

The regular meeting of the Wyoming County Community Health System (WCCHS) Board of Managers, Wyoming County, New York was held on Tuesday, February 23, 2021

BOARD OF MANAGERS PRESENT/ABSENT

- | | | |
|---|--|--|
| <input checked="" type="checkbox"/> Salman Abbasey, MD | <input checked="" type="checkbox"/> Rich Kosmerl | <input checked="" type="checkbox"/> J. Thomas Reagan, MD |
| <input checked="" type="checkbox"/> Doug Berwanger | <input checked="" type="checkbox"/> Mark Merrill | <input type="checkbox"/> James Wawrzyniak, DC |
| <input checked="" type="checkbox"/> Cynthia Elbow | <input checked="" type="checkbox"/> Laura Paolucci | |
| <input checked="" type="checkbox"/> Bryan Kehl (BOS member) | <input checked="" type="checkbox"/> Steve Perkins | |

STAFF PRESENT/ABSENT

- | | |
|---|--|
| <input checked="" type="checkbox"/> Connie Almeter (Chief Nursing Officer) | <input checked="" type="checkbox"/> Bridget Givens (Director of Mental Health) |
| <input checked="" type="checkbox"/> Ahmed Bayoumi, MD (Medical Staff President) | <input checked="" type="checkbox"/> Dawn James (NF Administrator) |
| <input checked="" type="checkbox"/> Amy Chase (Chief Financial Officer) | <input checked="" type="checkbox"/> Paul Mason, MD (Chief Medical Officer) |
| <input type="checkbox"/> Greg Collins, DO (Credentials Committee Chair) | <input checked="" type="checkbox"/> Joe McTernan (Chief Executive Officer) |
| <input checked="" type="checkbox"/> Mike Corcimiglia (Chief Operating Officer) | <input checked="" type="checkbox"/> Mandip Panesar, MD (Hospital Medical Director) |
| <input checked="" type="checkbox"/> Peggy Cunningham (Director of WPHS, Clinic Quality, & Corporate Compliance) | <input checked="" type="checkbox"/> Pam Pettnot (Executive Assistant) |
| <input checked="" type="checkbox"/> Dan Farberman (WC Human Resource Director) | <input type="checkbox"/> Denise Prusak (NF Director of Nursing) |
| | <input checked="" type="checkbox"/> Craig Woodworth (Director of Plant Operations) |

OTHERS PRESENT: Becky Ryan (Chairwoman, Wyoming County Board of Supervisors and Supervisor, Town of Warsaw), Jerry Davis (Vice Chairman, Wyoming County Board of Supervisors and Supervisor, Town of Covington), Michael Roche (Supervisor, Town of Eagle), and Don Eichenauer (Consultant)

CALL MEETING TO ORDER

President Kosmerl called the meeting to order at 4:50pm.

This meeting was held via ZOOM, in accordance with the NYS Governor's Executive Order #202.1, suspension of law allowing the attendance of meetings telephonically or other similar service. Article 7 of the Public Officers Law, to the extent necessary to permit any public body to meet and take such actions authorized by the law without permitting in public in-person access to meetings and authorizing such meetings to be held remotely by conference call or similar service, provided that the public has the ability to view or listen to such proceeding and that such meetings are recorded and later transcribed.

EXCUSE MEMBERS NOT PRESENT / QUORUM?

Motion by Manager Kehl and seconded by Manager Merrill, the following member(s) are hereby excused:

- Manager Wawrzyniak

President Kosmerl declared that a quorum was present.

The motion was passed upon the following vote:

VOTE								
Salman Abbasey, MD	X	Yes		No		Abstain		Absent
Doug Berwanger	X	Yes		No		Abstain		Absent
Cynthia Elbow	X	Yes		No		Abstain		Absent
Bryan Kehl	X	Yes		No		Abstain		Absent
Rich Kosmerl	X	Yes		No		Abstain		Absent
Mark Merrill	X	Yes		No		Abstain		Absent
Laura Paolucci	X	Yes		No		Abstain		Absent
Steve Perkins	X	Yes		No		Abstain		Absent
J. Thomas Reagan, MD	X	Yes		No		Abstain		Absent
James Wawrzyniak, DC		Yes		No		Abstain	X	Absent
VOTE TOTAL:	9	Yes		No		Abstain	1	Absent
RESULTS	X	PASS				FAIL		

WCCHS-21-011 CONSENT AGENDA

Motion by Manager Elbow and seconded by Manager Abbasey, the following items were listed for consideration on the consent agenda and are hereby approved as presented and on file in Administration:

- Approve BOM meeting minutes January 26, 2021
- Approve Special BOM meeting minutes February 8, 2021

The motion was passed upon the following vote:

VOTE								
Salman Abbasey, MD	X	Yes		No		Abstain		Absent
Doug Berwanger	X	Yes		No		Abstain		Absent
Cynthia Elbow	X	Yes		No		Abstain		Absent
Bryan Kehl	X	Yes		No		Abstain		Absent
Rich Kosmerl	X	Yes		No		Abstain		Absent
Mark Merrill	X	Yes		No		Abstain		Absent
Laura Paolucci	X	Yes		No		Abstain		Absent
Steve Perkins	X	Yes		No		Abstain		Absent
J. Thomas Reagan, MD	X	Yes		No		Abstain		Absent
James Wawrzyaniak, DC		Yes		No		Abstain	X	Absent
VOTE TOTAL:								
	9	Yes		No		Abstain	1	Absent
RESULTS								
	X	PASS				FAIL		

NF ADMINISTRATOR REPORT

Dawn James submitted the following report:

