



**HEALTH SERVICES COMMITTEE
Wednesday, July 11, 2012 at 8 am
Rock Haven 4th Floor Classroom**

AGENDA

Note: We will be walking over to the new facility for our tour. Wear comfortable walking shoes.

1. Call to Order/Approval of Agenda
2. Approval of Minutes – June 13, 2012
3. Introductions, Citizen Participation, Communications and Announcements
4. **Action Item:** Bills
5. **Action Item:** Budget Transfers
6. **Action Item:** Pre-Approved Encumbrances/Encumbrances
7. Old Business
 - a. Information Item: Rock Haven Replacement Facility Update
8. New Business
 - a. Information Item: Introduction of Michael Howell, Materials/Environmental Services Manager
 - b. Information Item: LeadingAge Public Policy Conference Update
 - c. Information Item: Consumer Information Report for Nursing Homes - 2011
9. Information Item: Reports
 - a. Census
 - b. Activities
 - 1) Senior Management Team
 - 2) Staff Education for July 2012
 - a. Oral Care
 - b. HIPAA
 - c. Quarterly Nurse Meeting

3) Conferences and Meetings - Sherry Gunderson's professional meetings include:

- a. LeadingAge Region 2 Meeting (Sun Prairie) - July 13
- b. LeadingAge Health Issues Committee (Deforest) - July 24
- c. WACH (Wisconsin Association of County Homes) Meeting (West Bend) - July 27

4) Resident Council Meeting – Held Tuesday, July 10.

5) Semi-Annual Report - Attendance at Conventions/Conferences

c. Finance - Dave Sudmeier

10. Next Meeting Date - The next regular meeting of the Health Services Committee is scheduled for Wednesday August 8, 2012 at 8 am.

11. Tour of New Facility.

12. Adjournment

SRG/ff

*Note to Committee Members: To ensure a quorum is present, please call the Administrative Secretary at 757-5076 if you are unable to attend the meeting.

Account Number	Name	Yearly Prcnt Appropriation Spent	YTD Expenditure	Encumb Amount	Unencumb Balance	Inv/Enc Amount	Total
3232500000-64904	SUNDRY EXPENSE	3,000.00 12.7%	3,020.71	-3,403.65	3,382.94		
	P1200848-PO# 06/29/12 -VN#015763			ROCK COUNTY HEALTH CARE CENTER		383.00	
			CLOSING BALANCE		2,999.94		383.00
3272607400-62171	AMBULANCE	2,000.00 143.7%	6,387.30	-3,513.27	-874.03		
	P1202119-PO# 05/31/12 -VN#028439			ACCESS TRANSIT		80.00	
			CLOSING BALANCE		-954.03		80.00
*** OVERDRAFT ***							
3272607400-62189	OTHER MED SERV	5,500.00 1.0%	2,759.09	-2,815.38	5,556.29		
	P1201792-PO# 05/31/12 -VN#042658			DEAN HEALTH SYSTEMS		40.63	
	P1202278-PO# 05/31/12 -VN#016856			UNIVERSITY OF WISCONSIN HOSPIT		15.70	
			CLOSING BALANCE		5,499.96		56.33
3280008100-63109	OTHER SUPP/EXP	11,400.00 35.2%	3,919.17	95.07	7,385.76		
	P1200280-PO# 06/29/12 -VN#013780			KMART CORP #4255		73.43	
	P1200283-PO# 06/29/12 -VN#016117			SHOPKO INC #130		76.84	
	P1200847-PO# 06/29/12 -VN#015764			ROCK COUNTY HEALTH CARE CENTER		15.00	
	P1200848-PO# 06/29/12 -VN#015763			ROCK COUNTY HEALTH CARE CENTER		80.00	
	P1202233-PO# 06/29/12 -VN#052069			SPECIALTY PROPERTY APPRAISALS		385.00	
			CLOSING BALANCE		6,755.49		630.27
3280008100-64000	MEDICAL SUPPLIES	117,052.00 71.2%	59,323.97	24,040.23	33,687.80		
	P1200287-PO# 06/29/12 -VN#044709			STRYKER MEDICAL		302.00	
	P1201100-PO# 06/29/12 -VN#015103			PATTERSON DENTAL COMPANY		171.25	
	P1201264-PO# 06/29/12 -VN#015393			GULF SOUTH MEDICAL SUPPLY		162.68	
			CLOSING BALANCE		33,051.87		635.93
3280008400-62420	MACH & EQUIP RM	2,000.00 10.0%	499.83	-298.59	1,798.76		
	P1200214-PO# 06/29/12 -VN#036883			CENTERWAY AUTO REPAIR		77.90	
	P1200234-PO# 06/29/12 -VN#015284			POMP'S TIRE SERVICE INC		25.00	
			CLOSING BALANCE		1,695.86		102.90
3280009300-63109	OTHER SUPP/EXP	5,000.00 17.4%	2,756.60	-1,882.71	4,126.11		
	P1200280-PO# 06/29/12 -VN#013780			KMART CORP #4255		35.93	
			CLOSING BALANCE		4,090.18		35.93
3280009500-62104	CONSULTING SERV	3,100.00 45.1%	0.00	-1,399.99	4,499.99		
	P1202237-PO# 05/31/12 -VN#047068			JT AND ASSOCIATES LLC		1,400.00	
			CLOSING BALANCE		3,099.99		1,400.00
3280009500-63200	PUBL/SUBCR/DUES	11,000.00 50.0%	3,273.00	2,234.00	5,493.00		
	P1202148-PO# 06/29/12 -VN#051873			LEADINGAGE WISCONSIN		7,511.75	

