

OFFICIAL NOTICE AND AGENDA of a meeting of the Board or Committee

A meeting of the **Executive Committee** will be held at **North Central Health Care, 1100 Lake View Drive, Wausau, WI 54403, Granite Room** at **10:30 AM** on **Monday, May 16th, 2016**.

(In addition to attendance in person at the location described above, Committee members and the public are invited to attend by telephone conference. Persons wishing to attend the meeting by phone should contact Debbie Osowski at 715-848-4405 24 hours prior to the start time of the meeting for further instructions.)

AGENDA

1. Call to order
2. Roll Call
3. Action: Approve 04/12/16 Executive Committee meeting minutes
4. Transition Oversight Committee
5. Performance Contract Update
6. 2017-2021 Capital Plan
7. NCCSP Board Committee Appointments
8. Board Retreat
9. CEO Report
10. Agenda for 5/26/16 Board meeting
11. Future agenda items for committee consideration
12. Adjourn

- If time permits, beginning discussions may take place on future agenda items.
- Action may be taken on any agenda item.
- In the event that any individuals attending this meeting may constitute a quorum of another governmental body, the existence of the quorum shall not constitute a meeting as no action by such body is contemplated.

Signed: /s/Michael Loy
Presiding Officer or His Designee

COPY OF NOTICE DISTRIBUTED TO:

Wausau Daily Herald Antigo Daily Journal
Tomahawk Leader Merrill Foto News
Lincoln & Marathon County Clerk Offices

DATE: 05/09/16 TIME: 2:00 PM
VIA: X FAX X MAIL
BY: D. Osowski

THIS NOTICE POSTED AT:

North Central Health Care
DATE: 05/09/16 TIME: 2:00 PM
By: Debbie Osowski

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.

NORTH CENTRAL COMMUNITY SERVICES PROGRAM BOARD EXECUTIVE COMMITTEE

April 12 2016

10:30 AM

NCHC – Wausau Campus

PRESENT: Jeff Zriny, Bob Weaver, Ron Nye, Jean Burgener (via phone)

ALSO PRESENT: Michael Loy, Gary Bezucha, Becky Schultz, John Fisher (Ruder Ware), Sue Matis

Sue Matis was introduced to the Committee as the new Interim HR Executive. Sue Matis exited the meeting.

Action: Approve 03/08/16 Executive Committee meeting minutes

- **Motion** to approve the 03/08/16 Executive Committee meeting minutes made by Bob Weaver, seconded by Jean Burgener, motion passed 3-0.

Consideration of motion to adjourn into closed session pursuant to Section 19.85(1)(f),(g) for purposes of receiving a report and presentation from legal counsel regarding information collected and maintained in connection with an investigation of circumstances relating to NCHC's obligations as a health care provider and covered entity under HIPAA and applicable state laws. This report contains information that, in combination with other publicly available information, could become protected health information under applicable Federal and state laws. This report is in furtherance of a review of the quality of service provided by NCHC as a health care provider under Section 146.81(2)

- **Motion** to enter into closed session was read and motioned by Bob Weaver, seconded by Jean Burgener, roll call vote, all ayes.

Ron Nye entered the meeting in closed session at 10:37 a.m.

Motion to reconvene into open session and possible announcements regarding items discussed in closed

- **Motion** to reconvene into open session made by Ron Nye, seconded by Bob Weaver, motion passed 3-0.
- **Motion** to direct legal counsel to coordinate a collaborative training with County Corporation Counsels for law enforcement regarding obligations under the 51.42 Statutes, motioned by Jean Burgener, seconded by Bob Weaver, motion passed 4-0.

Becky Schultz exited the meeting.

Consideration of Collaborative Care Model Proposal

- The Committed reviewed the initial Performance Management Contract approved by county board as a precursor to the proposed alternate approach developed with Counsel. A draft Letter of Intent, Collaborative Care Model document and appended documents were reviewed. The model was discussed along with plan for continuing to work with the County to come to terms with a mutually agreeable contract. Michael will forward the documents to both County Administrator Karger and Corporation Counsel Corbett.
- **Motion** to authorize the Interim CEO to continue to move forward with proposed alternatives was made by Ron Nye, seconded by Bob Weaver, motion passed 4-0. The Executive Committee

requested the final draft be brought back to the committee along with regular updates along the way.

