

Health Services Committee
Warren County Health Services

AGENDA
May 22, 2015
Information Submitted By: Patricia Auer, DPH/DPS

Health Services Committee Members: Sokol, Conover, Frasier, McDevitt, Westcott

- I. Committee meeting called to order by Chairman**
- II. Motion to approve minutes of April 24, 2015 Health Services Committee meeting**

III. Action Agenda/New Business

Request Resolution:

To amend the contract with Greater Adirondack Home Aides to decrease the rate from \$25.28 per hour to \$25.00 per hour for those patients receiving personal care aide services that are enrolled in the Fidelis Managed Long Term Care (MLTC) program.

Rationale:

Fidelis only reimburses our agency \$25.00 per hour for these paraprofessional services, and it is not prudent for us to pay a business associate agency more than we are being reimbursed. Greater Adirondack has agreed to this change.

Request Resolution:

To transfer a Panasonic Toughbook T7 – S#8KKSC80429 from Health Services to Warren County Soil and Water Conservation District at a value of Zero as the item is fully depreciated.

Rationale:

When we received our new Toughbooks a number of months ago we transferred a number of them to other county departments as we were advised to do by the County IT Department who was aware of where they could best be utilized. We have now been advised by Robert Lynch, Deputy County Treasurer, that Warren County Soil and Water Conservation District is not a Warren County Department, and as such a resolution to transfer county equipment is needed.

Request Resolution:

Budget Transfer: Please see Attachment #5.

From Code: A.4010.110 Health Services Full Time Salaries

To Code: A.4010130 Part Time Salaries

In the amount of: \$20,000.

Rationale:

This is to cover the cost of Per Diem Nurse Salaries which is more cost effective than paying Full Times Salaries with fringe benefits.

Tawn Driscoll, Fiscal Manager, will be present at the meeting to answer any questions.

Request Referral to the Personnel Committee:

For consideration to **Delete 2 full time Nurse Technician Positions (LPNs)** that have occurred due to retirements and **Create 1 full time Registered Nurse (RN) position**, and amend the Department Table of Organization accordingly. The change will result in one less employee and an overall savings of \$35,622.00 plus one full time benefit package.

Rationale:

The scope of practice for Nurse Technicians (LPN license) is limited by nature of their education and license. They are required to work under the direction of a Registered Nurse, and RN supervision must always be documented in the patient record. Nurse technicians cannot admit patients to service, cannot manage a caseload of patients, and cannot do IV therapy or some other medical procedures. This limits us in our ability to accept referrals, and is also a disadvantage on weekends and holidays. We are looking at the retirements as an opportunity to restructure operations and rethink the way services are provided to our patients, without compromising any jobs.

Request Committee Approval:

To authorize Patty Myhrberg, PHN, and Nancy Parsons, RN to travel to Syracuse to attend a New York State Department of Health conference, Vaccines in the 21st Century: A Summit on Disease Elimination and Reduction which will be held on June 10 – 11 at the Double Tree by Hilton.

Rationale:

The cost for the conference will be covered in full by New York State Department of Health with the exception of gas and tolls. The nurses will travel in a Health Services Fleet vehicle. Committee approval is needed because it is overnight travel, and a county vehicle will be used.

Referral/Pending Items

There are no pending items for this month.

IV. Information for Discussion/Review

Emergency Response and Preparedness Activities: Please see **Attachment #1** for the monthly report.

Status of Referrals: Please see **Attachment #4** for the detailed report. Sharon Schaldone, Assistant Director of Patient Services, will provide comment on the report at the meeting.

Out of Committee Approval Granted to Backfill Unanticipated Nurse Resignation:

Since our last meeting we had a nurse resign unexpectedly giving only a two week notice. In order to keep up our ability to accept all referrals, and see patients in a timely manner, it was necessary to obtain emergency approval to backfill the position. This was accomplished utilizing the new County Policy with the help of the County Administrator, County Personnel Officer, Budget Officer and our Committee Chairman. We are thankful for the assistance and are happy to report we have been able to recruit an experienced nurse who will start soon.

Update on Animal Control Situation

Reports of Expenditures, Revenues, Overtime and Per Diem Use for 2014: Please see **Attachment #2.**

Revenue and Expense Comparison Report for 2014 vs 2015: Please see **Attachment #3.**

Tawn Driscoll, Fiscal Manager, will be present at the meeting to review the reports and answer any questions.

V. Privilege of the Floor to discuss any additional items to come before Committee

VI. Motion to adjourn Health Services Portion of Meeting

Attachments:

#1 Emergency Response and Preparedness Activities Report

#2 Reports of Expenditures, Revenues, Overtime and Per Diem Use for 2015

#3 Revenue and Expense Comparison Report for 2014 vs 2015

#4 Report of Referral Status

#5 Budget Transfer

BT ACTIVITY SHEET
BP3 - 7/1/14 - 6/30/15

Page 1

Topic Color Codes

Red/Chempack; Green/SNS; Blue/Mass Fatality; Black/Training;
 Purple/Special Needs; Orange/Drill; Black/Pan Flu

Attachment 1

4th QUARTER ACTIVITIES (April 1, 2015 – June 30, 2015) ▶ To be recorded on NYSDOH Deliverable template

