

1. NW Board Of Directors Meeting Agenda June 20, 2022

Documents:

[TNW BOARD OF DIRECTORS AGENDA 2022_06_21.PDF](#)

1.1. NW Board Of Directors Meeting Approved Minutes Of April 25, 2022

Documents:

[TNW BOARD MINUTES 2022_04_25 APPROVED.PDF](#)



The Nathaniel Witherell
TOWN OF GREENWICH
CONNECTICUT

Virtual Board Meeting by Zoom Webinar **Monday, June 20, 2022**

Time: 5:00 PM

Zoom Webinar Link:

<https://greenwichct.zoom.us/j/85284801692?pwd=YjBUOUxyLzhEMWpoVHk2S2RBTIRnUT09>

To join by phone dial: 1 646 518 9805; Webinar ID: 852 8480 1692; Password: 1568197

AGENDA

1. Medical Director's Report – Frank Walsh, MD
2. Review/Approval - Minutes April 25, 2022 – Chairman
3. Reports
 - a. Executive Director-John Mastronardi
 - b. Building Committee –Paul Hopper and Stefano Materia
 - c. Finance Committee-Nisha Hurst and Nunzio Raimo
 - d. Marketing-Chris Carter
 - e. Volunteers and Interior Design-Kate Tabner
4. Chairman's Discussion – Laurence Simon
 - a. Plan to use additional Medicaid Funds for FY 23
 - b. Thank you to Suzanne Brown for her service on the Board
 - c. New Board Member Nominee Brad Markowitz
 - d. Strategic Planning Discussions-summer 2022
5. New Business
6. Adjournment

2022 Calendar of Board Meetings (in person)

July 25, 2022

September 19, 2022

October 17, 2022

Nov 14, 2022

cc: Town Clerk



The Nathaniel Witherell
TOWN OF GREENWICH
CONNECTICUT

**Board of Directors Zoom Board Meeting
Minutes
April 25, 2022**

Present: Laurence B. Simon, Chairman; Melissa Gibbons, Secretary; Suzanne Brown; Paul Hopper; Nisha Hurst; Richard Kaplan; Nirmal Patel, MD, MPH; Kate Tabner

Absent: Christopher Carter

Staff: Michel Baptiste, Housekeeping/Laundry/Dietary 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, Executive Director Friends of Witherell; Nunzio Raimo, Director of Financial Operations; Justine Vaccaro, Director of Social Work; Dr. Frank Walsh, Medical Director

Guests: Jocelyn Armstrong; Amy Badini, Family Council; William Drake, BET Liaison; Laura Erickson, BET Liaison; Elizabeth Franklin; Brad Radulovacki, RTM; Mary Alice Schulte; Sheilah Smith, Family Council; D. Stevens; Ellen Wolfson, Commission on Aging

Mr. Simon opened the meeting at 5:04 PM via Zoom Webinar.

Medical Director's Report – Dr. Frank Walsh

Dr. Walsh reported that today's census was 183; our goal is 188.

Very few patients have recently been readmitted to the hospital, and those that were have been medically warranted.

Gloria Mackey, RN, NW wound care specialist, is currently in conversation with a wound care doctor who may be interested in coming to see patients at NW. Having a wound care doctor come to the facility would save us from having to send those residents with very serious wounds to the hospital. The doctor would bill privately, and it would be at no cost to NW.

Dr. Walsh stated that although there have been positive COVID cases in the building no residents have been critically ill as a result and they are recovering relatively quickly.

Regarding the COVID booster, Dr. Walsh stated that in his private practice, if patients are questioning whether to receive the second booster, he suggests they have a test to check their antibodies. If the number of antibodies is above a certain range, they may want to delay receiving the booster at that time. This is not practical in the nursing home environment as the majority of our long-term residents would not necessarily have increased immunity. Dr. Patel noted that at this time the CDC is recommending that everyone over the age of 60 receive the second booster, with at least 4 months between the first and second. She advises we wait to see when to schedule the third booster clinic as more evidence becomes available. Our residents received the first booster during the clinic in October 2021; we will offer the second booster to all residents during the scheduled clinic in May. Mr. Simon suggested that Ms. Bennett keep track of when residents receive their second booster to determine when best to schedule the third booster clinic.

