

Health Services Committee
Westmount Health Facility
AGENDA
Monday, March 16, 2015

Committee Members: Supervisors Sokol, Conover, Frasier, McDevitt and Westcott

- I. Committee meeting called to order by Chairman
- II. Motion to approve minutes of prior Committee meeting
- III. Action Agenda/New Business: (these matters will be handled quickly to allow ample time for items IV and V)
 1. Comptroller vacancy;
 2. Request for New Contract with PNP Computer Software
Rational: Annual software Support Agreement;
 3. Request to Amend Resolution 113 of 2014
Rational: To include an incentive compensation program with regard to per diem Laundry, Housekeeping, and Dietary Services.
 4. Request for Transfer of Funds
Rational: Out of Code Salary Transfers
 5. Request to Amend Resolution 471 of 2012
Rational: Amend a vendor name change from Medical Staffing Network to Cross Country Staffing, Inc. and Amend the fee schedule.
- IV. Presentation by Centers Health Care/Mr. Rozenberg regarding their nursing homes and services provided
- V. Committee Chair to open the floor for questions regarding Centers Health Care by Supervisors, employees and members of the public (Town Hall Style)
- VI. Referral/Pending Items N/A
- VII. Information for Discussion/Review

Discuss payment of retirement invoice

Staffing Levels

	1- F/T Nurse Manager
	5- F/T LPN
	3- P/T LPN
	3- P/T CNA

DBL:

	1 - P/T CNA
	1 - F/T CNA
- VIII. Privilege of the Floor to discuss and additional items to come before the Committee
- IX. Motion to adjourn

Attachments

RESOLUTION REQUEST FORM NO. 20

MISCELLANEOUS

****Please List All Other Requests Not Covered by Previous Resolution Request Forms Here.
Please attach any backup information available and be as detailed as possible.***

DEPARTMENT NAME: WESTMOUNT HEALTH FACILITY

DATE: MARCH 16, 2015

- (a) Purpose of Request: Hiring of temporary fiscal support employee.

- (b) Details: Ratification of the actions of the Administrator of Westmount Health Facility in hiring a temporary fiscal support employee to work 20-40 hours per week at a rate of \$24.00 dollars per hour (approx \$50,000.00 per year) for a duration of 3 to 6 months, with no benefits, effective March 17, 2015 and terminating upon the sale of Westmount Health Facility with prior Comptroller to continue to offer fiscal support services after hours for up to 20 hours per week at time and a half for an undertermined period of time, likely 3 to 6 months, at approximate cost of \$8,000.00 for 3 months.

- (c) Previous Resolution Number:

RESOLUTION REQUEST FORM NO. 3

Request for New Contract

DEPARTMENT NAME: WESTMOUNT HEALTH FACILITY

DATE: March 27, 2015

- (a) Is this a Result of a Bid or Request for Proposal? No
- (b) Purpose of Contract: Annual Software Support Agreement
- (c) Name of Contractor: PNP Computer Services, Inc.
- (d) Address of Contractor: 66 North Main Street, Brockport, NY 14420-1649
- (e) Contractor's Contact Person and Telephone Number: Curt Hamlin 585 637-3240
- (f) Has or will the Contract be provided, if so, please attach: Yes
- (g) Commencement Date of Contract: April 1, 2015
- (g) Termination Date of Contract: March 31, 2016
- (i) Payment Provisions:
 - i) lump sum amount 5,880.00
 - ii) hourly rate amount
 - iii) total amount not to exceed
 - iv) how will payments be made (i.e. monthly, quarterly, upon completion of the project, etc. Completion of signed agreement
- (j) Where are the Funds for this Contract? List Budget Code, (with title), Object Code (with title), and Amount: OR Capital Project OR Capital Reserve Project Number, and Title, and Amount: EF.83110.6300 422 Westmount, Fiscal Services Office, Repair & Maintain PS DA Equipment \$5,880.00.



STATEMENT OF ACCOUNT

P & NP Computer Services, Inc.
6 North Main Street
Brockport, NY 14420-1649 USA

Statement Date	Account No.
02/09/15	225

Telephone 585/637-3240

Bill To :

Westmount Health Facility
42 Gurney Lane
Queensbury, NY 12804

Last Payment: 10/01/14 for \$5880.00

Check No. _____

Date Paid _____

Amount _____

Transaction Date	Invoice Number	Description	Amount	Balance	
02/09/15	20150025	2015 Support Agmt	5880.00	5880.00	
Below 31	Over 30	Over 60	Over 90	Over 120	Total
5880.00	0.00	0.00	0.00	0.00	5880.00

Please detach and return with payment

Westmount Health Facility
42 Gurney Lane
Queensbury, NY 12804

Amount Enclosed

Statement Date	Account No.	
02/09/15	225	
Invoice No.	Balance	X
20150025	5880.00	

Remit To:

