



Onondaga County Legislature

JAMIE McNAMARA
Clerk

TIMOTHY T. BURTIS
Chairman

TAMMY BARBER
Deputy Clerk

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HEALTH & HUMAN SERVICES COMMITTEE MINUTES – DECEMBER 11, 2024 CODY M. KELLY, CHAIR

MEMBERS PRESENT: Mr. Meaker, Ms. Harvey, Mr. Bush

MEMBERS ABSENT: Mr. McCarron

ALSO ATTENDING: Chairman Burtis; also see attached

Chair Kelly called the meeting to order at 1:00 p.m., and the previous meeting's minutes were approved.

1. DEPARTMENT OF SOCIAL SERVICES-ECONOMIC SECURITY: Ann Rooney, Deputy County Executive - Human Services

a. Amending the 2024 Onondaga County Budget to Accept Grant Funds from the New York State Office of Temporary and Disability Assistance for Onondaga County's Child Poverty Reduction Initiative Program (\$12,250,000)

Purpose: *To accept grant funds from the New York State Office of Temporary and Disability Assistance (OTDA) for Onondaga County's Child Poverty Reduction Initiative (CPRI) Program.*

Objective/Work Plan: *The grant specifics that households within the City of Syracuse who receive or are eligible for Family Assistance (TANF) are to be served with this funding. OTDA has approved using the funds over a three-year period for four specific programs.*

1) *Expanding the 2Gen Onondaga Generational Poverty Reduction initiative, part of the County Executive's PIE agenda, a comprehensive program to break the cycle of poverty in Onondaga County. This program focuses on helping young parents on temporary assistance achieve long-term self-sufficiency through comprehensive, multigenerational support. Components include mobility mentoring, economic stability through "benefits cliff" supports, comprehensive goal planning in five main areas of family well-being: social capital, economic assets, child development, post-secondary education, and health and well-being. In addition, while working with heads of households, the initiative works with non-custodial parents on employment and parenting. Grant funds will enable Department of Social Services - Economic Security (DSS-ES) to hire ten additional staff for this initiative. We anticipate serving 450 households over a three-year period.*

2) *Housing Assistance and Network for Community Engagement (CNY CHANCE) - DSS-ES will contract with Homeless and Housing Coalition to operate a landlord incentive and retention service and a tenant navigation service. Landlords who rent to Temporary Assistance clients will have a "one stop/one call" support system to address any tenant issues. Tenants will be able to access Tenant Navigators who will provide information on rights and responsibilities and assist with landlord issues. This model has been successful in Cincinnati, Las Vegas, Omaha and Dallas to expand and sustain permanent housing options for very low income households. We anticipate bringing online 750 new units and supporting 450 tenants over a three-year period.*

3) *Attendance project focused on school absenteeism - Department of Children and Family Services will lead this program and work in partnership with the Syracuse City School District. The program's goal is to ensure every student can succeed by regularly attending school. To combat chronic absenteeism, the project will embed a full-time Attendance Liaison within 7 schools. This Liaison will partner with the principal, vice principal, social worker, psychologist, and other school personnel to identify and support students struggling with consistent attendance issues. Supports may include*

transportation assistance, housing and utility support, health and mental health services, clothing, nutritional support and child care assistance. Each Liaison will serve 50 families. We anticipate assisting 1,050 families over a three-year period.

4) Diaper distribution for Temporary Assistance Families - DSS-ES will work with the Diaper Bank of Central New York to procure diapers and Early Childhood Alliance to distribute them. Households with children ages 0 to 3 will receive free diapers. For low-income families that have very limited resources and may have to weigh purchasing diapers versus other necessities such as clothing or food. It is well documented that without an adequate supply of diapers, children are at risk of developing health issues such as diaper rash and infections. Research has shown, however, that an inability to provide necessities for one's child is particularly frustrating and pernicious to the wellbeing of parents. We anticipate serving 1,995 children over a three-year period.

