



HEALTH SERVICES COMMITTEE
Wednesday, April 4, 2012, 3:00 p.m.
Rock Haven 4th Floor Classroom

AGENDA

1. Call to Order/Approval of Agenda
2. Approval of Minutes - March 6, 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
 - b. Information Item: County Board Presentation and Gazette Article
8. New Business
 - a. Information Item: Annual Nursing Home Survey
 - b. **Action Item:** Contract - Mercy Assisted Care (Hospice)
9. Information Item: Reports
 - a. Census
 - b. Activities
 - 1) Senior Management Team
 - 2) Staff Education for April 2012
 - a) Alzheimer's Disease (Make-up Sessions) - Presented by Sherry Gunderson
 - b) Code Review (Make-up Sessions) - Presented by Doug Keating
 - c) Physical Assessment for Nurses - Presented by Connie Hickey

Health Services Committee

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d) Prevention of Pressure Ulcers - Presented by Connie Hickey

e) Prevention of abuse (make-up sessions) presented by Connie Hickey.

3) Conferences and Meetings - Sherry Gunderson will attend.

a) LeadingAge Region Meeting (Sun Prairie) - April 13

4) Resident Council Meeting - Tuesday, April 10, at 10:15 a.m.

c. Finance - Dave Sudmeier

10. Next Meeting Date - The next regular meeting of the Health Services Committee is scheduled for Tuesday May 1, 2012

11. Adjournment

SRG/uf

*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
323250000-64904	SUNDRY EXPENSE	3,000.00 45.8%	1,376.92	0.00	1,623.08		
	P1200280-PO# 03/28/12 -VN#013780			KMART CORP #4255		353.89	
			CLOSING BALANCE		1,269.19		353.89
3272607400-62171	AMBULANCE	2,000.00 40.3%	2,693.25	-1,887.24	1,193.99		
	P1200902-PO# 02/29/12 -VN#020054			LAVIGNE BUS COMPANY INC		624.63	
			CLOSING BALANCE		569.36		624.63
3272607400-62189	OTHER MED SERV	5,500.00 0.0%	1,967.72	-1,967.70	5,499.98		
	P1201234-PO# 02/29/12 -VN#047747			MOBILEXUSA		159.05	
			CLOSING BALANCE		5,340.93		159.05
3275007350-63109	OTHER SUPP/EXP	2,500.00 3.8%	95.95	0.06	2,403.99		
	P1200848-PO# 02/29/12 -VN#015763			ROCK COUNTY HEALTH CARE CENTER		100.00	
	P1201176-PO# 02/29/12 -VN#014794			NASCO		50.92	
			CLOSING BALANCE		2,253.07		150.92
3280008100-62420	MACH & EQUIP RM	15,100.00 28.6%	3,472.99	846.36	10,780.65		
	P1200269-PO# 03/28/12 -VN#047934			AMC3 IDENTITY SOLUTIONS		145.00	
	P1200271-PO# 02/29/12 -VN#010028			ARJO INC		51.94	
	P1200272-PO# 03/28/12 -VN#043152			BASIC AMERICAN MEDICAL PRODUCT		402.34	
	P1200275-PO# 02/29/12 -VN#018960			BOMGAARS AND ASSOCIATES INC		417.25	
	P1201098-PO# 03/28/12 -VN#045516			PRIMUS MEDICAL		1,474.15	
			CLOSING BALANCE		8,289.97		2,490.68
3280008100-63109	OTHER SUPP/EXP	11,400.00 37.3%	2,949.23	1,310.28	7,140.49		
	P1200847-PO# 03/28/12 -VN#015764			ROCK COUNTY HEALTH CARE CENTER		32.68	
			CLOSING BALANCE		7,107.81		32.68
3280008100-64000	MEDICAL SUPPLIES	117,052.00 72.1%	31,565.06	52,935.03	32,551.91		
	P1200287-PO# 03/28/12 -VN#044709			STRYKER MEDICAL		9.95	
			CLOSING BALANCE		32,541.96		9.95
3280009100-62420	MACH & EQUIP RM	7,000.00 28.5%	1,145.42	854.60	4,999.98		
	P1201457-PO# 03/28/12 -VN#051885			PRECISTON METAL FAB INC		112.50	
			CLOSING BALANCE		4,887.48		112.50
3280009300-62163	LAUNDRY	112,550.00 98.6%	26,667.71	84,332.29	1,550.00		
	P1201433-PO# 03/28/12 -VN#051535			BUCK AND BUCK INC		26.00	
			CLOSING BALANCE		1,524.00		26.00
3280009300-63109	OTHER SUPP/EXP	5,000.00 37.7%	1,888.00	0.00	3,112.00		

