

**Board of Directors
Champaign County Nursing Home (CCNH) –Minutes
Urbana, Illinois
March 9, 2015**

Directors Present: Anderson, Banks, Cowart, Emanuel, Lyn, Hodson, Palinkas

Directors Absent/Excused: None

Also Present: Busey, Gima, Noffke, Nolan

1. Call to Order

The meeting was called to order at 6:00 p.m. by Chair Emanuel.

2. Roll Call

Nolan called the roll of Directors. A quorum was established.

3. Agenda & Addendum

Agenda was approved as amended (motion by Banks, second by Palinkas, unanimous).

4. Approval of Minutes

The open and closed session minutes of February 9, 2015 were approved as submitted (motion by Anderson, second by Hodson, unanimous).

5. Public Participation

David Laker distributed a handout to the board detailing the Nursing Home's Family Council Meeting on February 17, 2015. Mr. Laker additionally noted his concerns with the nursing home's staffing levels as well as problems with food services.

6. Progress Report from Healthcare Services Group

Mr. Justin Schneider, Regional Manager of HCSG, introduced Mark Sweetmore, the District Manager for Healthcare Services Group. Mr. Sweetmore completes weekly sanitation audits at the nursing home while working with the food service management staff. In his audits, Mr. Sweetmore notes a need for improved organization and labeling of food storage areas as well as improved cleanliness in dish storage areas. Diane Spencer, HCSG Food Service Director, has been at the nursing home for 4 weeks and is working to improve sanitation while Mr. Sweetmore is not in the building. Resident satisfaction scores have continued to improve while the timeliness of meals is still an issue due to the loss of 4 staff members in the last month. Mr. Banks asked why 4 staff members were lost. Mr. Sweetmore explained that these 4 individuals were asked to leave due to attendance and performance issues.

Mr. Lyn asked if the meal menus have been changed due to resident complaints. HCSG's Food Dietician explained that menu items are switched at resident's requests. Chicken à la King was replaced with ham, beans and cornbread, and Turkey à la King was replaced with Chili. Additionally, Fried Chicken Sunday's were reintroduced due to resident request at the nursing home's resident council. Mr. Sweetmore added that an evening food committee will be held in order for residents and family members to review new menus and make changes before menus are implemented.

Mr. Banks noted that some residents will always be dissatisfied with menu items; however, if larger issues such as the timeliness and warmth of meals are corrected, residents' complaints with menu items might decrease. Mr. Lyn confirmed and added that the number of food service workers needs to be consistent in order to correct the larger issues.

Ms. Emanuel added that food service is seen as one of the nursing home's top two issues. Fluctuations in the quality of food service have been seen throughout the last year and improvements need to be seen as soon as possible. Ms. Cowart asked if meals are prepared on site. Mr. Schneider confirmed that meals are prepared on site.

Mr. Anderson asked HCSG what they plan to do in order to correct the large issues at hand, such as food quality, timeliness of meals and inconsistent staffing. Mr. Sweetmore explained that staff members and kitchen staff members in particular need improved training. Food production needs to be corrected and consistent in order for quality meals to be served to residents. Mr. Schneider added that HCSG's first goal is to be fully staffed at the nursing home. Throughout the month of March, HCSG had only 2 fully staffed shifts and food service managers were filling in for missing staff members. Four new staff members have been hired and will start orientation in the coming week. Additionally, new applications have been received from better qualified candidates as a result of increased recruiting efforts on behalf of HCSG. Mr. Schneider noted that HCSG's second goal is to improve staff retention. 6 new staff members were hired in the last month and only 1 staff member from that round of hiring remains at the nursing home.

Mr. Lyn asked about the 5 staff members that left. Mr. Sweetmore noted a portion of that group was asked to leave due to attendance and performance issues while others did not complete necessary training and certifications for the position. Mr. Anderson noted that better quality candidates are needed in order to improve staff retention and asked if HCSG is competitive in the marketplace. Mr. Schneider explained that food services workers are Champaign County employees, not HCSG employees, and wages are competitive as compared to many others homes in the state. Mr. Anderson asked who is hiring workers at the nursing home on the County's behalf. Ms. Busey noted that the nursing home conducts its own hiring while HCSG provides management. Mr. Palinkas noted that the problem may stem from the fact that the market in Champaign County does not have a workforce interested in food service jobs at the nursing home or the nursing home is selecting workers that have little likelihood of success. Additionally, the hiring process should be considered. Ms. Emanuel confirmed that recruitment and retention of staff members both need improvements.

