Study on the Wausau Manor

Stan C. Jones

Follow this and additional works at: https://digitalcommons.stritch.edu/etd

Part of the Business Commons

Recommended Citation
https://digitalcommons.stritch.edu/etd/1047
STUDY ON THE WAUSAU MANOR

by

Stan C. Jones

An Applied Management
Decision Report
submitted in partial fulfillment
of the requirements for the degree of
Master of Business Administration
Cardinal Stritch College
December 1990
This committee has approved the Applied Management Decision Project of Stan C. Jones.

Oliver K. Burrows, Case Study Advisor

Date

Robert C. Intress, PH.D.

Date

Larry McCarthy, M.ED., Third Reader

Date
<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>CASE SUMMARY</td>
<td>v</td>
</tr>
<tr>
<td>1 INTRODUCTION</td>
<td>1</td>
</tr>
<tr>
<td>2 DESCRIPTION OF WAUSAU MANOR</td>
<td>4</td>
</tr>
<tr>
<td>3 WAUSAU MANOR PROBLEM IDENTIFICATION</td>
<td>9</td>
</tr>
<tr>
<td>4 ANALYSIS OF THE WAUSAU MANOR PROBLEM</td>
<td>10</td>
</tr>
<tr>
<td>5 POTENTIAL SOLUTIONS TO WAUSAU MANOR'S PROBLEM</td>
<td>11</td>
</tr>
<tr>
<td>6 THE RESOLUTION OF WAUSAU MANOR'S PROBLEM</td>
<td>13</td>
</tr>
<tr>
<td>7 WAUSAU MANOR SURVEY RESULTS</td>
<td>16</td>
</tr>
<tr>
<td>Universal Question Results</td>
<td>16</td>
</tr>
<tr>
<td>First Impression</td>
<td>17</td>
</tr>
<tr>
<td>Current Impression</td>
<td>17</td>
</tr>
<tr>
<td>Manner in Which Problems or Concerns Were Dealt</td>
<td>17</td>
</tr>
<tr>
<td>Nursing Question Results</td>
<td>18</td>
</tr>
<tr>
<td>Professional Nursing</td>
<td>18</td>
</tr>
<tr>
<td>Nursing Assistant</td>
<td>18</td>
</tr>
<tr>
<td>Nursing Attentiveness</td>
<td>18</td>
</tr>
<tr>
<td>Nursing Skills and Knowledge</td>
<td>19</td>
</tr>
<tr>
<td>Nursing Response to Concerns</td>
<td>19</td>
</tr>
<tr>
<td>Dietary Question Results</td>
<td>20</td>
</tr>
<tr>
<td>Dietary Food Quality</td>
<td>20</td>
</tr>
<tr>
<td>Dietary Service Quality</td>
<td>20</td>
</tr>
<tr>
<td>Section</td>
<td>Page</td>
</tr>
<tr>
<td>-----------------------------------------------------</td>
<td>------</td>
</tr>
<tr>
<td>Environmental Question Results</td>
<td>21</td>
</tr>
<tr>
<td>Housekeeping and Maintenance</td>
<td>21</td>
</tr>
<tr>
<td>Building and Grounds</td>
<td>21</td>
</tr>
<tr>
<td>Furnishings and Equipment</td>
<td>21</td>
</tr>
<tr>
<td>Support Question Results</td>
<td>22</td>
</tr>
<tr>
<td>Recreational Activities</td>
<td>22</td>
</tr>
<tr>
<td>Business Office</td>
<td>22</td>
</tr>
<tr>
<td>Social Services</td>
<td>22</td>
</tr>
<tr>
<td>Administrative Question Results</td>
<td>23</td>
</tr>
<tr>
<td>Admission Information</td>
<td>23</td>
</tr>
<tr>
<td>Value Received</td>
<td>23</td>
</tr>
<tr>
<td>General Question Results</td>
<td>24</td>
</tr>
<tr>
<td>Reason For Selecting Wausau Manor</td>
<td>24</td>
</tr>
<tr>
<td>How Wausau Manor Was First Heard About</td>
<td>24</td>
</tr>
<tr>
<td>Least Favorable Experience</td>
<td>25</td>
</tr>
<tr>
<td>Most Favorable Experience</td>
<td>25</td>
</tr>
</tbody>
</table>

8 ANALYSIS OF SURVEY RESULTS........................................ 27

9 DEPARTMENT SUPERVISOR PROPOSALS................................. 30

10 BIBLIOGRAPHY.......................................................... 34

11 WAUSAU MANOR QUALITY EVALUATION SURVEY.......................... 35
Wausau Manor Nursing Home was the subject of this Applied Management Decision Report. The problem was the lack of quantifiable information regarding client satisfaction of the services and facilities provided by Wausau Manor. A survey was performed to provide quantifiable client satisfaction information.

The survey instrument consisted of questions that evaluated the quality of the various departments, services, and facilities of Wausau Manor. Some of the questions were designed to be tabulated into quantifiable information. There were also narrative questions that were designed to substantiate some of the answers. The selection of persons to be surveyed was done by the Medical Records and Nursing Departments. These departments evaluated each past and present patients' ability to complete the survey. The selection of each patient's significant other was screened by level of their involvement.

