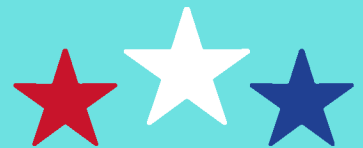




Clinton County Chapter NYSARC, Inc. dba

Advocacy and Resource Center

2025 Annual Report



Honoring our Past.
Empowering Every Future.

Advocacy and Resource Center

Supporting people to live their lives to the fullest

Celebrating his peers from last year's Annual Meeting



Keith

Having fun at the mall



Jimmy

Advocacy and Resource Center

Board of Directors

Rosemary LaMarche • President

Richard Higgins • 1st Vice President

Cynthia Lacki • 2nd Vice President

Robert Frenyea • Treasurer

Jill Abdallah • Secretary

James Ashe • Debra Donahue • Jerry Ducatte • Angela Esposito

Mark Fournier • Ray Guydosh • Merrilee Hamlin

Karen Hulbert • Kevin Ryan • Jane Thomson • Joanna Valente Orr

Agency Administration

Executive Director

Robin Pierce

Associate Executive Director

Lori Lobdell

Executive Administrative Assistant

Shannon Laurin

Agency Directors

Director of Business Development • Edward Mason

Chief Financial Officer • Jeremy Rassing

Director of Corporate Compliance • Valerie Bragg

Director of Employment Services • Michelle McGrath

Associate Director of Habilitation Services • Nicole Rivers

Director of Human Resources • Laura Gartshore

Director of Maintenance and Facilities • Kevin Trombley

Director of Nursing & Behavioral Services • Daniel Johnson

Director of Quality Management • Michelle Tallman

Director of Transportation • Jack Smith

Advocacy and Resource Center

Committee Board Members & Community Volunteers

Audit

Robert Frenyea • Chair

James Ashe • Ray Guydosh • Richard Higgins • Rosemary LaMarche
Lori Lobdell • Robin Pierce • Jeremy Rissing • Kevin Ryan

Corporate Compliance

Joanna Valente Orr • Chair

Robert Frenyea • Vice Chair

Valerie Bragg • Corporate Compliance Director

James Ashe • Laura Gartshore • Richard Higgins • Cynthia Lacki
Lori Lobdell • Tim Lord • Michelle McGrath • Robin Pierce
Jeremy Rissing • Michelle Tallman • Stephanie Tourville

Executive

Rosemary LaMarche • President

Richard Higgins • 1st Vice President

Cynthia Lacki • 2nd Vice President

Jill Abdallah • Secretary

Robert Frenyea • Treasurer

Merrilee Hamlin • Past President

Robin Pierce • Executive Director

Finance • Building • Transportation

Robert Frenyea • Chair

Rosemary LaMarche • Vice Chair

James Ashe • Jill Abdallah • Jerry Ducatte • Tabitha Fletcher
Ray Guydosh • Richard Higgins • Lori Lobdell • EdMason
Robin Pierce • Jack Smith • Kevin Trombley

Advocacy and Resource Center

Committee Board Members & Community Volunteers

Guardianship

Jane Thomson • Chair
Joanna Valente Orr • Vice Chair
Maris Haynes • Guardianship Coordinator
Michelle Arnold • Guardianship Coordinator
Valerie Bragg • Support Coordinator

Nina Cole • Angela Esposito • Carole Holmes • Karen Hulbert
Dean Lombard • Tim Lord • Nanette Niemann • Cynthia Rotz • Kevin Ryan

Membership

Jane Thomson • Chair
Joanna Valente Orr • Vice Chair

Angela Bernard • Ashley Davies • Rachelle Givogue-Ruest •
Betty LaPierre • Carol Ann Lashway • Shannon Laurin • Lori Lobdell •
Heather Magoon • Heather Martin • Jocelyn Saliba • Holli Velie

Nominating

Karen Hulbert • Chair

James Ashe • Debra Donahue • Joanna Valente Orr

Personnel

Joanna Valente Orr • Chair
Jane Thomson • Vice Chair

Jerry Ducatte • Debra Donahue • Angela Esposito •
Laura Gartshore • Lori Lobdell • Robin Pierce • Kelly Smart

Advocacy and Resource Center

Committee Board Members & Community Volunteers

Residential Services

Cynthia Lacki • Chair

Karen Hulbert • Vice Chair

Sarah Cayea • Nina Cole • Lori Lobdell

Teresa Mahoney • Nanette Niemann • Michelle Tallman

Pamela Terry • Kevin Trombley • Nancy Wild

Special Review

Cynthia Lacki • Chair

Debra Donahue • Vice Chair

Laura Gartshore • Daniel Johnson • Lori Lobdell

Dean Lombard • Michelle McGrath • Kevin Ryan

Jack Smith • Michelle Tallman • William Trombley

Showing support for the annual Polar Plunge event.



Polar Plunge Mascot • Stuart

DJ Sarah Spencer on a special tour of the radio station



DJ Sarah • Kim

Berry picking at Rulfs Orchard



Emerson

Table of Contents

A Message from the Board President -----	9
Executive Director's 2025 Annual Report to the Board of Directors -----	10
Focus of the Agency -----	12
Our Guiding Principles -----	13
Quality Enhancement -----	15
Article 16 & Clinical Services -----	17
Corporate Compliance -----	20
Business Development & CVI Janitorial -----	22
Employment Services -----	25
Fiscal Intermediary Services -----	27
Guardianship Services -----	29
Habilitation Services -----	30
Human Resources -----	37
Information Technology -----	41
Maintenance -----	42
Nursing Services -----	45
Behavioral Support Services -----	47
Quality Management -----	49
Transportation -----	51
Self Advocates -----	55
In Loving Memory -----	57

A Message From the Board President

Rosemary LaMarche • Board President

Dear Friends,

Last year, I was elected to serve as the President of the Advocacy and Resource Center Board of Directors. I was honored to follow in the footsteps of Merrilee Hamlin and wish to begin by thanking her for the fourteen years of extraordinary leadership she provided in that capacity!

This past year has passed quickly. Much has been accomplished within our agency. I'd like to take this opportunity to highlight some of these accomplishments as follows:

- Strategic planning across all departments has resulted in enhanced communication through "Connecteam." This app keeps DSPs connected to each other and to supervisors throughout the organization. A primary feature and advantage is to send announcements, note shift changes, and share important program information quickly and efficiently.
- The Buddy Program was also developed and implemented through the strategic planning process. New DSPs feel welcomed and supported from day one as they are paired with an experienced staff member working in that role. This program helps new staff understand routines, documentation, and expectations of best practices for person-centered care. Consistency and quality of care, smoother transitions for new hires, and increased staff retention are just a few of the positive outcomes of this mentorship program.
- Planning for the approval of the Hamlin Heights project is well underway. When completed, this project will provide accessible and affordable housing opportunities for individuals with developmental disabilities and the workforce we employ.
- The Board of Directors increased the base rate of pay for DSPs in March 2025.
- Additionally, three individuals from Ghana were hired through the H-1B Visa Program and assumed habilitation duties at Orchard Way. We plan to bring in additional staff as we strive to lower staff vacancies. The Board understands and appreciates the hard work and dedication of our DSPs as they assist the people we serve with daily living skills, community experiences, and independence, and provide guidance and emotional support. They are the heart and soul of this agency.

As we go forth, our continued focus and advocacy is needed at the local and state level in the following areas:

- A fair and livable wage for DSPs.
- Enhanced childcare for working families and preschool for all children.
- The preservation of Medicare and Medicaid so that all people have access to quality medical care.
- Increased housing opportunities for working families.
- Dental care for individuals with developmental disabilities.

Across the agency this year, staff, the people we serve, board and committee members alike were saddened by the passing of Jared West on September 11, 2025. He contributed greatly to furthering the goals of the ARC and will be long remembered as an advocate and true friend of individuals with developmental disabilities. Let us honor Jared by emulating the values he embraced of respect, compassion, and inclusion for all.

As we go forth together with confidence and positivity, the words of Helen Keller come to mind. "Alone we can do so little; together we can do so much."

Thank you to all of you for contributing to the success of our agency during this past year!



Executive Director's 2025 Annual Report to the Board of Directors

Robin A. Pierce • Executive Director



Review of Accomplishments — 2025

As we reflect on 2025, we are reminded that while each year brings new challenges, our mission remains constant: supporting people with intellectual and developmental disabilities to live meaningful, self-directed lives in their communities.

