

**Warren County Health Services
Health, Human and Social Services Committee
AGENDA FOR
May 23, 2018
Information Submitted By: Ginelle Jones, DPH/DPS**

Health and Human Services Committee Members: Frasier, McDevitt, Braymer, Leggett, Loeb, Diamond, Hyde, Magowan, Sokol

Committee meeting call to order by Chairperson

Motion to approve the minutes of the April 24, 2018 Health and Human Services Committee meeting.

I. Action Agenda/New Business

Request Resolution: To approve Health Services' updated Corporate Compliance Policy with the amendments noted therein.

Rationale: Due to recent administrative staffing changes, our department's Corporate Compliance Policy needs updating, as detailed in the April 26, 2018 Corporate Compliance Meeting. Verbiage designating the Corporate Compliance Officer was changed. Instead of designating individuals, verbiage was changed to "Warren County Health Services Corporate Compliance Officer(s) will be designated by the Director of Public Health and Patient Services." In addition, the policy was amended to reflect the Human Resources Director, who is named in Warren County's Corporate Compliance Policy as the Corporate Compliance Officer. (**Attachment #6**)

Request Resolution: To approve Warren County's updated Corporate Compliance Policy with the amendments noted therein.

Rationale: As a result of the anticipated retirement of the County's current Corporate Compliance Officer, Warren County's Corporate Compliance Policy was amended to name the Human Resources Director, as the Corporate Compliance Officer. (Please refer to noted amendments on **Attachment #7**)

Request Resolution: For Budget Amendment to amend the 2018 budget to adjust the Health Services- Home Care Division to reflect \$18, 043.00 received from Adirondack Health Institute. (**Refer to Attachment #5**)

Rationale: Funding was received from Adirondack Health Institute and must be utilized for DSRIP (New York State Delivery Systems Reform Incentive Payment Program) Project related activities. The funding will be utilized to transition to the Electronic Patient Health Record System, utilized by the Certified Home Health Care Agency from Delta Health Technologies' Encore Product to the Crescendo Product. Costs will include equipment, data processing and training.

Request Resolution: To renew the contract with the New York State Department of Health/Health Research Institute to allow for continued funding for the Emergency Preparedness Program for the period of July 1, 2018 through June 30, 2019 in the amount of \$52,096.

Rationale: The grant funds staff to meet the NYS DOH deliverables required for Emergency Preparedness. There was no increase in funding from last year.

Referral/Pending Items

There are no pending items at this time.

II. Information for Discussion/Review

Report of Expenditures, Revenues, Overtime and Per Diem Use for 2018

Please see **Attachment 2**.

Revenue and Expense Comparison Report for 2017 vs 2018

Please see **Attachment 3**.

Tammie DeLorenzo, Clinical and Fiscal Informatics Coordinator, will be present at the meeting to review the reports and answer any questions.

Emergency Response and Preparedness

Please see **Attachment 1** for the monthly report.

Status of Referrals

Please see **Attachment 4** for the detailed report.

Tammie DeLorenzo, Clinical and Fiscal Informatics Coordinator, will provide comments at the meeting.

Meeting/Training: Cortney Hoerter, Maternal Child Health Program nurse will attend the Lactation Counseling Training and Certification Program in Albany, NY, September 17-21, 2018. Anticipated expense includes training, materials, meals, and travel not to exceed \$900. (**Attachment #8**)

Staffing Update

Staffing continues to be a challenge and a work in progress.

Since our last meeting:

WIC Program:

The **WIC Coordinator Nutritionist** position and **WIC Assistant** position (Grade 5) are both anticipated to be filled by late May or early June. Candidates have been selected and notified. WIC staff has done a great job and the staff's efforts and patience are appreciated.

We will now begin to focus on filling the vacant part time **Infant Feeding Advocate** and vacant part time **Nutrition Facilitator** position. Permission was previously requested to fill the vacant positions and the intent to fill forms have already been completed and signed.

Nursing Positions:

We continue to have one nurse out on worker's compensation. The two nurses on extended medical leave have returned.

We anticipate a retirement, effective June 30, 2018. This Home Care nurse position is revenue generating. The intent to fill form has been submitted.

In addition, we plan to fill the Communicable Disease Public Health Nurse with an internal candidate from Home Care. This Home Care nurse position is revenue generating. The intent to fill form has been submitted.

Intent to Fill Forms Submitted:

Part Time Infant Feeding Advocate

Part Time WIC Nutrition Facilitator

Public Health Nurse # 8

Community Health Nurse #15

Tobacco Entitlement Update:

1. Poster contest completed and winners selected, however all were winners.
 - 1st Place- Natalie Zachary from Kensington (4 passes to Great Escape)
 - 2nd Place- Kittery VanGuilder from Hadley Luzerne (2 passes to Fun Spot)
 - 3rd Place- Angella Nguyen from St. Mary's (\$25 Gift Card to Target)
2. Utilizing funding for calendars with all the posters and tobacco free educational messages.
3. Radio spots with HITS 95.9 supporting T21 initiative and tobacco/e-cig free education. *J*

III. Privilege of the floor to discuss any additional items to come before Committee**IV. 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
3. Revenue and Expense Comparison Report for 2017 vs 2018
4. Report of Referrals Status
5. Budget Amendment Requests
6. Health Services Corporate Compliance Policy (with amendments)
7. Warren County Corporate Compliance Policy (with amendments)
8. Authorization to Attend Meeting

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: May 23, 2018

- (a) Purpose of Request: **To approve Health Services' updated Corporate Compliance Policy with the amendments noted therein.**
- (b) Details: **Due to recent administrative staffing changes, our department's Corporate Compliance Policy needs updating, as detailed in the April 26, 2018 Corporate Compliance Meeting. Verbiage designating the Corporate Compliance Officer was changed. Instead of designating individuals, verbiage was changed to "Warren County Health Services Corporate Compliance Officer(s) will be designated by the Director of Public Health and Patient Services." In addition, the policy was amended to reflect the Human Resources Director, who is named in Warren County's Corporate Compliance Policy as the Corporate Compliance Officer. (Please refer to noted amendments on Attachment #6)**
- (c) Previous Resolution Number: **548 of 2013**
- (d) Where are the Funds (if required)? List Budget Code, Object Code, Full Title* and Amount: **N/A**

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

*** as listed in budget and LOGOS**

RESOLUTION REQUEST FORM NO. 20

MISCELLANEOUS

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

DEPARTMENT NAME: Health Services

DATE: May 23, 2018

- (a) Purpose of Request: **: To approve Warren County's updated Corporate Compliance Policy with the amendments noted therein.**
- (b) Details: **As a result of the anticipated retirement of the County's current Corporate Compliance Officer, Warren County's Corporate Compliance Policy was amended to name the Human Resources Director, as the Corporate Compliance Officer. (Please refer to noted amendments on Attachment #7)**
- (c) Previous Resolution Number: **803 of 2010**
- (d) Where are the Funds (if required)? List Budget Code, Object Code, Full Title* and Amount: **N/A**

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

*** as listed in budget and LOGOS**

RESOLUTION REQUEST FORM NO. 3

Request for New Contract

DEPARTMENT NAME: Health Services

DATE: May 23, 2018

- (a) Is this a Result of a Bid or Request for Proposal? No
- (b) Purpose of Contract: **To renew the contract with the New York State Department of Health/Health Research Institute to allow for continued funding for the Emergency Preparedness Program for the period of July 1, 2018 through June 30, 2019 in the amount of \$52,096.**
- (c) Name of Contractor: **New York State Department of Health/Health Research Institute**
- (d) Address of Contractor: **150 Broadway Suite 516, Menands, NY 12204-2719**
- (e) Contractor's Contact Person and Telephone Number: **Scott Bieg 518-408-2063 email: scott.bieg@health.ny.gov**
- (f) Has or will the Contract be provided, if so, please attach: **Letter of Intent attached.**
- (g) Commencement Date of Contract: **7/1/2018**
- (h) Termination Date of Contract: **6/30/2019**
- (i) Payment Provisions: 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.
\$52,096 paid per terms of contract agreement paid upon approval of completed grant deliverables and budget plan.
- (j) Where are the Funds for this Contract? List Budget Code, Object Code, Full Title* and Amount: **OR Capital Project OR Capital Reserve Project Number, Title, and Amount: \$52,096 Bioterrorism A.4189.4401 Revenue \$52,096**
- (k) (e) **Bioterrorism A.4189. various expense codes \$52,096**