Ms. Hodson noted that while she worked for the nursing home in the 1980's and 1990's, CNA and food service workers both had high turnover rates. Wages may be competitive throughout the state; however, the environment for food service workers may be more competitive in our area due to the large number of restaurants and assisted living facilities. Additionally, Ms. Hodson noted that a comparison of attendance policies in other nursing homes in the area could be considered during annual negotiations.

7. Nursing Home Facility Mechanical Study

a. GHR Report on Nursing Home Mechanical Systems

Dana Brenner, Champaign County Facilities Director, reported that in August 2014 the Physical Plant of Champaign County inspected the nursing home's maintenance and mechanical systems in order to determine a baseline status of each system. GHR provided a fair price to conduct a thorough assessment of all mechanicals within the nursing home, which included a physical inspection and interviews conducted with county maintenance workers who have worked at the nursing home. After the assessment was completed, GHR was asked to supply a priority basis

and price range for each project.

b. County Facilities Director Report on Priorities for Nursing Home Mechanical Systems

Two items in the GHR report need immediate assistance. First, the nursing home has 5 water heaters that supply hot water throughout the building. Of those 5 water heaters, 4 units contain corrosion that has produced holes in the air intake and cannot be repaired. Second, the nursing home has 4 boilers in the building. One boiler is condemned due to its air intake placed 3 feet away from the exhaust of the laundry room dryers, which has caused the boilers to ingest lint. The additional 3 boilers have lint problems as well and they are not units that can be opened and cleaned.

Mr. Palinkas noted that it seems early for corrosion and failures to be occurring in the water heaters and boilers. Mr. Brenner explained that water heaters will operate normally for 8 to 10 years, and the nursing home is 9 years old. The 5 heaters in the nursing home were manufactured in 2002 and they are beyond warranty. Mr. Palinkas noted the design flaw in the boiler intake by the laundry exhaust and asked if this will be corrected when new units are installed. Mr. Brenner explained a decision to reengineer the laundry exhaust or move the laundry room to a different location needs to be determined before new boilers are purchased and installed in the same location.

Ms. Cowart asked what the Physical Plant can do to correct some of the problems provided on Mr. Brenner's list. Mr. Brenner explained that some items have already been completed by the physical plant and additional items will be completed as more assistance becomes available.

c. County Facilities Director 5-10 year Mechanical and Building Envelope Expense Projections

Mr. Brenner noted that the total cost for all projects is about \$2.2 million, but costs will be distributed over a 10 year period based up the priority basis provided by GHR. Additional projects and recurring costs will be encountered, but each project will be able to be completed within a 10 year period.

Ms. Emanuel noted the price of the first project is \$853,000 with \$500,000 in the FY2015 budget. Mr. Brenner confirmed but noted that it is dependent on the laundry exhaust issue. If the laundry issue can be corrected, boilers can be purchased and replaced on a rolling basis in order to avoid a large one-time purchase of 4 boilers. Mr. Anderson asked how much it will cost to correct the laundry issue. Mr. Brenner noted that main costs will include plumbing and electric, but a new location needs to be determined before a price can be discussed. Ms. Hodson asked about the large amount of space in the basement for relocation. Mr. Brenner explained that the mechanical rooms and boilers are directly next to each other and vent together through the roof. Options have been discussed with GHR to vent the laundry out of the side wall instead of the roof in order to correct the air intake issue with the boilers.

Ms. Emanuel asked how the board should proceed with the amount of projects that need to be completed. Mr. Brenner explained that Ms. Noffke and Mr. Gima should work with their respective staffs as well as Ms. Busey and the Deputy County Administrator in order to determine possible solutions to present to the board. Mr. Gima explained that every option needs to be considered and the first priority is to solve the laundry lint issue. Mr. Brenner noted the boilers made it through winter. Currently, 2 boilers are taking in clear air from the mechanical room; however, 3 boilers are needed for continuing and efficient operations.

Ms. Busey noted that Item D is an action item for the board to approve GHR to be hired in order to prepare the bid documents for the water heater replacement project. Ms. Emanuel noted options and costs should be considered for each project before anything is approved by the board beyond the water heater replacement project. Mr. Brenner noted that a bid document can be prepared for the next meeting if GHR is hired and upon approval of the bid document, an RFP could be released. Ms. Emanuel asked if a bid document and a recommendation for the boilers could be prepared for the next meeting. Mr. Brenner confirmed that a bid document can be prepared but ideas still need to be considered for the boilers.