P & NP Computer Services, Inc.
66 North Main Street
Brockport, NY 14420-1649 USA

RESOLUTION REQUEST FORM NO. 10

Request for Transfer of Funds

TO: JOAN SADY, CLERK, WARREN COUNTY BOARD OF SUPERVISORS

FROM: WESTMOUNT HEALTH FACILITY
Name of Department

SIGNED: _____

DATE: March 27, 2015

<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
EF.83500.9105 469	Westmount, Administrative Serv, Other Payment/Contributions	EF.60200.100 120	Westmount, Nursing-Nurses' Station, Mgmnt & Super, Salaries – Over Time	6,000.00
EF.60200.400 130	Westmount, Nursing-Nurses' Station, LPN, Salaries – Part Time	EF.60200.400 120	Westmount, Nursing-Nurses' Station, LPN, Salaries – Over Time	20,000.00
EF.60200.500 130	Westmount, Nursing-Nurses' Station, Aides Wages, Salaries – Part Time	EF.60200.500 120	Westmount, Nursing-Nurses' Station, Aides Wages, Salaries –Over Time	5,000.00
EF.72600.400 130	Westmount, Activities Program, Act Dir Wages, Salaries – Part Time	EF.72600.400 110	Westmount, Activities Program, Act Dir Wages, Salaries - Regular	11,888.00
EF.83500.9105 469	Westmount, Administrative Serv, Other Payment/Contributions	EF.72600.400 120	Westmount, Activities Program, Act Dir Wages, Salaries – Over Time	300.00
EF.60200.500 130	Westmount, Nursing-Nurses' Station, Aides Wages, Salaries – Part Time	EF.73300.500 120	Westmount, Physical Therapy, Aides, Salaries –Over Time	300.00
EF.60200.500 130	Westmount, Nursing-Nurses' Station, Aides Wages, Salaries – Part Time	EF.82100.700 130	Westmount, Dietary Services, FSH, Salaries –Part Time	20,000.00
EF.82400.700 130	Westmount, Housekeeping Services HK, Salaries – Part Time	EF.82400.700 120	Westmount, Housekeeping Serv, HK, Salaries – Over Time	3,000.00
EF.82500.700 130	Westmount, Laundry & Linen Serv LL, Salaries – Part Time	EF.82500.700 120	Westmount, Laundry & Linen Serv, LL, Salaries – Over Time	2,000.00
EF.83110.100 120	Westmount, Fiscal Services Office, Mngmt & Super, Salaries- Over Time	EF.83110.600 120	Westmount, Fiscal Services, Clerical & Other Adm, Salaries – Over Time	682.00
EF.60200.500 130	Westmount, Nursing-Nurses' Station, Aides Wages, Salaries- Part Time	EF.83110.600 120	Westmount, Fiscal Services, Clerical & Other Adm, Salaries – Over Time	2,000.00

Please state reason for transfers requested: to cover various salary costs.

RESOLUTION REQUEST FORM NO. 10

Request for Transfer of Funds

TO: JOAN SADY, CLERK, WARREN COUNTY BOARD OF SUPERVISORS

FROM: WESTMOUNT HEALTH FACILITY
Name of Department

SIGNED: _____

DATE: March 16, 2015

<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
EF.83110.100 110	Westmount, Fiscal Services, Mgmt & Super, Salaries – Regular	EF.83110.100 120	Westmount, Fiscal Services, Mgmt & Super, Salaries – Over Time	4,752.00
EF.83110.100 110	Westmount, Fiscal Services, Mgmt & Super, Salaries – Regular	EF.83110.100 130	Westmount, Fiscal Services, Mgmt & Super, Salaries – Part Time	5,760.00
EF.83110.100 860	Westmount, Fiscal Services, Mgmt & Super, Hospitalization	EF.83110.100 120	Westmount, Fiscal Services, Mgmt & Super, Salaries – Over Time	3,429.00

Please state reason for transfers requested: to cover various salary costs.

RESOLUTION REQUEST FORM NO. 20

MISCELLANEOUS

**Please List All Other Requests Not Covered by Previous Resolution Request Forms Here.
Please attach any backup information available and be as detailed as possible.*

DEPARTMENT NAME: WESTMOUNT HEALTH FACILITY

DATE: March 27, 2015

- (a) Purpose of Request: **To Amend resolution 113 of 2014 to include an incentive compensation program with regard to per diem Laundry, Housekeeping and Dietary Services.**
- (b) Details: **To Amend resolution 113 of 2014 to include authorizing one and one-half hourly rated of pay for time worked in excess of eight hours per day as incentive compensation to cover unplanned scheduling shortfalls with regard to per diem Laundry, Housekeeping, and Dietary Services.**
- (c) Previous Resolution Number: **113 of 2014**
- (d) Where are the Funds (if required)? List Budget Code, Object Code, Full Title* and Amount: **EF.82100.200 120, EF.82100.700 120, EF.82500.700 120, EF.82400.700 120 (Dietary/Cooks, Dietary/FSH, Laundry, Housekeeping)**