The past year required resilience, adaptability, and collaboration. The needs of the individuals and families we support continue to evolve, and the human services workforce continues to face pressures felt across New York State and the nation. Despite these challenges, our staff continued to show up every day with dedication and purpose.

At the Advocacy and Resource Center, our work is rooted in respect, dignity, and opportunity. Every program we provide and every decision we make is guided by the belief that people with intellectual and developmental disabilities deserve the same opportunities as anyone else—to live independently, participate fully in their communities, and pursue lives of meaning and purpose.

In 2025, we strengthened programs, built partnerships, and began planning for the future of our organization. None of this progress would be possible without the dedication of our staff, the leadership of our Board of Directors, and the voices of the self-advocates who guide and inspire our work.

Strategic Planning for the Future

During 2025, ARC leadership and the Board of Directors continued the work focused in the Strategic Plan. This process focused on evaluating current services, identifying emerging needs, and ensuring that the organization remains strong, responsive, and sustainable.

Key areas of focus in our strategic planning include:

- **Strengthening the Workforce**

Like many human service organizations, ARC continues to face workforce challenges in recruiting and retaining qualified staff. In response, we have taken proactive steps to expand our recruitment efforts and explore innovative solutions to ensure continuity of care and high-quality services.

One strategy implemented in 2025 was expanding our recruitment efforts internationally. Through the H-1B visa program, ARC welcomed professionals from Ghana who bring valuable education, training, and experience in the human services field. These team members contribute not only their professional skills but also diverse perspectives that enrich our organization and strengthen our workforce.

International recruitment represents one component of our broader strategy to build a stable and sustainable workforce while continuing to recruit and develop local talent.

- **Enhancing Quality and Person-Centered Services**

ARC remains committed to continuously improving services so that individuals receive supports tailored to their goals, interests, and needs.

- **Expanding Community Engagement**

We are working to strengthen relationships with community partners, businesses, and organizations to create more opportunities for inclusion and participation.

- **Ensuring Organizational Sustainability**

Strategic planning also includes evaluating operational systems, financial sustainability, and long-term planning to ensure ARC remains a stable and trusted provider of services for years to come.

Board Leadership

The Board of Directors plays a vital role in guiding the organization's vision, ensuring accountability, and supporting long-term planning efforts.

Their leadership and commitment help ensure that the ARC continues to grow, adapt, and remain focused on the needs of the individuals and families we serve.

We extend our sincere appreciation to each member of the Board for their dedication and guidance.

Looking Ahead to 2026

As we move forward, ARC remains focused on strengthening services, supporting our workforce, and continuing to advocate for the resources necessary to sustain and expand programs.

The coming year will bring new opportunities and challenges, but our commitment remains unwavering: to ensure that people with intellectual and developmental disabilities receive the support, respect, and opportunities they deserve.

Together — with staff, families, community partners, and self-advocates — we will continue building a stronger and more inclusive future.

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.

Touring the fire station



Patrick

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 supported 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 Enhancement

Embracing Community Connections

Lynden Davies • *Accreditation Coordinator and Staff Trainer*

Review of Accomplishments — 2025

In 2025, we continued to put people first. Whether it be from being able to select the activities they take part in at ExploreABILITY or choosing which days they want to go out in the community or stay home, these opportunities for choice continue to exemplify the mission of “supporting people to live their lives to the fullest.” ExploreABILITY continues to be a focus for people supported to choose their schedules and take part in many activities that allow them to access their community more than ever before, but the Quality Enhancement team has taken a turn on where they will focus their efforts next.

In 2025, the Quality Enhancement team worked closely with the Quality Management and Training departments to roll out a newer, more person-centered training curriculum. With the introduction of the Dignity of Risk training, new hire staff are educated and empowered on how to truly support people to take risks that will enrich and better their lives while being able to maintain those core and inalienable rights of health and safety — challenging stereotypes of people with intellectual and developmental disabilities. We also saw the resurgence of a training that the agency taught many years ago, known as Vantage Point. Here, new hire staff are offered the opportunity to “walk a mile in another person’s shoes”. Each new hire staff member is given a device or several devices that simulate specific disabilities. They are then tasked with having to complete several activities and in positions where they are reliant on their instructor for assistance, simulating the relationship between the person supported and their direct support staff.

The Basic Assurances Committee reformed in 2025 with several new members in order to continue the accreditation path with The Council on Quality Leadership, referred to as CQL. The goal of this committee is to analyze and establish the Person-Centered Excellence goals and Basic Assurances goals that strengthen and prioritize the idea of putting people first—not only a core principle of CQL and ARC, but also of the National Association of Direct Support Professionals, or NADSP. This year, the Quality Enhancement team has combined the Accreditation Coordinator position with the Staff Trainer position, with the premise that person-centered planning and practices need to be integrated into agency culture at the very beginning of any new hire staff’s journey.

The Quality Enhancement team has also hired two new Quality Enhancement Specialists to assist the agency with achieving these goals while also checking for these quality measures with the use of the Personal Outcome Measures interviews. The Quality Enhancement team worked in tandem with the Human Resources department and the State University of New York at Plattsburgh to welcome an intern in the master’s program for social work. With this immense opportunity, we have been able to complete more Personal Outcome Measures interviews than predicted — allowing us the opportunity to have an educational perspective influencing our current perspective on person-centered planning and service delivery.

We have always made it our mission to support people to live their lives to the fullest. As an agency, not only do we support people in their everyday lives, but we also value and promote the dreams, aspirations, and goals of every person of the ARC community. We have and will continue to be a trailblazer both in the local and global community with regard to the protection of human rights, visibility, and full community acceptance and integration. Upon reflecting on these outstanding achievements made by the agency, 2025 can be summed up in one powerful word—community. For 2026, the Quality Enhancement team strives to continue the mission and vision of supporting people to live their lives to the fullest and ensuring that every person supported continues to be seen and heard as the valued community members they are.

Goals for 2026 —

- Conduct 132 Personal Outcome Measures Interviews to keep data collection and implementation of person-centered planning and service delivery.
- Continued partnership with SUNY Plattsburgh Master of Social Work intern program.
- Continued partnership and education with all agency departments to support the highest quality of person-centered planning and service delivery in training programs and day-to-day operations.

Thumbs up for the beautiful weather



Kim

Article 16 & Clinical Services

Associate Executive Director: Lori Lobdell

Review of Accomplishments — 2025

Occupational Therapist: Elizabeth Eldredge and Kade Collins

Physical Therapist: Shawn Bibeau

Physical Therapist: Assistant: Eric Boyle, Therapy Assistant

The Article 16 (A16) clinic Occupational Therapy (OT) caseload remains an average of 28, with several referrals pending. Durable Medical Equipment (DME) and wheelchair repair response times have improved significantly, and replacement of existing wheelchairs has improved so that the paperwork is now being submitted within a month of when the replacement can be made. Tracking and documentation of DME repairs and concerns have improved. Implementation of our wheelchair clinic, which is held twice monthly, on the first Wednesday and third Thursday of each month, is going very smoothly. Both OT's and Physical Therapists (PT) share responsibility in organizing the wheelchair clinic schedule in conjunction with the National Seating and Mobility technician. The OT's maintain oversight and responsibility for maintaining and repairing manageable wheelchairs.

The Physical Therapist (PT) and Physical Therapist Assistant (PTA) maintained an average caseload of 29 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 15 billable hours of direct services per week.

The ARC Physical Therapy caseload is made up of 124 individuals + community-based individuals receiving DH services. Caseload management included bi-annual case reviews, intake assessments, and mobility and DME assessments as needed. "Mobility and DME assessments as needed" average 4 per week. The PT and PTA also provided oversight, regular maintenance, and repair on DME / mechanical lifts, ambulation devices, and lower extremity orthotics and shoes (via Mountain O&P) and assisted the OT's with wheelchair inventory management. Ceiling track trainings were incorporated into classroom training in November 2025, alleviating the need for on-site one-on-one trainings. Safe Patient Handling (SPH) orientation class was taught 16x by PT and OT (co-trainers, 68 hours), and PT taught 26 Refresher classes (27 hours) over the course of the year.

The Physical Therapist/ SPH Coordinator assisted the Safety and SPH Committee in submitting the 8th 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 workers' compensation policy.

Keeping up with PT exercises at home



Wayne

Speech and Language Services: Carrie Nutt

Currently, SLP has 14 people on the Article 16 active caseload. Progress has been made in attempting to align services for implementing group therapy. It was learned that group therapy can be no more than 25% of therapy sessions for each person, so the ability to hold a group for the month would be contingent upon regular attendance. Currently, three people are targeted for the Social Communication Group. December was targeted to begin, but people's attendance prohibited the group from starting as planned.

