



**Essential One-Time Purchase Needs  
Forensic Laboratories**

**Total Request:** **\$94,000**

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**Forensic File Server:** **\$94,000**

The current forensic file server is integral to the operations of the digital evidence section that examines electronic media (e.g., hard drives, flash memory, digital cameras) for the purposes of acquiring, retrieving, preserving, and presenting relevant data that has been electronically processed and stored on the item. The section also analyzes portable mobile devices including cell phones and tablets and stores all digital information. The integrity of the operation is predicated on having an appropriate file server that is robust enough to store the vast quantities of acquired data as well as to retrieve requisite information timely to meet all discovery laws and criminal investigation needs.

The current vendor will continue to supply the Center for Forensic Sciences' Laboratories' Digital Evidence Section (DES) with a Forensic Recovery of Evidence Data Center (FREDC). The FREDC is used by the Lab's DES to store evidentiary digital materials that may be essential in the court of law and are provided to law enforcement agencies to aid in criminal investigations. The FREDC is also used to store other electronic information that is essential to operations in the DES. Without a functioning data center/server, the DES would not be able to continue to provide forensic digital evidence services to the criminal justice community. As a result of the server being an essential tool for operations in the DES, it has been operating 24 hours a day, 7 days a week, which creates a lot of wear and tear on the server and its components.

Digital evidence has been experiencing frequent issues with the backup tape component of the server, which has required analysts to take time away from casework to perform troubleshooting and repairs. The current system stalls and makes it nearly impossible to add more data in or take data out.

Processing of casework cannot proceed without the FREDC. Through recent discussions with the vendor, Digital Intelligence, it has been determined that the current server is reaching the end of its life expectancy and the issues evidenced as "stalling" are likely precursors to issues that will impact its functionality. Issues that impact the server's functionality will disrupt the day-to-day operations in the DES. The worst-case scenario will cause data loss due to server failure. Quite simply, if the server is down, work stops.



**exero-dr**  
rapidly evident

**UNCOVER FORENSIC RADIOLOGY**

Full-body, high-speed digital radiology solution for forensic pathology centres.

The exero-dr assists the forensic pathologist in autopsy examinations by reducing the time taken to examine a body. Rapid localisation of foreign bodies (such as bullets) in multiple views can be beneficial in criminal examinations. Fast, high quality imaging may be especially useful in the case of religious groups that require expedited burial and mass fatality situations. The full-body, low-radiation format makes Lodox imaging safer and easier for staff and could improve the workflow in busy forensic pathology laboratories. Lodox has proven to be invaluable in Forensic Medicine.

**FORENSIC APPLICATIONS**

- Skeletal and poly-trauma
- Ballistic injuries and projectiles
- Hazardous objects
- Victim identification
- Prostheses
- Presence and positioning of medical devices
- Natural pathology
- Sudden unexpected death of an infant
- Child abuse
- Burnt and decomposed bodies
- Air embolism
- Diseases such as tuberculosis
- Medico-legal death investigations

**lodox**  
seeing them through innovative solutions

**FULL BODY**

The exero-dr full-body images present a comprehensive clinical picture, reducing guesswork, offering peace of mind, and better guiding cause-of-death determination. The full-body image replaces a number of smaller views, making it easier to locate and identify injuries, foreign bodies and identifying features. A pathologist's clinical judgement and forensic acumen is supplemented, making the exero-dr system an invaluable resource.



**HIGH SPEED**

Throughput in a facility is increased by reducing the time required for full body examination.<sup>12</sup> Use of the Lodox reduces the total time required for full body coverage by approximately 87% (translating to 7 Lodox full body examinations vs. 1 on conventional radiography).<sup>13</sup> Facility workflow is further improved by targeting or, in certain cases, obviating the need for an autopsy. This makes exero-dr especially useful in mass casualty situations.

**EASE OF USE**

Dramatically reduced X-ray scatter makes Lodox technology safer for operation and surrounding pathology staff.<sup>14</sup> Straightforward operation makes Lodox easy for staff to use, with minimal specialized training or effort required. Flexible scan size and automated rotation of the scanning arm means less onerous manipulation of bodies for staff.

