

AGENDA

HEALTH AND MEDICAL SERVICES COMMITTEE

Monday, July 6th 10:00 a.m.

Members: Jacobs, Groat, Kolczynski, Bender and Leonard

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

10:00 a.m. **Mental Health, Jim Haitz**

Monthly Report [MH Dept Payments & AR 2020 YTD May.xls](#)

Discussion on Social Media Account [MH Dept Business Justification Social Media.pdf](#)

TRANSMITTALS:

- Authorization to sign contract with Molina Healthcare Inc. [MH07RES2 Molina Healthcare Contract.doc](#)
- Authorization to develop Social Media Account [MH07RES4 Auth for WBHN-DMH to Develop Social Media Platforms REV1.doc](#)
- Authorization to sign contract with Monroe Plan [MH07RES1 Monroe Plan Contract.doc](#)
- Authorization to have Employee Work from Home [MH07RES3 Auth for Employee to Work from Home.doc](#)

10:15 a.m. **Nursing Home, Denis Vinnik**

Monthly Report [NH7RPT01 Stat Report.pdf](#)

TRANSMITTALS:

- Authorization to sign a contract with Veterans Service Administration [NH7RES1Veterans Administration REV1.doc](#)
- Authorization to sign an agreement for Clinical Laboratory Services [NH7RES2Lab Services REV1.doc](#)
- Authorization to sign a contract with UltraMobile Imagine Inc. [NH7RES3UltraMobile REV1.doc](#)
- Authorization for the Wayne County Nursing Home to enter into an Agreement with SightRite Eye Care Services [NH7RES4Optometry Services REV1.doc](#) [NH 360Care - termination letter.pdf](#)

10:30 a.m. **Public Health, Diane Devlin**

MONTHLY REPORT

TRANSMITTALS:

- Authorization to sign a contract with the Lyons Central School District [PH07RES02 Lyons CSD Related Services 7.1.20 - 6.30.21.doc](#)
- Authorization to sign contract for services to the PreSchool Children with Handicapping Conditions [PH07RES01 Lyons CSD 4410 7.1.20 - 6.30.21.doc](#)
- Authorization to abolish and create positions [PH07RES03 Create and Abolish Position REV1.doc](#)

2020	Payments	AR	TOTAL RRV	Monthly Rev	Acct AR 6-30 Days	Acct AR 31-60	Acct AR 61-90	Acct AR 91-120	Acct AR 121+
1/1-1/31	\$ 69,137.14	\$ 419,223.63	\$ 488,360.77	\$ 488,360.77					
1/1-2/29	\$ 624,279.07	\$ 405,215.04	\$ 1,030,494.11	\$ 542,133.34					
1/1-3/31	\$ 859,104.98	\$ 415,966.75	\$ 1,275,071.73	\$ 244,577.62					
1/1-4/30	\$ 1,286,414.26	\$ 310,681.38	\$ 1,597,095.64	\$ 322,023.91					
1/1-5/31	\$ 1,714,244.53	\$ 487,832.31	\$ 2,202,076.84	\$ 604,981.20	\$ 161,587	\$ 64,041	\$ 80,614	\$ 98,542	\$ 83,048
1/1-6/30									
1/1-7/31									
1/1-8/31									
1/1-9/30									
1/1-10/31									
1/1-11/30									
1/1-12/31									
	78%	22%		Total \$ 2,202,076.84					
				Billed Revenues					

Financial Summary for Month 5				
	Budget Annual	Budgeted YTD	Adjusted Actual YTD	Budget/Actual YTD
Billed Rev	\$ 6,940,913.00	\$ 2,892,047.08	\$ 2,202,076.84	\$ (689,970.24)
Other Rev	\$ 2,669,251.00	\$ 1,112,187.92	\$ 1,744,793.75	\$ 632,605.83
Total Rev	\$ 9,610,164.00	\$ 4,004,235.00	\$ 3,946,870.59	\$ (57,364.41)
Expense	\$ 9,693,316.00	\$ 4,038,881.67	\$ 3,511,620.31	\$ 527,261.36
Annualization Adjustment for B&G Maint.			\$ (146,679)	
Annualization Adjustment for IT			\$ (94,267)	
Annualization Adjustment for Retirement			\$ 280,833	
Total Exp	\$ 9,693,316.00	\$ 4,038,881.67	\$ 3,551,507.38	\$ 487,374.27
TOTAL	\$ (83,152.00)	\$ (34,646.67)	\$ 395,363.20	\$ 430,009.88

B&G Maint & Utilities
\$251,450
PAID FULL
\$20,954/month

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

Retirement
\$673,999
\$56,167/month

RESOLUTION TRANSMITTAL

Committee No. 6 Health & Medical

Date: July 6, 2020

Committee Chair: Susie Jacobs
Department Head: James Haitz

Authorization to Establish Contract between Wayne Behavioral Health Network and Molina Healthcare, Inc.

