

1. Nathaniel Witherell Board Of Directors Meeting Agenda, April 26, 2021

Documents:

[TNW BOARD OF DIRECTORS AGENDA 2021\\_04\\_26.PDF](#)

1.1. NW Board Of Directors Meeting Draft Minutes Of March 22, 2012

Documents:

[TNW BOARD MINUTES 2021\\_03\\_22 V3.PDF](#)

1.1.i. Board Of Directors Meeting March 22, 2021 Approved Minutes

Documents:

[TNW BOARD MINUTES 2021\\_03\\_22 APPROVED.PDF](#)

1.1.ii. NW\_Board\_Of\_Directors\_Meeting\_Draft\_Minutes\_2021\_04\_26

Documents:

[TNW BOARD MINUTES 2021\\_04\\_26 VERSION 2.PDF](#)



*The Nathaniel Witherell*  
TOWN OF GREENWICH  
CONNECTICUT

**Board Meeting  
Virtual Webinar  
Monday, April 26, 2021, 5:00 PM**

**ZOOM MEETING WEBINAR INFORMATION**

Webinar Link:

<https://greenwichct.zoom.us/j/84041439174?pwd=RS9UcjJqekU5RVlSVlJjZlhUWEdCdz09>

To join by phone dial: 1 646 518 9805; Webinar ID: 840 4143 9174; Password: 0004183

**AGENDA**

1. Medical Director's Report – Frank Walsh, MD
2. Review/Approval - Minutes March 22, 2021 – Chairman
3. Reports
  - a. Executive Director-John Mastronardi
  - b. Building Committee –Larry Vanterpool
  - c. Finance Committee-Nisha Hurst and Nunzio Raimo
  - d. Marketing-Chris Carter
  - e. Friends of Nathaniel Witherell – Scott Neff
  - f. Vaccination Update and Statistics-Nisha Hurst
4. Chairman's Discussion – Laurence Simon
  - a. Cybersecurity Incident Response Plan-Board Approval is required.
  - b. FY22 Budget Status and RTM meetings via Zoom
5. New Business
6. Adjournment

***2021 Calendar of Board Meetings***

***June 21, 2021***

***July 26, 2021***

***September 13, 2021***

***October 18, 2021***

***Nov 15, 2021***

cc: Town Clerk



*The Nathaniel Witherell*  
TOWN OF GREENWICH  
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**Board of Directors Zoom Board Meeting  
Minutes  
March 22, 2021**

**Present:** Laurence B. Simon, Chairman; Melissa Gibbons, Secretary; Suzanne Brown; Christopher Carter; Paul Hopper; Nisha Hurst; Richard Kaplan; Joan Merrill; Nirmal Patel, MD MPH

**Absent:** none

**Staff:** Michel Baptiste, Housekeeping/Laundry Supervisor; Chris Ann Bennett, Infection Preventionist; Nadia Benson, Deputy and Director of Nursing; George Cossifos, Director of Admissions; Linda Marini, Assistant to Executive Director; John Mastronardi, Executive Director; Scott Neff, FNW Executive Director; Nunzio Raimo, Director of Financial Operations; Justine Vaccaro, Director of Social Work; Larry Vanterpool, Facilities Director; Frank Walsh, MD, Medical Director; Margaret Wayne, Associate Director of Nursing

**Guests:** Amy Badini; Andy Duus, BET Liaison; Elizabeth Franklin-Quigley; Beth Krumeich, BET Liaison; Tom McGuire; Mary Lou Carraher; Hilary Mitchell; Mary Alice Schulte; Sheilah Smith; Ellen Wolfson, Commission on Aging; Leslie Yager

Mr. Simon opened the meeting at 5:00 PM and reminded the audience that this is a public meeting, but not open for the public to speak.

Mr. Simon welcomed Paul Hopper, new member of the Board of Directors, appointed by the RTM on March 8<sup>th</sup>.

**Medical Director's Report – presented by Dr. Frank Walsh**

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Ms. Gibbons asked if there was an advantage to continuing the current COVID testing for staff and residents regardless of the mandates. Dr. Walsh stated that once the facility has gone a substantial amount of time without a positive case, he does not find this testing regimen beneficial. If we learn that a staff member has COVID, we would test all staff and the residents on the floor where that staff member works. Ms. Benson noted that all residents have been tested on a regular basis for the last several weeks because we had been undergoing outbreak testing. Ms. Benson also noted that if DPH continues to supply the testing for staff at no cost, we will continue the testing. Once it is at the cost of the facility, we will re-evaluate.

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Mr. Mastronardi completed his report by reiterating his point that TNW needs to be financially viable in order to continue to operate: "No margin, no mission".

