

The regular meeting of the Wyoming County Community Health System (WCCHS) Board of Managers, Wyoming County, New York was held on Tuesday, June 22, 2021

**BOARD OF MANAGERS PRESENT/ABSENT**

- |   |  |  |
|---|--|--|
| <input checked="" type="checkbox"/> Salman Abbasey, MD      | <input checked="" type="checkbox"/> Rich Kosmerl   | <input type="checkbox"/> J. Thomas Reagan, MD            |
| <input type="checkbox"/> Doug Berwanger                     | <input checked="" type="checkbox"/> Mark Merrill   | <input checked="" type="checkbox"/> Larry Rogers         |
| <input checked="" type="checkbox"/> Cynthia Elbow           | <input checked="" type="checkbox"/> Laura Paolucci | <input checked="" type="checkbox"/> James Wawrzyniak, DC |
| <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"/> Dawn James (NF Administrator)                                  |
| <input type="checkbox"/> Ahmed Bayoumi, MD (Medical Staff President)  | <input checked="" type="checkbox"/> Paul Mason, MD (Chief Medical Officer of Orthopaedic Services) |
| <input checked="" type="checkbox"/> Amy Chase (Chief Financial Officer)   | <input checked="" type="checkbox"/> Joe McTernan (Chief Executive Officer)                         |
| <input type="checkbox"/> Greg Collins, DO (Credentials Committee Chair)   | <input checked="" type="checkbox"/> Mandip Panesar, MD (Hospital Medical Director)                 |
| <input checked="" type="checkbox"/> Mike Corcimiglia (Chief Operating Officer)                                  | <input checked="" type="checkbox"/> Pam Pettnot (Executive Assistant)                              |
| <input checked="" type="checkbox"/> Peggy Cunningham (Director of WPHS, Clinic Quality, & Corporate Compliance) | <input type="checkbox"/> Denise Prusak (NF Director of Nursing)                                    |
| <input checked="" type="checkbox"/> Dan Farberman (WC Human Resource Director)                                  | <input checked="" type="checkbox"/> Bill Sikes (County IT Director)                                |
| <input checked="" type="checkbox"/> Bridget Givens (Director of Mental Health)                                  | <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), and Don Eichenauer (Consultant)

**CALL MEETING TO ORDER**

President Kosmerl called the meeting to order at 5:10pm.

***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 Elbow and seconded by Manager Paolucci, the following member(s) are hereby excused:

- Manager Berwanger

President Kosmerl declared that a quorum was present.

The motion was passed upon the following vote:

<b>VOTE</b>								
Salman Abbasey, MD	X	Yes		No		Abstain		Absent
Doug Berwanger		Yes		No		Abstain	X	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		Yes		No		Abstain	X	Absent
Larry Rogers	X	Yes		No		Abstain		Absent
James Wawrzyniak, DC	X	Yes		No		Abstain		Absent
<b>VOTE TOTAL:</b>	9	Yes		No		Abstain	2	Absent
<b>RESULTS</b>	<b>X</b>	<b>PASS</b>				<b>FAIL</b>		

**WCCHS-21-039 CONSENT AGENDA**

Motion by Manager Elbow and seconded by Manager Merrill, 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 ..... May 25, 2021

**Credentials Committee (06/16/2021)**

Approve Medical Staff Appointments / Reappointments

**APPOINTMENTS**

**DEPARTMENT OF MEDICINE**

Vijay Iyer, MD – Cardiologist – is applying for Active staff status in the Department of Medicine

**DEPARTMENT OF SURGERY**

Andrea Zucchiatti, MD – General Surgeon – is applying for Active staff status in the Department of Surgery

Tracie Terrana, MD – General Surgeon – is applying for Active staff status in the Department of Surgery

**REAPPOINTMENTS**

**DEPARTMENT OF SURGERY**

- Robert Brown, MD (Active) – Orthopedics
- Ik-Sung Kwon, MD (Active) – Ophthalmology
- Stefan Lucas, MD (Active) – Anesthesia
- Kevin O’Connell, MD (Active) – ENT
- Christopher Shanahan, PA (Allied Health) – Orthopedics
- Daniel Tellem, DPM (Active) – Podiatry
- Evan Verbofsky, DPM (Active) - Podiatry
- Jeffrey Cunningham, CRNA (Allied Health)
- Holly Evans-Brown, CRNA (Allied Health)
- Kiel Pfaff, CRNA (Allied Health)
- John Polechetti, CRNA (Allied Health)
- Daniel Ruffo, CRNA (Allied Health)
- Phillip Ruffo, CRNA (Allied Health)

**EMERGENCY DEPARTMENT**

- Roger Badgley, PA (Allied Health)
- Scott Belote, MD (Active)
- Gregory Collins, DO (Active)
- Gregory DiFrancesco, MD (Active)
- Nancy Ebling, DO (Active)
- Daniel Fahey, MD (Active)
- Michael Filice, MD (Active)
- Alexander Ljungberg, DO (Active)
- Geoffrey Schweikhard, DO (Active)
- Eric Waltz, PA (Allied Health)
- Kyle Westerholt, MD (Active)

**DEPARTMENT OF OB/GYN**

- Farkad Balaya, MD (Active)

**DEPARTMENT OF RADIOLOGY**

- Michael Aiello, MD (Courtesy)
- Aamer Farooki, MD (Telemedicine)
- Jubin Jacob, MD (Courtesy)
- Alan Mautz, MD (Courtesy)
- Mordechai Rehany, MD (Courtesy)
- Matthew Smith, MD (Courtesy)
- Ian Wilson, MD (Courtesy)

**DEPARTMENT OF MEDICINE**

- Salman Abbasey, MD (Active) – Internal Medicine
- Ashley Bartz, PA (Allied Health) – Family Medicine
- Tobi Berchen, MD (Community Based - Pediatrics)
- Dean Brewer, DO (Active) – Family Medicine
- Debra Brown, NP (Allied Health) –Adult Medicine
- Peter Coggiola, NP (Allied Health) – Psychiatry
- Sydney Domanowski, DO (Active) – Family Medicine
- Brittany Holman, NP (Allied Health) – Family Medicine
- Lisa Kemp, NP (Allied Health) – Adult Medicine
- Katherine Niespodzinski, PA (Allied Health) – Family Medicine
- Mandip Panesar, MD (Active) – Nephrology
- Angela Potter, PA (Allied Health) – Family Medicine
- J. Thomas Reagan, MD (Consulting) – Family Medicine
- Michele Zeches-O-Neil, NP (Allied Health) – Family Medicine

