



BOARD OF DIRECTORS MEETING – DECEMBER 8, 2020

PRESENT FROM BOARD:

Terry Pickens, Tawny Espinoza, Jim Grisier, Kevin Fitzgerald, Justin Aubert, Krista Ubersox, Dave Hayden, Steve Ammentorp, Randy Brown, Mike Nordine

EXCUSED ABSENCE(S):

Stephanie Keller, Justin Ward, Tracey Garchar, Scott Coleman

PRESENT FROM STRIVE:

Grant Jackson, Mary Anne Lawrie, Chris Bergquist, Lindsay Powers, Khristina Kukus, Mary Burdick

OVERVIEW OF MEETING
Minutes from the previous meeting were reviewed and approved.
Grant provided State and organizational updates.
Financials were presented and accepted
Mary & Khristina provided a Quality Assurance presentation

A quorum was achieved, and the meeting was called to order at 12:00 p.m. Tawny Espinoza presided.

MINUTES FROM 10/27/2020 MEETING

The minutes from the meeting 10/27/2020 were reviewed and approved.

It was M/S/P (Fitzgerald/Ubersox) to approve the 10/27/2020 minutes as presented.

PRESIDENT/CEO UPDATES

Just a couple of short updates.

Grant introduced Lindsay as the new HR Director. Lindsay recognized a few of the members and provided a brief summation of her background experience and knowledge. Board members congratulated Lindsay and welcomed her to the organization.

A Public Health Order was issued last month where surveillance testing be done on a regular basis for staff and individuals in group homes. Since the current positivity rate in Mesa County is at 13% tests will occur twice a week. Testing is currently being done at 790 and in the group homes. There have been a couple of instances where staff have tested positive but were asymptomatic. These staff went into isolation and staff that were exposed to them have been quarantined for 14 days. Staff have been doing an incredible job in abiding by the infection control procedures and protocols ensuring that the residents

remain safe and healthy. A comment was made in relation to the CDC guidelines in other testing options available to shorten the quarantine and deferred to Mary for further advice. Mary informed members the new information was received and reviewed with the Health Department. It was ultimately decided that these new guidelines do not apply to congregate settings.

Grant reported that Leadership and Supervisors are currently discussing the possibility of closing Vocational Programs to avoid staff shortages in the group homes.

Grant reported that 11 vocational staff were offered positions in group homes to avoid being laid off. Unfortunately, the majority opted to be laid off. There is currently a freeze on non-DSP positions.

We are looking at potentially expanding our counseling services to generate additional revenue. We will be scheduling a meeting with RMHP to gain further insight on Medicaid billing and the possibility of capturing additional billing units. We are also looking at turning the Psych Clinic back over to MindSprings since we do not get reimbursed for administrative services.

On a final note, consideration is being given to reutilize 181 Elm which has been vacated for the past couple of weeks. Since Karis (The House) is renting Victoria, we will be reaching out to them to see if there is an interest in also renting this one. A neighbor contacted Chris and they are interested in buying it and will pay cash. Grant also thought to turn into a four-bedroom group home, like a host home, but have one staff living and working there. This model is being practiced in Alaska and is very successful. Grant is in contact with one of his old colleagues regarding the funding structure and rates. The idea is to move towards a lesser medical home model to provide individuals with a higher quality of life. This, of course, would be a trial and if successful we may look at expanding this type of model.

FINANCIAL REPORT

With November financials not finalized yet, Chris provided an overview of October financials. The operational income continues to run at a deficit. To minimize some of the operational loss, we ended up laying off 11 vocational staff. Also, to take into consideration is we were able to recognize monies received from the provider relief funds totaling \$337K leaving a net income of \$274. Same thing with year-to-date operating income is running in a deficit of \$573K, adding the relief funding back net income is at a loss of \$163K.

