

Minutes

**Operating Board of Directors
DeKalb County Rehab & Nursing Center
September 13, 2017**

Note: These minutes are not official until approved by the Rehab & Nursing Operating Board at a subsequent meeting. Please refer to the meeting minutes when these minutes are approved to obtain any changes to these minutes.

Present Directors: Jeff Whelan, Rita Nielsen, Ferald Bryan, Greg Millburg, Misty Haji-Sheikh
Absent Directors: none

Also Present: Gary Winschel, Bart Becker, Kris Decker
Also Absent: Gary Hanson

Jeff Whelan called the meeting to order at 7:02 am.

Motion: Greg Millburg moved to approve the agenda, Misty Haji-Sheikh seconded the motion.
Voice Vote: Jeff Whelan asked for a voice vote on the approval of the agenda. All Members voted yea. Motion carried unanimously.

Motion: Rita Nielsen moved to approve the July 2017, Operating Board minutes, Ferald Bryan seconded the motion.
Voice Vote: Jeff Whelan asked for a voice vote on the approval of the minutes. All Members voted yea. Motion carried unanimously.

Public Comments: There were no public comments.

Old Business: None

New Business: None

Management Report:

Operations and Finance:

Gary Winschel gave a report:

Census is increasing; currently 188 beds full, out of 190.
Continued efforts toward enhancing staffing are being implemented.

Total ADC of 178.0 is 4.0 above budget. The July ADC increased by 3.5, coming in over budget by 4.0; Medicare census was 0.2 over budget, Medicaid census was 16.9 lower than budget and Private Pay was 20.7 over.

Since July of 2015, we have noted and adjusted Medicaid by decreasing booked revenue by 5% due to the lack of published Medicaid rates. This was initiated after Medicaid reduced rates unexpectedly for the first six months in 2015. Since then, the State has operated without a budget for two years, leaving further uncertainty. Then, the passage of the 2018 Budget came without a retroactive rate adjustment. By reversing the 2017 adjustments (Jan. through June), \$106,000 was added back to Medicaid Revenues in July. The 2015 and 2016 adjustments will be reversed at year-end, with the amount being \$364,000.

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July Financial Statements reflect a gain of \$243,588, which gives the Home a year-to-date Net Income of \$345,085, \$19,770 above the year-to-date budget. During July, Revenues were over budget by \$228,992, while expenses were over by \$31,878 - resulting in Net Income being over budget by \$197,113. The attached Actual vs. Budget Statement of Operations highlights the differences by department. Private Pay Revenues exceeded budget by \$178,865, while Medicaid Revenues exceeded budget by \$38,344 (includes the \$106,000 adj.).

Continued slowdowns in approving Medicaid Pending accounts is keeping more residents in Private pay status. Medicare A Revenues exceeded budget by \$18,751. Nursing expenses were over budget by \$56,396. Agency usage increased in June, though the goal remains to reduce and then eliminate agency.

Mr. Winschel updated the board on the construction project: Ringland Johnson's first cost analysis is currently taking place. Some pre-construction money is being used for the cost analysis.

As of Thursday, August 31st, the Home's cash balance was \$4,808,681.

Mr. Winschel discussed the State's delay in receiving approval for resident Public Aid status.

Speers financial meeting took place regarding construction finance costs. Interest rates are an average blended rate of about 4% to 4.25%. 5% is being used in the Proforma for the construction project. The General Obligation Bond is based on the County percentage rate.

Mr. Winschel discussed the need for two new Operational Board Members. Hoping two new board members will be voted on at the next meeting.

Bart Becker, Administrator for DCRNC, gave a report:

The Illinois Department of Public Health was in the facility on a complaint visit on June 27th and June 28th. They cited only one tag F309, Federal tag, which was cleared, retro to 7/14/17. There will be fines; but we don't know exact amounts yet (up to \$25,000). IDPH also issued State Licensure Violations which were duplicative of contents from Federal tag. Facility is currently waiting for IDPH to revisit to clear State Violations.

The facility received a Summons regarding a former resident. IDPH investigated this concern but didn't have any findings.

The Annual Ice Cream Social/Carnival Event took place on September 10th. There was a great turnout of residents, family members, and staff. The event was a big success.

Mr. Becker reported that the Request for Proposals for Electronic Health Records (EHR) is being completed. All resident records; clinical through financial, will go electronic. This will enhance efficiency, accuracy, and overall documentation. The plan is to complete this within the next several months.

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The employee Focus Committee has been meeting regularly. Several new ideas to improve staff morale, motivation, and retention are being discussed and implemented. The committee is implementing an employee bulletin board for compliments/staff recognition. The theme is *“Every Piece of the Puzzle Fits Together.”*

A wage survey is being completed to get information for facility to remain competitive in the surrounding market; regarding C.N.A. salary ranges. C.N.A. base rate hasn't been increased since July 2005.

Mr. Becker reported that the monthly meetings with Kishwaukee Hospital continue. Hospital readmissions (within 30 days) are discussed at length. The meetings enable DCRNC to make changes to better meet the hospital's needs/demands. DCRNC is admitting residents at various hours, seven days a week, which historically wasn't the case. DCRNC is continually working toward admitting residents that are more clinically complex. Mr. Becker reported that facility is able to discuss the things that DCRNC has to offer that the competitors don't have.

Kris Decker, Clinical Compliance Coordinator gave a report:

Ms. Decker distributed the most recent Star Report (from August 23, 2017). DCRNC is currently five stars, overall. The Quality Measures have risen to five stars. Ms. Decker explained the Quality Measures to the board.

Ms. Decker explained that the employee annual compliance training will be held in October 2017.

Ms. Decker informed the board that staff members are bringing any concerns or questions to her; regarding compliance, social media, etc. Ms. Decker discussed how employees are being trained and reminded of Social Media concerns and that Social Media is always being closely monitored.

Misty Haji-Sheikh informed everyone that the public had made positive comments about Heritage Woods on Social Media /Facebook via the local newspaper.

Executive Session:

No closed session took place.

Next Meeting: November 8, 2017, at 7:00 a.m.

Motion: Misty Haji-Sheikh moved to adjourn the meeting, Ferald Bryan seconded the motion.

Meeting adjourned at 7:59 a.m.

Respectfully submitted
Bart Becker
Recording Secretary