GRAND TRAVERSE COUNTY DEPARTMENT OF HEALTH AND HUMAN SERVICES BOARD

SPECIAL MEETING Thursday, February 6, 2025 3:00 p.m.

Open to the public Grand Traverse Pavilions 1000 Pavilions Circle Traverse City, MI 49684 Board Room

AGENDA

1. CALL TO ORDER

2. ROLL CALL the member must announce his or her physical location by stating the county, city, township, or village and state from which he or she is attending the meeting remotely.

3. 1st PUBLIC COMMENT

Any person shall be permitted to address a meeting of the Grand Traverse County Department of Health and Human Services Board which is required to be open to the public under the provisions of the Michigan Open Meetings Act, as amended. (MCLA 15.261, <u>et.seq</u>.) Public comment shall be carried out in accordance with the following Board Rules and Procedures:

- 1. Any person wishing to address the Board shall state his or her name and address.
- 2. Persons may address the Board on matters which are relevant to Grand Traverse Pavilions issues.
- 3. No person shall be allowed to speak more than once on the same matter, excluding time needed to answer Board Members questions. The Chairperson shall control the amount of time each person shall be allowed to speak, which shall not exceed three (3) minutes.
 - a) Chairperson may, at his or her discretion, extend the amount of time any person is allowed to speak.
 - b) Whenever a group wishes to address the Board, the Chairperson may require that the group designate a spokesperson; the Chairperson shall control the amount of time the spokesperson shall be allowed to speak, which shall not exceed fifteen (15) minutes.

The Board shall not comment or respond to a person who is addressing the Board. Silence or non-response from the Board should not be interpreted as disinterest or disagreement by the Board.

Please be respectful and refrain from personal or political attacks.

4. Action Items

- Job description/duties
- Qualifications for CEO
- Key characteristics
- Development of interview questions to address key characteristics
- Who is on the interview panel
- Compensation
- Search process/suggestions for posting
- Develop timetable

5. 2nd PUBLIC COMMENT

6. ADJOURNMENT

Added discussion items

GRAND TRAVERSE PAVILIONS

CHIEF EXECUTIVE OFFICER/ADMINISTRATOR

SUMMARY

Responsible for the overall management of the Organization to include the planning, organizing and directing and controlling of those tasks required by laws, regulations, and the governing body.

SUPERVISION RECEIVED

Works under the general supervision of the Grand Traverse County Department of Health and Human Services Board.

SUPERVISION EXERCISED

Responsible directly or indirectly for all positions within the Organization.

RESPONSIBILITIES AND DUTIES

An employee in this position may be called upon to do any or all of the following: (Does not include all tasks employee may be expected to perform.)

COMMUNITY COMMITMENT

- **A.** Participate in organizations that support and assist in the goals of the Grand Traverse Pavilions/Grand Traverse Medical Care.
- B. Participate on national, state and local boards working and advisory as they arise.
- C. Assist in the creation of and participation in new Grand Traverse County Department of Health and Human Services initiatives as they pertain to all the visions, goals and objectives of the Pavilions.
- D. Ensure effective communication by managing media responses to the growth and change of the Grand Traverse Pavilions/Grand Traverse Medical Care.
- E. Exhibits global thinking and knowledge in relation to national, state and local health care direction.

REGULATORY MANAGEMENT/GOVERNANCE

- A. Interprets federal and state regulations to assure compliance and efficient integration with established policies and procedures of the Organization.
- B. Ensures compliance of the Organization with government regulations.
- C. Oversees medical reporting, staffing, and procedures in order to assure compliance with regulations and quality care.

- D. Evaluates staff work procedures and policies to assure compliance with federal and state regulations.
- E. Provides management reports to facilitate decision making by the governing body.
- F. Interprets the governing body's philosophy and goals to the staff to assure that the board's intent is followed and established policies and procedures reflect the governing body's philosophy.
- G. Acts as liaison between the governing body, regulatory agencies, and the public.
- H. Develops, implements, and monitors legal liability risk management for the facility, the administration, and the governing body.

MANAGEMENT AND GENERAL ADMINISTRATION

- A. Develops long and short range objectives in order to assure that resident care is maintained and improved through Organization programs, policies, and procedures.
- B. Interprets the philosophy and goals of the Organization in order to provide staff with adequate information to select appropriate objectives to attain the goals.
- C. Sets an example of good resident relations and care for staff by demonstrating desired supervisory techniques, communication, and resident and family interaction.
- D. Evaluates the quality of resident care, resident rights, and the efficiency of services in order to maintain care standards by reviewing the achievement or non-achievement of the organization's goals, objectives, resident care plans, and effectiveness of management policy and procedures.
- E. Oversees and ensures departmental coordination toward the achievement of goals and activities by developing an information and communication system between departments which keeps them informed and ensures the CEO/Administrator will be informed of their activities.
- F. Communicates with staff to solve problems through the selection of the appropriate communication techniques: staff meetings, department head meetings, counseling, and coordination of written information.
- G. Oversees the assurance or preparation of an annual budget of the Organization in order to appropriately allocate resources to meet the facility's financial and program objectives and to prepare in advance potential cost control and managerial actions which may be required.

