

# LOURDES SENIOR COMMUNITY BOARD RETREAT - AGENDA

**Date:** Tuesday, April 18, 2023

**Time:** 10:30 a.m. – 4:30 p.m.

**Location:** LRHC Chapel, 2300 Watkins Lake Road, Waterford

## *A Season for Strategizing*

A vision without strategy is an illusion.

Time	Item	Owner	Page
10:30 a.m.	• Welcome and Prayer	Brian Condit Rich Acho	4
10:40 a.m.	• Review Objectives and Agenda	Brian Condit	
10:45 a.m.	<ul style="list-style-type: none"> <li>• Industry Trends               <ul style="list-style-type: none"> <li>○ Evolution of Senior Living</li> <li>○ State of Senior Living Industry</li> <li>○ Master Planning</li> <li>○ Future Demographic Trends</li> </ul> </li> </ul>	Larry Kearney Jamie Timoteo	5-20
11:30 a.m.	<ul style="list-style-type: none"> <li>• Market Study Review for Independent Living Expansion               <ul style="list-style-type: none"> <li>○ Unit potential</li> <li>○ Penetration rates</li> </ul> </li> <li>• Financial Proforma Review               <ul style="list-style-type: none"> <li>○ Project program</li> <li>○ Project costs</li> <li>○ Key proforma assumptions</li> <li>○ Financial outcomes</li> <li>○ Sensitivities</li> </ul> </li> </ul>	Larry Kearney Jamie Timoteo	21-39
12:00 p.m.	• Lunch		
12:30 p.m.	• Breakout Groups to Discuss Pros and Cons	Larry Kearney Jamie Timoteo	40-41
1:00 p.m.	• Large Group Discussion/Recap of the Pros and Cons	Larry Kearney Jamie Timoteo	

# LOURDES SENIOR COMMUNITY BOARD MEETING – AGENDA

Time	Item	Owner	Page
2:00 p.m.	I. Vision Statement		
	A. Review Recommendations B. Board Members Choose New Vision Statement	Brian Condit	42
2:30 p.m.	II. Committee Reporting on Strategic Imperatives		
	A. Finance Committee –	John Noone	
	a. Technology Assessment & Strategy	David Krolikowski	
	b. Forward-Looking Financial Proforma		
	c. Insurer Contract and Relationship Strategy		
	d. Physical Plant Needs Inventory		
	B. Human Resources Committee –	Beth Cafaro	
	a. Workforce Assessment & Strategy	Rebecca Latta	
	C. Philanthropy Committee –		
	a. Development and Philanthropic Assessment & Strategy	Brian Condit Wendy Mosella	
b. Marketing and Competitor Assessment and Strategy			
D. Quality Resident Care Committee	Lynne Lepisto-Golling, RN, MS		
a. Home Health Provider	Maureen McGee		
b. Transition of Care/Care Management Approach			
3:30 p.m.	Break and Snacks – Leadership Team Excused		
<b>EXECUTIVE SESSION</b>			
3:40 p.m.	III. Report of the Dominican Sisters of Peace	Sr. Janice Bachman, OP	
3:50 p.m.	IV. Report of the Board Chair	Brian Condit	
4:00 p.m.	V. Report of the President and CEO	Rich Acho	43-47
4:10 p.m.	VI. Consent Agenda		
	A. Minutes of February 7, 2023		48-53
	B. Management reports		54-83
	C. Committee reports		84-86
	D. Testimonials		87-91
4:15 p.m.	Adjourn		

Lourdes Senior Community Mission Statement

Lourdes Senior Community, inspired by the gospel of Jesus and sponsored by the Dominican Sister of Peace, provides a broad continuum of care for older adults and their families. All who minister at Lourdes honor the uniqueness of each person with compassion, love, respect, and dignity.

***OPENING PRAYER***

***A Blessing for Spiritual Care  
Leaders***

May you recognize the  
importance of your work  
And be grateful for it.  
May you step lightly and with  
reverence  
Into another's space.

May your eyes be opened to see  
Another's pain,  
May your ears be attuned  
To the unspoken sufferings  
Before you.

May you always know the  
privilege it is  
To meet another soul,  
To touch another's  
Vulnerability.

May you walk gently  
And confidently.  
May creativity be yours,  
And newness be your friend.

May you live the day  
In peace,  
Knowing that I live it  
With you,  
In you,  
In the one you meet.

May you know joy  
As well as sorrow  
Hope as well as loss.

And may you always know  
What you do is holy.  
What you do is needed.  
What you do is healing.

Amen.

This blessing comes from the book, *Voices from the Journey*,  
authored by Sr. Juliana Casey, IHM



LOURDES SENIOR COMMUNITY

# Senior Living Industry Trends

April 2023

### **Objective #1**

- Inform the Board about recent trends in the Senior Living Industry

### **Objective #2**

- Review the Waterford Township market opportunity for additional independent senior living services
- Review high level financial feasibility of a proposed project

### **Objective #3**

- Discuss the pros and cons of a proposed campus expansion

# The Evolution of Senior Living

## Rethinking the Senior Living Continuum – *Anticipating Future Consumer Expectations*

**Easter morning 1900:** 5<sup>th</sup> Ave. New York City  
*Spot the Automobile*



Source: US National Archives

**Easter morning 1913:** 5<sup>th</sup> Ave. New York City  
*Spot the Horse*



Source: George Grantham Bain Collection.



# State of the Senior Living Industry

		Affordable	Independent Living	Assisted Living	Assisted Living Memory Care	Nursing Care Long-Term Care & Short-Term Rehab
<b>Average Resident Age</b>		80 Years *	83 Years	85 Years	85 Years	81 Years
<b>Average Length of Stay</b>		~ 9 Years	~ 3 Years	~ 2 Years	~ 1 Year	~ 112 days
<b>Service Offerings</b>	Shelter					
	Maintenance, Lawncare, Snow Removal	Real Estate	Real Estate	Real Estate	Real Estate	Real Estate
	Landry facility					
	Community Space	Amenity - Limited	Amenity - Extensive	Amenity - Extensive	Amenity - Extensive	Amenity - Extensive
	Transportation		Services	Services		
	Meals			Services	Services	
	Care services (dressing, medication, etc.)				Services	Services
	Dementia Care					
	Skilled Nursing					
<b>Average Monthly Service Fee:</b>						
	<b>Income Based</b>	\$3,700	\$5,800	\$7,400	\$9,000	

\* People living in affordable housing/public housing are aging. The average age of all affordable housing residents is 52 years of age. 1/5 of them are at least 80 years old. (Source: Urban Institute - The Future of Public Housing, Special Issue Facing Older Adults and People with Disabilities)

Sources: Green Street, 2023 Marcum 3-Year Nursing Home Statistical Review, Genworth



# State of the Senior Living Industry

## Rethinking the Senior Living Continuum

### Right Sizing - General Industry Benchmarks

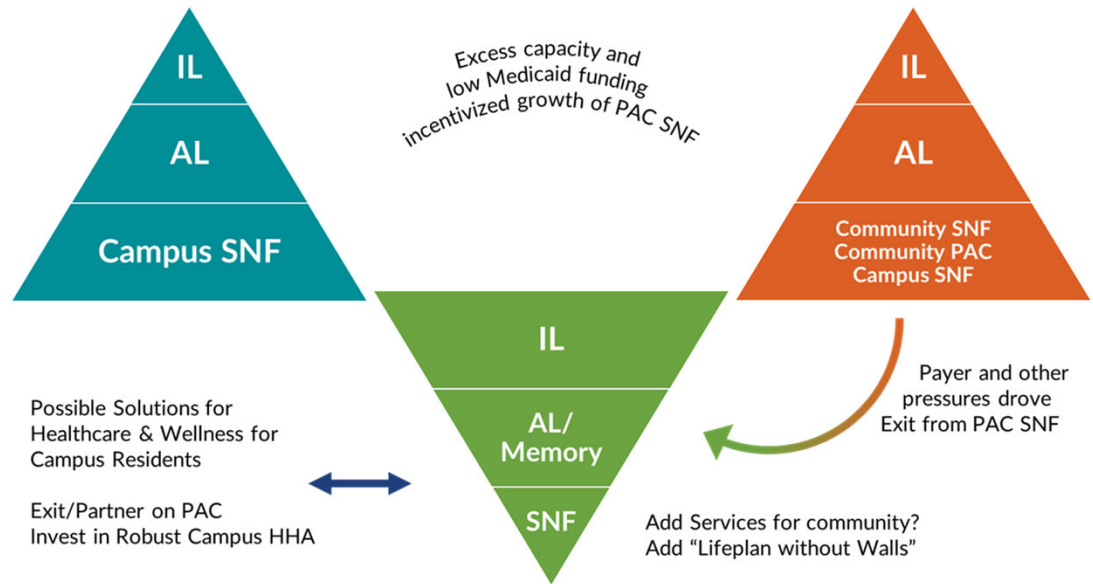
The following ratios are “rules of thumb” that should be analyzed in the context of the market and financial analyses.

#### Benchmark Ratio 1: $IL/(AL+MC)$

For every 1 AL and MC, there should be a minimum of 3 IL units.

#### Benchmark Ratio 2: $(IL+AL+MC)/NH$

For every 1 NH bed, there should be a minimum of 8 “senior housing” units (IL, AL, or MC).

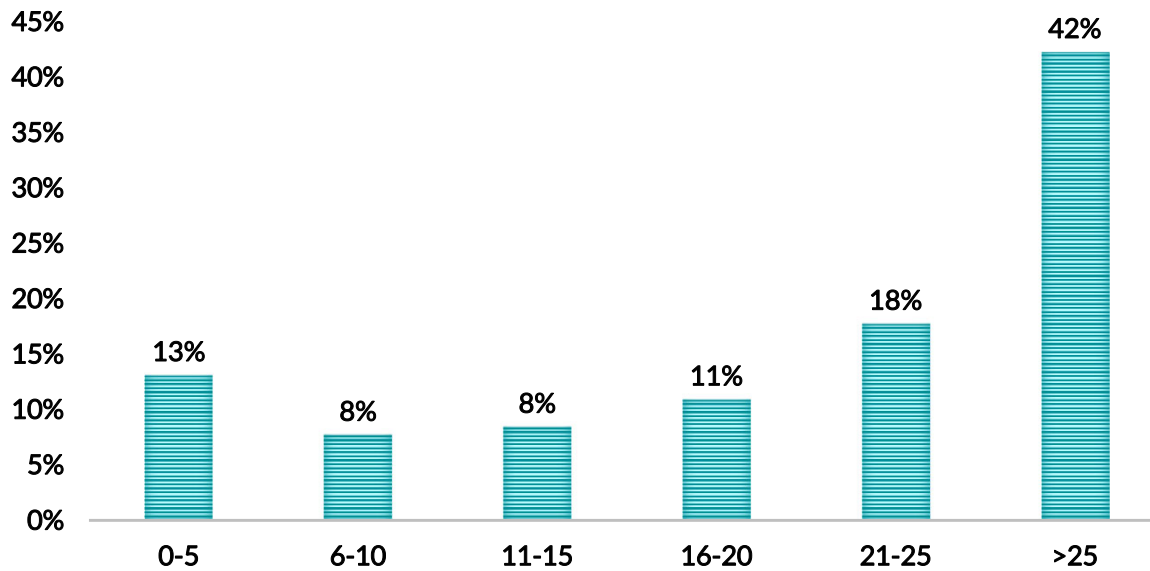




# State of the Senior Living Industry

## Senior Living Market Dynamics

PERCENTAGE OF SENIOR HOUSING PROPERTIES BY AGE GROUP



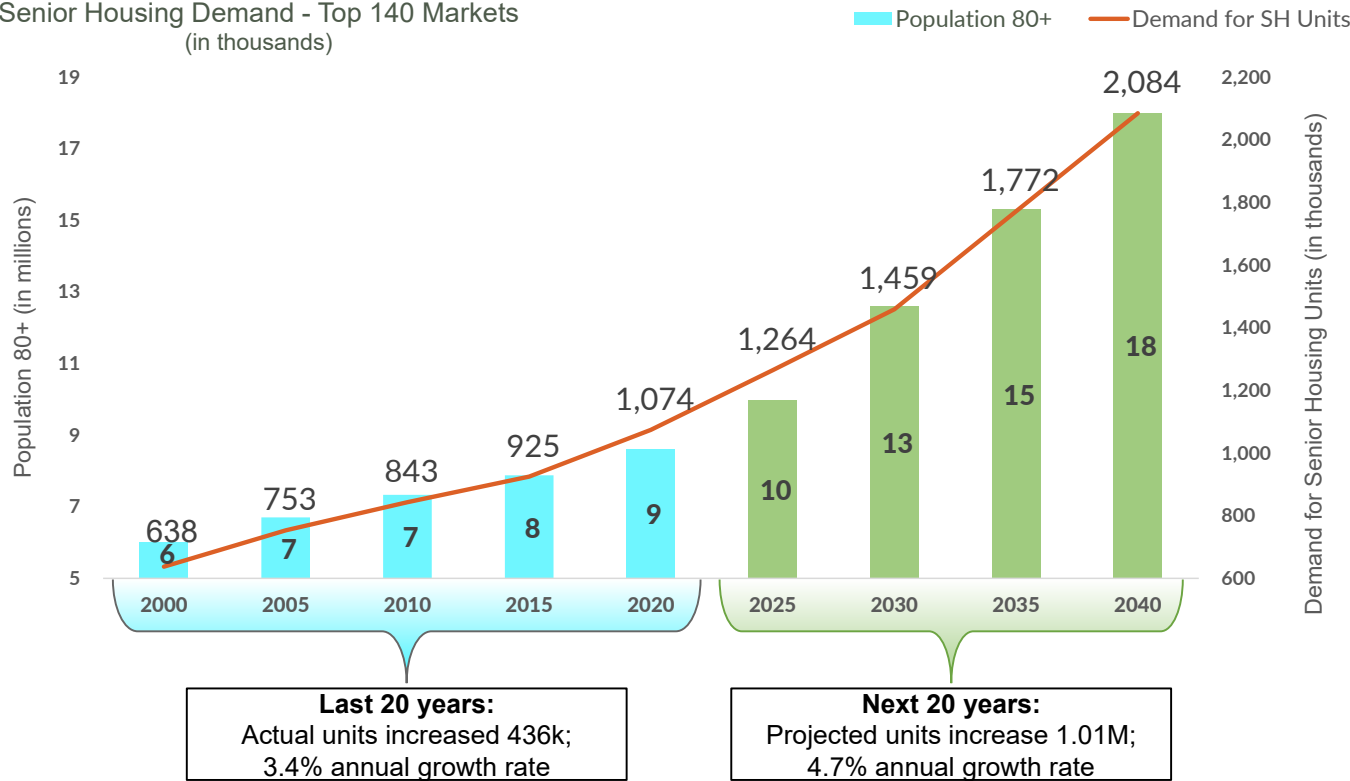
**Much of the existing supply is outdated:**  
60% of Senior Housing is more than 20 years old





# Growth for the Future – Long Term

Senior Housing Demand - Top 140 Markets  
(in thousands)



## Demographic Tailwinds:

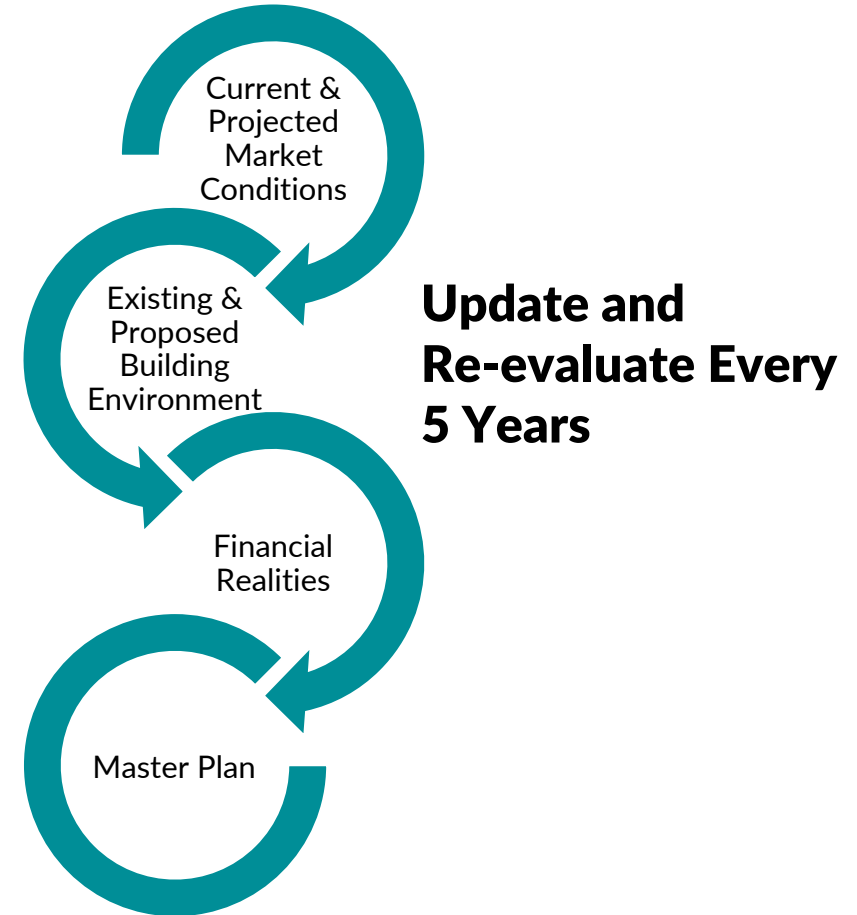
The Baby Boomers will be the Seniors Housing occupants; First Baby Boomers will be 80 in **2026**

Source: US Census Bureau and ESRI; Top 140 markets are 65% of the total US population Historical units are based on NIC MAP® Data Service assumptions; 2025-2040 projected units are calculated as: (population 80+) x (11% penetration rate) / (95% occupancy)



# Asset Repositioning & Master Planning

What is it?





# Asset Repositioning & Master Planning

## Why is Master Planning Important?

### Clear Vision for the Future

- Outlines the vision and goals for the development of a particular area or property, which can help guide decision-making and ensure that all stakeholders are working toward a common goal.

### Efficient Land Use

- Considers the most effective ways to use available land, considering factors such as population growth, economic development, and infrastructure needs. This reduces waste and inefficiencies.

### Stakeholder Collaboration

- Collaboration among a wide range of stakeholders, including community members, Board members, Donors, etc. This can help ensure that all voices are heard and that everyone is working together toward a common goal.

### Future Viability

- A well-executed master plan can help stimulate economic growth.

