



## **OFFICIAL NOTICE AND AGENDA**

Notice is hereby given that the **Nursing Home Operations Committee of the North Central Community Services Program Board** will hold a meeting at the following date, time and location shown below.

**Tuesday, December 7, 2021 at 10:00 AM**  
North Central Health Care – Wausau Board Room  
1100 Lake View Drive, Wausau, WI 54403

*The meeting site identified above will be open to the public. However, due to the COVID-19 pandemic and associated public health directives, North Central Health Care encourages the public to attend this meeting remotely. To this end, instead of attendance in person, Committee members and the public may attend this meeting by telephone conference. If Committee members or members of the public cannot attend remotely, North Central Health Care requests that appropriate safety measures, including adequate social distancing, be utilized by all in-person attendees.*

*Persons wishing to attend the meeting by phone may call into the telephone conference beginning five (5) minutes prior to the start time indicated above using the following number:*

**Phone Number:** 1-408-418-9388    **Access Code:** 248 919 0615

Any person planning to attend this meeting who needs some type of special accommodation in order to participate should call the Administrative Office at 715-848-4405. For TDD telephone service call 715-845-4928.

## **AGENDA**

1. CALL TO ORDER
2. PUBLIC COMMENT FOR MATTERS APPEARING ON THE AGENDA  
(Limited to 15 Minutes)
3. ACTION: APPROVAL OF AUGUST 24, 2021 NURSING HOME OPERATIONS COMMITTEE MINUTES
4. FINANCIAL REPORT – J. Meschke
5. COMMITTEE EDUCATION
6. NURSING HOME OPERATIONS REPORTS
  - A. Mount View Care Center – K. Woller and C. Gliniecki
  - B. Pine Crest Nursing Home – R. Hanson and S. Barnett
7. MVCC & PC CONSTRUCTION UPDATE – J. Meschke
8. NURSING HOME OPERATIONS COMMITTEE CHARTER – J. Meschke

9. BOARD DISCUSSION

A. Expectations of North Central Health Care and Nursing Home Operations Committee

10. FUTURE AGENDA ITEMS AND MEETING SCHEDULE

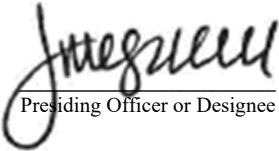
11. ADJOURN

**NOTICE POSTED AT:** North Central Health Care

**COPY OF NOTICE DISTRIBUTED TO:**

Wausau Daily Herald, Antigo Daily Journal, Tomahawk Leader,  
Merrill Foto News, Langlade, Lincoln & Marathon County Clerks Offices

DATE: 12/02/2021 TIME: 9:00 AM BY: D. Osowski



Presiding Officer or Designee

## NORTH CENTRAL COMMUNITY SERVICES PROGRAM BOARD NURSING HOME OPERATIONS COMMITTEE

**August 24, 2021**

**3:00 PM**

**NCHC Wausau Board Room**

Present: X Kurt Gibbs X Paul Gilk ABS Cindy Rider  
X Pat Voermans X<sub>(WebEx)</sub> Bob Weaver X<sub>(WebEx)</sub> Cate Wylie

Staff: Jill Meschke, Jaime Bracken, Jarret Nickel, Zach Ziesemer, Ryan Hanson, Kristin Woller

Others: Dejan Adzic

### Call to Order

- Meeting was called to order at 3:05 p.m. by Chair Gibbs.

### Public Comment for Matters Appearing on the Agenda

- None

### Approval of March 23, 2021 Nursing Home Operations Committee Minutes

- **Motion**/second, Voermans/Gilk, to approve March 23, 2021 Nursing Home Operations Committee Minutes. Motion carried.

### Financial Report – J. Meschke

- For the month of July there was a loss of \$126,000 compared to budget. Loss of budget was \$186,000. From net revenue we are \$1.3 million short of what we had anticipated at this time of year partly due to census not fully recovering. However, we received two other sources of revenue in the form of supplemental payments, which were budgeted for, but significantly higher than estimated. Also received was the Certified Public Expenditure (CPE) payment, which is not budgeted for. With those two payments, it brings us close to the budget forecast.
- MVCC census was around 125 per day. Medicare census has been consistently staying around 10 and the Vent census at 9. Shortage relates to the mix of volume and rate.
- Drug expense has shown a significant increase and we are working on how we account for pharmacy revenues. Traditionally, they have stayed within Marathon County, however, over the last few months we have right sized to account for pharmacy in the counties where services are being provided. Financial statements will be refined to reflect this change.
- Vacancy rate is favorable over the last couple of months.
- Pine Crest losses are slightly higher than anticipated but have plans to improve those numbers. There is a good payer mix so far but still short from net patient revenue perspective. Pine Crest also received the two payments that Mount View received. Census is holding consistent around 92/day with Medicare census consistent at 8. Pine Crest is currently experiencing challenges to retain staff to operate effectively.
- Question was asked about where each county's reserves are at as reserves have had to be used to cover operating losses. Currently NCHC has about 56 days cash available in total investments and cash. Additional detail will be provided to the full board including reserves for each county and a reliable forecast for the 2022 budget.

- The federal government, possibly through CMS, may impose a requirement of vaccinations for all employees in the nursing home. Currently NCHC does not mandate vaccinations but requires all employees to participating in the vaccination program by either receiving the vaccination or signing a declination. Should the mandate be imposed, there is speculation that some staff will refuse the vaccination and leave. NCHC is implementing an incentive program for employees who voluntarily receive the vaccination prior to the potential mandate. If it is a choice of parting ways with staff who refuse the vaccination or engaging with CMS, NCHC has no option but to side with CMS. Currently about 40% of staff at Pine Crest and 56-60% of staff at Mount View are vaccinated. Residents have higher percentage of vaccination rates. With positivity rates increasing in both counties NCHC is preparing to implement restrictions when necessary.