**REFERENCES:**

1. Knochel KL, Blum G, Bewick EF. Lodox Strasser proven to be invaluable in forensic medicine. *J Forensic Med* 2008; 16(7):593-594
2. Douglas TS, Ferrero-Mur R, Kawano K, Agnew Y, Liebering L. histological findings at a South African forensic pathology laboratory in cases of sudden unexpected death in infants. *S Afr J Radiol* 2012; 16(3):4-6
3. Doyle S, Wagner A, Benzelok JA, Jager V, Ezzabi S, Bond HM, Zimmermann H, Gschwendtner JK. Could full-body digital X-ray (LODOX Strasser) screening in trauma challenge conventional radiography? *J Trauma* 2009; 16(2):418-422
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**FingerSCAN S<sup>3</sup>**  
for MEDICAL EXAMINERS & CORONERS



Now Medical Examiners & Coroners have an easier way to collect and share high quality fingerprint images from decedents!

It's no secret... Capturing fingerprints from decedents the old fashion way (ink and card) is extremely difficult, messy, costly and time consuming for medical examiners and coroners. FingerSCAN S3 eliminates these problems in the following ways:

**System Features**

- **Standards Compliant.** Meets FBI standards for fingerprint image quality. Mobile ID IQS FAP 45 PIV Appendix F rated.
- **Android Compatible.** FingerSCAN S3 and Watson Mini have been successfully tested to work with Samsung Galaxy S3/S4/S5, ASUS NEXUS 7 Tablet and LG V700 10" Tablet.
- **Small Form Factor.** The scanner size (2.5" x 2.4" x .5") with 5 foot cable make this the perfect scanner to use with rigid fingers from subjects located on an exam room table or on the ground in remote field locations.
- **Multi-Purpose Data Fields.** Three data fields can be used to capture demographic/client information.
- **WiFi/FTP Capable.** Standard method for sharing files is via email, but the app can be made to share info via FTP submission if required.
- **Customizable.** We can customize the app with your brand and data field requirements as needed. Contact us for a price quote.

- **No Mess.** FingerSCAN S3 requires no ink and card because the fingerprints are captured electronically.
- **Better Images.** Due to the rigidity of decedent fingers, the potential for smearing images when using ink and card is high. Not so with electronic fingerprinting. FingerSCAN S3 works with the Watson Mini compact fingerprint scanner. Furthermore, fingers can be scanned and rescanned if the image captured on the first try is not acceptable. (Note: Will not work well with mummified and degloved fingers.)
- **Lower Cost.** Since it is possible to scan and rescans fingers relatively quickly using the electronic method and no hard cards are needed, there is no cost associated with cards.
- **Faster Processing Time.** FingerSCAN S3 offers an efficient workflow for capturing up to ten fingerprint images that can be sent via email in real-time to a remote identification unit for identification purposes. Results can come back in a matter of minutes/hours versus days/weeks using the ink card method.

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info@wovois.com

Wovo Identity Solutions specializes in biometric hardware and software technology and offers expert guidance, sales, support, development and training. WE LOVE OUR CUSTOMERS!

**Questions/Comments from committee:**

- With amount of work done for our county and other counties, this is reasonable dead care; have seen all that is needed in that department
  - Some of the cost will be offset by revenue as it will benefit Oneida, i.e. radiography equipment
- Where is the money coming from for 2022 transfer resolution?
  - Money coming from 2022 budget and putting into 2023 grant fund
- “Medical payment by State MMIS”, what account is that?
  - Medicaid

**Comments from Mr. Morgan:**

- 2022 financials will close in the black again this year
- Similar to last year, departments were scanned for items that the budget cycle was not able to deliver
- Undelivered budget items from Health, Social Services, Emergency Management, and Planning requested use of known surplus to be reviewed with Executive’s Office
  - Most or all items will be taken from Medicaid account as a result of the Federal Health Emergency
  - Did not anticipate the Federal Health Emergency would extend throughout the entire year of 2022, where surplus funds came from
  - Enhanced federal reimbursement for Medicaid is tied to the declaration of the Federal Health Emergency; ending in May 2023