Funding Source: *NYS Office of Temporary and Disability Assistance (OTDA). TANF funds.*

Budget: *\$12,250,000*

- Governor's budget this year included money for Erie (Buffalo), Monroe (Rochester) and Onondaga (Syracuse)
- State has parameters on how counties can spend the money, and a plan has to be approved by the state
 - Money to be spent on children & families in city of Syracuse who are on, or eligible for, Temporary Assistance
- Submitted 1st plan in summer; have been in discussions with the OTDA, then moved to Governor's office for approval
- Onondaga County is the first county to get approval on a plan
- 4 pieces approved by NYS (over 3 years):
 - Expansion of 2Gen work - \$4.6M
 - i.e. If person is on their mother's TA case, and the mother was on her mother's
 - Idea is to get out of generational poverty
 - Part of the County Executive's PIE platform
 - Housing & Rents - \$4.2M
 - For first time, Onondaga County is housing families in hotels due to eviction, no suitable housing or shelters
 - Re-encourage landlords to work with county's clients to provide suitable housing
 - State approved partnership between the county and Housing Coalition, who will work as a "liaison" between landlords and tenants
 - This would be to solve tenant issues, keep people in housing, and expand pool of rental units available
 - Have ~80 families living in hotels
 - Chronic absenteeism (not unique to county) - \$1.2M
 - Was issue prior to pandemic, but since pandemic, it has exacerbated
 - Had promising project out of McKinley-Brighton Elementary School that went away with pandemic
 - This re-establishes program in 7 city elementary schools
 - Goal to tackle the family issues preventing kids from being in school on a regular basis
 - Diaper Bank - \$1.3M
 - Biggest mental health stressor is not having money for diapers
 - Working with Diaper Bank and Early Childhood Alliance who will do distribution
 - Bank can purchase diapers at reduced cost
 - Will get diapers out to those that need it

Questions/Comments from the committee:

- How long will 2Gen last?
 - County money invested, local county dollars invested and use money from state and fed
 - This expands an already existing program
 - 2Gen is in county budget, and once in budget, it has a good chance of staying
 - Have done proof of concept and it is fairly unique across USA
 - Takes holistic approach; takes case management to move people from being on public benefits to workforce
- Is the age limit starting at 25 or below?
 - This will expand to under 35

- Who will be a liaison for inadequate housing?
 - County does not have code enforcement; work with city's Code Enforcement
 - Part of county system to see properties that have lead hazard problems or other code violations
 - If house is considered unfit, county does not send rent
- Does the county have a list of landlords that have had inadequate housing in the past?
 - County cannot tell people where to live
 - Have list of top code violators
 - i.e. if family chooses to live in a residence, they can; county can say it will not be viable, and payment will not come through until they reach certain level for violations
 - Relationship helps county to dissuade people from living in those properties
- Does the county look at the city's rental registry? Do not want to have taxpayer money going to places like that
 - County does all it can to dissuade people, but people have choice
- Does it come down to the tenant to find a place that is viable?
- When people move in an emergency, they are likely to move into something terrible
 - Seeing now that the county has families in hotels until suitable housing is to be found
 - Huge numbers of apartments have been taken offline
 - Vincent Apartments is coming back online this month
 - Hopefully those will be upgraded, more suitable and have more security
 - Hopeful to work with those landlords and rehouse people into appropriate housing
- Are 80 families in hotels currently?
 - Yes; never had this until after pandemic
- Is the reason for the families in hotels due to Vincent and Skyline apartments?
 - Vincent and Skyline and large housing developments being taken offline – yes
 - Another reason is the imbalance for what TA is willing to pay for family to live and the amount of rent
 - Rents have gone up 35% over last year; huge factor for clients and affordability of any unit
- It would seem that the hotel would be more money for the county
 - For families, county gets 100% reimbursement from federal government; no local dollars
 - Single male or female not the same
 - County would prefer no families are in hotels; not suitable place to raise a children
- Families have a choice, so can the family stay in a hotel if they choose to?
 - No, have housing re-locators working with them, but finding location is difficult
 - Down to moms and dads with large amounts of children
 - Good success with families of 1 or 2 kids; more difficult for larger families
 - Working with landlords that have multi-bedroom units for families
- If there was a family with 7 children at a hotel, the Vincent and Skyline will not help
 - No; it will help with ones and twos, as well as typical residents in shelters, to move to permanent housing
- Not anticipating changing the budget for 2Gen; committed to supporting it
- How much funding does the 10 additional staff represent (\$4.6M)?
 - There are stipends
 - Genesis of this is out of The Aspen Institute – adopted lot of their protocols for this
 - As participants in 2Gen meet certain milestones, there are stipends and rewards for (i.e.) earning GED
 - Includes stipends, but largely staff doing case management
 - NYS is attempting to have a research component with all projects approved
 - County has been using Syracuse University since inception for proof of concept
 - NYS wants to see what works; some atypical when thinking of anti-poverty and chronic absenteeism
 - i.e. If child not going to school, parent not able to go to work; links across the board

