

AGENDA
HEALTH AND MEDICAL SERVICES COMMITTEE
Monday, August 2nd 9:30 a.m.

Members: Jacobs, Emmel, Groat, Kolczynski, Bender

9:30 a.m. **Approve minutes from previous meeting**

9:30 a.m. **Nursing Home, Jeffrey Stalker**

Monthly Reports [NH8RPT1June 2021 Stat Report.pdf](#)
[NH8RPT2Personnel July.xls](#)

TRANSMITTAL:

- Authorization to contract for HVAC equipment maintenance
[NH8RES1Daikin Rev2.docx](#)
- Authorization to contract for Pharmacy Services
[NH8RES2PharmacyServices.doc](#)

9:40 a.m. **Mental Health, Jim Haitz**

Financials/Performance Report [MH Dept Payments & AR 2021 YTD June.xls](#)

TRANSMITTAL:

- Authorization to amend budget – Community Provider Contract Revisions
[MH8RES1 Community Providers 2021 Budget & Contract Amendments Rev1.doc](#)

9:50 a.m. **Public Health, Diane Devlin**

DISCUSSION:

- Opioid and Recreational Action Plan
- Activities Report
- Budget Highlights
- Manual Approvals: TB, Nursing Procedures and Infection Control
- Physician Accreditation
- ELC School Re-opening funding progress
- PH Corp Fellows

TRANSMITTALS:

- Authorization to sign contract with NYS Department of Health
[PH08RES01 EIP Administration contract 10.1.21 - 9.30.26.doc](#)
- Authorization to amend Board Resolution No. 214-16
[PH08RES02 Amending Res. No. 214-16 to extend Lead Contract.doc](#)
- Authorization to accept Child passenger Safety Grant Funds
[PH08RES03 Child Passenger Safety Award 10.1.21 - 9.30.22.doc](#)

Wayne County Nursing Home STATISTICAL DASHBOARD

		YTD 6/30/2021	Prior Year 2020
Revenue		\$ 8,676,760	\$ 19,028,257
Expenses	2021 Covid-19 Expenses =	\$ 10,147,845	\$ 20,052,693
	\$ 171,763		
Net Operating Margin		\$ (1,471,085)	\$ (1,024,436)
Other Income (IGT)		\$ 1,605,904	\$ 4,197,469
Other Income (Cares Act - Stimulus Funds & NYS)		\$ 23,081	\$ 1,235,683
Profit (Loss)		\$ 157,900	\$ 4,408,716
Budget Income (loss) Does include Retirement		\$ 753,348	\$ 753,348
Variance from Budget (Over) Under		\$ (595,448)	\$ 3,655,368
Net Operating Margin		-17.0%	-5.4%
Operating Margin with IGT		1.8%	23.2%
Cash Balance:			
Cash Balance as of 06/30/2021	(Money Mkt from T-Bills)	\$ 13,232,712	\$ 12,621,807
Days Cash on Hand		211	207
Investments = Short Term T-Bills		\$ 27,292,527	\$ 27,283,305
A/R <30 days		\$ 898,131	\$ 902,471
A/R 31 - 120 days		\$ 800,948	\$ 1,179,371
A/R >120 days		\$ 764,375	\$ 751,776
Average Daily Rate		\$ 276.05	\$ 261.62
Average PPS/PDPM Rate		\$ 510.77	\$ 510.86
Outpatient Services visits		0	-
Outpatient Services Gross Profit Margin	\$	- \$	\$ -
Meals/Catering income vs. projected income			
	Current	Budget	Prior Year
Jail	\$ 38,244.84	\$ 48,375.50	\$ 85,172.00
Café	\$ 2,225.00	\$ 27,916.67	\$ 23,427.00
	\$ 40,469.84	\$ 76,292.17	\$ 108,599.00

	Current	YTD Actual	Prior Year
Facility Occupancy Rate - % (Budget 97%)	95.24%	89.18%	93.18%
Number of Admissions	13	82	170
% Discharges Home - All	52.94%	32.41%	31.40%

% Hospitalized Since Admission (Short Stay)	n/a	n/a
Re-Hospitalization w/in 30 days of Admission	n/a	n/a
Long Term Occupancy	n/a	n/a

	2021	2020	2019
Total Number of Residents	186	190	183
Average CMI for Full House	1.067	1.05	1.02
Total Number of Medicaid Residents	139	143	144
Average CMI for Medicaid Residents	0.979	0.95	0.98

