goodwill staff assess the nature of the call, identify the person's needs, provide active listening and support, collaborate to create a safety or action plan to address the needs, and provide contact and service information about available services. The goal is to provide each person with the appropriate tools to manage their mental health issues and human service needs.

211/LIFE LINE leverages the same capacities of behavioral health to basic needs referrals through 211/LIFE LINE to the 988 line which is the United States based crisis and suicide prevention network previously known as the National Suicide Prevention Lifeline and is a national network of more than 200 crisis centers. In addition to the call in line, the program is a part of the National Lifeline Crisis Center, answering 988 calls 24/7 and chats/ texts 7 days a week from 8a-11p covering a portion of hours in collaboration with other national centers.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Units of service (# of mental health related contacts)

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	n/a	n/a	n/a	n/a
Units of Service:	14,072	34,200	27,000	28,350

2. SELECTED OUTCOME INDICATOR: Referrals to mental health outpatient and prevention services

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Indicator Value:	1,365	13,097	11,000	11,500

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Provider Performance Reports

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Family Crisis Support Services

CONTRACTOR: HILLSIDE CHILDREN'S CENTER

CONTRACT AMOUNT: $670,066.00

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S):

Hillside operates Family Crisis Support Services (FCSS) and Emergency Respite Beds (ERBs). FCSS provides short-term culturally and linguistically appropriate in-home services for children and adolescents between the ages of 5-22 years old with serious emotional disturbance (SED) or significant mental health challenges who are experiencing a mental health crisis that necessitates further support and learning of skills to avert future crises. Services include home-based assessment, family advocacy, proactive crisis planning, and as indicated, skill building and emergency respite. This service array provides short-term, family driven supports to help families build on existing strengths and decrease youth and family stress. Services and supports are individualized and flexible in terms of intensity and duration, with average length of stay of 3-4 months, and are made available at times that best suit the youth and family's preference and identified needs. Families have access to 24/7 crisis intervention provided by on-call program staff. Flexible funds are available to support family needs.

ERBs serve children and adolescents between the ages of 5-22 who have a SED or significant mental health challenge and who are experiencing acute mental health crises that necessitate brief (up to seven days) out-of-home stays to stabilize the situation and facilitate reunification with primary caregivers. Host homes (certified foster families), who have received specialized training in working with youth with mental health challenges, provide 24-hour-a-day supervision for the youth and have access to on-call support services.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Individuals served (FCSS clients)/units of service (hours)

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	119	119	123	126
Units of Service:	1,549	1,324	1,450	1,550

2. SELECTED OUTCOME INDICATOR: Percent of youth discharged from FCSS remaining at home

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Indicator Value:	95%	97%	98%	99%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Behavioral Health Community Database/Provider Performance Reports

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Homeless Support Services

CONTRACTOR: House of Mercy, Inc.

CONTRACT AMOUNT: $179,324.00

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): House of Mercy at 285 Ormond St, Rochester NY, 14605 provides Homeless Support Services for individuals and families with behavioral health needs who are experiencing homelessness or are at risk of becoming homeless. House of Mercy generates their own referrals from libraries, street-outreach, and code blue sweeps, as well as receiving referrals from Department of Human Services, shelters, emergency departments, and clinics. Program services include conducting community outreach using evidence-based strategies to locate, engage, and assess the needs and preferences of the target population; conducting intake, needs assessments, and service planning for those who are interested in pursuing housing options; referring to treatment and support services; referring to safe and affordable housing options, including emergency housing, monitoring and supporting individuals and families after they have been placed into housing to maximize the likelihood that they will maintain their housing; providing assistance with obtaining and maintaining public benefits and other income, coordinating services with other service providers; and documenting service delivery (progress notes and service plans).

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Households Served

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	n/a	n/a	50	150
Units of Service:	n/a	n/a	n/a	n/a

2. SELECTED OUTCOME INDICATOR: Percentage of households that exited the program to permanent housing

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Indicator Value:	n/a	n/a	65%	70%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL:

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Mental Health Supportive Housing

CONTRACTOR: HOUSING OPTIONS MADE EASY, INC. D/B/A RECOVERY OPTIONS MADE EASY

CONTRACT AMOUNT: $1,525,132.00

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): Recovery Options Made Easy operates a mental health supportive housing program designed to provide assistance to individuals with serious mental illness (SMI) in locating and maintaining safe, affordable housing of their choice. This program includes a total of 87 supportive housing units. The New York State Office of Mental Health defines specific criteria for use of the various bed types provided by this program.

The intent of Supportive Housing is to ensure that individuals with serious mental illness may exercise their right to choose where they are going to live, taking into consideration the recipient's functional skills, the range of affordable housing options available in the area under consideration, and the type and extent of services and resources that recipients require to maintain their residence within the community. Supportive Housing utilizes an approach which creates housing opportunities for people through development of a range of housing options, community support services, rental stipends, and recipient specific advocacy and brokering. As such, this initiative encompasses community support and psychiatric rehabilitation approaches.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Capacity (beds)/individuals service/units of service (days)

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Capacity:	87	87	87	87
Individuals Served:	91	83	91	93
Units of Service:	29,725	26,843	28,000	29,000

2. SELECTED OUTCOME INDICATOR: Percent of clients remaining in apartment 1 year or more

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Indicator Value:	98%	78%	85%	90%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Provider Performance Reports/ Behavioral Health Community Database

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Peer Bridger

CONTRACTOR: HOUSING OPTIONS MADE EASY, INC. D/B/A RECOVERY OPTIONS MADE EASY

CONTRACT AMOUNT: $328,763.00

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): Recovery Options Made Easy operates a Peer Bridger program staffed by people with personal experiences with mental health challenges. These peer staff work with individuals transitioning from inpatient psychiatric units into community apartments to ensure a successful transition and linkage to necessary resources to promote community tenure. The program is dedicated to the 116 mental health supportive housing units allocated to Livingston, Monroe, Wayne and Wyoming Counties (100 of which are in Monroe County) for individuals being discharged from inpatient services. Prior to discharge, peer support specialists form supportive relationships with identified individuals on the Rochester Psychiatric Center campus or Article 28 hospitals in the community. After a client is discharged, peer staff act as mentors to promote the development of linkages to the appropriate community-based services. Active outreach based on person-centered approaches is an essential component of the program, as the staff help these individuals overcome obstacles and form supportive networks so that they can live as independently as possible within the community.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Individuals served

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	42	40	45	48
Units of Service:	n/a	n/a	n/a	n/a

2. SELECTED OUTCOME INDICATOR: Percent of clients readmitted to psychiatric inpatient

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Indicator Value:	26%	28%	20%	15%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Provider Performance Reports/ Behavioral Health Community Database

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Skill Building

CONTRACTOR: HOUSING OPTIONS MADE EASY, INC. D/B/A RECOVERY OPTIONS MADE EASY

CONTRACT AMOUNT: $163,293.00

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): Recovery Options Made Easy, Inc. provides skill building services to children and adolescents who reside in Monroe County, who are under the age of 21, who demonstrate mental health-related functional limitations (severe emotional disturbance, significant mental health challenges, and/or complex mental health needs).

Skill building services are provided to compensate for or eliminate functional deficits and interpersonal and/or environmental barriers associated with a youth's behavioral needs. Skill building services will support efforts to maintain youth safely and more successfully in the community. Activities included in the services are expected to be culturally sensitive, task-oriented, and focused on personal and community competence (including but not limited to social and interpersonal skills, daily living skills, coping skills, and intervention implementation). Services provided by the skill builders occur in the youths' homes or in the community and are documented by skill building staff in an accurate and timely manner.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Individuals served/units of service (contact hours)

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	41	31	42	50
Units of Service:	311	235	325	350

2. SELECTED OUTCOME INDICATOR: Percentage of discharged clients who met at least half of goals

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Indicator Value:	63%	61%	70%	75%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Provider Performance Reports/ Behavioral Health Community Database

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Mental Health Supportive Housing

CONTRACTOR: IBERO-AMERICAN ACTION LEAGUE, INC.

CONTRACT AMOUNT: $481,731.00

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): Ibero-American Action League at 124 Evergreen St, Rochester NY, 14605 operates a mental health supportive housing program designed to provide assistance to individuals with serious mental illness (SMI) in locating and maintaining safe, affordable housing of their choice. This program includes a total of 27 supportive housing units. The New York State Office of Mental Health defines specific criteria for use of the various bed types provided by this program.

The intent of Supportive Housing is to ensure that individuals with serious mental illness may exercise their right to choose where they are going to live, taking into consideration the recipient's functional skills, the range of affordable housing options available in the area under consideration, and the type and extent of services and resources that recipients require to maintain their residence within the community. Supportive Housing utilizes an approach which creates housing opportunities for people through development of a range of housing options, community support services, rental stipends, and recipient-specific advocacy and brokering. As such, this initiative encompasses community support and psychiatric rehabilitation approaches.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Capacity (beds)/individuals served/units of service (bed days)

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Capacity:	27	27	27	27
Individuals Served:	27	29	28	27
Units of Service:	8,676	9,019	8,885	8,676

2. SELECTED OUTCOME INDICATOR: Percent of clients remaining in apartment 1 year or more

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Indicator Value:	85%	100%	100%	100%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Behavioral Health Community Database/Provider Performance Reports

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Senior Screening

CONTRACTOR: LIFESPAN OF GREATER ROCHESTER, INC.

CONTRACT AMOUNT: $70,882.00

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): Lifespan operates a Senior Outreach and Screening program that provides enhanced outreach and access to treatment and prevention services to adults 60 years and older with mental illness. The program is located at 1900 S.Clinton Avenue, Rochester New York 14618. The primary objective is to increase the number of clients successfully linked to mental health services. Services include: outreach to identify older adults with untreated mental illness,consultation,linkage, coordination of mental health, social service and primary health services. In addition, education and support are provided to caregivers of older adults with the goal of assisting the person to successfully maintain community living.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Individuals served (found to have untreated mental health issues/ Challenges

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	n/a	n/a	50	57
Units of Service:	n/a	n/a	n/a	n/a

2. SELECTED OUTCOME INDICATOR: Percent of Indiividuals successfully linked to mental health Services

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Indicator Value:	n/a	n/a	85%	90%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Provider Performance Reports

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Advocacy Support Services - Forensic Population

CONTRACTOR: MENTAL HEALTH SERVICES - ERIE COUNTY SOUTHEAST CORPORATION V, DBA SPECTRUM HEALTH AND HUMAN SERVICES

CONTRACT AMOUNT: $164,596.00

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): Spectrum 31 E Main St, Suite #300, St, Rochester, NY 14614 operates a multi-disciplinary team to work with their Forensic Supportive Housing Program, Rochester Psychiatric Center, MCOMH Single Point of Access (SPOA), and NYS Office of Mental Health Division of Forensic Services to provide support for individuals transitioning to the community upon release either directly from prison or from a State Psychiatric Center where they were admitted after release from prison. The supportive services include assessing needs (especially to prevent and respond to crises); assistance with finding and maintaining housing, treatment, and supportive services; making and monitoring service linkages; assistance with substance use and mental health issues (including counseling and assessment); and identification and support of vocational, education, and other prosocial goals, life skills education, training, coaching, and support. Limited program funds are available to support individualized goals and other necessary supports to maintain community tenure. Based on availability and insurance coverage, staff link individuals with billable supportive services existing within the community and educate service providers regarding the unique needs of this population. The program staff also provide ongoing collaboration with residential, clinical, and other service providers.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Individuals served

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	80	82	84	86
Units of Service:	n/a	n/a	n/a	n/a

2. SELECTED OUTCOME INDICATOR: Percentage of individuals who remain in the community without being re-incarcerated

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Indicator Value:	99%	93%	95%	100%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Provider Performance Reports

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Mental Health Supportive Housing (Forensic)

CONTRACTOR: MENTAL HEALTH SERVICES - ERIE COUNTY SOUTHEAST CORPORATION V, DBA SPECTRUM HEALTH AND HUMAN SERVICES

CONTRACT AMOUNT: $578,499.00

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): Spectrum 31 E Main St, Suite #300, Rochester, NY 14614 Forensic Supportive Housing Program provides assistance to individuals with forensic involvement who also have serious mental illness and/or substance use concerns in locating and maintaining safe, affordable housing of their choice. The Forensic Supportive Housing Program works with Rochester Psychiatric Center, MCOMH Single Point of Access)SPOA), and NYS Office of Mental Health Division of Forensic Services to provide support for individuals transitioning to the community upon release either directly from prison or from a State Psychiatric Center, where they were admitted post prison release. The primary objective is to assist individuals to successfully maintain community living. The service includes assistance with searching for, securing, and establishing apartments and assistance with moving to new residence as needed. Services can include assisting with associated expenses, outfitting apartments with necessary household goods and furniture, assisting with budgeting and applying for benefits, providing stipends for rent and utilities, assisting with and teaching how to resolve issues with landlords and how to maintain an apartment, making referrals to treatment and support services, and participating in planning for and addressing client needs with other providers as needed.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Capacity (beds)/individuals served/units (bed days)

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Capacity:	33	33	33	33
Individuals Served:	36	34	30	33
Units of Service:	9,482	9,210	9,149	9,610

2. SELECTED OUTCOME INDICATOR: Percent of clients remaining in apartment 1 year or more

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Indicator Value:	67%	84%	85%	87%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Behavioral Health Cummonity Database/Provider Performance Reports

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Advocacy Services

CONTRACTOR: NAMI ROCHESTER, ASSUMED NAME OF FAMILIES AND FRIENDS OF THE MENTALLY ILL, INC.

CONTRACT AMOUNT: $112,575.00

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): NAMI Rochester 344 N. Goodman St, Rochester, NY 14607 is the local affiliate of the National Alliance on Mental Illness, the nation's largest grassroots mental health organization dedicated to building better lives for Americans affected by mental illness through education, advocacy, awareness, and support. All services are provided and/or facilitated by trained peers who have personally experienced mental illness or who are family members of people with mental illness. NAMI provides services at their main office in Village Gate Square and throughout Monroe County (e.g., at schools, hospitals, inpatient units, community events, colleges, other agencies, etc.).

NAMI's services include:
1. Providing educational workshops on mental illness based on educational curricula about mental illness developed and evaluated by the NAMI national organization.
2. Facilitating peer-run support groups for individuals experiencing mental illness themselves and family members of people with mental illness.
3. Organizing and giving education and awareness presentations to the general public to promote awareness and understanding of mental health issues and support/recovery resources.
4. Providing one-on-one support to individuals and families regarding mental health challenges and support/recovery resources by phone, email, and in person.

A portion of this contract's funding is allocated for a pilot expansion of NAMI's services to additional populations who are under-represented or face difficulties engaging in mental health support services (including but not limited to people from diverse ethnic groups, individuals who are deaf/hard-of-hearing, and elderly individuals). NAMI will conduct outreach to individuals with mental illness and/or their family members who belong to under-served populations and will improve the accessibility and cultural responsiveness of NAMI programs and services to the targeted under-served population(s).

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Individuals served

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	2,457	3,256	2,286	3,000
Units of Service:	n/a	n/a	n/a	n/a

2. SELECTED OUTCOME INDICATOR: Percentage of education participants who agreed that the program was useful

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Indicator Value:	100%	100%	92%	95%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

SOURCE MATERIAL: Provider Performance Reports

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Youth Peer Learning Collaborative

CONTRACTOR: PARTNERS IN COMMUNITY DEVELOPMENT, INC.

CONTRACT AMOUNT: $20,000.00

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): Partners in Community Development, Inc. will provide recruitment, coaching, and mentorship support for Black, Indigenous, and People of Color (BIPOC) youth participating in the Youth Peer Advocacy (YPA) Credentialing Cohorts and Junior Youth Certificate Peer (JYCP) Career Pathways education outreach sessions focusing on youth and young adults ages 14-29. Vendor will provide outreach and engagement to families, caregivers, and young adults impacted by mental health through their own lived experience. Overall goal will be to increase the representation of the BIPOC Family and Youth Peer Advocates working across the health/behavioral health care workforce working, serving, living, worshiping, and volunteering across Monroe County with community-based settings including recreation centers, after school programs, barbershops, libraries, faith centers, and other settings.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Individuals (Youth) Served

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Capacity:	n/a	n/a	n\a	n\a
Individuals Served:	n/a	38	50	60
Units of Service:	n/a	n/a	n/a	n/a

2. SELECTED OUTCOME INDICATOR: Percent of Youth that received YPA Certification

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Indicator Value:	n/a	66%	70%	80%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Provider Performance Report

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Skill Building

CONTRACTOR: PATHWAYS, INC.

CONTRACT AMOUNT: $170,413.00

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): Pathways, Inc. provides skill building services to children and adolescents who reside in Monroe County, under the age of 21, who demonstrate mental health-related functional limitations (severe emotional disturbance, significant mental health challenges, and/or complex mental health needs).

Skill building services are provided to compensate for or eliminate functional deficits and interpersonal and/or environmental barriers associated with a youth's behavioral needs. Skill building services support efforts to maintain youth safely and more successfully in the community. Activities included in the services are expected to be culturally sensitive, task-oriented, and focused on personal and community competence (including but not limited to social and interpersonal skills, daily living skills, coping skills, and intervention implementation). Services provided by the skill builders occur in the youths' homes or in the community and are documented by skill building staff in an accurate and timely manner.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Individuals served/units of service (contact hours)

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	27	17	28	33
Units of Service:	604	234	610	700

2. SELECTED OUTCOME INDICATOR: Percentage of discharged clients who met at least half of goals

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Indicator Value:	53%	46%	60%	70%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Provider Performance Reports/ Behavioral Health Community Database

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Crisis Intervention

CONTRACTOR: ROCHESTER REGIONAL HEALTH or THE ROCHESTER GENERAL HOSPITAL

CONTRACT AMOUNT: $908,708.00

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): The Rochester General Hospital (RGH) operates under Rochester Regional Health along with other affiliated entities. This service provides trained and qualified mental health practitioners who provide crisis intervention services in The RGH Emergency Room at 1425 Portland Avenue, Rochester New York 14621; 24 hours per day. Crisis intervention services, applicable to adults, children and adolescents, are tasked with reducing acute symptoms and restoring individuals to pre-crisis levels of functioning; screening clients for mental health, substance use disorder, developmental disability, and other health issues; triaging and assessing client needs and resources related to the crisis situation; assisting in stabilizing clients' current behavioral and physical health condition; and/or referring clients to appropriate programs or services related to the current crisis and to avoid future crises.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Individuals served/units of service (visits)

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	2,572	2,277	2,400	2,700
Units of Service:	3,843	3,326	3,400	3,450

2. SELECTED OUTCOME INDICATOR: Percent of discharges where client is seen by a community behavioral health provider within seven days

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Indicator Value:	33%	33%	35%	40%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Behavioral Health Community Database

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Personalized Recovery Oriented Services (PROS)

CONTRACTOR: ROCHESTER REGIONAL HEALTH or THE ROCHESTER GENERAL HOSPITAL

CONTRACT AMOUNT: $363,210.00

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): The Rochester General Hospital (RGH) operates under Rochester Regional Health along with other affiliated entities. RGH operates Personalized Recovery Oriented Services (PROS), licensed by the New York State Office of Mental Health, at the Genesee Mental Health Center. This program provides comprehensive recovery oriented services to adults with designated mental illness diagnoses, including serious and persistent mental illness and adults with mental illness and co-occurring substance use disorders. The goal of the program is to integrate treatment, support, and rehabilitation in a manner that facilitates the individual's recovery. The primary objectives for individuals in the program are to: improve functioning, reduce inpatient utilization, reduce emergency services, reduce contact with the criminal justice system, increase employment, attain higher levels of education, and secure preferred housing. Services include a variety of individual and group interventions that fall into one of four categories: Community Rehabilitation and Support, Intensive Rehabilitation, Ongoing Rehabilitation and Support, and Clinical Treatment, an optional component of a PROS program which RGH does provide.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Capacity (slots)/individuals served

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Capacity:	230	230	230	230
Individuals Served:	274	286	296	300
Units of Service:	n/a	n/a	n/a	n/a

2. SELECTED OUTCOME INDICATOR: Percent of participants competitively employed at discharge

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Indicator Value:	11%	10%	14%	18%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Behavioral Health Community Database/Provider Performance Reports

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Personalized Recovery Oriented Services (PROS)

CONTRACTOR: ROCHESTER REHABILITATION CENTER, INC

CONTRACT AMOUNT: $297,913.00

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): Rochester Rehabilitation Center 1000 Elmwood Ave., Rochester, NY 14620 operates Personalized Recovery Oriented Services (PROS) which is licensed by the New York State Office of Mental Health. This programs provides comprehensive recovery-oriented services to adults diagnosed with designated mental illness diagnoses, including serious and persistent mental illness and adults with mental illness and co-occurring substance use disorders. The goal of the program is to integrate treatment, support, and rehabilitation in a manner that facilitates the individual's recovery. The primary objectives for individuals in the program are to improve functionality, reduce inpatient utilization, reduce emergency services, reduce contact with the criminal justice system, increase employment, attain higher levels of education, and secure preferred housing. Services include a variety of individual and group interventions that fall into one of three categories: Community Rehabilitation and Support, Intensive Rehabilitation, and Ongoing Rehabilitation and Support.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Capacity (slots)/individuals served

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Capacity:	170	170	170	170
Individuals Served:	215	189	198	208
Units of Service:	n/a	n/a	n/a	n/a

2. SELECTED OUTCOME INDICATOR: Percent of participants becoming competively employed at discharge

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Indicator Value:	17%	11%	10%	15%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Behavioral Health Community Database/Provider Performance Reports

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Community and Peer Support Services

CONTRACTOR: THE MENTAL HEALTH ASSOCIATION OF ROCHESTER/MONROE COUNTY, INCORPORATED

CONTRACT AMOUNT: $382,018.00

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): The Mental Health Association of Rochester/Monroe County (MHA) 274 N Goodman Street, Unit D103, Rochester NY 14607, provides an array of community and peer support services for adults experiencing mental health challenges (with or without co-occurring substance use disorders) and their families. These services promote consumer empowerment and self-engagement in recovery through education, skill development, peer support, and advocacy. Services are provided individually or in groups. Most services are provided by peers (individuals who have experienced mental health challenges). Services are provided within three core areas:

1. Peer Coaching and Navigation Services, including educating and assisting individuals and families in navigating the mental health system, facilitating peer-run groups at local inpatient units and community locations to provide information on resources and encouragement about returning to the community, benefits advisement, relationship development to empower individuals to engage in their own recovery, assisting with identifying and making progress towards goals, making referrals and supporting individuals in developing life skills, connecting to services, and promoting personal and financial stability.
2. Peer Employment Support Services, including organizing and/or facilitating educational presentations related to obtaining and maintaining employment while coping with mental health challenges and providing peer-based mutual support for those with mental health challenges who are seeking or maintaining employment and economic self-sufficiency.
3. Community Education and Training, including conducting educational presentations and workshops related to wellness and recovery.

In 2024, MHA combined all of their programs under one roof and location.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Individuals served/units of service (contacts)

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	62	173	144	166
Units of Service:	140	702	553	692

2. SELECTED OUTCOME INDICATOR: Percent of Peer Coaching participants with psychiatric inpatient admissions while enrolled

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Indicator Value:	3%	1%	1%	1%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Consolidated Fiscal Report/Behavioral Health Community Database

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Creative Wellness Opportunities

CONTRACTOR: THE MENTAL HEALTH ASSOCIATION OF ROCHESTER/MONROE COUNTY, INCORPORATED

CONTRACT AMOUNT: $318,542.00

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): The Mental Health Association (MHA) 274 N Goodman Street, Unit D103, Rochester NY 14607, offers the Creative Wellness Opportunity (CWO) program that promotes empowerment of and development of community among adults with mental illness (with or without co-occurring substance use disorders) in Monroe County who are living in the community and engaged in their own recovery. CWO provides opportunities to engage in creative arts, mutual support groups, work exploration, recovery opportunities, and advocacy. These services include offering workshops and workspace for expressive arts; holding special events and exhibits to promote community involvement and integration; offering mutual support groups at least once per week; offering additional therapeutic options such as martial arts, meditation, and yoga; providing resources and information to increase consumer awareness and involvement in advocacy by disseminating information about mental health recovery, increasing involvement in recovery-oriented opportunities (such as focus groups), and other personal growth opportunities; and engaging CWO community members in work exploration opportunities (full-time, part-time, time-as-reported, or contracted employment; stipends; or volunteering) which allow adults diagnosed with mental illness the opportunity to facilitate workshops, support the CWO community, develop peer leadership skills, and gain transferable job skills.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Individuals served (unique attendees)/units of service (total workshop attendance)

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	493	294	309	324
Units of Service:	4,976	3,490	3,665	3,884

2. SELECTED OUTCOME INDICATOR: Percent of individuals who self-report that program participation reduced their need for hospitalization.

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Indicator Value:	69%	62%	65%	68%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Annual report

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Family Support Services

CONTRACTOR: THE MENTAL HEALTH ASSOCIATION OF ROCHESTER/MONROE COUNTY, INCORPORATED

CONTRACT AMOUNT: $712,380.00

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): The Mental Health Association (MHA) 274 N Goodman Street, Unit D103, Rochester NY 14607, operates Family Support Services (FSS) which provides a comprehensive range of support services to families in which a child experiences a mental or behavioral health challenge. This service is provided by family peers with lived experience in the mental health services system. Services include family advocacy and mentoring (needs and strengths assessments, emotional support, crisis support, articulating goals, problem-solving, and family skill development), parent training and education, self-help support groups for families and youth, educational advocacy (assisting and coaching families in securing proper services for children at school), transportation assistance for FSS events, referring families to community resources, and outreach to promote the program's services. Particular attention is paid to the development of services that are accessible and appropriate to the needs of multicultural and bilingual populations. The program also provides support to the Priority Access Team, a joint effort with MCOMH and several providers to reduce the number of youth referred for further inpatient services at the Children's Psychiatric Center by providing community-based services. The program surveys family and youth receiving FSS services and trainings regarding satisfaction to obtain feedback on desired outcomes.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Individuals served (families)/units of service (contact hours)

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	299	173	144	160
Units of Service:	444	536	485	525

2. SELECTED OUTCOME INDICATOR: Percent of families discharged with improved Family Assessment of Needs and Strengths (FANS) scores

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Indicator Value:	20%	12%	18%	19%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Provider Performance Reports

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Life Skills

CONTRACTOR: THE MENTAL HEALTH ASSOCIATION OF ROCHESTER/MONROE COUNTY, INCORPORATED

CONTRACT AMOUNT: $236,974.00

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): Mental Health Association (MHA) 274 N Goodman Street, Unit D103, Rochester NY 14607, operates a Life Skills program that offers educational workshops, support groups, and training related to life skills, mental wellness, recovery, and employment to adults who self-identify as having a mental illness. Services are provided by peers (individuals who have personal experience with mental health challenges). The program offers workshops and trainings on topics such as anger management, community involvement, civic engagement, cooking, nutrition, mindfulness, Wellness Recovery Action Planning, and communication skills. Program staff refer clients to other community resources as needed. This program also offers training and support to individuals who would like to become certified peer specialists through NYS Office of Mental Health or other NYS agencies. Services include organizing and facilitating study groups, organizing opportunities to complete online classes, assisting with applications for peer credentials or scholarships, supporting individuals in finding volunteer or paid roles as a peer, and providing long-term support for peers working in the community to promote self-care, professional development, hiring and retention of peers in the workforce and more appropriate usage of peers in the behavioral health workforce.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Individuals served/units of service (visits)

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	92	92	93	98
Units of Service:	3,029	3,100	3,200	3,325

2. SELECTED OUTCOME INDICATOR: Percent of participants with psychaitric inpatient admissions while enrolled

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Indicator Value:	10%	11%	9%	8%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Behavioral Health Community Database

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Self-Help Drop In Center

CONTRACTOR: THE MENTAL HEALTH ASSOCIATION OF ROCHESTER/MONROE COUNTY, INCORPORATED

CONTRACT AMOUNT: $352,885.00

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): The Mental Health Association (MHA) 274 N Goodman Street, Unit D103, Rochester NY 14607, operates a Self-Help Drop-In Center (SHDIC) at 344 N Goodman Street available to adults (18 years old and older) with mental illness (with or without co-occurring substance use disorders) who require support or who are experiencing situational crises. The SHDIC is a community-based, consumer-run program staffed by peers (individuals with personal experience with mental illness). The program hires, trains and monitors the performance of Peer Specialists as well as supporting and encouraging peers to obtain any relevant state credentials. The SHDIC Peer Specialists provide support services, including crisis assessment and intervention, one-on-one and group-based peer support, referral/linkage to community resources, short-term aftercare to individuals experiencing psychosocial crises (e.g., follow-up), and empowerment (e.g., opportunities to share personal stories, community celebrations, and motivational speeches). The SHDIC provides an alternative to emergency room and crisis service utilization when appropriate. This program is open 7 days per week. M-F 1 pm -9 pm and Saturday and Sunday 11am-7 pm.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Individuals served/units of service (visits)

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	55	60	63	68
Units of Service:	1,045	694	725	761

2. SELECTED OUTCOME INDICATOR: Percent of clients with psychiatric emergency department services while enrolled

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Indicator Value:	15%	13%	21%	15%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Behavioral Health Community Database

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Suicide Prevention

CONTRACTOR: THE MENTAL HEALTH ASSOCIATION OF ROCHESTER/MONROE COUNTY, INCORPORATED

CONTRACT AMOUNT: $20,000.00

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): The Mental Health Association (MHA) of Rochester located at 274 N. Goodman Street Suite D103 Rochester, NY 14607 facilitates The Partners for Suicide Prevention Coalition (P4SP). This coalition is committed to ensuring that community members of all ages have access to accurate suicide prevention resources to help themselves and/or a loved one. As a multi-partner coalition, the coalition promotes a collaborative approach to raise awareness on suicide prevention, intervention, post-vention, and recovery. P4SP provides suicide prevention education, awareness and promotional materials, which includes a website, various types of support groups for families and loved ones and post-vention resource kits.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Individuals Served

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	n/a	n/a	100	200
Units of Service:	n/a	n/a	n/a	n/a

2. SELECTED OUTCOME INDICATOR: Percent of individuals satisfied with conference

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Indicator Value:	n/a	n/a	80%	85%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL:

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Adult Care Management (Non-Medicaid)

CONTRACTOR: THE UNITY HOSPITAL OF ROCHESTER

CONTRACT AMOUNT: $490,437.00

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): The Unity Hospital operates under Rochester Regional Health along with other affiliated entities. This program provides care management services to adults with serious mental illness who are not eligible for Medicaid and, consequently, Health Home Care Management services. Non-Medicaid Care Management services mirror Health Home Care Management services and include: Comprehensive Care Management Planning, Care Coordination, Health Promotion, Transitional Care (including appropriate follow-up from inpatient to other settings), Individual and Family Support Services, and referrals to community and social supports tailored to the individual needs. Care management also includes conducting outreach to referred clients, conducting intakes and assessments of client needs and strengths, and service planning and coordination. Care management services are also provided for those with Assisted Outpatient Treatment (AOT) orders who do not have Medicaid. Service dollars to support service plan goals are available for individuals who have a diagnosed mental illness who do or do not have Medicaid. The program is expected to be culturally responsive and provides aggressive outreach, linkage, and advocacy to community resources.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Individuals served

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	107	165	170	175
Units of Service:	n/a	n/a	n/a	n/a

2. SELECTED OUTCOME INDICATOR: Percent of clients with positive outcome at discharge

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Indicator Value:	91%	85%	89%	91%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: provider performance reports

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Assertive Community Treatment

CONTRACTOR: THE UNITY HOSPITAL OF ROCHESTER

CONTRACT AMOUNT: $177,496.00

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): The Unity Hospital operates under Rochester Regional Health along with other affiliated entities. Rochester Regional Health System (RRHS) operates a 48 slot Assertive Community Treatment (ACT) team which delivers mobile, community-based comprehensive services to individuals who have been diagnosed with severe mental illness and whose needs have not been well met by more traditional service delivery approaches (i.e., clinic-based outpatient treatment). ACT teams are licensed by the New York State Office of Mental Health and adhere to all appropriate regulations and guidelines. The goal of ACT is to deliver integrated services of the recipients' choice, to assist recipients in making progress toward goals, and to adjust services over time to meet recipients' changing needs. The program prioritizes individuals referred from the Rochester Psychiatric Center campus and other high need individuals in the community. Staff have immediate access to wrap-around funding to meet emergent and client-specific needs (e.g., food and clothing). The RRHS ACT Team cooperates with, and is an active participant in Monroe County Single Point of Access (SPOA) meetings and works with Monroe County Office of Mental Health to identify the resources needed to stabilize individuals in the program.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Capacity (slots)/individuals served/units of service (visits)

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Capacity:	48	48	48	48
Individuals Served:	62	72	80	85
Units of Service:	2,093	2,753	2,800	2,825

2. SELECTED OUTCOME INDICATOR: Percent of clients with psychiatric inpatient admissions while enrolled

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Indicator Value:	26%	24%	19%	17%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Behavioral Health Community Database

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Home Based Crisis Intervention

CONTRACTOR: THE UNITY HOSPITAL OF ROCHESTER

CONTRACT AMOUNT: $1,064,982.00

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): The Unity Hospital operates under Rochester Regional Health. The New York State Office of Mental Health established the Home Based Crisis Intervention (HBCI) Program, a family preservation initiative, to prevent the unnecessary inpatient psychiatric hospitalization of children and youth. The overall goal of the program is to provide culturally and linguistically appropriate intensive in-home crisis intervention services to youth who are at imminent risk of psychiatric hospitalization; services are designed to be short-term and may range from two to eight weeks of duration. The program consists of clinical and administrative staff and has the capacity to serve a maximum of 16 families at any point in time. In order to provide timely intervention to youth and family in crisis, services begin within 24 hours after referral to the program. The intake and assessment process is designed to ensure that an individualized intensive support plan is developed to support efforts to maintain children safely in the community. As intensive in-home services are individualized, the length of stay and frequency of contact will vary based on youth and family needs. HBCI staff, the family and referral source work together to identify the specific goals and objectives, how these goals will be measured, and determine the anticipated duration in the program.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Capacity (slots)/individuals served/units of service (direct staff hours)

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Capacity:	16	16	16	16
Individuals Served:	86	87	97	100
Units of Service:	1,007	911	1,110	1,250

2. SELECTED OUTCOME INDICATOR: Percent of clients with psychiatric inpatient admissions within 30 days of discharge

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Indicator Value:	4%	5%	3%	2%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Behavioral Health Community Database

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Personalized Recovery Oriented Services (PROS)

CONTRACTOR: THE UNITY HOSPITAL OF ROCHESTER

CONTRACT AMOUNT: $363,210.00

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): The Unity Hospital operates under Rochester Regional Health along with other affiliated entities. Personalized Recovery Oriented Services (PROS) services are licensed by the New York State Office of Mental Health and located at 81 Lake Ave.,Rochester New York 14608. This program provides comprehensive recovery oriented services to adults with designated mental illness diagnoses, including serious and persistent mental illness and adults with mental illness and co-occurring substance use disorders. The goal of the program is to integrate treatment, support, and rehabilitation in a manner that facilitates the individual's recovery. The primary objectives for individuals in the program are to: improve functioning, reduce inpatient utilization, reduce emergency services, reduce contact with the criminal justice system, increase employment, attain higher levels of education, and secure preferred housing. Services include a variety of individual and group interventions that fall into one of four categories: community rehabilitation and support, intensive rehabilitation, ongoing rehabilitation and support, and clinical treatment, an optional component of a PROS program which Unity does provide.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Capacity (slots)/individuals served

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Capacity:	178	178	178	178
Individuals Served:	260	251	280	285
Units of Service:	n/a	n/a	n/a	n/a

2. SELECTED OUTCOME INDICATOR: Percent of participants becoming competitively employed at discharge

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Indicator Value:	10%	10%	15%	20%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Behavioral Health Community Database/Provider Performance Reports

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Adult Care Management (Non-Medicaid)

CONTRACTOR: UNIVERSITY OF ROCHESTER OFFICE OF MENTAL HEALTH

CONTRACT AMOUNT: $639,702.00

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): Strong Memorial Hospital 601 Elmwood Avenue, Rochester NY, 14642 provides care management services to adults with serious mental illness who are not eligible for Medicaid and, consequently, Health Home Care Management services. Non-Medicaid Care Management services mirror Health Home Care Management services and include: Comprehensive Care Management Planning, Care Coordination, Health Promotion, Transitional Care (including appropriate follow-up from inpatient to other settings), Individual and Family Support Services, and referrals to community and social supports tailored to the individual needs. Care management also includes conducting outreach to referred clients, conducting intakes and assessments of client needs and strengths, and service planning and coordination. Care management services are also provided for those with Assisted Outpatient Treatment (AOT) orders who do not have Medicaid. Service dollars to support service plan goals are available for individuals who have a diagnosed mental illness who do or do not have Medicaid. The program is expected to be culturally responsive and provides aggressive outreach, linkage, and advocacy to community resources.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Individuals served

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	175	203	267	295
Units of Service:	n/a	n/a	n/a	n/a

2. SELECTED OUTCOME INDICATOR: Percent of clients with positive outcome at discharge

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Indicator Value:	56%	37%	60%	63%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Program database

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Assertive Community Treatment - Project ACT

CONTRACTOR: UNIVERSITY OF ROCHESTER OFFICE OF MENTAL HEALTH

CONTRACT AMOUNT: $214,468.00

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): Strong Memorial Hospital 601 Elmwood Avenue, Rochester NY, 14642 operates a 68-slot Assertive Community Treatment (ACT) team which delivers mobile, community-based comprehensive services to individuals who are diagnosed with severe and persistent mental illness that seriously impair their functioning and result in long-term use of high-level services and whose needs have not been well met by more traditional service delivery approaches (e.g., clinic-based outpatient treatment). ACT Teams are licensed by the New York State Office of Mental Health and adhere to all appropriate regulations and guidelines. Of the 68 slots, 48 prioritize individuals referred from the Rochester Psychiatric Center campus and other high-need individuals in the community, and 20 slots prioritize individuals with criminal justice involvement. The goal of ACT is to deliver integrated services of the recipients' choice, to assist recipients in making progress toward goals, and to adjust services over time to meet recipients' changing needs. Staff have immediate access to wrap-around funding to meet emergent and client-specific needs (e.g., food and clothing). The Strong Project ACT Team cooperates with, and is an active participant in Monroe County Single Point of Access (SPOA) meetings and works with MCOMH to identify the resources needed to stabilize the individuals in the program.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Capacity (slots)/individuals served/units of service (visits)

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Capacity:	68	68	68	68
Individuals Served:	61	62	65	67
Units of Service:	2,976	2,816	3,000	3,150

2. SELECTED OUTCOME INDICATOR: Percent of clients with psychiatric inpatient admissions while enrolled

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Indicator Value:	18%	31%	18%	17%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Behavioral Health Community Database

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Assertive Community Treatment - Strong Ties ACT

CONTRACTOR: UNIVERSITY OF ROCHESTER OFFICE OF MENTAL HEALTH

CONTRACT AMOUNT: $137,114.00

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): Strong Memorial Hospital 601 Elmwood Avenue, Rochester NY, 14642 operates a 68-slot Assertive Community Treatment (ACT) team which delivers mobile, community-based comprehensive services to individuals who are diagnosed with severe and persistent mental illness that seriously impair their functioning and result in long-term use of high-level services and whose needs have not been well met by more traditional service delivery approaches (e.g., clinic-based outpatient treatment). ACT Teams are licensed by the New York State Office of Mental Health and adhere to all appropriate regulations and guidelines. The goal of ACT is to deliver integrated services of the recipients' choice, to assist recipients in making progress toward goals, and to adjust services over time to meet recipients' changing needs. The program prioritizes individuals referred from the Rochester Psychiatric Center campus and other high need individuals in the community. Staff have immediate access to wrap-around funding to meet emergent and client-specific needs (e.g., food and clothing). The Strong Ties ACT Team cooperates with, and is an active participant in Monroe County Single Point of Access (SPOA) meetings and works with MCOMH to identify the resources needed to stabilize the individuals in the program.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Capacity (slots)/individuals served/units of service (visits)

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Capacity:	68	68	68	68
Individuals Served:	61	61	63	65
Units of Service:	2,976	3,447	3,250	3,300

2. SELECTED OUTCOME INDICATOR: Percent of clients with psychiatric inpatient admissions while enrolled

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Indicator Value:	18%	9%	5%	4%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Behavioral Health Community Database

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Clinic Creative Engagement Program (Pilot)

CONTRACTOR: UNIVERSITY OF ROCHESTER OFFICE OF MENTAL HEALTH

CONTRACT AMOUNT: $102,025.00

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): The University of Rochester Medical Center (URMC) located at 601 Elmwood Avenue Rochester NY 14642 operates the Pediatric Behavioral Health and Wellness Creative Arts Therapy Program. This program allows children and youth to use their love of arts to drive therapeutic outcomes. URMC provides individuals with opportunities to engage in creative arts, to help children reach their full potential by promoting healthy development through therapy groups. These groups use art, music, drama, and other innovative interventions to drive positive outcomes in children and adolescents. Role playing in therapy is a method practitioners use to treat issues associated with tough topics for children and youth , such as self-esteem, bullying, gender identity, sexuality, addressing and recovering from trauma, and building healthy relationships. These services include, but not be limited to, the following: Social-skills development, community, problem-solving and role playing; Creative processes to real-world scenarios; Use of art, music, drama, and other innovative interventions. These services will provide an alternative to emergency room and crisis service utilization when appropriate and will provide low-barrier access to peer-based support.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Individuals Served

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	n/a	n/a	n/a	n/a
Units of Service:	n/a	n/a	n/a	n/a

2. SELECTED OUTCOME INDICATOR: Percentage of Individuals who did not require ED visits post 30 days.

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Indicator Value:	n/a	n/a	n/a	n/a

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL:

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Forensic Fellowship Program

CONTRACTOR: UNIVERSITY OF ROCHESTER OFFICE OF MENTAL HEALTH

CONTRACT AMOUNT: $111,343.00

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): Strong Memorial Hospital 601 Elmwood Avenue, Rochester NY, 14642 provides an experienced supervising psychiatrist and fellowship program trainees to collaborate with the MCOMH Socio-Legal Center (SLC) in operating a Forensic Fellowship Program. Services will be performed at the SLC (80 W Main Street, Rochester NY 14614) and in criminal justice facilities (including but not limited to courts and jails). The duties performed by the supervisor and fellowship program trainees will include but are not limited to the following services:

1. Completion of court-ordered competency examinations and mental health evaluations: Strong will provide mental health evaluations and examinations of competence per New York Criminal Procedure Law Article 730, review data, prepare mental health evaluation reports for the referring party within timelines established by the referring party and/or MCOMH SLC standards, advise MCOMH staff about individuals' psychiatric condition(s) and needs for treatment, and provide court testimony. Mental health and competency evaluations are ordered by local, county, and state courts or requested by justice-related agencies (such as but not limited to Probation and Pre-Trial Services) for criminal justice-involved individuals who are 16 years old and older. A minimum of eight evaluation slots will be provided per week. Information and documentation will be provided by Vendor within 24 hours of service provision.

2. Clinical consultation and supervision: Strong will provide forensic psychiatrists with sufficient training and experience (NYS license and at least five years of clinical and forensic experience) to supervise and mentor fellowship program trainees, provide clinical consultation to trainees.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Units of service (Evaluations completed by program staff)

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	n/a	n/a	n/a	n/a
Units of Service:	83	78	62	70

2. SELECTED OUTCOME INDICATOR: Percent of evaluations submitted to court on time

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Indicator Value:	80%	91%	94%	95%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Socio-Legal Center Reports

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Transitional Living - Crisis Housing

CONTRACTOR: UNIVERSITY OF ROCHESTER OFFICE OF MENTAL HEALTH

CONTRACT AMOUNT: $193,893.00

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): Strong Memorial Hospital 601 Elmwood Avenue, Rochester NY, 14642 maintains two crisis/respite apartments/long-stay rooms, rented by Strong from landlords in Monroe County, to serve high-need and/or high-risk individuals who have a serious mental illness, are in a mental health crisis or impending crisis, and involved in care management with Strong. Strong pays for the rent, utilities, necessary furnishings, and other required costs related to both thresholds. Strong assists clients in avoiding acute service utilization by collaborating with housing support staff, if applicable, as well as care management staff to comprehensively address client crisis situations, assist clients in securing permanent housing, and address other individualized needs. This program assists clients and their provider teams in developing plans to find and secure permanent housing as quickly as possible and assists clients in saving money or securing funding for future housing costs while living in the transitional crisis/respite apartment.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Capacity (bed)/individuals served/units of service (days)

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Capacity:	2	2	2	2
Individuals Served:	5	6	6	6
Units of Service:	556	324	340	357

2. SELECTED OUTCOME INDICATOR: Percent of clients discharged who go directly to community housing thus diverting hospitalization

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Indicator Value:	100%	100%	100%	100%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Provider Performance Reports

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Care Coordination

CONTRACTOR: VILLA OF HOPE

CONTRACT AMOUNT: $823,090.00

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): Villa of Hope 3300 Dewey Avenue, Rochester, NY 14616 provides Care Coordination services to children and youth up to age 21 and their families. Children and youth in the program have a serious emotional disturbance or have experienced trauma. To be served by Care Coordination, the child/youth cannot be eligible for Medicaid Children's Health Home Care Management (HHCM). The services are tailored to meet the needs of youth at high risk of repeated or lengthy psychiatric hospitalization or other out-of-home placement. This program is home-based, focused on keeping children and youth at home and connected to their own communities, and is driven by System of Care values (family-driven, youth-guided, culturally and linguistically competent, trauma-informed, best practice oriented, and community- based). Care Coordinators collaborate regularly with other providers that work with the youth/family, including school personnel, treatment providers, and physicians, to provide supports based on the child's and family's individualized needs. The program offers outreach and intake services, assessment of child and family needs and strengths, goal and service planning, advocacy for appropriate services, coaching youth and families in self-advocacy, assistance in navigating and understanding services, referring youth and family members to services, planning for long-term supports, and providing crisis intervention and support through a 24-hour telephone number. Services are provided to model Children's HHCM services. Wrap-around funds are also available to purchase goods and services to support the needs of youth and families in Villa's care coordination and Children's HHCM services who have a serious emotional disturbance or mental health diagnosis.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Capacity (slots)/individuals served/units of service (visits)

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Capacity:	98	56	56	56
Individuals Served:	122	119	120	126
Units of Service:	1,487	1,432	1,485	1,510

2. SELECTED OUTCOME INDICATOR: Percent of clients with psychiatric inpatient admissions while enrolled

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Indicator Value:	7%	4%	4%	3%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Behavioral Health Community Database

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Psychiatric Emergency Department Diversion Program (Hope Place)

CONTRACTOR: VILLA OF HOPE

CONTRACT AMOUNT: $570,118.00

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): Villa of Hope operates a peer-run and peer-staffed Diversion Center (Hope Place) to provide a safe, supportive, and non-judgmental environment as an alternative to psychiatric Emergency Department (ED) visits for adults experiencing non-acute mental health-related crisis or pre-crisis in Monroe County. These services are located at 1099 Jay Street, Bldg P, Rochester NY 14611. Hope Place follows the "Living Room" model by offering a welcoming and comfortable physical space in which individuals can come and go as they please and speak with peer staff (individuals with personal experience with mental health challenges) to assist them in coping with their crisis and returning to a higher level of functioning as quickly as possible. Hope Place also offers referrals and follow-up services based on clients' needs.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Individuals served/units of service (visits)

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	226	204	222	233
Units of Service:	1,557	1,300	1,800	1,985

2. SELECTED OUTCOME INDICATOR: Percent of visits for which the individual does not have a psychiatric ED visit within 30 days after the visit

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Indicator Value:	99%	93%	97%	98%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Behavioral Health Community Database

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Youth Peer Mentoring

CONTRACTOR: VILLA OF HOPE

CONTRACT AMOUNT: $163,029.00

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): Villa of Hope 3300 Dewey Avenue, Rochester, NY 14616.provides youth peer mentoring services to youth under the age of 21 who are experiencing social, medical, emotional, developmental, substance use, and/or behavioral challenges in their home, school, placement, and/or community-centered services. These services are provided by a young adult who experienced similar challenges in their youth. Services are intended to develop and achieve the identified goals and/or objectives as set forth in the youth's individualized treatment plan. The structured, scheduled activities provided by this service emphasize the opportunity for the youth to expand the skills and strategies necessary to move forward in meeting their personal, individualized life goals, develop self-advocacy skills, and to support their transition into adulthood.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Individuals served/units of service (quarter hours direct service)

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	7	18	28	35
Units of Service:	49	493	520	600

2. SELECTED OUTCOME INDICATOR: Percent of youth discharged with one or more Youth Mentoring goals achieved

Program Year	2023 Actual	2024 Actual	2025 Annualized	2026 Projected
Indicator Value:	43%	100%	100%	100%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Behavioral Health Community Database/Provider Performance Reports

Office of **the County Executive**

Monroe County, New York

Adam J. Bello
County Executive

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Committee Assignment
HUMAN SERVICES -L
WAYS & MEANS

November 6, 2026

To The Honorable
Monroe County Legislature
407 County Office Building
Rochester, New York 14614

Subject: Authorize Contracts for the Provision of Mental Health, Developmental Disability, Alcoholism and Substance Abuse, and Opioid and Addiction Services in 2027 for the Monroe County Office of Mental Health

Honorable Legislators:

I recommend that Your Honorable Body authorize contracts with the agencies listed in Attachment A in an amount not to exceed $59,718,560 for the provision of mental health, developmental disability, alcoholism and substance abuse, and opioid and addiction services for Monroe County residents for the period of January 1, 2027 through December 31, 2027.

The Monroe County Office of Mental Health ("MCOMH") coordinates and manages community behavioral health services in accordance with the local Mental Hygiene Services Plan by contracting with a wide range of local, direct services agencies. Funding for 2027 represents a net increase of $7,476,547 from 2026. MCOMH will have an increase in state aid associated with the New York State Office of Mental Health ("OMH") and the Office of Addiction Services and Supports ("OASAS") due to cost-of-living adjustments as well as increases related to several new programs (Gambling Peer Services, Clubhouse Awards, Children's Single Point of Access ("C-SPOA"), Assisted Outpatient Treatment ("AOT"), and Enhanced Voluntary Agreement ("EVA") awards and continuance of programs such as the Opioid Open Access program, the stewardship Outpatient Support Program, and OMH approved unallocated distributions.

Numerous Requests for Proposals were solicited for these services and the chosen vendors were selected as the most qualified to provide these services.

Please refer to the attached Purchase of Services Information Forms for disclosure of information required pursuant to Resolution 223 of 2007 as amended by Resolution 11 of 2008.

The specific legislative actions required are:

1. Authorize the County Executive, or his designee, to execute contracts, and any amendments thereto, with the agencies listed in Attachment A and any other agencies as necessary to provide mental health, developmental disability, alcoholism and substance abuse, and opioid and addiction services for Monroe County residents in an amount not to exceed $59,718,560 for the period of January 1, 2027 through December 31, 2027.

2. Authorize the County Executive to appropriate any subsequent years of these funds, any returned contractor funds, or any deferred revenue, in accordance with the grant terms, to reappropriate any unencumbered balances during the grant period according to the grantor requirements, and to make any necessary funding modifications within the grant guidelines to meet contractual commitments, and to enter into any amendments to extend the time period of the grant.

3. Should funding of these programs be modified or terminated for any reason, the County Executive is hereby authorized to terminate or modify the program(s) and where applicable, to terminate or abolish some or all positions funded under such program(s). Any termination or abolishment of positions shall be in accordance with the New York State Civil Service Law, and when applicable, the terms of any labor agreement affecting such positions.

This action is a Type II Action pursuant to 6 NYCRR § 617.5(c)(26) ("routine or continuing agency administration and management, not including new programs or major reordering of priorities that may affect the environment") and is not subject to further review under the State Environmental Quality Review Act.

Funding for these contracts is included in the proposed 2027 operating budget of the Department of Human Services, general fund 1001, cost center 570201, Mental Health Services, program PG570001, Mental Health Services; cost center 570202, Developmental Disabilities Services, program PG570002, Developmental Services; cost center 570203, Alcohol and Other Substance Abuse Services, program PG570000, Addiction Services; cost center 570401, Opioid & Addiction Services. No additional net County support is required in the current Monroe County budget.

Each of these contractors has been reviewed for not-for-profit corporate status and the records in the Office of the Monroe County Treasury have indicated that none of these agencies owe any delinquent Monroe County property taxes.

I recommend that this matter be referred to the appropriate committee(s) for favorable action by Your Honorable Body.

Sincerely,

Adam J. Bello
Monroe County Executive

Attachment A - 2027

Prog Type	Vendor Agency	Program Name	Vendor Total	Service Total	Program Description
LGU - Local Government Unit Services - TOTAL				7,672,850	
LGU Functions	COORDINATED CARE SERVICES, INC.	COORDINATED CARE Local Government Unit Functions(G&C)	1,729,953		Staff and resources necessary to support essential Local Governmental Unit (LGU) functions including monitoring and managing subcontractor programs and financial performance, measuring effectiveness of behavioral health service system and supporting planning for system change and system development. Includes - OASAS, OPWDD, and unallocated funding.
LGU Priority Services	COORDINATED CARE SERVICES, INC.	COORDINATED CARE LGU Priority Services(G&C)	5,942,897	7,672,850	Staff to support Single Point of Access (SPOA) programs, Assisted Outpatient Treatment (AOT), Transition Management (TM), Rapid Engagement Delivery (RED) and Forensic Intervention Team (FIT) programs. Includes - OASAS, OPWDD, OPIOID- Grief Counseling Program- LGU, and unallocated funding.
MH - Mental Health Services - TOTAL				35,187,684	
Assertive Community Treatment	UNITY HOSPITAL - ROCHESTER REGIONAL HEALTH	UNITY Assertive Community Treatment, ACT Wrap & IPS	182,143		ACT Teams provide mobile intensive treatment and support to people with psychiatric disabilities. The focus is on the improvement of an individual's quality of life in the community and reducing the need for inpatient care, by providing intense community
Assertive Community Treatment	STRONG/ UNIVERSITY OF ROCHESTER	STRONG Assertive Community Treatment, ACT Wrap & IPS Supported Employment - Strong Ties ACT and Project ACT	321,503	503,646	
C&Y Skill Building	PATHWAYS, INC.	PATHWAYS Skill Building	174,890		Skill building services are designed to work with children and their families to implement interventions outlined in the plan to compensate for or eliminate functional deficits and
C&Y Skill Building	RECOVERY OPTIONS MADE EASY	ROME Skill Building	167,579	342,469	
Forensic Fellowship Program	STRONG/ UNIVERSITY OF ROCHESTER	STRONG Forensic Fellowship Program	114,266	114,266	The Forensic Fellowship Program, as part of the Office of Mental Health's Socio-Legal Center, provides court ordered competency examinations, mental health evaluations, and consultations for criminal justice involved individuals age 16 and older.
MH Adult Community Support	COMPEER ROCHESTER, INC.	COMPEER Care Coordination Adult One-to-One(C)	341,720		Community based services to support adults with mental health issues and their families. Services include advocacy, peer support, assistance navigating the service system and mentoring.
MH Adult Community Support	EAST HOUSE CORPORATION	EAST HOUSE Case Management	94,214		
Community Support	IBERO-AMERICAN ACTION LEAGUE, INC.	IBERO Prevention Education and Intervention	15,000		
MH Adult Community Support	NAMI- FAMILIES AND FRIENDS OF THE MENTALLY ILL, INC D/B/A/ NAMI ROCHESTER	NAMI Advocacy Services & Peer Support Stipend	111,441		
MH Adult Community Support	GOODWILL OF THE FINGERLAKES	GOODWILL 2-1-1/Life Line(C)	308,228		
MH Adult Community Support	RECOVERY OPTIONS MADE EASY	ROME Peer Bridger	337,390		
MH Adult Community Support	ROCHESTER REGIONAL HEALTH (ROCHESTER MENTAL HEALTH CENTER)	RMHC Peer Advocacy Team for Habilitation	201,480		
MH Adult Community Support	THE MENTAL HEALTH ASSOCIATION OF ROCHESTER/MONROE COUNTY, INC.	MENTAL HEALTH ASSOCIATION Community and Peer Support Services (Consumer Self-Help & Coaching)(C)	392,262		
MH Adult Community Support	THE MENTAL HEALTH ASSOCIATION OF ROCHESTER/MONROE COUNTY, INC.	MENTAL HEALTH ASSOCIATION Creative Wellness Opportunities	326,905		
MH Adult Community Support	THE MENTAL HEALTH ASSOCIATION OF ROCHESTER/MONROE COUNTY, INC.	MENTAL HEALTH ASSOCIATION Life Skills	243,194		
MH Adult Community Support	THE MENTAL HEALTH ASSOCIATION OF ROCHESTER/MONROE COUNTY, INC.	MENTAL HEALTH ASSOCIATION Self-Help Drop In Center	362,147		
MH Adult Community Support	THE MENTAL HEALTH ASSOCIATION OF ROCHESTER/MONROE COUNTY, INC.	MENTAL HEALTH ASSOCIATION Partners in Suicide Prevention	20,000		
MH Adult Community Support	UNITY HOSPITAL - ROCHESTER REGIONAL HEALTH	UNITY Jail Diversion Drop-Off Center	1,402,715		
MH Adult Community Support	SPECTRUM HEALTH AND HUMAN SERVICES	SPECTRUM Advocacy Support Services - Forensic Population	168,916		
MH Adult Community Support	VILLA OF HOPE	VILLA Psychiatric Emergency Department Diversion Program	585,081	4,910,883	
MH C&Y Community Support	COORDINATED CARE SERVICES, INC.	Coordinated Care- Multicultural Teen Prevention and Support Program (3990)	226,473		Community based services to support youth with mental health issues and their families. Services include early intervention/prevention and mentoring. Some programs also provide
MH C&Y Community Support	CHILDREN'S INSTITUTE, INC.	CHILDREN'S INSTITUTE Primary Project	297,083		
MH C&Y Community Support	COMPEER ROCHESTER, INC.	COMPEER Family Support Services & Advocacy Support Services (Youth 1.1)	177,738		
MH C&Y Community Support	COMPEER ROCHESTER, INC.	COMPEER Youth Mentor	117,778		
Community Support	PARTNERS IN COMMUNITY DEVELOPMENT- BIPOC PEEEEEK	PARTNERS Youth Peer Advocacy Learning Collaborative	20,000		
Community Support	STRONG/ UNIVERSITY OF ROCHESTER	STRONG Creative Arts Engagement Program	104,703		
MH C&Y Community Support	THE MENTAL HEALTH ASSOCIATION OF ROCHESTER/MONROE COUNTY, INC.	MENTAL HEALTH ASSOCIATION Family Support Services(C)	730,656		
MH C&Y Community Support	VILLA OF HOPE	VILLA Youth Mentor	167,308	1,841,739	
MH Care Management	DEPAUL COMMUNITY SERVICES, INC.	DEPAUL Care Management - Flex funds (Client Dollars)	19,264		Care coordination and support for individuals with mental health issues provided by advocating for needed services, helping to find their way through complex health care and social services systems, providing support for improved community service linkages, performing on-site crisis intervention and skills teaching when other services are not available, and if the recipient is eligible, working to secure Medicaid benefits with the goal of subsequent Health Home enrollment.
MH Care Management	ROCHESTER REGIONAL HEALTH (ROCHESTER MENTAL HEALTH CENTER)	RMHC Adult Care Management & Service Dollars	693,023		
MH Care Management	UNITY HOSPITAL - ROCHESTER REGIONAL HEALTH	UNITY Adult Care Management & Service Dollars	503,308		
MH Care Management	STRONG/ UNIVERSITY OF ROCHESTER	STRONG Adult Care Management & Service Dollars	720,565		
MH Care Management	VILLA OF HOPE	VILLA Care Coordination / Care Management - Children and Youth & Service Dollars	844,693	2,780,853	
MH Crisis Services	HILLSIDE CHILDREN'S CENTER	HILLSIDE Family Crisis Support Services	757,254		Crisis intervention services, applicable to adults, children and adolescents, are intended to

MH Crisis Services	ROCHESTER REGIONAL HEALTH (THE ROCHESTER GENERAL HOSPITAL & RMHC)	RGH & RMHC Crisis Intervention & ED	932,558		reduce acute symptoms, restore individuals to pre-crisis levels of functioning and to build and strengthen natural supports to maximize community tenure. Examples of where these services may be provided include emergency rooms and residential settings. Provision of services may also be provided by a mobile treatment team, generally at a consumer's residence or other natural setting.
MH Crisis Services	UNITY HOSPITAL - ROCHESTER REGIONAL HEALTH	UNITY Home Based Crisis Intervention	1,092,934		
MH Crisis Services	STRONG/ UNIVERSITY OF ROCHESTER	STRONG Transitional Living - Crisis Housing	198,982	2,881,726	
MH Outreach	LIFESPAN OF GREATER ROCHESTER, INC.	LIFESPAN Senior Screening - Mental Health Outreach	72,742		
MH Outreach	HOUSE OF MERCY	HOUSE OF MERCY Homeless Support Services(C)	182,233	254,975	
MH Peer Respite Services	EAST HOUSE CORPORATION	EAST HOUSE Peer Run Respite Diversion (Affinity Place)	715,975	715,975	A peer-based, recovery-oriented housing alternative to existing crisis/acute services for individuals experiencing a psychiatric crisis, thereby diverting the need for more intensive (and potentially costly) services.
MH Supportive Housing	DEPAUL COMMUNITY SERVICES, INC.	DEPAUL Mental Health Supportive Housing(Trad. Long, MRT, RCE)	3,538,994		Supportive Housing utilizes an approach which creates housing opportunities for people through development of a range of housing options, community support services, rental stipends, and recipient specific advocacy and brokering.
MH Supportive Housing	EAST HOUSE CORPORATION	EAST HOUSE Mental Health Supportive Housing (ILP, HOPE, Choices)	4,105,621		
MH Supportive Housing	IBERO-AMERICAN ACTION LEAGUE, INC.	IBERO Mental Health Supportive Housing(+RPC/RIV)	502,419		
MH Supportive Housing	RECOVERY OPTIONS MADE EASY	ROME Mental Health Supportive Housing(MRT,RCE,Long,Reg,Trans)	1,578,071		
MH Supportive Housing	SPECTRUM HEALTH AND HUMAN SERVICES	SPECTRUM Mental Health Supportive Housing	598,579	10,323,684	
Ongoing Integrated Supported Employment Services	DEPAUL COMMUNITY SERVICES, INC.	DEPAUL Ongoing Integrated Supported Employment Services (OISE)	331,426	331,426	
Personalized Recovery Oriented Services (PROS)	ROCHESTER REGIONAL HEALTH (THE ROCHESTER GENERAL HOSPITAL)	RGH Personalized Recovery Oriented Services (PROS), Employment Initiative & Service Dollars	372,741		Personalized Recovery Oriented Services (PROS) is a comprehensive recovery oriented program for individuals with severe and persistent mental illness. The goal of the program is to integrate treatment, support and rehabilitation in a manner that facilitates the individual's recovery.
Personalized Recovery Oriented Services (PROS)	UNITY HOSPITAL - ROCHESTER REGIONAL HEALTH	UNITY Personalized Recovery Oriented Services (PROS), Employment Initiative & Service Dollars	372,741		
Personalized Recovery Oriented Services (PROS)	ROCHESTER REHABILITATION CENTER, INC	ROCHESTER REHABILITATION Personalized Recovery Oriented Services (PROS) & Employment Initiative	305,731	1,051,213	
SRO Community Residence	DEPAUL COMMUNITY SERVICES, INC.	DEPAUL Single Room Occupancy Community Residence - Carriage Factory	615,916		A single-room occupancy residence which provides long term or permanent housing in a setting where residents can access the support services they require to live successfully in the community.
SRO Community Residence	DEPAUL COMMUNITY SERVICES, INC.	DEPAUL Single Room Occupancy Community Residence - Edgerton	1,674,103		
SRO Community Residence	DEPAUL COMMUNITY SERVICES, INC.	DEPAUL Single Room Occupancy Community Residence - Halstead Square	1,714,914		
SRO Community Residence	DEPAUL COMMUNITY SERVICES, INC	DEPAUL Single Room Occupancy Community Residence - Parkside	1,824,240		
SRO Community Residence	DEPAUL COMMUNITY SERVICES, INC	DEPAUL Supported Single Room Occupancy Community Residence - Upper Falls Square Apartments	1,748,850	7,578,023	
The Clubhouse	EAST HOUSE CORPORATION	EAST HOUSE The Clubhouse	1,456,994	1,456,994	The Clubhouse will prioritize adults living with serious mental illness (SMI) who can participate safely in a shared community setting. The Clubhouse is designed to address functional impacts that frequently accompany serious mental illness and drive disengagement from traditional services. The Clubhouse anticipates serving members with co-occurring needs, including substance use disorders, trauma histories, and chronic health conditions managed in outpatient settings, as well as individuals experiencing social-care barriers
OPIOID SETTTLEMENT TOTAL				2,057,390	
Opioid	DELPHI DRUG & ALCOHOL COUNCIL, INC.	DELPHI Open Access Program	900,000	2,057,390	
Opioid	DELPHI DRUG & ALCOHOL COUNCIL, INC.	DELPHI Re-entry Program	250,000		
Opioid	HOUSE OF MERCY	HOUSE OF MERCY BIPOC Peer	265,000		
Opioid	THE MENTAL HEALTH ASSOCIATION OF ROCHESTER/MONROE COUNTY, INC	MENTAL HEALTH ASSOCIATION Crisis Transportation Services	250,000		
Opioid	TBD	Crisis Transportation Services	392,390		
OASAS - Alcohol and Substance Abuse Services - TOTAL				14,742,825	
CD Case Management	PROVIDENCE HOUSING DEVELOPMENT CORPORATION	PROVIDENCE Case Management	96,376	96,376	Activities aimed at linking the client to the service system and at coordinating the various services in order to achieve a successful outcome.
CD Community Residence	CATHOLIC CHARITIES OF THE DIOCESE OF ROCHESTER D/B/A/ CATHOLIC FAMILY CENTER	CATHOLIC CHARITIES Chemical Dependence Community Residence (Alexander)	450,408		Structured residential environment for individuals who are concurrently enrolled in an outpatient chemical dependence service which provides addiction counseling.
CD Community Residence	CATHOLIC CHARITIES OF THE DIOCESE OF ROCHESTER D/B/A/ CATHOLIC FAMILY CENTER	CATHOLIC CHARITIES Chemical Dependence Community Residence (Barrington)	336,798		
CD Community Residence	CATHOLIC CHARITIES OF THE DIOCESE OF ROCHESTER D/B/A/ CATHOLIC FAMILY CENTER	CATHOLIC CHARITIES Chemical Dependence Community Residence (Jones)	168,105		
CD Community Residence	EAST HOUSE CORPORATION	EAST HOUSE Chemical Dependence Community Residence (Cody)	367,161		
CD Community Residence	EAST HOUSE CORPORATION	EAST HOUSE Chemical Dependence Community Residence (Hanson)	254,154		
CD Community Residence	EAST HOUSE CORPORATION	EAST HOUSE Chemical Dependence Community Residence (Hirst)	437,107		
CD Community Residence	EAST HOUSE CORPORATION	EAST HOUSE Chemical Dependence Community Residence (Printy Cooke)	242,629	2,256,362	

CD Community Support	CENTER FOR COMMUNITY ALTERNATIVES, INC.	CENTER FOR COMMUNITY ALTERNATIVES Recovery Center	687,418		
CD Community Support	LIBERTY RESOURCES, INC.	LIBERTY RESOURCES Family Support Navigator	149,394		
CD Community Support	LIBERTY RESOURCES, INC.	LIBERTY RESOURCES Peer Advocate	166,926	1,003,738	
CD Outpatient	CATHOLIC CHARITIES OF THE DIOCESE OF ROCHESTER D/B/A/ CATHOLIC FAMILY CENTER	CATHOLIC CHARITIES Chemical Dependence Outpatient	794,097		These licensed programs assist individuals who suffer from chemical abuse or dependence and their family members and/or significant others through group and individual counseling; education about, orientation to, and opportunity for participation in, relevant and available self-help groups; alcohol and substance abuse disease awareness and relapse prevention; HIV and other communicable diseases, education, risk assessment, supportive counseling and referral; and family treatment.
CD Outpatient	DELPHI DRUG & ALCOHOL COUNCIL, INC.	DELPHI Chemical Dependence Outpatient	510,325		
CD Outpatient	HUTHER-DOYLE MEMORIAL INSTITUTE,INC.	HUTHER-DOYLE Chemical Dependence Outpatient & Comprehensive Outpatient	533,895	1,838,317	
CD Prevention	CENTER FOR YOUTH SERVICES, INC.	CENTER FOR YOUTH Chemical Dependence Prevention	987,958		Prevention service approaches include education, environmental strategies, community capacity building, positive alternatives and information dissemination. Other Prevention service approaches funded by OASAS include Prevention Counseling and Early Intervention.
CD Prevention	COMMUNITY PLACE OF GREATER ROCHESTER, INC.	COMMUNITY PLACE Chemical Dependence Prevention	350,902		
CD Prevention	DELPHI DRUG & ALCOHOL COUNCIL, INC.	DELPHI Chemical Dependence Prevention	270,326		
CD Prevention	DEPAUL COMMUNITY SERVICES, INC.	DEPAUL NCADD-Prevention Resource Center	345,837		
CD Prevention	DEPAUL COMMUNITY SERVICES, INC.	DEPAUL NCADD-RA's Finger Lakes Addiction Resource Center (Community)	107,280		
CD Prevention	DEPAUL COMMUNITY SERVICES, INC.	DEPAUL NCADD-Rochester Area	448,079		
CD Prevention	IBERO-AMERICAN ACTION LEAGUE, INC.	IBERO Familias Unidas	142,544		
CD Prevention	ROCHESTER INSTITUTE OF TECHNOLOGY	ROCHESTER INSTITUTE OF TECHNOLOGY Chemical Dependence Prevention	247,241		
CD Prevention	VILLA OF HOPE	VILLA Chemical Dependence Prevention	130,541	3,030,708	
CD Rehabilitation and Stabilization	CATHOLIC CHARITIES OF THE DIOCESE OF ROCHESTER D/B/A/ CATHOLIC FAMILY CENTER	CATHOLIC CHARITIES Rehabilitation and Stabilization - Freedom House	746,798		Residential services are 24/7 structured treatment/recovery services to persons recovering from substance use disorder. Services correspond to elements in the treatment/recovery process and are distinguished by the configuration of services, degree of dysfunction of the individual served in each setting, and patient readiness to transition to a less restrictive program or element of treatment/recovery.
CD Rehabilitation and Stabilization	CATHOLIC CHARITIES OF THE DIOCESE OF ROCHESTER D/B/A/ CATHOLIC FAMILY CENTER	CATHOLIC CHARITIES Rehabilitation and Stabilization - Liberty Manor	720,009		
CD Rehabilitation and Stabilization	VILLA OF HOPE	VILLA Residential Rehabilitation Services for Adults-Male (Life)	864,603	2,331,410	
CD Supportive Living	CATHOLIC CHARITIES OF THE DIOCESE OF ROCHESTER D/B/A/ CATHOLIC FAMILY CENTER	CATHOLIC CHARITIES Chemical Dependence Supportive Living	136,220		A chemical dependence residential program designed to promote independent living in a supervised setting for individuals who have completed another course of treatment, and are making the transition to independent living, and whose need for service does
CD Supportive Living	EAST HOUSE CORPORATION	EAST HOUSE Chemical Dependence Supportive Living (Crossroads)	481,937		
CD Supportive Living	YWCA GREATER ROCHESTER SPECIAL PROJECTS LLC	YWCA Chemical Dependence Supportive Living	303,007	921,164	
CD Withdrawal Services	VILLA OF HOPE	VILLA Medically Monitored and Medically Supervised Detoxification Services (Living Hope)	1,072,301		Medically supervised withdrawal services provided in an inpatient or residential setting under the supervision and direction of a licensed physician for persons undergoing moderate withdrawal or who are at risk of moderate withdrawal, as well as persons experiencing non-acute physical or psychiatric complications associated with their chemical dependence.
CD Withdrawal Services	HELIO HEALTH, INC.	HELIO Inpatient Rehabilitation and Medically Supervised Detoxification Services(C	2,192,449	3,264,750	
DD - Developmental Disability Services - TOTAL				57,811	
Information & Referral	STARBRIDGE SERVICES, INC.	STARBRIDGE Information & Referral (County Only)	57,811	57,811	Informs individuals with disabilities and their families about resources and supports available in the community and assists them in accessing those services. Also includes public education to increase awareness and change attitudes by engaging audiences in interactive workshops about disabilities.

2027 Original - Budget Presentation	59,471,824	Without MC
6/7/26:OMH-C-SPOA-NEW FUNDING	576,736	
9/1/26: OPIOID-NON-RENEWALS	-230,000	
10/6/26:Inpatient Dashboard	-100,000	
2027 Total Contracts	59,718,560	New Leg Budget Amount
Difference	0	

Monroe County Office of Mental Health

Legislative Referral for Contracted Services

Purchase of Service Information
2027 Contract

Monroe County Office of Mental Health, Department of Human Services
Purchase of Service Summary Information – 2027 Contract

The Monroe County Office of Mental Health (MCOMH), the Local Government Unit (LGU), is the entity required under NYS Mental Hygiene Law for a county to receive state aid for mental hygiene services from the NYS Office of Mental Health (OMH), the NYS Office of Addiction Services and Supports (OASAS), and the NYS Office for People with Developmental Disabilities (OPWDD) (NYS Mental Hygiene Law § 41.03). The MCOMH receives dollars through a multitude of funding streams including the three state offices, the LGU opioid settlement funds, and grants; some of these are strictly pass-through funds, some are designated for a specific purpose, and some are more flexible in their application. These funds are then allocated by the MCOMH to providers to address specific local needs. When mental hygiene funds pass through the MCOMH, local ability to allocate, solicit stakeholder input, and assure provider accountability is greatly strengthened.

Along with the above fiduciary responsibility, each LGU is also charged with ensuring services are available in the county for those who need mental health, alcohol and substance use, and/or developmental disabilities services. As the designated entity for Monroe County, the MCOMH oversees the local, comprehensive mental hygiene service system. In order to oversee the mental hygiene system, the MCOMH relies upon its local Behavioral Health Community Database along with the OMH, the OASAS, and the OPWDD data to generate a comprehensive picture of system-level and agency-level performance. A wide range of measures are collected by the MCOMH, OMH, OASAS, and/or OPWDD through the contract monitoring process. Additionally, the MCOMH Contract Coordinators regularly participate in agency and program meetings, which can include site visits, review of staff credentials, board membership, program/client records, reportable incidents, policy and procedures, and interviews with staff and clients to ensure quality of service delivery. The MCOMH staff members are also central in monitoring program performance, fiscal viability, incidents, complaints,
state audits for accountability, and other pertinent issues.

Purchase of Service (POS) Information*
The attached POS information is divided into six sections: one contract for *LGU Functions*, one contract for *Priority Services*, one each for contracts in the three disability areas: *Mental Health (MH); Alcoholism and Substance Abuse (ASA), and Developmental Disabilities (DD)*, and one each for contracts using opioid settlement funds. The contracts in the three disability areas are organized by each area (MH, ASA, and DD), with the agency information outlined first followed by each program in that agency that is supported by a contract with the MCOMH.

Maintaining access to coordinated, comprehensive continuum of treatment, recovery, and rehabilitative mental hygiene services is one indicator of the mental hygiene system's ability to meet community behavioral health needs and is a requirement of all contracts issued by the MCOMH. Therefore, capacity (where applicable) and/or the number of individuals served is the primary performance indicator for the programs listed on the following pages. A secondary indicator of performance is also identified for each program; the secondary indicator focuses on program outcomes. Please note that the performance and outcome indicators listed in this document are merely a small subset of the performance indicators the MCOMH utilizes to monitor program performance.

The public behavioral health service sector continues to undergo significant transition and transformation. The following initiatives continue to impact both the service delivery system and the provider network:

- Assessing the effectiveness of the service delivery system in response to nationwide health emergencies, including but not limited to the post COVID-19 pandemic, the opioid crisis, etc. The demand for behavioral health services has increased with the need for flexibility to include expanded service options/providers, advocacy for regulatory flexibility, and addressing racial disparities.
- Implementation of strategies to address gaps in the behavioral health system, expand current emergency crisis response services, explore diversion options for responding to people experiencing behavioral health emergencies, and support cross-system redesign and transformation efforts to address inequities, ensure access to behavioral healthcare for all members of the community, and educate as new systems/programs are put in place.
- Transition of behavioral health service treatment models focusing away from services in hospital emergency departments and moving into community-based crisis and recovery support services.
- The changing immigration policies, staffing shortages, and proposed federal funding cuts threaten behavioral health services and will have the greatest impact on the most vulnerable people in the Monroe County community.

These initiatives are being driven by federal and state practice and policy change and could significantly impact the service delivery system within the local Monroe County community. The planning and system oversight function of the MCOMH will continue to be crucial to ensure that these changes are implemented locally in a manner that best serves the citizens of Monroe County and most effectively links individuals with the appropriate level of care or support.

**The complete POS information for the MCOMH contracts is made available for review in the Clerk of the Legislature's office.*

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

CONTRACTOR: Coordinated Care Services, Inc.

EXECUTIVE DIRECTOR: Anne Wilder, MS, President & CEO

BOARD MEMBERS: Gretchen Baumer, Jean Bezek, Donna Bradbury, MA, LMHC, Monica Brown, Gregory Byrd, Chetna Chandrakala, CPA, Colleen Heflin, PhD, Kilolo Moyo-White, MSEd, Christopher O'Donnell, Dave Seeley, Mandy Teeter, MBA, MSW, Carol Tegas, Joe Tobin, Brandy Vandermark-Murray, LMHC, CASAC, Sr. Christine Wagner, LeKeyah Wilson, M.D.

PROGRAMS INCLUDED: LGU Priority Services

Local Government Unit Functions

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY:	Multi-disability
PROGRAM:	LGU Priority Services
CONTRACTOR:	COORDINATED CARE SERVICES, INC.
CONTRACT AMOUNT:	5,942,897
PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S):	Staff are provided by Coordinated Care Services, Inc. located at 1099 Jay Street, Building J, Rochester NY 14611, to perform the following services under the direction of the Monroe County Office of Mental Health (MCOMH) to ensure access to behavioral health services (mental health, substance use disorder, and intellectual and developmental disabilities) for individuals in the community with the greatest need. Adult Priority Services: - Single Point of Access (SPOA) programs to support centralized, timely access to care management and residential services for adults with intensive behavioral health needs. In addition, the Supplemental Security Income (SSI) program will provide a Benefits Facilitator to support eligible public assistance recipients with behavioral health challenges in securing SSI and/or Social Security Disability entitlement. - The Rapid Engagement Delivery (RED) program which promotes engagement and retention for individuals with behavioral health and social services who have had frequent unsuccessful Department of Human Services application attempts and/or use of Emergency Housing services. - Addiction and Prevention Services to meet the needs to support services in the community for substance use disorder and improve the coordination and use of services for high needs individuals. -Disaster Mental Health Response Team. Socio-Legal: - Assisted Outpatient Treatment (AOT), Transition Management Program, which includes the establishment of Court Navigator services based at the Monroe County Socio-Legal Center to support ongoing linkage to behavioral health services for high need individuals, some of which have court involvement or histories of incarceration. - The Forensic Intervention Team (FIT), which collaborates with law enforcement agencies across the county to assist individuals with mental health needs who have frequent contact with law enforcement. This program expanded to a 24/7 operation in 2021. - Forensic Sevices to meet the mental health needs of forensic populations, assisting them to engage in appropriate, cost effective services. -The Grief Support Response Team to ensure grief counseling is provided as needed to community members impacted by a homicide or fatal overdose. Children and Youth Priority Services: To meet the social determinant needs of children and families receiving behavioral health services, including programs such as: -Single Point of Access (SPOA) programs to support centralized, timely access to care management and residential services for youth with intensive mental health and/or substance use needs. -Spreading Wellness Around Town. -Youth and Family Partnership. -Family Access and Connection Team. -Maintaining and monitoring the use of Children & Youth Wrap funds to meet the individualized needs of children and families receiving mental health services. -Trauma, Illness, and Grief (TIG) consortium.
1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR:	Units of service (Total number of referrals to Adult and Child SPOA, AOT, RED, and FIT)

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	n/a	n/a	n/a	n/a
Units of Service:	6,945	6,422	6,465	6,536

2. **SELECTED OUTCOME INDICATOR:** Percent of Adult and Child SPOA eligible community referrals admitted to services

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	60%	57%	58%	60%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Program databases

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: Multi-disability

PROGRAM: Local Governmental Unit Functions

CONTRACTOR: COORDINATED CARE SERVICES, INC.

CONTRACT AMOUNT: 1,729,953

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): Coordinated Care Services, Inc. located at 1099 Jay Street, Building J, Rochester NY 14611, provide the staff and resources necessary to support a range of essential Local Government Unit (LGU) functions on behalf of the Monroe County Office of Mental Health (MCOMH) are provided, including:

1. Monitoring and managing State and County behavioral health funding and to administer contracts on behalf of, and under the direction of the MCOMH, with not-for profit community agencies, health systems/hospitals, and other providers as deemed necessary to support the range of behavioral health needs/services in the community.
2. Monitoring and managing contractor programs and financial performance on behalf of, and under the direction of, the MCOMH. This function includes monitoring of program compliance with applicable State regulations, development of program performance measures, and monitoring of program performance against contract deliverables of among roughly 41 community providers and encompassing approximately 100 behavioral health programs; monitoring expenses and revenues against approved budgets; and initiating corrective action plans as necessary.
3. Managing a process for measuring the effectiveness and performance of behavioral health services and maintaining and/or obtaining access to information systems to support planning, policy, and oversight activities in Monroe County.
4. Supporting the policy, planning, systems change, and service development functions of the MCOMH, working on behalf of and under the direction of the MCOMH. This includes analysis of relevant State and national policies and the local implications of such policies, conducting community needs assessment activities, securing the data and information required for planning and policy decisions, responsible for the Local Services Plan, and supporting the implementation of new initiatives, supporting system change initiatives, and preparation of grant or other funding applications.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Contracts are monitored in an accurate and timely manner, and contractors perform per contract specifications. Expressed as number of contracts and percent successful.

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	n/a	n/a	n/a	n/a
Units of Service:	51 (100%)	56 (100%)	62 (100%)	65 (100%)

2. SELECTED OUTCOME INDICATOR: Claiming/reconciliation of state aid and federal grants is timely and accurate (Number of funding source codes/percent timely and accurate)

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	3 (100%)	3 (100%)	3 (100%)	3 (100%)

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: ContrackHQ and Provider Performance Reports

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

CONTRACTOR: Behavioral Health Network, Inc. D/B/A Rochester Mental Health Center

EXECUTIVE DIRECTOR: Eve Hosford, LCSW-R, Vice President & CAO

BOARD MEMBERS: Madeline August, PhD; Korey Brown; Karen Gallina; Patricia Gatlin, PhD, RN, CNE; Tom Hall, Ed.D.; Eve Hosford, LCSW R; Sara Kelly, PhD; Ernest Lamour; Walter Larkin, Jr.; Mary Marrocco, MD; Dan Meyers; Dawn Riedy, MD; Leon Sawyko; Colin Scantlin, MPA, BSN, RN; Michael Simson, MD; Elaine Spaull; Anne Wilder.

PROGRAMS INCLUDED: Adult Care Management (Non-Medicaid)

Peer Advocacy Team for Habilitation

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Adult Care Management (Non-Medicaid)

CONTRACTOR: BEHAVIORAL HEALTH NETWORK, INC. D/B/A ROCHESTER MENTAL HEALTH CENTER

CONTRACT AMOUNT: 693,023

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): Rochester Mental Health Center located at 224 Alexander Street, Rochester NY 14607, operates under Rochester Regional Health along with other affiliated entities. This program provides care management services to adults with serious mental illness who are not eligible for Medicaid and, consequently, Health Home Care Management services. Non-Medicaid Care Management services mirror Health Home Care Management services and include: Comprehensive Care Management Planning, Care Coordination, Health Promotion, Transitional Care (including appropriate follow-up from inpatient to other settings), Individual and Family Support Services, and referrals to community and social supports tailored to the individual needs. Care management also includes conducting outreach to referred clients, conducting intakes and assessments of clients needs and strengths, service planning and coordination. Care management services are also provided for those with Assisted Outpatient Treatment (AOT) orders who do not have Medicaid. Service dollars to support service plan goals are available for individuals who have a diagnosed mental illness who do or do not have Medicaid. The program is expected to be culturally responsive and provides aggressive outreach, linkage, and advocacy to community resources.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Individuals served

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	162	160	200	210
Units of Service:	n/a	n/a	n/a	n/a

2. SELECTED OUTCOME INDICATOR: Percent of clients with positive outcome at discharge

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	77%	89%	90%	93%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Provider Performance Reports

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Peer Advocacy Team for Habilitation

CONTRACTOR: BEHAVIORAL HEALTH NETWORK, INC. D/B/A ROCHESTER MENTAL HEALTH CENTER

CONTRACT AMOUNT: 201,480

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): Rochester Mental Health Center located at 224 Alexander Street, Rochester NY 14607, operates under Rochester Regional Health along with other affiliated entities. Peer services are those services and supports that are provided by individuals who are or have been consumers of behavioral health services. The primary objective is to increase the number of community linkages to other mental health services and supports. This service provides peer outreach to adults with mental illness who are homeless or are at risk of becoming homeless. Peer Advocacy Team for Habilitation (PATH) provides referral and linkage to community services, peer support and coaching, enhancement of self-advocacy, the development and maintenance of peer networks and resources, and systems advocacy. Peer staff are available to assist individuals in a variety of community settings including homeless shelters.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Individuals served

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	268	218	235	260
Units of Service:	554	607	650	675

2. SELECTED OUTCOME INDICATOR: Number of community linkages to other mental health services and supports

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	665	460	600	665

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Behavioral Health Community Database/Provider Performance Reports

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

CONTRACTOR: Children's Institute, Inc.

EXECUTIVE DIRECTOR: Dianne Cooney Miner, Executive Director, Ph.D., RN, FAAN

BOARD MEMBERS: Loisa Bennetto, Ph.D., Renu Bora, MIMS, MA, James Bowers, Ph.D., Amy Kahn, MBA, SPHR, Megan Ostrowski, Ph.D., Larry Perkins, Ph.D., MBA, Allison Pletzer Willems, Dena Phillips Swanson, Ph.D., Paul Tremblay, RN, BSN/ME, AE-C, Michael Winterhalter, BSMA, Carol Wittmeyer, Ed.D.

PROGRAMS INCLUDED: Primary Project

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Primary Project

CONTRACTOR: CHILDREN'S INSTITUTE, INC.

CONTRACT AMOUNT: 297,083

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): Children's Institute Primary Mental Health Project (PMHP) at 205 St. Paul Street, Rochester NY 14604 operates in 17 Rochester City School District elementary schools and six Greece Central School District elementary schools. This school-based program identifies young children who are just beginning to show school adjustment difficulties and pairs them with trained paraprofessional child associates for screening and intervention.

The Children's Institute provides ongoing training and consultation for the school-based Primary Project team composed of principals, teachers, mental health professionals, senior associates, and child associates as well as evaluation services. Various members of the school team meet with or have phone contacts with parents of children participating in the program.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Individuals served

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	373	452	475	499
Units of Service:	n/a	n/a	n/a	n/a

2. SELECTED OUTCOME INDICATOR: Percentage of children served who no longer score at-risk for school adjustment difficulties post-intervention

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	71%	60%	66%	72%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Provider Performance Reports/Annual Report

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

CONTRACTOR: Compeer Rochester, Inc.

EXECUTIVE DIRECTOR: Sara Passamonte, President/Executive Director

BOARD MEMBERS: Pamela Ayers,MSW., Joyel Bennett, MSL., Mark Cleary, Nancy Crawford, Christina D'Ettore-Wood, Geoff Fesko, Dana Frame, Crystal Gallagher, Neal Gorman, Ela Hakiel, Joseph Hayes, Inez Herrero, Lida Kalantari, Barbara Marianetti-DesRosiers, Elijah McCloud,
Elizabeth McGrath, Timothy McKenna, Cathy Midolo, Tasia Moyé, Nicole Oznmkowski, Christopher Powell, Michael Ruff, Edwin Spencer,
Elizabeth Talia, Vytautas Vasiliauskas, Nathan Wenzel

PROGRAMS INCLUDED: Adult One-to-One

Family Support Services

Youth Peer Mentoring

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Adult One-to-One

CONTRACTOR: COMPEER ROCHESTER, INC.

CONTRACT AMOUNT: 341,720

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): Compeer at 259 Monroe Avenue, Rochester NY 14607, Adult One-to-One program utilizes volunteer mentors to provide adults with mental illness companionship, socialization, community integration, and supportive friendship-based mentoring to aid in their wellness and recovery, increase their independence, and improve their quality of life. Most volunteers meet their mentees in-person, but some speak with adults with mental illness over the phone or online (especially for those awaiting or unsure about engaging with in-person mentoring as well as for disabled or home-bound individuals). Volunteers are expected to meet with their mentees at least four hours per month for at least one year. Expected outcomes include increased self-worth, decreased isolation, increased wellness, and reductions in unnecessary or avoidable hospitalizations and use of emergency services.

Compeer's services include recruiting, screening and training volunteer mentors; accepting and screening referrals for mentees, monitoring the activities of mentor/mentee matches; and using paid staff to provide ongoing support and collaboration with matched adults' care team members. Volunteer mentors are trained in mental health, communication, healthy boundaries, cultural competence and crisis management.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Individuals served/units of service (contact hours)

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	91	101	116	133
Units of Service:	939	1,524	1,753	1,986

2. SELECTED OUTCOME INDICATOR: The percentage of participants not utilizing the Emergency Room (three or more visits).

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	99%	99%	99%	100%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Tableau: Explore/PHI/frequent crisis report

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Family Support Services

CONTRACTOR: COMPEER ROCHESTER, INC.

CONTRACT AMOUNT: 177,738

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): Compeer Family Support at 259 Monroe Avenue, Rochester, NY 14607, serves families with youth between 5 and 21 years old who have serious emotional needs or significant mental health or behavioral challenges by matching them with volunteer mentors. Mentors are expected to meet with their mentees in person in the community for at least four hours per month for at least one year. Mentors provide friendship-based mentoring by developing rapport and a trusting relationship with family and youth so that they have a positive and supportive relationship with someone outside their family. Mentors assist families and their youth in developing healthy coping strategies and positive life skills by modeling, providing feedback, and discussing strategies and skills. Core goals include improved school functioning, community and recreational engagement, social skills, decision-making/choices, self-esteem, and future-orientation.

Compeer recruits, screens, and trains volunteer mentors; accepts and screens family referrals; monitors mentors' activities; organizes social events; and utilizes paid staff to support youth and families with referrals and assistance with service navigation and crises. Compeer trains mentors in positive youth development, communication skills, cultural competency, healthy boundaries, mental health, and crisis management.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Individuals served/units of service (contact hours)

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	36	38	40	44
Units of Service:	603	988	864	950

2. SELECTED OUTCOME INDICATOR: The percentage of participants not utilizing the Emergency Room (three or more visits).

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	97%	100%	100%	100%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Behavioral Health Community Database

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Youth Peer Mentoring

CONTRACTOR: COMPEER ROCHESTER, INC.

CONTRACT AMOUNT: 117,778

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): Compeer at 259 Monroe Ave, Rochester, NY 14607 provides youth peer mentoring services to youth under the age of 21 who are experiencing social, medical, emotional, developmental, substance use, and/or behavioral challenges in their home, school, placement, and/or community-centered services. Program services are provided by a young adult who experienced similar challenges in their youth. Services are intended to develop and achieve the identified goals and/or objectives as set forth in the youth's individualized treatment plan. The structured, scheduled activities provided by this service emphasize the opportunity for the youth to expand the skills and strategies necessary to move forward in meeting their personal, individualized life goals, develop self-advocacy skills, and to support their transition into adulthood.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Individuals served/units of service (quarter hours direct service)

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	n/a	5	22	24
Units of Service:	n/a	24	194	213

2. SELECTED OUTCOME INDICATOR: Percent of youth discharged with one or more Youth Mentoring goals achieved

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	n/a	0%	50%	60%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Behavioral Health Community Database

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

CONTRACTOR: Coordinated Care Services, Inc.

EXECUTIVE DIRECTOR: Anne Wilder, MS, President & CEO

BOARD MEMBERS: Gretchen Baumer, Jean Bezek, Donna Bradbury, MA, LMHC, Monica Brown, Gregory Byrd, Chetna Chandrakala, CPA, Colleen Heflin, PhD, Kilolo Moyo-White, MSEd, Christopher O'Donnell, Dave Seeley, Mandy Teeter, MBA, MSW, Carol Tegas, Joe Tobin, Brandy Vandermark-Murray, LMHC, CASAC, Sr. Christine Wagner, LeKeyah Wilson, M.D.

PROGRAMS INCLUDED: Multicultural Teen Prevention and Support Program

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Multicultural Teen Prevention and Support Program

CONTRACTOR: COORDINATED CARE SERVICES, INC.

CONTRACT AMOUNT: 226,473

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): Coordinated Care Services, Inc. located at 1099 Jay Street, Building J, Rochester NY 14611, provides the Multicultural Teen Prevention and Support program. This program is a community-based program that serves adolescents ages 13-17 experiencing behavioral and emotional challenges in their daily lives and their families. It uses a strengths-based approach to support the youth, their families, and communities in developing the resources needed to maintain healthy lifestyles. The program is provided using a culturally competent and responsive, trauma-informed curriculum that focuses on areas of personal skill development, social interactions, self-efficacy, and modules to reinforce the philosophy of the program and build a foundation for hope and empowerment.

Junior and adult mentors help the adolescents and their families apply the strategies taught in the program to their unique life situations. Mentors and staff maintain regular contact with participants throughout the program, and support meetings are held for parents/caretakers.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Capacity (slots)/individuals served (individuals participating)

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	25	25	25	25
Individuals Served:	18	17	16	20
Units of Service:	n/a	n/a	n/a	n/a

2. SELECTED OUTCOME INDICATOR: Percent (number) of youth that gradudated

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	78% (14)	100% (17)	88% (14)	90% (18)

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Provider Performance Reports and PASS annual report.

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

CONTRACTOR: DePaul Community Services, Inc.

EXECUTIVE DIRECTOR: Mark Fuller, President

BOARD MEMBERS: Stewart Beecher, MD; Brenda Bremer, MD; Timothy Culhane, Timothy Dieffenbacher; Anthony DiGiovanni IV; Ann Marie Dinino; Lisa Elliot, PhD; Lisa Famiglietti; Melissa Farrell; Gabriel Geiger; Jered Hirt, Esq.; Christopher Humphrey; Adam Jones; Ellen Kremer; Robert Lamb, Jr., Esq.; Louis Litzenberger; Keith McGriff, Dr.; Kevin Mucci; Komekia Peterson; Kelly Ross-Brown, Esq.; Gerald Scott; James Yarrington.

PROGRAMS INCLUDED: Care Management - Flex Funds

Mental Health Supportive Housing

Ongoing Integrated Supported Employment (OISE) services

Single Room Occupany Community Residence - Carriage Factory

Single Room Occupany Community Residence - Edgerton

Single Room Occupancy Community Residence - Halstead Square

Single Room Occupany Community Residence - Parkside

Supported Single Room Occupany Community Residence - Upper Falls Square Apartments

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Care Management - Flex Funds

CONTRACTOR: DEPAUL COMMUNITY SERVICES, INC.

CONTRACT AMOUNT: 19,264

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): This funding provides additional monetary support for the needs of individuals enrolled in DePaul's Adult Health Home Care Management services. These service dollars are for emergency and non-emergency purposes and are to be used as payment of last resort (i.e., if another program can provide for the identified needs with other resources, that program's funds should be used first). The purpose of the service dollars is to provide funds to support recovery goals outlined in the individual's care management service plan or to address immediate and/or emergency needs. The use of service dollars in any of these programs should include participation of the recipient of services, who should play a significant role in the planning for, and the utilization of service dollars. Approved uses of service dollars are documented in each individual's case records. The program location 1931 Buffalo Road, Rochester New York 14624.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Individuals served

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	99	88	90	92
Units of Service:	n/a	n/a	n/a	n/a

2. SELECTED OUTCOME INDICATOR: Percent of funds utilized for recovery goals

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	92%	99%	100%	100%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Provider Performance Reports and CFR

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Mental Health Supportive Housing

CONTRACTOR: DEPAUL COMMUNITY SERVICES, INC.

CONTRACT AMOUNT: 3,538,994

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): DePaul operates a mental health supportive housing program located at 1931 Buffalo Road, Rochester New York 14624, designed to provide assistance to individuals with serious mental illness (SMI) in locating and maintaining safe, affordable housing of their choice. This program includes a total of 193 supportive housing units. The New York State Office of Mental Health defines specific criteria for use of the various bed types provided by this program.

The intent of Supportive Housing is to ensure that individuals with serious mental illness may exercise their right to choose where they are going to live, taking into consideration the recipient's functional skills, the range of affordable housing options available in the area under consideration, and the type and extent of services and resources that recipients require to maintain their residence within the community. Supportive Housing utilizes an approach which creates housing opportunities for people through development of a range of housing options, community support services, rental stipends, and recipient-specific advocacy and brokering. As such, this initiative encompasses community support and psychiatric rehabilitation approaches. Historically, Depaul has subcontracted with East House to provide vocational supports to their Supportive Housing and SRO residents, Reporting of vocational outcomes is done by East House.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Capacity (beds)/individuals served/units of service (bed days)

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	193	193	193	193
Individuals Served:	172	173	175	177
Units of Service:	60,061	58,646	60,000	60,500

2. SELECTED OUTCOME INDICATOR: Percent of clients remaining in apartment 1 year or more

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	83%	90%	91%	92%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Behavioral Health Community Database/Provider Performance Reports

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Ongoing Integrated Supported Employment (OISE) services

CONTRACTOR: DEPAUL COMMUNITY SERVICES, INC.

CONTRACT AMOUNT: 331,426

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): DePaul will provide Ongoing Integrated Supported Employment (OISE) services located at 1000 University Avenue, Rochester, New York14607, that are extended mental health-focused employment supports related to helping sustain employment for individuals who are 18 years and older with a Serious Mental Illness (SMI). The program also includes young adults who have been served through NY State Education and been diagnosed with Serious Emotional Disturbance, are experiencing psychiatric barriers to an employment goal, and who have achieved job stability. These services often follow Adult Career & Continuing Education Services – Vocational Rehabilitation (ACCES-VR) Intensive Services. These services are not intended to provide indefinite and on-going support of job tasks but are intended to mitigate psychiatric barriers related to employment. Intensity of service, including the number of contacts per month, should be driven by individual need with the aim of progressively decreasing contact, while allowing for increased frequency and intensity as needed. Individuals will be provided onsite/offsite job coaching support to stabilize them in new positions in order to achieve successful employment long term.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Individuals served

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	43	48	50	55
Units of Service:	503	498	505	575

2. SELECTED OUTCOME INDICATOR: % Percent of individuals employed at point of discharge

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	46%	58%	60%	62%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Behavioral Health Community Database/Provider Performance Reports

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MII

PROGRAM: Single Room Occupancy Community Residence - Carriage Factory

CONTRACTOR: DEPAUL COMMUNITY SERVICES, INC.

CONTRACT AMOUNT: 615,916

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): DePaul operates the 25-bed Carriage Factory Community Residence (CR) Single Room Occupancy (SRO) located at 33 Litchfield Street, Rochester New York 14608. This program is licensed by the New York State Office of Mental Health and adheres to all appropriate regulations and guidelines. The goal of the program is to provide stable housing with 24-hour staff and on-site support services. The intended residents of the CR-SRO are seriously mentally ill individuals, including formerly homeless individuals who may have co-occurring substance use disorders, who are capable of living in private apartments as long as on-site support services are available. Clients who live in this specific CR-SRO live in furnished apartments with kitchens and only those who are able to prepare their own meals can be accepted into this CR-SRO.

The Carriage Factory CR-SRO provides medication supervision, activities programming, transportation, and coordination, case management and 24 hour community living assistance, help with housekeeping, staff support, and supervision in a safe environment. The SRO assists individuals to obtain skills in areas such as independent living, socialization, and medication management. Care management is provided for eligible individuals to assist them with linking to services in the community. Historically, Depaul has subcontracted with East House to provide vocational supports to their Supportive Housing and SRO residents, Reporting of vocational outcomes is done by East House.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Capacity (beds)/individuals served/units of service (bed days)

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	25	25	25	25
Individuals Served:	23	26	29	30
Units of Service:	7,571	8,416	8,550	8,650

2. SELECTED OUTCOME INDICATOR: The percentage of participants not utilizing the Emergency Room (three or more visits).

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	87%	96%	97%	98%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Behavioral Health Community Database

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Single Room Occupancy Community Residence - Edgerton

CONTRACTOR: DEPAUL COMMUNITY SERVICES, INC.

CONTRACT AMOUNT: 1,674,103

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): DePaul operates the 85-bed Edgerton Square Community Residence (CR) Single Room Occupancy (SRO) located at 435 Dewey Avenue, Rochester New York 14613. This program is licensed by the New York State Office of Mental Health and adheres to all appropriate regulations and guidelines. The goal of the program is to provide stable housing with 24-hour staff and on-site support services. The residents of this CR-SRO are adults 18 years or older with serious mental illness (including former residents of Rochester Psychiatric Center), some of whom have long histories of homelessness and substance abuse problems, and are capable of living in this type of residence as long as on-site support services are available. The primary mission of staff is to develop specialized approaches that will successfully engage the resident in his/her/their own rehabilitation. Historically, Depaul has subcontracted with East House to provide vocational supports to their Supportive Housing and SRO residents, Reporting of vocational outcomes is done by East House.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Capacity (beds)/individuals served/units of service (bed days)

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	85	85	85	85
Individuals Served:	99	99	100	101
Units of Service:	28,384	29,759	30,000	30,050

2. SELECTED OUTCOME INDICATOR: The percentage of participants not utilizing the Emergency Room (three or more visits).

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	97%	98%	97%	99%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Behavioral Health Community Database

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Single Room Occupancy Community Residence - Halstead Square

CONTRACTOR: DEPAUL COMMUNITY SERVICES, INC.

CONTRACT AMOUNT: 1,714,914

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): DePaul operates the 75-bed Halstead Community Residence (CR) Single Room Occupancy (SRO) located at 770 West Main Street, Rochester New York 14611. This program is licensed by the New York State Office of Mental Health and adheres to all appropriate regulations and guidelines. The goal of the program is to provide stable housing with 24-hour staff and on-site support services. The residents of the CR-SRO are adults 18 years or older who are diagnosed with a serious mental illness (including current residents of Rochester Psychiatric Center), some of whom have long histories of homelessness and substance abuse problems, and are capable of living in this type of residence as long as on-site support services are available. The primary mission of staff is to develop specialized approaches that will successfully engage the resident in his/her/their own rehabilitation. Historically, Depaul has subcontracted with East House to provide vocational supports to their Supportive Housing and SRO residents, Reporting of vocational outcomes is done by East House.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Capacity (beds)/individuals served/units of service (bed days)

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	75	75	75	75
Individuals Served:	83	87	89	90
Units of Service:	25,233	25,661	25,700	25.850

2. SELECTED OUTCOME INDICATOR: The percentage of participants not utilizing the Emergency Room (three or more visits).

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	96%	97%	98%	99%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Behavioral Health Community Database

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Single Room Occupancy Community Residence - Parkside

CONTRACTOR: DEPAUL COMMUNITY SERVICES, INC.

CONTRACT AMOUNT: 1,824,240

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): DePaul operates the 85-bed Parkside Community Residence (CR) Single Room Occupancy (SRO) located at 420 East Main Street, Rochester New York 14604. This program is licensed by the New York State Office of Mental Health and adheres to all appropriate regulations and guidelines. The goal of the program is to provide stable housing with 24-hour staff and on-site support services. The residents of the CR-SRO are age 50 and above who are diagnosed with a serious mental illness (including current residents of Rochester Psychiatric Center), some of whom have long histories of homelessness and substance abuse problems, and are capable of living in this type of residence as long as on-site support services are available. The primary mission of staff is to develop specialized approaches that will successfully engage the resident in his/her/their own rehabilitation. Historically, Depaul has subcontracted with East House to provide vocational supports to their Supportive Housing and SRO residents, Reporting of vocational outcomes is done by East House.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Capacity (beds)/individuals served/units of service (bed days)

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	85	85	85	85
Individuals Served:	91	97	98	99
Units of Service:	27,487	28,083	28,500	28,900

2. SELECTED OUTCOME INDICATOR: The percentage of participants not utilizing the Emergency Room (three or more visits).

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	96%	97%	98%	98%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Behavioral Health Community Database\Tableau\PHI report

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Supported Single Room Occupancy Community Residence - Upper Falls Square Apartments

CONTRACTOR: DEPAUL COMMUNITY SERVICES, INC.

CONTRACT AMOUNT: 1,748,850

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): DePaul operates the 75-bed Upper Falls Square Supportive Housing Single Room Occupancy (SP-SRO) located at 396 Hudson Avenue, Rochester New York 14605, which is in a building in which other affordable housing apartments are located. DePaul accepts clients into the Upper Falls Square SP-SRO who have demonstrated the skills needed to reside independently in the community. Clients live in apartments that are equipped with kitchens, and clients prepare their own meals. Clients must either self-medicate or have an outside provider (not DePaul) who assists them with managing their medications. Housing Specialists teach skills and assist tenants in linking to community services. In addition to the housing and support services listed above, DePaul provides rental stipends that make up the total rent and utility costs after deducting client contributions of thirty percent of their income or their public assistance housing funds. Historically, Depaul has subcontracted with East House to provide vocational supports to their Supportive Housing and SRO residents, Reporting of vocational outcomes is done by East House.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Capacity (beds)/individuals served/units of service (bed days)

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	75	75	75	75
Individuals Served:	81	87	89	90
Units of Service:	26,372	24,922	25,500	26,000

2. SELECTED OUTCOME INDICATOR: The percentage of participants not utilizing the Emergency Room (three or more visits).

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	100%	96%	97%	98%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Behavioral Health Community Database

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

CONTRACTOR: East House Corporation

EXECUTIVE DIRECTOR: Lindsay Gozzi-Theobald. President/CEO

BOARD MEMBERS: Erika Ange MHA, Marlene Bessette, Faye Braswell-Towner, Nicole Bryl, Joe Carello,Esq., Barry Carrington,Esq., Ted Cordes, Sarah Elezabi, MD, MPH, CPE, CHCQM, FAPA, FACP, Christina Gullo, SHRM-SCP, Susie Huss, Deron Johnson, MBA, CISA, CRISC, CRMA, CDPSE, Jane Knickerbocker, Jim Lessard, MBA, Cathy Lovejoy, Donna Maxwell, SPHR,SHRM-SCP, George Nasra, MD, MBA, LFAPA, Stuart Sacks, MD, CRPA, Jonathan Schoeck, Jennifer Shoemaker, Chandra Simmons, CISA, CRISC, CCSK ,Michael Trabold

PROGRAMS INCLUDED: Case Management

Clubhouse

Mental Health Supportive Housing

Peer Run Respite Diversion

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Case Management

CONTRACTOR: EAST HOUSE CORPORATION

CONTRACT AMOUNT: 94,214

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): East House operates the Financial Case Management/Community Support Services Case Management program located at 259 Monroe Avenue, Rochester NY 14607, which provides financial counseling and assistance to help clients maintain stable housing while they learn to manage their finances and increase their independence through the achievement of educational and vocational goals. Services are available to adults with a diagnosis of a serious and persistent mental illness who are residents of East House mental health residential programs or were recently discharged from these programs. Services include assessing client need for financial and medical benefits, and assisting clients in establishing and maintaining eligibility for benefits such as SSI, SSD, Medicaid and Medicare; teaching clients banking and budgeting skills and how to advocate for benefits; interpreting financial contracts for clients and family members and coordinating services with the Admissions Coordinator, business office, and program staff; and providing transportation to clients as needed to apply for and maintain benefits.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Individuals served/units of service (hours of care manager)

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	201	218	225	230
Units of Service:	104	188	200	225

2. SELECTED OUTCOME INDICATOR: Percentage of participants demonstrating increased financial independence at discharge

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	34%	16%	27%	35%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Provider Performance Reports/Consolidated Fiscal Report

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Clubhouse

CONTRACTOR: EAST HOUSE CORPORATION

CONTRACT AMOUNT: 1,456,994

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): East House will operate a Clubhouse serving adults aged 18 and older residing in Monroe County. The site will be located in the City of Rochester and is expected to open in 2027. The program is best characterized as urban, with county-wide coverage.The Clubhouse will prioritize adults living with Serious Mental Illness (SMI) who can safely participate in a shared community setting. The program is designed to address the functional challenges frequently associated with serious mental illness that can contribute to disengagement from traditional services. The Clubhouse anticipates serving members with co-occurring needs, including substance use disorders, trauma histories, and chronic health conditions managed in outpatient settings, as well as individuals experiencing social determinants of health challenges, such as financial hardship and family-related barriers.East House will promote inclusive access through targeted outreach and coordinated entry pathways, with self-referral serving as a primary low-barrier access point. The program will also support individuals referred through hospitals, county access points, and community partners, other intensive community-based services, and criminal justice diversion and reentry partners. Additional outreach and referral partnerships will be developed with organizations serving historically underserved populations, including LGBTQ+ health providers, immigrant and refugee-serving agencies, and veteran-serving organizations.The daily activities of the Clubhouse are organized around a structured model known as the work-ordered day, in which members and staff work side-by-side as colleagues to complete the tasks necessary to operate and sustain the Clubhouse community. This approach promotes meaningful engagement, skill development, community integration, and recovery.The Rochester location is intended to support centralized access to public transportation, referral pathways, and areas of concentrated community need, while maintaining county-wide eligibility. East House will promote equitable access for residents throughout Monroe County through strong referral partnerships, community outreach efforts, and strategies to reduce barriers to participation, ensuring that individuals from all areas of the county can benefit from Clubhouse services.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Individuals Served

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	n/a	n/a	n/a	50
Units of Service:	n/a	n/a	n/a	n/a

2. SELECTED OUTCOME INDICATOR: To be determined (TBD)

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	n/a	n/a	n/a	TBD

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: TBD

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Mental Health Supportive Housing

CONTRACTOR: EAST HOUSE CORPORATION

CONTRACT AMOUNT: 4,105,621

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): East House operates a mental health supportive housing program designed to provide assistance to individuals with serious mental illness (SMI) in locating and maintaining safe, affordable housing of their choice. This program located at 259 Monroe Avenue, Rochester NY 14607, includes a total of 225 supportive housing units. The New York State Office of Mental Health defines specific criteria for use of the various bed types provided by this program.
The intent of Supportive Housing is to ensure that individuals with SMI may exercise their right to choose where they are going to live, taking into consideration the recipient's functional skills, the range of affordable housing options available in the area under consideration, and the type and extent of services and resources that recipients require to maintain their residence within the community. Supportive Housing utilizes an approach which creates housing opportunities for people through development of a range of housing options, community support services, rental stipends, and recipient-specific advocacy and brokering. As such, this initiative encompasses community support and psychiatric rehabilitation approaches.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Capacity (beds)/individuals served/units of service (days)

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	225	225	225	225
Individuals Served:	237	209	215	225
Units of Service:	78,338	69,568	72,000	75,000

2. SELECTED OUTCOME INDICATOR: Percent of clients remaining in apartment 1 year or more

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	89%	92%	93%	94%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Behavioral Health Community Database/Provider Performance Reports

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Peer Run Respite Diversion

CONTRACTOR: EAST HOUSE CORPORATION

CONTRACT AMOUNT: 715,975

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): East House is the lead agency and contracts with the Mental Health Association of Rochester (MHA) to provide the Peer Respite Diversion (PRD) program. The PRD program is operated and staffed by peers and provides recovery-based alternatives to traditional emergency/acute services. The primary location of PRD program services is Affinity Place at 269 Alexander Steet, Rochester New York 14607. Peer services are services and supports that are provided by a person with lived experience in the program, life area, or with the type of services (i.e., mental health) that are being provided to participants in the program. PRD program services include short-term respite housing (up to 28 days per episode per client); identifying and addressing issues and underlying problems related to the presenting crisis, symptoms, and/or behaviors; warm line services (a phone number that clients can call to receive emotional support from a peer and/or referrals to other services); support groups for clients; referrals and on-site access to community recovery resources; and coordinating and collaborating with other community providers to ensure the effective coordination of services, that clients' needs are met, and effective discharge plans are in place. Follow-up is provided by peers from MHA to ensure additional support is provided as needed after the person leaves.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Capacity (beds)/Number of individuals served/units of service (days)

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	8	8	8	8
Individuals Served:	108	75	95	110
Units of Service:	2,335	2,061	2,330	2,500

2. SELECTED OUTCOME INDICATOR: The percentage of participants not utilizing the Emergency Room (three or more visits).

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	100%	98%	100%	100%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Behavioral Health Community Database

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

CONTRACTOR: Goodwill of the Finger Lakes, Inc.

EXECUTIVE DIRECTOR: Jennifer Lake, SPHR, SHRM-SCP, President/CEO

BOARD MEMBERS: Rick Alaimo, M.D., Rhonda Ball, Jennison Bielemeier, Ebony Burgess, Michael Della-Porta, David DiLoreto, MD, Ph.D., Amy Gould, Ian Harper, Brian Harrington, Mark Harris, Patrick Jackman, Jen Lake, JudieLynn Nassar McAvinney, Linda Natoli, Ronalyn Pollack, Toya Robinson, Kim Smith

PROGRAMS INCLUDED: 2-1-1/Life Line

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: 2-1-1/LIFE LINE

CONTRACTOR: GOODWILL OF THE FINGER LAKES, INC.

CONTRACT AMOUNT: 308,228

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): Goodwill at 422 S. Clinton Avenue, Rochester NY 14620, 2-1-1/LIFE LINE provides multi-lingual community information and referral services, crisis intervention, and suicide hotline services to Monroe County residents and service providers via telephone (call and text), a website-based service directory, and online chat services. Although 2-1-1/LIFE LINE responds to requests from any caller or requester, only mental health-related service requests from Monroe County residents or service providers are supported by this specific funding. Lifeline provides continuous availability for call-in services (24 hours per day, 365 days per year). For individuals contacting 2-1-1/LIFE LINE, Goodwill staff assess the nature of the call, identify the person's needs, provide active listening and support, collaborate to create a safety or action plan to address the needs, and provide contact and service information about available services. The goal is to provide each person with the appropriate tools to manage their mental health issues and human service needs.

211/LIFE LINE leverages the same capacities of behavioral health to basic needs referrals through 211/LIFE LINE to the 988 line which is the United States based crisis and suicide prevention network previously known as the National Suicide Prevention Lifeline and is a national network of more than 200 crisis centers. In addition to the call in line, the program is a part of the National Lifeline Crisis Center, answering 988 calls 24/7 and chats/ texts 7 days a week from 8a-11p covering a portion of hours in collaboration with other national centers.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Units of service (# of mental health related contacts)

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	n/a	n/a	n/a	n/a
Units of Service:	34,200	25,554	30,665	36,798

2. SELECTED OUTCOME INDICATOR: Referrals to mental health outpatient and prevention services

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	13,097	11,453	13,744	16,493

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Provider Performance Reports

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

CONTRACTOR: Hillside Children's Center

EXECUTIVE DIRECTOR: Maria Cristalli, CEO/President

BOARD MEMBERS: Caroline Critchlow, Ed.D., Richard Dougherty, CFP, AIF, Christopher Eckert, CPA, Treasurer, Richard Feldman, Ph.D., Melissa Gardner, Geremy Gersh, James Haefner, Chair, Victoria Hines, Jill Knittel, Anne Komanecky, Secretary, Karen McDermott, Ph.D.,
Ann Montgomery,CPA, Virginia Biesiada O'Neill, Christopher J. Richardson, DO, MBA, FACOS, FACS,
Efrain Rivera, Elizabeth P. Ronldsen, CFA,Michael F. Stapleton, Jr., Maria Cristalli, Ex-Officio

Board Emeritus: Nancy L. Castro, Ed.D., Roger B. Friedlander, M

PROGRAMS INCLUDED: Family Crisis Support Services

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Family Crisis Support Services

CONTRACTOR: HILLSIDE CHILDREN'S CENTER

CONTRACT AMOUNT: 757,254

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): Hillside operates Family Crisis Support Services (FCSS) and Emergency Respite Beds (ERBs) located at 1 Mustard Street, Rochester New York 14609. FCSS provides short-term culturally and linguistically appropriate in-home services for children and adolescents between the ages of 5-22 years old with serious emotional disturbance (SED) or significant mental health challenges who are experiencing a mental health crisis that necessitates further support and learning of skills to avert future crises. Services include home-based assessment, family advocacy, proactive crisis planning, and as indicated, skill building and emergency respite. This service array provides short-term, family driven supports to help families build on existing strengths and decrease youth and family stress. Services and supports are individualized and flexible in terms of intensity and duration, with average length of stay of 3-4 months, and are made available at times that best suit the youth and family's preference and identified needs. Families have access to 24/7 crisis intervention provided by on-call program staff. Flexible funds are available to support family needs.

ERBs serve children and adolescents between the ages of 5-22 who have a SED or significant mental health challenge and who are experiencing acute mental health crises that necessitate brief (up to seven days) out-of-home stays to stabilize the situation and facilitate reunification with primary caregivers. Host homes (certified foster families), who have received specialized training in working with youth with mental health challenges, provide 24-hour-a-day supervision for the youth and have access to on-call support services.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Individuals served (FCSS clients)/units of service (hours)

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	119	110	119	120
Units of Service:	1,324	1,278	1,325	1,400

2. SELECTED OUTCOME INDICATOR: Percent of youth discharged from FCSS remaining at home

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	97%	98%	98%	99%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Behavioral Health Community Database/Provider Performance Reports

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

CONTRACTOR: House of Mercy, Inc.

EXECUTIVE DIRECTOR: Rev. Dr. Michael J. Ford, Executive Director

BOARD MEMBERS: Ron Green, Van Griffin, Habibe Hakiqi, Kathy Hanford, Joan Hinman, Ed Hourihan, Kathy Purcell, Bernie Sass, James Smith,Catherine Thomas, Carol Tomesko, Robert Turner

PROGRAMS INCLUDED: Homeless Support Services

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Homeless Support Services

CONTRACTOR: House of Mercy, Inc.

CONTRACT AMOUNT: 182,233

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): House of Mercy at 285 Ormond Street, Rochester NY 14605, provides Homeless Support Services for individuals and families with behavioral health needs who are experiencing homelessness or are at risk of becoming homeless. House of Mercy generates their own referrals from libraries, street-outreach, as well as receiving referrals from the Department of Human Services, shelters, emergency departments, and clinics. Program services include conducting community outreach using evidence-based strategies to locate, engage, and assess the needs and preferences of the target population; conducting intake, needs assessments, and service planning for those who are interested in pursuing housing options; referring to treatment and support services; referring to safe and affordable housing options, including emergency housing, monitoring and supporting individuals and families after they have been placed into housing to maximize the likelihood that they will maintain their housing; providing assistance with obtaining and maintaining public benefits and other income, coordinating services with other service providers; and documenting service delivery in the Homeless Management Information System (HMIS).

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Households Served

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	n/a	261	326	408
Units of Service:	n/a	n/a	n/a	n/a

2. SELECTED OUTCOME INDICATOR: Percentage of households that exited the program to permanent housing

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	n/a	29%	31%	34%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Provider Performance Reports

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

CONTRACTOR: Housing Options Made Easy, Inc. D/B/A Recovery Options Made Easy

EXECUTIVE DIRECTOR: Jennifer Levesque, MA LMHC - CEO

BOARD MEMBERS: Julie Barber, Mike Billoni-Secretary, Katelyn Connors- Vice-President, Shawn Cunningham- Treasurer, Maya Hu-Morabito-President, Ed Murphy, Esq , Jeffrey Paterson, Elizabeth Smith
Michelle Santiago, Tommy Volpe

PROGRAMS INCLUDED: Mental Health Supportive Housing
Peer Bridger
Skill Building

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Mental Health Supportive Housing

CONTRACTOR: HOUSING OPTIONS MADE EASY, INC. D/B/A RECOVERY OPTIONS MADE EASY

CONTRACT AMOUNT: 1,578,071

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): Recovery Options Made Easy operates a mental health supportive housing program located at 274 North Goodman Street, Rochester NY 14607, designed to provide assistance to individuals with serious mental illness (SMI) in locating and maintaining safe, affordable housing of their choice. This program includes a total of 87 supportive housing units. The New York State Office of Mental Health defines specific criteria for use of the various bed types provided by this program.

The intent of Supportive Housing is to ensure that individuals with serious mental illness may exercise their right to choose where they are going to live, taking into consideration the recipient's functional skills, the range of affordable housing options available in the area under consideration, and the type and extent of services and resources that recipients require to maintain their residence within the community. Supportive Housing utilizes an approach which creates housing opportunities for people through development of a range of housing options, community support services, rental stipends, and recipient specific advocacy and brokering. As such, this initiative encompasses community support and psychiatric rehabilitation approaches.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Capacity (beds)/individuals service/units of service (days)

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	87	87	87	87
Individuals Served:	83	81	83	84
Units of Service:	26,843	27,246	27,500	27,600

2. SELECTED OUTCOME INDICATOR: Percent of clients remaining in apartment 1 year or more

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	78%	98%	98%	99%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Provider Performance Reports/ Behavioral Health Community Database

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Peer Bridger

CONTRACTOR: HOUSING OPTIONS MADE EASY, INC. D/B/A RECOVERY OPTIONS MADE EASY

CONTRACT AMOUNT: 337,390

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): Recovery Options Made Easy operates a Peer Bridger program located at 274 North Goodman Street, Rochester, NY 14607, staffed by people with personal experiences with mental health challenges. These peer staff work with individuals transitioning from inpatient psychiatric units into community apartments to ensure a successful transition and linkage to necessary resources to promote community tenure. The program is dedicated to the 116 mental health supportive housing units allocated to Livingston, Monroe, Wayne and Wyoming Counties (100 of which are in Monroe County) for individuals being discharged from inpatient services. Prior to discharge, peer support specialists form supportive relationships with identified individuals on the Rochester Psychiatric Center campus or Article 28 hospitals in the community. After a client is discharged, peer staff act as mentors to promote the development of linkages to the appropriate community-based services. Active outreach based on person-centered approaches is an essential component of the program, as the staff help these individuals overcome obstacles and form supportive networks so that they can live as independently as possible within the community.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Individuals served\units of service (hours)

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	n/a	n/a	n/n	n/a
Individuals Served:	40	45	50	60
Units of Service:	923	933	950	1000

2. SELECTED OUTCOME INDICATOR: The percentage of participants not utilizing the Emergency Room (three or more visits).

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	92%	93%	97%	98%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Provider Performance Reports/ Behavioral Health Community Database

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Skill Building

CONTRACTOR: HOUSING OPTIONS MADE EASY, INC. D/B/A RECOVERY OPTIONS MADE EASY

CONTRACT AMOUNT: 167,579

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): Recovery Options Made Easy provides skill building services located at 274 North Goodman Street, Rochester NY 14607, to children and adolescents who reside in Monroe County, who are under the age of 21, who demonstrate mental health-related functional limitations (severe emotional disturbance, significant mental health challenges, and/or complex mental health needs).

Skill building services are provided to compensate for or eliminate functional deficits and interpersonal and/or environmental barriers associated with a youth's behavioral needs. Skill building services will support efforts to maintain youth safely and more successfully in the community. Activities included in the services are expected to be culturally sensitive, task-oriented, and focused on personal and community competence (including but not limited to social and interpersonal skills, daily living skills, coping skills, and intervention implementation). Services provided by the skill builders occur in the youths' home or in the community and are documented by skill building staff in an accurate and timely manner.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Individuals served/units of service (contact hours)

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	31	27	31	35
Units of Service:	235	135	150	175

2. SELECTED OUTCOME INDICATOR: Percentage of discharged clients who met at least half of goals

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	61%	62%	65%	67%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Provider Performance Reports/ Behavioral Health Community Database

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

CONTRACTOR: Ibero-American Action League, Inc.

EXECUTIVE DIRECTOR: Angelica Perez-Delgado, President & CEO

BOARD MEMBERS: Milagros Concepcion, Thomas J. Hernandez, Lisa Medina, Denishea Ortiz, Emeterio Otero, Berta Rivera, Victor Sanchez, Arline Santiago, Christie Smith, James Sutton, Yalitza Torres

PROGRAMS INCLUDED: Mental Health Supportive Housing
Prevention Education and Intervention

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Mental Health Supportive Housing

CONTRACTOR: IBERO-AMERICAN ACTION LEAGUE, INC.

CONTRACT AMOUNT: 502,419

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): Ibero-American Action League at 124 Evergreen Street, Rochester NY 14605, operates a mental health supportive housing program designed to provide assistance to individuals with serious mental illness (SMI) in locating and maintaining safe, affordable housing of their choice. This program includes a total of 27 supportive housing units. The New York State Office of Mental Health defines specific criteria for use of the various bed types provided by this program.

The intent of Supportive Housing is to ensure that individuals with serious mental illness may exercise their right to choose where they are going to live, taking into consideration the recipient's functional skills, the range of affordable housing options available in the area under consideration, and the type and extent of services and resources that recipients require to maintain their residence within the community. Supportive Housing utilizes an approach which creates housing opportunities for people through development of a range of housing options, community support services, rental stipends, and recipient-specific advocacy and brokering. As such, this initiative encompasses community support and psychiatric rehabilitation approaches.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Capacity (beds)/individuals served/units of service (bed days)

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	27	27	27	27
Individuals Served:	29	28	29	27
Units of Service:	9,019	9,576	9,256	8,618

2. SELECTED OUTCOME INDICATOR: Percent of clients remaining in apartment 1 year or more

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	100%	100%	100%	100%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Behavioral Health Community Database/Provider Performance Reports

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Prevention Education and Intervention

CONTRACTOR: IBERO-AMERICAN ACTION LEAGUE, INC.

CONTRACT AMOUNT: 15,000

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): Ibero American Action League, Inc (Ibero) located at 124 Evergreen Street, Rochester NY 14605, is a dual-language human services agency that focuses on building stronger families and greater self-sufficiency through hands-on learning and experience. They serve individuals and families of all ethnic backgrounds with the unique ability to target multiple audiences. This program will ensure that community resources are made available, with focused strategies on the local population, and the Latino community, (Spanish as first language, LGBTQ+ and new arrivals). Ibero will provide education and resources related to behavioral health stigma and cultural norms. They will focus on practical life skills and building health coping strategies.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Number of individuals served

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	n/a	n/a	225	n/a
Units of Service:	n/a	n/a	n/a	n/a

2. SELECTED OUTCOME INDICATOR: Percent of individuals served who reported increased coping skills.

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	n/a	n/a	80%	n/a

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Provider Performance Reports

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

CONTRACTOR: Lifespan Of Greater Rochester, Inc.

EXECUTIVE DIRECTOR: Ann Marie Cook, MPA President/CEO

BOARD MEMBERS: Marie Aydelotte, M.D., Father Michael Bausch, Vito Caraccio, Will Carroll, PharmD, Lucia Castillejo, MS, Carmen Coleman, MBA, Tere Dominas, Erika Elliott, Esq., Jarrett Felton, John Fornof, MPA, Ankit Garg, M.D., Tracy Greene, Bob Hartman, Lori Jansen, Michael Kaufman, Karen LaGraff, Timothy Lum, M.D., Cindy Lovetro, RN, David Muck, Travis Masonis, Robert McCann, M.D., Colleen Rose, LaRon Rowe, Ph.D., Steven Ryan, M.D., Liz Vega, Roberta Van Winkle, Miguel Velazquez.

PROGRAMS INCLUDED: Senior Screening

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Senior Screening

CONTRACTOR: LIFESPAN OF GREATER ROCHESTER, INC.

CONTRACT AMOUNT: 72,742

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): Lifespan operates a Senior Outreach and Screening program that provides enhanced outreach and access to treatment and prevention services to adults 60 years and older with mental illness. The program is located at 1900 S.Clinton Avenue, Rochester New York 14618. The primary objective is to increase the number of clients successfully linked to mental health services. Services include: outreach to identify older adults with untreated mental illness, consultation, linkage, coordination of mental health, social service and primary health services. In addition, education and support are provided to caregivers of older adults with the goal of assisting the person to successfully maintain community living.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Individuals served (found to have untreated mental health issues/ Challenges

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	n/a	42	55	65
Units of Service:	n/a	n/a	n/a	n/a

2. SELECTED OUTCOME INDICATOR: Percent of Individuals successfully linked to mental health services

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	n/a	59%	65%	68%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Provider Performance Reports

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

CONTRACTOR: Mental Health Services - Erie County Southeast Corporation V, dba Spectrum Health and Human Services

EXECUTIVE DIRECTOR: Cindy Voelker, President/CEO

BOARD MEMBERS: Broderick Cason, Michelle Cordero, Richmond Hubbard, Timothy Lilley Sr., Robert O'Leary, Robert B. Ruh, Michael T. Sagnibene, Deanna Schettine, Alexandra Wehr, David S. Whittemore, Esq

PROGRAMS INCLUDED: Advocacy Support Services - Forensic Population
Mental Health Supportive Housing (Forensic)

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Advocacy Support Services - Forensic Population

CONTRACTOR: MENTAL HEALTH SERVICES - ERIE COUNTY SOUTHEAST CORPORATION V, DBA SPECTRUM HEALTH AND HUMAN SERVICES

CONTRACT AMOUNT: 168,916

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): Spectrum located at 31 E. Main Street, Suite #300, Rochester NY 14614, operates a multi-disciplinary team to work with their Forensic Supportive Housing Program, Rochester Psychiatric Center, MCOMH Single Point of Access (SPOA), and NYS Office of Mental Health Division of Forensic Services to provide support for individuals transitioning to the community upon release either directly from prison or from a State Psychiatric Center where they were admitted after release from prison. The supportive services include assessing needs (especially to prevent and respond to crises); assistance with finding and maintaining housing, treatment, and supportive services; making and monitoring service linkages; assistance with substance use and mental health issues (including counseling and assessment); and identification and support of vocational, education, and other prosocial goals, life skills education, training, coaching, and support. Limited program funds are available to support individualized goals and other necessary supports to maintain community tenure. Based on availability and insurance coverage, staff link individuals with billable supportive services existing within the community and educate service providers regarding the unique needs of this population. The program staff also provide ongoing collaboration with residential, clinical, and other service providers.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Individuals served

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	82	91	96	101
Units of Service:	n/a	n/a	n/a	n/a

2. SELECTED OUTCOME INDICATOR: Percentage of individuals who remain in the community without being re-incarcerated

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	93%	97%	98%	99%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Provider Performance Reports

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Mental Health Supportive Housing (Forensic)

CONTRACTOR: MENTAL HEALTH SERVICES - ERIE COUNTY SOUTHEAST CORPORATION V, DBA SPECTRUM HEALTH AND HUMAN SERVICES

CONTRACT AMOUNT: 598,579

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): Spectrum located at 31 E. Main Street, Suite #300, Rochester NY 14614, Forensic Supportive Housing Program provides assistance to individuals with forensic involvement who also have serious mental illness and/or substance use concerns in locating and maintaining safe, affordable housing of their choice. The Forensic Supportive Housing Program works with Rochester Psychiatric Center, MCOMH Single Point of Access (SPOA), and the NYS Office of Mental Health Division of Forensic Services to provide support for individuals transitioning to the community upon release either directly from prison or from a State Psychiatric Center, where they were admitted post prison release. The primary objective is to assist individuals to successfully maintain community living. The service includes assistance with searching for, securing, and establishing apartments and assistance with moving to new residence as needed. Services can include assisting with associated expenses, outfitting apartments with necessary household goods and furniture, assisting with budgeting and applying for benefits, providing stipends for rent and utilities, assisting with and teaching how to resolve issues with landlords and how to maintain an apartment, making referrals to treatment and support services, and participating in planning for and addressing client needs with other providers as needed.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Capacity (beds)/individuals served/units (bed days)

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	33	33	33	33
Individuals Served:	34	51	48	40
Units of Service:	9,210	10,329	9,297	10,194

2. SELECTED OUTCOME INDICATOR: Percent of clients remaining in apartment 1 year or more

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	84%	60%	66%	72%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Behavioral Health Cummonity Database/Provider Performance Reports

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

CONTRACTOR: NAMI Rochester, assumed name of Families and Friends of the Mentally Ill, Inc.

EXECUTIVE DIRECTOR: Donna Leigh Estes, CEO

BOARD MEMBERS: Melissa Coppa, Steve Boily, Noah Crockett, James D'Amico, Robert Daitz, CPA, Nanette Elliott, James Grossman, Issac Jordan Jr., Courtney Kleiman, John Messenger, Michael Murphy, William Perun Jr., Ryan Thibodeau, Lisa M. Wainwright, Rebecca Ward

PROGRAMS INCLUDED: Advocacy Services

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Advocacy Services

CONTRACTOR: NAMI ROCHESTER, ASSUMED NAME OF FAMILIES AND FRIENDS OF THE MENTALLY ILL, INC.

CONTRACT AMOUNT: 111,441

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S):

NAMI Rochester 344 N. Goodman Street, Rochester NY 14607, is the local affiliate of the National Alliance on Mental Illness, the nation's largest grassroots mental health organization dedicated to building better lives for Americans affected by mental illness through education, advocacy, awareness, and support. All services are provided and/or facilitated by trained peers who have personally experienced mental illness or who are family members of people with mental illness. NAMI provides services at their main office in Village Gate Square and throughout Monroe County (e.g., at schools, hospitals, inpatient units, community events, colleges, other agencies, etc.).

NAMI's services include:
1. Providing educational workshops on mental illness based on educational curricula about mental illness developed and evaluated by the NAMI national organization.
2. Facilitating peer-run support groups for individuals experiencing mental illness themselves and family members of people with mental illness.
3. Organizing and giving education and awareness presentations to the general public to promote awareness and understanding of mental health issues and support/recovery resources.
4. Providing one-on-one support to individuals and families regarding mental health challenges and support/recovery resources by phone, email, and in person.

A portion of this contract's funding is allocated for a pilot expansion of NAMI's services to additional populations who are under-represented or face difficulties engaging in mental health support services (including but not limited to people from diverse ethnic groups, individuals who are deaf/hard-of-hearing, and elderly individuals). NAMI will conduct outreach to individuals with mental illness and/or their family members who belong to under-served populations and will improve the accessibility and cultural responsiveness of NAMI programs and services to the targeted under-served population(s).

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Individuals served

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	2,206	1,727	1,900	2,090
Units of Service:	n/a	n/a	n/a	n/a

2. SELECTED OUTCOME INDICATOR: Percentage of education participants who agreed that the program was useful

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	100%	100%	100%	100%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

SOURCE MATERIAL: Provider Performance Reports

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

CONTRACTOR: Partners in Community Development, Inc.

EXECUTIVE DIRECTOR: Len Statham, Executive Director

BOARD MEMBERS: Albert Algarin, Megan Burke, Tammy Major, Timothy Rainey, and Melissa Sullivan-Whyte.

PROGRAMS INCLUDED: Youth Peer Learning Collaborative

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Youth Peer Learning Collaborative

CONTRACTOR: PARTNERS IN COMMUNITY DEVELOPMENT, INC.

CONTRACT AMOUNT: 20,000

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): Partners in Community Development, Inc. located at 45 Maxon Street, Rochester NY 14609, will provide recruitment, coaching, and mentorship support for Black, Indigenous, and People of Color (BIPOC) youth participating in the Youth Peer Advocacy (YPA) Credentialing Cohorts and Junior Youth Certificate Peer (JYCP) Career Pathways education outreach sessions focusing on youth and young adults ages 14-29. Vendor will provide outreach and engagement to families, caregivers, and young adults impacted by mental health through their own lived experience. Overall goal will be to increase the representation of the BIPOC Family and Youth Peer Advocates working across the health/behavioral health care workforce working, serving, living, worshiping, and volunteering across Monroe County with community-based settings including recreation centers, after school programs, barbershops, libraries, faith centers, and other settings.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Individuals (Youth) Served

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	38	41	45	49
Units of Service:	n/a	n/a	n/a	n/a

2. SELECTED OUTCOME INDICATOR: Percent of Youth that received YPA Certification

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	66%	12%	45%	50%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Provider Performance Report

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

CONTRACTOR: Pathways, Inc.

EXECUTIVE DIRECTOR: Joseph Cevette, MPS, CEO

BOARD MEMBERS: William Agan; Sandy Bauer; Shelby Bierwiler; Peter Clearwater; Marc Hample; Ed Linsler; Ross Perry; Joshua Powers; Cindy Pugh-Williams; Leslie Shelhamer; Christa Stelmack

PROGRAMS INCLUDED: Skill Building

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Skill Building

CONTRACTOR: PATHWAYS, INC.

CONTRACT AMOUNT: 174,890

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): Pathways, Inc. located at 700 Metro Park West, Rochester NY 14623, provides skill building services to children and adolescents who reside in Monroe County, under the age of 21, who demonstrate mental health-related functional limitations (severe emotional disturbance, significant mental health challenges, and/or complex mental health needs).

Skill building services are provided to compensate for or eliminate functional deficits and interpersonal and/or environmental barriers associated with a youth's behavioral needs. Skill building services support efforts to maintain youth safely and more successfully in the community. Activities included in the services are expected to be culturally sensitive, task-oriented, and focused on personal and community competence (including but not limited to social and interpersonal skills, daily living skills, coping skills, and intervention implementation). Services provided by the skill builders occur in the youths' homes or in the community and are documented by skill building staff in an accurate and timely manner.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Individuals served/units of service (contact hours)

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	17	20	24	28
Units of Service:	234	273	300	325

2. SELECTED OUTCOME INDICATOR: Percentage of discharged clients who met at least half of goals

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	46%	75%	77%	79%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Provider Performance Reports/ Behavioral Health Community Database

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

CONTRACTOR: Rochester Regional Health or The Rochester General Hospital

EXECUTIVE DIRECTOR: Eve Hosford, LCSW-R, Vice President & CAO

BOARD MEMBERS: Madeline August, PhD; Korey Brown; Karen Gallina; Patricia Gatlin, PhD, RN, CNE; Tom Hall, Ed.D.; Eve Hosford, LCSW R; Sara Kelly, PhD; Ernest Lamour; Walter Larkin, Jr.; Mary Marrocco, MD; Dan Meyers; Dawn Riedy, MD; Leon Sawyko; Colin Scantlin, MPA, BSN, RN; Michael Simson, MD; Elaine Spaull; Anne Wilder.

PROGRAMS INCLUDED: Crisis Intervention

Personalized Recovery Oriented Services (PROS)

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Crisis Intervention

CONTRACTOR: ROCHESTER REGIONAL HEALTH or THE ROCHESTER GENERAL HOSPITAL

CONTRACT AMOUNT: 932,558

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): The Rochester General Hospital (RGH) operates under Rochester Regional Health along with other affiliated entities. This service provides trained and qualified mental health practitioners who provide crisis intervention services in the RGH Emergency Room at 1425 Portland Avenue, Rochester New York 14621, 24 hours per day. Crisis intervention services, applicable to adults, children and adolescents, are tasked with reducing acute symptoms and restoring individuals to pre-crisis levels of functioning; screening clients for mental health, substance use disorder, developmental disability, and other health issues; triaging and assessing client needs and resources related to the crisis situation; assisting in stabilizing clients' current behavioral and physical health condition; and/or referring clients to appropriate programs or services related to the current crisis and to avoid future crises.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Individuals served/units of service (visits)

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	2,277	2,170	2,300	2,350
Units of Service:	3,326	3,109	3,300	3,390

2. SELECTED OUTCOME INDICATOR: Percent of discharges where client is seen by a community behavioral health provider within seven days

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	33%	36%	38%	40%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Behavioral Health Community Database

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Personalized Recovery Oriented Services (PROS)

CONTRACTOR: ROCHESTER REGIONAL HEALTH or THE ROCHESTER GENERAL HOSPITAL

CONTRACT AMOUNT: 372,741

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): The Rochester General Hospital (RGH) located at 224 Alexander Street, Rochester NY 14607, operates under Rochester Regional Health along with other affiliated entities. RGH operates Personalized Recovery Oriented Services (PROS), licensed by the New York State Office of Mental Health, at the Genesee Mental Health Center. This program provides comprehensive recovery oriented services to adults with designated mental illness diagnoses, including serious and persistent mental illness and adults with mental illness and co-occurring substance use disorders. The goal of the program is to integrate treatment, support, and rehabilitation in a manner that facilitates the individual's recovery. The primary objectives for individuals in the program are to: improve functioning, reduce inpatient utilization, reduce emergency services, reduce contact with the criminal justice system, increase employment, attain higher levels of education, and secure preferred housing. Services include a variety of individual and group interventions that fall into one of four categories: Community Rehabilitation and Support, Intensive Rehabilitation, Ongoing Rehabilitation and Support, and Clinical Treatment, an optional component of a PROS program which RGH does provide.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Capacity (slots)/individuals served

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	230	230	230	230
Individuals Served:	286	295	310	315
Units of Service:	n/a	n/a	n/a	n/a

2. SELECTED OUTCOME INDICATOR: Percent of participants engaged in meaningful community activities

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	35%	25%	35%	40%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Behavioral Health Community Database/Provider Performance Reports

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

CONTRACTOR: Rochester Rehabilitation Center, Inc.

EXECUTIVE DIRECTOR: Darrell Whitbeck, Executive Vice President/COO, OTR,L

BOARD MEMBERS: Jeffrey W. Baker, JD., Roy M. Beecher, Andrea Bonafiglia, David G. Case, BA,CPA., Eileen Gage, RN, MA., Mary Herlihy Gerran, JD., Christoper A. Harris, BS., Robert Johnson, BA., Rachel W. Kielon, MAcc., James H. King, BASc., Ann E. Kurz, MS., Sean R. Ossont, MBA., Kevin Overton, JD., Tim Vaughan, BS., Joyce W. Weir, PhD., Thomas White, JD.

PROGRAMS INCLUDED: Personalized Recovery Oriented Services (PROS)

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Personalized Recovery Oriented Services (PROS)

CONTRACTOR: ROCHESTER REHABILITATION CENTER, INC

CONTRACT AMOUNT: 305,731

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): Rochester Rehabilitation Center located at 1000 Elmwood Avenue, Rochester NY 14620, operates Personalized Recovery Oriented Services (PROS) which is licensed by the New York State Office of Mental Health. This programs provides comprehensive recovery-oriented services to adults diagnosed with designated mental illness diagnoses, including serious and persistent mental illness and adults with mental illness and co-occurring substance use disorders. The goal of the program is to integrate treatment, support, and rehabilitation in a manner that facilitates the individual's recovery. The primary objectives for individuals in the program are to improve functionality, reduce inpatient utilization, reduce emergency services, reduce contact with the criminal justice system, increase employment, attain higher levels of education, and secure preferred housing. Services include a variety of individual and group interventions that fall into one of three categories: Community Rehabilitation and Support, Intensive Rehabilitation, and Ongoing Rehabilitation and Support.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Capacity (slots)/individuals served

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	170	170	170	170
Individuals Served:	189	201	210	221
Units of Service:	n/a	n/a	n/a	n/a

2. SELECTED OUTCOME INDICATOR: Percent of participants engaged in meaningful community activities

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	11%	62%	65%	68%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Behavioral Health Community Database/Provider Performance Reports

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

CONTRACTOR: The Mental Health Association of Rochester/Monroe County, Incorporated

EXECUTIVE DIRECTOR: Valerie Way, President/CEO

BOARD MEMBERS: Christen Brun, Michelle Halloran, Haley Henning, Russell James, Krista Jenkins, Michelle Lee, Juanita Lyde, David Oliveiri, Jeff Pier, Jacqueline Wambach, Felicia Reed-Watt, Christina Thompson, Jessica Wilson, Patricia Woods

PROGRAMS INCLUDED: Community and Peer Support Services
Creative Wellness Opportunities
Family Support Services
Life Skills
Self-Help Drop In Center
Suicide Prevention

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Community and Peer Support Services

CONTRACTOR: THE MENTAL HEALTH ASSOCIATION OF ROCHESTER/MONROE COUNTY. INCORPORATED

CONTRACT AMOUNT: 392,262

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): The Mental Health Association of Rochester (MHA) at 274 N Goodman Street, Unit D103, Rochester NY 14607, provides an array of community and peer support services for adults experiencing mental health challenges (with or without co-occurring substance use disorders) and their families. These services promote consumer empowerment and self-engagement in recovery through education, skill development, peer support, and advocacy. Services are provided individually or in groups. Most services are provided by peers (individuals who have experienced mental health challenges). Services are provided within three core areas:

1. Peer Coaching and Navigation Services, including educating and assisting individuals and families in navigating the mental health system, facilitating peer-run groups at local inpatient units and community locations to provide information on resources and encouragement about returning to the community, benefits advisement, relationship development to empower individuals to engage in their own recovery, assisting with identifying and making progress towards goals, making referrals and supporting individuals in developing life skills, connecting to services, and promoting personal and financial stability.
2. Peer Employment Support Services, including organizing and/or facilitating educational presentations related to obtaining and maintaining employment while coping with mental health challenges and providing peer-based mutual support for those with mental health challenges who are seeking or maintaining employment and economic self-sufficiency.
3. Community Education and Training, including conducting educational presentations and workshops related to wellness and recovery.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Individuals served/units of service (contacts)

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	173	153	176	202
Units of Service:	702	627	1,047	1,152

2. SELECTED OUTCOME INDICATOR: # of participants that attended the educational speaker series

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	75	115	132	152

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Consolidated Fiscal Report/Behavioral Health Community Database

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Creative Wellness Opportunities

CONTRACTOR: THE MENTAL HEALTH ASSOCIATION OF ROCHESTER/MONROE COUNTY, INCORPORATED

CONTRACT AMOUNT: 326,905

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): The Mental Health Association (MHA) of Rochester at 274 N Goodman Street, Unit D103, Rochester NY 14607, offers the Creative Wellness Opportunity (CWO) program that promotes empowerment of and development of community among adults with mental illness (with or without co-occurring substance use disorders) in Monroe County who are living in the community and engaged in their own recovery. CWO provides opportunities to engage in creative arts, mutual support groups, work exploration, recovery opportunities, and advocacy. These services include offering workshops and workspace for expressive arts; holding special events and exhibits to promote community involvement and integration; offering mutual support groups at least once per week; offering additional therapeutic options such as martial arts, meditation, and yoga; providing resources and information to increase consumer awareness and involvement in advocacy by disseminating information about mental health recovery, increasing involvement in recovery-oriented opportunities (such as focus groups), and other personal growth opportunities; and engaging CWO community members in work exploration opportunities (full-time, part-time, time-as-reported, or contracted employment; stipends; or volunteering) which allow adults diagnosed with mental illness the opportunity to facilitate workshops, support the CWO community, develop peer leadership skills, and gain transferable job skills.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Individuals served (unique attendees)/units of service (total workshop attendance)

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	461	471	518	496
Units of Service:	3,449	3,596	3,956	4,352

2. SELECTED OUTCOME INDICATOR: Percent of individuals who self-report that program participation reduced their need for hospitalization.

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	62%	78%	80%	85%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Annual report

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Family Support Services

CONTRACTOR: THE MENTAL HEALTH ASSOCIATION OF ROCHESTER/MONROE COUNTY, INCORPORATED

CONTRACT AMOUNT: 730,656

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): The Mental Health Association (MHA) of Rochester at 274 N Goodman Street, Unit D103, Rochester NY 14607, operates Family Support Services (FSS) which provides a comprehensive range of support services to families in which a child experiences a mental or behavioral health challenge. This service is provided by family peers with lived experience in the mental health services system. Services include family advocacy and mentoring (needs and strengths assessments, emotional support, crisis support, articulating goals, problem-solving, and family skill development), parent training and education, self-help support groups for families and youth, educational advocacy (assisting and coaching families in securing proper services for children at school), transportation assistance for FSS events, referring families to community resources, and outreach to promote the program's services. Particular attention is paid to the development of services that are accessible and appropriate to the needs of multicultural and bilingual populations. The program also provides support to the Priority Access Team, a joint effort with the MCOMH and several providers to reduce the number of youth referred for further inpatient services at the Children's Psychiatric Center by providing community-based services. The program surveys family and youth receiving FSS services and trainings regarding satisfaction to obtain feedback on desired outcomes.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Individuals served (families)/units of service (contact hours)

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	173	124	90	113
Units of Service:	536	228	138	173

2. SELECTED OUTCOME INDICATOR: Percent of families discharged with improved Family Assessment of Needs and Strengths (FANS) scores

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	12%	5%	15%	20%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Provider Performance Reports

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Life Skills

CONTRACTOR: THE MENTAL HEALTH ASSOCIATION OF ROCHESTER/MONROE COUNTY, INCORPORATED

CONTRACT AMOUNT: 243,194

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): Mental Health Association (MHA) of Rochester at 274 N Goodman Street, Unit D103, Rochester NY 14607, operates a Life Skills program that offers educational workshops, support groups, and training related to life skills, mental wellness, recovery, and employment to adults who self-identify as having a mental illness. Services are provided by peers (individuals who have personal experience with mental health challenges). The program offers workshops and trainings on topics such as anger management, community involvement, civic engagement, cooking, nutrition, mindfulness, Wellness Recovery Action Planning, and communication skills. Program staff refer clients to other community resources as needed. This program also offers training and support to individuals who would like to become certified peer specialists through NYS Office of Mental Health or other NYS agencies. Services include organizing and facilitating study groups, organizing opportunities to complete online classes, assisting with applications for peer credentials or scholarships, supporting individuals in finding volunteer or paid roles as a peer, and providing long-term support for peers working in the community to promote self-care, professional development, hiring and retention of peers in the workforce and more appropriate usage of peers in the behavioral health workforce.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Individuals served/units of service (visits)

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	92	90	99	108
Units of Service:	3,100	1,445	3,258	3,421

2. SELECTED OUTCOME INDICATOR: Percent of participants with psychaitric inpatient admissions while enrolled

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	11%	9%	8%	7%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Behavioral Health Community Database

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Self-Help Drop In Center

CONTRACTOR: THE MENTAL HEALTH ASSOCIATION OF ROCHESTER/MONROE COUNTY, INCORPORATED

CONTRACT AMOUNT: 362,147

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): The Mental Health Association (MHA) of Rochester at 274 N Goodman Street, Unit D103, Rochester NY 14607, operates a Self-Help Drop-In Center (SHDIC) at 344 N Goodman Street, Rochester NY 14607, available to adults (18 years old and older) with mental illness (with or without co-occurring substance use disorders) who require support or who are experiencing situational crises. The SHDIC is a community-based, consumer-run program staffed by peers (individuals with personal experience with mental illness). The program hires, trains and monitors the performance of Peer Specialists as well as supporting and encouraging peers to obtain any relevant state credentials. The SHDIC Peer Specialists provide support services, including crisis assessment and intervention, one-on-one and group-based peer support, referral/linkage to community resources, short-term aftercare to individuals experiencing psychosocial crises (e.g., follow-up), and empowerment (e.g., opportunities to share personal stories, community celebrations, and motivational speeches). The SHDIC provides an alternative to emergency room and crisis service utilization when appropriate. This program is open M-F 1-9pm and Sat/Sun from 11-7.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Individuals served/units of service (visits)

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	60	58	52	57
Units of Service:	694	760	590	649

2. SELECTED OUTCOME INDICATOR: Percent of clients with psychiatric emergency department services while enrolled

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	13%	21%	19%	17%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Behavioral Health Community Database

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Suicide Prevention

CONTRACTOR: THE MENTAL HEALTH ASSOCIATION OF ROCHESTER/MONROE COUNTY, INCORPORATED

CONTRACT AMOUNT: 20,000

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): The Mental Health Association (MHA) of Rochester located at 274 N. Goodman Street, Suite D103, Rochester NY 14607, facilitates the Partners for Suicide Prevention Coalition (P4SP). This coalition is committed to ensuring that community members of all ages have access to accurate suicide prevention resources to help themselves and/or a loved one. As a multi-partner coalition, the coalition promotes a collaborative approach to raise awareness on suicide prevention, intervention, post-vention, and recovery. P4SP provides suicide prevention education, awareness and promotional materials, which includes a website, various types of support groups for families and loved ones and post-vention resource kits.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Individuals Served/Distribution of Post-Vention Resource Kits

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	n/a	118	124	130
Units of Service:	n/a	n/a	n/a	n/a

2. SELECTED OUTCOME INDICATOR: Individuals who attended annual conference

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	n/a	80	84	90

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Provider Performance Reports

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

CONTRACTOR: The Unity Hospital of Rochester

EXECUTIVE DIRECTOR: Eve Hosford, LCSW-R, Vice President & CAO

BOARD MEMBERS: Madeline August, PhD; Korey Brown; Karen Gallina; Patricia Gatlin, PhD, RN, CNE; Tom Hall, Ed.D.; Eve Hosford, LCSW R; Sara Kelly, PhD; Ernest Lamour; Walter Larkin, Jr.; Mary Marrocco, MD; Dan Meyers; Dawn Riedy, MD; Leon Sawyko; Colin Scantlin, MPA, BSN, RN; Michael Simson, MD; Elaine Spaull; Anne Wilder.

