

**CLAREMONT NURSING AND REHABILITATION CENTER (CNRC)  
BOARD MEETING MINUTES**

**Tuesday, April 29, 2019, 10:00 AM  
Commissioners Hearing Room**

**Present:** Commissioner Jim Hertzler, Commissioner Gary Eichelberger; Sandy Moyle, Chief Clerk; Melissa Smith, Nancy Conklin, Bob Aims, Helen Schultz, Ben Boyer, Brad King, Melissa Smith, CNRC; Dana Best, Ron Snow, Finance; Holly Sherman, Melinda Thompson, Derek Goodhart, Human Resources; Michelle Rhone, Recording Secretary. Commissioner DiFilippo was absent.

**Call to Order:** Commissioner Hertzler called the meeting to order.

**Roll Call:** Commissioner DiFilippo, absent, Commissioner Hertzler, Commissioner Eichelberger

**Public Comment:** None

**Approval of Minutes:** Commissioner Eichelberger moved to approve the CNRC Minutes of March 26, 2019. Commissioner Hertzler seconded the motion and it unanimously carried.

**CNRC Staffing:** (See Attached)

CNA total vacancies: (29) CNA – 24 Full-time, 5 Part-time. LPN total vacancies (12): 6 Full-time, 6 Part Time. PRN casual position vacancies: (8) – 5 CNA, 3 LPN – recently approved at a Salary Board meeting.

March 2019 Turnover Report: 4 new hires (3 full-time, 0 per diem, 1 part-time). Terminations: 6 (1 full-time, 4 per diem, 1 part-time).

- Job fair:
  - HACC Lancaster campus, Derek Goodhart and Deb Boden attended; spoke with 19 nursing students.
  - New Hope Ministries – specific to CNAs who are getting ready to take CNA class, or who have just graduated – March 28, 2019.
  - -Big Spring High School, Stephanie Dyson and Trish Morrison attended; already had applicants apply due to the job fairs.

Upcoming job fairs:

- HACC Harrisburg – April 10, 2019.
- Cumberland/Perry Vo-Tech – annual career fair: April 25, 2019.
- CNRC – in house job fair: Tuesday, May 14, 4:30pm-6:30pm & Thursday, May 16, 2019, 4:30pm-6:30pm.
- Cumberland Valley School District
- Northern York High School.

Discuss various ways for recruitment. Bob Aims would like to discuss having CNA's go along to job fairs.

Recruitment/Retention meeting was held Thursday, March 21, 2019. (See Attached). Meetings are held monthly and are advertised throughout the building, employee attendance is encouraged, pending supervisor approval, to share their ideas on recruitment and retention.

CNRC Engagement Surveys were due Friday, March 1. Holly Sherman, Director of Human Resources, is

compiling the information. Only 14% of staff completed the engagement survey.

**Admissions Report – March 2019:** (See Attached)

- **Admissions and Referrals:** Helen Schultz reviewed the Summary of Admissions and Referrals Report for March 2019. She reported there were 128 referrals which resulted in 11 admissions (0 long-term; 14 short-term, 3 from previous month referrals). There were 85 denials; 3 bariatric reasons; 28 medical; 4 behavioral; 11 no beds; 3 insurance reasons; 36 staffing; 0 other. Melissa Smith provided there were 15 discharges and 6 deaths for the month of March. 5 traditional Medicare residents, 2 managed care residents.
- **Medical Assistance (MA) Approvals March 2019:** (See Attached) Melissa reported there were 6 MA approved; 23 current outstanding MA pending. (13 County Assistance Office, 3 current month, 7 prior months). (See attached)

**Financial Report – March 2019:** Ben Boyle discussed the following items. (See attached)

- Fund Balance
- Census
- Revenue
- Analytics
- Accounts Receivable

Transition census YTD: Medicare: 5.23; commercial census: 4.90; private census: 5.10; Medicaid: 6.94; total census: 22.16; admissions: 55.

**Nursing:** Heather Raisig provided a Nursing update (See attached packet)

Identified there is no longer a Master Schedule for LPN's to evaluate open positions; Master schedule has been implemented for CNA and RN position control. In process of revising "Reassignment Policy" it will be controlled by scheduling department vs. individual nurses on floor. Discussed QM Rating data from 1, 2, 3, & 4<sup>th</sup> quarters of 2018; new QM thresholds. Reportable events for March to Department of Health: 7 other; 5 misappropriations; 5 complaints of abuse: all have been found to be unsubstantiated. Electronic Health Record: Facility currently working with newly developed UDA's in the care plan system.

**Other Business/Discussion:**

**FSES Update:**

Grid work may not need to be replaced; final planning and review meeting to be held in May. Noelker and Hull will focus on prints; documents previously approved were the construction documents and blueprints, and are different than the blueprints submitted for approval on what needs to be done. Noelker and Hull are planning to present at the Planning and Review meeting in May.

**Life Safety Update:**

Inspected all doors; did not inspect the three doors that have waivers. Contractors are on site to install three doors. O2 room that has the electrical panel; Noelker and Hull presented to Planning and Review; project was approved to build a closet around the panel.

**VA Update:**

Inspection completed. Found: electrical panels/closets, step ladder leaning against panel. Failed to complete the annual eyewash station tests; changed the plan that included the eye wash stations, moved those duties from 3<sup>rd</sup> shift to 1<sup>st</sup> shift, diligently completing weekly tests. Individual needs to be shown how to complete the annual tests; simple fix. Sprinkler heads located in the dock area of the Tower will need to

be changed. Sprinkler heads are currently face down, need to be facing upwards.

**CNRC Updates:** Bob Aims provided CNRC Updates (See Attached)

Star rating has dropped to a 3 star from a 5 star. Going to continue focusing on working towards becoming a 5 star facility. American Healthcare Association

PACAH Spring Conference; Overall response is there is not enough staffing in general.

National Skilled Care Nursing Week: begins May 12; “Living Soulfully” is the theme: Robust and Full agenda for things that are going on every day for staff.

Community Health Care/Managed Care – Training in May; September/October starts the enrollment process. UPMC, AmeriHealth, and PA Health and Wellness; UPMC will be using CNRCs casemix index as a floor the reimbursement; other two will be using the county rate as a floor for reimbursement.

UPMC will be using case mix reimbursement, floor rates. Contracts are with Kairos; opportunity to negotiate those numbers uniformly from individuals from region 1 and region 2.

EAP re-orientation for managers: going to require all managers to attend the EAP training. EAP sessions are available to all employees as well.