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

Over the past year, SLP has provided guidance and suggestions to the Recreational Coordinator regarding food choices for group activities and picnics. SLP provided guidelines and assistance in preparing for group meals, like Friendsgiving and the Holiday Dinner at ExploreABILITY.

Agency Counseling Services: Nicole Claffey

(Not billable through A16 Clinic)

Serving as an agency Counselor with the Clinton County Advocacy and Resource Center for the past 24 years has been both a privilege and a professional honor. Throughout the past year, I provided ongoing counseling and emotional support services to 23 individuals on a weekly or biweekly basis, in addition to supporting more than 20 individuals on a PRN ("as needed") basis. The agency's ability to offer these services internally continues to be a significant asset, allowing individuals we support to access consistent, trusted mental health services while remaining within familiar and supportive environments.

While external therapy options are available and appropriately utilized when needed, the availability of in-house counseling services provides a meaningful benefit by promoting continuity of care, accessibility, and individualized support tailored to the specific needs of the population we serve.

In addition to direct counseling services, I fulfill several key roles that contribute to the agency's overall mission and quality of care. These responsibilities include providing CPR/AED certification training, delivering Human Growth and Development & Dual Diagnosis training, and serving as an active member of the Human Rights Committee. Working in collaboration with our Supervisor of our Behavior Department provided/implemented a curriculum on Healthy Relationships.

One of my most meaningful and impactful additional roles is serving as the advisor to the agency's Self-advocacy group, capABILITIES. This group remains highly engaged in advocating for their own rights and the rights of others, while also actively participating in outreach efforts to raise awareness and support for agencies such as ours. Their advocacy efforts continue to play an important role in highlighting the need for adequate funding resources and systemic supports necessary to sustain quality services.

Overall, the past year reflects a continued commitment to advocacy, counseling, education, and empowerment, ensuring that individuals supported by the CCARC receive comprehensive, respectful, and person-centered services.

Goals for 2026 —

- Start at least one small therapy group to target augmentative communication.
- Offer a friendship and dating curriculum group for people supported with the 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 and decreased cost of replacements (PT and PTA).
- Attend managers' meetings quarterly or as requested and at least annually.
- Complete revision of Clinical Procedures Manual by submitting revised procedures to the Board, updating from 2017/18 to 2026.
- Increase objectivity of bi-annual PT caseload reviews and increase efficiency of ARC caseload management by developing and utilizing a screening assessment form and utilizing Precision Care assessment form (Braden Scale).
- Add Safe Patient Handling Assessment to Precision Care and begin to utilize annually (PT).
- Explore opportunities to expand billable clinic services utilizing our behavior support clinicians.

Preparing plates for Friendsgiving Dinner



Maris • Carrie • Dawn • Nikki

Corporate Compliance

Director: Valerie Bragg

Review of Accomplishments — 2025

There were minimal regulatory changes in 2025. Due to the Office of the Medicaid Inspector General's guidance, the Director of Compliance ensured the agency's compliance plan was reviewed for effectiveness and will continue to review it annually moving forward. Areas that the Compliance Director worked on in 2025 included revisions to the Self-Disclosure Policy and the Gifts and Gratuities Policy and Procedure in February 2025 as well as an annual review of all compliance policies in December 2025 with recommendations to revised the Standards of Conduct Policy in 2026; an annual review of the Compliance Committee Charter in December 2025 with minor revisions made to be reviewed at first quarter compliance meeting in 2026; training packet was distributed to external E-MOD contractor in October 2025 with attestation of understanding received on the same date; 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 as applicable.

In conjunction with the Chief Financial Officer, the Director of Compliance ensured that the Certification Statement for Provider Billing Medicaid completion for one provider was completed on May 21, 2025, and for the other two providers on June 16, 2025. The completion of these documents also attests that our agency has an effective and functional compliance program.

In April 2025, the agency received correspondence from the Attorney General stating that they would be providing a schedule of individuals who would require forwarding documentation for an external audit. The Director of Compliance forwarded all requested documents on a rolling schedule by the due date of June 3, 2025. To date, no updates or further requests have been received.

On June 12, 2025, the agency received correspondence from the Department of Health (DOH) regarding Electronic Visit Verification (EVV) for Community Habilitation and Community Habilitation-Residential. Correspondence stated that our agency provided sufficient documentation to support regulations and that this closed the analysis of our agency's EVV data submission for January 1, 2024, through July 30, 2024.

The Director of Compliance filed the annual client personal allowance attestation on January 29, 2025. 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 to include ADM 2025-01 (Pathways to Employment) and the July 23, 2025, final regulations to maintain an Emergency Preparedness Plan for all facilities certified or operated by OPWDD.

The Director of Compliance continues to work towards collaboration and facilitation of working relationships with the Life Plan and Care Design Care Coordination Organizations (CCO) by scheduling/hosting quarterly meetings with each agency. The CCO and IDD Provider Agency Collaboration Agreement was completed with Life Plan CCO on December 12, 2025.

The Director of Compliance participated in or provided training regarding continued education. This was achieved through conferences/webinars (76 hours), trainings provided to others (45 hours), and board or committee meetings (10 hours). Annual compliance training was revised and conducted with the Board of Directors in September 2025, and new committee members met with the Compliance Officer before 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 January 7, 2025.

The Director of Compliance completed routine, 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

- 1 Corporate Compliance Officer / Director
- 1 Administrative Coordinator (.5 FTE shared position)

Goals for 2026 —

- To prioritize audits through the completion of the 2026 work plan.
- Evaluate succession planning for the Compliance Program.
- To provide in-person compliance refreshers to support compliance training on the Relias platform.
- To attend changeovers/staff meetings on a quarterly basis to assist with understanding of regulations, responsibilities, facilitate discussion, and answer questions.
- Evaluate paperless filing system.
- Director of Compliance will continue to work towards increasing knowledge in the compliance arena and will share information learned through compliance training and/or with appropriate management team(s).

Business Development / CVI Janitorial

Director: Edward Mason

Review of Accomplishments — 2025

In 2024, our primary objective was to secure a five year extension on the GSA Contract, which required winning an RFP. We successfully achieved this, with the original total revenue for the contract term amounting to **\$7,156,807.40**. In 2025, GSA representatives requested that we provide additional maintenance services by managing an extra quarter mile of property. This expansion resulted in an incremental revenue increase of **\$125,956.98** for 2025.

The Business Development Director submitted eight grant applications through Source America and secured **\$126,004.17** in funding, supporting initiatives in Growth – Modernization & Technologies, Quality Work Environment (QWE), Training-Certification-Compliance, and the Training Incentive Program.

The allocation of these funds provided substantial advantages for agency employees. The training team was able to procure new CPR practice devices, two large flat-screen smart televisions, and a hospital bed for instructional use. Additionally, the funding supported professional development for eleven agency staff members, allowing them to further enhance their competencies. Funding was used to purchase a laptop equipped with architectural software for the Maintenance Department and three wheelchair scales for the Nursing Department.

Members of our dedicated Janitorial Crew, hard at work



Hope



Michael

We collaborated with the Clinton County Department of Health to obtain a \$16,000 grant to promote healthy eating for people we support in five IRAs in 2025.

This initiative supplied Weber grills, kitchen cookware, and weighted culinary flatware to broaden opportunities for healthy meal preparation and enjoyment. This marks the third year of a five-year partnership, with two years remaining to extend these benefits to additional agency IRAs.

Through collaboration with Hannaford, a donation campaign was organized in December, resulting in our agency receiving \$1.00 for each bag sold. Proceeds totaling approximately \$200 were allocated directly to support our staff food shelf.

An automated calendar and reservation system was implemented for JCLR properties, facilitating ongoing rentals to ARC agencies statewide. We rented to two other ARC entities and accommodated two IRAs during home renovations, generating approximately \$25,000 in revenue.

In 2025, property upgrades were completed, and a comprehensive marketing plan was developed with our new Public Relations Coordinator. The positive reviews received have laid the foundation for a successful 2026.