Date	Type	Subject/Comments	Attendees	Topic (i.e. Chempack, Drill, Mass Fatality, SNS, Training, Pan Flu, Special Needs)
5/1/2015	Equipment	Recovered cots being stored at Red Cross in Glens Falls and moved them to County OES Storage	Dan Durkee	
5/1/2015	Meeting	American Red Cross – Cots Sheltering	Dan Durkee Ginelle Jones Amy Hirsch	Special Needs
5/1/2015	Meeting	SUNY Adirondack Nursing Advisory Board , ERP MCM (Medical Countermeasures) Drill discussed	Ginelle Jones Patty Myhrberg	
5/8/2015	Evaluation	Follow- up evaluators mtg for March 12 th MCM exercise, so the AAR-IP can be completed and submitted to NYSDOH by June 12 th	Dan Durkee	
5/12/2015	Meeting	Regional ERP Coordinators Meeting held at the National Weather Service lab at Albany	Dan Durkee	
5/14/2015	Equipment	Updated Respiratory Protection Fit Test Kits	Ginelle Jones	Respiratory Protection Plan
5/20/2015	Webinar	ClinOps on "Class A Agents and the Applications of Preparedness Strategies to Real World Communicable Disease Events"	Dan Durkee Pat Belden	
5/20/2015	Exercise	Tabletop exercise at Glens Falls Hospital "Nursing Home Destroyed by Strong Winds)	Dan Durkee	Table Top Drill
5/20-5/21/15	Training	HSEEP(Homeland Security Exercise and Evaluation Program) Lewis, NY	Ginelle Jones	
5/26/15	Plan Review	Annual review of "Chempack" with the Warren County Sheriff's Department	Dan Durkee et.al	Chempack

WARREN COUNTY HEALTH SERVICES BUDGET ANALYSIS

REVENUE AND EXPENDITURES FOR 2015 AS OF 5/18/2015 3:38:35 PM

FUND(S): A, CL, D, DM, EF, GI, MS, SD, V
 CODE(S): 4010, 4011, 4013, 4016, 4046, 4054, 4189, 4025

	2015 BUDGETED	2015 YTD ACTUAL	2014 Prior Year Totals
EXPENSES			
Salaries - Regular	\$2,893,227.00	\$943,624.34	\$2,814,172.31
Salaries - Overtime	\$134,500.00	\$43,182.26	\$130,843.90
Salaries - Part Time	\$284,721.00	\$103,469.17	\$262,705.45
100's PERSONAL SERVICES	\$3,312,448.00	\$1,090,275.77	\$3,207,721.66
200's EQUIPMENT	\$6,565.00	\$390.00	\$130,183.64
400's CONTRACTUAL	\$6,814,507.20	\$1,244,137.17	\$5,844,841.39
800's EMPLOYEE BENEFITS	\$1,765,250.00	\$693,737.61	\$1,801,449.36
TOTALS	\$11,898,770.20	\$3,028,540.55	\$10,984,196.05
REVENUES			
	2015 BUDGETED	2015 YTD ACTUAL	2014 Prior Year Totals
	\$9,688,454.00	\$1,431,944.68	\$9,206,828.13

Note: Revenues reflect to March 2015 for CHHA, LTC and MCH while we are currently working on closing April 2015. Salaries are 32.91% of budget at this time. (See below)

**Warren County Health Services
 Salaries Comparison
 2014 vs 2015
 as of 5/3/15 Payroll**

	YTD 2015	YTD 2014	YTD 14v15	% Change	Total Budget 2015	Total Actual 2014
Total of All Depts	\$943,624.34	\$951,069.20	-\$7,444.86	-0.78%	\$2,893,227.00	\$2,814,172.31
Regular Salaries	\$43,182.26	\$46,322.10	-\$3,139.84	-6.78%	\$134,500.00	\$130,843.90
Overtime Salaries	\$103,469.17	\$92,981.38	\$10,487.79	11.28%	\$284,721.00	\$262,705.45
Part Time Salaries	\$1,090,275.77	\$1,090,372.68	-\$96.91	-0.01%	\$2,812,448.00	\$3,207,721.66
TOTALS	32.91%	33.99%				

Source: Detail G/L report for all Salary Category from 1/1/XX-5/4/XX
 Note: Total Salaries YTD are 32.91% of 2015 budget, while at this time last year salaries were 33.99% of salaries. Actual regular FT salaries are \$7,444.86 or .78% under Salaries in 2014. Due to staffing shortages in nursing, per diem nurses have been utilized to cover referrals, therefore keeping over time salaries down from last year. Part time salaries YTD are however above 2014 due to a retirement which occurred in May costing \$9,454. Otherwise we would be around \$9550 under last years salaries.

ATTACHMENT #2

**Revenue and Expense Comparison 2015 vs 2014
as of 5/22/15 meeting**

EXPENSES	5/22/2015	5/23/2014	Variance
	2015 YTD Actual as of 5/18/15 G/L	2014 YTD Actual as of 5/20/14 G/L*	
Salaries - Regular	\$943,624.34	\$951,069.20	(\$7,444.86)
Salaries - Overtime	\$43,182.26	\$46,322.10	(\$3,139.84)
Salaries - Part Time	\$103,469.17	\$92,981.38	\$10,487.79
100's PERSONAL SERVICES	\$1,090,275.77	\$1,090,372.68	(\$96.91)
200's EQUIPMENT	\$390.00	\$30,356.65	(\$29,966.65)
400's CONTRACTUAL	\$1,244,137.17	\$1,200,017.30	\$44,119.87
800's EMPLOYEE BENEFITS	\$693,737.61	\$711,168.58	(\$17,430.97)
TOTALS	\$3,028,540.55	\$3,031,915.21	(\$3,374.66)

REVENUES	2015 YTD ACTUAL	2014 Prior Year Totals	
	\$1,431,944.68	\$1,616,528.74	(\$184,584.06)

*Please note that the 2014 Revenues and Expenses are what was reported at the 5/23/14 Committee Meeting. These were taken from the General Ledger on 5/20/14, however in looking at current reports, the numbers have changed most likely due to the fact that expenses and revenues were posted after the information was retrieved. Therefore the comparison between the two years is somewhat skewed as listed above. Overall, in 2015 we are below in all categories compared to 2014.

