

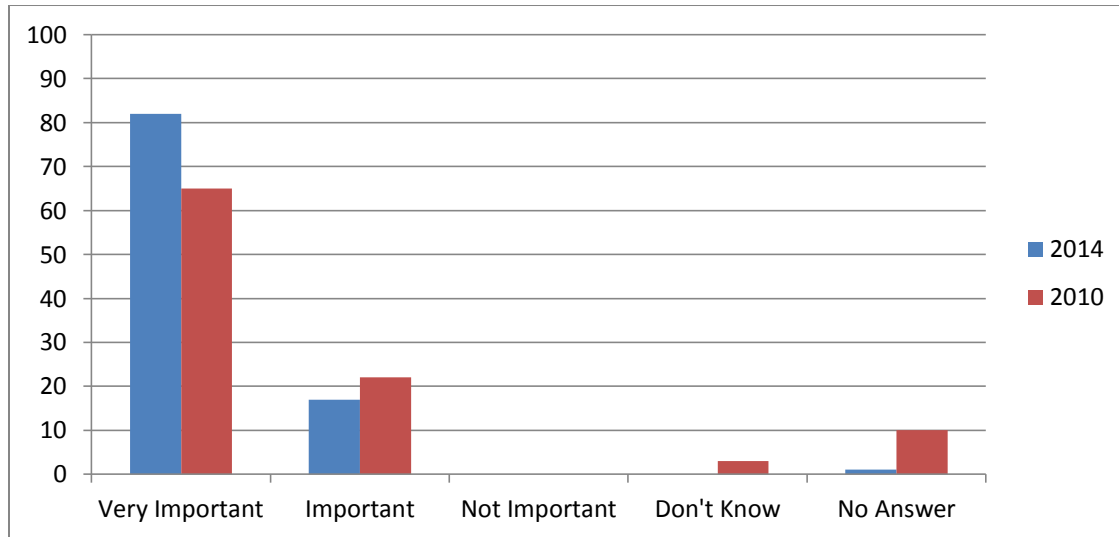
Cook Hospital Board – October 2014

Community Health Needs Assessment

What do you think are the most serious health concerns in our community? (select 3)

Health Concern	2014	2010	MN Average	USA Average
Alcohol/Substance Abuse	68%	63%	48%	56%
Cancer	53%	51%	60%	49%
Heart Disease	40%	41%	42%	27%
Obesity	33%	39%	42%	33%
Diabetes	27%	30%	28%	24%
Lack of Exercise	20%	16%		
Tobacco Use	16%	19%		
Mental Health Issues	11%	5%		
Underage Alcohol Use	8%	11%		
Lack of Access to Health Care	7%	5%		

How important are local health care providers and services (hospitals, clinics, nursing homes, assisted living, etc.) to the economic well-being of the area?



What are some benefits of having senior health services available locally? (Select all that apply)

Benefits of Local Senior Health Services	2014
Close to family and friends	89%
Maintain primary care doctor	68%
Support the local economy	54%
Facility's reputation for high quality care	51%
Cost effective	47%
Other	4%

With the purpose of keeping seniors cared for in our community, please rate how likely you would be to support an additional tax levy to keep the services of the nursing home in Cook?

Very Likely	22%
Likely	35%
Neutral	27%
Unlikely	8%
Very Unlikely	6%
No Answer	2%

57% Very Likely or Likely

14% Very Unlikely or Unlikely

National Rural Health Resource Center followed up with a phone survey. Their finding was that people who answered "Neutral" need further information before making a decision.

Aspects of Care	Excellent	Good	Fair	Poor
Food Service	15%	55%	17%	12%
Facility Appearance	28%	46%	17%	10%
Equipment/Technology	25%	55%	17%	3%
Social Services	2%	60%	15%	2%
Privacy/Confidentiality	40%	40%	12%	8%
Social Activities	29%	58%	10%	3%
Business Office/Financial	35%	49%	12%	4%
Rehabilitation	36%	52%	9%	3%
Friendliness of Staff	39%	54%	5%	1%
Care from Nursing Staff	41%	51%	8%	0%
Care from Physician	48%	42%	7%	2%

In the past 3 years, has anyone in your household received care in a hospital? If yes, which hospital does your household use the most for hospital care? (In 2010 respondents were only given the option “Duluth” with 17% responding.

