

**LEWIS COUNTY GENERAL HOSPITAL
BOARD OF MANAGERS**

July 27, 2020

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

*Marguerite Mastascusa
Donald Musnicki*

*Karen Rennie
Susan Ross*

*Cheryl Steckly
Michael Young*

Others

Present

*Gerald R. Cayer, Chief Executive Officer
Jeff Hellinger, Chief Financial Officer
Michele Prince, Chief Operating Officer
Michelle Kelley, Administrative Assistant
Jessica Skiff, Director of Human Services
Frank Pace, Director of Facilities Management
Dr. Sean Harney, CMO, Employed Provider Clinics
Gale Grunert, Director of Quality Assurance
Dr. Thomas Birk, Medical Staff President*

PLEDGE OF ALLEGIANCE

- VISION AND MISSION STATEMENT:** The health system's Vision and Mission Statement were shared with the group at the start of the meeting by Board member Mrs. Sue Ross.

EXCUSE ABSENT MEMBERS

- #57. Motion by Mrs. Mastascusa, seconded by Mrs. Steckly, the Board excused Mr. Steve Fuller, Mrs. Jennifer Jones, Mr. John Lehman and Mr. Philip McDowell from the meeting. Approved.

VOTE: yes 6, no 0.

EMPLOYEE OF THE MONTH

- #58. Motion by Mrs. Ross, seconded by Mr. Musnicki, the Board congratulated Corrie Schell, Nurse Practitioner, as the Employee of the Month for the month of June.
Approved

VOTE: yes 6, no 0.

- AUXILIARY REPORT:** No report this month as the Auxiliary has not met due to the COVID-19 pandemic.

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

- OLD BUSINESS:** None

- PUBLIC COMMENT:** None

- STRATEGIC FOCUS ISSUES:** None

□ OPERATIONAL UPDATES:○ Patient Safety/Quality:

- ✓ The Preventable Harm Events Dashboard {January – June 2020} through a bubble graph was reviewed with the Board.
- ✓ LCGH/RHCF Concerns {January – June 2020}. A copy of the 2020 Concern Log was reviewed with the group.
- ✓ 2020 Quality Management Plan: Mrs. Gale Grunert, Director of Quality Assurance, together with Mrs. Karen Rennie, Chair of the Quality Council Committee, reviewed the 2020 Quality Management Plan highlighting the significant revisions to the Plan. Mrs. Rennie added Mrs. Grunert has done a remarkable job over the last year revamping the QAPI process at our facility together with the 2020 Quality Management Plan.

#59. Motion by Mrs. Mastascusa, seconded by Mrs. Steckly, the Board approved the Quality Management Plan as presented. Approved.

VOTE: yes 6, no 0.

○ Finance Update – Jeffery Hellinger, CFO:✓ Period 6 Review:

- ✓ There was a loss of \$128,314 versus a budgeted gain of \$216,382 for the month of June. The YTD surplus is \$1,980,166 versus a budgeted surplus of \$169,965.

○ Human Resources Update:

- ✓ New Hires, Resignations, Retirements & Terminations: The organizations new hires, resignations, retirements and terminations for the period of June 12, 2020 – July 17, 2020 were included in Board packets.

#60. Motion by Mr. Musnicki, seconded by Mrs. Ross, to request the Board of Legislators to convert one (1) FT Health Information Management Transcriptionist position card into one (FT) Health Information Management Coder with a salary range of \$18.57 - \$23.49 per hour.

VOTE: yes 6, no 0.

#61. Motion by Mrs. Steckly, seconded by Mrs. Rennie, to request the Board of Legislators to convert one (1) PT Health Information Management Clerk position card into one (1) FT Health Information Management Clerk with a salary range of \$13.46 - \$17.52 per hour.

VOTE: yes 6, no 0.

#62. Motion by Mrs. Steckly, seconded by Mrs. Rennie, to request the Board of Legislators to create one (1) PT Patient Access Clerk position card with a salary range of \$14.75 - \$19.48 per hour.

VOTE: yes 6, no 0.

