

Good morning. The Director of Public Health resigned after only 14 months in her position. She made a lot of changes during her time there that have diminished the capacity of the CHHA to serve the public. We heard last month from the Commissioner about the increase of productivity in the CHHA up to 5 visits per day, but we didn't hear anything about the average 80 plus hours of overtime it costs to achieve that, nor did we hear that there are only 6 CHHA road nurses left when there were 20 a few years ago. The CHHA used to have 4 nurses working every weekend but now is closed on weekends with maybe 4 nurses working on a weekday to cover the entire county.

This is camouflaged in the monthly report by only including the number of so-called "clinicians." Including contract and per diem workers who may be mostly inactive is another way to camouflage the true state of staffing. How are those productivity numbers actually meaningful, especially in the context of so many fewer staff in the CHHA? We have been given no information about revenue or quality of care. Not a single CHHA RN hired after 2019 was retained and we've been looking at a consistently high vacancy rate at PHS.

It's not that nurses haven't been hired. The monthly reports include a few hires and recruitment efforts, but doesn't mention the hires leaving their positions, except for transfers of positions within the department. Why did they leave?

The overemphasis on productivity has had an inverse effect on retention of staff and quality of care. The public ratings of the CHHA aren't included in your monthly report as one might reasonably expect. Just like the Adult Care Center, the CHHA is also rated nationally by Medicare Home Care Compare. The 2 star quality performance rating is to some extent balanced by the 4 star rating from the patients' reviews, showing how much our community appreciates the CHHA. Another important consumer guidance rating from the New York State Department of Health's Health Profiles for the CHHA is only 1 star overall because of poor patient outcomes. These quality of care ratings are not included in the monthly report you receive, nor are any quality improvement efforts, analysis, or a plan to improve staff retention.

I had heard that it took several weeks for a new CHHA patient to receive a therapy visit, and noticed last month that the CHHA's start of care statistics are no longer included in the monthly report. I emailed the Commissioner about my concerns about the CHHA and the report and he told me not to

worry because the Director was doing such a great job and to foil for any further information.

I can't tell you how tired I am of the county's culture of secrecy and dishonesty when I read that monthly report and listen to Mr. Liddle. As legislators, you are free to blindly trust whatever you are told by county management and to vote without understanding what you're voting for, like how you voted recently to outsource Public Health's policies and procedures. That resolution showed Public Health's lack of capacity to perform their own basic departmental functions.

Please hire a competent and qualified Director of Public Health this time around instead of a wrecking ball. Hold the Commissioner accountable for the condition of the CHHA, for his biased reporting and a job performance that, I'm told, includes raging at and bullying employees. That behavior should not be tolerated.

Thank you.