There were 310 surveys distributed to those who had been selected, and 180 completed and returned. This survey successfully accomplished the goal of obtaining objective and representative information necessary for sound, comprehensive management decisions. It provided valuable insight as to both strengths and weaknesses, as viewed by the public served by Wausau Manor. The decisions made were to obtain proposals from department supervisors where problems were identified.
INTRODUCTION

Objective measurement of value and quality of services in a nursing home was the purpose of this Applied Management Decision Report. Value and quality of services are important issues for any industry, and evaluation of these sets direction for successful management decisions. Unfortunately, it is often difficult to measure these, particularly in service related industries.

This Applied Management Decision Report focused on Wausau Manor, a 60 bed nursing and rehabilitation facility located in Wausau, Wisconsin. The purpose was to establish a quantifiable evaluation mechanism for Wausau Manor with which management could then measure the satisfaction level of consumers with various departments and services. With this information, management could then determine the strengths and weaknesses of the facility that might necessitate program changes as well as resource reallocation.

The original idea for Wausau Manor was conceived in 1979 by the partners who both own and operate it today. Due to the regulatory environment in which nursing homes operate, a series of events had to occur prior to actual licensure and start-up of operations in May 1984. In addition to land acquisition, Wausau Manor required approval from the Wisconsin Department of Health and Social Services (DHSS) to proceed. This approval process, known as Certificate of Need, has a two-fold purpose for the state. The first purpose is to regionally allocate nursing home beds based on demographics, in order to optimize utilization. The second purpose is to control cost, and since project
cost is a factor in the approval process, their ability to deny approval is an effective means of exerting control.

Cost and regulatory compliance are the State of Wisconsin's way of exerting tremendous control over the nursing home industry. Cost is ultimately translated into dollars paid to nursing homes for the provision of care to both Medicaid and Medicare patients. Statewide these two government pay sources constitute approximately 70 percent of the number of days paid by all pay sources. Although the state and federal governments are the dominant pay sources, they represent proportionately fewer dollars of revenue received by nursing homes compared to non-government sources. On average, Wisconsin nursing homes receive payment that covers only 90 to 95 percent of their cost per patient day from the Wisconsin Medicaid Program, the pay source for approximately 66% of their patients. Regulatory compliance, the other control, is enforced by the Bureau of Quality Compliance (BQC), a division of the DHSS. The BQC is responsible for the enforcement of both state and federal licensure and Medicare and/or Medicaid participation requirements. Failure to meet these requirements can result in fines, admission holds on Medicare and Medicaid patients, loss of Medicare or Medicaid contracts, or loss of licensure.

Due to regulatory influence, facilities are often in a position of being forced to make changes in buildings or equipment as well as provision of services in order to meet these regulatory requirements. Such changes frequently are made without a commensurate increase in payment from the Medicare or Medicaid programs.

Given a choice, most nursing homes would not participate in Medicare or Medicaid, because both programs drive up cost unnecessarily,
yet pay a disproportional share of cost. The benefits of participating in these programs are that they assist in increasing census and provide a contribution toward both fixed and variable cost. Consequently, nursing homes frequently are forced to rely on private paying patients to subsidize losses incurred in the provision of care to Medicare and Medicaid patients.

While the government develops and enforces requirements that must be met by all nursing homes, improved quality is a result of conscientious management and staff as well as competition where applicable. Competition serves as a catalyst that has the greatest potential to improve quality. The goals of this competition are increasing census, and increasing percentage of private paying patients.
DESCRIPTION OF WAUSAU MANOR

During the design phase of Wausau Manor, the partners considered a number of aspects that would influence the ultimate success of the facility. Cost was a conspicuous issue to everyone, however, the Medicaid program also has a limit on the number of building square feet per patient for which it will pay. Furthermore, Medicaid will not pay for private rooms, yet the partners believed that private paying patients would desire them. The decision was to place 20 percent of the beds in private rooms. Another design consideration involved location and square footage allocations to various departments. Since an emphasis on rehabilitation was thought important, 1200 square feet were allocated for physical therapy and 600 square feet for occupation and speech therapy. In contrast, most nursing homes of comparable size would have less than half this allocation of space for therapies. Heating and air conditioning, with controls in each patient room, and bright wallpaper in every room and hall were other examples of design and decoration considerations the partners considered important.

The decision for licensure changed shortly before opening from a typical skilled and intermediate combination facility to that of skilled care only. This change was consistent with the rehabilitation emphasis, and it came in the wake of a major Medicare hospital payment modification. Medicare had started phasing in a new payment system for hospitals called Diagnosis Related Groups (DRG). This payment system, when fully implemented, would pay hospitals a predetermined amount based on each patient's diagnosis, rather than number of days, services, tests
and other interventions which occur during hospitalization. This system was one that would reward a hospital for keeping costs down and discharging patients more quickly. The partners thought that both the hospital and community would benefit by Wausau Manor being able to accept and capably care for patients who were less stable or otherwise in need of more care and rehabilitation after their discharge from the hospital, than before the DRG system.