- The nursing facility had COVID19 return on 12/28/2020. To date, we have experienced 45 positive residents and 17 positive staff with multiple other staff exposed. We are required to test our residents every week and our staff are now tested twice a week. We currently have three active resident cases and one positive staff case. We have had a total of 4 deaths this surge. Three of those deaths were residents that came as comfort care prior to contracting COVID19.
- All three vaccine clinics federally provided through Walgreen’s are complete. Ninety percent (90%) of our residents are fully vaccinated, an additional 5% are willing to be vaccinated when we have vaccines available. We are looking for our current pharmacy partnership to provide the vaccines moving forward to keep any residents that are willing to be vaccinated complete. Fifty-eight percent (58%) of the staff that work in the nursing facility are vaccinated.
- Staffing remains a challenge for the nursing facility. The staff are not available to hire to fill the positions we have.
- We continue to remain strong (95% occupancy) in our census despite the current environment. Many nursing homes continue to struggle to recover, or have not attempted to recover from the recent surge.
- It has been 24 months since our last NYSDOH survey. We did; however, have a NYSDOH visit on January 26, 2021. There was a complaint in regards to the bed bugs that we have had difficulty clearing and a full infection control survey. We received notification of a deficiency related to cohorting of residents where a non-COVID positive resident was exposed to their COVID positive roommate. Due to stricter guidelines, the SNF must implement a directed plan of correction through the services of a consultant, not employed by the facility, to develop and implement an acceptable plan of correction (POC). The WCCHS Infection Preventionist, Margaret Ronan, assisted with the POC.

CHIEF NURSING OFFICER REPORT

Connie Almeter submitted the following report:

1. High Reliability:
 - a. LEAN Training – On February 5, 2021, the group participated in a conference call. Participants will begin buddying up with each other to work on projects. Although progress has been slow so far due to the pandemic, the group feels that working together will assist. Congratulations to Erica Killian, Director of PFS/Utilization Review for completing her project on 30-day readmissions. Erica is now a certified UB Lean Professional. Job well done!

2. Age Friendly Health System – The program is going smoothly. Deb Snow, Director of Med/Surg and ICU and Erica Killian, Director of PFS/Utilization Review, continue to monitor documentation compliance and look for opportunities of improvement. In addition, they have begun to submit data as they pursue the next level of the program, *Age-Friendly Health System-Committed to Care Excellence*.
3. Organizational Daily Huddle – No update. Huddle continues. These quick 10 minute or less gathering of several managers occur daily to communicate any departmental issues or other concerns such as a means of increasing communication.
4. Transfer Management – No update. Transfers continue to be monitored and reviewed frequently. Discussion occurs at the senior management level on a weekly basis and questionable transfers are often discussed directly with the transferring ED or on call Hospitalist.
5. EMS Partnerships – No update. No significant issues in the past month.
6. Joint Commission – The work has been completed for the mental health doors. A final update has been submitted. Awaiting feedback from the Joint Commission and a revisit. In addition, we wait to hear on information regarding a survey for the total hip and knee joint replacement program. Our original due date was 12/2020.
7. OR Steering Committee – First meeting is scheduled for February 22, 2021.

Coronavirus Update:

- At this time, visitation has been modified for the Emergency Department only. One visitor will be allowed in with the patients and may be paused at any time based on acuity and/or for concerns of a number of positive COVID19 patients in the ED. Inpatient visiting is expected to resume on March 1, 2021 but remain limited.
 - Multiple DOH surveys continue on a daily basis in regards to personal protective equipment (PPE), vaccinations, and COVID19 positive patients.
- Daily employee and visitor/outpatient screenings continue.
- Frequent assessments of PPE continue to be done.
- As of February 17, 2021, the COVID19 wings on the 3rd floor have been COVID19 free. These areas are being cleaned up and some of the negative pressure units removed in an attempt to regain some normalcy while continuing to be cautious for any potential influxes in the future.
- Nursing staff have assisted with scheduling for the vaccination clinics and in vaccinations.
- Inpatient statistics:

Date Range	Positive Inpatients	Ventilators	Transfers	Deaths
03/14/2020 – 04/22/2020	7	0	0	2
10/05/2020 – 12/31/2020	114	6	4	15
01/01/2021 – present	46	0	0	2

- Positive nursing staff – 17 (all have returned to work)
- Staffing continues to be a struggle from time to time and varies with quarantines, positive employees, or employees out with medical related reasons.

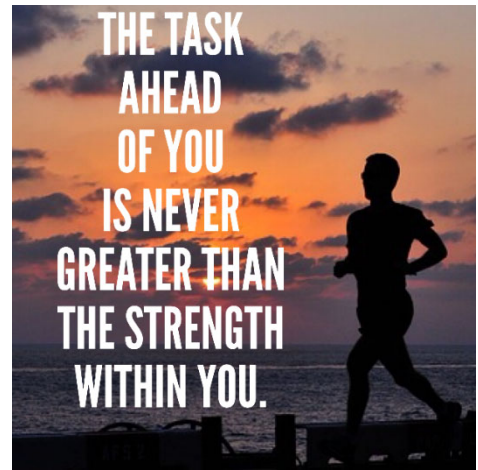
CORPORATE COMPLIANCE REPORT

Peggy Cunningham reported that the Corporate Compliance Committee met today and reviewed the Corporate Compliance Work Plan. It will be forwarded to the BOM for approval at the March 23, 2021 regular BOM meeting.

DIRECTOR OF MENTAL HEALTH REPORT

Bridget Givens submitted the following report:

- The unit has been consistently busy and full most every day.
- In January 2021, the unit admitted 31 patients with 355 patient days. Top three Counties for admission in this month were Wyoming, Allegany and Genesee.
- Total of 83 psychiatric evaluations through the Emergency Department and through ICU.
- The Crisis Outreach Program served 157 individuals with 207 contacts.
- Our Jail Program Coordinator served 64 inmates with 128 contacts and 36 with medication monitoring.
- The collaborative care program in the primary care office has started. The Behavioral Health Care Manager started on February 22, 2021. Will be training and orienting throughout the week. Starting to see patients the week of March 1, 2021. Recommended to carry a caseload of 60 or more patients per month.

**CHIEF FINANCIAL OFFICER (CFO) REPORT**

No report.

COUNTY HUMAN RESOURCE DIRECTOR REPORT

No report.

