

Health and Human Services Committee

Additional Agenda Item

September 22, 2016

Request Committee Approval:

To authorize Maureen Linehan, RN and Lisa Morton, RN to attend the Provisions for the Quality of Life in Palliative Care, at the Holiday Inn, Utica on November 17, 2016. The cost will be \$110.00 for the first employee and \$90.00 for the second employee, plus meals, tolls, and gas (if needed) paid at the GSA rate upon submission of expense receipts.

Rationale:

We are seeing Palliative Care is an increasing need for individuals with severe chronic or terminal illnesses, and it is important staff receive up to date education and training in dealing with this type of health care delivery.

There are sufficient funds in the budget to cover the expense. The nurses will go and return in one day, but because the cost is over \$100.00, Committee Approval is needed.

Warren County Health Services

Health, Human and Social Services Committee

AGENDA FOR

September 22, 2016

Information Submitted By: Patricia Auer, DPH/DPS

Health and Human Services Committee Members: Sokol, Simpson, Seeber, Frasier, Strough, Vanselow, McDevitt, MacDonald, Braymer

- I. **Committee meeting called to order by Chairman**
Motion to approve minutes of the August 24, 2016 Health Services Committee meeting

- II. **Action Agenda/New Business**

Request Resolution:

To authorize Jodi Brynes, RN to enroll in a job related course entitled Advanced Practice Nursing Capstone Practicum, an online course offered through Chamberlain College of Nursing, and receive reimbursement of 50% of the course cost of \$2582.00 (\$1,291) plus 50% of course fees and books upon completion of the course with a grade of "C" or better, submitted with receipts for verifying costs. This is allowed per CSEA Contract with approved Resolution.

Rationale:

This nurse is working on attaining her Bachelor's Degree in Nursing and this is a required course. Please see the attached course description. (The course description will be transmitted with the agenda information prior to the meeting, but will not be part of the agenda information that is routinely given out at the meeting.)

There are adequate funds in the Health Services 2016 Budget to cover this expense.

Request Resolution:

To amend the 2016 Warren County Budget to reflect a payment of \$963.33 from an insurance company for repairs related to a vehicle which totaled that amount. Please see **Attachment #5**.

Rationale:

This situation was from an accident that was not our fault and the other individual's insurance paid for the repairs.

Request Resolution:

To transfer funds from the Long Term Care Full Time Salary Expense to Health Services Part Time Salary Expense, and to transfer funds from Health Services Full Time Salary Expense to Part Time Salary Expense in the total amount of \$44,718.00. Please see **Attachment #6**.

Request Committee Approval:

To authorize Toni Roth, WIC Program Coordinator to attend the 2016 New York State WIC Managers Workshop in Suffern, New York on October 25-27, 2016.

Rationale:

This is a mandated workshop, and the total cost is 100% covered by the WIC Program grant contract. Approval is needed since it involves over- night stays.

Request Committee Approval:

To authorize Ginelle Jones, Assistant Director of Public Health, to attend the 2016 New York State Association of County Health Officials Public Health Leaders' Summit at 1000 Islands Harbor Hotel in Clayton New York on October 5 – 7, 2016.

Rationale:

The conference offers information on pertinent public health topics that are important for us to assure we have well versed staff. The cost of the conference, with the exception of a \$25.00 Conference Registration Fee, and gas and tolls is fully covered by NYSACHO.

Request Resolution:

To authorize participation in a 5 County grant application involving Essex, Franklin, Hamilton, Washington and Warren Counties for a 2 year period that will target Diabetes reduction and intervention strategies. Essex County will be the lead agency for the grant which will be written using a grant writer. The cost for the grant writer will be shared equally in the amount of \$700.00 for each county utilizing DSRIP (Delivery System Reform Incentive Payment Program) funds. This amount will be the only actual cost to Warren County.

Rationale:

As the committee may recall, 4 of the departments in the county were recently given monies from the DSRIP to be used for participation in special projects and initiatives especially geared toward evidence based regional collaboration. This grant is particularly for local health departments, and the New York State Department of Health is increasingly focusing on regional collaborations when awarding funding. If we are successful with the application, more information will be provided. For now, we are only seeking approval to apply for the grant.

Request Resolution:

To authorize an agreement with Vicky Wheaton-Saraceni to provide grant writing services and project organization services for the above initiative (Please see **Attachment #7** for the Specific Scope of Work). Warren County's share of the fee will be a one- time amount of \$700.00 in a form approved by the County Attorney.

Rationale:

After discussion with Julie Butler, Warren County Purchasing Agent, who reviewed the situation with County Attorney, Brian Reichenbach, this was the plan suggested for handling this initiative.

III. Referral/Pending Items

There are no pending items.

IV. Information for Discussion/Review

Emergency Response and Preparedness Activities: Please see **Attachment #1** for the Reports from the past two months since no report was presented in August.

Status of Referrals: Please see **Attachment #4** for the detailed report. Tammie DeLorenzo, Fiscal and Informatics Coordinator, and Valerie Whisenant, Assistant Director of Patient Services will provide comments at the meeting.

Report of Expenditures, Revenues, Overtime and Per Diem Use for 2016. Please see **Attachment #2.**

Revenue and Expense Comparison Report for 2015 vs 2016: Please see **Attachment #3.** Tawn Driscoll, Fiscal Manager, will be present at the meeting to review the reports and answer any questions.

Other:

Personnel Update:

Nursing recruitment, unfortunately, continues to remain a challenge. Since our last meeting, we have been able to hire two new nurses to fill vacant positions from retirements. One nurse was previously employed by our agency and left, but has returned. We have had one resignation from a nurse who no longer wishes to work full time, but wishes to remain on a per diem basis. We continue to remain very thankful for our per diem nurses, and have been able to accept all referrals.

Budget Review

Please see **Attachment #8** for the Budget Summary Sheet. (to be distributed at the meeting) We will provide a budget overview at the meeting, and answer any questions committee members may have. We will have copies of the entire budget available at the meeting if needed. It is my understanding the budget requests have already been posted for the supervisors to review.

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

VI. Motion to adjourn the Health Services Meeting

Attachments:

- #1** Emergency Response and Preparedness Activities Report
- #2** Report of Expenditures, Revenues, Overtime and Per Diem Use for 2016
- #3** Revenue and Expense Comparison Report for 2015 vs 2016
- #4** Report of Referral Status
- #5** Budget Amendment
- #6** Budget Transfer Request
- #7** Scope of Grant Writing and Project Organization Services
- #8** Budget Summary Sheet (to be distributed at the meeting)

BT ACTIVITY SHEET
BP5 - 7/1/16 - 6/30/17

| Date | Type | Subject/Comments | Attendees | Topic (i.e. Chempack, Drill, Mass Fatality, SNS, Training, Pan Flu, Special Needs) |
|-------------|-------------------------------------|---|-------------------|---|
| 7/29 | NYSDOH Advisory | Email providers NYSDOH Zika Health Advisory | Kathy | ZIKA |
| 8/1 | Fax Blast/email | Faxed NYSDOH Advisory re:Travel, testing and investigating Zika transmission in FL | Kathy | |
| 8/1 | Special Needs Community Involvement | Special Needs Registry recertification letters/emails | Kathy, Jenn (OES) | Special Needs |
| 8/1 | Planning/ NYSDOH requirement | Completed L-3 (LHD Medical Countermeasure Exercise Proposal- BP5) survey | Dan | <i>Drill/exercise</i> |
| 8/1 | HEPC Survey | HEPC Survey Monkey for BP5 Planning | Dan | ALL |
| 8/4 | Municipal Committee | Attended Health and Safety Committee | Dan | |
| 8/4 | WCEPR Plan | Completed edits and hyperlinked Table of Contents | Kathy | Base Plan |
| 8/8 | TTX | Ebola TTX WC Municipal Bld. Communicable Disease and Public Health Response | Dan | Ebola; Pan Flu |
| 8/10 | Planning for L-3 exercise | BP5 Exercise Planning Webinar, Infectious Disease | Ginelle, Dan | Pan Flu/ Infectious Disease |
| 8/11 | Planning for L-3 exercise | BP5 Exercise Planning Webinar, Infectious Disease | Kathy | Pan Flu/ Infectious Disease |
| 8/11 | EVD-4 | EVD Survey Monkey Completed | Dan; Pat B | Pan Flu/Infectious Disease |
| 8/11 | ServNY Recruitment | Developed 30 and 60 second PSAs for ServNY | Kathy | |
| 8/22 | Training | Zika 1 hour Training | Ginelle | Zika |
| 8/23 | Planning | Planned Media Campaign for National Preparedness Month (Sept) | Kathy | All |
| 8/29 | Notification Advisory | Emailed ZIKA Travel Advisory from NYSDOH 8/26 to providers | Kathy | ZIKA |
| 8/31 | Meeting | Meet with Scott Scopcyk, Greater Glens Falls Transit | Dan; Amy H | |
| 9/6 | Outreach and Education | Six Flags GE Employee Health Fair- 3 hours EPR display; about 25 individuals | Dan | All |
| 9/9 | Special Needs | SNR Recert letters emailed and mailed | Kathy | ALL |
| 9/9 | Media- National Prep Month | 3 Press Releases Submitted to Chronicle- NPM Awareness; ServNY Volunteers; Special Needs Registry | Kathy | Special Needs and ALL |
| 9/12 | Update | SNS Plan Updated | Dan | SNS |
| 9/13 | Capital District | BT Coordinator Meeting | Dan | |
| 9/15 | Deliverable | L-9 Cascading Drill- LTC Facilities | Dan | Notification Drill |
| 9/16 | MediaOutreach | PSAs submitted to Regional Radio Group- ServNY and SNR | Kathy, Dan | ALL |