- d. Approval to Hire GHR for Water Heater Replacement Project in Amount Not to Exceed \$12,245

Motion by Palinkas to Hire GHR for Water Heater Replacement Project in Amount Not to Exceed \$12,245; , second by Anderson.

Ms. Emanuel asked why GHR was chosen. Mr. Brenner noted that GHR has worked with the nursing home for the past 2 – 3 years and they are very experienced and knowledgeable about the mechanical systems in the nursing home. Ms. Busey explained that GHR is already familiar with the building and assisted the County in litigation when the original architects of the building were sued after many issues were found in regards to the mechanical and electrical systems. Ms. Emanuel asked if competitors should be considered. Ms. Busey explained it is under the amount required for competitors to be considered and the nursing home has a previously established relationship with GHR, which allows the nursing home to forego the competitive process.

Upon vote, **Motion carried.**

8. Administrator's Report

- a. Quality – Kathy Vanderslice, Director of Nursing

Ms. Noffke reported on the use of antipsychotic medications in the nursing home, which is a new quality measure added to the 5 star CMS rating. Reducing the rate of antipsychotic medication use has been the focus of several CMS initiatives. The Food and Drug Administration has warned that antipsychotic medications can have significant side effects and are associated with an increased risk of death when used in elderly patients with dementia. Ms. Noffke provided quarterly data reported since June 2014 that details the use of antipsychotics in long stay and short stay patients. Ms. Emanuel noted from the data that the nursing home is below the national average of antipsychotic use in both short stay and long stay patients.

Ms. Noffke noted that since updates were made to the CMS State Operational Manual on November 26th, 2014, updates have been made to nursing home policies and procedures in order to ensure proper documentation is on hand and that risks and side effects of medications in resident care plans are assessed. Antipsychotics are not always used even if a resident has a condition that qualifies for antipsychotic use. Plans are in place to gradually reduce the amount of antipsychotics administered as use of the medication is prolonged. Non-pharmacological intervention is always utilized before antipsychotics are used, and family members must be fully informed before use is administered. Weekly psychotropic meetings are held throughout the building in order to get staff members involved in the monitoring of resident behaviors and potential side effects as well as the use non-pharmacological interventions and care plans. The pharmacist still conducts monthly drug regimens and provides recommendations for reductions to health care providers.

Ms. Vanderslice noted that weekly psychotropic meetings are very useful and ensures staff

members are doing a thorough and correct job. Ms. Noffke noted that antipsychotics are at a high level of scrutiny with the Illinois Department of Public Health and weekly psychotropic meetings ensure that staff members are providing the best care possible. Additionally, antipsychotic use reductions have been met, and new goals have been set to reduce the number even further. Documentation of care plans and reductions in antipsychotic use will be essential in continued reductions.

9. Management Report

a. January 2015 Financial Management Report

The average daily census was 190.6 residents with 14.1 Medicare residents. There were 773 Medicaid conversion days, and Mr. Gima would like to see that number increase, which would result in the nursing home getting paid for more Medicaid applications. The February census was 193.8 residents and the current census is 191 residents.

January closed with a net loss of -\$18,747, and cash flow from operations for the month is \$40,992.

Admissions and referrals were down in February; however, it is a shorter month than others. March has seen 2 admissions so far with 3 tentative admissions and no planned discharges.

Agency costs have continued to decrease since December with February showing tentative agency costs at \$47,077.

The cash balance at the end of January was \$330,041. Receivables increased from \$5 million to \$5.2 million. Accounts payable increased from \$1.7 million to \$1.8 million. Open Medicaid applications were down to 40 at the beginning of the January but have since increased to 52 applications with the admission of 12 residents that have community Medicaid. These are individuals who have been previously approved for Medicaid but have never received long term care services. Individuals who have been approved for community Medicaid must apply for long term care Medicaid coverage, but the process requires the submission of a short form without the need for financial documentation. The risk of denial for long term care coverage is minimal. Under normal circumstances, these applications are approved quickly. Progress to expedite applications is still being made and February is expected to show 500 conversion days.

b. Strategic Objectives Metrics Report

Mr. Gima noted that the Pinnacle Food Quality Score is down from December while the Dining Score has increased since December. The nursing home is still below the national average in both scores. 7 out of 16 Pinnacle Survey Scores were met or exceeded in January.

HealthPro will assist with developing plans for rehab space and assisting with licensure, and negotiations are still being made. An update will follow in May in regards to the outpatient rehab program.

Staff education is a continuing effort and is provided from Carle Clinic Nurse Practitioners. Dr. McNeal and Christie Clinic Nurse Practitioners have taken over the quarterly nurse training activities.

