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, March 23, 2021 at 3:00 PM
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 Committee members and 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 187 990 5072 Meeting Password: 1234

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 January 26, 2021 NURSING HOME OPERATIONS COMMITTEE MINUTES

4. FINANCIAL REPORT – J. Meschke

5. COMMITTEE EDUCATION
   A. Leading Age Overview & Board Involvement Opportunities- Z. Ziesemer
   B. Mount View Care Center Survey Results & Survey Process- K. Woller

6. NURSING HOME OPERATIONS REPORTS
   A. Mount View Care Center – K. Woller and C. Gliniecki
   B. Pine Crest Nursing Home – Z. Ziesemer and R. Hanson

7. UPDATE ON ASSESSMENT OF A POTENTIAL REGIONAL PARTNERSHIP WITH THE PORTAGE COUNTY HEALTH CARE CENTER – M. Loy
8. DISCUSSION ON SCOPE OF UPDATING MARKET ASSESSMENTS AND OPERATIONAL ASSESSMENTS FOR MOUNT VIEW CARE CENTER AND PINE CREST – M. Loy


10. NURSING TOWER CONSTRUCTION UPDATE – J. Nickel

11. BOARD DISCUSSION
    A. CDC Guidance on Nursing Home Visitation – J. Nickel

12. FUTURE AGENDA ITEMS AND MEETING SCHEDULE

13. 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: 03/19/2021   TIME: 4:00 PM   BY: D. Osowski

Presiding Officer or Designee
NORTH CENTRAL COMMUNITY SERVICES PROGRAM BOARD
NURSING HOME OPERATIONS COMMITTEE

January 26, 2021                  3:00 PM                  Conference Call

Present:  X   Kurt Gibbs  X   Paul Gilk  X   Cindy Rider
X   Pat Voermans  X   Bob Weaver  X   Cate Wylie

Staff:    Michael Loy, Jarret Nickel, Jill Meschke, Zach Ziesemer, Ryan Hanson, Kristin Woller, Connie Gliniecki, Dejan Adzic, Kim Rantanen-Day

Call to Order
• Meeting was called to order at 3:00 p.m.

Public Comment for Matters Appearing on the Agenda
• None

ACTION: Approval of November 24, 2020 Nursing Home Operations Committee Minutes
• Motion/second, Voermans/Rider, to approve the November 24, 2020 Nursing Home Operations Committee meeting minutes. Motion carried.

• Financial statements are not available yet for 2020 due to recent staff turnover and preparing year end financials. 2020 projections were provided. A final report will be shared when available.
• We applied for phase 3 Cares Act funding for both facilities but were denied funding for both. Cares Act funding was delegated differently this time and we did not qualify. In December we received several small Cares Act funding amounts related to admissions. Additional Cares Act funding is not anticipated at this time.
• Loy met with Sen. Felzkowski this week and talked about the upcoming biennium budget and skilled nursing facilities.

Committee Education
• Skilled Nursing Facility (SNF) Glossary of Terms Update for 2021 – J. Nickel
  • A Glossary of Terms has been updated with current skilled nursing terms and is a resource to use throughout the year.
Nursing Home Operations Reports

- Mount View Care Center Operations Report – K. Woller
  Highlights included:
  - Recruitment continues to be a strong focus. Few applications, fewer interviews, resulting in just one new hire since October. Pine Crest was recently approved as a CNA training site with a class beginning in February/March which we hope will help fill some CNA vacancies. The following have also impacted recruitment:
    - The number of individuals entering the health care field is decreasing considerably
    - There is competitive pressure
    - In four years starting wages for CNA’s have gone from $11 to $17 per hour; we are around $15
    - The CNA Registry is a recruitment tool that includes individuals who need that requirement to become a nurse, so the actual number of career CNA’s is much smaller than it appears
  - Just 20 of 112 referrals were admitted in December. A significant number of admissions were turned down due to units being on enhanced precautions plus downsizing in preparation for future moves due to the renovation project. A Referral Task Force was established in January to review admissions processes at both facilities to increase admissions.
  - In November and December there were 34 Covid positive residents, and 5 positive employees in December which was significantly lower than previous months.
  - In person visits remain on hold but compassionate care visits continue. Window visits will resume February 1.
  - Vaccination Update: 93% for residents and approximately 120-150 employees completed step 1 of the 2-step vaccination process at MVCC.

- Pine Crest Nursing Home Operations Report – Z. Ziesemer
  Highlights include active recruitment continues including working with NTC to get CNA clinical classes up and running. A few staff have left to competition due to better wages. Local Assisted Living is offering $17/hour but not with the level of benefits offered by NCHC. Employee Appreciation Committee was newly formed to help with internal retention.
  - Patient Experience scores exceeded target with laundry and dining services being an ongoing opportunity this year. Personal laundry will be brought in house which we hope will improve our scores. Dining within resident rooms due to Covid has impacted a low dining score.
  - Referrals in December totaled 41 with 12 admissions. Efforts to improve admissions include:
    - Submitting request to obtain a separate tax ID from Lincoln County which will help with insurance coverage. This will allow us to be in the Aspirus Network and would have allowed us to admit more referrals.
    - Ongoing quarterly meetings with Good Samaritan will be held for better collaboration
    - Working with marketing department to have collateral materials to distribute in the communities
First reported resident Covid case residents occurred 10/28 and last resident testing positive was 12/11 for a total of 48 residents who tested positive.