Attachment #1

WARREN COUNTY HEALTH SERVICES BUDGET ANALYSIS
REVENUE AND EXPENDITURES FOR 2016 AS OF 9/18/2016 4:03:23 PM

FUND(S): A, CL, D, DM, EF, GI, MS, SD, V
 CODE(S): 4010, 4013, 4016, 4054, 4190, 4018, 4189

| EXPENSES | 2016 BUDGETED | | 2016 YTD ACTUAL | | 2015 Prior Year Totals | |
|-------------------------|------------------------|------------------------|-------------------------------|--|------------------------|--|
| | | | | | | |
| Salaries - Regular | \$2,750,683.00 | | \$1,720,612.61 | | \$2,741,583.99 | |
| Salaries - Overtime | \$133,500.00 | | \$71,626.50 | | \$129,253.40 | |
| Salaries - Part Time | \$374,033.00 | | \$226,764.70 | | \$293,525.04 | |
| 100's PERSONAL SERVICES | \$3,258,216.00 | | \$2,019,003.81 | | \$3,164,362.43 | |
| 200's EQUIPMENT | \$87,225.00 | | \$2,483.84 | | \$18,161.90 | |
| 400's CONTRACTUAL | \$6,008,806.07 | | \$2,933,220.98 | | \$5,893,074.64 | |
| 800's EMPLOYEE BENEFITS | \$1,631,009.00 | | \$1,093,618.83 | | \$1,710,053.82 | |
| TOTALS | \$10,985,256.07 | | \$6,048,327.46 | | \$10,785,652.79 | |
| REVENUES | 2016 BUDGETED | 2016 YTD ACTUAL | 2015 Prior Year Totals | | | |
| | \$8,855,922.09 | \$3,677,462.00 | \$8,735,061.81 | | | |

Notes: We are currently working on closing the month of August 2016, for Health Services and MCH programs.

Warren County Health Services
Salaries Comparison

2015 vs 2016
 as of 9/4/16 Payroll

| | YTD 2016 | YTD 2015 | YTD 15v16 | % Change | Total Budget 2016 | Total Actual 2015 |
|--------------------------------------|-----------------------|-----------------------|----------------------|---------------|-----------------------|-----------------------|
| Total of All Depts | | | | | | |
| Regular Salaries | \$1,720,612.61 | \$1,927,126.27 | -\$206,513.66 | -10.72% | \$2,785,683.00 | \$2,741,583.99 |
| Overtime Salaries | \$71,626.50 | \$89,407.39 | -\$17,780.89 | -19.89% | \$133,500.00 | \$129,253.40 |
| Part Time Salaries | \$226,764.70 | \$198,925.18 | \$27,839.52 | 13.99% | \$339,033.00 | \$293,525.04 |
| TOTALS | \$2,019,003.81 | \$2,215,458.84 | -\$196,455.03 | -8.87% | \$3,258,216.00 | \$3,164,362.43 |
| % current YTD Salary to Total Budget | 61.97% | 70.01% | | | | |

*Source: Detail G/L report for all Salary Category from 1/1/XX-9/4/XX

Overall, total salaries are \$196,455.03 less than total 2015 Salaries. Due to staffing shortages in nursing, per diem nurses have been utilized to cover referrals, therefore increasing the Part time salary category and reducing the Full time and Overtime salary categories showing overall a 8.87% reduction in salary from 2015.

**Warren County Health Services
Revenue and Expense Comparison 2016 vs 2015**

| EXPENSES | 2016 YTD Actual as of 9/18/16 G/L | 2015 YTD Actual as of 9/18/15 G/L | Variance |
|-------------------------|---|---|-----------------------|
| Salaries - Regular | \$1,720,612.61 | \$1,927,126.27 | (\$206,513.66) |
| Salaries - Overtime | \$71,626.50 | \$89,407.39 | (\$17,780.89) |
| Salaries - Part Time | \$226,764.70 | \$198,925.18 | \$27,839.52 |
| 100's PERSONAL SERVICES | \$2,019,003.81 | \$2,215,458.84 | (\$196,455.03) |
| 200's EQUIPMENT | \$2,483.84 | \$18,291.58 | (\$15,807.74) |
| 400's CONTRACTUAL | \$2,933,220.98 | \$3,295,105.45 | (\$361,884.47) |
| 800's EMPLOYEE BENEFITS | \$1,093,618.83 | \$1,273,716.60 | (\$180,097.77) |
| TOTALS | \$6,048,327.46 | \$6,802,572.47 | (\$754,245.01) |

| REVENUES | 2016 YTD ACTUAL | 2015 Prior Year to Date Totals | Variance |
|----------|-----------------------|--------------------------------------|-----------------------|
| | \$3,677,462.00 | \$4,108,803.97 | (\$431,341.97) |

Notes:

It should be noted, reflected above for comparison are financials as of 9/18/15 to compare to our current of 9/18/16.

Salaries: (please see previous page) Overall are \$196,455.03 or 8.87% below 2015. Full time and overtime salaries are below 2015 YTD salaries while Part time salaries are 13.99% above 2015. This correlates with the per diem staff that continue to be utilized to assist in nursing shortage coverage and the fact that staff has saved on Overtime expense by utilizing compensation time in lieu of overtime. Overall, 2016 salaries are 61.97% of the budget while last year at this time we were at 70.01% for total budgeted salaries.

Expenses: Contractual expenses for 2016 remain below 2015 primarily due to the timing of expenses paid for the Preschool and Early Intervention programs. Also to note , the Long Term Care program no longer has any patients due to the fact the State has reassigned duties for this program, therefore less expenses year to date.

Employee Benefits:

Employee benefits are below last year by \$180,098 and correlates with the nursing position shortages that we have experienced. Also to note, utilizing Per Diem staff saves in fringe benefit expense.

Revenues:

Revenues for 2016 are below 2015 for many reasons. One being that we no longer have the Long Term Care Program. Also our CHHA has seen some decrease in referrals from the previous year due to competition now in the area and we have had decreases in payments from both Medicare and Medicaid based on fee schedule.

Warren County Health Services
Patient Evaluations
CHHA Division

| 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 | 129 | 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 |
| Total Evals per month | 192 | 161 | 194 | 159 | 181 | 147 | 177 | 172 | 155 | 158 | 157 | 175 |

| 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 | 122 | 109 | 122 | 111 | 99 | 104 | 106 | 102 |
| SN IV eval | 9 | 6 | 8 | 13 | 5 | 7 | 8 | 3 | 9 | 5 | 1 | 8 |
| PRI & CDPAP | 6 | 5 | 5 | 6 | 5 | 2 | 2 | 7 | 1 | 1 | 1 | 5 |
| UASNY | 18 | 15 | 23 | 16 | 10 | 13 | 23 | 10 | 14 | 15 | 14 | 17 |
| SN Evals per month | 155 | 136 | 150 | 144 | 142 | 131 | 155 | 131 | 123 | 125 | 122 | 132 |
| PT Evals | 80 | 75 | 94 | 80 | 71 | 82 | 80 | 70 | 73 | 75 | 65 | 67 |
| PT only | 25 | 26 | 34 | 30 | 31 | 24 | 26 | 31 | 34 | 29 | 24 | 17 |
| Total Evals per month | 180 | 162 | 184 | 174 | 173 | 155 | 181 | 162 | 157 | 154 | 146 | 149 |

| CATEGORY | 01/2016 | 02/2016 | 03/2016 | 04/2016 | 05/2016 | 06/2016 | 07/2016 | 08/2016 | 09/2016 | 10/2016 | 11/2016 | 12/2016 |
|------------------------------|-------------|------------|-------------|------------|-------------|------------|-------------|------------|----------|----------|----------|----------|
| SN eval | 102 | 111 | 99 | 106 | 104 | 102 | 120 | 123 | | | | |
| SN IV eval | 9 | 6 | 12 | 8 | 10 | 10 | 4 | 10 | | | | |
| PRI | 4 | 6 | 1 | 7 | 6 | 3 | 6 | 2 | | | | |
| UASNY | 19 | 11 | 11 | 17 | 13 | 9 | 13 | 12 | | | | |
| SN Evals per month | 134 | 134 | 123 | 138 | 133 | 124 | 143 | 147 | 0 | 0 | 0 | 0 |
| PT Evals | 76 | 76 | 62 | 66 | 68 | 77 | 69 | 82 | | | | |
| PT only | 25 | 26 | 19 | 23 | 18 | 20 | 20 | 27 | | | | |
| Total Evals per month | 159 | 160 | 142 | 161 | 151 | 144 | 163 | 174 | 0 | 0 | 0 | 0 |
| Difference | -12% | -1% | -23% | -7% | -13% | -7% | -10% | 7% | | | | |