Notes:

Revenues are below 2014 and Expenses YTD for 2015 are also slightly below 2014. The variance in Revenues is due to the the fact we are working on closing April CHHA, LTC and MCH revenues for the month.

Salaries:

We continue to remain below last year's Salary expense. However, as stated on the previous page, part time salaries reflects a retirement during May 2015 of \$9454, therefore bringing the YTD PT salary line above the 2014 expense. Otherwise, Part time salaries would be slightly above 2014. Per Diem Staff, which are expensed within Part time salaries, continue to be utilized to assist in nursing shortage coverage therefore keeping the overtime down while other salary expenses reflect annual salary increases as outlined in the CSEA contract. Employee benefits remain below 2014 due to the correlation with the reduction in full time salaries.

Contractual Expenses:

It appears that compared to last year, our expenses have increased, however in researching actual on the 5/20/14 date, total expenses for 2015 are below last year. Again, this is due to the timing of when these numbers were printed in 2014.

Attachment #4

Warren County Health Services
Patient Evaluations
CHHA Division

CATEGORY	01/2013	02/2013	03/2013	04/2013	05/2013	06/2013	07/2013	08/2013	09/2013	10/2013	11/2013	12/2013
SN eval	156	115	135	128	146	101	151	135	126	141	113	145
SN IV eval	9	4	0	6	12	5	4	6	7	5	7	10
CDPAP	11	8	9	10	9	8	7	11	7	6	12	16
PRI	13	4	8	12	14	11	13	14	8	14	7	2
SN Evals per month	189	131	152	156	181	125	175	166	148	166	139	163
PT evals	103	88	75	84	81	61	96	95	83	104	76	80
PT only	22	7	20	23	37	24	37	28	21	30	18	19
PT only evals per mo	22	7	20	23	37	24	37	28	21	30	18	19
Total Evals per month	211	138	172	179	218	149	212	194	169	196	157	183

CATEGORY	01/2014	02/2014	03/2014	04/2014	05/2014	06/2014	07/2014	08/2014	09/2014	10/2014	11/2014	12/2014
SN eval	127	110	132	114	139	85	116	122	106	103	109	116
SN IV eval	7	4	6	2	5	7	5	5	6	15	4	7
CDPAP	7	2	0	0	0	0	0	0	0	0	0	0
PRI	3	2	3	4	0	5	3	3	6	3	5	5
UASNY	15	11	18	14	12	23	26	21	19	16	15	26
SN Evals per month	159	125	159	134	156	120	150	151	137	137	133	154
PT evals	88	82	78	69	84	61	75	76	67	74	70	70
PT only	33	32	35	25	25	27	27	21	18	21	24	21
PT only evals per mo	33	32	35	25	25	27	27	21	18	21	24	21
Total Evals per month	192	157	194	159	181	147	177	172	155	158	154	175
	-9%	12%	13%	-11%	-17%	-1%	-17%	-11%	-8%	-19%	-2%	-4%

CATEGORY	01/2015	02/2015	03/2015	04/2015	05/2015	06/2015	07/2015	08/2015	09/2015	10/2015	11/2015	12/2015
SN eval	122	110	114	109								
SN IV eval	9	6	8	13								
CDPAP	1	0	0	0								
PRI	5	5	5	6								
UASNY	18	15	23	16								
SN Evals per month	155	136	150	144								

SCHEDULE "A"

AUTHORIZATION TO ATTEND MEETING OR CONVENTION

Check one:

- In-State (needs Supervisory Committee authorization)
- Out-Of State (needs Board resolution)

The Health Services (Supervisory Committee) hereby authorizes Patty Myhrberg, PHN (Employee Name) Nancy Parsons RD to attend Vaccines in the 21st century: Elimination and Reduction (Name of meeting or organization) at Doubletree by Hilton Hotel Syracuse, NY (Address)

on June 10-11, 2015 (Dates) Mode of transportation to be used Health Services Fleet Vehicle (County Vehicle or Mass Transportation)

If the mode of transportation is not a county vehicle or mass transportation, please explain:

Proper documentation must be attached when submitting for approval. (Please check documents attached)

- Notice of meeting or convention including cost.

For Overnight Travel

- Room rate \$ _____
- Meal costs - GSA*per diem rate \$ _____

*www.gsa.gov

Date: 5/22/15

Patricia [Signature]
Department Head Signature

All expenses covered by New York State Dept. of Health (see attached info) except gas and toll

Date: _____

Committee Chairman Signature

Please refer to the Warren County Travel Policy and County Vehicle Use Regulations for general policy guidelines.

Please check to request a fleet vehicle.

