

2024

Annual Report
To the Board of Directors

Clinton County Chapter NYSARC, Inc.

dba

Advocacy and Resource Center

*Supporting people to
live their lives to the fullest*



ADVOCACY
AND RESOURCE
CENTER

A chapter of



ADVOCACY AND RESOURCE CENTER

Supporting people to live their lives to the fullest



Robert McCasland, Jesse Dezan, William McNab, Dwayne Ferris, and Lee Smith
“Dreams do come true”

ADVOCACY AND RESOURCE CENTER

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Teresa Mahoney * Tif Mpando * Nanette Niemann
Rachel Reynolds * Nikki Rivers * Kerry Schnell
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Lori Lobdell * Dean Lombard * Michelle McGrath * Tif Mpando
Kevin Ryan * Jack Smith * Michelle Tallman * William Trombley

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A MESSAGE FROM THE BOARD PRESIDENT



Merrilee Hamlin, Board President

Dear Friends,

This past year has presented many challenges and many blessings. We have welcomed the blessings and faced up to the challenges with high expectations and positive thoughts. We celebrated our 70th Anniversary with a Gala/Fundraiser at the Strand Center for the Arts in November. An enjoyable evening of entertainment was had by our supporters and advocates.

Our Self Advocates group has been especially busy. The group is made up of people we support from different programs, who are making a difference in the thinking of city planning and the daily lives that are impacted by environmental boundaries. They recently made a video talking about what their daily lives involve. The video was sent to Governor Hochul and the OPWDD Acting Commissioner, Willow Baer, with an invitation to visit us so they are more aware of the IDD needs in the North Country.

Staff shortages have greatly impacted our stress levels, and we certainly want to recognize the employees who remain dedicated to supporting the individuals we work with every day. We need each other right now more than ever. The people we support need us more than ever, and that is why we continue to advocate for change, additional funding, and equality with state workers who do the same exact work as our DSPs. I totally believe that we are here for a reason, and when I say "here", I mean here at this ARC. You all work so diligently to provide a nice life for the people you serve that we may forget that our co-workers are people, too. We need to take a breath now and then remind ourselves that "everyone is fighting some sort of battle." Use this phrase as your mantra, and you will be surprised at the impact you can have.

Strategic planning was a large focus early in 2024. We were joined by Gregory North of Globe North, who led board members, staff, family members, and individuals supported through the process of identifying priorities we should be focusing on over the next five years. There has been a lot of progress made over the year, but there remains much more work to do.

One priority has been to identify non-Medicaid funding sources that can help us support our mission. The Janet Calkins Lakeside Retreat has been readied for other ArcNY Chapters to visit and spend time relaxing by our beautiful Lake Champlain. The monies earned will be non-Medicaid funds and will be used to enhance the lives of the people we support. We are excited to see how it works in 2025.

Presently, our country seems to be greatly divided. We, as Americans, have the right to our choices. We are blessed just to be born here and enjoy the freedoms we have. Unity is essential to good health, happiness, and a safe environment. And that is what I am asking from all of you. At Advocacy and Resource Center, working hand in hand, all departments are integral to keeping our Mission, which is to help the people we support to live their best lives.

Be safe, be healthy, and be thankful.



EXECUTIVE DIRECTOR'S 2024 ANNUAL REPORT TO THE BOARD OF DIRECTORS

Robin A. Pierce, Executive Director

Advocacy and Resource Center

Celebrating 70 Years of Service and Advocacy

It is with great pride and gratitude that I present this year's annual report, marking an incredible milestone of 70 years of unwavering commitment to individuals with intellectual and developmental disabilities (IDD). Since our founding, the Advocacy and Resource Center has been a beacon of support, empowerment, and advocacy, ensuring that individuals with IDD have access to the services, opportunities, and respect they deserve.

Advocacy & Financial Stability

Advocacy remains at the heart of everything we do, and this year was no exception. We have been deeply engaged in efforts to stabilize our financial platform through ongoing discussions and negotiations with the Office for People With Developmental Disabilities (OPWDD) and meetings with our government representatives. We even had an opportunity for a self-advocate to see the governor in Lake Placid, and he requested additional funding for our Direct Support Professionals. Funding challenges continue to impact agencies like ours, but through collaboration, education, and strong advocacy, we are ensuring that our services remain sustainable and that the individuals we support receive the quality care they need.

The Power of Self-Advocacy: CapABILITIES Group

Our CapABILITIES self-advocate group continues to thrive, empowering individuals with IDD to use their voices, take leadership roles, and influence policies that directly affect their lives. This year, our self-advocates played an instrumental role in engaging with local and state legislators, sharing their personal stories in a video to the Governor, and advocating for greater inclusion and support. Their voices are powerful, and we are committed to continuing to provide them with a platform to make meaningful change.

A Once-in-a-Lifetime Event: The Solar Eclipse

One of the most awe-inspiring moments of the year was the solar eclipse that passed directly over our region. This rare event was not just a scientific wonder but also an opportunity for learning. We organized the purchase of enough eclipse glasses to provide safe viewing opportunities for all staff and people we support, ensuring that the people we support could fully experience this celestial phenomenon. It was a reminder of the vastness of the universe and the importance of making every moment meaningful.

Strategic Planning for a Strong Future

As we reflect on 70 years of service, we also look to the future. Our strategic planning process has been a vital initiative this year, focusing on:

- Investing in staff development to strengthen our workforce and retention efforts
- Expanding diversification of revenue by developing partnerships with local businesses and community organizations
- Enhancing financial sustainability to safeguard services amid changing funding landscapes
- Growing our programs to meet the evolving needs of individuals with IDD
- Empowering staff to make decisions in their daily work routines.

This strategic planning ensures that we continue to build a future that upholds our mission while adapting to new challenges and opportunities.

Collaboration with Local Human Services Agencies

In the spirit of partnership, we have worked closely with other human services agencies in our region to enhance services, share resources, and advocate collectively. Collaboration has allowed us to amplify our impact, address community-wide challenges, and create innovative solutions that benefit the people we serve.

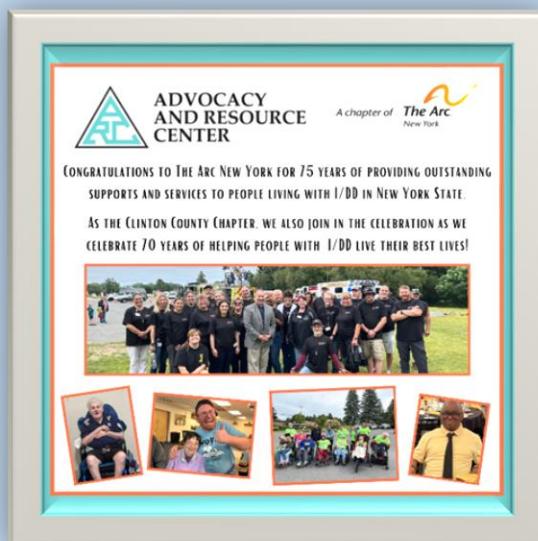
The Success of Our Summer Internship Program

One of the highlights of this year was the success of our summer internship program, which provided meaningful employment experiences for high school students to work with people with IDD. They gained valuable skills, built confidence, and hopefully fostered a lifelong respect for people with IDD. Our plan is to continue with this program in the years ahead.

Looking Forward

As we close this milestone year, we remain steadfast in our commitment to those we serve. Our 70-year history is a testament to the dedication of our staff, the strength of our advocates, and the resilience of the individuals and families who inspire us every day. The future holds new challenges but also new possibilities, and with your support, we will continue to champion inclusion, advocate for rights, and empower individuals with IDD for generations to come.

Thank you for being a part of this journey. Here's to the next 70 years!



FOCUS OF THE AGENCY

Our Vision Statement

The Advocacy and Resource Center will be recognized within the community as an outstanding service Agency. Development of all individualized services will be based upon identified personal outcome measures and quality leadership standards.

The future we envision is one where all individuals supported are active within their community and accepted in all aspects of life. Each person's quality of life will be enriched through personally meaningful activities, formation of sincere relationships and the pursuit and realization of dreams and goals. Individuals will be recognized for their abilities and contributions as a friend, companion, patron, and member of the community.

Our Mission Statement

Supporting people to live their lives to the fullest.



L-R Kim Trombley, Stuart Darrah, Mark Fournier, Matt Cayea, and Cory Burleigh

Albany Rally – “**Advocating Makes A Difference**”

OUR GUIDING PRINCIPLES

The guiding principles have been adopted from the Council on Quality and Leadership (CQL) Basic Assurances and should be viewed as fundamentally necessary to meet the personal outcome measures of all individuals support by the Agency.

I. RIGHTS PROTECTION AND PROMOTION

- ♦ Implement policies and procedures that promote individuals' rights.
- ♦ Educate and support individuals to exercise their rights and responsibilities.
- ♦ Uphold due process requirements.
- ♦ Provide decision-making supports to individuals as needed.

II. DIGNITY AND RESPECT

- ♦ Treat individuals as individuals.
- ♦ Respect individuals' concerns and respond accordingly.
- ♦ Ensure individuals' privacy.
- ♦ Provide supports and services that enhance dignity and respect.
- ♦ Provide individuals with meaningful work and activity choices.

III. NATURAL SUPPORT NETWORKS

- ♦ Help individuals identify to what degree they desire natural supports.
- ♦ Foster new relationships for the development of natural supports that promote acceptance and involvement.
- ♦ Encourage communication among individuals and their circle of support.
- ♦ Implement policies and practices that facilitate continuity of natural support systems.

IV. PROTECTION FROM ABUSE, NEGLECT, MISTREATMENT AND EXPLOITATION

- ♦ Implement policies and procedures that define, prohibit and prevent abuse, neglect, mistreatment and exploitation.
- ♦ Ensure individuals are free from abuse, neglect, mistreatment and exploitation.
- ♦ Implement systems for reviewing and analyzing trends, potential risks and events including allegations of abuse, neglect, mistreatment and exploitation, and injuries of unknown origin and deaths.
- ♦ Train support professionals to prevent, detect and report allegations of abuse, neglect, mistreatment and exploitation.
- ♦ Ensure objective, prompt and thorough investigations of each allegation of abuse, neglect, injury, mistreatment and exploitation.
- ♦ Ensure thorough, appropriate and prompt responses to substantiated cases of abuse, neglect, mistreatment and exploitation.

V. BEST POSSIBLE HEALTH

- ♦ Support individuals to manage their own health care.
- ♦ Assist individuals to access quality health care.
- ♦ Evaluate health care objectives and promote continuity of services and supports.
- ♦ Address health needs in a timely manner.
- ♦ Ensure individuals receive medication and treatments safely and effectively.
- ♦ Train staff to immediately recognize and respond to medical emergencies.

VI. SAFE ENVIRONMENTS

- ◆ Provide individualized safety supports.
- ◆ Ensure physical environments that promote individuals' health, safety, and independence.
- ◆ Develop and maintain individualized emergency plans.
- ◆ Complete routine inspections to ensure environments are sanitary and hazard free.

VII. STAFF RESOURCES AND SUPPORTS

- ◆ Implement and maintain a system for staff recruitment and retention to promote continuity and consistency.
- ◆ Maintain an ongoing staff development program.
- ◆ Ensure the needs of individuals shape the hiring, training, and assignment of staff.
- ◆ Treat our employees with dignity, respect, and fairness.

VIII. POSITIVE SERVICES AND SUPPORTS

- ◆ Develop plans that are person-centered and self-directed.
- ◆ Provide continuous and consistent services.
- ◆ Provide positive behavioral supports.
- ◆ Ensure individuals are free from unnecessary, intrusive interventions.

IX. CONTINUITY AND PERSONAL SECURITY

- ◆ Engage in sound business and fiscal practices to be able to provide viable and reliable services to individuals.
- ◆ Financial practices are audited by internal and external sources.
- ◆ Ensure sufficient resources are available to meet life's basic needs and to achieve their personal goals.
- ◆ Inform individuals of what personal information is maintained, how it can be accessed, and by whom.
- ◆ Maintain an organizational structure that promotes individuals feeling secure.



QUALITY MOVEMENT

MAKING STRIDES TOWARDS PERSON CENTERED EXCELLENCE

ASSISTANT DIRECTOR: *Jessica L. LaPier, ExploreABILITY*

REVIEW OF ACCOMPLISHMENTS – 2024

The Advocacy and Resource Center has continued its engagement with the Council of Quality Leadership (CQL). After a year of reflection, 2024 was a year of action. With the people we support at the helm, the agency went from a time of uncertainty to looking towards the future.