Attachment B4

RESOLUTION REQUEST FORM NO. 19

Application for Approval to Enroll in Job-Related Courses by Employee

1. Employee's Name: Jodi Brynes
2. Position: RN
3. Department: WCHC
4. Course Title: RN Capstone Course
5. Institution or School: Chamberlain College of Nursing
6. How Course Relates to Current Position: Synthesis course + requires students to demonstrate mastery skills learned throughout program. Including using Evidence Based Practices.
7. Starting Date: 11/07/2016
8. Completion Date: 12/31/2016
9. Cost: 2,582.00
10. Employee's Signature: Jodi Brynes Date: 08/02/2016
11. Supervisor's Comments (Approval/Denial): required course
Supervisor's Signature: L. Denise Lester Date: 8/3/16
12. Department Head's Comments (Approval/Denial):
Department Head's Signature: Patricia Date: 9/2/16
13. Committee's Recommendation:
Committee Chairman's Signature: Matthew Hill Date: September 22, 2016
Signature: _____ Date: _____
Chairman of the Board of Supervisors

If approved by Committee, and resolution approving the course if adopted by the Board of Supervisors, candidate may enroll and be eligible for 50% reimbursement for costs as itemized in Item #9. Employee must complete the course with at least a "C", its equivalent, or better. Employee then submits a voucher with receipts verifying costs as listed and a copy of their final grade.



| Student View AL23Txc2 as of 07/27/2016 at 21:24 | | | |
|---|--------------|------------------------|--------------------------------|
| Student | Brynes, Jodi | Level | Chamberlain Undergraduate |
| ID | D40430753 | Campus | Online |
| Class | Senior | Degree | Bachelor of Science |
| Cumulative GPA | 3.90 | Program | Nursing RN_BSN_US (Default) |
| Residence | Domestic | Concentration | No Concentration |
| Visa | | College | Chamberlain College of Nursing |
| | | Previous Degree | |

Estimated Degree Progress



The Degree Progress Bar is not a percentage of credits completed. The Degree Progress Bar is an indication of requirement check boxes complete and may include in-progress as well as pre-registered courses. The Degree Progress Bar should only be used as an estimation of program completion and is not an official designation nor does it imply that financial or other graduation requirements have been met.

Credits Required: 129 Credits Completed: 123

Legend

- Complete
- Not Complete
-  Complete except for classes in-progress
-  Nearly complete - see advisor
- (T) Transfer Class
- @ Any course number
- EXP CRS Expired Course

Bachelor of Science RN_BSN_US Catalog Term: May 2015

- 2.0 GPA requirement met
- Program Requirements

Nursing RN_BSN_US Catalog Term: May 2015 Credits Required: 129
Credits Applied: 129

Unmet conditions for this set of requirements: A minimum of 32 credits must be taken in residence. You currently have 30, you still need 2 more credits.

| | | | | | |
|-------------------------------------|---|--------------|--|--------|-----------|
| <input checked="" type="checkbox"/> | CHAMBERLAIN COLLEGE OF NURSING ARTICULATION | | | | |
| <input checked="" type="checkbox"/> | CCAP Liberal Arts Credits | CRLA 37 | General Ed Credit 37 Hours | PRX 37 | May 2015 |
| | | Satisfied by | Associate De - Associate Degree in Nursing - Adirondack Cmty College | | |
| <input checked="" type="checkbox"/> | CCAP Nursing Credits | CCNR 45 | Chamberlain Nursing 45 Credits | PRX 45 | May 2015 |
| | | Satisfied by | Associate De - Associate Degree in Nursing - Adirondack Cmty College | | |
| <input checked="" type="checkbox"/> | ENGLISH, MATH, SOCIAL SCI & HUMANITIES | | | | |
| <input checked="" type="checkbox"/> | Advanced Composition | ENGL 147N | Advanced English Composition | TA- 3 | May 2015 |
| | | Satisfied by | WRTG10700 - Advanced Composition - Ithaca College | | |
| <input checked="" type="checkbox"/> | Algebra for College Students | ELTV 1TR | Elective & Support Transfer | TB 4 | May 2015 |
| | | Satisfied by | WRTG31200 - Professional Writing - Ithaca College | | |
| <input checked="" type="checkbox"/> | Statistics | MATH 221N | Statistics for Decision-Making | TB 4 | May 2015 |
| | | Satisfied by | MATH15500 - Basic Statistical Reasoning - Ithaca College | | |
| <input checked="" type="checkbox"/> | Principles of Macroeconomics or Economics | ECON 1TR | Economics Transfer | TA- 3 | May 2015 |
| | | Satisfied by | ECON12200 - Principles of Microeconomics - Ithaca College | | |
| <input checked="" type="checkbox"/> | Cultural Diversity in the Professions | SOCS 350N | Cultural Divrsty in Professns | A 3 | July 2015 |

NR-630: Executive Practicum

3 Credits (Theory .5, Practicum 2.5) – 8/0/120/3

This course emphasizes the application of leadership and management theories and concepts in the role of nurse executive. The student will demonstrate the competencies essential to a nurse leader. The role will be applied and analyzed in a healthcare organizational setting, in collaboration with a nurse-leader mentor. Evidence-based leadership and management strategies will be developed and implemented in the selected organizational environment.

■ Prerequisite: NR-500, NR-501, NR-504, NR-505, NR-506; NR-512; NR-531, NR-532, NR-533, NR-534

NR-640: Informatics Nurse Specialist Practicum I

3 Credits (Theory .5, Practicum 2.5) – 8/0/120/3

This course emphasizes the application of the concepts, principles, and practices of formal informatics project management. The role of the informatics nurse is implemented, applied, and analyzed in a related organizational setting, in collaboration with a mentor.

■ Prerequisite: NR-500, NR-501, NR-504, NR-505, NR-506, NR-512, NR-541, NR-542, NR-543

NR-641: Informatics Nurse Specialist Practicum II

3 Credits (Theory .5, Practicum 2.5) – 8/0/120/3

This course emphasizes the application of nursing informatics models, theories, and concepts in the role of the informatics nurse specialist. Students will demonstrate the knowledge, skills, and competencies of an informatics nurse specialist. The role will be applied and analyzed in a healthcare-related setting, in collaboration with a mentor. An informatics project planned in Practicum I is implemented and evaluated in a selected healthcare-related setting.

■ Prerequisite: NR-500, NR-501, NR-504, NR-505, NR-506, NR-512, NR-541, NR-542, NR-543, NR-640

NR-650: Healthcare Policy Practicum

3 Credits (Theory .5, Practicum 2.5) – 8/0/120/3

This course emphasizes the application of policy analysis, economics and leadership theories and concepts in implementation of the role of the nurse leader in healthcare policy. The student will demonstrate the competencies essential to the nurse leader in healthcare policy. The role will be implemented, applied and analyzed in an organizational or legislative setting, in collaboration with a nurse leader responsible for policy management. Evidence-based healthcare policy strategies will be developed and implemented in the selected organizational or legislative environment.

■ Prerequisite: NR-500, NR-501, NR-504, NR-505, NR-506, NR-512, NR-551, NR-552, NR-553, NR-554

NR-660: Capstone

3 Credits – 48/0/0/3

This capstone course provides an intensive experience in critical analysis, designed to broaden students' perspectives and provide an opportunity for the integration of knowledge gained throughout the curriculum. Students must complete a scholarly project, which synthesizes advanced knowledge and skills to address an area of relevance to professional nursing in leadership or education.

■ Prerequisite: All required core and specialty track courses.

NR-661: APN Capstone Practicum

3 Credits (Theory .4, Clinical 2.6) – 6/0/125/3

The student will synthesize all elements of clinical management skills and knowledge and continue to analyze, apply, and evaluate diverse aspects of patient assessment and healthcare intervention. This precepted clinical practicum will be with an approved provider in an advanced practice setting. Focus topics include clinical management skills, case studies, chart reviews, and practice critique, with a capstone product evidencing increasingly complex clinical management skills.

■ Prerequisite: NR-500, NR-501, NR-503, NR-505, NR-506, NR-507, NR-508, NR-509, NR-510, NR-511, NR-512, NR-601, NR-602, NR-603



SCHEDULE "A"

AUTHORIZATION TO ATTEND MEETING OR CONVENTION

Check one:

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

The Health and Human Services hereby authorizes Toni Roth, WIC Program Coordinator
 (Supervisory Committee) (Employee Name)

to attend 2016 New York State WIC Managers Workshop
 (Name of meeting or organization)

at Crowne Plaza Hotel 3 Executive Blvd Suffern NY 10901
 (Address)

on Oct 25-27, 2016 Mode of transportation to be used car
 (Dates) (County Vehicle or Mass Transportation)

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

Health Services Fleet vehicle

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 \$ 119 x 2 nites = 238 GSA* Rate \$ RM pd by county credit card - meals, tolls and gas paid upon receipt of expenses pd by employee
 Meal costs - GSA* per diem rate \$ 51
 *www.gsa.gov

Date: 9/22/16

Patricia Auer
 Department Head Signature

Date: Sept 22, 2016

[Signature]
 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.
Commissioner

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

Administrative Directive

DATE: July 6, 2016

MEMO LOG NUMBER: NYS WIC 07/16 - # 22

TO: Local Agencies Participating in the WIC Program

SUBJECT: 2016 NYS WIC Managers' Workshop

AUTHOR: Nutrition Section

SUGGESTED DISTRIBUTION: WIC Program Coordinators and VMA Directors

CONTACT PERSON: Regional Office Representative

Cicatelli Associates Inc. has announced the 2016 NYS WIC Managers' Workshop entitled *Through the Looking Glass*. The program will be held 1:00PM – 5:00PM October 25, 2016; 9:00AM – 4:30PM October 26, 2016 and 9:00AM – 1:00PM October 27, 2016 at the Crowne Plaza located at 3 Executive Blvd, Suffern, NY 10901. All WIC Coordinators and VMA Directors are required to attend.