Sample: A.1010 470 Legislative Board – Contract Sxx.xx
Capital Project No. H289.9550 480 – Old Jail Renovations Sxx.xx

*as listed in budget and LOGOS

**LHD Public Health Emergency Preparedness Contracts
2018-2019 Base and CRI Awards by LHD**

County	2010 Total Population	Base Award	CRI Award	Total Award	Emergency Placeholder Funding	Total Contract
Albany	304,204	\$157,740	\$146,300	\$304,040	\$100,000	\$404,040
Allegany	48,946	\$52,096		\$52,096	\$50,000	\$102,096
Broome	200,600	\$121,761		\$121,761	\$100,000	\$221,761
Cattaraugus	80,317	\$79,989		\$79,989	\$50,000	\$129,989
Cayuga	80,026	\$79,887		\$79,887	\$50,000	\$129,887
Chautauqua	134,905	\$98,945		\$98,945	\$50,000	\$148,945
Chemung	88,830	\$82,945		\$82,945	\$50,000	\$132,945
Chenango	50,477	\$52,096		\$52,096	\$50,000	\$102,096
Clinton	82,128	\$80,616		\$80,616	\$50,000	\$130,616
Columbia	63,096	\$52,096		\$52,096	\$50,000	\$102,096
Cortland	49,336	\$52,096		\$52,096	\$50,000	\$102,096
Delaware	47,980	\$52,096		\$52,096	\$50,000	\$102,096
Dutchess	297,488	\$155,407	\$62,700	\$218,107	\$100,000	\$318,107
Erie	919,040	\$371,261	\$209,000	\$580,261	\$100,000	\$680,261
Essex	39,370	\$52,096		\$52,096	\$50,000	\$102,096
Franklin	51,599	\$52,096		\$52,096	\$50,000	\$102,096
Fulton	55,531	\$52,096		\$52,096	\$50,000	\$102,096
Genesee	60,079	\$52,096		\$52,096	\$50,000	\$102,096
Greene	49,221	\$52,096		\$52,096	\$50,000	\$102,096
Hamilton	4,836	\$52,096		\$52,096	\$50,000	\$102,096
Herkimer	64,519	\$52,096		\$52,096	\$50,000	\$102,096
Jefferson	116,229	\$92,459		\$92,459	\$50,000	\$142,459
Lewis	27,087	\$52,096		\$52,096	\$50,000	\$102,096
Livingston	65,393	\$52,096		\$52,096	\$50,000	\$102,096
Madison	73,442	\$52,096		\$52,096	\$50,000	\$102,096
Monroe	744,344	\$310,593		\$310,593	\$100,000	\$410,593
Montgomery	50,219	\$52,096		\$52,096	\$50,000	\$102,096
Nassau	1,339,532	\$517,291	\$137,522	\$654,813	\$100,000	\$754,813
Niagara	216,469	\$127,271	\$83,600	\$210,871	\$100,000	\$310,871
Oneida	234,878	\$133,665		\$133,665	\$100,000	\$233,665
Onondaga	467,026	\$214,285		\$214,285	\$100,000	\$314,285
Ontario	107,931	\$89,578		\$89,578	\$50,000	\$139,578
Orange	372,813	\$181,566	\$62,700	\$244,266	\$100,000	\$344,266
Orleans	42,883	\$52,096		\$52,096	\$50,000	\$102,096
Oswego	122,109	\$94,502		\$94,502	\$50,000	\$144,502
Otsego	62,259	\$52,096		\$52,096	\$50,000	\$102,096
Putnam	99,710	\$86,723	\$62,700	\$149,423	\$50,000	\$199,423
Rensselaer	159,429	\$107,462	\$62,700	\$170,162	\$50,000	\$220,162
Rockland	311,687	\$160,339	\$62,700	\$223,039	\$100,000	\$323,039
Saratoga	219,607	\$128,361	\$62,700	\$191,061	\$100,000	\$291,061
Schenectady	154,727	\$105,829	\$62,700	\$168,529	\$50,000	\$218,529
Schoharie	32,749	\$52,096	\$62,700	\$114,796	\$50,000	\$164,796
Schuyler	18,343	\$52,096		\$52,096	\$50,000	\$102,096
Seneca	35,251	\$52,096		\$52,096	\$50,000	\$102,096
St. Lawrence	111,944	\$90,972		\$90,972	\$50,000	\$140,972
Steuben	98,990	\$86,473		\$86,473	\$50,000	\$136,473
Suffolk	1,493,350	\$570,709	\$85,690	\$656,399	\$100,000	\$756,399
Sullivan	77,547	\$79,026		\$79,026	\$50,000	\$129,026
Tioga	51,125	\$52,096		\$52,096	\$50,000	\$102,096
Tompkins	101,564	\$87,367		\$87,367	\$50,000	\$137,367
Ulster	182,493	\$115,472		\$115,472	\$50,000	\$165,472
Warren	65,707	\$52,096		\$52,096	\$50,000	\$102,096
Washington	63,216	\$52,096		\$52,096	\$50,000	\$102,096
Wayne	93,772	\$84,661		\$84,661	\$50,000	\$134,661
Westchester	949,113	\$381,705	\$100,738	\$482,443	\$100,000	\$582,443
Wyoming	42,155	\$52,096		\$52,096	\$50,000	\$102,096
Yates	25,348	\$52,096		\$52,096	\$50,000	\$102,096
Total	11,202,969	\$6,429,356	\$1,264,450	\$7,693,806	\$3,550,000	\$11,243,806

Jones, Ginelle

From: CDRO-LHU BT Coordinator <CDRLHUBT-L@LISTSERV.HEALTH.STATE.NY.US> on behalf of Townsend, Kristen A (HEALTH) <kristen.townsend@HEALTH.NY.GOV>
Sent: Friday, April 27, 2018 3:56 PM
To: CDRLHUBT-L@LISTSERV.HEALTH.STATE.NY.US
Subject: FW: IMPORTANT NOTICE: Public Health Emergency Preparedness Contracts
Attachments: 2018-2019 LHD Allocations.pdf; Meeting Expense Guidelines - EP 20171124 .pdf; 2018-2019 Reminders & Requirements for Developing Your Budget.pdf; 2018-2019 LHD with CRI funds Budget Template.xls; 2018-2019 LHD Budget Template.xls

FYI-The Public Health Emergency Preparedness contract information was sent out today, I know last year some of you were not included.

Kristen Townsend, MS EAPS, MEP
Public Health Emergency Preparedness Representative-Capital District
Office of Health Emergency Preparedness (OHEP)
New York State Department of Health (NYSDOH)
800 North Pearl Street- Room 322
Menands, NY 12204-2719
(Desk) 518-402-6214

From: doh.sm.NYSPHEP
Sent: Friday, April 27, 2018 3:54 PM
To: doh.dl.LHD2 <LHD2-L@listserv.health.state.ny.us>; Sarah@nysacho.org
Cc: Lopez, Luis A (HEALTH) <luis.lopez@health.ny.gov>; Desrosiers, Marie J (HEALTH) <marie.desrosiers@health.ny.gov>; Primeau, Michael J (HEALTH) <michael.primeau@health.ny.gov>; Kash, Megan T (HEALTH) <megan.kash@health.ny.gov>; Sharp, Shaun M (HEALTH) <Shaun.Sharp@health.ny.gov>; Blackwood, Fayola T (HEALTH) <Fayola.Blackwood@health.ny.gov>; Townsend, Kristen A (HEALTH) <kristen.townsend@health.ny.gov>; Ethier, Shannon M (HEALTH) <Shannon.Ethier@health.ny.gov>
Subject: IMPORTANT NOTICE: Public Health Emergency Preparedness Contracts

Dear Partners in Emergency Preparedness,

On July 1, 2018 we will begin a new Public Health Emergency Preparedness contract.

Attached please find documents to assist with the development of your budget for the period of 7/1/18 – 6/30/19. Please develop your budget request utilizing your 2017-2018 approved budget as a guide. Use the Excel template provided in this email. The first tab of the template includes instructions. Please do not use old versions of the template, as recent changes have been made.