Jon Fisher exited the meeting.

Consideration of Amendment to NCCSP Bylaws to allow Appointment of Vice-Chairs to NCCSP Board Committees

- Discussion on the need for this amendment was discussed and the associated memorandum was reviewed.
- **Motion** by Bob Weaver to approve the amendment to NCCSP Bylaws to allow Appointment of Vice- Chairs to NCCSP Board Committees, seconded by Jean Burgener, motion passed 4-0.

30 week Plan Review

- Updates were provided on communication strategies and ongoing initiatives with Marathon County Board.

CEO Report

- Nursing Home complaint was overviewed.
- Announced Dr. Penniman's resignation from the NCCSP Board.
- Discussed potential dates and topics for Board retreat.
- Employment Contracts were updated to reflect withdraw language as a definition of without cause.
- Acknowledged that NetSmart, our EMR vendor will be onsite soon to address issues.
- Update provided on activities of the Administrator's Planning Group.

Agenda for 4/28/16 Board meeting

- Item for amendments for bylaws

Future agenda items for committee consideration

- Update on Collaborative Care model progress

Motion by Bob Weaver to adjourn, seconded by Jean Burgener, motion carried.



North Central Health Care

Person centered. Outcome focused.

MEMO

DATE: April 7, 2016
TO: Executive Committee
FROM: Michael Loy, Interim CEO
RE: Appointment of Vice Chairs to NCCSP Board Committees

Purpose

The North Central Community Services Program (NCCSP) Board has requested for provision to be made for appointment of Vice Chairs to each of the Board's Committees.

Background

The current Board Bylaws last amended March 28, 2013; provide guidance on the form and functions of the Board and the committees of the Board. To accomplish the requested Board action, an amendment to the Bylaws provisioning the appointment of Vice-Chairs to each of the committees must be made.

Recommendation

The pertinent articles for amendment is Article 7-Board Committees Section 7.2 and 7.5. The following amendment to the article is necessary to implement the change to the Bylaws.

Add ()

Delete

Section 7.2 Each of the above committees shall consist of at least four (4) appointed members, at least two (2) of which must be Board members. The Chair and Vice-Chair of the committees must be a Board member. The number of members appointed to committees may be increased by the Chair of the Board. A majority of the committee members shall constitute a quorum to transact business. Actions of committees shall be approved by majority vote.

Section 7.5 Following the annual meeting of the Board, the Chair will appoint members of the Board to respective committees and also designate committee chairs and vice-chairs.

The Bylaws may be amended with five (5) days written notice at any regular meeting of the board requiring a two-thirds (2/3) vote of the members present.

The requested action would be to adopt these amendments to the Bylaws as stated in this memorandum and forward the proposed amendments to the full Board at their April 28, 2016 regular meeting.

Financial Analysis

None



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MEMO

DATE: May 11, 2016
TO: Human Services Operations Committee
Nursing Home Operations Committee
FROM: Michael Loy, Interim CEO
RE: Draft Five Year Capital Plan

Purpose

To deliver on the final recommendation to develop a five year capital plan for the NCHC campus as identified in the Final Report of the Oversight Task Force of Marathon County.

Background

As described in the Final Report of the Oversight Task Force:

B. Marathon County Task Force to Oversee the Creation of a Facilities Plan for North Central Health Care Facilities.

The Facilities Task Force (of Marathon County) was told by NCHC representatives that a long range facilities plan existed for the entire campus except for the space occupied by ADRC-CW. NCHC did not present a written plan. They did present efforts for the remodeling of Mount View Care Center and the aquatic therapy pool study. ADRC-CW expressed frustration with the lack of movement on a plan to remodel space consistent with their needs. This planning was tabled until a decision is made on the current aquatic therapy pool. Given an inability to secure a plan for NCHC and its assertion that a long range facilities plan does not make sense in the fluid and dynamic health care world, the Facilities Task Force recommended that Health & Human Services develop a plan for ADRC-CW's needs once there was clarity regarding the aquatic therapy pool.

No additional action or recommendations were developed by the NCHC Oversight Task Force at that time.

Final Recommendation: Develop a five year capital plan for the NCHC campus which should include but not be limited to the nursing home renovation, aquatic therapy pool, psychiatric hospital, behavioral health unit, and other facility needs.