DIRECTOR OF PLANT OPERATIONS

Craig Woodworth submitted the following report:

Construction Projects

- O'Dell – The DOH inspection is scheduled for March 2021. The necessary documentation for the DOH binder will be finalized prior to the scheduled inspection.
- Transfer Switch – The non-critical electrical panels are currently being tied into the transfer switch. The SNF transfer switch is installed awaiting the electrical crossover to the generator switch. The 500kW generator disconnect must be replaced and is currently being coordinated with the generator manufacturer to accommodate the modified electrical load being placed on the equipment.
- The new telephone provider completed the new fiber installation within the hospital and SNF. This is the first step in changing to Empire Access which will result in an estimated 50% savings to our monthly bill. The “go live date” is set for early spring. There will be no interruption in services during the crossover.
- Lab/Med Records Project – The abatement is completed in both the medical records and administration corridor. Several pre-existing conditions need to be addressed prior to the base bid work commencing. Work on the third floor roof has started including the rough electrical pulls to accommodate the new Lab rooftop unit.
- Rooftop Unit Replacement – The engineering design for two new roof top units was completed. The bid drawings and specifications are placed on the Wyoming County website for prospective bidders. The project is advertised, with a pre-bid walk scheduled for March 2, 2021 and bid opening of March 9, 2021. The two rooftop units are for MHU and SNF.
- Mt. Morris Dialysis – Kideney Architect and Livingston County have agreed on a final design for the dialysis clinic. Construction is tentatively scheduled to start in March 2021. I'll be taking oversight of the project and assembling the DOH documentation for the final inspection in preparation for the clinic opening.
- Repairs to elevators 3, 4, and 5 door glides, rollers, and hydraulic seal replacement were completed as part of the preventative maintenance program.
- The Dietary dish line conveyor system required a new belt that was quoted at just over \$10,000 for materials. In order to save money, the maintenance department removed the conveyor belt, electrical components and installed a mechanical conveyor rarely used in Dietary to fulfill their needs. The entire project was completed in one day with minimal costs for the dish line conversion.
- The contents of the 3rd floor roof have been completely removed. Staff removed items they wanted to retain while the remaining items were disposed of. Two 30-yard dumpsters were filled as a result of this cleanout project.
- Created a preventative maintenance schedule for all fire/smoke doors and exit signs in accordance with NFPA and the Joint Commission standards. Each location is equipped with a QR code to identify what maintenance is required as well as any other documentation related to this asset.

- Entered into an energy curtailment program through Enel X that provides WCCHS quarterly rebates on utilities based off of the energy reduction initiated during a defined timeslot by the utility companies.
- The digital blueprint for every clinic was inserted into the AkitaBox program to assist facility occupants with entering work orders for their space. In addition, preventative maintenance schedules can now be created to ensure critical components are routinely inspected with proper documentation to support the work.
- Maintenance staff continued to maintain the negative pressure machines throughout the facility, as needed. Plastic walls were installed in SNF and 3rd floor of the hospital to isolate COVID19 patients. The air handling unit to SNF Peach and Aqua Units were manipulated to create a negative pressure for each location considering negative pressure machines are not an option. Negative pressure machine filters were changed out due to their operating hours.
- Maintenance staff completed 850 work orders over the last 30 days at a completion rate of 30 work orders per day. Total of 683 man-hours were logged for the specified time period.

INFORMATION TECHNOLOGY DIRECTOR REPORT

President Kosmerl reported a change to WCCHS email encryption services. In order to encrypt emails leaving the organization, users must include the word encrypt OR secure anywhere in the subject line. Also, the new system will automatically encrypt any outgoing email that appears to contain HIPAA information. Emails sent to other @wcchs.net accounts containing HIPAA do not need to be encrypted. As this is a new service, people outside WCCHS will need to create a new account the first time they receive an email that is encrypted. Voltage is no longer functioning and any email that was encrypted with Voltage cannot be retrieved.

MEDICAL DIRECTOR REPORT

Mandip Panesar, MD reported that the weekly Physician Contingency Plan meeting has been put on hold due to low COVID19 cases.

MEDICAL STAFF PRESIDENT REPORT

No report.

CHIEF MEDICAL OFFICER REPORT

No report.

CHIEF OPERATING OFFICER (COO) REPORT

Mike Corcimiglia submitted the following report:

Outpatient Clinical Services Division

General

Hospital COVID19 vaccine clinics occurred on February 10, 11 and 12, 2021 at Wyoming County Internal Medicine clinic and the Wyoming County Family Medicine - Arcade clinic. Over 200 people were vaccinated. Both clinics still have waiting lists of patients that are requesting to get vaccinated.

Endocrinology clinic volume is increasing due to referrals from WCCHS practices.

Welcome Dr. Jeril Kannampuzha, Pediatrician, to the Warsaw Pediatric Clinic. Dr. Kannampuzha will also be doing new born nursery on call coverage and examinations.

Due to the increase of COVID19 in Wyoming County, all clinics continue to experience a higher than normal amount of cancellations. We continue to experience multiple staffing issues due to staff or family members testing positive for COVID19, it has been difficult at times but staff have persevered.

Rural Health Center Designation

Working with assigned consultant on completing all necessary documentation for an official survey. Our official virtual survey is scheduled for the first week in March 2021.

Wyoming County Family Medicine - O'Dell Clinic Office

Administrative certificate of need (CON) has been approved by the NYSDOH pending contingencies, all contingencies have been met. All required supporting documents are in process for completion. Final inspection with the NYSDOH will not be on site. We are required to provide NYSDOH with all required documents through the DOH CON. Once documents are reviewed, we will receive a provisional approval. There will a physical inspection at a future date.

DSRIP-Finger Lakes Performing Provider System-\$864,652

Received \$218,245 related to Clinical Outcome Performance Payment-Measurement Year 5. This involved 15 projects and multiple areas of the Health System. Total money received over 5 years from Finger Lakes and Millennium Performing Provider System is \$909,384.