The motion was passed upon the following vote:

<b>VOTE</b>								
Salman Abbasey, MD		Yes		No	X	Abstain		Absent
Doug Berwanger		Yes		No		Abstain	X	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		Yes		No		Abstain	X	Absent
Larry Rogers	X	Yes		No		Abstain		Absent
James Wawrzyniak, DC	X	Yes		No		Abstain		Absent
<b>VOTE TOTAL:</b>								
	8	Yes		No	1	Abstain	2	Absent
<b>RESULTS</b>								
	<b>X</b>	<b>PASS</b>				<b>FAIL</b>		

**NF ADMINISTRATOR REPORT**

Dawn James submitted the following report:

- The nursing facility will begin having visits in the resident's rooms on June 21, 2021. Visits will not be open to everyone, only two designated personal caregivers that provide emotional support to the resident. They will be allowed to come in anytime from 9:00am to 7:00pm, seven days per week. In addition, compassionate care visits are allowed anytime for end of life or serious change in condition. This is the beginning of bringing some normality back for the residents and families.
- Vaccination rates for staff continue to slowly increase. We have increased from 64% of staff vaccinated in April 2021 to 68% for May 2021. Resident vaccinations are 99% acceptance. We continue to report the vaccination status of each staff member and resident, this will be posted for the public to see. Low vaccination rates of staff could impact how the public feels about coming to any facility. We continue to offer, educate, and encourage our staff to be vaccinated.
- Testing of nursing facility staff has finally changed. We now only test unvaccinated staff twice a week. Vaccinated staff will only have to be tested if the community rate increases to high level. Leading Age continues to advocate for the removal of the Hospital Emergency Response Data System (HERDS) survey that has been reported every day since March 2020. Both State and Federal reporting is very burdensome and repetitive. Any support with contacting legislatures to reduce the remaining burdens would be greatly appreciated.
- Staffing remains a challenge for the nursing facility. The staff are not available to hire to fill the positions we have. We have had some luck with attaining agency nurses late this month but certified nursing assistants are limited. We are again working with Community Action and Genesee Valley BOCES and our class is set to start on July 19, 2021. Recruitment for the class has been very slow, only a handful have signed up to attend so far.
- Occupancy has rebounded to 99-100% occupancy for June 2021.
- It has been 29 months since our last New York State Department of Health (NYSDOH) survey. Full surveys have continued although slowly. We are one of three in the Buffalo region that are the longest since most recent full survey. Preparation is ongoing for the facility.

**CHIEF NURSING OFFICER REPORT**

Connie Almeter submitted the following report:

1. High Reliability – the journey to zero harm. Many Quality goals/projects are underway to include fall prevention, medication reconciliation, hand-off communication, departmental communication, nursing documentation, and infection prevention.
  - a. LEAN Training – All participants have completed their projects. A synopsis is located at the bottom of this report. Thanked the Wyoming Community Hospital Foundation for their support funding the LEAN training.
2. Age Friendly Health System – No update. The program is going smoothly. Deb Snow, Director of Medical/Surgical and Intensive Care and Erica Kilian, Director of Utilization Review continue to monitor documentation compliance and for opportunities of improvement. Data continues to be submitted as they pursue the next level of the program, *Age-Friendly Health System-Committed to Care Excellence*.
3. Organizational Daily Huddle – No update. A virtual huddle has been established and is working fairly well. Daily, managers enter pertinent information into a data base that is then emailed out to all department managers for review.
4. Transfer Management – Transfers continue to be monitored and reviewed frequently. Quarterly meetings are scheduled with management, Dr. Daniel Fahey, Dr. Ronald Weissenberg, Dr. Ahmed Bayoumi, and Dr. David Privitera. Discussion continues at the senior management level on a weekly basis and questionable transfers are often discussed directly with the transferring Emergency Department or on call Hospitalist.
5. Emergency Medical Services (EMS) Partnerships – No concerns to report at this time with Monroe, our transferring agency. They continue to experience staffing issues but have been able to maintain appropriate coverage to transfer patients, as needed.
6. Joint Commission – Communication has been received from the Joint Commission that the Total Hip and Knee Joint Program will be surveyed virtually. Our window begins August 2021 through October 2021. Numerous documents will be uploaded into a secure site and sent for review prior to the survey.
7. Operating Room Steering Committee – Meetings continue on a monthly basis. Next scheduled meeting is for June 22, 2021. Dashboards have been established to trend data, virtual inventory being worked on, changes in staff scheduling has been initiated to assist in providing staggered shifts and decrease overtime, and working on agreements for all surgical products.
8. Staffing – Staffing challenges continue. Nurses leaving for agency work and/or day shift positions leaving no option but to utilize agency staff for coverage. Nursing leadership brainstorming for other options.

**Coronavirus Update:**

- Visitation hours has been expanded as well as allowing 2 visitors per patient.
- Multiple DOH surveys continue on a daily basis in regards to personal protective equipment (PPE), vaccinations, and COVID vaccinations.
- Daily employee and visitor/outpatient screenings continue. Use of masks continue.
- Frequent assessments of PPE continue to be done.

LEAN Projects

<b>Team Member(s)</b>	<b>Projects</b>	<b>Savings</b>
Staci Bartz Deb Snow	Optimizing Patient Throughput from the Emergency Department to Medical/Surgical (non-COVID) Unit	\$46,741.72
Melissa Colby Justin Bayliss	Facility Acquired Pressure Ulcers	\$5,801.00
Cory Cino Shannon Klancer LuAnne Roberts	Reduction of Electronic Storage	\$47,725.00 \$7,725.00
Brittany Coffta Kevin Kreutzer	Outpatient Prior Authorization Denials	\$18,724.25
Erica Kilian	Reducing Readmissions	\$19,824.00
Michelle Grohs	Reducing Turn Over Time in Total Knee Replacement Surgery	\$56,429.50
<b>Total</b>		<b>\$202,970.47</b>

**CORPORATE COMPLIANCE REPORT**

No report.