REQUEST FOR USE OF FLEET VEHICLE

Filing Instructions:

1. Original with voucher to Auditor.
2. Copy to Frank Morehouse if fleet vehicle is needed.
3. Copy to Clerk of the Board with Resolution Request form if out-of-state travel.
4. Copy to Purchasing with Purchase Order, if required.
5. Copy to Commissioner of Administrative and Fiscal Services if credit card will be used.



Department of Health

ANDREW M. CUOMO
Governor

HOWARD A. ZUCKER, M.D., J.D.
Acting Commissioner

SALLY DRESLIN, M.S., R.N.
Executive Deputy Commissioner

Vaccines in the 21st Century: A Summit on Disease Elimination and Reduction

Background: In 2014, Article 2 of the public health law was amended by adding a new Title 6, creating the 21st Century Workgroup for Disease Elimination and Reduction. The workgroup, to be comprised of experts within the New York State Department of Health (Department), experts on the immunization advisory council and other experts the commissioner deems appropriate, is charged with the mission of reviewing existing vaccines, the status of international research and development for vaccines likely to be candidates for the pharmaceutical marketplace, and to review the status of health threats which could be addressed by the development of vaccines.

In June 2015, the Department will convene a two-day summit to inaugurate activities of the 21st Century Workgroup for Disease Elimination and Reduction. Experts from the Department, the New York State immunization advisory council, and national experts on vaccines and infectious diseases will be represented. The summit will be funded by a fiscal year 2014-15 New York State Legislative request and is required under the annual New York State budget.

Goals of the summit include:

- 1) Describe the status of research and development for human and animal vaccines, including human vaccines for eastern equine encephalitis, Ebola, and dengue;
- 2) Discuss meningococcal serogroup B disease and new meningococcal serogroup B vaccines;
- 3) Discuss health threats associated with low influenza vaccination rates; and
- 4) Determine a direction and next steps for the workgroup.

Venue: Doubletree by Hilton Hotel, East Syracuse, New York

Date: June 10 - 11, 2015

Agenda

Day 1: June 10, 2015

- 4:00 p.m.-6:00 p.m. Registration and Check-in**
- 6:00 p.m.-6:15 p.m. Opening Remarks**
Elizabeth Rausch-Phung, M.D., M.P.H.
Director, Bureau of Immunization
The New York State Department of Health
- 6:15 p.m.-7:30 p.m. Keynote address: Progress in the Development of Human Eastern Equine Encephalitis Vaccine**
Pamela Glass
Fort Detrick U.S. Army Medical Command
Dinner to be provided to all attendees

Day 2: June 11, 2015

- 8:00 a.m.-9:00 a.m. Registration and Continental Breakfast**
- 9:00 a.m.-9:15 a.m. Opening Remarks**
Guthrie Birkhead, M.D., M.P.H.
Deputy Commissioner
Office of Public Health
The New York State Department of Health
- 9:15 a.m.-10:15 a.m. What's New in Vaccine Research and Development?**
Joseph B. Domachowske, M.D.
Professor of Pediatrics and Microbiology and Immunology
State University of New York Upstate Medical Center, Syracuse, NY
New York State Immunization Advisory Councilmember
- 10:15 a.m.-10:30 a.m. Break**
- 10:30 a.m.-11:30 a.m. Overview of the USDA's Animal Vaccine Program**
Byron Rippke, D.V.M.
Director of Policy, Evaluation, and Licensing
USDA/APHIS/VS/CVB
- 11:30 a.m.-12:15 a.m. Update on Ebola Vaccine Clinical Trials**
Jane Zucker, M.D., M.Sc.
Assistant Commissioner for Immunization
New York City Department of Health and Mental Hygiene
- 12:15 p.m.-1:15 p.m. Lunch**
To be provided to attendees at meeting venue
- 1:15 p.m.-2:00 p.m. Dengue Fever Vaccine Research and Development**
Timothy Endy, M.D., M.P.H.
Associate Professor and Chief of Infectious Disease, Department of Medicine
State University of New York Upstate Medical Center, Syracuse, NY

- 2:00 p.m.-2:45 p.m.** **Meningococcal Serogroup B Disease and Vaccine**
Deb Jerdo
National Meningitis Association
- 2:45 p.m.-3:00 p.m.** **Break**
- 3:00 p.m.-3:45 p.m.** **A Personal Story: Insights from a Mother Who Lost a Child to Flu**
Serese Marotta
Families Fighting Flu
- 3:45 p.m.-4:00 p.m.** **Closing Remarks**
Debra Blog, M.D., M.P.H.
Director, Division of Epidemiology
The New York State Department of Health
- 4:00 p.m.** **Adjournment**

Auer, Pat

From: Jones, Ginelle
Sent: Monday, May 11, 2015 10:39 AM
To: Auer, Pat
Subject: 21st Century Summit Registration
Attachments: Vaccines in the 21st Century Summit Agenda 04-2015.pdf; ac3237s_fe.pdf; Instructions for W9 form.pdf

Hi Pat,

Can Patty and Nancy register?