PROGRAMS INCLUDED: Adult Care Management (Non-Medicaid)

Assertive Community Treatment

Home Based Crisis Intervention

Jail Diversion Drop-Off Center

Personalized Recovery Oriented Services (PROS)

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Adult Care Management (Non-Medicaid)

CONTRACTOR: THE UNITY HOSPITAL OF ROCHESTER

CONTRACT AMOUNT: 503,308

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): The Unity Hospital program, located at 224 Alexander Street, Rochester, New York, operates under Rochester Regional Health and its affiliated entities.This program provides care management services to adults with serious mental illness who are not eligible for Medicaid and, consequently, Health Home Care Management services. Non-Medicaid Care Management services mirror Health Home Care Management services and include: Comprehensive Care Management Planning, Care Coordination, Health Promotion, Transitional Care (including appropriate follow-up from inpatient to other settings), Individual and Family Support Services, and referrals to community and social supports tailored to the individual needs. Care management also includes conducting outreach to referred clients, conducting intakes and assessments of client needs and strengths, and service planning and coordination. Care management services are also provided for those with Assisted Outpatient Treatment (AOT) orders who do not have Medicaid. Service dollars to support service plan goals are available for individuals who have a diagnosed mental illness who do or do not have Medicaid. The program is expected to be culturally responsive and provides aggressive outreach, linkage, and advocacy to community resources.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Individuals served

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	102	85	100	110
Units of Service:	n/a	n/a	n/a	n/a

2. SELECTED OUTCOME INDICATOR: Percent of clients with positive outcome at discharge

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	85%	87%	89%	91%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Provider Performance Reports

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Assertive Community Treatment

CONTRACTOR: THE UNITY HOSPITAL OF ROCHESTER

CONTRACT AMOUNT: 182,143

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): The Unity Hospital operates under Rochester Regional Health along with other affiliated entities. Rochester Regional Health System (RRHS) operates a 48 slot Assertive Community Treatment (ACT) team located at 89 Genesee Street, Rochester NY 14611; which delivers mobile, community-based comprehensive services to individuals who have been diagnosed with severe mental illness and whose needs have not been well met by more traditional service delivery approaches (i.e., clinic-based outpatient treatment). ACT teams are licensed by the New York State Office of Mental Health and adhere to all appropriate regulations and guidelines. The goal of ACT is to deliver integrated services of the recipients' choice, to assist recipients in making progress toward goals, and to adjust services over time to meet recipients' changing needs. The program prioritizes individuals referred from the Rochester Psychiatric Center campus and other high need individuals in the community. Staff have immediate access to wrap-around funding to meet emergent and client-specific needs (e.g., food and clothing). The RRHS ACT Team cooperates with, and is an active participant in the Monroe County Single Point of Access (SPOA) meetings and works with the Monroe County Office of Mental Health to identify the resources needed to stabilize individuals in the program.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Capacity (slots)/individuals served/units of service (visits)

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	48	48	48	48
Individuals Served:	72	53	65	68
Units of Service:	2,753	2,657	2,700	2,725

2. SELECTED OUTCOME INDICATOR: Percentage of individuals who demonstrated substantial achievement of program objectives upon discharge

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	50%	66%	68%	70%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Behavioral Health Community Database\Discharge Outcome

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Home Based Crisis Intervention

CONTRACTOR: THE UNITY HOSPITAL OF ROCHESTER

CONTRACT AMOUNT: 1,092,934

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): The Unity Hospital operates under Rochester Regional Health. The New York State Office of Mental Health established the Home Based Crisis Intervention (HBCI) Program located at St. Mary's Hospital, 65 Genesee Street, Rochester NY 14611, a family preservation initiative, to prevent the unnecessary inpatient psychiatric hospitalization of children and youth. The overall goal of the program is to provide culturally and linguistically appropriate intensive in-home crisis intervention services to youth who are at imminent risk of psychiatric hospitalization; services are designed to be short-term and may range from two to eight weeks of duration. The program consists of clinical and administrative staff and has the capacity to serve a maximum of 16 families at any point in time. In order to provide timely intervention to youth and family in crisis, services begin within 24 hours after referral to the program. The intake and assessment process is designed to ensure that an individualized intensive support plan is developed to support efforts to maintain children safely in the community. As intensive in-home services are individualized, the length of stay and frequency of contact will vary based on youth and family needs. HBCI staff, the family and referral source work together to identify the specific goals and objectives, how these goals will be measured, and determine the anticipated duration in the program.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Capacity (slots)/individuals/ families served/units of service (direct staff hours)

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	16	16	16	16
Individuals Served:	87	89	95	97
Units of Service:	904	832	1,000	1,050

2. SELECTED OUTCOME INDICATOR: Percent of children discharged who remained at home.

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	94%	97%	98%	98%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Behavioral Health Community Database/Provider performance reports

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Jail Diversion Drop-Off Center

CONTRACTOR: THE UNITY HOSPITAL OF ROCHESTER

CONTRACT AMOUNT: 1,402,715

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): The Unity Hospital (Unity) operates under Rochester Regional Health along with other affiliated entities. Unity operates a Jail Diversion Drop-Off Center program within their Behavioral Health Access and Crisis Center (BHACC) at 65 Genesee Street, Rochester New York 14611. This program serves adults who would benefit from behavioral health assessments as determined by Monroe County law enforcement officers, Forensic Intervention Team (FIT), Persons in Crisis (PIC) Team, parole, alternative to incarceration, pre-trial, probation, treatment courts, or judges. Many jail diversion clients are transported to the BHACC by Monroe County law enforcement officers however,individuals may also arrive through self referral or be transported by family members or other supports. The primary objective is to assess behavioral health needs and refer individuals to appropriate treatment or support. This program allows law enforcement officers to divert individuals away from the criminal justice system in a manner that minimizes arrests, legal charges, time in jail, criminal convictions, and/or higher levels of justice involvement, while increasing the likelihood that individuals will connect to treatment, community supports, and other assistance. Unity evaluates clients to determine the appropriate level of care and whether services can be delivered safely in the Jail Diversion Drop-Off Center. Unity also assesses client needs and develops client safety plans, arranges transportation after the visit, refers clients to ongoing supports, and provides peer supports. Unity collaborates with the MCOMH, law enforcement agencies, New York State Office of Mental Health Center for Diversion and other service providers to continuously monitor and adjust operations as seen fit.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Individuals Served

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	346	445	440	445
Units of Service:	n/a	n/a	n/a	n/a

2. SELECTED OUTCOME INDICATOR: Percent of clients recommended for services who engage in at least one service within 30 days

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	39%	54%	59%	62%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Provider Performance Reports and OMH Redcap data system.

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Personalized Recovery Oriented Services (PROS)

CONTRACTOR: THE UNITY HOSPITAL OF ROCHESTER

CONTRACT AMOUNT: 372,741

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): The Unity Hospital operates under Rochester Regional Health along with other affiliated entities. Personalized Recovery Oriented Services (PROS) services are licensed by the New York State Office of Mental Health and located at 81 Lake Avenue,Rochester NY 14608. This program provides comprehensive recovery oriented services to adults with designated mental illness diagnoses, including serious and persistent mental illness and adults with mental illness and co-occurring substance use disorders. The goal of the program is to integrate treatment, support, and rehabilitation in a manner that facilitates the individual's recovery. The primary objectives for individuals in the program are to: improve functioning, reduce inpatient utilization, reduce emergency services, reduce contact with the criminal justice system, increase employment, attain higher levels of education, and secure preferred housing. Services include a variety of individual and group interventions that fall into one of four categories: community rehabilitation and support, intensive rehabilitation, ongoing rehabilitation and support, and clinical treatment, an optional component of a PROS program which Unity does provide.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Capacity (slots)/individuals served

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	178	178	178	178
Individuals Served:	251	243	255	265
Units of Service:	n/a	n/a	n/a	n/a

2. SELECTED OUTCOME INDICATOR: Percent of participants engaged in meaningful community activities

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	38%	64%	75%	80%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Behavioral Health Community Database/Provider Performance Reports

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

CONTRACTOR: University of Rochester Office of Mental Health

EXECUTIVE DIRECTOR: H. Benjamin Lee, Department Chair

BOARD MEMBERS: James Adams, Simeon I. Banister, Philip G. Beckley, Martin K. Birmingham, Daniel J Burns, William R. Calnon, D.D.S. , Daniel J. Chessin, Joanne V. Clements, RN, ACNP, Gregory C. Ewing, Anne B. Francis, M.D., Emerson U. Fullwood, Ryan M. Hallings, Myra P. Henry, Kenneth L. Hines, Susan R. Holliday, Dale L. Hunt, Darryl A."Tony" Jackson, Curtis J. Johnson, Laurence Kessler, Mark J. Kovaleski, Diana R. Kurty, Peter J. Landers, Robert N. Latella, Esq., Fabricio S. Morales, Kenneth Ouriel, MD., Susan Parkes-McNally, Angelica Perez-Delgado, Patricia S. Redding, Thomas S. Richards, Susan S. Robfogel, Esq., Naomi Silver, Lori Van Dusen, Justin M. Weis, M.D., Ex-Officio Members: Adam P. Anolik, Michael J. Apostolakos, M.D., H. Christopher Boehning, David A. DiLoreto, MD, Eli Eliav, DMD, Ph.D., Michael F. Kamali, MD., Lisa A Kitko, RN, PhD., David C. Linehan, M.D., Sarah C. Mangelsdorf, Shaun Nelms, Kevin O[Gara, MD., William Olsen, Kathy Parrinello, RN, PhD., Nicole S. Sampson, Richard Schulick, MD., Senior / Life Members Richard T. Anb, Richard Bourns, Michael Buckley, Esq C. William Brown , Michael Buckley, Esq., Elaine Del Monte, Roger B. Friedlander, Jocelyn Goldberg-Schaible, Deborah Goldman-Landsman, Holly Hillberg, Richard Kaplan, Dan Kerpelman, Ronald Knight, G. Kennedy McCurdy, Thomas McDermott, L. Joyce Noble, E. Philip Saunders, Daniel Wegman, Joseph Wilson Adminstration Contacts David C. Linehan, MD., Lorrie Maniocci

PROGRAMS INCLUDED: Adult Care Management (Non-Medicaid)

Assertive Community Treatment - Project ACT

Asserive Community Treatment - Strong Ties ACT

Clinic Creative Engagement Program

Forensic Fellowship Program

Transitional Living - Crisis Housing

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Adult Care Management (Non-Medicaid)

CONTRACTOR: UNIVERSITY OF ROCHESTER OFFICE OF MENTAL HEALTH

CONTRACT AMOUNT: 720,565

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): Strong Memorial Hospital located at 601 Elmwood Avenue, Rochester NY 14642, provides care management services to adults with serious mental illness who are not eligible for Medicaid and, consequently, Health Home Care Management services. Non-Medicaid Care Management services mirror Health Home Care Management services and include: Comprehensive Care Management Planning, Care Coordination, Health Promotion, Transitional Care (including appropriate follow-up from inpatient to other settings), Individual and Family Support Services, and referrals to community and social supports tailored to the individual needs. Care management also includes conducting outreach to referred clients, conducting intakes and assessments of client needs and strengths, and service planning and coordination. Care management services are also provided for those with Assisted Outpatient Treatment (AOT) orders who do not have Medicaid. Service dollars to support service plan goals are available for individuals who have a diagnosed mental illness who do or do not have Medicaid. The program is expected to be culturally responsive and provides aggressive outreach, linkage, and advocacy to community resources.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Individuals served

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	203	247	259	272
Units of Service:	n/a	n/a	n/a	n/a

2. SELECTED OUTCOME INDICATOR: Percent of clients with positive outcome at discharge

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	37%	45%	49%	54%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Program database

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Assertive Community Treatment - Project ACT

CONTRACTOR: UNIVERSITY OF ROCHESTER OFFICE OF MENTAL HEALTH

CONTRACT AMOUNT: 196,332

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): Strong Memorial Hospital located at 601 Elmwood Avenue, Rochester NY 14642, operates a 68-slot Assertive Community Treatment (ACT) team which delivers mobile, community-based comprehensive services to individuals who are diagnosed with severe and persistent mental illness that seriously impair their functioning and result in long-term use of high-level services and whose needs have not been well met by more traditional service delivery approaches (e.g., clinic-based outpatient treatment). ACT teams are licensed by the New York State Office of Mental Health and adhere to all appropriate regulations and guidelines. Of the 68 slots, 48 prioritize individuals referred from the Rochester Psychiatric Center campus and other high-need individuals in the community, and 20 slots prioritize individuals with criminal justice involvement. The goal of ACT is to deliver integrated services of the recipients' choice, to assist recipients in making progress toward goals, and to adjust services over time to meet recipients' changing needs. Staff have immediate access to wrap-around funding to meet emergent and client-specific needs (e.g., food and clothing). The Strong Project ACT Team cooperates with, and is an active participant in Monroe County Single Point of Access (SPOA) meetings and works with MCOMH to identify the resources needed to stabilize the individuals in the program.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Capacity (slots)/individuals served/units of service (visits)

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	68	68	68	48
Individuals Served:	62	49	48	48
Units of Service:	2,816	2,378	2,259	2,259

2. SELECTED OUTCOME INDICATOR: Percent of individuals who demonstrate substantial achievement of program objectives upon discharge

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:		14%	25%	30%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Behavioral Health Community Database

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Assertive Community Treatment - Strong Ties ACT

CONTRACTOR: UNIVERSITY OF ROCHESTER OFFICE OF MENTAL HEALTH

CONTRACT AMOUNT: 125,171

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): Strong Memorial Hospital located at 601 Elmwood Avenue, Rochester NY 14642, operates a 68-slot Assertive Community Treatment (ACT) team which delivers mobile, community-based comprehensive services to individuals who are diagnosed with severe and persistent mental illness that seriously impair their functioning and result in long-term use of high-level services and whose needs have not been well met by more traditional service delivery approaches (e.g., clinic-based outpatient treatment). ACT teams are licensed by the New York State Office of Mental Health and adhere to all appropriate regulations and guidelines. The goal of ACT is to deliver integrated services of the recipients' choice, to assist recipients in making progress toward goals, and to adjust services over time to meet recipients' changing needs. The program prioritizes individuals referred from the Rochester Psychiatric Center campus and other high need individuals in the community. Staff have immediate access to wrap-around funding to meet emergent and client-specific needs (e.g., food and clothing). The Strong Ties ACT Team cooperates with, and is an active participant in Monroe County Single Point of Access (SPOA) meetings and works with the MCOMH to identify the resources needed to stabilize the individuals in the program.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Capacity (slots)/individuals served/units of service (visits)

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	68	68	68	68
Individuals Served:	61	67	60	48
Units of Service:	3,447	3,363	3,699	2,478

2. SELECTED OUTCOME INDICATOR: Percent of individuals who demonstrate substantial achievement of program objectives upon discharge

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	21%	50%	20%	30%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Behavioral Health Community Database

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY:	MH
PROGRAM:	Clinic Creative Engagement Program
CONTRACTOR:	UNIVERSITY OF ROCHESTER OFFICE OF MENTAL HEALTH
CONTRACT AMOUNT:	104,703
PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S):	The University of Rochester Medical Center (URMC) located at 601 Elmwood Avenue, Rochester NY 14642, operates the Pediatric Behavioral Health and Wellness Creative Arts Therapy Program. This program allows children and youth to use their love of arts to drive therapeutic outcomes. URMC provides individuals with opportunities to engage in creative arts, to help children reach their full potential by promoting healthy development through therapy groups. These groups use art, music, drama, and other innovative interventions to drive positive outcomes in children and adolescents. Role playing in therapy is a method practitioners use to treat issues associated with tough topics for children and youth , such as self-esteem, bullying, gender identity, sexuality, addressing and recovering from trauma, and building healthy relationships. These services include, but not be limited to, the following: Social-skills development, community, problem-solving and role playing; Creative processes to real-world scenarios; Use of art, music, drama, and other innovative interventions. These services will provide an alternative to emergency room and crisis service utilization when appropriate and will provide low-barrier access to peer-based support.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Individuals Served

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	n/a	44	48	53
Units of Service:	n/a	n/a	n/a	n/a

2. SELECTED OUTCOME INDICATOR: Percentage of Individuals who did not require ED visits post 30 days.

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	n/a	63%	69%	76%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Provider Performance Reports

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Forensic Fellowship Program

CONTRACTOR: UNIVERSITY OF ROCHESTER OFFICE OF MENTAL HEALTH

CONTRACT AMOUNT: 114,266

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): Strong Memorial Hospital (Strong) located at 601 Elmwood Avenue, Rochester NY 14642, provides an experienced supervising psychiatrist and fellowship program trainees to collaborate with the MCOMH Socio-Legal Center (SLC) in operating a Forensic Fellowship Program. Services will be performed at the SLC (50 W Main Street, Rochester NY 14614) and in criminal justice facilities (including but not limited to courts and jails). The duties performed by the supervisor and fellowship program trainees will include but are not limited to the following services:

1. Completion of court-ordered competency examinations and mental health evaluations: Strong will provide mental health evaluations and examinations of competence per New York Criminal Procedure Law Article 730, review data, prepare mental health evaluation reports for the referring party within timelines established by the referring party and/or the MCOMH SLC standards, advise MCOMH staff about individuals' psychiatric condition(s) and needs for treatment, and provide court testimony. Mental health and competency evaluations are ordered by local, county, and state courts or requested by justice-related agencies (such as but not limited to Probation and Pre-Trial Services) for criminal justice-involved individuals who are 16 years old and older. A minimum of eight evaluation slots will be provided per week. Information and documentation will be provided by Vendor within 24 hours of service provision.

2. Clinical consultation and supervision: Strong will provide forensic psychiatrists with sufficient training and experience (NYS license and at least five years of clinical and forensic experience) to supervise and mentor fellowship program trainees, provide clinical consultation to trainees.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Units of service (Evaluations completed by program staff)

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	n/a	n/a	n/a	n/a
Units of Service:	78	71	78	86

2. SELECTED OUTCOME INDICATOR: Percent of evaluations submitted to court on time

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	91%	70%	82%	86%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Socio-Legal Center Reports

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Transitional Living - Crisis Housing

CONTRACTOR: UNIVERSITY OF ROCHESTER OFFICE OF MENTAL HEALTH

CONTRACT AMOUNT: 198,982

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): Strong Memorial Hospital located at 601 Elmwood Avenue, Rochester NY 14642, maintains two crisis/respite apartments/long-stay rooms, rented by Strong from landlords in Monroe County, to serve high-need and/or high-risk individuals who have a serious mental illness, are in a mental health crisis or impending crisis, and involved in care management with Strong. Strong pays for the rent, utilities, necessary furnishings, and other required costs related to both thresholds. Strong assists clients in avoiding acute service utilization by collaborating with housing support staff, if applicable, as well as care management staff to comprehensively address client crisis situations, assist clients in securing permanent housing, and address other individualized needs. This program assists clients and their provider teams in developing plans to find and secure permanent housing as quickly as possible and assists clients in saving money or securing funding for future housing costs while living in the transitional crisis/respite apartment.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Capacity (bed)/individuals served/units of service (days)

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	2	2	6	6
Individuals Served:	6	4	6	6
Units of Service:	324	608	320	400

2. SELECTED OUTCOME INDICATOR: Percent of clients discharged who go directly to community housing thus diverting hospitalization

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	100%	100%	100%	100%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Provider Performance Reports

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

CONTRACTOR: Villa of Hope

EXECUTIVE DIRECTOR: Carolyn Carl, LCSW-R, President & CEO

BOARD MEMBERS: Christopher Bell, Berlin Bermudez, Korey Brown, Catherine Budlong, Robert Davis, Stephanie Dickman, Jonathan Ghent, Curtis Johnson, Tim Jones, Frederick Kass, M.D., Sandy Kleinberg, David Krusch, M.D., John Loury, Thomas K. McInerny, M.D., Dominick Morano, Timothy Perrotta, Melanie Phillips, Corinda Reaves, Chadwick Roy, Katherine Schnittman, Robert Wendler

PROGRAMS INCLUDED: Care Coordination

Psychiatric Emergency Department Diversion Program (Hope Place)

Youth Peer Mentoring

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Care Coordination

CONTRACTOR: VILLA OF HOPE

CONTRACT AMOUNT: 844,693

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): Villa of Hope located at 3300 Dewey Avenue, Rochester NY 14616, provides Care Coordination services to children and youth up to age 21 and their families. Children and youth in the program have a serious emotional disturbance or have experienced trauma. To be served by Care Coordination, the child/youth cannot be eligible for Medicaid Children's Health Home Care Management (HHCM). The services are tailored to meet the needs of youth at high risk of repeated or lengthy psychiatric hospitalization or other out-of-home placement. This program is home-based, focused on keeping children and youth at home and connected to their own communities, and is driven by System of Care values (family-driven, youth-guided, culturally and linguistically competent, trauma-informed, best practice oriented, and community- based). Care Coordinators collaborate regularly with other providers that work with the youth/family, including school personnel, treatment providers, and physicians, to provide supports based on the child's and family's individualized needs. The program offers outreach and intake services, assessment of child and family needs and strengths, goal and service planning, advocacy for appropriate services, coaching youth and families in self-advocacy, assistance in navigating and understanding services, referring youth and family members to services, planning for long-term supports, and providing crisis intervention and support through a 24-hour telephone number. Services are provided to model Children's HHCM services. Wrap-around funds are also available to purchase goods and services to support the needs of youth and families in Villa's care coordination and Children's HHCM services who have a serious emotional disturbance or mental health diagnosis.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Capacity (slots)/individuals served/units of service (visits)

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	56	56	56	56
Individuals Served:	119	124	130	137
Units of Service:	1,432	1,623	1,100	1,375

2. SELECTED OUTCOME INDICATOR: Percent of clients with psychiatric inpatient admissions while enrolled

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	4%	7%	6%	5%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Behavioral Health Community Database

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Psychiatric Emergency Department Diversion Program (Hope Place)

CONTRACTOR: VILLA OF HOPE

CONTRACT AMOUNT: 585,081

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): Villa of Hope operates a peer-run and peer-staffed Diversion Center (Hope Place) to provide a safe, supportive, and non-judgmental environment as an alternative to psychiatric Emergency Department (ED) visits for adults experiencing non-acute mental health-related crisis or pre-crisis in Monroe County. These services are located at 1099 Jay Street, Bldg P, Rochester NY 14611. Hope Place follows the "Living Room" model by offering a welcoming and comfortable physical space in which individuals can come and go as they please and speak with peer staff (individuals with personal experience with mental health challenges) to assist them in coping with their crisis and returning to a higher level of functioning as quickly as possible. Hope Place also offers referrals and follow-up services based on clients' needs. This program is open M-Thurs 8:00am - 7:00pm and Friday 8:00am - 5:00pm.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Individuals served/units of service (visits)

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	204	294	248	273
Units of Service:	1,300	2,111	1,374	1,511

2. SELECTED OUTCOME INDICATOR: Percent of visits for which the individual does not have a psychiatric ED visit within 30 days after the visit

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	93%	95%	96%	97%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Behavioral Health Community Database

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: MH

PROGRAM: Youth Peer Mentoring

CONTRACTOR: VILLA OF HOPE

CONTRACT AMOUNT: 167,308

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): Villa of Hope located at 3300 Dewey Avenue, Rochester NY 14616, provides youth peer mentoring services to youth under the age of 21 who are experiencing social, medical, emotional, developmental, substance use, and/or behavioral challenges in their home, school, placement, and/or community-centered services. These services are provided by a young adult who experienced similar challenges in their youth. Services are intended to develop and achieve the identified goals and/or objectives as set forth in the youth's individualized treatment plan. The structured, scheduled activities provided by this service emphasize the opportunity for the youth to expand the skills and strategies necessary to move forward in meeting their personal, individualized life goals, develop self-advocacy skills, and to support their transition into adulthood.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Individuals served/units of service (quarter hours direct service)

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	18	24	26	29
Units of Service:	493	604	664	730

2. SELECTED OUTCOME INDICATOR: Percent of youth discharged with one or more Youth Mentoring goals achieved

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	100%	83%	85%	87%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Behavioral Health Community Database/Provider Performance Reports

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

CONTRACTOR: Catholic Charities of the Diocese of Rochester D/B/A/ Catholic Charities Family and Community Services

EXECUTIVE DIRECTOR: Lori VanAuken, President/CEO

BOARD MEMBERS: James Aroune, Merideth Bahr - Andreucci, Jacqueline Benedetto, , Berlin Bermudez, Elizabeth (Fish) Ciaccio, Roger Cordero, Mary Kathryn Dappen, Patrick DiLaura, Mary Dombovy, Kristi Elias, Larry Farnand, Kristy Gonzalez, Christopher Johnson, Virgil Joseph, Dave Kelly, Alasdair J. MacKinnon, John F.Milazzo Jr., Laura Purcell, Iveth Reynolds, Tesfamichael Yohannes

PROGRAMS INCLUDED:

Chemical Dependence Community Residence (Alexander)

Chemical Dependence Community Residence (Barrington)

Chemical Dependence Community Residence (Jones)

Chemical Dependence Outpatient

Chemical Dependence Supportive Living

Rehabilitation and Stabilization - Freedom House

Rehabilitation and Stabilization - Liberty Manor

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: ASA

PROGRAM: Chemical Dependence Community Residence (Alexander)

CONTRACTOR: CATHOLIC CHARITIES OF THE DIOCESE OF ROCHESTER D/B/A/ CATHOLIC CHARITIES FAMILY AND COMMUNITY SERVICES

CONTRACT AMOUNT: 450,408

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): Catholic Charities Family and Community Services (CCFCS) owns and operates a community residential program that is located at 79 N. Clinton Avenue, Rochester New York 14604, which is licensed by the New York State Office of Addiction Services and Supports (OASAS) and adheres to all appropriate regulations and guidelines.The program has a capacity to serve 21 men. The structured therapeutic environment and individual, group, and family sessions support the development of a strong relapse prevention plan, life skills, healthy use of leisure time, planning, and social skills. This gender specific program attends to mental health issues and is dual diagnosis capable. It focuses on the special needs of men and addresses the following issues, as appropriate: responsible fatherhood, parenting skills, stabilization and maintenance of medical needs, and improvement of educational, vocational, and employment readiness. All services are provided in a culturally sensitive manner.

The program closed in 2022 and subsequently relocated to the above address. Following extensive renovations and an increase in operational capacity from 16 to 21 adult men, the program reopened in mid-January 2025.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Capacity (beds)/individuals served/units of service (days)

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	n/a	21	21	21
Individuals Served:	n/a	96	101	103
Units of Service:	n\a	6,772	6,900	7,000

2. SELECTED OUTCOME INDICATOR: One month retention rate in the program (for discharges)

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	n/n	72%	75%	77%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: OASAS Client Data System Reports

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: ASA

PROGRAM: Chemical Dependence Community Residence (Barrington)

CONTRACTOR: CATHOLIC CHARITIES OF THE DIOCESE OF ROCHESTER D/B/A/ CATHOLIC CHARITIES FAMILY AND COMMUNITY SERVICES

CONTRACT AMOUNT: 336,798

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): Catholic Charities Family and Community Services (CCFCS) owns and operates a community residential program at 385 East Ridge Road, Rochester New York 14621, which is licensed by the New York State Office of Addiction Services and Supports (OASAS) and adheres to all appropriate regulations and guidelines. The program has a capacity to serve 23 adult women and 5 children. The structured therapeutic environment and individual, group and family sessions support the development of a strong relapse prevention plan, life skills, healthy use of leisure time, planning and social skills. This gender specific program attends to mental health issues and is dual diagnosis capable. It focuses on the special needs of women and addresses the following issues, as appropriate: parenting skills, stabilization and maintenance of medical needs, and improvement of educational, vocational and employment readiness. All services are provided in a culturally sensitive manner.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Capacity (beds)/individuals served/units of service (days)

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	25	25	25	25
Individuals Served:	84	88	85	86
Units of Service:	6,531	6,566	6,800	6,900

2. SELECTED OUTCOME INDICATOR: One month retention rate in the program (for discharges)

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	78%	87%	89%	91%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: OASAS Client Data System Reports

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: ASA

PROGRAM: Chemical Dependence Community Residence (Jones)

CONTRACTOR: CATHOLIC CHARITIES OF THE DIOCESE OF ROCHESTER D/B/A/ CATHOLIC CHARITIES FAMILY AND COMMUNITY SERVICES

CONTRACT AMOUNT: 168,105

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): Catholic Charities Family and Community Services (CCFCS) owns and operates a community residential program located at 24 Jones Avenue, Rochester, New York 14608, which is licensed by the New York State Office of Addiction Services and Supports (OASAS) and operates in accordance with all applicable regulations and guidelines. The program has a capacity to serve 24 men. The structured therapeutic environment and individual, group and family sessions support the development of a strong relapse prevention plan, life skills, healthy use of leisure time, planning and social skills. This gender specific program attends to mental health issues and is dual diagnosis capable. It focuses on the special needs of men and addresses the following issues, as appropriate: responsible fatherhood, parenting skills, stabilization and maintenance of medical needs, and improvement of educational, vocational and employment readiness. All services are provided in a culturally sensitive manner.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Capacity (beds)/individuals served/units of service (days)

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	24	24	24	24
Individuals Served:	87	90	93	98
Units of Service:	8,301	7,732	8,000	8,100

2. SELECTED OUTCOME INDICATOR: One month retention rate in the program (for discharges)

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	92%	80%	85%	89%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: OASAS Client Data System Reports

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: ASA

PROGRAM: Chemical Dependence Outpatient

CONTRACTOR: CATHOLIC CHARITIES OF THE DIOCESE OF ROCHESTER D/B/A/ CATHOLIC CHARITIES FAMILY AND COMMUNITY SERVICES

CONTRACT AMOUNT: 794,097

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): Catholic Charities Family and Community Services (CCFCS) operates substance use outpatient clinic services at 79 North Clinton Avenue, Rochester New York 14604, which are licensed by the New York State Office of Addiction Services and Supports (OASAS) and comply with all applicable regulations and guidelines. Services offered within the program include individual/group sessions and family therapy in conjunction with specialized presentations or services to meet the unique needs of each client group served. All clients are screened for co-occurring disorders. The program includes specialized treatment tracks to address the unique gender, cultural, or language needs of special populations served. Specialized services available include: specialty groups for those recently released from incarceration or on parole; a continuum of outpatient treatment in Spanish with a special focus on the cultural needs of the Latino Clientele; a continuum of care to address the unique issues affecting women in recovery; programs offering treatment for clients with both chemical dependency and mental health issues; and day rehabilitation programs offering intensive treatment 5 days a week.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Individuals served/units of service (visits)

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	565	521	550	575
Units of Service:	6,540	6,791	6,800	6,825

2. SELECTED OUTCOME INDICATOR: Percent of discharges with individuals meeting half or more goals

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	18%	14 %	25%	35%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: OASAS Client Data System Reports

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: ASA

PROGRAM: Chemical Dependence Supportive Living

CONTRACTOR: CATHOLIC CHARITIES OF THE DIOCESE OF ROCHESTER D/B/A/ CATHOLIC CHARITIES FAMILY AND COMMUNITY SERVICES

CONTRACT AMOUNT: 136,220

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): Catholic Charities Family and Community Services (CCFCS) operates a supportive living program located at 87 North Clinton Avenue, Rochester, NY 14604, with a capacity for 24 adults. Supportive living programs are licensed by the New York State Office of Addiction Services and Supports (OASAS) and adhere to all appropriate regulations and guidelines. The program consists of apartments at various sites with embedded services and supports for individuals recovering from substance use disorder. Staff support abstinence and relapse prevention plans, life skills, healthy use of leisure time, planning, and social skills. Clients at this level of care are actively involved in educational, vocational and employment readiness unless otherwise indicated by special needs. Clients may be employed or actively seeking employment. They may also be continuing with mental health treatment, working on family reunification, parenting skills, stabilization and maintenance of medical needs, resolution of criminal justice status or other issues.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Capacity (beds)/individuals served/units of service (days)

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	24	24	24	24
Individuals Served:	74	70	74	78
Units of Service:	7,909	7,509	7,700	7,900

2. SELECTED OUTCOME INDICATOR: One month retention rate in the program (for discharges)

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	93%	82%	90%	93%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: OASAS Client Data System Reports

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: ASA

PROGRAM: Rehabilitation and Stabilization - Freedom House

CONTRACTOR: CATHOLIC CHARITIES OF THE DIOCESE OF ROCHESTER D/B/A/ CATHOLIC CHARITIES FAMILY AND COMMUNITY SERVICES

CONTRACT AMOUNT: 746,798

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): Catholic Charities Family and Community Services (CCFCS) operates Freedom House as a Stabilization and Rehabilitation Program with the capacity for 30 men located at 146 Hobart Street, Rochester New York 14611, it is licensed by the New York State Office of Addiction Services and Supports (OASAS) and adheres to all appropriate regulations and guidelines. The program incorporates nursing, medical, and psychiatric services into the program design and staffing. This program employs a person-centered approach and uses cognitive behavioral therapy and motivational enhancement therapy. Activities include: individual therapy, small group therapy, psycho-educational programming that includes addiction education, vocational preparation, parenting, domestic violence, anger management, codependency, relapse prevention, planning, and skills for daily living, nutrition, organized recreational activity, and scheduled exercise. While in the program clients may attend sober support activities including Narcotics Anonymous, Alcoholics Anonymous or a spiritual program of their choice. Families may attend conjoint sessions, visiting hours and special family oriented events. All services are individualized. This program provides integrated treatment for individuals with co-occuring mental health and substance use disorders.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Capacity (beds)/individuals served/units of service (days)

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	30	30	30	30
Individuals Served:	142	137	140	145
Units of Service:	6,971	7,850	8,400	8,600

2. SELECTED OUTCOME INDICATOR: Percent of discharges with individuals meeting half or more goals

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	30%	49%	55%	57%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: OASAS Client Data System Reports

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: ASA

PROGRAM: Rehabilitation and Stabilization - Liberty Manor

CONTRACTOR: CATHOLIC CHARITIES OF THE DIOCESE OF ROCHESTER D/B/A/ CATHOLIC CHARITIES FAMILY AND COMMUNITY SERVICES

CONTRACT AMOUNT: 720,009

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): Catholic Charities Family and Community Services (CCFCS) operates Liberty Manor as a Stabilization and Rehabilitation Program for women and women with very young children. The program is located at 997 St. Paul Street, Rochester New York 14605, and is licensed by the New York State Office of Addiction Services and Supports (OASAS). The program adheres to all appropriate regulations and guidelines. Nursing, medical, and psychiatric services have been incorporated into the service design. The program has capacity for 16 women and five 5 preschool age children. Activities include: individual therapy, small group therapy, psycho-educational programming that includes addiction education, vocational preparation, parenting, domestic violence, anger management, codependency, relapse prevention, planning, and skills for daily living, nutrition, organized recreational activity, and scheduled exercise. While in the program clients may attend sober support activities including Narcotics Anonymous, Alcoholics Anonymous or a spiritual program of their choice. Families may attend conjoint sessions, visiting hours and special family oriented events. Each of these services may be modified to meet the individualized needs of clients who may have special needs. This program provides integrated treatment for individuals with co-occuring mental health and substance use disorders.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Capacity (beds)/individuals served/units of service (days)

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	16	16	16	16
Individuals Served:	77	72	80	83
Units of Service:	4,217	4,494	5,000	5,100

2. SELECTED OUTCOME INDICATOR: Percent of discharges with individuals meeting half or more goals

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	50%	63%	65%	70%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: OASAS Client Data System Reports

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: ASA

PROGRAM: Recovery Center

CONTRACTOR: CENTER FOR COMMUNITY ALTERNATIVES, INC.

CONTRACT AMOUNT: 687,418

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): The Community Outreach for Recovery Enhancement (CORE) Center located at 130 Andrews Street, Rochester NY 14604, utilizes the New York State Office of Addiction Services and Supports (OASAS) Recovery Community and Outreach Center (RCOC) model and serves as a resource and support hub for individuals and families in Monroe County whose lives have been negatively impacted by drug and/or alcohol use, including those who have not previously been involved in treatment and/or support groups. CORE provides peer-run recovery support services, education, and advocacy, including providing a community-based, non-clinical setting that is safe, trauma-informed, welcoming, openly accessible, and alcohol/drug-free; providing opportunities to enhance social connectedness and to achieve personal recovery goals; offering volunteer opportunities and leadership training; assisting individuals and families with navigating and accessing treatment and support services; offering activities, workshops, presentations, and classes related to skill building, recreation, education, wellness, employment readiness, and other pro-social activities to promote long-term recovery and wellness; organizing and/or participating in local community-building and advocacy; and collaborating with other peer organizations and support services.
Gambling Recovery Peer Services are delivered by individuals who have personal lived experience with the harms associated with gambling. Peers have expertise in all the available pathways to recovery from gambling including the available resources and supports within OASAS prevention, treatment, harm reduction, and recovery services, as well as other collaborative community supports.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Individuals served (unique)/ visits

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	218	313	360	414
Units of Service:	6,479	3,584	4,122	4,740

2. SELECTED OUTCOME INDICATOR: Percent of clients engaged in program over 1 month

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	72%	TBD	75%	78%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: OASAS Formstack reporting

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: ASA

PROGRAM: Chemical Dependence Outpatient

CONTRACTOR: DELPHI DRUG & ALCOHOL COUNCIL, INC.

CONTRACT AMOUNT: 510,325

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): Delphi Drug and Alcohol Council, Inc. (d.b.a. Delphi Rise) operates substance use disorder outpatient clinic services at 72 Hinchey Road, Rochester NY 14624. Clinic services are available to adults (18 years old and older) and include substance use assessments and evaluations, individual and group counseling, family therapy, screening and assessing clients for co-occurring mental health disorders, providing medication-assisted treatment (MAT), reviewing and overseeing clients' medical care as it relates to substance use disorders, and domestic violence batterer intervention services for male perpetrators of domestic violence.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Individuals served/units of service (visits)

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	299	237	273	314
Units of Service:	8,017	7,049	8,106	9,322

2. SELECTED OUTCOME INDICATOR: Percent of discharges with individuals meeting half or more goals

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	29%	29%	33%	38%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: OASAS Client Data System

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: ASA

PROGRAM: Chemical Dependence Prevention

CONTRACTOR: DELPHI DRUG & ALCOHOL COUNCIL, INC.

CONTRACT AMOUNT: 270,326

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): Delphi Drug and Alcohol Council Inc. (d.b.a. Delphi Rise) at 72 Hinchey Road, Rochester NY 14624, operates NYS Office of Addiction Services and Supports (OASAS) certified Prevention Services through Monroe County by delivering evidence-based programs and other environmental strategies to prevent or reduce alcohol and other drug use and problem gambling. Delphi Rise serves youth at selected sites who are at risk for drug or alcohol abuse, as well as their parents and/or siblings, if applicable. Sites and their respective services are approved by OASAS in collaboration with Delphi Rise, MCOMH, and school districts. For 2026-2027, Delphi is approved by OASAS to provide:

1. Community capacity building (e.g., policy development, student support, and community planning, etc.) in Penfield Central School District (CSD), Gates-Chili CSD, Brockport CSD, and throughout Monroe County.
2. Evidence-based practice (EBP) and non-EBP education (classroom-based curricula) in Brockport CSD, Penfield CSD, and Gates-Chili CSD;
3. Information awareness services (e.g., school-wide activities, speaking events, health promotion events, presentations, newsletters, etc.) in Penfield CSD, Brockport CSD, Gates-Chili CSD, and throughout Monroe County.
4. EBP early intervention services (education for at-risk youth) in Gates-Chili CSD.
5. Prevention counseling in Gates-Chili CSD, Brockport CSD, Penfield CSD, and Lima CSD.
6. Additional sites were Webster CSD, Monroe 2 BOCES, and East Irondequout CSD.

Different services are offered in each district based on the needs of the district; not all schools in each district receive services. The reporting timeframe for OASAS prevention programs follows the school year July-June.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Individuals served

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	17,559	28,127	29,533	31,010
Units of Service:	n/a	n/a	n/a	n/a

2. SELECTED OUTCOME INDICATOR: Percent of youth who gained knowledge in education or Teen Intervene services or achieved service plan goals in prevention counseling

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	100%	100%	100%	100%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Provider Performance Reports/OASAS Web Infrastructure for Treatment Services New York State (WITNYS)

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

CONTRACTOR: DePaul Community Services, Inc.

EXECUTIVE DIRECTOR: Mark Fuller, President

BOARD MEMBERS: Stewart Beecher, MD; Brenda Bremer, MD; Timothy Culhane, Timothy Dieffenbacher; Anthony DiGiovanni IV; Ann Marie Dinino; Lisa Elliot, PhD; Lisa Famigliette; Melissa Farrell; Gabriel Geiger; Jered Hirt, Esq.; Chritopher Humphrey; Adam Jones; Ellen Kremer; Robert Lamb, Jr., Esq.; Louis Litzenberger; Keith McGriff, Dr.; Kevin Mucci; Komekia Peterson; Kelly Ross-Brown, Esq.; Geraled Scott; James Yarrington.

PROGRAMS INCLUDED: NCADD-Prevention Resource Center

NCADD-RA's Finger Lakes Addiction Resource Center

NCADD-Rochester Area

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: ASA

PROGRAM: NCADD-Prevention Resource Center

CONTRACTOR: DEPAUL COMMUNITY SERVICES, INC.

CONTRACT AMOUNT: 345,837

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): DePaul's National Council on Alcoholism and Drug Dependence-Rochester Area (NCADD-RA) is one of over 90 affiliates nationwide of NCADD, Inc. (27 of which are in NYS). DePaul's NCADD-RA operates the Finger Lakes Prevention Resource Center (FL PRC) to reduce the incidence and prevalence of alcoholism and other drug dependence in the twelve-county Finger Lakes region (Monroe, Wayne, Livingston, Ontario, Yates, Seneca, Steuben, Schuyler, Tompkins, Chemung, Tioga, and Broome counties) per New York State Office of Addiction Services and Supports (OASAS) requirements. Services provided include: identifying existing coalitions and mobilizing residents and providers to create substance use awareness and prevention coalitions where none exist; supporting community coalitions and their provider partners in utilizing effective prevention strategies in their work; assisting communities and agencies in conducting needs assessments; providing technical assistance related to coalition-building and sustainability; offering trainings and other prevention resources to coalitions per each of their specific needs and goals; and providing evidence-based trainings for regional prevention providers. The FL PRC is based at 1931 Buffalo Road, Rochester New York 14624, and is operated under the oversight of NYS OASAS and MCOMH.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Individuals served

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	n/a	n/s	n/s	n/s
Individuals Served:	1,436	724	735	740
Units of Service:	n/a	n/a	n/a	n/a

2. SELECTED OUTCOME INDICATOR: Number of new and existing coalitions that received technical assistance from the Prevention Resource Center

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	23	19	21	24

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Provider Performance Reports

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: ASA

PROGRAM: NCADD-RA's Finger Lakes Addiction Resource Center

CONTRACTOR: DEPAUL COMMUNITY SERVICES, INC.

CONTRACT AMOUNT: 107280

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): DePauls's National Council on Alcoholism and Drug Dependence-Rochester Area (NCADD-RA) operates the Finger Lakes Addiction Resource Center (FLARC) to build upon substance use-related collaborative efforts in the nine-county Finger Lakes Economic Development Region. Per New York State Office of Addiction Services and Supports (OASAS) requirements, FLARC engages stakeholders in the nine-county Finger Lakes Economic Development Region (e.g.., non-profit organizations, county and local governments, schools, and other agencies in Monroe, Orleans, Genesee, Wyoming, Livingston, Wayne, Ontario, Yates, and Seneca counties) by providing, at a minimum, the following services: identifying gaps in community resources related to substance use prevention, awareness, and treatment; identifying existing community/county resources; developing county-specific resource directories that include treatment providers and other recovery resources; promoting community events and activities organized by collaborating partners; attending such events to improve awareness of issues and resources related to substance use disorders; and utilizing media and other community awareness strategies to disseminate resource directories and substance use-related information, including working with NYS OASAS to promote the utilization of existing media tool kits developed by OASAS and other state and federal agencies. The FLARC is based at 1931 Buffalo Road ,Rochester New York 14624, and is operated under the oversight of NYS OASAS in collaboration with MCOMH.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Individuals served (Number of members in the Community Action Partnership)

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	34	38	39	40
Units of Service:	n/a	n/a	n/a	n/a

2. SELECTED OUTCOME INDICATOR: Number of outreach events

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	42	39	44	45

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Provider Performance Reports

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: ASA

PROGRAM: NCADD-Rochester Area

CONTRACTOR: DEPAUL COMMUNITY SERVICES, INC.

CONTRACT AMOUNT: 448079

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S):

DePaul operates New York State Office of Addiction Services and Supports (OASAS) certified Prevention Services by delivering evidence-based programs and other environmental strategies (e.g., policy development, school and youth events, etc.) in selected sites in Monroe County to prevent or reduce alcohol and other drug use and problem gambling. DePaul serves youth at the selected sites who are identified as being at risk for drug or alcohol use or abuse, as well as their parents and/or siblings.
Sites and their respective services are approved by OASAS in collaboration with DePaul, MCOMH, and sites that have assessed a need for their youth to receive prevention services.
For the 2025-2026 school year, DePaul is approved by OASAS to provide the following services at the indicated sites or areas:
1. Evidence-based practice (EBP) and non-EBP education (classroom-based curricula) in Rochester City School District and in Gates-Chili.
2. Community capacity building (e.g., participating in community coalitions) throughout Monroe County.
3. Environmental strategies (e.g., media campaigns, developing or advising on policies and regulations, etc.) throughout Monroe County.
4. Information awareness services (e.g., organizing and presenting at school-wide activities, speaking events, health promotion events, resource fairs, etc.; providing resources to individuals as requested, producing newsletters, and resource guides; etc.) throughout Monroe County.

Additional services may be provided as needed at selected sites. Different services are offered in each district based on the needs of the district; not all schools in each district receive services. The reporting timeframe for OASAS prevention programs follows the school year July-June. This program is is based at 1931 Buffalo Road, Rochester New York 14624, and is operated under the oversight of NYS OASAS and MCOMH.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Individuals served

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	6,911	7,940	8,200	8,400
Units of Service:	n/a	n/a	n/a	n/a

2. SELECTED OUTCOME INDICATOR: Percent of youth who gained knowledge in education services

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	92%	85%	88%	90%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Provider Performance Reports/OASAS Web Infrastructure for Treatment Services New York State (WITNYS)

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

CONTRACTOR: East House Corporation

EXECUTIVE DIRECTOR: Lindsay Gozzi-Theobald, President/CEO

BOARD MEMBERS: Erika Ange MHA, Marlene Bessette, Faye Braswell-Towner, Nicole Bryl, Joe Carello,Esq., Barry Carrington,Esq., Ted Cordes, Sarah Elezabi, MD, MPH, CPE, CHCQM, FAPA, FACP, Christina Gullo, SHRM-SCP, Susie Huss, Deron Johnson, MBA, CISA, CRISC, CRMA, CDPSE, Jane Knickerbocker, Jim Lessard, MBA, Cathy Lovejoy, Donna Maxwell, SPHR,SHRM-SCP, George Nasra, MD, MBA, LFAPA, Stuart Sacks, MD, CRPA, Jonathan Schoeck, Jennifer Shoemaker, Chandra Simmons, CISA, CRISC, CCSK ,Michael Trabold

PROGRAMS INCLUDED: Chemical Dependence Community Residence (Cody)

Chemical Dependence Community Residence (Hanson)

Chemical Dependence Community Residence (Hirst)

Chemical Dependence Community Residence (Pinny Cooke)

Chemical Dependence Supportive Living

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: ASA

PROGRAM: Chemical Dependence Community Residence (Cody)

CONTRACTOR: EAST HOUSE CORPORATION

CONTRACT AMOUNT: 367,161

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): East House operates Cody House community residence program at 407 Frederick Douglass Street, Rochester New York 14608. The residence has the capacity for 16 adult men who are 18 years and older, have a substance use disorder diagnosis, are homeless or without a stable living situation, and are in need of a 24-hour recovery-oriented living environment to support sobriety and prepare for more independent living and self-sufficiency. Services include; individualized goal-planning and counseling; training in symptom and medication management, and independent living skills; vocational and educational services in coordination with the agency's Career Services Program; social and recreational activities; coordination with other community service providers; family education and support and financial case management. Cody House is licensed by the New York State Office of Addiction Services and Supports (OASAS) and adheres to all appropriate regulations and guidelines.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Capacity (beds)/individuals served/units of service (days)

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	16	16	16	16
Individuals Served:	32	19	35	40
Units of Service:	4,910	4,349	4,900	5,000

2. SELECTED OUTCOME INDICATOR: One month retention rate in the program (for discharges)

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	92%	100%	100%	99%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: OASAS Client Data System

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: ASA

PROGRAM: Chemical Dependence Community Residence (Hanson)

CONTRACTOR: EAST HOUSE CORPORATION

CONTRACT AMOUNT: 254,154

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): East House operates Hanson House community residence program at 561 Mt. Hope Avenue, Rochester New York 14620. The residence has the capacity for 14 adults who are 18 years and older who have co-occurring mental health needs, are homeless or without a stable living situation, and are in need of a 24-hour recovery-oriented living environment to support sobriety and prepare for more independent living and self-sufficiency. Services include individualized goal-planning and counseling; training in symptom and medication management, and in independent living skills; vocational and educational services in coordination with the agency's Career Services Program; social and recreational activities; coordination with other community service providers; family education and support and financial case management services. Hanson House is licensed by the New York State Office of Addiction Services and Supports (OASAS) and adheres to all appropriate regulations and guidelines.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Capacity (beds)/individuals served/units of service (days)

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	14	14	14	14
Individuals Served:	31	24	31	36
Units of Service:	5,188	4,162	4,200	4,300

2. SELECTED OUTCOME INDICATOR: One month retention rate in the program (for discharges)

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	90%	100%	100%	99%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: OASAS Client Data System

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: ASA

PROGRAM: Chemical Dependence Community Residence (Hirst)

CONTRACTOR: EAST HOUSE CORPORATION

CONTRACT AMOUNT: 437,107

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): East House operates Hirst House community residence program at 109 Dartmouth Street, Rochester New York 14607. Hirst House has the capacity for 12 adult men who are 18 years and older, have a substance use disorder diagnosis, are homeless or without a stable living situation, and are in need of a 24-hour recovery-oriented living environment to support sobriety and prepare for more independent living and self-sufficiency. Services include; individualized goal-planning and counseling; training in symptom and medication management, and independent living skills; vocational and educational services in coordination with the agency's Career Services Program; social and recreational activities; coordination with other community service providers; family education and support and financial case management. Hirst House is licensed by the New York State Office of Addiction Services and Supports (OASAS) and adheres to all appropriate regulations and guidelines.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Capacity (beds)/individuals served/units of service (days)

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	12	12	12	12
Individuals Served:	33	21	16	33
Units of Service:	4,088	3,890	2,000	3,500

2. SELECTED OUTCOME INDICATOR: One month retention rate in the program (for discharges)

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	90%	92%	94%	95%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: OASAS Client Data System

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: ASA

PROGRAM: Chemical Dependence Community Residence (Pinny Cooke)

CONTRACTOR: EAST HOUSE CORPORATION

CONTRACT AMOUNT: 242,629

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): East House operates Pinny Cooke community residence program at 50 Browncroft Boulevard, Rochester New York 14609. The residence has the capacity for 12 adult women who are 18 years and older, have a substance use disorder diagnosis, are homeless or without a stable living situation, and are in need of a 24-hour recovery-oriented living environment to support sobriety and prepare for more independent living and self-sufficiency. Services include; individualized goal-planning and counseling; training in symptom and medication management, and in independent living skills; vocational and educational services in coordination with the agency's Career Services Program; social and recreational activities; coordination with other community service providers; family education and support and financial case management. Pinny Cooke residence is licensed by the New York State Office of Addiction Services and Supports (OASAS) and adheres to all appropriate regulations and guidelines.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Capacity (beds)/individuals served/units of service (days)

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	12	12	12	12
Individuals Served:	37	25	27	35
Units of Service:	3,851	3,879	3,885	3,900

2. SELECTED OUTCOME INDICATOR: One month retention rate in the program (for discharges)

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	92%	85%	90%	92%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: OASAS Client Data System

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: ASA

PROGRAM: Chemical Dependence Supportive Living

CONTRACTOR: EAST HOUSE CORPORATION

CONTRACT AMOUNT: 481,937

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): East House operates the Crossroads Supportive Living Apartment Program for adults who are diagnosed with a substance use disorder, have achieved stability in abstinence and independent living skills, and who will benefit from weekly clinical or peer support. This program is certified by New York State Office of Addiction Services and Supports (OASAS) and is administratively operated at 259 Monroe Avenue, Rochester New York 14607. Clients live in apartments furnished by East House throughout Monroe County that are each approved by NYS OASAS and listed on the program's operating certificate. The program operates on therapeutic community principles, and provides residents with weekly clinical and peer supports. Additional services include but are not limited to; individualized goal-planning and counseling; training in symptom and medication management and independent living skills; vocational and educational services in coordination with East House's Career Services Program; social and recreational activities; coordination with other community service providers, including benefit providers; family education and support and financial Case Management.

In April 2025, OASAS approved Easthouse's request to decrease their certified capacity to 40 .

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Capacity (beds)/individuals served/units of service (days)

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	72	40	40	40
Individuals Served:	78	66	60	62
Units of Service:	13,195	11,465	9,000	9,300

2. SELECTED OUTCOME INDICATOR: One month retention rate in the program (for discharges)

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	92%	94%	95%	95%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: OASAS Client Data System

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

CONTRACTOR: Helio Health, Inc.

EXECUTIVE DIRECTOR: Kathy Gaffney-Babb, President/CEO

BOARD MEMBERS: James Antonacci, Jr., Patricia Buell, Deborah Donahue, Robert Johnson, Stacey Keefe, Daniel Kelley, Scott Lickstein, Helen Lopez, David Mathis, Shane McCrohan, Martin McDermott, Scott McGuinness, Lisa Morrow-Whittaker, Travis Smith, Joseph Zikuski

PROGRAMS INCLUDED: Inpatient Rehabilitation and Medically Supervised Detoxification Services

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: ASA

PROGRAM: Inpatient Rehabilitation and Medically Supervised Detoxification Services

CONTRACTOR: HELIO HEALTH, INC.

CONTRACT AMOUNT: 2,192,449

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): Helio Health operates a chemical dependence withdrawal and stabilization (detoxification) program at 1850 Brighton Henrietta Town Line Road, Rochester NY 14623, for adults. Helio currently operates 40 total beds across 2 detoxification programs. The 10 Inpatient Rehabilitation beds are for people to receive a continuum of care for withdrawal and stabilization services once leaving a Medically Supervised Withdrawal (MSW) bed and the 30 MSW beds are for people experiencing mild to moderate withdrawal symptoms (who require more intensive medical oversight). In both program components, Helio provides program services 24 hours per day, seven days per week, with on-site medical and counseling staff. Helio manages and treats withdrawal as well as disorders associated with alcohol and/or substance use. Helio assesses client needs and refers them to continued care.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Capacity (beds)/individuals served (admissions)/units of service(visits)

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	40	40	40	40
Individuals Served:	2,224	1,955	2,151	2,366
Units of Service:	7,780	8,200	7,944	8,023

2. SELECTED OUTCOME INDICATOR: Percent of discharges with individuals meeting one or more goals

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	63%	65%	69%	70%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: OASAS Client Data System

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

CONTRACTOR: Huther-Doyle Memorial Institute, Inc.

EXECUTIVE DIRECTOR: Kelly A. Reed, President/CEO

BOARD MEMBERS: Kellie Adami, Caitlin Carrigg, Esq., David Chambers, Justin Feasel, Ann Griepp, MD, Andrea Holland, Norma Holland, John Jezsu, Karen Morris, Esq., Eugene O'Connor, Esq., Kelley Powers, Denise Read, Tyrone Reaves, Jonathan Westfall

PROGRAMS INCLUDED: Chemical Dependence Outpatient

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: ASA

PROGRAM: Chemical Dependence Outpatient

CONTRACTOR: HUTHER-DOYLE MEMORIAL INSTITUTE,INC.

CONTRACT AMOUNT: 533,895

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): Huther Doyle operates substance use disorder outpatient clinic services at 360 East Avenue, Rochester NY 14604, for adults with substance use disorders and their family members. These services are certified by New York State Office of Addiction Services and Supports (OASAS) and comply with all applicable regulations and guidelines. Huther Doyle provides outpatient substance use disorder services, including individual and group counseling; family therapy; screening and assessing clients for co-occurring mental health disorders; offering in-reach services from other agencies related to employment, vocational and educational development, and mental health treatment; and providing medication-assisted treatment (MAT). Huther Doyle provides specialized services for Spanish-speaking clients, justice-involved individuals (including those in drug court and on community supervision), and people with co-occurring chemical dependency and mental health challenges.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Individuals served/units of service (visits)

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	1,186	1,430	1,573	1,735
Units of Service:	18,543	18,879	19,767	21,744

2. SELECTED OUTCOME INDICATOR: Percent of discharges with individuals meeting one or more goals

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	43%	44%	48%	53%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: OASAS Client Data System

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

CONTRACTOR: Ibero-American Action League, Inc.

EXECUTIVE DIRECTOR: Angelica Perez-Delgado, President & CEO

BOARD MEMBERS: Milagros Concepcion, Thomas J. Hernandez, Lisa Medina, Denishea Ortiz, Emeterio Otero, Berta Rivera, Victor Sanchez, Arline Santiago, Christie Smith, James Sutton, Yalitza Torres

PROGRAMS INCLUDED: Familias Unidas

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: ASA

PROGRAM: Familias Unidas

CONTRACTOR: IBERO-AMERICAN ACTION LEAGUE, INC.

CONTRACT AMOUNT: 142,544

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): Ibero-American Action League at 124 Evergreen Street, Rochester NY 14605, operates NYS Office of Alcoholism and Substance Abuse Services (OASAS) certified Prevention Services by delivering evidence-based programs and other environmental strategies to prevent or reduce alcohol and other drug use and problem gambling.

Familias Unidas proceeds in three stages.
Stage 1: The program facilitator works with parents and builds cohesion among those in the group sessions.
Stage 2: Parents are told about the three primary adolescent "worlds" (family, peers, and school), and asked to voice concerns they have with their child within each realm. Facilitators take these concerns and steer the intervention to address these specific problems.
Stage 3: Facilitators work on teaching parenting skills to the group to decrease the problem behaviors discussed in earlier sessions. In this third stage, facilitators will conduct home visits to supervise parent and child interactions and give further instruction on the skills addressed in the group sessions. Each family receives up to eight home visits.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Individuals served (families)

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	8,920	12,367	12,985	13,634
Units of Service:	n/a	n/a	n/a	n/a

2. SELECTED OUTCOME INDICATOR: Percent of familes who gained knowledge about substance use prevention

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	86%	100%	100%	100%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Provider Performance Reports/OASAS Web Infrastructure for Treatment Services New York State (WITNYS)

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

CONTRACTOR: Liberty Resources Psychology, Physical, Occupational and Speech Therapy PLLC

EXECUTIVE DIRECTOR: Kelli L. Harris

BOARD MEMBERS: Katherine (Kasia) Anthis, MBA, CRPC, CLTC, David Bowles, Senior Investigator Elliot T. Boyce, William Conole, Daniel J. DeGirolamo, Scott P. Gucciardi, Daniel J. Manning, Nancy Mudrick Ph.D., Lawrence Stewart, M.D., Winthrop H. Thurlow, Esq., Robert Toole, Jr.

PROGRAMS INCLUDED: Family Support Navigator

Peer Advocate

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: ASA

PROGRAM: Family Support Navigator

CONTRACTOR: LIBERTY RESOURCES PSYCHOLOGY, PHYSICAL, OCCUPATIONAL AND SPEECH THERAPY PLLC

CONTRACT AMOUNT: 149,394

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): Liberty Resources (Liberty) at 175 Winton Road N, Rochester NY 14610, provides family support navigator services to families in which an individual has a substance use disorder (SUD). Liberty utilizes peers (individuals whose lives have been impacted by SUDs) to deliver the services. Services include outreach to explain the family support navigator services; developing rapport and assessing families' needs; providing individualized and group-based education on substance use disorders, treatment and support services, self-advocacy, and coping and support strategies; fostering linkages to services for the individual with an SUD and their family members; assisting families with providing safe, supportive environments and developing problem solving and coping skills, providing family meditation and conflict resolution; helping families develop positive interventions and support plans for themselves and their family member with an SUD; and facilitating family support groups.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Individuals served/units (15 minute increments of direct service)

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	198	323	264	290
Units of Service:	1,702	1,480	1,430	1,573

2. SELECTED OUTCOME INDICATOR: Number of referrals made to other substance use services and supports

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	155	146	161	177

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Provider Performance Reports

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: ASA

PROGRAM: Peer Advocate

CONTRACTOR: LIBERTY RESOURCES PSYCHOLOGY, PHYSICAL, OCCUPATIONAL AND SPEECH THERAPY PLLC

CONTRACT AMOUNT: 166,926

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): Liberty Resources (Liberty) at 175 Winton Road N, Rochester NY 14610, provides peer advocate services to Monroe County residents or service recipients who are using or in recovery from using heroin, opiates, and/or other substances. Liberty utilizes peers (individuals whose lives have been impacted by substance use disorders (SUDs) to deliver the services. Services include outreach to explain the peer advocate services; partnering with local hospitals to engage with individuals impacted by SUDs; developing rapport and assessing needs of potential clients; providing individualized and group-based information and education on SUDs, treatment and support services, self-help tools, how to access services, self-advocacy, and coping strategies; collaborating with clients to develop positive interventions and support plans; fostering linkages to treatment and support services; advocating for clients to help them access treatment and support services; assisting clients with transitioning between residences or services; facilitating peer support groups; and providing crisis support (addressing the circumstances precipitating and resulting from the crisis, arranging immediate and long-term supports, and developing plans to avoid future crisis).

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Individuals served/units (15 minute increments of direct service)

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	167	214	220	231
Units of Service:	1,031	1,077	1,131	1,188

2. SELECTED OUTCOME INDICATOR: Number of referrals made to other substance use services and supports

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	70	87	59	65

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Provider Performance Reports

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

CONTRACTOR: Providence Housing Development Corporation

EXECUTIVE DIRECTOR: Mark Greisberger, Executive Director

BOARD MEMBERS: Steve E. Agan, Esq., Karen Dehais, Fr. Joseph Hart, Timothy R. Dollinger, Mark Greisberger, Dorian Leander Hall, Ronald W. Hughes, Katherine Karl, Esq., Nancy J. Koons, Patricia Neal, Lisa M. Passero, CPA, Daniel Saperstone

PROGRAMS INCLUDED: Case Management

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: ASA

PROGRAM: Case Management

CONTRACTOR: PROVIDENCE HOUSING DEVELOPMENT CORPORATION

CONTRACT AMOUNT: 96,376

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): Providence at 1150 Buffalo Road, Rochester NY 14624, provides case management to individuals in their Shelter Plus Case Management/Permanent Supportive Housing (PSH) program. Clients of the PSH program are either single individuals or families that are homeless and have a primary diagnosis of substance use disorder (SUD) with or without co-occurring mental illness. Case management and support services include assistance in locating permanent housing, individualized service planning, goal assessment and monitoring, referrals to treatment and support programs, monitoring engagement in and effectiveness of services, support in crisis situations, assistance with benefit and financial management, helping to resolve issues with landlords, determining each client's appropriate level of care, and coordinating with clients' other providers.

Providence has a separate direct contract with Housing and Urban Development (HUD), which funds Shelter Plus Case Management/PSH clients' rent stipends and other housing expenses. Providence provides rent and utility stipends to clients via this separate HUD contract.

Providence oversees the subcontractor's service delivery and costs, including monitoring apartment and service quality and meeting regularly with subcontractor staff.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Capacity (households)/individuals served

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	60	60	60	60
Individuals Served:	95	66	69	72
Units of Service:	n/a	n/a	n/a	n/a

2. SELECTED OUTCOME INDICATOR: Percent of individuals remaining in program over six months

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	81%	70%	73%	77%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Provider Performance Reports

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

CONTRACTOR: Rochester Institute of Technology

EXECUTIVE DIRECTOR: William Sanders, President, Ph.D.

BOARD MEMBERS: Robert W. August, Mark G. Barberio, Jeffrey Benck, Brooks H. Bower, Andrew N.Brenneman, Jonathan I. Budington, David J. Burns, Carol B. Cala, Richard "Chip" Davis, Ph.D., Hyacinth V. Drummond, Jane M. Elliott, Arthur A. Gosnell, Jeffrey K. Harris, Brenda E. Haynes, Darshan N. Hiranandani, Susan R. Holliday, Andrew R. Jacobson, Rick A. Kittles, Ph.D., Pamela Lloyd-Ogoke, Britta I. MacIntosh, Austin W. McChord, Dawn S. McWilliams, Roosevelt Mercer, Jr., Sharon D. Napier, Brian P. O'Shaughnessy, Esq., Susan M. Puglia, Ronald S. Ricotta, Efrain Rivera, Jorge M. Rodriguez, William H. Sanders, Nicholas Schneider, Frank S. Sklarsky, Kevin J. Surace, James P. Swift, Clayton P. Turner, Kim E. VanGelder, Dinah G. Weisberg, Christine B. Whitman, Chance J. Wright, Kathy M.Yu

PROGRAMS INCLUDED: Chemical Dependence Prevention

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: ASA

PROGRAM: Chemical Dependence Prevention

CONTRACTOR: ROCHESTER INSTITUTE OF TECHNOLOGY

CONTRACT AMOUNT: 247,241

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): Rochester Institute of Technology (RIT) at 1 Lomb Memorial Drive, Rochester NY 14623, Substance and Alcohol Intervention Services for the Deaf (SAISD) operates the NYS Office of Alcoholism and Substance Abuse Services (OASAS) certified Prevention Services by delivering evidence-based programs and other environmental strategies to prevent or reduce alcohol and other drug use and problem gambling. SAISD specializes in serving deaf and hard-of-hearing individuals and provides consultation and technical assistance to community providers regarding the needs of deaf/hard of hearing individuals. SAISD also serves individuals who are at risk for drug or alcohol abuse, as well as their parents and/or siblings if applicable. SAISD is approved by OASAS to provide the following services to deaf and hard-of-hearing youth and young adults and the programs that serve them throughout Monroe County in 2026-2027: community capacity building (e.g., policy development, community planning efforts, etc.); media campaigns; support in writing and revising policies, regulations, and laws; information awareness (e.g., speaking and tabling events, presentations, newsletters, etc.); single-session positive alternatives (sober, healthy activities for youth and young adults); and evidence-based early intervention services (substance use disorder screening).

Most services are provided at RIT, the National Technical Institute for the Deaf (NTID), other schools with deaf/hard-of-hearing students, John L. Norris Addictions Treatment Center. Additional sites are Lexington School for the Deaf and NTID educational institutions. Other organizations include Deaf Refugee Advocacy, Rochester Recreatonal Club for the Deaf, Deaf IGNITE, and Deaf Wellness Center and community substance use disorder programs.

The reporting timeframe for OASAS prevention programs follows the school year July-June.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Individuals served

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	869	801	841	883
Units of Service:	n/a	n/a	n/a	n/a

2. SELECTED OUTCOME INDICATOR: Percent of individuals who gained knowledge in education services

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	n/a	91%	92%	93%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Provider Performance Reports/OASAS Web Infrastructure for Treatment Services New York State (WITNYS)

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

CONTRACTOR: The Center for Youth Services, Inc.

EXECUTIVE DIRECTOR: Elaine Spaull Ph.D., Executive Director

BOARD MEMBERS: Ashara Baker, Kate Beardsley, Margaret Burns, David Campos, Miranda Carter, Charlie Colbert, Christine Coward, Sammie Drayton Jr., Cheryl Gossin, Jeffrey Green, Christian D. Hancey, Doug Hendee, Terra Keller, Jackie Kubera-Martin, Latoya Lee, Kermin Martinez-Hernandez, Olga Mendez, Anita Misra, Jessica Naclerio, Shaun Nelms. Alicia Nestle, Milton Pichardo, Jason Piper, Rosalie Remarais, Matthew Reynell, Sangeeta Sarraf, Cedrick-Michael Simmons, Erica Smith, Martin Weingarten, Heather Wohaska

PROGRAMS INCLUDED: Chemical Dependence Prevention

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: ASA

PROGRAM: Chemical Dependence Prevention

CONTRACTOR: THE CENTER FOR YOUTH SERVICES, INC.

CONTRACT AMOUNT: 987,958

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): The Center for Youth Services (CYS) at 905 Monroe Avenue, Rochester NY 14620, operates the NYS Office of Addiction Services and Supports (OASAS) certified Prevention Services by delivering evidence-based programs and other environmental strategies to prevent or reduce alcohol and other drug use and problem gambling. CYS serves youth at selected sites who are at risk for drug or alcohol abuse, as well as their parents and/or siblings if applicable. Sites and their respective services are approved by OASAS in collaboration with CYS, MCOMH, and school districts. For 2026-27, CYS is approved by OASAS to provide:

1. Evidence-based practice (EBP) education (classroom-based curricula) in the Rochester City School District (RCSD), and Greece Central School District (CSD).
2. Non-EBP education (classroom-based curricula) in the Greece CSD, RCSD, Hilton CSD, Wayland Cohocton CSD, Mount Morris CSD, and throughout Monroe County.
3. Information awareness services (e.g., school-wide activities, speaking events, and newsletters) in RCSD and to youth living throughout Monroe County.
4. Community capacity building (e.g., policy development, education and training, etc.) in the RCSD.
5. EBP early intervention services (education for at-risk youth) in the RCSD, and to youth living throughout Monroe County.
6. Prevention counseling in the RCSD for youth living in the City of Rochester.

Different services are offered in each district based on the needs of the district; only certain schools in each district receive services. The reporting timeframe for OASAS prevention programs follows the school year July-June.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Individuals served

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	2,519	1,353	1,691	2,114
Units of Service:	n/a	n/a	n/a	n/a

2. SELECTED OUTCOME INDICATOR: Percent of youth who gained knowledge in education services or achieved service plan goals in prevention counseling

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	90%	94%	95%	96%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Provider Performance Reports/OASAS Web Infrastructure for Treatment Services New York State (WITNYS)

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

CONTRACTOR: The Community Place of Greater Rochester, Inc.

EXECUTIVE DIRECTOR: Scott Benjamin, CEO

BOARD MEMBERS: Luis Aponte, Devra Bevona, Wendy Boyce, Bethany Centrone, Glenn Gardner, Laura O. Habza, James Hawkins, Walter Larkin Jr., Tina Longwell, Kevin Patrick Loughran, Peter Maurer, Ian McLeod, Richard Nangreave, John Olsan, Gita Ramachandran, David Toole, Linda Walsh

PROGRAMS INCLUDED: Chemical Dependence Prevention

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: ASA

PROGRAM: Chemical Dependence Prevention

CONTRACTOR: THE COMMUNITY PLACE OF GREATER ROCHESTER, INC.

CONTRACT AMOUNT: 350,902

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S):

The Community Place at 57 Central Park, Rochester NY 14605, operates NYS Office of Addiction Services and Supports (OASAS) certified Prevention Services by delivering evidence-based programs and other environmental strategies to prevent or reduce alcohol and other drug use and problem gambling. Community Place serves youth at selected sites who are at risk for drug or alcohol abuse, as well as their parents and/or siblings if applicable. Sites and their respective services are approved by OASAS in collaboration with Community Place, MCOMH, and school districts. For 2026-2027, Community Place is approved by OASAS to provide:

1. Evidence-based practice (EBP) education (classroom-based curricula) in the Rochester City School District (RCSD) and to youth residing in the City of Rochester.
2. Information awareness services (e.g., school-wide activities, speaking events, health promotion events, and newsletters) throughout Monroe County.
3. Positive alternatives (sober, healthy events) to youth residing in the City of Rochester.
4. EBP early intervention services (education for at-risk youth) in RCSD.
5. Prevention counseling in the RCSD.

Only certain schools in RCSD receive services, based on the needs of the district and schools. The reporting timeframe for OASAS prevention programs follows the school year July-June.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Individuals served

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	1,313	1,206	1,266	1,329
Units of Service:	n/a	n/a	n/a	n/a

2. SELECTED OUTCOME INDICATOR: Percent of youth who gained knowledge in education or Teen Intervene services or achieved service plan goals in prevention counseling

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	71%	80%	84%	88%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Provider Performance Reports/OASAS Web Infrastructure for Treatment Services New York State (WITNYS)

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

CONTRACTOR: Villa of Hope

EXECUTIVE DIRECTOR: Carrie Carl, Interim President/CEO

BOARD MEMBERS: Christopher Bell, Berlin Bermudez, Korey Brown, Catherine Budlong, Robert Davis, Stephanie Dickman, Jonathan Ghent, Curtis Johnson, Tim Jones, Frederick Kass, M.D., Sandy Kleinberg, David Krusch, M.D., John Loury, Thomas K. McInerny, M.D., Dominick Morano, Timothy Perrotta, Melanie Phillips, Corinda Reaves, Chadwick Roy, Katherine Schmittman, Robert Wendler

PROGRAMS INCLUDED: Chemical Dependence Prevention

Medically Monitored and Medically Supervised Detoxification Services

Residential Rehabilitation Services

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: ASA

PROGRAM: Chemical Dependence Prevention

CONTRACTOR: VILLA OF HOPE

CONTRACT AMOUNT: 130,541

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S):

The Villa of Hope (Villa) located at 3300 Dewey Ave, Rochester NY 14616, operates the NYS Office of Alcoholism and Substance Abuse Services (OASAS) certified Prevention Services by delivering evidence-based programs and other environmental strategies to prevent or reduce alcohol and other drug use and problem gambling. Villa serves youth at selected sites who are at risk for drug or alcohol abuse, as well as their parents and/or siblings if applicable. Sites and their respective services are approved by OASAS in collaboration with Villa, MCOMH, and school districts. For 2026-2027, Villa is approved by OASAS to provide:

1. Evidence-based program (EBP) education and non-EBP education (classroom-based curricula) in Greece Central School District (CSD), Hilton CSD, Rush-Henrietta School District, Churchville-Chili CSD,and throughout Monroe County.
2. Information awareness (e.g., school-wide activities, presentations, newsletters, etc.) at the Villa of Hope Campus and throughout Monroe County.
3. Community capacity building (e.g., policy development, supporting Student Assistance Programs, community planning, etc.) services at the Villa of Hope Campus at 3300 Dewey Avenue, Rochester NY 14616, and throughout Monroe County.
4. Positive alternatives (sober, healthy events for youth) at the Villa of Hope campus and as needed at selected sites.

Different services are offered in each district based on the needs of the district; only certain schools in each district receive services. The reporting timeframe for OASAS prevention programs follows the school year July-June.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Individuals served

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	653	653	400	500
Units of Service:	n/a	n/a	n/a	n/a

2. SELECTED OUTCOME INDICATOR: Percent of youth who gained knowledge in education services

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	93%	71%	75%	85%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Provider Performance Reports/OASAS Web Infrastructure for Treatment Services New York State (WITNYS)

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: ASA

PROGRAM: Medically Monitored and Medically Supervised Detoxification Services

CONTRACTOR: VILLA OF HOPE

CONTRACT AMOUNT: 1,072,301

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): The Villa of Hope (Villa) operates a 18-bed chemical dependence withdrawal and stabilization (detoxification) program located at 3300 Dewey Avenue, Rochester NY 14616. Villa will provide inpatient withdrawal and stabilization services 24 hours a day, seven days per week with on-site medical and counseling staff. The primary objective is to increase the percentage of individuals completing the program and admitted to other treatment. Villa manages and treats alcohol and/or substance withdrawal as well as disorders associated with alcohol and/or substance use. Villa assesses clients' needs and refers them to continued care related to their substance use disorder.

This service is available to anyone 16 years old or older who (a) is intoxicated by alcohol and/or other substances and (b) is either suffering from withdrawal coupled with situational crisis, is unable to abstain from substance use, or has a history of past withdrawal complications.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Capacity (beds)/individuals served (admissions)/units of service(visits)

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	18	18	18	18
Individuals Served:	643	256	340	391
Units of Service:	3,422	4,489	4,319	4,750

2. SELECTED OUTCOME INDICATOR: Percent of discharges with individuals meeting half or more goals

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	68%	58%	66%	76%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: OASAS Client Data System

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: ASA

PROGRAM: Residential Rehabilitation Services

CONTRACTOR: VILLA OF HOPE

CONTRACT AMOUNT: 864,603

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): The Villa of Hope (Villa) provides residential rehabilitation services for adult males 18+ who have a substance use disorder diagnosis and who require residential treatment to maintain sobriety. The residence located on the Villa campus at 3300 Dewey Avenue, Rochester NY 14616, has a capacity for 14 adult males and operates in a supportive, respectful, and home-like environment. Villa provides adolescents with room and board, meals, and services. Services include individual and group counseling for substance use disorders (for both use and dependence); recreational therapy; family education and support; therapeutic and creative activities such as meditation, art, and music; diagnosis and treatment of co-occurring mental health disorders; on-site schooling and education support; relapse prevention planning; and referrals to other treatment and support services.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Capacity (beds)/individuals served/units of service (days)

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	14	14	14	14
Individuals Served:	13	3	6	14
Units of Service:	1,498	75	750	1,648

2. SELECTED OUTCOME INDICATOR: Percent of discharges with individuals meeting one or more goals

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	39%	50%	60%	65%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: OASAS Client Data System

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

CONTRACTOR: YWCA of Rochester and Monroe County

EXECUTIVE DIRECTOR: Dr. Myra Henry, President/CEO

BOARD MEMBERS: Jennifer Arbore, Courtney Blackwood, Katherine Croft, Mary Kathryn Dappen, Damita A. Davis, PhD., Sherry Dumont, Jillian Dunbar, Krystal Ellis, Dina Faticone, Lisa Harris, Lesli Myers-Small, PhD., Erin M. Nicol, Maureen Pilato, Tarchia Powell, Stephanie Seiffert, Deborah Stamps, Ed.D., Syrena Travis, Jill Wynn, Kristin Zimar

PROGRAMS INCLUDED: Chemical Dependence Supportive Living

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: ASA

PROGRAM: Chemical Dependence Supportive Living

CONTRACTOR: YWCA OF ROCHESTER AND MONROE COUNTY

CONTRACT AMOUNT: 303,007

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): The YWCA of Greater Rochester (YWCA) operates a supportive living program consisting of 29 furnished apartments and staff offices, which are all located at 175 North Clinton Avenue, Rochester NY 14604. The YWCA serves adult women who are diagnosed with a substance use disorder, who have achieved stability in abstinence and independent living skills, and who will benefit from weekly clinical or peer support. Women may live alone or with their children if the children are under age 12. The YWCA provides housing and support services to clients, including assigning clients to furnished apartments; assisting clients with establishing and maintaining public assistance benefits; providing staff and programming on-site; conducting comprehensive evaluations of client needs; making referrals as needed; conducting weekly one-on-one sessions with each client; offering recreational activities; offering recovery groups at least weekly; supporting clients' individualized abstinence and relapse prevention plans; assisting in the development of life skills, healthy use of leisure time, planning, and social skills; encouraging and supporting clients in pursuing their goals; and providing on-site drop-in childcare services for children residing in the program.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Capacity (beds)/individuals served/units of service (days)

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	29	29	29	29
Individuals Served:	60	56	59	62
Units of Service:	7,975	7,295	7,660	8,043

2. SELECTED OUTCOME INDICATOR: One month retention rate in the program (for discharges)

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	81%	77%	81%	85%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: OASAS Client Data System

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: DD

PROGRAM: Information & Referral

CONTRACTOR: STARBRIDGE SERVICES, INC.

CONTRACT AMOUNT: 57,811

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): Starbridge provides information and referral services at community locations throughout Monroe County and at its office located at 1650 South Avenue, Rochester New York 14620, to improve the community's awareness of disability-related issues and available resources. Information and referral services address topics including special education services, accessing medical care, transition planning, developmental disabilities services, self-advocacy, financial benefits, inclusivity, and employment. Starbridge serves individuals with intellectual/developmental disabilities (I/DD), and provides information and referral services, including but not limited to the following: informing individuals with I/DD and their families about resources and supports available in the community; assisting individuals with I/DD and their families with accessing services; education for organizations and groups (such as but not limited to colleges, schools, employers, libraries, and recreation programs) regarding how they can be more inclusive of people with disabilities; public education events to promote awareness of I/DD-related issues and resources available; and other disability awareness events, including workshops on advocacy skills and disability-related topics.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Individuals served

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	14,813	11,042	13,000	14,500
Units of Service:	n/a	n/a	n/a	n/a

2. SELECTED OUTCOME INDICATOR: Percent of survey respondents reporting increased knowledge of services

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	73%	80%	83%	85%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Provider Performance Reports

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: Opioid

PROGRAM: Open Access Program

CONTRACTOR: DELPHI DRUG & ALCOHOL COUNCIL, INC.

CONTRACT AMOUNT: 900,000

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): Delphi Drug and Alcohol Council Inc. (d.b.a. Delphi Rise) at 72 Hinchey Road, Rochester NY 14624, operates Open Access a program made possible through (Opioid Settlement funding). Open 24 hours per day, seven days a week to support people struggling with addiction. Clients are welcomed by a Peer Advocate, who has lived experience: knowing firsthand what clients have been through, and is non-judgmental. Peer Advocates will assist in developing a plan for next steps and answer questions regarding the process of recovery. A qualified evaluator will work with you and assess your treatment/ recovery needs. Delphi shares the various types of services and will discuss what best meets the client needs and personal goals. The team will assist with transportation and applying for benefits. They will also connect the client with community resources, from food to housing to mental health treatment.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Individuals Served

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	n/a	508	748	935
Units of Service:	n/a	n/a	n/a	n/a

2. SELECTED OUTCOME INDICATOR: Total number of projected referrals during reporting period

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	n/a	206	258	322

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Provider Performance Reports

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: Opioid

PROGRAM: Re-Entry Program

CONTRACTOR: DELPHI DRUG & ALCOHOL COUNCIL, INC.

CONTRACT AMOUNT: 250,000

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): Delphi Drug and Alcohol Council Inc. (d.b.a. Delphi Rise) at 72 Hinchey Road, Rochester NY 14624, will provide services for Adults (18 years and older) in Monroe County who have been recently released from incarceration (jail or prison). These individuals are in need of services to meet the needs of the whole person, to include the 8 dimensions of wellness: emotional, environmental, physical, financial, intellectual, occupational, social, and spiritual. This service will strive to meet the needs of the person in one stop, rather than being a referral source to other organizations. There will be special focus on individuals who have substance use disorders (SUD), including opioid use disorder and are at higher risk of overdose during the transition period back into the community. Individuals who have been incarcerated need to develop trusting relationships with their providers to increase success.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Number of individuals served

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	n/a	31	81	101
Units of Service:	n/a	n/a	n/a	n/a

2. SELECTED OUTCOME INDICATOR: Percentage of discharges due to incarceration

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	n/a	0%	10%	8%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Provider Performance Reports

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

CONTRACTOR: House of Mercy, Inc.

EXECUTIVE DIRECTOR: Rev. Dr. Michael J. Ford, Executive Director

BOARD MEMBERS: Ron Green, Van Griffin, Habibe Hakiqi, Kathy Hanford, Joan Hinman, Ed Hourihan, Kathy Purcell, Bernie Sass, James Smith,Catherine Thomas, Carol Tomesko, Robert Turner

PROGRAMS INCLUDED: Black, Indigenous, and People of Color (BIPOC) Peer Training Program

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: Opioid

PROGRAM: Black, Indigenous, and People of Color (BIPOC) Peer Training Program

CONTRACTOR: HOUSE OF MERCY, INC.

CONTRACT AMOUNT: 265,000

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): House of Mercy at 285 Ormond Street, Rochester NY 14605, provides adults (18+) who meet the criteria requirements for Black, Indigenous, and People of Color (BIPOC), Certified Recovery Peer Advocate Certificate (CRPA & CRPA-P), and completion of the NYS Peer Certification and/or the NY Certified Peer Specialist (NYCPS/NYCPS-P) CRPA, CRPA-P, or NYCPS/NYCPS-P Peer Certification. The focus population includes BIPOC individuals with lived experience with mental health or substance use. The program will recruit, train, support, prepare and guide Peers towards completing and passing the CRPA, CRPA-P, or NYCPS/NYCPS-P Peer Examination to obtain Peer Certification. Once Peers are certified, the organization will provide support toward vocational job placement and retention support with the goal of BIPOC adults obtaining and maintaining employment at a behavioral health Office of Mental Health, Office of Addiction Services and Supports, and Office for People with Developmental Disabilities license organization. The goal of job placement is to improve culturally responsive support to BIPOC adults in Monroe County with a Mental Health diagnosis and/or Substance Use Disorder service delivery system.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Individuals Served & Capacity

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	30	30	30	30
Individuals Served:	31	33	26	30
Units of Service:	n/a	n/a	n/a	n/a

2. SELECTED OUTCOME INDICATOR: Percentage (number) of individuals that completed training

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	87%	95%	96%	97%

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Provider Performance Reports

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

CONTRACTOR: The Mental Health Association of Rochester/Monroe County, Incorporated

EXECUTIVE DIRECTOR: Valerie Way, President/CEO

BOARD MEMBERS: Christen Bruu, Michelle Halloran, Haley Henning, Russell James, Krista Jenkins, Michelle Lee, Juanita Lyde, David Oliveiri, Jeff Pier, Jacqueline Wambach, Felicia Reed-Watt, Christina Thompson, Jessica Wilson, Patricia Woods

PROGRAMS INCLUDED: Crisis Transportation

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY: Opioid

PROGRAM: Crisis Transportation Services

CONTRACTOR: THE MENTAL HEALTH ASSOCIATION OF ROCHESTER/MONROE COUNTY, INCORPORATED

CONTRACT AMOUNT: 250,000

PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S): Mental Health Association (MHA) of Rochester at 274 N Goodman Street, Unit D103, Rochester NY 14607, operates a Crisis Transportation Services program to divert emegency department utilization; encourage utilization of alternative treatment services through the support of a peer during transit. The purpose of this pilot program is to improve the behavioral health and well-being of citizens living in Monroe County by providing alternative transportation with peer support for low-acuity substance use disorder and/or mental health crises to community based crisis programs that are better equipped to quickly assist the individual/family. Not only will this provide a better, more efficient experience for the community member by providing peer support, but also decrease cost and use of emergency services in cases where it is not needed and alternative community crisis programs exist, but do not provide transportation. The program provides peer assisted transportation to appropriately assessed individuals in specific areas of Monroe County, who choose to be transported to identified community based crisis program for support.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR: Individuals Served

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	n/a	n/a	n/a	n/a
Units of Service:	n/a	n/a	n/a	n/a

2. SELECTED OUTCOME INDICATOR: Percent of Individuals served who did not need ED visits in 30 days

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:	n/a	n/a	n/a	n/a

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: Provider Performance Reports

PURCHASE OF SERVICES INFORMATION FORM

Per Resolution No. 11 of 2008

DISABILITY:	Opioid
PROGRAM:	Transportation Services to Community-Based Crisis Programs
CONTRACTOR:	AGENCY TO BE DETERMINED
CONTRACT AMOUNT:	392,390
PROGRAM DESCRIPTION/ PRIMARY OBJECTIVE(S):	The Transportation Services to Community-Based Crisis Programs project: These funds will provide assessment, connection and the actual transportation of persons in crisis to a crisis diversion location. A peer will ride with the client.

1. PRIMARY PERFORMANCE MEASUREMENT/ INDICATOR:

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Capacity:	n/a	n/a	n/a	n/a
Individuals Served:	n/a	n/a	n/a	n/a
Units of Service:	n/a	n/a	n/a	n/a

2. SELECTED OUTCOME INDICATOR:

Program Year	2024 Actual	2025 Actual	2026 Annualized	2027 Projected
Indicator Value:		n/a	n/a	n/a

OUTCOME ASSESSMENT METHODOLOGY: Indicator reviewed quarterly by Monroe County Office of Mental Health

SOURCE MATERIAL: TBD

Office of **the County Executive**

Monroe County, New York

Adam J. Bello
County Executive

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Legislature Of
Monroe County
Committee Assignment
HUMAN SERVICES -L
WAYS & MEANS

November 6, 2026

To The Honorable
Monroe County Legislature
407 County Office Building
Rochester, New York 14614

Subject: Authorization to Contract for Monroe County Office for the Aging Programs in 2027-2028

Honorable Legislators:

I recommend that Your Honorable Body authorize contracts with the agencies listed in Attachment A in an amount not to exceed $9,823,977 for the provision of senior services for the period of January 1, 2027 through March 31, 2028.

The Monroe County Office for the Aging enters into approximately forty-seven (47) contracts each year in amounts over $20,000, with matching funds provided by the County, the United Way, contracted agencies, and participant contributions. These contracts will allow the Monroe County Office of the Aging to meet the long-term care service and support needs of older adults, persons with disabilities, and their informal family caregivers to achieve their highest level of independence. The Monroe County Office for the Aging also enters into intermunicipal agreements with various local municipalities to provide nutrition and senior center recreation and education services. Services provided directly correspond to the assessed needs and service objectives of the Office for the Aging's Annual Implementation Plan as required and approved by the New York State Office for the Aging ("NYSOFA").

Per our applications for services with NYSOFA, contracts are monitored and evaluated through several methods: 1) monthly program and expenditure reports; 2) on-site monitoring, and 3) annual evaluation. All contracted agencies have been selected through the use of Requests for Qualifications/Request for Proposals unless designated as a Sole Source Provider.

Please refer to the attached Purchase of Services Information Form for disclosure of information required pursuant to Resolution 223 of 2007, as amended by Resolution 11 of 2008.

The specific legislative actions required are:

1. Authorize the County Executive, or his designee, to execute contracts, applications, and any amendments thereto, with the agencies listed in Attachment A in an amount not to exceed $9,823,977 for the period of January 1, 2027 through March 31, 2028.

2. Authorize the County Executive, or his designee, to execute any applications, contracts, intermunicipal agreements and amendments thereto, with New York State and/or municipalities listed in Attachment A to increase or decrease the contract amounts and extend the length of the contract(s) in order to maximize state reimbursement or other funding for these purposes.

This action is a Type II Action pursuant to 6 NYCRR § 617.5(c)(26) ("routine or continuing agency administration and management, not including new programs or major reordering of priorities that may affect the environment") and is not subject to further review under the State Environmental Quality Review Act.

Funding for these contracts is included in the proposed 2027 operating budget of the Department of Human Services, general fund 1001; cost centers 550101, Administration and Program Management, 550103, Support Service Contracts; 550104, Nutrition Service Contracts, and 550105, Education, Training, Wellness Contracts. No additional net County support is required in the current Monroe County budget.

Each of these agencies has been reviewed for not-for-profit or corporate status and the records in the Office of the Monroe County Treasury have indicated that none of these agencies owe any delinquent Monroe County property taxes.

I recommend that this matter be referred to the appropriate committee(s) for favorable action by Your Honorable Body.

Sincerely,

Adam J. Bello
Monroe County Executive

2027/28 ANTICIPATED CONTRACT SERVICES/Fund 9001	TOTALS		
01/01/27-03/31/2028 Vendor and Program Services	VENDOR TOTAL	SERVICE TOTAL	PROGRAM DESCRIPTION
Adult Day Services		83,627	Social model adult day care programs support physically and cognitively impaired frail Older Adults (60+) with daytime recreation and care, providing respite for caregivers.
Hanna Z Daycare, Inc			
Social Adult Day Program Respite Adult Day Program	83,627		
Caregiver Assistance & Resources		222,724	
Alzheimer's Disease and Related Disorders Association, Inc.			
Caregiver Education and Support	67,862		Caregiver education programs, training and support groups and information & assistance offered to individuals diagnosed with early to mid-stage Alzheimer's disease and other memory related disorders.
Lifespan of Greater Rochester, Inc.			
Caregiver Resource Center & Grandparents Caregiver Program	125,677		The Caregiver Resource Center (CRC) is a State funded program which provides resources and support to Informal Family Caregivers. A Kinship care program provides support group and educational training sessions, designed to support eligible caregivers and help sustain their efforts to provide care for grandchildren, or other younger relatives, children in family-like relationships such as godparents or close family friends.
Long Term Care Ombudsman/(LTCOP)	29,185		Advocacy services that receive, investigate, and resolve complaints and concerns of residents in long-term care facilities.
Counseling and Assistance Services		280,401	
Lifespan of Greater Rochester, Inc.			
Financial Management Services	110,364		Financial Management program assists older adults with bill paying assistance and household budgeting, as well as applying for benefits such as Medicare and EPIC.
Health Insurance Information Counseling & Assistance Program (HIICAP)	158,837		The HIICAP program assists older adults and Medicare eligible individuals with unbiased information and assistance to navigate health insurance choices.
HIICAP Volunteer Stipend	11,200		Lifespan will provide a stipend to HIICAP volunteers that help meet the needs of older New Yorkers applying for Medicare Part B and Part D to lower their health insurance costs.

2027/28 ANTICIPATED CONTRACT SERVICES/Fund 9001	TOTALS		
01/01/27-03/31/2028 Vendor and Program Services	VENDOR TOTAL	SERVICE TOTAL	PROGRAM DESCRIPTION
Expanded In- Home Services		2,019,846	
Catholic Charities Family & Community Services Expanded in Home Services for Elderly Program (EISEP)	2,019,846		Assists cognitively impaired frail older adults to continue living independently in the community by providing case management, developing care plans, and providing in-home services. This program also provides ancillary services such as social adult day programs, home delivered meals, personal emergency response units, home modification and repair and assistive equipment. Home Health Agencies provide housekeeper chore services and personal care. Consumer Directed Services provides service options for family caregivers.
Elder Abuse Prevention Services		114,303	
Lifespan of Greater Rochester, Inc. Elder Abuse Intervention and Respite	114,303		Emergency Respite is designed for vulnerable individuals & caregivers in need of services who are not eligible under Title XX and have no other resources to pay. Services include but are not limited to emergency transportation, day care, and in-home chore services.
Health and Wellness Programs for Seniors		200,531	
Lifespan of Greater Rochester , Inc. Matter of Balance Program	48,205		The Matter of Balance Program is an evidence-based falls prevention program.
Lifespan of Greater Rochester, Inc. Chronic Disease Self Management	10,000		The Chronic Disease Self Management Program (CDSMP) is an evidence-based training program that teaches skills to manage chronic conditions, such as arthritis, hypertension, diabetes, cancer, and heart disease, and significantly improve the health and well-being of older adults in the community and prevent falls.
Older Adult Depression and Screening/PATHS/PEARLS	56,408		The Older Adult Wellness Programs includes depression screening, and counseling services. These evidence based programs include the Program to Encourage Active, Rewarding Lives (PEARLS) and Providing Assessment and Treatment for Home-bound Seniors (PATHS).
Older Adult Harm Reduction Program	35,000		The Older Adult Harm Reduction Program provides case assistance and uses a motivational intervention, harm reduction model to support older adults to take steps to decrease their misuse of drugs, alcohol, etc., and minimize harm their behavior is causing their health.
Rainbow Seniors Recreation, Education and Wellness Program	20,000		Recreation and wellness programming for LBGT + individuals sixty years older, such as socialization, chair-yoga, bingo, cards-night, etc., to help maintain mental and physical well-being. Services provided through the center assist in allowing participants the opportunity to remain healthy, independent and in their homes for as long as possible.
Oasis Community Connections (formely Oasis Rochester) Recreation, Education and Wellness Program	30,918		Utilizing evidence-based interventions, this program provides educational, informational, cultural, health and fitness programming to maintain/improve health and wellness for older adults.

2027/28 ANTICIPATED CONTRACT SERVICES/Fund 9001 01/01/27-03/31/2028 Vendor and Program Services	TOTALS VENDOR TOTAL	 SERVICE TOTAL	PROGRAM DESCRIPTION
Home Support & In-Home Services		532,961	
Catholic Charities Family and Community Services) Assisted Transportation	320,913		A transportation service program that provides assisted transportation to older adults, including escort services to a person who has difficulties (physical or cognitive) using vehicular transportation.
In-Home Services &Support	212,048		In-home services involve providing non-medical services such as housekeeping, laundry services, home modifications, home repairs, personal emergency response systems, and other essential personal items to assist individuals who have physical or cognitive difficulties.
	-		
Information, Case Assistance & Special events		1,684,337	
Coordinated Care Services, Inc.			
Contract Administration, Fiduciary Services and Employer of Record Services	231,791		This contract provides Contract Administration and Fiduciary Services for MCOFA. This contract provides Employer of Record Services to assist MCOFA in performing required tasks including Program Monitoring, Outreach & Public Education.
Daniel Jones (SCRA) Computer Training for Seniors	10,000		Provide older adults with computer, internet and social networking skills to enhance their lives and keep them connected.
Lifespan of Greater Rochester, Inc.			
Eldersource Information & Assistance/Elderly Community Outreach (ECO)	560,895		Eldersource is a single source information, referral, case assistance & counseling program for services to older adults and caregivers, including more intensive case assistance and linkage to healthcare providers for enhanced service provision and improved outcomes (a service called Community Care Connections). Caseworkers provide community outreach, public education, referrals, assessments, short term problem solving, counseling and advocacy for older adults.
NY Connects Choices for Long Term Care	801,651		NY Connects is the Aging and Disability Resource Center. This program provides information, assistance and referral about long term care services and supports, options counseling, and assistance in applying for benefits. This program also convenes the Monroe County Long Term Care Council, responsible for analyzing gaps and barriers in the long term care system, and No Wrong Door work group to ensure consistency across systems of care.

2027/28 ANTICIPATED CONTRACT SERVICES/Fund 9001	TOTALS		
01/01/27-03/31/2028 Vendor and Program Services	VENDOR TOTAL	SERVICE TOTAL	PROGRAM DESCRIPTION
United Way of Greater Rochester Age Friendly Program	60,000		To provide services such as assistance in helping the twenty (20) municipalities (nineteen Towns and the City of Rochester) in understanding their municipality's aging population, identifying areas of improvement, and developing a plan to improve the lives of the people living in the age friendly community.
Jewish Family Services Information and Assistance	20,000		To provide long term care service and support information and assistance to Holocaust survivors in Monroe County. This program targets Russian and other non-English speaking clients in order to link them to benefits specific to Holocaust survivors (e.g., Self Help, Blue Card and Kavod) in order to assist them with aging safely in their homes and community.
Legal Services for the Elderly Legal Assistance of Western NY, Inc. Legal Services for the Elderly	190,841	***190,841***	This program provides low income older adults legal assistance and advocacy. Assistance is provided for help with Social Security, SSI, Medicaid, housing problems, simple wills, utility issues, Health Care Proxy, and Powers of Attorney.
Management Services Coordinated Care Services, Inc. Contract Administration, Fiduciary Services and Employer of Record Services	34,768	***34,768***	CCSI provides management & administration of contracts for various Monroe County Administrative and Employer Record Services.
Nutrition Services: Home Delivered Meals UR Medicine Home Care, Community Services, Inc. Meals on Wheels Program	1,916,700	***1,916,700***	Home Delivered Meals are provided to persons age 60 and over who are homebound, living alone, and are unable to prepare their own meals due to frailty or illness.

2027/28 ANTICIPATED CONTRACT SERVICES/Fund 9001	TOTALS		
01/01/27-03/31/2028 Vendor and Program Services	VENDOR TOTAL	SERVICE TOTAL	PROGRAM DESCRIPTION
Nutrition Services: Senior Center Catering		495,728	
Foodlink, Inc.	495,728		
Catering Services for the Congregate Nutrition Program			Senior meal nutrition services for the delivery of congregate meals to older adult seniro center attendees age 60 and older; services include nutritionally balanced meals and emergency, shelf-stable meals are also provided to seniors throughout the winter months.
Nutrtion Educator Services			
Nutrition Services: Senior Centers of Monroe County		1,305,954	Senior Centers in Monroe County provide social activities, wellness programs, special events and meals to persons age 60 and over, their spouse and disabled adult children in a congregate setting. Recreational programming, social activities, case management services and other quality of life initiatives assist seniors to reduce isolation. These centers help seniors to remain living independently within the community of their choice.
Baden Street Settlement of Rochester, Inc.:			
MARC Senior Center	52,904		
Charles Settlement House, Inc.:			
Charles Settlement House Senior Center	100,255		
Town of Chili:			
Chili Senior Center	46,141		
The Community Place of Greater Rochester, Inc.:			
Community Place Senior Center	71,210		
Town of Gates:			
Gates Community & Senior Center	60,437		
Town of Greece:			
Greece Community & Senior Center	74,725		
Town of Henrietta:			
Henrietta Senior Center	144,275		
Ibero-American Action League, Inc.:			
Centro de Oro Senior Center	135,179		
Town of Irondequoit:			
Irondequoit Senior Center	92,154		
Lifespan of Greater Rochester, Inc.:			
Lifespan Senior Center Programs Wolk Center	139,140		
Lifespan of Greater Rochester, Inc.:			
Lifespan Senior Center Programs Lily Café	51,098		
Lifetime Assistance, Inc.:			
Sweden Senior Center	20,000		
Prayer House Church of God by Faith			
Senior Center	42,098		
Southwest Neighborhood Association:			
Southwest Senior Center	62,348		
Town of Ogden:			
Ogden Senior Center	42,740		
Town of Parma:			
Hilton-Parma Senior Center	25,766		
Town of Pittsford:			
Pittsford Senior Center	46,536		
Town of Webster:			
Webster Senior Center	78,723		
Town of Wheatland:			
Wheatland Senior Center	29,225		
TBD Potential New sites	-		

2027/28 ANTICIPATED CONTRACT SERVICES/Fund 9001	TOTALS		
01/01/27-03/31/2028 Vendor and Program Services	VENDOR TOTAL	SERVICE TOTAL	PROGRAM DESCRIPTION
Transportation Services		*741,256*	
Lifespan of Greater Rochester, Inc. Mobility Management	50,000		Mobility management services, such as guidance and navigation about local transportation options. These services also help older adults to travel across neighboring regions for health care social events, and routine business.
Medical Motors Service of Rochester and Monroe County, Inc.			
Senior Center Transport			Transportation services are provided for older adults to and from area Senior Centers, Social Adult Day Programs, recreational outings, grocery shopping, banking services and dialysis.
Dialysis Transportation	691,256		
Total OFA Contract Budget Proposal	9,823,977	9,823,977	**Total Office for the Aging Contract Service Funds Requested**
	9,823,977	9,823,977	
OFFICE FOR THE AGING CONTRACTS			
		97.0%	Percent of Federal, State, and Program Revenue
Anticipated Program Revenue	9,526,919	9,526,919	**Amount of Anticipated Revenue for Office for the Aging contracted services**
		3.0%	Percent of Net county support for OFA Contracted Services
Net County Support Request	297,058	297,058	**Amount of Net County Match Support for OFA Contracted Services**
Total OFA Contract Budget Proposal	9,823,977	9,823,977	
	-	-	
County budget			
	Cost Center	**Amount**	**2027/28 ANTICIPATED CONTRACT SERVICES/Fund 9001**
	550101	$ 46,365	**Contract Management/CCSI: 5501010000**
	550103	209,669	**Support Services: County Funding**
	550103	5,383,492	**Support Services: State/Federal Funding**
	550104	41,024	**Nutrition Services: County Funding**
	550104	3,298,001	**Nutrition Services: State/Federal Funding**
	550105	845,426	**Education & Wellness: State Funding**
	550105	-	**Education & Wellness: County Funding**
		$ 9,823,977	**OFA Contract Total**

PURCHASE OF SERVICES INFORMATION FORM
Per Resolution 223 of 2007 as amended by Resolution 11 of 2008

Re: Acceptance of Funds and Authorization to Contract for Monroe County Office for the Aging Programs in 2027-28

Total Served 2025: 7
Proposed $ Amt. 2027: $83,627

SECTION I

PROGRAM: Social Adult Day Care Services

CONTRACTOR: Hanna Z Adult Daycare, Inc, Rachel Vatelman, President

PROGRAM DISCRIPTION: Hanna Z Adult Daycare Inc. will provide efficient and cost-effective delivery of Caregiver Respite Services to Monroe County to informal caregivers via Social Adult Day Care for functionally impaired family members. The service provides short-term substitute care and supervision of functionally impaired older individuals to offer their caregivers temporary rest and relief from caregiving responsibilities.

PRIMARY OBJECTIVE(S)/ DELIVERABLES Provide caregiver respite via a social model adult day program that provides a short break to caregivers of physically and mentally frail older persons.

PRIMARY PERFORMANCE MEASURE/INDICATOR: Deliver Social Adult Day Care Respite hours to stressed family caregivers in Monroe County.

Deliver Social Adult Day Care Respite hours to stressed family caregivers in Monroe County.

	Previous Year Projection	Previous Year Actual	Current Year Projection	Next Year Projection
Program Year	1/1/25-12/31/25	1/1/25-12/31/25	1/1/26-12/31/26	1/1/27-12/31/27
Total # of Participants	19	7*	19	19
% Successful	90%	37%	90%	90%

* Program did not open to participants until November 2025

OUTCOME ASSESSMENT METHODOLOGY: Hanna Z utilizes NYSOFA's Caregiver Quality Assurance survey to measure caregiver satisfaction with services. Hanna Z also utilizes the New York State Office for Aging's designated Statewide Client Data System to generate monthly and quarterly reports on performance measures and number of people served including demographics, conducts an annual self-evaluation and program assessment which measure the effectiveness and impact of the program.

SECTION II

SOURCE MATERIAL: Annual Evaluation will be on file with the Clerk of the Monroe County Legislature.

PURCHASE OF SERVICES INFORMATION FORM
Per Resolution 223 of 2007 as amended by Resolution 11 of 2008

Re: Acceptance of Funds and Authorization to Contract for Monroe County Office for the Aging Programs in 2027-28

Total served 2025: 1220
Proposed $ Amt. 2027: $67,862

SECTION I
PROGRAM: Caregiver Services

CONTRACTOR: Alzheimer's Disease and Related Disorders Association, Inc., Kathleen Flannery, Executive Director

PROGRAM DESCRIPTION: Informal family caregivers of persons with dementia are given the opportunity to maintain their level of mental, emotional and physical well-being through the provision of caregiver services .

PRIMARY OBJECTIVE(S)/ DELIVERABLES: Provide family caregivers of people with dementia support through information and assistance to help caregivers identify, understand, and connect with various community resources tailored to their needs.

PRIMARY PERFORMANCE MEASURE/INDICATOR: Deliver information and assistance services to family caregivers of people with Alzheimer's disease and other dementias in Monroe County.

	Previous Year Projection	Previous Year Actual	Current Year Projection	Next Year Projection
Program Year	1/1/25-12/31/25	1/1/25-12/31/25	1/1/26-12/31/26	1/1/27-12/31/27
Total # of Units	476	811	476	476
% Successful	90%	170%	90%	90%

OUTCOME ASSESSMENT METHODOLOGY: The National Alzheimer's Association CSQEI is a measurement tool that is utilized for program evaluation.

SECONDARY OBJECTIVE(S)/ DELIVERABLES: To provide the general public with information about Alzheimer's disease and other dementias through community awareness programs around Monroe County.

SECONDARY PERFORMANCE MEASURE/INDICATOR: Deliver public information to Monroe County residents to raise awareness on the topic of dementia, caregiving, and community resources. One unit = one class/session.

	Previous Year Projection	Previous Year Actual	Current Year Projection	Next Year Projection
Program Year	1/1/25-12/31/25	1/1/25-12/31/25	1/1/26-12/31/26	1/1/27-12/31/27
Total # of Units	90	188	90	90
% Successful	90%	208%	90%	90%

OUTCOME ASSESSMENT METHODOLOGY: The National Alzheimer's Association CSQEI is a measurement tool that is utilized for program evaluation.

BOARD MEMBERS: Minoo Javanmardian, Karyne Jones, Dean Brenner, Nancy Westcott, Geoff Heredia, Dozene Guishard, Oscar Lopez, Irene Sudac, Alex Tsao, George Walz, Rushern Baker, Gabriel de la Rosa, Aaron Daniels, Hector Fernandez, Leah Farley, Chuck Garrett, Peter Goldstein, Tracy Hayes, Bret Hill, Mikaela Louie, Lori McCarney, Cynthia Moore-Hardy, Aimee Nolan, Hamid Okhravi, Michael O'Leary

SECTION II
SOURCE MATERIAL: Annual Evaluation is on file with the Clerk of the Monroe County Legislature.

PURCHASE OF SERVICES INFORMATION FORM
Per Resolution 223 of 2007 as amended by Resolution 11 of 2008

Re: Acceptance of Funds and Authorization to Contract for Monroe County Office for the Aging Programs in 2027-28

Total served 2025 - 26: 488
Proposed $ Amt. 2027 - 28: $125,667

SECTION I

PROGRAM: Caregiver Resource Center and Grandparents Caregiver Program

CONTRACTOR: Lifespan of Greater Rochester, Inc., Ann Marie Cook, President/CEO

PROGRAM DESCRIPTION: Informal family caregivers will have an opportunity to maintain and increase their mental and physical well-being by accessing caregiver training and support, and community resources.

PRIMARY OBJECTIVE(S)/ DELIVERABLES: Provide caregiver training to increase caregivers' ability to plan for the future and to take care of themselves.

PRIMARY PERFORMANCE MEASURE/INDICATOR: Trained caregivers will self-report an increased knowledge of caregiving resources and ability to maintain their well-being in their caregiving capacity.

	Previous Year Projection	Previous Year Actual	Current Year Projection	Next Year Projection
Program Year	1/1/25-3/31/26	1/1/25-3/31/26	1/1/26-3/31/27	1/1/27-3/31/28
Total # of Units	1,400*	1,495*	825	825
% Successful	95%	107%	95%	95%

**This projection and actual are higher than normal due to additional Unmet Needs funding for this period*

OUTCOME ASSESSMENT METHODOLOGY: Caregivers will be asked to complete a follow-up survey to assess their knowledge of caregiver issues and their confidence in accessing needed services for their caregiving journey.

SECONDARY OBJECTIVE(S)/ DELIVERABLES: To provide support to kinship caregivers providing care to grandchildren or other children in family-like relationships through support groups.

SECONDARY PERFORMANCE MEASURE/INDICATOR: Kinship caregivers will self-report an increased knowledge of caregiving resources and ability to maintain their well-being in their caregiving capacity.

	Previous Year Projection	Previous Year Actual	Current Year Projection	Next Year Projection
Program Year	1/1/25-3/31/26	1/1/25-3/31/26	1/1/26-3/31/27	1/1/27-3/31/28
Total # of Units	27	24	27	27
% Successful	90%	89%	90%	90%

OUTCOME ASSESSMENT METHODOLOGY: Caregivers will be asked to complete a follow-up survey to assess their knowledge of caregiver issues and their confidence in accessing needed services for their caregiving journey.

BOARD MEMBERS: Dr. Robert McCann, Liz Vega, Lori Jansen, John Clark, Ralph J. Code, III, Esq., Bob Hartman, Michael Kaufman, Dr. Stephen Ryan, Dr. April Aycock, Dr. Marie Aydelotte, Michael Bausch, Vito Caraccio, Lucia Castillejo, Carmen Coleman, Tere Dominas, Ericka Elliott, Jarrett Felton, John Fornof, Dr. Ankit Garg, Tracy Greene, Cindy Lovetro, Karen LaGraff, Dr. Timothy Lum, David Mack, Travis Masonis, Corinda Reaves, Colleen Rose, Jeremy Sedelmeyer, Roberta VanWinkle

SECTION II

SOURCE MATERIAL: Annual Evaluation is on file with the Clerk of the Monroe County Legislature.

PURCHASE OF SERVICES INFORMATION FORM
Per Resolution 223 of 2007 as amended by Resolution 11 of 2008

Re: Acceptance of Funds and Authorization to Contract for Monroe County Office for the Aging Programs in 2027-28

Total Served 2025: **N/A - Client information confidential**
Proposed $ Amt. 2027: **$29,185**

SECTION I

PROGRAM: Long Term Care Ombudsman Program (LTCOP)

CONTRACTOR: Lifespan of Greater Rochester, Inc., Ann Marie Cook, President/CEO

PROGRAM DESCRIPTION: The Long Term Care Ombudsman Program serves as an advocate and resource for older adults and persons with disabilities who reside in New York's long-term care facilities, including nursing homes and adult care facilities. The federal Older Americans Act forms the basis for the legal structure that supports the authority of this office. Additional enhancement to this structure is provided by New York State Elder Law (formally known as Executive Law 544). Amendments to the federal law have expanded the program to now include all people residing in both nursing homes and adult care facilities.

PRIMARY OBJECTIVE(S)/ DELIVERABLES: Services provided by duly authorized patient advocates on behalf of people residing in long term care facilities and their families. Primary activities include identifying, investigating and resolving complaints, concerning resident care, quality of life and residents' rights. Identification of adverse issues and conditions affecting residents, promoting the development of resident and family councils, and ensuring residents have regular and timely access to ombudsman advocacy services.

PRIMARY PERFORMANCE MEASURE/INDICATOR: Program priorities include: increasing resident/consumer access to effective and timely advocacy services; empowering more residents and their families to resolve concerns without the need for outside intervention when appropriate; and, improving systemic advocacy efforts to address facility-wide or statewide issues and problems experienced by residents.

	Previous Year Projection	Previous Year Actual	Current Year Projection	Next Year Projection
Program Year	1/1/25-12/31/25	1/1/25-12/31/25	1/1/26-12/31/26	1/1/27-12/31/27
***	N/A	N/A	N/A	N/A

OUTCOME ASSESSMENT METHODOLOGY: ***This information is reported under the NYS Ombudsman Reporting System. All client identifying information is confidential and subject to disclosure according to requirements under the Older Americans Act. Report expenditures only using the NYSOFA quarterly on-line system.

BOARD MEMBERS: Dr. Robert McCann, Liz Vega, Lori Jansen, John Clark, Ralph J. Code, III, Esq., Bob Hartman, Michael Kaufman, Dr. Stephen Ryan, Dr. April Aycock, Dr. Marie Aydelotte, Michael Bausch, Vito Caraccio, Lucia Castillejo, Carmen Coleman, Tere Dominas, Ericka Elliott, Jarrett Felton, John Fornof, Dr. Ankit Garg, Tracy Greene, Cindy Lovetro, Karen LaGraff, Dr. Timothy Lum, David Mack, Travis Masonis, Corinda Reaves, Colleen Rose, Jeremy Sedelmeyer, Roberta VanWinkle

SECTION II

SOURCE MATERIAL: Annual Evaluation is on file with the NY State Office for Aging

PURCHASE OF SERVICES INFORMATION FORM
Per Resolution 223 of 2007 as amended by Resolution 11 of 2008

Re: Acceptance of Funds and Authorization to Contract for Monroe County Office for the Aging Programs in 2027-28

Total Served 2025 - 26 288
Proposed $ Amt. 2027 - 28: $110,364

SECTION I
PROGRAM: Financial Management Program

CONTRACTOR: Lifespan of Greater Rochester, Inc., Ann Marie Cook, President/CEO

PROGRAM DESCRIPTION: Financial counselors and trained volunteers provide a voluntary money management service. Individuals requesting assistance, receive a variety of services including needs assessment, financial planning, assistance in obtaining benefits, credit counseling and bill paying.

PRIMARY OBJECTIVE(S)/ DELIVERABLES: Maintain and/or increase the financial stability and independence of older adults in the community through money management services and decrease stress.

PRIMARY PERFORMANCE MEASURE/INDICATOR: Indicator of Success: Successfully provide Financial Management Services to older adults. Participants will pay their bills in a timely manner, access eligible benefits and achieve their budgeting goals. Participants needing immediate financial crisis intervention will obtain intervention services.

	Previous Year Projection	Previous Year Actual	Current Year Projection	Next Year Projection
Program Year	1/1/25-3/31/26	1/1/25-3/31/26	1/1/26-3/31/27	1/1/27-3/31/28
Total # of Participants	200	288	245	245
% Successful	90%	117.55%	90%	90%

OUTCOME ASSESSMENT METHODOLOGY: Lifespan uses the New York State Office for Aging's designated Statewide Client Data System, and the County's *ContrackHQ* to generate monthly and quarterly reports, annual self-evaluations, program assessments, performance measures, outcome objectives, number of people served including demographics, and units provided which measure the effectiveness and impact of the program.

SECONDARY PERFORMANCE MEASURE/INDICATOR: Indicator of Success: Older Adults will be satisfied with the quality of service provided using the Customer Satisfaction Survey provided to participants.

	Previous Year Projection	Previous Year Actual	Current Year Projection	Next Year Projection
Program Year	1/1/25-3/31/26	1/1/25-3/31/26	1/1/26-3/31/27	1/1/27-3/31/28
% Successful	90%	100%	90%	90%

OUTCOME ASSESSMENT METHODOLOGY: Survey participants to determine effectiveness of our program and to measure if the older adult level of knowledge increased after receiving information from a Financial Management volunteer. Surveys are compiled and analyzed annually.

BOARD MEMBERS: Dr. Robert McCann, Liz Vega, Lori Jansen, John Clark, Ralph J. Code, III, Esq., Bob Hartman, Michael Kaufman, Dr. Stephen Ryan, Dr. April Aycock, Dr. Marie Aydelotte, Michael Bausch, Vito Caraccio, Lucia Castillejo, Carmen Coleman, Tere Dominas, Ericka Elliott, Jarrett Felton, John Fornof, Dr. Ankit Garg, Tracy Greene, Cindy Lovetro, Karen LaGraff, Dr. Timothy Lum, David Mack, Travis Masonis, Corinda Reaves, Colleen Rose, Jeremy Sedelmeyer, Roberta VanWinkle

SECTION II
SOURCE MATERIAL: Annual Evaluation is on file with the Clerk of the Monroe County Legislature.

PURCHASE OF SERVICES INFORMATION FORM
Per Resolution 223 of 2007 as amended by Resolution 11 of 2008

Re: Acceptance of Funds and Authorization to Contract for Monroe County Office for the Aging Programs in 2027-28

Total Served 2025 - 2026: 2682
Proposed $ Amt. 2027 - 28: $158,837
Proposed $ Volunteer Stipend Amt. 2027 - 28 $11,200

SECTION I
PROGRAM: Health Information Insurance Counseling & Assistance Program (HIICAP)

CONTRACTOR: Lifespan of Greater Rochester, Inc., Ann Marie Cook, President/CEO

PROGRAM DESCRIPTION: Advisors and trained volunteers provide voluntary assistance with health insurance options. Individuals or their family caregivers requesting assistance receive a variety of services pertaining to their insurance needs. A client's specific situation, including affordability and accessibility are assessed. Clients are then provided with health insurance options that best meet their needs.

PRIMARY OBJECTIVE(S)/ DELIVERABLES: To increase the ability of older adults to understand and choose affordable health insurance. To provide HIICAP Stipend to HIICAP Volunteers that assist older adults to understand and choose affordable health insurance.

PRIMARY PERFORMANCE MEASURE/INDICATOR: Indicator of Success: Successfully provide Health Insurance Counseling Services to older adults. Older adults will understand health insurance options and cost. This will be accomplished by telephone on a one-to-one basis.

	Previous Year Projection	Previous Year Actual	Current Year Projection	Next Year Projection
Program Year	1/1/25-3/31/26	1/1/25-3/31/26	1/1/26-3/31/27	1/1/27-3/31/28
Total # of Participants	2364	2682	2650	2650
% Successful	90%	113.45%	90%	90%

OUTCOME ASSESSMENT METHODOLOGY: Lifespan uses the New York State Office for Aging's designated Statewide Client Data System, and the County's *ContrackHQ* to generate monthly and quarterly reports, annual self-evaluations, program assessments, performance measures, outcome objectives, number of people served including demographics, and units provided which measure the effectiveness and impact of the program.

SECONDARY PERFORMANCE MEASURE/INDICATOR: Indicator of Success: Older Adults will be satisfied with the quality of service provided using the Customer Satisfaction Survey provided to participants.

	Previous Year Projection	Previous Year Actual	Current Year Projection	Next Year Projection
Program Year	1/1/25-3/31/26	1/1/25-3/31/26	1/1/26-3/31/27	1/1/27-3/31/28
% Successful	90%	100%	90%	90%

OUTCOME ASSESSMENT METHODOLOGY: Survey participants to determine effectiveness of our program and to measure if the older adult level of knowledge increased after receiving information from a HIICAP/MIPPA counselor. Presentation attendees will also be provided a survey. Surveys are compiled and analyzed annually.

BOARD MEMBERS: Dr. Robert McCann, Liz Vega, Lori Jansen, John Clark, Ralph J. Code, III, Esq., Bob Hartman, Michael Kaufman, Dr. Stephen Ryan, Dr. April Aycock, Dr. Marie Aydelotte, Father Michael Bausch, Vito Caraccio, Lucia Castillejo, Carmen Coleman, Tere Dominas, Ericka Elliott, Jarrett Felton, John Fornof, Dr. Ankit Garg, Tracy Greene, Cindy Lovetro, Karen LaGraff, Dr. Timothy Lum, David Mack, Travis Masonis, Corinda Reaves, Colleen Rose, Jeremy Sedelmeyer, Roberta VanWinkle

SECTION II
SOURCE MATERIAL: Annual Evaluation is on file with the Clerk of the Monroe County Legislature.

PURCHASE OF SERVICES INFORMATION FORM
Per Resolution 223 of 2007 as amended by Resolution 11 of 2008

Re: Acceptance of Funds and Authorization to Contract for Monroe County Office for the Aging Programs in 2027-28

Total Served 2025 - 2026: 447
Proposed $ Amt. 2027 - 28: $2,019, 846

SECTION I

PROGRAM: Expanded In-Home Service for the Elderly Program (EISEP)
Case Management Service/ Adult Day Services/ PERS/ Self-Directing In-Home Personal Care Services Personal Care Aide and Housekeeping Chore Services.

CONTRACTOR: Catholic Charities of the Diocese of Rochester, dba Catholic Charities Family Community Services, Lori VanAuken, President & CEO

PROGRAM DESCRIPTION: Case management services are provided to senior's age 60+. General components include screening, assessment, development of a care plan, authorization of in-home services, and on-going monitoring and evaluation. This program will allow eligible individuals to have a personal emergency response system in their home and offer adult day services to reduce isolation and better assist family caregivers. *Self-directing in-home personal care services provides options to family caregivers.

PRIMARY OBJECTIVE(S)/ DELIVERABLES: To improve or maintain the ability of frail older adults living in Monroe County to live independently.

PRIMARY PERFORMANCE MEASURE/INDICATOR: Indicator of Success: Individuals served will state that they were satisfied with the services they received as an EISEP client.

	Previous Year Projection	Previous Year Actual	Current Year Projection	Next Year Projection
Program Year	4/1/25-3/31/26	4/1/25-3/31/26	4/1/26-3/31/27	4/1/27-3/31/28
Total # of Participants	400	447	360	360
% Successful	90%	112%	90%	90%

OUTCOME ASSESSMENT METHODOLOGY: Customer Satisfaction Survey mailed to served clients at least twice a year and at discharge. EISEP reports the percentage of participants that answer positively that the services have improved an area of the person's life on the satisfaction survey as well as the program's Net Promotor Score.

BOARD MEMBERS: Iveth Reynolds, Roger Cordero, James Aroune, Jackie Benedetto, Berlin Bermudez, Elizabeth Ciaccio, Mary Kathryn Dappen, Mary Dombovy, Kristie Elias, Lawrence Farnand, Kristy Gonzalez, Christopher Johnson, Virgil Joseph, David Kelly, Alasdair MacKinnon, John Milazzo, Laura Purcell, Tesfamichael Yohannes

SECTION II

SOURCE MATERIAL: Annual Evaluation is on file with the Clerk of the Monroe County Legislature

PURCHASE OF SERVICES INFORMATION FORM
Per Resolution 223 of 2007 as amended by Resolution 11 of 2008

Re: Acceptance of Funds and Authorization to Contract for Monroe County Office for the Aging Programs in 2027-28

Total Served 2025: 209
Proposed $ Amt. 2027: $114,303

SECTION I

PROGRAM: Elder Abuse Intervention and Respite

CONTRACTOR: Lifespan of Greater Rochester, Inc., Ann Marie Cook, President/CEO

PROGRAM DESCRIPTION: Intervention services will be provided for individuals who are victims of elder abuse in order to maintain their health and well-being. In addition, through investigation of alleged elder abuse and social work intervention, it is also necessary to serve the informal family caregiver to support his/her well-being. Funds designated for respite services in this program are for victims and caregivers needing respite services and are not eligible for such services under Title XX, and do not have the means to pay privately.

PRIMARY OBJECTIVE(S)/ DELIVERABLES: To reduce the incidence of elder abuse, mistreatment and exploitation of elderly persons by others through direct social service intervention to victims/potential victim's and in appropriate cases, social service assistance to caregivers in crisis or extreme stress.

PRIMARY PERFORMANCE MEASURE/INDICATOR: Indicator of Success: Provide adequate respite for individuals and their family caregivers. That 90% of all cases handled will result in a positive outcome: i.e., an older adult is able to remain safe in the community

	Previous Year Projection	Previous Year Actual	Current Year Projection	Next Year Projection
Program Year	1/1/25-12/31/25	1/1/25-12/31/25	1/1/26-12/31/26	1/1/27-12/31/27
Total # of Participants	230	209	230	230
% Successful	90%	90.87%	90%	90%

OUTCOME ASSESSMENT METHODOLOGY: 30-day follow-up reports are conducted for all older adults and/or caregivers served by program.

BOARD MEMBERS: Dr. Robert McCann, Liz Vega, Lori Jansen, John Clark, Ralph J. Code, III, Esq., Bob Hartman, Michael Kaufman, Dr. Stephen Ryan, Dr. April Aycock, Dr. Marie Aydelotte, Michael Bausch, Vito Caraccio, Lucia Castillejo, Carmen Coleman, Tere Dominas, Ericka Elliott, Jarrett Felton, John Fornof, Dr. Ankit Garg, Tracy Greene, Cindy Lovetro, Karen LaGraff, Dr. Timothy Lum, David Mack, Travis Masonis, Corinda Reaves, Colleen Rose, Jeremy Sedelmeyer, Roberta VanWinkle

SECTION II

SOURCE MATERIAL: Annual Evaluation is on file with the Clerk of the Monroe County Legislature.

PURCHASE OF SERVICES INFORMATION FORM
Per Resolution 223 of 2007 as amended by Resolution 11 of 2008

Re: Acceptance of Funds and Authorization to Contract for Monroe County Office for the Aging Programs in 2027-28

Total served 2025: 560
Proposed $ Amt. 2027: $48,205

SECTION I

PROGRAM: Matter of Balance Program [Falls Prevention]

CONTRACTOR: Lifespan of Greater Rochester, Inc., Ann Marie Cook, President/CEO

PROGRAM DESCRIPTION: Evidence-based falls prevention wellness program for adults age 60 and older. The program teaches older adults how to avoid falls and improve or maintain their balance in order to prevent injuries and maintain their independence.

PRIMARY OBJECTIVE(S)/ DELIVERABLES: Certified Master Trainers will provide information and support via evidence-based falls prevention programs to older adults at local senior centers and other locales where older adults congregate in order for the to maintain their balance as they age.

PRIMARY PERFORMANCE MEASURE/INDICATOR: Upon completion of classes, at least 98% of older adults taking class will feel more comfortable in increasing their physical activity.

	Previous Year Projection	Previous Year Actual	Current Year Projection	Next Year Projection
Program Year	1/1/25-12/31/25	1/1/25-12/31/25	1/1/26-12/31/26	1/1/27-12/31/27
Total # of Participants	288	560	312	312
% Successful	98%	194%	98%	98%

OUTCOME ASSESSMENT METHODOLOGY: Program will survey participants with pre-tests and post tests to determine the effectiveness of this evidence-based wellness program.

BOARD MEMBERS: Dr. Robert McCann, Liz Vega, Lori Jansen, John Clark, Buz Code, Esq.,Bob Hartman, Michael Kaufman, Dr. Stephen Ryan, Dr. April Aycock, Dr. Marie Aydelotte, Father Michael Bausch, Vito Caraccio, Lucia Castillejo, Carmen Coleman, Tere Dominas, Ericka Elliott, Jarrett Felton, John Fornof, Dr. Ankit Garg, Tracy Greene, Cindy Lovetro, Karen LaGraff, Dr. Timothy Lum, M.D., David Mack, Travis Masonis, Corinda Reaves, Colleen Rose, Jeremy Sedelmeyer, Roberta VanWinkle

SECTION II

SOURCE MATERIAL: Annual Evaluation is on file with the Clerk of the Monroe County Legislature.

PURCHASE OF SERVICES INFORMATION FORM
Per Resolution 223 of 2007 as amended by Resolution 11 of 2008

Re: Acceptance of Funds and Authorization to Contract for Monroe County Office for the Aging Programs in 2027-28

Total served 2025: 25
Proposed $ Amt. 2027: $10,000

SECTION I

PROGRAM: Chronic Disease Self-Management Program (CDSMP) & Diabetes Self-Management Program (DSMP)

CONTRACTOR: Lifespan of Greater Rochester, Inc., Ann Marie Cook, President/CEO

PROGRAM DESCRIPTION: Evidence-based program for older adults to help them to better manage chronic conditions such as arthritis, hypertension, diabetes, cancer, and heart disease.

PRIMARY OBJECTIVE(S)/ DELIVERABLES: Increase the ability of older adults to better manage their chronic health conditions and reduce health care utilization, reduce use of medications, and decrease pain.

PRIMARY PERFORMANCE MEASURE/INDICATOR: Participants will have an increased knowledge about lifestyle changes, ability to maintain an active role in health care, and confidence in self-managing condition.

	Previous Year Projection	Previous Year Actual	Current Year Projection	Next Year Projection
Program Year	1/1/25-12/31/25	1/1/25-12/31/25	1/1/26-12/31/26	1/1/27-12/31/27
Total # of Participants	25	25	25	25
% Successful	95%	100%	95%	95%

OUTCOME ASSESSMENT METHODOLOGY: Program will survey participants with pre-tests and post tests to determine the effectiveness of this evidence-based wellness program.

BOARD MEMBERS: Dr. Robert McCann, Liz Vega, Lori Jansen, John Clark, Buz Code, Esq.,Bob Hartman, Michael Kaufman, Dr. Stephen Ryan, Dr. April Aycock, Dr. Marie Aydelotte, Father Michael Bausch, Vito Caraccio, Lucia Castillejo, Carmen Coleman, Tere Dominas, Ericka Elliott, Jarrett Felton, John Fornof, Dr. Ankit Garg, Tracy Greene, Cindy Lovetro, Karen LaGraff, Dr. Timothy Lum, M.D., David Mack, Travis Masonis, Corinda Reaves, Colleen Rose, Jeremy Sedelmeyer, Roberta VanWinkle

SECTION II

SOURCE MATERIAL: Annual Evaluation is on file with the Clerk of the Monroe County Legislature.

PURCHASE OF SERVICES INFORMATION FORM
Per Resolution 223 of 2007 as amended by Resolution 11 of 2008

Re: Acceptance of Funds and Authorization to Contract for Monroe County Office for the Aging Programs in 2027-28

Total served 2025 - 26: 403
Proposed $ Amt. 2027 - 28: $56,408

SECTION I

PROGRAM: Depression Screening and Intervention for Older Adults - Professional Assessment and Treatment for Homebound Seniors (PATHS) & Program to Encourage Active and Rewarding Lives for Seniors (PEARLS)

CONTRACTOR: Lifespan of Greater Rochester, Inc., Ann Marie Cook, President/CEO

PROGRAM DESCRIPTION: Program for older adults to maintain or improve upon their mental health via home visits with care managers for intensive counseling and case assistance.

PRIMARY OBJECTIVE(S)/ DELIVERABLES: Improve symptoms of depression in older adults in the community and to provide information and assistance to homebound older adults.

PRIMARY PERFORMANCE MEASURE/INDICATOR: Older adults in the program will demonstrate a decrease in depressive symptoms or symptoms of anxiety.

	Previous Year Projection	Previous Year Actual	Current Year Projection	Next Year Projection
Program Year	1/1/25-3/31/26	1/1/25-3/31/26	1/1/26-3/31/27	1/1/27-3/31/28
Total # of Participants	400	403	400	400
% Successful	90%	101%	90%	90%

OUTCOME ASSESSMENT METHODOLOGY: Standardized evaluations, i.e., Patient Health Questionnaire – 9 (PHQ-9), a depression assessment tool, the BIA Anxiety Measurement Questionnaire. Scores regarding the individual's level of depression and anxiety are determined at the open and close of each case. The scores are reviewed for accuracy. Clients entering with a score of 10 or greater on the PHQ-9 will remain the same, or increase one or more point; those entering with a score of 22 or greater on the BIA Anxiety Measurement will either maintain or improve.

BOARD MEMBERS: Dr. Robert McCann, Liz Vega, Lori Jansen, John Clark, Ralph J. Code, III, Esq., Bob Hartman, Michael Kaufman, Dr. Stephen Ryan, Dr. April Aycock, Dr. Marie Aydelotte, Michael Bausch, Vito Caraccio, Lucia Castillejo, Carmen Coleman, Tere Dominas, Ericka Elliott, Jarrett Felton, John Fornof, Dr. Ankit Garg, Tracy Greene, Cindy Lovetro, Karen LaGraff, Dr. Timothy Lum, David Mack, Travis Masonis, Corinda Reaves, Colleen Rose, Jeremy Sedelmeyer, Roberta VanWinkle

SECTION II

SOURCE MATERIAL: Annual Evaluation is on file with the Clerk of the Monroe County Legislature.

PURCHASE OF SERVICES INFORMATION FORM
Per Resolution 223 of 2007 as amended by Resolution 11 of 2008

Re: Acceptance of Funds and Authorization to Contract for Monroe County Office for the Aging Programs in 2027-28

Total served 2025 - 26: 89
Proposed $ Amt. 2027 - 28: $35,000

SECTION I

PROGRAM: Older Adult Harm Reduction Program/Recovery and Wellness Center for Older Adults

CONTRACTOR: Lifespan of Greater Rochester, Inc., Ann Marie Cook, President/CEO

PROGRAM DESCRIPTION: Program for older adults to reduce alcohol and substance abuse and addiction via home visits with care managers for intensive counseling and case assistance

PRIMARY OBJECTIVE(S)/ DELIVERABLES: Provide intervention for older adults who are misusing alcohol, prescription drugs, or other substances using care management and motivational interviewing models.

PRIMARY PERFORMANCE MEASURE/INDICATOR: Reduction of substance abuse and alcohol dependency for older adults age 60 and over.

	Previous Year Projection	Previous Year Actual	Current Year Projection	Next Year Projection
Program Year	4/1/25-3/31/26	4/1/25-3/31/26	4/1/26-3/31/27	4/1/27-3/31/28
Total # of Participants	75	89	70	70
% Successful	90%	118%	90%	90%

OUTCOME ASSESSMENT METHODOLOGY: Participants will report a decrease in the use of substances or will achieve abstinence as measured by the administration of the MAST-G evaluation instrument

BOARD MEMBERS: Dr. Robert McCann, Liz Vega, Lori Jansen, John Clark, Buz Code, Esq.,Bob Hartman, Michael Kaufman, Dr. Stephen Ryan, Dr. April Aycock, Dr. Marie Aydelotte, Father Michael Bausch, Vito Caraccio, Lucia Castillejo, Carmen Coleman, Tere Dominas, Ericka Elliott, Jarrett Felton, John Fornof, Dr. Ankit Garg, Tracy Greene, Cindy Lovetro, Karen LaGraff, Dr. Timothy Lum, M.D., David Mack, Travis Masonis, Corinda Reaves, Colleen Rose, Jeremy Sedelmeyer, Roberta VanWinkle

SECTION II

SOURCE MATERIAL: Annual Evaluation is on file with the Clerk of the Monroe County Legislature.

PURCHASE OF SERVICES INFORMATION FORM
Per Resolution 223 of 2007 as amended by Resolution 11 of 2008

Re: Acceptance of Funds and Authorization to Contract for Monroe County Office for the Aging Programs in 2027-28

Total Served 2025: 67
Proposed $ Amt. 2026: $ 20,000

SECTION I

PROGRAM: Recreation, Education and Wellness Program

CONTRACTOR: Rainbow Seniors ROC., Beth Bloom, Board President

PROGRAM DESCRIPTION: To provide LGBT+ individuals 60 years and older an opportunity to safely socialize and participate in activities to help maintain their mental and physical wellbeing

PRIMARY OBJECTIVE(S)/ DELIVERABLES: To provide LBGT + individuals sixty years old and over a place to socialize as well as participate in activities to help maintain their mental and physical well-being. Services provided through the center assist in affording participants the opportunity to remain healthy, independent and in their homes for as long as possible.

PRIMARY PERFORMANCE MEASURE/INDICATOR: Indicator of success: Total number of recreation and education units during the contract year reaches 90%.

	Previous Year Projection	Previous Year Actual	Current Year Projection	Next Year Projection
Program Year	1/1/25-12/31/25	1/1/25-12/31/25	1/1/26-12/31/26	1/1/25-12/31/25
Total # of Recreation, Education and Wellness Groups	200	290	300	325
% Successful	90%	145%	90%	95%

OUTCOME ASSESSMENT METHODOLOGY: The contractor uses the New York State Office for Aging's designated Statewide Client Data System, and the County's ContrackHQ to generate monthly and quarterly reports, annual self-evaluations, program assessments, performance measures, outcome objectives, number of people served including demographics, and units provided which measure the effectiveness and impact of the program. Participant satisfaction is collected on a regular basis.

BOARD MEMBERS: Charles Lytle, Marvin Krieger, Karrie Gates, Carol Thompson, Katy Allen, Michaela Bleier, Cory Cummings, Scott Fearing, Averill Kelly, Keith Patterson

SECTION II

SOURCE MATERIAL: Annual Evaluation is on file with the Clerk of the Monroe County Legislature.

PURCHASE OF SERVICES INFORMATION FORM
Per Resolution 223 of 2007 as amended by Resolution 11 of 2008

Re: Acceptance of Funds and Authorization to Contract for Monroe County Office for the Aging Programs in 2027-28

Total Served 2025 - 26: 778
Proposed $ Amt. 2027 - 28: $30,918

SECTION I

PROGRAM: Recreation, Education and Wellness Program (OASIS)

CONTRACTOR: Oasis Community Connections, LLC, Ann Cunningham, Director

PROGRAM DESCRIPTION: Educational, informational, cultural, health, and evidence-based programs for persons age 60 and older.

PRIMARY OBJECTIVE(S)/ DELIVERABLES: Improve or maintain mental, emotional and/or physical wellness for persons age 60 and older.

PRIMARY PERFORMANCE MEASURE/INDICATOR: Indicator of success: Successfully serve older adults via recreation and educational classes and/or events conducted annually.

	Previous Year Projection	Previous Year Actual	Current Year Projection	Next Year Projection
Program Year	4/1/25 – 3/31/26	4/1/25 – 3/31/26	4/1/26 - 3/31/27	4/1/27 - 3/31/28
# of Participants	810	778	800	800
% Successful	90%	96.04%	90%	90%

OUTCOME ASSESSMENT METHODOLOGY: Oasis Rochester uses the New York State Office for Aging's designated Statewide Client Data System, and the County's *ContrackHQ* to generate monthly and quarterly reports, annual self-evaluations, program assessments, performance measures, outcome objectives, number of people served including demographics, and units provided which measure the effectiveness and impact of the program.

SECONDARY PERFORMANCE MEASURE/INDICATOR: Indicator of success: Ninety percent (90%) of the program participants will be satisfied with the classes they partake in.

	Previous Year Projection	Previous Year Actual	Current Year Projection	Next Year Projection
Program Year	4/1/25 – 3/31/26	4/1/25 – 3/31/26	4/1/26 - 3/31/27	4/1/27 - 3/31/28
% Successful	90%	95%	90%	90%

OUTCOME ASSESSMENT METHODOLOGY: Customer satisfaction surveys are administered annually.

BOARD MEMBERS: Richard Yates, Esq., Clay Carpenter, John Barr, Mary Berk, Cindy Donovan, Rev. Kevin Gore, F. Paul Greene, Esq, Jessica Gulla, Esq, Lisa Kitko, Michael Lehman, Harry Merryman, Rev. Canon Robert Picken, Maya Temperley, Rev. Virginia Tyler Smith, Kathleen Whelehan

SECTION II

SOURCE MATERIAL: Annual Evaluation is on file with the Clerk of the Monroe County Legislature.

PURCHASE OF SERVICES INFORMATION FORM
Per Resolution 223 of 2007 as amended by Resolution 11 of 2008

Re: Acceptance of Funds and Authorization to Contract for Monroe County Office for the Aging Programs in 2027-28

Total Served 2025 - 2026: 455
Proposed $ Amt. 2027 - 28: $320,913

SECTION I

PROGRAM: Assisted Transportation

CONTRACTOR: Catholic Charities of the Diocese of Rochester, dba Catholic Charities Family and Community Services, Lori VanAuken, President & CEO

PROGRAM DESCRIPTION: Provides assisted door through door transportation, door to door basic transportation, and escorted transportation services (medical appointments, grocery stores, etc.) to frail, isolated older adults.

PRIMARY OBJECTIVE(S)/ DELIVERABLES: Increase or maintain ease of mobility outside of the home for functionally impaired older people.

PRIMARY PERFORMANCE MEASURE/INDICATOR: Indicator of Success: Increased or maintained well-being through ease of mobility outside of the home for functionally impaired older people.

	Previous Year Projection	Previous Year Actual	Current Year Projection	Next Year Projection
Program Year	4/1/25-3/31/26	4/1/25-3/31/26	4/1/26-3/31/27	4/1/27-3/31/28
Total # of Participants	350	455	350	350
% Successful	90%	130%	90%	90%

	Previous Year Projection	Previous Year Actual	Current Year Projection	Next Year Projection
Program Year	4/1/25-3/31/26	4/1/25-3/31/26	4/1/26-3/31/27	4/1/27-3/31/28
Total # of One-Way Trips	4381	4084	4519	4500
% Successful	90%	93.2%	90%	90%

OUTCOME ASSESSMENT METHODOLOGY: A self-report survey is administered to all clients who have received services for at least three months. On a five-point scale, clients rate their ease of mobility after receiving services and their satisfaction with the program.

BOARD MEMBERS: Iveth Reynolds, Roger Cordero, James Aroune, Jackie Benedetto, Berlin Bermudez, Elizabeth Ciaccio, Mary Kathryn Dappen, Mary Dombovy, Kristie Elias, Lawrence Farnand, Kristy Gonzalez, Christopher Johnson, Virgil Joseph, David Kelly, Alasdair MacKinnon, John Milazzo, Laura Purcell, Tesfamichael Yohannes

SECTION II

SOURCE MATERIAL: Annual Evaluation with previous contractor is on file with the Clerk of the Monroe County Legislature.

PURCHASE OF SERVICES INFORMATION FORM
Per Resolution 223 of 2007 as amended by Resolution 11 of 2008

Re: Acceptance of Funds and Authorization to Contract for Monroe County Office for the Aging Programs in 2027-28

Total Served 2025 - 2026: 752
Proposed $ Amt. 2027 - 28: $212,048

SECTION I

PROGRAM: In- Home Contact and Support

CONTRACTOR: Catholic Charities of the Diocese of Rochester, dba Catholic Charities Family and Community Services, Lori VanAuken, President & CEO

PROGRAM DESCRIPTION: Provides non-medical, in-home support, such as housekeeping, light chore services, home modifications, personal emergency response systems (PERS), assistive devices, and essential personal items to frail, isolated, older adults.

PRIMARY OBJECTIVE(S)/ DELIVERABLES: Increase or maintain ease of mobility outside of the home for functionally impaired older adults.

PRIMARY PERFORMANCE MEASURE/INDICATOR: Indicator of Success: Increased or maintained well-being through ease of mobility outside of the home for functionally impaired older adults.

	Previous Year Projection	Previous Year Actual	Current Year Projection	Next Year Projection
Program Year	4/1/25-3/31/26	4/1/25-3/31/26	4/1/26-3/31/27	4/1/27-3/31/28
Total # of Participants	400	752	350	350
% Successful	90%	188%	90%	90%

OUTCOME ASSESSMENT METHODOLOGY: A self-report survey is administered to all clients who have received services for at least three months. On a five-point scale, clients rate their ease of mobility after receiving services and their satisfaction with the program.

BOARD MEMBERS: Iveth Reynolds, Roger Cordero, James Aroune, Jackie Benedetto, Berlin Bermudez, Elizabeth Ciaccio, Mary Kathryn Dappen, Mary Dombovy, Kristie Elias, Lawrence Farnand, Kristy Gonzalez, Christopher Johnson, Virgil Joseph, David Kelly, Alasdair MacKinnon, John Milazzo, Laura Purcell, Tesfamichael Yohannes

SECTION II

SOURCE MATERIAL: Annual Evaluation with previous contractor is on file with the Clerk of the Monroe County Legislature.

PURCHASE OF SERVICES INFORMATION FORM
Per Resolution 223 of 2007 as amended by Resolution 11 of 2008

Re: Acceptance of Funds and Authorization to Contract for Monroe County Office for the Aging Programs in 2027-28

Proposed Contract $Amt. 2027-28: **$231,791**
Management Services $Amt 2027-28: **$34,768**

SECTION I

PROGRAM: Aging Planning & Program Services

CONTRACTOR: Coordinated Care Services, Inc. (CCSI), Anne Wilder, President

PRIMARY OBJECTIVE(S)/ DELIVERABLES: Administration of service contracts for Office for the Aging program monitors, to maintain appropriate staffing levels and ensure quality delivery of aging services. These aging programs reduce isolation, and improve the nutrition, well-being, and health of older adults in Monroe County.

PRIMARY PERFORMANCE MEASURE/INDICATOR: Indicator of success: Annual Customer Satisfaction surveys sent to the Director of the Office for the Aging will serve as an indicator, and have a cumulative score of 90% or greater.

	Previous Year Projection	Previous Year Actual	Current Year Projection	Next Year Projection
Program Year	1/1/25-3/31/26	1/1/25-3/31/26	4/1/25-3/31/26	4/1/27-3/31/28
% Successful	90%	100%	90%	90%

OUTCOME ASSESSMENT METHODOLOGY: Quarterly meetings are held between MCOFA and contracted provider to assure quality outcomes.

BOARD MEMBERS: Lekeyah Wilson, MD, Dave Seeley, Gretchen Baumer, Joseph Tobin, Jean Bezek, Donna Bradbury, Monica Brown, Gregory Byrd, Chetna Chandrakala, Kilolo Moyo-White, Christopher O'Donnell, Laura Jean Shipley, MD, Mandy Teeter, Carol Tegas, Brandy Vandermark-Murray, Sr. Christine Wagner

SECTION II

SOURCE MATERIAL: Quarterly reports are submitted and reviewed by MCOFA

PURCHASE OF SERVICES INFORMATION FORM
Per Resolution 223 of 2007 as amended by Resolution 11 of 2008

Re: Acceptance of Funds and Authorization to Contract for Monroe County Office for the Aging Programs in 2027-28

Total Served 2025: 94
Proposed $ Amt. 2027: $10,000

SECTION I

PROGRAM: Computer Training for Seniors

CONTRACTOR: Daniel Teaches

PROGRAM DESCRIPTION: Provide older adults with computer, internet and social networking skills to enhance their lives and keep them connected.

PRIMARY OBJECTIVE(S)/ DELIVERABLES: Increase the ability of older adults to use technology by learning how to operate a computer, smartphone, or tablet to help them remain connected and mitigate social isolation.

PRIMARY PERFORMANCE MEASURE/INDICATOR: Participants will have an increased knowledge of technology and are able to use a computer, smartphone, or tablet to help them remain connected. Ninety percent (90%) of the program participants will be satisfied with the instruction they receive.

	Previous Year Projection	Previous Year Actual	Current Year Projection	Next Year Projection
Program Year	1/1/25 – 12/31/25	1/1/25 – 12/31/25	1/1/26 – 12/31/26	1/1/27 – 12/31/27
% Successful	90%	98%	90%	90%

OUTCOME ASSESSMENT METHODOLOGY: Program will survey participants with a customer satisfaction survey developed by trainer & MCOFA.

BOARD MEMBERS: N/A

SECTION II

SOURCE MATERIAL: Annual Evaluation is on file with the Clerk of the Monroe County Legislature.

PURCHASE OF SERVICES INFORMATION FORM
Per Resolution 223 of 2007 as amended by Resolution 11 of 2008

Re: Acceptance of Funds and Authorization to Contract for Monroe County Office for the Aging Programs in 2027-28

Total served 2025 - 26: 1,980
Proposed $ Amt. 2027 - 28: $560,895

SECTION I

PROGRAM: Eldersource/Elderly Community Outreach (ECO)

CONTRACTOR: Lifespan of Greater Rochester, Inc., Ann Marie Cook, President/CEO

PROGRAM DESCRIPTION: Eldersource provides information, education (including public education), outreach, referral, and case assistance services to older adults and caregivers.

PRIMARY OBJECTIVE(S)/ DELIVERABLES: Information, referral, and case assistance are provided to older adults and caregivers in order for individuals to maintain or improve their independence.

PRIMARY PERFORMANCE MEASURE/INDICATOR: Increase the ability of clients to function independently and successfully by providing information, referral, assistance and coordination of services to either the care receiver or caregiver.

	Previous Year Projection	Previous Year Actual	Current Year Projection	Next Year Projection
Program Year	1/1/25-3/31/26	1/1/25-3/31/26	1/1/26-3/31/27	1/1/27-3/31/28
Total # of Units	10,357*	12,362*	9,411	9,411
% Successful	95%	119%	95%	95%

** Projection and actual numbers reflect additional Unmet Needs funding by NYS*

OUTCOME ASSESSMENT METHODOLOGY: To measure satisfaction, case managers provide each client (Older adult/Caregiver) with the appropriate satisfaction survey during the home visit.

SECONDARY PERFORMANCE MEASURE/INDICATOR: Increase the knowledge of older adults about community services and related topics through group presentations, workshops, seminars, and public education/information activities. One unit = one training/session.

	Previous Year Projection	Previous Year Actual	Current Year Projection	Next Year Projection
Program Year	1/1/25-3/31/26	1/1/25-3/31/26	1/1/26-3/31/27	1/1/27-3/31/28
Total # of Units	45	37	45	45
% Successful	95%	82%	95%	95%

OUTCOME ASSESSMENT METHODOLOGY: To measure satisfaction, presenters will provide satisfaction surveys to those who attend Public Education events.

BOARD MEMBERS: Dr. Robert McCann, Liz Vega, Lori Jansen, John Clark, Ralph J. Code, III, Esq., Bob Hartman, Michael Kaufman, Dr. Stephen Ryan, Dr. April Aycock, Dr. Marie Aydelotte, Michael Bausch, Vito Caraccio, Lucia Castillejo, Carmen Coleman, Tere Dominas, Ericka Elliott, Jarrett Felton, John Fornof, Dr. Ankit Garg, Tracy Greene, Cindy Lovetro, Karen LaGraff, Dr. Timothy Lum, David Mack, Travis Masonis, Corinda Reaves, Colleen Rose, Jeremy Sedelmeyer, Roberta VanWinkle

SECTION II

SOURCE MATERIAL: Annual Evaluation is on file with the Clerk of the Monroe County Legislature.

PURCHASE OF SERVICES INFORMATION FORM
Per Resolution 223 of 2007 as amended by Resolution 11 of 2008

Re: Acceptance of Funds and Authorization to Contract for Monroe County Office for the Aging Programs in 2027-28

Total Served 2025 - 2026:	**N/A**
Proposed $ Amt. 2027-28	**$60,000**

SECTION I

PROGRAM: Monroe County Age Friendly Implementation Plan for Older Adults

CONTRACTOR: United Way of Greater Rochester, Inc., Jaime Saunders, President/CEO

PROGRAM DESCRIPTION: This project will provide consultants to support the identification and implementation of age-friendly planning principals for interested Monroe County municipalities, to align countywide efforts with recommendations identified in the "Creating a Community for a Lifetime Action Plan." This Action Plan was developed by MCOFA and its contractors and is an investment in Monroe County's future. It provides a roadmap for strengthening economic vitality, supporting healthy aging, maximizing infrastructure investments, and enhancing quality of life for residents of all ages.

PRIMARY OBJECTIVE(S)/ DELIVERABLES: United Way, in partnership with other civically engaged partners, will facilitate the implementation of the recommendations identified in the actionable plan that promotes age-friendliness as defined by the WHO's eight domains and helps improve the health and wellness of people of all ages in Monroe County.

PERFORMANCE MEASURE/INDICATOR: Implement the recommendations identified in the "Creating a Community for a Lifetime Action Plan" based on extensive engagement by older adults, stakeholders, and AARP guidance.