Attention was turned back to the financials and review of the various graphs:

- Revenue is down in comparison to last year due to vocational programs running at 50%. Chris is working on revising the revenue projection to be more aligned with real time.
- Same thing with personnel, we had a decrease in case management and vocational staff to try help with operating income.
- Operating expenses are down due to less activity within the organization.
- Operating income continues to run in the negative.
- Actual income through October then forecasted net income slide was added to the financial presentation. This shows where we are currently at financially. Chris pointed out the spike in projections for November and December. These months will recognize the PPP loan of \$1.7M and the allocation from the County totaling \$535K.

Chris then reviewed the metric analysis:

- Total residential occupancy is at 96.4%. 3.6% over the target goal.
- Group home residential occupancy is at 94.59% and is over the target goal by 1.59%.
- There was improvement with behavior and vocational billing this month.
- Hourly staff continues to run under target.
- Operating costs are slightly under the target amount.

The balance sheet is a little off in account receivables due to payment hitting at the end of the month. Cash trends remain positive.

It was M/S/P (Fitzgerald/Grisier) to accept the financials as presented.

REPORTS

QUALITY ASSURANCE REPORT

Khristina & Mary here to provide a progress report on where we are at from the Department of Public Health's audit of the group homes in 2018.

A Timeline was presented to the Board:

- Bad survey began in 2018 and continued through 2019. Due to the outcome of the surveys a moratorium was issued on all group homes.
- All deficiency tags were cleared in February 2020 and then COVID happened in March.
- The State conducted a virtual infection control survey in April with a couple of infection control visits in May. The survey went well. They were impressed with the infection control plan and they were going to recommend some of the protocols and procedures as best practices. Surveys were being done based on a few complaints that were filed prior to the COVID outbreak.
- The residential department experienced some management changes during August and September along with the State conducting additional group home and host home surveys. These surveys also assisted in the development of new quality management plans (QMP) to be implemented within the group and host home settings.
- Plans of corrections were submitted in September and all deficiencies were cleared in October.

Mary then proceeded to provide the Board an in-depth summation of the timeline with details of the survey, the deficiencies at each one of the group homes and the progress made to clear all of them. Areas identified needing improvement were the following:

- QMPs - QMPs have been developed and implemented in the group homes to address monitoring and tracking of medication errors, behavior, sleeping and repositioning documentation. QMPs have been developed and will implemented in the host homes mid-December. This documentation will be reviewed monthly.
- Investigation/occurrences – Internal processes have been developed and implemented for investigating mistreatment, abuse, neglect, and exploitation (MANE) allegations. In addition, it was noted that Incident Reports were not properly entered into the State's system. Completion of entering all occurrences and in compliance with the State is targeted for December 23rd.

The following are the next steps that will be taken:

- Complete and maintain occurrence reports in timely manner.
- Develop trends and analysis from incident reports and occurrence reports.
- Present trends and analysis data to the General Event Reporting Committee (GER), department and leadership to develop actions plans.
- Encourage and promote group home staff to identify their QMP needs.

Mary then provided a brief COVID update. As Grant previously reported the State Health Department mandated an order requiring weekly surveillance testing be conducted on all individuals and staff in group homes. The number of tests per week will be based on a two-week positivity rate of 10%. If the rate is higher than 10, then testing will be conducted twice a week. This will allow us to identify staff and individuals who do not have any symptoms but test positive. There have already been a few cases with staff that have tested positive without symptoms. Mary will contact staff and find out what other staff they have been exposed to. All staff will go into a 14-day self-quarantine status.

On a positive note, we are in the Top Tier to receive the vaccine. This will be administered to staff and individuals once the emergency personnel have been completed. Walgreens has agreed to administer the vaccine. Mary further stated that that we have an outstanding relationship with the Health Department due to the continued communication and education on the medical fragility of our population.

The Board extended their appreciation and gratitude for the detailed reports and would like to continue these on a quarterly basis.

The meeting adjourned at 12:57 p.m.

Minutes were approved on 1/26/2021 – Not signed
due to COVID

Secretary

Date