Recommendation

NCHC Administration has developed a draft Strategic Long-Range Facility and Corresponding Five Capital Year Plan for Service Delivering by North Central Health Care. The narrative plan is accompanied by a summary of 2017 Capital Project Requests and a summary of Forecasted Projects anticipated in 2018-2021. These documents provide a vision but would benefit from further Master Facility Planning in partnership with Marathon County Facilities Management and external resources to determine structurally how we achieve this vision once it is endorsed. We anticipate that work not to be a capital request which could be accomplished in the latter part of 2016 supported by operational funding.

NCHC's Operational Capital funding requests, including small IT projects, replacements furniture and equipment will be further developed through our annual budgeting process and submitted as part of NCHC's 2017 Budget in the fall.

Financial Analysis

Estimated financial impacts are outlined in the adjoining documents.

Timelines

These documents and requests have the following timeline for review, input and approval:

Friday May 13, 2016: NCHC Human Services Operations Committee

Friday May 20, 2016: NCHC Nursing Home Operations Committee

Monday May 23, 2016: Marathon County Health and Human Services Committee

Thursday May 26, 2016: 11:00 a.m. NCHC Finance, Property & Personal Committee

Thursday May 26, 2016: 12:00 p.m. NCCSP Board

Friday June 3, 2016: CIP Requests due to Marathon County

Strategic Long-Range Facility and Corresponding Five Year Capital Plan
for Service Delivery by North Central Health Care

North Central Health Care (NCHC) will publish a Strategic Long-Range Facility Plan and corresponding rolling Five Year Capital Plan for North Central Health Care services on an annual basis. These plans describe NCHC's multi-year capital program vision, the potential financing mechanisms and impact on services. NCHC's Capital Plan focuses on the renewal of existing facilities and systems. Capital planning for an operation the size and age of NCHC's facilities carry a large price tag, but are absolutely necessary to keep NCHC at the forefront of providing health care to our communities. We are providing a vision for more than brick and mortar, we are investing in the healing and well-being of those we serve for generations to come. The main campus for NCHC has over 500,000 square feet with the majority of the campus being 50 years or older with the exception of the Mount View Care Center which has operated for slightly over 30 years. We have reached the thresholds of useful life and operate in a shell of inefficient design and operation; future large scale investment is imminent.

Health care is a rapidly evolving industry where capital projects must be measured in two ways – can they increase operational efficiency, and can they produce better health outcomes? In considering the impact of the Affordable Care Act (ACA) and supporting regulatory changes, everything the health care system provides is now an expense and not revenue. An organization operating in the new accountable care environment must learn to operate with the risk of providing all care for a large population for a fixed price per person per year. At NCHC we are part of a much broader healthcare delivery system which is poised to only integrate more in the shared responsibility for the health of our entire population in our communities. With these changing responsibilities and overall increase in patient population is a corresponding decrease in overall reimbursement and need for increased operational efficiency. Healthcare in a reform environment will start much farther upstream (preventive care) and deliver care much more downstream (home and community based). Clearly, not bricks and mortar solutions at the ends of the spectrum; however, despite these broad shifts in the delivery stream, the acuity of care will increase in the middle driving the need for innovative service delivery environments. Given that services can be done only so cheaply and care can be delivered only so efficiently, the following five major capital objectives come into the forefront of our long-range planning:

1. Provide facilities that enable more efficient clinical operations to enhance health outcomes
2. Plan facilities that enable optimum care for a growing population
3. Invest wisely in future flexibility for changes yet to come
4. Clearly balance first cost versus life-cycle costs
5. Operate and maintain facilities more efficiently

Facility Asset Composition and Ownership Portfolio for NCHC

North Central operates out of a number of different locations identified below by facility identifier, address and ownership status for each location.