Human Resource Development —

At the close of 2025, Business Development and CVI Janitorial employed

- 1 Director
- 2 Managers
- 3 Full-time Janitorial Crew Leaders
- 11 Crew Members

The Lodge & Cottage at JCLR



The Lodge at JCLR



The Cottage at JCLR



View from the back porch of the cottage

Goals for 2026 —

- Apply for Source America Grants to support training, modernization, creating a quality work environment (QWE), cybersecurity, and new technologies.
- Now that our automated reservation system is operational and managed by the Property Manager, we shall concentrate on marketing JCLR properties to increase rentals.
- Work with the planning team to develop plans for the agency's Tom Miller Road property housing project, focusing on its future use for working-class citizens.
- Coordinate with Maintenance and Nursing teams to successfully relocate Behavioral and Nursing agency employees to their new combined facility on Route 9
- Continue collaborating with the YMCA Executive Director to finalize the move from downtown Plattsburgh to the former wellness center on New York Avenue. Progress over the past two years has been substantial, and it looks like they will complete the relocation during the fourth quarter of 2026.
- Collaborate with the GSA decision makers to add our janitorial and groundskeeping services for the new Rouses Point expansion project. After initial discussions, this should add roughly \$250,000.00 to our year 3 GSA agreement. This shall be additional revenue with no additional expense since we have enough crew to cover this without adding employees.
- Prioritize hiring and training new janitorial staff to support commercial contracts. We currently have employees at the border for the GSA agreement. Although this will be challenging, our goal is to begin with a few new customers in 2026 and expand from there.

Helping to maintain a safe environment at the Champlain border



Michael

Employment Services

Director: Michelle L. McGrath

Review of Accomplishments — 2025

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 that assists individuals with disabilities in securing and sustaining competitive, integrated employment in the community. It offers individualized supports such as job coaching, skills development, training, and workplace accommodations to promote long term success, independence, and inclusion through meaningful, sustainable work opportunities.

In 2025, WFN continued 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.

Our current five-year contract with ACCES-VR started in 2024. WFN is approved to provide an array of services to individuals who qualify for services through the ACCES-VR program. These services include services to students who are potentially eligible for the service, Pre-employment transition services for students, placement, and traditional supported employment services. WFN continues to have a placement contract with the Office of Children and Family Services for the Commission of the Blind.

In 2025, the Community Prevocational Services (CPV) Program offered numerous volunteer opportunities within our community. CPV supports individuals with disabilities in developing essential work skills for future employment and integrated work environments. Rather than leading directly to a specific job, these services focus on building foundational, work-related abilities that prepare individuals for competitive employment. The overall goal is to strengthen confidence, independence, and job readiness for future work opportunities.

Members of our Community Pre-Voc program volunteering at the Mother Cabrini Shrine in Peru, NY



Zach



Adam

The Individualized Support Services (ISS) Contract continued in 2025, with 2 individuals receiving ongoing contracts. Financial supports were used for rental and utility subsidies.

In 2025, the Family Reimbursement Program continued to offer financial support to families of individuals with disabilities for items not covered by traditional insurance but recommended by a professional to address the child's specific disability-related needs. The program also offered the respite reimbursement program for families.

Human Resource Development —

The Employment Services Department employs:

- 3 full-time Employment Specialists
- 1 part-time Employment Specialist
- 2 relief Employment Specialists
- 1 full-time Program Coordinator
- 1 full-time Workforce Network Coordinator
- 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.

Statistics —

	Community Prevocational Services	Pathway to Employment	Workforce Network	Family Education & Training
Number on rolls 1/1/25	6	0	111	0
Admissions	0	0	22	0
Discharges	0	0	10	0
Number on rolls 12/31/2025	6	0	123	0

Goals for 2026 —

- Increase enrollment in the Community Pre-vocational program by 5 people with 10 new volunteer opportunities in the community.
- Build strong employer partnerships by establishing and maintaining work-related relationships with at least five new employers within our community.
- Ensure compliance is maintained for record keeping, service provision and documentation in accordance with both ACCES-VR and OPWDD guidelines.
- Continue to review the ACCES-VR contract and develop new, innovative strategies to enhance its effectiveness and maximize outcomes.

Fiscal Intermediary Services

Director: Michelle L. McGrath

Review of Accomplishments — 2025

Self-Directed Services (SDS) empowers individuals with disabilities to have greater control over the supports they receive. Through SDS, individuals are able to hire, train, and manage their own staff, allowing for increased flexibility and the ability to choose services that align with their personal needs, preferences, values, and schedules. Funded through Medicaid, this model enables individuals to manage their budgets and make informed decisions that best support their lifestyles. By prioritizing personal choice and control, SDS promotes independence, enhances quality of life, and supports individuals in living more independently while still receiving necessary care and support.

In 2025, the Fiscal Intermediary (FI) Services department focused on the quality of services. The FI and Brokerage departments continued to prioritize the delivery of consistent, high-quality services while identifying efficiencies to enhance customer satisfaction. Areas of concern were identified, addressed, and monitored to support continuous improvement.

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 to vendors, staff, and individuals supported. The SDS program began sending out weekly training blasts in 2025 to both families and staff regarding services offered, helping to enhance understanding and improve the overall quality of services delivered.

We successfully secured a three-year contract expansion, providing a strong foundation for continued program stability and growth. Throughout this period, we will continue to work collaboratively with our local OPWDD liaisons to strengthen partnerships, identify emerging needs and expand service capacity. This ongoing collaboration will support strategic program development, enhance service delivery and ensure that individuals and families continue to receive high-quality, responsive supports aligned with the needs of the greater disability community. 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.

The new position of a Senior Agency Broker/FI Specialist in 2024 was an excellent addition to the department. In the past year, the Senior Agency Broker/FI Specialist has been able to assist with quality of services and corporate compliance within the department. She continues to work with Relias and eVero in order to enhance the training we are able to provide to the SDS staff and Independent Brokers. She has explored various areas of the platform that have been underutilized and helped to bring this information to the rest of the department.

Human Resource Development —

In 2025, 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

Statistics —

	Fiscal Intermediary	Brokerage
Number on rolls 1/1/25	407	154
Admissions	6	34
Discharges	19	10
Number on rolls 12/31/2025	394	178

Goals for 2026 —

- 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, including training blasts to our families and staff.
- 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.

Guardianship Services

Primary Guardianship Coordinator: Michelle Arnold / Maris Haynes

Guardianship Coordinator Support: Valerie Bragg

Review of Accomplishments — 2025

The Clinton County Chapter Guardianship Committee supports ten people with Primary Guardianship and one person as a Standby Guardian. In 2025, the Guardianship Coordinators continued to seek Corporate Guardianship for two additional people. The Guardianship Committee includes ten community volunteers with various backgrounds.

The Guardianship Committee was 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 in which all persons supported and committee members attended. The focus of 2025 was to expand the program with legal support and provide more in-person contacts.

Human Resource Development —

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

Fiscal Summary —

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

Goals for 2026 —

- 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.
- Finalize two guardianship applications already in process.

Habilitation Services

Acting Director: Lori Lobdell

Associate Director: Nicole Rivers

Assistant Directors: Ellen Gricoski • Maris Haynes • Jessica LaPier •
Kori McCauliffe • Rachel Reynolds

Review of Accomplishments — 2025

Unfortunately, we lost the Director of the program in October. Administratively, we realigned some duties and added the Associate Director position to help lead the department. Vacant Assistant Director positions were filled by the end of the year and early in 2026, so the administrative team is at full capacity. The focus throughout the year was on improving the quality of services, raising expectations and standards across the department, and holding people accountable for their job duties. Even with the changes, the Habilitation Services department (which includes all the residential homes and ExploreABILITY) was able to accomplish several of the goals outlined for the year.

We were successful in filling the Site Facilitator position at ExploreABILITY (EA) as well as the fourth supervisor position. This allowed for increased daily monitoring and oversight of the services provided at the site-based day habilitation program. The practice of using residential staff to supplement the day program staffing levels was nearly eliminated.

The second year for the summer internship program at EA was a huge success. One goal for expanding the internship program to include a curriculum and increased training in the I/DD field was successfully met. One of our biggest accomplishments was the introduction of participant-led workshops based on activities selected by the folks themselves. These included Sewing, Theater, Cooking, Media/3D Printing, Outdoor/Gardening, and Science. Each day, interns and participants collaborated to run one-hour workshops designed to build skills, confidence, and creativity. Their work culminated in our Intern Carnival, where each group showcased their achievements.

Dress rehearsal for the theater production of Charlie and the Chocolate Factory



Dona



Dwayne

The Cooking Workshop prepared lunch for the agency using fruits and vegetables grown in our garden. The Sewing Workshop created goody bags for carnival games. The Media team designed and printed prizes using the 3D printer and produced a slideshow highlighting the internship experience. The Science Workshop launched rockets during the Carnival, and the Theater Workshop performed their own adaptation of Willy Wonka, which was open to the community.