	Current Year Projection
Program Year	4/1/27-3/31/28
Deliverables	**Deliverable 1:** Deliver technical assistance and planning support to interested municipalities to help develop actionable age-friendly strategies that enhance community livability, support independent aging, and strengthen local economic and social well-being. **Deliverable 2:** Produce a countywide implementation report highlighting municipal commitments, recommended actions, and best practices, creating a framework for future investments, policy development, and collaborative age-friendly initiatives across Monroe County.

OUTCOME ASSESSMENT METHODOLOGY: United Way will provide quarterly reports to MCOFA via the ContrackHQ performance outcomes measures section.

BOARD MEMBERS: Melisza Campos, Dr. Kevin Williams, Jean Ellefson, Donald Culeton, Eric Logan, Rufus Judson, Matthew Parrilli, Timothy Thaney, Jamie Saunders, Christopher Aebli, Chetna Chandrakala, Shelly Clements, Lauren Gallina Payne, Ted Jordan, Dr. Heidi Macpherson, Dr. Shaun Nelms, Ryan Pettinella, Tom Rogers, Deborah Stendardi, Beth Talia, Vincent Yacuzzo, Laurie L. Zaucha, Dan Burns, Lauren Dixon, Dave L. Fiedler, Emerson Fullwood, Fabricio Morales, John Pusloskie, Naomi Silver, Donna Shultz, Peter Robinson, Edward White, Mary O'Connell, Esq.

SECTION II

SOURCE MATERIAL: Annual Evaluation will be on file with the Clerk of the Monroe County Legislature.

PURCHASE OF SERVICES INFORMATION FORM
Per Resolution 223 of 2007 as amended by Resolution 11 of 2008

Re: Acceptance of Funds and Authorization to Contract for Monroe County Office for the Aging Programs in 2027-28

Total served 2025 - 26: 6,824
Proposed $ Amt. 2027 - 28: $801,651

SECTION I

PROGRAM: NY Connects

CONTRACTOR: Lifespan of Greater Rochester, Inc., Ann Marie Cook, President/CEO

PROGRAM DESCRIPTION: NY Connects is an essential component of the State's efforts to rebalance the long-term services and supports (LTSS) system so that people can live independently and remain at home and in their communities.

PRIMARY OBJECTIVE(S)/ DELIVERABLES: To sustain and enhance a NY Connects program that serves individuals and caregivers in need of long-term services and supports through the operation of core functions in a manner that supports their independence and self-determination.

PERFORMANCE MEASURE/INDICATOR: NY Connects will provide objective, unbiased Information and Assistance about services and supports available to consumers and caregivers to meet their identified needs.

	Previous Year Projection	Previous Year Actual	Current Year Projection	Next Year Projection
Program Year	4/1/25-3/31/26	4/1/25-3/31/26	4/1/26-3/31/27	4/1/27-3/31/28
Total # of Contacts	15,000	14,975	18,728*	15,000
% Successful	95%	99%	95%	95%

** Projection reflects program expectations with additional Unmet Needs funding by NYS.*

OUTCOME ASSESSMENT METHODOLOGY: NY Connects program will evaluate the effectiveness of the provision of Information & Assistance through the Customer Satisfaction Survey Tool.

PRIMARY OBJECTIVE(S)/ DELIVERABLES: To sustain and enhance a NY Connects program that serves individuals and caregivers in need of long-term services and supports through the public information and education.

PERFORMANCE MEASURE/INDICATOR: NY Connects will provide Public Information/Education units to relay information to the community of the various services and resources available to them. One unit = one presentation/session.

	Previous Year Projection	Previous Year Actual	Current Year Projection	Next Year Projection
Program Year	4/1/25-3/31/26	4/1/25-3/31/26	4/1/26-3/31/27	4/1/27-3/31/28
Total # of Units	20	25	20	20
% Successful	95%	125%	95%	95%

OUTCOME ASSESSMENT METHODOLOGY: NY Connects Program will evaluate the effectiveness of the provision of Public Information/Education through the Customer Satisfaction Survey Tool.

BOARD MEMBERS: Dr. Robert McCann, Liz Vega, Lori Jansen, John Clark, Buz Code, Esq.,Bob Hartman, Michael Kaufman, Dr. Stephen Ryan, Dr. April Aycock, Dr. Marie Aydelotte, Father Michael Bausch, Vito Caraccio, Lucia Castillejo, Carmen Coleman, Tere Dominas, Ericka Elliott, Jarrett Felton, John Fornof, Dr. Ankit Garg, Tracy Greene, Cindy Lovetro, Karen LaGraff, Dr. Timothy Lum, M.D., David Mack, Travis Masonis, Corinda Reaves, Colleen Rose, Jeremy Sedelmeyer, Roberta VanWinkle

SECTION II

SOURCE MATERIAL: Annual Evaluation is on file with the Clerk of the Monroe County Legislature.

PURCHASE OF SERVICES INFORMATION FORM
Per Resolution 223 of 2007 as amended by Resolution 11 of 2008

Re: Acceptance of Funds and Authorization to Contract for Monroe County Office for the Aging Programs in 2027-28

Total served 2025 - 26: 86
Proposed $ Amt. 2027 - 28: $20,000

SECTION I

PROGRAM: Information and Assistance Program

CONTRACTOR: Jewish Family Services, Deb Rosen, President/CEO

PROGRAM DESCRIPTION: Provide information and referrals to survivor benefits programs and other assistance to Holocaust survivors residing in the community.

PRIMARY OBJECTIVE(S)/ DELIVERABLES: Social workers will provide Information and Assistance to Holocaust survivors residing in the community. The Aging Care Management team will ensure that these clients are aware and connected to programs, services, and benefits to age in place.

PRIMARY PERFORMANCE MEASURE/INDICATOR: Participants will report an increase in ability to remain safely in their own home, increased social and emotional connections, and increase in knowledge and utilization of community resources.

	Previous Year Projection	Previous Year Actual	Current Year Projection	Next Year Projection
Program Year	4/1/25-3/31/26	4/1/25-3/31/26	4/1/26-3/31/27	4/1/27-3/31/28
Total # of Participants	76	86	76	76
% Successful	95%	113%	95%	95%

OUTCOME ASSESSMENT METHODOLOGY: Program will survey participants to determine overall satisfaction with the program.

BOARD MEMBERS: Stuart Baker, Fatima Banister, Debi Brenner, Debbie Gordon, Monica Gurell, Alex Gurevich, Michalene Kinsler, Steve Levinson, Elizabeth Meeker, David Mirsky, Tobie Olsan, Ellen Poleshuck, Eva Pressman, Sarabeth Rogoff, Doug Rose, Joshua Sankowski, Marc Solomon, Camille Verbofsky, Lisa Waltzer, Jamie Warren

SECTION II

SOURCE MATERIAL: Annual Evaluation is on file with the Clerk of the Monroe County Legislature.

PURCHASE OF SERVICES INFORMATION FORM
Per Resolution 223 of 2007 as amended by Resolution 11 of 2008

Re: Acceptance of Funds and Authorization to Contract for Monroe County Office for the Aging Programs in 2027-28

Total Served 2025-26: 524
Proposed $ Amt. 2027-28: $190,841

SECTION I

PROGRAM: Legal Services for the Elderly

CONTRACTOR: Legal Assistance of Western New York, Inc., Lori M. O'Brien, Esq. Executive Director

PROGRAM DESCRIPTION: A legal support program intended to decrease the frequency of low-income older adults living in poverty through legal representation to obtain or maintain entitlement benefits including Public Assistance, Medicaid, Medicare, Supplement Nutrition Assistance Program benefits, pensions, Social Security and Veterans' benefits.

PRIMARY OBJECTIVE(S)/ DELIVERABLES: To increase the ability of older adults to protect and manage their assets, including the establishment and enforcement of supplemental needs trusts, simple wills, advance directives, and legal representation and referrals in foreclosures, predatory lending practices, debtor/creditor and other consumer matters. Low-income seniors will increase their financial resources and/or improve asset management.

PRIMARY PERFORMANCE MEASURE/INDICATOR: Seniors in need of legal information, advice, or representation will receive appropriate and competent legal services, resulting in increased mental and emotional well-being. Seniors with housing, consumer, health, or income maintenance issues receive advice, referrals, litigation, and advocacy services to increase/maintain their mental and emotional health

	Previous Year Projection	Previous Year Actual	Current Year Projection	Next Year Projection
Program Year	1/1/25 - 3/31/26	1/1/25 - 3/31/26	4/1/26 -3/31/27	4/1/27 -3/31/28
Total # of Participants	450	524	450	450
% Successful	90%	116.44%	90%	90%

OUTCOME ASSESSMENT METHODOLOGY: Closing codes and client satisfaction questionnaires: LawNY case management system allows for tracking problem type and outcomes over 120 categories for clients and case closing. All increases in income and benefits that are the result of legal advice and representation are recorded. Client outcomes are collected for all clients served in court or administrative representation. The advocate indicates which client goals were met. Client satisfaction questionnaires are sent out at the close of each case and client responses are tabulated.

BOARD MEMBERS: Mary Brown, Milagros Cartagena-Cook, John M. Carey, Esq., Aimee Churchill, Barbara Cole, Carmen Cortes, Marlene Cortes, Willie Ellis, Steven Foss, Esq., Lucas Froelich, Esq., James Garmhausen, Deirdre Hay, Esq. Lisa Reagan, Jeffrey M. Reed, Matthea Ross, Esq., Kevin Ryan, Esq., Loraine Schoenfield, Jessica Simon, Esq., Elaine Spaull, Esq., William Thew, Esq., Sarah Tufano, Yvonne Wade, Marcy E. Wehling, Esq.

SECTION II

SOURCE MATERIAL: Annual Evaluation is on file with the Clerk of the Monroe County Legislature.

PURCHASE OF SERVICES INFORMATION FORM
Per Resolution 223 of 2007 as amended by Resolution 11 of 2008

Re: Acceptance of Funds and Authorization to Contract for Monroe County Office for the Aging Programs in 2027-28

Total Served 2025 - 2026: 888
Proposed $ Amt. 2027- 28: $ 1,916,700

SECTION I

PROGRAM: Home Delivered Meals

CONTRACTOR: UR Medicine Home Care, Community Services, Inc., Greg Hutton, President

PROGRAM DESCRIPTION: One or two meals per day are provided to persons aged 60 and over who are homebound due to illness or disability and who are unable to prepare their own meals. Meals are available five days per week with provisions for weekend meals if needed. The primary objective is to increase the level of independence in the daily living of a frail, elderly participant who receives "Meals on Wheels."

PRIMARY OBJECTIVE(S)/ DELIVERABLES: Individuals will increase their level of independence through receipt of home delivered meals.

PRIMARY PERFORMANCE MEASURE/INDICATOR: Individuals receiving services will report higher levels of independence as a result of receiving home delivered meals (under this funding source)

	Previous Year Projection	Previous Year Actual	Current Year Projection	Next Year Projection
Program Year	1/1/25-3/31/26	1/1/25-3/31/26	1/1/26-3-/31/27	4/1/27-3/31/28
Total # of Participants	530	888	700	700
% Successful	90%	95%	95%	95%

SECONDARY PERFORMANCE MEASURE/ INDICATOR

	Previous Year Projection	Previous Year Actual	Current Year Projection	Next Year Projection
Program Year	1/1/25-3/31/26	1/1/25-3/31/26	1/1/26-3-/31/27	4/1/27-3/31/28
Total # of Meals Served	165,971	210,188	135,224	174,968
% Successful	90%	96%	90%	90%

OUTCOME ASSESSMENT METHODOLOGY: The contractor uses the New York State Office for Aging's designated Statewide Client Data System, and the County's ContrackHQ to generate monthly and quarterly reports, annual self-evaluations, program assessments, performance measures, outcome objectives, number of people served including demographics, and units provided which measure the effectiveness and impact of the program. Participant satisfaction is collected on a regular basis.

BOARD MEMBERS: Dr. Kate Ackerman, Timothy Ashe, Taletha Best, Adam Cardina, Dr. Angelique Cohen, Dr. James Dickson II, Dr. Jason Feinberg, Dr. Steve Goldstein Ex Officio, Barbara Gray, Ann Harrington, Christy Houde, Diana Kurty, David Lipari, Dr. Dallas Nelson, Mark Prunoske, Alan Resnick, Patricia Rissone, Hazel Robertshaw PHD RN, Deborah Rosen, Kathleen Whelehan, Walt Winiarczyk

SECTION II

SOURCE MATERIAL: Annual Evaluation is on file with the Clerk of the Monroe County Legislature.

PURCHASE OF SERVICES INFORMATION FORM
Per Resolution 223 of 2007 as amended by Resolution 11 of 2008

Re: Acceptance of Funds and Authorization to Contract for Monroe County Office for the Aging Programs in 2027-28

Total Meals Served 2025 - 26: **90,530**
Proposed $ Amt. 2027 - 2028: **$495,728**

SECTION I

PROGRAM: Catering Services for the Congregate Nutrition Program

CONTRACTOR: Foodlink, Inc. – Julia Tedesco, President & CEO

PROGRAM DESCRIPTION: Preparation, delivery, and catering services for the Monroe County Office for the Aging Nutrition Programs congregate meal program for area senior centers and other special events.

PRIMARY OBJECTIVE(s)/ DELIVERABLES: Seniors enjoy a nutritious, safe, appealing, appetizing and satisfying meal. Improve or maintain the nutritional health for persons age 60 and older.

PRIMARY PERFORMANCE MEASURE/INDICATOR: Indicator of Success: Accurate delivery of meals to the meal sites, based on the number of meals ordered and quantity of food delivered

	Previous Actual Year	Current Year Projection	Next Year Projection
Program Year	7/1/25-3/31/26	1/1/26-3/31/27	1/1/27-3/31/28
Accurate delivery of meals to the meal sites	98%	95%	90%

OUTCOME ASSESSMENT METHODOLOGY: The contractor uses the New York State Office for Aging's designated Statewide Client Data System, and the County's ContrackHQ to generate monthly and quarterly reports, annual self-evaluations, program assessments, performance measures, outcome objectives, number of people served including demographics, and units provided which measure the effectiveness and impact of the program.

SECONDARY PERFORMANCE MEASURE/INDICATOR: Indicator of Success: 90% of the program participants are satisfied with the Nutrition Program

	Previous Year Actual	Current Year Projection	Next Year Projection
Program Year	1/1/25-3/31/26	1/1/26-3/31/27	1/1/27-3/31/28
Total # of Participants Surveyed	600	600	600
% Successful	85.18%	90%	90%

*MCOFA conducts this survey annually. The data includes satisfaction data for the previous vendor too.

BOARD MEMBERS: Bonnie DeVinney, Orlando Ortiz, Nada Debbaghi, Meghan DiPasquale, Aaron Bertram, Kimberly Braithwaite, Luis Burgos, Bobby Colon, Carey Corea, Courtney Cotrupe, Molly Cummings, Sarah DePeters, Tonya Dickerson, Garth Hankinson, Norman Jones, Nichole Malec-Huss, Samantha Nickerson Meghan Schubmehl, Kristian Walker, Dr. Edith Williams, Robert Williams, Fernando Santiago, Joseph Casion, James Grossman, Arline Santiago, Julie Camardo, Tom Kane, Loren Flaum

SECTION II

SOURCE MATERIAL: Annual Evaluation with previous contractor is on file with the Clerk of the Monroe County Legislature.

PURCHASE OF SERVICES INFORMATION FORM
Per Resolution 223 of 2007 as amended by Resolution 11 of 2008

Re: Acceptance of Funds and Authorization to Contract for Monroe County Office for the Aging Programs in 2027-28

Total Served 2025 - 2026: **50**
Proposed $ Amt. 2027 – 28: **$ 52,904**

SECTION I

PROGRAM: MARC of Baden

CONTRACTOR: Baden Street Settlement of Rochester, Inc., Ron Thomas Executive Director

PROGRAM DESCRIPTION: The senior centers sponsored by the Office for the Aging serve as nutrition sites and provide programming and opportunities for socialization.

PRIMARY OBJECTIVE(S)/ DELIVERABLES: To provide individuals age 60 and older a balanced meal, as well as a place to socialize and participate in activities to help maintain their mental and physical well-being. Services provided through the center afford participants the opportunity to remain healthy, independent and in their homes for as long as possible.

PRIMARY PERFORMANCE MEASURE/INDICATOR: Indicator of success: Eligible meals served to older adults age 60 and older; eligible meals are also considered for eligible older adult's spouses and their disabled and dependent children, as well as volunteers at the center.

	Previous Year Projection	Previous Year Actual	Current Year Projection	Next Year Projection
Time frame	4/1/25-3/31/26	4/1/25-3/31/26	4/1/26-3/31/27	4/1/27-3/31/28
Eligible Meals Served	2,600	3,883	4,000	4,300
% Successful	90%	149%	90%	90%

** Due to this center's kitchen set up, to-go meals are served.*

OUTCOME ASSESSMENT METHODOLOGY: The contractor uses the New York State Office for Aging's designated Statewide Client Data System, and the County's ContrackHQ to generate monthly and quarterly reports, annual self-evaluations, program assessments, performance measures, outcome objectives, number of people served including demographics, and units provided which measure the effectiveness and impact of the program. Participant satisfaction is collected on a regular basis.

BOARD MEMBERS: Tyrese Bryant, Katie Norman, Yvonne Lewis McDonald, Garrett MacDonald, Scott Adair, Jon Alhart, Jacob Ark, Albert Burke, Jeffery Clark, Robert Gavin, Bill May, Dr. Arlette Miller-Smith, Pastor Frank Ross, Rhashard Watkins, Tae'lor Jackson, Paul Chechak, Nancy Frank, June Huber, Wade Norwood, Dr. Telva Olivares, Wilfred Shrouder, Thomas Stewart

SECTION II

SOURCE MATERIAL: Annual Evaluation is on file with the Clerk of the Monroe County Legislature.

PURCHASE OF SERVICES INFORMATION FORM
Per Resolution 223 of 2007 as amended by Resolution 11 of 2008

Re: Acceptance of Funds and Authorization to Contract for Monroe County Office for the Aging Programs in 2027-28

Total Served 2025 - 2026: 30
Proposed $ Amt. 2027 - 28: $ 100,255

SECTION I

PROGRAM: Charles Settlement House Senior Center & Dunn Towers

CONTRACTOR: Charles Settlement House, Inc., Scott Benjamin, Executive Director

PROGRAM DESCRIPTION: The senior centers sponsored by the Office for the Aging serve as nutrition sites and provide programming and opportunities for socialization.

PRIMARY OBJECTIVE(S)/ DELIVERABLES: To provide individuals age 60 and older a balanced meal, as well as a place to socialize and participate in activities to help maintain their mental and physical well-being. Services provided through the center afford participants the opportunity to remain healthy, independent and in their homes for as long as possible.

PRIMARY PERFORMANCE MEASURE/INDICATOR: Indicator of success: Eligible meals served to older adults age 60 and older; eligible meals are also considered for eligible older adult's spouses and their disabled and dependent children, as well as volunteers at the center.

	Previous Year Projection	Previous Year Actual	Current Year Projection	Next Year Projection
Time frame	4/1/25-3/31/26	4/1/25-3/31/26	4/1/26-3/31/27	4/1/27-3/31/28
Eligible Meals Served	5,200	6,146	8,437*	7,500
% Successful	90%	118%	90%	90%

** Dunn Towers meals were reopened November 2025 and closed August 2026.*

OUTCOME ASSESSMENT METHODOLOGY: The contractor uses the New York State Office for Aging's designated Statewide Client Data System, and the County's ContrackHQ to generate monthly and quarterly reports, annual self-evaluations, program assessments, performance measures, outcome objectives, number of people served including demographics, and units provided which measure the effectiveness and impact of the program. Participant satisfaction is collected on a regular basis.

BOARD MEMBERS: Rick Nangreave, David Toole, Ian McLeod, James Hawkins, Kevin Loughran, Luis Aponte, Devra Bevona, Bethany Centrone, Glenn Gardner, Laura Habza, Walter Larkin, Tina Longwell, Peter Maurer, John H. Olsan, Gita Ramachandran, Linda Walsh, Andrew Burke, Ross Lanzafame, Arthur W. Maurer, Dorothy Pecoraro

SECTION II

SOURCE MATERIAL: Annual Evaluation is on file with the Clerk of the Monroe County Legislature.

PURCHASE OF SERVICES INFORMATION FORM
Per Resolution 223 of 2007 as amended by Resolution 11 of 2008

Re: Acceptance of Funds and Authorization to Contract for Monroe County Office for the Aging Programs in 2027-28

Total Served 2025: 87
Proposed $ Amt. 2027: $ 46,141

SECTION I

PROGRAM: Chili Senior Center

CONTRACTOR: Town of Chili

PROGRAM DESCRIPTION: The senior centers sponsored by the Office for the Aging serve as nutrition sites and provide programming and opportunities for socialization.

PRIMARY OBJECTIVE(S)/ DELIVERABLES: To provide individuals age 60 and older a balanced meal, as well as a place to socialize and participate in activities to help maintain their mental and physical well-being. Services provided through the center afford participants the opportunity to remain healthy, independent and in their homes for as long as possible.

PRIMARY PERFORMANCE MEASURE/INDICATOR: Indicator of success: Eligible meals served to older adults age 60 and older; eligible meals are also considered for eligible older adult's spouses and their disabled and dependent children, as well as volunteers at the center.

	Previous Year Projection	Previous Year Actual	Current Year Projection	Next Year Projection
Time frame	1/1/25-12/31/25	1/1/25-12/31/25	1/1/26-12/31/26	1/1/27-12/31/27
Eligible Meals Served	2,600	1,923*	2,200	2,500
% Successful	90%	74%	90%	90%

** This center served one day of breakfast and one day of lunch in 2025, switching to two hot weekly lunches in September 2026.*

OUTCOME ASSESSMENT METHODOLOGY: The contractor uses the New York State Office for Aging's designated Statewide Client Data System, and the County's ContrackHQ to generate monthly and quarterly reports, annual self-evaluations, program assessments, performance measures, outcome objectives, number of people served including demographics, and units provided which measure the effectiveness and impact of the program. Participant satisfaction is collected on a regular basis.

SECTION II

SOURCE MATERIAL: Annual Evaluation is on file with the Clerk of the Monroe County Legislature.

PURCHASE OF SERVICES INFORMATION FORM
Per Resolution 223 of 2007 as amended by Resolution 11 of 2008

Re: Acceptance of Funds and Authorization to Contract for Monroe County Office for the Aging Programs in 2027-28

Total Served 2025 - 2026: 59
Proposed $ Amt. 2027 - 28: $ 71,210

SECTION I

PROGRAM: Community Place Senior Center

CONTRACTOR: The Community Place of Greater Rochester, Inc., Scott Benjamin, Executive Director

PROGRAM DESCRIPTION: The senior centers sponsored by the Office for the Aging serve as nutrition sites and provide programming and opportunities for socialization.

PRIMARY OBJECTIVE(S)/ DELIVERABLES: To provide individuals age 60 and older a balanced meal, as well as a place to socialize and participate in activities to help maintain their mental and physical well-being. Services provided through the center afford participants the opportunity to remain healthy, independent and in their homes for as long as possible.

PRIMARY PERFORMANCE MEASURE/INDICATOR: Indicator of success: Eligible meals served to older adults age 60 and older; eligible meals are also considered for eligible older adult's spouses and their disabled and dependent children, as well as volunteers at the center.

	Previous Year Projection	Previous Year Actual	Current Year Projection	Next Year Projection
Time frame	4/1/25-3/31/26	4/1/25-3/31/26	4/1/26-3/31/27	4/1/27-3/31/28
Eligible Meals Served	4,500	6,021	6,900	5,800
% Successful	90%	134%	90%	90%

OUTCOME ASSESSMENT METHODOLOGY: The contractor uses the New York State Office for Aging's designated Statewide Client Data System, and the County's ContrackHQ to generate monthly and quarterly reports, annual self-evaluations, program assessments, performance measures, outcome objectives, number of people served including demographics, and units provided which measure the effectiveness and impact of the program. Participant satisfaction is collected on a regular basis.

BOARD MEMBERS: Rick Nangreave, David Toole, Ian McLeod, James Hawkins, Kevin Loughran, Luis Aponte, Devra Bevona, Bethany Centrone, Glenn Gardner, Laura Habza, Walter Larkin, Tina Longwell, Peter Maurer, John H. Olsan, Gita Ramachandran, Linda Walsh, Andrew Burke, Ross Lanzafame, Arthur W. Maurer, Dorothy Pecoraro

SECTION II

SOURCE MATERIAL: Annual Evaluation is on file with the Clerk of the Monroe County Legislature.

PURCHASE OF SERVICES INFORMATION FORM
Per Resolution 223 of 2007 as amended by Resolution 11 of 2008

Re: Acceptance of Funds and Authorization to Contract for Monroe County Office for the Aging Programs in 2027-28

Total Served 2025: 101
Proposed $ Amt. 2027: $ 60,437

SECTION I

PROGRAM: Gates Senior Center

CONTRACTOR: Town of Gates

PROGRAM DESCRIPTION: This meal site sponsored by the Office for the Aging provides meals for adults aged 60 and over.

PRIMARY OBJECTIVE(S)/ DELIVERABLES: To provide individuals age 60 and older a balanced meal, as well as a place to socialize and participate in activities to help maintain their mental and physical well-being. Services provided through the center afford participants the opportunity to remain healthy, independent and in their homes for as long as possible.

PRIMARY PERFORMANCE MEASURE/INDICATOR: Indicator of success: Eligible meals served to older adults age 60 and older; eligible meals are also considered for eligible older adult's spouses and their disabled and dependent children, as well as volunteers at the center.

	Previous Year Projection	Previous Year Actual	Current Year Projection	Next Year Projection
Time frame	1/1/25-12/31/25	1/1/25-12/31/25	1/1/26-12/31/26	1/1/27-12/31/27
Eligible Meals Served	5,250	5,256	6,000	6,000
% Successful	90%	100%	90%	90%

OUTCOME ASSESSMENT METHODOLOGY: The contractor uses the New York State Office for Aging's designated Statewide Client Data System, and the County's ContrackHQ to generate monthly and quarterly reports, annual self-evaluations, program assessments, performance measures, outcome objectives, number of people served including demographics, and units provided which measure the effectiveness and impact of the program. Participant satisfaction is collected on a regular basis.

SECTION II

SOURCE MATERIAL: Annual Evaluation is on file with the Clerk of the Monroe County Legislature.

PURCHASE OF SERVICES INFORMATION FORM
Per Resolution 223 of 2007 as amended by Resolution 11 of 2008

Re: Acceptance of Funds and Authorization to Contract for Monroe County Office for the Aging Programs in 2027-28

Total Served 2025: 112
Proposed $ Amt. 2027: $ 74,725

SECTION I

PROGRAM: Greece Community & Senior Center

CONTRACTOR: Town of Greece

PROGRAM DESCRIPTION: The senior centers sponsored by the Office for the Aging serve as nutrition sites and provide programming and opportunities for socialization.

PRIMARY OBJECTIVE(S)/ DELIVERABLES: To provide individuals age 60 and older a balanced meal, as well as a place to socialize and participate in activities to help maintain their mental and physical well-being. Services provided through the center afford participants the opportunity to remain healthy, independent and in their homes for as long as possible.

PRIMARY PERFORMANCE MEASURE/INDICATOR: Indicator of success: Eligible meals served to older adults age 60 and older; eligible meals are also considered for eligible older adult's spouses and their disabled and dependent children, as well as volunteers at the center.

	Previous Year Projection	Previous Year Actual	Current Year Projection	Next Year Projection
Time frame	1/1/25-12/31/25	1/1/25-12/31/25	1/1/26-12/31/26	1/1/27-12/31/27
Eligible Meals Served	7,700	8,017	8,500	9,000
% Successful	90%	104%	90%	90%

OUTCOME ASSESSMENT METHODOLOGY: The contractor uses the New York State Office for Aging's designated Statewide Client Data System, and the County's ContrackHQ to generate monthly and quarterly reports, annual self-evaluations, program assessments, performance measures, outcome objectives, number of people served including demographics, and units provided which measure the effectiveness and impact of the program. Participant satisfaction is collected on a regular basis.

SECTION II

SOURCE MATERIAL: Annual Evaluation is on file with the Clerk of the Monroe County Legislature.

PURCHASE OF SERVICES INFORMATION FORM
Per Resolution 223 of 2007 as amended by Resolution 11 of 2008

Re: Acceptance of Funds and Authorization to Contract for Monroe County Office for the Aging Programs in 2027-28

Total Served 2025: 474
Proposed $ Amt. 2027: $ 144,275

SECTION I

PROGRAM: Henrietta Senior Center, Don Cook Senior Center

CONTRACTOR: Town of Henrietta

PROGRAM DESCRIPTION: The senior centers sponsored by the Office for the Aging serve as nutrition sites and provide programming and opportunities for socialization.

PRIMARY OBJECTIVE(S)/ DELIVERABLES: To provide individuals age 60 and older a balanced meal, as well as a place to socialize and participate in activities to help maintain their mental and physical well-being. Services provided through the center afford participants the opportunity to remain healthy, independent and in their homes for as long as possible.

PRIMARY PERFORMANCE MEASURE/INDICATOR: Indicator of success: Eligible meals served to older adults age 60 and older; eligible meals are also considered for eligible older adult's spouses and their disabled and dependent children, as well as volunteers at the center.

	Previous Year Projection	Previous Year Actual	Current Year Projection	Next Year Projection
Time frame	1/1/25-12/31/25	1/1/25-12/31/25	1/1/26-12/31/26	1/1/27-12/31/27
Eligible Meals Served	14,300	16,657	17,400	17,400
% Successful	90%	116%	90%	90%

OUTCOME ASSESSMENT METHODOLOGY: The contractor uses the New York State Office for Aging's designated Statewide Client Data System, and the County's ContrackHQ to generate monthly and quarterly reports, annual self-evaluations, program assessments, performance measures, outcome objectives, number of people served including demographics, and units provided which measure the effectiveness and impact of the program. Participant satisfaction is collected on a regular basis.

SECTION II

SOURCE MATERIAL: Annual Evaluation is on file with the Clerk of the Monroe County Legislature.

PURCHASE OF SERVICES INFORMATION FORM
Per Resolution 223 of 2007 as amended by Resolution 11 of 2008

Re: Acceptance of Funds and Authorization to Contract for Monroe County Office for the Aging Programs in 2027-28

Total Served 2025 - 2026: 63
Proposed $ Amt. 2027 - 28: $ 135,179

SECTION I

PROGRAM: Centro De Oro Senior Center

CONTRACTOR: IBERO-American Action League, Inc., Angelica Perez-Delgado, President/CEO

PROGRAM DESCRIPTION: The senior centers sponsored by the Office for the Aging serve as nutrition sites and provide programming and opportunities for socialization.

PRIMARY OBJECTIVE(S)/ DELIVERABLES: To provide individuals age 60 and older a balanced meal, as well as a place to socialize and participate in activities to help maintain their mental and physical well-being. Services provided through the center afford participants the opportunity to remain healthy, independent and in their homes for as long as possible.

PRIMARY PERFORMANCE MEASURE/INDICATOR: Indicator of success: Eligible meals served to older adults age 60 and older; eligible meals are also considered for eligible older adult's spouses and their disabled and dependent children, as well as volunteers at the center.

	Previous Year Projection	Previous Year Actual	Current Year Projection	Next Year Projection
Time frame	4/1/25-3/31/26	4/1/25-3/31/26	4/1/26-3/31/27	4/1/27-3/31/28
Eligible Meals Served	18,400	13,194	15,000	14,500
% Successful	90%	72%	90%	90%

OUTCOME ASSESSMENT METHODOLOGY: The contractor uses the New York State Office for Aging's designated Statewide Client Data System, and the County's ContrackHQ to generate monthly and quarterly reports, annual self-evaluations, program assessments, performance measures, outcome objectives, number of people served including demographics, and units provided which measure the effectiveness and impact of the program. Participant satisfaction is collected on a regular basis.

BOARD MEMBERS: Arline Santiago, Victor Sanchez, Milagros Concepcion, Yalitza Torres, Christie Smith, James Sutton, Emeterio Otero, Thomas J. Hernandez, Berta Rivera, Lisa Medina

SECTION II

SOURCE MATERIAL: Annual Evaluation is on file with the Clerk of the Monroe County Legislature.

PURCHASE OF SERVICES INFORMATION FORM
Per Resolution 223 of 2007 as amended by Resolution 11 of 2008

Re: Acceptance of Funds and Authorization to Contract for Monroe County Office for the Aging Programs in 2027-28

Total Served 2025: 49
Proposed $ Amt. 2027: $ 92,154

SECTION I

PROGRAM: Irondequoit Senior Center

CONTRACTOR: Town of Irondequoit

PROGRAM DESCRIPTION: The senior centers sponsored by the Office for the Aging serve as nutrition sites and provide programming and opportunities for socialization.

PRIMARY OBJECTIVE(S)/ DELIVERABLES: To provide individuals age 60 and older a balanced meal, as well as a place to socialize and participate in activities to help maintain their mental and physical well-being. Services provided through the center afford participants the opportunity to remain healthy, independent and in their homes for as long as possible.

PRIMARY PERFORMANCE MEASURE/INDICATOR: Indicator of success: Eligible meals served to older adults age 60 and older; eligible meals are also considered for eligible older adult's spouses and their disabled and dependent children, as well as volunteers at the center.

	Previous Year Projection	Previous Year Actual	Current Year Projection	Next Year Projection
Time frame	1/1/25-12/31/25	1/1/25-12/31/25	1/1/26-12/31/26	1/1/27-12/31/27
Eligible Meals Served	6,400	6,980	7,500	8,000
% Successful	90%	109%	90%	90%

OUTCOME ASSESSMENT METHODOLOGY: The contractor uses the New York State Office for Aging's designated Statewide Client Data System, and the County's ContrackHQ to generate monthly and quarterly reports, annual self-evaluations, program assessments, performance measures, outcome objectives, number of people served including demographics, and units provided which measure the effectiveness and impact of the program. Participant satisfaction is collected on a regular basis.

SECTION II

SOURCE MATERIAL: Annual Evaluation is on file with the Clerk of the Monroe County Legislature.

PURCHASE OF SERVICES INFORMATION FORM
Per Resolution 223 of 2007 as amended by Resolution 11 of 2008

Re: Acceptance of Funds and Authorization to Contract for Monroe County Office for the Aging Programs in 2027-28

Total Served 2025: 287
Proposed $ Amt. 2027: $ 130,140

SECTION I

PROGRAM: Lifespan Wolk Senior Center Downtown

CONTRACTOR: Lifespan of Greater Rochester, Inc., Ann Marie Cook, President/CEO

PROGRAM DESCRIPTION: The senior centers sponsored by the Office for the Aging serve as nutrition sites and provide programming and opportunities for socialization.

PRIMARY OBJECTIVE(S)/ DELIVERABLES: To provide individuals age 60 and older a balanced meal, as well as a place to socialize and participate in activities to help maintain their mental and physical well-being. Services provided through the center afford participants the opportunity to remain healthy, independent and in their homes for as long as possible.

PRIMARY PERFORMANCE MEASURE/INDICATOR: Indicator of success: Eligible meals served to older adults age 60 and older; eligible meals are also considered for eligible older adult's spouses and their disabled and dependent children, as well as volunteers at the center.

	Previous Year Projection	Previous Year Actual	Current Year Projection	Next Year Projection
Time frame	1/1/25-12/31/25	1/1/25-12/31/25	1/1/26-12/31/26	1/1/27-12/31/27
Eligible Meals Served	7,800	8,653	8,500	9,450
% Successful	90%	111%	90%	90%

OUTCOME ASSESSMENT METHODOLOGY: The contractor uses the New York State Office for Aging's designated Statewide Client Data System, and the County's ContrackHQ to generate monthly and quarterly reports, annual self-evaluations, program assessments, performance measures, outcome objectives, number of people served including demographics, and units provided which measure the effectiveness and impact of the program. Participant satisfaction is collected on a regular basis.

BOARD MEMBERS: Dr. Robert McCann, Liz Vega, Lori Jansen, John Clark, Ralph J. Code, III, Esq., Bob Hartman, Michael Kaufman, Dr. Stephen Ryan, Dr. April Aycock, Dr. Marie Aydelotte, Father Michael Bausch, Vito Caraccio, Lucia Castillejo, Carmen Coleman, Tere Dominas, Ericka Elliott, Jarrett Felton, John Fornof, Dr. Ankit Garg, Tracy Greene, Cindy Lovetro, Karen LaGraff, Dr. Timothy Lum, David Mack, Travis Masonis, Corinda Reaves, Colleen Rose, Jeremy Sedelmeyer, Roberta VanWinkle

SECTION II

SOURCE MATERIAL: Annual Evaluation is on file with the Clerk of the Monroe County Legislature.

PURCHASE OF SERVICES INFORMATION FORM
Per Resolution 223 of 2007 as amended by Resolution 11 of 2008

Re: Acceptance of Funds and Authorization to Contract for Monroe County Office for the Aging Programs in 2027-28

Total Served 2025: 255
Proposed $ Amt. 2027: $ 51,098

SECTION I

PROGRAM: Lifespan Lily Café Senior Center

CONTRACTOR: Lifespan of Greater Rochester, Inc., Ann Marie Cook, President/CEO

PROGRAM DESCRIPTION: The senior centers sponsored by the Office for the Aging serve as nutrition sites and provide programming and opportunities for socialization.

PRIMARY OBJECTIVE(S)/ DELIVERABLES: To provide individuals age 60 and older a balanced meal, as well as a place to socialize and participate in activities to help maintain their mental and physical well-being. Services provided through the center afford participants the opportunity to remain healthy, independent and in their homes for as long as possible.

PRIMARY PERFORMANCE MEASURE/INDICATOR: Indicator of success: Eligible meals served to older adults age 60 and older; eligible meals are also considered for eligible older adult's spouses and their disabled and dependent children, as well as volunteers at the center.

	Previous Year Projection	Previous Year Actual	Current Year Projection	Next Year Projection
Time frame	1/1/25-12/31/25	1/1/25-12/31/25	1/1/26-12/31/26	1/1/27-12/31/27
Eligible Meals Served	5,200	5,238	5,500	5,900
% Successful	90%	101%	90%	90%

OUTCOME ASSESSMENT METHODOLOGY: The contractor uses the New York State Office for Aging's designated Statewide Client Data System, and the County's ContrackHQ to generate monthly and quarterly reports, annual self-evaluations, program assessments, performance measures, outcome objectives, number of people served including demographics, and units provided which measure the effectiveness and impact of the program. Participant satisfaction is collected on a regular basis.

BOARD MEMBERS: Dr. Robert McCann, Liz Vega, Lori Jansen, John Clark, Ralph J. Code, III, Esq., Bob Hartman, Michael Kaufman, Dr. Stephen Ryan, Dr. April Aycock, Dr. Marie Aydelotte, Father Michael Bausch, Vito Caraccio, Lucia Castillejo, Carmen Coleman, Tere Dominas, Ericka Elliott, Jarrett Felton, John Fornof, Dr. Ankit Garg, Tracy Greene, Cindy Lovetro, Karen LaGraff, Dr. Timothy Lum, David Mack, Travis Masonis, Corinda Reaves, Colleen Rose, Jeremy Sedelmeyer, Roberta VanWinkle

SECTION II

SOURCE MATERIAL: Annual Evaluation is on file with the Clerk of the Monroe County Legislature.

PURCHASE OF SERVICES INFORMATION FORM
Per Resolution 223 of 2007 as amended by Resolution 11 of 2008

Re: Acceptance of Funds and Authorization to Contract for Monroe County Office for the Aging Programs in 2027-28

Total Served 2025: 30
Proposed $ Amt. 2027: $20,000

SECTION I

PROGRAM: Lifetime Assistance (Sweden Senior Center)

CONTRACTOR: Lifetime Assistance, Inc., Bryan O'Donovan, President and CEO

PROGRAM DESCRIPTION: The senior centers sponsored by the Office for the Aging serve as nutrition sites and provide programming and opportunities for socialization.

PRIMARY OBJECTIVE(S)/ DELIVERABLES: To provide individuals age 60 and older a balanced meal, as well as a place to socialize and participate in activities to help maintain their mental and physical well-being. Services provided through the center afford participants the opportunity to remain healthy, independent and in their homes for as long as possible.

PRIMARY PERFORMANCE MEASURE/INDICATOR: Indicator of success: Eligible meals served to older adults age 60 and older; eligible meals are also considered for eligible older adult's spouses and their disabled and dependent children, as well as volunteers at the center.

	Previous Year Projection	Previous Year Actual	Current Year Projection	Next Year Projection
Time frame	1/1/25-12/31/25	1/1/25-12/31/25	1/1/26-12/31/26	1/1/27-12/31/27
Eligible Meals Served	3,800	3,681	4,000	4,200
% Successful	90%	76%	90%	90%

OUTCOME ASSESSMENT METHODOLOGY: The contractor uses the New York State Office for Aging's designated Statewide Client Data System, and the County's ContrackHQ to generate monthly and quarterly reports, annual self-evaluations, program assessments, performance measures, outcome objectives, number of people served including demographics, and units provided which measure the effectiveness and impact of the program. Participant satisfaction is collected on a regular basis.

BOARD MEMBERS: Thomas Smithgal, Don Furey, Mary Squires, Cathy Houston-Wilson, Anita Green, Rita Wagner, Anna Korus, Lori Klafehn, Christine McKinley, JulieAnn Warner, James Tobin, Gerald Cox

SECTION II

SOURCE MATERIAL: Annual Evaluation is on file with the Clerk of the Monroe County Legislature.

PURCHASE OF SERVICES INFORMATION FORM
Per Resolution 223 of 2007 as amended by Resolution 11 of 2008

Re: Acceptance of Funds and Authorization to Contract for Monroe County Office for the Aging Programs in 2027-28

Total Served 2025: 107
Proposed $ Amt. 2027: $ 42,098

SECTION I

PROGRAM: Prayer House Church of God by Faith

CONTRACTOR: Prayer House Church of God by Faith, Pastor Willie Lightfoot Sr., Executive Director

PROGRAM DESCRIPTION: This meal site sponsored by the Office for the Aging provides meals for adults aged 60 and over.

PRIMARY OBJECTIVE(S)/ DELIVERABLES: To provide individuals age 60 and older a balanced meal, as well as a place to socialize and participate in activities to help maintain their mental and physical well-being. Services provided through the center afford participants the opportunity to remain healthy, independent and in their homes for as long as possible.

PRIMARY PERFORMANCE MEASURE/INDICATOR: Indicator of success: Eligible meals served to older adults age 60 and older; eligible meals are also considered for eligible older adult's spouses and their disabled and dependent children, as well as volunteers at the center.

	Previous Year Projection	Previous Year Actual	Current Year Projection	Next Year Projection
Time frame	1/1/25-12/31/25	1/1/25-12/31/25	1/1/26-12/31/26	1/1/27-12/31/27
Eligible Meals Served	2,600	2,613	2,700	2,500
% Successful	90%	100.5%	90%	90%

OUTCOME ASSESSMENT METHODOLOGY: The contractor uses the New York State Office for Aging's designated Statewide Client Data System, and the County's ContrackHQ to generate monthly and quarterly reports, annual self-evaluations, program assessments, performance measures, outcome objectives, number of people served including demographics, and units provided which measure the effectiveness and impact of the program. Participant satisfaction is collected on a regular basis.

BOARD MEMBERS: Deacon Hollie Williams, Deacon Joseph Hall, Deacon Elliott Glover, Deacon Curlie McKenzie, Deacon George Ealy, Deacon Ken Whitlock, Deacon George Reese, Deacon William Carver, Deacon Robert Andrews, Deacon Edward. Mulligan

SECTION II

SOURCE MATERIAL: Annual Evaluation is on file with the Clerk of the Monroe County Legislature.

PURCHASE OF SERVICES INFORMATION FORM
Per Resolution 223 of 2007 as amended by Resolution 11 of 2008

Re: Acceptance of Funds and Authorization to Contract for Monroe County Office for the Aging Programs in 2027-28

Total Served 2025: 47
Proposed $ Amt. 2027: $ 62,348

SECTION I

PROGRAM: Montgomery Senior Center (Southwest)

CONTRACTOR: Southwest Area Neighborhood Association, Inc., Patricia Jackson, Executive Director

PROGRAM DESCRIPTION: The senior centers sponsored by the Office for the Aging serve as nutrition sites and provide programming and opportunities for socialization.

PRIMARY OBJECTIVE(S)/ DELIVERABLES: To provide individuals age 60 and older a balanced meal, as well as a place to socialize and participate in activities to help maintain their mental and physical well-being. Services provided through the center afford participants the opportunity to remain healthy, independent and in their homes for as long as possible.

PRIMARY PERFORMANCE MEASURE/INDICATOR: Indicator of success: Eligible meals served to older adults age 60 and older; eligible meals are also considered for eligible older adult's spouses and their disabled and dependent children, as well as volunteers at the center.

	Previous Year Projection	Previous Year Actual	Current Year Projection	Next Year Projection
Time frame	1/1/25-12/31/25	1/1/25-12/31/25	1/1/26-12/31/26	1/1/27-12/31/27
Eligible Meals Served	3,800	3,284	4,000	2,500*
% Successful	90%	86%	90%	90%

* The center had staff turnover and lowered attendance.

OUTCOME ASSESSMENT METHODOLOGY: The contractor uses the New York State Office for Aging's designated Statewide Client Data System, and the County's ContrackHQ to generate monthly and quarterly reports, annual self-evaluations, program assessments, performance measures, outcome objectives, number of people served including demographics, and units provided which measure the effectiveness and impact of the program. Participant satisfaction is collected on a regular basis.

BOARD MEMBERS: Woodrow Hammond, Carol Constantine, Rev. Randy Geeter, Gail Berkes, Sister Marsha L. Allen, Paul Flagg, Sentretta Baity

SECTION II

SOURCE MATERIAL: Annual Evaluation is on file with the Clerk of the Monroe County Legislature.

PURCHASE OF SERVICES INFORMATION FORM
Per Resolution 223 of 2007 as amended by Resolution 11 of 2008

Re: Acceptance of Funds and Authorization to Contract for Monroe County Office for the Aging Programs in 2027-28

Total Served 2025: 47
Proposed $ Amt. 2027: $ 42,740

SECTION I

PROGRAM: Ogden Senior Center

CONTRACTOR: Town of Ogden

PROGRAM DESCRIPTION: The senior centers sponsored by the Office for the Aging serve as nutrition sites and provide programming and opportunities for socialization.

PRIMARY OBJECTIVE(S)/ DELIVERABLES: To provide individuals age 60 and older a balanced meal, as well as a place to socialize and participate in activities to help maintain their mental and physical well-being. Services provided through the center afford participants the opportunity to remain healthy, independent and in their homes for as long as possible.

PRIMARY PERFORMANCE MEASURE/INDICATOR: Indicator of success: Eligible meals served to older adults age 60 and older; eligible meals are also considered for eligible older adult's spouses and their disabled and dependent children, as well as volunteers at the center.

	Previous Year Projection	Previous Year Actual	Current Year Projection	Next Year Projection
Time frame	1/1/25-12/31/25	1/1/25-12/31/25	1/1/26-12/31/26	1/1/27-12/31/27
Eligible Meals Served	3,000	2,467	2,500	2,250
% Successful	90%	82%	90%	90%

OUTCOME ASSESSMENT METHODOLOGY: The contractor uses the New York State Office for Aging's designated Statewide Client Data System, and the County's ContrackHQ to generate monthly and quarterly reports, annual self-evaluations, program assessments, performance measures, outcome objectives, number of people served including demographics, and units provided which measure the effectiveness and impact of the program. Participant satisfaction is collected on a regular basis.

SECTION II

SOURCE MATERIAL: Annual Evaluation is on file with the Clerk of the Monroe County Legislature.

PURCHASE OF SERVICES INFORMATION FORM
Per Resolution 223 of 2007 as amended by Resolution 11 of 2008

Re: Acceptance of Funds and Authorization to Contract for Monroe County Office for the Aging Programs in 2027-28

Total Served 2025: **44**
Proposed $ Amt. 2027: **$ 25,766**

SECTION I

PROGRAM: Hilton-Parma Senior Center

CONTRACTOR: Town of Parma

PROGRAM DESCRIPTION: The senior centers sponsored by the Office for the Aging serve as nutrition sites and provide programming and opportunities for socialization.

PRIMARY OBJECTIVE(S)/ DELIVERABLES: To provide individuals age 60 and older a balanced meal, as well as a place to socialize and participate in activities to help maintain their mental and physical well-being. Services provided through the center afford participants the opportunity to remain healthy, independent and in their homes for as long as possible.

PRIMARY PERFORMANCE MEASURE/INDICATOR: Indicator of success: Eligible meals served to older adults age 60 and older; eligible meals are also considered for eligible older adult's spouses and their disabled and dependent children, as well as volunteers at the center.

	Previous Year Projection	Previous Year Actual	Current Year Projection	Next Year Projection
Time frame	1/1/25-12/31/25	1/1/25-12/31/25	1/1/26-12/31/26	1/1/27-12/31/27
Eligible Meals Served	1,800	1,688	1,800	2,000
% Successful	90%	94%	90%	90%

OUTCOME ASSESSMENT METHODOLOGY: The contractor uses the New York State Office for Aging's designated Statewide Client Data System, and the County's ContrackHQ to generate monthly and quarterly reports, annual self-evaluations, program assessments, performance measures, outcome objectives, number of people served including demographics, and units provided which measure the effectiveness and impact of the program. Participant satisfaction is collected on a regular basis.

SECTION II

SOURCE MATERIAL: Annual Evaluation is on file with the Clerk of the Monroe County Legislature.

PURCHASE OF SERVICES INFORMATION FORM
Per Resolution 223 of 2007 as amended by Resolution 11 of 2008

Re: Acceptance of Funds and Authorization to Contract for Monroe County Office for the Aging Programs in 2027-28

Total Served 2025: 83
Proposed $ Amt. 2027: $ 46,536

SECTION I

PROGRAM: Pittsford Senior Center

CONTRACTOR: Town of Pittsford

PROGRAM DESCRIPTION: The senior centers sponsored by the Office for the Aging serve as nutrition sites and provide programming and opportunities for socialization.

PRIMARY OBJECTIVE(S)/ DELIVERABLES: To provide individuals age 60 and older a balanced meal, as well as a place to socialize and participate in activities to help maintain their mental and physical well-being. Services provided through the center afford participants the opportunity to remain healthy, independent and in their homes for as long as possible.

PRIMARY PERFORMANCE MEASURE/INDICATOR: Indicator of success: Eligible meals served to older adults age 60 and older; eligible meals are also considered for eligible older adult's spouses and their disabled and dependent children, as well as volunteers at the center.

	Previous Year Projection	Previous Year Actual	Current Year Projection	Next Year Projection
Time frame	1/1/25-12/31/25	1/1/25-12/31/25	1/1/26-12/31/26	1/1/27-12/31/27
Eligible Meals Served	4,200	4,705	5,000	4,200
% Successful	90%	112%	90%	90%

OUTCOME ASSESSMENT METHODOLOGY: The contractor uses the New York State Office for Aging's designated Statewide Client Data System, and the County's ContrackHQ to generate monthly and quarterly reports, annual self-evaluations, program assessments, performance measures, outcome objectives, number of people served including demographics, and units provided which measure the effectiveness and impact of the program. Participant satisfaction is collected on a regular basis.

SECTION II

SOURCE MATERIAL: Annual Evaluation is on file with the Clerk of the Monroe County Legislature.

PURCHASE OF SERVICES INFORMATION FORM
Per Resolution 223 of 2007 as amended by Resolution 11 of 2008

Re: Acceptance of Funds and Authorization to Contract for Monroe County Office for the Aging Programs in 2027-28

Total Served 2025: 174
Proposed $ Amt. 2027: $ 78,723

SECTION I

PROGRAM: Webster Senior Center

CONTRACTOR: Town of Webster

PROGRAM DESCRIPTION: The senior centers sponsored by the Office for the Aging serve as nutrition sites and provide programming and opportunities for socialization.

PRIMARY OBJECTIVE(S)/ DELIVERABLES: To provide individuals age 60 and older a balanced meal, as well as a place to socialize and participate in activities to help maintain their mental and physical well-being. Services provided through the center afford participants the opportunity to remain healthy, independent and in their homes for as long as possible.

PRIMARY PERFORMANCE MEASURE/INDICATOR: Indicator of success: Eligible meals served to older adults age 60 and older; eligible meals are also considered for eligible older adult's spouses and their disabled and dependent children, as well as volunteers at the center.

	Previous Year Projection	Previous Year Actual	Current Year Projection	Next Year Projection
Time frame	1/1/25-12/31/25	1/1/25-12/31/25	1/1/26-12/31/26	1/1/27-12/31/27
Eligible Meals Served	5,500	5,149	5,200	6,200
% Successful	90%	94%	90%	90%

OUTCOME ASSESSMENT METHODOLOGY: The contractor uses the New York State Office for Aging's designated Statewide Client Data System, and the County's ContrackHQ to generate monthly and quarterly reports, annual self-evaluations, program assessments, performance measures, outcome objectives, number of people served including demographics, and units provided which measure the effectiveness and impact of the program. Participant satisfaction is collected on a regular basis.

SECTION II

SOURCE MATERIAL: Annual Evaluation is on file with the Clerk of the Monroe County Legislature.

PURCHASE OF SERVICES INFORMATION FORM
Per Resolution 223 of 2007 as amended by Resolution 11 of 2008

Re: Acceptance of Funds and Authorization to Contract for Monroe County Office for the Aging Programs in 2027-28

Total Served 2025: 26
Proposed $ Amt. 2027: $ 29,225

SECTION I

PROGRAM: Wheatland Senior Center

CONTRACTOR: Town of Wheatland

PROGRAM DESCRIPTION: The senior centers sponsored by the Office for the Aging serve as nutrition sites and provide programming and opportunities for socialization.

PRIMARY OBJECTIVE(S)/ DELIVERABLES: To provide individuals age 60 and older a balanced meal, as well as a place to socialize and participate in activities to help maintain their mental and physical well-being. Services provided through the center afford participants the opportunity to remain healthy, independent and in their homes for as long as possible.

PRIMARY PERFORMANCE MEASURE/INDICATOR: Indicator of success: Eligible meals served to older adults age 60 and older; eligible meals are also considered for eligible older adult's spouses and their disabled and dependent children, as well as volunteers at the center.

	Previous Year Projection	Previous Year Actual	Current Year Projection	Next Year Projection
Time frame	1/1/25-12/31/25	1/1/25-12/31/25	1/1/26-12/31/26	1/1/27-12/31/27
Eligible Meals Served	1,500	1,165	1,250	1,800
% Successful	90%	78%	90%	90%

OUTCOME ASSESSMENT METHODOLOGY: The contractor uses the New York State Office for Aging's designated Statewide Client Data System, and the County's ContrackHQ to generate monthly and quarterly reports, annual self-evaluations, program assessments, performance measures, outcome objectives, number of people served including demographics, and units provided which measure the effectiveness and impact of the program. Participant satisfaction is collected on a regular basis.

SECTION II

SOURCE MATERIAL: Annual Evaluation is on file with the Clerk of the Monroe County Legislature.

PURCHASE OF SERVICES INFORMATION FORM
Per Resolution 223 of 2007 as amended by Resolution 11 of 2008

Re: Acceptance of Funds and Authorization to Contract for Monroe County Office for the Aging Programs in 2027-28

Total Served 2025 750
Proposed $ Amt. 2027-28: $50,000

SECTION I

PROGRAM: Mobility Management Program

CONTRACTOR: Lifespan of Greater Rochester, Inc. – Ann Marie Cook, President / CEO

PROGRAM DESCRIPTION: Transportation coordination is needed in order to better serve those lacking access and information about transportation options. The Mobility Management Program is a one-stop service that helps to identify specific options to best fit the needs of older adults residing in Monroe County.

PRIMARY OBJECTIVE(S)/ DELIVERABLES: Mobility management programs include a wide range of activities that seek to optimize all transportation resources in a community, including specialized transportation services for older adults, people with disabilities, and individuals with lower incomes. Mobility management looks beyond a single transportation service or solution to encompass a variety of services and options to meet individual needs in a coordinated and cost-effective manner.

PRIMARY PERFORMANCE MEASURE/INDICATOR: Individuals receiving services will receive safe, door-to-door transportation services.

	Previous Year Projection	Previous Year Actual	Current Year Projection	Next Year Projection
Program Year	4/1/25-3/31/26	4/1/25-3/31/26	4/1/26-3/31/27	4/1/27-3/31/28
Total # of Participants	750	750	750	750
% Successful	90%	100%	90%	90%

OUTCOME ASSESSMENT METHODOLOGY: Clients are surveyed to determine effectiveness of the program and measure the level of increased knowledge after receiving information from a Mobility consultant. Surveys are compiled and analyzed annually.

SECONDARY PERFORMANCE MEASURE/INDICATOR: Indicator of Success: To support, expand, and build upon the volunteer driver program, Give-a-Lift, by developing volunteer stations in the community to provide transportation to older adults.

OUTCOME ASSESSMENT METHODOLOGY:

	Previous Year Projection	Previous Year Actual	Current Year Projection	Next Year Projection
Program Year	4/1/25-3/31/26	4/1/25-3/31/26	4/1/26-3/31/27	4/1/27-3/31/28
Total # of Participants	15	13	15	20
% Successful	90%	100%	90%	90%

BOARD MEMBERS: Dr. Robert McCann, Liz Vega, Lori Jansen, John Clark, Ralph J. Code, III, Esq., Bob Hartman, Michael Kaufman, Dr. Stephen Ryan, Dr. April Aycock, Dr. Marie Aydelotte, Michael Bausch, Vito Caraccio, Lucia Castillejo, Carmen Coleman, Tere Dominas, Ericka Elliott, Jarrett Felton, John Fornof, Dr. Ankit Garg, Tracy Greene, Cindy Lovetro, Karen LaGraff, Dr. Timothy Lum, David Mack, Travis Masonis, Corinda Reaves, Colleen Rose, Jeremy Sedelmeyer, Roberta VanWinkle

SECTION II

SOURCE MATERIAL: Annual Evaluation with previous contractor is on file with the Clerk of the Monroe County Legislature

PURCHASE OF SERVICES INFORMATION FORM
Per Resolution 223 of 2007 as amended by Resolution 11 of 2008

Re: Acceptance of Funds and Authorization to Contract for Monroe County Office for the Aging Programs in 2027-28

Total Served 2025 150
Proposed $ Amt. 2027: $ 691,256

SECTION I

PROGRAM: Transportation Services for Older Adults

CONTRACTOR: Medical Motor Service of Rochester and Monroe County, Inc., Timothy Kohlmeier, Executive Director

PROGRAM DESCRIPTION: Transportation provided on a regular basis for senior center participants, social adult day services clients, and dialysis patients.

PRIMARY OBJECTIVE(S)/ DELIVERABLES: The primary objective is to improve independence and mobility of older persons, enabling them access to health, nutritional, social services and dialysis treatments.

PRIMARY PERFORMANCE MEASURE/INDICATOR: Indicator of Success: Individuals receiving services will receive safe, door-to-door transportation services.

	Previous Year Projection	Previous Year Actual	Current Year Projection	Next Ye Projection
Program Year	1/1/25-12/31/25	1/1/25-12/31/25	1/1/26-12/31/26	1/1/27-12/31/27
Total # of Participants	550*	300	300	300
% Successful	90%	54.55%	90%	90%

**Future projections adjusted to reflect unduplicated riders*

SECONDARY PERFORMANCE MEASURE/INDICATOR: Indicator of success: Older individuals aged 60 and over are provided transportation to congregate meal locations, special events, and critical dialysis services.

	Previous Year Projection	Previous Year Actual	Current Year Projection	Next Year Projection
Program Year	1/1/25-12/31/25	1/1/25-12/31/25	1/1/26-12/31/26	1/1/27-12/31/27
Total # of one way trips	23,381	22,981	22,000	22,000
% Successful	90%	102%	90%	90%

OUTCOME ASSESSMENT METHODOLOGY: Performance is measured through monthly service reports, and quarterly measure totals which report the unduplicated number of persons served as well as the number of trips to each Senior Center and dialysis locations. A customer satisfaction survey is administered annually.

BOARD MEMBERS: Pat Woods, Kevin Halpin, Josh Pryor, Chris Tragesar, Britt Lui, Mike Moeller, Martin Murphy, Maureen Murphy, Masunmola Oja, Dylan Niewiemski, Sean Rivers

SECTION II

SOURCE MATERIAL: Annual Evaluation is on file with the Clerk of the Monroe County Legislature.

Monroe County Department of Human Services

Office for the Aging

2025

ANNUAL PROGRAM AND SERVICE ASSESSMENT

MONROE COUNTY OFFICE FOR THE AGING

COMMUNITY-BASED SERVICES FOR THE ELDERLY

As funded by: Older Americans Act of 2016, As Amended and NYS Funds

ALZHEIMER'S ASSOCIATION – ROCHESTER & FINGER LAKES REGION

Alzheimer's Association Caregiver Services

Contract Period: 1/1/2025- 12/31/2025
Funding Source: Federal Title III-E National Family Caregiver Support Program
Amount of Contract: $77,862

Date of Site Visit:	5/18/2026
MCOFA Monitor:	April Ernisse
President/CEO:	Kathleen Flannery
Program Contact:	Arlene Wilson, Senior Dir. of Programs (585) 358-4950 x8858 aawilson@alz.org
Additional staff participating:	Philip Shippers Claire Corwin

I. Past performance/Previous recommendations

1. Review Findings

Were there findings from the prior or current year monitoring that required corrective actions to address areas of non-compliance?

_X__ Yes ___ No

Corrective action issued May 2025 re: NFCSP QA Survey

If Yes, were all findings from MCOFA's previous monitoring efforts satisfactorily addressed?

Yes, Alzheimer's Association developed a system and began distributing and collecting results of the NFCSP QA Survey. Completion date December 2025.

II. Service Activity Review

1. Units of Service

Service	Projected Units	Actual Units	% of Projection
Assistance – Information and Assistance	476	811	170%

1a. Describe reason(s) for any variances:
The local Alzheimer's Association was fully staffed after struggling with turnover and reorganization in 2024. The Association utilized the expertise of staff who are from local communities to make inroads into harder to reach groups. The Association was also able to make new or stronger connections to local senior centers and faith communities.

Service	Projected Units	Actual Units	% of Projection
Support Groups	153	221	144%

1b. Describe reason(s) for any variances:
See above comments.

Service	Projected Units	Actual Units	% of Projection

Public Information/Education	90	188	208%

1c. Describe reason(s) for any variances:
See above comments. Additionally, media outreach in specified communities in the city expanded reach.

2. Persons Served

Program	Projected No. of Persons Served	Actual Unduplicated Number of Persons Served	% of Projection
Alzheimer's Association	1,377	1,220	89%

2a. Describe reason(s) for any variances:

1. *There was one staffer out on short-term medical leave the last two months of the year and was not available for in-person outreach in the City of Rochester.*
2. *The Association had a reorganization, and a staffer was moved to Program Manager, and underwent training at the end of the year. This resulted in decreased staff outreach from October to December.*

3. Service Waiting Lists

Program	Wait List Maintained?		Average number of clients waiting for services per month	Which services are clients waiting for?
	Yes	No		
Alzheimer's Association		X	0	none

3a. Comments:
Individuals can always be served within 48 hours of initial contact.

4. Expenditures

Service	Total Projected Expenditures	Actual Expenditures	% of Projection
Assistance – Info & Assistance	$25,956	$21,990	85%

Support Groups	$38,929	$33,794	87%
Public Education	$38,931	$48,032	123%

4a. Describe reason(s) for any variances:
Program monitor note – a budget revision may be required, fiscal will notify if needed.

Program	Actual Unduplicated Persons Served	Total Expenditures	Average Cost Per Client
Alzheimer's Association	1220	$103,816	$92.69

4b. Do costs per person appear reasonable? _X__ Yes ___No

If no, please explain*: See explanation under #2 Persons served*

Service	Projected Unit Cost	Actual Unit Cost	Difference (+/-)
Assistance – Info & Assistance	$54.53	$27.11	(27.42)
Support Groups	$254.45	$152.92	(101.53)
Public Education	$432.57	$255.49	(177.08)

4c. Please explain any difference in Projected Unit Cost compared to Actual Unit Cost:
Inroads into newer groups, including faith communities, senior centers, and other local organizations assisted with higher utilization numbers, leading to lower unit costs.

Client Contributions:

4d. Is a system in place to allow clients to voluntarily and confidentially contribute to the cost of services?

___ Yes ____ No __X__N/A

Program	Annual Total of Client Contributions
Alzheimer's Association	N/A – per agency policy, Alzheimer's Association does not collect client contributions

4e. Please explain how client contributions were utilized in the program:

N/A

4f. Please share any challenges or successes in relation to client contributions:

N/A

4g. Additional Comments on Service Activity and Delivery:

III. Targeting Compliance

Populations Served

ALZHEIMER'S ASSOCIATION	Projected Number Served	Projected % of Total Served	Actual Number Served	Actual % of Total Served
75-84 years	244	17.7%	216	18%
85 years and older	110	8%	88	7%
Hispanic	58	4.2%	61	5.0%
American Indian/Alaskan Native	3	.2%	3	.2%
Asian	30	2.2%	27	2.2%
Black or African American	131	9.5%	126	10.3%
White, not Hispanic	1131	82.1%	1002	82%
Native Hawaiian/Pacific Islander	1	.01%	1	.01%
Lives alone	621	45.1%	550	45.1%
Frail and/or Individuals with Disabilities	391	28.4%	346	28.4%

Low Income (below 150% of poverty)	238	17.3%	211	17.3%
Low Income Minority (below 150% of poverty)	40	2.9%	35	2.9%
Limited English Proficiency	76	5.5%	67	5.5%
Kinship Caregiver (55+)	14	1%	12	1%
Rural	112	8.1%	98.82	8.1%

*Program Monitor note – per Association staff, these number reflect a sample of Monroe County participants, as demographic information is not required of these service types and a large percentage of participants decline to provide their information.

1a. Share successes the program has had in reaching underserved and/or underrepresented groups in the county:

The Alzheimer's Association outreach program has increased partnerships with several Latino community churches and African American churches in the city of Rochester. The Alzheimer's Association has also established two Latino support groups- one of which is in Spanish and the other is at a Latino church. The Association held a five-part educational series [the Empowered Caregiver] at Immaculate Conception Church- a Black Catholic Church in Corn Hill. The Association also have fifteen African American churches participate in Purple Sabbath, which is an awareness event that is held during and after church service.

1b. Share challenges or opportunities for growth in reaching underserved and/or underrepresented groups, and a plan to address these challenges in the next contract year:

One of the challenges is support group attendance is exceptionally low. The Association is participating in a national assessment and review of all support groups, to strategize on how to increase attendance at groups with low census numbers.

1c. ALZHEIMER'S ASSOCIATION submitted monthly or quarterly Targeted Outreach Reports to MCOFA to track outreach activities throughout the contract year?

_X__ Yes ____ No

Comments:

IV. General Management: Contracts & Services

Staffing

1a. Does ALZHEIMER'S ASSOCIATION have adequate staff to perform the activities required under contract with MCOFA?

_X__ Yes ____ No

If no, please explain the impact on the program or service and any steps being taken to improve staffing levels:

1b. Does ALZHEIMER'S ASSOCIATION have a training plan designed to assist staff in carrying out assigned tasks?

_X__ Yes ____ No

Please share required staff training list. See attachments.

1c. i. Would a random check of ALZHEIMER'S ASSOCIATION's personnel files verify training provided for staff, including the date, the presenter and his/her qualifications, and the material covered?

__X_ Yes ____ No

Please provide a personnel file for review electronically or during on-site visit. *Will provide at onsite visit*
Program monitor reviewed during site visit.

1c. ii. If staff includes case managers, do they have the required qualifications to perform case management activities?

___ Yes ____ No _X__N/A

Please provide documentation of completed training(s): ie, CADER, ARCHANGELS CII training.

1d. Does ALZHEIMER'S ASSOCIATION comply with Affirmative Action and Equal Opportunity guidelines?

__X_ Yes ____ No

1e. Is an EEO sign posted in a prominent location?

_X__ Yes ____ No

Where? *Packing and mailing preparation area*

1f. Are reasonable accommodations made for staff and volunteers with disabilities?

__X__ Yes ____ No

Such as: *hybrid work hours area provided. Staff with mobility challenges are advised and afforded the opportunity to develop hourly FMLA plans and flexible workdays as needed and documented in their FMLA plan.*

1g. Does the ALZHEIMER'S ASSOCIATION staffing pattern reflect the minority representation in the total population?

__X__ Yes ____ No

There are eleven [11] fulltime staffers in the Rochester office of the Alzheimer's Association. The Alzheimer's Association has one full time African American staffer and one fulltime Latina staffer.

If no, please describe remedial efforts:

1h. Can ALZHEIMER'S ASSOCIATION document outreach efforts to recruit targeted individuals to fill vacant positions?

__X__ Yes ____ No

Examples: *The Alzheimer's Association has in the past, has shared vacant announcements positions in African American and Latino professional organizations, fraternal and social organizations.*

2. Administrative Provisions

2a. Are staff activities consistent with prohibitions against participation in partisan activities?

__X__ Yes ____ No

2b. Are the facilities where elder services and activities take place free from political posters and other evidence of advancing one political candidate over another?

__X__ Yes ____ No

2c. Are the services carried out under MCOFA contract secular in nature?

__X__ Yes ____ No

2d. Has ALZHEIMER'S ASSOCIATION given due recognition to the US. Administration on Aging, the NYS Office for the Aging and Monroe County Office for the Aging, as appropriate, in program/service brochures, flyers and other printed/electronic materials?

__X__ Yes ____ No

Please provide examples of printed or electronic materials with required recognition. *See flyers in Addendum section.*

2e. Does ALZHEIMER'S ASSOCIATION have a written policy regarding retention of all MCOFA contracted program and fiscal records for six (6) years?

__X__ Yes ____ No

2f. What provisions has ALZHEIMER'S ASSOCIATION made to protect the confidentiality of customer (client) information?

Confidential client (constituent) information is stored within our secure database Personify.

2g. Does ALZHEIMER'S ASSOCIATION have a procedure that allows customers (clients) as well as applicants for services to present grievances on the denial of services?

__X__ Yes ____ No

Please describe:

The Alzheimer's Association utilizes its 24/7 Helpline where constituents can raise concerns they may have. The chapter also distributes a survey after programs for program participants to provide feedback on their experience as well. The Association also has a grievance line operated by a third party.

2h. Does ALZHEIMER'S ASSOCIATION have a procedure to accept customer (client) feedback on service quality, service delivery methods, and service personnel?

__X__ Yes ____ No

Please describe: *The Alzheimer's Association distributes electronic surveys to registered participants of programs to gain feedback on their satisfaction and experience related to the programs they attended.*

2i. Are policies and procedures in place to ensure that only eligible clients are served in MCOFA contracted programs?

__X__ Yes ____ No

Please provide most recently updated Policies and Procedures document. *Policies and Procedures are accessible at "Policy Central" on*

our internal 'Hub.'
Program monitor reviewed on site.

2j. Does ALZHEIMER'S ASSOCIATION make service sites and program information accessible to persons with disabilities?

__X__ Yes ____ No

Please describe: *We provide interpreters upon request for Deaf/HoH and for Spanish language translation.*

2k. Do accounting records support amounts reported on vouchers and do units of service tie in to programmatic reports?

__X__ Yes ____ No

2l. Are vouchers submitted in a timely manner?

__X__ Yes ____ No

2m. Is ALZHEIMER'S ASSOCIATION compliant with prohibitions on using public funds to support sectarian, political and lobbying activities?

__X__ Yes ____ No

3. Reporting

3a. Identify the **Name and Job Title** of the person(s) and the back-up person(s) responsible for electronic reporting via The NYSOFA Database PeerPlace, and County ContrackHQ.

Primary reporting person: Phillip Shippers, Program Director
Back-up reporting person: Claire Corwin, Program Director

3b. Please identify any challenges or concerns with completing PeerPlace and/or ContrackHQ reporting:
N/A

3c. Are case records reviewed quarterly?

__X__ Yes ____ No

4. Interagency Coordination

4a. Does ALZHEIMER'S ASSOCIATION have a system in place for referring clients to other services/organizations when the need for such services is identified?

__X__ Yes ____ No

Please describe: *The Alzheimer's Association tracks referrals through the Association's CRM system, if there is a constituent need for referral.*

4b. Has ALZHEIMER'S ASSOCIATION worked effectively with other providers and organizations in the community to facilitate coordination and minimize possible duplication of effort?

__X__ Yes ____ No

Please describe coordination and collaboration during this contract year: *The Association utilizes its CRM system to track constituent contacts. The association holds/attends ongoing meetings with partners to ensure effective coordination of services. For example, the association has senior management meetings with one of our partners, Lifespan, to strategically plan conferences that are not in calendar competition. The Association also has program coordinator meetings with Lifespan, to cross-promote programs in our region and schedule staff to be presenters and table at both organization's events.*

5. Performance Outcomes and Enhancements

5a. Satisfaction Surveys

ALZHEIMER'S ASSOCIATION	**Projected Percentage of Satisfied Clients**	**Actual Percentage of Satisfied Clients**
Satisfaction surveys	90%	97%

5b. Does the ALZHEIMER'S ASSOCIATION send out the NFCSP Quality Assurance Survey to participants annually?

__X__ Yes ____ No

Please describe procedure for administering the survey: *The Alzheimer's Association sends out the NFCSP Quality Assurance Surveys to core program attendees in Penfield, Greece and all support groups in Monroe County, in the months of September and October. Program staff explain the purpose and value of the survey as a*

program delivery assessment and a quality assurance monitoring tool. The survey was not well received of the tool for program continuation. Several support group attendees were angry that it was presented a second time and stated if this were to continue, they would not return to the support group and attendees refused to complete the NFCSP Quality Assurance Survey. Support group participants shared that it was too long, and the questions were too invasive. Staff stressed the importance

Program monitor note – the above feedback was forwarded to the NYSOFA Caregiver team for their consideration.

5c. Please describe other outcomes tracked by program that demonstrate program's success:

The association has a Common Program Evaluation Survey. This is sent out to a subset of program participants electronically, after a program has been held. From January to December 2025, 236 were sent to Rochester and Finger Lakes program attendees; 40 were completed for a response rate of 17%. Fifty-nine percent of respondents expressed strong satisfaction with the program and 54% "strongly agreed" the program met their expectations. Sixty-six percent of respondents "strongly agreed" on their willingness to attend an additional Association program. [See report addendum]

5d. Does ALZHEIMER'S ASSOCIATION solicit input from their customers and constituents, including customers and constituents that are frail, disabled, minority, and/or low-income, on ways to make services more accessible and appealing to culturally diverse populations?

__X__ Yes ____ No

Please describe:

The Association holds community forums throughout the chapter's nine-county region. The association holds theses forum with the goal of gaining community feedback, so that programmatic improvement can be made to meet the needs of communities.

5e. Please describe general trends in responses from clients based on survey results and other collected feedback:

The Association has been working with several advisory groups to expand outreach to the Deaf and Hard of Hearing. This has resulted in more visually based educational flyers and booklets.

The Association is continuing to identify more materials in additional languages, after positive feedback on the 10 Healthy Habits flyer in Haitian-Creole. The Association is also expanding its selection of Spanish language materials and exploring the use of QR code-based handbills and wallet cards, linking constituents directly to resources on the Association's corresponding webpages.

5f. Were there any programmatic changes during the year that affected the scope or quality of service?

__X__ Yes ____ No

If yes, please describe briefly:
The Association underwent an organizational change, to raise standards for Care Consultations and Program Management. This resulted in staff transitioning to Program Manager and resulted in an extensive training and onboarding period for their new job, in the last quarter of 2025.

The Alzheimer's Association also had two staff out on medical leave [one in spring 2025, the other in December 2025] that impacted outreach and collaboration focused on the City of Rochester.

5g. Please describe plans for continuous program improvement:

The Association will continue to review outcomes and adjust and make improvements as needed. The Association will expand education to those at risk and younger audiences to educate on brain health.

V. Assessment Conclusion

AGENCY COMMENTS: *Please describe your program's strengths and needs*

Strengths: *Diversity of staff; experienced staffers in outreach, graphic design and grants management. The Rochester office works well as a team, and comes together to support each other for Community Forums, Educational Conferences, resource development and allocation of supplies.*

Needs: ***More opportunities to collaborate with MCOFA****. The Salute to Seniors event had Association staff and volunteers present, providing information, education and fresh fruit! We see the value in participating and having the opportunities to meet with various senior day programming sites.*

The Joy Pets were well received and created a stronger bond with our faith community partners, who are using several for visits to sick and shut in members in Monroe County. We have received many thank you from several health ministries of African American churches.

The Diversity Dialogues have been beneficial for Association staff. We have learned more about various ethnic and cultural groups, which have helped us to better outreach

and service the Jewish and IDD communities.

MCOFA COMMENTS

Strengths: The Caregiver Program at the Alzheimer's Association is growing its reach and adapting to meet the needs of communities that have traditionally been harder to reach with their programs. They have been able to expand their message to include social determinants of health and prevention, which has broadened their audience and allowed for more positive messaging. The staff has worked to increase collaboration between teams within and between the chapters, include board members, expand volunteer involvement, and build relationships with existing community leaders and organizations.

Needs: See agency comments above.

Compliance areas in need of attention: N/A

From: Emisse, April
To: "Arlene Wilson"; Philip Shippers; Claire Corwin
Subject: Final evaluation - Alzheimer"s Association
Date: Friday, May 22, 2026 10:24:00 AM
Attachments: 2025 Azheimer"s Association Annual Evaluation.pdf
image002.png

Hi Arlene, Phil, and Claire,
Please find attached for your records the finalized evaluation for the 2025 Alzheimer's Association Caregiver Services program. Thank you again for taking the time to meet with me and please pass on our gratitude to the rest of your team for all the wonderful work you do in our community.

Thank you!

April Hurd Ernisse
Program Monitor
Monroe County Office for the Aging
435 East Henrietta Rd, 3rd floor
Rochester NY 14620
(585) 753-6480 (direct)
(585) 753-6281 (fax)
aprilernisse@monroecounty.gov

Monroe County Department of Human Services
Office for the Aging
2025-2026

ANNUAL PROGRAM AND SERVICE ASSESSMENT

MONROE COUNTY OFFICE FOR THE AGING

COMMUNITY-BASED SERVICES FOR THE ELDERLY

As funded by: Older Americans Act of 2016, As Amended and NYS Funds

CATHOLIC CHARITIES FAMILY AND COMMUNITY SERVICES (CCFCS)

Expanded In-home Services for the Elderly Program (EISEP)

Assessment period: 4/1/25-3/31/26
Contract Period: 7/1/2025- 3/31/2026 (partial year due to delayed RFP release)
Funding Source: NYS EISEP, Monroe County
Amount of Contract: $1,855,614

Date of Site Visit: 6/24/2026
MCOFA Monitor: April Ernisse, MCOFA Program Monitor
Dept Director: Jennifer McDermott, Program Director
Program Contact: Tea Papke, Program Administrator
Other Participants: Rachael Kehrer, CCFCS
Elizabeth Parker, CCFCS
Leanne Rorick, MCOFA

I. Past performance/Previous recommendations

1. Review Findings

Were there findings from the prior or current year monitoring that required corrective actions to address areas of non-compliance?

_X__ Yes ___ No

Corrective action January 2025 re: EISEP program compliance and coordination with UR Home Care

If Yes, were all findings from MCOFA's previous monitoring efforts satisfactorily addressed?

Yes, corrective action plan concluded and final completion letter issued.

II. Service Activity Review

1. Units of Service

Service	Projected Units	Actual Units	% of Projection
EISEP case management	8,391	8486.5 (9 mo) (11309.75 – whole program year)	101%

1a. Describe reason(s) for any variances:

2. Projected Persons Served

CCFCS Service	Projected No. of Persons Served	Actual Unduplicated Number of Persons Served	% of Projection
EISEP	400	401 (9mo) 447 (whole year)	100%

2a. Describe reason(s) for any variances:

Note: This includes people who were helped during screening/assessment process but might not have enrolled fully in the service.

3. Service Waiting Lists

Program	Wait List Maintained?		Average number of clients waiting for services per month	Which services are clients waiting for?
	Yes	No		
EISEP	x		~60 (combined 2 waitlists sent to aide agencies each month)	PCA1 and PCA2

3a. Comments: This is the waiting list of enrolled people that are waiting for aide service. There is a different waiting list of people who are waiting to be assessed due to the program being at capacity but that did not start until the end of this contract.

4. Expenditures

Service	Total Projected Expenditures	Actual Expenditures	% of Projection
EISEP	$1,855,614	$1,855,614	100%

4a. Describe reason(s) for any variances:

Service	Persons Served	Total Expenditures	Average Cost Per Client
EISEP	401	$1,855,614	$4,627.46

4b. Do costs per person appear reasonable?

__x_ Yes ____ No

(This amount is less than one month of a nursing home costs and it includes a wide range of services.)

If no, please explain:

Client Contributions:

4d. Is a system in place to allow clients to voluntarily and confidentially contribute to the cost of services?

_X__ Yes ____ No

Please provide a copy of a client contribution letter.
Program monitor reviewed submitted letter.

Program	Annual Total of Client Contributions
EISEP	$2,783 (9 Mo)

4e. Please explain how client contributions were utilized in the program:

To expand direct services. The money collected was 100% used to pay for this program's expenses and it was counted towards our required match.

4f. Please share any challenges or successes in relation to client contributions:

The mailing costs have grown and the amount collected does not always exceed the cost of the monthly mailing so the program is considering quarterly mailings supplemented by letters dropped off at home visits as an alternative. The amount of donations has gone significantly down over the past decade, likely due to the economy.

4g. Additional Comments on Service Activity and Delivery:

CCFCS is community based and committed to diversity and accessibility. The benefits of EISEP's Community Collaboration are that it allows for better outreach, unique specialties, better connections to partner services and efficiencies in education/training. Our program is unique because we provide comprehensive in-home supports in a cost-effective manner so we are able to meet individuals' varying needs. The staff develop relationships and knowledge of their clients' needs and are able to refer clients to additional services when necessary. Staff are trained about other local programs and agencies so they can make appropriate referrals. This year was challenging because of extended staff leaves and significant retirements, but we were thankful for some one-time funds from the Rochester Community Foundation that helped to offset the loss of United Way funds.

5. Financial Management & Inventory Control Monitoring

5a. Are CCFCS staff who handle monies (with the exception of attorneys) bonded?

___ Yes ___X_ No CCFCS is self-insured through the Catholic Charities. We have liability insurance for all employees, which covers malpractice and thefts.

5b. Are two individuals involved in counting customer (client) contributions?

_X__ Yes ____ No

5c. Are individuals who are authorized to sign checks involved in processing invoices?

___ Yes _X___ No

5d. Are individuals who are authorized to sign check different from the person(s) who maintain payroll records?

_X__ Yes ____ No

5e. Has CCFCS maintained registration as a Charitable Organization with the Department of State?

_X__ Yes ____ No

II. Targeting Compliance

1. Populations Served

CCFCS	Projected Number Served	Projected % of Total Served	Actual Number Served	Actual % of Total Served
75-84 years	88	22%	172	42.8%
85 years and older	44	11%	147	36.6%
Hispanic	12	3%	17	4.2%
American Indian/Alaskan Native	1	0.1%	2	.4%
Asian	8	2%	5	1.2%
Black or African American	40	10%	115	28.6%
White, not Hispanic	336	84%	240	59.8%
Native Hawaiian/Pacific Islander	1	0.1%	0	0%
Lives alone	184	46%	271	67.5%
Frail and/or Individuals with Disabilities	400	100%	390	97.2%*
Low Income (below 150%	64	16%	140	34.9%

of poverty)				
Low Income Minority (below 150% of poverty)	20	5%	71	17.7%

*Program monitor note: all individuals served should be considered Frail per EISEP definitions. Going forward, EISEP staff will ensure Frail is indicated in client demographics for all EISEP clients in HCS Peerplace.

1a. Share successes the program has had in reaching underserved and/or underrepresented groups in the county:

We exceeded the expectation for reaching people over age 75, living alone, and low income because that is the population that is most likely to need subsidized home care. We also succeeded with reaching Hispanic and African American participants and Low-income Minority and that could be related to our diverse staff and reputation in the community. The primary outreach activity is participating in community fairs at housing complexes that serve low income older adults.

1b. Share challenges or opportunities for growth in reaching underserved and/or underrepresented groups, and a plan to address these challenges in the next contract year:

The categories that we did not reach expectations were Asian and Native Hawaiian/Pacific Islander and we look forward to working with MCOFA to try to reach this population. The program has attended events such as the Asian American Pacific Islander panel and dropped off brochures at a temple. This upcoming year EISEP will be working more closely with Wat Po Lao Buddhadham Temple. We know that it is challenging because the tendency is for families to take care of their older family members themselves and not use outside supports. The other category that was low were White not Hispanic participants but that was because other groups were higher and this is not a concern.

1c. CCFCS submitted monthly or quarterly Targeted Outreach Reports to MCOFA to track outreach activities throughout the contract year?

_X__ Yes ____ No

Comments: When resources are at capacity it is difficult to justify outreach activities because it is disappointing to people when they find out about a service and then realize it is full.

IV. General Management Contracts & Services

1. Staffing

1a. Does CCFCS have adequate staff to perform the activities required under contract with MCOFA?

_X__ Yes ____ No

If no, please explain the impact on the program or service and any steps being taken to improve staffing levels:

1b. Does CCFCS have a training plan designed to assist staff in carrying out assigned tasks?

__X_ Yes ____ No

Please share required staff training list. There are extensive new employee orientation trainings and several annual requirements across the agency that must be completed on an online platform (~10 hours each year) and all Case Managers have completed CADAR. Each year the team meets the minimum 16 hours a year of training through the monthly meetings, external trainings, annual staff training day, and various webinars.

Program monitor reviewed on site via Litmos online platform.

1c. i. Would a random check of CCFCS's personnel files verify training provided for staff, including the date, the presenter and his/her qualifications, and the material covered?

___ Yes __X__ No

Please provide a personnel file for review electronically or during on-site visit.
Annual training is kept in a different system – Litmos. CCFCS is in the process of switching systems. Attendance at the program meeting trainings is tracked by attendance/minutes and attendance at other trainings are listed on monthly reports.

Program monitor reviewed staff meetings/training on staff profiles via Litmos online platform.
Suggested that CCFCS staff keep their own individual logs of completed training (dates, title, instructor) to keep with their records. This would assist with case managers tracking their required 16 hours of annual training for EISEP.

1c. ii. If staff includes case managers, do they have the required qualifications to perform case management activities?

_X__ Yes ____ No

Please provide documentation of completed training(s): ie, CADER, ARCHANGELS CII training.
Boston University CADER staff provided program monitor with staff list of completed CADER certifications. One CCFCS staff was missing from list, but CCFCS was able to provide proof of her CADER certificate. Two staff were overdue for CADER recertification (due every 5 years). They will recertify by the end of the quarter following CADER's recertification instructions.

1d. Does CCFCS comply with Affirmative Action and Equal Opportunity guidelines?

_X__ Yes ____ No

1e. Is an EEO sign posted in a prominent location?

_X__ Yes ____ No

Where? Staff Kitchen

1f. Are reasonable accommodations made for staff and volunteers with disabilities?

_X__ Yes ____ No

Such as:
signs, equipment, accessible buildings/restrooms, and HR policies

1g. Does the CCFCS staffing pattern reflect the minority representation in the total population?

__X_ Yes (across the agency) ____ No

If no, please describe remedial efforts:

1h. Can CCFCS document outreach efforts to recruit targeted individuals to fill vacant positions?
_X__ Yes ____ No

Examples: Targeted sourcing and outreach for qualified candidates based on education, credential, and experience in Indeed and LinkedIn Recruiter.

Targeted job fair and hiring event participation based on skills and field of study offered at that institution that match requirements for positions.

2. Administrative Provisions

2a. Are staff activities consistent with prohibitions against participation in partisan activities?

__X_ Yes ____ No

2b. Are the facilities where elder services and activities take place free from political posters and other evidence of advancing one political candidate over another?

__X_ Yes ____ No

2c. Are the services carried out under MCOFA contract secular in nature?

__X_ Yes ____ No

2d. Has CCFCS given due recognition to the US. Administration on Aging, the NYS Office for the Aging and Monroe County Office for the Aging, as appropriate, in program/service brochures, flyers and other printed/electronic materials?

__X_ Yes ____ No

Please provide examples of printed or electronic materials with required recognition.
Program monitor reviewed CCFCS EISEP flyer.

2e. Does CCFCS have a written policy regarding retention of all MCOFA contracted program and fiscal records for six (6) years?

_X__ Yes ____ No

2f. What provisions has CCFCS made to protect the confidentiality of customer (client) information?

Locked files, locked rooms, use of release of information forms, detailed policy on confidentiality that is greatly emphasized in agency and department orientation and trainings. Staff participate in mandatory annual HIPAA training and IT safety related trainings.
Related policies include: CCFCS Policy 5038 Mutual Rights and Responsibilities and CCFCS Policy 5031 Client Information in Case Records and Case Files.

2g. Does CCFCS have a procedure that allows customers (clients) as well as applicants for services to present grievances on the denial of services?

__X_ Yes ____ No

Please describe: Appeal information is included in the discharge letter that is sent to any participant leaving the program.

2h. Does CCFCS have a procedure to accept customer (client) feedback on service quality, service delivery methods, and service personnel?

__X_ Yes ____ No

Please describe: Customer Satisfaction Survey that is sent out throughout the year. Both the agency and the program utilizes this option.

2i. Are policies and procedures in place to ensure that only eligible clients are served in MCOFA contracted programs?

_X__ Yes ____ No

Please provide most recently updated Policies and Procedures document.
Provided electronically and via hard copy.

2j. Does CCFCS make service sites and program information accessible to persons with disabilities?

__X_ Yes ____ No

Please describe: Participants do not come to the office building but rather the staff go to them to their homes. We have the ability to translate paperwork and have many documents in other languages. We utilize bi-lingual staff and our 24/7 language line for interpretation. Hard of hearing clients have access to TTY for communication needs as well.

2k. Do accounting records support amounts reported on vouchers and do units of service tie in to programmatic reports?

__X_ Yes ____ No

2l. Are vouchers submitted in a timely manner?

__X_ Yes ____ No

2m. Is CCFCS compliant with prohibitions on using public funds to support sectarian, political and lobbying activities?

__X_ Yes ____ No

3. Reporting

3a. Identify the **Name and Job Title** of the person(s) and the back-up person(s) responsible for electronic reporting via The NYSOFA Database PeerPlace, and County ContrackHQ.

Primary reporting person: Tea Papke, Program Administrator
Back-up reporting person: Jennifer McDermott, Department Director

3b. Please identify any challenges or concerns with completing PeerPlace and/or ContrackHQ reporting:
The case managers are entering in case management units in real time in the client charts while the other EISEP funded units of in-home care and supports are entered in at the end of the month after the review of the invoices by the providers in the Events Profile sections of the applicable platforms. ContractHQ data is entered quarterly. Refined definitions have been a challenge however we appreciate MCOFA's assistance with adapting our process.

3c. Are case records reviewed quarterly?

__X_ Yes ____ No
All EISEP case records are reviewed by supervisory team.

4. Case File Reviews

4a. Did a review of six randomly selected client files achieve compliance with all NYSOFA Citations and regulations? (9 CRR-NY 6654)

_X__ Yes ____ No

5. Personal Care and House Keeping (Level I & II)

5a. Are the EISEP In-Home services conducted according to 9 CRR-NY 6654.17?

_X__ Yes ____ No

5b. Have the annual home care compliance evaluations been completed?

___ Yes __X__ No - In progress. During onboarding an extensive orientation and provider review is completed and then throughout the year there is monthly communication and virtual meetings. Formal compliance evaluations are being scheduled to be completed by September.

Aide agencies complete supervisory visits every 6 months – documented in client records.

6. Social Adult Day Services/Respite

6a. Are the EISEP SADC services conducted according to 9 CRR-NY 6654.20?

__X_ Yes ____ No

6b. Have the annual Social Adult Day Program site visits been completed per 15-PI-12?

__X_ Yes ____ No

7. Case Management

7a. Are the EISEP Case Management services conducted according to 9 CRR-NY 6654.16?

_X__ Yes ____ No

8. Consumer Directed In-Home Services

8a. Does the CDIS Program follow the guidelines and program instruction as set forth by the NYSOFA? The guidance is based on 2011 amendments made to EISEP regulations, (see 9 NYCRR sections 6654.15, 6654.16, 6654.17and 12-TAM-02.

__X_ Yes ____ No

9. Ancillary

9a. Are the EISEP Ancillary services conducted in accordance with 9 CRR-NY 6654.19?
NOTE: Also Refer to regulatory changes per 10-PI-06

__X_ Yes ____ No

10. Personal Emergency Response Services (PERS)

10a. Are the EISEP Personal Emergency Response Services conducted in accordance with 9 CRR-NY 6654.17?

_X__ Yes ____ No

Program monitor note: Discussed updated NYSOFA Standard Definitions to clarify two options for documenting PERS.

11. Interagency Coordination

11a. Does CCFCS have a system in place for referring clients to other services/organizations when the need for such services is identified?

_X__ Yes ____ No

Please describe: The program utilizes and Intake Specialist who screens all referrals to EISEP and then assigns the individual to a Care manager for an initial assessment. During the screening process, immediate referrals are often made to other programs and services when needs are identified. These referrals are documented as Service Tickets in Peer place. All referrals, recommendations, and action steps are documented in case notes and reflected in the care plan.

11b. Has CCFCS worked effectively with other providers and organizations in the community to facilitate coordination and minimize possible duplication of effort?

_X__ Yes ____ No

Please describe coordination and collaboration during this contract year: Dept meetings, Aging Alliance, Lifespan, referral sources, CART/RASE, GRAPE, IMPOWR, meetings with VNS MOW, guest speakers, JFS, HEAP.

12. Performance Outcomes and Enhancements

12a. Satisfaction Surveys

CCFCS	Projected Percentage of Satisfied Clients	Actual Percentage of Satisfied Clients

Satisfaction surveys	85%	95 out of 106 respondents chose 'strongly agree' = 90%

12b. Please describe other outcomes tracked by program that demonstrate program's success:

406 surveys were distributed and 109 returned for a response rate of 27%.

In 2025 EISEP's net promotor score was 79% which is high since it is a scale of -100 to +100.

87% of respondents said that as a result of this program their Household Stability has improved in one of 6 different areas.

93% of respondents agreed that EISEP services reduced their physical and/or emotional stress.

12c. Does CCFCS solicit input from their customers and constituents, including customers and constituents that are frail, disabled, minority, and/or low-income, on ways to make services more accessible and appealing to culturally diverse populations?

_X__ Yes ____ No

Please describe: We ask for this general input from everyone served but can fine tune this question in future surveys to specifically address appealing to culturally diverse populations.

12d. Please describe general trends in responses from clients based on survey results and other collected feedback:

Care managers have assisted with taking burdens off from families and provided many necessary services that clients did not know existed. Clients have high concerns about the increase cost of living and are struggling to pay cost shares.

12e. Were there any programmatic changes during the year that affected the scope or quality of service?

__X_ Yes ____ No

If yes, please describe briefly: EISEP is currently operating at capacity and is not accepting new enrollments at this time. New referrals are being placed on a waitlist and will be prioritized based on established criteria, including low income status, over 85 years, living alone, the need for personal care services, and the availability of informal support.

12f. Please describe plans for continuous program improvement:

CCFCS compliance department is conducting chart reviews. Care managers complete quarterly Meals on Wheels (MOW) eligibility statements to ensure all individuals receiving meal service continue to meet program requirements. Care Managers also participate in a monthly virtual team check in meetings to promote communication and program consistency. The program is in process of developing educational hand outs on homeowners' rights and renters' rights to provide to clients.

We will continue to improve targeting efforts for isolated, minority (especially Asian and Native Hawaiian/Pacific Islander) and low-income seniors when there are funds to support additional clients.

V. Assessment Conclusion

AGENCY COMMENTS:
Strengths: Program has diverse professional staff that are collaboration focused.

- CCFCS is a visionary and proactive agency that is respected in the community.
- Ongoing training/professional development is a team focus and is supported by administration.
- Quality case management services are provided with an emphasis on safety, respect, and empowering independent living in the community.

Needs:

- Peerplace - ongoing improvements and support.
- Advocacy to the State-level regarding increased EISEP funding **without** the high match requirement.
- Support to work more effectively with other DHS programs; APS, Medicaid, SNAP etc.(Examples: assistance with reaching correct DHS contact, coordinating relevant trainings, etc.)
- Continued advocacy to relief the clients cost share requirements

MCOFA COMMENTS

Strengths: The CCFCS EISEP program provides essential, high quality, compassionate services to older adults in Monroe County. Case managers and supervisory staff are knowledgeable on the EISEP requirements and are rigorous in maintaining the high standard of services required. The program provides an invaluable service in ensuring older adults can safely age in their own homes.

Needs: See agency comments above. In addition, the EISEP team at CCFCS will track case manager training to verify 16 hours completed. The team will ensure CADER recertifications are completed every 5 years. In addition, the team will ensure home care agency evaluations are completed within contract year.

Compliance areas in need of attention: N/A

From: Ernisse, April
To: "Jennifer McDermott"; "Rachael Kehrer"; "Tea Papke"
Subject: Finalized EISEP Eval 2025-26
Date: Monday, June 29, 2026 2:26:00 PM
Attachments: 2025-26 CCFCS EISEP Annual Evaluation.pdf
image002.png

Hi Jen, Rachael, and Tea,
Thank you again for taking the time to meet with Leanne and I last week. (Please thank Elizabeth as well, since I don't have her email address.) Please find attached the finalized 2025-26 EISEP evaluation for your records.

I have some notes on outstanding questions to follow up on for you, I will get back to you on those.

On behalf of MCOFA, please pass on our gratitude to your team for all your incredible work with older adults in our community!

Thank you!

April Hurd Ernisse (she/her)
Program Monitor
Monroe County Office for the Aging
435 East Henrietta Rd, 3rd floor
Rochester NY 14620
(585) 753-6480 (direct)
(585) 753-6281 (fax)
aprilernisse@monroecounty.gov

Monroe County Department of
Human Services
Office for the Aging
2025

ANNUAL PROGRAM AND SERVICE ASSESSMENT

MONROE COUNTY OFFICE FOR THE AGING
COMMUNITY-BASED SERVICES FOR THE ELDERLY
As funded by: Older Americans Act of 2016, As Amended and NYS Funds

HANNA Z - SOCIAL ADULT DAY SERVICES
Caregiver Respite

Contract Period: 7/1/2025- 12/31/2025 (partial year due to delayed opening of program)
Funding Source: Federal Title III-E National Family Caregiver Support Program
Amount of Contract: $103,627

Date of Site Visit:	7/16/2026
MCOFA Monitor:	April Ernisse
President/CEO:	Rachel Vatelman
Program Contact:	Laurie Alverio, VP of Development (585) 794-2107 lauriea@hannaz.org
Other participants:	Julienne Ngombilekeu, Hanna Z

I. Past performance/Previous recommendations

1. Review Findings

Were there findings from the prior year monitoring that required corrective actions to address areas of non-compliance?

___ Yes ___ No _X_ N/A: First year of contract

If Yes, were all findings from MCOFA's previous monitoring efforts satisfactorily addressed?

II. Service Activity Review

1. Units of Service

Service	Projected Units	Actual Units	% of Projection
Caregiver Respite (Out of home day)	3,869	370	10%

1a. Describe reason(s) for any variances:
Hanna Z is a new program and had several delayed openings. They began enrolling participants in July 2025.

Service	Projected Units	Actual Units	% of Projection
Transportation	184	53	29%

1b. Describe reason(s) for any variances:
Hanna Z is a new program and had several delayed openings. They began enrolling participants in July 2025.

2. Persons Served

Program	Projected No. of Persons Served	Actual Unduplicated Number of Persons Served	% of Projection
Hanna Z	19	7	37%

2a. Describe reason(s) for any variances:

The program experienced a delayed opening during the contract period, resulting in fewer months available to enroll participants. Additional time was also required to build referral relationships, complete assessments, coordinate transportation, and assist families through the enrollment process. As awareness of the program increased, referrals and participation steadily improved.

3. Service Waiting Lists

Program	Wait List Maintained?		Average number of clients waiting for services per month	Which services are clients waiting for?
	Yes	No		
Hanna Z		x		

3a. Comments:

A formal waiting list was not maintained during this contract period because the program had sufficient capacity to meet current demand. Referrals were contacted promptly and offered enrollment as space became available.

4. Expenditures

Program	Total Projected Expenditures	Actual Expenditures	% of Projection
Hanna Z	$103,627	$9,728.24	9.3%

4a. Describe reason(s) for any variances:

Expenditures were lower than originally projected due to the delayed program opening and serving fewer participants than anticipated during the partial contract year. Expenses increased gradually as enrollment grew and services expanded.

Program	Actual Unduplicated Persons Served	Total Expenditures	Average Cost Per Client
Hanna Z	7	$9,728.24	$1,389.75

4b. Do costs per person appear reasonable? __X_ Yes ___No

If no, please explain:

Client Contributions:

4d. Is a system in place to allow clients to voluntarily and confidentially contribute to the cost of services?

___ Yes __X__ No

Please provide a copy of a client contribution letter.

Hanna Z did not have a contribution letter. See corrective action.

Program	Annual Total of Client Contributions
Hanna Z	$0

4e. Please explain how client contributions were utilized in the program:
See corrective action.

4f. Please share any challenges or successes in relation to client contributions:
See corrective action.

4g. Additional Comments on Service Activity and Delivery:
Despite being a new program operating during a partial contract year, Hanna Z successfully established policies and procedures, built community partnerships, and developed transportation and respite services, and created meaningful programming focused on socialization, wellness, cognitive engagement, and caregiver support. Feedback from participants and caregivers has been overwhelmingly positive.

III. Targeting Compliance

1. Populations Served

HANNA Z	Projected Number Served	Projected % of Total Served	Actual Number Served	Actual % of Total Served
75-84 years	4	21.1%	0	0%
85 years and older	2	10.5%	1	14%
Hispanic	2	10.5%	0	0%

American Indian/Alaskan Native	0-1	.1%	0	0%
Asian	1	5.3%	0	0%
Black or African American	3	15.8%	1	14%
White, not Hispanic	13	68.4%	5	71%
Native Hawaiian/Pacific Islander	0-1	.01%	0	0%
Lives alone	6	31.6%	0	0%
Frail and/or Individuals with Disabilities	5	26.3%	0	0%
Low Income (below 150% of poverty)	7	36.8%	0	0%
Low Income Minority (below 150% of poverty)	3	15.8%	0	0%

Note: Only caregivers are served/represented in these demographics.

1a. Share successes the program has had in reaching underserved and/or underrepresented groups in the county:

Hanna Z successfully reached caregivers and older adults through partnerships with healthcare providers, community organizations, senior service agencies, and word-of-mouth referrals. The program emphasizes reducing social isolation while providing affordable respite services to caregivers. Staff continues building relationships with organizations serving diverse and underserved populations throughout Monroe County.

1b. Share challenges or opportunities for growth in reaching underserved and/or underrepresented groups, and a plan to address these challenges in the next contract year:

As a newly established program, one challenge has been increasing awareness among underserved communities, including minority populations and individuals living in rural areas. During the next contract year, Hanna Z plans to expand targeted outreach through community presentations, multilingual marketing materials, healthcare partnerships, faith-based organizations, and participation in local community events.

1c. HANNA Z submitted monthly or quarterly Targeted Outreach Reports to MCOFA to track outreach activities throughout the contract year?

___ Yes __X__ No

Comments: Due to the delayed program startup, formal Targeted Outreach Reports were not consistently submitted during the initial contract period. However, outreach activities were conducted throughout the year, and procedures have now
been established to ensure timely reporting moving forward.

IV. General Management Contracts & Services

1. Staffing

1a. Does HANNA Z have adequate staff to perform the activities required under contract with MCOFA?

_X__ Yes ____ No

If no, please explain the impact on the program or service and any steps being taken to improve staffing levels:

1b. Does HANNA Z have a training plan designed to assist staff in carrying out assigned tasks?

_X__ Yes ____ No

See completed NYSOFA SAD Assessment

1c. i. Would a random check of HANNA Z's personnel files verify training provided for staff, including the date, the presenter and his/her qualifications, and the material covered?

_X__ Yes ____ No

See completed NYSOFA SAD Assessment

1c. ii. If staff includes case managers, do they have the required qualifications to perform case management activities?

___ Yes ____ No __X__N/A

Please provide documentation of completed training(s): ie, CADER, ARCHANGELS CII training.

1d. Does HANNA Z comply with Affirmative Action and Equal Opportunity guidelines?

__X_ Yes ____ No

1e. Is an EEO sign posted in a prominent location?

__X_ Yes ____ No

Where? Posted in area visible to all staff

1f. Are reasonable accommodations made for staff and volunteers with disabilities?

__X_ Yes ____ No

Such as: Hanna Z facilities are ADA compliant. Hanna Z remains committed to recruiting and retaining a diverse workforce that reflects the community it serves. Recruitment efforts continue to focus on increasing diversity through community partnerships and inclusive hiring practices.

1g. Does the HANNA Z staffing pattern reflect the minority representation in the total population?

__X_ Yes ____ No

If no, please describe remedial efforts:

1h. Can HANNA Z document outreach efforts to recruit targeted individuals to fill vacant positions?

__X_ Yes ____ No

2. Administrative Provisions

2a. Are staff activities consistent with prohibitions against participation in partisan activities?

__X_ Yes ____ No

2b. Are the facilities where elder services and activities take place free from political posters and other evidence of advancing one political candidate over another?

__X_ Yes ____ No

2c. Are the services carried out under MCOFA contract secular in nature?

_X__ Yes ____ No

2d. Has HANNA Z given due recognition to the US. Administration on Aging, the NYS Office for the Aging and Monroe County Office for the Aging, as appropriate, in program/service brochures, flyers and other printed/electronic materials?

_X__ Yes ____ No

2e. Does HANNA Z have a written policy regarding retention of all MCOFA contracted program and fiscal records for six (6) years?

_X__ Yes ____ No

2f. What provisions has HANNA Z made to protect the confidentiality of customer (client) information?

Files are in secured areas and only authorized staff can access.

2g. Does HANNA Z have a procedure that allows customers (clients) as well as applicants for services to present grievances on the denial of services?

__X_ Yes ____ No

Please describe: Hanna Z provides a feedback box for participants.

2h. Does HANNA Z have a procedure to accept customer (client) feedback on service quality, service delivery methods, and service personnel?

__X_ Yes ____ No

Please describe: Hanna Z provides a feedback box for participants.

2i. Are policies and procedures in place to ensure that only eligible clients are served in MCOFA contracted programs?

_X__ Yes ____ No

Program Monitor to reference completed NYSOFA SAD Assessment

2j. Does HANNA Z make service sites and program information accessible to persons with disabilities?

_X__ Yes ____ No

Please describe: The building and all facilities are ADA compliant.

2k. Do accounting records support amounts reported on vouchers and do units of service tie in to programmatic reports?

__X_ Yes ____ No

2l. Are vouchers submitted in a timely manner?

__X_ Yes ____ No

2m. Is HANNA Z compliant with prohibitions on using public funds to support sectarian, political and lobbying activities?

_X__ Yes ____ No

3. Reporting

3a. Identify the **Name and Job Title** of the person(s) and the back-up person(s) responsible for electronic reporting via The NYSOFA Database PeerPlace, and County ContrackHQ.

Primary reporting person: Laurie Alverio
Back-up reporting person: Lauren Jewell

3b. Please identify any challenges or concerns with completing PeerPlace and/or ContrackHQ reporting:
N/A

4. Interagency Coordination

4a. Does HANNA Z have a system in place for referring clients to other services/organizations when the need for such services is identified?

_X__ Yes ____ No

Please describe: Hanna Z maintains an established referral network with physicians, hospitals, Monroe County Office for the Aging, Lifespan, social workers, care managers, home care agencies, MLTCs, the Alzheimer's Association, and other community organizations to connect participants with Additional services as needed.

4b. Has HANNA Z worked effectively with other providers and organizations in the community to facilitate coordination and minimize possible duplication of effort?

_X__ Yes ____ No

Please describe coordination and collaboration during this contract year:
Throughout the contract year, Hanna Z collaborated with healthcare providers, community organizations, caregiver support agencies, transportation providers, Monroe County Office for the Aging, and other aging-service organizations to coordinate care, reduce duplication of services, and improve access to community resources.

5. Performance Outcomes and Enhancements

5a. Satisfaction Surveys

HANNA Z	**Projected Percentage of Satisfied Clients**	**Actual Percentage of Satisfied Clients**
Satisfaction surveys	90%	90%

5b. Does the HANNA Z send out the NFCSP Quality Assurance Survey to participants annually?

__X_ Yes ____ No

Please describe procedure for administering the survey:
Caregivers are offered the survey to complete when they are approximately halfway through their anticipated maximum Respite hours.

5c. Please describe other outcomes tracked by program that demonstrate program's success:
N/A

5d. Does HANNA Z solicit input from their customers and constituents, including customers and constituents that are frail, disabled, minority, and/or low-income, on ways to make services more accessible and appealing to culturally diverse populations?

__X_ Yes ____ No

Please describe:
Hanna Z actively seeks feedback from participants and caregivers through surveys, conversations, program meetings, and ongoing communication. Feedback from individuals representing diverse backgrounds is incorporated into program planning and quality improvement efforts.

5e. Please describe general trends in responses from clients based on survey results and other collected feedback:

Participants consistently report increased socialization, improved emotional well-being, enjoyable programming, and supportive staff. Caregivers frequently report reduced stress, increased peace of mind, and appreciation for the reliable respite services provided.

5f. Were there any programmatic changes during the year that affected the scope or quality of service?

_X__ Yes ____ No

If yes, please describe briefly:
As a new program, Hanna Z expanded services throughout the year by increasing enrollment, enhancing activity programming, strengthening community partnerships, improving transportation coordination, and refining operational procedures based on participant and caregiver feedback.

5g. Please describe plans for continuous program improvement:

Hanna Z will continue expanding outreach, strengthening healthcare and community partnerships, increasing enrollment, enhancing staff training, improving caregiver supports, evaluating participant outcomes, expanding culturally responsive programming, and using quality improvement data to guide future service development.

V. Assessment Conclusion

AGENCY COMMENTS: Please describe your program's strengths and needs

Strengths: Compassionate, person-centered approach to care. Strong caregiver support and respite services.
Meaningful social, recreational, and wellness programming. Collaborative relationships with community partners.
Dedicated interdisciplinary team focused on participant independence and quality of life.
Commitment to continuous quality improvement

Needs: Continued growth in participant enrollment. Expanded outreach to underserved and culturally diverse communities. Additional transportation resources as enrollment increases.
Continued staff development and training.
Increased community awareness of available respite and adult day services.

MCOFA COMMENTS

Strengths: Hanna Z has created a program from caregivers and participants that is safe and welcoming, and which offers a wide range of activities for participants. Staff are caring and attentive and have made a positive space for attendees to enjoy. The Respite program provides an important service to caregivers who are stressed and overwhelmed. Hanna Z has made strides to work effectively with other MCOFA caregiver programs.

Needs: See agency notes above. Hanna Z can continue to build relationships with area providers to grow their program and provide seamless services between caregiver programs. Hanna Z can solidify policies and procedures between referring programs to ensure adherence to NFCSP standards.

Compliance areas in need of attention: Client contributions, see corrective action for July 2026.

From: Ernisse, April
To: Rachel Vatelman; Laurie Alverio; Julienne Ngombilekeu
Subject: Finalized evaluation and Corrective action - response required
Date: Wednesday, August 5, 2026 10:19:20 AM
Attachments: 18-PI-17 NYSOFA Contributions and Other Program Income Policy.pdf
image002.png
2025 Hanna Z Annual Evaluation.pdf
Corrective Action letter - Hanna Z 7.29.2026.pdf
Corrective action - Hanna Z July 2026.doc

Hi all,
Thank you for taking the time to meet with me for the 2025 Hanna Z MCOFA program evaluation and site visit. I have attached the final evaluation for your records.
There was one finding that requires attention. Please find the corrective action letter, and corrective action plan for your completion, due 8/31.
The NYSOFA SADS evaluation is still being finalized. I have sent over the additional documentation needed from your program in a separate email.

Finally, on behalf of our office, please pass on our gratitude to your team for the compassionate work you do with caregivers and participants at your program.

If you have questions, please let me know.

Thank you!

April Hurd Ernisse (she/her)
Program Monitor
Monroe County Office for the Aging
435 East Henrietta Rd, 3rd floor
Rochester NY 14620
(585) 753-6480 (direct)
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aprilernisse@monroecounty.gov

Monroe County Department of Human Services' Office for the Aging
2025-2026

ANNUAL PROGRAM AND SERVICE ASSESSMENT

MONROE COUNTY OFFICE FOR THE AGING
COMMUNITY-BASED SERVICES FOR THE ELDERLY
As Funded by: Older Americans Act of 2016, As Amended and NYS Funds

JEWISH FAMILY SERVICES
Information and Assistance Program

Contract Period: 4/1/2025- 3/31/2026
Funding Source: NY State CSE
Amount of Contract: $20,000

Date of Site Visit:	7/13/2026
MCOFA Monitor:	April Ernisse
President/CEO:	Deb Rosen
Program Contact(s):	Lauren Baer (585) 770-7898 Lbaer@jfsrochester.org
Other Participants:	Megan Steron, JFS Megan Weaver, JFS Carrie Michel-Wynne, JFS Carolyn Beich, MCOFA

I. Past performance/Previous recommendations

1. Review Findings

Were there findings from the prior or current year monitoring that required corrective actions to address areas of non-compliance?

___ Yes __X__ No

If Yes, were all findings from MCOFA's previous monitoring efforts satisfactorily addressed?

II. Service Activity Review

1. Units of Service

Service	Projected Units	Actual Units	% of Projection
I&A	850	3153	370%

1a. Describe reason(s) for any variances:
Clients needs continue to increase therefore the care managers are required to increase their contacts and connections with the client. The ongoing support from the care managers has increased the clients trust towards the care managers.

Program monitor and JFS discussed changes with how JFS accounted for units (I&A = contact). Also discussed the option to increase projected units in future contract year.

2. Persons Served

PROGRAM	Projected No. of Persons Served	Actual Unduplicated Number of Persons Served	% of Projection
JFS	76	86	113%

2a. Describe reason(s) for any variances:
Clients became aware of our program due to Claims Conference recertifications being due and our Care Managers assisting with the process.

JFS also noted that some survivors have moved into the County from other areas, which accounts for the number served going up, despite the aging of Holocaust survivors as a whole.

3. Service Waiting Lists

PROGRAM	Waiting List Maintained?		Average number of clients waiting for services per month	Which services are clients waiting for?
	Yes	No		
JFS		X	0	

3a. Comments:

We are not turning away any Holocaust survivors who are in need of Care Management services since locally we are the only nonprofit with partnerships with Claims Conference-funded programs.

4. Expenditures

PROGRAM	Total Projected Expenditures	Actual Expenditures	% of Projection
JFS	$20,000	$20,000	100%

4a. Describe reason(s) for any variances: N/A

PROGRAM	Persons Served	Total Expenditures	Average Cost Per Client
JFS	86	$20,000	$232.56

4b. Do costs per person appear reasonable? ___ Yes _X__No

If no, please explain: We cannot support a program with $232.56/person/year. We have other funders who assist us with paying for the cost of this program.

PROGRAM Service	Projected Unit Cost	Actual Unit Cost	Difference (+/-)
I&A	$24.15	$6.34	-$17.81

4c. Please explain any difference in Projected Unit Cost compared to Actual Unit Cost:
We completed a large number of units with our clients to coordinate deliveries of food, completing assessments, coordinating home care, and connecting them with other benefits. Our clients' needs continue to increase as they age.

Client Contributions:

4d. Is a system in place to allow clients to voluntarily and confidentially contribute to the cost of services?

_X__ Yes ____ No

Please provide a copy of a client contribution letter.
Program monitor reviewed letter, updated per NYSOFA standards.

Program	Annual Total of Client Contributions
JFS	N/A

4e. Please explain how client contributions were utilized in the program:
N/A

4f. Please share any challenges or successes in relation to client contributions:
We currently do not track if a donor is a Holocaust survivor.

4g. Additional Comments on Service Activity and Delivery:
N/A

III. Targeting Compliance

1. Populations Served

JFS	Projected Number Served	Projected % of Total Served	Actual Number Served	Actual % of Total Served
75-84 years	24	17.7%	22	26%
85 years and older	52	8%	64	74%
Lives alone	34	45.1%	33	38%
Frail and/or Individuals with Disabilities	76	28.4%	59	78%
Low Income (below 150% of poverty)	50	17.3%	54	63%

Limited English Proficiency	45	5.5%	46	53%

1a. Share successes the program has had in reaching underserved and/or underrepresented groups in the county:

The program has successfully reached an underserved older adult living in affordable housing who experiences significant barriers due to limited English proficiency, lack of transportation, and social isolation. By utilizing Language Line interpretation services, care management has ensured she can fully communicate her needs and access available resources. Regular deliveries and invitations to community events have strengthened her connection to Jewish life while reducing isolation. Through ongoing, person-centered care management, the program has addressed barriers to community engagement, access to services, and overall well-being, helping her remain connected, supported, and engaged.

1b. Share challenges or opportunities for growth in reaching underserved and/or underrepresented groups, and a plan to address these challenges in the next contract year:

Comments: We continue to face challenges in effectively serving underserved and underrepresented populations, including a lack of Russian-speaking care management staff. While interpreter services are consistently used, they are not always culturally or personally sensitive, and can limit rapport-building and the effectiveness of communication, particularly for complex or sensitive needs.

We are also seeing a growing aging population and an increase in referrals, alongside increasingly complex needs among older adults. At the same time, the broader service system—particularly housing resources—is highly strained and often unable to meet demand in a timely way. Older adults are also experiencing greater financial strain due to current economic conditions, with very limited flexible funding or financial supports available to prevent crises before they escalate.

Social isolation remains a significant concern, especially for individuals with limited informal supports, further compounding health and service needs.

Plan for the Next Contract Year

In the upcoming contract year, we will focus on strengthening culturally and linguistically responsive care, including continued use of interpreters with improved guidance for staff to ensure more culturally sensitive and effective communication. We will also explore opportunities to expand language capacity through partnerships or staffing where feasible. (ie: Volunteers and students)

We will continue to advocate for and leverage community-based and flexible funding resources to better support emergency and preventive needs, particularly for housing

instability and urgent home care needs. Efforts will also focus on improving care coordination and connections to community supports to reduce isolation.

IV. General Management Contracts & Services

1. Staffing

1a. Does JFS have adequate staff to perform the activities required under contract with MCOFA?

_X__ Yes ____ No

If no, please explain the impact on the program or service and any steps being taken to improve staffing levels:

1b. Does JFS have a training plan designed to assist staff in carrying out assigned tasks?

_X__ Yes ____ No

Please share required staff training list.
Program monitor reviewed.

1c. Would a random check of JFS's personnel files verify the type of training actually provided for staff, including the date, the presenter and his/her qualifications, and the material covered?

_X__ Yes ____ No

Please provide a personnel file for review electronically or during on-site visit.
Program monitor reviewed.

1d. Does JFS comply with Affirmative Action and Equal Opportunity guidelines?

__X_ Yes ____ No

1e. Is an EEO sign posted in a prominent location?

_X__ Yes ____ No

Where? lunch room

1f. Are reasonable accommodations made for staff and volunteers with disabilities?

_X__ Yes ____ No

Such as:
Elevator, wheelchair accessible, wide doors, ramps, some staff work remotely, etc.
We comply with the ADA.

1g. Does the JFS staffing pattern reflect the minority representation in the total population?

_X__ Yes ____ No

1h. Can JFS document outreach efforts to recruit targeted individuals to fill vacant positions?

_X__ Yes ____ No

Examples: JFS conducts outreach and recruits via local colleges, Linked In, CCSI. We also ask staff, and board to share job postings to their colleagues, friends, and social media.

2. Administrative Provisions

2a. Are staff activities consistent with prohibitions against participation in partisan activities?

_X__ Yes ____ No

2b. Are the facilities where elder services and activities take place free from political posters and other evidence of advancing one political candidate over another?

_X__ Yes ____ No

2c. Are the services carried out under MCOFA contract secular in nature?

_X__ Yes ____ No

2d. Has JFS given due recognition to the US. Administration on Aging, the NYS Office for the Aging and Monroe County Office for the Aging, as appropriate, in program/service brochures, flyers and other printed materials?

__X_ Yes ____ No

Please provide examples of printed or electronic materials with required recognition.

https://jfsrochester.org/community-partnerships/

Program Monitor reviewed.

2e. Does JFS have a written policy regarding retention of all MCOFA contracted program and fiscal records for six (6) years?

__X_ Yes ____ No

2f. What provisions has JFS made to protect the confidentiality of customer (client) information?

Care Managers keep electronic files for clients on PeerPlace- a secure platform. When handling physical documents, we take photos of the documents in a HIPAA compliant app and delete them immediately off of our phones once they are transferred to our secure database.

2g. Does JFS have a procedure that allows customers (clients) as well as applicants for services to present grievances on the denial of services?

__X_ Yes ____ No

Please describe: JFS does not deny services to Holocaust Survivors. If a client has grievances, we encourage the client to speak with their care manager first. If the issue is not resolved, we ask the client to file a formal complaint that is written detailing their concern.

2h. Does JFS have a procedure to accept customer (client) feedback on service quality, service delivery methods, and service personnel?

_X__ Yes ____ No

Please describe: JFS sends out a satisfaction survey annually.

2i. Policy and procedure in place to ensure that only eligible customers (clients) are served in MCOFA contracted programs?

_x__ Yes ____ No

Please provide most recently updated Policies and Procedures document.
Program monitor reviewed.

2j. Does JFS make service sites and program information accessible to persons with disabilities?

_X__ Yes ____ No

Please describe: JFS uses Language Line for translating. We have a connection at the University of Rochester to have materials and surveys translated. The care managers also provide home visits to clients' home or to where they are most comfortable and feel safe.

2k. Do accounting records support amounts reported on vouchers and do units of service tie in to programmatic reports?

__X_ Yes ____ No

2l. Are vouchers submitted in a timely manner?

_X__ Yes ____ No

2m. Is JFS Compliant with prohibitions on using public funds to support sectarian, political and lobbying activities?

__X_ Yes ____ No

3. Reporting

3a. Identify the **Name and Job Title** of the person(s) and the back-up person(s) responsible for electronic reporting via PeerPlace, and County Contract HQ.

Primary reporting person: Lauren Baer, Director of Care Management
Back-up reporting person: Carrie Michel-Wynne, Chief Community Services Officer

3b. Please identify any challenges or concerns with completing PeerPlace and/or ContrackHQ reporting: None

4. Interagency Coordination

4a. Does JFS have a system in place for referring clients to other services/organizations when the need for such services is identified?

__X_ Yes ____ No

Please describe:
Yes, JFS has partnerships with other local and national agencies to ensure that our clients are receiving identified services. We work with NYC-based Holocaust Survivor Programs to coordinate home care and emergency funding. We track these waitlists, home care agencies and hours, and emergency funding that we are coordinating for clients.

4b. Has JFS worked effectively with other providers and organizations in the community to facilitate coordination and minimize possible duplication of effort?

__X_ Yes ____ No

Please describe coordination and collaboration during this contract year:

During this contract year, JFS actively collaborated with community providers, coalitions, and stakeholder groups to strengthen service coordination, identify emerging needs, and minimize duplication of effort. Staff participated in the Monroe County Aging Alliance, community planning meetings, and provider networks where funding priorities, service gaps, best practices, and opportunities for collective impact were discussed.

JFS contributed to a task force focused on addressing the growing number of older adults experiencing homelessness and developing strategies to help seniors navigate complex systems and avoid housing crises. We also engaged with community leaders, including ESL, to identify trends and opportunities to better serve older adults. In addition, JFS strengthened its partnership with Sidney Hillman to identify older adults who may benefit from socialization opportunities, care management, and other supportive services.

To enhance care coordination, JFS entered into a Memorandum of Understanding (MOU) with Lifespan and remained an active member of GRAPE. Staff completed training on MyWayFinder, maintained updated agency information within the 211 resource system, and

continued operating the JFS Helpline, providing referrals and connections to community resources. JFS also participated in statewide learning and networking opportunities, including the Supportive Housing Network of New York conference, to stay informed of emerging strategies and best practices.

These collaborative efforts improved communication among providers, strengthened referral pathways, and helped ensure coordinated, efficient support for older adults throughout the community.

5. Performance Outcomes and Enhancements

5a. Satisfaction Surveys

JFS	Projected Percentage of Satisfied Clients	Actual Percentage of Satisfied Clients
Satisfaction surveys	100%	96%

5b. Please describe other outcomes tracked by program that demonstrate program's success:
We track what areas of life the care manager has helped to improve, along with what JFS can do to better serve them.

5d. Does JFS solicit input from their customers and constituents, including customers and constituents that are frail, disabled, minority, and/or low-income, on ways to make services more accessible and appealing to culturally diverse populations?

__x_ Yes ____ No

Please describe:

When we send out our satisfaction surveys, we ask what the care manager can do to better serve them.

5e. Please describe general trends in responses from clients based on survey results and other collected feedback:

Clients report that they appreciate the ease of quickly connecting with their Care Manager. They feel heard and understood by their Care Manager who takes time to connect with them by phone or in person. Clients also appreciate that we have access to the Language Line service but wish that we had a Russian-speaking Care Manager.

5f. Were there any programmatic changes during the year that affected the scope or quality of service?

_X__ Yes ____ No

If yes, please describe briefly: One of the Care Managers resigned in October 2025. We were able to hire a replacement immediately, but she had to be trained.

5g. Please describe plans for continuous program improvement:
In the fall, once our care management team is fully staffed, we will undertake a comprehensive review of our aging care management program to identify opportunities for continuous quality improvement and strengthen program delivery. This strategic review will include an assessment of program policies and procedures, home visit safety protocols, person-centered, trauma-informed (PCTI) practices, quality assurance processes, and care planning. We also plan to consult the NORC program guidelines to ensure our practices align with established standards and best practices. The findings from this review will inform program enhancements and help ensure we continue to provide high-quality, client-centered services.

V. Assessment Conclusion

AGENCY COMMENTS: Please describe your program's strengths and needs

Strengths: The program provides comprehensive, person-centered care management that addresses the complex needs of aging Holocaust survivors, many of whom face barriers related to language, transportation, social isolation, and access to services. As the only local nonprofit that assists Holocaust survivors in accessing Holocaust survivor-specific funding, benefits, and supportive programming, we provide a unique and essential service that is not available elsewhere in the community. Our care managers build trusting relationships with clients and connect them to resources that promote safety, independence, and quality of life. We work collaboratively with community partners and utilize interpreter services to ensure equitable access to care. The program is responsive to changing client needs and remains committed to continuous quality improvement.

Needs: The complexity of our clients' needs continues to grow, particularly among Holocaust survivors who often require intensive care management, coordination, and advocacy. While the program provides specialized services, the level of funding received through MCOFA is limited relative to the scope and intensity of services required. In addition, many essential community resources, including home care and other supportive services, have lengthy waitlists, increasing the need for ongoing care management, resource navigation, and client advocacy. Continued investment in staffing, program development, quality assurance, and staff training in person-centered, trauma-informed care will help ensure the program remains responsive to clients' evolving needs while maintaining high-quality service delivery.

MCOFA COMMENTS

Strengths: The JFS I&A program is a small but important program that helps to maintain stability and support for Holocaust survivors in our county. Care managers are

knowledgeable, compassionate, and trauma-informed. They are skilled in building rapport and ensuring the older adults access all the specialized benefits for which they are eligible. JFS is a trusted organization in the community, and continues to provide essential services to older adults as they age.

Needs: See agency comments above.

Compliance areas in need of attention: N/A

From: Ernisse, April
To: Lauren Baer
Cc: Carrie Michel Wynne; Beich, Carolyn
Subject: Final JFS evaluation
Date: Thursday, July 23, 2026 2:00:03 PM
Attachments: 2025-26 JFS Annual Evaluation.pdf
image002.png

Hi Lauren,
Thank you again to you and your team for taking the time to meet with us. Please find attached the finalized evaluation.

On behalf of our office, please share our gratitude to your team for the essential work you do in our community.

Thank you!

April Hurd Ernisse (she/her)
Program Monitor
Monroe County Office for the Aging
435 East Henrietta Rd, 3rd floor
Rochester NY 14620
(585) 753-6480 (direct)
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aprilernisse@monroecounty.gov

Monroe County Department of Human Services' Office for the Aging
2025-2026

ANNUAL PROGRAM AND SERVICE ASSESSMENT

MONROE COUNTY OFFICE FOR THE AGING
COMMUNITY-BASED SERVICES FOR THE ELDERLY
As Funded by: Older Americans Act of 2016, As Amended and NYS Funds

LIFESPAN
Caregiver Resource Center (CRC)

Contract Period: 1/1/2025- 3/31/2026
Funding Source: NYS Caregiver Resource Center (CRC), Title III-E Federal Caregiver, Unmet Needs
Amount of Contract: $157,481 (amended)

Date of Site Visit:	6/1/2026
MCOFA Monitor:	April Ernisse
President/CEO:	Ann Marie Cook
Program Contact:	Jody Rowe, COO jrowe@lifespan-roch.org
	Katy Allen, Division Leader Caregiver Services kallen@lifespan-roch.org 585-287-6369

I. Past performance/Previous recommendations

1. Review Findings

Were there findings from the prior or current year monitoring that required corrective actions to address areas of non-compliance?

_X__ Yes ___ No

Corrective action issued June 2025 re: NFCSP QA Survey

If Yes, were all findings from MCOFA's previous monitoring efforts satisfactorily addressed?

Yes, Lifespan began distributing and collecting results of the NFCSP QA Survey. Completion date November 2025.

II. Service Activity Review

1. Units of Service

Service	Projected Units	Actual Units	% of Projection
Caregiver Training (non-PTC)	250 (original) 500 (with Unmet Need)	689 202.5 Unmet needs	363% 41% (goes until June 2026)
Caregiver Training (Powerful Tools for Caregivers)	900	616.5	69%
Support Groups (Kinship and other)	39	33	85%
I&A	700	687	98%
CG Public Info (Caregiver Conference)	1	1	100%

Supplemental Services: Please provide a brief summary of the types of services provided:

PERS units, Homemaker Chore, Client Expenses

1a. Describe reason(s) for any variances:

We are finding that people are not as interested in attending in-person PTC series any longer. While they will come in person for one-time CG Training & Education events, the 6-week series is no longer an option many people want. More people are interested in one time CG Education & Training.

Unmet needs work is mostly being completed in 2026. In addition to the 2025 units totaling 202.5 units, another 213.5 CG Training Unmet Needs units were completed between January and March 2026. This brings the total to 416 units.

2. Persons Served

Program	Projected No. of Persons Served	Actual Unduplicated Number of Persons Served	% of Projection
CRC	**525**	**337** registered **488** total to include conference participants, which cannot be verified as unduplicated	**93%**

2a. Describe reason(s) for any variances:
This doesn't account for all of the people who attended the Kinship Conference or the Monroe County CG Conference.

Kinship Conference 2025: 23 additional caregivers.

Caregiver Conference 2025: 128 additional caregivers

Total with these additional unduplicated caregivers: 488 total

3. Service Waiting Lists

Program	Waiting List Maintained?		Average number of clients waiting for services per month	Which services are clients waiting for?
	Yes	No		
Caregiver Resource Center	X		21	PTC

3a. Comments:

4. Expenditures

Funding Source	Total Projected Expenditures	Actual Expenditures	% of Projection

CRC	$17,606	17,606	100%
III-E	$ 139,875	139,875	100%

4a. Describe reason(s) for any variances:

Program	Actual Unduplicated Persons Served	Actual Total Expenditures	Average Cost Per Client
Caregiver Resource Center	488	157,481	322.71

4b. Do costs per person appear reasonable? X Yes ___No

If no, please explain:

Service	Projected Unit Cost	Actual Unit Cost	Difference (+/-)
Caregiver Training (non-PTC)	$70.42	6.98	($63.44)
Caregiver Training (Powerful Tools for Caregivers)	$62.38	111.83	$49.45
Caregiver Support Groups	$62.38	108.80	$46.42
I&A	$62.38	113.61	$51.23
CG Public Information (CG Conference)	$37,425	15097.92	$22.327.08

4c. Please explain any difference in Projected Unit Cost compared to Actual Unit Cost: Differences in greater/lesser units than expected results in different unit costs.

Client Contributions:

4d. Is a system in place to allow clients to voluntarily and confidentially contribute to the cost of services?

_X__ Yes ____ No

Please provide a copy of a client contribution letter.

Included in registration form for caregiver training classes and QR code during conferences.

Program	Annual Total of Client Contributions

CRC	$816.84

4e. Please explain how client contributions were utilized in the program:

We receive a small amount of contributions for the program primarily for PTC classes. The funds help support direct program expenses.

4f. Please share any challenges or successes in relation to client contributions:

N/A

4g. Additional Comments on Service Activity and Delivery:

III. Targeting Compliance

1. Populations Served

CRC	Projected Number Served	Projected % of Total Served	Actual Number Served	Missing**	Actual % of Total Served
75-84 years	93	17.7%	73	1	22%
85 years and older	42	8%	13	1	4%
Hispanic	22	4.2%	10	90	3%
American Indian/Alaskan Native	1	.2%	0	90	0
Asian	11	2.2%	2	90	<1%
Black or African American	58	9.5%	39	90	12%
White, not Hispanic	430	82.1%	183	90	54%
Native Hawaiian/Pacific Islander	1	.01%	0	90	0
Lives alone	237	45.1%	19	152	6%

Frail and/or Individuals with Disabilities	149	28.4%	30	171	9%
Low Income (below 150% of poverty)	91	17.3%	27	231	8%
Low Income Minority (below 150% of poverty)	15	2.9%	6	231	2%
Limited English Proficiency	29	5.5%	UNK*	UNK*	UNK*
Kinship Caregiver (55+)	25	1%	26	0	8%
Rural	43	8.1%	13	0	4%

*LEP is only assessed during I&A phone calls

These numbers are for 1/1/25 – 12/31/25 only. They represent only part of the population served, as only CG Training is a registered service.

**Demographic data for I&A calls is difficult to collect.

1a. Share successes the program has had in reaching underserved and/or underrepresented groups in the county:

We've been able to serve a larger than population percentage of caregivers in the community who are Black/African American. I contribute this to our staff team and our long-standing, positive relationships with caregivers who are Black across the community.

1b. Share challenges or opportunities for growth in reaching underserved and/or underrepresented groups, and a plan to address these challenges in the next contract year:

Building relationships with the Latinx community is an area we will continue to focus on during the coming year.

1c. CAREGIVER RESOURCE CENTER submitted monthly or quarterly Targeted Outreach Reports to MCOFA to track outreach activities throughout the contract year?

_X__ Yes ____ No

Comments: Submitted to MCOFA by COO Jody Rowe with other agency funded programs.

IV. General Management Contracts & Services

1. Staffing

1a. Does CRC have adequate staff to perform the activities required under contract with MCOFA?

__X_ Yes ____ No

If no, please explain the impact on the program or service and any steps being taken to improve staffing levels:

1b. Does CRC have a training plan designed to assist staff in carrying out assigned tasks?

__X_ Yes ____ No

Please share required staff training list.

New staff are asked to complete all of the following:

- Lifespan general orientation (mission, vision, policies & procedures, etc.)
- Program overview and job description review
- Age-friendly communication & Lifespan communication guides
- Lifespan program overviews (videos and fast fact sheets on all LS programs)
- Overview of NYSOFA and MCOFA
- Individual meetings with each area coordinator within Caregiver services
- Peer Place training
- Case note and documentation training
- Alzheimer's Association trainings:
    - Understanding Alzheimer's and Dementia
    - Effective Communication
    - Understanding Behaviors
- Review all Resource lists
- Trualta overview
- Archangels and CII overview

- NFCSP guidelines
- Content areas dependent upon role (Kinship care, respite, legal services, home care, chore services, food assistance, community services, caregiver stress, self-care , etc.)
- Powerful Tools for Caregivers coach training
- Safe Zone Training
- Task specific training, And more

1c. i. Would a random check of CRC's personnel files verify training provided for staff, including the date, the presenter and his/her qualifications, and the material covered?

_X__ Yes ____ No

Please provide a personnel file for review electronically or during on-site visit.
Program monitor reviewed training log for Megan Vance.

1c. ii. If staff includes case managers, do they have the required qualifications to perform case management activities?

___ Yes ____ No __X__N/A

Please provide documentation of completed training(s): ie, CADER, ARCHANGELS CII training.

1d. Does CRC comply with Affirmative Action and Equal Opportunity guidelines?

_X__ Yes ____ No

1e. Is an EEO sign posted in a prominent location?

__X_ Yes ____ No

Where? Staff entry hallway

1f. Are reasonable accommodations made for staff and volunteers with disabilities?

__X_ Yes ____ No

Such as: Standing desks, ergonomic chairs. Hearing loop in meeting rooms, etc. as needed.

1g. Does the CRC staffing pattern reflect the minority representation in the total population?

__X_ Yes ____ No

If no, please describe remedial efforts:

1h. Can CRC document outreach efforts to recruit targeted individuals to fill vacant positions?

_X__ Yes ____ No

Examples: Lifespan HR Director posts all positions in a variety of locations, including online job sites, Rochester Works, churches, colleges, etc.

2. Administrative Provisions

2a. Are staff activities consistent with prohibitions against participation in partisan activities?

__X_ Yes ____ No

2b. Are the facilities where elder services and activities take place free from political posters and other evidence of advancing one political candidate over another?

__X_ Yes ____ No

2c. Are the services carried out under MCOFA contract secular in nature?

_X__ Yes ____ No

2d. Has CRC given due recognition to the US. Administration on Aging, the NYS Office for the Aging and Monroe County Office for the Aging, as appropriate, in program/service brochures, flyers and other printed materials?

_X__ Yes ____ No

Please provide examples of printed or electronic materials with required recognition.
Program monitor reviewed.

2e. Does CRC have a written policy regarding retention of all MCOFA contracted program and fiscal records for six (6) years?

X___ Yes ____ No

2f. What provisions has CRC made to protect the confidentiality of customer (client) information?

At Lifespan, we have an encrypted email policy, security measures for laptops, policies on security and confidentiality in place, All paper files are kept locked and only appropriate staff have access to the key. Electronic files are all secure. Our IT manager ensures we have secure electronic files. Also, required password changes are built into the system in a timely manner, computers have two factor authorization, computers must be locked when staff step

away and all monitors/laptop screens have privacy protectors for staff in open areas. Staff complete Corporate Compliance training annually as well, which reviews confidentiality rules, as well policies and procedures around document and information safety and security.

2g. Does CRC have a procedure that allows customers (clients) as well as applicants for services to present grievances on the denial of services?

_x__ Yes ____ No

Please describe: Lifespan has a formal grievance policy & procedure

2h. Does CRC have a procedure to accept customer (client) feedback on service quality, service delivery methods, and service personnel?

_X__ Yes ____ No

Please describe: Participants in all classes and caregiver education sessions are provided a survey to complete. Virtual sessions utilize an online survey system and a link is provided to attendees. Survey results are regularly reviewed and the information is used for continuous program improvement.

2i. Are policies and procedures in place to ensure that only eligible customers/clients are served in MCOFA contracted programs?

_X__ Yes ____ No

Eligibility for Supplemental services documented in client file.

2j. Does CRC make service sites and program information accessible to persons with disabilities?

_X__ Yes ____ No

Please describe: We have materials available in large font upon request. IN person sessions – hearing loop available in meeting rooms, Virtual sessions, captioning is used. In person sessions are all held in location that are accessible.

2k. Do accounting records support amounts reported on vouchers and do units of service tie in to programmatic reports?

_X__ Yes ____ No

2l. Are vouchers submitted in a timely manner?

__X_ Yes ____ No

2m. Is CRC compliant with prohibitions on using public funds to support sectarian, political and lobbying activities?

___X Yes ____ No

3. Reporting

3a. Identify the Name and Job Title of the person(s) and the back-up person(s) responsible for electronic reporting via PeerPlace and County ContrackHQ.

Primary reporting person: Megan Vance, Linda James
Back-up reporting person: Katy Allen

3b. Please identify any challenges or concerns with completing PeerPlace and/or ContrackHQ reporting: N/A

3c. Are case records reviewed quarterly?

_X__ Yes ____ No

4. Interagency Coordination

4a. Does CRC have a system in place for referring clients to other services/organizations when the need for such services is identified?

_X__ Yes ____ No

Please describe: Other LS referrals are made all the time to Caregiver Services, Scams, Home Safe Home and more.

4b. Has CRC worked effectively with other providers and organizations in the community to facilitate coordination and minimize possible duplication of effort?

__X_ Yes ____ No

Please describe coordination and collaboration during this contract year:

This continues to be especially significant in Kinship. We work very closely with CCFCS' Kinship program to collaborate on services for grandparents and other relative caregivers. We held all support groups at Lifespan. CFC provided lunch for each session. All additional kinship activities were organized and run by LS and CCFS together. This year we also began working with Hillside Children's Services Kinship program. Hillside helps to plan the caregiver conference, as well as invites their own participants.

We meet regularly with staff from CFC's Kinship Navigator and Kinship Care programs. We co-market activities and ensure we aren't duplicating efforts.

We meet regularly with NYSCRC Director, Doris Green to ensure we aren't duplicating Powerful Tools for Caregivers or other webinar or in-person education efforts.

CRC continues under the FLCI umbrella at Lifespan. As such, there is constant collaboration, partnering and working closely with the FLCI team.

5. Performance Outcomes and Enhancements

5a. Satisfaction Surveys

CRC	Projected Percentage of Satisfied Clients	Actual Percentage of Satisfied Clients
Satisfaction surveys	90%	95%

5b. Does CRC send out the NFCSP Quality Assurance Survey to participants annually?

_X__ Yes ____ No

Please describe procedure for administering the survey:
Bertha sends it out to all Title III-E clients across the agency.

5c. Please describe other outcomes tracked by program that demonstrate program's success:

PTC Measurement Tools are completed by all PTC attendees.

5d. Does CRC solicit input from their customers and constituents, including customers and constituents that are frail, disabled, minority, and/or low-income, on ways to make services more accessible and appealing to culturally diverse populations?

_X__ Yes ____ No

Please describe:

We regularly seek feedback from all clients, and we review all marketing materials. The FLCI Director sits on the Diversity, Equity, Inclusion, Belonging & Accessibility Committee at Lifespan and as such is actively engaged in making sure the program is diverse and inclusive. We continue to have a Spanish language option to our agency voicemail system, we continue to offer a PTC in Spanish. We did a tabling event at the recent African American Symposium held by the Alzheimer's Association. We did a thorough written material review of all LS brochures for DEI and we are ensuring that all FLCI flyers and materials are in both Spanish and English.

5e. Please describe general trends in responses from clients based on survey results and other collected feedback:

Clients report being overall happy and satisfied with services.

5f. Were there any programmatic changes during the year that affected the scope or quality of service?

___ Yes __X__ No

If yes, please describe briefly:

5g. Please describe plans for continuous program improvement:
We utilize all data collected, in particular surveys and evaluations to inform improvement. Data is reviewed after each workshop or class and then quarterly as part of reporting. This way we can see data immediately and also have a regularly set quarterly review to look at trends. We take all of this information and use it for planning and improvement.

V. Assessment Conclusion

AGENCY COMMENTS: Please describe your program's strengths and needs

Strengths: Continued from past years, being part of the larger FLCI Caregiver Services team brought great benefits to the CRC, including easier collaboration and communication. Megan continued to fully embrace her role as Caregiver Coordinator. She remained highly knowledgeable on caregiving, older adult services, and internal and external resources and supports, and provided excellent support to community caregivers and their older adult care partners.

Megan provided excellent Information & Assistance (I&A) phone support to community caregivers and consistently stayed up to date on resources. After becoming a Master Trainer for Powerful Tools for Caregivers (PTC) in 2024, she actively trained new coaches in 2025. Megan also conducted a large number of overview presentations, outreach events, and community education opportunities.

Having Linda James coordinate the Relatives Raising Children program continued to be key to its success. She remained a community expert in Kinship Care. Building on 2024 efforts, our kinship collaborations remained strong. The Kinship Care conference model proved highly valuable, and partnerships with Catholic Charities, Rochester Advocates for Children, and Hillside's kinship programs continued to strengthen service delivery.

Our ongoing collaboration with Catholic Charities for kinship programming continued to be extremely beneficial in supporting Kinship Caregiver events. We sustained Kinship Support Group (SG) activities with strong participation, benefiting both grandparents and the children in their care.

The Relatives Raising Children program continued to be well established across the region, with new kinship caregivers consistently reaching out for support. Our listing with the Kinship Navigator continued to generate referrals.

We continued to successfully utilize virtual platforms for caregiver training, Powerful Tools for Caregivers (PTC), and support groups as needed, alongside a full range of in-person offerings.

The Caregiver Conference remained a significant strength and continued to be highly successful, building on the momentum of strong attendance and positive feedback.

The Grief Support program continued to be a meaningful addition to the CRC family of services. Held monthly online, it consistently engaged approximately 6–10 participants and provided an important space for ongoing support.

Needs: N/A

MCOFA COMMENTS

Strengths: CRC is a small program that has grown in depth and reach over the past several years. The staff are experts in the field who provide compassionate, relevant, and effective services to caregivers in the community. The program provides important caregiver training classes; in addition, they have established annual caregiver conferences that have been well-received and provide valuable information and peer interaction for caregivers. CRC has been able to expand their reach to kinship caregivers through effective partnerships with other community organizations. CRC has effectively used supplemental services to creatively ease the burden of stressed caregivers.

Needs: CRC can work to more effectively collaborate with other caregiver programs within Lifespan to ensure a seamless, supportive experience for caregivers.

Compliance areas in need of attention: N/A

From: Ernisse, April
To: Katy Allen; Jody Rowe
Subject: Final CRC evaluation 2025-26
Date: Thursday, July 16, 2026 4:03:44 PM
Attachments: 2025-2026 Lifespan CRC Annual Evaluation.pdf
image002.png

Hi Katy and Jody,
Thank you again for taking the time to meet with me. Please find attached the finalized evaluation for CRC for 2025-26.
On behalf of MCOFA, please pass on my gratitude to your team for the incredible work you do for caregivers in our community!

Thanks,

April Hurd Ernisse (she/her)
Program Monitor
Monroe County Office for the Aging
435 East Henrietta Rd, 3rd floor
Rochester NY 14620
(585) 753-6480 (direct)
(585) 753-6281 (fax)
aprilernisse@monroecounty.gov

From: Ernisse, April
To: Ernisse, April
Subject: FW: March CFC EISEP Claim
Date: Wednesday, September 2, 2026 4:46:54 PM
Attachments: image002.png
image.png

On 8/25, this writer completed a review of receipts and invoices, and general ledger review for EISEP Ancillary services for March 2026. All documentation was present and in order, no compliance issues identified.

April Hurd Ernisse (she/her)
Program Monitor
Monroe County Office for the Aging
435 East Henrietta Rd, 3rd floor
Rochester NY 14620
(585) 753-6480 (direct)
(585) 753-6281 (fax)
aprilernisse@monroecounty.gov

From: Ernisse, April
Sent: Thursday, August 13, 2026 10:58 AM
To: Rorick, Leanne <leannerorick@monroecounty.gov>; Dugan, Diana (DFA) <Diana.Dugan@dfa.state.ny.us>
Subject: FW: March CFC EISEP Claim

FYI I'll be joining you on 8/25.

April Hurd Ernisse (she/her)
Program Monitor
Monroe County Office for the Aging
435 East Henrietta Rd, 3rd floor
Rochester NY 14620
(585) 753-6480 (direct)
(585) 753-6281 (fax)
aprilernisse@monroecounty.gov

From: Erin Fernaays <Erin.Fernaays@dor.org>
Sent: Thursday, August 13, 2026 10:54 AM
To: Ernisse, April <AprilErnisse@monroecounty.gov>; Jacqueline Jackson <Jacqueline.Jackson@dor.org>
Cc: Jennifer McDermott <Jennifer.McDermott@fcscharities.org>

Subject: Re: March CFC EISEP Claim

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This message came from outside your organization.

Hi April,
We have an in-person meeting on 8/25 with Leanne and Diana to discuss STAR, but we can add this to our agenda so that not everyone has to come out multiple times. I sent you the meeting invite.

Please let me know if you are available during that time and if that will work for you.

Thanks,
Erin

Erin Fernaays
Accountant
Catholic Charities, Diocese of Rochester
1150 Buffalo Road
Rochester, NY 14624
erin.fernaays@dor.org
www.ccdor.org

Catholic Charities
Diocese of Rochester

From: Ernisse, April <AprilErnisse@monroecounty.gov>
Sent: Thursday, August 13, 2026 10:19 AM
To: Erin Fernaays <Erin.Fernaays@dor.org>; Jacqueline Jackson <Jacqueline.Jackson@dor.org>
Cc: Jennifer McDermott <Jennifer.McDermott@fcscharities.org>
Subject: FW: March CFC EISEP Claim

Good morning,
Regarding below. I did not do an audit of ancillary services for the EISEP during my site visit for EISEP in June, and I would like to one prior to our NYSOFA visit in Oct. Would we be able to schedule a time I can come by and do a spot check for Ancillary services for the month of March (2026) sometime in the next few weeks? I would review the GL, voucher, unit tracker, and the invoices/receipts for Ancillary services just for that month.

Let me know if that's doable, and what times/dates would work for you. I anticipate this would take

less than an hour.

Thanks!

April Hurd Ernisse (she/her)
Program Monitor
Monroe County Office for the Aging
435 East Henrietta Rd, 3rd floor
Rochester NY 14620
(585) 753-6480 (direct)
(585) 753-6281 (fax)
aprilernisse@monroecounty.gov

From: Rorick, Leanne <leannerorick@monroecounty.gov>
Sent: Wednesday, June 3, 2026 4:45 PM
To: Jennifer McDermott <Jennifer.McDermott@fcscharities.org>; Ernisse, April <AprilErnisse@monroecounty.gov>; Dugan, Diana (DFA) <Diana.Dugan@dfa.state.ny.us>
Subject: RE: March CFC EISEP Claim

Hi Jen,

Diana and I met with Jacquie this morning to answer regarding the team's voucher/billing/match questions, and we suggested that a snapshot of the GL entries/expenses for ancillary items may be the best way to demonstrate these expenses to us monthly. During our annual assessment visit(s), April and I will audit a random month or two and request invoices and receipts to substantiate the GL entries. This seemed like much less of a hardship for you and your team to get the monthly vouchers out the door.

Let us know if you have any questions or if we can help with anything at all.

Hope you're having a great week!

Leanne

Leanne Rorick
Aging Services Administrator
Monroe County Office for the Aging
435 East Henrietta Rd, 3rd floor
Rochester NY 14620
(585) 753-6517 (direct)

(585) 490-9655 (cell)
(585) 753-6281 (fax)
leannerorick@monroecounty.gov

From: Jennifer McDermott <Jennifer.McDermott@fcscharities.org>
Sent: Wednesday, June 3, 2026 3:34 PM
To: Ernisse, April <AprilErnisse@monroecounty.gov>; Dugan, Diana (DFA) <Diana.Dugan@dfa.state.ny.us>; Rorick, Leanne <leannerorick@monroecounty.gov>
Subject: RE: March CFC EISEP Claim

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Hello,
Can you please clarify if the missing invoices/bills are just for the Other Ancillary purchases like the home repairs? Or was MCOFA looking for all of the aide agency/provider bills too?
It is a huge stack and I know your system does not let through large PDF files attached to emails so I am wondering if a drop off makes sense. I know that the check requests are processed through our Financial Edge system and the documents are uploaded there so I am not clear how easy it is to pull them back out in aggregate or if we should re-scan them a different way. I will pass on your request to Jacquie again. Thanks - Jen

From: Ernisse, April <AprilErnisse@monroecounty.gov>
Sent: Wednesday, June 3, 2026 3:22 PM
To: Dugan, Diana (DFA) <Diana.Dugan@dfa.state.ny.us>; Rorick, Leanne
~~~~~~~~~~~~~~~~~~~~~~

<leannerorick@monroecounty.gov>
Cc: Jennifer McDermott <Jennifer.McDermott@fcscharities.org>; Howard, Katherine <katherinehoward@monroecounty.gov>
Subject: RE: March CFC EISEP Claim

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- If suspicious, use the report phishing button or forward to phishing@dor.org immediately.

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Hi Diana,
I am off next week.
Leanne – we are holding the voucher, waiting on documentation for ancillary services. Would you mind signing off on the voucher when we get those from CCFCS fiscal? I will put in your mailbox.

Thanks,

April Hurd Ernisse
Program Monitor
Monroe County Office for the Aging
435 East Henrietta Rd, 3rd floor
Rochester NY 14620
(585) 753-6480 (direct)
(585) 753-6281 (fax)
aprilernisse@monroecounty.gov

From: Dugan, Diana (DFA) <Diana.Dugan@dfa.state.ny.us>
Sent: Wednesday, June 3, 2026 3:18 PM
To: Rorick, Leanne <leannerorick@monroecounty.gov>; Ernisse, April <AprilErnisse@monroecounty.gov>
Subject: March CFC EISEP Claim

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Just a heads up. The final claim for the State EISEP program ending 03/31/26 is due no later than
~~~~~~~~~~~~~~~~~~~~~~~~

6/30/26. The final March CFC EISEP claim needs to be paid before I can file the state claim. If possible please approve by 6/12/26 we need to get this into SAP by 6/16/26 in order to make the 6/19/26 check run.