WHEREAS, Wayne Behavioral Health Network (WBHN) and Molina Healthcare wish to establish a formal relationship and contractual agreement in order for WBHN to provide reimbursable behavioral health and related support services to persons covered by this health insurance plan; and

WHEREAS, Molina Healthcare requires WBHN to have a contract established with them in order to bill and receive payments from them for services WBHN provides as one of their network providers; now therefore be it

RESOLVED that the Chairman of the Board of Supervisors, pending approval of the County Attorney as to form and content, is authorized to sign a contractual agreement between Molina Healthcare & WBHN effective upon obtaining signatures of all required parties and Molina Healthcare's acceptance & approval of WBHN to their network panel and continuing through December 31, 2021.

Budgeted: yes ___ no ___ Proposed Cost: ___0___ Reimbursed Amount _____ 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 Health & Medical

Date: July 6, 2020

Committee Chair: Susie Jacobs
Department Head: James Haitz

AUTHORIZATION TO THE DEPARTMENT OF MENTAL HEALTH & WAYNE BEHAVIORAL HEALTH NETWORK TO DEVELOP SOCIAL MEDIA PLATFORMS

WHEREAS, Wayne County Department of Mental Health (WCDMH) & Wayne Behavioral Health Network (WBHN) would like to develop and maintain a Facebook Business Account, as well as a Twitter, YouTube and Instagram social media accounts in order to provide the following: release pertinent, educational and factual information on a weekly basis; convey agency and other behavioral health resources to WBHN clientele and to the public at large in Wayne County, to disseminate information about suicide prevention and early recognition screening information, to inform the public about available services and special events sponsored by the mental health department, WBHN, and our partner community based behavioral health organizations; and to convey press releases; etc.; and

WHEREAS, the WCDMH & WBHN desires to launch and expand their social media presence to these platforms including Instagram, Twitter, YouTube, and Facebook; and

WHEREAS, the Employee Handbook on Information Security’s policy on Acceptable Use of Social Media outlines the process for other Wayne County Departments to follow when creating social media accounts; and

WHEREAS, that the social media platforms to be used and security have been reviewed and approved by the County IT Director, who will also have access to and have the authority to shut down use of the social media site if determined to be appropriate; and

WHEREAS, all WCDMH & WBHN social media accounts will adhere to the Acceptable Use of Social Media Policy and be under the management and oversight of the Director of Mental Health; and

WHEREAS, the Director of Mental Health has submitted a social media Business Case Justification to the County Administrator and the County Attorney for approval to send on to the Health & Medical Committee as directed by the Acceptable Use of Social Media policy; and

WHEREAS, the Director of Mental Health has presented the Business Case Justification at the June 1, 2020 Public Safety Committee meeting; now, therefore be it

RESOLVED, that with the oversight of the County IT Director, the Director of Mental Health is hereby authorized to create a Wayne County Department of Mental Health & Wayne Behavioral Health Network accounts for Instagram, Twitter, YouTube, and Facebook to be used in compliance with the Wayne County Employee Handbook on Information Security Guidelines.

Budgeted: yes ___ no ___ Proposed Cost: _____ None ___ 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 Health & Medical

Date: July 6, 2020

Committee Chair: Susie Jacobs
Department Head: James Haitz

Authorization to Establish Contract between Wayne Behavioral Health Network and Monroe Plan for Medical Care, Inc.

WHEREAS, Wayne Behavioral Health Network (WBHN) and Monroe Plan for Medical Care, Inc. (a New York State not-for-profit corporation- Individual Practice Association-IPA), wish to establish a formal relationship and contractual agreement in order for WBHN to provide reimbursable behavioral health and related support services to persons covered by this health insurance plan; and

WHEREAS, Monroe Plan for Medical Care, Inc. (MPMC) requires WBHN to have a contract established with them in order to bill and receive payments from MPMC for services WBHN provides as one of their network providers; now therefore be it

RESOLVED that the Chairman of the Board of Supervisors, pending approval of the County Attorney as to form and content, is authorized to sign a contractual agreement between Monroe Plan for Medical Care, Inc. & WBHN effective upon obtaining signatures of all required parties and MPMC acceptance & approval of WBHN to their network panel and continuing through December 31, 2021.