Mr. Cossifos stated that we do not require all admissions to be COVID-19 vaccinated and boosted, although the majority have been vaccinated prior to admission. We have admitted unvaccinated long-term residents and had them first serve a 14-day quarantine on the Rehab Garden Level before being transferred to the long-term care unit.

Ms. Benson stated that we have never required our residents to be vaccinated. We strongly encourage vaccination and we educate upon admission, but we cannot make it a pre-requisite for admission to our facility. Ms. Bennett stated that since we have been admitting unvaccinated residents, they have not been those to test positive for COVID-19. Less than 5% of our admissions are unvaccinated. Those unvaccinated new admissions are screened and tested prior to entering the facility, isolated upon admission, and encouraged to get vaccinated and boosted. Currently, our employee vaccination rate is 96%; every staff member who does not have an approved exemption (religious, medical, etc.) is vaccinated and boosted. The clinic in May will also offer the opportunity for employees to receive their second booster, although not mandatory at this time. Dr. Patel noted that with herd immunity having been achieved within NW, and Dr. Walsh's report that those being afflicted with COVID have minor disease, the practice of admitting such a low percentage of non-vaccinated admissions seems reasonable to continue. Ms. Bennett added that we cannot discriminate on vaccination status against potential residents; we must do risk assessments to determine admission. In the same way in which we cannot discharge our current residents who are unvaccinated, we cannot refuse to admit potential residents for the sole fact that they are not vaccinated. The State would require a legitimate reason for us to be unable to provide the necessary care for a potential admission.

First Selectman, Fred Camillo

Mr. Camillo thanked everyone for the work being done at NW. He asked for an update from the NW Board of Directors on what is being done regarding the RFP and the recommendation made by the RFP Committee to the First Selectman. He would like to be able to relay accurate information, as well as a timeframe, to those community members who have expressed interest in this process. Mr. Simon stated that NW is currently making a profit; the Board of Directors is working on developing and implementing their strategic plan; and, the Board has committed to hold a public hearing in the fall, giving Greenwich residents an opportunity to share their opinions as to what role the Witherell should play within the community. Mr. Camillo

acknowledged that the turnaround at Witherell has been “terrific” and that the NW Board and leadership team has been instrumental in that movement.

Review/Approval of Minutes of March 21, 2022

A motion to approve the minutes of the March 21, 2022 meeting of the Board of Directors was made by Ms. Brown, seconded by Mr. Hopper. A vote was taken, and the minutes were approved by a vote of 7-0-1. Mr. Kaplan abstained as he was absent from the March 21, 2022 meeting.

Executive Director’s Report - presented by John Mastronardi

Mr. Mastronardi reported that today’s census is 183. The average daily census for the month of March 2022 was 181.5. This is the highest monthly census so far for FY22.

Readmission Rates: Nathaniel Witherell’s readmission rate (NW residents readmitted to the hospital) was 25.5% for the first quarter of 2022 (Jan. – Mar. 2022); the CT average for Skilled Nursing Facilities was 23.4%; the National average was 22.9%. In an effort to decrease the readmission rate going forward, we have begun the following:

- a. Clinical Grand Rounds – Grand rounds will be done on one unit per week to establish a new standard process to address resident care needs. The interdisciplinary team can collaborate and promote care conversations between the care team, the resident, the family and the caregivers. The core of that team is made up of staff from the MDS, Rehab, and Nursing departments. The program will help us develop care plans that are person-centered and that meet the needs of all of our individual residents, increasing the quality of their lives.
- b. Staff Training – Our more complex, higher acuity admissions require a higher level of care that not all nursing home staff are used to providing. We are in the process of developing a training and educational program to benefit our nursing staff and get them familiar with our expectations for standards of care and customer service. We continue to actively recruit for nursing staff, RN’s, LPN’s and CNA’s, and we recently hired three RN’s. Mr. Mastronardi reported that he is also interviewing for a Clinical Case Management Liaison, a revenue generating position. This individual will work closely with Admissions, Nursing and Administration to help develop and grow census.