This three day managers' workshop will bring WIC Coordinators and VMA Directors together to reflect on their roles as program leaders. Workshop participants will explore the relationship between VMAs and LAs, and how to work to support WIC participants. Coordinators and Directors will attend break-out sessions in the areas of motivation, coaching, and providing supervision, support, and training to their staff in order to strengthen leadership skills. Lastly, participants will review the NYS WIC State Plan, and will hear examples of how WIC managers are utilizing the metrics introduced in 2015 to improve overall program outcomes and create sustainable program success.

Additional information about workshop registration and hotel reservations can be found on the NYS WIC Training Center website at <http://wictc.caiglobal.org/index.php/registration-2016-managers-workshop>. Participants must have a NEON account to register. A step-by-step user guide can be at <http://wictc.caiglobal.org/index.php/registration-instructions>. Workshop attendees are responsible for making their own reservations and paying for their hotel rooms. For your convenience, a room block has been reserved at the rate of \$112/night for the nights of October 25 and 26 at the Crowne Plaza. To make your reservation please contact the hotel at 1-845-357-4800, and request the group code CIC. Reservations must be made by Monday, October 3, 2016.

If you have any questions about this information, please contact your Regional Office Representative.

Sincerely,

April Hamilton, MBA, MHSA
NYS WIC Director
Bureau of Supplemental Food Programs

NYS WIC Training Center

A Project of CAI

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 [PROGRAM DESCRIPTIONS](#)
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2016 NYS WIC MANAGERS' WORKSHOP



2016 NYS WIC Managers' Workshop

This year's workshop will be held Tuesday-Thursday October 25-27, 2016, at the Crowne Plaza Hotel, 3 Executive Blvd, Suffern, New York, 10901. Hotel website can be found [here](#).

Click [here](#) for the agenda.

A room block has been reserved at the rate of \$112/night for the nights of October 25 and 26 please call 845-357-4800 and request the group code CIC, *reservations must be made by Monday, October 3.*

To register for the workshop please do so [here](#). Everyone planning to attend must register individually by Monday October 3.

2016 NYS WIC Managers' Workshop: Through the Looking Glass

The term "through the looking glass" often refers to self-reflection by looking through a mirror. This three days managers' workshop will bring WIC Coordinators and VMA Directors together to reflect on their roles as leaders, both as collective entities supporting the WIC program and at their individual agencies. We will start by exploring the relationship between VMAs and LAs, and how their synergies can work together in building stronger families and supporting WIC participants. Coordinators and Directors will then engage in some self-reflection on their own leadership skills, followed by opportunities to attend break-out sessions in the areas of motivation, coaching, and providing supervision, support, and training to their staff. We will then review the NYS WIC State Plan, and we will hear examples of how WIC managers are utilizing the metrics introduced in 2015 to improve overall program outcomes and create sustainable program success.

As a result of this training participants will be able to:

- Build motivation around the importance of a strong, collaborative relationship between the WIC local agency and the vendor management staff
- Reflect on their leadership and communication styles and how that impacts overall clinic morale
- Develop enhanced skills in supervision and coaching
- Demonstrate new approaches to team building
- Discuss strategies for how the WIC metrics improved health outcomes in Local Agencies

**there is no registration fee for the workshop. no food or beverage will be provided, meals are on your own*

*WIC is a registered service mark of the U.S. Department of Agriculture for USDA's Special Supplemental Nutrition Program for Women, Infants and Children.

2016 NYS WIC Managers' Workshop Agenda*

Tuesday, October 25, 2016 1:00PM – 5:00PM

- 1:00PM-1:15PM Welcome and Introductions
- 1:15PM-3:45PM Plenary: *Creating Synergy Between WIC Local Agencies and WIC Vendor Management Agencies*
- 3:45-4:45PM *Highlights from the WIC Training Center*
- 4:45-5:00PM Closing and Pros and Cons

Wednesday, October 26, 2016 9:00AM – 4:30PM

- 9:00AM-9:15AM Welcome Back- review of pros and cons
- 9:15AM-12:00PM Plenary: *Achieving Your Leadership Potential*
- 12:00pm – 1:00pm Lunch
- 1:00PM-2:30PM Break out session #1 (90 minutes each)
- 1) How to Effectively Address a Performance Issue with a Staff Member
 - 2) Generations in the Workplace
 - 3) Coaching Skills for Managers
 - 4) WIC Managers Team Building Session
 - 5) DOH Staff Breakout
- 2:30PM-2:45PM – *Transition to next breakout session*
- 2:45PM-4:15PM Break out session #2 (90 minutes each- same options as above)
- 4:15PM-4:30PM Closing and Pros and Cons

Thursday, October 27, 2016 9:00AM – 1:00PM

- 9:00AM-10:30AM Plenary: *Overview of WIC State Plan and Other Initiatives*
- 10:45AM-11:45AM Plenary: *Performance Improvement*
- 11:45AM-12:45PM *WIC Directors Panel on Performance Improvement*
- 12:45PM-1:00PM Closing and Evaluations

*agenda is subject to change

FY 2017 Per Diem Rates for ZIP 10954

(October 2016 - September 2017)

Cities not appearing below may be located within a county for which rates are listed.

To determine what county a city is located in, visit the National Association of Counties (NACO) website (a non-federal website).

The following rates apply for 10954

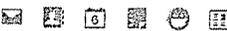
| Primary Destination (1, 2) | County (3, 4) | Max lodging by Month (excluding taxes) | | | | | | | | | | | | M&IE (5) | |
|-------------------------------|---------------|--|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------------|------|
| | | 2016 | | | 2017 | | | | | | | | | | |
| | | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | | |
| Nyack / Palisades | Rockland | \$119 | \$119 | \$119 | \$119 | \$119 | \$119 | \$119 | \$119 | \$119 | \$119 | \$119 | \$119 | \$119 | \$64 |

Footnotes

1. Traveler reimbursement is based on the location of the work activities and not the accommodations, unless lodging is not available at the work activity, then the agency may authorize the rate where lodging is obtained.
2. Unless otherwise specified, the per diem locality is defined as "all locations within, or entirely surrounded by, the corporate limits of the key city, including independent entities located within those boundaries."
3. Per diem localities with county definitions shall include "all locations within, or entirely surrounded by, the corporate limits of the key city as well as the boundaries of the listed counties, including independent entities located within the boundaries of the key city and the listed counties (unless otherwise listed separately)."
4. When a military installation or Government-related facility (whether or not specifically named) is located partially within more than one city or county boundary, the applicable per diem rate for the entire installation or facility is the higher of the rates which apply to the cities and/or counties, even though part(s) of such activities may be located outside the defined per diem locality.
5. *Meals and Incidental Expenses*, see Breakdown of M&IE Expenses for important information on first and last days of travel.

Q All Search

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Compose

Archive Move Delete Spam

Your Oct 25, 2016 Confirmation #81905133 Travel

- Add Gmail, Outlook, AOL and more
- Inbox (9)
- Drafts (1)
- Sent
- Archive
- Spam (110)
- Trash (26)
- Smart Views
 - Important
 - Unread
 - Starred
 - People
 - Social
 - Shopping
 - Travel
 - Finance
- Folders (253)
 - 1A Sewing Klatch
 - 2015 Xmas
 - A123
 - Adapt Study
 - Addresses (1)
 - Adirondack Animal...
 - Advocare
 - Albany Cardiology
 - Amazon (2)
 - AMAZON (1)
 - Amtrak
 - Annie
 - August Mail Order
 - Bookbub
 - Brian Molly
 - BS
 - Careful Quilters
 - Cats
 - CDHS
 - CHASE
 - Chelsea
 - Clean Out
 - Connecting Threads
 - CPP IDENTITY PRO...
 - Craftsy (1)
 - Cricket
 - DebtGuy (6)
 - Early to Rise
 - Ebay
 - Enterprise (1)
 - ETSY
 - Facebook (1)
 - Felicia (15)
 - Fred
 - Funny (3)

Hampton Confirmed <hampton@res.hilton.com> Today at 4:31 PM
To toniroth53@yahoo.com



RESERVE PLAN STA

Hampton Inn Nanuet 260 West Route 59, Nanuet, NY 10954
T: 1 845-623-0900
Oct. 25, 2016 – Oct. 27, 2016
Confirmation Number: 81905133

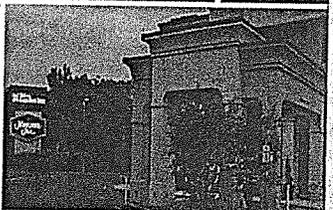
Antoinette Roth,
see you on Oct 25, 2016



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FOR YOUR
Convenience



| Your Room Information: | | Your Rate Information: | |
|---------------------------|-----------------|-------------------------|--|
| 1KING STUDY CHAISE NOSMOK | | HHONORS DISCOUNT | |
| Rooms: | 1 | Rate per night : | |
| Guests: | 1 Adult | Total for Stay per Room | |
| Check In: | Oct 25 3:00 PM | Rate: | |
| Check Out: | Oct 27 12:00 PM | Taxes: | |
| | | Total: | |
| | | Total for Stay : | |

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Meals and Incidental Expenses (M&IE) Breakdown

The separate amounts for breakfast, lunch and dinner listed in the chart are provided should you need to deduct any of those meals from your trip voucher. For example, if your trip includes meals that are already paid for by the government (such as through a registration fee for a conference), you will need to deduct those meals from your voucher. Refer to Section 301-11.18 of the Federal Travel Regulation for specific guidance on deducting these amounts from your per diem reimbursement claims for meals furnished to you by the government. Other organizations may have different rules that apply for their employees; please check with your organization for more assistance.