**DIRECTOR OF MENTAL HEALTH REPORT**

Bridget Givens submitted the following report:

- In May 2021, the unit admitted 46 patients with 330 patient days. Top three counties for admission in this month were Wyoming, Livingston and Genesee County.
- Total of 82 psychiatric evaluations through the Emergency Department and 18 through ICU.
- Important to note, we continue to see a decrease in heroin use and abuse with patients that are presenting to the Emergency Department but an increase in the use of crystal meth. This is consistent with reports from law enforcement.
- The collaborative care program in the primary care office continues to grow and do well within the community.
- The care manager is located in Perry, Warsaw and Arcade. Response from providers continues to be positive. Currently, 67 patients are enrolled in the program.

**MAY WAS MENTAL HEALTH AWARENESS MONTH, BELOW ARE SOME DRAWINGS FROM A PATIENT.**



**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**

- Transfer Switch – The hospital's 500kW generator disconnect is in transit. Once the material arrives, a schedule will be coordinated to crossover the remaining electrical panels for each department. The SNF emergency generator transfer switch cross over for the country kitchens for Blue and Plum is complete. Both locations are now supported by the emergency generator.
- Laboratory/Medical Records Project – The structural steel to support the Lab air handler is installed over the Operating Room. The new air handler was lifted into place and secured to the structural steel platform. Drywall and ceilings are currently underway in the lab space. This portion of the project is expected to be complete by the end of July 2021.
- Rooftop Unit Replacement – The two air handler submittals were approved and both units are in fabrication. The anticipated delivery for both air handlers is August 2021.
- Mt. Morris Dialysis – All equipment related to the dialysis renovation project was delivered to Livingston County. Their staff is ready to start the capital project scope. All testing agencies will be scheduled in time for the final inspection so the NYSDOH documentation can be submitted without delay.
- Electric Panel Replacement – The final bid documents are expected to be complete by the end of June 2021. Advertisement for respective bidders will take place early July 2021 with a bid opening scheduled for mid-July 2021.
- Radiology – Room #3 is completely renovated. Maintenance staff patched the subfloor in preparation for new floor finishings. In addition, the walls were patched, primed, painted, new lighting, and doors were installed. The maintenance department is currently renovating the dressing rooms directly across from Room #3. This includes rebuilding the changing rooms, floor replacement, lighting and wall treatments.
- SNF Nurse Call System – The nurse call system upgrade for Blue and Plum is complete. The server, cabling and patient room devices were changed out to a similar version installed within the hospital one year ago. This will enable the maintenance department to keep the respective replacement parts on hand as issues arise. Training on the new equipment was finalized with SNF staff.
- Parking Lots – The bid specifications for sealing Parking Lots #1, #2 and Thomson Hall are complete. The scope includes milling portions of the parking lots, crack filling the seams, and sealing all three locations. The bids are awaiting BOM and BOS approval before proceeding.
- Loading Dock – The loading dock project was completed in one day and included removing the old dock and installing the new equipment with electric and hydraulics.
- The 3rd floor patient rooms/restrooms on the north side of the facility received facility upgrades and are completed. Maintenance staff patched, primed and painted walls in each patient room. Protective panels were installed on high impact areas like corners and fan coil units to prevent future wear. Damaged counter tops were replaced to enhance the patient rooms.
- Both boilers underwent extensive repairs that included replacing the four main shut off valves, gas valve, and blow down devices. In addition, the south boiler refractory was replaced and repairs to the door were required due to deterioration. All the work is now completed and the boilers are fully functional.
- New resin will be installed within the two main water softeners located in the boiler. Concerns with water spotting with Dietary and Central Sterile were raised. The work will take place June 21, 2021 and will be back online by the end of business.

- New card readers will be installed to the main elevator (Elevator #8) in the main SNF lobby. Once the work is completed, a WCCHS access card will be required to open the elevator on any floor. The purchase orders for this work are submitted and the work is currently being scheduled.
- Three rooms at Thomson Hall are undergoing alterations to accommodate the relocation of Medical Records staff. Work includes installing walls, running new data, phone, and electric lines to each location to meet their needs.
- Maintenance staff completed 549 work orders over the last 30 days at a completion rate of 22.88 work orders per day. A total of 441 man-hours were logged for the specified time period.

### **INFORMATION TECHNOLOGY DIRECTOR REPORT**

Bill Sikes submitted the following report:

- Kronos cut-over is scheduled for June 30, 2021.
- Firmware updates are being done on all the switching equipment by July 1, 2021 to avoid a security certificate lapse.
- Cyber Security renewal insurance is still a work in progress.

### **MEDICAL DIRECTOR REPORT**

Mandip Panesar, MD reported on the following items:

- All inpatient records for the month of May 2021 are complete. There are zero delinquent charts.
- Outpatient records are almost up-to-date. There is only one practitioner with open charts.
- This phase of Focused Professional Practice Evaluation (FPPE) and Ongoing Professional Practice Evaluation (OPPE) is 99% complete.

### **MEDICAL STAFF PRESIDENT REPORT**

No report.

### **CHIEF MEDICAL OFFICER OF ORTHOPAEDIC SERVICES REPORT**

No report.

### **CHIEF OPERATING OFFICER (COO) REPORT**

Mike Corcimiglia submitted the following report:

#### **Outpatient Clinical Services Division**

##### General

PracticeFirst Medical Management Solutions was brought on board as of June 1, 2021 to do family medicine clinic billing.

##### Rural Health Center Designation

Application for Rural Health Center status for Family Medicine-Perry office has been submitted.

##### Wyoming County Family Medicine - Attica

New office at 35 Main Street. Ribbon cutting took place on June 10, 2021.

##### Wyoming County Family Medicine - Perry

Onboarding of Dr. Salman Abbasey's practice to the Wyoming County Family Medicine - Perry office has started with a September 1, 2021 anticipated start date.