Mr. Kaplan asked if the layoffs affected those in direct care roles. Of the 7 positions, 2 were active full time RN positions (a third could not return for medical reasons and we will not fill); 1 was an active full time CNA (3 other CNA positions vacant due to retirements will not be filled). Ms. Benson explained that there will now be 1 Patient Care Coordinator (PCC) per 2 units; 1 Charge Nurse and 1 Med Nurse on each unit. The PCC positions being eliminated are currently held by RN's; those RN's were given the opportunity to assume the role of part time Charge Nurse on their units (2

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Mr. Vanterpool reported that on February 27, 2021 we had a main water line break in a supply line that supplies the entire facility. Fortunately, the impact was minimal, as the incident was detected early. The repair required significant investments, notably the replacement of a backflow preventer. On the positive side, this need was anticipated and already incorporated into the budget for next year.

### **Finance Report – presented by Nunzio Raimo**

Mr. Raimo reviewed the Financial Statement and Operating Results for the period ending February 28, 2021:

- NW Census by payer class for February 2021: total days billed in February 2021 were 4,645, showing a growth in census despite the shorter length of the month by 3 days.
- Occupancy Percentage for February 2021 was 82% and average beds per day was 165.9 - the highest to date for this fiscal year. Mr. Raimo noted that at 3 weeks into the month of March we are running at an average daily census of 170.

- Revenue by Payer Class: February revenue from operations was \$1,977,961. Private pay and Medicare A were the highest payors and are increasing; Medicare A was slightly higher than average at \$431,724.
- Two efficiency metrics were highlighted: 1.) Revenue per FTE (which is an indicator of staffing efficiency) for February 2021 was \$7,036; 2.) Revenue per billable day (which shows the efficiency of our revenue stream from operations) for February 2021 was \$426, still higher than 3 of the last periods even with a shorter month.
- Total Revenues for the month of February 2021, including COVID related payment received from CT Dept. of SS, HHS and CMS, was \$2.194M.
- Revenue February YTD Actual was \$16,005,179 compared to budget of \$18,848,000, resulting in a negative variance of \$2,842,821.
- Expenses from Operations for February 2021 YTD Actual were \$13,295,327 compared to budget of \$13,995,991, resulting in a positive savings year to date of \$700,664.
- February 2021 YTD Margin Before Debt & Allocation of \$2,709,852; \$2.1M under Budget.
- February 2021 YTD Margin Before Debt & Capital was \$983,157 compared to our budget of \$876,930 resulting in a variance of (\$1,860,087). Actual Capital Expenditures were \$77,868, and Deferred Revenues were \$2.251M Revenue(State & Federal monies received for COVID expenses). Operating Profit before Debt Service of \$1.189M was almost \$400K in our favor.
- Net Revenues/(Expenses) after COVID monies are in a favorable position of \$356,353.
- Benefit Summary for YTD February 2021 variance to budget was a savings of \$276,901.
- For February YTD 2021 Salaries & Wages were under budget by \$554,059.
- For February YTD 2021 OTPS were \$680,390 compared to a budget of \$635,809, a negative variance of \$44,582 due bills that came in during February, i.e. Matrix (every 3 months), legal & advertising fees.
- For February YTD 2021 Supplies & Materials were below budget by \$169,558.
- For February YTD 2021 Maintenance expenditures were below budget by \$21,627.
- Overall Gain/(Loss) Fiscal Year to date at (\$1.8M); after COVID money at \$356,353.

### **Marketing – presented by Christopher Carter**

Mr. Carter reported the following:

- This year we are doing some geographic targeting around Westchester Hospital and the Hudson Valley hospitals.
- We are working with Hearst to track leads to affirm that our advertising is working
- We have some new print ads coming out, focusing on short-term rehab and skilled nursing.
- Regarding social media, since our last meeting we have had 28 posts. The biggest engagement was on Fairfield County Giving Day which reached over 10,000 people.
- Three blogs were noted: Sepsis Care; Vaccines; Visitation and CMS Guidelines.
- We are working with a new website vendor to help with hosting, SEO and maintenance, and are finalizing the design. Regarding the creation of a login specifically for family use, Messrs. Carter, Mastronardi and Neff have discussed the pros and cons with Harrison

Edwards and believe the costs associated would be prohibitive. No competitors are currently offering this option.

- Mr. Mastronardi provided a Nathaniel Witherell response to the Greenwich Time coverage of the *Let the Families Back in Movement*. This was also posted in our Facebook feed.