**Executive Session:**

**Adjournment:** There being no further business to come before the Board, Commissioner adjourned the meeting.

Respectfully Submitted,

Michelle Rhone  
Administrative Assistant

## Recruitment and Retention Meeting 03/21/2019

### Recruitment Notes:

- HR and managers attended Job Fairs recently
  1. Carlisle High School (attended by Derek, Stephanie and Robbin Tolan)
  2. Big Spring High School (attended by Stephanie and Trish Morrison)  
\*\*Already had applicants apply due to job fairs\*\*
  3. New Hope Ministries (coming up, Stephanie Attending)  
\*\*ONLY for C.N.A's\*\*
  4. HACC Lancaster (attended by Derek and Deb)  
\*spoke with 19 nursing students  
\*pushed pensions and benefits  
\*total hourly rates went over well
  5. CNRC job fair, coming up in May (working with Communications to promote)
  6. Northern York High School
  7. Cumberland Valley School District
  
- Bob would like to discuss having C.N.A's go along to job fairs
- Derek is meeting up Helen to improve Facebook page as well as discussing the possibility of a radio ad
- Discussed the option of bringing PCA's/med techs to Claremont
- Other advertising ideas:
  1. Placemats from dinners
  2. Programs at local high schools
  3. Renting billboards
  4. Renting digital signs
  5. Buying a "swoosh" flag (now hiring)
  6. Sponsor events at local high schools
  7. Putting ads on windows in parking lots
  8. TV ad
  9. Instagram account
- Discussion on PRN Casual positions being created (should have an answer Monday), for a total of 5 new C.N.A's and 5 LPN casual being requested.

### Retention Notes:

- Employee Engagement Survey
  - a. Will be discussed at Monday's board meeting
  - b. Holly is compiling the information
  - c. Only 14% of staff filled them out
  - d. We are looking for suggestions on how to fix the complaints
  - e. Need to let staff know what changes we can make due to the survey suggestions

- Would like to move the recruitment and retention meeting off the “carpeted hallway”
- Mentor Program
  - Being developed by Robbin
  - Looking for the right people to be trained
  - Check with Jenn Goetz about training, if need be
  - Identify the “Mentor Title” on their badge

**Comments:**

- Kathy Daddona says to look into the “watch program” through the state. This a retraining program at Central Susq. Intermediate Unit. Helps to get out of the Welfare System.
- Look into providing a stipend for child care for staff
- Bob spoke with employment skills center...he would like us to be a mentor for them and “get involved”.

## **C.N.A JOB POSTINGS**

### **Heritage Harbor**

<u>posting#</u>	<u>Job Title</u>	<u>FT/PT</u>	<u>Shift</u>	<u>Weekend</u>	<u>Date posted</u>	<u>Close Date</u>
NH3158	C.N.A	FT	2:30P-11P	A	OPEN	until filled
NH3158	C.N.A	FT	2:30P-11P	B	OPEN	until filled
NH3124	C.N.A	FT	6:30A-7P	A	OPEN	until filled

### **C-WING**

NH3043	C.N.A	FT	2:30P-11P	A	OPEN	until filled
NH3194	C.N.A	FT	10:30P-7A	A	OPEN	until filled

### **1ST FLOOR**

NH3148	C.N.A	FT	6:30P-7A	B	OPEN	until filled
NH3063	C.N.A	FT	6:30P-7A	A	OPEN	until filled
NH3286	C.N.A	FT	2:30P-11P	B	OPEN	until filled

### **2ND FLOOR**

NH3082	C.N.A	FT	6:30A-7P WP		OPEN	until filled
NH3139	C.N.A	FT	2:30P-11P	A	OPEN	until filled
NH3052	C.N.A	FT	2:30P-11P	A	OPEN	until filled
NH3106	C.N.A	FT	6:30a-7p	A	OPEN	until filled
NH3136	C.N.A	FT	6:30a-7p	B	OPEN	until filled

### **3RD FLOOR**

NH3058	C.N.A	FT	6:30P-7A	A	OPEN	until filled
NH3135	C.N.A	FT	10:30P-7A	A	OPEN	until filled
NH3164	C.N.A	FT	6:30A-7P WP		OPEN	until filled

### **TRANSITIONS**

NH3157	C.N.A	FT	2:30P-11P	B	OPEN	until filled
NH3089	C.N.A	FT	2:30P-11P	A	OPEN	until filled
NH8049	C.N.A	PT	6:30A-3P	A	OPEN	until filled
NH8075	C.N.A	PT	6:30A-3P	B	OPEN	until filled
NH8099	C.N.A	PT	2:30P-11P	B	OPEN	until filled

## **FLOATS**

NH3068	C.N.A	FT	10:30P-7A	B	OPEN	until filled
NH3184	C.N.A	FT	10:30P-7A	A	OPEN	until filled
NH3147	C.N.A	FT	2:30P-11P	A	OPEN	until filled
NH3160	C.N.A	FT	2:30P-11P	B	OPEN	until filled
NH3198	C.N.A	FT	6:30A-3P	A	OPEN	until filled
NH3159	C.N.A	FT	6:30A-3P	B	OPEN	until filled
NH8021	C.N.A	PT	2:30P-11P	A	OPEN	until filled
NH8068	C.N.A	PT	10:30P-7A	B	OPEN	until filled

# LPN POSTINGS

## 1ST FLOOR

<u>posting#</u>	<u>Job Title</u>	<u>FT/PT</u>	<u>Shift</u>	<u>Weekend</u>	<u>Date posted</u>	<u>Close Date</u>
NH2041	LPN	FT	6:30P-7A	B	OPEN	UNTIL FILLED

## Transitions

NH2042	LPN	FT	6:30P-7A	B	OPEN	UNTIL FILLED
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## FLOATS

NH2043	LPN	FT	2:30P-11P	B	OPEN	UNTIL FILLED
NH2030	LPN	FT	2:30P-11P	B	OPEN	UNTIL FILLED
NH2047	LPN	FT	2:30P-11P	A	OPEN	UNTIL FILLED
NH2034	LPN	FT	2:30P-11P	A	OPEN	UNTIL FILLED
NH8027	LPN	PT	6:30A-3P	A	OPEN	UNTIL FILLED
NH8055	LPN	PT	2:30P-11P	A	OPEN	UNTIL FILLED
NH8077	LPN	PT	2:30P-11P	A	OPEN	UNTIL FILLED
NH8064	LPN	PT	2:30P-11P	B	OPEN	UNTIL FILLED
NH8054	LPN	PT	2:30P-11P	B	OPEN	UNTIL FILLED
NH8055	LPN	PT	2:30P-11P	A	OPEN	UNTIL FILLED



## PRN CASUAL POSITIONS

<u>posting#</u>	<u>Job Title</u>	<u>FT/PT</u>	<u>Date posted</u>	<u>Close Date</u>
NH9118	C.N.A	PRN	OPEN	UNTIL FILLED
NH9119	C.N.A	PRN	OPEN	UNTIL FILLED
NH9120	C.N.A	PRN	OPEN	UNTIL FILLED
NH9121	C.N.A	PRN	OPEN	UNTIL FILLED
NH9122	C.N.A	PRN	OPEN	UNTIL FILLED
NH9123	LPN	PRN	OPEN	UNTIL FILLED
NH9124	LPN	PRN	OPEN	UNTIL FILLED
NH9125	LPN	PRN	OPEN	UNTIL FILLED

**HRR-19b (County Employment Status - Commissioners)**

4/24/19 9:30 am  
Page 1 of 1

**\*\*\* Nursing Home Only \*\*\***

For the Period Beginning 03/01/2019 and Ending 03/31/2019

**Hires**

**FT**

	<u>Hire Date</u>	<u>Emp</u>	<u>PL</u>	<u>Dept</u>	<u>Position</u>	<u>Title</u>
1	3/14/2019	10399	NHOME	SKNRC	NH3123	C.N.A.
2	3/14/2019	11259	NHOME	SKNRC	NH3069	C.N.A.
3	3/28/2019	12104	NHOME	SKNRH	NH3066	C.N.A.