##### In-Patient Dialysis

Certificate of Need (CON) for Hospital Renal Dialysis addition to our operating certificate has been submitted to the NYSDOH, correspondence regarding the certificate has been occurring.

##### Laboratory Renovation-Transformation Grant \$3.1Million

Limited CON submitted to the NYSDOH has been approved. Currently, dry wall, painting, ceiling tiles and flooring is being installed. HVAC, electrical and plumbing is complete. Submitting all required minority women and business enterprise reports to the NYSDOH, working through the voucher submittal process. Project is on schedule, completion date is January 2022.

Workplace Health

Actively doing Fireman’s physicals for fire departments in Wyoming County.

Pharmacy

340B drug savings plan has started effective January 1, 2021. Continue to work with major retail pharmacies finalizing required interfaces between Hospital Electronic Medical Record (EMR) and Clinic EMR. In June 2021, received \$56,000 from Walgreens this includes money from January 2021 to May 2021 and is only from the Walgreens Pharmacy in Yorkshire, NY. Additional Walgreen’s and other pharmacies are in process to be added.

Radiology

Radiology suite Room #3 construction and installation of equipment is complete. Training of staff is underway The 2021 NYSDOH Rural Health Access grant is supporting this project.

Primary Care Steering Committee

The Primary Care Steering Committee meet on May 17, 2021. Guest provider, Dr. Dean Brewer, provided information on reproductive health. Dr. Brewer is doing vasectomies, IUD and conceptive implants at the Arcade office. Update was provided on provider and office dashboards and strategy for Article 28 clinic designation, Rural Health Center designation and Patient Centered Medical Home designation.

Hospital Foundation

The 31<sup>st</sup> annual golf tournament will be held on June 24, 2021 at the Silver Lake Country Club. We have 129 golfers signed up.

**WCCHS-21-040 PREAUTHORIZED ACCOUNTS AND ACCOUNTS PAYABLE**

Motion by President Kosmerl and seconded by Manager Perkins, the preauthorized accounts and accounts payable processed totaling \$4,228,643.24 be hereby approved as presented.

The motion was passed upon the following vote:

<b>VOTE</b>								
Salman Abbasey, MD	X	Yes		No		Abstain		Absent
Doug Berwanger		Yes		No		Abstain	X	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		Yes		No		Abstain	X	Absent
Larry Rogers	X	Yes		No		Abstain		Absent
James Wawrzyniak, DC	X	Yes		No		Abstain		Absent
<b>VOTE TOTAL:</b>	9	Yes		No		Abstain	2	Absent
<b>RESULTS</b>	<b>X</b>	<b>PASS</b>				<b>FAIL</b>		



**WCCHS-21-041 APPROVE WRITE-OFFS, DENIED CLAIMS, AND BAD DEBT**

Motion by Manager Wawrzyniak and seconded by Manager Abbasey, the write-offs/denied claims/bad debt totaling \$313,413.27 be hereby approved as presented.

The motion was passed upon the following vote:

<b>VOTE</b>								
Salman Abbasey, MD	X	Yes		No		Abstain		Absent
Doug Berwanger		Yes		No		Abstain	X	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		Yes		No		Abstain	X	Absent
Larry Rogers	X	Yes		No		Abstain		Absent
James Wawrzyniak, DC	X	Yes		No		Abstain		Absent
<b>VOTE TOTAL:</b>	9	Yes		No		Abstain	2	Absent
<b>RESULTS</b>	<b>X</b>	<b>PASS</b>				<b>FAIL</b>		

**WCCHS-21-042 APPROVE PERSONNEL REQUISITIONS IN PROCESS AND PROPOSED PERSONNEL CHANGES/FINANCIAL IMPACT**

Motion by Manager Merrill and seconded by Manager Wawrzyniak, 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)											
June 22, 2021											
Proposed Positions for Approval											
Senior Manager	Title/Department	FTE	Schedule	Vacating Employee	Hourly Rate	Annual Salary	Benefits	Proposed Hourly	Proposed Annual	Benefits	
<b>James:</b>	Medical Receptionist/12.707	1.00	WCCH	Sarah Buczek 06/11/2021	\$15.56	\$30,342	\$13,997	\$14.87	\$28,997	\$13,376	
<b>Corcimiglia:</b>	Dialysis RN/03.892	1.00	WCCH	Rachael Clark 06/09/2021	\$37.50	\$73,125	\$33,733	\$36.00	\$70,200	\$32,383	
	LPN (Clinic)/04.581.147	1.00	X	Tiffany Koson 06/18/2021	\$20.34	\$42,307	\$19,516	\$20.34	\$42,307	\$19,516	
	LPN (Clinic)/04.168.147	1.00	X	Kristen Merriam 04/28/2021	\$20.34	\$42,307	\$19,516	\$20.34	\$42,307	\$19,516	
	Cleaner Per Diem/08.803	0.00	WCCH	James Donnelly 06/03/2021	\$13.46	\$2,625	\$201	\$13.46	\$2,625	\$201	
	Student Aide/09.105	0.40	Student	Savannah Helm 05/29/2021	\$11.95	\$9,321	\$713	\$11.80	\$9,204	\$704	
	Student Aide/09.113	0.40	Student	Amy Buttles 06/30/2021	\$11.80	\$9,204	\$704	\$11.80	\$9,204	\$704	
	Student Aide/09.115	0.40	Student	Max Bryon 06/24/2021	\$11.95	\$9,321	\$713	\$11.80	\$9,204	\$704	
<b>Givens:</b>	Mental Health Therapy Aide Per Diem/05.771	0.00	WCCH	Mark Lanni 06/02/2021	\$24.51	\$4,779	\$366	\$21.74	\$4,239	\$324	
<b>Almeter:</b>	Screener/12.910	0.60	WCCH	Julie Newville 06/26/2021	\$15.45	\$18,077	\$5,004	\$12.24	\$14,321	\$3,964	
	RPN/03.207	1.00	WCCH	Brandon Richards 07/03/2021	\$33.05	\$64,448	\$29,730	\$23.52	\$45,864	\$21,157	
	RPN/03.656	1.00	WCCH	Keira Stehlar 06/20/2021	\$31.96	\$62,322	\$28,749	\$23.52	\$45,864	\$21,157	