The decision to be licensed as a "skilled care only" rehabilitation facility impacted on many plans and projections. Patients at a greater acuity level require an increase in nursing staff, medical equipment, and supplies. Obviously this heightens demand for operating capital, both because of increased cost and also because of a more sluggish admission rate compounded by an increased discharge rate. The slower admission rate resulted from a more limited market in that Wausau Manor could not admit intermediate care patients. The higher discharge rate was a result of patient admissions with shorter life expectancies or high rehabilitation potential followed by a discharge to home.

Within six months of opening Wausau Manor had certified eight beds for participation in the Federal Medicare Program. Although at the time, Medicare participation involved approximately four percent of Wisconsin facilities, it was believed that participation would enhance Wausau Manor's ability to provide skilled nursing care and rehabilitation. Medicare would provide not only another payment source, but would also be willing to pay for services in excess of those paid by the Medicaid program.
In as much as Medicaid is a cost reimbursement system, it can take many months to establish a rate that is no longer subject to adjustments. In 1987, Wausau Manor's rate became fixed at an amount that would pay roughly 88 percent of the cost for providing care to each patient covered by that program. Nursing homes in the State of Wisconsin are heavily dependent on the Medicaid program as a payment source both in percentage of total nursing homes that participate, as well as in the high average percentage of patients in these nursing homes. As a result, the State of Wisconsin is a dominant customer and takes advantage of this position. Most facilities respond to inadequate Medicaid rates by increasing charges to private paying patients, lowering cost or a combination of the two.

At this juncture, not wanting to lower standards by reducing cost (which is predominately labor) nor desiring to increase private paying rates, the partners decided not to reestablish the annual Wisconsin Medicaid contract. Realizing that such a move was very sensitive and could receive considerable negative media attention, a campaign was formulated. The campaign message to the public was that Wausau Manor's management desired not to lower standards nor ask the private paying patients to subsidize the Medicaid program.

The management engaged an advertising agency to produce television and newspaper advertisements with this message. Additionally, local radio stations produced advertisements to be aired in conjunction with the television and newspaper coverage. Letters to doctors, hospital discharge planners, trust officers, the clergy, social services, home health agencies, patients, and families were prepared and mailed with full media coverage to commence the following day.
The campaign was a success in that there was no media retort on the subject and the message seemed to be understood and accepted by the public. Such was not the case on the part of other area nursing homes. Although Wausau Manor had only seven patients covered by Medicaid, the other facilities exhibited strong resistance to accepting transfers of these patients.

Over a course of several months, Wausau Manor experienced a sharp decline in census. Census went from an average of 93 percent occupancy to a low of 56 percent. Although a decline was anticipated, the facility was neither prepared for the magnitude nor duration of this decline (eleven months).

While there appeared to be a good possibility of successfully discontinuing the Medicaid contract, it would seem this apparent failure can be attributed to one major cause. Even though it was known that some patients would not come to Wausau Manor if their resources were likely to become exhausted in a short time frame, it was difficult to anticipate the level at which this would occur. To illustrate, one potential patient was 102 years old, had resources enough for five years, and optimistically chose to go elsewhere.

In the wake of what seemed to be a major strategic error, Wausau Manor entered into a new Medicaid contract with the State of Wisconsin in January 1988. Census began to climb again and by the fall of 1988, the facility was at capacity.

Medicaid assigned a new auditor of rates to Wausau Manor, who established rates more reflective of the level of services provided. By the end of 1988, Wausau Manor had recovered its losses, and was going into 1989 with both a respectable Medicaid rate and income statement.
In an effort to respond to changing patient needs, Wausau Manor has attempted to adapt the services it provides. The nursing department has the community's highest staff to patient ratio, with approximately 30 percent of these hours being professional nurses. Speech and occupational therapy are provided via contract, and physical therapy is provided on staff. In addition to standard seasonal dietary menu changes, Wausau Manor has a select menu and salad bar. The social and recreational program is directed by a certified teacher, and all other department heads and staff have been selected for their contribution potential toward the enrichment of patient life.

Although Wausau Manor is the smallest of five facilities in a community of nearly 700 nursing home beds, it has had since its inception more admissions and discharges than all the other facilities combined. Approximately 50 percent of the patients at Wausau Manor are short-term rehabilitation patients with an average stay of three-and-one-half weeks. While the majority of these patients are from the Wausau area, several have come from distant cities both within Wisconsin as well as other states.

Currently, the facility operates at capacity, with a waiting list for admissions. The patient mix by pay source is 70 percent private, 18 percent Medicaid and 12 percent Medicare.
Decisions involving issues which will directly or indirectly influence patients tend to be strictly qualitative. The problem is that strictly qualitative decisions often lack objectivity and measurability and fail to be representative of the people receiving services. For instance, certain decisions for change may stem from a regulation or interpretation of a regulation. Another source for change decisions may be complaints or compliments from patients or families. The last and most frequently used method is to observe and evaluate trends within the industry and then make change based upon experience. Program changes that are made strictly in reaction to regulatory influence, in response to a complaint or from a trend evaluation may be misdirected and fail to realize the objective of patient satisfaction and therefore waste scarce resources. Failure to meet the objective of patient satisfaction will negatively affect a facility's competitive position.

