

7/23/15

The July 2015 Regular meeting of the Meadow Brook Governing Board/Antrim Co. Human Services Board was held on Thursday, June 23, 2015 at Meadow Brook Medical Care Facility. Fred Harris, Chairman called the meeting to order at 9:05 a.m. Those present were Rick Teague, Vice Chairman; Fred Harris, Chairman; Michael Ballard, Board Member; Robert Wilson, Liaison Antrim County Board of Commissioners; Patricia Simmons, Antrim County DHS Board Secretary; David Schulz, Meadow Brook Director of Administrative Services; John McCleese, Meadow Brook Director of Maintenance; Ben McGuire, Meadow Brook Systems Administrator; Cheryl Patton, Meadow Brook Director of Nursing; and Rhonda Groeneveld, Meadow Administrative Assistant, acting Secretary for Antrim County Human Services Board.

Guests Present: Doug York, DHS Business Service Manager, Marquette Office.

Public Comment: None.

Meeting minutes of the Regular Meeting 6/25/15, motion to approve and accept as presented by Rick Teague, seconded by Fred Harris, all yeas, motion carried.

Pat Simmons introduced guest Doug York, DHS Business Service Manager from the Marquette Office.

Pat Simmons reported with updates to the Board 1. MISACWA Visit at the Antrim Office today. 2. Financials – No Expenditures for June. 3. Approval of Expenditures for Copies and Faxes (\$37.94) Assessment Expenditure for Hearing of Termination Case (\$264.00) and Foster Parent Special Need for fencing for yard (Menard's Quote \$887.73) 4. Shared Family Care Program. 5. Contract Approval #FP-05002 Wealth Springs Lutheran In Home Family Services and #FP-05001 Family Assistance Program Worker. 6. Michigan Rehab Services CNA Classes in partnership with Bay Bluffs Emmet County Medical Care Facility. 7. Administrative Costs for Christmas Program for Foster Kids.

Motion to approve the current DHS Budget made by Rick Teague, seconded by Fred Harris, all yeas, motion carried.

Motion to approve the July Expenditures for Faxing / Copies; Termination Case and Foster Parent Special Needs totaling \$1,189.67 made by Rick Teague, seconded by Fred Harris, all yeas, motion carried.

Motion to approve contract renewal of #FP-05002 Wealth Springs Lutheran In Home Family Services for three (3) years \$96,000 (\$32,000 per year) and #FP-05001 Family Assistance Program Worker for three (3) years \$20,000 per year, made by Rick Teague, seconded by Fred Harris, all yeas, motion carried.

Motion to approve Administrative Fee to support Christmas Program for Foster Kids in the amount of \$30.00 made by Rick Teague, seconded by Michael Ballard, all yeas, motion carried.

John McCleese, Director of Maintenance reported to the Board with updates on:

1. Heating / Cooling -

- The Daiken Unit that we were waiting to replace compressors on now has a leak in the coil as well. I am asking the rep for answers as to why the failures occurred.
- Due to all of the failures with the Daiken systems I believe we should consider leasing or buying the portable Diesel heater and am asking for pricing options from Temperature Air

Control.

2. Radiant Heat Panels / Supplemental Heat:

- We have asked three vendors to bid on this and extended the due date due to some changes on the bulletin.
- Due to the placement of the radiant panels we will have to change the sprinkler heads to a higher temperature head in most of the rooms. I have asked John Green for a quote.

3. Generator Transfer Switch Repairs:

- Repairs were completed and switch operated normally when tested.
- We did not get a confirmed explanation of what caused the issue, it is suggested by F & Z Electrical that the second failure was due to components that may have been damaged but not replaced after the first lightning strike.

4. Fire Marshall Update:

- After our first visit the Fire Marshall returned on 7.25.15 and measured smoke detector and strobe placements and provided a list of 43 citations on the fire alarm system.
- F & Z Electrical confirmed the Fire Marshall concerns with our exit discharge lighting not meeting the requirements and are currently waiting on Hooker | DeJong to come up with a solution.
- We still have not received our official report, though we are not sure what items will show up on the report we have been very proactive on the items in our notes.