NexDine – Mr. Mastronardi reported that even with the new food service vendor, we continue to have some challenges associated with service delivery, taste, quality and temperature of the food. TNW senior management will meet with senior management from NexDine this week to discuss some of those outstanding issues and what our expectations are moving forward. Some items to be discussed are:

- a. How meals are prepared and inspected before being loaded onto carts.
- b. Obtaining food carts that keep food hot once delivered to the units.
- c. The new electrical outlets required for those carts.
- d. Consistency of food quality and an “always available” menu

Mr. Mastronardi will give an update on these issues to Mr. Simon following the Thursday meeting and will update the Board at the June meeting.

Mr. Mastronardi and Ms. Benson explained that recruitment of nursing staff is active and continuous. Along with new staff recruitment, however, Ms. Benson stressed that we want to maintain our existing staff, first and foremost, and we will continue to provide training to current staff as needed.

To Dr. Patel's question as to what the most prevalent diagnoses are among our admissions, Mr. Mastronardi and Ms. Benson stated that the majority are medical management cases, including sepsis, cardio-pulmonary, respiratory, neuro, along with some traditional orthopedic cases. These areas are those being targeted for staff training. Concentration of staffing is focused on where the most need is, based on patient acuity.

Mr. Kaplan spoke about the benefits of using Real Time to identify those patients at higher risk of hospital readmission. If used correctly and appropriately, Real Time identifies those individuals who are at higher risk for readmission, based on activities they can gather through the medical record and its' analytical tool. It gives the facility the ability to focus staffing on those patients who are at most risk for hospital readmission. Witherell's MDS Coordinator presents this information each morning during Morning Report. Ms. Benson stated that we are working on both the Stop and Watch form (an early warning documentation tool used to document and communicate changes in a resident's condition to the nurses for routine monitoring of high-risk residents) and the SBAR (standardizing the communication between nurses and physicians to help ensure accuracy and effectiveness in the information to meet patients' needs). The Stop and Watch form was launched on short-term rehab, and it will also be used on the long-term units within the next month. Mr. Mastronardi stated that we are concentrating on our care and service by using this data, making it actionable and recognizing the trends to improve both; this is all part of training for the entire ICP team. Mr. Mastronardi noted that they are working with CMS Compliance Group for assistance with training; he stated they are very effective with training and focusing on areas of need.

The Volunteer Appreciation Luncheon – This event was held on Monday, April 18th, and was covered in a recent Greenwich Time article. Due to the pandemic, this luncheon had been on hold for the past two years and we were able to bring it back in celebration of National Volunteer week. Special thanks to Mary Tate, Volunteer Coordinator, Carissa Ronish, Therapeutic Recreation Administrator and food services for a wonderful event and the opportunity to show our volunteers how grateful we are for all that they do.

Director of Facility Operations – Mr. Stefano Materia has accepted the position with a start date of May 16th. Mr. Materia is currently the Building Operations Manager with the Greenwich Public Schools and comes to us with experience in: construction; capital projects; working in a union environment; preventive maintenance; creating/writing policies and procedures for staff, vendors and contractors; and project and budget management. We are excited to have Mr. Materia join our team.

Hemodialysis – Messrs. Mastronardi and Raimo and Ms. Benson met this afternoon with our potential hemodialysis partner. NW is on track to provide them with drawings and floor plans for the two potential spaces for a dialysis den here at NW. Once the company has reviewed

the drawings, they will give their recommendations for the space. To Mr. Kaplan's question, a CON (Certificate of Need) will be necessary and could take 5-6 months. Mr. Mastronardi explained that once the drawings are complete, we will develop a plan and a rough estimate for renovating the space, which may be in the area of \$75K - \$100K. Mr. Simon asked to be provided with more related financial information at the June meeting, as the Board will need to approve this effort.