MIPS

January 19, 2021, we reported our MIPS Measures to CMS. We were able to successfully upload a file to CMS from Medent. Two notable improvement this year were establishing an interface with Health-e-Link and submission of immunizations to the New York State Immunization Information System (NYSIIS). Below is a summary of our clinics performance for those billing under the Health System's NIP.

Quality	42.71 / 45
Promoting Interoperability	12.25 / 25
Improvement Activities	15 / 15
Cost	--- / 15
Awarded Bonus Points	5 points
Total Score (without Cost)	75.08 / 100

Our total score (including Cost) for January 2020 reporting of 2019 performance was 70.67. We are quite pleased with our score this year.

Dialysis Center

Administrative certificate of need (CON) submitted to the NYSDOH. The NYSDOH Bureau of Architecture and Engineering have requested physical changes to the area to meet current codes. The Center will require some construction alterations which the NYSDOH is requesting. Working with Architects and Livingston County Nursing Home developing a time line to complete all requirements.

Laboratory Renovation-Transformation Grant \$3.1Million

Limited certificate of need (CON) submitted to the NYSDOH for approval has been submitted. The NYSDOH have submitted requests for additional information and drawings. CON status is under review.

Demolition of space for Phase 1 has been completed. Asbestos abatement for Phase 1 is completed which includes the Administrative wing flooring. Electrical and plumbing Phase 1 is currently taking place.

Project is on schedule, completion date is January, 2022.

Workplace Health

Workplace Health Services has been absorbed in a response to COVID19 since March 2020. Current volumes have gotten lighter since the last surge. The last COVID19 second vaccination clinic on site was held on February 4, 2021. Current focus on testing related to influenza-like illness, returns from quarantine and isolation, staff travel, and counseling worried staff.

Pharmacy

340B drug savings plan has started effective January 1, 2021. Continue to work with major retail pharmacies finalizing required paperwork. We will receive the benefits from the first quarter of the program in April, 2021.

Laboratory

Laboratory continues to process all rapid COVID19 tests for the Health System. This processing includes patients from the emergency room, surgical patients, medical surgical patients, nursing home staff and residents, and testing of people from Workplace Health. This equates to over 600 tests per week, we have 24 test readers. Note each test is \$95.

Primary Care Steering Committee

Primary Care Steering Committee kick off meeting was held on February 18, 2021. Focus will be on three major areas: provider and office dashboard, strategic and integration, and transparency. Workgroups have been formed for each area with an assigned lead.

Hospital Foundation

Community Foundation for Greater Buffalo William F. Thiel Trust has awarded \$180,000 towards a new state of the art telemetry system for the Health System. Current telemetry system is 13 years old and at end of life. Total Health System cost is \$220,000, the Hospital Foundation will provide the remaining \$40,000 to purchase the new telemetry system.

WCCHS-21-012 PREAUTHORIZED ACCOUNTS AND ACCOUNTS PAYABLE

Motion by Manager Elbow and seconded by Manager Perkins, the preauthorized accounts and accounts payable processed totaling \$4,863,319.36 be hereby approved as presented.

The motion was passed upon the following vote:

VOTE								
Salman Abbasey, MD	X	Yes		No		Abstain		Absent
Doug Berwanger	X	Yes		No		Abstain		Absent
Cynthia Elbow	X	Yes		No		Abstain		Absent
Bryan Kehl	X	Yes		No		Abstain		Absent
Rich Kosmerl	X	Yes		No		Abstain		Absent
Mark Merrill	X	Yes		No		Abstain		Absent
Laura Paolucci	X	Yes		No		Abstain		Absent
Steve Perkins	X	Yes		No		Abstain		Absent
J. Thomas Reagan, MD	X	Yes		No		Abstain		Absent
James Wawrzyniak, DC		Yes		No		Abstain	X	Absent
VOTE TOTAL:	9	Yes		No		Abstain	1	Absent
RESULTS	X	PASS				FAIL		

WCCHS-21-013 APPROVE WRITE-OFFS, DENIED CLAIMS, AND BAD DEBT

Motion by Manager Kehl and seconded by Manager Abbasey, the write-offs/denied claims/bad debt totaling \$276,602.95 be hereby approved as presented.

The motion was passed upon the following vote:

VOTE								
Salman Abbasey, MD	X	Yes		No		Abstain		Absent
Doug Berwanger	X	Yes		No		Abstain		Absent
Cynthia Elbow	X	Yes		No		Abstain		Absent
Bryan Kehl	X	Yes		No		Abstain		Absent
Rich Kosmerl	X	Yes		No		Abstain		Absent
Mark Merrill	X	Yes		No		Abstain		Absent
Laura Paolucci	X	Yes		No		Abstain		Absent
Steve Perkins	X	Yes		No		Abstain		Absent
J. Thomas Reagan, MD	X	Yes		No		Abstain		Absent
James Wawrzyniak, DC		Yes		No		Abstain	X	Absent
VOTE TOTAL:	9	Yes		No		Abstain	1	Absent
RESULTS	X	PASS				FAIL		

WCCHS-21-014 APPROVE PERSONNEL REQUISITIONS IN PROCESS AND PROPOSED PERSONNEL CHANGES/FINANCIAL IMPACT

Motion by Manager Elbow and seconded by Manager Paolucci, the personnel requisitions in process and the proposed personnel changes/financial impact be hereby approved as presented and as follows:

PERSONNEL REQUISITIONS IN PROCESS - (RECOMMENDED)										
February 23, 2021										
Proposed Positions for Approval										
Senior Manager	Title/Department	FTE	Vacating Employee	Hourly Rate	Annual Salary	Benefits	Proposed Hourly	Proposed Annual	Benefits	
James:	LPN/04.570	0.00	Christine Emke 02/05/2021	\$25.02	\$4,879	\$373	\$25.02	\$4,879	\$373	
	Nursing Assistant/05.604	1.00	Corey Fox 01/26/2021	\$15.41	\$30,050	\$14,370	\$15.41	\$30,050	\$14,370	
	Nursing Assistant Per Diem/05.720	0.00	Caitlin Pietron 02/04/2021	\$17.33	\$3,379	\$259	\$16.95	\$3,305	\$253	
	Nursing Assistant/05.645	1.00	Allison Beck 03/19/2021	\$16.14	\$31,473	\$15,050	\$15.41	\$30,050	\$14,370	
Chase:	Telephone Operator Per Diem/12.718	0.00	Elizabeth Miller 01/21/2021	\$18.93	\$3,691	\$282	\$16.95	\$3,305	\$253	
	Medical Biller/12.137	1.00	Amanda Claxton 02/25/2021	\$18.47	\$36,017	\$17,223	\$17.10	\$33,345	\$15,946	
Corcimiglia:	Cleaner/08.214	1.00	Beverly Twarozek 02/27/2021	\$15.45	\$30,128	\$14,407	\$12.24	\$23,868	\$11,414	
	Senior Pharmaceutical Clerk/12.158	1.00	Leigh Case 03/05/2021	\$23.76	\$46,332	\$22,156	\$20.78	\$40,521	\$19,377	
	RPN (Clinic)/03.219	1.00	Holly Balaya 02/12/2021	\$28.49	\$55,556	\$26,567	\$23.52	\$45,864	\$21,932	
	Cleaner/08.816	0.60	Kabita Monger 03/06/2021	\$13.13	\$15,362	\$4,407	\$12.24	\$14,321	\$4,109	
Givens:	RPN Per Diem/03.828	0.00	Rochelle Guldenschuh 02/10/2021	\$31.88	\$6,217	\$476	\$25.87	\$5,045	\$386	
Almeter:	Emergency Patient Care Technician/05.502	1.00	Susan Parmeter 03/08/2021	\$16.05	\$31,298	\$14,966	\$14.13	\$27,554	\$13,176	
	Screener/12.911	0.60	Christine Korytkowski 02/24/2021	\$12.67	\$14,824	\$4,253	\$12.24	\$14,321	\$4,109	

PROPOSED PERSONNEL CHANGES/FINANCIAL IMPACT				
February 23, 2021				
POSITION	ANNUAL SALARY PROPOSED	BENEFIT PACKAGE	BUDGETED SALARY	BUDGETED BENEFITS
Sr. Manager - A. Chase				
Delete 1 - 0.00 FTE Telephone Operator/12.725 Schedule WCCH, Grade 6 \$16.95 - \$18.93/Hr. Effective date: February 21, 2021	\$0	\$0	\$3,305	\$253
Sr. Manager - M. Corcimiglia				
Amend Salary Schedule - 1.00 FTE Medical Receptionist/12.189.153 Schedule X From \$14.49/Hr. to \$17.00/Hr. Available date: January 24.201	\$35,360	\$16,909	\$30,139	\$14,413
Create 1 - 1.00 FTE Cleaner Temporary Schedule WCCH, Grade 2A \$12.24 - \$15.45/Hr. Available date: February 21, 2021	\$23,868	\$1,826	\$0	\$0
Delete 1 - 1.00 FTE Medical Receptionist (Clinic)/12.196 Schedule WCCH, Grade 5 \$16.58/Hr. Effective date: February 6.2021	\$0	\$0	\$32,331	\$15,461
TOTALS	\$59,228	\$18,735	\$65,775	\$30,126
TOTAL ANNUAL INCREASE:				-\$17,938

The motion was passed upon the following vote:

VOTE								
Salman Abbasey, MD	X	Yes		No		Abstain		Absent
Doug Berwanger	X	Yes		No		Abstain		Absent
Cynthia Elbow	X	Yes		No		Abstain		Absent
Bryan Kehl	X	Yes		No		Abstain		Absent
Rich Kosmerl	X	Yes		No		Abstain		Absent
Mark Merrill	X	Yes		No		Abstain		Absent
Laura Paolucci	X	Yes		No		Abstain		Absent
Steve Perkins	X	Yes		No		Abstain		Absent
J. Thomas Reagan, MD	X	Yes		No		Abstain		Absent
James Wawrzyniak, DC		Yes		No		Abstain	X	Absent
VOTE TOTAL:	9	Yes		No		Abstain	1	Absent
RESULTS	X	PASS				FAIL		

WCCHS-21-015 APPROVE CONTRACTS AND/OR GRANTS

Motion by Manager Merrill and seconded by Manager Elbow, the CEO and President of the Board of Managers, with the approval of the County Attorney and/or Costello Cooney Fearon, PLLC or Garfunkel Wild, PC, be hereby authorized and directed to sign contracts and/or grants on behalf of the Wyoming County Community Health System as presented and as follows:

- Amend Resolution #WCCHS-20-107 approved on 12/22/2020, Resolution #WCCHS-20-035 approved on 04/28/2020; Resolution #WCCHS-19-017 approved on 02/26/2019; Resolution #WCCHS-17-027 approved on 03/28/2017; Resolution #WCCHS-17-012 approved on 01/24/2017, with **GENERAL PHYSICIAN, PC**, 726 Exchange Street, Suite 516, Buffalo, NY 14210 related to otolaryngology (ear, nose and throat) and allergy medicine services at WCCHS clinic, not to exceed \$246,670 per year, as follows:
 - Extend the term for an additional one-year period from 04/18/2020 – 04/17/2021 through **04/18/2021 – 04/17/2022**.
 - Pending approval by the Wyoming County Board of Supervisors [Resolution #21-035 approved on 01/12/2021, Resolution #20-240 approved on 05/12/2020, Resolution #19-162 approved on 03/12/2019, Resolution #17-201 approved on 04/11/2017, Resolution #17-076 approved on 02/14/2017].