Account Number	Name	Yearly Prcnt Appropriation Spent	YTD Expenditure	Encumb Amount	Unencumb Balance	Inv/Enc Amount	Total
*** OVERDRAFT ***			CLOSING BALANCE		-2,018.75		7,511.75
3280009500-64424	EMPLOYEE RECOGN.	2,500.00 20.5%	640.02	-125.09	1,985.07		
	P1200847-PO# 06/29/12 -VN#015764		ROCK COUNTY HEALTH CARE CENTER			8.95	
			CLOSING BALANCE		1,976.12		8.95
	ROCK HAVEN		PROG-TOTAL-PO			10,845.06	

I HAVE EXAMINED THE PRECEDING BILLS AND ENCUMBRANCES IN THE TOTAL AMOUNT OF \$10,845.06 INCURRED BY ROCK HAVEN. CLAIMS COVERING THE ITEMS ARE PROPER AND HAVE BEEN PREVIOUSLY FUNDED. THESE ITEMS ARE TO BE TREATED AS FOLLOWS

- A. BILLS AND ENCUMBRANCES OVER \$10,000 REFERRED TO THE COUNTY BOARD.
- B. BILLS UNDER \$10,000 TO BE PAID.
- C. ENCUMBRANCES UNDER \$10,000 TO BE PAID UPON ACCEPTANCE BY THE DEPARTMENT HEAD.

HEALTH SERVICES

COMMITTEE APPROVES THE ABOVE. COM-APPROVAL _____ DEPT-HEAD

JUL 11 2012

DATE _____ CHAIR

PURCHASE ORDER NUMBER P1200487 PEID 015393

PRE-APPROVED ENCUMBRANCE AMENDMENT FORM

This form must be used when adding funds to or changing an account number of a previously approved encumbrance. Please complete this form and send to your governing committee for approval. The Encumbrance and Purchase Order will be updated upon approval of all necessary committees and County Board (if amendment is over \$10,000).