Budgeted: yes ___ no ___ Proposed Cost: ___0___ Reimbursed Amount _____ 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 Health & Medical

Date: June 6, 2020

Committee Chair: Susie Jacobs
Department Head: James Haitz

Authorization for Essential & Critical Wayne Behavioral Health Network Employee Dr. Meera Kandlikar, M.D., to Work from Home Utilizing Psychiatric Telepractice Technology Modality

WHEREAS, in the normal course of business Wayne Behavioral Health Network (WBHN) is operating its clinic psychiatric medical services in part by utilizing a telepractice technology modality; and

WHEREAS, the need for such ongoing professional services is high and recently the laws and regulatory requirements now allow for certain medical professionals who are licensed to practice in New York State the ability to practice via telepractice from any location within the United States; and

WHEREAS, Dr. Kandlikar is a Child Psychiatrist who has been a long time County employee at WBHN and is an essential medical provider with an existing patient case load; and

WHEREAS, Dr. Kandlikar is presently unable to work inside the clinic due to circumstances & risks related to the COVID-19 situation, however she can fully carry out her duties remotely from her home utilizing the telepractice technology modality; and

WHEREAS, the Director of Mental Health has discussed this matter with the County Administrator who supports the Directors request to authorize Dr. Kandlikar to practice and provide psychiatric medical services to WBHN patients from her home via telepractice, and that the telepractice service will meet all NYS regulatory requirements and County IT Department requirements; now therefore be it

RESOLVED, that the Wayne County Board of Supervisors, in this special circumstance grants an exemption to Resolutions 239-20 & 240-20, and authorizes Dr. Meera Kandlikar, M.D., a County employee at Wayne Behavioral Health Network, permission to work from her home for the purpose of conducting official County business on behalf of WBHN, as determined appropriate and necessary by the Director of Mental Health; and be it further

RESOLVED, that the Information Technology Department is authorized to provide the required, secured computer and computer access & technology platform for the remote work to occur.

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: _____

Wayne County Nursing Home STATISTICAL DASHBOARD

	YTD 4/31/2020	Prior Year 2019
Revenue	\$ 9,237,463	\$ 20,681,146
Expenses	\$ 8,753,807	\$ 20,185,374
Net Operating Margin	\$ 483,656	\$ 495,772
Other Income (IGT)	\$ 2,591,565	\$ 5,868,752
Profit (Loss)	\$ 3,075,221	\$ 6,364,524
Budget Income (loss) Does include Retirement	\$ 753,348	\$ (214,012)
Variance from Budget (Over) Under	\$ 2,321,873	\$ 6,578,536
Net Operating Margin	5.2%	2.4%
Operating Margin with IGT	33.3%	30.8%

Fund Balance Cash		
Cash Balance as of 04/30/2020	\$ 4,044,544	\$ 6,598,550
Days Cash	66	110
Investments = Short Term T-Bills	\$ 34,499,925	\$ 29,607,183
A/R <30 days	\$ 1,289,039	\$ 929,966
A/R 31 - 120 days	\$ 1,890,711	\$ 1,860,189
A/R > 120 days	\$ 682,588	\$ 974,150

Average Daily Rate	\$ 284.55	\$ 274.62
Average PPS/PDPM Rate	\$ 483.42	\$ 471.93

Outpatient Services visits	0	-	-
Outpatient Services Gross Profit Margin	\$ -	\$ -	\$ -

	Current	Budget	Prior Year
Meals/Catering income vs. projected income			
Jail	\$ 22,321.84	\$ 53,989.67	\$ 149,917.00
Café	\$ 16,575.00	\$ 27,916.67	\$ 71,091.00
	\$ 38,896.84	\$ 81,906.33	\$ 221,008.00

	Current	YTD Actual	Prior Year
Facility Occupancy Rate - % (Budget 97%)	95.21%	95.25%	96.82%
Number of Admissions	10	75	216
% Discharges Home - All	41.12%	30.84%	46.25%

% 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

	Jan-19	Jan-18	Jan-17
Total Number of Residents	190	183	189
Average CMI for Full House	1.05	1.02	1.07
Total Number of Medicaid Residents	143	144	136
Average CMI for Medicaid Residents	0.95	0.98	1.01

Medicare 5-Star Overall Rating	2020	2019	2018
5-Star Health Inspections	3	3	2
5-Star Staffing Rating	2	2	3
5-Star Quality Measure Rating	4	4	5