If a facility provides higher quality care than the competition, they are at a competitive advantage. With this advantage, they can both maintain higher average census, as well as a higher percentage of private paying patients.

Quality is also perceived by the employees who desire to work in an environment where they have the ability to uphold their own work standards. Where quality staff is a scarce resource, the development of a quality program places a facility at a further competitive advantage in attracting and keeping these individuals. The benefit is further seen in cost reductions which are a result of decreased staff turnover and greater efficiency.
ANALYSIS OF THE WAUSAU MANOR PROBLEM

Over the past several years, the nursing home industry has been the object of volumes of legislation, negative media attention and considerable regulation. While most of this attention has been intended to impact positively on patient care and quality of life, it tends to lead to a generic formula that fails to meet the needs of individual patients in a particular nursing home.

The administration and staff of many nursing homes, including Wausau Manor, often find themselves caught between trying to evaluate and meet the needs and wishes of patients and attempting to adhere to regulations that may conflict with this effort. These efforts tend to be less than cost effective and fall short of the goal of better serving the patient.

The evaluation of patient and family complaints or compliments can be very difficult. While any facility, including Wausau Manor, should always be receptive to any comments, caution must invariably be used. There is always the danger of misinterpretation of a comment which furthermore could be exaggerated or understated. Also since most patients and families make few or no comments, decisions made based upon comments may fail to be representative of the whole.

Observation and evaluation of trends has considerable merit if used by an experienced person or persons and every attempt to remain objective is made. It does not, however, provide quantifiable information specific to the individual facility. If a facility is going to better satisfy its patients, then there needs to be a measurable system to determine degree of satisfaction unique to that facility.
POTENTIAL SOLUTIONS TO WAUSAU MANOR'S PROBLEM

One approach to realizing an increased patient satisfaction would be to become versed on legislation and advocacy group views that impact on needed change. This approach will assist management in remaining within legal confines in addition to providing a sense of state and national posture.

Although acquaintance with legislation and advocacy views should be incorporated with any decision for change that affects patient care and services, alone it is purely reactionary. In addition to being reactionary, this approach fails to meet patient needs specific to a given nursing home. A failure to meet the specific needs of patients in an individual nursing home means the scarce resources extended are seemingly misappropriated. This reactionary approach toward achievement of increased patient satisfaction is not advised for the management of Wausau Manor.

A second alternative to gain insights into patient needs is an evaluation of patient complaints and compliments, as noted in the previous section. This course tends to be specific to the needs of patients within a particular nursing home. This approach is lacking in that it is clearly not representative of all the patients. Also, complaints tend to be predominate; therefore, it is less clear what a facility is doing that meets or exceeds patient expectations. Because data gathered in this manner is difficult to interpret and is not representative of all patients, it is not recommended for use at Wausau Manor.
The observation and evaluation of trends by a management team is a method frequently used. However, this method has two major disadvantages. First the results are heavily dependent upon the expertise of the person or persons making the judgment; second, there is no quantifiable information from which to measure the degree of satisfaction or dissatisfaction specific to a particular facility. Thus this approach is also not recommended for use by the management of Wausau Manor.
The management of Wausau Manor needs to determine the satisfaction level of patients specific to the facility. In order to achieve the best desired results, it is necessary that management have information that is measurable and shows both strengths and weaknesses of its staff, programs, and facilities. It is also important that this information be representative of all the patients at Wausau Manor.

In order to obtain the necessary information, a survey of both present and former patients and their significant others was performed. Due to the number of patients and former patients, sampling was recommended. The sample was large enough to attain a fair representation of all the patients and therefore statistically valid.

To attain a proper sample size, a review of all medical records for both present and former patients was performed. The actual extraction of names of patients surveyed was based upon the medical records and nursing departments' evaluation as to physical and mental ability of each patient. Together these departments reviewed every patient (approximately 800) who had been or currently was a patient residing at Wausau Manor. Their task was to determine both physical and mental limitations that would be prohibitive to completion of an accurate survey, based upon medical record information and personal knowledge of the individuals. From this evaluation process, a list was developed of appropriate patients to be surveyed. Based on this list, a distribution was made to patients currently residing at Wausau Manor and a mailing made to those who had left the facility. Those patients currently residing at Wausau Manor who were believed to be mentally able
able, but in need of assistance, were given a survey by the facility social worker who provided assistance with its completion.

The sampling of family members and friends of present and former patients was derived by a second review of the medical records. From these records, a list of names and addresses of significant others was developed. In order to help assure both an informed opinion as well as an increased probability of return, those significant others who were known to have no patient or facility involvement were omitted from the list.

Since this survey was going to be given to a targeted group of people who had a vested interest in the quality of services provided at Wausau Manor, it was believed likely to produce a higher return rate than many other surveys. Because of this vested interest, it was estimated that the return rate would be at least 25%. Believing that at least 75 surveys returned would bring about accurate and representative information, and considering a 25% return rate, it was determined that a minimum of 300 surveys should be distributed.

