

**LEWIS COUNTY GENERAL HOSPITAL
BOARD OF MANAGERS**

June 29, 2022

The regular monthly meeting of the Board of Managers of Lewis County General Hospital was called to order at 4:30 p.m. by Donald Musnicki, Vice President. Members present:

*Marguerite Mastascusa
Philip McDowell*

*Donald Musnicki
Susan Ross*

*Cheryl Steckly
Michael Young {entered at 4:45 p.m.}*

Others

Present

*Gerald R. Cayer, Chief Executive Officer
Jeff Hellinger, Chief Financial Officer
Kerry Herbine, Chief Operating Officer {left meeting at 5:25 p.m.}
Michelle Kelley, Administrative Assistant
Mary Comet, Medical Staff Administrative Assistant {left meeting at 5:00 p.m.}
Jessica Skiff, Director of Human Services
Marcy Teal, CNO
Frank Pace, Director of Facilities Management
Christina Flint, Community Services Coordinator
Dr. Steven Lyndaker, Medical Director
Elizabeth Compo, Career's Here Student
Julie Abbass, Reporter, Watertown Daily Times {entered at 5:05 p.m.}*

PLEDGE OF ALLEGIANCE

VISION, MISSION & VALUE STATEMENTS: The health system's Vision, Mission and Value Statements were read with the group at the start of the meeting by board member, Mrs. Mastascusa.

CONFLICT INQUIRY: No known conflicts were identified on tonight's agenda for any board member.

PUBLIC COMMENT: Anyone wishing to send a public comment may do so by sending an email to info@lcgh.net. Mrs. Michelle Kelley noted no emails were received.

PROCLAMATIONS:

Mr. Cayer shared with the group the following Proclamation in honor of Mrs. Teresa B. Allen, Physical Therapist, who retired from the health system on June 25, 2022:

"Whereas, Mrs. Allen is a dedicated employee at Lewis County Health System with 27 years of employment at the time of her retirement on June 25, 2022, and having started her steadfast career in 1995 as a Physical Therapist for Lewis County Residential Health Care Facility after graduating with a Bachelor's degree from Russell Sage College.

Whereas, Mrs. Allen was committed throughout her career to the vision and mission of the health system in her role as a Physical Therapist where she was instrumental in helping to build a very strong and progressive rehabilitation program for the Residential Health Care Facility. In her words, "The discipline of therapy has become a leader in establishing a high level of standard of care across all disciplines."

We wish Mrs. Allen a happy and healthy retirement and best of luck in her retirement, spending time with her family and more time traveling (without counting vacation days).

☐ **STRATEGIC FOCUS TOPICS:**

- ◆ **Medical Staff Credentialing and Recredentialing Procedures:** Dr. Steven Lyndaker, Medical Director, and Mrs. Mary Comet, Administrative Assistant to the Medical Staff, shared an update with the board regarding the appointment, advancement, and reappointment process for our medical staff through a PowerPoint presentation. Please feel free to reach out to Dr. Lyndaker with any questions.

☐ **EXCUSE ABSENT MEMBERS**

- #63. Motion by Mr. Musnicki, seconded by Mr. McDowell, the board excused Jennifer Jones, Richard Chartrand, Dr. Howard Meny and Mr. John Lehman from the meeting. Approved.

VOTE: yes 6, no 0.

☐ **EMPLOYEE OF THE MONTH**

- #64. Motion by Mrs. Steckly, seconded by Mrs. Ross, the Board congratulated Tina Gigliotti, RN, as the May Employee of the Month. Approved.

VOTE: yes 6, no 0.

☐ **OPERATIONAL UPDATES:**

- ◆ **Patient Safety/Quality:** Mrs. Susan Ross, Chair of the Quality Committee, provided the following update to the board: June Quality Report: Mrs. Ross is now the Chair of the Quality Committee upon Mrs. Karen Rennie's board resignation. She shared that Mrs. Lyndsey Allen is the new Quality Director. Lyndsey, a Lowville native moved back to the area from Pittsburg, PA where she gained experience as an ICU RN and an educator. She has served as LCHS NH infection prevention role since Aug 2021 before beginning the Quality Director role in April 2022. Mrs. Ross had the pleasure of meeting with Mrs. Allen to discuss the Quality program and review the June 8, 2022 QAPI meeting.

