



The Nathaniel Witherell
TOWN OF GREENWICH
CONNECTICUT

**Board of Directors Zoom Board Meeting
Minutes
March 21, 2022**

Present: Laurence B. Simon, Chairman; Melissa Gibbons, Secretary; Suzanne Brown; Christopher Carter; Paul Hopper; Nisha Hurst; Kate Tabner

Absent: Richard Kaplan; Nirmal Patel, MD, MPH

Staff: Michel Baptiste, Housekeeping/Laundry/Dietary Supervisor; Nadia Benson, Deputy and Director of Nursing; George Cossifos, Director of Admissions; Linda Marini, Assistant to Executive Director; John Mastronardi, Executive Director; Nunzio Raimo, Director of Financial Operations; Carissa Ronish, Therapeutic Recreation Administrator

Guests: William Drake, BET Liaison; Laura Erickson, BET Liaison; Elizabeth Franklin; Ellen Wolfson, Commission on Aging

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

Medical Director's Report – Dr. Frank Walsh

Dr. Walsh reported that today's census was 179; it has been variable, but most recently increasing.

We have been admitting more medically complex, sicker patients, who require more care than orthopedic, joint replacement cases. Mr. Simon commented that we still have residents being discharged to the hospital, particularly from the short-term unit. Dr. Walsh stated that some of these discharges to the hospital can be explained by the fact that these patients are much sicker than most, and the transfer is not inappropriate. Some discharges to the hospital come as a direct request by a family member who insists on hospitalization. Hospitals are also discharging patients sooner because it is within their best interest financially. It is Dr. Walsh's opinion that most of our discharges to the hospital are warranted.

All staff and residents of NW are currently COVID free. The entire staff is vaccinated and boosted, except 2 part time nursing staff who have been taken off the schedule.

Ms. Gibbons asked what other content Dr. Walsh reported on at Board meetings prior to COVID. He explained that at the moment, there is no other dominant subject, but he is happy to discuss any other items the Board would request. In the past, he has reported on flu vaccinations/flu epidemics; stomach/viral infections; types of admissions; and transfers to the hospital.

Review/Approval of Minutes of January 21, 2022

A motion to approve the minutes of the January 21, 2022 meeting of the Board of Directors, as amended, was made by Mr. Carter, seconded by Ms. Hurst. A vote was taken, and the minutes were approved by a vote of 7-0-0.

Review/Approval of Minutes of Special Meeting of February 22, 2022

A motion to approve the minutes of the February 22, 2022 Special Meeting of the Board of Directors was made by Ms. Tabner, seconded by Mr. Hopper. A vote was taken, and the minutes were approved by a vote of 7-0-0.

Executive Director's Report - presented by John Mastronardi

Updates on new service providers

1. NexDine is the new food service provider that began on December 29, 2021. There has been some diverse feedback from residents and staff on the quality of the food and service. In response to that feedback:
 - a. NexDine will be changing the food service delivery model to the "thermal pellet system". This centralized system will have meals prepared and checked in the main kitchen and delivered to the units via thermal carts to keep the meals hot. The carts we have currently are not thermal and the food does not stay hot until it reaches the residents on the units. The thermal carts are being purchased by NexDine, and the new system will be in place over the next few weeks.
 - b. NexDine will begin offering an 'always available menu', from which residents can select other options that may better satisfy their tastes and their preferences.
 - c. Messrs. Mastronardi and Raimo, and Ms. Benson will be meeting with NexDine leadership next week to discuss expectations on deliverables as outlined in the RFP.
 - d. Ms. Benson stated that the name of our new Dietician is Courtney Hajducky.

2. HealthPro Heritage, the new provider of rehab services, began in February.
 - a. Mr. Mastronardi explained that our goals were to partner with a company that would: provide expanded services to 7 days a week; provide exceptional rehab services; assist us in the marketing and census building initiatives we have in the queue; provide some quality and performance data analysis to use for feedback to our referral sources in our community; and provide a broad scope of clinical rehab services such as cardiovascular rehab and pulmonary rehab.