Facility Identifier	Address	Ownership Status
Mount View Care Center	2400 Marshall Street Wausau, WI 54403	Leased – Marathon County
Health Care Center	1100 Lake View Drive Wausau, WI 54403	Leased – Marathon County
Lake View Center	1000 Lake View Drive Wausau, WI 54403	Leased – Marathon County
Lake View Professional Plaza	1200 Lake View Drive Wausau, WI 54403	Leased – Marathon County
Lincoln County - Tomahawk Office	213 W. Wisconsin Avenue Tomahawk, WI 54487	Leased – Private Ownership
Langlade County - Antigo Center	1225 Langlade Road Antigo, WI 54409	Leased – Langlade County
Northern Valley – Prevocational Services	5424 Sherman Street Wausau, WI 54401	Leased – Private Ownership
Community Corner Clubhouse	319 N. Third Avenue Wausau, WI 54401	Leased – Private Ownership
Residential – Group Homes		
Bellwood	2211 Bellewood Avenue Schofield, WI 54476	Leased – Marathon County
Bissell	1408 Bissell Street Wausau, WI 54401	Leased – City of Wausau
Chadwick	5006 Chadwick Avenue Schofield, WI 54476	Leased – Marathon County
Heather	5010 Heather Street Schofield, WI 54401	Leased – Marathon County
Hillcrest	1115 Hillcrest Avenue Wausau, WI 54401	Owned – NCHC
Residential – Supported Apartments		
Riverview Towers	550 East Thomas Street Wausau WI, 54403	Leased – City of Wausau
Forest/Jackson	920 Forest Street Wausau, WI 54403	Leased – Private Ownership
Fulton	703 Fulton Street Wausau, WI 54403	Leased – City of Wausau
Jelinek 1	3102 Jelinek Street Schofield, WI 54476	Leased – Private Ownership
Jelinek 2	3104 Jelinek Street Schofield, WI 54476	Leased – Private Ownership

Five-Year Capital Plan for North Central Health Care Programs

Over the course of the next five years we anticipate most, if not all capital projects to be focused on our main campus location in Wausau. However, as with any facility, unanticipated capital funding eligible projects are likely to occur but none are contemplated in our current plan. Almost all NCHC facilities are leased and not owned by NCHC; therefore, any future capital projects would need to be supported by our landlords in form and likely with financial substance. Debt service and capital funding support is available through enhanced reimbursement mechanism through government payers (Medicare and Medicaid) to support projects such as the nursing home; the extent of available reimbursement will be dependent on the scope of each project and the program.

Within the next five years, programming in Langlade and Lincoln Counties is anticipated to grow sustainably to fit within the footprint of current leased space. Small aesthetic improvements in these facilities reaching the capital funding threshold of greater than \$30,000 have the potential to occur in the next five years on an as needed basis. At this time, NCHC has not developed any anticipated major capital improvements in these locations. The same can be said for our Prevocational Services located at North Valley and at the Community Corner Clubhouse. Community Corner Clubhouse recently moved their location and continues on their journey to be non-levy supported. Any future capital projects would likely be handled through community supported capital campaigns and are not anticipated at this time.

The Adult Day Services program located on our main campus has the potential to be relocated. Two options exist: 1) relocation to the vacated space of the ADRC in the Lake View Center as the ADRC transitions off campus or 2) off campus, potentially to the Northern Valley location, which could serve to strengthen the developmental disability continuum and state initiated movement to community based services. The movement of the Adult Day Services program from the Health Care Center will be critical to providing for main campus expansion for Behavioral Health Services. At this time, we are not making a capital request for this move because it is predicated on a number of prior projects, most specifically the Nursing Home and regulatory approval.

Our Community Living "Residential" program provides residential services to the developmentally disabled in one of 10 residential facilities (5 supported apartments and 5 Community Based Rehabilitation Facilities (CBRF)). These facilities are scattered throughout the Marathon County community and vary by the scope of care needs of the consumer. The CBRF facilities are largely home-like environments with 6-8 higher acuity consumers in each location. Our supported apartment facilities typically provide apartment style living for a larger number of more independent consumers in each location. Almost all of these facilities are leased and NCHC is more likely to find alternative locations before making major capital investments in current facilities. Capital funding in our Residential services will likely result from unanticipated failures or an unwillingness of the landlord to provide the requisite updates. In the next five years we will address these capital needs for these facilities in shorter 1-2 planning cycles are not making long-range capital plans for any of these facilities at this time.