### Committee Education

- Wisconsin State Budget Impact – J. Nickel & J. Meschke
  - Highlights of presentation included:
    - Nursing Home Reimbursement Rates
    - Nursing Home & CBRF Rate Methodology
    - Direct Care Workforce Funding
- Wisconsin Skilled Nursing Bed Licensing – J. Nickel
  - Highlights of presentation included:
    - Wisconsin Licensed Bed Fee
      - \$170/month per bed
      - MVCC – 188 licensed beds / current census 126
      - Pine Crest – 160 licensed beds / current census 92
      - Fee Credit & Use
    - Selling and removal of licensed beds, and requesting new licensed beds
    - Next Steps
      - Review options with NCHC Executive Committee
      - Present proposal(s) to appropriate Boards and Counties
      - New Assessments in 2022 Budget
- Leading Age Overview & Board Involvement Opportunities – Z. Ziesemer
  - Conference currently scheduled for Oct. 6-8 in Green Bay with Wednesday tailored to Board topics. More information will be provided as it becomes available.
  - Leading Age also works with us at the State level, as does the Wisconsin Health Care Association, on increasing the Medicaid rate. An increase was 12% overall but varies nursing home to nursing home. Hopefully we will see 15% but will want to forecast as 12%. Should know more in a few weeks. Also working at the state and national levels to see if vaccine mandates include others, beyond nursing homes, who also take Medicare and Medicaid reimbursement. Will need to adhere to ADA compliance or medical reasons with some staff who have exemptions to vaccinations i.e., religious, etc.
- Mount View Care Center Survey Results & Survey Process – K. Woller
  - Every year the nursing home has an annual State survey which is broken into three parts 1) resident sample of 70% (completed off site), 2) quality of care investigation i.e., interviews with families, residents, and employees, and 3) observation of cares and reviewing medical records.
  - Our survey was conducted in March, and we received just two recommendations (average for nursing homes is eight). The recommendations identified pertained to non-pressure related skin injury and nutrition. All recommendations have been fixed, plans of corrections completed, and are in compliance.
  - Committee members complimented staff for their great work.

- Nursing Home Reporting Change – J. Nickel & J. Bracken
  - Oversight of nursing operations of Mount View and Pine Crest have moved from J. Nickel to J. Bracken. In the past there was combined oversight between them, and it is felt there will be greater efficiency with this move.

#### Nursing Home Operations Reports

- Mount View Care Center – K. Woller
  - Overview of the report provided in the meeting packet was provided.
  - Committee asked for additional information i.e., percent of falls to number of patients and how it compares to last year.
  - As of July 23, the Nursing Tower is in substantial compliance; continue to prepare for occupancy.
- Pine Crest Nursing Home – Z. Zieseemer
  - Overview of the report provided in the meeting packet was provided.
  - CNA class will continue as a recruitment tool.
  - Star rating will have potential to improve after the next annual survey.
  - Lincoln County Board gave the approval for Pine Crest to work with ANI; beginning to work with that process and anticipate converting 3-5 referrals because of it.

#### MVCC and PC Construction Update – J. Nickel

- Move in date for Tower is being pushed out as there have been completion delays due to Covid i.e., CCIT has not received switches to install for the Wi-Fi which affects the electronic medical record system. Larger delay is due to the structural issue on D & F Wing with egress from Tower. Issue must be mitigated prior to occupancy. Meeting with Facilities Maintenance and Miron Construction have occurred; the time constraint should not have a financial impact.

#### Board Discussion

- Right sizing Pine Crest will not be without costs associated with it; will present to Lincoln County for final approval.
- The Board agenda includes a discussion of having two Nursing Home Operations Committees. Two counties each run a nursing home, but NCHC is the Management Company that all agreed will run the operations.
  - Would like NCHC staff to bring forward options and recommendations for right sizing Pine Crest and utilizing vacant areas of the building. Recommendations would be reviewed and approved by Lincoln County as the owner of the building.
  - K. Gibbs and P. Gilk felt there should not be two oversight committees; it is beneficial to compare what is occurring in each nursing home.
  - P. Voermans suggested Ad Hoc Committees could be established when appropriate.

#### Adjourn

- **Motion**/second, Gilk/Voermans, to adjourn the meeting at 4:28 p.m. Motion carried.



# North Central Health Care

Person centered. Outcome focused.

## MEMORANDUM

DATE: November 17, 2021  
TO: Nursing Home Operations Committee  
FROM: Jill S. Meschke, Interim Chief Executive Officer, Chief Financial Officer  
RE: Nursing Home Financial Highlights

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The following items are financial highlights through October 2021.

### Mount View Care Center Skilled Nursing

Mount View experienced a loss of (\$64,867) October and (\$1,074,967) year-to-date. October's performance is 40 percent more profitable than the year-to-date average. Supplemental payments continue to keep revenue over plan.

Net patient revenue improved to 9.4 percent behind plan versus 13.7 percent behind plan year-to-date. The month started with 15 Medicare residents in October. Medicare part A grew to 22 by month's end. Census of 123 residents per day remained under target due to tower transition plans and limited dementia and long-term care beds available. Medicare part B utilization was low at 24 percent. Aegis hired a full-time restorative CNA and will be able to start the enerG restorative program by December.

Personnel expenses were high in October (although down from the previous month) due to staff being out with Covid-related absences, vacations, and FMLA. Vacation days are higher than average with staff using hours they could potentially lose at year end. There are 6.5 CNA FTE open and 3.5 nursing FTE open.

Mount View used little agency staff in October. Nursing supply costs are being closely managed by par levels. Supplies were over budget somewhat in October due to the need to purchase small items for the tower. Drug costs are over plan.

### Pine Crest Nursing Home

Pine Crest has experienced income of \$60,225 October and loss of (\$1,344,229) year-to-date. Rate increases which took effect in July were paid to Pine Crest in October. Overages in personnel, contracted services, and drugs expenses contribute to losses.