Q1 2022 CMS Dashboard Highlight:

- A notable area of improvement was the median time to transfer to another facility for acute coronary intervention. Q1 63.5 minutes National average 67 minutes. The significant improvement is from the previous Q2, Q3, Q4 of 2021 which were 173, 206, and 241 minutes respectively.

Q1 2022 Main PI focus:

- Median time for ED arrival to ED departure for admitted ED patients (includes mental health dx) Q1 408 minutes National average 239.2 minutes This measure which includes mental health diagnosis may lead to longer wait times due to lack of facilities to transfer to in our area.
- Admit decision time to ED departure time for admitted patients (excludes mental health dx) Q1 93 minutes National average 76.6 minutes PI Plan: ED throughput team was initiated by CNO in Q4 2021. Patient flow chart has been designed and the team is completing RCA to identify gaps in the current patient flow process. Some trends identified include; high inpatient census- mainly swing beds due to inability to transfer to skilled nursing facilities. Discharging patients in groups is time intensive on the part of nursing staff as well as housekeeping capabilities to clean and ready the rooms efficiently. Also, better interdisciplinary communication for admissions and discharges needed. The team met last week and devised a plan to audit admission time in "real time" to get a full sense of inhibiting issues.
- Percentage of patients who left the ER before being seen Q1 3.27% (78/2388) National average 1% PI Plan: This measure is also being addressed by the ED throughput team by "realtime" audit to track ED census, wait times, ESI score (triage score), chief complaints and inpatient census. Also discussion to reestablish an ED case manager. Next QAPI meeting July 13, 2022. Q2 reports will include; Surgical Services, Complaints and Concerns, Dietary and Nutrition, Environmental Services, Plant Ops, Rehabilitation, Respiratory Therapy Quality Council July 18, 2022

- ◆ Finance: Mr. Jeff Hellinger, CFO, shared the following updates:
Period 5 Review:
 - There was a loss of \$229,270 versus a budgeted loss of \$181,109 for the month of May. The YTD loss is \$245,941 versus a budgeted loss of \$443,600.
 - Mr. Hellinger also provided a brief overview of examples of “Financial Transactions” and their impact on the income statement, balance sheet and cash flow with the group.
 - Mr. Hellinger noted he is currently reviewing the capital requests from the managers for the 2023 budget and will review them with the board at the next board meeting. He is also working on the FTE’s for the 2023 budget and will also be sending out the 2023 operating budgets to the managers for their input in the next 2-3 weeks.
- ◆ Capital Improvement Oversight Committee Report: Chair, Mr. Donald Musnicki, presented a copy of the Capital Improvement Oversight Committee Monthly Report to the board members prepared by Project Manager, Michael Nuffer, from C&S Companies. A copy of this report was also shared with the Capital Improvement Oversight Committee at their monthly meeting on Monday, June 25th, which was discussed in more detail.
- ◆ Human Resources: In the absence of Mrs. Jennifer Jones, Chair of the HR Committee, Board President, Mr. Young, shared the following updates from the June 15, 2022, HR Committee Meeting:
 - New Hires, Resignations, Retirements & Terminations: The organizations new hires, resignations, retirements and terminations for the period of May 9, 2022 – June 6, 2022, were included in Board packets.

#65. Motion by Mr. McDowell, seconded by Mrs. Steckly, to request the Board of Legislators to convert 1 PT position card to FT for Clinic LPN with a salary of \$19.32 - \$24.72 per hour. Approved

VOTE: yes 6, no 0.

□ CHIEF EXECUTIVE’S REPORT:

- ◆ Board Meeting Location (Courthouse vs. Health System): The board meetings from July – December 2022 will be held on the following dates beginning at 4:30 p.m. in the John C. Herrman, M.D. Conference Room in the Medical Art’s Building at the Lewis County Health System (unless otherwise noted):
 - Wednesday, July 27, 2022
 - Wednesday, August 31, 2022
 - Tuesday, September 27, 2022
 - Tuesday, October 25, 2022
 - Wednesday, November 30, 2022
 - Wednesday, December 28, 2022
- ◆ Mr. Cayer also reviewed the 2022 Committee Assignments and meeting dates with the group and based on requests, revised calendars will be sent out by Mrs. Kelley together with updated Google calendar invites.
- ◆ IHA Scholarship Funds: Mr. Cayer shared with the group that LCHS, which is a IHA member organization, was awarded one of 28 equal awards for \$9,428.57, of \$246,000 in scholarship funds, to aid healthcare workers who have limited resources to pursue certifications, while also strengthening their career ladder.
- ◆ Mr. Cayer shared the NYSDOH is currently on site conducting the annual survey of the Lewis County Residential Healthcare Facility.