**Questions/Comments from committee:**

- What is being done with old x-ray machine, sometimes there could be bonuses if donated someplace?
  - Beyond use; no one else will be able to use it
  - Vendor is going to take out equipment and install
  - Includes training, a standard cost, not an add on
  - Forensics file server is a 432 terabyte hard drive system, it is going up in terabyte storage
  - Maxing it out right now; 10 years old
- What is the time line?
  - Have a vendor; go through purchasing, have to use FREDC (Forensic Recovery Evidence Data Center)
- Is this something that syncs with the District Attorney’s computers? (i.e. inputting information, specific to this department or can it be shared)
  - Not shared, but can be submitted to DA’s office for cases
  - NYS discovery has made it another added layer to get information in/out
- What is the timeline after March Legislative Session for approval?
  - Keeping vendors on standby for final approval; will not take much time
- Are machines readily available?
  - Yes, federal government supports this;
    - Hoping to have installed within two months; includes Lodox and finger printing

## Essential One-Time Purchase Needs Environmental Health

**Total Request:**

**\$33,700**

### **Pesticide Sprayers (Mosquito Program):**

These sprayers are attached to pickup trucks and are used to spray adulticide in areas where EEE virus is found either in mosquitoes or horses. In the past they have been used to spray adulticide in neighborhoods, along roadsides, and on the NYS Fairgrounds property. We currently have two mosquito sprayers that are over 30 years old. Clarke calibrates our sprayers each year to ensure that they are spraying the correct droplet size. The sprayers are very rough starting and could easily be inoperable at any time. There are no replacement parts available for these models anymore. The consequences of not planning for replacement could result in the County not being prepared to respond to mosquito-borne disease (WNV, EEEV) detected in our community.

## GRIZZLY

The GRIZZLY cold aerosol ULV generator sets the standard for professional equipment. An 18 HP engine, combined with the powerful features you demand makes the GRIZZLY the ideal choice for the big, tough jobs.

Competitively priced, the Grizzly is the tool professionals count on to tackle a wide variety of needs. Top performance and a competitive price combine to make it a perfect choice for professionals in mosquito control, public health and odor control.

### DISCOVER THE CLARKE ADVANTAGE TODAY:

- Unmatched craftsmanship
- Technical support hotline
- Easy parts ordering
- Strictest quality control
- User friendly operation
- Easy installation
- Low maintenance
- Products made in the USA

### SPECIFICATIONS

Engine	18 HP (694cc)
Blower	350 CFM @ 10 P.S.I.
Weight	475 lbs. (216 kg.)
Nozzle	IHPLAT
Dimensions	54"Lx42"Wx42"H (121.9cmLx99cmWx91.4cmH)
Flow Rate	ULV 18 oz./min. (532ml)
Formulation Tank	15 gal. (56.7 liter)
Flush Tank	1 gal. (3.8 liter)
Fuel Tank	10.25 gal. (38.8 liter)



# GRIZZLY

## STANDARD POWER FEATURES

The GRIZZLY is a great choice for applying insecticides, fungicides and odor control products. It features application rates up to 18 oz./minute and all the standard features professionals demand:



## FEATURES:

- High Performance Laminar Air Flow nozzle swivels 360° horizontally and 200° vertically
- Rotary positive displacement blower 350 CFM @ 10 P.S.I.
- Glycerin filled pressure gauge
- Meets all label requirements for ground ULV products, including malathion at 20 mph rate
- Remote cab flow control featuring the SmartFlow
- Non-shear anti-vibration mounts
- FMI electric lab pump, with waterproof, lockable enclosure
- Electric start
- Flush system with 1 gallon solution tank
- Lockable pour-clean 15 gallon poly chemical tank
- 18 HP OHV Briggs & Stratton engine with automotive type lubrication with spin-on-oil filter
- All steel construction with Z-base rails for easier vehicle mounting
- 10.25 gallon aluminum gas tank (EPA approved)
- Remote engine start/stop/choke/flush
- Automatic low pressure cutoff
- Engine hour meter and tachometer
- Chemical flow hour meter
- Features Automatic Engine Idle Back
- Two stage powder coat finish on all frame parts
- SmartFlow -The SmartFlow system offers an unprecedented level of accuracy and precision and can be used in tandem with GPS for variable flow. With one-step calibration and three preprogrammed rates, you have the ability to adapt quickly to varying field conditions.
- The Grizzly meets 2013 U.S. EPA Phase III exhaust and evaporative emission requirements.