### **Friends of Nathaniel Witherell (FNW) – presented by Scott Neff**

On Thursday, Feb. 25, 2021 Friends of Nathaniel Witherell participated in the Fairfield County Community Foundation Online Day of Giving. This online event brought in donations from 96 donors this year. All of the proceeds raised by FNW during that event will go to the Resident Life Fund.

Mr. Neff reported that the Community Appeal has exceeded the goal from last year. He continues to do follow-up with past supporters who we have not heard from and anticipates that we will continue to receive contributions through the fiscal year end of June 30, 2021. Mr. Neff will also look into reaching out to vendors who have contributed in the past.

### **Chairman's Discussion – presented by Laurence Simon**

Mr. Simon stated that we have adequately covered the topics of Vaccination Status and Visitation Policy previously in this meeting.

Mr. Simon thanked everyone for their time and effort during these challenging times and sees the facility doing much better now going forward. He noted that the census continues to rise (currently 178); case mix is steadily improving (more Med A cases); long-term beds are beginning to fill; and we are making management changes.

Mr. Simon stated that Mr. Mastronardi is doing a great job in finding cost savings which will make us a stronger place in which to work.

Mr. Simon reminded the audience, as he had stated at the January 25, 2021 Board Meeting, if anyone has an item to be considered or discussed at the Board Meeting, it needs to be submitted to Mr. Simon at least 5 days in advance of the meeting.

### **New Business - none**

A motion to adjourn the meeting was made by Mr. Kaplan seconded by Ms. Brown and the meeting was adjourned at 6:37 PM.

Respectfully Submitted,  
Linda Marini  
March 29, 2021



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### **Marketing – presented by Christopher Carter**

Mr. Carter reported the following:

- This year we are doing some geographic targeting around Westchester Hospital and the Hudson Valley hospitals.
- We are working with Hearst to track leads to affirm that our advertising is working
- We have some new print ads coming out, focusing on short-term rehab and skilled nursing.
- Regarding social media, since our last meeting we have had 28 posts. The biggest engagement was on Fairfield County Giving Day which reached over 10,000 people.
- Three blogs were noted: Sepsis Care; Vaccines; Visitation and CMS Guidelines.
- We are working with a new website vendor to help with hosting, SEO and maintenance, and are finalizing the design. Regarding the creation of a login specifically for family use, Messrs. Carter, Mastronardi and Neff have discussed the pros and cons with Harrison

Edwards and believe the costs associated would be prohibitive. No competitors are currently offering this option.

- Mr. Mastronardi provided a Nathaniel Witherell response to the Greenwich Time coverage of the *Let the Families Back in Movement*. This was also posted in our Facebook feed.

### **Friends of Nathaniel Witherell (FNW) – presented by Scott Neff**

On Thursday, Feb. 25, 2021 Friends of Nathaniel Witherell participated in the Fairfield County Community Foundation Online Day of Giving. This online event brought in donations from 96 donors this year. All of the proceeds raised by FNW during that event will go to the Resident Life Fund.

Mr. Neff reported that the Community Appeal has exceeded the goal from last year. He continues to do follow-up with past supporters who we have not heard from and anticipates that we will continue to receive contributions through the fiscal year end of June 30, 2021. Mr. Neff will also look into reaching out to vendors who have contributed in the past.

### **Chairman's Discussion – presented by Laurence Simon**

Mr. Simon stated that we have adequately covered the topics of Vaccination Status and Visitation Policy previously in this meeting.

Mr. Simon thanked everyone for their time and effort during these challenging times and sees the facility doing much better now going forward. He noted that the census continues to rise (currently 178); case mix is steadily improving (more Med A cases); long-term beds are beginning to fill; and we are making management changes.

Mr. Simon stated that Mr. Mastronardi is doing a great job in finding cost savings which will make us a stronger place in which to work.

Mr. Simon reminded the audience, as he had stated at the January 25, 2021 Board Meeting, if anyone has an item to be considered or discussed at the Board Meeting, it needs to be submitted to Mr. Simon at least 5 days in advance of the meeting.

### **New Business - none**

A motion to adjourn the meeting was made by Mr. Kaplan seconded by Ms. Brown and the meeting was adjourned at 6:37 PM.