Open Positions	44		
Nursing Openings	18		
Aide Openings	19		
Employee Turnover 3 mo. (4/1/19 -6/30/19) = 15/185	8.1%	20.3%	20.5%
Employee 6 mo Retention (1/1/19 -6/30/19) = 18/23	78%		
Employee 2 yr Retention (7/1/17 - 6/30/19) = 40/78	51%		

RESOLUTION TRANSMITTAL

Committee No. 6
Date: July 6, 2020

Committee Chair: Susie Jacobs
Department Head: Denis Vinnik

Authorization for Wayne County Nursing Home to enter into a contract with Veterans Service Administration

WHEREAS, the Veterans Service Administration contracts with the Wayne County Nursing Home for nursing home care services for beneficiaries of the Veterans Service Administration; and

WHEREAS, the current contract expires July 31, 2020; and

WHEREAS, the Wayne County Nursing Home Administrator would like to renew the contract for the period of August 1, 2020 – July 31, 2021 at no cost to the nursing home; now therefore be it

RESOLVED, that the Chairman of the Wayne County Board of Supervisors is authorized to execute a Contract/Award for the Wayne County Nursing Home to provide nursing home services to beneficiaries of the Veterans Administration at a per diem fee to be negotiated by the Administrator for the period August 1, 2020 to July 31, 2021, subject to the approval of the County Attorney as to form and content.

Budgeted: yes ___ no ___ Proposed Cost: ___ 0 ___ Reimbursed Amount _____ 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: July 6, 2020

Committee Chair: Susie Jacobs
Department Head: Denis Vinnik

Authorization for the Wayne County Nursing Home to enter into an Agreement for Clinical Laboratory Services

WHEREAS, the contract between the County of Wayne and Newark Wayne Community Hospital, an affiliate of Rochester Regional Health Systems, for the provision of laboratories services became effective January 1, 2016 and renewed automatically; and

WHEREAS, it is recommended that the contract's term be revised to comply with Wayne County Purchasing policy; and

WHEREAS, the Wayne County Nursing Home recommends to renew contract with Newark Wayne Community Hospital for the provision of laboratories services from July 1, 2020 through June 30, 2023, unless terminated earlier as stated in the contract; and

WHEREAS, the Nursing Home shall pay Contractor for clinical laboratory testing services performed for Nursing Home residents in accordance to the terms and conditions as set forth in the Medicare published fee schedule; now therefore be it

RESOLVED, the Chairman of the Board of Supervisors is authorized to execute the agreement with Newark Wayne Community Hospital, an affiliate of Rochester Regional Health Systems, for the provision of laboratories services from July 1, 2020 through June 30, 2023, unless terminated earlier as stated in the contract unless either party provides at least 60 day written notification to the other, subject to the approval of the County Attorney as to form and content.

Budgeted: yes ___ no ___ Proposed Cost: ___0___ Reimbursed Amount ___ 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: July 6, 2020

Committee Chair: Susie Jacobs
Department Head: Denis Vinnik

Authorizing a contract with UltraMobile Imaging, Inc. for mobile diagnostic services at the Wayne County Nursing Home

WHEREAS, the agreement with UltraMobile Imaging, Inc. to provide mobile diagnostic services at the Wayne County Nursing Home became effective April 1, 2015 and renewed automatically for additional one year terms; and

WHEREAS, it is recommended that the contract’s term be revised to comply with Wayne County Purchasing policy; and

WHEREAS, the Nursing Home shall pay the Contractor for medical services in accordance to the terms and conditions as set forth in the contract pursuant to the Medicare published fee schedule; and now therefore be it

RESOLVED, that the Chairman of the Wayne County Board of Supervisors is hereby authorized and directed to execute a contract with UltraMobile Imaging, Inc. for the provision of mobile diagnostic services at the Wayne County Nursing Home effective July 1, 2020 to June 30, 2023 at a fee based on the terms and conditions as set forth in the contract pursuant to the Medicare published fee schedule, subject to the County Attorney’s approval as to form and content.