**PT**

	<u>Hire Date</u>	<u>Emp</u>	<u>PL</u>	<u>Dept</u>	<u>Position</u>	<u>Title</u>
1	3/28/2019	12105	NHOME	DIET	NH8039	Dietary Aide PT

**Terms**

**FT**

	<u>Term Date</u>	<u>Emp</u>	<u>PL</u>	<u>Dept</u>	<u>Position</u>	<u>Title</u>	<u>Rehire Elig</u>	<u>Reason Code</u>
1	3/28/2019	12087	NHOME	DIET	NH3224	Dietary Aide	O	TV-UNKNOWN

**PER DIEM**

	<u>Term Date</u>	<u>Emp</u>	<u>PL</u>	<u>Dept</u>	<u>Position</u>	<u>Title</u>	<u>Rehire Elig</u>	<u>Reason Code</u>
1	3/7/2019	5194	NHOME	SKNR1	NH9033	C.N.A. PRN	N	TV-VSP
2	3/7/2019	11311	NHOME	SKNR1	NH9029	L.P.N. Charge Nurse PRN	N	TV-VSP
3	3/7/2019	11916	NHOME	SKNR1	NH9009	Nursing Supervisor	N	TV-VSP
4	3/18/2019	11505	NHOME	SKNR1	NH9003	L.P.N. Charge Nurse PRN	Y	TV-WORK

**PT**

	<u>Term Date</u>	<u>Emp</u>	<u>PL</u>	<u>Dept</u>	<u>Position</u>	<u>Title</u>	<u>Rehire Elig</u>	<u>Reason Code</u>
1	3/4/2019	11585	NHOME	DIET	NH8012	Dietary Aide PT	Y	TV-UNKNOWN

**Summary of Referrals and Admissions  
and other Pertinent Data  
March-19**

**APPROVALS**

	Mar-19	Feb-19	Jan-19
Admitted	11	21	17
Pending admission	1	2	2
discharged home	1	8	3
sent to other SNF	24	28	32
No Beds	5	2	14
Insurance	1	1	0
Pending decision	0	0	3
Deceased prior to admission	0	0	0
Other	0	0	0

**Total Referrals**

Approvals	43	62	71
Denials	85	102	99
	128	164	170

**ADMISSIONS DETAIL**

	Long Term	Short Term	Total
Medicaid Pending	0	0	0
Medical Assistance	0	0	0
Medicare	0	11	11
Private pay	0	0	0
Veterans	0	0	0
Insurance	0	3	3
Hospice	0	0	0
Total Admissions	0	14	14

**RECORD OF DISCHARGES and DEATHS**

Discharges	15	19	13
Deaths	6	2	8
	21	21	21

**Medicaid Applications Month End Snapshot**

	Mar-19	Feb-19	Jan-19
MA Approved	6	3	9
Pending Applications			
MA Pending - County Asst Office	13	15	8
MA Pending - Current Month	3	5	5
MA Pending - Prior Months	7	6	9
Total pending applications	23	26	22

**DENIALS**

	Mar-19	Feb-19	Jan-19
Bariatric	3	1	2
Medical	28	37	38
Behavioral	4	11	11
No Beds	11	37	32
Insurance	3	8	9
Staffing	36	5	4
Other	0	3	3

**ADMISSIONS**

Current month referrals	11	21	17
Waiting list	0	0	1
Previous month referrals	3	2	6
	14	23	24

**MCA CENSUS AT**

**03/31/19**

Traditional	5
Managed Care	2

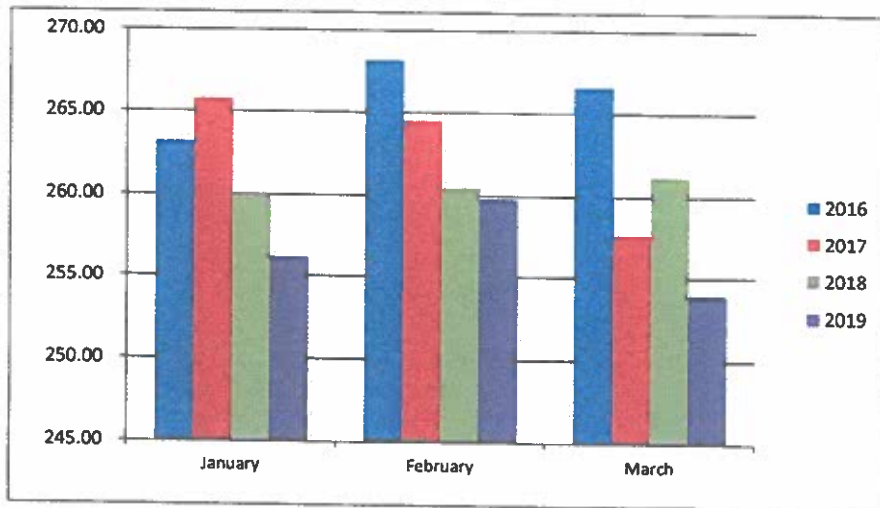
**CNRC Key Indicators**

Census/Volume	Budget (YTD)	Actual (YTD)	Var. Inc/(Mar)	Fav/(Unfav)	Prior (YTD)	Actual (YTD)	Var. Inc/(Mar)	Fav/(Unfav)
Avg Daily Census	267.00	256.53	(10.47)	Unfavorable	260.53	256.53	(4.00)	Unfavorable
Census Days	24,030	23,088	(942)	Unfavorable	23,448	23,088	(360)	Unfavorable

Revenue surplus(shortfall)    \$ (241,348)

**Transitions Census**

Medicare A Census	14	5.23	(8.77)		14.37	5.23	(9.14)	
Commercial Ins Census	13	4.90	(8.10)		13.09	4.90	(8.19)	
Private Census	-	5.10	5.10		-	5.10	5.10	
Medicaid Census	-	6.94	6.94		-	6.94	6.94	
Total Census	27	22.16	(4.84)		27.46	22.16	(5.30)	
Admissions	111	55	(56)		88	55	(33)	



ADC trend for March for years indicated

	2016	2017	2018	2019
January	263.16	265.71	260.03	256.16
February	268.10	264.46	260.46	259.82
March	266.55	257.65	261.19	253.94
April	259.80	257.20	261.90	-
May	259.71	256.42	268.29	-
June	259.60	264.60	263.13	-
July	269.03	267.52	268.58	-
August	273.35	257.23	264.84	-
September	268.67	255.50	262.17	-
October	270.87	262.48	268.10	-
November	265.10	264.97	265.60	-
December	267.00	260.81	254.97	-

**Skilled Census - Days**

	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr
2019	1,218	-	-	-
2018	2,235	2,185	1,777	1638
2017	2,630	2,217	1,883	2563

**Skilled ADC**

	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr
2019	13.53	-	-	-
2018	24.83	24.01	19.32	17.80
2017	29.22	24.36	20.47	27.86