## Pesticide Sprayers

- Sprays around swamp
- Two sprayers, truck mounted
- 25+ years old; functioning but can no longer get parts
- Needing to replace them both; cannot be sold

### Essential Need Tick Surveillance

**Total Request:** **\$50,000**

**Tick Surveillance:** **\$50,000**

Tickborne diseases have become increasingly prevalent across the nation and NYS and constitute a growing public health concern. Efforts to prevent and diagnose tickborne disease is significantly aided by access to current and accurate information on the prevalence and type of pathogens found at the local level.

Dr. Saravanan Thangamani at SUNY Upstate has been conducting tick surveillance using a Citizen Science approach (residents mail in ticks found on themselves or their pets), where the ticks are identified and tested for any diseases. Since 2019, they have received ~3,000 ticks from Onondaga County, of which 36% carried a pathogen that could cause human disease. We know from his data that Lyme disease and other tickborne diseases are increasing in our area, representing a significant public health threat to Onondaga County.

The only other testing source, NYSDOH, performs “surveillance” for only 50 ticks per year in Onondaga County, which is insufficient to have our finger on the pulse of these emerging pathogens. OCHD seeks support for continued local testing in 2023 to provide invaluable and irreplaceable data.

Further detail on the program can be found here: [Upstate Tick Testing Laboratory \(nyticks.org\)](http://nyticks.org)

**Tick surveillance**

- If a person has a tick with bulls eye, take it out the same way, talk to doctor, and consider antibiotics
- Knowing what pathogens ticks are carrying is increasingly important
- State tests 30 ticks from Onondaga County
  - Dr. Saravanan Thangamani (SUNY Upstate) tests thousands of ticks from Onondaga County per year
- Testing is imperative to local community; seeking continued support for local tick surveillance

**Request: Onondaga County Health Department to report on tick data collected in 2022 at a later H&HS Committee Meeting**

- Dr. Anderson is the expert and can provide this

**Questions/Comments from committee:**

- How did the department arrive at \$50,000?
  - Needed for testing done locally
- Donated to Upstate?
  - Contracted to support the testing
- As an outdoor enthusiastic this is great

***A motion was made by Dr. Chase, seconded by Ms. Kuhn to approve this item. Passed unanimously; MOTION CARRIED***

**2. DEPARTMENT OF SOCIAL SERVICES – ECONOMIC SECURITY: Sara Merrick, Commissioner**  
**a. 2022 Transfer Resolution**

One transfer – 2 components:

**(1) Fully convert phone system to Amazon Web Services (AWS)**

- 470 employees when fully staffed
- Currently using AWS in SNAP, successfully used throughout COVID; needed technology for people to work remotely as well as working on site
- Product is more superior than current Cisco product
- Converting entire department to AWS will allow department to expand number of calls centers in other program areas as well as allow staff to reliably transfer calls between areas
- Being on two different systems, is not good customer service or helpful to staff
- AWS has better reporting features
- Supervisors can monitor, listen and jump on calls if needed; answer questions better than current staff person; temper down the tone of the conversation
- With these dollars – can move whole department to this system, end contract with Cisco
- Save \$160,000/year – savings would go to ongoing operation next year; have to pay for actual calls with Amazon
- Unlike other phone systems where one has to pay for a service, does not matter how many calls one makes
- Better buy; once system is in place, Amazon only charges for calls made, saving down the road; a better system
- Ability for staff to work remotely; and/or better for on site

**(2) Replace 250 computers**

- 10 years ago the Department of Social Services was broken up into 4 different areas of the county
  - DSS, Fiscal Ops, Social Services, and Adult Long Term Care
  - Social Services district staff (~1,000) must use State Information System (SIS) - state computers to access all state programs
  - State Information Technology Systems (ITS) will not support computers older than 4 years
  - Need to find a way to replenish computers regularly to interface and use state system/platform or will be completely shut down
- Important to get 250 old computers that sunset in May bought and deployed in department to meet first deadline