Medical / Surgical Supply savings – Fiscal year to date we have saved \$152,401, averaging approximately \$17K/month. Based on those numbers we are projecting a total savings for this fiscal year of \$203K.

Painting program – We have started a painting schedule for the common areas on the long-term floors that includes the dining rooms, hallways, doors, jams, etc. We have completed the common areas and a few private rooms on the fourth floor; the second floor is being scheduled for May. Work will continue throughout all the long-term units.

Food Service Workers – Our current food service vendor has been using agency employees to staff our Dietary department because we have not been able to offer a reasonable wage to Town employees. After meeting with Town Human Resources (HR) and the Town Administrator, they agree that we need to stop employing temporary agency staff at \$34.95/hour and offer \$16.71 for part time represented food service workers. The Dietary department needs to cover 218 staffing hours per week. HR believes they will have no trouble filling the part-time positions at the new rate to cover the number of hours needed.

Building Committee Report - presented by Paul Hopper

As Mr. Mastronardi covered in his Executive Director's report, Mr. Hopper reported that the position of Director of Facility Operations will be filled by Mr. Stefano Materia. Mr. Materia was the most qualified and the clear favorite of the selection committee and will assume his new position on May 16th. With Mr. Materia on board, we will be able to move forward with several initiatives that were delayed during the absence of a Facilities Director.

Mr. Hopper commented on the following:

- The elevator replacement will need to be revisited, as that project was rejected by the BET for inclusion FY23 Capital Budget.
- The new design of patient rooms should move forward rather quickly.
- Air filtration improvements, the second phase of the Tower electrical panels, as well as some heating issues at the Pavilion will need to be addressed as soon as possible following Mr. Materia's start date.
- We received a grant of \$60K from the Friends of Nathaniel Witherell to cover the cost of replacing the Chapel windows.

Mr. Simon requested that Mr. Hopper schedule a meeting prior to Mr. Materia's arrival so that the committee can set an agenda and prioritize projects for him.

Finance Report – presented by Nunzio Raimo

Mr. Raimo reviewed the Financial Statement and Operating Results for the period ending March 31, 2022:

- Total days billed for March 2022 were 5,600; this is the highest in the last 12 months. The March 2022 FYTD Cost Per Resident Day remained consistent with the month of February 2022 at \$457. Average beds/day for the month of March 2022 was 180.6, the highest so far, this fiscal year.
- Occupancy Percentage for March was 89%, the highest for the fiscal year and for the last 12 months; average beds per day for March 2022 was 180.6, also the highest for the fiscal year as well as for the last 12 calendar months. The percent variance to budget for January 2022 was 10% off the budgeted mark, February was 8%, and for March we are down to 4% variance to budget.
- March 2022 revenue from operations was \$2,728,026, the highest this fiscal year except for August 2021; budgeted target revenue for March 2022 was \$2,477,472.
- Two efficiency metrics: 1.) Monthly revenue per FTE (which is an indicator of staffing efficiency) for March 2022 was \$12,683; 2.) Revenue per billable patient day (which shows the efficiency of our revenue stream from operations) for March 2022 was \$487.00, above the fiscal year average of \$471.
- Revenue March 2022 YTD Actual was \$22,650,338, compared to budget of \$21,874,678, \$775,660 above our targeted budgeted revenue fiscal year to date. We have exceeded the revenue budgeted amount for 6 out of 9 months of this fiscal year.
- Expenses from Operations for March 2022 YTD Actual were \$15,684,750 compared to budget of \$16,567,048, under budget by \$882,298.
- March 2022 YTD Margin Before Debt & Allocation of \$6,965,588, \$1,657,958 over Budget.
- March 2022 YTD Margin Before Debt & Capital was \$2,892,577, compared to our budget of \$496,704, ahead of our target by \$2,395,874.
- March YTD 2022 Actual Capital Expenditures were \$407,722.
- March 2022 FYTD Operating Profit Before Debt Service was \$2,627,771. After the Debt Service, we are in the black by more than \$800K.
- Net Revenues March 2022 FYTD were \$826,381, which exceeded our targeted expectation by \$2,538,789.
- For March YTD 2022 Benefits were under budget by \$733,432.
- For March YTD 2022 Salaries & Wages were under budget by \$507,463.
- For March YTD 2022 OTPS were \$2,825 under budget.
- For March YTD 2022 Supplies & Materials were under budget by \$368,558; some food invoices were booked in March that we did not have in previous months.
- For March YTD 2022 Maintenance expenditures were under budget by \$9,103.
- Per the Operations Dashboard:
 - The average census for the prior years has been approximately 65K; if we continue the current trend, Mr. Raimo believes we will end this year at approximately 64K.
 - The average resident revenue for prior years has been \$24M; if we continue our current trend and the payor classes continue to be in our favor, we could end this