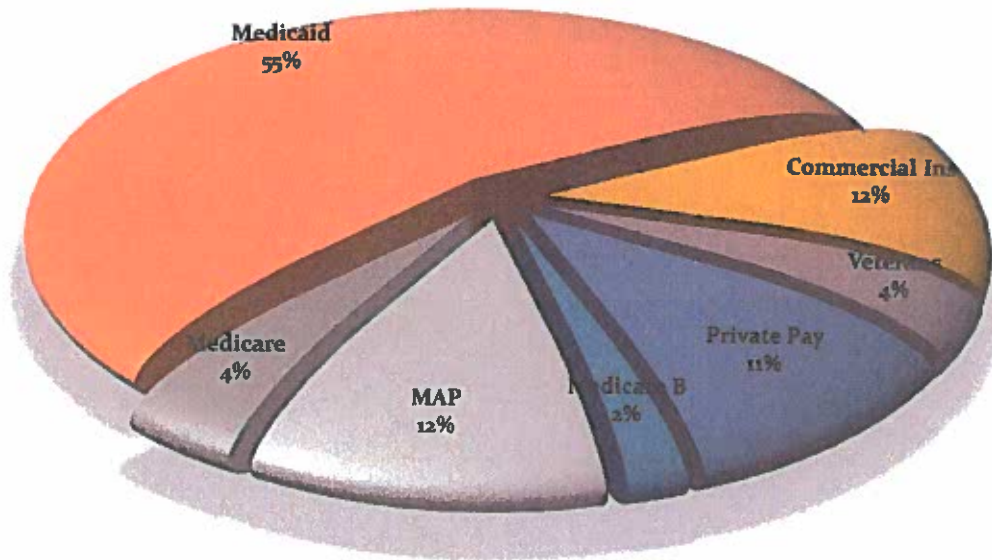
**CNRC Key Indicators**

	Budget (YTD)	Actual (YTD)	Var. Inc/(Mar)	Fav/(Unfav)	Prior (YTD)	Actual (YTD)	Var. Inc/(Mar)	Fav/(Unfav)
<b>Reimbursement Rate/Mix</b>								
Avg. Room & Board Rate	\$ 256.93	\$ 242.09	\$ (14.84)	Unfavorable	\$ 250.94	\$ 242.09	\$ (8.85)	Unfavorable
Avg. Resident Rev Rate	\$ 278.38	\$ 256.21	\$ (22.17)	Unfavorable	\$ 270.12	\$ 256.21	\$ (13.91)	Unfavorable
<b>Revenue surplus(shortfall)</b>	<b>\$ (511,887)</b>							
Medicare Rate Average	\$ 533.53	\$ 527.33	\$ (6.20)	Unfavorable	\$ 508.98	\$ 527.33	\$ 18.35	Favorable
Medicaid Rate Average	\$ 215.78	\$ 213.10	\$ (2.68)	Unfavorable	\$ 211.23	\$ 213.10	\$ 1.87	Favorable
Private Pay Rate Average	\$ 331.00	\$ 340.20	\$ 9.20	Favorable	\$ 329.82	\$ 340.20	\$ 10.38	Favorable
Veterans Rate Average	\$ 256.38	\$ 273.35	\$ 16.97	Favorable	\$ 269.62	\$ 273.35	\$ 3.73	Favorable
Comm Ins Rate Average	\$ 438.85	\$ 327.82	\$ (111.03)	Unfavorable	\$ 347.41	\$ 327.82	\$ (19.59)	Unfavorable

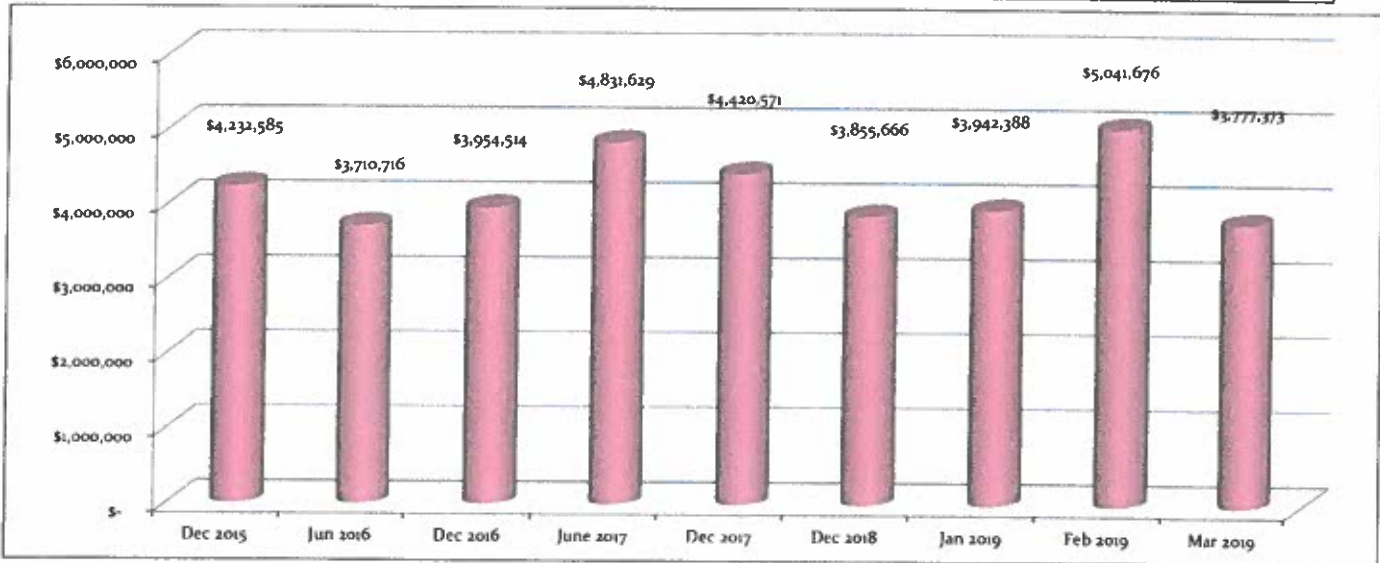
	Goal	Actual (Mar 2019)	Var. Inc/(Mar)	Fav/(Unfav)	Prior (Mar)	Actual (Mar 2019)	Var. Inc/(Mar)	Fav/(Unfav)
<b>Account Receivable</b>								
% AR > 120 days	14%	11.02%	-2.98%	Favorable	17.37%	11.02%	-6.35%	Favorable
Rev - Days in AR	65.00	56.78	(8.22)	Favorable	63.31	56.78	(6.53)	Favorable
W/O as % of Oper. Rev	1%	0.14%	-0.86%	Favorable	0.27%	0.14%	-0.13%	Favorable

	12/31/2018	3/31/2019	Var. Inc/(Mar)	Fav/(Unfav)	3/31/2018	3/31/2019	Var. Inc/(Mar)	Fav/(Unfav)
<b>Fund Balance</b>								
Fund Balance	\$ 2,572,901	\$ 2,107,467	\$ (465,434)	Unfavorable	\$ 1,895,035	\$ 2,107,467	\$ 212,432	Favorable