Respectfully Submitted,  
Linda Marini  
March 29, 2021



*The Nathaniel Witherell*  
TOWN OF GREENWICH  
CONNECTICUT

**Board of Directors Zoom Board Meeting  
Minutes  
April 26, 2021**

**Present:** Laurence B. Simon, Chairman; Melissa Gibbons, Secretary; Suzanne Brown; Christopher Carter; Paul Hopper; Nisha Hurst; Richard Kaplan; Joan Merrill; Nirmal Patel, MD MPH

**Absent:** none

**Staff:** Michel Baptiste, Housekeeping/Laundry Supervisor; Chris Ann Bennett, Infection Preventionist; Nadia Benson, Deputy and Director of Nursing; Linda Marini, Assistant to Executive Director; John Mastronardi, Executive Director; Scott Neff, FNW Executive Director; Kevince Pierre-Louis, Director of Dining Services; Elizabeth Mungai, Director of Utilization, Clinical Outcomes, Rehab Services; Nunzio Raimo, Director of Financial Operations; Carissa Ronish, Therapeutic Recreation Administrator; Justine Vaccaro, Director of Social Work; Larry Vanterpool, Facilities Director; Frank Walsh, MD, Medical Director

**Guests:** Armstrong; Amy Badini; Meredith Braxton; Fred Camillo, First Selectman; Andy Duus, BET Liaison; Carol Ferraro; Elizabeth Franklin-Quigley; Beth Krumeich, BET Liaison; Tom Keown, CYBERDEFENSES; Sheilah Smith; Maria Szpak; Ellen Wolfson, Commission on Aging; Joanne Wurst, CYBERDEFENSES; Leslie Yager; (mabsy47)

Mr. Simon opened the meeting at 5:03 PM via Zoom Webinar.

**Medical Director's Report – presented by Dr. Frank Walsh**

Dr. Walsh reported that the census today is 177; with 5 hospitalizations. We also had 3 new admissions today.

Harvest Healthcare, LLC, our new provider of psychiatric services, began providing services to our residents this past month. They have been a very positive addition to our facility.

Weekly COVID-19 testing continues for all facility staff. By the end of May there may be no more mandated weekly staff testing. We are in the second round of outbreak testing but it has not affected visitation. All staff and residents were tested during this second round.

Dr. Walsh reported that 72% of staff are vaccinated, which is remarkably high for our facility. We continue to educate the staff about the importance of getting the vaccine. Dr. Walsh continues to participate in a vaccine Q & A with staff each Wednesday in the auditorium. Ninety-two percent of residents have been vaccinated. New admissions are offered the vaccine upon admission; Dr. Walsh noted that most recent new admissions have already been vaccinated.

In response to Ms. Merrill's question regarding who makes the determination to send a resident to the hospital, Dr. Walsh responded that it is either himself or the doctor covering for him that makes that decision.

- Mr. Simon posed the question of whether we should be doing more here at NW to prevent some hospitalizations.
- Ms. Benson explained that we are in the process of establishing a "treat in place" protocol. The nurses will be able to establish if it is appropriate to send a resident to the hospital. They will be able to assess if an issue can be managed in-house; whether the residents requires an IV; and whether to start antibiotics, as examples.
- Mr. Kaplan referenced prior discussions regarding the possibility of bringing Optum into NW and having another Nurse Practitioner (NP) in the building for additional clinical support to help keep the long-term care residents in place.
- Dr. Patel noted that the Board and management had extensive discussions around this topic before the change in administration a year ago, with the change in CMS payment models. These conversations explored whether we can offer more advanced care within NW, manage higher risk patients, offer deeper skills and services, and also align new changes with our business goals. These questions should be revisited by the Board and current administration.

Ms. Gibbons asked that Dr. Walsh speak to the causes of illness requiring hospitalization, and trends in hospitalization over time.

- Dr. Walsh said there some patients are discharged from the hospital too early to be in a rehab facility, and then they are then readmitted to the hospital.
- Mr. Simon stated that there were 11 residents in the hospital at the end of December 2020; that number has been as low as 1 and up to 6.
- Mr. Kaplan noted that it would be rare for a facility to have no one in the hospital, due to the age and health of the population being served. The average length of stay for a long-term resident in a nursing home is about 18 months. Mr. Kaplan also noted the importance of every resident having Advanced Directives for just such circumstances. There may be families who do not want their loved one transported from NW to a hospital, and others who may insist on it.

Ms. Merrill questioned whether staff are aware of certain modalities, or do they see issues with patients that may prevent them from having to go out to the hospital? Ms. Benson stated that while staff are aware of certain medical situations or health statistics, they cannot override a doctors' order. The staff takes vital signs, reviews the residents' condition, notes

their appearance, etc., and reports that to the doctor. The doctor/APRN then makes the decision on whether the resident is transported to the hospital.