Thanks,
Ginelle

From: Myhrberg, Patty
Sent: Friday, May 08, 2015 9:19 AM
To: Parsons, Nancy
Cc: Jones, Ginelle
Subject: FW: 21st Century Summit Registration

Nancy, here is more info on the conference
Ginelle, do you want us to register and book the room?
Patty

From: doh.sm.bureau.of.immunization [<mailto:bureau.of.immunization@health.ny.gov>]
Sent: Friday, May 01, 2015 9:46 AM
Cc: Vasquez, Deborah A (HEALTH); Rausch-Phung, Elizabeth (HEALTH); Rose, James D (HEALTH)
Subject: 21st Century Summit Registration

Hello,

NYSDOH is excited to share registration information for Vaccines in the 21st Century: A Summit on Disease Elimination and Reduction. This meeting will feature presentations from experts on new vaccines, under-utilized vaccines and vaccines in development for various important diseases including Meningococcal meningitis and Ebola. The meeting will begin with an evening keynote address on June 10th at 6pm and continue with a full day meeting on June 11. See the attached agenda for details.

NYSDOH will be paying for all travel and hotel expenses for invitees attending this meeting at the Doubletree by Hilton in Syracuse NY.

To register please complete this simple 3 step process:

1. Go to the survey link below and complete the brief questionnaire.
<https://www.surveymonkey.com/s/ZHZN96F>
2. Submit a substitute W-9 form ac3237s (form and instructions attached).
Please note this must be done before you travel so please complete the form and email to bureau.of.immunization@health.ny.gov or fax to (518) 474-1495 as soon as possible.

Attached please find the save the date for Vaccines in the 21st Century: A Summit on Disease Elimination and Reduction. This meeting will begin the evening on June 10th and continue through June 11th in Syracuse, New York. It will feature presentations from experts on new vaccines, under-utilized vaccines and vaccines in development for various important diseases including Meningococcal meningitis and Ebola.

Space is limited for this event. The New York State Department of Health would like to extend the invitation for up to two representatives from the each local health department to attend. Please contact the NYSDOH Bureau of Immunization with questions regarding travel arrangements. Registration information will be available soon via survey monkey.

We look forward to your participation at this exciting event.

Deborah Vasquez, M.D., M.P.H.
Medical Director, Bureau of Immunization
New York State Department of Health
Corning Tower, Room 649, Albany, NY 12237
Phone: (518) 473-4437
Fax: (518) 474-1495
www.health.ny.gov/immunization

RESOLUTION REQUEST FORM NO. 4

Request for Extending, Rescinding or Amending Resolution

DEPARTMENT NAME: Health Services

DATE: 05/22/2015

- (a) Purpose of Contract Change: To adjust the rates for personal care aide services from \$25.28 per hour to \$25.00 per hour.
- (b) Resolution Number, or Numbers if Amended, which Authorized the Original Contract: R.639/2013
- (c) Name of Contractor: Greater Adirondack Home Aides, Inc.
- (d) Address of Contractor: 25 Willowbrook Rd., Queensbury, NY 12804
- (e) Contractor's Contact Person and Telephone Number: Julie Smith, 926-7070 ext. 204
- (f) Commencement Date of Amendment: 06/22/2015
- (g) Termination Date of Extension: per terms of current agreement
- (h) Payment Provisions: paid per patient visit at hrly contract rate upon receipt of documentation for each patient visit.
 - i) lump sum amount
 - 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.
- (i) 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:

A 4010.470 Contract – Health Services expense

A 4016.470 Long Term Home Health Care expense

GREATER ADIRONDACK HOME AIDES, INC.

Caring for the Community Since 1965

25 Willowbrook Road Suite 4 Queensbury, NY 12804

www.GreaterAdirondackHomeAides.org (518) 926-7070

BOARD OF DIRECTORS

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May 6, 2015

Patricia Auer, Director
Warren County Health Services
1340 State Route 9
Lake George, NY 12845

Dear Pat:

Per our conversation, Greater Adirondack Home Aides has agreed to a rate adjustment for Personal Care Aide services from \$25.28 per hour to \$25.00 per hour.

Sincerely,

Julie A. Smith
Executive Director

Warren County Board of Supervisors

RESOLUTION NO. 639 OF 2013

Resolution introduced by Supervisors Sokol, Conover, Frasier, Taylor and McDevitt

AUTHORIZING AGREEMENT WITH GREATER ADIRONDACK HOME HEALTH AIDES, INC. TO PROVIDE PARAPROFESSIONAL CARE SERVICES FOR THE CERTIFIED HOME HEALTH AGENCY (CHHA) AND LONG-TERM HOME HEALTH CARE (LTHHC) PROGRAMS

RESOLVED, that Warren County continue the contractual relationship (the previous agreement being authorized by Resolution No. 708 of 2012) with Greater Adirondack Home Health Aides, Inc., 25 Willowbrook Road, Queensbury, New York 12804, to provide paraprofessional care services for the Certified Home Health Agency (CHHA) and Long-Term Home Health Care (LTHHC) Programs, for a term commencing January 1, 2014 and terminating December 31, 2014, at rates not to exceed those set forth below, and the Chairman of the Board of Supervisors be, and hereby is, authorized to execute an agreement in a form approved by the County Attorney:

<u>PROGRAM</u>	<u>SERVICES</u>	<u>RATES/HOUR</u>
CHHA	Home Health Aide	\$25.54
LTHHC	Home Health Aide	\$25.54
	Personal Care Aide	\$25.28

and be it further

RESOLVED, that unless there should be a material change in contract terms, a change in rates/costs or a change or addition of a new contractor/agency, a further Board resolution will not be necessary for the Chairman of the Board of Supervisors to execute new contracts and continue the contracts in future years for one year terms, provided appropriations for such contracts are made in the Health Services budget and the Department Head recommends continuation of the contracts, and be it further

RESOLVED, that the Chairman of the Board be, and hereby is, authorized to execute agreements, and from time to time as may be necessary, further contracts consistent with the term set forth herein, with said contractor in the form approved by the County Attorney, and be it further

RESOLVED, that the funds shall be expended from Budget Code A.4010 470 Health Services, Contract and Budget Code A.4016 470 Long Term Home Health Care, Contract.