	2021	2020	2019
Medicare 5-Star Overall Rating	4	3	3
5-Star Health Inspections	3	3	3
5-Star Staffing Rating	2	2	2
5-Star Quality Measure Rating	5	4	4

Open Positions	72		
Nursing Openings	27		
Aide Openings	39		
Other Positions	6		
Employee Turnover 3 mo. (4/1/21 -6/30/21) = 18/166	11%	20.3%	20.5%
Employee 6 mo Retention (1/1/21 -6/30/21) = 14/16	88%		
Employee 2 yr Retention (7/1/19 - 6/30/21) = 34/52	65%		

RESOLUTION TRANSMITTAL

Committee No. 6

Date: August 2, 2021

Committee Chair: Susie Jacobs
Department Head: Jeffrey Stalker

Authorization to Contract with Daikin Applied for HVAC Equipment Maintenance at the Wayne County Nursing Home

WHEREAS, the Nursing Home requires routine inspections and preventative maintenance for its chiller, along with on-demand repairs and services when necessary; and

WHEREAS, only Daikin Applied Certified Technicians are factory trained and supported by Daikin to perform work on their equipment, making them a sole source provider of the required services to the existing Daikin/McQuay HVAC equipment at the Nursing Home; and

WHEREAS, the term of the contract is for a three (3) year period commencing August 1, 2021 and ending August 1, 2024 at a cost of \$5,798.00 for year 1; \$5,972.00 for year 2; and \$6,152.00 for year 3, plus labor at the specified hourly rates and parts for work above and beyond the scope of the maintenance agreement; and

WHEREAS, as part of the agreement, Daikin will include a 10% discount off street rates and Daikin materials; and

WHEREAS, the specified rates for additional work, not included in the routine maintenance, are as follows: 2021 Hourly Rate: \$148.50; 2021 Overtime Rate: \$222.75; 2021 Double Time Rate: \$297.00 (Sundays and Holidays); Mileage Rate: \$0.20/mile Truck Charge: \$50 per day; and

WHEREAS, future rates will be adjusted based on inflation percentages and/or union wage increases; now, therefore, be it

RESOLVED, that the Chairman of the Wayne County Board of Supervisors be authorized to sign the agreement with Daikin Applied for HVAC equipment, maintenance and service on behalf of the Wayne County Nursing Home effective August 1, 2021 to August 1, 2024, subject to the County Attorney's approval as to form and content.

Budgeted: yes no Proposed Cost: \$17,922 Reimbursed Amount _____ County cost \$17,922 _____

Departmental transfer \$ _____ from Account No. _____ to Account No. _____

County Administrator's Review: _____ Date: _____

Human Resources Office Review: yes no N/A Signature: _____

County Attorney Review: yes no N/A Signature: _____

Standing Committee: Ayes _____ Nays _____ Date: _____ Signature: _____

Signature/Date Rec'd: _____ Clerk, Board of Supervisors

Referred to:

Committee: _____ Ayes _____ Nays _____ Date: _____ Signature: _____

Committee: _____ Ayes _____ Nays _____ Date: _____ Signature: _____

RESOLUTION TRANSMITTAL

Committee No. 6
Date: 8/2/2021

Committee Chair: Susie Jacobs
Department Head: Jeffrey Stalker

Authorization for Wayne County Nursing Home to Extend Contract with Health Direct Pharmacy (Kinney Drugs) for Pharmacy Services

WHEREAS, the contract with Health Direct Pharmacy (Kinney Drugs) for the provision of pharmacy services expires on September 30, 2021; and

WHEREAS, New York State Office of General Services is awarding Health Direct Pharmacy (Kinney Drugs) a three (3) months extension through December 31, 2021; and

NOW BE IT RESOLVED, that the Chairman of the Wayne County Board of Supervisor be authorized and directed to extend the contract, on behalf of Wayne County Nursing Home, with Health Direct Pharmacy (Kinney Drugs) for pharmacy services for an additional a three (3) months through December 31, 2021, subject to the County Attorney’s approval as to form and content.