DEPARTMENT Rock Haven
COMMITTEE Health Services
VENDOR NAME Gulf South Medical Supply
ACCOUNT NUMBER 32 8000 8100 64000
FUNDS DESCRIPTION Medical Supplies
AMOUNT OF INCREASE \$ 20,000.00
INCREASE FROM \$ 31,000.00 TO \$ 51,000.00
ACCOUNT BALANCE AVAILABLE \$ 31,552.00
REASON FOR AMENDMENT Change of vendors for Medical Supply

APPROVALS

GOVERNING COMMITTEE _____
Chair _____ Date _____

FINANCE COMMITTEE _____
(if over \$10,000) Chair _____ Date _____

COUNTY BOARD _____
(if over \$10,000) Resolution # _____ Adoption Date _____

WHITE - COMMITTEE
YELLOW - PURCHASING
PINK - DEPARTMENT

Consumer Information Report for Nursing Homes Summary 2011

Rock Haven
3418 N CTY TRK HWY F PO BOX 920
JANESVILLE, WI 53547
(608)757-5000

License Number: 2425
Number of Licensed Beds: 130
Medicare Certified? Yes
Medicaid Certified? Yes
Ownership Type: Government County
Owner: COUNTY OF ROCK COUNTY CLERK

Staff: Residents

Nursing Home Staff	Staff: Residents, by shift, in a two-week time period (Average number of residents: 126)		
	Day Shift	Evening Shift	Night Shift
Nurses (RNs & LPNs)	1 Nurse: 11 Residents	1 Nurse: 14 Residents	1 Nurse: 23 Residents
Nurse Aides	1 NA: 6 Residents	1 NA: 7 Residents	1 NA: 12 Residents

If the number of residents is a "" in one of the categories above, there was an average of <1 nurse or NA on the shift. There may have been a combination of part-time RNs, LPNs or NAs on the shift on one or more days during the two-week time period, which could make the average <1. Per Wisconsin Administrative Code, Chapter HFS 132, there must be at least one RN or LPN on duty at all times.

Staff Retention Rates

Nursing Home Staff	Staff Retention Rates (Percent of staff employed for at least one year)		
	This Home (NS= no staff)	ROCK County Average (10 homes)	State of Wisconsin Average (393 homes)
Full-time Nurses (RNs)	NS%	88%	79%
Part-time Nurses (RNs)	87%	81%	69%
Full-time Nurses (LPNs)	NS%	91%	88%
Part-time Nurses (LPNs)	88%	69%	71%
Full-time Nurse Aides	98%	81%	77%
Part-time Nurse Aides	96%	77%	63%

This two-page summary was prepared by the Division of Quality Assurance, Wisconsin Department of Health Services. For questions about this report, call (608) 264-9898. See the full report on the internet (after 6/1/12) at <http://dhs.wisconsin.gov/bqaconsumer/NursingHomes/CIRindex.htm> or request a copy (after 6/1/12) at (608) 266-8368. The report should also be available in the facility.

Federal Violations Cited in State "Inspection" Surveys for

Rock Haven

This summary table provides a count of federal violations cited for this nursing home in 2011, by category of violation. County and state averages are shown for comparison. Surveys are conducted by the Division of Quality Assurance at least every 9 - 15 months, and may be conducted more often. This home was not cited with Substandard Quality of Care during the year 2011. See the full Consumer Information Report, 2011 for details.

Federal Regulation Categories*	Federal Violations In 2011		
	Total # Citations for This Home	Average # Citations for ROCK County (10 homes)	Average # Citations for Wisconsin (393 homes)
*Each category consists of many specific regulations. See detail in report.			
Quality of Care: Provide care that promotes resident's highest level of well-being. Example: Prevent/treat pressure sores.	2	2.5	3.0
Resident Services: Provide services that meet state standards. Example: Develop a comprehensive care plan for each resident.	0	3.0	1.9
Quality of Life: Provide a pleasant, homelike atmosphere. Example: Provide an activities program that meets needs and interests.	1	0.8	0.5
Resident Rights: Assure individual rights. Example: Assure right to personal privacy.	0	0.2	0.6
Freedom from Restraints/Abuse: Assure freedom from abuse, neglect, or restraints. Example: Assure the right to be free from abuse.	0	1.0	0.7
Other Administrative Violations	0	0.8	0.5
Total Violations	3	8.3	7.2