RESOLUTION REQUEST FORM NO. 11

Request to Create New Position

DEPARTMENT NAME: Health Services

DATE: 05/22/2015

- (a) Title of Requested Position: Registered Professional Nurse (RPN)
- (b) Annual **Base** Salary (and Grade if Applicable): Grade 19 – 42,719 base salary dependent on nurse experience
- (c) Effective Date for New Position:* 07/01/2015
*Please do not backdate unless the purpose is to correct an error.
- (d) List Any Position in the Department's Table of Organization Being Deleted as a Result of this Request: (Include annual salary and grade if applicable): 2 Nurse Technician positions Grade 11 – Base Salary 34,361 retiring nurse technicians' salaries 43,505.90 – 44,005.94
- (e) Where are Funds in the Budget for this Position? List Budget Code (with title), Object Code (with title), and Amount: Health Services 36.00 A4010.110 Full Time Salary
- (f) Has Personnel Officer Reviewed and Approved of the New Position Title?: (This is necessary **BEFORE** bringing the request to committees.)
- (g) Is this a mandated position? If so, please explain: No
- (h) Is there expected revenue from this position? If so, please explain: 100% reimbursable to county as nursing visits are billable services

RESOLUTION REQUEST FORM NO. 12

Schedule "A"

Newly Created

NOTICE OF INTENT TO FILL VACANT POSITION

This notice of intent is filed whenever a department head plans to fill an *existing* funded position in their budget that is vacated due to a retirement, resignation, termination or promotion. This notice may not be used for requests to create a *new* position. For complete instructions on the procedure to be followed, see the reverse of this form.

DEPARTMENT HEAD COMPLETES THIS SECTION

Department: Health Services Payroll Dept. No: 36.00
Title of Position: Registered Professional Nurse Annual Salary: 42,719 Grade: 19
Budget code and title: A. 4010-110 Full Time Salaries Union Non-Union
This position is ^{created} vacated due to: Retirement Resignation Termination Promotion Other
Employee No.: 8937 Is this position mandated? Yes No Is the position reimbursable? Yes No
Source of reimbursement: Federal % State % Other various % 100% reimbursable
burdened nursing services are billable

CIVIL SERVICE STATUS AND HUMAN RESOURCES DIRECTOR APPROVAL

Competitive-active eligible list Competitive-no list (*hiring would be provisional*) Non-Competitive Other

Actual Impact to Budget Report will be provided monthly by Human Resources Director.

Candidate's qualifications must be approved by Personnel Officer prior to hiring.

Human Resources Director has approved this form when initialed. _____

COUNTY ADMINISTRATOR COMPLETES THIS SECTION

Name of Committee _____ Date _____

- The Administrator has no objection to the filling of the vacancy.
 The Administrator objects to the filling of the vacancy.

Administrator Signature _____

BUDGET OFFICER COMPLETES THIS SECTION

Date _____

- The Budget Officer has no objection to the filling of the vacancy.
 The Budget Officer objects to the filling of the vacancy.

Budget Officer Signature _____

SUPERVISORY COMMITTEE COMPLETES THIS SECTION

Name of Committee _____ Date _____

- The committee has no objection to the filling of the vacancy.
 The committee objects to the filling of the vacancy.
 In the case of an emergency, Committee Chair has no objection to the filling of the vacancy.
 In the case of an emergency, Committee Chair objects to the filling of the vacancy.

Ranking Committee Member Signature _____

Anticipated that nurse hired would have sufficient experience and would start at step 5 \$51,888 Experience back up information per county protocol would be provided with

Civil Service Law, Section 22: Certification for positions. Before any new position in the service of a civil division shall be created or any existing position in such service shall be reclassified, the proposal therefore, including a statement of the duties of the position, shall be referred to the municipal commission having jurisdiction and such commission shall furnish a certificate stating the appropriate civil service title for the proposed position or the position to be reclassified. Any such new position shall be created or any such existing position reclassified only with the title approved and certified by the commission. Effective 1978

Warren County Civil Service
1340 State Rte 9, Lake George, NY 12845
New Position Duties Statement

Department head or other authority requesting the creation of a new position, prepare a separate description for each new position to be created except that one description may cover two or more identical positions in the same organizational unit.
Forward one typed copy to this Commission.

1. Department: Health Services Bureau, Division, Unit or Section: Municipal Center Lake George Location of Position: Lake George

2. Description of Duties: Describe the work in sufficient detail to give a clear word picture of the job. Use a separate paragraph for each kind of work and describe the more important or time-consuming duties first. In the left column, estimate how the total working time is divided.

Percent of Work Time	Job Duty
100%	please see attached job description

(Attach additional sheets if more space is needed)

Names and Titles of Persons Supervising this position (General, Direct, Administrative, etc.)

REGISTERED PROFESSIONAL NURSE

DISTINGUISHING FEATURES OF THE CLASS: This is a professional nursing position involving responsibility for coordinating individual patient care and for performing nursing services requiring substantial specialized judgment and skills. Work is performed under the general direction of a supervisory level nursing position and in accordance with a prescribed nursing care plan. Supervision may be exercised over the work of Licensed Practical Nurses and related auxiliary nursing personnel. Does related work as required.