**Question/Comments from committee:**

- Is Amazon something that all departments should be using?
  - Health Department is different, there is high call volume, call centers
    - SNAP alone deals with 15-2,000 calls per day, not sure of other departments
    - 911 is different, has its own platform
  - Currently 70,000 people getting SNAP benefits
  - Allows department to take workforce, supervisors will monitor call volumes and be able to deploy more people in call center
  - Technology will help maximize staffing in SNAP department
- Does Health Department have personnel assigned to answer calls?
  - Yes, a small call center of people that answer calls
    - People that deal with incoming applications and have to do eligibility
    - Other side deals with recertification's
  - If needed, bring others into the call center to deal with the volume of calls
  - Art/Science but need the technology needed for this
  - Fluctuation on different days; 1<sup>st</sup> and 3<sup>rd</sup> week of month is high volume; there are call patterns
- Beyond some of the micro fluctuations within a month, with new pay per call system under Amazon what is budgetary impacts of a high vs. low call volume per year, something needed to budget for?
  - \$160,000 max \$200,000, will see once fully operational
  - In that window where Cisco costs will save annually will cover vast majority of Amazon calls; it may run higher
- Now that COVID is winding down, how are the numbers for people applying for SNAP, Medicaid or any benefits?
  - Having COVID over did not make a difference
- Have you seen more over the phone verses than in person?
- Some procedures do not require in person, can you explain?
  - Yes, COVID allowed us to do all by phone, state has allowed us to continue applications and recertification's via phone
  - Phone is #1 vehicle to do business; encourage people not to come to 2<sup>nd</sup> floor; still seeing uptick of people in person
  - Starting this year there has been a change, seeing 200+ a day, sometimes 800 on the 2<sup>nd</sup> floor; depends on month, time of month; some new folks, some struggling with certification
- Any thought of having a satellite office so people from the northern suburbs do not have to come downtown, find a place to park, etc.?
  - That would be a county expense that would need to be entertained on whether or not it is worth it
  - Currently better to have all staff centralized in two buildings
  - Operationally is better for consumers, maybe not the best option
  - Being on a state network, not implementing or installing hard fiber optics anymore
  - Civic Center and County Office building are one of the few two buildings that have the physical hard wiring to connect into the state system
  - Unless technology changes, it would be very hard to have a satellite office
- In looking at kiosks, the state would not allow that without the technology; paperwork could be taken in to bring back to the office to process
  - State working on a replacement for the Welfare Management System (WMS); built in late 60's early 70's, program is called Cobalt (old, on verge of extinction)
  - State looking to replace platform with new system to allow more flexibility i.e. remote operations, but until then locked into old technology
  - County will never not be integrated with the state
- State system vs county system - Is there any plan to repurpose 250 computers that are sun setting in May for county purposes?
  - Can talk to systems director and or county IT, not sure



**Comment from Mr. Morgan**

- Yes, would look at machines to see if can be redeployed
- In the 2023 budget, the Legislature approved half million for replacement plan for county machines; going forward this year

***A motion was made by Ms. Gunnip, seconded by Ms. Kuhn to approve this item. Passed unanimously; MOTION CARRIED***

**b. Informational: 2GEN – Sarah Merrick, Commissioner****2Gen Onondaga**

Onondaga County Department of Social Services – Economic Security

Poverty Reduction Pilot  
A Multigenerational Approach

J. Ryan McMahon II  
County Executive

Sarah Merrick  
Commissioner

Sarah Easterly  
2Gen Onondaga  
Director

Presentation to Onondaga County Health and Human Services Committee 2.21.23

**2Gen Onondaga – Overview**

**Transition** to working with the entire family unit, not just the individual applicant – let's work to end poverty for parents and their children! People do not live in silos. This is a comprehensive two-generational approach to helping TA families.

**Focus** on sustainable change, not compliance – shift focus - 5 areas of family wellbeing including Health & Wellbeing, Economic Assets, Social Capital, Early Childhood Education & Postsecondary Education and Employment (adapted from Ascend at the Aspen Institute). Also, let's engage non-custodial parents in new approach.