- Will be interesting to see what they think works as they follow it along the 3 years
- County has seen great results for 2Gen (DSS Commissioner in NYC currently talking about 2Gen work)
- Poverty knows no geographic or municipal boundaries; this leaves out a great share of people that have special needs
 - When legislation originally came down, the Governor’s office said money would go to cities of Buffalo, Rochester and Syracuse
 - Onondaga, Monroe and Erie responded saying there is nothing in city charters having to do with human services
 - If money had been directed to cities, these programs (that get to heart of issue) would have been impossible to enact
 - 2Gen does not turn anyone away; if families in any district are struggling with generational poverty, send to county
 - Diaper program does not have geographical boundaries; if someone is going, they will get diapers
 - This allows expansion of footprint

A motion was made by Mr. Meaker, seconded by Ms. Harvey, to approve this item. Passed unanimously; MOTION CARRIED.

2. HEALTH: Dr. Kathryn Anderson, Health Commissioner; Kristina Schoonmaker, WIC Program Coordinator
a. INFORMATIONAL: WIC Update

- Women, Infants and Children – managed through NYS Department of Health
- Providing access to nutritional supplements, nutrition education and breast feeding support
- Work with women who are pregnant, post-partum, and those with infants up to age 5
- Have about 28 FTEs (fulltime equivalent) working on WIC; budget is ~\$2M
- Physical location – Gifford Street; high traffic and easily accessible area
- Do pop-up sites and have partnerships with Interfaith Works and Catholic Charities
- Onondaga County WIC program stands out in state as one of few meeting target population for those being served
- Medicaid eligible individuals – largely income driven
- Target population to serve (set by federal government) is about 50% of that population
- Consistently Onondaga County is over 100% or more; currently 105%
- WIC team is remarkable in actively raising awareness and enrolling people into WIC
- Not comprising service provided, despite fact of going past target set



The Special Supplemental Nutrition Program for Women, Infants and Children (WIC Program)

What is WIC? WIC was established as a permanent program in 1974 to safeguard the health of low-income women, infants, and children up to age 5 who are at nutritional risk. This mission is carried out by providing nutritious foods to supplement diets; nutrition education (including breastfeeding promotion and support); and referrals to health and other social services. Find out more: <http://www.fns.usda.gov/wic/about-wic-wic-glance>

WIC Since 1974
The Foundation of Healthy Families

Where is WIC available?

The program is available in all 50 States, 33 Indian Tribal Organizations, American Samoa, District of Columbia, Guam, Commonwealth of the Northern Mariana Islands, Puerto Rico, and the Virgin Islands. While funded through grants from the Federal Government, WIC is administered by 89 State agencies, with services provided at a variety of clinic locations including, but not limited to, county health departments, hospitals, schools, and Indian Health Service facilities. To find the WIC offices serving your area go to: <http://www.fns.usda.gov/wic/contacts>

What food benefits do WIC participants receive?

The foods provided through the WIC Program are designed to supplement participants' diets with specific nutrients. WIC authorized foods include infant cereal, baby foods, iron-fortified adult cereal, fruits and vegetables, vitamin C-rich fruit or vegetable juice, eggs, milk, cheese, yogurt, soy-based beverages, tofu, peanut butter, dried and canned beans/peas, canned fish, whole wheat bread and other whole-grain options. For infants of women who do not fully breastfeed, WIC provides iron-fortified infant formula. Spe-

cial infant formulas and medical foods may also be provided if medically indicated. Learn more about food benefits here: <http://www.fns.usda.gov/wic/wic-food-packages>

Program benefits include more than food.

WIC benefits are not limited only to food. Participants have access to a number of resources, including health screening, nutrition and breastfeeding counseling, immunization screening and referral, substance abuse referral, and more. Find out more: <http://www.fns.usda.gov/wic/wic-benefits-and-services>

Am I eligible?