- year with a resident revenue of \$30M, about \$6M higher than the average of the prior years.
- The average Operating Margin for prior years ran at a significant loss; we are currently running at a profit.
 - The gain and loss before Town of Greenwich funding averaged a loss for prior years of approximately \$3M; we are currently showing a profit of \$750K.
 - Including a small amount of money that we received from the State for some COVID reimbursement, our Net Revenue/Expense, without including Town funding (not anticipated to be needed), we are at \$826K which is well above the average in prior years.

Marketing – no report, Christopher Carter absent

Friends of Nathaniel Witherell (FNW) – Scott Neff

Mr. Neff reported that the FNW Board has approved a \$60,000 grant to support the replacement of the Chapel windows.

Mr. Neff announced that after 13 years at The Nathaniel Witherell, he will step down as Executive Director of The Friends of Nathaniel Witherell in mid-May.

Ms. Mary Vinton will assume the position of Development Director effective May 2nd. Ms. Vinton has significant fundraising experience in Greenwich and has done fundraising at the Historical Society, Greenwich Library, and King Low Haywood School in Stamford.

Personally, and on behalf of the NW facility, Mr. Mastronardi thanked Mr. Neff for his contributions and service to the Witherell. Mr. Neff has been a gentleman to work with, and Mr. Mastronardi expressed his appreciation and wished him well. Mr. Neff acknowledged that it had been a pleasure working with the NW Board and management team; his only regret was that the pandemic kept them from doing some of the work they typically have accomplished. He added that 2023 will mark Witherell's 120th year and there have already been discussions with Ms. Vinton about having a celebration for the 120th anniversary of this fine institution.

Mr. Neff reported that to date, the Annual Appeal has received contributions from 408 donors. The Appeal will run through the end of the FNW fiscal year, June 30, 2022.

Mr. Neff stated that Volunteer Coordinator, Mary Tate, does an excellent job in that role. As it relates to volunteer services, the salary for that position is funded by FNW, and that will continue to be the case.

Mr. Neff thanked everyone for their support of the Friends' initiatives over the years. Some great things have been done, including renovating the facility under Project Renew, redoing the Friendship Garden, and other activities related to, most importantly, enhancing the quality of life of our residents through the Resident Life Fund and volunteer services.

Mr. Simon thanked Mr. Neff on behalf of the Board, for his efforts and all that has been accomplished over the past 13 years in making the Witherell a much better place.

Chairman's Discussion – presented by Laurence Simon

Comments from Kate Tabner

Volunteers: Ms. Tabner and Mr. Simon attended the Volunteer Luncheon held on Monday, April 18th, along with approximately 35 dedicated Witherell volunteers. There was a great deal of energy among those who shared their excitement about being back at the Witherell.

All volunteers must be vaccinated and boosted. Currently there are no volunteers in the kitchens; this is because of the implementation of the new kitchen services and the fact that many of the individuals who volunteered for food services were not vaccinated and/or boosted.

There were 117 volunteers in the building in March 2022. There is still some hesitation from some volunteers about returning to the building; others have moved on to other things in the community. Ms. Tabner and Ms. Tate, Volunteer Coordinator, discussed where the needs were for volunteers and possible recruitment efforts.

Ms. Tabner will be meeting with Family Council, Amy Badini and Sheilah Smith later this week.