**Long Term Engagement** – aiming for a 2-to-3-year involvement period – allowing time for head of household to develop executive functioning skills, increase overall family health & wellbeing, and assist parents in entering and stabilizing a career pathway that will lead to economic mobility.

## County Leadership Support

- ☑ J. Ryan McMahon II – Onondaga County Executive fully supports this initiative.
  - Support existed prior to the COVID pandemic as part of his P.I.E. County-wide agenda
  - This support continued and grew deeper throughout the pandemic and to today
  - Monetary support created in the 2022 budget
- ☑ Onondaga County Legislature support as well
- ☑ Full County investment – \$1 Million (annual commitment moving forward)
- ☑ Additional supports from private foundations



What is happening with the investment?

- **Mentors (Social Workers)** – to provide intensive case management services (mobility mentoring and goal planning)
- **Earned incentives (EMPath)** for achieving goals
- **Financial Empowerment Counselor** – to provide support and guidance around money, banking, finances and budgeting
- **Benefits Cliff money** – to provide a SLOPE, not a cliff when parents start working and lose their TA benefit
- **Service Point** – a database to hold all case notes, data, records
- **Research** to support our work and efforts – Syracuse University Maxwell X Lab



## The Team

Creation of a new unit/team to provide intensive case management & mobility mentoring



- A dedicated Program Director
- Staff from Temporary Assistance Unit
  - Income Maintenance Staff
  - Employment Staff
- Child Support Staff – to engage non-custodial parents
  - Enforcement Officer
  - Parent Support Program – Center for Court Innovation
- 3 Mentors (Case Workers)
- Financial/Economic Support
  - 1 Financial Empowerment Counselor
- Also: Community Health Worker and Crouse Clinicians

## 2Gen Onondaga – Tools for Engagement

### Mobility Mentoring

(adapted from Economic Mobility Pathways- EMPath)

#### Essential Elements

- Coaching for Economic Mobility
  - Motivational Interviewing
  - Executive Function-Informed
  - Unconditional Positive Regard
  - Trauma-Informed
- Bridge to Self-Sufficiency
- Goal Setting
  - Moving out of crisis management to goal attainment
  - Setting SMART goals
- Recognition & Incentives
  - Give a clear sense of achievement
  - Build a sense of self-efficacy

## 2Gen Onondaga – Additional Tools

### Let's Engage the Non-Custodial Parents

- Ideas - fatherhood programs/parenting skills, right-size support orders, and find a career path

### Incentive Plan

- Comes from EMPath's design, but created for our program
- Initial meeting, initial bridge assessment
- Step 1, 2, 3
- Flexible incentive money
- Money for non-custodial parents also

### RSP – Rental Supplement Program

- Applied for and secured additional money specifically for these families

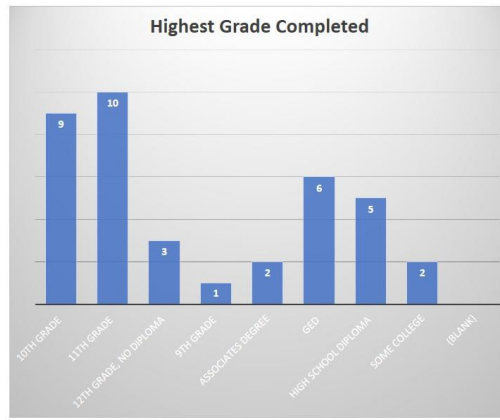
### Benefit Promise

- Cases close when excess income
- Stay open in 2Gen –providing continuous case management support and services as well as additional benefit cliff money

## Pilot Group Demographics

- Ages: Head of Households Range from 17 – 25 on Temporary Assistance; Children Range from Infants to 9 (271 children) – 153 Households
- Ethnicity: 44% African American, 20% Hispanic, 13% White, 23% Other
- Zip Codes: 13208, 13204, 13205, 13206, 13224
- Working with three cohorts for a total of 38 participants – Will have entire pilot group in program by mid-summer 2023.