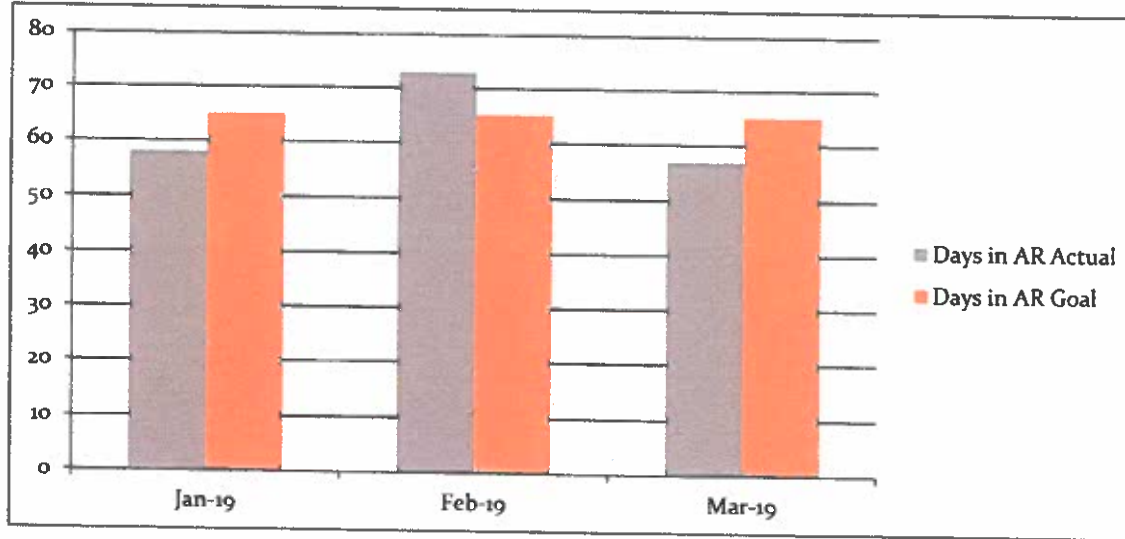
### Outstanding Accts Receivable March 31, 2019



### HISTORICAL TREND OF ACCOUNTS RECEIVABLE

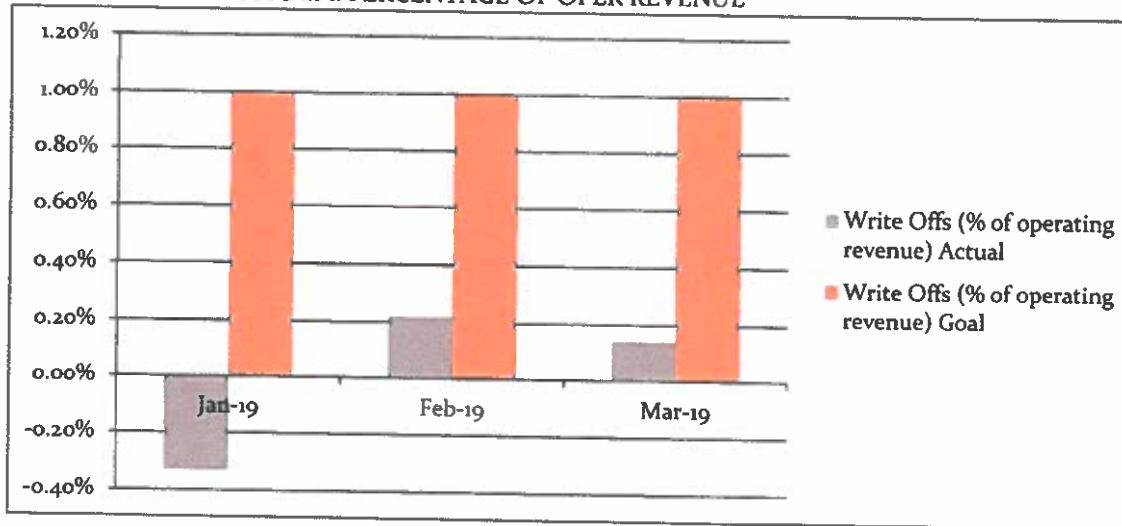


### DAYS IN ACCOUNTS RECEIVABLE



	Actual	Goal
Jan-19	58	65
Feb-19	73	65
Mar-19	57	65

### WRITE OFFS as a PERCENTAGE OF OPER REVENUE



	Actual	Goal
Jan-19	-0.33%	1.00%
Feb-19	0.22%	1.00%
Mar-19	0.14%	1.00%

**CNRC Key Indicators**

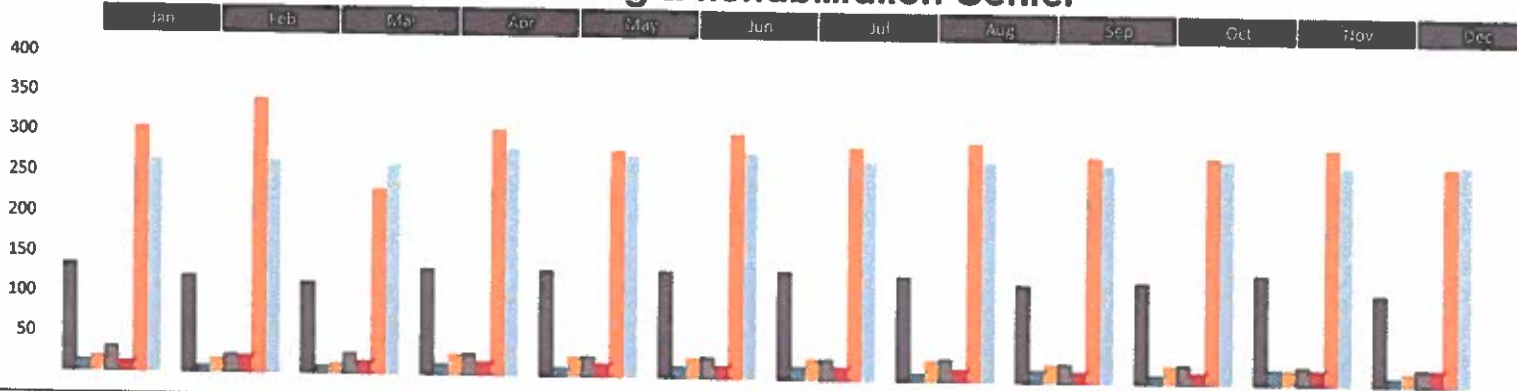
Budget (YTD)	Actual (YTD)	Var. Inc./ (Mar)	Fav/(Unfav)	Prior (YTD)	Actual (YTD)	Var. Inc./ (Mar)	Fav/(Unfav)
24,030	23,088			23,448	23,088		