Both the Basic Assurance and the Person-Centered excellence long term goals continue to serve as valuable tools to connect our services and supports with the goals of the people we provide those services to. The basic assurance goals continue to outline the identified systems and practices indicated by the Council on Quality and Leadership (CQL), in the areas of: rights protection and promotion, best possible health, staff resources and supports, positive supports and services, and continuity and personal security. The areas that we continue to build upon in our stakeholder chosen person-centered excellence long term goals consist of: enriching the organizational culture by expanding upon people's social capital, integration and education (community connections); providing employees with opportunities to be educated and supported to feel more confident in making decisions (workforce); and enriching services to allow a robust quality of life to drive personal goals and outcomes (supports and services).

2024 marked the Agency's first onsite visit with the Council on Quality and Leadership since 2017 and allowed us to showcase our progress since the 2021 (all virtual) re-accreditation. The agency's consistency and perseverance to provide the people supported with BIG lives was commended. It was a reminder that the little things we do each day can have a big impact on people's lives.

2024 was a busy year for the Quality Enhancement team. The team made up of the Assistant Director of Habilitation Services- Day Services and two Quality Enhancement Specialists balanced duties related to accreditation goals with the Site Based Day Habilitation program, ExploreABILITY. This led to the ability to naturally implement the core values and standards of CQL into the day to day functions at ExploreABILITY.

In the fall of 2025, the agency will embark on their fourth, four-year accreditation with the Council on Quality and Leadership (CQL). A full review of the Person Centered Goals and Basic Assurance goals is underway in preparation of the accreditation events tentatively planned for September 2025.

"People Manage Their Own Health" continued to be prioritized in order to mesh health and person centered standards. After piloting the menu system in 4 homes, the remaining homes went through the process and have adapted to the system. The Health Department remained a tremendous support in various programs and grants.

GOALS FOR 2025

- Train additional POM interviewers and increase the number of interviews to 20 per quarter.
- Obtain feedback from Precision Care Patient Portal and expand to additional people supported.
- Explore Food Waste Reduction Program with Health Department in order to reduce agency waste as well as to provide education and volunteer opportunities to the people we support.
- Construct and install a Community Key Chain Library as part of our initiative in building community partnerships and integrated experiences.
- Prepare and have a successful accreditation with the Council on Quality and Leadership (CQL) in September 2025.



Tom Luisi and Janelle Seymour
“Friendships that last a lifetime”

ARTICLE 16 CLINIC SERVICES

ASSOCIATE EXECUTIVE DIRECTOR: *Lori Lobdell*

REVIEW OF ACCOMPLISHMENTS – 2024

Occupational and Physical Therapy Services

The Article 16 (A16) clinic Occupational Therapy (OT) caseload remains an average of 29 with the potential to increase over the course of this next calendar year. Since acquiring a second OT, Durable Medical Equipment (DME) and wheelchair repair response times have improved significantly. This has also allowed for more efficient tracking and documentation of DME repairs and concerns. Most recently, all oral hygiene data tracking has been delegated back to the residences to ensure the most timely and frequent follow up possible. Implementation of our wheelchair clinic started in mid-October of 2024 and is held twice monthly, on the first Wednesday and third Thursday of each month. Both OT's and Physical Therapist (PT) share responsibility in organizing the wheelchair clinic schedule in conjunction with the National Seating and Mobility (NSM) technician. The OT's maintain oversite and responsibility for maintaining and repairing manageable wheelchair repairs.

The Physical Therapist (PT) and Physical Therapist Assistant (PTA) maintained an average caseload of 35 individuals receiving direct PT services through the A16 Clinic. Most treatment plans are established for 4-5x/ month and the average session is 2 units, so this translates to approximately 17 billable hours of direct services/ week. The PTA position lost in mid-2023 was not filled.

The PT ARC caseload is 124 residential people and approximately 25 community-based individuals receiving DH services. Caseload management included bi-annual case reviews, intake assessments, and mobility and DME assessments as needed. The PT and PTA provided oversight, regular maintenance and repair on DME / mechanical lifts, ambulation devices, and Lower Extremity (LE) orthotics and shoes (via Mountain O&P) and assist the OT's with wheelchair inventory management. Ceiling track trainings at Serenity Drive IRA, Inspiration Way IRA, and now Peru IRA continue as needed to train all new and covering staff at these locations. Safe Patient Handling (SPH) orientation class was taught 21x by PT and OT (co-trainers, 63 hours), and PT taught 19 Refresher classes (19 hours) over the course of the year.

PT/ SPH Coordinator assisted the Safety and SPH Committee in submitting the 7th annual SPH report to NYSIF (New York State Insurance Fund) and again met the requirements of the law to continue to receive the 2.5% premium credit on the NYSIF worker's compensation policy.

Speech and Language Services

The Speech Language Pathologist (SLP) maintained ten people on her caseload. It is anticipated that several additional referrals will be made for services in 2025. The SLP has also started reaching out to Care Managers to explain the clinic referral process for community people on their caseloads. Group therapy sessions were an unrealized goal for 2024 but it is anticipated with an additional clinic space at CVI, these services will be easier to schedule. The SLP is working on identifying appropriate people

for small group therapy sessions for 2025. Individuals who are enrolled in group therapy will also be enrolled for individual SLP sessions.

The SLP continued to provide Choking Prevention/Overview of Therapeutic Dining Training to new employees throughout the year, as well as additional trainings at program sites when requested.

Collaboration between the SLP and Recreation Coordinator, out of ExploreABILITY, began regarding food modifications and communication tools to coincide with recreational activities being planned throughout the year. This provides an additional level of safety and oversight for individuals who attend the planned activities and allows staff to support individuals while eating.

Agency Counseling Services (not billable through the A16 clinic)

In 2024 the agency counselor maintained a caseload of 20 individuals receiving weekly/biweekly sessions. An additional 20 people fell into an “as needed” category for counseling supports. The agency counselor continued to support an individual who recommended a monthly grief counseling session be offered to individuals who have suffered losses in their lives.

A new program was introduced to individuals supported that focused on obtaining and maintaining healthy relationships. Topics reviewed include: feelings and emotions, types of relationships, personal boundaries, communication and meeting others, healthy relationships, dating, personal safety and others. This has been well received by people supported.

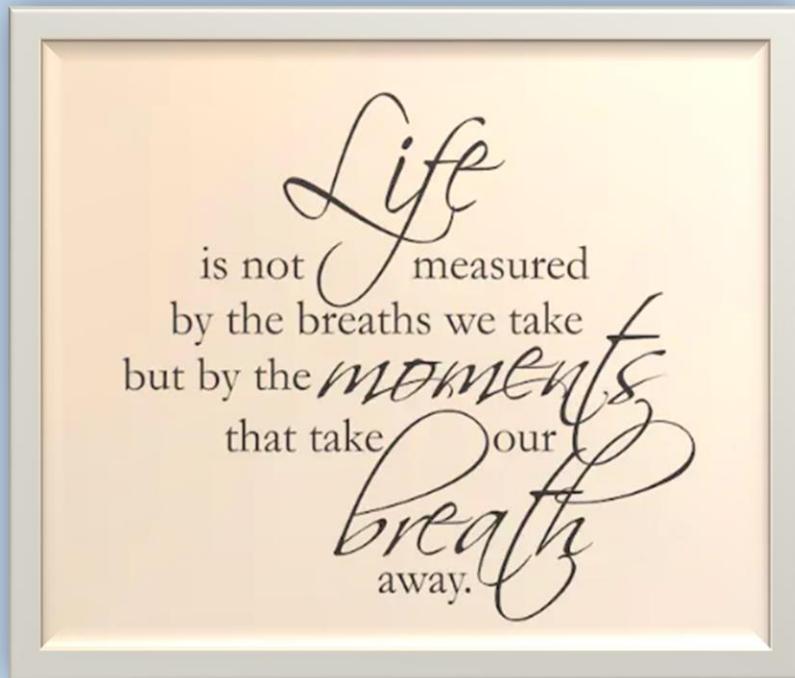
Additionally, the agency counselor continues to serve on the Human Rights Committee and the Peer Mentoring Committee. Serving as an advisor for the Self Advocacy group CapABILITIES, the agency counselor remains committed to support the group as it expands its efforts to educate others on disabilities versus CapABILITIES, rights and responsibilities and other areas that allow the group to have a unified voice.

The agency counselor continued to support individuals we serve to introduce new employees to the agency. The Meet and Greet Group meets with every new orientation class to tell them their expectations of staff while working with them. This is always positively received by the new employees.

GOALS FOR 2025

- Start at least one small therapy group to target augmentative communication.
- Offer friendship and dating curriculum group for people supported with assistance of the Behavior Department.
- Continue to hold twice monthly wheelchair clinic for more efficient use of time and resources (PT and OT).
- Implement walker ‘clinic’ format for increased efficiency of repairs (PT).
- Attend managers meetings quarterly or as requested.
- Improve residential awareness of the OT and PT referral process for A16 direct therapies.

- Revise Clinical Procedures Manual to update written training materials and procedures from 2017/18 to 2025.
- Increase objectivity of bi-annual PT caseload reviews and increase efficiency of ARC caseload management by developing and utilizing screening / assessment form and by utilizing Precision Care assessment form (Braden Scale).
- Add Safe Patient Handling Assessment to Precision Care and begin to utilize annually (PT).
- Identify another space appropriate for clinic services at CVI and get it certified to increase OT/PT/SLP billable services.
- Explore opportunities to expand billable clinic services utilizing our behavior support clinicians.



CORPORATE COMPLIANCE

DIRECTOR: Valerie Bragg

REVIEW OF ACCOMPLISHMENTS – 2024

Regulatory changes continued in 2024. Specifically, due to vast updates to the Office of the Medicaid Inspector General's (OMIG) Compliance Program requirements, the agency's compliance plan was reviewed for effectiveness and will be reviewed annually moving forward. Areas that the Compliance Director worked on in 2024 included an annual review of all compliance policies with revisions to the Standards of Conduct Policy; Self-Disclosure Policy and the Gifts and Gratuities Policy and Procedure; an annual review of the Compliance Committee Charter in December 2024 with no revisions recommended; new training packets were developed and distributed to seven external contractors; agency website was reviewed and recommendations for changes were shared with Public Relations Director; the exclusionary status of all affected individuals was reviewed monthly as well as submitted an abbreviated self-disclosure to the OMIG on a monthly basis.

In conjunction with the Chief Financial Officer (CFO), the Director of Compliance ensured that the Certification Statement for Provider Billing Medicaid completion based on various providers was completed on June 17, 2024, and then again on September 25, 2024. The completion of these documents also attests that our agency has an effective and functional compliance program.

In April 2024, the agency received correspondence from the Office of the Medicaid Inspector General (OMIG) that the agency would be involved in a Healthcare Worker Bonus audit. The Director of Compliance sent all requested documents to the OMIG on May 20, 2024. To date, no further requests have been received.

In September 2024, the agency received correspondence from the Department of Health (DOH) regarding Electronic Visit Verification (EVV) for Community Habilitation and Community Habilitation-Residential. The agency worked with Precision Care and eVero software providers to determine when EVV data was not sent to the aggregator. It is expected that this issue will be resolved early in 2025.

The Director of Compliance filed the annual client personal allowance attestation on January 31, 2024. The attestation states the agency will ensure that people-supported personal funds are being maintained, managed, and monitored appropriately. To ensure these funds are safeguarded, the Director of Compliance reviewed rep payee statuses along with monthly bank balances for all individuals who reside in an agency residential setting. The Director of Compliance reviewed all personal allowance audits that were completed internally by the Business Office.

The Director of Compliance worked with all agency programs to guarantee regulatory compliance with all services provided. This was achieved via numerous avenues. Providers were notified of changes in regulations and billing standards. These included 24-ADM-01 (Medical Immobilization/Protective Stabilization (MIPS) and Sedation for Medical/Dental Appointments); 24-ADM-02 (Service Documentation and Requirements for Home-Enabling Supports Provided to People Enrolled in the Office for People with Developmental Disabilities (OPWDD) Home and Community-Based Services (HCBS) 1915c Waiver) and 24-ADM-03 (Certified Residential Opportunities (CRO)).

The Director of Compliance continues to work towards collaboration and facilitation of working relationships with the Life Plan and Care Design Care Coordination Organization (CCO) by scheduling/participating in quarterly meetings with each agency.

The Director of Compliance participated in approximately 215 hours of continued education through conferences, webinars, training, and meetings. In addition, a Source America grant was obtained to allow the Director of Compliance to attend the Healthcare Compliance Academy and test of Certification in Healthcare Compliance in January 2024. Annual compliance training was revised and conducted with the Board of Directors in September 2024, and new committee members met with the Compliance Officer prior to their first committee meeting so that a review of various policies could occur as well as to obtain information for the Exclusion Screening database. Annual mailing of Standards of Conduct and Conflict of Interest Policies and attestations were sent to all board committee members on April 24, 2024.

The Director of Compliance completed routine audits as needed and specifically requested audits to ensure compliance with regulatory and billing standards using updated audit tools based on regulatory changes (temporary or permanent). Concerns were investigated as they were communicated, and findings and corrective actions were documented. All audit and investigative findings and plans of corrective action were shared with the Corporate Compliance Committee on at least a quarterly basis.