Census averaged 88 residents per day in October. Medicare residents for the month averaged 8.5 per day. Revenue has exceeded plan \$642,323 or 6.9 percent year-to-date.

Personnel expenses were high in September due to staff being out with Covid-related absences, the Labor Day holiday, vacations, and FMLA. Additionally, benefit costs have increased in October, which is a plan expected to continue. Agency staff use was required to supplement employed staff to provide adequate care. Year-to-date, Pine Crest has incurred \$650,521 for agency staff expense.

North Central Health Care  
Income Statement  
For the Period Ending October 31, 2021  
Mount View Care Center

	MTD Actual	MTD Budget	\$ Variance	% Variance	YTD Actual	YTD Budget	\$ Variance	% Variance
<b>Direct Revenues</b>								
Patient Gross Revenues	1,395,884	1,588,151	(192,267)	-12.1%	14,777,268	16,229,502	(1,452,233)	-8.9%
Patient Contractual Adjustments	(314,630)	(394,353)	79,723	-20.2%	(4,307,102)	(4,092,595)	(214,508)	5.2%
Net Patient Revenue	1,081,255	1,193,798	(112,544)	-9.4%	10,470,166	12,136,907	(1,666,741)	-13.7%
County Revenue	-	-	-	0.0%	-	-	-	0.0%
Contracted Service Revenue	-	-	-	0.0%	-	-	-	0.0%
Grant Revenues and Contractuals	-	-	-	0.0%	-	-	-	0.0%
Appropriations	125,000	125,000	-	0.0%	1,250,000	1,250,000	-	0.0%
COVID-19 Relief Funding	-	-	-	0.0%	-	-	-	0.0%
Other Revenue	270,245	96,700	173,545	179.5%	2,827,615	966,998	1,860,617	192.4%
Total Direct Revenue	1,476,500	1,415,498	61,001	4.3%	14,547,781	14,353,905	193,876	1.4%
<b>Indirect Revenues</b>								
County Revenue	-	-	-	0.0%	-	-	-	0.0%
Contracted Service Revenue	-	-	-	0.0%	-	-	-	0.0%
Grant Revenues and Contractuals	-	-	-	0.0%	-	-	-	0.0%
Appropriations	-	-	-	0.0%	-	-	-	0.0%
Other Revenue	-	-	-	0.0%	-	-	-	0.0%
Allocated Revenue	158,483	122,407	36,076	29.5%	1,180,799	1,234,840	(54,041)	-4.4%
Total Indirect Revenue	158,483	122,407	36,076	29.5%	1,180,799	1,234,840	(54,041)	-4.4%
Total Operating Revenue	1,634,983	1,537,905	97,077	6.3%	15,728,580	15,588,745	139,835	0.9%
<b>Direct Expenses</b>								
Personnel Expenses	913,559	755,290	(158,269)	-21.0%	8,504,687	7,396,031	(1,108,655)	-15.0%
Contracted Services Expenses	66,689	70,675	3,986	5.6%	722,208	706,750	(15,458)	-2.2%
Supplies Expenses	36,021	26,425	(9,596)	-36.3%	309,847	286,150	(23,697)	-8.3%
Drugs Expenses	47,160	5,500	(41,660)	-757.5%	507,743	67,000	(440,743)	-657.8%
Program Expenses	475	785	310	39.5%	6,657	7,850	1,193	15.2%
Land & Facility Expenses	-	19,152	19,152	100.0%	-	195,537	195,537	100.0%
Equipment & Vehicle Expenses	6,217	22,812	16,594	72.7%	131,602	230,399	98,797	42.9%
Diversions Expenses	-	-	-	0.0%	-	-	-	0.0%
Other Operating Expenses	32,324	28,014	(4,310)	-15.4%	320,679	297,060	(23,619)	-8.0%
Total Direct Expenses	1,102,446	928,652	(173,793)	-18.7%	10,503,423	9,186,778	(1,316,645)	-14.3%
<b>Indirect Expenses</b>								
Personnel Expenses	-	-	-	0.0%	-	-	-	0.0%
Contracted Services Expenses	-	-	-	0.0%	-	-	-	0.0%
Supplies Expenses	-	-	-	0.0%	-	-	-	0.0%
Drugs Expenses	-	-	-	0.0%	-	-	-	0.0%
Program Expenses	-	-	-	0.0%	-	-	-	0.0%
Land & Facility Expenses	-	-	-	0.0%	-	-	-	0.0%
Equipment & Vehicle Expenses	-	-	-	0.0%	-	-	-	0.0%
Diversions Expenses	-	-	-	0.0%	-	-	-	0.0%
Other Operating Expenses	-	-	-	0.0%	-	-	-	0.0%
Allocated Expense	597,404	666,154	68,750	10.3%	6,300,625	6,131,068	(169,557)	-2.8%
Total Indirect Expenses	597,404	666,154	68,750	10.3%	6,300,625	6,131,068	(169,557)	-2.8%
Total Operating Expenses	1,699,850	1,594,806	(105,043)	-6.6%	16,804,048	15,317,846	(1,486,202)	-9.7%
<b>Metrics</b>								
Indirect Expenses/Direct Expenses	54.2%	71.7%			60.0%	66.7%		
Direct Expense/Gross Patient Revenue	79.0%	58.5%			71.1%	56.6%		
<b>Non-Operating Income/Expense</b>								
Interest Income/Expense	-	-	-	0.0%	-	-	-	0.0%
Donations Income	-	-	-	0.0%	(500)	-	(500)	0.0%
Other Non-Operating	-	-	-	0.0%	-	-	-	0.0%
Total Non-Operating	-	-	-	0.0%	(500)	-	(500)	0.0%
Net Income (Loss)	(64,867)	(56,901)	(7,966)	14.0%	(1,074,967)	270,899	(1,345,866)	-496.8%
Net Income	-4.0%	-3.7%			-6.8%	1.7%		