The success of this model was so significant that ExploreABILITY has now implemented daily pod workshops, allowing participants to feel more engaged and invested in their programming.

This restructured, workshop-based approach to the internship will continue moving forward.

In addition to on-site programming, interns supported several community-based experiences. We attended the Clinton County Fair multiple times, brought a group of 20 to Ausable Chasm, hosted a Cornhole Tournament with the Plattsburgh Noon Rotary, and visited local orchards and museums. These outings further strengthened community integration and shared experiences.

Residential services saw an improvement in the staffing vacancy percentage throughout 2025. At the highest point in the year, staff vacancies were over 40%. By the end of the year, it was just over 30%. Some of the success can be attributed to Human Resources and the Training Department for the implementation of the Buddy Program. We also had 8 houses converted to four 12 hour shifts schedules. This eliminated many open staff vacancies. We were also very fortunate to have three ladies from Ghana join our workforce as Habilitation Counselors in November of 2025 under the H1B visa program. We are excited to have them here.

Having sew much fun!



Alex

Masked Singer contestants ready to take the stage



The Renadette Road IRA was officially closed, and residents were relocated to two other homes that were approved for capacity increases. We were also notified that the five beds we were holding vacant from the Macey Lane IRA closure were no longer available to us to fill. It is still a future goal to reopen this home, but we will have to follow a different process to approve the reopening.

Some amazing opportunities were presented to individuals throughout 2025. One individual went on a lifetime trip to Nashville, TN. A group of individuals and staff went to a Yankees game in the city, while another individual got to go to the NYC Zoo. Several people enjoyed summer concerts at SPAC, others had fun days at the Great Escape, and many other local activities were enjoyed by the people we support.

Human Resource Development —

The Director position oversees both Residential, site-based, and other day services.

Residential

At the end of 2025,
the Residential Program included:

- 1 Associate Director (*new position*)
- 4 Assistant Directors
- 1 Administrative Specialist
- 1 Team Training Coordinator
- 12 Managers
- 8 Supervisors
- 112 Full-Time DSPs
- 5 Part-Time DSPs
- 48 Relief DSPs

ExploreABILITY

At the end of 2025,
the ExploreABILITY Program included:

- 1 Assistant Director
- 1 Site Facilitator
- 1 Support Assistant
- 1 Logistics Coordinator
- 1 Recreation Specialist
- 4 Supervisors
- 22 Full-Time DSPs
- 5 Part-Time DSPs
- 2 Relief DSPs

Statistics —

Habilitation Services Enrollments:

Individual Residential Alternatives (IRAS)	124
Recreational Respite	3
Day Hab. - ExploreABILITY	89
Day Hab. Without Walls	68
Community Habilitation - R	56

Goals for 2026 —

- Focus on increasing training compliance for all department staff.
- Provide more focused training for managers and supervisors to improve their effectiveness as leaders.
- Implement single house managers at all homes.
- Implement new procedures and timelines for responding to state and internal audits.
- Provide individuals and families the opportunity to provide feedback to the program through surveys focused on person-centered planning and service delivery.
- Increase communication with families of individuals supported in the residential homes, based on the families' wishes.
- Assess further development of 12-hour house schedules or a hybrid of this model.

Keeping it cool at the summer carnival at ExploreAbility



Cahlab

Swinging into nice weather at the park



Sherylann • Tamara

A beautiful day overlooking Ausable Chasm



Tony

Bundled up for some winter fun



Justine

Visiting the Lake Placid Olympic Museum



David

Big smiles at the bowling alley



Peggy

Who could resist some puppy snuggles?



Donna

Human Resources

Director: Laura Gartshore

Review of Accomplishments — 2025

In 2025, we received 605 applications, of which 399 were for Direct Support Professional positions. Social media sites and online job boards remain critical tools for reaching and attracting potential employees. We continued our media presence through targeted radio advertisements with Hall Communications. Our focus continued to be on selectivity, enabling us to prioritize qualified candidates. Indeed.com provided the greatest number of applicants, accounting for 62.98% of the total, followed by the agency website as the second-highest source of applications. Referral numbers also increased, with 95 applicants coming through employee referrals. Of these, 48 were hired, representing an increase from the 44 referral hires in 2024.

2025 was year two of our Activity Interns program. We changed the name of the program to the PIT (Professionals in Training) Crew. This program is an introduction to the field of intellectual and developmental disabilities geared specifically for high school students. We are continuing to build relationships with local high schools in the area and attended their career fairs to promote our PIT Crew. We also attended a career fair hosted by CV-TEC at SUNY Plattsburgh Field House, where we were able to meet and connect with hundreds of students from the tri-county area. This past summer, we hired 13 crew members, who worked with our ExploreABILITY (EA) program during the summer. The PIT Crew assisted and created activities with the people supported at EA. The ultimate goal of the PIT Crew is to introduce young adults to who we are and what we do, and they may then decide to make ARC a career. What a fun and successful 2nd year!

Recruitment and retention of direct support staff have continued to be 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. This coming year, we will continue to recruit, but also focus on the retention of our employees as well.

We continue to work with Dayforce for our HR/Payroll software. Staff still really enjoy having a mobile version of it on their phones for their transfers on the go. We are ready to launch Dayforce Wallet to staff. They will now have early access to a portion of their paychecks without having to wait for payday. This will be an added benefit that will help us to attract and retain more staff.

Northern Border Regional Commission Grant – We continue with the NBRC Grant. In 2025, we used some of the funds for out-of-town travel to recruiting fairs, to update our recruiting give-a-ways, to update recruiting tools, and to purchase a new laptop for the recruiter.

One of our goals for 2025 was to establish recruiting relationships with higher education institutions to help us recruit staff for our more professional positions within the Northeast Region. Our Talent Recruiter started attending college career fairs regionally, from Albany to Ithaca. It has allowed us to get our agency's name out there and educate students who are seeking more professional positions to know where we are and what we do.

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 10, 2025, at West Side Conference and Event Center. 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, and many laughs and a great time were 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 2025 for Direct Support Professionals Week.

In celebration of Employee Appreciation Day on March 7th, 2025, employees received staff appreciation cards with an agency lanyard, lip balm, an agency engraved pen, and a gift certificate to Little Caesars. 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 four 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. Our goal is to increase the skills and education of our staff so that they are better able to provide meaningful support to the people we provide services to. We look forward to more successes in 2026.

Directors prepared an appreciation dinner for all agency employees and their families!



Michelle • Jack • Robin • Jeremy • Michelle • Val

A check awarded to the agency on behalf of the Apprenticeship Program



Chris Pinheiro • Roberta Reardon • Laura • Beth • DOL Employee

In early 2025, we were introduced to Richmond Staffing Solutions. We invited them to the agency, and they presented to staff and directors about their H1B program of supporting applicants from foreign countries to help fill the ongoing DSP vacancy problems across the state. On November 18th, 2025, we brought three new hires from Ghana to the agency to be Habilitation Counselors through the Federal H1B Visa program. We were hoping for more but, with recent federal proclamations, we are unable to continue down that path. We are now working with Richmond Staffing Solutions to recruit candidates who are already in the United States, as well as promoting the Habilitation Counselor position to our own staff/applicants who may meet the criteria. There have been some obstacles, and it has been a learning curve for the agency, but it has brought a lot of positives along with it. All three new hires have been trained and are now fully working at our Orchard Way house.

Ghana → Plattsburgh, NY

A North Country Welcome to our new employees from Ghana



L-R: Rachel • Sandra • Jocelyn • Mary • Tina • Brandon

Human Resources was assigned to research and find a new management compensation tool to be used to determine wages, education, and experience requirements for all agency positions. The current system has been in use since the late 1980's, and it was felt that we needed a more updated system. Requests for Proposals were sent out to a half dozen companies, and we selected 3 companies to present to us. Of the 3 companies, a committee of Robin Pierce (Executive Director), Lori Lobdell (Associate Director), Jeremy Rensing (CFO), and Laura Gartshore (Human Resource Director) selected Salary.com as our choice for the best product for the agency. Human Resources worked with Salary.com throughout the summer and early fall to provide them with data and job descriptions for all the jobs in the agency. Salary.com presented its compensation tool in November 2025. We have begun trialing the new system with a few positions that have been recently updated, and have a target date of early May to have all positions in sync with the new tool.