TYPICAL WORK ACTIVITIES: (Illustrative only)

Assesses patient nursing care needs and prepares and carries out a nursing care plan;
Supervises sub-professional nursing personnel;
Is responsible for the care of patients and their quarters, including making beds, changing linens, keeping order, lifting and moving patients, giving baths and rubs, and caring for personal effects;
Is responsible for observing symptoms and carrying out diagnostic procedures ordered by the physician;
Prepares and applies dressings, gives medication and nursing and therapeutic treatment as prescribed by physicians;
Instructs patient or members of patient's family in regard to patient's diet, health habits, the carrying out of treatments at home and rehabilitative measures as authorized by the physician;
Performs related services for patients in the prevention of illness and the attainment of maximum health;
Makes contacts with appropriate social services or health agencies as necessary to assure patient needed services or follow-up care;
Maintains a variety of records and prepares reports.

FULL PERFORMANCE KNOWLEDGE, SKILLS, ABILITIES AND PERSONAL

CHARACTERISTICS: Good knowledge of nursing principles and techniques and their relation to medical and surgical practices and skill in their application; working knowledge of materia medica, hospital dietetics, sanitation, and personal hygiene; skill in the application of nursing techniques and practices; ability to understand and follow technical oral and written instructions; ability to keep records and make reports; ability to get along well with patients, physicians and others; ability to carry out successfully the therapeutic measures prescribed; ability to plan and supervise the work of sub-professional and non-technical personnel; good observation; mental alertness; firmness; initiative; cheerfulness; patience; emotional stability; sympathetic and caring attitude toward the sick; good moral character; physical condition commensurate with the demands of the position.

MINIMUM QUALIFICATIONS: Graduation from a school of nursing approved by the State Education Department from a course approved by such department as qualifying for Registered Professional Nurse.

SPECIAL REQUIREMENTS: Eligibility for a license issued by the State of New York to practice as a Registered Professional Nurse. Possession of the license at the time of appointment. In certain positions, a license can be obtained after appointment but only if work can be performed under the auspices of a licensed Registered Professional Nurse.

REGISTERED PROFESSIONAL NURSE II

DISTINGUISHING FEATURES OF THE CLASS: This is a professional nursing position involving responsibility for coordinating individual patient care and for performing nursing services requiring substantial specialized judgment and skills. Work is performed under the general direction of a supervisory level nursing position and in accordance with a prescribed nursing care plan. Supervision may be exercised over the work of Licensed Practical Nurses and related auxiliary nursing personnel. Does related work as required.

TYPICAL WORK ACTIVITIES: (Illustrative only)

Assesses patient nursing care needs and prepares and carries out a nursing care plan;
Supervises sub-professional nursing personnel;
Is responsible for the care of patients and their quarters, including making beds, changing linens, keeping order, lifting and moving patients, giving baths and rubs, and caring for personal effects;
Is responsible for observing symptoms and carrying out diagnostic procedures ordered by the physician;
Prepares and applies dressings, gives medication and nursing and therapeutic treatment as prescribed by physicians;
Instructs patient or members of patient's family in regard to patient's diet, health habits, the carrying out of treatments at home and rehabilitative measures as authorized by the physician;
Performs related services for patients in the prevention of illness and the attainment of maximum health;
Makes contacts with appropriate social services or health agencies as necessary to assure patient needed services or follow-up care;
Maintains a variety of records and prepares reports.

FULL PERFORMANCE KNOWLEDGE, SKILLS, ABILITIES AND PERSONAL

CHARACTERISTICS: Good knowledge of nursing principles and techniques and their relation to medical and surgical practices and skill in their application; working knowledge of materia medica, hospital dietetics, sanitation, and personal hygiene; skill in the application of nursing techniques and practices; ability to understand and follow technical oral and written instructions; ability to keep records and make reports; ability to get along well with patients, physicians and others; ability to carry out successfully the therapeutic measures prescribed; ability to plan and supervise the work of sub-professional and non-technical personnel; good observation; mental alertness; firmness; initiative; cheerfulness; patience; emotional stability; sympathetic and caring attitude toward the sick; good moral character; physical condition commensurate with the demands of the position.

MINIMUM QUALIFICATIONS: Graduation from a school of nursing approved by the State Education Department from a course approved by such department as qualifying for Registered Professional Nurse and, following licensure, two years professional nursing experience with Warren County or three years of professional nursing experience.

Amended, Warren County Personnel, July 15, 2009

COMMUNITY HEALTH NURSE

DISTINGUISHING FEATURES OF THE CLASS: Under supervision, performs public health nursing activities involving responsibility for assessment of health needs and developing the plan of care for individuals and families. The work is distinguished by the responsibility of the incumbent for initial implementation of nursing care plans and providing nursing care. Does related work as required.

TYPICAL WORK ACTIVITIES: (Illustrative only)

Gives skilled nursing care and prescribed treatments to patients in their homes and clinics and demonstrates nursing care to patients and families;
May lead a team of peers and subordinates providing nursing care and evaluates the effectiveness of team activities;
May provide for the continuity of care by promoting referrals to other community agencies;
Coordinates plans for service with nutritionists, social workers, physical therapists, physicians and other professional workers concerned with individual and family health care;
Counsels and guides individuals and families towards self-help in recognition and solution of physical, emotional and environmental health problems;
Provides nursing services in clinics and schools as assigned;
Teaches classes, addresses groups, and participates in community planning related to nursing and health;
Coordinates investigation, follow up, reporting and education of communicable and vaccine preventable diseases.