HUMAN RESOURCE DEVELOPMENT

The department consists of 1.5 FTEs

- Director / Corporate Compliance Officer
- Support Assistant (.5 FTE shared position)

GOALS FOR 2025

- As Directors leave programs, the Director of Compliance will conduct an audit of the service(s) to assist the new Director of that program with identifying any concerns or trends. (Standing goal).
- Prioritization of audits based on level of risk. (Standing goal).
- Continue to ensure OMIG Compliance Program requirements are met regarding changes to SSL 363d, NYCRR 18 Part 521.
- Explore the possible addition of audit staff to assist with auditing and investigations.
- Reorganization of compliance files by scanning information onto the server to work towards paperless files.
- Director of Compliance will continue to work on increasing knowledge of regulatory changes and certification in the compliance arena.

BUSINESS DEVELOPMENT/CVI JANITORIAL

DIRECTOR: *Ed Mason*

REVIEW OF ACCOMPLISHMENTS – 2024

The number one priority for the Janitorial team was to ensure we responded competitively and in full compliance with the 5-year GSA RFP issued in 2024 for providing Janitorial and Grounds Services to all 4 border crossings in Clinton County.

- We were successful in winning this RFP and increased the revenue, per year by **\$300,000.00**. This equates to **\$7,156,807.40** over the 5-year term, which is an additional **\$1,500,000.00** in revenue over the same term. This win positions us well for the next 5 years and there are also multiple opportunities to add to this agreement when Rouses Point builds a brand-new expansive facility. Our partnership is very strong with the GSA and Source America teams.

The Business Development Director proactively applied for 7 Grants offered by Source America and was successful in obtaining **\$115,996.28** in funding out of the total available funding of \$124,000.00. These grant funds underwrote multiple opportunities for our agency in areas like Growth-Modernization & Technologies, Quality Work Environment (QWE), Training-Certification-Compliance, Training Incentive Program, and Cyber Security. We've established a strong partnership with Source America and have benefited financially from these funds. The Business Development Director attended the Source America national conference and training session in May and spent a great deal of time with the "C" level folks to ensure we could all put a face to a name for future correspondence or conversations.

A comparative analysis of purchasing our own vending machines and discontinuing using a local vendor who doesn't share in profits was completed. With funding from Source America, after a grant request was prepared, we were able to purchase 4 new vending machines; distributing them at Southside, ExploreABILITY, Transportation, and CVI. Although we had a learning curve in installing/utilizing these machines, we ended the year realizing our goal of delivering non-Medicaid revenue while providing two major opportunities. First, our prices are lower than our previous machines when served by a local vendor, so all users receive a nice deal. Second, and most importantly, we created a program for our Pre-Vocational team to "own" the responsibility to maintain these machines by filling them each week, collecting and counting the cash, and delivering the profits to our business office. Since July 2024 when the machines were installed, we have realized an average of \$700 per month in revenue which continues to grow monthly. The positive effects of including our Pre-Vocational team have been incredible. They absolutely love and are thriving with this opportunity.

I worked successfully with the Clinton County Department of Health to realize \$16,000 (in-kind) funding as part of their "Nutritious Snack and Healthy Living" campaign focused on delivering healthy snacks to our individuals and employees. We were able to provide multiple items like raised garden beds, new grills, kitchen products, and much more for 4 of our IRAs and 90 yards of gravel for an exercise trail near our Transportation building. An additional 5 IRAs are currently being completed with another

\$16,000 in-kind donation. This program continues for another 3 years and will hopefully support the remaining homes in some manner.

The Business Development Director assisted in supporting our plan to establish an Airbnb through overseeing janitorial services that thoroughly cleaned both the Janet Calkins Lakeside Retreat and the cottage located in Chazy. With \$12,000.00 of grant funding from Source America as well as additional investment from our Agency, we were able to prepare both properties to welcome guests. We established a specific procedure to rent the properties and updated our social media accounts to reflect this. We have promoted it to other ARCs in NYS and there appears to be great interest. At this point, they are ready to be rented for the upcoming season. This shall provide a healthy (non-Medicaid) revenue stream for our Agency in 2025.

I worked successfully with administrative and department staff to establish a new Food Pantry located at CVI for any employees of our Agency who may benefit from it. This was initially funded by our Foundation Board and private donations. This initiative has been a real success and continues to be as we move into 2025.

- Worked with Hannaford to establish a donation of food initiative to help support our Food Pantry. Hannaford agreed to donate \$1 for every Hannaford bag that is sold during January 2025. Any funds received will be earmarked for our Food Pantry.

Human Resources Development

At the close of 2024, Business Development and CVI Janitorial employed:

- 1 Director
- 1 Manager
- 1 Coordinator
- 3 Full-time Janitorial Crew Leaders
- 11 crew members

GOALS FOR 2025

- Recruit additional staff for Crew Leaders and crew members for GSA Janitorial contract at the local border crossings.
 - Develop relationships with CSE chairpersons for CVES and all Clinton County High Schools to leverage our agency as an employer with opportunities to train and hire students after graduation.
- Continue to pursue growing our commercial workforce in Janitorial and re-visit former accounts and agreements that the Agency has had in years past.

- Apply for Source America grant opportunities for training, growth and modernization, quality work environment (QWE), cybersecurity, technology, etc., that our agency is eligible for.
- Collaborate with the Executive Director at the YMCA, with the move of the YMCA and their usage of the agency's property behind their parking lot to develop use of the property such as walking paths and ball fields.
- Collaborate with the planning team to develop future use of the agency's Tom Miller Road property.
- Continue to market, promote, and manage rentals at our Airbnb properties at JCLR and the cottage in Chazy, especially during the most appealing months of May through October 2025.



EMPLOYMENT SERVICES

DIRECTOR: *Michelle L. McGrath*

REVIEW OF ACCOMPLISHMENTS – 2024

The Employment Services Department consists of Workforce Network (WFN) (Supported Employment, Pathway to Employment, and Community Prevocational Services), Individualized Support Services, and the Family Reimbursement Program.

Supported Employment is a service designed to help individuals with disabilities obtain and maintain competitive integrated jobs in the community. It provides personalized assistance, including job coaching, skills training, and workplace accommodations to ensure long-term success. The goal is to promote independence and inclusion by enabling individuals to work in meaningful, sustainable, competitive employment.

In 2024, WFN was able to continue to provide a quality service to the people supported. WFN worked closely with ACCES-VR (Adult Career and Continuing Education Services – Vocational Rehabilitation) and OPWDD (Office for People with Developmental Disabilities) to assist individuals with their employment goals.

A new five-year contract with ACCES-VR started in 2024. WFN was approved to provide an array of services to individuals who qualify for services through the ACCES-VR program. The new contract also included a new software program for reporting to ACCES-VR. This has proven to be a challenge in the first year of the contract. The contracts were not fully executed until September 2024 so we were unable to bill for services until that time.

In 2024, WFN applied for and was granted a Placement Contract with the Office of Children and Family Services for the Commission of the Blind. This contract allows us to accept referrals for individuals with visual impairments.

In 2024, the Community Prevocational Services (CPV) Program was able to provide a number of volunteer opportunities in the community. CPV helps individuals with disabilities develop the skills needed for future employment in integrated work settings. These services focus on building foundational work-related abilities. Unlike traditional employment services, CPV does not lead to a specific job but instead prepares individuals for competitive employment opportunities. The goal is to increase confidence, independence, and job readiness for future work opportunities.

The Individualized Support Services (ISS) Contract continued in 2024 with 3 individuals receiving ongoing contracts. Financial supports were used for rental and utility subsidies.

In 2024, the Family Reimbursement Program did not see as many requests as in previous years. The guidelines continue to be stringent and difficult for reimbursement to occur.

In 2024, WFN hosted an “Info Splash” for anyone in the community looking for information regarding the services that our agency provides. We had people from OPWDD, ACCES-VR, Special Olympics, and all service providers from our agency attend.

HUMAN RESOURCES DEVELOPMENT

The Employment Services Department employs:

- 5 full-time Employment Specialists
- 1 part-time Employment Specialist
- 2 Relief Employment Specialists
- 1 full-time Program Coordinator
- 1 full-time Career Developer
- 1 Direct Support Supervisor
- 2 Program Secretaries
- 1 full-time Director

The Employment Services Department has three people who continue to maintain the Certified Employment Support Professional (CESP) credential. This national credential recognizes individuals who have demonstrated a sufficient level of knowledge and skill to provide integrated employment support services to a variety of populations.

GOALS FOR 2025:

- Build strong employer partnerships by developing working relationships with 5 new employers in our community.
- The Community Prevocational Program will increase enrollment by 5 people and increase volunteer opportunities by 10 places in the community.
- Ensure compliance is maintained for record keeping, service provision, and documentation in accordance with both ACCES-VR and OPWDD guidelines.

STATISTICS

	Community Prevocational Services	Pathway to Employment	Workforce Network	Family Education & Training
Number on rolls 1/1/24	6	0	111	0
Admissions	0	0	22	0
Discharges	0	0	10	0
Number on rolls 12/31/24	6	0	123	0



Cory Burleigh working at Lowes
“Achieving goals”



Elizabeth Harrington
“Service with a smile”

FISCAL INTERMEDIARY SERVICES

DIRECTOR: *Michelle L. McGrath*

REVIEW OF ACCOMPLISHMENTS – 2024

Self-Directed Services (SDS) empower individuals with disabilities to have greater control over the supports they receive. Instead of relying solely on traditional agency-based services, SDS allows individuals to hire, train, and manage their own support staff. This approach has offered flexibility in choosing services that align with personal needs, preferences, and schedules, promoting independence and enhancing quality of life. Funding for SDS comes from Medicaid with people managing budgets and making decisions that best suit their lifestyles. By prioritizing personal choice and control, SDS helps individuals live more independently while receiving the necessary care and support needed.

In 2024, the Fiscal Intermediary (FI) Services and Brokerage departments focused on the provision of consistent, high-quality services. Efficiencies continued to be identified to increase customer satisfaction with all services that the Fiscal Intermediary department provides. Areas of concern were identified, addressed and monitored.

The department continued to use the eVero Corporation's **EMPOWER™ Self Directed Services** software system to improve efficiency, streamline workflows and increase compliance within the department. The software system is continually upgraded to support the compliance challenges and improvement of efficiencies for vendors, staff, and individuals supported. With the use of the eVero software system, the FI program has been able to grow.

In 2024, the state funded portion of the SDS contract ran out. We requested additional funding for this portion of the contract and only received half of the amount requested. We continued to reimburse families for the items without any funding. We will be able to request additional funding to cover this loss in 2025.

A contract extension for three years was approved at the end of 2024. The amount awarded was based on the utilization of the current contract. They also included some room for growth in the program.

We continue to have a waiting list of at least 75 people for all services that the FI department provides due to the outstanding reputation that we have within the region.

In 2024, we created a new position of a Senior Agency Broker/FI Specialist and she has been working with Relias and eVero in order to enhance the training we are able to provide to the SDS staff and Independent Brokers.

HUMAN RESOURCES DEVELOPMENT

At the close of 2024, the FI Department employed:

- 1 Director
- 1 Assistant Director

- 2 Agency Broker/FI Specialists
- 1 Senior Agency Broker/FI Specialist
- 6 FI Specialists
- 1 Senior Support Assistant
- 2 Support Assistants

GOALS FOR 2025

- To set up quarterly meetings with SDS staff and brokers to discuss best practices and communicate any information regarding the program.
- Continue to explore and implement the features of the **EMPOWER™ Self Directed Services** software system that are not being utilized in order to increase efficiencies in the department.
- To streamline and capitalize on workflow not only within the department but across the departments that we work with.
- Foster a supportive network for anyone receiving our SDS services to include connection to peer support, mentors, and community resources.

STATISTICS

Fiscal Intermediary

Number on rolls 1/1/24	434
Admissions	0
Discharges	24
Number on rolls 1/31/24	410

Brokerage

Number on rolls 1/1/24	162
Admissions	0
Discharges	10
Number on rolls 12/31/24	152

GUARDIANSHIP SERVICES

PRIMARY GUARDIANSHIP COORDINATOR: *Maris Haynes*

GUARDIANSHIP COORDINATOR SUPPORT: *Zana Elshafay/Val Bragg*

REVIEW OF ACCOMPLISHMENTS – 2024

The Clinton County Chapter Guardianship Committee supports eleven people with Primary Guardianship and one person as a Standby Guardian. In 2024, the Guardianship Coordinators continued to seek Corporate Guardianship for two additional people. The Guardianship Committee includes nine community volunteers with various backgrounds.