The survey instrument was developed by the administrator with consultation from department supervisors and was prepared so as to provide the capability of departmentalizing results. The answers to questions were intended to gain insight relative to the facilities as well as particular services provided by each department. Questions were avoided in areas where there existed no potential for changes, due to regulations or structure. For example, questions related to survey process or expansion of number of beds were not asked due to the lack of control by the management in these areas. The majority of questions were multiple choice, designed to be quantified, and correlated to a
rating system. In order to lend additional insight or clarity to the answers, some narrative sections on the survey were useful. After the results were tabulated, each department head devised appropriate corrective strategies.
The return rate on the survey was much higher than projected, providing 180 completed surveys out of 310 that were distributed. In addition to a return rate of 58 percent, there was a large number of respondents who completed the narrative sections of the survey. Each of the narratives that follow a rating question, based on recurrence, lent insight to specific areas of both strengths and weaknesses.

The survey results have been divided into sections to allow grouping of information. The survey instrument consisted of Universal, Nursing, Dietary, Environmental, Support, and Administrative categories and allowed for both a ranking of information and a narrative. In the category of General, the questions could not be tabulated but provided insight in evaluating referral sources and allowed input from the respondent on questions not asked. These resources proved most helpful because there was a strong recurring issue.

On each ranking question, a mean was determined based on a value assigned to each answer. The assigned values were; eight for excellent, six for good, four for fair, two for not so good, and zero for poor. Tabulation of these mean values for each question provided quantifiable information which aided in the development of recommendations.

**Universal Question Results**

There were three questions in this section, and they addressed first impression (3), current impression (4), and the manner with which problems are handled (17).
First Impression

The mean for first impression was 6.9, and there were three pages of narrative comments. Of the three pages, there were several recurring positive comments and no recurring negative comments. The recurring comments were: "helpful friendly staff", "brightness of the building", "cleanliness and lack of odor", "attractively decorated facility", "positive attitudes of both patients and staff", "small size facility", and "homelike atmosphere".

Current Impression

The next question addressed current impression. The mean was 6.42 accompanied by two pages of comment. The comments were again dominated by positive statements primarily directed toward satisfaction with care and staff attitude. There were a number of negative comments, many of which pointed toward isolated incidents. The only negative comment that recurred with any frequency was in reference to lack of availability of staff when needed.

Manner in Which Problems or Concerns Were Dealt

The next question addressed the manner in which problems or concerns were handled. This area had a mean of 6.4 and had 1.25 pages of comments. The comments were overwhelmingly positive. All of the germane answers spoke highly about the manner in which problems are handled.
Nursing Question Results

There were five Nursing questions; they addressed professional nursing (RN/LPN) (5), nursing assistants (6), attentiveness, skills and knowledge, and response to concerns (7).

Professional Nursing

The mean for professional nurse's performance was 6.67 and with 1.5 pages of narrative comment. The comments were dominated by positive accounts of the nurses being courteous, compassionate, capable and good communicators. The only recurring negative comment was about occasional delays in getting attention.

Nursing Assistant

The mean for nursing assistants was 6.17 with 1.5 pages of narrative comment. These comments were dominated by positive statements of the nursing assistants being caring and helpful; however, there were a number of negative statements ranging from that of misplaced clothing to staff hair styles. The recurring negative comments addressed waiting for assistance and that a few individuals lacked a positive attitude or seemed indifferent.

Nursing Attentiveness

The mean for the nursing department attentiveness area was 6.25 with 1.25 pages of narrative comment. The comments were dominated by positive statements about the caring, helpful nursing staff. However, these responses were more blended with statements ranging from that of staff always being there when needed to that of never being there when
needed. This area had two recurring negative themes, which were a delay in answering lights and turning lights off with the intent of returning and failing to do so.

Nursing Skills and Knowledge

The mean for the skills and knowledge area was 6.63 with one page of narrative comment. These comments appeared to be observations of isolated incidents. There were a number of statements of confidence in the nursing department's skills but also other statements that pointed to some staff being unfamiliar with certain pieces of equipment or procedures.

Nursing Response to Concerns

The mean for response to concerns was 6.3 with 1.25 pages of narrative comment. The comments were again filled with isolated accounts of both positive and negative experiences. The recurring areas were that of praise to some staff members for being extra attentive to expression of dissatisfaction with other's lack of attentiveness and call light delays.
Dietary Question Results

There were two Dietary Department questions and they addressed food quality (8) and service quality (9).

Dietary Food Quality

The mean for food quality was 5.75 with 1.75 pages in narrative comment. These comments were dominated by positive statements about the ability to select entree, and of the food being well prepared, attractively served and tasting good. The negative comments were that the food was occasionally cold, lacked variety or was overcooked, servings were small and the pureed food was not appealing.

Dietary Service Quality

The mean for dietary service quality area was 6.11 with one page of narrative comment. Comments in this area were generally negative with a strong recurrence toward food not being warm enough. There were no recurring positive comments.
Environmental Questions Results

There were three Environmental questions and they addressed housekeeping and maintenance (10), building and grounds (15), and furnishings and equipment (16).

Housekeeping and Maintenance

The housekeeping and maintenance area had a mean of 6.97 with one page of narrative comment. The comments in this area had no negative recurrence and a strong recurrence toward the building being clean, free of odor and well maintained.