The table lists the six M&IE tiers in the lower 48 continental United States (currently ranging from \$51 to \$74). If you need to deduct a meal amount, first determine the location where you will be working while on official travel. You can look up the location-specific information at www.gsa.gov/perdiem. The M&IE rate for your location will be one of the six tiers listed on this table. Find the corresponding amount on the first line of the table (M&IE Total) and then look below for each specific meal deduction amount.

The table also lists the portion of the M&IE rate that is provided for incidental expenses (currently \$5 for all tiers).

| Total | Continental Breakfast/ Breakfast | Lunch | Dinner | IE |
|--------------|---|--------------|---------------|-----------|
| \$51 | \$11 | \$12 | \$23 | \$5 |
| \$54 | \$12 | \$13 | \$24 | \$5 |
| \$59 | \$13 | \$15 | \$26 | \$5 |
| \$64 | \$15 | \$16 | \$28 | \$5 |
| \$69 | \$16 | \$17 | \$31 | \$5 |
| \$74 | \$17 | \$18 | \$34 | \$5 |

This table lists the amount federal employees receive for the first and last calendar day of travel. The first and last calendar day of travel is calculated at 75 percent.

| Total | First & Last Day of Travel |
|--------------|---------------------------------------|
| \$51 | \$38.25 |
| \$54 | \$40.50 |
| \$59 | \$44.25 |

RATE THIS PAGE

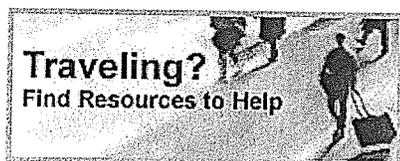
| Total | First & Last Day of Travel |
|--------------|---------------------------------------|
| \$64 | \$48.00 |
| \$69 | \$51.75 |
| \$74 | \$55.50 |

Looking for the foreign and outside the continental United States (OCONUS) breakdown chart? Visit FTR Appendix B. (Note: Appendix B breakdowns do not apply to any locations in the continental United States; use the table listed above.)

The shortcut to this page is www.gsa.gov/mie.

QUESTIONS:

For all travel policy questions, email travelpolicy@gsa.gov.



RELATED GSA TOPICS

- FedRooms®
- Travel E-mail Notification
- POV Mileage Reimbursement Rates

GOVERNMENT LINKS

- Fire Safety Information

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Thruway Authority

Toll & Distance Calculator

**Tolls from
Exit B1 - (I-90) - Albany - Hudson - Rensselaer - I-90 - US Route 9
to
Exit 14 - (I-87) - Spring Valley - Nanuet - NY Route 59**

Additional E-ZPass discount plans are available for commuters, motorcycles, motorhomes and other vehicles.

The table below represents your anticipated tolls.

TOLLS FOR A CLASS 2L VEHICLE

| INTERCHANGES | CASH TOLLS | E-ZPASS TOLLS |
|--|-----------------------|--------------------------|
| Exit B1 - (I-90) - Albany - Hudson - Rensselaer - I-90 - US Route 9 to Woodbury Toll Barrier (a ticket will be issued) | \$5.85 | \$5.56 |
| Total | \$5.85 | \$5.56 |
| E-ZPASS CUSTOMERS WILL SAVE \$0.29 | | |

Approximate Distance: 117.4 miles
Estimated Travel Time: 1 hour, 53 minutes.

Calculate return tolls for Exit 14 to Exit B1

ALONG YOUR TRIP, YOU WILL PASS THE FOLLOWING TRAVEL PLAZAS

| TRAVEL PLAZA | MILEPOST |
|----------------------------|-----------------|
| New Baltimore Travel Plaza | Milepost 127 |
| Parking Area/Rest Area | Milepost 103 |
| Ulster Travel Plaza | Milepost 96 |
| Modena Travel Plaza | Milepost 66 |
| Ramapo Travel Plaza | Milepost 33 |

Thruway Authority

Toll & Distance Calculator

**Tolls from
Exit 14 - (I-87) - Spring Valley - Nanuet - NY Route 59
to
Exit B1 - (I-90) - Albany - Hudson - Rensselaer - I-90 - US Route 9**

Additional E-ZPass discount plans are available for commuters, motorcycles, motorhomes and other vehicles.

The table below represents your anticipated tolls.

TOLLS FOR A CLASS 2L VEHICLE

| INTERCHANGES | CASH TOLLS | E-ZPASS TOLLS |
|--|---------------|---------------|
| Spring Valley Toll Barrier | No Toll | No Toll |
| Woodbury Toll Barrier to Exit B1 - (I-90) - Albany - Hudson - Rensselaer - I-90 - US Route 9 (a ticket will be issued) | \$5.85 | \$5.56 |
| Total | \$5.85 | \$5.56 |
| E-ZPASS CUSTOMERS WILL SAVE \$0.29 | | |

Approximate Distance: 117.4 miles
Estimated Travel Time: 1 hour, 53 minutes.

Calculate return tolls for Exit B1 to Exit 14

ALONG YOUR TRIP, YOU WILL PASS THE FOLLOWING TRAVEL PLAZAS

| TRAVEL PLAZA | MILEPOST |
|----------------------------|--------------|
| Sloatsburg Travel Plaza | Milepost 33 |
| Plattekill Travel Plaza | Milepost 65 |
| Parking Area/Rest Area | Milepost 99 |
| Malden Travel Plaza | Milepost 103 |
| New Baltimore Travel Plaza | Milepost 127 |

Warren County WIC Program
Warren County Municipal Center
1340 State Route 9
Lake George, NY 12845
Office: 761-6425 Fax: 761-7643

2016 NYS WIC Managers' Workshop

October 25 – 27, 2016

Crowne Plaza Suffern – Mahwah
Three Executive Boulevard
Suffern, NY 10901 1-845-357-4800

Attendance is mandatory for all WIC Coordinators and VMA Directors, per 7/6/2016 Administrative Directive – NYS WIC 07/16 - #22, from April Hamilton, NYS WIC Director, Bureau of Supplemental Food Programs.

•Per FY 2017 Per Diem Rates for Zip 10954: <http://www.gsa.gov/portal/category/100120>
& also verified by direct call to hotel on 9/6/16.

Daily room rate = \$119 x 2 = \$238 Total

•Per FY 2015 Meals & Incidental Expenses (M & IE) Breakdown

<http://www.gsa.gov/portal/content/242627>

10/25 Dinner \$23.00

10/26 Bkfast 11.00
Lunch 12.00
Dinner 23.00

11/19 Bkfast 11.00
Lunch 12.00

\$92.00 Total Meals

•Per MapQuest: 179 miles from 1340 State Route 9 Lake George to Hampton Inn, with the Hampton Inn 260 W 59 Nanuet, NY 10954 (845-623-0900).

•Per NYS Thruway – Toll & Distance Calculator

<http://www.thruway.ny.gov/travelers/tolls/calc/trip.cgi>

Rte 90 – Exit B1 to Rte 90 Exit 14B = \$5.56

Rte 90 – Exit 14B to Rte 90 Exit B1 = 5.56

\$11.12 Total Round Trip

Employee will drive her own vehicle with no gasoline cost reimbursement.

\$238.00 Lodging

92.00 Meals

11.12 Tolls

\$341.12 Total request

SCHEDULE "A"

AUTHORIZATION TO ATTEND MEETING OR CONVENTION

Check one:

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

The Health and Human Services (Supervisory Committee) hereby authorizes Ginelle Jones (Employee Name) Assistant Director of Public Health

to attend 2016 NYSACHO Public Health Leaders Summit (Name of meeting or organization)

at 1000 Islands Harbor Hotel Clayton, New York (Address)

on Oct 5-7, 2016 (Dates) Mode of transportation to be used car (County Vehicle or Mass Transportation)

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

Health Services Fleet Vehicle

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

- Notice of meeting or convention including cost.

All costs covered by NYSACHO except gas tolls and \$25.00 conference registration fee

For Overnight Travel

- Room rate \$ _____
 - Meal costs - GSA*per diem rate \$ _____
- *www.gsa.gov

GSA* Rate \$ _____

Date: 9/12/16

Patricia
Department Head Signature

Date: Sept 22, 2016

[Signature]
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.