FULL PERFORMANCE KNOWLEDGE, SKILLS, ABILITIES AND PERSONAL

CHARACTERISTICS: Thorough knowledge of current nursing practice; thorough knowledge of the epidemiological approach to the prevention and control of disease; working knowledge of the administrative organization of community facilities; skill in the application of current nursing procedures and techniques of patient care as well as the nursing process; ability to plan and coordinate nursing care for individuals, families and groups; ability to communicate effectively; ability to establish and maintain cooperative working relationships; ability to accept and utilize guidance; ability to perform duties in accordance with ANA Code for Professional Nurses; physical and mental condition commensurate to the demands of the position.

(cont.)

MINIMUM QUALIFICATIONS:

Possession of a license issued by the State of New York to practice as a Registered Professional Nurse and:

- a. A Bachelor's degree in a health or human services; or
- b. Two years of experience in home health care.

Civil Service Law, Section 22: Certification for positions. Before any new position in the service of a civil division shall be created or any existing position in such service shall be reclassified, the proposal therefore, including a statement of the duties of the position, shall be referred to the municipal commission having jurisdiction and such commission shall furnish a certificate stating the appropriate civil service title for the proposed position or the position to be reclassified. Any such new position shall be created or any such existing position reclassified only with the title approved and certified by the commission. Effective 1978.

Warren County Civil Service
1340 State Rte 9, Lake George, NY 12845
New Position Duties Statement

Department head or other authority requesting the creation of a new position, prepare a separate description for each new position to be created except that one description may cover two or more identical positions in the same organizational unit.
Forward one typed copy to this Commission.

1. Department **Health Services** Bureau, Division, Unit or Section **Municipal Center Lake George** Location of Position

2. Description of Duties: Describe the work in sufficient detail to give a clear word picture of the job. Use a separate paragraph for each kind of work and describe the more important or time-consuming duties first. In the left column, estimate how the total working time is divided.

Percent of Work Time
100%

Job Duty

please see attached job description

(Attach additional sheets if more space is needed)

Names and Titles of Persons Supervising this position (General, Direct, Administrative, etc.)

<u>Name</u>	<u>Title</u>	<u>Type of Supervision</u>

4. Names and Titles of Persons Supervised by Employee in this position

<u>Name</u>	<u>Title</u>	<u>Type of Supervision</u>
None		

5. Names and Titles of Persons doing substantially the same kind and level of work as will be done by the incumbent of this new position

<u>Name</u>	<u>Title</u>	<u>Location of Position</u>
all RNs in Dept. table of organization		

6. What minimum qualifications do you think should be required for this position?

Education: High School 4 Years
 College 2-4 yrs Years, with specialization in NURSING
 College _____ Years, with specialization in _____

Experience: (list amount and type)

see job description

Essential knowledge, skills and abilities:

Type of license or certificate required:

NYS Registered Professional Nurse

7. The above statements are accurate and complete.

Date: 5-18-15

Title: DPH/DPS

Signature:

Patricia [Signature]

Certificate of Civil Service Commission

8. In accordance with the provisions of Civil Service Law Section 22, the Warren County Civil Service Department certifies that the appropriate civil service title for the position described is:

Title: REGISTERED PROFESSIONAL NURSE
 Jurisdictional Classification: Non-Competitive

Date:

5/18/15

Signature:

[Signature]

Action by Legislative Body or Other Approving Authority

9. Creation of described position

- Approved
- Disapproved

Date:

Signature:

REGISTERED PROFESSIONAL NURSE

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SPECIAL REQUIREMENTS: Eligibility for a license issued by the State of New York to practice as a Registered Professional Nurse. Possession of the license at the time of appointment. In certain positions, a license can be obtained after appointment but only if work can be performed under the auspices of a licensed Registered Professional Nurse.

RESOLUTION REQUEST FORM NO. 18

Request to Transfer or Sell County Equipment

DEPARTMENT NAME: Health Services

DATE: 05/22/2015

- (a) Purchaser's Name: **Warren County Soil & Water Conservation District**

- (b) Purchaser's Address: **394 Schroon River Road
Warrensburg, NY 12885**

- (c) **Description, Serial Number and/or County Inventory Number** of Item being sold:
Panasonic Toughbook T7 - S#8KKSC80429 - WC#17334

- (d) Amount:
\$0

- (e) Value of County Equipment being transferred or sold:
0 Fully - Depreciated

RESOLUTION REQUEST FORM NO. 10

Request for Transfer of Funds

TO: Amanda Allen, CLERK, WARREN COUNTY BOARD OF SUPERVISORS

SIGNED: Patricia [Signature]

DATE: 5/22/15

	<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
1.	A.4010.110	Health Services-Full Time Salaries	A.4010.130	Health Services -Part Time Salaries	\$20,000.00

Total Transfers **\$20,000.00**

1. To transfer funds from Full time to Part Time salaries to cover the Per Diem nursing being used for CHHA.

CONTINGENT FUND TRANSFER REQUESTS

<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
A.1990 469	Contingent Fund			

Please state reason for transfer request: Total

Please file original request with Clerk of the Board and retain copy for your records