Building and Grounds

The building and grounds area had a mean of 7.09 with 1.5 pages of narrative comment. The positive recurring comments addressed the scenic view from being on a hill, the attractive grounds, and the fact that the facility is well maintained. There was only one recurring negative comment and that was in relation to the parking lot and walkway ice situation in the winter.

Furnishings and Equipment

The furnishings and equipment area had a mean of 6.91 with one page of narrative comment. The comments were strongly positive. There were no recurring responses.
Support Question Results

There were three Support questions. They addressed recreational activities (11), business office operations (12), and social services (13).

Recreational Activities

The recreational activities area had a mean of 6.68 with 1.5 pages of narrative comment. The comments were dominated by positive statements about the activity variety and the rapport the Activity Director has with the patients and visitors. The only other recurring comment was directed toward an increased amount of activities for those who cannot participate in group functions.

Business Office

The mean for business office operation was 6.45 with one page of narrative comment. Comments concerning this area were positive and dominated by statements about the friendliness and helpfulness of the staff as well as an appreciation of their knowledge. There were no negative comments.

Social Services

The social services area had a mean of 6.98 with one page of narrative comment. This area was very positive with recurrence in reference as to being helpful, friendly and even wonderful. The only negative statements were in relationship to excessive admission paperwork.
Administrative Question Results

There were two Administrative questions and they addressed admission information (14) and value received (18).

Admission Information

The admission information area had a mean of 6.74 with one page of narrative comment. There were two recurring themes, one of which was that the information was good and well explained. The other theme was that the information was excessive and overwhelming to some.

Value Received

The mean for value received was 5.89 with 2.5 pages of narrative comment. The comments on this area had two strong recurring themes. The dominant theme was that the value was very good and that there was a recognition of the volume of services that are provided. These same responses frequently contained statements about Wausau Manor being superior to other facilities and that the price was lower than at many other nursing homes. The next theme, which was much less dominant was that the cost was too high and that lower would have been better. There was one other subject that was mentioned a few times and that was questioning why patients who require more care are not charged more and those requiring less care are not charged less.
General Question Results

Under the general category there were five questions, with one asking why Wausau Manor was chosen (1) and another indicating how they had heard of Wausau Manor (2). These two questions were intended to confirm referral sources and aid in advertising decision making. The last three questions were narrative and gave the respondent an opportunity to state views and recommendations in areas not otherwise discussed (19, 20, 21).

Reason for Selecting Wausau Manor

In the area related to reason for selecting Wausau Manor, the survey allowed for the selection of more than one answer from the choices offered. Bed availability was dominant, with 100 responses. Location was second with 66 responses. Reputation was third with 62 responses. Medicare availability was fourth with 42 responses. Written in the other category were responses which for the most part were supporting of one of the other answers.

How Wausau Manor was First Heard About

The area addressing how Wausau Manor was first heard about allowed for only one selection from the choices offered. Hospital Discharge Planner was the primary referral source with 59 responses. Physician was second with 31 responses. Friend was third with 27 responses. Family was fourth with 15 responses. Former patients was fifth with 13 responses. The responses written under other were much the same as friend, family and former patient.
Least Favorable Experience

Within the area of least favorable experience or impression at Wausau Manor, there were four pages of narrative comment. The answer with the highest recurrence was that they had no unfavorable experiences. There were 25 individuals who answered to that effect. Negative answers that fall within the nursing department involved delays in answering the call light (10), patients in need of a clothing change (6), misplaced clothing (5), improper use of equipment (3), impression of understaffing (3) and dirty linen not properly removed (2). Answers that involved dietary were related to food quality, consistency, and temperature (6). There were other answers that recurred but cannot be directly related to any one department. They were dissatisfaction with other patients (10), failure of the patient to improve (3), and lost or misplaced belongings (3). There were many other comments, but there was little or no consistency in them.

Most Favorable Experience

Under the area of most favorable experience or impression, there were 4.25 pages of narrative comment. The most favorable theme (55) involved statements about the staff's positive attitude, cheer, happiness, kindness, capability, and providing moral support. Additionally, there were five comments about the atmosphere being homelike and friendly and two about the respectful treatment of patients. Comments about quality nursing care totaled 24 and other nursing-related comments included the rehabilitation of patients (9) and counseling of the family by nurses (3). Recreational Activities received 20 positive comments with specific topics such as parties,
public parking by two. Several other miscellaneous comments were
difficult to evaluate or categorize.
The survey information indicates that the overall performance and satisfaction level of Wausau Manor, as judged by the patients and their families, with a mean of 6.52 was very good. There appeared to be no overwhelming problem areas and one towering area of satisfaction. Wausau Manor's strongest point is the friendly, pleasant staff. This virtue is apparent in all departments. This high satisfaction level indicates that the preemployment screening and selection process that has been used in the past should continue. Efforts that have promoted job satisfaction and employee morale should be maintained.

The survey information should be provided to each department head for their review and input at a planning meeting.

At the planning meeting the housekeeping supervisor should provide a proposal for monitoring and maintaining the current standard. Since this department has performed to the satisfaction of those surveyed, no corrective action is needed.