Virtual visitation continues with in-person visitation on hold yet.

Vaccination clinics have gone well; close to 70 residents received vaccine and almost 70 staff with minimal side effects.

COVID Response – M. Loy
- Over 500 of 800+ employees were vaccinated with more clinics being offered. Second doses will be occurring soon.
- Over 90% of MVCC residents and over 70% of Pine Crest residents received the vaccine.
- Data from the State of WI showed under 1,000 new cases which we’ve not seen that low of numbers in months. Overall number of employees out ill was under 10 this week which was quite a difference from November and December.
- Thank you to our teams for weathering the storm. Feel March 1 should have most of the second round of vaccines completed and be able to resume more normal activities within a week a two after. Feel we will continue with precautions through 2nd quarter; will watch for public health guidance also.
- State legislature is discussing overturning the mask mandate if that occurs NCHC can and will continue to require to wear masks for the foreseeable future.

Update on Assessment of a Potential Regional Partnership with the Portage County Health Care Center – M. Loy
- Since 2018 we have been discussing how Lincoln, Marathon and Portage Counties can work together to lower overall costs, operate as a cohesive regional system with our acute care partners, and do what we need to advance care around higher acuity and specialty care so county nursing homes in communities can remain viable.
- Portage County has completed their assessment about their nursing home’s strategic and operational options.
- Next, we will be doing a deep dive on financial risks and benefits and will bring back to the Board for discussion and consideration on whether to continue to explore a partnership.

Discussion on Scope of Updating Market Assessments and Operational Assessments for Mount View Care Center and Pine Crest – M. Loy
- Covid has had dramatic impact on overall operations i.e., bed counts are down 30% and we anticipate it will be permanent. COVID accelerated 5 to 10 year trends.
- In planning the renovations, designs were made to be able to adjust as needed. Will relook at market and staffing availability in the short-term and decide if we reduce beds even further. We will also connect with CLA to revisit all the assumptions that were made relative to our study 4 years ago, update the financial modeling, and make recommendations to Marathon County on the size and scope of MVCC. If downsizing is necessary, we have alternative plans to use the vacated space for behavioral health services which will create new opportunities.
• Pine Crest has an excessive amount of facility space that has aged, 2 specialty units with about 50% volume, 2 vacant wings, and utility plan issues that need to be addressed. CLA and Wipfli will be updating their previous models for Pine Crest also. Will look for individualized county recommendations and strategic roll up for a regional entity to drive value of working together with identified deliverables. Anticipate bringing recommendations to the NCHC Board in the 2nd quarter of 2021.

2020 Dashboard Review & 2021 Census Targets – J. Nickel
• 2020 MVCC vacancy rate compared to 2019 improved year over year; 11.4 vs. 14.1%
  o Turnover rate will be measured in 2021 rather than Retention
  o Nursing Home Star Rating will be a Quality Star Rating
  o Year over year no significant changes
• Pine Crest did not have 2019 Dashboard
  o Vacancy rate 9.7%
• 2021 MVCC and Pine Crest Census Targets
  o Overall, 2021 census targets for MVCC is 145 with 19 Medicare Census Target; YTD MVCC is currently at 127.4 with 13.6 Medicare; making strides to improve but has been difficult with Covid; the Referral Task Force is working to improve the conversion rate
  o Overall, 2021 census targets for Pine Crest is 100 with 8 Medicare Census Target; current census is at 92 but exceeding target for Medicare at 14.8; Medicare is a key target being highest payer and helps the viability long term.

Nursing Tower Construction Update – J. Nickel
• Overview of Nursing Tower construction progress provided; project completion targe is July 2021

Board Policy Discussion
• Overview of Skilled Nursing Related to Objectives and Key Results – J. Nickel
  o Presentation deferred to next meeting

Future Agenda Items and Meeting Schedule
• No questions or additions

Adjourn
• **Motion**/second, Voermans/Gilk, to adjourn the meeting at 4:08 p.m. Motion carried.

*Minutes prepared by Debbie Osowski, Executive Assistant to CEO*
The following items are financial highlights for January and February 2021.

**Mount View Care Center:**
- MVCC shows a loss through February of ($307,506) compared to a targeted gain of $196,591 resulting in an unfavorable variance of ($504,097).
- MVCC has not received any additional CARES Act funding in 2021. No significant receipts are expected at this time.
- MVCC averaged a census of 127 and 128 in January and February respectively compared to a target of 145. This census is down from fourth quarter 2020’s average of 138.
- The Medicare census averaged 13 per day in January and 16 in February compared to a target of 19. The Medicaid Vent census has increased from 5 in January to 6 in February. Revenue shortfalls from plan are a mix of volume and rate by missing targets in both overall census and Medicare.
- Expenses are above plan through February due to staffing expenses exceeding plan.