North Central Health Care  
Income Statement  
For the Period Ending October 31, 2021  
Pine Crest Nursing Home

	MTD Actual	MTD Budget	\$ Variance	% Variance	YTD Actual	YTD Budget	\$ Variance	% Variance
<b>Direct Revenues</b>								
Patient Gross Revenues	897,003	973,033	(76,031)	-7.8%	9,607,114	9,558,133	48,981	0.5%
Patient Contractual Adjustments	45,326	(236,308)	281,634	-119.2%	(2,531,680)	(2,335,051)	(196,629)	8.4%
Net Patient Revenue	942,328	736,725	205,603	27.9%	7,075,434	7,223,082	(147,648)	-2.0%
County Revenue	-	-	-	0.0%	-	-	-	0.0%
Contracted Service Revenue	-	-	-	0.0%	-	-	-	0.0%
Grant Revenues and Contractuals	-	-	-	0.0%	-	-	-	0.0%
Appropriations	36,735	36,735	-	0.0%	367,346	367,346	-	0.0%
COVID-19 Relief Funding	-	-	-	0.0%	26,750	-	26,750	0.0%
Other Revenue	230,783	153,556	77,227	50.3%	2,307,825	1,535,558	772,267	50.3%
Total Direct Revenue	1,209,845	927,016	282,830	30.5%	9,777,355	9,125,986	651,368	7.1%
<b>Indirect Revenues</b>								
County Revenue	-	-	-	0.0%	-	-	-	0.0%
Contracted Service Revenue	-	-	-	0.0%	-	-	-	0.0%
Grant Revenues and Contractuals	-	-	-	0.0%	-	-	-	0.0%
Appropriations	-	-	-	0.0%	-	-	-	0.0%
Other Revenue	-	-	-	0.0%	-	-	-	0.0%
Allocated Revenue	27,704	21,670	6,034	27.8%	212,272	221,317	(9,045)	-4.1%
Total Indirect Revenue	27,704	21,670	6,034	27.8%	212,272	221,317	(9,045)	-4.1%
Total Operating Revenue	1,237,549	948,686	288,864	30.4%	9,989,627	9,347,303	642,323	6.9%
<b>Direct Expenses</b>								
Personnel Expenses	583,040	522,742	(60,298)	-11.5%	5,025,321	5,016,948	(8,373)	-0.2%
Contracted Services Expenses	80,453	2,145	(78,308)	-3650.7%	1,024,176	21,450	(1,002,726)	-4674.7%
Supplies Expenses	16,862	12,698	(4,163)	-32.8%	158,691	126,983	(31,708)	-25.0%
Drugs Expenses	21,943	16,550	(5,393)	-32.6%	304,447	165,500	(138,947)	-84.0%
Program Expenses	1,400	600	(800)	-133.3%	10,242	6,000	(4,242)	-70.7%
Land & Facility Expenses	-	-	-	0.0%	-	-	-	0.0%
Equipment & Vehicle Expenses	1,286	2,900	1,614	55.7%	30,623	29,000	(1,623)	-5.6%
Diversions Expenses	-	-	-	0.0%	-	-	-	0.0%
Other Operating Expenses	31,067	20,565	(10,502)	-51.1%	275,228	205,650	(69,578)	-33.8%
Total Direct Expenses	736,050	578,200	(157,850)	-27.3%	6,828,727	5,571,531	(1,257,196)	-22.6%
<b>Indirect Expenses</b>								
Personnel Expenses	-	-	-	0.0%	-	-	-	0.0%
Contracted Services Expenses	-	-	-	0.0%	-	-	-	0.0%
Supplies Expenses	-	-	-	0.0%	-	-	-	0.0%
Drugs Expenses	-	-	-	0.0%	-	-	-	0.0%
Program Expenses	-	-	-	0.0%	-	-	-	0.0%
Land & Facility Expenses	-	-	-	0.0%	-	-	-	0.0%
Equipment & Vehicle Expenses	-	-	-	0.0%	-	-	-	0.0%
Diversions Expenses	-	-	-	0.0%	-	-	-	0.0%
Other Operating Expenses	-	-	-	0.0%	-	-	-	0.0%
Allocated Expense	441,274	478,191	36,917	7.7%	4,505,270	4,718,754	213,484	4.5%
Total Indirect Expenses	441,274	478,191	36,917	7.7%	4,505,270	4,718,754	213,484	4.5%
Total Operating Expenses	1,177,324	1,056,391	(120,933)	-11.4%	11,333,997	10,290,285	(1,043,712)	-10.1%
<b>Metrics</b>								
Indirect Expenses/Direct Expenses	60.0%	82.7%			66.0%	84.7%		
Direct Expense/Gross Patient Revenue	82.1%	59.4%			71.1%	58.3%		
<b>Non-Operating Income/Expense</b>								
Interest Income/Expense	-	-	-	0.0%	(142)	-	(142)	0.0%
Donations Income	-	-	-	0.0%	-	-	-	0.0%
Other Non-Operating	-	-	-	0.0%	-	-	-	0.0%
Total Non-Operating	-	-	-	0.0%	(142)	-	(142)	0.0%
Net Income (Loss)	60,225	(107,705)	167,931	-155.9%	(1,344,229)	(942,982)	(401,246)	42.6%
Net Income	4.9%	-11.4%			-13.5%	-10.1%		



# Nursing Home Operations Committee Facility Report

Month(s): October

*Mount View Care Center*

## Employment Status Update:

Department	# of Openings	Hired in October	Discharges in October
LPN/RN	3.5 FTE	0	1 (retirement)
CNA	6.5 FTE	2	1 involuntary 1 (occasional)
Hospitality Assistants	0	0	0
Life Enrichment	0	0	0
Social Services	0	0	1 (retirement)
Respiratory Therapy	0	0	0
Administrative	0	0	1 MDS coordinator

Our vacancy rate exceeded target for the fifth month in a row. We had 5 employees leave in October. Three employees retired, one CNA was an involuntary termination related to performance and the other termination was an occasional CNA. Our challenge recently has been the number of open holes we have related to employees out with COVID symptoms, vacation time and FMLA. We have a team that meets weekly to discuss retention interventions. We will be holding another emergency CNA class in January.