Main Wausau Campus

Our main Wausau campus can be divided into a number of workable parts in the scope of this five year capital plan. The main campus has four divisions all connected through interior walkways:

1. Health Care Center (Administration, Community Treatment, Outpatient, Behavioral Health Services and Legacies Dementia units)
2. Mount View Care Center (Post-Acute Care, Long-term Care)
3. Lake View Center (Pool, Health Department, ADRC)
4. Lake View Professional Plaza (CCCW, Special Education)

The first consideration in the long-range plan is how we can improve the experience of the community we serve in interacting and navigating our services through the eyes of those receiving care at NCHC. With this first priority, the primary issue is one of limiting access and providing better navigational structure. There are too many access points in our main campus where our constituents can lose their way. The long-range vision for our main campus facility is to constrict access points to three. This would include access to:

- Nursing Home and Aquatic Therapy services on the Northeast side
- Behavior Health and Crisis services on the West side
- Outpatient and Administrative services on the Southeast side

Separate entrances directly into the Marathon County Health Department and ADRC space in the Lake View Center would remain in addition to the three central access points identified above. Two other significant features of NCHC's main campus long-term capital planning would be to centralize administrative support (enrollment, registration etc.,) in each of these three access point areas. Centralizing functions would support reducing long-term indirect costs as a percentage of NCHC's annual operating budgets. Centralization would also increase coordination between similar programs. The last cornerstone of the long-term design is a single contiguous navigational hallway system from one end of the building to the other. Currently there are too many hallways which create a maze to navigate for the community we serve. Changes to the navigational system lessen the institutional feel and heighten patient experience.

Nursing Home

A major project in the five-year capital plan is the Nursing Home remodel. The Nursing Home project will be a 2017 Capital request but the project will span around two years. Decisions related to the Nursing Home project are significant as they impact long-term planning for Behavioral Health Services. The Nursing Home project rationale remains the same and the financial projections provided by WIPFLI in 2013 as predicted in the "status quo" approach have been playing themselves out on in terms of financial instability if we don't remodel. The project plans have been developed and NCHC awaits the bonding support from Marathon County to move forward.

The final plans for the Nursing Home remodel will be need to be adjusted to provide some minor adjustments to accommodate long-term planning for expanded Behavioral Health Services. This would include adjustment to the Mount View Care Center design to reduce the number of long-term beds in the 2nd floor to accommodate the transfer of the Evergreen dementia program from the Health Care Center. The Evergreen program transfer to long-term care program will reduce the conversion of one of the long-term care wings from double occupancy to private rooms which would reduce the project scope. However, there will be some new modifications to the floor plan to secure the unit. The Dementia wing in the long-term care program would accommodate the 22 beds the Evergreen program currently supports. The long-term care bed availability would be reduced by 12-14 beds from the 59 beds in the initial plan to 45-47 beds. We believe this is a prudent long-term strategy in the current local skilled nursing market.

Once the relocation of the Evergreen and Adult Day Services programs from the Health Care Center has occurred, it will allow the remodel of their current adjoining space to relocate the Lake View Heights Dementia program of approximately 44 beds. The Lakeview Heights space is currently located in the second floor space above Emergency Services and Inpatient hospital. Moving this program will allow for future remodel and expansion of the Inpatient hospital, CBRF and Medically Monitored Treatment program into this vacated space. Those projects are outlined below and would likely be 2018 and 2019 requests. Further, these adjustments to the nursing home project shuffle disparate program locations into more central service areas making our continuum and operational needs more synergistic for the people we serve.

Lake View Center

The Aquatic Therapy pool, Adult Protective Services, Community Treatment Youth team, Marathon County Health Department and the Aging & Disability Resources Center (ADRC) are located in the Lake View Center. Long-term, NCHC would be interested in centralizing Adult Protective Services and Community Treatment by moving these areas out of the Lake View Center to the Health Care Center. The Aquatic Therapy pool project will be submitted as a capital project request for 2017. The pool facility is in a critical status. Failure to commit to the project in the next year would likely result in significant new maintenance costs or complete facility failure. The relocation of the pool near the Nursing Home in a rectangular design makes sense and has strong potential to be operationally self-sufficient. Once the pool is relocated and operational, the current pool envelope and facility should be demolished to provide a new face for the Lake View Center.

Marathon County Health Department's facilities are new and likely will support their anticipated growth. The ADRC has expressed significant interest in relocating off campus in the near future which will free their space. A potential tenant is the relocation of our Adult Day Services program. Regardless, it is anticipated that whoever occupies this space, there will be likely renovations, the scope of which is unknown at this time.