The Guardianship Committee kept informed regarding the personal affairs of each person supported this year. This was done by regular visits, discussions with each person's medical providers, and attending their Life Plan meetings. The Guardianship Committee provided gifts and mailed cards for holidays and birthdays. A holiday party occurred with special guests, Mr. and Mrs. Claus, during the holidays. The focus of 2024 was to expand the program with legal support and provide more in-person contacts.

HUMAN RESOURCES DEVELOPMENT

The Guardianship Coordinators serve many functions for the Clinton County Chapter NYSARC, Inc. Guardianship program.

GOALS FOR 2025

- Continue to develop and maintain meaningful relationships between Guardianship Committee members, service providers, and people supported by the Guardianship program. The Guardianship Committee will advocate for and monitor each person's health and safety needs.
- Continue to provide strong medical advocacy support to maintain the best quality of life possible with dignity and respect.
- Provide more in-person contacts and group gatherings.
- Follow person-centered planning practices when developing each person's support and services.
- Provide advocacy and support to people interested in obtaining guardianship assistance.

FISCAL SUMMARY

The Guardianship program is largely supported through a grant provided by the Arc New York.



George DiLorenzo
“93 and loving life”



Lee Smith with Mr. and Mrs. Claus
“Enjoying the holiday season”

HABILITATION SERVICES

DIRECTOR: *Tifukananji (Tif) Mpando*

ASSISTANT DIRECTORS: *Ellen Gricoski, Jessica (Jess) Lapier, Rachel Reynolds, Nicole (Nikki) Rivers, Kerry Schnell*

2024 was the year that the Habilitation Services Department continued to enforce standards and expectations for both Residential and Day Services. Due to staffing vacancies, we found that the quality of service provision was not to the same standards as in prior decades. The enforcement of standards and expectations led to increased accountability across the board for Direct Support Professionals (DSP), Supervisors, Managers, Assistant Directors as well as the program Director.

REVIEW OF ACCOMPLISHMENTS 2024 – ExploreABILITY

The biggest goal for the people supported in 2024 was increased community integration as well as incorporating activities at the day program that met their interests. The Recreation Specialist created weekly activity calendars for the people supported. Some of the activities included baking, an arts/crafts show, visits with therapy dogs, face painting, etc. Some of the community integration activities included a trip to the pumpkin patch, a tubing trip to Lake Luzerne, Adirondack Golf, and Beach Day at the City Beach. ExploreABILITY (site-based Day Hab) also hosted a performance of The Wizard of Oz.

2024 began with vacancies in the leadership team at EA. The year began with a team that consisted of the Assistant Director, Logistics Coordinator, Support Assistant, and Recreation Specialist. However, we did not have any Supervisors which we urgently needed to fill (4 vacancies). We realized that to set standards at EA, we first needed to have a full leadership team. By the end of 2024, we were able to fill 3 out of the 4 Supervisor vacancies.

At the beginning of the year, EA was sharing staffing with Residential due to the vacancies at the Day Program site. Although sharing residential staff helped with ensuring health and safety levels for the individuals at EA, it did come with its share of challenges. There was inconsistency with the staff that were being assigned to EA. Some homes had the same designated staff that would come into EA, while some homes would send in whomever they could, which resulted in staff not being familiar with the day program. As a solution, we advised the managers to rotate the staff that were going to EA; that way, every residential staff would have familiarity with the program, as well as with the individuals who they would be working with in their PODs.

To alleviate the need to send Residential staff to EA, we decided to emphasize hiring staff solely for day program. The rationale was that if we increased our focus on hiring EA staff, it would help with providing consistency. In addition, this would “free up” residential staff so they could focus more on running Day Hab. Without Walls and Community Habilitation – R. Filling the vacancies took time – between training staff, as well as regular turnover, however, the EA team continued to grow. At the end of the year, staffing had greatly increased. The Assistant Director was able to restructure the groupings which resulted in residential only needing to send a maximum of 2-3 staff a day per POD, compared to the previous 4-6.

In the summer of 2024, we started an internship program for ExploreABILITY. There were 12 interns that were recruited from the high schools around Clinton County. The purpose of the internship program was to provide students with early experiences working with the people supported, with the hopes of future employment with the agency. The interns were integral in helping with getting the people supported out in the community. At the end of the internship, we were able to hire 3 interns as agency employees!

GOALS FOR 2025

- Continue to increase community integration for the people supported based on their interests.
- Provide the people supported with the tools to advocate for themselves.
- Fill the 4th Supervisor vacancy.
- Hire a Site Based Manager/Administrator.
- EA having 100% staffing support without needing to supplement with Residential staff.
- Increase volunteerism in the community.
- Expand the internship program to include a curriculum and increased training in the I/DD field.

HUMAN RESOURCES DEVELOPMENT

At the end of 2024, ExploreABILITY Program included:

- 1 Director
- 1 Assistant Director
- 1 Support Assistant
- 1 Logistics Coordinator
- 1 Recreation Specialist
- 3 Supervisors
- 23 Full-Time DSPs
- 3 Part Time DSPs
- 2 Relief DSPs

REVIEW OF ACCOMPLISHMENTS 2024 – RESIDENTIAL

Residential services began 2024 with the continued staffing issues of 2023. Staffing levels were low which resulted in staff being “stuck” past the end time of their regular shift. Whispering Pines IRA reopened on 1/24/2024, which added an additional strain to staffing (increase in open hours). Unfortunately, Macey Lane IRA remains closed.

We came to the realization that the staffing shortage is our new reality and that we need to focus on employee retention. In the spring of 2024, we created a temporary relocation incentive program for the homes with the highest vacancies. From May 1st – August 31st, 2024, if a staff temporarily relocated to another IRA, or if they were administrative staff but willing to work an extra 8 hours a week, they would earn \$250-\$500 extra (amount was contingent if an employee was full time, part-time or relief). This incentive was mildly successful as we were able to get a few direct support and administrative staff to participate. In addition to the temporary relocation incentive, we also created another incentive for July and August. If an employee picked up an extra 16/20/40 hours a week, they would receive \$500-\$1,000 (depending on the number of hours picked up). This incentive was more successful agency-wide, as administrative and EA staff picked up many of the open hours.

To reduce vacancies, in the summer, we piloted 12-hour schedules for the homes. Staff were already working 12+ hour shifts. The longer shifts would provide additional coverage during the day. In the beginning of the fall, we decided to make these 12 hours permanent at 8 of the IRAs. A survey was sent out to the staff asking them if they were open to working 12 hours and which homes they believed would be best for the 12 hours. Based on staff feedback, it was decided that Alder Bend, Church Street, Inspiration Way, Maine Road, Pine Ridge, Salmon River Road, Serenity Drive, and Whispering Pines IRAs would permanently switch to 12-hour schedules. What we found was that the 12-hour shifts reduced the number of vacancies and, in some instances, were able to increase the staffing levels. For example, Serenity Drive changed their schedules to 3a - 3p and 3p - 3a, resulting in no longer needing to hire staff specifically for overnights. The biggest concern, however, is finding coverage whenever a staff calls out. If there is a staff who works at an 8-hour shift house, they are less likely to pick up a shift at a 12-hour home.

The department invested in the growth of the leadership team. We wanted to ensure that they were being given the tools to effectively manage their homes and staff. During the months of March and April 2024, all department supervisors, managers, and administrative team members enrolled in CITEC Management Development Essentials. These courses provided the tools and supports needed for managing a successful team.

While investing in the growth of the leadership team, we also wanted to ensure that they were being given the extra supports needed. We found that the biggest support that the management team needed was the handling of the on-call system. Previously, Tier 1 on-call was the oversight of 20 homes split between two people. With the continual rise of open hours, it became overwhelming for two managers to cover the open hours for 20 homes. In the summer, we decided to split on-call by the four PODs. The intent was to ease the stress of covering open hours for five houses instead of 20. We also opened the option to the supervisors for covering on-call. Based on feedback provided by the managers, it has slightly relieved some of the stress as they have fewer homes to cover the open hours for.

The POD system remains in place, however, there have been instances where we have had to staff across the different PODs. This especially happens by combining houses when running Day Habilitation Without Walls and Community Habilitation – R. By combining the homes, we can get more people into the community while still ensuring safety levels are met. It also gives the people supported an opportunity to spend time with their peers while spending time in the community. Some of the people supported continued to struggle with the four hours in the community, and as the months got colder, it was more challenging to find activities to complete. Staff have been creative with community integration. Activities have included: bowling, Great Escape, Mohawk Casino, 4th of July parade, etc. Outside of

day services, some of the individuals have gone to the Great Escape, shopping at the outlets, Billie Eilish concert, and Roots and Boots concerts.

Sadly, two of the people supported passed away due to medical issues. Their memories will always remain in our hearts. Thankfully, we were able to welcome three new wonderful individuals. The department ended with 124 filled beds and five vacancies.

GOALS FOR 2025

- Daily community integration not being just limited to Day Hab WOW but also including Comm Hab-R and in the evenings.
- Implement system of single house managers to provide consistent oversight with services and staff.
- Close the Renadette Road IRA and upsize Salmon River Road and Peru IRAs.
- Encouraging staff independence and initiative when making decisions.
- Ensuring that service documentation is being completed contemporaneously.

HUMAN RESOURCES DEVELOPMENT

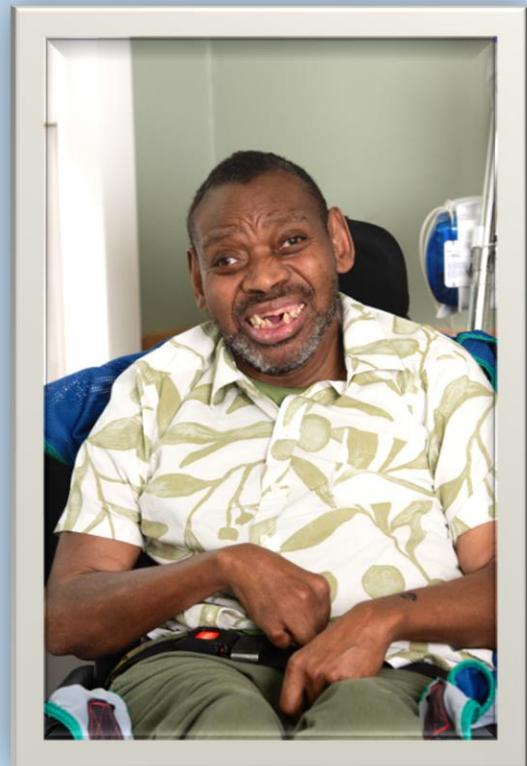
At the end of 2024, the Residential Program included:

- 1 Director
- 4 Assistant Directors
- 1 Administrative Specialist
- 1 Team Training Coordinator
- 12 Managers
- 9 Supervisors
- 121 Full-Time DSPs
- 4 Part Time DSPs
- 48 Relief DSPs

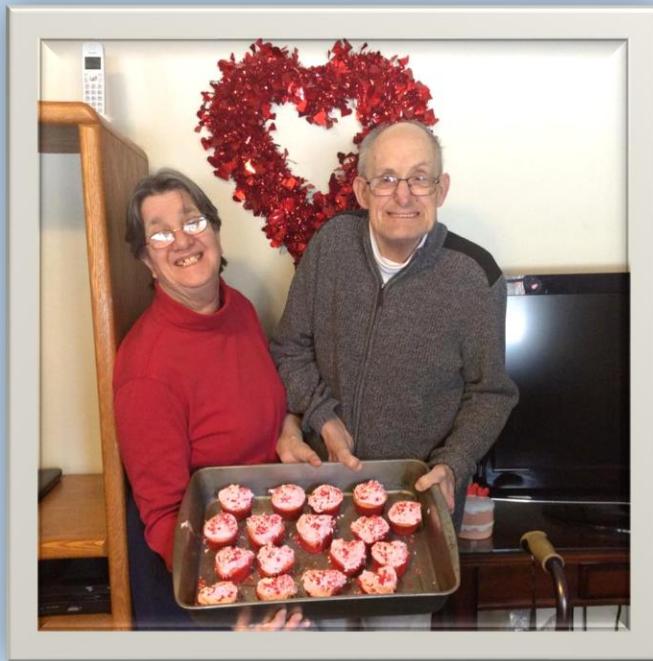
Habilitation Services Enrollments	
Individual Residential Alternatives (IRA)	124
Recreational Respite	3
Day Hab. – ExploreABILITY	92
Day Hab. Without Walls	85
Community Habilitation - R	47



Alex Astwood
“Best catch of the day”