<b>LABOR COSTS</b>							
<b>Nursing Salary, Wages &amp; Benefits - dollars</b>	\$ 3,272,722	\$ 2,877,965	\$ (394,757)	Favorable	\$ 3,196,361	\$ 2,877,965	\$ (318,397) Favorable
Nursing Salary, Wages & Benefits - PPD	\$136.19	\$124.65	(11.54)	Favorable	\$ 136.32	\$ 124.65	\$ (12) Favorable
<b>Nursing Overtime - dollars</b>	\$ 141,938	\$ 234,357	\$ 92,419	Unfavorable	\$ 254,117	\$ 234,357	\$ (19,760) Favorable
Nursing Overtime - PPD	\$ 5.91	\$ 10.15	4.24	Unfavorable	\$ 10.84	\$ 10.15	\$ (1) Favorable
<b>Nursing Agency - dollars</b>	\$ 266,200	\$ 290,962	\$ 24,762	Unfavorable	\$ 3,861	\$ 290,962	\$ 287,101 Unfavorable
Nursing Agency - PPD	\$ 11.08	\$ 12.60	1.52	Unfavorable	\$ 0.16	\$ 12.60	\$ 12 Unfavorable
<b>NHPPD</b>	<b>3.46</b>	<b>3.25</b>	<b>0.21</b>	<b>Unfavorable</b>	\$ 3.44	3.25	\$ (0.19) Unfavorable
<b>Dietary Salary, Wages, &amp; Benefits - dollars</b>	\$ 383,700	\$ 341,544	\$ (42,156)	Favorable	\$ 351,536	\$ 341,544	\$ (9,991) Favorable
Dietary Salary, Wages, & Benefits - PPD	\$ 15.97	\$ 14.79	(1.17)	Favorable	\$ 14.99	\$ 14.79	\$ (0) Favorable
<b>Housekeeping &amp; Laundry Salary, Wages &amp; Benefits - dollars</b>	\$ 299,525	\$ 290,500	\$ (9,025)	Favorable	\$ 296,053	\$ 290,500	\$ (5,553) Favorable
Housekeeping & Laundry Salary, Wages & Benefits - PPD	\$ 12.46	\$ 12.58	0.12	Unfavorable	\$ 12.63	\$ 12.58	\$ (0) Favorable
<b>Total Operating Expenses</b>	\$ 6,932,345	\$ 6,494,297	\$ (438,048)	Favorable	\$ 6,739,279	\$ 6,494,297	\$ (244,982) Favorable
Total Operating Expenses - PPD	\$ 288.49	\$ 281.28	(7.20)	Favorable	\$ 287.41	\$ 281.28	\$ (6) Favorable

**OTHER EXPENSES - unfavorable to budget year to date**



# PPD EXPENSE TRENDS - Claremont Nursing & Rehabilitation Center



Expenses	Jan-19	Feb-19	Mar-19	Apr-18	May-18	Jun-18	Jul-18	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18	Trend
Nursing SW & B	\$ 136.61	\$ 121.79	\$ 115.24	\$ 132.85	\$ 131.96	\$ 132.88	\$ 134.79	\$ 130.20	\$ 121.43	\$ 124.69	\$ 136.06	\$ 112.25	
Overtime	\$ 14.78	\$ 9.05	\$ 9.92	\$ 14.19	\$ 11.04	\$ 14.38	\$ 15.78	\$ 10.47	\$ 15.57	\$ 11.02	\$ 20.06	\$ 11.05	
Therapy	\$ 19.50	\$ 17.71	\$ 13.21	\$ 26.18	\$ 24.85	\$ 24.97	\$ 25.49	\$ 25.62	\$ 23.46	\$ 22.93	\$ 19.10	\$ 16.53	
Dietary & Gift Shop	\$ 31.62	\$ 23.35	\$ 25.87	\$ 27.37	\$ 25.68	\$ 26.67	\$ 25.49	\$ 27.83	\$ 24.64	\$ 23.93	\$ 23.67	\$ 21.99	
Housekeeping & Laundry	\$ 12.91	\$ 21.28	\$ 16.43	\$ 16.65	\$ 16.36	\$ 15.79	\$ 16.08	\$ 15.35	\$ 14.66	\$ 14.61	\$ 19.24	\$ 21.13	
Total Expenses PPD	\$ 305.65	\$ 342.59	\$ 231.21	\$ 305.32	\$ 281.01	\$ 303.38	\$ 288.31	\$ 295.32	\$ 279.27	\$ 280.52	\$ 292.39	\$ 270.31	
Total Revenue PPD	\$ 265.41	\$ 265.78	\$ 261.37	\$ 282.60	\$ 275.37	\$ 279.79	\$ 272.16	\$ 272.76	\$ 270.20	\$ 277.51	\$ 270.78	\$ 273.64	
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	

**Fund Balance Analysis 2019**

	Jan-19	Feb-19	Mar-19	Apr-19	May-19	Jun-19
Beginning balance	2,572,901	\$ 2,303,613	\$ 1,814,575	\$ 2,107,467	2,107,467	2,107,467
monthly surplus / loss	(269,288)	(489,038)	292,892	-	-	-
IGT Actual Payment/Revenue						
Ending actual fund balance	2,303,613	1,814,575	2,107,467	2,107,467	2,107,467	2,107,467
Accumulative actual fund balance depletion / gain	(269,288)	(758,326)	(465,434)			
IGT Safety Net Payment	\$ 586,299	\$ 1,172,598	\$ 1,758,897	\$ -	\$ -	\$ -
Transfer out to GF	\$ (378,248)	\$ (756,496)	\$ (1,134,744)	\$ -	\$ -	\$ -
Fund balance adjusted for IGT smoothing	\$ 2,511,664	\$ 2,230,677.21	\$ 2,731,620	\$ 2,107,467.23	\$ 2,107,467.23	\$ 2,107,467
Accumulative adjusted fund balance depletion / gain	(61,237)	(342,224)	158,719			

	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19
Beginning balance	2,107,467	\$ 2,107,467	\$ 2,107,467	\$ 2,107,467	\$ 2,107,467	\$ 2,107,467
monthly surplus / loss	-	-	-	-	-	-
IGT Actual Payment/Revenue						
Ending actual fund balance	2,107,467	2,107,467	2,107,467	2,107,467	2,107,467	2,107,467
Accumulative actual fund balance depletion / gain						
IGT Safety Net Payment	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Transfer out to GF	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Fund balance adjusted for IGT smoothing	\$ 2,107,467	\$ 2,107,467	\$ 2,107,467	\$ 2,107,467	\$ 2,107,467	\$ 2,107,467
Accumulative adjusted fund balance depletion / gain						

YTD surplus (loss)	(465,434)
YTD IGT Revenue, net	-

Claremont Nursing & Rehab Center  
Income Statement  
2019 Actual vs. Budget Comparison