### Quality of Life

- Designed with the needs and preferences of the community in mind, promoting a high quality of life for residents and visitors alike



# Asset Repositioning & Master Planning

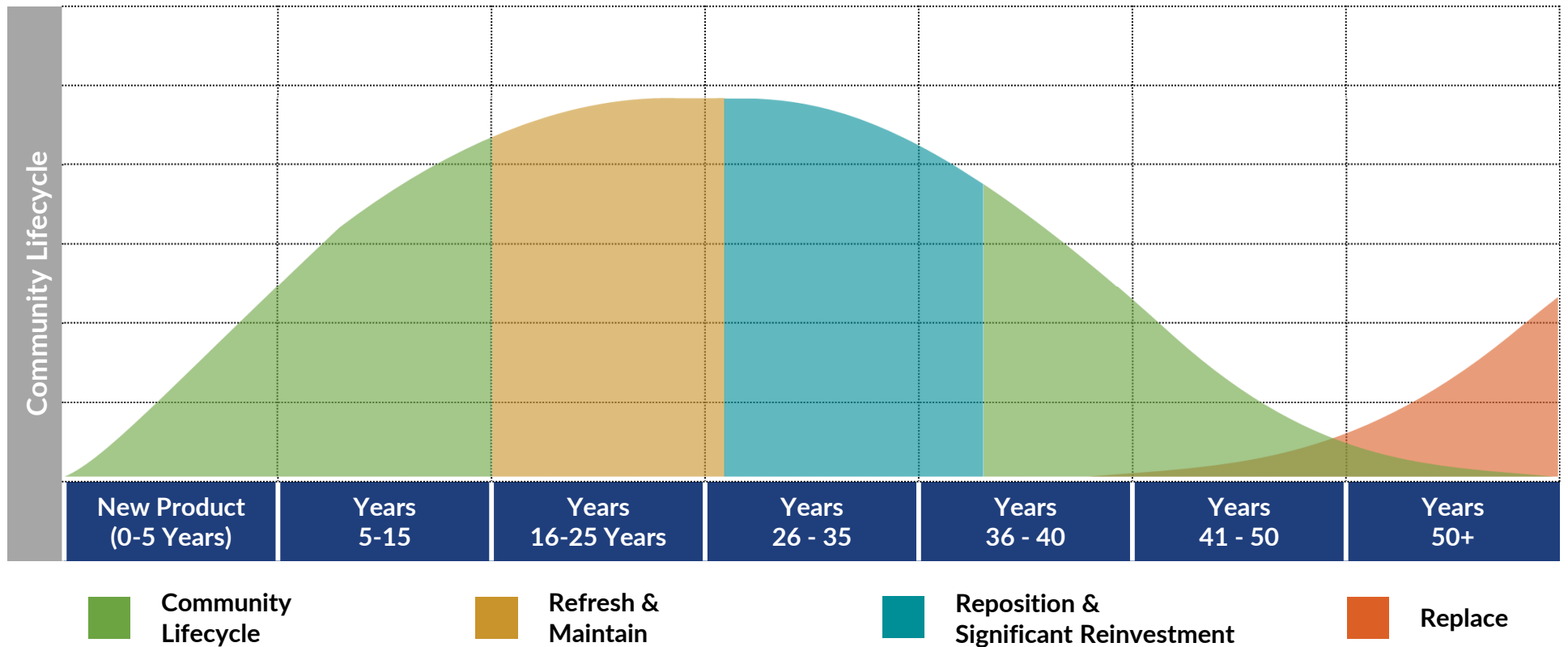
## Consistent Mistakes Made By Providers

- Ignore reinvestment in current assets
- Investments made on non-revenue producing spaces
- Reduction of SNF beds without offsetting lost revenue
  - Understanding future Payor Mix realities
- Increase in debt making it impossible to reinvest later
- Waiting too long and market opportunity is lost



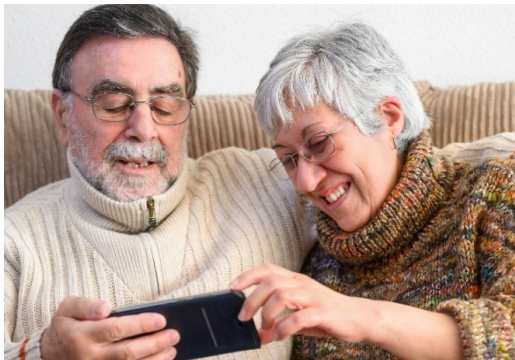


# Asset Repositioning & Long-Range Master Planning



# Future Demographics: *The Boomers are Coming*

## Evolving for the Boomer Consumer



#1

**88%** of senior households strongly agree that they would like to stay in their **CURRENT RESIDENCE** as long as possible, preventing a move to senior living as long as they can.

#2

**89%** of senior households strongly agree they would like to **remain in their COMMUNITY** as long as possible avoiding the need to move to a new city or location outside of their current city.

#3

The typical resident is an **87-year-old woman** with assistance needed for 2 - 3 activities of daily living (ADLS). Additionally, they have 2-3 of the top 10 chronic care conditions.

#4

Older adults will **make a decision** on where to live based on the following critical factors:

- ✓ Living Close to the Adult Child
- ✓ Value
- ✓ Experience
- ✓ Simplicity
- ✓ Convenience
- ✓ Customization

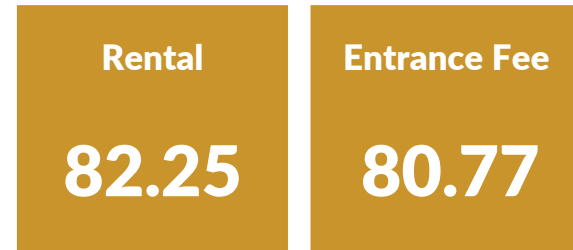


# Future Demographics: *The Boomers are Coming*

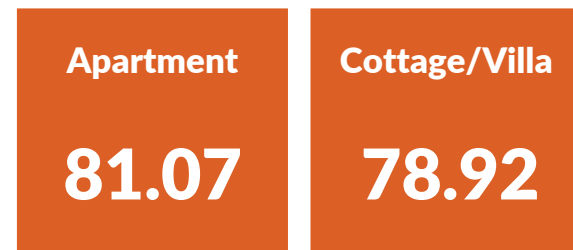
## Current Consumer – Age at Move in by Level of Care



## Age by Fee Structure/Contract



## Age by Home/Dwelling Type

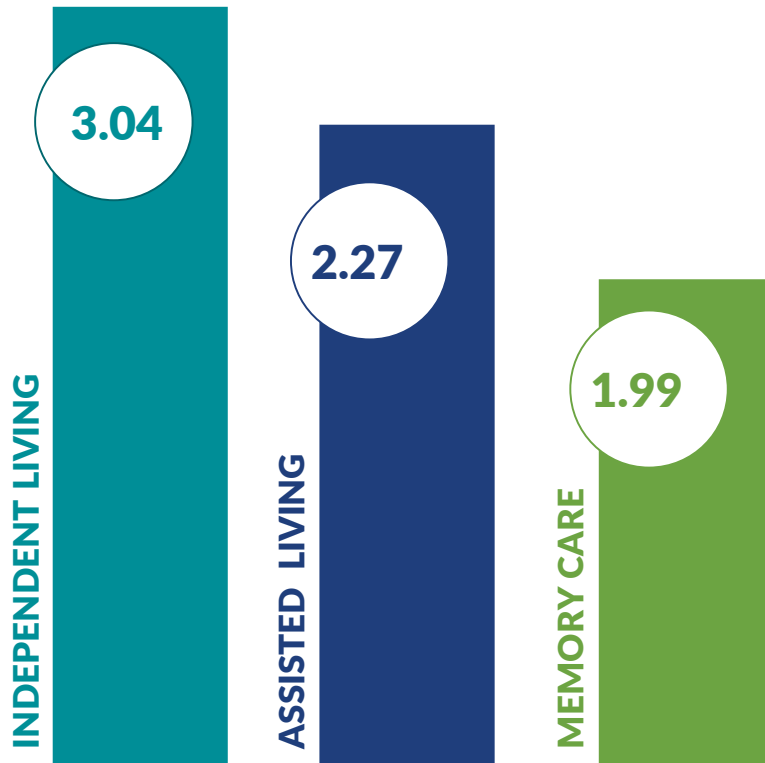


Source: 2022 The American Seniors Housing Association; Independent living, Assisted Living, and Memory Care Resident Profiles

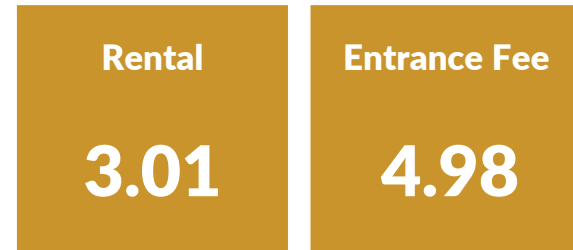


# Future Demographics: *The Boomers are Coming*

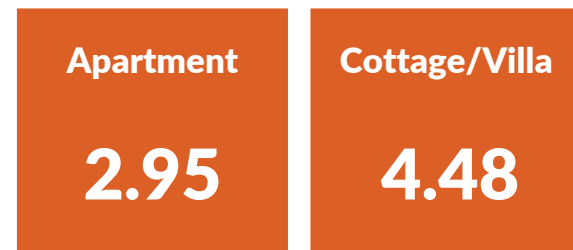
## Current Consumer – Average Length of Stay Level of Care



### ALOS by Fee Structure/Contract



### ALOS by Home/Dwelling Type

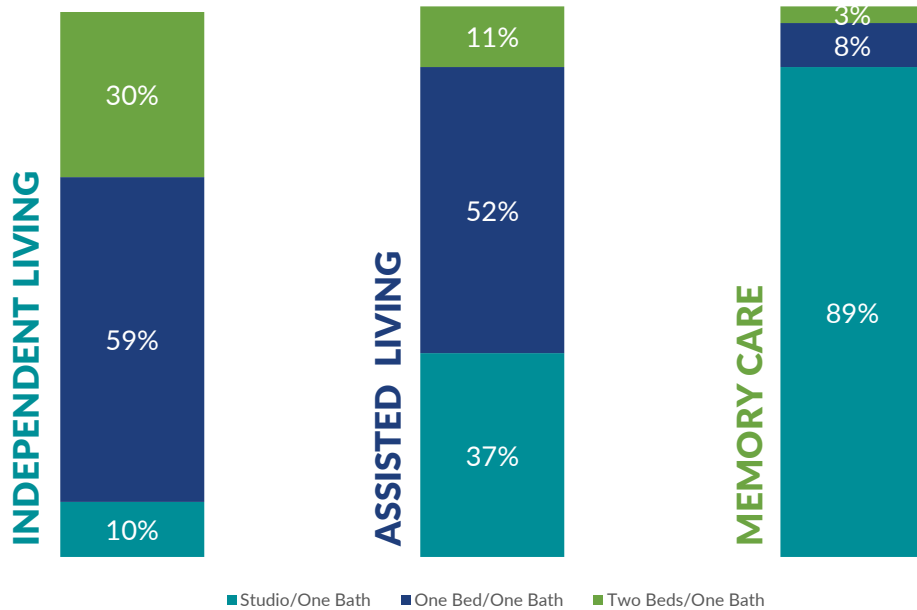


Source: 2022 The American Seniors Housing Association; Independent living, Assisted Living, and Memory Care Resident Profiles



# Future Demographics: *The Boomers are Coming*

## Current Consumer – Unit Mix by Floor Plan



## Avg. Size of Unit by Floor Plan



Source: 2022 The American Seniors Housing Association; Independent living, Assisted Living, and Memory Care Resident Profiles



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# Lourdes Senior Community

## MARKET STUDY AND FINANCIAL FEASIBILITY

## Why Develop New Independent Living at Lourdes?

**Demographic Tailwinds:** The Baby Boomers are coming; First Baby Boomers will be 80 in 2026.

**Market Study Supports Additional IL:** If Lourdes does not build it, someone else will.

**Additional IL will help Right Size the campus:** Lourdes is currently heavy in NH beds.

**The NH industry is experiencing declining utilization and occupancy:** This is due to:

- ✓ Shift to Home- and Community-Based Services:
  - Desire of the senior to remain at home for as long as possible or choose alternative care settings
  - Health care industry is offering more services to seniors in their own homes
  - Federal and state programs as well as payor sources are supporting programs and initiatives to push care out of the nursing home setting
- ✓ Decreasing hospitalization rates
- ✓ Decreasing length of stays in nursing homes
- ✓ Staffing shortages: current shortages will continue into the future

Oakland County, MI Work Force Population				
	2020	2030	2040	Growth from 2020-2040
<b>Total Population</b>	1,264,515	1,350,050	1,415,504	12%
<b>Work Force (20-64 Population)</b>				
Population Age 20-64	753,147	765,692	801,972	6%
Age 20-64 Pop. as % of Total Pop.	60%	57%	57%	
<b>75+ Population</b>				
Population 75+	91,411	133,573	163,026	78%
Age 75+ Pop. As % of Total Pop.	7%	10%	12%	
<b>Ratio of Work Force to Population 75+</b>				
Ratio of Work Force to Population 75+	8.2	5.7	4.9	-40%

Source: Michigan Population Projections by County, Michigan.gov

- 2000 to 2020 was the era of labor abundance due to having both the boomer and millennial workforces in the market concurrently
- In the 2020, the oldest boomers are aged 74 and either have retired or are retiring.

## Lourdes Senior Community

Lourdes Senior Community (LSC) and Plante Moran Living Forward (PMLF) have developed the following financial model to reposition the LSC campus. The repositioning plan includes adding a 40-unit independent living apartment building as well as 22 duplex / triplex style cottages (independent living) to the campus. The existing campus buildings and services would remain consistent with existing operations.

### Lourdes Senior Community Summary of Proposed Unit Configurations

	Existing	Proposed Projects	New
Independent Living			
Apartments	55	40	95
Cottages	-	22	22
Memory Care	20	-	20
Assisted Living	60	-	60
Skilled Nursing*	100	-	100
<b>Total Units</b>	<b>235</b>	<b>62</b>	<b>297</b>

\* - Lourdes is licensed for 100 skilled nursing beds; 23 beds have been designated as non-available for reimbursement purposes.

## Unit Mix Benchmarks

These ratios are “rules of thumb” that should be analyzed in the context of the market and financial analyses as well as historical utilization and admissions.

Unit Mix				
Care Level	Lourdes Current		Lourdes Proposed	
Independent Living	55	26%	127	45%
Assisted Living + Memory Care	80	38%	80	28%
Nursing Home	77	36%	77	27%
	212	100%	284	100%

Unit Mix Benchmarks		
Care Level	Lourdes Current	Lourdes Proposed
Benchmark Ratio 1: IL/(AL+MC)	0.7	1.6
Benchmark Target	3+	3+
Achieving Benchmark?	No	No
Benchmark Ratio 2: (IL+AL+MC)/NH	1.8	2.7
Benchmark Target	8+	8+
Achieving Benchmark?	No	No

The proposed IL includes:

- 55 existing
- 40 proposed apartments
- 22 proposed villas
- 10 proposed if Clausen repositioned

### Benchmark Ratio 1: IL/(AL+MC)

**For every 1 AL and MC, there should be a minimum of 3 IL units.**

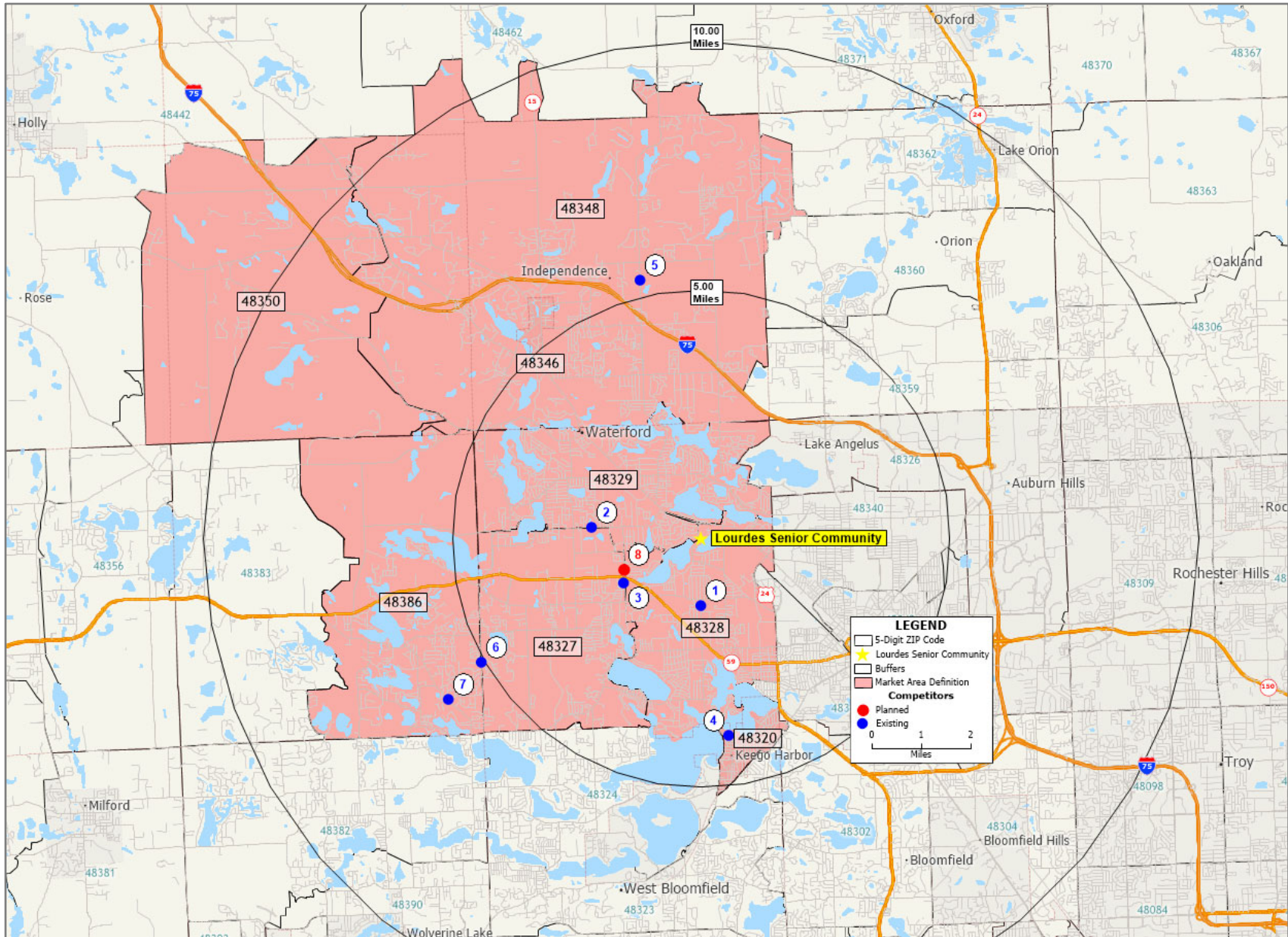
Lourdes does not achieve this benchmark with its current or proposed unit mix. However, the proposed unit mix is closer to benchmark.

### Benchmark Ratio 2: (IL+AL+MC)/NH

**For every 1 NH bed, there should be a minimum of 8 “senior housing” units (IL, AL, or MC).**

Lourdes does not achieve this benchmark with its current or proposed unit mix. However, the proposed unit mix is closer to benchmark.