□ PRESIDENT'S REPORT:

- ◆ Strategic Topics for July 2022:
 - ✓ Employed Provider Practices {Dr. Sean Harney}
- ◆ News In General: The Board received a copy of the June 2022 News In General.
- ◆ News Notes: The Board received a copy of the News Notes from the media for the month of May.

□ CONSENT ITEMS:

#66. Motion by Mrs. Mastascusa, seconded by Mrs. Ross, to approve the May 25, 2022 Board of Managers' meetings and acknowledge receipt of the following minutes (all minutes were previously distributed with the board packets):

- 05/23/2022 Capital Improvement Oversight Committee Minutes
- 06/09/2022 Standard's Review Committee Minutes
- 06/13/2022 Medical Staff Committee Minutes
- 06/15/2022 Human Resources Committee Minutes
- 06/20/2022 Finance Committee Minutes

Approved.

VOTE: yes 6, no 0.

□ MEDICAL STAFF: Dr. Steven Lyndaker, Medical Director, provided the following update.

- ◆ Credentialing/Recredentialing on tonight's agenda will be discussed in Executive session.
- ◆ Dr. Marylou Feilmeier is the incoming President of the Medical Staff beginning July 1, 2022.

#67. Motion by Mrs. Ross, seconded by Mr. McDowell, to enter executive session at 5:49 p.m. for credentialing matters. Approved.

VOTE: yes 6, no 0.

#68. Motion by Mrs. Ross, seconded by Mrs. Steckly, to return to regular session at 5:59 p.m. Approved.

VOTE: yes 6, no 0.

□ Credentialing/Recredentialing:

#69. Motion by Mrs. Steckly, seconded by Mrs. Mastascusa, to approve the following:

Reappointments:

- C. Jay Ellie, M.D. – Courtesy Staff, Internal Medicine Service, with privileges as requested.
- Dean Hanna, M.D. – Courtesy Staff, Internal Medicine Service, with privileges as requested.
- Kathryn McHugh, M.D. – Active Staff, Family Practice Service, with privileges as requested.

Appointments:

- Robert Semlear, M.D. – Associate Staff, Family Practice Service, with Clinic privileges as requested.

Advancements:

- Michael Betler, D.O. – Courtesy Staff, Surgery Service, with Clinic privileges as requested.

Approved.

VOTE: yes 6, no 0.

Medical Staff By-laws:

#70. Motion by Mrs. Mastascusa, seconded by Mrs. Steckly, the Board approved the amendments to the Medical Staff By-laws as presented. Approved.

VOTE: yes 6, no 0.

Other: None

#71. Motion by Mrs. Steckly, seconded by Mr. Musnicki, to enter executive session at 6:00 p.m. to discuss CSEA contract negotiations. Approved.

VOTE: yes 6, no 0.

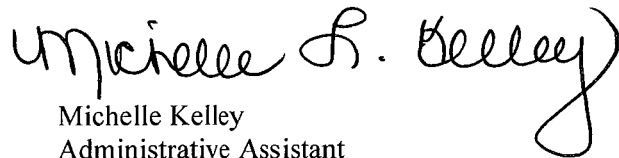
#72. Motion by Mr. McDowell, seconded by Mrs. Mastascusa, to return to regular session at 6:52 p.m. Approved.

VOTE: yes 6, no 0.

#73. Motion by Mrs. Ross, seconded by Mr. Musnicki, to adjourn at 6:53 p.m. Approved.

VOTE: yes 6, no 0.

Respectfully submitted,


Michelle Kelley
Administrative Assistant

Countersigned:

Philip McDowell, Secretary
Board of Managers