Budgeted: yes no Proposed Cost: 0 Reimbursed Amount 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: July 6, 2020

Committee Chair: Susie Jacobs
Department Head: Denis Vinnik

Authorization for the Wayne County Nursing Home to enter into an Agreement with SightRite Eye Care Services

WHEREAS, 360care currently provides optometry services to the nursing home's residents; and

WHEREAS, 360care notified the nursing home that they are discontinuing their services in New York effective July 13, 2020; and

WHEREAS, that the Wayne County Nursing Home identified a vendor, SightRite Eye Care Services, that specializes in providing Optometry services to nursing home residents; and

WHEREAS, there is no cost to the County for the optometry services to the nursing home's residents now, therefore, be it

RESOLVED, the Chairman of the Board of Supervisors is authorized to sign the contract with SightRite Eye Care Services effective July 14, 2020 through July 14, 2023, subject to the County Attorney's approval as to form and content.

Budgeted: yes no Proposed Cost: 0 Reimbursed Amount _____ 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: 7/6/20

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

AUTHORIZATION TO EXECUTE CONTRACT WITH LYONS CENTRAL SCHOOL DISTRICT TO PROVIDE RELATED SERVICES TO PRESCHOOL CHILDREN WITH HANDICAPPING CONDITIONS FOR WAYNE COUNTY PUBLIC HEALTH

WHEREAS, the County is required to contract for approved special education services or programs pursuant to Section 4410 of the Education Law; and

WHEREAS, the Lyons Central School District has been approved by the New York State Education Department to provide Related Services to preschool children with handicapping conditions; and

WHEREAS, Wayne County Public Health wishes to contract with the Lyons Central School District for the provision of Related Services for the period of July 1, 2020 to June 30, 2021 for the following services and rates:

- Speech Therapy - \$70/.5hr
- Occupational Therapy - \$70/.5hr
- Physical Therapy - \$70/.5hr
- Psychological Services - \$70/.5hr
- Group (up to 5) - \$50/.5hr/child
- 1:1 Aide - \$12/.5hr
- Coordination of Services - \$20/.5hr

now, therefore, be it

RESOLVED, that the Chairman of the Board of Supervisors is hereby authorized to execute a contract and sign contract amendments that add or remove services with Lyons Central School District to provide Related Services to preschool children with handicapping conditions for the above listed services and rates for the period of July 1, 2020 to June 30, 2021, subject to the approval of the County Attorney as to form and content.

Budgeted: yes no Proposed Cost: 0 Reimbursed Amount 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: 7/6/20

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

AUTHORIZATION TO EXECUTE CONTRACT WITH LYONS CENTRAL SCHOOL DISTRICT TO PROVIDE SPECIAL EDUCATION OR PROGRAMS TO PRESCHOOL CHILDREN WITH HANDICAPPING CONDITIONS FOR WAYNE COUNTY PUBLIC HEALTH

WHEREAS, the County is required to contract for approved special education services or programs pursuant to Section 4410 of the Education Law; and

WHEREAS, the Lyons Central School District has been approved by the New York State Education Department to provide Special Education or Programs to preschool children with handicapping conditions; and

WHEREAS, Wayne County Public Health wishes to contract with Lyons Central School District to provide Core, Supplemental and Educational Evaluations, at a rate specified by the New York State Education Department, for the period of July 1, 2020 to June 30, 2021; now, therefore, be it

RESOLVED, that the Chairman of the Board of Supervisors is hereby authorized to execute a contract and sign contract amendments that add or remove services with Lyons Central School District to provide Core, Supplemental, and Educational Evaluations for preschool children with handicapping conditions, at a rate specified by the New York State Education Department, for the period of July 1, 2020 to June 30, 2021, subject to the approval of the County Attorney as to form and content.

Budgeted: yes no Proposed Cost: 0 Reimbursed Amount _____ 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: 7/6/20

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

AUTHORIZATION TO ABOLISH A SUPERVISING PUBLIC HEALTH NURSE POSITION AND CREATE A NEW PUBLIC HEALTH NURSE POSITION

WHEREAS, Wayne County Public Health (WCPH) has worked hard to identify supervisory and cost efficiencies within the Health Department; and

WHEREAS, the Director of Public Health would like to abolish the full-time Supervising Public Health Nurse position and create a fulltime Public Health Nurse position. This would create more supervisory oversight of Public Health Services and a potential cost savings of \$10,522; and

WHEREAS, the supervisory duties can be distributed to the Deputy Director and the Director of Public Health to meet the needs of the NYSDOH Diagnostic & Treatment Clinic and Licensed Home Care Services Agency licensure requirements; now, therefore, be it

RESOLVED, that the Director of Public Health is hereby authorized to create one full-time Public Health Nurse position and abolish the Supervising Public Health Nurse position.

Budgeted: yes ___ no ___ Proposed Cost: ___0___ Reimbursed Amount ___0___ Savings_\$10,522___

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: _____