Consumer Information Report for Nursing Homes 2011

INTRODUCTION

Rock Haven
3418 N CTY TRK HWY F PO BOX 920
JANESVILLE, WI 53547
(608)757-5000

- License Number: 2425
- BQA Regional Office: Southern
- Ownership type is: Government County
- The owner of this nursing home (the licensee) is:
COUNTY OF ROCK COUNTY CLERK
- The 2011 Level of Federal Certification for this nursing home is:

Medicare (Title 18) Skilled Nursing Facility (SNF)
Medicaid (Title 19) Nursing Facility (NF)

SECTION 1 of this report describes the numbers and types of **Federal regulation deficiencies** found during surveys conducted in 2011. "Deficiencies" are cited for noncompliance with Federal regulations. This section also compares these numbers to averages for all nursing homes of similar size.

SECTION 2 provides information about **nursing staff turnover and retention** rates at this nursing home in 2011. It compares these rates to the averages for all nursing homes of similar size.

APPENDICES (on the internet after 6/1/12) include: **Appendix A** - a list of **resource agencies** for consumers; **Appendix B** – information about how nursing staff turnover & retention rates are calculated; and **Appendix C** - **statewide averages**.

SECTION 1 - SURVEY RESULTS FOR THIS FACILITY

Nursing homes in Wisconsin operate under rules enacted by the Federal government (for the Medicare and/or Medicaid programs) and by the State of Wisconsin. Surveyors from the Wisconsin Division of Quality Assurance conduct unannounced inspections at each nursing home at least once every 9 to 15 months to determine if the nursing home complies with all State and Federal rules. State surveyors also conduct follow-up visits to ensure that violations have been corrected, investigate complaints, and conduct other surveys as necessary.

When state surveyors determine that a nursing home is not in compliance with a Federal regulation, the nursing home is cited with a violation or "deficiency". The number and type of violations for surveys conducted in 2011 are described in this report.

The number of federal regulation deficiencies cited in Wisconsin nursing homes during 2011 surveys ranged from **0 to 44, with an average of 7.2 citations.**

In 2011 survey(s), Rock Haven, JANESVILLE, which has 130 licensed beds, was cited with:

3 Federal regulation deficiency(ies)

Statewide, the average number of deficiencies for a nursing home with 100-199 beds was 7.7.

In addition, this home was cited with **1** federal building safety violations. The number of federal building safety violations statewide in 2011 ranged from **0 to 40**, with an average of **5.8** citations.

Federal Regulation Deficiencies:

To determine Federal regulation deficiencies, surveyors use a resident-centered, outcome-based process. Equal emphasis is placed on the quality of care the resident receives and on the quality of the resident's life in the nursing home, and on whether or not the resident's rights, dignity and privacy are respected. These factors are evaluated by observing residents' care; interviewing residents, families and staff; and reviewing medical records.

If it is determined that a Federal regulation deficiency exists, the deficiency is placed on a grid. Grid placement is based on two measures:

- *Severity/Harm*, the degree of impact that a deficient practice has on residents at the facility; and
- *Scope/Frequency*, the prevalence of a deficient practice within a facility, or the proportion of residents who were or could have been affected.

All Federal deficiencies fit into one of the following four grid levels, from most to least serious: Immediate Jeopardy, Significant Correction, Correction and Substantial Compliance. If this home had deficiencies at any of the four grid levels in the last survey, those deficiencies are listed below. Each deficiency listed is followed by the abbreviation of its federal regulation category: Quality of Care (QC), Resident Services (RS), Quality of Life (QL), Resident Rights (RR), Freedom from Restraints/Abuse (FRA), and Other Violations (OT). **A deficiency may be listed more than once if it was cited more than once during the year. Also, some citations share the same title, so you may see separate citations listed with the same title on the same date.**

Certain Federal regulation deficiencies at the Immediate Jeopardy, Significant Correction and Correction grid levels cause a nursing home to be designated as having "Substandard Quality of Care (SQC)". **This home was not designated with SQC during the year 2011. Thirty-two Wisconsin nursing homes received the SQC designation in 2011.** SQC deficiencies constitute: immediate jeopardy to resident health or safety; a pattern of or widespread actual harm that is not immediate jeopardy; or widespread potential for more than minimal harm that is not immediate jeopardy, with no actual harm.