David Schulz reported on behalf of Marna Robertson, Meadow Brook Administrator with updates on: 1. John McCleese to provide updates on Fire Marshall issues (K-51). We are awaiting the official 2567 State Report but did receive preliminary findings via email from Ed Hale, State Fire Marshall. On June 19, 2015 during the LSC Survey, observations revealed several deficiencies with the fire alarm system throughout the facility. The installing contractor, Northern Fire and Safety upgraded the fire alarm system in 2010. The following items were observed that do not meet NFPA 72 requirements:

- Front Lobby smoke detector (by morgue) less than three feet to an air diffuser.
- Front Lobby visual notification appliance (by morgue) at 15cd, area requires effective intensity of 30cd.
- Room E155 Nursing Supply smoke detector in direct path of airflow of heating unit, approximately 40".
- Kitchen Storage Room visual notification appliance at 30cd, area requires effective intensity of 60cd.
- Washer Room visual notification appliance at 15cd, area requires effective intensity of 30cd.

- Jordan House dining Room smoke detector spacing exceeds listing limits of detector in a room.
- Jordan House visual notification appliance at 15cd, area requires effective intensity of 30cd.
- Jordan House corridor smoke detector spacing exceeds limits of detector in a corridor, approximately 45'.
- Meguzee Meeting Room smoke detector spacing exceeds listing limits of detectors, an additional three smoke detectors may be required to meet spacing requirements.
- Meguzee Meeting Room visual notification appliances at 15cd and 30cd, area requires effective intensity of 95cd each in current configuration.
- Cedar River corridor (fire exit C2) does not have any smoke detection.
- Cedar River (Room #B146) smoke detector spacing exceeds listing limits of detectors in a corridor.
- S-Curve connecting Cedar River House to Grass Creek Cottage visual notification appliance at 15cd, line of sight concerns require an additional 15cd on opposite wall or ceiling mounted appliance.
- S-Curve end of corridor visual notification appliance greater than 15 feet.
- Area by clean supply room (A150) visual notification appliances at 15cd, area requires effective intensity of 30cd with current configuration or additional appliance installed.
- Corridor (fire exit D2) does not have any smoke detection.
- D-wing exit corridor visual notification appliance greater than 15 feet from end of corridor.
- No smoke detection in a space open to a corridor (Office # A116).
- No smoke detection in a space open to a corridor (Alcove by Lab #D149).
- Employee Lounge (D102) visual notification appliance at 15cd. In current configuration, an additional appliance at 15 cd is necessary to be installed on opposite wall or relocated to the ceiling to meet effective intensity requirements of the area and not be obstructed by room walls.
- Classroom (D104) visual notification appliance at 15cd, area requires effective intensity of 60cd.
- Storage (D118) visual notification appliance at 15cd, area requires effective intensity of 60cd.
- Glacier Living Room visual notification appliance at 75cd, area requires effective intensity of 95cd.
- Glacier Short Hall (Rm#C103) visual notification appliance greater than 15 feet from end of

corridor.

- No smoke detection in a space open to the corridor (Room C151 Office).
- Glacier Long Hall smoke detector spacing exceeds limits of detector in a corridor, apprx. 47 ft.
- No smoke detection by soiled linen, a space open to the corridor (Room C140).
- Glacier Long Hall, no smoke detection in a space open to the corridor (Maint. Entrance to courtyard).
- No smoke detection in a space open to the exit corridor (exit B1).
- Orchard Hill kitchen visual notification appliance at 30cd, area requires effective intensity of 60cd.
- Orchard Hill corridor visual notification appliances (2) obstructed by corridor lighting.
- Orchard Hill corridor by F14 visual notification appliance obstructed from view.
- Orchard Hill entrance corridor visual notification appliance greater than 15 feet from end of corridor.
- Orchard Hill Living Room visual notification appliance at 15cd, area requires effective intensity of 30cd.
- Lake Shore Cottage by elevator visual notification appliance at 15cd, area requires effective intensity of 30cd.
- Smoke detector by Lake Shore Cottage elevator less than three feet to air diffuser.
- No visual notification appliance within 15 feet from end of corridor by oxygen room.
- Visual notification appliance by room G20 greater than 15 feet from end of corridor.
- Antrim Lodge Den, visual notification appliance broken.
- Antrim Lodge No visual notification appliance within 15 feet from end of corridor by oxygen room.
- Spa Alcove, No smoke detection in a space open to the corridor.
- No smoke detector within five feet on either side of the smoke barrier doors by Room G12/G14, required on both sides where the depth of wall section above the door is greater than 24 in.
- Contractor indicated the design intent for this facility was to use open area smoke detection, acceptable in lieu of smoke detection within five feet of magnetic hold open devices when installed correctly, however, installation of smoke detector location and spacing exceeds listing limits of detectors in some areas and therefore the following item may also require

corrective action:

Smoke detectors shall be located within five feet of all magnetic hold open devices throughout the facility to achieve smoke barrier door release.