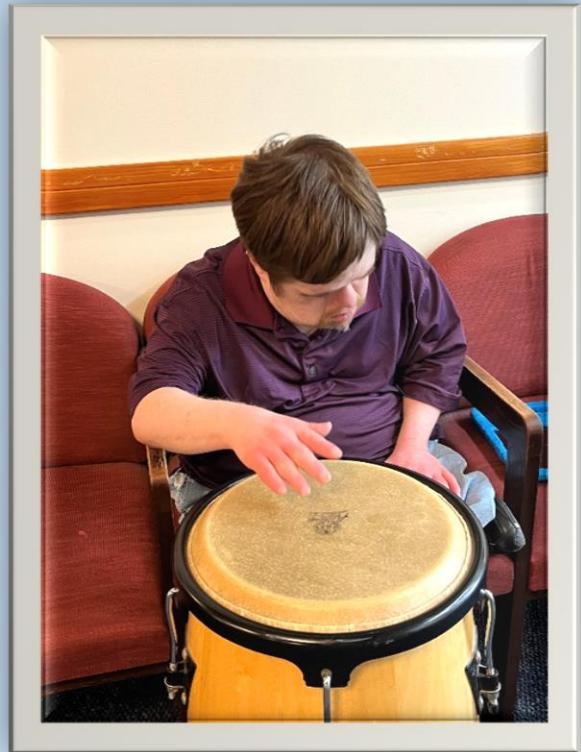
Timmie Stuckey
“You are the sun, the moon, and the stars”



Kim and Robert Hart
“Feel the LOVE”



Lisa Abare and Michelle Tallman
“When you have that special someone to lean on”



Patrick Dupee
“Music Man”



Dwayne Ferris
“Testing the Police Cruiser”

HUMAN RESOURCES

HUMAN RESOURCES DIRECTOR: *Laura Gartshore*

REVIEW OF ACCOMPLISHMENTS – 2024

In 2024, we received 528 applications, of which 367 were for Direct Support Professional positions. Social media sites and online job boards remain critical tools for reaching and attracting potential employees. This year, we enhanced our media presence through targeted radio advertisements with Hall Communications, which positively impacted our outreach. Our focus continued to be on selectivity, enabling us to prioritize qualified candidates. Indeed.com provided the greatest number of applicants, accounting for 53.80% of the total, followed by the Agency Website as the second-highest source of applications. Referral numbers also increased, with 86 applicants coming through employee referrals. Of these, 44 were hired, representing an increase from the 38 referral hires in 2023.

In 2024 we created a new program for Activity Interns. This program is an introduction to the field of intellectual and developmental disabilities geared specifically for high school students. We contacted the high schools in the area and attended the career fair hosted by CV-TEC at SUNY Plattsburgh Field House. We hired 12 Interns who worked with our ExploreABILITY (EA) program during the summer. The interns assisted in activities with the people supported at EA. It was a great success. There were 3 interns who were transitioned to a Direct Support Professional position after completing the program. This is the ultimate goal of the Activity Intern Program; it introduces young adults to who we are and what we do, and they decide to make ARC a career. What a great success for the 1st year!

Recruitment and retention of direct support staff has been the Human Resources department's overriding focus over the past few years. We increasingly spend more time and resources in finding, attracting, and hiring new staff. Our commitment is to continue finding more creative ways to bring applicants in, to increase hiring, and to increase retention.

The implementation of Ceridian/Dayforce as an HR/Payroll software has provided the HR department some opportunities as well as challenges in 2024. We are able to provide a more streamlined and paperless system for applicants and candidates we select for hire. All employee actions are now paperless. Employees are able to update their personal information and have the ability to clock in and out through the Dayforce mobile time clock system. This last item has been the most appreciated by our staff. Management level staff are now able to be more involved in the digital management of their employees by being part of the process. There have been challenges as well, as with any software conversion.

Northern Border Regional Commission Grant – With the funding received at the end of last year from the NBRC grant, we have been able to re-align the HR department staffing to enhance our recruitment efforts. We are now able to have multiple staff solely focused on recruiting and follow-up.

The Agency celebrated employees who have reached 5, 10, 15, 20, 25, and 30 years of service milestones. An in-person dinner was planned and held on September 11, 2024, at West Side. Employees received certificates of appreciation and a gift from the Agency to thank them for their commitment and dedication to the people we support and the Agency. Speeches were made for all employees celebrated and many laughs and a great time was had by all.

Of the employees celebrating employment milestones, individual employee stories were featured on the Agency's Facebook page and the Agency newsletter during the Fall of 2024.

In celebration of Employee Appreciation Day on March 7th, 2024, employees received staff appreciation cards with a \$10.00 gift card from Stewarts. For Thanksgiving, all employees received a \$50.00 Hannaford gift card, fondly referred to as a "Turkey card."

Our annual "Gift from Santa" occurred in early December for the children and grandchildren of all employees. Human Resources shopped and wrapped gifts for more than 200 children. Human Resources also made up goodie bags to go along with the gift, which included a personalized letter from Santa, crafts to make at home, candy and chocolate, and reindeer food to be spread on the snow to make it easier for Santa to find them on Christmas.

Our DSP and DSP Supervisor Apprenticeship Program through the New York State Department of Labor and Fulton-Montgomery Community College continues. We currently have five employees enrolled in the Direct Support Professional and Direct Support Supervisor apprenticeship programs. Staff who go through the program receive related instruction through our partnership with Fulton Montgomery Community College, as well as commit to 2,000 hours per year in on-the-job training. We are also pleased to announce that one DSP Apprentice and two DSP Supervisor apprentices graduated to Journey worker DSP and Journey worker DSP Supervisor in 2024 and have been certified. Our goal is to increase the skills and education of our staff so that they are better able to provide meaningful supports to the people we provide services to. We look forward to more successes in 2025.

HUMAN RESOURCES DEVELOPMENT

In 2024, ARC received 528 applications for both advertised and unadvertised positions within traditional programs, marking a decrease of 843 applications, or 61.5%, compared to 2023. This reduction is largely due to the adoption of the Dayforce system, which enhanced our applicant-to-hire ratio by streamlining the hiring process and attracting more qualified candidates. The Agency hired 150 new employees, resulting in a 28.41% hiring rate from all applicants. Of these hires, 124 were Direct Support Professionals (DSP), comprising 82.67% of all new hires. These 124 DSP hires included 99 in part-time and full-time roles, and 25 as relief staff, representing 33.79% of the 367 applications received specifically for direct support positions.

The Agency's overall turnover rate in 2024 was 22.61%, which is an increase of 2.25% from 2023. There was a total of 196 resignations/terminations. Of the 196 resignations/terminations, there were 119 traditional ARC DSP staff who left (76 part-time/full-time, 43 relief) and 52 self-directed DSP staff resignations/terminations (9 part-time/full-time, 43 relief).

Of the 144 traditional ARC staff terminations, 119 were from DSP positions (76 part-time/full-time, 43 relief) and 25 were other positions. Turnover among full-time and part-time Direct Support Professional staff in traditional ARC programs was 31.92%, a slight increase from 26.14%, in 2023. The overall vacancy rate for these same positions was 43.23%, an increase from the 2023 vacancy rate of 35.51%. The highest vacancy rate for the year was in September, with 46.12%; the lowest vacancy rate was in February, with 37.55%.

The turnover rate in 2024 for self-directed staff was 14.16%. There were 52 (9 full-time and 43 relief) resignations/terminations. There were 63 (7 full-time and 56 relief) hired in 2024. Self-directed staff are hired by individuals supported through the Fiscal Intermediary program. Therefore, they are responsible for the hiring and termination of their own staff. The vast majority of self-directed staff are hired on as relief, or as-needed, basis. The Human Resources department is responsible for processing of all the personnel and payroll related paperwork for these staff. The staff work closely with brokers, designee's and families of the persons supported in ensuring that all federal and state government regulations are met. There are approximately 304 self-directed staff on the Agency's payroll, and they are located all over the various counties that make up the North Country.

FISCAL SUMMARY

Throughout the year 2024, 34 unemployment claims were filed against the Agency. This is down from 43 unemployment claims in 2023. This is a decrease of 21%. These claims had a potential liability of \$182,320.95. Through the efforts of the Human Resources Department, we were able to reduce this liability by \$138,206.13. Though turnover is inevitable, the Human Resources department will continue to help to control the unemployment costs incurred by the Agency.

GOALS FOR 2025

- Integrate the Dayforce Performance Evaluation module for agency use.
- Start Dayforce Wallet availability for staff to have early access to a portion of paychecks.
- Look into a Third-Party Vendor for Wage Management Services.
- Increase amount of monthly data available for analysis.
- Develop deeper relationships with local High Schools and reach out and establish increased recruiting relationships with higher education institutions to help recruit for needed professional positions within the Northeast Region.

INFORMATION TECHNOLOGY (IT) SUPPORTS

DIRECTOR: *Ed Mason*

REVIEW OF ACCOMPLISHMENTS – 2024

Much has evolved in the Information Technology (IT) Team in 2024. After many years with the agency, John O'Connell retired and after multiple interviews, we brought on an internal candidate, Brock Holloway, who has a Bachelor's Degree in Internet Technology.

Work was completed to “re-boot the IT Department” from the ground up so we could start fresh. The focus being on increased communications, better efficiency, and improved fiscal responsibility for all purchases and existing contracts.

In 2024, a Request for Proposal (RFP) to migrate the agency's current data network which is housed at Southside to a secure and private cloud scenario was issued. The migration will benefit our Agency by providing state of the art hardware, firmware, and software that is 100% managed by the cloud service provider. This shall afford our IT team a respectable amount of free time so our focus will be on our users throughout the Agency and their day-to-day needs.

- After providing the RFP to 8 vendors, 3 responded. Each potential vendor had a chance to present their solutions to our IT team. All were comprehensive and impressive. However, we felt that the best fit for our data networking needs would be Twinstate Technologies. Given the technical complexities of migrating an entire data network from an on premise setting to the cloud, we have been working with Twinstate, starting in the last quarter of 2024. In 2025 we will continue to work daily with the Twinstate team to ensure this migration is as seamless as possible. We staged the migration into 3 phases: eliminating Citrix and implementing RDS (Remote Desktop Service) throughout the entire agency and immediately saved \$33,000.00 per year. This phase was completed on January 24, 2025. The second phase is currently being worked on by the entire IT team. This is the cybersecurity and firewall protection of the networks phase which is tedious, but very important to be completed perfectly. The projected completion date is February 20, 2025. Phase three runs concurrent with Phase 2 and shall be completed in March of 2025. This should complete the entire migration and we look forward to continuing to work with our collaborative teams to ensure it does and works 100% as proposed.

A new trouble ticket system was implemented that all users need to utilize in order to get support from IT. This provides an excellent tracking system to see how efficiently the IT responds and resolves the issues the users define. It also shows the level of activity the IT team has throughout each week and helps to optimize the time the IT members are working to support our employees.

- The IT department has implemented weekly meetings to discuss projects, coverage, budget, and responsibilities. This has created an open atmosphere in a safe place for the team to communicate face-to-face. We discussed short-term goals as well as long-term goals.

IT Development

At the close of 2024, the IT department employed:

- 1 Director (shared with CVI Janitorial)
- 1 Coordinator
- 1 full-time IT Specialist

GOALS FOR 2025

- Successfully complete the Data Migration into the Cloud.
- Reduce our monthly expenditures by minimally 15%.
- Review the wireless transmission issues that hinder productivity at agency locations. Create an RFP and contract with a chosen vendor to rectify current issues.



MAINTENANCE

MAINTENANCE DIRECTOR: *Kevin Trombley*

In 2024, the Maintenance Department renewed its commitment to altering our homes to be more handicap accessible and staff friendly. This included remodeling bathrooms to create open showers and updating offices and medication administration rooms with larger spaces to complete documentation and medication passes. This will hopefully create fewer medication and documentation errors. We also did the addition of new ramps, sidewalks, and multiple exits to help with fire evacuations. The department had three major projects this year as well as many smaller projects, some of which were completed and some of which are ongoing. Our team supported many vendor projects with flooring, boiler replacement, and ceiling lift systems installments. The Maintenance Department and its staff are committed to creating and maintaining the best possible living conditions for the people we support.

REVIEW OF ACCOMPLISHMENTS – 2024

Notable projects for 2024 done in-house by the Maintenance Department are as follows:

Smaller projects

- Tree removal at our JCLR site.
- Soper Street - modified the laundry area to be more accessible and gave the home several upgraded storage areas.
- Installed a new French drain at Mountain View to help with the groundwater in the backyard which made the yard unusable.
- An ongoing project is the opening of the Nature Trail behind the Transportation building. The trail was formed, and fill is being trucked in to make it usable for walking and wheelchairs.

Larger Projects

- Salmon River Road: This project was done in four phases: half bath, office/med area, bathroom remodel, and hall protection.

Phase one included taking the first closet in the hall and making it into a new half bath. This gave the home a third bathroom for use when the other rooms were involved with bathing. The second phase was to create a larger office and incorporate the med room. The home had a room that was a kitchenette for the second refrigerator and freezer. These appliances were relocated to the basement, and this space was absorbed into the current office. We then moved the med cabinet into this much quieter and private space. The third phase included a full remodel of bathroom #1. The room had a non-ADA compliant tub/shower unit. This was taken out and the Maintenance staff constructed a walk-in tile shower. The floors were also tiled, and a handicap sink was added. Now this space has a better use no matter what the individual's mobility. The last and final phase was to fix the continual damage to the hallway walls due to wheelchair use. To protect them, hard laminate flooring was put on the walls and then trimmed top and bottom with

boards. The bottom or baseboard was faced with a steel plate to protect the wood. The doors and outside wall corners are now protected by a hard plastic protective cornerboard. This process worked so well that we plan on incorporating it in two other homes in 2025.