**Pine Crest Nursing Home:**
- Pine Crest shows a loss through February of ($383,985) compared to a targeted loss of ($155,637) resulting in an unfavorable variance of ($228,347).
- Pine Crest has received $26,750 of CARES Act funding through February. No significant receipts are expected at this time.
- Pine Crest averaged a census of 92 and 91 in January and February respectively compared to a target of 100. The census is down from fourth quarter 2020’s average of 105.
- The Medicare census averaged 15 per day in January and 13 in February compared to a target of 16. Revenue shortfalls from plan are a mix of volume and rate by missing targets in both overall census and Medicare.
- Expenses are above plan through February due to staffing expenses exceeding plan and use of agency staff.
<table>
<thead>
<tr>
<th>Direct Revenues</th>
<th>MTD Actual</th>
<th>MTD Budget</th>
<th>$ Variance</th>
<th>% Variance</th>
<th>YTD Actual</th>
<th>YTD Budget</th>
<th>$ Variance</th>
<th>% Variance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Patient Gross Revenues</td>
<td>1,365,559</td>
<td>1,536,771</td>
<td>(171,212)</td>
<td>-11.1%</td>
<td>2,855,635</td>
<td>3,238,196</td>
<td>(382,561)</td>
<td>-11.8%</td>
</tr>
<tr>
<td>Patient Contractual Adjustments</td>
<td>(346,847)</td>
<td>(391,024)</td>
<td>44,176</td>
<td>-11.3%</td>
<td>(891,963)</td>
<td>(823,996)</td>
<td>(67,967)</td>
<td>8.2%</td>
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<td>Net Patient Revenue</td>
<td>1,018,712</td>
<td>1,145,748</td>
<td>(127,036)</td>
<td>-11.1%</td>
<td>1,963,672</td>
<td>2,414,200</td>
<td>(450,528)</td>
<td>-18.7%</td>
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<tr>
<td>Appropriations</td>
<td>125,000</td>
<td>125,000</td>
<td>-</td>
<td>0.0%</td>
<td>250,000</td>
<td>250,000</td>
<td>-</td>
<td>0.0%</td>
</tr>
<tr>
<td>COVID-19 Relief Funding</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>0.0%</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>0.0%</td>
</tr>
<tr>
<td>Other Revenue</td>
<td>205,402</td>
<td>221,334</td>
<td>(15,932)</td>
<td>-7.2%</td>
<td>411,000</td>
<td>442,668</td>
<td>(31,668)</td>
<td>-7.2%</td>
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<tr>
<td>Total Operating Revenue</td>
<td>1,349,114</td>
<td>1,492,081</td>
<td>(142,968)</td>
<td>-9.6%</td>
<td>2,624,672</td>
<td>3,106,868</td>
<td>(482,196)</td>
<td>-15.5%</td>
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<tr>
<td>Direct Expenses</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Personnel Expenses</td>
<td>758,066</td>
<td>740,722</td>
<td>(17,344)</td>
<td>-2.3%</td>
<td>1,710,576</td>
<td>1,558,808</td>
<td>(151,768)</td>
<td>-9.7%</td>
</tr>
<tr>
<td>Contracted Services Expenses</td>
<td>73,971</td>
<td>73,175</td>
<td>(796)</td>
<td>-1.1%</td>
<td>156,099</td>
<td>146,350</td>
<td>(9,749)</td>
<td>-6.7%</td>
</tr>
<tr>
<td>Supplies Expenses</td>
<td>25,651</td>
<td>30,175</td>
<td>4,524</td>
<td>15.0%</td>
<td>56,689</td>
<td>60,350</td>
<td>3,661</td>
<td>6.1%</td>
</tr>
<tr>
<td>Drugs Expenses</td>
<td>10,292</td>
<td>7,500</td>
<td>(2,792)</td>
<td>-37.2%</td>
<td>21,263</td>
<td>15,000</td>
<td>(6,263)</td>
<td>-41.8%</td>
</tr>
<tr>
<td>Program Expenses</td>
<td>9,136</td>
<td>10,368</td>
<td>1,232</td>
<td>11.9%</td>
<td>18,909</td>
<td>20,737</td>
<td>1,828</td>
<td>8.8%</td>
</tr>
<tr>
<td>Land &amp; Facility Expenses</td>
<td>22,377</td>
<td>21,889</td>
<td>(488)</td>
<td>-2.2%</td>
<td>22,377</td>
<td>43,777</td>
<td>21,400</td>
<td>48.9%</td>
</tr>
<tr>
<td>Equipment &amp; Vehicle Expenses</td>
<td>31,469</td>
<td>25,246</td>
<td>(6,223)</td>
<td>-24.7%</td>
<td>51,145</td>
<td>50,525</td>
<td>(620)</td>
<td>-1.2%</td>
</tr>
<tr>
<td>Other Operating Expenses</td>
<td>334,591</td>
<td>506,583</td>
<td>171,992</td>
<td>34.0%</td>
<td>927,960</td>
<td>1,015,730</td>
<td>87,770</td>
<td>8.6%</td>
</tr>
<tr>
<td>Total Operating Expenses</td>
<td>1,265,554</td>
<td>1,415,658</td>
<td>150,104</td>
<td>10.6%</td>
<td>2,965,018</td>
<td>2,911,277</td>
<td>(53,741)</td>
<td>-1.8%</td>
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<tr>
<td>Non-Operating Income/Expense</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Interest Income/Expense</td>
<td>876</td>
<td>-</td>
<td>876</td>
<td>0.0%</td>
<td>876</td>
<td>-</td>
<td>876</td>
<td>0.0%</td>
</tr>
<tr>
<td>Donations Income</td>
<td>48</td>
<td>-</td>
<td>48</td>
<td>0.0%</td>
<td>64</td>
<td>-</td>
<td>64</td>
<td>0.0%</td>
</tr>
<tr>
<td>Other Non-Operating</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>0.0%</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>0.0%</td>
</tr>
<tr>
<td>Total Non-Operating</td>
<td>924</td>
<td>-</td>
<td>924</td>
<td>0.0%</td>
<td>940</td>
<td>-</td>
<td>940</td>
<td>0.0%</td>
</tr>
<tr>
<td>Net Income (Loss)</td>
<td>84,484</td>
<td>76,924</td>
<td>7,561</td>
<td>9.8%</td>
<td>(307,506)</td>
<td>196,591</td>
<td>(504,097)</td>
<td>-256.4%</td>
</tr>
<tr>
<td>Net Income</td>
<td>6.3%</td>
<td>5.2%</td>
<td></td>
<td>-11.6%</td>
<td>6.3%</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
## Income Statement