In 2014 71% answered “yes”

In 2010 69% answered “yes”

Hospital	2014	2010
Cook Hospital	33%	32%
Essentia Health, Virginia	9%	8%
Fairview Range, Hibbing	8%	7%
St. Luke’s, Duluth	5%	
Other	5%	5%
Essentia Health, Duluth	5%	
VA	1%	

Preferred hospital for further hospitalization

Hospital	2014
Cook Hospital	36%
St Luke’s, Duluth	16%
Essentia, Duluth	13%
Fairview, Hibbing	10%
Other	9%
No Answer	8%
Essentia, Virginia	8%
VA	1%

Other summarized: Mayo 2.5%, Bigfork Valley 1.3%, Abbot Northwestern 0.8%, Lakewalk Surgery Center, U of Minnesota, St Cloud, Fairview Twin Cities 0.4% each

Location of Primary Health Care Provider

Location	2014	2010
Cook Hospital	63%	66%
Essentia Health, Virginia	23%	20%
Other	17%	14%
Fairview Range, Hibbing	12%	15%
Essentia Health, Duluth	10%	
St Luke’s, Duluth	10%	
VA	2%	
Scenic Rivers, Tower	1%	

Conclusions:

- Respondents within Cook's service area are seeking hospital and primary care services at a rate similar to other Minnesota rural areas
- Respondents acknowledged proximity to home is a factor when seeking health care services and identified Cook Hospital as the desired location for seeking specialty care services in the future
- Respondents recognize the major impact the health care sector has on the economic well-being of the community
- Respondents identified the overall quality of services provided at Cook Hospital and the Care Center as good to excellent
- There is support for local health care and many seek and appreciate receiving high quality care locally
- Cook Hospital is capturing the current market within the service area in hospital and primary care services
- Respondents are currently leaving the community for specialty care services; however, they identified that they would utilize Cook Hospital for specialty care services in the future

Recommendations:

- The Nursing Home receives positive ratings related to overall quality of care
- There is moderate support for endorsing a tax levy for the Nursing Home; however, providing more public education on the remodeling efforts and return on investment is recommended
- Community members recommend private rooms for residents
- If private rooms are not economically feasible, evaluate how double occupancy rooms can be leveraged or marketed as a programmatic feature as there were several descriptions of the culture in Cook as "caring and connected."
- The Nursing Home and the Hospital were noted as a hub for volunteerism and as a key location in the demonstration of Cook's culture
- Consider increasing awareness of specialty care services available locally as Cook's reputation and quality of care is positive

September Operational Results

Financial

- \$5.0M cash on hand
 - o 159.0 vs 167.2 Minnesota Rural Hospital Average
- \$1.4M current liabilities
 - o \$279K due to Medicare (payable after audits complete)
 - o \$5.3M long term debt
- Patient Service Revenue \$185K under budget
 - o Inpatient revenue 14% under budget
 - o Outpatient revenue 13% under budget
 - o Nursing Home revenue 14% under budget
 - Resident days 810 vs 805 budget but case mix was below budget
 - Resident payment issues significant in September
- Deductions from Revenue \$43K under budget
 - o Bad debt YTD \$131K vs \$402K in 2013
 - o Charity care YTD \$118K vs \$43K in 2013
- Other Operating Revenue \$28K under budget
 - o SISU (our electronic record keeping partnership) is in financial trouble & losses need to be reflected in our financial statement
- Expenses \$51K under budget
 - o Salaries & Benefits 2% under budget
 - o Purchased Services 4% under budget
 - o Supplies 5% under budget
 - o Depreciation 19% under budget
 - o FTE's 104.59 vs 103.81 budget – higher than normal due to Labor Day holiday
- Operating Margin (\$159K) vs (\$41K) budget
- Net Income \$352K YTD vs \$393K YTD budget & \$182 YTD in 2013
- Other Key Statistics
 - o 44.80 days in AR vs 55 day goal (44.80 is lowest in history)
 - o Collection agency 9.08% of collections
 - o 2012 Medicare Cost Report is currently being audited (\$58K due to Medicare)

ER Ultrasound was approved for purchase – half of expense covered by Lions Club donation

- Recommendation by Dr's Holmes & Vidor as essential in reducing our current 200 minute average time in ER

Teresa Debevec & Hospital Board agreed to CEO compensation package & employment contract

State of Minnesota will celebrate **Rural Health Day** Thursday, November 20, 2014