Lake View Professional Plaza

The Lake View Professional Plaza is a separate building on the Southwest corner of our main campus but is connected through an underground walk-way. Currently, the first, second and part of the third floors of the Lake View Professional Plaza is occupied by Community Cares of Central Wisconsin (CCCW). The remainder of the third floor is occupied by Special Education who is interested in expanded space and will likely become the main tenant on the third floor over time. There is a risk that CCCW will continue to downsize or potentially move from this location as their lease expires at the end of 2016 and the Family Care program adapts through Family Care 2.0 recommendations. NCHC does not currently foresee major uses for this space if it becomes available at this time. Therefore, major long-term capital planning for this space is not anticipated at this time.

Health Care Center

The Health Care Center is the space between the Lake View Center and Mount View Care Center. There are two main sections for the Health Care Center that can be generally described as south and north of the cafeteria. The Health Care Center southern facility includes Administration and support services, Community Treatment, Outpatient and Birth to Three programs. The northern portion of the Health Care Center includes the Legacies Dementia programs (currently Evergreen, Gardenside Crossing and Lakeview Heights). The Adult Day Services program is part of this area but is anticipated to be relocated in our long-term planning. Behavioral Health and Emergency services programs are also located in the northern most portion of the Health Care Center and includes Crisis, Inpatient, Ambulatory Detox, Medically Monitored Treatment (MMT), CBRF, and youth stabilization programs.

Long-term, as the Evergreen program moves into the Mount View Care Center and the movement of ADS from this area occurs, there is significant opportunity to expand our Behavioral Health Services to better meet the community needs. The Gardenside Crossing and relocated Lakeview Heights programs would remain as part of the Health Care Center on the western and eastern ends of the northern portion of the Health Care Center.

There will be a major capital improvement request in 2018 for the Inpatient hospital to address the constraint the current unit provides with multiple bed rooms. The unit's design is not a contemporary care environment and has safety concerns. Additionally, the movement of the unit to single occupancy rooms would reduce the need for expensive diversions as a result of capacity issues related to single room assignments in a multi-bed environment. We are currently licensed for 16 beds with an emergency waiver to increase to 20 beds but are often faced with an artificial bed constrain when a patient needs a private accommodation. Along with the Inpatient remodel there will be a need to upgrade the Emergency and Crisis services intake area to support the expanded Emergency services model and improve patient experience in emergency assessment and treatment.

As the Lakeview Heights program is moved out of its current space above the inpatient unit it will provide the long-term opportunity to expand both the MMT and CBRF programs from 6 beds up to 20-24 beds each. The MMT program would provide an opportunity to be relocated onto one side of the current Lakeview Heights program to expand capacity to address the wait list for services of

approximately 150 people and counting. This move would increase the available beds up to 24 beds for MMT and CBRF would be able to expand from 6 beds to 12 beds within the current Lakeside Recovery footprint. During the remodel of the inpatient unit, the other side of the current Lakeview Heights program would be available for a temporary home for the inpatient unit during construction. When construction on the inpatient unit is complete, the CBRF could be moved upstairs and expanded to 20 beds adjoining the MMT program of 24 beds. Lastly, all these improvements and relocations are made; the current Lakeside Recovery space of 12 beds could be developed into an adolescent or geriatric psychiatric unit to further address community need. This final program expansion would be dependent on finding a physician and would be a request in 2019 or 2020.

As we consider long-term planning for the southern portion of the Health Care Center we are thinking out 5-10 years. This portion of our building contains a number of isolated outpatient programs and a maze of separate offices and hallways. Long-term this area would benefit from having one central outpatient and administrative services entrances where program coordination and support can be centralized for better patient experience and outcomes. Offices would be consolidated into two main areas, administration and outpatient services to include Community Treatment, Outpatient, Birth to Three and Adult Protective Services. There are operational efficiencies to be gained and an environment would be designed to support better outcomes.

Master Facility Plan

This document serves as the long-term facility vision. To materialize this vision, we need to engage in a long-term facility master planning initiative with Marathon County Facilities Management staff in addition to external resources to determine structurally how we achieve this vision and what are the potential costs. From there we can start to piece together the pro-forma projections on these projects. A detailed long-range facility plan would more adequately provide a visual for these moves and the major facility implications outside of making the spaces work for the capital planning objectives we laid out at the beginning of this plan, most importantly of which is the outcomes for those we serve.

