

AGENDA
HEALTH AND MEDICAL SERVICES COMMITTEE
Monday, October 4th 10:00 a.m.

Members: Jacobs, Emmel, Groat, Kolczynski, Bender

10:00 a.m. **Approve minutes from previous meetings**

10:00 a.m. **Nursing Home, Jeffrey Stalker**

Monthly Reports [NH10RPT1StatAugust 2021.pdf](#)
[NH10RPT2PersonnelSept.xls](#)

TRANSMITTALS:

- Authorization to sign agreement with P&PN Computer Services
[NH10RES1PNP REV1.doc](#)
- Authorization to sign contract with Northeast Medical Repairs
[NH10RES2Accepting Bid for Oxygen REV1.doc](#)

10:10 a.m. **Mental Health, Jim Haitz**

Financials/Performance Report

10:20 a.m. **Public Health, Diane Devlin**

DISCUSSION:

Activities Report
Capstone Preceptor Request

TRANSMITTALS:

- Authorization to submit RFP for school testing coordinator [PH10RES1 SCHOOL TESTING COORDINATOR REV1.docx](#)

Wayne County Nursing Home STATISTICAL DASHBOARD

		YTD 8/31/2021	Prior Year 2020
Revenue		\$ 11,958,354	\$ 19,028,257
Expenses	2021 Covid-19 Expenses = \$ 197,883	\$ 13,060,062	\$ 20,052,693
Net Operating Margin		\$ (1,101,708)	\$ (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)		\$ 527,277	\$ 4,408,716
Budget Income (loss) Does include Retirement		\$ 753,348	\$ 753,348
Variance from Budget (Over) Under		\$ (226,071)	\$ 3,655,368
Net Operating Margin		-9.2%	-5.4%
Operating Margin with IGT		4.4%	23.2%
Cash Balance:			
Cash Balance as of 07/31/2021	(Money Mkt from T-Bills)	\$ 14,191,679	\$ 12,621,807
Days Cash on Hand		#DIV/0!	207
Investments = Short Term T-Bills		\$ 27,292,339	\$ 27,283,305
A/R <30 days		\$ 927,659	\$ 902,471
A/R 31 - 120 days		\$ 629,317	\$ 1,179,371
A/R >120 days		\$ 774,865	\$ 751,776
Average Daily Rate		\$ 267.30	\$ 261.62
Average PPS/PDPM Rate		\$ 532.22	\$ 510.86
Outpatient Services visits		0	-
Outpatient Services Gross Profit Margin	\$ -	\$ -	\$ -
Meals/Catering income vs. projected income			
	Current	Budget	Prior Year
Jail	\$ 94,697.84	\$ 64,500.67	\$ 85,172.00
Café	\$ 2,839.50	\$ 33,500.00	\$ 23,427.00
	\$ 97,537.34	\$ 98,000.67	\$ 108,599.00
Facility Occupancy Rate - % (Budget 97%)			
	Current	YTD Actual	Prior Year
	93.48%	90.26%	93.18%

Number of Admissions	9	105	170
% Discharges Home - All	10.53%	26.97%	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	70
Nursing Openings	27
Aide Openings	40
Other Positions	3

Employee Turnover 3 mo. (6/1/21 -8/31/21) = 13/172	8%	20.3%	20.5%
Employee 6 mo Retention (3/1/21 -8/31/21) = 12/18	67%		
Employee 2 yr Retention (9/1/19 - 8/31/21) = 30/49	61%		

RESOLUTION TRANSMITTAL

Committee No. 6

Date: 10/4/2021

Committee Chair: Susie Jacobs
Department Head: Jeffrey Stalker

Authorizing Annual Historical License and Agreement with P&NP Computer Services, Inc. and Wayne County Nursing Home

WHEREAS, P&NP Computer Services, Inc. is the provider of Wayne County Nursing Home's former billing software; and WHEREAS, the Wayne County Nursing Home by law is required to have access to, and to retain the clinical records contained within that billing software, for a period of at least six years from date of discharge or death, and therefore be it RESOLVED, that the Chairman of the Board of Supervisors is authorized to execute an agreement on behalf of the Wayne County Nursing Home, with P&NP Computer Services, Inc. for the Annual Historical License and Agreement effective July 1, 2021 to June 30, 2022 subject to the County Attorney's approval as to form and content.