Dr. Patel stated that most health facilities have Quality Assurance Programs in place, where a committee meets regularly to review incidents and situations described in the Quality Assurance plan to make sure that all processes/procedures are properly followed. This would apply, for example, to hospitalizations and residents being transported out of the facility. Ms. Benson stated that NW has a Quality Assurance Improvement Program (QAIP) and the committee meets quarterly. Ms. Benson said we use INTERACT, a publicly available quality improvement program that focuses on improving the identification, evaluation, and management of acute changes in condition of nursing home residents. She is currently looking to implement the *Stop and Watch* program for CNA's, which is an early warning communication tool that CNAs, or any other person (i.e. housekeepers, dietary workers, family members, volunteers) can use to alert a nurse if they notice something different in a resident's daily care routine.

### **Review/Approval of Minutes of March 22, 2021**

A motion to approve the minutes of March 22, 2021 was made by Mr. Kaplan, seconded by Mr. Carter. A vote was taken, and the minutes were approved by a vote of 9-0-0

### **Executive Director's Report - presented by John Mastronardi**

Staffing changes – Mr. Mastronardi explained the 10-person staff reduction and how it affected the facility.

- The changes affected the day shift on the 4 long-term care floors.
  - There are now 5 CNAs instead of 6 per long-term care floor on the day shift.
  - The ratio is now just under 8 residents to 1 CNA on the 4 long-term care floors on the day shift. The standard in skilled nursing facilities is 12 residents to 1 CNA.
- The Main and Garden Level Rehab units, with 20 and 22 residents respectively, continue with 3 CNAs on each floor, which is a staffing ratio of 7 residents to 1 CNA.
- There were 3 Patient Care Coordinator (PCC) positions eliminated.
  - 1 PCC now handles the 1<sup>st</sup> & 2<sup>nd</sup> floors; 1 PCC handles the 3<sup>rd</sup> & 4<sup>th</sup> floors; 1 PCC handles the Main and Garden Level Rehab units.
  - We will be adding 3 LPN's in May and increasing our pool of part time nurses to utilize when scheduled nurses call out.
- Mr. Mastronardi stated that he had the Business Office run the staffing ratios with this model to see if it would affect our 5-star rating. Because the 5-star levels are predominately RN based, these staffing changes will not impact our 5-star rating.

Visitation Policy – Per CMS guidance on visitation, we are encouraging visitation with the preferred locations as follows: outdoor visitation, use of the pods, the auditorium, solarium and the library/family room. Room visits are allowed but we are encouraging visitors to meet

with their loved ones in the previously mentioned locations based on the CMS guidance. We must also limit visitor movement within the facility. Shared rooms should not have in-room visitation if possible. We are not preventing in-room visitation if visitors must see their loved one in their room.

Communal dining is taking place on the units but not to pre-pandemic levels. We are accomplishing this by staggering the seating times and the number of residents at any one sitting.

On unit recreation activities have continued throughout the COVID restrictions. Outbreak testing and cases do not interfere with those scheduled activities. We are fortunate to have a full-time Therapeutic Recreation team facilitating all the activities on a daily basis. That team also includes 2 in-house musicians who sing and play music for the residents. We plan on bringing in outdoor vendors and entertainers soon to add to our musical entertainment offerings. Those programs will take place in the auditorium once restarted. We have recently added back Catholic services and the Rosary, and Protestant services will be added shortly.

Caretech Group – Mr. Mastronardi reported that we have engaged a company called Caretech for utilization and tracking of our supplies. They will help to ensure some smart purchasing and eliminate some of the redundancy we have in ordering; it will also help minimize the waste that we have in ordering of supplies and provide more affordable pricing. Mr. Mastronardi estimates the annual savings will be about \$250K.

Mr. Kaplan suggested that it might be helpful to broaden the facility's reach to family members by posting informational updates on the website, regarding visitation or other topics. This would allow people to understand what to expect as a week progresses, even though we know that guidance is constantly changing, and may also help decrease the number of email interchanges that can, in fact, distract the staff. Mr. Carter suggested posting this information on the website along with the weekly COVID alerts and updates.

Ms. Hurst stated that Mr. Mastronardi and the team have been doing a great job and asked what the Board could do to help with the challenges of managing NW during the pandemic. Mr. Mastronardi thanked the Board members for their support on behalf of the NW team, and he hopes adding the information to the website will help decrease the number of lengthy emails. He asked the Board to please not engage in the email conversations between family members, Board members and the NW team. These conversations are extremely time consuming and distracting for the staff and are not productive. He is happy to have a conversation by phone and asks that Board members call him if/when necessary to do so. Mr. Mastronardi stressed that the NW management team sincerely has the best interest of our residents at heart.

Mr. Kaplan stated that upon his hire the Board gave Mr. Mastronardi clear direction: He was tasked with getting NW under financial control and being successful in both changing the

direction of this facility and keeping our 5-star rating. He also told Mr. Mastronardi that he is doing a great job and the Board is behind him to offer their support.