This contract will have a maximum reimbursable amount equal to your total Base and CRI awards. Please develop your budget using the "Total Award" amount in the attached funding table. This contract will also include emergency placeholder funding in the 'Restricted' budget category. (See the funding table.) The placeholder funds will allow us to make additional funds available quickly during a public health emergency.

Important Change

Budgets and budget modifications must be signed. Please sign and date at the bottom of the summary budget page. When sending your budgets requests, please include a scanned pdf of the signed summary page along with your Excel budget file.

In an effort to make this process as easy as possible, the documents listed below are attached to assist you in preparing your budget:

- 2018-2019 Funding Table
- Budget Template for 2018-2019; Base only (Excel)
- Budget Template for 2018-2019; Base and CRI (Excel)
- Meeting Expense Guidelines
- Budget Reminders and Requirements

Contract deliverables for 2018-2019 will be sent under separate cover.

Please review the Budget Reminders and Requirements document. This provides important information regarding changing requirements and suggestions for avoiding issues when developing your budget.

If your budget includes equipment, cell phones, AirCards, internet services, software, etc.: Provide the name, title and role of staff that will be assigned the items, and a justification for need. Confirm that the items will be used 100% for activities supporting this contract. If the items or services are used for other purposes then the total cost must be allocated appropriately to all programs that will benefit. Please provide three vendor quotes for any equipment with a unit cost of \$5,000 or more.

Please return the **completed budget** and **signed summary page** electronically to nyspheap@health.ny.gov as soon as possible, but no later than **6/1/18**. If you are unable to meet this deadline, please notify us at nyspheap@health.ny.gov.

Thank you.

Scott Bieg
Grants Administration
150 Broadway, Suite 516
Menands, NY 12204-2719
(518) 408-2063
nyspheap@health.ny.gov

To unsubscribe from CDRLHUBT-L, send email to:
CDRLHUBT-L-signoff-request@listserv.health.state.ny.us

ATTACHMENT #1
BT ACTIVITY SHEET
BP1 - 7/1/17 - 6/30/18

Page 1

Topic Color Codes

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

4/3/18	Mandated Exercise	CD exercise Mass vaccination clinic response to Hep A outbreak	All PH Staff available plus 5 volunteers	Full Scale Exercise
4/6/18		Completed all necessary surveys required by NYSDOH as part of exercise documentation except ARR/IP	Dan, J'nelle	
4/10/18	Meeting	Attended Regional Public Health EPR Coordinators Meeting in Ballston Spa	Dan, J'nelle	
4/12/18	MCM	Toured Queensbury POD location to update POD Security Form	Dan, J'nelle	
4/17/18		Submitted draft AAR/IP for Full Scale Exercise for review	Dan	
4/18/18	In-Person	Tabletop Exercise @ Glens Falls Hospital	J'nelle	Drill
4/25/18	Meeting	Local EPR Committee Meeting	Dan J'nelle	
5/7/18	Webinar	CTI – IHANS Certification Training	J'nelle	Training
5/8/18	Meeting	Monthly BT Coordinators Meeting Ballston Spa	Dan, J'nelle	
5/15	In-person	Required Quarterly HEPC State Meeting	Dan	
5/16		TTX @ GFH Flooding	J'nelle	
5/16		ServNY Volunteer Coordinator Monthly Meeting	Dan, J'nelle	
5/17	Webinar	COOP FEMA Training – IS546	J'nelle	Training
5/18	Webinar	COOP FEMA Training IS-547	J'nelle	Training
5/23	Webinar	RTC COOP Web BP-1 NYS COOP training	J'nelle	Training
5/24	In-Person	CDR Pediatric Training Seminar (care for PEds patients in a disaster)	J'nelle, Courtney	Training

WARREN COUNTY HEALTH SERVICES BUDGET ANALYSIS

REVENUE AND EXPENDITURES FOR 2018 AS OF 5/11/2018 5:35:21 PM

FUND(S): A, CL, D, DM, EF, GI, MS, SD, V

CODE(S): 4010, 4013, 4016, 4054, 4190, 4018, 4189

EXPENSES	2018 BUDGETED	2018 YTD ACTUAL	2017 Prior Year Totals
Salaries - Regular	\$2,673,005.00	\$792,400.94	\$2,254,816.25
Salaries - Overtime	\$132,000.00	\$29,258.06	\$99,343.63
Salaries - Part Time	\$502,135.00	\$136,069.84	\$416,387.62
100's PERSONAL SERVICES	\$3,307,140.00	\$957,728.84	\$2,770,547.50
200's EQUIPMENT	\$78,456.50	\$4,263.16	\$70,272.53
400's CONTRACTUAL	\$6,159,215.35	\$1,110,991.60	\$5,564,401.96
800's EMPLOYEE BENEFITS	\$1,618,575.00	\$492,678.62	\$1,455,471.45
TOTALS	\$11,163,386.85	\$2,565,662.22	\$9,860,693.44

REVENUES	2018 BUDGETED	2018 YTD ACTUAL	2017 Prior Year Totals
	\$8,863,101.76	\$1,196,390.89	\$7,616,169.70

Note: We are in the process of closing month end for April for the Homecare and Maternal Child Health Programs. We have accrued the WIC March voucher for \$37,758 and the Rabies first quarter 2018 for \$11,984.20.

Warren County Health Services

Salaries Comparison

2017 vs 2018

as of 4/29/18 Payroll

	YTD 2018	YTD 2017	YTD 18v17	% Change	Total Budget 2018	Total Actual 2017
Total of All Depts						
Regular Salaries	\$792,400.94	\$747,784.64	\$44,616.30	5.97%	\$2,673,005.00	\$2,254,816.25
Overtime Salaries	\$29,258.06	\$34,863.73	-\$5,605.67	-16.08%	\$132,000.00	\$99,343.63
Part Time Salaries	\$136,069.84	\$140,713.82	-\$4,643.98	-3.30%	\$502,135.00	\$416,387.62
TOTALS	\$957,728.84	\$923,362.19	\$34,366.65	3.72%	\$3,307,140.00	\$2,770,547.50
% current YTD Salary to Total Budget	28.96%	33.33%				

Source: Detail G/L report for all Salary Category from 1/1/XX-4/29/XX

Overall, total salaries are \$34,366.65 more than total 2017 Salaries due to the annual negotiated contracted increases and additional expenses for retirements.

Overtime and Part time salaries are lower YTD for 2017 compared to 2018. We have lost a few per diem nursing staff and have recently hired three full time nurses.

Overall, Salaries are up slightly by 3.72% compared to 2017. At this time, we currently are 28.96% of the 2018 budget where in 2017, we were 33.33% of the final actual expenses.

**Warren County Health Services
Revenue and Expense Comparison 2018 vs 2017
as of 5/11/18 G/L**

EXPENSES	2018 YTD Actual as of 5/11/18 G/L	2017 YTD as of 5/11/17 G/L	Variance
Salaries - Regular	\$792,400.94	\$747,784.64	\$44,616.30
Salaries - Overtime	\$29,258.06	\$34,863.73	(\$5,605.67)
Salaries - Part Time	\$136,069.84	\$140,713.82	(\$4,643.98)
100's PERSONAL SERVICES	\$957,728.84	\$923,362.19	\$34,366.65
200's EQUIPMENT	\$4,263.16	\$37,619.85	(\$33,356.69)
400's CONTRACTUAL	\$1,110,991.60	\$1,442,460.06	(\$331,468.46)
800's EMPLOYEE BENEFITS	\$492,678.62	\$528,514.60	(\$35,835.98)
TOTALS	\$2,565,662.22	\$2,931,956.70	(\$366,294.48)

REVENUES	2018 YTD ACTUAL	2017 Prior Year to Date Totals	Variance
	\$1,196,390.89	\$1,163,067.87	\$33,323.02

Notes:

Salaries: (please see previous page) Overall are \$34,366.65 or 3.72% above 2017 as of the 4/29/18 payroll date. Full time salaries are above 2017 YTD salaries while part time and overtime salaries are below 2017. This increase correlates with the annual negotiated contract salary increases and additional retirement costs. Overall, 2018 salaries are 28.96% of budget while this time last year we were at 33.33% of the final total salaries.

Equipment: The variance in equipment expense is primarily related to vehicle purchases made in 2017 for the Homecare. We are expecting 2018 vehicles by June.

Contractual expenses: Expenses at this time for 2018 are below 2017 by \$331,468.46. Due to timing of invoices, this variance is related to both CHHA and Preschool expenses .