Immediate Jeopardy. This deficiency exists when a situation caused (or is likely to cause) serious injury, serious harm, impairment or death to a resident receiving care in the facility AND facility practice makes it probable that similar actions, situations, practices, or incidents will occur again. Immediate corrective action is needed. The nursing home received **0 Immediate Jeopardy deficiencies** in 2011.

Significant Correction. This deficiency exists when a situation resulted in a negative outcome that compromised a resident's ability to maintain or reach his/her highest practicable physical, mental, or psychosocial well-being. This nursing home received **2 Significant Correction deficiencies** in 2011.

NOTIFY OF CHANGES (INJURY/DECLINE/ROOM, ETC) (QC) 10/25/2011
PROVIDE CARE/SERVICES FOR HIGHEST WELL BEING (QC) 10/25/2011

Correction. This deficiency exists when a situation resulted in minimal physical, mental, or psychosocial discomfort to a resident and/or has the potential (not yet realized) to compromise a resident's ability to maintain or reach his/her highest practicable physical, mental, or psychosocial well-being. This nursing home received **1 Correction deficiencies** in 2011.

DIGNITY AND RESPECT OF INDIVIDUALITY (QL) 02/24/2011

Substantial Compliance. This deficiency exists when a situation has the potential for causing only minor negative impact on residents. This nursing home received **0 Substantial Compliance deficiencies** in 2011.

For questions about this report, call (608) 264-9898. For further information about specific violations or more recent surveys, contact the administrator of this facility or the Division of Quality Assurance at (608) 266-8368.

SECTION 2 – NURSING STAFF TURNOVER AND RETENTION

This section provides two measures describing the rate of change among nursing employees from January 1, 2011 through December 31, 2011: a "turnover rate" and a "retention rate." The turnover rate is based on new hires during the year as a proportion of total staffing in a category. The retention rate is based on the proportion of staff in a category at the beginning of the year who are still employed by the end of the year. The formulas used to calculate nurse staffing turnover and one-year retention rates are explained in **Appendix B**.

Rates are calculated separately for full-time employees, persons working 37.5 hours or more per week, and part-time employees, persons working less than 37.5 hours per week. An "NS" indicates the nursing home reported having *no staff* in that particular category.

Registered nurses (RNs) are nurses who are licensed and hold a certificate of registration by the State of Wisconsin. In 2011, this nursing home had:

- | |
|--|
| <ul style="list-style-type: none">• A turnover rate for full-time RNs of NS%,
vs. 33% statewide and 34% across all nursing homes with 100-199 beds. |
| <ul style="list-style-type: none">• A turnover rate for part-time RNs of 13%,
vs. 54% statewide and 59% across all nursing homes with 100-199 beds. |

In some cases, the turnover rate might be artificially high because one position changes frequently throughout the year. For example, if a nursing home with ten nurses had one position that was filled by five people throughout the year, the turnover rate is 50% (5 divided by 10) even though nine of the ten nurses did not change. The "retention rate" captures a sense of the stability of staff outside of the positions that changed frequently. In the example just used, the one-year retention rate is 90% (i.e., nine of the ten nurses had worked at least one year).