Interior renovations: Mr. Simon asked Ms. Tabner to work with facility operations to ensure that the plans for renovating interior common areas and resident rooms are progressing as well as plans to improve residents' life experiences. Ms. Tabner will report at the June meeting of the Board.

Staff Reconfiguration: Mr. Simon discussed developing a new job description to encompass a higher level of CNA at a higher salary. Qualifying applicants who will test for this position, will be capable of handling more complex medical conditions, and would be placed primarily on the short-term rehab units.

Additional Medicaid Funds: Mr. Simon stated that Medicaid gave every nursing home in the state a 4.5% increase in their Medicaid rate; for TNW that was \$13.12/day.

- This increase was to be used for permanent wage enhancements for the staff; the only people that are not eligible for this are management. The cost of Social Security and Medicare tax may be included, but not to be included are the costs of other benefits such as pension defined contributions, etc.
- If the money is not spent, it will be deducted from your Medicaid rate in the future.
- The total amount of this increase is unsure until June 30th when the total number of Medicaid days is known.

- The original amount of \$542K has been reduced to a projected \$493K because of our declining Medicaid census.
- Some unions believe this Medicaid rate increase would translate to a 4.5% wage increase - Mr. Simon stated that the two are not equivalent. Although, because our Medicaid revenue and our total salaries are about the same, the two amounts are close.
- We need to figure out what to do about wage increases next year more than this year.
- Mr. Simon hopes to present a plan to the Board. He believes the state will continue to pay this increase, as a permanent source of funds.
- Some of the areas to which these funds will be directed are:
 - the hourly increase for Food Service Workers from \$13/hour to \$16.71/hour
 - the salary for higher CNA job description (from \$21/hour to \$23/hour)
 - any negotiated contract GWI
- We may be able to use these funds to help reconfigure staff where indicated.
- Mr. Simon expressed that we need to improve our planning and our communication to staff regarding these funds.

Mr. Simon noted that we need accomplish the following before having our public hearing which we have promised for this fall:

1. Continue to look for additional revenue opportunities, i.e. dialysis, step-down care.
2. Determine strategically where we fit in the continuum of care. What will our relationship be with Greenwich Hospital?
3. Determine how we improve the clinical ability of our staff.
4. We also need to finish the year making sure to consolidate our gains, show a profit at the end of the year, and exhibit that what we have done this year is sustainable next year.

Mr. Simon thanked Ms. Mary Alice Schulte for forwarding related information to him. We provide two things the corporate nursing homes do not: a higher rate of RN staffing and a much higher rate of hours per patient day.

Mr. Simon stated that the Board will begin their strategic plan work in the summer.

Ms. Hurst questioned whether the Board should be reviewing the RFP for clarification in a separate effort from developing their strategic plan. Mr. Simon said the issue raised with the RFP was whether a private vendor or private nursing home would be a reasonable choice financially or to provide the care for the town of Greenwich. He would prefer to hold the public hearing first, and if there is an overwhelming opinion that NW should be private, then we may change our direction. Mr. Kaplan stated that the strategic plan the Board develops will guide them as to how they respond to the RFP and whether the RFP fits into our strategic plan; the RFP should not drive the strategic plan.

Ms. Gibbons questioned how much of the strategic planning process will be the financial model, and whether the Board has the internal expertise to craft and explore all the possibilities.

Mr. Simon believes that the strategic model would be very little financial and more of how we fit into the continuum of care, what services we can provide and what skill sets are needed to do well in this environment. The financial plan will come from the strategic plan. Dr. Patel

agreed and stated that the clinical model is going to drive the financial model because the two are now correlated in terms of reimbursement.

The next Board meeting is scheduled for June 20, 2022, at 5:30 PM, and will be in person at Nathaniel Witherell. Mr. Simon will also explore holding a hybrid meeting, in-person and virtual.

A motion to adjourn the meeting at 6:40 PM was made by Mr. Kaplan, seconded by Ms. Hurst and approved by a vote of 8-0-0.

Respectfully Submitted,
Linda Marini
May 1, 2022