PROPOSED PERSONNEL CHANGES/FINANCIAL IMPACT				
June 22, 2021				
POSITION	ANNUAL SALARY PROPOSED	BENEFIT PACKAGE	BUDGETED SALARY	BUDGETED BENEFITS
<b>Sr. Manager - C. Almeter</b>				
<b>Delete 1</b> - 1.00 FTE Emergency Patient Care Technician/05.503 Schedule WCCH, Grade 3 \$16.05/Hr. Effective date: June 26, 2021	\$0	\$0	\$31,298	\$14,438
<b>Delete 1</b> - 0.60 FTE RPN/03.216 Schedule WCCH, Grade 15A \$32.41/Hr. Effective date: June 26, 2021	\$0	\$0	\$37,920	\$10,496
<b>Delete 1</b> - 0.00 FTE Emergency Department Express Nurse Per Diem/04.575 Schedule WCCH, Grade 12A \$23.91/Hr. Effective date: June 26, 2021	\$0	\$0	\$4,662	\$357
<b>Sr. Manager - D. James</b>				
<b>Create 3</b> - 1.00 FTE Unit Helper Schedule WCCH, Grade 1A \$12.50/Hr. Available date: June 27, 2021	\$73,125	\$33,733	\$0	\$0
<b>Sr. Manager - M. Corcimiglia</b>				
<b>Create 1</b> - 0.00 FTE Student Aide Per Diem Student \$11.80/Hr. Available date: June 27, 2021	\$2,301	\$176	\$0	\$0
<b>TOTALS</b>	<b>\$75,426</b>	<b>\$33,909</b>	<b>\$73,880</b>	<b>\$25,290</b>
<b>TOTAL ANNUAL INCREASE:</b>				<b>\$10,165</b>

The motion was passed upon the following vote:

VOTE								
Salman Abbasey, MD	X	Yes		No		Abstain		Absent
Doug Berwanger		Yes		No		Abstain	X	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		Yes		No		Abstain	X	Absent
Larry Rogers	X	Yes		No		Abstain		Absent
James Wawrzyniak, DC	X	Yes		No		Abstain		Absent
<b>VOTE TOTAL:</b>	9	Yes		No		Abstain	2	Absent
<b>RESULTS</b>	<b>X</b>	<b>PASS</b>				<b>FAIL</b>		

**WCCHS-21-043 APPROVE CONTRACTS AND/OR GRANTS**

Motion by Manager Perkins and seconded by Manager Abbasey, 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:

1. **NEXERA, LLC**, 13034 Ballantyne Corporate Place, Charlotte, NC 28277, services agreement for inventory management for perioperative and procedural services operations, \$32,300 including travel, effective 07/05/2021 – 07/04/2022.

2. **WESTERN NEW YORK MRI, LLP**, 180 Park Club Lane, Suite 150, Williamsville, NY 14221, a professional services agreement for a physician with expertise in Radiology services to perform a peer review of selected radiology procedure documents and report results, not to exceed \$2,500, effective 06/03/2021 – 05/31/2022.
3. **EVIDENT, LLC**, 6600 Wall Street, Mobile, AL 36695, an amendment to the contract to add license for OrderWise CDS Appropriate Use Criteria through electronic clinical decision support for advanced diagnostic imaging exams, \$5,000 per year plus \$0.80 per transaction, effective 06/04/2021 – 06/04/2022.
4. **EVIDENT, LLC**, 6600 Wall Street, Mobile, AL 36695, an amendment to the contract to add Surescripts Medication History Reconciliation interface to check medication history of a patient against the national database for reduced risk of patient safety and improved workflow for clinical staff, \$7,000 per year plus \$500 implementation fee, effective 07/01/2021 – 06/30/2022.
5. **TERRACON CONSULTANTS – NY, INC.**, 461 Tonawanda Street, Buffalo, NY 14206, agreement for material testing services, structural inspection of the recently fabricated platform that will support the new lab roof top unit, not to exceed \$1,700, effective 06/06/2021 – 08/30/2021.
6. **HEALTH RESEARCH, INC.**, Riverview Center, 150 Broadway, Suite 560, Menands, NY 12204, a 1-year extension for the hospital preparedness program agreement, minimum award amount of \$40,000 reimbursable grant, effective 07/01/2021 – 06/30/2022 [Contract #1998-17]. [Grant application and acceptance award.]
7. **AUCTIONS INTERNATIONAL, INC.**, 1167 Big Tree Road, East Aurora, NY 14052, an online auction contract for sale of government assets by online auction, cost is based on the addition of a Purchaser’s fee to the sale price ranging from 4% to 10% based on the age and type of equipment sold, effective 06/01/2021 – 06/01/2023.
8. **MAGIC SEAL, LLC**, 2117 Buffalo Road PMB 281, Rochester, NY 14624, a contract to seal, crack fill, and mill parking lots #1, #2, and Thomson Hall and other associated areas as identified on the map, NYS contract PC69066, \$20,300 (base bid) plus \$5,000 (contingency) for a total amount not to exceed of \$25,300, effective 07/12/2021 – 09/15/2021.
9. **HOLOGIC, LLC**, 250 Campus Drive, Marlborough, MA 01752, a utilization agreement for supplies and equipment including endometrial ablation devices, hysteroscopic tissue removal devices and fluid management devices, not to exceed \$300,000 per the 3-year term, effective 07/01/2021 – 06/30/2024, pending approval by the Wyoming County Board of Supervisors.

The motion was passed upon the following vote:

<b>VOTE</b>								
Salman Abbasey, MD	X	Yes		No		Abstain		Absent
Doug Berwanger		Yes		No		Abstain	X	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		Yes		No		Abstain	X	Absent
Larry Rogers	X	Yes		No		Abstain		Absent
James Wawrzyniak, DC	X	Yes		No		Abstain		Absent
<b>VOTE TOTAL:</b>	9	Yes		No		Abstain	2	Absent
<b>RESULTS</b>	<b>X</b>	<b>PASS</b>				<b>FAIL</b>		

**WCCHS-21-044 PERMISSION TO DECLARE ITEMS AS SURPLUS**

Motion by Manager Rogers and seconded by Manager Paolucci, the list of items as presented and attached hereby approved as excess equipment and declared as surplus. In addition, the CEO is authorized to accept the highest offer to purchase, transfer to other Wyoming County departments, transfer to other facilities, or to dispose, as appropriate.