In 2011, this nursing home had:

- | |
|---|
| <ul style="list-style-type: none">• A retention rate for full-time RNs of NS%,
vs. 79% statewide and 77% across all nursing homes with 100-199 beds. |
| <ul style="list-style-type: none">• A retention rate for part-time RNs of 87%,
vs. 69% statewide and 68% across all nursing homes with 100-199 beds. |

Licensed practical nurses (LPNs) are nurses who are licensed by the State of Wisconsin as practical nurses. At this nursing home in 2011, there was:

- | |
|--|
| <ul style="list-style-type: none">• A turnover rate for full-time LPNs of NS%,
vs. 21% statewide and 20% across all nursing homes with 100-199 beds. |
| <ul style="list-style-type: none">• A turnover rate for part-time LPNs of 12%,
vs. 46% statewide and 40% across all nursing homes with 100-199 beds. |
| <ul style="list-style-type: none">• A retention rate for full-time LPNs of NS%,
vs. 88% statewide and 86% across all nursing homes with 100-199 beds. |
| <ul style="list-style-type: none">• A retention rate for part-time LPNs of 88%,
vs. 71% statewide and 76% across all nursing homes with 100-199 beds. |

Nursing assistants (NAs) provide direct personal care to residents, but are not registered nurses or licensed practical nurses. At this nursing home in 2011, there was:

- | |
|---|
| <ul style="list-style-type: none">• A turnover rate for full-time NAs of 2%,
vs. 35% statewide and 33% across all nursing homes with 100-199 beds. |
| <ul style="list-style-type: none">• A turnover rate for part-time NAs of 10%,
vs. 60% statewide and 54% across all nursing homes with 100-199 beds. |
| <ul style="list-style-type: none">• A retention rate for full-time NAs of 98%,
vs. 77% statewide and 78% across all nursing homes with 100-199 beds. |
| <ul style="list-style-type: none">• A retention rate for part-time NAs of 96%,
vs. 63% statewide and 67% across all nursing homes with 100-199 beds. |

Rock Haven Admissions/Discharges/Census - 2012

ADMISSIONS				
	CCU	Dementia	CMI/GP	Total
January	3	1	4	8
February	6	1	6	13
March	8	4	4	16
April	2	5	8	15
May	7	5	3	15
June	11	1	2	14
July	12	1	1	13
August	6	1	0	7
September	4	1	2	7
October	13	2	1	16
November	7	3	4	14
December	3	2	5	10
Total	82	27	40	148

1/31/2012
2/29/2012
3/31/2012
4/30/2012
5/31/2012
6/30/2011
7/31/2011
8/31/2011
9/30/2011
10/31/2011
11/30/2011
12/21/2011

DISCHARGES/DEATHS				
	CCU	Dementia	CMI/GP	Total
January	4	2	2	8
February	6	2	3	11
March	10	4	4	18
April	1	5	6	12
May	6	7	2	15
June	7	3	1	11
July	9	1	3	13
August	5	2	0	7
September	5	2	3	10
October	10	1	2	13
November	9	1	1	11
December	5	2	3	10
Total	77	32	30	139

1/31/2012
2/29/2012
3/31/2012
4/30/2012
5/31/2012
6/30/2011
7/31/2011
8/31/2011
9/30/2011
10/31/2011
11/30/2011
12/21/2011

CENSUS				
	CCU	Dementia	CMI/GP	Total
January	39	44	43	126
February	42	43	43	128
March	40	43	43	126
April	41	44	44	129
May	42	44	43	129
June	39	43	43	125
July	40	43	43	126
August	40	43	43	126
September	39	42	43	124
October	41	43	43	127
November	41	41	44	126
December	40	44	42	126
Budget	41	43	44	128
Capacity*	42	44	44	130

1/31/2012
2/29/2012
3/31/2012
4/30/2012
5/31/2012
6/30/2011
7/31/2011
8/31/2011
9/30/2011
10/31/2011
11/30/2011
12/21/2011

