



## COMMISSIONERS MEETING

### Minutes

Wednesday, March 27, 2024

This meeting will be conducted in person and electronically (via Zoom) at

Maplewood Nursing Home  
201 River Road  
Westmoreland, NH 03467

**Zoom Call-in Number: +1 646 558 8656**

**Meeting ID: 409 748 8803**

**Pin #: 6031233**

**Start Time 08:30 AM**

**Present:** Commissioners Jack Wozmak, Robert Englund, and Terry Clark

**Staff:** County Administrator Coates, Finance Director Trombly, HR Director May, Water Chief Operator Riendau, CCEMS Interim Chief McMurrer, Maplewood Administrator Kindopp, and Director of Executive Services/Communications Bernstein

**Guest(s):**

### **Public Comments**

Upon recognition from the Vice-Chair, a Public Comment on topics of interest may be made, at most three (3) minutes in length.

### **I. Elected Officials & Department Head Updates**

To receive, as informational, departmental updates requiring Commissioner review, participation, approval, and impactful departmental and operational issues.

### **II. Scheduled Items**

Master Agenda Item #1165: Cheshire County EMS Semi-Annual Report – C. McMurrer

**Action Expected: To receive an as informational as possible report on CCEMS' last six months of operations.**

-Interim Chief McMurrer began his report by stating that CCEMS has had three resignations over the past few weeks. Staffing remains very strong despite the resignations.

The Deputy Chief Assessment Center will be on April 11<sup>th</sup>. All Cheshire EMS employees are eligible to apply.

The last ambulance to be purchased with ARPA funds has had significant delivery delays, now being pushed back to 2025.

McMurrer said that CCEMS needs some sort of command vehicle in the future.

He said that they have been increasing their community outreach and attendance at events. A training mannequin was acquired for community education.

McMurrer said that the drugs/prescriptions used by CCEMS are owned by Cheshire Medical Center. One of the Captains manages the rotation of drugs that are expired or outdated.

Master Agenda Item #1166: Maplewood Semi-Annual Report – K. Kindopp

**Action Expected: To receive an as informational as possible report on Maplewood's last six months of operations.**

-Maplewood Nursing Home Administrator Kindopp began her report, the full report is below.

**Regulatory Requirements:**

Major changes made to our Minimum Data Set (MDS) went into effect in October. Impacts were significant in social services and diagnostics areas. Some pandemic era rules continue to impact LTC including masking under certain conditions, COVID testing, reporting and lengthy out of work rules.

**QAPI and PIP's:**

QAPI means Quality Assurance/Process Improvement (formerly known as CQI or Continuous Quality Improvement). PIP = Performance Improvement Practice. It's intended that all staff at all levels of the organization be part of performance improvement and participate in PIP teams. Anyone is welcome to be on a PIP team. Our main focus groups have been preparing for the new dysphagia system called IDDSI, and another group formed to evaluate the ability to re-open a few beds on our 3<sup>rd</sup> floor (closed 2 years now).

**Corporate Compliance:**

Review of compliance activities; Commissioner Englund participates in quarterly CC/CQI/QAPI meetings. The Commissioners received annual training for CC in December of 2023.

**Facility Assessment:**

The Facility Assessment is an ongoing working binder that is updated as needed and reviewed/revised annually; it was reviewed by the team (including) Comm Wozmak in Nov of 2023.

**Accomplishments:** (some ongoing impacts from the pandemic that began March 2020)

- COVID; no resident cases, no hospitalizations nor deaths related to COVID during this 6 month period.
- Mandatory weekly reports to the Feds through NHSN. No missed reports or fines. (CMS will require these through Dec 2024)
- Family correspondence is now in the form of a monthly newsletter spearheaded by our social services department.
- Completed the second of 2 required disaster drills for the year (intruder-type drill)

- Annual facility CMS survey was in July; 2 small issues on the resident care side related to medications – one was ensuring signatures and the other ensuring the med fridge is always locked. Lifesafety had 2 issues, still finding penetrations above ceiling tiles from construction and a door on our empty 3<sup>rd</sup> floor unit was sticking and needed to be sanded off
- CTS did their annual site visit for our w/c vans audit; couple of simple recommendations
- Launched IDDSI swallow/meal management dysphagia system
- Social Services team continues their family support group; previous family members have returned and new families attending
- Cheshire EMS has had 2 rooms at MNH and an ambulance in our new garage for Westmoreland Response; planning on the transition to a different space at MNH and a second ambulance.
- Monthly audits (MDS coding, care plans and billing practices) done by external company
- No masks most of the time unless someone is ill, had an exposure, or the hospitalization rates are high; reinstated masks in early December for resident units when community numbers rose
- Loan forgiveness program expanded to offer newly hired LPN or RN's an opportunity at the successful completion of their probation as another retention incentive
- Budget completed including Commissioners review level
- Activities held their carnival day in July; always a resident favorite
- Annual craft fair in the fall has been revived – held outdoors
- Contract with HPH for therapy oversight and SDX for bedside swallow evaluations
- Restructured therapy departments; instead of individual directors; one Rehab Director now
- Annual HVA (hazard vulnerability assessment) completed by team
- Annual HIPAA assessment completed
- MNH hosted an indoor longevity luncheon for Commissioners to celebrate staff milestones
- Vax clinics held for COVID and Flu shots in the fall
- Op-ed taken up in Union Leader about impending CMS minimum staffing rules
- CMS announced their minimum staffing rule on Sept 1, with open comment period thru Nov
- Student nurses completed clinicals at MNH from both KSC and RVCC
- We held one LNA class this reporting period and graduated 3 new LNA's.
- Social services team participated at KHS for career fair day
- Christmas pageant with residents present for first time since pandemic
- Planning for reopening of a few beds on our closed 3<sup>rd</sup> floor
- Overseeing ADNS through her AIT (Sabryna Priest)