For the Period Ending February 28, 2021

**North Central Health Care\**
\*
Pine Crest Nursing Home\*

<table>
<thead>
<tr>
<th>Direct Revenues</th>
<th>MTD Actual</th>
<th>MTD Budget</th>
<th>$ Variance</th>
<th>% Variance</th>
<th>YTD Actual</th>
<th>YTD Budget</th>
<th>$ Variance</th>
<th>% Variance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Patient Gross Revenues</td>
<td>930,949</td>
<td>886,933</td>
<td>44,016</td>
<td>5.0%</td>
<td>1,909,560</td>
<td>1,859,967</td>
<td>49,594</td>
<td>2.7%</td>
</tr>
<tr>
<td>Patient Contractual Adjustments</td>
<td>(295,302)</td>
<td>(217,850)</td>
<td>(77,453)</td>
<td>35.6%</td>
<td>(550,531)</td>
<td>(456,362)</td>
<td>(94,169)</td>
<td>20.6%</td>
</tr>
<tr>
<td><strong>Net Patient Revenue</strong></td>
<td>635,647</td>
<td>669,084</td>
<td>(33,437)</td>
<td>-5.0%</td>
<td>1,359,029</td>
<td>1,403,605</td>
<td>(44,576)</td>
<td>-3.2%</td>
</tr>
<tr>
<td>Appropriations</td>
<td>36,735</td>
<td>36,735</td>
<td>-</td>
<td>0.0%</td>
<td>73,469</td>
<td>73,469</td>
<td>-</td>
<td>0.0%</td>
</tr>
<tr>
<td>COVID-19 Relief Funding</td>
<td>3,550</td>
<td>-</td>
<td>3,550</td>
<td>0%</td>
<td>26,750</td>
<td>-</td>
<td>26,750</td>
<td>0%</td>
</tr>
<tr>
<td>Other Revenue</td>
<td>171,000</td>
<td>176,456</td>
<td>(5,456)</td>
<td>-3.1%</td>
<td>345,059</td>
<td>352,911</td>
<td>(7,852)</td>
<td>-2.2%</td>
</tr>
<tr>
<td><strong>Total Operating Revenue</strong></td>
<td>846,931</td>
<td>882,274</td>
<td>(35,343)</td>
<td>-4.0%</td>
<td>1,804,307</td>
<td>1,829,985</td>
<td>(25,678)</td>
<td>-1.4%</td>
</tr>
</tbody>
</table>

