



Managing. Consulting. Caring.

Facility Name	For Month of	Administrator
Winchester House	March-12	Dave Sorbel

Monthly Overview:

Caring Experience:

Caring Above and Beyond (CAAB) is part of the overall improvements being implemented everyday. There is a noticeable improvement in the skill level of new leadership. We continuer to work on communication throughout the program. Staff are being empowered to take responsibility in areas that had been restricted. The CAAB program was introduced, and will be followed. There has been a significant change in leadership so additional training will be needed.

Growth & Development:

Contacts with various referral sources continue to increase we are engaging more hospice and home health care agencies in our list of providers. Census EOM is 98.3% of budgeted amount. 95.5% of capacity of 180. We are ahead of budgeted goal in six out of seven pay types. The only category below target is Medicaid.

Employee Relations:

There will be an employee appreciation event on 4/11. Meals prepared for all shifts by department heads. Staff have been picking up extra shifts and putting forth extra effort, but they tell us they are getting tired and want more on the roster. There was a 46% response rate on the Satisfaction Survey, while this is less than hoped for, it was good in light of the employee response to the last time a similar survey was conducted. The overall satisfaction was 65%, compared with an IL average being 66. Greatest opportunity to improve were in the categories: attentiveness of management, assistance with job stress, care (concern) of management, quality of family-related training, and quality of resident related training. Of note; 84% of respondents have only worked at WH. 62% of respondents have worked here 5 or more years. Action plan will be to work with department heads and SDL to implement improvements.

Quality of Care - Clinical

There have been several initiatives to educate nursing staff in HDG policies and procedures. Unit coordinators were given manuals, three new policies implemented were anti-coagulant care, fetenal patch disposal and falls. We are seeing better results with our wound care program, reportable incidents are reduced significantly. Medicare meetings have improved in terms of accuracy, completeness and timely reporting. Our next initiative will be the reduction in hospital returns after discharge. Nursing leadership has been strengthened with new hires in unit coordinator, MDS and on 4/15 the addition of a restorative nurse.

Regulatory:

There are no outstanding citation or substandard care issues at this time. Required reports and compliance issues are being handled timely.

Financial Performance:

Financial information will be provided in a separate handout to be reviewed at the Winchester House Advisory Board meeting.

Caring Experience

Customer Satisfaction			
	Current %	Prior Yr %	Action Plan
Resident Survey	77.00%	NA	Mylnnerview has the results. Results published on line 4/10. The response rate was 29% which is disappointing, there were 63 added comments. It is somewhat misleading since it is based on 160 surveys distributed, realistically only half of those to residents who could respond. Areas scoring lowest were: security of personal belongings, quality of laundry services, choices/preferences, attention to resident grooming and quality of dining experience. Action plan will be working with staff to institute plans for improvement.
Family Survey	91.00%	NA	MyInnerview has the results. Results published on line 4/10. There was a 49% response rate With 135 comments. Priority action items: Adequate staff to meet needs, security of personal belongings, Quality of laundry services, Choices/preferences, Rehabilitation therapy. Action plan will be to work with staff to implement improvements.
Employee Survey	65.00%	NA	My Innerview results published on line 4/10. See detail on page 1.

Caring Above and Beyond			
	This Month	Last Month	Actions Taken This Month
Caring Above and Beyond Implementation Phase	0	0	0

Growth & Development

	This Month
Conversion Ratio	60.00%

Employee Relations

Open Management Positions		
Office Manager		
ADON		
Unit Secretary		
RN - Relief PT		
RN -Weekend Coordinator. PT		

Open Positions	Day	Evening	Noc
RN	0	0	0
LPN	6	5	2
CNA	4	5	1

Regulatory Compliance

Open Timeline?	No
DPNA?	NO
Self Report in Last 30 Days?	No
Complaint Investigated in Last 30 Days?	NO
Expected Date of Next Standard Survey:	7/1/12

Financial Performance			
	Actual	Budget	Variance
MTD Revenue	\$-00	\$-00	\$-00
MTD Expense	\$-00	\$-00	\$-00
MTD Net	\$-00	\$-00	\$-00
YTD Revenue	\$-00	\$-00	\$-00
YTD Expense	\$-00	\$-00	\$-00
YTD Net	\$-00	\$-00	\$-00

Occupancy Average	Actual %	Budget %	Over/Under Budgeted Census
Total Occupancy Average	52.5%	56.3%	-3.8%
Medicare Census Average	7.2%	6.3%	0.9%
Medicaid Census Average	35.3%	39.4%	-4.1%
Other Census Average	10.0%	10.6%	-0.6%

Average Daily Census (Patient Days)	Current Month	Last Month	Prior Month
Medicare and Managed Care	24	19	15
Total Average Daily Census	168	164	160

Projection

Projected Revenue	\$-00	Rationale:	0
Projected Expenses	\$-00	Rationale:	0
Projected Net	\$-00		

Cash Flow

Vendor	Total of Invoices Over 90 Days
NONE	_
TOTAL	\$-00

Capital Expenditures

Item	Cost	Planned Purchase Date	Justification
NONE			

Levy Projections

Levy Monthly Actual	\$-00
Levy YTD Actual	\$-00
Levy YTD Target	\$-00
Levy YTD (Over)/Under	\$-00

IGT Loan

Monthly Amount Received	\$-00
YTD Amount Received	\$-00