LEWIS COUNTY GENERAL HOSPITAL BOARD OF MANAGERS

January 26, 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 Michael Young, President. Members present:

Richard Chartrand Jennifer Jones

John Lehman

Marguerite Mastascusa

Philip McDowell Howard Meny, M.D.

Donald Musnicki {via videoconferencing}

Karen Rennie

Susan Ross

Cheryl Steckly {entered at 4:50 pm}

Michael Young

Others

Present

Gerald R. Cayer, Chief Executive Officer

Jeff Hellinger, Chief Financial Officer Kerry Herbine, Chief Operating Officer Michelle Kelley, Administrative Assistant

Frank Pace, Director of Facilities Management

Jessica Skiff, Director of Human Services

Marcy Teal, CNO

Debra Wurz, Nursing Home Administrator

Christina Flint, Community Services Coordinator

Dr. Sean Harney, CMO, Employed Provider Clinics

Dr. Shereen Palmer, President of the Medical Staff {entered at4:50 p.m.}

Ryan Piche, County Manager {entered at 4:43 p.m.}

David Ferrara, Esq. {4:51 – 5:25 p.m. via videoconferencing}

Katherine Ritts Schafer, Esq. {4:51 – 5:25 p.m. via videoconferencing}

Julie Abbass, Reporter {entered at 5:00 p.m.}

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□ 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. Jennifer Jones.

■ EMPLOYEE OF THE MONTH

#1. Motion by Mrs. Jones, seconded by Mr. McDowell, the Board congratulated Jennifer Plank, RN, as the November Employee of the Month.

Approved.

VOTE: yes 10, no 0.

- ☐ 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.
- PROCLAMATION: Mr. Cayer welcomed and introduced Mrs. Sue Salmon, RN, and her family to the Board of Managers and Board President, Mr. Young, shared with the group the following Proclamation in honor of Mrs. Sue Salmon, RN who retired from the health system on Friday, January 21, 2022:

"Whereas, Mrs. Salmon was a dedicated employee at Lewis County Health System with 19.5 years of service at the time of her retirement on January 21, 2022 having began her steadfast career in 1979 on the Med/Surg floor after graduating from St. Elizabeth School of Nursing with her RN degree. Mrs. Salmon was also engaged with the health system through her employment with Dr. Stillman for 32 y ears.

Whereas, Mrs. Salmon was committed throughout her career to the mission and vision of the health system in all of her nursing roles over the years and lastly in her role as a RN Clinical Coordinator in our IT Department were she played an integral role in the development and support of the Meditech Expanse project.

We wish Mrs. Salmon a happy and healthy retirement to enjoy her time with her husband, children and grandchildren."

☐ STRATEGIC FOCUS TOPICS:

- Employed Provider Practices: Dr. Sean Harney, CMO, Employed Provider Clinics, shared a PowerPoint with the Board titled "Employed Medical Practices" and provided a brief update to the Board on the Clinics since his last report in March of 2021:
 - LCGH Employed Providers
 - Lowville Medical Practice, PLLC Providers
 - Clinics on Main Campus
 - Clinics Off Site
 - Challenges / Opportunities / Concerns
- **#2.** Motion by Mrs. Rennie, seconded by Mrs. Mastascusa, to enter executive session at 4:51 p.m. for update on contract negotiations. Approved.

VOTE: yes 11, no 0.

#3. Motion by Mr. Chartrand, seconded by Mrs. Jones, to return to regular session at 5:26 p.m. Approved.

VOTE: yes 11, no θ .

□ OPERATIONAL UPDATES:

- Patient Safety/Quality: Mrs. Karen Rennie, Chair of the Quality Committee, shared the following update on the following reports through the 4th Quarter of 2021:
 - The following departments reported on internal quality measures and external review findings and corrective actions: Clinics, Risk Management, RHC (Residential Health Care Facility), Home Health/Hospice and Nursing Depts.
 - External review agencies include: DOH (Dept. of Health) Survey, NYPORTS (NYS Patient Occurrence Reporting Events), CMS, JCAHO (Joint Commission for the Accrediation of Healthcare Organizations) Press Ganey Patient Satisfaction HHCAHPS (Home Health Consumer Assessment of Healthcare Providers and Systems).
 - Old Business:
 - Copayments: We are in the process of evaluating software to enhance our abilities to collect copays at the points of service called Phreessia, currently awaiting proposal.
 - Advance Directives: Improvement is noted. We've added a request to automated appointment reminders asking patients to bring a copy to next appointment.
 - Primary Care Quality Measures: We continue to evaluate efficiencies to improve reporting of general healthcare measures such as diabetic care, mammograms, etc. to improve population health and reimbursement.
 - New Business:
 - Risk management: We reported the lowest number of reportable events in the 4th quarter of the year.
 - RHCF: Residential care achieved 100% in all internal quality measures this quarter. We anticipate a general DOH survey (since our last was in December of 2019). Of State reportable events, 71% are resident on resident incidents.
 - Clinics: Q-reviews place all outpatient clinics and physician offices above 4.6 in overall patient satisfaction.
 - Inpatient: CMS Dashboard: We continue to identify strategies to reduce ED wait times as COVID hampers transfer times to other facilities and higher patient acuities. We are also evaluating the addition of additional "high volume" physician coverage in the ED.
 - We end 2021 with all JCAHO corrective action items fully satisfied with planned periodic internal monitoring.
 - Press Ganey (Inpatient): Overall, we have seen improvement in scores following our low in the 3rd quarter. With more patients in isolation for COVID, strategies focus on increasing

- activities and staff contact with isolated patients. We also identified confusion over the credentials of staff caring for patients. Organization wide training was implemented to ensure that all staff introduce themselves and credentials at every patient encounter.
- Home Health and Hospice: We have seen significant improvement in initiation of case times to 97.5% (over NYS and National average) over the past year despite staffing shortages due to COVID. Additionally, PAE (potentially avoidable events) and patient occurrences, we note over 30% aggregate improvement in the 4th quarter. Additionally, HHCAPHS results place LCHS above both NY and national benchmarks for patient satisfaction.
- <u>Finance</u>: Mr. Jeff Hellinger, CFO, shared the following updates: Period 12 Review:
 - ♦ There was a loss of \$57,807 versus a budgeted loss of \$172,259 for the month of December. The YTD loss is \$2,249,074 versus a breakeven budget.
 - ♦ We received \$331,000 from the Phase IV of the Provider Relief Funding grant which was recognized in the December financials.
 - The team is doing a great job with expense management for the health system.
 - ♦ The auditors will be site in February to complete the 2021 audit and will present their findings to the Board of Managers at the April 27, 2022 Board of Managers Meeting.
- <u>Human Resources</u>: Mrs. Jennifer Jones, Chair of the HR Committee, shared the following updates from the January 13, 2022 HR Committee Meeting:
 - New Hires, Resignations, Retirements & Terminations: The organizations new hires, resignations, retirements and terminations for the period of December 10, 2021 January 7, 2022 were included in Board packets.
 - The new COVID-19 booster vaccination requirement is forthcoming for personnel of the health system. Covered entities must ensure personnel who are currently eligible for a COVID-19 booster dose have documentation of compliance with the emergency regulation by February 21, 2022 and personnel not currently eligible for boosters receive their boosters within 30 days of becoming eligible. As of today, 180 staff members have verified with our HR Dept. they are vaccinated with the booster. The 10 NYCRR Section 2.61 (a) (2) defines personnel as employees and non-employee members of the medical and nursing staff, contract staff, students, and volunteers who engage in activities such that if they were infected with COVID-19, they could potentially expose other covered personnel, patients or residents to the disease.
 - o In response to Mr. McDowell's question regarding the decline in the number of FTE's within the facility, Mrs. Jessica Skiff shared we currently have 100 open positions at the health system.

Board President, Mr. Young, also shared the following update from the January 13, 2022 HR Committee Meeting in the absence of Chair, Mrs. Jones:

- o An update was provided regarding CNA recruitment.
- o We received a \$100,000 reduction in the Worker's Compensation reserve.
- Several team members received salary adjustments December 31, 2021 due to an increase in the NYS minimum wage. The titles affected were Cleaners, Activities, Food Service & Unit Helpers.
- There were three (3) resignations reported {1 cleaner and 2 Registered Nurses}.
- o The HR Department has hired a new HR Assistant, Steven Balfoort.