Employee Benefits: Employee benefits are below last year by \$35,835.98 and correlates with the the nursing position shortages that we have experienced during the year therefore allowing us to hire per diem employees. As we hire new employees to replace those that have retired, this variance will be less. Also to note, that Retiree Health insurance increases dramitically when an employee retires. Year to date, the 2018 Retiree Health insurance for 5/11/18 is \$10,002 more than 2017(a 9.73% increase)

Revenues:

Revenues are at this time are above 2017 by \$33,323.02.

**Warren County Health Services
Patient Evaluations
CHHA Division**

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	85	106	101	104	
SN IV eval	9	6	12	8	10	10	4	10	4	13	7	11	
PRI	4	6	1	7	6	3	6	2	5	10	3	1	
UASNY	19	11	11	17	13	9	13	12	9	7	12	14	
SN Evals per month	134	134	123	138	133	124	143	147	103	136	123	130	
PT Evals	76	76	62	66	68	77	69	82	69	67	71	65	
PT only	25	26	19	23	18	20	20	27	16	26	21	27	
Total Evals per month	159	160	142	161	151	144	163	174	119	162	144	157	1836

CATEGORY	01/2017	02/2017	03/2017	04/2017	05/2017	06/2017	07/2017	08/2017	09/2017	10/2017	11/2017	12/2017	
SN eval	97	109	124	94	109	86	101	96	101	102	90	93	
SN IV eval	7	6	14	4	3	8	7	7	6	5	8	5	
PRI	3	2	3	4	3	0	6	3	4	1	3	3	
UASNY	16	10	10	12	12	12	9	11	8	14	13	5	
SN Evals per month	123	127	151	114	127	106	123	117	119	122	114	106	
PT Evals	78	47	71	57	64	59	63	61	70	63	68	56	
PT only	27	9	18	16	18	19	18	26	18	17	26	23	
Total Evals per month	150	136	169	130	145	125	141	143	137	139	140	129	1684

CATEGORY	01/2018	02/2018	03/2018	04/2018	05/2018	06/2018	07/2018	08/2018	09/2018	10/2018	11/2018	12/2018	
SN eval	112	88	97	95									
SN IV eval	2	8	5	4									
PRI	3	3	3	1									
UASNY	16	12	10	6									
SN Evals per month	133	111	115	106	0	0	0	0	0	0	0	0	
PT Evals	70	57	63	61									
PT only	19	18	17	19									
Total Evals per month	152	129	132	125	0	0	0	0	0	0	0	0	
	2%	-7%	-37%	-5%									

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-Home Care Division

DATE: May 23, 2018

(a) **Purpose of Amendment:** To amend the 2018 budget to adjust the Health Services – Home Care Division to reflect funds received from the Adirondack Health Institute (AHI) in the amount of **\$18,043.00** which must be used to support the DSRIP (New York State Delivery Systems Reform Incentive Payment Program) Project activities. The Funds will be utilized to transition the Electronic Patient Health Record System utilized by our Certified Home Health Agency from Delta Health Technologies' Encore Product to their Crescendo Product. Costs will include equipment, data processing and training.

(b) Appropriation Code (with title), Object Code (with title) and Amount:
A.4010.428 Health Services-Data Processing \$18,043.00

Revenue Code (with title), and Amount:

A.4010.3426 Health Services—DSRIP Engagement Funds Revenue \$18,043.00.

ATTACHMENT #5

WARREN COUNTY HEALTH SERVICES
CORPORATE COMPLIANCE POLICY

2010, revised 05/2014, 05/2016, 04/2017, 04/2018 (proposed)

Attachment # 6

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Appendix: Federal & New York Statutes Relating To Filing False Claims

INTRODUCTION

Warren County Health Services (WCHS)* is devoted to meeting and maintaining the highest ethical and professional standards and to do so through compliance with all applicable laws in all actions regarding the operation of itself and all affiliates. This commitment and dedication is essential to WCHS achieving its mission and is critical because a significant portion of services are reimbursed through governmental programs which require that WCHS business be conducted with complete integrity and veracity. WCHS will adhere to our Corporate Compliance Program.

To ensure that WCHS operations are being conducted in compliance with applicable laws and the highest ethical standards, WCHS has developed a Compliance Program under the direction of our Compliance Officers. (See next page.)

*Warren County Health Services will be referred to as WCHS throughout this document. Offices are located at the Warren County Municipal Center, 1340 State RT 9, Lake George, NY 12845.

COMPLIANCE OFFICER

The WCHS Corporate Compliance Officer(s) will be designated by the Director of Public Health and Patient Services. Compliance Officer(s) in the course of exercising their duties as employees of WCHS also have a duty to develop, implement, review, maintain, promote, oversee, educate, monitor, audit, receive and give reports, investigate, and respond appropriately.

~~Corporate Compliance Officers:
Assistant Director of Public Health
Clinical and Fiscal Informatics Coordinator~~

Health, Human and Social Services Committee:
Members of the Board of Supervisors of Health, Human and Social Services Committee in the course of exercising their duties also have a duty to comply, promote and oversee, be educated, cooperate, and respond appropriately regarding applicable aspects of the Compliance Program.

Please direct any question, comments or concerns pertinent to Warren County Health Services to: ~~the Corporate Compliance Officer at:
Division of Public Health: Ginelle Jones ADPH
Division of Home Care: Tammie DeLorenzo, Informatics Coordinator~~

Corporate Compliance Officer
Warren County Health Services
1340 State Route 9
Lake George, NY 12845

Tel: 518-761-6580 Fax: 518-761-6422

Warren County Health Services functions as part of the overall Warren County Compliance Program. ~~The Warren County Human Resources Director will act as the County Compliance Officer.~~

~~County Compliance Officer: ——— JoAnn McKinstry~~

GENERAL POLICY

The policy of WCHS is to provide services in compliance with all state and federal laws governing its operation and consistently do so with the highest standards of business and professional ethics. This policy is a sincere commitment to our clients, our staff, our community, and the governmental agencies that regulate WCHS.

All WCHS employees must carry out their duties in accordance with this policy. To assist all employees with their obligation to comply, this manual includes statements of WCHS policy for a number of applicable areas. Conduct that does not comply with these policy statements is not authorized by WCHS and is outside the scope of employment at WCHS.

Any violation of applicable law, policy statements contained in this manual, or deviation from appropriate ethical standards, will subject an employee to disciplinary action, which may include oral or written warning, disciplinary probation, suspension, demotion, dismissal from employment or revocation of privileges. Any supervisor who directs or approves the employee's improper actions, or is aware of those actions but does not act appropriately to correct them, or who otherwise fails to exercise appropriate supervision may also be disciplined accordingly.

If at any time an employee becomes aware of any violation of WCHS policies, he or she must report it in accordance with the reporting requirements of this manual. All persons making such reports are assured that such reports will be treated as confidential to the extent permissible and that such reports will be shared only on a need to know basis. WCHS will take no adverse action against persons making such reports in good faith and without malicious intent whether or not the report ultimately proves to be well founded. If an employee does not report conduct violating WCHS policies, the employee may be subject to disciplinary action up to and including termination of employment.

Laws affecting operation of WCHS activities are complex and many. This manual addresses in general terms only the more important legal and ethical principles affecting WCHS activities. Their mention in this manual is not intended to minimize the importance of other applicable laws, professional standards, or ethical principles. It is not expected that each employee will be fully versed in all laws of permissible activities involved in their work. Therefore, if an employee has a question regarding the legality or propriety of a course of action, and this manual does not answer that question the employee should seek guidance from his or her supervisor or from the Compliance Officer before taking any action.

POLICY STATEMENT

It is WCHS policy to provide high quality care and services to its clients. WCHS believes that state and federal regulations governing WCHS operation provide a baseline of care standards which WCHS strives to exceed in the provision of care and services given to our clients by supplying them and their families with professional care and services.

Each client is entitled to a dignified existence, self determination and the provision of care and services in a manner and in an environment that promotes the maintenance or enhancement of a client's quality of life. It is WCHS policy to protect, promote and foster for each client his/her rights as a client of WCHS.

WCHS has developed policies and procedures to ensure quality of care and the protection and promotion of a client's rights that are to be adhered to by all WCHS staff. It is not the intent of this manual to set forth all such policies and procedures as they are available for review by all staff upon request.