### **Staff Turnover**

- 44 staff hired for MNH second half of 2023
- 38 staff left from MNH second half of 2023
  - Involuntary terminations are primarily due to time and attendance, inability to perform required job or follow policy.

- Voluntary departures included: job too hard for them, left to return to prior job, inability to finish onboarding or per diem staff who can't actually commit to working, medical issues – will reapply later, job closer to home, or a better opportunity came up. Still seeing an uptick in retirements compared to the years pre-COVID.

### **Grievances/concerns**

- There were no formal union grievances reaching the admin during this time period.
- There were 3 suggestions to review and post during this time period.
- It has been two years since the state determined we needed to become licensed as an ambulance service for our w/c van for NEMS. We have complied with all requested documents and remain in limbo waiting upon our vehicle inspection and ultimate licensing/certification. There are no impacts on our operations or billing to date.
- CMS published their proposed minimal staffing mandate on 9/1/23; many formal letters written including Op-Eds through the NHAC, NHHCA, personally and joining in on other national letters

### **Admissions/discharges**

- Admission/discharges during these 6 months:
  - 20 admissions
  - 3 Discharges (home or lesser care level facility)
  - 19 deaths
- We continue to keep our 3<sup>rd</sup> floor closed. Cheshire EMS occupies 2 rooms on the renovation side.

### **Medicaid**

- Rate during Q3+4 FY2022= \$257.28

### **Revenue/Census goals** (revenues are rounded off – see finance statements for actual figures)

- 2023 set a goal of 120 census. The realities of staffing require us to rely on travelers to support 100 filled beds. Census for this time frame = 97 average
- 2023 overall part A goal set at 6 residents; actual period ending = 4
  - part A gross revenue goal set for 511K for 6 month reporting; actual = 395K
- Medicaid revenues set 3.1M for 6 month reporting; actual = 3.25M
- Private pay goal set at 970K for 6 month reporting; actual = 1.25M
- Atypical pay goal set 814K for 6 month reporting; actual = 621K

### **Meetings Review**

- CQI/QAPI meetings; mandatory quarterly CQI/QAPI completed including Corporate Compliance, additional monthly meetings continue for Infection Control
- Ongoing meetings: Monthly DH meetings, KK attends monthly Falls Comm meetings, Safety Comm meetings as well as CQI/QAPI meetings. Other ongoing meetings that KK may or may not attend; Weekly Medicare and Resident care plan meetings, Weight Comm meetings.
- Medical Staff meetings happen every 2 – 3 months

- Appointed by Governor to the Opioid Abatement Commission (meets monthly)
- Met with Henry Lipman with NHAC over Medicaid issues
- Met with TCMC chief nursing officer
- Attended NHHCA fall conference
- Attended NHAC conference
- Attend Commissioner meetings when held at MNH; Corporate Compliance annual training done
- Representing the NHAC on the MFP (money follows the person) state-wide DHHS initiative
- Participated in the dedication in front of County Hall commemorating victims of the pandemic
- Meetings with KSC and RVCC regarding nursing students and clinicals at MNH
- Meet routinely with EMS chief to address any issues with shared space and/or operations
- Attended the Long Term Care Summit put on by Jim Monahan in Portsmouth
- Monthly NHAC NHA affiliate meeting (mostly resumed in-person)
- Twice monthly meetings with NHHCA board and executive; transitioned from treasurer to vice chair
- Monthly Monadnock Regional Healthcare Workforce Group about ongoing worker shortage

Master Agenda Item #1167: Retiree Dependents – S. Trombly

**Action Expected: To discuss policy regarding retiree dependents.**

Finance Director Trombly began the discussion by saying that employees who retire from the County and collect a NH pension can stay on County insurance indefinitely. Others take COBRA which lasts 18 months. We currently have 10 retirees on our plan who also cover a dependent. In the case of a retiree that passes before their dependent, the dependent can also stay on our insurance. The majority of the Counties cover the dependents but that is due to the fact that they are not self-insured like Cheshire County. The Commissioners suggested changing County policy to offer COBRA to the dependents of former County employees that have passed away.

**Following discussions, the Commissioners voted unanimously to alter County policy to offer COBRA to dependents of former employees that have passed rather than County healthcare.**

**III. County Administrator**

Weekly Operations Report - The County Administrator will update the Commissioners on activities that have taken place since the previous meeting.

**IV. Old Business**

**V. New Business**

**VI. Consent Agenda Items:**

Vote to accept the Weekly Manifests and Minutes of March 27, 2024.

**VII. Calendar**