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- H. Oversees the research and appropriateness of installing and maintaining advanced automation equipment (including computer hardware and software) that enhances the Organization's operations, management decisions, staff capabilities, and resident care.
- I. Ensures that the Organization complies with federal, state, and local laws and regulations to meet standards of quality resident care.

RESIDENT CARE

- A. Ensures quality resident care through planning, implementation, and evaluation of nursing services to maintain maximum health potential: social services to meet psychological and social needs and rights; dietary services to meet nutritional requirements and needs; medical services to ensure appropriate medical care; activities to meet the social recreational and therapeutic recreational needs; clinical records program to ensure continuity of care, pharmaceutical program to support appropriate medical care; and rehabilitation services that will maintain and/or maximize potential of residents; auxiliary services to enhance quality of life for residents; environmental services to provide a pleasing environment; and satisfaction index surveys to evaluate quality of care and quality of life.
- B. Recruits, hires, and provides ongoing education for a health care team in order to assure quality care of the long-term care resident.
- C. Obtains and oversees consultant services as needed for total care (dental, speech and hearing, pharmacist, OT, PT, mental health, etc.) by assessing the needs of residents and arranging services of consultants.
- D. Oversees and ensures the development and evaluation, with the health care team, of resident care goals and policies in order to assure that adequate resources, environments, and services are provided to the residents.
- E. Recruits a qualified Medical Director and develops a professional relationship with the Medical Director that ensures a well-planned and implemented medical care program.
- F. Ensures that staff make appropriate discharge decisions, that services are in place to assure the discharged resident's success at home and that the Organization does not incur liability in the discharge or transfer to another level of care.
- G. Maintains positive working relationships with the Medical Director and community

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medical practitioners, including attending physicians and physician extenders.

- H. Promotes communication between the Organization's staff and the residents in order to assure a caring environment with appropriate nursing and psycho social services.
- I. Oversees and ensures Organization standards for resident care by identifying those factors which affect care, as well as variables within each factor which can be adjusted and evaluated.
- J. Develops programs to assure staff adherence to Residents' Bill of Rights.

PERSONNEL MANAGEMENT

- A. Oversees and ensures the development of and disseminates written personnel policies and procedures including job descriptions, employee expectations, employer benefits, and performance appraisal processes.
- B. Establishes safety rules and procedures that incorporate federal regulations and OSHA requirements to ensure employee health and safety.
- C. Promotes productivity and good morale among personnel to assure quality of life and care for residents by providing motivation, a good working environment, and recognition for quality work.
- D. Ensures a positive atmosphere for communication between management and employees through receptive management and the use of various media.
- E. Establishes clear lines of authority and responsibility within the staff in order to assure understanding and production of quality work and the methods for its accomplishment.
- F. Oversees the recruitment and hiring of qualified supervisors to meet the requirements of their position by identifying a number of qualified individuals, screening applicants, interviewing and hiring the person who most clearly meets the requirements.
- G. Oversees and ensures the development and implementation of personnel policies and procedures based on the goals of the Organization in order to assure fair and efficient procedures are followed in recruitment, hiring, employment, and termination of staff.
- H. Establishes wage and salary scales which attract competent staff while controlling costs within the budget.

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- I. Oversees and ensures an orientation program to facilitate adjustment of employees to the Organization and the job through appropriate educational methodology.
- J. Oversees a program which will provide an opportunity for the personal growth and development of employees through a performance evaluation process.

FINANCIAL MANAGEMENT

- A. Oversees and ensures an integrated financial program to meet the Organization's goals.
- B. Oversees and ensures the development of a budget which assures allocation of fiscal resources to meet regulatory requirements and provides quality services at a reasonable cost.
- C. Evaluates the implication of budget on the quality of care.
- D. Ensures generally accepted accounting practices in accordance with sound financial management.
- E. Oversees financial controls, checks and balances, to operate within budget.
- F. Projects and monitors cash flow, investments, and capital expenditures to ensure financial stability.
- G. Projects income and identifies revenue sources in order to meet the financial goals of the Organization.
- H. Oversees and ensures the financial goals of the governing body into management plans and budgets to achieve these goals by selecting appropriate objectives such as facility size, growth, structure, care and service, staffing, etc., to meet these goals.
- I. Plans future programs and estimates costs to reach decisions on growth, expansion, building, staffing, and investment by identifying objectives and costs of future programs.
- J. Projects insurance needs of Organization and secures appropriate coverage.
- K. Oversees financial reporting and audit systems.
- L. Analyzes current financial performance to ensure conformance with long term

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goals and standards of quality.

ENVIRONMENTAL MANAGEMENT

- A. Oversees and ensures the maintenance of building grounds and equipment.
- B. Oversees and ensures a program of environmental services which provides a clean and attractive home for residents, staff, and visitors.
- C. Oversees and ensures a safety plan which ensures the health, welfare, and safety of residents, staff, and visitors.
- D. Oversees and ensures employee health, safety, and educational programs which minimize the Organization's exposure to liability.
- E. Oversees and ensures fire, emergency, and disaster plans to protect the safety and welfare of residents, staff, and property.