It is the responsibility of all staff to ensure billing and payment for services reflects only those which have been approved and are provided accordingly. Signature on time sheets by clients and staff affirms the veracity of the document.

WCHS policies and procedures with regard to client rights and their care are available from the Compliance Officer or the Director of Health Services.

REFERRALS

Federal and State law prohibit WCHS and its employees from (1) soliciting or accepting or (2) offering or paying remuneration in exchange for referrals of patients eligible for Medicare, Medicaid or another federal health care program. Federal and State law also prohibit (1) the offering or payment or (2) the soliciting or receipt of remuneration in return for directly purchasing, leasing, ordering or recommending the purchase, lease or ordering of any goods, facilities, services or items covered under the benefits of Medicare, Medicaid or other federal health programs. The term "remuneration" broadly covers the transferring of anything of value in any form or manner whatsoever. Remuneration is not limited to bribes, kickbacks and rebates.

These federal and state laws are broadly written to prohibit WCHS and its employees from knowingly and willfully offering, paying, asking or receiving any money or other benefit, directly or indirectly, overtly or covertly, in cash or in kind. These laws are violated even if only one purpose of a payment arrangement is to influence referrals or the procuring of goods or services.

As a result all contracts and arrangements with actual or potential referral sources and all contracts and arrangements with vendors must comply with applicable state and federal laws and regulations. All personal service, management service and consulting service agreements must comply with applicable state and federal laws and regulations. Moreover, any other financial or other business arrangement between WCHS and other health care professionals or providers must be structured to comply with all applicable state and federal laws and regulations.

If questions arise regarding whether a proposed business arrangement, financial arrangement, or contract is in compliance with federal or state law, an employee is required to seek guidance from the Compliance Officers who in turn may seek appropriate guidance from legal counsel.

BILLING and CLAIMS: COST REPORTS

WCHS has an obligation to its clients, third party payers and the state and federal government to exercise diligence, care and integrity when submitting claims for payment. The right to bill the Medicaid program carries a responsibility that may not be abused. WCHS is committed to maintaining the accuracy of every claim it processes and submits. Each of the individuals responsible for entering charges and codes is expected to monitor compliance with applicable billing rules. Any false, inaccurate, or questionable claims should be reported immediately to the employee's supervisor or the Compliance Officer.

False billing is a serious offense. Medicaid rules prohibit knowingly and willfully making or causing to be made any false statement or representation of the material fact in an application for benefits or payment. It is also unlawful to conceal or fail to disclose the occurrence of an event affecting the right to payment with the intent to secure payment that is not due.

With respect to the submission of claims to the Medicaid program, it is WCHS policy that claims must: (1) be accurate and timely submitted, (2) be only for items or services that (a) are medically necessary, (b) fall within the coverage guidelines contained in applicable laws, rules and regulations, and (c) are documented in the clients medical record. In this regard:

1. Prior to submitting a claim for payment, it is necessary to verify that all documentation for services reflected on the claim, such as physician orders and prior approvals, are available in a proper and timely manner.
2. Claims may only be submitted when appropriate documentation supports the claim and only when such documentation is maintained and available for audit and review.
3. Documentation which serves as the basis for a claim must be appropriately organized in legible form so that such documentation may be audited and reviewed.
4. Diagnosis and procedures reported on reimbursement claims must be based on the medical record and other documentation.
5. Documentation necessary for accurate code assignment must be made available to all employees with coding responsibility.
6. Compensation for billing department coders and billing consultants shall not provide for any financial incentive to improperly code claims.

With regard to the filing of cost reports, it is WCHS policy that all Medicaid cost reports must be prepared utilizing generally accepted accounting principles based upon documents and reports that are maintained in WCHS day to day business. Cost reports must document only those costs that WCHS employees and/or agents believe in good faith are allowable. Employees and agents must provide accurate and complete documentation and reports in connection with the preparation of cost reports.

With regard to claim submissions and cost reporting, the following conduct is specifically prohibited:

- 1 Claims for payment or reimbursement of any kind that are false, fraudulent, inaccurate or fictitious.
- 2 Falsified medical records, time cards or other records used as the basis for submitting claims.
- 3 For services that must be coded, use of a code that does not accurately describe the documented service when there is a more accurate code that could have been used. This includes post-dating orders or signatures. Late entries should include an explanation of reason for delay in entry.
- 4 Bills submitted to Medicaid or applicable insurance plan for items or services which are known are not covered by Medicaid or applicable insurance plan.
- 5 Filing claims for the same item or service to more than one payer source whereby WCHS will receive duplicate or double payments.
- 6 Submission of claims without the availability of adequate documentation.
- 7 Falsification of any report or document used to document the cost of utilization of services by payer source.
- 8 Failure to report a known error or inaccuracy in any cost report or underlying document used to prepare a cost report.
- 9 Recording inappropriate, inaccurate, or non-allowable costs on a cost report.

Any employee who discovers an error or inaccuracy in any claim for payment for health care services or in any cost report that has been submitted or will be submitted should alert his or her supervisor, the Director or the Compliance Officer.

Audit and Monitoring Procedures:

To assist in efforts to detect and prevent fraud, waste, and abuse, WCHS conducts regular audit and monitoring procedures, both internally and externally when appropriate. Said audits will be utilized to identify compliance problems and correct those problems promptly and thoroughly, identifying potential compliance problems and instituting preventive measures, implementing procedures, policies and systems as necessary to reduce potential for recurrence.

Corrective Action:

If billing errors or requirement violations are discovered, WCHS will take steps to prevent any further similar violations. To the extent possible, WCHS shall take necessary steps to ensure any necessary refunds of any overpayments from third party payers are promptly completed. Corrective actions may include enhancing systems, providing feedback and education and if warranted, imposing disciplinary measures.

CONFIDENTIALLY

All WCHS employees possess sensitive, privileged information about clients and their care. Clients properly expect that this information will be kept confidential. WCHS takes very seriously any violation of their confidentiality. Discussing any client's medical condition or providing any information about them to anyone other than WCHS personnel who need the information or other authorized persons will result in disciplinary action. Employees are not to discuss clients outside of WCHS.

WCHS is required to maintain the confidentiality of each client's medical record. In this regard, medical records may not be released except with the consent of the client or in other limited circumstances as required by law. Special confidentiality requirements apply with regard to medical records relating to HIV infection and AIDS. Medical records should not be physically removed from WCHS, altered or destroyed. Employees who have access to medical records must exercise their best efforts to preserve their confidentiality and integrity and no employee is permitted access to the medical record of any client without a legitimate reason for doing so and proper authorization. If a question arises as to the permissibility of the release of a client's medical record or any information contained therein, the employee should seek guidance from the employee's supervisor, the Director of Nursing or the Compliance Officer. WCHS employees must comply with applicable regulations set forth in the Health Insurance Portability and Accountability Act (HIPAA).

Employees should respect WCHS assets as they would their own. No employee shall divulge to unauthorized persons, either during or after their employment, any information of a confidential nature connected with the business of WCHS.

CODE OF CONDUCT / ETHICS

All WCHS employees shall comply with Warren County Code of Ethics and Code of Conduct in accordance with Warren County Corporate Compliance Program policies.

CONFLICTS OF INTEREST

No employee should place him or herself or allow him or herself to be placed in a situation where the employee's personal interests might conflict with the interests of WCHS. WCHS recognizes and respects an individual employee's right to invest or participate in activities outside of his/her employment provided that these in no way conflict with WCHS interests or welfare and do not interfere with the employee's responsibilities to WCHS or the effectiveness of the employee's job performance.

EDUCATION AND TRAINING

To ensure all employees are familiar with their responsibilities under WCHS Compliance Program, WCHS has a written policy for the training of all employees, contractors or agents of the entity on the Federal False Claims Act (31 USC 3729-33). All affected employees and persons associated with WCHS including governing body members will be required to participate in any initial or periodic training sessions as determined by the Compliance Officer. Additionally, any periodic training sessions will also be required as determined by the Compliance Officer, for employees of certain departments with responsibilities for billing and coding or any other responsibilities that the Compliance Officer determines appropriate for periodic training. Such training shall be made a part of the orientation for a new employee, appointee or associate, and governing body members.