## Map of Market Area and Competitors



# Market Study Summary of Results

## Summary of Results

### Unit Potential: Rental or Entrance Fee

<b>Independent Living:</b>	<b>2027</b>
Market Rate: \$84,000 screen	90
<b>SENSITIVITY</b>	<b>2027</b>
Market Rate: \$84,000 screen	80

### Demographics

	2023	2028
Total Households	61,588	62,017
Households Age 75+	6,886	7,280
HH 75+; Household Income \$35,000+	4,264	4,759
HH 75+; Household Income \$84,000+	1,549	1,910
Households Age 45-64	24,130	22,948
HH 45-64; Household Income \$75,000+	15,666	16,073
HH 45-64; Household Income \$100,000+	12,429	13,295
Median Owner-Occupied Housing Unit Value	\$288,773	\$318,806
Percent HH Age 75+ Owner-Occupied	80%	79%
Median 65+ HH Income	\$57,283	\$63,401
Median HH Income	\$82,425	\$89,598

### Supply

	Occupancy				Construction vs. Inventory
	Lourdes Senior Community 2023	Market Area Stabilized Properties 3Q2022	NIC Markets 4Q2022	Pre-Covid Market Area 4Q2019	
Independent Living	81%	86.3%	86%	88%	12% (Sensitivity: 25%)

### Penetration Rates

Independent Living: LSC 72-unit project	2025	
	Project: \$84,000 screen	5%
Benchmark	5%	
Gross Market: \$35,000 screen	2023	
		13.1%
Benchmark		15%
SENSITIVITY: LSC 72-unit project	2025	
	Project: \$58,000 screen	5%
Benchmark	5%	
Gross Market: \$35,000 screen	2023	
		13.1%
Benchmark		15%

Note: Relative to benchmarks, a low penetration rate indicates potential for increased supply in the market area. Relatively high penetration rates indicate little potential, or a surplus of inventory in the market area. However, higher penetration rates are not always indicative of saturated markets. It is important to consider penetration rates in combination with other indicators of market potential such as a market area's attractiveness as a retirement destination, tendency to remain in the area for retirement, proximity to family. Additionally, quality, design, size, age, and attractiveness of the existing supply in the market area as well as occupancy of existing supply are other factors to consider in conjunction with penetration rates.

## Overview

LSC would like to understand the market dynamics of the Waterford, MI, market area as it explores the possibilities of expanding and repositioning the campus located at 2300 Watkins Lake Road, Waterford, MI 48328.

## Unit Potential

The results show the market supports the LSC proposed IL project of 72-units.

The results show the market can support up to 90 additional independent living units (assuming an \$84,000+ income screen), these could be rental or entrance fee units. The \$84,000+ income screen is based on a minimum apartment rent at the proposed project of \$3,900 assuming a 60% rent-to-income ratio and 2 years of inflation at 4%.

Note there was a planned competitor 82-unit IL project identified that has stalled. This study includes a sensitivity analysis to show the impact if the 82-unit project were to be built. If the 82-unit project were built, the results show the market can support up to 80 additional independent living units, still enough to support the LSC proposed IL project of 72-units.

## Market Area Demographics

The market area has:

- Moderate number of senior households (HH) and adult child HH with high affluency
- Strong homes values and home ownership among seniors

## Market Area Supply

The market area has:

- Average IL occupancy
- Low amount of active development as evidenced by the 12% construction vs inventory (CvI) ratio (including the proposed LSC 72-unit project). If the stalled 82-unit project was built, the CvI ratio would be 25%.

## Market Area Penetration Rates

The IL penetration rates are below or aligned with the national benchmarks, a favorable indicator

## Market Attractiveness Score

The table below compares key market area indicators to benchmarks and scores all senior living in the market area. The MA scores a 3.6 out of 5. The strengths of the market area are the current year demographics (Criteria 1), the healthy competitive environment (Criteria 3), and favorable unit potential and penetration rates (Criteria 4). The market area has below average growth rates over the next 5 years (Criteria 2).

Market Score											
	Value	Score (Scale 1-5)	Weight	Weighted Score	Scoring Criteria					Benchmark	Source
					1	2	3	4	5		
<b>Criteria 1: Demographics 2023</b>											
HH 75+	6,886	2			<2,000	2,000-6,999	7,000-11,999	12,000-16,999	17,000+	9,635	1
HH 75+ earning \$35K+	62%	4			<49%	49%-54%	54%-59%	59%-64%	64%+	56%	2
HH 75+ earning \$50K+	44%	3			<34%	34%-39%	39%-44%	44%-49%	49%+	41%	2
HH 45-64	24,130	2			<21,000	21,000-27,999	28,000-34,999	35,000-41,999	42,000+	31,441	1
HH 45-64 earning \$75K+	65%	4			<51%	51%-56%	56%-61%	61%-66%	66%+	58%	2
Median Home Values	\$ 288,773	5			<\$155k	\$155k-\$174k	\$175k-\$194k	\$195k-\$215k	\$215k+	\$184,861	3
Median HH Income	\$ 82,425	5			<\$65k	\$65k-\$70k	\$70k-\$75k	\$75k-\$80k	\$80k+	\$72,191	2
Median 65+ HH Income	\$ 57,283	4			<\$45k	\$45k-\$50k	\$50k-\$55k	\$55k-\$60k	\$60k+	\$52,751	2
<b>Total Score</b>		<b>4</b>	<b>20%</b>	<b>0.8</b>							
<b>Criteria 2: Demographic Trends 2023 - 2028</b>											
% growth HH 75+	6%	2			<2%	2%-7%	7%-12%	12%-17%	17%+	9%	2
% growth HH 75+ earning \$35K+	12%	2			<10%	10%-14%	14%-18%	18%-22%	22%+	16%	2
% growth HH 75+ earning \$50K+	15%	2			<14%	14%-19%	19%-24%	24%-29%	29%+	21%	2
% growth HH 45-64	-5%	1			<-4%	-2% -4%	-2%-0%	0%-2%	2%+	-1%	2
% growth HH 45-64 earning \$75K+	3%	1			<6%	6%-8%	8%-10%	10%-12%	12%+	9%	2
% growth Median Home Values	10%	4			<6%	6%-8%	8%-10%	10%-12%	12%+	9%	2
% growth Median HH Income	9%	1			<9%	9%-11%	11%-13%	13%-15%	15%+	12%	2
% growth Median 65+ HH Income	11%	2			<10%	10%-12%	12%-14%	14%-16%	16%+	13%	2
<b>Total Score</b>		<b>2</b>	<b>20%</b>	<b>0.4</b>							
<b>Criteria 3: Competition</b>											
Construction vs Inventory: IL	12%	4			29%+	23%-29%	17%-23%	11%-17%	<11%	20%	1
Avg Occupancy: IL	86%	4			<82%	82%-84%	84%-86%	86%-88%	88%+	86%	4
<b>Total Score</b>		<b>4</b>	<b>20%</b>	<b>0.8</b>							
<b>Criteria 4: Unit Potential &amp; Penetration Rates</b>											
Unit Potential: IL	90	3			<60	60-89	90-119	120-149	150+	100	1
Gross Market Current Penetration Rate: IL	13%	4			18%+	16%-18%	14%-16%	12%-14%	<12%	15%	1
<b>Total Score</b>		<b>4</b>	<b>40%</b>	<b>1.6</b>							
<b>Market Score</b>				<b>3.6</b>							
<b>Desired Minimum Score</b>				<b>3.0</b>							

**Benchmark Sources:**

- 1 Average based on PMLF market study database
- 2 US average per Claritas
- 3 Average among the Great Lakes states: WI, IL, IN, MI, OH
- 4 NIC MAP® Data Service

## Summary of Supply

PMLF analyzed the competitor unit offerings (based on phone interviews and website reviews) and compared to Lourdes proposed project by unit type and size and finds Lourdes **proposed rental rates pricing for the new project is reasonable.**

Two **entrance fee options** were also tested. If a project is pursued, we recommend consumer research to understand what the seniors desire in unit and community amenities and what price they will pay, as well as what contract option is appealing to them. There are currently no entrance fee communities in the market area and there are very few in the larger Detroit metro area. It will be important to test the consumer's willingness to pay an entrance fee through direct consumer research.

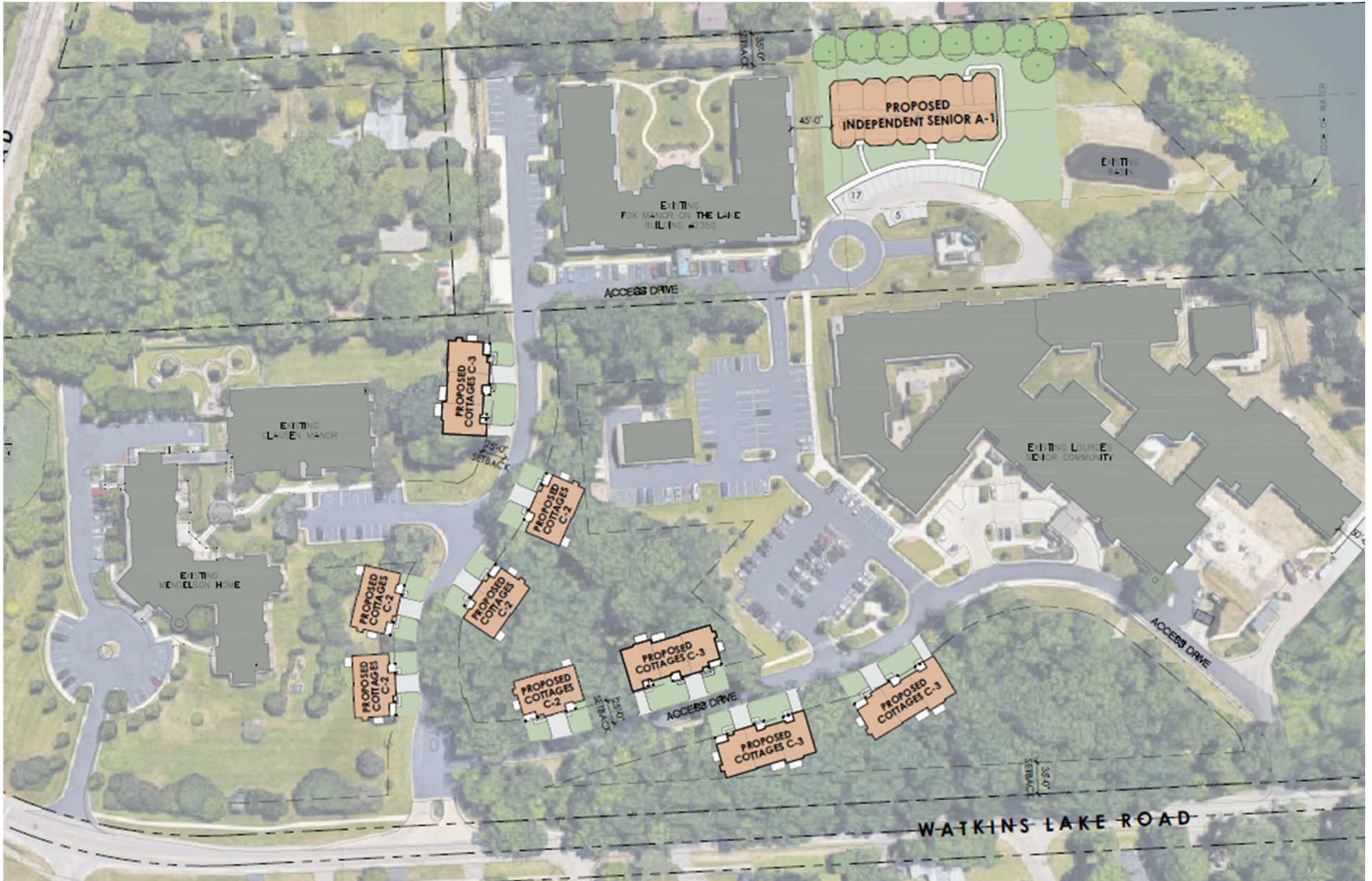
### Summary of IL Supply in the Market Area

	Sq Ft	Monthly Service Fee
<b>One-Bedroom</b>		
Lourdes Proposed Project	729	\$3,900
Lourdes Existing	662	\$2,663-\$2,801
Competitor Range	470-874	\$2,539-\$4,500
Avg per NICMAP		\$3,137
<b>Two-Bedroom</b>		
Lourdes Proposed Project	1,014	\$4,800
Lourdes Existing	870-925	\$2,971-\$3,750
Competitor Range	888-1,395	\$3,299-\$6,700
Avg per NICMAP		\$3,845
<b>Villas/Cottages/Homes Two Bedroom</b>		
Lourdes Proposed Project	1,110-1,190	\$2,400
Lourdes Existing	na	na
Competitor Range	1,020-1,080	\$1,954-\$2,295
Avg per NICMAP		na

### Entrance Fee Options

	Entrance Fee	Monthly Service Fee
<b>One-Bedroom</b>		
Declining Balance	\$58,000	\$2,294
90% Refundable	\$210,000	\$3,074
<b>Two-Bedroom</b>		
Declining Balance	\$80,000	\$2,595
90% Refundable	\$280,000	\$3,632
<b>Villas/Cottages/Homes Two Bedroom</b>		
Declining Balance	\$85,000	\$1,400
90% Refundable	\$244,000	\$1,900

# Proposed Campus Expansion Plan



## Program Detail – 40-unit IL Apartment Building

### Resident Units

- 13 – 1bed; 1bath (729 sf)
- 27 – 2bed; 2bath (1,014 sf)

### Commons

- Entry Vestibule
- Lobby/Living Room
- Resident Mail Area
- Activity / Arts and Craft Area
- Chair and Table Storage
- Resident Storage
- Public Restrooms (2)

### Administrative

- Marketing Office
- Conference Room
- Staff Restroom

### Infrastructure

- Trash Room (Main)
- Trash Room / Chute – 1 per upper-level floor
- Central MEP
- Upper Level Electrical – 1 per upper-level floor
- Housekeeping Rooms – 1 per floor
- Maintenance Office

## Program Detail – 22-unit Cottages

### Resident Units

- 22 – 2bed; 2bath (1,190 sf)
- 1 car garage and 1 parking apron for each unit

## Summary of Key Assumptions

The table below provides the key financial assumptions used in the financial analysis.

### Financing and Project Cost Assumptions

	40 Unit IL Apartments	22 Cottages
Interest Rate on Long Term Debt	6.50%	6.50%
Term on Long Term Debt	30 years	30 years
Interest only period	18 months	18 months
Capitalized Interest Period	18 months	18 months
Annual Debt Service Payment	\$1,092,000	\$178,000
Sponsor Equity (\$\$)	\$3,000,000	\$4,000,000
Sponsor Equity (% of Project Costs)	17%	47%
Interest Rate on Short Term Debt (Entrance Fees)	N/A	5.50%
Percent of First Generation EF used for Project Costs	N/A	90%
First Generation Entrance Fees	N/A	\$1,879,000
Date of Construction Start	8/1/2024	8/1/2024
Months of Construction	15.00	15.00
Date of Opening	11/1/2025	11/1/2025
Months of Unit Fill-Up	12.00	12.00

### Operations Assumptions

Beginning Balance Sheet	December 31, 2022
Operational Baseline Assumptions	Lourdes Senior Community 2023 Budget
Revenue Inflation	2-3%
Expense Inflation	3%

## Summary of Project Costs Assumptions

The table below details the estimated project costs including construction and other development expenses for each phase. The “Sources” represent the money to be used to pay for the costs or “Uses”.

### Sources & Uses

Sources	%	40 Unit Apartments	22 Unit Cottages	Total
Equity - First Contribution	26.3%	\$ 3,000,000	\$ 4,000,000	\$ 7,000,000
Fundraising	5.6%	1,023,000	477,000	1,500,000
Debt - Construction Draw	61.7%	14,147,000	2,303,000	16,450,000
Debt - Entrance Fee Bridge Loan	6.3%	-	1,691,000	1,691,000
<b>Total Sources</b>		<b>\$ 18,170,000</b>	<b>\$ 8,471,000</b>	<b>\$ 26,641,000</b>

Uses	%			Total
Construction	76.6%	\$ 13,811,000	\$ 6,603,000	\$ 20,414,000
Professional Fees	7.7%	1,381,000	660,000	2,041,000
Due Diligence	0.8%	129,000	93,000	222,000
FF&E & Technology	2.3%	490,000	127,000	617,000
Other Soft Costs & Professional Fees	3.5%	600,000	330,000	930,000
Owners Contingency	4.3%	770,000	364,000	1,134,000
Financing and Cost of Issuance	4.8%	989,000	294,000	1,283,000
<b>Total Uses</b>		<b>\$ 18,170,000</b>	<b>\$ 8,471,000</b>	<b>\$ 26,641,000</b>

## Summary of Project Costs Assumptions

A brief description of the project cost Uses are provided below:

### Construction

- Apartment building gross square footage of approximate 52,000. Construction costs are estimated to be approximately \$267 per square foot. Additionally, sitework costs are budgeted at approximately \$300,000 for earthwork, utilities, and finished sitework including landscaping, patios and courtyards, and sidewalks.
- Cottage construction is estimated to be approximately \$196 per square foot. Additionally, sitework costs are budgeted at approximately \$300,000 for earthwork, utilities, and finished sitework including landscaping, and sidewalks.

**Professional Services** – Consists of architecture and engineering fees budgeted at 7% of construction costs and Owner’s Representation fees budgeted at 3% of construction costs

**Due Diligence** – Consists of Geotech, environmental and civil surveys, and permitting fees.

**Furniture, Fixtures, and Equipment** – Consists of apartment and cottage appliances, common area furniture, outdoor furniture, and low voltage systems (sound, Wi-Fi, and communications).

**Other Soft Costs and Professional Fees** – Costs of marketing and selling associated with the lease up of the new apartment building and cottages.

**Contingencies** - Owner’s contingency is budgeted at 5% of construction costs and site work.

### Financing and Cost of Issuance

- Financing, bank origination, and legal costs associated with the financing are budgeted at approximately 1.2% of total financing for each project.
- Funded interest is assumed to be approximately \$604,000 for the apartments and \$314,000 for the cottages.

## Key Operating Assumptions – New IL Products

The table below provides the key financial assumptions for the revenue components of the proposed projects. The monthly service fees and entrance fees presented below are in 2023 dollars for comparison purposes.

### Revenue Assumption - New IL Products

Unit Type	SF	# of Unit	Monthly Service Fee	Community Fee	Entrance Fee - Non-Refundable	Occupancy
<b>40 Unit Apartment Building</b>						
1 Bed; 1 Bath	729	13	\$ 3,900	\$ 2,000	N/A	92%
2 Bed; 2 Bath	1,014	27	\$ 4,800	\$ 2,000	N/A	92%
Second Person Fee			\$ 500			
<b>22 Cottages</b>						
2 Bed; 2 Bath	1,190	22	\$ 1,400	N/A	\$ 85,000	95%

Monthly Service Fee includes the following:

**Apartments (consistent with Fox Manor):**

- Room and board
- 24-hour protection – In house security and Guardian Medical Monitoring
- Housekeeping and laundry of linens (2x/month)
- All utilities, including cable, WiFi, gas, electric, and water
- Dinner, 7 days a week, served at the Fox Manor dining room
- Property taxes
- Campus activities, outings, local transportation, and entertainment
- Routine maintenance support
- Social work support

**Cottages:**

- Room and board
- 24-hour protection – Campus security and Guardian Medical Monitoring
- Campus activities, outings, and entertainment
- Routine maintenance support
- Social work support

## Financial Results – New IL Product

The table below shows the financial impact of the two independent living projects on a standalone basis and each project’s ability to meet the its debt service requirements.