Dr. Patel said she has had the opportunity to work with the team on the COVID Task Force, and that they are dedicated professionals who really care about their patients; this is their purpose and their mission. She agreed that the emails are a distraction. She also stated that there is no healthcare services delivery organization that can deliver healthcare operations at 100% consistency across the different elements of care. What is critical is that we have the proper processes in place to ensure that we are always doing our utmost to provide the best care possible. Given that we have developed a Communications Policy questions and concerns from Board members and families, Dr. Patel questioned why this policy is not currently being adhered to.

Ms. Merrill also asked Mr. Mastronardi how the Board can help or assist in a constructive way. Mr. Mastronardi suggested the same to the Board as he has to the Family Council; that they could visit and connect with those residents who have no family or friends. It would be a tremendous means of support to the facility.

### **Building Committee Report - presented by Larry Vanterpool**

The Building Committee met on Thursday, April 22, 2021. Mr. Vanterpool provided updates to the Board on two projects currently in progress.

#### **Tower Electrical Panel replacement**

The RFB tabulation was completed and Greenwich Electric was the lowest bidder. We are about to grant the contract for \$235K, which is less than 50% of the original estimate for the project. The contract is in development and will take another 4-5 weeks to be reviewed by the law and finance departments and be signed. This savings gives the committee the opportunity to address sooner than anticipated the second phase of the project, replacing the electrical sub-panels in the Tower patient care areas.

#### **Pavilion Exterior Renovation - CDBG Block Grant**

The contract has been awarded to AVT Construction in the amount of \$55,444. This is only about 35% of the original \$160K budget. The committee is reviewing how they might utilize the remainder of the funds to upgrade things such as the apartment kitchen appliances, paint, etc. The committee will evaluate the cost and determine how they may move forward with these additional projects and utilize the total funds available.

### **Finance Report – presented by Nunzio Raimo and Nisha Hurst**

Ms. Hurst reported that Witherell is doing well and headed in the right financial direction. NW's administration has been asked to do more with less, and to cut expenses to make the organization work within the Town's budget. We strive to provide quality care to our residents within this budget.

- March 2021 had the highest number of patient days at 5,339 since March 2020 (85% occupancy).
- Revenue was \$2.275M, just \$80K short of the budget
- Through the first 25 days of April, the Census is at 175.6, an improvement over 172.2 in March. There was a peak of 182 days in April.
- Long term census population is at 146, with a goal of 153.
- Our overall census goal starting in the new fiscal year will be 188, as it has been pre-COVID.

Mr. Raimo reviewed the Financial Statement and Operating Results for the period ending March 31, 2021:

- NW Census by payer class for March 2021: total days billed in March 2021 were 5,339, the highest in the last 12 months.
- Occupancy Percentage for March 2021 was 85%, and average beds per day was 172.2, just off by 5% from March 2020 occupancy percentage of 90%.
- Revenue by Payer Class: March revenue from operations was \$2,347,695. Private pay was budgeted at 26% but was actually 32% of revenue for March 2021.
- Two efficiency metrics were highlighted: 1.) Monthly revenue per FTE (which is an indicator of staffing efficiency) for March 2021 was \$8,463; 2.) Revenue per billable patient day (which shows the efficiency of our revenue stream from operations) for March 2021 was \$439.73.
- Revenue March YTD Actual was \$18,280,324, compared to budget of \$21,204,000, resulting in a negative variance of \$2,923,676.
- Expenses from Operations for March 2021 YTD Actual were \$14,920,570 compared to budget of \$15,710,602, resulting in a positive savings year to date of \$790,032.
- March 2021 YTD Margin Before Debt & Allocation of \$3,359,754, \$2.13M under Budget.
- March 2021 YTD Margin Before Debt & Capital was \$(737,895), compared to our budget of \$1,075,935, resulting in a variance of (\$1,813,829). Actual Capital Expenditures were \$77,868, and Deferred Revenues were \$2.251M Revenue (State & Federal monies received for COVID expenses). Operating Profit before Debt Service was \$1,435,246, \$437K in our favor.
- Net Revenues/(Expenses) after COVID monies are in a favorable position of \$726,616.
- Benefit Summary for YTD March 2021 variance to budget was a savings of \$314,647.
- For March YTD 2021 Salaries & Wages were under budget by \$713,550.
- For March YTD 2021 OTPS were \$794,727 compared to a budget of \$715,285, a negative variance of \$79,442 due to invoices that came due for i.e. Matrix, visitation pods, Pitney Bowes, pest control, Raintech
- For March YTD 2021 Supplies & Materials were below budget by \$166,038.
- For March YTD 2021 Maintenance expenditures were below budget by \$10,116.
- Overall Gain/(Loss) Fiscal Year to date at (\$1.5M); after COVID money at \$726,616.