WORKING CONDITIONS

- 1. Works in an environment with noise, frequent interruptions, and may include exposure to unpleasant odors, odorous wounds, urine, feces, other excrements, cleaning product chemicals and disinfectants.
- 2. Position requires standing, walking, lifting, bending and sitting.

DESIRABLE QUALIFICATION FOR EMPLOYMENT

An employee in this class, upon appointment, should have the equivalent of the following knowledge, training and experience:

Considerable skills in planning, organizing, directing and controlling, as evidenced by previous successful job performance.

Possess diplomacy, communication skills, good judgement, and other interpersonal skills.

Leadership ability as evidenced by ability to build an effective team and accomplish goals within desired time frames.

Must show strong self-driven initiative and the ability to anticipate, prevent, and solve problems.

Required training and experience to include a Bachelor's degree in Health Administration or Business, or a minimum of 5 years successful experience as an administrator in a long term setting. A master's degree is preferred.

Must possess a valid Michigan Nursing Home Administrator's license.

Administrator/CEO page 7 ACKNOWLEDGMENT:

I have read this job description and fully understand the requirements set forth therein. I hereby accept the position of Chief Executive Officer/Administrator and agree to perform the identified essential functions in accordance with the organizations established procedures.

I further understand that my employment is at-will and thereby understand that my employment can be terminated at-will either by the Organization or myself and that such termination can be made with or without notice.

Date

Signature / Administrator/CEO

Date

Signature / Department of Health and Human Services Board / Vice Chair

10/05/21 KH/dg

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Job Description: Chief Executive Officer (CEO)

Grand Traverse Pavilions

Summary:

The Chief Executive Officer (CEO) provides strategic leadership and oversight for operations governed by the Grand Traverse County Department of Health and Human Services Board, including Grand Traverse Pavilions, PACE North, and the Grand Traverse Pavilions Foundation, Inc. The CEO ensures alignment with the organizations' mission, vision, and values while recognizing the unique responsibilities of operating a county-owned medical care facility. This role includes oversight of the Skilled Nursing Facility, Assisted Living (The Cottages), Independent Living operations, shared services (Finance, Human Resources, IT, Administrative Services), fundraising activities, marketing, and inpatient/outpatient therapy services.

Supervision Received:

Reports directly to the Grand Traverse County Department of Health and Human Services Board.

Supervision Exercised:

- Provides oversight to the Medical Care Facility Administrator (who manages daily skilled nursing operations)
- Supervises Therapy Directors, Cottages Director, and shared service departments (Finance, HR, IT, and Administrative Services)
- Oversees marketing activities and provides guidance to fundraising functions in coordination with the Grand Traverse Pavilions Foundation, Inc.

Responsibilities and Duties

1. Strategic Leadership

- Develop and implement organizational strategies to achieve short- and longterm goals, ensuring alignment with county-owned facility objectives.
- Assess and adapt to evolving healthcare industry trends, regulatory changes, and best practices, and;
- Oversee campus planning initiatives, including relationships with Munson Healthcare, other Grand Traverse Commons entities, and relevant community organizations.

2. Operational Oversight

 Provide strategic guidance and direction to the Medical Care Facility Administrator, who exercises substantial autonomy in the day-to-day operations, staff management, and regulatory compliance of the 240-bed county-owned skilled nursing facility.

- Retain ultimate responsibility for ensuring that the skilled nursing facility meets local, state, and federal healthcare regulations, achieves financial targets and aligns with the mission and strategic goals of Grand Traverse Pavilions.
- Ensure effective utilization of The Cottages (assisted living), independent living apartments, and inpatient/outpatient therapy operations.
- Oversee shared services, ensuring alignment with organizational priorities, and;
- Monitor organizational performance metrics to maintain high standards for resident satisfaction, employee engagement, and financial outcomes.

3. Board and Community Engagement

- Serve as the primary liaison to the DHHS Board, providing regular updates on organizational performance, strategic initiatives, and financial results.
- Participate in the PACE North and Grand Traverse Pavilions Foundation, Inc. Boards of Directors, and;
- Build and maintain relationships with community stakeholders, donors, public officials, and external partners to enhance the facility's reputation and foster community support.

4. Marketing and Fundraising Oversight

- Oversee the development and execution of marketing strategies to promote Grand Traverse Pavilions' services, programs, and community presence.
- Provide oversight to fundraising activities, working in collaboration with the Grand Traverse Pavilions Foundation, Inc. to ensure alignment with organizational priorities, and;
- Support philanthropic efforts, ensuring compliance with relevant regulations and best practices.

5. Fiscal Accountability

- Oversee the organization's fiscal activity, including the development of operating and capital budgets, financial reporting, and auditing procedures.
- Identify and implement strategies to optimize reimbursement and ensure financial sustainability.
- Lead or oversee union negotiation efforts, ensuring all decisions reserved for the DHHS Board are brought to the Board for approval, and;
- Manage organizational insurance and risk management programs to safeguard assets and uphold the interests of the county-owned facility.