The Compliance Officer will distribute in writing and/or post in conspicuous places, any modifications of or amendments to the Compliance Manual. The Compliance Officer will also provide employees with written explanations of any substantial changes in the Compliance Manual or, if the Compliance Officer determines that written materials are insufficient, interim training sessions will be conducted.

Employees will be provided periodic information about WCHS Compliance Program, changes in applicable laws or ethical standards that may affect an employee's responsibilities through written memoranda, periodic training sessions or other appropriate forms of communication.

REPORTING REQUIREMENTS

A. Reporting

It is the responsibility of every employee to report any known instances of or reasonable suspicions of any violation of applicable state or federal law, ethical standards or WCHS policies, including the policy statements contained in this manual. To report a suspected violation, an employee is required to notify, either verbally or in writing, the Compliance Officer or the employee's immediate supervisor. Any supervisory staff personnel receiving a report of a suspected violation is required to immediately notify the Compliance Officer. If the suspected violation involves the employee's immediate supervisor, the employee should make the report directly to the Compliance Officer. If the suspected violation involves the Compliance Officer, the report should be made directly to WCHS Director. An employee may make a report of a suspected violation anonymously. Failure to report a suspected violation may result in disciplinary action.

B. Confidentiality:

To the extent permissible, WCHS shall treat all reports of suspected violations of Standards as confidential. However, it must be recognized that under certain circumstances the name of the individual making the report will be communicated to the Compliance Officer, if the report is made originally to the employee's supervisor, to an individual responsible for conducting an investigation of the suspected violation or to a governmental agency investigating any such suspected violation. Any such disclosure will only be made only on a need to know basis.

C. Investigations:

It is important to the integrity of WCHS operation that all suspected violations of Standards be thoroughly reviewed and investigated so that appropriate action can be taken as necessary. WCHS will promptly and thoroughly investigate any suspected violation and take appropriate disciplinary action if warranted. Investigations may be conducted internally by the Compliance Officer or externally by either accountants or lawyers engaged by WCHS. Employees are required to cooperate with the individual or individuals conducting an investigation of a suspected violation. Such cooperation may involve being interviewed by the individual or individuals conducting the investigation or supplying such individual or individuals with requested documentation. Failure to cooperate in an investigation of a suspected violation may result in disciplinary action being taken.

D. Non-Retaliation:

To ensure employee cooperation, neither WCHS nor its respective employees shall take any retaliatory action or retribution against any employee who has submitted a report of a suspected violation or who has participated in an investigation of a suspected violation. Any employee who takes retaliatory action or retribution against another employee who has either reported a suspected violation or participated in an investigation of a suspected violation will be subject to disciplinary action.

DISCIPLINARY PROCEDURES

All employees and professional staff members are required to comply with applicable state and federal law, ethical standards and WCHS policies, including the policy statements contained in this manual (hereinafter collectively "Standards"). Any employee or professional staff member who violates any of the foregoing Standards will be subject to disciplinary action, up to and including termination of employment.

Disciplinary action will be taken against an employee or professional staff member who:

- A. Authorizes or participates directly in a violation of a Standard
- B. Deliberately fails to report a violation of a Standard.
- C. Deliberately withholds relevant and material information concerning a violation of a Standard.
- D. Deliberately fails to cooperate in an investigation of a suspected violation of a Standard.
- E. Retaliates or seeks or causes retribution against any employee or professional staff member who has either reported a suspected violation of a Standard or participated in an investigation of a suspected violation of a Standard.
- F. Fails to participate in required training programs.

Disciplinary action may also be taken against any supervisory personnel who directs or approves an employee's actions which result in a violation of a Standard, is aware that an employee's actions which violate a Standard but fails to take appropriate corrective action or who otherwise fails to exercise appropriate supervision.

Disciplinary action may include oral or written warning, probation, suspension, demotion, termination from employment or suspension. Disciplinary action will be taken in accordance with WCHS personnel policies and procedures, county laws, and Civil Service requirements. Disciplinary action will be taken on a fair, equitable and consistent basis. Disciplinary action will be appropriate to the level of the employee's culpable conduct, that is, the more serious the level of culpable conduct (intentional conduct or reckless non-compliance) will result in more significant disciplinary action. Notwithstanding the foregoing, this statement is not a guaranty of progressive discipline and WCHS reserves the right to terminate an employee at any time for any lawful reason.

Warren County Board of Supervisors

RESOLUTION NO. 803 OF 2010

Resolution introduced by Supervisors Sokol, Thomas, Champagne, Taylor, Loeb, McDevitt and Wood

ADOPTING THE WARREN COUNTY CORPORATE COMPLIANCE POLICY

WHEREAS, the Director of Public Health/Patient Services and the Administrator of Westmount Health Facility have advised that the federal and state agencies responsible for enforcement of Medicare and Medicaid laws and regulations applicable to health care providers require the development and implementation of formal compliance programs by health care providers and additionally require annual Departmental compliance certification to the New York State Office of the Medicaid Inspector General, and

WHEREAS, the County Administrator/ County Attorney, in conjunction with the Director of Public Health/Patient Services and the Administrator of Westmount Health Facility, has formalized a Warren County Corporate Compliance Policy which is annexed hereto as Schedule "A" and which policy was presented to the Health Services Committee for consideration and adoption, now, therefore, be it

RESOLVED, that the proposed Warren County Corporate Compliance Policy annexed hereto as Schedule "A" be and the same hereby is adopted as the official policy for Warren County, and be it further

RESOLVED, that the Chairman of the Board be and hereby is authorized to execute any necessary annual compliance certification forms in accordance with the requirements of the New

Warren County Board of Supervisors

RESOLUTION No. 803 OF 2010

Resolution introduced by Supervisors Sokol, Thomas, Champagne, Taylor, Loeb, McDevitt and
Wood

York State Office of the Medicaid Inspector General.

SCHEDULE "A"

WARREN COUNTY

WARREN COUNTY
CORPORATE COMPLIANCE



STATEMENT OF POLICY:

Warren County is committed to providing quality health care in compliance with all applicable laws, rules, regulations and other directives of federal, state and local governments and agencies.

Warren County recognizes that the federal and state agencies responsible for enforcement of Medicare and Medicaid laws and regulations applicable to healthcare providers have required the development and implementation of formal compliance programs by health service providers.

Compliance programs which are consistent with federal and state laws and regulations are designed to promote the highest level of ethical and lawful conduct throughout the County government to combat health care fraud and abuse.

Warren County is committed to the prevention and detection of any fraud, waste and abuse related to Federal and State health care programs (Medicaid, Medicare and other governmental payer programs), and the protection of any "whistle blower".

This policy is not intended to replace other compliance practices, rules or procedures defined elsewhere in any County or departmental policies and procedures, standard operating procedures manuals, standard operating procedures, local laws, etc.

SCOPE:

This policy applies to all Warren County employees, contractors, medical staff, volunteers and vendors.

PROCEDURE:

1. WRITTEN POLICIES, PROCEDURES AND STANDARDS OF CONDUCT:

It is the policy of Warren County to require employees to comply with provisions of the Warren County Code of Ethics, their department compliance program, as well as any other applicable protocols, standards, policies and procedures established or adopted by the County or department.

County departments will develop and distribute written standards of conduct as well as clinical, financial and administrative policies on the provision of service by which all employees are expected to comply. The standard of conduct is for the employee to follow all department specific policies and procedures while performing their job duties.

Divisions and departments will develop policies and procedures addressing the non-employment or retention of excluded individuals or entities and the enforcement of appropriate disciplinary action against employees or contractors who have violated corporation compliance policies and procedures, applicable statues, regulations, federal, state or private payor healthcare requirements.

The County prohibits the knowing submission of a false claim for payment in relation to a Federal or State funded health care program. The County encourages any employee who is aware of or reasonably suspects the preparation or submission of a false claim or report or any other potential fraud, waste, or abuse related to a Federally or State funded health care program to report such information to his or her supervisor, department compliance officer or to the County's Compliance Officer. Any employee who reports such information will have the right and opportunity to do so anonymously and will be protected against retaliation for making the report. The County commits itself to swiftly and thoroughly investigate any reasonably credible report of fraud, waste or abuse or any reasonable suspicion thereof through the County compliance program. The County retains the right to take appropriate action against an employee or vendor who has participated in a violation of any applicable law or this Policy.