### Consolidated Stabilized Results - New IL Product

	Stabilized Year 1		
	40 Unit Apartments	22 Cottages	Total
<b>Occupied Units</b>	<b>36.8</b>	<b>20.9</b>	<b>57.7</b>
<b>Unit Capacity</b>	<b>40.0</b>	<b>22.0</b>	<b>62.0</b>
<b>Unit Occupancy</b>	<b>92%</b>	<b>95%</b>	<b>93%</b>
<b>Operating Revenue</b>			
IL Revenue	\$ 2,240,000	\$ 395,000	\$ 2,635,000
Other Revenue	29,000	-	29,000
<b>Operating Revenue</b>	<b>\$ 2,269,000</b>	<b>\$ 395,000</b>	<b>\$ 2,664,000</b>
<b>Existing Operating Expenses</b>			
Labor Expenses	\$ 121,000	\$ 60,000	\$ 181,000
Non-Labor Expenses	525,000	97,000	622,000
<b>Total Expenses</b>	<b>\$ 646,000</b>	<b>\$ 157,000</b>	<b>\$ 803,000</b>
<b>EBIDA and Other Revenue</b>	<b>\$ 1,623,000</b>	<b>\$ 238,000</b>	<b>\$ 1,861,000</b>
<b>Net Entrance Fee Proceeds</b>	<b>-</b>	<b>21,000</b>	<b>21,000</b>
<b>Cash Flow Available For Debt Service</b>	<b>\$ 1,623,000</b>	<b>\$ 259,000</b>	<b>\$ 1,882,000</b>
<b>Debt Service</b>	<b>\$ 1,092,000</b>	<b>\$ 178,000</b>	<b>\$ 1,270,000</b>
<b>Debt Service Coverage (DSC)</b>	<b>1.49</b>	<b>1.46</b>	<b>1.48</b>
<b>Capital Expenditure</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>
<b>Net Cash Flow</b>	<b>\$ 531,000</b>	<b>\$ 81,000</b>	<b>\$ 612,000</b>

## Financial Results – Lourdes Senior Community

The table below shows the financial impact of the proposed projects on Lourdes Senior Community’s ability to meet its debt service requirements for both existing debt and the debt incurred as a result of the new projects. The existing campus operating results are based on the 2023 budget and adjusted for inflationary assumptions in future years.

<b>Consolidated Stabilized Results</b>		
	<b>Baseline Year</b>	<b>Stabilized Year - 2027</b>
<b>Occupied Units</b>	<b>194.0</b>	<b>251.7</b>
<b>Unit Capacity</b>	<b>234</b>	<b>296</b>
<b>Unit Occupancy</b>	<b>83%</b>	<b>85%</b>
<b>Operating Revenue</b>		
IL Revenue	\$ 1,488,000	\$ 4,310,000
AL Revenue	3,774,000	4,248,000
MC Revenue	1,327,000	1,494,000
SNF Revenue	11,115,000	12,250,000
Other Revenue	459,000	545,000
<b>Net Revenue</b>	<b>\$ 18,163,000</b>	<b>\$ 22,847,000</b>
<b>Operating Expenses</b>		
Labor Expenses	\$ 10,350,000	\$ 11,831,000
Non-Labor Expenses	6,053,000	7,432,000
<b>Total Expenses</b>	<b>\$ 16,403,000</b>	<b>\$ 19,263,000</b>
<b>EBIDA and Other Revenue</b>	<b>\$ 1,760,000</b>	<b>\$ 3,584,000</b>
Investment interest/dividends	427,000	427,000
Contributions, net of Campus Fund Expenses	250,000	250,000
Net Entrance Fee Proceeds	-	21,000
<b>Cash Flow Available For Debt Service</b>	<b>\$ 2,437,000</b>	<b>\$ 4,282,000</b>
<b>Debt Service</b>	<b>\$ 1,001,000</b>	<b>\$ 2,298,000</b>
<b>Debt Service Coverage (DSC)</b>	<b>2.43</b>	<b>1.86</b>
<b>Capital Expenditure</b>	<b>\$ 600,000</b>	<b>\$ 675,000</b>
<b>Net Cash Flow</b>	<b>\$ 836,000</b>	<b>\$ 1,309,000</b>
<b>Days Cash on Hand</b>	<b>585</b>	<b>452</b>

## Operating Results – Lourdes Senior Community

The table below shows the debt service coverage ratio, net cash flow after debt service, and days cash on hand ratio over an eight-year period starting with the 2023 baseline year. The first year of stabilized operations of the new independent living projects is 2027.

<b>Financial Ratios</b>	<b>2023</b>	<b>2024</b>	<b>2025</b>	<b>2026</b>	<b>2027</b>	<b>2028</b>	<b>2029</b>	<b>2030</b>
<b>Debt Service Coverage Ratios</b>								
Funds Available for Debt Service	\$ 2,435,000	\$ 2,459,000	\$ 2,466,800	\$ 3,800,100	\$ 4,281,000	\$ 4,391,000	\$ 4,435,000	\$ 4,513,000
Annual Debt Service (principal, interest)	1,001,000	1,007,000	1,014,000	2,291,000	2,298,000	2,305,000	2,314,000	2,322,000
<b>Debt Service Coverate Ratios</b>	<b>2.43</b>	<b>2.44</b>	<b>2.43</b>	<b>1.66</b>	<b>1.86</b>	<b>1.90</b>	<b>1.92</b>	<b>1.94</b>
<b>Net Cash Flow After Debt Service</b>	<b>\$ 1,434,000</b>	<b>\$ 1,452,000</b>	<b>\$ 1,452,800</b>	<b>\$ 1,509,100</b>	<b>\$ 1,983,000</b>	<b>\$ 2,086,000</b>	<b>\$ 2,121,000</b>	<b>\$ 2,191,000</b>
<b>Days Cash on Hand</b>								
Total Unrestricted Cash and Investment	\$ 26,965,000	\$ 23,689,000	\$ 23,023,000	\$ 24,315,000	\$ 25,570,000	\$ 26,940,000	\$ 28,327,000	\$ 29,761,000
Total Operating Expense	18,524,000	19,368,000	20,492,000	22,648,000	23,371,000	23,943,000	24,531,000	25,135,000
Less depreciation	(1,708,000)	(2,083,000)	(2,668,000)	(2,692,000)	(2,717,000)	(2,743,000)	(2,770,000)	(2,797,000)
<b>Total Expense</b>	<b>\$ 16,816,000</b>	<b>\$ 17,285,000</b>	<b>\$ 17,824,000</b>	<b>\$ 19,956,000</b>	<b>\$ 20,654,000</b>	<b>\$ 21,200,000</b>	<b>\$ 21,761,000</b>	<b>\$ 22,338,000</b>
<b>Daily total expense</b>	<b>46,071</b>	<b>47,356</b>	<b>48,833</b>	<b>54,674</b>	<b>56,586</b>	<b>58,082</b>	<b>59,619</b>	<b>61,200</b>
<b>Days Cash on Hand</b>	<b>585</b>	<b>500</b>	<b>471</b>	<b>445</b>	<b>452</b>	<b>464</b>	<b>475</b>	<b>486</b>

## Operating Results – Lourdes Senior Community

The table below provides sensitivities to certain assumptions to show the **individual** impact on operations and debt covenant calculations. The sensitivities presented are as follows:

**Sensitivity #1** – Assumes a \$3M increase in the equity contribution to fund the project costs. Total equity provided by LSC would be \$10M.

**Sensitivity #2** – Assumes a 90% refundable entrance fee contract for the Cottage units. The entrance fee is changed from \$85,000 non-refundable to \$244,000 90% refundable and the monthly service fee is changed from \$1,400 to \$1,900.

**Sensitivity #3** – Assumes a non-traditional financing arrangement in which the long-term debt is funded at a lower interest rate. The assumed rate is 4%.

**Sensitivity #4** – Assumes the Cottage units monthly service fee is reduced to \$1,000.

Financial Ratios	Baseline	Sensitivity #1	Sensitivity #2	Sensitivity #3	Sensitivity #4
	2027	2027	2027	2027	2027
<b>Debt Service Coverage Ratio</b>					
New IL Only	1.48	1.81	1.92	1.99	1.39
Consolidated LSC	1.86	2.07	2.13	2.17	1.81
<b>Days Cash on Hand</b>	452	411	474	473	449
<b>Net Cash Flow</b>	\$ 1,309,000	\$ 1,541,000	\$ 1,640,000	\$ 1,632,000	\$ 1,196,000



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# LOURDES SENIOR COMMUNITY

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### Critical Questions to be Answered:

Q1: What aspects of the proposed project do you think would most contribute to the ongoing success of Lourdes?

Q2: How does this scenario further the mission of Lourdes?

Q3: Is there something you would change in this proposed project?

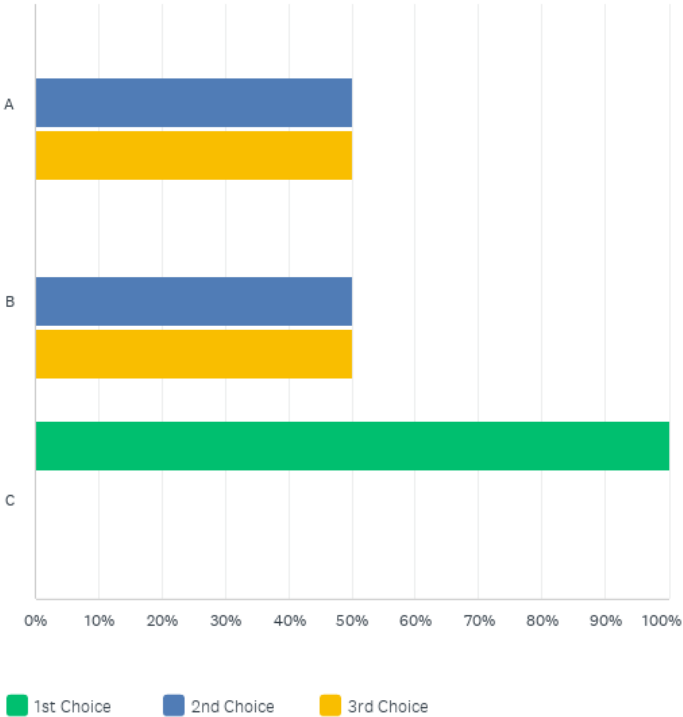
# LOURDES SENIOR COMMUNITY

Q4: In what other ways do you think this scenario would affect the current Lourdes organization, both positively and negatively? (e.g., occupancy, financially, reputation, increased participation in other Lourdes services)

## LOURDES SENIOR COMMUNITY VISION STATEMENT

Thank you for participating in choosing a new vision statement for Lourdes Senior Community. The three vision statements that were presented are:

- A. We aim to be the most trusted elder community in Southeast Michigan where residents can live, thrive, and feel respected in their homes.
- B. To be a trusted name for elder care in Southeast Michigan, treating residents and employees with quality, compassion, respect, and dignity.
- C. Lourdes' vision is to be the most trusted senior living service community in Michigan by providing comprehensive and individualized care to residents we serve by treating each person with compassion, respect, and dignity in a faith-filled environment.



Comments:

- 1. Need a consensus on geographic scope – Michigan or SE Michigan.
- 2. I would revise B to start with “To be the most trusted....”
- 3. Thank you for working on our new vision statement.

**Rich Acho, President and CEO**  
**REPORT TO THE LOURDES SENIOR COMMUNITY BOARDS**  
**April 2023**

**General**

Spring is finally here, and we could not be more excited for some warmer weather and sunshine. As we begin to transition seasons, our grounds crew will work to get our grounds looking great for the arrival of spring. I trust you are all excited for the winter season to be behind us.

I am now approaching my sixth month in the role as CEO, and I could not be happier with our achievements.

**CEO - Update**

Below is a snapshot of the items I am focused on:

- Waterford Township has taken away our property tax exemption on our Assisted Living, Memory Care Building, and Maintenance building.
  - We appealed the decision at the March Board of Review and are currently waiting on the outcome.
  - I have retained an attorney to assist with this process as I believe it will move to the Tax Tribunal Court and potentially appeals court – Erica Schell with Bodman is who we have retained to represent us.
  - I met the treasurer of Waterford, Steve Thomas, who had a loved one getting our rehab services, we discussed this, and I am hoping he can help assist us.
- Realigning the Lourdes campus to better fit the trends of the industry. We will discuss more in detail at the Retreat as Plante Moran Living Forward will be with us.
- We have signed a new agreement with a therapy company. This one seems to align more with our values and aligns better with our size. We have also negotiated them down to a reasonable rate as compared to our current partner. We looked at bringing therapy services in-house and given the difference in costs and added responsibilities to the team, it was better to keep this outsourced, but with a new partner. It is expected to be a savings of approximately \$60K annually, in addition to better care delivery.
- We are bringing our billing back in-house for the Lourdes building effective June 1<sup>st</sup>. This is a big step for us but is warranted. This will save approximately \$21K annually, in addition to us controlling the process and cash flow better.

- We have posted the Director of Nursing position and a new Assistant Director of Nursing position for Lourdes Rehab. Our current DON has expressed her retirement plans for later this year and our current clinician manager will be going contingent in June.
- We are planning a Diversity, Inclusion, and Equity speaker for our leadership team in the next couple of months.
- The independent driver we hired for Fox Manor has been received well by the residents and has transported many residents to various places.
- Workforce recruitment/retainment changes to speed up the hiring process.
  - We have begun the process of recruiting two international RNs from the Philippines to join Lourdes – we anticipate them arriving in about 8-12 months.
  - The statistics continue to indicate the worker shortage in the healthcare workforce will continue.
- New Marketing initiatives continue.
  - Looking at a TV station or a streaming service to air our commercial with
  - Postcards have been mailed out to homes in the surrounding area.
  - We continue to be more active on social media with daily posts, offerings, and other activities.
  - We have a senior life magazine that has been developed and paid for by advertisers which will be used as marketing material and provided to residents.
  - Wendy and I will be working on a Marketing and Development plan for Q2 2023.
  - We now have a QR code for Google reviews to increase positive reviews across the campus.
  - We have hired an innovative marketing company to provide Google SEO (search engine optimization) services to us and manage the website.
- Marian Hall in the Lourdes building remains closed.
  - The Marian Hall remains closed under the Non-Available Bed Plan until we concretely decide on the next steps.
  - We have submitted our third NABP which will leave 23 beds offline thru October 2023.
  - We will have one more opportunity to extend the NABP which would take us thru April 2024
- We have a donor that is paying to refresh the Mendelson Salon. His mother was a resident of Mendelson for several years and he wanted to honor her as she loved being glamorous. This project will start in April / May 2023.

- We are scaling back the healing garden which will be located next to the Lourdes Marian Hall wing. This will allow us to utilize the funds raised for this endeavor, but on a smaller and more manageable scale, and not have to focus on raising more funds for that project.
- We are looking at bringing our dining services back in-house for the Lourdes building. We have experienced continued issues with Undine, and additional costs than we agreed to. This is preliminary right now.
- We conducted a Fox Manor Poll of residents and some items we are looking at based on their feedback:
  - Adding washers and dryers in rooms
  - Adding a movie theater somewhere in Fox
  - Adding a putting green
  - Looking at expanding food choices

### **Dominican Sisters of Peace Founded Ministries Meeting**

Brian and I had the pleasure of attending a Founded Ministries Meeting in Columbus. It was a wonderful experience to learn about all the various ministries the Dominican Sisters sponsor. These include:

Ecology Centers      Farming      Education      Peace Centers  
Health care centers      Housing      Spiritual Life

It was nice to discuss best practices with the other two healthcare ministries, one in Columbus and the other in Kentucky. We also had the pleasure of hearing a strategic thinking presenter and guru, Ed Cortas. He was very insightful, and it aligned well with our strategic thinking for Lourdes' future.

### **Governance and Nominating Committee**

The committee met on April 4th, 2023. We discussed recruiting more Board members onto our board and are seeking the input of our current Board members. Please send any recommendations you may have to us. A couple of other highlights:

- We discussed and reviewed potential new board members and have made recommendations for board seats. There were three which I interviewed and presented and will be brought forth to the board.
- We put together Vision statements for review at the board meeting in April.
- We discussed the retreat day activities.

### **General Campus Updates**

COVID-19 – No new update to report.

### **Risk Management**

There is a potential lawsuit – We had a resident fall with a fracture who then left Lourdes and went to another nursing facility. We have not heard more about this.

We did have a resident family who removed their loved one from Clausen Manor and then asked for medical records and notes. The family member only lived with us for less than one month.

### **Information Technology**

We have migrated many employees onto M365 products, replaced about 20 aged devices, moved our WIFI into the IT room, and replaced our CORE switch in the IT room.

We have increased WIFI strength at each building and changed the WIFI access points to a new brand that has better capabilities. This cost was \$61K.

We have to perform network upgrades at each building over the next few years. This is necessary as the switches which house the network are aging and losing functionality. Mendelson and Clausen are complete with their upgrades.

We have eliminated fax lines across the campus and currently only have 5 of them across the campus. Any that were copper lines have been eliminated except one. The cost for a copper line through AT&T has gone up 400%.

We have begun replacing the lighting at Mendelson and will do this in phases.

### **Advocacy Group Participation**

I am the Board chair for a MEWA we created with Leading Age. We have rolled out our new insurance. We have received our full license as of April 2023 once all the parties funded a catastrophic fund required by the State.

I am part of a Senior Living Advisory Council with Marsh and McLennan. We meet quarterly to discuss the industry and the challenges we all are facing. We discussed technology and Diversity Equity and Inclusion at our meeting in April 2023.

### **Priests and Religious**

Currently, one priest (Father Lang) resides at Fox Manor. He is serving as our campus chaplain. We currently have one Dominican associate residing at Lourdes Rehabilitation and Healthcare Center. I have been in communication with Bishop Harrington who has expressed his desire to come live at Mendelson. We will be in communication later in April.