- b. Feedback received thus far on care, compassion, service, and therapeutic outcomes has been positive.
 - c. HealthPro Heritage also rehired all of Select's staff, except for one (the employees' choice), which helped to maintain continuity of care with the residents.
3. Creation of a portable hemodialysis den
- a. Bringing this in-house would serve a minimum of 6 residents per day, 5 - 6 days a week.
 - b. This would be in collaboration with an experienced portable hemodialysis provider that delivers this type of service in nursing homes. The service provider would have authorization to bill Medicare for their services. They will provide us with: consultation services for the dialysis den; all hemodialysis related equipment, furnishing, appliances, dialysis related supplies, policies and procedures; coordination of care and delineation of responsibilities; and the direct care staff who will provide the treatment and care.
 - c. Mr. Mastronardi stated that they are currently conducting a cost benefit analysis and will follow up with the Board when complete. The associated startup costs would be labor cost (RN, LPN); costs of the renovation (electrical, IT, plumbing requirements for the portable), hemodialysis cyclers and refrigerators.
 - d. Our focus would be to provide this service to long-term care residents who would be covered under Medicare. This service will allow us to increase our census with a higher case mix and increase our Medicare revenue.
 - e. Ms. Benson stated that this dialysis model will be extremely favorable to the residents. Dialysis would be performed daily, Monday-Friday, for 2 hours each session, versus 4-6 hours for traditional dialysis, which would be less time and less taxing on the resident, and they do not have to be transported out of the facility. Studies have shown that residents feel good following these treatments and are not too weak to do physical therapy. This model has been very favorable in the studies reviewed and NW is excited about introducing it to our Community.
4. CareTech: Mr. Mastronardi estimates that we will save \$200K-\$215K on medical/surgical supplies by the end of this fiscal year, as a direct result of having worked with CareTech and centralizing our inventory ordering supply process.
5. ProCare, the new pharmaceutical company, has been in the building less than one month and enough data is not yet available to report currently. Ms. Benson noted that we will be prepared to report on the company's service over the next several months.

Mr. Mastronardi explained that we would also like to pursue partnerships with other healthcare entities, i.e. urgent care, skilled nursing facility (SNF), SNF at home, home health care, and home care; thus, keeping an individual in the system and providing a continuum of care for that individual. Currently, no other facility is providing this kind of continuity of care. We are only in the very beginning stages of exploring it, figuring out how it might be implemented, and what the payment model would look like.

Building Committee Report - presented by Paul Hopper

Mr. Hopper reported that they are still in the process of recruiting a Director of Facility Operations. They met with 3 potential candidates from the first job posting. Following those interviews, the decision was made to make some necessary modifications to the job description, to continue the search and possibly encourage a wider range of candidates. The revised job was reposted and closed on March 17, 2022. Mr. Hopper stated that those applicants will be under review and they will go forward with evaluating those candidates as soon as possible. Mr. Simon noted that some projects have been slowed down due to this position vacancy.

Mr. Raimo and Mr. Simon are working on the Community Development Block Grant (CDBG) application which must be submitted by the end of this month.

Finance Report – presented by Nunzio Raimo

Mr. Raimo reviewed the Financial Statement and Operating Results for the period ending February 28, 2022:

- Total days billed for February 2022 were 4,842, reflective of only 28 days in the month of February. The February 2022 FYTD Cost Per Resident Day remained consistent with the month of January 2022 at \$456.
- Occupancy Percentage for February was 86%; average beds per day for February 2022 was 172.9.
- February 2022 revenue from operations was \$2,404,397; budgeted target revenue is \$2,237,717.
- Private pay census was at 32% compared to a budgeted 26%; Medicare A census was also at 32% compared to a budgeted 26%; the Medicare per diem rate was \$737 for the month of February 2022; our FYTD average is \$705, which exceeds the national average of \$650.
- Two efficiency metrics: 1.) Monthly revenue per FTE (which is an indicator of staffing efficiency) for February 2022 was \$11,242; 2.) Revenue per billable patient day (which shows the efficiency of our revenue stream from operations) for February 2022 was \$497.00, the highest we have had this fiscal year.
- Revenue February 2022 YTD Actual was \$19,925,613, compared to budget of \$19,444,158, \$481,455 above our targeted budgeted revenue fiscal year to date. For the first eight months of FY 2022, we have exceeded our targeted budgeted revenue for 5 out of the 8 months.
- Expenses from Operations for February 2022 YTD Actual were \$13,477,939 compared to budget of \$14,744,473, under budget by \$1,266,534.
- February 2022 YTD Margin Before Debt & Allocation of \$6,447,673, \$1,747,989 over Budget.
- February 2022 YTD Margin Before Debt & Capital was \$2,770,189, compared to our budget of \$373,098, ahead of our target by \$2,397,092.
- February YTD 2022 Actual Capital Expenditures were \$408,357.
- February YTD 2022 Operating Profit Before Debt Service was \$2,504,748.

Mr. Simon noted that concerning Medicaid, 10% came from the extra money the state gave us to pay for lower census which the facility had during this period. Without that

10% our profit on the bottom line of \$2.5 million would be slightly less than \$1.7 million. This 10% has enabled us to rebuild the census. The 10% will go away at the end of this month; therefore, it is incumbent upon us to continue to increase our census, from where we are today, in the low 180's, to the high 180's.

- Net Revenues February 2022 FYTD were \$1,703,357, which exceeded our targeted expectation by \$2,540,007; averaging \$87,920K/month Net Revenue over expense, without contribution from General Fund. End of year projection, without contribution from General Fund, will show financial results in the black by \$1M.
- For February YTD 2022 Benefits were under budget by \$644,619.
- For February YTD 2022 Salaries & Wages were under budget by \$658,477.
- For February YTD 2022 OTPS were \$2,452 under budget.
- For February YTD 2022 Supplies & Materials were under budget by \$579,929. It was noted that the food invoices from the prior vendor are coming in slowly.
- For February YTD 2022 Maintenance expenditures were under budget by \$25,676.

Mr. Mastronardi stated that the Admissions Department is reporting to the leadership team every Friday and a weekly meeting is also held to see how Admissions is doing and what they are currently working on. We are in the process of hiring a clinical/marketing liaison who will spend most of their time outside of this facility, developing new referral sources while also cultivating existing ones. This person will constantly be making our presence known providing a reflection on the services we provide, anything new that we are doing, and cultivating and building relationships

Mr. Simon stated that we went before the BET Audit Committee and they approved a \$442,140 Bad Debt write-off from our Balance Sheet.

Marketing – presented by Christopher Carter

Mr. Carter reported that our agency, Harrison Edwards, got their contract updated and received their check from the Town. We did not do a lot of advertising over the last two months due to the delay in the contract.

There were 17 Facebook posts since the last Board meeting, including a video on the St. Patrick's Day bagpipers in the courtyard, and one on the booster clinic held by NW for residents, staff and volunteers.

Three Blogs were posted since the last Board meeting including, *What You Should Know About Short-Term Rehab* and *Dealing with Caregiver Burnout*.

There were 3 Greenwich Time articles published: 1.) The brighter financing future at the Nathaniel Witherell; 2.) a follow up to the BET meeting of February 14 which said that NW may still be sold, even after the positive presentation to the BET; and 3.) a very positive opinion piece from Alma Rutgers.

Concerning the website, Mr. Carter stated that if any Board member has ideas or suggestions on changes to photos or content, please contact him. We are unable to change the structure of the website but, we can update the content and graphics. He also reminded everyone that

the purpose of the website is as a selling tool to have people come to the Nathaniel Witherell. Our competitors' websites are also designed for that same purpose. We do have a Family Update section on our website which is the area where families can visit for news and updates. Mr. Simon noted that the Family Council would like the website to be more interactive with the families; this was not our design for the website. As we develop our strategy over the next several months, keeping families informed and aware of what's going on at NW becomes an important part of our strategy. Mr. Carter suggested a weekly newsletter could possibly be designed to keep family members updated.