2. COMPLIANCE OFFICER AND COMPLIANCE COMMITTEE:

Warren County's Corporate Compliance Officer is designated as ~~Jeann McKinstry~~ the Warren County Human Resources Director ("County Compliance Officer"). The County Compliance Officer will serve as the focal point for compliance activities and be responsible for oversight of the development, implementation and operation of the compliance program policies and procedures. The County's Compliance Officer will report quarterly to the County Administrator and report annually to the Board of Supervisors.

There shall be established a County Compliance Committee , whose membership will consist of the County Compliance Officer as Chairman, and department compliance officers as members. The Committee will meet quarterly to review and update issues, protocols and ongoing compliance program requirements.

Department heads will designate a department compliance officer to ensure compliance with department specific policies. Compliance issues detected will be brought to the attention of the department compliance officer. Department compliance officers will also work cooperatively with the County Compliance Officer in meeting compliance obligations, requirements and responsibilities.

3. TRAINING AND EDUCATION:

All employees will be oriented on the first day of employment in accordance with County and Department Policies and Procedures.

During the orientation process new employees will be oriented to the department specific policies and procedures. On an annual basis the departments will train employees on corporate compliance department policies and procedures.

Each department will adopt a process whereby employees will certify that they have received, read and will abide by department specific corporate compliance policies and procedures at orientation, annually and as revised and/or amended.

4. EFFECTIVE LINES OF COMMUNICATION:

Each department's Compliance Officer will adhere to an open door policy and encourage employees to discuss any issues in regards to abuse and fraud. Employees are assured of non-retaliation and confidentiality.

5. ENFORCEMENT THROUGH DISCIPLINE:

Failure to adhere to compliance standards and department policies will result in disciplinary action up to and including termination.

6. CONDUCTING INTERNAL MONITORING AND AUDITING TO PREVENT FRAUDULENT ACTIVITIES:

Each department will develop internal monitoring and auditing systems to reduce fraud, waste and abuse, enhance operational functions, improve the quality of health care services and decrease costs. The department and/or County will thoroughly and thoughtfully investigate in a timely and appropriate manner compliance issues that are brought to their attention. Response and corrective action to any findings will be prompt and thorough.

Reports may be anonymous and confidentiality will be maintained.

To report a suspected issue of fraud or abuse the employee may report verbally, by phone or in person to the Department Compliance Officer or to the County Compliance Officer.

After completion of any investigation, the department compliance officers and County Compliance Officer will report applicable findings to the Personnel Officer, County Administrator or law enforcement officer. Following investigation of complaints, disciplinary action will be in accordance with any applicable collective bargaining agreements and/or Civil Service Law Section 75.

SCHEDULE "A"
AUTHORIZATION TO ATTEND MEETING OR CONVENTION

Check one:

- In-State (Must be approved by Department Head, County Administrator & Committee Chair)
 Out-of-State (Requires Board resolution)

The Health Services (Supervisory Committee) hereby authorizes Cortney Hoerter (Employee Name)

to attend Lactation Counseling Training Program and Certification Exam (Name of meeting or organization)

at Albany, NY (Address) on September 17-21, 2018 (Dates)

Meeting/Convention Cost: Early Bird \$750 Mode of transportation to be used: County Vehicle
(County Vehicle or Mass Transportation)

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

Meals and parking anticipated not to exceed \$20/day or \$100/week.

Proper documentation must be attached when submitting for approval.

(Please check documents attached)

Notice of meeting or convention including cost. Total Cost of Travel \$ 900
(travel and meeting/convention cost)

For Overnight Travel

Room rate \$ _____ GSA* Rate \$ _____

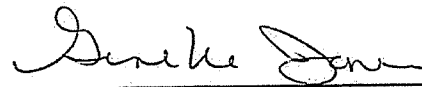
Funding in Budget? Y N

Meal costs - GSA* per diem rate \$ _____

Budget Code: A.4018.0020.444

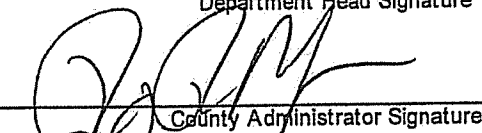
* www.gsa.gov

Date: 5/15/18



Department Head Signature

Date: 5/15/18



County Administrator Signature

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 Buildings & Grounds 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 Clerk of the Board if credit card will be used.
6. Copy of executed form needs to be included in next agenda for reporting to oversight Committee.

Registration

Please type your name or print it legibly so that it will be spelled correctly.

Send to: The Center for Breastfeeding 327 Quaker Meeting House Road
East Sandwich, MA 02537.

Or call (508) 888-8044. **Or fax** (508) 888-8050

Name _____

Home Address _____

City _____ State _____ Zip _____

Agency _____ Phone _____

Email address for confirmation _____

(we do not share your email address in anyway with any other organization)

Payment information

Check enclosed PO (\$25 charge) _____ Credit Card: Visa/MC/Amex/Disc Signature _____

Exp ___/___ VCode** _____

Lactation Counseling Training Program

LOCATION _____ DATE _____

Regular Tuition:

\$625 ~~\$575~~ Early Bird*

Group Tuition: (4 or more people from the same agency)

\$575 \$525 Early Bird*

Please add \$55 for the Textbook: A Pocket Guide for Lactation Management

Please add \$120 for the Certified Lactation Counselor exam fee, administered by the Academy of Lactation Policy and Practice.

Optional Additional Hours. Please add \$350 for optional 175 additional hours (must be combined with full course and exam)

Learn to Teach the 20 Hour Course (Applied Teaching Methods in Lactation Education for Health Professionals, Educators & Staff)

LOCATION _____ DATE _____

Regular Tuition:

\$595 \$545 Early Bird*

Group Tuition: (4 or more people from the same agency)

\$570 \$520 Early Bird*

Case Studies in Lactation Practice

LOCATION _____ DATE _____

\$195 \$175 Early Bird*

Group Tuition: (4 or more people from the same agency)

\$170 \$150 Early Bird*

\$50 Optional Text Book

Locations and dates for these courses and more are available on the paper calendar insert or on our website www.healthychildren.cc
Call (508) 888-8044, fax (508) 888-8050, or email info@healthychildren.cc

Continuing Education Credit

RN license # _____

RD license # _____

IBCLC # _____

Exam Date _____

CLC ALPP # _____

If different billing address, write billing address here: _____

Advanced Issues in Lactation Practice (ANLC/ALC)

LOCATION _____ DATE _____

Regular Tuition:

\$625 \$575 Early Bird*

Group Tuition: (4 or more people from the same agency)

\$575 \$525 Early Bird*

Please add \$120 for the Advanced Lactation Consultant exam fee, administered by the Academy of Lactation Policy and Practice.

*** Attach proof of completion (CLC or IBCLC plus RN license or Maternal & Infant certificate)**

Maternal & Infant Assessment for Breastfeeding and Human Lactation

LOCATION _____ DATE _____

Regular Tuition:

\$375 \$355 Early Bird*

Group Tuition: (4 or more people from the same agency)

\$350 \$330 Early Bird*

Please add \$69 for the optional textbook

Community Breastfeeding Educator

LOCATION _____ DATE _____

Regular Tuition:

\$375 \$355 Early Bird

Group Tuition: (4 or more people from the same agency)

\$350 \$330 Early Bird

#575
Early Bird

\$55
Book

\$120
Certification Exam

\$750

\$50
gas
county
car

\$20/day
lunch
&
parking

\$900

* An early bird registration discount is available if your check or credit card information is received 4 weeks (28 days) prior to the beginning of the workshop.

** 3 numbers on back of mc/visa/disc or 4 numbers on front of AmEx

Please see the full flyer for information about refunds, cancellations and specifications.

Course Calendar

More courses, dates and locations are being added!