Budgeted: yes ___ no ___ Proposed Cost: _____ Reimbursed Amount _____ County cost _____

Departmental transfer \$ _____ from Account No. _____ to Account No. _____

County Administrator’s Review: _____ Date: _____

Human Resources Office Review: yes ___ no ___ N/A ___ Signature: _____

County Attorney Review: yes ___ no ___ N/A ___ Signature: _____

Standing Committee: Ayes _____ Nays _____ Date: _____ Signature: _____

Signature/Date Rec’d: _____ Clerk, Board of Supervisors

Referred to:
Committee: _____ Ayes _____ Nays _____ Date: _____ Signature: _____

Committee: _____ Ayes _____ Nays _____ Date: _____ Signature: _____

2021	Payments	AR	TOTAL REV	Monthly Billed Rev
1/1-1/31	\$ 346,104.54	\$ 174,127.35	\$ 520,231.89	\$ 520,231.89
1/1-2/29	\$ 909,698.45	\$ 188,939.91	\$ 1,098,638.36	\$ 578,406.47
1/1-3/31	\$ 1,460,396.60	\$ 286,302.09	\$ 1,746,698.69	\$ 648,060.33
1/1-4/30	\$ 1,983,979.25	\$ 366,392.52	\$ 2,350,371.77	\$ 603,673.08
1/1-5/31	\$ 2,553,646.79	\$ 374,320.43	\$ 2,927,967.22	\$ 577,595.45
1/1-6/30	\$ 3,190,986.03	\$ 384,577.41	\$ 3,575,563.44	\$ 647,596.22
1/1-7/31			\$ -	
1/1-8/31			\$ -	
1/1-9/30			\$ -	
1/1-10/31			\$ -	
1/1-11/30			\$ -	
1/1-12/31			\$ -	
	89.0%	11.0%	Total \$ 3,575,563.44	Billed Revenues

Financial Summary for Month 6				
	Budget Annual	Budgeted YTD	Actual YTD	Budget/Actual YTD
Billed Rev	\$ 6,889,040.00	\$ 3,444,520.00	\$ 3,575,563.44	\$ 131,043.44
Other Rev	\$ 2,081,684.00	\$ 1,040,842.00	\$ 1,405,857.60	\$ 365,015.60
Total Rev	\$ 8,970,724.00	\$ 4,485,362.00	\$ 4,981,421.04	\$ 496,059.04
Expense	\$ 8,970,810.00	\$ 4,485,405.00	\$ 3,764,790.94	\$ 720,614.06
Annualization Adjustment for B&G Maint.			\$ (150,584)	
Annualization Adjustment for IT			\$ (80,800)	
Annualization Adjustment for Retirement			\$ 319,745	
Total Exp	\$ 8,970,810.00	\$ 4,485,405.00	\$ 3,853,151.94	\$ 632,253.06
TOTAL	\$ (86.00)	\$ (43.00)	\$ 1,128,269.10	\$ 1,128,312.10

B&G Maint & Utilities
\$301,168
PAID FULL
\$25,097/month

IT
\$161,600
PAID FULL
\$13,467/month

Retirement
\$639,490
\$53,291/month

AR 0-30 Days	AR 31-60	AR 61-90	AR 91-120	AR 121 +
\$ 140,079	\$ 57,378	\$ 50,805	\$ 49,375	\$ 86,941

RESOLUTION TRANSMITTAL

Committee No. 6 Health & Medical

Date: August 2, 2021

Committee Chair: Mrs. Jacobs
Department Head: James Haitz

Authorization to Amend 2021 Budget for the Mental Health Department Community Providers Funding and Amend 2020 Provider Contracts

WHEREAS, the Mental Health Department Local Governmental Unit (LGU) is (or will be) in receipt of additional state aid funding awarded to community behavioral health providers, and which is primarily related to Cost of Living Adjustments (COLA), other state aid award adjustments and restorative funding, and/or state prior-year-end closeouts; and

WHEREAS the LGU now needs to make the following 2021 budget & contract amendments to reflect those additional funds due for payment to various community providers (there is no additional county costs or funds associated with this beyond what has already been authorized);

Provider Agency	Increased State Aid Amount 2021 Budget Year	Revised Total Contract Amount 2021 Budget Year
Finger Lakes Parent Network Aspire Hope	\$ 8,122	\$ 32,966
Unity House	\$ 27,368	\$ 116,825
Depaul	\$ 38,960	\$ 162,376
Lakeview Health	\$ 60,353	\$ 269,881
ABVI-Lifeline	\$ 7,622	\$ 27,238
Wayne County Action Program	\$ 17,082	\$ 61,322
Wayne County Aging & Youth Dept	\$ 12,969	\$ 46,106
FLACRA	\$ 226,236	\$ 1,322,268
Council on Alcoholism of the Finger Lakes	\$ 1,699	\$ 111,500
Delphi Rise	\$ 17,634	\$ 441,476
Catholic Family Center Hannick Hall	\$ 116,187	\$ 784,506