## Patient Experience:

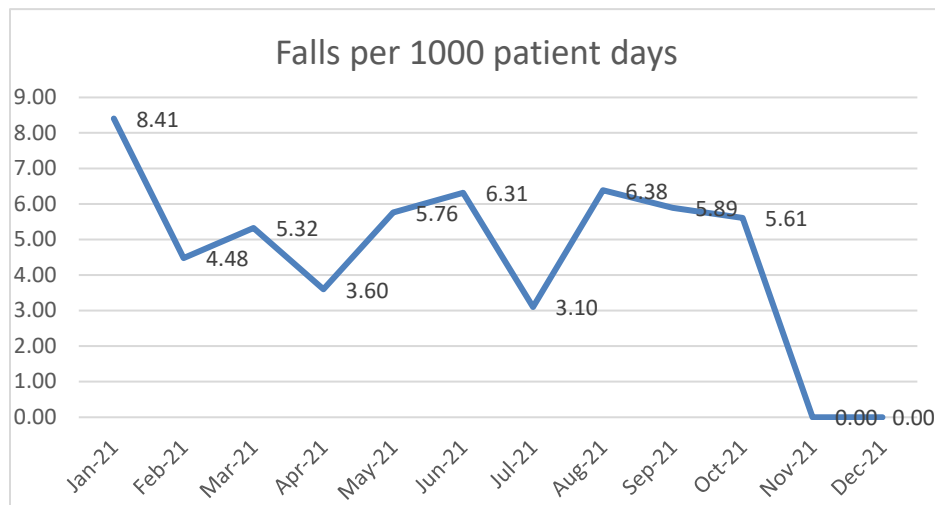
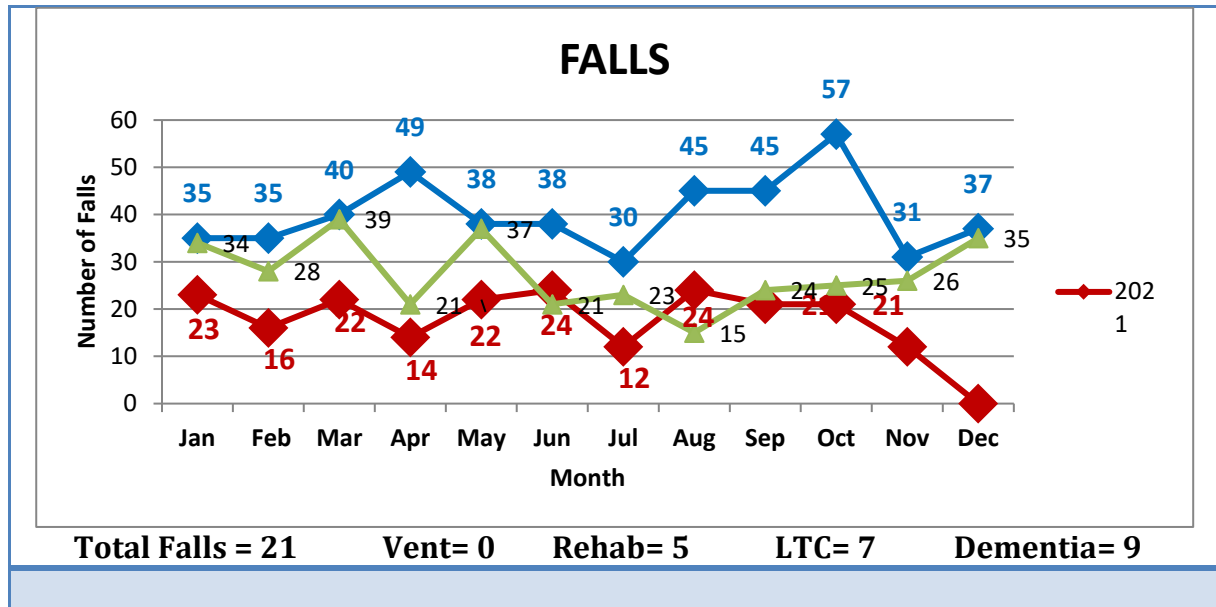
The scores below reflect responses to the question “likelihood of those to recommend”. A total of 28 surveys were distributed, and 6 completed surveys were returned in October. The unfavorable comments were related to residents that were on an enhanced precaution unit and activities and dining had to be put on hold. One resident had concerns about housekeeping, missing laundry and the unit being loud.

DEPARTMENT: Mount View Care Center

FISCAL YEAR: 2021

	TARGET (Rating 2)	MAY	JUN	JUL	AUG	SEP	OCT	YTD
<b>PATIENT EXPERIENCE - PRESS GANEY SURVEY</b>								
Survey Distribution Response Rate		50.0%	37.0%	34.6%	17.9%	16.1%	21.4%	24.3%
MVCC Patient Experience:	81-83	86.8	82.5	83.3	90.0	75.0	91.7	85.7
PAC Patient Experience:	81-83	83.3	75.0	83.3	100.0	75.0	87.5	85.8
LTC Patient Experience:	81-83	85.0	75	75.0	75.0	50.0	100.0	77.1
Legacies Patient Experience:	81-83	100.0	90	91.6	91.67	87.5	87.5	93.5
Activities Patient Experience:	81-83	64.1	80.6	82.5	100.0	65.0	64.0	81.8
Dietary Patient Experience:	81-83	82.9	80.3	85.4	89.2	71.8	67.5	81.9
Housekeeping Patient Experience:	81-83	86.0	89.02	83.6	91.3	72.5	85.8	87.0
Laundry Patient Experience:	81-83	86.5	80.56	75.0	85.0	68.8	85.0	81.1

**Quality:**



<b>CURRENT OVERALL STAR RATING</b> <b>(Out of 5):            3</b>	<b>CURRENT QUALITY STAR RATING</b> <b>(Out of 5):            4</b>
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Our quality measure went from a 3 star to a 4 star. A few things that contributed to the improvement was our June 2020 survey when the IJ citation fell off. We also had improvements in residents being able to move about the unit more freely, going to small group activities and getting outside. We also saw improvements in falls with major injury, residents with urinary trach infections, and the number of catheters we have in the building.