Short-term projects, such as the Nursing Home and the Pool have more detail and are ready to move. However, in the absence of commitment to the Nursing Home project, there are a number of physical plant projects which must be addressed and will be requested in 2017 and 2018. If the Nursing Home project is initiated, these largely go away as part of the broader project.

SUMMARY OF CURRENT (2017) MARATHON COUNTY CAPITAL PROJECT REQUESTS

PROJECT	DESCRIPTION OF PROJECT	ESTIMATED COSTS
Air Handler 1 & 2	Rebuild HVAC 1 & 2 – New coils, dampers, drive and fan unit	\$510,000
Asphalt Repair and Replacement	Replace the main road and small parking lot, crack fill all other parking lots	\$130,000
HCC Roofing	Replace roofing on MVCC, HCC link and Doctor's Suite	\$93,000
Legacies Flooring	Replace flooring on Evergreen	\$48,000
Mt. View Nursing Home Remodel	Remodel the 240 bed nursing home	\$15,000,000
MVCC Domestic Hot Water and Boiler Replacement*	New boilers and water tanks	\$425,000
MVCC Window Replacement*	Window replacement in the MVCC Building	\$437,750
New Aquatic Building	Build a new building for warm water therapy pool	\$7,400,000
Special Education Upgrades	Replace flooring, paint, and wallpaper in the entire Special Education space in LVPP	\$74,000
Purchasing Cooler/Freezer Replacement	Replace 44 year old walk-in cooler and freezer units	\$68,000
Rolling Stock	Replace Rolling Stock	\$222,000

*Projects included in the Nursing Home remodel project scope that will need to be addressed if further delay in the Remodel project occurs. If remodel project proceeds, these projects will not be additional separate requests.



Capital Improvement Project Forecast for Future Program Years

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General Instructions for completing this form:

- Enter requested information after placing the cursor (point and click) in the corresponding gray-shaded blank.
- For all but the most obvious items, more detailed instructions are available by typing the F1 key while the cursor is placed on the corresponding blank.
- Each box will expand as necessary to include your text. Limits on text length are noted in the F1 instructions.
- Use the tab key to advance the cursor to the next blank; use shift/tab to move the cursor to the previous blank.

1. DEPARTMENT AND CONTACT INFORMATION

Department	North Central Health Care		
Submitted By	Michael Loy	Phone	715-848-4402
Date	May 10, 2016	Email	mloy@norcen.org

2. FORECASTED PROJECTS (1-5 years beyond next fiscal year)

Program Year	Project	Description of Project	Estimated Cost
2018	NCHC Boiler Replacement	Replace 45 year old steam boilers	\$2,000,000.00
2018	Replace Sloped Glazing	Replace leaking sloped window framing in LVC and HCC buildings	\$720,000.00
2018	HCC Phase 1	Inpatient /CBRF/MMT/Behavior Health and Crisis renovation	\$1,900,000.00
2018	HVAC Replacement in Pyramids	Replace the air handlers in the HCC units and related roof work	\$850,000.00
2018	LVPP 3 rd Floor Upgrade	Install new flooring, paint walls and new window treatments	\$66,000.00
2018	Rolling Stock	2 small bus/ 1 small dump truck /1 Van	\$190,000.00
2019	Brick Sealing	Seal the brick exterior on HCC,LVC,LVPP	\$172,000.00
2019	LVPP 2 nd Floor Upgrade	Paint and recarpet 2 nd floor of LVPP	\$155,000.00
2019	Laundry Windows	Replace laundry windows in plant	\$120,000.00
2019	HCC Phase 2	Inpatient /CBRF/MMT/Behavior Health and Crisis renovation	\$1,900,000.00
2019	Rolling Stock	2 Vans, 2 small cars	\$120,000.00
2019	Nurse Call Replacement	Replace nurse call in MVCC & HCC	\$245,000.00
2020	LVPP 1 st floor Upgrade	New flooring and paint on the 1 st floor of LVPP	\$130,000.00
2020	LED parking lot lighting	Replace the lighting on the road and HCC parking lots to LED	\$62,000.00
20			