## **Marketing – presented by Christopher Carter**

Mr. Carter reported the following:

- Over the past 2 months we completed our first flight with *Today Media* because they have some interesting geofencing capabilities.
  - Our digital ads were focused around hospitals in Westchester County, with generally good engagement. We have rectified some targeting issues during the flight to make it more evenly delivered across Westchester County.
  - We are about to start a 2-month campaign at the end of April, adding Southwest CT, Greenwich and Stamford Hospitals, to the current advertising list.
- Social Media
  - This past month we have done 17 Facebook posts, including the Vaccination Drive where we received help from Family Centers and Fred Camillo; and a Q & A with NW Social Workers.
  - There was a slight drop in engagement in social advertisement in March, due to our emphasis on Fairfield Giving Day. But in April we are seeing a real uptick in both engagement and impressions.
- Blogs – We have just released one on the *Importance of Location in Choosing a Long-Term Care Facility*; and we have an upcoming piece on *Registered Dieticians*.
- We anticipate the new development work on the website to be ready by the end of this week; the copy and design have been approved. We will then go into beta test, and get our SEO specialist involved to make sure we have all the necessary key words. The re-launch is anticipated for mid-May.

## **Friends of Nathaniel Witherell (FNW) – presented by Scott Neff**

Mr. Neff reported the FNW Community Appeal has exceeded last year's fundraising total by ten percent. He continues to conduct follow up with past contributors who have not yet made a contribution to this year's appeal. The FNW fiscal year ends on June 30, 2021.

Mr. Neff is also researching and preparing grant requests to local family foundations in support of the Resident Life Fund.

## **COVID-19 Vaccination Update and Statistics – presented by Nisha Hurst**

There are 279 staff members at Nathaniel Witherell: 150 full time and 129 part time.

- 178 of the 279 are vaccinated; 63.8%
- 118 of 150 full time employees are vaccinated; 78.7%
- 60 of 129 part time employees are vaccinated; 46.5%

Nursing Department:

- There are 115 full time employees; 87 of 115 are vaccinated; 75.7%
- There are 81 part time employees; 38 of 81 are vaccinated; 47%
- 125 of 196 total nursing employees; 63.8%

On Monday, March 29, 2021 with the help of the First Selectman's Office, we held an onsite vaccination clinic where 82 out of 85 available doses were used. This led to a significant increase in the number of vaccinated staff.

We continue to encourage vaccination and educate staff, and Ms. Hurst will also continue to work with the Administration, Dr. Walsh and Infection Prevention in that regard.

#### Mandating the vaccine

- Mandating the vaccine is currently difficult because the vaccines have been authorized for emergency use only; Pfizer and Moderna have applied for full FDA approval.
- According to the CDC Website, whether an employer may require or mandate COVID-19 vaccination is a matter of State or applicable law; the FDA does not mandate vaccinations.
- Some employers have begun to mandate vaccination which has led to lawsuits.
  - LA Unified School district, the 2<sup>nd</sup> largest school district in the US, mandated vaccination for their teachers – there has been a federal lawsuit filed demanding they halt the mandate.
  - A Police Officer in New Mexico filed suit against his department when they mandated the vaccine and he did not want to receive it.
  - After receiving information that Jewish Family Services was mandating vaccines for its staff, Ms. Hurst attempted to contact someone there for details, but has not yet heard back from that facility.
- From a Human Resource perspective, employers must allow for religious exemptions and Americans with Disabilities Act accommodations.
- NW employees are union employees; this would have to be discussed with the unions.
- An additional issue is if we mandate vaccination, how will it affect our staffing levels.

Ms. Hurst stated that she empathized with family members who want to see their loved ones. Ms. Hurst recognizes family concerns over their loved ones being isolated. We are trying to address that while managing keeping residents safe, keeping COVID out of the building. Just because people are vaccinated does not mean they cannot get COVID. It is also unclear based on current research whether or not the vaccines protect against variants.

Ms. Hurst quoted the CDC website with regard to infection protocols: "Nursing homes must sustain core IPC practices and remain vigilant for SARS-CoV-2 infection. Unless noted in the updated vaccination guideline this guidance applies regardless of vaccination status or level of vaccination coverage in the facility."

As Mr. Mastronardi reported earlier, Ms. Hurst reiterated, activities have continued on the units throughout adhering to the proper infection control protocol; communal dining is taking place with proper social distancing. Family members may take their loved ones out of the facility to their homes, the barber shop, car rides, etc. Ms. Hurst emphasized that there are many opportunities for families to spend time with their loved ones.

