

Minutes
Operating Board of Directors
DeKalb County Rehab & Nursing Center
January 12, 2016

Present: Directors: Ron Klein, Misty Haji-Sheikh, Greg Millburg, Jeff Whelan, Rita Nielsen

Absent Directors: Veronica Casella, Russell Deverell

Also Present: Bart Becker, Gary Hanson, Gary Winschel, Michael Scavotto

Ron Klein called the meeting to order at 7:00 am.

The agenda was approved.

The November 2015, Operating Board minutes were reviewed and approved.

There were no Public comments.

Old Business: None

New Business

Management Report:

Operations and Finance:

Gary Winschel reported that November 2016 financial statements reflect a net gain of \$80,408; year to date net income of \$227,244.

Revenue and Expense notes for November include:

1. 148 net conversion days were booked in September which adjusted private pay revenue upward by over \$30,000 – Medicaid ruled that several residents’ funds would be used as private pay spenddown versus Medicaid payments.
2. Medicaid revenue adjustment continues – decreasing booked revenue by 5%, \$27,000, to provide a reserve for likely rate reductions to be imposed by the State once a budget resolution is reached.
3. Medicare A revenue remains strong, with a total average daily census (ADC) of 27.2
4. Total ADC of 170.4 is 2.6 below budget
5. Utilities were \$10,000 below average due to mild temperatures.
6. Professional Services were \$15,000 below average – lower invoices and several cases close to completion.

A brief discussion was held as to whether the 5% decrease in booked Medicaid revenue was enough. As of now it will remain at 5%.

Gap days were discussed. If the residents transitioning to Medicaid, new Medicaid admissions, and Medicare A residents transitioning to Medicaid should be required to provide additional financial information (ie. Full Disclosure, Financial statements, five years of tax documents, etc.). Some nursing facilities require “full disclosure.” These suggestions will be reviewed.

Bart Becker, Administrator for DCRNC, gave a report: DCRNC had a luncheon with Kishwaukee Hospital in November 2015. The luncheon was with the Hospital Discharge Planners and their supervisor. The Discharge Planners complimented Linda McDowell, Social Services Director at DCRNC and stated that DCRNC is the number one facility for patient referrals. DCRNC has a very good relationship with Kishwaukee Hospital.

Illinois Department of Public Health hasn't visited the facility since September of 2015. The annual survey/inspection is expected at any time. All departments continue to prepare for the annual inspection. There were seven total resident concerns in November 2015 (five were IDPH reportable). There were three total resident concerns in December 2015 (two were IDPH reportable).

The reduction of hospital re-admissions continues to be an ongoing task. The average re-admission rate for March 2015 through November 2015 was 13%. We are striving for at least 9% to 11% hospital re-admission rate. Tools being implemented to reduce unnecessary hospital readmissions are Stopped and Watched forms, S.B.A.R. form, follow-up phone calls to discharged residents to assure they're doing well, and also a Quality Improvement Tool which reviews transfers to the hospital (after they've occurred).

Building improvements continue. Securecom is installing the new door alarm/ wander guard system, which should be fully installed within the next couple of weeks. This will enhance resident security /safety. Electronic Medical Record software continues to be reviewed to determine the best software for the facility. An additional Maintenance man has been hired and quite a bit of progress is being made with building enhancements/ repairs.

Gary Winschel reported the Facilities Update:

Two resident dining rooms have been repaired and painted. Two resident rooms have been designated as display units. These rooms are used during tours of the facility. Census was discussed as well as a couple of incidents where the police were notified. The revised collection letter/ call process was described.

Possible building plans were discussed. The possibility of adding a sixteen-bed Medicare Unit with private Medicare suites, a multi-purpose room, downsizing the nursing stations, as well as creating lounges/resident visiting areas. Improvements would facilitate resident food cart distribution and enhance Medicare A/ private pay revenue. Construction would enhance the longevity of the facility for the next fifteen to twenty years.

The Open Meetings Act (OMA) training needs to be started. Rita Nielsen has offered to chair the committee. New and reappointed Board members have ninety days to complete the training. This will be discussed further at the next Operational Board Meeting.

“Conflict of Interest” forms, for the Compliance Program, were signed by Operational Board members who hadn’t already signed them.

Executive Session:

No closed session took place

Next Meeting: March 9, 2016 at 7 00 a.m.

Meeting adjourned at 8:25 a.m.

Respectfully submitted
Bart J. Becker
Recording Secretary