Diana Dugan

Monroe County-Dept of Human Services
111 Westfall Road Room 356
Rochester NY 14620

Phone (585)753-6450

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Monroe County Department of Human Services' Office for the Aging
2025-2026

ANNUAL PROGRAM AND SERVICE ASSESSMENT

MONROE COUNTY OFFICE FOR THE AGING
COMMUNITY-BASED SERVICES FOR THE ELDERLY
As Funded by: Older Americans Act of 2016, As Amended and NYS Funds

LIFESPAN
Eldersource

Contract Period: 1/1/2025- 3/31/2026
Funding Sources: Federal Title III-E Caregiver, NYS Community Services for the Elderly (CSE), Unmet Needs
Amount of Contract: $564,994 (amended)

Date of Site Visit:	5/28/2026
MCOFA Monitor:	April Ernisse
President/CEO:	Ann Marie Cook
Program Contact:	Brittany Flanagan, Director of Eldersource (585) 244-8400 ext. 197 bflanagan@lifespan-roch.org
Additional Participants:	Christine Peck, VP for Program

I. Past performance/Previous recommendations

1. Review Findings

Were there findings from the prior or current year monitoring that required corrective actions to address areas of non-compliance?

_X__ Yes ___ No

Corrective action issued June 2025 re: NFCSP QA Survey

If Yes, were all findings from MCOFA's previous monitoring efforts satisfactorily addressed?

Yes, Lifespan Eldersource began distributing and collecting results of the NFCSP QA Survey. Completion date November 2025.

II. Service Activity Review

1. Units of Service

Service	Projected Units	Actual Units	% of Projection
I&A (older adults and caregivers)	9,411 (original) 10,357 (with Unmet Need)	12,362 Not yet captured	119% (original)
Public Information	45	37	82%
Assistance - Case Management	660	160.5	24%

Supplemental Services: Please provide a brief summary of the types of services provided:

- In 2025, we arranged and paid approximately $12,000 in supplemental services for caregivers to help alleviate need and lessen burden that can come along with caregiving, especially when it is unexpected.
    - Some of the services we arranged and paid for included monthly PERS units, home delivered meals, medical transportation, groceries, companion care, phone bill, moving expense (to move in with caregiver), incontinence supplies and more

1a. Describe reason(s) for any variances:

- Public Information- We had some staff turnover which resulted in fewer presentations at senior centers due to shifting coverage.

- Case Management- Shifting to a new assessment tool (Arch Angels) from TCARE (which was new in 2024) and capturing units in (case management) hours rather than (I&A) contacts took some adjusting for care managers. We got to a better place toward the end of 2025 which has set us up for success going forward. Care managers were able to see the impact of providing case management and supplemental services in a few very successful cases which has excited the team and empowered them to embrace this new service delivery for our program.

2. Persons Served

PROGRAM	Projected No. of Persons Served	Actual Unduplicated Number of Persons Served	% of Projection
Eldersource	1,850 (original) 2,007 (with Unmet Need)	1589 older adults 391 Caregivers 1980 Total	107% (Original)

2a. Describe reason(s) for any variances: Unmet Need goal extended to June 2026, units and people served began being captured in February 2026. The figures above do not capture unmet needs.

3. Service Waiting Lists

PROGRAM	Waiting List Maintained?		Average number of clients waiting for services per month	Which services are clients waiting for?
	Yes	No		
Eldersource	X		66	I & A and Case Management

3a. Comments: Average per month who waited an additional 3-21 days to be assigned to a care manager.

Wait time is generally 10-15 business days, with the current wait time down to about 1 week. Lifespan staff also follows up with clients who are waiting longer than normal to ensure they stay connected.

4. Expenditures

PROGRAM	Total Projected Expenditures	Actual Expenditures	% of Projection

Eldersource	$481,660 $564,994 (amended with Unmet Need)	481,660	100%

4a. Describe reason(s) for any variances: Unmet Need goal extended to June 2026, units and people served began being captured in February 2026.

PROGRAM	Actual Number of Unduplicated Persons Served	Actual Expenditures	Average Cost Per Client
Eldersource	1980	481,660	$243.26

4b. Do costs per person appear reasonable? _X__ Yes ___No

If no, please explain:

Eldersource Service	Projected Unit Cost	Actual Unit Cost	Difference (+/-)
I&A	$45.06	$27.54	- 39%
Public Info	$600	$729.73	+22%
Assistance - Case Management	$87.83	$361.16	+311%

4c. Please explain any difference in Projected Unit Cost compared to Actual Unit Cost: We did not capture as many hours of service or public information as intended, therefore inflating the cost per event/hour (unit)

Client Contributions:

4d. Is a system in place to allow clients to voluntarily and confidentially contribute to the cost of services?

_X__ Yes ____ No

Please provide a copy of a client contribution letter.
Program monitor reviewed contribution letter and notified Eldersource of needed edits for NYSOFA compliance. Eldersource will edit and send to MCOFA for approval.

Program	Annual Total of Client Contributions
Eldersource	$2,515

4e. Please explain how client contributions were utilized in the program:

Staff salaries

4f. Please share any challenges or successes in relation to client contributions:

A majority population served is low-income. We are grateful for the contributions we have received.

4g. Additional Comments on Service Activity and Delivery:

III. Targeting Compliance

1. Populations Served

ELDERSOURCE	Projected Number Served 1850	Projected % of Total Served	Actual Number Served 1980	Actual % of Total Served
75-84 years	310	17.7%	593	30%
85 years and older	140	8%	234	11.8%
Hispanic	73	4.2%	125	6.3%
American Indian/Alaskan Native	3	.2%	14	.7%
Asian	38	2.2%	43	2.1%
Black or African American	166	9.5%	431	21.7%
White, not Hispanic	1437	82.1%	1341	67.7%
Native Hawaiian/Pacific Islander	2	.01%	3	.02%
Lives alone	789	45.1%	904	45.7%
Frail and/or Individuals with Disabilities	497	28.4%	712	36%
Low Income (below 150% of poverty)	298	17.3%	657	33.2%

Low Income Minority (below 150% of poverty)	51	2.9%	333	16.8%
Limited English Proficiency	96	5.5%	125	6.3%
Rural	142	8.1%	7	.4% (federally determined by RUCA codes)

1a. Share successes the program has had in reaching underserved and/or underrepresented groups in the county:

Our continued outreach efforts have increased our projected service number for people who identify their race as Black. We have also maintained our increase in service to people who identify their ethnicity as Hispanic and people with LEP, in part due to our bi-lingual care managers, we have established trusting relationship in the Hispanic and Deaf communities and professional networks.

There has also been an effort to collect demographic data from clients, resulting in more accurate targeting data.

1b. Share challenges or opportunities for growth in reaching underserved and/or underrepresented groups, and a plan to address these challenges in the next contract year:

One area identified as an opportunity for growth in reaching the more rural NW corner of Monroe County. We plan to work closely with a local food cupboard in Brockport to connect with older residents who are accessing their area food cupboard for benefits assessment and enrollment.

Program monitor note: Instead of depending on RUCA codes, staff can designate "local rural" for areas including: Clarkson, Hamlin, Mendon, Parma, Riga, Rush, Sweden, and Wheatland.

1c. ELDERSOURCE submitted monthly or quarterly Targeted Outreach Reports to MCOFA to track outreach activities throughout the contract year?

__X_ Yes ____ No

Comments:

IV. General Management: Contracts & Services

1. Staffing

1a. Does Eldersource have adequate staff to perform the activities required under contract with MCOFA?

__X_ Yes ____ No

If no, please explain the impact on the program or service and any steps being taken to improve staffing levels:

1b. Does Eldersource have a training plan designed to assist staff in carrying out assigned tasks?

__X_ Yes ____ No

Please share required staff training list.
Program monitor reviewed.

1c. i. Would a random check of Eldersource's personnel files verify training provided for staff, including the date, the presenter and his/her qualifications, and the material covered?

_X__ Yes ____ No

Please provide a personnel file for review electronically or during on-site visit.
Program monitor reviewed training logs.

1c. ii. If staff includes case managers, do they have the required qualifications to perform case management activities?

_X__ Yes ____ No ____N/A

Please provide documentation of completed training(s): ie, CADER, ARCHANGELS CII training.
Program monitor reviewed ARCHANGELS training dates.

NYSOFA maintains a list of care managers who have completed their Arch Angels CII training, all care managers have an active unique Arch Angels link.

1d. Does Eldersource comply with Affirmative Action and Equal Opportunity guidelines?

__X_ Yes ____ No

1e. Is an EEO sign posted in a prominent location?

__X_ Yes ____ No

Where? Staff entrance

1f. Are reasonable accommodations made for staff and volunteers with disabilities?

_X__ Yes ____ No

Such as: Adaptive equipment, schedule accommodations, language resources

1g. Does the Eldersource staffing pattern reflect the minority representation in the total population?

__X_ Yes ____ No

If no, please describe remedial efforts:

1h. Can Eldersource document outreach efforts to recruit targeted individuals to fill vacant positions?

_X__ Yes ____ No

Examples: Recruitment of bilingual care managers

2. Administrative Provisions

2a. Are staff activities consistent with prohibitions against participation in partisan activities?

_X__ Yes ____ No

2b. Are the facilities where elder services and activities take place free from political posters and other evidence of advancing one political candidate over another?

_X__ Yes ____ No

2c. Are the services carried out under MCOFA contract secular in nature?

_X__ Yes ____ No

2d. Has Eldersource given due recognition to the US. Administration on Aging, the NYS Office for the Aging and Monroe County Office for the Aging, as appropriate, in program/service brochures, flyers and other printed materials?

_X__ Yes ____ No

Please provide examples of printed or electronic materials with required recognition.
Program Monitor reviewed.

2e. Does Eldersource have a written policy regarding retention of all MCOFA contracted program and fiscal records for six (6) years?

_X__ Yes ____ No

2f. What provisions has Eldersource made to protect the confidentiality of customer (client) information?
Confidentiality & HIPAA policies are in place and reinforced with staff at meetings, trainings, & during individual supervision. All clients are provided with documents regarding confidentiality and no information is shared without consent from the client. Client records are kept electronically on Peer Place - a highly secure system with HIPAA protections. A service is also in place for confidential document destruction.

2g. Does Eldersource have a procedure that allows customers (clients) as well as applicants for services to present grievances on the denial of services?

_X__ Yes ____ No

Please describe: Lifespan Policies and Procedures Manual, Policy Client complaints/grievance- 114.

2h. Does Eldersource have a procedure to accept customer (client) feedback on service quality, service delivery methods, and service personnel?

__X_ Yes ____ No

Please describe: Lifespan Policies and Procedures Manual, Policy Client complaints/grievance- 114.

2i. Does Eldersource have a Policy and procedure in place to ensure that only eligible customers (clients) are served in MCOFA contracted programs?

_X__ Yes ____ No

Please provide most updated version of Policies and Procedures.
Eldersource program policy 301

2j. Does Eldersource make service sites and program information accessible to persons with disabilities?

_X__ Yes ____ No

Please describe: Lifespan Policy and Procedure LS-100

2k. Do accounting records support amounts reported on vouchers and do units of service tie in to programmatic reports?

__X_ Yes ____ No

2l. Are vouchers submitted in a timely manner?

_X__ Yes ____ No

2m. Is Eldersource compliant with prohibitions on using public funds to support sectarian, political and lobbying activities?

_X__ Yes ____ No

3. Reporting

3a. Identify the **Name and Job Title** of the person(s) and the back-up person(s) responsible for electronic reporting via The NYSOFA Data Base PeerPlace, and County ContrackHQ.

Primary ContrackHQ person: Brittany Flanagan, Director of Eldersource
Back-up ContrackHQ person: Christine Peck, Lifespan VP of Care Coordination

3b. Please identify any challenges or concerns with completing PeerPlace and/or ContrackHQ reporting:

Navigating data transfer errors between PeerPlace databases.

3c. Are case records reviewed quarterly?

__X_ Yes ____ No

4. Interagency Coordination

4a. Does Eldersource have a system in place for referring clients to other services/organizations when the need for such services is identified?

__X_ Yes ____ No

Please describe: Referrals are identified during assessment, case work and care planning efforts. When the need for a referral is identified, the care managers make referrals based on the preferred referral method of the services/organizations which include but are not limited to referrals in PeerPlace, by fax, email, application or by phone call. See below for examples of organizations and programs.

4b. Has Eldersource worked effectively with other providers and organizations in the community to facilitate coordination and minimize possible duplication of effort?

_X__ Yes ____ No

Please describe coordination and collaboration during this contract year: Referrals are made to agencies and programs within the Aging Services Network including but not limited to: The Alzheimer's Association; Community Place of Rochester; IBERO; Jewish Family Services; LawNY; Certified and Licensed Home Care Agencies; Rochester Regional and URMC programs; Medicaid Managed LTC programs; Companion Care agencies; Loan Closets through

Town/Volunteer Ambulance or Lions Clubs; Catholic Charities Family and Community Services Emergency and Shelter Services; County Nutrition Sites; Veteran Services Agency and more.

5. Performance Outcomes and Enhancements

5a. Satisfaction Surveys

ELDERSOURCE	Projected Percentage of Satisfied Clients	Actual Percentage of Satisfied Clients
Satisfaction surveys	90%	98%

5b. Does Eldersource send out the NFCSP Quality Assurance Survey to participants annually?

__X_ Yes ____ No

Please describe procedure for administering the survey:
The NFCSP survey was mailed to caregivers who were served by Title IIIE Case Management in November of 2025. Going forward, the schedule will be to mail this survey twice each year; once in the Spring and once in Fall (May/November).

5c. Please describe other outcomes tracked by program that demonstrate program's success:

Tracking the financial sum of public benefits received by older adults who received our assistance in applying for benefits. This is tracked in a web-based reporting system accessible to NCOA grantees that allows us to track this information.

5d. Does Eldersource solicit input from their customers and constituents, including customers and constituents that are frail, disabled, minority, and/or low-income, on ways to make services more accessible and appealing to culturally diverse populations?

_X__ Yes ____ No

Please describe: We provide a variety of ways to give feedback – including written satisfaction surveys, comments on Blooming Health surveys, and online surveys – and review the feedback at both a program and agency-wide level.

5e. Please describe general trends in responses from clients based on survey results and other collected feedback:

Staff is very helpful, knowledgeable, professional, and supportive. Responses generally show gratitude for the help they have received. One commenter noted the waiting time,

expressed they wished to connect sooner.

5f. Were there any programmatic changes during the year that affected the scope or quality of service?

_X__ Yes ____ No

If yes, please describe briefly: There are enhanced opportunities to serve caregivers.

5g. Please describe plans for continuous program improvement:

Continue education and evaluation of ways to best serve family caregivers with resources such as supplemental dollars from OFA.

V. Assessment Conclusion

AGENCY COMMENTS: Please describe your program's strengths and needs

Strengths: Our strengths continue to be our staff experience, expertise and retention. Collaborative care model of the organization and many agency resources. Our staff live and work in the communities that we serve, creating trusting relationships with our older adult population.

Needs: A review of MCOFA contracts across the agency to explore opportunities to streamline funds for maximum efficiency and best-practice service delivery.

MCOFA COMMENTS

Strengths: Eldersource is a well-respected program in the community, with a reputation for caring staff and strong knowledge of aging services. The breadth of Lifespan programs and community partners allows clients to access a range of relevant services. Eldersource has been flexible in adapting to the updated standards of the National Family Caregiver Support Program, and has utilized case management and Supplemental Services well to support stressed caregivers.

Needs: Eldersource can continue to work closely with new community partners and ensure required data is accurately documented in the required statewide data system in a timely manner.

Compliance areas in need of attention: N/A

Monroe County Department of
Human Services
Office for the Aging
2025-2026

ANNUAL PROGRAM AND SERVICE ASSESSMENT

MONROE COUNTY OFFICE FOR THE AGING
COMMUNITY-BASED SERVICES FOR THE ELDERLY
As Funded by: Older Americans Act of 2016, As Amended and NYS Funds

LIFESPAN
Aging Mastery Program (AMP)

Contract Period: 4/1/2025 - 3/31/2026
Funding Source: NY State CSE
Amount of Contract: $23,839

Date of Site Visit:	5/29/2026
MCOFA Monitor:	April Ernisse
President/CEO:	Ann Marie Cook
Program Contact(s):	Sarah Otis, Program Manager (585) 287-6439 sotis@lifespan-roch.org
	Anna Stetzel, Director of Education and Training (585) 244-1800 x239 (585) 244-9114 (Fax) astetzel@lifespan-roch.org
Other participants:	Julie Battaglia, Health and Wellness Coordinator

I. Past performance/Previous recommendations

1. Review Findings

Were there findings from the prior or current year monitoring that required corrective actions to address areas of non-compliance?

___ Yes __X__ No

If Yes, were all findings from MCOFA's previous monitoring efforts satisfactorily addressed?

II. Service Activity Review

1. Units of Service

Service	Projected Units	Actual Units	% of Projection
Evidence-Based Health Promotion	560	380	68%

1a. Describe reason(s) for any variances:
We were below our projection; this class has been a challenge to enroll participants, however once the class gets going, folks remain attentive and participatory.

2. Persons Served

PROGRAM	Projected No. of Persons Served	Actual Unduplicated Number of Persons Served	% of Projection
AMP	85	64	75%

2a. Describe reason(s) for any variances:

The program has been a challenge to encourage enrollment. Lifespan has had great success; however, NCOA will be discontinuing the AMP program, effective 06/30/2026.

3. Service Waiting Lists

PROGRAM	Waiting List Maintained?		Average number of clients waiting for services per month	Which services are clients waiting for?
	Yes	No		
AMP		X	N/A	Tai Chi/SAIL

3a. Comments:

4. Expenditures

PROGRAM	Total Projected Expenditures	Actual Expenditures	% of Projection
AMP	$23,839	$23,839	100%

4a. Describe reason(s) for any variances:

PROGRAM	Persons Served	Total Expenditures	Average Cost Per Client
AMP	64	$23,839	$372.48

4b. Do costs per person appear reasonable? _X__ Yes ___No

If no, please explain: The cost is high, due to the lower number of clients served.

PROGRAM Service	Projected Unit Cost	Actual Unit Cost	Difference (+/-)
Evidence-Based Health Promotion	$41.28	$62.73	+$21.45

4c. Please explain any difference in Projected Unit Cost compared to Actual Unit Cost: Due to the lower projected units and lower than projected participants, the total cost per unit and participant was increased.

Client Contributions:

4d. Is a system in place to allow clients to voluntarily and confidentially contribute to the cost of services?

_X__ Yes ___ No

Please provide a copy of a client contribution letter.
Program monitor reviewed on website.

Program	Annual Total of Client Contributions
AMP	$10,183.85*

*Total across all 3 MCOFA funded Health and Wellness programs: Falls Prevention, AMP, and CDSMP/DSMP.

4e. Please explain how client contributions were utilized in the program:

Contributions were utilized to enhance the program, including developing a robust resource table for participants, program supplies which include books, pens, exercise DVDs, pins, note pads, and class essentials such as pens, tent cards, markers, and steno pads. Contributions were also used for light refreshments for class participants.

4f. Please share any challenges or successes in relation to client contributions:

Client contributions are utilized to enhance the program, including printing out resources for each of the topics correlating to the guest speakers, providing light healthy refreshments to participants during their classes, as well as supporting the cost of program supplies and class materials. Contributions can be a challenge, due to the difficult times older adults are facing in this challenging economic climate.

4g. Additional Comments on Service Activity and Delivery:

III. Targeting Compliance

1. Populations Served

AMP	Projected Number Served	Projected % of Total Served	Actual Number Served	Actual % of Total Served
75-84 years	15	17.7%	44	69%
85 years and older	7	8%	10	16%
Hispanic	4	4.2%	4	6.3%
American Indian/Alaskan Native	0-1	.2%	0	0
Asian	2	2.2%	2	3%

Black or African American	8	9.5%	10	16%
White, not Hispanic	70	82.1%	50	78%
Native Hawaiian/Pacific Islander	0-1	.01%	0	0
Lives alone	38	45.1%	32	50%
Frail and/or Individuals with Disabilities	24	28.4%	20	31%
Low Income (below 150% of poverty)	15	17.3%	N/A	N/A
Low Income Minority (below 150% of poverty)	3	2.9%	N/A*	N/A*
Limited English Proficiency	5	5.5%	0	0
Rural	7	8.1%	2	3%

*Income information is not collected by Health and Wellness programs.

1a. Share successes the program has had in reaching underserved and/or underrepresented groups in the county:

Lifespan's health and wellness team is known for its highly informative and fun evidence-based programming. We provide our workshops at a wide variety of settings, including recreation centers, affordable housing communities, churches, and wherever older adults congregate, feel comfortable, and have physical and emotional safety. We provide accommodations including interpreting services, larger print workbooks, and supplied participants at the Maplewood Y and Wolk sites with the Spanish version of the AMP participant workbooks. This year, we provided AMP to The Gates Recreation Center, Maplewood YMCA/Lily Café, The Gardens at Penfield, and the Henrietta Senior Center.

1b. Share challenges or opportunities for growth in reaching underserved and/or underrepresented groups, and a plan to address these challenges in the next contract year:

AMP has been a tough sell when it comes to recruitment and enrollment. With such a vast array of intriguing topics, such as healthy eating, medication management, exercise, financial fitness, advance planning, healthy relationships, fall prevention, community engagement, and the daily practice of gratitude, once participants begin their AMP experience, they continue on. Due to the fact NCOA is fully dismantling the AMP program, Lifespan will no longer be offering this under our health promotion umbrella. Since one of the highlights of the program is having a guest expert speaker share their expertise during their corresponding session, we intend to continue to utilize our brilliant speakers for 1-time presentations going forward.

1c. AMP submitted monthly or quarterly Targeted Outreach Reports to MCOFA to track outreach activities throughout the contract year?

_X__ Yes __ No

Comments:

IV. General Management: Contracts & Services

1. Staffing

1a. Does AMP have adequate staff to perform the activities required under contract with MCOFA?

_X__ Yes __ No

If no, please explain the impact on the program or service and any steps being taken to improve staffing levels:

1b. Does AMP have a training plan designed to assist staff in carrying out assigned tasks?

_X__ Yes ___ No

Please share required staff training list. (see training binder.)
Program monitor reviewed on-site.

1c. i. Would a random check of the AMP's personnel files verify training provided for staff, including the date, the presenter and his/her qualifications, and the material covered?

__X_ Yes ___ No

Please provide a personnel file for review electronically or during on-site visits. (See training binder.)
Program monitor reviewed on-site.

1c. ii. Does the AMP staff have the appropriate and up-to-date certifications/approvals to teach or lead evidence-based classes?

__X_ Yes ____ No ____N/A

Please provide documentation for review electronically or during on-site visit. (see training binder.)
Program monitor reviewed on-site.

1d. Does AMP comply with Affirmative Action and Equal Opportunity guidelines?

_X__ Yes __ No

1e. Is an EEO sign posted in a prominent location?

X___ Yes __ No

Where? Employee hallway

1f. Are reasonable accommodations made for staff and volunteers with disabilities?

_X__ Yes __ No

Such as:

Larger print handouts, audio exercise DVD, interpreting services available for all workshops. Closed captioning enabled for all virtual classes. We do inquire about ASL interpretation and other requested accommodations through our registration process. This gives potential participants the reassurance we will make accommodation ahead of time, to ensure their classes are comfortable and accessible.

With AMP including some lectures, participants with hearing or visual impairments are encouraged to sit closest to the facilitators. Again, interpreting services are provided, upon request.

We write concepts and key words on white boards and steno pads, for visual learners.

1g. Does the AMP staffing pattern reflect the minority representation in the total population?

_X__ Yes __ No

1h. Can AMP document outreach efforts to recruit targeted individuals to fill vacant positions?

_X__ Yes __ No

Examples:

Wellness team hired Assistant Health and Wellness Coordinator to provide specific connections and networking with Lifespan's more urban-centric locations (Maplewood and Wolk Cafe.) This position was eliminated in 2025, due to a loss in funding.

We were successful with running the AMP program at the Maplewood Lily Café, as 1-time presentations by a variety of presenters with various expertise. We had fantastic attendance, with 20 attendees at each session.

2. Administrative Provisions

2a. Are staff activities consistent with prohibitions against participation in partisan activities?

_X__ Yes __ No

2b. Are the facilities where elder services and activities take place free from political posters and other evidence of advancing one political candidate over another?

_X__ Yes __ No

2c. Are the services carried out under MCOFA contract secular in nature?

_X__ Yes __ No

2d. Has AMP given due recognition to the US. Administration on Aging, the NYS Office for the Aging and Monroe County Office for the Aging, as appropriate, in program/service brochures, flyers and other printed materials?

_X__ Yes __ No

Please provide examples of printed or electronic materials with required recognition. (see new Health and Wellness brochure.)
Program monitor reviewed.

2e. Does AMP have a written policy regarding retention of all MCOFA contracted program and fiscal records for six (6) years?

_X__ Yes __ No

2f. What provisions have AMP made to protect the confidentiality of customer (client) information?

Confidentiality & HIPAA policies are in place and reinforced with staff at meetings, training, & during individual supervision. All clients are provided with documents regarding confidentiality, and no information is shared without the consent of the client. Client records are kept electronically on Peer Place - a highly secure system with HIPAA protection. A service is also in place for confidential document destruction. Data from classes is collected and stored in a locked cabinet until the forms are then converted to electronic copies, and the service for confidential document destruction is utilized.

2g. Does AMP have a procedure that allows customers (clients) as well as applicants for services to present grievances on the denial of services?

X_ Yes, ____ No

Please describe:

No interested participant is denied or turned away from a Lifespan health and wellness workshop. Participants determine comfort level and appropriate topic and nature of the classes for themselves. If a class is not a good fit for an individual, the health and wellness team will work with that client to find a more suitable workshop and/or guidance on other options. The wellness team mails information out to folks who are unable to commit to a workshop, so they can review resources from the privacy of their home.

Suggested contributions are encouraged to support materials for our classes, but inability to contribute is never a barrier to participating.

In most situations, participants do not disenroll due to the program, but rather due to personal/medical situations occurring in their lives.

2h. Does AMP have a procedure to accept customer (client) feedback on service quality, service delivery methods, and service personnel?

_X__ Yes __ No

Please describe:
The **Demographic Survey is administered to participants at the first session**, collecting demographic information, diagnoses, health insurance information and participants' self-rating of health and quality of life.

The satisfaction survey is then administered to participants at the last session, inquiring about:

- Increased knowledge about lifestyle changes and ability to self-manage
- Making informed health decisions
- Improving quality of life
- Making positive changes
- Recommending the workshop to a friend

This survey includes a section for participant comments regarding information learned, feedback and suggestions, and satisfaction with the workshop. Comments and suggestions are included with reporting.

2i. Policy and procedure in place to ensure that only eligible customers (clients) are served in MCOFA contracted
programs?

_X__ Yes __ No

Please provide most recently updated Policies and Procedures document.
Lifespan P&P manual.

2j. Does AMP make service sites and program information accessible to persons with disabilities?

_X__ Yes __ No

Please describe:

Health and wellness team utilizes multiple teaching styles, including visual handouts with bold print, verbally reading materials out loud to the class, utilizing movement when appropriate, for the exercise and fall prevention units, and arranging the class in a circle, V-shape, or rainbow, to encourage group participation and discussion. As previously noted above, interpreting services are available for all our wellness classes. We also work with affordable housing communities which serve adults with disabilities. Through our work in 2025, we provided AMP to The Gardens at Penfield, an affordable housing community in Penfield, as well as to the participants at the Maplewood Lily Café. The Lily Café includes a diverse range of abilities, income levels, ethnic backgrounds, and all walks of life. All are welcome and appreciated.

2k. Do accounting records support amounts reported on vouchers and do units of service tie in to programmatic reports?

_X__ Yes __ No

2l. Are vouchers submitted in a timely manner?

_X__ Yes __ No

2m. Is AMP Compliant with prohibitions on using public funds to support sectarian, political and lobbying activities?

_X__ Yes __ No

3. Reporting

3a. Identify the **Name and Job Title** of the person(s) and the back-up person(s) responsible for electronic reporting via Peer Place, and County Contract HQ.

Primary reporting staff: Sarah Otis, Program Manager
Back-up reporting staff: Julie Battaglia, Health and Wellness Coordinator

3b. Please identify any challenges or concerns with completing Peer Place and/or ContrackHQ reporting:

There are no challenges or concerns with completing Peer Place reports or ContrackHQ outcome reporting.

4. Interagency Coordination

4a. Does AMP have a system in place for referring clients to other services/organizations when the need for such services is identified?

_X__ Yes __ No

Please describe:

Lifespan has established internal referral mechanisms for programs at Lifespan to connect clients with services they need or request within the agency. This includes NY Connects for internal referrals, as well as in collaboration with other departments such as Health Care Coordination, the Finger Lakes Caregiver Institute, with the Lifespan Lily Café at the Maplewood YMCA, Downtown Sibley Lifespan Café, and the Home Safe Home Program. We direct participants to NY Connects most consistently, for information, referral, and linkage.

Aging Mastery was held during this contract period at The Gardens at Penfield Square, Maplewood YMCA, the Gates Recreation Center, and the Henrietta Senior Center.

Health and Wellness team coordinates with multiple programs within Lifespan to link folks to additional support and services. This includes linking older adults to Health Care Coordination, care management, financial services, insurance information, or other areas of need. Linkage and coordination between Lifespan and medical providers also strengthen support to older adults challenged by living with one or multiple chronic conditions. AMP also empowers older adults to recognize their longevity as a gift, and to learn the daily practice of gratitude.

4b. Has AMP worked effectively with other providers and organizations in the community to facilitate coordination and minimize possible duplication of effort?

_X__ Yes ____ No

Please describe coordination and collaboration during this contract year:

Lifespan's wellness team also collaborates with community partners, to offer wellness classes in a variety of settings. We partner with the health systems within Monroe County, working with care managers from doctor's offices seeking educational programs for their patients from both URMC and Rochester Regional. We coordinate with affordable housing communities, such as Seneca Towers, Plymouth Gardens, Hudson Housing, Meadow Reserve, and Ellen's Place. We partner with the YMCA's, including the Maplewood Lily Café and Wolk Café at Sibley Square on Franklin Street, serving the more urban-residing residents of Monroe County. We also partner with the many older adult centers and recreation centers, which have included Chili, Gates, Greece, Webster, Henrietta, Brighton, JCC, Ogden, and Rush. We also work with communities of faith, including Bethany Presbyterian Church, Aldersgate United Methodist Church, Mount Olivet Baptist Church, Mount Vernon, Aenon, and other church groups seeking information for their respective congregations. We also provide community presentations to church groups and support groups, including the Parkinson's Foundation, and Alzheimer's Association. We utilize some of the rich material from the AMP program when developing presentations on topics such as healthy eating and gratitude. We have also partnered with the Hearing Loss Association of Rochester.

5. Performance Outcomes and Enhancements

5a. Satisfaction Surveys

AMP	Projected Percentage of Satisfied Clients	Actual Percentage of Satisfied Clients
Satisfaction surveys	95%	99%

5b. Please describe other outcomes tracked by program that demonstrate program's success:

As part of the last session's satisfaction survey, participants are encouraged to provide comments about lifestyle changes they have made, their favorite topics of the AMP workshop, and takeaways from the program. Folks have shared their favorite topics including healthy eating and hydration, financial fitness, sleep, and gratitude sessions. These

presentations are offered as part of our community presentation dashboard, based off participant feedback from the AMP classes. These presentations will continue ongoing, as 1-time offerings, as the NCOA formally dismantles the program.

5c. Does AMP solicit input from their customers and constituents, including customers and constituents that are frail, disabled, minority, and/or low-income, on ways to make services more accessible and appealing to culturally diverse populations?

_X__ Yes __ No

Please describe:

Lifespan routinely makes presentations to lower income groups and makes its services known to minority populations through publicity in the general media as well as through talks, booths and information tables at health fairs and other events sponsored by minority churches, agencies, and health care institutions.

We have also been mindful and selective with our pool of guest speakers, asking folks of different backgrounds and cultures to share their knowledge with our classes. We also offer classes at all different community settings, including recreation centers, churches, affordable housing, assisted living, rural, urban, and services and support for caregivers.

5d. Please describe general trends in responses from clients based on survey results and other collected feedback:

Feedback participants have been highly positive and upbeat; folks feel empowered by the information given by the expert guest speakers. Folks enjoyed the take- home activities, such as the home safety checklist for fall prevention, and enjoyed learning about the "My Plate" for healthy eating guidelines. Feedback also reported the classes were enjoyable, fun, and a rewarding experience. We are very sad to have the AMP program conclude but feel fortunate to have offered it while we had the opportunity to do so.

5e. Were there any programmatic changes during the year that affected the scope or quality of service?

__X_ Yes ____ No

If yes, please describe briefly:

It should be noted that the National Council on Aging has decided to discontinue the AMP program; as of June 30, 2026. Lifespan will no longer be permitted to offer the AMP program as such or be permitted to use their printed materials. We are proud of the work accomplished, and the fabulous line-up of knowledgeable guest speakers we have recruited. We will continue to offer 1-time presentations on the topics and will invite our guest speakers to continue talks on these important topics.

5f. Please describe plans for continuous program improvement:

Although the AMP program is being discontinued by the NCOA/the developers of the program, we will continue to offer the topics under the AMP umbrella as 1-time presentations and will feature the expertise of the guest speakers we are proud to collaborate with.

V. Assessment Conclusion

AGENCY COMMENTS: Please describe your program's strengths and needs

Strengths: Motivated, skilled leaders, knowledgeable guest speakers.

Needs: Funding for Health and Wellness programs.

MCOFA COMMENTS

Strengths: The Health and Wellness team implemented a successful final year of AMP. They found ways to increase engagement within sessions and keep participants enthusiastic and interested throughout the weekly classes. The Health and Wellness team continues to be dedicated to outreach to underserved individuals and groups in the community.

Needs: N/A. This is the final year of the AMP contract, as the official evidence-based program is ending.

Compliance areas in need of attention: N/A

From: Ernisse, April
To: cpeck@lifespan-roch.org; bflanagan@lifespan-roch.org
Subject: Eldersource finalized annual evaluation
Date: Wednesday, June 17, 2026 10:20:23 AM
Attachments: 2025-2026 Lifespan Eldersource Annual Evaluation.pdf
image002.png

Hi Chris and Brittany,
Thank you again for taking the time to meet with me. Please find attached the final version of the 2025-26 Eldersource annual evaluation.

On behalf of our office, please pass on our thanks and gratitude to your team for the essential work you do with older adults and caregivers in our community.

Thank you!

April Hurd Ernisse
Program Monitor
Monroe County Office for the Aging
435 East Henrietta Rd, 3rd floor
Rochester NY 14620
(585) 753-6480 (direct)
(585) 753-6281 (fax)
aprilernisse@monroecounty.gov

Monroe County Department of
Human Services
Office for the Aging
2025

ANNUAL PROGRAM AND SERVICE ASSESSMENT

MONROE COUNTY OFFICE FOR THE AGING
COMMUNITY-BASED SERVICES FOR THE ELDERLY
As Funded by: Older Americans Act of 2016, As Amended and NYS Funds

LIFESPAN
Chronic Disease Self-Management Program (CDSMP)/
Diabetes Self-Management Program (DSMP)

Contract Period: 1/1/2025- 12/31/2025
Funding Source: Federal Title IIID
Amount of Contract: $10,000

Date of Site Visit:	5/29/2026
MCOFA Monitor:	April Ernisse
President/CEO:	Ann Marie Cook
Program Contact(s):	Sarah Otis, Program Manager (585) 287-6439 sotis@lifespan-roch.org
	Anna Stetzel, Director of Education and Training (585) 244-1800 x239 (585) 244-9114 (Fax) astetzel@lifespan-roch.org
Other participants:	Julie Battaglia, Health and Wellness Coordinator

I. Past performance/Previous recommendations

1. Review Findings

Were there findings from the prior or current year monitoring that required corrective actions to address areas of non-compliance?

___ Yes __X__ No

If Yes, were all findings from MCOFA's previous monitoring efforts satisfactorily addressed?

II. Service Activity Review

1. Units of Service

Service	Projected Units	Actual Units	% of Projection
Evidence-Based Health Promotion	150	115	77%

1b. Describe reason(s) for any variances:

Although we hit our target for number of participants, we had one session discontinue due to low enrollment. This impacted on our total number of units provided, due to a shortened session.

2. Persons Served

PROGRAM	Projected No. of Persons Served	Actual Unduplicated Number of Persons Served	% of Projection
CDSMP/DSMP	25	25	100%

2a. Describe reason(s) for any variances:

3. Service Waiting Lists

PROGRAM	Waiting List Maintained?		Average number of clients waiting for services per month	Which services are clients waiting for?
	Yes	No		

CDSMP/DSMP	X		10 potential participants	DSMP

3a. Comments:

4. Expenditures

PROGRAM	Total Projected Expenditures	Actual Expenditures	% of Projection
CDSMP/DSMP	$10,000	$10,000	100%

4a. Describe reason(s) for any variances:

PROGRAM	Persons Served	Total Expenditures	Average Cost Per Client
CDSMP/DSMP	25	$10,000	$400

4b. Do costs per person appear reasonable? X__ Yes ___No

If no, please explain:

PROGRAM Service	Projected Unit Cost	Actual Unit Cost	Difference (+/-)
Health Promotion	$66.70	$86.97	+$20.27

4c. Please explain any difference in Projected Unit Cost compared to Actual Unit Cost: As noted above, classes were on the smaller side, and one class at East Rochester was discontinued due to low enrollment.

Client Contributions:

4d. Is a system in place to allow clients to voluntarily and confidentially contribute to the cost of services?

X__ Yes __ No

Please provide a copy of a client contribution letter.
Option to contribute offered via brochures and posters via QR code. Program monitor reviewed.

Program	Annual Total of Client Contributions
CDSMP/DSMP	$10,183.85*

*Total across all 3 MCOFA funded Health and Wellness programs: Falls Prevention, AMP, and CDSMP/DSMP.

4e. Please explain how client contributions were utilized in the program:

Client contributions support programming through the purchase of necessary program supplies, which includes textbooks, relaxation CD's, light refreshments, pens, tent cards, tool kits with the information from the wall charts, and marketing materials to promote and advertise the classes. Folks recognize the benefit of the programs and feel passionate about giving back to the classes.

4f. Please share any challenges or successes in relation to client contributions:

Challenges in relation to client contributions include the fact that times are tough, and incomes are fixed. Older adults are struggling to make ends meet, and we recognize the need for these workshops. One's ability to pay is not a barrier to participation in the class. As a program, contributions are essential to program sustainability.

4g. Additional Comments on Service Activity and Delivery:

III. Targeting Compliance

1. Populations Served

CDSMP/DSMP	Projected Number Served	Projected % of Total Served	Actual Number Served	Actual % of Total Served
75-84 years	5	17.7%	20	80%
85 years and older	3	8%	2	8%
Hispanic	1	4.2%	1	4.2%
American Indian/Alaskan Native	0	.2%	0	0
Asian	1	2.2%	0	0
Black or African American	2	9.5%	2	9.5%
White, not Hispanic	21	82.1%	22	88%
Native Hawaiian/Pacific Islander	0	.01%	0	0

Lives alone	11	45.1%	16	64%
Frail and/or Individuals with Disabilities	7	28.4%	2	8%
Low Income (below 150% of poverty)	4	17.3%	N/A	N/A
Low Income Minority (below 150% of poverty)	1	2.9%	N/A*	N/A*
Limited English Proficiency	2	5.5%	0	0
Rural	2	8.1%	0	0

*Income information is not collected by Health and Wellness programs.

1a. Share successes the program has had in reaching underserved and/or underrepresented groups in the county:

This past year, Lifespan has provided Living Healthy to the residents at **The Gardens at Penfield**, an affordable housing community for older adults and folks with disabilities. This promoted inclusion for folks within a lower income bracket. This location is directly across from the Eastside YMCA, which many of the residents either cannot afford or are too anxious to attend a large-scale Y class. The Y does not provide educational classes on nutrition, nor do they promote lecture-based workshops for older adults to better manage their chronic conditions. Our Living Healthy class was brought directly to the residents at The Gardens, which removed mobility challenges as well as potential financial hardships.

We also provided Living Healthy with Diabetes to the folks at the Gates Recreation Center. Included in this class was a gentleman who is deaf; we provided **interpreting services** for his 6-weeks of DSMP classes.

Health and wellness also provided a free workshop on **Living Healthy with Diabetes**, as part of our **Information and Inspiration** series of workshops we offer every May and November. We had close to 40 attendees, many of which had not attended a workshop. Feedback was very positive, serving folks who perhaps would not attend a class, but could obtain the information from a presentation.

Lifespan of Greater Rochester has staff who are proficient or who have familiarity with the following languages: Spanish, Italian, Hungarian, French, Russian, Vietnamese, Mandarin Chinese, Cantonese, Fukienese Chinese. Lifespan also has a contract with the Center for Disability Rights for ASL services which can be accessed for Deaf clients who use American Sign Language. The agency also arranges for professional interpreters for speakers of other languages through contract agencies, such as Catholic Family Center Interpreting Services, EZ Translation Services or Language Intelligence Inc. Lifespan and Eldersource have access to Language Line Solutions for phone-based interpretation in over 200 languages.

Health and Wellness include the fact we have interpreting services available and/or additional accommodation, such as language services, when promoting our classes on our website. We include the line:

"Interpreting services, additional translation services, and additional accommodations are available upon request."
Interpreting services are reserved for all classes as requested, as well as for our annual Fall Prevention Awareness Day.

Health and Wellness also trained **4 new Peer Leaders in the CDSMP in August 2025**. This was in partnership with our umbrella agency, Western NY Integrated Care Collaborative, Inc. This also met our requirement as Master Trainers, to lead a Peer Leader training every 3 years. This training was achieved over Zoom. **It should also be noted, two of the new Peer Leaders will be cross trained in Spanish, as they are bilingual coaches.**

1b. Share challenges or opportunities for growth in reaching underserved and/or underrepresented groups, and a plan to address these challenges in the next contract year:

The program could benefit from Spanish speaking instructors for better outreach to those with limited English proficiency. The team is looking at creating a "toolkit" option, that will provide concise materials for individuals who cannot sit for long periods of time, or who are not comfortable in group settings.

1c. CDSMP/DSMP submitted monthly or quarterly Targeted Outreach Reports to MCOFA to track outreach activities throughout the contract year?

_X__ Yes __ No

Comments:

IV. General Management Contracts & Services

1. Staffing

1a. Does CDSMP/DSMP have adequate staff to perform the activities required under contract with MCOFA?

X__ Yes __ No

If no, please explain the impact on the program or service and any steps being taken to improve staffing levels:

1b. Does CDSMP/DSMP have a training plan designed to assist staff in carrying out assigned tasks?

_X__ Yes __ No

Please share required staff training list. (please see NEO and checklist.) Program monitor reviewed on site.

1c. i. Would a random check of the Falls Prevention program's personnel files verify training provided for staff, including the date, the presenter and his/her qualifications, and the material covered?

_X__ Yes __ No

Please provide a personnel file for review electronically or during on-site visit. (Training binder.) Program monitor reviewed on site.

1c. ii. Does the Falls Prevention staff have the appropriate and up-to-date certifications/approvals to teach or lead evidence-based classes?

_X__ Yes ___ No ____N/A

Please provide documentation for review electronically or during on-site visit. (Training binder.) Program monitor reviewed on site.

1d. Does CDSMP/DSMP comply with Affirmative Action and Equal Opportunity guidelines?

_X__ Yes __ No

1e. Is an EEO sign posted in a prominent location?

_X__ Yes __ No

Where? Employee hallway

1f. Are reasonable accommodations made for staff and volunteers with disabilities?

_X__ Yes __ No

Such as: Larger printed materials, ADA accommodations

1g. Does the CDSMP/DSMP staffing pattern reflect the minority representation in the total population?

_X__ Yes __ No

1h. Can CDSMP/DSMP document outreach efforts to recruit targeted individuals to fill vacant positions?

_X__ Yes __ No

Examples: Healthy eating and hydration discussions at area churches and recreation centers. This included a talk with the St. Leo's Catholic Church, in Hilton. This promoted inclusion to a very rural, outlying population, which is highly underserved. We have also partnered with diabetes educators at health fairs, providing information on our Living Healthy with diabetes workshops.

2. Administrative Provisions

2a. Are staff activities consistent with prohibitions against participation in partisan activities?

_X__ Yes __ No

2b. Are the facilities where elder services and activities take place free from political posters and other evidence of advancing one political candidate over another?

_X__ Yes __ No

2c. Are the services carried out under MCOFA contract secular in nature?

_X__ Yes __ No

2d. Has CDSMP/DSMP given due recognition to the US. Administration on Aging, the NYS Office for the Aging and Monroe County Office for the Aging, as appropriate, in program/service brochures, flyers and other printed materials?

_X__ Yes __ No

Please provide examples of printed or electronic materials with required recognition. (please see new Health and Wellness brochure.)
Program monitor reviewed on site.

2e. Does CDSMP/DSMP have a written policy regarding retention of all MCOFA contracted program and fiscal records for six (6) years?

_X__ Yes __ No

2f. What provisions have CDSMP/DSMP made to protect the confidentiality of customer (client) information?

Confidentiality & HIPAA policies are in place and reinforced with staff at meetings, trainings, & during individual supervision. All clients are provided with documents regarding confidentiality, and no information is shared without the consent of the client. Client records are kept electronically on Peer Place - a highly secure system with HIPAA protection. A service is also in place for confidential document destruction. Data from classes is collected and stored in a locked cabinet until the forms are then converted to electronic copies, and the service for confidential document destruction is utilized.

2g. Does CDSMP/DSMP have a procedure that allows customers (clients) as well as applicants for services to present grievances on the denial of services?

_X__ Yes __ No

Please describe:
No interested participant is denied or turned away from a Lifespan health and wellness workshop. If a class is not a good fit for an individual, health and wellness team will work with that client to find a more suitable workshop and/or guidance on other options. If an older adult expressed that a Zoom class was too daunting or was not a good fit, wellness team would

send them materials in the mail and would also keep them informed if/when in-person classes would be resuming.

Suggested contributions are encouraged towards materials, but inability to contribute financially is not a requirement or barrier to participating in a class.

2h. Does CDSMP/DSMP have a procedure to accept customer (client) feedback on service quality, service delivery methods, and service personnel?

_X__ Yes __ No

Please describe:

The **participant information survey** is administered to participants at the first session, collecting demographic information, diagnoses, health insurance information and participants' self-rating of health and quality of life. If someone has registered for a class prior to its start date, a phone interview with the survey questions is an option.

The **participant satisfaction survey** was conducted among participants at the last session, inquiring about:

- Increased knowledge about lifestyle changes
- Dealing more effectively with health
- Improving quality of life
- Making positive changes
- Recommending the workshop to a friend

This survey includes a section for participant comments regarding information learned, feedback and suggestions, and satisfaction with the workshop. The Health and Wellness team reviews the feedback and adjusts as able.

Lifespan's wellness team is now under the license/umbrella of the Western NY Integrated Care Collaborative, Inc., which also serves to connect the dots among participants and their feedback regarding completed courses. WNYICC monitors the licenses, oversees the data for both Rochester and Buffalo. WNYICC also provides follow-up phone calls.

2i. Policy and procedure in place to ensure that only eligible customers (clients) are served in MCOFA contracted
programs?

_X__ Yes __ No

Please provide most recently updated Policies and Procedures document.
Lifespan P&P

2j. Does CDSMP/DSMP make service sites and program information accessible to persons with disabilities?

_X__ Yes __ No

Please describe:

Lifespan provided CDSMP/Living Healthy workshop at **The Gardens at Penfield Square**, an affordable housing community in Penfield, where older adults and folks with disabilities reside. The class was highly successful, bringing participants with varying chronic conditions together to share their symptoms, and to learn ways to better self-manage their diseases.

Health and wellness implemented interpreting services for our Living Healthy with Diabetes workshop held at the Gates Recreation Center.

2k. Do accounting records support amounts reported on vouchers and do Units of service tie into programmatic reports?

_X__ Yes __ No

2l. Are vouchers submitted in a timely manner?

_X__ Yes __ No

2m. Is CDSMP/DSMP Compliant with prohibitions on using public funds to support sectarian, political and lobbying activities?

_X__ Yes __ No

3. Reporting

3a. Identify the **Name and Job Title** of the person(s) and the back-up person(s) responsible for electronic reporting via PeerPlace, and County Contract HQ.

Primary reporting person: **Sarah Otis, Program Manager**
Back-up reporting person: Julie Battaglia, Health and Wellness Coordinator

3b. Please identify any challenges or concerns with completing PeerPlace and/or ContrackHQ reporting:

There are no challenges or concerns to report with regards to completing Peer Place and ContrackHQ unit reporting.

4. Interagency Coordination

4a. Does CDSMP/DSMP have a system in place for referring clients to other services/organizations when the need for such services is identified?

_X__ Yes __ No

Please describe:

Health and Wellness is a department of much collaboration and working together with community partners, from retirement communities to recreation centers, senior centers, affordable housing communities, our multi-purpose centers (MARCs) through the Maplewood

Y, Wolk Downtown Café, JCC, and, doctor's offices, churches, support groups, the Alzheimer's Association, Rainbow Seniors ROC, and the health systems.

We partner with the Hearing Loss Association and provide interpreting services for all individuals who request these services for inclusion and connectivity. We are proud to report, we had a gentleman participate in Living Healthy with Diabetes and utilized interpreting services through the Sign Language Connection agency.

4b. Has CDSMP/DSMP worked effectively with other providers and organizations in the community to facilitate coordination and minimize possible duplication of effort?

_X__ Yes ____ No

Please describe coordination and collaboration during this contract year:

Lifespan has established internal referral mechanisms for programs at Lifespan to connect clients with services they need or request within the agency. This includes NY Connects for internal referrals, as well as in collaboration with other departments such as Health Care Coordination, the Finger lakes Caregiver Institute, with the Lifespan Lily Café at the Maplewood YMCA, Thurston Rd. Resource Center, Downtown Sibley Lifespan Café, and the Home Safe Home Program.

Health and Wellness team coordinates with multiple programs within Lifespan to link folks to additional support and services. This includes linking older adults to Health Care Coordination, care management, financial services, insurance information, or other areas of need. Linkage and coordination between Lifespan and medical providers also strengthen support to older adults challenged by living with one or multiple chronic conditions. Participants in a Living Healthy workshop are given support and information to address their concerns posed by living with a chronic condition, as well as physical, emotional, social, and financial hardships facing older adults in Monroe County. We also link folks to additional outside support, referring folks to housing options, recreation opportunities, and resources per their request.

Lifespan's wellness team also collaborates with community partners, to offer wellness classes in a variety of settings. We partner with the health systems within Monroe County, working with care managers from doctor's offices seeking educational programs for their patients. We partner with affordable housing communities across the county, such as **Plymouth Gardens**, **Ellen's Place**, **Meadow Reserve**, and **Hudson Housing** with Rochester General. **We offered Living Healthy at The Gardens at Penfield Square, an affordable housing community. This was in partnership with Episcopal Senior Life Communities.**

We partner with the YMCA's, including the Maplewood Lily Café, Downtown Café on Franklin Street, and Thurston Rd. YMCA, serving the more urban-residing residents of Monroe County. We also partner with the many senior centers and recreation centers, which have included Chili, Webster, Greece, Gates, Brighton, JCC, Ogden, and Rush.

We also work with communities of faith, including Aldersgate United Methodist Church, Mount Vernon Baptist Church, Mount Olivet Baptist Church, and Aenon Baptist Church.

5. Performance Outcomes and Enhancements

5a. Satisfaction Surveys

CDSMP/DSMP	Projected Percentage of Satisfied Clients	Actual Percentage of Satisfied Clients
Satisfaction surveys	95%	99%

5b. Please describe other outcomes tracked by program that demonstrate program's success:

The participant satisfaction survey is conducted to participants at the last session, inquiring about:

- Increased knowledge about lifestyle changes
- Dealing more effectively with health
- Improving quality of life
- Making positive changes
- Recommending the workshop to a friend

Lifespan is now under the Western NY Integrated Care Collaborative, Inc. for our Living Healthy and Living Healthy with Diabetes programs. WNYICC provides follow-up phone calls to graduates for ongoing feedback and discussion.

We are excited to offer the Living Healthy program at the Maplewood YMCA/Lily Café, for the first quarter of 2026. We will be utilizing the toolkit version of the program, which is more conducive to the participant's needs; the toolkit provides the wall chart in a booklet for each participant. This ensures all resource materials are directly in the hands of participants, promoting accessibility and reinforcement of the material.

5c. Does CDSMP/DSMP solicit input from their customers and constituents, including customers and constituents that are frail, disabled, minority, and/or low-income, on ways to make services more accessible and appealing to culturally diverse populations?

_X__ Yes __ No

Please describe:

Wellness classes will be promoted through presentations at churches, community groups, retirement communities, and affordable housing communities where folks reside. We successfully launched a Living Healthy class at The Gardens at Penfield Square, an affordable housing community for older adults and folks with disabilities.

We provided a Peer Leader training this year, certifying 4 new Peer Leaders; two of these leaders will be cross trained in the Tomando/Spanish version of Living Healthy, and will be offering the class in Spanish!

We also provided an **Information and Inspiration workshop in November 2025**, held at the Lifespan main building, which was more accessible as far as obtaining information in a quick 1-day presentation, for folks who are unable to sit and attend a full 6-week, 2.5-hour each class workshop. Not all older adults can withstand sitting that long, as well as not all folks are able to financially or socially connect in a workshop setting. This provided the necessary information on **Living Healthy with Diabetes** to folks in a 1-time presentation.

5d. Please describe general trends in responses from clients based on survey results and other collected feedback:

Participants feel satisfied with the knowledge and information obtained through their involvement with our Living Healthy/Diabetes programs. They report to have an increased understanding about their chronic conditions, how to better manage their medications, how to better communicate their needs with their doctors and their families, an increased competence with making healthier food choices and incorporating exercise into their daily routines. Participants have also expressed an enhanced ability to manage their stress, as well as ways to improve their sleep, which they have learned greatly impacts their overall quality of life.

5e. Were there any programmatic changes during the year that affected the scope or quality of service?

_X__ Yes ____ No

If yes, please describe briefly:

Funding is always a major concern for our programs. We try our best to supply and equip our participants with the necessary tools to be successful. We provide light refreshments, textbooks, CD's, and other resources and print outs. Money is very tight as far as providing additional resources. Toolkits have been added as an additional expense.

5f. Please describe plans for continuous program improvement:

Our wellness team continues to provide overview presentations about our services and programs across Monroe County. We provide education to a wide cross-section of Monroe County, from Ogden to Webster, from North Greece to Honeoye Falls, to Hilton to Plymouth Gardens. Our goal is to be inclusive, to connect older adults with one another with shared concerns so they can solve problems and concerns, and develop action plans, and make informed treatment decisions, in an educated, collaborative fashion with their health care providers. We will continue to provide outreach to both urban and rural and will strive to expand and diversify.

V. Assessment Conclusion

AGENCY COMMENTS: Please describe your program's strengths and needs

Strengths: Engaging, well-prepared Peer Leaders. Collaboration among Lifespan, retirement communities, recreation centers, senior centers, churches, community groups regarding success and benefit of our classes. Lots of collaboration with interfaith communities: Aldersgate United Methodist Church, St. Leo's Catholic Church, Aenon Baptist Church, Mount Vernon Baptist Church, and Mount Olivet Baptist Church.

An ability to pivot, serve all participants, through use of multiple learning styles, interpreting services available, and meeting folks where they reside.

Needs: Our goal is to have classes with a participant size around 10-12 participants. We did move forward with a class of 3 participants, per their request, however a group size below 6 can be challenging for robust group discussion.

Additional funding would support additional tool kits and recognition for our leaders.

MCOFA COMMENTS

Strengths: CDSMP/DSMP is a small but impactful Health and Wellness program that works to minimize the negative effects of chronic disease in older adults. The Health and Wellness team is dedicated to creating engaging and interesting sessions for participants, who regularly provide positive feedback on the classes. The team also works to reach communities that are underserved and engage individuals who may be otherwise hesitant to participate.

Needs: See agency comments above.

Compliance areas in need of attention: N/A

Monroe County Department of
Human Services
Office for the Aging
2025-26

ANNUAL PROGRAM AND SERVICE ASSESSMENT

MONROE COUNTY OFFICE FOR THE AGING
COMMUNITY-BASED SERVICES FOR THE ELDERLY
As Funded by: Older Americans Act of 2016, As Amended and NYS Funds

LIFESPAN
Falls Prevention Program

Contract Period: 1/1/2025- 3/31/2026
Funding Source: Federal Title III-D, NYS CSE
Amount of Contract: $48,205

Date of Site Visit:	5/29/2026
MCOFA Monitor:	April Ernisse
President/CEO:	Ann Marie Cook
Program Contact(s):	Sarah Otis, Program Manager (585) 520-6754 sotis@lifespan-roch.org Anna Stetzel, Director of Education and Training 585-498-4022 astetzel@lifespan-roch.org
Other participants:	Julie Battaglia, Health and Wellness Coordinator

I. Past performance/Previous recommendations

1. Review Findings

Were there findings from the prior or current year monitoring that required corrective actions to address areas of non-compliance?

___ Yes _X__ No

If Yes, were all findings from MCOFA's previous monitoring efforts satisfactorily addressed?

II. Service Activity Review

1. Units of Service

Service	Projected Units	Actual Units	% of Projection
Evidence-Based Health Promotion - MOB	576	1642	285%

1a. Describe reason(s) for any variances: Participants enjoy taking additional types of classes once one session of classes is complete.

Service	Projected Units	Actual Units	% of Projection
Evidence-Based Health Promotion - Tai Chi	768	1791	233%

1b. Describe reason(s) for any variances: Participants enjoy taking additional types of classes once one session of classes is complete.

Service	Projected Units	Actual Units	% of Projection
Evidence-Based Health Promotion - SAIL	768	2278	297%

1c. Describe reason(s) for any variances: Participants enjoy taking additional types of classes once one session of classes is complete.

Service	Projected Units	Actual Units	% of Projection
Evidence-Based Health Promotion - Otago	192	235	122%

1d. Describe reason(s) for any variances:

4304 total

2. Persons Served

PROGRAM	Projected No. of Persons Served	Actual Unduplicated Number of Persons Served	% of Projection
Falls Prevention-MOB	288	560	194%

2a. Describe reason(s) for any variances:
Folks have been requesting TCA and SAIL, versus MOB; folks have expressed they want to come into class and move, rather than be involved in group discussion as well. We exceeded our numbers for TCA and SAIL, number of participants fell a bit short for MOB.

3. Service Waiting Lists

PROGRAM	Waiting List Maintained?		Average number of clients waiting for services per month	Which services are clients waiting for?
	Yes	No		
Falls Prevention-SAIL	X		30-40 participants	TCA, SAIL

3a. Comments:

4. Expenditures

PROGRAM	Total Projected Expenditures	Actual Expenditures	% of Projection
Falls Prevention	$48,205	$48,205.00	100%

4a. Describe reason(s) for any variances:

PROGRAM	Persons Served	Total Expenditures	Average Cost Per Client
Falls Prevention	560	$48,205	$86.08

4b. Do costs per person appear reasonable? X__ Yes ___No

If no, please explain:

PROGRAM Service	Projected Unit Cost	Actual Unit Cost	Difference (+/-)
III-D Health Promotion (MOB)	$35.47	$29.36	-$6.11
CSE Health Promotion (TCA/SAIL/Otago)	$16.07	$11.20	-$4.87

4c. Please explain any difference in Projected Unit Cost compared to Actual Unit Cost:

Client Contributions:

4d. Is a system in place to allow clients to voluntarily and confidentially contribute to the cost of services?

_X__ Yes __ No

Please provide a copy of a client contribution letter.
Option to contribute offered via brochures and posters via QR code. Program monitor reviewed.

Program	Annual Total of Client Contributions
Falls Prevention	$10,183.85*

*Total across all 3 MCOFA funded Health and Wellness programs: Falls Prevention, AMP, and CDSMP/DSMP.

4e. Please explain how client contributions were utilized in the program:

Client contributions are used to supplement the cost of programming for participants in the program. Contributions help this program to remain solvent and to continue to operate. No one is turned away due to inability to contribute. Contributions cover the cost of program materials, including books, weights, tent cards, office supplies for class participants, and awards to celebrate their accomplishments upon completion of a program. Contributions also support the staffing of our department, to cover the time and travel of our staff to provide health promotion opportunities across Monroe County.

4f. Please share any challenges or successes in relation to client contributions:

Participants feel a deep appreciation for our classes and are very willing and supportive to offer monetary contributions. We ask for a suggested contribution of $25 to cover the time, travel, and materials included with each program. Participants have expressed the cost-effectiveness of Lifespan classes versus attending a class through a location such as the Tai Chi studio on Blossom Rd or at a private yoga studio. Challenges include the significant fact that older adults are on a fixed income, and there are no additional dollars to put towards one's health. We work with folks to supply a contribution appropriate for their income capabilities and means; affordable housing will sometimes offer even $5 towards a class. We have found even a small contribution gives folks a sense of accountability and "skin in the game" to make efforts to attend classes. Other challenges include the fact, some sites include our classes as part of being one of their members, such as The Jewish Community Center or at the YMCA. We strive to be as inclusive as possible; however, we are confined to the rules of each individual facility.

4g. Additional Comments on Service Activity and Delivery:

III. Targeting Compliance

1. Populations Served

FALLS PREVENTION	Projected Number Served	Projected % of Total Served	Actual Number Served	Actual % of Total Served
75-84 years	51	17.7%	225	40%
85 years and older	23	8%	57	10%
Hispanic	12	4.2%	7	1.25%
American Indian/Alaskan Native	1	.2%	0	0
Asian	6	2.2%	0	0
Black or African American	27	9.5%	44	8%
White, not Hispanic	236	82.1%	476	85%
Native Hawaiian/Pacific Islander	0	.01%	0	0
Lives alone	130	45.1%	84	15%

Frail and/or Individuals with Disabilities	82	28.4%	49	8.75%
Low Income (below 150% of poverty)	50	17.3%	N/A	N/A
Low Income Minority (below 150% of poverty)	8	2.9%	N/A*	N/A*
Limited English Proficiency	16	5.5%	0	0
Rural	23	8.1%	45	8%

*Income information is not collected by Health and Wellness programs.

1a. Share successes the program has had in reaching underserved and/or underrepresented groups in the county:

Health and wellness have served multiple interfaith communities within Monroe County, African American Baptist communities specifically. We have offered Tai chi for Arthritis and Fall Prevention to the Mount Olivet Baptist Church community, as well as our SAIL classes. We also continue to offer SAIL with the Aldersgate United Methodist Church group, with a large following of around 20 participants. We have also offered Tai chi to Bethany Presbyterian Church. We also provide balance classes to the group with Mount Vernon Baptist Church.

We provide seated SAIL classes to our folks at the Wolk Café at Sibley Square. This promotes inclusion to folks with limited mobility and is culturally diverse.

We have served the rural population of Monroe County, offering both A Matter of Balance as well as Tai chi to our friends at the Ogden Senior Center.

1b. Share challenges or opportunities for growth in reaching underserved and/or underrepresented groups, and a plan to address these challenges in the next contract year:

Transportation can be a barrier, and we attempt to alleviate this barrier by bringing classes directly to the facility where folks live. Two Spanish speaking volunteers had been trained but certification has since lapsed. The new barrier then becomes more of a motivational/attitude concern, as folks will stay in their apartments instead of coming out to the community room for classes. We continue to offer classes at affordable housing communities, such as Meadow Reserve. Program manager provided 3 introductory classes at this location, and we discontinued the class due to low enrollment of 3 participants.

Our classes are not as diverse as we would hope, but we continue to offer presentations at churches and locations where folks reside, with the hope to connect, to inspire, to motivate positive changes. We have made tremendous strides to bring the interfaith communities within our scope of services, and have been successful.

1c. FALLS PREVENTION submitted monthly or quarterly Targeted Outreach Reports to MCOFA to track outreach activities throughout the contract year?

_X__ Yes __ No

Comments:

IV. General Management: Contracts & Services

1. Staffing

1a. Does Falls Prevention have adequate staff to perform the activities required under contract with MCOFA?

_X__ Yes __ No

If no, please explain the impact on the program or service and any steps being taken to improve staffing levels:

1b. Does Falls Prevention have a training plan designed to assist staff in carrying out assigned tasks?

__X_ Yes ___ No

1c. i. Would a random check of the Falls Prevention program's personnel files verify training provided for staff, including the date, the presenter and his/her qualifications, and the material covered?

_X__ Yes __ No

Please provide a personnel file for review electronically or during on-site visit.
Program monitor reviewed on site for Sarah Otis and Julie Battaglia.

1c. ii. Does the Falls Prevention staff have the appropriate and up-to-date certifications/approvals to teach or lead evidence-based classes?

X__ Yes ____ No ____N/A

Please provide documentation for review electronically or during on-site visit.
Program monitor reviewed on site for Sarah Otis and Julie Battaglia.

1d. Does Falls Prevention comply with Affirmative Action and Equal Opportunity guidelines?

_X__ Yes __ No

1e. Is an EEO sign posted in a prominent location?

_X__ Yes __ No

Where? Employee hallway

1f. Are reasonable accommodations made for staff and volunteers with disabilities?

_X__ Yes __ No

Such as: Larger printed materials, audio version of MOB participant book and exercises, interpreting services available for all classes upon request. Spanish Tai chi books are available. We are proud to have trained 3 staff from Goodwill Vision Enterprises, serving folks with visual impairments and blindness.

1g. Does the Falls Prevention staffing pattern reflect the minority representation in the total population?

__X_ Yes ___ No

1h. Can Falls Prevention document outreach efforts to recruit targeted individuals to fill vacant positions?

_X__ Yes __ No

Examples: We outreach across all locations, rural and urban, and affordable housing as well as more affluent locations.

2. Administrative Provisions

2a. Are staff activities consistent with prohibitions against participation in partisan activities?

_X__ Yes __ No

2b. Are the facilities where elder services and activities take place free from political posters and other evidence of advancing one political candidate over another?

_X__ Yes __ No

2c. Are the services carried out under MCOFA contract secular in nature?

_X__ Yes __ No

2d. Has Falls Prevention given due recognition to the US. Administration on Aging, the NYS Office for the Aging and Monroe County Office for the Aging, as appropriate, in program/service brochures, flyers and other printed materials?

_X__ Yes __ No

Please provide examples of printed or electronic materials with required recognition. (Please see new Health and Wellness brochure.)
Program monitor reviewed on site.

2e. Does Falls Prevention have a written policy regarding retention of all MCOFA contracted program and fiscal records for six (6) years?

_X__ Yes __ No

2f. What provisions have Falls Prevention been made to protect the confidentiality of customer (client) information?

Confidentiality & HIPAA policies are in place and reinforced with staff at meetings, training, & individual supervision. All clients are provided with documents regarding confidentiality, and no information is shared without the consent of the client. Client records are kept electronically on Peer Place - a highly secure system with HIPAA protection. A service is also in place for confidential document destruction. Data from classes is collected and stored in a locked cabinet until the forms are then converted to electronic copies, and the service for confidential document destruction is utilized.

2g. Does Falls Prevention have a procedure that allows customers (clients) as well as applicants for services to present grievances on the denial of services?

_X__ Yes __ No

Please describe:

No interested participant is denied or turned away from a Lifespan health and wellness workshop. If a class is not a good fit for an individual, health and wellness team will work with that client to find a more suitable workshop and/or guidance on other options. If an older adult expressed that a Zoom class was too daunting or was not a good fit, wellness team would send them materials in the mail and would also keep them informed if/when in-person classes would be resuming. There is no "denial of services" when it comes to Lifespan's health and wellness programs.

Suggested contributions are encouraged towards materials, but inability to contribute financially is not a requirement or barrier to participating in a class.

2h. Does Falls Prevention have a procedure to accept customer (client) feedback on service quality, service delivery methods, and service personnel?

_X__ Yes __ No

Please describe:

Participants in a fall prevention program through Lifespan's health and wellness programs are asked to complete a waiver/liability form, as well as a Participant Information form during session 1. The Participant Information form captures information about demographics, living arrangement, self-rating of health, and fall related questions. Fall related questions include one's fear of falling, which greatly impacts one's behavior and tendencies which can put them at further risk for falling. Participants are also asked to complete a Post Survey upon completion of the program. The hope is confidence levels will increase from session 1 to the last session, in the following areas:

- Ability to get up from fall

- Find a way to reduce falls
- Increase flexibility
- Increase physical strength
- Become steadier on my feet

2i. Policy and procedure in place to ensure that only eligible customers (clients) are served in MCOFA contracted
programs?

_X__ Yes __ No

Please provide most recently updated Policies and Procedures document.
Lifespan general P&P.

2j. Does Falls Prevention make service sites and program information accessible to people with disabilities?

_X__ Yes __ No

Please describe:

Health and wellness provide seated SAIL classes to our friends at the Wolk Café at Sibley Square, promoting inclusion to folks with higher mobility and range of motion needs. We also provide audio versions of the MOB book as requested; we trained 3 new coaches who work from Goodwill Vision Enterprises, serving folks with visual impairments or blindness.

Interpreting services are available for all classes upon request. A gentleman utilized interpreting services for Tai chi at Bethany Church.

2k. Do accounting records support amounts reported on vouchers and do units of service tie into programmatic reports?

_X__ Yes __ No

2l. Are vouchers submitted in a timely manner?

_X__ Yes __ No

2m. Is Falls Prevention Compliant with prohibitions on using public funds to support sectarian, political and lobbying activities?

_X__ Yes __ No

3. Reporting

3a. Identify the **Name and Job Title** of the person(s) and the back-up person(s) responsible for

electronic reporting via PeerPlace, and County Contract HQ.

Primary reporting person: Sarah Otis, Program Manager
Back-up reporting person: Julie Battaglia, Health and Wellness Coordinator

3b. Please identify any challenges or concerns with completing PeerPlace and/or ContrackHQ reporting:

There are no challenges or concerns with regard to the completion of Peer Place or ContrackHQ reporting requirements.

4. Interagency Coordination

4a. Does the Falls Prevention program have a system for referring clients to other services/organizations when the need for such services is identified?

_X__ Yes __ No

Please describe:
Lifespan has established internal referral mechanisms for programs at Lifespan to connect clients with services they need or request within the agency. This includes NY Connects for internal referrals, as well as in collaboration with other departments such as Health Care Coordination, the Finger Lakes Caregiver Institute, Lifespan Lily Café at the Maplewood YMCA, Downtown Sibley Lifespan Café, and Eldersource for care management. Group presentations at churches also expand the community's awareness of Lifespan, and health and wellness promote Lifespan as an agency.

Health and Wellness also promote the Home Safe Home Program, as the program installs assistive devices such as grab bars and railings to reduce the risk of falling. Home Safe Home pairs effectively with our fall prevention programs, in that the MOB program includes a home safety checklist.

4b. Has Falls Prevention worked effectively with other providers and organizations in the community to facilitate coordination and minimize possible duplication of effort?

_X__ Yes ____ No

Please describe coordination and collaboration during this contract year:

Lifespan has established partnerships with community partners for linkage and coordination between Lifespan and medical providers. This can strengthen support to older adults challenged by living with one or multiple chronic conditions. Care managers from doctor's offices call to inquire about the schedule of fall prevention offerings. Health and Wellness is also working with URMC to provide stroke prevention education.

We also work with retirement communities, offering workshops to seniors where they live; this eliminates such barriers as transportation and lack of familiarity of a location, further promoting access to older adults. This includes The Villages at Unity, Mill Landing Assisted Living, The Gardens at Penfield Square, Skyview Apartments, Plymouth Gardens, and Ellen's Place and Meadow Reserve. We also serve church groups, providing Tai chi and SAIL to the ladies with the Mount Olivet Baptist Church, SAIL with the Aldersgate United Methodist Church, and

Bethany Presbyterian Church. We also provide balance classes to the retirees of the Mount Vernon Baptist Church, as well as presentations for the folks with Aenon Baptist Church.

5. Performance Outcomes and Enhancements

5a. Satisfaction Surveys

Falls Prevention	Projected Percentage of Satisfied Clients	Actual Percentage of Satisfied Clients
Satisfaction surveys	98%	99%

5b. Please describe other outcomes tracked by programs that demonstrate program's success:

Our wellness classes have found folks returning for an additional fall prevention workshop, after their conclusion of their initial workshop. Folks oftentimes graduate from a Tai chi program and then continue with their physical activity efforts through enrollment in a SAIL class, or even another Tai chi class! We have found our graduates successfully develop a foundation of healthy behaviors, including regular movement into their routines. One of our outcome measures inquiries about one's intention to continue with physical activity, and we have found through multiple enrollments this has been achieved!

5c. Does the Falls Prevention program solicit input from their customers and constituents, including customers and constituents that are frail, disabled, minority, and/or low-income, on ways to make services more accessible and appealing to culturally diverse populations?

__X_ Yes ___ No

Please describe:

Lifespan routinely makes presentations to lower income groups and makes its services known to minority populations through publicity in the general media as well as through talks, booths and information tables at health fairs and other events sponsored by minority churches, agencies, and health care institutions. We do talks in the city of Rochester, out in suburban recreation settings, church groups, rural settings, and as requested. We strive to offer inclusive workshops where people feel welcome and heard.

5d. Please describe general trends in responses from clients based on survey results and other collected feedback:

Feedback has been overwhelmingly positive with regards to our fall prevention programs. Folks register for the following session and maintain a healthy momentum of year-long classes. Most of our sites would like for us to offer classes year-round but understand we need to "share the love" across Monroe County. Folks report an increased confidence in one's ability to manage a fall, discuss concerns with health care professionals, they report intent on keeping up with their physical activity, and would recommend Lifespan's fall

prevention programs to a friend or family member.

5e. Were there any programmatic changes during the year that affected the scope or quality of service?

___ Yes, __X__ No

If yes, please describe briefly:

5f. Please describe plans for continuous program improvement:

Lifespan's health and wellness team regularly provides update training to instructors/coaches, at a minimum of twice yearly, to ensure fidelity and consistent instruction. We also co-teach together, so we can ensure we are teaching the forms consistently and with their intended benefits. We attend updating training, skill-builders, and maintain active CPR certification as required for Tai chi. TCA recertifications are every 2 years, and SAIL every 5 years.

Program manager has been selected to become a Master Trainer in the SAIL program. Program manager serves as the Western Regional Coordinator for the ACL grant partnership with Stonybrook Hospital, "Expanding Community Evidence-Based Programming." SAIL instructor training will occur during the last quarter of 2026, with the goal of training 10 new SAIL instructors.

V. Assessment Conclusion

AGENCY COMMENTS:

Strengths: Highly motivated, well-qualified instructors. Positive feedback from participants, returning graduates in other fall prevention classes.

High demand for our classes, word of mouth indicates Lifespan's wellness classes are effective and fun!

Needs: Always need additional funding, to support our high demand for classes, as well as to provide training to instructors.

MCOFA COMMENTS

Strengths: The Falls Prevention program is a highly popular and beneficial program in the community. Participants regularly provide high praise regarding the staff as well as the overall health benefits to participating. Participants often sign up for the other Falls Prevention (ex. Otago) classes after a positive experience with their first session (ex. Tai Chi). The Health and Wellness team is enthusiastic and knowledgeable, and makes continuous efforts to reach out to underserved and underreached individuals. The program has seen an increase in Deaf participants, as well as an increase in interest for congregations in the community.

Needs: See agency comments above.

Compliance areas in need of attention: N/A

Monroe County Department of Human Services' Office for the Aging
2025-26

ANNUAL PROGRAM AND SERVICE ASSESSMENT

MONROE COUNTY OFFICE FOR THE AGING
COMMUNITY-BASED SERVICES FOR THE ELDERLY
As Funded by: Older Americans Act of 2016, As Amended and NYS Funds

LIFESPAN
Professional Assessment and Treatment for Homebound Seniors (PATHS)
Program to Encourage Active and Rewarding Lives for Seniors (PEARLS)

Contract Period: 1/1/2025- 3/31/2026
Funding Source: Federal Title IIID, NY State CSE
Amount of Contract: $58,475

Date of Site Visit:	5/28/26
MCOFA Monitor:	April Ernisse
President/CEO:	Ann Marie Cook
Program Contact:	Brittany Flanagan, Director of Eldersource (585) 244-8400 ext. 197 bflanagan@lifespan-roch.org

Additional participants: Christine Peck, VP of Program

I. Past performance/Previous recommendations

1. Review Findings

Were there findings from the prior or current year monitoring that required corrective actions to address areas of non-compliance?

___ Yes __X__ No

If Yes, were all findings from MCOFA's previous monitoring efforts satisfactorily addressed?

II. Service Activity Review

1. Units of Service

Service	Projected Units	Actual Units	% of Projection
PATHS	96	36	37.5%

1a. Describe reason(s) for any variances: Partnership staffing – JFS took approximately 6 months to hire new staff.

Service	Projected Units	Actual Units	% of Projection
PEARLS	160	103	64%

1b. Describe reason(s) for any variances: The way sessions fell in contract year resulted in fewer units – sessions are conducted more frequently and then spread out as client progresses (weekly, biweekly, monthly).

Service	Projected Units	Actual Units	% of Projection
Mental Health Screens	400	403	101%

1b. Describe reason(s) for any variances:

2. Persons Served

PROGRAM	Projected No. of Persons Served	Actual Unduplicated Number of Persons Served	% of Projection

PATHS/PEARLS/MH Screens	400	403	101%

2a. Describe reason(s) for any variances:

3. Service Waiting Lists

PROGRAM	Waiting List Maintained?		Average number of clients waiting for services per month	Which services are clients waiting for?
	Yes	No		
PATHS/PEARLS/MH Screens		X		

3a. Comments: In lieu of a waitlist, clients are connected to other community resources.

Program monitor discussed with staff about how program can document this as a type of waitlist, as demand exceeds the program's capacity to serve clients.

4. Expenditures

FUNDING	Total Projected Expenditures	Actual Expenditures	% of Projection
III-D	$24,075	$24,075	100%
CSE	$34,400	$34,400	100%

4a. Describe reason(s) for any variances:

PROGRAM	Persons Served	Total Expenditures	Average Cost Per Client
PATHS/PEARLS/MH Screens	403	$58,475	$145.10

4b. Do costs per person appear reasonable? __X_ Yes ___No

If no, please explain:

PROGRAM Service	Projected Unit Cost	Actual Unit Cost	Difference (+/-)
PATHS	$104.17	$277.77	+166.7%

PEARLS	$150.47	$259.71	+72.6%
MH Screens III-D	$89.67	CSE $89.00	-1%

4c. Please explain any difference in Projected Unit Cost compared to Actual Unit Cost: Projected units are greater than actual units provided, see comments above

Client Contributions:

4d. Is a system in place to allow clients to voluntarily and confidentially contribute to the cost of services?

_X__ Yes ____ No

Please provide a copy of a client contribution letter.

Program monitor reviewed contribution letter and notified Lifespan of needed edits for NYSOFA compliance. Lifespan will edit and send to MCOFA for approval.

Program	Annual Total of Client Contributions
PATHS/PEARLS	$2,515*

*includes Eldersource

4e. Please explain how client contributions were utilized in the program:
Staff salaries

4f. Please share any challenges or successes in relation to client contributions:
The population served is generally very low-income.

4g. Additional Comments on Service Activity and Delivery:

III. Targeting Compliance

1. Populations Served

PATHS/PEARLS	Projected Number Served	Projected % of Total Served	Actual Number Served	Actual % of Total Served
75-84 years	71	17.7%	121	30%
85 years and older	32	8%	48	11.8%

Hispanic	17	4.2%	25	6.3%
American Indian/Alaskan Native	1	.2%	3	0.7%
Asian	9	2.2%	8	2.1%
Black or African American	38	9.5%	87	21.7%
White, not Hispanic	328	82.1%	273	67.7%
Native Hawaiian/Pacific Islander	1	.01%	1	.02%
Lives alone	180	45.1%	184	45.7%
Frail and/or Individuals with Disabilities	114	28.4%	145	36%
Low Income (below 150% of poverty)	69	17.3%	134	33.2%
Low Income Minority (below 150% of poverty)	12	2.9%	68	16.8%
Limited English Proficiency	22	5.5%	25	6.3%
Rural	32	8.1%	2	0.4% (federally determined RUCA codes)*

1a. Share successes the program has had in reaching underserved and/or underrepresented groups in the county:

Our continued outreach efforts have increased our projected service number for people who identify their race as Black. We have also maintained our increase in service to people who identify their ethnicity as Hispanic and people with LEP, in part due to our bi-lingual care managers, we have established trusting relationship in the Hispanic and Deaf communities and professional networks.

1b. Share challenges or opportunities for growth in reaching underserved and/or underrepresented groups, and a plan to address these challenges in the next contract year:

One area identified as an opportunity for growth in reaching the more rural NW corner of Monroe County. We plan to work closely with a local food cupboard in Brockport to connect with older residents who are accessing their area food cupboard

Program monitor note: Instead of depending on RUCA codes, staff can designate "local rural" for areas including: Clarkson, Hamlin, Mendon, Parma, Riga, Rush, Sweden, and Wheatland.

1c. PATHS/PEARLS submitted monthly or quarterly Targeted Outreach Reports to MCOFA to track outreach activities throughout the contract year?

_X__ Yes ____ No

Comments:

IV. General Management Contracts & Services

1. Staffing

1a. Does PATHS/PEARLS have adequate staff to perform the activities required under contract with MCOFA?

_X__ Yes ___ No

If no, please explain the impact on the program or service and any steps being taken to improve staffing levels:

1b. Does PATHS/PEARLS have a training plan designed to assist staff in carrying out assigned tasks?

__X_ Yes ____ No

Please share required staff training list.
Program monitor reviewed.

1c. i. Would a random check of PATHS/PEARLS personnel files verify training provided for staff, including the date, the presenter and his/her qualifications, and the material covered?

_X__ Yes ____ No

Please provide a personnel file for review electronically or during on-site visit.
Program monitor reviewed staff training logs.

1c. ii If staff includes case managers, do they have the required qualifications to perform case management activities?

_X__ Yes ____ No ____N/A

Please provide documentation of completed training(s): PEARLS certificate

NYSOFA maintains a list of care managers who have completed their Arch Angels CII training, all care managers have an active unique Arch Angels link.

1d. Does PATHS/PEARLS comply with Affirmative Action and Equal Opportunity guidelines?

_X__ Yes ____ No

1e. Is an EEO sign posted in a prominent location?

__X_ Yes ____ No

Where? Employee entrance

1f. Are reasonable accommodations made for staff and volunteers with disabilities?

_X__ Yes ____ No

Such as: Adaptive equipment, schedule accommodations, language resources

1g. Does the PATHS/PEARLS staffing pattern reflect the minority representation in the total population?

_X__ Yes ____ No

If no, please describe remedial efforts:

1h. Can PATHS/PEARLS document outreach efforts to recruit targeted individuals to fill vacant positions?

_X__ Yes ____ No

Examples: Recruitment of bilingual care managers

2. Administrative Provisions

2a. Are staff activities consistent with prohibitions against participation in partisan activities?

_X__ Yes ____ No

2b. Are the facilities where elder services and activities take place free from political posters and other evidence of advancing one political candidate over another?

_X__ Yes ____ No

2c. Are the services carried out under MCOFA contract secular in nature?

_X__ Yes ____ No

_X__ Yes ____ No

Please describe: Lifespan Policy and Procedure LS-100

2k. Do accounting records support amounts reported on vouchers and do units of service tie in to programmatic reports?

_X__ Yes ____ No

2l. Are vouchers submitted in a timely manner?

_X__ Yes ____ No

2m. Is PATHS/PEARLS compliant with prohibitions on using public funds to support sectarian, political and lobbying activities?

_X__ Yes ____ No

3. Reporting

3a. Identify the **Name and Job Title** of the person(s) and the back-up person(s) responsible for electronic reporting via The NYSOFA Data Base PeerPlace, and County Contract HQ.

Primary ContrackHQ person: Brittany Flanagan, Director of Eldersource
Back-up ContrackHQ person: Christine Peck, Lifespan VP of Care Coordination

3b. Please identify any challenges or concerns with completing PeerPlace and/or ContrackHQ reporting:
It is challenging to separate out the different services: PATHS units, PEARLS units, and mental health evaluations.

3c. Are case records reviewed quarterly?

__X_ Yes ____ No

4. Interagency Coordination

4a. Does PATHS/PEARLS have a system in place for referring clients to other services/organizations when the need for such services is identified?

_X__ Yes ____ No

Please describe: When the need for a referral is identified, the care managers make referrals based on the preferred referral method of the services/organizations which include but are not limited to referrals in PeerPlace, by fax, email, application or by phone call. See below for collaborating agencies/programs.

4b. Has PATHS/PEARLS worked effectively with other providers and organizations in the community to facilitate coordination and minimize possible duplication of effort?

_X__ Yes ____ No

Please describe coordination and collaboration during this contract year:

Referrals are made to agencies and programs within the Aging Services Network including but not limited to: The Alzheimer's Association; Community Place of Rochester; IBERO; Jewish Family Services; LawNY; Certified and Licensed Home Care Agencies; Rochester Regional and URMC programs; Medicaid Managed LTC programs; Companion Care agencies; Loan Closets through Town/Volunteer Ambulance or Lions Clubs; Catholic Charities Family and Community Services Emergency and Shelter Services; County Nutrition Sites; Veteran Services Agency and more.

5. Performance Outcomes and Enhancements

5a. Satisfaction Surveys

PATHS/PEARLS	Projected Percentage of Satisfied Clients	Actual Percentage of Satisfied Clients
Satisfaction surveys	90%	100%

5c. Please describe other outcomes tracked by program that demonstrate program's success:
We track reduction in anxiety and depression scores in the individual counseling services (PATHS and PEARLS sessions). We consistently show a reduction in depression scores.

5d. Does PATHS/PEARLS solicit input from their customers and constituents, including customers and constituents that are frail, disabled, minority, and/or low-income, on ways to make services more accessible and appealing to culturally diverse populations?

__X_ Yes ____ No

Please describe: We provide a variety of ways to give feedback – including written satisfaction surveys, comments on Blooming Health surveys, and online surveys – and review the feedback at both a program and agency-wide level.

5e. Please describe general trends in responses from clients based on survey results and other collected feedback:
Overall positive, including improved depression scores.

5f. Were there any programmatic changes during the year that affected the scope or quality of service?

___ Yes _X___ No

If yes, please describe briefly:

5g. Please describe plans for continuous program improvement:

Considering program redesign, including potentially separating PATHS and PEARLS contracts.

V. Assessment Conclusion

AGENCY COMMENTS: Please describe your program's strengths and needs

Strengths: The practice of screening for depression and anxiety is embedded into the assessment and care planning efforts of care management. Connection to mental health supports and services and screening for areas of need for depression and anxiety resources.

Needs: Review the contract for PATHS to determine efficacy of keeping PATHS and PEARLS contracts together.

MCOFA COMMENTS

Strengths: The PATHS/PEARLS program provides a much-needed mental health service embedded within Lifespan's existing Eldersource program. Care managers are trained to provide assessment, which limits the amount of outside assessment and referrals a client must complete. Staff are well-trained and knowledgeable to serve the older adults in their community.

Needs: See agency comments above.

Compliance areas in need of attention: N/A

From: Ernisse, April
To: Jody Rowe; cpeck@lifespan-roch.org
Subject: Final Evidence-based Health Promotion program evaluations
Date: Wednesday, June 17, 2026 10:24:16 AM
Attachments: 2025 Lifespan CDSMP-DSMP Annual Evaluation.pdf
image002.png
2025-26 Lifespan Falls Prevention Annual Evaluation.pdf
2025-26 Lifespan AMP Annual Evaluation.pdf
2025-26 Lifespan PATHS-PEARLS Annual Evaluation.pdf

Hi Jody and Chris,
Please find attached the finalized annual evaluations for Falls Prevention, CDSMP, AMP, and PATHS/PEARLS. Per NYSOFA guidance, all Evidence-Based Health Promotion programs are notified together as one program.

On behalf of our office, please pass on our gratitude to your teams for the incredible work you do for older adults in our community!

Thanks,

April Hurd Ernisse
Program Monitor
Monroe County Office for the Aging
435 East Henrietta Rd, 3rd floor
Rochester NY 14620
(585) 753-6480 (direct)
(585) 753-6281 (fax)
aprilernisse@monroecounty.gov

To The Developers of Living a Healthy Life with Chronic Conditions

My Name is [redacted] I am 74 years old. I Have Had Diabetes over 34 years Now. Have Gone Through Many Changes in My Struggle with This Condition.

I Tried the pills and They did Not Work. I Then Started Taking Insulin and That Worked Fairly Well But my A1C always was High Then They Switched me to a Insulin Pump and That Worked Better But I had problems With The pump. I Had several occasions when I Had Very Low Sugars So They Took me off Pump.

Now I Take Humalog Insulin 3 Times a day on Sliding Scale and I Take a slow acting Insulin at Bed Time. My A1C Went down But would go back up because lack of Exerge & Eating would go up & down You Program Has open My Eye on What I was doing Wrong

I Have Learned to Better Control

My Eating Habits and Exerge Programs. When I have questions all I have to do is look in your Manual and get My Answers

This Program was an Excellent Program and It Has Helped me Very Much Would Recomend this To anyone Who is dealing With There many Problems

My Instructors Sue & Nancy did a fabulis Job in Presenting This Program.

I would Recomend This to anyone dealing With This, diabetics To Take This Program.

[redacted]

Monroe County Department of
Human Services
Office for the Aging
2025-2026

ANNUAL PROGRAM AND SERVICE ASSESSMENT

MONROE COUNTY OFFICE FOR THE AGING
COMMUNITY-BASED SERVICES FOR THE ELDERLY
As Funded by: Older Americans Act of 2016, As Amended and NYS Funds

LIFESPAN
Recovery and Wellness for Older Adults (RWOA)
(aka Older Adult Harm Reduction Program)

Contract Period: 4/1/2025- 3/31/2026
Funding Source: NY State CSE
Amount of Contract: $35,000

Date of Site Visit:	6/4/26
MCOFA Monitor:	April Ernisse
President/CEO:	Ann Marie Cook
Program Contact:	Paul Caccamise, Vice President for Program (585) 244-8400 x115 (585) 244-9114 (Fax) pcaccamise@lifespan-roch.org
Additional participants:	Ramona Sharp, Program Manager

I. Past performance/Previous recommendations

1. Review Findings

Were there findings from the prior or current year monitoring that required corrective actions to address areas of non-compliance?

___ Yes __X__ No

If Yes, were all findings from MCOFA's previous monitoring efforts satisfactorily addressed?

II. Service Activity Review

1. Units of Service

Service	Projected Units	Actual Units	% of Projection
Health Promotion (Not Evidence-Based)	1,230	1144	93%
Information & Assistance	200	274	137%

1a. Describe reason(s) for any variances:
R&W has had an increase in clients with complex needs that have required more linkages and referrals to community resources.

2. Persons Served

PROGRAM	Projected No. of Persons Served	Actual Unduplicated Number of Persons Served	% of Projection
RWOA	75	89	119%

2a. Describe reason(s) for any variances:

3. Service Waiting Lists

PROGRAM	Waiting List Maintained?	Average number of clients waiting	Which services are clients waiting for?

	Yes	No	for services per month	
RWOA		X	0	

3a. Comments:

4. Expenditures

PROGRAM	Total Projected Expenditures	Actual Expenditures	% of Projection
RWOA	$35,000	$35,000	100%

4a. Describe reason(s) for any variances:

PROGRAM	Persons Served	Total Expenditures	Average Cost Per Client
RWOA	89	$35,000	$393*

4b. Do costs per person appear reasonable? __X_ Yes ___No

If no, please explain: * MCOFA grant funds only

PROGRAM Service	Projected Unit Cost	Actual Unit Cost	Difference (+/-)
Health Promotion (Not Evidence-Based)/ I&A	$32.63	$24.51	-25%

4c. Please explain any difference in Projected Unit Cost compared to Actual Unit Cost: Based on total units: 1144 + 274 + 1,428. Actual cost is considerably less than the projection since units of service far surpassed expected units.

Client Contributions:

4d. Is a system in place to allow clients to voluntarily and confidentially contribute to the cost of services?

_X__ Yes ____ No

Please provide a copy of a client contribution letter.

Program	Annual Total of Client Contributions
RWOA	$1,430 (2025-2026)

4e. Please explain how client contributions were utilized in the program:

Client contributions are used to maintain the current level of service in the program.

4f. Please share any challenges or successes in relation to client contributions:
There are several clients who make contributions faithfully. They report feeling proud to give back to a program that gives a great deal to them.

The program has more clients who are struggling financially. For this annual period 44% of the clients are equal to or below 125% of the poverty level. Last year that figure was 38%. The number of clients exceeding 185% of the poverty level is decreasing. This year 26% were above 185% while the previous year there were 32% above the 185% poverty level.

4g. Additional Comments on Service Activity and Delivery:
NA

III. Targeting Compliance

1. Populations Served

RWOA	Projected Number Served	Projected % of Total Served	Actual Number Served	Actual % of Total Served
75-84 years	14	17.7%	26	26%
85 years and older	7	8%	2	2%
Hispanic	3	4.2%	0	0
American Indian/Alaskan Native	1	.2%	1	<1%
Asian	2	2.2%	0	0%
Black or African American	10	9.5%	22	25%
White, not Hispanic	61	82.1%	60	67%
Native Hawaiian/Pacific Islander	1	.01%	0	0%
Lives alone	32	45.1%	55	62%

Frail and/or Individuals with Disabilities	20	28.4%	42	47%
Low Income (below 150% of poverty)	15	17.3%	44	59%
Low Income Minority (below 150% of poverty)	3	2.9%	20	22%
Limited English Proficiency	4	5.5%	0	0%
Rural	6	8.1%	0	0%

1a. Share successes the program has had in reaching underserved and/or underrepresented groups in the county:

Through a separate small grant from Monroe County OMH, RWOA was able to provide on-site service at one of RHA's older adult housing sites in the city of Rochester. The team provides weekly "office hours" at which they arrange for speakers or they themselves present on topics related to aging services, financial health, physical health, recovery services and other topics relevant to an aged tenant group. The housing site is occupied primarily by minority older adults. As indicated above in the demographic data chart, 24% or more of clients served in 2025 were from minority groups. Lifespan, including RWOA, conducts outreach presentations to many groups throughout the year including minority groups and also attends numerous tabling events including health and service fairs at minority churches and other venues. The RWOA team made educational presentation to 189 professionals and 75 members of the general public in 2025. They also provided support to residents of the RHA housing site after a fire (which was deemed to be arson) left an entire floor of residents unhoused and the building residents traumatized.

1b. Share challenges or opportunities for growth in reaching underserved and/or underrepresented groups, and a plan to address these challenges in the next contract year:

RWOA will continue onsite outreach at Lake Tower in Rochester through 2026. Program management is also surveying opportunities for resources to expand the program's presence into other RHA older adult housing sites. A major challenge is offering services to Latino clients. The program has had Latino clients in the past but none in 2026 although Latino older adults make up approximately 4% of the older adult population in Monroe County. None of the current staff speak Spanish. Interpreter services are available but it is difficult to deliver recovery counseling through an interpreter.

RWOA has revamped its community presentation. The program title is "Take Control of your aging: Making safe choices with medications, alcohol, and other substances." RWOA is targeting low-income senior housing and well as African American senior church groups. The first presentation was received quite well and there is a presentation scheduled for Greater Harvest Church on May 30, 2026.

1c. RWOA submitted monthly or quarterly Targeted Outreach Reports to MCOFA to track outreach activities throughout the contract year?

__X_ Yes ____ No

Comments:
NA

IV. General Management Contracts & Services

1. Staffing

1a. Does RWOA have adequate staff to perform the activities required under contract with MCOFA?

__X_ Yes ____ No

If no, please explain the impact on the program or service and any steps being taken to improve staffing levels:

1b. Does RWOA have a training plan designed to assist staff in carrying out assigned tasks?

_X__ Yes ____ No

Please share required staff training list.
Program monitor reviewed orientation list.

1c. i. Would a random check of RWOA's personnel files verify training provided for staff, including the date, the presenter and his/her qualifications, and the material covered?

___ Yes __X__ No

Please provide a personnel file for review electronically or during on-site visit.

Staff training is not recorded in personnel files. Three RWOA staff need to track training to maintain their NYS licenses/certifications. Ramona Sharp schedules a monthly education training each month at a weekly staff meeting. These are not recorded in personnel files.

Program monitor reviewed staff sign in sheets for in-person training.

1c. ii. Do RWOA staff have the required qualifications to perform necessary activities?

__X_ Yes ____ No ____N/A

Please provide documentation of completed training electronically or during site visit.

One counselor has LMSW certification and extensive experience working with older adults with SUDs (Substance Use Disorders). A second addiction counselor has a CASAC-II

certification in NYS and has worked with adults with SUDs including in a jail setting for many years before coming to Lifespan. Two other addiction counselors have masters degrees in related fields and have worked in RWOA for at least two years. A peer counselor is certified by NYS OASAS as a Certified Recovery Peer Specialist.

1d. Does RWOA comply with Affirmative Action and Equal Opportunity guidelines?

_X__ Yes ____ No

1e. Is an EEO sign posted in a prominent location?

__X_ Yes ____ No

Where?

It is displayed on a staff bulletin board with other workplace legal notices at the employee entrance to the building.

1f. Are reasonable accommodations made for staff and volunteers with disabilities?

__X_ Yes ____ No

Such as: Ergonomic equipment is provided for staff if medically recommended. ASL interpretation is provided for two Lifespan staff who are Deaf (and also volunteers or clients.) Lifespan offices are ADA-compliant. Main conference rooms are looped for visitors/clients who are hard of hearing and have T-coil equipped hearing aids.

1g. Does the RWOA staffing pattern reflect the minority representation in the total population?

_X__ Yes ____ No

Two addictions counselors are minorities.

1h. Can RWOA document outreach efforts to recruit targeted individuals to fill vacant position

_X__ Yes ____ No

Examples:

RWOA has not had staff vacancies in the past year and has not had to recruit new staff. When staff vacancies occur, Lifespan posts job descriptions on its website as well as on the CCSI site and on social media. The agency has also used Indeed to fill job vacancies. For the specific position of Certified Peer Counselor, RWOA can turn to Rochester Works to recruit candidates from that agency's CPC training program (funded by the Mother Cabrini Foundation).

2. Administrative Provisions

2a. Are staff activities consistent with prohibitions against participation in partisan activities?

_X__ Yes ____ No

2b. Are the facilities where elder services and activities take place free from political posters and other evidence of advancing one political candidate over another?

_X_ Yes ____ No

2c. Are the services carried out under MCOFA contract secular in nature?

__X_ Yes ____ No

2d. Has RWOA given due recognition to the US. Administration on Aging, the NYS Office for the Aging and Monroe County Office for the Aging, as appropriate, in program/service brochures, flyers and other printed materials?

__X_ Yes ____ No

Please provide examples of printed or electronic materials with required recognition.
Program monitor reviewed updated brochure.

2e. Does RWOA have a written policy regarding retention of all MCOFA contracted program and fiscal records for six (6) years?

_X__ Yes ____ No

Lifespan's record retention policy is seven years.

2f. What provisions has RWOA made to protect the confidentiality of customer (client) information?

Lifespan has confidentiality policies which apply to all client service programs including RWOA (Policy LS-103: Confidentiality). RWOA is also bound by additional confidentiality safeguards that apply to health information related to substance use (NY Mental Hygiene Law § 22.05 and Public Health Law § 3371) and federal privacy laws (HIPAA and 42 CFR Part 2).

Paper records are kept in locked cabinets. Electronic client data is kept in a secure, HIPAA-compliant database.

2g. Does RWOA have a procedure that allows customers (clients) as well as applicants for services to present grievances on the denial of services?

_X__ Yes ____ No

Please describe:

Lifespan has a written document regarding Mutual Rights and Responsibilities that informs clients that they have the right to file a grievance (Policy LS-111) which is given to Lifespan clients. Policy LS-114 (Client Complaint/Grievance Policy) outlines the steps to file a grievance and the agency procedure for responding to client grievances. The procedure begins with notification of the program manager for the program or service the aggrieved party has a concern about and escalates up the chain of administrative command.

2h. Does RWOA have a procedure to accept customer (client) feedback on service quality, service delivery methods, and service personnel?

_X__ Yes ____ No

Please describe:

Lifespan clients in every program are given the opportunity to provide feedback and an evaluation of the program they interacted with and the services they received through a customer feedback survey that can be completed on paper or online. The survey is distributed to RWOA clients who are invited to return it anonymously if they wish.

2i. Policy and procedure in place to ensure that only eligible customers (clients) are served in MCOFA contracted
programs?

__X_ Yes ____ No

Each program has its own eligibility criteria. RWOA admission criteria is outlined in the brochures and website that describe the program. Only clients who meet the criteria and who also reside in Monroe County are served in the MCOFA-funded program.

Please provide most recently updated Policies and Procedures document.
Lifespan P&P document.

2j. Does RWOA make service sites and program information accessible to persons with disabilities?

_X__ Yes ____ No

Please describe:

Lifespan program materials are designed to be legible to someone who has difficulty reading a small type font.

The Lifespan website can be adjusted by the reader to accommodate disabilities. (An accessibility icon is visible on each page.)

ASL interpreters are available to clients who are culturally Deaf and who use ASL.

For those who choose to come to Lifespan's office, the building within which RWOA is housed is ADA-compliant. The main conference rooms are also looped for hard of hearing individuals who have T-coils in their hearing aids.

2k. Do accounting records support amounts reported on vouchers and do units of service tie in to programmatic reports?

__X_ Yes ____ No

2l. Are vouchers submitted in a timely manner?

_X__ Yes ____ No

2m. Is RWOA compliant with prohibitions on using public funds to support sectarian, political and lobbying activities?

__X_ Yes ____ No

3. Reporting

3a. Identify the **Name and Job Title** of the person(s) and the back-up person(s) responsible for electronic reporting via PeerPlace, and County Contract HQ.

Primary reporting staff: Ramona Sharp, Program Manager
Back-up reporting staff: Paul Caccamise, Vice President for Program

3b. Please identify any challenges or concerns with completing PeerPlace and/or ContrackHQ reporting: NA

4. Interagency Coordination

4a. Does RWOA have a system in place for referring clients to other services/organizations when the need for such services is identified?

__X_ Yes ____ No

Please describe:

Referrals to other organizations are recorded in RWOA's case management database, PeerPlace, in the client record.

4b. Has RWOA worked effectively with other providers and organizations in the community to facilitate coordination and minimize possible duplication of effort?

___ Yes ____ No

Please describe coordination and collaboration during this contract year:

RWOA is in continual contact with licensed chemical dependency (CD) providers, to refer clients and to advocate for accommodations for RWOA clients. They also make connections with voluntary and other nit-for-profit groups that support persons in recovery such as AA, ROC Recovery, etc.

As noted earlier, RWOA has also collaborates with Monroe County OMH to offer "office hours" at one of the RHA housing sites (Lake Tower). RWOA staff spend time at Lake Tower and provide presentations on a weekly basis.

5. Performance Outcomes and Enhancements

5a. Satisfaction Surveys

RWOA	Projected Percentage of Satisfied Clients	Actual Percentage of Satisfied Clients
Satisfaction surveys	90%	95%

5b. Please describe other outcomes tracked by program that demonstrate program's success:

RWOA measures client outcomes through by the evaluation of level of depression, global assessment of functioning, and degree of use of substances at the outset a case and again at the conclusion of intervention. Each year the three metrics show stabilization or improvement in a client's condition. In 2025, RWOA showed:

- **GAF improved at closure:** 77% vs 75% goal
- **GDS same or decreased at closure:** 96% vs 75% goal
- **Abstinence/decreased use at closure:** 77% vs 75% goal

5d. Does RWOA solicit input from their customers and constituents, including customers and constituents that are frail, disabled, minority, and/or low-income, on ways to make services more accessible and appealing to culturally diverse populations?

__X_ Yes ____ No

Please describe:

Customer surveys are distributed to RWOA clients to solicit their assessment of the services rendered to them. They are encouraged to return them anonymously if they wish. 95% indicated satisfaction with the program and willingness to recommend Lifespan to a friend. (Goal was 95%).

5e. Please describe general trends in responses from clients based on survey results and other collected feedback:

Customer feedback surveys that are returned indicate a large degree if satisfaction with the service clients received and gratitude for helping them with problems that impacted their health.

5f. Were there any programmatic changes during the year that affected the scope or quality of service?

_X__ Yes ___ No

If yes, please describe briefly:
As indicated previously, RWOA expanded into a RHA housing site in the last quarter of 2024. The program continued into 2025 and attendance has increased.

5g. Please describe plans for continuous program improvement:

The results of the client outcome metrics measured by RWOA are used to determine whether the program is making an impact in the lives of older adults the program serves. We do not receive a large number of client feedback surveys which are distributed to RWOA clients but the ones we do receive are uniformly positive. The surveys let the program management and Lifespan administration know whether improvement plans are needed.

V. Assessment Conclusion

AGENCY COMMENTS:

Strengths: RWOA continues to have good relations with traditional chemical dependency programs in Monroe County and with healthcare providers in Monroe County. The program receives a regular stream of referrals from Monroe County sources. Their reputation as an important adjunct, and not a competitor, in the CD system allows the program to access licensed program services for its clients when appropriate including detox services. The staff work well as a team. They meet on a weekly basis to hear about developments in the field and to share their insights and contacts in complex cases that are discussed in the weekly gatherings.

Needs: A reliable source of funding for the program is a perennial need. Lifespan has been able to count on the MCOFA contract for many years but the contract only covers a portion if total program expenses. Lifespan is applying for a renewal of Cabrini Foundation funding for 2027 which will cover the majority of program expenses in combination with the MCOFA contract. Funding from OASAS at the state level would be a goal to cover the budget deficit once Cabrini Foundation funds are no longer available. RWOA has made several attempts to convince OASAS that, although it is not a licensed program, RWOA is an integral part of the substance abuse treatment system in the region.

MCOFA COMMENTS

Strengths: The RWOA program provides an important service to older adults struggling with substance use, along with essential education to community members and organizations. Staff has recently developed a new training on the impact of alcohol and medications for older adults that has received positive feedback from participants, and plans to expand outreach, especially to local congregations. Knowledgeable staff are able to serve harder-to-reach individuals, as well as older adults who are more reluctant to engage in traditional treatment. RWOA has been able to increase its reach across several counties, and continues to reach out to underserved individuals.

Needs: See agency comments above. The program is also interested in funding to expand their peer recovery program. The program should work to develop strategies to better reach out to Hispanic and Latino participants in the community.

Compliance areas in need of attention: N/A

Department of **Human Services**
Office for the Aging
Monroe County, New York

Adam Bello
County Executive

Thalia Wright
Commissioner

Steve Newcomb
Director

July 20, 2026

Macie McGowan
2011 Mt. Read Blvd.,
Rochester, NY 14615

Dear Macie,

Attached for your records is the completed 2025 Annual Program Evaluation for the Monroe County Office for the Aging (MCOFA) funded Congregate Meals for the Elderly Program.

The contract is doing well. For comments related to each program and its specific objectives, please read through the evaluation. You may find additional general comments related to the program on the final page of the evaluation.

Thank you for continuing to provide these valued services to our community's older adult population.

Should you have any questions regarding the evaluation, please do not hesitate to contact me at (585) 753-6458.

Sincerely,

Kitty S. Koul

Kitty S Koul

cc: Monroe County Office for the Aging –Steve Newcomb

Encl: Annual Program and Service Assessment

MONROE COUNTY
DEPARTMENT OF HUMAN SERVICES
OFFICE FOR THE AGING

ASSESSMENT FOR PROGRAM FUNDING

2025-26

Service Name: Preparation and Delivery of Congregate Senior Center Meals

NYSOFA Service Category: Congregate Meals

Funding Sources:	
Title III-C1 (07/01/2025 to 12/31/2025)	**-------- $ 106,050**
WIN (07/01/2025 to 03/31/2026)	**-------- $ 128,456**
NSIP (07/01/2025 to 9/30/2025)	**-------- $ 31,094**
Monroe County Support	**-------- $ 11,784**
Total (all funds)	**$ 277,384**

IDENTIFYING INFORMATION

Name of Sponsoring Organization: Foodlink, Inc.

Address: 2011 Mt. Read Blvd

City: Rochester **State:** New York **Zip:** 14615

Chief Executive Officer: Julia Tedesco

Name and Title of person to contact with questions regarding this Application:

Terra Keller

Phone Number: (585)-413-4070
Fax:
E-mail: jtedesco@foodlinkny.org

Assessment Date: July 17, 2026
Participants: MCOFA: Kitty Koul
Others participating: Adam Frick, Macie McGowan

Review Previous Findings

Were there findings from the prior monitoring that required corrective actions to address areas of non-compliance?
Yes ____ No ____ **N/A**
If yes, please describe:

Were all findings from MCOFA's previous monitoring efforts satisfactorily addressed?
Yes ____ No ____ **N/A**
If no, please describe:

Units of Service

Foodlink, Inc.	Projected Units (2025-26)*	Actual 2025-26 Units Served*	Actual 2025-2026 Units Ordered*	% of actual meals ordered vs projected (2025-26)
Preparation and Delivery of Congregate Senior Center Meals	36,615[1] 62,490[2]	31,494[3] 59,036[4]	34,307[5] 63,476[6]	93.70%[7] 101.58%[8]

1. **Projected served Eligible Congregate Meals provided by Foodlink to MCOFA sponsored Senior Centers**
2. **Projected served Total Eligible Congregate Meals provided by Foodlink to Twenty Senior Centers including the Towns**
3. **Actual served Eligible Congregate Meals provided by Foodlink to MCOFA sponsored Senior Centers****
4. **Actual served Total Eligible Congregate Meals provided by Foodlink to Twenty Senior Centers including the Towns.** Data from PeerPlace: Congregate Meals 55,239, Shelf Stable 2,200**
5. **Ordered Congregate Meals provided by Foodlink to MCOFA sponsored Senior Centers**
6. **Ordered Congregate Meals provided by Foodlink. to Twenty Senior Centers including the Towns** Sum of Breakfast (9,691), Lunch (49,762), Frozen Foods (94), and Shelf Stable (2,200)
7. **Percentage of MCOFA meals ordered vs. MCOFA meals projected**
8. **Percentage of total meals ordered by all sites vs total meals ordered by all sites**

* Meals ordered/served between January, 2026 to March, 2026 from Towns, Lifespan Wolk, Lily Café, Montgomery, Prayer House, and Sweden are not included in the numbers listed.

** These numbers are FYI only. Foodlink is not assessed on how many meals are served.

Describe reason(s) for any variances:

Expenditures

Foodlink, Inc.	Projected 2025-26 Expenditure	Actual 2025-26 Expenditures	% spent
NSIP	$31,094.00	$31,094.00	100.00%
Catering Services (WIN & Title IIIC-1)	$246,290.00*	$223,697.32	90.83%
Total	$277,384.00	$254,791.32	91.86%

* Funding includes funds for 7/1/25-3/31/26

Describe reason(s) for any variances:

Actual Cost Per Unit

Foodlink, Inc.	Projected Cost	# of Meals Ordered	Actual 2025-26 Expenditures	Average Cost Per Unit
Congregate Meals (TOTAL FUNDS $277,384)	$7.58	34,307	$254,791.32	$7.43

Do costs per person appear reasonable?

Yes __x__ No ____

If no, please explain:

Outcomes / Objectives

Outcome Objectives #1: Ensure all Congregate Sites receive meals at appropriate temperatures, as reported by sites, 95% of the time, in accordance with established service model standards and food safety guidelines.

Indicator of Success: Food is delivered at appropriate temperature based on the service model. For Example, cold food is delivered below 40 degrees Fahrenheit and does not have to be discarded. Frozen food is delivered frozen and does not have to be discarded. Hot food is delivered at or above 140 degrees Fahrenheit and does not have to be re-heated to 165 degrees Fahrenheit.

Time Frame	Assessment Year Projection 7/1/25 - 3/31/26	Assessment Year Actual 7/1/25 - 3/31/26	Current Year Projection 1/1/26- 3/31/27
Percentage of time Food is delivered at appropriate temperature of Service Model	95%	98%	95%
Basis for Next Year Projection (source & relevant statistics):			

Outcome Objectives #2: Percentage of congregate meals served accurately represents the number of meals ordered and the quantity of food specified, with a target accuracy rate of 90% or higher.

Indicator of Success: Number of meals delivered is equal to the number of meals ordered by the meal site.

Time Frame	Assessment Year Projection 7/1/25 - 3/31/26	Assessment Year Actual 7/1/25 - 3/31/26	Current Year Projection 1/1/26- 3/31/27
Accurate delivery of meals to the meal site based on the number of meals ordered and quantity of food delivered.	90%	97%	98%
Basis for Next Year Projection (source & relevant statistics):			

Outcome Objectives #3: Accurate food procurement is executed to ensure menu is served as written.

Indicator of Success: Percent of times an entree/side item in a meal is not substituted with alternate menu item. This information is collected quarterly.

Time Frame	Assessment Year Projection 7/1/25 - 3/31/26	Assessment Year Actual 7/1/25 - 3/31/26	Current Year Projection 1/1/26- 3/31/27
Accurate food procurement is executed to ensure menu is served as written	90%	97%	98%
Basis for Next Year Projection (source & relevant statistics):			

These are not the current objectives.

Does Foodlink, Inc. keep track of food wastage due to cancelations?

Yes____ No __x__

If yes, please explain the impact of food wastage:

Does Foodlink, Inc. have adequate staff to perform the activities required under contract with MCOFA?

Yes __x__ No ____

If no, please explain the impact on the program or service and any steps being taken to improve staffing levels:

Does Foodlink, Inc. have a training plan to assist staff in carrying out assigned tasks, including older adult sensitivity training for clients served?

Yes ____ No ____ n/a We do not work directly with seniors.

If yes, please be prepared to provide source documents that justify this response.

Would a random check of Foodlink, Inc.'s personnel files verify the type of training actually provided for staff, including the date, the presenter and his/her qualifications, and the material covered?

Yes __x__ No ____

Does Foodlink, Inc. comply with Affirmative Action and Equal Opportunity guidelines?

Yes __x__ No ____

Is an EEO sign posted in a prominent location?

Yes __x__ No ____

If yes, where: In all staff breakrooms.

Are reasonable accommodations made for staff and volunteers with disabilities?

Yes __x__ No ____

If yes, such as: **More frequent breaks, sitting if possible, reassignment when possible**

Does the Foodlink, Inc. staffing pattern reflect the minority representation in the total population?

Yes __x__ No ____

Can Foodlink, Inc. document outreach efforts to recruit targeted individuals to fill vacant positions?

Yes __x__ No ____

If yes, please be prepared to provide source documents that justify this response. A job description is drafted for all vacancies and the position is posted both internally and externally. In addition, the applicant tracking system used pushes vacancies to several job boards and sites. We also use free, local job board such as CCSI, the Greater Rochester Chamber of Commerce, and the Department of Labor. If necessary, and depending on the role, recruiting firms and paid job boards are considered.

Were there any programmatic changes initiated during the grant year that affect the scope or quality of service?

Yes _x__ No ____

If yes please discuss briefly. Additional items like juice were added to meet new state requirements.

Customer Satisfaction

Attached is sample of form that MCOFA used to collect data. Copy of survey results attached. *

* Note: MCOFA conducts this survey annually. The data is FYI only as it includes satisfaction data for the previous vendor too.

18 Sites and 529 participants provided feedback on lunch meals. Of those that participated,
84.69% of the participants found the taste of lunch meals to be excellent/good.
85.35% of the participants found the temperature of lunch meals to be excellent/good.
84.36% of the participants found the variety of lunch meals to be excellent/good.
85.18% of the participants found the overall quality of lunch meals to be excellent/good.

5 Sites and 128 participants provided feedback on breakfast meals. Of those that participated,
80.47% of the participants found the taste of breakfast meals lo be excellent/good.
85.59% of the participants found the temperature of breakfast meals to be excellent/good.
78.57% of the participants found the variety of breakfast lunch meals to be excellent/good.
78.45% of the participants found the overall quality of breakfast meals to be excellent/good.

Did you learn anything significant or new ideas to improve service? __x___ YES _____ NO

If yes, please explain. If not, why not, and provide a sampling of submitted comments from clients.

We learned site preferences and ways to improve operational efficiency.

Below are some comments received:
The meal program makes a big difference in my nutrition.
Food is better with Foodlink
Most meals are good, some are excellent a few are fair
Better variety of veggies
Love the new food vendor
We received mostly positive feedback. Occasionally there is some negativity regarding a specific meal, however overall, the food and program is very well liked
More variety in breakfast meals - for example breakfast always has eggs.

Administrative Provisions

Are Foodlink, Inc. staff activities consistent with prohibitions against participation in partisan activities?

Yes _x_ No ___

Are the facilities where Foodlink, Inc. services and activities take place free from political posters and other evidence of advancing one political candidate over another?

Yes _x_ No ___

Are the services carried out under MCOFA contract secular in nature?

Yes ___ No _x___

Has Foodlink, Inc. given due recognition to the US. Administration on Aging, the NYS Office for the Aging and Monroe County Office for the Aging, as appropriate, in program/service brochures, flyers and other printed materials?

Yes ___ No _x___ We don't distribute any printed materials regarding senior meal service.

If yes, please be prepared to provide source documents that justify this response.

Does Foodlink, Inc. have a written policy regarding retention of all MCOFA contracted program and fiscal records for six (6) years?

Yes _x_ No ___

Has Foodlink, Inc. made provisions to protect the confidentiality of customer (client) information?

Yes _x_ No ___ Anything with names or protected information is kept locked, or shredded when discarded.

If yes please discuss briefly.

Does Foodlink, Inc. have a system in place to allow customers (clients) to voluntarily and confidentially contribute to the cost of services?
Yes ___ No ___ n/a

Briefly explain the process and how the voluntary nature of this process is shared with the Customer (client):

Does Foodlink, Inc. have a procedure that allows customers (clients) as well as applicants for services to present grievances?

Yes _x_ No ___ phone calls, e-mails and surveys for the programs that we run

If yes, please be prepared to provide source documents that justify this positive response.

Does Foodlink, Inc. have a procedure to accept customer (client) feedback on service quality, service delivery methods, and service personnel?

Yes _x___ No ___

If yes, please be prepared to provide source documents that justify this response. Monthly County feedback sheets or tell in person or a phone call.

Does Foodlink, Inc. have a policy and procedure in place to ensure that only eligible customers (clients) are served in MCOFA contracted programs?

Yes ___ No _x_

If yes, please be prepared to provide source documents that justify this response. Foodlink does not have access to that information.

Does Foodlink, Inc. make service sites and program information accessible to persons with disabilities?

Yes __x__ No ____

Does Foodlink, Inc. solicit input from their customers and constituents, including customers and constituents that are frail, disabled, minority, and/or, on ways to make services more accessible and appealing to culturally diverse populations? i.e. Satisfaction Surveys

Yes __x__ No ____

If yes, please be prepared to provide source documents that justify this response.

Is Foodlink, Inc. responsive to "LEP"?

Limited English Proficiency – Individuals who do not speak English as their primary language and have limited ability to read, speak, write, or understand English can be limited English proficient

Yes __x__ No ____ We have staff and contracted interpreters.

Interagency Coordination

Describe Foodlink, Inc.'s procedure(s) for tracking referred customers' requests for assistance to other organizations when the need for such services is identified: N/A

Has Foodlink, Inc.. worked effectively with other providers and organizations to facilitate coordination and minimize possible duplication of effort (Do not include MCOFA)?

Yes ____ No ____ n/a We only provide senior meals via MCOFA

If yes, please acknowledge names of other providers/organizations and provide examples:

Financial Monitoring

Foodlink, Inc. Inventory Control

Are Foodlink, Inc. staff who handle monies (with the exception of attorneys) bonded?

Yes _____ No __x____

Documentation:

Are individuals who are authorized to sign checks involved in processing invoices?

Yes _____ No __x__

Documentation:

Are individuals who are authorized to sign check different from the person(s) who maintain payroll records?

Yes __x__ No _____

Documentation:

Does Foodlink, Inc. maintain registration as a Charitable Organization with the Department of State?

Yes __x__ No _____

Documentation:

If No: does Foodlink, Inc. claim exemption from the registration (receiving less than $25,000 in grants and contributions annually)?

Yes _____ No _____

Documentation:

Conclusions

1. Problems & Concerns

None

2. Agency Comments

Throughout this strategic partnership, the Foodlink Community Kitchen has worked closely with MCOFA to ensure older adults in Monroe County have reliable access to nutritious meals while also creating opportunities for social engagement through congregate dining. Foodlink manages a complex operation to deliver over 2,000 meals each week to 20 sites across the county, which requires coordinated efforts among kitchen staff responsible for nutrition analysis, recipe development, food procurement, meal production, packaging, and delivery preparation, as well as ongoing collaboration with MCOFA, site coordinators, vendors, and community partners. Menus are developed in accordance with Older Americans Act nutritional requirements, and new recipes undergo review and development with MCOFA and Foodlink chefs and dietitians before being incorporated into monthly meal cycles.

Program quality and compliance are supported through a structured process of stakeholder engagement and feedback. Foodlink staff participate in monthly meetings with all 20 site coordinators and MCOFA staff, which provides a forum for site-specific operational updates and participant feedback. These meetings are followed by monitoring sessions between Foodlink and MCOFA to review operations, discuss compliance requirements, and assess program performance. Foodlink staff also participate in bi-monthly project council meetings attended by senior meal participants, site representatives, and MCOFA staff, creating an opportunity for direct feedback on meals and services. Additional participant input is collected through site-based surveys that are compiled and shared with Foodlink.

Foodlink remains in regular contact with both MCOFA and participating meal sites to support ongoing program evaluation, document successes, identify challenges, and respond quickly to opportunities for improvement, and we remain appreciative of this continued partnership that allows us to serve seniors in our community.

3. Overall Comments

Foodlink is actively involved in community based activities and has been a very good strategic partner and always ready to help in serving the older adults in the community. Foodlink is a willing partner and their catering program is a

collaborative effort with MCOFA. They are fully committed in serving the community and willing to adjust to their needs as required. Foodlink is responsive in timely addressing the issues raised by seniors participating in the Monroe County Nutrition Program. MCOFA has a good communication with Foodlink. Foodlink's customer service and delicious food is unmatched, and has made a huge, positive impact on the Nutrition program

Foodlink also has worked with MCOFA Dietitian with menu planning and were able to effectively deliver the Nutrition Program in times with limited food supply and high prices. Foodlink introduces new dishes and recipes for the participants and actively participate in gathering feedback/comments on the meals and modifying the recipe as needed.

4. Recommendations

5. Suggestions

In conveying general comments regarding Foodlink, Inc.'s overall assessment of service delivery and contract compliance, please address the following areas: None



From: Ernisse, April
To: "Paul Caccamise"
Cc: "rsharp@lifespan-roch.org"
Subject: Finalized RWOA annual evaluation 2025-26
Date: Monday, June 15, 2026 2:33:00 PM
Attachments: 2025-26 Lifespan RWOA Annual Evaluation.pdf
image002.png

Hi Paul and Ramona,
Thank you again for taking the time to meet with me for the annual evaluation. Please find the finalized version for your records. On behalf of our office, please pass on our gratitude to your team for the important work you do with older adults in recovery in our community.

Thanks!

April Hurd Ernisse
Program Monitor
Monroe County Office for the Aging
435 East Henrietta Rd, 3rd floor
Rochester NY 14620
(585) 753-6480 (direct)
(585) 753-6281 (fax)
aprilernisse@monroecounty.gov

MONROE COUNTY
DEPARTMENT OF HUMAN SERVICES
OFFICE FOR THE AGING (MCOFA)

ASSESSMENT FOR PROGRAM FUNDING

2025

Service Name: Transportation Services for Older Adults

NYSOFA Service Category: Transportation

Funding Sources:
Title IIIB 01/01/2025 to 12/31/2025 ($415,423)
CSE 04/01/2025 to 03/31/2026 ($124,072)
AAA 01/01/2025 to 12/31/2025 ($40,952)
Title IIIE 01/01/2025 to 12/31/2025 ($30,000)
Unmet Needs ($93,812) + (110,000)
Monroe County Support ($43,702)

Total (all funds) $857,961

IDENTIFYING INFORMATION

Name of Sponsoring Organization:	Medical Motor Service of Rochester & Monroe County, Inc.
Address:	608 South Clinton Avenue
City:	Rochester
State:	New York
Zip:	14620

Chief Executive Officer: Tim Kohlmeier, Executive Director

Name and Title of person to contact with questions regarding this Application:

Tim Kohlmeier-Executive Director (585) 736-1249

Phone Number:	(585) 654-6030 ext. 221
Fax:	(585) 654-9697
E-mail:	tkohlmeier@medicalmotors.org

Site Visit:	**August 18, 2026**
Participants:	**MCOFA: Leanne Rorick, Carolyn Beich**
	Medical Motor Service: Tim Kohlmeier, Executive Director
	Karen Ekiert
	John Zaepfel
	Caitlyn Kohlmeier
	Rebecca Murray

Review Previous Findings

Were there findings from the prior monitoring that required corrective actions to address areas of non-compliance?
Yes _____ No __X__
If yes, please describe:

Were all findings from MCOFA's previous monitoring efforts satisfactorily addressed?
Yes __X__ No _____
If no, please describe staffing and equipment efforts continue to be address

Units of Service

MEDICAL MOTOR SERVICE	Projected Units	Actual 2025 Units	% of Projection
Objective #4 in the Contract Narrative Application- Senior Center and Special Event Transportation	21,131	20,059	95%
Objective #6 in the Contract Narrative Application- Dialysis Transportation	3,472	3,982	115%
TOTALS	**24,603**	**23,951**	**97%**

Describe reason(s) for any variances:

The above units represent trips taken for calendar year 2025.

Projected Persons Served

MEDICAL MOTOR SERVICE	Projected # of Persons Served	Actual # of Unduplicated Persons Served in 2025	% of Projection
Objective #2 in the Contract Narrative – Individuals Served	550	150	27%

Describe reason(s) for any variances: Calculations for the number of clients served in previous years represented duplicated persons served. Number of unduplicated clients served in 2025 was 150; and in 2024 was 174. Projections for 2026 will more accurately reflect the number of individuals predicted to be served.

Service Waiting Lists

MEDICAL MOTOR SERVICE	Waiting List Maintained?		If Yes, please state the reason (check all that apply)	# of referrals made to other Service Providers in 2020
	Yes	No		
Transportation	X		___ Lack of Funding ___ Lack of Staff __X_ Other: Currently there is no wait list for the senior nutrition program. Occasional Dialysis wait list maintained due to capacity restraints	List Agencies

Expenditures

Describe reason(s) for any variances:

_____

_____

Actual Cost Per Unit (Ride)

MEDICAL MOTOR SERVICE	# of One-way Rides	Actual 2025 Expenditures	Average Cost Per Ride
Transportation	20,059	$499,920.46	$24.92
Dialysis Transportation	3,892	$184,312.18	$47.36
		$684,232.64	

Do costs per person appear reasonable? Yes __x___ No _____

If no, please explain:

_____

Outcomes

Outcome Objective #1 To provide safe, door to door transportation services to older adults wishing to attend Monroe County sponsored nutrition sites as well as an adult social day care center and grandparent support program.

Performance Section #1

Indicator of Success: Unduplicated individuals will receive safe door-to-door transportation.			
	Assessment Year Projection	Assessment Year Actual	Current Year Projection
Time Frame	1/1/25 - 12/31/25	1/1/25– 12/31/25	1/1/26– 12/31/26
Total No. of Participants Projected	550	150	500*
% Successful			
Basis for Next Year Projection (source & relevant statistics): Additional Monthly Outings and continued increase in dialysis transport.			

**2026 Projection is based on duplicated calculation of previous years. Adjusted projection shall be set at 175.*

Outcome Objective #2 To provide general passenger satisfaction with; the ease of scheduling a ride, the courtesy of the driver and safety of the vehicle and driver.

Performance Section #2

Indicator of Success: Seniors will be satisfied with transportation services. From the annual Satisfaction Survey, the question "Overall, Medical Motor Service meets my transportation needs." will have a combined percentage of "Strongly Agree" and "Agree".			
	Assessment Year Projection	Assessment Year Actual	Current Year Projection
Time Frame	1/1/25 – 12/31/25	1/1/25 – 12/31/25	1/1/26 - 12/31/26
# of passengers surveyed	(all riders)	47 surveys returned, reflecting a 31% response rate	175
% satisfied	90%	86 %	90%
Basis For Next Year's Projection (source and relevant statistics): Surveys will be sent to 175 riders, targeting a return rate of at least 25% with 90% satisfaction.			

Performance Measure Instrument: [Reviewed by monitor(s)]

Contributions

Contract/Application Objective #5: *To collect a minimum of* $10,450 in ***senior center*** participant contributions during the contract period from 01/01/2025 to 12/31/2025.

Actual Collected: $2,046.65 Actual Per Trip Average: $.09

Contract/Application Objective #7: To collect a minimum of $5,319 in ***dialysis*** participant contributions during the contract period from 01/01/2025 to 3/31/2025.

Actual Collected: $0 Actual Per Trip Average: $0

Please explain:
The majority of individuals served in this program have low incomes and may not be in a position to provide contributions. However, all riders are given the opportunity.

Targeting Compliance

Objective #1 – Targeting Compliance	Projected Number Served	Projected % of Total Served	Actual Number Served	Actual % of Total Served
Total Unduplicated Client Counts	550		150	
75-84 years	103	18.7%	56	37%
85 years and older	55	10%	29	19%
Poverty Level (less than150%)	101	18.3%	93	62%
LIM-Low Income Minority	17	3%	46	31%
Frail and/or Disabled	147	26.7%	*	*
Frail	*	*	32	21%
Disabled	*	*	64	43%
Lives Alone	239	43.5%	72	48%
Amer.Ind/Als.Native	1	0.01%	1	0.01%
Asian	10	1.9%	0	0%
Black, not Hispanic	55	9.9%	70	47%
Nat.Haw./Pac.Islander	0	0.01%	1	0.01%
Hispanic or Latino	22	4%	14	9%
White	450	81.8%	42	28%
Other	9	1.7%	0	0%
2 or more Races	21	3.9%	0	0%

**Peer Place has updated Frail and/or Disabled to now be two separate categories. Going forward data will be reported separately.*

Is MEDICAL MOTOR SERVICE, the Community Service Provider, meeting its goals of providing services to older persons at least in proportion to their representation in the total elderly population within the service provider's catchment area?

Yes _X__ No _____

If yes, to what do you attribute your success?

We have been able to provide all requested rides for each senior center. We have also increased our dialysis ridership by 42%.

If no please state the reason and outline specific action plan to reach the objective. Use a separate sheet if necessary

General Comments on Service Targeting

While Medical Motors continues to work on an "as needed" service, they continue to meet or exceed underserved and targeted areas.

Staffing

Does MEDICAL MOTOR SERVICE have adequate staff to perform the activities required under contract with MCOFA?

Yes _X__ No _____

If no, please explain the impact on the program or service and any steps being taken to improve staffing levels: MMS Continues to add Staff and resources

Does MEDICAL MOTOR SERVICE have a training plan to assist staff in carrying out assigned tasks, including elderly sensitivity training for clients served?

Yes __X___ No ____

We continue to provide sensitivity and trauma training upon hiring to all drivers.

If yes, please be prepared to provide source documents that justify this response.

Would a random check of MEDICAL MOTOR SERVICE'S personnel files verify the type of training actually provided for staff, including the date, the presenter and his/her qualifications and the material covered?

Yes _X___ No ____

Does MEDICAL MOTOR SERVICE comply with Affirmative Action and Equal Opportunity guidelines?

Yes __X__ No ____ [Reviewed by monitor(s)]

Is an EEO sign posted in a prominent location?

Yes _X___ No ____ [Reviewed by monitor(s)]

If yes, where: Staff break room

Are reasonable accommodations made for staff and volunteers with disabilities?

Yes __X__ No ____

If yes, such as: MMS has an accessible entrance, as well as designated parking. All of our offices are on one floor.

Does the MEDICAL MOTOR SERVICE staffing pattern reflect the minority representation in the total population?

Yes _X__ No ____

Can MEDICAL MOTOR SERVICE document outreach efforts to recruit targeted individuals to fill vacant positions?

Yes_X___ No _____

If yes, please be prepared to provide source documents that justify this response.

Recent marketing has included social media, hiring event at our city location, postings at all city and county libraries, and Indeed.

Were there any programmatic changes initiated during the grant year that affect the scope or quality of service?

Yes ____ No X __

If yes, please discuss briefly.

Administrative Provisions

Are MEDICAL MOTOR SERVICE staff activities consistent with prohibitions against participation in partisan activities?

Yes __X__ No ____

Are the facilities where MEDICAL MOTOR SERVICE services and activities take place free from political posters and other evidence of advancing one political candidate over another?

Yes _X___ No ____

Are the services carried out under MCOFA contract secular in nature?

Yes __X__ No ____

Has MEDICAL MOTOR SERVICE given due recognition to the US. Administration on Aging, the NYS Office for the Aging and Monroe County Office for the Aging, as appropriate, in program/service brochures, flyers and other printed materials?

Yes __X__ No ____ [Reviewed by monitor(s)]

If yes, please be prepared to provide source documents that justify this response.

Does MEDICAL MOTOR SERVICE have a written policy regarding retention of all MCOFA contracted program and fiscal records for six (6) years?

Yes X____ No ____

Has MEDICAL MOTOR SERVICE made provisions to protect the confidentiality of customer (client) information?

Yes _X__ No ____

If yes, please discuss briefly.

Firewalls and secured site domain are exclusively used for all requests and maintained database.

Does MEDICAL MOTORS have a system in place to allow customers (clients) to voluntarily and confidentially contribute to the cost of services?
Yes _X___ No ____ [Reviewed by monitor(s)]

This statement was added to our survey that we sent out:

If you would like to make a contribution to Medical Motor Service, you can visit the links below or include it with your returned survey. Contributions are entirely voluntary and confidential. They are not required to receive services, and a decision to contribute or not contribute will never affect eligibility, scheduling, or the quality of service provided.

https://givebutter.com/mcofa-contributions-sstu9y

Does MEDICAL MOTOR SERVICE have a procedure that allows customers (clients) as well as applicants for services to present grievances on the denial of services?

Yes ____ No ____ ***Not applicable.*** *Medical Motor Service does not approve or deny services; it is the responsibility of the senior centers to approve service.*

If yes, please be prepared to provide source documents that justify this positive response.

Does MEDICAL MOTOR SERVICE have a procedure to accept customer (client) feedback on service quality, service delivery methods, and service personnel?

Yes _X___ No ____

If yes, please be prepared to provide source documents that justify this response.

Does MEDICAL MOTOR SERVICE have a policy and procedure in place to ensure that only eligible customers (clients) are served in MCOFA contracted programs?

Yes _X___ No____

Not applicable for Senior Centers –Eligibility is determined by the individual senior centers.

If yes, please be prepared to provide source documents that justify this response.

Does MEDICAL MOTOR SERVICE make service sites and program information accessible to persons with disabilities?

Yes X____ No ____

Does MEDICAL MOTOR SERVICE solicit input from their customers and constituents, including customers and constituents that are frail, disabled, minority, and/or, on ways to make services more accessible and appealing to culturally diverse populations? i.e. Satisfaction Surveys

Yes _X___ No ____ [Reviewed by monitor(s)]

If yes, please be prepared to provide source documents that justify this response.

Is Medical Motor Service responsive to "LEP"?

Limited English Proficiency – Individuals who do not speak English as their primary language and have limited ability to read, speak, write, or understand English can be limited English proficient

Yes _X___ No ____

Interagency Coordination

Describe MEDICAL MOTOR SERVICE'S procedure(s) for tracking referred customers' requests for assistance to other organizations when the need for such services is identified:

N/A—referrals are generally made to Lifespan / NY Connects. No follow-up is currently tracked if we are not able to provide the requested transport.

Has MEDICAL MOTOR SERVICE worked effectively with other providers and organizations to facilitate coordination and minimize possible duplication of effort (Do not include MCOFA)?

Yes _X___ No ____

If yes, please acknowledge names of other providers/organizations and provide examples:

_____Lifespan_____

Check as many as apply to coordinated efforts: If checked, please be prepared to provide documentation:

____Participation in interagency meetings to plan and coordinate services

____Coordination of funding proposals with other human services organizations

_x__Coordination of referrals and follow-up transactions with other local service providers

____Memos of Understanding or similar agreement with other organizations

____Development and implementation of a central assessment unit for services carried out by multiple agencies

____Working with other providers to update information of available services and eligibility

Please describe any other coordinative activities not detailed above:

_____

_____

Service Promotion & Marketing

Indicate what regular means MEDICAL MOTOR SERVICE employs to disseminate information to the public and approximately how often this occurs:

Indicate Frequency	Weekly	Monthly	Annually	Other:(Please specify)
Newsletters			X	
Radio: Public Service Announcements				
Radio: Programming				
Television: Public Service Announcements				
Television: Programming				
Public Presentations			X	
Brochures or Pamphlets				
Other Website or social media				As events happen

What marketing/outreach/publicity techniques have been employed to reach low-income minority elders in your service area?

___ Used Census or other data to identify target communities

__ Translated program brochures and pamphlets into appropriate languages

___ Sent mailings to target population

__Sent newsletters or announcements to organizations that serve minority populations, disabled populations

__ Publicized services through press releases, radio, television and local publications

__ Located service delivery centers/offices in target communities

_x_ Encouraged persons served to tell friends and neighbors of available services

_x_ Sought out/accepted local speaking engagements to meetings and conferences sponsored by associations or other organizations that include minorities

___ Included minority staff and interns in local programs or in conducting outreach

___ Coordinate with other agencies that serve low-income families in order to identify elders who may need services

___ Additional activities or strategies used to target services to minority elders

Please Specify:

_____

_____

Equipment Inventory

Please provide updated Inventory Sheet for Equipment purchased via MCOFA contracts for services. (Attached)

N/A

Financial Monitoring

MEDICAL MOTOR SERVICE Financial Management & Inventory Control

Does MEDICAL MOTOR SERVICE maintain sufficient documentation for equipment purchased with MCOFA funds?

Yes _____ No _____

Documentation:

N/A

Is the equipment purchased with MCOFA funds identified as such either in property records or fund codes marked on the property?

Yes _____ No _____

Documentation:
N/A

Is the equipment purchased with MCOFA funds being used solely to benefit older persons (Unless costs are appropriately pro-rated)?

Yes_____ No _____

Documentation:
N/A

Are MEDICAL MOTOR SERVICE staff who handle monies (with the exception of attorneys) bonded?

Yes _____ No_X___

Documentation:
Insurance policy

Are two individuals involved in counting customer (client) contributions?
Yes __X___ No _____

Documentation:

Two individuals from the finance department count and sign off on all contributions.

Are individuals who are authorized to sign checks involved in processing invoices?

Yes _____ No __X___

Documentation: The person who has authority to process invoices, cannot sign checks.

Are individuals who are authorized to sign check different from the person(s) who maintain payroll records?

Yes __X___ No _____

Documentation: The person responsible for processing payroll does not have check signing authority

Does MEDICAL MOTOR SERVICE maintain registration as a Charitable Organization with the Department of State?

Yes __X___ No _____

Documentation:

If No: does MEDICAL MOTOR SERVICE claim exemption from the registration (receiving less than $25,000 in grants and contributions annually)?

Yes _____ No _____

Documentation:

CONCLUSIONS

1. **Agency Comments (MMS)**: N/A

   Additional resources/technical assistance requested: Data Entry

   MCOFA provided additional explanations on how to enter data in reporting systems so that riders will be accurately recorded. MMS feels comfortable going forward.

2. **MCOFA Comments:**

   Areas in need of attention: **N/A**

   Overall Assessment /Summary:

   MMS implemented a new customer service survey to provide riders with an opportunity to share their experiences and offer feedback. As part of this effort, the survey introduced a refreshed contribution option, giving riders another easy way to contribute; should they choose to do so.

   The thoughtful comments and feedback received through the aforementioned survey demonstrate how highly riders value MMS and underscores the important role the service plays in the community. Many responses reflect a genuine appreciation for the reliability, accessibility, and support MMS provides, reinforcing that these services are not only valued by riders but are also an essential resource for the community.

   Overall, Medical Motors continues to provide exceptional logistical support and remains an important and valued transportation resource for the community. Their commitment to coordinating transportation efficiently and responding to the needs of riders, Senior Centers, and MCOFA helps ensure that individuals have reliable access to essential services, programs, activities, and community events. MMS's role extends beyond simply providing transportation; they help create opportunities for connection, participation, and independence, making their services an important part of supporting the overall well-being and quality of life of those they serve.

***Department of* Human Services**
Office for the Aging
Monroe County, New York

Adam Bello
County Executive

Thalia Wright
Commissioner

Steve Newcomb
Director

8/20/2026

Medical Motor Service
608 S. Clinton Avenue
Rochester, NY 14620

Dear Tim Kohlmeier and Karen Ekiert:

On behalf of the Monroe County Office for the Aging, thank you for your time and collaboration during the recent annual program monitoring visit conducted on 8/18/2026.

We appreciate the opportunity to review your program operations and to meet with your staff. The monitoring process is an important part of ensuring quality services for older adults and maintaining alignment with New York State Office for the Aging program requirements and the Older Americans Act.

At this time, no significant compliance concerns were identified.

Please extend our appreciation to your staff for their cooperation, openness, and dedication throughout the monitoring process. Their efforts are clearly reflected in the quality of services provided.

Should you have any questions regarding the annual program review, please do not hesitate to contact me at 585-753-6520 or via email at carolynbeich@monroecounty.gov We value our partnership and look forward to continued collaboration in supporting older adults in our community.

Sincerely,

Carolyn Beich

Carolyn Beich, Program Monitor
Monroe County Office for the Aging

Enclosure: 2025 Annual Program and Service Assessment

Rorick, Leanne

From: Daphne Geoca <dgeoca@ci.webster.ny.us>
Sent: Wednesday, July 22, 2026 4:35 PM
To: Nasso, Jim
Cc: Rorick, Leanne; Chris Bilow
Subject: Re: Senior Center Van

This Message Is From an External Sender
This message came from outside your organization.

Hi Jim,

*** Is the Town still in possession of the van? yes**
*** If so, the current condition of the van? good**
*** Total mileage to date? 13,143**
*** Approximate number of senior congregate meal trips per week? Occasional. This van is our backup option.**

Daphne Geoca
Recreation Supervisor
55+ Coordinator
Town of Webster Parks and Recreation
1350 Chiyoda Drive
Webster, NY 14580
585-872-7103 x 7105
websterny.gov/702/parks-recreation

From: Nasso, Jim <JimNasso@monroecounty.gov>
Sent: Wednesday, July 22, 2026 1:24 PM
To: Daphne Geoca <dgeoca@ci.webster.ny.us>
Cc: Rorick, Leanne <leannerorick@monroecounty.gov>
Subject: Senior Center Van

ATTENTION: This email came from an external source. Do not open attachments or click on links from unknown senders or unexpected emails. Use the Report button if you suspect malicious activity.

Good afternoon Daphne. If you could please provide for me a little information on the 2023 Chevrolet 3500 Express 158 Passenger Van that was purchased using some MCOFA funding.
We have a State audit coming up, so if you could provide:

*** Is the Town still in possession of the van?**
*** If so, the current condition of the van?**

*** Total mileage to date?**
*** Approximate number of senior congregate meal trips per week?**

If you could provide this in the next week or so, I would be grateful.
As always, please contact me if you have questions.

Thanks.

Jim

Jim Nasso
Human Services Evaluation Coordinator
Monroe County Dept. of Human Services
Office for the Aging
435 E. Henrietta Road
Rochester, NY 14620
(585) 753-6460

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Monroe County Department of Human Services'
Office for the Aging
Program Evaluation and Contract Compliance

ANNUAL PROGRAM AND SERVICE

ASSESSMENT

MONROE COUNTY OFFICE FOR THE AGING
COMMUNITY-BASED SERVICES FOR THE ELDERLY

AS Funded by: Older Americans Act of 2016, As Amended and NYS Funds

CONTRACTOR
United Way

Age Friendly Implementation Plan for Older Adults

EXPENDITURES

CSE (4/1/25 – 3/31/26) ---------- $ 100,000

Date of Assessment: September 19, 2026
MCOFA Monitor: Kitty Koul
Others Participating: Jaime Saunders, Melissa Wendland

2025-26

I. Past performance/Previous recommendations

1. Review Findings/Units of Service

1. Were there findings from the prior year's monitoring that required corrective actions to address areas of non-compliance?

Yes No x N/A

If yes, were all findings from MCOFA's previous monitoring efforts satisfactorily addressed?

2. New York State OFA Database and ContrackHQ Reporting

Please indicate the **Name and Job Title** of the person(s), and the back-up person(s) responsible for electronic reporting via *Peer Place,* and County Contract HQ for all programs pertaining to this assessment.

United Way

Primary ContrackHQ person: Jaime Saunders, CEO
Back-up ContrackHQ person: Robert De Leon, Director of Community Impact

3. Implementation Activities

Surveys	# Projected	#Responses
Surveys completed	1500	1271

Focus Groups	# Projected	# Actual
# of focus groups conducted	19	22

1. Identify/provide source documents:

1a. Describe reason(s) for any variances: The contract estimated a projected 1,500 questionnaire responses, a total of 1,271 responses were received, representing approximately 85% of the projected target. The participation level is consistent with response rates observed with the previous AARP questionnaire. The response volume achieved was sufficient to support meaningful analysis and reporting.

A key accomplishment of the project was surpassing the target number of focus groups conducted. The Alliance partnership with Nazareth University gerontology students led by Dr. David Steitz, contributed to exceeding our projected goal and enabled the Alliance to engage more participants than planned, gather diverse perspectives, and deepen the understanding of communities' needs and priorities.

4. Action Steps

Action Steps	Projected # of municipalities	Actual # of municipalities that were engaged
# of municipalities engaged	19	8

1a. Describe reason(s) for any variances:
Irondequoit, Wheatland, Brighton, Henrietta, Greece, Mendon, Pittsford, Henrietta

Two municipalities, Irondequoit and Wheatland, formally adopted Age-Friendly Livable Community resolutions during the project period and six municipalities (Brighton, Henrietta, Greece, Mendon, Pittsford, and Webster) indicated their intention to incorporate age-friendly principles into future comprehensive plan updates and planning processes.

While not all municipalities adopted formal resolutions within the project timeframe, this outcome reflects the realities of local government decision-making rather than a lack of commitment to age-friendly community development. Successful adoption depended heavily on the timing of elected officials' priorities, leadership transitions, comprehensive planning schedules, and the time required to establish relationships with municipal staff and policymakers. Many communities were balancing competing priorities, including comprehensive plan updates, infrastructure projects, housing initiatives, budget constraints, and other local policy matters.

Despite these challenges, municipalities demonstrated meaningful progress toward age-friendly planning. Several communities integrated age-friendly concepts into existing planning efforts, and others continued discussions that laid the groundwork for future adoption. The combination of two formal resolutions, six municipalities committed to future integration, and multiple examples of age-friendly policies supporting older adults represents significant advancement in building local government support for age-friendly and livable communities across the region.

5. Number of Presentations

Presentations	# of Presentations/ Meetings / Workshops	Number of people participated in Presentations/ Meetings / Workshops
Age Friendly Implementation Plan for older Adults	17	231

Much of the project's success extended beyond formal municipal adoption and helped build awareness, partnerships, and momentum for age-friendly policies across the region.

A key component of the initiative was sustained engagement with municipal leaders, community organizations, older adults, healthcare systems, and regional stakeholders through presentations, workshops, media appearances, and strategic partnerships. These activities increased awareness of age-friendly principles, expanded participation in focus groups and surveys, and strengthened relationships that ultimately supported local policy adoption efforts.

Highlights include:

- Presentation at the **Monroe County Land Use Training**, introducing planners, municipal staff, and elected officials to age-friendly and livable community principles.
- Interview on **Seniors Rock Radio Show**, which helped promote focus group participation and increase awareness among older adults throughout the region.
- Panelist for the **AARP webinar, "Beyond Words: Developing Age-Inclusive Communication for All Audiences,"** sharing local strategies for creating more inclusive and age-friendly communities.
- Collaboration with **Rush-Henrietta Central School District** on an outreach campaign encouraging older adults to serve as mentors, volunteers, and employees, supporting intergenerational engagement and workforce participation.
- Partnership with the **University of Rochester Medical Center Aging Institute** in planning and promoting the *Aging Inspired* initiative, strengthening connections between age-friendly community development and healthy aging efforts.
- Recognition by **CIVITAS Networks for Health**, a national organization focused on health data and cross-sector collaboration, which highlighted Monroe County's Age-Friendly Community Assessment work as an example of community-driven age-friendly planning.
- Interview with the **New York State Association for Rural Health (NYSARH)** to showcase Monroe County's age-friendly implementation efforts as part of the *Aging Reimagined* initiative focused on aging in rural communities.
- Inclusion of related work in materials highlighted by the **John A. Hartford Foundation**, emphasizing equitable aging policies and recommendations for New York State's Master Plan for Aging.
- Presentations delivered to:
    - Lifespan's Gerontology Program
    - URMC Geriatrics Community-Wide Grand Rounds
    - New York State Senior Action Council
    - ROC Senior Estate Planning audiences
- Interview with the **Western and Central New York Health Foundation** to discuss strategies that support successful age-friendly implementation across communities.
- Participation in the **Regional Master Plan for Aging (RMAPI) Housing Working Group**, helping elevate housing needs of older adults, particularly individuals living below 30% of Area Median Income.

These outreach, education, and partnership activities were instrumental in building the relationships necessary for municipal engagement. Because adoption of age-friendly policies

often depends on local leadership priorities, planning cycles, and community readiness, these presentations and workshops helped establish trust, increase understanding of the age-friendly framework, and maintain momentum despite competing municipal priorities. The breadth of engagement also helped position Monroe County's work as a regional and statewide model, resulting in recognition from national, state, healthcare, planning, and aging-sector organizations.

General Comments on Service Activity and Delivery:

II. Targeting Compliance

Is United Way, the Community Service Provider, using age-friendly plan implementation strategies to fully execute a recommendation, engaging community partners and stakeholders to promote adoption of a recommendation, advocacy for challenge areas, and monitoring community adoption of age-friendly principles?

General Comments on Service Targeting:

III. Outcome Objectives

Performance Goal	Performance Indicator	Actual Results
Residents will provide input via a questionnaire and focus groups to inform municipalities in creating municipal Age Friendly plans	Residents 50+ years will participate in focus groups and offer input about community assets and opportunities to make their community more age friendly.	The performance goal was achieved through strong community engagement. A total of 1,271 questionnaires were completed and more than 230 residents and stakeholders participated in focus groups, workshops, interviews, and other engagement activities, providing valuable insights to complement survey findings. Together, these data informed age-friendly recommendations and municipal planning efforts, ensuring that community priorities and experiences were reflected in strategies to improve livability for older adults.

Leaders will endorse and support an Age Friendly planning process within municipalities	Number of municipalities endorsing, adopting, or committing to incorporate age-friendly principles into local planning processes.	Municipal leadership demonstrated support for the age-friendly planning process through formal Age Friendly Livable Community presentations at town board meetings, resolutions, planning commitments, and active participation in community engagement activities. Two municipalities, Irondequoit and Wheatland, formally adopted Age-Friendly Livable Community resolutions. An additional six municipalities (Brighton, Henrietta, Greece, Mendon, Pittsford, and Webster) expressed commitment to incorporating age-friendly principles into future comprehensive plan updates. Municipal leaders and planning staff participated in presentations, meetings, workshops, and planning discussions that advanced understanding and adoption of age-friendly practices throughout Monroe County.
Participating municipalities will adopt multigenerational, age-friendly principles in community planning efforts; as evidenced by adoption of age-friendly principles in town planning, a town proclamation, or other planning elements and commitments.	Participating municipalities will adopt multigenerational, age-friendly principles in community planning efforts; as evidenced by adoption of age-friendly principles in town planning, a town proclamation, or other planning elements and commitments.	2 municipalities adopted formal Age-Friendly resolutions, and 6 additional municipalities committed to incorporating age-friendly principles into future planning efforts, demonstrating broad municipal support for multigenerational and age-friendly community development.