PRIMARY OUTCOME GOAL	↑	TARGET	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	2021 YTD	2020
Nursing Home Readmission Rate	↓	10-12%	5.9%	11.5%	5.0%	8.3%	15.4%	5.30%	15.0%	18.80%	4.20%	8.60%	9.4%	13.5%

**Readmission Summary:** All hospitalizations in October were unavoidable. We had 3 hospitalizations that were within 30 days.

**Total Acute Care Transfers in October = 15**

- 3 – 30-Day hospitalization
  - Change in condition, abdominal distention
  - Unresponsive
  - Shortness of breath, possible blood clot
  
- 7- Inpatient, Unplanned
  - Bit tongue, uncontrolled bleeding
  - Colonic ileus noted in x-ray
  - SOB, CHF exacerbation
  - Unresponsive
  - Poor vitals, lethargy
  - Fall with hip fracture
  - O2 stats low
  
- 1 – Inpatient, Planned
  - Scheduled ankle surgery
  
- 4 Emergency Department Visits

**Regulatory:**

**State Survey visits – None**

**Self-Reports: None**

## Referrals:

Year	May	June	July	August	September	October
Acuity Too High	4	11	9	5	2	0
Expired	5	2	0	1	0	3
No LTC Beds Available	3	3	14	6	0	0
No PAC Beds Available	19	0	1	19	8	0
No NWV Beds Available	0	0	2	2	0	0
No LBL Beds Available	7	19	15	7	7	9
No Payor/Poor Payor Source	4	10	9	0	9	3
No Skilled Needs	3	0	0	0	0	0
Out of County	13	19	24	11	16	31
Out of Network	5	6	3	3	4	4
Outstanding A/R	0	0	0	0	0	0
Patient Non Compliance	0	2	3	0	1	1
Staffing	1	22	15	3	0	0
Ventilator Dialysis	2	3	0	0	1	0
Ventilator Weaned	1	1	0	0	0	2
<b>Went to Competition</b>	<b>8</b>	<b>10</b>	<b>13</b>	<b>10</b>	<b>6</b>	<b>14</b>
Went Home	3	4	2	6	6	7
Went to Inpatient Rehab	1	2	0	0	1	0
<b>MONTHLY TOTAL</b>	<b>79</b>	<b>114</b>	<b>110</b>	<b>73</b>	<b>61</b>	<b>74</b>

In October we had a total of 100 referrals and admitted 26.

## Program Updates:

We transitioned over 70 residents from old MVCC to the new tower. Residents and employees are adjusting to the new environment and workflow changes. We implemented new technology and are using Vocera badges to increase employee communication.

We have had an increase in COVID with our employees. We are diligently working on increasing our employee vaccination percentage and working through exemptions for declination. MV currently has a 76% vaccination rate. There was new guidance on nursing home visitations that came out recently. Visitation is now allowed for all residents at all times as long as residents and visitors are wearing face masks and socially distancing.

We have resumed small group activities for our resident's and resumed church services and entertainment. This has put smiles on our residents faces.

# Nursing Home Report - Month of October 2021

## Pine Crest (PC)

### EMPLOYEE ENGAGEMENT

Experienced turnover for the month was 3.8%, which is slightly over our target of 1.7%-1.9%. Six positions termed: one C.N.A. due to health reasons, one administrative assistant to pursue other opportunities, one cook related to work environment, one MDS coordinator to be closer to family, one dietary aide due to extracurricular activities, and one dietary aide to work environment.

Program did have success in having two hospitality assistants participate in the C.N.A. clinicals during the month of October. They both have transitioned to C.N.A. roles following the conclusion of the class. We are actively working to recruit additional hospitality assistants to have them follow the same process as we've had better luck with applications going this route.

Department	Current # of Openings	Hired in October	Turnover in October
LPN/RN	5.8 FTE; 8 positions	1	1
CNA	6.45 FTE; 11 positions	2	1
Hospitality Assistants		2	
Life Enrichment			
Social Services			
Respiratory Therapy			
Administrative			1
Dietary	0.4 FTE, 1 position		3
Environmental Services			
<b>TOTAL</b>	<b>20 Positions</b>	<b>5 Positions</b>	<b>6 Positions</b>

### PATIENT EXPERIENCE

Seven survey responses were received during the month with a resulting net promoter score of 40, which is slightly under our target of 55-61. Areas that we continue to focus are meal service and general customer service. Laundry related feedback has improved since bringing personal laundering onsite in September. Communal dining services will be reassessed once we see a decline in our community positivity rates. We are continuing to work with organizational development to coordinate customer service orientated training for all employees.