	March YTD			Mar-19		
	Actual	Budget	Inc/(Dec)	Actual	Budget	Inc/(Dec)
Resident R&B Revenues	5,589,288.39	6,174,143.98	(584,855.59) 1)	1,895,686.94	2,126,657.94	(230,971.00)
Other resident revenues	325,964.33	515,430.93	(189,466.60) 1)	100,395.06	177,538.02	(77,142.96)
Misc MA Revenues	198,917.61	1,846,000.00	(1,647,082.39) 2)	66,305.87	615,825.60	(549,519.73)
Bad Debt Allowance	(62,212.13)	(62,500.00)	287.87	(21,279.31)	(20,850.00)	(429.31)
Misc Revenues	46,724.95	44,702.47	2,022.48	16,369.64	14,912.75	1,456.89
<b>Total Revenues</b>	<b>6,098,683.15</b>	<b>8,517,777.38</b>	<b>(2,419,094.23)</b>	<b>2,057,478.20</b>	<b>2,914,084.31</b>	<b>(856,606.11)</b>
Per Patient Day	264.15	354.46	(90.31)	261.37	352.07	(90.70)
Salary & Benefits	(4,354,019.35)	(4,786,361.54)	432,342.19 3)	(1,382,632.40)	(1,669,308.90)	286,676.50
Operating	(2,140,277.51)	(2,145,983.03)	5,705.52	(355,355.89)	(700,490.52)	345,134.63
Other expenses	(245,311.77)	(248,187.49)	2,875.72	(82,100.09)	(82,795.35)	695.26
<b>Total Expenses</b>	<b>(6,739,608.63)</b>	<b>(7,180,532.06)</b>	<b>440,923.43</b>	<b>(1,820,088.38)</b>	<b>(2,452,594.77)</b>	<b>632,506.39</b>
Per Patient Day	(291.91)	(298.82)	6.91	(231.21)	(296.31)	65.10
Adj to Surplus/loss Non-proj	-	-	-	-	-	-
<b>Inc/(Dec) to Fund Balance</b>	<b>(640,925.48)</b>	<b>1,337,245.32</b>	<b>(1,978,170.80)</b>	<b>237,389.82</b>	<b>461,489.54</b>	<b>(224,099.72)</b>
Per Patient Day	(27.76)	55.65	(83.41)	30.16	55.76	(25.60)

YTD variance explanations

- 1) Year to date average daily census is 10.47 below budget projections; that is 942 days. This equates to an estimated revenue shortfall due to census of \$241,348.26
- 1) Net rate is \$22.17 below budget causing an estimated revenue shortfall of \$511,887 due to rate variance
- 2) The IGT Safety Net payment will not be received until June. The budget is split over a 12 month period.
- 3) NHPPD'S for the month of March was 3.25 to the budget of 3.46
- 3) Salary and Benefits for the month are \$432,342 underbudget. This is due to:
  - 3a) FT/PT are under budget \$390K with CNAs making up the majority of this
  - 3b) Vacancies in the CNA's is causing high OT to meet staffing needs; Regular overtime is over budget \$90k mostly CNAs to meet staffing needs
  - 3c) Benefits are under budget by \$129,400 driven mostly by Medical and FICA

## CNRC UPDATE 4/29/19

1. Star rating – dropped to 3 from 5 – reasons
2. PACAH Spring Conference themes – staffing, CHC MCO, marketing, funding, staffing
3. National Skilled Care Nursing Week celebration – ‘Live soulfully’
4. CHC MCO training week of 5/15, September-October enrollment
5. EAP re-orientation for managers, all employees 4/30

Claremont Nursing and Rehabilitation Center  
 Commissioner's Board Meeting  
 April 28, 2019  
 Submitted by Heather A. Raisig RN, DON

March	March Report	April	April Report															
<b>Staffing</b>	<p>Review current "Reassignment" Policy with LPN's for suggestions to decrease amount of time LPN's are working as aides.</p> <p>Request from LPN's to re-evaluate current open positions (8 hour) to re-evaluate additional (12 hour) along with current positions.</p> <p>Will work with Labor Management on above issues</p>	<b>Staffing</b>	<p>Identified no longer a Master Schedule for LPN's to evaluate open positions</p> <p>Master Schedule has been implemented for CNA position control and RN position Control.</p> <p>In process of revising "reassignment policy"—will be controlled by scheduling department vs. individual nurses on floor</p>															
<p><b>5 Star Nursing Home Compare</b></p> <p><b>Overall Quality</b> ★★★★★</p> <p><b>Health Inspection</b> ★★★★★</p> <p><b>Quality Measures</b> ★★★★★</p> <p><b>Staffing</b> ★★★</p> <p><b>RN Staffing</b> ★★★</p> <p><b>Survey</b> On hold until April 2019</p> <p><b>Staffing Ratings</b> Change expected hours to case mix hours based of RUG-IV levels.</p> <p><b>Comparison from Feb 2018 to Feb 2019</b></p> <p>CASE MIX INDEX for Feb 2019 1.10 MA Total 1.14</p> <p>CASE MIX INDEX for Feb 2018 1.07 MA Total 1.08</p> <p><b>Quality Measures Trending</b></p> <p><b>Long Stay</b>—Increase ADL, Antipsychotic and move independently worsened continue above CMS thresholds</p> <p><b>Short Stay</b>—new antipsychotics above CMS thresholds</p>	<p><b>Health Inspection Changes for April 2019:</b> The health inspection rating will begin to incorporate surveys that occurred on or after 11/28/2017.</p> <ul style="list-style-type: none"> <li>The rating will be based on three cycles of survey data. Cycle 1 will be weighted 1/2, cycle 2 weighted 1/3, and cycle 3 weighted 1/6.</li> <li>It is not possible to predict the health inspection star rating in advance as the total weighted health inspection score for each facility will be compared to the state distribution in April 2019.</li> </ul> <p style="text-align: center;"><b>Important News</b> <b>Staffing Changes for April 2019:</b></p> <ol style="list-style-type: none"> <li>The national staffing star rating cut points will be updated.</li> <li>The staffing and RN staffing ratings will be set to one star if there are four or more days without RN staffing hours on days when there are residents in a facility (<i>previously this occurred when there were seven or more days without RN staffing hours</i>).</li> <li>Staffing ratings are no longer being suppressed for nursing homes that have five or more days with residents and no nurse staffing hours reported.</li> <li>The term "expected hours" will be replaced with the term "case-mix hours" in the staffing rating calculations. The case-mix hours are based on the RUG-IV levels of the residents using the same Methodology previously used for the expected hours calculation.</li> </ol> <p style="text-align: center;"><b>Quality Measure (QM) Changes for April 2019:</b></p> <ol style="list-style-type: none"> <li>NHC will report separate ratings for short-stay residents' quality of care and long-stay residents' quality of care in addition to an overall quality of care rating.</li> <li>There will be a total of 17 QMs used in the calculation of the Five-Star QM rating with 10 long-stay and 7 short-stay QMs.</li> <li>The scoring rules for the quality measures are changing to give more weight to measures with greater opportunity for improvement. Some measures will have a maximum score of 150 points while the maximum number of points for other measures will be 100.</li> <li>There will be new thresholds for the quality measure rating. The thresholds are being adjusted based on the improvement in QMs that has occurred since July 2016, which is the last time that the measure thresholds were adjusted.</li> <li>The long-stay claims-based QM, <i>number of hospitalizations per 1,000 long-stay resident days</i>, will be added to the Five-Star QM rating calculation.</li> <li>A new long-stay claims-based QM, <i>number of outpatient emergency department visits per 1,000 long-stay resident days</i>, will be added to the Five-Star QM rating calculation.</li> <li>The short-stay MDS-based QM, <i>percentage of residents with pressure ulcers that are new or worsened</i>, will be replaced with the SNF QRP QM, <i>percentage of SNF residents with pressure ulcers that are new or worsened</i>, in the Five-Star QM rating calculation.</li> </ol>	<p><b>5 Star Nursing Home Compare</b></p> <p><b>Overall Quality</b> ★★★</p> <p><b>Health Inspection</b> ★★★</p> <p><b>Quality Measures</b> ★★★★★</p> <p><b>Staffing</b> ★★</p> <p><b>RN Staffing</b> ★★</p> <p><b>To get increase in Overall Rating:</b></p> <p><b>Step 1:</b> Start with the health inspection rating.</p> <p><b>Step 2:</b> Add one star to the Step 1 result if the staffing rating is four or five stars and greater than the health inspection rating;</p> <p><b>Step 3:</b> Add one star to the Step 2 result if the quality measure rating is five stars.</p> <p><b>Survey</b> Health Inspection Freeze lifted by CMS 2016—2018 Annuals</p> <p><b>Staffing Domain</b> Case Mix Adjusted for Expected Hours CASE MIX INDEX for Feb 2019 1.10 MA Total 1.14 CASE MIX INDEX for Feb 2018 1.07 MA Total 1.08</p> <table border="1" data-bbox="974 1122 1493 1390"> <thead> <tr> <th></th> <th>Current 2 Star</th> <th>Scenario 1 TO achieve 3 Star</th> <th>Scenario 2 TO achieve 3 star</th> <th>Scenario 3 TO Achieve 4 star</th> </tr> </thead> <tbody> <tr> <td>RN</td> <td>.467 2 Star</td> <td>.467 2 Star</td> <td>.508 3 Star</td> <td>.731 4 Star</td> </tr> <tr> <td>OVERALL</td> <td>3.379 2 Star</td> <td>4.038 4 Star</td> <td>3.108— 3.579 2 Star</td> <td>3.58 3 Star</td> </tr> </tbody> </table>		Current 2 Star	Scenario 1 TO achieve 3 Star	Scenario 2 TO achieve 3 star	Scenario 3 TO Achieve 4 star	RN	.467 2 Star	.467 2 Star	.508 3 Star	.731 4 Star	OVERALL	3.379 2 Star	4.038 4 Star	3.108— 3.579 2 Star	3.58 3 Star	<p><i>The April 2019 Five-Star ratings</i> Health Inspection 2016-2018</p> <p>The Quality Measure (QM) Rating data from the first, second, third and fourth quarters of 2018</p> <ul style="list-style-type: none"> <li>Re-hospitalization and emergency department claims-based quality measures data from 10/1/2017 through 9/30/2018</li> <li>Community discharge claims-based quality measure using data from 10/1/2016 through 9/30/2017</li> <li>Short-stay pressure ulcer MDS 3.0 quality measure data from 7/1/2017 through 6/30/2018.</li> </ul> <p>New QM rating thresholds: CMS expects nursing homes to continue making quality improvements over time:</p> <ul style="list-style-type: none"> <li>Raised QM thresholds to promote further progress.</li> <li>Adjusting ratings' thresholds to raise the expectations for quality and incentivize continuous quality improvement</li> <li>Increase in thresholds is based on the rate of improvement on QM scores since the last revision in February 2015.</li> </ul> <p>The Staffing and RN Staffing Ratings are based on Payroll-based Journal staffing data reported for the fourth calendar quarter of 2018</p> <p style="text-align: center;">Set new staffing rating thresholds</p> <ul style="list-style-type: none"> <li>To incentivize improved nursing home staffing levels, establishing new thresholds for staffing ratings.</li> <li>Adjusting the staffing rating's grid to increase the weight registered nurse staffing has on the staffing rating</li> </ul> <p><b>Summary:</b> As CMS changes the thresholds and methodology for performance on both the Quality Measures and Staffing domains, many nursing homes will see a decline in their rating in these areas until they make further improvements. Because the QM and Staffing ratings are also used as part of the Overall rating, some nursing homes will experience a decline in their Overall Five Star. However, a decline in a nursing home's Five Star rating, absent any new inspection information, does not necessarily represent a sudden decline in quality. In other words, if a facility's rating changes, it may not have been due to any change in how the facility operates or the level of care provided. In these cases, the change in rating would represent a change in the methodology for calculating certain measures..</p>
	Current 2 Star	Scenario 1 TO achieve 3 Star	Scenario 2 TO achieve 3 star	Scenario 3 TO Achieve 4 star														
RN	.467 2 Star	.467 2 Star	.508 3 Star	.731 4 Star														
OVERALL	3.379 2 Star	4.038 4 Star	3.108— 3.579 2 Star	3.58 3 Star														