Human Resource Development —

In 2025, ARC received 605 applications for both advertised and unadvertised positions within traditional programs, marking an increase of 77 applications, or 14.6%, compared to 2024. The agency hired 174 new employees, resulting in a 28.76% hiring rate of all applicants. Of these hires, 141 were Direct Support Professionals, comprising 81.03% of all new hires. These 141 DSP hires included 128 part-time and full-time roles, and 13 as relief staff, representing 35.34% of the 399 applications received specifically for direct support positions.

The agency's overall turnover rate in 2025 was 25.63%, which is an increase of 3.02% from 2024. There was a total of 234 resignations/terminations. Of the 234 resignations/terminations, there were 156 traditional ARC staff who left (123 part-time/full-time, 33 relief) and 78 self-directed DSP staff resignations/terminations (10 part-time/full-time, 68 relief).

Of the 156 traditional ARC staff terminations, 128 were from DSP positions (99 part-time/full-time, 29 relief) and 28 were other positions. Turnover among full-time and part-time Direct Support Professional staff in traditional ARC programs was 37.88%, a 5.96% increase from 31.92% in 2024. The overall vacancy rate for these same positions was 33.86%, a 9.37% decrease from the 2024 vacancy rate of 43.23%. The highest vacancy rate for the year was in January, with 37.98%; the lowest vacancy rate was in August, with 27.71%.

The turnover rate in 2025 for self-directed staff was 20.53%. There were 78 (10 full-time and 68 relief) resignations/terminations. There were 83 (9 full-time and 74 relief) hired in 2025. 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 a relief, or as-needed, basis. The Human Resources department is responsible for processing all the personnel and payroll-related paperwork for these staff. The staff works closely with brokers, designees, and families of the persons supported in ensuring that all federal and state government regulations are met. There are approximately 302 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 2025, 28 NYS Unemployment Insurance claims were filed against the agency. This is down from 34 unemployment claims in 2024. This is a decrease of 18%. These claims had a potential liability of \$222,475.40. Through the efforts of the Human Resources department, we were able to reduce this liability by \$165,917.65. Though turnover is inevitable, the Human Resources department will continue to help control the unemployment costs incurred by the agency.

Goals for 2026 —

- Focus on retaining our current employees, especially in the Habilitation Services department, for consistency in our homes, for the people we support, and the direct care staff. Accomplish this by increasing retention rates through defining the issues that are causing employees to leave and by changing the agency culture surrounding these issues.
- Continue to deepen our relationships with our local high schools and higher education institutions to educate and recruit students on our agency and mission.
- Implement the Salary.com compensation architecture by looking at wages compared to market averages.
- Continue to work with Richmond Staffing Solutions to locate stateside F and J Visa holders to help stabilize our workforce.
- We will increasingly rely on data-driven insights to inform our decision-making processes, ensuring that our strategies are guided by accurate, real-time information to drive better outcomes.

Information Technology (IT) Supports

Director: Edward Mason

Review of Accomplishments — 2025

The agency's IT Department was entirely rebuilt from the ground up. Given the retirement of two former IT Specialists, we interviewed, vetted, and hired two new IT Specialists who are energetic, proactive, and collaborators who were involved in our major project of migrating our existing "on-premises" data servers into the Cloud through Twinstare Communications and 11:11.

Brock Holloway and Matvey Longware joined our new team and have made a positive impact on our overall mission of ensuring our agency users are always able to be online and productive.

Additionally, we upgraded to a new state of the art wireless infrastructure at Southside, CVI, Pine Ridge, Whispering Pines, Soper Street, Adirondack Place, and Church St. The cost to complete these properties came under budget by \$15,597.52.

We initialized and leveraged a new trouble ticket system for all users to input their data or telecom issues into the IT Department. As a Director, I used this system (Spiceworks) to review all trouble tickets weekly and monthly, allowing me to examine details such as how requests were handled, the time taken, and user satisfaction levels. This tool proved to be invaluable, increasing the IT Department's efficiency and effectiveness in providing quality IT service to all users.

We completely cleaned out all the former servers and unused equipment in our IT computer room by a certified E-Waste company, since most servers now reside in the cloud. As a team, we started our weekly IT Dept meetings to review trouble tickets, projects, and any issues that need resolution, and build strong synergies within our team.

Human Resource Development —

In 2025, the IT Department employed:

- 1 Director (*shared with CVI Janitorial*)
- 2 Full-time IT Specialists

Goals for 2026 —

- Continue to upgrade the remainder of the IRAs to a new state-of-the-art wireless communications system, like the properties we completed in 2025. Sustain the same budget as we did in 2025, with limited or no increase in budget expenditures.
- Completely update our current equipment inventory of all agency IT equipment into an Excel spreadsheet that provides 100% information and labeling for the entire agency.
- Examine options to upgrade our current Telecommunications System (Mitel), which is over 10 years old. My IT Team and I have attended several presentations from Mitel and other manufacturers to begin to prepare a comprehensive RFP by Q4 2026 to distribute to at least five vendors. Our objective is to complete the RFP, vetting, decision-making, and implementation of a state-of-the-art cloud-based telecommunications system by the second quarter of 2027.

Maintenance

Director: Kevin Trombley

In 2025, the Maintenance department addressed a significant number of age-related repairs across the agency's homes. Many properties have reached a stage where major systems and structures—such as septic systems, kitchens, bathrooms, porches, and accessibility ramps—require substantial repair or replacement. While these projects are costly, they are critical to ensuring safe, functional, and comfortable living environments.

By maintaining a skilled in-house workforce with the proper tools and equipment, the agency saves tens of thousands of dollars annually compared to outsourcing this work. The Maintenance department remains fully committed to providing high-quality living conditions for the individuals we support. This year included a large volume of smaller projects, as well as several major, multi-month projects completed entirely by Maintenance staff.

Review of Accomplishments — 2025

Smaller Projects —

- Conversion of the former nursing station into a new clinical space at CVI.
- Replacement of septic controls at Soper Street.
- Installation of protective wall coverings at Inspiration Way and Serenity Drive.
- Office remodel of former garage space at Maine Road.
- Replacement of boardwalk with concrete sidewalk at Salmon River Road.
- Construction of a garden for ExploreABILITY.
- Bathroom remodel at Adirondack Place

Progress as the team replaced the boardwalk at the Salmon River Road IRA



The garden area constructed at ExploreABILITY



Larger Projects —

- Replacement of all porches, ramps, and entrance doors at Alder Bend.
- Replacement of kitchen cabinets and floor repairs at Cliff Haven.
- Interior painting of the entire Renadette Road home.
- Basement ceiling repair and relocation of laundry room to the first floor at Orchard Way.
- Addition of a ramp and new egress door to the rear porch at Woodwinds.

Construction at Alder Bend IRA to replace the front and back porches.



Replacing the boardwalk at the Salmon River Road IRA with a new concrete sidewalk



Soper Street Renovation —

Extensive structural damage was discovered during flooring work. The home was braced, the porch removed, the foundation repaired, and the structure raised to correct settling. A fully accessible porch with compliant egress points and ramping was constructed.

West Chazy Renovation —

A failed septic system was fully rebuilt beyond original specifications. Interior renovations included a complete kitchen remodel, new flooring, painting, and relocation of the hot water tank to improve safety and accessibility.

Statistics —

	Work Orders	Completion Rate
2025	2,271	100%
2024	2,249	90%

Financial Summary —

	Estimated Cost	Actual Cost
2025	\$240,772	\$146,403.46

Human Resource Development —

In 2025, the Maintenance Department consisted of:

- 1 Maintenance Director
- 1 Maintenance Coordinator
- 9 Maintenance Technicians
- 1 Landscaper
- 1 Office Support Assistant
- 2 unfilled positions

Goals for 2026 —

- Continue employee training.
- Complete 95% or more of work orders.
- Monitor spending and utilize existing inventory.
- Explore new non-Medicaid revenue opportunities.

Outside of West Chazy during the septic tank replacement



Nursing Services

Director: Daniel Johnson, RN

Review of Accomplishments — 2025

The Nursing department provided numerous training opportunities in 2025. Initial medication certification and recertification classes continued to be offered throughout 2025. In conjunction with the medication certification/recertification classes, Nursing completed 244 medication pours to keep the 137 medication-certified staff in compliance with OPWDD regulations. A goal we had set for 2025 was met when Nursing brought back several training classes to an in-person training model that had previously been on the Relias computer program. Intro to Seizures, Personal Care Skills, and Infection Control were all brought back to the classroom in early 2025. The feedback from staff has been excellent, with a live instructor present to model appropriate actions and answer any questions.