NYSACHO 2016 Public Health Leaders Summit Agenda

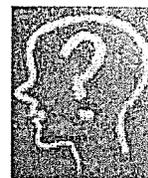
WEDNESDAY, OCTOBER 5, 2016

New Commissioners/Directors Orientation (appointed between October 2015—present)

- 1:00 pm FOUNDATIONS OF PUBLIC HEALTH LAW IN NYS:
Megan Mutolo, JD, Senior Attorney, Bureau of House Counsel,
Division of Legal Affairs, NYSDOH
- 2:00 pm PUBLIC HEALTH LAW IN ACTION: A LOCAL PERSPECTIVE
Jerry Guiliano, JD, Counsel, Nassau County Department of Health
- 3:15 pm ARTICLE SIX: Q AND A WITH NYSDOH OFFICE OF PUBLIC HEALTH PRACTICE
- 4:00 pm ASK A COLLEAGUE: ARTICLE SIX Q AND A WITH LOCAL HEALTH OFFICIALS
- 6:00 pm Dinner (For all attendees staying overnight at facility)

THURSDAY, OCTOBER 6, 2016

- 7:00 am Breakfast
- 8:30 am NEW COMMISSIONERS/DIRECTORS ORIENTATION:
ASK A COLLEAGUE OPEN DISCUSSION
- 10:00 am Welcome
- 10:15 am KEYNOTE: THE FUTURE OF LOCAL HEALTH DEPARTMENTS:
COMMUNICATING WITH POLICY-MAKERS TO MAKE THE CASE FOR PUBLIC HEALTH
Lamar Hasbrouck, Executive Director, NACCHO (invited)
- 11:15 am FACILITATED DISCUSSION: EFFECTIVE COMMUNICATIONS/RELATIONSHIP BUILDING WITH LOCAL
ELECTED OFFICIALS
ANNE MESSENGER, MESSENGER ASSOCIATES
- 12:15 pm Lunch
- 1:15 pm EFFECTIVE COMMUNICATIONS/RELATIONSHIP BUILDING WITH LOCAL ELECTED OFFICIALS—CONTINUED.
- 2:15 pm NETWORKING/OPEN DISCUSSION
- 2:45 pm COMMUNICATING WITH PROVIDERS TO IMPROVE ADULT IMMUNIZATION RATES
Confirmed Panellists include: Dr. Philip Kaplan, Chair, Vaccine Committee, American Academy of
Family Physicians, NYS, Linda Lambert, Executive Director, NY Chapter of the American College
of Physicians, Kathy Febraio, Executive Director, Pharmacists Society of NYS
Invited: District 2 American Congress of OB/GYNs
(Session open to both LHD and State Immunization staff as webcast.)
- 4:00 pm OPEN DISCUSSION
- 6:30 pm Dinner



COMMUNICATION

NYSACHO 2016 Public Health Leaders Summit Registration

Name: Ginelle Jones
Title: Assistant Director of Public Health
Local Health Department: Warren County
Email: jonesg@warrencounty.ny.gov



Registration for overnight accommodations: at the 1000 Islands Harbor Hotel

(All registrations including accommodation reservations are made through NYSACHO-please do not contact the facility directly.)

****Please check both October 5th and October 6th options if you will be staying both nights.**

_____ I will attend the October 5, 2016 New Commissioner/Director Pre-Summit orientation and stay overnight on October 5th. (Appointed on or after October 2015 and have not previously served as a public health director/commissioner in another NYS LHD) OR

I request overnight accommodations for October 5, 2016 and meet the 200 miles plus travel restriction (limited rooms available, rooms allocated after orientation attendees and based on date registration received)

_____ I will attend the Full Summit and need overnight accommodations for October 6, 2016

Commuters ONLY

_____ I will commute to the New Commissioners/Directors Orientation on October 5th

_____ I will commute to the Summit both days

_____ I will commute/attend on October 6, 2016 only

_____ I will commute/attend on October 7, 2016 only

_____ I will stay for evening activities on October 6th, including dinner. If commuting.



REGISTRATION FEE: \$25.00 PAYABLE TO NYSACHO BY PERSONAL CHECK, COUNTY VOUCHER/PO OR COUNTY EFT

NYSACHO cannot accept credit cards. Per state comptroller recommendations for non-profits, NYSACHO no longer accepts cash payments.

Please remit payment to:

NYSACHO
1 United Way
Albany NY 12205

If paying by personal check, please write 2016 PH Summit on the memo line.

All rooms are non-smoking. NYSACHO will work with the facility to accommodate any special requests indicated below regarding accessibility or dietary needs. Also, please use the space below for any travel-related notes, such as arriving late and/or departing early.

Special requests/notes:

Suggested topics for New Commissioner/Director Ask a Colleague sessions: _____

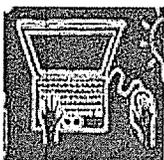
Registration deadline: **September 9, 2016.** (We recommend that you register prior to the September 9th deadline, even if awaiting travel approvals, and request a cancellation if necessary. If this is the case for you, please note tentative reservation in the special notes section. A confirmation email with final details will be sent via email prior to the Summit.)

Registration Deadline: September 9, 2016

Please scan/fax completed form to Cheryl Gerstler, Fax: 518-452-5435 OR register on-line at:

<https://www.surveymonkey.com/r/2016PHLeaderSummit>

Questions? Contact Cristina Dyer-Drobnack, (518) 456-7905 or cristina@nysacho.org



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: Health Services

DATE: 09/22/2016

- (a) Purpose of Request: To authorize participation in a 5 County grant application involving Essex, Franklin, Hamilton, Washington and Warren Counties for a 2 year period that will target Diabetes reduction and intervention strategies. Essex County will be the lead agency for the grant which will be written using a grant writer. The cost for the grant writer will be shared equally in the amount of \$700 for each county utilizing DSRIP (Delivery System Reform Incentive Payment Program) funds. This amount will be the only actual cost to Warren County.
- (b) Details: As the committee may recall, 4 of the departments in the county were recently given monies from the DSRIP to be used for participation in special projects and initiatives especially geared toward evidence based regional collaboration. This grant is particularly for local health departments, and the New York State Department of Health is increasingly focusing on regional collaborations when awarding funding. If we are successful with the application, more information will be provided. For now, we are only seeking approval to apply for the grant.
- (c) Previous Resolution Number: Not applicable

RESOLUTION REQUEST FORM NO. 3

Request for New Contract

DEPARTMENT NAME: Health Services

DATE: 09/22/2016

- (a) Is this a Result of a Bid or Request for Proposal? No
- (b) Purpose of Contract: To establish an agreement with Vicky Wheaton-Saraceni to provide grant writing services and project organization services per the attached scope of (attachment #7) services in a form approved by the County Attorney.
- (c) Name of Contractor: Vicky Wheaton Saraceni
- (d) Address of Contractor: 17 Fairview Road, Hadley, NY 12835-2429
- (e) Contractor's Contact Person and Telephone Number: H – (518)696-2783, C – (518)260-5800, vsaraceni@live.com
- (f) Has or will the Contract be provided, if so, please attach: No, but information attached
- (g) Commencement Date of Contract: 10/24/2016
- (h) Termination Date of Contract: Upon completion of project
- (i) Payment Provisions:
- i) lump sum amount - \$700 Warren County Health Services Share
 - 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.
- (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:

Health Services A 4010.470 contracts

**SCOPE OF GRANT SERVICES
LINKING INTERVENTIONS FOR TOTAL POPULATION HEALTH (L.I.F.T.)
RFA NUMBER QPS-2016-04**

Vicky M. Wheaton Saraceni ("Contractor") having its principal place of business at:

Address: 17 Fairview Road, Hadley, NY 12835
Telephone: 518.696.2783 (home office)
518.260.5800 (mobile)
Email: vsaraceni@live.com
Social Security Number: 111-48-5459

Summary

The Local Health Departments of Essex, Franklin, Hamilton, Warren and Washington will partner together to form a regional Diabetes Prevention Collaborative for the purposes of submitting a response to the New York State Department of Health funding opportunity "*Linking Interventions For Total Population Health.*"

Scope of Services

Contractor agrees to provide the following services for Client:

1. Review and outline sections of the Linking Interventions for Total Population Health funding opportunity #QPS-2016-14.
2. Review organization materials and research/review other background information as necessary.
3. Provide project organization, writing and editing services to Client's internal team.
4. Attend meetings in person and/or by telephone as necessary to accomplish the required work.
5. Provide a complete grant application including required attachments for lead applicant (Essex County) to submit to New York Department of Health.

Attachment #7

SCHEDULE "A"

AUTHORIZATION TO ATTEND MEETING OR CONVENTION

Check one:

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

The Health and Human hereby authorizes Lisa Morton, RN
 (Supervisory Committee) (Employee Name)

to attend Provisions for the Quality of Life in Palliative Care
 (Name of meeting or organization)

at Holiday Inn Utica, New Hartford, NY
 (Address)

on Nov. 17, 2016 Mode of transportation to be used Car
 (Dates) (County Vehicle or Mass Transportation)

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

Head IM Services Fleet vehicle

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

- Notice of meeting or convention including cost.

\$ 110 - Employee 1 Maurice
 \$ 90 Employee 2 Lisa

For Overnight Travel

- Room rate \$ _____
- Meal costs - GSA*per diem rate \$ 51 per day

\$ 51 per day

GSA* Rate \$ _____

gas (if needed)

and tolls paid upon

submission of expense receipt

Date: 9/22/16

Patricia Ann
 Department Head Signature

Date: September 22, 2016

[Signature]
 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.