Account Number	Name	Yearly Prcnt Appropriation Spent	YTD Expenditure	Encumb Amount	Unencumb Balance	Inv/Enc Amount	Total
	P1201488-PO# 03/28/12 -VN#023200		ED AND LARRYS FAST SERVICE			9.95	
			CLOSING BALANCE		3,102.05		9.95
3280009300-64409	FURNISHINGS	11,000.00 3.5%	395.70	0.02	10,604.28		
	P1201264-PO# 03/28/12 -VN#015393		GULF SOUTH MEDICAL SUPPLY			2,669.98	
			CLOSING BALANCE		7,934.30		2,669.98
3280009500-64200	TRAINING EXP	8,000.00 15.0%	305.00	895.02	6,799.98		
	P1201352-PO# 03/28/12 -VN#014502		MEDCOM INC			643.90	
	P1201461-PO# 03/28/12 -VN#051886		MIGHTY RIGHTS PRESS			110.00	
			CLOSING BALANCE		6,046.08		753.90
3280009500-64416	LICENSES	1,000.00 146.2%	1,462.00	0.00	-462.00		
	P1201489-PO# 03/28/12 -VN#050968		CLIA LABORATORY PROGRAM			150.00	
			CLOSING BALANCE		-612.00		150.00
	*** OVERDRAFT ***						
3280009500-64424	EMPLOYEE RECOGN.	2,500.00 0.0%	8.95	-8.92	2,499.97		
	P1200847-PO# 03/28/12 -VN#015764		ROCK COUNTY HEALTH CARE CENTER			26.85	
			CLOSING BALANCE		2,473.12		26.85
3280009700-62174	INTERNIST	91,000.00 76.9%	11,937.52	58,062.48	21,000.00		
	P1201478-PO# 03/28/12 -VN#036794		RAMSEY MD, H R			2,000.01	
			CLOSING BALANCE		18,999.99		2,000.01
3290009940-61915	CERT/LIC/OTHER	2,000.00 43.0%	860.00	0.00	1,140.00		
	03/28/12 -VN#028723		BRIGHT, LOIS			86.00	
	03/28/12 -VN#036486		ROCK, KATHLEEN K			86.00	
	03/28/12 -VN#043985		BURNS, MARILYN J			86.00	
			CLOSING BALANCE		882.00		258.00
3290009940-61920	PHYSICALS	1,500.00 0.0%	69.00	-68.99	1,499.99		
	P1201235-PO# 02/29/12 -VN#030413		OCCUPATIONAL HEALTH CENTER			412.00	
			CLOSING BALANCE		1,087.99		412.00

Account Number	Name	Yearly Prcnt Appropriation Spent	YTD Expenditure	Encumb Amount	Unencumb Balance	Inv/Enc Amount	Total
	ROCK HAVEN		PROG-TOTAL-PO			10,240.99	

I HAVE EXAMINED THE PRECEDING BILLS AND ENCUMBRANCES IN THE TOTAL AMOUNT OF \$10,240.99 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

APR 03 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 \$ 10,000.00
INCREASE FROM \$ 21,000.00 TO \$ 31,000.00
ACCOUNT BALANCE AVAILABLE \$ 22551
REASON FOR AMENDMENT Buying from different vendor for gloves

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

PURCHASE ORDER NUMBER P1200479 PEID 035138

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 Centrad Healthcare Inc

ACCOUNT NUMBER 32 8000 8100 64000

FUNDS DESCRIPTION Medical Supplies

AMOUNT OF INCREASE \$ 9500.00

INCREASE FROM \$ 5,500.00 TO \$ 15,000.00

ACCOUNT BALANCE AVAILABLE \$ 22551.00 *AL*

REASON FOR AMENDMENT Higher utilization of wound care supplies

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

PURCHASE ORDER NUMBER P1200259 PEID 024799

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 Deb Wholesale Inc
ACCOUNT NUMBER 32 8000 8500 63109
FUNDS DESCRIPTION Other Supplies
AMOUNT OF INCREASE \$ 500.00
INCREASE FROM \$ 1,000.00 TO \$ 1500.00
ACCOUNT BALANCE AVAILABLE \$ 1999.00
REASON FOR AMENDMENT Higher utilization of Commissary.

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

PURCHASE ORDER NUMBER P1200475 PEID 012104

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 Charter Communications

ACCOUNT NUMBER 32 7500 7350 64300

FUNDS DESCRIPTION Recreational Therapy

AMOUNT OF INCREASE \$ 200.00

INCREASE FROM \$ 11,000.00 TO \$ 11,200.00

ACCOUNT BALANCE AVAILABLE \$ 9600.00

REASON FOR AMENDMENT Price increase for Cable TV

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

Contract Review Cover Sheet

Instructions: Departments are required to complete this form and send with two copies of the contract to General Services. Review the County Policy and Procedure Manual for specifics on the Contract Review Process.