| Direct Expenses | | | | | | | | |
| Personnel Expenses | 477,201 | 499,740 | 22,540 | 4.5% | 1,092,814 | 1,051,969 | (40,845) | -3.9% |
| Contracted Services Expenses | 125,448 | 3,145 | (122,303) | -3888.8% | 231,374 | 6,290 | (225,084) | -3578.4% |
| Supplies Expenses | 17,764 | 17,898 | 134 | 0.7% | 37,949 | 35,797 | (2,153) | -6.0% |
| Drugs Expenses | 1,933 | 16,550 | 14,617 | 88.3% | 3,781 | 33,100 | 29,319 | 88.6% |
| Program Expenses | 3,114 | 2,600 | (514) | -19.8% | 5,628 | 5,200 | (428) | -8.2% |
| Land & Facility Expenses | 41,819 | 35,459 | (6,360) | -17.9% | 83,638 | 70,917 | (12,720) | -17.9% |
| Equipment & Vehicle Expenses | 23,915 | 24,879 | 964 | 3.9% | 48,966 | 51,019 | 2,053 | 4.0% |
| Other Operating Expenses | 405,178 | 364,848 | (40,329) | -11.1% | 684,372 | 731,330 | 46,958 | 6.4% |
| **Total Operating Expenses** | 1,096,371 | 965,119 | (131,252) | -13.6% | 2,188,521 | 1,985,622 | (202,899) | -10.2% |

| Non-Operating Income/Expense | | | | | | | | |
| Interest Income/Expense | 160 | - | 160 | 0% | 178 | - | 178 | 0% |
| Donations Income | - | - | - | 0% | 51 | - | 51 | 0% |
| Other Non-Operating | - | - | - | 0% | - | - | - | 0% |
| **Total Non-Operating** | 160 | - | 160 | 0% | 229 | - | 229 | 0% |

| Net Income (Loss) | (249,280) | (82,845) | (166,435) | 200.9% | (383,985) | (155,637) | (228,347) | 146.7% |

**Net Income**

-29.4% -9.4% -21.3% -8.5%
Employment Status Update:

<table>
<thead>
<tr>
<th>Department</th>
<th># of Openings</th>
<th>Hired in January/February</th>
<th>Discharges in Jan/February</th>
</tr>
</thead>
<tbody>
<tr>
<td>LPN/RN</td>
<td>3 FTE</td>
<td>.2 FTE</td>
<td>1</td>
</tr>
<tr>
<td>CNA</td>
<td>17 FTE</td>
<td>0</td>
<td>9</td>
</tr>
<tr>
<td>Hospitality Assistants</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Life Enrichment</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Social Services</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Respiratory Therapy</td>
<td>3 FTE</td>
<td>.6 FTE</td>
<td>3</td>
</tr>
<tr>
<td>Administrative</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

- CNA recruitment challenge continues largely related to a small applicant pool, with our last hire in September.
- Discharges have been due to occasional staff not meeting requirements, staff leaving to seek employment outside of the healthcare industry, retirement, and involuntary terminations. We have also experienced several staff who have reduce their FTE status.
- We have 8-12 CNAs that are waiting for the Pinecrest emergency CNA class. We are going to interview and hire them as Hospitality Assistants, this will allow them to become familiar with the unit, residents, and employees. This will also assist in taking a few the non-direct care tasks off the current CNAs workload.
- We are going to hold CNA focus groups to see if there is anything, we can do to increase employee satisfaction and keep critical staff.

Patient Experience:

The scores on the next page reflect responses to the question “likelihood of those to recommend”. A total of 48 surveys were sent out and 13 were received back completed. Low survey volume was in direct relation to exceeding our survey limits with Press Ganey in 2020. We have since adjusted the contract and we received new surveys in mid-February. Comments on survey reflect overall satisfaction with how we handled COVID and families being excited about visitation guidelines.
# Patient Experience - Press Ganey Survey

<table>
<thead>
<tr>
<th></th>
<th>Target</th>
<th>Jan</th>
<th>Feb</th>
</tr>
</thead>
<tbody>
<tr>
<td>Survey Distribution Response Rate</td>
<td>0.0%</td>
<td>27.1%</td>
<td></td>
</tr>
<tr>
<td><strong>MVCC Patient Experience:</strong></td>
<td>81-83</td>
<td>0.0</td>
<td>90.0</td>
</tr>
<tr>
<td><strong>PAC Patient Experience:</strong></td>
<td>81-83</td>
<td>~</td>
<td>100.0</td>
</tr>
<tr>
<td><strong>LTC Patient Experience:</strong></td>
<td>81-83</td>
<td>~</td>
<td>80.0</td>
</tr>
<tr>
<td><strong>Legacies Patient Experience:</strong></td>
<td>81-83</td>
<td>~</td>
<td>100.0</td>
</tr>
<tr>
<td><strong>Activities Patient Experience:</strong></td>
<td>81-83</td>
<td>~</td>
<td>87.0</td>
</tr>
<tr>
<td><strong>Dietary Patient Experience:</strong></td>
<td>81-83</td>
<td>~</td>
<td>76.7</td>
</tr>
<tr>
<td><strong>Housekeeping Patient Experience:</strong></td>
<td>81-83</td>
<td>~</td>
<td>89.5</td>
</tr>
<tr>
<td><strong>Laundry Patient Experience:</strong></td>
<td>81-83</td>
<td>~</td>
<td>80.5</td>
</tr>
</tbody>
</table>

## Quality:

![Falls Chart](chart)