The highest grade level completed



One Parent's Self Sufficiency Ratings – 3 different points in time (quarterly assessments)

Shelter/Housing	2	2	2
Employment	1	3	1
Income	1	2	1
Child Care	1	1	1
Children's Education	5	5	5
Adult Education	1	1	1
Mobility	3	2	2
Community Involvement	2	3	3
Parenting Skills	5	5	5
Mental Health	3	2	2
Substance Abuse	4	4	4
Health Care Coverage	4	5	5
Social Relations	2	3	2
Debt	2	5	5
Savings Account	1	1	2
Children's Physical Health	5	5	5
Children's Mental Health	3	3	3
Developmental Milestone Assessment	5	5	5
Child Care Attendance	null	null	null

Scale – 1 being lowest/not good & 5 being highest/great  
 Null – meaning Doesn't Apply at this time

## Debt Management

Medical debt – 7 people – average is \$1,914.38

Student loans – 5 people – average is \$5,330.00

Credit card – 4 people – average is \$2,159.50

Auto loan – 1 person – \$11,000

Other debt - 16 people – \$1,484.50 (this includes debt like rent, national grid, traffic tickets, etc.)

## 2Gen Onondaga Rental Supplement Program

### 23 2Gen Families are receiving this supplement

Most common payments are \$821.00 and \$1018.00 which are the amounts for the 85% Fair Market Rate for a 2 bedroom and 3 bedroom in Onondaga County.

### Of 23 helped relocate/stabilize housing for 6 families

### Assist with application fees and security deposits (barrier for a lot of parents)

- What is it for housing, that it is only available for so many months or are they living with someone else?
  - Trying to find affordable housing on temporary assistance benefits; those benefits have not increased for 20 years, rent up 30% since COVID, they are living in terrible conditions
- Any thought to putting the family into controlled housing and using the money spent to upkeep that housing rather than making them responsible for paying rent?
  - Temporary Assistance is a benefit to the client, client owns that benefit and their right to choose where to live
  - How can community grow more affordable housing options, state needs to think about raising the benefit
  - Trying to pilot a program that works with current conditions, deal with private sector; housing is key

## 2Gen Onondaga – Benefits Cliff Money

- CLIFF money starts when client gains employment
- 4 moms receiving CLIFF Money
- Goal is for 12 months of stabilization and then 12 months slow step down
- FEC to provide intense support during this time.
- These households have not returned to TA.

- Is there any movement on the state to address the CLIFF issue?
  - No, hoping the county's pilot can show this
  - Few communities doing the basic income idea, giving \$500/month to family; no other support, ends in a year; flaws to that approach
- The state has looked at trying to address the CLIFF issue

Tell Me  
Something  
Good:  
Actual  
participant  
quote

- Economic Assets
  - She was approved for a \$200 **secured** credit card at Empower FCU - to start building positive credit
  - She's paid almost all of her negative accounts off

*"Yes she said once i build a good relationship with them 9/10 they won't deny me for a loan as long as it's not like a crazy amount so yes! I finally got a credit card lol waiting for it in the mail but I'm gonna just do my Spectrum and auto pay the amount from my checking each month"*

What do the  
parents  
really think?

- "2Gen is doing good, I love the program"
- "This is the best program I ever been in, I love my workers like they was family"
- "I didn't think they would be as helpful as they have been"
- "It gives me a chance to become a little more independent"
- "They help me achieve what I want to do in life"
- "People are very nice and understanding and are actually helpful"
- "All the help"

2Gen Onondaga – Next Steps

**Education Focus**

- Start at the beginning – who needs their GED
- SUNY EOC ZOOM – invited parents

**Social Media**

- Surveyed the parents- they actually still do use Facebook
- Will launch a private FB group

**Workshops**

- Or maybe quick videos or posts on social media – tips and education

**Barriers/Challenges**

- Fathers - NCPs
- Transportation
- Waivers – CLIFF money counts toward income
- Child Support regulations – disrupting family dynamics