**Per AARP Network of Age-friendly States and Communities, community adoption is evidence of success; communities rarely complete all recommendations within the six-year cycle, for a plan of Monroe County's size.

Accomplishments in 2025-26

What accomplishments has United Way achieved in the past year?

Through the Monroe County Aging Alliance, United Way convened 25 cross-sector partners, supported municipal adoption of age-friendly principles, engaged more than 1,500 residents

and stakeholders through surveys and community conversations, and elevated Monroe County's age-friendly work through local, state, and national partnerships and recognition.

Customer Satisfaction

N/A

IV. General Management: Contracts & Services

1. Administrative Provisions

1. Are United Way staff activities consistent with prohibitions against participation in partisan activities?
   Yes.

2. Are the facilities where United Way services and activities take place free from political posters and other evidence of advancing one political candidate over another?
   Yes.

3. Are the services carried out under MCOFA contract secular in nature?
   Yes.

4. Has United Way given due recognition to the US. Administration on Aging, the New York State Office for the Aging and Monroe County Office for the Aging, as appropriate, in program/service brochures, flyers and other printed materials? If yes, please provide samples of materials.

   Yes (2023, 2024, 2025 Progress Reports, attached)

5. Does United Way have a written policy regarding retention of all MCOFA contracted program and fiscal records for six (6) years?

Yes. Record retention policy provides retention of contracts for 7 years after the contract ends.

3. Interagency Coordination

Has United Way worked effectively with other providers and organizations to facilitate coordination and minimize possible duplication of effort? **Yes**

4. Service Promotion & Outreach

Indicate what regular means United Way employs to disseminate information to the public and approximately how often this occurs:

United Way's Marketing and Communications Department manages and regularly updates the Monroe County Aging Alliance website while amplifying age-friendly initiatives and resources through social media channels, with a primary focus on LinkedIn. Information of broad community interest is shared with local media outlets throughout the year to increase public awareness and engagement.

In addition to digital communications, information is disseminated through direct community outreach, including tabling events, staff-led resource sharing during site visits, volunteer activities, and other community engagements. Educational and professional development opportunities, such as the Leadership Development Programs and the annual Nonprofit Summit, also serve as important venues for sharing information, fostering partnerships, and promoting the work of the Monroe County Aging Alliance.

MCOFA Contract: Financial Monitoring-Inventory Control

Does United Way maintain sufficient documentation for equipment purchased with MCOFA funds?

Funds are not used for equipment purchase.

Is the equipment purchased with MCOFA funds identified as such either in property records or fund codes marked on the property? **N/A**

Is the equipment purchased with MCOFA funds being used solely to benefit older persons (Unless costs are appropriately pro-rated)? **N/A**

Are staff who handle monies (with the exception of attorneys) bonded? **N/A**

Are two individuals involved in counting customer (client) contributions? **N/A**

Are individuals who are authorized to sign checks involved in processing invoices? **No, handled by separate departments.**

Are individuals who are authorized to sign check different from the person(s) who maintain payroll records? **N/A**

Is United Way maintained registration as a Charitable Organization with the Department of State? **N/A**

Assessment Conclusion

In conveying general comments regarding United Way overall assessment of service delivery and contract compliance, please address the following areas:

Overall assessment of the strengths of United Way:

AGENCY COMMENTS – United Way and the Monroe County Aging Alliance leveraged the expertise and commitment of 25 partner organizations representing community-based organizations, aging services providers, philanthropic funders, government agencies, healthcare systems, and academic institutions to advance implementation of the Age-Friendly Action Plan. Through this collaborative structure, partners helped guide strategy, promote adoption of age-friendly principles, and support local implementation efforts across the community.

Alliance members played an active role in monitoring progress toward age-friendly goals, identifying opportunities to integrate recommendations into organizational and municipal practices, and advocating for policies and initiatives that enhance livability for residents of all ages. This cross-sector partnership strengthened community capacity to advance age-friendly priorities and fostered a shared commitment to creating more inclusive, accessible, and supportive environments for older adults.

MCOFA COMMENTS

United Way and Monroe County Aging Alliance conducted a community survey and led focus groups to support municipalities in developing Age-Friendly plans. More than 230 residents and stakeholders participated in focus groups, workshops, interviews, and other community engagement activities. Their perspectives provided valuable insights that complemented the survey findings and helped identify opportunities to improve livability, accessibility, and quality of life throughout the community.

Melissa's dedication, energy, and leadership have further strengthened the program and contributed meaningfully to its continued success.

Additional resources or technical assistance needed:
AGENCY COMMENTS-

MCOFA COMMENTS-

Monroe County Aging Alliance 2.0 – Engaging Municipalities

Executive Summary

Monroe County Aging Alliance 2.0 (MCAA 2.0) aimed to strengthen age-friendly practices across the county's 19 towns, 10 villages, and the City of Rochester. Building on Monroe County's 2019 entry into the AARP Network of Age-Friendly States and Communities—and the 2024 joint proclamation by Mayor Malik Evans and County Executive Adam Bello—MCAA 2.0 focused to deepened municipal engagement and partnership, advanced equity, and elevated the voices of older residents.

A county wide questionnaire was distributed in the summer of 2025, followed by presentations and workshops with 17 municipalities, reframing aging presentations, resident focus groups, and a review of community's comprehensive plans and assets. These efforts provided a clearer understanding of local strengths and challenges, created a shared commitment to multigenerational planning, and a foundation for long-term age-friendly policies and practices throughout the county.

Across the county, housing, transportation, communication access, and social participation emerged as the most urgent priorities for older adults and municipalities. Housing was identified as the top countywide need, with residents and local governments emphasizing the shortage of accessible single-floor homes, limited affordable rentals, growing interest in ADUs, and a strong desire to age in place. Transportation gaps—including limited bus routes outside Rochester, sidewalk discontinuities, poor lighting, and the need for benches and safe crossings—were consistently described as barriers to independence. Older adults also stressed that communication must be multi-channel, with a clear preference for printed newsletters, direct mail, phone-based access, and in-person communication due to digital exclusion and inconsistent online information. Social participation and intergenerational engagement were highly valued, with the Rush-Henrietta Older Adult Engagement Pilot highlighted as a promising model for volunteerism, mentorship, part-time employment, and school-based connection.

Municipalities are increasingly integrating age-friendly principles into long-range planning, with Brighton, Henrietta, Greece, Mendon, Pittsford, and Webster indicating plans to embed age-friendly domains into upcoming comprehensive plan updates. Among them, Greece provides the most fully developed example, demonstrating how age-friendly planning can be embedded across transportation, housing, zoning, and neighborhood design. Its 2020 Comprehensive Plan commits to supporting residents of all ages and documents strong proximity to services—35% of residents live within a half-mile of medical facilities, 42% near parks, and 58% near retail—reinforcing the importance of walkability. Greece's Neighborhood Business zoning district supports pedestrian-oriented access to daily needs, while ongoing implementation of the Bicycle & Pedestrian Master Plan, Hojack Trail studies, and the Rt. 390 trail extensions strengthens active transportation options. A longstanding sidewalk policy has produced more than 500 miles of sidewalks, making Greece one of the region's most walkable suburban communities. Housing

strategies are equally aligned with aging-in-place goals: the town has expanded the Greece Residential Improvement Program using CDBG funds, county and nonprofit partnerships, and ESL Foundation support, while zoning districts such as Planned Residential, Senior Residential, and Central Health Care expand options for mixed-density, senior, and health-care-oriented housing.

Other municipalities have also advanced age-friendly policy actions. Irondequoit formally designated itself an Age-Friendly Community and expanded senior tax exemptions; Wheatland adopted livable community principles and raised income limits for senior exemptions; Rochester continues to offer senior tax relief and benefits from strong transit access but faces high demand for accessible, affordable housing; and Perinton and Greece both provide sliding-scale property tax exemptions for older adults. The Rush-Henrietta Older Adult Engagement Pilot further demonstrates the potential for school-municipal partnerships to strengthen intergenerational connection and community wellbeing.

Together, these findings call for a clear countywide mandate: older adults want to remain in their homes and communities, and doing so requires coordinated investments in accessible housing, walkable and reliable transportation, multi-modal communication systems, and opportunities for meaningful social participation. Municipal planning efforts illustrate how age-friendly principles can be embedded into long-term policy to support aging in place across Monroe County.

Monroe County Aging Alliance 2.0 – Engaging Municipalities



Monroe County Aging Alliance 2.0 (MCAA 2.0) focused on helping Monroe County's 19 towns and the City of Rochester embed age-friendly practices into everyday municipal decision-making. Building on Monroe County's 2019 entry into the AARP Network of Age-Friendly States and Communities and the 2024 joint proclamation by Mayor Malik Evans and County Executive Adam Bello, the initiative shifted the emphasis from county-level planning to municipality-centered implementation, equity, and resident voice. These efforts resulted in a clearer understanding of local

strengths and challenges, increased a shared commitment to intergenerational towns planning, and strengthened the foundation for long term policy alignment.

MCAA 2.0 used a mixed-methods approach to engage and inform municipalities: a countywide questionnaire for residents 50+, structured presentations with municipal leaders, focus groups (including the Deaf Elders Association of Rochester), demographic and GIS analysis provided by Nazareth University Gerontology program, and a review of municipal plans, zoning codes, and comprehensive plan updates. This mixed methods approach emphasizes both qualitative and quantitative insights, ensuring that recommendations are grounded in both data and lived experience. Municipalities were encouraged to examine their comprehensive plans and include age friendly livable domains as they planned updates to encourage multigenerational planning, while also learning about ageism and reframing aging in strengths-based, anti-ageist ways.

The Monroe County Livable Community questionnaire was made available to residents ages 50 and older for a three-month period, using the same structure as the 2020 AARP Livability Questionnaire to ensure fidelity and allow for meaningful comparison across years. The survey was offered in both paper and online formats, in English and Spanish, and was widely distributed at county-wide events and through Aging Alliance partners to maximize accessibility and participation. A total of 1,271 residents completed the questionnaire—closely mirroring the response volume from 2020—with the City of Rochester accounting for the largest share of responses (21%). This broad, multilingual, multi-format outreach approach provided a dataset reflecting the experiences and priorities of older adults across Monroe County and created a strong foundation for the county's ongoing age-friendly planning efforts.

Municipality	Response Count	Percent of Total
Brockport	120	13.64%
Henrietta	79	8.98%
Brighton	60	6.82%
Spencerport	51	5.80%
Penfield	47	5.34%
Hamlin	46	5.23%
Clarkson	36	4.09%
Pittsford	43	4.89%
Greece	30	3.41%
Webster	29	3.30%
Chili	27	3.07%
Sweden	22	2.50%
Fairport	22	2.50%
Ogden	20	2.27%
Gates	19	2.16%

Social isolation itself was one of the most emotionally charged themes, particularly in Penfield, Brighton, Henrietta, Irondequoit, Brockport, and Deaf senior groups, where residents described loneliness after COVID, reduced mobility, digital exclusion, and a strong desire for intergenerational connection through youth engagement, school partnerships, and neighborhood-based support. Communication gaps further compounded these challenges, as many older adults struggled with digital-first systems, fragmented messaging, and low technology confidence, reinforcing the need for multimodal communication such as print newsletters, mailed calendars, flyers, and phone-based access. Across all groups, participants stressed the need for clearer service navigation and stronger follow-through from community institutions, emphasizing that centralized information, benefits support, and visible action on resident feedback are essential to building trust.

Healthcare navigation was another major stressor, with confusion around Medicare, insurance changes, provider networks, and benefits, creating barriers even when services were physically available. These themes were especially urgent for marginalized older adults—including Deaf and Deaf-Blind residents—who highlighted the need for disability-centered design, ASL access, culturally competent care, and equitable communication.

The Rochester CART Commission's equity priorities reinforce the experiences reported from marginalized older adults. Accessibility, communication equity, and anti-ageist practices were noted throughout focus groups who highlighted the need for disability centered design, ASL access, culturally competent care, and equitable communication and reinforcing that age-friendly implementation is grounded in fairness, accessibility, and the lived experiences of those most affected.

Together, these findings show that older adults want to remain in their communities, and doing so requires coordinated navigation support, accessible housing and transportation, intentional social-connection strategies, and a community system that not only listens but demonstrates action with tangible and reportable results.

Municipalities in Action

The Monroe County age-friendly plan provides the overarching framework that municipalities are aligning with as they update their own plans. "Creating a Community for a Lifetime" Age-Friendly Plan (countywide framework) Monroe County, NY Monroe County, NY. Municipality presentations and workshops focused on defining what an Age-Friendly Livable Community is with specific examples, municipality specific demographic information, access to the AARP Age Friendly Livability Index and AARP resources with a link to the Monroe County Aging Alliance website https://monroeagingalliance.org/. Recommendations to embed age-friendly domains as part of existing comprehensive plans and/ or updated plans included examples of housing, transportation, outdoor spaces, social participation, communication and addressing ageism. Several towns indicated plans to incorporate these principles in upcoming comprehensive plan revisions.

The Town of Irondequoit was the first municipality in Monroe County to formally designate itself an Age-Friendly Community, passing a unanimous resolution in July 2025 that aligns the town with AARP's age-friendly framework. Its most recent Comprehensive Master Plan emphasizes neighborhoods, parks and recreation, future land use, and community design, with a stated commitment to improving quality of life "for Irondequoit's residents, both present and future." The town's age-friendly resolution is now being used to guide implementation of the plan and shape future updates, ensuring that municipal decision-making—from land-use policy to community services—is viewed through an age-friendly lens. Common Ground Health WXXI News

Greece provides one of the strongest and most comprehensive examples of age-friendly planning in Monroe County, integrating transportation, housing, land use, and neighborhood design into a unified strategy that supports older adults. Its 2020 Comprehensive Plan commits to ensuring that Greece remains a safe and desirable place for people of all ages to live, work, and play, and this vision is reflected in both data and policy. With 35% of residents living within a half-mile of medical facilities, 42% within the same distance of parks, and 58% near retail services, the Plan highlights the importance of walkability and proximity to daily needs. This emphasis is reinforced through the Neighborhood Business zoning district, which brings small-scale, pedestrian-oriented services closer to residential areas, and through ongoing implementation of the town's active transportation initiatives, including the Bicycle and Pedestrian Master Plan, Hojack Trail studies, and the Rt. 390 trail extensions. A longstanding sidewalk policy has resulted in more than 500 miles of public sidewalks, making Greece one of the most walkable suburban communities in the region. Housing policy is equally aligned with aging-in-place goals: the Plan documents a rise in homeowners aged 55 and older—from 30% to 40% between 2000 and 2017—and calls for maintaining existing housing stock, revitalizing older neighborhoods, encouraging infill development, and adapting to changing housing preferences. The Greece Residential Improvement Program has been expanded through CDBG funds, county and nonprofit partnerships, and ESL Foundation matching funds to help older adults remain safely in their homes. Zoning tools further diversify housing options through Planned Residential districts that support mixed-density infill such as patio homes and townhomes, as well as Senior Residential and Central Health Care districts that accommodate senior housing and health-care-oriented uses. Together, these coordinated strategies demonstrate how Greece embeds age-friendly principles into long-range planning, offering a model for municipalities seeking to integrate aging-in-place priorities into their comprehensive plans.

The Town of Wheatland formally integrated age-friendly livable community principles into its long-range planning framework in early 2026. The Town Board voted unanimously to adopt age-friendly principles as part of its comprehensive strategic plan, an action documented in regional reporting that also highlighted related updates to senior tax exemption policies. Wheatland's 2025 Comprehensive Master Plan Update—identified on the town's publications page and referenced in regional coverage—explicitly incorporates these principles, embedding them into the town's broader strategic planning efforts. The Town Board's adoption of

age-friendly livable community principles is directly tied to this planning framework, signaling a coordinated approach to supporting older adults through land-use policy, service alignment, and long-term community development. Common Ground Health Town of Wheatland

Brighton, Henrietta, Mendon, Pittsford, Webster comprehensive plan updates are in progress. Town Boards and Planning Departments expressed plans to incorporate age friendly livable community principles, recognizing their current adopted plans may pre-date formal age-friendly language, their next updates are expected to embed age-friendly domains (housing, transportation, outdoor spaces, social participation, communication, etc.).

The Rush-Henrietta Older Adult Engagement Pilot stands out as a flagship innovation. This intergenerational model brought older adults into schools as volunteers, mentors, and part-time employees, demonstrating strong interest among older adults in contributing to schools, with immediate benefits for students and school culture, and a replicable model for municipal–school collaboration. It garnered the attention of Assemblywoman Lunsford and is being duplicated as a model for strengthening intergenerational connection and expanding meaningful roles for older adults with legislative partners in other municipalities.

Collaborations & Advocacy

- Presented at Monroe County Land Use Training
- Interviewed on Seniors Rock Radio Show to promote focus group participation
https://www.iheart.com/podcast/1248-seniors-rock-radio-115916340/episode/seniors-rock-radio-300047078/?cmp=android_share&sc=android_social_share&position=315&autoplay=true&pr=false
- Panelist for AARP age-friendly webinar "Beyond Words: Developing Age-Inclusive Communication for All Audiences"
- Rush Henrietta school district add campaign enlisting older adults as mentors, volunteers and paid positions with the district
    - Partnered with URMC Aging Institute as they planned for *Aging Inspired* campaign page
- CIVITAS Networks for Health – a national collaborative comprised of member organizations working to use health information exchange, health data, and multi-stakeholder, cross-sector approaches to improve health recognized the

MCAA work with municipalities recognized MCAA: Building an Age-Friendly Rochester: A Community Working Together

- Interviewed by the NYS Association for Rural Health (NYSARH) as they launched *Aging Reimagined*, a policy initiative that supports aging in rural communities and highlighting Monroe County's Age-Friendly implementation.
- The John A. Hartford Foundation featured the NYSARH report, emphasizing equity for rural older adults in New York State's Master Plan for Aging. **Ensuring equity for rural older adults in New York State's Master Plan for Aging**
    - Presentation for Lifespan Gerontology Program
    - Presentation for URMC Geriatrics Community Wide Grand Rounds
    - Presented at NYS Senior Action Council
    - ROC Senior Estate Planning
- Western and Central NY Health Foundation Interview recommending strategies that support age-friendly implementation
- Participated in RMAPI housing working group to include addressing older adults housing concerns for those under 30% AMI

Conclusion

MCAA 2.0 engaging municipalities marks a transition into deeper, more coordinated, and sustainable age friendly action across the county. Looking ahead, there is additional opportunity to coordinate on shared initiatives, such as transportation, and continue supporting municipal capacity as communities focus on addressing ageism, age-friendly housing options, improving transportation and walkability, strengthening communication infrastructure, and promoting social participation and intergenerational engagement. Cross sector engagement with schools, libraries, and nonprofits will help strengthen municipalities network of partners supporting older adults.

Department of **Human Services**
Office for the Aging
Monroe County, New York

Adam Bello
County Executive

Thalia Wright
Commissioner

Steve Newcomb
Director

September 18, 2026

Jamie Saunders
75 College Avenue
Rochester, NY 14607

Dear Jamie,

Attached for your records is the completed 2025 Annual Program Evaluation for the Monroe County Office for the Aging (MCOFA) funded Age Friendly Implementation Plan for Older Adults Program. The contract is doing well. For comments related to each program and its specific objectives, please read through the evaluation. You may find additional general comments related to the program on the final page of the evaluation.

Thank you for continuing to provide these valued services to our community's older adult population.

Should you have any questions regarding the evaluation, please do not hesitate to contact me at (585) 753-6458.

Sincerely,

Kitty S. Koul

Kitty S Koul

cc: Monroe County Office for the Aging –Steve Newcomb

Encl: Annual Program and Service Assessment

Monroe County Department of Human Services'
Office for the Aging
Program Evaluation and Contract Compliance

ANNUAL PROGRAM AND SERVICE

ASSESSMENT

MONROE COUNTY OFFICE FOR THE AGING
COMMUNITY-BASED SERVICES FOR THE ELDERLY

AS Funded by: Older Americans Act of 2016, As Amended and NYS Funds

CONTRACTOR
Daniel Jones

Computer Training for Adults

EXPENDITURES

Title III-B (1/1/25 to 12/31/25)----------$20,000

Date of Assessment: September 5, 2026
MCOFA Monitor: Kitty Koul
Others Participating: Daniel Jones

2025

I. Past performance/Previous recommendations

1. Review Findings/Units of Service

1. Were there findings from the prior year's monitoring that required corrective actions to address areas of non-compliance?

Yes No x N/A

If yes, were all findings from MCOFA's previous monitoring efforts satisfactorily addressed?

2. New York State OFA Database and ContrackHQ Reporting

Please indicate the **Name and Job Title** of the person(s), and the back-up person(s) responsible for electronic reporting via *Peer Place*, and County Contract HQ for all programs pertaining to this assessment.

Daniel Teaches

Primary ContrackHQ person: Daniel Jones
Back-up ContrackHQ person: N/A

NYSOFA Database Reporting
Primary: Daniel Jones
Back up: N/A

3. Units of Service

Units of Service	Projected Units	Actual Units	% of Projected Units
Computer Training for Older Adults	63.5[1] 105[2]	49 106	77.16% 100.95%

[1] 1-1 sessions [2] Group sessions

1. Identify/provide source documents: New York State Office for Aging Database.

1a. Describe reason(s) for any variances

4. People Served

People Served	Actual # of unduplicated Persons Served	Actual # of duplicated Persons Served
Computer Training for Older Adults	94	1542

1a. Describe reason(s) for any variances:

5. Cost per Unit of Service

Units of Service	Projected cost per unit	Program Funding/Actual Total Units = Actual Cost per Unit		
Computer Training for Older Adults	$100.00[1] $130.00[2]	$ 4,900.00 $13,780.00	49 106	$100.00 $130.00

[1] 1-1 sessions [2] Group sessions

1a. Describe reason(s) for any variances: Because Daniel had more months available to teach in 2025, we adjusted the number of both one-on-one and group sessions and the price per unit accordingly in order to fit within the budget.

General Comments on Service Activity and Delivery:

II. Targeting Compliance

1. Minority Clients Served

Service	Projected % of Minorities Served	Actual % of Minorities Served	Projected # of Minorities Served	Actual # of Minorities Served
Computer Training for Older Adults	11%	N/A		

1a. Is Daniel Teaches, the Community Service Provider, meeting its goals of providing services to minority older adults at least in proportion to their representation in the total population within the service provider's catchment area? This is not information that is tracked by Daniel.

Yes If Yes,

[1] To what do you attribute your success?

No If No,

[1] Please state the reason and outline specific action plan to reach the objective (use a separate sheet if necessary)

2. Minorities with Low Incomes Served

Service	Projected % of Minorities with Low Incomes Served	Actual % of Minorities with Low Incomes Served	Projected # of Minorities with Low Incomes Served	Actual # of Minorities with Low Incomes Served
Daniel Teaches	-----		-----	

This is not information that is tracked by Daniel. Daniel provides computer classes at senior centers in Monroe County and participants of Expanded In-Home Services for the Elderly Program (EISEP).

1a. Is Daniel Teaches, the Community Service Provider, meeting its goals of providing services to minority older adults with low incomes at least in proportion to their representation of the total older adult population within Monroe County?

Yes If Yes,

[1] To what do you attribute your success?

No If No,

[1] Please state the reason and outline specific action plan to reach the objective (use a separate sheet if necessary)

[1] Please provide brief narrative of demographic breakdown of Daniel Teaches

3. Limited English Proficiency (LEP)

1a. Is Daniel Teaches, the Community Service Provider, meeting its goals of providing services to people with Limited English Proficiency (LEP) at least in proportion to their representation of the total older adult population within Monroe County?

Yes X If Yes, Interpreter is present available when needed.

[1] To what do you attribute your success?

No If No,

[1] Please state the reason and outline specific action plan to reach the objective (use a separate sheet if necessary)

_____
_____
_____
___

General Comments on Service Targeting:

III. Outcome Objectives

Performance Goal	Performance Indicator	Actual Results
Annual Customer Satisfaction surveys sent to the participants of the training program have a cumulative score of 90% or greater.	Performance measure is self reported by each participant via a Student Evaluation Form.	98%

Accomplishments in 2025

What accomplishments has Daniel Teaches achieved in the past year?

A 98% satisfaction rate + 14,58 people attending 106 seminars + 84 people receiving personalized one-on-one instruction = smarter, more informed, happier older adults.

Customer Satisfaction

Please provide source documents and results from actual clients served which indicates quality of services provided, i.e. Customer satisfaction survey, telephone follow up etc.

"Daniel is very easy to understand and informative. Good teaching instruction. Listen's to questions – to understand and help. Thank you." – Cindy Deidal, Lily Café

Extremely important information always shared and easy to understand." – Donna Spexarth, Webster Senior Center

"Excellent seminars, we love learning from you. Great information, we share with the seniors and the young." – Christel, Hilton Parma Recreation

"Always kind. Can ask any questions and not feel stupid. Can depend on his answers." – Agnes DeJohn, Lily Café

Indicators of Success (Client)

Annual Customer Satisfaction surveys sent to the participants of the training program have a cumulative score of 90% or greater.

	a) Year 1 Projection	b) Year 1 Actual
Time Frame	**1/1/25 – 12/31/25**	**1/1/25 – 12/31/25**

Number / % Successful	**90%**	**98%**

IV. General Management: Contracts & Services

1. Administrative Provisions

1. Are Daniel Teaches staff activities consistent with prohibitions against participation in partisan activities?
   Yes.

2. Are the facilities where Daniel Teaches services and activities take place free from political posters and other evidence of advancing one political candidate over another?
   N/A

3. Are the services carried out under MCOFA contract secular in nature? **Yes.**

4. Has Daniel Teaches given due recognition to the US. Administration on Aging, the New York State Office for the Aging and Monroe County Office for the Aging, as appropriate, in program/service brochures, flyers and other printed materials? If yes, please provide samples of materials.
   No.

5. Does Daniel Teaches have a written policy regarding retention of all MCOFA contracted program and fiscal records for six (6) years?
   No.

6. What provisions has Daniel Teaches made to protect the confidentiality of customer (client) information?
   No customer information is collected.

7. Does Daniel Teaches have a system in place to allow customers (clients) to voluntarily and confidentially contribute to program services?
   Yes.

7a. If so, how are these contributions utilized?
   To enhance existing and future programming.

8. Does Daniel Teaches have a procedure that allows customers (clients) as well as applicants for services to present grievances on the denial of services?
   Yes.

9. Does Daniel Teaches have a procedure to accept customer (client) feedback on service quality, service delivery methods, and service personnel?
   Yes.

Please describe procedure: **Course surveys are distributed and collected after the completion of every course. Members are encouraged to provide feedback and can do so anonymously.**

10. Does Daniel Teaches have a policy and procedure in place to ensure that only eligible customers (clients) are served in MCOFA contracted programs?
    Yes.

11. Does Daniel Teaches make service sites and program information accessible to persons with disabilities?
    Yes.

12. Does Daniel Teaches solicit input from their customers and constituents, including customers and constituents that are frail, disabled, minority, and/or, on ways to make services more accessible and appealing to culturally diverse populations?
    Yes. Please describe procedure: **Member surveys are provided after every course for feedback regarding current and future course specifics, audio/visual needs, building accessibility, etc.**

3. Interagency Coordination

Describe Daniel Teaches procedure(s) for tracking referred customers' requests for assistance to other organizations when the need for such services is identified:

Has Daniel Teaches worked effectively with other providers and organizations to facilitate coordination and minimize possible duplication of effort? **Yes**

4. Service Promotion & Outreach

Indicate what regular means does Daniel Teaches employ to disseminate information to the public and approximately how often this occurs:

MCOFA Contract: Financial Monitoring-Inventory Control

Does Daniel Teaches maintain sufficient documentation for equipment purchased with MCOFA funds?

Funds are not used for equipment purchase.

Is the equipment purchased with MCOFA funds identified as such either in property records or fund codes marked on the property? N/A

Is the equipment purchased with MCOFA funds being used solely to benefit older persons (Unless costs are appropriately pro-rated)? N/A

Are staff who handle monies (with the exception of attorneys) bonded? N/A

Are two individuals involved in counting customer (client) contributions? N/A

Are individuals who are authorized to sign checks involved in processing invoices? No, handled by separate departments.

Are individuals who are authorized to sign check different from the person(s) who maintain payroll records? N/A

Is Daniel Teaches maintained registration as a Charitable Organization with the Department of State? N/A

Assessment Conclusion

In conveying general comments regarding Daniel Teaches overall assessment of service delivery and contract compliance, please address the following areas:

Overall assessment of the strengths of Daniel Teaches:

AGENCY COMMENTS - The MCOFA technology program enjoyed another successful year in 2025, delivering essential digital skills to a diverse group of older adults. The program continues to help participants maintain vital connections with family, friends, healthcare providers, and the community to combat social isolation.

MCOFA COMMENTS - This program continues to provide high-quality programming for older adults in our community. Participants who have attended Daniel's classes report a high level of satisfaction with his instruction and value the knowledge and skills they gain through his classes. Many would recommend his classes to others, reflecting the quality of instruction and the positive impact of the program on participants' learning and personal development.

In 2025, MCOFA expanded this program to reach more older adults throughout the community, including those who may not currently participate in senior center programs. This expansion allowed us to provide additional opportunities for older adults to learn, engage, and benefit from quality programming in accessible community settings.

Daniel experienced some challenges with one of the program sites, which ultimately resulted in the decision to discontinue providing instruction at that location. Moving forward, clear communication and strong collaboration with site staff will be important to ensure a positive experience for both instructors and participants.

Additional resources or technical assistance needed:

AGENCY COMMENTS-

MCOFA COMMENTS-

Department of **Human Services**
Office for the Aging
Monroe County, New York

Adam Bello
County Executive

Thalia Wright
Commissioner

Steve Newcomb
Director

September 5, 2026

Daniel Jones
32 Palisade Park
Rochester, NY 14620

Dear Daniel,

Attached for your records is the completed 2025 Annual Program Evaluation for the Monroe County Office for the Aging (MCOFA) funded Computer Training for the Adults Program. The contract is doing well. For comments related to each program and its specific objectives, please read through the evaluation. You may find additional general comments related to the program on the final page of the evaluation.

Thank you for continuing to provide these valued services to our community's older adult population.

Should you have any questions regarding the evaluation, please do not hesitate to contact me at (585) 753-6458.

Sincerely,

Kitty S. Koul

Kitty S Koul

cc: Monroe County Office for the Aging –Steve Newcomb

Encl: Annual Program and Service Assessment

Department of **Human Services**
Office for the Aging
Monroe County, New York

Adam Bello
County Executive

Thalia Wright
Commissioner

Steve Newcomb
Director

July 17, 2026

Kelly Zunner-Daniels
1900 S Clinton Ave.
Rochester, NY 14618

Dear Kelly,

Attached for your records is the completed 2025 Annual Program Evaluation for the Monroe County Office for the Aging (MCOFA) funded Elder Abuse Prevention, Respite, and Intervention Services Program.

The contract is doing well. For comments related to each program and its specific objectives, please read through the evaluation. You may find additional general comments related to the program on the final page of the evaluation.

Thank you for continuing to provide these valued services to our community's older adult population.

Should you have any questions regarding the evaluation, please do not hesitate to contact me at (585) 753-6458.

Sincerely,

Kitty S. Koul

Kitty S Koul

cc: Monroe County Office for the Aging –Steve Newcomb

Encl: Annual Program and Service Assessment

Monroe County
Department of Human Services' Office for the Aging
2025

ANNUAL PROGRAM AND SERVICE ASSESSMENT

LIFESPAN OF GREATER ROCHESTER, INC.

2025

Elder Abuse Prevention, Respite, and Intervention Services

Amount of Contract:	$114,303
Funding Period:	January 1, 2025 through December 31, 2025
Funding Sources:	Title IIIB
Key Contact:	Paul Caccamise, Vice-President, Lifespan

Date of Site Visit: 3/30/2026
Assessment Date: 7/17/2026
MCOFA Monitor: *Kitty Koul*
Others Participating:
Paul Caccamise, VP for Program
Kelly Zunner-Daniels, Director, Upstate Elder Abuse Center

Intervention Services

LIFESPAN *Service*	Projected Interventions	Actual Interventions
# Served	*230*	*209*
# Successful	*215*	*166**
% Successful	*86%*	*79.5%**

**Extrapolated from 44 closed cases successfully surveyed through phone follow-up contacts. Of the 44 completed follow-up contacts, 35 or 79.5% reported reduction or elimination of abuse. This includes cases from all EAPP counties served.*

3. Describe reason(s) for any variances:

Follow-up calls yielded results short of the goal of 86% of clients reporting successful change. There was a lower number of follow-up contacts completed this year. This is likely due to a high number of situations where follow-up contact was determined to be unsafe (n=137) and several unsuccessful follow-up attempts (n= 36).

Respite Services

LIFESPAN *Service*	Projected Respite	Actual Respite
# Served	*20*	*14**
# Successful	*19*	*NA***
% Successful	*95%*	*NA***

** Number reported here deviates from number entered into HCS NYSOFA database (n=21), which reflects individuals served by respite dollars per month and is not an unduplicated count.*

*** Measure of success in respite cases not defined. Respite cases are included in general, follow up survey of EAPP cases (see above) All clients served by respite funding this year completed their requested respite services and worked with the assigned EAPP social worker on long-term care plan/safety plan options during use of respite services.*

Expenditures

LIFESPAN *Service*	Projected Expenditures	Actual 2025 Expenditures	% of Projection
EAP Respite Care	*$21,822.00*	*$4,659.40*	*21.4%*

4. Describe reason(s) for any variances: *This past year the program received additional respite funding through Office for the Prevention of Domestic Violence (OPDV) specifically related to serving domestic violence survivors. These funds were time limited. Due to additional funding received, all respite funding went underutilized. Additionally, some respite requests were difficult to fill due to skilled nursing facility and home care staff shortages. Many requests that were filled were lower cost, such as transportation to court or Lifespan office for private conversations.*

LIFESPAN *Service*	**Projected Expenditures**	**Actual 2025 Expenditures**	**% of Projection**
EAP Intervention	*$105,182.00*	*$99,323.94*	*94.4%*

4a. Describe reason(s) for any variances: *n/a*

Actual Cost per Client

LIFESPAN *Service*	**No. of Persons Served**	**Actual 2025 Expenditures**	**Average Cost Per Client**
EAP Respite Care	*14*	*$4,659.40*	*$322.81*
EAP Intervention	*209*	*$99,323.94*	*$475.23*

5a. Do costs per person appear reasonable? (Yes) No

If no, please explain:
n/a

General Comments on Service Activity and Delivery:

The program continues to provide client centered services to older adults at risk of elder abuse and mistreatment. Use of respite funds are individualized to support client safety and goals for change. The program collaborates with other Lifespan programs and community agencies to remain current with programming and community resources to ensure clients are receiving comprehensive care management services.

II. Targeting Compliance

Minority Elders Served

LIFESPAN *Service Combined*	% of Minority Elders in Elderly Population in Catchment Area	Total Elders Served	Total Minority Elders Served	% of Minority Elders Among Total Elders Served
EAP Respite & Intervention	*29.5%**	*209*	*50***	*23.9%*

**Monroe County only (2019 US Census Quick Facts estimates)*

1a. Is LIFESPAN, the Community Service Provider, meeting its goals of providing services to minority elders at least in proportion to their representation in the total elderly population within the service provider's catchment area?

(Yes) No If **yes,** to what do you attribute your success?

Lifespan conducts ongoing outreach to minority and underserved communities through educational and tabling community events.

If **no**, please state the reason and outline a specific action plan to reach the objective.

***Racial/ethnic background info is not available for 16 of 209 clients, so the proportion of minority elders in the caseload for 2025 may be higher.*

Minority Elders with Low Incomes Served

LIFESPAN *Service Combined*	% of Minority Elders with Low Incomes in Elderly Population in Catchment Area	Total Elders Served	Total Minority Elders with Low Incomes Served	% of Minority Elders with Low Incomes Among Total No. of Elders Served
EAP Respite & Intervention	*3.3%**	*209*	*23*	*11.0%*

**Monroe County only (2019 US Census Quick Facts estimates)*

2a. Is LIFESPAN, the Community Service Provider, meeting its goals of providing services to minority elders with low incomes at least in proportion to their representation in the total elderly population within the service provider's catchment area?

Yes No If Yes, to what do you attribute your success?

Lifespan concentrates outreach to minority and underserved communities through presentations to community groups and tabling events throughout the county through its EAPP, Fraud and Scams program, and through publicity in minority publications and in the mainstream media.

If **no**, please state the reason and outline specific action plan to reach the objective (use a separate sheet if necessary)

n/a

3. Elders with The Greatest Economic Need

LIFESPAN *Service Combined*	**% of Elders with Low Incomes in Elderly Population In catchment area**	**Total Persons Served**	**Total No. of Elders with Low Incomes Served**	**% of Elders with Low Incomes Among Total Persons Served****
EAP Respite & Intervention	*7% (Monroe County) *** *15% (City of Rochester) **	*209*	*55****	*26.3%*

**Based on US Census American Community Survey data – 2010-2014; residents over 65 living in poverty.*

***percentage of clients in Monroe County with annual incomes below $15,000 per year.*

**** In 2025, 55 individuals identified their annual income as being at 150% or less of the poverty line. Financial information is not available for 108 clients so the proportion of low-income elders in the caseload for 2025 may be higher.*

3a. Is LIFESPAN, the Community Service Provider, meeting its goals of providing services to the elderly with the greatest economic need at least in proportion to their representation in the total elderly population within LIFESPAN's catchment area?

Yes No If Yes, to what do you attribute your success?

Lifespan continues outreach into the community through community education, participation in community events targeting older adults and caregivers, and media opportunities, as described above.

If no, please state the reason and outline specific action plan to reach the objective (use a separate sheet if necessary) *n/a*

4. Elders with the Greatest Social Need: Living Alone

LIFESPAN *Service Combined*	**% of Elders Living Alone in The Elderly Population Catchment Area**	**Total Persons Served**	**Total No. of Elders who Live Alone Served**	**% of Elders who Live Alone Among Total Persons Served**
EAP Respite & Intervention	44.7%*	209	64**	30.6%

**American Community Survey – US Census – 2015 estimate for non-institutionalized older adults 60 years+ in Monroe County*

*** These are clients listed as living alone in the EAPP database. Living environment information is not available for 21 clients, so the proportion of clients living alone in the caseload for 2025 may be higher.*

4a. Is LIFESPAN, the Community Service Provider, meeting its goals of providing services to the elderly with the greatest social need at least in proportion to their representation in the total elderly population within LIFESPAN's catchment area?

Yes **No** If Yes, to what do you attribute your success? *n/a*

If no, please state the reason and outline specific action plan to reach the objective (use a separate sheet if necessary)

During the past few years, caseworkers in the EAPP team have noted clients are experiencing increased difficulty with evicting individuals from their home and/or locating independent housing. First, this was related to the Covid pandemic and then due to lack of safe, affordable housing in our community. Additionally, due to the dynamics of elder abuse situations, it is not uncommon for clients served by the program to have suspected perpetrators of abuse living with them. These are potential reasons the program is seeing a lower percentage of adults living alone than is representative of the community being served. The program will continue outreach to the greater community to identify and assist clients who are living alone and in need of support.

5. Frail and Disabled Elders

LIFESPAN *Service Combined*	**% of Frail or Disabled Elders in Elderly Population In Catchment area**	**Total Persons Served**	**Total No. of Frail or Disabled Elders Served**	**% of Frail or Disabled Elders Among Total Persons Served**
EAP Respite & Intervention	28.1%*	209	84	40.2%

**American Community Survey – 2015 estimate for 60+ population in Monroe County, NY*

5a. Is LIFESPAN, the Community Service Provider, meeting its goals of providing services to the elderly with frailty or disability at least in proportion to their representation in the total elderly population within LIFESPAN's catchment area?

Yes No If Yes, to what do you attribute your success?

Lifespan has conducted extensive outreach to healthcare facilities and practitioners in recent years, which may account in part for the high percentage of clients referred with frailty/chronic disability.

If **no**, please state the reason and outline specific action plan to reach the objective (use a separate sheet if necessary) *n/a*

5b. Is your Agency responsive to **"LEP (Limited English Proficiency)"?**

Limited English Proficiency – Individuals who do not speak English as their primary Language and have limited ability to read, speak, write, or understand English can be Limited English proficient.

Yes No

Brochures are written to be understandable to persons with moderate literacy in written English. The majority of agency materials are translated into Spanish, including program brochures, educational materials, client forms, and feedback evaluation forms. Some agency trainings are delivered in Spanish or other languages. Lifespan has 14 staff who are proficient in 13 languages other than English. The agency has a contract with Language Line for over- the-phone interpretation and contracts with other local interpreter services for in-person interpreting services including EZ Translation, Language Intelligence, CDR for ASL, and others.

If No, please state the reason and outline a specific action plan to reach the objective: *n/a*

5c. Is your Agency responsive to LGBT Clients?

(Yes) No

Lifespan has inclusive, non-discrimination policies in place which includes service to LGBTQ+ individuals. Staff receives training and is knowledgeable about culturally competent service to LGBTQ+ older adults. Lifespan has assigned a care coordinator to connect with Rainbow Seniors ROC for consultations with caregivers through the Finger Lakes Caregiver Institute. The Upstate Elder Abuse Center had a grant from the NYS Children and Family Trust Fund to do outreach, education, and intervention around elder abuse in the LGBTQ+ community. Since the dissolution of the Out Alliance in June 2020, Lifespan has partnered with Trillium Health for outreach and education purposes. This grant ended in August 2023; however, the collaborative relationship built during this work will continue and was the basis for a formal partnership to access Office for the Prevention of Domestic Violence (OPDV) Survivors Access Financial Empowerment (SAFE) client funding which was distributed in 2025. The Elder Abuse Prevention Program has been awarded another 3-year contract for OPDV SAFE funds and will again partner with Trillium on distribution of these funds in our community over the next 3 years (2026-2029). The Upstate Elder Abuse Center is also taking the lead in implementing the 2022 Elder Abuse Summit recommendations to enhance identification and service provision among historically underserved older New Yorkers, and the LGBTQ+ community is one focus of this work.

If No, please state the reason and outline a specific action plan to reach the objective: *n/a*

III. General Management: Contracts & Services

Staffing

1a. Does LIFESPAN have adequate staff to perform the activities required under contract with MCOFA?

(Yes) No

Workloads in EAPP are manageable when the program is fully staffed.

1b. Does LIFESPAN have a training plan designed to assist staff in carrying out assigned tasks?

(Yes) No

Cultural Competency LS-116 of Program Policies and Procedures states Lifespan will offer on-going, in-services, and follow-up in-services, to increase staff knowledge of various cultures and of generational differences and enable them to work effectively with consumers from various cultures.

Staff receive mandatory orientation to culturally competent practice in a new-staff orientation session following their hire. In addition to those in-services, we have a small committee that organizes other training and in-services throughout the year (e.g., work with persons with disabilities, trauma in older

adults, etc.).

The Upstate Elder Abuse Center has a standardized onboarding system to provide orientation to elder justice specific topics and casework strategies. The Division Leader meets with each staff person for case planning, monitoring of their work, and knowledge development monthly. Additionally, the Elder Abuse Prevention social work team meets monthly for group discussion of care management issues. Program staff are encouraged to seek out and attend trainings that will enhance their work, on topics including but not limited to elder abuse casework, trauma informed care, financial exploitation, and community resources.

1c. Would a random check of LIFESPAN's personnel files verify the type of training provided for staff, including the date, the presenter and his/her qualifications, and the material covered?

Yes No

Individual personnel files do not contain training logs but Lifespan programs keep in-service materials which includes the sign in sheets for who attend. Separate files are also maintained for seven years for Lifespan-sponsored training that qualifies as licensed social worker CE contact hours. (Lifespan is a NYSED-approved provider of CE courses.)

1d. Does LIFESPAN comply with Affirmative Action and Equal Opportunity guidelines?

Yes No

We have both an Equal Employment Opportunity Policy and an Affirmative Action Policy written, documented, and kept in Human Resources.

1e. Is an EEO sign posted in a prominent location?

Yes No

Posted on employee bulletin board at employee entrance.

1f. Are reasonable accommodations made for staff and volunteers with disabilities?

Yes No

Lifespan facilities are handicap accessible. Interpreters are available for Deaf individuals who use ASL. Renovations in 2016 included handicap accessible restrooms and hearing loops in two large meeting rooms for hard of hearing with T-coil hearing aids.

1g. Does the LIFESPAN staffing pattern reflect the minority representation in the total population?

Yes No

For 2025 - Staff demographic breakdown was 77.3% White; 12.6% Black; 4.0% Latino; 4.0% two or more races; 1.5% Asian; 0.5% American Indian/Alaskan Native.

1h. Can LIFESPAN document outreach efforts to recruit targeted individuals to fill vacant positions?

(Yes) No

Recruitment efforts, including efforts to recruit minorities, is documented in the Affirmative Action plan.

2. Administrative Provisions

1. Are LIFESPAN staff activities consistent with prohibitions against participation in partisan activities?

   (**Yes**) No

   Prohibition against partisan political activities is contained in Lifespan policy# 113FP

2. Are the facilities where LIFESPAN services and activities take place free from political posters and other evidence of advancing one political candidate over another?

   (**Yes**) No

3. Are the services carried out under MCOFA contract secular in nature?

   (**Yes**) No

4. Has LIFESPAN given due recognition to the US. Administration on Aging, the New York State Office for the Aging and Monroe County Office for the Aging, as appropriate, in program/service brochures, flyers and other printed materials.

   (**Yes**) No

   Acknowledged in UpEAC brochures and other materials.

5. Does LIFESPAN have a written policy regarding retention of all MCOFA contracted program and fiscal records for six (6) years?

   (**Yes**) No

   Record retention guidelines are contained in policy # LS 110. Records are now kept for seven years.

6. What provisions has LIFESPAN made to protect the confidentiality of customer (client) information?

   Confidentiality and HIPAA policies are in place within Lifespan. Training is given regarding confidentiality to each new staff person hired as well as in ongoing training during the annual

corporate compliance training (Policy # LS 103). Additionally, Lifespan observes more stringent restrictions on release of information when serving survivors of domestic violence (Policy #LS 128).

7. Does LIFESPAN have a system in place to allow customers (clients) to voluntarily and confidentially contribute to the cost of services?

Contribution System	
Yes	**No**
All Lifespan staff are trained to encourage donations.	

8. Does LIFESPAN have a procedure that allows customers (clients) as well as applicants for services to present grievances on the denial of services?

Yes No

Lifespan's grievance policy is contained in policy # LS 114.

9. Does LIFESPAN have a procedure to accept customer (client) feedback on service quality, service delivery methods, and service personnel?

Yes No

Lifespan distributes client satisfaction & surveys. In the EAPP program, staff contact clients by phone to evaluate the impact of the intervention and for customer feedback on service provided in situations where it is safe to do so.

10. Does LIFESPAN have a policy and procedure in place to ensure that only eligible customers (clients) are served in MCOFA contracted programs?

Yes No

See *policy # LS-100.*

11. Does LIFESPAN make service sites and program information accessible to persons with disabilities?

Yes No

12. Does LIFESPAN solicit input from their customers and constituents, including customers and constituents that are frail, disabled, minority, and/or, on ways to make services more accessible and appealing to culturally diverse populations

(Yes) No

See policy regarding Culturally Competent Practice: policy # LS 116. Lifespan has an active Diversity Equity, Inclusion, Belonging and Accessibility Committee that guides the agency and makes recommendations about outreach and competent service to minority groups. Lifespan also distributes customer surveys in-person and online to clients and constituents to solicit feedback about our services.

3. Interagency Coordination

1. Describe LIFESPAN's procedure(s) for tracking referred customers' requests for assistance to other organizations when the need for such services is identified:

Data Base (PeerPlace) - an electronic system is used to track referrals made to outside organizations as well as to record case activity.

2. Has LIFESPAN worked effectively with other providers and organizations to facilitate coordination and minimize possible duplication of effort?

(Yes) No

See policy # LS-112 (Referral of Clients for Services)

If yes, please provided examples of this coordination:

**Eldersource uses PeerPlace for intakes, referrals, and information sharing. A common database used by aging service programs minimizes chances of duplication of services.*
**EAPP meets with Adult Protective staff periodically to coordinate efforts around elder abuse cases.*
**EAPP collaborates with health care providers, social service agencies, and legal agencies, including but not limited to Trillium Health, Legal Aid, Willow, LawNY, URMC, as well as other agencies and organizations to coordinate services to individual clients and to avoid duplication of services.*

4. Service Promotion & Marketing

1. Indicate what regular means LIFESPAN employs to disseminate information to the public and approximately how often this occurs:

   - *Public awareness commercials (PSAs and paid ads as funding permits)*
   - *Brochures distributed (ongoing)*
   - *Presentations by staff (2025 – Upstate Elder Abuse Center staff conducted trainings and presentations for 7,318 individuals. This was a mix of virtual and in-person events).*
   - *Editorials and other newspaper articles (occasional)*
   - *Social media (occasional)*
   - *Observation of World Elder Abuse Awareness Day (WEAAD) and Crime Victims Right's Week through coordination of our participation in events and public awareness campaigns to raise community awareness.*

2. What marketing/outreach/publicity techniques have been employed to reach low-income minority elders in your service area?

   - *Participation in community health fairs*
   - *Presentations and tabling events at minority churches*
   - *Public awareness commercials and billboards*
   - *Translated agency brochures into Spanish*
   - *Coordinate with other agencies which serve low-income minority older adults*

5. Equipment Inventory

Reference Enclosed Inventory Sheet for Equipment purchased via MCOFA contracts for services.

6. PeerPlace and ContrackHQ Reporting

1. Identify the **Name and Job Title** of the person(s) and the back-up person(s) responsible for electronic reporting via *Peer Place,* and County Contract HQ.

Primary ContrackHQ person: Paul Caccamise, VP for Program
Back-up ContrackHQ person: Penny Lee, Contract Manager

Primary Case Management-PeerPlace: All case managers/social workers
Back up person: NA

Measurements in ContrackHQ-Primary: Kelly Zunner-Daniels, LMSW, Division Leader, Upstate Elder Abuse Center
Back-up: Emily Rozek, Administrative Assistant, Upstate Elder Abuse Center

PeerPlace Reports-Primary: Kelly Zunner-Daniels, Division Leader, UpEAC
Back-up: Tracey Siebert-Konopko, Director of Education, Training and Research, UpEAC

2. Do the **NAPIS Client** and **Unit Counts** for the Program services noted have less than 10% missing data per the PeerPlace reporting system?

Yes No (N/A)

7. Financial Management-Inventory Control Monitoring

1. Does LIFESPAN maintain sufficient documentation for equipment purchased with MCOFA funds? *Yes. Documentation: Receipts and information are logged in on specific invoices for each purchase made under each funder --LS 111 FP*

2. Is the equipment purchased with MCOFA funds identified as such either in property records or fund codes marked on the property? *Yes. Documentation: inventory chart*

3. Is the equipment purchased with MCOFA funds being used solely to benefit older persons and/or their informal family caregivers (Unless costs are appropriately pro-rated)? *Yes. Documentation: inventory chart*

8. Financial Management-Safeguarding Funds & protecting Assets

1. Are LIFESPAN staff who handle monies (with the exception of attorneys) bonded? *Yes, the agency is bonded, not each individual employee. Documentation: * LS-101FP*

2. Are two individuals involved in counting customer (client) contributions? *Yes. Documentation: LS-101-FP*

3. Are individuals who are authorized to sign checks involved in processing invoices? *No. Documentation: LS-100-FP*

4. Are individuals who are authorized to sign checks different from the person(s) who maintain payroll records? *Yes. Documentation: LS-100-FP*

5. Has LIFESPAN maintained registration as a Charitable Organization with the Department of State? *Yes. Documentation: 501(c)(3), Charities Reg. Number: 05-19-45*

5a. If no: does LIFESPAN claim exemption from the registration (receiving less than $25,000 in grants and contributions annually)? *n/a*
Documentation: *n/a*

IV. Assessment Conclusion

In conveying general comments regarding Lifespan's overall assessment of service delivery and contract compliance, please address the following areas:

AGENCY COMMENTS:

The Elder Abuse and respite program at Lifespan continues to prioritize quality client care and efficient implementation of respite services for clients in need. The program appreciates the timely support from Monroe County Office of the Aging as respite funding is utilized to enhance client safety.

MCOFA COMMENTS:

The Elder Abuse and respite program at Lifespan has maintained a reputation as one of the most effective programs in NY State. The program has a dedicated team that provides efficient and cost-effective Elder Abuse Intervention and Emergency Respite Services. The Director, Kelly Zunner-Daniels, oversees the program to provide services in an organized and impactful manner.

Additional resources or technical assistance needed: none

AGENCY COMMENTS:

MCOFA COMMENTS:

Department of **Human Services**
Office for the Aging
Monroe County, New York

Adam Bello
County Executive

Thalia Wright
Commissioner

Steve Newcomb
Director

September 12, 2026

Jennifer Helmbold
1000 Elmwood Ave.
Rochester, NY 14620

Dear Jennifer,

Attached for your records is the completed 2025-26 Annual Program Evaluation for the Monroe County Office for the Aging (MCOFA) funded Financial Management Assistance Program. The contract is doing well. For comments related to each program and its specific objectives, please read through the evaluation. You may find additional general comments related to the program on the final page of the evaluation.

Thank you for continuing to provide these valued services to our community's older adult population.

Should you have any questions regarding the evaluation, please do not hesitate to contact me at (585) 753-6458.

Sincerely,

Kitty S. Koul

Kitty S Koul

cc: Monroe County Office for the Aging –Steve Newcomb

Encl: Annual Program and Service Assessment

Monroe County
Department of Human Services' Office for the Aging
Program Evaluation and Contract Compliance

2026-26 ANNUAL PROGRAM AND SERVICE ASSESSMENT

MONROE COUNTY OFFICE FOR THE AGING
COMMUNITY-BASED SERVICES FOR THE ELDERLY

AS Funded by: Older Americans Act of 2016, As Amended and NYS Funds

CONTRACTOR
LIFESPAN OF GREATER ROCHESTER, INC.

Financial Management Assistance Program

EXPENDITURES

Title III-B (1/1/25 to 12/31/25)	**----------**	**$ 54,050**
NYS CSE (4/1/25 to 3/31/26)	**----------**	**$ 56,314**
		$ 110,364

Date of Assessment: September 10, 2026
MCOFA Monitor: Kitty Koul
Others Participating: Jennifer Helmbold, Division Leader; Financial Services, Scott Fairchild, Program Director

I. Past performance/Previous recommendations

1. Review Findings/Units of Service

1. Were there findings from the prior year's monitoring that required corrective actions to address areas of non-compliance?

   Yes ___ No __X__

   If yes, were all findings from MCOFA's previous monitoring efforts satisfactorily addressed?

II. Service Activity Review

1. Units of Service

LIFESPAN Service Units	Projected # of Units (2025-26)	Actual # of Units (2025-26)	% of Projection (2025-26)
FM – CSE & Title III-B	1,687	1,713	101.54%

Describe reason(s) for any variances: Volunteers need to report all their activities correctly.

2. Projected Persons Served (One-to-One)

LIFESPAN *Service*	**Projected # of persons 60 +Served (2025-26)**	**Actual # of Unduplicated Persons Served (2025-26)**	**% of Projection (2025-26)**
FM – CSE & Title III-B	245	288	117.55%

Describe reason(s) for any variances:

3. Service Waiting Lists

Financial Management	Waiting List Maintained?		If Yes, please check all that apply & current # on wait list.	Resulting number of referrals to other agencies in 2025-26
Waiting List	**Yes** X	**No**	__ Lack of Funding __ Lack of Staff Other: Finding the right volunteer match for a client, especially if they reside in the city, may take awhile to complete. Try not to let people wait more than a week	0

4. Expenditures

LIFESPAN *Service*	**Projected Expenditures (2025-2026)**	**Actual Expenditures (2025-26)**	**% of Projection (2025-26)**
Financial Management	$110,364.00	$110,364.00	100%

Describe reason(s) for any variances:

5. Actual Cost Per Customer (Client)

LIFESPAN ***Service***	**# of Persons Served (2025-26)**	**Actual Expenditures (2025-26)**	**Average Cost Per Client (2025-26)**
Financial Management **MCOFA Funds**	288	$110,364.00	$383.21

Do costs per person appear reasonable? __X_ Yes ___ No

If no, please explain:

6. Actual Cost Per Unit

LIFESPAN ***Service***	**Projected Cost Per Unit**	**# of Units (2025-26)**	**Actual Expenditures (2025-26)**	**Average Cost Per Unit (2025-26)**
Financial Management **MCOFA Funds**	$59.94	1713	$110,364.00	$64.43

Do costs per person appear reasonable? _X_ Yes __ No

If no, please explain:

III. Outcome Measures

ContrackHQ Update

Please review HQ Outcome measures for accuracy

1) **Outcome Objective #2:**
   To maintain and/or increase the financial stability and independence of older adults in the community through money management services.

Timeframe	Projected 2025-26	Actual 2025-26	Projected 2026-27
Total # of People Served	200	288	245
# Successful	180	288	220
Percent Successful	90%	100%	90%

2) **Outcome Objective #3:**

To recruit and train Financial Management volunteers

Indicator of Success: Number of volunteers recruited and trained met set target			
Time Frame	**Assement Year Projection 1/1/25 - 4/30/26**	**Assessment Year Actual 1/1/25 - 4/30/26**	**Current Year Projection 1/1/26 - 4/30/26**
Projected Total No. of Financial Management Volunteers	35	56	50
% Successful	90%	160%	90%
Basis for Next Year Projection (source & relevant statistics):			

3) **Outcome Objective #4:**

Overall Satisfaction with Lifespan Financial Management Program

Indicator of Success: Seniors will be satisfied with Financial Management services. From the annual Satisfaction Survey, the question "Overall, the services Lifespan provided me financial intervention services that increased my ability to protect and manage my assets satisfactority" will have a combined percentage of "Strongly Agree" and "Agree".			
Time Frame	**Assessment Year Projection 1/1/25 - 4/30/26**	**Assessment Year Actual 1/1/25 - 4/30/26**	**Current Year Projection 1/1/26 - 4/30/26**
# of responses received	74	75	74
# of satisfied participants	67	75	67
% Satisfied	90%	100%	90%
Basis for Next Year Projection (source & relevant statistics): Unduplicated individuals served – projected # carried over from HQ contract report			

4) **Outcome Objective #6:**

Contributions - To collect a minimum of $400 CSE Budget and $394 Title IIIB Budget in participant contributions during the contract period from 01/01/2025 to 03/31/2026.

Actual Collected: $150.00

Actual Per I&A session Average: $0.11

5a. **Performance Measure**

Describe method for measuring program performance:

Program performance is measured by satisfaction surveys and volunteer reports which summarize the hours of service provided, and the financial and non-financial activity conducted on behalf of the client. These tools and resources, coupled with the length of services provided are indicators of the effectiveness and satisfaction of the Financial Management Services. They all demonstrate the older adults' ability to maintain their independence in the community.

5b. **Analysis & Plans for Continuous Program Improvement**

Describe process for program analysis and plans for program improvement:

Our data and survey tools provide statistical data necessary to continually revise our program to meet the needs of our clients. Health fairs, seminars, newsletter and other outreach activities help the community to understand the effectiveness of our program. We schedule monthly new volunteer orientation, certification and in-service programs to provide additional improvement opportunities for volunteers thereby enhancing the client experience. A select group of volunteers have been trained to connect telephonically with and follow-up with waitlisted clients because they need our help now and a true wait list would be a dis-service.

5c. **Specific Program Improvements**

Based upon answer provided in 5b above, describe specific examples on adjustments made to improve program based upon feedback received per 5b above: process for program analysis and plans for program improvement:

A select group of volunteers connect and follow-up with waitlisted clients. The volunteers assist the clients telephonically and provide phone consultation and guidance on a variety of issues including but not limited to creditor and housing issues. Further, through phone interventions the volunteers provide linkage with resources until a home visitation FM volunteer becomes available. Historically, surveying our customer base and obtaining survey results has been challenging. Volunteers have received additional training and guidance on surveying protocols and have been supportive with the efforts made to secure timely and meaningful feedback from our customers. Our agency continues to

utilize a software program initially launched in 2021 for volunteers to better capture customer visit and outcome information. Our agency has seen a continuous and marked improvement with accurate and timely data collection.

In late 2025 Lifespan implemented Better Impact, a volunteer database system, to better manage and communicate with our volunteers. This will also help us recruit, retain and recognize all our volunteers.

General Comments on Service Activity and Delivery:

III. Targeting Compliance

1. Minority Elders Served

LIFESPAN ***Service***	**Projected % of Minority Elders in 2025-26**	**Total Elders Served in 2025-26**	**Total Minority Elders in 2025-26**	**% of Minority Elders Among Total Elders Served in 2025-26**
Financial Management	17.9%	288	61	21.18%

1a. Is LIFESPAN, the Community Service Provider, meeting its goals of providing services to minority elders at least in proportion to their representation in the total elderly population within the service provider's catchment area?

Yes __X__ **If Yes,**

To what do you attribute your success? Outreach and referral source experience

No ____ If **No,** ____

Please state the reason and outline specific action plan to reach the objective (use a separate sheet if necessary).

2. Minority Elders with Low Incomes Served

LIFESPAN *Service*	**Projected % of Minority Elders with Low Incomes in 2025-26**	**Total Elders Served in 2025-26**	**Total Minority Elders with Low Incomes in 2025-26**	**% of Minority Elders with Low Incomes Among Total Elders Served in 2025-26**
Financial Management	2.9%	288	14	4.86%

2a. Is LIFESPAN, the Community Service Provider, meeting its goals of providing services to minority elders with low incomes at least in proportion to their representation in the total elderly population within the service provider's catchment area?

Yes __X_ If yes,

To what do you attribute your success? Outreach and referral source experience

No _____ If No,

Please state the reason and outline specific action plan to reach the objective (use a separate sheet if necessary).

3. Elders with the Greatest Economic Need.

LIFESPAN *Service*	**Projected % of Elders with Low Incomes Served in 2025-26**	**Total Persons Served in 2025-26**	**Total No. of Elders with Low Incomes Served in 2025-26**	**% of Elders with Low Incomes Among Total Persons Served in 2025-26**
Financial Management	17.3%	288	120	41.67%

3a. Is LIFESPAN, the Community Service Provider, meeting its goals of providing services to the elderly with the greatest economic need at least in proportion to their representation of the total elderly population within LIFESPAN's catchment area?

Yes __X_ If Yes,

To what do you attribute your success? Outreach and referral source experience

No ___ If No,

Please state the reason and outline specific action plan to reach the objective (use a separate sheet if necessary).

4. Elders with the Greatest Social Need: Living Alone

LIFESPAN *Service*	**Projected % of Elders Living Alone in 2025-26**	**Total Persons Served in 2025-26**	**Total No. of Elders who Live Alone in 2025-26**	**% of Elders who Live Alone Among Total Persons Served in 2025-26**
Financial Management	45.1%	288	185	64.24%

4a. Is LIFESPAN, the Community Service Provider, meeting its goals of providing services to the elderly with the greatest social need at least in proportion to their representation in the total elderly population within LIFESPAN's catchment area?

Yes __X_

If Yes, To what do you attribute your success? Outreach and referral source experience

No ____ If No, explain why?

General Comments on Service Targeting:

IV. General Management: Contracts and Services

NOTE: For the following "General Management" sections please provide source documents (as reasonable) at time of site visit by MCOFA Program Monitor.

1. Staffing

1a. Does LIFESPAN have adequate staff to perform the activities required under contract with MCOFA

Yes __X__ No __

If not, please explain the impact on the program or service and any steps being taken to improve staffing levels:

1b. What are your counseling parameters to assist beneficiaries (i.e., office hours, counselor availability, etc.)?

Category	Number
Number of Trained Staff Counselors	2.5
Number of Trained Volunteer Counselors	56
Number of Counseling Sites and personal residences*	288
Number of Training Sites with Internet Access Available	2
Number of Counselors Trained to Use Internet-based Counseling and Enrollment Resources (Plan Finder, etc.)	56

*Counseling is done at Clients home. Training Sites include Lifespan offices at 1900 South Clinton Avenue and Al Sigl conference rooms at 1000 Elmwood Avenue.

1c. Does LIFESPAN have a training plan designed to assist staff in carrying out assigned tasks?

Yes _X_ No ___

1d. Would a random check of LIFESPAN's personnel files verify the type of training actually provided for staff, including the date, the presenter and his/her qualifications?

Yes X___ No ___

1e. Does LIFESPAN comply with Affirmative Action and Equal Opportunity guidelines?

Yes _X__ No ___

1f. Is an EEO sign posted in a prominent location?

Yes X___ No ____

If Yes, Where? Staff and copy room at 1900 South Clinton Avenue and at 1000 Elmwood Avenue office location

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1g. Are reasonable accommodations made for staff and volunteers with disabilities?

Yes _X__ No ___

Such as: automatic door openers, accessible bathrooms and parking. Access to Language Translation.

1h. Does the LIFESPAN Financial Management staffing pattern reflect the minority representation in the total population?

Yes ___ No _X_

If no, please explain: Our overall agency staffing pattern does reflect the minority representation in the total population. Our diverse staff provides services to FM clients through other programs. Specific to our Financial Management staffing pattern, as we screen potential new employees, we work closely with our HR department to ensure employment opportunities are advertised in key and diverse locations.

1i. Can LIFESPAN document outreach efforts to recruit targeted individuals to fill vacant positions?

Yes _X__ No ___

1i. Were there any programmatic changes initiated during the grant year that impact the scope or quality of service?

Yes _X__ No ___

If yes, please discuss briefly: provided volunteers with continuous training and support on software to better capture service units.

1j. Does Financial Management provide equal access to persons with Limited English Proficiency (LEP) as outlined by *Federal Executive Order 13166 and Governor Cuomo's Statewide Language Access Policy (no.26)?*

Yes _X__ No ___

If no, please state the reason and outline specific action plan to reach the objective

2. Administrative Provisions

1. Are LIFESPAN staff activities consistent with prohibitions against participation in partisan activities?

   Yes X___ No ___

2. Are the facilities where LIFESPAN services and activities take place free from political posters and other evidence of advancing one political candidate over another?

   Yes _X__ No ___

3. Are the services carried out under MCOFA contract secular in nature?

   Yes _X__ No ___

   Has LIFESPAN given due recognition to the US. Administration on Community Living, the New York State Office for the Aging and Monroe County Office for the Aging, as appropriate, in program/service brochures, flyers and other printed materials?

   Yes _X__ No ___

   If "Yes", please provide samples of source documents.

   See attached FM brochure

   If "No", please address plan to accomplish.

4. Does LIFESPAN have a written policy regarding retention of all MCOFA contracted program and fiscal records for six (6) years?

   Yes _X__ No ___

If yes, please specifically identify where this can be found?

Lifespan - Records Retention policy (LS-118-FP)

5. What provisions has LIFESPAN made to protect the confidentiality of customer (client) information?

   Confidentiality & HIPAA policies are in place and reinforced with staff at meetings, conferences, trainings, & during individual supervision. All clients are provided with documents regarding confidentiality and no information is shared without written consent of the client. Case files are kept electronically on Peer Place - a highly secure system with HIPAA protections. A service is also in place for confidential document destruction.

6. Does LIFESPAN have a system in place to allow customers (clients) to voluntarily and confidentially contribute to the cost of services?

LIFESPAN ***Service***	**Contribution System**	
	Yes	**No**
Financial Management	x	

6a. If yes, how are contributions utilized?

Contributions are incorporated into the program budget to cover expenses.

7. Does LIFESPAN have a procedure that allows customers (clients) as well as applicants for services to present grievances on the denial of services?

   Yes _X__ No ___

8. Does LIFESPAN have a procedure to accept customer (client) feedback on service quality, service delivery methods, and service personnel?

   Yes _X__ No ___

9. Does LIFESPAN have a policy and procedure in place to ensure that only eligible customers (clients) are served in MCOFA contracted programs?

   Yes _X__ No ___

10. Does LIFESPAN make service sites and program information accessible to persons with disabilities?

    Yes _X__ No ___

11. Does LIFESPAN solicit input from their customers and constituents, including customers and constituents that are frail, disabled, minority, on ways to make services more accessible and appealing to culturally diverse populations?

    Yes _X__ No ___ If yes please document your source. Customer surveys

3. Interagency Coordination

1. Describe LIFESPAN's procedure(s) for tracking referred customers' requests for assistance to other organizations when the need for such services is identified:

   Referrals to other programs that use the NYSOFA PeerPlace database are made through the referral function within the database. When a referral is made to another organization that does not support our database's electronic referrals, the consent of the customer and subsequent referral details are entered into a case note in their record.

2. Has LIFESPAN worked effectively with other providers and organizations to facilitate coordination and minimize possible duplication of effort?

   Yes _X__ No ___

   Check as many as apply to LIFESPAN's coordinative efforts:

   x___ Participation in interagency meetings to plan and coordinate services (CFC, Jewish Family Services)

   x___ Coordination of funding proposals with other human services organizations (CFC, Jewish Family Services)

   x___ Coordination of referrals and follow-up transactions with other local service providers (EISEP, Elder Abuse Prevention, Future Care Planning, GRAPA,TRAC,STAR, Recovery & Wellness, CFC, Medical Motors, UR

Home Care - Meals on Wheels, Wellness Counseling, Community mental health services)

x___ Memos of Understanding or similar agreement with other organizations (CFC, Jewish Family Services)

x___ Development and implementation of a central assessment unit for services carried out by multiple agencies

x___ Working with other providers to update information of available services and eligibility (NY Connects Website, Eldersource Website, GRAPE Guide)

x___ Other coordinative activities (please list): Lifespan staff work in a coordinated effort with discharge planners and other hospital based staff, mental health professionals, various city and town departments and programs, employer sponsored events, medical offices, Adult Protective Services, faith communities, attorneys and other businesses that interact with older adults. Our staff participates as speakers and panel members on regional and statewide conferences, as well as for local organizations looking for information on all older adult services, including mental health programs. Many of these result in referrals to assist the isolated and vulnerable older adult.

4. Service Promotion & Outreach

1. Indicate what regular means LIFESPAN employs to disseminate information to the public and approximately how often this occurs:

Indicate Frequency	**Weekly**	**Monthly**	**Annually**	**Other: (Please specify)**
Newsletters		X		
Television Programming				Periodic
Public Presentations		X		
Brochures/Pamphlets				Periodic
Other: AmeriCorps, social media				Periodic

2. What marketing/outreach/publicity techniques have been employed to reach low-income minority elders in your service area?

Please check all that apply:

x___ Used Census or other data to identify target communities

x___ Translated program brochures and pamphlets into appropriate language

x___ Sent mailings to target population

x___ Sent newsletters or announcements to organizations that serve minority populations, disabled populations

x___ Publicized services through press releases, radio, television and local publications

x___ Located service delivery centers/offices in target communities

x___ Encouraged persons served to tell friends and neighbors of available service

x___ Sought out/accepted local speaking engagements to meetings and conferences sponsored by associations or other organizations that include minorities

x___ Included minority staff and interns in local programs or in conducting outreach

x___ Coordinate with other agencies which serve low-income families in order to identify elders who may be in need of services

___ Additional activities or strategies used to target services to minority elders

Please Specify:

5. Equipment Inventory

Please list any equipment purchased via MCOFA contract (or disposed of) and documentation, identification and degree of any shared usage of this equipment.

Attachment: "Equipment Inventory and Disposition Form"

V. Assessment Conclusion

In conveying general comments regarding LIFESPAN's overall assessment of service delivery and contract compliance, please address the following areas:

AGENCY COMMENTS:

Lifespan is pleased to provide Financial Management services to older adult residents of Monroe County. Our goal is to help these individuals maintain their financial independence and to remain in their homes as long as possible. We are thankful to both the staff and volunteers which help make this program so successful and we look forward to continuing our partnership with Monroe County.

In 2026, we continue to see an increase in both the number of clients served and volunteers recruited. We have experienced a greater number of client referrals from internal Lifespan sources including NYConnects, Eldersource, Finger Lakes Caregiver Institute (FLCI) and Community Care Connections (CCC). Due to the current high inflation environment, we are experiencing a higher number of referrals and clients accepted. Many older adults are expressing their frustration "struggling to make ends meet." Attempting to connect clients with other benefits (SSI, DSS, SNAP, HEAP, etc.) has also been challenging due to staffing shortages and excessive wait times at these organizations.

Although we had a few volunteers step down late last year and early this year, we continue to see a steady number of new volunteers interested in joining the program. We participate in a number of outreach events throughout the county, including the twice-a-year Lifespan Volunteer Fair (held in June and October) among others and these events typically generate a few new volunteers. Moreover, Lifespan has a strong presence in Monroe County and new volunteers are more eager to sign up with an organization that they're already familiar with. We've had a few volunteers say Lifespan helped a friend or family member in the past and now they want to give back.

A couple of client quotes describe their satisfaction with the program:

"I do not know what I would have done had I not received the excellent work from Abby and Cindy." – BK

"I have found Lifespan a godsend. I have recommended it to many people. Eve Moses was fabulous, I feel so much better" - JG

We continue to experience some volunteer reluctance to travel to the city limits to serve older adults. However, we do have enough volunteers willing to work with residents of the city and as a result, most city clients are served with minimal wait

times. We also see clients with more complex financial and non-financial needs. Issues with increased credit card debt, rent increases, inflation, limited resources, anxiety and isolation seem to have all increased. This increased complexity with our clients may result in volunteers feeling a bit overwhelmed and, in some cases, frustrated working with our clients but our staff is always there to provide any type of support that's needed.

We continue to promote our FM program at older adult living centers, faith centers, area health centers and other older adult events (including Salute to Seniors) all throughout Monroe County. We appreciated the opportunity to present at the Monroe County Office for the Aging public forum at the Pieters Family Life Center on April 9th and again on April 16th at RTS.

We look forward to continuing our partnership with MCOFA and serving older adults throughout Monroe County in 2027 and beyond.

MCOFA COMMENTS:

The Program at Lifespan has provided valuable support to older adults in the County for the past 31 years. Through a successful volunteer recruitment and engagement effort, Lifespan connects trained volunteers with older adults with low incomes who need assistance managing their finances and maintaining independence in their own homes.

Volunteers provide practical support by organizing and sorting bills, establishing schedules to ensure bills are paid in a timely manner, and helping clients address and reduce excessive credit card debt. This assistance provides older adults with greater peace of mind while offering clarity and organization around their individual sometimes complex financial situations.

Building on the success of the program in Monroe County, Lifespan has expanded its reach and now provides these services to older adults across twelve counties throughout the state. This expansion demonstrates the program's effectiveness and the growing need for reliable, accessible financial management support that helps older adults remain safely and independently in their homes.

Compliance areas in need of attention:

Most Older Adults being served cannot afford to contribute due their financial situation. Lifespan needs to make more concerted effort to collect more contributions for the Financial Management Program. This not a compliance issue.

Additional resources or technical assistance needed:

AGENCY COMMENTS: Although many if not most of our clients are financially unable to make a contribution, we continue to remind our volunteers to ask their clients to make a small contribution to Lifespan if they are able to. We offer a suggested contribution table based on an individual's resources to help with determining a donation amount.

Also, we do bring donation envelopes to many of our outreach events in the event some individuals wish to make a contribution.

MCOFA COMMENTS:

Monroe County Office For the Aging
Program Evaluation and Contract Compliance
2025-26

ANNUAL PROGRAM AND SERVICE ASSESSMENT

MONROE COUNTY OFFICE FOR THE AGING
COMMUNITY-BASED SERVICES FOR THE ELDERLY

AS Funded by: Older Americans Act of 2016, As Amended and NYS Funds

CONTRACTOR

LIFESPAN OF GREATER ROCHESTER, INC.

Health Insurance Information and Counseling Assistance Program

EXPENDITURES

HIICAP (04/01/25 to 03/31/26) ----------	$44,962 ($43,190 + $1,772 addt'l funds)
NYS CSE (04/01/25 to 03/31/26) ----------	$103,250
State Funding (01/01/26 to 03/30/26)	$11,200
TOTAL	$ 159,412

Date of Assessment: September 11, 2026
MCOFA Monitor: Kitty Koul
Others Participating: Rene Pettenski / Jody Rowe

I. Past performance/Previous recommendations

1. Review Findings

Were there findings from the prior or current year monitoring that required corrective actions to address areas of non-compliance? None

Were all findings from MCOFA's previous monitoring efforts satisfactorily addressed?

____Yes ____No: If No, please describe

II. Service Activity Review

1. Units of Service

Lifespan Service Units	Projected # of units (2025-26)	Actual # of units (2025-26)	% of Projection (2025-26)
HIICAP	3148	3115	98.95%

1a. Describe reason(s) for any variances:
This includes PeerPlace and Stars data.

2. Projected Persons To Be Served (One-to-One)

Lifespan Service	Projected No. of Persons Served (2025-26)	Actual Unduplicated Number of Persons Served (2025-26)	% of Projection (2025-26)
HIICAP	2,500	2682	107.28%

2a. Describe reason(s) for any variances:

3. Service Waiting Lists

HIICAP	Waiting List Maintained?		If Yes, please check all that apply & current # on wait list.	Resulting number of referrals to other agencies in 2025
Waiting List	**Yes** **X**	**No**	x__ Lack of Funding x__ Lack of Staff Other: **Large Volume of calls**	0

4. Expenditures

Lifespan Service	**Total Projected Expenditures (2025-2026)**	**Total Actual Expenditures (2025-26)**	**% of Projection (2025-26)**
HIICAP	$159,412	$159,411.54	99.99%

Describe reason(s) for any variance:

5. Actual Cost per person served

Lifespan Service	Persons Served (2025-26)	Total Expenditures (2025-26)	Average Cost Per Client (2025-26)
HIICAP	2682 Face to Face 2112 persons attended presentations 4794 total	$193,846 (includes matching funds)	$40.44

Does cost per client seem reasonable?

Yes x___ No ___

6. Actual Unit per person served

Lifespan Service	Projected Cost Per Unit (2025-26)	Actual # of Units (2025-26)	Actual Total Expenditures (2025-26)	Average Cost Per Unit (2025-26)
HIICAP	$51.99	HIICAP 872 CSE 2,243	$ 44,962.00 $137,684 includes match $103,250 (MCOFA funds)	$51.56 $61.38 (w/ match) $46.03 (w/o match)

Does cost per unit seem reasonable?

Yes _X_ No ___

II. Outcome Measures

ContrackHQ Update

Please review HQ Outcome measures for accuracy

1a. Performance Measure

Measurement Instrument

We utilize a survey instrument to measure and to determine the older adults and/or caregiver's increased level of knowledge (understanding) and satisfaction after receiving information from HIICAP.

A survey/evaluation is provided after counseling sessions and presentations. We receive numerous unsolicited thank you notes.

1b. Analysis & Plans for Continuous Program Improvement

We compile the survey results and evaluate on a quarterly basis. We assess and modify our services as necessary based on the survey results. We will continue to provide Medicare 101, Medicare Update and other similar programs to the community. Our Medicare presentations are listed on the Lifespan website and our newsletters; we submit announcements to the area community and faith-based organizations and news outlets. Our comparison sheet is also available on our website.

1. Objectives

Outcome Objective #2: To provide counseling services and community presentations to older adults

Performance Section #2a

Indicator of Success: Total Number of Unduplicated individuals that received counseling services meet set target

Time Frame	Assement Year Projection 4/1/25 - 3/31/26	Assement Year Actual 4/1/25 - 3/31/26	Current Year Projection 4/1/26 - 3/31/27
Projected Total No. of Participants that got Counseling	2,500	2,682	2,500
% Successful	90%	107.28%	90%

Basis for Next Year Projection (source & relevant statistics):

Medicare beneficiaries continue to increase and so does the need of existing beneficiaries all that translates to increased need for these services.

Performance Section #2b

Indicator of Success: Total Number of Unduplicated individuals that attend Community Presentations meet set target

Time Frame	Assement Year Projection 4/1/25 - 3/31/26	Assessment Year Actual 4/1/25 - 3/31/26	Current Year Projection 4/1/26 - 3/31/27
Projected Total No. of Participants that attended Community Presentations	800	2112	800
% Successful	90%	264%	90%

Basis for Next Year Projection (source & relevant statistics):

Medicare beneficiaries continue to increase and so does the need of existing beneficiaries, it's all about information and what's the latest. Our presentations are well attended.

Outcome Objective #3: To provide Community Presentations & Workshop

Performance Section #3

Indicator of Success: Total Number of community presentations & workshops meets set target

Time Frame	Assement Year Projection 4/1/25 - 3/31/26	Assessment Year Actual 4/1/25-3/31/26	Current Year Projection 4/1/26-3/31/27
Projected Total No. of Community Presentations & Workshop	50	96	50
% Successful	90%	192%	90%

Basis for Next Year Projection (source & relevant statistics):

There is one constant, heaalth insurance providers change policies annually, so the Medicare beneficiaries need the information that we present to make good choices that meet their needs.

Outcome Objective #4: To recruit and train HIICAP volunteers

Performance Section #4

Indicator of Success: Number of volunteers recruited and trained meet set target			
Time Frame	**Assement Year Projection 4/1/25-3/31/26**	**Assessment Year Actual 4/1/25-3/31/26**	**Current Year Projection 4/1/26-3/31/27**
Projected Total No. of HIICAP Volunteers	28	28	29
% Successful	90%	100%	90%
Basis for Next Year Projection (source & relevant statistics): The maturation of volunteers and the ability to train additional volunteers is always challenging.			

Outcome Objective #5: Overall Satisfaction with HIICAP Services

Indicator of Success: Seniors will be satisfied with HIICAP services. From the annual Satisfaction Survey, the question "Overall, the services Lifespan provided me helped me understand medicare insurance options and the cost for programs available to me" will have a combined percentage of "Strongly Agree" and "Agree".

Time Frame	Assement Year Projection 4/1/25-3/31/26	Assessment Year Actual 4/1/25-3/31/26	Current Year Projection 4/1/26-3/31/27
# of Participants Responded	354	448	354
# of satisfied Participants	319	448	319
% satisfied	90%	100%	90%

Basis For Next Years Projection (source and relevant statistics):

Our goal is to provide non-biased information to help Medicare beneficiarie make the best choices based on their needs. The are always very appreciative of our efforts.

2. Contributions

Contract/Application Objective #6: To collect a minimum of $988 CSE Budget in participant contributions during the contract period from 04/01/2025 to03/31/2026.

Actual Collected : $2,554

Actual Per I&A session Average: $0.95

III. Targeting Compliance

General Comments on Service Targeting:

Health Insurance Information, Counseling & Assistance Program (HIICAP) serves consumers throughout Monroe County with about half of all those served residing in the City of Rochester where there is a high concentration of minorities and low-income residents. Lifespan's Vice President of Programs is not only a licensed social worker but fluent in several languages, including Russian, Spanish and a number of Asian languages. Lifespan has also contracted with Language Line Solutions, a national telephonic interpreting service, which provides real time interpreting in the phone in over 200 languages and dialects. These available services increase the ability to respond to all who call for assistance. We also give special focus to the towns which have the largest older adult populations (Irondequoit, Greece, Brighton, and East Rochester). Additional outreach has occurred with other growing low income, older adult populations as demonstrated with the census, such as Perinton, Gates, Webster and Penfield.

HIICAP continues to have outreach and link with neighborhood groups, wide-array of faith-based churches and organizations and senior citizens' clubs or groups in these areas. We attend community events and arrange presentations geared to educate participants about our services for older adults in Monroe County. We distribute brochures (English and Spanish) throughout the community on a regular basis. Outreach and Case Assistance are provided at Multi Aging Resource Centers and Senior Centers throughout the County.

HIICAP participates in countywide community health fairs and seeks opportunities to make presentations to older adults, caregivers and other service providers. Staff is in frequent communication with discharge planners and other hospital-based staff, mental health professionals, various city and town departments and programs, employer-sponsored events, medical offices, skilled nursing facilities, faith communities, attorneys and other businesses that interact with older adults.

DOES LIFESPAN provide equal access to persons with Limited English Proficiency (LEP) as outlined by Federal Executive Order 13166 and Governor Cuomo's Statewide Language Access Policy (no. 26).

_X_ Yes ___No

Lifespan of Greater Rochester has staff who are proficient or who have familiarity with the following languages: Spanish, Italian, Hungarian, French, Russian, Mandarin Chinese, and Hindi. The agency also arranges for

professional interpreters for speakers of other languages through contract agencies, such as Catholic Charities Interpreting Services or Language Intelligence Inc.

Lifespan and MCOFA have also contracted with Language Line Solutions, a national telephonic interpreting service, which provides real time interpreting on the phone in over 200 languages and dialects.

If **No**, Please state the reason and outline specific action plan to reach the objective.

1. Minority Elders Served

LIFESPAN *Service*	**Projected % of Minority Elders Served 4/1/25 - 3/31/26**	**Total Elders Served 4/1/25 - 3/31/26**	**Total Minority Elders Served 4/1/25 - 3/31/26**	**% of Minority Elders Among Total Elders Served 4/1/25 - 3/31/26**
HIICAP	17.9%	2,682	82	3.06%

Did utilize Peerplace.. . The percentage of minority elders served improved from last year.

1a. Is LIFESPAN, the Community Service Provider, meeting its goals of providing services to minority elders at least in proportion to their representation in the total elderly population within the service provider's catchment area?

Yes __X__ If Yes,

Lifespan will continue outreach and education with community and faith-based organizations.

To what do you attribute your success?

No ___ If No, ___

2. Minority Elders with Low Incomes Served

LIFESPAN *Service*	**Projected % of Minority Elders with Low Incomes 4/1/25 - 3/31/26**	**Total Elders Served 4/1/25 - 3/31/26**	**Total Minority Elders with Low Incomes 4/1/25 - 3/31/26**	**% of Minority Elders with Low Incomes Among Total Elders Served 4/1/25 - 3/31/26**
`HIICAP	2.9%	2,682	120	4.47%

2a. Is LIFESPAN, the Community Service Provider, meeting its goals of providing services to minority elders with low incomes at least in proportion to their representation in the total elderly population within the service provider's catchment area?

Yes _X__ If yes,

To what do you attribute your success?

No __ If No,

3. Elders with the Greatest Economic Need.

LIFESPAN *Service*	**Projected % of Elders with Low Incomes Served 4/1/25 - 3/31/26**	**Total Persons Served 4/1/25 - 3/31/26**	**Total No. of Elders with Low Incomes 4/1/25 - 3/31/26**	**% of Elders with Low Incomes Among Total Persons Served 4/1/25 - 3/31/26**
HIICAP	17.3%	2,682	155	5.78%

Did utilize PeerPlace.

3a. Is LIFESPAN, the Community Service Provider, meeting its goals of providing services to the elderly with the greatest economic need at least in proportion to their representation in the total elderly population within LIFESPAN's catchment area?

Yes _X_ **If Yes,**

To what do you attribute your success? Lifespan is a trusted source for unbiased information, especially when it comes to Medicare.

No ___ **If No,**

4. Elders with the Greatest Social Need: Living Alone

LIFESPAN *Service*	**Projected % of Elders Living Alone 4/1/25 – 3/31/26**	**Total Persons Served 4/1/25 – 3/31/26**	**Total No. of Elders who Live Alone 4/1/25 – 3/31/26**	**% of Elders who Live Alone Among Total Persons Served 4/1/25 – 3/31/26**
HIICAP	45.1%	2,682	1,091	40.68%

HIICAP WILL CONCENTRATE ON CAPTURING A BETTER NUMBER OF ELDERS LIVING ALONE. In reviewing the data collected in 2025, there were 1000 participants who did not respond to this question.

4a. Is LIFESPAN, the Community Service Provider, meeting its goals of providing services to the elderly with the greatest social need at least in proportion to their representation in the total elderly population within LIFESPAN's catchment area?

Yes _X_

If **Yes**, To what do you attribute your success? **Focused outreach efforts Southwest YMCA in 19th ward, Chili Community Center, ROX VOX Seniors Rock radio show, Asian Conference.**

No __

If **No**, Please state the reason and outline specific action plan to reach the objective (use a separate sheet if necessary). The pandemic restricted outreach activities. This will increase going forward. New outreach strategies have been incorporated in 2025 to increase access to this population.

IV. General Management: Contracts and Services

1. Staffing

1a. Does HIICAP have adequate staff and volunteers to perform the activities required under the contract with MCOFA ?

Yes ___ No _X___

If No please explain the impact on the service and any steps being taken to improve the staffing levels.

We have many more callers which require longer time commitment by staff and volunteers – so we cannot answer calls live as much as we would like to do so.

1b. What are your counseling parameters to assist beneficiaries (i.e., office hours, counselor availability, etc.)?

Category	Number
Number of Trained Staff Counselors	3
Number of Trained Volunteer Counselors	28
Number of Counseling Sites	1
Number of Counseling Sites with Internet Access Available	1

Number of Counselors Trained to Use Internet-based Counseling and Enrollment Resources (Plan Finder, etc.)	28

1c. Does HIICAP have a training plan designed to assist staff and volunteers in carrying out assigned tasks?

Yes X No ___

1d. Would a random check of HIICAP's personnel files verify the type of training provided for staff, including the date, presenter and his/her qualifications?

Yes X No ___

1e. Does HIICAP comply with Affirmative Action and Equal Opportunity guidelines?

Yes X No ___

1f. Is EEO sign posted in a prominent location?

Yes X No ___ Staff entrance at Lifespan

1g. Are reasonable accommodations made for staff and volunteers with disabilities?

Yes X No ___

Handicap parking, automatic doors, Deaf & Hard of Hearing service with interpreters who speak ASL

1h. Can HIICAP document outreach efforts to recruit targeted individuals

Yes X No ___

If Yes, please explain:

At presentations, we continually encourage participation as counselors, we distribute flyers. Participate in volunteer fairs and social media posts for volunteers.

1i. Were there any programmatic changes initiated during the year that impact the scope or quality of service?

Yes X No ___

We implemented a new scheduling system that made it much easier for clients to schedule their own in person appointment and/or phone appointment. The new scheduling system made it easier for the volunteers to schedule appointments on behalf of the clients.

If yes please discuss briefly:

In person Appointments could be made on-line 5 days a week, some Saturdays and evenings during open enrollment. Phone appointments Tuesday and evenings on Wednesday and Thursdays. Outside of open enrollment in person appointments are available Tuesdays, Wednesdays, and Thursdays. Phone appointments are available Thursday evenings.

2. Administrative Provisions

1. Are HIICAP staff activities considered consistent with prohibitions against participation in partisan activities?

   Yes _X_ No __

2. Are the facilities where HIICAP services and activities take place free from political posters and other evidence of advancing one political candidate over another?

   Yes _X_ No ___

3. Are the services carried out under MCOFA contract secular in nature?

   Yes _X_ No ___

4. Has HIICAP given due recognition to the U.S. Administration on Community Living, the New York State Office For the Aging and Monroe County Office for the Aging, as appropriate, in program/service, brochures, flyers and other printed materials?

   Yes _X_ No ___

5. Does HIICAP have a written policy regarding retention of all MCOFA contracted program and fiscal records for six (6) years?

   Yes _X_ No ___

6. What provisions has HIICAP made to protect the confidentiality of customer (client) information?

   Confidentiality & HIPAA policies are in place and reinforced with staff at meetings, conferences, trainings, & during individual supervision. All clients are provided with documents regarding confidentiality and no information is shared without written consent of the client. Case files are kept electronically on Peer Place - a highly secure system with HIPPA protections. A service is also in place for confidential document destruction.

7. Does HIICAP have a system in place to allow customers (clients) to voluntarily contribute to the cost of service?

   Yes _X_ No ___

If Yes, Please provide example

Self-addressed, stamped envelope provided at time of counseling provides an opportunity.

If no, briefly discuss plans for complying

7a. If yes, how are contributions utilized?

Contributions are incorporated into the program budget to cover expenses.

8. Does HIICAP have a procedure that allows customers (clients) as well as applicants present grievances on the denial of services?

Yes _X_ No ___

If Yes, please provide sample document:

Rights & Responsibilities document utilized by all programs.

9. Does HIICAP have a procedure to accept customer (client) feedback on service quality, service delivery methods, and service personnel?

Yes _X_ No ___

If yes, please provide sample document. A self-addressed stamped envelope.

10. Does HIICAP have a policy, procedure in place to ensure that only eligible customers (clients) are served in MCOFA contracts?

Yes _X_ No ___

11. Does HIICAP make service sites and program information accessible to persons with disabilities?

Yes _X_ No ___

12. Does HIICAP solicit input from their customers and constituents, including customers and constituents who are frail, disabled, minority, on ways to make service more accessible and/or appealing to culturally diverse populations?

Yes _X_ No ___

If yes, please provide sample document. Survey. Also, our documents specifically indicate that we serve everyone

3. Interagency Coordination

1. Describe HIICAP's procedure(s) for tracking referred customers' request for assistance to other organizations when the need for such services is identified:

   Referrals to other programs that use the NYSOFA PeerPlace database are made through the referral function within the database. When a referral is made to another organization that does not support our database's electronic referrals, the consent of the customer and subsequent referral details are entered into a case note in their record.

2. Has HIICAP worked effectively with other providers and organizations to facilitate coordination and minimize possible duplication of effort?

   Yes _X_ No ___

   Check as many as apply to HIICAP coordinative efforts:

   ___ Participation in interagency meetings to plan and coordinate services (Catholic Charities, Jewish Family Services)

   ___ Coordination of funding proposals with other human services agencies (CFC, Jewish Family Services)

   _X_ Coordination of referrals and follow-up transactions with other local service providers (EISEP, Elder Abuse Prevention, Future Care Planning, TRAC/STAR, GAP, CFC, Medical Motors, UR Home Care - Meals on Wheels, Wellness Counseling, Community mental health services)

   ___ Memos of Understanding or similar agreement with other organizations (CFC, Jewish Community Center, Town of Gates Recreation, Oasis, Chili Community Center)

   ___ Development and implementation of a central assessment unit for services carried out by multiple agencies

   _X_ Working with other providers to update information of available services and eligibility (NY Connects Website, Lifespan Website, GRAPE Guide)

   _X_ Other coordinative activities:

   Lifespan staff work in a coordinated effort with discharge planners and other hospital-based staff, mental health professionals, various city and town departments and programs, employer sponsored events, medical offices, Adult Protective Services, faith communities, attorneys and other businesses that interact with older adults. Our staff participates as speakers and panel members on regional and statewide conferences, as well as for local organizations looking for information on all older adult services, including mental health programs. Many of these result in referrals to assist the isolated and vulnerable older adult.

4. Service promotion & outreach

1. Indicate what regular means HIICAP employs to disseminate information to the public and approximately how often this occurs:

Indicate Frequency	Weekly	Monthly	Annually	Other (please specify
Newsletters				periodic
Radio : Public Service Announcements				periodic
Radio: Programming				periodic
Television: Public Service Announcements				periodic
Television: Programming				periodic
Public Presentations		X		Monthly
Brochures/Pamphlets		x		periodic
Other: Newspaper and local magazines Interviews with media Social Media:Facebook		 x		 periodic periodic periodic

2. What marketing/outreach/publicity techniques have been employed to reach low income minority elders in your service area?

Please check all that apply:

_X_ Used Census or other data to identify target communities

_X_ Translated program brochures and pamphlets into appropriate languages.

_X_ Sent mailing to target populations

_X_ Sent newspapers or announcements to organizations that serve Minority populations, disabled population

_X_ Publicized services through press releases, radio, television and local publications

_X_ Located service delivery centers/offices in target communities

_X_ Encouraged persons served to tell friends and neighbors of available services

_X_ Sought out/accepted local speaking engagements to meetings and conferences sponsored by associations or other organizations that include minorities

_X_ Included minority staff, in-kind staff and interns in local programs or conducted outreach

_X_ Coordinate with other agencies which serve low income families in order to identify elders who may be in need of services

____ Additional activities or strategies used to target services to minority elders

Please Specify: Latino, African American Health Coalitions, Anthony Jordan Health Center, St Joseph's Neighbor Center

3. What "barriers" if any, has the HIICAP program experienced that hinder outreach efforts?

Staff is focused on client counseling and does not have the time for outreach, additional funding would address this issue. We count on other Lifespan programs to provide our brochure and have counselors when available attend tabling events, i.e. Salute to Seniors.

1. Please list any equipment purchased via MCOFA contract and document identification and degree of any shared usage of this equipment
2. Were there any disposals in 2025 of equipment involving MCOFA funds?

   Yes _ No _X_

If yes, please complete the attached "Inventory and Disposal Form". None

V. Assessment Conclusion

In conveying general comments regarding LIFESPAN's overall assessment of service delivery and contract compliance, please address the following areas:

AGENCY COMMENTS: The HIICAP program continues to be a cornerstone for Lifespan. We pride ourselves on being unbiased when providing information to clients when they are making decisions about health insurance coverage.

The program experienced many Medicare Advantage Plan terminations which cause a massive amount of calls, in person appointments and attendees at presentations. However, we did not miss a beat with providing quality counseling and community presentations to exceed on all the contract goals and community need. We are very fortunate to have hired a very experienced Medicare professional. Most of the HIICAP volunteers worked 2 and 3 shifts a week and weekends.

Our pool of trained and certified volunteers remains strong and able to serve.

Lifespan HIICAP team plans to go to senior centers Lifespan Wolk and Lily to increase serving of low-income people.

Also, Lifespan HIICAP Counselors work evening hours and on Saturdays during open enrollment and the cross-training of counselors.

We appreciate the support of the county when there are additional funds to help enhance the program.

MCOFA COMMENTS:

Since 2005, the HIICAP program at Lifespan has maintained a strong reputation as one of the most effective programs in NY State. This success is supported by a dedicated team of experienced, long-term volunteers who bring valuable knowledge and commitment to their work.

Rene Pettenski's (HIICAP Program Coordinator) energy, leadership, and innovative ideas have further strengthened service delivery, making the program more organized, responsive, and productive. Together, the coordinator and volunteers have done an

outstanding job of meeting the needs of the community, despite ongoing challenges and frequent changes to Medicare plans and policies.

Renee's outstanding work and dedication have also been recognized by the New York State Office for the Aging (NYSOFA), which highlighted her contributions in *Inside Aging*, Issue #56, September 2026.

Compliance areas in need of attention: Outreach efforts were improved over the last years. It needs to increase further.

- We need to continue to look at the clients we are serving and ensure we are serving those who are diverse, low-income, frail and live alone.

Additional resources or technical assistance needed: none

AGENCY COMMENTS: We are serving clients year-round and appreciate the additional funding which helps to alleviate this situation and aid us in reaching target groups. We are planning more tabling events which will reach these populations. This year we will be working with inner city pharmacy to educate consumers about Medicare health insurance options.

MCOFA COMMENTS:

Department of **Human Services**
Office for the Aging
Monroe County, New York

Adam Bello
County Executive

Thalia Wright
Commissioner

Steve Newcomb
Director

September 12, 2026

Rene Pettenski
1900 S. Clinton Ave.
Rochester, NY 14618

Dear Rene,

Attached for your records is the completed 2025-26 Annual Program Evaluation for the Monroe County Office for the Aging (MCOFA) funded Health Insurance Information and Counseling Assistance (HIICAP) Program. The contract is doing well. For comments related to each program and its specific objectives, please read through the evaluation. You may find additional general comments related to the program on the final page of the evaluation.

Thank you for continuing to provide these valued services to our community's older adult population.

Should you have any questions regarding the evaluation, please do not hesitate to contact me at (585) 753-6458.

Sincerely,

Kitty S. Koul

Kitty S Koul

cc: Monroe County Office for the Aging –Steve Newcomb

Encl: Annual Program and Service Assessment

Department of **Human Services**
Office for the Aging
Monroe County, New York

Adam Bello
County Executive

Thalia Wright
Commissioner

Steve Newcomb
Director

July 17, 2026

Jeffrey P. Nieznanski
LawNY, Monroe County
1 West Main Street, Suite 400
Rochester, New York 14624

Dear Jeff,

Attached for your records is the completed 2025 Annual Program Evaluation for the Monroe County Office for the Aging (MCOFA) funded Legal Services Program for the Elderly.

The contract is doing well. For comments related to each program and its specific objectives, please read through the evaluation. You may find additional general comments related to the program on the final page of the evaluation.

Thank you for continuing to provide these valued services to our community's older adult population.

Should you have any questions regarding the evaluation, please do not hesitate to contact me at (585) 753-6458.

Sincerely,

Kitty S. Koul

Kitty S Koul

cc: Monroe County Office for the Aging –Steve Newcomb

Encl: Annual Program and Service Assessment

Monroe County Department of Health and Human Services Office for the Aging

Program Evaluation and Contract Compliance Division

ANNUAL PROGRAM AND SERVICE

ASSESSMENT

Legal Assistance of Western New York, Inc.

2025 Legal Services Program for the Elderly

Amount of Contract:	$190,841
Funding Period:	January 1, 2025 to December 31, 2025
Funding Sources:	OAA Title III-B Special Programs for the Aging
Key Contacts:	Lori M. O'Brien, Executive Director Benjamin J. Wittwer, Managing Attorney Jeffrey P. Nieznanski, Supervising Attorney

MCOFA Monitor: Kitty Koul
DATE: July 16, 2026

I. Past performance/Previous recommendations

1. Review Findings

Were there findings from the prior year monitoring that required corrective actions to address areas of non-compliance? **No**

If Yes, please describe

Were all findings from MCOFA's previous monitoring efforts satisfactorily addressed?

Does Not Apply

Service Activity Review

1. Units of Service

LawNY Service	Projected Units	Actual 2025 Units	% of Projection
Legal Services	2700	2875	106%

1a. Describe reason(s) for any variances: Projected units are from Application for Program Funding. Total actual hours (i.e. 2875 units in 2025) do not include 10% match hours for OFA, nor 25% match for CSE.

LawNY	Projected No. of Services	Actual No. of Services in 2025	% of Projection
Legal Services	400	524	131%

2a. Describe reason(s) for any variances:

2. Service Waiting Lists

LawNY Service	Waiting List Maintained?		If Yes, please state the reason (check all that apply)	# of referrals made to other Service Providers in 2025
----------	Yes	No	----------	----------
Legal Services		X	___ Lack of Funding ___ Lack of Staff ___ Other: Please Specify_____ _____	51*

*Documented referrals only

3. Expenditures

4a. Describe reason(s) for any variances:

2025 MCOFA funding of **$190,841** compares to LawNY's cost to provide services in 2025 of **$451,046.** Costs to provide services rose with inflation and with the need to attract and retain skilled advocates.

4. Actual Cost Per Customer (Client/Service)

LawNY Service	No. of Services	Actual 2025 Expenditures	Average Cost Per Service
Legal Services	524	$451,046 Total (includes $190,841 of MCOFA funds)	$860.77

a. Do costs appear reasonable? Yes__X__ No _X_

If no, please explain: While the $451,046 cost to LawNY appears reasonable, the grant only covered 42.3% of the cost of services.

5. Outcomes

Outcome Objective #1

Low income seniors will access funding sources and better manage their assets, enabling them to achieve desired health care and/or improve/maintain health status and overall quality of life. This objective measures outcomes of all cases and information line calls other than housing, which is addressed as Outcome Objective #2 below.

Performance Section #1

Indicator of Success: Assessing income and support programs; health care options, including end-of-life considerations; utilizing referral and advocacy services and avoiding debt and poor health habits and conditions. Success rates are based on the number of cases closed in which the program took action(s) on behalf of an eligible client that addressed the client's legal problem.

	Year 2025 Projection	Actual Year 2025	Current Year Projection	Next Year Projection
	01/01/25 - 12/31/25	01/01/25 -12/31/25	01/01/26 -12/31/26	01/01/27-12/31/27
Total No. of Participants	340	332	330	330
Successful	296	326	287	287
% Successful	87%	98.2%	87%	87%

Basis for 2025 Projection: (Source & relevant statistics) Data Collection from Legal Server case management system. Total cases closed and information line services compiled above were within the time period indicated. Total services for each individual outcome objective are compiled from Legal Server Problem Code Categories. The total number of successful cases are from Legal Server Case Closing Reasons corresponding with indicators of success.

Outcome Objective #2

Seniors will obtain/maintain appropriate, affordable housing.

Performance Section #2

Indicator of Success: Prevent and delay eviction to give time to seek other housing, obtain access to housing, avoid or delay foreclosure or other loss of housing. Services are provided to overcome denial of rights, including habitability, utility, and other housing matters. Services include advice, referral, litigation, and non-litigation advocacy services. Information line data is not included in this outcome objective category. Success rates are based on the number of cases closed in which the program took action(s) on behalf of an eligible client that addressed the client's legal problem.

	Prior Year 2025 Projection	Actual Year 2025 (Cases Only)	Current Year Projection	Next Year Projection
	01/01/25 -12/31/25	01/01/25 -12/31/25	01/01/26 -12/31/26	01/01/27-12/31/27
Total No. of Participants	60	66	60	60
Successful	54	66	54	54
% Successful	90%	100%	90%	90%

Basis for Projections: Data Collection is from our Legal Server case management system. Total cases were closed within the time period stated. Total cases for each individual outcome objective pulled by corresponding Legal Server Problem Code. Total number of successful cases are from Legal Server Case Closing Reasons corresponding with indicators of success.

Note: Data in this chart refers to cases funded with MCOFA funds, not our office's overall eviction prevention case work through the Tenant Defense Project. TDP is a jointly-run project of Rochester's civil legal services community to provide tenants free access to attorneys in eviction cases. Whereas TDP's focus in 2025 was on Rochester City and Greece town residents, MCOFA funds allowed for broader coverage throughout Monroe County.

Funded by the City of Rochester, the County of Monroe and local foundations, the Tenant Defense Project aims to provide legal advice and full representation for all tenants in the greater Rochester area.

Outcome Objective #3

Seniors and their non-professional caregivers will increase/maintain their mental and emotional wellness. This outcome objective measures the total closed seniors cases, counting as successful all those except those in which there was "no case made." This outcome objective combines all services (cases and information line) in the totals below.

Performance Section #3

Indicator of Success: Seniors in need of legal information, advice, or representation will receive appropriate and competent legal services, resulting in increased mental and emotional well-being. Seniors with housing, consumer, health, or income maintenance issues receive advice, referrals, litigation and advocacy services to increase/maintain their mental and emotional health. Success rates are based on the number of cases closed in which the program took action(s) on behalf of an eligible client that addressed the client's legal problem.

	Year 2025 Projection	Actual Year 2025	Current Year Projection	Next Year Projection
	01/01/25 -12/31/25	01/01/25 -12/31/25	01/01/26 -12/31/26	01/01/27-12/31/27
Total No. of Participants	400	530	450	400
Successful	350	524	396	350
% Successful	88%	98*%	88%	88%

***Success rate calculated using** 530 total services, including 398 total cases, (6 of which were "no case made") and 132 information line services. The 524 successful outcomes excludes "no case made" cases.

Basis for Next Year's Projection: (Source & relevant statistics) Data Collection from Legal Server case management system. Total cases closed within time period stated. Total cases for each individual outcome objective are from corresponding Legal Server Problem Codes. Total number of successful cases from Legal Server Case Closing Reasons corresponding with indicators of success. Our 2026 projection was increased due to unmet needs funding received.

General Comments on Service Activity and Delivery

LawNY continues to provide comprehensive legal services to individuals sixty years of age and over in Monroe County. We leverage other funding sources and referral systems to expand upon services available through the Older Americans Act. Considering all of our Monroe County programs, including the project being assessed, in 2025 LawNY's Rochester office closed 910 cases for individuals aged sixty and above. Including the 132 MCOFA funded Seniors information line calls in 2025, we provided 1,042 such services in 2025.

Older adults received assistance with income maintenance, adult care facility issues, housing, health law, consumer matters, employment, estate matters, powers of attorney, advanced care directives, and other miscellaneous matters.

More specifically, LawNY's Rochester office assisted older Monroe County residents with problems including nursing home evictions, nursing home debt lawsuit defense, debtor relief, landlord-tenant, public utilities, pensions, government benefits, elder abuse, financial exploitation, Medicaid, Medicare, home and community-based care, homeownership issues, mortgage foreclosures, estate matters, advanced directives, including powers of attorney, and a number of other matters.

In 2025, our seniors information line provided ready access to legal information and services for older adults. Many seniors expressed gratitude about receiving such needed legal information without the delays associated with processing intakes and case assignments. Additionally, we have continued to provide services to individuals impacted by elder abuse and financial exploitation through the following activities:

E-MDT:

In 2025, we continued participation in the Monroe County Enhanced Multi-Disciplinary Team, meeting monthly to develop remedies and strategies to assist victims recover from abuse and financial exploitation.

We accepted E-MDT referrals that are presently being litigated to recover monies taken through financial exploitation.

We presented "*The Power of Attorney: A License to Steal? Revocations, Remedies, Realities*" at the 2025 NYS E-MDT Conference.

Crime Victims Legal Network Project:

LawNY continues to participate in the Crime Victims Legal Network Project, a Vision 21 initiative. The Project helps to identify and address the unmet civil legal needs of crime victims while also raising public awareness of the civil legal needs of crime victims. The Project focuses on the 57 counties outside of New York City and is a partnership between Empire Justice Center (EJC), the New York State Office of Victim Services, the University at Albany's Center for Human Services Research, and Pro Bono Net.

Crime Victims Program: LawNY provides legal assistance to crime victims through a subcontract with the Empire Justice Center and with funding through the Office of Victims Services. The project prioritizes work with the elderly, who are at an increased risk of victimization. The project identifies and addresses unmet civil legal needs of crime victims through informational and brief services, direct legal assistance, and

collaboration among legal and non-legal service providers. LawNY provides civil legal services to crime victims in areas involving the essentials of life-- income, health and housing. LawNY also provides legal services directly related to the crime in areas such as applying for crime victim compensation, elder abuse, financial exploitation, misuse of money by fiduciaries and representatives, identity theft and fraud.

II. Targeting Compliance

1. Minority Elders Served

LawNY Service	Projected % of Minority Elders Served in 2025	Total Successful Cases in 2025	Minority Elders Served in 2025	% of Minority Elders Among Total Elders Served
Legal Services	38%	392	169	43%

1a. Is LawNY, the Community Service Provider, meeting its goals of providing services to minority elders at least in proportion to their representation in the total elderly population within the service provider's catchment area?

_X__Yes **If Yes,**

To what do you attribute your success? LawNY maintains collaborative projects with other community agencies to assist in targeting those most in need of services. Many of the organizations we work with serve minority members of our community. Through these relationships we reach out to the community to educate the elder population regarding the legal services that we offer and connect with individuals who need assistance.

We look for new outreach opportunities in minority communities, such as the Juneteenth celebrations that LawNY has staffed with an information table each year, from 2024 - 2026. Outreach efforts are planned in locations that our target populations frequent for their convenience and increased attendance. This data is best viewed in conjunction with the Minority Elders with Low Incomes Served results below.

____No **If No,** please state the reason and outline a specific action plan to reach the objective (use a separate sheet if necessary).

2. Minority Elders with Low Incomes (below 100%) Served

LawNY Service	Projected % of Minority Elders with Low Incomes Served in 2025 Under 100% FPIG	Total Minority Elders Served in 2025 Under 100% FPIG	Total Elders Served (excluding information services)	% of Minority Elders with Incomes Below 100% FPIG
Legal Services	12.5%	136	392	35%

2a. Is LawNY, the Community Service Provider, meeting its goals of providing services to minority elders with low incomes at least in proportion to their representation in the total elderly population within Monroe County?

_X_ Yes **If Yes,**

To what do you attribute your success?

LawNY prioritizes service to underserved populations with the greatest need.

_____ No **If No,** please state the reason and outline specific action plan to reach the objective (use a separate sheet if necessary).

3. Elders with the Greatest Economic Need

LawNY Service	Projected % of Low Income Elders served in 2025	Total Successful Cases in 2025	Total No. of Low Income Elders served in 2025	% of Elders served under 100% and 150% FPIG in 2025
Legal Services	31% under 100% FPIG 50% under 150% FPIG	392	136 under 100% FPIG 228 under 150% FPIG	35% 58%

3a. Is LawNY, the Community Service Provider, meeting its goals of providing services to the elderly with the greatest economic need at least in proportion to their representation in the total elderly population within LawNY's catchment area?

_X_ Yes **If Yes**, to what do you attribute your success?

LawNY focuses on priorities of the low income community in Monroe County. In addition, as explained above we target our outreach and collaboration to areas and organizations that serve the low income community. Even for seniors with incomes over 150%, many of those are under 200%, and many need long term home care services.

____ No **If No**, please state the reason and outline specific action plan to reach the objective (use a separate sheet if necessary).

4. Elders with the Greatest Social Need: Living Alone

LawNY Service	Projected % of Elders Living Alone Among Total Successful Cases in 2025	Total Successful Cases (Household Size is Known)	Total Cases: Elders who Lived Alone Served in 2025	% of Elders who Live Alone Among Total Cases
Legal Services	50%	392	296	75.5%

4a. Is LawNY, the Community Service Provider, meeting its goals of providing services to the elderly with the greatest social need at least in proportion to their representation in the total elderly population within Monroe County?

__X__ **Yes** **If Yes,**

To what do you attribute your success?

We reach many individuals due to our outreach efforts, referrals from community organizations, self-referrals and referrals from former clients. The community agencies that are referring clients to our office work with and assist individuals that have the most social and financial need.

___**No** **If No**, please state the reason and outline specific action plan to reach the objective (use a separate sheet if necessary).

5. Frail and Disabled Elders

LawNY Service	Projected % of Frail or Disabled Elders Among Total Successful Cases in 2025	Total Successful Cases	Total No. of Frail or Disabled Elders Served in 2025	% of Frail or Disabled Elders Among Total Persons Served
Legal Services	40%	392	196	50%

Note: Fraility determined by receipt of disability income, and those age 75+.

5a. Is LawNY, the Community Service Provider, meeting its goals of providing services to the elderly with frailty or disability at least in proportion to their representation in the total elderly population within LawNY's catchment area?

__X__ **Yes** **If Yes,**

To what do you attribute your success?

We reach many individuals through our outreach efforts, referrals from community organizations, internal referrals and referrals from former clients.

___ **No** **If No,** please state the reason and outline specific action plan to reach the objective (use a separate sheet if necessary)

General Comments on Service Targeting:

LawNY maintains ongoing outreach to our target client populations and tracks all presentations within our timekeeping database. The database maintains records on where presentations were done, which individuals from our staff participated in the presentation, what language the presentations were in, and the makeup of the audiences (i.e. clients, case managers, etc.). In 2025, staff within the Rochester Office of LawNY conducted 250 outreach events in Monroe County, reaching an estimated 11,019 community members.

Outreach activities often occur at community organizations, events, and senior living centers. Outreach efforts are planned for locations that our target populations (low income and low income minorities) frequent. These outreach activities included presentations and training, onsite intake and assistance at community locations, participation in community events and fairs and distribution of materials. These activities included both outreach to community members as well as to staff of human services organizations and other stakeholders.

Notable outreach activities whose primary focus was on Older Adults included the Salute to Seniors at Ontario Beach Park.

LawNY utilizes an array of approaches to outreach and has expanded our use of social media, print, radio and other forms of advertising. The more traditional outreach activities include attending community events and fairs, providing brochures for display in waiting rooms and public spaces and maintaining a robust referral and collaboration network with other community stakeholders.

We continue to provide webinars to ensure accessibility to both community members and community agency staff. LawNY has also continued to distribute flyers and brochures to organizations. We have an internet presence through both our main website and several social media platforms, including X and Facebook and we conducted outreach campaigns via Facebook and Instagram during the reporting period.

Our media relationships continue to grow stronger and more diverse, with six media mentions during this reporting period, listed at https://www.lawny.org/LawNYintheNews.

We have an established and effective referral system with multiple entry points to our services. Clients requesting assistance walk-in or call our offices directly. Community agencies call, fax, email or use their program-specific online database to make direct referrals. LawNY also participates in collaborative electronic referral portals such as MyWayFinder and Unite Us. LawNY also provides services onsite at multiple locations in our communities, including at veterans events, in court, in libraries, in schools, at various sites within area health networks, at health care clinics, at domestic violence agencies, congregate meal sites and other locations.

LawNY continued to provide onsite intake and services at various locations throughout Monroe County. In 2025 these included locations within University of Rochester Medical Center, Highland Hospital, Rochester Regional Health Systems, the Monroe County Library System, the House of Mercy, Lifespan and Pathstone.

In response to many involuntary nursing home discharges (evictions), LawNY participates in a statewide Nursing Home Transfer Taskforce, in coalition with the NY Office of the State Long Term Care Ombudsman program, Lifespan, Empire Justice Center, the Center for Elder Law and Justice, and others.

In response to the plethora of lawsuits against nursing home residents and their families, LawNY participates with a national network of attorneys who defend against unjust nursing home debt lawsuits.

LawNY actively engages with the elder law bar, including the Monroe County Bar Association Elder Law Committee, the New York State Bar Association's Elder Law programs and its list-serve.

LawNY continues to engage in a community lawyering service delivery model that brings our services to the community to ensure at risk and hard to reach populations can access our services.

Begun in 2017, our Seniors Legal Services Project continued its monthly "POA Day," onsite at Lifespan, for eligible older adults in need of a power of attorney. In 2023, we partnered with Lifespan to initiate a Caregiver's Clinic, to provide monthly legal services to caregivers referred to us by Lifespan's Finger Lakes Caregiver Institute.

LawNY offers online methods of information dissemination through our website lawny.org. For example the article "When Someone Dies: Settling Small Estates," covering New York Small Estate Affidavits and Family Protections was updated in 2025. Other topics covered on our website include obtaining and maintaining public benefits, evictions, age 62 lease terminations, foreclosures, family court, utility shut offs, domestic violence, health insurance, SSI, and more. Many of our website articles are also available online in Spanish.

III. General Management: Contracts & Services

1. Staffing

1a. Does LawNY have adequate staff to perform the activities required under contract with MCOFA?

_X__ Yes

_____ No. If not, please explain the impact on the program or service and any steps being taken to improve staffing levels:

1b. Does LawNY have a training plan designed to assist staff in carrying out assigned tasks?

_X__ Yes

____No

1c. Would a random check of LawNY's personnel files verify the type of training actually provided for staff, including the date, the presenter and his/her qualifications, and the material covered?

_X_ Yes All training and legal education received by advocates is tracked through our case management system (LegalServer). All attorneys are required to complete a requisite number of Continuing Legal Education credits.

____ No

1d. Does LawNY comply with Affirmative Action and Equal Opportunity guidelines?

_X__ Yes

____ No

1e. Is an EEO sign posted in a prominent location ?

_X___ Yes. Where? On the bulletin board in the kitchen at our office location at 1 W. Main Street.

___ No

1f. Are reasonable accommodations made for staff and volunteers with disabilities?

_X_ Yes. Such as: Placement of staff offices, handicap access, additional equipment for staff, home visits, large print materials, etc.

___ No

1g. Does the LawNY staffing pattern reflect the minority representation in the total population?

__X_ Yes

___ No

1h. Can LawNY document outreach efforts to recruit targeted individuals to fill vacant positions?

_X_ Yes

___ No

1i. Were there any programmatic changes initiated during the grant year that impacted the scope or quality of service?

___ Yes

_X__ No

If Yes please discuss briefly:

1j. Does LawNY provide equal access to persons with Limited English Proficiency (LEP) as outlined by Federal Executive Order 13166 and Statewide Language Access Policy no. 26?

_X_ Yes

___ No

If no, please state the reason and outline specific action plan to reach the objective.

2. Administrative Provisions

1. Are LawNY staff activities consistent with prohibitions against participation in partisan activities?

   __X__ Yes

   ____ No

2. Are the facilities where LawNY services and activities take place free from political posters and other evidence of advancing one political candidate over another?

   _X_ Yes

   ____ No

3. Are the services carried out under MCOFA contract secular in nature?

   _X__ Yes

   ____ No

4. Has LawNY given due recognition to the US Administration on Aging, the NYS Office for the Aging and Monroe County Office for the Aging, as appropriate, in program/service brochures, flyers and other printed materials?

   _X__ Yes

   _____ No

5. Does LawNY have a written policy regarding retention of all MCOFA contracted program and fiscal records for six (6) years?

   _X__ Yes

   ____ No

6. What provisions has LawNY made to protect the confidentiality of customer (client) information?

As a law office, we must follow rules and regulations governing attorney-client privilege and confidentiality. All staff are trained about maintaining confidentiality and volunteers must sign confidentiality agreements.

7. Does LawNY have a system in place to allow customers (clients) to voluntarily and confidentially contribute to the cost of services?

LawNY Service	**Contribution System**	
	Yes	**No**
Legal Services	X	

8. Does LawNY have a procedure that allows customers (clients) as well as applicants for services to present grievances on the denial of services?

_X_ Yes

___No

9. Does LawNY have a procedure to accept customer (client) feedback on service quality, service delivery methods, and service personnel?

_X_ Yes

___ No

10. Does LawNY have a policy and procedure in place to ensure that only eligible customers (clients) are served in MCOFA contracted programs?

_X_ Yes

___ No

11. Does LawNY make service sites and program information accessible to persons with disabilities?

_X_ Yes

___No

12. Does LawNY solicit input from their customers and constituents, including customers and constituents that are frail, disabled, and/or minority, on ways to make services more accessible and appealing to culturally diverse populations?

_X_ Yes

___ No

3. Interagency Coordination

1. Describe LawNY's procedure(s) for tracking referred customers' requests for assistance to other organizations when the need for such services is identified:

   LawNY utilizes its own case management system, LegalServer, which records client specific information and details of services provided. Referrals to outside organizations are tracked in LegalServer.

2. Has LawNY worked effectively with other providers and organizations to facilitate coordination and minimize possible duplication of effort?

   _X_ Yes ___ No

Check as many as apply to LawNY's coordinative efforts:

_X_ Participation in interagency meetings to plan and coordinate services

_X_ Coordination of funding proposals with other human services organizations

_X_ Coordination of referrals and follow-up transactions with other local service providers

_X_ Memos of Understanding or similar agreement with other organizations

_X_ Development and implementation of a central assessment unit for services carried out by multiple agencies

_X_ Working with other providers to update information of available services and eligibility

4. Service Promotion & Marketing

1. Indicate what regular means LawNY employs to disseminate information to the public and approximately how often this occurs:

Indicate Frequency	**Weekly**	**Monthly**	**Annually**	**Other: (Please specify)**
____ Newsletters				
___ Radio: Public Service Announcements				
_X_ Radio: Programming				Our relationships with members of the media continue to grow with approximately six media mentions.
___ Public Presentations				
_X_ Brochures/ Pamphlets	X			We often distribute brochures during outreach events.
_X_ Other: Print/Online media publications				2,864 followers on Facebook, 569 followers on Instagram, 1,244 followers on LinkedIn, and 1,016 followers on X

In 2025, www.LawNY.org had 248,392 unique users with 408,130 page views and 317,023 sessions. The average session was 136.8 seconds long.

2. What marketing/outreach/publicity techniques have been employed to reach low income minority elders in your service area?

Please check all that apply:

_X_ Used Census or other data to identify target communities

_X_ Translated program brochures and pamphlets into appropriate languages

_X_ Sent newsletters or announcements to organizations that serve minority populations, disabled populations

_X_Publicized services through press releases, radio, television and/or local publications

__ Located service delivery centers/offices in target communities

_X_ Encouraged persons served to tell friends and neighbors of available services

_X_ Sought out/accepted local speaking engagements to meetings and conferences sponsored by associations or other organizations that include minorities

_X_ Included minority staff and interns in local programs or in conducting outreach

_X_ Coordinated with other agencies which serve low income families in order to identify elders who may be in need of services

_X_ Additional activities or strategies used to target services to minority elders

Please Specify: LawNY does extensive outreach and testing to enforce fair housing laws.

3. Equipment Inventory

On the attached "Equipment Inventory & Disposition Form" please indicate any changes of equipment purchased via MCOFA contracts, or equipment disposed of which had been purchased via MCOFA contracts, during the grant year.

Not applicable.

IV. Assessment Conclusion

In conveying general comments regarding LawNY's overall assessment of service delivery and contract compliance, please address the following areas:

Overall assessment of the strengths of LawNY:

AGENCY COMMENTS:

As demonstrated over our years of service to our community since 1968, our strengths include collaborative relationships with community agencies throughout Monroe County, our commitment to serving low income populations, and our focus on overcoming barriers to legal representation. We provide outreach and presentations to community agencies and other organizations serving individuals age 60 and above. We routinely accept invitations to speak to staff of other human service organizations and to consumer populations.

LawNY uses the NY Department of Health's Health Commerce System to satisfy contract requirements. LawNY also uses its own secure LegalServer database to compile outcome and demographic information, and for reporting of client statistics. This secure source provides detailed case management data on services to clients. LawNY agrees to provide aggregate data to the Consolidated Area Agency Reporting System (CAARS) quarterly reports on an ongoing basis.

LawNY has been on the cutting edge of developing legal remedies for combatting elder abuse, as demonstrated at our presentation at Lifespan's 2025 Elder Abuse Conference.

ADDITIONAL AGENCY COMMENTS:

The legal needs of Older Adults in Monroe County are immense. We are proud to have provided years of cost-efficient legal services as Monroe County's Older Americans Act Title III-B provider since 1991, and look forward to continued provision of high quality legal services to seniors.

MCOFA COMMENTS:

The Legal Services Program for the Elderly at Legal Assistance of Western New York, Inc (LawNY) has been serving as a valuable service to older persons in Monroe County.

Law NY continually provide information about our services at the Public Market in Rochester, and food pantries and libraries throughout the county. LawNY's outreach activities are focused

on low-income, frail, and minority individuals. To better serve clients, LawNY Rochester has forged collaborative projects with other community agencies serving these groups. This provides not only a range of legal services to help clients overcome obstacles, but also a variety of training and presentations to caseworkers and employees of community organizations so that they may better serve their target populations.

They also participate in electronic referral portals such as MyWayFinder and Unite Us.

MCOFA Contract: Financial Monitoring

LAWNY Financial Management & Inventory Control

Inventory Control – If no equipment was purchased with MCOFA funds move on to "LAWNY Financial Management, Safeguarding Funds & Protecting Assets"

1. Does LAWNY maintain sufficient documentation for equipment purchased with MCOFA funds?

___ Yes ___ No ****Not Applicable**

2. Is the equipment purchased with MCOFA funds identified as such either in property records or fund codes marked on the property?

___Yes ___ No ****Not applicable**

3. Is the equipment purchased with MCOFA funds being used solely to benefit older persons (Unless costs are appropriately pro-rated)?

___ Yes ___No ****Not applicable**

Financial Management & Inventory Control Monitoring Form

MCOFA Contract

LawNY Financial Management, Safeguarding Funds & Protecting Assets

1. Are LawNY staff who handle monies (with the exception of attorneys) bonded?

_X___ Yes ___No

Documentation: see attached.

2. Are two individuals involved in counting customer (client) contributions?

_X__ Yes ___No

Documentation: See attached page 17 of our accounting manual. Contributions received by our administrator are forwarded to finance staff for deposit.

3. Are individuals who are authorized to sign checks involved in processing invoices?

___Yes _X_ No

Documentation: Only finance staff have access to accounting systems and check stock. No finance staff serve as check signers.

4. Are individuals who are authorized to sign checks different from the person(s) who maintain payroll records?

_X_ Yes ___No

Documentation: Payroll records are maintained by finance staff. See attached list.

5. Has LawNY maintained registration as a Charitable Organization with the Department of State?

_X_ Yes ____No

Documentation: see attached (#01-77-17).

5a. If no: does LawNY claim exemption from the registration (receiving less than $25,000 in grants and contributions annually)?

___Yes ___No ****Not applicable**

Department of **Human Services**
Office for the Aging
Monroe County, New York

Adam Bello
County Executive

Thalia Wright
Commissioner

Steve Newcomb
Director

September 11, 2026

Maureen Murphy
1900 S. Clinton Ave.
Rochester, NY 14618

Dear Maureen,

Attached for your records is the completed 2025-26 Annual Program Evaluation for the Monroe County Office for the Aging (MCOFA) funded Mobility Management Program. The contract is doing well. For comments related to each program and its specific objectives, please read through the evaluation. You may find additional general comments related to the program on the final page of the evaluation.

Thank you for continuing to provide these valued services to our community's older adult population.

Should you have any questions regarding the evaluation, please do not hesitate to contact me at (585) 753-6458.

Sincerely,

Kitty S. Koul

Kitty S Koul

cc: Monroe County Office for the Aging –Steve Newcomb

Encl: Annual Program and Service Assessment

Monroe County Department of Human Services' Office for the Aging

Program Evaluation and Contract Compliance

2025-26 ANNUAL PROGRAM AND SERVICE ASSESSMENT

MONROE COUNTY OFFICE FOR THE AGING

COMMUNITY-BASED SERVICES FOR THE ELDERLY

AS Funded by: Older Americans Act of 2016, As Amended and NYS Funds

CONTRACTOR

LIFESPAN OF GREATER ROCHESTER, INC.

Transportation Services for Older Adults - Mobility Management Program

EXPENDITURES

CSE (4/1/25 to 3/31/26) ---------- $ 60,000

Date of Assessment: September 11, 2026

MCOFA Monitor: Kitty Koul

Others Participating: Maureen Murphy, Program Director, Heather Packer-McLaughlin Give a Lift Program Manager

I. Past performance/Previous recommendations

1. Review Findings/Units of Service

1. Were there findings from the prior year's monitoring that required corrective actions to address areas of non-compliance?

   Yes ___ No ___ N/A __X__

   If yes, were all findings from MCOFA's previous monitoring efforts satisfactorily addressed?

II. Service Activity Review

1. Units of Service

LIFESPAN Service Units	Projected # of Units (2025-26)	Actual # of Units (2025-26)	% of Projection (2025-26)
Mobility Management Program – CSE	330 Trips 1,900 I&A	341 Trips 1251 I&A	103.33% Trips 65.31% I&A

Describe reason(s) for any variances: In 2025-2026, we saw the turn over of staffing on 2 occasions thus resulting in documentation errors, further with the introduction of GoGo in July 2025 there was confusion with documentation processes that were later corrected.

2. Projected Persons Served (One-to-One)

LIFESPAN *Service*	Projected # of persons 60 + Served (2025-26)	Actual # of Unduplicated Persons Served (2025-26)	% of Projection (2025-26)
Mobility Management Program – CSE	750	610 I&A 140 Trips	100%

Describe reason(s) for any variances:

3. Service Waiting Lists

Mobility Management	Waiting List Maintained?		If Yes, please check all that apply & current # on wait list.	Resulting number of referrals to other agencies in 2025-26
Waiting List **no**	**Yes**	**No** **x**	__ Lack of Funding __ Lack of Staff Other: Please Specify	0

4. Expenditures

LIFESPAN *Service*	Projected Expenditures (2025-26)	Actual Expenditures (2025-26)	% of Projection (2025-26)
Mobility Management Program – CSE	$60,000	$60,000	100%

Describe reason(s) for any variances:

5. Actual Cost Per Customer (Client)

LIFESPAN ***Service***	**# of Persons Served (2025-26)**	**Actual Expenditures (2025-26)**	**Average Cost Per Client (2025-26)**
Mobility Management Program – CSE **MCOFA Funds**	750	$60,000	$80.00

Do costs per person appear reasonable? __X__ Yes ___ No

If no, please explain:

6. Actual Cost Per Unit

LIFESPAN ***Service***	**Projected Cost Per Unit**	**# of Units (2025-26)**	**Actual Expenditures (2025-26)**	**Average Cost Per Unit (2025-26)**
Mobility Management Program – CSE MCOFA Funds	Trips $36.24 I&A $35.81	341 1251	$11,959 $68,041 (includes $20,000 contractor match)	$35.07 $54.39

Do costs per person appear reasonable? __X__ Yes __ No

These costs are similar to I&A costs under Eldersource and NY Connects Programs. Unit cost is higher as number of I&A units was lower than projected.

If no, please explain:

III. Outcome Measures

ContrackHQ Update

Please review HQ Outcome measures for accuracy

1) **Outcome Objective #2:**
   To provide Mobility Management assistance with transportation options utilizing the newly developed one-click website

Timeframe	Projected 2025-26	Actual 2025-26	Projected 2026-27
Total # of People Served	750	750	750
# Successful	675	750	675
Percent Successful	90%	100%	90%

2) **Outcome Objective #3:**
To recruit and train Mobility Management volunteers

Indicator of Success: Number of volunteers recruited and trained met set target

Time Frame	Assement Year Projection 4/1/25 - 3/31/25	Assessment Year Actual 4/1/25 - 3/31/25	Current Year Projection 4/1/26 - 3/31/27
Projected Total No. of Mobility Management Volunteers	60	65	50
% Successful	90%	108.33%	100%

Basis for Next Year Projection (source & relevant statistics): volunteerism nationally is recovering from Covid's impact. We are nearly at pre 2020 levels of service.

3) **Outcome Objective #4:**
Overall Satisfaction with Lifespan Mobility Management Program

Indicator of Success: Seniors will be satisfied with Mobility Management services. From the annual Satisfaction Survey, the question "Overall, the services Lifespan provided me Mobility intervention services that increased my ability to protect and manage my assets satisfactority" will have a combined percentage of "Strongly Agree" and "Agree".

Time Frame	Assessment Year Projection 4/1/25 - 3/31/25	Assessment Year Actual 4/1/25 - 3/31/25	Current Year Projection 4/1/26 - 3/31/27
# of responses received	200	200	200
% Satisfied	95%	96%	95%

In 2023 surveys were done by phone calls made to the clients. In mid-2023 we began using Blooming Health to complete the surveys for clients served each month. We anticiapted an increase in responses in 2025-26.

Objective 4: What are your Give a Lift accomplishments?

Outcome Objective #4:	To recruit, train, certify and maintain 50 Mobility Management volunteer counselors. These new volunteers will be vetted, trained and placed with a volunteer station to increase client access to rides.
Indicator of Success:	Number of volunteers >= 50
Service Quality/ Customer Satisfaction Measures:	Recruited, trained and maintained at least 46 volunteers.

Category	Number
***Number of new volunteers trained**	68
Total Number of volunteers	372
Number of volunteer hours provided	30,571
Number of Give a Lift stations	13
Number of one-way trips provided	16,577
Number of unduplicated clients served	1078

*Training for new volunteers is at the Lifespan offices at 1900 South Clinton Ave. After receiving training the volunteers are placed in their community "station". The Give a Lift coordinator continues to provide support to the station coordinators and additional training as needed.

4a. Performance Measure

Describe method for measuring program performance:

Program performance is measured by satisfaction surveys and volunteer reports which summarize the hours of service provided, and the Mobility and non-Mobility activity conducted on behalf of the client. These tools and resources, coupled with the hours of services provided are indicators of the effectiveness and satisfaction of the Mobility Management Services. They all demonstrate the older adults' ability to maintain their independence in the community.

4b. Analysis & Plans for Continuous Program Improvement

Describe process for program analysis and plans for program improvement:

Our data and survey tools provide statistical data necessary to continually revise our program to meet the needs of our clients. Health fairs, seminars, newsletter and other outreach activities help the community to understand the effectiveness of our program. We schedule monthly new volunteer orientation, certification and in-service programs to provide additional improvement opportunities for volunteers thereby enhancing the client experience.

4c. Specific Program Improvements

Based upon answer provided in 4b above, describe specific examples on adjustments made to improve program based upon feedback received per 4b above: process for program analysis and plans for program improvement:

2025-26 saw significant emphasis placed on enhancing the internal operations of Give a Lift and rebuilding the volunteer corps. Lifespan allocated, for the first time, a full time staff complement to the role of GAL Volunteer Manager. In doing so, the manager worked with the individual stations on shared policies and procedures as well as volunteer recruitment strategies. 2025 saw a continued emphasis on bolstering the availability of Give a Lift in NW Monroe County.

General Comments on Service Activity and Delivery:

Mobility Management as a department has undergone significant changes and growth in the 2025-2026. Starting with the addition of a new team of mobility managers. This required extensive training. Together with the full time GAL manager and Department Director, have ensured strong "bench strength" for the community of callers.

In 2025 the TRAC department saw a complete turnover in its staffing due to retirements. This was a challenge from January-July. In July we became fully staffed and saw new life in the team. New ways of approaching old issues are being implemented and it's working.

Here2There.help (H2T) continues significant development. The FTA grant project to link H2T with the RTS payment has completed its development. It will be deployed and rolled out throughout 2026.

GAL continues to flourish under the leadership of its new manager. The elevated position has allowed the team to develop organizationally.

The GoGo partnership was launched on 6.1.2025. It was the biggest undertaking of 2025. We needed to establish the protocols for best use with the Lifespan business model. It was implemented as our new team came on board and everyone needed training on how to use the platform. In under 12 weeks, over 300 people became engaged with the platform and over 1300 trips were provided.

Give a Lift is the program to watch within the Mobility Management offerings. With volunteer time valued at $34.79 per hour with nearly 31,000 hours logged and 16,000+ trips provided it is not only an invaluable partner to our community, it is an economic powerhouse.

III. Targeting Compliance

1. Minority Elders Served

LIFESPAN *Service*	**Projected % of Minority Elders in 2025-26**	**Total Elders Served in 2025-26**	**Total Minority Elders in 2025-26**	**% of Minority Elders Among Total Elders Served in 2025-26**
Mobility Management	17.9%	750	370	49.33%

Missing data for 336 clients

1a. Is LIFESPAN, the Community Service Provider, meeting its goals of providing services to minority elders at least in proportion to their representation in the total elderly population within the service provider's catchment area?

Yes __x__ **If Yes,**

To what do you attribute your success? Outreach and referral source experience

No ____ If **No,** ____

Please state the reason and outline specific action plan to reach the objective (use a separate sheet if necessary).

2. Minority Elders with Low Incomes Served

LIFESPAN *Service*	**Projected % of Minority Elders with Low Incomes in 2025-26**	**Total Elders Served in 2025-26**	**Total Minority Elders with Low Incomes in 2025-26**	**% of Minority Elders with Low Incomes Among Total Elders Served in 2025-26**
Mobility Management	2.9%	750	35	9.45%

Missing data for 256 clients

2a. Is LIFESPAN, the Community Service Provider, meeting its goals of providing services to minority elders with low incomes at least in proportion to their representation in the total elderly population within the service provider's catchment area?

Yes _x_ If yes,

To what do you attribute your success? Outreach and referral source experience

No _____ If No,

Please state the reason and outline specific action plan to reach the objective (use a separate sheet if necessary).

3. Elders with the Greatest Economic Need.

LIFESPAN *Service*	**Projected % of Elders with Low Incomes Served in 2025-26**	**Total Persons Served in 2025-26**	**Total No. of Elders with Low Incomes Served in 2025-26?**	**% of Elders with Low Incomes Among Total Persons Served in 2025-26**
Mobility Management	17.3%	750	211	28.13%

Missing data for 627 clients

3a. Is LIFESPAN, the Community Service Provider, meeting its goals of providing services to the elderly with the greatest economic need at least in proportion to their representation of the total elderly population within LIFESPAN's catchment area?

Yes _x__ If Yes,

To what do you attribute your success? Outreach and referral source experience

No ___ If No,

Please state the reason and outline specific action plan to reach the objective (use a separate sheet if necessary).

4. Elders with the Greatest Social Need: Living Alone

LIFESPAN *Service*	**Projected % of Elders Living Alone in 2025-26**	**Total Persons Served in 2025-26**	**Total No. of Elders who Live Alone in 2025-26**	**% of Elders who Live Alone Among Total Persons Served in 2025-26**
Mobility Management	45.1%	750	302	40.27%

Missing data for 241 and not available for 226

4a. Is LIFESPAN, the Community Service Provider, meeting its goals of providing services to the elderly with the greatest social need at least in proportion to their representation in the total elderly population within LIFESPAN's catchment area?

Yes _x__

If Yes, To what do you attribute your success? Outreach and referral source experience

No ____ If No, explain why?

General Comments on Service Targeting:

IV. General Management: Contracts and Services

NOTE: For the following "General Management" sections please provide source documents (as reasonable) at time of site visit by MCOFA Program Monitor.

1. Staffing

1a. Does LIFESPAN have adequate staff to perform the activities required under contract with MCOFA

Yes _x__ No ___

If not, please explain the impact on the program or service and any steps being taken to improve staffing levels:

1b. What are your Give a Lift accomplishments? See Objective 4 response above

1c. Does LIFESPAN have a training plan designed to assist staff in carrying out assigned tasks?

Yes ___x_ No ___

1d. Would a random check of LIFESPAN's personnel files verify the type of training actually provided for staff, including the date, the presenter and his/her qualifications?

Yes _x__ No ___

1e. Does LIFESPAN comply with Affirmative Action and Equal Opportunity guidelines?

Yes __x__ No ___

1f. Is an EEO sign posted in a prominent location?

Yes __x__ No ____

If Yes, Where? Staff entrance hallway

1g. Are reasonable accommodations made for staff and volunteers with disabilities?

Yes __x__ No ___

Such as: automatic door openers, accessible bathrooms and parking. Access to Language Translation.

1h. Does the LIFESPAN Mobility Management staffing pattern reflect the minority representation in the total population?

Yes x___ No ___

If no, please explain

1i. Can LIFESPAN document outreach efforts to recruit targeted individuals to fill vacant positions?

Yes __x_ No ___

1i. Were there any programmatic changes initiated during the grant year that impact the scope or quality of service?

Yes _x__ No ___

If yes, please discuss briefly: provided volunteers with continuous training and support as well as identifying geographic areas of greater emphasis.

1j. Does Mobility Management provide equal access to persons with Limited English Proficiency (LEP) as outlined by *Federal Executive Order 13166 and Governor Cuomo's Statewide Language Access Policy (no.26)?*

Yes __x__ No ___

If no, please state the reason and outline specific action plan to reach the objective

2. Administrative Provisions

1. Are LIFESPAN staff activities consistent with prohibitions against participation in partisan activities?

Yes X___ No ___

2. Are the facilities where LIFESPAN services and activities take place free from political posters and other evidence of advancing one political candidate over another?

Yes _X__ No ___

3. Are the services carried out under MCOFA contract secular in nature?

   Yes _X__ No ___

   Has LIFESPAN given due recognition to the US. Administration on Community Living, the New York State Office for the Aging and Monroe County Office for the Aging, as appropriate, in program/service brochures, flyers and other printed materials?

   Yes _X__ No ___

   If "Yes", please provide samples of source documents.

   See attached MOBILITY MANAGEMENT brochure

   If "No", please address plan to accomplish.

4. Does LIFESPAN have a written policy regarding retention of all MCOFA contracted program and fiscal records for six (6) years?

   Yes _X__ No ___

   If yes, please specifically identify where this can be found?

   Lifespan - Records Retention policy (LS-118-FP)

5. What provisions has LIFESPAN made to protect the confidentiality of customer (client) information?

   Confidentiality & HIPAA policies are in place and reinforced with staff at meetings, conferences, trainings, & during individual supervision. All clients are provided with documents regarding confidentiality and no information is shared without written consent of the client. Case files are kept electronically on Peer Place - a highly secure system with HIPAA protections. A service is also in place for confidential document destruction.

6. Does LIFESPAN have a system in place to allow customers (clients) to voluntarily and confidentially contribute to the cost of services?

LIFESPAN ***Service***	**Contribution System**	
	Yes	**No**

Mobility Management	x	

6a. If yes, how are contributions utilized?

Contributions are incorporated into the program budget to cover expenses.

7. Does LIFESPAN have a procedure that allows customers (clients) as well as applicants for services to present grievances on the denial of services?

Yes _X__ No ___

8. Does LIFESPAN have a procedure to accept customer (client) feedback on service quality, service delivery methods, and service personnel?

Yes _X__ No ___

9. Does LIFESPAN have a policy and procedure in place to ensure that only eligible customers (clients) are served in MCOFA contracted programs?

Yes _X__ No ___

10. Does LIFESPAN make service sites and program information accessible to persons with disabilities?

Yes _X__ No ___

11. Does LIFESPAN solicit input from their customers and constituents, including customers and constituents that are frail, disabled, minority, on ways to make services more accessible and appealing to culturally diverse populations?

Yes _X__ No ___ If yes please document your source. Customer surveys

3. Interagency Coordination

1. Describe LIFESPAN's procedure(s) for tracking referred customers' requests for assistance to other organizations when the need for such services is identified:

Referrals to other programs that use the NYSOFA PeerPlace database are made through the referral function within the database. When a referral is made to another organization that does not support our database's electronic referrals, the consent of the customer and subsequent referral details are entered into a case note in their record.

2. Has LIFESPAN worked effectively with other providers and organizations to facilitate coordination and minimize possible duplication of effort?

   Yes _X__ No ___

   Check as many as apply to LIFESPAN's coordinative efforts:

   x___ Participation in interagency meetings to plan and coordinate services (CFC, Jewish Family Services)

   x___ Coordination of funding proposals with other human services organizations (CFC, Jewish Family Services)

   x___ Coordination of referrals and follow-up transactions with other local service providers (EISEP, Elder Abuse Prevention, Future Care Planning, GRAPA,TRAC,STAR, GAP, CFC, Medical Motors, UR Home Care - Meals on Wheels, Wellness Counseling, Community mental health services)

   x___ Memos of Understanding or similar agreement with other organizations (CFC, Jewish Family Services)

   x___ Development and implementation of a central assessment unit for services carried out by multiple agencies

   x___ Working with other providers to update information of available services and eligibility (NY Connects Website, Eldersource Website, GRAPE Guide)

   x___ Other coordinative activities (please list): Lifespan staff work in a coordinated effort with discharge planners and other hospital based staff, mental health professionals, various city and town departments and programs, employer sponsored events, medical offices, Adult Protective Services, faith communities, attorneys and other businesses that interact with older adults. Our staff participates as speakers and panel members on regional and statewide conferences, as well as for local organizations looking for information on all older adult services, including mental health programs. Many of these result in referrals to assist the isolated and vulnerable older adult.

4. Service Promotion & Outreach

1. Indicate what regular means LIFESPAN employs to disseminate information to the public and approximately how often this occurs:

Indicate Frequency				

	Weekly	Monthly	Annually	Other: (Please specify)
Newsletters		X		
Television Programming				Periodic
Public Presentations		X		
Brochures/Pamphlets				Periodic
Other: AmeriCorps, social media				Periodic

2. What marketing/outreach/publicity techniques have been employed to reach low-income minority elders in your service area?

Please check all that apply:

x ___ Used Census or other data to identify target communities

x___ Translated program brochures and pamphlets into appropriate language

x ___ Sent mailings to target population

x ___ Sent newsletters or announcements to organizations that serve minority populations, disabled populations

x___ Publicized services through press releases, radio, television and local publications

x___ Located service delivery centers/offices in target communities

x___ Encouraged persons served to tell friends and neighbors of available service

x___ Sought out/accepted local speaking engagements to meetings and conferences sponsored by associations or other organizations that include minorities

x___ Included minority staff and interns in local programs or in conducting outreach

x___ Coordinate with other agencies which serve low-income families in order to identify elders who may be in need of services

___ Additional activities or strategies used to target services to minority elders

Please Specify:

5. Equipment Inventory

Please list any equipment purchased via MCOFA contract (or disposed of) and documentation, identification and degree of any shared usage of this equipment.

Attachment: "Equipment Inventory and Disposition Form"

V. Assessment Conclusion

In conveying general comments regarding LIFESPAN's overall assessment of service delivery and contract compliance, please address the following areas:

AGENCY COMMENTS:2025-26 was a year of growth and establishing TRAC as the local expert in Mobility Management. This was achieved by the team of experts in their roles who were efficient and thorough in their service delivery. The team made strides in growing Give a Lift to provide services to underserved communities in the NW of the County and within the city of Rochester. Give a Lift also saw steady growth in the number of new volunteers and have nearly recovered from Covid in terms of service provision. After 2 years of development Here2There was launched in March 2024. It has been well received and has additional developments underway. The support of MCOFA has allowed the Transportation and Mobility Management department and its functions flourish. Examples of this include: we were able to finance rides for people to medical trips they could not afford, and provide support to our generous volunteers. This is just the beginning. The county is aging and the need for transportation services are growing. Having the support of MCOFA will allow Lifespan to continue to be planful and meet the need.

MCOFA COMMENTS:

Older adults in the community depend on reliable transportation to remain independent in their homes and participate fully in their communities. Transportation enables them to access nutrition programs, attend medical appointments, manage personal business, and participate in social activities.

The trip-planning system developed by Lifespan provides older adults with transportation options and associated costs, empowering them to choose the option that best meets their individual needs and circumstances. In partnership with local organizations, Lifespan also provides free emergency rides to older adults who need transportation for medical appointments, essential personal business, and other critical needs.

Lifespan is also supporting the Go-Go Grandparent program, expanding transportation options and helping older adults maintain their independence, mobility, and connection to the community.

<u>The Mobility Management program at Lifespan is a valuable service to older adults in the community.</u>

<u>Compliance areas in need of attention:</u>

Additional resources or technical assistance needed:

AGENCY COMMENTS:

MCOFA COMMENTS:

Department of **Human Services**
Office for the Aging
Monroe County, New York

Adam Bello
County Executive

Thalia Wright
Commissioner

Steve Newcomb
Director

August 10, 2026

Joyel Bennet
422 South Clinton Avenue
Rochester, NY 14620

Dear Joyel,

Attached for your records is the completed 2025 Annual Program Evaluation for the Monroe County Office for the Aging (MCOFA) funded Congregate Meals Nutrition Specialist Services.

The contract is doing well. For comments related to each program and its specific objectives, please read through the evaluation. You may find additional general comments related to the program on the final page of the evaluation.

Thank you for continuing to provide these valued services to our community's older adult population.

Should you have any questions regarding the evaluation, please do not hesitate to contact me at (585) 753-6458.

Sincerely,

Kitty S. Koul

Kitty S Koul

cc: Monroe County Office for the Aging –Steve Newcomb

Encl: Annual Program and Service Assessment

MONROE COUNTY
DEPARTMENT OF HUMAN SERVICES
OFFICE FOR THE AGING

ASSESSMENT FOR PROGRAM FUNDING

2025

Service Name: Registered Dietitian Services

NYSOFA Service Category: Nutrition Program

Funding Sources:

Title III-C1 (01/01/2025 to 12/31/2025)	----------	**$ 21,273**
Monroe County Support	----------	**$ 2,364**
Total (all funds)		**$ 23,637**

IDENTIFYING INFORMATION

Name of Sponsoring Organization: Goodwill of the Finger Lakes, Inc. & Monroe County, Inc.

Address: 422 South Clinton Avenue

City: Rochester State: New York Zip: 14620

Chief Executive Officer: Jennifer Lake

Name and Title of person to contact with questions regarding this Application:

Joyel Benett

Phone Number: 585-697-5769
Fax:
E-mail: jbennett@goodwillfingerlakes.org

Assessment Date: August 5, 2026

Participants: MCOFA: Kitty Koul
Others participating: Cindy Rapp

Review Previous Findings

Were there findings from the prior monitoring that required corrective actions to address areas of non-compliance?

Yes ____ No __X__
If yes, please describe:

Were all findings from MCOFA's previous monitoring efforts satisfactorily addressed?
Yes __X__ No ____
If no, please describe:

Units of Service

Goodwill of the Finger Lakes, Inc.	Projected Units 2025	Actual Jan 1, 2025 – Aug 31, 2025 Units	% of Projection
# of Nutrition Education Units	114	133	116.67%

* Number of units projected from Jan 1, 2025 – Dec 31, 2025

Describe reason(s) for any variances: Nutrition Counseling was only provided by MCOFA RD after Sep 1, 2025 as Goodwill RD did not renew her Registered Dietitian license.

Expenditures

Goodwill of the Finger Lakes, Inc.	Projected 2025 Expenditure	Actual 2025 Expenditures	% spent
Registered Dietitian	$23,637.00	$17,144.60	72.5%

Describe reason(s) for any variances: Budget was overestimated; therefore, 100% budget utilization was not achieved

Actual Cost Per Unit

Goodwill of the Finger Lakes, Inc.	Projected Cost	Actual # of Hours	Actual 2025 Expenditures	Average Cost Per Unit
Registered Dietitian Services (TOTAL FUNDS $23,637)	$47.27	362	$17,144.60	$47.36

Do costs per person appear reasonable?