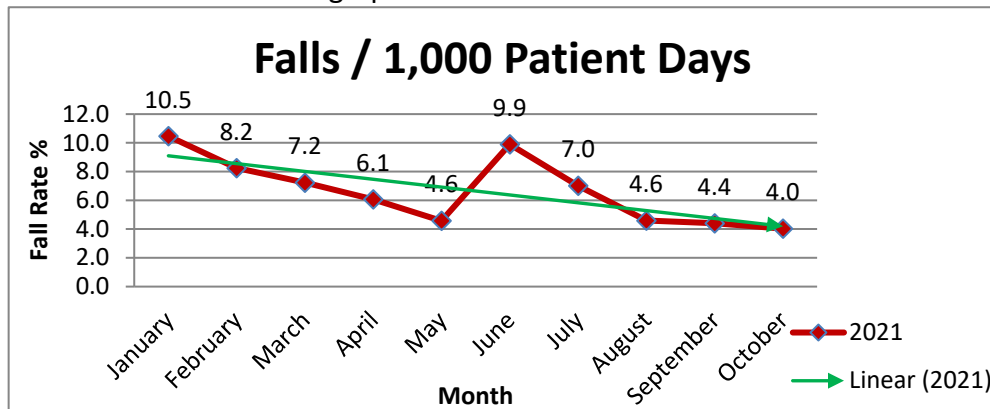
### QUALITY

- Star Rating

<b>CURRENT OVERALL STAR RATING</b> <b>(Out of 5):</b>	4	<b>CURRENT QUALITY STAR RATING</b> <b>(Out of 5):</b>	3
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- **Observed Data**

- **Falls:** Please reference graph below.



- **Hospital Readmission**

Readmission Rate = 15.4%

Total Acute Care Transfers: 8

- 4- ED Only
- 1- 30 Day Re-Admit
  - CHF Exacerbation (MM)
- 3 – Unplanned Hospitalizations
  - Difficult to arouse, low grade fever (KC)
  - UTI, Pneumonia, ESBL (PM)
  - Emesis, low O2 (KC)

- RTH Summary: The rehospitalization percentage for the month did trend up based on a decrease amount of admissions that occurred during the month. No re-admission was deemed avoidable.

## REGULATORY

- **State Survey Visits:** One complaint survey occurred during the month with no issues identified and no citations issued.
- **Self-Reports:** No self-reports during the month.

## REFERRAL TREND

- Commentary:** During the month of October the program experienced 47 referrals. Of these referrals 37 did not admit for the reasons below. We did experience a decline in admissions month over month as we were unable to accept admissions for a week and a half due to a COVID outbreak.

Non- Conversion Reasons Trailing Six Months							
Short Term or Long-Term Referral	Non-Conversion Reason	May	June	July	August	September	October
Short Term Referral	Out of Network Insurance	3	9	5	5	6	7
	Insurance Denied	1					1
	Competitor	1	5	2	4		9
	COVID Outbreak	3			8	1	2
	Expired	2	1				1
	Discharged Home	2	4	1			4
	Swing Bed	2					1
	MVCC						1
	No Appropriate Unit	4	4	5	4	5	2
	No Discharge Plan	1	1	1		5	
	No Payer					2	
	Non-Compliant		1			1	
	Outstanding Bill				1		
	Active Drug User		2		3		
	Recent Sex Offender		1				
Medication Cost	1		1	1			
Staffing			4	5			
No Dialysis Chair in Town			1				
Long-Term Referral	No LTC Bed	4	3	5	3	4	8
	No Special Care Unit Bed	1	3	1	2	1	1
<b>TOTAL</b>		<b>25</b>	<b>34</b>	<b>26</b>	<b>36</b>	<b>25</b>	<b>37</b>

- Additional Commentary:** Reference Table A & B.

TABLE A				
Financial Impact of Lost Referrals Due to Out of Network Insurance				
Time Period	Lost Referrals	Average Daily Reimbursement	Average Length of Stay	Lost Revenue
January	6	\$500.00	21	\$63,000.00
February	5	\$500.00	21	\$52,500.00
March	5	\$500.00	21	\$52,500.00
April	6	\$500.00	21	\$63,000.00
May	3	\$500.00	21	\$31,500.00
June	4	\$500.00	21	\$42,000.00
July	3	\$500.00	21	\$31,500.00
August	5	\$500.00	21	\$52,500.00
September	3	\$500.00	21	\$31,500.00
October	7	\$500.00	21	\$73,500.00
<b>2021 TOTAL</b>				<b>\$493,500.00</b>
<i>*Average daily reimbursement and average length of stay are conservative estimates given a general patient's rehab stay. It can be expected that lost revenue would exceed the financial impacts that are presented.</i> <i>*Additional cost that would be experienced from the additional admissions would be minimal as the largest expense, labor, wouldn't have fluctuated based on the timing of when the referrals were received.</i>				
TABLE B				
Wait List for Long-Term Care & Dementia Care				
<i>*Numbers presented on this table would be in addition to the referrals that are presented above.</i>				
Category	October Wait List Additions		Total # on Wait List	
Traditional Long-Term Care	6		25	
Special Care Unit	1		15	

## FINANCIALS

Average occupancy during the month was 88 on a budget of 100, with an average Medicare census of 9 on a budget of 16. The program experienced a positive net income of \$59,499.00 for the month and has a net income of (\$1,344,229.00) year to date. Additional reimbursement from Medicaid that went back to July 1<sup>st</sup> contributed to the months positive financial position. Accounts exceeding budget for the month are presented in the following table.

Agency cost reduction has seen improvement month over month. However, costs reflected in the financials is up for October as approximately \$10,000.00 worth of services from September was included in the reporting month's \$52,125.00 expense. For the month of October, we did see a continued increase in call offs related to COVID, COVID exposure, or other illness that attributed to ongoing reliance on agency. As a review, the true cost of this expense is a conservative **\$17,375.00**, which is 1/3 of the total. The other \$34,750.00 would have been spent in direct labor cost that would have been covered by our employees covering the vacant shifts. Year-to-date the conservative estimate for **true agency cost is \$216,840.33**, and the remaining \$433,680.67 of the \$650,521.00 would have been spent internally to cover the shifts that were open.