The Nursing department was responsible for arranging 2,183 medical appointments for individuals served by the agency in 2025; this number is fairly consistent with the prior year, with 2144 in 2024. This not only involved scheduling but also 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 provide Flu shot immunizations for the individuals in residential. During this clinic, we also partnered with Condo Pharmacy to administer updated COVID vaccinations. A total of 97 flu vaccinations and 86 COVID boosters were administered in a three-hour period of time. In conjunction with CVPH, we arranged for six blood drives throughout 2025 with a total of 54 units obtained throughout the year.

In November of 2025, Nursing realized full staffing with both residential nursing and the Serenity IRA nurses being fully staffed. This is the first time that this has been the case in approximately three years. Nursing would like to extend a great degree of thanks to the Human Resources department for their tireless recruiting to bring in qualified nursing candidates.

A goal for 2025 was to pilot and then implement the Electronic Medication Administration Record (EMAR) in Precision Care. Unfortunately, this goal was not met due to several setbacks that hindered progress throughout the year. Initially, the decision was made to delay the implementation of the piloting phase due to several endeavors that were ongoing in the IT department, which, once completed, would allow for greater internet connectivity within the larger residences, thus garnering a higher probability of success. Once those projects were completed, Nursing discovered that Precision Care was transitioning to an updated EMAR, which was being offered at an additional cost. The current EMAR, the free version, would have a sunset date, but that date was not yet known. Given this new information, Executive Administration began to discuss the efficacy of Precision Care in contrast to eVero. This is another electronic record used by Self-Direction Services with similar features to those of Precision Care. A work group was then formed to evaluate both platforms and to try to determine if one platform could service the entire agency across all programs. At the time of this writing, the workgroup is still in the process of this evaluation and has yet to make a recommendation. This goal will be postponed until after a decision on the electronic record is made.

Human Resource Development —

The department consists of:

- 1 Nursing Services Director
- 7 Residential RNs
- 1 Day Program LPN
- 1 Residential LPN
- 1 Support Assistant
- 1 RN (Serenity Drive)
- 5 LPNs (Serenity Drive)
- 4 Per Diem LPNs (Serenity Drive)
- 1 Per Diem RN (Serenity Drive)
- 1 Contracted Registered Dietitian
- 1 Contracted Clinical Psychologist

Fiscal Summary —

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

Goals for 2026 —

- Evaluate and potentially restructure the medication certification course to streamline the training without compromising the standards necessary to properly educate new staff on the medication administration process.
- Continue to partner with CVPH, Clinton County Health Department, and NCBM to maintain positive community partnerships in the region.
- In conjunction with the behavior department, increasing education offered to staff at changeovers or other times. Potential topics would include:
 - Dementia and other disorder-specific trainings (per individual house needs).
 - Preparing for and sharing information at Psych/Medical appointments.
 - Psychotropic medication side effects/symptoms of withdrawal.
 - Autism specific trainings.
 - How to encourage and support healthy lifestyles without using behavior control/ hidden restrictions.

Behavioral Support Services

Director: Daniel Johnson, RN

Review of Accomplishments — 2025

The Behavior Specialists developed, implemented, and monitored 54 behavior support plans and 32 medication monitoring plans. Department personnel spent countless hours providing training to staff on 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 215 physical interventions necessary in the year 2025 compared to 171 that were necessary in 2024. This increase is primarily attributed to one residence where several of the individuals were presenting with unique behavioral challenges and would often trigger one another, resulting in the need for staff to intervene to ensure the safety of all. There was the ability to fade out a cell phone restriction in one plan, which resulted in no longer having a need for a behavior support plan for this individual.

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. We continued with our relationship with North Country Behavioral Medicine and, more specifically James VanNess, P.A., who held monthly clinics at the CVI building.

The behavior department worked in conjunction with Habilitation Services administration and Human Resources to construct a new job description for the Habilitation Counselor. This position will have key clinical components with duties that will be performed in conjunction with the behavioral department. This position is intended to help provide a necessary bridge between the behavioral department and Direct Support Professionals. This will allow enhanced on-the-job access to knowledgeable staff.

The department had several goals that were set for 2025. The first being to input all Functional Behavior Assessments (FBA) into Precision Care. This goal was nearly met, with all but four FBAs being completed. 82 FBAs were successfully entered, and then the group took this a step further and began generating Behavior Support Plans from Precision Care for all the plans that had FBAs completed. The second goal set for 2025 was to develop a curriculum for internet and social media safety. This was completed and is awaiting implementation. The final goal was to implement tracking on the duration of physical interventions. This was completed and tracked through 2025. This allows to have definitive metrics when completing reports and doing analysis.

Human Resource Development —

The department consists of:

- 1 Behavior Department Supervisor
- 1 Support Assistants
- 1 Behavior Intervention Specialist I
- 1 Behavior Intervention Specialist II
- 2 Behavior Clinicians
- 1 Contracted Clinical Psychologist

Goals for 2026 —

- Have Registered Behavior Technician at the following houses: Mountain View, Adirondack Place, Woodwinds, Turner Road, Orchard Way, Ryan Circle, and Peru
- Cross-checking Behavior Support Plan / Medication Monitoring Plan to ensure some overlap with Life Plan and Staff Action Plans. Advocating for specific res hab/day hab services that correlate with increasing specific replacement behaviors.
- In conjunction with the Nursing department, increasing education offered to staff at changeovers or other times. Potential topics would include:
 - Dementia and other disorder-specific trainings (per individual house needs).
 - Preparing for and sharing information at Psych/Medical appointments.
 - Psychotropic medication side effects/symptoms of withdrawal.
 - Autism specific trainings.
 - How to encourage and support healthy lifestyles without using behavior control/ hidden restrictions.

Quality Management

Director: Michelle Tallman

Review of Accomplishments — 2025

In 2025, another staff trainer position was added to the department to meet the needs of the expanded training onboarding program. Sixteen orientation sessions were held in 2025, providing training to 165 new employees. Ninety refresher training classes were held throughout the year. Self-Direction Services hired 90 new employees whose orientation training requirements were completed through Relias. Training has incorporated some people supported to assist with and co-teach several orientation classes. This was based on the interest from the person supported and knowledge of the subject matter. This has been extremely successful based on the feedback of orientation employees and empowering for the people supported.

Improvements to training continued in 2025. Through a grant, we were able to install a ceiling track lift in the classroom. Staff will now become certified in all categories of lifts/transfer devices in one training session. Another advancement in training was the acquisition of a Q-Straint device that can be permanently set up in the classroom. Currently, the use of Q-Straints on vehicles is only taught during the initial van certification, where staff are trained in its proper use. This device will be incorporated into a refresher training for staff to practice proper wheelchair restraint on buses to increase safety during transport. In December of 2025, we started transitioning some refresher courses back to live sessions taught in the classroom: Sexual Harassment, Corporate Compliance, Incident Reporting, and Documentation Requirements. The classes are scheduled altogether in a four-hour time frame, allowing staff to just attend one session and receive all four trainings.

Quality Management completed the application process for reaccreditation through the Council on Quality and Leadership (CQL) in the fall of 2025. We will be conducting our reaccreditation process with CQL in 2026. Data improvements continued in 2025 and have been made to the Basic Assurance Committee report, allowing better data analysis for real time evaluation of person-centered service progress, personal outcome measure interviews, and goal attainments.

Data analytics dashboard development was a focus last year in Quality Management. Each dashboard developed will be unique to the position and will report on the data points chosen by the person/department. This work required coordinating access to many software databases, which created a more conservative time frame than initially anticipated. Dashboard development was completed for the Quality Management department, and the dashboard for Human Resources is currently under development. Efforts will continue throughout 2026 until each department has their own unique dashboard to identify emerging trends and make data-informed decisions.

Late in 2025, the Quality Management Department added a full-time agency investigator position. Having a dedicated employee to address and investigate untoward incidents will improve the process and shorten the length of time needed to complete investigations.

Human Resource Development —

The department consists of:

- 1 Quality Management Director
- 1 Quality Management Assistant
- 1 Data Analyst
- 1 Accreditation Coordinator / Staff Trainer
- 2 Quality Enhancement Specialists
- 1 Staff Educator
- 1 Training Specialist
- 1 Quality Management Auditor
- 1 Agency Investigator

Goals for 2026 —

- The Quality Management department will increase participation from the people supported into co-teaching roles for orientation and refresher trainings.
- The Quality Management Department will continue efforts toward each department having individualized dashboards to monitor data in live time to proactively identify trends and adjust strategies accordingly.
- The Quality Management Department will lead the application and review process for continued accreditation with the Council on Quality Leadership (CQL) for person-centered excellence.
- Incorporate the Quality Improvement Plan into the content of Incident Reporting Refresher to share the goals and objectives with the entire workforce.