<p><b>Claims-Based Measures (Short-Stay)</b>  <b>Successful Discharge</b>—significantly below CMS threshold (risk adjusted rate=42.6%; expected rate 66.8%)</p> <p><b>Rehospitalization</b>—above CMS threshold (Risk adjusted rate =6.9%; expected rate 18.4%)</p>	<p>8. The short-stay claims-based QM, <i>percentage of residents who were successfully discharged to the community</i>, will be replaced with the SNF QRP QM, <i>rate of successful return to home and community from a SNF</i>, in the Five-Star QM rating calculation.</p> <p>9. The long-stay QM, <i>percentage of residents who were physically restrained</i>, will no longer be included in the Five-Star QM calculation. Note that this measure will continue to be displayed on NHC.</p> <p>10. The long-stay QM, <i>percentage of high-risk residents with pressure ulcers</i>, will include unstageable pressure ulcers.</p>	<p><b>Quality Measures</b></p> <table border="1"> <thead> <tr> <th></th> <th>LS</th> <th>SS</th> <th>Overall</th> </tr> </thead> <tbody> <tr> <td>★</td> <td>175 – 524</td> <td>167 – 541</td> <td>342 - 1066</td> </tr> <tr> <td>★★</td> <td>525 – 624</td> <td>542 – 638</td> <td>1067 – 1263</td> </tr> <tr> <td>★★★</td> <td>625 – 709</td> <td>639 – 721</td> <td>1264 – 1431</td> </tr> <tr> <td>★★★★</td> <td>710 – 799</td> <td>722 – 805</td> <td>1432 – 1605</td> </tr> <tr> <td>★★★★★</td> <td>800 – 1250</td> <td>806 – 1250</td> <td>1606 - 2500</td> </tr> <tr> <td>Claremont</td> <td>765.4 (4)</td> <td>708.3 (3)</td> <td>1473 (3)</td> </tr> </tbody> </table> <p>Trends remain same—Increased thresholds</p> <p>QAPI committee will analyze QM's to increase points and develop PIP's</p> <p>Areas of Opportunities:</p> <p>LS—ADL decline, ability to move independently worsened, Antipsychotic</p> <p>SS—New or worsened PU, Antipsychotic, Rehospitalization, Successful Discharge to community</p>		LS	SS	Overall	★	175 – 524	167 – 541	342 - 1066	★★	525 – 624	542 – 638	1067 – 1263	★★★	625 – 709	639 – 721	1264 – 1431	★★★★	710 – 799	722 – 805	1432 – 1605	★★★★★	800 – 1250	806 – 1250	1606 - 2500	Claremont	765.4 (4)	708.3 (3)	1473 (3)	
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<p><b>Department of Health Reportable Events</b></p> <p>7 other          5 Misappropriation          5 Complaints of Abuse</p> <p>All unsubstantiated</p>		<p><b>Department of Health Reportable Events</b></p> <p>5 Other          6 Abuse—all unsubstantiated          3 Misappropriation          1 Health Reportable Disease          4 Transfer to ER</p>	<p>Increased awareness of Abuse allegation keywords for investigations</p>																												

Electronic Health Record

Facility currently working with newly developed UDA's