Pregnant, postpartum, and breastfeeding women, infants, and children up to age 5 who meet certain requirements are eligible. These requirements include income eligibility and State residency. Additionally, the applicant must be individually determined to be at "nutrition risk" by a health professional or a trained health official. To find out if you might be income eligible for WIC benefits go to: <http://wic.fns.usda.gov/wps/pages/start.jsf>



How WIC Helps

WIC supplemental foods have shown to provide wide-ranging benefits. They include longer, safer pregnancies, with fewer premature births and infant deaths; improved dietary outcomes for infants and children; improved maternal health; and improved performance at school, among others. In addition to health benefits, WIC participants showed significant savings in healthcare costs when compared to non-participants. Learn more about how WIC helps: <http://www.fns.usda.gov/wic/about-wic-how-wic-helps>

What is "nutrition risk" and why is it important?

Two major types of nutrition risk are recognized for WIC eligibility: medically-based risks such as anemia, underweight, history of pregnancy complications, or poor pregnancy outcomes; and dietary risks, such as inappropriate nutrition/feeding practices or failure to meet the current Dietary Guidelines for Americans. Women, infants, and children at nutrition risk have much greater risk of experiencing health problems. Learn more about nutrition risk: <http://www.fns.usda.gov/wic/wic-eligibility-requirements>

I'm eligible, what do I do next?

Those who are interested in applying for benefits should contact their State agency to request information on where to schedule an appointment. Applicants will be advised on what to bring to the appointment in order to verify eligibility. Contact your State agency here: <http://www.fns.usda.gov/wic/contacts/>

HOW WIC HELPS NEW YORK



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State WIC Director

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Mission of WIC

Assuring healthy pregnancies, birth outcomes, growth and development for mothers, babies, and young children to age 5 who are at nutritional risk. Providing nutritious supplemental foods, breastfeeding promotion and support, education on healthy eating, and referrals to healthcare and critical social services.



WHO PARTICIPATES IN WIC IN NEW YORK?

387,415
WIC PARTICIPANTS

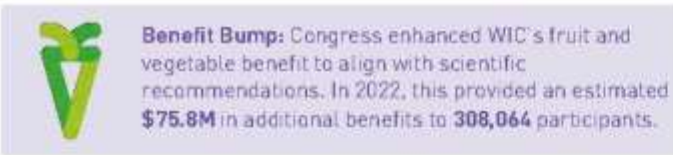
Pregnant women.....	27,686
Breastfeeding women.....	39,994
Postpartum women.....	16,078
Infants.....	83,859
Children.....	219,798

BREASTFEEDING IN WIC

New York WIC breastfeeding initiation rates increased by **10 percent** between 2010 and 2020.



Among WIC infants who initiated breastfeeding in New York in 2020, **25 percent** continued breastfeeding at 6 months.



CHILDHOOD OBESITY IN WIC IN NEW YORK

The obesity rate among WIC toddlers in New York decreased **16 percent** between 2010 and 2020.

Childhood obesity rate, WIC toddlers, 2020..... **14%**

MORTALITY AND BIRTH OUTCOMES IN NEW YORK

Maternal mortality per 100,000 births, 2016-2020.....	17.7
Infant mortality per 1,000 live births, 2020.....	4.1
Preterm birth rate, 2020.....	9%