- JCLR Airbnb: This project was done to bring in non-Medicaid income for the agency and to offset the lack of state funding. In order to have the home accessible to people in wheelchairs, some changes needed to be made. The exterior of the home needed ramps added and the maintenance staff created two of them with sidewalks leading to the paved driveway. A larger landing was added to the front steps allowing the addition of a future ramp if needed. Stairs and a landing were also added to the large deck and decking boards were replaced. The dated interior of the home was reworked to create a modern feel. To accomplish this, new flooring was installed in most rooms as well as new paint throughout the entire interior. The two bathrooms in the home were remodeled to include tiled walk-in showers, new toilets, and new sinks. Most of the light fixtures were changed to update the look and provide additional light. There was a small amount of work done to the cottage as well.
- Mason Street: Once the two bedrooms were added to the home in 2021, we discovered that the dining area was not large enough for the six people residing there. To fix this issue, we transformed the screened-in porch area and made it into a dining room. The space was insulated, and the floor was raised to be level with the house. New windows were added as well as an exterior door to the open deck. The room was finished off with v-joint pine and a new vinyl flooring was installed. A small ramp was added to the exit from the new dining area and stairs to provide the residents better access to the backyard. This new area for dining allowed us the ability to relocate the office space. Additionally, we were able to incorporate more cabinets for kitchen storage. This included an appliance area and a few new cabinets. At the same time, we did a much-needed upgrade to the bathroom off the kitchen. This room was very large and had a tub that was relocated to another site. This bathroom now boasts new tile floors and a large walk-in tile shower. The existing toilet and sink water lines were relocated and a new toilet and sink were installed. This created a fully handicapped accessible bathroom.

All previously listed work was done in-house by maintenance staff and is a small fraction of what the department does along with their daily work orders.

There were several bid jobs that maintenance assisted vendors on:

- New floors were installed at Church Street
- A new kitchen counter was installed at Macey Lane
- Ceiling and wall lift systems were installed at Whispering Pines, Serenity Drive, and Peru.
- New floors and boiler were installed at Pine Ridge
- Soper Street received new floors in the den and bedroom #1

Work Orders

- Total work orders completed: 2,248 - 202 less than 2023
- 2024 Completion rate is over 90%, a percentage comparable to the previous year.

The **estimated total** of work done **exclusively** by the Maintenance Department was \$206,500. This work was all completed at a cost of \$172,787. This was above all the work orders submitted by staff. All the vendor work was done on budget or slightly under. In addition to the repairs at all the agency's properties, maintenance staff are responsible for plowing the majority of the agency's sites to ensure the safety of the individuals and employees. They also fulfill the contract at Connecticut Court affordable housing for snow removal in the winter and maintaining the landscaping and mowing in the warmer months.

HUMAN RESOURCES DEVELOPMENT

- 10 Maintenance Technician positions
- 1 Maintenance Director
- 1 Maintenance Coordinator
- 1 Office Support Assistant
- 1 Painter
- 1 Landscaper
- 1 Janitorial position
- 2 Limited hour staff. One in Janitorial and one in Maintenance

The Maintenance Department is growing in experience daily. The staff are well versed in all forms of construction work. They learn from each other and all work together very well. The Coordinator and Office Support Assistant are pivotal staff when it comes to the running of the day-to-day operations. The team's value as a whole is unmeasurable to the success of the department.

GOALS FOR 2025

- Training is always a priority for the department to help every employee with the information and skills to be better each day.
- Strive to complete 95% or more work orders before year-end.
- Monitor spending and use our in-house stock before new supplies are purchased.
- Explore new Non-Medicaid income opportunities.



Mason Street IRA - new front entrance



JCLR sidewalk

NURSING SERVICES

DIRECTOR: *Dan Johnson RN*

REVIEW OF ACCOMPLISHMENTS – 2024

The nursing department provided numerous training opportunities in 2024. Initial medication certification and recertification classes continued to be offered throughout 2024 in the same frequency as the prior year due to needing to maintain smaller class sizes to accommodate maintaining safe staffing patterns in the residences during training hours. In December of 2024, the time of the class was changed to be more conducive to the staffing patterns of the daytime staff in order to facilitate increased attendance. In conjunction with the medication certification/recertification classes, Nursing completed 253 medication pours to keep the 140 medication-certified staff in compliance with OPWDD regulations.

The nursing department was responsible for arranging 2,151 medical appointments for individuals served by the Agency in 2024, this number is fairly consistent with the prior year. This not only involved scheduling but providing information to providers and subsequently completing follow-ups as necessary and data entry related to the appointment including all necessary dissemination of pertinent information.

We continued to work collaboratively with the Clinton County Health Department to ensure Flu shot immunizations for the individuals in residential. During this clinic, we also partnered with Keeseeville Pharmacy to administer updated COVID vaccinations. A total of 116 flu vaccinations and 93 COVID boosters were administered in a three-hour period of time. In conjunction with CPH, we arranged for five blood drives, with a total of 63 units obtained throughout the year.

Nursing supports at the Serenity Drive IRA were restructured throughout 2024. With the departure of several nurses, the decision was made to eliminate the RN supervisor position and use the resources elsewhere in the nursing department. Part of this restructure was adding an LPN to work out of the ExploreABILITY program which minimized the need for an RN on site daily at this location. This change provided better use of the RN hours in trying to minimize the impact of two full time RN vacancies within the department. This change made a difference in RN availability which was further appreciated after the departure of several other nurses from the Serenity Drive location and the need to allocate nursing supports from the residential nursing department.

As also mentioned in the behavioral services annual report, in a joint effort with the behavioral services department, we were able to partner with North Country Behavioral Medicine and their representative, James VanNess P.A., to begin an on-site psychiatric appointment clinic out of the CVI location.

HUMAN RESOURCES DEVELOPMENT

The department consists of:

- 1 Nursing Services Director

- 6 Residential RNs (1 vacancy)
- 1 Day Program LPN
- 1 Residential LPN
- 1 Support Assistant
- 1 RN (Serenity Drive)
- 1 LPN (Serenity Drive) (4 vacancies)
- 4 Per Diem LPNs (Serenity Drive)
- 1 Per Diem RN (Serenity Drive)
- 1 Contracted Registered Dietitian
- 1 Contracted Clinical Psychologist

GOALS FOR 2025

- Update and implement in-person training for selected topics that had been moved to digital format due to the restrictions associated with the COVID pandemic.
- Explore alternative options for Nursing recruitment in an effort to fill vacant positions.
- Work in conjunction with IT department to successfully pilot use of EMAR via Precision Care in at least three residential homes.
- Continue to partner with CVPH, Clinton County Health Department, and NCBM to maintain positive community partnerships in the region.

FISCAL SUMMARY

The Nursing department does not have its own budget but works conservatively within the fiscal constraints of the Habilitation Services Program's budget.

BEHAVIORAL SUPPORT SERVICES

DIRECTOR: *Dan Johnson RN*

REVIEW OF ACCOMPLISHMENTS – 2024

The Behavior Specialists developed, implemented, and monitored 55 behavior support plans and 30 medication monitoring plans as well as five behavior guidelines throughout the year. Department personnel spent countless hours providing training to staff on the effective implementation of behavior support plans. Many training sessions required in-person, real-life role-playing scenarios to adequately train staff on decisions and tactics necessary to best serve the individuals when dealing with the struggles related to their specific behavioral needs.

There were 171 physical interventions necessary in the year 2024 compared to 140 that were necessary in 2023. Although there was an increase in the past year it should be noted that 62 of the physical interventions were necessary for one individual that experienced several medical concerns resulting in an increase in maladaptive behavior as they struggled with the medical conditions. Numerous restrictions were faded from behavior support plans throughout the year as individuals, behavior department staff, and DSPs collectively worked through the components of the plans to achieve the desired outcomes of reducing behavioral challenges. Some of the faded restrictions were: physical interventions (1), community restriction (2), cell phone restriction (2), as well as multiple monitoring devices being discontinued.

The behavioral support services personnel provided support and advocacy to the individuals supported throughout the year by accompanying them to many of their appointments with their psychiatric providers whenever possible. They provided the necessary amount of assistance to promote optimal independence while ensuring an accurate account of current behavioral challenges and/or successes were relayed. A Relationship and Friendship class was developed and implemented this year to provide supports for multiple individuals that have struggled with navigating the complexities of interpersonal relationships.

There was an addition of several staff to the department in 2024 with the hiring of a Support Assistant as well as an additional Behavior Intervention Specialist and Behavioral Clinician. With the increase in staffing supports for the department, two of the department staff were able to complete training to become Certified SCIP-R instructors which provided tremendous supports to the training department with a finite number of trained instructors available.

Finally, in a joint effort with the Nursing Department, we were able to partner with North Country Behavioral Medicine and their representative, James VanNess P.A. to begin an on-site psychiatric appointment clinic out of the CVI location.

This brought a greater degree of comfort as well as accessibility for these appointments and the individuals participating have given excellent feedback about this change. The clinic is running half days at this time with the intent to go to full days in 2025 as well as a possible increase in the frequency the clinic is held. We are very pleased with this successful venture with a community partner.

HUMAN RESOURCES DEVELOPMENT

The departments consist of:

- 1 Support Assistant
- 2 Behavior Intervention Specialist I
- 1 Behavior Intervention Specialist II
- 2 Behavior Clinicians
- 1 Contracted Clinical Psychologist

GOALS FOR 2025

- Input remaining Functional Behavior Assessments (FBA) into Precision Care for each individual in the residential program with a Behavior Support Plan (BSP) by April 30, 2025.
- Create a curriculum for internet and social media safety for the people we support and to show staff how they can be supportive with these platforms.
- Implement tracking on the duration of physical interventions for inclusion in clinical reports and to better track the progress of strategies within behavior support plans.

FISCAL SUMMARY

The behavioral department does not have its own budget but works conservatively within the fiscal constraints of the Habilitation Services Program's budget.



QUALITY MANAGEMENT

DIRECTOR: *Michelle Tallman*

REVIEW OF ACCOMPLISHMENTS – 2024

In concert with the agency's strategic plan, the Quality Management department spent the latter part of 2024 redesigning the orientation training platform. The orientation training schedule was expanded by one week to allow for additional classes to be added and to lengthen the time of some of our current courses to slow down the information being shared and give opportunities for conversations, as well as adequate question and answer times for a more thorough understanding of course content. In total, 17 classes have been added to the orientation training profile. Ten classes are brand new and seven classes were brought back from online learning to live courses taught in the classroom. The new courses include: money management, communication and professionalism, requirements of documentation, work orders, introduction to mental health and dual diagnosis, human rights and dignity of risk, introduction to directors, vantage point training, dementia / end of life training and introduction to the buddy program. We incorporated three observation times throughout orientation where the employees go to the site they will be working and observe various identified tasks from transfers to personal care to running services. It is designed to give context to the course content they are learning about and then given the opportunity to see the skills in action.

In 2024, 75 refresher training classes were held along with 25 orientation sessions. Orientation training was provided to 125 new employees during the year. Self-Direction services hired 62 new employees whose orientation training requirements were completed through Relias (online training software). The Quality Management department coordinated with CITEC Business Solutions to provide Management Development training to employees who supervise others. This was a six-week course that covered such topics as the fundamentals of managing others, coaching and motivating, interpersonal and communication skills, effectively addressing difficult employees and managing conflict. Two six-week sessions were scheduled to allow for a more intimate learning environment for the attendees. In total, 43 employees completed the management training course.

In June of 2024, the agency had OPWDD surveyors come to complete an agency review. Overall, the review was positive. One area that needed improvement was needing to tighten up on our tracking of incident management and processes.

In August of last year, Quality Management had a new position added to the department: Data Analyst. This position plays a critical role in helping the agency make informed decisions based on data. By using data informed decisions, the agency can recognize emerging trends, mitigate risks proactively, and respond in real time to better manage strategies and operations. In 2024, the basic assurance statistical report was updated by the data analyst to show the information in live time. Statistical reports were created for the Special Review Committee to show, at a glance, the various datapoints the agency is audited against and how we compare against the standards of the field. Current projects that are underway are the development of dashboard reports for the Executive Administration. Each dashboard developed will be unique to the position and will report on the data points chosen by the person. Dashboards allow the user to refresh the data at any time for live, up to date statistics.