6. Governance and Compliance

- Maintain compliance with applicable federal, state, and local regulations, including Michigan's Open Meetings Act, ensuring that all organizational policies and procedures meet regulatory standards.
- Collaborate with the Medical Care Facility Administrator and departmental leadership to ensure adequate resources, staff qualifications, and ongoing training, and;
- Ensure that matters requiring Board approval are presented in a timely and comprehensive manner.

Qualifications

- Education: Master's degree in Health Administration, Business Administration, or Public Administration.
- **Experience:** Minimum of 5 years of executive leadership experience in healthcare, senior living, or a related environment, with demonstrated success in strategic planning, operational management, and board governance.
- Healthcare Knowledge: Comprehensive knowledge of healthcare regulations, compliance requirements, and the unique responsibilities associated with county-owned medical care facilities.
- Leadership Skills: Strong interpersonal, communication, and leadership abilities, including the capacity to develop and lead high-performing teams.
- **Financial Competency:** Proven experience in financial management, budgeting, and reimbursement models within a healthcare or long-term care setting.
- **Community Engagement:** Demonstrated ability to cultivate strong relationships with community stakeholders, donors, and public officials.

Physical Requirements and Working Conditions

- Ability to sit for extended periods while performing administrative duties.
- Frequent use of a computer, including typing and screen-based work.
- Occasional lifting of items weighing up to 25 pounds.
- Ability to navigate within the facility and attend off-site meetings as necessary.

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Chief Executive Officer (CEO) Interview Guide *Grand Traverse Pavilions*

Below is a structured interview guide designed to foster a meaningful conversation over 90–120 minutes. The questions are grouped by key competency areas relevant to Grand Traverse Pavilions' mission, values, and the responsibilities of a county-owned facility. Each section includes open-ended prompts aimed at revealing a candidate's character, leadership style, and strategic approach. Encourage follow-up questions based on the candidate's responses to delve more deeply into their experiences and values.

1. Introduction and Organizational Alignment

- 1. Tell us about your background and why you're interested in leading a county-owned medical care facility like Grand Traverse Pavilions.
 - *Possible Follow-Up:* What does public accountability mean to you in this context?
- 2. How do you define success for an organization that balances community service, regulatory compliance, and fiscal responsibility?
 - Possible Follow-Up: Can you share an example from your past experience?

2. Strategic Vision and Innovation

- 3. What is your approach to long-term strategic planning in a healthcare or senior living environment?
 - *Possible Follow-Up:* Can you describe a time you effectively anticipated industry changes or regulatory shifts?
- 4. Grand Traverse Pavilions is a multifaceted campus (skilled nursing, assisted living, independent living, PACE, and Foundation). How would you ensure synergy among these operations while maintaining each one's distinct goals?
 - Possible Follow-Up: What metrics or data points do you prioritize to measure success?

3. Leadership Style and Team Management

- 5. Describe your leadership style. How do you motivate and unite diverse teams, including both clinical and non-clinical staff?
 - *Possible Follow-Up:* Share a specific instance when you overcame generational or departmental silos.
- 6. Tell us about a challenging leadership moment in your career. What was the situation, how did you handle it, and what was the result?
 - Possible Follow-Up: How did you apply lessons from that experience to future decisions?

4. Culture, Values, and Ethical Decision-Making

- 7. Grand Traverse Pavilions emphasizes empathy, transparency, and accountability. How have you fostered a similar culture in previous roles?
 - *Possible Follow-Up:* Can you share an example of a time you had to make a difficult decision that tested your values?
- 8. What methods do you use to handle conflicts—whether with staff, leadership teams, or external stakeholders—while maintaining trust and respect?
 - Possible Follow-Up: How do you balance the well-being of residents/patients with organizational needs during conflict resolution?

5. Community and Stakeholder Engagement

- 9. As CEO, you will serve as a liaison to the DHHS Board and other stakeholders. How do you establish and maintain strong relationships with boards, donors, and community partners?
 - *Possible Follow-Up:* Can you discuss a time you successfully navigated sensitive board or community relations?
- 10. How do you envision strengthening community awareness of Grand Traverse Pavilions' programs and services?
 - *Possible Follow-Up:* What role should marketing play in driving engagement and building public trust?

6. Fundraising and Financial Stewardship

- 11. While fundraising responsibilities here involve oversight rather than primary solicitation, describe your experience guiding philanthropic or fundraising teams.
 - Possible Follow-Up: How do you ensure transparency and integrity in fundraising activities?
- 12. How have you approached financial management, budgeting, and revenue optimization in a similar healthcare or senior living context?
 - Possible Follow-Up: Give an example of a time you balanced cost-control measures with the need to maintain high-quality resident care.

7. Regulatory Compliance and Risk Management

- 13. What experience do you have working with state and federal regulations, particularly in long-term care or skilled nursing settings?
 - Possible Follow-Up: How do you stay current on evolving regulations, and how do you prepare your team for compliance?
- 14. Can you share an example of a major regulatory or compliance challenge you faced? How did you address it and what was the outcome?
 - Possible Follow-Up: What systems or processes did you put in place to prevent future issues?