Yes __X__ No ____

If no, please explain:

Outcomes

Outcome Objective #1: **To provide nutrition education to Older Adults served by all MCOFA programs to discuss health goals and challenges during the contract year in group presentations at the nineteen (19) area senior centers.**

Indicator of Success: Provide nutrition education to Older Adults served by all MCOFA programs to discuss health goals and Challenges during the contract year in group presentations at the nineteen (19) area senior centers.		
	Assessment Year Projection	Assessment Year Actual
Time Frame	1/1/25 – 12/31/25	1/1/25 – 12/31/25
# of centers	19	25
Basis for Next Year Projection (source & relevant statistics):		

Outcome Objective #2: **To provide 114 presentations to participants of Senior Centers in a group setting. For each senior center, the Nutritional Specialist provides six (6) group presentations in a year**

Indicator of Success: Provide 114 presentations to participants of Senior Centers in a group setting. For each senior center, the Nutritional Specialist provides six (6) group presentations in a year		
	Assessment Year Projection	Assessment Year Actual
Time Frame	1/1/25 – 12/31/25	1/1/25 – 12/31/25
# of presentations	114	133
Basis for Next Year Projection (source & relevant statistics):		

General Service Management

1. **Reports and Monitoring**
   A. Are Peerplace units submitted in a timely fashion?
   A1. Monthly __X__YES ____ NO
   A2. Name of Primary PeerPlace Person: Mike Blair
   A3. Name of Secondary PeerPlace Person:
   A4. Do the NAPIS Client and Unit Counts for counseling services have <10% missing data per the PeerPlace reporting system?
   __X__YES ____ NO

2. **Nutrition Education Customer Satisfaction & Compliance**
   A. Attach samples of forms used to collect data. Copy of survey results attached. 19 Sites and 92 participants provided results. Of those that participated, 83% of the participants were satisfied or very satisfied with the nutrition education program and 98% of the participants found the information interesting and helpful.
   B. Did you learn anything significant or new ideas to improve service? __X__YES ____ NO
   If yes, Please explain. If not, why not, and provide a sampling of submitted comments from clients.
   We gathered useful comments and ideas for future nutrition education activities. MCOFA RD now provides all Nutrition Education and also presents some special topics at the senior meal sites.
   C. Is equal access provided to persons with Limited English Proficiency (LEP) as outlined by 12-PI-08, 13-TAM-01, and Governor Cuomo's Statewide Language Access Policy (no. 26)? __X__YES ____ NO
   D. Are individuals providing counseling knowledgeable about the LGBT older adults in the community? __X__YES ____ NO
   E. Are you in compliance with the Americans with Disabilities Act (ADA) requirements? __X__YES ____ NO

Staffing

Does Goodwill of the Finger Lakes, Inc. have adequate staff to perform the activities required under contract with MCOFA?

Yes __X__ No ____

If no, please explain the impact on the program or service and any steps being taken to improve staffing levels:

Does Goodwill of the Finger Lakes, Inc. have a training plan to assist staff in carrying out assigned tasks?

Yes __X__ No ____

If yes, please be prepared to provide source documents that justify this response.

What is the Registered Dietitian's experience and history in dealing with older adults?

Goodwill of the Finger Lakes employs one Nutrition Specialist under this contract. She possess experience working with older adults in the clinical settings such as nursing homes and long-term care facilities.

Would a random check of Goodwill of the Finger Lakes, Inc.'s personnel files verify the type of training actually provided for staff, including the date, the presenter and his/her qualifications, and the material covered?

Yes __X__ No ____

Were there any programmatic changes initiated during the grant year that affect the scope or quality of service?

Yes __X__ No ____

If yes please discuss briefly.

Cindy worked under MCOFA RD to provide Nutrition Education to 19 senior meal sites,

Administrative Provisions

Are Goodwill of the Finger Lakes, Inc. staff activities consistent with prohibitions against participation in partisan activities?

Yes __X__ No ____

Are the facilities where Goodwill of the Finger Lakes, Inc. services and activities take place free from political posters and other evidence of advancing one political candidate over another?

Yes __X__ No ____

Are the services carried out under MCOFA contract secular in nature?

Yes __X__ No ____

Has Goodwill of the Finger Lakes, Inc. given due recognition to the US. Administration on Aging, the NYS Office for the Aging and Monroe County Office for the Aging, as appropriate, in program/service brochures, flyers and other printed materials?

Yes _X_ No ____

If yes, please be prepared to provide source documents that justify this response.

Does Goodwill of the Finger Lakes, Inc. have a written policy regarding retention of all MCOFA contracted program and fiscal records for six (6) years?

Yes _X_ No ____

Has Goodwill of the Finger Lakes, Inc. made provisions to protect the confidentiality of customer (client) information?

Yes _X_ No ____

If yes please discuss briefly.

Almost all activities that contain client information are conducted in PeerPlace. A small amount of notes and assessments taken on paper are locked in a file cabinet within a locked office. The key to the file cabinet is only available to the registered dietitian.

Does Goodwill of the Finger Lakes, Inc. have a procedure that allows customers (clients) as well as applicants for services to present grievances on the denial of services?

Yes ____ No _X_ We have not needed to deny services to anyone. Should it be necessary, we would utilize procedures used by MCOFA as part of their other programs and services, such as the meal program.

If yes, please be prepared to provide source documents that justify this positive response.

Does Goodwill of the Finger Lakes, Inc. have a procedure to accept customer (client) feedback on service quality, service delivery methods, and service personnel?

Yes _X_ No ____

If yes, please be prepared to provide source documents that justify this response.

Does Goodwill of the Finger Lakes, Inc. have a policy and procedure in place to ensure that only eligible customers (clients) are served in MCOFA contracted programs?

Yes _X_ No____

If yes, please be prepared to provide source documents that justify this response.

Does Goodwill of the Finger Lakes, Inc. make service sites and program information accessible to persons with disabilities?

Yes _X_ No ____

Does Goodwill of the Finger Lakes, Inc. solicit input from their customers and constituents, including customers and constituents that are frail, disabled, minority, and/or, on ways to make services more accessible and appealing to culturally diverse populations? i.e. Satisfaction Surveys and Project Council

Yes _X_ No ____

If yes, please be prepared to provide source documents that justify this response.

Is Goodwill of the Finger Lakes, Inc. responsive to "LEP"?

Limited English Proficiency – Individuals who do not speak English as their primary language and have limited ability to read, speak, write, or understand English can be limited English proficient

Yes __X__ No ___

Interagency Coordination

Describe Goodwill of the Finger Lakes, Inc.'s procedure(s) for tracking referred customers' requests for assistance to other organizations when the need for such services is identified:

Peerplace is used for referrals.

Has Goodwill of the Finger Lakes, Inc.. worked effectively with other providers and organizations to facilitate coordination and minimize possible duplication of effort (Do not include MCOFA)?

Yes __X__ No ___

If yes, please acknowledge names of other providers/organizations and provide examples:

EISEP/ Case Management, CFC/JFS, Lifespan, Senior Centers.

Yes __X__ No ____

Documentation:

If No: does Goodwill of the Finger Lakes, Inc. claim exemption from the registration (receiving less than $25,000 in grants and contributions annually)?

Yes ____ No ____

Documentation:

Conclusions

1. Problems & Concerns

2. Overall Comments

Goodwill provided MCOFA with a Nutritional Specialist under this contract for the year 2025. The Nutritional Specialist possessed experience working with older adults in the clinical settings such as nursing homes and long-term care facilities. The Nutritional Specialist exceeded expectations by delivering more presentations than originally planned.

Goodwill is actively involved in helping MCOFA provide satisfactory Nutrition Education services to the older adults in the community. Nutrition Specialist seeks feedback from the participants of the Nutrition Program and uses the suggestions to incorporate in the Nutrition Education presentations and improve the Program.

3. Recommendations

3. **Suggestions**

In conveying general comments regarding Goodwill of the Finger Lakes, Inc.'s overall assessment of service delivery and contract compliance, please address the following areas:



Department of **Human Services**
Office for the Aging
Monroe County, New York

Adam Bello
County Executive

Thalia Wright
Commissioner

Steve Newcomb
Director

September 4, 2026

Ann Cunningham
259 Monroe Ave.
Rochester, NY 14620

Dear Ann,

Attached for your records is the completed 2025 Annual Program Evaluation for the Monroe County Office for the Aging (MCOFA) funded Oasis Program. The contract is doing well. For comments related to each program and its specific objectives, please read through the evaluation. You may find additional general comments related to the program on the final page of the evaluation.

Thank you for continuing to provide these valued services to our community's older adult population.

Should you have any questions regarding the evaluation, please do not hesitate to contact me at (585) 753-6458.

Sincerely,

Kitty S. Koul

Kitty S Koul

cc: Monroe County Office for the Aging –Steve Newcomb

Encl: Annual Program and Service Assessment

Monroe County
Department of Human Services' Office for the Aging
Program Evaluation and Contract Compliance

ANNUAL PROGRAM AND SERVICE ASSESSMENT

MONROE COUNTY OFFICE FOR THE AGING
COMMUNITY-BASED SERVICES FOR THE ELDERLY

AS Funded by: Older Americans Act of 2016, As Amended and NYS Funds

CONTRACTOR
Oasis Rochester

Recreation, Education and Wellness Program

EXPENDITURES

NYS CSE (4/1/25 to 3/31/26) ---------- $30,918

Date of Assessment: September 4, 2026
MCOFA Monitor: Kitty Koul
Others Participating: Ann Cunningham, Carolyn Beich

2025-26

I. Past performance/Previous recommendations

1. Review Findings/Units of Service

1. Were there findings from the prior year's monitoring that required corrective actions to address areas of non-compliance?

Yes No X

If yes, were all findings from MCOFA's previous monitoring efforts satisfactorily addressed?

2. New York State OFA Database and ContrackHQ Reporting

Please indicate the **Name and Job Title** of the person(s), and the back-up person(s) responsible for electronic reporting via *Peer Place,* and County Contract HQ for all programs pertaining to this assessment.

Oasis Rochester

Primary ContrackHQ person: Ann Cunningham
Back-up ContrackHQ person: Janice D'Ambrosio

NYSOFA Database Reporting
Primary: Janice D'Ambrosio
Back up: Ann Cunningham

3. Units of Service

Units of Service	Projected Units	Actual Units	% of Projected Units
Recreation, Education and Wellness Program	810	1536	189.63%

1. Identify/provide source documents: Oasis Rochester Database = 1a. Describe reason(s) for any variances: More units scheduled than projected

4. People Served

People Served	Projected # of unduplicated Persons Served	Actual # of unduplicated Persons Served	% of Projected persons actually served
Recreation, Education and Wellness Program	810	778	96.04%

1a. Describe reason(s) for any variances: Participants are still concerned and worried about coming back to in person learning. Many classes are offered in person, via Zoom only or simulcast. We are continuing smaller class sizes. This is, however, an increase in unique participants in comparison to last year.

5. Cost per Unit of Service

Units of Service	Program Funding/Total Units = Cost per Unit		
Recreation, Education and Wellness Program	$46,378**	1536	$30.19

** includes $14,460 in matching funds

1a. Describe reason(s) for any variances: More units scheduled than projected.

6. Cost per Client

Cost per unit of Service	Program Funding/Clients served = Cost per client		
Recreation, Education and Wellness Program	$46,378**	778	$59.61

** includes $14,460 in matching funds

1a. Do costs per person appear reasonable? Yes X No

If no, please explain:

General Comments on Service Activity and Delivery:

II. Targeting Compliance

1. Minority Clients Served

Service	Projected % of Minorities Served	Actual % of Minorities Served	Projected # of Minorities Served	Actual # of Minorities Served
Recreation, Education and Wellness Program	11%	22.7%	11	33

1a. Is Oasis Rochester, the Community Service Provider, meeting its goals of providing services to minority older adults at least in proportion to their representation in the total population within the service provider's catchment area?

Yes X If Yes,

- To what do you attribute your success? Oasis Rochester is continuing to build partnerships with area older adult living communities to help bring classes to a wider audience.

No If No,

- Please state the reason and outline specific action plan to reach the objective (use a separate sheet if necessary)
- Continued outreach to underserved communities and populations including presentations to senior groups, church groups, health and wellness providers, etc.

2. Minorities with Low Incomes Served

Service	Projected % of Minorities with Low Incomes Served	Actual % of Minorities with Low Incomes Served	Projected # of Minorities with Low Incomes Served	Actual # of Minorities with Low Incomes Served
Oasis Rochester	-----		----	

This is not information that is tracked through our database. Financial information is not required at the time of membership enrollment. People are reluctant to give out their financial and birthdate.

1a. Is Oasis Rochester, the Community Service Provider, meeting its goals of providing services to minority older adults with low incomes at least in proportion to their representation of the total older adult population within Monroe County?

Yes X If Yes,

- To what do you attribute your success? Continued outreach to area senior community centers, senior wellness fairs, partnership with Lifespan.

No If No,

- Please state the reason and outline specific action plan to reach the objective (use a separate sheet if necessary)

- Please provide brief narrative of demographic breakdown of Oasis Rochester 2.2% African American, 77.3% Caucasian, 0.7% Hispanic, 0.1% Native American, 0.1% Asian/Pacific Islander, 1.6% other. Average participant age is in the 76-80 range. 72.6% female, 15.9% male.

3. Limited English Proficiency (LEP)

1a. Is Oasis Rochester, the Community Service Provider, meeting its goals of providing services to people with Limited English Proficiency (LEP) at least in proportion to their representation of the total older adult population within Monroe County?

Yes X If Yes, Interpreting services available when needed.

- To what do you attribute your success?

No If No,

- Please state the reason and outline specific action plan to reach the objective (use a separate sheet if necessary)

General Comments on Service Targeting:

III. Outcome Objectives

Performance Goal	Performance Indicator	Actual Results
Ninety percent (90%) of individuals partaking in educational classes will report they have increased knowledge and/or learned something new from the course taken.	Performance measure is self reported by each participant via a Student Evaluation Form.	95%
Oasis Rochester will serve a minimum of 810 older adults age 60 and over via recreation / education classes / events annually	Conducting 810 units of service	1536

1. Accomplishments in 2025.26

What accomplishments has Oasis Rochester achieved in the past year?

Continuing to be responsive to the needs and interests of members by providing stimulating, educational and rewarding.

Adding additional offerings to help improve health and fitness, including classes to strengthen bones, core muscles, balance and falls prevention.

Providing the opportunity for participants to take classes stemming from Oasis centers across the United States.

Reaching out to older adult living communities to bring simulcasted classes to facilities.

Forged partnership with Episcopal Senior Life Communities to share content and classes. Began conversation for Oasis Rochester to become a sponsored organization under ESLC.

2. Customer Satisfaction

Please provide source documents and results from actual clients served which indicates quality of services provided, i.e. Customer satisfaction survey, telephone follow up etc.

'Thank you for offering these educational opportunities.'

'I learn something new with every class I take.'

'Please keep offering classes with the T'ai Chi instructor.'

3. Indicators of Success (Client)

90% of older adults age 60 and over taking recreation / educational classes will report that they have increased knowledge and/or learned something from the course taken.

	a) Year 1 Projection	b) Year 1 Actual
Time Frame	**4/1/25 – 3/31/26**	**4/1/25 – 3/31/26**
Total number of People served	**825**	**778**
Number / % Successful		**95%**

IV. General Management: Contracts & Services

1. Staffing

1a. Does Oasis Rochester have adequate staff to perform the activities required under contract with MCOFA? Yes

No *If not, please explain the impact on the program or service and any steps being taken to improve staffing levels:*

1b. Does Oasis Rochester have a training plan designed to assist staff in carrying out assigned tasks? Yes

1c. Would a random check of Oasis Rochester personnel files verify the type of training actually provided for staff, including the date, the presenter and his/her qualifications, and the material covered? Yes

1d. Does Oasis Rochester comply with Affirmative Action and Equal Opportunity guidelines? Yes

1e. Is an EEOC sign posted in a prominent location? Yes, at reception desk and in break room

1f. Are reasonable accommodations made for staff and volunteers with disabilities? Yes

1g. Does the Oasis Rochester staffing pattern reflect the minority representation in the total population? Yes

1h. Can Oasis Rochester document outreach efforts to recruit targeted individuals to fill vacant positions? Yes

2. Administrative Provisions

1. Are Oasis Rochester staff activities consistent with prohibitions against participation in partisan activities? Yes

2. Are the facilities where Oasis Rochester services and activities take place free from political posters and other evidence of advancing one political candidate over another? Yes

3. Are the services carried out under MCOFA contract secular in nature?

   Yes

4. Has Oasis Rochester given due recognition to the US. Administration on Aging, the New York State Office for the Aging and Monroe County Office for the Aging, as appropriate, in program/service brochures, flyers and other printed materials? If yes, please provide samples of materials.

   Yes

5. Does Oasis Rochester have a written policy regarding retention of all MCOFA contracted program and fiscal records for six (6) years?

   Yes

6. What provisions has Oasis Rochester made to protect the confidentiality of customer (client) information?

   Database is on a secure server. All paperwork under lock and key.

7. Does Oasis Rochester have a system in place to allow customers (clients) to voluntarily and confidentially contribute to program services? Yes

7a. If so, how are these contributions utilized?

To enhance existing and future programming.

8. Does Oasis Rochester have a procedure that allows customers (clients) as well as applicants for services to present grievances on the denial of services? Yes

9. Does Oasis Rochester have a procedure to accept customer (client) feedback on service quality, service delivery methods, and service personnel? Yes

Please describe procedure: Course surveys are distributed and collected after the completion of every course. Members are encouraged to provide feedback and can do so anonymously.

10. Does Oasis Rochester have a policy and procedure in place to ensure that only eligible customers (clients) are served in MCOFA contracted programs? Yes

11. Does Oasis Rochester make service sites and program information accessible to persons with disabilities? Yes

12. Does Oasis Rochester solicit input from their customers and constituents, including customers and constituents that are frail, disabled, minority, and/or, on ways to make services more accessible and appealing to culturally diverse populations? Yes, Please describe procedure: Member surveys are provided after every course for feedback regarding current and future course specifics, audio/visual needs, building accessibility, etc.

3. Interagency Coordination

Describe Oasis Rochester procedure(s) for tracking referred customers' requests for assistance to other organizations when the need for such services is identified:

Recommendations for services beyond Oasis Rochester such as Lifespan, Alzheimer's Association, etc. are made when needed.

Has Oasis Rochester worked effectively with other providers and organizations to facilitate coordination and minimize possible duplication of effort?

Yes, especially with Lifespan.

4. Service Promotion & Outreach

Indicate what regular means does Oasis Rochester employ to disseminate information to the public and approximately how often this occurs:

Catalog is mailed out 3x per year to extensive mailing list, delivered to libraries, doctor's offices, Lifespan, senior living facilities. Public service announcements on WJZR radio. Electronic, print media, social media, website use. Presentations given throughout the year to senior groups, church groups, health and wellness provides, etc. Identification of new members through Lifetime Care, Excellus and other partners. Oasis Rochester is connecting with representatives from Valley Manor, St. Ann, and Irondequoit Community Center to bring them classes offered by Oasis Rochester.

MCOFA Contract: Financial Monitoring-Inventory Control

Does Oasis Rochester maintain sufficient documentation for equipment purchased with MCOFA funds?

Funds are not used for equipment purchase.

Is the equipment purchased with MCOFA funds identified as such either in property records or fund codes marked on the property? N/A

Is the equipment purchased with MCOFA funds being used solely to benefit older persons (Unless costs are appropriately pro-rated)? N/A

Are staff who handle monies (with the exception of attorneys) bonded? Yes

Are two individuals involved in counting customer (client) contributions? Yes

Are individuals who are authorized to sign checks involved in processing invoices? No, handled by separate departments.

Are individuals who are authorized to sign check different from the person(s) who maintain payroll records? Yes

Is Oasis Rochester maintained registration as a Charitable Organization with the Department of State? Yes

Assessment Conclusion

In conveying general comments regarding Oasis Rochester overall assessment of service delivery and contract compliance, please address the following areas: Add MCOFA disclosure notice and the following language "If you cannot afford to contribute, scholarships are available on request." to the catalog/brochure.

Overall assessment of the strengths of Oasis Rochester:

AGENCY COMMENTS - Oasis Rochester provides lifelong learning opportunities, including health/wellness and volunteer opportunities available to all adults in the Rochester area. Goal is to help older adults age 50 and over live vibrant and healthy lives. The MCOFA program funds are targeted toward older adults age 60 and over. Oasis Rochester is exploring offering Vivo group classes, which are offered through the NYS Office for the Aging.

MCOFA COMMENTS - This program continues to provide high-quality programming and meaningful opportunities for older adults in our community. Participation numbers have improved compared with last year and continue to show a positive upward trend, demonstrating growing engagement and continued interest in the program.

Additional resources or technical assistance needed:

AGENCY COMMENTS - Oasis Rochester is continuing to approach independent living facilities to bring wellness education to older adults living in the community. Oasis Rochester will be partnering with Lifespan and other agencies to increase minority participation.

MCOFA COMMENTS - Oasis Rochester needs to make a more concerted effort in reaching the population that mirrors Monroe County as a whole. This program is currently underserving Black, Latino, and low-income minorities. Oasis Rochester's merger with Episcopal Senior Life Communities will allow them to provide additional

Recreation, Wellness, and educational classes and will allow them to serve more underserved populations.

Oasis Rochester does not currently collect financial information from participants because many participants are reluctant to provide this type of information. In addition, Oasis Rochester operates under the National Oasis organization and relies on the registration system managed by the national organization. Modifying the existing registration system to include questions related to participants' financial circumstances would therefore be challenging.

One potential approach Oasis Rochester could consider is incorporating additional demographic questions and broad, non-sensitive financial questions into its customer satisfaction survey. This would provide an opportunity to better understand the characteristics and needs of the populations served while minimizing the burden on participants and avoiding significant changes to the existing registration system.

Department of **Human Services**
Office for the Aging
Monroe County, New York

Adam Bello
County Executive

Thalia Wright
Commissioner

Steve Newcomb
Director

MEMO

TO: Steve Newcomb, Director
FROM: Leanne Rorick, Aging Services Administrator
DATE: May 25, 2026

SUBJECT: 2025 Annual Program Evaluation – Information & Assistance

I am pleased to share that the annual review of the Information and Assistance program reflects a successful service to Monroe County Office for the Aging callers and clients, with adherence to program standards.

At this time, no significant compliance concerns were identified.

CC: Steve Newcomb, Director
Enclosure: Annual Program and Service Assessment

435 E. Henrietta Road • 3rd Floor • Rochester, New York 14620
(585) 753-6280 • *fax*: (585) 753-6281 • *www.monroecounty.gov*

Department of Human Services
Office for the Aging
Monroe County, New York

Adam Bello
County Executive

Thalia Wright
Commissioner

Steve Newcomb
Director

June 12, 2026

Catholic Charities Community & Family Services
Attn: Jennifer McDermott, Director
87 North Clinton Ave
Rochester NY 14604

Dear Ms. McDermott:

On behalf of the Monroe County Office for the Aging, thank you for your time and collaboration during the recent annual program monitoring visit conducted June 10, 2026 at your agency for the Assisted Transportation for Older Adults program.

We appreciate the opportunity to review your program operations and to meet with your staff. The monitoring process is an important part of ensuring quality services for older adults and maintaining alignment with New York State Office for the Aging program requirements and the Older Americans Act.

At this time, no significant compliance concerns were identified.

Please extend our appreciation to your staff for their cooperation, openness, and dedication throughout the monitoring process. Their efforts are clearly reflected in the quality of services provided.

Should you have any questions regarding the annual program review, please do not hesitate to contact me. We value our partnership and look forward to continued collaboration in supporting older adults in our community.

Sincerely,

Leanne Rorick
Aging Services Administrator

Enclosure: 2025 Annual Program Evaluation: Assisted Transportation for Older Adults

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Monroe County Office for the Aging
Program Evaluation & Contract Compliance
2025

ANNUAL PROGRAM AND SERVICE ASSESSMENT

CATHOLIC CHARITIES FAMILY AND COMMUNITY SERVICES (CCFCS)

Programs: Assisted Transportation for Older Adults
Funding Source(s): Community Services for the Elderly (CSE)
Contract Amount: $142,048

Assessment Period: 4/1/2025- 3/31/2026

Assessment Date: June 10, 2026

MCOFA Monitor:	Leanne Rorick, Aging Services Administrator
Program Director:	Jennifer McDermott, Director
Program Contact(s):	Tea Papke, Program Administrator
On-site Visit Conducted:	June 10, 2026

I. Past Performance/Previous Recommendations

Review Findings/Units of Service

1. Were there findings from the prior year's monitoring that required corrective actions to address areas of non-compliance?

☐ Yes ☒ No

1a. If yes, were all findings from MCOFA's previous monitoring efforts satisfactorily addressed? N/A

II. Service Activity Review

Units of Service

Catholic Charities Family and Community Services (CCFCS) Service Type	Projected Units: One-way Trips	Actual Units: One-way Trips	% of Projection
Assisted Transportation	4381	4084	93.2%

2a. Describe reason(s) for any variance: Please see comment below.

Persons Served

CCFCS Service Type	Projected: Number of unduplicated persons	Actual: Number of unduplicated persons	% of Projection
Assisted Transportation	350	296	84.5%

3a. Describe reason(s) for any variance:

During the year we had multiple people on medical leave. However, even though the number of people requiring Assisted Transportation funded through CSE money was lower than projected, the number of people receiving transportation services across all of STAR was 455. In Peerplace on the Assisted Transport platform there are 8266 trips and 455 unduplicated people served because it includes the 'basic' trips funded by Unmet Needs. The number of clients served with Contacts far exceeded the projection and it is difficult to predict exactly what services people will need during a program year. Across all of STAR 965 unduplicated people were served.

Waiting Lists/Demand for Service

CCFCS Service Type	Waiting List Maintained?		If Yes, please state the reason (check all that apply)	# of referrals made to other Service Providers
Assisted Transportation	**Yes** ☒	**No** ☐	☒ Lack of Funding ☒ Lack of Staff ☐ Other (specify):	**Difficult to determine (especially for the transportation contract) but referrals were made to the Medicaid Transport, TRAC, heretothere.org website, and online shopping**

4a. Briefly explain the program's process/policy for maintaining a waiting list, or for demonstrating evidence of demand for services:

We keep a list of requested trips that are not able to be completed by the person's assigned driver called the Special Table. Towards the end of the program year we realized that we were at capacity and began telling callers that they could register but would not be assigned a driver at this time. As of 6/3/26, we ***have 98 people*** *waiting to register and to receive an assigned driver. Across the department the priority factors that we use when there are limited resources are if the person is over age 85, living alone, lower income, has limited natural supports, and difficulty with ADLS.*

III. Targeting Compliance

Populations Served

Assisted Transportation for Older Adults	Projected Number Served	Projected % of Total Served*	Actual Number Served	Actual % of Total Served
75-84 years	62	17.7%	236	79.7%
85 years and older	28	8%	60	20.2%
Hispanic	15	4.2%	24	8.1%
American Indian/Alaskan Native	1	.2%	1	.3%
Asian	8	2.2%	8	2.7%
Black or African American	34	9.5%	83	28%
White, not Hispanic	287	82.1%	181	61.1%
Native Hawaiian/Pacific Islander	1	.01%	1	.3%
Lives alone	158	45.1%	219	73.9%
Frail and/or Individuals with Disabilities	100	28.4%	272	91.8%
Low Income (below 150% of poverty)	60	17.3%	208	70%
Low Income Minority (below 150% of poverty)	10	2.9%	104	35%
Limited English Proficiency	20	5.5%	48	16.2%
Kinship Caregiver (55+)**	4	1%	2	.6%

Assisted Transportation for Older Adults	Projected Number Served	Projected % of Total Served*	Actual Number Served	Actual % of Total Served
Rural	28	8.1%	6	2%

**See Targeting and Equal Access section of the 2025-26 MCOFA Application.*
***NY Statewide Database does not provide this data point, as of the date of this report.*

5a. Explain the program's success to achieve to compliance with the targeting requirements under the Older American's Act and the current NYSOFA program instruction Equal Access to Services and Targeting Policy, to reach underserved and underrepresented populations.

Did the program achieve success in achieving minimum requirements in serving all populations?

☒ Yes ☐ No

If Yes, to what do you attribute your success?

Reputation, word of mouth, outreach in low-income communities, and diverse staff.

If No, share challenges or reasons for not reaching underserved and/or underrepresented groups, and describe the program's plan to address these challenges in the next contract year.

Except for the number of White non-Hispanic category which was low because the other categories were so high and they are not the targeted population. Kinship Caregivers and Rural participants were also low and we would like to discuss with MCOFA definitions and tracking of these categories.

Monitor Note: Outreach efforts were noted and will continue, and documentation for rural & kinship caregivers was discussed.

5b. Does the Agency provide equal access to persons with Limited English Proficiency (LEP) as detailed in Older Americans Act (OAA) of 1965 Section 307(a)(15); and consistent with the Civil Rights Act of 1964, Title VI, the Title VI regulations, and the NYS Human Rights Law; and aligned with the most current New York State Office for the Aging program instruction?

☒ Yes ☐ No

If Yes, please explain how the Agency meets these requirements.

We have the paperwork in other languages and/or the ability to translate and we have 24/7 access to a language line. We train staff annually how to use the line. We have a Spanish phone line for Spanish speakers.

If No, please state the reason and outline specific action plan to reach the objective.

5c. Does the program submitted monthly or quarterly Targeted Outreach Reports to MCOFA to track outreach activities throughout the contract year?

☒ Yes ☐ No

Comments: *We have met capacity for our program so outreach activities are a lower priority. We continue to participate in community fairs at lower income housing sites.*

IV. Financial & Administrative

Expenditures

6a. Contract expenditures:

CCFCS Service Type	Projected Expenditures	Actual Expenditures	% of Projection
Assisted Transportation for Older Adults	$142,048	$142,048	100%

6b. Describe reason(s) for any variances:

6c. Cost per Unit of service(s):

CCFCS Unit Type	Number of Units Recorded	Actual Expenditures	Average Cost Per Unit/Trip
Units/Trips	4084	$142,048	$34.78

6d. Do unit costs appear reasonable?

☒ Yes ☐ No

If no, please explain:

Client Contributions

7a. Does the organization have a system in place to allow clients to voluntarily and confidentially contribute to the cost of services?

☒ Yes ☐ No

Program contribution letter sample reviewed by Contract Monitor: ☒ ***Yes*** – *vehicle contribution poster* ☐ ***No***

Note: that it is rare that a contribution letter would go out to STAR participants because the request is made at the time of service.

7b. Does the program have a policy in place for accepting client contributions, which is aligned with and followed, according to the most current program instruction?

☒ Yes (making improvements) ☐ No

7c. Client contributions collected in the contract year:

Program	Annual Total of Client Contributions 4/1/2025-3/31/2026
Assisted Transportation for Older Adults	$5,151

7d. Please explain how client contributions were utilized in the program:

To expand direct services. The money collected was 100% used to pay for this program's expenses.

7e. Please share any challenges or successes in relation to client contributions:

Since funds are collected at the time of service it is challenging to keep the amounts anonymous because the client is signing a form as a receipt unless they want to put it in an envelope.

7f. General comments on Service Activity and Delivery:

CCFCS provides comprehensive services in a cost effective manner. We are community-based and committed to diversity and accessibility. This year was challenging because of extended staff leaves and significant retirements but we were thankful for

some one-time funds from the Rochester Community Foundation that helped to offset the loss of United Way funds.

Our program is unique because we provide 'door through door' service and we are able to meet individuals' varying needs. Our drivers are not just taxi drivers. They develop relationships and knowledge of their clients' needs and are able to refer clients to additional services when necessary. STAR also provides valuable relationships to clients who might otherwise have little contact with others. Staff are also trained about other local programs and agencies so they can make appropriate referrals. They work with Case Managers and share information on joint clients.

STAR prides itself on its Spanish-speaking component, and our high number of Spanish-speaking staff. We also utilize bilingual staff in languages common to the refugee population in Monroe County, and work with SORP (Services for Older Refugee Program), another program in our department (Dari, Ukrainian, Swahili, Arabic, & Nepali).

Financial Management & Inventory Control

8a. Does CCFCS maintain sufficient documentation for equipment purchased with MCOFA funds?

☒ Yes ☐ No

Documentation: *Receipts and agency inventory lists. However, it is rare to purchase equipment with MCOFA funds.*

8b. Is the equipment purchased with MCOFA funds identified as such either in property records or fund codes marked on the property?

☒ Yes ☐ No

Documentation: *We do label department equipment with the program name that purchased it if appropriate. With some additional direction, we will follow this guideline in the future.*

8c. Is the equipment purchased with MCOFA funds being used solely to benefit older persons (unless costs are appropriately pro-rated)?

☒ Yes ☐ No

It is rare to purchase equipment with these funds, but rather would use alternative sources such as client donations or our match funds. Anything purchased with program funds is used exclusively for Aging Services programs for people over age 60.

Contract Monitor review of inventory list: ☐ ***Yes*** ☐ ***No*** ☒ ***N/A***

Safeguarding Funds and the Protection of Assets

9a. Are the organization's staff who handle monies (with the exception of attorneys) bonded?

☐ Yes ☒ No

CCFCS is self-insured through the Catholic Charities. We have liability insurance for all employees, which covers malpractice and thefts.

9b. Are two individuals jointly involved in counting customer (client) contributions?

☒ Yes ☐ No

9c. Are individuals who are authorized to sign checks involved in processing invoices?

☐ Yes ☒ No

9d. Are individuals who are authorized to sign check different from the person(s) who maintain payroll records?

☒ Yes ☐ No

9e. Does the organization maintain registration as a Charitable Organization with the Department of State?

☒ Yes ☐ No

If no, does the organization qualify for an exemption from registration based on receiving under $25,000 annually in contributions and grants?

☐ Yes ☐ No N/A

V. General Management: Contracts & Services

Staffing

10a. Does CCFCS have adequate staff to perform the activities required under contract with MCOFA?

☒ Yes ☐ No

If not, please explain the impact on the program or service and any steps being taken to improve staffing levels:

The demand for services is stretching our resources. We are generally able to meet the contracted goals, but we are not able to meet all client requests. Our current trips are primarily for medical/health reasons; we are unable to consistently meet the need/requests for non-essential trips even though those additional trips may positively impact a person's health/mental health/quality of life.

10b. Does the program have a training plan designed to assist staff in carrying out assigned tasks?

☒ Yes ☐ No

Monitor has reviewed staff training records for this program. ☒ Yes ☐ No

10c. Would a random check of the Agency's personnel files verify the type of training actually provided for staff, including the date, the presenter and his/her qualifications, and the material covered?

☐ Yes ☒ No

Annual training is kept in a different system – Litmos. CCFCS is in the process of switching systems

Random personnel file reviewed by Contract Monitor during site visit. ☒ Yes ☐ No

10d. If staff includes case managers or aging in place consultants, does each have the required qualifications to perform these activities?

☐ Yes ☐ No ☒ Not applicable

10e. Does the Agency comply with Affirmative Action and Equal Opportunity guidelines?

☒ Yes ☐ No

10f. Is an Equal Employment Opportunity (EEO) sign posted in a prominent location?

☒ Yes ☐ No

If so, where? Staff kitchen

Confirmed by Contract Monitor during site visit. ☒ Yes ☐ No

10g. Are reasonable accommodations made for staff and volunteers with disabilities?

☒ Yes ☐ No

Such as: *signs, equipment, accessible buildings/restrooms, and HR policies*

10h. Does the organization's staffing pattern reflect the minority representation in the total population?

☒ Yes *(especially across the agency)* ☐ No

If no, please describe remedial efforts:

10i. Can the organization document outreach efforts to recruit targeted individuals to fill vacant positions?

☒ Yes ☐ No

Examples:

- *Targeted sourcing and outreach for qualified candidates based on education, credential, and experience in Indeed and LinkedIn Recruiter*
- *Targeted job fair and hiring event participation based on skills and field of study offered at that institution that match requirements for positions.*

Administrative Provisions

11a. Are staff activities consistent with prohibitions against participation in partisan activities?

☒ Yes ☐ No

11b. Are the facilities where elder services and activities take place free from political posters and other evidence of advancing one political candidate over another?

☒ Yes ☐ No

11c. Are the services carried out under MCOFA contract secular in nature?

☒ Yes ☐ No

11d. Has the organization given due recognition to the US. Administration on Aging, the New York State Office for the Aging and Monroe County Office for the Aging, as appropriate, in program/service brochures, flyers and other printed materials?

☒ Yes ☐ No

If yes, samples of materials were reviewed by Contract Monitor. ☒ Yes ☐ No

11e. Does the organization have a written policy regarding retention of all MCOFA contracted program and fiscal records for six (6) years?

☒ Yes ☐ No

11f. What provisions has the organization made to protect the confidentiality of client information? Please explain.

Locked files, locked rooms, use of release of information forms, detailed policy on confidentiality that is greatly emphasized in agency and department orientation and trainings. Staff participate in mandatory annual HIPAA training and IT safety related trainings.

Related policies include: CCFCS Policy 5038 Mutual Rights and Responsibilities and CCFCS Policy 5031 Client Information in Case Records and Case Files.

11g. Does the organization have a procedure that allows clients, as well as applicants for services, to present grievances about the denial of services?

☒ Yes ☐ No

11h. Does the organization have a procedure to accept client feedback on service quality, service delivery methods, and service personnel?

☒ Yes ☐ No

Describe the method of collection:

Customer Satisfaction Survey that is sent out throughout the year. Both the agency and the program utilizes this option.

If yes, sample was reviewed by Contract Monitor. ☒ Yes ☐ No

11i. Does the organization have a policy and procedure in place to ensure that only eligible individuals are served in MCOFA contracted programs?

☒ Yes Enrollment involves asking for DOB/Address. ☐ No

11j. Does the organization make service sites and program information accessible to persons with disabilities?

☒ Yes ☐ No

11k. Does the organization solicit input from their clients and constituents, including individuals who identify or are assessed as frail and/or disabled, on ways to make services more accessible and appealing to culturally diverse populations.

☒ Yes ☐ No

Please explain:

Questions related to this are included in the customer satisfaction survey.

VI. Reporting & Program Achievements

NY Statewide Client Data System and ContrackHQ Reporting

12a. Does the program provide correct and timely data entry for all required programmatic data into the designated NY Statewide Client Data System?

☒ Yes ☐ No

If not, explain:

12b. Does the program enter quarterly programmatic measures into ContrackHQ by the last day of the month following each quarter?

☒ Yes ☐ No

If not, explain:

Interagency Coordination

13a. Describe the organization's procedure(s) for tracking referred customers' requests for assistance to other organizations when the need for such services is identified.

This effort is tracked through the weekly client log, IMPOWR assessment forms, and case notes.

13b. Has the organization worked effectively with other providers and organizations to facilitate coordination and minimize possible duplication of effort?

☒ Yes ☐ No

13c. Check as many as apply to the program's coordination efforts:

☒ Participation in interagency meetings to plan and coordinate services
☒ Coordination of funding proposals with other human services organizations
☒ Coordination of referrals and follow-up transactions with other local service providers
☐ Development and implementation of a central assessment unit for services carried out by multiple agencies
☒ Working with other providers to update information of available services and eligibility
☒ Other coordinated activities: (please provide examples below):

Agency client database, IMPOWR, is helpful in determining other programs across our large agency that a person is connected.

Performance Outcomes and Enhancements

14a. Satisfaction Surveys

	Number of Surveys Distributed	**Number of Surveys Received**	**Percentage of Return – Satisfaction Surveys**
Satisfaction surveys	414 Across whole program	50	12%

	Projected Percentage of Satisfied Clients	**Actual Percentage of Satisfied Clients***
Satisfaction surveys	80%	86% (43/50 answered Strongly Agree)

**Percent of respondents will indicate program services improved their household stability within at least one of 6 areas of their life: Benefits & Services, Family Support or Social Connections, Financial, Housing, Personal Goals, and Treatment.*

	Projected Percentage who report a positive Net Promoter Score	Actual Percentage who report a positive Net Promoter Score*
Satisfaction surveys	80%	**91% (40/44 who answered this question)**

**Clients will self-report their satisfaction with the program and willingness to refer STAR to friends and family, for a positive Net Promoter Score*

14b. Please describe general trends in responses from clients based on survey results and other collected feedback.

People are grateful for the transportation and often mention the name of their driver which demonstrates the value of the ongoing 1:1 relationships developed through assigned the program procedure of using assigned drivers. The comments continue to mention the need for more help and sometimes express frustration about having to share drivers. For example, complaints that their driver is late or early because of needing to coordinate with other clients.

In terms of phone call feedback to the office, people have been concerned about the limited trips enforcement that the program had to implement because of the reduction in funding.

In the winter there are many cancelled and rescheduled appointments because of the weather which is frustrating for both the clients and the drivers.

The number of respondents to the survey was very low this past year compared to the percentage in the previous year, 36% to 12%, so we are in the process of investigating ways to improve response rate for the next program year. In June we are encouraging the drivers to use their tablets and an online link to get real time responses entered at the time of service.

14c. Please describe other outcomes tracked by program that demonstrate program's success:

The outcomes that are tracked and reported are the results of the satisfaction surveys (Satisfaction, Net Promoter Score, and whether or not they report the program has helped them with Household Stability). The comments from the surveys are also distributed to the team and reviewed for program improvement ideas.

Another related question on the survey is whether or not the transportation program helped them to maintain or improve their ability to get places outside the home and in 2025, 89% of the respondents said yes. Please note that the survey also went to participants who did not use the transportation option in STAR such as people who we shop FOR and people who only receive in home support contacts.

14d. Does the program solicit input from clients and constituents, including those who are frail, disabled, from underserved/underrepresented populations, and/or have low income, on ways to make services more accessible and appealing to culturally diverse populations?

☒ Yes ☐ No

Please describe:

We ask for this general input from everyone served but can fine tune this question in future surveys to specifically address appealing to culturally diverse populations.

14e. Were there any programmatic changes during the year that affected the scope or quality of service?

☐ Yes ☒ No

If yes, please describe briefly:

14f. Please describe any plans for continuous program improvement:

For 2026 we are looking at creating a central spreadsheet to keep track of any complaints phoned into the office in case there can be process improvements made in the future. At every program meeting we ask the team about ideas for improvements in service delivery.

Each month the department meets to review general aging related community information and we often have an outside speaker come to discuss some resource that is helpful to our participants.

We report to our agency board program outcomes and contract goal achievements 6 times a year and we meet regularly with agency administration to keep quality improvement efforts moving forward.

VII. Assessment Conclusion

AGENCY COMMENTS: Please describe your program's strengths and needs

Strengths: *Diverse and experienced staff, established structure, solid client base, focus on getting "better everyday" which is the department motto, & ability to provide a range of supports from curb-to-curb transportation to assisted door-through-door support including extensive in-home supports option.*

Needs: *Challenges involve efficient scheduling and the normal issues with traffic/weather/late appointments that affect driving services.*

MCOFA COMMENTS

Strengths: The CCFCS team has done extraordinarily well during this contract year, despite retirements and staffing changes. Efforts to monitor and communicate increasing demand for services, as well as efforts to develop proper recording of units and to reach underserved and underrepresented populations, are commendable. Through the collaborative efforts of all STAR programs, the team is able to maximize service and value to older people in the service area.

Needs: See above.

Compliance areas in need of attention: None.

Department of Human Services
Office for the Aging
Monroe County, New York

Adam Bello
County Executive

Thalia Wright
Commissioner

Steve Newcomb
Director

June 12, 2026

Catholic Charities Community & Family Services
Attn: Jennifer McDermott, Director
87 North Clinton Ave
Rochester NY 14604

Dear Ms. McDermott:

On behalf of the Monroe County Office for the Aging, thank you for your time and collaboration during the recent annual program monitoring visit conducted June 10, 2026 at your agency for the In Home Contact and Support for Older Adults program.

We appreciate the opportunity to review your program operations and to meet with your staff. The monitoring process is an important part of ensuring quality services for older adults and maintaining alignment with New York State Office for the Aging program requirements and the Older Americans Act.

At this time, no significant compliance concerns were identified.

Please extend our appreciation to your staff for their cooperation, openness, and dedication throughout the monitoring process. Their efforts are clearly reflected in the quality of services provided.

Should you have any questions regarding the annual program review, please do not hesitate to contact me. We value our partnership and look forward to continued collaboration in supporting older adults in our community.

Sincerely,

Leanne Rorick
Aging Services Administrator

Enclosure: 2025 Annual Program Evaluation: In Home Contact & Support for Older Adults

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Program Evaluation & Contract Compliance

2025

ANNUAL PROGRAM AND SERVICE ASSESSMENT

CATHOLIC CHARITIES FAMILY AND COMMUNITY SERVICES (CCFCS)

Programs: In Home Contact & Support for Older Adults

Funding Source(s):

Community Services for the Elderly (CSE): $142,048

Unmet Need: $487,974

Nutrition Services Incentive Program (NSIP): $3,128

Contract Amount: $633,150

Assessment Period: 4/1/2025- 3/31/2026

Assessment Date: June 10, 2026

MCOFA Monitor:	Leanne Rorick, Aging Services Administrator
Program Director:	Jennifer McDermott, Director
Program Contact(s):	Tea Papke, Program Administrator
On-site Visit Conducted:	June 10, 2026

I. Past Performance/Previous Recommendations

Review Findings/Units of Service

1. Were there findings from the prior year's monitoring that required corrective actions to address areas of non-compliance?

☐ Yes ☒ No

1a. If yes, were all findings from MCOFA's previous monitoring efforts satisfactorily addressed?

N/A

II. Service Activity Review

Units of Service

Catholic Charities Family and Community Services (CCFCS) Service Type	Projected Units	Actual Units	% of Projection
In Home Contact & Support Program TOTAL UNITS (all services)	**4,336: CSE 1,100: Unmet Need 5,436: Total**	**5,263**	**96.8%**
Friendly Visiting (contacts)	n/a	569	X
Shopping Assistance (contacts)	n/a	1448	X
Telephone Reassurance (contacts)	n/a	550	X
Other Contacts	n/a	2696	X
Home Delivered Meals (meals)	3000	768 per vouchers but 865 in Peerplace	28.8% - change in definition and goal mid year
Basic transportation (one-way trips)	4489	4182	93.1%
PERS (month)	240	326	135.8%

NOTE THESE PROJECTIONS ARE ALWAYS ESTIMATED AND FULLY DEPENDENT ON CLIENT REQUESTS			
Home Modifications (activity)	20	8	40%
Home Maintenance and Repairs (activity)	130	48	36.9%
Assistive Devices (item)	35	14	40%
Appliances (item)	40	42	105%
Personal Items/Consumable Supplies (each distribution)	110.86	153	138%

2a. Describe reason(s) for any variance:

The projections for what participants might need are always estimated and based on past experience but each year the actual numbers depend solely on that group of participants unique needs. The cost per unit varies widely.

Persons Served

CCFCS Service Type	Projected: Number of unduplicated persons	Actual: Number of unduplicated persons	% of Projection
In Home Contact & Support Program TOTAL Persons Served (all services)	**400**	**868 for Contacts (965 unduplicated across program for STAR)**	**217%**
Friendly Visiting	X	X	

Shopping Assistance	X	X	
Other Contacts	X	X	
Telephone Reassurance	X	X	
Home Delivered Meals	X	13	
Basic transportation	X	376	
PERS	X	21	
NOTE THESE PROJECTIONS ARE ALWAYS ESTIMATED AND FULLY DEPENDENT ON CLIENT REQUESTS			
Home Modifications	20	8	40%
Home Maintenance and Repairs	130	48	36.9%
Assistive Devices	35	14	40%

Appliances	**40**	**42**	105%
Personal Items/Consumable Supplies	**110.86**	**153**	138%

3a. Describe reason(s) for any variance: For several categories there was no prediction of the number of people to be served. The Contact categories became more defined throughout the year, as traditionally the contract was to provide general In-home Support Contacts according to what the person needed. In the future the Contacts will be more delineated.

The number of clients served with Contacts far exceeded the projection and it is difficult to predict exactly what services people will need during a program year. During the year we had multiple people on medical leave, but we had a push at the end of the program year to reach out to people who have not used the program recently and that really increased our number of people served. A significant number of the 868 people only received a couple of contacts. Across all of STAR 965 unduplicated people were served in some capacity.

Waiting Lists/Demand for Service

CCFCS Service Type	**Waiting List Maintained?**		**If Yes, please state the reason (check all that apply)**	**# of referrals made to other Service Providers**
GENERAL STAR SERVICES				**Across the program we did not have a waiting list for 2025-26 until the very end of the year when it was clear the next program year would not have the same resources. The drivers were at capacity so the program began an enrollment waitlist for all of the below listed services.**

CCFCS Service Type	Waiting List Maintained?		If Yes, please state the reason (check all that apply)	# of referrals made to other Service Providers
Friendly Visiting	**Yes** ☒	**No** ☐	☒ Lack of Funding ☒ Lack of Staff ☐ Other (specify):	
Shopping Assistance	**Yes** ☒	**No** ☐	☒ Lack of Funding ☒ Lack of Staff ☐ Other (specify):	
Other Contacts	**Yes** ☒	**No** ☐	☒ Lack of Funding ☒ Lack of Staff ☐ Other (specify):	**This is the category where we track when a staff person makes a referral to a community resource or arranges a service. It is not easy to extrapolate the number of referrals made in a year, but approximately 100 people were assisted to getting linked to a different service**
Telephone Reassurance	**Yes** ☒	**No** ☐	☒ Lack of Funding ☒ Lack of Staff ☐ Other (specify):	
Home Delivered Meals	**Yes** ☒	**No** ☐	☒ Lack of Funding ☒ Lack of Staff ☐ Other (specify):	
Basic transportation	**Yes** ☒	**No** ☐	☒ Lack of Funding ☒ Lack of Staff ☐ Other (specify):	
PERS	**Yes** ☒	**No** ☐	☒ Lack of Funding ☒ Lack of Staff ☐ Other (specify):	

CCFCS Service Type	Waiting List Maintained?		If Yes, please state the reason (check all that apply)	# of referrals made to other Service Providers
In home Support PURCHASES (Home modifications, Home Repair/Maintenance, Appliances, AssistiveEquipment, Consumable/Personal supplies)	**Yes** ☒	**No** ☐	☒ Lack of Funding ☒ Lack of Staff ☐ Other (specify):	

4a. Briefly explain the program's process/policy for maintaining a waiting list, or for demonstrating evidence of demand for services:

We keep a list of requested that are not able to be completed the person's assigned Specialist called the Special Table. This is where we try to coordinate with our per diem team to meet all of the requests for Shopping Assistance and Basic Transports. We will often work with the person to reschedule appointments if they have no other option and the program is limited by resources.

Towards the end of the program year we realized that we were at capacity and began telling callers that they could register but would not be assigned a driver at this time. As of 6/3/26, we ***have 98 people*** *waiting to register and to receive an assigned driver. Across the department the priority factors that we use when there are limited resources are if the person is over age 85, living alone, lower income, has limited natural supports, and difficulty with ADLS.*

III. Targeting Compliance

Populations Served

In Home Contact and Support for Older Adults	Projected Number Served	Projected % of Total Served*	Actual Number Served	Actual % of Total Served
75-84 years	Min of 71	17.7%	309	35.5%

In Home Contact and Support for Older Adults	Projected Number Served	Projected % of Total Served*	Actual Number Served	Actual % of Total Served
85 years and older	Min of 32	8%	183	21%
Hispanic	Min of 17	4.2%	71	8.1%
American Indian/Alaskan Native	1	.2%	3	.3%
Asian	9	2.2%	13	1.5%
Black or African American	38	9.5%	250	28.8%
White, not Hispanic	328	82.1%	518	59.6%
Native Hawaiian/Pacific Islander	0	.01%	3	.3%
Lives alone	180	45.1%	582	67%
Frail and/or Individuals with Disabilities	114	28.4%	772	88.9%
Low Income (below 150% of poverty)	Min of 69	17.3%	276	31.7%
Low Income Minority (below 150% of poverty)	12	2.9%	281	32.3%
Limited English Proficiency	22	5.5%	82	9.4%
Kinship Caregiver (55+)	4	1%	3?	.3%
Rural	32	8.1%	16	1.8%

**See Targeting and Equal Access section of the 2025-26 MCOFA Application*

5a. Explain the program's success to achieve to compliance with the targeting requirements under the Older American's Act and the current NYSOFA program instruction Equal Access to Services and Targeting Policy, to reach underserved and underrepresented populations.

Did the program achieve success in achieving minimum requirements in serving all populations?

☒ Yes ☐ No

If Yes, to what do you attribute your success?

Except for the number of White non-Hispanic category which was low because the other categories were so high and they are not the targeted population. While our number of Asian participants exceeded the projected goal, the percentage of the total served was low per the census.

If No, share challenges or reasons for not reaching underserved and/or underrepresented groups, and describe the program's plan to address these challenges in the next contract year.

Monitor Note: Outreach efforts were noted and will continue, and documentation for rural & kinship caregivers was discussed.

5b. Does the Agency provide equal access to persons with Limited English Proficiency (LEP) as detailed in Older Americans Act (OAA) of 1965 Section 307(a)(15); and consistent with the Civil Rights Act of 1964, Title VI, the Title VI regulations, and the NYS Human Rights Law; and aligned with the most current New York State Office for the Aging program instruction?

☒ Yes ☐ No

If Yes, please explain how the Agency meets these requirements.

We have the paperwork in other languages and/or the ability to translate and we have 24/7 access to a language line. We train staff annually how to use the line. We have a Spanish phone line for Spanish speakers.

If No, please state the reason and outline specific action plan to reach the objective.

5c. Does the program submitted monthly or quarterly Targeted Outreach Reports to MCOFA to track outreach activities throughout the contract year?

☒ Yes ☐ No

Comments: *However, please note that when the program is at capacity outreach for the purpose of soliciting more participants is a low priority. We continue to participate in community fairs at lower income housing sites.*

IV. Financial & Administrative

Expenditures

6a. Contract expenditures:

CCFCS Service Type	Projected Expenditures	Actual Expenditures	% of Projection
In Home Contact & Support for Older Adults **TOTAL Program Budget**	**$633,150**	**$603,347**	**95%**
CSE	$142,048	$142,048	100%
Unmet Need	$487,974	$461,299	94.5%
NSIP	$3,128	$3128	100%

6b. Describe reason(s) for any variances:

Some of the additional Unmet Needs monies ($26,676) were unable to be expended in the short time allotted but the program will fully expend during the 3 month extension (by June 30, 2026).

6c. Cost per Unit of service(s):

CCFCS Unit Type	Number of Units Recorded	Actual Expenditures	Average Cost Per Unit
Friendly Visiting (contacts)	567	*not tracked by category this way this year All Contact funds combined CSE/Unmet = 142048+~110576=~$ 252624	~$252,624/5263 units= ~$48
Shopping Assistance (contacts)	1448	*	*

Telephone Reassurance (contacts)	550	*	*
Other Contacts	2696	*	*
Meal Delivery Services – previously Home Delivered Meals (meals)	865	~$9,105	10.52
Basic transportation (one-way trips)	4182	~$173,869	$42.05
PERS (month)	326	~$10,122+	$31.05
Home Modifications (activity)	8	~$30,361	$3795
Home Maintenance and Repairs (activity)	48	~$105,248	$2192
Assistive Devices (item)	14	~$23,483	$1677
Appliances (item)	42	~$31,640	$753
Personal Items/Consumable Supplies (each distribution)	153	$7,972	$52

**Data not captured to reflect individual service types in this contract year due to NY Statewide Database inability to separate units by categories listed above.*

6d. Do unit costs appear reasonable?

☒ Yes ☐ No

If no, please explain:

Note: NSIP ineligible Home Delivered Meals recording changed mid-year and shifted to meal delivery service, recorded as consumables.

Client Contributions

7a. Does the organization have a system in place to allow clients to voluntarily and confidentially contribute to the cost of services?

☒ Yes ☐ No

Program contribution letter sample reviewed by Contract Monitor: ☒ Yes ☐ No

7b. Does the program have a policy in place for accepting client contributions, which is aligned with and followed, according to the most current program instruction?

☒ Yes ☐ No

7c. Client contributions collected in the contract year:

Program	Annual Total of Client Contributions 4/1/2025-3/31/2026
In Home Contact & Support for Older Adults	$16,288.47

7d. Please explain how client contributions were utilized in the program:

To expand direct services. The money collected was 100% used to pay for this program's expenses.

7e. Please share any challenges or successes in relation to client contributions:

Challenges shared by staff include 1) the program serves low-income individuals who have difficulty with the resources to give, 2) signs in vehicles were initially awkward for drivers, who use their personal vehicles. Despite these challenges, contributions were secured and compliance was noted.

7f. General comments on Service Activity and Delivery:

CCFCS provides comprehensive services in a cost effective manner. We are community-based and committed to diversity and accessibility. This year was challenging because of extended staff leaves and significant retirements but we were thankful for some one-time funds from the Rochester Community Foundation that helped to offset the loss of United Way funds.

Our program is unique because we provide 'door through door' service and comprehensive in-home supports so we are able to meet individuals' varying needs. The staff develop relationships and knowledge of their clients' needs and are able to refer clients to additional services when necessary. STAR also provides valuable relationships to clients who might otherwise have little contact with others. Staff are also trained about other local programs and agencies so they can make appropriate referrals. They work with Case Managers and share information on joint clients.

STAR prides itself on its Spanish-speaking component, and our high number of Spanish-speaking staff. We also utilize bilingual staff in languages common to the refugee population in Monroe County, and work with SORP (Services for Older Refugee Program), another program in our department (Dari, Ukrainian, Swahili, Arabic, & Nepali).

Financial Management & Inventory Control

8a. Does CCFCS maintain sufficient documentation for equipment purchased with MCOFA funds?

☒ Yes ☐ No

Documentation: *Receipts and agency inventory lists are maintained, when applicable. However, it is rare to purchase equipment with MCOFA funds.*

8b. Is the equipment purchased with MCOFA funds identified as such either in property records or fund codes marked on the property?

☒ Yes ☐ No

Documentation: *We do label department equipment with the program name that purchased it, when appropriate.*

8c. Is the equipment purchased with MCOFA funds being used solely to benefit older persons (unless costs are appropriately pro-rated)?

☒ Yes ☐ No

It is rare to purchase equipment with these funds, but rather would use alternative sources such as client donations or our match funds. Anything purchased with program funds is used exclusively for Aging Services programs for people over age 60.

Contract Monitor review of inventory list: ☐ Yes ☐ No ☒ N/A

Safeguarding Funds and the Protection of Assets

9a. Are the organization's staff who handle monies (with the exception of attorneys) bonded?

☐ Yes ☒ No

CCFCS is self-insured through the Catholic Charities. We have liability insurance for all employees, which covers malpractice and thefts.

9b. Are two individuals jointly involved in counting customer (client) contributions?

☒ Yes ☐ No

9c. Are individuals who are authorized to sign checks involved in processing invoices?

☐ Yes ☒ No

9d. Are individuals who are authorized to sign check different from the person(s) who maintain payroll records?

☒ Yes ☐ No

9e. Does the organization maintain registration as a Charitable Organization with the Department of State?

☒ Yes ☐ No

If no, does the organization qualify for an exemption from registration based on receiving under $25,000 annually in contributions and grants?

☐ Yes ☐ No NA

V. General Management: Contracts & Services

Staffing

10a. Does CCFCS have adequate staff to perform the activities required under contract with MCOFA?

☒ Yes ☐ No

If not, please explain the impact on the program or service and any steps being taken to improve staffing levels:

The demand for services is stretching our resources. We are generally able to meet the contracted goals, but we are not able to meet all client requests. Service coordination is becoming increasingly more demanding for challenging situations; community resources are utilized, when appropriate, for some cases.

10b. Does the program have a training plan designed to assist staff in carrying out assigned tasks?

☒ Yes ☐ No

Monitor has reviewed staff training records for this program. ☒ Yes ☐ No

10c. Would a random check of the Agency's personnel files verify the type of training actually provided for staff, including the date, the presenter and his/her qualifications, and the material covered?

☐ Yes ☒ No

Random personnel file reviewed by Contract Monitor during site visit. ☒ Yes ☐ No

Annual training is kept in a different system – Litmos. CCFCS is in the process of switching systems

10d. If staff includes case managers or aging in place consultants, does each have the required qualifications to perform these activities?

☐ Yes ☐ No ☒ Not applicable

10e. Does the Agency comply with Affirmative Action and Equal Opportunity guidelines?

☒ Yes ☐ No

10f. Is an Equal Employment Opportunity (EEO) sign posted in a prominent location?

☒ Yes ☐ No

If so, where?

Confirmed by Contract Monitor during site visit. ☒ Yes ☐ No

10g. Are reasonable accommodations made for staff and volunteers with disabilities?

☒ Yes ☐ No

Such as: *signs, equipment, accessible buildings/restrooms, and HR policies*

10h. Does the organization's staffing pattern reflect the minority representation in the total population?

☒ Yes *(especially across the agency)* ☐ No

If no, please describe remedial efforts:

10i. Can the organization document outreach efforts to recruit targeted individuals to fill vacant positions?

☒ Yes ☐ No

Examples:

- *Targeted sourcing and outreach for qualified candidates based on education, credential, and experience in Indeed and LinkedIn Recruiter*
- *Targeted job fair and hiring event participation based on skills and field of study offered at that institution that match requirements for positions.*

Administrative Provisions

11a. Are staff activities consistent with prohibitions against participation in partisan activities?

☒ Yes ☐ No

11b. Are the facilities where elder services and activities take place free from political posters and other evidence of advancing one political candidate over another?

☒ Yes ☐ No

11c. Are the services carried out under MCOFA contract secular in nature?

☒ Yes ☐ No

11d. Has the organization given due recognition to the US. Administration on Aging, the New York State Office for the Aging and Monroe County Office for the Aging, as appropriate, in program/service brochures, flyers and other printed materials?

☒ Yes ☐ No

If yes, samples of materials were reviewed by Contract Monitor. ☒ Yes ☐ No

11e. Does the organization have a written policy regarding retention of all MCOFA contracted program and fiscal records for six (6) years?

☒ Yes ☐ No

11f. What provisions has the organization made to protect the confidentiality of client information? Please explain.

Locked files, locked rooms, use of release of information forms, detailed policy on confidentiality that is greatly emphasized in agency and department orientation and trainings. Staff participate in mandatory annual HIPAA training and IT safety related trainings.

Related policies include: CCFCS Policy 5038 Mutual Rights and Responsibilities and CCFCS Policy 5031 Client Information in Case Records and Case Files.

11g. Does the organization have a procedure that allows clients, as well as applicants for services, to present grievances about the denial of services?

☒ Yes ☐ No

11h. Does the organization have a procedure to accept client feedback on service quality, service delivery methods, and service personnel?

☒ Yes ☐ No

Describe the method of collection:

Customer Satisfaction Survey that is sent out throughout the year. Both the agency and the program utilizes this option.

11i. Does the organization have a policy and procedure in place to ensure that only eligible individuals are served in MCOFA contracted programs?

☒ Yes Enrollment involves asking for DOB/Address. ☐ No

11j. Does the organization make service sites and program information accessible to persons with disabilities?

☒ Yes ☐ No

11k. Does the organization solicit input from their clients and constituents, including individuals who identify or are assessed as frail and/or disabled, on ways to make services more accessible and appealing to culturally diverse populations.

☒ Yes ☐ No

Please explain:

Questions related to this are included in the customer satisfaction survey.

VI. Reporting & Program Achievements

NY Statewide Client Data System and ContrackHQ Reporting

12a. Does the program provide correct and timely data entry for all required programmatic data into the designated NY Statewide Client Data System?

☒ Yes ☐ No

If not, explain:

12b. Does the program enter quarterly programmatic measures into ContrackHQ by the last day of the month following each quarter?

☒ Yes ☐ No

If not, explain:

Interagency Coordination

13a. Describe the organization's procedure(s) for tracking referred customers' requests for assistance to other organizations when the need for such services is identified.

This effort is tracked through the weekly client log, IMPOWR assessment forms, and case notes and the referrals generated by our staff are tracked as in-home contacts as task assistance activities.

13b. Has the organization worked effectively with other providers and organizations to facilitate coordination and minimize possible duplication of effort?

☒ Yes ☐ No

13c. Check as many as apply to the program's coordination efforts:

☒ Participation in interagency meetings to plan and coordinate services
☒ Coordination of funding proposals with other human services organizations
☒ Coordination of referrals and follow-up transactions with other local service providers
☐ Development and implementation of a central assessment unit for services carried out by multiple agencies
☒ Working with other providers to update information of available services and eligibility
☒ Other coordinated activities: (please provide examples below):

Agency client database, IMPOWR, is helpful in determining other programs across our large agency that a person is connected.

Performance Outcomes and Enhancements

14a. Satisfaction Surveys

	Number of Surveys Distributed	**Number of Surveys Received**	**Percentage of Return – Satisfaction Surveys**
Satisfaction surveys	414 Across whole program	50	12%

	Projected Percentage of Satisfied Clients	**Actual Percentage of Satisfied Clients***

Satisfaction surveys	80%	86% (43/50 answered 'strongly agree')

**Percent of respondents will indicate program services improved their household stability within at least one of 6 areas of their life: Benefits & Services, Family Support or Social Connections, Financial, Housing, Personal Goals, and Treatment.*

	Projected Percentage who report a positive Net Promoter Score	**Actual Percentage who report a positive Net Promoter Score***
Satisfaction surveys	80%	**91% (40/44 who answered this question)**

**Clients will self-report their satisfaction with the program and willingness to refer STAR to friends and family, for a positive Net Promoter Score.*

14b. Please describe general trends in responses from clients based on survey results and other collected feedback.

People are grateful for the support and often mention the name of their Specialist which demonstrates the value of the ongoing 1:1 relationships developed through assigned the program procedure of using assigned staff. The comments continue to mention the need for more help and economic struggles.

In terms of phone call feedback to the office, people have been concerned about the limited trips enforcement that the program had to implement because of the reduction in funding. Some clients struggle with the shopping for heavy items. For example, the program has had to limit the number of heavy cases that they can deliver because of the risk of staff injury.

In the winter there are many cancelled and rescheduled appointments because of the weather which is frustrating for both the clients and the drivers.

The number of respondents to the survey was very low this past year compared to the percentage in the previous year, 36% to 12%, so we are in the process of investigating ways to improve response rate for the next program year. In June we are encouraging the Specialists to use their tablets and an online link to get real time responses entered at the time of service.

14c. Please describe other outcomes tracked by program that demonstrate program's success:

The outcomes that are tracked and reported are the results of the satisfaction surveys (Satisfaction, Net Promoter Score, and whether or not they report the program has helped them with Household Stability). The comments from the surveys are also distributed to the team and reviewed for program improvement ideas.

14d. Does the program solicit input from clients and constituents, including those who are frail, disabled, from underserved/underrepresented populations, and/or have low income, on ways to make services more accessible and appealing to culturally diverse populations?

☒ Yes ☐ No

Please describe:

We ask for this general input from everyone served but can fine tune this question in future surveys to specifically address appealing to culturally diverse populations.

14e. Were there any programmatic changes during the year that affected the scope or quality of service?

☐ Yes ☒ No

If yes, please describe briefly: *However the unit definitions and tracking in Peerplace did change the programs collection and counting of units mid year.*

14f. Please describe any plans for continuous program improvement:

For 2026 we are looking at creating a central spreadsheet to keep track of any complaints phoned into the office in case there can be process improvements made in the future. At every program meeting we ask the team about ideas for improvements in service delivery.

Each month the department meets to review general aging related community information and we often have an outside speaker come to discuss some resource that is helpful to our participants.

We report to our agency board program outcomes and contract goal achievements 6 times a year and we meet regularly with agency administration to keep quality improvement efforts moving forward.

We are piloting an initiative with other agency staff to get matched to a willing STAR participant in their neighborhood to provide friendly visiting, shopping assistance (for) and telephone reassurance. We would train these 'staff volunteers' and provide support and reimburse them for mileage. We are trying to be as efficient with limited resources in order to help as many people in Monroe County as possible.

VII. Assessment Conclusion

AGENCY COMMENTS: Please describe your program's strengths and needs

Strengths: *Diverse and experienced staff, established structure, solid client base, focus on getting "better everyday" which is the department motto, & ability to provide a range of supports from curb-to-curb transportation to assisted door-through-door support including extensive in-home supports option.*

Needs: *Challenges involve efficient staff scheduling and the normal issues with client and staff illness/traffic/weather that affect community based services. An area of concern is how to support people with hoarding disorders or very complex housing and mental health issues.*

MCOFA COMMENTS

Strengths: The CCFCS team has done extraordinarily well during this contract year, despite retirements and staffing changes. Efforts to monitor and communicate increasing demand for services, to adjust to changing state reporting nuances, as well as efforts to effectively reach underserved and underrepresented populations, are commendable. Through the collaborative efforts of all STAR programs, the team is able to maximize service and value to older people in the service area.

Needs: Support for complex situations is an ongoing challenge for this program; continued referrals and coordination with case management programs and similar services are recommended.

Compliance areas in need of attention: None.

Department of **Human Services**
Office for the Aging
Monroe County, New York

Adam Bello
County Executive

Thalia Wright
Commissioner

Steve Newcomb
Director

October 8, 2026

Sacha Rios
859 N. Clinton Ave
Rochester, NY 14605

Dear Sacha,

Attached for your records is the completed 2025-26 Annual Program Evaluation for the Monroe County Office for the Aging (MCOFA) funded Senior Center Nutrition Program. The senior center contract is doing well. For comments related to each program and its specific objectives, please read through the evaluation. You may find additional general comments related to the program on the final page of the evaluation.

Thank you for continuing to provide these valued services to our community's older adult population.

Should you have any questions regarding the evaluation, please do not hesitate to contact me at 753-5566.

Sincerely,

Tracy Collins

cc: Monroe County Office for the Aging –Steve Newcomb, Leanne Rorick

Encl: Annual Program and Service Assessment

Monroe County Office for the Aging
Program Evaluation & Contract Compliance
2025-26

ANNUAL PROGRAM AND SERVICE ASSESSMENT

IBERO American Action League
Centro De Oro Seniors Program

859 N. Clinton Ave Rochester NY 14605

Program Representative/Coordinator: Sacha K Rios
Phone: 585-256-8900 Ext. 657
Fax: 585-472-9889
Email: sacha.rios@iaal.org

Funding Period: April 1, 2025 - March 31, 2026
4/1/2025 - 3/31/2026 = WIN
4/1/2025 - 3/31/2026 = CSE
1/1/2025 - 12/31/2025 = CSI

Evaluation Date: 9/29/26
MCOFA Monitor: Tracy Collins

An Annual Evaluation by the Area Agency on Aging (MCOFA) is required by the Older Americans Act. The primary purpose of this evaluation is to review the contract and to ensure that all policies and practices are in compliance with applicable laws and requirements.

Contents:

I.	Contract Budgets
II.	Program Goals
III.	Service Activity Review
IV.	Program Compliance
V.	Conclusions

I. Contract Budget and Service Overview

Congregate Meal Program and Outreach

Contract Period:		April 1, 2025-March 31, 2026	Original [1]
Amount of Contract		#1. Total Budget:	**1) $ 150,019**
Composed of		#2. Anticipated Contributions: #3. Nutrition Services Incentive (NSIP) #4. Subcontractor Match: #5. MCOFA Funds:	**2) $ 7,070** **3) $ 7,081** **4) $ 0** **5) $ 135,868**
AIP	**Total Cost**	#6. Congregate Meals	**6) $ 145,019**
	Units	#7. Allocated Meals	**7) 18,400**
	Unit Cost	#8. Total meal cost: *(#6) divided by allocated meals (#7)*	**8) $ 7.88**
AIP	**Total Cost**	#9. Outreach	**9) $ 5,000**
	Units	#10. Allocated Outreach	**10) 125**
	Unit Cost	#11. Total Outreach Cost *(#9) divided by allocated meals (#10)*	**11) $ 40.00**
Funding Sources		OAA, WIN: Wellness in Nutrition	

Senior Recreation and Education

Contract Period:		April 1, 2025-December 31, 2025	Original
Amount of Contract		#1. Total Budget:	**1) $ 39,650**
Composed of		#4. Subcontractor Match: #5. MCOFA Funds:	**4) $ 9,788** **5) $ 29,362**
AIP	**Total Cost**	#6. Senior Rec and Ed	**6) $ 39,650**
	Units	#7. Allocated Units	**7) 1,000**
	Unit Cost	#8. Total unit cost: *(#6) divided by allocated meals (#7)*	**8) $ 39.65**
Funding Sources		CSE: Community Services for the Elderly	

Senior Recreation and Education

Contract Period:		April 1, 2025-December 31, 2025	Original [1]
Amount of Contract		#1. Total Budget:	**1) $ 1,131**
Composed of		#4. Subcontractor Match: #5. MCOFA Funds:	**4) $ 283** **5) $ 848**
AIP	**Total Cost**	#6. Senior Rec and Ed	**6) $ 1,131**
	Units	#7. Allocated Units	**7) 5**
	Unit Cost	#8. Total unit cost: *(#6) divided by allocated meals (#7)*	**8) $ 226.20**
Funding Sources		Congregate Service Initiative (CSI)	

II. Program Goals

To provide individuals aged 60 and over with a balanced meal(s), socialization opportunities, and activities to support mental and physical well-being. Services help participants maintain health, independence, and remain in their homes as long as possible.

1. Performance Projections and Outcomes

A. **Performance Measurement-Eligible Breakfast Meals Served** is the total number of eligible meals served during the contract year. Eligible meals are considered those meals served to individuals aged 60 and over, their spouses, their disabled and dependent children, and volunteers assisting with the nutrition program.

See [1]Program Year Application Outcome Objective #2 and [2]Peer Place Program Year Served Client Summary Report

Indicator of success: The total number of breakfast meals served meets or exceeds annual projections, with success indicated by achieving at least 90% of the projected goal by year-end.

		Assessment Year Projection[1]	Assessment Year Actual[2]	Current Year Projection[1]
Time frame		4/1/25-3/31/26	4/1/25-3/31/26	4/1/26-3/31/27
Eligible Meals Served		8,400	6,450	7,000
% Successful		90%	76.8%	90%

B. **Performance Measurement-Eligible Lunch Meals Served** is the total number of eligible meals served during the contract year. Eligible meals are considered those meals served to individuals aged 60 and over, their spouses, their disabled and dependent children, and volunteers assisting with the nutrition program.

Indicator of success: The total number of lunch meals served meets or exceeds annual projections, with success indicated by achieving at least 90% of the projected goal by year-end.

		Assessment Year Projection[1]	Assessment Year Actual[2]	Current Year Projection[1]
Time frame		4/1/25-3/31/26	4/1/25-3/31/26	4/1/26-3/31/27
Eligible Meals Served		10,000	6,744	8,000
% Successful		90%	67.4%	90%

C. **Performance Measurement- Participant Satisfaction Survey** Surveys are distributed annually to assess participants' opinions on program services.

See [1]Program Year Application Outcome Objective #3

Indicator of success: 90% or greater of participants respond positively to: "Has attending the center improved your quality of life?"

		Assessment Year Projection[1]	Assessment Year Actual[2]	Current Year Projection[1]
Time frame		4/1/25-3/31/26	4/1/25-3/31/26	4/1/26-3/31/27
Total # of Participants		55	55	55
% Satisfied		90%	97%	90%

Completed [2]Participant Satisfaction Analysis Attached

2. Past performance/Previous recommendation

A. Were there findings from the prior or current year that required corrective actions to address areas of non-compliance? ☐ YES ☒ NO

If yes, please describe:

B. Were all findings from MCOFA's previous monitoring efforts satisfactorily addressed?
☒ YES ☐ NO

III. Service Activity Review

1. <u>OUTCOME OBJECTIVE #1:</u> ***To provide services to those unserved and underserved older adults in greatest social or economic need, particularly those who are low-income, low-income minorities, older adults with limited English proficiency, Native Americans, and frail/persons with disabilities and older adults residing in rural areas, in accordance with their need for such services, and to meet specific objectives established by the MCOFA for providing services to the above groups within the Program Service Area (PSA).***

To ensure equal access for participation, services, activities, and informational sessions without regard to race, color, sex, religion, national origin, disability, sexual orientation, marital status, veteran and/or military status, immigration status, creed, domestic violence victim status, criminal history, gender identity, genetic predisposition or carrier status.

Effective April 1, 2025 the following 2025 poverty income guidelines are to be used in identifying low-income older adults. These will be updated for the contract year as soon as available.

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Poverty Income Guidelines

HOUSEHOLD SIZE	100%		125%		150%		185%	
	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly
1	15,650	1,304	19,563	1,630	23,475	1,956	28,953	2,413
2	21,150	1,763	26,438	2,203	31,725	2,644	39,128	3,261
3	26,650	2,221	33,313	2,776	39,975	3,331	49,303	4,109
4	32,150	2,679	40,188	3,349	48,225	4,019	59,478	4,956
For each additional person, add:	5,500 annual amount		6,875 annual amount		8,250 annual amount		10,175 annual amount	

	PROJECTED[1] Number of Unduplicated Persons to be served by program	ACTUAL[2] Number of Unduplicated Persons to be served by program	PROJECTED[1] Percentage of Persons to be served from total served: *based on Targeting	ACTUAL[2] Percentage of Persons to be served from total served: *based on Targeting
1. Total Unduplicated Persons to be served by program	75	63	100%	84%
Of the Total Persons from line 1.:				
a. 75-84 years	13	29	17.7%	46%
b. 85 years and older	6	12	8%	19%
Clients by Ethnicity:				
c. Hispanic	3	54	4.2 %	85.7%
Clients by Race:				
d. American Indian/Alaskan Native	0	0	.2%	0%
e. Asian	2	0	2.2%	0%
f. Black or African American	7	15	9.5 %	23.8%
g. Middle Eastern	N/A	0	N/A	0%
h. North African	N/A	0	N/A	0%
i. White not Hispanic	62	0	82.1 %	0%
j. Native Hawaiian/Pacific Islander	0	0	.01%	0%
Clients by Key Characteristics:				
k. Live alone	34	25	45.1%	39.7%
l. Frail and/or Individuals with Disabilities	21	20	28.4 %	31.7%
m. Low Income (below 150% of poverty)	13	42	17.3 %	66.7%
n. Low Income Minority (below 150% of poverty)	2	33	2.9%	52.4%
o. Limited English Proficiency	4	34	5.5%	54%
p. Rural*	6	0	8.1%	0%
COMMENTS:	***Local Rural**			

1. Program Year Application Outcome Objective #1
2. From Peer Place Program Year Served Client Summary Report.

2. **OUTCOME OBJECTIVE #2:** ***To serve nutritious meals that meet 1/3 the Dietary Reference Intake per meal for meals served during the contract year. Eligible meals are considered those meals served to individuals over 60, their spouses, their disabled and dependent children, and volunteers at the center who assist in the nutrition program.***

A. To serve [8,400] total eligible breakfast meals by 3/31/26.
Daily average of [34]; # of Days Open for breakfast [247]
Program Year Application
Actual Daily average of [28]; Actual # of Days Open [234]
Viewbuilder Event Profile Meals View; Does not include Shelf Stable Meals
1. Actual # of eligible Congregate meals served: [6,450]; [76.8]%.

2. Objective met (90%of projection served)? ☐ YES ☒ NO

B. To serve [10,000] total eligible meals by 3/31/26.
Daily average of [40]; # of Days Open for lunch [247]
Program Year Application
Actual Daily average of [29]; Actual # of Days Open [226]
Viewbuilder Event Profile Meals View; Does not include Shelf Stable Meals
1. Actual # of eligible Congregate meals served: [6,664]; [66.7%]%.

2. Objective met (90%of projection served)? ☐ YES ☒ NO

If successful in reaching this objective, to what do you contribute your success? If performance is below objective, state reasons and outline Corrective Action Plan to reach objective:

The objective was not met. Participation was affected by changes in our participant population and by the number of days the program was able to operate. Since moving to our current location, we have experienced natural changes in participation, including participants passing away, moving farther from the program, and experiencing illness or other circumstances that prevent them from attending regularly.

The original meal projections were also higher than what we were able to consistently provide and serve. For breakfast, our Foodlink allocation is generally 30 meals per day, rather than the 34 meals used in the original projection. In addition, holiday and weather-related closures reduced the number of days meals could be provided.

For the upcoming year, we have revised our projections to better reflect our actual meal capacity, participation patterns, and operating schedule. We will continue outreach and recruitment efforts, strengthen community referrals and partnerships, and monitor participation throughout the year. This will allow us to set realistic projections while continuing to increase access and participation as opportunities arise.

3. **OUTCOME OBJECTIVE #3: Participants will report that attending the center has improved their quality of life.**

A. See Table above (I. 1. B. Performance Measurement-Customer Satisfaction Survey).

B. Total Number of Recreation and Education activities offered to participants during contract year 4/1/24-3/31/25 [1,464].

C. Of the above total, number of CSI funded Recreation and Education activities offered to participants during contract year 4/1/24-3/31/25 [10].

D. Do you post your Activity Calendar in the Center in a visible location? Yes ☒ No ☐
1. Where is it posted?

Share multiple ways. Printed copies are posted in a visible location in the center, shared daily during morning news, reminders are posted on our Facebook page. Reminder calls.

E. Does your center have a newsletter? Yes ☒ No ☐

1. If yes, how often is it published? Quarterly.
2. Did you share a copy with the MCOFA Program Monitor? Yes ☐ No ☒
3. How do you share your Newsletter with the public?

Our newsletter is distributed directly to participants at the center, shared highlights through our social media and made available at outreach events.

F. Participants are given the opportunity to give feedback and input? Yes ☒ No ☐

Participants are actively engaged in providing input through circle discussions, structured committee meetings, and ongoing feedback opportunities.

G. Per the Satisfaction Survey (Completed Participant Satisfaction Analysis Attached)

1. Do participants report increased social opportunities? 97 %
2. Do participants report gaining knowledge or new skills? 97 %
3. Do Participants say they would recommend the center? 99 %

4. **OUTCOME OBJECTIVE #4: To provide outreach* to 125 unduplicated older persons per contract period.** Program Year Contract

G. Actual outreach recorded 194

Peer Place Program Year Served Client Summary Report

H. Outreach projection objective met? ☒ YES ☐ NO

If successful in reaching this objective, to what do you contribute your success? If performance is below objective, state reasons and outline Corrective Action Plan to reach objective:

Our success is due to strong community partnerships, participant referrals, and the welcoming, culturally responsive environment at Centro de Oro.

What tools/opportunities/community partners have you used in reaching unserved/underserved populations matching the demographics of Monroe County (see Demographics chart for populations with lower-than-expected attendance for reference)?

Centro de Oro serves under-represented older Latinos, by offering programs that address health, nutrition, social engagement, lifelong learning, and advocacy for participant well-being and security. We actively collaborate with community partners, including local colleges, hospitals and cultural organizations, to provide educational presentations, health screenings, support services, and targeted outreach ensure accessibility, while partnerships allow participants to connect with additional resources, reduce isolation, and engage in meaningful multigenerational and culturally relevant activities.

I. How many new participants have joined this contract year 4/1/25-3/31/26? 4
View builder Registration View

5. **OUTCOME OBJECTIVE #5: To have a waste factor of 5% or less.**
Program Year Contract
Waste Factor:

	Meals Ordered[1]	Meals Served[2]	% Waste[3]
Breakfast Waste Factor	7,080	6,450	8.9%

1. Program Year Waste Analysis Report – Goodwill Billing Report
2. Peer Place Program Year Served Client Summary Report, Does not include Special Events or Emergency Meals which are included in the Total Served for Outcome Objective Above)
3. Subtract 'served' from 'ordered'; divide by 'ordered' then multiple by 100

If above 5%, please state reasons and outline a plan to reach the goal.

Lunch Waste Factor is reported as 0%

The waste was primarily due to daily fluctuations in attendance, including last-minute cancellations, participant absences, illness, emergencies, weather, and program closures. Attendance can be difficult to anticipate, as not all absences are reported in advance. Moving forward, staff will continue to monitor attendance patterns and adjust meal orders as closely as possible to anticipated participation to reduce excess meals and food waste.

6. **CONTRIBUTIONS: To collect participant contributions, used to enhance the program.**
   Program Year Application
   A. Projected Contributions $ 7,070 in contract year 4/1/25-3/31/26.
      Projected per meal average of $ 0.38
      1. Program Year Fiscal Budgets

   B. Actual collected $ 6,254.61 in contract year 4/1/25-3/31/26.
      Actual per meal average of $ 0.48
      1. Program Year Fiscal Claims

   C. How were the contributions used to enhance the program?
      Contributions received are used to enhance the nutrition services offered to participants and support activities that promote healthy living. These contributions help improve meal quality, provide culturally relevant programming, and expand wellness initiatives that benefit the overall well-being of our community.

IV. Program Compliance[1]

1. Fire, Building & Health Code Compliance Procedures	Yes	No	Not Required	Comments
Site has fire emergency procedures that meet local fire codes and standards; participants and staff must be familiar with these	☒	☐	☐	Where? Folder in Office How are staff trained? Compliance Dept. trains annually; Coordinator trains twice a year
All site staff are trained in the use of fire extinguishers and evacuation procedures and this is documented	☒	☐	☐	Training Date: 4/28/25
Evacuation Plans are posted	☒	☐	☐	
Fire extinguishers are strategically placed and inspected annually	☒	☐	☐	Date: June 2025
Facility has at least two clearly identified and well-lit, unobstructed exists	☒	☐	☐	
Fire drills are conducted annually and documented	☒	☐	☐	Date: 4/2/25, 8/13/25, 11/19/25, 2/2/26
Emergency kit is available and has proper supplies and a defibrillator on site	☒	☐	☐	
Monthly Fire and Safety Inspections of the facility are conducted?	☒	☐	☐	Log maintained? -Yes

All staff is trained to respond to participant illnesses, accident or other emergencies as appropriate	☒	☐	☐	Frequency of training? Annually Is there a policy? Yes
Is there an up-to-date copy of your Emergency Disaster Preparedness Procedure Plan (including current phone, cell phone and pager numbers of key staff) on file at MCOFA	☒	☐	☐	
The center is in compliance with the Americans Disability Act (ADA) requirements?	☒	☐	☐	
2. Postings/On file/ Available/ Replacement Signs	**Yes**	**No**	**Not Required**	**Location**
Registration Forms	☒	☐	☐	Office
Sign In Sheets	☒	☐	☐	Office
Lock Box Available	☒	☐	☐	Lunch room, money locked in Office at end of each day
Envelopes Available	☒	☐	☐	With Lock Box
Contribution Sign (including Guest Information)	☒	☐	☐	In the community room
Grievance Procedure Sign	☒	☐	☐	Bulletin Board Community Room
Take Home Food Policy Sign	☒	☐	☐	Community Room
"EEO is the Law" Poster	☒	☐	☐	HR
Poverty Level Guidelines	☒	☐	☐	With Contribution Signs
Emergency Closing Poster	☒	☐	☐	Hallway entrance to Community Room
Menu Displayed with certified statement	☒	☐	☐	Bulletin Board inside of Community Room
Recreation Calendar	☒	☐	☐	Bulletin Board inside of Community Room
3. Compliance	**Yes**	**No**	**Not Required**	**Comments**
Reports are submitted on/or before the 10th of the month	☐	☒	☐	Center continued to struggle with staff capcity but hired more in 2026. They plan to at minimum submit reports and newsletter quarterly.
Fiscal Vouchers are submitted no later than 30 days after the end of the quarter.	☒	☐	☐	

Responds to MCOFA in a timely manner when an issue arises	☒	☐	☐	
MCOFA Nutrition Program Policy Manual is on site and accessible	☒	☐	☐	
The staff/volunteers receive orientation and training on the proper methods and procedures pertaining to MCOFA guidelines	☒	☐	☐	Frequency: Monthly, Minutes maintained: Notes are taken
Training is provided quarterly with agendas and attendances documented. These are shared with MCOFA Program Monitor. Required topics include but not limited to: Procedures for emergency situations, language assistance, food safety and sanitation	☒	☐	☐	
Volunteers receive recognition	☒	☐	☐	
There is a procedure in place that allows participants to present grievances or make complaints?	☒	☐	☐	
Site Council meetings are held at least four times a year	☒	☐	☐	Frequency: Monthly Minutes maintained: Notes are taken
A representative attends Project Council meetings regularly	☒	☐	☐	
Participants are notified who their site council/Project Council members are?	☒	☐	☐	How: Morning announcements and committee meetings
Equal access is granted to candidates regardless of policy view or party affiliation.	☒	☐	☐	
The center is in compliance with Affirmative Action and Equal Opportunity guidelines?	☒	☐	☐	
Provisions have been made to protect the confidentiality of participants' information?	☒	☐	☐	
The Congregate Services noted have a less than 10% missing data per the Peer Place reporting system	☒	☐	☐	
Has the agency given due recognition to the U.S. Administration on Aging, the NYS Office for the Aging and Monroe County DHS/Office for the Aging, as appropriate, in program/service brochures, flyers and other printed materials as well as online?	☒	☐	☐	

*Monthly Coordinator's Report Checklist has most current wording				
The agency has a written policy regarding retention of all Monroe County DHS/Office for the Aging contracted program and fiscal records for six (6) years	☒	☐	☐	*Specifics in MCOFA Nutrition Program Policy Manual
There is representation at 90% of MCOFA Coordinators meetings	☒	☐	☐	
All updated insurance certificates naming the County of Monroe as additionally insured on file with the Monroe County Contract Office (Contrack HQ)	☒	☐	☐	
All Equipment Inventory & Disposition Forms updated and on file at MCOFA	☒	☐	☐	Last updated: 2017
The center is responsive to "LEP" Limited English Proficiency –limited ability to read, speak, write, or understand English	☒	☐	☐	Explain: Tellmorr Contract
The center accommodates LGBT participants	☒	☐	☐	

[1] **As detailed in the Policy Manual , 19-PI-26 and Program Application**

V. Conclusions

1. **Overall assessment of the strengths**

   Town/Agency Comments: Centro de Oro continues to build on its strong sense of community and connection. Our culturally responsive approach, Spanish-language services, and programming help create an environment where participants feel comfortable, valued, and at home. We also see the value in giving participants an active voice in the program and opportunities to share their talents, contribute, and remain engaged in their community. We will continue to build on these strengths while adapting to the changing needs and interests of the older adults we serve.

   MCOFA Comments: The center continues to excel at their mission to serve Hispanic elders ensuring culturally respectful services and menus as able; connecting them with community resources and recreation; and empowering them through education. The participants report a high level of satisfaction as demonstrated on the satisfaction survey. The center serves the key demographics of the program: 65% are over the age of 75; 39.7% live alone; 31.7% are frail and or disabled; 66.7 % are low income and 54% are limited English proficient.

2. **Areas in need of attention**

   Town/Agency Comments: One area we are continuing to address is the timely submission of our monthly reports. Additional administrative and kitchen support would strengthen our capacity in these areas, and we are actively working to identify the appropriate support. Meal projections have also been adjusted to better reflect our actual capacity and attendance patterns. Participation continues to fluctuate despite ongoing outreach and new participants joining the program. We will continue our recruitment efforts, monitor participation closely, and adjust our planning as needed to reflect the current needs of the program.

   MCOFA Comments: The center, after moving to the current location August 2024, had their first contract year with in house cooking and services. Previous meal projections were left in place for a period of observation and monitoring to better capture meals costs and meal attendance averages. Meal projections for the current year and further years have been adjusted to better demonstrate these. The center is working on the administrative support to ensure their reports are submitted.

3. **Additional resources/technical assistance requested**

   Town/Agency Comments: We would welcome staff training opportunities on topics relevant to the older adults we serve, including dementia awareness, mental health, fall prevention, and other areas that can strengthen our ability to support participants. We would also appreciate guidance on developing and sustaining a volunteer program to support activities, participant engagement, and the center's daily operations.

   MCOFA Comments: Continued support as needed.

Satisfaction Survey Analysis- To Be Completed by Center Staff

Center Name: Centro de Oro **Total Distributed: 50** **Total Participants: 55**

Please Enter Total Number of people who answered per column.

	Meals	Classes/Groups	Both
What services do you participate in at the center?	3		47
	Breakfast	Lunch	
Which type of meals have you received this year?	48	50	

Please Enter Totals for Each Column (Number of people who answered per column)

How do you rate the breakfast you receive?	Excellent	Good	Fair	Poor
Taste	**19**	**26**	**4**	**1**
Temperature	**13**	**32**	**4**	**0**
Variety	**18**	**26**	**5**	**0**
Overall quality	**20**	**25**	**3**	**1**

Please Enter Totals for Each Column (Number of people who answered per column)

How do you rate the lunch you receive?	Excellent	Good	Fair	Poor
Taste	**16**	**28**	**6**	**0**
Temperature	**18**	**27**	**4**	**1**
Variety	**17**	**27**	**6**	**0**
Overall quality	**17**	**28**	**5**	**0**

Please Enter Totals for Each Column (Number of people who answered per column multiplied by the number assigned)

	Yes (3)	Maybe (2)	No (1)	No Answer (0)	Total	Total Possible[1]	%[2]
Since coming to the center, have your social opportunities increased?	**45(135)**	**4(8)**	**0**	**1(0)**	**143**	**147**	**97%**
Since coming to the center have you gained knowledge or new skills?	**46(138)**	**2(4)**	**1(1)**	**1(0)**	**143**	**147**	**97%**
Has the center improved the quality of your life?	**44(132)**	**5(10)**	**0**	**1(0)**	**142**	**147**	**97%**

[1]Do not count *No Answer* in Total Possible (Total Actually Answered x 3)
[2]Total Divided by Total possible x 100

Would you recommend the Senior Center to friends and family members?

Please Enter Totals for Each Column

Yes (3)	Maybe (2)	No (1)	No Answer (0)	Total	Total Possible[1]	%[2]
49(147)	**1(2)**	**0**	**0**	**149**	**150**	**99%**

[1]Do not count *No Answer* in Total Possible (Total Actually Answered x 3)
[2]Total Divided by Total possible x 100

Department of **Human Services**
Office for the Aging
Monroe County, New York

Adam Bello
County Executive

Thalia Wright
Commissioner

Steve Newcomb
Director

June 1, 2026

Michael Curley
3237 Chili Ave
Rochester, NY 14624

Dear Mike,

Attached for your records is the completed 2025 Annual Program Evaluation for the Monroe County Office for the Aging (MCOFA) funded Senior Center Nutrition Program. The senior center contract is doing well. For comments related to each program and its specific objectives, please read through the evaluation. You may find additional general comments related to the program on the final page of the evaluation.

Thank you for continuing to provide these valued services to our community's older adult population.

Should you have any questions regarding the evaluation, please do not hesitate to contact me at 753-5566.

Sincerely,

Tracy Collins

cc: Monroe County Office for the Aging –Steve Newcomb, Leanne Rorick

Encl: Annual Program and Service Assessment

Monroe County Office for the Aging
Program Evaluation & Contract Compliance
2025

ANNUAL PROGRAM AND SERVICE ASSESSMENT

Town of Chili
Chili Senior Center

3237 Chili Ave
Rochester NY 14624

Program Representative/Coordinator: Michael Curley, Director; Jenn Kelley, Coordinator
Phone: 585-889-4680
Fax: N/A
Email: mcurley@townofchili.org; jkelley@townofchili.org
Funding Period: January 1- December 31, 2025
1/1/2025 - 12/31/2025 = Title IIIC-1
4/1/2025 - 12/31/2025 = CSI

Evaluation Date: 5/11/26
MCOFA Monitor: Tracy Collins

An Annual Evaluation by the Area Agency on Aging (MCOFA) is required by the Older Americans Act. The primary purpose of this evaluation is to review the contract and to ensure that all policies and practices are in compliance with applicable laws and requirements.

Contents:

I.	Contract Budgets
II.	Program Goals
III.	Service Activity Review
IV.	Program Compliance
V.	Conclusions

I. Contract Budget and Service Overview

Congregate Meal Program and Outreach

Contract Period:		January 1, 2025-December 31, 2025	Original [1]
Amount of Contract		#1. Total Budget:	**1) $ 64,407**
Composed of		#2. Anticipated Contributions: #3. Nutrition Services Incentive (NSIP) #4. Subcontractor Match: #5. MCOFA Funds:	**2) $ 5,000** **3) $ 1,841** **4) $ 12,808** **5) $ 44,758**
AIP	**Total Cost**	#6. Congregate Meals	**6) $ 60,407**
	Units	#7. Allocated Meals	**7) 2,600**
	Unit Cost	#8. Total meal cost: *(#6) divided by allocated meals (#7)*	**8) $ 23.23**
AIP	**Total Cost**	#9. Outreach	**9) $ 4,000**
	Units	#10. Allocated Outreach	**10) 100**
	Unit Cost	#11. Total Outreach Cost *(#9) divided by allocated meals (#10)*	**11) $ 40.00**
Funding Sources		OAA, Title IIIC-1: Nutrition Services for the Elderly	

Senior Recreation and Education

Contract Period:		April 1, 2025-December 31, 2025	Original [1]
Amount of Contract		#1. Total Budget:	**1) $ 1,131**
Composed of		#4. Subcontractor Match: #5. MCOFA Funds:	**4) $ 283** **5) $ 848**
AIP	**Total Cost**	#6. Senior Rec and Ed	**6) $ 1,131**
	Units	#7. Allocated Units	**7) 5**
	Unit Cost	#8. Total unit cost: *(#6) divided by allocated meals (#7)*	**8) $ 226.20**
Funding Sources		Congregate Service Initiative (CSI)	

II. Program Goals

To provide individuals aged 60 and over with a balanced meal(s), socialization opportunities, and activities to support mental and physical well-being. Services help participants maintain health, independence, and remain in their homes as long as possible.

1. Performance Projections and Outcomes

A. **Performance Measurement-Eligible Meals Served** is the total number of eligible meals served during the contract year. Eligible meals are considered those meals served to individuals aged 60 and over, their spouses, their disabled and dependent children, and volunteers assisting with the nutrition program.

See [1]Program Year Application Outcome Objective #2 and [2]Peer Place Program Year Served Client Summary Report

Indicator of success: The total number of meals served meets or exceeds annual projections, with success indicated by achieving at least 90% of the projected goal by year-end.

		Assessment Year Projection[1]	Assessment Year Actual[2]	Current Year Projection[1]
Time frame		1/1/25-12/31/25	1/1/25-12/31/25	1/1/26-12/31/26
Eligible Breakfast Meals Served		600	472	600
% Successful		90%	79%	90%

Indicator of success: The total number of meals served meets or exceeds annual projections, with success indicated by achieving at least 90% of the projected goal by year-end.

		Assessment Year Projection[1]	Assessment Year Actual[2]	Current Year Projection[1]
Time frame		1/1/25-12/31/25	1/1/25-12/31/25	1/1/26-12/31/26
Eligible Lunch Meals Served		2,000	1,451	1,600
% Successful		90%	73%	90%

B. **Performance Measurement- Participant Satisfaction Survey** Surveys are distributed annually to assess participants' opinions on program services.

See [1]Program Year Application Outcome Objective #3

Indicator of success: 90% or greater of participants respond positively to: "Has attending the center improved your quality of life?"

		Assessment Year Projection[1]	Assessment Year Actual[2]	Current Year Projection[1]
Time frame		1/1/25-12/31/25	1/1/25-12/31/25	1/1/26-12/31/26
Total # of Participants		30	32	30
% Satisfied		90%	91%	90%

Completed [2]Participant Satisfaction Analysis Attached

2. Past performance/Previous recommendation

A. Were there findings from the prior or current year that required corrective actions to address areas of non-compliance? ☐ YES ☒ NO

If yes, please describe:

B. Were all findings from MCOFA's previous monitoring efforts satisfactorily addressed?
☒ YES ☐ NO

II. Service Activity Review

1. **OUTCOME OBJECTIVE #1:** ***To provide services to those unserved and underserved older adults in greatest social or economic need, particularly those who are low-income, low-income minorities, older adults with limited English proficiency, Native Americans, and frail/persons with disabilities and older adults residing in rural areas, in accordance with their need for such services, and to meet specific objectives established by the MCOFA for providing services to the above groups within the Program Service Area (PSA).***

   To ensure equal access for participation, services, activities, and informational sessions without regard to race, color, sex, religion, national origin, disability, sexual orientation, marital status, veteran and/or military status, immigration status, creed, domestic violence victim status, criminal history, gender identity, genetic predisposition or carrier status.

Effective April 1, 2025 the following 2025 poverty income guidelines are to be used in identifying low-income older adults. These will be updated for the contract year as soon as available.

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Poverty Income Guidelines

HOUSEHOLD SIZE	100%		125%		150%		185%	
	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly
1	15,650	1,304	19,563	1,630	23,475	1,956	28,953	2,413
2	21,150	1,763	26,438	2,203	31,725	2,644	39,128	3,261
3	26,650	2,221	33,313	2,776	39,975	3,331	49,303	4,109
4	32,150	2,679	40,188	3,349	48,225	4,019	59,478	4,956
For each additional person, add:	5,500 annual amount		6,875 annual amount		8,250 annual amount		10,175 annual amount	

	PROJECTED[1] Number of Unduplicated Persons to be served by program	ACTUAL[2] Number of Unduplicated Persons to be served by program	PROJECTED[1] Percentage of Persons to be served from total served: *based on Targeting	ACTUAL[2] Percentage of Persons to be served from total served: *based on Targeting
1. Total Unduplicated Persons to be served by program	100	87	100%	87%
Of the Total Persons from line 1.:				
a. 75-84 years	18	40	17.7%	46%
b. 85 years and older	8	18	8%	20.7%
Clients by Ethnicity:				
c. Hispanic	4	2	4.2 %	2.3%
Clients by Race:				
d. American Indian/Alaskan Native	0	2	.2%	2.3%
e. Asian	2	1	2.2%	1.1%
f. Black or African American	10	4	9.5 %	4.6%
g. Middle Eastern	N/A	0	N/A	0%
h. North African	N/A	0	N/A	0%
i. White not Hispanic	82	74	82.1 %	85.1%
j. Native Hawaiian/Pacific Islander	0	0	.01%	0%
Clients by Key Characteristics:				
k. Live alone	45	48	45.1%	55.2%
l. Frail and/or Individuals with Disabilities	28	26	28.4 %	29.9%
m. Low Income (below 150% of poverty)	17	25	17.3 %	28.7%
n. Low Income Minority (below 150% of poverty)	3	1	2.9%	1.1%
o. Limited English Proficiency	6	1	5.5%	1.1%
p. Rural*	8	0	8.1%	0%
COMMENTS:	***Local Rural**			

1. Program Year Application Outcome Objective #1
2. From Peer Place Program Year Served Client Summary Report.

2. **OUTCOME OBJECTIVE #2:** ***To serve nutritious meals that meet 1/3 the Dietary Reference Intake per meal for meals served during the contract year. Eligible meals are considered those meals served to individuals over 60, their spouses, their disabled and dependent children, and volunteers at the center who assist in the nutrition program.***

A. To serve [600] total eligible breakfast meals by 12/31/25.
Daily average of [7]; # of Days Open for breakfast [90]
Program Year Application
1. Actual # of eligible Congregate meals served: [472]; [79]%.
Actual Daily average of [10]; Actual # of Days Open [48]
Viewbuilder Event Profile Meals View; Does not include Shelf Stable Meals

2. Objective met (90%of projection served)? ☐ YES ☒ NO

If successful in reaching this objective, to what do you contribute your success? If performance is below objective, state reasons and outline Corrective Action Plan to reach objective:

We have very loyal breakfast/lunch group who love coming every week. Our average # of people per week stems from the fact that: 1) we are surrounded by various fast food/mom and pop restaurants and many of them meet at these locations weekly 2) Due to the various other activities and programs we provide, the timing of our breakfast/lunch can coincide with cards, fitness, and nutrition-related classes being offered at the center during the same time period. In the future, we will be offering two lunch opportunities on both Monday and Wednesday, through our calendar, brochure, and word of mouth. We will no longer offer breakfast.

B. To serve [2,000] total eligible lunch meals by 12/31/25.
Daily average of [22]; # of Days Open for lunch [90]
Program Year Application
1. Actual # of eligible Congregate meals served: [1,351]; [68]%.
Actual Daily average of [29]; Actual # of Days Open [47]
Viewbuilder Event Profile Meals View; Does not include Shelf Stable Meals

2. Objective met (90%of projection served)? ☐ YES ☒ NO

If successful in reaching this objective, to what do you contribute your success? If performance is below objective, state reasons and outline Corrective Action Plan to reach objective:

Our breakfast numbers have been low- we have the same 6-10 seniors showing up. We have decided to add an additional lunch day, come September of 2026. After review, lunch numbers are currently more successful than breakfast, so we decided offering a second lunch in the same week would be more beneficial to our seniors.

3. **OUTCOME OBJECTIVE #3: Participants will report that attending the center has improved their quality of life.**

A. See Table above (I. 1. B. Performance Measurement-Customer Satisfaction Survey).
Peer Place Program Year Served Client Summary Report

B. Total Number of Recreation and Education activities offered to participants during contract year 1/1/25-12/31/25 [1,688].

C. Of the above total, number of CSI funded Recreation and Education activities offered to participants during contract year 1/1/25-12/31/25 [6].

D. Do you post your Activity Calendar in the Center in a visible location? Yes ☒ No ☐
1. Where is it posted?

It is posted on our bulletin board in the senior lounge and on the Town of Chili Website. In addition, we also use a dry erase board to high light events for each month. The senior calendar is available at the front desk for anyone to pick-up. We also send out brochures 3x a year to chili-resident households.

E. Does your center have a newsletter? Yes ☒ No ☐

1. If yes, how often is it published? **3 times a year**.
2. Did you share a copy with the MCOFA Program Monitor? Yes ☐ No ☒
3. How do you share your Newsletter with the public?

Senior Calendars are available at the front desk and online at our Town website. In addition, residents may use the online portal to view events and activities. We also send out a Chili-resident brochure 3x a year to addresses within the area.

F. Participants are given the opportunity to give feedback and input? Yes ☒ No ☐

A lot of our feedback comes from verbal interactions. We also have comment cards throughout the building, which are viewed on a weekly basis

G. Per the Satisfaction Survey (Completed Participant Satisfaction Analysis Attached)

1. Do participants report increased social opportunities? **92** %
2. Do participants report gaining knowledge or new skills? **74** %
3. Do Participants say they would recommend the center? **94** %

4. **OUTCOME OBJECTIVE #4: To provide outreach* to 100 unduplicated older persons per contract period.** Program Year Contract

G. Actual outreach recorded **848**

Peer Place Program Year Served Client Summary Report

H. Outreach projection objective met? Yes ☒ No ☐

If successful in reaching this objective, to what do you contribute your success? If performance is below objective, state reasons and outline Corrective Action Plan to reach objective:

The Town of Chili Community Center continues to attract new users, many of whom are seniors. Staff continually offer new participant tours of the center and promote the Senior Center and all of the programs. The phone calls, in-person, and E-mail interactions happen daily at our Center. We celebrate our outreach and look forward to continuing to attract new members to our Center.

What tools/opportunities/community partners have you used in reaching unserved/underserved populations matching the demographics of Monroe County (see Demographics chart for populations with lower-than-expected attendance for reference)?

The Town of Chili sends a Town Newsletter to all Chili residents three times a year informing them of the services we provide. We also partner with local churches and organizations so they can also inform their members of our services. Additional marketing and outreach include emails, posters, flyers, and direct word of mouth with residents at the Chili Community Center. Our senior programmer has made presentations at local churches and senior housing organizations. Within these presentations, feedback has always been fostered and welcomed. We continue to look for additional opportunities for partnership and thus, increase our outreach to those in unserved/underserved populations.

I. How many new participants have joined this contract year 1/1/25-12/31/25? 44
View builder Registration View

J. Do you maintain a waitlist for your services, or in some way experience demand that your center is not able to meet (e.g., requests for meals, recreation or transportation)? Yes ☒ No ☐

5. **OUTCOME OBJECTIVE #5: To have a waste factor of 5% or less.**
Program Year Contract

Waste Factor:

	Meals Ordered[1]	Meals Served[2]	% Waste[3]
Breakfast Waste Factor	505	472	6.5%

	Meals Ordered[1]	Meals Served[2]	% Waste[3]
Lunch Waste Factor	1,320	1,301	1.4 %

1. Program Year Waste Analysis Report – Caterer Billing Report
2. Peer Place Program Year Served Client Summary Report, Does not include Special Events or Emergency Meals which are included in the Total Served for Outcome Objective Above)
3. Subtract 'served' from 'ordered'; divide by 'ordered' then multiple by 100

If above 5%, please state reasons and outline a plan to reach the goal.

6. **CONTRIBUTIONS: Collect participant contributions, used to enhance the program.**
Program Year Application

A. Projected Contributions $ 5,000 in contract year 1/1/25-12/31/25.
Projected per meal average of $ 1.92
1. Program Year Fiscal Budgets

B. Actual collected $ 3,915.24 in contract year 1/1/25-12/31/25.
Actual per meal average of $ 2.05
1. Program Year Fiscal Claims

C. Do you have a contribution policy at the center that aligns with NYSOFA policy 18-PI-17? Yes ☒ No ☐

D. How were the contributions used to enhance the program?
The contributions allow the Town of Chili to offer breakfast and hot lunch opportunities 1x a week, while at the same time, using town tax dollars/budget in other areas to enhance the overall quality of life for our senior population. Without this contribution, other programs and services may have to be reduced or eliminated.

III. Program Compliance[1]

1. Fire, Building & Health Code Compliance Procedures	Yes	No	Not Required	Comments
Site has fire emergency procedures that meet local fire codes and standards; participants and staff must be familiar with these	☒	☐	☐	
All site staff are trained in the use of fire extinguishers and evacuation procedures and this is documented	☒	☐	☐	Training Date: October 23, 2025
Evacuation Plans are posted	☒	☐	☐	
Fire extinguishers are strategically placed and inspected annually	☒	☐	☐	Date: October 23, 2025
Facility has at least two clearly identified and well-lit, unobstructed exists	☒	☐	☐	

Fire drills are conducted annually and documented	☒	☐	☐	2/20/25
Emergency kit is available and has proper supplies and a defibrillator on site	☒	☐	☐	
Monthly Fire and Safety Inspections of the facility are conducted?	☒	☐	☐	Log maintained? Yes, with the Town of Chili
Is there an up-to-date copy of your Emergency Disaster Preparedness Procedure Plan (including current phone, cell phone and pager numbers of key staff) on file at MCOFA	☒	☐	☐	
The center is in compliance with the Americans Disability Act (ADA) requirements?	☒	☐	☐	
2. Postings/On file/ Available/ Replacement Signs	**Yes**	**No**	**Not Required**	**Location**
Registration Forms	☒	☐	☐	Office
Sign In Sheets	☒	☐	☐	Electronic from done at Front Counter, paper form kept in Sr. Office.
Lock Box Available	☒	☐	☐	Recreation Office/Lunch Room during meals
Envelopes Available	☒	☐	☐	Recreation Office
Contribution Sign (including Guest Information)	☒	☐	☐	Bulletin Board
Poverty Level Guidelines	☒	☐	☐	Bulletin Board
Grievance Procedure Sign	☒	☐	☐	Bulletin Board
Take Home Food Policy Sign	☒	☐	☐	Town Administration Offices
"EEO is the Law" Poster	☒	☐	☐	Bulletin Board
Emergency Closing Poster	☒	☐	☐	Bulletin Board
Menu Displayed with certified statement	☒	☐	☐	Bulletin Board
Recreation Calendar	☒	☐	☐	Bulletin Board
3. Compliance	**Yes**	**No**	**Not Required**	**Comments**
Coordinator Reports are submitted on/or before the 10th of the month	☐	☒	☐	5/12 months

Fiscal Vouchers are submitted no later than 30 days after the end of the quarter.	☒	☐	☐	
Responds to MCOFA in a timely manner when an issue arises	☒	☐	☐	
MCOFA Nutrition Program Policy Manual is on site and accessible	☒	☐	☐	
The staff/volunteers receive orientation and training on the proper methods and procedures pertaining to MCOFA guidelines	☒	☐	☐	Frequency: Weekly Minutes maintained: Yes
Training is provided quarterly with agendas and attendances documented. These are shared with MCOFA Program Monitor. Required topics include but not limited to: Center procedures for emergency situations, language assistance, food safety and sanitation	☒	☐	☐	
Volunteers receive recognition	☒	☐	☐	
There is a procedure in place that allows participants to present grievances or make complaints?	☒	☐	☐	
Site Council meetings are held at least four times a year	☒	☐	☐	Frequency: Four times a year Minutes maintained: Council Member maintains
A representative attends Project Council meetings regularly	☐	☒	☐	None currently
Participants are notified who their site council/Project Council members are?	☒	☐	☐	How: Bulletin Board
Equal access is granted to candidates regardless of policy view or party affiliation.	☒	☐	☐	
The center is in compliance with Affirmative Action and Equal Opportunity guidelines?	☒	☐	☐	
Provisions have been made to protect the confidentiality of participants' information?	☒	☐	☐	
The Congregate Services noted have a less than 10% missing data per the Peer Place reporting system	☒	☐	☐	
Has the agency given due recognition to the U.S. Administration on Aging, the NYS	☒	☐	☐	

Office for the Aging and Monroe County DHS/Office for the Aging, as appropriate, in program/service brochures, flyers and other printed materials as well as online? **Monthly Coordinator's Report Checklist has most current wording*				
The agency has a written policy regarding retention of all Monroe County DHS/Office for the Aging contracted program and fiscal records for six (6) years	☒	☐	☐	*Specifics in MCOFA Nutrition Program Policy Manual
There is representation at 90% of MCOFA Coordinators meetings	☒	☐	☐	9/12 meetings
All updated insurance certificates naming the County of Monroe as additionally insured on file with the Monroe County Contract Office (Contrack HQ)	☒	☐	☐	
All Equipment Inventory & Disposition Forms updated and on file at MCOFA	☒	☐	☐	Last updated: 2017
The center is responsive to "LEP" Limited English Proficiency –limited ability to read, speak, write, or understand English	☒	☐	☐	Explain: Tellmorr Contract
The center accommodates LGBT participants	☒	☐	☐	

[1] As detailed in the Policy Manual , 19-PI-26 and Program Application

IV. Conclusions

1. **Overall assessment of the strengths**

   Town/Agency Comments: None at this time.

   MCOFA Comments: The hot lunches continue to be successful at the center. Unfortunately, the breakfasts under the new caterer are not well received. The center plans to switch this meal to a second hot lunch in the fall. This will help increase the variety in the meals the centers serve from the menu. The center was able to maintain a low waste for both meals. Participants continue to report high satisfaction with the center on the annual satisfaction survey. The center being in the recreation building lends to having a robust catalog of activities through the days and plenty of exposure. The center serves many of the target demographics with 67% over the age of 75; 55% live alone; 30% are frail and/or disable; and 29% are low income.

2. **Areas in need of attention**

   Town/Agency Comments: None at this time.

   MCOFA Comments: Moving to a second hot lunch at the center will increase attendance and total meals served.

3. **Additional resources/technical assistance requested**

   Town/Agency Comments: None at this time.

   MCOFA Comments: MCOFA Program Monitor and Chili Senior Center staff have been meeting regularly during 2026 to review areas they want additional training in or any questions that arise.

Satisfaction Survey Analysis- To Be Completed By Center Staff

Center Name: Chili **Total Distributed:** 54 **Total Participants:** 32

Please Enter Total Number of people who answered per column.

	Meals	Classes/Groups	Both
What services do you participate in at the center?	𝍸 𝍸 𝍸	𝍸 III	𝍸 𝍸 𝍸 II
	Grab N Go Lunch	In Person Lunch	Breakfast
Which type of meals have you received this year?	X	𝍸 𝍸 𝍸 𝍸 𝍸 𝍸 𝍸 𝍸 𝍸 𝍸 II	𝍸 I

Please Enter Totals for Each Column (Number of people who answered per column)

How do you rate the breakfast you receive?	Excellent	Good	Fair	Poor
Taste		II (2)	II (2)	I (1)
Temperature		𝍸 (5)		
Variety			IIII (4)	I (1)
Overall quality		I (1)	III (3)	I (1)

Please Enter Totals for Each Column (Number of people who answered per column)

How do you rate the lunch you receive?	Excellent	Good	Fair	Poor
Taste	27	5		
Temperature	32			
Variety	21	9	2	
Overall quality	25	4	3	

Please Enter Totals for Each Column (Number of people who answered per column multiplied by the number assigned)

	Yes (3)	Maybe (2)	No (1)	No Answer (0)	Total	Total Possible[1]	%[2]
Since coming to the center, have your social opportunities increased?	28 84	2 4		2	88	96	92%
Since coming to the center have you gained knowledge or new skills?	17 51	9 18	2 2	4	71	96	74%
Has the center improved the quality of your life?	27 81	3 6		2 0	87	96	91%

[1]Do not count *No Answer* in Total Possible (Total Actually Answered x 3)
[2]Total Divided by Total possible x 100

Would you recommend the Senior Center to friends and family members?
Please Enter Totals for Each Column

Yes (3)	Maybe (2)	No (1)	No Answer (0)	Total	Total Possible[1]	%[2]
30		0	2	90	96	94%

[1]Do not count *No Answer* in Total Possible (Total Actually Answered x 3)
[2]Total Divided by Total possible x 100

`Monroe County Office for the Aging
Program Evaluation & Contract Compliance
2025-26

ANNUAL PROGRAM AND SERVICE ASSESSMENT

Community Place of Greater Rochester

Senior Center

145 Parsells Ave
Rochester, New York 14609

Program Representative/Coordinator: Ana Martinez
Person Completing: Marisol Ubinas
Phone: 585-288-0021
Fax: 585-288-8662
Email: marisol.ubinas@communityplace.org
Funding Period: April 1, 2025 - March 31, 2026
4/1/2025 - 3/31/2026 = WIN
4/1/2025 - 3/31/2026 = CSE
1/1/2025 - 12/31/2025 = CSI

Evaluation Date: 7/29/26
MCOFA Monitor: Tracy Collins

An Annual Evaluation is required by the Older Americans Act that programs be evaluated by Area Agency on Aging (MCOFA). The primary purpose of this evaluation is to review the contract and to ensure that all policies and practices are in compliance with applicable laws and requirements.

Contents:

I.	Contract Budgets
II.	Program Goals
III.	Service Activity Review
IV.	Program Compliance
V.	Conclusions

I. Contract Budget and Service Overview

Congregate Meal Program and Outreach

Contract Period:		April 1, 2025-March 31, 2026	Original
Amount of Contract		#1. Total Budget:	**1) $ 46,738**
Composed of		#2. Anticipated Contributions: #3. Nutrition Services Incentive (NSIP) #4. Subcontractor Match: #5. MCOFA Funds:	**2) $ 6,376** **3) $ 0** **4) $ 0** **5) $ 40,362**
AIP	**Total Cost**	#6. Congregate Meals	**6) $ 45,739**
	Units	#7. Allocated Meals	**7) 4,500**
	Unit Cost	#8. Total meal cost: *(#6) divided by allocated meals (#7)*	**8) $ 10.16**
AIP	**Total Cost**	#9. Outreach	**9) $1,000**
	Units	#10. Allocated Outreach	**10) 25**
	Unit Cost	#11. Total Outreach Cost *(#9) divided by allocated meals (#10)*	**11) $ 40.00**
Funding Sources		OAA, WIN: Wellness in Mutrition	

Senior Recreation and Education

Contract Period:		April 1, 2025-December 31, 2025	Original
Amount of Contract		#1. Total Budget:	**1) $ 33,334**
Composed of		#4. Subcontractor Match: #5. MCOFA Funds:	**4) $ 3,334** **5) $ 30,000**
AIP	**Total Cost**	#6. Senior Rec and Ed	**6) $ 33,334**
	Units	#7. Allocated Units	**7) 360**
	Unit Cost	#8. Total unit cost: *(#6) divided by allocated meals (#7)*	**8) $ 92.59**
Funding Sources		CSE: Community Services for the Elderly	

Senior Recreation and Education

Contract Period:		April 1, 2025-December 31, 2025	Original
Amount of Contract		#1. Total Budget:	**1) $ 1,131**
Composed of		#4. Subcontractor Match: #5. MCOFA Funds:	**4) $ 283** **5) $ 848**
AIP	**Total Cost**	#6. Senior Rec and Ed	**6) $ 1,131**
	Units	#7. Allocated Units	**7) 10**
	Unit Cost	#8. Total unit cost: *(#6) divided by allocated meals (#7)*	**8) $ 113.10**
Funding Sources		Congregate Service Initiative (CSI)	

II. Program Goals

To provide individuals aged 60 and over with a balanced meal(s), socialization opportunities, and activities to support mental and physical well-being. Services help participants maintain health, independence, and remain in their homes as long as possible.

1. Performance Projections and Outcomes

A. **Performance Measurement-Eligible Meals Served** is the total number of eligible meals served during the contract year. Eligible meals are considered those meals served to individuals aged 60 and over, their spouses, their disabled and dependent children, and volunteers assisting with the nutrition program.

See [1]Program Year Application Outcome Objective #2 and [2]Peer Place Program Year Served Client Summary Report

Indicator of success: The total number of meals served meets or exceeds annual projections, with success indicated by achieving at least 90% of the projected goal by year-end.

		Assessment Year Projection[1]	Assessment Year Actual[2]	Current Year Projection[1]
Time frame		4/1/25-3/31/26	4/1/25-3/31/26	4/1/26-3/31/27
Eligible Meals Served		4,500	6,021	6,900
% Successful		90%	134%	90%

B. **Performance Measurement- Participant Satisfaction Survey** Surveys are distributed annually to assess participants' opinions on program services.

See [1]Program Year Application Outcome Objective #3

Indicator of success: 90% or greater of participants respond positively to: "Has attending the center improved your quality of life?"

		Assessment Year Projection[1]	Assessment Year Actual[2]	Current Year Projection[1]
Time frame		4/1/25-3/31/26	4/1/25-3/31/26	4/1/26-3/31/27
Total # of Participants		25	30	30
% Satisfied		90%	92%	90%

Completed [2]Participant Satisfaction Analysis Attached

2. Past performance/Previous recommendation

A. Were there findings from the prior or current year that required corrective actions to address areas of non-compliance? ☐ YES ☒ NO

If yes, please describe:

B. Were all findings from MCOFA's previous monitoring efforts satisfactorily addressed?

☒ YES ☐ NO

III. Service Activity Review

1. **OUTCOME OBJECTIVE #1:** ***To provide services to those unserved and underserved older adults in greatest social or economic need, particularly those who are low-income, low-income minorities, older adults with limited English proficiency, Native Americans, and frail/persons with disabilities and older adults residing in rural areas, in accordance with their need for such services, and to meet specific objectives established by the MCOFA for providing services to the above groups within the Program Service Area (PSA).***

   To ensure equal access for participation, services, activities, and informational sessions without regard to race, color, sex, religion, national origin, disability, sexual orientation, marital status, veteran and/or military status, immigration status, creed, domestic violence victim status, criminal history, gender identity, genetic predisposition or carrier status.

Effective April 1, 2025 the following 2025 poverty income guidelines are to be used in identifying low-income older adults. These will be updated for the contract year as soon as available.

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Poverty Income Guidelines

HOUSEHOLD SIZE	100%		125%		150%		185%	
	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly
1	15,650	1,304	19,563	1,630	23,475	1,956	28,953	2,413
2	21,150	1,763	26,438	2,203	31,725	2,644	39,128	3,261
3	26,650	2,221	33,313	2,776	39,975	3,331	49,303	4,109
4	32,150	2,679	40,188	3,349	48,225	4,019	59,478	4,956
For each additional person, add:	5,500 annual amount		6,875 annual amount		8,250 annual amount		10,175 annual amount	

	PROJECTED[1] Number of Unduplicated Persons to be served by program	ACTUAL[2] Number of Unduplicated Persons to be served by program	PROJECTED[1] Percentage of Persons to be served from total served: *based on Targeting	ACTUAL[2] Percentage of Persons to be served from total served: *based on Targeting
1. Total Unduplicated Persons to be served by program	60	59	100%	98.3%
Of the Total Persons from line 1.:				
a. 75-84 years	11	15	17.7%	25.4%
b. 85 years and older	5	17	8%	28.8%
Clients by Ethnicity:				
c. Hispanic	3	34	4.2 %	57.6%
Clients by Race:				
d. American Indian/Alaskan Native	0	4	.2%	6.7%
e. Asian	1	0	2.2%	0%
f. Black or African American	6	25	9.5 %	42.4%
g. Middle Eastern	N/A	0	N/A	0%
h. North African	N/A	0	N/A	0%
i. White not Hispanic	49	1	82.1 %	1.7%
j. Native Hawaiian/Pacific Islander	0	0	.01%	0%
Clients by Key Characteristics:				
k. Live alone	27	29	45.1%	49.1%
l. Frail and/or Individuals with Disabilities	17	26	28.4 %	44%
m. Low Income (below 150% of poverty)	10	50	17.3 %	84.7%
n. Low Income Minority (below 150% of poverty)	2	30	2.9%	50.8%
o. Limited English Proficiency	3	0	5.5%	0%
p. Rural*	0	0	8.1%	0%
COMMENTS:	***Local Rural**			

1. Program Year Application Outcome Objective #1
2. From Peer Place Program Year Served Client Summary Report.

2. **OUTCOME OBJECTIVE #2:** ***To serve nutritious meals that meet 1/3 the Dietary Reference Intake per meal for meals served during the contract year. Eligible meals are considered those meals served to individuals over 60, their spouses, their disabled and dependent children, and volunteers at the center who assist in the nutrition program.***

A. To serve [4,500] total eligible meals by 3/31/26.
Daily average of [19]; # of Days Open for lunch [238]
Program Year Application
Actual Daily average of [25]; Actual # of Days Open [236]
Viewbuilder Event Profile Meals View; Does not include Shelf Stable Meals
1. Actual # of eligible Congregate meals served: [5,881]; [131]%.

2. Objective met (90%of projection served)? ☒ YES ☐ NO

If successful in reaching this objective, to what do you contribute your success? If performance is below objective, state reasons and outline Corrective Action Plan to reach objective:

The consistent increase in daily meals served is directly driven by growing participant enrollment at the center. This expansion is a direct result of ongoing recruitment efforts and our active presence at vendor information tables during community events. Our recent growth is largely due to the diverse range of activities and special events now offered. To ensure high engagement, the coordinator directly surveys participants about their personal interests and needs, tailoring the calendar to include requested presentations and interactive arts and crafts sessions. A presentation by MCOFA Nutritionist successfully influenced healthy meal choices and boosted program contributions. Staff ensured that all eligible participants were proactively offered second meals to reduce waste and address nutritional needs. Transitioning food vendor to Foodlink has dramatically improved overall meal quality and participant satisfaction.

3. **OUTCOME OBJECTIVE #3: Participants will report that attending the center has improved their quality of life.**

A. See Table above (I. 1. B. Performance Measurement-Customer Satisfaction Survey).

B. Total Number of Recreation and Education activities offered to participants during contract year 4/1/24-3/31/25 [371].

C. Of the above total, number of CSI funded Recreation and Education activities offered to participants during contract year 4/1/24-3/31/25 [3].

D. Do you post your Activity Calendar in the Center in a visible location? Yes ☒ No ☐
1. Where is it posted?

The monthly calendar is written onto the large wall calendar in the Center. Coordinator updates every month.

E. Does your center have a newsletter? Yes ☒ No ☐
1. If yes, how often is it published? [Monthly].
2. Did you share a copy with the MCOFA Program Monitor? Yes ☒ No ☐
3. How do you share your Newsletter with the public?

When the agency participates in community events, all departments can share center information. Project council members attend county meetings and share newsletters and program updates etc. Newsletters are mailed to registered participants that like to decide on what activities/days they would like to attend at the participants' request. Coordinator can provide newsletters to program managers/directors to share with their clients/families. Coordinator will request newsletter to be posted (on going) on agency website.

F. Participants are given the opportunity to give feedback and input? Yes ☒ No ☐

County surveys, and meal comment cards. We hold focus groups.
Project council members interact with all participants and can share with Coordinator and county.

G. Per the Satisfaction Survey (Completed Participant Satisfaction Analysis Attached)

1. Do participants report increased social opportunities? 97 %
2. Do participants report gaining knowledge or new skills? 93 %
3. Do Participants say they would recommend the center? 98 %

4. **OUTCOME OBJECTIVE #4: To provide outreach* to 25 unduplicated older persons per contract period.** Program Year Contract

G. Actual outreach recorded 66

Peer Place Program Year Served Client Summary Report

H. Outreach projection objective met? ☒ YES ☐ NO

If successful in reaching this objective, to what do you contribute your success? If performance is below objective, state reasons and outline Corrective Action Plan to reach objective:

Staff and volunteers actively attended several diverse community events to maximize local exposure. Staff and volunteers distributed center flyers and promotional materials directly to community members to build awareness. The center successfully leveraged its existing personnel and dedicated volunteer network.

What tools/opportunities/community partners have you used in reaching unserved/underserved populations matching the demographics of Monroe County (see Demographics chart for populations with lower-than-expected attendance for reference)?

CPGR and CSH directly route older adults already receiving care to the appropriate center within their designated catchment area. Additionally, Eldersource Care Managers provide ongoing support to current participants while systematically referring new, eligible older adults to our center. Our robust internship program serves as a powerful word-of-mouth marketing tool. Interns from Monroe Community College (MCC) and Nazareth University actively volunteer on-site and champion our center's mission by sharing program details across their respective college campuses. We leverage multiple community touchpoints to amplify our reach and boost enrollment. Staff actively inform local families caring for older adults about our specialized nutrition programs and recreational activities. Associates from Associates for Training and Development (A4TD) participate directly in our nutrition program and promote daily menus, arts, and crafts to their personal networks and our dedicated volunteers consistently place informational materials and program flyers directly onto residential housing bulletin boards.

I. How many new participants have joined this contract year 4/1/25-3/31/26? 6
View builder Registration View

5. **OUTCOME OBJECTIVE #5: To have a waste factor of 5% or less.**
Program Year Contract
Waste Factor:

	Meals Ordered[1]	Meals Served[2]	% Waste[3]
Waste Factor	6,291	5,847	7.13%

1. Program Year Waste Analysis Report – Goodwill Billing Report
2. Peer Place Program Year Served Client Summary Report, Does not include Special Events or Emergency Meals which are included in the Total Served for Outcome Objective Above)
3. Subtract 'served' from 'ordered'; divide by 'ordered' then multiple by 100

If above 5%, please state reasons and outline a plan to reach the goal.

Severe winter weather at the start of the year severely depressed daily attendance. Because participants opted to stay home during these hazardous conditions, the center experienced a temporary spike in unconsumed meal waste. The implementation of the new meal ordering system created an unexpected learning curve for Program Coordinators. Operational errors occurred during this transition period, including pre-ordered meals were occasionally delivered even after cancellation requests were submitted. Inflexible system deadlines prevented real-time order modifications to match fluctuating daily attendance.

Program Coordinator will focus specifically on the forecasting, editing, and cancellation modules of the meal ordering system. When severe weather or travel advisories are predicted, coordinators will proactively scale back meal orders by an established baseline percentage, utilizing emergency shelf-stable fallback meals on-site if attendance exceeds the adjusted forecast or frozen antres available.

6. **CONTRIBUTIONS: To collect participant contributions, used to enhance the program.**
   Program Year Application
   A. Projected Contributions $ **6,376** in contract year 4/1/25-3/31/26.
      Projected per meal average of $ **1.42**
      1. Program Year Fiscal Budgets

   B. Actual collected $ **2,600.03** in contract year 4/1/25-3/31/26.
      Actual per meal average of $ **0.44**
      1. Program Year Fiscal Claims

   C. How were the contributions used to enhance the program?
      Contributions were used to enhance the program by using for activities such as wreath making, outings to community health fairs, transportation to and from the public market, Sea Breeze and other centers to participate in socialization events, presentations, holiday celebrations and games.

III. Program Compliance[1]

1. Fire, Building & Health Code Compliance Procedures	Yes	No	Not Required	Comments
Site has fire emergency procedures that meet local fire codes and standards; participants and staff must be familiar with these	☒	☐	☐	Where? Shared Drive How are staff trained? Staff Meetings
All site staff are trained in the use of fire extinguishers and evacuation procedures and this is documented	☒	☐	☐	Training Date: 6/16/25
Evacuation Plans are posted	☒	☐	☐	
Fire extinguishers are strategically placed and inspected annually	☒	☐	☐	Date: January 2026
Facility has at least two clearly identified and well-lit, unobstructed exists	☒	☐	☐	
Fire drills are conducted annually and documented	☒	☐	☐	Date: 6/17/25

Emergency kit is available and has proper supplies and a defibrillator on site	☒	☐	☐	No defibrillator
Monthly Fire and Safety Inspections of the facility are conducted?	☒	☐	☐	Log maintained? The Operations Manager maintains a monthly log which is available for review.
All staff is trained to respond to participant illnesses, accident or other emergencies as appropriate	☒	☐	☐	Frequency of training? Quarterly Is there a policy? Community Place has emergency response policies. All staff are trained and receive a copy. It is also posted in PAYCOR.
Is there an up-to-date copy of your Emergency Disaster Preparedness Procedure Plan (including current phone, cell phone and pager numbers of key staff) on file at MCOFA	☒	☐	☐	UPDATED: 9/27/2024
The center is in compliance with the Americans Disability Act (ADA) requirements?	☒	☐	☐	
2. Postings/On file/ Available/ Replacement Signs	**Yes**	**No**	**Not Required**	**Location**
Registration Forms	☒	☐	☐	Coordinator's Office
Sign In Sheets	☒	☐	☐	Coordinator's Office
Lock Box Available	☒	☐	☐	Locked inside room when not in use
Envelopes Available	☒	☐	☐	
Contribution Sign (including Guest Information)	☒	☐	☐	Serving Line Wall
Grievance Procedure Sign	☒	☐	☐	Bulletin Board
Take Home Food Policy Sign	☒	☐	☐	Dining Room
"EEO is the Law" Poster	☒	☐	☐	Front Hall and Bulletin Board
Poverty Level Guidelines	☒	☐	☐	Serving Line Wall
Emergency Closing Poster	☒	☐	☐	Center/Building doors
Menu Displayed with certified statement	☒	☐	☐	Senior Center bulletin board/extras in sign-in book
Recreation Calendar	☒	☐	☐	Senior Center bulletin board/extras in sign-in book
3. Compliance	**Yes**	**No**	**Not Required**	**Comments**

Reports are submitted on/or before the 10th of the month	☒	☐	☐	
Fiscal Vouchers are submitted no later than 30 days after the end of the quarter.	☒	☐	☐	
Responds to MCOFA in a timely manner when an issue arises	☒	☐	☐	
MCOFA Nutrition Program Policy Manual is on site and accessible	☒	☐	☐	
The staff/volunteers receive orientation and training on the proper methods and procedures pertaining to MCOFA guidelines	☒	☐	☐	Frequency: Staff meetings weekly, Dietician Quarterly trainings Minutes maintained: yes
Training is provided quarterly with agendas and attendances documented. These are shared with MCOFA Program Monitor. Required topics include but not limited to: Procedures for emergency situations, language assistance, food safety and sanitation	☒	☐	☐	
Volunteers receive recognition	☒	☐	☐	
There is a procedure in place that allows participants to present grievances or make complaints?	☒	☐	☐	
Site Council meetings are held at least four times a year	☒	☐	☐	Frequency: Monthly Minutes maintained: No
A representative attends Project Council meetings regularly	☒	☐	☐	5/6 meetings
Participants are notified who their site council/Project Council members are?	☒	☐	☐	On Schedule/agenda shared/posted by Coordinator.
Equal access is granted to candidates regardless of policy view or party affiliation.	☒	☐	☐	
The center is in compliance with Affirmative Action and Equal Opportunity guidelines?	☒	☐	☐	
Provisions have been made to protect the confidentiality of participants' information?	☒	☐	☐	
The Congregate Services noted have a less than 10% missing data per the Peer Place reporting system	☒	☐	☐	
Has the agency given due recognition to the U.S.	☒	☐	☐	

Administration on Aging, the NYS Office for the Aging and Monroe County DHS/Office for the Aging, as appropriate, in program/service brochures, flyers and other printed materials as well as online? *Monthly Coordinator's Report Checklist has most current wording				
The agency has a written policy regarding retention of all Monroe County DHS/Office for the Aging contracted program and fiscal records for six (6) years	☒	☐	☐	*Specifics in MCOFA Nutrition Program Policy Manual
There is representation at 90% of MCOFA Coordinators meetings	☒	☐	☐	
All updated insurance certificates naming the County of Monroe as additionally insured on file with the Monroe County Contract Office (Contrack HQ)	☒	☐	☐	
All Equipment Inventory & Disposition Forms updated and on file at MCOFA	☒	☐	☐	Last updated: 2017
The center is responsive to "LEP" Limited English Proficiency –limited ability to read, speak, write, or understand English	☒	☐	☐	Explain: Tellmorr Contract
The center accommodates LGBT participants	☒	☐	☐	

[1] **As detailed in the Policy Manual , 19-PI-26 and Program Application**

IV. Conclusions

1. **Overall assessment of the strengths**

   Town/Agency Comments: The center successfully offers a warm, community-first atmosphere. Educational presentations are directly informed by regular participant surveys and feedback. Presentations focus directly on the immediate interests, health requirements, and wellness concerns of the participants. Educational sessions, particularly those led by nutritionists, have translated directly into healthier meal choices and increased program contributions. The center maintains a highly secure, predictable, and accessible physical environment for vulnerable seniors. Staff members consistently demonstrate a deeply caring, empathetic, and nurturing approach towards all participants. The facility successfully fosters a vibrant, happy, and comfortable space that combats isolation and promotes emotional well-being. The center has successfully broadened its daily calendar, offering a more diverse range of recreational, tactical, and artistic sessions.

   MCOFA Comments: The center was able to meet or exceeded all goals for this contract period, notably exceeding meal projections while maintaining a lower waste factor. The center is bilingual and does a good job serving many cultures in their programming. Participants report a high level of satisfaction per the annual survey. The center serves the key demographics of the program, with a high diversity reflecting the neighborhood that houses it. The center participants consist of: 54.2% over the age of 75; 49.1 % live alone; 44% report being frail and/or disabled; 84.7% are low income and 50.8% are low income minorities.

2. **Areas in need of attention**

   Town/Agency Comments: Best practices for increasing voluntary meal contributions.

   MCOFA Comments: None at this time.

3. **Additional resources/technical assistance requested**

   Town/Agency Comments: More Care management services and on-going basic technology trainings.

   MCOFA Comments: None at this time.

Satisfaction Survey Analysis- To Be Completed by Center Staff

Center Name: CPGR **Total Distributed: 30** **Total Participants: 30**

Please Enter Total Number of people who answered per column.

	Meals	Classes/Groups	Both
What services do you participate in at the center?			30
	Grab N Go Lunch	In Person Lunch	
Which type of meals have you received this year?		30	

Please Enter Totals for Each Column (Number of people who answered per column)

How do you rate the meals you receive?	Excellent	Good	Fair	Poor
Taste	12	14	4	0
Temperature	16	12	2	0
Variety	11	17	1	1
Overall quality	12	17	1	0

Please Enter Totals for Each Column (Number of people who answered per column multiplied by the number assigned)

	Yes (3)	Maybe (2)	No (1)	No Answer (0)	Total	Total Possible[1]	%[2]
Since coming to the center, have your social opportunities increased?	27(81)	3(6)			87	90	97%
Since coming to the center have you gained knowledge or new skills?	24(72)	6(12)			84	90	93%
Has the center improved the quality of your life?	25(75)	3(6)	2(2)		83	90	92%

[1]Do <u>not</u> count *No Answer* in Total Possible (Total Actually Answered x 3)

[2]Total Divided by Total possible x 100

Would you recommend the Senior Center to friends and family members?

Please Enter Totals for Each Column

Yes (3)	Maybe (2)	No (1)	No Answer (0)	Total	Total Possible[1]	%[2]
28(84)	**2(4)**			**88**	**90**	**98%**

[1]Do not count *No Answer* in Total Possible (Total Actually Answered x 3)

[2]Total Divided by Total possible x 100

Comments/Concerns:

___Keep up the good work! _____I like the healthy food; _____The big bingo cards at the center are hidden away by everyone so we can never reach them.

Department of **Human Services**
Office for the Aging
Monroe County, New York

Adam Bello
County Executive

Thalia Wright
Commissioner

Steve Newcomb
Director

September 10, 2026

Marisol Ubinas
145 Parsells Ave
Rochester, NY 14609

Dear MArisol,

Attached for your records is the completed 2025-26 Annual Program Evaluation for the Monroe County Office for the Aging (MCOFA) funded Senior Center Nutrition Program. The senior center contract is doing well. For comments related to each program and its specific objectives, please read through the evaluation. You may find additional general comments related to the program on the final page of the evaluation.

Thank you for continuing to provide these valued services to our community's older adult population.

Should you have any questions regarding the evaluation, please do not hesitate to contact me at 753-5566.

Sincerely,

Tracy Collins

cc: Monroe County Office for the Aging –Steve Newcomb, Leanne Rorick

Encl: Annual Program and Service Assessment

Monroe County Office for the Aging
Program Evaluation & Contract Compliance
2025-26

ANNUAL PROGRAM AND SERVICE ASSESSMENT

Charles Settlement House Senior Center And Dunn Tower I (Reopened 11/5/25)
71 Parkway
Rochester, New York 14608

Program Representative/Coordinator:
Person Completing: Marisol Ubinas
Phone: 585-277-0810 ext. 401
Fax: 585-277-0839
Email: Marisol.Ubinas@communityplace.org
Funding Period: April 1, 2025 - March 31, 2026
4/1/2025 - 3/31/2026 = WIN
4/1/2025 - 3/31/2026 = CSE
1/1/2025 - 12/31/2025 = CSI

Evaluation Date: 7/29/26
MCOFA Monitor: Tracy Collins

An Annual Evaluation by the Area Agency on Aging (MCOFA) is required by the Older Americans Act. The primary purpose of this evaluation is to review the contract and to ensure that all policies and practices are in compliance with applicable laws and requirements.

Contents:

I.	Contract Budgets
II.	Program Goals
III.	Service Activity Review
IV.	Program Compliance
V.	Conclusions

I. Contract Budget and Service Overview

Congregate Meal Program and Outreach

Contract Period:		April 1, 2025-March 31, 2026	Original [1]
Amount of Contract		#1. Total Budget:	1) $ 64,727
Composed of		#2. Anticipated Contributions: #3. Nutrition Services Incentive (NSIP) #4. Subcontractor Match: #5. MCOFA Funds:	2) $ 13,340 3) $ 0 4) $ 0 5) $ 51,387
AIP	Total Cost	#6. Congregate Meals	6) $ 61,727
	Units	#7. Allocated Meals	7) 5,200
	Unit Cost	#8. Total meal cost: *(#6) divided by allocated meals (#7)*	8) $ 11.87
AIP	Total Cost	#9. Outreach	9) $ 3,000
	Units	#10. Allocated Outreach	10) 75
	Unit Cost	#11. Total Outreach Cost *(#9) divided by allocated meals (#10)*	11) $ 40.00
Funding Sources		OAA, WIN: Wellness in Nutrition	

Senior Recreation and Education

Contract Period:		April 1, 2025-December 31, 2025	Original
Amount of Contract		#1. Total Budget:	1) $ 59,996
Composed of		#4. Subcontractor Match: #5. MCOFA Funds:	4) $ 11,976 5) $ 48,020
AIP	Total Cost	#6. Senior Rec and Ed	6) $ 59,996
	Units	#7. Allocated Units	7) 1200
	Unit Cost	#8. Total unit cost: *(#6) divided by allocated meals (#7)*	8) $ 50.00
Funding Sources		CSE: Community Services for the Elderly	

Senior Recreation and Education

Contract Period:		April 1, 2025-December 31, 2025	Original [1]
Amount of Contract		#1. Total Budget:	1) $ 1,131
Composed of		#4. Subcontractor Match: #5. MCOFA Funds:	4) $ 283 5) $ 848
AIP	Total Cost	#6. Senior Rec and Ed	6) $ 1,131
	Units	#7. Allocated Units	7) 5
	Unit Cost	#8. Total unit cost: *(#6) divided by allocated meals (#7)*	8) $ 226.20
Funding Sources		Congregate Service Initiative (CSI)	

II. Program Goals

To provide individuals aged 60 and over with a balanced meal(s), socialization opportunities, and activities to support mental and physical well-being. Services help participants maintain health, independence, and remain in their homes as long as possible.

1. Performance Projections and Outcomes

A. **Performance Measurement-Eligible Meals Served** is the total number of eligible meals served during the contract year. Eligible meals are considered those meals served to individuals aged 60 and over, their spouses, their disabled and dependent children, and volunteers assisting with the nutrition program.

See [1]Program Year Application Outcome Objective #2 and [2]Peer Place Program Year Served Client Summary Report

Indicator of success: The total number of meals served meets or exceeds annual projections, with success indicated by achieving at least 90% of the projected goal by year-end.

		Assessment Year Projection[1]	Assessment Year Actual[2]	Current Year Projection[1]
Time frame		4/1/25-3/31/26	4/1/25-3/31/26	4/1/26-3/31/27
Eligible Breakfast Meals Served*		2,000	2,576	4,837
% Successful		90%	129%	90%

* Incudes Dunn I starting 11/5/25

Indicator of success: The total number of meals served meets or exceeds annual projections, with success indicated by achieving at least 90% of the projected goal by year-end.

		Assessment Year Projection[1]	Assessment Year Actual[2]	Current Year Projection[1]
Time frame		4/1/25-3/31/26	4/1/25-3/31/26	4/1/26-3/31/27
Eligible Lunch Meals Served		3,200	3,570	3,600
% Successful		90%	112%	90%

B. **Performance Measurement- Participant Satisfaction Survey** Surveys are distributed annually to assess participants' opinions on program services.

See [1]Program Year Application Outcome Objective #3

Indicator of success: 90% or greater of participants respond positively to: "Has attending the center improved your quality of life?"

		Assessment Year Projection[1]	Assessment Year Actual[2]	Current Year Projection[1]
Time frame		4/1/25-3/31/26	4/1/25-3/31/26	4/1/26-3/31/27
Total # of Participants		15	15	25
% Satisfied		90%	91%	90%

Completed [2]Participant Satisfaction Analysis Attached

2. Past performance/Previous recommendation

A. Were there findings from the prior or current year that required corrective actions to address areas of non-compliance? ☐ YES ☒ NO

If yes, please describe:

B. Were all findings from MCOFA's previous monitoring efforts satisfactorily addressed?
☒ YES ☐ NO

III. Service Activity Review

1. **OUTCOME OBJECTIVE #1:** ***To provide services to those unserved and underserved older adults in greatest social or economic need, particularly those who are low-income, low-income minorities, older adults with limited English proficiency, Native Americans, and frail/persons with disabilities and older adults residing in rural areas, in accordance with their need for such services, and to meet specific objectives established by the MCOFA for providing services to the above groups within the Program Service Area (PSA).***

To ensure equal access for participation, services, activities, and informational sessions without regard to race, color, sex, religion, national origin, disability, sexual orientation, marital status, veteran and/or military status, immigration status, creed, domestic violence victim status, criminal history, gender identity, genetic predisposition or carrier status.

Effective April 1, 2025 the following 2025 poverty income guidelines are to be used in identifying low-income older adults. These will be updated for the contract year as soon as available.

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Poverty Income Guidelines

HOUSEHOLD SIZE	100%		125%		150%		185%	
	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly
1	15,650	1,304	19,563	1,630	23,475	1,956	28,953	2,413
2	21,150	1,763	26,438	2,203	31,725	2,644	39,128	3,261
3	26,650	2,221	33,313	2,776	39,975	3,331	49,303	4,109
4	32,150	2,679	40,188	3,349	48,225	4,019	59,478	4,956
For each additional person, add:	5,500 annual amount		6,875 annual amount		8,250 annual amount		10,175 annual amount	

Senior Center and Dunn Combined	**PROJECTED[1] Number of Unduplicated Persons to be served by program**	**ACTUAL[2] Number of Unduplicated Persons to be served by program**	**PROJECTED[1] Percentage of Persons to be served from total served:** ***based on Targeting**	**ACTUAL[2] Percentage of Persons to be served from total served:** ***based on Targeting**
1. Total Unduplicated Persons to be served by program	30	57 (44+13)	100%	190%
Of the Total Persons from line 1.:				
a. 75-84 years	5	14 (13+1)	17.7%	24.6%
b. 85 years and older	2	6 (4+2)	8%	10.5%
Clients by Ethnicity:				
c. Hispanic	1	3 (2+1)	4.2 %	5.2%
Clients by Race:				
d. American Indian/Alaskan Native	0	1 (0+1)	.2%	1.8%
e. Asian	0	0	2.2%	0%
f. Black or African American	3	29(28+1)	9.5 %	50.9%
g. Middle Eastern	N/A	0	N/A	0%
h. North African	N/A	0	N/A	0%
i. White not Hispanic	25	25 (16 +9)	82.1 %	43.9
j. Native Hawaiian/Pacific Islander	0	0	.01%	0%
Clients by Key Characteristics:				
k. Live alone	14	36 (24 +12)	45.1%	63.2%
l. Frail and/or Individuals with Disabilities	9	48 (33 +15)	28.4 %	84.2%
m. Low Income (below 150% of poverty)	5	51 (41 +10)	17.3 %	89.5%
n. Low Income Minority (below 150% of poverty)	0	36 (27 + 12)	2.9%	63.2%
o. Limited English Proficiency	2	5 (3 +2)	5.5%	8.8%
p. Rural*	0	0	8.1%	0%
COMMENTS:	***Local Rural**			

1. Program Year Application Outcome Objective #1
2. From Peer Place Program Year Served Client Summary Report.

2. **OUTCOME OBJECTIVE #2:** ***To serve nutritious meals that meet 1/3 the Dietary Reference Intake per meal for meals served during the contract year. Eligible meals are considered those meals served to individuals over 60, their spouses, their disabled and dependent children, and volunteers at the center who assist in the nutrition program.***

A. To serve [2,000] total eligible breakfast meals by 3/31/26.
Daily average of [8]; # of Days Open for breakfast [238]
Program Year Application
Actual Daily average of [11]; Actual # of Days Open [186] at the center.
Viewbuilder Event Profile Meals View; Does not include Shelf Stable Meals

Actual Daily average of [15]; Actual # of Days Open [21] at Dunn Tower I. (Reopened 11/5/25)
Viewbuilder Event Profile Meals View; Does not include Shelf Stable Meals

1. Actual # of eligible Congregate breakfast meals served: [2,436]; [122]%.

2. Objective met (90%of projection served)? ☒ YES ☐ NO

If successful in reaching this objective, to what do you contribute your success? If performance is below objective, state reasons and outline Corrective Action Plan to reach objective:

Our success is supported by a warm, welcoming environment and ongoing outreach through neighborhood canvassing.

B. To serve [3,200] total eligible lunch meals by 3/31/26.
Daily average of [13]; # of Days Open for lunch [238]
Program Year Application
Actual Daily average of [15]; Actual # of Days Open [229]
Viewbuilder Event Profile Meals View; Does not include Shelf Stable Meals
1. Actual # of eligible Congregate meals served: [3,430]; [107]%.

2. Objective met (90%of projection served)? ☒ YES ☐ NO

If successful in reaching this objective, to what do you contribute your success? If performance is below objective, state reasons and outline Corrective Action Plan to reach objective:

Our success is due to a welcoming, positive environment and continued outreach through neighborhood canvassing.

3. **OUTCOME OBJECTIVE #3: Participants will report that attending the center has improved their quality of life.**

A. See Table above (I. 1. B. Performance Measurement-Customer Satisfaction Survey).

B. Total Number of Recreation and Education activities offered to participants during contract year 4/1/24-3/31/25 [1,061].

C. Of the above total, number of CSI funded Recreation and Education activities offered to participants during contract year 4/1/24-3/31/25 [8].

D. Do you post your Activity Calendar in the Center in a visible location? Yes ☒ No ☐
1. Where is it posted?

Daily activities are posted at the information station in a plastic display holder and included in the monthly activities calendar in the newsletter.

E. Does your center have a newsletter? Yes ☒ No ☐
1. If yes, how often is it published? [Monthly].
2. Did you share a copy with the MCOFA Program Monitor? Yes ☒ No ☐

3. How do you share your Newsletter with the public?

The newsletter is mailed to participants with limited ability to leave home who want to stay informed about activities and outings. Copies are also available on the center's information table and in the organization's lobby. Volunteers share it through their networks, Project Council members distribute it through their churches, and the Family Services Department provides it to clients and families upon request.

F. Participants are given the opportunity to give feedback and input? Yes ☒ No ☐

Staff, Participants and volunteers have monthly meeting and there is a suggestion box that allows them to have 100% input in planning their activities. Information is then communicated to coordinator.

G. Per the Satisfaction Survey (Completed Participant Satisfaction Analysis Attached)

1. Do participants report increased social opportunities? 96 %
2. Do participants report gaining knowledge or new skills? 96 %
3. Do Participants say they would recommend the center? 100 %

4. **OUTCOME OBJECTIVE #4: To provide outreach* to 75 unduplicated older persons per contract period.** Program Year Contract

G. Actual outreach recorded 247

Peer Place Program Year Served Client Summary Report

H. Outreach projection objective met? ☒ YES ☐ NO

If successful in reaching this objective, to what do you contribute your success? If performance is below objective, state reasons and outline Corrective Action Plan to reach objective:

Our success is due to promoting the center at community and agency events, canvassing the neighborhood, and receiving support from current participants, staff, volunteers, and the Urban League.

What tools/opportunities/community partners have you used in reaching unserved/underserved populations matching the demographics of Monroe County (see Demographics chart for populations with lower-than-expected attendance for reference)?

Urban League volunteers and staff canvassed the neighborhood and distributed flyers and brochures.