NOW THEREFORE, BE IT RESOLVED that the County Treasurer is authorized to make the following 2021 county budget amendments and the Chairman of the Board and the County Attorney are authorized to amend the 2021 contracts with the following providers as noted below to reflect the revised state aid additional funding adjustment increases:

A4322 Community Providers

Revenue:

- \$8,122 to 43607 Finger Lakes Parent Network Aspire Hope
- \$27,368 to 43485 Unity House
- \$38,960 to 43484 Depaul
- \$60,353 to 43614 Lakeview Health
- \$7,622 to 43504 ABVI-Lifeline
- \$17,082 to 43526 Wayne County Action Program
- \$12,969 to 43840 Wayne County Dept. Aging & Youth
- \$226,236 to 43499 Finger Lakes Area Counseling and Recovery Agency (FLACRA)
- \$1,699 to 43522 Council on Alcoholism
- \$17,634 to 43494 Delphi Rise
- \$116,187 to 43615 Catholic Family Center

Expense:

- \$8,122 to 54686 Finger Lakes Parent Network Aspire Hope
- \$27,368 to 54685 Unity House
- \$38,960 to 54684 Depaul
- \$60,353 to 54614 Lakeview Health
- \$7,622 to 54640 ABVI-Lifeline
- \$17,082 to 54697 Wayne County Action Program

\$12,969 to 54534 Wayne County Dept. Aging & Youth
\$226,236 to 54604 Finger Lakes Area Counseling and Recovery Agency (FLACRA)
\$1,699 to 54690 Council on Alcoholism
\$17,634 to 54607 Delphi Rise
\$116,187 to 54612 Catholic Family Center

Budgeted: yes ___ no X Proposed Cost: \$534,232 Reimbursed Amount: **\$534,232** County cost: none

Departmental transfer \$ _____ from Account No. _____ to Account No. _____

County Administrator's Review: _____ Date: _____

Human Resources Office Review: yes ___ no ___ N/A ___ Signature: _____

County Attorney Review: yes ___ no ___ N/A ___ Signature: _____

Standing Committee: Ayes _____ Nays _____ Date: _____ Signature: _____

Signature/Date Rec'd: _____ Clerk, Board of Supervisors

Referred to:

Committee: _____ Ayes _____ Nays _____ Date: _____ Signature: _____

Committee: _____ Ayes _____ Nays _____ Date: _____ Signature: _____

RESOLUTION TRANSMITTAL

Committee No. 6

Date: 8/2/21

Committee Chair: Susie Jacobs
Department Head: Diane M. Devlin

AUTHORIZATION TO SIGN A MULTI-YEAR CONTRACT WITH THE NYSDOH FOR THE ADMINISTRATION OF WAYNE COUNTY PUBLIC HEALTH'S EARLY INTERVENTION PROGRAM

WHEREAS, the mission of the statewide Early Intervention Program (EIP) is to identify and evaluate as early as possible those infants and toddlers whose healthy development is compromised and provide appropriate intervention to improve child and family development; and

WHEREAS, local governments are responsible for administering the EIP, subject to regulations of the Commissioner of Health, Subpart 69-4 of subchapter H of Chapter II of Title 10 (Health) of the Official Compilation of Codes, Rules and Regulations of the State of New York; and

WHEREAS, administrative funds are provided to municipalities to offset costs incurred in the implementation of the EIP; and

WHEREAS, Wayne County Public Health (WCPH) has been notified by the NYSDOH of the release of the next multi-year contract for the period of October 1, 2021 to September 30, 2026; and

WHEREAS, WCPH will receive a total amount of \$330,075 with annual funding of \$66,015; now, therefore, be it

RESOLVED, that the Chairman of the Board of Supervisors is hereby authorized to sign a multi-year contract, along with any future amendments, with the New York State Department of Health for the administration of the EIP by WCPH, for the period of October 1, 2021 to September 30, 2026, for an annual amount of \$66,015 with a total multi-year amount of \$330,075, subject to the County Attorney's approval as to form and content

Budgeted: yes no Proposed Cost: \$330,075 Reimbursed Amount \$330,075 County cost 0