8. Union Relations and Organizational Structure

- 15. Describe your experience with union negotiations or managing unionized staff. How would you collaborate with union representatives to address workforce needs?
 - Possible Follow-Up: How do you ensure fair outcomes for both staff and the organization?
- 16. We are moving from a combined CEO/Administrator model to separate roles. How would you establish a productive working relationship with the Medical Care Facility Administrator and other departmental leaders?
 - Possible Follow-Up: How do you differentiate the responsibilities of each role while maintaining cohesive leadership?

9. Personal Reflection and Closing

- 17. What do you see as your primary opportunities for professional growth, and how do you continually develop as a leader?
 - Possible Follow-Up: How do you remain adaptable and resilient in changing healthcare landscapes?
- 18. In your view, what does it mean to "lead from the front" in a complex, county-owned medical care facility?
 - Possible Follow-Up: How would you measure your personal impact on the organization's culture and success?
- 19. Do you have any final thoughts or questions for us about Grand Traverse Pavilions, its mission, or this role?

Interview Logistics & Format

- **Duration:** Allocate approximately 5–7 minutes per question, allowing time for follow-up questions and candidate elaboration.
- **Panel Participation:** Identify key Board members or departmental leaders who will ask each question to maintain structure.
- Notes & Scoring: Encourage interviewers to take detailed notes on key insights, examples, and behaviors that align with the organization's values and objectives.

This guide is designed to elicit in-depth responses that reveal the candidate's leadership philosophy, ethical framework, and operational expertise. By asking open-ended questions and following up based on the candidate's answers, the Board can gain a comprehensive understanding of whether the candidate will thrive as the next CEO of Grand Traverse Pavilions.

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Essential Job Functions Nursing Home Administrator

Any individual who is working as the Nursing Home Administrator in a Skilled Nursing Facility (SNF) licensed by the state or certified as a Medicare/Medicaid provider should have the following job skills and perform the following functions. The identification of these jobs functions/skills is based on the assumptions that:

1. The patient/resident population is frail, complex in nature and experiences many illnesses and dysfunctions.

2. It is imperative to identify the essential mix of administrative/management skills, knowledge of fiscal management, ethical principles and decision making skills, and the knowledge of local, state, federal and other regulatory requirements that the Nursing Home Administrator must possess or develop in order to lead, administer and manage a long-term care facility.

FRAMEWORK

The framework for the essential core functions are contained in the facility's job description/position description for the Nursing Home Administrator. The five principles that form the organizing framework for the essential core functions include the following:

1. Knowledge and expertise in management of the frail geriatric and other long-term care patient/resident;

2. Experience and skill in:

- a) Leadership and mentoring;
- b) Development and implementation of a facility management system;
- c) Administration, management, supervision and coordination of all departments
- to insure appropriate care;
- d) Use of computers and other technological resources;
- e) Oversight of a facility quality assurance process;
- f) Financial management of a health care facility.

3. Knowledge of pertinent local, state, federal and other regulations and ability to implement and maintain compliance with these regulations governing the facility, patient/resident care, and reimbursement;

4. Experience in developing professional relationships and representing the facility in professional and community activities;

5. Participation in educational programs for continued professional development.

I. RESPONSIBILITIES

The Nursing Home Administrator's role falls under the following domains and associated tasks:*

A. RESIDENT CARE AND QUALITY OF LIFE

 Ensure that nursing services are planned, implemented, and evaluated to maximize resident quality of life and quality of care.

Ensure that social service programs are planned, implemented, and evaluated to meet resident
psychological and social needs and preferences to maximize resident quality of life and quality of
care.

- Ensure that the food service program is planned, implemented, and evaluated to meet the nutritional needs of residents to maximize resident quality of life and quality of care.
- Ensure that medical services are planned, implemented, and evaluated to meet resident medical care needs and preferences to maximize resident quality of life and quality of care.

- Ensure that therapeutic recreation/activity programs are planned, implemented, and evaluated to
 meet the needs, and interests of residents to maximize resident quality of life and quality of care.
- Ensure that a health information management program for resident care is planned, implemented, and evaluated to meet documentation requirements.
- Ensure that a pharmaceutical program is planned, implemented, and evaluated to support medical
 care for residents to maximize resident quality of life and quality of care.
- Ensure that a rehabilitation program is planned, implemented, and evaluated to maximize residents' optimal level of functioning.
- Identify, monitor, and ensure that quality indicators and quality assurance programs are utilized to
 maximize effectiveness in resident care and services.
- Ensure the integration of Resident Rights with all aspects of resident care.
- Ensure development, implementation, and review of resident care policies and procedures.
- Ensure that the facility complies with applicable federal, state, and local standards and regulations.