Total Falls = 16  
Vent = 0  
South Shore = 5  
LTC = 4  
LBL = 7

<table>
<thead>
<tr>
<th>Current Overall Star Rating (Out of 5):</th>
<th>2</th>
</tr>
</thead>
<tbody>
<tr>
<td>Current Quality Star Rating (Out of 5):</td>
<td>3</td>
</tr>
</tbody>
</table>

The biggest opportunity for improvement in our quality measure appears to be in our long-term stays and is specific to antipsychotics and activities of daily living. With COVID, we had several residents that were moving less and not leaving their rooms like they used to which triggered change in conditions. With the new CMS guidelines to allow indoor visitations and small group activities, we should see this improve as residents are getting out of their room more. Antipsychotic’s being off target is related to our large population of dementia residents and mental illness.
Readmission Summary: All hospitalizations in January and February were unavoidable.

Total Acute Care Transfers in February = 8

- 2 Inpatient, Unplanned
  - Fracture related to fall
  - Hypotension and low pulse
- 3 within 30 days of admission
  - Elevated WBC, excessive secretions
  - Elevated temp, possible fungal infection
  - Frequent emesis, lethargic
- 2 emergency department visits only
  - Shortness of breath, edema
  - Confusion, slow response, edema
- 1 observation
  - Critical hgb level

Regulatory:

State Survey visits – None in January or February


<table>
<thead>
<tr>
<th>Date</th>
<th>Unit</th>
<th>Reason</th>
<th>Follow Up</th>
</tr>
</thead>
<tbody>
<tr>
<td>1-14-21</td>
<td>LBL</td>
<td>Resident swung and hit another resident on the left side of his face.</td>
<td>No injury noted to resident upon assessment. Residents were separated and neither has recollection of the event.</td>
</tr>
<tr>
<td>2-11-21</td>
<td>LTC</td>
<td>Resident reported her checkbook missing.</td>
<td>Due to resident having a lot of items on her bedside table, it is highly suspected by both resident and staff that it could have easily fallen off the table and right into the garbage can that sits below the table.</td>
</tr>
</tbody>
</table>
**Referrals:**

In February we had 73 referrals with 26 admitted.

We did not admit 51 referrals due to:

- Acuity too high (4)
- No LTC Beds Available (2)
  - Related to being full
- No Legacies Beds Available (6)
  - Waiting on renovation decision
- Out of County (12)
- No Payor/Poor Payor Source (4)
- Out of Network (5)
- Went to Competition (8)
- No Skilled Need (1)
- Went Home (5)
- Expired (1)
- Patient non-compliance (3)

February was a growth month with admissions. We started the month with a census of 126 and 13 Medicare and ended the month with a census of 132 and 19 Medicare. This trend continues into March.

**COVID Status Update:**

Our last positive employee was in December. The vent unit was on enhanced precautions until the middle of January related to employee testing.

Mount View Care Center had 6 positive employees in January and 1 positive employee in February. With the positivity rate below 5% in the county, we have been able to reduce mandatory employee testing to 1x/month as of March 8th.

Compassionate care visits were always allowed on imminently dying residents. We started window visits on Feb. 1st and one month later opened indoor visitations. These visits are scheduled and held in the current MVCC gift shop right inside the front entrance. Life enrichment has been able to schedule small group activities of 10 residents or less.

NCHC held vaccination clinics in January, February, and March. We have a 93% completion rate for residents and 65% for employees.
Annual State Survey:

March 8-11th

The “new” survey process which started in November of 2017 splits the survey into three parts:

1. Resident sample selection and review, comprised of 70% of residents chosen offsite and 30% selected onsite
2. Investigation through interviews with residents, family, and employees,
3. Observation of cares and review of medical records.

Survey Outcome:

2 recommendations

1. F684 – non pressure related skin injury tag related to a resident that didn’t have a weekly assessment or a care plan on a scab that was on the top of a resident’s foot.

2. F812 – nutrition services tag related to:
   - Pasteurized eggs being out of their original container and not having a used by date on them.
   - Reusing alcohol swabs to clean thermometer while taking food temperatures and not allowing the alcohol swab to dry.
   - Not monitoring freezer temperatures.
   - Not covering kitchen equipment when not using.

1 FYI

1. To include more individualized and detailed information on the resident care plans.
Employment Status Update:

<table>
<thead>
<tr>
<th>Department</th>
<th>Current # of Openings</th>
<th>Hired in February</th>
<th>Discharges in January</th>
</tr>
</thead>
<tbody>
<tr>
<td>LPN/RN</td>
<td>4.9 FTE; 10 Positions</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>CNA</td>
<td>12.75 FTE; 18 Positions</td>
<td>1</td>
<td>9</td>
</tr>
<tr>
<td>Hospitality Assistants</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Life Enrichment</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Social Services</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Respiratory Therapy</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Administrative</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Dietary</td>
<td>0.4 FTE; 1 Position</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Environmental Services</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>TOTAL</td>
<td>28 Positions</td>
<td>0 Positions</td>
<td>10 Positions</td>
</tr>
</tbody>
</table>

For the month of February Pine Crest had experienced a 14.8% vacancy rate, which is over the target of 7%-9%. Turnover for the month was 6.9% on a target of 1.7%-1.9%. Ten (10) positions termed for the following reasons: pursue another job outside healthcare (x3); retirement; position at local health system (X2); no call no show; and increased time investment in home business.