NEW YORK WIC PARTICIPANT CHARACTERISTICS

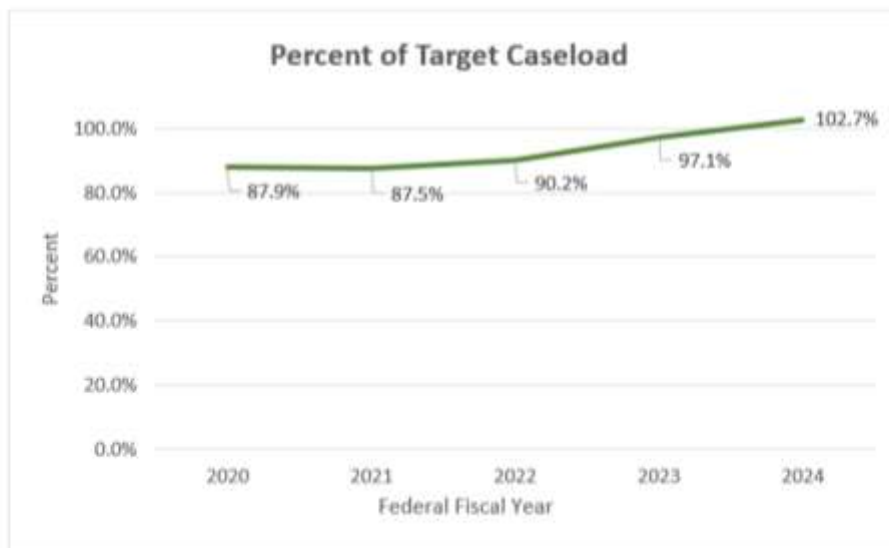
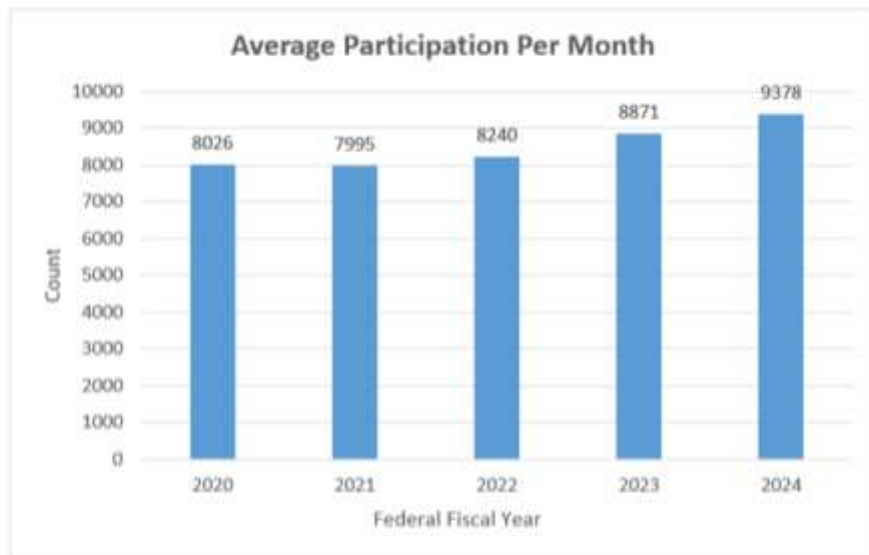
\$21,535	77%	\$65.05
AVERAGE FAMILY INCOME	RECEIVED MEDICAID	AVERAGE MONTHLY FOOD COST IN FY 2022

HOW WIC SUPPORTED THE NEW YORK ECONOMY IN FY 2022

\$302.4M	\$89.3M	\$114.4M
TO SPEND AT FOOD RETAILERS	FORMULA REBATES RECEIVED	NUTRITION, BREASTFEEDING SERVICES & ADMIN

Sources: WIC eligible individuals participating from USDA WIC Eligibility Estimates report for 2020 (<https://www.fns.usda.gov/wic/eligibility-and-program-reach-estimates-2020>); WIC participants from USDA WIC Data Tables for fiscal year (FY) 2022 (<https://www.fns.usda.gov/pd/wic-program>) as of January 30, 2023; WIC participant characteristics for 2020 and WIC breastfeeding and rates for years displayed from USDA WIC Participant and Program Characteristics reports; WIC formula facts derived from USDA Infant Formula Contracts in WIC (<https://www.fns.usda.gov/wic/requirements-infant-formula-contracts/>) and USDA WIC Data Tables for FY 2022; percent of market share calculated as number of partially or fully breastfed WIC infants served by agencies with the formula company contract divided by the total number of partially or fully breastfed WIC infants; WIC benefit bumps derived from increase in CVB benefits and USDA WIC Data Tables for 2022; CVB increase calculated as sum of dollar increase in CVB for each participant category multiplied by caseload in each participant category, assuming Oct. 2022 caseload for Nov. 2022 and Dec. 2022 as data were not available at time of publication; Mortality and birth outcomes from CDC WONDER (<https://wonder.cdc.gov/>); WIC costs from USDA WIC Data Tables for FY 2022; Obesity outcomes from CDC (<https://www.cdc.gov/obesity/data/obesity-among-WIC-enrolled-young-children.html>).