B. HUMAN RESOURCES

- Facilitate the process of communication between management and staff (for example, coaching, counseling).
- Develop, implement, and monitor recruitment, development, evaluation, and retention programs to provide quality resident care and services (for example recognition programs, job satisfaction surveys).
- Ensure that human resources programs are planned, implemented, and evaluated to meet resident and staff cultural diversity needs.
- Develop, implement, and monitor compensation and benefit program for staff.
- Ensure that human resource management policies and programs are planned, implemented, and evaluated in compliance with governmental entities, laws, and regulations (for example, job descriptions, education programs, union relations).
- Ensure the development and implementation of employee health and safety programs to provide a safe work place environment (for example, risk management, OSHA, wellness programs).

C. FINANCE

- Develop and manage annual operating and capital budgets to effectively utilize fiscal resources.
- Develop and implement financial policies, procedures, and systems to monitor financial performance (for example, accounts payable/ receivable, resident trust).
- Ensure adequate revenue (for example, new sources/services, fund raising, borrowing sources).
- Negotiate, interpret, and implement financial aspects of contractual agreements (for example, organized labor, managed care, vendor, and consultative services).
- Manage financial audit and reporting systems (for example, corporate compliance, charitability, information systems).
- Ensure protection of facility assets (for example, insurance coverage, and risk management).

· Ensure training and education of staff regarding financial management.

D. PHYSICAL ENVIRONMENT AND ATMOSPHERE

- Ensure that a system for maintaining and improving buildings, grounds, and equipment is planned, implemented, and evaluated.
- Ensure that the facility provides a clean, attractive, and home-like environment for residents, staff, and visitors.
- Ensure the planning, implementation, and evaluation of an environmental safety program that will
 maintain the health, welfare, and safety of residents, staff, and visitors.
- Ensure the planning, implementation, and evaluation of an emergency program that protects the safety and welfare of residents, visitors, staff, and property.
- Identify, monitor, and ensure that quality assurance programs are utilized to maximize
 effectiveness in environmental services.
- Ensure the integration of resident rights with all aspects of the facility environment.
- Ensure development, implementation, and review of environmental policies and procedures.
- Ensure that facility complies with applicable federal, state, and local standards and regulations (for example, ADA, OSHA, CMS, Life Safety Code).
- Ensure a comprehensive preventative maintenance program is developed and implemented.
- E. LEADERSHIP AND MANAGEMENT
 - Ensure that policies and procedures are developed, implemented, monitored, and evaluated in order to maintain compliance with directives of governing entities.
 - Ensure that policies and procedures are developed, implemented, monitored, and evaluated in order to maintain compliance with federal, state, and local rules and regulations.
 - Observe, monitor, and evaluate outcomes of all of the facility's programs, policies, and procedures, to ensure effectiveness, and to fulfill administrative responsibility (for example, facility license) and professional responsibility (for example, personal NHA license).
 - Promote residents and families/responsible parties' satisfaction with quality of care and quality of life.
 - Ensure administrative oversight of the survey process.
 - Conduct administrative review of survey outcomes to develop appropriate response (for example, no response, preparation of plan of correction, preparation of documentation for Informal Dispute Resolution [IDR]).
 - Educate staff/residents/families/responsible parties and other key groups in regards to interpretation of and compliance with regulatory requirements.
 - Educate nursing home board and/or governing entity regarding their roles and responsibilities, and monitor their actions to ensure adherence to by-laws and regulations.
 - Identify areas of potential legal liability, and develop and implement an administrative intervention or risk management program to minimize or eliminate exposure.
 - Develop or influence a strategic planning process to ensure viability of facility.

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- Participate in professional development activities.
- Develop leadership skills of management team and key staff.
- Ensure that information management systems are in place to support facility operations.
- Ensure that resources (for example, supplies, medical equipment, technology, trained staff) are in place to provide resident care and to promote quality of life.
- Develop and implement a comprehensive marketing and consumer education program.
- Develop and implement a media relations program including proactive (for example, promoting positive images about the facility and/or industry) and reactive programs (for example, situation-specific responses to adverse incidents).
- Plan, implement, and provide integration between the facility and other community resources (for example, educational institutions, hospitals, vendors).
- Monitor the political climate and formulate action to affect the political process.

II. KNOWLEDGE AND SKILLS

A. RESIDENT CARE AND QUALITY OF LIFE

- · Federal, state and local standards and regulation
- Aging process (psychological)
- Aging process (physiological)
- · Definition, concept, and basic principles of nursing
- · Basic principles of restorative nursing
- · Basic principles of rehabilitation
- · Basic principles of infection control
- Basic principles and regulations for handling administration, labeling, record keeping, and destruction
 of drugs and biologics
- Resident care needs
- · Resident Assessment Instrument (RAI) and interdisciplinary care plan requirements and process
- · Admission, transfer, and discharge requirements/regulations
- Techniques of auditing resident care and service outcomes
- · Roles of resident care staff and consultants
- Physiological, social, emotional, psychological, spiritual, financial, and legal service needs of
 residents and their families
- Communication techniques
- · Dynamics of interpersonal relationships
- · Available resources (for example, community, social, financial)
- Grieving process
- · Death and dying
- Group dynamics
- Resident rights
- Advanced directives
- Basic nutritional requirements
- · Basic principles of food storage, handling, preparation, and presentation
- Resident dining experience
- Meal frequency
- · Therapeutic or specialized diets