I. How many new participants have joined this contract year 4/1/25-3/31/26
View builder Registration View

DUNN(20+12)CSH

5. **OUTCOME OBJECTIVE #5: To have a waste factor of 5% or less.**
Program Year Contract

Senior Center	Meals Ordered[1]	Meals Served[2]	% Waste[3]
Breakfast Waste Factor	2,393	2,123	11.28%

Senior Center	Meals Ordered[1]	Meals Served[2]	% Waste[3]
Lunch Waste Factor	3,616	3,391	6.64%

Dunn I	Meals Ordered[1]	Meals Served[2]	% Waste[3]
Waste Factor	420	313	25.5%

1. Program Year Waste Analysis Report – Goodwill Billing Report

2. Peer Place Program Year Served Client Summary Report, Does not include Special Events or Emergency Meals which are included in the Total Served for Outcome Objective Above)
3. Subtract 'served' from 'ordered'; divide by 'ordered' then multiple by 100

If above 5%, please state reasons and outline a plan to reach the goal for each location.

The waste factor was high during this period because meals were not consistently canceled or stored according to procedures.

CSH and Dunn participants will be asked to RSVP for breakfast and lunch two weeks in advance so the coordinator can more accurately estimate daily meal counts. When available, participants will be encouraged to take an additional entrée.

If meals are delivered after the coordinator has attempted to cancel them, the coordinator will contact Foodlink for proper storage guidance.

6. **CONTRIBUTIONS: To collect participant contributions, used to enhance the program.**
Program Year Application

A. Projected Contributions $ **5,813** in contract year 4/1/25-3/31/26.
Projected per meal average of $ **1.12**
1. Program Year Fiscal Budgets

B. Actual collected $ **13,339.10** in contract year 4/1/25-3/31/26.
Actual per meal average of $ **2.27**
1. Program Year Fiscal Claims

C. How were the contributions used to enhance the program?

The contributions were used to purchase craft and art supplies that would enhance prior purchases and add new activities. New color printer for newsletters and participant projects.

III. Program Compliance[1]

1. Fire, Building & Health Code Compliance Procedures	Yes	No	Not Required	Comments
Site has fire emergency procedures that meet local fire codes and standards; participants and staff must be familiar with these	☒	☐	☐	Where? Shared Drive How are staff trained? Staff Meetings
All site staff are trained in the use of fire extinguishers and evacuation procedures, and this is documented	☒	☐	☐	Training Date:10/2025
Evacuation Plans are posted	☒	☐	☐	
Fire extinguishers are strategically placed and inspected annually	☒	☐	☐	Date: 10/2025
Facility has at least two clearly identified and well-lit, unobstructed exists	☒	☐	☐	
Fire drills are conducted annually and documented	☒	☐	☐	Date: 4/2026

Emergency kit is available and has proper supplies and a defibrillator on site	☒	☐	☐	
Monthly Fire and Safety Inspections of the facility are conducted?	☒	☐	☐	Log maintained? The Operations Manager maintains a monthly log which is available for review.
All staff is trained to respond to participant illnesses, accident or other emergencies as appropriate	☒	☐	☐	Frequency of training? Quarterly Is there a policy? CSH has emergency response policies. All staff are trained and receive a copy.
Is there an up-to-date copy of your Emergency Disaster Preparedness Procedure Plan (including current phone, cell phone and pager numbers of key staff) on file at MCOFA	☒	☐	☐	
The center is in compliance with the Americans Disability Act (ADA) requirements?	☒	☐	☐	
2. Postings/On file/ Available/ Replacement Signs	**Yes**	**No**	**Not Required**	**Location**
Registration Forms	☒	☐	☐	Coordinator's Office
Sign In Sheets	☒	☐	☐	In dining room on sign-in table, near projector
Lock Box Available	☒	☐	☐	Locked inside room when not in use
Envelopes Available	☒	☐	☐	Available on lock box
Contribution Sign (including Guest Information)	☒	☐	☐	Serving Line Wall
Grievance Procedure Sign	☒	☐	☐	Bulletin Board
Take Home Food Policy Sign	☒	☐	☐	Dining Room
"EEO is the Law" Poster	☒	☐	☐	Front Hall and Bulletin Board
Poverty Level Guidelines	☒	☐	☐	Serving Line Wall
Emergency Closing Poster	☒	☐	☐	Center/Building doors
Menu Displayed with certified statement	☒	☐	☐	Senior Center bulletin board/extras in sign-in book
Recreation Calendar	☒	☐	☐	Senior Center bulletin board/extras in sign-in book
3. Compliance	**Yes**	**No**	**Not Required**	**Comments**

Reports are submitted on/or before the 10th of the month	☒	☐	☐	
Fiscal Vouchers are submitted no later than 30 days after the end of the quarter.	☒	☐	☐	
Responds to MCOFA in a timely manner when an issue arises	☒	☐	☐	
MCOFA Nutrition Program Policy Manual is on site and accessible	☒	☐	☐	
The staff/volunteers receive orientation and training on the proper methods and procedures pertaining to MCOFA guidelines	☒	☐	☐	Frequency: Staff meetings weekly Minutes maintained: yes
Training is provided quarterly with agendas and attendances documented. These are shared with MCOFA Program Monitor. Required topics include but not limited to: Procedures for emergency situations, language assistance, food safety and sanitation	☒	☐	☐	
Volunteers receive recognition	☒	☐	☐	
There is a procedure in place that allows participants to present grievances or make complaints?	☒	☐	☐	
Site Council meetings are held at least four times a year	☒	☐	☐	Frequency: Weekly Minutes maintained: Yes
A representative attends Project Council meetings regularly	☒	☐	☐	Project Council representatives were switched during this period, The representative started
Participants are notified who their site council/Project Council members are?	☒	☐	☐	How: Weekly meetings
Equal access is granted to candidates regardless of policy view or party affiliation.	☒	☐	☐	
The center is in compliance with Affirmative Action and Equal Opportunity guidelines?	☒	☐	☐	
Provisions have been made to protect the confidentiality of participants' information?	☒	☐	☐	
The Congregate Services noted have a less than 10% missing data per the Peer Place reporting system	☒	☐	☐	
Has the agency given due recognition to the U.S.	☒	☐	☐	

Administration on Aging, the NYS Office for the Aging and Monroe County DHS/Office for the Aging, as appropriate, in program/service brochures, flyers and other printed materials as well as online? *Monthly Coordinator's Report Checklist has most current wording				
The agency has a written policy regarding retention of all Monroe County DHS/Office for the Aging contracted program and fiscal records for six (6) years	☒	☐	☐	*Specifics in MCOFA Nutrition Program Policy Manual
There is representation at 90% of MCOFA Coordinators meetings	☒	☐	☐	
All updated insurance certificates naming the County of Monroe as additionally insured on file with the Monroe County Contract Office (Contrack HQ)	☒	☐	☐	
All Equipment Inventory & Disposition Forms updated and on file at MCOFA	☒	☐	☐	Last updated: 2017
The center is responsive to "LEP" Limited English Proficiency –limited ability to read, speak, write, or understand English	☒	☐	☐	Explain: Tellmorr Contract
The center accommodates LGBT participants	☒	☐	☐	

[1] **As detailed in the Policy Manual , 19-PI-26 and Program Application**

IV. Conclusions

1. **Overall assessment of the strengths**

   Town/Agency Comments: The center continues to focus on the likes and interests of its participants. The friendships and relationships that continue to grow within the center.

   MCOFA Comments: The center was able to exceed the meal projections for both breakfast and lunch, with the addition of Dunn Tower reopening for breakfast starting 11/5/2025. Participants report a high satisfaction with the program. The center, including the meal site at Dunn Tower, continues to serve the target demographic of the program: 35.1% are over the age of 75; 63.2% live alone; 84.2% report being disabled and/or frail; 89.5% are low income; and 63.2% are low-income minorities. The senior center sees a great diversity in attendance with a larger number attending there than the meal site.

2. **Areas in need of attention**

   Town/Agency Comments: Retaining staff needed the most attention-working on plan to reorganize and share coordinator within agencies.

   MCOFA Comments: The center had a higher waste for breakfast, some of this can be attributed to staff turnover. Dunn had significant waste and would benefit from education on projection methods and using a sign-up sheet. Dunn would benefit from continued monitoring and education. Dunn at the time of writing is back on pause as of August 12th, 2026. The program experienced turnover with the coordinator position in 2026, which had some impacts on service due to this.

3. **Additional resources/technical assistance requested**

   Town/Agency Comments: None at this time.

   MCOFA Comments: As needed.

Satisfaction Survey Analysis- To Be Completed By Center Staff

Center Name: Charles Settlement House Total Distributed:17 Total Participants: 15

Please Enter Total Number of people who answered per column.

	Meals	Classes/Groups	Both
What services do you participate in at the center?	3		12
	Breakfast	Lunch	
Which type of meals have you received this year?	15	14	

Please Enter Totals for Each Column (Number of people who answered per column)

How do you rate the breakfast you receive?	Excellent	Good	Fair	Poor
Taste	7	7	1	
Temperature	6	7	2	
Variety	6	9		
Overall quality	6	7	1	

Please Enter Totals for Each Column (Number of people who answered per column)

How do you rate the lunch you receive?	Excellent	Good	Fair	Poor
Taste	4	10	1	
Temperature	4	10	1	
Variety	5	10		
Overall quality	7	8		

Please Enter Totals for Each Column (Number of people who answered per column multiplied by the number assigned)

	Yes (3)	Maybe (2)	No (1)	No Answer (0)	Total	Total Possible	%[2]
Since coming to the center, have your social opportunities increased?	13(39)	2(4)			43	45	96%
Since coming to the center have you gained knowledge or new skills?	13(39)	2(4)			43	45	96%

Has the center improved the quality of your life?	11(33)	4(8)			41	45	91%

[1]Do not count *No Answer* in Total Possible (Total Actually Answered x 3)
[2]Total Divided by Total possible x 100

Would you recommend the Senior Center to friends and family members?
Please Enter Totals for Each Column

Yes (3)	Maybe (2)	No (1)	No Answer (0)	Total	Total Possible[1]	%[2]
15				45	45	100%

[1]Do not count *No Answer* in Total Possible (Total Actually Answered x 3)
[2]Total Divided by Total possible x 100

Comments/Concerns:

_____Keep up the good work _____

Department of **Human Services**
Office for the Aging
Monroe County, New York

Adam Bello
County Executive

Thalia Wright
Commissioner

Steve Newcomb
Director

September 10, 2026

Marisol Ubinas
145 Parsells Ave
Rochester, NY 14609

Dear MArisol,

Attached for your records is the completed 2025-26 Annual Program Evaluation for the Monroe County Office for the Aging (MCOFA) funded Senior Center Nutrition Program. The senior center contract is doing well. For comments related to each program and its specific objectives, please read through the evaluation. You may find additional general comments related to the program on the final page of the evaluation.

Thank you for continuing to provide these valued services to our community's older adult population.

Should you have any questions regarding the evaluation, please do not hesitate to contact me at 753-5566.

Sincerely,

Tracy Collins

cc: Monroe County Office for the Aging –Steve Newcomb, Leanne Rorick

Encl: Annual Program and Service Assessment

Department of **Human Services**
Office for the Aging
Monroe County, New York

Adam Bello
County Executive

Thalia Wright
Commissioner

Steve Newcomb
Director

June 15, 2026

Daniel Hoock
1605 Buffalo Rd
Rochester, NY 14624

Dear Dan,

Attached for your records is the completed 2025 Annual Program Evaluation for the Monroe County Office for the Aging (MCOFA) funded Senior Center Nutrition Program. The senior center contract is doing well. For comments related to each program and its specific objectives, please read through the evaluation. You may find additional general comments related to the program on the final page of the evaluation.

Thank you for continuing to provide these valued services to our community's older adult population.

Should you have any questions regarding the evaluation, please do not hesitate to contact me at 753-5566.

Sincerely,

Tracy Collins

cc: Monroe County Office for the Aging –Steve Newcomb
Gates Senior Center- Kim Vogler

Encl: Annual Program and Service Assessment

Monroe County Office for the Aging
Program Evaluation & Contract Compliance
2025

ANNUAL PROGRAM AND SERVICE ASSESSMENT

Town of Gates
Gates Senior Center

1605 Buffalo Road
Rochester, NY 14624

Program Representative/Coordinator: Kim Vogler, Coordinator;
Person Completing: Daniel Hoock, Recreation Director
Phone: 585-429-8289
Fax:
Email: kvogler@townofgates.org; dhoock@townofgates.org
Funding Period: January 1- December 31, 2025
1/1/2025 - 12/31/2025 = Title IIIC-1
4/1/2025 - 12/31/2025 = CSI

Evaluation Date: 6/3/26
MCOFA Monitor: Tracy Collins

An Annual Evaluation by the Area Agency on Aging (MCOFA) is required by the Older Americans Act. The primary purpose of this evaluation is to review the contract and to ensure that all policies and practices are in compliance with applicable laws and requirements.

Contents:

I.	Contract Budgets
II.	Program Goals
III.	Service Activity Review
IV.	Program Compliance
V.	Conclusions

I. Contract Budget and Service Overview

Congregate Meal Program and Outreach

Contract Period:		January 1, 2025-December 31, 2025	Amended
Amount of Contract		#1. Total Budget:	**1) $ 93,005**
Composed of		#2. Anticipated Contributions: #3. Nutrition Services Incentive (NSIP) #4. Subcontractor Match: #5. MCOFA Funds:	**2) $ 11,000** **3) $ 3,541** **4) $ 22,416** **5) $ 56,048**
AIP	**Total Cost**	#6. Congregate Meals	**6) $ 91,005**
	Units	#7. Allocated Meals	**7) 5,250**
	Unit Cost	#8. Total meal cost: *(#6) divided by allocated meals (#7)*	**8) $ 17.33**
AIP	**Total Cost**	#9. Outreach	**9) $ 2,000**
	Units	#10. Allocated Outreach	**10) 40**
	Unit Cost	#11. Total Outreach Cost *(#9) divided by allocated meals (#10)*	**11) $ 50.00**
Funding Sources		OAA, Title IIIC-1: Nutrition Services for the Elderly	

Senior Recreation and Education

Contract Period:		April 1, 2025-December 31, 2025	Original
Amount of Contract		#1. Total Budget:	**1) $ 1,131**
Composed of		#4. Subcontractor Match: #5. MCOFA Funds:	**4) $ 283** **5) $ 848**
AIP	**Total Cost**	#6. Senior Rec and Ed	**6) $ 1,131**
	Units	#7. Allocated Units	**7) 5**
	Unit Cost	#8. Total unit cost: *(#6) divided by allocated meals (#7)*	**8) $ 226.20**
Funding Sources		Congregate Service Initiative (CSI)	

II. Program Goals

To provide individuals aged 60 and over with a balanced meal(s), socialization opportunities, and activities to support mental and physical well-being. Services help participants maintain health, independence, and remain in their homes as long as possible.

1. Performance Projections and Outcomes

A. **Performance Measurement-Eligible Meals Served** is the total number of eligible meals served during the contract year. Eligible meals are considered those meals served to individuals aged 60 and over, their spouses, their disabled and dependent children, and volunteers assisting with the nutrition program.

See [1]Program Year Application Outcome Objective #2 and [2]Peer Place Program Year Served Client Summary Report

Indicator of success: The total number of meals served meets or exceeds annual projections, with success indicated by achieving at least 90% of the projected goal by year-end.

		Assessment Year Projection[1]	Assessment Year Actual[2]	Current Year Projection[1]
Time frame		1/1/25-12/31/25	1/1/25-12/31/25	1/1/26-12/31/26
Eligible Meals Served		5,250*	5,256	6,000
% Successful		90%	100.1%	90%

*Amended

B. **Performance Measurement- Participant Satisfaction Survey** Surveys are distributed annually to assess participants' opinions on program services.

See [1]Program Year Application Outcome Objective #3

Indicator of success: 90% or greater of participants respond positively to: "Has attending the center improved your quality of life?"

		Assessment Year Projection[1]	Assessment Year Actual[2]	Current Year Projection[1]
Time frame		1/1/25-12/31/25	1/1/25-12/31/25	1/1/26-12/31/26
Total # of Participants		40	41	50
% Satisfied		90%	91%	90%

Completed [2]Participant Satisfaction Analysis Attached

2. Past performance/Previous recommendation

A. Were there findings from the prior or current year that required corrective actions to address areas of non-compliance? ☐ YES ☒ NO

If yes, please describe:

B. Were all findings from MCOFA's previous monitoring efforts satisfactorily addressed?

☒ YES ☐ NO

II. Service Activity Review

1. **OUTCOME OBJECTIVE #1:** ***To provide services to those unserved and underserved older adults in greatest social or economic need, particularly those who are low-income, low-income minorities, older adults with limited English proficiency, Native Americans, and frail/persons with disabilities and older adults residing in rural areas, in accordance with their need for such services, and to meet specific objectives established by the MCOFA for providing services to the above groups within the Program Service Area (PSA).***

   To ensure equal access for participation, services, activities, and informational sessions without regard to race, color, sex, religion, national origin, disability, sexual orientation, marital status, veteran and/or military status, immigration status, creed, domestic violence victim status, criminal history, gender identity, genetic predisposition or carrier status.

Effective April 1, 2025 the following 2025 poverty income guidelines are to be used in identifying low-income older adults. These will be updated for the contract year as soon as available.

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Poverty Income Guidelines

HOUSEHOLD SIZE	100%		125%		150%		185%	
	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly
1	15,650	1,304	19,563	1,630	23,475	1,956	28,953	2,413
2	21,150	1,763	26,438	2,203	31,725	2,644	39,128	3,261
3	26,650	2,221	33,313	2,776	39,975	3,331	49,303	4,109
4	32,150	2,679	40,188	3,349	48,225	4,019	59,478	4,956
For each additional person, add:	5,500 annual amount		6,875 annual amount		8,250 annual amount		10,175 annual amount	

	PROJECTED[1] Number of Unduplicated Persons to be served by program	ACTUAL[2] Number of Unduplicated Persons to be served by program	PROJECTED[1] Percentage of Persons to be served from total served: *based on Targeting	ACTUAL[2] Percentage of Persons to be served from total served: *based on Targeting
1. Total Unduplicated Persons to be served by program	100	101	100%	101%
Of the Total Persons from line 1.:				
a. 75-84 years	18	40	17.7%	39.6%
b. 85 years and older	8	29	8%	28.7%
Clients by Ethnicity:				
c. Hispanic	4	2	4.2 %	2.0%
Clients by Race:				
d. American Indian/Alaskan Native	0	1	.2%	1%
e. Asian	2	0	2.2%	0%
f. Black or African American	10	0	9.5 %	0%
g. Middle Eastern	N/A	0	N/A	0%
h. North African	N/A	0	N/A	0%
i. White not Hispanic	82	92	82.1 %	91%
j. Native Hawaiian/Pacific Islander	0	0	.01%	0%
Clients by Key Characteristics:				
k. Live alone	45	46	45.1%	45.5%
l. Frail and/or Individuals with Disabilities	28	26	28.4 %	25.7%
m. Low Income (below 150% of poverty)	17	48	17.3 %	47.5%
n. Low Income Minority (below 150% of poverty)	3	2	2.9%	2%
o. Limited English Proficiency	6	13	5.5%	12.9%
p. Rural*	8	0	8.1%	0%
COMMENTS:	***Local Rural**			

1. Program Year Application Outcome Objective #1
2. From Peer Place Program Year Served Client Summary Report.

2. **OUTCOME OBJECTIVE #2:** ***To serve nutritious meals that meet 1/3 the Dietary Reference Intake per meal for meals served during the contract year. Eligible meals are considered those meals served to individuals over 60, their spouses, their disabled and dependent children, and volunteers at the center who assist in the nutrition program.***

A. To serve [5,250] total eligible meals by 12/31/25.
Daily average of [37]; # of Days Open for lunch [140]
Program Year Application/2025 IIIC Budget Amendment

1. Actual # of eligible Congregate meals served: [5,249]; [100]%.
Actual Daily average of [37]; Actual # of Days Open [140]
Viewbuilder Event Profile Meals View; Does not include Shelf Stable Meals

2. Objective met (90%of projection served)? ☒ YES ☐ NO

If successful in reaching this objective, to what do you contribute your success? If performance is below objective, state reasons and outline Corrective Action Plan to reach objective:

Overall program quality. Staff, volunteers, food, activities. Transportation option – we are seeing 10+ people riding bus daily

3. **OUTCOME OBJECTIVE #3: Participants will report that attending the center has improved their quality of life.**

A. See Table above (I. 1. B. Performance Measurement-Customer Satisfaction Survey).
Peer Place Program Year Served Client Summary Report

B. Total Number of Recreation and Education activities offered to participants during contract year 1/1/25-12/31/25 [219].

C. Of the above total, number of CSI funded Recreation and Education activities offered to participants during contract year 1/1/25-12/31/25 [5].

D. Do you post your Activity Calendar in the Center in a visible location? Yes ☒ No ☐

1. Where is it posted?

Yes, bulletin boards.

E. Does your center have a newsletter? Yes ☒ No ☐

1. If yes, how often is it published? [monthly].
2. Did you share a copy with the MCOFA Program Monitor? Yes ☒ No ☐
3. How do you share your Newsletter with the public?

Handed to participants/available in the center.

F. Participants are given the opportunity to give feedback and input? Yes ☒ No ☐

Through lunch comment cards, yearly evaluation.

G. Per the Satisfaction Survey (Completed Participant Satisfaction Analysis Attached)

1. Do participants report increased social opportunities? [89]%
2. Do participants report gaining knowledge or new skills? [79]%

3. Do Participants say they would recommend the center? 99 %

4. **OUTCOME OBJECTIVE #4: To provide outreach* to 40 unduplicated older persons per contract period.** Program Year Contract

G. Actual outreach recorded 40

Peer Place Program Year Served Client Summary Report

H. Outreach projection objective met? Yes ☒ No ☐

If successful in reaching this objective, to what do you contribute your success? If performance is below objective, state reasons and outline Corrective Action Plan to reach objective:

Community events

What tools/opportunities/community partners have you used in reaching unserved/underserved populations matching the demographics of Monroe County (see Demographics chart for populations with lower-than-expected attendance for reference)?

Relationships with senior living facilities in area

Promotion in brochure mailed out to all residents

I. How many new participants have joined this contract year 1/1/25-12/31/25? 32

View builder Registration View

J. Do you maintain a waitlist for your services, or in some way experience demand that your center is not able to meet (e.g., requests for meals, recreation or transportation)? Yes ☐ No ☒

Not at capacity

5. **OUTCOME OBJECTIVE #5: To have a waste factor of 5% or less.**

Program Year Contract

Waste Factor:

	Meals Ordered[1]	Meals Served[2]	% Waste[3]
Waste Factor	5,574	5,191	7.19%

1. Program Year Waste Analysis Report – Caterer Billing Report
2. Peer Place Program Year Served Client Summary Report, Does not include Special Events or Emergency Meals which are included in the Total Served for Outcome Objective Above)
3. Subtract 'served' from 'ordered'; divide by 'ordered' then multiple by 100

If above 5%, please state reasons and outline a plan to reach the goal.

Encourage more to eat seconds

Reiterate the need to only sign up for a meal if you are certain you will be attending

6. **CONTRIBUTIONS: Collect participant contributions, used to enhance the program.**

Program Year Application

A. Projected Contributions $ 11,000 in contract year 1/1/25-12/31/25.
Projected per meal average of $ 2.10
1. Program Year Fiscal Budgets

B. Actual collected $ 12,616.55 in contract year 1/1/25-12/31/25.
Actual per meal average of $ 2.40
1. Program Year Fiscal Claims

C. Do you have a contribution policy at the center that aligns with NYSOFA policy 18-PI-17? Yes ☐ No ☒
Use the MCOFA Policy

D. How were the contributions used to enhance the program?

Help to offset overall program costs, purchase supplies. Staffing. Special Events and guest speakers.

III. Program Compliance[1]

1. Fire, Building & Health Code Compliance Procedures	Yes	No	Not Required	Comments
Site has fire emergency procedures that meet local fire codes and standards; participants and staff must be familiar with these	☒	☐	☐	Where? How are staff trained? Periodic fire drills
All site staff are trained in the use of fire extinguishers and evacuation procedures and this is documented	☒	☐	☐	Training Date: 5/13
Evacuation Plans are posted	☒	☐	☐	
Fire extinguishers are strategically placed and inspected annually	☒	☐	☐	Date: May
Facility has at least two clearly identified and well-lit, unobstructed exists	☒	☐	☐	
Fire drills are conducted annually and documented	☒	☐	☐	Date: May, Aug, Oct
Emergency kit is available and has proper supplies and a defibrillator on site	☒	☐	☐	
Monthly Fire and Safety Inspections of the facility are conducted?	☒	☐	☐	Log maintained? No
Is there an up-to-date copy of your Emergency Disaster Preparedness Procedure Plan (including current phone, cell phone and pager numbers of key staff) on file at MCOFA	☒	☐	☐	
The center is in compliance with the Americans Disability Act (ADA) requirements?	☒	☐	☐	
2. Postings/On file/ Available/ Replacement Signs	**Yes**	**No**	**Not Required**	**Location**
Registration Forms	☒	☐	☐	Rec Office

Sign In Sheets	☒	☐	☐	Sign-In Table/rec office
Lock Box Available	☒	☐	☐	Table during service/office
Envelopes Available	☒	☐	☐	Sign-in table
Contribution Sign (including Guest Information)	☒	☐	☐	Sign-in table
Poverty Level Guidelines	☒	☐	☐	Sign-in table
Grievance Procedure Sign	☒	☐	☐	
Take Home Food Policy Sign	☒	☐	☐	
"EEO is the Law" Poster	☒	☐	☐	
Emergency Closing Poster	☒	☐	☐	
Menu Displayed with certified statement	☒	☐	☐	Table & bulletin board & website
Recreation Calendar	☒	☐	☐	Table
3. Compliance	**Yes**	**No**	**Not Required**	**Comments**
Reports are submitted on/or before the 10th of the month	☒	☐	☐	7/12 Coordinator Monthly reports
Fiscal Vouchers are submitted no later than 30 days after the end of the quarter.	☒	☐	☐	
Responds to MCOFA in a timely manner when an issue arises	☒	☐	☐	
MCOFA Nutrition Program Policy Manual is on site and accessible	☒	☐	☐	
The staff/volunteers receive orientation and training on the proper methods and procedures pertaining to MCOFA guidelines	☒	☐	☐	Frequency: quarterly, after county meetings Minutes maintained: no
Training is provided quarterly with agendas and attendances documented. These are shared with MCOFA Program Monitor. Required topics include but not limited to: Center procedures for emergency situations, language assistance, food safety and sanitation	☒	☐	☐	
Volunteers receive recognition	☒	☐	☐	
There is a procedure in place that allows participants to present grievances or make complaints?	☒	☐	☐	

Site Council meetings are held at least four times a year	☒	☐	☐	Frequency: Twice monthly Minutes maintained: No
A representative attends Project Council meetings regularly	☐	☒	☐	None at this time.
Participants are notified who their site council/Project Council members are?	☒	☐	☐	How: during announcements/prior to lunch
Equal access is granted to candidates regardless of policy view or party affiliation.	☒	☐	☐	
The center is in compliance with Affirmative Action and Equal Opportunity guidelines?	☒	☐	☐	
Provisions have been made to protect the confidentiality of participants' information?	☒	☐	☐	
The Congregate Services noted have a less than 10% missing data per the Peer Place reporting system	☒	☐	☐	
Has the agency given due recognition to the U.S. Administration on Aging, the NYS Office for the Aging and Monroe County DHS/Office for the Aging, as appropriate, in program/service brochures, flyers and other printed materials as well as online? **Monthly Coordinator's Report Checklist has most current wording*	☒	☐	☐	
The agency has a written policy regarding retention of all Monroe County DHS/Office for the Aging contracted program and fiscal records for six (6) years	☒	☐	☐	*Specifics in MCOFA Nutrition Program Policy Manual
There is representation at 90% of MCOFA Coordinators meetings	☒	☐	☐	
All updated insurance certificates naming the County of Monroe as additionally insured on file with the Monroe County Contract Office (Contrack HQ)	☒	☐	☐	
All Equipment Inventory & Disposition Forms updated and on file at MCOFA	☒	☐	☐	Last updated: 2017

The center is responsive to "LEP" Limited English Proficiency –limited ability to read, speak, write, or understand English	☒	☐	☐	Explain: Tellmorr Contract
The center accommodates LGBT participants	☒	☐	☐	

[1] **As detailed in the Policy Manual , 19-PI-26 and Program Application**

IV. Conclusions

1. **Overall assessment of the strengths**

   Town/Agency Comments: Continuing to attract new participants. Our programs are very structured, efficient, with friendly and helpful volunteers and staff

   MCOFA Comments: The center demonstrated strong program performance by exceeding its amended meal service projection. Annual survey results indicate a high level of participant satisfaction, reflecting the quality and value of services provided. The program is successfully reaching its intended target population, with participants representing key demographic groups: 68.3% are age 75 or older, 45.5% live alone, 25.7% are frail or disabled, and 47.5% are low-income.

2. **Areas in need of attention**

   Town/Agency Comments: Continuing to work toward 5% waste.

   MCOFA Comments: The center would benefit from exploring ways to increased diversity.

3. **Additional resources/technical assistance requested**

   Town/Agency Comments: None at this time.

   MCOFA Comments: As needed.

Satisfaction Survey Analysis- To Be Completed By Center Staff

Center Name: Gates **Total Distributed: 65** **Total Participants: 41**

Please Enter Total Number of people who answered per column.

	Meals	Classes/Groups	Both
What services do you participate in at the center?	22	1	18
	Grab N Go Lunch	In Person Lunch	
Which type of meals have you received this year?		40	

Please Enter Totals for Each Column (Number of people who answered per column)

How do you rate the meals you receive?	Excellent	Good	Fair	Poor
Taste	**13**	**21**	**5**	**1**
Temperature	**12**	**22**	**6**	
Variety	**16**	**14**	**7**	**3**
Overall quality	**13**	**21**	**5**	**1**

Please Enter Totals for Each Column (Number of people who answered per column multiplied by the number assigned)

	Yes (3)	Maybe (2)	No (1)	No Answer (0)	Total	Total Possible[1]	%[2]
Since coming to the center, have your social opportunities increased?	**29(87)**	**11(22)**	**1**		**110**	**41(123)**	**89%**
Since coming to the center have you gained knowledge or new skills?	**19(57)**	**18(36)**	**4**		**97**	**41(123)**	**79%**
Has the center improved the quality of your life?	**30(90)**	**11(22)**	**0**		**112**	**41(123)**	**91%**

[1]Do <u>not</u> count *No Answer* in Total Possible (Total Actually Answered x 3)

[2]Total Divided by Total possible x 100

Would you recommend the Senior Center to friends and family members?

Please Enter Totals for Each Column

Yes (3)	Maybe (2)	No (1)	No Answer (0)	Total	Total Possible[1]	%[2]
37(111)	1(2)		3(0)	113	114	99%

[1]Do not count *No Answer* in Total Possible (Total Actually Answered x 3)

[2]Total Divided by Total possible x 100

Comments/Concerns:

_We received mostly positive feedback. Occasionally there is some negativity regarding a specific meal, however overall, the food and program is very well liked. _____

Department of **Human Services**
Office for the Aging
Monroe County, New York

Adam Bello
County Executive

Thalia Wright
Commissioner

Steve Newcomb
Director

July 15, 2026

Peter O'Brien
3 Vince Tofany Blvd
Rochester, NY 14612

Dear Pete,

Attached for your records is the completed 2025 Annual Program Evaluation for the Monroe County Office for the Aging (MCOFA) funded Senior Center Nutrition Program. The senior center contract is doing well. For comments related to each program and its specific objectives, please read through the evaluation. You may find additional general comments related to the program on the final page of the evaluation.

Thank you for continuing to provide these valued services to our community's older adult population.

Should you have any questions regarding the evaluation, please do not hesitate to contact me at 753-5566.

Sincerely,

Tracy Collins

cc: Monroe County Office for the Aging –Steve Newcomb, Leanne Rorick

Encl: Annual Program and Service Assessment

Monroe County Office for the Aging
Program Evaluation & Contract Compliance
2025

ANNUAL PROGRAM AND SERVICE ASSESSMENT

Town of Greece
Greece Senior Center
3 Vince Tofany Blvd.
Rochester, NY 14612

Program Representative/Coordinator: Gina Edwards
Phone: 585-720-2939
Fax: 585- 720-2954
Email: gedwards@greeceny.gov
Funding Period: January 1- December 31, 2025
1/1/2025 - 12/31/2025 = Title IIIC-1
4/1/2025 - 12/31/2025 = CSI

Evaluation Date: 6/10/26
MCOFA Monitor: Tracy Collins

An Annual Evaluation by the Area Agency on Aging (MCOFA) is required by the Older Americans Act. The primary purpose of this evaluation is to review the contract and to ensure that all policies and practices are in compliance with applicable laws and requirements.

Contents:

I.	Contract Budgets
II.	Program Goals
III.	Service Activity Review
IV.	Program Compliance
V.	Conclusions

I. Contract Budget and Service Overview

Congregate Meal Program and Outreach

Contract Period:		January 1, 2025-December 31, 2025	Amended
Amount of Contract		#1. Total Budget:	**1) $ 157,537**
Composed of		#2. Anticipated Contributions: #3. Nutrition Services Incentive (NSIP) #4. Subcontractor Match: #5. MCOFA Funds:	**2) $ 16,631** **3) $ 5,452** **4) $ 63,556** **5) $ 71,898**
AIP	**Total Cost**	#6. Congregate Meals	**6) $ 151,537**
	Units	#7. Allocated Meals	**7) 7,700**
	Unit Cost	#8. Total meal cost: *(#6) divided by allocated meals (#7)*	**8) $ 19.68**
AIP	**Total Cost**	#9. Outreach	**9) $6,000**
	Units	#10. Allocated Outreach	**10) 150**
	Unit Cost	#11. Total Outreach Cost *(#9) divided by allocated meals (#10)*	**11) $40.00**
Funding Sources		OAA, Title IIIC-1: Nutrition Services for the Elderly	

Senior Recreation and Education

Contract Period:		April 1, 2025-December 31, 2025	Original
Amount of Contract		#1. Total Budget:	**1) $ 1,131**
Composed of		#4. Subcontractor Match: #5. MCOFA Funds:	**4) $ 283** **5) $ 848**
AIP	**Total Cost**	#6. Senior Rec and Ed	**6) $ 1,131**
	Units	#7. Allocated Units	**7) 9**
	Unit Cost	#8. Total unit cost: *(#6) divided by allocated meals (#7)*	**8) $ 125.00**
Funding Sources		Congregate Service Initiative (CSI)	

II. Program Goals

To provide individuals aged 60 and over with a balanced meal(s), socialization opportunities, and activities to support mental and physical well-being. Services help participants maintain health, independence, and remain in their homes as long as possible.

1. Performance Projections and Outcomes

A. **Performance Measurement-Eligible Meals Served** is the total number of eligible meals served during the contract year. Eligible meals are considered those meals served to individuals aged 60 and over, their spouses, their disabled and dependent children, and volunteers assisting with the nutrition program.

See [1]Program Year Application Outcome Objective #2 and [2]Peer Place Program Year Served Client Summary Report

Indicator of success: The total number of meals served meets or exceeds annual projections, with success indicated by achieving at least 90% of the projected goal by year-end.

		Assessment Year Projection[1]	Assessment Year Actual[2]	Current Year Projection[1]
Time frame		1/1/25-12/31/25	1/1/25-12/31/25	1/1/26-12/31/26
Eligible Meals Served		7,700	8,017	8,500
% Successful		90%	104%	90%

B. **Performance Measurement- Participant Satisfaction Survey** Surveys are distributed annually to assess participants' opinions on program services.

See [1]Program Year Application Outcome Objective #3

Indicator of success: 90% or greater of participants respond positively to: "Has attending the center improved your quality of life?"

		Assessment Year Projection[1]	Assessment Year Actual[2]	Current Year Projection[1]
Time frame		1/1/25-12/31/25	1/1/25-12/31/25	1/1/26-12/31/26
Total # of Participants		40	20	45
% Satisfied		90%	91%	90%

Completed [2]Participant Satisfaction Analysis Attached

2. Past performance/Previous recommendation

A. Were there findings from the prior or current year that required corrective actions to address areas of non-compliance? ☐ YES ☒ NO

If yes, please describe:

B. Were all findings from MCOFA's previous monitoring efforts satisfactorily addressed?

☒ YES ☐ NO

II. Service Activity Review

1. **OUTCOME OBJECTIVE #1:** ***To provide services to those unserved and underserved older adults in greatest social or economic need, particularly those who are low-income, low-income minorities, older adults with limited English proficiency, Native Americans, and frail/persons with disabilities and older adults residing in rural areas, in accordance with their need for such services, and to meet specific objectives established by the MCOFA for providing services to the above groups within the Program Service Area (PSA).***

   To ensure equal access for participation, services, activities, and informational sessions without regard to race, color, sex, religion, national origin, disability, sexual orientation, marital status, veteran and/or military status, immigration status, creed, domestic violence victim status, criminal history, gender identity, genetic predisposition or carrier status.

Effective April 1, 2025 the following 2025 poverty income guidelines are to be used in identifying low-income older adults. These will be updated for the contract year as soon as available.

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Poverty Income Guidelines

HOUSEHOLD SIZE	100%		125%		150%		185%	
	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly
1	15,650	1,304	19,563	1,630	23,475	1,956	28,953	2,413
2	21,150	1,763	26,438	2,203	31,725	2,644	39,128	3,261
3	26,650	2,221	33,313	2,776	39,975	3,331	49,303	4,109
4	32,150	2,679	40,188	3,349	48,225	4,019	59,478	4,956
For each additional person, add:	5,500 annual amount		6,875 annual amount		8,250 annual amount		10,175 annual amount	

	PROJECTED[1] Number of Unduplicated Persons to be served by program	ACTUAL[2] Number of Unduplicated Persons to be served by program	PROJECTED[1] Percentage of Persons to be served from total served: *based on Targeting	ACTUAL[2] Percentage of Persons to be served from total served: *based on Targeting
1. Total Unduplicated Persons to be served by program	120	112	100%	93%
Of the Total Persons from line 1.:				
a. 75-84 years	21	49	17.7%	43.8%
b. 85 years and older	10	22	8%	19.6%
Clients by Ethnicity:				
c. Hispanic	5	3	4.2 %	2.7%
Clients by Race:				
d. American Indian/Alaskan Native	0	2	.2%	1.8%
e. Asian	3	4	2.2%	3.6%
f. Black or African American	11	4	9.5 %	3.6%
g. Middle Eastern	N/A	0	N/A	0%
h. North African	N/A	0	N/A	0%
i. White not Hispanic	99	101	82.1 %	90.2%
j. Native Hawaiian/Pacific Islander	0	1	.01%	1%
Clients by Key Characteristics:				
k. Live alone	54	46	45.1%	41.1%
l. Frail and/or Individuals with Disabilities	34	22	28.4 %	19.6%
m. Low Income (below 150% of poverty)	21	34	17.3 %	30.4%
n. Low Income Minority (below 150% of poverty)	3	1	2.9%	1%
o. Limited English Proficiency	7	0	5.5%	0%
p. Rural*	10	1	8.1%	1%
COMMENTS:	***Local Rural**			

1. Program Year Application Outcome Objective #1
2. From Peer Place Program Year Served Client Summary Report.

2. **OUTCOME OBJECTIVE #2:** ***To serve nutritious meals that meet 1/3 the Dietary Reference Intake per meal for meals served during the contract year. Eligible meals are considered those meals served to individuals over 60, their spouses, their disabled and dependent children, and volunteers at the center who assist in the nutrition program.***

A. To serve [7,700] total eligible meals by 12/31/25.
Daily average of [31]; # of Days Open for lunch [248]
Program Year Application
1. Actual # of eligible Congregate meals served: [7,941]; [103]%.
Actual Daily average of [33]; Actual # of Days Open [238]
Viewbuilder Event Profile Meals View; Does not include Shelf Stable Meals

2. Objective met (90%of projection served)? ☒ YES ☐ NO

If successful in reaching this objective, to what do you contribute your success? If performance is below objective, state reasons and outline Corrective Action Plan to reach objective:

The Community Center has many programs that people come to participate in. When a new person tours our facility, we are diligent in making sure they have all the information about the Nutrition Program. Once people come for the first time and have a positive experience, they bring friends, family and neighbors with them the next time. For this and many reasons our number have been and are continuing to grow.

3. **OUTCOME OBJECTIVE #3: Participants will report that attending the center has improved their quality of life.**

A. See Table above (I. 1. B. Performance Measurement-Customer Satisfaction Survey).
Peer Place Program Year Served Client Summary Report

B. Total Number of Recreation and Education activities offered to participants during contract year 1/1/25-12/31/25 [3,404].

C. Of the above total, number of CSI funded Recreation and Education activities offered to participants during contract year 1/1/25-12/31/25 [7].

D. Do you post your Activity Calendar in the Center in a visible location? Yes ☒ No ☐
1. Where is it posted?

It is available for people to take, in our center entryway.

E. Does your center have a newsletter? Yes ☒ No ☐
1. If yes, how often is it published? [4 x's per year].
2. Did you share a copy with the MCOFA Program Monitor? Yes ☒ No ☐
3. How do you share your Newsletter with the public?

Available on our website. Hard copies available at the center.

F. Participants are given the opportunity to give feedback and input? Yes ☒ No ☐

We have comment cards available at our front desk and on every table in the lunch room.

G. Per the Satisfaction Survey (Completed Participant Satisfaction Analysis Attached)
1. Do participants report increased social opportunities? [91]%
2. Do participants report gaining knowledge or new skills? [85]%
3. Do Participants say they would recommend the center? [100]%

4. **OUTCOME OBJECTIVE #4: To provide outreach* to 150 unduplicated older persons per contract period.** Program Year Contract

G. Actual outreach recorded 112

Peer Place Program Year Served Client Summary Report

H. Outreach projection objective met? Yes ☐ No ☒

If successful in reaching this objective, to what do you contribute your success? If performance is below objective, state reasons and outline Corrective Action Plan to reach objective:

Staff will try to come up with a better way to keep track of the new participants that are given information regarding the nutrition program. Including front desk, staff who do tours and kitchen staff//volunteers.

What tools/opportunities/community partners have you used in reaching unserved/underserved populations matching the demographics of Monroe County (see Demographics chart for populations with lower-than-expected attendance for reference)?

We have a caseworker from Lifespan 1x/week, that the center staff works closely with to help individuals that are in need of assistance.

I. How many new participants have joined this contract year 1/1/25-12/31/25? 20
View builder Registration View

J. Do you maintain a waitlist for your services, or in some way experience demand that your center is not able to meet (e.g., requests for meals, recreation or transportation)? Yes ☒ No ☐

5. **OUTCOME OBJECTIVE #5: To have a waste factor of 5% or less.**
Program Year Contract
Waste Factor:

	Meals Ordered[1]	Meals Served[2]	% Waste[3]
Waste Factor	8,211	7,851	4.4%

1. Program Year Waste Analysis Report – Caterer Billing Report
2. Peer Place Program Year Served Client Summary Report, Does not include Special Events or Emergency Meals which are included in the Total Served for Outcome Objective Above)
3. Subtract 'served' from 'ordered', divide by 'ordered' then multiple by 100

If above 5%, please state reasons and outline a plan to reach the goal.

6. **CONTRIBUTIONS: Collect participant contributions, used to enhance the program.**
Program Year Application

A. Projected Contributions $ 16,631 in contract year 1/1/25-12/31/25.
Projected per meal average of $ 2.16
1. Program Year Fiscal Budgets

B. Actual collected $ 16,631.14 in contract year 1/1/25-12/31/25.
Actual per meal average of $ 2.09
1. Program Year Fiscal Claims

C. Do you have a contribution policy at the center that aligns with NYSOFA policy 18-PI-17? Yes ☒ No ☐

D. How were the contributions used to enhance the program?

We use contributions to make the atmosphere in the nutrition program warm, relaxing and inviting.

III. Program Compliance[1]

1. Fire, Building & Health Code Compliance Procedures	Yes	No	Not Required	Comments
Site has fire emergency procedures that meet local fire codes and standards; participants and staff must be familiar with these	☒	☐	☐	Where? How are staff trained? Electronically shared and annually trained.
All site staff are trained in the use of fire extinguishers and evacuation procedures and this is documented	☒	☐	☐	Training Date:5/20/25
Evacuation Plans are posted	☒	☐	☐	
Fire extinguishers are strategically placed and inspected annually	☒	☐	☐	Date: February 2025
Facility has at least two clearly identified and well-lit, unobstructed exists	☒	☐	☐	
Fire drills are conducted annually and documented	☒	☐	☐	Date: April 2025
Emergency kit is available and has proper supplies and a defibrillator on site	☒	☐	☐	
Monthly Fire and Safety Inspections of the facility are conducted?	☒	☐	☐	Log maintained? Maintenance department keeps record.
Is there an up-to-date copy of your Emergency Disaster Preparedness Procedure Plan (including current phone, cell phone and pager numbers of key staff) on file at MCOFA	☒	☐	☐	
The center is in compliance with the Americans Disability Act (ADA) requirements?	☒	☐	☐	
2. Postings/On file/ Available/ Replacement Signs	**Yes**	**No**	**Not Required**	**Location**
Registration Forms	☒	☐	☐	Front desk and once completed, Gina's office
Sign In Sheets	☒	☐	☐	Front desk and once completed, Gina's office
Lock Box Available	☒	☐	☐	Front desk
Envelopes Available	☒	☐	☐	Front desk
Contribution Sign (including Guest Information)	☒	☐	☐	Front desk on lock box and in Strive guide

Poverty Level Guidelines	☒	☐	☐	Posted in dining area
Grievance Procedure Sign	☒	☐	☐	Posted in dining area
Take Home Food Policy Sign	☒	☐	☐	Administrative office
"EEO is the Law" Poster	☒	☐	☐	Posted in dining area
Emergency Closing Poster	☒	☐	☐	Posted in dining area
Menu Displayed with certified statement	☒	☐	☐	Lunchroom tables, online and Strive guide at front desk/entrance
Recreation Calendar	☒	☐	☐	Strive guide at front desk/entrance and online
3. Compliance	**Yes**	**No**	**Not Required**	**Comments**
Reports are submitted on/or before the 10th of the month	☒	☐	☐	
Fiscal Vouchers are submitted no later than 30 days after the end of the quarter.	☒	☐	☐	
Responds to MCOFA in a timely manner when an issue arises	☒	☐	☐	
MCOFA Nutrition Program Policy Manual is on site and accessible	☒	☐	☐	Gina's office
The staff/volunteers receive orientation and training on the proper methods and procedures pertaining to MCOFA guidelines	☒	☐	☐	Frequency: Monthly Minutes maintained: Yes
Training is provided quarterly with agendas and attendances documented. These are shared with MCOFA Program Monitor. Required topics include but not limited to: Center procedures for emergency situations, language assistance, food safety and sanitation	☒	☐	☐	
Volunteers receive recognition	☒	☐	☐	
There is a procedure in place that allows participants to present grievances or make complaints?	☒	☐	☐	
Site Council meetings are held at least four times a year	☒	☐	☐	Frequency: Monthly (except summer) Minutes maintained: No
A representative attends Project Council meetings regularly	☒	☐	☐	

Participants are notified who their site council/Project Council members are?	☒	☐	☐	How: Notified by staff and peers.
Equal access is granted to candidates regardless of policy view or party affiliation.	☒	☐	☐	
The center is in compliance with Affirmative Action and Equal Opportunity guidelines?	☒	☐	☐	
Provisions have been made to protect the confidentiality of participants' information?	☒	☐	☐	
The Congregate Services noted have a less than 10% missing data per the Peer Place reporting system	☒	☐	☐	
Has the agency given due recognition to the U.S. Administration on Aging, the NYS Office for the Aging and Monroe County DHS/Office for the Aging, as appropriate, in program/service brochures, flyers and other printed materials as well as online? **Monthly Coordinator's Report Checklist has most current wording*	☒	☐	☐	
The agency has a written policy regarding retention of all Monroe County DHS/Office for the Aging contracted program and fiscal records for six (6) years	☒	☐	☐	*Specifics in MCOFA Nutrition Program Policy Manual
There is representation at 90% of MCOFA Coordinators meetings	☒	☐	☐	
All updated insurance certificates naming the County of Monroe as additionally insured on file with the Monroe County Contract Office (Contrack HQ)	☒	☐	☐	
All Equipment Inventory & Disposition Forms updated and on file at MCOFA	☒	☐	☐	Last updated: 2017
The center is responsive to "LEP" Limited English Proficiency –limited ability to read, speak, write, or understand English	☒	☐	☐	Explain: Tellmorr Contract
The center accommodates LGBT participants	☒	☐	☐	

[1] **As detailed in the Policy Manual , 19-PI-26 and Program Application**

IV. Conclusions

1. **Overall assessment of the strengths**

   Town/Agency Comments: None at this time.

   MCOFA Comments: The center continues to do an excellent job serving their area's older adults. They exceeded the meal projection a second year in a row, while continuing maintaining a low food waste factor. The center is often referenced as a example of best practices in our county's program. The center served many of the key demographics of the program with 83.4% of those served over the age of 75, 41.1% live alone, 19.6 % are frail/disabled and 30.1% are low income The community center offer a large selection of recreation and education opportunities. Participants report a high level of satisfaction.

2. **Areas in need of attention**

   Town/Agency Comments: None at this time.

   MCOFA Comments: None at this time.

3. **Additional resources/technical assistance requested**

   Town/Agency Comments:

   - Would like a brief description of how the program budget works
   - Process for replacing kitchen equipment

   MCOFA Comments: Reviewed during meeting. As needed.

Satisfaction Survey Analysis- To Be Completed By Center Staff

Center Name: GREECE **Total Distributed: 20** **Total Participants: 20**

Please Enter Total Number of people who answered per column.

	Meals	Classes/Groups	Both
What services do you participate in at the center?	11	2	4
	Grab N Go Lunch	In Person Lunch	
Which type of meals have you received this year?	0	15	0

Please Enter Totals for Each Column (Number of people who answered per column)

How do you rate the meals you receive?	Excellent	Good	Fair	Poor
Taste	8	7	2	1
Temperature	6	10	1	1
Variety	8	10	0	0
Overall quality	7	10	1	0

Please Enter Totals for Each Column (Number of people who answered per column multiplied by the number assigned)

	Yes (3)	Maybe (2)	No (1)	No Answer (0)	Total	Total Possible[1]	%[2]
Since coming to the center, have your social opportunities increased?	42	10	0	0	52	57	91%
Since coming to the center have you gained knowledge or new skills?	21	12	4	0	33	39	85%
Has the center improved the quality of your life?	42	10	0	0	52	57	91%

[1]Do <u>not</u> count *No Answer* in Total Possible (Total Actually Answered x 3)

[2]Total Divided by Total possible x 100

Would you recommend the Senior Center to friends and family members?

Please Enter Totals for Each Column

Yes (3)	Maybe (2)	No (1)	No Answer (0)	Total	Total Possible[1]	%[2]
54	0	0	0	54	54	100%

[1]Do not count *No Answer* in Total Possible (Total Actually Answered x 3)

[2]Total Divided by Total possible x 100

Comments/Concerns:

- Mashed or FF potatoes, the cut-up ones are too small or overcooked
- Roasted potatoes are overdone, change to FF or mashed potatoes, too many days with broccoli need more variety
- 20% more food "Senior wadding Pool" potatoes over cooked
- This is the highlight of my day; everyone is very friendly here at the lunch tables and staff at the front desk and those that serve the lunches are very friendly and have great smiles
- No more oranges, too hard to peel
- Fried potatoes are over fried, tasteless and hard
- Keep up the great effort
- I thought classes were more expensive than they are, I will try some now, food has been much improved, meals are a good serving size for the most part
- Coffee time more times per week
- I like everyone that works here, and all the activities are good
- Everyone is great that works here, all the activities are good
- Our table did not like the roast beef, looked like dog food and 2 people said the tuna was "gross"
- Thanks to the front desk staff and Gina and her team-they enhance the environment and I look forward to seeing them.
- Miss the grab n go lunches since there are some times conflicts (Dr's appt. for example) with the time that makes it unable to sit and have lunch, a grab n go lunch would make it possible to have a meal instead of having no lunch, thanks to everyone who is responsible for putting these programs together, for some it is a reliable resource for a meal and for socializing.
- The music at lunch time- love, the open line dancing (free)- love. The meal program makes a big difference in my nutrition. The exercise classes keep the seniors moving- who can't pay for expensive memberships. The classes on nutrition, physical therapy, mental well-being, historical interests are well done and interesting. Popcorn and movies are nice treats. Special parties are well done (and events) it's sometimes hard to pay extra for so many things. I know a number of seniors enjoy the card games, table games and "self-driven" games also. (Free movies, craft classes, movement presentations (workshops) inter-generational activities, occasionally maybe??- Thanks for listening.

Department of **Human Services**
Office for the Aging
Monroe County, New York

Adam Bello
County Executive

Thalia Wright
Commissioner

Steve Newcomb
Director

May 11, 2026

Shelly Gorino
515 Calkins Rd
Henrietta, NY 14467

Dear Shelly,

Attached for your records is the completed 2025 Annual Program Evaluation for the Monroe County Office for the Aging (MCOFA) funded Senior Center Nutrition Program. The senior center contract continues to exceed expectations. For comments related to each program and its specific objectives, please read through the evaluation. You may find additional general comments related to the program on the final page of the evaluation.

Thank you for continuing to provide these valued services to our community's older adult population.

Should you have any questions regarding the evaluation, please do not hesitate to contact me at 753-5566.

Sincerely,

Tracy Collins

cc: Monroe County Office for the Aging –Steve Newcomb, Leanne Rorick

Encl: Annual Program and Service Assessment

Monroe County Office for the Aging
Program Evaluation & Contract Compliance
2025

ANNUAL PROGRAM AND SERVICE ASSESSMENT

Town of Henrietta
Henrietta Senior Center

515 Calkins Road
Henrietta, NY 14467

Program Representative/Coordinator: Shelly Gorino
Phone: 585-334-4030
Fax: 585-359-7002
Email: sgorino@henrietta.org
Funding Period: January 1- December 31, 2025
1/1/2025 - 12/31/2025 = Title IIIC-1
4/1/2025 – 12/31/2025 = CSE
4/1/2025 - 12/31/2025 = CSI

Evaluation Date: April 27, 2026
MCOFA Monitor: Tracy Collins

An Annual Evaluation by the Area Agency on Aging (MCOFA) is required by the Older Americans Act. The primary purpose of this evaluation is to review the contract and to ensure that all policies and practices are in compliance with applicable laws and requirements.

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I.	Contract Budgets
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I. Contract Budget and Service Overview

Congregate Meal Program and Outreach

Contract Period:		January 1, 2025-December 31, 2025	Original [1]
Amount of Contract		#1. Total Budget:	1) $ 212,210
Composed of		#2. Anticipated Contributions: #3. Nutrition Services Incentive (NSIP) #4. Subcontractor Match: #5. MCOFA Funds:	2) $ 35,750 3) $ 10,126 4) $ 62,418 5) $ 103,916
AIP	Total Cost	#6. Congregate Meals	6) $ 210,202.30
	Units	#7. Allocated Meals	7) 14,300
	Unit Cost	#8. Total meal cost: *(#6) divided by allocated meals (#7)*	8) $ 14.29
AIP	Total Cost	#9. Outreach	9) $ 2,007.60
	Units	#10. Allocated Outreach	10) 60
	Unit Cost	#11. Total Outreach Cost *(#9) divided by allocated meals (#10)*	11) $ 33.46
Funding Sources		OAA, Title IIIC-1: Nutrition Services for the Elderly	

Senior Recreation and Education

Contract Period:		April 1, 2025-December 31, 2025	Original [1]
Amount of Contract		#1. Total Budget:	1) $ 1,131
Composed of		#4. Subcontractor Match: #5. MCOFA Funds:	4) $ 283 5) $ 848
AIP	Total Cost	#6. Senior Rec and Ed	6) $ 1,131
	Units	#7. Allocated Units	7) 10
	Unit Cost	#8. Total unit cost: *(#6) divided by allocated meals (#7)*	8) $ 113.10
Funding Sources		Congregate Service Initiative (CSI)	

Contract Period:		April 1, 2025-December 31, 2025	Original [1]
Amount of Contract		#1. Total Budget:	1) $ 61,968
Composed of		#4. Subcontractor Match: #5. MCOFA Funds:	4) $ 26,508 5) $ 35,460
AIP	Total Cost	#6. Senior Rec and Ed	6) $ 61,968
	Units	#7. Allocated Units	7) 600
	Unit Cost	#8. Total unit cost: *(#6) divided by allocated meals (#7)*	8) $ 103.28
Funding Sources		Community Services for the Elderly (CSE)	

II. Program Goals

To provide individuals aged 60 and over with a balanced meal(s), socialization opportunities, and activities to support mental and physical well-being. Services help participants maintain health, independence, and remain in their homes as long as possible.

1. Performance Projections and Outcomes

A. **Performance Measurement-Eligible Meals Served** is the total number of eligible meals served during the contract year. Eligible meals are considered those meals served to individuals aged 60 and over, their spouses, their disabled and dependent children, and volunteers assisting with the nutrition program.

See [1]Program Year Application Outcome Objective #2 and [2]Peer Place Program Year Served Client Summary Report

Indicator of success: The total number of meals served meets or exceeds annual projections, with success indicated by achieving at least 90% of the projected goal by year-end.

		Assessment Year Projection[1]	Assessment Year Actual[2]	Current Year Projection[1]
Time frame		1/1/25-12/31/25	1/1/25-12/31/25	1/1/26-12/31/26
Eligible Meals Served		14,300	16,657	17,400
% Successful		90%	116%	90%

B. **Performance Measurement- Participant Satisfaction Survey** Surveys are distributed annually to assess participants' opinions on program services.

See [1]Program Year Application Outcome Objective #3

Indicator of success: 90% or greater of participants respond positively to: "Has attending the center improved your quality of life?"

		Assessment Year Projection[1]	Assessment Year Actual[2]	Current Year Projection[1]
Time frame		1/1/25-12/31/25	1/1/25-12/31/25	1/1/26-12/31/26
Total # of Participants		75	50	50
% Satisfied		90%	96%	90%

Completed [2]Participant Satisfaction Analysis Attached

2. Past performance/Previous recommendation

A. Were there findings from the prior or current year that required corrective actions to address areas of non-compliance? ☐ YES ☒ NO

If yes, please describe:

B. Were all findings from MCOFA's previous monitoring efforts satisfactorily addressed?

☒ YES ☐ NO

II. Service Activity Review

1. <u>OUTCOME OBJECTIVE #1:</u> ***To provide services to those unserved and underserved older adults in greatest social or economic need, particularly those who are low-income, low-income minorities, older adults with limited English proficiency, Native Americans, and frail/persons with disabilities and older adults residing in rural areas, in accordance with their need for such services, and to meet specific objectives established by the MCOFA for providing services to the above groups within the Program Service Area (PSA).***

   To ensure equal access for participation, services, activities, and informational sessions without regard to race, color, sex, religion, national origin, disability, sexual orientation, marital status, veteran and/or military status, immigration status, creed, domestic violence victim status, criminal history, gender identity, genetic predisposition or carrier status.

Effective April 1, 2025 the following 2025 poverty income guidelines are to be used in identifying low-income older adults. These will be updated for the contract year as soon as available.

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Poverty Income Guidelines

HOUSEHOLD SIZE	100%		125%		150%		185%	
	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly
1	15,650	1,304	19,563	1,630	23,475	1,956	28,953	2,413
2	21,150	1,763	26,438	2,203	31,725	2,644	39,128	3,261
3	26,650	2,221	33,313	2,776	39,975	3,331	49,303	4,109
4	32,150	2,679	40,188	3,349	48,225	4,019	59,478	4,956
For each additional person, add:	5,500 annual amount		6,875 annual amount		8,250 annual amount		10,175 annual amount	

	PROJECTED[1] Number of Unduplicated Persons to be served by program	ACTUAL[2] Number of Unduplicated Persons to be served by program	PROJECTED[1] Percentage of Persons to be served from total served: *based on Targeting	ACTUAL[2] Percentage of Persons to be served from total served: *based on Targeting
1. Total Unduplicated Persons to be served by program	450	474	100%	105%
Of the Total Persons from line 1.:				
a. 75-84 years	80	180	17.7%	38%
b. 85 years and older	36	96	8%	20.2%
Clients by Ethnicity:				
c. Hispanic	19	10	4.2 %	2.1%
Clients by Race:				
d. American Indian/Alaskan Native	0	2	.2%	.4%
e. Asian	10	33	2.2%	7%
f. Black or African American	43	33	9.5 %	7%
g. Middle Eastern	N/A	0	N/A	0%
h. North African	N/A	0	N/A	0%
i. White not Hispanic	369	393	82.1 %	82.9%
j. Native Hawaiian/Pacific Islander	0	2	.01%	.4%
Clients by Key Characteristics:				
k. Live alone	203	216	45.1%	45.6%
l. Frail and/or Individuals with Disabilities	128	98	28.4 %	20.7%
m. Low Income (below 150% of poverty)	78	376	17.3 %	79.3%
n. Low Income Minority (below 150% of poverty)	13	39	2.9%	8.2%
o. Limited English Proficiency	25	13	5.5%	2.7%
p. Rural*	36	2	8.1%	.4%
COMMENTS:	***Local Rural**			

1. Program Year Application Outcome Objective #1
2. From Peer Place Program Year Served Client Summary Report.

2. **OUTCOME OBJECTIVE #2:** ***To serve nutritious meals that meet 1/3 the Dietary Reference Intake per meal for meals served during the contract year. Eligible meals are considered those meals served to individuals over 60, their spouses, their disabled and dependent children, and volunteers at the center who assist in the nutrition program.***

A. To serve [14,300] total eligible meals by 12/31/25.
Daily average of [97]; # of Days Open for lunch [148]
Program Year Application
1. Actual # of eligible Congregate meals served: [16,456]; [115]%.
Actual Daily average of [109]; Actual # of Days Open [151]
Viewbuilder Event Profile Meals View; Does not include Shelf Stable Meals

2. Objective met (90%of projection served)? ☒ YES ☐ NO

If successful in reaching this objective, to what do you contribute your success? If performance is below objective, state reasons and outline Corrective Action Plan to reach objective:

Nutritious meals and no cost transportation in addition to exercise classes and speakers encourage participation.

3. **OUTCOME OBJECTIVE #3: Participants will report that attending the center has improved their quality of life.**

A. See Table above (I. 1. B. Performance Measurement-Customer Satisfaction Survey).
Peer Place Program Year Served Client Summary Report

B. Total Number of Recreation and Education activities offered to participants during contract year 1/1/25-12/31/25 [2,193].

C. Of the above total, number of CSI funded Recreation and Education activities offered to participants during contract year 1/1/25-12/31/25 [655].

D. Do you post your Activity Calendar in the Center in a visible location? Yes ☒ No ☐
1. Where is it posted?

The activities calendar is posted by the front desk as well as written on a white board daily. The TV monitor shows weekly activities.

E. Does your center have a newsletter? Yes ☒ No ☐
1. If yes, how often is it published? [Monthly].
2. Did you share a copy with the MCOFA Program Monitor? Yes ☒ No ☐
3. How do you share your Newsletter with the public?

The Newsletter is available on the Town of Henrietta website, the senior center Town page, the center's Facebook page as well as through a weekly email.

F. Participants are given the opportunity to give feedback and input? Yes ☒ No ☐

How? Daily announcements, annual MCOFA survey, and open feedback to all center staff.

G. Per the Satisfaction Survey (Completed Participant Satisfaction Analysis Attached)
1. Do participants report increased social opportunities? [91]%
2. Do participants report gaining knowledge or new skills? [93]%
3. Do Participants say they would recommend the center? [100]%

4. **OUTCOME OBJECTIVE #4: To provide outreach* to 60 unduplicated older persons per contract period.** Program Year Contract

G. Actual outreach recorded 721

Peer Place Program Year Served Client Summary Report

H. Outreach projection objective met? Yes ☒ No ☐

If successful in reaching this objective, to what do you contribute your success? If performance is below objective, state reasons and outline Corrective Action Plan to reach objective:

Annual Housing Fair and Health Fair. AARP Tax Assistance appointments.

What tools/opportunities/community partners have you used in reaching unserved/underserved populations matching the demographics of Monroe County (see Demographics chart for populations with lower-than-expected attendance for reference)?

No cost transportation and activities for Henrietta residents. Housing Fair and Health Fair.

I. How many new participants have joined this contract year 1/1/24-12/31/24? 280
View builder Registration View

J. Do you maintain a waitlist for your services, or in some way experience demand that your center is not able to meet (e.g., requests for meals, recreation or transportation)? Yes ☒ No ☐

5. **OUTCOME OBJECTIVE #5: To have a waste factor of 5% or less.**
Program Year Contract

Waste Factor:

	Meals Ordered[1]	Meals Served[2]	% Waste[3]
Waste Factor	16,542	16,372	1.21%

1. Program Year Waste Analysis Report – Caterer Billing Report
2. Peer Place Program Year Served Client Summary Report, Does not include Special Events or Emergency Meals which are included in the Total Served for Outcome Objective Above)
3. Subtract 'served' from 'ordered'; divide by 'ordered' then multiple by 100

If above 5%, please state reasons and outline a plan to reach the goal.

6. **CONTRIBUTIONS: Collect participant contributions, used to enhance the program.**
Program Year Application

A. Projected Contributions $ 35,750 in contract year 1/1/25-12/31/25.
Projected per meal average of $ 2.50
1. Program Year Fiscal Budgets

B. Actual collected $ 31,646 in contract year 1/1/25-12/31/25.
Actual per meal average of $ 1.92
1. Program Year Fiscal Claims

C. Do you have a contribution policy at the center that aligns with NYSOFA policy 18-PI-17? Yes ☒ No ☐

D. How were the contributions used to enhance the program?

The funds were used to purchase To Go containers, to provide refreshments and fresh fruit daily as well as other extras to enhance the meals.

III. Program Compliance[1]

1. Fire, Building & Health Code Compliance Procedures	Yes	No	Not Required	Comments
Site has fire emergency procedures that meet local fire codes and standards; participants and staff must be familiar with these	☒	☐	☐	How are staff trained? Town training PERMA
All site staff are trained in the use of fire extinguishers and evacuation procedures and this is documented	☒	☐	☐	Training Date: April 15, 2026
Evacuation Plans are posted	☒	☐	☐	
Fire extinguishers are strategically placed and inspected annually	☒	☐	☐	Date: November 2025
Facility has at least two clearly identified and well-lit, unobstructed exists	☒	☐	☐	
Fire drills are conducted annually and documented	☒	☐	☐	4/15/25
Emergency kit is available and has proper supplies and a defibrillator on site	☒	☐	☐	
Monthly Fire and Safety Inspections of the facility are conducted?	☒	☐	☐	Log maintained? no
Is there an up-to-date copy of your Emergency Disaster Preparedness Procedure Plan (including current phone, cell phone and pager numbers of key staff) on file at MCOFA	☒	☐	☐	
The center is in compliance with the Americans Disability Act (ADA) requirements?	☒	☐	☐	
2. Postings/On file/ Available/ Replacement Signs	**Yes**	**No**	**Not Required**	**Location**
Registration Forms	☒	☐	☐	Front Desk
Sign In Sheets	☒	☐	☐	Front Desk
Lock Box Available	☒	☐	☐	Front Desk
Envelopes Available	☒	☐	☐	Front Desk
Contribution Sign (including Guest Information)	☒	☐	☐	Bulletin Board and Lunch Binder

Poverty Level Guidelines	☒	☐	☐	Bulletin Board and Lunch Binder
Grievance Procedure Sign	☒	☐	☐	Bulletin Board and Lunch Binder
Take Home Food Policy Sign	☒	☐	☐	Town Hall offices
"EEO is the Law" Poster	☒	☐	☐	Bulletin Board and Lunch Binder
Emergency Closing Poster	☒	☐	☐	Front Desk
Menu Displayed with certified statement	☒	☐	☐	Bulletin Board
Recreation Calendar	☒	☐	☐	Bulletin Board and Front Desk
3. Compliance	**Yes**	**No**	**Not Required**	**Comments**
Reports are submitted on/or before the 10th of the month	☒	☐	☐	
Fiscal Vouchers are submitted no later than 30 days after the end of the quarter.	☒	☐	☐	
Responds to MCOFA in a timely manner when an issue arises	☒	☐	☐	
MCOFA Nutrition Program Policy Manual is on site and accessible	☒	☐	☐	
The staff/volunteers receive orientation and training on the proper methods and procedures pertaining to MCOFA guidelines	☒	☐	☐	Frequency: As needed Minutes maintained: No
Training is provided quarterly with agendas and attendances documented. These are shared with MCOFA Program Monitor. Required topics include but not limited to: Center procedures for emergency situations, language assistance, food safety and sanitation	☒	☐	☐	See 2025 MCOFA Nutrition Program Tracking Sheet
Volunteers receive recognition	☒	☐	☐	
There is a procedure in place that allows participants to present grievances or make complaints?	☒	☐	☐	
Site Council meetings are held at least four times a year	☒	☐	☐	Frequency: Daily during lunch (when open for Congregate) Minutes maintained: No
A representative attends Project Council meetings regularly	☒	☐	☐	

Participants are notified who their site council/Project Council members are?	☒	☐	☐	How: Project Council Reps share meeting notes with entire group.
Equal access is granted to candidates regardless of policy view or party affiliation.	☒	☐	☐	
The center is in compliance with Affirmative Action and Equal Opportunity guidelines?	☒	☐	☐	
Provisions have been made to protect the confidentiality of participants' information?	☒	☐	☐	
The Congregate Services noted have a less than 10% missing data per the Peer Place reporting system	☒	☐	☐	
Has the agency given due recognition to the U.S. Administration on Aging, the NYS Office for the Aging and Monroe County DHS/Office for the Aging, as appropriate, in program/service brochures, flyers and other printed materials as well as online? **Monthly Coordinator's Report Checklist has most current wording*	☒	☐	☐	
The agency has a written policy regarding retention of all Monroe County DHS/Office for the Aging contracted program and fiscal records for six (6) years	☒	☐	☐	*Specifics in MCOFA Nutrition Program Policy Manual
There is representation at 90% of MCOFA Coordinators meetings	☒	☐	☐	
All updated insurance certificates naming the County of Monroe as additionally insured on file with the Monroe County Contract Office (Contrack HQ)	☒	☐	☐	
All Equipment Inventory & Disposition Forms updated and on file at MCOFA	☒	☐	☐	Last updated: 2017
The center is responsive to "LEP" Limited English Proficiency –limited ability to read, speak, write, or understand English	☒	☐	☐	Explain: Tellmorr Contract How is the public notified? Town Website
The center accommodates LGBT participants	☒	☐	☐	

[1] **As detailed in the Policy Manual , 19-PI-26 and Program Application**

IV. Conclusions

1. **Overall assessment of the strengths**

   Town/Agency Comments: None at this time.

   MCOFA Comments: The center continues to expand, exceeding expectations and projections. Participant satisfaction continues to remain high as demonstrated on their annual satisfaction survey. The center successfully leverages their town's resources for the benefit of their seniors served. The center serves a high population of low income (79.3%), seniors over 75 (58%) who live alone (46%) and maintains diversity parallel to the county population. The center has managed to maintain a low waster factor while serving the highest volume of meals in the county just three days a week.

2. **Areas in need of attention**

   Town/Agency Comments: None at this time.

   MCOFA Comments: None at this time.

3. **Additional resources/technical assistance requested**

   Town/Agency Comments: Peer Place Birthday lists, shows inactive clients

   MCOFA Comments:

Satisfaction Survey Analysis- To Be Completed By Center Staff

Center Name: Henrietta **Total Distributed: 50** **Total Participants: 50**

Please Enter Total Number of people who answered per column.

	Meals	Classes/Groups	Both
What services do you participate in at the center?	13	2	35
	Grab N Go Lunch	In Person Lunch	
Which type of meals have you received this year?	2	48	

Please Enter Totals for Each Column (Number of people who answered per column)

How do you rate the meals you receive?	Excellent	Good	Fair	Poor
Taste	**8**	**28**	**13**	**1**
Temperature	**14**	**19**	**13**	**4**
Variety	**18**	**24**	**6**	**2**
Overall quality	**9**	**24**	**14**	**3**

Please Enter Totals for Each Column (Number of people who answered per column multiplied by the number assigned)

	Yes (3)	Maybe (2)	No (1)	No Answer (0)	Total	Total Possible[1]	%[2]
Since coming to the center, have your social opportunities increased?	**37(111)**	**13(26)**			**137**	**150**	**91%**
Since coming to the center have you gained knowledge or new skills?	**36(108)**	**9(18)**		**5(0)**	**126**	**135**	**93%**
Has the center improved the quality of your life?	**42(126)**	**5(10)**		**3(0)**	**136**	**141**	**96%**

[1]Do not count *No Answer* in Total Possible (Total Actually Answered x 3)
[2]Total Divided by Total possible x 100

Would you recommend the Senior Center to friends and family members?

Please Enter Totals for Each Column

Yes (3)	Maybe (2)	No (1)	No Answer (0)	Total	Total Possible[1]	%[2]
50(150)				**150**	**150**	**100%**

[1]Do not count *No Answer* in Total Possible (Total Actually Answered x 3)
[2]Total Divided by Total possible x 100

Comments/Concerns:

Department of **Human Services**
Office for the Aging
Monroe County, New York

Adam Bello
County Executive

Thalia Wright
Commissioner

Steve Newcomb
Director

July 7, 2026

Thomas Venniro
59 Henry St
Rochester, NY 14468

Dear Tom,

Attached for your records is the completed 2025 Annual Program Evaluation for the Monroe County Office for the Aging (MCOFA) funded Senior Center Nutrition Program. The senior center contract is doing well. For comments related to each program and its specific objectives, please read through the evaluation. You may find additional general comments related to the program on the final page of the evaluation.

Thank you for continuing to provide these valued services to our community's older adult population.

Should you have any questions regarding the evaluation, please do not hesitate to contact me at 753-5566.

Sincerely,

Tracy Collins

cc: Monroe County Office for the Aging –Steve Newcomb, Leanne Rorick

Encl: Annual Program and Service Assessment

Monroe County Office for the Aging
Program Evaluation & Contract Compliance
2025

ANNUAL PROGRAM AND SERVICE ASSESSMENT

Town of Parma
Hilton-Parma Senior Center

59 Henry Street
Rochester, NY 14468

Program Representative/Coordinator: Thomas Venniro – Director; Sherry Farrell - Coordinator
Phone: (585) 392-9030

Fax: N/A

Email: tvenniro@parmany.gov

Funding Period: January 1- December 31, 2025
1/1/2025 - 12/31/2025 = Title IIIC-1
4/1/2025 - 12/31/2025 = CSI

Evaluation Date: 6/10/26
MCOFA Monitor: Tracy Collins

An Annual Evaluation by the Area Agency on Aging (MCOFA) is required by the Older Americans Act. The primary purpose of this evaluation is to review the contract and to ensure that all policies and practices are in compliance with applicable laws and requirements.

Contents:

I.	Contract Budgets
II.	Program Goals
III.	Service Activity Review
IV.	Program Compliance
V.	Conclusions

I. Contract Budget and Service Overview

Congregate Meal Program and Outreach

Contract Period:		January 1, 2025-December 31, 2025	Original [1]
Amount of Contract		#1. Total Budget:	**1) $ 47,377**
Composed of		#2. Anticipated Contributions: #3. Nutrition Services Incentive (NSIP) #4. Subcontractor Match: #5. MCOFA Funds:	**2) $ 3,700** **3) $ 1,275** **4) $ 17,926** **5) $ 24,476**
AIP	**Total Cost**	#6. Congregate Meals	**6) $ 45,377**
	Units	#7. Allocated Meals	**7) 1,800**
	Unit Cost	#8. Total meal cost: *(#6) divided by allocated meals (#7)*	**8) $ 25.21**
AIP	**Total Cost**	#9. Outreach	**9) $2,000**
	Units	#10. Allocated Outreach	**10) 50**
	Unit Cost	#11. Total Outreach Cost *(#9) divided by allocated meals (#10)*	**11) $40.00**
Funding Sources		OAA, Title IIIC-1: Nutrition Services for the Elderly	

Senior Recreation and Education

Contract Period:		April 1, 2025-December 31, 2025	Original [1]
Amount of Contract		#1. Total Budget:	**1) $ 1,131**
Composed of		#4. Subcontractor Match: #5. MCOFA Funds:	**4) $ 283** **5) $ 848**
AIP	**Total Cost**	#6. Senior Rec and Ed	**6) $ 1,131**
	Units	#7. Allocated Units	**7) 5**
	Unit Cost	#8. Total unit cost: *(#6) divided by allocated meals (#7)*	**8) $ 226.20**
Funding Sources		Congregate Service Initiative (CSI)	

II. Program Goals

To provide individuals aged 60 and over with a balanced meal(s), socialization opportunities, and activities to support mental and physical well-being. Services help participants maintain health, independence, and remain in their homes as long as possible.

1. Performance Projections and Outcomes

A. **Performance Measurement-Eligible Meals Served** is the total number of eligible meals served during the contract year. Eligible meals are considered those meals served to individuals aged 60 and over, their spouses, their disabled and dependent children, and volunteers assisting with the nutrition program.

See [1]Program Year Application Outcome Objective #2 and [2]Peer Place Program Year Served Client Summary Report

Indicator of success: The total number of meals served meets or exceeds annual projections, with success indicated by achieving at least 90% of the projected goal by year-end.

		Assessment Year Projection[1]	Assessment Year Actual[2]	Current Year Projection[1]
Time frame		1/1/25-12/31/25	1/1/25-12/31/25	1/1/26-12/31/26
Eligible Meals Served		1,800	1,688	1,800
% Successful		90%	94%	90%

B. **Performance Measurement- Participant Satisfaction Survey** Surveys are distributed annually to assess participants' opinions on program services.

See [1]Program Year Application Outcome Objective #3

Indicator of success: 90% or greater of participants respond positively to: "Has attending the center improved your quality of life?"

		Assessment Year Projection[1]	Assessment Year Actual[2]	Current Year Projection[1]
Time frame		1/1/25-12/31/25	1/1/25-12/31/25	1/1/26-12/31/26
Total # of Participants		20	20	30
% Satisfied		90%	92%	90%

Completed [2]Participant Satisfaction Analysis Attached

2. Past performance/Previous recommendation

A. Were there findings from the prior or current year that required corrective actions to address areas of non-compliance? ☐ YES ☒ NO

If yes, please describe:

B. Were all findings from MCOFA's previous monitoring efforts satisfactorily addressed?

☐ YES ☒ NO Monthly Coordinator Report submission and Project Council attendance

III. Service Activity Review

1. **OUTCOME OBJECTIVE #1:** ***To provide services to those unserved and underserved older adults in greatest social or economic need, particularly those who are low-income, low-income minorities, older adults with limited English proficiency, Native Americans, and frail/persons with disabilities and older adults residing in rural areas, in accordance with their need for such services, and to meet specific objectives established by the MCOFA for providing services to the above groups within the Program Service Area (PSA).***

   To ensure equal access for participation, services, activities, and informational sessions without regard to race, color, sex, religion, national origin, disability, sexual orientation, marital status, veteran and/or military status, immigration status, creed, domestic violence victim status, criminal history, gender identity, genetic predisposition or carrier status.

Effective April 1, 2025 the following 2025 poverty income guidelines are to be used in identifying low-income older adults. These will be updated for the contract year as soon as available.

.

Poverty Income Guidelines

HOUSEHOLD SIZE	100%		125%		150%		185%	
	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly
1	15,650	1,304	19,563	1,630	23,475	1,956	28,953	2,413
2	21,150	1,763	26,438	2,203	31,725	2,644	39,128	3,261
3	26,650	2,221	33,313	2,776	39,975	3,331	49,303	4,109
4	32,150	2,679	40,188	3,349	48,225	4,019	59,478	4,956
For each additional person, add:	5,500 annual amount		6,875 annual amount		8,250 annual amount		10,175 annual amount	

	PROJECTED[1] Number of Unduplicated Persons to be served by program	ACTUAL[2] Number of Unduplicated Persons to be served by program	PROJECTED[1] Percentage of Persons to be served from total served: *based on Targeting	ACTUAL[2] Percentage of Persons to be served from total served: *based on Targeting
1. Total Unduplicated Persons to be served by program	35	44	100%	125%
Of the Total Persons from line 1.:				
a. 75-84 years	6	31	17.7%	70.5%
b. 85 years and older	3	6	8%	13.6%
Clients by Ethnicity:				
c. Hispanic	1	0	4.2 %	0%
Clients by Race:				
d. American Indian/Alaskan Native	0	1	.2%	2.3%
e. Asian	0	0	2.2%	0%
f. Black or African American	3	0	9.5 %	0%
g. Middle Eastern	N/A	0	N/A	0%
h. North African	N/A	0	N/A	0%
i. White not Hispanic	29	43	82.1 %	
j. Native Hawaiian/Pacific Islander	0	0	.01%	0%
Clients by Key Characteristics:				
k. Live alone	16	22	45.1%	50%
l. Frail and/or Individuals with Disabilities	10	19	28.4 %	43.2%
m. Low Income (below 150% of poverty)	6	22	17.3 %	50%
n. Low Income Minority (below 150% of poverty)	1	4	2.9%	9%
o. Limited English Proficiency	2	1	5.5%	2.3%
p. Rural*	3	17	8.1%	38.6%
COMMENTS:	***Local Rural**			

1. Program Year Application Outcome Objective #1
2. From Peer Place Program Year Served Client Summary Report.

2. **OUTCOME OBJECTIVE #2:** ***To serve nutritious meals that meet 1/3 the Dietary Reference Intake per meal for meals served during the contract year. Eligible meals are considered those meals served to individuals over 60, their spouses, their disabled and dependent children, and volunteers at the center who assist in the nutrition program.***

A. To serve 1,800 total eligible meals by 12/31/25.
Daily average of 30 ; # of Days Open for lunch 60
Program Year Application
1. Actual # of eligible Congregate meals served: 1,608 ; 89 %.
Actual Daily average of 29 ; Actual # of Days Open 55
Viewbuilder Event Profile Meals View; Does not include Shelf Stable Meals

2. Objective met (90%of projection served)? ☒ YES ☐ NO

If successful in reaching this objective, to what do you contribute your success? If performance is below objective, state reasons and outline Corrective Action Plan to reach objective:

The performance objective was just missed by a percentage point. This can be attributed to lower number of days open for lunch verses the actual days open (-5). We had to cancel a few times in 2025 due to unforeseen circumstances. We have hired and trained additional staff recently to help prevent this from happening in the future.

3. **OUTCOME OBJECTIVE #3: Participants will report that attending the center has improved their quality of life.**

A. See Table above (I. 1. B. Performance Measurement-Customer Satisfaction Survey).
Peer Place Program Year Served Client Summary Report

B. Total Number of Recreation and Education activities offered to participants during contract year 1/1/25-12/31/25 325 .

C. Of the above total, number of CSI funded Recreation and Education activities offered to participants during contract year 1/1/25-12/31/25 8 .

D. Do you post your Activity Calendar in the Center in a visible location? Yes ☒ No ☐
1. Where is it posted?

In the Recreation Office, outside the office, and in the primary Senior Center space bulletins.

E. Does your center have a newsletter? Yes ☒ No ☐
1. If yes, how often is it published? Quarterly .
2. Did you share a copy with the MCOFA Program Monitor? Yes ☐ No ☒
3. How do you share your Newsletter with the public?

The newsletter can be found in our office, outside of the office, posted in the primary Senior Center space bulletins, and emailed to our database.

F. Participants are given the opportunity to give feedback and input? Yes ☒ No ☐

They are able to communicate and provide feedback to any of our team members in-person, in writing, or over the phone. Many also complete an annual satisfaction survey through this program.

G. Per the Satisfaction Survey (Completed Participant Satisfaction Analysis Attached)
1. Do participants report increased social opportunities? 93 %
2. Do participants report gaining knowledge or new skills? 85 %

3. Do Participants say they would recommend the center? 100 %

4. **OUTCOME OBJECTIVE #4: To provide outreach* to 50 unduplicated older persons per contract period.** Program Year Contract

G. Actual outreach recorded 121

Peer Place Program Year Served Client Summary Report

H. Outreach projection objective met? Yes ☒ No ☐

If successful in reaching this objective, to what do you contribute your success? If performance is below objective, state reasons and outline Corrective Action Plan to reach objective:

The success of this outcome is directly related to increased efforts by our coordinator, Sherry Farrell, who continues to find new ways to reach potential participants in addition to informing office team members of the outreach process. We have elevated tracking efforts, recognizing tax preparation callers and asking office team members to record contact information from new callers, for example. Lastly, we seem to have experienced an increase in new traffic within the program/building.

What tools/opportunities/community partners have you used in reaching unserved/underserved populations matching the demographics of Monroe County (see Demographics chart for populations with lower-than-expected attendance for reference)?

Evening Meals (some are free)
Free Program Offerings
Senior Trips
General Community Events
Westside News Press Releases
Facebook
Monthly/Seasonal Newsletters
Seasonal Brochure
Bulletin Boards
Community Partners (such as Emergency Food Shelf, Parks and Rec. Commission, etc.)

I. How many new participants have joined this contract year 1/1/25-12/31/25? 22

View builder Registration View

J. Do you maintain a waitlist for your services, or in some way experience demand that your center is not able to meet (e.g., requests for meals, recreation or transportation)? Yes ☒ No ☐

Transportation

5. **OUTCOME OBJECTIVE #5: To have a waste factor of 5% or less.**

Program Year Contract

Waste Factor:

	Meals Ordered[1]	Meals Served[2]	% Waste[3]
Waste Factor	1,691	1,552	6.91%

1. Program Year Waste Analysis Report – Caterer Billing Report
2. Peer Place Program Year Served Client Summary Report, Does not include Special Events or Emergency Meals which are included in the Total Served for Outcome Objective Above)
3. Subtract 'served' from 'ordered'; divide by 'ordered' then multiple by 100

If above 5%, please state reasons and outline a plan to reach the goal.

The center will continue to encourage participants to call when they are unable to attend lunches and attempt to fill those open spots. Due to the average number of attendees, a few missed meals can elevate the waste rate.

6. **CONTRIBUTIONS: Collect participant contributions, used to enhance the program.**

Program Year Application

A. Projected Contributions $ 3,700 in contract year 1/1/25-12/31/25.

Projected per meal average of $ 2.06

1. Program Year Fiscal Budgets

B. Actual collected $ 3,898.31 in contract year 1/1/25-12/31/25.
Actual per meal average of $ 2.42
1. Program Year Fiscal Claims

C. Do you have a contribution policy at the center that aligns with NYSOFA policy 18-PI-17? Yes ☒ No ☐
Following the County Policy.

D. How were the contributions used to enhance the program?
Contributions were primarily used to subsidize senior center programming by providing adequate funding for quality activities, equipment, and staffing. These funds allow us to offer free and subsidized programs in addition to program enhancements such as entertainment, keepsakes, special dessert, and additional activities. We have also recently brought on a dedicated senior program part time staff.

IV. Program Compliance[1]

1. Fire, Building & Health Code Compliance Procedures	Yes	No	Not Required	Comments
Site has fire emergency procedures that meet local fire codes and standards; participants and staff must be familiar with these	☒	☐	☐	The Village sets the procedure, and staff reviews as updated. The building department will train staff as needed and requested
All site staff are trained in the use of fire extinguishers and evacuation procedures and this is documented	☒	☐	☐	Training Date: 12/18/25
Evacuation Plans are posted	☒	☐	☐	
Fire extinguishers are strategically placed and inspected annually	☒	☐	☐	Date:1/30/2026
Facility has at least two clearly identified and well-lit, unobstructed exists	☒	☐	☐	
Fire drills are conducted annually and documented	☒	☐	☐	Date: 12/23/25
Emergency kit is available and has proper supplies and a defibrillator on site	☒	☐	☐	We keep a first aid kit in Room 114 and the Recreation Office. An AED is located in the main hallway, first floor.
Monthly Fire and Safety Inspections of the facility are conducted?	☒	☐	☐	Village Office maintains files. All monthly fire equipment inspections are logged on the equipment.
Is there an up-to-date copy of your Emergency Disaster Preparedness Procedure Plan (including current phone, cell phone and pager numbers of key staff) on file at MCOFA	☒	☐	☐	

The center is in compliance with the Americans Disability Act (ADA) requirements?	☒	☐	☐	
2. Postings/On file/ Available/ Replacement Signs	**Yes**	**No**	**Not Required**	**Location**
Registration Forms	☒	☐	☐	Parks and Rec Office
Sign In Sheets	☒	☐	☐	Parks and Rec Office
Lock Box Available	☒	☐	☐	Parks and Rec Office, but brought down to lunch area for use.
Envelopes Available	☒	☐	☐	Parks and Rec Office
Contribution Sign (including Guest Information)	☒	☐	☐	Program Space
Poverty Level Guidelines	☒	☐	☐	Program Space
Grievance Procedure Sign	☒	☐	☐	Program Space
Take Home Food Policy Sign	☒	☐	☐	Parks and Rec Office
"EEO is the Law" Poster	☒	☐	☐	Program Space
Emergency Closing Poster	☒	☐	☐	Program Space
Menu Displayed with certified statement	☒	☐	☐	Program Space and Parks/Rec Office
Recreation Calendar	☒	☐	☐	Program Space and Parks/Rec Office
3. Compliance	**Yes**	**No**	**Not Required**	**Comments**
Reports are submitted on/or before the 10th of the month	☐	☒	☐	4/12 months – The addition of a staff is also meant to assist with compliance.
Fiscal Vouchers are submitted no later than 30 days after the end of the quarter.	☒	☐	☐	
Responds to MCOFA in a timely manner when an issue arises	☒	☐	☐	
MCOFA Nutrition Program Policy Manual is on site and accessible	☒	☐	☐	
The staff/volunteers receive orientation and training on the proper methods and procedures pertaining to MCOFA guidelines	☒	☐	☐	Frequency: As updated or upon hire. Minutes maintained: No

Training is provided quarterly with agendas and attendances documented. These are shared with MCOFA Program Monitor. Required topics include but not limited to: Center procedures for emergency situations, language assistance, food safety and sanitation	☒	☐	☐	
Volunteers receive recognition	☒	☐	☐	
There is a procedure in place that allows participants to present grievances or make complaints?	☒	☐	☐	
Site Council meetings are held at least four times a year	☒	☐	☐	Frequency: Monthly (typically) Minutes maintained: Yes, kept in Recreation Office
A representative attends Project Council meetings regularly	☐	☒	☐	1/6 meetings
Participants are notified who their site council/Project Council members are?	☒	☐	☐	How: At lunches/evening meals during announcements and recognition events.
Equal access is granted to candidates regardless of policy view or party affiliation.	☒	☐	☐	
The center is in compliance with Affirmative Action and Equal Opportunity guidelines?	☒	☐	☐	
Provisions have been made to protect the confidentiality of participants' information?	☒	☐	☐	
The Congregate Services noted have a less than 10% missing data per the Peer Place reporting system	☒	☐	☐	
Has the agency given due recognition to the U.S. Administration on Aging, the NYS Office for the Aging and Monroe County DHS/Office for the Aging, as appropriate, in program/service brochures, flyers and other printed materials as well as online? **Monthly Coordinator's Report Checklist has most current wording*	☒	☐	☐	
The agency has a written policy regarding retention of all Monroe County DHS/Office for the Aging contracted program and fiscal records for six (6) years	☒	☐	☐	*Specifics in MCOFA Nutrition Program Policy Manual

There is representation at 90% of MCOFA Coordinators meetings	☐	☒	☐	4/12 meetings – The addition of a staff is also meant to assist with compliance.
All updated insurance certificates naming the County of Monroe as additionally insured on file with the Monroe County Contract Office (Contrack HQ)	☒	☐	☐	
All Equipment Inventory & Disposition Forms updated and on file at MCOFA	☒	☐	☐	Last updated: 2017
The center is responsive to "LEP" Limited English Proficiency –limited ability to read, speak, write, or understand English	☒	☐	☐	Explain: Tellmorr Contract
The center accommodates LGBT participants	☒	☐	☐	

[1] **As detailed in the Policy Manual , 19-PI-26 and Program Application**

V. Conclusions

1. **Overall assessment of the strengths**

   Town/Agency Comments: The Town is pleased with the program and direction it has been going in. We have experienced increased outreach efforts and are excited to welcome new program attendees.

   MCOFA Comments: The center continues to reach its projections and maintain a high satisfaction per the annual survey. The center's participants align with the key demographics of the program: 84% are over the age of 75; 50% live alone; 43.2% are frail or disable; 50% low income; 38.6% are rural.

2. **Areas in need of attention**

   Town/Agency Comments: The Town if equally excited to welcome a dedicated part-time team member to the program. This will assist us in reaching all objectives, program compliance, and provide us several backup plans in the event one team member may not be available.

   MCOFA Comments: The areas the Town struggled with were largely due to staffing, which should be addressed with the addition of another dedicated staff person. The Town would benefit from Project Council members able to attend more often to offer feedback at the meeting/

3. **Additional resources/technical assistance requested**

   Town/Agency Comments: Our kitchen space is limited. Some of this is related to the space itself and some to the equipment at our disposal. If there is ever any resource assistance made available, we would be interested in discussing it further. We appreciate all of your assistance and support.

   MCOFA Comments: As needed.

Satisfaction Survey Analysis- To Be Completed By Center Staff

Center Name: Hilton-Parma **Total Distributed: 20** **Total Participants: 20**

Please Enter Total Number of people who answered per column.

	Meals	Classes/Groups	Both
What services do you participate in at the center?	5		15
	Breakfast	Lunch	
Which type of meals have you received this year?		20	

Please Enter Totals for Each Column (Number of people who answered per column)

How do you rate the lunch you receive?	Excellent	Good	Fair	Poor
Taste	8	12	0	0
Temperature	8	12	0	0
Variety	9	10	1	0
Overall quality	10	9	1	0

Please Enter Totals for Each Column (Number of people who answered per column multiplied by the number assigned)

	Yes (3)	Maybe (2)	No (1)	No Answer (0)	Total	Total Possible[1]	%[2]
Since coming to the center, have your social opportunities increased?	16	4	0	0	56	60	93
Since coming to the center have you gained knowledge or new skills?	11	9	0	0	51	60	85
Has the center improved the quality of your life?	15	5	0	0	55	60	92

[1]Do not count *No Answer* in Total Possible (Total Actually Answered x 3)
[2]Total Divided by Total possible x 100

Would you recommend the Senior Center to friends and family members?

Please Enter Totals for Each Column

Yes (3)	Maybe (2)	No (1)	No Answer (0)	Total	Total Possible[1]	%[2]
20	0	0	0	60	60	100

[1]Do not count *No Answer* in Total Possible (Total Actually Answered x 3)
[2]Total Divided by Total possible x 100

Comments/Concerns:

More mashed sweet potatoes, everyone friendly & helpful, enjoy the meals, monthly birthday dessert appreciated, clementines for those with dentures, very helpful staff, great Senior Center, Sherry is a wonderful host, very positive atmosphere, very helpful, Sherry does a great job, vegetables sometimes undercooked, not enough food.

Department of **Human Services**
Office for the Aging
Monroe County, New York

Adam Bello
County Executive

Thalia Wright
Commissioner

Steve Newcomb
Director

July 31, 2026

Carmen Outlaw-Mayoliz
450 Skyview Centre Parkway
Suite 200
Rochester, NY 14617

Dear Carmen,

Attached for your records is the completed 2025 Annual Program Evaluation for the Monroe County Office for the Aging (MCOFA) funded Senior Center Nutrition Program. The senior center contract is doing well. For comments related to each program and its specific objectives, please read through the evaluation. You may find additional general comments related to the program on the final page of the evaluation.

Thank you for continuing to provide these valued services to our community's older adult population.

Should you have any questions regarding the evaluation, please do not hesitate to contact me at 753-5566.

Sincerely,

Tracy Collins

cc: Monroe County Office for the Aging –Steve Newcomb, Leanne Rorick

Encl: Annual Program and Service Assessment

I. Contract Budget and Service Overview

Congregate Meal Program and Outreach

Contract Period:		January 1, 2025-December 31, 2025	Original [1]
Amount of Contract		#1. Total Budget:	**1) $ 156,708**
Composed of		#2. Anticipated Contributions: #3. Nutrition Services Incentive (NSIP) #4. Subcontractor Match: #5. MCOFA Funds:	**2) $ 12,000** **3) $ 4,957** **4) $ 49,857** **5) $ 89,894**
AIP	**Total Cost**	#6. Congregate Meals	**6) $ 155,908**
	Units	#7. Allocated Meals	**7) 6,400**
	Unit Cost	#8. Total meal cost: *(#6) divided by allocated meals (#7)*	**8) $ 24.36**
AIP	**Total Cost**	#9. Outreach	**9) $ 800**
	Units	#10. Allocated Outreach	**10) 40**
	Unit Cost	#11. Total Outreach Cost *(#9) divided by allocated meals (#10)*	**11) $ 20.00**
Funding Sources		OAA, Title IIIC-1: Nutrition Services for the Elderly	

Senior Recreation and Education

Contract Period:		April 1, 2025-December 31, 2025	Original [1]
Amount of Contract		#1. Total Budget:	**1) $ 1,131**
Composed of		#4. Subcontractor Match: #5. MCOFA Funds:	**4) $ 283** **5) $ 848**
AIP	**Total Cost**	#6. Senior Rec and Ed	**6) $ 1,131**
	Units	#7. Allocated Units	**7) 5**
	Unit Cost	#8. Total unit cost: *(#6) divided by allocated meals (#7)*	**8) $ 226.20**
Funding Sources		Congregate Service Initiative (CSI)	

II. Program Goals

To provide individuals aged 60 and over with a balanced meal(s), socialization opportunities, and activities to support mental and physical well-being. Services help participants maintain health, independence, and remain in their homes as long as possible.

1. Performance Projections and Outcomes

A. **Performance Measurement-Eligible Meals Served** is the total number of eligible meals served during the contract year. Eligible meals are considered those meals served to individuals aged 60 and over, their spouses, their disabled and dependent children, and volunteers assisting with the nutrition program.

See [1]Program Year Application Outcome Objective #2 and [2]Peer Place Program Year Served Client Summary Report

Indicator of success: The total number of meals served meets or exceeds annual projections, with success indicated by achieving at least 90% of the projected goal by year-end.

		Assessment Year Projection[1]	Assessment Year Actual[2]	Current Year Projection[1]
Time frame		1/1/25-12/31/25	1/1/25-12/31/25	1/1/26-12/31/26
Eligible Meals Served		6,400*	6,980**	7,500
% Successful		90%	109%	90%

* Narrative showed incorrect number of 7,000 meals ** Does Not include 416 Ineligible Meals

B. **Performance Measurement- Participant Satisfaction Survey** Surveys are distributed annually to assess participants' opinions on program services.

See [1]Program Year Application Outcome Objective #3

Indicator of success: 90% or greater of participants respond positively to: "Has attending the center improved your quality of life?"

		Assessment Year Projection[1]	Assessment Year Actual[2]	Current Year Projection[1]
Time frame		1/1/25-12/31/25	1/1/25-12/31/25	1/1/26-12/31/26
Total # of Participants		40	35	30
% Satisfied		90%	87%	90%

Completed [2]Participant Satisfaction Analysis Attached

2. Past performance/Previous recommendation

A. Were there findings from the prior or current year that required corrective actions to address areas of non-compliance? ☐ YES ☒ NO

If yes, please describe:

B. Were all findings from MCOFA's previous monitoring efforts satisfactorily addressed?

☐ YES ☒ NO waste, diversity

III. Service Activity Review

1. **OUTCOME OBJECTIVE #1:** ***To provide services to those unserved and underserved older adults in greatest social or economic need, particularly those who are low-income, low-income minorities, older adults with limited English proficiency, Native Americans, and frail/persons with disabilities and older adults residing in rural areas, in accordance with their need for such services, and to meet specific objectives established by the MCOFA for providing services to the above groups within the Program Service Area (PSA).***

   To ensure equal access for participation, services, activities, and informational sessions without regard to race, color, sex, religion, national origin, disability, sexual orientation, marital status, veteran and/or military status, immigration status, creed, domestic violence victim status, criminal history, gender identity, genetic predisposition or carrier status.

Effective April 1, 2025 the following 2025 poverty income guidelines are to be used in identifying low-income older adults. These will be updated for the contract year as soon as available.

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Poverty Income Guidelines

HOUSEHOLD SIZE	100%		125%		150%		185%	
	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly
1	15,650	1,304	19,563	1,630	23,475	1,956	28,953	2,413
2	21,150	1,763	26,438	2,203	31,725	2,644	39,128	3,261
3	26,650	2,221	33,313	2,776	39,975	3,331	49,303	4,109
4	32,150	2,679	40,188	3,349	48,225	4,019	59,478	4,956
For each additional person, add:	5,500 annual amount		6,875 annual amount		8,250 annual amount		10,175 annual amount	

	PROJECTED[1] Number of Unduplicated Persons to be served by program	ACTUAL[2] Number of Unduplicated Persons to be served by program	PROJECTED[1] Percentage of Persons to be served from total served: *based on Targeting	ACTUAL[2] Percentage of Persons to be served from total served: *based on Targeting
1. Total Unduplicated Persons to be served by program	50	49	100%	98%
Of the Total Persons from line 1.:				
a. 75-84 years	9	22	17.7%	44.9%
b. 85 years and older	4	15	8%	30.6%
Clients by Ethnicity:				
c. Hispanic	2	0	4.2 %	0%
Clients by Race:				
d. American Indian/Alaskan Native	0	0	.2%	0%
e. Asian	1	0	2.2%	0%
f. Black or African American	5	1	9.5 %	2%
g. Middle Eastern	N/A	0	N/A	0%
h. North African	N/A	0	N/A	0%
i. White not Hispanic	41	43	82.1 %	87.8%
j. Native Hawaiian/Pacific Islander	0	0	.01%	0%
Clients by Key Characteristics:				
k. Live alone	23	30	45.1%	61.2%
l. Frail and/or Individuals with Disabilities	14	16	28.4 %	32.7%
m. Low Income (below 150% of poverty)	9	15	17.3 %	30.6%
n. Low Income Minority (below 150% of poverty)	1	0	2.9%	0%
o. Limited English Proficiency	3	1	5.5%	2%
p. Rural*	4	0	8.1%	0%
COMMENTS:	***Local Rural**			

1. Program Year Application Outcome Objective #1
2. From Peer Place Program Year Served Client Summary Report.

2. **OUTCOME OBJECTIVE #2:** ***To serve nutritious meals that meet 1/3 the Dietary Reference Intake per meal for meals served during the contract year. Eligible meals are considered those meals served to individuals over 60, their spouses, their disabled and dependent children, and volunteers at the center who assist in the nutrition program.***

A. To serve [6,400] total eligible meals by 12/31/25.
Daily average of [25]; # of Days Open for lunch [260]
Program Year Application
1. Actual # of eligible Congregate meals served: [6880]; [107] %.
Actual Daily average of [28]; Actual # of Days Open [243]
Viewbuilder Event Profile Meals View; Does not include Shelf Stable Meals

2. Objective met (90%of projection served)? ☒ YES ☐ NO

If successful in reaching this objective, to what do you contribute your success? If performance is below objective, state reasons and outline Corrective Action Plan to reach objective:

Reaching out to the older adults at different Housing Facilities and at different Senior expos.

3. **OUTCOME OBJECTIVE #3: Participants will report that attending the center has improved their quality of life.**

A. See Table above (I. 1. B. Performance Measurement-Customer Satisfaction Survey).
Peer Place Program Year Served Client Summary Report

B. Total Number of Recreation and Education activities offered to participants during contract year 1/1/25-12/31/25 [1,512].

C. Of the above total, number of CSI funded Recreation and Education activities offered to participants during contract year 1/1/25-12/31/25 [22].

D. Do you post your Activity Calendar in the Center in a visible location? Yes ☒ No ☐
1. Where is it posted?

It is posted on the board in the dining room and copies are made and place for all participants to take.

E. Does your center have a newsletter? Yes ☒ No ☐
1. If yes, how often is it published? [Quarterly].
2. Did you share a copy with the MCOFA Program Monitor? Yes ☐ No ☒
3. How do you share your Newsletter with the public?

Available in the center and is emailed to registered participants

F. Participants are given the opportunity to give feedback and input? Yes ☒ No ☐

We have a box with comment cards so they could give us their feedback.

G. Per the Satisfaction Survey (Completed Participant Satisfaction Analysis Attached)

1. Do participants report increased social opportunities? [90] %
2. Do participants report gaining knowledge or new skills? [88] %
3. Do Participants say they would recommend the center? [92] %

4. **OUTCOME OBJECTIVE #4: To provide outreach* to 40 unduplicated older persons per contract period.** Program Year Contract

G. Actual outreach recorded 20

Peer Place Program Year Served Client Summary Report

H. Outreach projection objective met? Yes ☐ No ☒

If successful in reaching this objective, to what do you contribute your success? If performance is below objective, state reasons and outline Corrective Action Plan to reach objective:

We plan to have more targeted outreach this year.

What tools/opportunities/community partners have you used in reaching unserved/underserved populations matching the demographics of Monroe County (see Demographics chart for populations with lower-than-expected attendance for reference)?

Connecting to new senior housing, in addition to other residents. The center hosted a senior fair expo. Staying in touch with the directors from the centers and sending them my monthly menus and activity calendars.

I. How many new participants have joined this contract year 1/1/25-12/31/25? 16
View builder Registration View

J. Do you maintain a waitlist for your services, or in some way experience demand that your center is not able to meet (e.g., requests for meals, recreation or transportation)? Yes ☐ No ☒

5. **OUTCOME OBJECTIVE #5: To have a waste factor of 5% or less.**
Program Year Contract

Waste Factor:

	Meals Ordered[1]	Meals Served[2]	% Waste[3]
Waste Factor	8,660	7,235	29.86%

1. Program Year Waste Analysis Report – Caterer Billing Report
2. Peer Place Program Year Served Client Summary Report, Does not include Special Events or Emergency Meals which are included in the Total Served for Outcome Objective Above)
3. Subtract 'served' from 'ordered'; divide by 'ordered' then multiple by 100

If above 5%, please state reasons and outline a plan to reach the goal.

Waste is significantly lower in 2026 so far. I am going to start presenting the menu ahead of time so they could reserve their meals ahead of time.

6. **CONTRIBUTIONS: Collect participant contributions, used to enhance the program.**
Program Year Application

A. Projected Contributions $ 12,000 in contract year 1/1/25-12/31/25.
Projected per meal average of $ 1.88
1. Program Year Fiscal Budgets

B. Actual collected $ 10,029.32 in contract year 1/1/25-12/31/25.
Actual per meal average of $ 1.45
1. Program Year Fiscal Claims

C. Do you have a contribution policy at the center that aligns with NYSOFA policy 18-PI-17? Yes ☐ No ☒
Use MCOFA policy.

D. How were the contributions used to enhance the program?

Contributions are rolled back into the program for enhancements like staff time, decors, events and more.

IV. Program Compliance[1]

1. Fire, Building & Health Code Compliance Procedures	Yes	No	Not Required	Comments
Site has fire emergency procedures that meet local fire codes and standards; participants and staff must be familiar with these	☒	☐	☐	The Fire Marshal or other fire dept. staff comes to the building to provide a one-day training that includes videos, paperwork, and walking the building. All new hires go through this training as well and all staff receiving an annual training.
All site staff are trained in the use of fire extinguishers and evacuation procedures and this is documented	☒	☐	☐	Training Date: 9/12/25
Evacuation Plans are posted	☒	☐	☐	
Fire extinguishers are strategically placed and inspected annually	☒	☐	☐	Date: 4/2026
Facility has at least two clearly identified and well-lit, unobstructed exists	☒	☐	☐	
Fire drills are conducted annually and documented	☒	☐	☐	Date: 9/13/25
Emergency kit is available and has proper supplies and a defibrillator on site	☒	☐	☐	
Monthly Fire and Safety Inspections of the facility are conducted?	☒	☐	☐	We have a fire & safety officer that come through the building and conduct inspections. Logs are maintained.
Is there an up-to-date copy of your Emergency Disaster Preparedness Procedure Plan (including current phone, cell phone and pager numbers of key staff) on file at MCOFA	☒	☐	☐	
The center is in compliance with the Americans Disability Act (ADA) requirements?	☒	☐	☐	
2. Postings/On file/ Available/ Replacement Signs	**Yes**	**No**	**Not Required**	**Location**
Registration Forms	☒	☐	☐	Senior Desk
Sign In Sheets	☒	☐	☐	Senior Desk
Lock Box Available	☒	☐	☐	Front Desk
Envelopes Available	☒	☐	☐	Front Desk

Contribution Sign (including Guest Information)	☒	☐	☐	Lunch Room
Poverty Level Guidelines	☒	☐	☐	Lunch Room
Grievance Procedure Sign	☒	☐	☐	Lunch Room
Take Home Food Policy Sign	☒	☐	☐	Staff Offices
"EEO is the Law" Poster	☒	☐	☐	Lunch Room
Emergency Closing Poster	☒	☐	☐	Lunch Room
Menu Displayed with certified statement	☒	☐	☐	Senior Desk, Lunch Room
Recreation Calendar	☒	☐	☐	Throughout the center
3. Compliance	**Yes**	**No**	**Not Required**	**Comments**
Reports are submitted on/or before the 10th of the month	☐	☒	☐	Much better in 2026
Fiscal Vouchers are submitted no later than 30 days after the end of the quarter.	☒	☐	☐	
Responds to MCOFA in a timely manner when an issue arises	☐	☒	☐	Can be difficult to correspond with due to limited staff.
MCOFA Nutrition Program Policy Manual is on site and accessible	☒	☐	☐	
The staff/volunteers receive orientation and training on the proper methods and procedures pertaining to MCOFA guidelines	☒	☐	☐	Frequency: Upon hire the guidelines are reviewed, as well as periodically during staff meetings or if there is concern brought in regard to any of the guidelines. Minutes maintained: Staff notes are taken
Training is provided quarterly with agendas and attendances documented. These are shared with MCOFA Program Monitor. Required topics include but not limited to: Center procedures for emergency situations, language assistance, food safety and sanitation	☒	☐	☐	
Volunteers receive recognition	☒	☐	☐	
There is a procedure in place that allows participants to present grievances or make complaints?	☒	☐	☐	
Site Council meetings are held at least four times a year	☒	☐	☐	Frequency: Monthly Minutes maintained: No.

A representative attends Project Council meetings regularly	☐	☒	☐	No representative currently, Working on recruiting someone soon.
Participants are notified who their site council/Project Council members are?	☐	☒	☐	How: No representative currently, Working on recruiting someone soon.
Equal access is granted to candidates regardless of policy view or party affiliation.	☒	☐	☐	
The center is in compliance with Affirmative Action and Equal Opportunity guidelines?	☒	☐	☐	
Provisions have been made to protect the confidentiality of participants' information?	☒	☐	☐	
The Congregate Services noted have a less than 10% missing data per the Peer Place reporting system	☒	☐	☐	
Has the agency given due recognition to the U.S. Administration on Aging, the NYS Office for the Aging and Monroe County DHS/Office for the Aging, as appropriate, in program/service brochures, flyers and other printed materials as well as online? **Monthly Coordinator's Report Checklist has most current wording*	☒	☐	☐	
The agency has a written policy regarding retention of all Monroe County DHS/Office for the Aging contracted program and fiscal records for six (6) years	☒	☐	☐	*Specifics in MCOFA Nutrition Program Policy Manual
There is representation at 90% of MCOFA Coordinators meetings	☒	☐	☐	
All updated insurance certificates naming the County of Monroe as additionally insured on file with the Monroe County Contract Office (Contrack HQ)	☒	☐	☐	
All Equipment Inventory & Disposition Forms updated and on file at MCOFA	☒	☐	☐	Last updated: 2017
The center is responsive to "LEP" Limited English Proficiency –limited ability to read, speak, write, or understand English	☒	☐	☐	Explain: Tellmorr Contract

The center accommodates LGBT participants	☒	☐	☐	

[1] **As detailed in the Policy Manual , 19-PI-26 and Program Application**

V. Conclusions

1. **Overall assessment of the strengths**

   Town/Agency Comments: No comments at this time.

   MCOFA Comments: The center was able to exceed their meal projection while receiving good satisfaction scores on the annual survey. The center served many of the key demographics of the program: 75% are over the age of 75; 61.2% live alone; 32.7% are frail and/or disabled; 30.6% are low income. The center offers a large range of recreation and education offerings.

2. **Areas in need of attention**

   Town/Agency Comments: None at this time.

   MCOFA Comments: The food waste was high again in 2025; however, the center was able to lower their waste in the current year after discussion at the previous assessment in the summer of 2025. They will continue to work to use tools to project who will be in attendance. The center had low outreach and poor diversity in 2025. They could benefit from better tracking the outreach that gets completed and continuing to do at nearby high rises targeting underserved populations.

3. **Additional resources/technical assistance requested**

   Town/Agency Comments: None at this time.

   MCOFA Comments: As needed.

Satisfaction Survey Analysis- To Be Completed by Center Staff

Center Name: Irondequoit **Total Distributed: 40** **Total Participants: 35**

Please Enter Total Number of people who answered per column.

	Meals	Classes/Groups	Both
What services do you participate in at the center?	31		
	Grab N Go Lunch	In Person Lunch	
Which type of meals have you received this year?		31	

Please Enter Totals for Each Column (Number of people who answered per column)

How do you rate the meals you receive?	Excellent	Good	Fair	Poor
Taste	27	4		
Temperature	27	4		
Variety	27	3		
Overall quality	27	4		

Please Enter Totals for Each Column (Number of people who answered per column multiplied by the number assigned)

	Yes (3)	Maybe (2)	No (1)	No Answer (0)	Total	Total Possible[1]	%[2]
Since coming to the center, have your social opportunities increased?	21(63)	7(14)	1	1(0)	78	29(87)	90%
Since coming to the center have you gained knowledge or new skills?	20(60)	9(18)	1		79	30(90)	88%
Has the center improved the quality of your life?	19(57)	9(18)	1	1(0)	76	29(87)	87%

[1]Do not count *No Answer* in Total Possible (Total Actually Answered x 3)

[2]Total Divided by Total possible x 100

Would you recommend the Senior Center to friends and family members?

Please Enter Totals for Each Column

Yes (3)	Maybe (2)	No (1)	No Answer (0)	Total	Total Possible[1]	%[2]
30(90)	1(2)			92	100	92

[1]Do not count *No Answer* in Total Possible (Total Actually Answered x 3)

[2]Total Divided by Total possible x 100

Comments/Concerns:

_They serve great food and the company is great. Food is delicious Great times here at the community center.

Department of **Human Services**
Office for the Aging
Monroe County, New York

Adam Bello
County Executive

Thalia Wright
Commissioner

Steve Newcomb
Director

August 14, 2026

Kris Santillo
25 Driving Park
Rochester, NY 14613

Dear Kris,

Attached for your records is the completed 2025 Annual Program Evaluation for the Monroe County Office for the Aging (MCOFA) funded Senior Center Nutrition Program. The senior center contract is doing well. For comments related to each program and its specific objectives, please read through the evaluation. You may find additional general comments related to the program on the final page of the evaluation.

Thank you for continuing to provide these valued services to our community's older adult population.

Should you have any questions regarding the evaluation, please do not hesitate to contact me at 753-5566.

Sincerely,

Tracy Collins

cc: Monroe County Office for the Aging –Steve Newcomb, Leanne Rorick

Encl: Annual Program and Service Assessment

Monroe County Office for the Aging
Program Evaluation & Contract Compliance
2025

ANNUAL PROGRAM AND SERVICE ASSESSMENT

Lifespan
Lily Cafe

25 Driving Park Ave.
Rochester, NY 14613

Program Representative/Coordinator: Jasmine Jackson
Person Completing: Kris Santillo
Phone: 585-341-4013
Fax:
Email: ksantillo@lifespan-roch.org
Funding Period: January 1- December 31, 2025
1/1/2025 - 12/31/2025 = Title IIIC-1
4/1/2025 - 12/31/2025 = CSI

Evaluation Date: 7/17/26
MCOFA Monitor: Tracy Collins

An Annual Evaluation by the Area Agency on Aging (MCOFA) is required by the Older Americans Act. The primary purpose of this evaluation is to review the contract and to ensure that all policies and practices are in compliance with applicable laws and requirements.

Contents:

I.	Contract Budgets
II.	Program Goals
III.	Service Activity Review
IV.	Program Compliance
V.	Conclusions

I. Contract Budget and Service Overview

Congregate Meal Program and Outreach

Contract Period:		January 1, 2025-December 31, 2025	Original [1]
Amount of Contract		#1. Total Budget:	**1) $ 60,834**
Composed of		#2. Anticipated Contributions: #3. Nutrition Services Incentive (NSIP) #4. Subcontractor Match: #5. MCOFA Funds:	**2) $ 5,000** **3) $ 0** **4) $ 5,584** **5) $ 50,250**
AIP	**Total Cost**	#6. Congregate Meals	**6) $ 58,834**
	Units	#7. Allocated Meals	**7) 5,200**
	Unit Cost	#8. Total meal cost: *(#6) divided by allocated meals (#7)*	**8) $ 11.31**
AIP	**Total Cost**	#9. Outreach	**9) $ 2,000**
	Units	#10. Allocated Outreach	**10) 40**
	Unit Cost	#11. Total Outreach Cost *(#9) divided by allocated meals (#10)*	**11) $ 50.00**
Funding Sources		OAA, Title IIIC-1: Nutrition Services for the Elderly	

Senior Recreation and Education

Contract Period:		April 1, 2025-December 31, 2025	Original [1]
Amount of Contract		#1. Total Budget:	**1) $ 1,131**
Composed of		#4. Subcontractor Match: #5. MCOFA Funds:	**4) $ 283** **5) $ 848**
AIP	**Total Cost**	#6. Senior Rec and Ed	**6) $ 1,131**
	Units	#7. Allocated Units	**7) 5**
	Unit Cost	#8. Total unit cost: *(#6) divided by allocated meals (#7)*	**8) $ 226.20**
Funding Sources		Congregate Service Initiative (CSI)	

II. Program Goals

To provide individuals aged 60 and over with a balanced meal(s), socialization opportunities, and activities to support mental and physical well-being. Services help participants maintain health, independence, and remain in their homes as long as possible.

1. Performance Projections and Outcomes

A. **Performance Measurement-Eligible Meals Served** is the total number of eligible meals served during the contract year. Eligible meals are considered those meals served to individuals aged 60 and over, their spouses, their disabled and dependent children, and volunteers assisting with the nutrition program.

See [1]Program Year Application Outcome Objective #2 and [2]Peer Place Program Year Served Client Summary Report

Indicator of success: The total number of meals served meets or exceeds annual projections, with success indicated by achieving at least 90% of the projected goal by year-end.

		Assessment Year Projection[1]	Assessment Year Actual[2]	Current Year Projection[1]
Time frame		1/1/25-12/31/25	1/1/25-12/31/25	1/1/26-12/31/26
Eligible Meals Served		5,200	5,238	5,500
% Successful		90%	101%	90%

B. **Performance Measurement- Participant Satisfaction Survey** Surveys are distributed annually to assess participants' opinions on program services.

See [1]Program Year Application Outcome Objective #3

Indicator of success: 90% or greater of participants respond positively to: "Has attending the center improved your quality of life?"

		Assessment Year Projection[1]	Assessment Year Actual[2]	Current Year Projection[1]
Time frame		1/1/25-12/31/25	1/1/25-12/31/25	1/1/26-12/31/26
Total # of Participants		40	250	60
% Satisfied		90%	92%	90%

Completed [2]Participant Satisfaction Analysis Attached

2. Past performance/Previous recommendation

A. Were there findings from the prior or current year that required corrective actions to address areas of non-compliance? ☐ YES ☒ NO

If yes, please describe:

B. Were all findings from MCOFA's previous monitoring efforts satisfactorily addressed?

☒ YES ☐ NO

II. Service Activity Review

1. **OUTCOME OBJECTIVE #1:** ***To provide services to those unserved and underserved older adults in greatest social or economic need, particularly those who are low-income, low-income minorities, older adults with limited English proficiency, Native Americans, and frail/persons with disabilities and older adults residing in rural areas, in accordance with their need for such services, and to meet specific objectives established by the MCOFA for providing services to the above groups within the Program Service Area (PSA).***

   To ensure equal access for participation, services, activities, and informational sessions without regard to race, color, sex, religion, national origin, disability, sexual orientation, marital status, veteran and/or military status, immigration status, creed, domestic violence victim status, criminal history, gender identity, genetic predisposition or carrier status.

Effective April 1, 2025 the following 2025 poverty income guidelines are to be used in identifying low-income older adults. These will be updated for the contract year as soon as available.

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Poverty Income Guidelines

HOUSEHOLD SIZE	100%		125%		150%		185%	
	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly
1	15,650	1,304	19,563	1,630	23,475	1,956	28,953	2,413
2	21,150	1,763	26,438	2,203	31,725	2,644	39,128	3,261
3	26,650	2,221	33,313	2,776	39,975	3,331	49,303	4,109
4	32,150	2,679	40,188	3,349	48,225	4,019	59,478	4,956
For each additional person, add:	5,500 annual amount		6,875 annual amount		8,250 annual amount		10,175 annual amount	

	PROJECTED[1] Number of Unduplicated Persons to be served by program	ACTUAL[2] Number of Unduplicated Persons to be served by program	PROJECTED[1] Percentage of Persons to be served from total served: *based on Targeting	ACTUAL[2] Percentage of Persons to be served from total served: *based on Targeting
1. Total Unduplicated Persons to be served by program	250	255	100%	102%
Of the Total Persons from line 1.:				
a. 75-84 years	44	84	17.7%	32.9%
b. 85 years and older	20	20	8%	7.8%
Clients by Ethnicity:				
c. Hispanic	11	18	4.2 %	7.1%
Clients by Race:				
d. American Indian/Alaskan Native	0	8	.2%	3.1%
e. Asian	6	2	2.2%	.8%
f. Black or African American	24	102	9.5 %	40%
g. Middle Eastern	N/A	0	N/A	0%
h. North African	N/A	0	N/A	0%
i. White not Hispanic	205	125	82.1 %	49%
j. Native Hawaiian/Pacific Islander	0	0	.01%	0%
Clients by Key Characteristics:				
k. Live alone	113	129	45.1%	50.6%
l. Frail and/or Individuals with Disabilities	71	137	28.4 %	53.7%
m. Low Income (below 150% of poverty)	43	147	17.3 %	57.6%
n. Low Income Minority (below 150% of poverty)	7	35	2.9%	13.7%
o. Limited English Proficiency	14	5	5.5%	2%
p. Rural*	0	0	8.1%	0%
COMMENTS:	***Local Rural**			

1. Program Year Application Outcome Objective #1
2. From Peer Place Program Year Served Client Summary Report.

2. **OUTCOME OBJECTIVE #2:** ***To serve nutritious meals that meet 1/3 the Dietary Reference Intake per meal for meals served during the contract year. Eligible meals are considered those meals served to individuals over 60, their spouses, their disabled and dependent children, and volunteers at the center who assist in the nutrition program.***

A. To serve [5,200] total eligible meals by 12/31/25.
Daily average of [21]; # of Days Open for lunch [250]
Program Year Application
1. Actual # of eligible Congregate meals served: [5038]; [97] %.
Actual Daily average of [20]; Actual # of Days Open [246]
Viewbuilder Event Profile Meals View; Does not include Shelf Stable Meals

2. Objective met (90%of projection served)? ☒ YES ☐ NO

If successful in reaching this objective, to what do you contribute your success? If performance is below objective, state reasons and outline Corrective Action Plan to reach objective:

Our success is due in large part due to our partnership with the YMCA.

3. **OUTCOME OBJECTIVE #3: Participants will report that attending the center has improved their quality of life.**

A. See Table above (I. 1. B. Performance Measurement-Customer Satisfaction Survey).
Peer Place Program Year Served Client Summary Report

B. Total Number of Recreation and Education activities offered to participants during contract year 1/1/25-12/31/25 [1,093].

C. Of the above total, number of CSI funded Recreation and Education activities offered to participants during contract year 1/1/25-12/31/25 [17].

D. Do you post your Activity Calendar in the Center in a visible location? Yes ☒ No ☐
1. Where is it posted?

The monthly activity calendar is posted on a large bulletin board by the swim locker rooms, a bulletin board outside the Café and in the program sign up binder.

E. Does your center have a newsletter? Yes ☒ No ☐
1. If yes, how often is it published? [Monthly].
2. Did you share a copy with the MCOFA Program Monitor? Yes ☒ No ☐
3. How do you share your Newsletter with the public?

The monthly newsletter can be found on the Lifespan and YMCA websites.

F. Participants are given the opportunity to give feedback and input? Yes ☒ No ☐

Members give daily input to center staff and program suggestions are welcomed during monthly Café Advisory meetings.

G. Per the Satisfaction Survey (Completed Participant Satisfaction Analysis Attached)
1. Do participants report increased social opportunities? [95] %
2. Do participants report gaining knowledge or new skills? [93] %
3. Do Participants say they would recommend the center? [99] %

4. **OUTCOME OBJECTIVE #4: To provide outreach* to 40 unduplicated older persons per contract period.** Program Year Contract

G. Actual outreach recorded **117**

Peer Place Program Year Served Client Summary Report

H. Outreach projection objective met? Yes ☒ No ☐

If successful in reaching this objective, to what do you contribute your success? If performance is below objective, state reasons and outline Corrective Action Plan to reach objective:

We continue to work hard to spread the word about the Café by participating in multiple community health and wellness fairs. We also network and develop relationships with other community partners and management company staff who oversee apartment complexes housing older adults in the center City area. We also email monthly newsletters to our community partners.

What tools/opportunities/community partners have you used in reaching unserved/underserved populations matching the demographics of Monroe County (see Demographics chart for populations with lower-than-expected attendance for reference)?

Our resource center department is included in Lifespan's Outreach Committee allowing us to leverage a comprehensive listing of local community fairs by zip code to target unserved/underserved populations.

I. How many new participants have joined this contract year 1/1/25-12/31/25? 105
View builder Registration View

J. Do you maintain a waitlist for your services, or in some way experience demand that your center is not able to meet (e.g., requests for meals, recreation or transportation)? Yes ☐ No ☒

5. **OUTCOME OBJECTIVE #5: To have a waste factor of 5% or less.**
Program Year Contract
Waste Factor:

	Meals Ordered[1]	Meals Served[2]	% Waste[3]
Waste Factor	5,267	4,946	9.66%

1. Program Year Waste Analysis Report – Caterer Billing Report
2. Peer Place Program Year Served Client Summary Report, Does not include Special Events or Emergency Meals which are included in the Total Served for Outcome Objective Above)
3. Subtract 'served' from 'ordered'; divide by 'ordered' then multiple by 100

If above 5%, please state reasons and outline a plan to reach the goal.

We will continue to track attendance/meal trends when ordering and encourage members to reserve their meals.

6. **CONTRIBUTIONS: Collect participant contributions, used to enhance the program.**
Program Year Application

A. Projected Contributions $ **5,000** in contract year 1/1/25-12/31/25.
Projected per meal average of $ **0.96**
1. Program Year Fiscal Budgets

B. Actual collected $ **8,985.75** in contract year 1/1/25-12/31/25.
Actual per meal average of $ **1.78**
1. Program Year Fiscal Claims

C. Do you have a contribution policy at the center that aligns with NYSOFA policy 18-PI-17? Yes ☒ No ☐
MOCFA Policy

D. How were the contributions used to enhance the program?

Contributions extend our budget to hire instructors/entertainers and purchase supplies for special events.

III. Program Compliance[1]

1. Fire, Building & Health Code Compliance Procedures	Yes	No	Not Required	Comments
Site has fire emergency procedures that meet local fire codes and standards; participants and staff must be familiar with these	☒	☐	☐	Lily staff follow YMCA fire/emergency procedures.
All site staff are trained in the use of fire extinguishers and evacuation procedures and this is documented	☒	☐	☐	Training Date: Evacuation policy distributed to staff on 6/20/2025, no date for fire extinguisher training
Evacuation Plans are posted	☒	☐	☐	
Fire extinguishers are strategically placed and inspected annually	☒	☐	☐	Date: March 2025
Facility has at least two clearly identified and well-lit, unobstructed exists	☒	☐	☐	
Fire drills are conducted annually and documented	☒	☐	☐	Date: August 5, 2025
Emergency kit is available and has proper supplies and a defibrillator on site	☒	☐	☐	Near back exit, Y staff trained
Monthly Fire and Safety Inspections of the facility are conducted?	☒	☐	☐	Coordinated by YMCA
Is there an up-to-date copy of your Emergency Disaster Preparedness Procedure Plan (including current phone, cell phone and pager numbers of key staff) on file at MCOFA	☒	☐	☐	Y staff trained Is there a policy? Yes
The center is in compliance with the Americans Disability Act (ADA) requirements?	☒	☐	☐	
2. Postings/On file/ Available/ Replacement Signs	**Yes**	**No**	**Not Required**	**Location**
Registration Forms	☒	☐	☐	Completed Electronic copy in Peerplace
Sign In Sheets	☒	☐	☐	Office
Lock Box Available	☒	☐	☐	On pool table prior to and during lunch
Envelopes Available	☒	☐	☐	With lock box

Contribution Sign (including Guest Information)	☒	☐	☐	Placed by lock box
Poverty Level Guidelines	☒	☐	☐	Placed by lock box
Grievance Procedure Sign	☒	☐	☐	Placed by lock box
Take Home Food Policy Sign	☒	☐	☐	Placed by lock box
"EEO is the Law" Poster	☒	☐	☐	Placed by lock box
Emergency Closing Poster	☒	☐	☐	
Menu Displayed with certified statement	☒	☐	☐	On bulletin boards with activity calendar and program binder
Recreation Calendar	☒	☐	☐	Monthly newsletter
3. Compliance	**Yes**	**No**	**Not Required**	**Comments**
Reports are submitted on/or before the 10th of the month	☒	☒	☒	Need Checklist and Missing Data report Kris will support Jasmine to complete for 2026
Fiscal Vouchers are submitted no later than 30 days after the end of the quarter.	☒	☐	☐	
Responds to MCOFA in a timely manner when an issue arises	☒	☐	☐	
MCOFA Nutrition Program Policy Manual is on site and accessible	☒	☐	☐	
The staff/volunteers receive orientation and training on the proper methods and procedures pertaining to MCOFA guidelines	☒	☐	☐	How: observation Frequency: as needed
Training is provided quarterly with agendas and attendances documented. These are shared with MCOFA Program Monitor. Required topics include but not limited to: Center procedures for emergency situations, language assistance, food safety and sanitation	☒	☐	☐	
Volunteers receive recognition	☒	☐	☐	
There is a procedure in place that allows participants to present grievances or make complaints?	☒	☐	☐	
Site Council meetings are held at least four times a year	☒	☐	☐	Frequency: Monthly Minutes maintained: Yes

A representative attends Project Council meetings regularly	☒	☐	☐	
Participants are notified who their site council/Project Council members are?	☒	☐	☐	How: During monthly café advisory meeting
Equal access is granted to candidates regardless of policy view or party affiliation.	☒	☐	☐	
The center is in compliance with Affirmative Action and Equal Opportunity guidelines?	☒	☐	☐	
Provisions have been made to protect the confidentiality of participants' information?	☒	☐	☐	
The Congregate Services noted have a less than 10% missing data per the Peer Place reporting system	☒	☐	☐	
Has the agency given due recognition to the U.S. Administration on Aging, the NYS Office for the Aging and Monroe County DHS/Office for the Aging, as appropriate, in program/service brochures, flyers and other printed materials as well as online? **Monthly Coordinator's Report Checklist has most current wording*	☒	☐	☐	
The agency has a written policy regarding retention of all Monroe County DHS/Office for the Aging contracted program and fiscal records for six (6) years	☒	☐	☐	*Specifics in MCOFA Nutrition Program Policy Manual
There is representation at 90% of MCOFA Coordinators meetings	☒	☐	☐	
All updated insurance certificates naming the County of Monroe as additionally insured on file with the Monroe County Contract Office (Contrack HQ)	☒	☐	☐	
All Equipment Inventory & Disposition Forms updated and on file at MCOFA	☒	☐	☐	Last updated: 2017
The center is responsive to "LEP" Limited English Proficiency –limited ability to read, speak, write, or understand English	☒	☐	☐	Explain: Tellmorr Contract & policy to address How is the public notified? Lifespan website

The center accommodates LGBT participants	☒	☐	☐	

[1] **As detailed in the Policy Manual , 19-PI-26 and Program Application**

IV. Conclusions

1. **Overall assessment of the strengths**

   Town/Agency Comments: We are thankful for MCOFA's partnership and support and look forward to continuing our work together to build a strong, vibrant, and connected community.

   MCOFA Comments: The center continues to maximize its partnership with the YMCA and serves a diverse population. The center participants reported a high satisfaction on the annual survey. The participants make up the key demographics of the program with: 40.7% aged 75 or older; 50.6% live alone; 53.7% are frail and/or disabled; and 57.6% are low income. The center exceeded its projections.

2. **Areas in need of attention**

   Town/Agency Comments: None at this time.

   MCOFA Comments: None at this time.

3. **Additional resources/technical assistance requested**

   Town/Agency Comments: None at this time.

   MCOFA Comments: As needed.

Satisfaction Survey Analysis- To Be Completed By Center Staff

Center Name: Lily Total Distributed: 68 Total Participants: 95

Please Enter Total Number of people who answered per column.

	Meals Only	Classes/Groups	Both
What services do you participate in at the center?	19		47
	Grab N Go Lunch	In Person Lunch	
Which type of meals have you received this year?			

Please Enter Totals for Each Column (Number of people who answered per column)

How do you rate the meals you receive?	Excellent	Good	Fair	Poor
Taste				
Temperature				
Variety				
Overall quality				

Please Enter Totals for Each Column (Number of people who answered per column multiplied by the number assigned)

	Yes (3)	Maybe (2)	No (1)	No Answer (0)	Total	Total Possible[1]	%[2]
Since coming to the center, have your social opportunities increased?	(144) 48	(16) 8	(2) 2	3	183	3×3= 195	95%
Since coming to the center have you gained knowledge or new skills?	(159) 53	(20) 11	(2) 2	0	189	4×3= 204	93%
Has the center improved the quality of your life?	(144) 48	22 11	2 2	1	168	61×3= 183	92%

[1]Do not count *No Answer* in Total Possible (Total Actually Answered x 3)

[2]Total Divided by Total possible x 100

Would you recommend the Senior Center to friends and family members?

Please Enter Totals for Each Column

Yes (3)	Maybe (2)	No (1)	No Answer (0)	Total	Total Possible[1]	%[2]
195 65	43	6	0	201	204	99%

[1]Do not count *No Answer* in Total Possible (Total Actually Answered x 3)

[2]Total Divided by Total possible x 100

Department of **Human Services**
Office for the Aging
Monroe County, New York

Adam Bello
County Executive

Thalia Wright
Commissioner

Steve Newcomb
Director

August 14, 2026

Kris Santillo
25 Franklin St
Rochester, NY 14604

Dear Kris,

Attached for your records is the completed 2025 Annual Program Evaluation for the Monroe County Office for the Aging (MCOFA) funded Senior Center Nutrition Program. The senior center contract is doing well. For comments related to each program and its specific objectives, please read through the evaluation. You may find additional general comments related to the program on the final page of the evaluation.

Thank you for continuing to provide these valued services to our community's older adult population.

Should you have any questions regarding the evaluation, please do not hesitate to contact me at 753-5566.

Sincerely,

Tracy Collins

cc: Monroe County Office for the Aging –Steve Newcomb, Leanne Rorick

Encl: Annual Program and Service Assessment

Monroe County Office for the Aging
Program Evaluation & Contract Compliance
2025

ANNUAL PROGRAM AND SERVICE ASSESSMENT

Lifespan
Wolk Cafe

25 Franklin Street
Rochester, NY 14604

Program Representative/Coordinator: Kimberly Yeoumas
Person Completing Assessment: Kris Santillo
Phone: 585-232-3617
Fax: 585-232-5256
Email: ksantillo@lifespan-roch.org
Funding Period: January 1- December 31, 2025
1/1/2025 - 12/31/2025 = Title IIIC-2
4/1/2025 – 3/31/2026 = CSE
4/1/2025 - 12/31/2025 = CSI

Evaluation Date: 7/7/26
MCOFA Monitor: Tracy Collins

An Annual Evaluation by the Area Agency on Aging (MCOFA) is required by the Older Americans Act. The primary purpose of this evaluation is to review the contract and to ensure that all policies and practices are in compliance with applicable laws and requirements.

Contents:

I.	Contract Budgets
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I. Contract Budget and Service Overview

IIIC-1 Congregate Meal Program and Outreach

Contract Period:		January 1, 2025-December 31, 2025	Original [1]
Amount of Contract		#1. Total Budget:	1) $ 67,969
Composed of		#2. Anticipated Contributions: #3. Subcontractor Match: #4. MCOFA Funds:	2) $ 13,200 3) $ 5,477 4) $ 49,292
AIP	Total Cost	#5. Congregate Meals	5) $ 64,769
	Units	#6. Projected Meals	6) 7,800
	Unit Cost	#7. Total meal cost: *(#5) divided by projected meals (#6)*	7) $ 8.30
AIP	Total Cost	#8. Outreach	8) $ 3,200
	Units	#9. Projected Outreach	9) 80
	Unit Cost	#10. Total Outreach Cost *(#8) divided by projected Outreach (#9)*	10) $ 40.00
Funding Sources		OAA, Title IIIC-1: Nutrition Services for the Elderly	

CSE Senior Recreation and Education

Contract Period:		April 1, 2025- March 31, 2026	Original [1]
Amount of Contract		#1. Total Budget:	1) $ 106,667
Composed of		#2. Anticipated Contributions: #3. Subcontractor Match: #4. MCOFA Funds:	2) $ 0 3) $ 26,667 4) $ 80,000
AIP	Total Cost	#5. Rec and Ed	5) $ 106,667
	Units	#6. Projected Activities	6) 2,000
	Unit Cost	#7. Total meal cost: *(#5) divided by projected activities (#6)*	7) $ 53.33
Funding Sources		OAA, Community Services for the Elderly (CSE)	

CSI Senior Recreation and Education Grant

Contract Period:		April 1, 2025-December 31, 2025	Original [1]
Amount of Contract		#1. Total Budget:	1) $ 1,131
Composed of		#4. Subcontractor Match: #5. MCOFA Funds:	4) $ 283 5) $ 848
AIP	Total Cost	#6. Senior Rec and Ed	6) $ 1,131
	Units	#7. Allocated Units	7) 5
	Unit Cost	#8. Total unit cost: *(#6) divided by allocated meals (#7)*	8) $ 226.20
Funding Sources		Congregate Service Initiative (CSI)	

II. Program Goals

To provide individuals aged 60 and over with a balanced meal(s), socialization opportunities, and activities to support mental and physical well-being. Services help participants maintain health, independence, and remain in their homes as long as possible.

1. Performance Projections and Outcomes

A. **Performance Measurement-Eligible Breakfast Meals Served** is the total number of eligible meals served during the contract year. Eligible meals are considered those meals served to individuals aged 60 and over, their spouses, their disabled and dependent children, and volunteers assisting with the nutrition program.

See [1]Program Year Application Outcome Objective #2 and [2]Peer Place Program Year Served Client Summary Report

Indicator of success: The total number of meals served meets or exceeds annual projections, with success indicated by achieving at least 90% of the projected goal by year-end.

		Assessment Year Projection[1]	Assessment Year Actual[2]	Current Year Projection[1]
Time frame		1/1/25-12/31/25	1/1/25-12/31/25	1/1/26-12/31/26
Eligible Meals Served		2,600	3,136	3,100
% Successful		90%	120%	90%

B. **Performance Measurement-Eligible Lunch Meals Served** is the total number of eligible meals served during the contract year. Eligible meals are considered those meals served to individuals aged 60 and over, their spouses, their disabled and dependent children, and volunteers assisting with the nutrition program.

Indicator of success: The total number of meals served meets or exceeds annual projections, with success indicated by achieving at least 90% of the projected goal by year-end.

		Assessment Year Projection[1]	Assessment Year Actual[2]	Current Year Projection[1]
Time frame		1/1/25-12/31/25	1/1/25-12/31/25	1/1/26-12/31/26
Eligible Meals Served		5,200	5,517	5,400
% Successful		90%	106%	90%

C. **Performance Measurement- Participant Satisfaction Survey** Surveys are distributed annually to assess participants' opinions on program services.

See [1]Program Year Application Outcome Objective #3

Indicator of success: 90% or greater of participants respond positively to: "Has attending the center improved your quality of life?"

		Assessment Year Projection[1]	Assessment Year Actual[2]	Current Year Projection[1]
Time frame		1/1/25-12/31/25	1/1/25-12/31/25	1/1/26-12/31/26
Total # of Participants		40	250	65
% Satisfied		90%	86%	90%

Completed [2]Participant Satisfaction Analysis Attached

2. Past performance/Previous recommendation

A. Were there findings from the prior or current year that required corrective actions to address areas of non-compliance? ☐ YES ☒ NO

If yes, please describe:

B. Were all findings from MCOFA's previous monitoring efforts satisfactorily addressed?
☒ YES ☐ NO

II. Service Activity Review

1. <u>OUTCOME OBJECTIVE #1:</u> ***To provide services to those unserved and underserved older adults in greatest social or economic need, particularly those who are low-income, low-income minorities, older adults with limited English proficiency, Native Americans, and frail/persons with disabilities and older adults residing in rural areas, in accordance with their need for such services, and to meet specific objectives established by the MCOFA for providing services to the above groups within the Program Service Area (PSA).***

To ensure equal access for participation, services, activities, and informational sessions without regard to race, color, sex, religion, national origin, disability, sexual orientation, marital status, veteran and/or military status, immigration status, creed, domestic violence victim status, criminal history, gender identity, genetic predisposition or carrier status.

Effective April 1, 2025 the following 2025 poverty income guidelines are to be used in identifying low-income older adults. These will be updated for the contract year as soon as available.

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Poverty Income Guidelines

HOUSEHOLD SIZE	100%		125%		150%		185%	
	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly
1	15,650	1,304	19,563	1,630	23,475	1,956	28,953	2,413
2	21,150	1,763	26,438	2,203	31,725	2,644	39,128	3,261
3	26,650	2,221	33,313	2,776	39,975	3,331	49,303	4,109
4	32,150	2,679	40,188	3,349	48,225	4,019	59,478	4,956
For each additional person, add:	5,500 annual amount		6,875 annual amount		8,250 annual amount		10,175 annual amount	

	PROJECTED[1] Number of Unduplicated Persons to be served by program	ACTUAL[2] Number of Unduplicated Persons to be served by program	PROJECTED[1] Percentage of Persons to be served from total served: *based on Targeting	ACTUAL[2] Percentage of Persons to be served from total served: *based on Targeting
1. Total Unduplicated Persons to be served by program	200	287	100%	143.5%
Of the Total Persons from line 1.:				
a. 75-84 years	35	65	17.7%	22.6%
b. 85 years and older	16	14	8%	4.9%
Clients by Ethnicity:				
c. Hispanic	8	23	4.2 %	8%
Clients by Race:				
d. American Indian/Alaskan Native	0	7	.2%	2.4%
e. Asian	4	2	2.2%	.7%
f. Black or African American	19	172	9.5 %	59.9%
g. Middle Eastern	N/A	0	N/A	0%
h. North African	N/A	0	N/A	0%
i. White not Hispanic	164	77	82.1 %	26.8%
j. Native Hawaiian/Pacific Islander	0	0	.01%	0%
Clients by Key Characteristics:				
k. Live alone	90	199	45.1%	69.3%
l. Frail and/or Individuals with Disabilities	57	219	28.4 %	76.3%
m. Low Income (below 150% of poverty)	35	233	17.3 %	81.1%
n. Low Income Minority (below 150% of poverty)	6	84	2.9%	29.3%
o. Limited English Proficiency	11	3	5.5%	1%
p. Rural*	0	0	8.1%	0%
COMMENTS:	***Local Rural**			

1. Program Year Application Outcome Objective #1
2. From Peer Place Program Year Served Client Summary Report.

2. **OUTCOME OBJECTIVE #2:** ***To serve nutritious meals that meet 1/3 the Dietary Reference Intake per meal for meals served during the contract year. Eligible meals are considered those meals served to individuals over 60, their spouses, their disabled and dependent children, and volunteers at the center who assist in the nutrition program.***

A. To serve [2,600] total eligible breakfast meals by 12/31/25.
Daily average of [10]; # of Days Open for lunch [250]
Program Year Application
1. Actual # of eligible Congregate meals served: [3,136]; [120] %.
Actual Daily average of [13]; Actual # of Days Open [243]
Viewbuilder Event Profile Meals View; Does not include Shelf Stable Meals

2. Objective met (90%of projection served)? ☒ YES ☐ NO

If successful in reaching this objective, to what do you contribute your success? If performance is below objective, state reasons and outline Corrective Action Plan to reach objective:

Breakfast participation continues to grow particularly among residents of the building. Observations indicate that men represent the majority of participants.

B. To serve [5,200] total eligible lunch meals by 12/31/25.
Daily average of [21]; # of Days Open for lunch [250]
Program Year Application
1. Actual # of eligible Congregate meals served: [5,317]; [102] %.
Actual Daily average of [22]; Actual # of Days Open [243]
Viewbuilder Event Profile Meals View; Does not include Shelf Stable Meals

2. Objective met (90%of projection served)? ☒ YES ☐ NO

If successful in reaching this objective, to what do you contribute your success? If performance is below objective, state reasons and outline Corrective Action Plan to reach objective:

We attribute the success of reaching this objective to our Program Coordinator, Kimberly. Over the last year, she has worked very hard to build connected community to increase lunch participation.

3. **OUTCOME OBJECTIVE #3: Participants will report that attending the center has improved their quality of life.**

A. See Table above (I. 1. B. Performance Measurement-Customer Satisfaction Survey).
Peer Place Program Year Served Client Summary Report

B. Total Number of Recreation and Education activities offered to participants during contract year 1/1/25-12/31/25 [1,307].

C. Of the above total, number of CSI funded Recreation and Education activities offered to participants during contract year 1/1/25-12/31/25 [25].

D. Do you post your Activity Calendar in the Center in a visible location? Yes ☒ No ☐
1. Where is it posted?

Activity calendar is located at front desk, program sign up binder and bulletin boards.

E. Does your center have a newsletter? Yes ☒ No ☐
1. If yes, how often is it published? [Monthly].
2. Did you share a copy with the MCOFA Program Monitor? Yes ☒ No ☐
3. How do you share your Newsletter with the public?

The monthly newsletter is located on the Lifespan website.

F. Participants are given the opportunity to give feedback and input? Yes ☒ No ☐

Members give daily input to staff and program suggestions are welcomed during monthly Café Council meetings.

G. Per the Satisfaction Survey (Completed Participant Satisfaction Analysis Attached)

1. Do participants report increased social opportunities? 85 %
2. Do participants report gaining knowledge or new skills? 94 %
3. Do Participants say they would recommend the center? 96 %

4. **OUTCOME OBJECTIVE #4: To provide outreach* to 80 unduplicated older persons per contract period.** Program Year Contract

G. Actual outreach recorded 150

Peer Place Program Year Served Client Summary Report

H. Outreach projection objective met? Yes ☒ No ☐

If successful in reaching this objective, to what do you contribute your success? If performance is below objective, state reasons and outline Corrective Action Plan to reach objective:

We worked hard to spread the word about the Café by participating in multiple community health and wellness fairs. We also network and develop relationships with other community partners and management company staff who oversee apartment complexes housing older adults in the center City area. We also email monthly newsletters to our community partners.

What tools/opportunities/community partners have you used in reaching unserved/underserved populations matching the demographics of Monroe County (see Demographics chart for populations with lower-than-expected attendance for reference)?

Our resource department is included in Lifespan's Outreach Committee allowing us to leverage a comprehensive listing of local community fairs by zip code to target unserved/underserved populations.

I. How many new participants have joined this contract year 1/1/25-12/31/25? 159
View builder Registration View

J. Do you maintain a waitlist for your services, or in some way experience demand that your center is not able to meet (e.g., requests for meals, recreation or transportation)? Yes ☐ No ☒

5. **OUTCOME OBJECTIVE #5: To have a waste factor of 5% or less.**
Program Year Contract
Waste Factor:

	Meals Ordered[1]	Meals Served[2]	% Waste[3]
Breakfast Waste Factor	3.081	3,136	-1.79%

1. Program Year Waste Analysis Report – Caterer Billing Report
2. Peer Place Program Year Served Client Summary Report, Does not include Special Events or Emergency Meals which are included in the Total Served for Outcome Objective Above)
3. Subtract 'served' from 'ordered'; divide by 'ordered' then multiple by 100

If above 5%, please state reasons and outline a plan to reach the goal.

Due to how the breakfast was served through the previous caterer there were excess components left, allowing the center to serve more than ordered.

Waste Factor:

	Meals Ordered[1]	Meals Served[2]	% Waste[3]
Lunch Waste Factor	5,921	5,227	11.72

1. Program Year Waste Analysis Report – Caterer Billing Report
2. Peer Place Program Year Served Client Summary Report, Does not include Special Events or Emergency Meals which are included in the Total Served for Outcome Objective Above)
3. Subtract 'served' from 'ordered'; divide by 'ordered' then multiple by 100

If above 5%, please state reasons and outline a plan to reach the goal.

We will continue to track attendance/meal trends when ordering and encourage members to reserve their meals.

6. **CONTRIBUTIONS: Collect participant contributions, used to enhance the program.**
Program Year Application

A. Projected Contributions $ **13,200** in contract year 1/1/25-12/31/25.
Projected per meal average of $ **1.69**
1. Program Year Fiscal Budgets

B. Actual collected $ **11,720.30** in contract year 1/1/25-12/31/25.
Actual per meal average of $ **1.39**
1. Program Year Fiscal Claims

C. Do you have a contribution policy at the center that aligns with NYSOFA policy 18-PI-17? Yes ☒ No ☒
Use MCOFA policy.

D. How were the contributions used to enhance the program?

Contributions extend our budget to hire instructors and entertainers and purchase program supplies for special events.

III. Program Compliance[1]

1. Fire, Building & Health Code Compliance Procedures	Yes	No	Not Required	Comments
Site has fire emergency procedures that meet local fire codes and standards; participants and staff must be familiar with these	☒	☐	☐	Fire drills are conducted by WinnCompanies during the year. Members and staff exit the building and meet across the street in front of the old savings and loan bank.
All site staff are trained in the use of fire extinguishers and evacuation procedures and this is documented	☒	☐	☐	Training Date: 9/19/24
Evacuation Plans are posted	☒	☐	☐	
Fire extinguishers are strategically placed and inspected annually	☒	☐	☐	Date: 3/25/2025
Facility has at least two clearly identified and well-lit, unobstructed exists	☒	☐	☐	

Fire drills are conducted annually and documented	☒	☐	☐	Date: 9/9/2025
Emergency kit is available and has proper supplies and a defibrillator on site	☒	☐	☐	No Defibrillator on-site, not required
Monthly Fire and Safety Inspections of the facility are conducted?	☒	☐	☐	On file with WinnCorp.
Is there an up-to-date copy of your Emergency Disaster Preparedness Procedure Plan (including current phone, cell phone and pager numbers of key staff) on file at MCOFA	☒	☐	☐	
The center is in compliance with the Americans Disability Act (ADA) requirements?	☒	☐	☐	
2. Postings/On file/ Available/ Replacement Signs	**Yes**	**No**	**Not Required**	**Location**
Registration Forms	☒	☐	☐	In PC's office until uploaded, then shredded.
Sign In Sheets	☒	☐	☐	Filing cabinet at front desk
Lock Box Available	☒	☐	☐	At front desk
Envelopes Available	☒	☐	☐	With lock box
Contribution Sign (including Guest Information)	☒	☐	☐	Bulletin board in café area
Poverty Level Guidelines	☒	☐	☐	Bulletin board in café area
Grievance Procedure Sign	☒	☐	☐	Bulletin board in café area
Take Home Food Policy Sign	☒	☐	☐	Bulletin board in kitchen
"EEO is the Law" Poster	☒	☐	☐	Bulletin board in café area
Emergency Closing Poster	☒	☐	☐	Bulletin board in café area
Menu Displayed with certified statement	☒	☐	☐	Front desk & program sign up binder
Recreation Calendar	☒	☐	☐	Monthly newsletter
3. Compliance	**Yes**	**No**	**Not Required**	**Comments**
Reports are submitted on/or before the 10th of the month	☒	☒	☐	Newsletter only, need checklist still Kris will support Kimberly to complete for 2026
Fiscal Vouchers are submitted no later than 30 days after the end of the quarter.	☒	☐	☐	

Responds to MCOFA in a timely manner when an issue arises	☒	☐	☐	
MCOFA Nutrition Program Policy Manual is on site and accessible	☒	☐	☐	
The staff/volunteers receive orientation and training on the proper methods and procedures pertaining to MCOFA guidelines	☒	☐	☐	How: Observation Frequency: Daily
Training is provided quarterly with agendas and attendances documented. These are shared with MCOFA Program Monitor. Required topics include but not limited to: Center procedures for emergency situations, language assistance, food safety and sanitation	☒	☐	☐	
Volunteers receive recognition	☒	☐	☐	
There is a procedure in place that allows participants to present grievances or make complaints?	☒	☐	☐	
Site Council meetings are held at least four times a year	☒	☐	☐	Frequency: Café council meetings held monthly and noted on program calendar. Minutes maintained: Suggestions and comments are documented by coordinator.
A representative attends Project Council meetings regularly	☐	☒	☐	No rep in 2025
Participants are notified who their site council/Project Council members are?	☐	☒	☐	How: No rep in 2025
Equal access is granted to candidates regardless of policy view or party affiliation.	☒	☐	☐	
The center is in compliance with Affirmative Action and Equal Opportunity guidelines?	☒	☐	☐	
Provisions have been made to protect the confidentiality of participants' information?	☒	☐	☐	
The Congregate Services noted have a less than 10% missing data per the Peer Place reporting system	☒	☐	☐	
Has the agency given due recognition to the U.S. Administration on Aging, the NYS Office for the Aging and Monroe County DHS/Office for the Aging, as appropriate, in program/service	☒	☐	☐	

brochures, flyers and other printed materials as well as online? **Monthly Coordinator's Report Checklist has most current wording*				
The agency has a written policy regarding retention of all Monroe County DHS/Office for the Aging contracted program and fiscal records for six (6) years	☒	☐	☐	*Specifics in MCOFA Nutrition Program Policy Manual
There is representation at 90% of MCOFA Coordinators meetings	☒	☐	☐	
All updated insurance certificates naming the County of Monroe as additionally insured on file with the Monroe County Contract Office (Contrack HQ)	☒	☐	☐	
All Equipment Inventory & Disposition Forms updated and on file at MCOFA	☒	☐	☐	Last updated:2017
The center is responsive to "LEP" Limited English Proficiency –limited ability to read, speak, write, or understand English	☒	☐	☐	Explain: Tellmorr Contract
The center accommodates LGBT participants	☒	☐	☐	

[1] As detailed in the Policy Manual , 19-PI-26 and Program Application

IV. Conclusions

1. **Overall assessment of the strengths**

   Town/Agency Comments: We are thankful for MCOFA's partnership and support and look forward to continuing our work together to build a strong, vibrant, and connected community.