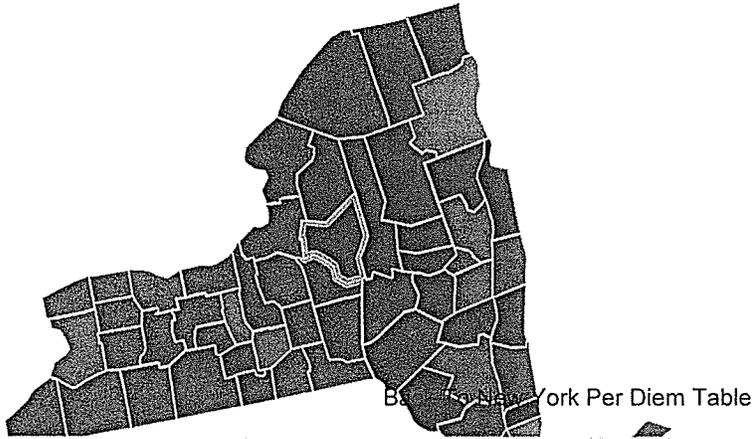
REQUEST FOR USE OF FLEET VEHICLE

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.

2016 GSA Per Diem Rates for Oneida County, New York

2017 2016 2015 2014



Oneida County Per Diems for September 2016:

Lodging:

🏠 \$89.00 / night

Meals & Incidentals:

🍴 \$51.00 / day

These per diem rates are set by the GSA and are used by Federal and local governments as well as many private-sector companies to reimburse employees for business travel expenses incurred within Oneida County, New York (county borders are highlighted on the New York map).

Generally, you will be entitled to one Lodging per-diem of up to \$89.00 to cover your actual hotel costs and one Meals & Incidentals per-diem payment of \$51.00 to cover food and incidentals like parking costs for each full day of travel within Oneida County. 75% of the normal M&IE per diem rates are generally issued for your first and last days of travel.

| Month | Lodging 🏠 | Meals & IE 🍴 | Meals Only 🍴 | Proportional Meals 🍴 | Incidentals 🏠 |
|---------------|--------------|-----------------|-----------------|-------------------------|------------------|
| January 2016 | \$89.00 | \$51.00 | \$46.00 | \$30.00 | \$5.00 |
| February 2016 | \$89.00 | \$51.00 | \$46.00 | \$30.00 | \$5.00 |
| March 2016 | \$89.00 | \$51.00 | \$46.00 | \$30.00 | \$5.00 |
| April 2016 | \$89.00 | \$51.00 | \$46.00 | \$30.00 | \$5.00 |
| May 2016 | \$89.00 | \$51.00 | \$46.00 | \$30.00 | \$5.00 |
| June 2016 | \$89.00 | \$51.00 | \$46.00 | \$30.00 | \$5.00 |

| Month | Lodging Ⓢ | Meals & IE Ⓢ | Meals Only Ⓢ | Proportional Meals Ⓢ | Incidentals Ⓢ |
|-------------------|--------------|-----------------|-----------------|-------------------------|------------------|
| July 2016 | \$89.00 | \$51.00 | \$46.00 | \$30.00 | \$5.00 |
| August 2016 | \$89.00 | \$51.00 | \$46.00 | \$30.00 | \$5.00 |
| September 2016 | \$89.00 | \$51.00 | \$46.00 | \$30.00 | \$5.00 |
| October 2016 | \$89.00 | \$51.00 | \$46.00 | \$30.00 | \$5.00 |

Cities in the Oneida County Per Diem Area

In the Continental United States (CONUS), per diems are assigned on a county-by-county basis. These rates apply to all cities, towns, and other areas that fall within the borders of Oneida County.

The Oneida County per diem rates listed on this page apply to business travel in the following cities: Alder Creek, Boonville, Bridgewater, Camden, Cassville, Clinton, Holland Patent, New Hartford, Oriskany, Remsen, Rome, Sangerfield, Sauquoit, Sylvan Beach, Utica, Verona, Westmoreland, Whitesboro, and other unincorporated areas within Oneida County boundaries.

**** This Document Provided By PerDiem101 ****
 Source: <https://www.perdiem101.com/conus/2016/oneida-new-york>

RESOLUTION REQUEST FORM NO. 7

Request to Amend County Budget*

***If this is the result of a grant award, also complete and submit
Form No. 5 or 6**

DEPARTMENT NAME: Warren County Health Services-Health Services (CHHA) Program

DATE: September 19, 2016

- (a) **Purpose of Amendment:** To amend the 2016 budget to reflect payment received by Health Services (CHHA) from an insurance company for repairs related to a vehicle accident which totaled **\$963.33**.
- (b) Appropriation Code (with title); Object Code (with title) and Amount:
A.4010.2680 Health Services-Insurance Recovery Revenue \$963.33.

Revenue Code (with title), and Amount:
A.4010.441 Health Services-Auto Repair Expense \$963.33.

ATTACHMENT #5

**SCOPE OF GRANT SERVICES
LINKING INTERVENTIONS FOR TOTAL POPULATION HEALTH (L.I.F.T.)
RFA NUMBER QPS-2016-04**

Vicky M. Wheaton Saraceni ("Contractor") having its principal place of business at:

Address: 17 Fairview Road, Hadley, NY 12835
Telephone: 518.696.2783 (home office)
518.260.5800 (mobile)
Email: vsaraceni@live.com
Social Security Number: 111-48-5459

Summary

The Local Health Departments of Essex, Franklin, Hamilton, Warren and Washington will partner together to form a regional Diabetes Prevention Collaborative for the purposes of submitting a response to the New York State Department of Health funding opportunity "*Linking Interventions For Total Population Health.*"

Scope of Services

Contractor agrees to provide the following services for Client:

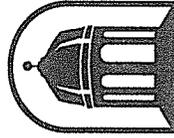
1. Review and outline sections of the Linking Interventions for Total Population Health funding opportunity #QPS-2016-14.
2. Review organization materials and research/review other background information as necessary.
3. Provide project organization, writing and editing services to Client's internal team.
4. Attend meetings in person and/or by telephone as necessary to accomplish the required work.
5. Provide a complete grant application including required attachments for lead applicant (Essex County) to submit to New York Department of Health.

Attachment #7

Provisions for the Quality of Life in Palliative Care

November 17, 2016

Holiday Inn, Utica
1777 Burrstone Road
New Hartford, NY



Bassett Healthcare Network
Valley Health Services

Presented by
The Palliative Care Center at
Valley Health Services, Inc.

Administrator/CEO
Warren County Health Services
Warren County Municipal Center
Lake George, NY 12845-0000

VALLEY HEALTH SERVICES

690 W. GERMAN STREET

HERKIMER, NEW YORK 13350

Phone: (315) 866-3330

Fax: (315) 866-6546

Return Service Requested

Nonprofit
US Postage
PAID
Herkimer, NY
Permit No. 66

Provisions for the Quality of Life in Palliative Care

Provisions for the Quality of Life in Palliative Care Registration Form

8:00 – 8:30 a.m. Registration

8:30 – 10:00 a.m. Opening Keynote – Ann Neumann, BA

Lessons Learned (and Not Learned) from Four Decades of Hospice Care

Explore the history of the hospice from its founding in 1974 through today. Learn about its success and its challenges. What preparations are needed for the hospice movement over the coming decades? Ms. Neumann will also examine the legal updates of advance directive documents.

10:15 – 11:45 a.m. Workshops (select one)

A. An Integrative Approach to Pain and Symptom Management

Kevin Mathews, MD

Join Dr. Mathews as he defines integrative medicine and complementary therapies using chronic pain as a model for their implementation during the provision of palliative care. A discussion of the relevance of nutrition, hypnosis, acupuncture and biofeedback will follow, then attendees will experience a brief exercise in guided imagery.

B. Caring for the Caregiver:

Practical and Fun Routines for Self-Care

Beth Margulis, LMT

Explore the fundamentals of self-care through holistic practices and routine for daily use. Experience techniques to accomplish stress reduction as Ms. Margulis demonstrates and encourages participants to try self-care methods.

C. Development of a Palliative Care and Advance Care Planning Program in Subacute and Long-term Care

Cornelius Foley, MD

Dr. Foley will discuss how palliative care and advance care planning contribute to the changing landscape of healthcare. Delve into effective communication methods to create end-of-life care goals with the incorporation of INTERACT principles. Organizations will benefit from Dr. Foley's expertise in identifying strategies for enhancing palliative care and advance care planning programs.