The motion was passed upon the following vote:

<b>VOTE</b>								
Salman Abbasey, MD	X	Yes		No		Abstain		Absent
Doug Berwanger		Yes		No		Abstain	X	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		Yes		No		Abstain	X	Absent
Larry Rogers	X	Yes		No		Abstain		Absent
James Wawrzyniak, DC	X	Yes		No		Abstain		Absent
<b>VOTE TOTAL:</b>	9	Yes		No		Abstain	2	Absent
<b>RESULTS</b>	<b>X</b>	<b>PASS</b>				<b>FAIL</b>		

**WCCHS-21-045 APPROVE MEMORANDUM OF UNDERSTANDING (MOU) WITH CSEA SUPERVISORY UNIT**

Motion by Manager Elbow and seconded by Manager Paolucci, the memorandum of understanding between the County of Wyoming and the Civil Service Employees Association, Local 1000, AFSCME, AFL-CIO Wyoming County Local 9250-01 Supervisory Unit related to critical staffing in skilled nursing facility May 2021 be hereby approved as presented and attached, pending approval by the Wyoming County Board of Supervisors.

The motion was passed upon the following vote:

<b>VOTE</b>								
Salman Abbasey, MD	X	Yes		No		Abstain		Absent
Doug Berwanger		Yes		No		Abstain	X	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		Yes		No		Abstain	X	Absent
Larry Rogers	X	Yes		No		Abstain		Absent
James Wawrzyniak, DC	X	Yes		No		Abstain		Absent
<b>VOTE TOTAL:</b>	9	Yes		No		Abstain	2	Absent
<b>RESULTS</b>	<b>X</b>	<b>PASS</b>				<b>FAIL</b>		

**BOARD ASSIGNED PROJECTS REPORT**

Don Eichenauer provided a status on various marketing items. Don also reported that a marketing meeting was held with Joe McTernan and staff to review recent marketing initiatives and projects that remain open, reviewed what types of marketing works and what doesn't work, and discussed the transition to the WCCHS team. President Kosmerl reminded attendees that Don's contract expires as of June 30, 2021 and thanked Don for his services to WCCHS and for helping with the transition.

**BOARD PRESIDENT REPORT**

President Kosmerl reported on the following items:

- Memento plaques are in process for Dr. Ahmed Bayoumi, MD and Frank Vitagliano in recognition for their long standing membership on the Hospital BOM. Dr. Bayoumi and Frank will be invited to a future meeting.

- Resuming in-person BOM meetings was discussed. Manager Wawrzyniak expressed his support for resuming in-person meetings. Manager Paolucci commented on vaccination and positivity rates in Wyoming County. She also commented that the meeting room should be large enough to ensure sufficient distancing between individuals. Manager Abbasey expressed his opinion that all individuals attending in-person meetings should be vaccinated. Chairwoman Ryan commented that the Board of Supervisors are resuming in-person meetings along with utilizing Zoom for outside participation. Board members agreed to resume in-person meetings and agreed to hold the July 27, 2021 regular BOM meeting at the Wyoming County Department of Social Services conference room.

## **BOARD COMMITTEE CHAIR REPORTS**

### **Acute Quality Committee**

Manager Paolucci reported that there was no Acute Quality Committee meeting in June 2021. The next meeting is scheduled for August 18, 2021.

### **SNF Quality Committee**

Manager Elbow reported that the SNF Quality Committee met on May 19, 2021, referred to the draft minutes and reported on the following items:

- Point Click Care laboratory and radiology interface went live in May 2021.
- It has been 29 months since the last NYSDOH health inspection/survey.
- Staffing remains significantly challenged.
- Performance Improvement projects
  - Pressure Ulcers - There has been an increase due to several residents having pressure ulcers upon admission. Continue with education, weekly meetings, frequent skin rounds, and encouraging CNA involvement sooner than later.
- Activities Department has been very busy with many functions including Nursing Home Week and Mother's Day.
- Visitation reopened.
- A 4-hour mandatory education day was held for staff.
- NYSDOH approved utilizing January 2020 case mix for reimbursement versus July 2020 case mix – saving a potential \$200,000 loss.

### **Finance/Personnel Committee**

No report.

### **Plant and Equipment Committee**

Bryan Kehl reported that the Plant and Equipment Committee met on June 8, 2021, referred to the draft minutes, and reported that the Director of Plant Operations has developed a 5-year facility plan. The next meeting is scheduled for July 13, 2021.

### **Communications Committee**

No report.

### **Information Technology**

No report.

### **Governance Committee**

No report.

### **Compensation Committee**

No report.

### **Credentials Committee**

President Kosmerl reported that the Credentials Committee met on June 16, 2021 and medical staff appointments were approved as part of the consent agenda.

**CHIEF EXECUTIVE OFFICER (CEO) REPORT**

Joe McTernan submitted the following report:

**COVID**

- COVID-19 Hospital and SNF case rates at very low levels. Operational response has been absorbed into our normal operations. Demand for vaccines has been low.

**Financials**

- Still no distribution plan for relief package from Washington, potential of \$35 billion for healthcare including \$7 billion in Rural Hospital Relief.
- Additional funding identified in most recent stimulus bill for rural healthcare. Still no distribution plan.
- Budget challenges continue with lost revenue and increased COVID-19 expenses. Additional cost reduction steps are being reviewed.

**Non-COVID related information**

- Dialysis – remains awaiting NYSDOH approve. Inpatient CON has been submitted.
- Attica clinic has opened in newly renovated space, ribbon cutting June 10, 2021.
- Background work for strategic plan completed. Kick-off for strategic planning group anticipated to be July 2021.