During the month the program introduced a process to conduct new hire 30- & 90-day questionnaires. This is in addition to rolling out stay interviews that will assist in our management of employee perception of their work experience. Employee Appreciation Committee is also an established forum that is continuing to improve and address employee morale and engagement.

Program is awaiting on a response from Northcentral Tech College on being able to conduct a nursing assistant clinic, which may serve as a venue to attract individuals into our open positions. In addition, we are continuing to work with Titus Management to assist in recruiting these direct floor positions, with an emphasis on our existing night shift RN role that is available.

Patient Experience:
Twelve (12) responses were received, which is a great improvement over the prior month. Overall net promoter score was 60 on a target of 55-61.

Feedback provided based on the survey results indicated an opportunity to improve:
- Activities: General concern related to limited activities.
- **Care Concern**: Concern was shared from family of a resident who was residing at Pine Crest for hospice services. No issues were shared during the residents stay. Ultimate frustration that was shared by the family was based on the limited amount of visitation that they could have.

- **Quality**:
  - **Star Rating**

    | CURRENT OVERALL STAR RATING (OUT OF 5): | 3 |
    | CURRENT QUALITY STAR RATING (OUT OF 5): | 3 |

  - **Observed Data**
    - **Falls**: Please reference graph below.
    - **Hospital Readmission**: Readmission Rate = 26.3%
Total Acute Care Transfers: 11

- 4 ED Only
- 5-30 Day Hospitalization
  - Dehydration AKI (ML)
  - Fever 103, pneumonia (HS)
  - Wound infection, necrosis (DH)
  - AKI, wound infection (HL)
  - Fall, pain, femur fx (HS)
- 2 – Unplanned Hospitalizations
  - Renal failure, hyperkalemia (RW)
  - Gross anasarca, urinary retention (JS)

RTH Summary: Program experienced a 26.3% rehospitalization rate for the month of February, exceeding the target of 10%-12%. Of the 11 hospitalizations that occurred, one was deemed as avoidable and resulted in provider education on care capabilities that can be offered in a nursing home setting. The remainder of the occurrences were necessary and the result of acute episodes that presented during the month.

Regulatory:

- **State Survey Visits:** No surveys during the months of January & February.
- **Self-Reports:** No self-reports during the months of January & February.

Referrals:

- **Commentary:** During the month of November program experienced 43 referrals. Of these referrals 29 did not admit for the below reasons:
  - Insurance Out of Network (X6)
  - No Payer and/or Past Due Bill (X7)
  - No Covering MD
  - Competitor (X6)
  - Medication Expense
  - Smoke Free Campus
  - Increase Psych Behaviors (X3)
  - Aggressive Behaviors
  - Expired (X2)
  - Home on Hospice
**Covid-19 Status Update:**

*Resident Cases:* The last positive resident case occurred in December. The dedicated COVID unit was closed following this case in late December.

*Employee Cases:* There has been 61 total cases of COVID amongst staff since the start of the pandemic. Only three cases have occurred this year with the last being on February 9th for a staff member who wasn’t in the building for a period of transmissibility.

*Visitation:* The program had coordinated window visits since the beginning of the year and had assisted with compassion care visits on an ongoing basis. Scheduled indoor visitation was reintroduced in the beginning of March. These visits are occurring in the former conference room near the front entrance.

*Vaccination Clinics:* The program held three vaccine clinics over the course of the last two and half months. Staff compliance rate resides at 46% and residents at 73%.

*COVID Testing:* Since the beginning of the year the Lincoln County’s positivity rate has gradually worked its way down. We were happy when the rate dropped to below 10% in February, which resulted in the program moving to once per week testing. We are even more excited to be moving to once per month testing during the week of March 22nd as the rate has fallen below 5%.