Those surveyed indicated satisfaction that the professional nurses are caring and competent. However, the Director of Nursing should evaluate the scheduling, supervision, and training of the nursing assistants. A proposal should be presented at the planning meeting that addresses corrective action necessary to overcome the nursing department deficits in delays in attention to patients and nursing assistant training.

Those surveyed were satisfied with the select menu, attractively served meals, and the palatable food served by the Dietary Department. While this standard should be maintained, a proposal is needed by the
Food Service Supervisor addressing two concerns. The first concern is in regard to maintaining proper food temperature and the second deals with communication to patients and families about portion control and altered consistency. The food temperature proposal should include cost estimates if any new equipment is necessary and time estimates if additional hours are involved. The communication proposal should include a procedure for dissemination of information to patients and families whenever a physician order is received for a weight reduction, pureed, or a mechanical soft diet.

Building and grounds maintenance was generally considered very good. The proposal that the Maintenance Supervisor should bring to the planning meeting deals with maintenance of the visitor parking lot and walks in the winter. This proposal should include cost estimates if additional snow removal equipment is requested.

Both the Activities and Social Service Departments were judged very positively in regard to their congenial relationships with patients and visitors. The Activities Director should develop a proposal that addresses expansion of activities for patients who are unable to participate in group or active functions. The Social Services Director should develop a brief informational letter to be provided when inquiries for admission are received. This letter should explain the purpose and the time requirements for completion of admission paperwork.

Since all the departments at Wausau Manor are interrelated, each department head should consider the impact of each proposal on all other departments. At the planning meeting the Administrator and department heads can set goals and establish a monitoring system for each proposal.
Since those surveyed judged Wausau Manor to be a good value for the money paid, there appears to be latitude for rate increases should any proposal require additional resources.

Additional recommendations regarding advertising and private rooms are as follows: Any future advertising or brochures should promote Wausau Manor's location, reputation, and Medicare certification. All of these reasons were prominent in the survey as reasons for selecting Wausau Manor. Additional private rooms were also requested by a few of those surveyed. This should be strongly considered in any expansion plans.
DEPARTMENT SUPERVISOR PROPOSALS

The Housekeeping Supervisor's proposal was intended to monitor and maintain the current standard. The proposal stated that there would be routine monitoring of the work performed by each housekeeper, as well as evaluation of all intermittent projects, such as floor waxing, drapery cleaning and wall scrubbing. Since all of these actions are currently within the budget, there would be no additional financial impact.

The Director of Nursing's proposal was intended to resolve problems identified within the nursing department. There was included an evaluation of staffing levels which were believed to be adequate. Through monitoring of call lights and patient requests, peak demand periods were determined. Conflicting with these peak periods were routines lending to unavailability, such as patient showers and employee breaks. Rescheduling of these routines to slower periods was proposed.

Evaluation of training needs of nursing assistants in the Director of Nursing's proposal was as follows. These included a reemphasis on the priority of attending to patient needs with timeliness, answering call lights promptly, and the importance of returning to patients when called away. This was to be accomplished through incorporating these needs into in-service training provided by the facility's In-service Director. The training proposal also included a plan for the Physical Therapist's involvement, and specific instructions regarding unfamiliar pieces of equipment such as specialized braces and splints. After investigation, this seemed to be the area of concern addressed in the survey regarding proper use of equipment.
Also within the Director of Nursing's proposal, all supervising nurses were to be provided copies and explanation of the survey results. This would be to facilitate their monitoring and supervision of nursing assistants' performance specific to call lights, proper use of equipment and scheduling of break times and patient showers.

There should be minimal, if any, additional costs associated with the Director of Nursing's proposals. Since Wausau Manor employs an in-service director and physical therapist, and there currently exists state requirements for hours of training of nursing assistants, those proposals can all be incorporated without additional resources through curriculum adjustments.

The Food Service Supervisor's proposals were intended to correct problems identified related to food temperatures and communication to patients and families, of portion control and diets of altered consistency. The Food Service Supervisor performed temperature checks at locations throughout the facility. From these checks, it was found that all were within an acceptable range, with the occasional exception of meals served in patient rooms that were most distant from the kitchen. This was attributed to the additional time lapse between the tray set-up and the time the patient actually received the meal. Since these temperature drops were only slightly below the acceptable range, changes such as heated carts for transport or additional staffing intended to speed delivery time were believed excessive. Therefore, it was proposed that both plates and metal covers be pre-heated for all meals being sent out to patient rooms.
It was further proposed to prepare three form letters that address weight reduction diets, pureed diets and mechanically altered diets. Within these letters there would be an explanation that the special diet is per the doctor's order and an explanation of the health benefits derived from the diet. These letters would be mailed or provided to patients and/or family members each time the dietary department received one of these new orders.

Neither of these proposals would involve significant additional costs because there would be no additional equipment or staffing hours required to meet these proposals.