**NYS Legislative Session**

- **Telehealth reform:** Several telehealth-related measures were enacted as part of the state fiscal year 2021-2022 state budget, including provisions to remove all originating site restrictions, expand distant site eligibility and authorize peer support services to be delivered via telehealth.
- **Hospital clinical staffing committees:** Compromise on hospital clinical staffing committee legislation (S.1168-A/A.108-B).
- **Single payer:** Despite significant pressure from many advocates and numerous members of the majority conferences in the Assembly and the Senate, neither house passed the New York Health Act (A.6058/S.5475), which would create a single payer health system.
- **Medical liability costs:** The legislature passed two medical liability bills in lieu of advancing the wrongful death liability legislation. This includes a bill that would relax the common law exclusion of hearsay statements made by an employee (A.8040/S.7093) and legislation that would require defendants to provide proof of the existence and contents of any insurance agreement through which a judgment could be satisfied within 60 days after serving an answer (A.8041/S.7052).
- **Nursing home staffing standards:** Legislation (A.7119/S.6346) establishing minimum staffing standards in nursing homes passed both houses and was delivered to the governor.
- **Certificate of Need:** The legislature passed a bill (A.191-A/S.1451-A) that would require hospital CON applicants to submit a health equity impact assessment of a CON project along with their application.

**EXECUTIVE SESSION**

Motion by President Kosmerl and seconded by Manager Kehl, for the Board to enter into executive session to discuss the following topic(s) at 6:05pm. Joe McTernan, Amy Chase, Mike Corcimiglia, Mandip Panesar, MD, Pam Pettnot, Dan Farberman, Becky Ryan, and Jerry Davis remained. All other attendees ended their Zoom session or left the meeting room.

- Contract negotiations:
  - Buffalo Bone and Joint Surgery, PLLC
  - General Physician, PC
  - University at Buffalo Surgeons, Inc.
- Results of the Joint Commission investigation/request related to Event #4957 involving a particular individual and medically privileged information.

The motion was passed upon the following vote:

<b>VOTE</b>								
Salman Abbasey, MD	X	Yes		No		Abstain		Absent
Doug Berwanger		Yes		No		Abstain	X	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		Yes		No		Abstain	X	Absent
Larry Rogers	X	Yes		No		Abstain		Absent
James Wawrzyniak, DC	X	Yes		No		Abstain		Absent
<b>VOTE TOTAL:</b>								
	9	Yes		No		Abstain	2	Absent
<b>RESULTS</b>								
	<b>X</b>	<b>PASS</b>				<b>FAIL</b>		

Motion by Manager Wawrzyniak and seconded by Manager Paolucci, the Board exit executive session at 6:15pm.

The motion was passed upon the following vote:

<b>VOTE</b>								
Salman Abbasey, MD	X	Yes		No		Abstain		Absent
Doug Berwanger		Yes		No		Abstain	X	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		Yes		No		Abstain	X	Absent
Larry Rogers	X	Yes		No		Abstain		Absent
James Wawrzyniak, DC	X	Yes		No		Abstain		Absent
<b>VOTE TOTAL:</b>								
	9	Yes		No		Abstain	2	Absent
<b>RESULTS</b>								
	<b>X</b>	<b>PASS</b>				<b>FAIL</b>		

**EXECUTIVE SESSION DISCUSSIONS**

President Kosmerl declared that no motions or votes were enacted on during the executive session.

**NEXT REGULAR MEETING**

The next regular meeting is scheduled for Tuesday, July 27, 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 6:17pm upon motion by Manager Wawrzyniak.

\_\_\_\_\_  
J. Thomas Reagan, MD, BOM Secretary      Date

\_\_\_\_\_  
Pam Pettnot, Recording Secretary      Date

RUN DATE 06/09/21  
TIME 13:25

WYOMING COUNTY COMMUNITY HLTH  
FIXED ASSETS

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FALIST

CUR REMOVALS FROM 06/01/21 THRU 06/30/21 ASSET GL# SEQUENCE

TAG NUMBER	ASSET NUMBER	LOCA.	DESCRIPTION----	SERIAL NUMBER-----	ACQUIRED MET DATE	PURCHASE VALUE	SALVAGE VALUE	LIFE	DEPREC.	FISCAL DEPREC.	ACCUM DEPR.
000676	11125100	750	TRUCK SUPPLY		S01/01/84	408.00	.00	Y 10	.00		408.00
			ABOVE ITEM REMOVED	06/30/21							
015932	11125100	795	900XT RECLINER	10CM018829	S03/31/10	780.70	.00	Y 5	.00		780.70
			ABOVE ITEM REMOVED	06/30/21							
016090	11125100	302	COMPUTER		S09/14/10	1096.00	.00	Y 5	.00		1096.00
			ABOVE ITEM REMOVED	06/30/21							
016216	11125100	795	TOSHIBA COMPUTE	YAL42123Q	S06/30/11	1659.94	.00	Y 3	.00		1659.94
			ABOVE ITEM REMOVED	06/30/21							
017999	11125100	042	AIRVO 2 & ACCES	170814055210	S12/31/17	3678.43	.00	Y 8	38.32	229.92	1839.34
			ABOVE ITEM REMOVED	06/30/21							
043879	11125100	032	GE PORTABLE XRAY UNIT		S11/13/89	1312.00	.00	Y 8	.00		1312.00
			ABOVE ITEM REMOVED	06/30/21							
044240	11125100	845	2-DRAWER FILE CABINET		S10/14/91	115.90	.00	Y 15	.00		115.90
			ABOVE ITEM REMOVED	06/30/21							
044546	11125100		STORAGE CABINET		S12/23/92	104.00	.00	Y 15	.00		104.00
			ABOVE ITEM REMOVED	06/30/21							
046035	11125100	404	HYPER-HYPOTHERMIA UNIT		S10/13/93	4623.00	.00	Y 10	.00		4623.00
			ABOVE ITEM REMOVED	06/30/21							
047796	11125100	373	5 DRAWER FILE CABINET		S05/05/94	219.00	.00	Y 15	.00		219.00
			ABOVE ITEM REMOVED	06/30/21							
077411	11125100	042	OXIMETER	21320250	S01/14/97	2160.00	.00	Y 10	.00		2160.00
			ABOVE ITEM REMOVED	06/30/21							
078346	11125100	362	LAERDAL COMPACT	PL1000046	S12/03/01	495.00	.00	Y 10	.00		495.00
			ABOVE ITEM REMOVED	06/30/21							
078350	11125100	364	LAERDOL COMPACT	PL1001305	S12/10/01	495.00	.00	Y 10	.00		495.00
			ABOVE ITEM REMOVED	06/30/21							
078372	11125100	351	RESUSCITAIRE RA	TS00920	S01/07/02	7796.25	.00	Y 10	.00		7796.25
			ABOVE ITEM REMOVED	06/30/21							
079568	11125100	021	CORE2DUO WORKST	278759507	S07/24/08	1554.00	.00	Y 5	.00		1554.00
			ABOVE ITEM REMOVED	06/30/21							
079815	11125100	393	CORE 2 WORKSTAT	H2DC76KHRG	S03/30/09	1218.00	.00	Y 5	.00		1218.00
			ABOVE ITEM REMOVED	06/30/21							
079834	11125100	394	CORE 2 WORKSTAT	CETG93HKJ8	S03/31/09	1218.00	.00	Y 5	.00		1218.00
			ABOVE ITEM REMOVED	06/30/21							
080008	11125100	032	32" PHILIPS LCD	927217621	S09/25/09	398.00	.00	Y 5	.00		398.00
			ABOVE ITEM REMOVED	06/30/21							
			#ITEMS=		18	29331.22	.00		38.32	229.92	27492.13
			BEGINNING BALANCE	#ITEMS=	18	29331.22	.00		38.32	229.92	27492.13
			ASSETS ACQUIRED	#ITEMS=		.00	.00		.00	.00	.00
			ASSETS REMOVED	#ITEMS=	18	29331.22	.00		38.32	229.92	27492.13
			ENDING BALANCE	#ITEMS=		.00	.00		38.32	229.92	.00