*Downsize from 156 to 130 occurred 6/1/07

2012 PATIENT DAYS FOR ROCK COUNTY HEALTH CARE CENTER

		PATIENT DAYS			PATIENT DAYS			% OVER/ -UNDER	OVER/ -UNDER	% OVER/ -UNDER
		ACTUAL MTD	BUDGET MTD	OVER/ -UNDER	ACTUAL YTD	BUDGET YTD	OVER/ -UNDER			
MEADOW PLACE	MEDICARE	145	217	-72	923	1064	-141	-13.25		
	TOTAL	145	217	-72	923	1064	-141	-13.25		
HOSPICE	SNF				5		5			
	TOTAL				5		5			
MEDICAL ASSISTANCE	SNF	940	930	10	4440	4560	-120	-2.63		
	TOTAL	940	930	10	4440	4560	-120	-2.63		
PRIVATE PAY	SNF	192	93	99	741	456	285	62.50		
	TOTAL	192	93	99	741	456	285	62.50		
TOTAL MEADOW PLACE		1277	1240	37	6109	6080	29	0.48		
HARBOR WAY	MEDICARE	69	31	38	404	152	252	165.79		
	TOTAL	69	31	38	404	152	252	165.79		
HOSPICE	SNF		31	-31	130	152	-22	-14.47		
	TOTAL		31	-31	130	152	-22	-14.47		
MEDICAL ASSISTANCE	SNF	1247	1209	38	5676	5928	-252	-4.25		
	TOTAL	1247	1209	38	5676	5928	-252	-4.25		
PRIVATE PAY	SNF	31	93	-62	324	456	-132	-28.95		
	TOTAL	31	93	-62	324	456	-132	-28.95		
TOTAL HARBOR WAY		1347	1364	-17	6534	6688	-154	-2.30		

2012 PATIENT DAYS FOR ROCK COUNTY HEALTH CARE CENTER


		PATIENT DAYS			PATIENT DAYS			% OVER/ -UNDER	ACTUAL YTD	BUDGET YTD	OVER/ -UNDER	% OVER/ -UNDER
		ACTUAL MTD	BUDGET MTD	OVER/ -UNDER	ACTUAL YTD	BUDGET YTD	OVER/ -UNDER					
GLEN LANE	MEDICARE	41	41	41	233	233	233	233	233	233	233	
	TOTAL	41	41	41	233	233	233	233	233	233	233	
	HOSPICE	39	62	-23	181	304	304	181	304	-123	-40.46	
	TOTAL	39	62	-23	181	304	304	181	304	-123	-40.46	
	MEDICAL ASSISTANCE	1129	1178	-49	5977	5776	5776	5977	5776	201	3.48	
	TOTAL	1129	1178	-49	5977	5776	5776	5977	5776	201	3.48	
	PRIVATE PAY	97	93	4	188	456	456	188	456	-268	-58.77	
	TOTAL	97	93	4	188	456	456	188	456	-268	-58.77	
TOTAL GLEN LANE		1306	1333	-27	6579	6536	6536	6579	6536	43	0.66	
TOTAL ROCK HAVEN	MEDICARE	255	248	7	1560	1216	1216	1560	1216	344	28.29	
	TOTAL	255	248	7	1560	1216	1216	1560	1216	344	28.29	
	HOSPICE	39	93	-54	316	456	456	316	456	-140	-30.70	
	TOTAL	39	93	-54	316	456	456	316	456	-140	-30.70	
	MEDICAL ASSISTANCE	3316	3317	-1	16093	16264	16264	16093	16264	-171	-1.05	
	TOTAL	3316	3317	-1	16093	16264	16264	16093	16264	-171	-1.05	
	PRIVATE PAY	320	279	41	1253	1368	1368	1253	1368	-115	-8.41	
	TOTAL	320	279	41	1253	1368	1368	1253	1368	-115	-8.41	
TOTAL ROCK HAVEN		3930	3937	-7	19222	19304	19304	19222	19304	-82	-0.42	