Name: _____

Title: _____

Organization: _____

Address: _____

Telephone: _____

Payment Enclosed: _____
(make checks payable to Valley Health Services)

Credit Card Payment (MasterCard and Visa only): MasterCard Visa

Amount: _____

Account Number: _____ Expiration Date: _____

Signature: _____

For confirmation, please indicate fax number _____
or email address _____

License/certification number: _____

| | |
|---|----------------|
| If post-marked on or before October 11, 2016: | \$ 110.00 |
| additional staff (first attendee is \$110) from same facility | \$ 90.00 each |
| If post-marked after October 11, 2016: | \$ 130.00 |
| additional staff (first attendee is \$130) from same facility | \$ 100.00 each |
| Student registration fee* | \$ 70.00 |

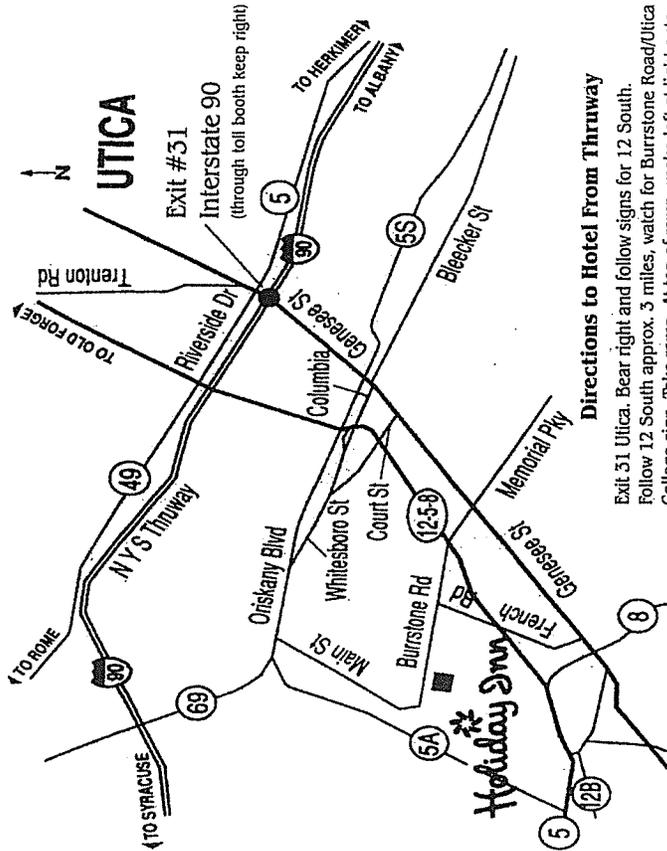
*copy of student ID required for student rate

Return to: Kathy Eisenhut
Valley Health Services
690 W. German Street
Herkimer, NY 13350

If cancellation is necessary, please note that we are unable to refund payment after October 31.

For questions, please contact Kathy Eisenhut (315) 866-3330, ext. 2245, or by email: keisenhut@valleyhealthservices.org.

Holiday Inn[®] Information Sheet



Directions to Hotel From Thruway

Exit 31, Utica. Bear right and follow signs for 12 South. Follow 12 South approx. 3 miles, watch for Burrstone Road/Utica College sign. Take ramp. At top of ramp, make left at light onto Burrstone Road.

Hotel is exactly 1 mile up the road from light on left side.

To the Holiday Inn from the North:

Follow Route 12 South to Burrstone Road – Utica College Exit. At the end of the ramp turn left onto Burrstone Road. Holiday Inn is approximately 1 mile on the left.

To the Holiday Inn from the South:

Follow Route 12 North to the French Road Exit. Turn right onto French Road. At the intersection turn left onto Burrstone Road. Holiday Inn is approximately ½ mile on the left.

Holiday Inn telephone: 315-797-2131

12:00 – 12:45 p.m. Luncheon

1:00 – 2:30 p.m. Workshops (select one)

A. An Integrative Approach to Pain and Symptom Management

Kevin Mathews, MD

Join Dr. Mathews as he defines integrative medicine and complementary therapies using chronic pain as a model for their implementation during the provision of palliative care. A discussion of the relevance of nutrition, hypnosis, acupuncture and biofeedback will follow, then attendees will experience a brief exercise in guided imagery.

B. Caring for the Caregiver: Practical and Fun Routines for Self-Care

Beth Margulis, LMT

Explore the fundamentals of self-care through holistic practices and routine for daily use. Experience techniques to accomplish stress reduction as Ms. Margulis demonstrates and encourages participants to try self-care methods.

C. Development of a Palliative Care and Advance Care Planning Program in Subacute and Long-term Care

Cornelius Foley, MD

Dr. Foley will discuss how palliative care and advance care planning contribute to the changing landscape of healthcare. Delve into effective communication methods to create end-of-life care goals with the incorporation of INTERACT principles. Organizations will benefit from Dr. Foley's expertise in identifying strategies for enhancing palliative care and advance care planning programs.

2:45 – 4:15 p.m. Closing Keynote – Ann Neumann, BA Faith, Hope and Charity: The Role of Belief in End of Life Care

Ms. Neumann's closing keynote probes religious ideas, laws and values placed on end-of-life care. Identify the benefits and detriments as the ideals they propose pertain to diagnosis, patient autonomy, medical decision making and end-of-life planning.

MEET THE PRESENTERS

Ann Neumann, BA, is a Visiting Scholar at The Center for Religion and Media at New York University; she writes the monthly column, "The Patient Body," for the center's online magazine, *The Revealer*. A long time hospice volunteer, Ms. Neumann's work has been published by *The New York Times*, *The Washington Post*, *The Los Angeles Times*, *The Guardian*, *The Nation*, *The Baffler*, *New York Law Review*, and others, including *Guerrica* magazine, for which she is a contributing, nonfiction editor. Her book, *The Good Death: An Exploration of Dying in America*, was published by Beacon Press earlier this year.

Kevin Mathews, MD, is board certified in Family Medicine and Hospice and Palliative Medicine. He is the medical director of the Palliative Care Consultation Service and Hospice & Palliative Care, Inc. in Utica. Dr. Mathews holds faculty appointments at the St. Elizabeth Family Medicine Residency Program in Utica and serves as a clinical Assistant Professor of Family Medicine at both SUNY Health Sciences School of Medicine and the University of New England College of Osteopathic Medicine. He is a graduate fellow of the Program in Integrative Medicine at the University of Arizona and is certified in medical acupuncture. Dr. Mathews has taught and lectured widely on end-of-life care and integrative medicine.

Beth Margulis, BA, LMT, cares for residents as a licensed massage therapist since joining the Valley Health Services' staff in 2002. Beth has extensive experience with guided imagery, aromatherapy, energy work, reflexology and Reiki. In addition to working with the residents, Beth provides massage for United Cerebral Palsy, maintains her own private massage therapy practice and is a massage therapist at Ahsi Day Spa and Salon at the Turning Stone Resort. She graduated from Ladycliff College with a Bachelor of Arts degree in English and Education and is certified in Healing Touch Levels I and II as well as CAPCITAR Multicultural Wellness Education.

Conn Foley, MD, is Chief Medical Officer, Senior Vice President and Chairman of the Department of Medicine at Parker Jewish Institute for Health Care & Rehabilitation. He is also the Medical Director of Parker's Hospice program.

Trained in geriatric medicine and long-term care within both the European and American health care systems, Dr. Foley is a Fellow of the American College of Physicians, the American Geriatrics Society, the Gerontological Society of America and the New York Academy of

Medicine. He is a Board Certified Internist and Geriatrician, an Associate Professor of Medicine at the Albert Einstein College of Medicine, and Nerken Chair in Geriatric Medicine at Parker Jewish Institute, through which Dr. Foley conducts clinical and programmatic research. Dr. Foley has published and presented extensively on geriatric and long-term care issues, and is often called upon by media to comment upon emerging health care issues of older adults. His most recent areas of pursuit include 'transitions of care', electronic medical records (EMRs), Palliative Care and the roles and responsibilities of Medical Directors and Attending Physicians in Subacute Facilities and Nursing Homes.

Bassett Medical Center is an Approved Provider Unit of Continuing Nursing Education by the Northeast Multi-state Division (NE-MSD), an Accredited Approver by the American Nurses Credentialing Center's Commission on Accreditation

This activity is approved for 6.0 contact hours of continuing nursing education. NY01-74

This program has been submitted (but not yet approved) for 15 continuing education clock hours (6 credits) form NAB/NCERS. Call Kathy Eisenhut at 315-866-3330, ext. 2245, for further information.

This program is pending approval by the American Association of Nurse Practitioners.

Approval is pending for 6 hours from NCCAP.

RESOLUTION REQUEST FORM NO. 12

Schedule "A"

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 - WIC Payroll Dept. No: 36.01
Title of Position: WIC Nutrition Facilitator Base Salary of Position: 39,979 Grade: 110
Filling at Step # (If Known): entry level Request to Backfill Due to Promotion: [] Yes [X] No
Budget code and title: A-4013-110 WIC Full Time Salaries Union [X] Non-Union []
This position is vacated due to: [X] Retirement [] Resignation [] Termination [] Promotion [] Other
Employee No.: 6447 Is this position mandated? [] Yes [X] No Is the position reimbursable? [X] Yes [] No
Source of reimbursement: [X] Federal 100 % [] State % [] Other %

CIVIL SERVICE STATUS AND HUMAN RESOURCES DIRECTOR APPROVAL

[] Competitive-active eligible list [X] Competitive-no list (hiring would be provisional) [] Non-Competitive [] Other PCW 9/13/16

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. [Signature]

COUNTY ADMINISTRATOR COMPLETES THIS SECTION

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

Administrator Signature [Signature] Date 9/16/16

BUDGET OFFICER COMPLETES THIS SECTION

- [X] 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 [Signature] Date 9/16/16

SUPERVISORY COMMITTEE COMPLETES THIS SECTION

Name of Committee Health, Human & Social Services

- [] 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 [Signature] Date [Signature]