



OUR LADY OF
**Fatima
 Villa**
 Assisted Living
 Skilled Nursing Facility
 IN THE DOMINICAN TRADITION

Gazette

MAY 2006

A message from Bella Mahoney,
 President & CEO
 There is a lot happening at OLFV, so I wanted to fill you all in on what has occurred recently and tell you what it means for OLFV residents and staff.

RESIDENT SATISFACTION SURVEYS

As many of you know, we recently hired HCS Consulting to conduct resident satisfaction surveys in both skilled nursing and assisted living. I want to thank residents and their families for filling out the surveys. We had a 70% return rate in skilled nursing and 68% in assisted living. We take these surveys very seriously, as they provide us with feedback on what we are doing well, what we need to improve and what is important to our residents day after day.



Highlights of the Skilled Nursing Survey

A number of areas *scored extremely high* in resident satisfaction:

- Competence/friendliness/skill level of direct care staff (CNA's)
- Quality of care
- Cleanliness of rooms and facility
- Concern for safety
- Chaplain
- Preservation of dignity/privacy and respect from staff

At least 85% of residents ranked the above areas as excellent or good. Some areas were as high as 97%. One family member said, "The CNA's are the backbone of OLFV...I am impressed by how most of them carry out their difficult duties and keep smiles on their faces and upbeat attitudes." The consultant noted in his report that scoring so well on the key areas of long term care "bodes well

for the continuing prosperity of the community."

The areas that *scored the lowest* in resident satisfaction:

- Appearance of building
- Parking
- Rehabilitation services
- Lack of prompt return of phone calls by nursing staff

About 25% of the residents ranked the upkeep and repair of the buildings as poor. One resident said, "the SNF needs a facelift...the building is old and needs to be remodeled."

We have the staff working on all of the other areas that scored low in satisfaction and will be implementing changes as appropriate remedies are found.

Highlights of the Assisted Living Survey

The results of the assisted living satisfaction survey were also very positive, for the most part. Please keep in mind that, at the time the surveys were filled out in November/December 2005, the assisted living facility had been open not quite a year and the scores are based on only 17 responses.

The highest scoring areas in assisted living are the same as in skilled nursing.

- Competence/friendliness/skill level of direct care staff
- Quality of care
- Preservation of dignity/privacy and respect from staff

At least 86% of the residents gave the above areas a rating of either good or excellent. One resident said, "It is very friendly here...I think it's the best in the area."
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WE'RE ON THE WEB
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Highlights of the Assisted Living Survey (Continued)

On the negative side, there were three main areas:

- Admission/move-in process
- Parking
- Activities

Many of the negative responses about the move-in process stated that “getting settled was very difficult.” We realize that the transition from your own home to a different living space is extremely stressful. We have initiated a number of changes (including hiring new staff, writing a soon to be released resident handbook and changing our orientation process) that we hope will improve a new resident’s experience. We continue to work with staff on finding improvements in the parking and activities areas. We also are focusing on improving the dining experience, which, although it scored fairly well on the survey, we believe needs improvement in both the quality of the meals and the service in the dining room.



HIRING OF HEALTH SERVICES ADMINISTRATOR

As of this month, we have rented all of the assisted living apartments. We also have been maintaining about 93% occupancy in skilled nursing. During the last six months some trends have been developing that I believed required the addition of a new manager in the health services area. The trends include (1) higher than anticipated acuity of assisted living residents, (2) increased Medicare admissions, (3) RN shortages and the need to use registry to complete staffing, (4) a “feeling” that we may not be maximizing our potential, and (5) turning away skilled nursing admissions because we aren’t prepared for the acuity level.

With these trends in

mind (and with the upcoming “face-lift” on the skilled nursing buildings) I have been looking for an individual who could assist me in solving some of the problems and take advantage of opportunities that are being missed.

I am pleased to announce that we have hired someone, who I believe will be a fantastic asset for OLFV. Her name is Patty Choate-Ciletti and she started on May 1 as our Health Services Administrator. Patty is an R.N. and has experience as a Director of Nursing, Clinical Services, Resident Care and Admissions Coordinator, Restorative Nursing and Wound Care Supervisor, Quality Assurance, and Infection Control. Patty is MDS Certified and

credentialed as Resident Assessment Coordinator. Additionally, Patty is applying to the Nursing Home Administrator Program.

Patty will report directly to me and her primary responsibilities will include 1)providing greater accessibility for family members to discuss care in skilled nursing and assisted living 2) provide oversight of the project to update the Skilled Nursing buildings, 3) to make recommendations for improvement in staff development, rehabilitation services, admissions and other areas that will result in higher quality of care, more cost-effective use of resources and a facility that is more attractive and competitive in our market.

REFINANCING OF OLFV CONSTRUCTION LOAN AND PLANS FOR UPGRADING OUR SKILLED NURSING BUILDINGS

On May 2nd OLFV finalized tax-exempt bond financing that will have numerous benefits for OLFV:

- The refinancing is considered permanent, whereas the previous loan was temporary and was scheduled to expire on June 15th.
- A portion of the bond proceeds have been reserved to (1) repair the shower room in St. Rose (which has been non operational for 14 months because of this problem) and to (2) upgrade the skilled nursing facility (public spaces, resident rooms, bed furnishings, window treatments, etc.)