GL ACCOUNT VARIANCE REVIEW							
GL ACCOUNT	SUMMARY	MTD ACTUAL	MTD BUDGET	MTD VARIANCE	YTD ACTUAL	YTD BUDGET	YTD VARIANCE
6340	<b>Aegis Rehab Services-</b> unbudgeted expense.	\$ 27,335.00	\$ -	\$ (27,335.00)	\$ 365,516.00	\$ -	\$ (365,516.00)
6890	<b>Agency Staff-</b> Approximately \$10,000.00 worth of agency expense was for services rendered in September.	\$ 52,125.00	\$ -	\$ (52,125.00)	\$ 650,521.00	\$ -	\$ (650,521.00)
8160	<b>Assessments-</b> total bed tax expense was unbudgeted.	\$ 27,200.00	\$ 20,400.00	\$ (6,800.00)	\$ 272,000.00	\$ 204,000.00	\$ (68,000.00)
6270	<b>Supplies-</b> Room lock (\$570.00)	\$ 786.00	\$ 515.00	\$ (271.00)	\$ 7,639.00	\$ 5,150.00	\$ (2,489.00)
	<b>Allocated Revenue</b>	\$ 20,134.00	\$ 21,670.00	\$ (1,536.00)	\$ 197,910.00	\$ 221,317.00	\$ (23,407.00)
	<b>Allocated Expense</b>	\$ 275,946.00	\$ 295,433.00	\$ 19,487.00	\$ 2,721,120.00	\$ 2,910,889.00	\$ 189,769.00
6350	<b>Other Contracted Services-</b> cable (\$2,00.00). OnShift (\$1,300.00). Copier lease and use (\$1,000.00). Rev cycle management (\$1,500.00). Recurring entry (\$1,300.00). Aspirus lab (\$668.95).	\$ 8,232.00	\$ 7,270.00	\$ (962.00)	\$ 78,293.00	\$ 72,700.00	\$ (5,593.00)
8170	<b>Licensing - Negative variance YTD.</b>	\$ -	\$ 60.00	\$ 60.00	\$ 3,033.00	\$ 600.00	\$ (2,433.00)
6500	<b>Client Transport</b> - Program continues to manage transportation costs and is cognizant of vendors used for patient admissions. Covering admission costs was not budgeted at the start of the year.	\$ 1,400.00	\$ 600.00	\$ (800.00)	\$ 10,217.00	\$ 6,000.00	\$ (4,217.00)
6300	<b>Nursing Supplies</b> - General supply cost increase and purchase of therapy supplies and replacement EZ stand sling (\$500.00).	\$ 13,062.00	\$ 8,958.00	\$ (4,104.00)	\$ 122,248.00	\$ 89,583.00	\$ (32,665.00)
6840	<b>Equipment Repair</b> -	\$ -	\$ 200.00	\$ 200.00	\$ 4,146.00	\$ 2,000.00	\$ (2,146.00)
6980	<b>Stipend</b> - monthly UWEC allocation. Agency C.N.A. (\$324.00).	\$ 2,208.00	\$ -	\$ (2,208.00)	\$ 9,745.00	\$ -	\$ (9,745.00)
6360	<b>Consultations-</b> Pharmacy (\$2,000.00). Medicaid Cost Report (\$2,450.00)	\$ 4,450.00	\$ 2,000.00	\$ (2,450.00)	\$ 27,050.00	\$ 20,000.00	\$ (7,050.00)
6280	<b>Drugs-</b> Accurate reflection of monthly expense.	\$ 21,943.00	\$ 16,550.00	\$ (5,393.00)	\$ 304,447.00	\$ 165,500.00	\$ (138,947.00)





# North Central Health Care

Person centered. Outcome focused.

## North Central Community Services Program Board Nursing Home Operations Committee

### Charter

**Members:** The Nursing Home Operations Committee (NHOC) is a seven (7) member committee consisting of representatives from the North Central Community Services Program Board (51.42 Board) and the general public who are residents of Lincoln and Marathon County with knowledge and/or expertise in long term care, healthcare, and/or business and industry. Three (3) members will be Lincoln County residents with not less than one (1) of the three (3) members being a Lincoln County appointee to the NCCSP Board. Three (3) members will be Marathon County residents with not less than one (1) of the three (3) being a Marathon County appointee to the NCCSP Board. One (1) additional at-large member shall be a community member with expert knowledge and experience in the long term care service sector who shall be a resident of either Lincoln or Marathon County. The Committee shall be chaired only by a member of the NCCSP Board appointed to the Committee by the NCCSP Board Chair.

**Terms:** ———Members will be appointed annually by the NCCSP Board Chair.

**Resource:** ~~NCHC Regional Nursing Home Operations Executive~~ Chief Operating Officer

**Team:** MVCC Administrator  
MVCC Director of Nursing  
Pine Crest Administrator  
Pine Crest Director of Nursing  
NCHC Chief Executive Officer  
NCHC Chief Financial Officer

**Purpose:** The Nursing Home Operations Committee is appointed by the North Central Community Services Program Board to oversee the operations of the Lincoln County nursing home (Pine Crest), and the Marathon County nursing home (Mount View Care Center). Specifically, the Committee is charged with the successful regional operational integration of the two nursing homes while also monitoring and responding to local needs of each nursing home. The Committee works closely with NCHC staff, providing expertise, establishing expectations of operations and monitoring those expectations, including quality of care. The Committee provides consultation with regards to the broad strategic direction for the Nursing Home.

Authority: Reports to and makes recommendations to the NCCSP Board when policy changes are needed. Certain policy decision recommendations must be forwarded by the NCCSP Board to each respective county as stipulated in the Management Agreement with each county for consideration prior to implementation. The Committee will be involved in operational consultation, strategic planning and monitoring performance expectations.

Outcomes: Outcomes will be established on an annual basis for the following categories:

- Demonstrated quality
- Fiscal responsibility
- Strong human relations
- Regulatory compliance
- Resident/family expectations

Meeting: As scheduled by the Committee Chair, ~~Regional Nursing Home Operations Executive~~Chief Operating Officer, or CEO; usually bi-monthly.

Reporting: North Central Community Services Program Board

Adopted: By the Nursing Home Operations Committee, September 19, 2019