❑ CHIEF'S EXECUTIVE'S REPORT

- ◆ Copenhagen Health Center – Mr. Cayer updated the group regarding the approval status of our CON with the NYSDOH. We received two written inquiries from the NYSDOH regarding our impending CON approval for this Clinic, both of which have been completed.
- ◆ Surgical Pavilion & MS Revitalization Update: Mr. Cayer recently presented an overview of this project to the Board of Legislators at both their Health and Human Services and Finance Committee meetings last week. It is anticipated the Board of Legislators will vote on August 4, 2020 to set the public hearing and take action on bond request at their September 1, 2020 meeting. Mr. Cayer added the current budget for the project is \$32.8M (not to exceed \$33M) with the bond proposal at \$33M. Mr. Jerry Cayer, Mr. Jeff Hellinger, Mr. Frank Pace and Mr. Rick Tague from BCA, will be available to meet with any of the Board of Legislators to answer any questions they may have regarding this project before the September Board meeting and will also travel to Albany to meet with the NYSDOH once the CON has been submitted for a deeper dive.
- ◆ NYS Community COVID-19 Testing: Mr. Cayer updated the group regarding the asymptomatic clinics which have been set up throughout Lewis County with Lowville being the central hub. He added 120 individuals have been tested to date through the free clinics with no positive test results. It was noted the test results are taking between 7-8 days to be returned. This week the offsite testing clinic will be held at the Beaver River Health Center, on Wednesday, and at the South Lewis Health Center the following week.
- ◆ LCGH Medical Director Update: The interview committee reconvened to conduct an interview with a third candidate last week. Following approval by the Medical Staff's Executive Committee, the name will be brought before the Executive Committee of the Board of Managers, then to the full Board of Managers for final approval in August.
- ◆ Joint Commission Visit: Mr. Cayer briefed the board regarding the JC reaccredited survey held July 21-23, 2020. He acknowledged Mrs. Michele Prince, COO, the point person, for the nice job she did facilitating and getting us ready for the survey. The survey focused on LCGH, CHHA, Hospice and hospital-based practices and based on what was shared at the exit conference on the 23rd of July, the results of the survey were average. He noted; however, the 2020 survey was collectively better than the survey of 2017. The areas that performed well were acute nursing services, the ancillary departments, medical staff affairs – specifically, the PI process (OPPEs and FPPEs) and credentialing, Human Resources, and Beaver River Health Center. CHHA and Hospice had a good showing. There were two key areas of opportunity identified which will result in a 45 day revisit: Infection Prevention and Environment of Care/Life Safety (facilities). He added the teams from the appropriate areas are already working on the plan of correction for their respective departments. Mr. Cayer praised Mrs. Neva Bossard, Mrs. Gale Grunert and Mrs. Karen Rennie as quality was one of the high marks in the survey and he added the surveyors were pleased and complimentary with our new QAPI process.

❑ PRESIDENT'S REPORT:

- ◆ Strategic Topics for August 2020:
 - ✓ Employed Provider Practices {S. Harney}
 - ✓ Human Resources {J. Skiff}
- ◆ News In General: The Board received a copy of the July 2020 News In General.
- ◆ News Notes: The Board received a copy of the News Notes from the media for the month of June.

◆ Other: Board President, Mr. Young, shared the following updates:

- ✓ The October Board of Managers meeting will be held Wednesday, October 28th instead of Monday, October 26, 2020, at 4:30 p.m.
- ✓ Mr. Young spoke with all of the Board of Legislators regarding the Med/Surg Renovations and OR addition project, they are very supportive and were complimentary of Mr. Cayer in his presentation of the project to them.
- ✓ Requested Mr. Cayer, CEO, present his 2020 goals to the Board at the August Board of Managers meeting.
- ✓ Thanked Mrs. Michele Prince, COO, for attending and participating in a meeting held with all of the local School District's Superintendents including BRCS, SLCS, CSC, and LACS regarding their opening plans for the fall. He added each school's plan must be submitted by the week's end.

□ CONSENT ITEMS:

#63. Motion by Mrs. Rennie, seconded by Mrs. Mastascusa, to approve the June 24, 2020 Board of Managers' meetings and acknowledge receipt of the following minutes (all minutes were previously distributed with the board packets):

- ◆ 07/16/2020 Standard's Review Team Committee Minutes
- ◆ 07/20/2020 Executive / Finance Committee Minutes
- ◆ 07/20/2020 Human Resources Committee Minutes
- ◆ 07/20/2020 Quality Assurance/Performance Improvement (QAPI) Minutes (Ancillary)
- ◆ 07/20/2020 Quality Assurance/Performance Improvement (QAPI) Minutes (Patient Care)
- ◆ 07/20/2020 Planning Committee Meeting Minutes

Approved.