2. Amend Resolution #WCCHS-20-035 approved on 04/28/2020 with **THE LA PENNA GROUP, INC.**, 2110 Enterprise Street, SE, Suite 300, Grand Rapids, MI 49508-5325 related to market value analysis of physician contracts, not to exceed \$15,000, as follows:
 - Extend the term from 02/24/2020 – 03/31/2020 through **04/01/2020 – 03/31/2021** and further extend through **03/31/2022**.
3. **CARAFLOW, LLC**, 5826 W. Bluemound Road, Milwaukee, WI 53213-4226, annual software subscription renewal for QYK mobile computer including technical support for two machines (QS3387 and QS3388), supports vaccination clinics, \$1,500, effective 02/23/2021 – 02/23/2022.
4. Amend Resolution approved on 12/16/2014 with **SIEMENS MEDICAL SOLUTIONS USA, INC.**, 170 Wood Avenue South, Iselin, NJ 08830 related to Somatom Perspective 64 CT services agreement, \$60,842 annually, as follows:
 - Change the contract term from 02/01/2015 – 01/31/2021 to **05/01/2015 – 04/30/2021** to reflect the actual start and end date of the service agreement.
 - All else remains the same.
 - Pending approval by the Wyoming County Board of Supervisors [Resolution #15-030 approved on 01/20/2015].
5. Amend Resolution#WCCHS-18-127 approved on 11/27/2018 with **PHILIPS**, 22100 Bothell Everett Highway, Bothell, WA 98032, a Philips service agreement multi-vendor service contract related to service and preventive maintenance agreements on imaging equipment, \$70,029.66 per year, as follows:
 - Add additional imaging equipment: the Siemens Somatom Perspective 64 CT scanner and Syngo Workstation Unlimited tube coverage, add the DXR GE portable #2 1 tube and 1 battery, \$58,004.07, effective 05/01/2021 – 09/30/2023.
 - Pending approval by the Wyoming County Board of Supervisors [Resolution #18-576 approved on 12/18/2018].
6. **ROCHESTER RHIO [previously Greater Rochester RHIO]**, 200 Canal View Boulevard, Rochester, NY 14623, a master services agreement, RHIO operates a community health information exchange platform, governed by a Board of Directors comprised of community stakeholders and regulated by New York State Department of Health, the RHIO provides health information exchange services, including the required core services as defined by the SHIN-NY Regulation, 10 NYCRR Part 300, \$22,112 per year [previous agreement \$18,569 per year], effective 02/04/2021 – 02/03/2022.
7. **ZIRBAT, LLC dba Quatrex Corporation**, PO Box 684, York, SC 29745-0684, software license, support and maintenance agreement for acute nursing scheduling software, \$3,024 [previous agreement \$2,880], effective 04/01/2021 – 03/31/2022.
8. **TRANE**, 45 Earhart Drive, Suite 103, Buffalo, NY 14221, a pump and chiller repairs agreement to make critical pump and chiller repairs to the hospital chilled water system prior to the cooling season, \$8,670, effective 03/01/2021 – 04/15/2021.
9. **TRANE US, INC.**, 45 Earhart Drive, Suite 103, Buffalo, NY 14221-7809, a chiller service agreement, maintenance contract on the 240 and 500 ton chillers, \$19,351 per term [previous agreement \$18,600 per term], effective 07/01/2021 – 06/30/2024.
10. **EHRlich**, 505 Duke Road, Suite 300, Cheektowaga, NY 14225-5142, cluster fly treatment agreement, monthly treatment above operating room ceiling, service glue boards and insect light traps (ILTs) during visit to reduce operating room contamination because of cluster flies, \$3,600 [same cost as previous agreement], effective 02/28/2021 – 10/30/2021.
11. **DANFORTH**, 300 Colvin Woods Parkway, Tonawanda, NY 14150, USP compliant pharmacy biological safety cabinet and isolator certification agreement to perform semi-annual IV hood certification in compliance with USP regulations, \$2,962 [previous agreement \$2,860], effective 03/01/2021 – 02/28/2022.

12. Amend Resolution #WCCHS-20-035 approved on 04/28/2020 with **SHC SERVICES, INC. dba Supplemental Health Care**, 95 John Muir Drive, suite 100, Amherst, NY 14228 related to agency staffing in an amount not to exceed \$100,000 per year as follows:
 - Extend the term of this agreement from 03/13/2020 – 03/12/2021 through **03/13/2021 – 03/12/2023**.
 - All else remains the same.
 - Pending approval by the Wyoming County Board of Supervisors [Resolution #20-243 approved on 05/12/2020].
13. **KIDENEY ARCHITECTS, PC**, 143 Genesee Street, Buffalo, NY 14203, professional design services for new physician office, drawings and measurements for 35 Main Street, Attica, NY property renovations, not to exceed \$2,000, effective 02/10/2021 – 02/09/2021.
14. **SPECIAL CARE SYSTEMS**, 1450 E. Ridge Road, Rochester, NY 14621, a nurse call system upgrade for Skilled Nursing Facility Blue and Plum units to match existing hardware throughout the facility, the existing nurse call system is at the end of life cycle and no parts are available, \$137,782 base price plus \$13,778 10% contingency, effective 04/01/2021 – 08/30/2021, pending approval by the Wyoming County Board of Supervisors.
15. **MGMA**, MGMA Headquarters, 104 Inverness Terrace East, Englewood, CO 80112-5306, a MGMA organizational membership agreement, \$7,500 per year [same cost as previous agreement], effective 02/28/2021 – 02/27/2022.
16. **MJ MECHANICAL SERVICES, INC.**, 4550 Genesee Street, Geneseo, NY 14454, ice machine service agreement to clean and sanitize 10 ice machines as indicate in the service agreement, \$4,690 per year [previous agreement \$4,366 per year], effective 08/01/2021 – 07/31/2022.
17. Amend Resolution# WCCHS-20-054 approved on 06/23/2020 with **WYOMING COUNTY OFFICE FOR THE AGING**, 8 Perry Avenue, Warsaw, NY 14569, related to shared services of Registered Dietician, as follows:
 - Increase the Memorandum of Understanding (MOU) amount to include an additional not to exceed of \$1,500 per year for mileage reimbursement accrued while working as Registered Dietician for Office of the Aging, effective 05/01/2020.
 - Extend the term of the MOU from 05/01/2020 – 04/30/2021 through **05/01/2021 – 04/30/2024**.
18. Amend Resolution #WCCHS-18-137 approved on 12/18/2018 and Resolution #WCCHS-18-054 approved on 06/26/2018 with **PIPELINE HEALTH HOLDINGS, LLC**, 5600 North River Road, Suite 800, Rosemont, IL 60018 related to remote pharmacist services, as follows:
 - Institutes cost of living based price increases yearly, not to exceed \$125,000 [previous agreement not to exceed \$100,000] per year, effective 01/01/2021 – 12/31/2021.
 - Pending approval by the Wyoming County Board of Supervisors [Resolution #18-304 approved on 07/10/2018 and Resolution #19-035 approved on 01/08/2019].
19. Award bid and sign contract related to printers with **USHERWOOD OFFICE TECHNOLOGY**, 1005 W Fayette Street, Syracuse, NY 13204, a lease agreement to replace currently leased Xerox printers and new leased Canon branded units, not to exceed \$437,511 for base price and estimated overage costs [\$32,500 savings per year from previous agreement], effective 03/01/2021 – 02/28/2026, pending approval by the Wyoming County Board of Supervisors.