## Few Additional DSS-ES Updates

- Enhanced SNAP benefit ends 3/1/23 – SNAP recipients received maximum benefits for 2 years
  - Average reduction is \$94 per household per month or approximately 30%; most seniors will receive \$23 dollars per month
  - NYS and County have sent letters to notify clients of this change. Pantries and meal sites are on alert for increased use. Our local Food Bank is ready to assist households.
- Federal Public Health Emergency ends May 11, 2023
  - Regular Medicaid eligibility standards go into effect 7.1.23 – all open cases must be reviewed to determine if still eligible
- Child Care Assistance – Please encourage parents to apply – 315.435.5683
  - For Example: Maximum Household Income for 4 - \$83,250; Annual family cost - \$555

### Questions/Comments:

- Are the fathers resistant to this program or not trusting this program or just related?
  - It is all, the county has to find another way to reach the father, may have to work with another not for profit that fathers can trust

A lot of changes in two areas:

- SNAP
  - 2 solid years had enhanced SNAP benefits due to COVID, federal government ended that
  - 70,000 individuals on SNAP in Onondaga County that had the maximum benefit; ending in March
  - Federal decision–pandemic benefit ended, 30% cut in most households; seniors get lower amount - most on social security which went up, income higher which is lowering SNAP benefits
- Federal Public Health Emergency
  - Ends May 11, 2023
  - All Medicaid eligibility goes into effect July 1<sup>st</sup>
  - 45,000 cases to be re-determined if still eligible, to occur within a 12 month period
  - State is working with federal government, trying to give us the rules; do not have clarity yet
    - Please encourage people to apply for child care; millions available
    - If applied before have them reapply
    - Family of 4 making \$83,000/year is eligible and with one or more kids in child care, will cost \$555 a year (does not matter how many kids)
- Will eligibility be in person?
  - No, by phone (SNAP and Medicaid)
  - Lack of information, confusing; will continue to be clear on what is expected
  - 45,000 cases of Medicaid 5,000 of them are over income but eligible because of COVID
- What is staffing level?
  - Down about 47, doing recruitment campaign; brought in 20 new employees in January
  - DSS – 75% of vacancies due to retirement; 25% due to not a good fit or they are just not understanding our program
- Are Civil Service test lists back up?
  - No, not run very often; waiting 6-8 months to get test results
  - Hiring provisionally, but a barrier for those not interested in provisional employment
- Is part of coming into department teaching them how to take the test?
  - Yes, running help sessions to help people get over the angst of taking the test; working with Personnel Department
- Sounds like component of new the phone system as well, quality control aspect, making sure people have information available to help them communicate effectively
  - Have call monitoring process, allows it to be live which is better

- Recorded “x” number of calls per person
  - Checking on customer service; is staff giving right information
  - Asking if any changes in household is important; quality control on everything
- Can bring supervisor into call
- Zip codes were mentioned, where are they located? (*Pilot Group Demographics, pg. 11*)
  - Mostly downtown; one in Baldwinsville
  - Small area being used to prove it works; then expand to rest of TA clients
- This would be a staffing change for DSS to be trained differently when they walk in the door; not a pilot, but a new process
  - Integrated eligibility system from the state will allow us to new approach
  - Focus on staff being facilitators; getting a sense of what is going on for the entire person; what services for eligibility; and refer to other community services
  - Technology will allow DSS to do aligning

**Request: Would like to have Dr. Anderson come in for the Health Advisory Committee – maybe in May or June.**

***A motion was made by Ms. Kuhn, seconded by Ms. Gunnip, to adjourn the meeting. Passed unanimously; MOTION CARRIED***

The meeting was adjourned at 11:40 a.m.

Respectfully submitted,



DEBBIE KAMINSKI, Assistant Clerk  
Onondaga County Legislature

ATTENDANCE

COMMITTEE: **HEALTH & HUMAN SERVICES**

DATE: **FEBRUARY 21, 2023**

NAME (Please Print)	DEPARTMENT/AGENCY
Sarah Merrick	DSS-ES
Michelle Mignano	OCHD
Kristi Smiley	Finance
Jessica Allen	Finance
Darcie Lesniak	Leg
Jim Beebe	Leg
Ann Rooney	County Exec.
Steve Morgan	Finance
Ben Yous	Law