	AVERAGE DAILY PATIENTS				AVERAGE DAILY PATIENTS			
	ACTUAL MTD	BUDGET MTD	OVER/UNDER	% OVER/UNDER	ACTUAL YTD	BUDGET YTD	OVER/UNDER	% OVER/UNDER
MEADOW PLACE								
MEDICARE								
SNF	4.68	7.00	-2.32	-33.18	6.07	7.00	-0.93	-13.25
TOTAL	4.68	7.00	-2.32	-33.18	6.07	7.00	-0.93	-13.25
SNF					0.03		0.03	
TOTAL					0.03		0.03	
MEDICAL ASSISTANCE								
SNF	30.32	30.00	0.32	1.08	29.21	30.00	-0.79	-2.63
TOTAL	30.32	30.00	0.32	1.08	29.21	30.00	-0.79	-2.63
PRIVATE PAY								
SNF	6.19	3.00	3.19	106.45	4.88	3.00	1.88	62.50
TOTAL	6.19	3.00	3.19	106.45	4.88	3.00	1.88	62.50
TOTAL MEADOW PLACE	41.19	40.00	1.19	2.98	40.19	40.00	0.19	0.48
HARBOR WAY								
MEDICARE								
SNF	2.23	1.00	1.23	122.58	2.66	1.00	1.66	165.79
TOTAL	2.23	1.00	1.23	122.58	2.66	1.00	1.66	165.79
HOSPICE								
SNF		1.00	-1.00	-100.00	0.86	1.00	-0.14	-14.47
TOTAL		1.00	-1.00	-100.00	0.86	1.00	-0.14	-14.47
MEDICAL ASSISTANCE								
SNF	40.23	39.00	1.23	3.14	37.34	39.00	-1.66	-4.25
TOTAL	40.23	39.00	1.23	3.14	37.34	39.00	-1.66	-4.25
PRIVATE PAY								
SNF	1.00	3.00	-2.00	-66.67	2.13	3.00	-0.87	-28.95
TOTAL	1.00	3.00	-2.00	-66.67	2.13	3.00	-0.87	-28.95
TOTAL HARBOR WAY	43.45	44.00	-0.55	-1.25	42.99	44.00	-1.01	-2.30

2012 PATIENT DAYS FOR ROCK COUNTY HEALTH CARE CENTER

		AVERAGE DAILY PATIENTS			AVERAGE DAILY PATIENTS		
		ACTUAL MTD	BUDGET MTD	% OVER/UNDER	ACTUAL YTD	BUDGET YTD	% OVER/UNDER
GLEN LANE	MEDICARE	SNF	1.32	1.32	1.53	1.53	1.53
		TOTAL	1.32	1.32	1.53	1.53	1.53
	HOSPICE	SNF	1.26	2.00	1.19	2.00	-0.81
		TOTAL	1.26	2.00	1.19	2.00	-0.81
	MEDICAL ASSISTANCE	SNF	36.42	38.00	39.32	38.00	3.48
		TOTAL	36.42	38.00	39.32	38.00	3.48
	PRIVATE PAY	SNF	3.13	3.00	1.24	3.00	-1.76
		TOTAL	3.13	3.00	1.24	3.00	-1.76
TOTAL GLEN LANE			42.13	43.00	43.28	43.00	0.66
TOTAL ROCK HAVEN	MEDICARE	SNF	8.23	8.00	10.26	8.00	2.26
		TOTAL	8.23	8.00	10.26	8.00	2.26
	HOSPICE	SNF	1.26	3.00	2.08	3.00	-0.92
		TOTAL	1.26	3.00	2.08	3.00	-0.92
	MEDICAL ASSISTANCE	SNF	106.97	107.00	105.88	107.00	-1.13
		TOTAL	106.97	107.00	105.88	107.00	-1.13
	PRIVATE PAY	SNF	10.32	9.00	8.24	9.00	-0.76
		TOTAL	10.32	9.00	8.24	9.00	-0.76
TOTAL ROCK HAVEN			126.77	127.00	126.46	127.00	-0.42

MEMORANDUM

To: Health Services Committee
From: Sherry R. Gunderson 
Date: June 19, 2012
Re: Semi-Annual Report - Attendance at Conventions/Conferences

There was no attendance at any training, convention or conference that exceeded total costs of \$1,000 per event, per employee during the period January 1, 2012 through June 19, 2012; and it is not anticipated that there will be any through June 30, 2012.

SRG/TF

cc Craig Knutson