RUN DATE 06/09/21  
TIME 13:25

WYOMING COUNTY COMMUNITY HLTH  
FIXED ASSETS

PAGE 2  
FALIST

CUR REMOVALS FROM 06/01/21 THRU 06/30/21 ASSET GL# SEQUENCE

TAG NUMBER	ASSET NUMBER	LOCA.	DESCRIPTION---SERIAL NUMBER-----	ACQUIRED MET DATE	PURCHASE VALUE	SALVAGE VALUE LIFE	DEPREC.	FISCAL DEPREC.	ACCUM DEPR.	
				#ITEMS=	18	29331.22	.00	38.32	229.92	27492.13
BEGINNING BALANCE				#ITEMS=	18	29331.22	.00	38.32	229.92	27492.13
ASSETS ACQUIRED				#ITEMS=		.00	.00	.00	.00	.00
ASSETS REMOVED				#ITEMS=	18	29331.22	.00	38.32	229.92	27492.13
ENDING BALANCE				#ITEMS=		.00	.00	38.32	229.92	.00

**MEMORANDUM OF UNDERSTANDING****Between the****COUNTY OF WYOMING****And the****CIVIL SERVICE EMPLOYEES ASSOCIATION, LOCAL 1000, AFSCME, AFL-CIO****WYOMING COUNTY LOCAL 9250-01****SUPERVISORY UNIT****Critical Staffing in Skilled Nursing Facility****May 2021**

WHEREAS, there is critical staffing shortfall within the Skilled Nursing Facility (SNF) of qualified Certified Nursing Assistants (CNA's), Licensed Practical Nurses (LPN's) and Registered Nurses (RN's) due to shortages in the labor market,

WHEREAS, Wyoming County and CSEA Supervisory Unit have reached this agreement to ensure the safety, well-being and high quality of care to all patients in the Skilled Nursing Facility,

THEREFORE, the parties agree to the following terms and modifications of the provisions of the Collective Bargaining Agreement with the Supervisory Unit and any prior Memorandums of Understanding between the parties in accordance with the provisions herein;

Any Clinical Coordinator (SNF) or Unit Coordinator (SNF) listed in Wage Schedule E, Grade 8, of the Supervisory Union who work additional shifts beyond their respective normal work schedule within the Nursing Facility will receive the current \$150.00 additional incentive for each four (4) hours worked beyond their regular schedule as is the current practice, and an additional payment for scheduled consecutive four (4) hours shifts worked as follows:

Qualifying Clinical Coordinator (SNF) or Unit Coordinator (SNF) employees shall be paid as follows:

- Seventy dollars (\$70.00) for four (4) hours per pay period
- One hundred and forty dollars (\$140.00) for eight (8) hours per pay period
- Two hundred and ten dollars (\$210.00) for twelve (12) hours per pay period.

***For Example:*** a Clinical Coordinator (SNF) or Unit Coordinator (SNF) who works eight additional hours beyond their normal schedule will be paid \$150.00 for each four hours (\$300.00) and an additional \$140.00 pursuant to this Memorandum of Understanding, for a total of \$440.00.

Employees covered under the provisions of this Memorandum of Understanding will be limited to a maximum of twelve (12) hours per week of these additional incentive shifts and will only be paid for shifts that are scheduled in addition to the employee's regularly scheduled shifts.

These incentive shifts will be offered on a first-come first-served basis to Supervisory bargaining unit employees classified as Clinical Coordinator (SNF) or Unit Coordinator (SNF) and will be created after the regular schedule has been completed. If in the event an employee commits to working an additional shift through the sign up procedure and fails to work the committed shift for whatever reason,

this employee will be responsible for finding someone to work the shift. If he/she DOES find someone to cover the shift, there is NO occurrence on the attendance record. If she/he DOES NOT find someone to cover the shift, then the attendance policy will apply.

This Memorandum of Understanding shall not create a precedent or waiver for any other matter and can only be modified or extended by written mutual agreement.

Unless modified by written mutual agreement this Memorandum of Understanding shall remain in effect, however, either party to this agreement shall have the right to exit from this agreement for any reason with 24 hour prior written notice to the other party and return to the prior practice.

\_\_\_\_\_  
For the CSEA

\_\_\_\_\_  
For Wyoming County

Date \_\_\_\_\_

\_\_\_\_\_  
Chair of The Board of Supervisors