Transportation Services

Director: Jack Smith

Review of Accomplishments — 2025

The Transportation Department had another busy and productive year filled with many positive achievements in 2025. Our goal continues to seek to maximize the unused value of existing assets while upgrading the fleet where needed.

The agency purchased two full-sized wheelchair vans and 4 passenger vans in 2025 to provide upgrades to multiple houses. We sold 9 well-used vehicles, which brought our year-end fleet total to 124 cars, vans, and buses. The transportation garage continued into its fifth full year of servicing staff and community vehicles. The program continues to grow as we ended the year with pre-tax sales of \$122,370, with 653 customers being served. 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 \$48,602. The garage team totaled outside sales of \$170,972 and provided over 1,000 services to the transportation community project, all while expertly caring for our fleet of 124 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 4 full years with no DOT inspection failures in its work to maintain 5 agency buses and 7 Plattsburgh City School District buses.

We once again provided bus transportation for two successful tours, which 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 provide care.

Bus staff also provided transportation for several advocacy events to Albany throughout the year, as well as several fun trips in support of ExploreABILITY. The bus transportation team, in conjunction with our department administration staff, performed extraordinarily in service of our programs and IRAs in 2025.

The team combined to provide 1,429 additional services over and above their stated roles. This included 984 Article 16 Clinic transports and 445 vehicle shuttles to and from our houses.

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's 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 remain in compliance.

The Transportation department successfully administered the New York State Department of Motor Vehicles 19-A Bus Driver Certification Program & new passenger safety regulations for 2025. The annual Affidavit of Compliance was submitted in October and accepted. The Transportation department continues to maintain a no-lost work time accident record.

Honor Flight

In 2025, the transportation department once again assisted the Plattsburgh Honor Flight by attending to their New York State inspections. We stand ready and willing to serve this great organization in any way that we can.



Also, pictured is Plattsburgh City School District Bus #23. The department continues to service their bus repair needs and have a contract with them through June 30, 2027

Serving the Community

The department added a fire truck to the vast list of different types of vehicles we serviced in 2025.



Morrisville Fire Department wanted our expertise to assess the underside of engine #2, which Head Mechanic Craig Szatkowski was more than happy to do for them. Along with his many years with the ARC, he has been affiliated with the Morrisville Fire Department for 33 years.

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 8 commercial drivers and approximately 400 agency drivers throughout the year. 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.

The department consists of:

- 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)
- 4 Full-Time Bus Drivers / Including Coordinator
- 1 Relief Bus Driver
- 5 Full-Time Driver/Monitor
- 2 Relief Bus Aides / Including Transportation Clerk
- 2 Wash Bay/Corrosion Control Techs

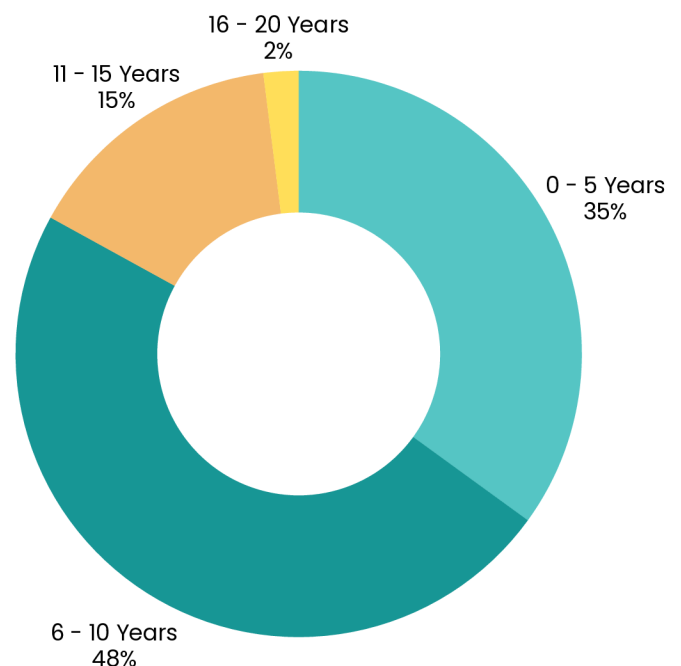
Fiscal Summary —

The agency increased travel in 2025 by 74,863 miles for a total of 1,018,671 miles. The agency had 11 accidents in 2025. None of those accidents resulted in an injury to staff or persons supported.

The health of our fleet is in good shape, with 83% of our fleet being 10 years old or less. Our new vehicles (0-5 years old) make up 35% of the fleet, and our nearly new (5 to 10 years old) vehicles account for 48% of our total fleet, coming into 2025.

The transportation community project continues to contribute positively to the agency's financials with \$170,972 in pre-tax sales, which equates to \$56,790 to bottom-line profits.

2025 Agency Fleet



Goals for 2026 —

- Continue to develop the community transportation project work and find ways to increase awareness of the program with goal of serving our staff and to increase the bottom-line impact of the business.
- Maintain services outlined in our new agreement with 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, as well as Board of Directors tours in 2026.
- 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 90% minimum.
- Continue to develop a backup 19A examiner to maintain stability and compliance.

capABILITIES Self-Advocacy Group

In 2025, CCARC's capABILITIES Self-Advocacy Group demonstrated leadership, resilience, and collective action. Meeting twice monthly, members strengthened self-advocate voices, supported one another, and advanced inclusion across the community.

Review of Accomplishments — 2025

Advocacy & Systems Change —

Members responded to ongoing budget challenges impacting individuals with developmental disabilities by engaging directly with policymakers. Government representatives were welcomed to CCARC to hear firsthand lived experiences and understand the importance of sustained funding. Two members received certificates recognizing their advocacy efforts. The group also participated in state-level advocacy rallies, highlighting the need for fair and livable wages for Direct Support Professionals. Group President Mark Fournier served as a guest speaker, helping amplify self-advocate voices.

Leadership & Training —

Self-advocates played a key role in training new hires through Meet and Greet sessions, sharing personal experiences, preferences, and expectations. This input directly shaped how new staff understand and support the individuals they serve. Feedback consistently highlighted the authenticity, energy, and value of this training.

Community Engagement & Fundraising —

The group launched monthly snack and movie nights at the ExploreABILITY program site, supporting fundraising efforts while fostering social connection. Members also hosted an annual picnic at Melissa Penfield Park, which saw strong participation and positive feedback.

Statewide Engagement —

A major achievement was full participation in the SANYS Annual Self-Advocacy Conference in Albany for two days. Through successful fundraising and coordinated 24-hour staffing support, members overcame prior barriers and fully engaged in learning, networking, and advocacy opportunities.

Organizational Partnership —

Throughout the year, capABILITIES participated in continuous quality improvement initiatives and strategic planning efforts, reinforcing their role as valued partners within CCARC.

Goals for 2026 —

- Expand advocacy efforts locally and statewide.
- Increase leadership and training opportunities for self-advocates.
- Strengthen inclusive community connections.
- Sustain fundraising to support conferences and events.
- Continue driving positive, self-directed change.

Ready to Rally



Robert

Advocacy in Action



Anita • Willow Baer (OPWDD) • Erik Geizer (Arc NY)

Representing Women in Business in the North Country



Beth • Laura • Michelle • Nikki • Robin • Rachel • Stephanie • Michelle

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.*



Paul Cronk
2.23.1963 — 6.23.2025



John Shelley
7.27.1941 — 7.7.2025



George Diloranzo
9.9.1931 — 8.15.2025



Yvonne Bedore
2.19.1958 — 8.10.2025



Cheryl Opal
3.20.1952 — 10.30.2025



Clinton County Chapter NYSARC, Inc. dba
Advocacy and Resource Center

Thank you for being a member!

Membership to our agency also means you are a member of The ARC New York (previously known as NYSARC), our parent corporation at the State level, who is also affiliated with the national ARC of United States!

Members have a direct impact and involvement on our state legislature.

As a member, you become an advocate for disabled individuals, as well as give our Chapter a greater voice in our own advocacy efforts with the local, State and Federal governments.

Scan this code for more info



& encourage others to support

Have you considered ARC as a part of your estate planning?
for more information contact: info@cviarc.org

The Advocacy and Resource Center is a non-profit corporation.
Your tax-deductible contribution
to our programs will be gratefully acknowledged.