The motion was passed upon the following vote:

VOTE									
Salman Abbasey, MD	X	Yes		No		Abstain		Absent	
Doug Berwanger	X	Yes		No		Abstain		Absent	
Cynthia Elbow	X	Yes		No		Abstain		Absent	
Bryan Kehl	X	Yes		No		Abstain		Absent	
Rich Kosmerl	X	Yes		No		Abstain		Absent	
Mark Merrill	X	Yes		No		Abstain		Absent	
Laura Paolucci	X	Yes		No		Abstain		Absent	
Steve Perkins	X	Yes		No		Abstain		Absent	
J. Thomas Reagan, MD	X	Yes		No		Abstain		Absent	
James Wawrzyniak, DC		Yes		No		Abstain	X	Absent	
VOTE TOTAL:									
	9	Yes		No		Abstain	1	Absent	
RESULTS									
	X	PASS					FAIL		

BOARD ASSIGNED PROJECTS REPORT

Don Eichenauer briefly reviewed his project report for January 2021 as included on Page 37 in the agenda packet.

BOARD PRESIDENT REPORT

No report.

BOARD COMMITTEE CHAIR REPORTS

Acute Quality Committee

Manager Paolucci reported that the Acute Quality Committee met on February 17, 2021, referred to the draft minutes, and reported on the following items. The next meeting is scheduled for May 19, 2021.

- Reviewed status of the 2020 Acute goals:
 - Medication reconciliation, acknowledged team for collaborative effort to reduce medication errors
 - Verbal orders, noting great progress has been made on unsigned verbal orders
- Joint Commission preparedness
- High Reliability Processes / LEAN training
- Discussed stroke certification and reviewed emergency department neurological transfers, they are trending in the right direction
- Received update on the Age-Friendly Health System
- 2021 Acute goals:
 - Nursing documentation
 - Medication reconciliation
 - Improve HCAHPS scores for all departments
 - In-house collections
 - Joint Certification Program
- Will continue to monitor falls and infection rates in 2021
- Acute Performance Improvement Committee meet in February 3, 2021 and discussed action items and projects
 - 2021 action items:
 - Unsigned verbal orders, monitor any trends
 - Inpatient and outpatient chart audits
 - Improving communication between department

SNF Quality Committee

Manager Elbow reported that the SNF Quality Committee met on February 17, 2021, referred to the draft minutes, and reported on the following items. The next meeting is scheduled for May 19, 2021.

- Point Click Care software update:
 - Narcotic ordering module is up and running
 - Working on Lab and Radiology interfaces
- Medication scanning – was up and running but due to complications with COVID19 was placed on hold
- Optima software – doing well, end of month billing is improved with this program

- Nursing Home Compare:
 - Census was maintained throughout the entire COVID19 pandemic. Some facilities had been reducing admissions up to 50%.
- PI Projects:
 - Pressure ulcers – adding a CNA to the pressure ulcer team for input as front line workers
 - Depression rate has declined from 6.7 to 4.1
 - Team communication project initiated
- Dietary – purchased new coffee pitchers that retain heat better and purchased new plates that maintain temperatures longer
- Activities department – working on obtaining iPads so more residents can be involved through Zoom activities
- Medication errors – seen a significant drop
- Infection control – completed Clia Waiver to obtain Bi-Nex testing from the NYSDOH, no cost to the facility
- Swing Bed process is going very well.
- Funding received:
 - \$53,291 from 2019 Nursing Home Quality Initiative
 - \$164,979 NYS reinvestment in nursing homes
 - \$171,110 incentive payment for infection control outcomes
- As more residents transition to Medicare Fee for Service, the facility should see a steady increase in IGT funding over the next couple of years.

Finance/Personnel Committee

No report.

Plant and Equipment Committee

Bryan Kehl reported that the Plant and Equipment Committee met on February 9, 2021 and referred to the draft minutes. The next meeting is scheduled for March 9, 2021.

Communications Committee

No report.

Information Technology

No report.

Governance Committee

No report.

Compensation Committee

No report.

Credentials Committee

No report.

CHIEF EXECUTIVE OFFICER (CEO) REPORT

Joe McTernan reported on the following items:

COVID

- Have observed a significant reduction in case rate with lower community positive rates of COVID19.
- Staff member illness and quarantine due to COVID19 has reduced significantly.
- Have reduced COVID19 daily briefings to weekly.

Financials

- Still no distribution plan for relief package from Washington, potential of \$35 billion for healthcare including \$7 billion in Rural Hospital Relief.
- WCCHS continues to work with State, Federal, and Industry Groups on advocacy.
- Budget challenges continue with lost revenue and increased COVID19 expenses.
- Still significant uncertainty on the state and federal level.