   MCOFA Comments: The center continues to create a warm and fun environment within downtown Rochester, serving a very diverse population in a food desert. They were able to exceed their meal projections and decrease their food waste from the previous year. The serve the key demographics of the program with: 27.5% over the age of 75; 69.3% live alone; 76.3% are frail and/or disabled and 81.1% are low income.

2. **Areas in need of attention**

   Town/Agency Comments: None at this time.

   MCOFA Comments: None at this time.

3. **Additional resources/technical assistance requested**

   Town/Agency Comments: None at this time.

   MCOFA Comments: As needed.

Satisfaction Survey Analysis- To Be Completed By Center Staff

Center Name: WSR Total Distributed: 11 Total Participants:

Please Enter Total Number of people who answered per column.

	Meals	Classes/Groups	Both
What services do you participate in at the center?	18	0	16
	Breakfast	Lunch	
Which type of meals have you received this year?	8	24	34

Please Enter Totals for Each Column (Number of people who answered per column)

How do you rate the breakfast you receive?	Excellent	Good	Fair	Poor
Taste				
Temperature				
Variety				
Overall quality				

Please Enter Totals for Each Column (Number of people who answered per column)

How do you rate the lunch you receive?	Excellent	Good	Fair	Poor
Taste	18	21	10	2
Temperature	17	21	10	2
Variety	18	21	13	3
Overall quality	15	25	13	3

Please Enter Totals for Each Column (Number of people who answered per column multiplied by the number assigned)

	Yes (3)	Maybe (2)	No (1)	No Answer (0)	Total	Total Possible[1]	%[2]
Since coming to the center, have your social opportunities increased?	44 132	23 46	4	0	180	213	85%
Since coming to the center have you gained knowledge or new skills?	52 156	12 24	0	7	180	192	94%

Would you recommend the Senior Center to friends and family members?

Please Enter Totals for Each Column

Yes (3)	Maybe (2)	No (1)	No Answer (0)	Total	Total Possible[1]	%[2]
58 174	7 14	0	4	188	195	96%

[1]Do not count *No Answer* in Total Possible (Total Actually Answered x 3)

[2]Total Divided by Total possible x 100

Department of **Human Services**
Office for the Aging
Monroe County, New York

Adam Bello
County Executive

Thalia Wright
Commissioner

Steve Newcomb
Director

October 8, 2026

Dolores Rodriguez
86 Vienna St
Rochester, NY 14605

Dear Dolores,

Attached for your records is the completed 2025-26 Annual Program Evaluation for the Monroe County Office for the Aging (MCOFA) funded Senior Center Nutrition Program. The senior center contract is doing well. For comments related to each program and its specific objectives, please read through the evaluation. You may find additional general comments related to the program on the final page of the evaluation.

Thank you for continuing to provide these valued services to our community's older adult population.

Should you have any questions regarding the evaluation, please do not hesitate to contact me at 753-5566.

Sincerely,

Tracy Collins

cc: Monroe County Office for the Aging –Steve Newcomb, Leanne Rorick

Encl: Annual Program and Service Assessment

Office of **the County Executive**

Monroe County, New York

Adam J. Bello
County Executive

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Not to be removed from the Office of the Legislature Of Monroe County
Committee Assignment
HUMAN SERVICES -L
WAYS & MEANS

November 6, 2026

To The Honorable
Monroe County Legislature
407 County Office Building
Rochester, New York 14614

Subject: Authorize Contracts with Not-For-Profit Agencies for Rochester-Monroe County Youth Bureau Programs in 2027

Honorable Legislators:

I recommend that Your Honorable Body authorize contracts with the agencies listed in Attachment A, in a total amount not to exceed $1,641,949 for Rochester-Monroe County Youth Bureau (the "Youth Bureau") programs for the period of October 1, 2026 through September 30, 2027.

The Rochester-Monroe County Youth Bureau enters into approximately twenty-six (26) contracts each year in amounts over $20,000, with matching funds required for Runaway and Homeless Youth providers only. Contracted services directly correspond to the assessed needs and service objectives of the Youth Bureau and as required and approved by the New York State Office of Children and Family Services. This year's funding represents a decrease of $57,552 from last year's funding.

The agencies were selected through a competitive request for qualifications process, based on the New York State required County Child and Family Services Plan in which services to be contracted must directly correspond to the assessed needs, priority focus areas, and outcomes of the plan; State Executive Law procedures and criteria for selecting programs; and State certification requirements for runaway and homeless shelter programs.

Contract programs will be evaluated consistently and continually through three methods utilized by the Youth Bureau, documented in its Monitoring and Evaluation Systems Procedures Manual. These methods include: 1) self-report, requiring agency submission of three (3) different self-report instruments; 2) yearly outcome evaluation assessment of contract outcomes; and 3) expenditure review. These contracts will allow for the provision of a comprehensive range of youth services and programs by the not-for-profit agencies specified in Attachment A.

Please refer to the attached Purchase of Services Information Form for disclosure of information required pursuant to Resolution 223 of 2007, as amended by Resolution 11 of 2008.

The specific legislative actions required are:

1. Authorize the County Executive, or his designee, to execute contracts, and any amendments thereto, with each approved agency as listed in Attachment A, for youth services, in a total amount not to exceed $1,641,949 for the period of October 1, 2026 through September 30, 2027.

2. Authorize the County Executive, or his designee, to execute any applications, contracts, and amendments thereto, with New York State and/or agencies listed in Attachment A to increase or decrease the contract amount and extend the length of the contract(s) in order to maximize state reimbursements for these purposes.

3. Authorize the County Executive to appropriate any subsequent years of the grant award in accordance with the grant terms, to reappropriate any unencumbered balances during the grant period according to the grantor requirements, and to make any necessary funding modifications within the grant guidelines to meet contractual commitments.

4. Should funding of this program be modified or terminated for any reason, the County Executive is hereby authorized to terminate or modify the program and where applicable, to terminate or abolish some or all positions funded under such program. Any termination or abolishment of positions shall be in accordance with the New York State Civil Service Law, and when applicable, the terms of any labor agreement affecting such positions.

This action is a Type II Action pursuant to 6 NYCRR § 617.5(c)(26) ("routine or continuing agency administration and management, not including new programs or major reordering of priorities that may affect the environment") and is not subject to further review under the State Environmental Quality Review Act.

Funding for these contracts is included in the 2026 operating budget and in the proposed 2027 operating budget of the Department of Human Services, general fund 1001, cost centers 560201, Runaway Homeless Youth Services; 560301, Youth Contracts; and 560601, Positive Youth Development. No additional net County support is required in the current Monroe County budget.

Each of these contractors has been reviewed for not-for-profit status and the records in the Office of the Monroe County Treasury have indicated that none of these agencies owe any delinquent Monroe County property taxes.

I recommend that this matter be referred to the appropriate committee(s) for favorable action by Your Honorable Body.

Sincerely,

Adam J. Bello
Monroe County Executive

ATTACHMENT A
PRIVATE AGENCY CONTRACTS 2027

1. **Center for Youth Services, Inc.–Prevention Education & Prevention Counseling Program -YDP** **$ 112,738**
   The Prevention Education and Prevention Counseling Program bring comprehensive youth services to youth and their families throughout Monroe County and the City of Rochester as well as at school-based sites. Prevention/education groups and workshops, crisis intervention, counseling, case coordination, access to runaway/homeless youth housing and follow-up services are provided.

2. **Compeer Rochester Inc.- Youth and Family Mentoring Program-YDP** **$43,274**
   This program provides support and guidance to disadvantaged youth and their families who are struggling with poverty, mental illness and/or parental incarceration. They do this by matching youth with adult community volunteers who develop a one-on-one, trusting relationship and become a positive role model for youth.

3. **The Urban League of Rochester, Inc. –YDP** **$47,078**
   The youth intervention program provides mentoring support following the research based Behavioral Monitoring and Reinforcement Program to students at risk of being suspended or dropping out of school. The model involves regular monitoring and mentoring and student, teacher, and parent contacts. The mentoring program will provide youth achievement mentoring services and support to improve their academic, social, and emotional behavior both within the school setting and their community.

4. **The Community Place of Greater Rochester –YDP** **$56,531**
   This program provides neighborhood-based after-school and summer programs to youth, ages 5-20 years and their families residing in Northeast Rochester. The program encourages the development of social and emotional competencies, assets, and the increase of protective factors with youth. Services include youth development activities such as homework assistance, leadership skills, community service and interpersonal skill building as well as intervention services within the home and school to address school or family behavioral management problems. Two evidence-based program curriculums, PATHS (Promoting Alternative Thinking Strategies and TOP (Teen Outreach Program) are used with the programming.

5. **Center for Youth Services – RHY** **$570,742**
   The Center Runaway/Homeless Youth Services is an integral component of the comprehensive package of services provided for runaway and homeless youth by The Center. Services include crisis counseling, prevention/education, short-term counseling, housing assessment, casework, and follow-up services for male and female youth through a group home shelter and volunteer families. The twelve- (12) bed shelter is open twenty-four (24) hours a day and provides short-term shelter/services in accordance with New York State Office of Children and Family Services Runaway regulations.

6. **Charles Settlement House- READY by 21-YDP** **$34,950**
   The program provides a teen club using the evidence-based Teen Outreach Program (TOP) with mentoring and engagement in community service and service-learning opportunities for NW city youth. Curricula/programming includes media literacy, employment readiness, social and emotional skill development and intergenerational programming with Charles' Senior Center.

7. **Consumer Credit Counseling Service of Rochester "Go for Gold"-YDP** **$42,970**
   The "Go for Gold" peer financial education program is focused on achieving self-sufficiency for at-risk youth and their families through an asset-based curriculum. The experience of working with vulnerable populations positions CCCS to make a deep and measurable impact in the Rochester community. "Go for Gold" peer educator trainings are conducted on-site at partner program locations (host sites) in conjunction with their normal program operations. Four (4) separate workshops are presented in one-hour segments using interactive, hands-on activities and demonstrations including role-play and problem-solving. Handouts and resource materials are provided at each session. Each class features education in four key areas to equip participants to deliver a 10-minute, financial workshop.

8. **Villa of Hope Work Based Learning Program - YDP** **$39,045**

The Villa of Hope's Work Based Learning (WBL) Program is designed to build assets by increasing personal and professional skills and preparing these youth with the knowledge and skills needed to sustain economic self-sufficiency. The WBL Program prepares youth, ages 16-20, with the skills that are necessary to obtain a sustainable wage. We will work to prepare youth to succeed in today's economy, by exposing them to high-growth middle-skill occupations in promising fields such, as manufacturing and information technology.

9. **Center For Community Alternatives - YDP** **$68,466**

Center for Community Alternatives is in the initial stages of developing a program that would pair youth charged with crimes (and/or coming home from detention or incarceration) to a "justice peer." Peer services are widely used in the mental health/substance use arenas and are effective. There is some movement recently to get a "justice peer" certification off the ground, for folks who, in addition to being certified as a recovery or other already-existing professional peer, happen also to have a lived experience of arrest, incarceration, etc. This will be piloted in Rochester, NY.

10. **Western New York Pop Warner - YTS** **$150,000**

Western NY Pop Warner consists of 6 teams that encourage and increase youth participation in football, cheerleading, and dance to ensure a safer, positive playing environment for all participants. In addition, instill life-long values of teamwork, dedication, and a superior work ethic in the classroom and on the playing field. This funding supports 6 different teams that play in Monroe County under the Western NY Pop Warner League and national affiliation.

11. **ROC E6 Inc. - YSEF** **$22,000**

Provide a variety of sports opportunities to underserved youth ages 6-17 years of age. The program will provide a consistent structure that youth can develop values, morals, and commitment through play. Our opportunities to participate in various sports programs teach fundamental values, skills, and knowledge that young people will use throughout their lives.

12. **River Flow Soccer - YTS** **$35,000**

Provide soccer programming for City and Suburban youth ages 6-14 to break down socio-economic barriers, provide character development and the opportunity to play in a safe nurturing environment. The priority of River Flow Soccer Club is to offer children a safe place to positively engage with coaches and volunteers along with family so that they understand the community cares and values them.

13. **Primetime 585 - YSEF** **$40,000**

Provide a variety of sports opportunities to underserved youth ages 6-17 years of age. Primetime will offer a new track program to offer boys and girls the opportunity to experience this sport with expert coaches. The Primetime programs, events and camps will provide a consistent structure that youth can develop values, morals, and commitment through play.

14. **A Horse's Friend, Inc.-YSEF** **$40,000**

Providing the opportunity for youth ages 7-17 that have social challenges or had contact with the justice system the opportunity to learn responsibility, youth development and empathy through caring for horses and learning how to ride. Expose youth to a unique sport that they would not have access to due to many accessibility challenges that exist that include cost, transportation, and awareness.

15. **Flower City Panthers Youth Athletics - YTS** **$$25,000**

Provide a youth football program and life skills learning for youth who are exposed to trauma, poverty and other factors that impact their growth. This program will provide an opportunity for social interaction between participants which promotes community involvement and friendship. Students will have the opportunity to improve their physical fitness through their participation. Through play, youth will learn teamwork, work habits and other social skills that will translate into skills youth can use as the move into adulthood.

16. **Rochester Hispanic Youth Baseball League - YTS** **$40,000**

This is a youth baseball program that serves youth who live in underserved neighborhoods. This program will have knowledgeable, trained coaches that offer a safe environment for youth to learn and grow through the participation in the sport.

17. **Badass Bodies by Sean – YSEF** **$30,000**

This program will offer displaced youth under the direct care and supervision of the County of Monroe, a variety of fitness and mental health activities & programs. The program will be held at a private facility that offers one on one fitness instruction. Participants will have access to typical gym and fitness equipment such as, weights and weight machines, cardio machines, a 15' trampoline, aerobic equipment, battle rope and TRX stations, a half basketball court and climbing rope.

18. **Hoop 'n Holla Inc. - YSEF** **$30,000**

Hoop 'n Holla basketball camp is designed to build on the basketball hopes and dreams of our Monroe County youth, ages 6-17, utilizing an interactive village where all campers learn the fundamental skills, mechanics, and thinking strategies associated with successful execution of basketball. Our full-day program combines social, emotional and nutritional elements into an educational framework that illustrates how ELA, Mathematics, Financial Literacy, Emotional Well Being and Nutrition are inextricably connected to academic and basketball athletic opportunities. Additionally, each class is aligned with NYS Educational Common Core Standards, highlighting one of our fundamental values, decreasing summer leaning loss.

19. **The Warrior Factory Rochester - YSEF** **$18,000**

Participants will compete in a Summer Ninja Rec League that includes an individual obstacle course race and a team relay during weekly matches. The season will begin with open play attendance and an opportunity for youth to build relationships with staff and gain familiarity on the equipment. The rec league season will contain multiple practices and then shift towards competition with a playoff bracket and championship. Participants will learn about positive mindset as well as develop balance, agility, upper body and grip strength. Teamwork as well as building positive relationships with others while trying new challenges will be repeated themes through the program.

20. **Bears Youth Football and Cheer, Inc. - YTS** **$25,000**

The Bears Youth Football & Cheer organization is an organization that strives to give all athletes the opportunity to play regardless of race, ethnicity, residency and ability. We strive to provide mentorship through our coaches and board members and provide a safe and structured environment for all. We model positive relationships and interactions between coaches, mentors, athletes and parents. Our program teaches values, life skills and discipline through both football and cheer. We also put a high value on a culture of family, when here everyone is family and we encourage involvement from parents, aunts, uncles, grandparents and any other positive relationships.

21. **Having Only Positive Expectations, Inc. (HOPE) - YSEF** **$40,000**

HOPE is a nonprofit afterschool program that uses basketball, academics, and mentoring to help boys ages 8–18 grow as students, athletes, and leaders. Our mission is to create safe, high-quality sports opportunities for youth in Rochester and Monroe County—especially those from limited-income families—and to connect what happens on the court to success in the classroom and in life.

22. **Rochester City Soccer League (RCSL) – YSEF** **$50,000**

RCSL serves youth and families throughout the City of Rochester and Monroe County. The League reaches more than 3,000 youth and family members annually through an inclusive continuum of recreational, select, competitive travel, futsal, soccer school, conditioning, leadership, academic support, and workforce-development activities. RCSL programming is available to youth ages 6 through 17. The program is designed so that beginners can enter through recreation and soccer school while participants seeking additional development can progress into "select", travel, leadership, coaching, and officiating pathways.

23. **The Boys and Girls Club of Greater Rochester – YSEF** **$22,000**

The Clubs' Biddy Basketball league, fitness training and golf program will operate on Saturdays at the Boys and Girls Club. There are several sports activities under the Club's Saturday Fitness & Recreation programming that youth can engage. Physical health and well-being will be incorporated into the program by encouraging members to engage in regular physical activity and develop a positive relationship with their bodies. The programs will also promote healthy habits through discussions about body image, nutrition, hydration, rest, and overall wellness. Mental health and well-being in

sports can improve outcomes for youth by supporting emotional development, building confidence, and strengthening social connections.

24. **Rochester Sports Club LLC – YSEF** **$25,000**

The Rochester Sports Club will offer exciting youth cricket classes - where beginner, intermediate and advanced level players will learn batting, bowling, and fielding in a fun, supportive environment. this program builds skills, teamwork, and a love for the game.

25. **The Brickx – YTS** **$15,000**

The Brickx serves inner-city youth, both boys and girls, who face various challenges, including financial barriers, lack of consistent family support, dangerous neighborhoods, mental health issues and some educational barriers. Through the program, they provide access to athletic activities, wrap-around support services such as tutoring, mentorship, and life skills development. The goal is to create a safe, inclusive, and empowering environment where these youth can develop physically, emotionally, and academically, regardless of the obstacles they face in their personal lives.

26. **City of Rochester - YSEF** **$19,155**

The after-school sports programs will include a basketball league, track and field and boxing programs which will provide youth the opportunity to learn the following: sports skills, how to compete as a member of a team, information about college, social and emotional life skills. Students will gain positive experiences through participation in these sports.

PURCHASE OF SERVICES INFORMATION FORM
Per Resolution 223 of 2007 as amended by Resolution 11 of 2008

Re: **Authorize Contracts with Private Agencies for Rochester-Monroe County Youth Bureau Programs in 2026-27**

Total Served 2026: 1293
Proposed YDP $ Amt. 2026-27: $112,738

PROGRAM: Prevention Education/Counseling

CONTRACTOR: The Center for Youth Services, Inc., Elaine Spall, Executive Director

PROGRAM DESCRIPTION: The Center's Runaway Youth Services project is a major part of the comprehensive services provided for runaway and homeless youth. Services include counseling intervention, housing assessment, casework and follow-up services through an emergency shelter, volunteer interim family program and counseling offices.

PRIMARY OBJECTIVE(S)/ DELIVERABLE(S):

1 – Participants will stabilize their housing, build connection with family and community supports and increase protective factors.

2 – Participants increase knowledge and life skills and build protective factors.

3 – Participants experience less trauma during a time of crisis and are connected to on-going services as needed.

4 – Participants stabilize their housing, build connection with family and community supports and increase protective factors

5 – Youth are connected to mental health services and parents are engaged in advocating for their child.

PRIMARY PERFORMANCE MEASURE/INDICATOR

1 – 90% will have achieved one or more outcome goal; 80% will have maintained or gained on their CGAS score

2 – 80% will increase knowledge; 90% will demonstrate skill

3 – 100% will be provided crisis counseling; 75% will be referred to on-going services (internal and/or external)

4 – 90% of participants will have stabilized their housing; 90% will have met employment and/or educational goals; 80% will have enhanced permanent connections with family/health adults.

5 – 90% of families will be connected with on-going mental health support; 75% of youth participants will have stabilized their housing

	Previous Year Actual	Current Year Projection	Next Year Projection
Program Year	1/1/25 -12/31/25	1/1/26 -12/31/26	1/1/26-12/31/27

Total # of Participants	1480	1293	1500

OUTCOME ASSESSMEN METHODOLOGY:

All program activities are designed to promote goal achievement and be quantified, measured and tracked. Routine (monthly, quarterly, annually) reviews of progress activities and outcomes allow modifications to be made as needed to support successful outcomes and goal achievement. Measurement tools are developed, and data is collected, reviewed and analyzed by program administrators and the agency Board of Directors, and is used to mark progress toward program goals and to make quality improvements. Measuring program performance is accomplished by querying the agency's Management Information System (which has been maintained for over 23 years) to generate utilization, outcome and impact reports no less than quarterly which is essential to planning, updating, revising and developing new procedures, protocols and services.

Reports compare actual outcomes to the projected outcomes and are used to inform service methodology or program objective modifications needed. These reports also identify emerging trends, changes in client demographics, geographic distribution and service utilization. Program goals are quantified so that data can be collected and progress evaluated. The efficacy of services/activities is reflected in the impact (i.e., knowledge gained, skills developed, and behavior change) on the participant and by their direct feedback as to its relevancy. Service methodology is modified as needed to improve efficacy. In this way, services remain client-centered and directed, current and meaningful and successful services/activities are noted and replicated.

SOURCE MATERIAL: Application narrative, annual reports; ContrackHQ

PURCHASE OF SERVICES INFORMATION FORM
Per Resolution 223 of 2007 as amended by Resolution 11 of 2008

Re: **Authorize Contracts with Private Agencies for Rochester-Monroe County Youth Bureau Programs in 2026-27**

Estimated Total Served 2026 165
Proposed YDP $ Amt. 2025-26: $43,274

PROGRAM: The Compeer Rochester Youth and Family Mentoring Program

CONTRACTOR: Compeer Rochester, Inc.

PROGRAM DESCRIPTION: The Compeer Rochester Youth and Family Mentoring Program is an evidence-based mentoring service that provides support and guidance to disadvantaged youth and their families who are struggling with poverty, mental illness and/or parental incarceration. The goal of our program is to improve the well- being of these youth and families by showing them how they can succeed on their own by using natural community supports. Compeer matches youth with adult volunteers whose focus is on developing a vibrant, trusting one-on-one mentoring relationship. Compeer also provides the services of a Family Peer Advocate whose role is to assist families through challenges that arise that might have an offsetting impact on an otherwise effective mentoring relationship. These services are available to our clients at no cost.

PRIMARY OBJECTIVE(S)

1 - Youth who feel their mentor takes their preferences and interests into account are more likely to show improvement in their behaviors and attitudes than are youth who feel their mentor is less interested in them.
2 – Youth who feel better about being around their mentor are more likely to show improvement in their behaviors and attitudes than are youth who feel less positive.
3 - Youth who feel more satisfied with their mentor and the relationship are more likely to show improvement in their behaviors and attitudes than are youth with less favorable impressions.

PRIMARY PERFORMANCE MEASURE/INDICATOR

1 - 75% of youth will report HIGH SATISFACTION (score 3.5 or above) on questions relating to youth-centeredness of the match.
2 – 75% of youth will report HIGH SATISFACTION (score 3.5 or above) on questions relating to youth emotional engagement.
3 – 56% of youth will report HIGH SATISFACTION (score 3.5 or above) on questions relating to the overall satisfaction with their match and the Compeer Program.

	Previous Year Actual	Current Year Projection	Next Year Projection
Program Year	1/1/25 -12/31/25	1/1/26 -12/31/26	1/1/27 – 12/31/27
Total # of Participants	165	170	

OUTCOME ASSESSMENT METHODOLOGY

The Compeer Model is a proven best practice. The Compeer Model is listed in the National Registry of Evidence-based Programs and Practices (NREPP), a searchable online database of mental health and substance abuse programs that have been rated for the quality of research supporting intervention outcomes and the availability of training and implementation materials. All interventions in the registry have met NREPP's requirements for readiness for dissemination. The NREPP is a program of the Substance Abuse and Mental Health Services Administration (SAMHSA), a branch of the U.S. Department of Health and Human Services. SAMHSA's mission is to reduce the impact

of substance abuse and mental illness on America's communities. The purpose of NREPP is to help the public learn more about mental health and substance abuse programs and determine which of these may best meet their needs.

The Compeer Model includes thorough mentor screening, comprehensive training and ongoing monitoring of the mentor-mentee match. Fidelity to the Model maintains the integrity of the match and the increased likelihood that match goals will be achieved. Compeer Rochester is unique in our community because we provide the services of a bi-lingual (Spanish) Family Peer Advocate whose role is to assist families through challenges that arise that might have an offsetting impact on an otherwise effective mentoring relationship.

SOURCE MATERIAL: Application narrative

PURCHASE OF SERVICES INFORMATION FORM
Per Resolution 223 of 2007 as amended by Resolution 11 of 2008

Re: **Authorize Contracts with Private Agencies for Rochester-Monroe County Youth Bureau Programs in 2026-27**

Estimated Total Served 2026: 55
Proposed YDP $ Amt. 2026-27: **$47,078**

PROGRAM: Youth Achievement Program (Youth Intervention Program)

CONTRACTOR: Urban League of Rochester, N.Y., Inc. (ULR)

PROGRAM DESCRIPTION: The Urban League of Rochester's (ULR) proposed Youth Achievement Program (YAP) will utilize and provide community, academic, social, and cultural resources and activities to prepare Monroe County's most vulnerable youth to succeed in college, work, and life. YAP prioritizes the safety and protection of Monroe County's hardest to reach children by building upon healthy development and self-sufficiency options for youth.

PRIMARY OBJECTIVE(S)
1 - Increased school attendance
2 - Improved academic performance

PRIMARY PERFORMANCE MEASURE/INDICATOR
1 – 83% of youth will have school attendance rates of 93% or better.
2 – 88% of youth will be promoted to the next grade level

	Previous Year Actual	Current Year Projection	Next Year Projection
Program Year	1/1/25 -12/31/25	1/1/26 -12/31/26	1/1/27 – 12/31/27
Total # of Participants	55	50	50

OUTCOME ASSESSMENT METHODOLOGY
1 – Staff obtain consent to acquire students' school records to monitor their attendance each marking period.
2 – Staff obtain consent to acquire students' school records to monitor their grade level advancement prior to the beginning of the next school year.

SOURCE MATERIAL: Application narrative; ContrackHQ; Year-end reports

PURCHASE OF SERVICES INFORMATION FORM
Per Resolution 223 of 2007 as amended by Resolution 11 of 2008

Re: **Authorize Contracts with Private Agencies for Rochester-Monroe County Youth Bureau Programs in 2026-27**

Estimated Served 2026: 155
Proposed YDP $ Amt. 2027: $56,531

PROGRAM: The Community Place of Greater Rochester, Inc. (CPGR) Youth Development Department

CONTRACTOR: The Community Place of Greater Rochester, Inc.

PROGRAM DESCRIPTION: The Community Place of Greater Rochester, Inc. (CPGR) Youth Development Department proposes a new and innovative project designed to provide youth in the city of Rochester's most economically disadvantage neighborhoods with the opportunity to participate in a combination of uniquely collaborative programming which will inspire, open their world beyond the neighborhoods and help each youth create an individual and unique vision for their future. The services will integrate social, academic, enrichment and skill-building activities through a range of engaging exercises that make learning relevant, offer approaches and experiences to promote youth are successful in many areas: educational achievement, improved resilience, social-emotional development, and student engagement.

PRIMARY OBJECTIVE(S)

1 - Participants will improve or maintain their social-emotional learning using the T-CRS and Mini-DESSA tools.
2 – Participants will demonstrate the ability to budget and complete a portfolio.
3 – Participants will show a literacy gain in reading.
4 – Attendance from workshop series.
5 – Participants will show a decrease in 30 day substance use as measured through pre/post test administered at baseline and program end.

PRIMARY PERFORMANCE MEASURE/INDICATOR

1 - 79% will increase or maintain competencies
2 – 73% will complete financial portfolio;
3 – 60% will show a literacy increase
4 – 400 youth will receive curriculum
5 – 70% of participants will decrease their 30- day substance use

	Previous Year Actual	Current Year Projection	Next Year Projection
Program Year	1/1/25 -12/31/25	1/1/26 -12/31/26	1/1/27 – 12/31/27
Total # of Participants	155	200	200

OUTCOME ASSESSMENT METHODOLOGY

1 – Promoting Alternative Thinking Strategies (PATS)
2 – National Endowment of Financial Education (NEFE)
3 – Test of Adult Basic Education (TABE)
4 – Comprehensive Adolescent Pregnancy Prevention (CAPP)
5 – Project Towards No Drug Abuse

SOURCE MATERIAL: Application narrative; ContrackHQ; Annual Reports

PURCHASE OF SERVICES INFORMATION FORM
Per Resolution 223 of 2007 as amended by Resolution 11 of 2008

Re: Authorize Contracts with Private Agencies for Rochester-Monroe County Youth Bureau Programs in 2026-27

Total Served 2025: 171 youth served in RHY funding

Proposed $ Amt. 2027: $570,742 (RHY1 and RHY2 and County funding)

PROGRAM: The Center Runaway Emergency Shelter Part I & II

CONTRACTOR: The Center for Youth Services, Inc.

PROGRAM DESCRIPTION: The Center's Runaway Youth Services project is a major part of the comprehensive services provided for runaway and homeless youth. Services include counseling intervention, housing assessment, casework and follow-up services through an emergency shelter, volunteer interim family program and counseling offices.

PRIMARY OBJECTIVE(S)/ DELIVERABLE(S): To provide emergency shelter, counseling, intervention for the existing and at risk runaway / homeless youth population.

PRIMARY PERFORMANCE MEASURE/INDICATOR To provide safe and accessible emergency shelter and basic support needs to youth ages 12-18 who are runaway or homeless. Youth receiving emergency shelter, case management and counseling services will be discharged to a stable living situation.

	Previous Year Actual	Current Year Projection	Next Year Projection
Program Year	1/1/25 -12/31/25	1/1/26 -12/31/26	1/1/27 – 12/31/27
Total # of Participants	171	180	180

OUTCOME ASSESSMENT METHODOLOGY:

1 - To provide safe and accessible emergency shelter and basic support needs to youth ages 12-18 who are runaway or homeless. Youth receiving emergency shelter, case management and counseling services will be discharged to a stable living situation;

2 - Youth receiving emergency shelter, counseling and case management services will have their basic living skills assessed; and youth having their life skills assessed will acquire and demonstrate new skills;

3 - Youth receiving emergency shelter, case management and counseling services will increase their ability to identify and access physical and mental health services;

4 - Youth receiving emergency shelter and prevention education will increase their knowledge in the areas of HIV/AIDS and substance abuse and other high-risk behavior prevention;

OUTCOME ASSESSMENT METHODOLOGY:	1 - 90% of youth receiving emergency shelter will leave the shelter for a longer term stable, living environment; 2 - 80% of youth in care for more than 3 days will have their basic living skills assessed; 80% of youth assessed will acquire and demonstrate new basic living skills; 3 - 90% of youth receiving emergency shelter will assess their physical and mental health needs and will acquire information and skills needed to access services; 4 - 92% of youth participating in the intensive, single session, psycho-educational workshops will rate the content as useful and pertinent; 92% of youth participating in the intensive, single session, psycho-educational workshops will demonstrate or report life skills related to the topic; 92% of youth participating in the intensive, single session, psycho-educational workshops will increase topic specific knowledge.
SOURCE MATERIAL:	Application narrative, annual reports; ContrackHQ

PURCHASE OF SERVICES INFORMATION FORM
Per Resolution 223 of 2007 as amended by Resolution 11 of 2008

Re: **Authorize Contracts with Private Agencies for Rochester-Monroe County Youth Bureau Programs In 2026-27**

Total Estimated 2026: 102

Proposed YDP $ Amt. 2026-27: $34,950

PROGRAM: SEP (Student Enrichment Program)

CONTRACTOR: Charles Settlement House, Inc.,

PROGRAM DESCRIPTION: SEP (Student Enrichment Program) offers youth development programs throughout the year for 100 children aged 6 to 12, emphasizing holistic development. Structured activities support academic progress, social skills, and engagement. Each day features a mix of educational and enjoyable experiences, such as a nutritious snack, literacy support, physical activities, and group workshops covering various subjects like STEM, community service, and arts. The program, located at 71 Parkway, aligns with Rochester's City School District calendar, operating five days a week from 2 to 6 pm.

PRIMARY OBJECTIVE(S)/
1 - decrease in high-risk behavior
2 – teen pregnancy prevention
3 – promote school retention
4 – increase youth connections throughout the community

PRIMARY PERFORMANCE MEASURE/INDICATOR
1 – 76% of youth will show a decrease in high-risk behavior
2 – 93% of youth will not become pregnant or contribute to a pregnancy
3 – 80% of youth will remain in school and advance to the next grade level
4 - 80% of youth will have increased connections with the community and caring adults

	Previous Year Actual	This Year Projection	Next Year Projection
Program Year	1/1/25 -12/31/25	1/1/26 -12/31/26	1/1/27- 12/31/27
Total # of Participants	103	100	100

OUTCOME ASSESSMENT METHODOLOGY Based on youth's previous CSH experience; surveys; self-evaluation tools; Social Competency Index; Belonging Skills; Casey Life Skill Assessment; School records.

SOURCE MATERIAL: Application narrative

PURCHASE OF SERVICES INFORMATION FORM
Per Resolution 223 of 2007 as amended by Resolution 11 of 2008

Re: **Authorize Contracts with Private Agencies for Rochester-Monroe County Youth Bureau Programs In 2026-27**

Total Served 2026 155
Proposed YDP $ Amt. 2026-27: $42,970

PROGRAM: Go for the Gold

CONTRACTOR: Consumer Credit Counseling Service of Rochester, Inc.

PROGRAM DESCRIPTION: Go for Gold is an education program that certifies youth ages 11-18 as peer financial educators knowledgeable in a variety of personal finance topics. We work in partnership with teachers, after-school programs, and non-profits to identify youth interested in becoming a certified financial educator. These partnerships strengthen existing community programs, adding financial capability topics to enhance our partners' educational impact. We provide a $50 stipend to a peer educator for each workshop they deliver in their class, after-school program, church, or affinity group. We encourage peer educators to save at least half of the awarded amount in a savings account.

PRIMARY OBJECTIVE(S) Youth trained through "Go For The Gold" will demonstrate increased knowledge of good money, management, and self-report an increase in good money management behavior and a higher level of confidence regarding personal money management. Long-term, students will adopt leadership roles in financial management, and gain important self-esteem characteristics related to confidence, communication, creativity, and self-identity as a leader.

PRIMARY PERFORMANCE MEASURE/INDICATOR:

1 – How many youth enrolled in the program
2 – % of students that utilize the life skills assessment tool
3 – % of students that enter into another community service project

	Previous Year Actual	Current Year Actual	Next Year Projection
Program Year	1/1/25-12/31/25	1/1/26-12/31/26	1/1/27 – 12/31/27
Total # of Participants	125	155	150

OUTCOME ASSESSMENT METHODOLOGY

CCCS of Rochester staff evaluate Go for Gold through 3 assessments. The first assessment is a pre- and post-test administered to peer educators. These tests measure the peer educators' performance on 7 knowledge-based questions as well as self-reported confidence and intent using personal money management techniques. To maintain compliance within the program, we have teachers submit a verification sheet that details what topics the presentation/workshop covered, and the length as well as quality of the presentation/workshop. Finally, peer educators administer an evaluation to their peers who self-report knowledge of personal money management topics before and after the peer educator's workshop/presentation.

SOURCE MATERIAL: Application narrative

PURCHASE OF SERVICES INFORMATION FORM
Per Resolution 223 of 2007 as amended by Resolution 11 of 2008

Re: Authorize Contracts with Private Agencies for Rochester-Monroe County Youth Bureau Programs in 2026-27

Estimated Total Served 2026: 60
Proposed YDP $ Amt. 2026-27: $39,045

PROGRAM: Work Based Learning Program

CONTRACTOR: Villa of Hope

PROGRAM DESCRIPTION: The Villa of Hope's Work Based Learning (WBL) Program is designed to build assets by increasing personal and professional skills and preparing these youth with the knowledge and skills needed to sustain economic self-sufficiency.

PRIMARY OBJECTIVE(S) The WBL Program prepares youth, ages 16-20, with the skills that are necessary to obtain a sustainable wage. We will work to prepare youth to succeed in today's economy, by exposing them to high-growth middle-skill occupations in promising fields such, as manufacturing and information technology.

PRIMARY PERFORMANCE Each youth will complete two assessments prior to the start of their internship: The BSA Career Interest Survey and the Search Institutes 40 Development Assets Self-Reporter Profile. This second assessment measures the youths' internal and external strengths and helps to provide a more complete picture of a young person's life, which allows VOH to provide more effective interventions and programming. In addition, prior to job placement, each youth will work with VOH's Vocational Counselor, to complete a vocational screening assessment and job interest survey – this will assess for readiness into the program.

MEASURE/INDICATOR 94% of youth completing the program will demonstrate work readiness competencies; 100% of youth will create and 85% adhere to a financial management plan; 94% of surveyed participants completing the program will declare a broader understanding of career options and how to access them; 95% of youth enrolled in WBL Program will successfully complete the program; 100% of youth will create career plans in youth portfolios; 95% of all sites employing Villa youth will have received training prior to and during orientation.

	Previous Year Actual	Current Year Projection	Next Year Projection
Program Year	1/1/25 -12/31/25	1/1/26 -12/31/26	1/1/27 – 12/31/26
Total # of Participants	72	60	60

OUTCOME ASSESSMENT METHODOLOGY Organization measurements

SOURCE MATERIAL: Application narrative

PURCHASE OF SERVICES INFORMATION FORM
Per Resolution 223 of 2007 as amended by Resolution 11 of 2008

Re: **Authorize Contracts with Private Agencies for Rochester-Monroe County Youth Bureau Programs in 2026-27**

Total Served 2026:	11
Proposed YDP $ Amt. 2026-27:	$68,466
PROGRAM:	Peer Program
CONTRACTOR:	Center for Community Alternatives
PROGRAM DESCRIPTION:	Center for Community Alternatives is in the initial stages of developing a program that would pair youth charged with crimes (and/or coming home from detention or incarceration) to a "justice peer."
PRIMARY OBJECTIVE(S)	Peer services are widely used in the mental health/substance use arenas and are effective. There is some movement recently to get a "justice peer" certification off the ground, for folks who, in addition to being certified as a recovery or other already-existing professional peer, happen also to have a lived experience of arrest, incarceration, etc. The Youth Justice Peer Program Director will oversee the development and implementation of a new peer support program in Rochester. The program is intended to provide peer support and credible monitoring to youth ages 10-20 who have an open criminal or family court case, are incarcerated, or are transitioning back to the community after a period of incarceration or out of home placement.
PRIMARY PERFORMANCE	1 - Youth who feel their peer mentor takes their preferences and interests into account are more likely to show improvement in their behaviors and attitudes than are youth who feel their mentor is less interested in them. 2 – Youth who feel better about being around their peer mentor are more likely to show improvement in their behaviors and attitudes than are youth who feel less positive. 3 - Youth who feel more satisfied with their peer mentor and the relationship are more likely to show improvement in their behaviors and attitudes than are youth with less favorable impressions
MEASURE/INDICATOR	1 - 75% of youth will report HIGH SATISFACTION (score 3.5 or above) on questions relating to youth-centeredness of their peer match. 2 – 75% of youth will report HIGH SATISFACTION (score 3.5 or above) on questions relating to youth emotional engagement. 3 – 56% of youth will report HIGH SATISFACTION (score 3.5 or above) on questions relating to the overall satisfaction with their peer match and the Center for Community Alternatives Program.

	Previous Year Actual	Current Year Projection	Next Year Projection
Program Year	1/1/25 -12/31/25	1/1/26 -12/31/26	1/1/26-12/31/27
Total # of Participants	12	12	12

OUTCOME ASSESSMENT METHODOLOGY Organization measurements

SOURCE MATERIAL: Application narrative

PURCHASE OF SERVICES INFORMATION FORM
Per Resolution 223 of 2007 as amended by Resolution 11 of 2008

Re: Authorize Contracts with Private Agencies for Rochester-Monroe County Youth Bureau Programs in 2026-27

Estimated Total Served 2026: 900
Proposed YST $ Amt. 2026-27: $150,000

PROGRAM: WNY POP WARNER LITTLE SCHOLARS

CONTRACTOR: WESTERN NEW YORK POP WARNER

PROGRAM DESCRIPTION: The mission Of WNY Pop Warner Little Scholars is to enable young people to benefit from participation in team sports and activities in a structured environment. Through this active participation, Pop Warner programs teach fundamental values, skills and knowledge that young people will use throughout their lives.

PRIMARY OBJECTIVE(S)

To encourage and increase youth participation in football, cheerleading, and dance to ensure a safer, positive playing environment for all participants. In addition, instill life-long values of teamwork, dedication, and a superior work ethic in the classroom and on the playing field.

1-Youth in the program have a higher likelihood of staying in school and graduating high school than non-participating youth
2-Decerease in high-risk behavior
3-Increase youth connections in the community

PRIMARY PERFORMANCE MEASURE/INDICATOR

1-80% of youth will remain in school and advance to the next grade level or graduate
2-75% of Youth will show a decrease in high-risk behavior
3-80% of youth will have increased youth connections with the community

	Previous Year Actual	Current Year Projection	Next Year Projection
Program Year	1/1/25 -12/31/25	1/1/26 -12/31/26	1/1/27 – 12/31/27
Total # of Participants	815	900	900

OUTCOME ASSESSMENT METHODOLOGY

View school records for academic progress, surveys, self-evaluation tools. View number of youths enrolled in the program (unduplicated). Youth demonstrating an increase in life skills.

SOURCE MATERIAL: Application narrative

PURCHASE OF SERVICES INFORMATION FORM
Per Resolution 223 of 2007 as amended by Resolution 11 of 2008

Re: **Authorize Contracts with Private Agencies for Rochester-Monroe County Youth Bureau Programs in 2026-27**

Estimated Total Served 2026: 165
Proposed YDP $ Amt. 2026-27: $22,000

PROGRAM: Roc E6 Lacrosse camps, clinics and tournaments

CONTRACTOR: Roc E6 Lacrosse

PROGRAM DESCRIPTION: Roc E6 will provide lacrosse programming for City and low-income youth across the Monroe County. The program will teach fundamentals of lacrosse to boys and girls ages 6-17 which offers exposure to community youth that typically don't have the opportunity to play lacrosse. Participants will learn positive character and youth development, teamwork and resiliency through the program and interactions

The program will provide a consistent structure that youth can develop values, morals, and commitment through play. Opportunities to participate in various sports programs teach fundamental values, skills, and knowledge that young people will use throughout their lives.

PRIMARY OBJECTIVE(S) Encourage and increase youth participation in lacrosse, to ensure a safer, positive playing environment for all participants. In addition, instill life-long values of teamwork, dedication, and a superior work ethic in the classroom and on the playing field.

1-Youth in the program have a higher likelihood of staying in school and graduating high school than non-participating youth
2-Decerease in high-risk behavior
3-Increase youth connections in the community

PRIMARY PERFORMANCE MEASURE/INDICATOR

1-160 youth registered to participate
2-85% of Youth will show an increase in physical fitness
3-85% of youth will complete the season

	Previous Year Actual	Current Year Projection	Next Year Projection
Program Year	1/1/25 -12/31/25	1/1/26 -12/31/26	1/1/27 – 12/31/27
Total # of Participants	175	165	160

OUTCOME ASSESSMENT METHODOLOGY Number of youth registered to participate; daily attendance

SOURCE MATERIAL: Application narrative

PURCHASE OF SERVICES INFORMATION FORM
Per Resolution 223 of 2007 as amended by Resolution 11 of 2008

Re: **Authorize Contracts with Private Agencies for Rochester-Monroe County Youth Bureau Programs in 2026-27**

Total Served 2026 274
Proposed YST $ Amt. 2026-27: $35,000

PROGRAM: River Flow Soccer camps, clinics and tournaments

CONTRACTOR: River Flow Soccer Club Inc.

PROGRAM DESCRIPTION: Provide soccer camps, and programming for City and Suburban youth ages 6-17 years old. Through participation and positive interactions with peers, coaches, volunteers and mentors' youth will break down socio-economic barriers. Through play and discussions participants will be provided character development and the opportunity to play in a safe nurturing environment.

The program will provide a consistent structure that youth can develop values, morals, and commitment through play. Opportunities to participate in various sports programs teach fundamental values, skills, and knowledge that young people will use throughout their lives. Coaches and referees (youth and adult) will receive expert training opportunities to improve their skills to better serve community youth and increase program capacity

PRIMARY OBJECTIVE(S) The priority of River Flow Soccer Club is to offer children a safe place to positively engage with coaches and volunteers along with family so that they understand the community cares and values them. In addition, instill life-long values of teamwork, dedication, and a superior work ethic in the classroom and on the playing field.

1-Youth in the program have a higher likelihood of staying in school and graduating high school than non-participating youth
2-Decerease in high-risk behavior
3-Increase youth connections in the community

PRIMARY PERFORMANCE MEASURE/INDICATOR

1-200 youth registered to participate
2-85% of Youth will show an increase in physical fitness
3-85% of youth will complete the season

	Previous Year Actual	Current Year Projection	Next Year Projection
Program Year	1/1/25 -12/31/25	1/1/26 -12/31/26	1/1/27 – 12/31/27
Total # of Participants	225	274	250

OUTCOME ASSESSMENT METHODOLOGY Number of youth registered to participate; daily attendance

SOURCE MATERIAL: Application narrative

PURCHASE OF SERVICES INFORMATION FORM
Per Resolution 223 of 2007 as amended by Resolution 11 of 2008

Re: **Authorize Contracts with Private Agencies for Rochester-Monroe County Youth Bureau Programs in 2026-27**

Estimated Total Served 2026: 400
Proposed YSEF $Amt. 2027: $40,000

PROGRAM: Primetime Sports and Basketball Life-skills Camps

CONTRACTOR: Primetime 585 Inc.

PROGRAM DESCRIPTION: Primetime 585 will host a and golf life skills camps for 150+ youth ages 6-17; Primetime will also conduct a coach's clinic on mental health, youth development and player social development for local coaches to improve social/emotional outcomes for children who participate on the coaches' teams.

The program will provide a structure that youth can develop values, morals, and commitment through play. Opportunities to participate in various sports programs teach fundamental values, skills, and knowledge that young people will use throughout their lives.

PRIMARY OBJECTIVE(S) Primetime585 programs will have knowledgeable, trained coaches that offer a safe environment for youth to learn and grow through the participation in the sport or basketball. The program will ensure that all equipment is safe and in good condition. In addition, instill life-long values of teamwork, dedication, and a superior work ethic in the classroom and on the playing field.

1-Youth in the program have a higher likelihood of staying in school and graduating high school than non-participating youth
2-Decerease in high-risk behavior
3-Increase youth connections in the community

PRIMARY PERFORMANCE MEASURE/INDICATOR

1-400 youth registered to participate
2-85% of Youth will show an increase in physical fitness
3-85% of youth will complete the season

	Previous Year Actual	Current Year Projection	Next Year Projection
Program Year	1/1/25 – 12/31/25	1/1/26 – 12/31/26	1/1/26 – 12/31/26
Total # of Participants	432	400	400

OUTCOME ASSESSMENT METHODOLOGY Number of youth registered to participate; daily attendance

SOURCE MATERIAL: Application narrative

PURCHASE OF SERVICES INFORMATION FORM
Per Resolution 223 of 2007 as amended by Resolution 11 of 2008

Re: Authorize Contracts with Private Agencies for Rochester-Monroe County Youth Bureau Programs in 2026-27

Estimated Total Served 2026: 150
Proposed YSEF $ Amt. 2026: $40,000

PROGRAM: Horsemanship Camps

CONTRACTOR: A Horses Friend, Inc.

PROGRAM DESCRIPTION: A Horse's Friend (AHF) will provide the opportunity for youth ages 7-17 that have social challenges or had contact with the justice system the opportunity to learn responsibility, youth development and empathy through caring for horses and learning how to ride. Expose youth to a unique sport that they would not have access to due to many accessibility challenges that exist that include cost, transportation and awareness.

PRIMARY OBJECTIVE(S)

Provide a unique youth program that promotes positive values, increasing social competencies and teaching children respect through the use of horses and horseback riding. The program will ensure that all equipment is safe and in good condition. In addition, instill life-long values of teamwork, dedication, and a superior work ethic in the classroom.

1-Youth in the program have a higher likelihood of staying in school and graduating high school than non-participating youth
2-Decerease in high-risk behavior
3-Increase youth connections in the community

PRIMARY PERFORMANCE MEASURE/INDICATOR

1-150 youth registered to participate
2-85% of Youth will show an increase in physical fitness
3-85% of youth will complete the season

	Previous Year	Current Year Projection	Next Year Projection
Program Year	1/1/25 – 12/31/25	1/1/26 – 12/31/26	1/1/27 – 12/31/27
Total # of Participants	154	150	150

OUTCOME ASSESSMENT METHODOLOGY Number of youth registered to participate; daily attendance

SOURCE MATERIAL: Application narrative

PURCHASE OF SERVICES INFORMATION FORM
Per Resolution 223 of 2007 as amended by Resolution 11 of 2008

Re: **Authorize Contracts with Private Agencies for Rochester-Monroe County Youth Bureau Programs in 2026-27**

Estimated Served 2026-27: 140
Proposed YTS $ Amt. 2027: $25,000

PROGRAM: Flower City Panthers Youth Football

CONTRACTOR: Flower City Panthers Youth Athletics

PROGRAM DESCRIPTION:

The Flower City Panther's Youth Football offers programming and life skills learning for youth who are exposed to trauma, poverty and other factors that impact their growth. This is done through the sport of football. This program will have knowledgeable, trained coaches that offer a safe environment for youth to learn and grow through the participation in the sport. The program will ensure that all equipment is safe and in good condition.

The program will provide a consistent structure that youth can develop values, morals, and commitment through play. Opportunities to participate in various sports programs teach fundamental values, skills, and knowledge that young people will use throughout their lives.

PRIMARY OBJECTIVE(S)

Encourage and increase youth participation in sports. Ensure a safe, positive playing environment for all participants. In addition, instill life-long values of teamwork, dedication, and a superior work ethic in the classroom and on the playing field.

1-Youth in the program have a higher likelihood of staying in school and graduating high school than non-participating youth
2-Decerease in high-risk behavior
3-Increase youth connections in the community

PRIMARY PERFORMANCE MEASURE/INDICATOR

1-145 youth registered to participate
2-85% of Youth will show an increase in physical fitness
3-85% of youth will complete the season

	Previous Year Estimates	Current Year Projection	Next Year Projection
Program Year	1/1/25-12/31/25	1/1/26 -12/31/26	1/1/27 – 12/31/27
Total # of Participants	170	174	150

OUTCOME ASSESSMENT METHODOLOGY

Number of youth registered to participate; daily attendance

SOURCE MATERIAL:

Application narrative

PURCHASE OF SERVICES INFORMATION FORM
Per Resolution 223 of 2007 as amended by Resolution 11 of 2008

Re: **Authorize Contracts with Private Agencies for Rochester-Monroe County Youth Bureau Programs in 2026-27**

Total Served 2025: 141
Proposed YTS $ Amt. 2025-26: $40,000

PROGRAM: Rochester Hispanic Youth Baseball League

CONTRACTOR: Rochester Hispanic Youth Baseball League

PROGRAM DESCRIPTION: Rochester Hispanic Youth Baseball League (RHYBL) offers a community youth baseball program that serves youth who live in underserved neighborhoods within the city of Rochester

The program will provide a consistent structure that youth can develop values, morals, and commitment through play. Opportunities to participate in various sports programs teach fundamental values, skills, and knowledge that young people will use throughout their lives.

PRIMARY OBJECTIVE(S) Encourage and increase youth participation in baseball, to ensure a safe, positive playing environment for all participants. In addition, instill life-long values of teamwork, dedication, and a superior work ethic in the classroom and on the playing field.

1-Youth in the program have a higher likelihood of staying in school and graduating high school than non-participating youth
2-Decerease in high-risk behavior
3-Increase youth connections in the community

PRIMARY PERFORMANCE MEASURE/INDICATOR

1-218 youth registered to participate
2-85% of Youth will show an increase in physical fitness
3-85% of youth will complete the season

	Previous Year Actual	Current Year Projection	Next Year Projection
Program Year	1/1/25 -12/31/25	1/1/26 - 12/31/26	1/1/27 – 12/31/27
Total # of Participants	141	150	175

OUTCOME ASSESSMENT METHODOLOGY Number of youth registered to participate; daily attendance

SOURCE MATERIAL: Application narrative

PURCHASE OF SERVICES INFORMATION FORM
Per Resolution 223 of 2007 as amended by Resolution 11 of 2008

Re: Authorize Contracts with Private Agencies for Rochester-Monroe County Youth Bureau Programs in 2026-27

Estimated Served 2026 25

Proposed YSEF Amt. 2024-25: $30,000

PROGRAM: Confidence through fitness with Sean

CONTRACTOR: Badass Bodies by Sean

PROGRAM DESCRIPTION: This program will offer challenged and displaced youth under the direct care and supervision of the County of Monroe, a variety of fitness and mental health activities & programs. The program will be held at a private facility that offers one on one fitness instruction. Participants will have access to typical gym and fitness equipment such as, weights and weight machines, cardio machines, a 15' trampoline, aerobic equipment, battle rope and TRX stations, a half basketball court and climbing rope. Session will start with a restorative circle to support social and emotional health of the participants.

PRIMARY OBJECTIVE(S)

To provide an organized recreational/fitness activity to youth facing challenges that will promote positive use of their time, physical fitness and mental health

1-Youth in the program have a higher likelihood of staying in school and graduating high school than non-participating youth
2-Decerease in high-risk behavior
3-Increase youth connections in the community

PRIMARY PERFORMANCE MEASURE/INDICATOR

1-Youth participants are active for 30 minutes
2-Youth in care attend one time per week
3-80% Youth participate in restorative circle self-check-in

	Previous Year Actual	Current Projection	Next Year Projection
Program Year	1/1/25 -12/31/25	1/1/26 -12/31/26	1/1/27 – 12/31/27
Total # of Participants	20	25	30

OUTCOME ASSESSMENT METHODOLOGY Number of youth registered to participate; daily attendance

SOURCE MATERIAL: OCFS program profile form

PURCHASE OF SERVICES INFORMATION FORM
Per Resolution 223 of 2007 as amended by Resolution 11 of 2008

Re: **Authorize Contracts with Private Agencies for Rochester-Monroe County Youth Bureau Programs in 2027**

Estimated Served 2026	40
Proposed YSEF $ Amt. 2027:	$30,000.00
PROGRAM:	Hoop 'n Holla Basketball Camp and Program
CONTRACTOR:	Hoop 'n Holla
PROGRAM DESCRIPTION:	Hoop 'n Holla basketball camp is designed to build on the basketball hopes and dreams of our Monroe County youth, ages 6-17, utilizing an interactive village where all campers learn the fundamental skills, mechanics, and thinking strategies associated with successful execution of basketball. Our full-day program combines social, emotional and nutritional elements into an educational framework that illustrates how ELA, Mathematics, Financial Literacy, Emotional Well Being and Nutrition are inextricably connected to academic and basketball athletic opportunities. Additionally, each class is aligned with NYS Educational Common Core Standards, highlighting one of our fundamental values, decreasing summer leaning loss.
PRIMARY OBJECTIVE(S)	Teaching the basic skills of basketball to youth while incorporating relevant life skills that they can use throughout their lives 1-Youth in the program have a higher likelihood of staying in school and graduating high school than non-participating youth 2-Decerease in high-risk behavior 3-Increase youth connections in the community
PRIMARY PERFORMANCE MEASURE/INDICATOR	1-40 youth registered to participate 2-85% of Youth will show an increase in physical fitness 3-85% of youth will complete the season

	Previous Year Projection	Current Year Projection	Next Year Projection
Program Year	1/1/25-12/31/25	1/1/26-12/31/26	1/1/27-12/31/27
Total # of Participants	40	40	40

OUTCOME ASSESSMENT METHODOLOGY	Number of youth registered to participate; daily attendance
SOURCE MATERIAL:	OCFS Program profile form

PURCHASE OF SERVICES INFORMATION FORM
Per Resolution 223 of 2007 as amended by Resolution 11 of 2008

Re: Authorize Contracts with Private Agencies for Rochester-Monroe County Youth Bureau Programs In 2026-27

Total Served 2026 25
Proposed YSEF $ Amt. 2027: $18,000.00

PROGRAM: Summer Agility Ninja Rec League

CONTRACTOR: The Warrior Factory Rochester

PROGRAM DESCRIPTION: Participants will compete in a Summer Ninja Rec League that includes an individual obstacle course race and a team relay during weekly matches. The season will begin with open play attendance and an opportunity for youth to build relationships with staff and gain familiarity on the equipment. The rec league season will contain multiple practices and then shift towards competition with a playoff bracket and championship. Participants will learn about positive mindset as well as develop balance, agility, upper body and grip strength. Teamwork as well as building positive relationships with others while trying new challenges will be repeated themes through the program. The Summer Ninja Rec league will run from June 11th to August 29th.

PRIMARY OBJECTIVE(S) Provide a unique opportunity to underserved youth that supports physical fitness and collaboration through play

1-Youth in the program have a higher likelihood of staying in school and graduating high school than non-participating youth
2-Decerease in high-risk behavior
3-Increase youth connections in the community

PRIMARY PERFORMANCE MEASURE/INDICATOR

1-25 youth registered to participate
2-85% of Youth will show an increase in physical fitness
3-85% of youth will complete the season

	Previous Year Actual	Current Year Projection	Next Year Projection
Program Year	1/1/25 -12/31/25	1/1/26 -12/31/26	1/1/27 – 12/31/27
Total # of Participants	25	25	25

OUTCOME ASSESSMENT METHODOLOGY Number of youth registered to participate; daily attendance

SOURCE MATERIAL: Application narrative

PURCHASE OF SERVICES INFORMATION FORM
Per Resolution 223 of 2007 as amended by Resolution 11 of 2008

Re: **Authorize Contracts with Private Agencies for Rochester-Monroe County Youth Bureau Programs in 2026-27**

Estimated Served 2025: 148
Proposed YDP $ Amt. 2026: $25,000

PROGRAM: Bears Youth Football and Cheer

CONTRACTOR: Bears Youth Football and Cheer

PROGRAM DESCRIPTION: The Bears Youth Football & Cheer organization is an organization that strives to give all athletes the opportunity to play regardless of race, ethnicity, residency and ability. We strive to provide mentorship through our coaches and board members and provide a safe and structured environment for all. We model positive relationships and interactions between coaches, mentors, athletes and parents. Our program teaches values, life skills and discipline through both football and cheer. We also put a high value on a culture of family, when here everyone is family and we encourage involvement from parents, aunts, uncles, grandparents and any other positive relationships.

PRIMARY OBJECTIVE(S) To encourage and increase youth participation in football, cheerleading, and dance to ensure a safer, positive playing environment for all participants. In addition, instill life-long values of teamwork, dedication, and a superior work ethic in the classroom and on the playing field.

1-Youth in the program have a higher likelihood of staying in school and graduating high school than non-participating youth
2-Decerease in high-risk behavior
3-Increase youth connections in the community

PRIMARY PERFORMANCE MEASURE/INDICATOR

1-80% of youth will remain in school and advance to the next grade level or graduate
2-75% of Youth will show a decrease in high-risk behavior
3-80% of youth will have increased youth connections with the community

	Previous Year Actual	Current Year Projection	Next Year Projection
Program Year	1/1/25 - 12/31/25	1/1/26 - 12/31/26	1/1/27 – 12/31/27
Total # of Participants	148	150	150

OUTCOME ASSESSMENT METHODOLOGY View school records for academic progress, surveys, self-evaluation tools. View number of youths enrolled in the program (unduplicated). Youth demonstrating an increase in life skills.

SOURCE MATERIAL: Application narrative

PURCHASE OF SERVICES INFORMATION FORM
Per Resolution 223 of 2007 as amended by Resolution 11 of 2008

Re: Authorize Contracts with Private Agencies for Rochester-Monroe County Youth Bureau Programs in 2026-27

Estimated Total Served 2026 50
Proposed YST $ Amt. 2026-27: $40,000

PROGRAM: H.O.P.E. camps, clinics and tournaments, workshops and learning

CONTRACTOR: HOPE (Having Only Positive Expectations)

PROGRAM DESCRIPTION:

HOPE (Having Only Positive Expectations) serves youth ages 10–17 and their families throughout Monroe County, with a primary focus on youth from the City of Rochester and surrounding underserved communities. Many participants come from low- to moderate-income households and face barriers that include limited access to academic support, positive adult mentors, organized extracurricular activities, transportation, workforce opportunities, and exposure to higher education.

Basketball serves as the primary vehicle to engage youth, but it is not the end goal. HOPE uses athletics to build relationships and teach discipline, accountability, teamwork, perseverance, communication, and leadership. Once engaged, participants receive mentoring, academic support, life-skills training, and exposure to college and career opportunities.

PRIMARY OBJECTIVE(S)

HOPE's mission is to prepare young people for success academically, athletically, professionally, and personally. HOPE will offer children a safe place to positively engage with coaches and volunteers along with family so that they understand the community cares and values them. In addition, instill life-long values of teamwork, dedication, and a superior work ethic in the classroom and on the playing field.

1-Youth in the program have a higher likelihood of staying in school and graduating high school than non-participating youth
2-Decerease in high-risk behavior
3-Increase youth connections in the community

PRIMARY PERFORMANCE MEASURE/INDICATOR

1-50 youth registered to participate
2-85% of Youth will show an increase in physical fitness
3-85% of youth will complete the season

	Previous Year Actual	Current Year Projection	Next Year Projection
Program Year	1/1/25 -12/31/25	1/1/26 -12/31/26	1/1/27 – 12/31/27
Total # of Participants	NA	50	50

OUTCOME ASSESSMENT METHODOLOGY Number of youth registered to participate; daily attendance

SOURCE MATERIAL: Application narrative

PURCHASE OF SERVICES INFORMATION FORM
Per Resolution 223 of 2007 as amended by Resolution 11 of 2008

Re: **Authorize Contracts with Private Agencies for Rochester-Monroe County Youth Bureau Programs in 2026-27**

Estimated Total Served 2026 900
Proposed YSEF $ Amt. 2026-27: $50,000

PROGRAM: Rochester City Soccer League camps, clinics league and tournaments

CONTRACTOR: Rochester City Soccer League

PROGRAM DESCRIPTION: Rochester City Soccer League provides year-round soccer programming serving approximately 2,500 youth ages 4-17 in the City of Rochester and Monroe County. Programming takes place at the Rochester Sports Community Complex and community partner locations. The program promotes physical health, academic achievement, leadership development, and workforce pathways through structured soccer training, mentorship, and educational partnerships. Participants include youth from diverse and historically underserved communities with limited access to organized sports. Programming includes recreational, select, and competitive soccer, leadership development, and mentorship opportunities that support youth success both on and off the field.

PRIMARY OBJECTIVE(S) The priority of Rochester City Soccer League is to offer children a safe place to positively engage with coaches and volunteers along with family so that they understand the community cares and values them. In addition, instill life-long values of teamwork, dedication, and a superior work ethic in the classroom and on the playing field.

1-Youth in the program have a higher likelihood of staying in school and graduating high school than non-participating youth
2-Decerease in high-risk behavior
3-Increase youth connections in the community

PRIMARY PERFORMANCE MEASURE/INDICATOR

1-900 youth registered to participate
2-85% of Youth will show an increase in physical fitness
3-85% of youth will complete the season

	Previous Year Actual	Current Year Projection	Next Year Projection
Program Year	1/1/25 -12/31/25	1/1/26 -12/31/26	1/1/27 – 12/31/27
Total # of Participants	NA	900	900

OUTCOME ASSESSMENT METHODOLOGY Number of youth registered to participate; daily attendance

SOURCE MATERIAL: Application narrative

PURCHASE OF SERVICES INFORMATION FORM
Per Resolution 223 of 2007 as amended by Resolution 11 of 2008

Re: **Authorize Contracts with Private Agencies for Rochester-Monroe County Youth Bureau Programs in 2026-27**

Estimated Total Served 2026: 60
Proposed YDP $ Amt. 2027: $22,000

PROGRAM: Boys and Girls Club Golf Program

CONTRACTOR: Boys and Girls Club of Greater Rochester

PROGRAM DESCRIPTION: There are several sports programs under the Club's Saturday Fitness & Recreation programming. Youth will participate in simulator golf program in collaboration with the First Tee, biddy-basketball and fitness training. BGCR offers this program to youth who would not typically have the opportunity to experience golf due the many barriers that exist with in the sport.

The program will provide a consistent structure that youth can develop values, morals, and commitment through play. Opportunities to participate in various sports programs teach fundamental values, skills, and knowledge that young people will use throughout their lives.

PRIMARY OBJECTIVE(S) Encourage and increase youth participation in golf, to ensure a safer, positive playing environment for all participants. In addition, instill life-long values of teamwork, dedication, and a superior work ethic in the classroom and on the playing field.

1-Youth in the program have a higher likelihood of staying in school and graduating high school than non-participating youth
2-Decerease in high-risk behavior
3-Increase youth connections in the community

PRIMARY PERFORMANCE MEASURE/INDICATOR

1-30 youth registered to participate
2-85% of Youth will show an increase in physical fitness
3-85% of youth will complete the season

	Previous Year Actual	Current Year Projection	Next Year Projection
Program Year	1/1/25-12/31/25	1/1/26 -12/31/26	1/1/27 – 12/31/27
Total # of Participants	30	60	60

OUTCOME ASSESSMENT METHODOLOGY Number of youth registered to participate; daily attendance

SOURCE MATERIAL: Application narrative

PURCHASE OF SERVICES INFORMATION FORM
Per Resolution 223 of 2007 as amended by Resolution 11 of 2008

Re: **Authorize Contracts with Private Agencies for Rochester-Monroe County Youth Bureau Programs In 2027**

Estimated Served 2026 50
Proposed YSEF $ Amt. 2027: $25,000.00

PROGRAM: Rochester Sports Club Cricket Camp, Clinics and Lessons

CONTRACTOR: Rochester Sports Club

PROGRAM DESCRIPTION:

PRIMARY OBJECTIVE(S)

RCAF serves 25-50 youth ages 8–17 from Monroe County, with intentional focus on communities historically underserved by mainstream sports. The program specifically engages South Asian, Caribbean, African diaspora, and other underrepresented ethnic groups, who have strong cultural ties to cricket.

Why this population needs the services:

- These youth often lack access to culturally relevant athletic programs.
- Fall to Early Summer months pose risks for academic disengagement and reduced physical activity.
- Many families benefit from structured, safe, low-cost enrichment opportunities.

PRIMARY PERFORMANCE MEASURE/INDICATOR

1-50 youth registered to participate
2-85% of Youth will show an increase in physical fitness
3-85% of youth will complete the season

	Previous Year Projection	Current Year Projection	Next Year Projection
Program Year		1/1/26-12/31/26	1/1/27-12/31/27
Total # of Participants	NA	50	50

OUTCOME ASSESSMENT METHODOLOGY

Number of youth registered to participate; daily attendance

SOURCE MATERIAL: OCFS Program profile form

PURCHASE OF SERVICES INFORMATION FORM
Per Resolution 223 of 2007 as amended by Resolution 11 of 2008

Re: **Authorize Contracts with Private Agencies for Rochester-Monroe County Youth Bureau Programs in 2026-27**

Estimated Served 2026: 25
Proposed YDP $ Amt. 2027: $15,000

PROGRAM: Bridging the Gap
CONTRACTOR: Brickx Youth Football

PROGRAM DESCRIPTION:

The Brickx serves inner-city youth, both boys and girls, who face various challenges, including financial barriers, lack of consistent family support, dangerous neighborhoods, mental health issues and some educational barriers. Many of the youth we work with come from underserved communities where opportunities are limited. Through our program, we proved not only access to athletic activities, but also wrap-around support services such as tutoring, mentorship, and life skills development. Our goal is to create a safe, inclusive, and empowering environment where these youth can develop physically, emotionally, and academically, regardless of the obstacles they face in their personal lives.

PRIMARY OBJECTIVE(S)

To encourage and increase youth participation in football to ensure a safer, positive playing environment for all participants. In addition, instill life-long values of teamwork, dedication, and a superior work ethic in the classroom and on the playing field.

1-Youth in the program have a higher likelihood of staying in school and graduating high school than non-participating youth
2-Decerease in high-risk behavior
3-Increase youth connections in the community

PRIMARY PERFORMANCE MEASURE/INDICATOR

1-80% of youth will remain in school and advance to the next grade level or graduate
2-75% of Youth will show a decrease in high-risk behavior
3-80% of youth will have increased youth connections with the community

	Previous Year Actual	Current Year Projection	Next Year Projection
Program Year	1/1/25 - 12/31/25	1/1/26 - 12/31/26	1/1/27 – 12/31/27
Total # of Participants	NA	25	25

OUTCOME ASSESSMENT METHODOLOGY

View school records for academic progress, surveys, self-evaluation tools. View number of youths enrolled in the program (unduplicated). Youth demonstrating an increase in life skills.

SOURCE MATERIAL: Application narrative

PURCHASE OF SERVICES INFORMATION FORM
Per Resolution 223 of 2007 as amended by Resolution 11 of 2008

Re: **Authorize Contracts with Private Agencies for Rochester-Monroe County Youth Bureau Programs in 2026-27**

Estimated Total Served 2026: 150
Proposed YST $ Amt. 2024-25: $19,155

PROGRAM: Rochester Community After School Sports and Life Skills Programs

CONTRACTOR: City of Rochester

PROGRAM DESCRIPTION: The after-school sports program that include a basketball league and boxing programs which will provide youth the opportunity to learn the following: sports skills, how to compete as a member of a team, information about college, social and emotional life skills. Students will gain these experience through participation in these sports.

PRIMARY OBJECTIVE(S)

To provide a safe, positive environment that participants can participate in sports programs which also fosters personal growth and development

1-Youth in the program have a higher likelihood of staying in school and graduating high school than non-participating youth
2-Decerease in high-risk behavior
3-Increase youth connections in the community

PRIMARY PERFORMANCE MEASURE/INDICATOR

1-150 youth registered to participate
2-85% of Youth will show an increase in physical fitness
3-85% of youth will complete the season

	Previous Year Actual	Current Year Projection	Next Year Projection
Program Year	1/1/25 -12/31/25	1/1/26 – 12/31/26	1/1/27 – 12/31/27
Total # of Participants	NA	150	150

OUTCOME ASSESSMENT METHODOLOGY Number of youth registered to participate; daily attendance

SOURCE MATERIAL: Application narrative

Office of **the County Executive**

Monroe County, New York

Adam J. Bello
County Executive

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HUMAN SERVICES
WAYS & MEANS

November 6, 2026

To The Honorable
Monroe County Legislature
407 County Office Building
Rochester, New York 14614

Subject: Authorize Intermunicipal Agreements with Municipalities for Rochester-Monroe County Youth Bureau Programs in 2027

Honorable Legislators:

I recommend that Your Honorable Body authorize intermunicipal agreements with municipalities for Rochester-Monroe County Youth Bureau (the "Youth Bureau") programs related to the currently approved Child and Family Services Plan, in a total amount not to exceed $184,056, for the period of October 1, 2026 through September 30, 2027. The list of municipalities, along with a description of the youth services each will provide, and the breakdown of funding to each, is in Attachment A.

The Rochester-Monroe County Youth Bureau enters into fifteen (15) intermunicipal agreements each year. New York State Office of Children and Family Services makes available recreation and youth services funds for all towns and villages via a pass through to local counties. Allocation ceilings are determined through a formula, based on the youth population of each town or village, provided by the state. The recreation and youth services programs to be provided are available to all youth that reside in the respective towns and villages. Recreational programs include a variety of athletic, social, artistic, and cultural events. Youth services programs include youth and family counseling, after-school programs, leadership development, and employment readiness workshops. This year's funding represents no change from last year's funding.

Programs will be evaluated consistently and continually through three methods utilized by the Youth Bureau, documented in its Monitoring and Evaluation Systems Procedures Manual. These methods include: 1) self-report, requiring agency submission of three (3) different self-report instruments; 2) yearly outcome evaluation assessment of contract outcomes; and 3) expenditure review. These contracts will allow for the provision of a comprehensive range of youth services and programs by the municipalities specified in Attachment A.

The specific legislative actions required are:

1. Authorize the County Executive, or his designee, to execute intermunicipal agreements, and any amendments thereto, with each municipality listed in Attachment A, for Rochester-Monroe County Youth Bureau Programs related to the currently approved Child and Family Services Plan, in a total amount not to exceed $184,056, for the period of October 1, 2026 through September 30, 2027.

2. Authorize the County Executive, or his designee, to execute any applications, contracts, agreements and any amendments thereto, with New York State and/or the municipalities listed in Attachment A to increase or decrease the agreement amount and to extend the length of the agreement(s) in order to maximize state reimbursements for these purposes.

This action is a Type II Action pursuant to 6 NYCRR § 617.5(c)(26) ("routine or continuing agency administration and management, not including new programs or major reordering of priorities that may affect the environment") and is not subject to further review under the State Environmental Quality Review Act.

Funding for these agreements is included in the 2026 operating budget and in the proposed 2027 operating budget of the Department of Human Services, general fund 1001, cost center 560301, Youth Contracts.

Funding for these agreements is 100% reimbursable by the Office of Children and Family Services. No additional net County support is required in the current Monroe County budget.

I recommend that this matter be referred to the appropriate committee(s) for favorable action by Your Honorable Body.

Sincerely,

Adam J. Bello
Monroe County Executive

ATTACHMENT A

MUNICIPALITIES CONTRACTS 2027

1. **Town of Brighton** **$7,085**
   This program works with teens in the community to develop and implement the Brighton asset building initiative. A Youth Board will work throughout the community in promoting awareness, support and opportunities for asset building in Brighton. The Youth Board, under the direction of the recreation supervisor, will work closely with Brighton Asset Network in developing and achieving this initiative.

2. **Town of Chili** **$6,118**
   This program is designed to promote the constructive use of leisure time to address youth problems in our community. Opportunities for youth, ages 10-19, to participate in leisure and social activities are provided throughout the year.

3. **Village of East Rochester** **$1,409**
   The East Rochester Youth Activity Center provides a venue at which the community youth in grades 6-12, can gather in a safe supervised environment, to socialize with their peers, enjoy games, recreational activities, use of computer services and access to tutoring and community special events, activities, homework assistance, tutoring, and education presentations. Youth are provided opportunities to become involved in community service projects and leadership development through the East Rochester Youth Activity Center. .

4. **Town of Greece** **$38,345**
   The youth volunteer program utilizes roughly 75-125 students regularly throughout the calendar year for special events, programs and activities. These opportunities give the youth. Experience in 'real working' conditions while serving the public through recreational opportunities. Youth have the same expectations as employees; to show up on time, sign in, dress appropriately, and provide excellent service while performing necessary actions to deliver the leisure service or program that day.

5. **Town of Hamlin** **$2,101**
   To serve youth from ages 18 months to 16 years on how to get along and work with others of all ages through play group, playground and youth groups. These programs offer social, education, leisure and community service opportunities.

6. **Town of Henrietta** **$23,413**
   The Henrietta Youth Bureau is the leading agency for Henrietta Youth services and Recreation for all youth and families. It also provides targeted services to youth ages 0-21 who attend the Rush Henrietta schools which may include parts of West Brighton, Rush and Pittsford. Services include individual, group and crisis counseling. Programs for all youth, including "high risk" populations are targeted.

7. **Town of Irondequoit** **$9,689**
The drop in playground program is designed to offer leisure time activities for youth ages 5-15 during non-school hours, summer vacation. The program will operate for six weeks, July and August, at three schools in the Town of Irondequoit. Hours of operation are Monday through Friday 9am-3:00 pm. Youth may participate daily, Activities include arts/crafts, sports, board games, swimming, music and field trips. The playground program is free to town youth. Our other community programs such as day camps and sports camps are fee based. As for youth voice, a weekly calendar of activities is developed with youth input.

8. **Town of Hilton-Parma** **$3,458**
The program will provide year-round recreational activities, both active and passive, for school age youth including: individual sports, team sports, instructional programs and open drop-in type programs.

9. **Town of Penfield** **$7,550**
The Penfield Recreation Department will provide a creative and constructive program of leisure time activities and asset building opportunities to aid in the positive mental and physical development of the town's youth population.

10. **Town of Perinton** **$8,909**
A comprehensive youth services program offered to youth 20 and under that are residents of Perinton. Programs require a registration form or sign-in, depending on the activity, and include youth-adult partnership opportunities; adventure based programming, social competency development groups and recreation opportunities.

11. **Town of Pittsford** **$7,309**
Pittsford Youth Services, Inc. is a private, not-for-profit agency, providing crisis intervention, counseling, prevention programming, information and referral services to Pittsford youth and families. Examples of concerns youth bring to the agency include drug and alcohol abuse, school problems, depression/suicide, and family and peer relationships. This program also provides crisis intervention, counseling, prevention programming, information and referral services to Pittsford youth and families. Such services include drug and alcohol abuse, school problems, depression/suicide, and family and peer relationships. This is a joint program with the Village of Pittsford.

12. **Town of Riga** **$784**
Provide a year round recreation program to youth, ages up to 20, in the Riga area. Athletics, aquatics, art and special event programs will be offered. Participants will meet new people, experience new activities and enjoy constructive use of leisure time.

13. **Town of Sweden** **$5,591**
This is a joint program with the Town of Sweden, Town of Clarkson and Village of Brockport. The program provides a variety of recreational events for youth and their families to give youth a sense of community and to build and enhance developmental assets.

14. **Town of Webster** **$7,994**

To provide after-school activities that promotes health lifestyles. These programs include development of recreational, problem-solving and social skills. Leadership development is also offered through a youth volunteer program.

15. **City of Rochester** **$54,301**

The Youth Bureau grant funding is currently used to support staff costs for several Recreation programs including, but not limited to: Recreation athletic leagues: Funding is used to fund "Refs on the Move" staff. These staff act as referees and assist with transportation of youth sports team for Recreation-managed softball, flag football, and basketball leagues. Referees are trained in sportsmanship best practices as well as other safety and youth development practices (ex. First Aid and CPR). These leagues primarily serve both male and female youth ages 16 and under, includes participants from the majority of the R-Centers, and are often a youth's first or early experience with athletics prior to participation on a more competitive school teams.

Office of **the County Executive**

Monroe County, New York

Adam J. Bello
County Executive

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WAYS & MEANS

November 6, 2026

To The Honorable
Monroe County Legislature
407 County Office Building
Rochester, New York 14614

Subject: Authorize Contracts to Provide Temporary Ventilator and Pediatric Unit Nursing and Respiratory Staff at Monroe Community Hospital

Honorable Legislators:

I recommend that Your Honorable Body authorize contracts with Adaptive Workforce Solutions, The Caswood Group, Inc., Flagstar Staffing, Inc., and any other qualified nursing or respiratory staffing agency in the total aggregate amount not to exceed $1,000,000 collectively, to provide nursing and respiratory supplemental staff on a temporary basis to the Ventilator and Pediatric Unit at Monroe Community Hospital for the period of January 1, 2027 through December 31, 2027, with the option to renew for three (3) additional one-year terms in a total aggregate amount not to exceed $1,000,000 collectively per year with a three (3) percent inflation consideration added to each year.

Monroe Community Hospital must maintain adequate staffing for specialized unit patient care. These contracts will provide supplemental staffing for certified nursing assistants, licensed practical nurses, registered nurses, and respiratory therapists on the Ventilator and Pediatric Unit at the hospital. The necessity of having a number of temporary agencies to provide licensed personnel is crucial to ensure proper staffing is met at all times.

A Request for Proposals was issued for these services with Adaptive Workforce Solutions, The Caswood Group, Inc., and Flagstar Staffing, Inc. selected as the most qualified to perform these services.

The specific legislative action required is to authorize the County Executive, or his designee to execute contracts, and any amendments thereto, with Adaptive Workforce Solutions, 111 East Rivulon Boulevard, Suite 107, Gilbert, Arizona 85297; The Caswood Group, Inc., 811 Ayrault Road, Suite 2, Fairport, New York 14450; Flagstar Staffing, Inc., 117 Ditmas Avenue, Brooklyn New York, 11218, and any other qualified nursing or respiratory staffing agency to provide nursing and respiratory supplemental staff on a temporary basis to the Ventilator and Pediatric Unit at Monroe Community Hospital in a total aggregate amount not to exceed $1,000,000 collectively for the period of January 1, 2027 through December 31, 2027, with the option to renew for three (3) additional one-year terms in a total aggregate amount not to exceed $1,000,000 collectively per year with a three (3) percent inflation consideration added to each year.

Funding for these contracts is included in the proposed 2027 operating budget of Monroe Community Hospital, hospital fund 3012, cost center 620325, FR1E Ventilator and cost center 620319, Respiratory Therapy and will be requested in future years' budgets. No additional net County support is required in the current Monroe County budget.

This action is a Type II Action pursuant to 6 NYCRR § 617.5(c)(26) ("routine or continuing agency administration and management, not including new programs or major reordering of priorities that may affect the environment") and is not subject to further review under the State Environmental Quality Review Act.

The records in the Office of the Monroe County Treasury have indicated that neither Adaptive Workforce Solutions, The Caswood Group, Inc., Flagstar Staffing, Inc., nor any of their principal officers, owe any delinquent Monroe County Property taxes. The principal officers of the firms are:

Adaptive Workforce Solutions, CEO: Julie O'Keefe
Adaptive Workforce Solutions, VP Strategic Partnerships: Beth Delricco
The Caswood Group, Inc., Owner: Isabel Casamayor
The Caswood Group, Inc., Director of Operations: Mercedes Casamayor
Flagstar Staffing, Inc., Owner and CEO: Menashe Eisen
Flagstar Staffing, Inc., CFO: Ben Kessler

I recommend that this matter be referred to the appropriate committee(s) for favorable action by Your Honorable Body.

Sincerely,

Adam J. Bello
Monroe County Executive

Office of **the County Executive**
Monroe County, New York

Adam J. Bello
County Executive

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WAYS & MEANS

November 6, 2026

To The Honorable
Monroe County Legislature
407 County Office Building
Rochester, New York 14614

Subject: Acceptance of a Grant from the New York State Governor's Traffic Safety Committee for the Comprehensive Toxicology Testing in Driving Under the Influence and Driving Under the Influence of Drugs Program (Office of the Medical Examiner)

Honorable Legislators:

I recommend that Your Honorable Body accept a grant from the New York State Governor's Traffic Safety Committee in the amount of $56,900 for the Comprehensive Toxicology Testing in Driving Under the Influence and Driving Under the Influence of Drugs Program for the period of October 1, 2026 through September 30, 2027.

The purpose of this grant is to improve highway safety by expanding the forensic toxicology services provided by the Office of the Medical Examiner's Forensic Toxicology Laboratory in alcohol and drugged driving impairment cases. The Toxicology Laboratory provides alcohol and comprehensive drug testing as well as expert testimony in driving impairment cases. This grant facilitates this work by providing resources necessary for the laboratory to maintain its services, to perform method development and validation as needed to expand the scope of drugged driving testing to meet current needs based on drug trends, and to analyze regional trends in drugged driving. In addition, the grant provides training funds to enhance the expertise of analysts when testifying regarding the effects of drugs on driving performance. This will be the fourteenth year the County has received this grant. This year's funding represents an increase of $5,210 from last year.

The specific legislative actions required are:

1. Authorize the County Executive, or his designee, to accept a $56,900 grant from, and to execute a contract and any amendments thereto, with the New York State Governor's Traffic Safety Committee for the Comprehensive Toxicology Testing in Driving Under the Influence and Driving Under the Influence of Drugs Program for the period of October 1, 2026 through September 30, 2027.

2. Amend the 2026 operating budget of the Department of Health, by appropriating the sum of $6,900 into general fund 9001, cost center 580403, Forensic Lab/DUI.

3. Authorize the County Executive to appropriate any subsequent years of the grant award in accordance with the grant terms, to reappropriate any unencumbered balances during the grant period according to the grantor requirements, to make any necessary funding modifications within the grant guidelines to meet contractual commitments, and to enter into any amendments to extend the time period of the grant.

4. Should funding of this program be modified or terminated for any reason, the County Executive is hereby authorized to terminate or modify the program and, where applicable, to terminate or abolish some or all positions funded under such program. Any termination or abolishment of positions shall be in accordance with New York State Civil Service Law and, when applicable, the terms of any labor agreement affecting such positions.

This action is a Type II Action pursuant to 6 NYCRR § 617.5(c)(26) ("routine or continuing agency administration and management, not including new programs or major reordering of priorities that may affect the environment") and is not subject to further review under the State Environmental Quality Review Act.

Partial funding for this grant is included in the 2026 operating budget in the Department of Public Health, general fund 9001, cost center 580403, Forensic Lab/DUI. The appropriated amount will adjust the current funding to that established by the grant.

This grant is 100% funded by the New York State Governor's Traffic Safety Committee. No net County support is required in the current Monroe County budget.

I recommend that this matter be referred to the appropriate committee(s) for favorable action by Your Honorable Body.

Sincerely,

Adam J. Bello
Monroe County Executive

Office of **the County Executive**

Monroe County, New York

Adam J. Bello
County Executive

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November 6, 2026

To The Honorable
Monroe County Legislature
407 County Office Building
Rochester, New York 14614

Subject: Acceptance of a Grant from the New York State Department of Health for the Early Intervention Program

Honorable Legislators:

I recommend that Your Honorable Body accept a five-year grant from the New York State Department of Health, in the amount of $2,368,605 for the Early Intervention Program for the period of October 1, 2026 through September 30, 2031.

The Early Intervention Program ensures that families of infants and toddlers with suspected or confirmed developmental delays receive services appropriate to their needs through the provision of service coordination and the development of an Individualized Family Service Plan. The purpose of this grant is to provide administration, oversight, and development of the Monroe County Early Intervention Program by Monroe County Department of Public Health staff. This funding will be used to support salaries, benefits, and program expenses.

The specific legislative actions required are:

1. Authorize the County Executive, or his designee, to accept a $2,368,605 grant from, and to execute a contract and any amendments thereto, with the New York State Department of Health for the Early Intervention Program, for the period of October 1, 2026 through September 30, 2031.

2. Amend the 2026 operating budget of the Department of Public Health by appropriating the sum of $473,721 into general fund 1301, fund center 580701, Early Intervention Administration.

3. Authorize the County Executive to appropriate any subsequent years of the grant award in accordance with the grant terms, to reappropriate any unencumbered balances during the grant period according to the grantor requirements, to make any necessary funding modifications within the grant guidelines to meet contractual commitments, and to enter into any amendments to extend the time period of the grant.

4. Should funding of this program be modified or terminated for any reason, the County Executive is hereby authorized to terminate or modify the program and, where applicable, to terminate or abolish some or all positions funded under such program. Any termination or abolishment of positions shall be in accordance with New York State Civil Service Law and, when applicable, the terms of any labor agreement affecting such positions.

This action is a Type II Action pursuant to 6 NYCRR § 617.5(c) (26) ("routine or continuing agency administration and management, not including new programs or major reordering of priorities that may affect the environment") and is not subject to further review under the State Environmental Quality Review Act.

This grant is 100% funded by the New York State Department of Health. No net County support is required in the current Monroe County budget.

I recommend that this matter be referred to the appropriate committee(s) for favorable action by Your Honorable Body.

Sincerely,

Adam J. Bello
Monroe County Executive

Office of **the County Executive**

Monroe County, New York

Adam J. Bello
County Executive

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November 6, 2026

To The Honorable
Monroe County Legislature
407 County Office Building
Rochester, New York 14614

Subject: Authorize Contracts with Karen Rosenbloom, Paul DiStefano, William Hawkins, Pamela Grant, and Any Other Qualified Individual to Provide Municipal Representative Services for the Preschool Special Education Program

Honorable Legislators:

I recommend that Your Honorable Body authorize contracts with Karen Rosenbloom, Paul DiStefano, William Hawkins, Pamela Grant, and any other qualified individual to provide municipal representative services for the Preschool Special Education Program in a total annual amount not to exceed $52,500 collectively for the period of January 1, 2027 through December 31, 2027, with the option to renew for two (2) additional one-year terms in a total annual amount not to exceed $52,500 collectively.

As municipal representatives, Karen Rosenbloom, Paul DiStefano, William Hawkins, Pamela Grant and any other qualified individual will represent the County of Monroe as its designees to school district Committees on Preschool Special Education as authorized by Section 4410 of the NYS Education Law, as amended, and Part 200 of the Regulations of the Commissioner of Education. The municipal representative is a voting member of each committee in determining initial and continuing eligibility for Preschool Special Education services at the least restrictive environment appropriate to a child's needs.

Requests for Qualifications were issued for these contracts and Karen Rosenbloom, Paul DiStefano, William Hawkins, and Pamela Grant were selected as the most qualified to provide this service. Any additional municipal representative would need to meet qualifications outlined in the previously released Request for Qualifications.

The specific legislative action required is to authorize the County Executive, or his designee, to execute contracts and any amendments thereto, with Karen Rosenbloom, 24 Callingham Road, Pittsford, New York 14534; Paul DiStefano, 300 Chelmsford Road, Rochester, New York 14618; William Hawkins, 1734 Wallace Road, Piffard, New York 14533; Pamela Grant, 996 Cunningham Drive, Victor, New York 14564; and any other qualified individual to provide municipal representative services for the Preschool Special Education Program in a total annual amount not to exceed $52,500 collectively for the period of January 1, 2027 through December 31, 2027, with the option to renew for two (2) additional one-year terms in a total annual amount not to exceed $52,500 collectively.

This action is a Type II Action pursuant to 6 NYCRR § 617.5(c)(26) ("routine or continuing agency administration and management, not including new programs or major reordering of priorities that may affect the environment") and is not subject to further review under the State Environmental Quality Review Act.

Funding for these contracts is included in the proposed 2027 operating budget of the Department of Public Health, general fund 1001, funds center 580750, Preschool Special Education Administration, program PG580000, Preschool Special Education. No additional net County support is required in the current Monroe County budget.

The records in the Office of the Monroe County Treasury have indicated that neither Karen Rosenbloom, Paul DiStefano, William Hawkins, nor Pamela Grant owe any delinquent Monroe County property taxes.

I recommend that this matter be referred to the appropriate committee(s) for favorable action by Your Honorable Body.

Sincerely,

Adam J. Bello
Monroe County Executive

Office of **the County Executive**

Monroe County, New York

Adam J. Bello
County Executive

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November 6, 2026

To The Honorable
Monroe County Legislature
407 County Office Building
Rochester, New York 14614

Subject: Acceptance of a Grant from the New York State Department of Health for the Childhood Lead Poisoning Prevention Program Plus

Honorable Legislators:

I recommend that Your Honorable Body accept a five-year grant from the New York State Department of Health in the amount of $5,175,000 for the Childhood Lead Poisoning Prevention Program Plus for the period of October 1, 2026 through September 30, 2031.

The purpose of this grant is to reduce the incidence of lead poisoning in Monroe County children by the identification and safe correction of lead hazards in housing units before a child is poisoned and to provide medical and environmental case management and educational intervention for children with elevated blood lead levels and their families. Funding will support lead inspections and risk assessments performed by Monroe County Department of Public Health Lead Program staff in residences of children who have blood lead levels greater than or equal to 5 micrograms per deciliter ("µ g/dL"). Funds will also be used to provide outreach and education in environmental home safety, provide lead primary prevention education, and provide salaries and benefits of existing staff as well as other costs to run the program.

The specific legislative actions required are:

1. Authorize the County Executive, or his designee, to accept a $5,175,000 grant from, and to execute a contract and any amendments thereto, with the New York State Department of Health for the Childhood Lead Poisoning Prevention Program Plus for the period of October 1, 2026 through September 30, 2031.

2. Amend the 2026 operating budget of the Department of Public Health by appropriating the sum of $1,035,000 into general fund 1301, funds center 580606, Lead Programs.

3. Authorize the County Executive to appropriate any subsequent years of the grant award in accordance with the grant terms, to reappropriate any unencumbered balances during the grant period according to the grantor requirements, to make any necessary funding modifications within the grant guidelines to meet contractual commitments, and to enter into any amendments to extend the time period of the grant.

4. Should funding of this program be modified or terminated for any reason, the County Executive is hereby authorized to terminate or modify the program and, where applicable, to terminate or abolish some or all positions funded under such program. Any termination or abolishment of positions shall be in accordance with New York State Civil Service Law and, when applicable, the terms of any labor agreement affecting such positions.

This action is a Type II Action pursuant to 6 NYCRR § 617.5(c)(26) ("routine or continuing agency administration and management, not including new programs or major reordering of priorities that may affect the environment") and is not subject to further review under the State Environmental Quality Review Act.

This grant is 100% funded by the New York State Department of Health. No net County support is required in the current Monroe County budget.

I recommend that this matter be referred to the appropriate committee(s) for favorable action by Your Honorable Body.

Sincerely,

Adam J. Bello
Monroe County Executive

Office of **the County Executive**

Monroe County, New York

Adam J. Bello
County Executive

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WAYS & MEANS

November 6, 2026

To The Honorable
Monroe County Legislature
407 County Office Building
Rochester, New York 14614

Subject: Amend Resolution 524 of 2021 as Amended by Resolution 420 of 2025 to Amend and Increase the Contract with Rochester General Hospital to Provide Human Post-Exposure Rabies Prophylaxis Services for the Monroe County Department of Public Health

Honorable Legislators:

I recommend that Your Honorable Body amend Resolution 524 of 2021 as amended by Resolution 420 of 2025 to amend and increase the contract with Rochester General Hospital from an amount not to exceed $145,997 to an amount not to exceed $199,997 to provide human post-exposure rabies prophylaxis services for the Monroe County Department of Public Health for the period of January 1, 2026 through December 31, 2026.

This vendor will provide human rabies post-exposure treatment services at the Rochester Regional Health Immediate Care Wilson location.

A Request for Proposals was issued for this contract with Rochester General Hospital the sole responder.

The specific legislative action required is to amend Resolution 524 of 2021 as amended by Resolution 420 of 2025 to amend and increase the contract with Rochester General Hospital, 1425 Portland Avenue, Rochester, New York 14621, to provide human post-exposure rabies prophylaxis services for the Monroe County Department of Public Health from an amount not to exceed $145,997 to an amount not to exceed $199,997 for the period of January 1, 2026 through December 31, 2026.

This action is a Type II Action pursuant to 6 NYCRR § 617.5(c)(26) ("routine or continuing agency administration and management, not including new programs or major reordering of priorities that may affect the environment") and is not subject to further review under the State Environmental Quality Review Act.

Funding for this contract is included in the 2026 operating budget of the Department of Public Health, general fund 1001, cost centers 580603, Sanitation, and 580605, Rabies Reimbursement Program. No additional net County support is required in the current Monroe County budget.

Rochester General Hospital is a not-for-profit entity, and the records in the Office of the Monroe County Treasury have indicated that it does not owe any delinquent Monroe County property taxes.

I recommend that this matter be referred to the appropriate committee(s) for favorable action by Your Honorable Body.

Sincerely,

Adam J. Bello
Monroe County Executive

Office of **the County Executive**

Monroe County, New York

Adam J. Bello
County Executive

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WAYS & MEANS

November 6, 2026

To The Honorable
Monroe County Legislature
407 County Office Building
Rochester, New York 14614

Subject: Acceptance of the Aid to Defense Program Grant from New York State Division of Criminal Justice Services for the Office of the Public Defender

Honorable Legislators:

I recommend that Your Honorable Body accept a grant from the New York State Division of Criminal Justice Services in the amount of $245,086 for the Aid to Defense ("ATD") Program for the Office of the Public Defender for the period of April 1, 2026 through March 31, 2027.

The ATD Grant program provides expedited felony case processing through the judicial system by funding part or all of the salary costs to three (3) full-time positions in the Public Defender's Office. This will be the forty-second year the County has received this grant. This year's funding is the same amount received in last year's award.

The specific legislative actions required are:

1. Authorize the County Executive, or his designee, to accept a $245,086 grant from, and to execute a contract and any amendments thereto, with the New York State Division of Criminal Justice Services for the Aid to Defense Program for the Office of the Public Defender for the period of April 1, 2026 through March 31, 2027.

2. Authorize the County Executive to appropriate any subsequent years of the grant award in accordance with the grant terms, to reappropriate any unencumbered balances during the grant period according to the grantor requirements, to make any necessary funding modifications within the grant guidelines to meet contractual commitments, and to enter into any amendments to extend the time period of the grant.

3. Should funding of this program be modified or terminated for any reason, the County Executive is hereby authorized to terminate or modify the program and, where applicable, to terminate or abolish some or all positions funded under such program. Any termination or abolishment of positions shall be in accordance with New York State Civil Service Law and, when applicable, the terms of any labor agreement affecting such positions.

This action is a Type II Action pursuant to 6 NYCRR § 617.5(c)(26) ("routine or continuing agency administration and management, not including new programs or major reordering of priorities that may affect the environment") and is not subject to further review under the State Environmental Quality Review Act.

Funding for this grant is included in the 2026 operating budget of the Public Defender's Office, general fund 1001, cost center 260101. No additional net County support is required in the current Monroe County budget.

I recommend that this matter be referred to the appropriate committee(s) for favorable action by Your Honorable Body.

Sincerely,

Adam J. Bello
Monroe County Executive

Office of **the County Executive**

Monroe County, New York

Adam J. Bello
County Executive

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WAYS & MEANS.

November 6, 2026

To The Honorable
Monroe County Legislature
407 County Office Building
Rochester, New York 14614

Subject: Acceptance of a Grant from the United States Department of Justice-Drug Enforcement Administration for the DEA Task Force

Honorable Legislators:

This matter is being referred to Your Honorable Body at the request of Sheriff Todd K. Baxter.

I recommend that Your Honorable Body accept a grant from the United States Department of Justice, Drug Enforcement Administration ("DEA") in an amount not to exceed $22,377 for the reimbursement of overtime for the DEA Task Force for the period of October 1, 2026 through September 30, 2027.

This grant will support a collaborative task force with the DEA to investigate, apprehend, and arrest narcotic traffickers. The grant will reimburse overtime costs associated with the task force services. This will be the ninth year the County has received this funding. This year's funding represents an increase of $221 from previous year's funding.

The specific legislative actions required are:

1. Authorize the County Executive, or his designee, to accept a grant in an amount not to exceed $22,377 and to execute a contract, and any amendments thereto, with the United States Department of Justice-Drug Enforcement Administration for the reimbursement of overtime for the DEA Task Force for the period of October 1, 2026 through September 30, 2027.

2. Amend the 2026 operating budget of the Office of the Sheriff by appropriating the sum of $22,377 into general fund 1301, cost center 380301, Police Bureau Administration.

3. Authorize the County Executive to appropriate any subsequent years of the grant award in accordance with the grant terms, to reappropriate any unencumbered balances during the grant period according to the grantor requirements, to make any necessary funding modifications within the grant guidelines to meet contractual commitments, and to enter into any amendments to extend the time period of the grant.

4. Should funding of this program be modified or terminated for any reason, the County Executive is hereby authorized to terminate or modify the program and, where applicable, to terminate or abolish some or all positions funded under such program. Any termination or abolishment of positions shall be in accordance with New York State Civil Service Law and, when applicable, the terms of any labor agreement affecting such positions.

This action is a Type II Action pursuant to 6 NYCRR § 617.5(c)(26) ("routine or continuing agency administration and management, not including new programs or major reordering of priorities that may affect the environment") and is not subject to further review under the State Environmental Quality Review Act.

This grant is 100% funded by the United States Department of Justice, Drug Enforcement Administration. No additional net County support is required in the current Monroe County budget.

I recommend that this matter be referred to the appropriate committee(s) for favorable action by Your Honorable Body.

Sincerely,

Adam J. Bello
Monroe County Executive

Office of **the County Executive**

Monroe County, New York

Adam J. Bello
County Executive

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No. 260388
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Committee Assignment
PUBLIC SAFETY -L
WAYS & MEANS

November 6, 2026

To The Honorable
Monroe County Legislature
407 County Office Building
Rochester, New York 14614

Subject: Acceptance of a Gift from Bryx, Inc. of an Unmanned Aircraft System and Related Equipment

Honorable Legislators:

This matter is being referred to Your Honorable Body at the request of Sheriff Todd K. Baxter.

I recommend that Your Honorable Body authorize the acceptance of a gift from Bryx, Inc. ("Bryx") of an unmanned aircraft system ("UAS") and related equipment with an approximate value of $6,000.

In support of the Sheriff's Unmanned Aircraft Systems Program, the Sheriff's Office is being awarded a previously used unmanned aircraft system and related equipment. The UAS and related equipment is no longer of use to Bryx and Bryx wanted to donate the used equipment to a public safety agency. The UAS and related equipment will provide additional aerial support for a variety of public safety missions to include missing and endangered persons, incident response, critical infrastructure inspections, special event monitoring, fire emergency response, and community outreach and demonstrations. This is the first time the Sheriff's Office has received a gift from Bryx, Inc.

The specific legislative action required is to authorize the County Executive, or his designee, to execute a contract and any amendments thereto, with Bryx, Inc., 59 Halstead Street, Rochester, New York 14610 to accept a gift of an unmanned aircraft system and related equipment with an approximated value of $6,000.

This action is a Type II Action pursuant to 6 NYCRR § 617.5(c)(26) ("routine or continuing agency administration and management, not including new programs or major reordering of priorities that may affect the environment") and is not subject to further review under the State Environmental Quality Review Act.

This gift is 100% funded by Bryx, Inc. No net County support is required in the current Monroe County budget.

I recommend that this matter be referred to the appropriate committee(s) for favorable action by Your Honorable Body.

Sincerely,

Adam J. Bello
Monroe County Executive

Office of **the County Executive**

Monroe County, New York

Adam J. Bello
County Executive

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WAYS & MEANS

November 6, 2026

To The Honorable
Monroe County Legislature
407 County Office Building
Rochester, New York 14614

Subject: Amend Resolution 193 of 2025 to Increase and Extend the Contract with Squad 9, LLC for Rochester Threat Advisory Committee Planning, Project Management and Training Consultant Services

Honorable Legislators:

This matter is being referred to Your Honorable Body at the request of Sheriff Todd K. Baxter.

I recommend that Your Honorable Body amend Resolution 193 of 2025 to increase the contract with Squad 9, LLC for Rochester Threat Advisory Committee ("ROCTAC") planning, project management and training consultant services from the amount of $75,000 to the amount of $81,000, and to extend the contract by one year through August 31, 2027, with all other terms to remain the same.

ROCTAC is a partnership between the Monroe County Sheriff's Office, other local and federal law enforcement, corporations, schools, and social service agencies to prevent acts of targeted violence in Monroe County. Part of ROCTAC is Threat Assessment and Management ("TAM") team, which plan and prepare for pre-meditated instances of targeted violence.

Squad 9, LLC provides strategic guidance on functional group inclusion to represent pertinent community stakeholders, update current emergency plans with TAM/ROCTAC, produce and host training operations (regional if needed), and conduct related TAM exercises.

The specific legislative action required is to amend Resolution 193 of 2025 to increase the contract with Squad 9, LLC, 65 Falling Brook Road, Fairport, New York 14450 for Rochester Threat Advisory Committee planning, project management and training consulting services from the amount of $75,000 to the amount of $81,000, and to extend the term period for one year through August 31, 2027, with all other terms to remain the same.

This action is a Type II Action pursuant to 6 NYCRR § 617.5(c)(26) ("routine or continuing agency administration and management, not including new programs or major reordering of priorities that may affect the environment") and is not subject to review under the State Environmental Quality Review Act.

Funding for this contract is included in the 2026 operating budget of the Sheriff's Office, general fund 1301, cost center 380301, Police Bureau Administration. No additional net County support is required in the current Monroe County budget.

The records in the Office of the Monroe County Treasury have indicated that neither Squad 9, LLC, nor its principal officer, Joseph Testani, owe any delinquent Monroe County property taxes.

I recommend that this matter be referred to the appropriate committee(s) for favorable action by Your Honorable Body.

Sincerely,

Adam J. Bello
Monroe County Executive

Office of **the County Executive**

Monroe County, New York

Adam J. Bello
County Executive

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WAYS & MEANS

November 6, 2026

To The Honorable
Monroe County Legislature
407 County Office Building
Rochester, New York 14614

Subject: Acceptance of a Grant from the New York State STOP-DWI Foundation, Inc. for DWI High Visibility Engagement Campaign Enforcement and Authorize Intermunicipal Agreements with Ten Municipalities and Two State Entities

I recommend that Your Honorable Body accept a grant from the New York State STOP-DWI Foundation, Inc. in the amount of $50,000 for DWI High Visibility Engagement Campaign Enforcement for the Department of Public Safety and the Office of the Sheriff for the period of October 1, 2026 through September 30, 2027, and to authorize intermunicipal agreements with the City of Rochester, nine towns and villages in Monroe County with local police departments, the State University of New York at Brockport, and the New York State Police (Genesee Region) for the period of October 1, 2026 through September 30, 2027.

The purpose of this grant is to reimburse local law enforcement agencies for overtime incurred during High Visibility Engagement Campaigns. The High Visibility Engagement Campaigns will be concerted efforts among the different police agencies to deploy extra patrols during specified holiday weekends in order to minimize the number of impaired driving crashes. Funding is in the amount of $42,750 for the Department of Public Safety and in the amount of $7,250 for the Sheriff's Office. This will be the 16th year the County has received this grant. This year's funding represents the same amount as last year.

The specific legislative actions required are:

1. Authorize the County Executive, or his designee, to accept a $50,000 grant from, and to execute a contract and any amendments thereto, with the New York State STOP-DWI Foundation, Inc. for DWI High Visibility Engagement Campaign Enforcement for the period of October 1, 2026 through September 30, 2027.

2. Amend the 2026 operating budget of the Department of Public Safety by appropriating the sum of $42,750 into general fund 1301, cost center 240504, STOP-DWI Enforcement Agency Support, program PG240002, Traffic Safety Program.

3. Amend the 2026 operating budget of the Office of the Sheriff by appropriating the sum of $7,250 into general fund 1301, cost center 380301, Police Bureau Administration.

4. Authorize the County Executive, or his designee, to execute agreements, and any amendments thereto, including reallocations of any unused amounts, with the governmental entities listed below, for DWI High Visibility Engagement Campaign Enforcement, in the amount of $42,750 for the period of October 1, 2026 through September 30, 2027:

Governmental Entity	Contract Amount
Brighton	$4,500
Brockport	1,200
East Rochester	1,200
Fairport	1,200
Gates	8,250
Greece	5,000
Irondequoit	4,000
Ogden	4,000
Rochester	7,000
Webster	4,000
SUNY Brockport	1,200
NYS Park Police (Genesee Region)	1,200
TOTAL	$42,750

5. Authorize the County Executive to appropriate any subsequent years of the grant award in accordance with grant terms, to re-appropriate any unencumbered balances during the grant period according to the grantor requirements, to make any necessary funding modifications within grant guidelines to meet contractual commitments, and to enter into any amendments to extend the time period of the grant.

6. Should funding of this program be modified or terminated for any reason, the County Executive is hereby authorized to terminate or modify the program and, where applicable, to terminate or abolish some or all positions funded under such program. Any termination or abolishment of positions shall be in accordance with New York State Civil Service Law and, when applicable, the terms of any labor agreement affecting such positions.

This action is a Type II Action pursuant to 6 NYCRR § 617.5(c)(26) ("routine or continuing agency administration and management, not including new programs or major reordering of priorities that may affect the environment") and is not subject to further review under the State Environmental Quality Review Act.

This grant is 100% funded by New York State STOP-DWI Foundation, Inc. No net county support is required in the current Monroe County budget.

I recommend that this matter be referred to the appropriate committee(s) for favorable action by Your Honorable Body.

Sincerely,

Adam J. Bello
Monroe County Executive

Office of **the County Executive**

Monroe County, New York

Adam J. Bello
County Executive

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WAYS & MEANS

November 6, 2026

To The Honorable
Monroe County Legislature
407 County Office Building
Rochester, New York 14614

Subject: Authorize Intermunicipal Agreements with Ten Municipalities for the STOP-DWI Law Enforcement Program

Honorable Legislators:

I recommend that Your Honorable Body authorize intermunicipal agreements with the ten municipalities within Monroe County that have local police departments for the STOP-DWI Law Enforcement Program in the total amount of $104,751 for the period of January 1, 2027 through December 31, 2027.

These agreements will reimburse local police departments for enforcement efforts during 2027. The funding formula includes a base allocation of $3,000 per police department, plus a percentage of the remaining funding derived from the 2025 DWI arrest totals of each law enforcement agency. Additional funding for Victim Impact Panel ("VIP") responsibilities is allocated to reimburse each participating law enforcement agency for security and general support, and is derived from fees paid by offenders to attend the panel.

The specific legislative action required is to authorize the County Executive, or his designee, to execute intermunicipal agreements, and any amendments thereto, with the City of Rochester and the nine towns and villages listed below, for the STOP-DWI Law Enforcement Program in the total amount of $104,751, for the period of January 1, 2027 through December 31, 2027:

Municipality	Contract Amount
Brighton	$ 5,053
Brockport	4,493
East Rochester	4,120
Fairport	3,933
Gates	12,705
Greece	19,145
Irondequoit	12,145
Ogden	4,307
Rochester (VIP $8,400)	31,277
Webster	7,573
TOTAL	$104,751

This action is a Type II Action pursuant to 6 NYCRR § 617.5(c)(26) ("routine or continuing agency administration and management, not including new programs or major reordering of priorities that may affect the environment") and is not subject to further review under the State Environmental Quality Review Act.

Funding for these agreements is included in the proposed 2027 operating budget of the Department of Public Safety, general fund 1001, cost center 240504, STOP-DWI Enforcement Agency Support, program PG240002, Traffic Safety Program, and cost center 240505, STOP DWI Victim Impact Panel, program PG240002, Traffic Safety Program. These funds are generated from local DWI fines and VIP fees. No net County support is required in the current Monroe County budget.

I recommend that this matter be referred to the appropriate committee(s) for favorable action by Your Honorable Body.

Sincerely,

Adam J. Bello
Monroe County Executive

Office of **the County Executive**

Monroe County, New York

Adam J. Bello
County Executive

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Committee Assignment
WAYS & MEANS -L

November 6, 2026

To The Honorable
Monroe County Legislature
407 County Office Building
Rochester, New York 14614

Subject: Acceptance of a Grant from the New York State Board of Elections for the Ballot by Mail Pre-Paid Postage Program

Honorable Legislators:

This matter is being referred to Your Honorable Body at the request of Monroe County Board of Elections Commissioners Jackie Ortiz and Peter Elder.

I recommend that Your Honorable Body accept a grant from the New York State Board of Elections in the amount of $197,707.98 for the Ballot by Mail Pre-Paid Postage Program for the period of April 1, 2026 through March 31, 2027.

This grant is intended to reimburse the Monroe County Board of Elections for the costs of the Business Reply Mail pre-paid postage requirement associated with absentee ballots for elections.

The specific legislative actions required are:

1. Authorize the County Executive, or his designee, to accept a $197,707.98 grant from, and to execute a contract and any amendments thereto, with the New York State Board of Elections for the Ballot by Mail Pre-Paid Postage Program for the period April 1, 2026 March 31, 2027.

2. Authorize the County Executive to appropriate any subsequent years of the grant award in accordance with the grant terms, to reappropriate any unencumbered balances during the grant period according to the grantor requirements, to make any necessary funding modifications within the grant guidelines to meet contractual commitments, and to enter into any amendments to extend the time period of the grant.

3. Should funding of this program be modified or terminated for any reason, the County Executive is hereby authorized to terminate or modify the program and, where applicable, to terminate or abolish some or all positions funding under such program. Any termination or abolishment of positions shall be in accordance with the New York State Civil Service Law and, where applicable, the terms of any labor agreement affecting such positions.

This action is a Type II Action pursuant to 6 NYCRR § 617.5(c)(26) ("routine or continuing agency administration and management, not including new programs or major reordering of priorities that may affect the environment") and is not subject to further review under the State Environmental Quality Review Act.

Funding for this grant is included in the 2026 operating budget of the Board of Elections, general fund 1001, cost center 200301, Elections Support. No additional net County support is required in the current Monroe County budget.

I recommend that this matter be referred to the appropriate committee(s) for favorable action by Your Honorable Body.

Sincerely,

Adam J. Bello
Monroe County Executive

Office of **the County Executive**

Monroe County, New York

Adam J. Bello
County Executive

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WAYS & MEANS -L

November 6, 2026

To The Honorable
Monroe County Legislature
407 County Office Building
Rochester, New York 14614

Subject: Acceptance of a Grant from the New York State Board of Elections for the 2026 General Election Grant Program for ES&S Express Vote XL Machines

Honorable Legislators:

This matter is being referred to Your Honorable Body at the request of Monroe County Board of Elections Commissioners Jackie Ortiz and Peter Elder.

I recommend that Your Honorable Body accept a grant from the New York State Board of Elections in the amount of $111,366.89 for the 2026 General Election Grant Program for the partial cost of forty (40) ES&S Express Vote XL machines for the period of April 1, 2026 through March 31, 2027.

This grant is intended to reimburse the Monroe County Board of Elections for partial costs associated with the forty (40) ES&S Express Vote XL machines.

The specific legislative actions required are:

1. Authorize the County Executive, or his designee, to accept a $111,366.89 grant from, and to execute a contract and any amendments thereto, with the New York State Board of Elections for the 2026 General Election Grant Program for the partial cost of forty (40) ES&S Express Vote XL machines for the period of April 1, 2026 through March 31, 2027.

2. Authorize the County Executive to appropriate any subsequent years of the grant award in accordance with the grant terms, to reappropriate any unencumbered balances during the grant period according to the grantor requirements, to make any necessary funding modifications within the grant guidelines to meet contractual commitments, and to enter into any amendments to extend the time period of the grant.

3. Should funding of this program be modified or terminated for any reason, the County Executive is hereby authorized to terminate or modify the program and, where applicable, to terminate or abolish some or all positions funding under such program. Any termination or abolishment of positions shall be in accordance with the New York State Civil Service Law and, where applicable, the terms of any labor agreement affecting such positions.

This action is a Type II Action pursuant to 6 NYCRR § 617.5(c)(26) ("routine or continuing agency administration and management, not including new programs or major reordering of priorities that may affect the environment") and is not subject to further review under the State Environmental Quality Review Act.

Funding for this grant is included in the 2026 operating budget of the Board of Elections, general fund 1001, cost center 200301, Elections Support. No additional net County support is required in the current Monroe County budget.

I recommend that this matter be referred to the appropriate committee(s) for favorable action by Your Honorable Body.

Sincerely,

Adam J. Bello
Monroe County Executive

Office of **the County Executive**

Monroe County, New York

Adam J. Bello
County Executive

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No. 260394
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Committee Assignment
REC & ED -L
WAYS & MEANS

November 6, 2026

To The Honorable
Monroe County Legislature
407 County Office Building
Rochester, New York 14614

Subject: Acceptance of a Grant from the Seneca Park Zoo Society for the Renovation of the Roof and HVAC System at the Rocky Coasts Exhibit at Seneca Park Zoo; Amend the 2026-2031 Capital Improvement Program and 2026 Capital Budget to Add a Project Entitled, "Rocky Coasts Exhibit Improvements"; and Authorize Financing

Honorable Legislators:

I recommend that Your Honorable Body accept a grant from the Seneca Park Zoo Society in the amount of $910,866 to be used for the renovation of the roof and HVAC system at the Rocky Coasts exhibit at Seneca Park Zoo; amend the 2026-2031 Capital Improvement Program and 2026 Capital Budget to add a project entitled, "Rocky Coasts Exhibit Improvements"; and authorize financing for the project.

Rocky Coasts opened in 1997 and is the Zoo's home for species including the polar bears, sea lions, and penguins. While it remains an extremely popular component of the Seneca Park Zoo, many of its systems are now approaching thirty (30) years of age. Renovations and improvements are necessary to ensure that the exhibit remains a safe animal habitat for decades to come. These renovations and improvements will replace circa-1990s equipment including air handlers, boilers, air take-up units, and roofing elements with modern equivalents that will increase the energy efficiency of the exhibits, additionally helping to reduce Zoo operating costs.

The specific legislative actions required are:

1. Authorize the County Executive, or his designee, to accept a $910,866 grant from, and to execute a contract and any amendments thereto, with the Seneca Park Zoo Society for the renovation of the roof and HVAC system at the Rocky Coasts exhibit at Seneca Park Zoo.

2. Amend the 2026-2031 Capital Improvement Program and the 2026 Capital Budget to add a project entitled "Rocky Coasts Exhibit Improvements" in the amount of $910,866.

3. Authorize financing for the project entitled "Rocky Coasts Exhibit Improvements," in the amount of $910,866.

4. Authorize the County Executive to appropriate any subsequent years of the grant award in accordance with the grant terms, to reappropriate any encumbered balances during the grant period according to the grantor requirements, to make any necessary funding modifications within the grant guidelines to meet contractual commitments, and to enter into any amendments to extend the time period of the grant.

5. Should funding of this program be modified or terminated for any reason, the County Executive is hereby authorized to terminate or modify the program and, where applicable, to terminate or abolish some or all positions funded under such program. Any termination or abolishment of positions shall be in accordance with New York State Civil Service Law and, when applicable, the terms of any labor agreement affecting such positions.

This action is a Type II Action pursuant to 6 NYCRR 617.5(c)(1), "maintenance or repair involving no substantial changes in an existing structure or facility;" and is not subject to further review under the State Environmental Quality Review Act.

Funding for this project, consistent with authorized uses, will be available in the new capital fund(s) created for this intended purpose once the additional financing authorization requested herein is approved.

This grant is 100% funded by the Seneca Park Zoo Society. No net County support is required in the current Monroe County budget.

I recommend that this matter be referred to the appropriate committee(s) for favorable action by Your Honorable Body.

Sincerely,

Adam J. Bello
Monroe County Executive

Office of **the County Executive**

Monroe County, New York

Adam J. Bello
County Executive

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Committee Assignment
WAYS & MEANS -L

November 6, 2026

To The Honorable
Monroe County Legislature
407 County Office Building
Rochester, New York 14614

Subject: Authorize a Contract with Xerox Corporation for Multifunction Devices, Support, and Maintenance

Honorable Legislators:

I recommend that Your Honorable Body authorize a contract with Xerox Corporation for multifunction devices, support and maintenance in an amount not to exceed $4,100,000; of which $2,350,000 will be used to purchase replacement devices as needed, and up to $350,000 annually for maintenance costs based on usage for the period of January 1, 2027 through December 31, 2027 with the option to renew for four (4) additional one-year terms, with each additional term in an annual amount not to exceed $350,000 for maintenance.

The purpose of this contract is to provide printing, copying, scanning and fax services to Monroe County users across all departments. It also provides for one (1) onsite support technician, per copy service charges, and maintenance fees. This will continue the same level of support and allow for the replacement of existing devices as they reach end of life.

A request for proposals was issued for this contract and Xerox was selected as the most qualified to provide this service.

The specific legislative action required is to authorize a contract with Xerox Corporation for multifunction devices, support and maintenance in an amount not to exceed $4,100,000; of which $2,350,000 will be used to purchase replacement devices as needed, and up to $350,000 annually for maintenance costs based on usage for the period of January 1, 2027 through December 31, 2027 with the option to renew for four (4) additional one-year terms, with each additional term in an annual amount not to exceed $350,000 for maintenance costs.

This is a Type II action pursuant to 6 NYCRR § 617.5(c)(26) ("routine or continuing agency administration and management, not including new programs or major reordering of priorities that may affect the environment") and is not subject to further review under the State Environmental Quality Review Act.

Funding for this contract, consistent with authorized uses, will be available in capital project 272 and in any other capital project(s) created for the same intended purpose. No additional net county support is required in the current Monroe County budget.

The records in the Office of the Monroe County Treasury have indicated that neither Xerox Corporation, nor any of its principal officers, owe any delinquent Monroe County property taxes. The principal officers of the firm are:

Louie Pastor, Chief Executive Officer
Chuck Butler, Chief Financial Officer
Flor Colón, Chief Legal Officer and Corporate Secretary
Jacques-Edouard Gueden, Chief Revenue Officer

I recommend that this matter be referred to the appropriate committee(s) for favorable action by Your Honorable Body.

Sincerely,

Adam J. Bello
Monroe County Executive

Office of **the County Executive**

Monroe County, New York

Adam J. Bello
County Executive

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Committee Assignment
INTRGOV REL -L
HUMAN SERVICES
WAYS & MEANS

November 6, 2026

To The Honorable
Monroe County Legislature
407 County Office Building
Rochester, New York 14614

Subject: Authorize Intermunicipal Agreements with Other Counties for Services Provided by the Monroe County Office of the Medical Examiner

Honorable Legislators:

I recommend that Your Honorable Body authorize intermunicipal agreements with various counties in New York State for the provision of comprehensive medicolegal death investigative and forensic pathology services by the Monroe County Office of the Medical Examiner for a one-year period to commence on or after January 1, 2027, with the option to renew for up to two (2) additional one-year terms of up to one year each, with any such renewals billed at the Monroe County Budget Public Health – Medical Examiner Fees and Charges Schedule for the corresponding year.

Under the terms of the intermunicipal agreements, the Monroe County Office of the Medical Examiner performs autopsies, investigative field services, and conducts a variety of tests on an as-needed basis. The Office of the Medical Examiner will charge each county listed below a flat fee based on the prevailing rate, as established by Your Honorable Body and listed in the proposed 2027 Monroe County Budget Public Health – Medical Examiner 2027 Fees and Charges Schedule, for services up to a specified number of cases. Cases above the specified number will be on a per-case basis, as will the provision of any additional special services excluded from the standard services. The agreement provides for a fixed number of case referrals for the contract amount. The amount paid for each agreement covers certain specified included services. Excluded services, as well as any cases referred over the fixed number of agreed to cases, are billed to the referring county separately. Fixed rates will be adjusted if extensions are accepted based on prevailing rates for the corresponding year.

County	2026 Amount
Genesee/Orleans (87 cases)	$137,075
Livingston (28 cases)	$44,300
Ontario (16 cases)	$26,100
Wyoming (26 cases)	$39,850

Those counties not currently under contract with Monroe County seeking these services will be billed at the prevailing rate, as established by Your Honorable Body and listed in the proposed 2027 Monroe County Budget Public Health – Medical Examiner 2027 Fees and Charges Schedule, with any such renewals billed at the Monroe County Budget Public Health – Medical Examiner Fees and Charges Schedule for the corresponding year.

The specific legislative actions required are:

1. Authorize the County Executive, or his designee, to execute an intermunicipal agreement, and any amendments thereto, with Genesee County and Orleans County for the provision of medicolegal death investigative services and forensic pathology services by the Monroe County Office of the Medical Examiner in an amount not to exceed $137,075 for up to 87 cases per year for the period of January 1, 2027 through December 31, 2027, with services excluded from the standard services and cases above the contracted number to be billed on a per-case basis pursuant to the Monroe County Budget Public Health – Medical Examiner Fees and Charges Schedule, and with the option to renew for two (2) additional one-year terms, with any such renewals billed at the Monroe County Budget Public Health – Medical Examiner Fees and Charges Schedule for the corresponding year.

2. Authorize the County Executive, or his designee, to execute an intermunicipal agreement, and any amendments thereto, with Livingston County for the provision of medicolegal death investigative services and forensic pathology services by the Monroe County Office of the Medical Examiner in an amount not to exceed $44,300 for up to 28 cases per year for the period of January 1, 2027 through December 31, 2027, with services excluded from the standard services and cases above the contracted number to be billed on a per-case basis pursuant to the Monroe County Budget Public Health – Medical Examiner Fees and Charges Schedule, and with the option to renew for two (2) additional one-year terms, with any such renewals billed at the Monroe County Budget Public Health – Medical Examiner Fees and Charges Schedule for the corresponding year.

3. Authorize the County Executive, or his designee, to execute an intermunicipal agreement, and any amendments thereto, with Ontario County, for the provision of medicolegal death investigative services and forensic pathology services by the Monroe County Office of the Medical Examiner in an amount not to exceed $26,100 for up to 16 cases per year for the period of January 1, 2027 through December 31, 2027, with services excluded from the standard services and cases above the contracted number to be billed on a per-case basis pursuant to the Monroe County Budget Public Health – Medical Examiner Fees and Charges Schedule, and with the option to renew for two (2) additional one-year terms, with any such renewals billed at the Monroe County Budget Public Health – Medical Examiner Fees and Charges Schedule for the corresponding year.

4. Authorize the County Executive, or his designee, to execute an intermunicipal agreement, and any amendments thereto, with Wyoming County, for the provision of medicolegal death investigative services and forensic pathology services by the Monroe County Office of the Medical Examiner in an amount not to exceed $39,850 for up to 26 cases per year for the period of January 1, 2027 through December 31, 2027, with services excluded from the standard services and cases above the contracted number to be billed on a per-case basis pursuant to the Monroe County Budget Public Health – Medical Examiner Fees and Charges Schedule, and with the option to renew for two (2) additional one-year terms, with any such renewals billed at the Monroe County Budget Public Health – Medical Examiner Fees and Charges Schedule for the corresponding year.

5. Authorize the County Executive, or his designee, to execute an intermunicipal agreement, and any amendments thereto, with various other counties in New York State not currently under contract with Monroe County, for the provision of medicolegal death investigative services and forensic pathology services by the Monroe County Office of the Medical Examiner on an as-needed basis, invoiced at the prevailing rate as specified in the proposed 2027 Monroe County Budget, for a one-year period to commence on or after January 1, 2027, with the option to renew for up to two (2) additional terms of up to one year each, or for one (1) additional two-year term, with any such renewals billed at the Monroe County Budget Public Health – Medical Examiner Fees and Charges Schedule for the corresponding year.

This action is a Type II Action pursuant to 6 NYCRR § 617.5(c)(26) ("routine or continuing agency administration and management, not including new programs or major reordering of priorities that may affect the environment") and is not subject to further review under the State Environmental Quality Review Act.

These intermunicipal agreements are revenue generating and no additional net County support is required in the current Monroe County budget.

I recommend that this matter be referred to the appropriate committee(s) for favorable action by Your Honorable Body.

Sincerely,

Adam J. Bello
Monroe County Executive

Office of **the County Executive**
Monroe County, New York

Adam J. Bello
County Executive

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TRANSPORTATION -L
WAYS & MEANS

November 6, 2026

To The Honorable
Monroe County Legislature
407 County Office Building
Rochester, New York 14614

Subject: Authorize a License Agreement with Ontario Midland Railroad Corporation

Honorable Legislators:

I recommend that Your Honorable Body authorize a license agreement with Ontario Midland Railroad Corporation ("OMID") for operating a railroad over the Ontario Branch of the Hojack Railroad Line in the Town of Webster, for a period of thirty (30) years.

Monroe County owns approximately two (2) miles of rail property in the Town and Village of Webster. This license agreement will allow OMID to continue to operate a railroad over approximately two (2) miles of the Ontario branch of the Hojack Railroad line in the Town of Webster. OMID's use of the rail property will be located between Mile Post 80.90 and 83.00 and the turnaround between Phillips Road and Salt Road in the Town of Webster. This will enable OMID to provide rail service for the businesses and municipalities along the property.

Monroe County currently has an agreement with OMID that expires in January 2027. This new agreement will take the place of the expiring one, which has been in effect since 2011. This new agreement will also allow OMID to apply for grants to upgrade the rail line in both Monroe and Wayne counties. Wayne County already has a 30-year license agreement with OMID.

The specific legislative action required is to authorize the County Executive, or his designee, to execute a license agreement, and any amendments thereto, with the Ontario Midland Railroad Corporation for operating a railroad over the Ontario Branch of the Hojack Railroad Line in the Town of Webster, for a period of thirty (30) years to begin at the signing of the agreement.

This action is a Type II Action pursuant to 6 NYCRR § 617.5(c)(32) ("license, lease and permit renewals, or transfers of ownership therefore, where there will be no material change in permit conditions or the scope of permitted activities") and is not subject to further review under the State Environmental Quality Review Act.

This action will have no impact on the revenues or expenditures of the current Monroe County budget.

The records in the office of the Monroe County Treasury have indicated that neither the Ontario Midland Railroad Corporation, nor any of its principal officers, owe any delinquent Monroe County property taxes. The principal officers of the firm are:

Jeffrey Bauman, President
Corey Zeh, Vice President of Operations
Michelle Pfeiffer, Secretary/Treasurer

I recommend that this matter be referred to the appropriate committee(s) for favorable action by Your Honorable Body.

Sincerely,

Adam J. Bello
Monroe County Executive

Office of **the County Executive**

Monroe County, New York

Adam J. Bello
County Executive

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Committee Assignment
WAYS & MEANS -L

November 6, 2026

To The Honorable
Monroe County Legislature
407 County Office Building
Rochester, New York 14614

Subject: Authorization to Settle a Lawsuit in the United States District Court for the Western District of New York, Case No.: 6:21-cv-06715-MAV-MJP

Honorable Legislators:

I recommend that Your Honorable Body authorize a settlement of $537,500 in an action currently pending against the County of Monroe in the United States District Court for the Western District of New York, Case Number 6:21-cv-06715-MAV-MJP. This lawsuit arises out of an incident that occurred on November 26, 2020.

The specific legislative actions required are:

1. Authorize the settlement of the action brought against the County of Monroe in the United States District Court for the Western District of New York, Case Number 6:21-cv-06715-MAV-MJP.

2. Authorize the County Executive, or his designee, to execute and deliver any and all documents necessary to effectuate such settlement.

The legislative action requested in this referral is not an "Action," as that term is defined in 6 NYCRR § 617.2(b), and is not subject to review under the State Environmental Quality Review Act.

Funding for the payment of the settlement is available in the Risk Management Fund. No additional net County support is required in the current Monroe County budget.

I recommend that this matter be referred to the appropriate committees for favorable action by Your Honorable Body. I request that discussion of this referral take place in Executive Session, pursuant to Public Officer's Law § 105(1)(d).

Sincerely,

Adam J. Bello
Monroe County Executive

Office of **the County Executive**

Monroe County, New York

Adam J. Bello
County Executive

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WAYS & MEANS -L

November 6, 2026

To The Honorable
Monroe County Legislature
407 County Office Building
Rochester, New York 14614

Subject: Authorize the Acquisition of Easements in Real Property for the Thomas Avenue Highway Improvement Project in the Town of Irondequoit

Honorable Legislators:

I recommend that Your Honorable Body authorize the acquisition of easements for the Thomas Avenue Highway Improvement Project in the Town of Irondequoit from the property owners described as follows:

Parcel	Owner	Amount
Map 1 Parcel 1 PE 5,807 sf Parcel 2 TE 1,529 sf 4143 Saint Paul Boulevard T.A. # 061.14-2-62 Town of Irondequoit	West Irondequoit CSD 321 List Avenue Rochester, NY 14617	$6875
Map 2 Parcel 1 PE 174 sf 4091 Saint Paul Boulevard T.A. # 061.14-4-32.1 Town of Irondequoit	Mario Melidona Michel Major Melidona 4091 Saint Paul Boulevard Rochester, NY 14617	$1575
Map 3 Parcel 1 PE 925 sf 500 Thomas Avenue T.A. # 061.10-1-59 Town of Irondequoit	Roland D. Fisher Amy J. Fisher 500 Thomas Avenue Rochester, NY 14617	$1675
Map 4 Parcel 1 PE 170 sf 504 Thomas Avenue T.A. # 061.10-1-58 Town of Irondequoit	Roland D. Fisher Amy J. Fisher 500 Thomas Avenue Rochester, NY 14617	$250

Map 5 Parcel 1 PE 1,038 sf 510 Thomas Avenue T.A. # 061.10-1-57 Town of Irondequoit	Kara Finegan 510 Thomas Avenue Rochester, NY 14617	$1600
Map 6 Parcel 1 PE 1,655 sf 518 Thomas Avenue T.A. # 061.10-1-56 Town of Irondequoit	William Opett Marguerite Opett 518 Thomas Avenue Rochester, NY 14617	$2225
Map 7 Parcel 1 PE 3,170 sf 510 Thomas Avenue T.A. # 061.10-1-55 Town of Irondequoit	Paul Rudy Robin Rudy 510 Thomas Avenue Rochester, NY 14617	$4275
Map 8 Parcel 1 PE 1,238 sf 181 Beaconview Court T.A. # 061.06-1-18 Town of Irondequoit	Jose Torres Maribel Torres 181 Beaconview Court Rochester, NY 14617	$1600
Map 9 Parcel 1 PE 2,127 sf 757 Thomas Avenue T.A. # 061.06-1-17 Town of Irondequoit	Marie Tortarella 757 Thomas Avenue Rochester, NY 14617	$1950
Map 10 Parcel 1 PE 2,004 sf 50 Smugglers Lane T.A. # 061.06-1-14 Town of Irondequoit	Sylvia A. Gardner 50 Smugglers Lane Rochester, NY 14617	$3425

The specific legislative action required is to authorize the County Executive, or his designee, to acquire the referenced easements and execute all documents necessary for the Thomas Avenue Highway Improvement Project in the Town of Irondequoit at the tax identification numbers identified above, in the Town of Irondequoit by contract and/or the Eminent Domain Procedure Law, along with any amendments for unanticipated damages, within the total capital fund(s) appropriation.

The provisions of the New York State Environmental Quality Review Act ("SEQRA") shall be complied with prior to Your Honorable Body undertaking, funding, or approving the action requested in this referral.

Funding for these acquisitions, consistent with authorized uses, is included in capital project 465 and any capital fund(s) created for the same intended purpose. No additional net County support is required in the current Monroe County budget.

The records in the Office of the Monroe County Treasury have indicated that the individual property owner(s) listed above do not owe any delinquent Monroe County property taxes.

I recommend that this matter be referred to the appropriate committee(s) for favorable action by Your Honorable Body.

Sincerely,

Adam J. Bello
Monroe County Executive

Office of **the County Executive**

Monroe County, New York

Adam J. Bello
County Executive

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Committee Assignment
ENV. & PUB. WORKS -L

November 6, 2026

To The Honorable
Monroe County Legislature
407 County Office Building
Rochester, New York 14614

Subject: Classification of Action and Determination of Significance Pursuant to the State Environmental Quality Review Act for the Conveyance of a Permanent Easement for the National Grid Transmission Rebuild Project in the Town of Rush

Honorable Legislators:

I recommend that Your Honorable Body determine whether the conveyance of a permanent easement for the National Grid Transmission Rebuild Project in the Town of Rush may have a significant adverse impact on the environment pursuant to the State Environmental Quality Review Act ("SEQRA"). This action includes the conveyance of a permanent easement, described as follows:

Parcel	Offeror	Amount
Area 1, PE, 20,255 sf Fishell Road T.A. #212.04-4-1-23 Town of Rush	Niagara Mohawk Power Corporation 300 Erie Boulevard West Syracuse, New York 13202	$6922

The conveyance of a permanent easement for the National Grid Transmission Rebuild Project in the Town of Rush have been preliminarily classified as an Unlisted Action. The SEQRA regulations found at 6 NYCRR Part 617 requires that no agency shall carry out or approve an Action until it has complied with the requirements of SEQRA.

The specific legislative actions required are:

1. Determine that the conveyance of a permanent easement for the National Grid Transmission Rebuild Project in the Town of Rush is an Unlisted action.

2. Make a determination of significance regarding Conveyance of a permanent easement for the National Grid Transmission Rebuild Project in the Town of Rush pursuant to 6 NYCRR 617.7.

3. Authorize the County Executive, or his designee, to take such actions to comply with the requirements of the State Environmental Quality Review Act, including without limitation, the execution of documents and the filing, distribution and publication of the documents required under the State Environmental Quality Review Act, and any other actions to implement the intent of this resolution.

This designation will have no impact on the revenues or expenditures of the current Monroe County budget.

I recommend that this matter be referred to the appropriate committee(s) for favorable action by Your Honorable Body.

Sincerely,

Adam J. Bello
Monroe County Executive

Short Environmental Assessment Form
Part 1 - Project Information

Instructions for Completing

Part 1 – Project Information. The applicant or project sponsor is responsible for the completion of Part 1. Responses become part of the application for approval or funding, are subject to public review, and may be subject to further verification. Complete Part 1 based on information currently available. If additional research or investigation would be needed to fully respond to any item, please answer as thoroughly as possible based on current information.

Complete all items in Part 1. You may also provide any additional information you believe will be needed by or useful to the lead agency; attach additional pages as necessary to supplement any item.

Part 1 – Project and Sponsor Information

Name of Action or Project:
National Grid Transmission Rebuild Project in the Town of Rush.

Project Location (describe, and attach a location map):
Fishell Road - Tax Map No. 212.04-1-23

Brief Description of Proposed Action:
Niagara Mohawk Power Corporation d/b/a National Grid ("National Grid") proposes reconstructing approximately 13 miles of the existing 69 kilovolt ("kV") and 115 kV Mortimer-Golah 109 and 110 transmission lines (respectively, "Line 109" and "Line 110") (the "Mortimer to Golah Project" or the "Project").[1] [2]

The Mortimer to Golah Project crosses the Lehigh Valley Trail, which is partially located in the Town of Rush, Monroe County. Relevant here, the Project impacts the Lehigh Valley Trail in two locations on one property owned by Monroe County (Tax Map No. 212.04-1-23).[3] As discussed herein, National Grid seeks an easement from Monroe County clarifying its existing property rights and defining the width of the right-of-way ("ROW") for Lines 109 and 110 at the proposed updated Lehigh Valley Trail crossing. This memorandum focuses on the sufficiency of National Grid's existing property rights to construct the Project and concludes the Project does not trigger the parkland alienation process.

Name of Applicant or Sponsor:	Telephone: 585-753-1233
Monroe County	E-Mail:

Address:
39 West Main Street

City/PO:	State:	Zip Code:
Rochester	NY	14614

	NO	YES
1. Does the proposed action only involve the legislative adoption of a plan, local law, ordinance, administrative rule, or regulation? If Yes, attach a narrative description of the intent of the proposed action and the environmental resources that may be affected in the municipality and proceed to Part 2. If No, continue to question 2.	☑	☐
2. Does the proposed action require a permit, approval or funding from any other government Agency? If Yes, list agency(s) name and permit or approval:	☑	☐

3. a. Total acreage of the site of the proposed action? 0.465 acres
   b. Total acreage to be physically disturbed? 0 acres
   c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor? 0.465. acres

4. Check all land uses that occur on, are adjoining or near the proposed action:
   ☐ Urban ☐ Rural (non-agriculture) ☐ Industrial ☐ Commercial ☐ Residential (suburban)
   ☐ Forest ■ Agriculture ☐ Aquatic ☐ Other(Specify):
   ■ Parkland

	NO	YES	N/A
5. Is the proposed action,			
a. A permitted use under the zoning regulations?	☐	☐	☑
b. Consistent with the adopted comprehensive plan?	☐	☐	☑

	NO	YES
6. Is the proposed action consistent with the predominant character of the existing built or natural landscape?	☐	☑

	NO	YES
7. Is the site of the proposed action located in, or does it adjoin, a state listed Critical Environmental Area?		
If Yes, identify:	☑	☐

	NO	YES
8. a. Will the proposed action result in a substantial increase in traffic above present levels?	☑	☐
b. Are public transportation services available at or near the site of the proposed action?	☑	☐
c. Are any pedestrian accommodations or bicycle routes available on or near the site of the proposed action?	☑	☐

	NO	YES
9. Does the proposed action meet or exceed the state energy code requirements?		
If the proposed action will exceed requirements, describe design features and technologies:	☑	☐

	NO	YES
10. Will the proposed action connect to an existing public/private water supply?		
If No, describe method for providing potable water:	☐	☑

	NO	YES
11. Will the proposed action connect to existing wastewater utilities?		
If No, describe method for providing wastewater treatment:	☐	☑

	NO	YES
12. a. Does the project site contain, or is it substantially contiguous to, a building, archaeological site, or district which is listed on the National or State Register of Historic Places, or that has been determined by the Commissioner of the NYS Office of Parks, Recreation and Historic Preservation to be eligible for listing on the State Register of Historic Places?	☑	☐
b. Is the project site, or any portion of it, located in or adjacent to an area designated as sensitive for archaeological sites on the NY State Historic Preservation Office (SHPO) archaeological site inventory?	☐	☑

	NO	YES
13. a. Does any portion of the site of the proposed action, or lands adjoining the proposed action, contain wetlands or other waterbodies regulated by a federal, state or local agency?	☐	☑
b. Would the proposed action physically alter, or encroach into, any existing wetland or waterbody?	☑	☐
If Yes, identify the wetland or waterbody and extent of alterations in square feet or acres:		
The wetland is located aproximately 330 feet south of the project.		

14. Identify the typical habitat types that occur on, or are likely to be found on the project site. Check all that apply:

☐ Shoreline ☐ Forest ☒ Agricultural/grasslands ☐ Early mid-successional

☐ Wetland ☐ Urban ☐ Suburban

	NO	YES
15. Does the site of the proposed action contain any species of animal, or associated habitats, listed by the State or Federal government as threatened or endangered?	☑	☐
16. Is the project site located in the 100-year or 500-year flood plain?	☐	☑
17. Will the proposed action create storm water discharge, either from point or non-point sources? If Yes,	☑	☐
a. Will storm water discharges flow to adjacent properties?	☐	☐
b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)?	☐	☐
If Yes, briefly describe:		
18. Does the proposed action include construction or other activities that would result in the impoundment of water or other liquids (e.g., retention pond, waste lagoon, dam)? If Yes, explain the purpose and size of the impoundment:	☑	☐
19. Has the site of the proposed action or an adjoining property been the location of an active or closed solid waste management facility? If Yes, describe:	☑	☐
20. Has the site of the proposed action or an adjoining property been the subject of remediation (ongoing or completed) for hazardous waste? If Yes, describe:	☑	☐
21. Is the project located within, or within ½ mile of, a disadvantaged community?	☑	☐
If No, could impacts from the project affect a disadvantaged community?	☑	☐
If Yes to either question in 21, answer the following question.		
a. Identify the potential pollution impacts of the project, either direct or indirect, that may occur within the disadvantaged community (e.g., wastewater discharges, air emissions, noise, odors, solid or hazardous waste generation or management):		

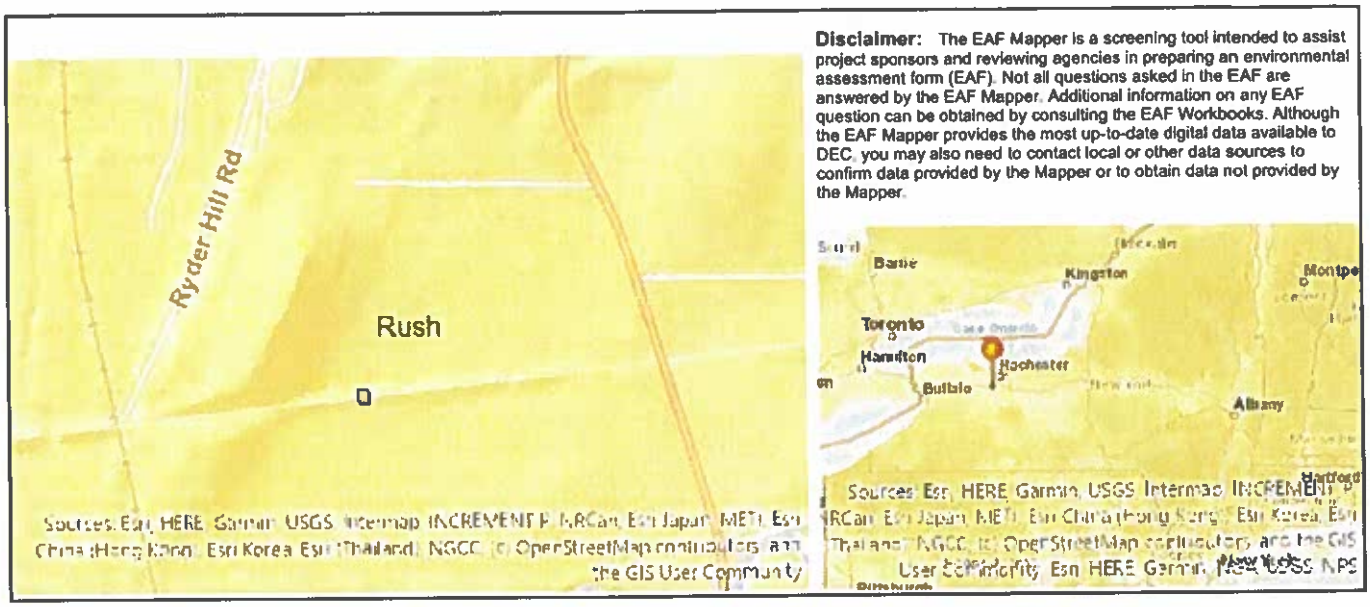
I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE

Applicant/sponsor/name: AMY E GRANDE Date: 10·23·26

Signature: Amy E Grande Title: Director RPTS

EAF Mapper Summary Report

Friday, October 9, 2026 1:12 PM



Part 1 / Question 7 [Critical Environmental Area]	No
Part 1 / Question 12a [National or State Register of Historic Places or State Eligible Sites]	No
Part 1 / Question 12b [Archeological Sites]	Yes
Part 1 / Question 13a [Wetlands or Other Regulated Waterbodies]	Yes - Digital mapping information on local, New York State, and federal wetlands and waterbodies is known to be incomplete. Refer to the EAF Workbook.
Part 1 / Question 15 [Threatened or Endangered Animal]	No
Part 1 / Question 16 [100 or 500 Year Floodplain]	Yes
Part 1 / Question 20 [Remediation Site]	No
Part 1 / Question 21 [Disadvantaged Community]	No

Agency Use Only [If applicable]	
Project:	National Grid Easements
Date:	10-23-26

Short Environmental Assessment Form
Part 2 - Impact Assessment

Part 2 is to be completed by the Lead Agency.
Answer all of the following questions in Part 2 using the information contained in Part 1 and other materials submitted by the project sponsor or otherwise available to the reviewer. When answering the questions the reviewer should be guided by the concept "Have my responses been reasonable considering the scale and context of the proposed action?"

	No, or small impact may occur	Moderate to large impact may occur
1. Will the proposed action create a material conflict with an adopted land use plan or zoning regulations?	✓	
2. Will the proposed action result in a change in the use or intensity of use of land?	✓	
3. Will the proposed action impair the character or quality of the existing community?	✓	
4. Will the proposed action have an impact on the environmental characteristics that caused the establishment of a Critical Environmental Area (CEA)?	✓	
5. Will the proposed action result in an adverse change in the existing level of traffic or affect existing infrastructure for mass transit, biking or walkway?	✓	
6. Will the proposed action cause an increase in the use of energy and it fails to incorporate reasonably available energy conservation or renewable energy opportunities?	✓	
7. Will the proposed action impact existing: a. public / private water supplies?	✓	
b. public / private wastewater treatment utilities?	✓	
8. Will the proposed action impair the character or quality of important historic, archaeological, architectural or aesthetic resources?	✓	
9. Will the proposed action result in an adverse change to natural resources (e.g., wetlands, waterbodies, groundwater, air quality, flora and fauna)?	✓	
10. Will the proposed action result in an increase in the potential for erosion, flooding or drainage problems?	✓	
11. Will the proposed action create a hazard to environmental resources or human health?	✓	
12. Is the potentially affected disadvantaged community identified as having comparatively higher burdens or vulnerabilities by the Disadvantaged Community Assessment Tool?	✓	
13. Will the proposed action cause or increase a pollution burden within a disadvantaged community?	✓	

Agency Use Only [If applicable]

Project: National Grid Easements

Date: 10-23-26

Short Environmental Assessment FormPart 3
Determination of Significance

For every question in Part 2 that was answered "moderate to large impact may occur," or if there is a need to explain why a particular element of the proposed action may or will not result in a significant adverse environmental impact, please complete Part 3. Part 3 should, in sufficient detail, identify the impact, including any measures or design elements that have been included by the project sponsor to avoid or reduce impacts. Part 3 should also explain how the lead agency determined that the impact may or will not be significant. Each potential impact should be assessed considering its setting, probability of occurring, duration, irreversibility, geographic scope and magnitude. Also consider the potential for short-term, long-term and cumulative impacts.

Part 1 of the EAF indicates the site contains or is near a Wetland and Floodplain.

This action pertains solely to the Conveyance of a Permanent Easement for the National Grid Transmission Rebuild Project. No wetlands or floodplains will be impacted by the action itself. Any future development of the parcel will be subject to local zoning and building codes, as well as all applicable federal and New York State wetland and floodplain regulations.

Accordingly, no Wetland or Floodplain will be impacted from this project. This action will not result in any significant adverse environmental impacts.

☐ Check this box if you have determined, based on the information and analysis above, and any supporting documentation,that the proposed action may result in one or more potentially large or significant adverse impacts and an environmental impact statement is required.

☑ Check this box if you have determined, based on the information and analysis above, and any supporting documentation,that the proposed action will not result in any significant adverse environmental impacts.

Monroe County	
Name of Lead Agency	Date
Adam J. Bello	County Executive
Print or Type Name of Responsible Officer in Lead Agency	Title of Responsible Officer in Lead Agency
	Steven M. Olsen
Signature of Responsible Officer in Lead Agency	Signature of Preparer (if different from Responsible Officer)

Office of **the County Executive**

Monroe County, New York

Adam J. Bello
County Executive

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November 6, 2026

To The Honorable
Monroe County Legislature
407 County Office Building
Rochester, New York 14614

Subject: Authorize the Conveyance of Permanent Easement to Niagara Mohawk Power Corporation for the National Grid Transmission Rebuild Project in the Town of Rush

Honorable Legislators:

I recommend that Your Honorable Body authorize the conveyance of permanent easement on County-owned property to Niagara Mohawk Power Corporation for the National Grid Transmission Rebuild Project in the Town of Rush described as follows:

Parcel	Offeror	Offered Amount
Area 1, PE, 20,255 sf Fishell Road T.A. #212.04-4-1-23 Town of Rush	Niagara Mohawk Power Corporation 300 Erie Boulevard West Syracuse, New York 13202	$6922

The easement is for a 20,255 sq. ft. portion of the 83.80 acres County-owned parcel. The price for this easement was determined to be market value by Monroe County Real Estate. The land will be used by Niagara Mohawk Power Corporation as part of their project to improve utilities for Monroe County.

The specific legislative action required is to authorize the County Executive, or his designee, to convey the referenced easement and execute all documents necessary for the National Grid Transmission Rebuild Project at the tax identification numbers identified above in the Town of Rush.

The provisions of the New York State Environmental Quality Review Act shall be complied with prior to Your Honorable Body undertaking, funding, or approving the action requested in this referral.

This contract is revenue generating and no net County support is required in the current Monroe County budget.

The records in the Office of the Monroe County Treasury have indicated that the individual property owner listed above does not owe any delinquent Monroe County property taxes.

I recommend that this matter be referred to the appropriate committee(s) for favorable action by Your Honorable Body.

Sincerely,

Adam J. Bello
Monroe County Executive

110 County Office Building • 39 West Main Street • Rochester, New York 14614
(585) 753-1000 • *fax:* (585) 753-1014 • *www.monroecounty.gov* • *e-mail:* countyexecutive@monroecounty.gov