Mr. Kaplan commented that people have an ultimate choice to make. He certainly would not want to see us lose any residents; he wants to make sure we keep people happy, well cared for, and safe. We do the best we can, and cannot expect to satisfy everyone. But if someone is really unhappy, and they truly believe their family members are not receiving good care, they have the choice to go elsewhere. He noted that only 3 out of 17 nearby facilities were 5-star; one of which is the Witherell.

Dr. Patel suggested we seek some legal counsel with regard to mandating the vaccine for staff. Mr. Simon will supply Ms. Hurst with contact information for Heather Berchem of Wiggin and Dana.

Pertaining to additional onsite vaccine clinics, Ms. Benson does not think our staff compliance percentages will increase much more. Even the national average has not budged since the last rollout of the vaccine. Clinics are having to discard unused doses. But if Mr. Camillo is kind enough to offer his assistance again in getting another onsite clinic at NW, she does believe it would be worth it even if it gets but another 5 staff members vaccinated. Mr. Mastronardi agreed we will reach out to the Town about offering an additional clinic, and we will also investigate if Omnicare Pharmacy can provide vaccine doses to our facility.

### **CYBERDEFENSES – Joanne Wurst and Tom Koewn**

The Cybersecurity Incident Response Plan for The Nathaniel Witherell was developed by CYBERDEFENSES and provided to the Board prior to this meeting for their review.

The objective of the Cybersecurity Incident Response Plan:

“The Cybersecurity Incident Response Plan is provided to establish and maintain consistent incident response capabilities and processes in order to respond to cybersecurity events swiftly and effectively. It is designed to anticipate the many factors that comprise typical attacks and the wide variety of considerations that go into ensuring The Nathaniel Witherell is prepared to handle all possible scenarios.

This plan establishes the roles and responsibilities within The Nathaniel Witherell (“Witherell”) and among Witherell stakeholders for continuous incident response preparedness and execution. In addition, the plan reviews the cycle of moving from detection of an event to analysis to determine the details of an incident, and then on to containment, eradication, and eventual recovery from the incident. The plan also addresses post-incident activities that lead to continuous improvement, further mitigation of risk and preparedness for future potential events.”

Mr. Simon called for a vote from the Board to approve the Cybersecurity Incident Response Plan. The Board unanimously approved the plan with a vote of 9-0-0.

### **Chairman’s Discussion – presented by Laurence Simon**

Mr. Simon stated that we are now in the last phase of the fiscal year 2022 budget process.

- There will be a meeting of the Health and Human Services Committee of the RTM on Tuesday, May 4, 2021, at 7 PM via zoom.

- The full RTM meets on Monday, May 10, 2021 at 7 PM via zoom to vote on the budget. Mr. Simon has heard no comments or concerns regarding our budget and expects it to pass without change, although that is not a given.
- Mr. Kaplan asked for Ms. Marini to provide the zoom information for the RTM meeting on May 10<sup>th</sup>.

Mr. Simon thanked the Board members for their continued effort and participation. As stated previously, we have taken on a great many projects here at the Witherell. We have focused on financials, staffing, COVID, visitation, vaccination, improving our medical care, and keeping residents in-house, and more. As Mr. Mastronardi stated earlier that the team feels 'beat down' by all the negative commentary. Mr. Simon noted that he does not respond to the emails; although that does not mean he doesn't read them; he then gets criticized for not responding.

Mr. Simon stated that as an organization we are doing the best we can to meet the needs of our residents and most of the families; this is who we are, and this is our product. The Witherell has its' own plan and its' own management and is trying to execute a great number of projects under difficult circumstances. The Board's responsibility is to continue to support the organization. He warned Board members that if they respond to these emails to be brief; engaging in larger debates is not productive.

Mr. Simon noted a situation that occurred last weekend wherein a visitor to the Witherell was made to feel very uncomfortable and harassed by another visitor about protesting for 100% vaccination for NW staff. Mr. Simon said if behavior of this type continues we will ask the Greenwich Police to intervene and advise the individual that they are creating a general public disturbance.

Mr. Simon thanked everyone again, stating that we have a great institution offering a level of care desired by many people, proven by the number of admissions coming in all the time.

He noted that we are clearly on the right track with the Town in terms of what they are expecting of us financially.

We have many difficult issues to face, which we are focused on; we cannot be distracted from our goals.

### **New Business - none**

A motion to adjourn the meeting was made by Mr. Carter seconded by Mr. Kaplan and the meeting was adjourned at 6:58 PM.

Respectfully Submitted,  
Linda Marini  
May 3, 2021