New Contract: (check box if yes) or, _____ or, _____
 Amendment to Contract # Addendum to Contract #

Rock Haven Sherry Gunderson 5114
 Originating Department Contact Person Phone
 (Terri Fena) (5076)

Contract with: Mercy Assisted Care, Inc. (Hospice)
 (Name of entity)

Contract Period: Start Date: 01/03/2012 Expiration Date: 12/31/2012
 then renews annually

Contract Amount: \$ _____

Expenditure/ Revenue Account Numbers: _____
 (provide 9-digit object codes)

Executive Summary: For Mercy Assisted Care to
provide hospice services.

NEW AMENDMENT TO: _____ ADDENDUM TO: _____

ADMINISTRATION CONTRACT REVIEW NO. ~~HS1342~~ HS1342

~~Contract between Rock Co. Health Care Center/Rock Haven and Mercy Assisted Care Inc. to provide hospice services for period of 1/3/12 - 12/31/12 and then renews annually. Contract Amount: Not stated~~

Corporation Counsel has reviewed this Document and finds it to be proper, as to form.
[Signature] 12/19/11
 Signature Date
[Signature] 12/15/11
 Purchasing Manager Date

Total Fiscal Impact & Source of Funds:
[Signature]
[Signature] 12/19/11
 Finance Director Date

No Central Purchasing Involvement Purchasing Procedure Followed
 White - General Services Yellow - Issuing Dept. Pink - County Clerk

Rock Haven Admissions/Discharges/Census - 2012

ADMISSIONS				
	CCU	Dementia	CMI/GP	Total
January	3	1	4	8
February	6	1	6	13
March	8	0	2	10
April	8	0	1	9
May	6	0	1	7
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	87	13	29	128

1/31/2012
2/29/2012
3/31/2011
4/30/2011
5/31/2011
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	5	1	2	8
April	5	0	2	7
May	11	2	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	81	19	24	124

1/31/2012
2/29/2012
3/31/2011
4/30/2011
5/31/2011
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	41	44	44	129
April	42	44	44	130
May	36	42	44	122
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
3/31/2011
4/30/2011
5/31/2011
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

	PATIENT DAYS			PATIENT DAYS			PATIENT DAYS			% OVER/ -UNDER
	ACTUAL MTD	BUDGET MTD	OVER/ -UNDER	ACTUAL YTD	BUDGET YTD	OVER/ -UNDER	ACTUAL YTD	BUDGET YTD	OVER/ -UNDER	
MEADOW PLACE										
MEDICARE	SNF	164	203	-39	-19.21	395	420	-25	-5.95	
TOTAL		164	203	-39	-19.21	395	420	-25	-5.95	
HOSPICE	SNF									
TOTAL										
MEDICAL ASSISTANCE	SNF	779	870	-91	-10.46	1583	1800	-217	-12.06	
TOTAL		779	870	-91	-10.46	1583	1800	-217	-12.06	
PRIVATE PAY	SNF	180	87	93	106.90	364	180	184	102.22	
TOTAL		180	87	93	106.90	364	180	184	102.22	
TOTAL MEADOW PLACE		1123	1160	-37	-3.19	2342	2400	-58	-2.42	
HARBOR WAY										
MEDICARE	SNF	105	29	76	262.07	144	60	84	140.00	
TOTAL		105	29	76	262.07	144	60	84	140.00	
HOSPICE	SNF	34	29	5	17.24	96	60	36	60.00	
TOTAL		34	29	5	17.24	96	60	36	60.00	
MEDICAL ASSISTANCE	SNF	1061	1131	-70	-6.19	2169	2340	-171	-7.31	
TOTAL		1061	1131	-70	-6.19	2169	2340	-171	-7.31	
PRIVATE PAY	SNF	41	87	-46	-52.87	168	180	-12	-6.67	
TOTAL		41	87	-46	-52.87	168	180	-12	-6.67	
TOTAL HARBOR WAY		1241	1276	-35	-2.74	2577	2640	-63	-2.39	

		PATIENT DAYS			PATIENT DAYS			% OVER/ -UNDER
		ACTUAL MTD	BUDGET MTD	OVER/ -UNDER	ACTUAL YTD	BUDGET YTD	OVER/ -UNDER	
GLEN LANE	MEDICARE	21		21	41		41	
	TOTAL	21		21	41		41	
	HOSPICE	29	58	-29	77	120	-43	-35.83
	TOTAL	29	58	-29	77	120	-43	-35.83
MEDICAL ASSISTANCE	SNF	1188	1102	86	2446	2280	166	7.28
	TOTAL	1188	1102	86	2446	2280	166	7.28
	PRIVATE PAY	29	87	-58	60	180	-120	-66.67
	TOTAL	29	87	-58	60	180	-120	-66.67
TOTAL GLEN LANE	1267	1247	20	2624	2580	44	1.71	
TOTAL ROCK HAVEN	MEDICARE	290	232	58	580	480	100	20.83
	TOTAL	290	232	58	580	480	100	20.83
	HOSPICE	63	87	-24	173	180	-7	-3.89
	TOTAL	63	87	-24	173	180	-7	-3.89
MEDICAL ASSISTANCE	SNF	3028	3103	-75	6198	6420	-222	-3.46
	TOTAL	3028	3103	-75	6198	6420	-222	-3.46
	PRIVATE PAY	250	261	-11	592	540	52	9.63
	TOTAL	250	261	-11	592	540	52	9.63
TOTAL ROCK HAVEN	3631	3683	-52	7543	7620	-77	-1.01	