**Upcoming Events**

8/09/2023 – Lourdes Governance and Nominating Committee

8/29/2023 – Lourdes Board Meeting

**External Events**

4/06/23 – Leading Age Strategy Day

4/26/23 - 4/28/23 – Ziegler workshop in Nashville

5/15/23 - 5/17/23 – Leading Age MI conference in Kalamazoo

6/22/23 – Golf outing – The Fountains Golf Club

**Personal Time Off Events**

5/18/23 - 5/21/23 – Personal wellness in Cancun

6/28/23 - 7/9/23 – Personal wellness in Greece

# Ourdes Senior Community Boards

Tuesday, February 7, 2023, 1:30 p.m., LRHC Chapel

*Note: Includes Board of Directors for Ourdes, Inc., Fox Manor, Clausen Manor (Ourdes Alzheimer's Special Care Center), Joseph T. Mendelson Assisted Living Home (Ourdes Assisted Living), Dominican Health Care and Ourdes Campus Fund*

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## **BOARD MEMBERS PRESENT**

Richard Acho, President and CEO  
Sister Janice Bachman, OP  
Beth Cafaro (via Zoom)  
Brian Condit, Chair  
Linda Gifford (via Zoom)  
Henrietta Juras, MD  
Steven Kastner (via Zoom)  
Msgr. Michael LeFevre (via Zoom)  
Lynne Lepisto-Golling, RN, MS  
Joseph Manuszak  
Sister Peggy Martin, OP (via Zoom)  
John Noone, Secretary/Treasurer  
Barbara Mendelson, Vice President (via Zoom)  
Sister Barbara Rund, OP

## **STAFF PRESENT**

Colleen Burke, Director, Clausen Manor  
David Krolkowski, Director, Finance  
Rebecca Latta, Director, Human Resources  
Robin McClintock, CTRS, CASP, Director, Fox Manor and Mendelson Home  
Maureen McGee, Administrator, Ourdes Rehabilitation and Healthcare Center  
Jason Mize, Director, Plant Operations  
Wendy Mosella, Director, Development and Marketing

## **CALL TO ORDER**

The meeting was called together at 1:30 p.m. by Mr. Condit. A full quorum was present.

## **REMEMBRANCE OF SISTER SUE MCMAHON, OP**

Mr. Condit reflected on the impact Sister Sue McMahon, OP, had on the legacy of Ourdes and how much she will be missed.

## **OPENING PRAYER**

Mr. Acho led the group in prayer. The prayer was in honor of St. Valentine.

## **CAPITAL REPLACEMENT FOR MENDELSON HOME AND FOX MANOR**

Previously the Board had designated funds that were unrestricted within Mendelson Home and Fox Manor to cover capital replacement and bond payments for the two homes. This has been ongoing each year since 2006. The bonds are paid off for each building. Mr. Acho requested a rewording of the previous resolution to allocate a certain amount of the unrestricted funds every year to capital replacement needs, removing the wording for the bond payments. The resolution requests \$60K annually from the Mendelson unrestricted funds and \$50K from the Fox Manor unrestricted funds be moved over to capital replacement costs. The funds will be held in the Comerica investment portfolio until needed. The only thing changing is the general ledger account number. This will remain in effect until modified.

**MOTION: SR. JANICE BACHMAN, OP, MADE A MOTION TO APPROVE THE RESOLUTION AS STATED. SECONDED BY DR. HENRIETTA JURAS. ALL IN FAVOR. MOTION CARRIED.**

## **BOARD DESIGNATED FUNDS**

Historically, a resolution was put into place at the beginning of the capital campaign for the rebuilding of the skilled nursing facility. The resolution stated that all incoming unrestricted funds would be used for the capital campaign. Now that the rebuild is complete, the request is for the unrestricted funds be designated for the healing garden. \$129K has been raised thus far for the healing garden. Estimates are at \$305K to complete. In 2022, \$46K was received in unrestricted funds. This will be transferred to the healing garden account. The proposed resolution requested that all incoming unrestricted funds be allocated to the healing garden. Should a need arise

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that the Board deems as a higher priority than the healing garden, a new resolution can be written to supercede the healing garden resolution.

**MOTION: BETH CAFARO MADE A MOTION TO APPROVE THE RESOLUTION AS STATED. LYNNE LEPISTO-GOLLING, RN, MSN, SECONDED. ALL IN FAVOR. MOTION CARRIED.**

It was asked that the resolutions be numbered for future reference.

## LRHC PROJECT

Jason Mize reported that the demolition of St. Joseph hall is complete. The enclosure of the hallway leading to Marian hall from the front lobby is finished. Photos of the new area were displayed.

Quotes are being collected for areas of LRHC that need cameras. A camera and intercom system was installed at the front door for after hours.

Quotes are being collected for the repavement of the front entrance.

The Mendelson apartments are receiving a refresh with new cabinetry, vanity, countertops, flooring, paint, light fixtures, and receptacles. Photos were displayed of the newly finished apartments. The budget for 2023 includes the completion of five apartments at \$12K each. Windows in the dining room and activity room at Mendelson are being replaced in April.

## MANAGEMENT REPORTS

**Clausen Manor – Colleen Burke:** Census at Clausen Manor is at 19 with another resident moving in this week. The older resident is 101 years and the youngest is 62 years.

**Fox Manor – Robin McClintock:** Fox Manor has seven vacancies with six move-ins pending. The seventh apartment is due for a full remodel. Fox has had two residents on hospice pass away this year. The families stayed with them so that they could remain in their home until they died. One of the residents had been at Fox Manor for 11 years. Residents and staff made snow angels during the last big snowfall.

**Mendelson Assisted Living – Robin McClintock:** Mendelson Home has eleven vacancies. Several residents have transitioned to Clausen Manor and one was able to go back to Fox Manor. Four admissions are pending. A Place for Mom is the primary referral source besides word of mouth. Turnover was questioned as to why the number is so high. Ms. McClintock responded that with the number of jobs available in the community, a lot of the new employees stay with LSC for less than one year. Hospitals are now hiring unlicensed attendants, competing with the staff that Mendelson would normally attract.

**Compliance – Robin McClintock:** The excluded supplier statics spreadsheet was distributed to the Board members. There were no confirmed matches.

**Human Resources – Rebecca Latta:** In 2020, we saw the Great Resignation during the pandemic. In 2023, we are seeing the Great Rethink. Individuals that had resigned from their job are now rethinking that decision and deciding what they need to do going forward. The Bureau of Labor Statistics reported that 10.4 million jobs are open with only 6 million individuals looking. Application numbers have increased. LRHC had four RN/LPN openings that were aggressively recruited for. The contingent nurses heard that LRHC was working hard to fill the positions. Four of the contingent nurses committed to working full-time with LRHC. Two of LRHC's longterm

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CNAs have converted successfully to a four-day work week. This has allowed us to retain them and help them not feel as burnt out. We have heard positive feedback from these individuals who made the shift.

**Ourdes Rehabilitation and Healthcare Center – Maureen McGee:** The nursing home compare on the CMS website has refreshed and Ourdes is once again a 5-Star facility. Canterbury on the Lake is a 1-Star facility and Regency of Waterford is a 1-Star facility. Mr. Condit asked how marketing can benefit from this. The hospitals will be encouraged to look at the star ratings for LRHC and our competitors.

Trinity Health has asked LRHC to enter into a 50/50 partnership with them for managed care patients. Trinity has asked LRHC to take their managed care residents prior to receiving authorization. LRHC would become Trinity Health's (St. Joseph Mercy Oakland) preferred provider. Should the resident come to Ourdes and the authorization never be approved, LRHC would absorb 50% of the cost and Trinity 50% of the cost of their stay at LRHC. LRHC is in talks with the CFO of Trinity for clarity.

**Finance and Technology – David Krolkowski:** Year end 2022 was been closed. The total consolidated operating is a loss of -\$1.3 million. Revenue is down -\$2 million. Professional services were \$582K unfavorable to budget. Supplies were \$140K unfavorable to budget. December ended with an operating gain of \$82K. The timing of the ERC payment is expected in late 2023. We are expecting a credit of \$3.45 million. The financial statements will be modified to reflect that \$3.45M in 2022 as this is an audit requirement. The net asset number will change to a positive one. Direct care workers of SNFs continue to receive \$2.35 per hour additional from the State. Groups are asking that the governor expand this to assisted living direct care workers along with housekeeping, dietary, and laundry.

**Marketing/Communications/Development – Wendy Mosella:** The Donor Perfect database has been run through an address update software system. This will assist in capturing some of the lapsed donors and ensuring we have updated addresses for them so that our mailing efforts are going to the right place.

## **BOARD RETREAT PREPARATION**

The Board retreat is on April 18, 2023. The Governance and Nominating Committee will develop several vision statements that will be presented at the retreat for the Board to vote on. The strategic imperatives from last years retreat and the findings from the Committees assigned to the imperatives will be presented. Repositioning the Ourdes campus will be explored. This may include adding an additional independent living unit and/or adding ranch style homes. The profit margin on the independent living side of the business is much greater than the other communities due to very little staff requirements and no direct care. A market feasibility study will be done and presented at the retreat. The location of the retreat will be determined.

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## **EXECUTIVE SESSION**

### **DOMINICAN SISTERS OF PEACE**

The Dominican Sisters of Peace sponsor a ministry leader gathering annually. This is for their founded ministries. This year the gathering will include senior housing and healthcare organizations. This is the first time Ourdes Senior Community has been invited to the gathering. The healthcare sponsored ministries are comprised of LSC and two SNFs, one in Columbus and one in Kentucky. The gathering will be held February 21-23, 2023. Mr. Condit and Mr. Acho are attending, along with Sr. Peggy Martin, OP.

All founded ministries of the Dominican Sisters of Peace present an annual report to the Corporate Members each year. The annual report is due on March 3. Mr. Condit and Mr. Acho will meet with Sr. Janice Bachman, OP, and the Corporate Members on March 21 to discuss the report.

### **REPORT OF THE CHAIR**

During the second executive session of the November meeting the Board discussed moving to a metric based approach for the CEO's compensation plan. Measuring and setting targets to continuously improve Ourdes is the goal.

The Governance and Nominating Committee will continue to work with Mr. Acho on the retreat planning.

### **REPORT OF THE CHIEF EXECUTIVE OFFICER**

The new Development Director, Wendy Mosella, started with LSC on January 9. Her first item was to clean up the database. Ms. Mosella recommended the use of the address lookup software program. Postcards have been mailed consecutively for three months to homes in the area that met certain criteria. LSC has received one admission thus far from the postcard mailing. A senior living magazine is being personalized and printed for LSC. The magazine is free to LSC, supported by the individuals and companies who are advertising in the magazine. The magazines will be given to potential residents who tour with us, along with their families. The magazine will be taken to marketing events as well. The commercials are complete. Mr. Acho and Ms. Mosella are working with WDIV Channel 4 to develop a plan to air them. Mrs. Lepisto-Golling recommended advertising in the Vitality within the Oakland Press.

Waterford Township has requested Ourdes Senior Community's information to justify the property tax exemption status. This is requested every two to three years. As far as our understanding at the time, the only building in question from the township was the assisted living building. Mr. Acho then received an email from the assessor with further questions. Historically, each of the LSC properties have been tax exempt except for the independent living property which pays property tax on the parcel that the building occupies. SNFs, homes for the aged, and adult foster care homes are exempt from paying property taxes if they are also a religious community or a charitable community. Historically, LSC has fallen under the religious category. No longer can an organization be exempt for religious reasons unless their primary designation is to preach the word of God. Canterbury on the Lake has been paying property taxes on their entire community. Canterbury has been appealing to the township for four years. Recently, Canterbury won a ruling in the tax tribunal court that they are now property tax exempt on their SNF only. Waterford Township sent Mr. Acho a letter stating that LSC has failed to prove tax exempt status. Mr. Acho is appealing. There is no consistency or clarity across townships in the state as to who should or should not pay property taxes. Mr. Acho is part of a LeadingAge MI committee that has written legislation that is on the docket for the State of Michigan requesting consistency across townships in Michigan. Mr. Acho has been in contact with an attorney for the Archdiocese of Detroit who then sent him the case file on Canterbury. He has developed a list of items that sets Ourdes Senior Community apart from Canterbury and is preparing to go before the appeals board in March.

# Ourdes Senior Community Boards

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Mr. Acho is unwinding some past practices that are no longer working for the organization. Previously management received unlimited sick time which is no longer the case. Working from home is no longer an option. Mrs. Cafaro, Chair of the HR Committee, suggested that policies should be put into place for these practices.

## **COMMITTEE REPORTS**

**Human Resources Committee – Beth Cafaro:** The next HR Committee meeting is scheduled for February 8. An employee opinion survey will be on the agenda along with succession planning.

**Governance and Nominating Committee – Brian Condit:** Mr. Condit confirmed that the Finance Committee will be overseeing the property tax appeal. Kimika Garrett has resigned from the Board and the HR Committee. A survey went out in December requesting recommendations for potential new Board members. Five names were recommended and they will be vetted further by the Governance and Nominating Committee.

**Philanthropy Committee – Brian Condit:** The Philanthropy Committee has not met since the last meeting of the Board. A meeting date is a priority for the new director.

**Quality/Resident Care Committee – Lynne Lepisto-Golling:** Three policies were included in the Board packet for approval. The Committee will be prepared to discuss their assigned strategic imperatives at the Board retreat.

**Audit and Compliance Committee – Barbara Mendelson:** The Audit and Compliance Committee has not met since the last meeting of the Board. There has been no follow-up by a previous resident's attorney regarding a potential lawsuit. The Ethics Guide was distributed to each member to recertify. The Audit official begins February 27.

**Finance Committee – John Noone:** The Committee met on February 1. The financials through part of December were discussed along with the investment summary, the property tax implications, and the ERC.

**Continuing Support Fund Committees – Rich Acho:** The Committee met in December and authorized five new resident requests. The fund dropped from \$5 million to \$4.3 million during the recent stock market fluctuations.

## **CONSENT AGENDA**

- Meeting minutes of November 15, 2022
- Meeting minutes of September 20, 2022
- The Continuing Support Fund Charter
- Policies
- Educational materials

It was noted that the minutes have been updated to reflect that Lynne Lepisto-Golling attending the meeting in person, not via Zoom.

**MOTION: JOHN NOONE MADE A MOTION TO APPROVE THE CONSENT AGENDA AS PRESENTED. LYNNE LEPISTO-GOLLING SECONDED. ALL IN FAVOR. MOTION CARRIED.**

# Lourdes Senior Community Boards

*Tuesday, February 7, 2023, 1:30 p.m., LRHC Chapel*

*Note: Includes Board of Directors for Lourdes, Inc., Fox Manor, Clausen Manor (Lourdes Alzheimer's Special Care Center), Joseph T. Mendelson Assisted Living Home (Lourdes Assisted Living), Dominican Health Care and Lourdes Campus Fund*

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## ADJOURNMENT

The meeting adjourned at 3:39 p.m.

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Brian Condit, Board Chair

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Debi Batchelder, Recorder

DRAFT

**Colleen Burke – Director of Clausen Manor**  
**REPORT TO THE LOURDES SENIOR COMMUNITY BOARDS**  
**April 2023**

<b>CENSUS INFORMATION: As of March 31, 2023</b>	
<b>CURRENT NUMBER OF RESIDENTS</b>	16 (3 receiving hospice)
<b>TOTAL NUMBER OF ADMISSIONS 2022</b>	13
FROM CAMPUS 2022	5
<b>TOTAL NUMBER OF ADMISSIONS 2023</b>	6
FROM CAMPUS 2023	3
<b>TOTAL NUMBER OF DISCHARGES 2022</b>	16
DISCHARGES TO CAMPUS FACILITIES 2022	1
OFF-CAMPUS DISCHARGES 2022	3 (1 back home with husband, 1 back home at end of life, 1 closer to son)
NUMBER OF DEATHS 2022	12 (all under hospice services)
<b>TOTAL NUMBER OF DISCHARGES 2023</b>	4
DISCHARGES TO CAMPUS FACILITIES 2023	0
OFF-CAMPUS DISCHARGES 2023	1 (return to family home)
NUMBER OF DEATHS 2023	3 (two on hospice, one at hospital)
<b>MAJOR ACTIVITIES FOR RESIDENTS</b>	
<ul style="list-style-type: none"> <li>• Lunch outings continue along with twice-monthly entertainers, music therapy, Drums Alive, and baking programs. Looking forward to the golf cart and boat rides.</li> <li>• We are hosting a prom with the residents and students from Everest Academy on April 19.</li> <li>• Deacon Paul Latcha continues to meet the pastoral needs of Clausen residents through in-person visits with the residents every Tuesday and Thursday. He also says the Rosary with them. Mary from Pastoral Care now does 1:1 visits with those residents who have fewer visitors and passive activity participation.</li> <li>• Golf cart rides will start up in the next month.</li> <li>• The vegetable garden will go in May at the same time as our flowers.</li> </ul>	
<b>MAJOR FACILITY ISSUES</b>	
<ul style="list-style-type: none"> <li>• We have been replacing carpeting in the apartments with laminate for cleanliness and ease of cleaning. Currently, we have five remaining to be replaced.</li> </ul>	
<b>COVID 19 UPDATE 2023</b>	
<ul style="list-style-type: none"> <li>• Residents: confirmed = 0    Probable = 0</li> <li>• Staff: 0</li> <li>• Employees and visitors continue to not screen when they arrive for work/visit.</li> <li>• All staff and visitors are asked to wear face masks while at Clausen Manor per requirement. Exceptions are made for the residents when they cannot recognize or understand a loved one who has their mask on.</li> </ul>	
<b>FLU SHOTS:</b>	
<ul style="list-style-type: none"> <li>• Completed with 100% of residents receiving for 2022/2023.</li> </ul>	

<p><b>TRENDS</b></p> <ul style="list-style-type: none"> <li>• Average Age: 87.16 (men=83, women=88.21)</li> <li>• Range of ages: 62-101</li> <li>• Length of Stay: 591 Days</li> <li>• There are currently three men and twelve women. We have a married couple and two sisters.</li> <li>• All 16 residents are under the care of Dr. F. Salloum (our Medical Director).</li> <li>• Three residents receive services from Mercy Hospice.</li> <li>• Occupancy END 2022: 81.5%      Budget 2022: 87.5%</li> <li style="padding-left: 100px;">YTD 2023: 86.0%      Budget 2023: 90%</li> </ul>
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<p><b>DIRECTOR'S ADDITIONAL THOUGHTS:</b></p> <ul style="list-style-type: none"> <li>• I sent out family surveys and the results are included in my report. I have addressed the housekeeping issues with our housekeeper and the activities coordinator is working on those comments regarding activities, including increasing communication so that families are aware of all the activities in which their loved ones are involved.</li> <li>• We have new furniture thanks to LRHC.</li> <li>• Four new recliners are on order, thanks to a gift from a former family member and current volunteer.</li> </ul>
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<b>STAFFING (All categories not applicable at all facilities)</b>	<b>Days</b>	<b>Afternoons</b>	<b>Midnights</b>
<b>DIRECT CARE</b>	Total of 20 team members		
<b>STATE REQUIREMENTS</b>	3.0	2.0	2.0
<b>FACILITY GOALS (census of 18)</b>	4.0	4.0	2.0
<b>ACTUAL STAFFING</b>	3.5	3.5	2.0
<b>RN</b>	(Shared with Mendelson)		
<b>DIETARY</b>	(Shared with Mendelson)		
<b>ACTIVITIES</b>	1 FT		
<b>HOUSEKEEPING/DIETARY</b>	1 70 hours per pay		
<b>ADMINISTRATION</b>	1 (+ share LSC Campus MSW and Admissions Coordinator)		

**RESIDENT STORY:** In this report, I am introducing Donald and Margaret/Don and Peggy Smith. The Smiths moved to Clausen in January from Mendelson Assisted Living. Don and Peggy have been married since December 31 almost 50 years ago. Peggy was widowed and Don divorced when they met at GM and married shortly after. They combined their five children and added one more to make six children in their family. Peggy became a stay-at-home mom and Don retired from GM, 30 years ago, after many years as an engineer. Peggy and Don are very laid back and extremely funny. They share one room as their bedroom with their second room set up as a living room. They love visitors, singing, music, good food, and Coca-Cola. Don is 92 and Peggy just turned 83. They are so very enjoyable to be with, appreciative of all we do, and absolute delights to care for and about.