Quality Management led the agency review, on-sight visit from the Council on Quality and Leadership (CQL) regarding our person-centered accreditation in the fall of 2024. The agency was commended for our work with addressing items in the Basic Assurance Plan, Personal Outcome Measure Plan, the Person-Centered Excellence Plan, and for using data to make continuous improvements in the service delivery system. Our accreditation continues for the remainder of the four-year cycle.

GOALS FOR 2025:

- The Quality Management department will create individual dashboards for each Director in the agency to monitor data in live time to proactively identify trends and adjust strategies accordingly.
- The Quality Management department will develop training feedback tools to gain insight and identify changes needed to the newly developed orientation training.
- The Quality Management department will lead the application and review process for continued accreditation with the Council on Quality Leadership (CQL).

HUMAN RESOURCE DEVELOPMENT

The Department consists of one Quality Management Director, one Quality Management Assistant, one Data Analyst, one Quality Enhancement Coordinator, one Staff Educator, one Training Specialist, one Quality Management Auditor, one Quality Management Specialist, and two Quality Enhancement Specialists.



PROGRAM ENROLLMENT

	Program Capacity	Enrollment 12/31/2023	Enrollment 12/31/2024	Total Active in Program
Habilitation Services				349
Day Hab (PATH)	110	97	96	
Without Walls Day Hab	*	87	77	
Individual Residential Alternatives (IRA)	129	121	124	
Com Hab-R	*	38	48	
Recreation Respite	*	6	3	
Employment Services				117
Pathway to Employment		0	0	
Workforce Network (ACCES-VR and OPWDD SEMP)	*	94	110	
Family Education & Training	*	0	0	
Community Prevoc	*	6	6	
ETP (OPWDD internship)	*	3	7	
Work Exp.	*	8	0	
Fiscal Intermediary Services				599
Fiscal Intermediary / Self-Directed	410^	436	409	
Agency Brokerage	*	163	151	

* No limit on capacity to provide services

^ Based on program budget/contract

SELF-ADVOCATES

PRESIDENT: *Mark Fournier*

ADVISORS: *Nicole Claffey and Amanda Snide*

REVIEW OF ACCOMPLISHMENTS – 2024

2024 was certainly a whirlwind of events and accomplishments for our self-advocacy group, CapABILITIES. The group remains dedicated to advocating for all those we support though continuing to offer our peer mentoring support program. This is a service provided from the group members to those in our agency to contact them for any support or advice. While there has yet to be any “calls”, we are there in the wings if and when we are needed. The members meet twice a month and we also started a second group that meets at ExploreABILITY once a month to help educate more on their rights and responsibilities. One group member has started a grief support group that he offers to anyone to cover a vast array of grief support, which includes not just the death of a person but anything a person may feel a sense of loss from; such as staff leaving, a pet passing, loss of a job and so on. In addition to this, two of our other group members were invited and accepted to become members of the agency’s Membership Committee. They assisted in helping to get the word out on why membership is so important.

General Information on the CapABILITIES Self-Advocacy Group:

- The group is led by Agency Counselor Nicole Claffey and Quality Enhancement Specialist Amanda Snide, with various other staffing supports depending on the task or event.
- The group currently has 6 people we support as the core group members, with various others who are able to attend and contribute as they wish.
- The group continues their role as presenters for the new hire classes for the Advocacy and Resource Center’s Meet and Greets, offering their insights into the needs and wants of people served to new staff being trained.
- The group continues their role in their assistance providing input and suggestions on grievances filed by people we support.

2024 Proud Moments from CapABILITIES:

- CapABILITIES held their annual picnic this year. While the weather was not our friend that day and we had to hold the event inside, we still had a wonderful turnout and the event was a big success!
- The group attended 2 rallies at the State Capital War Room, advocating for the much needed increases in funding. Along with this advocacy, our CapABILITIES President Mark Fournier and Kim Trombley have compiled a video message that was sent to Governor Hochul which highlighted how much our staff do on a daily basis, the dire need for living wages for staff, and of the staffing crisis. They also invited Governor Hochul to come to spend a day in one of our residences to get a first-hand glimpse into the lives of the people we support.

- The group attended the statewide annual Self Advocates of New York State (SANYS) Conference and was able to take part in a number of group presentations along with meeting new people and networking with other agencies.
- We hosted a disabilities workshop for the Boy Scouts. This was a tremendous success with over 50 kids in attendance! Feedback was overwhelmingly positive, in particular, one of the activities offered was “vantage point”, where the kids were able to experience how it could be to have a disability by using items such as a sling, an eye patch, or goggles to simulate blindness.
- The group attended a Professionals for Inclusion event that was offered to the community this past summer at the Momont Elementary School. The self-advocacy members were available to hand out pamphlets and answer questions posed to them.
- Splash, an event held at CVI, was another event that the self-advocacy members made an appearance at, again, offering pamphlets and answering questions from those who stopped by our table.
- Fundraising for the group has opened up a monthly snack and movie night that we offer at ExploreAbility for a small fee from attendees. This has been a huge success as well and we hope to continue this.

GOALS FOR 2025:

- Continue our efforts to reach out to people for our Peer Mentoring program to offer support with grievances and spreading education to our peers and new staff alike.
- Host another event for the Boy Scouts in the year 2025.
- Further participation in rallies to advocate for people with disabilities and the staff that support them.
- To host at least one education opportunity at a local elementary school.
- Explore more donation events in order to give back to our community.