		AVERAGE DAILY PATIENTS			AVERAGE DAILY PATIENTS					
		ACTUAL MTD	BUDGET MTD	% OVER/ -UNDER	ACTUAL YTD	BUDGET YTD	% OVER/ -UNDER			
MEADOW PLACE	MEDICARE	SNF	5.66	7.00	-1.34	-19.21	6.58	7.00	-0.42	-5.95
	TOTAL		5.66	7.00	-1.34	-19.21	6.58	7.00	-0.42	-5.95
	SNF									
	TOTAL									
	MEDICAL ASSISTANCE	SNF	26.86	30.00	-3.14	-10.46	26.38	30.00	-3.62	-12.06
	TOTAL		26.86	30.00	-3.14	-10.46	26.38	30.00	-3.62	-12.06
	PRIVATE PAY	SNF	6.21	3.00	3.21	106.90	6.07	3.00	3.07	102.22
	TOTAL		6.21	3.00	3.21	106.90	6.07	3.00	3.07	102.22
TOTAL MEADOW PLACE			38.72	40.00	-1.28	-3.19	39.03	40.00	-0.97	-2.42
HARBOR WAY	MEDICARE	SNF	3.62	1.00	2.62	262.07	2.40	1.00	1.40	140.00
	TOTAL		3.62	1.00	2.62	262.07	2.40	1.00	1.40	140.00
	HOSPICE	SNF	1.17	1.00	0.17	17.24	1.60	1.00	0.60	60.00
	TOTAL		1.17	1.00	0.17	17.24	1.60	1.00	0.60	60.00
	MEDICAL ASSISTANCE	SNF	36.59	39.00	-2.41	-6.19	36.15	39.00	-2.85	-7.31
	TOTAL		36.59	39.00	-2.41	-6.19	36.15	39.00	-2.85	-7.31
	PRIVATE PAY	SNF	1.41	3.00	-1.59	-52.87	2.80	3.00	-0.20	-6.67
	TOTAL		1.41	3.00	-1.59	-52.87	2.80	3.00	-0.20	-6.67
TOTAL HARBOR WAY			42.79	44.00	-1.21	-2.74	42.95	44.00	-1.05	-2.39

		AVERAGE DAILY PATIENTS			AVERAGE DAILY PATIENTS		
		ACTUAL	BUDGET	% OVER/ -UNDER	ACTUAL	BUDGET	% OVER/ -UNDER
GLEN LANE	MEDICARE	SNF	0.72	0.72	0.68	0.68	0.68
	TOTAL		0.72	0.72	0.68	0.68	
	HOSPICE	SNF	1.00	2.00	1.28	2.00	-0.72 -35.83
	TOTAL		1.00	2.00	1.28	2.00	-0.72 -35.83
	MEDICAL ASSISTANCE	SNF	40.97	38.00	40.77	38.00	2.77 7.28
	TOTAL		40.97	38.00	40.77	38.00	2.77 7.28
	PRIVATE PAY	SNF	1.00	3.00	1.00	3.00	-2.00 -66.67
	TOTAL		1.00	3.00	1.00	3.00	-2.00 -66.67
TOTAL GLEN LANE			43.69	43.00	43.73	43.00	0.73 1.71
TOTAL ROCK HAVEN	MEDICARE	SNF	10.00	8.00	9.67	8.00	1.67 20.83
	TOTAL		10.00	8.00	9.67	8.00	1.67 20.83
	HOSPICE	SNF	2.17	3.00	2.88	3.00	-0.12 -3.89
	TOTAL		2.17	3.00	2.88	3.00	-0.12 -3.89
	MEDICAL ASSISTANCE	SNF	104.41	107.00	103.30	107.00	-3.70 -3.46
	TOTAL		104.41	107.00	103.30	107.00	-3.70 -3.46
	PRIVATE PAY	SNF	8.62	9.00	9.87	9.00	0.87 9.63
	TOTAL		8.62	9.00	9.87	9.00	0.87 9.63
TOTAL ROCK HAVEN			125.21	127.00	125.72	127.00	-1.28 -1.01