11 of 14 (16 residents, 1 married couple, 1 sibling pair)

Ratings are highest to lowest with “5” strongly agree, “1” strongly disagree.

**1. I feel my loved one is respected by the team at Clausen Manor.**

Rating	Responses	Rating	Responses	Rating	Responses	Rating	Responses	Rating	Responses
5	11	4		3		2		1	

**2. I feel my loved one’s care meets my expectations.**

Rating	Responses	Rating	Responses	Rating	Responses	Rating	Responses	Rating	Responses
5	10	4	1	3		2		1	

**3. My loved one enjoys the meals.**

Rating	Responses	Rating	Responses	Rating	Responses	Rating	Responses	Rating	Responses
5	7	4	2	3	1	2		1	

1 Unsure

“She seems to enjoy them when I am there—she doesn’t turn down much”

**4. The food appears healthy and nutritious.**

Rating	Responses	Rating	Responses	Rating	Responses	Rating	Responses	Rating	Responses
5	7	4	1	3	1	2		1	

2 Unsure

**5. The building is clean.**

Rating	Responses	Rating	Responses	Rating	Responses	Rating	Responses	Rating	Responses
5	10	4	1	3		2		1	

“That aspect is improving, not quite at the standard when mom first moved in but I understand the staffing issue.”

**6. My loved one’s apartment is clean.**

Rating	Responses	Rating	Responses	Rating	Responses	Rating	Responses	Rating	Responses
5	7	4	2	3	2	2		1	

**7. Activities are meaningful**

Rating	Responses	Rating	Responses	Rating	Responses	Rating	Responses	Rating	Responses
<b>5</b>	7	<b>4</b>	2	<b>3</b>		<b>2</b>		<b>1</b>	

1 Not observed

1 Unsure

“Mom may not always participate but it gives her something to focus on whether it is religious or arts & crafts or games.”

**8. Activities are enjoyable.**

Rating	Responses	Rating	Responses	Rating	Responses	Rating	Responses	Rating	Responses
<b>5</b>	6	<b>4</b>	3	<b>3</b>		<b>2</b>		<b>1</b>	

2 Not observed

“when he is able to engage due to his disability” (He has down syndrome)

**9. Activities are appropriate.**

Rating	Responses	Rating	Responses	Rating	Responses	Rating	Responses	Rating	Responses
<b>5</b>	8	<b>4</b>		<b>3</b>		<b>2</b>		<b>1</b>	

1 Don't know

2 NA

“Hard to know with Mark”

**10. The nurse is responsive.**

Rating	Responses	Rating	Responses	Rating	Responses	Rating	Responses	Rating	Responses
<b>5</b>	9	<b>4</b>		<b>3</b>		<b>2</b>		<b>1</b>	

2 NA

“Nurse Janet is awesome!”

**11. The nurse is knowledgeable about my loved one.**

Rating	Responses	Rating	Responses	Rating	Responses	Rating	Responses	Rating	Responses
<b>5</b>	9	<b>4</b>		<b>3</b>		<b>2</b>		<b>1</b>	

2 NA

Natalie and Colleen (Lois) seem to connect and engage Mark

### **12.The best thing at Clausen Manor is**

- the knowledge that my mom is ALWAYS well cared for
- the friendly staff, they truly care about the residents
- that the staff is genuinely caring and always looking for ways to deal with Mark's condition and issues.
- Colleen Burke on hands manager, sets the tone for the rest of the staff
- it brings me comfort and contentment to know she is there being cared for.
- the friendly relaxed atmosphere of the staff.
- prompt response by caregivers

### **13.The one thing I want to change is**

- staff change over, but that is a sign of the times.
  - Since so many have fine motor skills issues, less brothy soups
  - COVID mask rules, residents barely recognize us without them
  - laundry and loss or gain of clothing
  - the bathroom situation
  - I wish there were more concerts
- 

### **Other comments**

--Staff—Natalie is exceptional—she is caring and compassionate. Every resident there get the best care when she is there.

--I do understand the staffing issues and most of the situations have sorted themselves out.

--We appreciate your patience and care with Mark. He can be difficult and stubborn and your patience really can be tested. So thank you for your care. It would be nice if you could let us know when he runs out of hygiene products or he needs socks, PJs etc. It is hard to judge because his clothes are in another room.

**David Krolkowski, Director of Finance**  
**REPORT TO THE LOURDES SENIOR COMMUNITY BOARDS**  
**April 2023**

**February 2023 YTD Financial Statements:**

**Statement of Operations** – Entity-specific and consolidated financial statements for YTD ended February 28, 2023, are summarized below. The Consolidated Gain from operations is \$96,058 to a budget of \$69,383 a favorable variance of \$26,675. The consolidated operating margin is 3.43% to a budget of 2.26%. The February 2023 YTD results are reflected by entity as follows:

	Actual	Budget	Variance	Operating Margin
Lourdes	(24,667)	(21,468)	(3,199)	-1.43%
Mendelson	49,263	46,935	2,328	8.27%
Clausen	32,772	11,573	21,199	13.98%
Fox	63,457	41,547	21,910	24.63%
Campus	(24,767)	(9,204)	(15,563)	0.00%
<b>Total</b>	<b>96,058</b>	<b>69,383</b>	<b>26,675</b>	
<b>Consolidated Margin</b>				<b>3.43%</b>

Lourdes occupancy has operated at an average YTD level of 69 residents (69.3% of occupancy) with a Medicare/HMO mix of 26.6 residents or 38.4% of actual occupancy. We are receiving an average per day revenue on those payors of \$590, budgeted to be \$563, so we are seeing a \$27 increase per patient day.

Lourdes is budgeted to be at 75.0% occupancy for all payers and 40.0% for Medicare/HMO. Effective November 1<sup>st</sup>, 2022, the total occupancy is maxed at 77% due to a non-available bed plan and the temporary closure of Marian Hall.

On a YTD basis, Mendelson has operated at an occupancy rate of 84.24%, to a budget of 88.3% and Fox has operated at 88.14% occupancy to a budget of 88.9%, Clausen has a YTD occupancy rate of 91.44%, budgeted to be 90.0%.

On a consolidated YTD basis, revenue is unfavorable (-\$273,470), and expenses are favorable \$300,145. We received a workers' comp credit in the amount of \$84K. The YTD operating gain is \$96,058, compared to last year's YTD loss of (-\$160,704), favorable by \$256,762 year over year. We have seen a decrease in the utilization of contracted nurses and nurse aides since the temporary closure of Marian Hall.

**Statement of Financial Position** - Consolidated operating cash as of February 28, 2023, is \$756K.

The Employee Retention Credit was recognized as a receivable and revenue in 2022 in the amount of \$3.427M. Philanthropy efforts for two months totaled about \$93K netted down to \$88K when factoring in direct costs to raise the contributions (excluding salaries) and utilization of the funds. Investment valuations increased \$351K, a 1.30% return from December 2022. A/R has increased \$146K from December 31, 2022.

**COVID**

COVID's financial implications continue to be significant. Since COVID began in March 2020, our operating income has been potentially reduced in 2020, 2021, 2022, and 2023 by about (\$2.113M, \$2.896M, \$2.216M, and \$360K respectively) a total of \$7.585M. For the two months in 2023, the potential negative impact of COVID is about \$360K compared to 2019 YTD.

**SBA/IRS – Paycheck Protection Program 1 and 2 & Economic Retention Credit**

We have applied for a program through MDHHS where we can receive health benefit enhancements for our direct care workers at Lourdes. We have applied for \$330K to be spread over two years on various enhanced benefits.

We have received approval from Plante Moran for the Employee Retention Credit. We have amended our 941 tax forms and hope to receive the funds sometime in 2023. The amount we amended will result in \$3.427M

The PPP loan of \$2,051,000 was officially forgiven on June 5, 2021.

**HHS Stimulus Provider Relief Funds and Grant Opportunities**

We applied for and received grant funding related to COVID for 2020, 2021, 2022, and 2023. COVID testing reimbursement will end as of May 11, 2023, and is aligned with the expiration of the federally declared Public Health Emergency.

Total for 2020 = \$3,579,000  
 Total for 2021 = \$902,971  
 Total for 2022 = \$336,808  
 Total for 2023 = \$6,930

Source of Funding 2022	Type	Lourdes	Mendelson	Clausen	Fox	Consolidated
covid testing reimbursement	Grant	\$ -	\$ 5,782	\$ 1,148	\$ -	\$ 6,930
CMP Grant Air Purifier		\$ -				\$ -
HHS Grant		\$ -	\$ -	\$ -		\$ -
Total of all received funds		\$ -	\$ 5,782	\$ 1,148	\$ -	\$ 6,930

**Audit Status / Tax Return / Cost Report:**

The 2022 financial audit has been completed by Plante Moran. Plante Moran will present to the audit committee for approval. We received a clean unmodified opinion. The tax returns and cost report are also complete, and the cost report has been filed.

**2023 Capital Spend:**

As of February 2023, the total capital spend was \$79K compared to a budget of \$748K.

**2023 Continuing Support Fund:**

The continuing support committee met on December 15, 2022. The committee approved spending for 2023 of \$121K based on the residents at the time who applied. In 2023, we have spent about \$14.2K thus far. Since Lourdes Rehabilitation has been added to the charter. An additional spend totaling the budget of \$247.7K may occur for Lourdes in 2023 on a case-by-case basis based on the updated charter.

**Lourdes Financing Update:**

As part of our SWAP deal, LIBOR was used as the index benchmark. However, with it fading away in June 2023 we had to modify our documents to use SOFR as our new index benchmark. It is expected that this will result in a neutral change in the rate.

**Other:**

Rich is currently handling the Waterford Township property tax decision. We are in the process of bringing our billing 100% in-house through My Ability. We believe this will reduce the number of days in A/R and also save us time rather than using a third-party biller.

**Rebecca Latta, Director – Human Resources**  
**REPORT TO THE LOURDES SENIOR COMMUNITY BOARDS**  
**April 2023**

**Right-to-Work Law Repealed** – On March 24, 2023, Michigan repealed its right-to-work law for private sector employees. The right-to-work law made it unlawful for a union and an employer to agree that payment of union dues and fees is a condition of employment. The repeal will allow the inclusion of “union security clauses” in labor contracts. If a labor contract contains a union security clause, bargaining unit members will be required to become a union member and pay union dues as a condition of continued employment.

- The effective date is mid to late March 2024
- Does not affect “dues checkoff” obligations – meaning an employee must sign a dues check-off authorization before the employer can withhold union dues – Lourdes has “dues checkoff” in our contract. If the employee does not sign an authorization, they will have to pay the union directly.
- **We currently have forty-one (41) union employees at Lourdes Rehab. Only 26 employees are currently paying union dues.**

**Employee Survey** – The employee survey has been conducted throughout March/early April. The results will be shared by Beth in executive session. A meeting of the Human Resources committee will be scheduled to discuss results and next steps.

**Turnover** – The average turnover of all four homes for the 1<sup>st</sup> quarter is 19%, in 2022 we were at 13%. Our staffing is slightly lower than last year.

## **Work Force**

### **Recruiting –**

We continue to seek new avenues to gain new talent in our community.

- Online recruiting – we continue to see an increase in applications and interviews for our open positions. Please see the attached chart on the number of applications we received in 2023.
- HRIS Platform – coming this summer.

- New Hire Bonuses – we have increased new hire bonuses for LPN/RN and CENA positions. Other open positions are reviewed pending the need and applications received.
- Response time – we are using a new method with online recruiting to increase our response time to less than 72 hours.
- On-Site Open Interviews – This is on hold as we have had so many applications through online recruiting.
- Facebook recruiting – we have had some success with posting Resident Assistant positions on Facebook.
- International hiring – We have requested two RNs through the agency.

### **Retention –**

Our employees are our best asset. Retaining our current talent is a top priority.

- New Medical/Vision Benefits – Effective January 1, 2023, we have moved to MBHB, Inc. with lower deductibles and lower costs.
- Wages – continue to monitor the market to ensure our wages are competitive.
- Reduced work weeks – This continues to be a popular benefit for our employees. We have three successful transitions to a four-day work week with another one pending.
- Same-day pay – the option of same-day pay will be available with our new payroll provider this summer.
- Employee Engagement– We continue to have fun activities for our employees. We recently did a quiz to see if employees knew the leadership team since we have had some changes and I am happy to report that the feedback was positive with numerous employees responding.
- MDHHS – finance has applied to MDHHS to obtain funds for employee benefits and education.

This is all a work in progress, and we are constantly reassessing to see what other changes we can make to improve our employees' lives.

### **Requested Action: For Your Information**

**Rebecca Latta, Director - Human Resources**  
**REPORT TO THE LOURDES SENIOR COMMUNITY BOARDS**  
**April 2023**

<b>STAFFING:</b>			
<b>CLAUSEN MANOR</b>	<b>2021</b>	<b>2022</b>	<b>April 2023</b>
<b>HIRES</b>	20	10	3
<b>TERMINATIONS</b>	18	18	6
<b>TURNOVER RATE</b>	86%	86%	28%
<b>FTE'S*</b>	13.4	15.3	15.0

<b>FOX MANOR</b>	<b>2021</b>	<b>2022</b>	<b>April 2023</b>
<b>HIRES</b>	7	12	2
<b>TERMINATIONS</b>	11	11	4
<b>TURNOVER RATE</b>	61%	57%	21%
<b>FTE'S*</b>	8.0	9.2	9.0

<b>LOURDES REHABILITATION AND HEALTHCARE CENTER</b>	<b>2021</b>	<b>2022</b>	<b>April 2023</b>
<b>HIRES</b>	32	31	10
<b>TERMINATIONS</b>	58	50	7
<b>TURNOVER RATE</b>	59%	51%	10%
<b>FTE'S*</b>	72.8	73.0	69.4

<b>MENDELSON</b>	<b>2021</b>	<b>2022</b>	<b>April 2023</b>
<b>HIRES</b>	25	36	8
<b>TERMINATIONS</b>	32	45	11
<b>TURNOVER RATE</b>	38%	71%	18%
<b>FTE'S*</b>	44.4	47.0	45.4

<b>CAMPUS AVERAGE</b>	<b>2021</b>	<b>2022</b>	<b>April 2023</b>
<b>HIRES</b>	21	22.3	5
<b>TERMINATIONS</b>	30	31	7
<b>TURNOVER RATE</b>	61%	66%	19%
<b>FTE'S*</b>	34.7	36.0	35.0

\* FTE's are based on actual employee count.

**Requested Action: For Your Information**

**Rebecca Latta, Director - Human Resources**  
**REPORT TO THE LOURDES SENIOR COMMUNITY BOARDS**  
**April 2023**

<b>Breakdown of Terminations</b>			
<b>CLAUSEN MANOR</b>	<b>2021</b>	<b>2022</b>	<b>April 2023</b>
Resident Assistants	16	15	5
RCC/LPN Supervisor	0	0	1
Activities Assistant	2	3	-
<b>Total</b>	<b>18</b>	<b>18</b>	<b>6</b>

<b>FOX MANOR</b>	<b>2021</b>	<b>2022</b>	<b>April 2023</b>
Housekeeping	3	5	1
Dietary Aides	7	5	3
Massage Therapist	1	0	-
Administration		1 (retire)	-
<b>Total</b>	<b>11</b>	<b>11</b>	<b>4</b>

<b>LOURDES REHABILITATION AND HEALTHCARE CENTER</b>	<b>2021</b>	<b>2022</b>	<b>April 2023</b>
Nurses	16	15	3
Nurse Aides	20	13	3
Housekeeping/Laundry	5	9 (1 retire)	-
Dietary	13	5 (transfer to unidine)	-
Administration	3	5 (2 retire)	-
Activities	1	3	1
<b>Total</b>	<b>58</b>	<b>50</b>	<b>7</b>

<b>MENDELSON</b>	<b>2021</b>	<b>2022</b>	<b>April 2023</b>
Resident Assistants	22	30	6
Dietary	4	9	4
Activities	3	3	-
Administration	0	1	-
Housekeeping	2	2	1
Massage Therapist	1	0	-
<b>Total</b>	<b>32</b>	<b>45</b>	<b>11</b>

<b>Total all four facilities</b>	<b>119</b>	<b>124</b>	<b>28</b>
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**Requested Action: For Your Information**

Rebecca Latta, Director - Human Resources  
**REPORT TO THE LOURDES SENIOR COMMUNITY BOARDS**  
 April 2023

Recruiting - Applications Received													
	January	February	March	April	May	June	July	August	September	October	November	December	YTD
Certified Nurse Aide	8	13	1										22
RN/LPN	6	15	7										28
Caregiver (mendelson/cm)	13	18	19										50
Activities Assistant (mal, cm, rehab)	closed	closed	closed										0
Housekeepers	16	-	27										43
Cook	n/a	10	67										77
Grounds	n/a	n/a	65										65