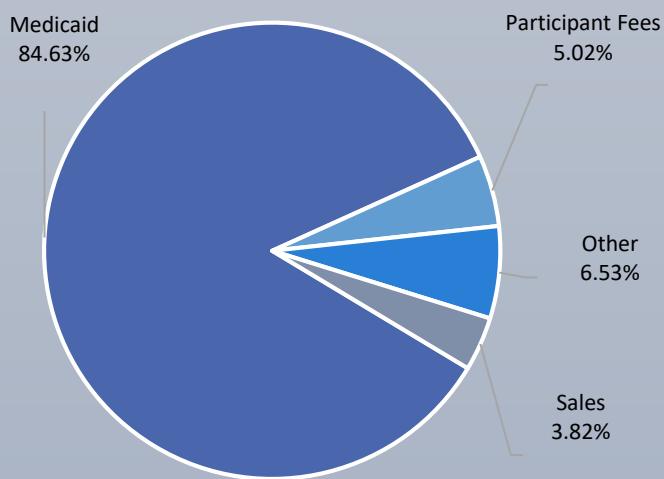


L-R: Matthew Cayea, Kim Trombley, Mark Fournier, and Stuart Darrah in the back

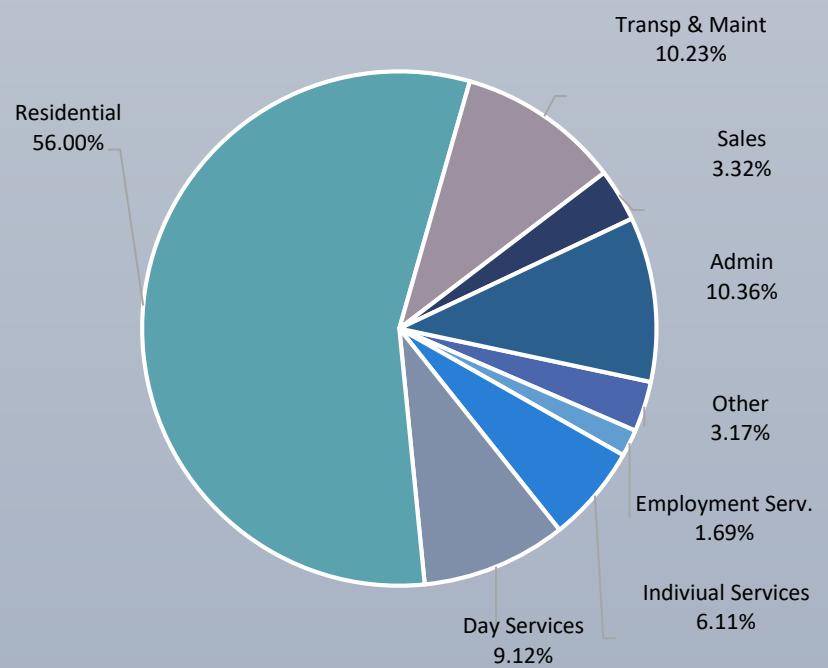


SOURCE AND USE OF FUNDS

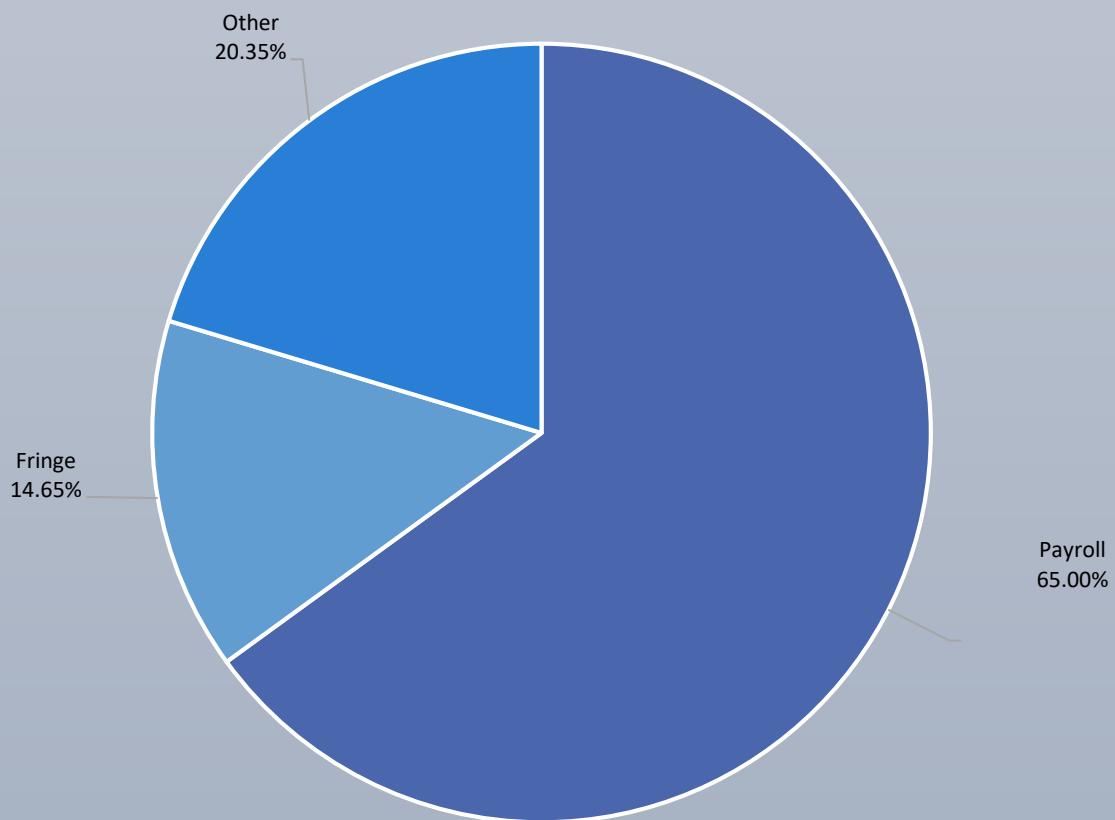
2024 Source of Funds
32,067,269



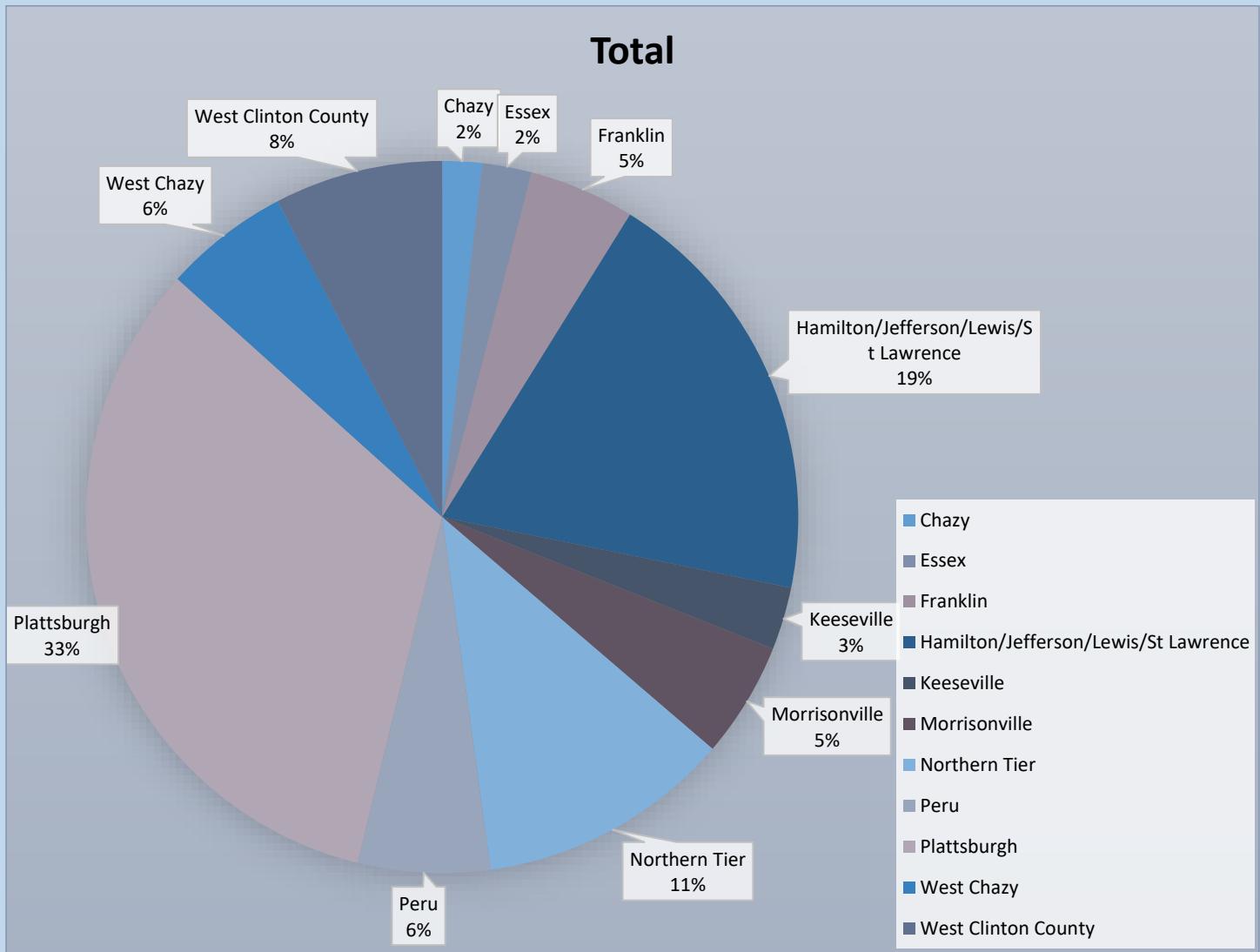
2024 Spending by Program Type
32,938,682



Breakdown of Expenses
\$32,938,682



TRADITIONAL AND SELF DIRECTION STAFFING BY REGION



"We truly appreciate our staff"

TRANSPORTATION SERVICES

DIRECTOR: *Jack Smith*

REVIEW OF ACCOMPLISHMENTS – 2024

The transportation department had a very active year filled with many positive achievements in 2024. Our goal continues to seek to maximize the unused value of existing assets while upgrading the fleet where needed. To that end, the residential program received four new 2024 Toyota Sienna vans and a new 2023 Ford Transit wheelchair van. The vehicles recovered from these upgrades to the IRAs, were used to fortify the loaner program at transportation and one van also went to the supported employment program, improving their fleet. We chose not to sell off any assets in 2024 due to the high cost of new vehicles. Instead, we held on to our current rolling stock and did some major body repairs to passenger vans #60 and #80, giving them new life for years to come. The transportation garage continued into its fourth full year of servicing staff and community vehicles. The program exploded in 2024 besting pre-taxed sales of 2022 and 2023 combined by \$2,000. Total TCP sales reached \$110,000 compared to \$70,000 in 2023. Services included tire mounting and balancing, oil changes, brakes, and work necessary to pass New York State inspections. Likewise, the Plattsburgh City School District bus work remained steady with sales of \$42,000. The garage team totaled outside sales of \$156,161 and provided 880 services, all while expertly caring for our fleet of 126 vehicles. The most important work our technicians perform is to provide safety inspections, preventative maintenance, and repairs for the agency vehicles and in this endeavor, they perform with distinction. The garage team currently has a streak of three full years with no DOT inspection failures in its work to maintain five agency buses and seven Plattsburgh City School District buses. Our garage team was honored to provide mechanical service to the Clinton County Honor Flight bus in 2024 and stands ready to help them with future needs. In celebration of the agency's 70th Anniversary, the transportation team joined together to hold an old-fashioned full-service gas pump event. Those who attended were treated to full service which included a gas fill-up, window washing, and a cold bottle of water. We once again provided bus transportation for a successful tour, that brought the Board of Directors and agency executives to IRA's. Tours such as these provide all involved with first-hand views of our homes, staff, and the individuals to whom we support. Bus staff also provided transportation for several advocacy events to Albany throughout the year as well as several fun trips in support of ExploreABILITY, which include a trip to Lake George for tubing and one to the local pumpkin patch.

HUMAN RESOURCE DEVELOPMENT

The Transportation Director continued participation with the Clinton County Coordinated Transportation Committee. The Agency Driver Trainers continued to provide orientation and remedial driver training for the eight commercial drivers and approximately 400 agency drivers throughout the year. The department has hired an additional driver who will be trained as a bus driver this spring to help strengthen the team. In the garage area, we will look to develop an assistant to our head mechanic to allow for better coverage and enhanced leadership in his absence.

Transportation Services Staffing

- 1 Transportation Director
- 1 Transportation Coordinator/Driver/Driver Trainer
- 2 Driver / Driver Trainer
- 1 Transportation Clerk
- 1 Lead Mechanic / Maintenance Scheduler
- 4 Vehicle Mechanics
- 1 Vehicle Auto Body Tech / Mechanic (Vacant)
- 3 Full-Time Bus Drivers / Including Coordinator
- 1 Full-Time Bus Driver in Training
- 1 Relief Bus Driver
- 6 Full-Time Driver / Monitor
- 2 Relief Bus Aides / Including a Transportation Clerk
- 2 Wash Bay/Corrosion Control Tech

FISCAL SUMMARY

After a few years removed from the pandemic, we have returned to normal travel activities. The residential programs increased travel in 2024 by 225,375 miles for a total of 568,167. Throughout the agency, mileage increased by 268,000 for a total of 1,017,470 miles. The agency had eight accidents in 2024. None of those accidents resulted in an injury to staff or persons supported. The health of our fleet is in good shape, although our oldest group did go from being 6% of the total fleet to 16% in 2024. There is some concern that this aging group will continue to increase in overall percentages based on our current replacement rate. Our new vehicles (0-4 years old) make up 30% of the fleet and our nearly new (5 to 8 years old) accounts for 29% of our total fleet, coming into 2025.

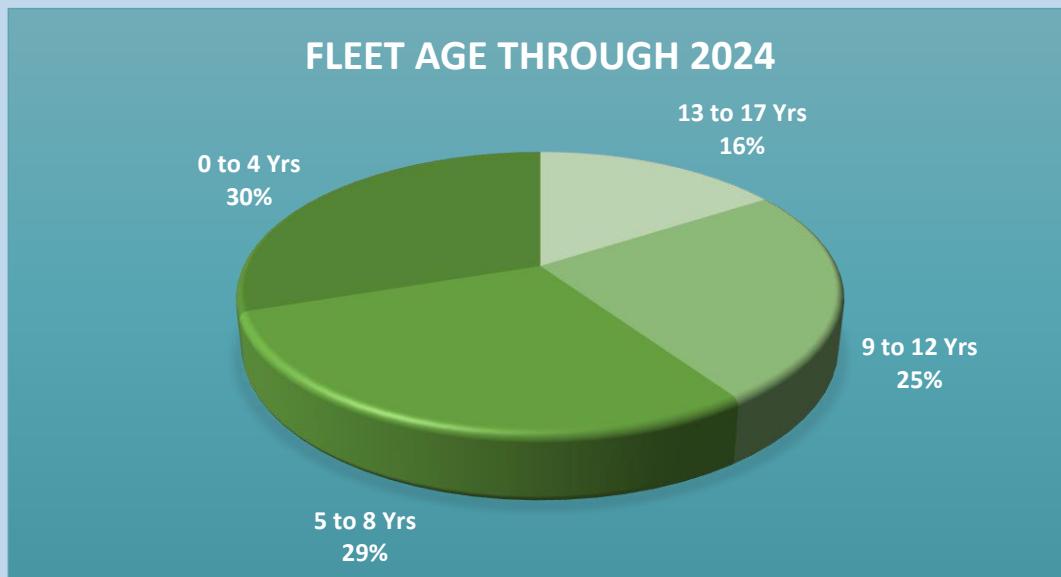
PROGRAM COMPLIANCE

The Section 5310 Federal Grant Program was effectively administered throughout the year, as required. The agency's administration of the Federal Drug and Alcohol Testing Program (FMCSR) successfully stayed in compliance with federal specifications and as an agency, we had zero failed tests. In addition, the agency transportation department joined the required National Drug Clearing House, a new FMCSR program, to better track drug and alcohol testing compliance. Clearing House queries were conducted in late December and drivers remained in compliance. The transportation department successfully administered the New York State Department of Motor Vehicles 19-A Bus Driver Certification Program and new passenger safety regulations for 2024. The annual Affidavit of

Compliance was submitted in October and accepted. The Transportation Department continues to maintain a no-lost work time accident record.

GOALS FOR 2025

- Continue to develop the community transportation project work and find ways to increase car count in 2025. A goal is set for 700 cars between outside contracts and public consumers.
- Maintain service outlined in our new agreement with the Plattsburgh City School District.
- Assist the Clinton County Honor Flight as needed to give back to the community at large.
- Move the garage compressor from the main garage area to the storage bay, which will reduce environmental noise and increase communication ability between mechanics.
- Continue to support bus trips for individuals supported.
- Build on ways to support Article 16 and doctor appointments in support of IRAs.
- Train newly hired bus drivers and assist them in obtaining their 19A Certification.
- Train new trainers for van certification, behind-the-wheel, and classroom.
- Continue to make safety a top priority for all transportation department employees as well as the drivers who are trained here on behalf of the agency.
- All required training is to be kept current, with on-time completion expectations to be at a 90% minimum.
- Maintain a 5-year plan for vehicle replacement and large wheelchair van upgrades with an emphasis on buying vans with the capacity to hold 4 wheelchairs while maintaining the flexibility to add seats when needed.





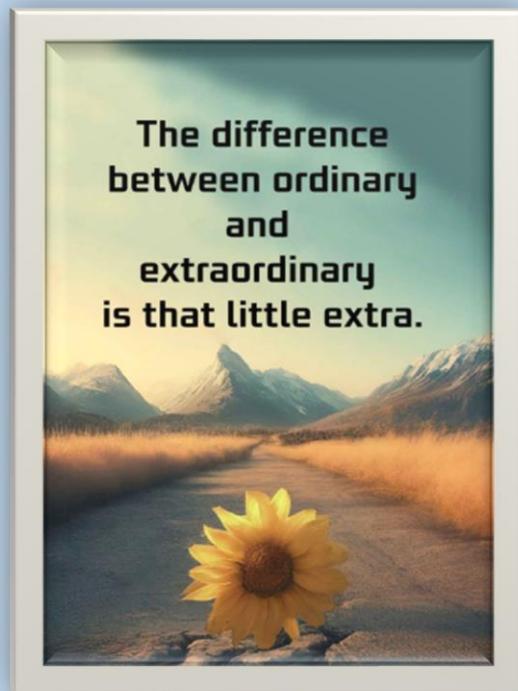
One of 5 Sienna vans purchased in 2024 provided upgrades to several IRAs.



Transportation held an old-fashioned full-service pump day to help celebrate our agency's 70 years of service. It was our pleasure to serve our guests and to see the smiles as we demonstrated a little bit from days gone by.

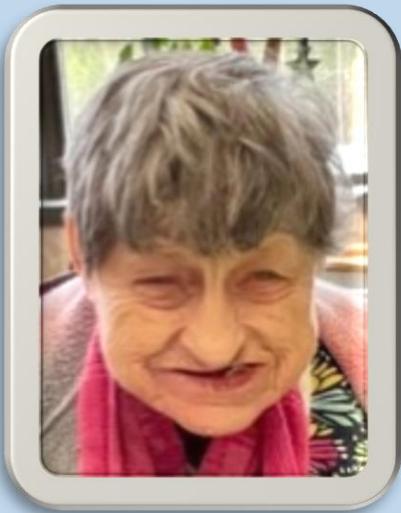


We were both pleased and proud that we were able to help the Clinton County Honor Flight service their bus in 2024. Our bus and wheelchair lift expertise sure came in handy and it was our honor to serve those who have served this country valiantly.



IN LOVING MEMORY

A special smile, A special face,
In our hearts, A special place,
Memories are A gift to treasure
Ours of You will last forever



Geraldine Chappell

03/26/1939 – 03/02/2024



Scott Barber

11/27/1968 – 09/19/2024

***The Advocacy and Resource Center
is a non-profit corporation.***

**Your tax-deductible contribution
to our programs
will be gratefully acknowledged.**

Have you considered ARC as part of your estate planning?

**Thank you for being a member and if you know of others
who are interested, please have them contact us.**



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