Mr. Lyn noted that training goals for nurses were not met in several categories. Ms. Noffke noted the numbers reflect year-to-date totals for 2015 and goals were met in 2014. Mr.

Anderson asked if the numbers reflect staff members who were trained but then left. Mr. Gima confirmed. Mr. Anderson noted that the training data should include the total number of staff members who were employed and trained in the fiscal year. Mr. Gima noted that the numbers reflect a specific day in the month and the numbers will fluctuate. Mr. Lyn asked why the number still isn't at 100% consistently. Ms. Noffke noted that training classes occur on a rolling basis and all staff members are trained as soon as possible after they are hired.

Medicare 30-day readmissions rates are down to 8% in February from 33% in December. Mr. Gima noted that the nursing home is working with Carle Clinic to further reduce readmission rates.

The CMS 5 Star Rating has changed the methodology it utilizes to rate nursing homes. Quality measures have been changed, which impact the new score the nursing home received. Before the rating system was changed, the nursing home's overall rating was 2 stars with a quality rating of 5 stars. Under the new methodology, the new rating is 1 star because the nursing home's quality rating fell from 5 stars to 4 stars.

The annual turnover rate for the year of 2014 was 52%.

c. Management Update

Ms. Emanuel referred board members to his management update and to ask if they had any additional questions.

d. Compliance Update

Ms. Emanuel reminded board members to complete their annual compliance training if they had not already done so. Mr. Gima asked board members to fill out and turn in the Compliance Program Acknowledgement and Conflict of Interest Questionnaire at their earliest convenience.

e. Approval of Compliance Program Commitment Reestablishment Resolution

Motion by Palinkas to approve the Compliance Program Commitment Reestablishment Resolution; second by Lyn. Upon vote, **Motion carried.**

f. Approval of Release of RRP for Dietary Services Management Services

Ms. Emanuel noted that Healthcare Services Group has not provided satisfactory services in the year they have been with the nursing home and the nursing home is seeking a new provider for dietary services. Healthcare Services Group has the opportunity to reapply during the RFP process but the board would like to see what other providers are in the area.

Ms. Cowart asked for specific qualities the board is looking for in a dietary service provider. Ms. Emanuel explained that board is looking for improved satisfaction in quality and timeliness and meals as well as improved food service scores. Ms. Cowart asked about on site preparation. Mr. Palinkas and Mr. Lyn noted that to a degree frozen food is delivered to the nursing home. Ms. Emanuel noted that on site preparation of food is a quality the board should look for when seeking a new dietary service provider. Mr. Anderson asked who makes the selection for the new dietary service provider. Ms. Emanuel explained that MPA will provide all research and recommendations to the board that will approve a new provider based upon MPA's recommendations.

Ms. Busey noted that once the RFP is written, board members should be provided with a copy in order to review and provide recommendations to MPA before it is released.

Mr. Lyn asked about the quality of vendors for dietary services in the area. Ms. Noffke noted that there are 4 potential vendors who are interested. Mr. Anderson asked if these vendors already provide services to nursing homes. Ms. Noffke confirmed and noted that she still has research to do. Mr. Gima noted that an RFP process was not utilized during the last hiring for dietary services and hopes that a formalized process will provide the board with better quality services.

Motion by Palinkas to approve the release of RRP for Dietary Services Management Services; second by Anderson. Upon vote, **Motion carried.**

10. Other Business

a. Expectations

Ms. Emanuel noted the concerns the board has in regards to survey scores and food service, and action plan was developed in order to address these issues. Staffing and retention reports for CNAs and Food Service Workers will be compiled and evaluated each month in regards to staffing issues.

The Pinnacle Scores are below the national average and the nursing home is striving to be above the national average in every category. Overall satisfaction scores are trending downward with nursing care scores remaining constant. The quality of food scores continues to trend downward. Cleanliness scores have been on the rise with laundry services on a downward trend. Individual attention scores, communications scores and response to problem scores have been on the rise since January. Overall, scores have remained consistent with slight downward trends, but January scores have shown improvements.

Ms. Noffke clarified that resident satisfaction scores are based upon whether or not residents were directly consulted during the survey with only 3 residents being contacted. Additionally, errors in reporting were experienced and correct data will be available in April.

11. Next Meeting Date & Time

The next meeting date and time for the Nursing Home Board of Directors is Monday, April 13, 2015 at 6:00 p.m.

12. Adjournment

Chair Emanuel declared the meeting adjourned at 7:45 p.m.

Respectfully submitted

Brian Nolan
Recording Secretary