\*posting up for only part of the month

Requested Action: For Your Information

**Robin McClintock, CTRS, CALD – Fox Manor**  
**REPORT TO THE LOURDES SENIOR COMMUNITY BOARDS**  
**April 2023**

<b>CENSUS INFORMATION: As of April 5, 2023</b>	
<b>NUMBER OF RESIDENTS</b>	56
<b>TOTAL NUMBER OF ADMISSIONS 2023</b>	6
FROM CAMPUS 2023	1 (MAL)
<b>TOTAL NUMBER OF DISCHARGES 2023</b>	2
<b>DISCHARGES TO CAMPUS FACILITIES 2023</b>	0
OFF-CAMPUS DISCHARGES 2023	0
<b>NUMBER OF DEATHS 2023</b>	2 (on hospice)
<b>MAJOR ACTIVITIES FOR RESIDENTS</b>	
<ul style="list-style-type: none"> <li>• Lourdes Senior Community hired a transportation specialist to drive residents to places they need to go. This service is free of charge. The driver is currently driving residents who make appointments on Tuesdays.</li> <li>• In February, Rich Acho (CEO) held his first Town Hall Meeting with the residents. He received a lot of verbal and written feedback from the residents in attendance.</li> <li>• The residents had plenty of fun in February and March. There was much fun to be had at the Superbowl party, Valentine’s Day party, and St. Patrick’s Day party.</li> <li>• In March, the residents also participated in a learning event about using smartphones. They were educated on all types of phones including Apple and Android products.</li> </ul>	
<b>MAJOR FACILITY ISSUES</b>	
<b>COVID-19 Strategies</b>	
<ul style="list-style-type: none"> <li>• At this time, masks are no longer required to be worn in Fox Manor. If the positivity rates increase, this could change</li> <li>• Visitation is allowed without restriction.</li> <li>• The facility has opened to allow visitors in common areas, activities, and during lunch in the dining room.</li> <li>• Reporting to the Oakland County Health Department must be completed only if the facility has a positive COVID case.</li> </ul>	
<b>COVID-19 Testing:</b>	
<ul style="list-style-type: none"> <li>• There is no regulation for mandatory weekly testing at Independent Living facilities. However, if there are any positives in the facility testing may occur for all or part of the facility depending on the case.</li> </ul>	
<b>COVID-19 Cases:</b>	
<ul style="list-style-type: none"> <li>• Residents: 2023= 2</li> <li>• Employees: 2023 = 1</li> </ul>	
<b>COVID-19 Vaccines:</b>	
<ul style="list-style-type: none"> <li>• Staff: Total staff=18 Total vaccinated= 8 1<sup>st</sup> Booster=2 2<sup>nd</sup> Booster = 2 Bivalent = 3</li> <li>• Residents: Total Residents: 56 Total vaccinated=54 1<sup>st</sup> Booster=5 2<sup>nd</sup> Booster= 10 Bivalent = 36</li> </ul>	
<b>TRENDS</b>	
<ul style="list-style-type: none"> <li>• The average age is 86 years old. The mode is 85.</li> <li>• The average length of stay is 3.87 years. The resident with the longest length of stay is 15.94 years.</li> <li>• The youngest resident is 74 years old, and the oldest resident is 99.</li> <li>• 44 of our 56 residents (78.6%) are Catholic.</li> <li>• 44 women and 12 men reside at Fox Manor.</li> <li>• Six married couples are living at Fox Manor.</li> <li>• Occupancy YTD 2023: 94.3% Budget 2023: 88.9%</li> </ul>	
<b>STAFFING</b>	Master Page 67 fo 91 - Lourdes Senior Community Boards - April 18, 2023

<b>DIETARY</b>	2 full-time cooks 9 part-time wait staff
<b>ACTIVITIES</b>	1 part-time activities coordinator
<b>HOUSEKEEPING/LAUNDRY</b>	1 full-time resident apartment housekeeper 1 part-time resident apartment housekeeper 1 part-time common area housekeeper
<b>ADMINISTRATION</b>	1 full-time building director 2 part-time receptionists 2 in-house security staff
<b>DIRECTOR'S ADDITIONAL THOUGHTS:</b>	
<ul style="list-style-type: none"> <li>• Census has been improving. There are three vacancies. There are two admissions scheduled in April and one in May. There has been a great deal of interest in Fox.</li> <li>• There is one apartment currently being remodeled.</li> <li>• Nine residents are currently receiving support services from home healthcare and non-medical assistance companies.</li> <li>• Fox is currently utilizing referral agencies to boost admission prospects. A Place for Mom is currently the primary resource. There has been one admission this year when using A Place for Mom.</li> <li>• There have been three admits due to current resident referrals and two admits that were previous residents.</li> <li>• Resident and family satisfaction surveys were sent out on March 13<sup>th</sup>. Surveys are being returned and results will be tabulated. Information will be shared at the next board meeting.</li> </ul>	



**Robin McClintock, CTRS, CALD - Mendelson Home**  
**REPORT TO THE LOURDES SENIOR COMMUNITY BOARDS**  
**April 2023**

<b>CENSUS INFORMATION: As of April 5, 2023</b>	
<b>NUMBER OF RESIDENTS</b>	52
<b>TOTAL NUMBER OF ADMISSIONS 2023</b>	13 (3 respite)
FROM CAMPUS 2023	6
<b>TOTAL NUMBER OF DISCHARGES 2023</b>	16 (2 respite)
<b>DISCHARGES TO CAMPUS FACILITIES 2023</b>	5
<b>OFF-CAMPUS DISCHARGES 2023</b>	5
<b>NUMBER OF DEATHS 2023</b>	6 (all hospice)
<b>MAJOR ACTIVITIES FOR RESIDENTS</b>	
<ul style="list-style-type: none"> <li>• On February 13<sup>th</sup>, Mendelson celebrated another 100<sup>th</sup> birthday. Rose Hickey enjoyed her birthday celebration with her family and friends.</li> <li>• February and March were the months for parties. The Super Bowl, Valentine’s Day at the County Fair where the King and Queen were crowned, A Night at the Oscars social, and St. Patrick’s Day were celebrated.</li> </ul>	
<b>MAJOR FACILITY ISSUES</b>	
<b>COVID 19 Strategies</b>	
<ul style="list-style-type: none"> <li>• MDHHS has removed most all visitation restrictions. The residents are allowed to have visitors whenever they choose. This includes if the resident has tested positive for Covid. If the visitors understand the risks, they can visit. Visitors are allowed to be in common areas, the activity room, and the dining room.</li> <li>• All visitors must wear masks.</li> <li>• All staff is required to wear face masks while at work.</li> <li>• Weekly COVID-19 reporting continues to the CDC and MDHHS. If there is a positive case in the facility it is reported to the Oakland County Health Department.</li> </ul>	
<b>COVID-19 Testing:</b>	
<ul style="list-style-type: none"> <li>• Per MDHHS, staff no longer must do routine testing. However, if someone is symptomatic, they must be tested. If there is a positive in the building, serial testing must begin. Testing continues until the facility can go 14 days without a positive.</li> </ul>	
<b>COVID-19 Cases:</b>	
<ul style="list-style-type: none"> <li>• Residents: 2023 = 0</li> <li>• Employees: 2023 = 2</li> </ul>	
<b>COVID-19 Vaccines:</b>	
<ul style="list-style-type: none"> <li>• Staff: Total staff=60 Total vaccinated=27 1<sup>st</sup> Booster=12 2<sup>nd</sup> Booster=4 Bivalent=7</li> <li>• Residents: Total vaccinated 51 1<sup>st</sup> Booster=4 2<sup>nd</sup> Booster=2 Bivalent=41 Decline = 1</li> </ul>	
<b>TRENDS</b>	
<ul style="list-style-type: none"> <li>• Average Age: 88</li> <li>• Average Length of Stay: 674 days</li> <li>• Currently, there are forty-one women and two men. Two married couples reside at Mendelson.</li> <li>• There is currently one resident receiving services from Trinity Hospice with one resident pending assessment.</li> <li>• Forty-four residents utilize the services of Dr. Grivej.</li> <li>• Occupancy YTD 2023: 85% Budgeted occupancy 2023: 89.2%</li> </ul>	

**DIRECTOR'S ADDITIONAL THOUGHTS:**

- The census is fluctuating. There are currently nine openings. Two admissions are scheduled in the next week. Two discharges are planned (one due to death, one to Clausen).
- There is currently one resident under respite care.
- Mendelson, Clausen, and Fox are currently working with A Place for Mom to assist with referral sources. There have been four admissions this year from A Place for Mom referrals.
- Staff Openings: 6 part-time resident assistants (all shifts), 1 full-time afternoon resident assistant
- Resident and family satisfaction surveys were sent out on March 13<sup>th</sup>. Surveys are being returned and results will be tabulated. Information will be shared at the next board meeting.
- Department of Licensing and Regulatory Affairs Bureau of Community and Health Systems established a rule change for how Home for the Aged (HFA) handles the reporting of incidents. Before the rule change, HFA had to report incidents (hospitalizations, Covid positive cases, elopements, etc.) to the state licensing officer within 48 hours of occurrence. Effective March 28, 2023, no incident reports are required to be reported to the state. HFAs are now required to create a Quality Review program that reviews the incident reports. The program requires a committee to review, establish corrective actions and evaluate the corrective actions put in place. The document on the final rule is attached.

<b>STAFFING (All categories not applicable at all facilities)</b>		<b>Days</b>	<b>Afternoon</b>	<b>Midnight</b>
<b>DIRECT CARE</b>		Total Direct Care staff: 29 resident assistants		
<b>STATE REQUIREMENTS</b>		There are no state requirements. Staffing is mandated to be whatever is needed to provide care based on the acuity of the residents.		
<b>FACILITY GOALS (at budgeted occupancy)</b>		6.0	5.5	4.0
<b>ACTUAL STAFFING</b>		6.0	5.5	4.0
<b>RN</b>	1 full-time (shared with Clausen) 1 part-time			
<b>DIETARY</b>	1 full-time Manager, 4 cooks, 6 servers/dishwashers, 1 stock (some positions are shared with Clausen)			
<b>ACTIVITIES</b>	1 full-time director, 2 assistants, 1 contingent assistant			
<b>HOUSEKEEPING</b>	1 full-time Supervisor, 2 part-time (Supervisor shared with Clausen)			
<b>HOUSEKEEPING/ROOM ATTN</b>	2 full-time			
<b>ADMINISTRATION</b>	6 (3 are shared with Clausen)			



DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
BUREAU OF COMMUNITY AND HEALTH SYSTEMS  
HOMES FOR THE AGED

Filed with the secretary of state on March 21, 2023

These rules take effect immediately upon filing with the secretary of state unless adopted under section 33, 44, or 45a(9) of the administrative procedures act of 1969, 1969 PA 306, MCL 24.233, 24.244, or 24.245a. Rules adopted under these sections become effective 7 days after filing with the secretary of state.

(By authority conferred on the department of licensing and regulatory affairs by section 427 of the Executive organization act of 1965, 1965 PA 380, MCL 16.527, section 2233 of the public health code, 1978 PA 368, MCL 333.2233, and Executive Reorganization Order Nos. 1996-1, 1996-2, 2003-1, and 2015-1, MCL 330.3101, 445.2001, 445.2011, and 400.227)

R 325.1901, R 325.1924, and R 325.1932 of the Michigan Administrative Code are amended, as follows:

R 325.1901 Definitions.

Rule 1. As used in these rules:

- (a) "Act" means the public health code, 1978 PA 368, MCL 333.1101 to 333.25211.
- (b) "Activities of daily living" means activities associated with eating, toileting, bathing, grooming, dressing, transferring, mobility, and medication management.
- (c) "Admission policy" means a home's program statement of its purpose, eligibility requirements, and application procedures for admission.
- (d) "Assistance" means help provided by a home or an agent or employee of a home to a resident who requires help with activities of daily living.
- (e) "Authorized representative" means that person or agency that has been granted written legal authority by a resident to act on behalf of the resident or is the legal guardian of a resident.
- (f) "Department" means the department of licensing and regulatory affairs.
- (g) "Director" means the director of the department.
- (h) "Discharge policy" means a home's written statement of the criteria and procedures by which a resident is discharged from the home.
- (i) "Elopement" means a resident who has a service plan that requires notice or arranged supervision to leave the facility and is absent without notice or supervision.
- (j) "Home" means a home for the aged as defined in section 20106(3) of the act, MCL 333.20106.
- (k) "Incident" means an intentional or unintentional event including, but not limited to, elopements and medication errors, where a resident suffers physical or emotional harm.

August 26, 2022

(l) "Licensed health care professional" means an individual who is licensed under article 15 of the act, MCL 333.16101 to 333.18838, and who is operating within the scope of his or her license.

(m) "Major building modification" means an alteration of walls that creates a new architectural configuration or revision to the mechanical or electrical systems that significantly revise the design of the system or systems. Normal building maintenance, repair, or replacement with equivalent components are not considered major building modifications. A change in room function shall not cause a conflict with these rules.

(n) "Medication management" means assistance with the acquisition and administration of a resident's prescribed medication.

(o) "Program statement" means a written description of the home's overall philosophy and mission reflecting the needs of residents and services provided to residents. A home that represents to the public that it provides residential care or services, or both, to individuals with Alzheimer's disease or a related condition shall include in its program statement the information required by section 20178 of the act, MCL 333.20178.

(p) "Protection" means the continual responsibility of the home to take reasonable action to ensure the health, safety, and well-being of a resident as indicated in the resident's service plan, including protection from physical harm, humiliation, intimidation, and social, moral, financial, and personal exploitation while on the premises, while under the supervision of the home or an agent or employee of the home, or when the resident's service plan states that the resident needs continuous supervision.

(q) "Resident" means an individual who is 55 years of age or older, or an individual under the age of 55 who has been admitted through a waiver of the director pursuant to section 21311(3) of the act, MCL 333.21311.

(r) "Resident admission contract" means a written agreement between the home and the resident or the resident's authorized representative that specifies the services to be provided, the fees to be charged, including all fees related to admission such as deposits, admission fees, advance care payments, application fees and all other additional fees, and the home's policies related to the admission and retention of a resident.

(s) "Room and board" means the provision of housing and meals to meet the needs of the resident.

(t) "Service plan" means a written statement prepared by the home in cooperation with a resident, the resident's authorized representative, or the agency responsible for a resident's placement, if any, that identifies the specific care and maintenance, services, and resident activities appropriate for the individual resident's physical, social, and behavioral needs and well-being, and the methods of providing the care and services while taking into account the preferences and competency of the resident.

(u) "Supervision" means guidance of a resident in the activities of daily living, and includes all of the following:

(i) Reminding a resident to maintain his or her medication schedule in accordance with the instructions of the resident's licensed health care professional as authorized by section 17708(2) of the act, MCL 333.17708.

(ii) Reminding a resident of important activities to be carried out.

(iii) Assisting a resident in keeping appointments.

(iv) Being aware of a resident's general whereabouts as indicated in the resident's service plan, even though the resident may travel independently about the community.

(v) Supporting a resident's personal and social skills.

R 325.1924 Reporting of incidents, quality review program.

Rule 24. (1) A home for the aged must implement and maintain a quality review program consistent with section 20175(8) of the act, MCL 333.20175, and the professional review function. The program is responsible for all of the following:

- (a) Reviewing and evaluating incidents.
- (b) Identifying effective means to correct any deficient practice.
- (c) Ensuring resident safety and quality of care.
- (d) Improving procedures.

(2) The program must be reviewed annually by the administrator and governing body.

(3) The program must be staffed by a multi-disciplinary team. The multi-disciplinary team shall consist of not less than 2 personnel that have training or experience with the type of the incident being evaluated.

(4) The multi-disciplinary team shall meet not less than twice each calendar year or more frequently as needed to review an incident or incidents.

(5) Records must be maintained that demonstrate incident reporting to the team, analyses, outcomes, corrective action taken, and evaluation to ensure that the expected outcome is achieved. These records must be maintained for 2 years.

(6) The facility must have a policy and procedure to report an incident using a department approved form to the multi-disciplinary team responsible for the quality review program required under subrule (1) of this rule.

(7) The facility must have a policy and procedure to ensure that an incident, once known by facility staff, is reported as soon as possible, but not later than 48 hours after the incident, to a resident's authorized representative or designated health care professional, as appropriate. Verbal or written notification must be documented in the resident's record to reflect the date, time, name of staff who made the notification, and name of the representative or professional who was notified.

(8) If an elopement occurs, staff shall conduct a search to locate the resident. If the resident is not located within 30 minutes after the elopement occurred, staff shall comply with subrule (7) of this rule and contact the local police authority.

(9) The department may review a quality review program during a renewal survey to confirm that a program is in place. During a complaint investigation, the licensee shall confirm if an incident was reviewed and if any corrective actions were taken, but the department shall not request any other case-specific information that was part of the quality review program. The department shall rely on other documents outside this professional review function as part of its investigation. The department shall maintain and protect these documents in accordance with state and federal laws, including privacy laws.

R 325.1932 Resident's medications.

Rule 32. (1) A service plan must identify prescribed medication to be self-administered or managed by the home.

(2) Prescribed medication managed by the home shall be given, taken, or applied pursuant to labeling instructions, orders and by the prescribing licensed health care professional.

(3) Staff who supervise the administration of medication for residents who do not self-administer shall comply with all of the following:

(a) Be trained in the proper handling and administration of the prescribed medication.

(b) Complete an individual medication log that contains all of the following information:

(i) The name of the prescribed medication.

(ii) The prescribed required dosage and the dosage that was administered.

(iii) Label instructions for use of the prescribed medication or any intervening order.

(iv) The time when the prescribed medication is to be administered and when the medication was administered.

(v) The initials of the individual who administered the prescribed medication.

(vi) A record if the resident refuses to accept prescribed medication and notification as required in subdivision (c) of this subrule.

(vii) A record of the reason for administration of a prescribed medication that is on an as-needed basis.

(c) Contact the appropriate licensed health care professional when the prescribed medication has not been administered in accordance with the label instruction, an order from a health care professional, medication log, or a service plan.

(4) If a resident requires prescription or over-the-counter medication or medications while out of the home, and medication or medications are not identified as self-administered, staff responsible for the medication management shall ensure that the resident, or the person that assumes responsibility for the resident, has all appropriate information, medication, and instructions.

(5) Prescribed medication that is no longer required by a resident must be properly disposed of consistent with the policy established by the home and manufacturer guidelines.

(6) For a resident who is identified as self-administered in his or her service plan, the home must have a policy to offer a secured method of storage for medications if desired by the resident and to notify the applicable health care professional or legal representative if there is a change in a resident's capacity to self-medicate.

**Maureen McGee, Administrator - Lourdes Rehabilitation and Healthcare Center**  
**REPORT TO THE LOURDES SENIOR COMMUNITY BOARD**  
**April 2023**

**Census 2023**

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
MNG	12	10	13									
MCD	35	38	39									
MCR	15	13	10									
PVT	7	7	9									
OTH	0	1	1									
Total	69	68	72									

MNG – Managed Care

MCD – Medicaid

MCR – Medicare

PVT - Private

OTH – Other

**COVID-19**

No current outbreaks

Oakland County has a current positivity rate of 12 percent putting us at High Risk (data through March 27, 2023). The rate has been increasing over the past months. We will continue to monitor the rate weekly.

**COVID Information to Date:**

	Cumulative Total Cases	Active Cases	Recovered	Fatalities
Residents	87	0	77	10
Employees	134	0	134	0

**COVID Vaccination Mandate:**

CMS is using the National Healthcare Safety Network (NHSN) data to determine compliance with the mandate.

Data in NHSN through March 19, 2023:

Residents fully vaccinated – 94%

National Average – 85%

MI Average – 85%

Resident Up to Date (received the bivalent) – 69%  
National Average – 54%  
MI Average – 53%

Staff fully vaccinated – 96%  
National Average – 86%  
MI Average – 82%

Staff Up to Date (received the bivalent) – 20%  
National Average – 22%  
MI Average – 14%

Staff exemptions – 5 (1 medical, 5 religious)

### **QSO-23-05-NH**

Two-pronged memo issued by CMS on January 18, 2023:

- Erroneous Schizophrenia coding
- Posting citations under Informal Dispute Resolution

### **Schizophrenia Coding**

CMS will be conducting audits of Schizophrenia coding in the Minimum Data Set (MDS) and based on results, adjust the Nursing Home Compare quality measure star ratings for facilities whose audits reveal inaccurate coding.

Facilities selected for an audit will receive a letter explaining the purpose of the audit, the process that will be utilized, and instructions for providing supporting documentation.

During the audit process, facilities will have the opportunity to ask questions and seek any clarification needed. Additionally, at the conclusion of the audit, the facility will have the opportunity to discuss the audit results with CMS.