VOTE: yes 6, no 0.

□ MEDICAL STAFF: Dr. Birk, Medical Staff President, shared the following update with the Board:

- ◆ Credentialing/Recredentialing on tonight's agenda will be discussed in Executive session.
- ◆ Acknowledged and thanked Mrs. Mary Comet, Dr. Harney, Mrs. Neva Bossard and Mrs. Gale Grunert for their due diligence in preparing for the Joint Commission survey held last week.
- ◆ Acknowledged Ms. Mary Jane Zehr for her superior work in cleaning the Beaver River Health Center on a daily basis and noted the Joint Commission surveyors were very complimentary of the cleanliness of the center during their visit.

#64. Motion by Mrs. Steckly, seconded by Mrs. Rennie, to accept the 2020-2021 Medical Staff Chiefs of Service as follows:

- | | |
|----------------------------------|----------------------------|
| • Anesthesia: | Abdelrahman Elgallad, M.D. |
| • Emergency: | Mark Parshall, M.D. |
| • Family Practice: | M. Lynn Pisaniello, M.D. |
| • Medicine/ICU | Manoj Vora, M.D. |
| • Obstetrics and Gynecology: | Gerard Crawford, M.D. |
| • Pathology/Clinical Laboratory: | Thomas Birk, D.O. |
| • Pediatrics: | Mary Lou Feilmeier, M.D. |
| • Radiology: | Thomas Birk, D.O. |
| • Surgery: | Jon Baker, M.D. |

Approved.

VOTE: yes 6, no 0.

#65. Motion by Mrs. Rennie, seconded by Mrs. Steckly, to enter executive session at 5:08 p.m. Approved.

VOTE: yes 6, no 0.

#66. Motion by Mrs. Rennie, seconded by Mrs. Mastascusa, to return to regular session at 5:20 p.m. Approved.

VOTE: yes 6, no 0.

Credentialing/Recredentialing:

#67. Motion by Mr. Musnicki, seconded by Mrs. Rennie, to approve the following:

Reappointments:

- C. Jay Ellie, MD – Courtesy Staff, Internal Medicine Service and Emergency Medicine Service, with privileges as requested
- Matthew George, N.P. – Adjunct Staff, Internal Medicine Service, with privileges as requested
- Dean Hanna, MD – Courtesy Staff, Internal Medicine Service, with privileges as requested
- Kathryn McHugh, MD – Active Staff, Family Practice Service, with Obstetric privileges as requested
- Mark Parshall, MD – Active Staff, Emergency Medicine Service, with privileges as requested
- Bruce Portner, MD – Courtesy Staff, Internal Medicine Service, with privileges as requested

Appointments:

- Michael Betler, DO – Associate Staff, Surgery Service, with Clinic privileges as requested
- Ramona Untanu, MD – Associate Staff, Pathology Service, with privileges as requested

Advancements:

- Kelly Birchenough, DO – Active Staff, OB/GYN Service, with Clinic privileges as requested
- Approved.

VOTE: yes 6, no 0.

OTHER:

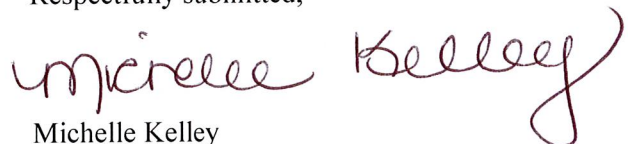
#68. Motion by Mr. Musnicki, seconded by Mrs. Ross, the Board agreed to amend Item #57 regarding excusing board members from tonight's meeting by adding Mr. Dick Chartrand to the list. Approved.

VOTE: yes 6, no 0.

#69. Motion by Mrs. Ross, seconded by Mr. Musnicki, to adjourn at 5:25 p.m. Approved.

VOTE: yes 6, no 0.

Respectfully submitted,



Michelle Kelley
Administrative Assistant

Countersigned:

Gerald R. Cayer,
Chief Executive Officer