☐ CHIEF EXECUTIVE'S REPORT:

- ♦ <u>COO Introduction:</u> Mr. Cayer welcomed and introduced Mr. Kerry Herbine, COO, to the Board and added he joined the health system in his new role on Monday, January 24, 2022.
- Construction Project Update: Mr. Cayer shared through a PowerPoint presentation an update on the \$32M construction project and noted it is moving along nicely. Currently, the timeline is as follows:
 - ✓ January 17, 2022 project went out to bid
 - ✓ January 26, 2022 construction pre-bid walk through
 - ✓ February 14, 2022 bids are due

Mr. Cayer also noted we continue to wait to hear from The NYSDOH if they have approved the modifications to the CON.

CON Modification: All schedules that required edits were completed, and updated A&E drawings were submitted. Appeal is forthcoming. The modification was required since the project was adjusted to meet Covid related supply chain cost increases.

□ PRESIDENT'S REPORT:

- ♦ Strategic Topics for February 2022:
 - ✓ Elder Care Services {D. Wurz}
 - ✓ Public Relations {C. Flint}
- ♦ News In General: The Board received a copy of the January 2022 News In General.
- News Notes: The Board received a copy of the News Notes from the media for the month of December.

☐ CONSENT ITEMS:

- #4. Motion by Mrs. Jones, seconded by Mr. Lehman, to approve the December 29, 2021 Board of Managers' meetings and acknowledge receipt of the following minutes (all minutes were previously distributed with the board packets):
 - 12/21/2021 Professional Advisory Committee / HHPIC
 - 01/13/2022 Standards Review Committee Minutes
 - 01/13/2022 Human Resources Committee Minutes

Approved.

VOTE: ves 11, no 0.

- ☐ MEDICAL STAFF: Dr. Shereen Palmer, President of the Medical Staff, provided the following update.
 - Dr. Timothy Mathis is the new interim Medical Director of the Emergency Department as Dr. Mark Parshall has retired.
 - Credentialing/Recredentialing on tonight's agenda will be discussed in Executive session.
 - **#5.** Motion by Mrs. Ross, seconded by Mrs. Rennie, to enter executive session at 5:55 p.m. for credentialing matter. Approved.

VOTE: yes 11, no 0.

#6. Motion by Mrs. Steckly, seconded by Dr. Meny, to return to regular session at 6:07 p.m. Approved.

VOTE: yes 11, no 0.

☐ Credentialing/Recredentialing:

#7. Motion by Mrs. Rennie, seconded by Mrs. Steckly, to approve the following:

Reappointments:

- Steven Fogelman, M.D. Courtesy Staff, Family Practice Service, with Psychiatry (Category III) as requested.
- Steven Kaplan, M.D. Courtesy Staff, Surgery Service, with Orthopedic and Clinic privileges as requested.

Appointments:

- o Bareeq Ahmad, D.O. Associate Staff, Internal Medicine Service, with privileges as requested.
- Mahdieh Assar, M.D. Associate Staff, Radiology Service, with privileges as requested.
 (Delegated)
- o John Peter O'Laughlin, M.D. Associate Staff, Internal Medicine Service, with Cardiology privileges as requested.
- Gregory Orth, M.D. Associate Staff, Radiology Service, with privileges as requested.
 (Delegated)
- O Christin Reisenauer, M.D. Associate Staff, Radiology Service, with privileges as requested. (Delegated)

- o Faisal Saiful, M.D. Associate Staff, Internal Medicine Service, with Cardiology privileges as requested.
- O Colin Wright, M.D. Associate Staff, Internal Medicine Service, with Cardiology privileges as requested.

Advancements:

- O Doris Landreth, N.P. Hold Advancement for one year due to lack of volume
- O Taylor Mustizer, P.A. Permanent Adjunct Staff, Internal Medicine Service, with privileges as requested.

Additional Privilege:

 Nancy Sagona, M.D. – Additional request of Mammograms (Radiologist) Approved.

VOTE: ves 11, no 0.

Other: None

#8. Motion by Mr. Lehman, seconded by Mrs. Mastascusa, to enter executive session at 6:08 p.m. to discuss the CEO's Strategic Goals. Approved.

VOTE: yes 11, no 0.

#9. Motion by Mrs. Jones, seconded by Mr. Chartrand, to return to regular session at 6:29 p.m. Approved.

VOTE: yes 11, no 0.

#10. Motion by Mr. Lehman, seconded by Mr. Chartrand, to adjourn at 6:30 p.m. Approved.

VOTE: yes 11, no 0.

Respectfully submitted,

Michelle Kelley

Administrative Assistant

Countersigned:

Philip Md Dowell, Secretary

Board of Managers