Sample: A.8021 470 Planning & Community Development – Contract

* as listed in budget and LOGOS

RESOLUTION REQUEST FORM NO. 20

MISCELLANEOUS

****Please List All Other Requests Not Covered by Previous Resolution Request Forms Here.
Please attach any backup information available and be as detailed as possible.***

DEPARTMENT NAME: WESTMOUNT HEALTH FACILITY

DATE: MARCH 16, 2015

- (a) Purpose of Request: Amend Resolution 471 of 2012.

- (b) Details: Amend Resolution 471 of 2012 to include a name change for contractor Medical Staffing Network to Cross Country Staffing, Inc. and Amend fee schedule.

- (c) Previous Resolution Number: 471 of 2012

AMENDMENT

This Amendment shall modify the Staffing Agreement (“Agreement”) entered into by Westmount Health Facility (“Client”) and Medical Staffing Network (“Agency”) for the provision of staffing services.

WHEREAS, Agency sold many of its assets to Cross Country; and,
 WHEREAS, Cross Country has been servicing the Agreement since the acquisition; and,
 WHEREAS, the parties hereto desire to enter into this Amendment and Assignment,
 NOW, THEREFORE, the parties agree to the following:

1. Client consents to the assignment of the Agreement to Cross Country Staffing, Inc., on behalf of itself and its affiliates, including Medical Staffing Network and Allied Health Group.
2. As of the last date signed below Cross Country Staffing, Inc., assumes all of Agency’s rights, title, interest and obligations under the Agreement. For purposes of clarification Agency shall be redefined as Cross Country Staffing, Inc., on behalf of itself and its affiliates, including Medical Staffing Network and Allied Health Group.
3. The following table shall replace the rates listed in the Agreement effective rate change March 29th 2015

PER DIEM PERSONNEL		
DISCIPLINE	WEEKDAY RATE	WEEKEND RATE
Certified Nursing Assistant	\$ 26.00	\$ 27.00
Licensed Practical Nurse	\$ 40.00	\$ 42.00
Registered Nurse	\$ 56.00	\$ 58.00

4. Except as set forth herein, other terms of the Agreement shall remain in full force and effect. Terms of this Amendment shall govern and take precedent over any conflicting terms in the Agreement.

IN WITNESS HEREOF, the parties have caused this Agreement to be executed on the date first written above.

Cross Country Staffing, Inc.

Westmount Health Facility

Name: _____

Name: _____

Title: _____

Title: _____

Date: _____

Date: _____

To: Warren County Board of Supervisors

March 15, 2015

Subject: Fulton Center Nursing Home & Mary Alice Fulston

Board of Supervisors,

The sale of Westmount Nursing facility is very close and dear to my heart as my Mother, Mary Alice Fulston, is a current resident requiring 24/7 hour Nursing care. It took me a long and hard two years to get my Mom transferred local to me in October 2014 to Westmount from the Fulton Center. While my Mom was in Fulton Center my Family and I constantly worried and suffered terrible knowing we couldn't get to her quickly nor was she getting the **proper care**.

Mary has **diet restrictions** due to diverticulitis which Fulton Center continued to not follow Doctor orders by giving her nuts, raw cabbage and seeds. This causes Mom unnecessary stomach pain, bloating bowl problems and then won't eat.

Fulton Center is suppose to **assist with all meals** and take my Mom to the Dining Room in her wheel chair for all meals. This is to keep her Social and for Safety reasons above all. I have been there on multiple occasions when Fulton Center staff would just drop the meal tray in My Mother's room and immediately walk away. Mary does not have the ability to even pull herself up to the bed table or lock her chair in place. My Mom cannot cut anything, open anything or put condiments on anything. Mom requires assistance even being fed. My Mom was constantly losing weight at Fulton Center and they wanted to put a feeding tube in her. Maybe weight loss also was caused by the horrible non-quality food or basic lack of care. Of course I would not approve of a feeding tube. One thing my Mom loves to do is eat. Mary deserves respect and dignity. She's my Mom!

Mom suffers from Alzheimer's, Dementia, Sun Downers disease and has lost the use of her legs completely. Mary is **never to be left alone while eating or toileting**. Well, I can't begin to count how many times weekly or sometimes daily I would get a call from Fulton Center informing me of my Mother being left alone in the bathroom and took a fall. Leaving Mary alone in the bathroom was against the law! This is a form of abuse. We were blessed that she didn't break her head open or break a hip.