Friends of Nathaniel Witherell (FNW) – Scott Neff, absent

Mr. Simon reported that at their last Board meeting, the Friends of Nathaniel Witherell voted to donate \$60K to cover the cost of the new Chapel windows.

Therapeutic Recreation – presented by Carissa Ronish

Ms. Ronish stated that we have volunteers on a weekly basis helping in various departments, including Recreation, Chaplaincy and transportation throughout the building. Ms. Ronish would need to speak with our Volunteer Coordinator, Mary Tate, regarding where we stand with volunteer recruitment.

Activities are scheduled consistently on a Monday through Saturday schedule. That calendar of activities is posted under *Events and Newsletters* on the NW homepage at the beginning of each month. Changes, cancellations to that monthly schedule are distributed in-house to residents/floors in hardcopy.

In response to Mr. Simon's question, Ms. Ronish has not seen any transport issues. She has not seen a change in the number of residents participating at any given event. We are always open to new volunteer opportunities and those who want to come to NW. Ms. Ronish reiterated that she would need to speak with our Volunteer Coordinator about the status of volunteer recruitment.

Currently we do not have a standing program on Sunday, but Ms. Ronish explained that there have been various special events held on Sundays; most recently the Super Bowl Party, car shows, and Mother's Day and Father's Day celebrations.

Chairman's Discussion – presented by Laurence Simon

Mr. Simon stated that we have done a good job of beginning to rebuild the census, and Mr. Mastronardi has outlined several directions we are going to increase the census further. In mid-March the census was 184 with 142 long-term residents in-house. Mr. Simon said that for us to be successful we need to average 41 short-term residents and 147 long-term residents; we are climbing in that direction and moving along on the revenue side.

Mr. Simon reported that we are showing some dramatic, sustainable, cost savings. The Board will also be developing its' strategic plan for NW over the next several months.

Mr. Simon would also like to have a separate meeting to discuss how to improve revenue and continue to focus on maintaining our profitability. He believes that because we are a public facility owned by the Town of Greenwich, a public meeting should also be held where the public could express what they want to see from NW: does the public think we should be owned by the Town or not; should we offer other services; should we be a step-down facility for Greenwich Hospital, etc. There are many options, and to have a productive discussion, first among the board and then with the public. These options need to be better defined by way of our strategic plan. The Board will be involved in developing the strategic plan and, after it is formulated, people can look at it, comment and discuss. We will then have a public hearing, around the August/September timeframe.

To move forward as a facility in any strategic direction, Mr. Simon said it is essential that we strengthen our nursing skills and stretch our clinical assessment and care. We have other projects which are less strategic and more tactical, i.e. how do we spend the money we have to improve the appearance of our patient rooms? It is necessary to develop a coherent, comprehensive plan.

As explained in Mr. Mastronardi's report, NW has their own unique place on the continuum of care. Mr. Simon said it is up to this Board to find NW's place and determine how to get there.

Mr. Simon is encouraged by how many opportunities there are and how much more money the government is putting into nursing facilities, because they realize how important these facilities are. He said our goal is not necessarily to make a lot of money for the town of Greenwich, but to provide a service for the residents of the town, giving priority to those residents, for the kinds of care that they want as they age.

Mr. Simon stated that they will go before the BET this week to see whether our allocation of the American Rescue Plan (ARP) for air handlers and higher filtration and engineering and study is approved. We have asked for \$950K, which was approved by the Selectmen and the ARP Committee. Mr. Simon believes that increasing the common area air flow and increasing air filtration will benefit all residents.

Mr. Simon has a lot of confidence in Mr. Mastronardi and Ms. Benson and others that understand the industry; we will find our niche that will best serve the residents of Greenwich.

The next Board meeting will be in person at Nathaniel Witherell. The Board decided on a meeting time of 5:30 PM – 7:00 PM going forward.

A motion to adjourn the meeting at 6:27 PM was made by Ms. Hurst, seconded by Ms. Brown and approved by a vote of 7-0-0.

Respectfully Submitted,
Linda Marini
March 28, 2022