- Principles of dietary sanitation
- Food service delivery
- Nutritional supplements
- Basic medical terminology
- Provision of basic specialty medical services (for example, optometry, podiatry, dental, psychiatry, psychology)
- Role of physician services
- Role of medical director
- Frequency of physician visits
- Provision of emergency medical services
- Physician/resident relationship(s)
- · Quality assurance processes as it relates to resident care and services
- Basic therapeutic recreation/activity needs of residents
- Clinical medical record content and format
- Federal documentation requirements
- Chemical and physical restraints
- Confidentiality and safeguarding clinical record information
- Centers for Medicare and Medicaid Services (CMS) quality indicators

- · Recognizing whether or not resident needs are met.
- Utilizing basic counseling methods and crisis intervention techniques
- Relationship building
- Analyzing and interpreting customer satisfaction data
- · Interpreting Centers for Medicare and Medicaid (CMS) quality indicators
- Analyzing and interpreting effectiveness of quality assurance data related to resident care and service outcomes.
- Interpersonal communication (for example, individuals from diverse backgrounds, cognitively impaired residents)

B. HUMAN RESOURCES

- Methods of communication
- Communication technology (for example, e-mail, voice mail, computer software)
- Criminal background checks/nursing assistant registry
- Employee interview procedures
- Facility staffing needs and requirements
- Staff position qualifications
- Staff licensure requirements
- Staff education/in-service requirements
- Confidentiality requirements
- · Recruitment and retention methods
- · Employment history and verification methods
- Drug-free workplace programs
- · Staff development requirements, resources, and models
- Staff corrective action methods
- Staff recognition and appreciation techniques
- Employee evaluation process
- Staff scheduling techniques

- · Federal, state, and local labor and civil rights laws
- Federal and state rules and regulations (for example, Family Medical Leave Act, Occupational Health and Safety Act, Americans with Disabilities Act, Equal Employment Opportunity Commission)
- Safety programs and requirements
- Worker's compensation rules and procedures
- Injury-prevention and return-to-work program
- Ethical behavior of staff

- Written and oral communication
- · Coaching, counseling, and teaching
- · Facilitating group meetings (for example, departmental staff meetings)
- Negotiating
- Interviewing (for example, pre-employment, investigations, exit)
- Analyzing and interpreting employee performance
- Team-building
- Motivating employees
- Analyzing and interpreting human resource programs

C. FINANCE

Knowledge of:

- · Budgeting methods and financial planning
- Accounting methods (for example, Generally Accepted Accounting Practices, cash and accrual) and regulatory requirements
- Financial statements
- · Reimbursement sources and methods (for example, Medicare, Medicaid, managed care)
- · Federal, state, and local regulations affecting nursing home reimbursement
- Potential revenue sources
- · Internal controls (for example, purchasing, inventory, accounting, departmental)
- · Payroll procedures and documentation
- · Accounts receivable, collection, and billing procedures
- Accounts payable procedures
- Risk management
- · Eligibility and coverage requirements from third party payors

Skill in:

- · Analyzing and interpreting budgets and financial statements
- · Interpreting financial regulations as they apply to reimbursement
- · Managing cash flow
- · Analyzing and identify trends in financial performance of facility

D. PHYSICAL ENVIRONMENT AND ATMOSPHERE

- · Preventative maintenance systems
- · Equipment needs and management

- Local, state, and federal codes, rules and regulations for buildings, grounds, equipment and maintenance including ADA, OSHA, Life Safety Codes, and NFPA
- · Roles of environmental staff (such as housekeeping, maintenance, laundry)
- · Waste management, including infectious waste
- Basic housekeeping concepts and procedures
- Basic sanitation concepts and procedures
- Basic infection control concepts and procedures
- Pest control
- Basic concepts regarding personal protective equipment (PPE)
- · Potential hazards (for example, biohazards, blood-borne pathogens, hazardous materials)
- Security measures
- · Elements of fire and disaster programs
- Community emergency resources
- · In-house emergency equipment
- Evacuation resources and requirements
- · Emergency procedures (for example, elopements, personal injuries)
- · Quality assurance as it relates to environmental services

- Analyzing physical plant needs
- · Recognizing environmental impact on residents
- Analyzing and interpreting effectiveness of quality assurance data related to environmental service and safety outcomes
- · Interpreting and applying safety codes
- · Interpreting and implementing life safety codes
- · Crisis management
- Interpersonal communication

E. LEADERSHIP AND MANAGEMENT

- Federal, state and local laws, regulations, agencies and programs such as Medicare, Medicaid, Occupational Safety and Heath Administration (OSHA), Americans with Disabilities Act (ADA), Fair Labor Standards Act (FLSA), Equal Employment Opportunity Commission (EEOC), Safe Medical Devices Act (SMDA)
- Corporate compliance
- · Potential legal liability of the facility
- · Potential legal and criminal liability of administrator
- · Codes of ethics of professional associations and standards of practice of state boards
- Quality improvement models (for example, continuous quality improvement (CQI), quality assurance (QA), total quality management (TQM), performance improvement (PI))
- · Facility licensing requirements
- Certification survey tasks
- · Quality indicators reports and on-line survey certification reports (OSCAR)
- Survey process including scope and severity grid as well as remedies and acceptable plan of correction
- Management information systems
- Technology to support facility operations (for example, medical, security, environmental, work-place safety)
- · The role of each component of long-term care in the healthcare continuum