2. Update on retro fit of heating system- Radiant Heating Panels. Due to the LSC issues, I've instructed David Schulz to take the lead on the heating panel's project. He will provide update. 3. Admission Contract Update- phone discussion and revisions to contract with legal counsel on 7/9/15. After completion legal counsel will meet with our Admission / Billing team to discuss new verbiage and how to appropriately field questions from resident's and / or responsible parties. 4. Physician Services - Cheryl and I met with Dr. Mark Jackson's group on 7/7/15. They will be accepting new patients starting 8/3/15. The team consists of Dr. Pete Vial, MD; Dr. Mark Jackson; and Carol Holmden, ADP. We will be putting this in the August billing statements and in our Good Newsletter. Their services will also be available to MVA tenants, brochures have been distributed to that location. 5. Cheryl and Nursing Department is participating in an INTERACT project to track 30-day hospital re-admissions and training of nursing staff in clinical assessments. 6. Agreement with Township Ambulance Authority to allow their EMT students to shadow our staff for skills training in dealing with the elderly and dementia resident's. Also working on an agreement with Allied Ambulance to assist with I.V. insertion should we need it at Meadow Brook. 7. Corporate Compliant Update - See report put together by Kris School, Corporate Compliance Officer regarding FOIA Policy Updates. Records of Adoption for Board Chair signature. 7. I will be on vacation 7/17-7/26. David Schulz will be acting Administrator during this time.

Motion to approve Record of Adoption for revisions made to the HIPAA Privacy Policy Uses and Disclosures section made by Rick Teague, seconded by Michael Ballard, all yeas, motion carried.

Motion to approve Record of Adoption for Freedom of Information Act Procedures and Guidelines made by Rick Teague, seconded by Michael Ballard, all yeas, motion carried.

Cheryl Patton, Meadow Brook Director of Nursing gave updates to the Board on: 1. Currently interviewing applicants for the next CNA class that begins August 17, 2015. 2. Struggling with Nurse coverage. Need full-time midnight and afternoon nurses. 3. Supporting two nurse aides in the Tuition Reimbursement Program in the Nursing program. 4. Current census 121.

Moved to convene for break at 10:44 a.m.

Reconvene from break at 10:55 a.m.

David Schulz continued with reviewing with the Board the May 2015 Financial Reports:

1. Census: May 87.7% vs. April 87.1% YTD 86.7% and Budgeted at 96%.
2. Net Loss/Gain for May (\$30,825.00) vs. April (\$98,008) YTD 2015 (\$689,452.00).
3. Cost Per Patient Day for May \$343.60 vs. April \$363.99 YTD 2015: \$364.68.
4. Accounts Receivables Balance: May \$1,942,370.00 vs. April \$1,994,269.00 (49 days).
5. Private Pay Past Due Accounts: May \$274,212.62 vs. April \$312,337.55.
6. Restricted Funds Balances: May \$843,704.88 vs. April \$843,565.86.
7. Depreciation Fund Balances: May \$65,856.75 vs. April \$107,633.70.
8. General Cash Balance: May \$1,098,979.95 vs. April \$2,331,465.20.
9. Contingency Fund Balance: May \$1,489,452.80 vs. April \$1,489,266.47.
10. Meadow View Apartments Report: May \$3,944.95 vs. April \$3,966.70 with Occupancy at 75% YTD

\$26,915.10.

11. Review Actual vs. Budget Statement of Operations.

12. Review of 2016 Meadow View Apartment Budget.

Motion to approve proposed 2016 Meadow View Apartment Budget made by Rick Teague, seconded Michael Ballard, all yeas, motion carried.

David Schulz updated the Board on the Radiant Heat Panels and the retro fit circuit solution.

Motion to pay Meadow Brook bills, made by Rick Teague, seconded by Michael Ballard, all yeas, motion carried.

Motion to pay Meadow Brook Monthly Vouchers made by Rick Teague, seconded by Michael Ballard, all yeas, motion carried.

Motion to adjourn at 11:30 p.m. by Fred Harris, seconded by Michael Ballard, all yeas, motion carried.

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Fred Harris, Chair

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Patricia Simmons, Secretary to the Board