Many, many times I've received calls from Fulton Center telling me of **medication mistakes**. I took care of my Mom for years prior and know what negative effects missed, incorrect or late doses of medications can do. With a Dementia patient you must stay on top of their meds for everyone's comfort. I've been at Fulton Center during medication dispensing and have seen that they are way **under staffed**. The staff is pulled in many different directions...,redirecting their attention causing med mistakes in my opinion.

When I finally was able to get my Mom transferred to Westmount I was in shock to see her poor physical condition. Her clothes were nasty and dirty, nails were like claws, her hair was standing on end and she smelled. I cried!

It's been about 6 months since my Mom has come to Westmount;

I can see her multiple times a week and feel great about her care.

They have lots of activities, music, dance, tea parties, cards, Bingo, readers, games, amazing!

It's bright and happy. She now smiles again!

It's very well staffed. Friendly and professional.

Meetings with family and staff, open communication!

Eating very well!

Absolutely no falls.

Eats wonderful meals in the Dining room with assistance, surrounded by people.

No medication mistakes.

Always clean, fresh clothes, nails filed.

They put her earrings on and they help her with her lipstick. Awesome!

Her room is clean and personalized.

Mom's dignity and respect are back please don't take it away by selling Westmount to this particular group. They have a very bad history and I know it firsthand. Our family and neighbors live in Westmount and your family could be next. I promised my Dad I would take care of my Mother. Westmount is where I want my tax money to go, I'll pay more if we need to.

Sometimes it's not about the money it's just the right thing to do!

Sincerely,

Irene Weizenhofer (518-409-8092)

48 Lyon Ct.,

Queensbury, NY 12804

I am writing this on behalf of my husband who recently spent time in the Washington Center for Rehabilitation.

The stay was horrendous. At first they seemed to care about what happened and the care that the patient got, but after awhile they showed their true colors.

My husband had broken his back and was sent there for rehabilitation. There was only one PT who seemed to care. He was not taken out of bed most of the time, just given drugs to keep him quiet. He was incontinent and most of the time was left unchanged for most of the day. He did not have a shower for the entire 2 1/2 months he was there. He was taken to see his spinal doctor and when he gave orders for him to be up early and sitting these were not followed. He needed to be up to help the healing. Most times when I arrived he was still in bed and not been washed or changed. These times were at 11:30 or sometimes as late as 1:00pm. When he was sent there from Albany Med he was on so many pain meds he didn't know where he was half of the time. I fired the so called Doctor from Albany 1 week before he left Albany but the Drs. at the center kept using him for all his meds and orders. He was hooked on these and I don't think he needed 6 pain meds anyway. If the home had done what my husband was sent there for he would be walking by now. Instead he is in another Rehab facility and is now learning to walk. He is still having a problem with the pain meds and this will have to be worked on.

The home needs to have people that work and ones who clean. I picked up his room the days I went. Most of the time the workers don't bother to come in. There were times when some of the residents were put in the bathroom and forgotten, and days when there was only one person for 22 patients. That doesn't give much hope for some sense of care. For those who do work, they try their best, but are tired which could lead to problems also. This place needs to be checked and have the right things put in place. It makes you wonder about the others I did not see. It is a shame.

Cheryl Traver

For Maxwell Traver (Nov. 2014 -

Feb. 15)

SIGN-IN SHEET FOR GUESTS

COMMITTEE: Health Services - Westmount

DATE: March 16, 2015

PLEASE PRINT

NAME:	REPRESENTING:
Sherry Traver	
Edward J. Janku	
Connie Farrington	taxpayer
GEORGE A RYAN	
John E. Deweit	"
Imani J. Whitehead	
Travis Whitehead	self
JOHN SALVADOR	
Louisa Simpson	self
Joseph E. Simpson	"
Sarah Hussa	Self
Terry McCabe	Self
Mike McCabe	SELF
Jim Beatty	self
LORI FARINA	CHC
Dennis Galloway	SELF
Bill Downhve	SELF
Kim DeBrino	CHC
Kelly Boudreau	CHC

SIGN-IN SHEET FOR GUESTS

COMMITTEE: Health Services - Westmount

DATE: March 16, 2015

PLEASE PRINT

NAME:	REPRESENTING:
Jeremy Archart	CHC
Nave Bunk	CHC
Janice Wardwell	CHC
Brooke Dazell	CHC
Doug Herschleb	Self
Tomme Bran	CHC
Renee M Groesbeck	CHC
Angie Smith	CHC
Amir Abramchik	CHC
K. O'Connor	CHC.
Jeffrey S. Itlicko	CHC
Kenneth Rozenberg	CHC
Moby Eganberg	CHC
Larry Falhout	Spec. Comm