Departmental transfer \$ _____ from Account No. _____ to Account No. _____

County Administrator's Review: _____ Date: _____

Human Resources Office Review: yes no N/A Signature: _____

County Attorney Review: yes no N/A Signature: _____

Standing Committee: Ayes _____ Nays _____ Date: _____ Signature: _____

Signature/Date Rec'd: _____ Clerk, Board of Supervisors

Referred to:

Committee: _____ Ayes _____ Nays _____ Date: _____ Signature: _____

Committee: _____ Ayes _____ Nays _____ Date: _____ Signature: _____

RESOLUTION TRANSMITTAL

Committee No. 6

Date: 8/2/21

Committee Chair: Susie Jacobs
Department Head: Diane M. Devlin

AUTHORIZATION TO AMEND RESOLUTION NO. 214-16 TO EXTEND CONTRACT WITH THE NEW YORK STATE DEPARTMENT OF HEALTH FOR THE LEAD POISONING PREVENTION PROGRAM

WHEREAS, Wayne County Public Health (WCPH) currently holds a contract with the New York State Department of Health (NYSDOH) to perform lead poisoning prevention education and surveillance activities; and

WHEREAS, Resolution No. 214-16 established a five (5) year contract for the period of October 1, 2015 to September 30, 2020 for an annual amount of \$37,489; and

WHEREAS, WCPH has recently received notification from the NYSDOH that this contract will be extended to September 30, 2021 for the same annual amount of \$37,489; now, therefore be it

RESOLVED, that the Chairman of the Board of Supervisors is hereby authorized to amend Resolution No. 214-16 and sign the NYSDOH Lead Poisoning Prevention Program contract amendment, via Grants Gateway, to extend the contract to September 30, 2021 for the same annual amount of \$37,489, subject to the approval of the County Attorney as to form and content.

Budgeted: yes no Proposed Cost: \$37,489 Reimbursed Amount \$37,489 County cost 0

Departmental transfer \$ _____ from Account No. _____ to Account No. _____

County Administrator's Review: _____ Date: _____

Human Resources Office Review: yes no N/A Signature: _____

County Attorney Review: yes no N/A Signature: _____

Standing Committee: Ayes _____ Nays _____ Date: _____ Signature: _____

Signature/Date Rec'd: _____ Clerk, Board of Supervisors

Referred to:

Committee: _____ Ayes _____ Nays _____ Date: _____ Signature: _____

Committee: _____ Ayes _____ Nays _____ Date: _____ Signature: _____

RESOLUTION TRANSMITTAL

Committee No. 6

Date: 8/2/21

Committee Chair: Susie Jacobs
Department Head: Diane M. Devlin

AUTHORIZATION TO ACCEPT THE GOVERNOR’S TRAFFIC SAFETY COMMITTEE CHILD PASSENGER SAFETY PROGRAM AWARD FOR WAYNE COUNTY PUBLIC HEALTH

WHEREAS, Wayne County Public Health (WCPH) currently receives funding from the Governor’s Traffic Safety Committee to participate in the statewide Child Passenger Safety Program; and

WHEREAS, the state’s Child Passenger Safety program requires all awardees to provide the following child car seat programing: be a permanent fitting station, to purchase car seats, hold car seat check events, and provide seat education and distribution to low income individuals who do not own or has an expired child car seat; and

WHEREAS, the Governor’s Traffic Safety Committee has selected WCPH to participate in the statewide Child Passenger Safety program, with an award amount of \$4,300 for the period of October 1, 2021 to September 30, 2022; and

WHEREAS, with awards lower than \$10,000, awardees will only receive an award letter and will not receive a contract to execute; and

WHEREAS, WCPH has already submitted the award of \$4,300 in the proposed 2022 WCPH budget, now, therefore be it

RESOLVED, that the Director of Public Health is hereby authorized to accept the Governor’s Traffic Safety Committee Child Passenger Safety program award of \$4,300 for the period of October 1, 2021 to September 30, 2022

Budgeted: yes no Proposed Cost: \$4,300 Reimbursed Amount \$4,300 County cost 0

Departmental transfer \$ _____ from Account No. _____ to Account No. _____

County Administrator’s Review: _____ Date: _____

Human Resources Office Review: yes no N/A Signature: _____

County Attorney Review: yes no N/A Signature: _____

Standing Committee: Ayes _____ Nays _____ Date: _____ Signature: _____

Signature/Date Rec’d: _____ Clerk, Board of Supervisors

Referred to:

Committee: _____ Ayes _____ Nays _____ Date: _____ Signature: _____

Committee: _____ Ayes _____ Nays _____ Date: _____ Signature: _____