April 2018

April 9-13 Caldwell, ID (CLC)
 April 9-13 Champaign, IL (CLC)
 April 16-20 Junction City, KS (CLC)
 April 16-20 Boulder, CO (CLC)
 April 23-27 Battle Creek, MI (CLC)
 April 23-27 Neenah, WI (CLC)
 April 23-27 Des Moines, IA (CLC)
 April 30—May 4 Tifton, GA (CLC)
 April 30—May 4 Rochester, NH (CLC)
 April 30—May 4 Cincinnati, OH (CLC)

May 2018

May 2-4 Carlsbad (Oceanside), CA (Maternal)
 May 7-11 Carlsbad (Oceanside), CA (Advanced)
 May 7-11 Mora, MN (CLC)
~~May 7-11 New York City, NY (CLC) waitlist~~
 May 14-18 Dade City, FL (CLC)
 May 14-18 Louisville, KY (CLC)
 May 14-18 Henderson, TN (CLC)
 May 21-25 Kaiserslautern, GER (CLC)
 May 21-25 Sioux City, IA (CLC)

June 2018

June 4-8 Glenwood Springs, CO (CLC)
 June 11-15 Naperville, IL (CLC)
 June 11-15 Powell, WY (CLC)
 June 18-22 Metairie, LA (CLC)
 June 18-22 Fort Worth, TX (CLC)
 June 25-29 Carrollton, GA (CLC)
 June 25-29 Miami, FL (CLC)

July 2018

July 9-13 Spring Hill, FL (CLC)
 July 9-13 York, PA (CLC)
 July 16-20 Salamanca, NY (CLC)
 July 16-20 Bronx, NY (CLC)
 July 23-27 Huntsville, AL (CLC)
 July 23-27 Jacksonville, NC (CLC)
 July 30 – Aug 3 Lexington, KY (CLC)
 July 30 – Aug 3 Mankato, MN (CLC)
 July 30 – Aug 3 Akron, OH (CLC)

August 2018

August 6-10 Loveland, CO (CLC)
 August 6-10 Savannah, GA (CLC)
 August 6-10 Hillsboro, MO (CLC)

August 2018 Continued

August 13-17 East Lansing, MI (CLC)
 August 13-17 Alamogordo, NM (CLC)
 August 20-24 Maryville, IL (CLC)
 August 27-31 Orlando, FL (CLC)

September 2018

September 10-14 Springfield, IL (CLC)
 September 10-14 Milwaukee, WI (CLC)
 September 17-21 Columbus, IN (CLC)
~~September 17-21 Albany, NY (CLC)~~
 September 24-28 Newark, DE (CLC)
 September 24-28 Belfast, ME (CLC)

Sept
17-21
Albany NY

October 2018

October 1-5 Grand Rapids (Wyoming), MI (CLC)
 October 1-5 Waite Park, MN (CLC)
 October 1-5 Chillicothe, OH (CLC)
 October 8-12 Cedar Falls, IA (CLC)
 October 8-12 Louisville, KY (CLC)
 October 8-12 Great Falls, MT (CLC)
 October 15-19 Arvada, CO (CLC)
 October 15-19 Hartford, CT (CLC)
 October 15-19 Naperville, IL (CLC)
 October 22-26 Jacksonville, FL (CLC)
 October 22-26 Lima, OH (CLC)
 Oct 29—Nov 2 Winnipeg, CAN (CLC)
 Oct 29—Nov 2 Bismarck, ND (CLC)
 Oct 29—Nov 2 Philadelphia, PA (CLC)

November 2018

November 5-9 Clearwater, FL (CLC)
 November 5-9 Champaign, IL (CLC)
 November 5-9 El Paso, TX (CLC)
 November 7-9 Kaiserslautern, GER (Maternal)
 November 12-16 Lewiston, ME (CLC)
 November 12-16 St Louis, MO (CLC)
 November 12-16 Rochester, NY (CLC)
 November 12-16 Madison, WI (CLC)
 November 12-16 Kaiserslautern, GER (Advanced)
 November 28-30 Salt Lake City, UT (Maternal)

December 2018

~~December 3-7 Rockland County, NY (CLC)~~
 December 3-7 Salt Lake City, UT (Advanced)
 December 10-14 Oak Park, IL (CLC)
 December 10-14 Metairie, LA (CLC)

COURSE KEYCLC: *The Certified Lactation Counselor Course*Advanced: *Advanced Issues in Lactation Practice*Maternal: *Maternal Infant Assessment for Breastfeeding & Human Lactation*ATM: *Applied Teaching Methods in Lactation Education for Health Professionals, Educators and Staff to Support the WHO/UNICEF Baby-Friendly Hospital Initiative*CBE: *Community Breastfeeding Educator***Healthy Children's Center for Breastfeeding**

327 Quaker Meeting House Road, East Sandwich, MA 02537

Ph: (508) 888-8044 | Fax: (508) 888-8050

www.centerforbreastfeeding.orginfo@centerforbreastfeeding.org**ARE YOU LOOKING FOR A TRAINING PROGRAM IN YOUR AREA?**

We go where we are hosted! Please give us a call to find out more information about hosting any of our training program listed in this course catalog. As part of our mission, we present most of our conferences in collaboration with private, public and non-profit agencies. Call for more information if your organization would like to provide space for a training in exchange for prepaid registration fees!

HR 5/15/18

RESOLUTION REQUEST FORM NO. 12

Schedule "A"

COPY

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: 36.01

Title of Position: Part Time not to exceed 20 hrs/wk Infant Feeding Advocate Base Salary of Position: \$27,316 (\$13.13/hr) Grade: 3

Filling at Step # (If Known): _____

Budget code and title: A.4013 Part Time Salaries Union Non-Union

This position is vacated due to: Retirement Resignation Termination Promotion Other

Employee No./Last Name: #12834/ Graham Date of Vacancy: 2/15/18

Is this position mandated? Yes No Is the position reimbursable? Yes No

Source of reimbursement: Federal WIC % State WIC % Other _____ %

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

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

The Administrator objects to the filling of the vacancy.

Administrator Signature _____ Date _____

BUDGET OFFICER COMPLETES THIS SECTION

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 _____ Date _____

SUPERVISORY COMMITTEE COMPLETES THIS SECTION

Name of Committee _____

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 _____ Date _____

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: 36.08
Title of Position: WIC Nutrition Facilitator Annual Salary: 42,290 Grade: 16
Budget code and title: 4013.130 WIC Part-time Salaries Union Non-Union
This position is vacated due to: Resignation
Employee No.: 13089 Is this position mandated? No Is the position reimbursable? Yes
Source of reimbursement: Federal 100%

Salary provided to reflect help rate is 20.33 not to exceed 20 hrs per week

CIVIL SERVICE STATUS AND HUMAN RESOURCES DIRECTOR APPROVAL

Competitive-active eligible list
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 1/17/18
The Administrator has no objection to the filling of the vacancy.

BUDGET OFFICER COMPLETES THIS SECTION

Date 1/19/18
The Budget Officer has no objection to the filling of the vacancy.

SUPERVISORY COMMITTEE COMPLETES THIS SECTION

Name of Committee Date
The committee has no objection to the filling of the vacancy.

RESOLUTION REQUEST FORM NO. 12

COPY

TO HR 5/15/18

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 Payroll Dept. No: 36.0
Title of Position: Public Health Nurse #8 Base Salary of Position: \$49,528 Grade: 21
Filling at Step # (If Known):
Budget code and title: A.4010.110 Health Services Full Time Salaries Union Non-Union
This position is vacated due to: Retirement Resignation Termination Promotion Other
Employee No./Last Name: #13019/ Arnold Date of Vacancy: Anticipated by end of June 2018
Is this position mandated? Yes No Is the position reimbursable? Yes No
Source of reimbursement: Federal State Other PVT Ins Variable insurance coverage with caseload

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

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

Administrator Signature Date

BUDGET OFFICER COMPLETES THIS SECTION

- 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 Date

SUPERVISORY COMMITTEE COMPLETES THIS SECTION

Name of Committee
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 Date

RESOLUTION REQUEST FORM NO. 12

COPY

TO HR 5/15/18

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 Payroll Dept. No: 36.0
Title of Position: Registered Professional Nurse/ CHN # 15 Base Salary of Position: \$46,318 Grade: 19
Filling at Step # (If Known):
Budget code and title: A.4010.110 Health Services Full Time Salaries Union Non-Union
This position is vacated due to: Retirement Resignation Termination Promotion Other
Employee No./Last Name: # 12327/ Stewart Date of Vacancy: 6/30/2018
Is this position mandated? Yes No Is the position reimbursable? Yes No
Source of reimbursement: Federal State Other insurance Caseload Ins Plans vary

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

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

Administrator Signature Date

BUDGET OFFICER COMPLETES THIS SECTION

- 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 Date

SUPERVISORY COMMITTEE COMPLETES THIS SECTION

- Name of Committee
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 Date