Facilities that have coding inaccuracies identified by the Schizophrenia MDS audit will have their quality measures adjusted as follows:

- The overall Quality Measure and Long Stay Measure Ratings will be downgraded to one star for six months (this drops the facility's overall star rating by one star)
- The Short Stay Quality Measure rating will be suppressed for six months.
- The Long Stay Antipsychotic Quality Measure will be suppressed for 12 months.

### Posting Citations Under Dispute

To be more transparent, CMS will now display citations under informal dispute resolution (IDR) on the Nursing Home Compare website and will indicate if a citation is under dispute. If based on the results of the IDR, the citations are upheld they will remain posted and be included in the facility's star rating if applicable. If the citations are overturned, they will be removed from the website. If the level of scope or severity of a citation is reduced, the citation will be displayed at the reduced level. On average, approximately 75 percent of posts do not change after completion of the IDR process.

### **QSO-23-10-NH**

Memo issued March 30, 2023

#### Revised Enhanced Enforcement for Infection Control Deficiencies

Non-compliance with both Infection Control (F880) concurrent with COVID-19 Vaccine Immunization Requirements for Residents/Staff (F887) requirements cited at D, E, F

- Directed Plan of Correction that includes Root Cause Analysis and working with a Quality Improvement Organization or another qualified consultant; and
- Discretionary Denial of Payment for New Admissions with a 30-day notice period to achieve substantial compliance.
- Enhanced Enforcement at F880 at D, E, F is applicable when F887 is also cited at any level.

Non-compliance for Infection Control (F880) cited at G, H, I

- Directed Plan of Correction that includes Root Cause Analysis and working with a Quality Improvement Organization or another qualified consultant; and
- Discretionary Denial of Payment for New Admissions with a 15-day notice period to achieve substantial compliance.
- Civil Monetary Penalty imposed according to the CMP analytic tool with a ten percent increase adjustment.

Non-compliance for Infection Control (F880) at J, K, L

- Directed Plan of Correction that includes Root Cause Analysis and working with a Quality Improvement Organization or another qualified consultant; and
- Discretionary Denial of Payment for New Admissions with a 15-day notice period to achieve substantial compliance, and
- Civil Monetary Penalty imposed according to the CMP analytic tool with a twenty percent increase adjustment.

### **Closed Points of Dispensing (POD)**

Points of Dispensing (POD) are community locations at which state and local agencies dispense and administer medical countermeasures (MCMs) to the public. MCMs such as vaccines, antivirals, antibiotics, and chemical antidotes are used to effectively prevent, mitigate, or treat adverse health effects of an intentional, accidental, or naturally occurring public health emergency.

To aid in rapidly dispensing MCMs, local health departments plan on using two types of PODs, open and closed. Open PODs are typically located at public locations such as arenas, community centers, or schools. These locations are often operated by the local public health agencies and are where they dispense or administer MCMs to the public. Closed PODs are sites staffed and managed by organizations and agencies to dispense MCMs only to their own population while continuing operations during a public health emergency.

Lourdes Senior Community in conjunction with the Oakland County Health Department simulated a closed POD on March 9, 2023. Lourdes was alerted at 8 a.m. that Oakland County had experienced an Anthrax attack. The POD plan was activated at that time and the POD was set up in the lobby. Staff was notified of the attack and where to pick up the MCMs. 176 doses of antibiotics were dispersed to the staff during the drill. At the conclusion, we conducted a “hotwash” to discuss all aspects of the drill and created an action plan so that appropriate changes could be made to the current plan. All changes have been implemented and the revised plan submitted to Oakland County.

### **Active Shooter Training**

Robin and I are having a preliminary meeting with Waterford Township Police on April 11, 2023, to discuss training specific to the campus.

### **Strategic Imperatives:**

Discussed with the Resident Quality Care Committee in November 2022.

#### **Home Health Provider Assessment:**

- What are things the committee needs to consider?
- Will the committee, staff, or outside source do the work?
- Niche markets that some of our current home health providers offer
- Relationships with our referring health systems

#### **Completed:**

- Update 5-Star ratings for Home Health since the last refresh

#### **Transition of Care/Care Management Approach**

- Drafting a document on the steps LHRC will take for the transition of care process.

**Jason Mize- Director of Plant Operations**  
**REPORT TO THE LOURDES SENIOR COMMUNITY BOARD**  
**April 2023**

Lourdes:

- Received new quotes for doors to be added to Lourdes' hallways.
- Awaiting new quotes with changes on licenses for Cameras.
- Contacted another contractor to provide a quote for deck/stairs leading to the lake and boat.
- Repairs to the compressors on the chiller were completed by JCI on 3/29/23.

Clausen:

- Working with Advantage Electric to see about adding more emergency electrical outlets. Have a meeting scheduled for 4/6/23.

Mendelson:

- The Kitchen air handler had a few parts that needed to be replaced and was down for a couple of weeks. It was repaired on 3/28/23.

Fox:

- Working with contractor and architect on the Portico quote.
- Obtaining prices for a Pergola for the courtyard.
- Searching for washers/dryers for residents' rooms and obtaining quotes to add them to the rooms.

**UPDATES:**

I spoke with Allie from Grissim Metz. She is redesigning our plans for the healing garden to get us closer to our budget. We should have the final drawings by 4/7/23. I also have meetings the first week of April with landscapers for new quotes.

**Wendy Mosella, Director of Development**  
**REPORT TO THE LOURDES SENIOR COMMUNITY BOARDS**  
**April 2023**

**Overview**

Lourdes Senior Community fundraising is planned to make a large effort to increase fundraising income this year. The focus will be on grants which are currently underutilized, a direct mail increase, and major gifts to underwrite budget items such as music therapy or other enrichment activities. The current staff is incredibly dedicated and they have been able to continue to deliver consistent and great work. They are open to new ideas and have the enthusiasm to take Lourdes to the next level. Together we have been able to brainstorm new ways to reach constituents with increases in communication and interactive stories.

**Direct Mail**

Previously, the direct mail program consisted of three Continuum newsletters with an envelope option for constituents' return and one year-end appeal.

The plan for this year is to engage lapsed donors who have not given in the last few years. Recently we have run all of the addresses in the database through NCOA updates. This resulted in 1,104 address updates and over 80 deceased, and 143 vacant updates with the first run of the software. These updates will assist in the process of reactivating donors who we may have lost due to relocation.

We will time in a direct mail piece specifically asking for support, in a separate mailer from the newsletter. This will follow after the first printing of the newsletter this year as a follow-up to the information they have been seeing. The goal of the appeal will be to increase the general fund to alleviate the annual budget. The ideal goal for an appeal would be \$20,000 the first time out, but as this will be new for us, aside from the End of Year appeal we potentially have untapped donations there from those who just aren't aware of our needs as they only receive the newsletter. While it shares great stories, it's not a solicitation, aside from the included envelope, it's a passive ask.

We will categorize donations in a more detailed fashion going forward by utilizing funds and appeal codes. This will give us the ability to track accurately where donations are coming from and response rates to appeals. We have already started this process and will continue to do so moving forward.

**Grants**

We will be expanding our grant program to include new potential funding sources. The grants will potentially allow us to receive funding for our music therapy, memory care, and seminars we hold in the community such as "A Matter of Balance." We would like to create the grant funding to feed into the programs we currently are running as well as use the opportunity to provide new technology for residents and memory care.

We currently do not allocate a lot of time or effort to this market for funding. We will be doing that early this year by locating potential funding sources and begin applying. As the grant process takes months for replies it will not happen instantly. We do have a large

potential with as many programs and services as we offer to qualify for larger-scale funding. The goal will be to apply for a minimum of 4 new grants this year on top of the traditional 6 we apply to and receive each year. As grants can take up a lot of resources, we will evaluate as we progress through the year the need to look into having a project-based grant writer.

## **Events**

We will work to maximize revenue through our current special events. The golf outing will continue with the focus this year to increase golf participants and sponsorships. It has a successful history and there is no need to alter this event concept. There will be a change of venue to The Fountains this year to keep it more focused on the community around us as well as our supporters.

The Legacy dinner will be reviewed before a decision is made regarding the continuation. The desired outcome of the event has not come to fruition in the last few years in terms of the dinner proceeds. The awards can always still be continued differently to honor the hard work done.

A large-scale raffle will be researched and launched during this fiscal year. The manner of the raffle versus sweepstakes will be taken into consideration, as well as, the raffle prize (50/50, prize money or item, etc.) The major difference between sweepstakes and a raffle is that you are able to mail sweepstakes tickets under the condition that they indicate “suggested donation” instead of an exact price. In past experience, most do pay full price, but this would be something new for Lourdes to venture into a large-scale raffle event.

## **Planned Giving**

We will begin to re-introduce information about estate planning and planned gifts in the Continuum newsletters and online. The information will be about ways to give through your estate planning such as percentages or specific amounts you can leave for your favorite charities. Going forward we would like to keep some articles on the website for planned giving options.

Mailings will also include a way for donors to indicate if they have included Lourdes in their estate planning. Most non-profits have a group that they then can belong to be invited to special events such as a special update with the CEO or activities of that nature not everyone can be invited to. This encourages those who have thought to indicate their plans to let us know and can create a stronger relationship with the donors feeling included and remembered.

The most recent issue of the newsletter has been distributed by mail which did include an estate article to plant the seed of things to come. This fall we plan to host an estate planning seminar on our campus. Giving people the opportunity to see our facilities and learn about planning their future. Topics will include options for designating charities in their plans as well as how they can choose what impact they can make on their favorite organizations.

## **Communications**

We have just launched a revised website design. We will continue to upgrade analytics as we move forward with SEO (search engine optimization) utilization to increase our presence in

search results as we transition to a new company. The change will take about 30 days to complete but will allow us to have quicker and more efficient control over our site allowing it to become mobile-friendly for phone users and desktops. Currently, we have long periods of waiting for the last company and our IT company to work together as the communication process takes a long time for a response. Social media with Facebook will have a goal to increase our followers and make more interactive posts. YouTube is being created to allow viewing of our new commercials as well as “Did you know?” themed videos or other promotions to increase our online presence. We have begun planning by the month for new content so that it will be readily available, of course still allowing time for things that need to be shared quickly and important updates.

We will continue to increase and ask for Google reviews from those in our care as well as be able to respond to reviews promptly now that we have completed who has access to the account. With multiple users, we will not have to backtrack in the future to reacquire the account which we just completed in March.

Our goal moving forward is to complete a transfer of emails from our constant contact system to our fundraising software. They are maintained separately and are not always included in the donor base. This will allow us to manage and have better insight into those who interact with us and convert them into donors. This will allow us to expand our online giving, as currently, it does not get much utilization.

## **Major Gifts**

Major gifts will be an area we can look to increase funding. While we have many generous family foundations, we need to create more giving opportunities for gifts of this nature. For example, the upcoming renovation of the Mendelson hair salon is a donor-funded project close to their hearts. A list of known opportunities will be created in presentation form so that we are always prepared when gifts or conversations arise. Connecting donors to projects that are meaningful or personal to them is the key. You need to find the right donor for the right projects, at times you have to let the donor lead you to what they are interested in to maximize the giving opportunity.

For the year we would like to close at least 3-4 more major gifts for special projects or naming opportunities.

## **Advertising**

We have proactively participated in local areas events and publications where we are more likely to reach those who are in the area or nearby and with the means to privately pay or utilize our services. Internally we are working to reach out to more rehab patients who may need to move to assisted living or memory care. While working between different departments has presented some challenges, we are working to have everyone on the same page and understand the need to refer from within to our other facilities. We have taken steps to efficiently screen current patients in rehab who could move to another campus location for those who are not returning to their homes.

We continue to reach out to hospitals and community centers to promote our facilities and services. New individual brochures were created for each option we offer so they can receive specific materials that would best suit their needs. We have begun to have more beneficial relationships with local senior centers to reach out to those who will be eligible to reside with us in the future. For example, we are in the planning stage of joining one of the lunch and learn tours for Waterford's senior center's summer activities. They will bring a tour group for lunch, viewing the campus and

residence options so that when the time comes they are familiar with the process and what may be the best fit for them to remain close to their friends and family nearby.

We run multiple seminars throughout the year for “Matter of Balance” in partnership with many other organizations and hospitals. This gives seniors the skills they need to stay safe in their living environment and prevent falls. They learn and practice exercises that help them to navigate their living space smoothly and safely and useful tips they can enact on their own.

### **A. Human Resources Committee**

- The HR Committee met on February 8, 2023. The following topics were discussed:
  - Succession planning
  - Employee survey

The next meeting date is not scheduled at this time.

**Requested Action: For your information**

### **B. Governance and Nominating Committee**

- The Governance and Nominating Committee met on April 4, 2023. The following topics were discussed:
  - Board/Committee member update
  - Board retreat planning
  - Future topics

The next meeting date is scheduled for August 9, 2023.

**Requested Action: For your information.**

### **C. Philanthropy Committee**

- The Philanthropy Committee met on March 8, 2023. The following topics were discussed:
  - Annual program/lapsed donors
  - Database overhaul
  - Grants
  - Major gifts
  - Website
  - Social media
  - Advertising

The next meeting date is not scheduled at this time.

**Requested Action: For your information.**

#### **D. Quality / Resident Care Committee**

- The Quality/Resident Care Committee met on February 15, 2023. The following topics were discussed:
  - Administrator's report
  - Facility reports
  - Lourdes' nursing report
  - Psychiatric services report
  - Strategic imperatives

The next meeting date is scheduled for May 17, 2023.

**Requested Action: For your information.**

#### **E. Audit and Compliance Committee**

- The Audit and Compliance Committee has not met since the last meeting of the Boards.

The next meeting date is for April 21, 2023.

**Requested Action: For your information**

#### **F. Finance Committee**

- The Finance Committee met on February 1, 2023. The following topics were discussed:
  - Pro-forma financials
  - Ziegler Linkage Fund
  - Financial statement
  - Investment summary
  - Lourdes dashboard
  - COVID-19 financial implications
  - Waterford Township tax assessment inquiry for Mendelson Home
  - Lourdes project update

The next meeting date is scheduled for April 12, 2023.

**Requested Action: For your information.**

**G. Continuing Support Fund Committee**

- The Continuing Support Fund Committee has not met since the last meeting of the Boards.

The next meeting date is scheduled for December 14, 2023.

**Requested Action: For your information.**

## RESIDENT TESTIMONIALS

Do you have any comments or suggestions about ways that we can improve our program and the services we offer?

I don't think I could have stayed at a better place than Lourdes!

- ① a little "twueeking" perhaps, in the meals, by the time my meals were delivered to my room #467, they were generally luke warm at best.
- ② It's always nice to know the names of the aides, Nurses, PT, Staff, etc. However, "Murphy's Law" many badges were turned around and could not be read. I usually

Name: \_\_\_\_\_

asked "... what's your name?"

- ③ This is important to me. I would like to recognize two aides. First, and my number 1 aide, who made my days cheery and loved. Her name is Bernice Garrett. What a wonderful and caring person you have in Bernice!! She is the Very Best.

And, at night, Sitha O'Shaughnessy, tucked me into my Recliner Chair, made sure I had plenty of water, and checked in on me before her shift ended.

Thank you for giving me the opportunity to answer their survey. I am now home in my favorite Recliner! Happy to tell everyone about the excellent care I received at Lourdes Rehab =  
Health Care

Charles Comstock, Waterford, MI

In Loving Memory of  
Fr. Roger Knapp  
December 8, 1951 to December 4, 2022

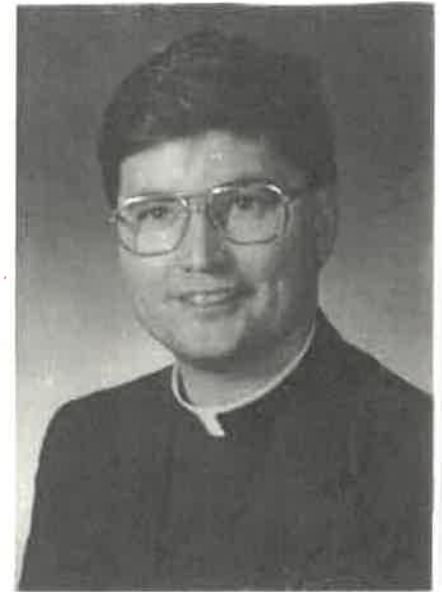


PRAYER OF ST. FRANCIS OF ASSISI

Lord make me an instrument of thy peace.  
Where there is hatred, let me sow love.  
Where there is injury, pardon.  
Where there is doubt, faith.  
Where there is despair, hope.  
Where there is darkness, light.  
Where there is sadness, joy.

O Divine Master, grant that I may  
not so much seek to be consoled as to  
console; to be understood as to  
understand, to be loved as to love; for  
it is in giving that we receive. It  
is in pardoning that we are pardoned,  
and it is in dying that we are born  
to eternal life.

Vermilion-Sajewski Funeral Home  
Plymouth & Westland



Dear Robin and the Mendelson Staff (the clinic, front desk, kitchen,  
the wonderful ladies ♡),  
If I could list you all by  
name & say how grateful I am  
for your kindness towards my  
brother, Fr. Roger. He was a  
great priest & I'm sorry you  
didn't get to experience his  
spiritual support. But he cared  
for all of you and found honor  
& joy each day! Thank you for  
the angel statue. It was a daily comfort.  
I thought you'd enjoy his holy card.  
The St. Francis prayer was his favorite.  
Also, giving a younger picture of him.  
He was & still is a "Rock Star"! Love, Lisa Storch

To know you are with us  
in our time of sorrow,  
Sharing our prayers,  
today and tomorrow.

God gives us comfort  
in the form of family and friends  
May His peace be with you,  
His love never ends.

By the family of

FR. Roger Knapp

Love, Lisa Storch

Do you have any comments or suggestions about ways that we can improve our program and the services we offer?

This facility was very comforting to me including Sister Teresita & Deacon Paul.

The one thing there could be improvement or would be quicker response to bathroom calls.

Name: Alice Filar

Lourdes was a lovely facility with very caring staff. Some of our favorites were Nurse Lori, PT Rachel and Jeanette and aides Gemma, Maureen and Bernice. I visited every day, took Mom to Mass and spoke with all who were part of her care. Really love Maureen (Administrator) as well. Mom is on the Independent Living waiting list and when the time comes, she will be there.

Daughter,  
Donna Turner

Dear Fox Manor Administration  
and Staff,

On behalf of the family of  
Carl Inaurio, I'd like to thank  
you for all the loving kindness  
you've shown my dad, mom  
and all their family over the  
past 12 1/2 years. The Fruit of  
the Spirit ... its attributes ...  
are what comes to mind when  
we think of you all.

The "I am With You Always"  
angel statue is near a  
picture of my parents in my  
home. I will cherish it always.  
We have written to a number  
of Fox Manor residents for their  
personal response to us.

We would also like to thank  
Jammy + "Francesca" for their visits  
and gifts to dad. We are grateful  
to them, Mr + Mrs Schultz and  
Carol for attending. For those who's  
names were absent from the remembrance  
book or were unable to attend, we  
are grateful for your kindness and



prayers for our dad.  
God bless you!  
Rosanne Jewell & the entire Inauro  
family

*Expressions*

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