The Maintenance Supervisor's proposal addressed proper maintenance of visitor parking lot and walks in the winter. Within the proposal, it was suggested requesting of the current snow removal contractor that Wausau Manor be placed on a priority list for prompt snow removal. Since there existed a fair amount of competition between snow removal contractors within the area which were of comparable cost per hour, it was suggested pursuing an alternate contract if the current one could not accommodate Wausau Manor's priority need. Additionally, it was proposed that someone within the maintenance department more diligently maintain snow removal and sanding efforts. The Maintenance Supervisor was of the opinion that there would be no additional equipment needs and that current department personnel could adjust routines to accommodate the more diligent maintenance of the parking area and walkways.

The Activity Director's proposal was intended to address the need of patients who are unable to participate in group or active functions. Within this proposal was suggested the use of an evaluation tool which
could determine the functional level of each patient at Wausau Manor. Based upon this monthly evaluation of each patient, a more equitable distribution of active and inactive functions could be incorporated into the activities calendar. This would better recognize the needs of the changing patient populations at the facility. Since this would be an adjustment to, rather than addition of activity programs, no additional staff time would be necessary.

The proposal from the Social Services Director was intended to provide a better understanding of both the purpose and time requirement for completion of admission paperwork. The proposal was that a letter would go to each individual inquiring about admission to the facility. The letter would explain the reasons (regulatory) that the admission information is of such large volume, as well as address the estimated time required to complete this process.

All proposals were viewed from a total management perspective and found to be non-conflicting with other departments. Additionally, there was little or no impact on costs. Therefore, any minimal costs incurred could readily be absorbed by the facility. The proposals appeared to be viable and therefore were considered acceptable proposals by the management.

In conclusion, the survey that was done successfully accomplished the goal of obtaining objective and representative information necessary for sound, comprehensive management decisions. It provided valuable insight as to both strengths and weaknesses, as viewed by the public served by Wausau Manor.


WAUSAU MANOR QUALITY EVALUATION SURVEY

Comments that support your answer will be extremely helpful.

1. Why was Wausau Manor chosen for your nursing home stay? (circle all that apply)
   A. reputation           B. location
   C. bed availability     D. Medicare availability
   E. other

2. How did you first hear about Wausau Manor? (circle one answer)
   A. discharge planner at hospital
   B. doctor
   C. former patient
   D. friend
   E. family
   F. other

3. Please rate your first impression of Wausau Manor. (circle one)
   A. excellent  B. good  C. fair  D. not so good  E. poor

   Explain why:

4. What is your current impression of Wausau Manor? (circle one)
   A. excellent  B. good  C. fair  D. not so good  E. poor

   Please explain any change in your impressions:

Please rate your opinion of the services from each of the following departments. (circle one)

5. Nursing Professional RN/LPN
   A. excellent  B. good  C. fair  D. not so good  E. poor

   Comments or recommendations:

6. Nursing Assistants
   A. excellent  B. good  C. fair  D. not so good  E. poor

   Comments or recommendations:
7. Please rate the nursing department specifically in the following areas:

**Attentiveness:**
A. excellent  B. good  C. fair  D. not so good  E. poor

Comments: ________________________________

**Skills and Knowledge:**
A. excellent  B. good  C. fair  D. not so good  E. poor

Comments: ________________________________

**Response to concerns:**
A. excellent  B. good  C. fair  D. not so good  E. poor

Comments: ________________________________

8. **Dietary Food Quality**
A. excellent  B. good  C. fair  D. not so good  E. poor

Comments and recommendations: ________________________________

9. **Dietary Service Quality**
A. excellent  B. good  C. fair  D. not so good  E. poor

Comments and recommendations: ________________________________

10. **Housekeeping/Maintenance**
A. excellent  B. good  C. fair  D. not so good  E. poor

Comments or recommendations: ________________________________

11. **Recreational and Social Activities**
A. excellent  B. good  C. fair  D. not so good  E. poor

Comments or recommendations: ________________________________
12. **Business Office**
A. excellent B. good C. fair D. not so good E. poor

Comments or recommendations:

13. **Social Services/Admission - Discharge Coordinator**
A. excellent B. good C. fair D. not so good E. poor

Comments or recommendations:

14. How would you rate the helpfulness of the information that was provided to you at or prior to admission?
A. excellent B. good C. fair D. not so good E. poor

Comments or recommendations:

15. Please give your opinion of the facility's building and grounds.
A. excellent B. good C. fair D. not so good E. poor

Comments or recommendations:

16. Please give your opinion of the facility's furnishings and equipment.
A. excellent B. good C. fair D. not so good E. poor

Comments or recommendations:

17. How do you feel about the manner in which problems or concerns were dealt with in your contacts with Wausau Manor?
A. excellent B. good C. fair D. not so good E. poor

Comments:

18. Most people believe that nursing home care, as well as all health care, is expensive, however, how would you rate the value received in relation to the cost for the services received at Wausau Manor?
A. excellent B. good C. fair D. not so good E. poor

Comments or recommendations:
19. Please describe the least favorable experience or impression you have had at Wausau Manor:

________________________________________________________________________

________________________________________________________________________

20. Please describe the most favorable experience or impression you have had at Wausau Manor:

________________________________________________________________________

________________________________________________________________________

21. We want Wausau Manor to be the best that we can be. Please give any other comments or recommendations you have that may help guide us toward this goal.

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Thank you very much for your valuable time.