Non-COVID related information

- Dialysis – remains awaiting state approve. Working on submission for inpatient CON.
- Continued work with the senior leadership team on succession planning.

Legislative Actions

- Nurse staffing ratios bill advances; HANYS advocating to stop it
- Governor Cuomo's budget amendment package includes several proposals that would impact both hospitals and long-term care providers.
 - This includes increasing civil fines and penalties with the overall cap on fines increasing from \$10,000 to \$25,000.
 - Public disclosure of information: Would require nursing homes to post publicly on their website maximum rates charged by the facility, including rates for each non-governmental payer source. Nursing homes would also be required to post ownership and landlord-related information publicly, as well as a summary of all contracts for provision of goods or services for which the facility pays with any portion of Medicaid or Medicare funds.

EXECUTIVE SESSION

Motion by Manager Elbow and seconded by Manager Perkins, for the Board to enter into executive session to discuss the following topic(s) at 5:36pm. Joe McTernan, Pam Pettnot, Dan Farberman, Ahmed Bayoumi MD, Mandip Panesar MD, Becky Ryan, and Jerry Davis remained. All other attendees ended their Zoom session or left the meeting room.

- Notification received from NYS Office of Professional Medical Conduct, OPMC# BU-21-02-1111A
- Recommendation of the Joint Conference Committee investigation related to Event #4957 involving medically privileged information
- Status of Human Resources investigation related to employment history and performance of two (2) particular Salary Schedule P employees
- Status of Human Resources investigation related to a letter of complaint received by the BOM against a particular Salary Schedule C employee
- Employment history and matters leading to the discipline of a particular Salary Schedule P employee
- Employment history and matters leading to the dismissal of a particular Salary Schedule P employee
- Complaint received from CSEA regarding violation of NYS Civil Service Law Section 209-a. 1. (g)
- Litigation Case# 1079445 (MP)
- Legal advice from counsel regarding financial and employment history of contracted physicians/providers related to compliance
- Review results of the 2020 annual performance evaluation of the current CEO and establish 2021 goals

The motion was passed upon the following vote:

VOTE								
Salman Abbasey, MD	X	Yes		No		Abstain		Absent
Doug Berwanger	X	Yes		No		Abstain		Absent
Cynthia Elbow	X	Yes		No		Abstain		Absent
Bryan Kehl	X	Yes		No		Abstain		Absent
Rich Kosmerl	X	Yes		No		Abstain		Absent
Mark Merrill	X	Yes		No		Abstain		Absent
Laura Paolucci	X	Yes		No		Abstain		Absent
Steve Perkins	X	Yes		No		Abstain		Absent
J. Thomas Reagan, MD	X	Yes		No		Abstain		Absent
James Wawrzyniak, DC		Yes		No		Abstain	X	Absent
VOTE TOTAL:	9	Yes		No		Abstain	1	Absent
RESULTS	X	PASS				FAIL		

WCCHS-21-016 REPORT OF THE JOINT CONFERENCE COMMITTEE

Motion by President Kosmerl and seconded by Manager Paolucci, the BOM hereby approves and supports the recommendations made by the Joint Conference Committee at their February 19, 2021 meeting and as reported to the BOM on February 23, 2021 related to information involving performance a particular individual and other proprietary medical information, Event #4957.

The motion was passed upon the following vote:

VOTE								
Salman Abbasey, MD	X	Yes		No		Abstain		Absent
Doug Berwanger	X	Yes		No		Abstain		Absent
Cynthia Elbow	X	Yes		No		Abstain		Absent
Bryan Kehl	X	Yes		No		Abstain		Absent
Rich Kosmerl	X	Yes		No		Abstain		Absent
Mark Merrill	X	Yes		No		Abstain		Absent
Laura Paolucci	X	Yes		No		Abstain		Absent
Steve Perkins	X	Yes		No		Abstain		Absent
J. Thomas Reagan, MD	X	Yes		No		Abstain		Absent
James Wawrzyniak, DC		Yes		No		Abstain	X	Absent
VOTE TOTAL:	9	Yes		No		Abstain	1	Absent
RESULTS	X	PASS				FAIL		

Ahmed Bayoumi, MD, Mandip Panesar, MD, Becky Ryan, and Jerry Davis were excused from Executive Session at 6:35pm.

Motion by Manager Paolucci and seconded by Manager Elbow, the Board exit executive session at 7:38pm.

The motion was passed upon the following vote:

VOTE								
Salman Abbasey, MD	X	Yes		No		Abstain		Absent
Doug Berwanger	X	Yes		No		Abstain		Absent
Cynthia Elbow	X	Yes		No		Abstain		Absent
Bryan Kehl	X	Yes		No		Abstain		Absent
Rich Kosmerl	X	Yes		No		Abstain		Absent
Mark Merrill	X	Yes		No		Abstain		Absent
Laura Paolucci	X	Yes		No		Abstain		Absent
Steve Perkins	X	Yes		No		Abstain		Absent
J. Thomas Reagan, MD	X	Yes		No		Abstain		Absent
James Wawrzyniak, DC		Yes		No		Abstain	X	Absent
VOTE TOTAL:	9	Yes		No		Abstain	1	Absent
RESULTS	X	PASS				FAIL		

President Kosmerl reported that the BOM accepted the report of the Joint Conference Committee related to Event #4957 during Executive Session as recorded in these minutes. The Joint Conference Committee has completed their investigation and will consider this case closed. In lieu of waiting until a future JCC meeting to approve the minutes, President Kosmerl suggested the JCC approve the minutes via an email ballot.

NEXT REGULAR MEETING

The next regular meeting is scheduled for Tuesday, March 23, 2021 immediately following the BOM Finance/Personnel Committee meeting, approximately 5:00pm.

ADJOURN

There being no further business to come before the Board, the meeting duly adjourned at 7:40pm upon motion by Manager Paolucci.

J. Thomas Reagan, MD, BOM Secretary Date

Pam Pettnot, Recording Secretary Date