Onondaga County WIC Program Participants Served



Target caseload is 9,135 participants per month

Questions/Comments from the committee:

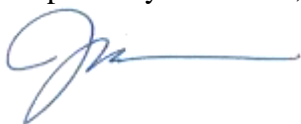
- Is there no more testing for lead at WIC?
 - Historically lead testing took place in WIC and was seemingly well attended
 - WIC is an incredible program and is protected with what can happen in WIC facilities
 - Years ago it was decided it was not possible for the Health Department to operate within WIC
 - Since then, Health is now a routine presence, and they use the lead van to provide testing
- Is there a list of locations? Used to be in Jordan Elbridge area, but no longer there
 - 2 permanent locations in Syracuse (Gifford Street) and Liverpool (Bayberry Plaza)
 - Temporary sites in Camillus, North Side of Syracuse and Onondaga Nation
 - Pop-up sites at Interfaith Works and Catholic Charities
 - NYS WIC allows more flexibility for WIC appointments

- People used to have to come in person, but WIC now able to give option for in person or virtual appointments
- Helped expand participation and reach – shifted how they engage with people, as vast majority engage remotely
- Value in seeing client in person, as they track growth, weight and height, but people prefer virtual
- Do people have to have appointments for pop-up sites?
 - Do take appointments, but even without an appointment, people can pop in
 - WIC advertises the pop-up sites
 - Welcome people to come to other sites for walk-in appointments; try to be accommodating
- For some, this is the only medical care they receive
 - WIC asks about healthcare providers when screening
 - Even over the phone, WIC offers full assessment
 - Quality is not compromised
- Does WIC do home visits?
 - Do not, but work closely and refer to Healthy Families home visiting program
 - Phone appointments have helped for those unable to participate in person previously
- What happens when a child tests positive for lead?
 - Do look up lead levels for children, and talk to parents; also provide nutrition education related to it
 - Ask parents for consent to reach out to county lead program to make sure they have case manager
 - If child has elevated blood level, get referred to Case Management Program in Health Department
 - Work with child and parent that prompts home inspections for lead hazards, following up on lead level, and treatment if needed
- Can the Legislature get a list of where pop-up sites will be and when?
 - Make plans typically 2-4 weeks in advance; can get information to the Legislature
- Is the name WIC through the federal government?
 - Yes
- Men can utilize the WIC program, as it can be a great help, but based on the name, men do not realize that
- Is there any marketing going on to encourage single dads to use the program?
 - Yes, NYSDOH and Hunger Solutions have an outreach campaign focusing on people who are not aware they can apply for WIC
 - County does outreach on social media campaigns, public health detailing and outreach community events
 - On all websites
- Is there a challenge getting people to get on WIC outside of the city?
 - Do not see one based on numbers
 - With technology, people can ask about WIC using:
 - Website
 - NYS WIC has chat bot
 - Calling
 - Healthcare provider referrals – part of healthcare provider screenings for food and security
 - Resettlement agencies been very active
- How does it work? Do people still get coupons?
 - No; back in October 2018 transitioned to debit card – WIC loads benefits on card, then client takes the card to store
 - More convenient, because people can buy what is needed at the time and it is more discreet
 - There is an app to go with card
 - Card will distinguish what people can buy (i.e. gallon of milk)
- Is there any concern with the ceiling effect with target population in the county?
 - Have talked a lot about it; 9,600 people currently being served

- Continue to serve everyone they can without compromising quality
- If reached a point where budget or staff were strained beyond what they can support, have looked into NYS options with referring to other counties (with their permission and partnership) that are not at 100%
- Virtual makes that more of an option
- Most counties are not even hitting the target of 50%, correct?
 - Yes; a testament to the team and the need they are addressing
- Is it possible to take an application for the Dolly Parton (Imagination Library) program when seeing these people to get them signed up?
 - Typically staff does during assessment; WIC is a referral
 - Provide it to people and promote it; even some staff have signed up
 - WIC an incredible partner for a wide variety of issues

The meeting was adjourned at 1:39 p.m.

Respectfully submitted,



JAMIE McNAMARA, Clerk
Onondaga County Legislature

ATTENDANCE

COMMITTEE: **HEALTH & HUMAN SERVICES COMMITTEE**

DATE: **DECEMBER 11, 2024**

NAME (Please Print)	DEPARTMENT/AGENCY
Sarah Easterly	DSS-ES
Luis Escobedo	DSS-ES
Jessica Allen	Fin Ops
Tyler Woods	Comp
Jordan Antonucci-Brown	Comp
Darcie Lesniak	Leg
Kristina Schoonmaker	WIC
Kate Anderson	OCHD
Jim Beebe	Leg.
Joe Frateschi	Leg.
Ben Yaws	Law
Ann Rooney	CE.