Budgeted: yes ___ no ___ Proposed Cost: \$2038 Reimbursed Amount \$0 County cost \$2028

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: October 4, 2021

Committee Chair: Susie Jacobs
Department Head: Jeffrey Stalker

Authorizing Contract for Oxygen Supply Service at the Wayne County Nursing Home

WHEREAS, the contract with Northeast Medical Repairs, Inc. for the provision of oxygen services expires December 31, 2021; and

WHEREAS, the Clerk of the Board of Supervisors has duly advertised for bids for oxygen services for the Wayne County Nursing Home in accordance with the provisions of Section 103 of the General Municipal Law; and

WHEREAS, bids were opened on Thursday September 23, 2021 at 2 p.m. and the following bids were received:

1. Northeast Medical Repairs- Only Bid

RESOLVED, that the sole bid submitted by Northeast Medical Repairs in the amounts below is in accordance with specifications, is hereby accepted; and be it further

ITEMS		2022	2023	2024
<u>Item #1</u>	<u>5 Liter Oxygen Concentrator +/- 25 units</u>	\$19.00 a month	\$20.00 a month	\$20.00 a month
<u>Item #2</u>	<u>10 Liter Oxygen Concentrator</u>	\$125.00 a month	\$125.00 a month	\$130.00 a month
<u>Item #3</u>	<u>CPap unit</u>	\$100.00 a month	\$100.00 a month	\$100.00 a month
<u>Item #4</u>	<u>BiPap s unit</u>	\$185.00 a month	\$185.00 a month	\$200.00 a month
<u>Item #5</u>	<u>BiPap st unit</u>	\$265.00 a month	\$265.00 a month	\$285.00 a month
<u>Item #6</u>	<u>BiPap s Auto unit</u>	\$210.00 a month	\$210.00 a month	\$210.00 a month
<u>Item #7</u>	<u>Half Face Mask</u>	\$190.00	\$190.00	\$190.00
<u>Item #8</u>	<u>Full Face Mask</u>	\$190.00	\$190.00	\$190.00
<u>Item #9</u>	<u>Ambulatory Oxygen "E" w/built in regulator</u>	\$2.40 per fill	\$2.50 per fill	\$2.50 per fill
<u>Item #10</u>	<u>Grab and Go Oxygen Cylinders</u>	\$2.40 per fill	\$2.50 per fill	\$2.50 per fill
<u>Item #11</u>	<u>Cylinder Rental Charges</u>	\$0.00	\$0.00	\$0.00
<u>Item #12</u>	<u>Portable Oxygen Concentrator</u>	\$210.00 a month	\$210.00 a month	\$210.00 a month
<u>Item #13</u>	<u>Hazmat/Delivery Charges</u>	\$27.00 per visit	\$27.00 per visit	\$27.00 per visit

RESOLVED, the Chairman of the Board of Supervisors is authorized to execute a contract on behalf of the Wayne County Nursing Home, with Northeast Medical Repairs for the provision oxygen service for the period January 1, 2022 through December 31, 2024, 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: _____

RESOLUTION TRANSMITTAL

Committee No. 6

Date: 10/04/2021

Committee Chair: Susie Jacobs
Department Head: Diane Devlin

AUTHORIZATION TO AWARD SCHOOL TESTING COORDINATOR RFP AND CONTRACT WITH LANEY JOHNSON TO PERFORM SCHOOL COVID-19 TESTING COORDINATOR SERVICES

WHEREAS, Wayne County Public Health (WCPH) has received funding through the American Rescue Plan Act of 2021 under the Epidemiology and Laboratory Capacity (ELC) School reopening program, to support safe, in-person instruction in kindergarten through grade 12 (K-12) schools by supporting schools to detect and prevent the transmission of Coronavirus Disease 2019 (COVID-19); and

WHEREAS, WCPH has identified the need for additional help for coordinating this funding and to provide assistance to participating Wayne County school districts, as outlined in the approved work plan; and

WHEREAS, Resolution 403-21 authorized the release of a request for proposals for a school testing coordinator and additionally authorized a short-term contract for same said services while the RFP process was ongoing, which is set to expire October 31, 2021; and

WHEREAS, two proposals were received and the following hourly rates were proposed; and

Laney Johnson, Fairport, NY \$30/hr
AM, LLC, Leesburg, VA \$85.33/hr

WHEREAS, proposals were evaluated by WCPH staff based on selection criteria set forth in the RFP and it has been determined it is in the County's best interest to contract with Laney Johnson; now therefore be it

RESOLVED, the Chairman of the Wayne County Board of Supervisors is hereby authorized to execute a contract with Laney Johnson to perform School Testing Coordinator duties, in accordance with the RFP and the proposal received, for the period of November 1, 2021 to July 31, 2022, at a rate not to exceed \$30 per hour, subject to the approval of the County Attorney as to form and content; and be it further

RESOLVED, that the contract will have an option to renew for one (1) additional year, at the same terms and conditions, contingent on the potential need to continue testing coordination services in the 2022-2023 school year and available funding for such.

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: _____