*Other Items:* We began beauty services with our outside beautician near the start of March. Small group activities were also reintroduced around this time, with a max of 10 participants at a time. In the near future, we will be looking more at communal dining and how we will be reintroducing this service to our residents.
<table>
<thead>
<tr>
<th>PRIMARY OUTCOME GOAL</th>
<th>JAN</th>
<th>FEB</th>
<th>MAR</th>
<th>APR</th>
<th>MAY</th>
<th>JUN</th>
<th>JUL</th>
<th>AUG</th>
<th>SEP</th>
<th>OCT</th>
<th>NOV</th>
<th>DEC</th>
<th>2021 YTD</th>
<th>2020</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vacancy Rate</td>
<td>7.9%</td>
<td>12.4%</td>
<td>11.6%</td>
<td></td>
<td></td>
<td>12.0%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Turnover Rate</td>
<td>20.23% (7.7%-7.9%)</td>
<td>5.8%</td>
<td>3.0%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>52.2%</td>
<td>N/A</td>
</tr>
<tr>
<td>Patient Experience (Net Promoter Score)</td>
<td>55-61</td>
<td>/</td>
<td>70.0*</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>75.0</td>
<td>54.0</td>
</tr>
<tr>
<td>Nursing Home Readmission Rate</td>
<td>10-12%</td>
<td>5.9%</td>
<td>11.5%</td>
<td></td>
<td></td>
<td>8.7%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>13.5%</td>
<td></td>
</tr>
<tr>
<td>Zero Harm - Residents</td>
<td>Monitoring</td>
<td>3.06</td>
<td>2.80</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>2.93</td>
<td>0.78</td>
</tr>
<tr>
<td>Nursing Home Quality Star Rating</td>
<td>****</td>
<td>***</td>
<td>***</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Referral Conversion Rate</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Direct Expense/Gross Patient Revenue</td>
<td>55.5-57.7%</td>
<td>69.6%</td>
<td>62.6%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>66.2%</td>
<td>65.1%</td>
</tr>
<tr>
<td>Net Income</td>
<td>$10,688-$49,354</td>
<td>$(274,374)</td>
<td>$(33,330)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>$(153,753)</td>
<td>$(11,676)</td>
</tr>
</tbody>
</table>

Higher rates are positive
Lower rates are positive
| PRIMARY OUTCOME GOAL                  | JAN | FEB | MAR | APR | MAY | JUN | JUL | AUG | SEP | OCT | NOV | DEC | 2021 YTD | 2020 |
|--------------------------------------|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|------|--------|------|
| Vacancy Rate                         | 7.9%| 11.2%| 14.8%|     |     | 13.0%|     |     |     |     |     |     | 9.3% |        |      |
| Turnover Rate                        | 20-23%| (1.7%-1.9%)| 4.3%| 6.9%|     |     | 67.8%|     |     |     |     |     | N/A |        |      |
| Patient Experience (Net Promoter Score) | 55-61 | 16.7* | 60.0*|     |     |     |     |     |     |     |     |     | 43.8 | 54.9 |      |
| Zero Harm - Residents                | Monitoring | 4.88 | 5.08|     |     |     |     |     |     |     |     |     | 4.98 | 1.88 |      |
| Nursing Home Readmission Rate        | 10-12% | 14.3% | 26.1%|     |     | 19.6%|     |     |     |     |     |     | 13.1%|      |      |
| Nursing Home Quality Star Rating     | ★★★★★ | ★★★★ | ★★★ |     |     |     |     |     |     |     |     |     | ★★★ | ★★★ |      |
| Referral Conversion Rate             | N/A | N/A | N/A |     |     |     |     |     |     |     |     |     | N/A | N/A |      |
| Direct Expense/Gross Patient Revenue | 57.0-59.3% | 72.7% | 62.6%|     |     |     |     |     |     |     |     |     | 66.3%| 61.8%|      |
| Net Income                           | $20,559-$30,839 | ($139,687) | ($244,298)|     |     |     |     |     |     |     |     |     | ($191,922) | $52,492 |      |
Tuesday May 25, 2021 – 3:00 PM – 4:00 PM

Educational Presentation: Audit Presentation – Talk with Jill. Bi-annual education on what they can do with congressman and senators

Agenda Items
- Review Annual Financial Audit and Fund Balance Statement
- 2021 Financial Status Update
- MVCC Operational Report Out
- Pine Crest Operational Report Out
- Nursing Tower Construction Update

Board Policy Discussion Generative Topic: Q1 OKR & Q2 Plan

Tuesday July 27, 2021 – 3:00 PM – 4:00 PM

Educational Presentation: State budget update; Leading Age Fall Conference

Agenda Items
- 2021 Financial Status Update
- MVCC Operational Report Out
- Pine Crest Operational Report Out
- Nursing Tower Construction Update

Board Policy Discussion Generative Topic: 2022 budget planning and process OKR Q2 review and Q3 plan
2021 NHOC BOARD CALENDAR

Tuesday September 28, 2021 – 3:00 PM – 4:00 PM

**Educational Presentation:** Covid-19 Industry impact review and projections

**Agenda Items**
- 2021 Financial Status Update
- MVCC Operational Report Out
- Pine Crest Operational Report Out
- Nursing Tower Construction Update
- Strategic Development & Physician Coverage Outlook
  - Behavioral Health Collaboration NCHC- Dr. Gouthro

**Board Policy Discussion Generative Topic:** Q3 OKR review & Q4 plan

Tuesday November 23, 2021 – 3:00 PM – 4:00 PM

**Educational Presentation:** Determined throughout 2021 outcomes

**Agenda Items**
- 2021 Financial Status Update & Year End Projections
- MVCC Operational Report Out & Year End Projections
- Pine Crest Operational Report Out & Year End Projections

**Board Policy Discussion Generative Topic:** TBD