- · Functions of all departments and services provided
- · Management principles and philosophies
- Methods for assessing and monitoring resident and responsible parties' satisfaction with quality of care and quality of life
- · Techniques of conflict resolution
- · Grievance procedures for residents and families/responsible parties
- Resident rights
- The role of the resident ombudsman
- Oral and written communications techniques
- Risk management principles
- Public relations and marketing techniques

- · Interpreting rules and regulations, and policies and procedures
- Managing the change process
- Analyzing facility compliance
- Identifying relevant information
- Prioritizing alternative solutions
- Using basic counseling methods
- Negotiating techniques
- Problem solving
- Time management
- Conflict resolution and mediation
- Oral and written communications skills
- Cultivating effective relationships
- Managing organizational behavior

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III ACHCA CODE OF ETHICS (adopted by NAB 2006)

PREAMBLE: The preservation of the highest standards of integrity and ethical principals is vital to the successful discharge of the professional responsibilities of all long-term health care administrators. This Code of Ethics has been promulgated by the American College of Health Care Administrators (ACHCA) in an effort to stress the fundamental rules considered essential to this basic purpose. It shall be the obligation of members to seek to avoid not only conduct specifically proscribed by the code, but also conduct that is inconsistent with its spirit and purpose. Failure to specify any particular responsibilities or practice in this Code of Ethics should not be construed as denial of the existence of other responsibilities or practices. Recognizing that the ultimate responsibility for applying standards and ethics falls upon the individual, the ACHCA establishes the following Code of Ethics to make clear its expectation of the membership.

EXPECTATION I

Individuals shall hold paramount the welfare of persons for whom care is provided.

PRESCRIPTIONS: The Health Care Administrator shall:

- Strive to provide to all those entrusted to his or her care the highest quality of appropriate services
 possible in light of resources or other constraints.
- Operate the facility consistent with laws, regulations, and standards of practice recognized in the field of health care administration.
- Consistent with law and professional standards, protect the confidentiality of information regarding individual recipients of care.
- Perform administrative duties with the personal integrity that will earn the confidence, trust, and
 respect of the general public.
- Take appropriate steps to avoid discrimination on basis of race, color, sex, religion, age, national
 origin, handicap, marital status, ancestry, or any other factor that is illegally discriminatory or not related to
 bona fide requirements of quality care.

PROSCRIPTION: The Health Care Administrator shall not:

 Disclose professional or personal information regarding recipients of service to unauthorized personnel unless required by law or to protect the public welfare.

EXPECTATION II

Individuals shall maintain high standards of professional competence.

PRESCRIPTIONS: The Health Care Administrator shall:

- Possess and maintain the competencies necessary to effectively perform his or her responsibilities.
- Practice administration in accordance with capabilities and proficiencies and, when appropriate, seek
 counsel from qualified others.
- Actively strive to enhance knowledge of and expertise in long-term care administration through continuing education and professional development.

PROSCRIPTIONS: The Health Care Administrator shall not:

- Misrepresent qualifications, education, experience, or affiliations.
- Provide services other than those for which he or she is prepared and qualified to perform.

EXPECTATION III

Individuals shall strive, in all matters relating to their professional functions, to maintain a professional posture that places paramount the interests of the facility and its residents.

PRESCRIPTIONS: The Health Care Administrator shall:

• Avoid partisanship and provide a forum for the fair resolution of any disputes which may arise in service delivery or facility management.

• Disclose to the governing body or other authority as may be appropriate, any actual or potential circumstance concerning him or her that might reasonably be thought to create a conflict of interest or have a substantial adverse impact on the facility or its residents.

PROSCRIPTION: The Health Care Administrator shall not:

Participate in activities that reasonably may be thought to create a conflict of interest or have the potential to have a substantial adverse impact on the facility or its residents.





EXPECTATION IV

Individuals shall honor their responsibilities to the public, their profession, and their relationships with colleagues and members of related professions.

PRESCRIPTIONS: The Health Care Administrator shall:

- Foster increased knowledge within the profession of health care administration and support research
 efforts toward this end.
- Participate with others in the community to plan for and provide a full range of health care services.
- Share areas of expertise with colleagues, students, and the general public to increase awareness and
 promote understanding of health care in general and the profession in particular.
- Inform the ACHCA Standards and Ethics Committee of actual or potential violations of this Code of Ethics, and fully cooperate with ACHCA's sanctioned inquiries into matters of professional conduct related to this Code of Ethics.

PROSCRIPTION: The Health Care Administrator shall not:

Defend, support, or ignore unethical conduct perpetrated by colleagues, peers or students.